INNATE TRANSITION

Step 1 - Setup
A. Control panel

- If you did not have Innate Support on-board your installation and setup the control panel for you, then you will need to start here. Fill out all screens before logging into Full mode.
- Even if Innate support did on-board your installation, you will still need to review all items in control panel for accuracy.
    - *Most commonly missed step:
        - On **each** computer/workstation set the patient record, image, and scans folder locations. This should be a shared location between all computers
        - Note: It is not necessary to point to this location on a tablet as the tablets will not use the folders. Chose a local folder such as C:/InnateTemp on these devices
    - Integrations:
        - Make sure all usernames and passwords are correct as you may have changed these since onboarding

B. Settings
- In settings, you will need to review each tab thoroughly.
    - If you imported the notes templates, you should review each item to ensure that they are appropriate for your practice.
    - If you did not import, you will need to go through and insert all items for each tab manually.

- As you review each section you will need to:
    - Add new items that are not there
    - Delete existing ones you will not use (*do not inactivate them)
    - Edit codes, descriptions, notes, and all other fields for each item
    - Check for any typos. They will be underlined in Red.

- Here are a few hints:
    - Assessment:
        - Under each line in the template remove the %
    - Diagnosis
        - Review all S and O notes
    - Financial Profile
        - Description: Types of claims – for reporting and stats
    - Modifiers
        - Edit descriptions as the default are very long.
    - Procedures

- Be sure to add:
  - Modifiers
  - $ Charge amount
  - Express plan Notes
  - Default orders and results
- You must manually add your QPP codes (*G-Codes)
  - Make sure to check IsQPP and 1x charge on save. Here are the 5 minimum you must add to use automation.
    - G8539
    - G8541
    - G8730
    - G8731
    - G8942
- WARNING: some imported modifiers linked to procedure codes are not correct. Be sure to review these as you go through the codes.
- SOAP
  - Templates – you will notice not each section has templates present. You will need to add these for you practice.
  - Using these Templates in Innate should eliminate any third-party apps such as short keys.
- Insurance Addresses
  - **RECOMMENDATION**:
    - Do **not** input your insurance addresses from Seamless in Step 2. You should manually enter these
  - **WARNING:**
    - Different states/areas have different insurance payer codes. Please check with Infinedi for your correct payer codes. If the code is not online, you can call them and ask. Do not use cheat sheets being passed around as they are of good intent, but inaccurate once you get out of the local area.
  - **Tips:**
    - Group each insurance by payer code then enter all addresses that match the payer code under the master payer record. For each of posting later, recommend entering the name and Payer code in description.
      - Examples:
        - BCBS (99999)
          - Address 1
          - Address 2
        - BCBS (88888)
          - Address 1
          - Address 2
    - Type:
      - Choose OTHER (90% of the time)

- o Medicare or Medicaid or Tricare (10%)
- o NEVER Group (0%)
- Bottom of each insurance address select if you want this address to send claims paper or EDI.
  - o Payer code must be entered to set address to EDI and Infinedi set in the clearinghouse dropdown.
  - o NOTE: Claim service is where Infinedi prints and mails them for you

C. Hardware

- Be sure to review all hardware, network, and internet requirements.
- Note: for SRS to work from the doctor screen automatically, the SRS must be installed on the same computer as Innate. It will not work from 2 different computers.
- Reminder: Windows 7 is no longer HIPAA compliant as of January 2020

Step 2 – Preparation

A. CareCards or Flow?

- Your office must make the decision to go live with CareCards or if you will start with the flow tablets and FaceMatch immediately.

B. Patients

1. Importing

- Decide whether you would like to import patients or manually enter them.
  - o Call Innate Support to schedule your import if you would like to do this.
    - ▪ Note: once you import, you will need to enter all New Patients in both Seamless and Innate until you go live.
    - ▪ Note: once you import, look at the next patient account number in Seamless. Go into Innate Control Panel > rules tab and set this number as the Starting account number in Innate. This will ensure a smooth transition.

