



**IHS RPMS
PCC Management Reports
(APCL)
Version 3.0**

Installation Guide & Release Notes

February 1997

Indian Health Service
Resource and Patient Management System (RPMS)

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PCC Management Reports
(APCL)
Version 3.0**

Installation Guide & Release Notes

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Information Systems Division
Tucson, Arizona
Developer: Toni Jarland

Table of Contents

Release Notes	2
Installation Instructions	6
Contents of Distribution	6
Requirements	6
Installation Instructions	6
Contact Information	7

Release Notes

Listed below is a brief summary of enhancements included in this new version 3.0 distribution of PCC Management Reports.

- (1) VGEN Visit General Retrieval
- (1) Added Search Template creation capability
 - (2) Added capability to create a flat file of exportable Area data
 - (3) Added Browse capability on all report outputs
 - (4) Database Formatted records
 - (5) New Screen Browser capability to accommodate the increasing numbers of new items to Select/Print/Sort. The user may utilize the arrow keys, the page up/down keys, and/or the +/- keys to view all item selection/choices on each of the 3 screen displays.
 - (6) New Menu Option: Delete VGEN/PGEN Report Definition
 - (7) New Items:
 - Date of Discharge Level of Service
 - Eval&Management CPT Operating Provider
 - Operation Provider Narrative Alcohol/Work Related
 - Operation ICD Narrative Cause of Injury
 - Place of Injury Operation Code
 - Medicaid Plan Name Pvt Ins Plan Name
 - CPT Code Exclude Incomplete Visit
 - Private Ins Verified Exclude Inactive Patients
 - Date visit Exported Outside Location
 - Activity Travel Time EDC
 - Length of Stay Health Record Terminal Digit
 - Employer of Patient Date EDC Determined
 - Contraceptive Method How EDC Determined
 - Last Menstrual Period Problem List
 - Immunization Search Cause of DX
 - County Service Unit of Patient
- (2) PGEN Patient General Retrieval
- (1) Added Search Template creation capability
 - (2) Added Browse capability on all report outputs
 - (3) New Screen Browser capability to accommodate the increasing numbers of new items to Select/Print/Sort. The user may utilize the arrow keys, the page up/down keys, and/or the +/- keys to view all item selection/choices on each of the 3 screen displays.
 - (4) New Menu Option: Delete VGEN/PGEN Report Definition
 - (5) New Items:
 - Complete Mailing Address Private Insurance Plan Name
 - Medicaid Plan Name Private Insurance Verified
 - Exclude Inactive Patients Health Record Terminal Digit
 - EDC Date EDC Determined
 - Contraceptive Method How EDC Determined
 - Last Menstrual Period Problem List
 - County Employer of Patient
 - Service Unit of Patient
- (3) OS Operations Summary
- Added the ability to select from a taxonomy of facilities.
- (4) INJ Injury Report

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- Added a Screen by Age Selection choice.
- (5) VIS Listing of Potentially Billable Visits by Date
Added a Screen by Clinic Selection choice.
- (6) BMI Body Mass Index Reports
(1) Added a Screen by Classification/Beneficiary Selection choice to all 6 report options.
(2) Added capability of selecting a Search Template of Patients to all 6 report options.
- (7) NVST Patients Seen AT LEAST N Visits
This Report has now been enhanced to allow additional screening capability by the same VGEN Browser Screen of Selection items, such as: Diagnosis, Procedure, Clinic, Provider, etc.
- (8) CHWL Clinic Hourly Workload Report-
This report now allows additional screening capability by Age of Patient and by a particular Provider.
- (9) TEN Frequency of Diagnosis Report
Has been modified to include a new Screen Browser capability for inclusion of the increased numbers of VGEN selection items.
- (10) FPRC Frequency of Procedures Report
Has been modified to include a new Screen Browser capability for inclusion of the increased numbers of VGEN selection items.
- (11) IICD Hospital Discharge Listing by DX or Procedure
This report now allows screening by Multiple Providers
- (12) ACC Active Patient Count By Community of Residence
This report has been modified to allow the selection of Multiple Service Units and Multiple Locations.
- (13) ACT Active Patient Count by Tribe
This report has been modified to allow the selection of Multiple Service Units and Multiple Locations.
- (14) ACS Active Patient Count by Service Unit of Residence
This report has been modified to allow the selection of Multiple Service Units and Multiple Locations.
- (15) DM Diabetes Audit Program
(1) Modified the Diabetes Audit to conform to the 1996 IHS Diabetes Standards.
(2) A new enhancement now allows the generation of a flat file readable by Epi Info, the Software Program utilized by the IHS Diabetes Program for annual diabetes chart audits. The file produced will have the extension ".REC" and will be consistent in format with the diabetes audit for the current fiscal year.
- (16) Post Init fixes the following non-ICD9 Code Taxonomies: DM Audit Tobacco Hlth Factors, DM Audit Diabetes Education Topics, DM Audit Dental Exam ADA Codes.
- (17) Eliminated the Ending Date Default & Date Examples on ALL Date prompts throughout the package.
- (18) The existing menu structure has been modified to accommodate numbers of new reports and/or reorganize existing report options, as follows:
(1) Two new menu options (located on Main Menu):
IMM Immunization Reports
AIN Adult Immunization Needs
KNIR Kids not on Immunization Register
CNTS DX & Procedure Count Summary Reports
DXAG Diagnoses by AGE report
DXFA DX Tally by Local, Secondary, Tertiary Facility
FPRC Frequency of Procedure Report
PAPC Purpose of Visits grouped by APC codes
TEN Frequency of Diagnoses Report

