Pre-Visit, Check-In, Check-Out

Pre-Visit | Check In | Check-Out

Updated: April 20, 2021

Note: Audio-video visits may be conducted. Document in the EHR as if the telehealth visits were an in-person visit. Include the time spent and any deviation in the service because the visit was not performed in-person. All care provided via telehealth should be documented in the EHR. Coding and billing for tele-video visits are to follow current processes for in-person visits per current payer guidance.

Concept and general process will apply for organizations using Zoom, Doxy.Me, and MyChart

Receptionist/Scheduler

Patient request a visit

Provider requests a visit for patient

Appropriate labs or imagining are ordered and patient is responsible for completing before visit date

Pre registration day before visit is scheduled

Complete travel questionnaire

Note: does it make sense to have this step here?

Verify Insurance. Have patient read off member ID and group number, RX number (not able to scan insurance card remotely)

Note: Information to capture includes:
1) Policy Holder Name & Date of Birth
2) Policy Number
3) Group Number
4) Co-Pay if known

Verify the sequence of primary & secondary insurance if needed

If Medicare patient, verify if MSPQ completed within the last 90 days
If **yes**- ask if any changes to insurance
If **no**, complete MSPQ with the patient on the phone

1 Update any change provided in Demographics
Obtain patient email address and enroll in patient portal

2 Obtain verbal consent to treat.
Email patient a copy of the HIPPA, Notice of Beneficiary, and PCMH forms

3 Verify guarantor

Note: ask ministry about this process step

4 Collect co-oay and balance due over the phone

Note: if covid-19 there are no related out-of-pocket costs.

Medical Assistant

MA – Prepping chart to ensure appropriate labs and imaging are available

Note:
1. In the next week, do you need assistance with food?
2. In the next week, do you need assistance with housing?
If yes to either question, please refer to Community Health Worker or social programs (e.g., 211 or Aunt Bertha)

Review past medical history, medication review, collect vitals (height and weight), ask any food or housing insecurities (see note above)

Ensure device and connection is working. Mitigate technical issues before handoff to provider

Obtain verbal consent for telehealth visit

At the time of the tele-visit, MA login to the QliqSoft dashboard via Qliqsoft.com

Add Patient Name/ Phone Number

Alter "Text Subject" line or keep it as is. Hit "Start Conversation"

Note: If you do not type a message, the communication will be blank.

Enter a message for when the patient arrives from the secure link.

Use the Assign button to send the televist to the provider.

Provider

Have provider Launch the Video Chat via the Icon

Provider close out of video chat with "X"

Sign-off of visit with patient and change status to closed and save.

Document in your EHR as usual for office visit

Determine appropriate discharge disposition:
- Home
- Urgent care
- Emergency department
- Inpatient admission

Determine appropriate follow up, time frame, and individuals to conduct follow up call

Completes provider follow up tasks

If patient is not active on a patient portal, print and mail AVS to patient

Patient

The patient will need to accept the video chat and allow the video/microphone to be used.

Patient has confirmed the video chat by "Yes" being displayed.