# Table of Contents

## 1.0 Introduction ........................................................................................................... 1

## 2.0 Release Notes ......................................................................................................... 3

2.1 Designated Provider Specialty Management (BDP) .............................................. 3

2.2 PCC Data Entry (APCD) ......................................................................................... 3

2.2.1 New Patient Goal Component ........................................................................ 3

2.2.2 Mnemonic Changes ......................................................................................... 3

2.2.3 Mnemonics: New ............................................................................................... 5

2.2.4 Health Factors: New and Modified ................................................................. 5

2.2.5 Coding Queue Changes .................................................................................... 5

2.3 PCC Health Summary (APCH) .............................................................................. 5

2.3.1 Health Summary Modifications ....................................................................... 5

2.3.2 Health Maintenance Reminders ...................................................................... 6

2.3.3 Patient Wellness Handout ................................................................................ 6

2.4 PCC Management Reports (APCL) ..................................................................... 6

2.4.1 PGEN/VGEN ................................................................................................. 6

2.4.2 QMAN (AMQQ) ............................................................................................. 7

2.4.3 Management Report Changes ....................................................................... 7

2.5 Other .................................................................................................................... 8

## 3.0 Data Entry Menu .................................................................................................. 9

3.1 Update Designated Provider for One Patient ....................................................... 9

3.1.1 Add Provider .................................................................................................. 10

3.1.2 Change Provider ............................................................................................ 10

3.1.3 Delete Designated Provider .......................................................................... 11

3.1.4 Health Summary ............................................................................................ 11

3.2 Update a Designated Provider’s Patient Panel .................................................... 12

3.2.1 Add Patient to List ....................................................................................... 13

3.2.2 Remove Patient from List ............................................................................ 13

3.2.3 Health Summary ............................................................................................ 13

3.2.4 Change Designated Provider to Another ...................................................... 14

3.2.5 Resort Display of Patients ............................................................................ 15

3.3 Add a New Designated Spec Provider ............................................................... 15

3.4 Modify Existing Designated Specialty Provider .................................................. 16

3.5 Delete an Individual Patient Record ..................................................................... 17

3.6 Update Provider Records from a Patient Template .............................................. 17

3.7 Delete Provider Records from a Patient Template .............................................. 18

3.8 Change All of One Provider’s Patients to Another ............................................. 18

3.9 Loop Delete the Current Designated Provider ................................................... 19

3.10 Update all Patients from One Community to a Designated Provider ............... 20

3.11 Update Records for Unassigned Patient by Category ......................................... 20

3.12 Inquire about a Specific Patient Record ............................................................ 21

3.13 View History of a Patient’s Specialty Providers ................................................ 22
4.0 Reports Menu ........................................................................................................ 23
  4.1 Inquire to a Specific Patient Record ............................................................... 23
  4.2 Display History for a Specific Patient & Category ........................................ 24
  4.3 Print Master Patient Listing By Category (Brief) .......................................... 24
  4.4 Print Master Patient History by Category ..................................................... 25
  4.5 Listing of Records by Date Updated .............................................................. 26
  4.6 Print Listing by Designated Provider and Date Range ................................ 27
  4.7 Print Listing by Updating User and Date Range ......................................... 28
  4.8 Print all Records by Community of Residence ............................................. 29
  4.9 List of Patients with No Designated Provider ............................................. 30
  4.10 Records with No Current Provider Assigned ............................................. 30

5.0 Manager Menu ................................................................................................... 32
  5.1 Add/Edit Provider Categories ..................................................................... 32
  5.2 Print Listing of Provider Categories ............................................................. 33

Glossary ..................................................................................................................... 44

Acronym List ............................................................................................................... 45

Contact Information .................................................................................................. 46
Preface

This manual provides information regarding the use of the Designated Specialty Provider Management System (BDP) Version 2.0 package.
1.0 Introduction

The Patient Care Component (PCC) database is the central repository for data in the Resource and Patient Management System (RPMS).

The PCC suite comprises the following RPMS components:

- Indian Health Service Dictionaries (AUPN)
- Standard Tables
- PCC Health Summary, including Health Maintenance Reminders (APCH)
- PCC Data Entry (APCD)
- PCC Management Reports, including PGEN/VGEN (APCL)
- Designated Specialty Provider Management (DSPM)
- Q-Man (Query Manager) (AMQQ)
- Taxonomy Management (ATX)

The RPMS DSPM system facilitates assignment of a panel or multiple panels of patients to a designated primary care provider. The system similarly permits assignment of a panel or panels of patients to one of several specialty care providers, such as a diabetes provider, home care provider, mental health provider, and others.

In addition to initial assignment of patients to primary care and specialty providers, the system facilitates easy changing of patients from one provider to another, and addition and deletion of individual patients from a provider’s assigned panel.

The assignment of patient panels to primary care providers and to specialty care providers is intended to assist a facility’s comprehensive care team in coordinating the overall care of patients. Additionally, it permits the display of important statistical information by provider panels.

The module includes the following functions:

- Add or edit a patient’s healthcare provider assignment for the following standard treating specialty categories:

Table 1-1: Standard treating specialty categories

<table>
<thead>
<tr>
<th>Code</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>CM</td>
<td>Case Manager</td>
</tr>
<tr>
<td>CD</td>
<td>Chemical Dependency</td>
</tr>
<tr>
<td>DPCP</td>
<td>Designated Primary Provider</td>
</tr>
<tr>
<td>DM</td>
<td>Diabetes</td>
</tr>
<tr>
<td>HIVP</td>
<td>HIV Provider</td>
</tr>
</tbody>
</table>
This list can be expanded to accommodate site-specific categories:

- Modify/change a specialty provider for an individual patient
- Add/update specialty provider assignments from a template of patients
- Delete current specialty providers from a template of patients
- Transfer assigned patients from one healthcare provider to another
- Update providers for all patients living in a specified community
- Display a specific healthcare provider’s current patient panel
- Display provider assignments on patients’ health summaries
- Provide links to/from the Women’s Health, the Behavioral Health, and the Patient Registration systems. Any changes to patient’s case manager/designated provider fields within those packages will also be incorporated into the Designated Specialty Provider package.

