RESOURCE AND PATIENT MANAGEMENT SYSTEM

# iCare Population Management GUI

(BQI)

## Panel View User Manual

Version 2.8
September 2019

Office of Information Technology
Division of Information Technology

# Table of Contents

# Preface

The purpose of this manual is to provide the information needed to use the latest enhancements to the Panel View window in the Indian Health Service (IHS) iCare (BQI) population management application.

This manual contains reference information about iCare views, examples of its processes, and step-by-step procedures to demonstrate how to perform activities related to the Panel View window in the latest version of the iCare application.

# 1.0 Introduction

iCare is a Windows-based, client-server graphical user interface (GUI) to the IHS Resource and Patient Management System (RPMS). iCare retrieves key patient information from various components of the RPMS database and brings it together under a single, user-friendly interface. iCare is intended to help providers manage the care of their patients. The ability to create multiple panels of patients with common characteristics (e.g., age, diagnosis, community) allows users to personalize the way they view patient data.

The information included in this Panel View specific manual covers iCare Panel View functionality in iCare Version 2.8.

# 2.0 System Navigation

## 2.1 Panel View

Every panel, when opened, has a Panel View. Each panel displays data about the patients in the selected panel. Access this window by using the **Open** function from the Main View or by double-clicking a record on a specific panel in the **Panel List** from Main View.

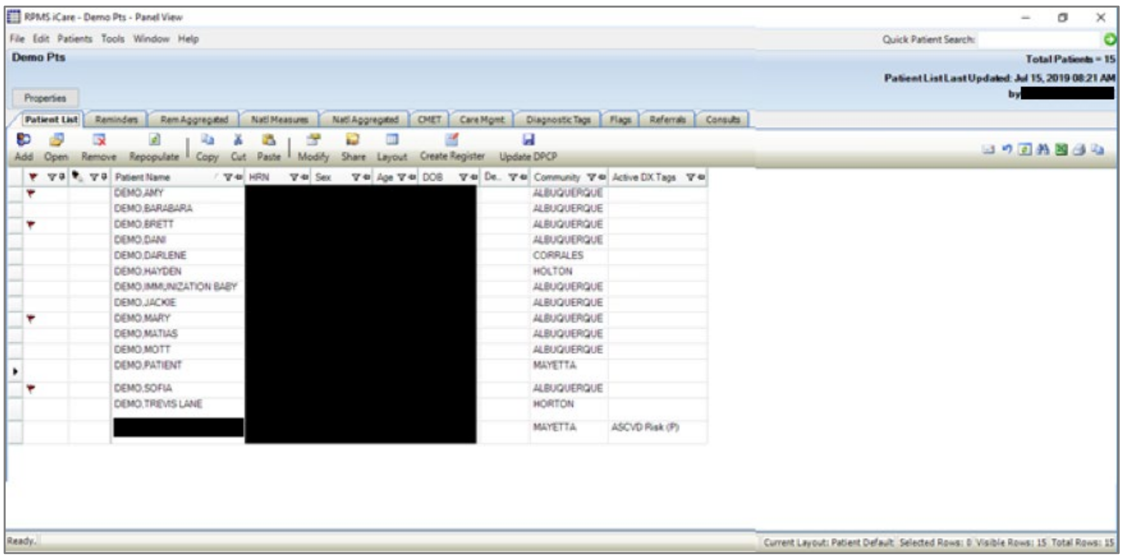


Figure 2-1: Sample **Panel View** window

> **Note:** The **Repopulate** button will not display on the **Panel View** window if the patients in the panel were added manually (that is, the panel has no predefined logic).

Currently there are 11 tabs in Panel View.

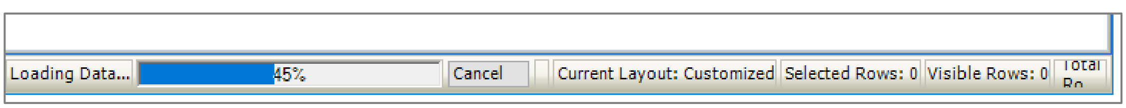



Figure 2-2: Loading Data status

The application displays the loading progress (in percentage) in the status bar when the panel contains a large number of patients. This feature applies to all tabs except the **Rem Aggregated** (Reminder Aggregated) and the **Flags** tabs.

You can cancel the load by clicking **Cancel**; the application displays the **Cancel display of data?** dialog confirming that you want to cancel the loading process. Click **Yes** to cancel the load (otherwise, click **No**).

iCare allows for more than one user to open the same shared panel simultaneously. The second and subsequent users to open the same panel will have read-only access to the panel content, similar to Word or Excel functionality. If the first user closes the panel, the second user will be notified that the panel is now available for edit access, unless the panel creator grants the user only Shared Read Only access.

Any tab, once opened, can be viewed without re-loading the data.

## 2.1.1 Toolbar Buttons

There are important toolbar buttons available for users.

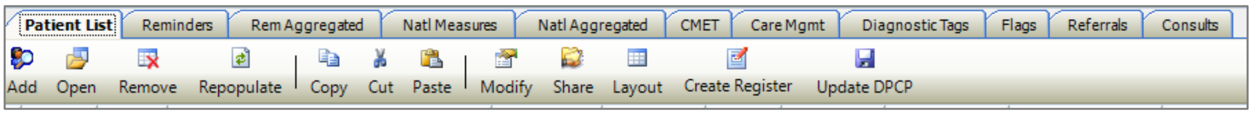



Figure 2-3: Toolbar buttons

### 2.1.1.1 Add

> **Note:** You can add a patient to the current panel by using the Add function or by copying a patient from another panel and pasting the patient data into the current panel.

Only the panel creator or the shared user with read/write access can add patient names to the current panel. This is a manual add function. You can add a patient name even if the panel was originally created from a pre-defined search definition. The panel stores the original definition as well as any patients added. This is important during the repopulate action.

To add patients to the Panel View, do one of the following:

- Click the **Add** (
) button.
- Select **Patients** | **Add Patient(s)**.
- Select the **Add Patient(s)** option on the context menu.

The **Select Patients** dialog (Figure 2-4) displays.

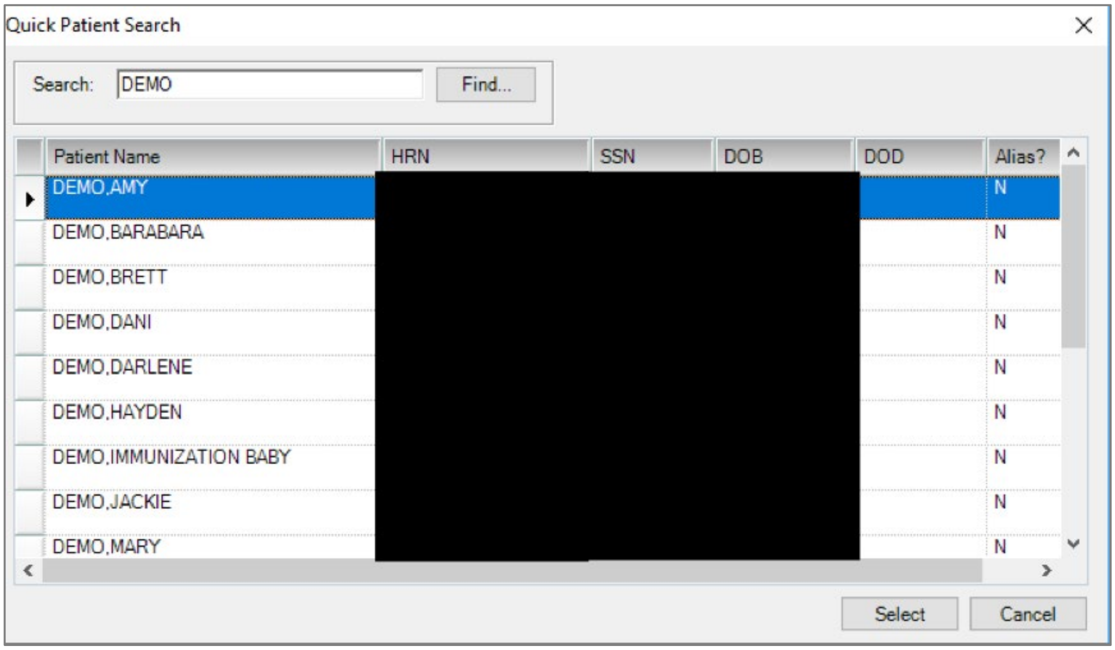



Figure 2-4: **Select Patients** dialog

1. Use any of the following to search for the patient in the **Search** field:
    - A few characters of the patient's last name
    - The patient's health record number (HRN)
    - The patient's social security number (SSN)
    - The patient's date of birth
2. Click **Find**. The retrieved records will display in the lower panel of the **Select Patients** dialog.
    - You can refine your search (if needed) by using the **Search** field again.
    - Use the Ctrl or Shift key to select and add multiple rows at the same time.
3. When you have highlighted the correct patients, click **Add** to add the patients to the **Patient List** tab on the **Panel View** window. (Otherwise, click **Close**.)

### 2.1.1.2 Open

The Open function moves the focus to another window where you can view the patient record (patient data information stored in the RPMS database).

Highlight the patient name and open the patient record by doing one of the following:

- Click the **Open** () button.
- Select **Patients** | **Open Patient(s)**.

- Select the **Open Patient(s)** option on the context menu
- Double-click the row in the grid
- Press Ctrl-O.

Your default tab of the Patient Record window will display.

If selecting multiple rows, the multiple patient records will open in individual windows.

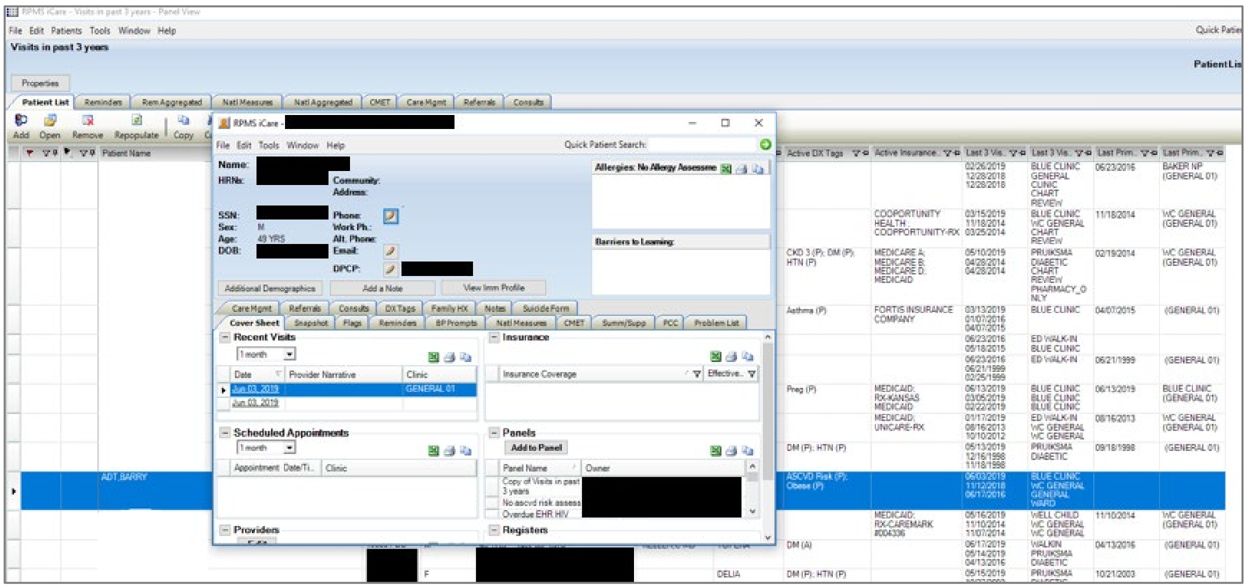


Figure 2-5: **Open Patients** dialog

### 2.1.1.3 Remove

The Remove function deletes one or more selected patients from the **Patient List** tab on the **Panel View** window. The removed patients are *not* deleted from the RPMS database but are only removed from your panel display. The Remove function is limited to the panel creator or the shared user with read/write access.

The panel stores the original definition as well as any patients removed or added. This is important during the repopulate action.

To remove selected patients, do one of the following:

- Click the **Remove** (

) button.
- Select **Patients** | **Remove Patient(s)**.
- Select the **Remove Patient(s)** option on the context menu.
- Press Delete.

After using the Delete function, the **Confirm patient remove** dialog displays, asking if you want to delete the selected patients. Click **Yes** to remove them. (Otherwise, click **No**.)

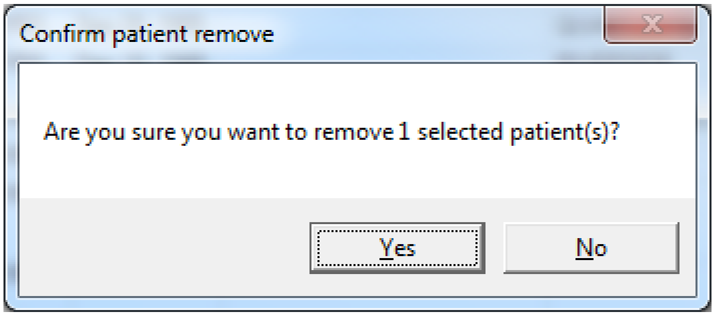



Figure 2-6: **Confirm patient remove** dialog

#### 2.1.1.4 Repopulate

The Repopulate function rebuilds the contents of the panel. This function reruns the panel definition against the cached data (from the nightly job), adding patients who meet the criteria and removing the patients who no longer meet the criteria. The Repopulate function is limited to the panel creator or the shared user with read/write access.

> **Note:** The **Repopulate** button will not display on the Panel View if the patients in the panel were added manually (that is, the panel has no predefined logic).

To repopulate a panel, do one of the following:

- Click the **Repopulate** (
) button.
- Select **Patients** | **Repopulate**.
- Select the **Repopulate** option on the context menu.

A warning message displays that asks: “The patient list for this panel may be updated during repopulation and cannot be undone. Do you want to continue?” Click **Yes** to repopulate the panel. (Otherwise, click **No**.)

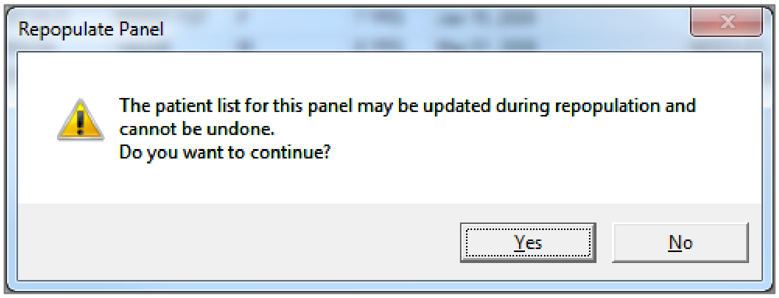



Figure 2-7: **Repopulate Panel** dialog

If you manually edited (added or removed) patients in the panel, the **Maintain Manual Changes** warning message displays that asks: “This panel has been edited manually (patients added or removed). Do you want to keep your manual change while repopulating?”

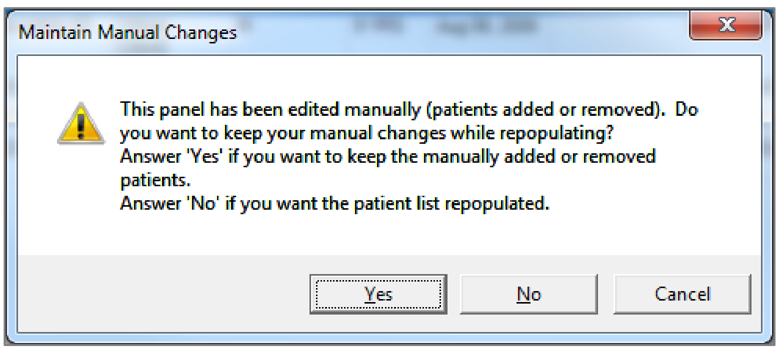



Figure 2-8: **Maintain Manual Changes** dialog

Click **Cancel** to cancel the repopulate process.

Click **Yes** to repopulate the panel and to keep the manually added or removed patients.

Click **No** if you want the patient list totally refreshed. In this case, the patient list will be totally refreshed; any added patient names will be lost and any deleted patient names will be added back to the panel.

If you use Yes or No and the current panel contains many patients, iCare displays the **Background populate** information message that states: “Populating the panel may take some time. Do you want to run in the background?” Click **Yes** to run the repopulate process in the background. Otherwise, click **No** to repopulate in the foreground.

#### 2.1.1.5 Copy

The Copy function copies the selected patient’s information to the iCare clipboard. Then you can go to another panel view (for a different patient panel) and paste the patient’s information.

To copy the selected patient information, do one of the following:

- Click the **Copy** () button.
- Select **Patients** | **Copy Patient(s)**.
- Select the **Copy Patient(s)** option on the context menu.
- Press Ctrl-C.

Use the **Select All** function to select all the patients on the current **Panel View** window. Once the patients are selected, you can copy-paste them into another panel, for example.

To select all the patients, do one of the following:

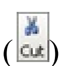
- Select **Edit** | **Select All**.
- Press Ctrl-A.

To deselect the patients, select the **Deselect All** option on the **Edit** menu.

#### 2.1.1.6 Cut

The Cut function copies the selected patient's information to the iCare clipboard and removes the selected patient from the current Panel View. You can then go to another panel view (for a different patient panel) and paste the patient information. The Cut function is limited to the panel creator or the shared user with read/write access. This function is useful for moving patients from one panel to another.

To cut the selected patient information, do one of the following:

- Click the **Cut** () button
- Select **Patients** | **Cut Patient(s)**
- Select the **Cut Patient(s)** option on the context menu
- Press Ctrl-X.

Next, move to another patient panel and use the Paste function.

#### 2.1.1.7 Paste

The Paste function places the contents of the iCare clipboard (containing patient data) into the current Panel View (this cannot duplicate patient data). If there are duplicate patients in the paste operation, the system displays a message about this condition. The Paste function is limited the panel creator or the shared user with read/write access.

Patients that are pasted into a panel are considered “manually added.” This means that they are considered to be members of the panel that were manually selected to be on the patient list, and therefore are considered outside of the patient list that exists due to the panel’s search logic.

To paste the contents of the iCare clipboard, do one of the following:

- Click the **Paste** (Paste) button.
- Select **Patients** | **Paste Patient(s)**.
- Select the **Paste Patient(s)** option on the context menu.
- Press Ctrl-V.

The patients copied to the clipboard are added to the current Panel View. (If there are no patients on the iCare clipboard, a warning message will display.)

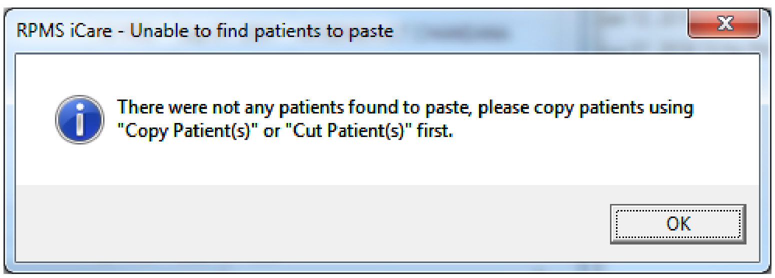



Figure 2-9: **Unable to find patients to paste** dialog

If there is a duplicate patient to be pasted, the **Duplicate patient** message displays that states: “The patient that is being pasted already exists in the panel. To avoid duplicate patients, this patient will not be pasted.” Click **OK** to dismiss the message.

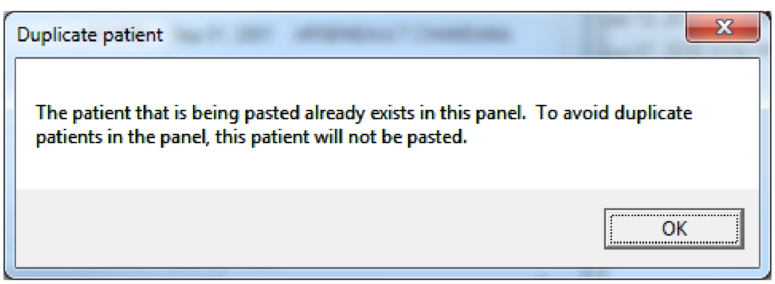



Figure 2-10: **Duplicate patient** dialog

### 2.1.1.8 Modify

The Modify function modifies the patient panel definition information. This function is limited to the panel creator or the shared user with Read/Write access.

To modify the current panel, do one of the following:

- Click the **Modify** (Modify) button.

- Select **File** | **Modify**.

The **Panel Definition** window for the panel displays.

#### 2.1.1.9 Share

The Share function defines users who can share the current panel. This function is limited to the panel creator or the shared user with read/write access.

To share the patient panel, do one of the following:

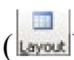
- Click the **Share** () button.
- Select **File** | **Share**.

The **Panel Definition** window opens to the **Sharing** tab.

#### 2.1.1.10 Layout

The Layout function defines which data columns to show in the current panel, the order of the columns chosen for display, and the initial sort order of the patients in the list. This layout information is stored with the panel if you decide to save the panel changes. Users with read-only access can change the layout of a panel.

Select the view layout function by doing one of the following:

- Click the **Layout** () button.
- Select **File** | **Layout**.

The **Patient List Layout** window opens, showing the current panel layout.

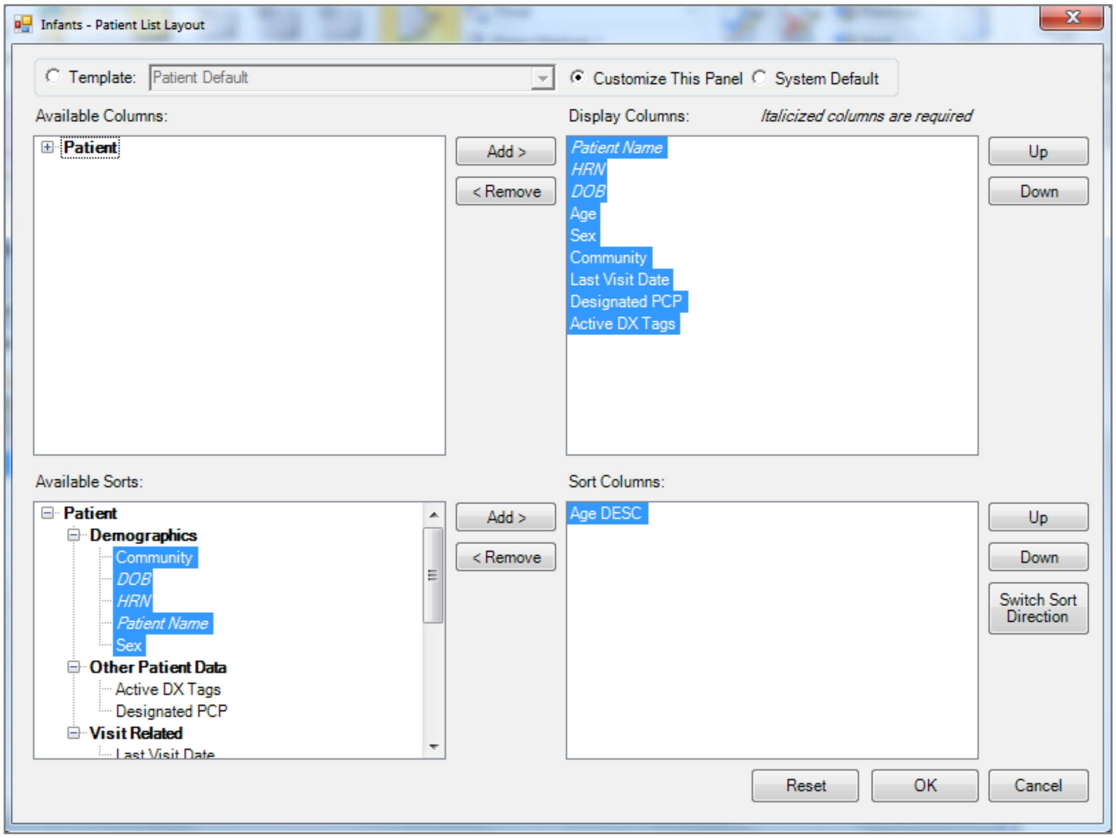
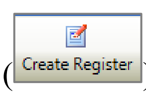



Figure 2-11: **Patient List Layout** window

Section 4.3.2 provides information about using the various features on the layout window.

### 2.1.1.11 Create Register

The Create Register function adds the selected patients to the newly defined register. To create a register, do one of the following:

- Click the **Create Register** (

) button.
- Select **Patient** | **Create Register**.

The **Create Register** window opens, showing the create register form.

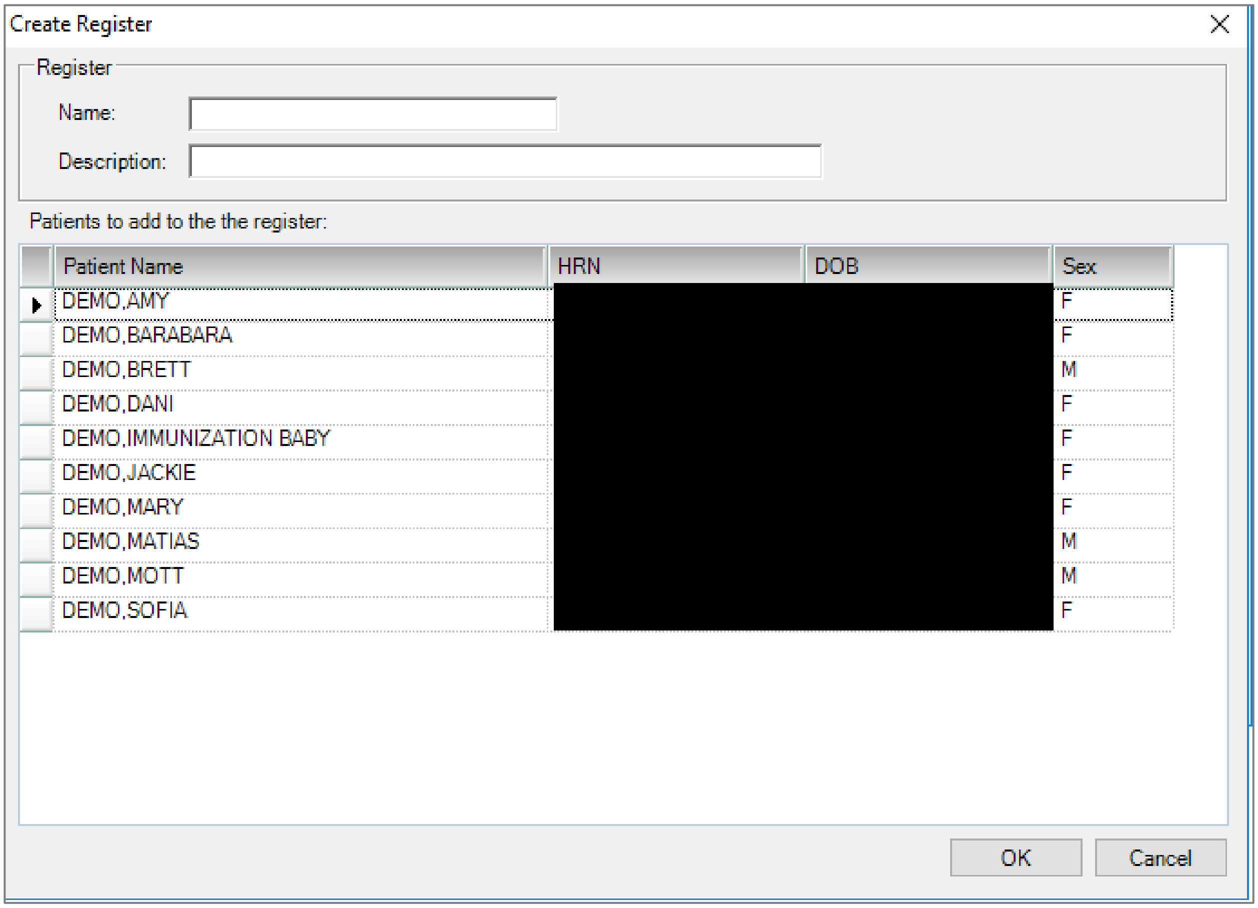



Figure 2-12: Patient List Create Register

### 2.1.1.12 Update DPCP

The Update DPCP function updates the selected patients with the newly selected provider. The user is required to have either DSPM Editor (BQIZDSPM) or Designated Specialty Provider Management System (BDPZMENU) security key. The message in Figure 2-13 will display if the user does not have one of these keys.

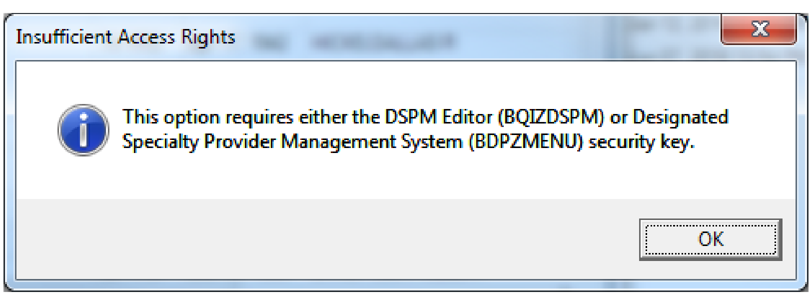



Figure 2-13: **Insufficient Access Rights** dialog

- Click the **Update DPCP** (

) button.

- Select **Patient** | **Update DPCP**.

The **Update DPCP** window opens, displaying the update provider form.

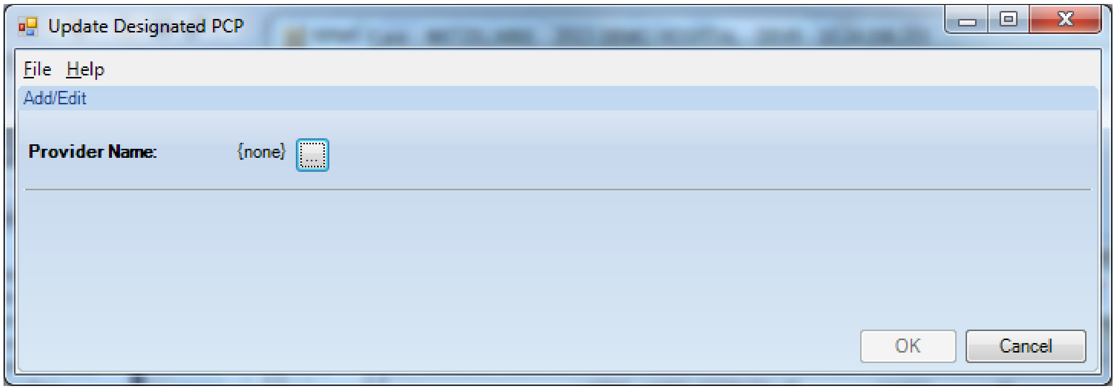



Figure 2-14: **Update Designated PCP** window

## 2.1.2 Additional Toolbar Items

The buttons on the right side of any iCare window have many of the same functionality as the other views in iCare. For Panel View, there is one button that does not exist elsewhere in iCare: the **Mail Merge** button (Section 2.1.2.1).


Figure 2-15: Toolbar on the right side of the iCare window

These buttons might not be visible; in that case, click the list button.

The application provides hover help for each button.

### 2.1.2.1 Mail Merge

The iCare application provides the capability to export patient demographic data in a format that can be used by word processing mail merge files. This is a Demographic Data Export for Letter Generation function.

Follow these steps:

1. Select the patients that you want to include in the mail merge process.
2. Click the **Mail Merge** () button (or select **Tools** | **Mail Merge**) to display the **Mail Merge Export** dialog.

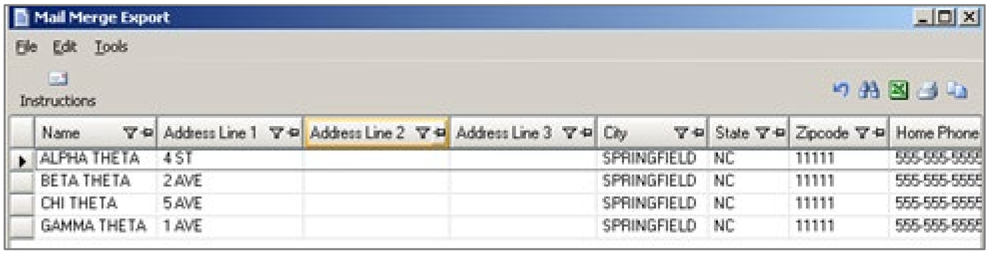



Figure 2-16: Sample **Mail Merge Export** dialog

Section 2.1.2 provides information about using the buttons on the right side of the toolbar.

