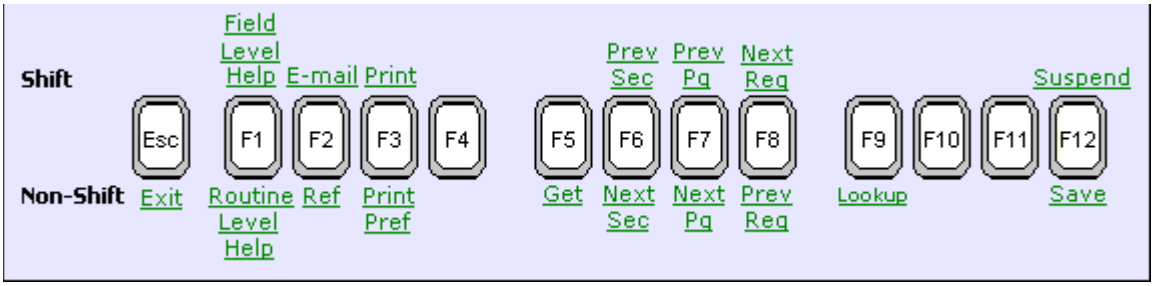
Meditech Coder Training Guide

Preamble:

Meditech's new software for Alberta Health Services is moving to version 5.67. This software is quite different in look and feel from all previous versions. There is more point and click functionality though in most cases the keystroke shortcuts do still work (example, F12 for "okay" or F9 as a lookup). The following graphic illustrates that some function keys, in combination with the <Shift> keys, can perform two functions.

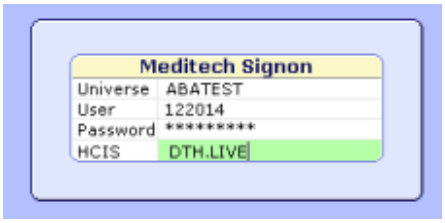


The "Email" function is not used in Alberta Health Services. We use Outlook, not Meditech, for email.

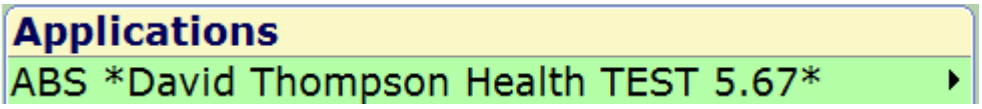
Using the software:

As in previous versions, double click on the desktop icon (applications), (Myapps), or Meditech Alberta. You should then see the Meditech Signon. There should be no change in how you access Meditech currently. Ie. Citrix (thru apps) vs 3Tier (on your desktop)

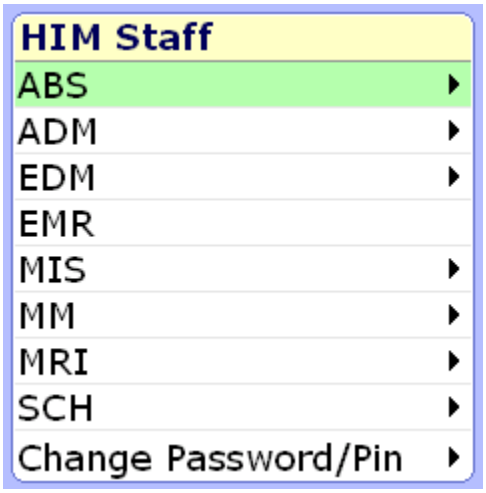
You will see immediately the new look of the software. The universe will be defaulted to the zone you work for and as usual we enter our username and password. The HCIS is also defaulted to whatever HCIS you work for ie. DTH.LIVE, ECH.LIVE - simply press the "enter" key to proceed once all sign on fields are completed. If you have access to more than one HCIS, using your F9 lookup key will allow you to select the HCIS you would like to work in.



At this point we are presented with our only choice, to sign into the Abstracting (ABS) module. We do this now by using the RIGHT ARROW key to expand the entry, or the ENTER key. We know that there are subdirectories or further options to be found under this entry, as there is an arrow pointing to the right.

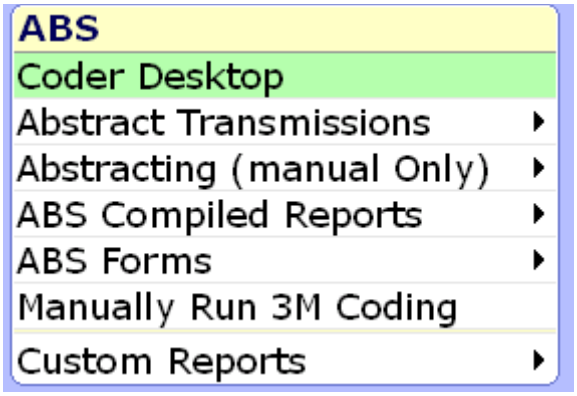


As we sign into the MIS module we see another subdirectory. All routines that originate within these applications will be found under there specific module.



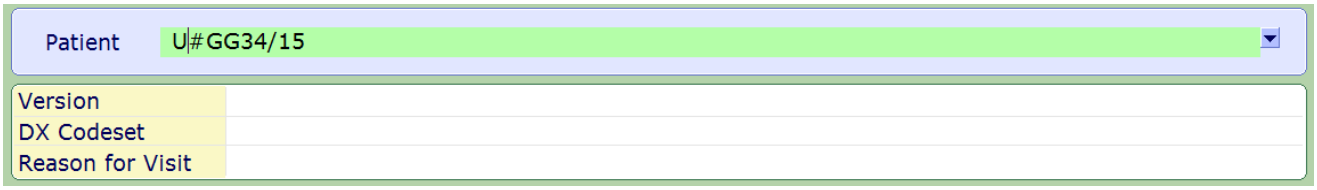
ABS = Abstracting
ADM = Admissions
EDM = Emergency Department Module
EMR = Electronic Medical Record
MIS = Medical Information System
MM = Material Management
MRI = Medical Record Index
SCH = Community Wide Scheduling
ITS = Imaging and Therapeutics

As we sign into the ABS module, we are presented with all the routines housed in ABS.

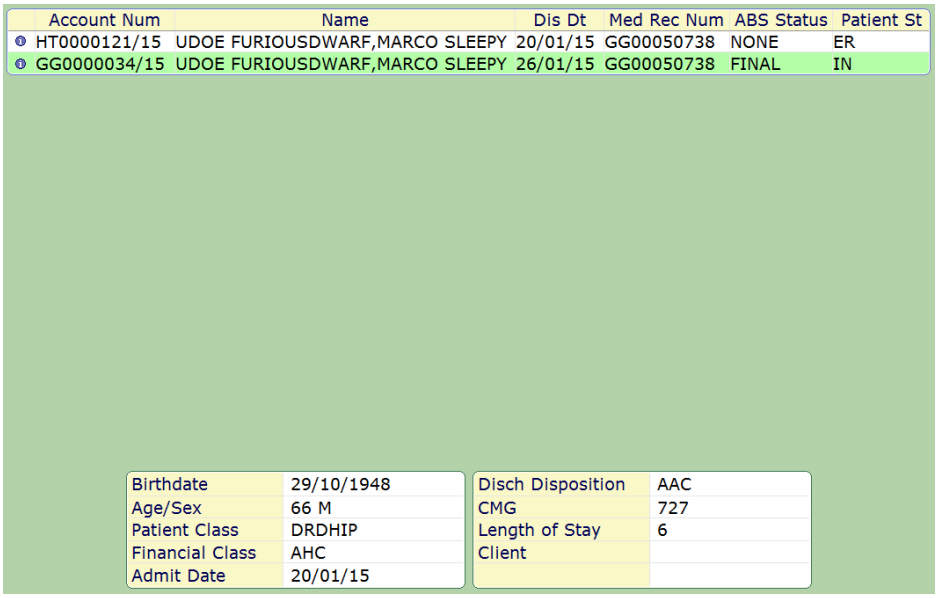


The first option, Coder Desktop, is where you will begin abstracting.

You will notice that rather than a new routine opening up in the same window, an entirely new window opens up. As seen in the image below, the top of the screen contains a line where there is a prompt to enter the patient. In ABS, this space is asking for an account number. As in previous versions of Meditech, at this point we can search by any number of methods. Patient account number, chart number (this search must be prefaced by a U#) , name, PHN (which must be prefaced by a #), etc.

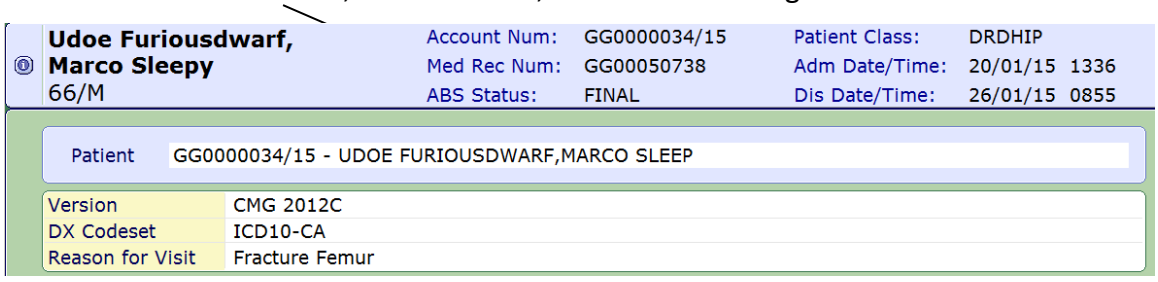


For this unit number (aka chart number), there are five visits as shown. The details of the highlighted visit (green) are shown at the of the screen. Simply click on the visit you wish to select (or press the up and down arrow keys followed by "enter").



It is recommended however, if you enter the account number – a direct hit will be received to the visit you want to abstract.

The high level information for the visit you've selected now displays along the top of the window. Account number, chart number, admit and discharge dates are shown.



Along the right hand side of the window you can see the various options that are available to perform from this screen once the patient is selected. If the button is not highlighted, we are either not able to access or we do not use. This may vary between zones.

Process ABS takes us to the Process Abstract routine in ABS.

Projects is where the Meditech entered projects can be viewed on finalized accounts simply by clicking on this button. Ie. OBSTETRICS, NACRS, etc.

Basic Option and Special Studies – are similar to projects depending on how they have been setup in your HCIS. These may be lit if you had previously had a study of some kind. The only zone currently is the North that uses the Basic Option.

