

# EHR CONCEPTS

healthcare IT made simple.

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## Newsletter Archive

For a complete listing of previous newsletter editions, please visit us at [www.ehrconcepts.com](http://www.ehrconcepts.com).



Dear Readers,

October is quickly approaching and that means fall is in the air, leaves are turning and it is go time for Meaningful Use! With the start of the last reporting period of the year, clients nationwide are working hard to achieve MU and prep for their attestations, and we are here to help!

We have hosted a few MU webinars, as well as assisted several organizations get prepared by doing system config, testing, report validation, workflow design, and MU education and planning. If your organization has any MU questions, feel free to email us at any time. Our goal at EHR Concepts is to help client's ensure they are fully equipped to meet all necessary requirements.

Thank you so much for being a part of EHR Concepts community and reading our newsletter!

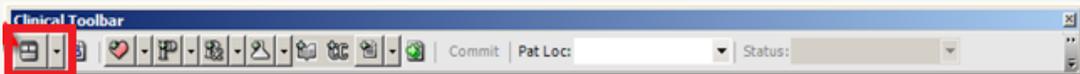
- April Cleek, President & CEO

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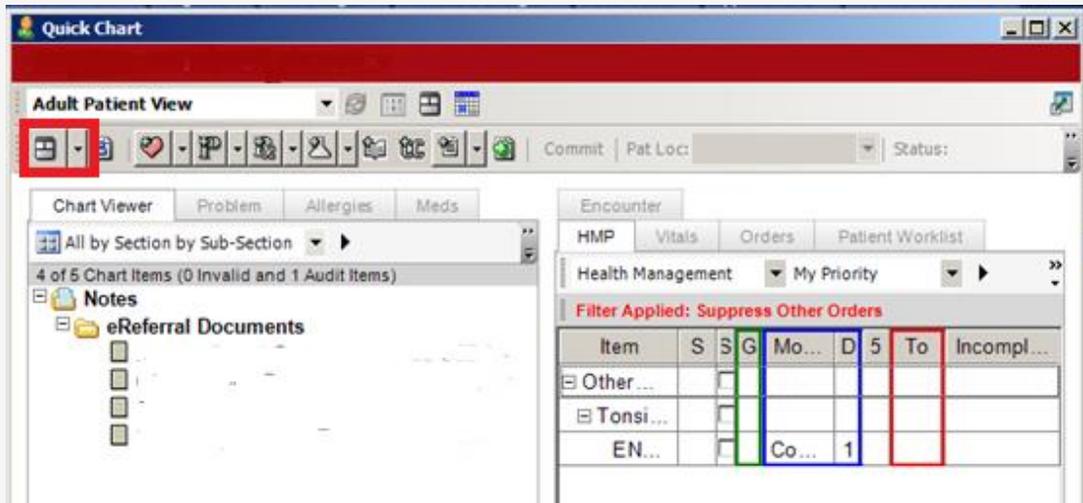
# TouchWorks Tip: Reducing Clicks with Quickchart

Many front end users are still unaware of a convenient little icon called **Quickchart**. The **Quickchart** icon is available in most places a front end user works within the application, and enables users to view nearly everything they would find in the full clinical desktop *without* leaving the place they are currently working. This is a huge timesaver when you are halfway through working a task and realize you need to reference something within the patient's chart. Many users will "X" out of whatever they are doing, go into the clinical desktop, find what they need, and then start over on what they had previously been working on. Sound like you?

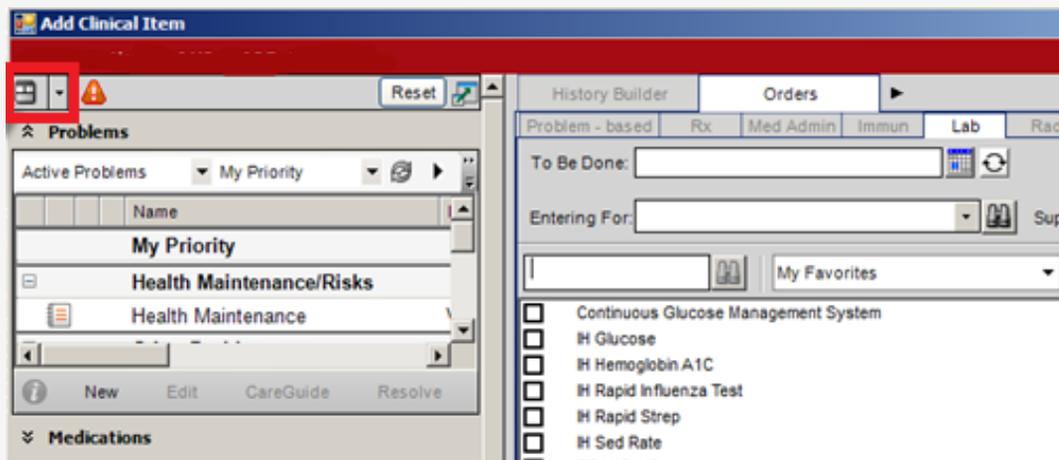
The first place you'll see the **Quickchart** icon, most likely, is on the Clinical Toolbar.



