



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Referred Care Information System (BMC)

Addendum to User Manual

Version 4.0 Patch 7 April 2011

Office of Information Technology (OIT) Division of Information Resource Management Albuquerque, New Mexico

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1.0 Introduction

1.1 Summary of Changes

- Addition of Referred Care (RCIS) component to Electronic Health Record (EHR) Application.
- Additional server side components and routines for the new RCIS-EHR Interface.
- New Report–Added report option to print the referrals that do not have a C32 printed.
- New Vendor Option–Addition of the vendor fax and e-mail address to the Edit Vendor option.
- New General Retrieval Options–Added ability to search by a patient's veteran status

1.2 Patch 7 (RPMS Updates)

1.2.1 Edit Vendor Options–E-mail Address and Fax Number

Two additional fields were added under the **VEN–Provider/Vendor data** menu option. These can be used to enter and edit a vendor's e-mail address and fax number.

The fax number will be available for display on a Contract Health Service (CHS) Purchase Order (refer to the ACHS version 3.0 patch 19 documentation for more information)

Note: Editing vendor records is a supervisory function in the MIS. Area Offices should assume and maintain the function of vendor updates for area-wide standardization.

1. Select VEN-Provider/Vendor data

```
*
                INDIAN HEALTH SERVICE
                                      *
         *
            REFERRED CARE INFORMATION SYSTEM
                                      *
         *
                VERSION 4.0, Patch 7
         DEMO INDIAN HOSPITAL
                    MAIN MENU
DE
    Data Entry ...
RPT
    Print Reports ...
MGT
    RCIS Management ...
```

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SPEC RCIS Special Print Menu ... VEN Provider/Vendor data Select Referred Care Information System Option: VEN

Figure 1-1: The VEN option

2. Enter the name of the vendor to update.

	PROVIDER/VENDOR UPDATE
* * * * * * * * * * * * * * * * * * * *	***************
Enter Provider/Vendor:	DEMO MD, VENDOR

Figure 1-2: Entering the vendor name

3. Enter Y and field number 11 to add or edit the vendor's e-mail address.

PROVIDER	/VENDOR UPDATE
<pre>************************************</pre>	<pre>************************************</pre>
9) Medicare Provider: No entry <mark>11) E-Mail:</mark>	10) BPA: NONE 12) DUNS:
<pre>**** MAILING/BILLING ADDRESS **** 13) Street: 123 STREET AVE City: ALBUQUERQUE State: NEW MEXICO Zip: 87111 Phone: Fax: Attn:</pre>	**** PROVIDER LOCATION ADDRESS **** 14) Street: City: State: Zip Code:
15) Vendor Type: PHYSICIAN 17) Specialty: ************************************	16) Fed/Non-Fed: 18) Geographic Loc: ************************************
Want to Edit? NO// YES	
Change Which Item: (1-17): 11 <mark>E-MAIL ADDRESS: <u>PROVIDER.DEMO@IHS.GOV</u></mark>	

Figure 1-3: Entering the vendor's e-mail address

4. Enter **Y** and field number **13** to add or edit the vendor's fax number.

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9) Medicare Provider: No entry 10) BPA: NONE 12) DUNS: 11) E-Mail: **** MAILING/BILLING ADDRESS **** **** PROVIDER LOCATION ADDRESS ****
13) Street: 123 STREET AVE 14) Street:
City: ALBUOUEROUE City: City:ALBUQUERQUECity:State:NEW MEXICOZip:87111State:Phone:Fax:Zip Code:Attn:Extended Attn: 15) Vendor Type: PHYSICIAN 16) Fed/Non-Fed: 18) Geographic Loc: Attn: ***** Want to Edit? NO// YES Change Which Item: (1-17): 13 MAILING ADDRESS-STREET: MED ARTS BLDG, 10TH & HORNE Replace MAILING ADDRESS-CITY: TOPEKA// MAILING ADDRESS-STATE: KANSAS// MAILING ADDRESS-ZIP: 66606// MAILING ADDRESS-ATTENTION: MAILING ADDRESS-PHONE: MAILING ADDRESS-FAX: 505-888-8181

Figure 1-4: Entering the vendor's fax number

1.2.2 General Retrieval Report–Veteran Option

The Veteran option has been added to the list of selection items to search, sort by, and print on a General Retrieval report. (Refer to Option 96 in Figure 1-5.)