ABS Inquiries will allow you to print reports to inquiry about edit transactions, late edits, ignored edits, abstract checks, etc…

Rec Sign Out – Signing out a record
Rec Return – Returning a record
The **Rec Inquiry** button is where we find information on the chart's location. This button can be accessed without the need to start a separate MRI session.

Demo Recall will display all the demographic information, as previously seen in MRI and can be accessed without starting a separate MRI session.

And finally, the **EMR** button is a link to EMR for the patient displayed.

For information on EMR, please refer to the EMR manual, all other functions are explained below

More screen shots regarding Non ABS routines can be found at the end of this manual.

Process ABS:

This is our new starting point for coding and abstracting in Meditech. We are using the ABS routines now as this is the home of coding. ABS is not facility specific so we are able to pull up any account from any site depending on access. If you are not able to access an account from another facility within the same HCIS – please contact your Meditech SuperUser.

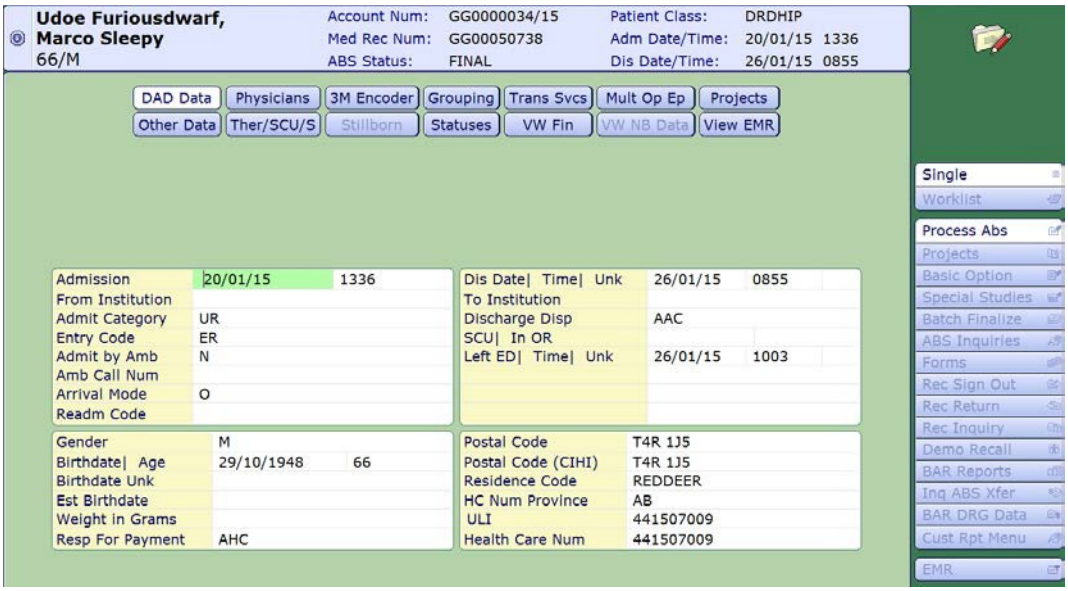
If your zone/site uses the "Manually Run 3M coding" – this will need to be started before proceeding to abstract. The encoder must be started within the same session in order for it to work. . If your zone has been setup to launch automatically, you will receive a message that the encoder does not need to be started manually.

Toggling the F8 key will activate quick keys. These quick keys can be used on your keyboard rather than using your mouse. An underline will be placed under the quick key. Ie. P for process ABS, B for basic option, I for inquiries, etc…..

This works in both the NACRS and DAD abstracts.

INPATIENT/DAD ABSTRACT:

In this screen you'll see that all the buttons in the right hand side bar are "greyed" out to indicate they are not available. What is displaying is the patient abstract as if we were using Meditech to abstract the patient. Along the top of the screen, the page tabs are available, you can see "DAD Data" is white, indicating this is the current tab (or page) of the abstract we're on. The DAD Data displays basic information for this patient.



The order of the screens and names of the buttons at the top will vary depending on the HCIS you are working in, but all the screens themselves are identical.

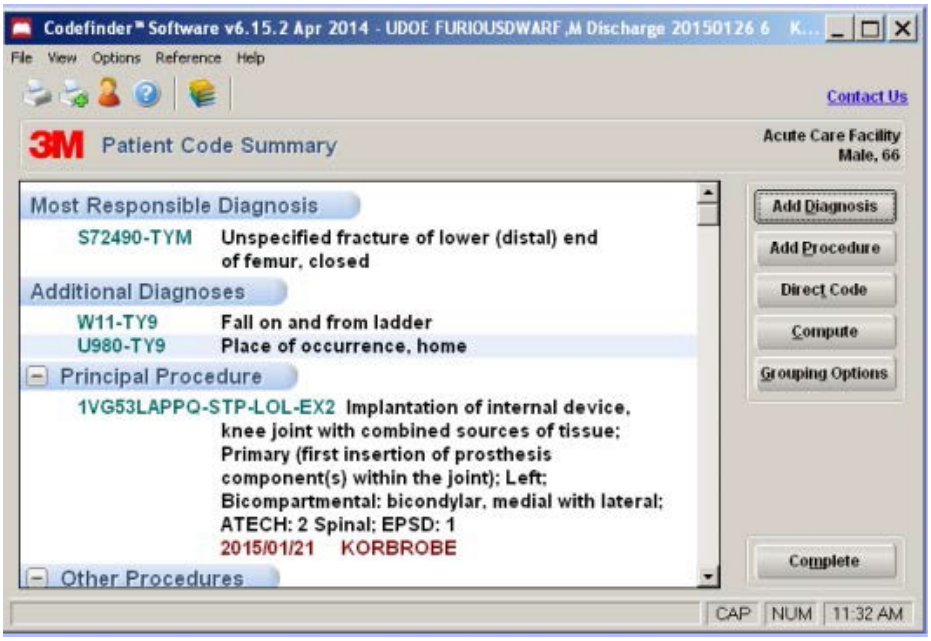
The button/screen Physicians Is where we will find the information related to the physicians that are entered in ADM for the patient. These will cross to ABS on the top portion of the below screen shot. The bottom portion where NUM 1,2,3 is where we would indicate all physicians responsible in the patients care for this visit.

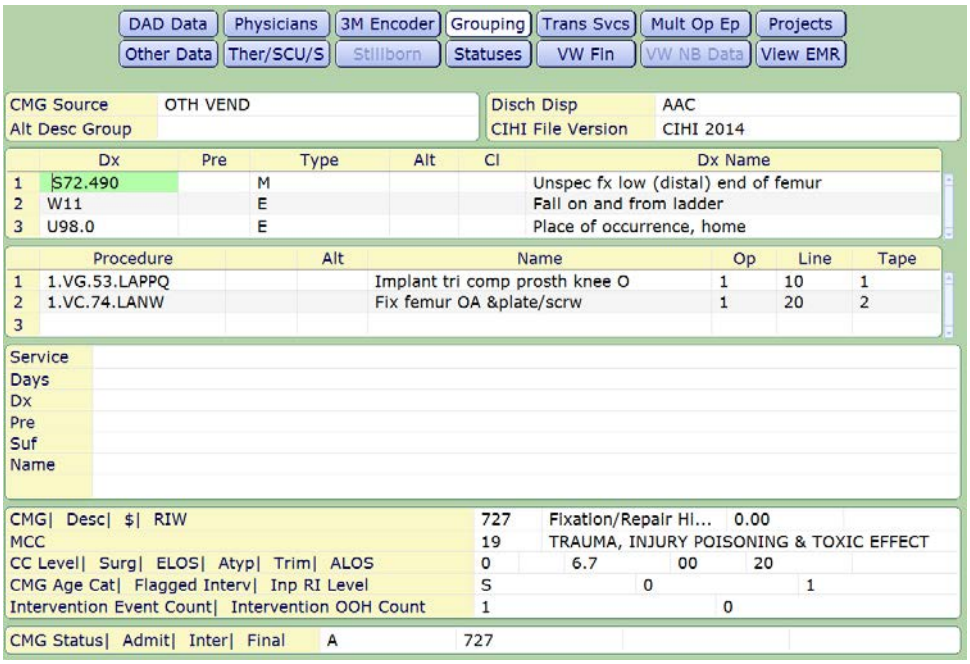
ER Physician	RAWLPETE	Rawlek,Peter
Primary Care Physician		
Admit Physician	RAWLPETE	Rawlek,Peter
Family Physician| Name| Unk	HYDEMAND	Hyde,Mandy Michelle

Physicians

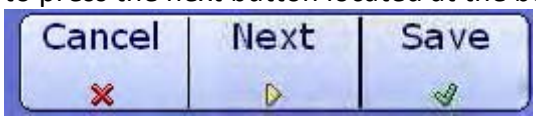
Num	Physician	Specialty	Type
1	KORBROBE	ORTSUR	MRP
2	RAWLPETE	ER	AP
3	MULDJEFF	FAM	CP

The **Encoder** and **Grouping Button/ Screen** will launch in the order in which they are displayed at the top of your screen. Once the codes come back we can simply press next as all the info in the grouping screen will have populated from the encoder.

