

POLICY & PROCEDURE



TITLE: Patient Registration and Orientation				
Scope/Purpose: To ensure all HealthPoint patients are entered into the electronic health record system and have completed all registration documents To orient patients to their new medical home and to ensure that patients will be active, and informed participants in his/her place of care				
Division/Department: All HealthPoint Clinics			Policy/Procedure #:	
Original Date: 7/23/14			<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement for:	
Date Reviewed:	Date Revised:	Implementation:	CPIC Approved:	Board Approved:
October 2015		10/30/2015	10/30/2015	
Responsible Party: Administrator of HealthPoint Initiatives; Director of Practice Management; Outreach, Enrollment, and Call Center Director				

DEFINITIONS:

Registration	The process by which NEW patients’ demographic information is entered into electronic health record system and documents to receive services are completed.
Eligibility	The process by which patients with limited insurance coverage and/or no insurance are screened to determine whether they qualify for cost-subsidizing healthcare programs and/or insurance according to state, federal, and/or HealthPoint policies.
Orientation	The process by which the patient is introduced to HealthPoint and given information about its services and philosophy of care.
Medical Home	A model for care provided by physician practices aimed at strengthening the physician-patient relationship by replacing episodic care based of illnesses and patient complaints with coordinated care and a long-term healing relationship - National Committee on Quality Assurance (NCQA)
Coordinated Care	The deliberate organization of patient care activities between two or more participants (including the patient)

involved in a patient's care to facilitate appropriate delivery of health care services ^[1]

Whole Person Care

includes the provision of comprehensive care and self-management support and emphasizes the spectrum of care needs, such as routine and urgent care; mental health: advice, assistance and support for making changes in health habits and making health care decisions – National Committee on Quality Assurance (NCQA)

POLICY:

All persons accessing services within the HealthPoint system are registered as patients and will receive patient orientation.

All persons with limited or no health insurance coverage accessing services within HealthPoint will complete the eligibility process.

During the registration and orientation process, all patients will be informed about the obligations of being a part of a Patient Centered Medical Home. Additionally, patients will receive information about HealthPoint's office hours, where to seek after-hours care, and how to communicate with their personal clinician and team. Patients and families will be advised that this information can also be found as follows:

- a. From HealthPoint staff
- b. On the HealthPoint website, www.healthpoint-tx.com
- c. In the practice lobby entrance
- d. On the after-hours outgoing phone message
- e. In the HealthPoint patient brochures

PROCEDURE:

I. Registration Process

- A. The registration staff will go through the registration and orientation process with each new patient. The process includes discussing, completing (signed and dated), and scanning into the patient's record the following forms:
 - i. General Consent
 - ii. Patient and Center Rights & Responsibilities
 - iii. Registration form where patient selects a personal clinician
 - iv. Notice of Privacy Rights
 - v. Advance Directive Notification
- B. Staff will verify patients accessing services have been registered (i.e. patients are in the electronic health record system)
 - i. New patients seeking services:

1. Patients with private insurance, Medicare, or Medicaid will complete the required forms at the time of the medical visit
 2. Patients with limited insurance coverage and/or no insurance seeking subsidized services will make an eligibility appointment to complete the required forms.
- ii. Established or existing patients
 1. Patients without health insurance coverage will complete the eligibility process on an annual basis.
 - a. Staff will verify registration forms are current (i.e. dated within the last year) and in the patient's record
 - b. Patients with expired programs will be referred to Eligibility for re-certification
 2. Patient with health insurance coverage
 - a. Staff will verify registration forms are current (i.e. dated within the last two years) and in the patient's record

II. Patient Portal

- A. Staff will provide patients with HealthPoint's "Patient Portal Flyer" to inform them of all of the portal's features which include, but are not limited to the ability to:
 - i. Access and view lab results
 - ii. View the patient's personal health record
 - iii. Send and receive messages to/from HealthPoint Staff
- B. Staff will web-enable the patient if the patient provides an email address
- C. Staff will then provide the patient with the "Welcome to the Patient Portal" handout.

