



# Patient Care Summary User Guide

#### The Patient Care Summary includes the following details:

- Demographic patient information, including date of birth, address and phone number
- The patient's primary care physician and other providers visited in the past 24 months
- Diagnoses and procedures submitted and reflected in claims records
- Professional, hospital and emergency room services reflected in claims records
- Prescriptions filled, including the class of the drug, total fills and last date filled
- Radiological and laboratory services reflected in claims records

Patient Care Summary is accessible via Availity® Essentials and provides an electronic health record sourced from claim-based information collected by BCBSNM from physicians, pharmacies, labs and other health care providers based on the last 24 months of claims data.

Providers who are registered with Availity Essentials can use this option to obtain a consolidated view of a patient's health history at the point of care. This information can help identify potential treatment issues, such as clinical gaps in recommended care services, missed prescription refills and possible drug interactions.

#### Not registered with Availity Essentials?

Complete the online guided registration process today via <a href="Availity">Availity</a>, at no cost.

March 2024



## Patient Care Summary User Guide Topics

The following instructions display how to access and use the Patient Care Summary via Availity Essentials.



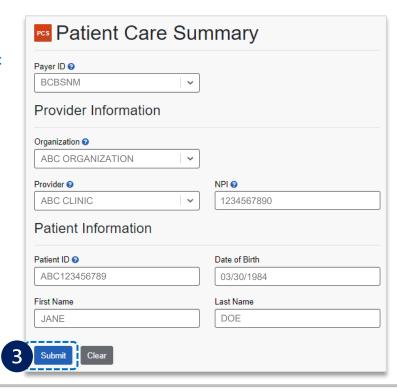


### Step 1: Patient Care Summary Inquiry (Option 1)

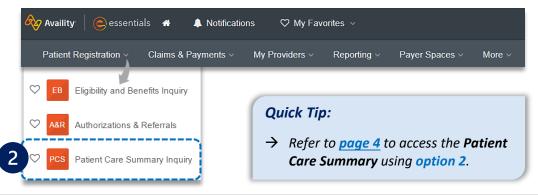
- Assigned users can access this tool by following the instructions below:
  - Go to Availity
  - Select Availity Essentials Login
  - Enter User ID and Password
  - Select Log in



- Enter the Provider and Patient Info
  - Select
    Submit

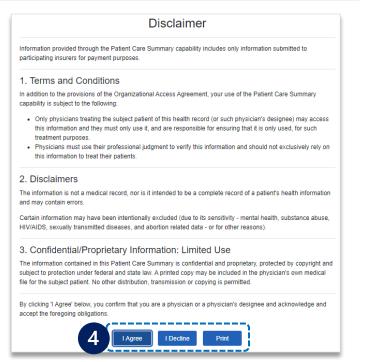


- Select Patient Registration from the navigation menu
  - Select Patient Care Summary Inquiry



- After thorough review, select I Agree
  - Once accepted, the Patient Care Summary will populate with a summary of the requested patient's information

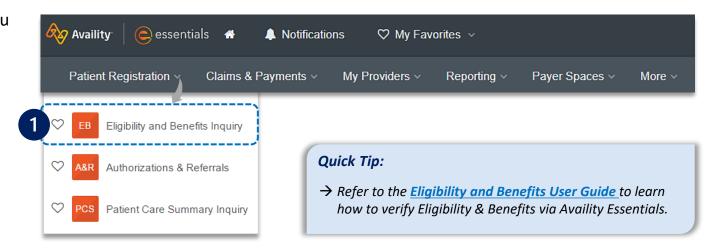
**Note:** This disclaimer will populate each time a **Patient Care Summary** is requested for a patient.





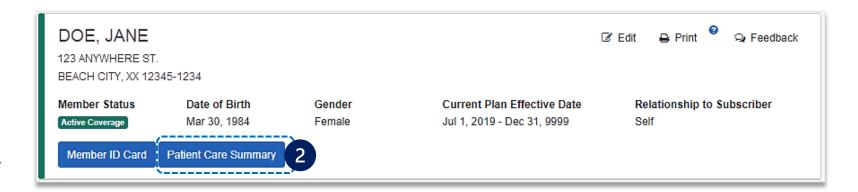
## Step 1: Patient Care Summary (Option 2 – Eligibility and Benefits Inquiry)

- Select Patient Registration from the navigation menu
  - Select Eligibility and Benefits Inquiry
  - Complete the inquiry and select Submit



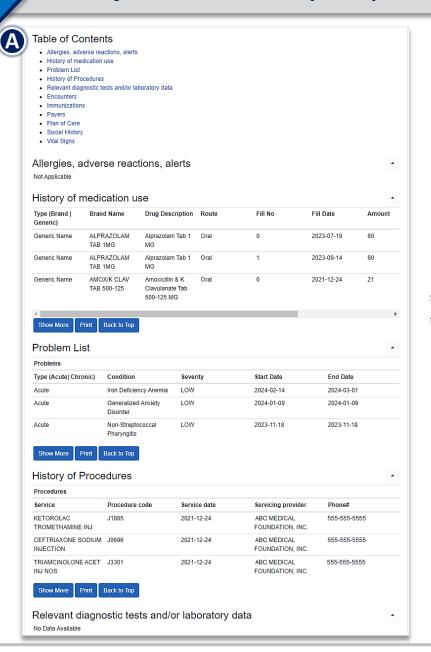
After completing an Eligibility and Benefits Inquiry, Patient Care
Summary will be available at the top of the response screen for eligible\* members

