

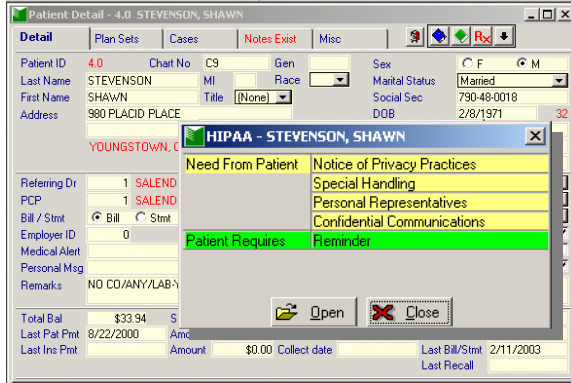
HIPAA Privacy Patient Alerts

HIPAA Patient Privacy Entries:

- Alert in Check-in
- Alert in Billing
- Alert in Appointments
- Add custom-designed alerts

HIPAA Reports:

- By category
- By patient
- Save reports
- Electronic Billing Setup:
- ANSI
- Claim File Type
- Taxonomy Code



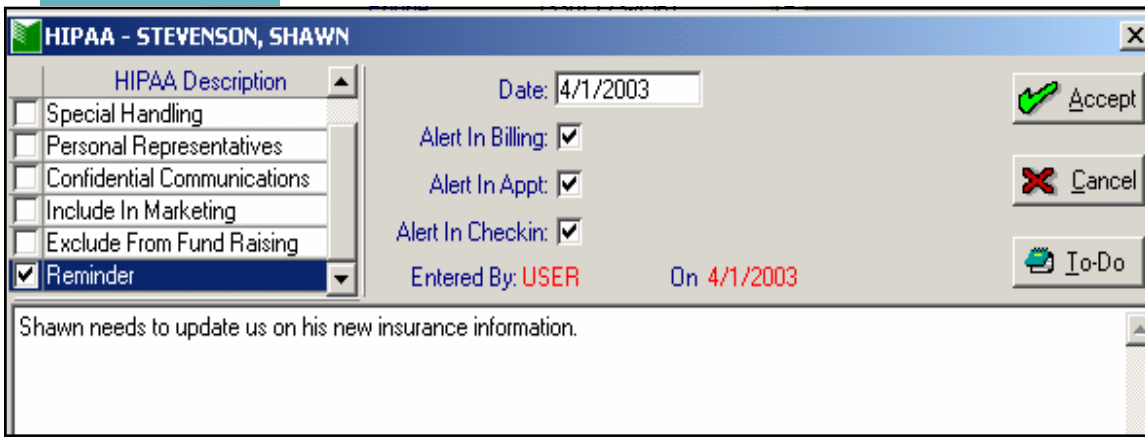
The alert window appears at various points within MicroMD. The alert shows items required from the patient and items required by the patient. Green alerts are specific to a particular patient, while yellow alerts are system-wide for all patients.

System-wide alerts — Alerts can be set up to appear when you access any patient's detail screen. Checkboxes allow you to alert the user when they enter the patient in the **Billing**, **Appointment**, and/or **Check-In/Check-out** screens.

The **HIPAA Categories** are completely user-definable and can be used for any type of issue or item a practice may wish to track. This option is not restricted to privacy issues.

Once these items are checked off in the patient's detail screen, indicating that a requirement has been satisfied, they will no longer appear on that patient's *Alert Screen* in the future.

Modifier	Patient Message	Place of Service	General Preferences	Type of Service	Billing Preferences	Additional Modules	HIPAA Categories
ID	Category Description	Alert In Billing	Alert In Appt	Alert In Checkin	Reset Patients		
1	Notice of Privacy Practices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4	Special Handling	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7	Personal Representatives	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
10	Confidential Communications	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
13	Include In Marketing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
16	Exclude From Fund Raising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
19	Reminder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	Add any category you wish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

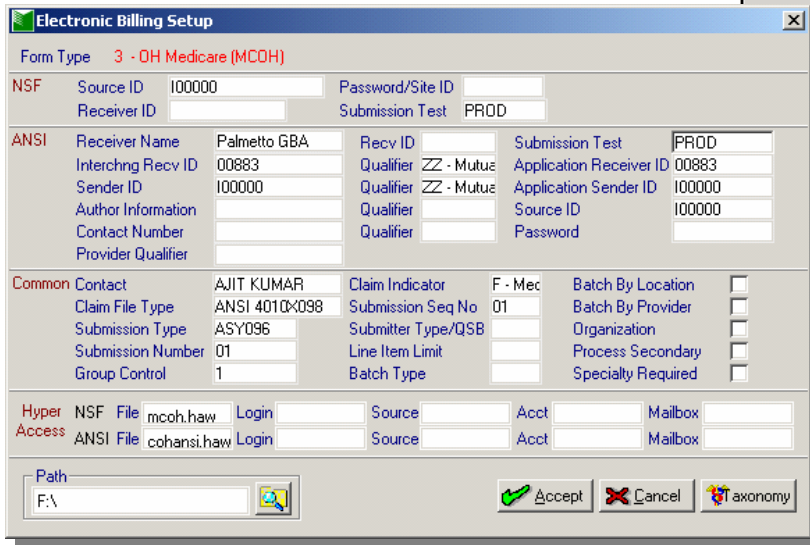
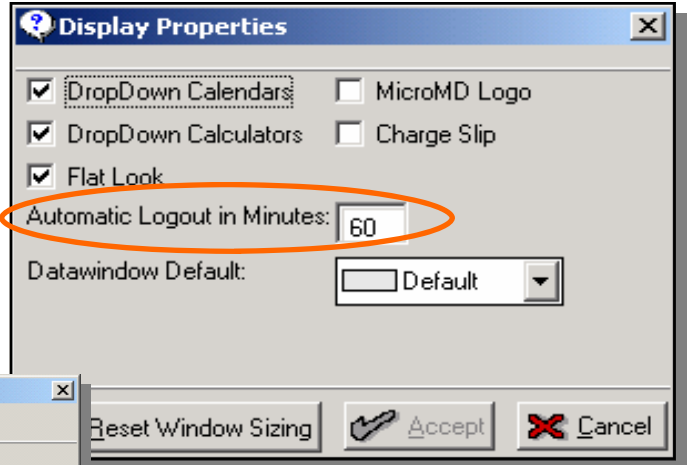


