

**Visual RMS Resident Scheduling Module**

**VisRMS Resident Scheduling Module – Visits Quick Tracker**

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## Visual RMS Resident Scheduling Module

# Visits Quick Tracker Overview

The Visits Quick Tracker add-on to the Resident Scheduling module provides the therapy staff with a way to quickly do real-time data input of therapy visits. Having data entered at time of service allows for up-to-date information for tracking of therapy minutes.

NOTE: DO NOT enter Maintenance Therapy using the Quick Tracker option.

NOTE: Editing or deleting visits entered through Quick Tracker must be accomplished under the Resident Scheduling Program.

## Set Up Information

In order to use this option, set-up for OT, PT and ST must be completed (See the *Clinician Scheduling Module* documentation for set-up help.) The following items must be addressed:

- \* HCPCS must be set-up for each Discipline and Prices added if the information is used for billing.
- \* G Codes – Non-Billable codes must be set up and priced at .01.
- \* Billing codes must be set-up.
- \* Clinicians need to be maintained if the clinicians providing the therapy will be tracked in the system.
- \* If reasons for therapy absences are to be tracked, they must first be input into the system.

The Visits Quick Tracker screen is selected from the CLINICIAN/OTHER menu. The screen is used to both set-up and input of therapy data for a resident. When the option is selected, the Visits Quick Tracker screen will display defaulted to the PT data of the resident who is alphabetically first in your facility.

NOTE: The Visits Quick Tracker screen is designed to be run on a touch screen monitor but also can be controlled by keyboard and mouse. In the documentation, the word “click” refers to either a mouse click or finger touch.

|      |       | Wed 2 | Thu 3 | Fri 4 | Sat 5 | Sun 6 | Mon 7 | Tue 8 | Wed 9 | Thu 10 | Fri 11 | Sat 12 | Sun 13 | Mon 14 | Tue 15 |
|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------|--------|--------|--------|--------|--------|
| ICD9 | HCPCS |       |       |       |       |       |       |       |       |        |        |        |        |        |        |

## Changing the Therapy Type

By default, PT is the selected therapy type. To change the therapy input type, click on the pull down arrow next to the PT display and then click on OT or ST to change to those therapy types.

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### Selecting a Resident

To select a new resident, click on the name displayed and a new screen will appear. Click on the letters in the keyboard to start spelling the last name of the resident. As each letter is clicked, it will display in the yellow box (“LAN” in figure below) and the scroll window will change to display the first match to the letters being entered (scrolled to Lane). When the correct resident’s name is highlighted, click on the **Press Here to Select Resident** button located in the bottom right corner.

| Last Name | First     | MI | Med Rec # |
|-----------|-----------|----|-----------|
| KORN      | PEITER    | W  | 88383838  |
| LANE      | PENNY     | C  | LAN1234   |
| LARNIN    | PHILOMENA | W  | 055541233 |
| LAST      | FIRST     | M  | 756473893 |
| LION      | LEE       | O  | 987985    |
| MADISON   | DOLLY     |    | MAD933    |

↑

↓

Cancel

LAN

1 2 3 4 5 6 7 8 9 0

Q W E R T Y U I O P

A S D F G H J K L

Clear Z X C V B N M

Backspace Space . First Name

Press Here To Select Resident

This screen will recognize both touching/clicking the letters/buttons directly on the screen and letters directly typed on a keyboard. If the resident is displayed in the list but not yet highlighted, you can manually click on the name without typing to highlight the record. The arrow keys can also be used to move the highlight to the next record. The **Clear** button cancels all typing done and returns the list to the first person. The **Backspace** button will remove the last letter input.

### Select the Date

The screen will default to displaying the current date plus the past 13 days. If you are entering data for a day that is not displayed, click the **Select a Date** button and enter the date. The screen will change to display that date as the last day on the screen plus the 13 prior days.

### Calendar Grid

The calendar grid in the middle of the screen is where the visit data is input. If this is the first time a resident has been seen for therapy or they are being seen for a second time, the therapy session information needs to be defined, i.e., the HCPC codes to be given and the ICD-9’s (reason for therapy) must be input prior to checking off the visits. See [Therapy Sessions Set-up](#) below for instructions on how to define a session.

The boxes of the grid are where the data for the visits will be input. Touching on a box corresponding where a HCPC and Day meet, will bring up the data input screen for that HCPC for a visit on the Day selected. See [Entering Visit Data](#) below for full instructions on this process.

