Trinity Health — EpicCareLink

Placing Orders & ABNs

Place a new order

1. **Select the Patient tab and click Order Entry.**
2. **Select a patient to place an order on.**
3. **Select an ordering clinic and authorizing provider and click ✔ Accept.**
4. **Click ≣ Preference List to see a list of available orders.**
5. **Select the check box next to each order that you want to place. Use the subsections in the left pane to filter orders by type.**
6. **Click ✔ Accept Orders to review a list of your orders and make any necessary changes before signing them**
7. **If there's a required (🛑) or recommended (⚠️) icon next to an order, you can enter more information. Click an order's name to edit details like quantity or associated diagnoses.**
   - For a procedure order, you can attach a file, such as a scanned image, to the order.
   - To associate a diagnosis with a single order, either select the check box for a recent diagnosis in the **Dx Association** section or enter a new diagnosis in the **Add a new diagnosis** field and press **Enter.**
8. **Accept and sign the orders.**
9. **If there's decision support associated with any of the orders, select a follow-up action and click ✔ Accept.**
10. **Enter your password if prompted and click ✔ Accept.**

NOTE: If you already know the name of the order in EpicCare Link, you can search for it in the "New Procedure" field.

NOTE: Enter a partial word in a field instead of a whole word to reduce the amount of time you spend typing. For example, entering gluc in the "New procedure" field in Order Entry shows you all of the procedures beginning with gluc. You can use this shortcut for any information that is stored in the database, such as procedures and other providers' names.

Associating diagnoses for multiple orders

You can:

- Associate all the patient's orders with all the patient's diagnoses by clicking ☑ Associate All on the Diagnosis Associate page.
- Manually associate orders and diagnoses by selecting the appropriate check boxes.
- Select a problem from the Quick Picks list, which includes the patient's problems and recently-used diagnoses and click the left arrow (⬅) icon to add the problem as a diagnosis for the encounter.
- Remove a diagnosis from the Diagnoses list by selecting the diagnosis and clicking the delete the selected diagnosis (➖) icon.

Advance Beneficiary Notices (ABNs) in EpicCare Link

Decision support is available via EpicCare Link, and a portion of that is Advance Beneficiary Notices (ABNs). Centers for Medicare and Medicaid (CMS) requires providers to inform patients when Medicare does not cover a procedure because it is not considered medically necessary by CMS definition.
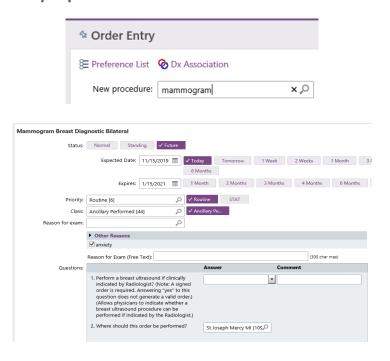
The Advance Beneficiary Notice of Noncoverage (ABN) form includes the services that are not covered, the reason, and the estimated cost of the items/services. This process helps the patient understand what care is recommended, whether to get the care in question and to accept financial responsibility for the service (pay for the service out-of-pocket) if Medicare will not cover payment.

The ABN status field is a mandatory field, which will ensure that all downstream workflows will see an accurate ABN status.
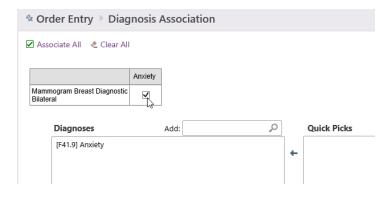
Order Validation

The ABN is triggered real-time when Medicare Guidelines do not support a service for the associated diagnosis.

1. Place the order and fill out any required fields.

2. Associate order to diagnosis.

3. **Sign the order. At this time, the LCD (Local Coverage Data) file will be referenced to evaluate the order and diagnosis association.**

4. **An ABN alert will appear if Medicare does not cover a procedure because it's not considered medically necessary by CMS definition.**

5. **Evaluate if there is an alternate medically appropriate diagnosis. If so, Go Back and adjust the diagnosis.**

6. **Waiver Form: This option is appropriate if it is expected that the patient's diagnosis will not be covered per Medicare's LCD. Selecting this button will display the ABN with the estimated cost of the test (Referencing Local RHM Fee Schedule). Discuss the ABN and the available options with the patient.**

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7. Notice Status Options: After a provider discusses an ABN form with the patient, document the ABN status/ patient response by choosing the appropriate Notice Status. (Options explained in chart below)

- An ABN status belongs to one of three categories:
  - An *initial status* indicates that the ABN has not yet been presented or discussed with the patient.
  - An *intermediate ABN status* indicates that something has been done with the ABN, but that a final disposition has not yet been documented.
  - A *final status* indicates that a choice has been made by the patient and the ABN has been finalized. Choosing an option with a final status will clear the ABN warning. Clinicians cannot edit an ABN after it has been assigned a final status. Do not select a final
- It is expected that the ABN Notice Status will change one or more times throughout the process of issuing the patient an ABN. The warning will not be satisfied until one of the final statuses is selected.
- Before choosing a final status, the patient must have been given the opportunity to review the form and all options must have been explained to them. Only after the patient chooses how they would like to proceed and signs the ABN (if applicable) should the final status be selected.
- IMPORTANT NOTE: All completed ABNs must be filed into the patient's chart.
- As an EpicCare Link user, you should only select the **EpicCare Link Order** status below, as the pricing will not be accurate until it is regenerated at the place of service. However, the discussion about the medical necessity of the procedure should be discussed during placement.

