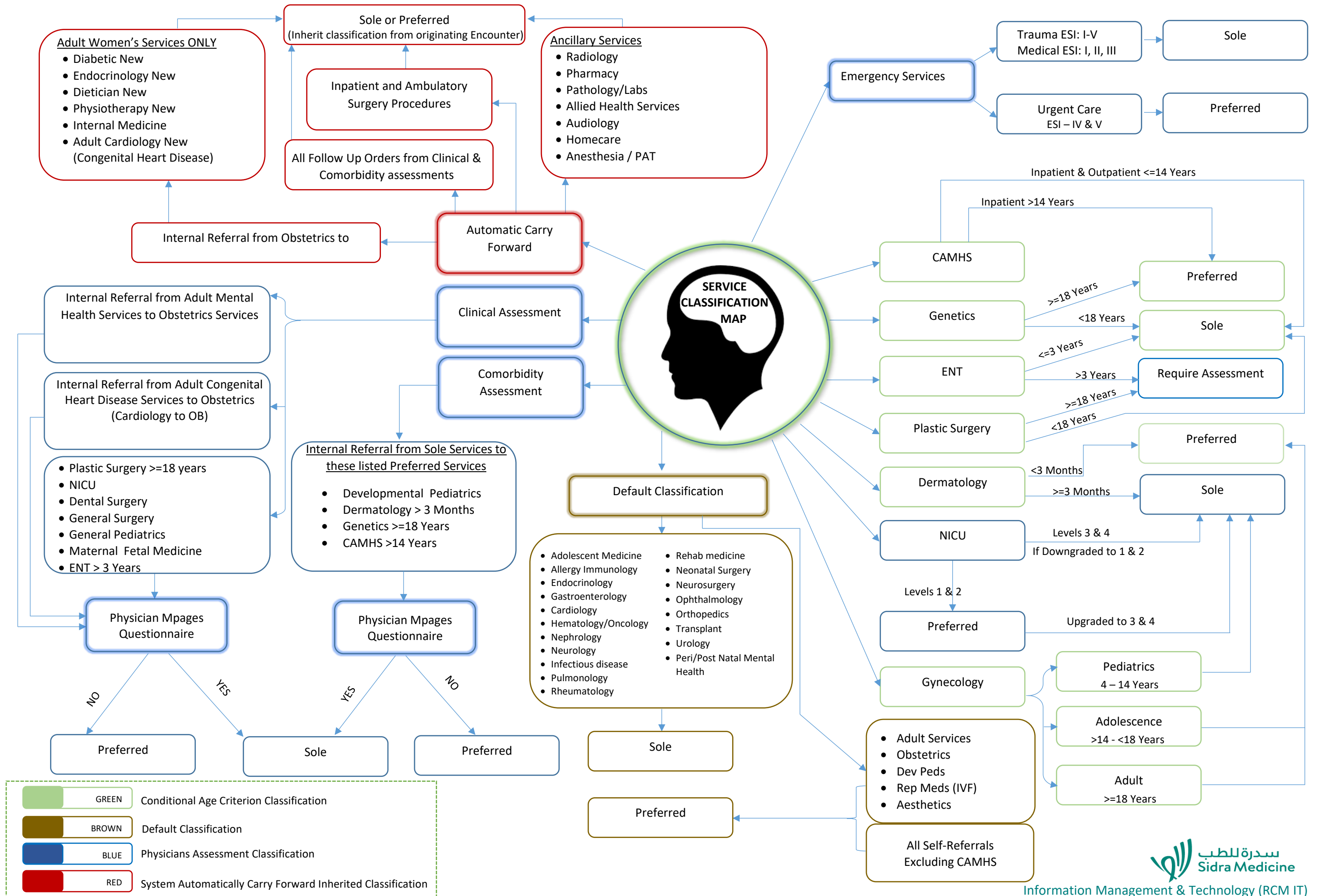


Preferred/Sole Provider Services Classification Map



Additional Guidelines

#	Classifications Methods	Description and rules
1	Default Classification	Predefined group of medical services that are classed as Sole Provider or Preferred which are hard coded into the EMR systems and is automatically defaulted onto patient visit encounter.
2	Conditional Classification (Age Criteria)	Selected medication Services of which classification is determined based on age criterion. The EMR system will automatically default the relevant Sole/Preferred flag based on the patient's age.
3	Clinical Assessment Classification	A group of medical services that require physician's assessment in order to determine the classification. Physicians need to access the relevant Powerchart Mpages questionnaire and respond to a set of predefined questions, then the system will automatically assign a classification on the patient encounter based on the physician's assessment.
4	Comorbidity Assessment Reclassification	<p>This is applicable to internal Sidra physician's referrals only and for selected services.</p> <p>The comorbidity assessment/Reclassification enable physicians to review and change a patient's classification from Preferred to Sole Provider as necessary.</p> <p>For example, If a patient is referred internally from a Sole Provider service onto another medical service that is classed as Preferred, then the receiving physicians at the Preferred services need to perform a comorbidity assessment to ascertain if the patient referral qualifies as a Sole Provider. The receiving physician will access the Powerchart Mpages Comorbidity questionnaire and respond to a predefined set of questions, then the system will automatically assign a classification on the patient encounter based on the physician's comorbidity assessment. The outcome of the comorbidity assessment could either be the patient remain as Preferred class or change to a Sole Provider.</p> <p>The comorbidity assessment is currently available for a specific medical services that are classed as Preferred either by default or based on the conditional age criterion.</p>
5	Automatic Carry Over/Pulled Forward Classification (Preprocessing)	<p>Patient's ancillary services request follows the original consult visit classification for Internal referrals, this means all ancillary services will inherit the service classification of the requesting medical services.</p> <p>Follow up future Orders for clinic visits will also carry forward original classification from the previous visit – applicable if the service classification was determined through physician clinical assessment. For hard coded default classification medical services, this rule is not applicable because the follow up orders for such services will automatically have a default flag.</p> <p>For the system to automatically carry forward the service classification from one visit onto the applicable future visit or ancillary services, the Ordering physician must ensure that the relevant visit encounter is opened in the patients Chart prior to placing the future orders. The opened visit encounter must have a classification flag for the system to automatically copy/carry over.</p> <p>Note: If a physician places a future order/ancillary order using an encounter that has not been classified, the system will have nothing to carry forward.</p>

Executive Committee: All feedbacks, recommendations and observations in the Sidra Service Classification model should be raised to the executive committee for review, consideration and or approval as necessary.