## Visual RMS Resident Scheduling Module

### Print Button

Clicking on the Print button will produce a matrix report for the current resident for the current discipline for the current month.

### Other Buttons on the Quick Tracker Screen

The other buttons that exist on the Quick Tracker Screen that are not used that frequently are defined below.

### Sleep

The Sleep button is used to cover up the Visits screen to protect patient data. There is no need to close down Quick Tracker when you are done inputting data. Simply click the **Sleep** button and the data will be blocked from view. Click the **Click or Tap Here to Resume** button to “uncover” the data.

### Add HCPCS

This button will allow you to add a HCPCS to the list for the therapy session however, therapy session should be defined using the **Setup** button. Please see *Therapy Sessions Set-up* below for full instructions. If you do use this button, you will be asked to pick the code from available codes for the discipline and to pick an ICD-9 code as described below.

### ICD-9's

The ICD-9's button is used to create a second HCPC session with a different ICD-9 code. First, click on one of the HCPCS already defined for the resident. Click the **ICD-9's** button and the ICD-9 search screen will display. Choose the ICD-9 and then a new line will be created with the HCPC and ICD-9 selected.

### Cancel

The Cancel button is used to wipe-out data input since the screen was entered. For example, data was just entered for a visit but it was put on the wrong day. Click on the **Cancel** button and that visit will be removed along with any other data that has been entered since the screen was entered. Note: If you enter data and then click on any of the buttons (Setup, Print, Add HCPC, etc.) all data is saved before the button action is done. So if you entered data, clicked on **Print** and noticed the data was wrong, you cannot cancel that data since it was saved prior to doing the print. You would have to exit Quick Tracker and then manually delete or correct the in invalid data.

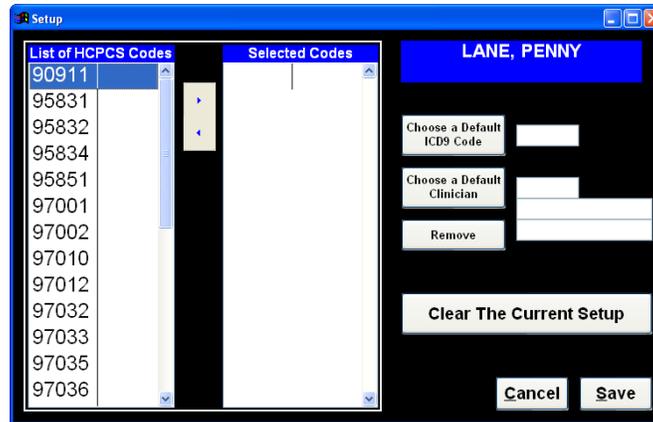
## Therapy Sessions Set-up

After a resident has been selected, the current therapy set-up for the discipline will display. If the resident has not had therapy before, this screen will be blank. If the resident had restorative therapy in the past, the HCPCS associated with that protocol will display. If the resident is currently having therapy, any visit data that exists will display. To set-up new sessions, remove old sessions or modify the current session, click on the **Setup** button.

### The Setup Screen

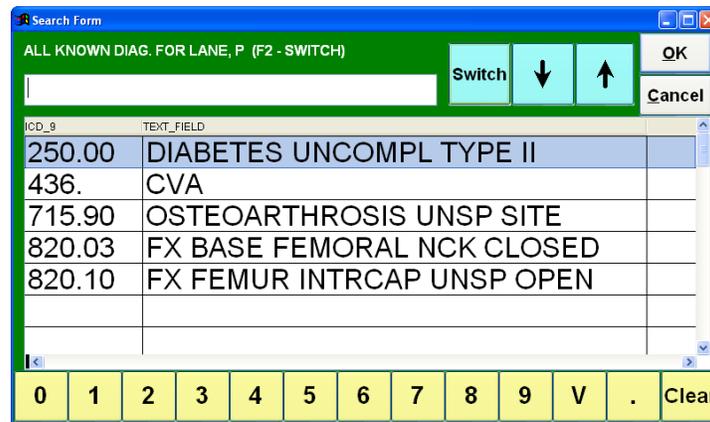
The Setup Screen controls adding or editing the protocol for the current therapy session. The screen will display the current setup if one exists. To clear this setup, press the **Clear the Current Setup** button. Now the screen will be ready to input the information for the new therapy session.