RCIS	GENERAL RETRIEVAL	A	pr 05, 2011 09:13:49		Page: 2 of 3			
	RE	FERRA	L Search Menu		-			
Refe	Referrals can be selected based upon any of the following items. Select							
as m	any as you wish, in an	y ord	ler or combination. An	(*)	asterisk indicates			
item	s already selected. T	o byp	ass screens and select	all	referrals hit Q.			
+								
15)	Closed By User	49)	Alt Res Ltr Date	83)	Alternate Resource-C			
16)	Date User Created	50)	Alt Res Ltr Dissemin	84)	Alt Resource Date			
17)	Date Last Modified	51)	Alt Res Ltr User	85)	Alt Resource User			
18)	Type of Referral	52)	Expected Begin DOS	86)	72-Hr Notification			
19)	Requesting Facility	53)	Best Avail Begin DOS	87)	72-Hr Date			
20)	Requesting Provider	54)	Actual Begin DOS	88)	72 - Hr User			
21)	Status of Referral	55)	Best Avail END DOS	89)	W/I Medical Priority			
22)	Next Review Date	56)	Actual END DOS	90)	W/I Med Priority Use			
23)	Case Manager	57)	Expected End DOS	91)	W/I Med Priority Dt			
24)	Inpatient/Outpatient	58)	Best Avail Inpt LOS	92)	Sec. Prov Name			
25)	Primary Vendor	59)	Actual Inpt LOS	93)	Sec. Prov Appt Dt			
26)	IHS Facility Refer T	60)	Best Avail DRG	94)	Sec. Prov User Creat			
27)	Clinic Referred To	61)	Final DRG	95)	Sec. Prov Init Dt			
28)	To Specific Provider	62)	Date Dsch Summary Re	96)	Veteran			
+	Enter ?? for mor	e act	ions					
S	Select Item(s)	+	Next Screen Q) (Quit Item Selection			
R	Remove Item(s)	-	Previous Screen E	E	Exit Report			
Sele	Select Action: S//							

Figure 1-5: General Retrieval Report Options

1.2.3 New Report–Active Referrals without a Printed C32

This patch includes an additional report that provides a list of referral documents for which a C32 Summary of Care Record has not been printed. This was added to assist with a Stage 1 Meaningful Use requirement for eligible providers (EPs), eligible hospitals, and critical access hospitals (CAH) to provide a Summary of Care Record (C32 report) for patients referred outside of the issuing Indian Health Service (IHS) facility.

This requirement is one of 10 available menu set objectives as defined for EHR Certification. Please visit the official Web site for a complete list of these and other requirements (<u>http://www.cms.gov/ehrincentiveprograms/</u>).

- 1. The new Report is located under the **RPT–Print Reports** menu option.
- 2. Select ADM-Administrative Reports

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Figure 1-6: The ADM option

3. Select ARC-Active Referrals without a Printed C32 from the menu options.

```
*****
                       INDIAN HEALTH SERVICE
               *
                   REFERRED CARE INFORMATION SYSTEM
               *
                    VERSION 4.0, Patch 7
               DEMO INDIAN HOSPITAL
                        Administrative Reports
  ARD Active Referrals by Date
  ARR Active Referrals by Referred To
  ARP
       Active Referrals by Requesting Provider
  CHPD CHS Paid
        Active Referrals without a Printed C32
  ARC
  CHSR CHS Status Report for Referrals
  INHC Tally of In-House Referrals by Clinic
  INHP Tally of In-House Referrals by Requesting Provider
  INHR In-House Report for Active Referrals
  OUT Referrals at an Outside Facility (Call In's)
  RRR Referral Review Report - By Time Period
  RRRF Referral Review Report - By Facility/Time Period
  SRR Secondary Referral Report
Select Administrative Reports Option: ARC Active Referrals without a
Printed C32
```



4. Select a beginning date range to view referrals without a printed C32 record.

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Report will include Primary and Secondary Referrals. Enter beginning Referral Date: 3/1/2010 (MAR 01, 2011) Select one of the following: P PRINT Output B BROWSE Output on Screen Do you wish to: P// RINT Output DEVICE: HOME// VIRTUAL TERMINAL Right Margin: 80//