2. Activating and flagging

a. All patients will import as inactive
  - o FAQ: need to filter the patient list on the left to show inactive patients in order to see them

b. *** Clean up your CareCards:**
  - o Follow the Blue Book procedures on inactivating patients and separating all active patient CareCards from the inactive ones.

c. After CardCard holder only contains active patients, you will go thru the holder one by one to reactivate these patients in Innate.
  - o While active patient care card is in hand:
    1. Search for the inactive patient in list and open their chart.

a) On Profile tab
   o Review all fields
   o Make corrections, set preferences, enter omissions
b) Check ACTIVE
c) Flag patient: BLUE, ORANGE, & PINK

   Key for flags on initial setup:
   o BLUE- Patient has not been in yet.
      ▪ profile/diagnosis/charges not completed yet. Express notes, attention notes, recurring notes. Estimate and limit.
   o ORANGE- notes not transferred yet
      ▪ Treatment plan & all Subjective Histories
   o PINK- finances not transferred yet
      ▪ Case/accounting
         • Insurance cards/profiles with correct onset and accident dates
         • Patient balance forward from Seamless to Innate
         • Setup case reminders

2. Hit SAVE

3. Patient Record Tab:
   a) Assign existing patient folder from Seamless OR Create a new one for new patients

4. Close the patient tab
   a) If you will continue to use the CareCards initially, refile CareCard into the holder.
      o You can also flag the card for next patient for any special circumstances
         ▪ Ie. All Medicare patients will need a OAT/FRI right away to get the notes started properly. Flag the card with an orange flag to get an update on first visit.
   b) If you are going live with tablets and FaceMatch right away, you can file the CareCards with the inactive patients.

5. *REPEAT THESE PROCEDURES UNTIL ALL CARECARDS HAVE BEEN ADDRESSED.

d. All Inactive patients leave in list
   o If reactivate a patient, follow the same procedure as above.
e. All Deceased patients delete from the list so you don't accidently contact or reactivate them

C. HourMine

- This is for text messaging, appointment reminders, ecards, emergency messaging.
- If already a customer, contact HourMine from within their app. Contact/message support
    - In the message, instruct them to "**begin using Innate schedule on xx/yy/zzzz date**". Also, be sure to include use: "**Please use DEFALT RECOMMENDED PINNACLE SETTINGS FOR MESSAGING**"
- If a new customer, contact Innate Support for registration materials

D. Infinedi

- This is for electronic claims submission
- If already a customer, contact Infinedi and ask them to setup your account to begin accepting Innate claims
- If a new customer, contact Innate Support for registration materials.
- **Note:** Be sure to ask them to start registering for electronic EOBs (835) if you don't currently receive them.

E. Etactics

- This is for electronic statements.
- Contact Innate Support for registration materials.

F. Complete Merchant Solutions (CMS) / Nexio

- This is for credit card processing.
- Contact Innate Support for registration materials.

G. Railhead

- This is for FaceMatch.
- Contact Innate Support for registration materials.
- Ask them to turn your camera live.

H. Last shift before going live

- Open eBook and the Innate scheduler.
- Transfer all pending appointments over from eBook to Innate scheduling.
    - Hint: In the Innate Report Dashboard > Recall Tab
        - You can see all patients and their next appointment.
            - Double click the name to open the scheduler and enter that patient's next appointment for your go live date and beyond.
- If you will continue using CareCards, but want to start training FaceMatch, go into Control Panel > integrations and set Confidence High level to 100%. This will prevent automatic check-in. Once ready to start using the FaceMatch, return here and set this to the appropriate level for your office.

Step 3 – Go Live

1. Creating a Case, Profile, and visit has 2 options for step A.

Option 1: Swipe Method when using CareCards

- This method involves the Case and visit being created at the same time on swipe of the CareCard. The case is not setup in advance.
  - Benefit is the date case opened, initial treatment date, and date of current illness will match the visit date.
  - Downside is that the doctor must hit YES after swipe.

Open to ROOM: PHYSICIAN from the Login Window

- Patient comes in for first visit innate - doctor swipes the care card
  - Doctor:
    1. Prompt to create a new case and visit > Click **YES** (new case, financial profile, and visit are created)
    2. Click a button 1, 2, 3, 4, or 6 to set the Level Scenario
    3. Click COMPLETE

Option 2: Flow Method

- This method involves the Case and visit being created at check in of the patient.
  - Benefit is the date case opened, initial treatment date, and date of current illness will match the visit date. Also we can add case reminders and PT flag, express notes, and other items prior to seeing the doctor
  - Downside is that it's a new process for the CA and Doctor all at once.