- (2) One new menu (located on QA Menu):
 - VST Display Single Visit for a Patient
 - DISP Display Data for a Specific Patient Visit
 - LCV Display Data for Patient's Last Visit to a Clinic
 - LVST Display Data for a Patient's Last Visit
- (19) The following new reports are now included:
 - (1) **WAIT** - Wait Times By Clinic and Provider. This new report will display the minimum, maximum, and mean waiting times by provider and clinic. In order to extract data for the report, you must be entering the time the Primary Provider saw the patient.
 - (2) **INJS** - Injury Surveillance Summary Report. This new report is similar to the INJ (Listing of Visits with Injury Diagnosis) report in terms of screening capability. This report, however, summarizes visit counts by the following 18 E-Code Category Ranges: Motor Vehicle, Water Transport, Air Transport, Accidental Poisoning, Accidental Falls, Fires/Flames, Environmental Factors, Stings/Venoms, Animal Related, Drowning/Submerge, Cut Piercing Object, Firearms, Sports Injury, Suicide Attempt, Assaults, Battered Child, Undetermined, and Other Causes.
 - (3) **DMG** - Detailed Patient Register R-DMG-510. This option will search the Patient file for all patients selected. The report output resembles the R-DMG-510 report produced from the Data Center.
 - (4) **DAR** - Data Analysis Report. This report will tally all visits processed in PCC and break them down by Type, Service Category, and Complete/Incomplete. It will also determine which of the visits would be excluded from the APC System.
 - (5) **AA** - PCC Visits (by Provider Disc) PCC Report AA. This report will print Year-to-Date PCC Visit counts for the Facility and Fiscal Year selected. The counts by month are for date of service. The report resembles the AA report produced at the Data Center, but includes ALL visits, not just those defined as APC visits.
 - (6) **ADER** - Admissions from ER. This report produces a list of Admissions from the ER. The report searches for ER visits in the date range entered by the user. If there is also an admission on that day, the visits are printed.
 - (7) **OCV** - Display Data for Patient's Last Visit to a Clinic. This report is similar to Display Last Visit for a Patient; however, the user is asked to enter a specific clinic and the last visit to that clinic is displayed.
 - (8) **AIN** - Adult Immunization Needs. This report displays the most recent TD, Pneumococcal, & Influenza Vaccinations for adults considered "high Risk." Utilizing Q-Man, development of a cohort (template) of patients is required prior to running this report.
 - (9) **KNIR** - Kids Not on Immunization Register. This report will list all children, in an age range, who are not on the Immunization Register.
 - (10) **CH** - Community Health Profile Summary. This new report will present a profile of health care for patients who reside in a community or communities the user selects. This report is very extensive and similar to the Operations Summary for a Service Unit; however, the report is community-based data reporting on the following: (1) Patient Registration, (2) Top 15 POVs for Direct, Contract, & Outpatient Visits, (3) Top 15 Inpatient Diagnoses, (4) Leading Surgical Procedures, (5) Top 10 Cause of Injuries, and (6) Top Dental Services.
 - (11) **DXFA** - DX Tally by Local, Secondary, Tertiary Facility. This report will present a tally of all diagnoses for patients in a community or communities selected by the user. The report will tally the diagnoses for the community's