Figure 1-8: Selecting a beginning date range

5. The report will display the Referral document number, Patient Name, and the Date the referral was initiated.

********* CONFIDENTIAL PATIENT INFORMATION ******** DEMO INDIAN HOSPITAL					
Page 1 A	Page 1 ACTIVE REFERRALS WHERE A C32 HAS NOT BEEN PRINTED BEG DATE: MAR 01, 2011 END DATE: MAR 10, 2011				
REFERRAL #	PATIENT NAME	REI	FERRAL DATE		
5059011100132	DEMO,PATIENT L	LADY	3/1/11		
5059011100133	DEMO, PATIENT L	LADY	3/1/11		
5059011100134	DEMO,PATIENT R	REFERRAL	3/1/11		
5059011100134A1	DEMO,PATIENT R	REFERRAL	3/1/11		
5059011100135A1	DEMO,PATIENT R	REFERRAL	3/1/11		
5059011100136	DEMO,PATIENT R	REFERRAL	3/1/11		
Press any key to	continue:				



***	****** CONFIDENTIAL PATIE DEMO INDIAN	NT INFORMATION ********* HOSPITAL
Page 2		
A	CTIVE REFERRALS WHERE A C3	2 HAS NOT BEEN PRINTED
	BEG DATE: MAR 01, 2011 EN	D DATE: MAR 10, 2011
REFERRAL #	PATIENT NAME	REFERRAL DATE
5059011100135A2	DEMO,PATIENT REFERRAL	3/1/11
5059011100136A1	DEMO, PATIENT REFERRAL	3/1/11

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5059011100140	DEMO, PATIENT	REFERRAL	3/1/11
5059011100141	DEMO,PATIENT	REFERRAL	3/1/11
5059011100142	DEMO,PATIENT	REFERRAL	3/1/11
5059011100143	DEMO, PATIENT	REFERRAL	3/1/11
Press any key to	continue:		

Figure 1-10: Patient information displays (Page 2)

1.3 Referred Care Component in EHR

1.3.1 Referral Tab–Patient Centric

The EHR–Referred Care component is for the clinical management of referred care to in-house services, other IHS facilities, and outside contract providers. This information is stored in the RPMS Referred Care Information System (RCIS) application and is also used by CHS. To access this tab, log into the EHR application and select a patient in the Patient Chart.

1.3.1.1 Add New Referral

The following steps show you how to create a new referral. A patient must be selected to begin this process. There are two options available for creating a new referral:

- Add New Referral–Information is entered on a blank form.
- Add Mini Referral–Form fields are prepopulated based on the selected referral template.
- 1. Open the **Referral** tab within the **Patient Chart** area.

IHS EHR	TUCSON DEVELOPME	NT SYSTEM						
lser Patient Tools	Help							
Patient Chart	Communication	RPMS CIHA	Intranet Microme	dex E	-Mail RCIS			
Demo,Patient Ref 323289 22-Fet	erral ⊩1970 (41) M	Visi DEM	t not selected 10.PROVIDER A		Prima	ny Care Team Unassigned	No Postings	3 3
Add Mni Referral Add Referral Edit Referral Add Secondary Referral Print C32 for Referral								
Referral Date From	Monday , February 22, 2	1010 💌 To Tuesday	, February 22, 2011 💌	[
Referral Date	Purpose	Referring Provider	Referral Number	CHS Status	Facility Referred To	Appointment Date/Time	C32 Printed By	C32 Print Date
•								
Notifications Cov	rer Sheet 🛛 Triage 🖉 Wellne	ss Notes Orders Me	edications Labs Prob.	POV Services	Reports D/C Summ C	Consults Privacy W	CM ASQ Suicide	Referrals
DEMO, PROVIDER	DEMO.OKLAHOMA.IHS.	GOV DEMO INDIAN HOSE	PITAL 22-Feb-2011 13:44					

Figure 1-11: Referral Tab in Patient Chart

- 2. To use an RCIS referral template, click **Add Mini Referral** located below the patient information (yellow box). A list of referral templates from the RCIS application will be displayed in a dialog box.
- 3. Select a referral template and click **OK** to continue to the data entry form.

