CHAPTER 1
An Overview of Prime Suite's Practice Management and Electronic Health Record Software

LESSON PLANS

Class Preparation: Teaching Focus and Resources
Chapter 1 explains the difference between practice management software functions and electronic health record (EHR) software functions. The advantages and disadvantages of an EHR are discussed. Standard EHR applications are described. The typical flow of information from appointment/registration through processing an insurance claim is explained. The use of Help features in software applications, including Prime Suite, is discussed.

Learning Outcomes

1.1 Describe Practice Management applications.
1.2 List the advantages and disadvantages of an electronic health record.
1.3 Describe EHR applications.
1.4 Chart the flow of information from registration through processing of the claim.
1.5 Use the Help feature in Prime Suite.

Class Presentation

LO 1.1 Describe Practice Management applications.

Slide 1-6	• Differentiate practice management software from electronic health record software
Slide 1-7	• PM and EHR using a single database
Slide 1-8	• Describe healthcare facilities, determination of lengths of visits, and insurance
Slide 1-9	• Other terms used to describe practice management
Slide 1-10	• Details the main applications of practice management software
Slide 1-11	• Use of the Master Patient Index and Patient List

LO 1.2 List the advantages and disadvantages of an electronic health record.

Slide 1-12	• Costs involved with EMR/EHR implementation
Slide 1-13	• Advantages of using an EHR • List advantages and discuss each
Slide 1-14	• Concerns about EHR implementation • Impact of implementation on providers and staff

Slide 1-15	• Sharing of health information
Slide 1-16	• Increasing popularity of electronic health records - Benefits to patients - Improved regulatory compliance - Global benefits

L.O. 1.3 Describe EHR applications.

Slide 1-17	• Detail clinical information collected through EHR functionality
Slide 1-18	• Prime Suite's EHR applications and functionality - Clinical documentation - ePrescribing - Information exchange - Access to clinical support - Mobile EHR applications - Point of care dictation

LO 1.4 Chart the flow of information from registration through processing of the claim.

Slide 1-19	• Flow of information from making appointment/registering through preparing a plan of care

L.O. 1.5 Use the Help feature in Prime Suite.

Slide 1-16	• Purpose of Help functions in software applications • How to access the Help feature in Prime Suite • Using the Help feature in Prime Suite

Teaching Tips

- Ensure students understand the key terms – suggest flash cards, Jeopardy game, etc.
- Prime Suite is both a PM and EHR software package.
- As a small group project, have students research Greenway Medical Technologies, Meditech, McKesson, Epic, Medisoft, Allscripts or other EHR and/or practice management software. What do they have in common, what is different? If any have demonstration videos, show in class or have small groups report on each.
- Or, as a project, have students research PM and EHR vendors on the Internet or through use of professional journals (*Journal of AHIMA, Advance Magazine, For the Record,* etc). Have them write a synopsis of one or two.
- Compare paper systems to electronic systems. Show students a paper record and an electronic record (particularly if the college has the AHIMA VirtualLab or use Practice Fusion's free EHR software).
- Have students discuss their experience with each system as a patient.
- Compare administrative (including demographic) to clinical information.
- Before covering the advantages and disadvantages, ask students to brainstorm each, then discuss.

- Have students discuss, from the viewpoints of both providers and patients, whether sharing health information between care providers and hospitals is a positive or a negative practice, based on what they have learned about an electronic health record thus far.
- Have students analyze the use of PMs and EHRs in their own career fields, including their role in its use as a health professional in that field.
- Discuss whether regulation is a necessity of electronic health record keeping.
- Of the various functions of an EHR, which is/are most beneficial, groundbreaking, timesaving, helpful to patient, helpful to staff.
- Discuss how the EHR will (or will not) improve patient care and patient outcomes.
- Complete the Check Your Understanding exercises as the text is covered.
- Assign SmartBook reading and LearnSmart modules to be completed as a homework assignment or during class time.
- Assign chapter review questions to be completed as a homework assignment or during class time (available in the Connect question bank or at the end of each chapter).
- Chapter test questions are available in Connect.

Connect Video Resources:

Student- and instructor-facing Connect, SmartBook, LearnSmart, and Prime Suite video tutorials can be found at –

http://www.mheducation.com/highered/health-professions-videos

ANSWER KEYS

Chapter 1

NOTE TO INSTRUCTORS: This chapter does not contain any Prime Suite exercises.

CHECK YOUR UNDERSTANDING ANSWER KEY

LO 1.1:

1. **Answer:** Both.
   Learning Outcome: 01.01
   Feedback: Prime Suite functions as practice management software as well as an EHR.
2. **Answer:** Identifying information, ICD-10-CM codes, CPT codes, and insurance information.
   Learning Outcome: 01.01
   Feedback: Billing claim forms need to show patient and insurance company information and any applicable ICD-10-CM/PCS and CPT codes.

LO 1.2:

1. **Answer:** No; they both have some security issues, but an electronic system may actually be safer since it is possible to track the user ID of every record that is viewed, all entries, and anything printed from the record and by whom.

Learning Outcome: 01.02
Feedback: An electronic system is safer than a paper-based one.

2. **Answer:** Initial costs. Long term, there are actually cost savings compared to the current paper/manual systems once training has taken place and staff members become more comfortable with the new processes.
Learning Outcome: 01.02
Feedback: Startup costs are significantly higher with EHRs versus paper-based records because they require research and development by software companies, allocation of human resources for planning and training, and the additional costs of hardware and software.

LO 1.3:

1. **Answer:** Allows for the sharing of clinical information between providers or other parties who have a need to know the information.
Learning Outcome: 01.03
Feedback: The Greenway Exchange function allows users to share, or exchange, information.
2. **Answer:** The speech recognition technology available in Prime Suite.
Learning Outcome: 01.03
Feedback: Prime Speech is a speech-recognition tool.

3a. **Answer:** Greenway Exchange
Learning Outcome: 01.03
Feedback: Greenway Exchange is the application used to share information between Prime Suite at one location and the EHR at another location.

3b. **Answer:** Prime Speech
Learning Outcome: 01.03
Feedback: The Prime Speech application allows providers to dictate their notes, without the need for a transcriptionist to transcribe every word; instead the transcriptionist or the provider him/herself becomes an editor to ensure accuracy of the documentation.

3c. **Answer:** Scheduling
Learning Outcome: 01.03
Feedback: Making appointments electronically, just as it was on paper, is known as scheduling.

3d. **Answer:** EHR
Learning Outcome: 01.03
Feedback: Since drug allergies are clinical in nature, this is part of the electronic health record rather than the practice management application.

3e. **Answer:** Prime Speech
Learning Outcome: 01.03

Feedback: The dictation application that can recognize words as they are being dictated and transcribe them in real time is known as Prime Speech.

3f. **Answer:** PM
Learning Outcome: 01.03
Feedback: The Practice Management application houses the listing of all patients ever seen in a practice.

LO 1.4:

1. **Answer:** appointment scheduling personnel make patient's appointment; front desk checks-in the patient; nursing/clinical support sees patient; clinical staff/care provider examines patient; patient is processed at check-out desk; business office/billing processes charges
Learning Outcome: 01.04
Feedback: The flow of information begins with appointment scheduling, moves through front desk check-in, nursing/clinical support, care provider, and check-out, and finished with billing; the clinical staff and care provider are cycled back to as necessary.

2. **Answer:** Only in cases where the provider ordered diagnostic procedures, such as x-rays or laboratory tests.
Learning Outcome: 01.04
Feedback: The clinical documentation process is only repeated if extra procedures were ordered for a patient.

LO 1.5:

1. **Answer:** From the Help tab on the menu bar, accessible from any screen in the program.
Learning Outcome: 01.05
Feedback: You can access the Help feature from any screen in the Prime Suite program.

2. **Answer:** Two; searching by topic or using the User's Guide.
Learning Outcome: 01.05
Feedback: You may search for a topic or look it up in the User's Guide.

3. **Answer:** Access the Help feature from the screen you are on; enter "add allergy" into the search box **or** look up "add allergy" in the topic list. There, you will find the directions you are looking for.
Learning Outcome: 01.05
Feedback: You find the directions you need by either looking up "add allergy" or searching for the information.

END-OF-CHAPTER ANSWER KEY

Applying Your Skills:

1. **Answer:** Answers will vary; a student's response should list relevant EHR systems and the summaries should highlight the important facets of each program.
   Learning Outcome: 01.01; 01.03
   Feedback: There are a wide variety of PM and EHR programs available; your search and summaries should have allowed you to note differences and important capabilities of a few of them.

Matching:

1. **Answer:** i
   Learning Outcome: 01.02
   Feedback: Interoperability allows syncing of multiple, unrelated functions or systems.
2. **Answer:** h
   Learning Outcome: 01.05
   Feedback: The User Guide is a feature of Prime Suite that allows staff to search for help using the software.
3. **Answer:** g
   Learning Outcome: 01.03
   Feedback: The person who performs specialized healthcare services is called a provider.
4. **Answer:** j
   Learning Outcome: 01.04
   Feedback: Check-in is the first step in the patient encounter.
5. **Answer:** b
   Learning Outcome: 01.01
   Feedback: Electronic submission allows an office to submit claims via a computer rather than using paper.
6. **Answer:** a
   Learning Outcome: 01.01
   Feedback: An encounter form is generated at the completion of an office visit, a portion of which details the patient's diagnosis, procedures and services performed, and the charge for each procedure/service.
7. **Answer:** f
   Learning Outcome: 01.03
   Feedback: Point of care procedures take place during the time of care, not at a remote location or at a later time.
8. **Answer:** d
   Learning Outcome: 01.01
   Feedback: Specialized software that performs critical functions in a medical office is called practice management software.

9. **Answer:** c
   Learning Outcome: 01.03
   Feedback: Speech recognition technology digitally transcribes spoken words.
10. **Answer:** e
    Learning Outcome: 01.01
    Feedback: Demographics refer to documented patient information such as age, sex, and race.

Multiple Choice:

1. **Answer:** c
   Learning Outcome: 01.01
   Feedback: EMR software contains a clinical documentation component, while PM software does not.
2. **Answer:** d
   Learning Outcome: 01.03
   Feedback: Prime Suite integrates with each of the listed functions.
3. **Answer:** a
   Learning Outcome: 01.01
   Feedback: A patient only needs to be entered into the patient list one time.
4. **Answer:** a
   Learning Outcome: 01.02
   Feedback: Start-up costs are necessarily high due to the cost of software, hardware, provider and staff training, and loss of productivity. ,
5. **Answer:** c
   Learning Outcome: 01.04
   Feedback: At the time the patient is registered, he/she is asked to look over the demographic information and whether any changes need to be made.
6. **Answer:** b
   Learning Outcome: 01.03
   Feedback: Clinical documentation appears in the form of a progress note.
7. **Answer:** d
   Learning Outcome: 01.01
   Feedback: *Superbill* is another term for an encounter form.
8. **Answer:** a
   Learning Outcome: 01.01
   Feedback: The UB-04 form is used to bill inpatient claims; the CMS-1500 is used for outpatient claims submission.
9. **Answer:** a
   Learning Outcome: 01.02
   Feedback: Some medical professionals are worried that an electronic system of record-keeping will not be secure, so they are hesitant to adopt EHR systems.

10. **Answer:** a
    Learning Outcome: 01.05
    Feedback: The User Guide is accessed through the Help feature.
11. **Answer:** b
    Learning Outcome: 01.03
    Feedback: A patient's plan of care is one piece of clinical information collected through an EHR.

12. **Answer:** c
    Learning Outcome: 01.02
    Feedback: Manual record systems do not readily allow for interoperability.

Short Answer:

1. **Answer:** Appointment scheduling; Front desk/Check-in; Nursing/Clinical support; Care provider; Check-out desk; Business office/billing.
   Learning Outcome: 01.04
   Feedback: The flow of information begins when a patient makes an appointment, progresses through check-in, nursing/clinical support, care provider, and check-out, and ends with the business office and billing.
2. **Answer:** Answers may vary, but points such as speed of data transfer, lower long-term costs, eliminating handwriting issues; ability to keep a comprehensive record of patient care and history, and contributions to research and global health care should be listed.
   Learning Outcome: 01.02
   Feedback: There are many advantages to EHRs, such as lower long-term costs, the ability to keep a comprehensive record of patient care, and contributions to research and global health.
3. **Answer:** Answers may vary, but include points such as entering each patient seen into a master list, scheduling appointments, assigning ICD-10-CM/PCS and CPT codes, completing billing claim forms, and sending insurance claims to insurance carriers.
   Learning Outcome: 01.01
   Feedback: Practice management software is specially-designed software for use in a medical office to carry out the following applications: entering each patient seen into a master list, scheduling appointments, assigning ICD-10-CM/PCS and CPT codes, completing billing claim forms, and sending insurance claims to insurance carriers.
4. **Answer:** Prime Research.
   Learning Outcome: 01.03
   Feedback: Prime Research allows practitioners to access clinical trials and research.
5. **Answer:** You could either go to the specific section of the User Guide that addresses patient registration or enter "patient registration" in the search box.
   Learning Outcome: 01.05

Feedback: Consulting the User Guide or searching for a term are two ways to use Prime Suite's Help feature.

6. **Answer:** An appointment is made.
   Learning Outcome: 01.04
   Feedback: Scheduling an appointment is the first step in patient flow.
7. **Answer:** Because insurance gets billed separately for each visit, or encounter.
   Learning Outcome: 01.01
   Feedback: Insurance companies are billed every time a patient comes into a healthcare facility.
8. **Answer:** iPhone, iPod touch, and iPad.
   Learning Outcome: 01.03
   Feedback: The iPhone, iPod touch, and iPad currently allow for mobile EHR accessibility.
9. **Answer:** Interoperability is the means of using a single database to perform different functions, many times with different systems from various locations being able to share information through a single exchange (such as an HIE); it integrates the flow of information. Examples will vary.
   Learning Outcome: 01.02
   Feedback: Interoperability allows multiple unrelated systems to share information and perform different functions through a single database.
10. **Answer:** The process of submitting insurance claims for payment via practice management software; no paper is generated, submission is quick and accurate, it falls under Meaningful Use compliance, and many insurance carriers will no longer accept paper claim submissions.
    Learning Outcome: 01.01
    Feedback: Submitting claims via a computer, as opposed to mailing in paper forms, is quick, accurate, and compatible with Meaningful Use compliance.
11. **Answer:** Entering patients into a master list; appointment scheduling; code assignment; billing form completion; claim submission.
    Learning Outcome: 01.01
    Feedback: Typical practice management software allows healthcare professionals to enter patients into the master list, schedule appointments, assign codes, and perform billing functions.
12. **Answer:** Start patient tracking.
    Learning Outcome: 01.04
    Feedback: Once a patient has completed their check-in process, the electronic tracking of the patient begins.