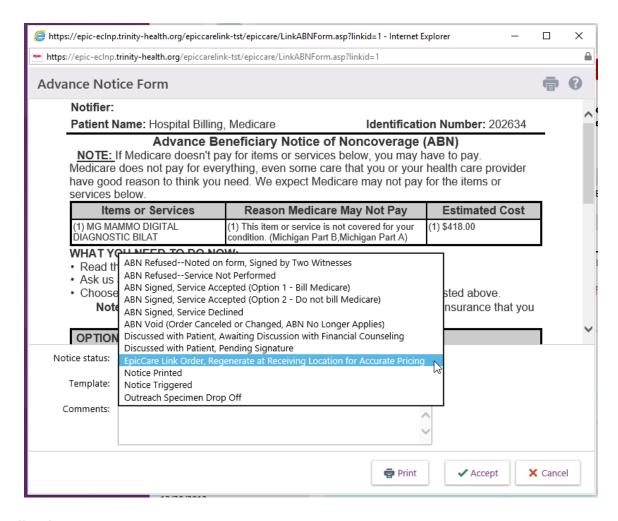| Notice Status	Category	Description
Notice Triggered	Initial	This status is automatically assigned to new ABN forms.
Notice Printed	Initial/ Intermediate	This status is automatically assigned to an ABN record when the ABN is printed. In practice, "ABN Printed" can function as either an initial or an intermediate status, because staff can print a copy of the ABN before or after presenting the form to the patient.
EpicCare Link Order, Regenerate at Receiving Location for Accurate Pricing	Intermediate	For EpicCare Link providers only. Choose to indicate the EpicCare Link provider discussed the ABN with the patient, and the patient agrees to proceed. ABN status will alert downstream departments to regenerate the ABN to ensure the most accurate price is reflected.
Discussed with Patient, Pending Signature	*Intermediate*	***Trinity Health providers only -*** *Choose to indicate the provider discussed the ABN with the patient, but would like the front desk to print the ABN and obtain the signature—bypasses warning and passes the warning on to the scheduler.*
Discussed with Patient, Awaiting Discussion with Financial Counseling	*Intermediate*	***Trinity Health providers only -*** *Choose to indicate the provider discussed the ABN with the patient, and the patient would like to discuss options regarding financial counseling.*

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ABN Signed, Service Accepted (Option 1 – Bill Medicare)	*Final*	***Trinity Health providers only -*** *Choose to indicate that a patient chose Option 1 and signed the ABN (i.e., wants to receive the service, and agrees to be financially responsible for the service if Medicare does not pay.)*
ABN Signed, Service Accepted (Option 2 – Do not bill Medicare)	*Final*	***Trinity Health providers only -*** *Select to indicate that a patient chose Option 2 and signed the ABN (i.e., wants to receive the service, agrees to be financially responsible for the service, and requests that we not bill Medicare.)*
ABN Signed, Service Declined	*Final*	***Trinity Health providers only -*** *Choose to indicate that a patient chose Option 3 and signed the ABN indicating they do not want to receive the service. Cancel the order if the service will not be performed, however the physician believes it is important to proceed with the service the order is not cancelled. The patient cannot be billed if Medicare does not pay.*
ABN Refused— Noted on form Signed by Two Witnesses	*Final*	***Trinity Health providers only -*** *Select when all the following conditions are true:* 1. *The patient has refused to sign the form yet requests or demands the service, and* 2. *A staff member from the organization has written a note on the form stating that the patient has refused to sign but wants the service, and* 3. *Two witnesses have signed the note on the form.* *(Medicare regulations consider such a form to be valid and permit the organization to bill the patient.)*
ABN Refused—Service Not Performed	*Final*	***Trinity Health providers only -*** *Choose to indicate that the patient refused to sign the form and declined the service, so it was not performed. The order should be cancelled.*
ABN Void (Order Canceled or Changed, ABN No Longer Applies)	*Final*	***Trinity Health providers only -*** *In some scenarios, an ABN form becomes unnecessary. For example, a clinician might order a service and then realize she entered the incorrect diagnosis. After the clinician enters the correct diagnosis, the ABN is no longer necessary if it passes medical necessity checks. Because the ABN record has already been created, the final status of ABN Void ⬚Order Canceled or Changed, ABN No Longer Applies⬚ enables users to indicate that the form is no longer necessary.*
Outreach Specimen Drop Off	*Final*	***Trinity Health providers only -*** *Select to indicate there is an outreach specimen that has been dropped off to the lab for processing that flagged for an ABN.*

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ABN Finalization

The ABN status field is a mandatory field, which will ensure that all downstream workflows will see an accurate ABN status.

There are checkpoints to ensure completion prior to the point of service for the patient. The ABN warnings will continue to appear until the Notice Status category is final.

Cancel a signed order

1. **Select the Patient tab and click Order Review.**
2. **Select and cancel the order.**
3. **Enter a reason for canceling and click ✔ Accept.**