THS-EHR TUCSON DEVELOPMENT SYSTEM					
Patient Tools nelp Patient Chart Communication RPMS	CIHA Intranet Micromedex E-Mail I				
Demo,Patient Referral 323289 22-Feb-1970 (41) M	Visit not selected	Primary Care Team Unassigned No Postions			
Add Mini Referral Add Referral Edit Referral Add Secondary Referral	CARDIOLOGY CT SCAN FT EVEN ASSES				
Referral Date From Monday , February 22, 2010 💌 To	GENETIC TESTING ULTRA SOUNDS mammoram				
Referral Date Purpose Referring Prov		Appointment Date/Time C32 Printed By C32 Print Date			
	UK Cancel				
Antifications CoverSheet Triane Wellness Notes Order	Madications Labo Prob/PDV Sarvices Becotte D/C Sum	o Consulte Privacu WCM ASD Suicide Balarrate			
DEMO PROVIDER A DEMO. OKLAHOMA IHS.GOV DEMO IND	VHOSPITAL 22-Feb-2011 13:37	CONSUM THAT THE AND AND THE AND			

Figure 1-12: Referral Template selection window

4. Click Add Referral to enter information on a blank form.

	Add Referral for Demo,Patient Referral	×
HIS-EHR User Patient Tools He Patient Chart Demo,Patient Referral 323289 22-Feb-197 Add Mini Referral Add R	Patient Insurances Patient Insurances Patient Eigbility Status CH58 B DIRECT VA Eigbility NO	
Referral Date From	Referring Provider DEMO PROVIDER A Referral Date 2/22/2011 Referral to Unknown> Usix Type C Inpatient C Outpatient CHS Vendor IHS Facility In-house Other Schedule Appointment within Days	C32 Print Date
	Purpose DI Referral ICD Diagnosis Category ICD Diagnosis Category ICD Procedure Category Notes to Appointment Scheduler	
▲] Notifications Cover St DEMO/PROVIDER A		icide Referats

Figure 1-13: Blank Referral Form for Data Entry

- 5. Enter patient information or edit the prepopulated fields as needed.
- 6. Select additional documents that will be sent with the patient by selecting the boxes in the **Include** field. (Refer to Figure 1-13.)

Include Consultation Report Health Summary Most Recent EKG PCC Visit Form Signed Tubal Consent XRay / Report Face Sheet History and Physical Most Recent Lab Report Pre-Natal Record Speciality Clinic Notes XRay Film

Figure 1-14: Include field used to select additional documents

7. The **Medical History and Findings** field is a free text field. The user can type in their notes (i.e., diagnosis and other pertinent medical information) and/or make multiple selections from the health summary list on the right to enter additional medical information (refer to Figure 1-14).



Figure 1-15: Medical History and Findings field

- 8. Click **Save** when complete. This will create a new referral number.
- 9. Click **Cancel** to exit without saving.

1.3.1.2 Add Secondary Referral

- 1. Open the **RCIS** tab within the **Patient Chart** area.
- 2. Select an existing referral from the Table List view. Select a primary referral in order to add a secondary referral. A primary referral is identified by referral numbers without a suffix (i.e. A1, A2, etc.).
- 3. Click **Add Secondary Referral**. The referral form will display with the available information from the primary referral.

d Secondary Referral for DEMO,PATIENT REFERRAL		<u>></u>
Patient Insurances		
	·····	Patient Eligibility Status PENDING
		VA Eligiblity
		NO
	-	
Peterine Berrider	Referred Data	
CARDIOLOGY ASSOC. INC.	Visit Type 🔿 Inpatient 🛛 🧿 Outpa	ient
CHS Vendor IHS Facility In-house Other Schedule	Appointment within 7	Days
Purpose Of Referral EVALUATION/TESTING	Authorized Vists 1	🗖 Call In Referral
ICD Diagnosis Category CARDIOVASCULAR DISORDERS CPT F	Procedure Category EVALUATION AND/OR N	MANAGEMENT
Notes to Appointment Scheduler		
nclude Consultation Report V Health Summary V Most Recent EKG PC	Visit Form 🔲 Signed Tubal Conser	t 🔲 X-Ray / Report
Eace Sheet History and Physical Most Recent Lab Report Pre	Natal Record 🔄 Speciality Clinic Note	s 📋 X-Hay Film
Medical History and Findings		
	<u> </u>	Append Medical History
	-	
	S	ave Cancel

Figure 1-16: Example of Secondary Referral form for Data Entry

- 4. Enter new information or edit the prepopulated fields as needed.
- 5. You can also create a Call-In referral in this screen if the patient was sent for other services to another provider outside the designation of the original referral.
- 6. Click **Save** when complete. This will create a suffix at the end of the existing referral number (i.e. ############## A1).

