Indian Health Service Patient Registration The First Step To Quality Health Care

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Agenda

Learning objectives:

- 1. The importance of timely registration
- 2. Verifying patient data and the impact on health care
- 3. Validation & scanning of legal documents
- 4. Meeting Privacy and General Records requirements

M.V.P.

Patient Registration staff have become the Most Valuable Professionals in the entire health care process over the past decade.



First Step to Health Care

Patient Registration is important to the patient's overall health care process for:

- 1. Patient Identification
- 2. Communication between their health care provider
- 3. Statistical Data
- 4. Meeting healthcare initiatives (GPRA)
- 5. Revenue

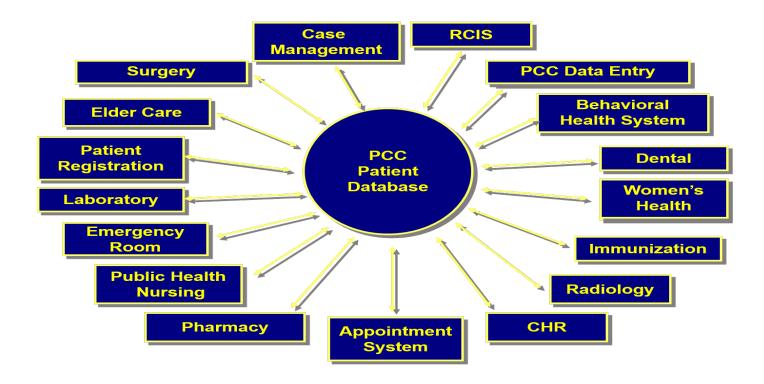
Quality Health Care Through Quality Information

 It is critical to have accurate and complete data for the health care team and health care organization.

Quality Health Care Through Quality Information

RPMS Patient Registration is the hub of all RPMS

packages



Timelines Is Critical

Real-time data entry is crucial to patient care services in the following settings:

- 1. All health care services (clinic, ER, hospitalization)
- 2. Health Center & Health Station services
- 3. Remote & virtual EHR user
- 4. Admission to the nursing unit



Timelines Is Critical

- 5. Bar Code Medication Administration (BCMA)
- 6. Ancillary services (lab and radiology)
- 7. Purchased Referred Care (referrals & eligibility)



Correctly Identifying the Patient

- •It is very important to correctly identify the patient for health care services.
- •Regulatory requirements indicate two or more identifiers to properly identify a patient.
- •Delay with updating information may impact the health care process, such as: cancellation of surgery, delay of administering medication and even drawing blood.

Correctly Identifying the Patient

- Patient record must match patient I.D.
- •If different spelling or date of birth difference, add name to AKA or other date of birth to Page 8, until patient can verify.

SCAN ALL is your BFF!

It is imperative to use "SCAN" every single time you establish and search for a patient record to avoid duplication.

PATIENT REGISTRATION SCAN the patient files

ALL SCAN for similar names - entire data base

SCA SCAN reg. pats (incl. inactive & deceased)

DOB List patients in DATE-OF-BIRTH order

SCAN ALL is your BFF!

- Search by all names the patient may use, date of birth, and social security number.
- Be aware of same sounding names. Example: Atcitty,
 Edsitty, Etsitty or Benally, Bennalley, Benalli
- Maiden names, other names used (A.K.A.)
- Contact the HOME SU Facility to manually check MPI, as many patients may not be in the RPMS Registration system or under a different last name.

Duplicate Registration

Using SCAN ALL, will avoid the possibility of creating a duplicate registration on the same patient at another Service Unit location.

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PATIENT REGISTRATION
SCAN for similar names - entire data base

Select PATIENT NAME: 123456
1 123456 DEMO,JOHN Q 12-25-2001
KAYENTA-AZ MOTHER'S (MDN): SAMPLE,JANE
123456 NORTHERN NAVAJO MEDICAL CTR

2 123456 DEMO,JOHN Q 123456789 12-25-2001
KAYENTA-AZ MOTHER'S (MDN): SAMPLE,JANE M
123456 FOUR CORNERS REGIONAL HLTH CTR
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Very important to call the Home facility to avoid errors.

Impact on Patient Care and PHR

- •Duplicate registration impacts services that the patient may be referred to from another Service Unit facility site.
- •Patient health information is not consolidated for health care team.
- •Health information under the Personal Health Record (PHR) web portal is not accurate.
- •Situation creates a possible patient safety issue.

- Mailing addresses need current address for medical correspondences and appointments
 - Use USPS.com to validate address/zip code
 - Avoid return mail. Is this documented on page 8?
- Telephone number Fastest way to contact patient:
 Cellular and land-line
- Note: IHS cannot use text messaging.

- •Telephone update Use 4 or 5 PII to validate patient identification via phone to update.
- •Alternate Registration Authority Does Clinic MSAs and PRC have authority and access to update via phone.
- Create an Area Registration Contact List for reference.