- local, secondary, and tertiary facilities and will include both outpatient and inpatient diagnoses.
- (12) **CYV** - Calendar Year First and Revisit Summary. This report will print Year-to-Date visit counts for the Facility, Clinic, and Calendar Year selected. Visit counts are summarized according to Indian/Alaska Native and all other beneficiaries. Each classification is subtotaled by: (1) New Patient's 1st visit, (2) Established Patient's 1st visit, and (3) All additional Patients' Visits. The report option also allows screening by multiple clinics.
 - (13) **AVBCS** - Average Number of Visits by Day/Clinic ALL Service. This report will generate average daily outpatient visit counts by clinic for a specified date range. All service categories and all clinics are included in the visit count. The report is similar to the Average Number of Visits by Day of Week and Clinic (AVCL), with the exception of the inclusion of ALL service categories/clinics.
 - (14) **CZIP** - Clinic Visit Counts by Clinic Type by Zip Code. This report will generate a count of visits by Clinic Type for a date range specified. The report will be subtotaled by Location of Encounter and by Zip Code.
 - (15) **PVCT** - Provider or Clinic Visit Counts from a Template of Patients. This report will tally the number of times a certain predefined set of patients (within a search template) were seen by various providers or went to various clinics. The user selects either Provider or Clinic Counts.
 - (16) **HDT** - Hospital Discharge by Taxonomy (Template Create). This report will create a search template of patients with a predefined discharge date and will exclude patients discharged before 10 days old and whose primary diagnosis is NOT within a user-selected taxonomy.
 - (17) **NOEX** - List APC-1A Visits Not Exported. This report will process the same way as the 1A Report; however, instead of producing a list of visits exported to the Albuquerque Data Center, it lists all visits that did NOT export. The report, therefore, includes only those visits that are not in the 1A Report. Your facility should run this report on a quarterly basis to verify which visits are not exporting properly.
 - (18) **LVC** - Display Data for a Patient's Last Visit to a Clinic. This option is identical to the DSP - Display Data for a Specific Patient Visit; however, the user is asked for a particular clinic. The report then displays the LAST visit to that clinic.
 - (19) **RADM** - Readmissions within 30 Days of Discharge. This new report will display patients who have had an admission within 30 days of a discharge. The user can screen admissions to any facility or to only one facility. The report will display the Patient Name and Health Record Number, the Admission Date, Location, Provider, Diagnosis, and Provider Narrative.

Installation Instructions

INSTALLATION NOTES FOR : PCC MANAGEMENT REPORTS -

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PREFIX: APCL -- VERSION 3.0

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***** NOTE ***** NOTE ***** NOTE *****NOTE *****

* READ THE ENTIRE NOTES FILE PRIOR TO ATTEMPTING ANY INSTALLATION!!! *

***** NOTE ***** NOTE ***** NOTE ***** NOTE *****

Contents of Distribution

apcl0300.r - contains all routines
apcl0300.g - contains ^APCLBMI, ^APCLVSTS, ^APCLSRT, ^APCLOSC
apcl030i.pdf - Installation Guide
apcl030u.pdf - PCC Management Reports User Manual
apcl030o.pdf - Diabetes Audit User Manual
apcl030t.pdf - Technical Manual

Requirements

- FileMan 21 or higher
- Kernel 7.1 or higher
- AUPN (Patch #4) or higher
- Taxonomy 5.1
- Q-Man (Patch #9)

Installation Instructions

NOTE: Please ensure the existence of the above requirements prior to proceeding with this installation.

1. Save all APCL* namespaced routines

Delete all APCL* namespaced routines

Restore Routines from file apcl0300.r

2. Save the following Globals - ^APCLBMI, ^APCLVSTS, ^APCLSRT, ^APCLOSC

****NOTE** FOR RISC SYSTEMS**

Before killing these 4 Globals, a Global Change is required. This will remove the Global Protection Status that will allow the Kill of the Globals below. Do the following Global Change:

```
D ^%GCH
Select Global:  ^APCLBMI
^APCLVSTS
^APCLSRT
^APCLOSC
Select Option #5 - Allow/Prevent KILL
Answer NO to - Prevent KILL of Entire Global
Kill ^APCLBMI, ^APCLVSTS, ^APCLSRT, ^APCLOSC
Restore Globals from file apcl0300.g
```

3. Run Init D ^APCLINIT
4. Please notify users of the package of these changes.

Contact Information

If you have any questions or comments regarding this package, please contact:

Toni Jarland at (520) 295-2527
JARLAND,TONI on IHS Mailman

or:

Tucson Software Support Help Desk
IHS/Information Systems Division
7900 S. J. Stock Road
Tucson, AZ 85748
Phone: (520) 295-2539 Fax: (520) 295-2564
(520) 295-2528
(520) 295-2527
(520) 295-2532