7. Click **Cancel** to exit without saving.

1.3.1.3 View or Edit Existing Referrals by Patient Make sure that a patient has been selected.

- 1. Open the **RCIS** tab within the **Patient Chart** area.
- 2. A list of the referral documents for the selected patient will display in a table format.
- 3. Click on the column headers to sort by each column.
- 4. To view or edit an existing referral, select a referral document from the table view.
- 5. You can either double-click the selection or click **Edit Referral** above the table view to open the highlighted referral document.
- 6. Enter new information or edit the prepopulated fields as needed.

The referral status displays as seen below (highlighted in red) with the status of the referral (i.e., Approved, Denied, Pending, etc.) (Refer to Figure 1-16.)

Edit Referral for DEMO,PATIENT REFERRAL	×
Patient Insurances	
A	Patient Eligibility Status CHS & DIRECT
	VA Eliaiblitu
	NO
	Approval Status PENDING
Referring Provider DEMO, PROVIDER A Referral Date 2/28/2011	
CARDIOLOGY ASSOC. INC. Visit Type C Inpatient C Outpat	ient
CHS Vendor IHS Facility In-house Other Schedule Appointment within 2	Days
Purpose Of Referral EVALUATION/TESTING Authonized Vists 1	
ICD Diagnosis Category CARDIOVASCULAR DISORDERS CPT Procedure Category EVALUATION AND/OR M	IANAGEMENT
Notes to Appointment Scheduler	
Include Consultation Report Health Summary Most Recent EKG PCC Visit Form Signed Tubal Consen Face Sheet History and Physical Most Recent Lab Report Pre-Natal Record Speciality Clinic Notes	t
Medical History and Findings (Type in and/or append as many health summaries as required)	
DEMO, PROVIDER & FEB 28, 2011	
41 Y/O MALE WITH DM.HTM/CHOL/+FM HX, EST HAD CP @ 1:22, HAVING EXERTIONAL CP X LAST 2 WEEKS.	Append Medical History
DEMO, PROVIDER & FEB 28, 2011	
********* CONFIDENTIAL PATIENT INFORMATION 2/28/2011 12:22 PM [] *********	
******* DEMO, PATIENT REFERRAL #323289 (ADULT REGULAR SUMMARY) pg 1 *******	
DEMOGRAPHIC DATA	
DEMO, PATIENT REFERRAL DOB: FEB 22,1970 41 YRS MALE no blood type NAVAJO TRIBE, AZ NM AND UT SSN: XXX-XX-6317	
Sa	ave Cancel

Figure 1-17: Edit Referral Form Screen

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 Click Append Medical History to add additional Health Summaries and/or comments. You can make multiple selections from the menu on the right and they will appear in ascending order in the Free Text field. Comments can be added before or after the Health Summaries selected. (Refer to Figure 1-15)