**•** Produce the following reports:

- Inquiry to a Specific Patient Record
- Display of a Patient’s Provider Assignment History
- Master Patient List, by Provider Category
- Listing of a Specific Provider’s Patient Panel
- Listing of Patient Records (By Community of Residence)
- Listing of all Patient’s with No Current Designated Provider
- User Data Entry/Update Workload reports
2.0 Release Notes
BJPC Version 2.0 Patch 7 contains the following modifications and enhancements:

2.1 Designated Provider Specialty Management (BDP)
A new report, “NODP List of Patients with No,” is available.

2.2 PCC Data Entry (APCD)
The following changes apply to the APCD application:

2.2.1 New Patient Goal Component
Added the new option, PATG Patient Goals Update. to the UPD Update Patient Related/Non-Visit Data menu. The option is in List Manager format. The user can enter, modify and delete patient goals and steps along with progress notes.

2.2.2 Mnemonic Changes
- EX: result is now required on all exam entries
- ER: urgency levels have been modified to include the following:
  - R Resuscitation (1)
  - E Emergent (2)
  - U Urgent (3)
  - L Less Urgent (4)
  - N Routine (5)
- PED: Patient education topics can now be added using CPT codes.
- BM: Birth Length field added.
- RF: Added new fields; DES Daughter?, Age at First Menses, Age at First Vaginal Intercourse, Age at Onset of Menopause
- FP: Added the new fields below.
  - DES DAUGHTER?
  - AGE at FIRST MENSES
  - AGE at FIRST VAGINAL INTERCOURSE
  - AGE at ONSET of MENOPAUSE
  - CURRENTLY PREGNANT?
  - PROVIDER WHO UPDATED CURRENTLY PREGNANT
- EDD (METHOD UNKNOWN)
- PROVIDER WHO DOCUMENTED EDD (METHOD UNKNOWN)
- EDD (METHOD UNKNOWN) COMMENT
- EDD (LMP)
- PROVIDER WHO UPDATED EDD (LMP)
- EDD (LMP) COMMENT
- EDD (ULTRASOUND)
- PROVIDER WHO UPDATED EDD (ULTRASOUND)
- EDD (ULTRASOUND) COMMENT
- EDD (CLINICAL PARAMETERS)
- PROVIDER WHO UPDATED EDD (CLINICAL PARAMETERS)
- EDD (CLIN PARAMETERS) COMMENT
- DEFINITIVE EDD
- PROVIDER WHO UPDATED DEFINITIVE EDD
- DEFINITIVE EDD COMMENT
- LACTATION STATUS

- Added the option to add, edit or delete a contraceptive method. The ability to record multiple contraceptive methods for a patient is available and the list of contraceptive methods available to choose is expanded.

- PV, IPV, PPV, and SPV: Modified these mnemonics to prompt for a First/Revisit entry when an injury is added. When the user is in Modify (MOD) mode the First/Revisit prompt displays for injury and non-injury entries.

- Added an encounter provider prompt to the following mnemonics:
  - Any measurement (BP, WT, HT, etc)
  - Any Purpose of Visit (PV, IPV, PPV, SPV, UPV)
  - Any CPT entry (ACPT, CPT, PCPT
  - ADA codes (ADA)
  - Operation entry (OP, AOP, UOP)
  - Diagnostic procedure entry (DXP)
  - Elder care entry (EL)
  - Eye Glass entry (GP)
  - Health Factor entry (HF)
  - Infant Feeding Choice (IF)
  - Lab entry (LAB)
  - Physical Therapy entry (PT)
  - Radiology Exam entry (RAD)
− Skin Test entry (ST, STP)
− Immunization entry (IM)
− Medication (RX)
− Emergency Room (ER)

2.2.3 Mnemonics: New

• PTG: Patient Goal mnemonic which allows access to the new Patient Goal component
• EGA: New Estimated Gestational Age measurement
• MMSE: New Mini Mental Status Exam measurement

2.2.4 Health Factors: New and Modified

• Category Health Literacy and its associated factors are inactivated.
• Category Barriers to Learning:
  − Factors Childhood Development, Learning Disability, Developmental Delay, <6th Grade Education, and Social Stressors are inactivated.
  − Renamed factor Emotional Stressors to Stressors.
  − Added factors Low Health Literacy and Cognitive Impairment.

2.2.5 Coding Queue Changes

• EHRD/PEHR: added View Any Visit and View BH Note actions.
• EHRD/PEHR: added Status Update action prompt that allows users to edit or delete chart audit notes when a visit is marked as Reviewed/Complete.
• EHRD: added No Primary Visit Provider and No Clinic Assigned to the selection list of visit choices.
• PEHR: added Change Patient action to allow the user to switch patients without going back to the menu.

2.3 PCC Health Summary (APCH)

The following modification applies to the APCH application.

2.3.1 Health Summary Modifications

• Added Lactation Status, Current Contraception Methods and EDD information to the Reproductive History - Brief and Reproductive History – All EDDs components.
• Modify Health Summary: added a health summary definition parameter “Display Comments w/Reasons Service Not Done:” under the General Info selection option. Enter “Yes” to allow refusal comments to display in the refusal components.

• Added a Patient Goal Component.

• Added the new option, Generate a Health Summary Supplement, to the Health Summary Menu. The option allows a user to print or view a supplement without a summary type defined.

2.3.2 Health Maintenance Reminders

• Removed V72.31 from the Pap Smear reminder logic.

2.3.3 Patient Wellness Handout

• The following new components are available:
  − Anticoagulation
  − Appointments
  − Diabetes Screening
  − Education Forms
  − Family History
  − Intake Forms
  − Pediatric Screening
  − Procedures
  − Recent BP History
  − Recent Weight History

• The Patient Goal component is modified to include goals from the new Patient Goals functionality.

• The Quality of Care Transparency Report Card is inactivated.

2.4 PCC Management Reports (APCL)

The following changes apply to the APCL application.

