1. Open the patient’s chart and click the Manage tab to review the information in the workflow.

2. It is best practice to document on the workflow as you review, but it is required to add your diagnosis in Consolidated Problems, so it is available to associate to a charge.

3. Review the Consolidated Problems list. If your diagnosis hasn’t been added, use the Quick Search field next to “Add new as” to search for your diagnosis. Be as specific as possible in your search to return a more specific diagnosis.

4. When the diagnosis is added, an icon will indicate if it is specific enough for a charge to be dropped.
   - Specified: No further specificity is needed.
   - Unspecified: Not enough specificity to match code.

5. If unspecified, perform one of the following:
   a. click on the icon to open Diagnosis Assistant to determine a more specific diagnosis.
   b. Remove the problem by clicking the blue This Visit button and use more specific search terms search to return a more specific result.

Refer to the Diagnosis Assistant Quick Reference Guide for more details.


6. After adding your problem, it is recommended to use the Assessment and Plan section to remove any diagnosis for which you are not documenting. Hover over the diagnosis and click the X to remove. Then document the pertinent assessment and plan below each individual diagnosis.

7. Under Create Note, select a Progress Note.

8. Review the note for accuracy and add any additional information, including tagged items. Click Sign/Submit.

9. On the Sign/Submit Note window, change the title, if needed. Forward to your attending provider for review. Then click Sign.

10. The Hospital Charges window will appear. The Hospital Charges component allows you to submit visit level E&M charges for a selected patient’s encounter. Note: Charges do not carry forward and must be added daily.

10a. The previous charges section will show you any charges you have added for this patient over the course of his/her visit. If you haven’t added a charge the box will indicate “Charge Needed”. If you did not perform a service for the patient on that day, a charge is not needed.

10b. On the right side of the window, the date will default to today and the note on which to place the charge will default to the one you just signed. Important: The note and charge date should match the Date of Service on which you performed the service.

11. Under the E&M code category list, select a visit type by clicking on it (for example, Hospital Consults).

12. A list of associated E&M codes will display. Select the code for the level of service you provided supported by your documentation in the note.

13. The list of diagnosis from the Consolidated Problem list is displayed. Check the box next to the diagnosis which you want to associate with the charge. The first diagnosis selected becomes the primary diagnosis. You can select more than one. You can change the priority by clicking the arrow next to the number and selecting the correct priority.

14. Finally, click Submit.
Create Consult Note

1. Open the patient’s chart and click the **Admit/Consult** tab to review the information in the workflow.
2. It is best practice to document on the workflow as you review, but it is required to add your diagnosis in Consolidated Problems, so it is available to associate to a charge.
3. Review the **Consolidated Problems** list. If your diagnosis hasn’t been added, use the Quick Search field next to “Add new as” to search for your diagnosis. Be as specific as possible in your search to return a more specific diagnosis.
4. When the diagnosis is added, an icon will indicate if it is specific enough for a charge to be dropped.
   - Specified: No further specificity is needed.
   - Unspecified: Not enough specificity to match code.
5. If unspecified, perform one of the following:
   a. Click on the icon to open Diagnosis Assistant to determine a more specific diagnosis.
   b. Remove the problem by clicking the blue This Visit button and use more specific search terms search to return a more specific result.

Refer to the Diagnosis Assistant Quick Reference guide for more details.


6. After adding your problem, it is recommended to use the **Assessment and Plan** section to remove any diagnosis for which you are not documenting. Hover over the diagnosis and click the X to remove. Then document the pertinent assessment and plan below each individual diagnosis.
7. Under Create Note, select **Consult Note** (Consult).
8. Review the note for accuracy and add any additional information, including tagged items. Click **Sign/Submit**.
9. On the Sign/Submit Note window, change the title, if needed. Add the provider to which you are forwarding the note. Then click **Sign**.

You will not receive the Hospital Charges window after signing Consult Notes.

Create Brief Note/ Add a “No Charge” Charge

If you create a Brief Note for communication and no service was provided, after signing the note:
1. On the Hospital Charges window, select the Visit Type **No Charge**.
2. Then click the CPT code **No Charge**.
3. Select a diagnosis.
4. Click **Submit**.

Modify a Charge

If you add the wrong charge, you can add the correct charge by modifying the documentation.
1. Locate your note.
2. Open the note and select **Modify**.
3. Add an addendum to the note describing the reason to modify the charge.
4. Sign the note.
5. On the Hospital Charges window, add the correct charge.
6. Select the diagnosis.
7. Click **Submit**.