Eligibility

- Determining Eligibility is Patient Registration's responsibility.
- •Beneficiaries have 30 days to provide Certificate of Indian Blood.
- •Eligibility should be done before the person is in the exam room, as the health care team relies on Patient Registration to validate.

Eligibility

- •Non-Ben Only for emergency services then referred out. Non-Ben will be billed for services.
- •Non-Ben Employee/Commissioned Officer Only if facility is designated as an approved "remote facility" and services will be billed.

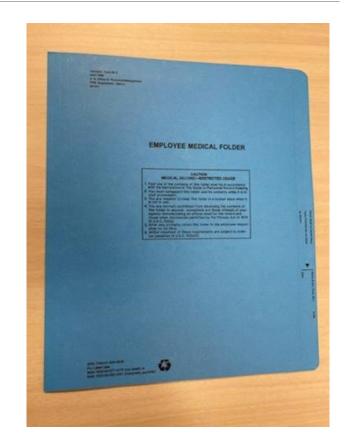
Eligibility

- •EMTALA Follow your State requirements.
- •Follow-up Services Do not schedule a follow-up appointment or referral for IHS services
 - for Non-Bens.
- •May consider using RPMS Patient Flag "Not Eligible For Care" to be placed on the record.



Employee Health

- New employees are not required to have a new HRN for Employee Health as it is a separate record system.
- SF-66D Employee Medical Folder is to be used.



Vital Records – Birth & Death Registration

- Updating RPMS Patient Registration with demographic information.
- Timely data entry of birth/death info into the State Vital Records eDAVE system.
- Ensuring accuracy of information name of child (spelled correctly) and correct patient is identified for death.

John Doe Chart

- •John Doe Chart is to be issued when a person cannot be identified at the time of care. John Doe Chart is temporary until the patient is identified.
- •This can be a Temporary or Permanent Chart number assignment, depending on your facility policy.

John Doe Registration

- •Every attempt should be made to appropriately identify a person.
- Enter the minimum mandatory fields to create the new chart.
- Document on page 8 unable to update.
- Call other surrounding Service Units facilities.
- •Registration is responsible for following up with the John Doe patient until identified.
- •HIM is responsibility for combining the health record.

Disaster Chart

- •Disaster Chart may be used during a horrific event that will bring many people to the facility or when a mass causality is called and any and all patients will be treated in various locations, on or off site.
- •Paper files numbered can be used for this type of emergency event. *Example: JD-00001*
- Coordinate with your local Emergency Management Team.

- •Emergency Contact is a person that knows the person's health status and can talk to medical professionals about medical history, allergies, chronic conditions and current medications.
- •Next-of-Kin Someone who is of close blood relation to the person who can be notified for death notification.
- •No authority for disclosure to, or authorization to disclose PHI is delegated.

- Caregiver Someone who regularly looks after a child, sick, elderly, or disabled person.
- •Add Caregiver(s) to the first 3 lines on Page 8 for providers to see on EHR side.

- What to do if patient refuses?
- Record refusal on Page 8 of RPMS Patient Registration.
 "Patient refuses to update demographic information"
 "refuses to provide mailing address or refuses to provide telephone number"
- •Explain to the patient the need for the information and the purpose it will serve them for their healthcare.

Master Patient Index

- •MPI is the heart of Patient Registration.
- •MPI should be maintained at each facility site.
- •MPIs should be cross-reference with other names used or gender used.
- •MPI are permanent records of the facility and should not be destroyed.



Master Patient Index

Record keeping (MPI) important for

- Research (Uranium Mine)
- Patient Care (historical family health info)
- Litigation
- •FOIA

Master Patient Index

MPI will be important as IHS transitions into another Electronic Medical Record system, as three (3) different systems will be forever maintained:

- a. Paper records (in FRC archives)
- b. RPMS/EHR
- c. New EMR

Reactivating a HRN in RPMS

- •For sites that are paperless, it is very important that Registration and HIM communicate when changing the status of the record.
- •HIM to update and maintain Master Control Log.
- •Chart Review or Audits To temporary reactivate for the duration of time, then deactivate.
- •Identifying record activity is important for inactivating records in the future.

Accuracy Is Important

- Wrong data impacts the following:
 - 1. Statistical Data wrong community, sex, address. Data is used for research, user population, and as the dominator for many RPMS reports, such as GPRA.
 - 2. Patient care services wrong mailing address Example: Farms, AZ ABQ, NM Gallup, AZ

Accuracy Is Important

- 3. Special characters are not acceptable, which results in an error. Example: Email address
- 4. Duplication of medical records within a Service Unit impacts access to health information for providers
- 5. Personal Health Record patient access to all health information not available due to duplication.