2.4.1 PGEN/VGEN

• The following data elements have been added to PGEN as search items:
  − Contraception Method
  − EDD (Any/All types
  − Definitive EDD
The following data elements have been added to VGEN as search items:
- Visit Auditor
- Any Immunization Administered?
- EDD (Any/All types
- Definitive EDD
- EDD (LMP)
- EDD (Ultrasound)
- EDD (Clinical Parameters)
- EDD (Method Unknown)
- EDD (Last Documented)
- Contraceptive Methods

### 2.4.2 QMAN (AMQQ)

- The following have been added to QMAN as search attributes:
  - Hospital Location
  - Patient Registration Inactivation Date
  - IMM Patient Active
  - IMM Patient Inactive
  - VFC Eligibility

### 2.4.1 Management Report Changes

- RTI Returns to Clinic w/in 72 hours report: Added two new prompts:
  - Ask for same diagnosis - if the user answers yes,
  - only visits with the same primary diagnosis are listed.
  - Include Incomplete Visits? If the user answers yes, incomplete visits will be listed.
- Added totals to reports, DP Patient Listing by Primary Care Provider and VDP Pts by Designated Primary Care Prov w/Visit Counts.
- Added the ability to run the reports CH Community Health Profile Summary and PPDS Provider Practice Description Report using a search template of patients.
• PCCV reports: Added ability to print totals for all visits, regardless of encounter location.

2.5 Other

DM Data Entry Option: Added the message “the data you enter for the above patient will be updated in the PCC database. Do you wish to continue? Y/N.”
3.0 Data Entry Menu

The options on the Data Entry Menu (DE) are shown in Figure 3-1:

```
**************************************************************
*                INDIAN HEALTH SERVICE             *
* DESIGNATED SPECIALTY PROVIDER MGT SYSTEM *              *
*                VERSION 1.0, Sep 10, 2004            *
**************************************************************
DEMO HOSPITAL
Data Entry Menu

UPOP  Update Designated Providers for One Patient
UOP  Update a Specialty Provider's Patient Panel
ADD  Add a new Desig Spec Provider for a Patient
MOD  Modify Existing Desig Spec Provider for a Patient
DREC Delete an Individual Patient Record
TMPU Update Provider Records from a Patient Template
TMPD Delete Provider Records from a Patient Template
CLOP Change all of one Provider's Patients to Another
DLOP Loop Delete the current Designated Provider
COMA Update ALL patients from one Community to a DP
LUNA Update Records for Unassigned Patients by Category
DISP Inquire to a Specific Patient Record
DHX  View History of a Patient's Specialty Providers
```

Select Data Entry Menu Option:

Figure 3-1: Designated Specialty Provider Management System Data Entry menu

3.1 Update Designated Provider for One Patient

Use the UPOP option to edit the designated provider for a specified patient.

To edit a patient’s designated provider, follow these steps:

1. At the “Select Data Entry Menu Option” prompt, type UPOP and press Enter.
2. At the “Enter Patient Name” prompt, type the name of the patient and press Enter.

The Designated Providers screen displays, as shown in Figure 3-2:
At the “Select Action” prompt, do one of the following:

- Type Q (Quit) and press Enter to quit the screen.
- Type + (plus) to display the next screen. This option is not available for the last screen.
- Type – (minus) to display the previous screen. This option is not available for the first screen.
- Use one of the actions listed above the prompt.

### 3.1.1 Add Provider

Use the AD action to add a provider in a specified provider category to the Designated Providers screen.

To add a provider, follow these steps:

1. At the “Select Item(s)” prompt, type AD and press Enter.
2. At the “Enter the Provider Category” prompt, type the provider category name or code and press Enter.
3. At the “Enter Provider Name” prompt, type the provider name and press Enter. The application indicates that the provider was successfully added as the designated provider for the specified category and returns to the “Select Item(s)” prompt.

### 3.1.2 Change Provider

Use the CP action to change the provider.

To change a provider, follow these steps:

1. At the “Select Item(s)” prompt, type CP and press Enter.
2. At the “Select item to change” prompt, type an integer specifying the record to be changed and press Enter.

3. At the “Enter New Designated provider” prompt, type the provider name and press Enter. The application indicates that the provider was successfully added as the designated provider and returns to the “Select Item(s)” prompt.

3.1.3 Delete Designated Provider
Use the DE action to remove a designated provider from the list.

To remove a provider, follow these steps:
1. At the “Select Item(s)” prompt, type **DE** and press Enter.
2. At the “Select item to change” prompt, type an integer specifying the record to be deleted and press Enter.
3. Confirm the deletion at the “Please confirm?” prompt by typing **Y** (Yes) or **N** (No) and press Enter. Typing **Y**, removes the designated provider from the list. Typing **N**, removes nothing from the list and the application returns to the “Select Item(s)” prompt.

3.1.4 Health Summary
Use the HS option to display the health summary for a specified patient.

To display a health summary, follow these steps:
1. At the “Select Item(s)” prompt, type **HS** and press Enter.
2. At the “Select health summary type name” prompt, type the name of the health summary and press Enter.

The Output Browser screen displays the Health Summary information, as shown in Figure 3-3:

```
PCC Health Summary for DEMO,CORRINE ALYSE

** CONFIDENTIAL PATIENT INFORMATION -- 12/19/2008 12:48 PM [SJT] **
******* DEMO,CORRINE ALYSE 155243  (DENTAL SUMMARY) pg 1 ********

----------------------- DEMOGRAPHIC DATA ---------------------------
DEMO,CORRINE ALYSE  DOB: NOV 30,1989 19 YRS FEMALE no blood type
DEMO TRIBE, NM     SSN:   
MOTHER'S MAIDEN NAME: ARMACHAIN,JANICE GAYLE
(H) 555-555-8673    FATHER'S NAME: DEMO,HENRY ALLEN
BIRDTOWN (13 MT. NOBLE RD,WHITTIER,NC,28789)
```
At the “Select Action” prompt, do one of the following:

- Type Q (Quit) and press Enter to quit the screen.
- Type + (plus) to display the next screen. This option is not available for the last screen.
- Type – (minus) to display the previous screen. This option is not available for the first screen.

3.2 Update a Designated Provider’s Patient Panel

Use the UOP option to edit a designated provider’s patient panel.

To edit a patient panel, follow these steps:

1. At the “Select Data Entry Menu Option” prompt, type **UOP** and press Enter.
2. At the “Designated Provider Name” prompt, type the name of the provider and press Enter.

The View/Update Designated Prov screen (Figure 3-4) displays:
At the “Select Action” prompt, do one of the following:

- Type Q (Quit) and press Enter to quit the screen.
- Type + (plus) to display the next screen. This option is not available for the last screen.
- Type – (minus) to display the previous screen. This option is not available for the first screen.
- Use one of the actions listed above the prompt.