3. Click the **Instructions** ( Instructions ) button to display the **Mail Merge Instructions** pop-up. The pop-up displays instructions for completing the mail-merge process.

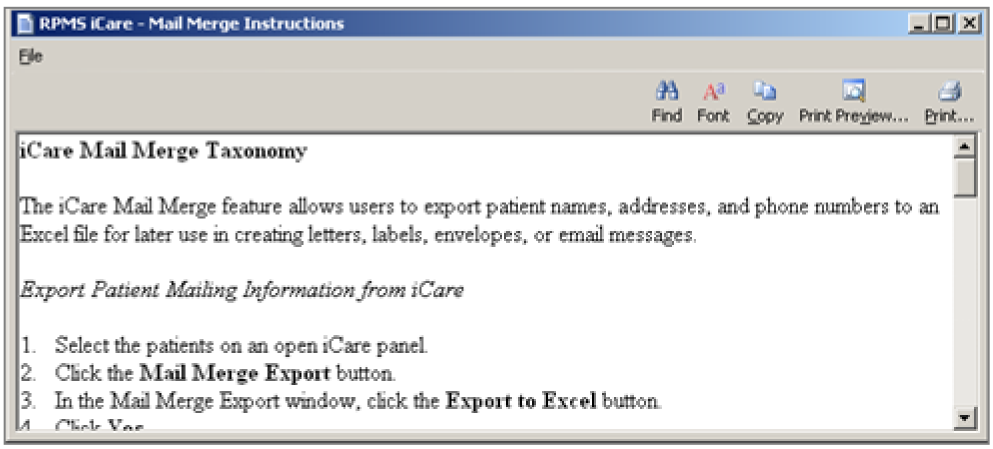



Figure 2-17: **Mail Merge Instructions** pop-up

Print the contents by clicking the **Print** button or by selecting **File** | **Print**.

Section 4.1 provides information about the **File** menu and buttons on the pop-up.

#### 2.1.2.2 Reset View

Click the **Reset View** ( ) button (or select **Tools** | **Reset View**) to return the current view to the default view. Use this feature when changing the view, such as resizing the column width. This is the same pressing Ctrl-R.

#### 2.1.2.3 Refresh

Click the **Refresh** ( ) button (or select **Tools** | **Refresh**) to update any RPMS field values on the current window with new data from the server. This is the same as pressing F5.

### 2.1.2.4 Search

Search for data in the current grid by clicking the **Search** ( ) button (or selecting **Tools** | **Search** or pressing Ctrl-F) to display the **Search** dialog.

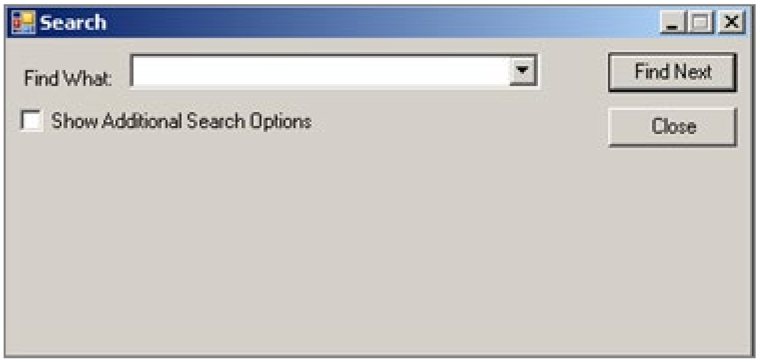



Figure 2-18: **Search** dialog

If you *do not* select the **Show Additional Search Options** check box, the search looks in all columns for a match.

If you select the **Show Additional Search Options** check box, the **Search** dialog displays additional search options.

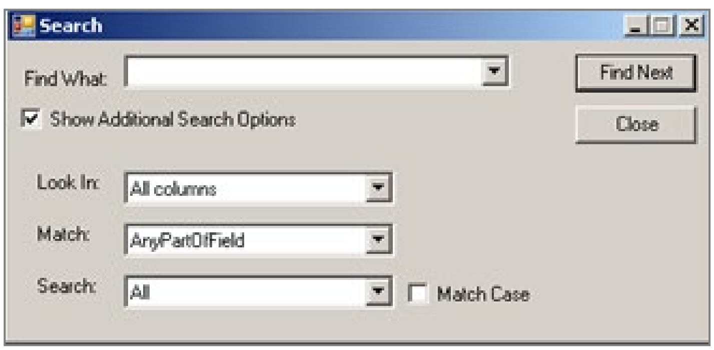



Figure 2-19: **Search** dialog with additional search options

Type the search criteria in the **Find What** Free Text field. The remaining fields determine the criteria for the search.

If you select the **Match Case** check box, that will cause the search to match the case of the text in the **Find What** field.

#### 2.1.2.4.1 Look In Field

Click the list for the **Look In** field to view the field options. The selected option determines which part of the window to search.

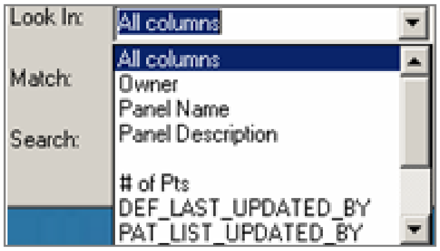



Figure 2-20: **Look In** field –list options example

The selection in the upper part of the list determines the options in the lower part of the list. For example, if the **Look In** field contains **All columns**, the list of the column names will display in the lower part of the list.

#### 2.1.2.4.2 Match Field

Click the list for the **Match** field to view the field options.


Figure 2-21: **Match** field – list options example

The selected option determines which part of the **Find What** field will be matched in the search.

#### 2.1.2.4.3 Search Field

Click the list for the **Search** field to view the options for that field.


Figure 2-22: **Search** field –list options example

The selected option determines the direction of the search.

After all fields are populated with the search criteria, click the **Find Next** button. (Otherwise, click **Close**.)

If a match is found, the matching text will be highlighted (in the grid). If you want to continue the same search, click the **Find Next** button again; repeat this process as needed.

If a match is not found, the **Datagrid Search Results** message displays.

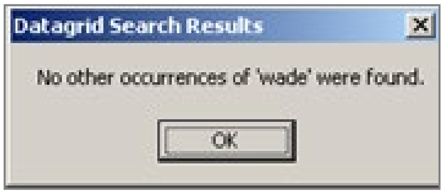



Figure 2-23: **Datagrid Search Results** dialog

Click **OK** to close the message and to return to the **Search** dialog.

#### 2.1.2.5 Export to Excel

Export the information in the grid to Excel by clicking the **Export to Excel** ( ) button (or selecting **Tools** | **Export to Excel** or pressing Ctrl-E).

The application displays a warning message about the export (Figure 2-24).

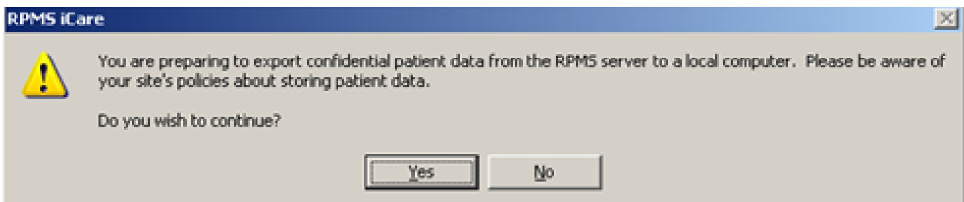



Figure 2-24: Warning message about exporting patient data

- Click **No** to dismiss the warning and to exit the export process.
- Click **Yes** to continue the export process and display the **Save As** dialog.

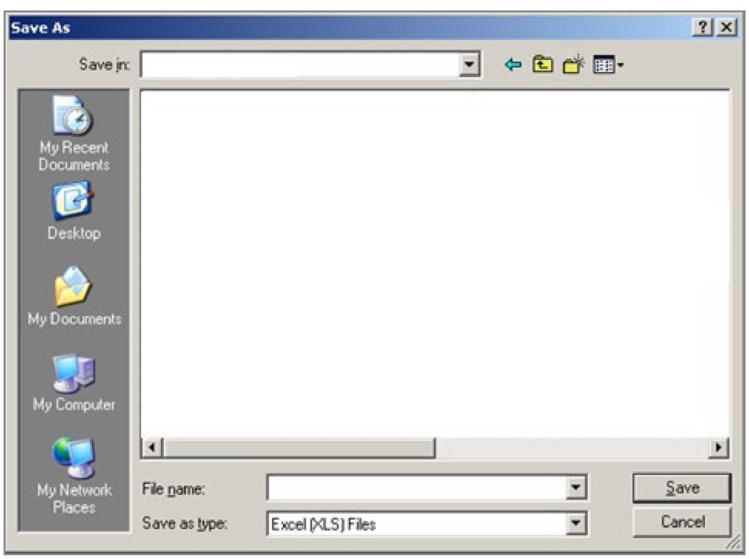



Figure 2-25: **Save As** dialog

Ensure the location where you want to save the file displays in the **Save in** field.

Type the name in the **File name** field. The system will add XLS extension to the field name (automatically).

Click **Save**. (Otherwise, click **Cancel**.) If you click **Save**, the **Export Panel** message displays when the Save command is complete: “Excel export has been created.” Click **OK** to dismiss the message.

When you view the Excel document, the application provides a Confidential Patient Information header in the document.

### 2.1.2.6 Print

The Print function will print the selected patient’s information.

Copy the selected patient’s information by doing one of the following:

- Select the patients by selecting the rows or select all by pressing Ctrl-A.
- Click the **Print** () button.

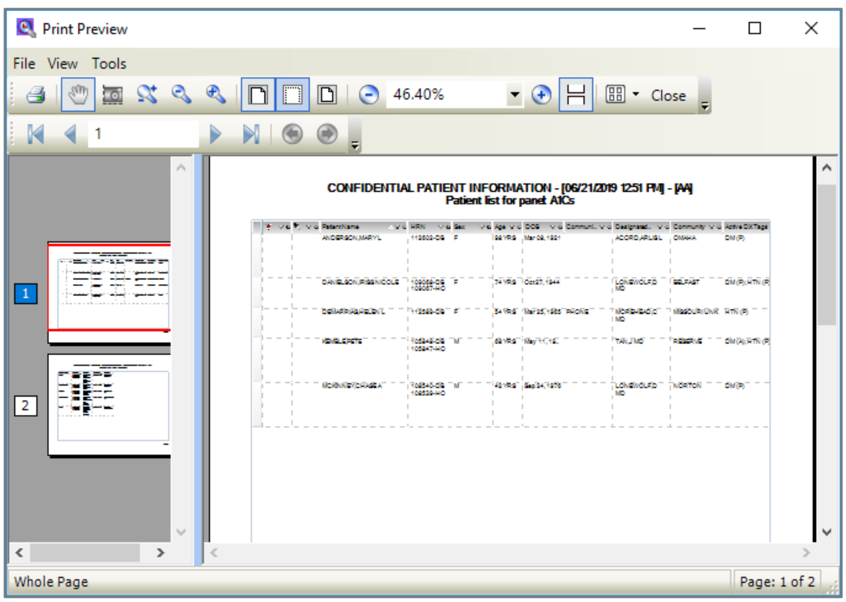



Figure 2-26: **Print Preview** window

### 2.1.2.7 Copy

The Copy function copies the selected patient’s information to the iCare clipboard. Then you can paste the patient’s information from the clipboard.

Copy the selected patient’s information by doing one of the following:

- Select the patients by selecting the rows or press Ctrl-A to select all.

- Click the **Copy** () button

### 2.1.3 Additional Information

Information about the panel displays in different parts of the window.

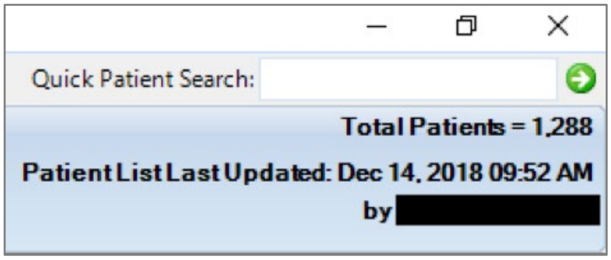



Figure 2-27: Top right corner of the panel

- Total Patients: Number of patients in the panel.
- Patient List Last Updated: Date and time the Patient List was last repopulated, either manually or auto-repopulated.
- By: Displays the name of user who last repopulated the Patient List.

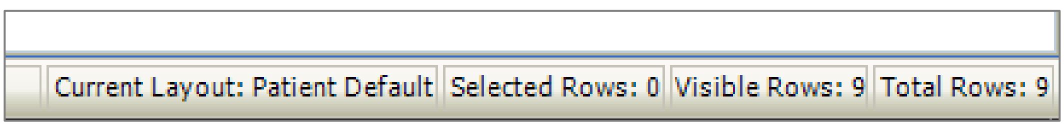



Figure 2-28: Bottom right corner of the panel

In the bottom right corner, the following displays:

- Current Layout
- Selected Rows
- Visible Rows
- Total Rows

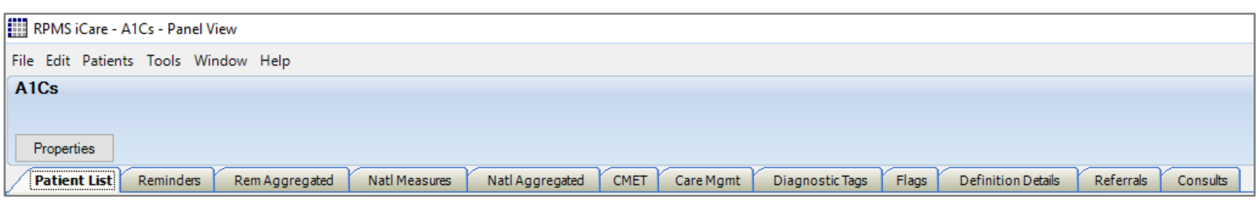



Figure 2-29: Upper left side of the panel

The upper left corner of the panel displays the panel name and the **Properties** button, which, when clicked, displays a description of the panel definition.

### 2.1.4 Properties

Click the **Properties** button located above the tabs in the Panel Information area (or select **File** | **Panel Properties**) to view the properties about the current panel. Click **OK** to dismiss the pop-up (Figure 2-30).

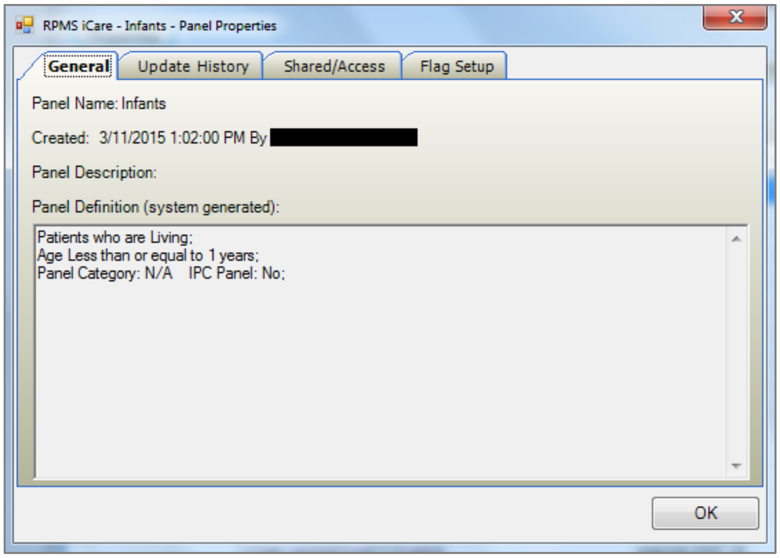



Figure 2-30: Sample **Panel Properties** pop-up

- The **General** tab provides information about the panel name, when the panel was created and by whom, the panel description, and any filters used to create the panel.
- The **Update History** tab provides information about the auto-repopulate status of the panel, when the panel definition was last modified and by whom, when the patient list was last populated and by whom, and when the patient list was manually updated.
- The **Shared/Access** tab provides information about the shared users for the current panel and their access rights.
- The **Flag Setup** tab provides information about the timeframes for the flag types (defined in User Preferences).

Click **OK** to dismiss the pop-up.

# 3.0 Package Management

## 3.1 Patient List Tab

The **Patient List** tab of the **Panel View** window displays data about the patients in the panel. The default grid displays the standard demographic columns (Name, HRN, Sex, Age, DOB) in addition to the Diagnostic Tag–related data and the condition-specific (register) fields.

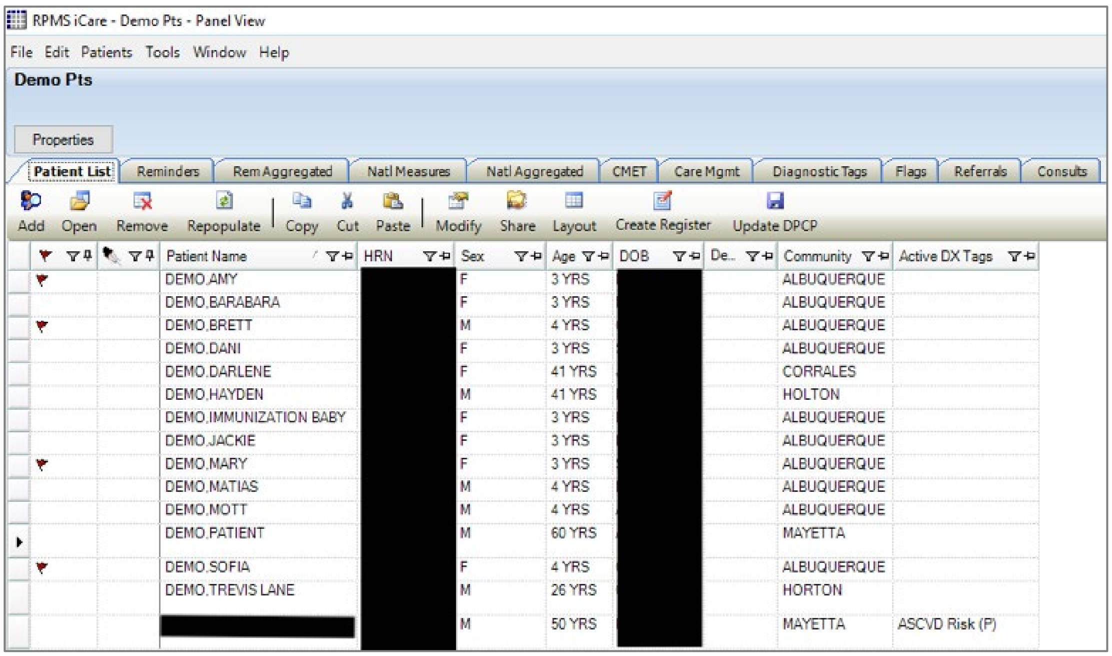



Figure 3-1: Sample **Patient List** tab

### 3.1.1 Patient List Tab Layout

You can determine which template is being used by reviewing what is in the status bar, in Current Layout. For example, it could read Current Layout: System Default.

The status bar shows information about the rows in the panel. Visible rows will display a smaller number than Total Rows if a filter has been applied.


Figure 3-2: Sample row information

You can sort, filter, and perform other functions on the columns.

Table 3-1 provides information about the default columns on the **Patient List** tab.

Table 3-1: Standard Patient demographic information

| Column | Information |
|---|---|
| Flag indicator | Displays when a patient has a flag. This column is always the first column and can only be removed by turning all flags "off" in the User Preferences. |
| Feather indicator | The feather indicator in this column means that there is an open CMET with an overdue step. Go to the CMET Tracked Events sub-tab to review this condition. |
| Patient Name | Required field that will link to the Patient Record if you double-click the name. |
| HRN | Patient's health record number. The HRN will display as the HRN number followed by the facility code. An HRN with an asterisk (*) is an inactive HRN for that facility. |
| Sex | F (for female), M (for male) or U (for unknown). |
| Age | Patient's age as of today. |
| DOB | Patient's Date of Birth. |
| Designated PCP | Designated Primary Care Provider, if any. Not all facilities use this field to empanel patients. |
| Community | Patient's community of residence. |
| Active DX Tags | One or more predefined diagnosis definitions ("tags") that iCare has proposed for the patient that has a Proposed or Active status. Section 3.1.1.1 provides more information about Diagnostic Tags. |

You can view the Community alert text by hovering your mouse over the Community Alert () icon, if any. The icon does not affect the sorting of the Community column.

#### 3.1.1.1 Diagnostic Tags

iCare provides a diagnosis-tagging function that runs as a background process on your RPMS server and reviews all patient data. Tagging is a term that refers to running a series of logic algorithms on one or multiple patients that identifies ("tags") them with one or more predefined diagnosis categories, listed below.

- Asthma
- COPD
- Cardiovascular Disease (CVD) Known (CVD Kn)
- CVD At Highest Risk (CVD AHR)
- CVD At Significant Risk (CVD ASR)
- CVD At Risk (CVD AR)
- Diabetes (DM)
- HIV/AIDS (HIV)

- Hypertension (HTN)
- Obese
- Prediabetes/Metabolic Syndrome w/o DM (PreDM)
- Pregnant
- Current Smokers (Smoker)

iCare will classify tags into one of five statuses: proposed (pending) (P), accepted (A), not accepted (NA), No longer valid (NLV), and Superseded (S). In the Active DX Tags column on any Panel View, the status value should be concatenated with the tag name, e.g., Asthma (A); CVD AHR (P); DM (A).

The detailed logic for each of these diagnosis tags can be found in the Diagnostic Tag glossary (found by selecting that option on the **Tools** menu).

#### 3.1.1.2 Patient Classified as Sensitive

You can identify a "sensitive patient" in the Patient Name column when the name is preceded by the ( ) symbol.

When you double-click the sensitive patient record, and if one of the following conditions exists:

- If the patient is sensitive and the user is not a DG SENSITIVITY key holder

  ***or***

- If the patient is an employee and the user is not a DG SENSITIVITY OFFICER key holder

Then, the application will display a warning message.

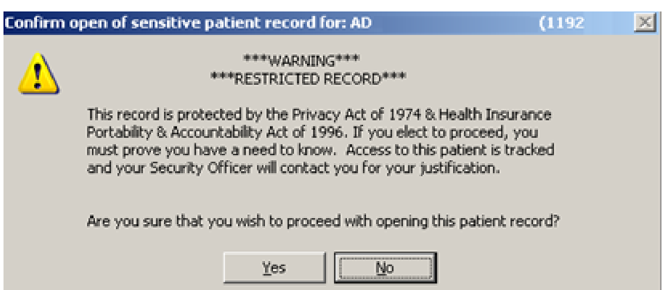



Figure 3-3: Sample Sensitive Patient warning message

Click **Yes** to open the patient record. Otherwise, click **No**.

## 3.2 Reminders Tab

The **Reminders** tab displays reminders that are pulled from RPMS: Health Summary report reminders, EHR Clinical Reminders, HMS Reminders, CMET Reminders, and Immunization Forecaster Reminders. The default view is the Health Summary reminders.

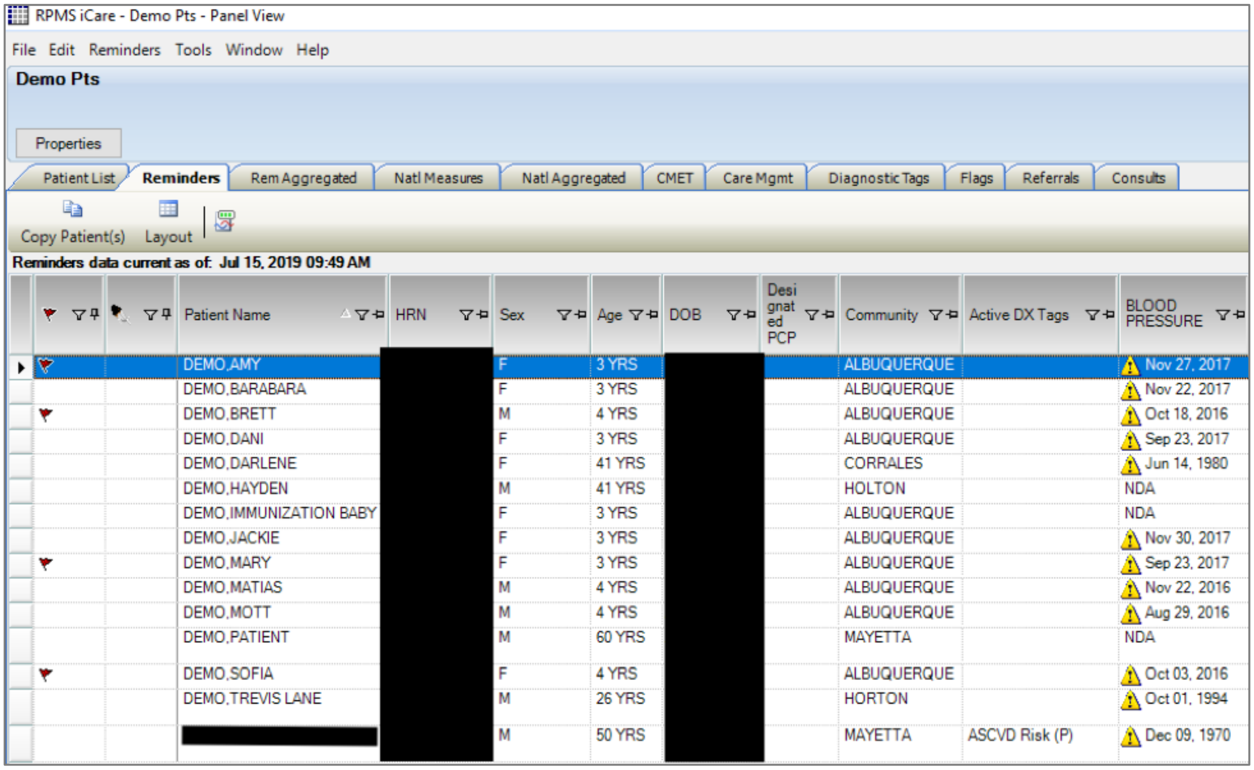



Figure 3-4: Sample **Reminders** tab

The Reminders Glossary contains information about each of the Reminders. To view this glossary, select **Help** | **Reminders Glossary.**

### 3.2.1 Reminders Tab Layout

The default view displays the standard Patient demographic columns (see Figure 3-4) plus selected active Reminders.

Table 3-2: Sample **Reminders** tab

| Column | Information |
|---|---|
| Individual Columns | There are individual columns for each active Reminder. |

Double-click any row in the grid to access the **Reminders** tab of the **Patient Record** window.

The default sort order is alphabetical by Patient Name. You can sort, filter, and perform other functions on the columns.

#### 3.2.1.1 Due/Overdue Dates

A date will display under each of the particular reminder's column if the test or procedure is currently due. A yellow triangle icon will display if the test or procedure is overdue, as shown below.


Figure 3-5: Sample overdue date for Pelvic Exam Reminder

#### 3.2.1.2 Tooltip for Reminder

Hover your mouse over a reminder column heading to view information about it. The information is pulled from the Reminders application. The reminder tooltip will tell you what the type of the reminder is by the Source and Category.

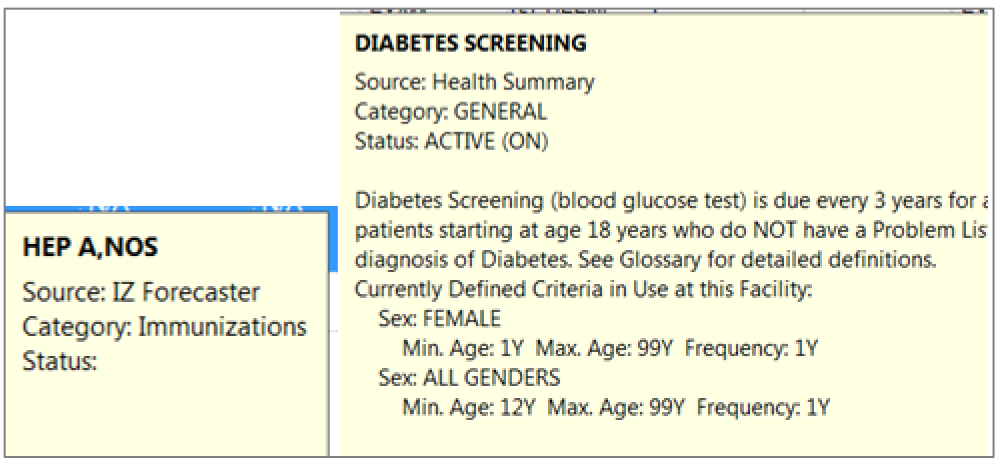



Figure 3-6: Reminder hover text

### 3.2.2 Reminders Tab Toolbar

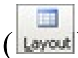
The reminder logic is calculated and cached for display. The reminder logic is updated nightly by the nightly background job as well as once a week by the weekly job. The toolbar shows the date for which the data is effective.

Section 2.1.2 provides information about the buttons on right side of window of the toolbar.

### 3.2.3 Layout

The Layout function determines which reminder columns to display for the current panel as well as the order and sorting that should be used.

To change the layout, do one of the following:

- Click the **Layout** (

) button.
- Select **Reminders** | **Layout**.

The **Reminders Layout** screen will display for the current panel. Here you can select the **Reminders** columns to display on your panel.

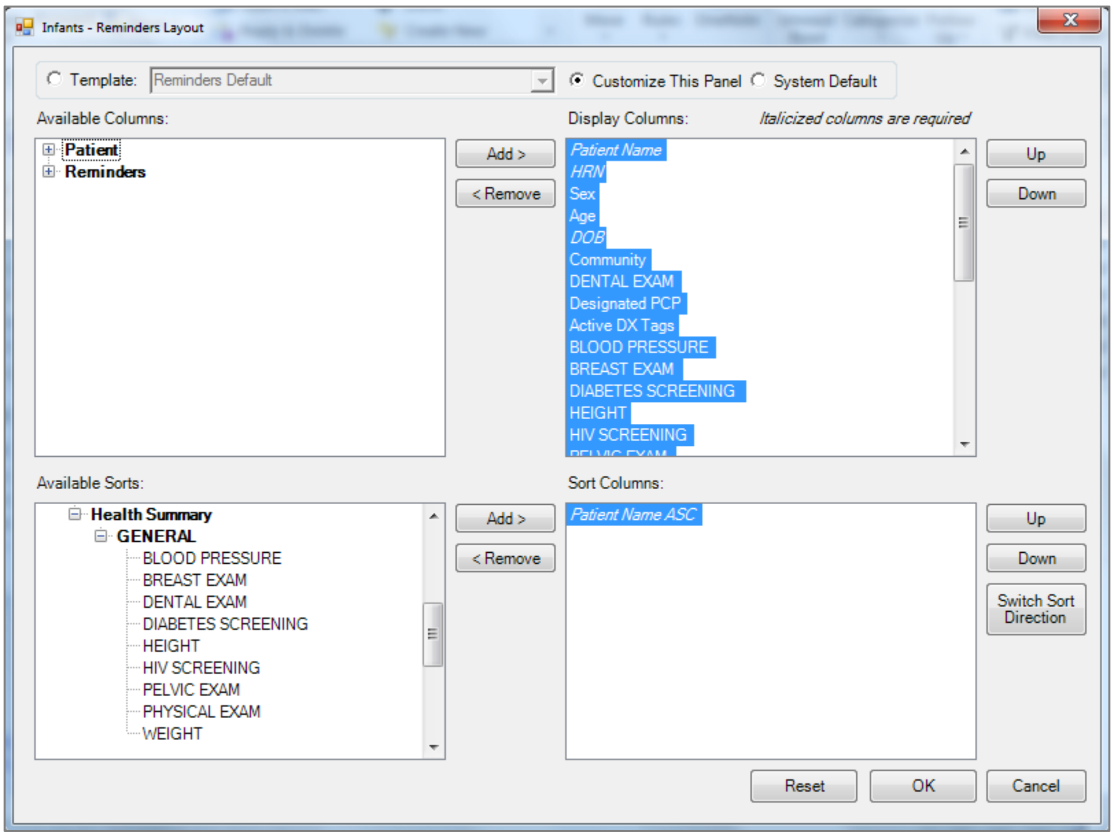



Figure 3-7: **Reminders Layout** window

There are three ways to configure your display of data: Template, Customize, or System Default. Templates can be managed in Template Management. If you have multiple reminder type templates, you can choose the one appropriate for the panel. A template can be used over and over again for many different panels.

