PIVOT POINT CONSULTING
A Vaco Company

eClinicalWorks®
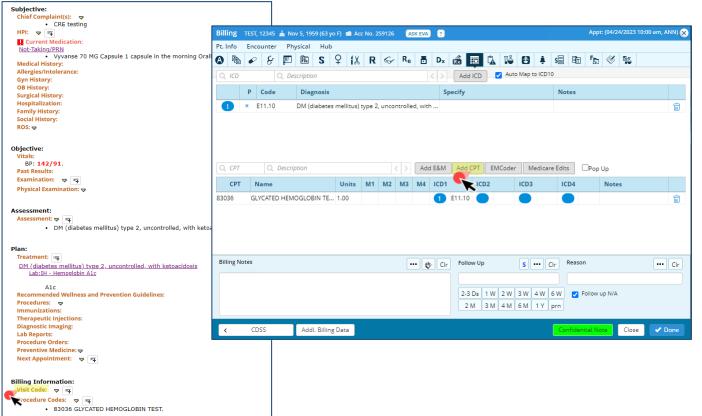# Clinical Quality Measure Code Capture Tools and Features
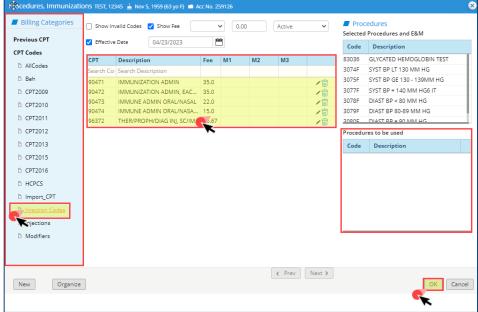
**Relationships.
Reliability.
Results.**

- Favorites
- Templates
- Superbill
- ICD/CPT Association
- CPT Explosion Codes
- ICD Manifestation Code
- Clinical Rules Engine
- Claims Rule Engine

TOOLS AND FEATURES - Favorites

TOOL / FEATURE	WHAT IS IT	HOW IS IT USED	PROS/CON	
FAVORITES	• A folder where CPT/HCPCS/CPTII codes can be kept for clinicians and providers to easily select from; Shared folder for all end-users	• End-user will click into appropriate folder to select the code(s)	• Easy to configure • Accessible via eClinicalMobile App • Eliminates need to search for common codes	▪ Once created, folders cannot be deleted ▪ Codes contained in a folder will be duplicated in the CPT Master Files ▪ Extra 'clicks' = minimum 4

TOOL / FEATURE	WHAT IS IT	HOW IS IT USED	PROS/CON	
TEMPLATES	• Predetermined outline of documentation that can also contain codes OR can only contain codes • Frequently used templates can be displayed in Right Chart Panel for one-click use	• End-user can use one click to import the template into the current note OR • End-use can search the template library to select a generic note or pull from a previous patient encounter to update prior documentation	• Easy to configure • Easy to use; one-click • No limit on how many templates can be imported into one progress note • All clinicians have ability to utilize	▪ Potential to have too many for end-users to find ▪ End-user may not remember to utilize; no pop-up reminders ▪ Manual workflow intervention

TOOLS AND FEATURES - Superbill

TOOL / FEATURE	WHAT IS IT	HOW IS IT USED	PROS/CON	
SUPERBILL	• An electronic encounter form use to select commonly used ICD, CPT/HCPCS/CPTII codes.	• End-user will click the Superbill icon to access from any documentation window in the progress note • Click the codes that apply and Save • Codes appear on progress note	• Easy to configure and update • Able to default superbill by user • Eliminates need to search for code(s) • Accessible via eClinicalMobile App • Links CPT to ICD	• Manual workflow intervention • End-user may not remember to utilize; no pop-up reminder • Extra 'clicks' = minimum 5