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### ICD-9 Code

Although an ICD-9 code is not required for the system to work, it is usually required by Medicare that a therapy Diagnoses be included on the Medicare Claim. To select an ICD-9 code that supports the therapy the resident will be having, click on the **Choose a Default ICD-9 Code** button. The screen will display the current ICD-9 codes entered for the resident. If the correct diagnosis is on the screen, click on the diagnosis and then click **OK**.



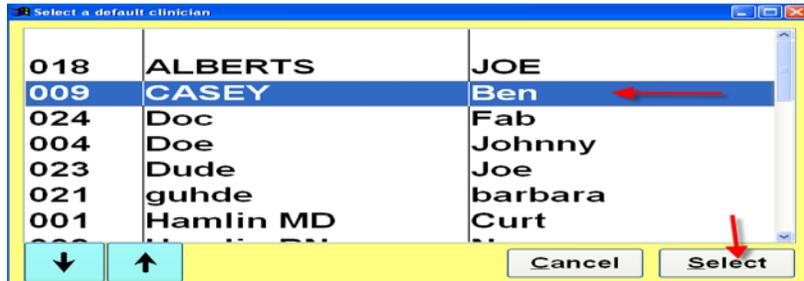
Usually, the therapy diagnosis will not be listed. Hitting the **Switch** button will change the display to all diagnosis ever assigned to the resident. If the diagnosis is not there either, click the **Switch** button again and the full list of all ICD-9 codes will display. Start entering the numbers of the code and the screen will change to display matches of the entry. When the correct code is found and highlighted, click on the **OK** button to return.

**NOTE:** Normally the user will assign an ICD-9 code as a default code to be used for all HCPCs entered for a specific discipline and this ICD-9 will be used on the Medicare claim to support that therapy.

## Visual RMS Resident Scheduling Module

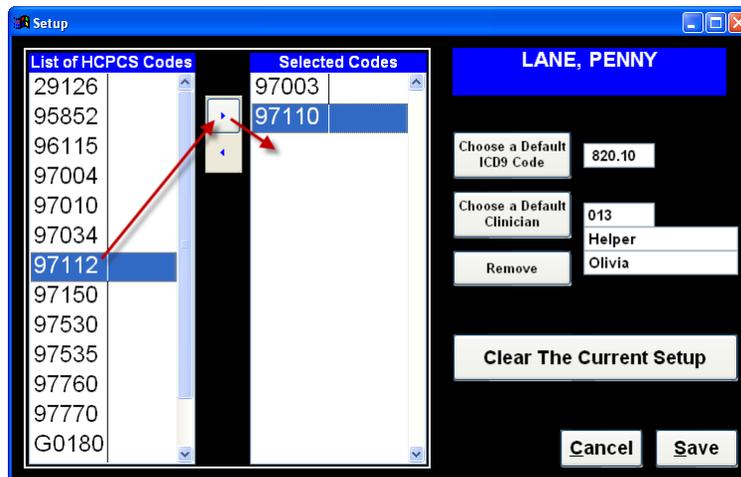
### Therapist

Although it is *not necessary* for billing purposes, if you want to assign a particular therapist to the resident, click on the **Choose a Default Clinician** button. A list of clinicians available for the therapy type chosen will display. Use the arrow buttons or scroll bar to change the display. Click on the name of the correct clinician and then click on the **Select** button. The name will display on the Setup Screen. This may be changed at the time of “check off.”



### HCPC Codes

In the left column of the Setup screen, you will see a list of available HCPC codes for the therapy type selected, in the example below those available for OT. You should also see the related G-codes. Click on the HCPCs needed in the left column and then click on the “>” button to move them to the right. You should include all HCPCS and G-codes that may possibly be provided to the resident. *See screen below.*



When the ICD-9 code, the HCPCS codes and the Clinician (if used) have been entered, click the **Save** button.

## Entering Visit Data

Once a resident's session info has been set-up, entering data for the therapies that have been administered during a visit is a very quick process. First select the correct type of therapy (PT, OT, or ST), the correct resident, and a therapist, if desired. The therapy session setup (HCPCS selected) display down the left side of the grid with the days across the top. To input a visit, in the row for the HCPC given click on the box in the correct column for the day given and the Visits Detail screen will display for input of visit data.

### The Visits Detail Screen

When a box on the grid is clicked, the Visits Detail screen appears. See figure below.