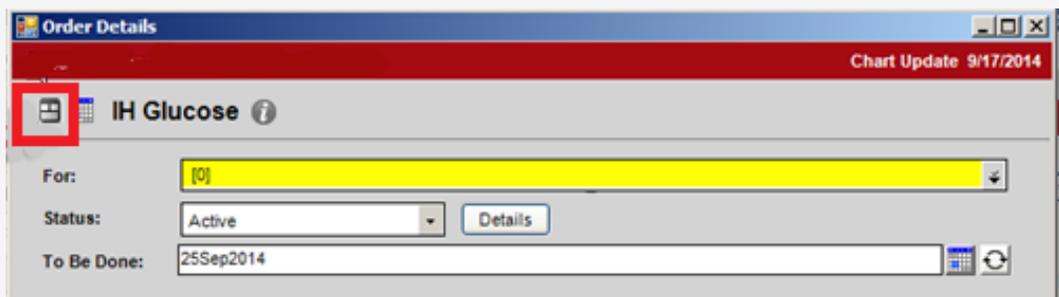
When you click the icon, the patient's chart will open in a smaller window, allowing you to view meds, read notes, see what labs were ordered, and so forth.



When you're finished in the **Quickchart**, simply "X" out of it, and return to the exact place you were working previously. Once you are aware of this functionality, you'll notice that this icon is available all over the application. Within the ACL...



When you are halfway through an order...



And even from Call Processing.



Look for the **Quickchart** in your system and see if it reduces your clicks!

## PM Tip: Scheduling Options

Scheduling options may be saved as a default to save time and clicks when looking at the schedule and scheduling an appointment. To do so, click the **Tools** menu from the toolbar and select **Options** from the menu. Set the **Scheduling Department**, **Scheduling Location**, **Resource**, and **Coverage Type** from the dropdown fields. Then press OK. Each end user may set his or her defaults. If an end user works at multiple sites, it is important to set defaults at each new site.

## Meaningful Use Tip: CPOE

Allscripts offers TouchWorks clients two reporting options for CPOE, license-based and security-based. Since many unlicensed users need the ability to edit an order, (e.g. financial auth, scheduling) or enter vitals, etc., it is not feasible to remove "order-edit" security from all team members for CPOE purposes. This leaves the client in a bit of an "honor system" situation if using the security-based report. Clients have the option of limiting the report to only include med, lab and rad orders in the numerator if they are entered by a user with a license entered in TW User Admin. Which is best for you? There are a lot details to think through with either option, and one of our MU experts would be happy to help you work through this, and any other MU related needs you might have!

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## New Rule for MU: A Little Relief

As you all are probably well aware, CMS has finalized a new rule that has brought a little relief to clients scrambling to report on Stage 2 Meaningful Use. The rule has provided flexibility on the measures that an EP can attest with, based on which CEHRT they have implemented. Most Allscripts clients have already upgraded to 2014 Edition CEHRT, meaning that they will now have the option to report using 2014 Stage 1 criteria OR Stage 2 criteria for 2014. Clients can only report with Stage 1 2014 criteria if they have been unable to fully implement 2014 CEHRT, which could include the inability to fully train staff and implement new workflows. There is also one specific circumstance that allows you to use Stage 1 2014 measures, which is if you cannot meet Core 15 (Summary of Care for TOC,) due to insufficient referral network participation (meaning not enough of the providers you refer to are equipped with Direct IDs and able to receive SOC's electronically.) There is a great deal more detail to the final rule, and many clients will qualify to use 2014 Stage 1 criteria. If you would like one of our MU experts to work with your organization to see how the rule applies to you, please let us know and we will be happy to help you navigate your options and come up with a plan of action.