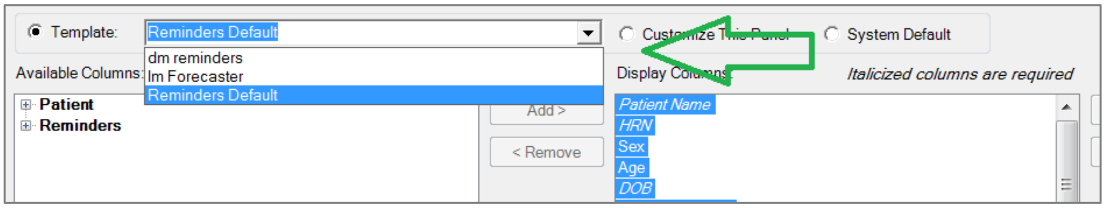



Figure 3-8: Template Creation

Select **Customize** and the configuration is only valid for this panel. **System Default** is the standard view released with iCare.

You can update the Reminders columns by selecting **Reminders** and picking the appropriate source (on the **Reminders Layout** window) to add to the **Display Columns.** Section 4.3.2 provides information about manipulating the columns the layout.

#### 3.2.3.1 Status of Background Jobs

To check on the status of the background jobs, do one of the following:

- Click the **Background Jobs** () button.
- Select **File** | **Background Jobs**.

The action accesses the **RPMS iCare - Background Jobs** window. Section 4.1.1 provides information this window.

## 3.3 REM Aggregated Tab

The **Reminders Aggregated** tab displays the percentages and counts of patients within a panel that have or have not met reminder criteria. Active reminders are reminders that are turned on at a site. The aggregated values of Reminders will be calculated at the time the view is opened.

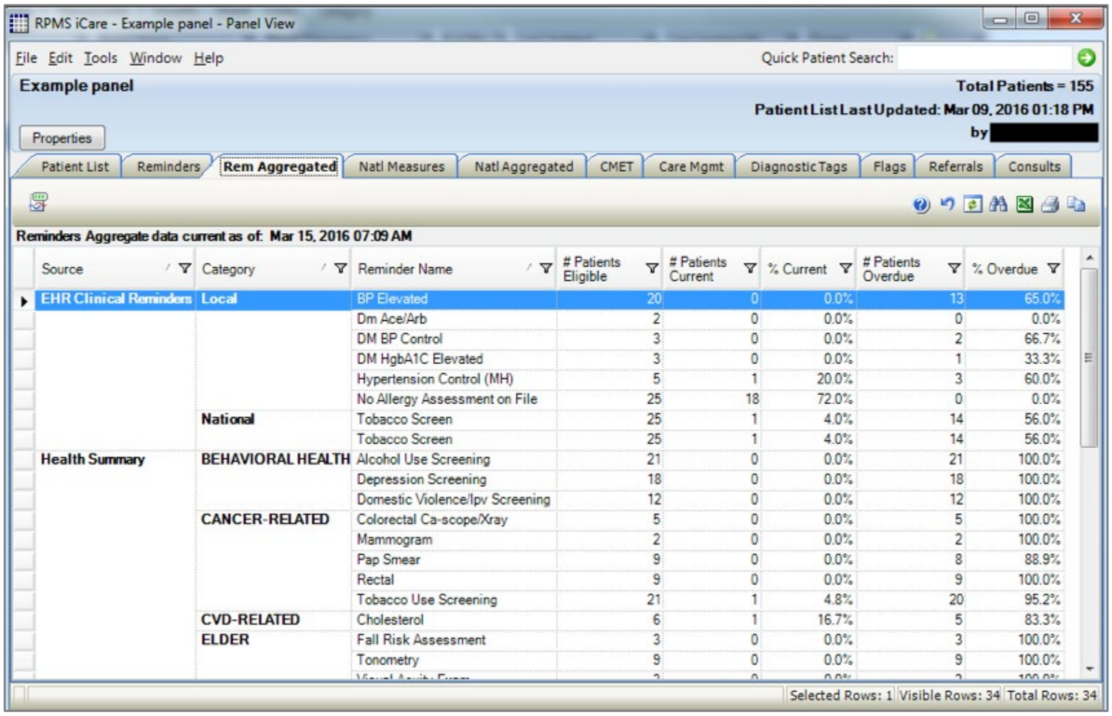



Figure 3-9: Sample **Rem Aggregated** tab

### 3.3.1 Rem Aggregated Tab Layout

The default view displays the fields on the **Reminders Aggregated** tab in the order shown in Table 3-3.

Table 3-3: Reminder Aggregated columns

| Column | Meaning |
|---|---|
| Source | The name of the source for the reminder, The following reminders will be organized into Source: Asthma Reminders, CMET Reminders, EHR Clinical Reminders, Health Summary Reminders, HIV/AIDS Reminders. |
| Category | The name of the category for the particular source. |
| Reminder Name | The name of the reminder. |
| # Patients Eligible | The total number of patients in this panel who need individual reminders. |
| # Patients Current | "Current" is defined as any due date in the future (not including today). |
| % Current | The total percentage of patients in this panel who are current for an individual reminder, that is, [# Patient Current] divided by [#Patients Eligible]. Because of the one-month grace period for the overdue definition, the total percentage of Current and Overdue cannot equal 100%. |

| Column | Meaning |
|---|---|
| # Patients Overdue | "Overdue" is defined as the due date equal or is before [today – 30 days]. This means the reminder is ***not*** counted as overdue for purposes of performance until at least a month. The total of the Patients Current and the Patients Overdue cannot equal the total Patients Eligible because of the one-month grace period for the overdue definition. |
| % Overdue | The total percentage of patients in this panel who are overdue for an individual reminder. That is, [Patients Overdue] divided by [Patients Eligible]. Because of the one-month grace period, the total percentage of Patients Current and Patients Overdue might not equal 100%. |

You can sort, filter, and perform other functions on the columns.

### 3.3.2 Rem Aggregated Tab Toolbar

The toolbar displays the date/time the data is effective.

Section 2.1.2 provides information about the buttons on the right side of the toolbar.

To check on the status of the background jobs, do one of the following:

- Click the **Background Jobs** () button.
- Select **File** | **Background Jobs**.

This action accesses the **RPMS iCare - Background Jobs** window. Section 4.1.1 provides information about this window.

## 3.4 Natl Measures Tab

The **Natl Measures** tab displays IHS national clinical performance measures as defined and reported in the RPMS Clinical Reporting System (CRS). iCare uses CRS performance logic to display whether your patients are meeting annual performance goals.

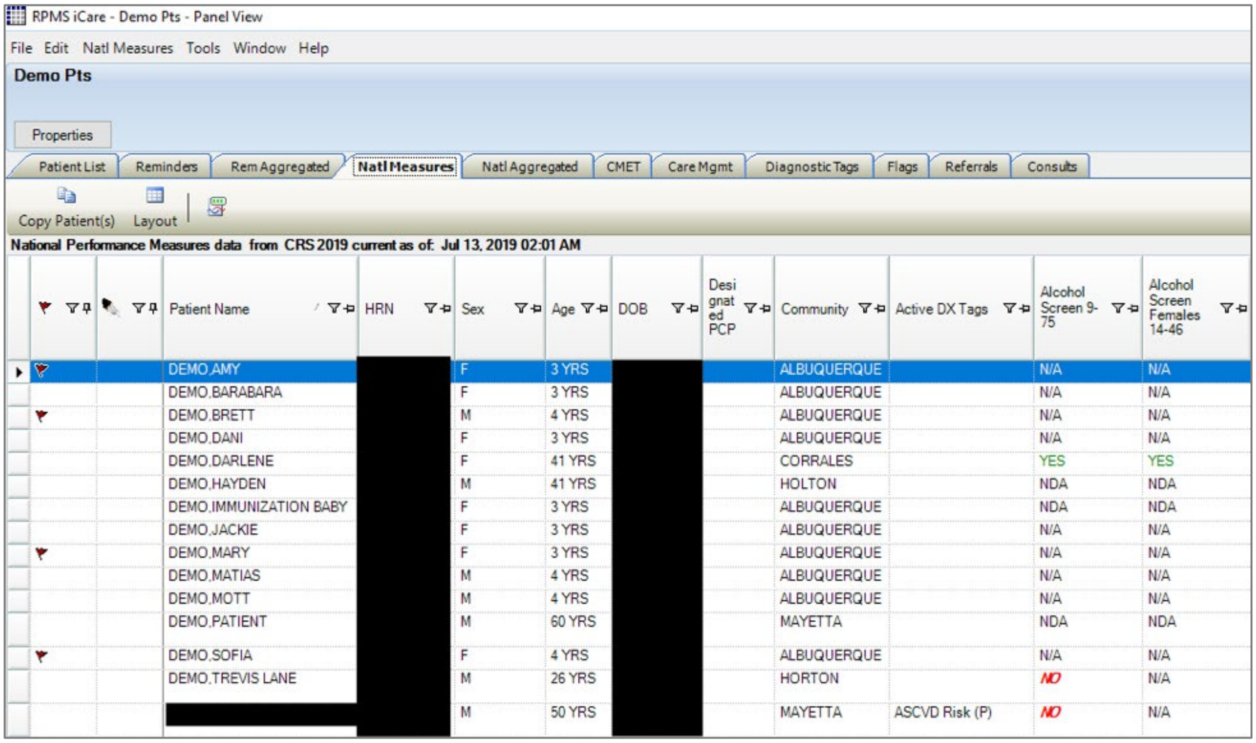



Figure 3-10: Sample **National Measures** tab

## 3.4.1 What Is National Performance (GPRA)?

The Government Performance and Results Act (GPRA) requires federal agencies to report annually to Congress on how the agency measured up against the performance targets set in its annual Plan.

Most performance measures have a denominator and a numerator defined.

- The denominator is the total population being reviewed
- The numerator is the number of patients from the denominator who meet the definition of the measure.

Some measures are just a count, such as Sealants and Topical Fluorides.

**Measure example**: GPRA Measure Cancer Screening: Pap Smear Rates: Maintain the proportion of female patients ages 21 through 64 years without a documented history of hysterectomy who have had a Pap screen within the past three years at the previous year's level (60.0%).

The denominator is the total population that is being reviewed for a specific measure. For the Pap Smear measure, the denominator is all female patients ages 21 through 64 at the beginning of the Report period. The numerator is the number of patients in the denominator who meet specific criteria. For Pap Smear, the numerator is the number of patients in the denominator who had either a Pap smear, defined by certain codes, documented in RPMS any time in the three years prior to the end of the report period or a refusal of a Pap smear in the past year.

If you are not familiar with your facility's policies and practices related to national performance reporting, talk with your site GPRA coordinator.

### 3.4.2 Natl Measures Tab Layout

The default view displays the standard Patient Demographic columns (see Figure 3-1) plus the active National GPRA measures.

Table 3-4: National Measures columns

| Column | Information |
|---|---|
| Individual Columns | The value of the performance met. |

If you double-click any record in the grid, the patient record window opens to the Natl Measures tab.

There is hover help for each performance column that displays the GPRA definition.

You can find information about all of the measures in the National Measures Glossary by selecting **Help** | **Natl Measures Glossary.**

You can sort, filter, and perform other functions on the columns.

### 3.4.3 Natl Measures Tab Toolbar

The toolbar shows the date/time for which the data is effective.

Section 2.1.2 provides for more information about the buttons on the right side of the toolbar.

#### 3.4.3.1 Layout

The Layout function determines which performance measures columns to display as well as the order and sorting that should be used in the current panel.

To change the layout, do one of the following:

- Click the **Layout** () button

- Select **National Measures** | **Layout**

The **Natl Measures Layout** screen for the current panel will display.

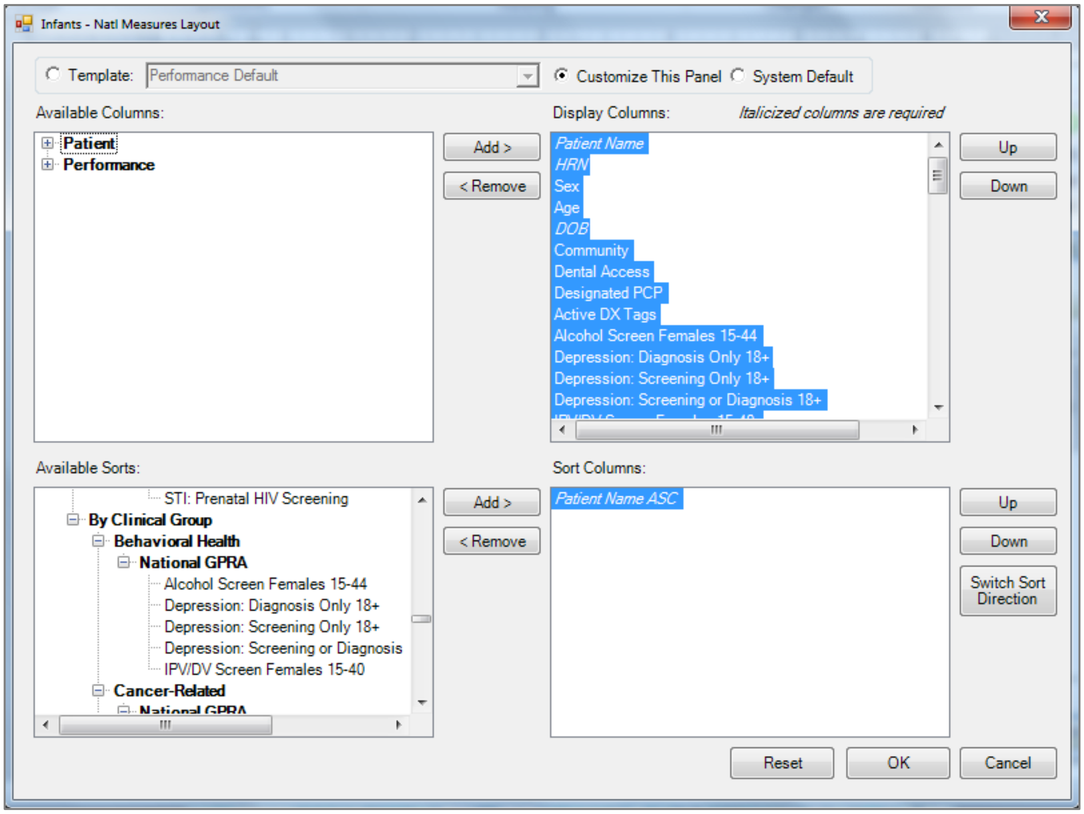



Figure 3-11: **Natl Measures Layout** window

If you choose to add the CRS Pop column (under **Patient** | **Demographics**) to the **National Measures** tab, it will display the value(s) describing the population category defined by CRS. The CRS Population categories include: UP (User Population), AC (Active Clinical), AD (Active Diabetic), etc. The population is a text string from the Denominator column of the CRS Patient List report that will be calculated for each patient within the weekly performance measures background process.

Section 4.3.2 provides information about using the features of the layout window.

### 3.4.3.2 Status of Background Jobs

To check on the status of the background jobs, do one of the following:

- Click the **Background Jobs** ( ) button.
- Select **File** | **Background Jobs**.

This action accesses the **RPMS iCare - Background Jobs** window. Section 4.1.1 provides information about this window.

# 3.5 Natl Aggregated Tab

The National Aggregated tab information is based on the format of the Summary Page from the CRS National GPRA report. It displays a summarized overview of the national performance measure data for patients in the panel being viewed.

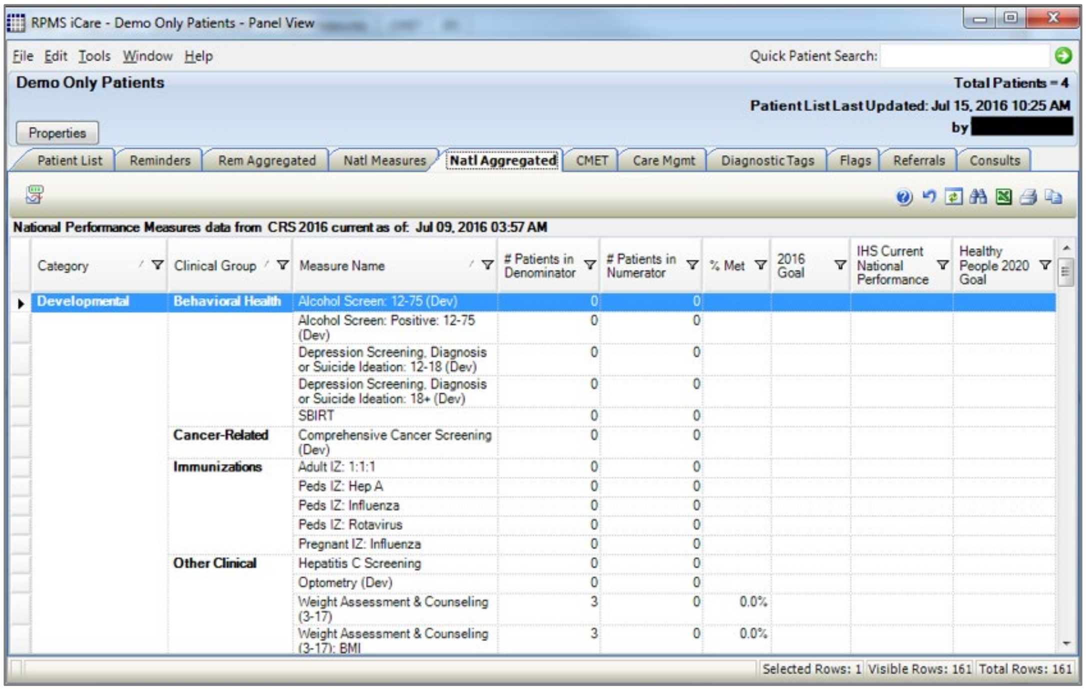



Figure 3-12: Sample **Natl Aggregated** tab

## 3.5.1 Natl Aggregated Tab Layout

The following data is displayed on the **Natl Aggregated** tab.

Table 3-5: Natl Aggregated columns

| Column | Meaning |
|---|---|
| Category | The name of the category associated with the measure. |
| Clinical Group | The name of the clinical performance group. |
| Measure Name | The measure title derived from the Summary Report (iCare pulls from the first column of the CRS Summary Report). The hover help displays a description of the performance logic for each cell in the column. |
| # Patients in Denominator | The total number of patients in this panel who meet the denominator definition. |
| # Patients in Numerator | The total number of patients in this panel who meet the numerator definition. |
| % Met | The percentage of the panel who meet the measure, derived by dividing the denominator total by numerator total. |

| Column | Meaning |
|---|---|
| *year* Goal | The value will be the same as the one that displays in the GPRA column on the Summary Page from the CRS National GPRA report. The *year* is the most recent year with final goals recorded. |
| IHS Current National Performance | The value will be the same as the one that displays in the Nat'l column on the Summary Page from the CRS National GPRA report. |
| Healthy People 2020 Goal | The value shows the 2020 goals detailed in CRS. |

You can sort, filter, and perform other functions on the columns.

### 3.5.2 Natl Aggregated Tab Toolbar

The toolbar shows the date/time for which the data is current.

Section 2.1.2 provides more information about the buttons on the right side of the toolbar.

To check on the status of the background jobs, do one of the following:

- Click the **Background Jobs** ( ) button.
- Select **File** | **Background Jobs**.

This action accesses the **RPMS iCare - Background Jobs** window. Section 4.1.1 provides information about this window.

## 3.6 CMET Tab

The **CMET** tab on the **Panel View** displays data related to the Events, Tracked Events, and Follow-up Events for the panel of patients. Please see the Care Management Event Tracking User Manual for details.


Figure 3-13: Sample **CMET** tabs

### 3.6.1 Events Sub-Tab

The **Events** sub-tab provides data that was last mined on the date displayed on this **Events** window.

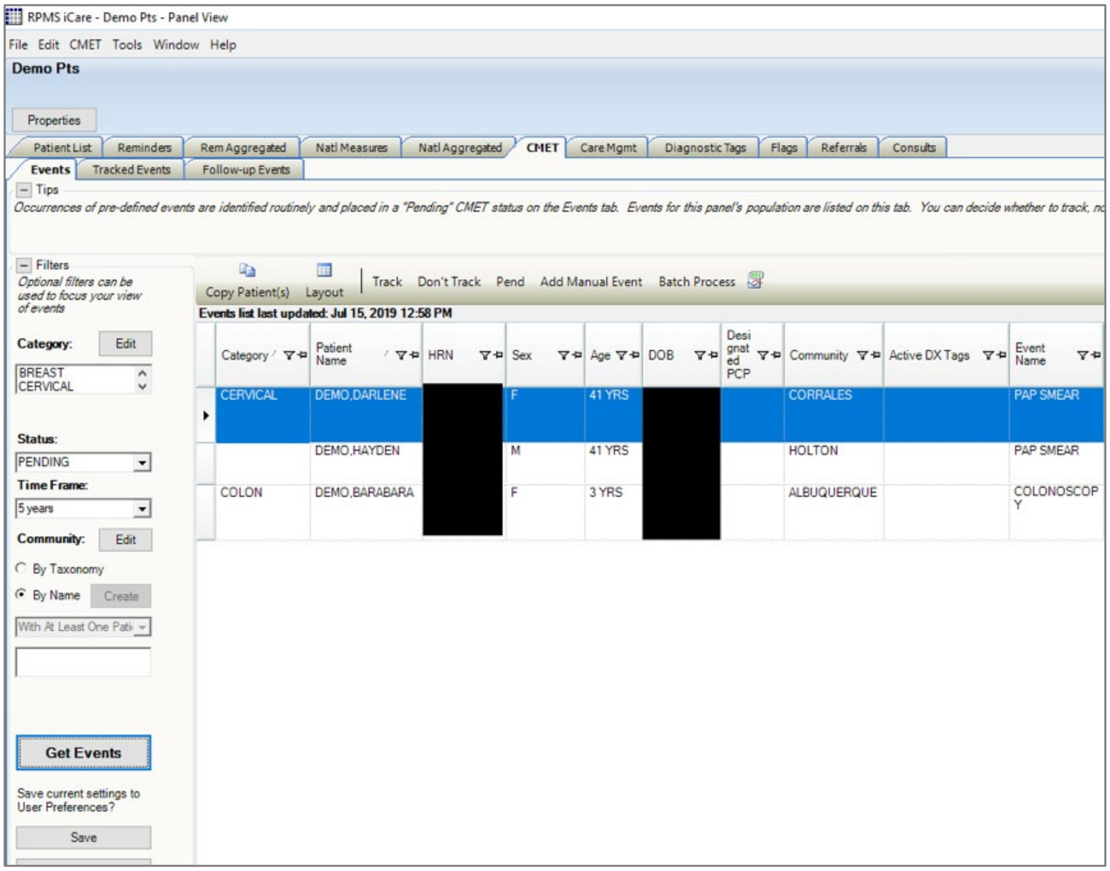



Figure 3-14: Sample **Events** sub-tab

The following table provides information about the default columns.

Table 3-6: Default columns

| Column | Meaning |
|---|---|
| Category | The category of the event: Breast, Cervical, Colon, Skeletal, STI. |
| Patient Name | Required field that will link to the **Events** sub-tab of the **CMET** tab on the Patient Record if you double-click on the name. |
| HRN | The patient's health record number. |
| Sex | F (for female) or M (for male). |
| Age | Patient's age today. |
| DOB | Patient's date of birth. |
| Designated PCP | Designated Primary Care Provider, if any. Not all facilities use this field to empanel patients. |
| Community | Patient's community of residence. |
| Active DX Tags | Predefined Diagnosis definitions ("tags") that iCare has proposed for this patient, based on the tagging function. |
| Event Name | The name of the event. |

| Column | Meaning |
|---|---|
| Event Date | The date associated with the event. |
| Result | The date of the result of the event. This cell also has hover help, such as V Radiology. |
| Status | The status of the event. |
| Status Comments | Text of any comments about the status. |
| Last Modified Date/Time | The date and time the record was last modified. |
| Last Modified By | The name of the person who last modified the record. Initial job means it is the initial record. |

Double-click the underlined **Event Date** to access the **Visit Detail** pop-up.

Double-click the underlined **Result Date** to access a particular detail pop-up, for example, Women’s Health Detail.

You can sort, filter, and perform other functions on the columns.

## 3.6.2 Events Sub-Tab Toolbar

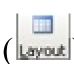
The toolbar shows the date/time the data is effective.

Section 2.1.2 provides information about the buttons on the right side of the window.

### 3.6.2.1 Layout

The Layout function determines the columns on the **Events** sub-tab for the current panel.

To select the layout function, do one of the following:

- Click the **Layout** (
) button.
- Select **File** | **Layout**.
- Select **CMET** | **Events** | **Layout**.

This action accesses the **Events Layout** window.

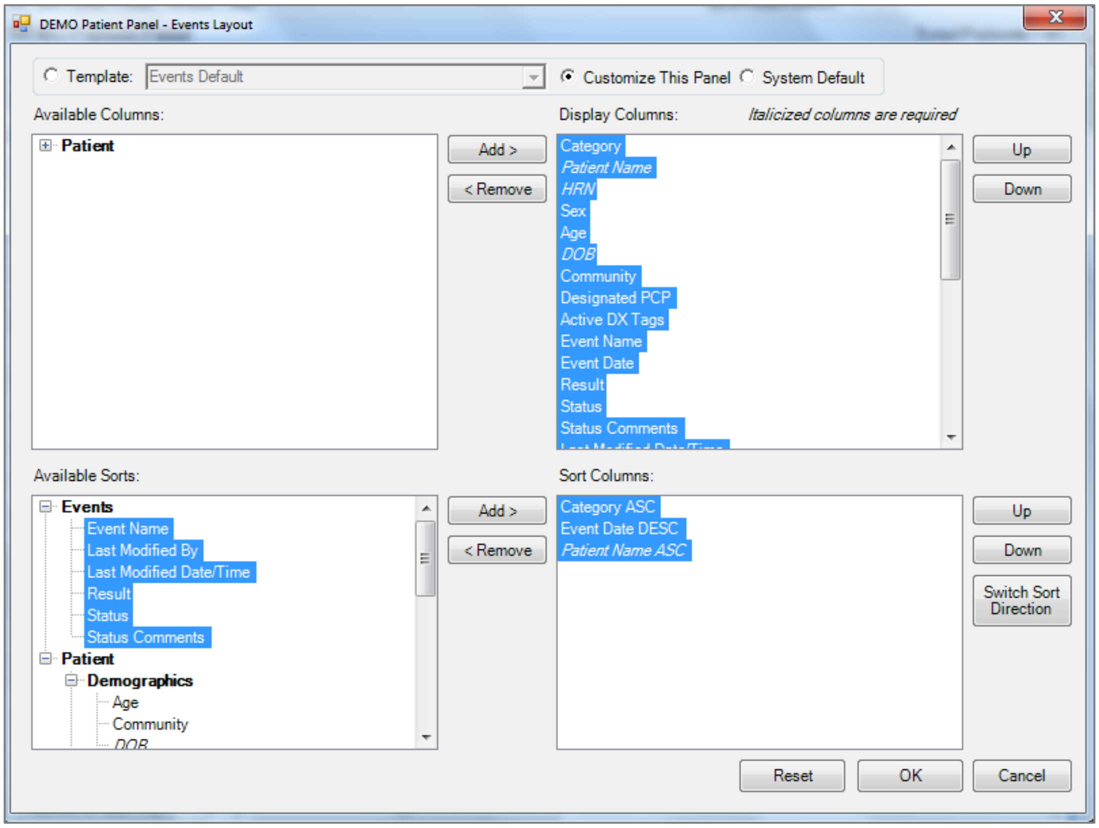



Figure 3-15: **Events Layout** window

Section 4.3.2 provides information about using the features of the layout window.

# 3.7 Tracked Events Sub-Tab

The CMET events that are identified as Tracked for the current panel will display on the **Tracked Events** sub-tab.

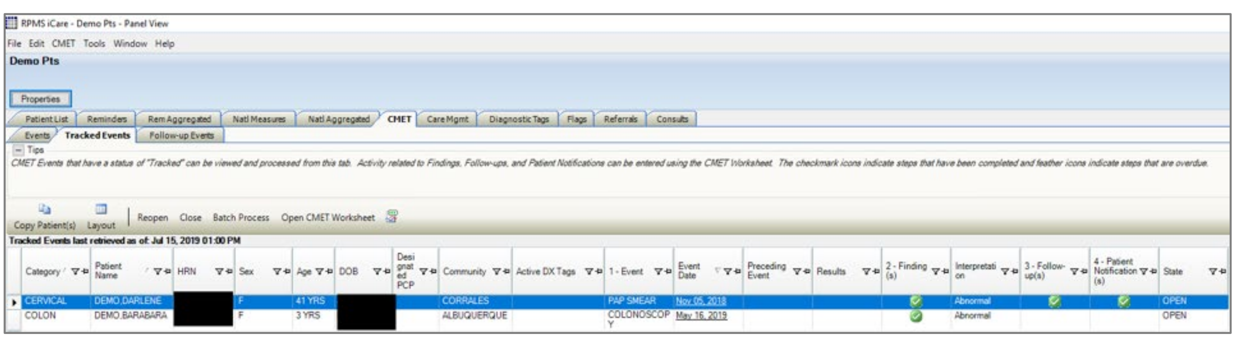


Figure 3-16: Sample **Tracked Events** sub-tab

### 3.7.1 Tracked Events Sub-Tab Layout

You can sort, filter, and perform other functions on the columns. Table 3-7 provides information about the columns.

Table 3-7: Columns

| Column | Meaning |
|---|---|
| Category | The category of the tracked event: Breast, Cervical, Colon. Skeletal, STI. |
| Patient Name | Required field that will link to the Tracked Events sub-tab of the CMET tab on the Patient Record if you double-click on it. |
| HRN | Patient’s health record number. |
| Sex | F (for female) or M (for male) |
| Age | Patient’s age today. |
| DOB | Patient’s date of birth. |
| Designated PCP | Designated Primary Care Provider, if any. Not all facilities use this field to empanel patients. |
| Community | Patient’s community of residence. |
| Active DX Tags | Predefined Diagnosis definitions (“tags”) that iCare has proposed for this patient, based on the tagging function. |
| 1 - Event | Name of the event. |
| Event Date | The date associated with the event. |
| Preceding Event | Contains the date of the preceding event. Double-click on this underlined date to open the **Tracked Events** sub-tab of the **CMET** tab on the Patient Record. The chain of events in the same category is revealed. In addition, there is hover help when you move your mouse over the date (for example, PAP SMEAR 139). |
| Results | The date of the result of the event. Hover help will describe where the result came from (V-RADIOLOGY, V-LAB). |
| 2 - Finding(s) | The icons indicate if the event has any findings. |
| Interpretation | The interpretation of the Finding. |
| 3 - Follow-up(s) | The icon indicates if the event has follow-up data. |
| 4 - Patient Notification(s) | The icon indicates if the event has any patient notification data. |
| State | The state of the tracked event (Open or Closed). |

When the 2 - Finding(s) cell contains the following:

- The feather ( ) icon indicates that the element is overdue; hover your mouse over the icon to view the Due Date (the tickler).
- The check ( ) icon indicates that the step is complete; hover your mouse of the icon to view the Finding Due date and the Finding Value.
- Is blank indicates that the element is not complete but is not overdue.

When the 3 - Follow-up(s) cell contains the check ( ) icon, the step is complete; hover your mouse of the icon to view the Follow-up Date and the Follow-up type. If it is blank, this indicates that element is not complete but is not overdue.

When the 4 - Patient Notification(s) cell contains the check ( ) icon, the step is complete; hover your mouse of the icon to view the Notification Date and the Notification method. If it is blank, this indicates the element is not complete but is not overdue.

The Results column will display the date (Linked) if results have been mined during the nightly job. The data link will be the most recent result. Hover help will describe where the result came from, for example, V-LAB.

#### 3.7.1.1 Layout

Use the Layout function to determine the columns on the **Tracked Events** sub-tab for the current panel.

To select the layout function, do one of the following:

- Click the **Layout** ( ) button.
- Select **File** | **Layout**.
- Select **CMET** | **Tracked Events** | **Layout**.

This action accesses the **Tracked Events Layout** window.