Append Medical History and Findings	×
TestAdding additional medical findings	
NERORARSKY CONFIDENTIAL PATIENT INFORMATION 2/28/2011 3:51 PM [AH] ************************************	VPR REMINDERS VPR LABS IMMUNIZATION
DEMOGRAPHIC DATA	ADULT REGULAR PEDIATRIC
DEMO,PATIENT REFERRAL D0B: FEB 22,1970 41 YRS MALE no blood type NAVAJO TRIBE, AZ NM AND UT SSN: XXXX:6317	CHR PROBLEM LIST
<no numbers="" phone="" recorded=""></no>	PATIENT MERGE (COMPLETE)
ALBUQUERQUE (156 Street Rd,Albuquerque,NM,87109)	
LAST UPDATED: FEB 28,2011 ELIGIBILITY: CHS & DIRECT	DIABETES STANDARD
NOTICE OF PRIVACY PRACTICES REC'D BY PATIENT? YES DATE RECEIVED BY PATIENT: Feb 22, 2011 WAS ACKNOWLEDGEMENT SIGNED? YES	SPECIAL WWH DIABETIC
HEALTH RECORD NUMBERS: 323289 DEMO INDIAN HOSPITAL DESIGNATED PRIMARY CARE PROVIDER: <none identified=""></none>	PATRICK ADULT REGULAR MEDICINE CLINIC/ADULT WWPHARMACY WWEYE CLINIC
ALLERGIES/ADVERSE REACTIONS (FROM ALLERGY TRACKING)	STUCKY1 LABORATORY PATRICK
NO ALLERGY INFORMATION RECORDED	
Allergy List Reviewed On: By: Allergy List Updated On: By: No Active Allergies Documented On: By:	PATIENT EDUCATION DROPIN2 CANCER REFERRAL third party billing
ALLERGIES (FROM PROBLEM LIST)	RGR MEDICATION M/S
	LINDA xray
Allergy List Reviewed On: By: Allergy List Updated On: By: No Active Allergies documented On: By:	MARGARET'S DIABETIC ELAINE'S MARGARET'S DIABETIC
Problem List Reviewed On: By:	WW TROGLITAZONE
	Save Cancel

Figure 1-18: Append Medical History and Findings window

- 8. Click **Save** when complete.
- 9. Click **Cancel** to exit without saving.

1.3.2 RCIS Tab–Provider Centric

The **RCIS–Provider Centric** tab provides the EHR user with access to all referrals you created within a selected date span. All referrals created by the current user as the Referring Provider can be viewed and edited from this area.

1. Select the **RCIS** tab located at the top of the screen with the **Patient Chart** tab.

JIHS EHR	TUC	SON DEVELOPM	ENT SYSTEM						_ 🗆 ×
Patient Ch	vart Comm	unication	BPMS	CIHA Intranet	Micromedex	E-Mail	BCIS		
Edt Dafamal	Add Council on Das				merenaum	L. Trum		7	
Edit Kererrai	Add becondary Ker	errai					\sim		
Referral Date	e From Sunday	, February 28,2	2010 💌 To Monda	y , February 28, 2011	•				
Chart Number	Patient Name	Referral Date	Purpose	Referring Provider	Referral Number	CHS Status	Facility Referred To	Appointment Date/Time C32 Printed B	C32 Print Date
323289 323289 323289 323289	DEMO,PATIENT DEMO,PATIENT DEMO,PATIENT DEMO,PATIENT	FEB 22, 2011 FEB 22, 2011 FEB 22, 2011 FEB 23, 2011	EVALUATION/TESTING EVALUATION/TESTING EVALUATION/TESTING Callin	DEMO,PROVIDER A DEMO,PROVIDER A DEMO,PROVIDER A DEMO,PROVIDER A	5059011100105 5059011100105 - A2 5059011100105 - A4 5059011100110	PENDING PENDING PENDING PENDING	CARDIOLOGY ASSOC. I RADIOLOGIC SPECIAL CARDIOLOGY ASSOC. I (UNKNOWN)		
•									
DEM0,PR0\	/IDER A DEMO	OKLAHOMA.IHS	.GOV DEMO INDIAN H	IOSPITAL 28-Feb-20	11 11:07				

Figure 1-19: RCIS tab for provider-centric view

- 2. A list of referrals created for the current user will display in a table view.
- 3. Referral document can be viewed and edited in the same way as the **Patient Chart Referral** tab.
- 4. An **Edit Referral** and **Add Secondary Referral** button have been provided with the same functions as in the **Patient Chart Referral** tab.
- 5. A default date range is provided to view referrals created within a specified date range. You can choose to edit the date range.
- 6. Click on the column headers to sort by each column.

1.4 C32 Reporting Requirement

In the **Patient Chart–Referrals** tab and the **Provider Centric–RCIS** tab, a **Print C32 for referral** button is provided above the table view. This was added to assist with a Stage 1 Meaningful Use requirement for eligible providers (EPs), eligible hospitals and critical access hospitals (CAHs) to provide a Summary of Care Record (C32 report) for patients referred outside of the issuing IHS facility.

