Top Issues
(all remain the same since PM)

1. **Revenue Issues Overall** – Continuing to work on a variety of charging issues from various departments throughout the Network – Team is making progress!
2. **Acudose Dispensing & Pharmacy Charges** – We have a team dedicated to working on these issues.
3. **Miscellaneous Printing Issues** – group focused on working through all printing issues through multiple Epic applications, such as Beaker & ClinDoc
4. **Missing ED Charts Resolving in Revenue Loss** - approximately half of the missing charts have been found; the other charts are in HEC and are unsigned – teams continue to work on this issue.
5. **Lab Analyzer Issues** – the WAM analyzer fix was completed. We are still working through a few more issues with the lab analyzers.
6. **Physical Therapy** - scheduling and billing issues. This issue is being worked on.
7. **Transition of Care (TOC)** – not tasking SLPG staff which results in loss of revenue.
8. **Physician Billing for Pathology and Cardiology with SLPG**
9. **Professional Billing for Anesthesia Issues**
10. **Consult search** – The workflow for how to and add a recipient of a consult has been fixed. You can now just enter a few letters and search the TO: field in the consult window.

**IMPORTANT END-USER COMMUNICATION:**

- **Mismatched Bed Accommodation Codes and Updating** – please reference this tip sheet in your Learning Home Dashboard to learn more about accommodation codes.
- **SLPG accessing hospital census reports**: upon admission/discharge there will be a fax sent to the PCP office. This is how you get to the census report.
- **Dragon Training for Providers**: We will be starting up our Dragon training courses on 1/25 at St. Luke’s Center. You can register for class through myelearning.com Please work with your practice administrators.
- **Clinical EAD 2.0**: when you are leaving your workstation you MUST click on the red door. If you do not “red door out” of EAD it will cause issues when staff are transporting patients. (this is related to patient movement)
- **LAB PSC**: When sending Epic accessioned samples for LabCorp from a PSC, Please remember to send all specimens to your designated hospital campus using the campus temperature specific packing list. The hospital location will forward the tests to LabCorp via their designated account and the test orders will transmit electronically. PSC’s should not be placing accessioned specimens on a default packing list with a destination of LabCorp. Exception to this is Brown St Lab; they can send Epic accessioned samples directly to LabCorp using their assigned LabCorp packing list & account number.
- **Documents for Medical Records Scanning**: Please ensure all documents being sent for scanning have patient labels.
New Tip Sheets on LHD:
See in red the important new tip sheets!

- Adding Reports to the Summary
- Admitting a patient in APU: Unit Clerks
- Admitting a patient in APU: Unit Clerks
- Bar CFaxing for AP: AP users
- Bar Code Scanning Tip (updated to reflect changes)
- Canceling a Case: Surgical Staff
- Canceling a Case: Surgical Staff
- Charge One Time Supply and Implant (OpTime)
- Charge Poster One Time Supply and Implant
- Charge Poster One Time Supply and Implant (OpTime)
- Check in a Patient (CADENCE)
- Direct Admit (Orders)
- Discharge /Readmit & Direct Admit (Orders)
- Discharge readmits Workflow (ClinDoc)
- Documenting Override Full Medications in Epic: Nurses
- Entering Pre-Operative Orders from Paper (Willow)
- Faxing for AP: AP users
- Heparin (Willow)
- How to Look Up Supplies & Implants (OpTime)
- How to Look Up Supplies and Implants (OpTime)
- I/O Flow Sheet Documentation (Clin Doc)
- Infusions and Injections
  - Lab Misc. Charge WQ (Lab)
- Medicare Number for IME (Pre Encounter Center)
- Mismatched Bed Accommodation Code and Updating
  - Modify a Cases Length
  - Modify a Cases Length and barcode scanning tips
- Payment Refunds (ADT/Cadence)
  - PCA/PCEA and Medication Infusion Time Out
  - Physicians assigning themselves to patient care-team: ED doctors and APPs.
  - Printing Work Around ADT Labels
  - Printing Work Around for HP printer (label and wrist band issues)
  - Procedure Care Complete (OpTime)
  - Procedure Care Complete (OpTime)
- Reprinting Receipts (ADT/Cadence)
  - RN review of Home Medications (PTA): RNs
  - RN review of Home Medications (PTA): RNs
- Sign In and Sign Out (ED Tech)
  - Transferring a Patient
  - Trauma Airway Note Documentation (ASAP)
  - Trauma Evaluation Order Trauma (ASAP)
- Unit Charge Entry
  - Using your In Basket ED Providers (ASAP)

Updated Tip Sheets on LHD:

- Add-on Tests: Lab Techs
- Barcode Scanning Tips
- Barcoding for medication and patient identification: Barcode scanner users
- Bloodwork – New Collection (esp. AM Blood Draws)
- Care Everywhere
- Changing Patient Accommodation Code (Clin Doc)
- Cosign/Attest ED Provider
- Legacy Insurance Registration – RTE Payor (Awaiting build & final review)
- Monitoring Packing Lists (Beaker)
- MEWS
- Ordering Bloodwork
- Rover (tap the plus sign) PCA and Nurse Managers
- Treatment Team Assignment for Trauma Providers
- Updated bar code scanning tips

Upcoming Tip Sheets (stay tuned!):

- Accudose PRN due times
- Accudose PRN due times
- Advanced Dashboard: Customizing workspace
- Expired Orders
- Expired Orders
- I/O Flow Sheet Documentation
- In Basket ED Providers
- Lab Misc. Charge WQ (Lab)
- MEWS
- Patient movement Floor to OR
- Patient movement OR to Floor
- Physicians finding their discharged patients
- Reorder Button
- Reorder Button
- SmartList to pull Labs for Providers
- SmartList to pull Labs for Providers
- Timed out RTE Responses
- Timed out RTE Responses

To the right is a picture of a Epic Survival Kit that the CDCI Leadership Team put together for the Network IP & OP Coders. They were on each desk when the coders came to work on Monday, 1-11-16!

**Contained:** tissues (tears), protein bar (energy), candy (sugar), and glue stick (putting hair back on head). Also, a balloon attached to a bottle of water. If they needed a super user they'd put the balloon up, if not the water bottle was down on the desk. 😊