### 3.2.1 Add Patient to List

Use the AD action to add a patient to the designated provider’s list.

To add a patient, follow these steps:

1. At the “Select Item(s)” prompt, type AD and press Enter.
2. At the “Enter Patient Name” prompt, type the name of the patient and press Enter.
3. At the “Enter the Type of Designated Provider” prompt, type the code for the type of designated provider and press Enter. The new patient name is added to the list.

### 3.2.2 Remove Patient from List

Use the RM action to remove a specified patient from the designated provider’s list.

To remove a patient, follow these steps:

1. At the “Select Item(s)” prompt, type RM and press Enter.
2. At the “Remove which selected item” prompt, type the number of the item containing the name of the patient to remove and press Enter. There is no confirmation.

### 3.2.3 Health Summary

Use the HS option to display the health summary for a specified patient.

To display a health summary, follow these steps:

1. At the “Select Item(s)” prompt, type HS and press Enter.
2. At the “Enter Patient Name” prompt, type the name of the patient and press Enter.
3. At the “Select health summary type name” prompt, type the name of the health summary and press enter.

The Output Browser screen displays the Health Summary information for a dental summary type, as in Figure 3-5:

Figure 3-5: Sample Health Summary Report

At the “Select Action” prompt, do one of the following:

- Type Q (Quit) and press Enter to quit the screen.
- Type + (plus) to display the next screen. This option is not available for the last screen.
- Type – (minus) to display the previous screen. This option is not available for the first screen.

3.2.4 Change Designated Provider to Another

Use the CP action to change the designated provider of a selected record to another.

To change a designated provider, follow these steps:

1. At the “Select Item(s)” prompt, type CP and press Enter.
2. At the “Change which selected item” prompt, type the number of the item to be changed and press Enter.
3. At the “Enter New Designated Provider Name” prompt, type the name of the provider and press Enter.

3.2.5 Resort Display of Patients

Use the ST action to sort records by patient or by category.

To sort records, follow these steps:

1. At the “Select Item(s)” prompt, type **ST** and press Enter.

2. At the “Enter Type of Lister Display Sort” prompt, type an integer to specify how to sort the records: **1** (By Patient) or **2** (By Category) and press Enter.

3. The screen refreshes displaying the newly sorted list and returns to the “Select Item(s)” prompt.

3.3 Add a New Designated Spec Provider

Use the ADD option to add a new designated specialty provider record. If the patient has already been assigned an existing provider for the category selected, use the Modify Data Entry Menu (MOD) or the Update One Designated Provider’s Patient List (UOP) options to change the existing provider for this patient’s category type.

To add a designated specialty provider, follow these steps:

1. At the “Select Data Entry Menu Option” prompt, type **ADD** and press Enter.

2. At the “Select Patient Name” prompt, type the name of the patient and press Enter, or type ?? and press Enter to display a list of currently assigned providers organized by category.

The application displays information about the current designated provider for the selected patient, as shown in Figure 3-6:

```
********************
**CURRENT DESIGNATED PROVIDERS - BY PROVIDER CATEGORY TYPE**
Assigned to Patient: DEMO, CORRINE ALYSE
********************
**CATEGORY TYPE**       **CURRENT PROVIDER ASSIGNED**
1  DESIGNATED PRIMARY PROVIDER   OXPROVIDER, DAMA J
2  MENTAL HEALTH               KWPROVIDER, BLAKE T
3  CHEMICAL DEPENDENCY         JKPROVIDER, HILLANE S
4  CASE MANAGER                <None Currently Assigned>
5  DIABETES                    TQPROVIDER, LIZ
```

Figure 3-6: Sample data about the current designated provider for the patient
3. At the “Do you want to continue with adding a new Designated Provider?” prompt, type Y (Yes) and press Enter to continue, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

4. At the “Provider Category” prompt, type the provider category and press Enter.

5. At the “Select New Designated Provider” prompt, type the name of the provider and press Enter.

A summary of the information being added displays.

6. At the “Do you wish to Continue with the Adding of the new Designated Provider?” prompt, type Y (Yes) and press Enter to display a confirmation message, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

3.4 Modify Existing Designated Specialty Provider

Use the MOD option to modify a patient’s existing designated specialty provider records. If the specified provider has already been assigned to the patient for the selected category, the record will not be updated.

To modify a patient’s specialty provider, follow these steps:

1. At the “Select Data Entry Menu Option” prompt, type MOD and press Enter.

2. At the “Select Patient Name” prompt, type the name of the patient and press Enter.

3. At the “Do you want to continue changing one of the above Designated Providers?” prompt, type Y (Yes) and press Enter to continue, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

4. At the “Provider Category” prompt, type the provider category and press Enter.

5. At the “Select New Designated Provider” prompt, type the name of the provider and press Enter.

A summary of the information being changed displays.

6. At the “Do you wish to Continue Changing to a new Current Designated Provider?” prompt, type Y (Yes) and press Enter to display a confirmation message, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.
3.5 Delete an Individual Patient Record

Use the DREC option to delete an existing designated specialty provider for a selected individual patient and provider category type.

To delete a designated specialty provider, follow these steps:
1. At the “Select Data Entry Menu Option” prompt, type DREC and press Enter.
2. At the “Select Patient Name” prompt, type the name of the patient and press Enter.
   - The current designated providers and category types for the patient are displayed.
3. At the “Do you want to continue Deleting one of the above Designated Providers?” prompt, type Y (Yes) and press Enter to continue, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.
4. At the “Provider Category” prompt, type the provider category and press Enter.
   - A summary of the information to be changed displays.
5. At the “Do you wish to Continue Deleting the Current Designated Provider?” prompt, type Y (Yes) and press Enter to display a confirmation message, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

3.6 Update Provider Records from a Patient Template

Use the TMPU option to automatically add or update records from a patient template.

