

Adding a patient and charges to AdvancedMD

This is the standard process, beginning to end, for creating a patient, visit, and charge in AdvancedMD. If the patient already exists in AdvancedMD, you can skip to step 3.

1. **Addpatient** – This will add the patient to the system with the demographics you specify
 - a. **Updatepatient** – This will update one or more fields on the patient’s demographics screen.
 - b. **Lookupprofile** – You will need to run this call to look up a valid provider value for the “profile” attribute of the Addpatient call.
2. **Addinsurance** – If you need to add insurance coverage for a patient, this will do that.
3. **Addvisit** – This will create a billable visit in AdvancedMD.
 - a. If you are working with appointments on the scheduler, you will need to use the JSON endpoints for working with appointments on the scheduler.
 - i. <https://login-app.advancedmd.com/API/scheduler/help/index.html>
4. **Savecharges** – This will bring the billing information into AdvancedMD for that visit (CPT codes, ICD codes, modifier codes)
 - a. **Lookupproccode** – You will need to run this call to get the ID of the procedure code. You cannot use the CPT code itself in Savecharges.
 - b. You can use the actual ICD diag code in the Savecharges call.

Pulling demographics from AdvancedMD

There are a couple calls you can use here, depending on how much demographic data you need.

1. **Getupdatedpatients** – This call will return all the patients that were added or updated in AdvancedMD between the datechanged value and the msgtime value.
2. **Getdemographic** – If getupdatedpatients doesn’t return the demographic data you are needing, you can run getdemographic for a single patient to get a most complete demographic listing
 - a. First try class “api”. This gives a pretty comprehensive demographic listing.
 - b. If class “api” didn’t return the data you need, try class “demographic”. This will return even more data, such as insurance coverages and chart documents.

Pulling appointments and new charges from AdvancedMD

Getupdatedvisits - This call will return all the appointments that were added or updated in AdvancedMD between the datechanged value and the msgtime value. If you include the “charge” node, it will return new charges that were added to an appointment.

Vitals

Vitals like height, weight, BMI, heart rate, etc. are stored in EHR Note Templates. These note templates are entirely custom-made by the practice and can include any field they need to track during a patient visit.

If you need to pull vitals from AdvancedMD, you'll need to run any variation of the **getehrnotes** call:

- Getehrnotes
- Getehrupdatednotes
- Getehrnotesbyvisit

If you need to push vitals to AdvancedMD, you'll need to run the **addehrnote** call.

- Running the **getehrtemplates** call will return all the possible note templates in the office key.

Checking insurance eligibility

There is a button on the patient's insurance screen that will run an insurance eligibility check. The API call behind this button is undocumented, but if you use the ODS, it will show you the API calls being run when you click this button.

This will send a 270 Eligibility Check request to our clearinghouse, Change Healthcare. They will send back the 271 response, which will be included in the response of the API call.

- We do not have control over what Change Healthcare sends us in the response. Some carriers provide a small amount of information. Others provide a lot.

The screenshot shows the 'Insurance' section of the AdvancedMD interface. At the top, there's a header with an umbrella icon and the word 'Insurance'. Below this, there's a table of insurance orders. The table has columns: Seq, Code, Coverage, Begin, End, AI, Last Checked, Eligible, and Eligibility Comments. The 'Check Eligibility' button is circled in red. Below the table, there's a form for checking eligibility. The form includes fields for Effective Dates, Carrier, Coverage, Group Name, Group #, Subscriber, Subscriber ID, Relationship, Copay, Payer ID, and MSP Code. The 'Check Eligibility' button is also present in the form. Below the form, there's a section for 'Change Healthcare Website (collaborationcompass.com)' with a dropdown menu. To the right of the form, there's a sidebar with buttons: Save, Add New, Copy, Inactivate, Audit Log, and More. At the bottom right, there's a section for 'Insurance Address' and 'Insurance Contact Information'. The 'Insurance Address' section includes fields for AETNA TX, P.O. BOX 795080, SAN ANTONIO, TX 782795080, and CPID: none. The 'Insurance Contact Information' section includes fields for Eligibility #, Preauth #, Fax #, Contact, and Email. Below these sections, there's a 'Patient Information' section with fields for Name: TEST, PATIENT, DOB: 01/12/1950, and SSN: 555-99-8681. At the very bottom, there's a 'Notes' section with a text area.

Seq	Code	Coverage	Begin	End	AI	Last Checked	Eligible	Eligibility Comments
4	AE163	TERTIARY	08/07/2016		A	06/30/2021	⚠	Missing Eligibility Payor ID in
5	AET	TERTIARY	08/27/2016		A	11/30/2021	⚠	Missing Eligibility Payor ID in
6	BER04	TERTIARY	11/19/2017	11/30/2017	I			

Effective Dates: 08/07/2016 -

Carrier: AE163 AETNA TX

Coverage: TERTIARY

Group Name:

Group #:

Subscriber: TEST, PATIENT

Subscriber ID:

Relationship: 18-SELF

Copay: 0.00 ☒ \$ or ☐ %

Payer ID:

MSP Code:

Change Healthcare Website (collaborationcompass.com)

Insurance Address: AETNA TX, P.O. BOX 795080, SAN ANTONIO, TX 782795080, CPID: none

Insurance Contact Information: Eligibility #: , Preauth #: , Fax #: , Contact: , Email:

Patient Information: Name: TEST, PATIENT, DOB: 01/12/1950, SSN: 555-99-8681

Notes: