

BLENDED CAPITATION ENROLMENT AND ROSTERING PROCESS

The process for **patient rostering** for a Blended Capitation Group involves two steps:

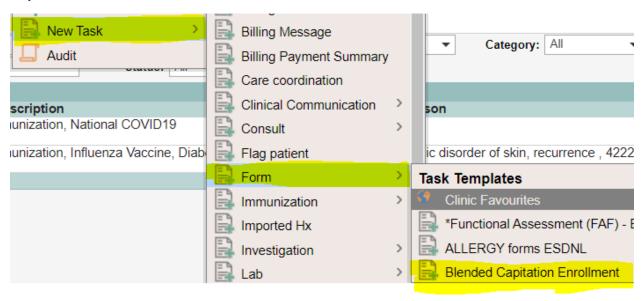
- 1. Complete a Blended Capitation Enrollment Form
- 2. Select the Blended Capitation Checkbox and enter a Rostering Fee Code in the Billing window

1. Blended Capitation Enrollment Form

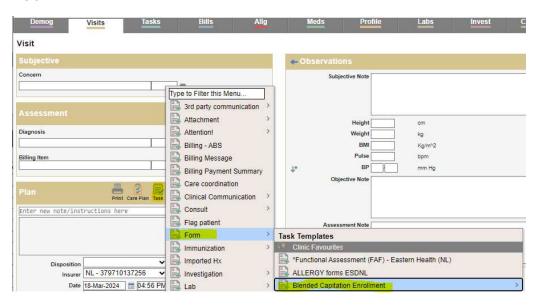
Each patient to be rostered in the EMR requires a completed Blended Capitation Patient Enrollment Form. The form is located under the task category of Form. The Form is called **Blended Capitation Enrollment**. This Form can be completed by clerical staff during the process of a check-in or over a virtual call with the physician? The patient does not have to sign the Enrollment Form. The patient will be asked whether they wish to enroll in the Blended Capitation group. It will be a verbal agreement with the patient.

Creating and completing this task can be done from the Daysheet, from the Visit, or from the Billing window.

Daysheet

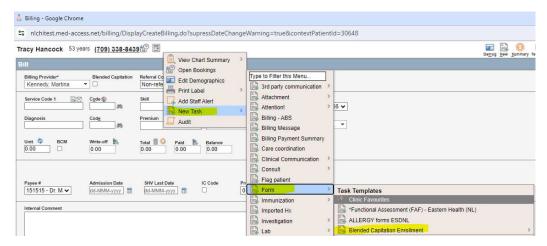


Visit



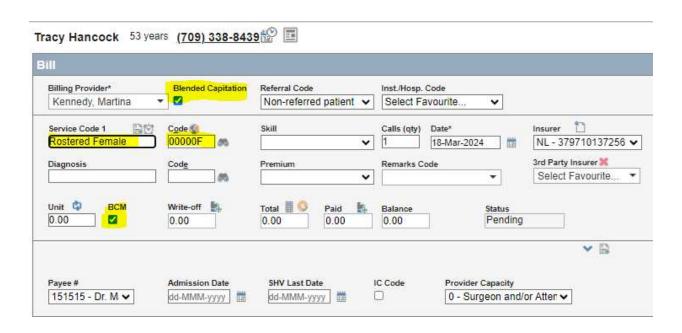
Billing Window

Right click at the top of the screen beside the patients name and select New Task, Category of Form, and then select the Blended Capitation Enrolment form.



2. Blended Capitation Checkbox and Rostering Fee Code

Once the Patient Enrollment Form is completed, roster the patient by checking the Blended Capitation checkbox in the upper portion of the billing window. Enter the appropriate Rostering Fee Code (see list below) to communicate to MCP that a patient has been rostered. Approve the bill for communication of the Rostering Fee Code to MCP:



The Rostering Fee Code can be entered at the same time as the routine bills that need to be submitted for the patient visit or outside of the visit.

This zero-valued fee code will go to MCP and the bill will remain on the chart for reference. The patient's rostering process is complete.

ROSTERING FEE CODES

These three fee codes are for communication of "rostering" status and are valued at "0" dollars:



Note:

If a patient leaves the Blended Capitation group, a de-rostered fee code should be entered and approved to communicate to MCP that they have left the group. Billing staff and providers will update MCP on the patient rostering status by entering the appropriate fee code.