User-defined categories can be created for non-HIPAA reasons and can be used for specific patients. In the screen at the left, a custom category was created called *Reminder*. By checking this box, the operator can then choose where in MicroMD to be notified (*Billing*, *Appointments*, or *Check-in*) and is able to add additional notes in the screen that appears below. The user's name and the date of entering

this information is also added for future reference. Upon deselecting the item, the alert notice for that item will disappear in that patient's alert screen in the future.

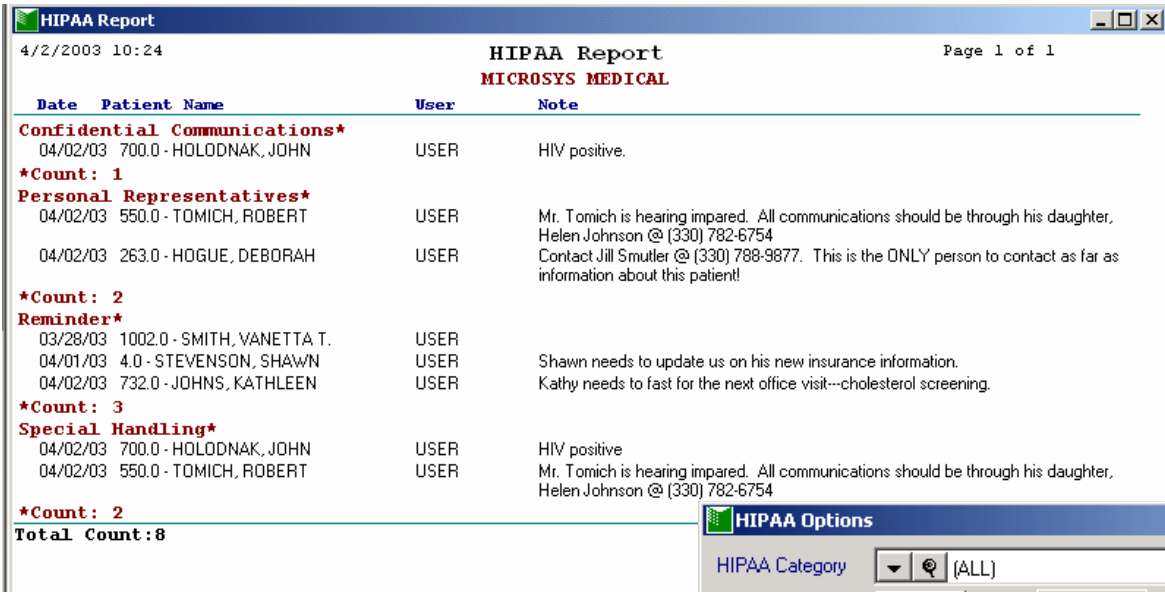
Other HIPAA Features

Automatic Logout, added to satisfy HIPAA requirements for security, allows the user to set the number of idle minutes that must pass before that workstation automatically logs out of MicroMD. An entry of zero (0) or a blank entry means there is no logout of this workstation.



The **Electronic Billing Setup** screen has changed to accommodate all the new ANSI requirements. The **ANSI** section is new. It has to contain all the information needed by the carrier to identify the practice sending the claims. Every carrier will specify their own settings for input here. The **Common** section is comprised of old and new fields. The general practice information is common to both **NSF** and **ANSI** billing. One of the two new fields is **Claim File Type**, which allows the practice to specify what type of file to create for the carrier. The **Group Control** is a secondary counter that counts the number of batches sent to that carrier. The **Submission Number** counts the total number of transmissions to that carrier.

ANSI now requires a **Taxonomy Code** rather than a **Provider Specialty**. All carriers now require Taxonomy Codes if you send in ANSI format. Therefore, the **Specialty Required** checkbox will not be used if the **Claim File Type** is any ANSI type. The **HyperAccess** section now has a separate HAW file for standard claims submission and one for the new ANSI format. This section allows for easier testing while continuing to submit claims in production mode, eliminating the loss of revenue.



HIPAA Privacy Patient Listing

This option allows the practice to generate reports based on selected **HIPAA Categories** for the Patients. The report can be grouped by **HIPAA Category** or **Patient**. Below is the options screen that allows you to customize your report.