To update provider records from a template, follow these steps:
1. At the “Select Data Entry Menu Option” prompt, type TMPU and press Enter.
2. At the “Select Search Template” prompt, type the name of the patient template to be used and press Enter.
   - The number of patient records in the selected template displays.
3. At the “Select New Designated Provider” prompt, type the name of the provider and press Enter.
4. At the “Do you want to continue changing the Designated Provider for each patient in this Template?” prompt, type Y (Yes) and press Enter to continue, or
type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

5. At the “Provider Category” prompt, type the provider category and press Enter.
   A summary of the information being changed displays.

6. At the “Do you wish to Continue Changing to a new Current Designated Provider?” prompt, type Y (Yes) and press Enter to continue, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

3.7 Delete Provider Records from a Patient Template

Use the TMPD option to automatically delete provider records from a patient template. The system prompts for the template name and provider category type, and then automatically loops through the template of patients and deletes the current provider for the specified category type. If a patient listed in the template does not currently exist in the management system, no action will be taken.

To delete provider records, follow these steps:

1. At the “Select Data Entry Menu Option” prompt, type TMPD and press Enter.

2. At the “Select Search Template” prompt, type the name of the patient template and press Enter.
   The number of patient records in the selected template displays.

3. At the “Select Existing Designated Provider” prompt, type the name of the provider and press Enter.

4. At the “Do you want to continue Deleting the Designated Provider for each patient in this template?” prompt, type Y (Yes) and press Enter to continue, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

5. At the “Provider Category” prompt, type the name of the category and press Enter.
   A summary of the information being changed displays.

6. At the “Do you wish to Continue Deleting the Current Designated Provider?” prompt, type Y (Yes) and press Enter to display a confirmation message, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

3.8 Change All of One Provider’s Patients to Another
Use the CLOP option to automatically change all records with a specific designated provider to a new designated provider. The system prompts for the old provider name, the new provider name, and the desired provider category type, and then automatically loops through all records and changes them to the new provider for the selected category type. If a patient’s existing provider and category types are the same as those specified, no update occurs.

To change all of a provider’s records to a new designated provider, follow these steps:

1. At the “Select Data Entry Menu Option” prompt, type CLOP and press Enter.
2. At the “Select Existing Designated Provider” prompt, type the name of the existing provider and press Enter. The number of patients assigned to the existing provider displays.
3. At the “Do you want to continue changing the Designated Provider for each Patient?” prompt, type Y and press Enter to continue, or type N and press Enter to return to the “Select Data Entry Menu Option” prompt.
4. At the “Select New Designated Provider” prompt, type the name of the new provider and press Enter.
5. At the “Provider Category” prompt, type the provider category and press Enter. A summary of the information being changed displays.
6. At the “Do you wish to Continue Changing to a new Current Designated Provider?” prompt, type Y (Yes) and press Enter to continue, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

3.9 Loop Delete the Current Designated Provider

Use the DLOP option to automatically delete all records for the existing designated provider. After the provider category type has been selected, the program automatically loops through all records and deletes the existing provider for this category type.

To delete the current designated provider, follow these steps:

1. At the “Select Data Entry Menu Option” prompt, type DLOP and press Enter.
2. At the “Select Existing Designated Provider” prompt, type the name of the existing provider and press Enter. The number of patients assigned to the provider displays.
3. At the “Do You Want to Continue Deleting the Designated Provider for Each Patient?” prompt, type Y (Yes) and press Enter to continue, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.
4. At the “Provider Category” prompt, type the provider category and press Enter. A summary of the information being changed displays.

5. At the “Do You Wish to Continue Deleting the Current Designated Provider?” prompt, type Y (Yes) and press Enter to display a confirmation message, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

### 3.10 Update all Patients from One Community to a Designated Provider

Use the COMA option to automatically update the designated provider for existing patients living in a selected community. The system prompts for the community name, the designated provider name, and the designated provider category type, and then automatically loops through all existing patient records and updates the designated provider for the selected category type. If a patient’s current provider, category type, and community are the same as those specified, no update occurs.

To update a community’s designated provider, follow these steps:

1. At the “Select Data Entry Menu Option” prompt, type **COMA** and press Enter.

2. At the “Select a Particular Community” prompt, type the name of the community and press Enter.

3. At the “Select New Designated Provider” prompt, type the name of the new designated provider for that community and press Enter.

4. At the “Do you want to continue changing the Designated Provider for each Patient living in this Community?” prompt, type Y (Yes) and press Enter to continue, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

5. At the “Provider Category” prompt, type the provider category and press Enter. A summary of the information being changed displays.

6. At the “Do you wish to Continue Deleting the Current Designated Provider?” prompt, type Y (Yes) and press Enter to display a confirmation message, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

### 3.11 Update Records for Unassigned Patient by Category

Use the LUNA option to automatically update all records with no designated provider to a new designated provider. The system prompts only for the new provider name and the provider category type, and then automatically loops through all records with no existing provider and assigns these patients to the new provider for the selected category type.
To update records with no designated provider, follow these steps:

1. At the “Select Data Entry Menu Option” prompt, type LUNA and press Enter.

2. At the “Select Patient Name” prompt, type the name of the patient and press Enter.

3. At the “Do you want to continue changing the Designated Provider for each Patient?” prompt, type Y (Yes) and press Enter to continue, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

4. At the “Select New Designated Provider” prompt, type the name of the provider and press Enter.

5. At the “Provider Category” prompt, type the provider category and press Enter. A summary of the information to be changed displays.

6. At the “Do you wish to Continue Updating to a new Current Designated Provider?” prompt, type Y (Yes) and press Enter to display a confirmation message, or type N (No) and press Enter to return to the “Select Data Entry Menu Option” prompt.

### 3.12 Inquire about a Specific Patient Record

Use the DISP option for a quick screen display of the patient’s current designated specialty providers. The system prompts for an individual patient’s name. The display lists the specific provider specialty category, along with the date of last recording and the last user who updated the record. If no current provider is assigned to a category, “<None Currently Assigned>” displays.