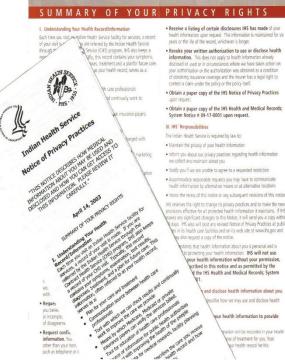
Why is this important?

- Accurate patient information and managing information is not just used for reimbursement.
- Think about it...Could timeliness and inaccurate data directly impact patient care?
 Bad outcomes: No revenue – Tort Claim –

Patient Death

Privacy Knowledge

- Notice of Patient Privacy Acknowledgement –
 Explain correctly to patients
- •Knowledge of HIPAA Forms for Restrictions and Corrections
- •Minors rights to privacy under the Privacy Act.



Privacy Enforcement

- Patient Interviews location, open areas, offer reasonable accommodations
- •Phone Interview Ask for 4 identifiers
- Patient clipboard and worksheets don't hoard and shred after usage.
- •Keeping copies of patient consents/records for audits or to attach to reports is a no-no.

Patient Privacy Concerns

- Privacy Act System of Records authorizes IHS to obtain personal information for their medical record.
- What if patient don't trust giving IHS personal information in fear that "someone" will get it:
 - All information is secure in RPMS.
 - Employees access based on need-to-know in the performance of their job.
 - RPMS Sensitive Patient Tracking monitors all access

Patient Privacy Concerns - Continue

- •HIPAA Restriction IHS-912-1 What if a patient asks to restrict their record/information?
 - IHS only approved to restriction for admission.
 - Restrictions may prevent patient care services.
 - Locking up record does not lock up lips.
- •Register privacy concern/complaint with Patient Advocate. Need who-what-when-where for investigation.
- •FYI Personal information is available in cyberspace.

Patient Privacy Concerns - Continue

- •Upholding privacy oath to confidentiality at all times in the performance of your job.
- •Know when to avoid any possible confrontation, when interviewing friends and relatives in the performance of your job.
- •Maintaining patient privacy and confidentiality is part of quality patient care.
- •If patient loses trust in IHS, this impacts their health care. Example: 2016 Privacy Breach at Shiprock NNMC

Legal – Time Sensitive

- •The information needs to be updated for patient care:
 - Name changes Need to be done asap.
 - Adoptions Process asap.
 - Court Orders Review to see if pertains to custody or health care decision making.
 - Gender change (SOGI) Process asap. Court order is needed to change name and sex.
- •Communication with HIM is important to process the change.

Legal – Time Sensitive

<u>NOTE</u>: Patient expects the update to be done ASAP before they show up to clinic for service.

- •Use Page 8 to Enter Court Order Number, Date issued, Type of document, Issued by Federal/State/Tribe.
- Adoption record process must be completed by HIM to ensure both paper and electronic records are legally handled.

Unit Record

•Documents should be only obtained once for the patient medical record within a Service Unit.

•The medical record is a UNIT record, so if a CIB was provided at a satellite clinic, the other facilities within the SU don't

have to request it for their facility record.

•Documents should be scanned into VistA for sites in the Service Unit to view.

Doe, Navajo Jane

00.00.01

Legal Documents For Scanning/Filing

- •These documents approved for filing into the permanent medical record:
- Advance Directives: Power Of Attorney & Living Will for health care decision making.
- Certificate of Indian Blood (CIB) for eligibility
 Guardianship Court Documents
- Copy of Death Certificate To officially close out active record.

- •<u>Living Will</u> = Spells out medical treatment an individual would and would not want to be used to keep them alive, as well as their preferences for other medical decisions, such as pain management or organ donation.
- •<u>Advance Directive</u> = States a person's wishes about receiving medical care if that person is no longer able to make medical decisions because of a serious illness or injury.

- Types of Advance Directives:
 - a. Durable Power of Attorney for Health Care/Medical Power of Attorney
 - b. Do Not Resuscitate (DNR)
 - c. POLST = Physician Orders for Life-Sustaining Treatment
 - d. Organ and Tissue Donation

- •<u>Power of Attorney</u> = The authority to act for another person in specific or all legal and financial matters.
- •<u>Durable Power of Attorney</u> = Person is in-capitated and unable to handle matters on own until death.
- •<u>Medical Power of Attorney</u> = Legal document that lets you give someone else legal authority to make decisions about their health care.

NOTE: Power of Attorney ends at time of death.

- •Temporary Custody = For minor children, which includes:
 - a. Partition for Guardianship
 - b. Trial of Guardianship
 - c. Permanent award of Guardianship
- •IHS manual states only parents and legal guardians is acceptable for minor children.

•<u>Executor of Estate</u> = An individual appointed to administer the last will and testament of a deceased person for financial matters.

Most Important

Timeliness and maintaining an accurate legal medical record is critical to patient care services.



Patient Registration

The most important first step to quality health care



QUESTIONS



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