

BUSINESS ISSUES

Absence from East Des Moines

In the absence of a resident or faculty member, primarily residents in the same office see that physician's patients. If they are not available, then residents or faculty in the same hallway will see the patient. If they are not available, then a resident or faculty member from the same side of the office will see the patient. If nothing is available, Noelle Mundt, ARNP will see patient as schedule allows.

Convenient Care Clinic

A Convenient Care Clinic is held Monday through Friday from 5 to 7 p.m., and Saturday from 8 a.m. to noon. The convenient care clinic sees all patients who walk in during the scheduled hours. One resident physician in a moonlighting opportunity staffs the Convenient Care Clinic. A receptionist and one medical assistant is available as staff. The resident at the Convenient Care Clinic takes incoming telephone calls from patients. A faculty physician is available for back up.

When the clinic is closed, patient telephone calls are directed to the senior resident physician on call at Iowa Lutheran Hospital via the answering service.

Cash Only

A patient is required to pay at the time of service if they have no insurance or a commercial insurance with a carrier with whom we do not contract. If the patient is on a "cash basis only" due to a problem with their account, a financial counselor from the business office will arrange for a payment plan. LaClinica offers a sliding fee and patients will be charged per usual. FINA will apply at EDM in a similar relation as the sliding fee.

Collections

There is a copy of a comprehensive UnityPoint collection manual on the intranet.

Continuity of Care

If a physician has a regular patient and notes another physician's name is listed on the charge ticket/superbill he/she will make the correction on the charge ticket so the business office staff can update the information in the computer.

Failed and Canceled Appointments

See Failed Appointment Policy in clinic Policy & Procedure Manual.

Inpatient Care Billing

Notify the faculty on Family Medicine Inpatient (FMI) of all procedures, admissions, and visits performed on inpatients.

Insurance Forms

All of the information from the charge ticket is entered into the computer by the billing office staff. A bill for each visit is sent to the insurance company electronically. We file insurance claims for all insurance companies, however we only participate with a select group of insurance

companies. A list is available in the front office or in the business office. All claims are now sent electronically.

Late Patients

See Failed Appointment Policy in the clinic Policy & Procedure Manual.

Mailboxes

Each resident has a mailbox located across from the employee stairwell on the lower level. Mailboxes need to be checked on a regular basis.

Outpatient Care Billing

All residents will complete a charge ticket/superbill for every patient seen in the office. The appropriate level of service provided for the patient is to be marked along with any laboratory, x-ray, EKGs, etc., that were performed. The diagnosis for the visit is filled in at the bottom of the charge ticket and linked to each service/procedure with the appropriate diagnosis. It is important that the diagnosis written corresponds with the lab work ordered and that they match documentation on the progress note.

Diagnosis codes need to be specific, e.g., if the patient has diabetes, is it insulin dependent? If a patient has cellulitis, where? Was the CVA acute or the effects from an old CVA? If a patient has an adverse reaction to a drug, list the name of the drug.

When a patient has not yet been diagnosed, the symptoms are listed on the charge ticket. There are not codes for "rule out."

The billing specialists in the clinic business office review all superbills. If there are concerns that the chart documentation does not correspond to the coding, the resident will be contacted.

Patient Transfers

For continuity of care, it is best if the patients remain with the physician initially assigned as much as possible. In general, patient transfers within the clinic are discouraged. If a patient requests to transfer his/her care to another EDM physician, the assigned physician should reiterate the policy and inform the patient that the issue will be discussed with the requested physician. It is ultimately the patient's choice which physician they wish to see.

Photocopier

A photocopier and fax machine is available in each pod. Staff will be available to assist you with these.

Reassignment of Third Year Residents' Patients

Patients of graduating third-year residents will be transferred to incoming first year residents who will occupy the same office space, or, if applicable, to the second year resident in that office. The transfer follows a standard protocol. A patient list is generated for each graduating resident and is reviewed and revised by the administrative staff and the residents. This process is completed on or before completion of the outgoing resident's contractual obligations of the residency program.