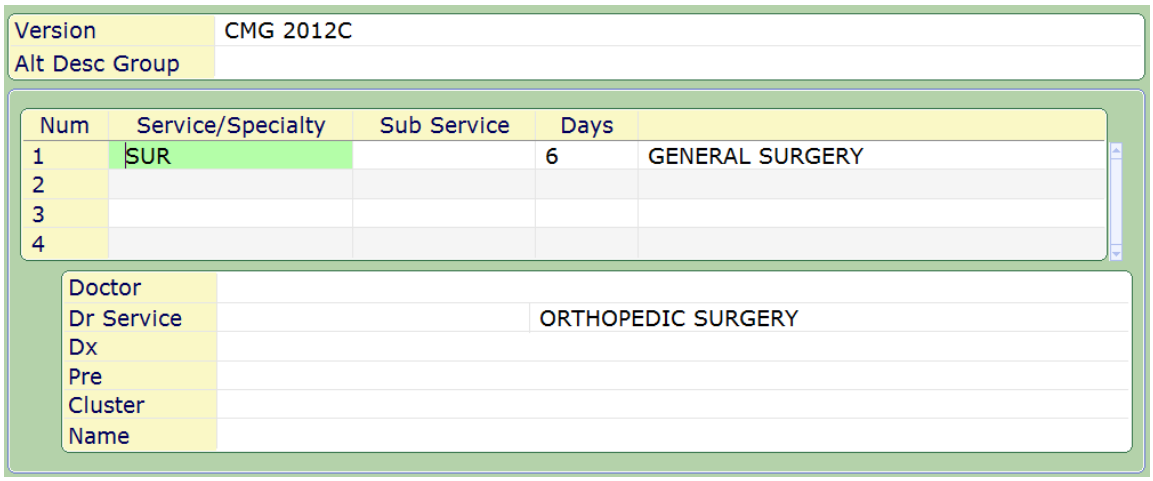




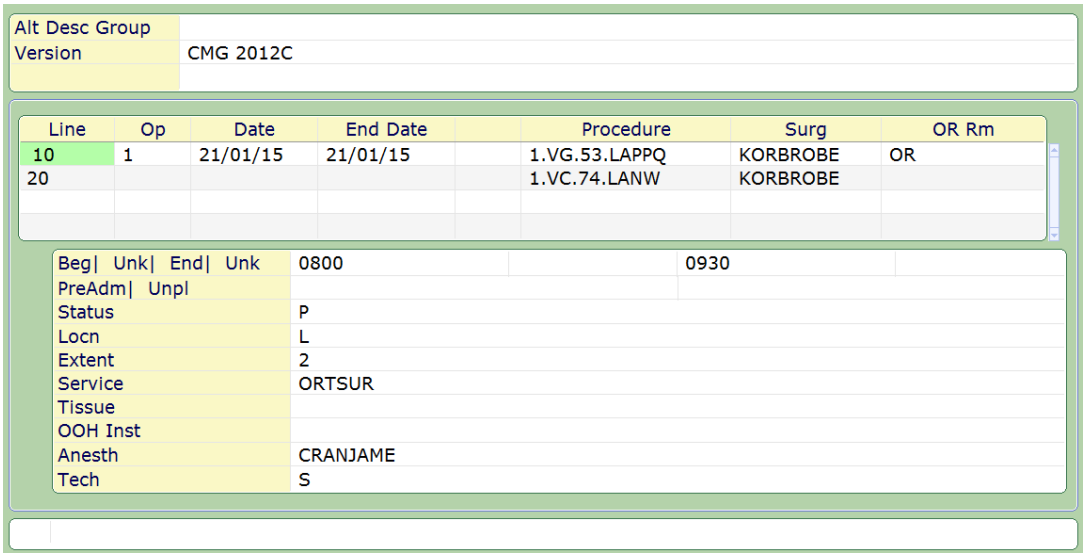
Should the screen/button at the top not immediately launch for you as you tab/enter thru the desired fields – it may cycle thru the same screen and then you will be required to press the next button located at the bottom of your screen.



The button/screen Trans Svcs is where we enter the service and subservices of the patient.



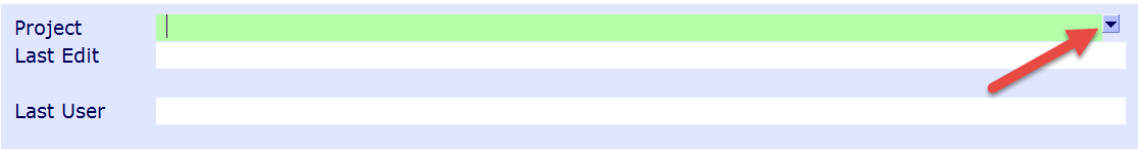
The button/screen Mult Op Ep is where the procedures will populate back from the encoder. Any extra fields not entered thru the encoder will need to be entered here. Similar to all other screens, in order to see the data specific to that line, the line needs to be highlighted. You can see in the screen shot below, the information related to 1.VG.53.LAPPQ is identified just below. Ie. Start and end time, Attributes, anesthetist, anesthetic technique.



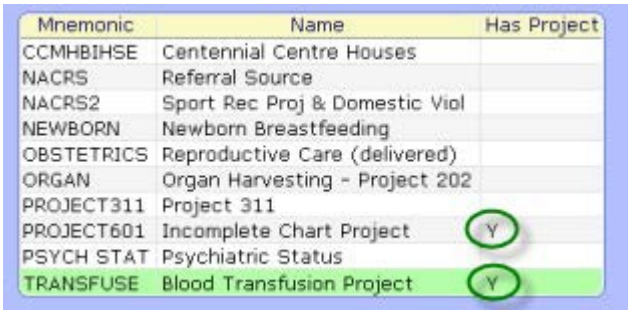
The Next button/screen

is where all projects related to Inpatient data is entered. Ie. Transfusion, PROJ311, Obs, etc……

Projects do not automatically display but rather we have to press F9 at the green highlighted line or press the down arrow button (as indicated by the red pointer).

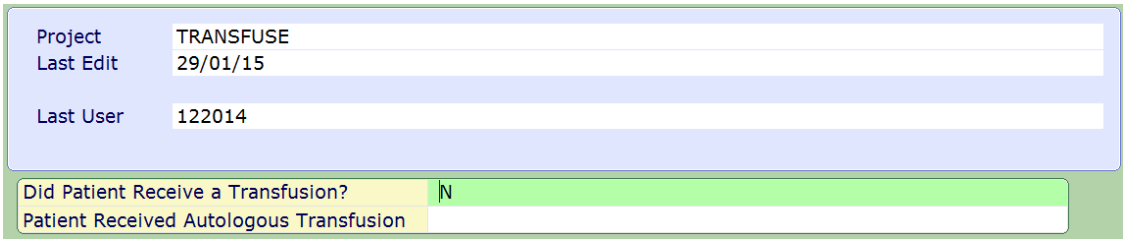


After performing a look up at the "Project" line, you will be presented with any projects available in Meditech. If there is already data entered Under a project, the "Y" will be present in the "Has Project" field. We then press enter or click on the green line to see the project data displayed.



Mnemonic	Name	Has Project
CCMHBIHSE	Centennial Centre Houses	
NACRS	Referral Source	
NACRS2	Sport Rec Proj & Domestic Viol	
NEWBORN	Newborn Breastfeeding	
OBSTETRICS	Reproductive Care (delivered)	
ORGAN	Organ Harvesting - Project 202	
PROJECT311	Project 311	
PROJECT601	Incomplete Chart Project	Y
PSYCH STAT	Psychiatric Status	
TRANSFUSE	Blood Transfusion Project	Y

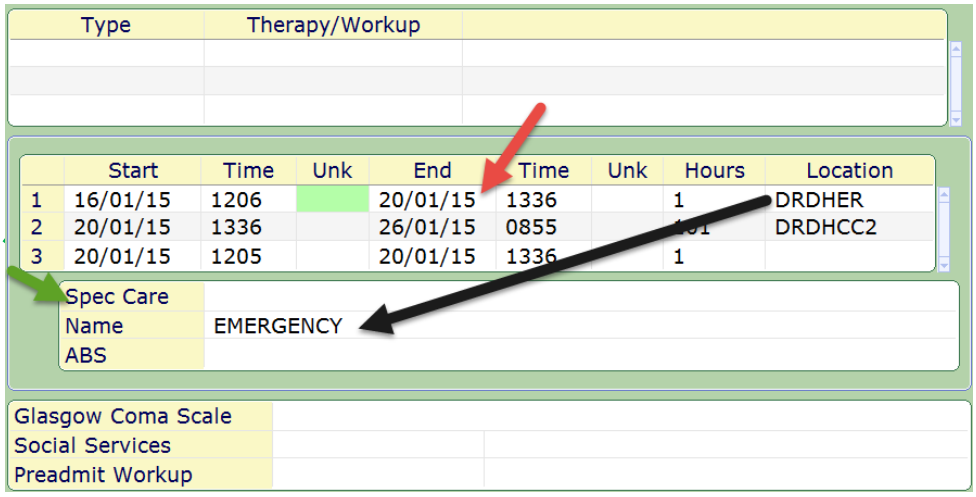
The project data for this abstract is presented below. Each instance is treated on a separate page, so if all the queries do not fit on one page to see the next set of queries we have to press the right arrow beside "Goto" in order to move to the next page. For this query, there is only one page, so the "Go to" does not display at the very bottom.



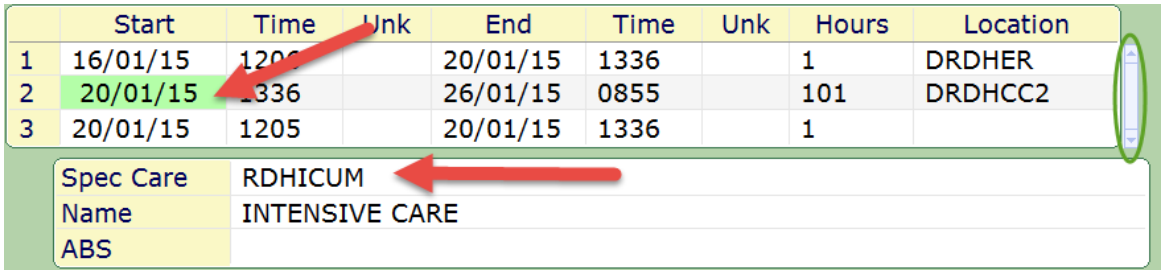
The button/screen Other Data identifies the following for CZ. This may differ slightly depending on your HCIS and which other data you may be capturing.

Medication Reconciliation Form Check Questions:	
Is this a newborn chart?	N
Is the medication reconciliation form missing?	N
If Yes to either of the above, disregard questions below.	
Were the home meds documented (RN, Physician or Pharmacist)?	Y
Did the physician sign the form?	Y

The button/screen Ther/SCU/S identifies the transfers between rooms in Meditech. When you first go into the routine, the first line is highlighted. You can tell that the first line's location (ending 20/01/15) is not a special care unit as the field "Spec Care" has no entry. The red arrow points to the first line, the green arrow is pointing to the information related to line #1 (with no SCU indicated). The **"Name"** field indicates the name of the Meditech location, aka nursing unit/ward.



Click anywhere on the second line in order to see the information pertaining to that transfer in the section below. Line 2 contains a transfer to an intensive care unit, as indicated by the Meditech location mnemonic (DRDHCC2) in the Spec Care field. Also please note that only 3 lines will be displayed. To see more, you need to scroll through the lines using the scrollbar to the right of the screen.