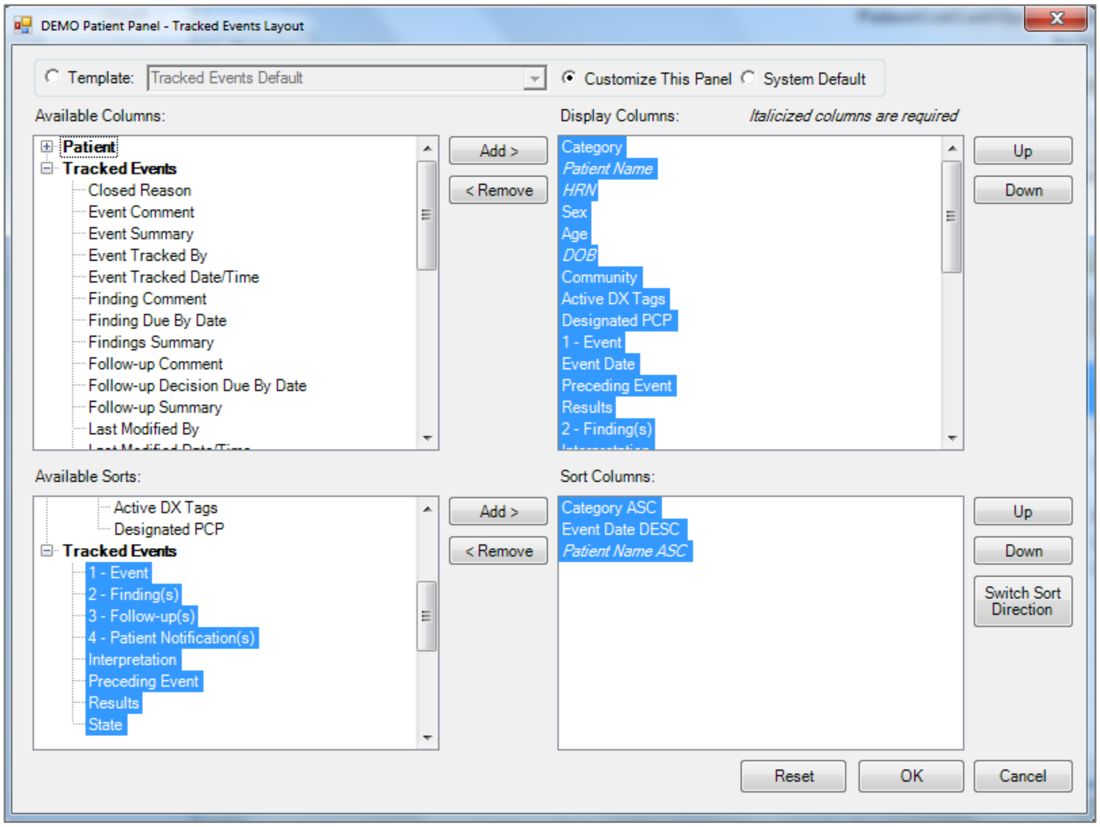



Figure 3-17: **Tracked Events Layout** window

Section 4.3.2 provides information about using the features of the layout window.

## 3.8 Follow-up Events Sub-Tab

The **Follow-up Events** sub-tab contains follow-up actions. The follow-up events are generated by the recommendation(s) made for the follow-up of the Tracked CMET event.

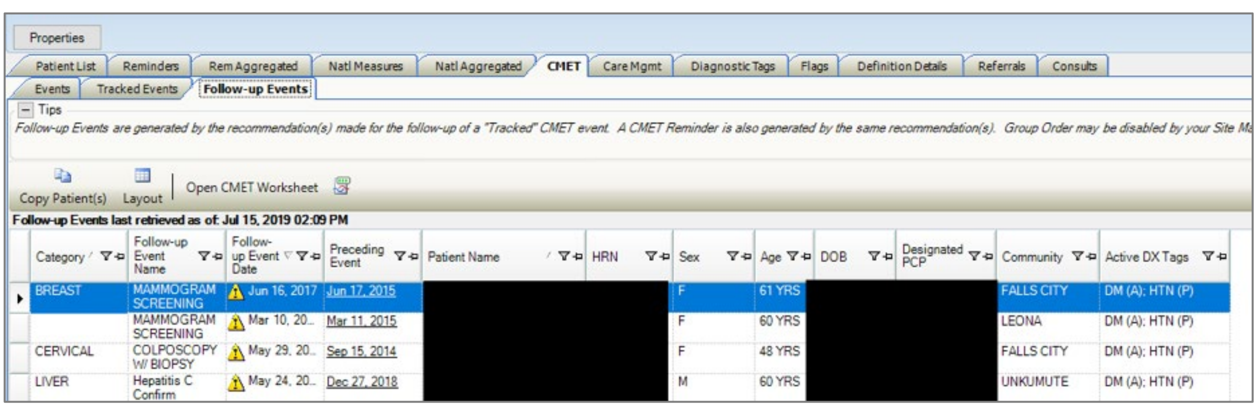



Figure 3-18: Sample **Follow-up Events** sub-tab

The Follow-up Event Name and Date are pulled from step 3 of the CMET process. This is the provider's recommendation for follow-up. The date is the date due for the follow-up.

A CMET Reminder is also generated by the same recommendation(s).

### 3.8.1 Follow-up Events Sub-Tab Layout

The data on the **Follow-up Events** sub-tab is effective as of the date on the window.

The following table provides information about the columns.

Table 3-8: Sub-Tab columns

| Column | Meaning |
|---|---|
| Category | The category for the Follow-up Event: Breast, Cervical, Colon, Skeletal. |
| Follow-up Event Name | The name of the event. |
| Follow-up Event Date | The follow-up date for the event. |
| Preceding Event | Contains the date of the preceding event. Double-click on this underlined date to open the **Follow-up Events** sub-tab of the **CMET** tab on the Patient Record. The chain of events in the same category is revealed. |
| Patient Name | Required field that will link to the **Follow-up Events** sub-tab of the **CMET** tab on the Patient Record if you double-click the name. |
| HRN | Patient's health record number. |
| Sex | F (for female) or M (for male) |
| Age | Patient's age today. |
| DOB | Patient's date of birth (required) |
| Designated PCP | Designated Primary Care Provider, if any. Not all facilities use this field to empanel patients. |
| Community | Patient's community of residence. |
| Active DX Tags | Predefined Diagnosis definitions ("tags") that iCare has proposed for this patient, based on the tagging function. |

#### 3.8.1.1 Layout

Use the Layout function to determine the columns on the Follow-up Events sub-tab for the current panel.

To select the layout function, do one of the following:

- Click the **Layout** (Layout) button.
- Select **File** | **Layout**.

- Select **CMET** | **Follow-up Events** | **Layout**.

This action accesses the **Follow-up Events Layout** window.

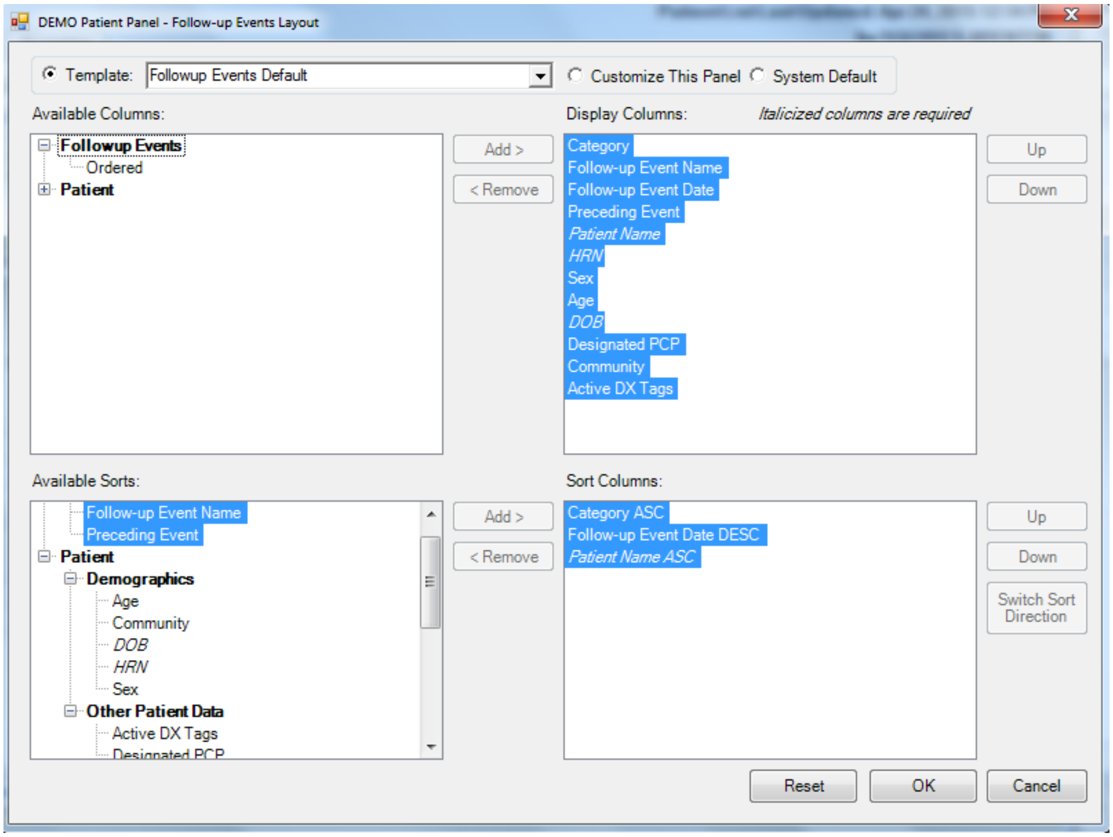



Figure 3-19: **Follow-up Events Layout** window

Section 4.3.2 provides information about using the features of the layout window.

## 3.9 Care Mgmt Tab

The **Care Mgmt** tab displays data related to various groups of the patients in the panel.

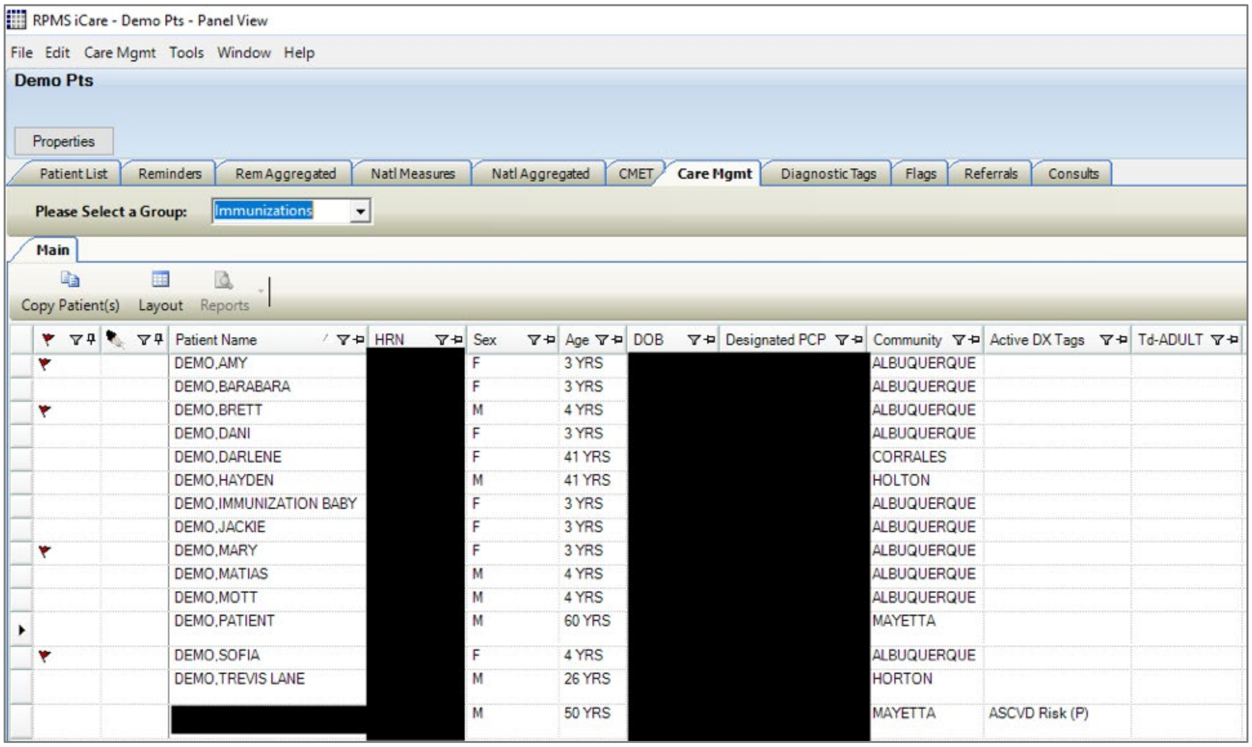



Figure 3-20: Sample **Care Mgmt** tab

This tab displays information from the register (shown in the **Please Select a Group** field) for the patients in the panel. You must select an option for this field to view the data.

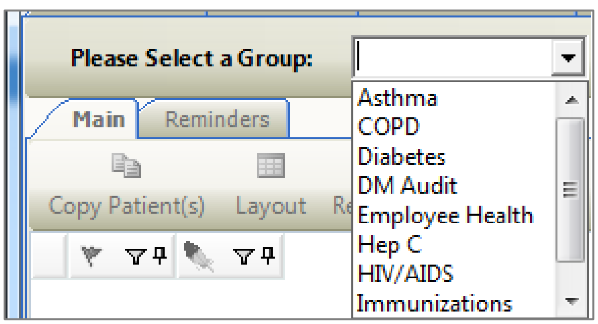



Figure 3-21: Various groups for the **Care Mgmt** tab

iCare provides you with specific underlying case management groups. The underlying RPMS application for the HIV/AIDS Register option is BKM.

## 3.9.1 Main Sub-Tab

The **Main** sub-tab displays specific information about the patients in the particular panel.

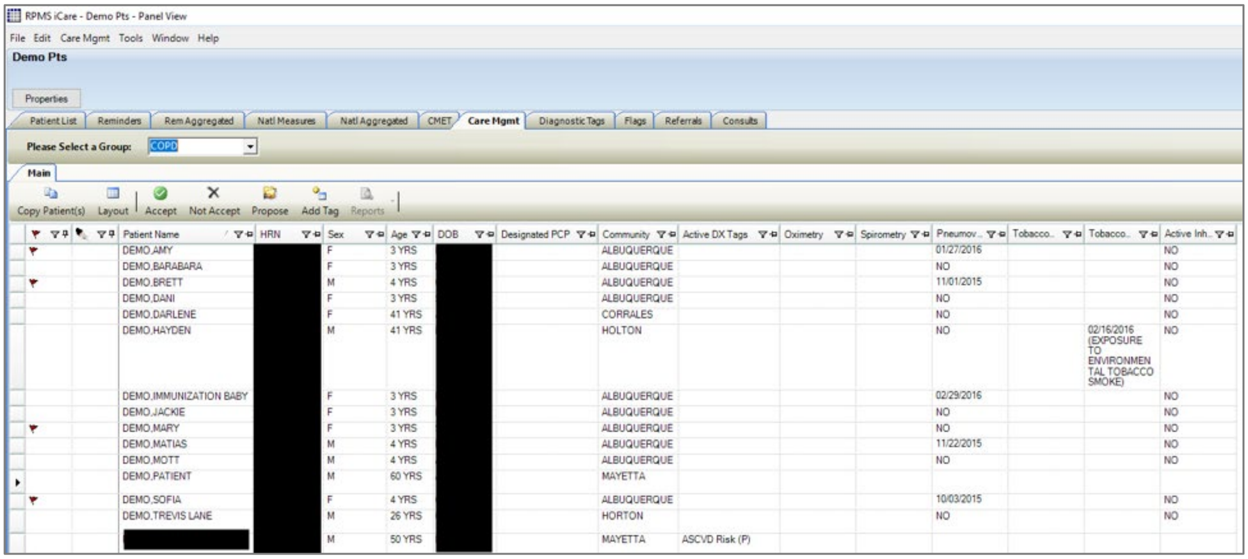


Figure 3-22: Sample **Main** Sub-Tab View for all groups

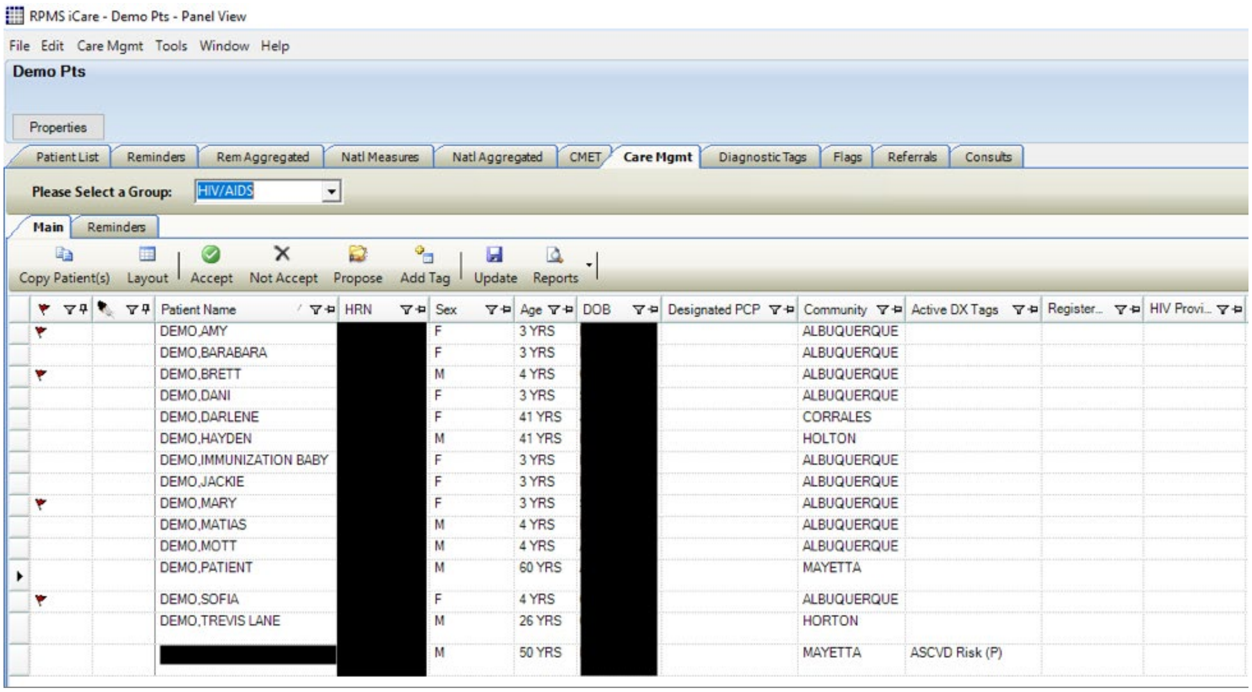


Figure 3-23: Sample **Main** Sub-Tab View for HIV/AIDS only

| | |
|---|---|
| **Note**: | The **Main** sub-tab displays for all groups. The Reminders sub-tab only displays for the HIV/AIDS group. |

#### 3.9.1.1 Main Sub-Tab Layout

The following table provides information about the default columns for the COPD, Diabetes, DM Audit, Employee Health, Hep C, HIV/AIDS, Immunizations, Pediatric, and Prenatal groups.

The default view displays the standard Patient Demographic columns (see Figure 3-1) plus columns unique to each group.

Table 3-9: Patient Demographic columns

| Column | Meaning |
|---|---|
| Remaining Columns | The group-specific columns — see Appendix A |

You can sort, filter, and perform other column functions.

#### 3.9.1.2 Main Sub-Tab Toolbar

Section 2.1.2 provides information about the buttons on the right side of the toolbar.

#### 3.9.1.3 Copy Patient(s)

The Copy function copies the selected patient's information to the iCare clipboard. Then you can go to another panel view (for a different patient panel) and paste the patient's information.

#### 3.9.1.4 Layout

Each Care Mgmt group has their specific columns for their **Layout**. Each group has its own default layout.

Click the **Layout** button (or select **Care Mgmt** | **Main** | **Layout**) to display the panel's layout of the columns.

Section 4.3.2 provides information about using the features of the layout window.

#### 3.9.1.5 Change Status

> **Note**: The Change Status buttons do not apply to Employee Health, Hep C, Immunizations, and Pediatric groups since there is no corresponding Diagnostic Tag.

Use the **Accept**, **Not Accept**, **Proposed**, and **Add Tag** buttons to change the Status on an existing record (or select **Care Mgmt** | **Main**).

Select the patient record whose status you want to change and click the appropriate **Change Status** button to display the **Update Diagnostic Tag** dialog.

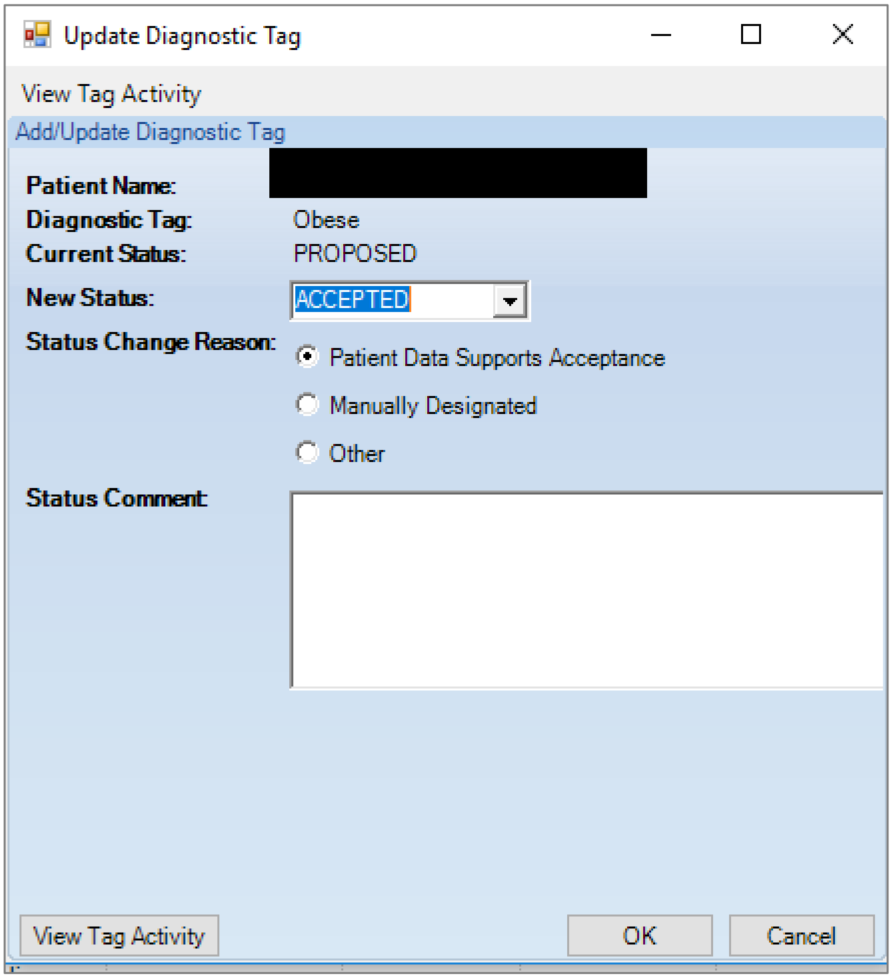



Figure 3-24: Sample **Update Diagnostic Tag** dialog

All fields are required on this dialog.

The option buttons available for the Status Change Reason change according to the selection in the **New Status** field.

The Not Accept function cannot be performed on multiple patients or multiple tags.

Section 3.10.3 provides information about the fields and **View Tag Activity** button on this dialog.

#### 3.9.1.6 Add Tag

> **Note**: The **Add Tag** button does not apply to Employee Health, Hep C, Immunizations, and Pediatric groups since there is no corresponding Diagnostic Tag.

Select a patient to whom you want to add a tag and click the **Add Tag** () button (or select **Care Mgmt** | **Main** | **Add Tag**) to display the **Add Diagnostic Tag** dialog. This is a manual add that allows a provider to manually assign one or more of the diagnosis tags to patients who did not meet the tag's criteria for being proposed automatically. Section 3.10.2.3 provides information about using the **Add Tag** button.

#### 3.9.1.7 Update

| |
|---|
| **Note**: The **Update** button applies to the HIV/AIDS group only. |

Batch-update register data for selected patients by clicking the **Update** () button (or by selecting **Care Mgmt** | **Main** | **Update**). The **Batch Update Data** dialog will display. Refer to the *HIV/AIDS Management User Manual* for more information.

#### 3.9.1.8 Reports Button

| |
|---|
| **Note**: The **Reports** button applies to the HIV/AIDS group only. |

Select one or more patients and click the list on **Reports**  button to view the Quality of Care report (or select **Care Mgmt** | **Main** | **Reports**).The report scope is based on the patients that are members of a given panel.

Refer to the *HIV/AIDS Management User Manual* for more information.

### 3.9.2 Reminders Sub-Tab for HIV/AIDS Register

The **Reminders** sub-tab view displays the disease/register-specific reminders for the patient. Refer to the HIV Management System User Manual for more information.

## 3.10 Diagnostic Tags Tab

The **Diagnostic Tags** tab provides a comprehensive view of all tag history for a patient (regardless of the tag status), provides auto-accept and auto-reject capabilities, allows the user to accept a proposed tags for multiple patients, allows the user to reject proposed tags, and allows the user to update of tag status.

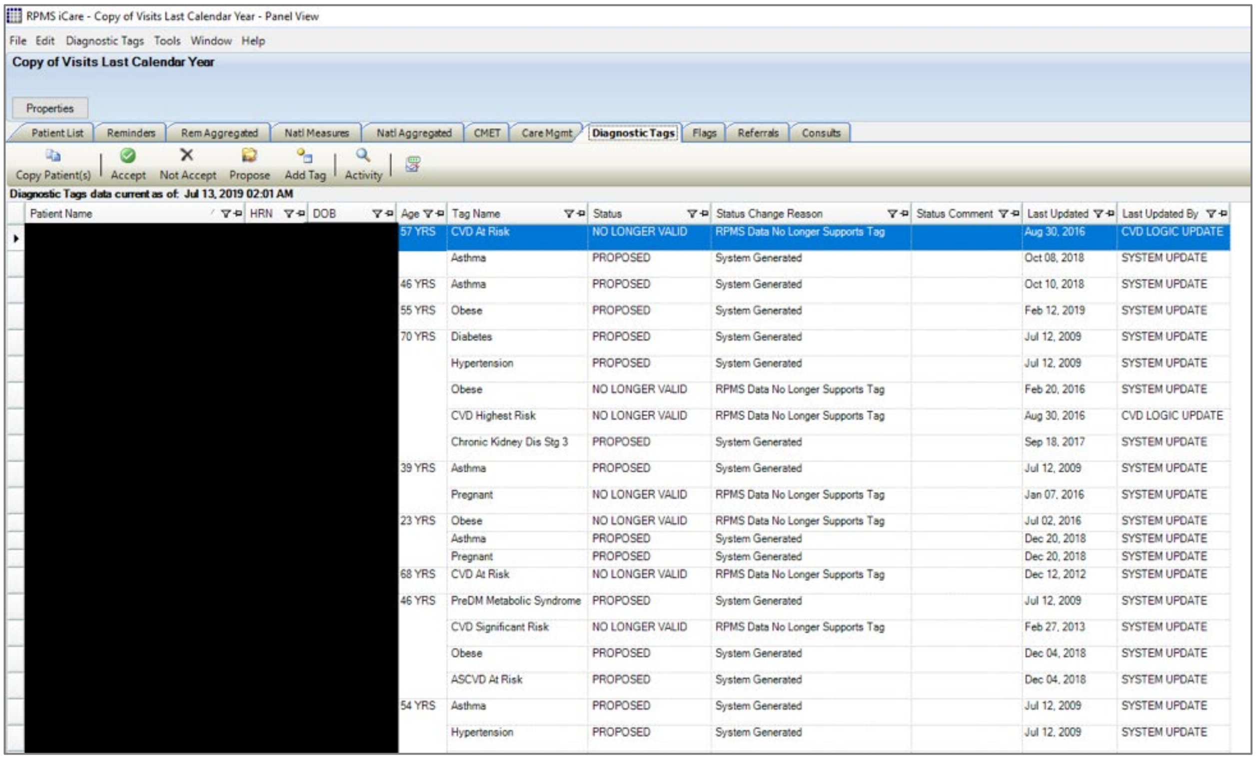



Figure 3-25: Sample **Diagnostic Tags** tab

Tags that are identified through iCare's execution of the pre-defined tag criteria will start with an initial tag status of PROPOSED. From there, you have several options including accepting a tag or not accepting the validity of a tag for any patient. You can edit these statuses from within this tab.

## 3.10.1 Diagnostic Tags Tab Layout

Table 3-10 provides information about the columns.

Table 3-10: Diagnostic tags

| Column | Meaning |
|---|---|
| Patient Name | Required field that will link to the Patient Record if you double-click the name. |
| HRN | Patient's health record number. |
| DOB | Patient's Date of Birth. |
| Age | Patient's age. |
| Tag Name | The name of the tag for the patient. |

| Column | Meaning |
|---|---|
| Status | ACCEPTED: means the patient is a member of specified formal case management registers with status of Active, Decease, Transient, Non IHS, Lost to Follow Up, or Noncompliant.<br>PROPOSED: means the patient has Status Un-reviewed or Inactive in the register.<br>NO LONGER VALID: means the RPMS data no longer supports the tag.<br>SUPERCEDED: means the level of the tag has gone to a higher level. |
| Status Change Reason | The reason the status changed can be: System Generated (system), RPMS Data No Longer Supports Tab (system), Patient Data Does Not Support Acceptance (user), Manually Designated (user), Other (user — with required comment field), on Existing RPMS Register (system). |
| Status Comment | The text of any comments entered about the status change (used with the Other status change reason). |
| Last Updated | The date the content of the panel was last updated by a manual (user) repopulate, by an auto-repopulate, or the panel created date, if the panel has never been repopulated. |
| Last Updated By | The name of the user who either created or last repopulated the panel (in certain cases, it may contain the name of a process like SYSTEM UPDATE instead of a person). |

There is hover help for the Tag Name cell that shows the name of the tag. Double-click any record to go the **Diagnostic Tags** tab of the **Patient Record** window.

You can find information about all of the tags in the **Diagnostic Tag Glossary** (select **Help | Diagnostic Tag Glossary**). You can sort, filter, and perform other functions on the columns.

## 3.10.2 Diagnostic Tags Toolbar

The toolbar shows the date/time for which the data is effective.

iCare will classify tags into one of five statuses: proposed (pending) (P), accepted (A), not accepted (NA), No longer valid (NLV) and Superseded (S). Those tags with a classification of NA will not display.

Section 2.1.2 provides information about the buttons on the right side of the toolbar.

### 3.10.2.1 Copy Patient(s)

This action copies the patient's information to the clipboard.

Select one or more patients and then do one of the following:

- Click the **Copy Patient(s)** (

) button.

- Select **Diagnostic Tags** | **Copy Patient(s)** .
- Press Ctrl-C.

You must go to another panel view (for a different patient panel) and paste the patient's information.

### 3.10.2.2 Change Status

Use the **Accept**, **Not Accept**, and **Proposed** buttons to change the status on an existing record (or select **Care Mgmt** | **Main**). Section 3.9.1.5 provides information about using these buttons.

### 3.10.2.3 Add Tag

Select a patient to whom you want to add a tag and click the **Add Tag** () button (or select **Diagnostic Tags** | **Add Tag**) to display the **Add Diagnostic Tag** dialog. This is a manual add that allows a provider to manually assign one or more of the diagnosis tags to patients who did not meet the tag's criteria for being proposed automatically.