To display a patient’s designated specialty providers, follow these steps:

1. At the “Select Data Entry Menu Option” prompt, type DISP and press Enter.

2. At the “Select Patient Name” prompt, type the name of the patient and press Enter.

A list of currently assigned providers displays, organized by category as shown in Figure 3-7:

---

<table>
<thead>
<tr>
<th>Select PATIENT NAME: PATIENT, GERTRUDE</th>
<th>F 01-01-1901 000000366 100000</th>
</tr>
</thead>
</table>

Designated Providers Sep 15, 2008 14:11:27 Page: 1 of 1

Designated Provider List for: PATIENT, GERTRUDE HRN: DH 100000

<table>
<thead>
<tr>
<th>Category</th>
<th>Current Provider</th>
<th>Updated</th>
<th>Updated by</th>
</tr>
</thead>
<tbody>
<tr>
<td>DESIGNATED PRIMARY PROVIDER</td>
<td>PROVIDER, ELISTA C</td>
<td>09/15/07</td>
<td>LASTNAME, USER</td>
</tr>
</tbody>
</table>
3.13 View History of a Patient’s Specialty Providers

Use the DHX option to display a detailed history listing of a patient’s designated specialty provider for a selected provider category. The system prompts for an individual patient and a provider specialty category, and then displays the current designated specialty provider record along with the old provider history, date of recording, and the user who updated the record.

To display a patient’s specialty provider history, follow these steps:

1. At the “Select Data Entry Menu Option” prompt, type **DHX** and press Enter.
2. At the “Enter Patient Name” prompt, type the name of the patient and press Enter.
3. At the “Select Item(s)” prompt, type the number of the provider specialty category and press Enter.

At the “Device” prompt, type the name of the output device to print the report, or press the Enter key to display the report on screen as shown in Figure 3-8.

---

**Figure 3-8: Displaying history for a specific patient & category (Sample Report)**
4.0 Reports Menu

The options on the Reports Menu (RPTS) are shown in Figure 4-1:

```
***********************************************************************
*           INDIAN HEALTH SERVICE          *
* DESIGNATED SPECIALTY PROVIDER MGT SYSTEM *
* VERSION 1.0, Sep 10, 2004    *
***********************************************************************
DEMO HOSPITAL
Reports Menu

DISP    Inquire to a Specific Patient Record
DHX     View History of a Patient's Specialty Providers
CLST    Print Master Patient Listing By Category (Brief)
HX      Print Master Patient History By Category
UPDT    Listing of Records By Date Updated
PROV    Print Listing By Desg Provider and Date Range
USER    Print Listing By User Who Created and Date Range
COML    Print All Records By Community or Residence
NODP    List of Patients with No Designated Provider
UPR     Records with No Current Provider Assigned
```

Select Reports Menu Option:

Figure 4-1: Reports menu

4.1 Inquire to a Specific Patient Record

Use the DISP option to display the designated providers for a specified patient.

To display a patient’s designated providers, follow these steps:

1. At the “Select Reports Menu Option” prompt, type **DISP** and press Enter.
2. At the “Enter Patient Name” prompt, type the patient name and press Enter.

The application displays the Designated Providers screen, as shown in Figure 4-2:

```
Designated Providers Dec 19, 2008 15:41:19 Page: 1 of 1
--------------------------------------------------------------------
Designated Provider List for: DEMO, CORRINE ALYSE HRN: DH 155243
--------------------------------------------------------------------
Category            Current Provider     Updated     Updated by
DESENSIZED PRIMARY PROVIDER  OXPROVIDER,DAMA J    12/19/08 THETA, SHIRLEY
MENTAL HEALTH         KWPROVIDER,BLAKE T    11/14/08 GAMMA, CIN
CHEMICAL DEPENDENCY      JKPROVIDER,HILLANE S   11/10/08 GAMMA, CIN
CASE MANAGER                      11/14/08 GAMMA, CIN
DIABETES            TQPROVIDER,LIZ       11/10/08 GAMMA, CIN
```

Select Item(s): Quit//
4.2 Display History for a Specific Patient & Category

Use the DHX option to display a history of designated providers and categories for a specified patient.

To display a patient’s designated provider history, follow these steps:

1. At the “Select Reports Menu Option” prompt, type DISP and press Enter.
2. At the “Enter Patient Name” prompt, type the patient name and press Enter.

The application displays the Designated Providers screen, as shown in Figure 4-3:

```
Designated Providers  Dec 19, 2008 15:44:54  Page:  1 of  0
--------------------------------------------------------------------
Designated Provider List for: DEMO,CHRISTA DANIELLE  HRN: DH 172684
--------------------------------------------------------------------
Category            Current Provider     Updated Updated by
SOCIAL SERVICES        PVPROVIDER,JEROME    12/19/08 TETER,SHIRLEY

History Detail:
OLD Provider          Updated  Updated by
PVPROVIDER,JEROME     12/19/08 TETER,SHIRLEY

RENAI DISEASE                  12/19/08 TETER,SHIRLEY

History Detail:
OLD Provider          Updated  Updated by
SCPROVIDER,ONE        12/19/08 THETA,SHIRLEY
THETA,SHIRLEY         12/19/08 THETA,SHIRLEY

Select Item(s): Quit//
```

Figure 4-3: Designated Providers screen

4.3 Print Master Patient Listing By Category (Brief)

Use the CLST option to display a report listing of all records, subtotaled by the current specialty provider category. The report displays the category, patient name, last current provider, and the date last updated. This report does not include patients who are inactive.

To display a list of patients by provider category, follow these steps:

1. At the “Select Reports Menu Option” prompt, type CLST and press Enter.
2. At the “Device” prompt, type the name of the output device to print the report and press Enter, or just press Enter to display the report on screen as shown in Figure 4-4.
4.4 Print Master Patient History by Category

Use the HX option to produce a report listing a detailed history of a patient’s selected designated specialty provider. The report is sorted by the provider category, with each patient listed for each category. The current designated specialty provider record displays the old provider history, date of recording, and the user who updated the record. This report does not include patients who are inactive.

To list the history of a patient’s designated specialty providers, follow these steps:

1. At the “Select Reports Menu Option” prompt, type HX and press Enter.
2. At the “Device” prompt, type the name of the output device to print the report and press Enter, or just press Enter to display the report on screen as shown in Figure 4-5.
**4.5 Listing of Records by Date Updated**

Use the UPDT option to display a report listing records updated for a user in a specified date range. The report output includes the category type, patient name, current provider, and date of last update. This report does not include patients who are inactive.