TOOLS AND FEATURES – ICD/CPT Association

Build/Configuration: Easy

TOOL / FEATURE	WHAT IS IT	HOW IS IT USED	PROS/CON	
ICD/CPT ASSOCIATION	• Linking CPT/HCPCS/CPTII codes to an ICD diagnosis	• End-user searches and selects a code in the Assessments area of the progress note • Pop-up appears for end-user to check or uncheck the codes based on what applies to the visit	• Easy to configure, use, and update • Real-time decision-making • No need to search for additional codes	• End-user can bypass • Overuse can cause pop-up fatigue • Extra 'clicks' = minimum 1

TOOLS AND FEATURES -CPT Explosion Code

Build/Configuration: Medium

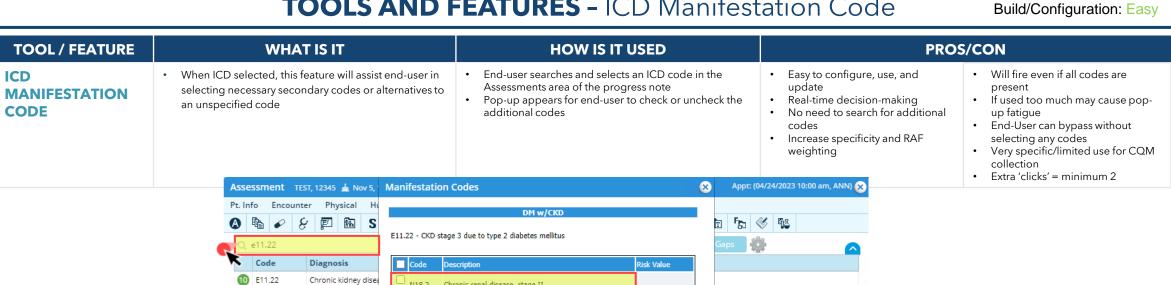| TOOL / FEATURE	WHAT IS IT	HOW IS IT USED	PROS/CON	
CPT EXPLOSION CODE	• Adds additional CPT/HCPCS/CPTII codes to a selected code OR • Replaces the selected CPT/HCPCS/CPTII code to a different code based on Insurance, Facility, or Provider configured rules	• End-user searches and selects a code from E&M Code or Add CPT button • Additional or replacement code appears on Progress Note	• Automatic • No pop-up for end-user • Easy to update • No additional training for end-user • No extra clicks for end-user	• All or none; the explosion code is triggered based on the code selected and rule set up every time • Workflows must be hardwired to document codes on progress note

Typical workflow for adding E & M codes to the progress note

Selected code displays along with associated codes with no additional clicks by end-user

Build/Configuration: Easy

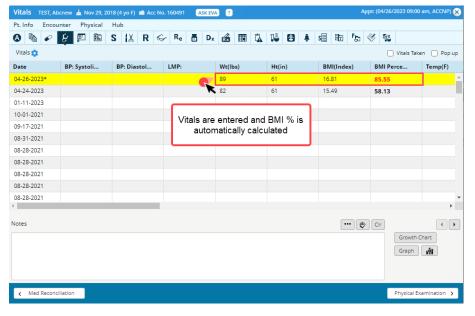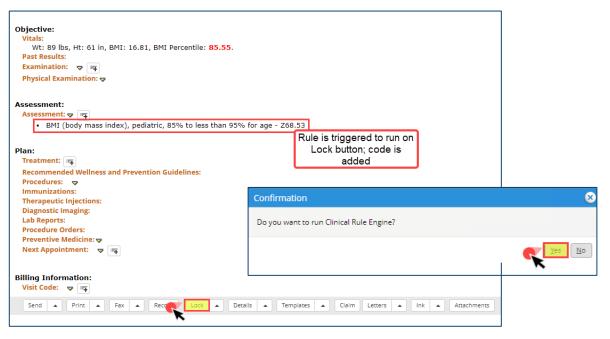| TOOL / FEATURE	WHAT IS IT	HOW IS IT USED	PROS/CON	
ICD MANIFESTATION CODE	• When ICD selected, this feature will assist end-user in selecting necessary secondary codes or alternatives to an unspecified code	• End-user searches and selects an ICD code in the Assessments area of the progress note • Pop-up appears for end-user to check or uncheck the additional codes	• Easy to configure, use, and update • Real-time decision-making • No need to search for additional codes • Increase specificity and RAF weighting	• Will fire even if all codes are present • If used too much may cause pop-up fatigue • End-User can bypass without selecting any codes • Very specific/limited use for CQM collection • Extra 'clicks' = minimum 2