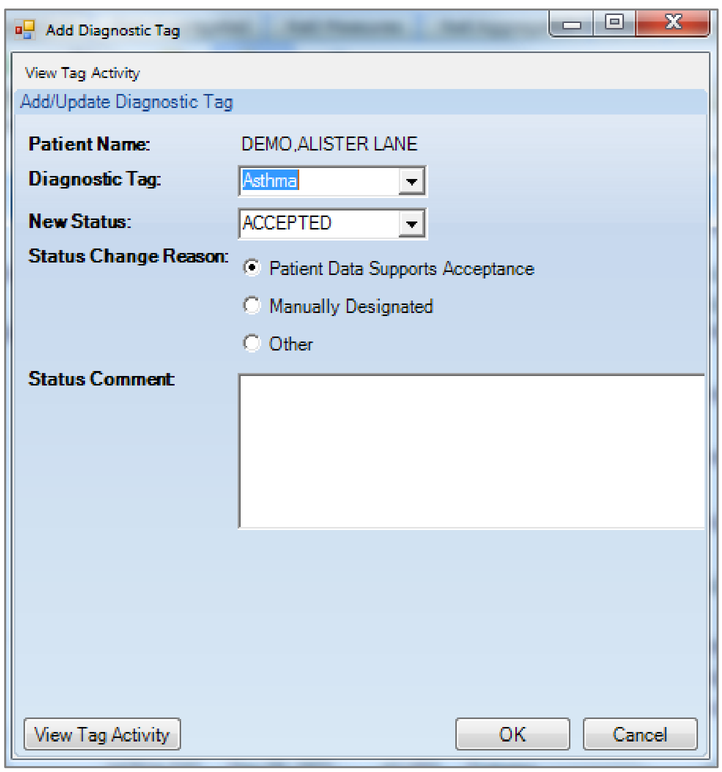



Figure 3-26: **Add Diagnostic Tag** dialog

This dialog shows information about the patient named in the **Patient Name** field (the one you selected).

When you have completed the dialog, click **OK** to add the information to the **Diagnostic Tags** tab on the **Panel View**. (Otherwise, click **Cancel**.)

#### 3.10.2.4 Tag Activity

You can view existing tag activity about the patient by clicking the **View Tag Activity** button. The **Diagnostic Tag Activity** pop-up displays. Section 3.10.3 provides more information about this pop-up.

#### 3.10.2.5 Fields on Add Diagnosis Tag Dialog

All fields are required.

**Patient Name**: The name of the patient to whom to add tag information (application populated).

**Diagnostic Tag**: The name of diagnostic tag to add for the patient. Select an option from the list to populate this field.

**New Status**: The status of the tag being added.

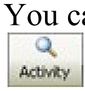
- **ACCEPTED**: This option allows you to accept a proposed tag to provide affirmation of its validity for a given patient.
- **NOT ACCEPT**: This option allows you to disapprove or not accept a diagnostic tag that has been proposed for a patient.
- **PROPOSED**: This option allows you to change the status of a diagnosis tag back to Proposed so that further review can take place.

**Reason**: Click the appropriate reason for adding the tag.

- **Patient Data Supports Acceptance**: Use when the patient data does support the tag.
- **Manually Designated**: Use when you want to manually change the tag status.
- **Other**: Use when the other reasons do not apply.

**Status Comment**: Type the reason for the change in this Free Text field. This feature provides a rich audit history for reasons for providers' decisions to accept or not accept proposed tag assignments.

### 3.10.3 Activity

You can view existing tag activity about the selected patient by clicking the **Activity** 

button on the Panel View toolbar (or by selecting **Diagnostic Tags** | **Activity**). The **RPMS iCare - Diagnostic Tag Activity** pop-up displays. This is a view-only pop-up. Multiple people can enter tags, so this pop-up shows all activity.

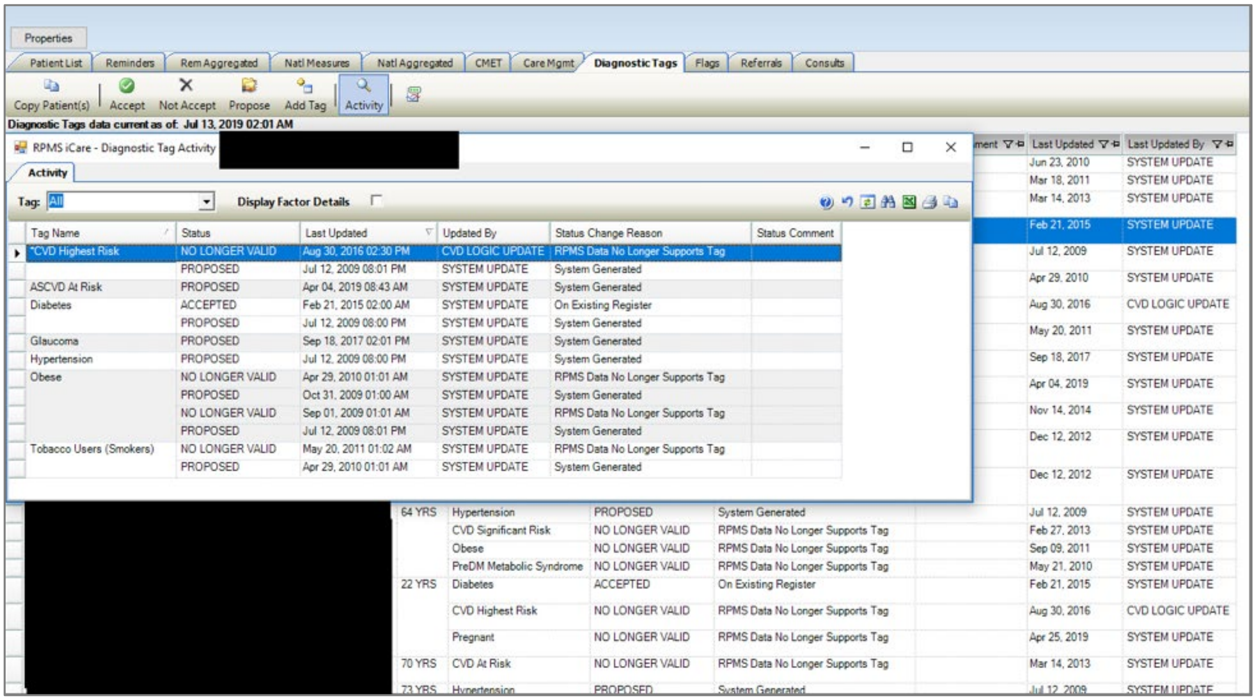



Figure 3-27: Sample Diagnostic Tag **Activity** Pop-up

Section 2.1.2 provides information about the buttons on the right side of the toolbar.

Click the **Glossary** ( ) button to display the Diagnostic Tag Glossary.

You can sort, filter, and perform other functions on the columns. You can view various tags by selecting from the **Tag** field list.

If you select the **Display Factor Details** check box, the following columns will display: Factor, Date, Item, Value. This allows you to view additional details about the tags. The default view is unchecked. You must dismiss the pop-up.

## 3.11 Flags Tab

The **Flags** tab of the Panel View displays the flags for the patients in the open panel.

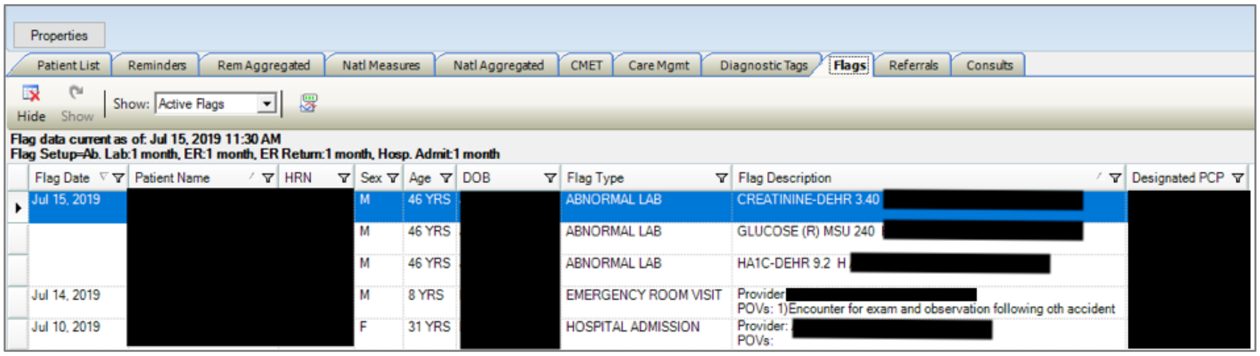



Figure 3-28: Sample **Flags** tab

The **Flags** tab displays the flag type shown in the **Show** field.

You can change the default flag display by changing the flag settings under User Preferences.

Double-click any record on this tab to go to the **Flags** tab of the **Patient Record** window.

### 3.11.1 Flags Tab Layout

The default display has the flag listed alphabetically by flag date (most recent first), by patient name, and then by flag type. No duplicate values display in the first column. This means if a particular date has more than one flag, the date will display only in the first row.

The iCare application will display an initial list of flags at first login only for the timeframe that is defined in the User Preferences. Likewise, you can change the flag view to display modified flag types and/or timeframes if you change the User Preferences. After changing the flag settings in User Preferences, refresh the flag view.

You can sort, filter, and perform other functions on the columns.

Table 3-11 provides information about the columns.

Table 3-11: Flags tab

| Column | Meaning |
|---|---|
| Flag Date | The date the flag became active, e.g., the date of the hospital admission. |
| Patient Name | This is a required field and will link to the patient's Patient Record if you double-click the name. |
| HRN | Patient's health record number. |
| Sex | Either F (for Female) or M (for Male) |

| Column | Meaning |
|---|---|
| Age | Patient's age. |
| DOB | Patient's date of birth. |
| Flag Type | This can be Abnormal Lab Values, ER Visit, Unanticipated ER Return Visit, and Hospital Visit. |
| Flag Description | A brief description of the event that caused the trigger. |
| Designated PCP | Designated Primary Care Provider, if any. Not all facilities use this field to empanel patients. |

The Flag Type column contains various flag types, as defined in the following table:

Table 3-12: Flag types

| Flag Type | Meaning |
|---|---|
| Abnormal Lab Values Alert | This flag type informs the user when a patient has abnormal lab values within a user-defined timeframe, based on the Kernel Alerts component. The Abnormal Lab Values alerts, generated from the RPMS Laboratory application, reside in the Kernel Alerts component. If the ALV alert is closed by the provider in Kernel Alerts, it will no longer display in iCare, regardless of the Flag Display Timeframe selected by the user in the User Preferences. |
| ER Visit | This flag type informs the user when a patient has an emergency room visit within a user-defined timeframe. This flag is generated directly by iCare. ER visits (clinic code 30) is the trigger for this flag. |
| Unanticipated ER Return Visit | This flag type informs the user when a patient has an emergency room visit designated as unanticipated within a user-defined timeframe. This flag is generated directly by iCare. ER visits (clinic code 30) with Visit Type "Unscheduled Revisit" is the trigger for this flag. |
| Hospital Admission | This flag type informs the user when a patient has a hospital visit within a user-defined timeframe. This flag is generated directly by iCare. Any visit with service category H where the discharge date is not the same day as the admission date is the trigger for this flag. |

## 3.11.2 Flags Tab Toolbar

The text above the grid shows the flag set-up information and how current the data is.

### 3.11.2.1 Show Field

Which flags display on this window is determined by the option selected on the **Show** field. The choices are as follows:

- **Active Flags**: Active is defined as a flag that has not expired and has not been hidden by the users.
- **Hidden Flags**: Those flags that you specified to be hidden, using the **Hide** button.

- **All Flags**: All flags, hidden as well as active.

#### 3.11.2.2 Hide

To hide a selected row in the Flag List grid, do any of the following:

- Click the **Hide** () button.
- Select **File** | **Flags** | **Hide**.
- Select the **Hide** option on the context menu.
- Press F3.

You can view the hidden flags by selecting the **Hidden Flags** option on the **Show** field.

#### 3.11.2.3 Show

If you need to re-display a hidden flag in the current view, select it from the list on the **Hidden Flags** option (from the **Show** field) and do any of the following:

- Click the **Show** () button.
- Select **File** | **Flags** | **Show**.
- Select the **Show** option on the context menu.
- Press F4.

#### 3.11.2.4 Status of Background Jobs

To check on the status of the background jobs, do one of the following:

- Click the **Background Jobs** () button.
- Select **File** | **Background Jobs**.

This action accesses the **RPMS iCare - Background Jobs** window. Section 4.1.1 provides information this window.

### 3.11.3 Flags Tab Menu Options

The options on **File** and **Tools** menus are the same those on the **Patient List** tab. Section 4.0 provides more information about these menus.

The **Flags** menu is only available when the **Flags** tab is selected. The **Hide and Show** options work like the **Hide and Show** action buttons. The **Refresh** option refreshes the flags display to show the most recent changes.

## 3.12 Referrals Tab

The **Referrals** tab displays referral data for the panel of patients.

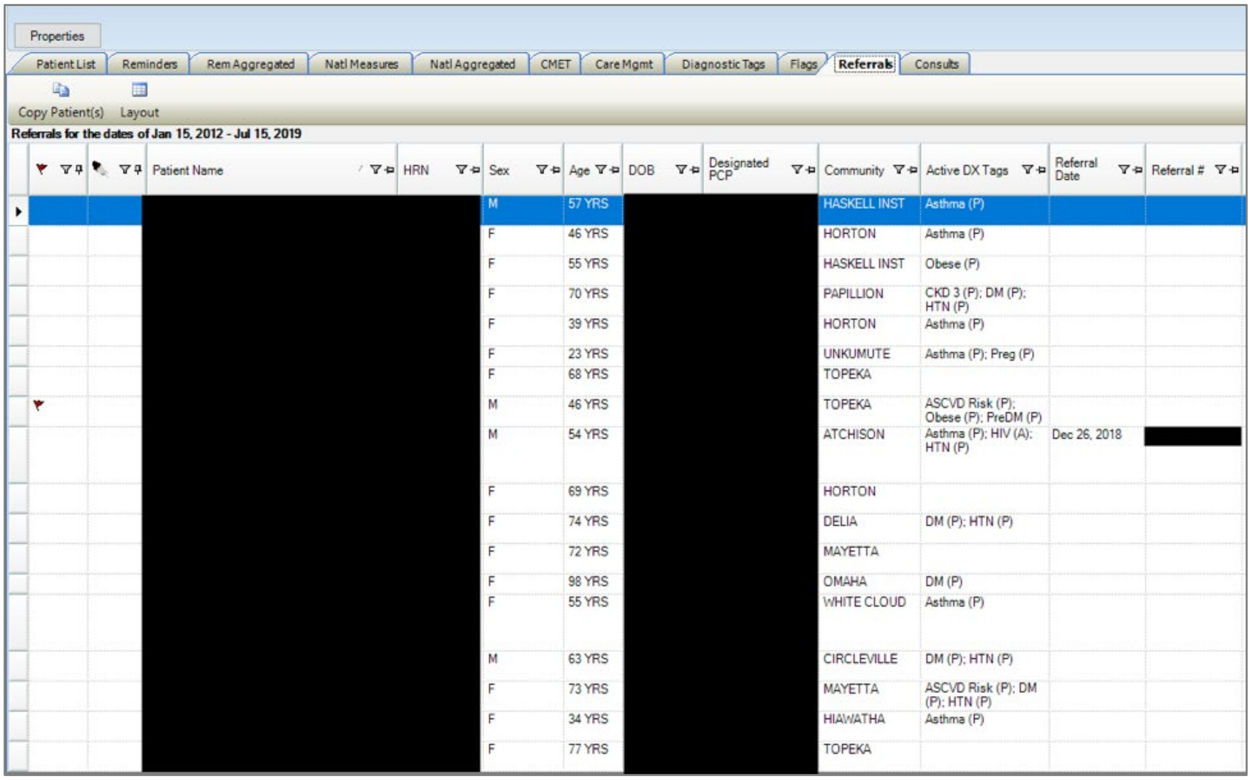



Figure 3-29: Sample **Referrals** tab

### 3.12.1 Referrals Tab Layout

The default view displays the standard Patient Demographic columns (see Figure 3-1) plus specific Referral columns.

Table 3-13: Referrals tab

| Column | Information |
|---|---|
| Individual Columns | There are individual columns for each Referral. |

Double-click any row in the grid to access the **Referrals** tab of the **Patient Record** window.

The default sort order is alphabetical by Patient Name. You can sort, filter, and perform other functions on the columns.

### 3.12.2 Referrals Tab Toolbar

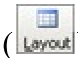
The toolbar shows the date/time for which the data is effective.

Section 2.1.2 provides for more information about the buttons on the right side of the toolbar.

#### 3.12.2.1 Layout

The Layout function determines which referrals columns to display for the current panel as well as the order and sorting that should be used.

To change the layout, do one of the following:

- Click the **Layout** (
) button.
- Select **Referrals** | **Layout**.

The **Referrals Layout** screen will display for the current panel. Here you can select the **Referrals** columns you want to display on your panel.

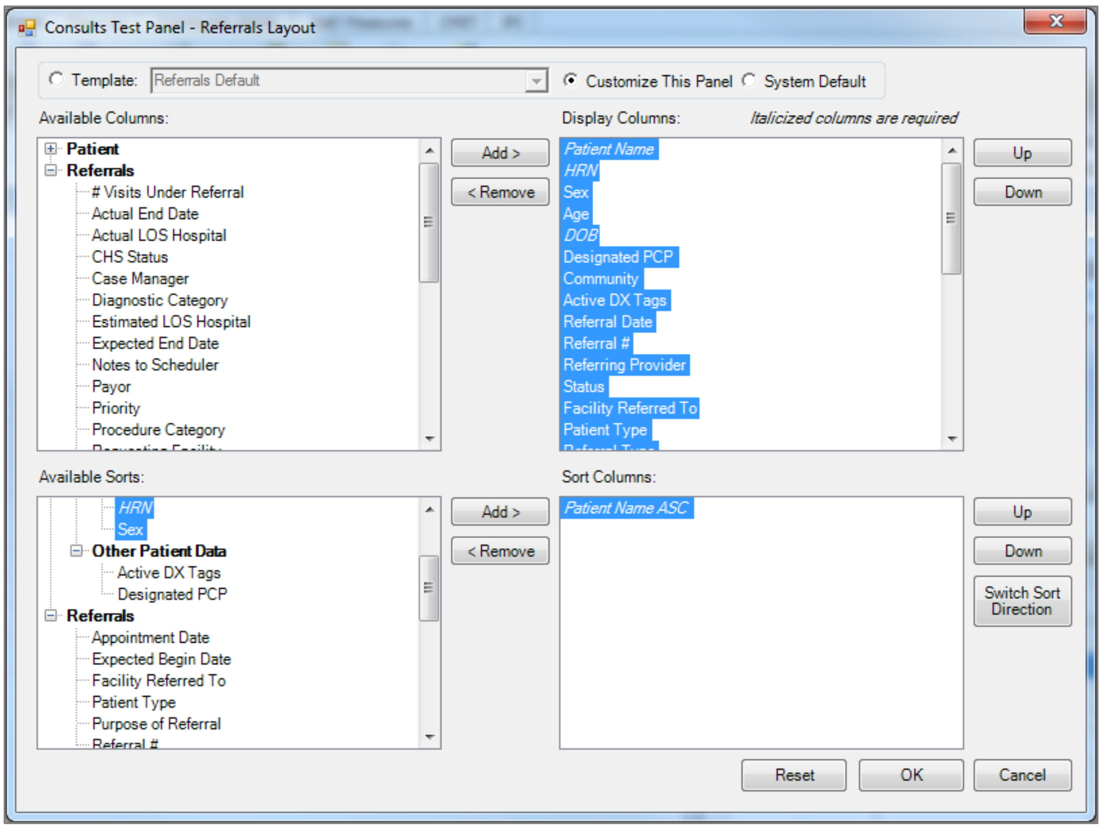



Figure 3-30: **Referrals Layout** window

Section 4.3.2 provides information about manipulating the columns of the view.

## 3.13 Consults Tab

The **Consults** tab displays consult data for the panel of patients.

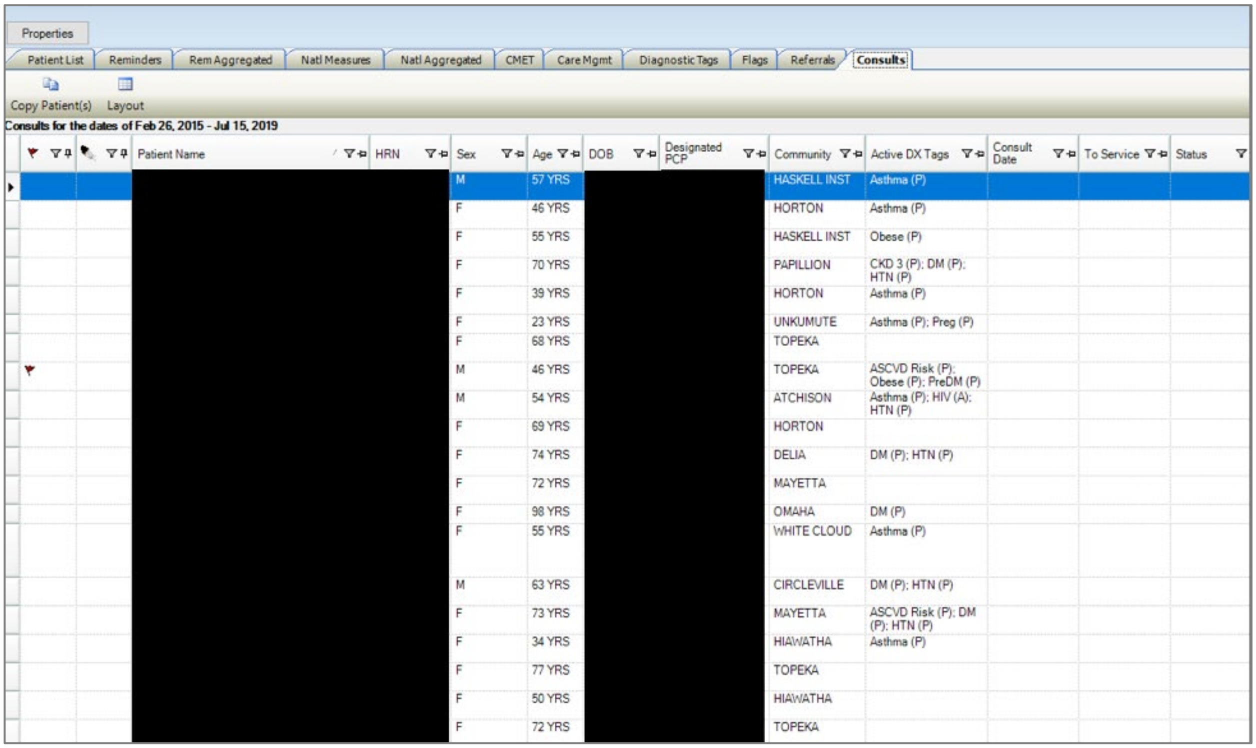



Figure 3-31: Sample **Consults** tab

## 3.13.1 Consults Tab Layout

The default view displays the standard Patient Demographic columns (see Figure 3-1) plus specific Consult columns.

Table 3-14: Consults tab

| Column | Information |
|---|---|
| Individual Columns | There are individual columns for each Consult. |

Double-click any row in the grid to access the Consults tab of the Patient Record window.

The default sort order is alphabetical by Patient Name. You can sort, filter, and perform other functions on the columns.

## 3.13.2 Consults Tab Toolbar

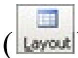
The toolbar shows the date/time for which the data is effective.

Section 2.1.2 provides for more information about the buttons on the right side of the toolbar.

#### 3.13.2.1 Layout

The Layout function determines which consult columns to display for the current panel as well as the order and sorting that should be used.

To change the layout, do one of the following:

- Click the **Layout** () button.
- Select **Consults** | **Layout**.

The **Consults Layout** screen will display for the current panel. Here you can select the **Consults** columns you want to display on your panel.

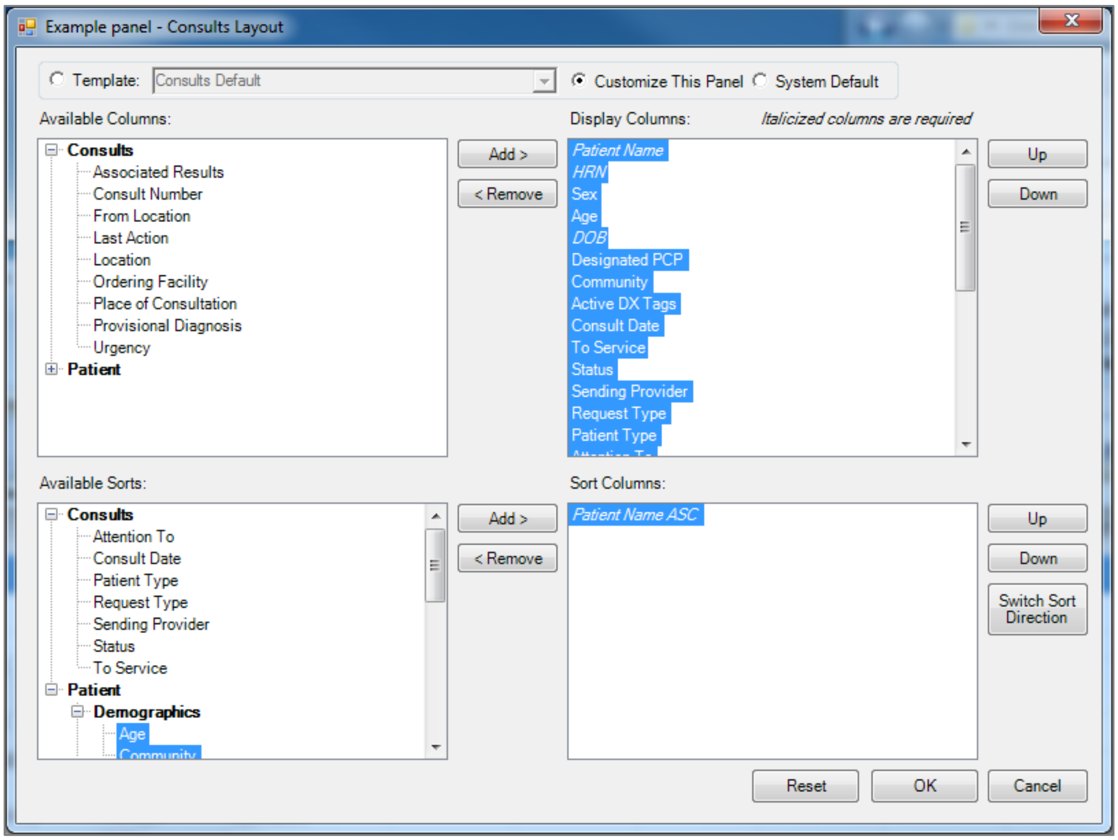



Figure 3-32: **Consults Layout** window

Section 4.3.2 provides information about manipulating the columns the layout.

## 3.14 Definition Details

The **Definition Details** tab displays certain types of data based on the Panel Definition for the panel of patients. If the panel is defined using Allergies, CPT, Exams, ER, Inpatient, Labs, Measurements, Medications, Patient Education, POV, Problems, and/or Reminders, an additional **Definition Details** tab will be visible in Panel View.

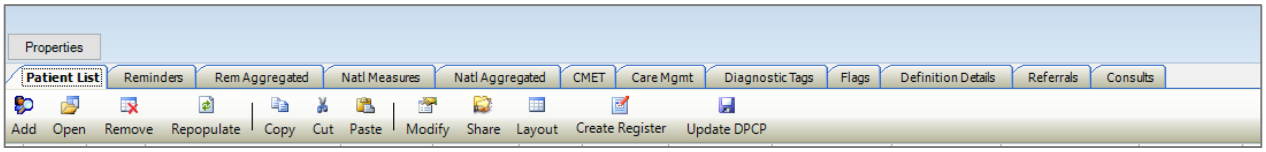



Figure 3-33: **Definition Details** display

The **Definition Details** tab will normally be before the **Referrals** and the **Consults** tab. If the Panel Definition has only one of the above listed Groups, it will automatically default when clicking on the Definition Details tab.

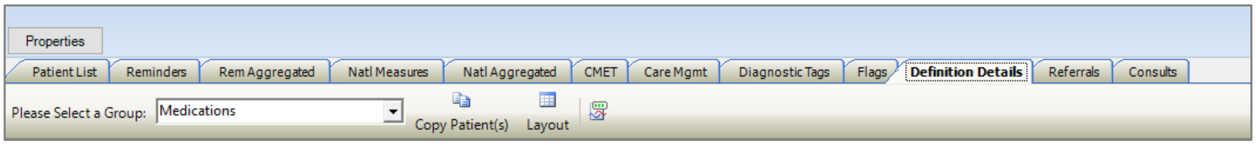



Figure 3-34: **Definition Details** default of Medications

Otherwise, you will need to select the **Group** in order to see the detail information.

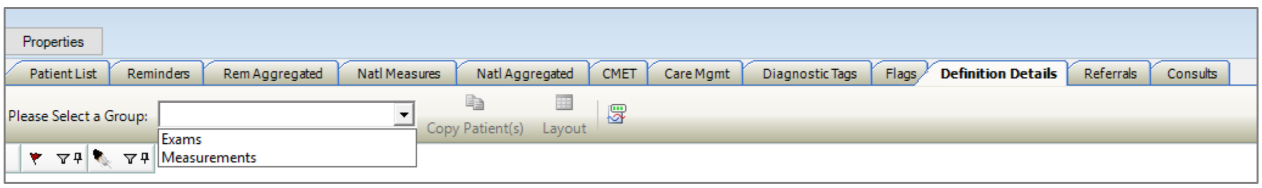



Figure 3-35: **Definition Details** for Exams AND Measurements

## 3.14.1 Definition Details Layout

The default view displays the standard Patient Demographic columns (see Figure 3-1) plus selected individual columns for the group.

Table 3-15: Definition details

| Column | Information |
|---|---|
| Individual Columns | There are individual columns for each Definition Details Group. |

Double-click any row in the grid to access the Patient Record for the selected patient.

The default sort order is alphabetical by Patient Name. You can sort, filter, and perform other functions on the columns.

## 3.14.2 Definition Details Toolbar

Section 2.1.2 provides for more information about the buttons on the right side of the toolbar.

The standard buttons for the **Definition Details** toolbar are **Copy Patient(s)**, **Layout**, and **Background Job**.

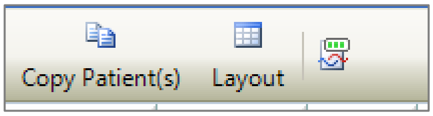



Figure 3-36: **Definition Details** toolbar

Reminder Notifications has an additional button, **Notification Process**.

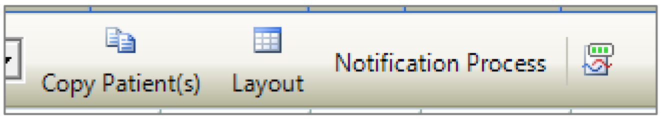



Figure 3-37: **Definition Details** toolbar for Reminder Notifications

### 3.14.2.1 Layout

The Layout function determines which Definition Details columns to display for the current panel and Group as well as the order and sorting that should be used.

Each Group has its own list of columns.

To change the layout, do one of the following:

- Select the Group.
- Click the **Layout** () button.

The appropriate **Group Layout** screen will display for the current panel. Here you can select the Group columns you want to display on your panel.

