ATAG Update on Cerner Charge Capture

Colleagues and Peers,

Our transition to the Cerner EMR has been a challenge from many perspectives. One of the particularly challenging aspects you have expressed is the shift of charge capture for hospital services to the provider from the Revenue Cycle Team. While this model is the standard across Banner, we recognize that in an academic setting there are particular challenges that create strain on the efficiency of the charge coding work flows.

We have heard your concerns and are implementing some short-term changes in the acute care setting to assist with the expectation that providers place Evaluation and Management (E&M) and PF Prompt charges. This three-part, temporary solution will support hospital providers until the Cerner system is stable and coding becomes more manageable.

- Hospital locations (inpatient and outpatient with the exception of the OR)
  - The Revenue Cycle team will enter E&M codes and procedure charges based on the hospital discharge/census and physician clinical documentation
  - Physicians will focus on clinical documentation
  - Coding team will review and code 100% of accounts
  - Physicians will receive encounter outcome summaries
  - Begins May 21 with patients in-house. The functionality to enter charges for hospital patients will be turned off on this date.
- Operating Rooms
  - The PF Prompt is scheduled to be automated into Surginet in the second quarter of this

Cerner Video Update

This week's video update features Marisol Canez, RN, who shares information about Cerner in the NICU.

Cerner Updates

- The mobile application roll out for Cerner began on Feb. 26. Tucson is the first in Banner to deploy this new technology. Providers must first download these applications from the PLAY store or APP store. Please contact the Service Desk if you have questions or need an activation code. The applications allow physicians to review patient information, place orders, take clinical images to upload to a patient chart, and more. The applications include:
  - PowerChart Touch: Review history, notes, results, and place orders
  - Camera Capture: Take clinical images and upload to the chart
  - InstaNote: Create notes with Dragon Medical One voice recognition
  - Message Center: Shows your Message Center from Cerner
- The Pediatric Outpatient Intake form has been submitted to IT and should be in Production on March 21. This form will be used for pediatric outpatients including oncology patients.
- New order synonyms will be available on March 21, including for ABG/VGB, Vent, Foley etc.
- ED PF Prompt order now automated.
- Integration of I/O build has begun. Cerner assistance is needed to assist with this build

year. Once automated this will be a permanent change.

- – Until this occurs, physicians will continue entering the PF Prompt
- Emergency Department
  - – The PF Prompt is now automated in the Emergency Department only
  - – This is a permanent change
  - – Creating the automated PF Prompt is most congruous with the ED due to similar coding for patient visits
- Clinics and Cancer Center
  - – Physicians will continue to enter the E&M codes and PF Prompts at the time of the patient visit
  - – Revenue Cycle team will audit and make corrections as necessary
  - – Shoulder-to-shoulder support will be provided to assist physicians
  - – The shoulder-to-shoulder support begins May 7

These changes in charge capture are not a sustainable long-term solution with the exception of the automated PF Prompt in the ED and OR. We are actively partnering with clinical leaders and departmental administration to work toward a solution that allows providers to have ownership of their charge coding capture and is at the same time least disruptive to caring for our patients. We anticipate that the system will be stable enough for this within the next nine months, and we will reevaluate these changes at that time.

In summary, we have heard your concerns and are putting in place some short-term changes in response. As we continue to stabilize the Cerner system we will evaluate the charge entry and coding process for future opportunities. Look for additional communication from your department leaders regarding implementation of these changes. Please do not hesitate to ask your leaders if you have questions regarding charge entry and coding within the Cerner system.

Gratefully,
The Academic Technology Advisory Group

Oncology Update

- OCM (Oncology Care Model) Reports: meetings have been scheduled to continue to address OCM reporting needs
- Separate lab phases have been created for all Pediatric Oncology Methotrexate plans that require sequential lab monitoring to be activated after the nurse starts Methotrexate on the MAR. This change impacted about 20 Outpatient and Inpatient Plans.

Pharmacy Update

- Enhanced Medication Request went live at BUMCT and BUMCS mid-week. This allows nurses to request a medication electronically and provides electronic communication between pharmacy and nursing.
- Pharmacy order verification times continue to improve month over month. Last week also brought the lowest pharmacy verification times since October go live.
- Pharmacy is working to implement pharmacy keeper which allows for batching of compounded products (IV and Oral) that can then be loaded in Pyxis.
- A Cerner dosing weight solution was presented to pediatric providers, and now goes to ATAG for further review. A March or April timeframe is anticipated for go-live.
- Continued focus on PICU related to Pyxis optimization