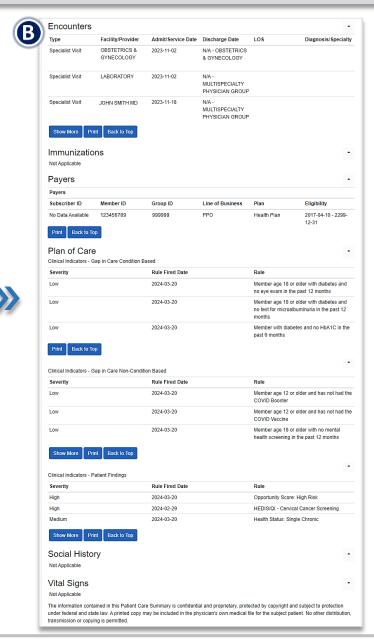
\*See page 6 for a list of exceptions





#### Step 2: Summary Report





#### **Descriptions:**

- **A** 
  - → Allergies, adverse reactions, alerts Patient allergies or instances where the patient experienced an adverse reaction to one or more medications.
  - → <u>History of medication use</u> − Class of prescription drugs filled at retail pharmacies billed during the given time period. Prescriptions billed on non-pharmacy claims, such as hospital and physician claims, are not included. The number of times each prescription was filled and the last time it was filled is included.
  - → <u>Problem List</u> All diagnosis by the service date. If more than one diagnosis was submitted on a claim, all of the diagnosis codes are listed.
  - → <u>History of Procedures</u> Procedure types, codes and a description of each procedure.
  - → Encounters Admissions to an inpatient facility, such as hospitals, rehabilitation centers and other similar facilities. The number of emergency room visits that were adjudicated during the given time period as well as all provider visits.
  - → Plan of Care Treatment opportunities based on the clinical intelligence rules applied to the data. If the system detects a test that should be ordered, per evidence-based medicine, but no claim for that test was found during the time period, a message to the clinical staff displays in this section. (i.e., the patient has diabetes and no claims for an annual dilated eye exam or A1C test are found or have been performed in the appropriate time frame, a treatment opportunity flag displays.) This section also indicates any missing recommended preventive care opportunities, typically based on age and gender of the member as identified by clinical intelligence rules.



#### **Step 3:** Patient Care Summary Exceptions and Support

| Reasons Why Patient Care Summary May Be Unavailable  |   |
|--|---|
| → Your Availity Administrator has not granted you access to the Patient Care<br>Summary.   | → The patient is new and does not have claim history with BCBSNM.   |
| → The Eligibility and Benefits Inquiry was not returned successfully.  | → The patient resides outside of the area where Availity Patient Care Summary has been implemented.   |
| → The patient is a twin for which the Eligibility and Benefits Inquiry requires the first name and last name to be entered.                                  | → The service involves sensitive information, such as psychiatric treatment, substance abuse, genetic testing or HIV/AIDS-related treatment.                          |
| → The patient paid out-of-pocket, and no claim is filed for the service; BCBSNM has no record of the service.  | → The patient is eligible for Medicare or has other primary health care coverage<br>(coordination of benefits).   |
| → Claims were adjudicated by a payer or health plan other than BCBSNM that does not participate in the Availity Patient Care Summary program (out-of-state). | → Claim data has not completed the clinical intelligence rules application. Claims processed within 90 days may not be available to view on the Patient Care Summary. |
| → The patient has restricted access to his or her claim information.   | → Services were performed too far in the past. BCBSNM returns results from the past 24 months.  |

#### Have questions or need additional education?

Education or training, contact <u>BCBSNM Provider Education Consultants</u>

Be sure to include your name, direct contact information & Tax ID and/or billing NPI.

Technical Availity support, contact Availity Client Services at 800-282-4548

Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSNM. BCBSNM makes no endorsement, representations or warranties regarding third party vendors and the products and services they offer.

The information provided in this user guide is proprietary and confidential information of BCBSNM pursuant of Provider's BCBSNM participation agreements. This information is not to be distrusted or shared with unauthorized individuals without the express approval of BCBSNM.

Information provided by Blue Cross and Blue Shield of New Mexico is for informational and educational purposes only and is not a substitute for the independent medical judgment of a physician or other health care provider, nor is the information presented intended to replace on supersede any requirements set forth in your contract with BCBSNM. Any samples in this presentation are for illustrative and/or educational purposes only and should not be relied on in determining how a specific Provider will be reimbursed. In the event of a conflict between the information in this presentation and your contract will control.