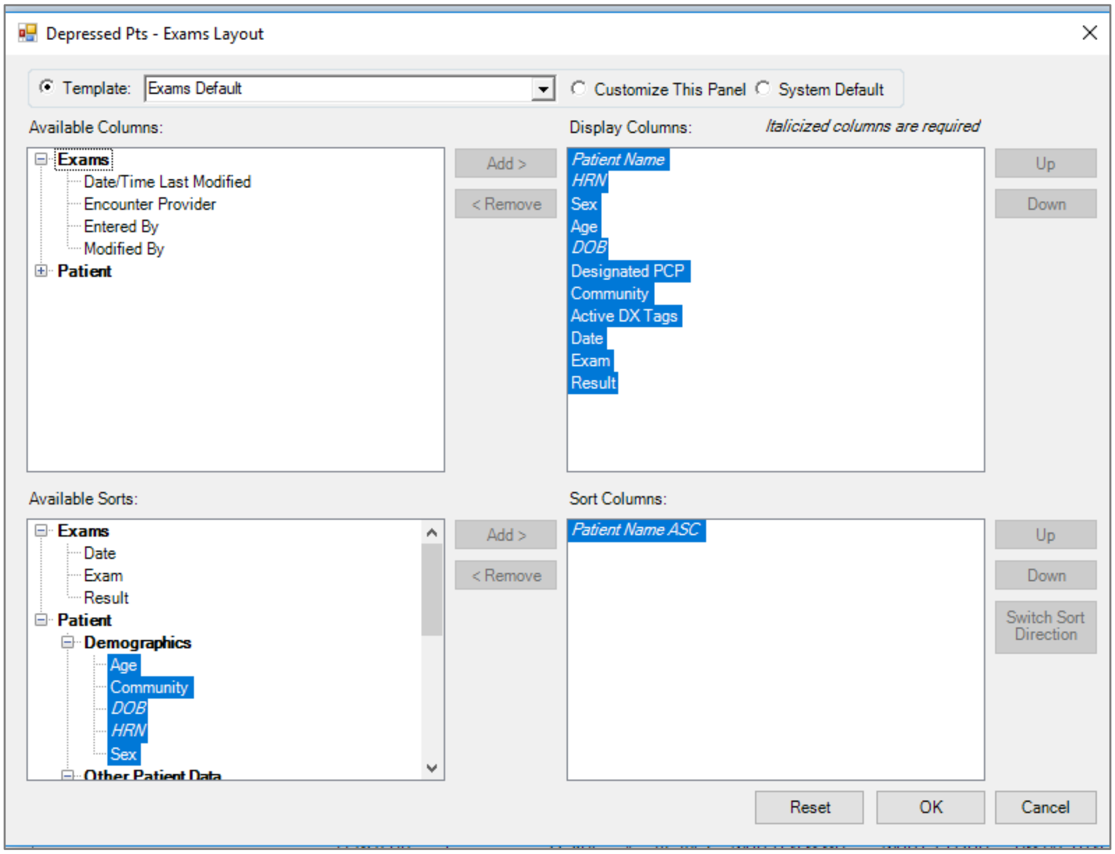



Figure 3-38: **Exams Layout** window

### 3.14.2.2 Notification Process

To use the Notification Process, the user must have an electronic signature set up in RPMS and default telephone and letter clinics set up in User Preferences. See Section 4.3 for more information.

Select the patients for whom to perform the Notification Process and click the button.

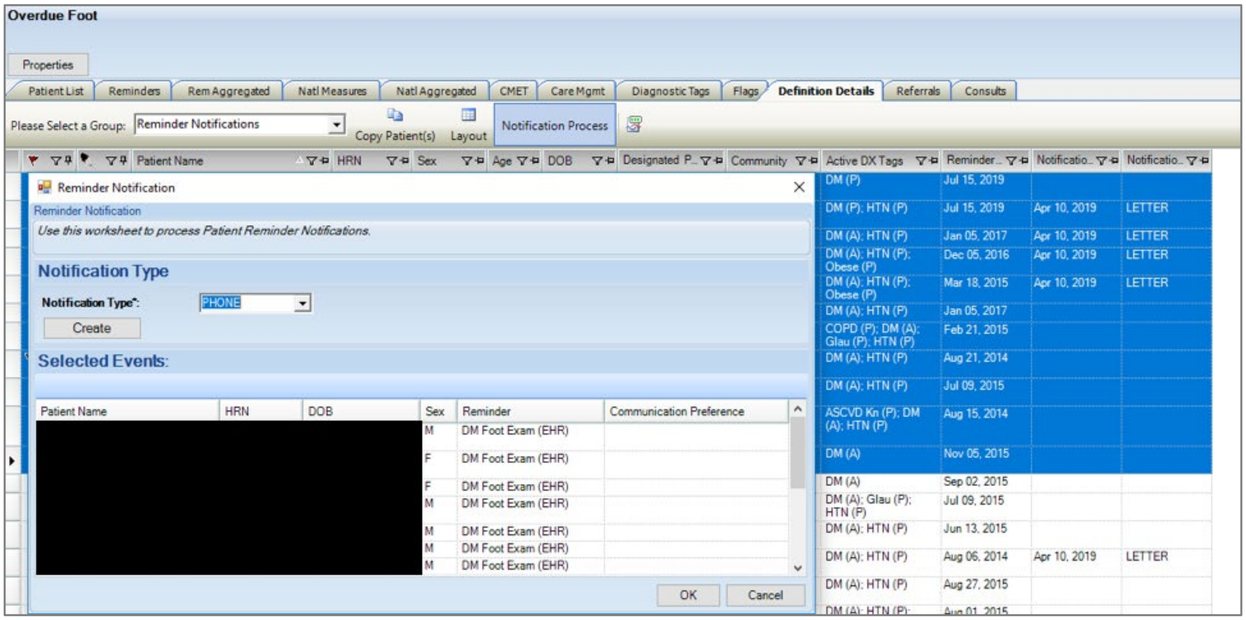


Figure 3-39: **Notification** patient selection

The **Notification Type** defaults to PHONE. The current selections are PHONE, EMAIL, and LETTER. At this time, only **PHONE** and **LETTER** are functional. Selecting EMAIL will gray out the **Create** button.

Click the **Create** button. You will be able to manually write a note or use an existing TIU template to generate a note.

### 3.14.2.2.1 TIU Note Fields

The default view displays the fields in the order shown in Table 3-16.

Table 3-16: TIU Note fields

| Column | Information |
|---|---|
| Document Title | Required field. |
| Subject | Subject of the note. |
| Show Templates | Check box when checked allows the user to use **My Templates** or **Shared Templates.** |
| My Templates | Templates set up in EHR that only the user can access. |
| Shared Templates | Templates set up in EHR that all users can access. |

Work with your EHR CAC to help set up templates and to discuss which document title is the best to use for Reminder Notifications.

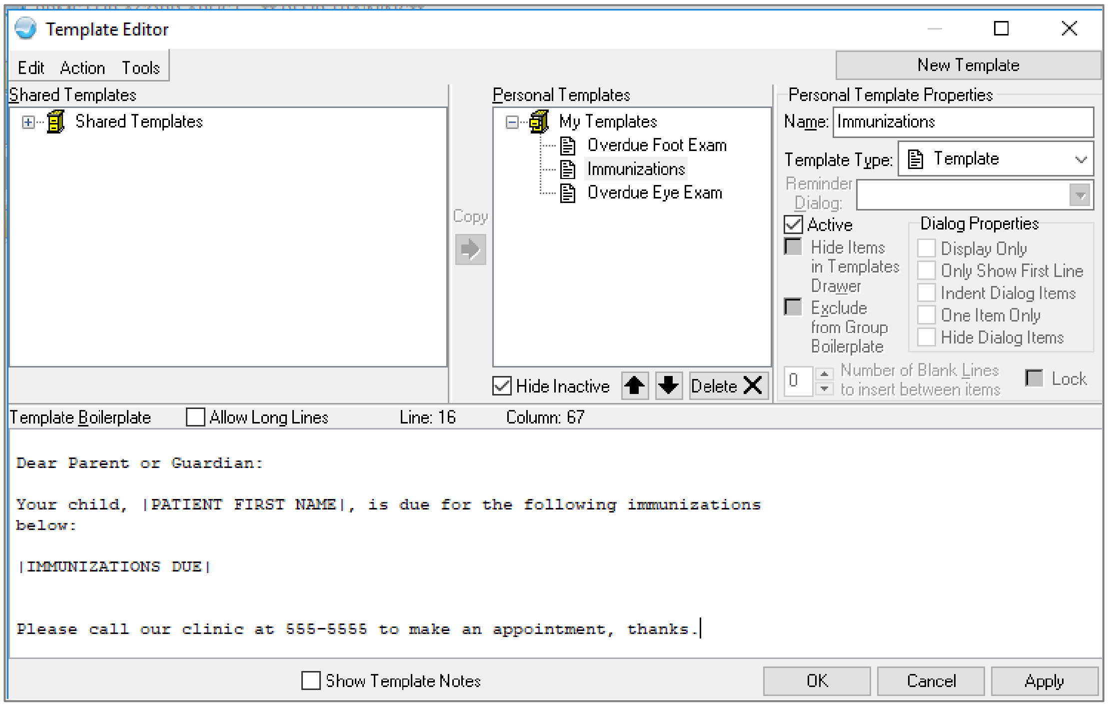



Figure 3-40: TIU — **Template Editor** window

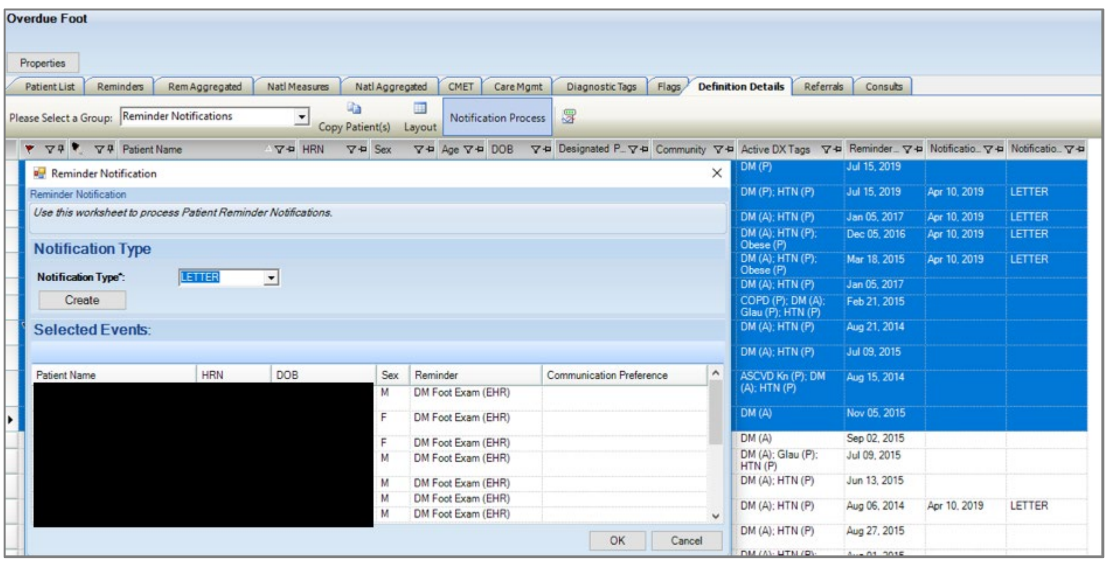



Figure 3-41: **Patient** selection

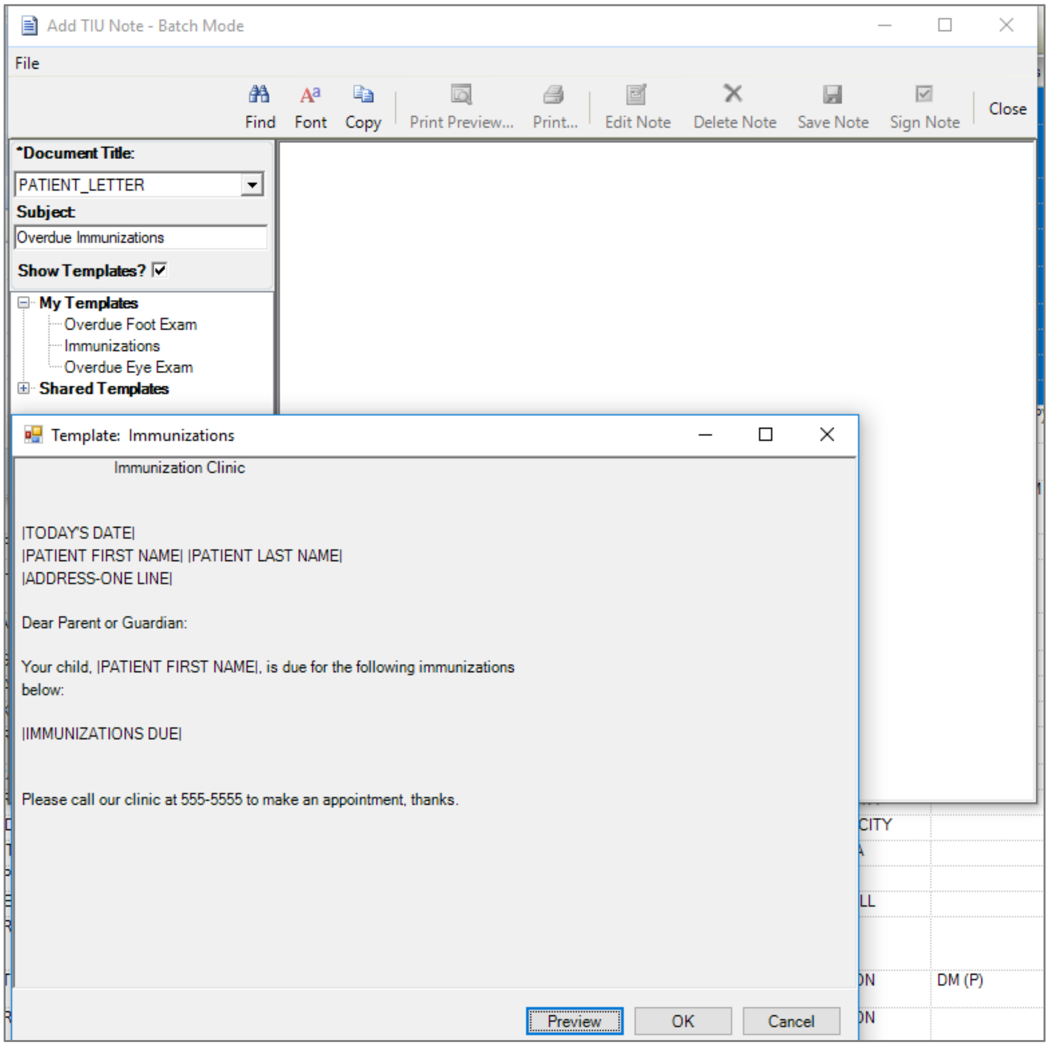



Figure 3-42: **Add TIU Note - Batch Mode** window — document selection

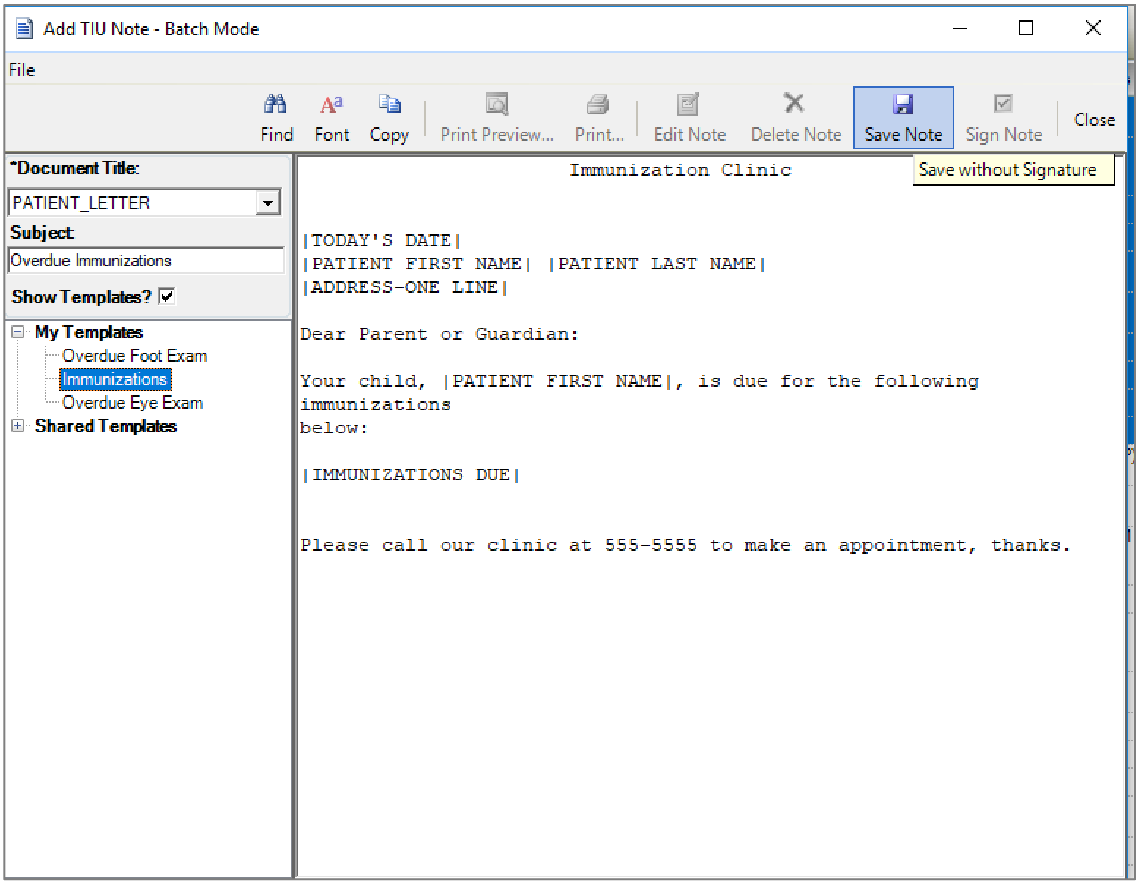



Figure 3-43: **Add TIU Note - Batch Mode** window — select template and save note

Once the **Save Note** button is no longer highlighted, it takes you back to the **Patient selection** screen where you click **OK**. You will be asked to confirm saving the data. At any time, you can click **Cancel**.

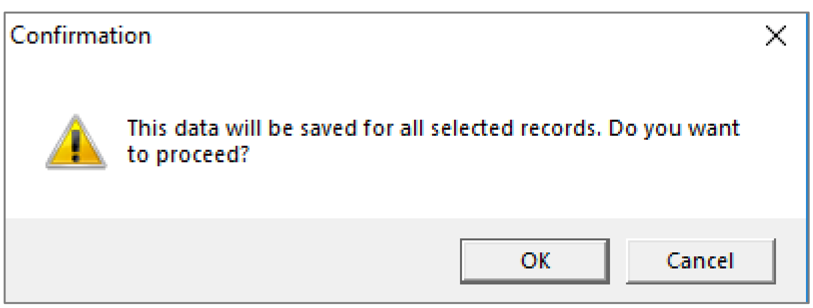



Figure 3-44: Confirmation pop-up

Click **OK** and you will be prompted to enter your electronic signature. You can still **Cancel** at this point and nothing will be saved.

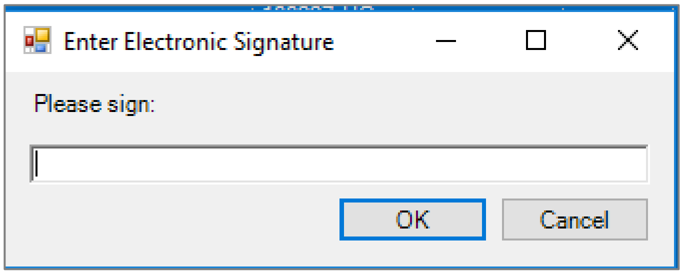



Figure 3-45: **Electronic Signature** pop-up

Once you enter your electronic signature, the document is saved for every selected patient. You will be prompted to print the notes.

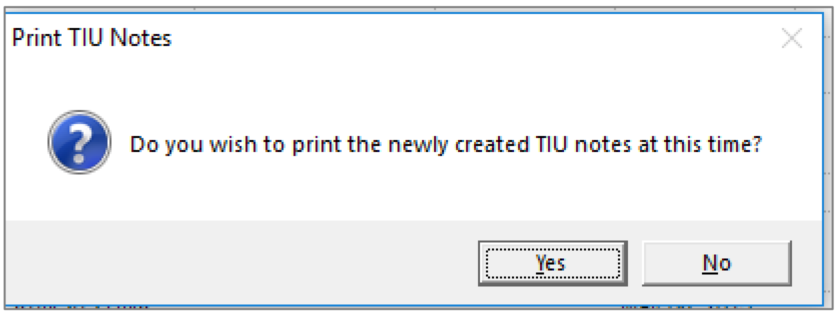



Figure 3-46: **Print TIU Notes** pop-up

You can view the notes on the **Print Preview** dialog, then select a printer to print them to.

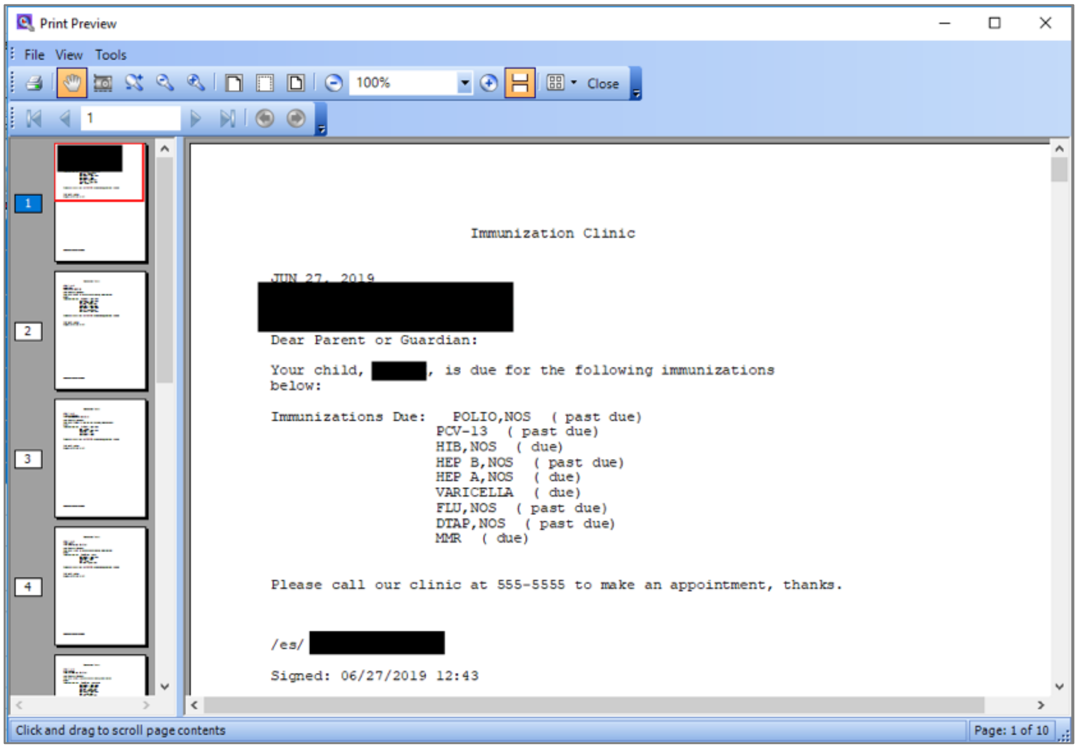



Figure 3-47: **Print Preview** dialog

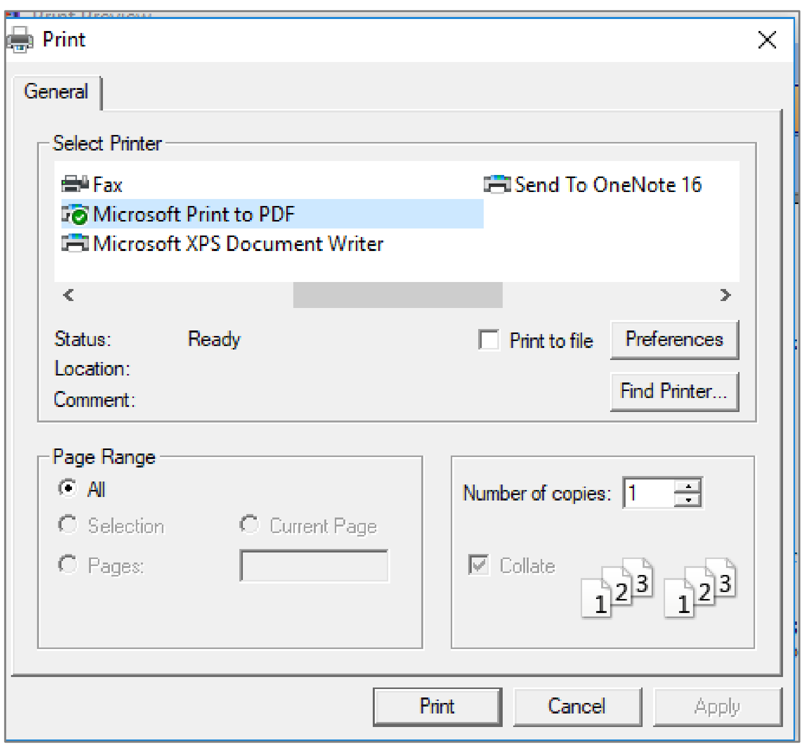



Figure 3-48: **Print** dialog — select printer

Check the printer before closing to ensure the letters printed out correctly. You will not be able to batch print the letters later if there is a problem; they can only be printed individually. The Notification Date and Notification Type columns will populate after closing the **Print** dialog.

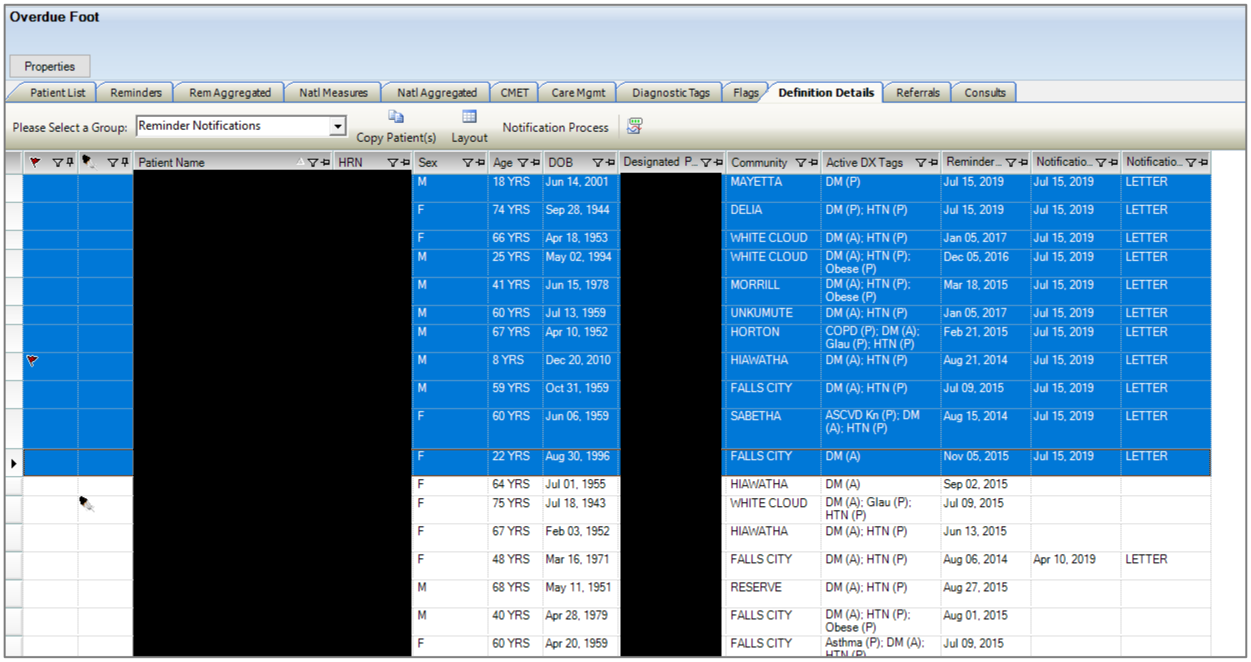



Figure 3-49: **Definition Details** completion

### 3.14.2.2.2 TIU Note Toolbar

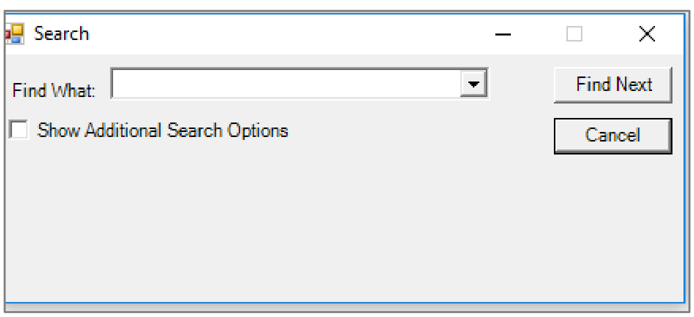



Figure 3-50: TIU Note toolbar

**Find What**: Find a string in the letter.

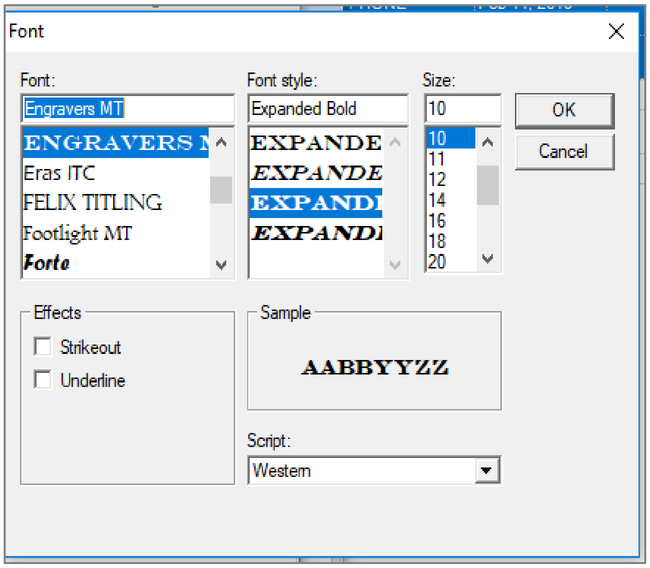



Figure 3-51: **Font** dialog

- **Font**: Change the default font.
- **Copy**: Copy the text of the note
- **Print Preview**: View the selected template on the Print Preview dialog
- **Print**: Disabled until the user saves and signs the note
- **Edit Note**: Disabled function
- **Delete Note**: Disabled function
- **Save Note**: When the note is completed
- **Sign Note**: Disabled until the user saves the note
- **Close**: When the note has been saved

# 4.0 Package Operation

All users, when given access to the iCare GUI, can create panels, view data, and perform without having any specific security keys. Certain keys can be given for more in-depth access. Any button needing additional access will display with a message. For example, the **Update DPCP** button requires an additional security key.

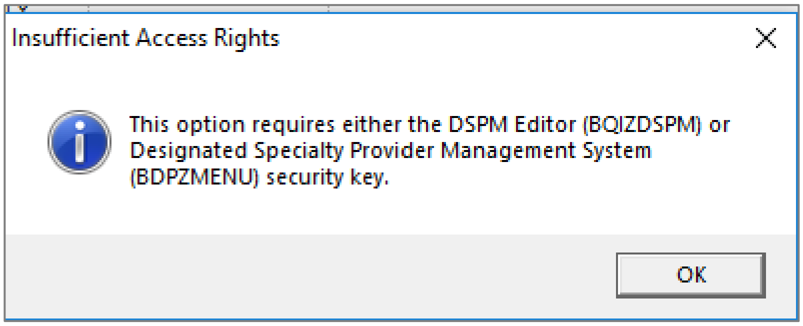



Figure 4-1: Insufficient Access Rights message

All views in iCare have the **File**, **Edit**, **Tools**, **Window** and **Help** options. Panel View additionally has a **Patients** option. Each view may have different selections within the options.