To list updated records, follow these steps:

1. At the “Select Reports Menu Option” prompt, type `UPDT` and press Enter.

2. At the “Enter beginning Update Date” prompt, type the beginning date of the date range and press Enter.

3. At the “Enter ending Update Date” prompt, type the ending date of the date range and press Enter.
4. At the “Device” prompt, type the name of the output device to print the report and press Enter, or just press Enter to display the report on screen as shown in Figure 4-6.

<table>
<thead>
<tr>
<th>PROVIDER CATEGORY</th>
<th>PATIENT NAME</th>
<th>PROVIDER名</th>
<th>UPDATED</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHEMICAL DEPENDENCY</td>
<td>CAMPBELL, DAVID ALVIN</td>
<td>GEBREMARIAM, CINDY</td>
<td>11/25/08</td>
</tr>
<tr>
<td>CANCER</td>
<td>ANDERSON, SONYA M</td>
<td>ETTEST, JENNIFER J</td>
<td>11/25/08</td>
</tr>
<tr>
<td>CHEMICAL DEPENDENCY</td>
<td>BAKER, MARJORIE LANIER</td>
<td>QFPROVIDER, RUSSELL P</td>
<td>12/04/08</td>
</tr>
<tr>
<td>PUBLIC HEALTH NURSE</td>
<td>BAKER, MARJORIE LANIER</td>
<td>STTEST, JANET O</td>
<td>12/08/08</td>
</tr>
<tr>
<td>PUBLIC HEALTH NURSE</td>
<td>LEDFORD, ETHEL L</td>
<td>BPROVIDER, JEAN C</td>
<td>12/12/08</td>
</tr>
<tr>
<td>WOMEN'S HEALTH CASE</td>
<td>ALPHA, CHI</td>
<td>RAY, KATHY R</td>
<td>12/12/08</td>
</tr>
<tr>
<td>CASE MANAGER</td>
<td>ALPHA, CHI</td>
<td>VTEST, JOY A</td>
<td>12/12/08</td>
</tr>
<tr>
<td>DESIGNATED PRIMARY P</td>
<td>BROWN, ESIAH</td>
<td>TXPROVIDER, FRANKLIN</td>
<td>12/18/08</td>
</tr>
<tr>
<td>DESIGNATED PRIMARY P</td>
<td>DEMO, CORRINE ALYSE</td>
<td>OXPROVIDER, DAMA J</td>
<td>12/19/08</td>
</tr>
<tr>
<td>HOME CARE</td>
<td>DEMO, BIANCA SHOOK</td>
<td>12/19/08</td>
<td></td>
</tr>
<tr>
<td>DIABETES</td>
<td>DEMO, JOHNNIE RUTH</td>
<td>TETER, SHIRLEY</td>
<td>12/19/08</td>
</tr>
<tr>
<td>DIABETES</td>
<td>DEMO, BIANCA SHOOK</td>
<td>TETER, SHIRLEY</td>
<td>12/19/08</td>
</tr>
<tr>
<td>RENAL DISEASE</td>
<td>DEMO, CHRISTA DANIELLE</td>
<td>12/19/08</td>
<td></td>
</tr>
<tr>
<td>SOCIAL SERVICES</td>
<td>DEMO, CHRISTA DANIELLE</td>
<td>PVPROVIDER, JEROME</td>
<td>12/19/08</td>
</tr>
<tr>
<td>DESIGNATED PRIMARY P</td>
<td>DEMO, KYLE VANCE</td>
<td>OXPROVIDER, DAMA J</td>
<td>12/19/08</td>
</tr>
</tbody>
</table>

Figure 4-6: Listing of Records By Date Updated

4.6 Print Listing by Designated Provider and Date Range

Use the PROV option to produce a report listing records updated for a specific date range and current designated provider. The report output includes the category type, patient name, current provider, and date last updated.

1. To list updated records for a specified date range, follow these steps:
2. At the “Select Reports Menu Option” prompt, type UPDT and press Enter.
3. At the “Enter beginning Update Date” prompt, type the beginning date of the date range and press Enter.
4. At the “Enter ending Update Date” prompt, type the ending date of the date range and press Enter.
5. At the “Want to Include a particular Current Designated Provider?” prompt, type Y (Yes) or N (No) and press Enter. Pressing Y displays the “Enter Provider Name” prompt. Type the provider name and press Enter.
6. At the “Device” prompt, type the name of the output device to print the report and press Enter, or just press Enter to display the report on screen as shown in Figure 4-7.
4.7 Print Listing by Updating User and Date Range

Use the USER option to produce a report that lists the records updated for a specific date range and updating user. The report output includes the category type, patient name, current provider, date, and the user who made the update.

To print a listing for a particular user and date range, follow these steps:

1. At the “Select Reports Menu Option” prompt, type USER and press Enter.
2. At the “Enter beginning Update Date” prompt, type the beginning date of the date range and press Enter.
3. At the “Enter ending Update Date” prompt, type the ending date of the date range and press Enter.
4. At the “Want to Include a particular User Who Updated Record?” prompt, type Y (Yes) and press Enter to continue, or type N (No) and press Enter. Typing Y displays the “Enter User Name” prompt; type the user name and press Enter.
5. At the “Device” prompt, type the name of the output device to print the report and press Enter, or just press Enter to display the report on screen as shown in Figure 4-8.
4.8 Print all Records by Community of Residence

Use the COML option to produce a report that shows all records sorted by the patient’s current community of residence. Within each community listed, the report displays each patient’s provider category, the current designated specialty provider, and the date last updated.

To list all records by community of residence, follow these steps:

1. At the “Select Reports Menu Option” prompt, type **COML** and press Enter.

2. At the “Device” prompt, type the name of the output device to print the report and press Enter, or just press Enter to display the report on screen as shown in Figure 4-9.
SOCIAL SER PATIENT, FRANCES PROVIDER, BILL 12/29/03
SOCIAL SER PATIENT, SARAH PROVIDER, BILL 12/29/03
MENTAL HEA PATIENT, SARAH PROVIDER, BILL
MENTAL HEA PATIENT, SARAH

SUBCOUNT 5

CURRENT COMMUNITY: BIG MOUNTAIN
MENTAL HEA PATIENT, ANNE
SOCIAL SER PATIENT, JEANINE PROVIDER, BILL 12/29/03
DESIGNATED PATIENT, SHARLENE 01/21/04

SOCIAL SER PATIENT, SHARLENE 12/22/03
WOMENS HEA PATIENT, SHARLENE 12/01/03
DESIGNATED PATIENT, MINDY 12/29/03
WOMENS HEA PATIENT, MINDY PROVIDER, JOE 12/29/03
SOCIAL SER PATIENT, MINDY PROVIDER, BILL 12/29/03
RENAL DISE PATIENT, MINDY
OB CARE PATIENT, MINDY PROVIDER, LORI 12/29/03
MENTAL HEA PATIENT, MINDY PROVIDER, DAVID 12/29/03
SOCIAL SER PATIENT, EDWARD PROVIDER, BILL 12/29/03

SUBCOUNT 12

TOTAL COUNT 21

Figure 4-9: Printing All Records by Community of Residence

4.9 List of Patients with No Designated Provider

Use the NODP option to produce a list of patients with no designated provider assigned. You can run this report on a selected set of patients or on a search template of patients.

