



# EMR: Documenting a Follow Up Visit in RevFlow

## QuickTopic

This QuickTopic describes the tabs and fields clinicians report using the most often when documenting a follow up visit (“daily visit”) in RevFlow. Fields used in special circumstances are highlighted in yellow. Billing and charge capture requirements also are described. **All tabs and fields from the Initial Visit Note are available in all Follow Up visit note types for use as needed.**

### Commonly Used Clinical Data Fields

SOAP Note Element	EMR Tabs (1 <sup>st</sup> row tab > 2 <sup>nd</sup> row tab > 3 <sup>rd</sup> row tab)	Data Field Type(s)	Notes
<b>Subjective (S)</b>	<i>Subjective &gt; Patient Report</i>	<ul style="list-style-type: none"> <li>Text box</li> </ul>	<ul style="list-style-type: none"> <li>Used to document the patient’s response(s) to questions asked about his or her current status</li> </ul>
<b>Objective (O)</b>	<i>Interventions &gt; Interventions &gt; Any tab(s)</i>	<ul style="list-style-type: none"> <li>Table</li> </ul>	<ul style="list-style-type: none"> <li>Used to document treatments provided during the visit</li> <li>Information from the previous note will carry forward and can be left as is, edited, or marked “not done”</li> </ul>
<p><b>** INTERVENTION &gt; NOTES tab - fill in your TIME IN / TIME OUT in the Description Column, and note any Caregiver/Staff communication not otherwise noted in the Goals tab</b></p>			
<b>Assessment (A)</b>	<i>Evaluation &gt; Assessment</i>	<ul style="list-style-type: none"> <li>Text box</li> </ul>	<ul style="list-style-type: none"> <li>Used to document patient’s response to treatment to date or during the individual visit</li> </ul>
	<i>Evaluation &gt; Medicare Functional Reporting</i>	<ul style="list-style-type: none"> <li>Drop down menus</li> <li>Text box</li> </ul>	<ul style="list-style-type: none"> <li>Tab displays only when the patient’s insurance class is flagged based on the payer’s reporting rule</li> <li>Used to update the functional limitation status</li> </ul>
	<i>Evaluation &gt; Goals/Rehab Potential</i>	<ul style="list-style-type: none"> <li>Table</li> </ul>	<ul style="list-style-type: none"> <li>Used to comment on progress toward goals</li> </ul>
<b>Plan (P)</b>	<i>Treatment Plan &gt; Planned Interventions</i>	<ul style="list-style-type: none"> <li>Text box</li> </ul>	<ul style="list-style-type: none"> <li>Used to document intended treatment for the next visit</li> </ul>
<p><b>** WHEN you get a NEW PA in, please change your Treatment plan dates to match the PA.</b></p>			

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	<i>Treatment Plan &gt;</i> <b>PQRS</b>	<ul style="list-style-type: none"> <li>• Drop down menus</li> <li>• Radio buttons</li> <li>• Text boxes</li> </ul>	<ul style="list-style-type: none"> <li>• Tab displays only when patient's insurance class is flagged based on payer's reporting rule</li> <li>• Registry based measures for PT/OT; claims based measures for Speech                             <ul style="list-style-type: none"> <li>○ Reporting codes</li> <li>○ Required clinical data elements</li> </ul> </li> <li>• Reported ONLY if billing a supported procedure code for the visit (e.g., 97161, 97165, 92508)</li> </ul>

## Billing for the Visit

EMR Tabs (1 <sup>st</sup> row tab > 2 <sup>nd</sup> row tab > 3 <sup>rd</sup> row tab)	Data Field Types	Notes
<p><i>Charge Capture</i> &gt; <b>Procedure Code Entry</b></p>	<ul style="list-style-type: none"> <li>• Search box</li> <li>• Advanced search list of procedure codes</li> </ul>	<ul style="list-style-type: none"> <li>• Procedure codes used for treatment during the prior visit will carry forward from one note to the next and may be reused or removed</li> <li>• New procedure codes may be added</li> <li>• Procedure codes for evaluations, re-evaluations and supplies will not carry forward to the next note</li> </ul>
<p><i>Charge Capture</i> &gt; <b>Charge Validation</b></p>	<ul style="list-style-type: none"> <li>• Text boxes for service minutes for timed and untimed codes (if payment rule is present)</li> <li>• Tables</li> </ul>	<ul style="list-style-type: none"> <li>• Used to document minutes of service for timed and untimed codes (if present)</li> <li>• Used to adjust the number of units for each timed procedure code</li> <li>• To maintain a procedure code for future use without billing for it in the current visit, enter 0 units</li> </ul>

\*\* PLEASE LOOK AT THE YELLOW LINE just below the client's name to find the Procedure Code to use in the Charge Capture tab \*\*

\*\* In Charge Capture screen: I PUT ALL OF YOUR MINUTES in the Direct HANDS ON Treatment Minutes box. For all payor sources (if you can see the option). (do not break it down in to hands on, not hands on, etc.)

## For More Information

If you need more information about documentation in the RevFlow EMR, go to the **Library** in the BMS Resource Center. Under **BMS**, expand the **RevFlow Provider Resources** folder and then click on the **QuickTopic** or **Tutorials** folders.

You can also use the Resource Center's **Search** feature to look for information.

The screenshot shows the BMS Library interface. On the left is a navigation menu with items like 'ianne Jewell', 'earch', 'ome', 'ibox', 'ews', 'brary', 'alendar', 'eam', 'aining', 'Do's', 'eports', 'lanage', and 'tatistics'. The 'brary' item is highlighted with an orange box. The main content area is titled 'Library' and contains a tree view of folders. The 'BMS' folder is expanded, and the '03 RevFlow Provider Resources' folder is highlighted with an orange box. Inside this folder, 'QuickTopics' and 'Tutorials' are also highlighted with orange boxes. On the right, there is a 'BMS' header with 'QuickTopics • Subscribe' and 'Enable Email-in'. Below this is a list of resources with columns for 'Feat.', 'Type', 'Name', 'Modified', 'Rating', 'Views', and 'Location'. An orange callout box on the right says 'You can search for information here.' A watermark 'AND DROP FILES HERE' is visible over the resource list.

Feat.	Type	Name	Modified	Rating	Views	Location
★	📄	Required Fields in the First Note in a Case Checklist.pdf	7/25/2014	★★★★★	37	👤
★	📄	The Interventions Tab in the RevFlow EMR QuickTopic	6/30/2014	★★★★★	50	👤
★	📄	Adding Procedure Codes to a Visit Note QuickTopic	7/20/2014	★★★★★	66	👤
★	📄	Attaching a Scanned Document to a Non-Automated Output QT	12/11/2012	★★★★★	38	👤
★	📄	Automated Visit Note Output Report Generation Process QuickTopic	3/18/2014	★★★★★	50	👤
★	📄	Charge Capture: Code and Minute Rule Validation QuickTopic	6/27/2014	★★★★★	45	👤
★	📄	CMS Required Advanced Beneficiary Notification QuickTopic	8/21/2014	★★★★★	68	👤
★	📄	Comparison of the Medicare 8 Minute Rule	8/22/2013	★★★★★	209	👤

Revised 2-13-18  
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