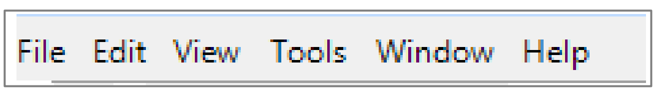



Figure 4-2: Main view options

## 4.1 File

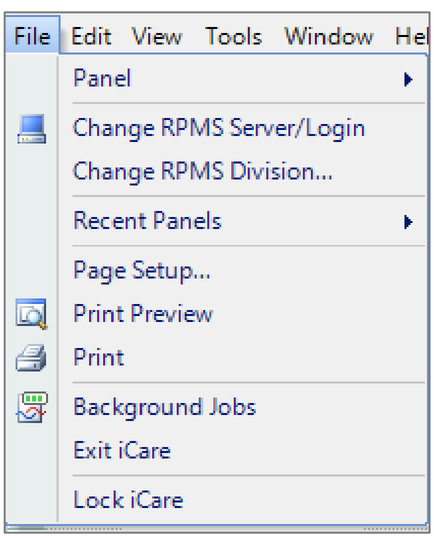



Figure 4-3: Main view **File** menu options

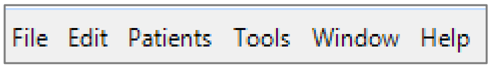



Figure 4-4: Panel View options

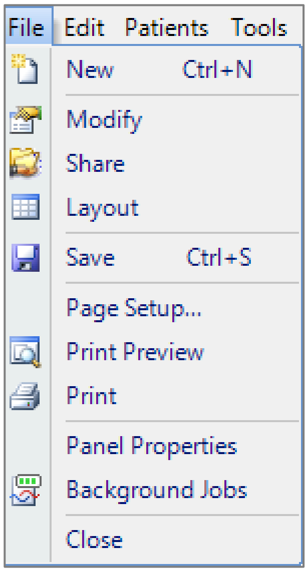
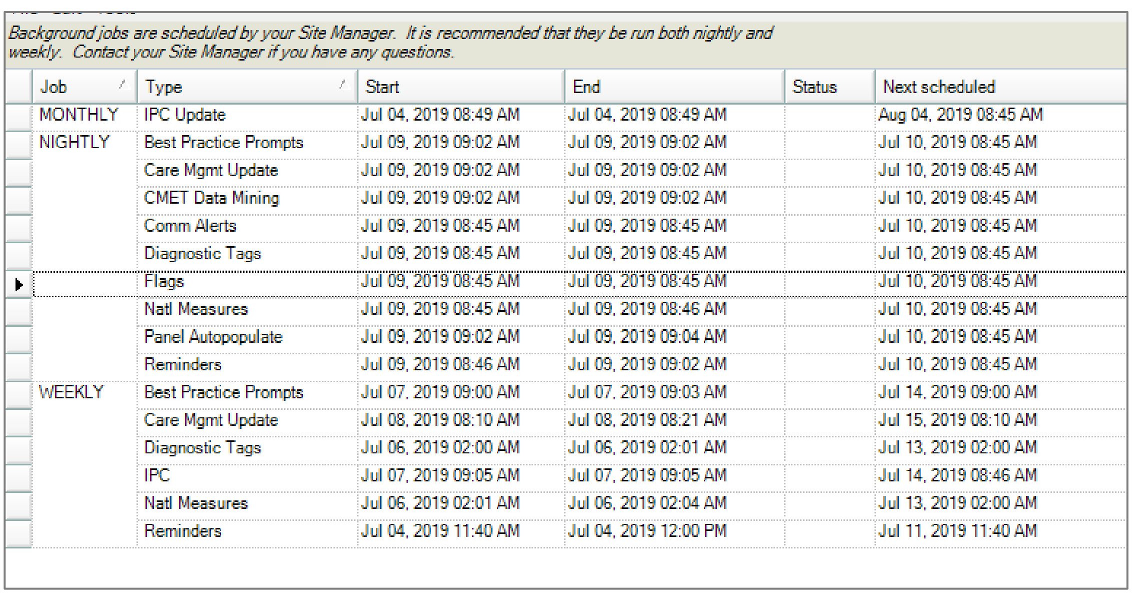



Figure 4-5: Panel View **File** options

## 4.1.1 Background Jobs

The Background Jobs icon can be found in many places in iCare as well as in the File menu. Click the icon or select the option for a display of the state of all iCare background jobs.



*Background jobs are scheduled by your Site Manager. It is recommended that they be run both nightly and weekly. Contact your Site Manager if you have any questions.*

| Job | Type | Start | End | Status | Next scheduled |
|---|---|---|---|---|---|
| MONTHLY | IPC Update | Jul 04, 2019 08:49 AM | Jul 04, 2019 08:49 AM | | Aug 04, 2019 08:45 AM |
| NIGHTLY | Best Practice Prompts | Jul 09, 2019 09:02 AM | Jul 09, 2019 09:02 AM | | Jul 10, 2019 08:45 AM |
| | Care Mgmt Update | Jul 09, 2019 09:02 AM | Jul 09, 2019 09:02 AM | | Jul 10, 2019 08:45 AM |
| | CMET Data Mining | Jul 09, 2019 09:02 AM | Jul 09, 2019 09:02 AM | | Jul 10, 2019 08:45 AM |
| | Comm Alerts | Jul 09, 2019 08:45 AM | Jul 09, 2019 08:45 AM | | Jul 10, 2019 08:45 AM |
| | Diagnostic Tags | Jul 09, 2019 08:45 AM | Jul 09, 2019 08:45 AM | | Jul 10, 2019 08:45 AM |
| | Flags | Jul 09, 2019 08:45 AM | Jul 09, 2019 08:45 AM | | Jul 10, 2019 08:45 AM |
| | Natl Measures | Jul 09, 2019 08:45 AM | Jul 09, 2019 08:46 AM | | Jul 10, 2019 08:45 AM |
| | Panel Autopopulate | Jul 09, 2019 09:02 AM | Jul 09, 2019 09:04 AM | | Jul 10, 2019 08:45 AM |
| | Reminders | Jul 09, 2019 08:46 AM | Jul 09, 2019 09:02 AM | | Jul 10, 2019 08:45 AM |
| WEEKLY | Best Practice Prompts | Jul 07, 2019 09:00 AM | Jul 07, 2019 09:03 AM | | Jul 14, 2019 09:00 AM |
| | Care Mgmt Update | Jul 08, 2019 08:10 AM | Jul 08, 2019 08:21 AM | | Jul 15, 2019 08:10 AM |
| | Diagnostic Tags | Jul 06, 2019 02:00 AM | Jul 06, 2019 02:01 AM | | Jul 13, 2019 02:00 AM |
| | IPC | Jul 07, 2019 09:05 AM | Jul 07, 2019 09:05 AM | | Jul 14, 2019 08:46 AM |
| | Natl Measures | Jul 06, 2019 02:01 AM | Jul 06, 2019 02:04 AM | | Jul 13, 2019 02:00 AM |
| | Reminders | Jul 04, 2019 11:40 AM | Jul 04, 2019 12:00 PM | | Jul 11, 2019 11:40 AM |

Figure 4-6: Background Jobs

There are five individual iCare background jobs that should be scheduled in TaskMan. The Nightly job should be scheduled daily and the four weekly jobs should be scheduled weekly (not at the same time). The monthly and weekly IPC jobs are handled automatically via the Nightly job.

If the End column is earlier than the Start column and in red, there may be a problem with that particular job.

Monitoring the Background Jobs is important so that the data seen in iCare is up to date.

## 4.2 Edit

The **Edit** option is the same for all views.

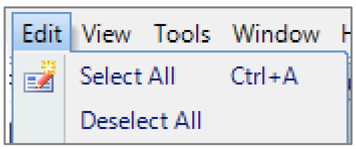



Figure 4-7: **Edit** menu options

## 4.3 Tools

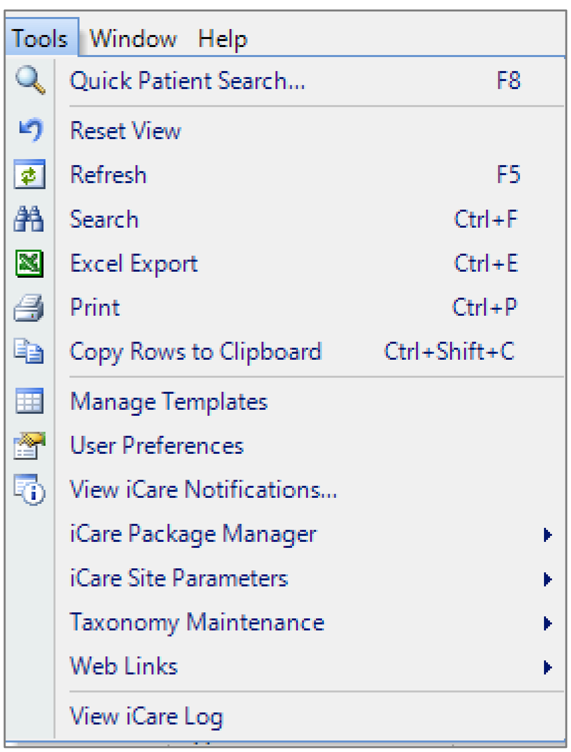



Figure 4-8: Main View **Tools** menu options


Figure 4-9: Other View **Tools** options

### 4.3.1 User Preferences

There is a User Preference specifically for Panel View where the user can choose which tabs to have access to display.

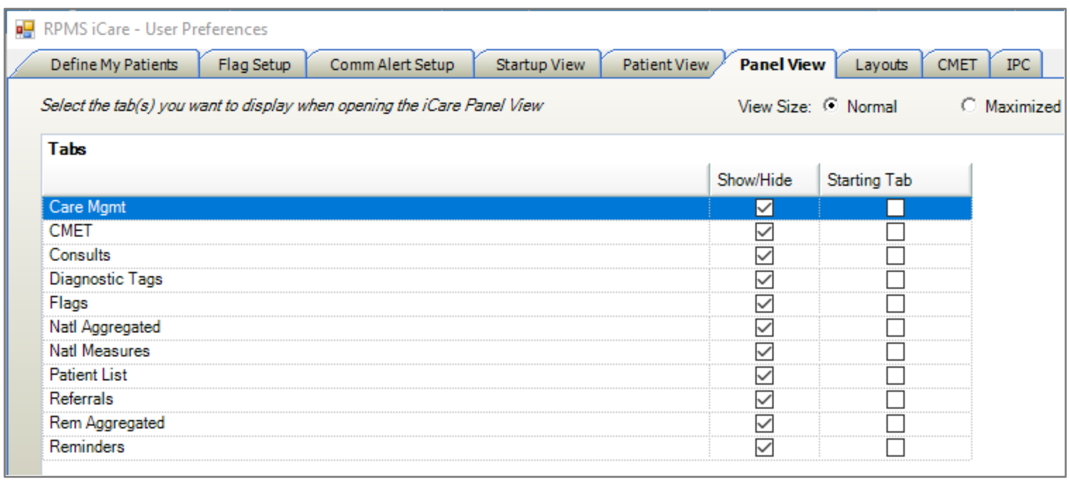



Figure 4-10: **Panel View** in User Preferences

Select the tab you wish to have as your Starting Tab when you open a panel. All tabs default to **Show**. Deselect any tab to hide it. The **Definition Details** tab will always display if the panel definition indicates.

Select an option button for the view size when opening the iCare Panel View: **Normal** or **Maximized**.

### 4.3.2 Manage Templates

Views can be modified through Manage Templates or via the **Layouts** button. Every view in iCare has a Default view Template. Each view can be modified either by customizing the view, modifying the default template, or creating a new template via Manage Templates. Click the Layout button to display the Layout window.

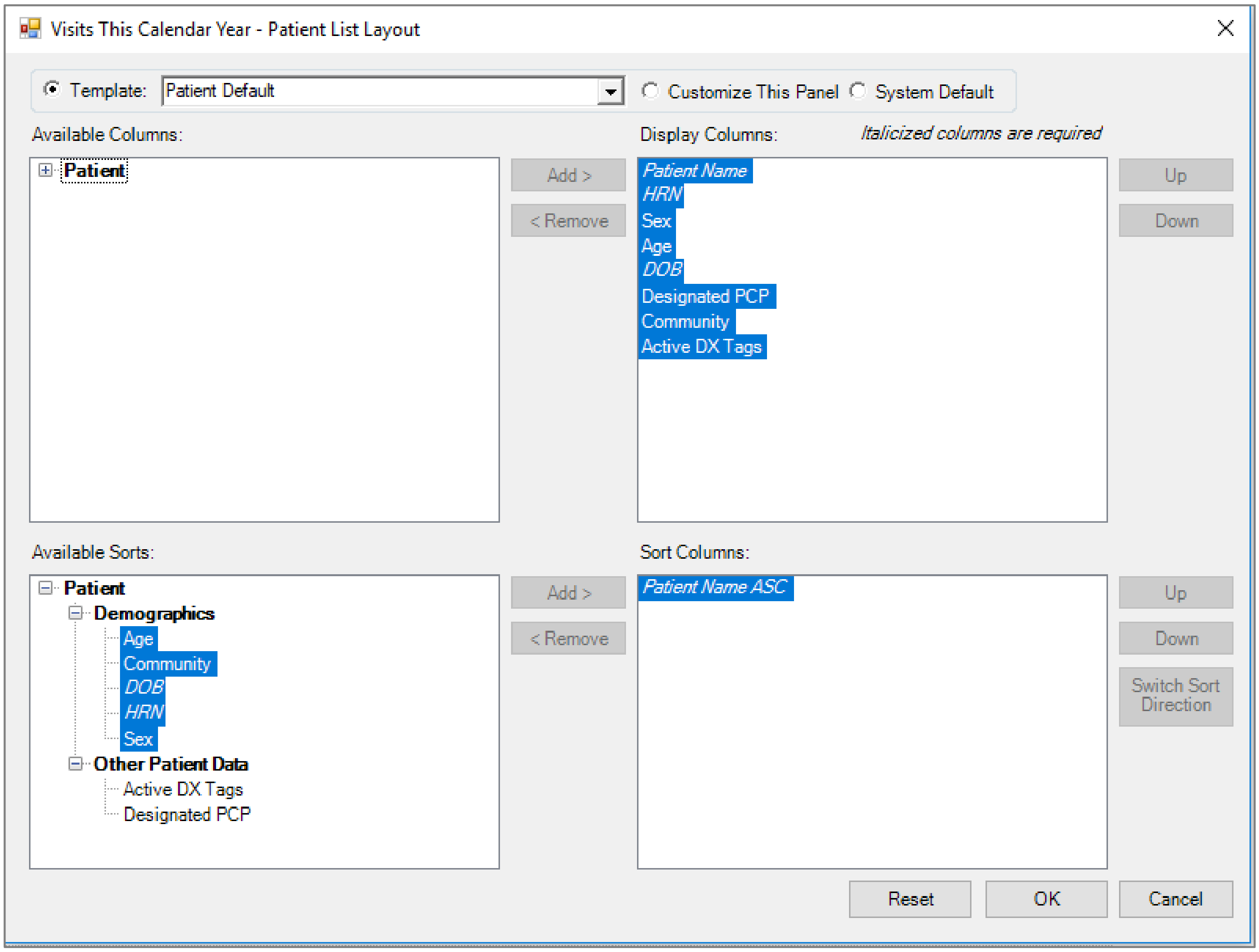



Figure 4-11: Layout window

Users can choose to keep the Template default view, customize the view for this panel only, or revert to the System Default if the layout has been changed.


Figure 4-12: Views

You can pick from any selection of templates that exist for that view.

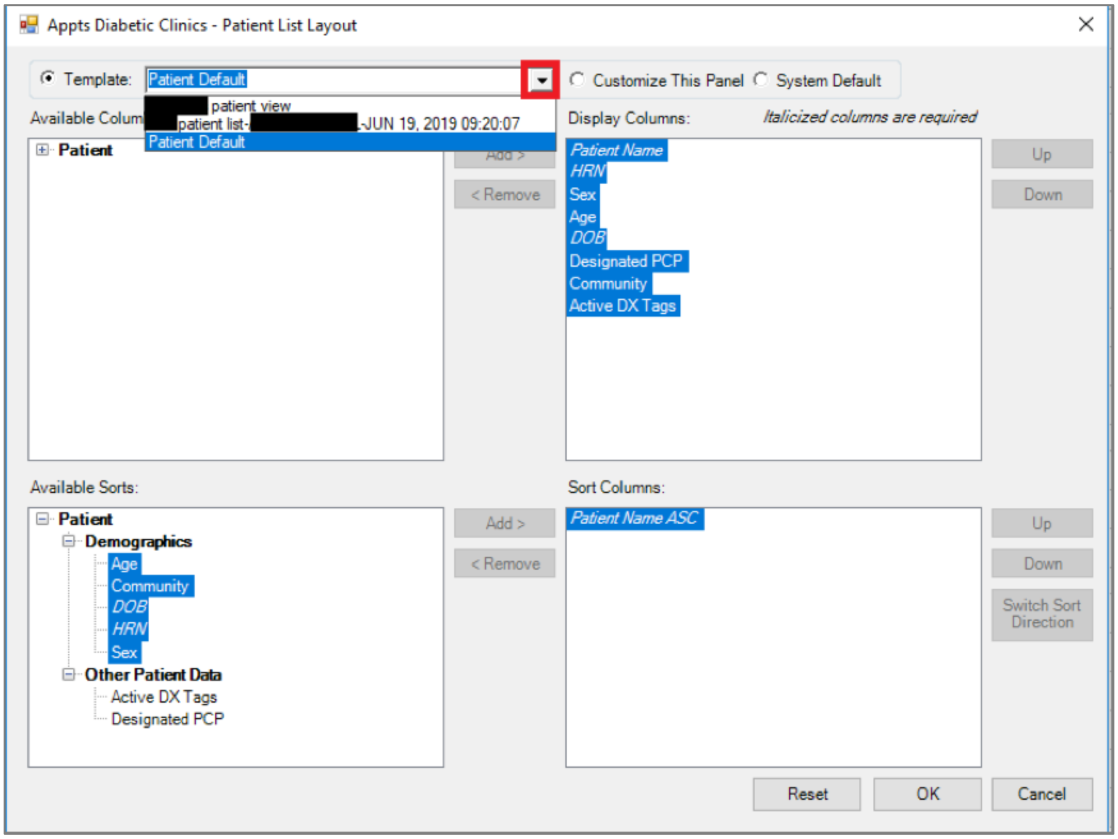



Figure 4-13: Template selection

There are four boxes you can use to change data:

- Available Columns (data element columns available to view)
- Display Columns (data element columns already selected for the view)
- Available Sorts (data element columns available to sort the data by)
- Sort Columns (data elements already selected for sorting)

See Appendix A for a list of the data element columns available for display for all layout views.

Use the **Add** and **Remove** buttons to move data elements back and forth from the Available Columns and Display Columns boxes and from the Available Sorts and Sort Columns. They will be enabled if the user selects the **Customize This Panel** option button.

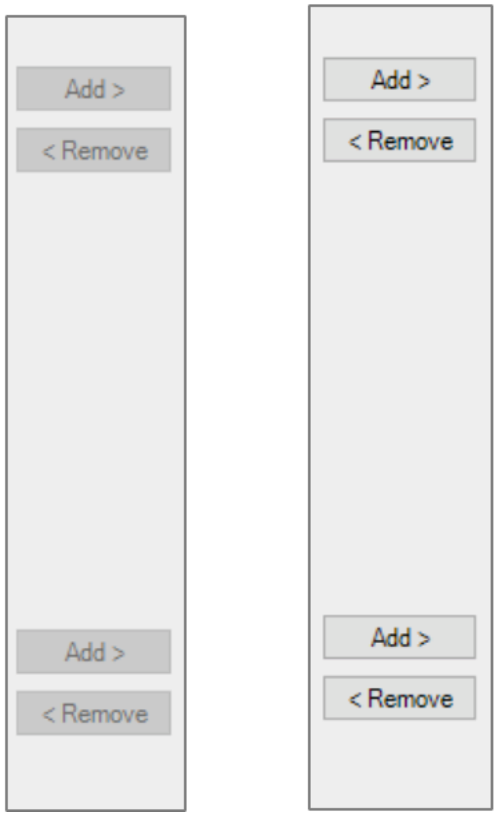



Figure 4-14: **Add** and **Remove** buttons

Customizing the view is only for this specific panel. If the layout is changed to template or system default, the customized view will be gone.

Users can always revert back to the System Default or a template.

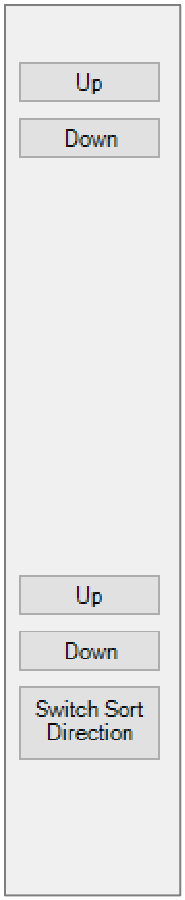



Figure 4-15: **Up**, **Down**, and **Switch Sort Direction** buttons

The **Up** and **Down** buttons will move the selected data elements up or down in the Display Columns or Sort Columns boxes. The **Switch Sort Direction** button changes the order of the sort from the default Ascending (A–Z) to Descending (Z–A).

If you click on the column heading to change the sort, it will automatically change the value in the Sort Columns box.

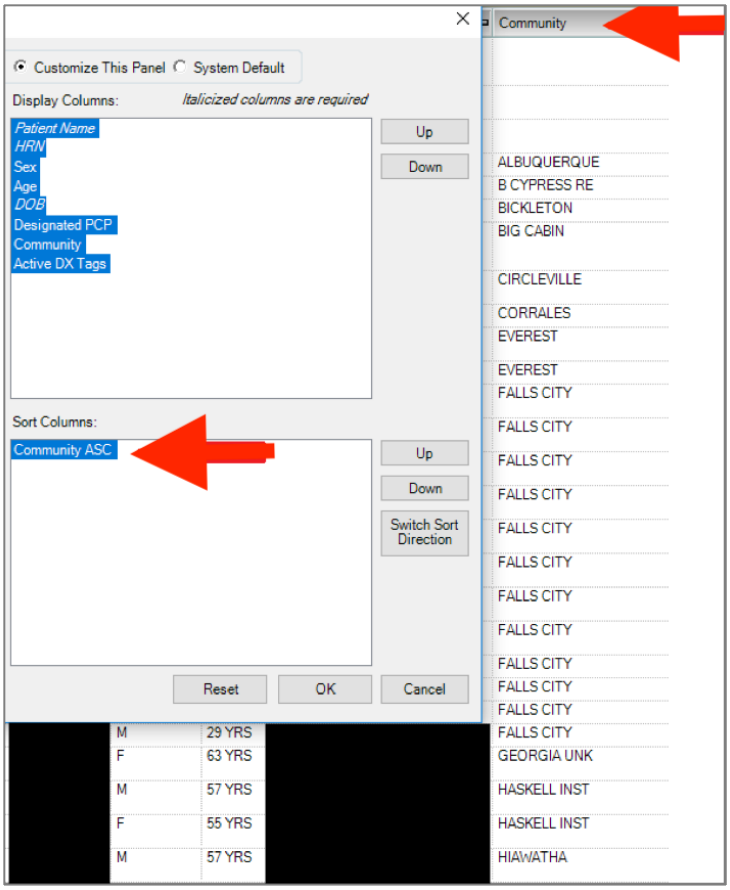



Figure 4-16: Changing the Sort Column

When leaving the panel, if the you have changed the column order or sort order, you will be asked if you want to save the changes.

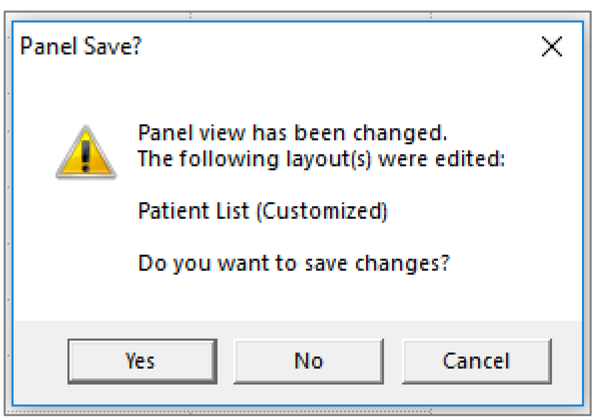



Figure 4-17: **Panel Save?** pop-up

# Appendix A: Panel View Columns

## A.1 Patient List

Default template for the Patient List tab is named Patient Default. Other tabs also have the **Required** and **Default** fields from this view as well as their specific column fields.

### A.1.1 Address

| Column | Information |
|---|---|
| Alt Phone | The OTHER PHONE number from patient registration |
| City | The city name of the patient’s address |
| Email Address | The current email address of the patient |
| Home Phone | The PHONE NUMBER [RESIDENCE] from patient registration |
| Location of Home | A description of where the patient’s home might be found |
| State | The state of the patient’s address |
| Street Address | The mailing address of the patient |
| Work Phone | The WORK PHONE from patient registration |

### A.1.2 CRS Flag

| Column | Information |
|---|---|
| CRS Active Clinical | A patient who had an AMBULATORY, DAY SURGERY, HOSPITALIZATION or OBSERVATION visit to a primary care clinic in the CRS report range |
| CRS DM DX Ever | If patient ever had a diabetes (DM) diagnosis recorded in RPMS using taxonomy SURVEILLANCE DIABETES |
| CRS DM DX Report Period | If the patient had a DM diagnosis in the Report Period |
| CRS First DM Dx | If the patient's First DM diagnosis was before Report Period |
| CRS One DM Visit | If the patient had 1 DM visit in Report Period |
| CRS Two DM Visits | If the patient had 2 DM visits in Report Period |

### A.1.3 Demographics

| Column | Information |
|---|---|
| Beneficiary | The patient’s CLASSIFICATION/BENEFICIARY from patient registration; e.g. INDIAN/ALASKA NATIVE, NON-INDIAN SPOUSE, etc. |

| Column | Information |
|---|---|
| CRS Pop | Whether the patient is identified as User Population (UP) or Active Clinical (AC) by CRS |
| Cause of Death | In PCC, the Underlying Cause of Death (UCD) is where this information can be entered. |
| Communication Preference | The method by which the patient has indicated they wish to be communicated with from patient registration - PHONE;EMAIL;LETTER;DO NOT NOTIFY |
| Date of Death | If the patient has been marked as deceased, the date of death from patient registration |
| Date/Time Added | The date/time the patient was added to the panel |
| Ethnicity | The ethnicity of the patient from patient registration |
| Father's Name | The name of the patient's father from patient registration |
| Manually Added | Identifies if the patient was manually added or removed from the panel, if blank then the patient was added via panel definition criteria |
| Mother's Name | The name of the patient's mother from patient registration |
| Other Tribes | Any other tribes that the patient is associated with besides the TRIBE OF MEMBERSHIP |
| Perf Met | If the patient is YES for all applicable CRS measures or not |
| Preferred Language | The language by which the patient prefers to communicate in |
| Tribe | The TRIBE OF MEMBERSHIP of the patient |
| Who Manually Added | The user who manually added a patient to the panel |

### A.1.4 Measurement

Any active measurement found in the Measurement Type (File #9999999.07). Measurement updates are released in AUM releases. The iCare Nightly Background job will determine which measurement is active and will add any new ones to the list.

| Column | Information |
|---|---|
| Last measurement | Displays the date of the last measurement type |

### A.1.5 Other Patient Data

| Column | Information |
|---|---|
| Active Insurance Coverage | Any active insurances that the patient has |
| Advanced Directives | If the patient has any advanced directives on file in RPMS |
| Allergies | If the patient has any allergies |
| Last Immunization Notification | The last recorded immunization notification in iCare |

| Column | Information |
|---|---|
| Last Reminder Notification | The last recorded reminder notification in iCare |
| Medicaid Number | If the patient has Medicaid, the Medicaid number |
| Specialty Providers | The active Provider category a patient could be assigned to; e.g. Case Manager |

### A.1.6 Visit Related

| Column | Information |
|---|---|
| IPC Adolescent Qualify Dates | The dates that the patient should have had an immunization visit, if the patient was 13 yrs old during the IPC report period |
| IPC Depress Office Visit | If the patient had a depression office visit |
| IPC Flu Office Visit | If a visit that meets the IPC Influenza Immunization Status encounter criteria |
| IPC Last Office Visit | The last office visit per IPC requirements which is usually has a specific visit CPT code |
| Last 3 Visit Clinics | The clinics of the last 3 visits that the patient had (no visit type filter) |
| Last 3 Visit Dates | The dates of the last 3 visits that the patient had (no visit type filter) |
| Last 5 Visit Clinics | The clinics of the last 5 visits that the patient had (no visit type filter) |
| Last 5 Visit Dates | The dates of the last 5 visits that the patient had (no visit type filter) |
| Last Appt Clinic | The clinic of the last appointment of the patient |
| Last Appt Date | The date of the last appointment of the patient |
| Last PC Visit Location | The last location of encounter for the last ambulatory visit whose clinic is a primary care clinic |
| Last PC Visit POV Narrative | The Purpose of Visit narrative of the last ambulatory visit whose clinic is a primary care clinic |
| Last PC Provider Narrative | The provider’s narrative of last ambulatory visit whose clinic is a primary care clinic |
| Last Primary Care Visit Clinic | The clinic of the last ambulatory visit which is a primary care clinic |
| Last Primary Care Visit Date | The date of the last ambulatory visit whose clinic was a primary care clinic |
| Last Primary Care Visit Provider | The provider of the last ambulatory visit whose clinic was a primary care clinic |
| Last Visit Clinic | The clinic of the last visit that the patient had (no visit type filter) |
| Last Visit Date | The date of the last visit that the patient had (no visit type filter) |

| Column | Information |
|---|---|
| Last Visit Date w DPCP | The date of the last ambulatory or hospitalization visit where the assigned primary care provider was listed as a provider |
| Last Visit Date/Time | The date/time of the last visit that the patient had (no visit type filter) |
| Last Visit Location | The location of encounter for the last visit that the patient had (no visit type filter) |
| Last Visit POV Narrative | The Purpose of Visit narrative of the last visit that the patient had (no visit type filter) |
| Last Visit Provider | The provider of the last visit that the patient had (no visit type filter) |
| Last Visit Provider Narrative | The provider’s narrative of last visit that the patient had (no visit type filter) |
| Next 3 Appt Clinics | The clinics of the next 3 appointments that the patient is scheduled for |
| Next 3 Appt Dates | The dates of the next 3 appointments that the patient is scheduled for |
| Next 5 Appt Clinics | The clinics of the next 5 appointments that the patient is scheduled for |
| Next 5 Appt Dates | The dates of the next 5 appointments that the patient is scheduled for |
| Next Appt Clinic | The clinic of the next appointment that the patient is scheduled for |
| Next Appt Date | The date of the next appointment that the patient is scheduled for |
| Next Appt Date/Time | The date and time of the next appointment that the patient is scheduled for |
| Next Appt Provider | The name of the default provider defined for the clinic of the next appointment that the patient is scheduled for |
| Number of No Shows | The number of no show appointments that the patient has had in the past 12 months |
| Number of Patient Cancels | The number of appointments that the patient cancelled in the past 12 months |

## A.2 Reminders

There are five (5) categories of Reminders; Health Summary, EHR Clinical Reminders, IZ Forecaster, Care Management, and CMET. The default Reminders template displays the default Health Summary reminders.

Each night, the iCare Nightly Background job checks to see if reminders have been inactivated or if new reminders have been found (or activated). A notification message may be sent to you information you of a newly added or newly deactivated/deleted reminder.

| Status | Received | From | Notification Text | Body |
|---|---|---|---|---|
| | Mar 27, 2019 08:11 AM | | Reminder [DTAP,NOS] has been newly added. You may want to update your panel Reminder View layouts. | |

## A.2.1 Default Health Summary Reminders

The default Health Summary Reminders belong to category General. Health Summary Reminders can be activated or inactivated from the **Health Summary Maintenance** Menu | **Health Maintenance Reminders** | **Activate/Inactivate a Health Maintenance Reminder** menu option.

| Column |
|---|
| BLOOD PRESSURE |
| BREAST EXAM |
| DENTAL EXAM |
| DIABETES SCREENING |
| HEIGHT |
| HIV SCREENING |
| PELVIC EXAM |
| PHYSICAL EXAM |
| WEIGHT |

## A.2.2 Optional Health Summary Reminders

### A.2.2.1 Behavioral Health

| Column |
|---|
| ALCOHOL USE SCREENING |
| DEPRESSION SCREENING |
| DOMESTIC VIOLENCE/IPV SCREENING |

### A.2.2.2 Cancer-Related

| Column |
|---|
| COLORECTAL CA-SCOPE/XRAY |
| MAMMOGRAM |
| PAP SMEAR |
| RECTAL |

| Column |
|---|
| TOBACCO USE SCREENING |

#### A.2.2.3 CVD-Related

| Column |
|---|
| CHOLESTEROL |

#### A.2.2.4 Elder

| Column |
|---|
| FALL RISK ASSESSMENT |
| TONOMETRY |
| VISUAL ACUITY EXAM |

#### A.2.2.5 Pediatric

| Column |
|---|
| EPSDT Screening |
| HCT/HGB |
| HEAD CIRCUMFERENCE |
| HEARING TEST |
| NEWBORN HEARING TEST |
| PPD - TUBERCULOSIS |
| URINALYSIS |

### A.2.3 EHR Clinical Reminders

EHR Clinical Reminders are divided into two types: National reminders and Local reminders. National reminders are reminders that are released to all facilities and Local reminders are reminders that are created within a specific facility. Typically national reminders start with **IHS-**, and local reminders will start with a local variation such as the initials of the facility.