This requirement is one of 10 available menu set objectives as defined for EHR Certification. Please visit the official Web site for a complete list of these and other requirements (<u>http://www.cms.gov/ehrincentiveprograms/</u>).

To complete the printing of a Summary of Care Report:

1. Select an existing referral from the **Referrals** tab.

- 2. Click **Print C32 for Referral** to view a pop-up window of the report (refer to Figure 1-19).
- 3. Click **Print** to complete the requirement. Once complete, the referral document is marked as having a C32 report printed.

		Created On: March 11, 20	11		
Patient:	GENERATELIST PATIENT ONE		MRN: 8995_P49, : 20046		
Birthdate: Guardian:	, , March 15, 1970	N	Sex: Female Text of Kin:		
<u>Conditions</u> <u>Allergies ar</u> <u>Encounters</u> <u>Vitals Sigm</u> <u>Immunizati</u> <u>Insurance I</u> <u>Procedures</u> <u>Medicatior</u> <u>Results</u>	s or Problems nd Adverse Reactions s s s ions Payors s ns				
• <u>Report Ger</u>	<u>neration Criteria</u> r Problems				
<u>Report Ges</u> Conditions or Data	r Problems			Status	ICD 0
<u>Report Ger</u> Conditions or Date 01/19/2011	r Problems Name	ume Of Vessel native Or Großt	 	Status	ICD-9
<u>Report Ger</u> <u>Conditions or</u> Date 01/19/2011 08/04/2010	r Problems Name Coronary Atherosclerosis Of Unspecified T Exercise Induced Bronchospasm	ype Of Vessel,native Or Graft	2 4	Status Active	ICD-9 414.00 493.81
<u>Report Ger</u> Conditions or Date 01/19/2011 08/04/2010 Allergies and Vo Allergy Inform Cncounters	r Problems Name Coronary Atherosclerosis Of Unspecified T Exercise Induced Bronchospasm Adverse Reactions nation for the report generation criteria. However	ype Of Vessel,native Or Graft r, some allergy information may co	st and may be included i	Status Active in the Cor	ICD-9 414.00 493.81
<u>Report Ger</u> Conditions or Date D1/19/2011 D8/04/2010 Allergies and Io Allergy Inform Encounters Date/Time	r Problems Name Coronary Atherosclerosis Of Unspecified T Exercise Induced Bronchospasm Adverse Reactions nation for the report generation criteria. However Location	ype Of Vessel,native Or Graft r, some allergy information may co Climic	me from the problem list and may be included i	Status Active	ICD-9 414.00 493.81
<u>Report Ger</u> Conditions of Date Date Dol/19/2011 Dol/04/2010 Allergies and To Allergy Inform Cncounters Date/Time D02/10/2011 16:5	r Problems Problems Coronary Atherosclerosis Of Unspecified T Exercise Induced Bronchospasm Adverse Reactions nation for the report generation criteria. However Location 52:00 DEMO IHS CLINIC	ype Of Vessel,native Or Graft r, some allergy information may co Clinic GENERAL	me from the problem list and may be included i Description Service Category: AMBULATOR	Status Active in the Cor	ICD-9 414.00 493.81
<u>Report Ger</u> Conditions of Date Date Dol/19/2011 Dol/04/2010 Allergies and To Allergy Inform Cncounters Date/Time D02/10/2011 16:5 D02/09/2011 10:3	reration Criteria r Problems Coronary Atherosclerosis Of Unspecified T Exercise Induced Bronchospasm Adverse Reactions nation for the report generation criteria. However Location Location 52:00 DEMO IHS CLINIC 31:00 DEMO IHS CLINIC	ype Of Vessel,native Or Graft r, some allergy information may co Clinic GENERAL GENERAL	me from the problem list and may be included i Description Service Category: AMBULATOR Service Category: DAY SURGER	Status Active in the Con	ICD-9 414.00 493.81
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Figure 1-20: Sample C32 Report

Contact Information

If you have any questions or comments regarding this distribution, please contact the OIT Help Desk (IHS).

Phone: (505) 248-4371 or (888) 830-7280 (toll free)

Fax: (505) 248-4363

Web: http://www.ihs.gov/GeneralWeb/HelpCenter/Helpdesk/index.cfm

E-mail: support@ihs.gov