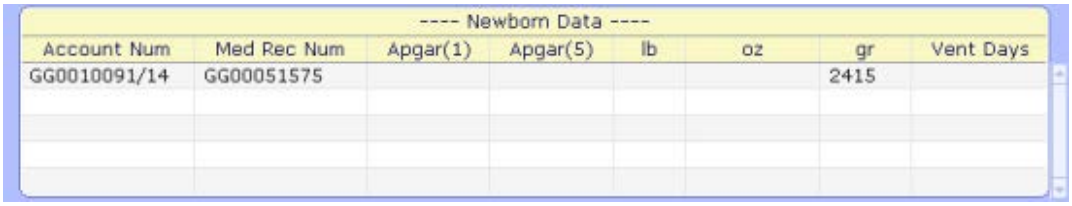


	Start	Time	Unk	End	Time	Unk	Hours	Location
1	16/01/15	120[illegible]		20/01/15	1336		1	DRDHER
2	20/01/15	1336		26/01/15	0855		101	DRDHCC2
3	20/01/15	1205		20/01/15	1336		1	

Spec Care	RDHICUM
Name	INTENSIVE CARE
ABS	

Under the

button, information is displayed pertaining to the mother/newborn data as seen in the image below. In the example we're using, an obstetric chart, we can see under the "VW NB Data" tab the baby's information.

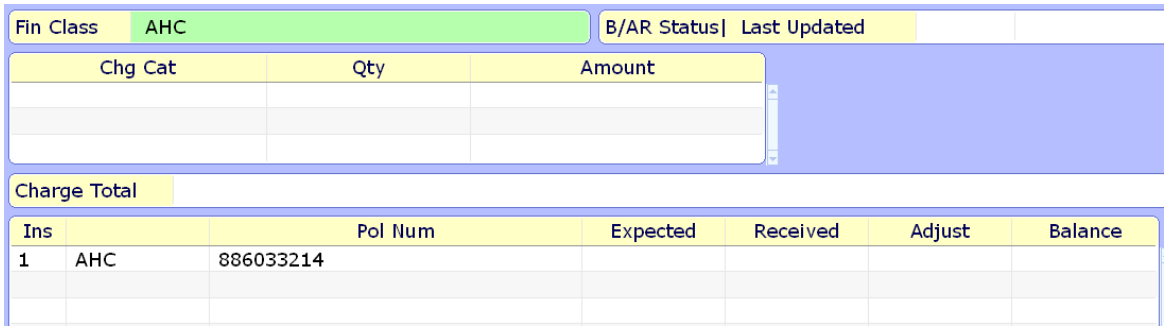


---- Newborn Data ----

Account Num	Med Rec Num	Apgar(1)	Apgar(5)	lb	oz	gr	Vent Days
GG0010091/14	GG00051575					2415	

The

button displays the insurance and payment information for the patient's stay. In this instance, the PHN is displayed for the patient as well as the insurer (AHC) and financial class (AHC).



Fin Class AHC | B/AR Status| Last Updated

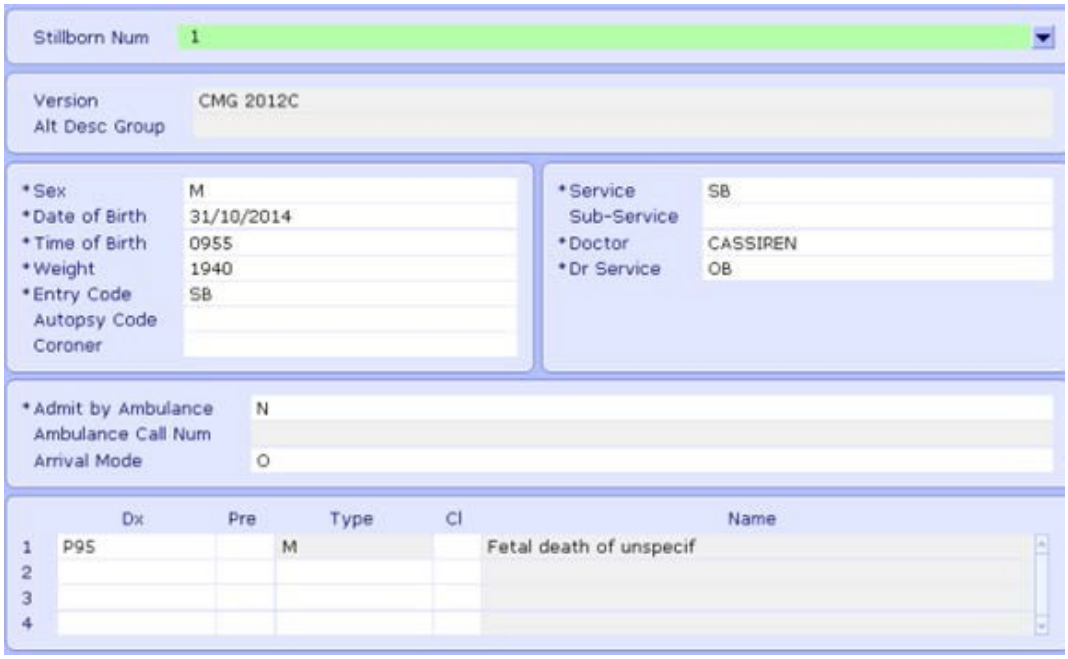
Chg Cat	Qty	Amount

Charge Total

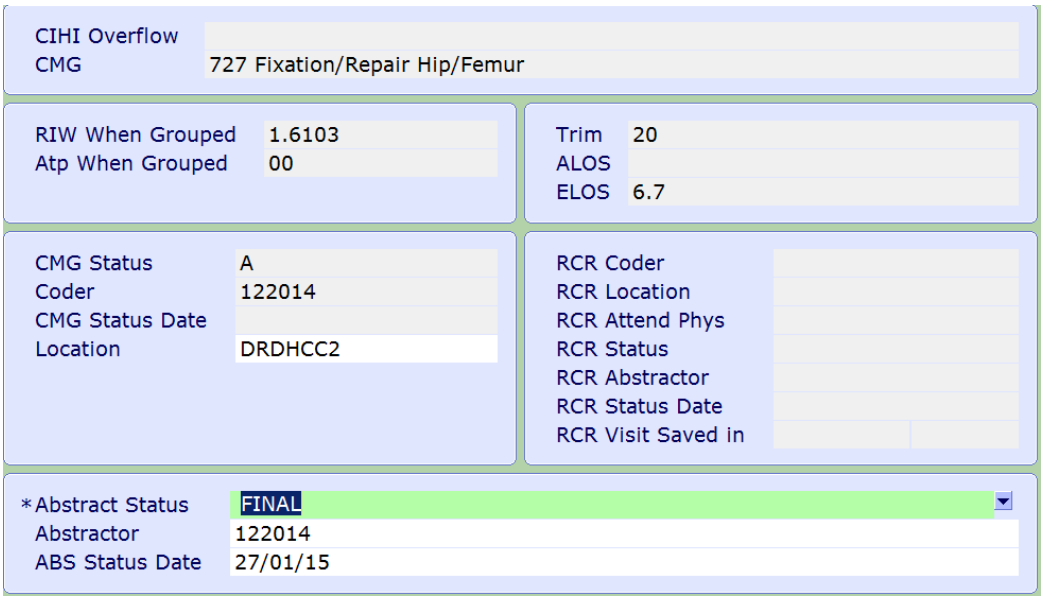
Ins		Pol Num	Expected	Received	Adjust	Balance
1	AHC	886033214				

We are no longer able to make edits to the financial screen directly in ABS. All edits, if required, will need to be done thru the ADM module.

The Stillborn tab is where stillborn data is entered if applicable.



The Statuses tab is where we finalize the abstract as per usual.



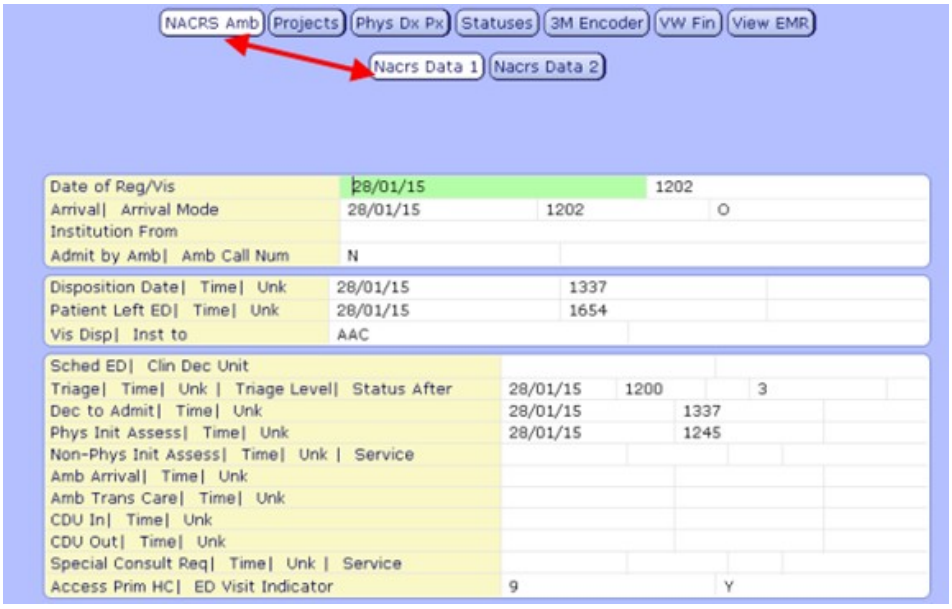
To back out of the Process ABS screen, simply press the cancel button at the bottom of the screen, or "X" out by clicking the "X" in the upper right hand corner to close the window. Next will take you to the next screen/tab if the flow is not automatic and Save – Saves the data as per usual as does F12.

Once the abstract has been finalized, a display of your abstract and summary of the data that has been entered will appear. At the bottom of the screen there is an icon–

Pressing this icon will allow you to enter the next account number/patient to abstract.