Error! Not a valid bookmark self-reference. Figure 4-10: Example of List of patients without a Designated Primary Provider

4.10 Records with No Current Provider Assigned

Use the UPR option to produce a report that lists all patient records for which no current provider is assigned. The report lists the provider categories and the patients within each category who have no current provider assigned.

Note: To assign providers to records with no current provider, use the data entry menu option LUNA-Update Records for Unassigned Patients by Category.

To list patients with no provider assigned, follow these steps:

1. At the “Select Reports Menu Option” prompt, type UPR and press Enter.

2. At the “Device” prompt, type the name of the output device to print the report and press Enter, or just press Enter to display the report on screen as shown in Figure 4-11.
<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>PATIENT NAME</th>
<th>PROVIDER</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHEMICAL DEPEND</td>
<td>GERTRUDE</td>
<td>No Provider Currently Assigned</td>
</tr>
<tr>
<td>DESIGNATED PRIM</td>
<td>ERNEST</td>
<td>No Provider Currently Assigned</td>
</tr>
<tr>
<td>DESIGNATED PRIM</td>
<td>BLAIR</td>
<td>No Provider Currently Assigned</td>
</tr>
<tr>
<td>WOMENS HEALTH</td>
<td>GERTRUDE</td>
<td>No Provider Currently Assigned</td>
</tr>
</tbody>
</table>

Figure 4-11: Records with No Current Provider Assigned
5.0 **Manager Menu**

The options on the Manager (MGR) menu are shown below:

```
**************************************************
*  INDIAN HEALTH SERVICE  *
* DESIGNATED SPECIALTY PROVIDER MGT SYSTEM  *
*  VERSION 1.0, Sep 10, 2004  *
**************************************************
DEMO HOSPITAL
Manager Menu

CAT  Add/Edit Provider Categories
LIST  Print Listing of Provider Categories

Select Manager Menu Option:
```

Figure 5-1: Manager menu

5.1 **Add/Edit Provider Categories**

Use the CAT option to add or edit provider categories in the Specialty Category list.

To add or edit provider categories, follow these steps:

1. At the “Select Manager Menu Option” prompt, type **CAT** and press Enter.

2. At the “Select BDP DESG SPEC PROV CATEGORY NAME” prompt, type the name of the category and press Enter.
   - If the name is an existing category, the name displays followed by “No Editing.”
   - If the name is a new category, at the “Are you adding ‘(new category name)’ as a new BDP DESG SPEC PROV CATEGORY (the [xx TH])?” prompt, type **Y** (Yes) and press Enter to continue, or type **N** (No) and press Enter to return to the “Select Manager Menu Option” prompt.

3. At the “MNEMONIC” prompt, type the mnemonic for the category and press Enter.

   Subsequent prompts depend on the mnemonic selected.

```
Select BDP DESG SPEC PROV CATEGORY NAME: CANCER MANAGER

Are you adding 'CANCER MANAGER' as a new BDP DESG SPEC PROV CATEGORY the 11TH? No/\ Y (Yes)
BDP DESG SPEC PROV CATEGORY MNEMONIC: CM
```

Figure 5-2: Adding local provider categories example
5.2 Print Listing of Provider Categories

Use the LIST option to print a list of provider categories.

To list provider categories, follow these steps:

1. At the “Select Manager Menu Option” prompt, type CAT and press Enter.

2. At the “Start With Name” prompt, and press Enter.

3. At the “Device” prompt, type the name of the output device and press Enter to print the report, or just press Enter to display the report on screen as shown in Figure 5-4.
Figure 5-4: Example of provider categories report
Appendix A: 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.

A.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).

A.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.

A.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 polices and procedures prior to interconnection to or transferring data from RPMS.

A.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.

A.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.

A.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.
A.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).

A.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.

A.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.

A.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.

A.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.

A.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.

A.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.

A.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.
A.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.

A.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.
Glossary

Community
Patients are grouped by the communities in which they live. This grouping can be used to perform mass updates to patient records.

Device
The printer the report is sent to for printing. The device can also be the terminal screen.

Fields
Fields are a collection of related information that makes up a record. Fields on a display screen function like blanks on a form. For each field, a prompt displays to enter a specific type of data. There are nine basic field types in RPMS programs, each of which collects a specific type of information.

ListMan
A specific format of system interface. Information is presented in lists that are followed by a menu of action options

Loop
The system process that scans all records. Usually refers to mass updates of a specific set of data.

Mnemonic
An abbreviation used to name an option or report used in the RPMS packages.

Prompt
The phrase or word(s) used to indicate that input is required from the user.

Site Specific Categories
Categories of providers that are not included in the 10 standard provider categories already loaded in the Designated Specialty Provider package.

Standard Treating Specialty Categories
The 10 standard categories of care already loaded in the Designated Specialty Provider package.
## Acronym List

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>IHS</td>
<td>Indian Health Service</td>
</tr>
<tr>
<td>PCC</td>
<td>Patient Care Component</td>
</tr>
<tr>
<td>RPMS</td>
<td>Resource and Patient Management System</td>
</tr>
</tbody>
</table>
Contact Information

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

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

**Fax:** (505) 248-4363

**Web:** [http://www.ihs.gov/GeneralWeb/HelpCenter/Helpdesk/index.cfm](http://www.ihs.gov/GeneralWeb/HelpCenter/Helpdesk/index.cfm)

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