TOOLS AND FEATURES – Clinical Rule Engine

Build/Configuration: Medium - Complex

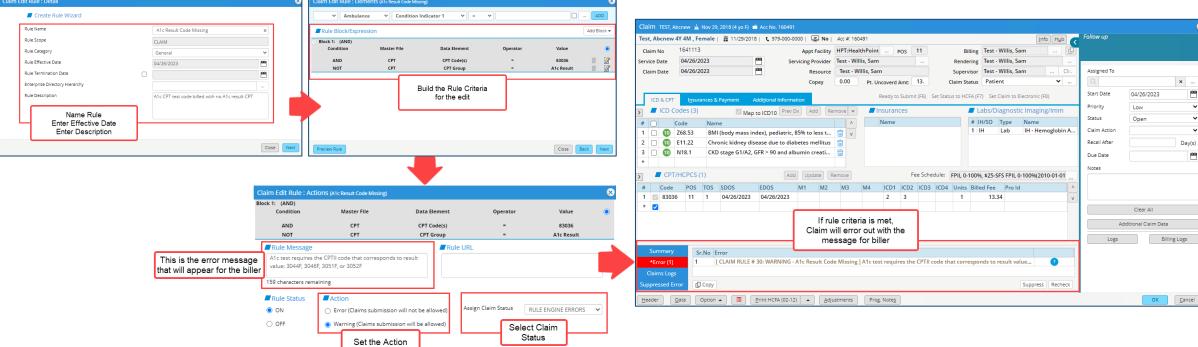| TOOL / FEATURE	WHAT IS IT	HOW IS IT USED	PROS/CON
CLINICAL RULE ENGINE	• Enables practice to automate events or actions based on clinical data captured from the progress note	• Typically triggered when end-users lock the encounter • Pop-up appears to run the rule engine; yes • Outcome determined by type of rule: • Add code, orders, assessment, create action, referral, telephone encounter, appointment, etc	• Many configuration options • Automate current manual actions • If conditions are met, rule will not trigger • Actions logged	• Most rules trigger on Locked notes • May cause pop-up fatigue • Unlocked and 'Done' notes may already have claim created, causing missing codes from claim • Can be unstable • Extra 'clicks' = minimum 2

Vitals are entered and BMI % is automatically calculated

Rule is triggered to run on Lock button; code is added

Confirmation

Do you want to run Clinical Rule Engine?

TOOL / FEATURE	WHAT IS IT	HOW IS IT USED	PROS/CON	
CLAIMS RULE ENGINE	• Enables practice to create their own custom claim edits to scrub claims prior to submission to the payer; billing feature	• Claim edit is included in the claim scrubbing process • If criteria is met, claim is errored out for manual review OR • If criteria is met, claim rule can have an action attached to correct claim without manual intervention (newer feature)	• Serve as a double-check for proper code submission • Ability to create edits that are specific to payers • Eliminates the need for manual claim review for all claims • Opportunity to educate end-users and providers on proper coding	• May allow for errors to continue on clinical side or front end • Claims may still need manual intervention to correct

- Use a combination of tools and features; 'one size does not fit all'
- Incorporate into Medical Assistant/RN workflows to reduce provider burden
  - Favorites
  - Templates
  - Superbills
- Use features/tools that have pop-ups for urgent or often missed items
  - ICD/CPT Association
  - ICD Manifestation Code
- Use CPT Explosion Codes for hardwired workflows to ensure documentation is present for codes such as medication documented and reconciled
- Clinical Rule Engine is useful and ideal
  - Con = providers not locking notes in a timely fashion; locking is trigger
- Claims Rule Engine helps to act as a 'double-check' to ensure proper coding on the first submission to the payer