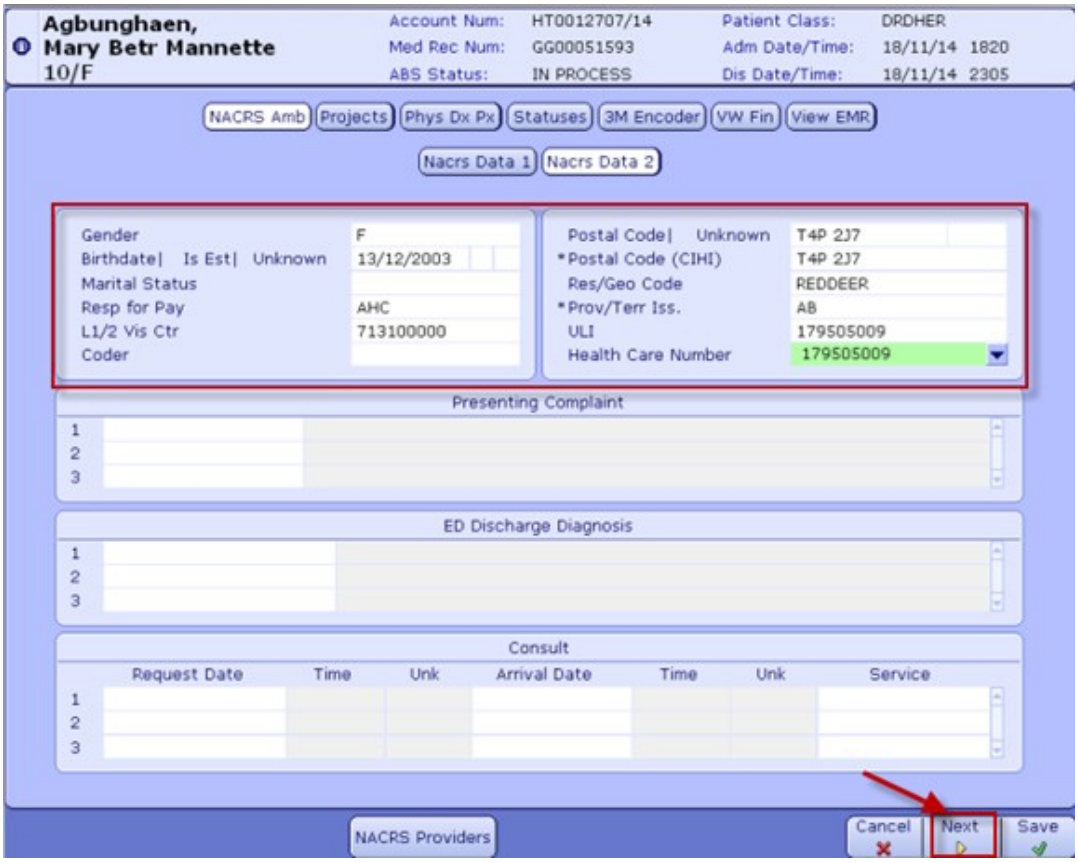
NACRS ABSTRACT:

The view for the NACRS abstract is identical to the Inpatient abstract with the exception of the various different screens. When you enter the account number, the following will display, which is the **NACRS AMB – Nacrs Data 1** screen, as highlighted in white:



When all fields have been abstracted, and you complete the last field (ED Visit Indicator), the next sceen automatically pops up/

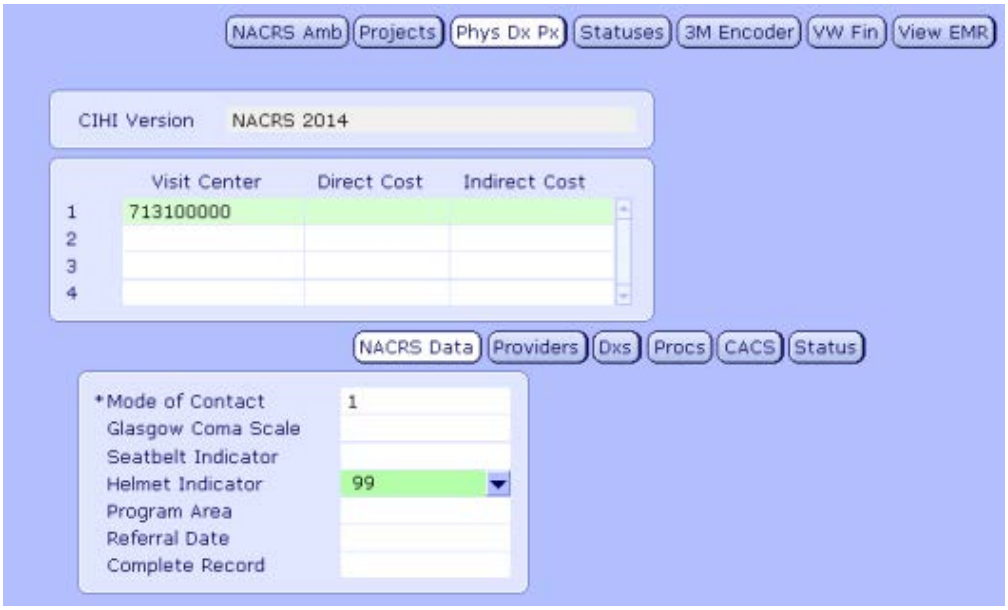
Nacrs Data 2 screen: Information is abstracted in the first two boxes only. This screen will require you to press the Next button to continue the screen flow, otherwise it will continue to loop thru this screen when you press enter/tab. Coder number is not required on this screen.



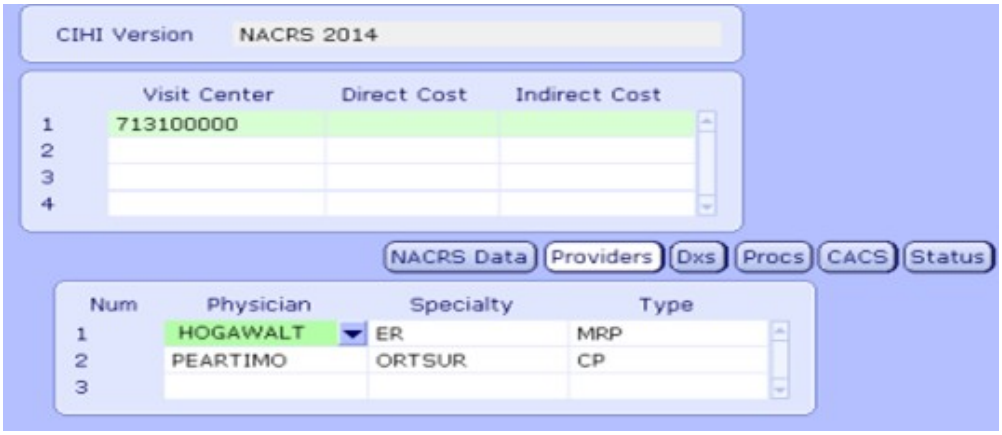
tab works identical to the DAD abstract.

tab/button is where the visit center will populate from the Nacrs Data 2 Screen similar to 5.5. This is also the screen where we enter the data specific to the visit including mode, dxs, procs, etc. The first box indicates that you are on the NACRS screen. The second box indicates there are 6 screens attached to the NACRS screen which include NACRS data, Providers, Dxs, Procs, CACS (not in use), Status.

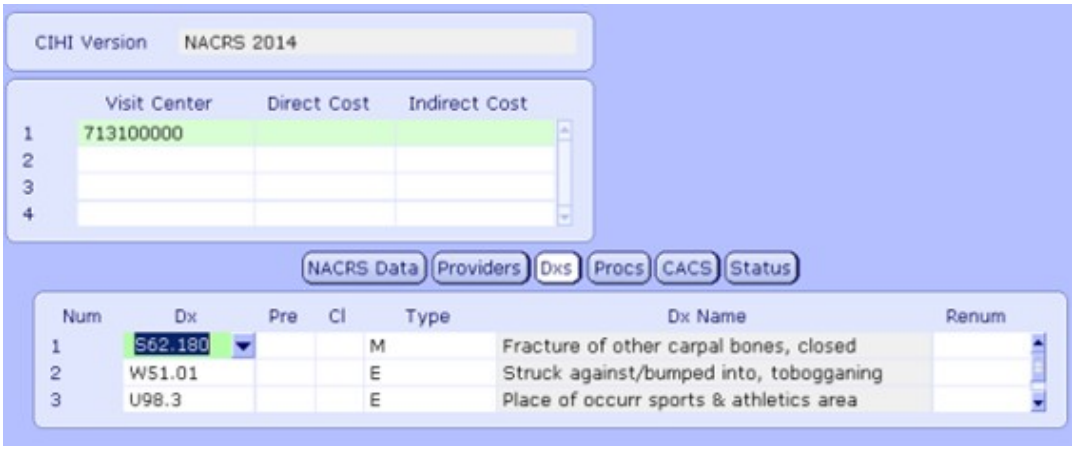
The screen shot below indicates NACRS Data which is hightlighted in white in the second box. The fields below is what is stored in the NACRS Data screen and where we enter mode, Glasgow, etc… As you enter these data fields and press enter/return – it will guide you thru all the subscreens including providers, Dxs, etc…..



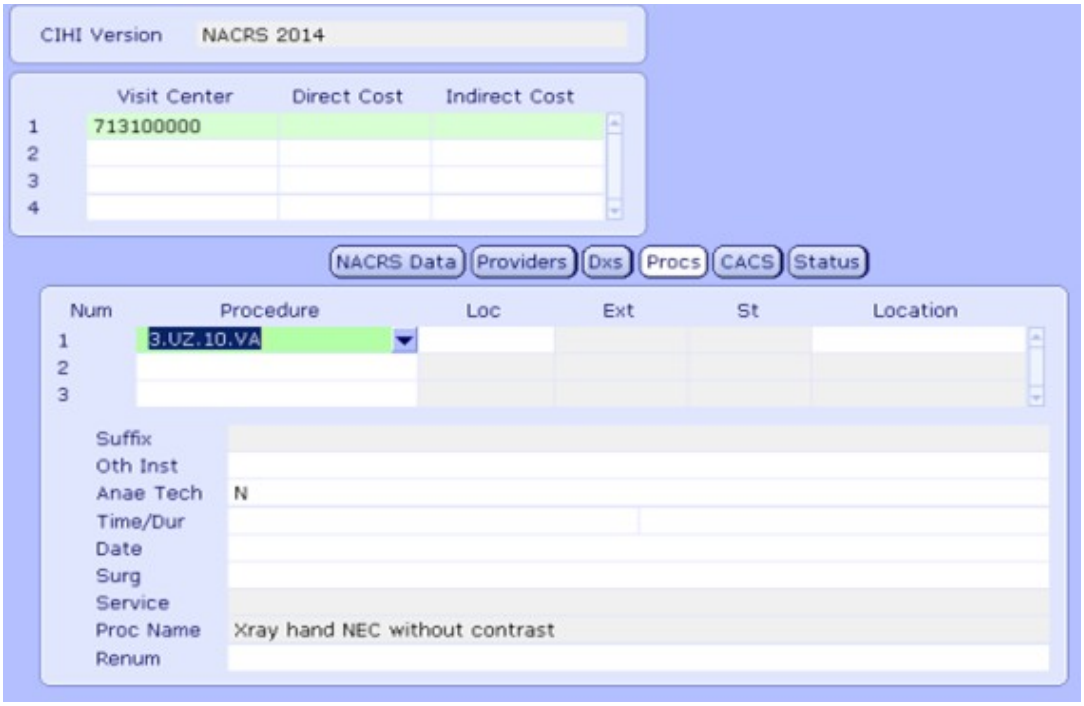
Providers:



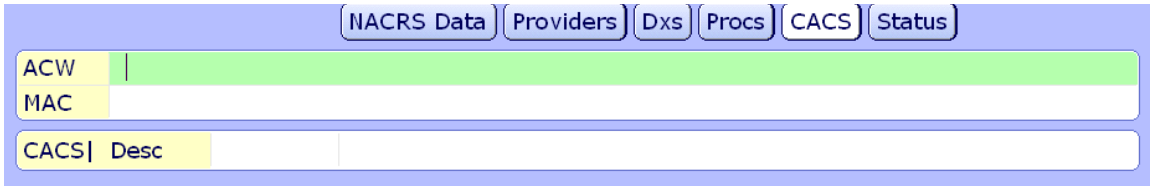
Dxs:


CIHI Version NACRS 2014
Visit Center Direct Cost Indirect Cost
1 713100000
2
3
4
NACRS Data Providers Dxs Procs CACS Status
Num Dx Pre CI Type Dx Name Renum
1 S62.180 M Fracture of other carpal bones, closed
2 W51.01 E Struck against/bumped into, tobogganing
3 U98.3 E Place of occurr sports & athletics area

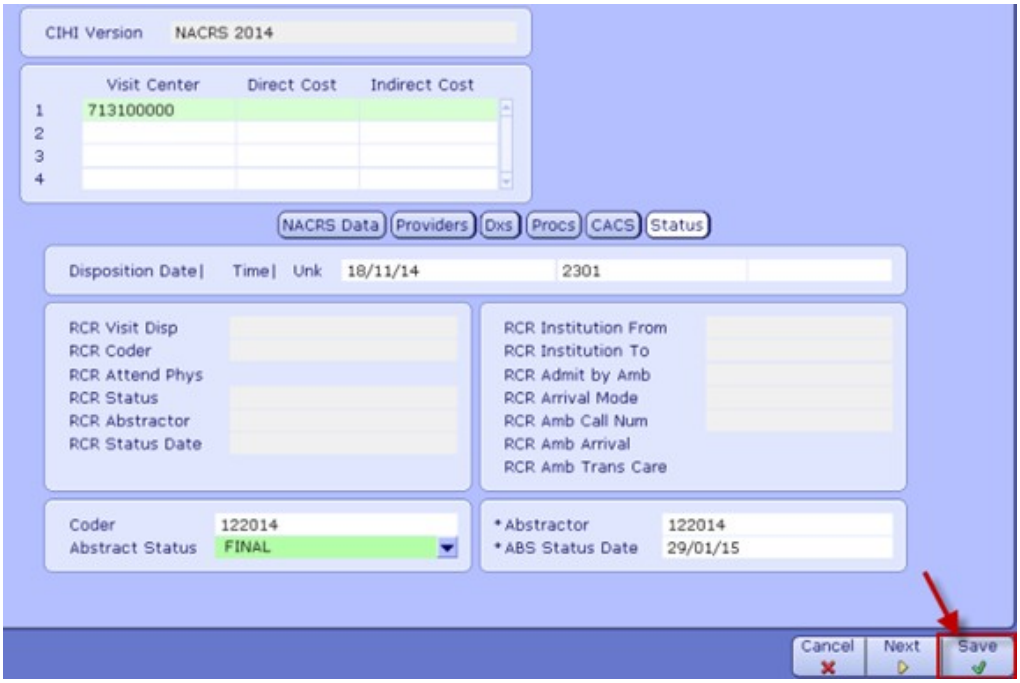
Procs:


CIHI Version NACRS 2014
Visit Center Direct Cost Indirect Cost
1 713100000
2
3
4
NACRS Data Providers Dxs Procs CACS Status
Num Procedure Loc Ext St Location
1 3.UZ.10.VA
2
3
Suffix
Oth Inst
Anae Tech N
Time/Dur
Date
Surg
Service
Proc Name Xray hand NEC without contrast
Renum

CACS: We **DO NOT** use this screen

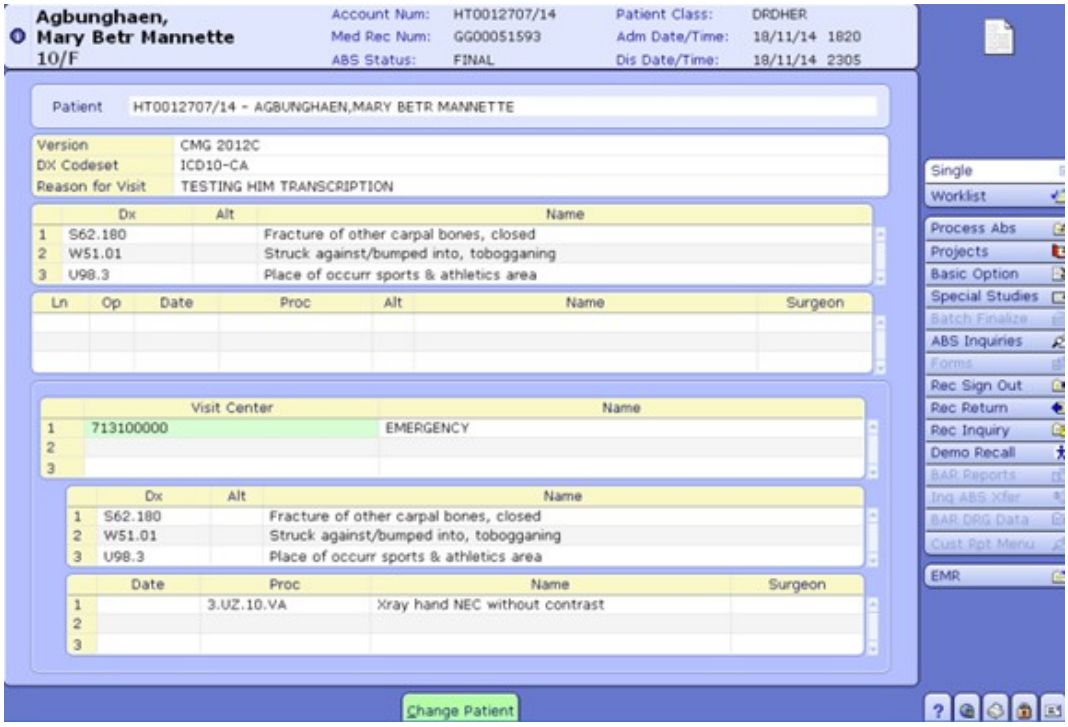


Status:



F12 OR **Save** will take you back you the Main ABS Routine

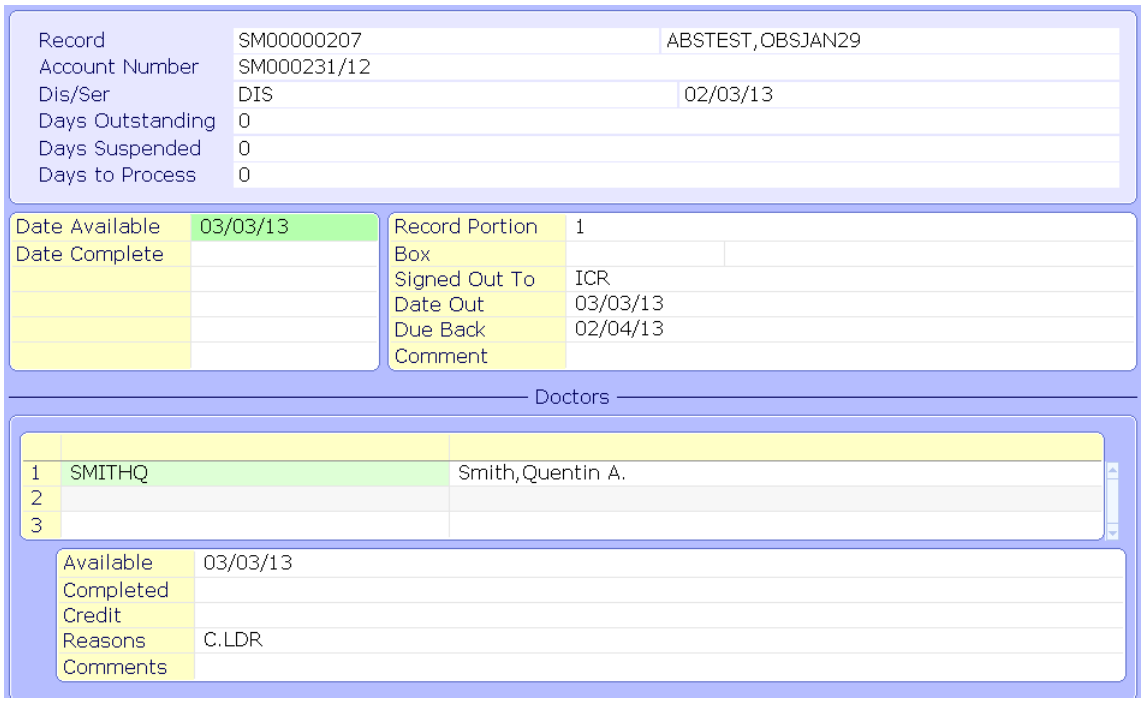
We are now back at the main **ABS Routine**, with the same patient and a summary of what was entered in the abstract.