The screenshot shows a software interface with a grid of days (Tue, Wed, Thu, Fri, Sat, Sun) and a list of HCPCS codes on the left. A red box highlights the cell for HCPCS 97116 on Wednesday. A pop-up window titled 'AURITT, JON' is overlaid on the grid. The window contains the following fields:

- DATE: 02/05/2013
- HCPCS: 97116
- Last Eval: 01/11/2013
- ICD9: 823.01
- Onset Date: 01/11/2013
- Units: 0
- Ind. Minutes: 0
- Con. Minutes: 0
- Visit #: 1
- Buttons: Cancel, OK
- Fields: KX Code, 59 Code, Short Term

The grid shows visit counts for each day: Wed (7, 8, 9), Thu (4, 5, 6), Fri (1, 2, 3), Sat (0), and Sun (0).

### Entering Data for an OT, PT, or ST Evaluation

In the correct row for the Evaluation HCPC, click on the box in column for the correct day. For example, in the figure above, the eval (HCPC 97003) was given on Monday, March 7<sup>th</sup>. When the box is clicked, it will turn red and the Visit Detail screen will appear waiting for input of the visit details.

### Onset Date

The Onset Date is very important. The system will default to the current date. If this is not the correct date, click on the "Onset Date" field and enter the date.

### Units

Enter the number of units of therapy received. Remember that an EVAL is always **ONE UNIT**.

### Minutes

Enter the correct number of individual minutes received during the evaluation.

### Visit #

The default is visit #1 since the evaluation should be the first visit for the resident.

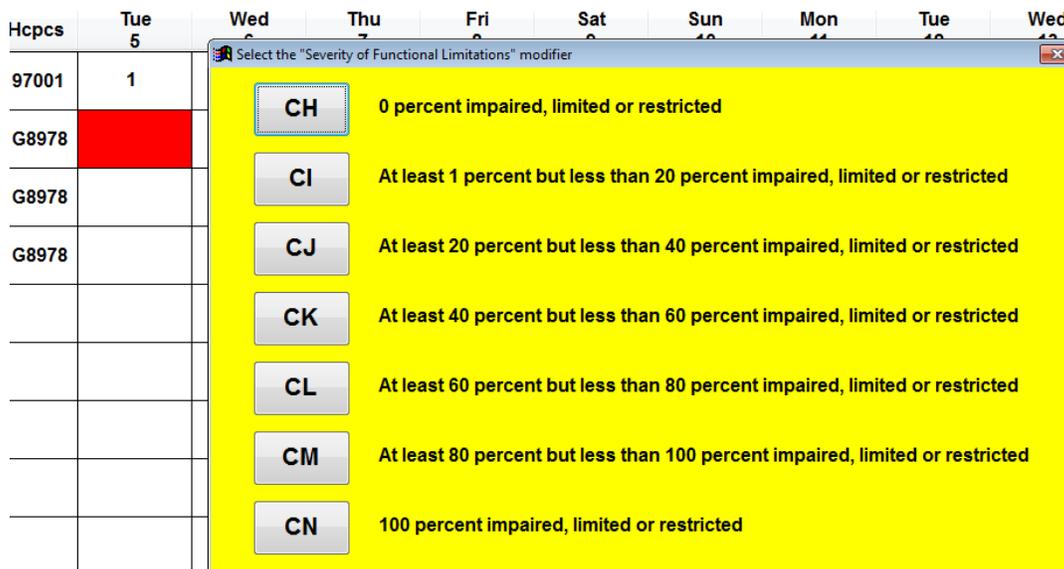
Click **OK** when the data is correct.

## Visual RMS Resident Scheduling Module

### Entering the G Codes and Severity Codes

The G Codes must be set up under Maintain HCPCS/CPT-4 Codes under UTILITIES. G codes must be designated by discipline and must indicate a cost or .01. (Required on the UB-04)

When a G Code cell is selected, a screen containing the Severity Codes comes up. Click on the appropriate code.



### Entering Treatments

Once the Evaluation with its ICD-9 Code and ONSET DATE has been entered, treatments are entered in the same manner as above with the following caveats:

#### Onset Date

The Onset Date should have been set when the evaluation information was entered. You cannot change this date.

#### Units

Enter the total number of units administered for this HCPC.

#### Minutes

The total number of minutes must be divided as to type: Individual minutes, Concurrent minutes, or Group minutes (if a group HCPC is chosen.) Enter the correct number of minutes for each type.

#### Visit #

It is assumed that if no visits have been previously entered on a given day, the Visit number is defaulted to 1. If an Eval HCPC has been entered that day, the Visit number will be defaulted to 2 automatically. If data has already been entered for the HCPC, the visit number will default to 2. NOTE: If you are entering data for a second visit on a given day but the HCPC chosen was not administered in visit1, the default will be visit 1. You must remember to change the visit number to 2.