Open to ROOM: PHYSICIAN from the Login Window

- Patient comes in for first visit innate - doctor touches the patient name in the Treatment Room Queue to open them up on the Screen.
  - Doctor:
    1. Click a button 1, 2, 3, 4, or 6 to set the Level Scenario
    2. Click COMPLETE

2. Addressing the Flags and checking the patient out

Open into Full mode:

- Note: Medicare patients will need all flags addressed before checking out.
- Checkout queue will begin to populate with names that have a visit for today.
  - CA: you will want to work through BLUE flags on each patient first. Simply click the name to open the visit services window.
    1. HINT: The order of importance > complete the patients who will be in next day first.
  - Note: while patient is in the office CAs can still make a payment towards the patient's account since a new case and visit have been created.
  - Hint: you may want 2 monitors open connected to this computer.

1. Innate on one monitor and Seamless/eSuite on the other

A. Checklist for the BLUE flags:
1. Once the visit services window is open, here is the order of operations you will want to follow in order to be able to remove the Blue Flag.
   a. Level/Scenario - Assessment (make sure it is not 5G)
      o Click the Today's assessment to open and edit this code if needed.
      o Once complete save to return to the Visit Service Window.
   b. Diagnosis and Subluxations
      o Click the Diagnosis box in the upper left corner.
         ▪ If not a new condition, copy the diagnosis over from Seamless and enter them in on this screen
         ▪ In the Recurring note in eSuite, you will see the subluxation listings. Add those listings as well to Innate.
         ▪ Once complete save to return to the Visit Service Window.
   c. Address important notes
      o Click on one of the SOAP tabs in the upper left corner to open the advanced note window.
      o All we need to add now is the notes that recur in the Recurring note box in eSuite.
         ▪ Ie. Chief complaint: "The patient complains of...." into the subjective repeat box.
      o Once complete save to return to the Visit Service Window.
   d. Express notes
      o Enter the express notes from seamless here and click save to profile if you'd like this to be added to the Case tab for you automatically.
   e. Special Attention Notes
      o Enter the Special Attention notes from seamless here and click save to case if you'd like this to be added to the Case tab for you automatically.
   f. Estimate and Limit
      o Enter this visit's Estimate and Limit if applicable and click save to case if you'd like this to be added to the Case tab for you automatically.
      o Once complete save to return to the Visit Service Window.
   g. Add charges/procedures
      o Enter the patient's charges in the bottom right by clicking the + and adding the appropriate code procedures linking them to the newly added diagnosis codes.
      o Save between charges and hit + to add a new one.
      o Once complete, return to the Visit Service Window.
   h. Schedule patient appointment
      o If the word NONE appears for next appointment, click it to add the patient's next appointment
      o If a date appears, the appointment is scheduled already, but you can edit if needed.
   i. Apply payments
      o If a patient made a payment today and you did not record it already, you can do so from this screen.
   j. Add case reminders:
      o Click the button next to the case reminder section to add a new case reminder.

- If you do not add a new treatment plan note today, you may want to go into eSuite and look at the next treatment plan date for the patient and then manually add a reminder for the date here.
    - o If patient is new patient/new condition/Medicare a FRI and TX plan needs to be completed and we will do this on the ORANGE Flag checklist.
- k. Once all above is completed: UNCHECK BLUE FLAG
- l. If the notes do not need to be completed prior to checkout, the CA can click COMPLETE. However, if notes do need to be entered prior to checkout, the CA must click PENDING.
    - o Ie. Medicare, new patients, and new conditions.

NOTE: It may be overwhelming to address all 3 flags on the very first day. If you followed the steps above, you will be able to gradually address the PINK and ORANGE flags as time allows.

B. Checklist for the PINK flags:

1. This checklist is for finances. Here is the order of operations to make sure nothing is missed.
2. From the left side, search for the patient and open to the Case screen.
    - a. Case reference > the patient's condition
        - ▪ ie. Neck
    - b. Check case dates
        - o For Personal Injury cases:
            1. + Accident date
            2. Edit Initial TX date
            3. Edit Current illness date
    - c. Profile reference > the patient's finances:
        - o Ie. Cash – PIF
    - d. Enter Insurance information
        - o If the patient is self-pay, leave the insurance profile blank and proceed to step e.
        - o For insurance patients, click on the button to add an insurance information
            1. Once the insurance management window is open:
                - a) Add all insurance cards for the patient in the top section
                - b) Make a new profile in the bottom section and order the insurance cards properly.
                    - o Profile Reference should Reference the cards for ease of use later. Ie. MCR/AARP
            2. Once complete, exit to return the patient's case screen.
            3. The new profile will now appear in the insurance profile dropdown. Select it and answer YES to the prompt if is shows to recalculate claims.
    - e. Set the Type
        - o cash/insurance etc.
    - f. If this patient needs QPP codes to be added to each visit, turn on Automate QPP at this time.
    - g. Statements
        - o Set the Responsible Party if needed. *Defaulted to self.
    - h. Additional Insurance information (*Insurance cases only)
        - o Add any additional insurance information here.

      i.   Review case reminders, express notes, special attention notes, PT and X-RAY buttons, and Estimate and Co-pay values.

      j.   SAVE to complete all tasks on the case tab.