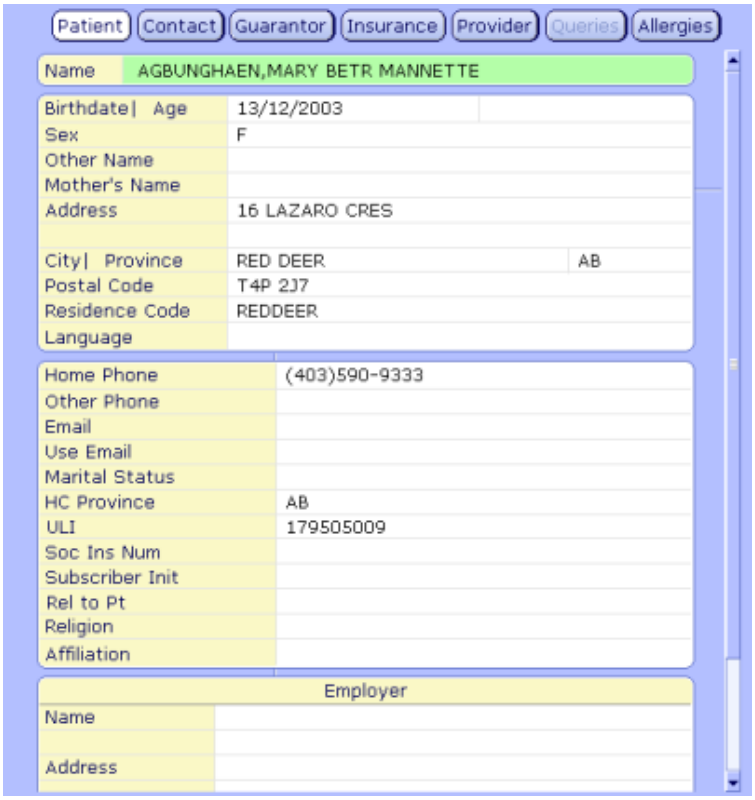
At this point, if we click on the "**Change Patient**" button on the bottom of the screen, you are able to enter the next account to abstract.

We are now able to launch any of the routines on the right hand side if desired.

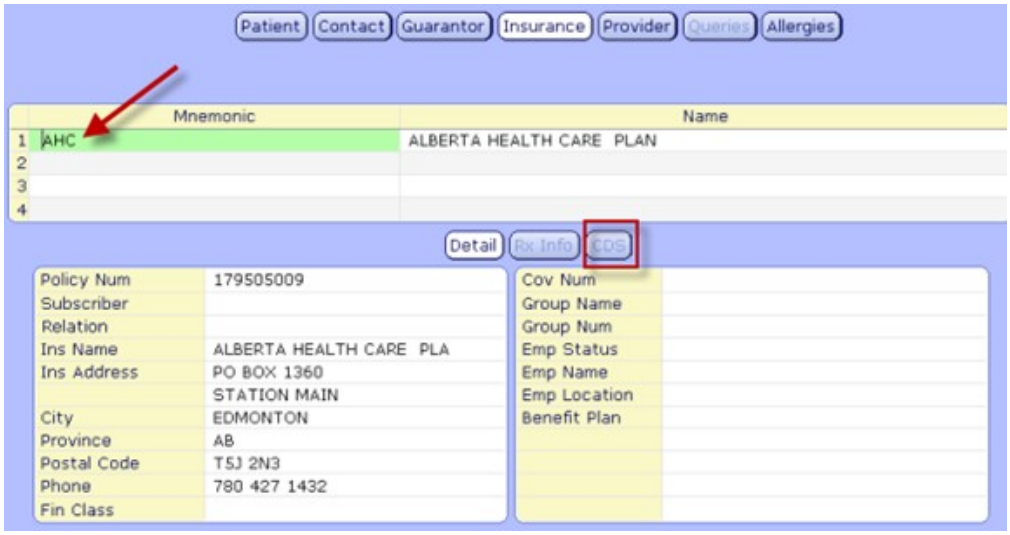
Record Inquiry launches a combination of the functions formerly known as "Chart Locator" and "Incomplete Records" from MRI. The information displayed shows where the chart is as well as any outstanding deficiencies and the related doctors, as in the example below.



The "**Demo Recall**" button brings up the MRI Demo Recall Routine. All the information in this area is related to the **patient**, not the visit. This means that it is displaying the **most recent information**, not necessarily the information during the time of visit we are coding. There are buttons/tabs running along the top of the screen. The first one displaying is the main "Patient" tab content.



The "**Insurance**" tab contains the patient's most recent insurance information. The information displayed is line by line. In the instance below, we are looking at only one occurrence of insurance as there is only content in line #1 (red arrow). If there were multiple insurances, there would be content in line #2, etc. The detail in the box at the bottom of the screen is dependent upon the line highlighted in green at the top of the screen.

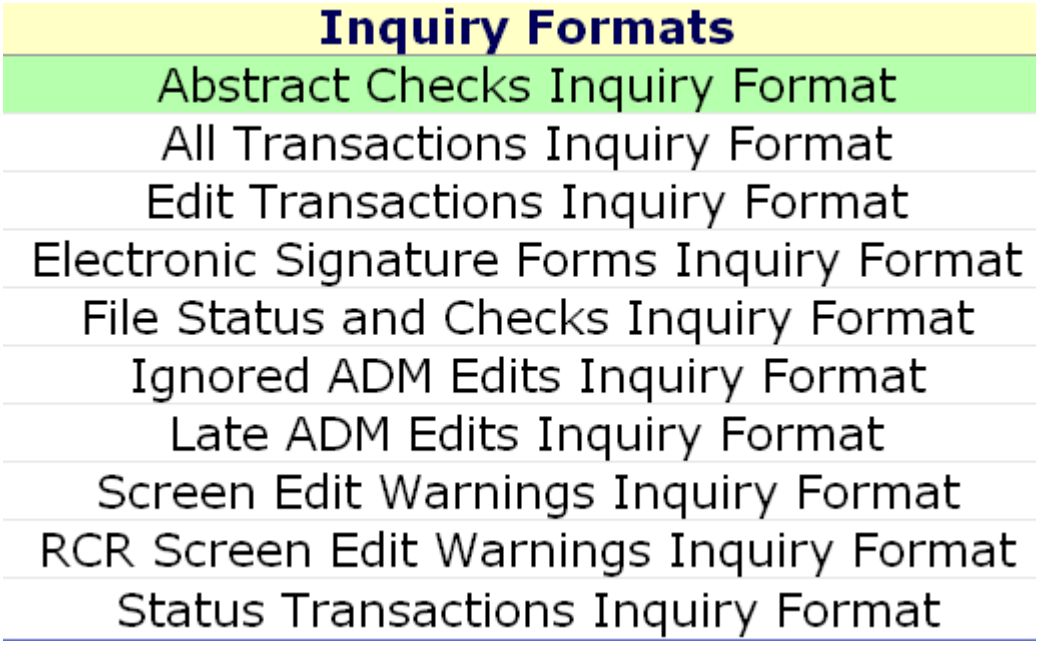


If the "**CDS**" button is highlighted, this indicates extra information pertaining to the patient was entered. Again, this is pertaining to the patient's most current visit, not necessarily the one we're coding.

The "**Rec Sign Out**" tab allows you to sign out a record directly from ABS. This may vary zone to zone as some zones have a link to the ICR routines and it will prompt you to use ICR routines for specific sign out locations.

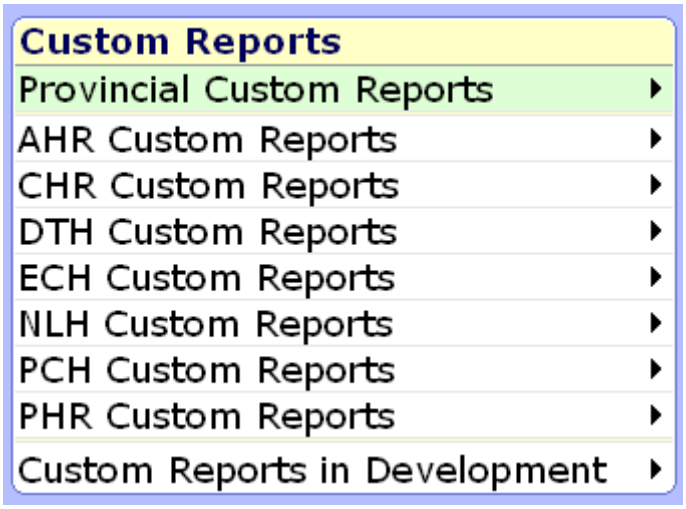
"Rec Return" tab allows you to return a record portion previously checked out

"ABS Inquiries" tab allows you to print reports based on transactions that have been done. Ie ignored, late edits done in ADM that did not cross, ABS check inquiry.



ABS Custom Reports Menu:

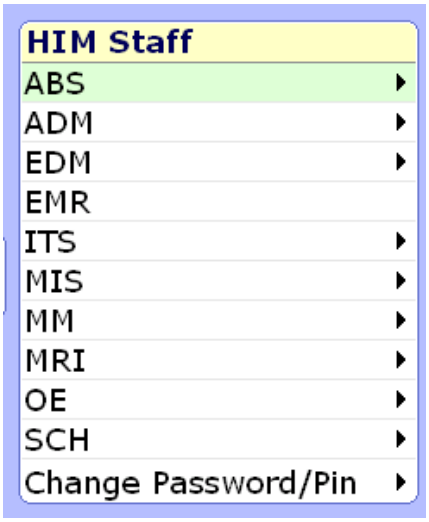
The next section is the Custom Reports for Coding. The custom reports are listed as follows:



Provincial Reports are listed first. These are reports that are provincial and are the same for each zone. You must be logged into the particular HCIS you want to run the report in order for the report to bring back data for that HCIS/facility.

We can then see a list of Zone specific reports. Clicking on the right arrow will display the reports available specific to zone. These reports will only work in the designated zone they are under.

We will now review the rest of the routines located in each applicaton: It will be your responsibility to sign up for any elearning, if available, associated with any of these modules that you utilize.

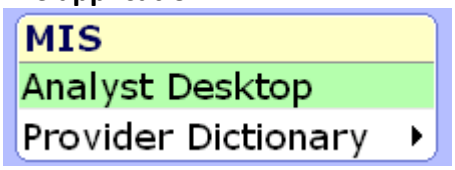


ADM application:

EDM application:
EDM Daily Log report (not currently available on your menu)

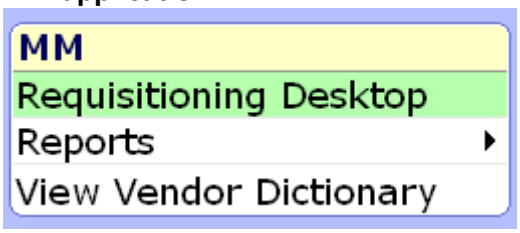
EMR application: EMR can be launched directly from here.