## Visual RMS Resident Scheduling Module

### KX and 59 Code Modifiers:

If the treatment requires a modifier, select the modifier at the time you indicate the units and minutes. If you need to add the modifier at a later date, you may do so through Resident Modalities.

The screenshot shows a software interface for scheduling a visit. The patient's name is AURITT, JON. The form contains the following data: DATE: 02/05/2013, HCPCS: 97116, Last Eval: 01/11/2013, ICD9: 823.01, Onset Date: 01/11/2013. There are input fields for Units (0), Ind. Minutes (0), Con. Minutes (0), and Visit # (1). A numeric keypad is present on the right side. At the bottom, there are buttons for 'Cancel', 'OK', 'KX Code', '59 Code', and 'Short Term'. The 'KX Code' and '59 Code' buttons are circled in red.

*Screen has been enhanced for inclusion of KX and 59 modifiers*

### Entering Treatments on the Same Day as the Evaluation

Each and every treatment (HCPCS) given on the same day as the EVAL must be marked as VISIT #2. The Visit Detail screen should open with the “Visits” field marked with a two (2) already. If a resident has an evaluation and treatments in the morning and then another therapy session in the afternoon, that afternoon visit would be visit #3. For this example:

- Eval should be VISIT #1
- Treatments(HCPCS) given immediately after the Eval need to be marked as VISIT #2
- Treatments given in the afternoon would be marked as VISIT #3

### Default Clinician Issues

If a default Clinician has been assigned, the name will appear in the Clinician box each time the Main Visit Screen is entered. All visits entered will be written as completed by that Clinician. If the default is blank, then no tracking of clinicians will be done.

Clinician tracking can also be done on a visit by visit basis, whether or not a default has been chosen. On the Main Visit screen, click on the “Clinician” field and a list of all possible clinicians for the discipline will appear. **YOU MUST SELECT THE CLINICIAN BEFORE YOU ENTER THE UNITS AND MINUTES AND VISIT NUMBER.** Click on the name of the clinician for this visit. All visit minutes entered at this time will be written with the name of the clinician selected attached to them. **Note:** Changing the clinician on the Main Visit screen does not change the default Clinician setting. Next time this resident is brought into the Main Visit screen, the default clinician will be displayed again.

## Visual RMS Resident Scheduling Module

### Cancellations/Excuses

Sometimes a resident scheduled for therapy does not attend. If you wish to track reasons for therapy absence in the system, you may do so. Please remember that this information may be important for the therapy office but it is not necessary for billing.

To track or enter an excuse for a resident who did not attend therapy, do the following:

1. Click on one HCPCS on the date the resident was to have been at therapy. The Visit Detail input screen will come up.
2. Select the **Excused Visit** button.
3. A list of possible reasons for absence will come up on the screen. (See Sample screen below.) Select the reason and click the **OK** button on the REASON window.

You will be returned to the calendar screen and all items for the day will be marked in green. Please note that it is possible to enter HCPCS for a morning visit and indicate that an afternoon visit has been cancelled. Likewise, it is possible to indicate a reason that a morning visit was cancelled and the resident was given therapy in the afternoon. The screen below shows that the resident had a therapy on a specific day and also had a cancelled visit on the same day.

| Enter Therapies |       | OT Helper |        | LANE, PENNY |        | Select a Date |        |        |        |        |        |
|-----------------|-------|-----------|--------|-------------|--------|---------------|--------|--------|--------|--------|--------|
| Print           |       | MARCH     |        |             |        |               |        |        |        |        |        |
| ICD 9           | HCPCS | Thu 10    | Fri 11 | Sat 12      | Sun 13 | Mon 14        | Tue 15 | Wed 16 | Thu 17 | Fri 18 | Sat 19 |
| 820.10          | 97003 | 1         |        |             |        |               |        |        |        |        |        |
| 820.10          | 97110 |           | 1      |             |        |               |        |        |        |        |        |
| 820.10          | 97112 |           | 1      |             |        |               |        |        |        |        |        |
| 820.10          | 97150 |           | 0      |             |        |               |        |        |        |        |        |
| 820.10          | 97530 |           |        |             |        |               |        |        |        |        |        |

Therapies entered during visit 1

Visit 2 was cancelled



## Visual RMS Resident Scheduling Module

Code: 92507 Individual Minutes: 32  
Units: 2 Concurrent Minutes: 0  
Onset: 01/15/2013  
Description: Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual  
Severity Code:  59 Code  KX Code  Short Term?