<u>Applying Your Knowledge</u>:

1. **Answer:** You might stress the benefits of moving to an electronic system, and ensure your colleagues that EHRs will *not* put them out of a job. Something like "You know, moving to EHRs will help us see more patients in a given day, provide them with better care, since we have their whole medical history at our fingertips, and access the latest research and clinical

information about their conditions. Also, since we will be spending less time doing paperwork, you can have more interaction with the "human side" of the patients, which is why most of us went into health care in the first place! And who knows – once these EHRs really get up and running, and we are spending less on storage and materials, we might even get a raise!"
Learning Outcome: 01.02
Feedback: Moving to an electronic system will actually improve the jobs of healthcare professionals and will free staff members up to interact with patients and research healthcare trends and research.

2. **Answer:** (Answers may vary, but should be similar to this.) An electronic health record improves patient care by improving the level of detail of clinical documentation of the care provider. In addition, it allows clinicians to utilize data to improve care through access to studies and data through clinical decision support sites; allows for the exchange of pertinent health information between providers in a timely manner; takes up far less physical space than filing cabinets/units; less chance of lost records; legibility is no longer an issue; and coding, billing, tracking of claims is more efficient since the health record and billing records share pertinent information.
Learning Outcome: 01.01; 01.02; 01.03; 01.05
Feedback: An electronic health record improves patient care by improving the level of detail of clinical documentation of the care provider. In addition, it allows clinicians to utilize data to improve care through access to studies and data through clinical decision support sites; allows for the exchange of pertinent health information between providers in a timely manner; takes up far less physical space than filing cabinets/units; less chance of lost records; legibility is no longer an issue; and coding, billing, tracking of claims is more efficient since the health record and billing records share pertinent information.

3. **Answer:** Denise will get checked in by the receptionist, which will start her patient tracking. After any copay is collected, she will be sent to an exam room. An MA will do an initial session, taking vital signs and asking questions, then the provider will come in to conduct the exam. Once the provider has finished and entered the data into Denise's EMR, Denise will proceed to the check-out desk for final instructions. Then, her Superbill will be sent to the billing office for claims processing, and Denise will receive her insurance information directly from her insurance company.
Learning Outcome: 01.04
Feedback: Denise will be guided through the proper patient flow, from check-in to her insurance company finalizing payment of her services.

4. **Answer:** Physicians can access the patient's entire medical record to see if anything like this has happened in the past, or any prior medical history that might lead to her abdominal pain. In addition, doctors can use the clinical/research sections of the EHR to investigate clinical decision support information regarding potential risk factors, tests that should be ordered, etc.
Learning Outcome: 01.02; 01.03

Feedback: Since EHRs contain a patient's entire health record, physicians can reference past history for the patient, and may use the clinical research functions of the EHR to investigate similar patient cases.

5. **Answer:** In a paper-based office, MAs and receptionists will spend a large part of time writing reports, filing charts, and double-checking data. They may also spend a large part of time on the phone with pharmacies, patients, and insurance companies. Physicians will spend time writing out prescription requests and diagnostic test recommendations, and speaking with patients about health care information. In an electronic office, filing and report writing is drastically reduced, as all of the information is catalogued in the practice management database. ePrescribing eliminates the need for a paper script, so physicians can see more patients in a day. Also, a patient can be provided with a printout of any health information they might want/need, so they can read it at home at their leisure and have time to process the information.
   Learning Outcome: 01.01; 01.02; 01.03
   Feedback: In a paper-based office, much time is spent on documentation and patient education, while the electronic office is more efficient and orderly due to the automation of many tasks.

6. **Answer:** You could offer to help them with issues they are finding with the software; ask your supervisor if it would be alright to do some quick training sessions; and discuss all of the ways an electronic office will make your coworkers' lives easier in the long run.
   Learning Outcome: 01.01; 01.02; 01.03; 01.04; 01.05
   Feedback: Remaining positive and ensuring that your coworkers feel supported are the most important keys to easing their struggles.