MIS application:

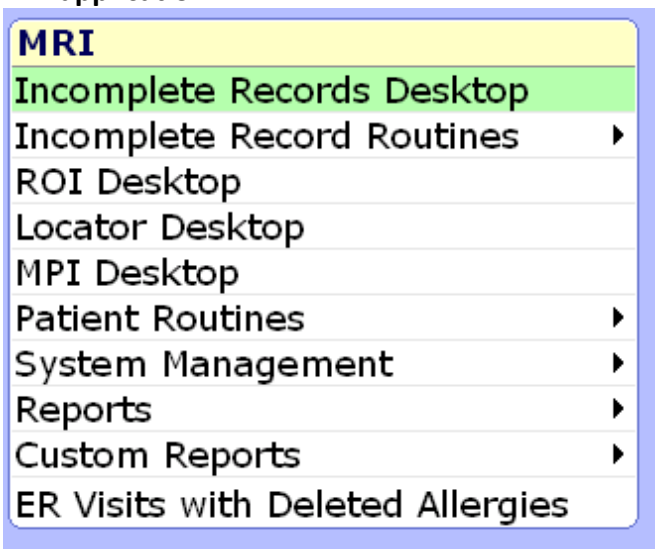


The analyst desktop provides you access to the interface mgr which is used to deliver our MACAR files. Formerly known as the inbox/outbox.

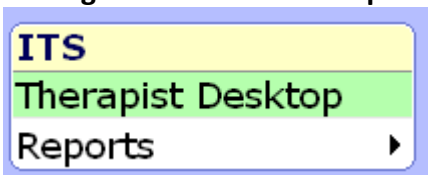
MM application:



MRI application:



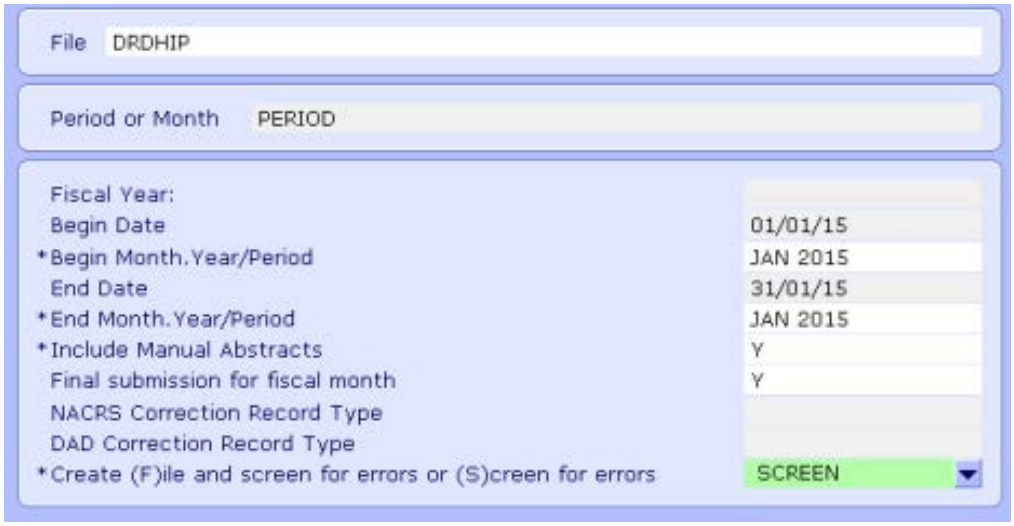
ITS application: (for entering/completing ITS orders for NACRS reporting and/or making minor fixes to therapist orders if trained to do so)



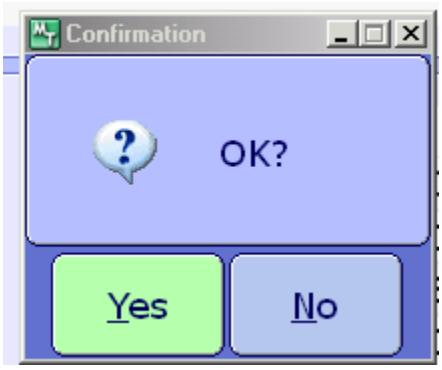
Users may or may not use all routines or be familiar with all items on the menu, but one menu was created for all HIM staff. If you are unfamiliar with how a routine works, please do not use until educated on same.

Creating your Submission Files (DAD and NACRS)

1. **Abstract Transmissions > Create Transmission File**. Below is a screen shot of the screen that is used to create our files – whether for DAD or NACRS. (S)creening for errors or (F)ile for creating the file.

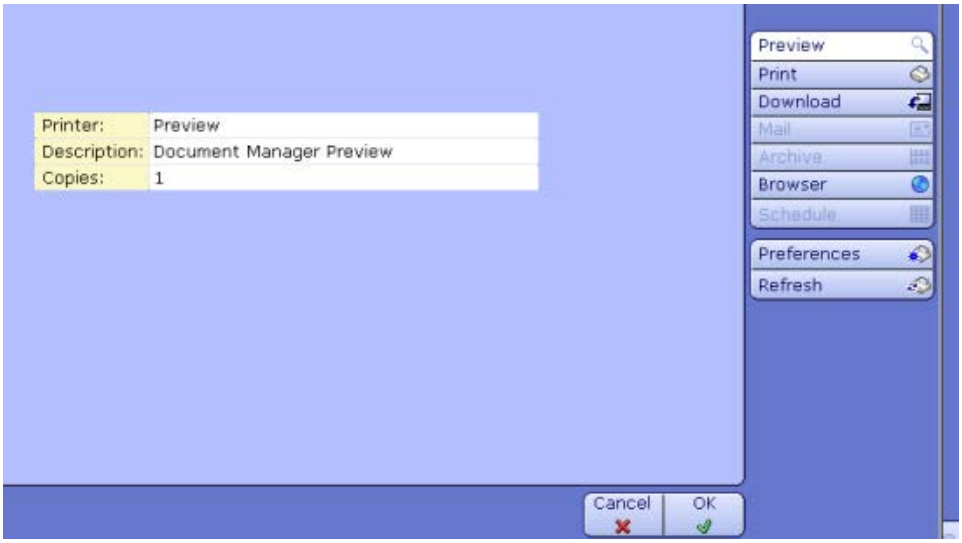


Press OK



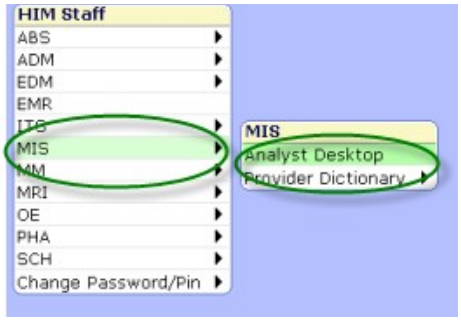
Press Yes

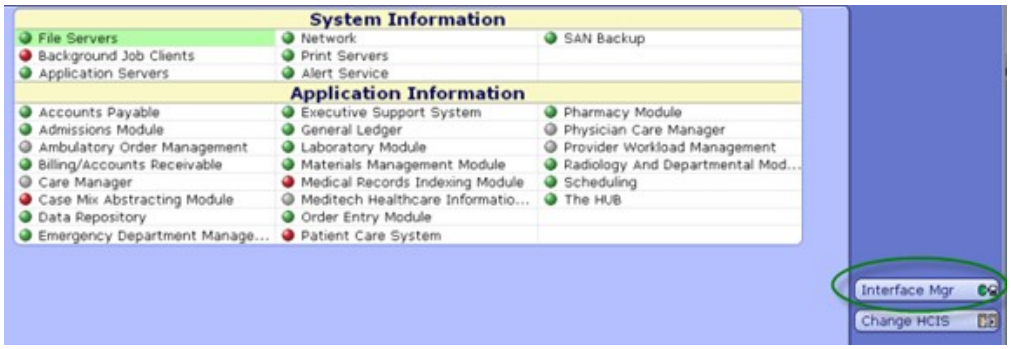
Once the errors are generated, the option of previewing, printing or downloadingthe report will become available.



Once the File has been created:

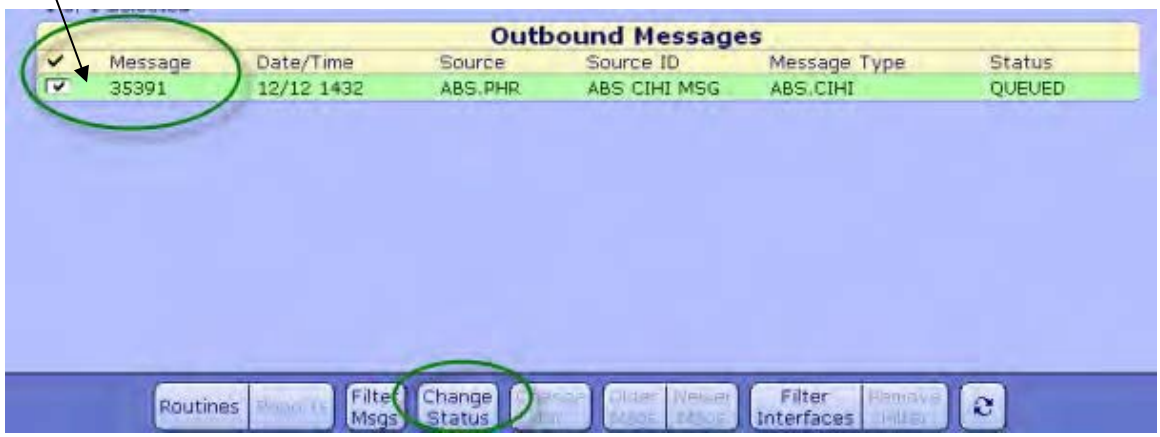
1. Go to MIS> Analyst Desktop > Interface Manager (aka Inbox/Outbox)





Click on the Messages button at the top of the screen:

You will see the outbound messages on the bottom portion of your screen. Place a check mark in the message you would like to deliver.



Go to “Change Status” button on the bottom of the screen and you will be provided an option to “Deliver” your files.

Click on Deliver and save.
Another pop up will be received to confirm delivery of the file – press Yes. Your file will be delivered into the drive/folder as per usual.