         NEXT > Accounting Tab – click Accounting to move to the next section.

      k.   Open accounting in Seamless and check to see if the patient has a remaining balance. If they do, adjust off in Seamless (-) Balance forward amount. Then go to Innate and add a case adjustment with a (+) balance.

         o   Hint: be sure to match the first treatment day so this balance appears on top on the accounting ledger.

         NEXT > Once completed

      l.   If the patient has a recurring credit card in Seamless running, you may want to move out of EPN and into Innate.

         o   Click the Card Management section and add the credit card to the vault.

         o   Then go into the recurring payment section and add the details and save.

            1.   If there needs to be a recurring charge, you can add it at this time as well.

         o   Once completed, save to go back to the profile tab.

     m. UNCHECK PINK FLAG

         o   Save and close the patient's chart.

D. Checklist for the ORANGE flags:

1. This checklist is for notes. Here is the order of operations to make sure nothing is missed.
2. From the left side, search for the patient and open to the Visit tab.

Simple:

3. Because most of the patients are in the middle of an active treatment plan, this step may be as simple as making sure the case reminder is set for the next treatment plan and checking in seamless if any reoccurring/contraindications/other important notes are needing to be entered into Innate immediately.

         o   Once completed: UNCHECK ORANGE FLAG

            ▪   Save and close the patient's chart.

Advanced:

3. New patients, new conditions, and Medicare will need to follow this before checkout of their first visit.

         o   Address each section on the visit tab OR open the advanced note window on the bottom right.

         o   All S, O, A, & P sections will need to be moved over from Seamless or updated as appropriate. Ie. New notes today.

         o   Click the services button in the center of the visit tab to open the visit services window.

            ▪   Now that the notes are present, if QPP Automation is turned on, it will add the correct QPP codes to the charges. If they do not refresh, click the refresh QPP button to regenerate the codes.

               1.   NOTE: an OAT AND a treatment plan must both be present to count as completed.

- Once satisfied with the charges, UNCHECK ORANGE FLAG and then Click COMPLETE.
  - This will return you to the visit tab
    - Save and close the patient's chart.

4. Beginning of each day

1. In the report dashboard, today's schedule can be viewed and printed by am/pm shift
2. Also, today's reminders can be seen. These are to predict the visit reminders that will show for scheduled patients.
   a. Use this report to flag CareCards in advance if still using them.
   b. Reminder: Flow will show these reminders at check-in
3. Throughout the day, look at and follow up on the patient recall. 2 week, 6 month, etc.
   a. Report Dashboard > scheduling > patient recall tab
4. Process Birthday emails and cards from Report Dashboard > patient tab
   a. filter the list properly to get the desired month and sort by bday day to order it properly.

5. End of each day

1. In scheduling or using the scheduling reports, make sure all patients have been re-scheduled.
   - use filters to find unscheduled patients/unchecked patients/etc.
2. Also make sure to follow up on missed appointments
   - In HourMine, you can click Seamless process missed and it will generate messaged ready to send to those that receive texts or emails
   - Without HourMine or for patient's that prefer phone calls, double click their name to open the scheduling window. You can see contact information there and can reschedule as needed.
3. Also, tomorrow's or next Monday's reminders can be seen. These are to predict the visit reminders that will show for scheduled patients on those days.
   - Use this report to flag CareCards in advance if still using them.
   - Reminder: Flow will show these reminders at check-in
4. Face Match:
   - If using FaceMatch, be sure to assign unmatched photos to patients. Even if using CareCards, this will begin training your camera for matching faces.
5. Checkout & Provider Queues
   - Make sure these are empty each day before leaving, unless special circumstances arise.
     - They will stay in the Queue until Checked out
       - WARNING: the signature date and time of the visit will reflect the time the visit was checked out. Not the time of the visit itself.
       - HINT: Flow and checkout queues are independent. Meaning, a patient can be checked out while still in the flow and vice versa.
6. Payment Journal
   - Make sure all payments have been applied