III. Patient-Centered Medical Home

- A. Staff will inform patients and their families about HealthPoint's obligations as a medical home and will provide them with HealthPoint's standard brochure, medical home brochure, welcome letter, and patient & care team understanding in their preferred language. The information explained to the patient includes, but is not limited to:
 - i. HealthPoint practices a "whole person" orientation by being involved in all aspects of the patient's care. (PCMH Brochure and Welcome Letter, 2B1)
 1. Care is coordinated across all care settings by the preferred provider and the care team.
 - ii. Information about HealthPoint's office hours, where to seek after-hours care, and how to communicate with their personal clinician and care team. (PCMH Brochure and Welcome Letter, 2B2)

- iii. HealthPoint asks all new patients information regarding their medical and social history including current medications, allergies and past medical history. (PCMH Brochure and Welcome Letter, 2B3)
 - iv. HealthPoint gives patients access to evidence-based care and self-management support when appropriate. (PCMH Brochure, 2B4)
 - 1. Evidence based information is available during office visits from the Care Team and by visiting the practice web site. Self-management support is an essential part of the services provided by the Care Team, particularly those services for patients with important conditions.
 - v. HealthPoint provides a wide range of additional services available to all patients including, but not limited to (PCMH Brochure, 2B5):
 - 1. Prenatal Care
 - 2. Women's Health Services
 - 3. Dental Services
 - 4. Behavioral Health Services
 - a. All patients are screened for depression on an annual basis.
 - b. If the patient needs behavioral health care, the patient's provider can treat the patient and/or refer the patient to HealthPoint's in-house Department of Psychology and Psychiatry.
 - vi. HealthPoint provides equal access to all patients regardless of insurance status, and if needed, will send patients through our eligibility screening and enrollment program to provide them with public health insurance coverage and resources for financial support for health care needs. (HealthPoint Brochure, 2B6 & 2B7)
 - vii. HealthPoint will provide a written understanding between the patient/family/caregiver and the practice, specifying the role of the medical home, the practice, and the patient/family/caregiver. (Patient-Centered Medical Home Patient & Care Team Understanding)
- B. Staff will request that all new patients have their medical records sent over to our office by filling out the "Authorization to Use and Release Information", otherwise known as the medical records release form. This form will then be faxed to the former provider for the obtainment of the patient's medical records. (2B8)
- C. Staff also will inform patients and their families where to access the above information.

- i. This information is accessed, as applicable, through the HealthPoint website, in the practice lobby entrance, on the after-hours outgoing phone message, HealthPoint patient brochures, and/or provided by staff and providers.

RELATED POLICY:

Expedited Patient Registration and Orientation
Medical Home Responsibilities

REFERENCES:

McDonald KM, Sundaram V, Bravata DM, et al. Closing the Quality Gap: A Critical Analysis of Quality Improvement Strategies, Volume 7—Care Coordination. Rockville, MD: Agency for Healthcare Research and Quality, U.S. Department of Health and Human Services; June 2007.

National Committee on Quality Assurance

REQUIRED BY:

2014 PCMH Standard 2: Team-Based Care
Element A: Continuity
Factors: 3

2014 PCMH Standard 2: Team-Based Care
Element B: Medical Home Responsibilities
Factors: 1,2,3,4,5,6,7,8

Texas Department of State Health Services Primary Health Care

ATTACHMENTS/ENCLOSURES:

Registration Form (English/Spanish)
General consent (English/Spanish)
Patient and Center Rights & Responsibilities (English/Spanish)
Notice of Privacy Rights (English/Spanish)
Advance Directive Notification (English/Spanish)
Authorization to Use and Release Information
Patient Portal Flyer (English/Spanish)
Welcome to the Patient Portal (English/Spanish)
Patient-Centered Medical Home Patient & Care Team Understanding (English/Spanish)
Patient-Centered Medical Home Welcome Letter (English/Spanish)
Patient-Centered Medical Home Brochure (English/Spanish)
HealthPoint Brochure (English/Spanish)

POLICY/PROCEDURE TRACKING FORM

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