Only those reminders that are active will be displayed in iCare. Reminders can be activated or inactivated using the **Reminder Definition Management | Activate/Inactivate Reminders** menu option. Reminders with the same name will show up looking like a duplicate reminder. During the iCare Nightly Background job, if such duplicate reminders are found, a notification message will be sent any user designated as an iCare Package Manager (security key BQIZMGR).

| Status | Received | From | Notification Text | Body |
|---|---|---|---|---|
| | Jun 27, 2019 11:44 AM | | Duplicate EHR reminders found | The following duplicate EHR reminders are active. Please contact the EHR Reminder CAC to go to the Reminder Definition Management menu and inactivate the incorrect duplicate reminders.<br>DM Foot Exam [IHS-DIAB FOOT EXAM 2013]<br>DM Foot Exam [IHS-DIAB FOOT EXAM 2015] |

### A.2.4 IZ Forecaster Reminders

IZ Forecaster or Immunization reminders are those reminders found to be due by the Forecaster interface. There may be other immunization reminders in Health Summary or EHR Clinical Reminders, but they are not included in iCare.

Some example Immunization Forecaster immunizations are:

| Column |
|---|
| DTaP (IZ) |
| FLU,NOS (IZ) |
| HEP A,NOS |
| HEP B,NOS |
| HIB,NOS |
| HPV,NOS |
| MMR |
| Men-B,NOS |
| MenCV4,NOS |
| PCV-13 |
| POLIO,NOS |
| Td-ADULT |
| Tdap |
| VARICELLA |
| ZOS-Shgrx |

### A.2.5 Care Management Reminders

Currently, the only specialized Care Management Reminders are for HIV patients and are a part of the HIV Management System (HMS).

Detailed information about these reminders can be found in Appendix B of the *HIV/AIDS Management User Manual*.

### A.2.6 CMET Reminders

Every event in the Care Management Event Tracking becomes a reminder if it was used as a Follow-up event.

## A.3 National Measures

There are five (5) categories of National Measures: National GPRA, Non National, Other, IPC, and Developmental. The default Performance template displays the National GPRA measures.

Each night, the iCare Nightly Background job checks to see if a new version of IHS CLINICAL REPORTING (CRS) has been installed at your facility and will automatically update the list of measures. A notification will be sent when the new measures are updated.

| Status | Received | From | Notification Text | Body |
|---|---|---|---|---|
| | Mar 14, 2019 08:10 AM | | CRS Updated | The RPMS Clinical Reporting System (CRS) has been updated on your facility's server. This update may affect your iCare Natl Measures view, because of new or inactivated performance measures. Please review your Natl Measures layout and update as needed. CRS UPDATE job scheduled to run MAR 14, 2019 20:00. Your Natl Measures data will not be up-to-date until this job has completed. |

## A.4 CMET

Please refer to the *Care Management Event Tracking (CMET) User Manual* for the details on this tab.

## A.5 Care Management

The current Care Management groups are Asthma, COPD, Diabetes, DM Audit, Hep C, HIV/AIDS, Immunizations, Pediatric, Prenatal, and Employee Health. Employee Health is only accessible if you have the appropriate security key. The access to Employee Health group should only be given to a small group of users who would be monitoring employees.

Each group has their own list of columns. The DM Audit group is based on the current release of the Diabetes Audit (BDM). When a new DM Audit is installed in RPMS, the iCare Nightly Background job will determine if there are any new columns to be added or columns that should be inactivated.

### A.5.1 Asthma

| Column | Information |
|---|---|
| Asthma Severity | Most recent Severity, documented in Problem List Classification field. Values are: 1-Intermittent; 2-Mild Persistent; 3-Moderate Persistent; 4-Severe Persistent |
| Asthma Tag Status | Most recent diagnostic tag status for Asthma only, if any |
| Last Asthma Visit | Date of most recent Asthma visit, defined as a face-to-face visit with ANY of the following asthma-related data elements documented: Severity, Control, Symptom Free Days, Work/School Missed, and/or Patient Education |
| Best Peak Flow | Most recent Best Peak Flow value from Measurements file |
| Last Peak Flow | Most recent Peak Flow value from Measurements file, obtained from a peak flow meter during a visit |
| Asthma Control | What the designated asthma control is - WELL CONTROLLED;WELL CONTROLLED;VERY POORLY CONTROLLED |
| FEV1/FVC | Most recent FEV1/FVC values from Measurements file, obtained from spirometry measurements during a visit |
| Last Action Plan | Date of most recent Action Plan provided to this patient. Action Plans are available from the PCC Patient Wellness Handout |
| Last Flu Shot | Date of most recent Influenza immunization |
| Last Asthma ER/UC Visit | Date of most recent visit to the ER or Urgent Care (clinic codes 80 or 30) with Asthma as the primary POV |
| Last Asthma Hospital Visit | Date of most recent hospitalization (service category H) with Asthma as the primary POV |
| Last Tobacco Health Factor | Most recent Tobacco Health Factor |
| On Controller Meds | Is this patient currently prescribed with Asthma Controller medications? |
| On Inhaled Steroids | Is this patient currently prescribed with Inhaled Steroid medications? |
| On Reliever Meds | Is this patient currently prescribed with Asthma Reliever medications? |
| Asthma Quality of Care | All of the following key elements documented: Asthma Severity value ever; Asthma Control and Peak Flow or FEV1 measurement and Asthma Action Plan and Flu Shot in past year; and current Controller medication prescription if Severity is Persistent (2,3 ~or 4) |
| Symptom Free Days | Value of most recent Symptom Free Days documented in V Measurements |
| Work/School Days Missed | Value of most recent Work/School Missed documented in V Measurements |
| ASTHMA TRIGGERS | ASTHMA TRIGGERS from Health Factors broken out into each trigger separately; e.g. Air Pollutants, Dust Mites, etc. |

### A.5.2 COPD

| Column | Information |
|---|---|
| Oximetry | The most recent O2 measurement |

| Column | Information |
|---|---|
| Spirometry | The most recent FVFC measurement |
| Pneumovax | The most recent pneumovax immunizations |
| Tobacco Assessed | When tobacco assessed |
| Tobacco Health Factor | The most recent tobacco health factor recorded |
| Active Inhaled Steroids | Checks if patient has an active medications from site-specified taxonomy BGP ASTHMA INHALED STEROIDS or BGP ASTHMA INHALED STEROIDS NDC |
| Abdominal Girth | The most recent abdominal girth measurement |

### A.5.3 Diabetes

| Column | Information |
|---|---|
| DM Onset | The date of the onset of Diabetes for this patient and where the date is documented |
| Last Height | The last height measurement taken for this patient |
| Last Weight | The most recent weight measurement taken for this patient |
| BMI | The value of the BMI calculated from the most recent height and weight measurements for the patient |
| Tobacco User | NO = Not a current tobacco user. YES = Current tobacco user. Taken rom CRS measure Tobacco Use/Exposure Assessment 5+ |
| HTN Diagnosed? | Has the patient been diagnosed with Hypertension? |
| On ACE Inhibitor? | Did the patient have an active ACE Inhibitor/ARB medication in the past year? |
| Aspirin Use/Anti-platelet | Patient had an active aspirin/anti-platelet medication in the past year |
| Last 3 BP (non ER) | The last three blood pressure measures for this patient in a non ER visit |
| Depression | If the patient has Depression on the Problem List, no depression screening is needed.  Otherwise has the patient had a depression screening in the past year |
| DM Foot Exam | Has the patient had a foot exam in the past year? |
| DM Eye Exam | Has the patient had an eye exam in the past year? |
| Dental Exam | Has the patient had a dental exam in the past year? |
| Last Dietician Visit | The date of the patient's last visit to a dietician |
| Seasonal Flu | Returns the last recorded FLU immunization |
| Pneumovax | The last pneumovax immunization for this patient |
| TD (10 years) | Did the patient have a TD immunization in the past 10 years |
| Last TB Health Factor | Last tobacco health factor enter for the patient |

| Column | Information |
|---|---|
| HbA1c | The most recent HbA1c test result for this patient |
| Previous HbA1c | The previous result from the most recent HbA1c lab test for this patient |
| UACR (Quant A/C Ratio) | The most recent UACR (Quant A/C Ratio) lab test for this patient |
| Creatinine | The most recent Creatinine lab test for this patient |
| Estimated GFR | The most recent Estimated GFR lab test for this patient |
| Total Cholesterol | The most recent Total Cholesterol lab test for this patient |
| LDL Cholesterol | The most recent LDL Cholesterol lab test for this patient |
| HDL Cholesterol | The most recent HDL Cholesterol lab test for this patient |
| Triglycerides | The most recent Triglyceride lab test for this patient |
| Hep B Series Complete | If the patient has completed the Hep B series of immunizations |
| CVD Diagnosed? | Has the patient been diagnosed with CVD |
| Non-HDL Cholesterol | The most recent non-HDL Cholesterol lab test |
| Last Chest Xray | Date of the last Chest xray for the patient |
| Last Mammogram | If applicable, the date of the patient's last mammogram |
| Last Pap Smear | If applicable, the date of the patient's last pap smear |
| Last TB Test | Last TB test for this patient |
| Last Waist Circumference | The most recent waist circumference measurement taken for this patient |
| PPD Status | The status of a PPD test for the patient |

### A.5.4 DM Audit

See Appendix A in the *2019 Diabetes Audit User Addendum* for definitions. The list of columns enabled for iCare are as follows and can change when a new DM Audit is installed in RPMS.

| Column |
|---|
| DM Diagosis Date |
| DM Type |
| Tobacco Use |
| Tob Cessation Counsel |
| Electronic Nicotine |
| Last Height |
| Last Weight |
| BMI |
| HTN Documented |

| Column |
|---|
| Blood Pressure |
| DM Foot Exam |
| DM Eye Exam |
| Dental Exam |
| Depression (Active Problem) |
| Depression Screening |
| Diet Instruction |
| Physical Activity Instruction |
| DM Education |
| Insulin |
| Sulfonylurea |
| Glinide |
| Metformin |
| Acarbose |
| Pioglitazone |
| DPP4 inhibitors |
| Amylin Analogues |
| GLP-1 analog |
| Bromocriptine |
| Colesevelam |
| SGLT-2 inhibitor |
| ACE/ARB |
| Statin |
| CVD Documented |
| TB Test Done |
| TB Test Result |
| TB Result (Pos), Tx Complete |
| TB Result (Neg) |
| Seasonal Flu Vaccine |
| Pneumovax Ever |
| Td/TDAP (past 10 yrs) |
| Tdap (ever) |
| Hep B Series |
| HbA1c (most recent) |
| Total Cholesterol |
| HDL Cholesterol |

| Column |
|---|
| LDL Cholesterol |
| Triglycerides |
| CREATININE |
| Estimated GFR |
| UACR |
| Combined Measure |
| eGFR and UACR |
| ENDS Status |
| Hep C Dx Ever |
| Hep C Screened |
| LEAMP |
| Retinopathy DX |

### A.5.5 Hep C

| Column | Information |
|---|---|
| HCV Antibody Test | The most recent lab test from site-specified taxonomy BQI HCV ANTIBODY TAX |
| HCV RNA Test | The most recent lab test from site-specified taxonomy BQI HCV RNA TAX |
| AST Test | The most recent lab test from site-specified taxonomy DM AUDIT AST TAX |
| ALT Test | The most recent lab test from site-specified taxonomy DM AUDIT ALT TAX |
| Platelet Test | The most recent lab test from site-specified taxonomy BQI PLATELET TAX |
| HCV Viral Load Test | The most recent lab test from site-specified taxonomy BQI HCV VIRAL LOAD TAX |
| HCV Genotype Test | The most recent lab test from site-specified taxonomy BQI HEP C GENOTYPE TESTS |
| HIV Test | The most recent lab test from site-specified taxonomy BGP HIV TEST TAX |
| Fibroscan | The most recent Fibroscan procedure from taxonomy BQI FIBROSCAN CPT PROC |
| Liver Ultrasound | The most recent Liver Ultrasound procedure from taxonomy BQI LIVER ULTRASOUND CPT |
| Hep B | Hepatitis B immunization series |
| Hep A | Hepatitis A immunization series |
| Other Lab Tests | The most recent other identified lab test from site-specified taxonomy BQI HCV OTHER LAB TESTS |

| Column | Information |
|---|---|
| Baseline Lab Tests | The baseline value (and date) and the most recent value (and date) for any lab test from site-specified taxonomy BQI HCV BASELINE LAB TESTS |

### A.5.6 HIV/AIDS

See Section 2.1 in the *HIV/AIDS Management User Manual* for listing and definitions.

### A.5.7 Immunizations

| Column | Information |
|---|---|
| *Immunization Short name* | Any active immunization found in the IMMUNIZATION File #9999999.14 |

### A.5.8 Pediatric

| Column | Information |
|---|---|
| Activity Level | The most recent ACTIVITY LEVEL health factor |
| Weight | The most recent weight measurement |
| Height | The most recent height measurement |
| BMI | The most recent body mass index measurement |
| BMI Percentile | The most recent body mass index percentile measurement |
| Head Circumference | The most recent head circumference measurement |
| Last Infant Feeding | The most recent entered infant feeding data |
| Infant Feeding 2mos | Patients who were screened for infant feeding choice at the age of two months (45–89 days) |
| Infant Feeding 6mos | Patients who were screened for infant feeding choice at the age of six months (165–209 days) |
| Infant Feeding 9mos | Patients who were screened for infant feeding choice at the age of nine months (255–299 days) |
| Infant Feeding 1yr | Patients who were screened for infant feeding choice at the age of 1 year (350–394 days) |
| Lead Screening | The most recent blood lead test from site-specified taxonomy BQI BLOOD LEAD TESTS |
| Last Dental Visit | The most recent dental visit |
| ADD/ADHD Dx | The most recent diagnosis from taxonomy BQI ADD/ADHD DXS |
| Last 3 Well Child Visits | The last three visits where the Purpose of Visit was from SNOMED subset PXRM BQI WELL CHILD VISIT |
| Last ASQ | All the most recent ASQ measurements |

| Column | Information |
|---|---|
| Last Hearing Screening | The most recent hearing exam |
| Last Vision Screening | The most recent eye exam or vision screening measurement |

## A.5.9 Prenatal

| Column | Information |
|---|---|
| Currently Pregnant? | The value from the Reproductive Factors file |
| Definitive Delivery Date | The value from the Reproductive Factors file |
| Estimated Gestational Age | The Estimated Gestational Age measurement (EGA) from the V Measurement file |
| High Risk | Based on the prenatal problems that have been given a High priority in the prenatal package in EHR. |
| Gravida | The Total Number of Pregnancies field in the Reproductive Factors file |
| Estimated Delivery Date | Based on the most recent date of the EDD (LMP), EDD (ULTRASOUND), EDD (CLINICAL PARAMETERS) or EDD (METHOD UNKNOWN) dates from the Reproductive Factors file |
| Lab tests | The most recent lab tests entered in site-specified taxonomy BQI PRENATAL TAX |

## A.5.10 Employee Health

| Column | Information |
|---|---|
| FLU | The most recent influenza immunization |
| HEP A | The most recent Hepatitis A immunization |
| HEP B | The most recent Hepatitis B immunization |
| PPD | The most recent PPD skin test |
| TDAP | The most recent TDAP immunization |
| ILI | The most recent Influenza Like Illnesses (ILI) diagnosis |
| MMR | The most recent MMR immunization |
| HEP A SERIES | Number of Hepatitis A immunizations to see if the series is complete |
| HEP B SERIES | Number of Hepatitis B immunizations to see if the series is complete |
| MMR SERIES | Number of MMR immunizations to see if the series is complete |
| TB Lab | The most recent TB blood lab test or refusal |

## A.6 Diagnostic Tags

| Column | Meaning |
|---|---|
| Patient Name | Name of the patient |
| HRN | Patient's health record number |
| DOB | Patient's date of birth |
| Age | Patient's age today |
| Tag Name | Name of the diagnostic tag |
| Status | Current status of the tag for the patient. Values are PROPOSED, ACCEPTED, NO LONGER VALID, or SUPERCEDED. |
| Status Change Reason | Standard reasons why the tag status would have changed. |
| Status Comment | Comment entered by a user when updating a diagnostic tag. |
| Last Updated | Date that the tag was updated |
| Last Updated By | Who updated the tag. It could be a system process or a user who updated. |

## A.7 Flags

| Column | Meaning |
|---|---|
| Flag Date | Date of the visit that meets the flag criteria |
| Patient Name | Name of the patient |
| HRN | Patient's health record number |
| Sex | F (for female), M (for male), U (unknown), gender of patient at birth |
| Age | Patient's age today |
| DOB | Patient's date of birth |
| Flag Type | Type of flag; can be Abnormal Lab, Emergency Room Visit, |
| Flag Description | Information about the visit the met the flag criteria; e.g. If not an Abnormal Lab then Provider, Purpose of Visit (POV) Narrative. If an Abnormal Lab, the lab, result, range, type of abnormal, and ordering provider |
| Designated PCP | The primary care primary to whom the patient has been assigned |

## A.8 Referrals

| Column | Information |
|---|---|
| Referral Date | Date the referral was initiated |
| Referral # | The referral number |
| Referring Provider | Provider who is asking for the referral |
| Status | Status of the referral - ACTIVE;APPROVED;CLOSED-COMPLETED;CLOSED-NOT COMPLETED |

| Column | Information |
|---|---|
| Facility Referred To | The primary vendor |
| Patient Type | Whether Inpatient or Outpatient |
| Referral Type | Type of referral - CHS;IHS (ANOTHER FACILITY);OTHER;IN-HOUSE |
| Expected Begin Date | The expected date for the services to begin (i.e., admission date for a hospitalization) |
| Appointment Date | The date the services actually began |
| Purpose of Referral | Text of the purpose of the referral |
| # Visits Under Referral | The number of outpatient visits that occurred under the authority of this referral |
| Actual End Date | The date the services actually ended |
| Actual LOS Hospital | The actual length of stay for a hospital admission |
| CHS Status | If the referral type is CHS, the status - PENDING;APPROVED;DENIED;PENDING APPEAL |
| Case Manager | The person who is managing this case |
| Diagnostic Category | The ICD diagnostic category of the referral |
| Estimated LOS Hospital | The estimated length of stay for a hospital admission |
| Expected End Date | The last date services were provided under the authority of this referral |
| Notes to Scheduler | Notes to be seen by the appointment clerk or the person scheduling the appointment for the patient |
| Payor | The entity that is primarily responsible for paying for the treatment the patient will receive based on this referral |
| Priority | A value indicating the priority of this referral |
| Procedure Category | The CPT service category for which this patient is being referred |
| Requesting Facility | The facility requesting the referral |
| Schedule with # days | The Provider records how soon to schedule an appointment for this referral |

## A.9 Consults

| Column | Information |
|---|---|
| Consult Date | Date of actual entry of consultation request into the file |
| To Service | The name of the service that will complete the consult |
| Status | Status of the consult |
| Sending Provider | The provider who originated the order |
| Request Type | Whether the order is a consult or procedure |
| Patient Type | If the service is to be rendered on an outpatient or inpatient basis |

| Column | Information |
|---|---|
| Attention To | The name of a person that is to be alerted about the new consult |
| Associated Results | The reason for requesting the Consult or Procedure request |
| Consult Number | The order number of the consult |
| From Location | The location that sent the order to the receiving location |
| Last Action | The last action taken on the consult |
| Location | The location of the patient when the consult/request order was placed |
| Ordering Facility | If a consult/request sent to another Institution, then this is the SENDING hospital/institution |
| Place of Consultation | The place of consultation: Bedside, Consultant's Choice, On Call, Emergency Room, EKG Lab |
| Provisional Diagnosis | The Provisional Diagnosis the ordering clinician would specify on the Consult Form |
| Urgency | The urgency for this order (STAT, ROUTINE, NEXT AVAILABLE, EMERGENCY, TODAY, WITHIN 24 HOURS, WITHIN 48 HOURS, WITHIN 72 HOURS, etc.) |

# Appendix B: Rules of Behavior

The Resource and Patient Management (RPMS) system is a United States Department of Health and Human Services (HHS), Indian Health Service (IHS) information system that is ***FOR OFFICIAL USE ONLY***. The RPMS system is subject to monitoring; therefore, no expectation of privacy shall be assumed. Individuals found performing unauthorized activities are subject to disciplinary action including criminal prosecution.

All users (Contractors and IHS Employees) of RPMS will be provided a copy of the Rules of Behavior (RoB) and must acknowledge that they have received and read them prior to being granted access to a RPMS system, in accordance IHS policy.

- For a listing of general ROB for all users, see the most recent edition of *IHS General User Security Handbook* (SOP 06-11a).
- For a listing of system administrators/managers rules, see the most recent edition of the *IHS Technical and Managerial Handbook* (SOP 06-11b).

Both documents are available at this IHS Web site: http://security.ihs.gov/.

The ROB listed in the following sections are specific to RPMS.

## B.1 All RPMS Users

In addition to these rules, each application may include additional RoBs that may be defined within the documentation of that application (e.g., Dental, Pharmacy).

### B.1.1 Access

RPMS users shall

- Only use data for which you have been granted authorization.
- Only give information to personnel who have access authority and have a need to know.
- Always verify a caller's identification and job purpose with your supervisor or the entity provided as employer before providing any type of information system access, sensitive information, or nonpublic agency information.
- Be aware that personal use of information resources is authorized on a limited basis within the provisions *Indian Health Manual* Part 8, "Information Resources Management," Chapter 6, "Limited Personal Use of Information Technology Resources."

RPMS users shall not

- Retrieve information for someone who does not have authority to access the information.

- Access, research, or change any user account, file, directory, table, or record not required to perform their *official* duties.
- Store sensitive files on a PC hard drive, or portable devices or media, if access to the PC or files cannot be physically or technically limited.
- Exceed their authorized access limits in RPMS by changing information or searching databases beyond the responsibilities of their jobs or by divulging information to anyone not authorized to know that information.

### B.1.2 Information Accessibility

RPMS shall restrict access to information based on the type and identity of the user. However, regardless of the type of user, access shall be restricted to the minimum level necessary to perform the job.

RPMS users shall

- Access only those documents they created and those other documents to which they have a valid need-to-know and to which they have specifically granted access through an RPMS application based on their menus (job roles), keys, and FileMan access codes. Some users may be afforded additional privileges based on the functions they perform, such as system administrator or application administrator.
- Acquire a written preauthorization in accordance with IHS policies and procedures prior to interconnection to or transferring data from RPMS.

### B.1.3 Accountability

RPMS users shall

- Behave in an ethical, technically proficient, informed, and trustworthy manner.
- Log out of the system whenever they leave the vicinity of their personal computers (PCs).
- Be alert to threats and vulnerabilities in the security of the system.
- Report all security incidents to their local Information System Security Officer (ISSO)
- Differentiate tasks and functions to ensure that no one person has sole access to or control over important resources.
- Protect all sensitive data entrusted to them as part of their government employment.
- Abide by all Department and Agency policies and procedures and guidelines related to ethics, conduct, behavior, and information technology (IT) information processes.

### B.1.4 Confidentiality

RPMS users shall

- Be aware of the sensitivity of electronic and hard copy information, and protect it accordingly.
- Store hard copy reports/storage media containing confidential information in a locked room or cabinet.
- Erase sensitive data on storage media prior to reusing or disposing of the media.
- Protect all RPMS terminals from public viewing at all times.
- Abide by all Health Insurance Portability and Accountability Act (HIPAA) regulations to ensure patient confidentiality.

RPMS users shall not

- Allow confidential information to remain on the PC screen when someone who is not authorized to that data is in the vicinity.
- Store sensitive files on a portable device or media without encrypting.

### B.1.5 Integrity

RPMS users shall

- Protect their systems against viruses and similar malicious programs.
- Observe all software license agreements.
- Follow industry standard procedures for maintaining and managing RPMS hardware, operating system software, application software, and/or database software and database tables.
- Comply with all copyright regulations and license agreements associated with RPMS software.

RPMS users shall not

- Violate federal copyright laws.
- Install or use unauthorized software within the system libraries or folders.
- Use freeware, shareware, or public domain software on/with the system without their manager's written permission and without scanning it for viruses first.

### B.1.6 System Logon

RPMS users shall

- Have a unique User Identification/Account name and password.

- Be granted access based on authenticating the account name and password entered.
- Be locked out of an account after five successive failed login attempts within a specified time period (e.g., one hour).

### B.1.7 Passwords

RPMS users shall

- Change passwords a minimum of every 90 days.
- Create passwords with a minimum of eight characters.
- If the system allows, use a combination of alpha-numeric characters for passwords, with at least one uppercase letter, one lower case letter, and one number. It is recommended, if possible, that a special character also be used in the password.
- Change vendor-supplied passwords immediately.
- Protect passwords by committing them to memory or store them in a safe place (do not store passwords in login scripts or batch files).
- Change passwords immediately if password has been seen, guessed, or otherwise compromised, and report the compromise or suspected compromise to their ISSO.
- Keep user identifications (IDs) and passwords confidential.

RPMS users shall not

- Use common words found in any dictionary as a password.
- Use obvious readable passwords or passwords that incorporate personal data elements (e.g., user's name, date of birth, address, telephone number, or social security number; names of children or spouses; favorite band, sports team, or automobile; or other personal attributes).
- Share passwords/IDs with anyone or accept the use of another's password/ID, even if offered.
- Reuse passwords. A new password must contain no more than five characters per eight characters from the previous password.
- Post passwords.
- Keep a password list in an obvious place, such as under keyboards, in desk drawers, or in any other location where it might be disclosed.
- Give a password out over the phone.

### B.1.8 Backups

RPMS users shall

- Plan for contingencies such as physical disasters, loss of processing, and disclosure of information by preparing alternate work strategies and system recovery mechanisms.
- Make backups of systems and files on a regular, defined basis.
- If possible, store backups away from the system in a secure environment.

### B.1.9 Reporting

RPMS users shall

- Contact and inform their ISSO that they have identified an IT security incident and begin the reporting process by providing an IT Incident Reporting Form regarding this incident.
- Report security incidents as detailed in the *IHS Incident Handling Guide* (SOP 05-03).

RPMS users shall not

- Assume that someone else has already reported an incident. The risk of an incident going unreported far outweighs the possibility that an incident gets reported more than once.

### B.1.10 Session Timeouts

RPMS system implements system-based timeouts that back users out of a prompt after no more than 5 minutes of inactivity.

RPMS users shall

- Utilize a screen saver with password protection set to suspend operations at no greater than 10 minutes of inactivity. This will prevent inappropriate access and viewing of any material displayed on the screen after some period of inactivity.

### B.1.11 Hardware

RPMS users shall

- Avoid placing system equipment near obvious environmental hazards (e.g., water pipes).
- Keep an inventory of all system equipment.
- Keep records of maintenance/repairs performed on system equipment.

RPMS users shall not

- Eat or drink near system equipment.

### B.1.12 Awareness

RPMS users shall

- Participate in organization-wide security training as required.
- Read and adhere to security information pertaining to system hardware and software.
- Take the annual information security awareness.
- Read all applicable RPMS manuals for the applications used in their jobs.

### B.1.13 Remote Access

Each subscriber organization establishes its own policies for determining which employees may work at home or in other remote workplace locations. Any remote work arrangement should include policies that

- Are in writing.
- Provide authentication of the remote user through the use of ID and password or other acceptable technical means.
- Outline the work requirements and the security safeguards and procedures the employee is expected to follow.
- Ensure adequate storage of files, removal, and nonrecovery of temporary files created in processing sensitive data, virus protection, and intrusion detection, and provide physical security for government equipment and sensitive data.
- Establish mechanisms to back up data created and/or stored at alternate work locations.

Remote RPMS users shall

- Remotely access RPMS through a virtual private network (VPN) whenever possible. Use of direct dial in access must be justified and approved in writing and its use secured in accordance with industry best practices or government procedures.

Remote RPMS users shall not

- Disable any encryption established for network, internet, and Web browser communications.

## B.2 RPMS Developers

RPMS developers shall

- Always be mindful of protecting the confidentiality, availability, and integrity of RPMS when writing or revising code.
- Always follow the IHS RPMS Programming Standards and Conventions (SAC) when developing for RPMS.
- Only access information or code within the namespaces for which they have been assigned as part of their duties.
- Remember that all RPMS code is the property of the U.S. Government, not the developer.
- Not access live production systems without obtaining appropriate written access, and shall only retain that access for the shortest period possible to accomplish the task that requires the access.
- Observe separation of duties policies and procedures to the fullest extent possible.
- Document or comment all changes to any RPMS software at the time the change or update is made. Documentation shall include the programmer's initials, date of change, and reason for the change.
- Use checksums or other integrity mechanism when releasing their certified applications to assure the integrity of the routines within their RPMS applications.
- Follow industry best standards for systems they are assigned to develop or maintain, and abide by all Department and Agency policies and procedures.
- Document and implement security processes whenever available.

RPMS developers shall not

- Write any code that adversely impacts RPMS, such as backdoor access, "Easter eggs," time bombs, or any other malicious code or make inappropriate comments within the code, manuals, or help frames.
- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Release any sensitive agency or patient information.

## B.3 Privileged Users

Personnel who have significant access to processes and data in RPMS, such as, system security administrators, systems administrators, and database administrators, have added responsibilities to ensure the secure operation of RPMS.

Privileged RPMS users shall

- Verify that any user requesting access to any RPMS system has completed the appropriate access request forms.
- Ensure that government personnel and contractor personnel understand and comply with license requirements. End users, supervisors, and functional managers are ultimately responsible for this compliance.
- Advise the system owner on matters concerning information technology security.
- Assist the system owner in developing security plans, risk assessments, and supporting documentation for the certification and accreditation process.
- Ensure that any changes to RPMS that affect contingency and disaster recovery plans are conveyed to the person responsible for maintaining continuity of operations plans.
- Ensure that adequate physical and administrative safeguards are operational within their areas of responsibility and that access to information and data is restricted to authorized personnel on a need-to-know basis.
- Verify that users have received appropriate security training before allowing access to RPMS.
- Implement applicable security access procedures and mechanisms, incorporate appropriate levels of system auditing, and review audit logs.
- Document and investigate known or suspected security incidents or violations and report them to the ISSO, Chief Information Security Officer (CISO), and systems owner.
- Protect the supervisor, superuser, or system administrator passwords.
- Avoid instances where the same individual has responsibility for several functions (i.e., transaction entry and transaction approval).
- Watch for unscheduled, unusual, and unauthorized programs.
- Help train system users on the appropriate use and security of the system.
- Establish protective controls to ensure the accountability, integrity, confidentiality, and availability of the system.
- Replace passwords when a compromise is suspected. Delete user accounts as quickly as possible from the time that the user is no longer authorized system. Passwords forgotten by their owner should be replaced, not reissued.
- Terminate user accounts when a user transfers or has been terminated. If the user has authority to grant authorizations to others, review these other authorizations. Retrieve any devices used to gain access to the system or equipment. Cancel logon IDs and passwords, and delete or reassign related active and backup files.

- Use a suspend program to prevent an unauthorized user from logging on with the current user's ID if the system is left on and unattended.
- Verify the identity of the user when resetting passwords. This can be done either in person or having the user answer a question that can be compared to one in the administrator's database.
- Shall follow industry best standards for systems they are assigned to, and abide by all Department and Agency policies and procedures.

Privileged RPMS users shall not

- Access any files, records, systems, etc., that are not explicitly needed to perform their duties
- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Release any sensitive agency or patient information.

# Acronym List

| Acronym | Meaning |
|---|---|
| CAC | Clinical Application Coordinator |
| CMET | Care Management Event Tracking |
| COPD | Chronic Obstructive Pulmonary Disease |
| CRS | Clinical Reporting System |
| CVD | Cardiovascular disease |
| DOB | Date of Birth |
| DPCP | Designated Primary Care Provider |
| EHR | Electronic Health Record |
| ER | Emergency Room |
| GPRA | Government Performance and Results Act |
| GUI | Graphical User Interface |
| HIV/AIDS | Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome |
| HRN | Health Record Number |
| IHS | Indian Health Service |
| IPC | Improving Patient Care |
| PC | Primary Care |
| POV | Purpose of Visit |
| RPMS | Resource and Patient Management System |
| SNOMED | Systematized Nomenclature of Medicine |
| SSN | Social Security Number |
| TIU | Text Integration Utility |

# Contact Information

If you have any questions or comments regarding this distribution, please contact the IHS IT Service Desk.

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