*Units:* Enter the number of units provided during this visit. If this code will not be used for billing purposes, enter “0” for units and the number of minutes will not count for billing. If this is for a G-code, then the number of units **MUST** be 1 even though you will not assign any minutes. This data is required for including G-codes on your billing.

*Individual and Concurrent Minutes:* Minutes must be broken up between minutes spent one-on-one with the resident (“Individual”) and minutes that the therapist was working with other residents as well (“Concurrent”). Enter the appropriate number of minutes in each field.

*Additional Codes:* If this procedure code requires recognition of the **59** and/or **KX** codes, then check the corresponding boxes. If this is information for a G-code, then you will use the drop down arrow to select the correct **Severity Code** at the very bottom of the window.

When complete, click on **OK**. If more than one code was selected, this screen will reappear for the next code. Otherwise you will be returned to the HPCPS screen. Use the **EDIT** or **DELETE** buttons to make any corrections. Click on **OK** when finished.

## Reports

There are many reports in the Resident Scheduling module, however, only those reports relevant to the Quick Tracker program have been highlighted here. See the *Clinician Scheduling Manual* for a complete list of reports.

## Visual RMS Resident Scheduling Module

### Therapy Visits

This option produces a Matrix Report for the month and discipline selected. It can be produced for all residents or for a single resident. This is the same report that is produced via the PRINT button on the Visits Detail screen.

### Ancillary Log

The Ancillary Log is useful for tracking OT, PT, and ST visits. The data for the report will be provided for a time frame between two user specified dates. Data may be selected for a single individual, a single therapy or all residents and all disciplines. This report does not include HCPCS data. If using the CHECK OFF menu option, make sure you enter a D Code if the visit is either Restorative or Billable Maintenances. Only visits with D Codes appear on the Log.

### Discipline Tracking

Provides reporting between any two user selected dates for individual disciplines checked off visits or for all disciplines all checked off visits. On the configuration screen, specify a start and end date for the report. Enter "A" in the "All Disciplines or an Individual" field to get reports for each of the disciplines. Enter an "I" at that field and a report for the individual discipline you choose will be produced. Enter "Y" or "N" in the "Sort by Clinician" field if you want records grouped by clinician. Enter "Y" in the "Separate by Clinician" field if you want a separate report for each clinician in each discipline, otherwise enter "N". Enter a "Y" in the "Print Totals" field for a tally of both daily and report minute totals.

Included on the report are Date of Visit, Resident Name, Length of Visit, Number of HCPCS units, number of HCPCS minutes, Code for Visit, Clinician Name, Cancellation Reason. This report will include all visits "Checked Off" or entered under "Unscheduled Visits" for any discipline including therapy visits which have D Codes, visits which do not have D Codes, and visits which have been canceled.

### Cancellations

This report provides data on all cancellations between two user defined dates for a discipline or all disciplines. It can be run for a single resident or all residents.

### Individual Modalities

This is a useful report to help track therapy between two user defined dates for one or more residents. The report shows Dates of Service, HCPCS, Units and Minutes. Dollar values can be added to the report to assist in tracking when yearly therapy caps have been met. If the report is run for a seven day period, an attempt is made to calculate RUG IV values to help track therapy minutes for MDS 3.0.

### Modality Totals

This report can be run on HCPCS or Modalities and will produce a grid showing the number of times for each HCPCS or modality for each day in a specific month with monthly totals.

### Monthly Summary

This report provides summary information by Resident, by Payor Source, divided by Maintenance and restorative. Columns across the report will show: How many Restorative OT, PT and ST Evals and Visits and how many Maintenance OT, PT and ST Evals and Visits.

Columns Down: Medicare, Medicaid, Other, Unknown, Total

## Visual RMS Resident Scheduling Module

Columns Across: OT, PT, ST and under each Restorative, Maintenance, Total

- The **EVAL** column provides the total number of Evaluations
- The **INDIV** column shows the number of residents who have had either Evals or Treatments.  
If the individual has had both an eval and treatment, the individual IS NOT counted twice.
- The **VISITS** column shows the total number of VISITS including Evals.
- The **PROC** column shows the total number of procedures excluding Evals.

*Please note: If your therapy department does an Eval and a treat in the same visit, the system is unable to correctly count. However, if evals and treatments are entered as separate records just subtract the evals from the visit to get the number of treatment visits.*