

eDOCSNL

ELECTRONIC MEDICAL RECORD

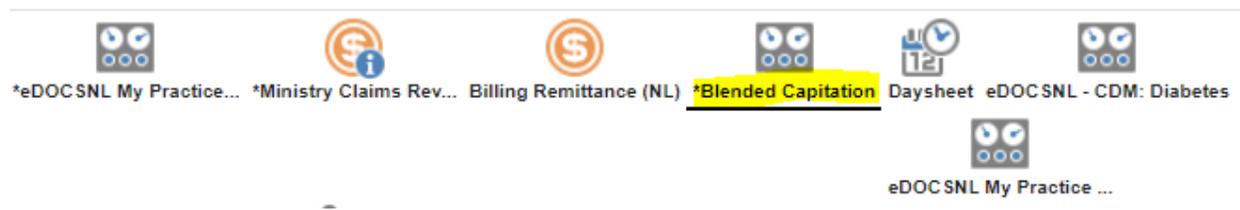
BLENDING CAPITATION BATCHING ROSTER FEE CODES

The roster fee codes can be batched based on the enrollment form being completed on a patient chart.

The enrollment form completion can be started prior to Blended Capitation beginning in your practice. The fee codes cannot be entered until Blended Capitation features are turned on by TELUS. The day for the turn on of the features is decided with the Blended Capitation group, Family Practice Renewal and eDocsnl EMR Program. TELUS is informed of the date.

Once the Blended Capitation features are turned on, a report can be run in the EMR to identify the patients who have an enrollment form completed but do not have the roster fee code submitted. The report can be run for male, female and other and a batch update of the appropriate rostering fee code could be applied.

The report is found on the Blended Capitation Dashboard. Open up the Blended Capitation Dashboard at the top of the main screen of the EMR.



If you do not see the dashboard, right click on a current dashboard icon at the top of the screen and slowly move your mouse to the selection of **open dashboard** and then from there you should see “Blended Capitation” Dashboard in the list of dashboards. Select it from the list of dashboards. Return to the main dashboard and select the grey heart in the upper left hand corner. You should now see the Blended Capitation dashboard at the top of the main screen.

On the dashboard, you will select the following widget at the top center of the dashboard called

My Patients with NO Rostered bill but form Completed.

My Patients with NO Rostered Bill but Form Completed	
	Count
Mandy Bull	4
Total	4

Select the title of the widget which is a hyperlink. You will be navigated to a Practice Management Reporting Screen shown below.

Practice Mgmt Reporting

Criteria Unmask

Template: BCM Form Complete

Demographics

Sex: [Dropdown]

Status: Active

Primary Provider: Bull, Mandy

Profile

Visits

Task

Category: Form

Type: Blended Capitation

Task Date: All

Status: Complete

On Waitlist?: No

Observation

Medications

Allergy

Goals

Billing

Billing Item: Rostered Male 00000M Starts

or Rostered Female 00000F Starts

or Rostered Other 00000O Starts

Bill Date: 05-Apr-2015

Reports

Type: Patients List

Field Filter: Select Template...

Searching

Type: New Search Search

Services

In the **Sex** field –select male female or other for your first report. You will be running three separate reports.

On the right side of the window select **Search**

You will see a list of patients that meet the parameters of the report:

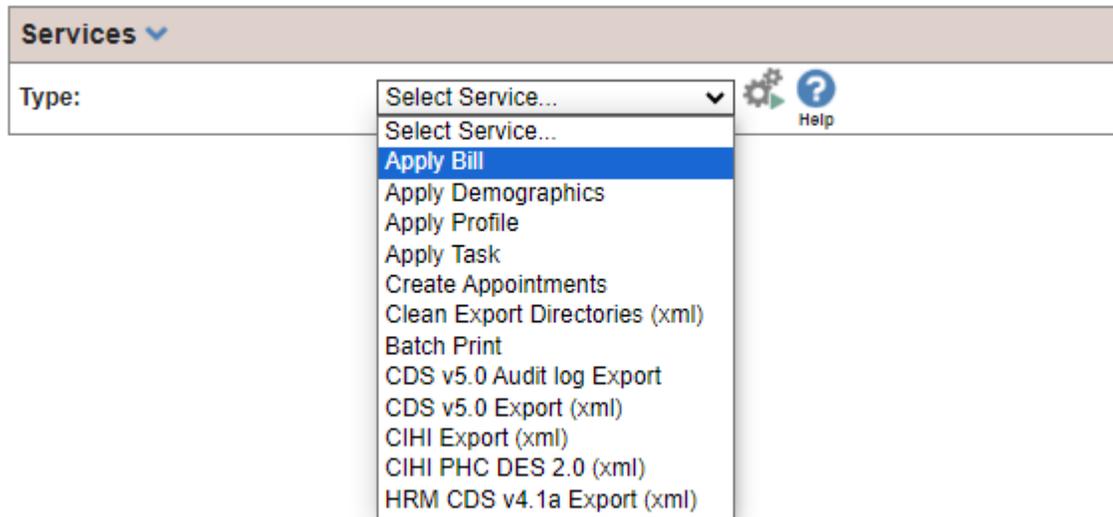
Searching

Type: New Search Search Limit 25

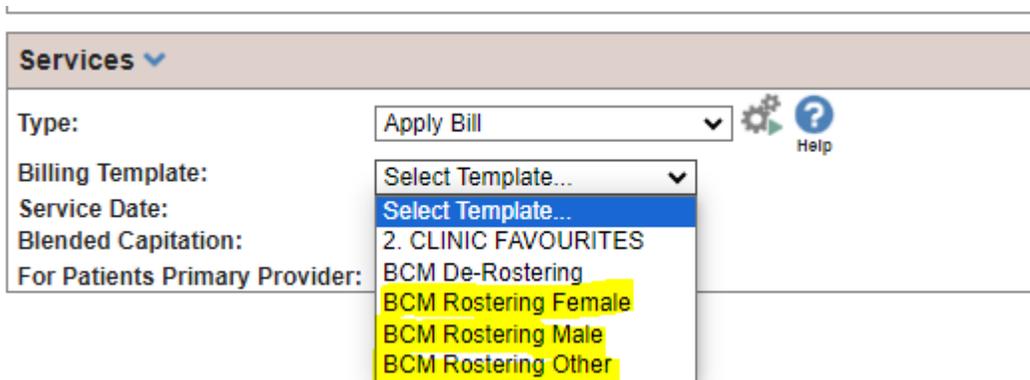
<input checked="" type="checkbox"/>	Patient Name	Ins #	Birthdate	Sex	Provider
<input checked="" type="checkbox"/>	Bailey , Tanya	123456789098	25-Oct-2020	F	M. Kennedy
<input checked="" type="checkbox"/>	DAVIS , LESA	359751297995	08-May-1975	F	M. Kennedy
<input checked="" type="checkbox"/>	Rangel , Lisa	529571596152	07-Jun-1957	F	M. Kennedy

Export options: Excel | PDF | RTF

Below this, you will see a **Services** section. This is where you will apply the appropriate rostering fee code to the patients charts who have the enrollment form completed. Select **Apply Bill**.



You will now see a list of templates in the billing template drop down as shown below. Select the appropriate billing template. For example if you ran the report for females then select the Billing template called BCM Rostering Female.



**** Note: if you have patients who are in the list as females based on the patient demographics BUT are transitioning you would uncheck the box in front of their name on the list and not apply the female billing template for these particular patients. You would go into their chart and apply the fee code for other. The same would apply for the report of males in the practice.**

Once you have selected the template:

- Select Apply in the Blended Capitation dropdown menu.
- Check the box for “For Patients Primary Provider”.
- Click the gears icon next to Apply Bill.

Services ▾

Type: ▾   Help

Billing Template: ▾

Service Date: 

Blended Capitation: ▾

For Patients Primary Provider:

Once you have run the reports for male, female, and other and created the pending bills by clicking the gear icon, you would then proceed to the Ministry Dashboard. The bills need to be approved for MCP to pick them up just like the bills before Blended Capitation. Review pending bills from the widget **All Pending Claims**.

All Pending Claims	
Grouped by: Attending Provider	Statistic: Count Limit: All
Mandy Bull	Count 4
Total	4

You can now approve the pending bills by reviewing each one or bulk approving.

IMPORTANT NOTE:

If you batch roster fee codes and your patient has an expired MCP card, the bill will be created as a Patient Pays bill in pending status and therefore will not be on your Ministry Claims Review dashboard in Pending Claims. You will find these bills under the My Bills icon, change Insurer to Private/Patient Pays, and status of Pending.



You will need to ensure the MCP is updated through the Client Registry search, then edit the bill to change the Insurer back to Ministry, and then approve.

