



SUPERIOR HEALTHPLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

Health Passport Clinical Training Guide

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

The Health Passport is a secure web-based application built using core clinical and claims information to deliver relevant healthcare information when and where it is needed.

Using the Health Passport, you can improve care coordination, eliminate waste, and reduce errors by gaining a better understanding of a person's medical history and health interactions.

Features

- **Medications** - You can access more detail, including the name of the prescription, the prescribing clinician, date filled, dosage, quantity, dosage instructions, and formulary information. A provider may also enter over the counter and/or sample drugs prescribed or given to the member.
- **Visit History** - You can view past visits that illustrate the description of the service, treating provider, diagnoses and the service date.
- **Vital Signs** - You can use interactive documentation to chart vital signs in the Health Passport at the point-of-care.
- **Lab Results** - You have access to all collected lab results. The solution uploads this information from contracted labs.
- **Immunizations** - A comprehensive list of a member's immunizations are collected from Immtrac.
- **Allergies** - You can use interactive documentation to chart allergies at the point-of-care. Once charted the solution automatically checks the allergy for medication interactions.
- **Forms** - You can fill out Electronic documentation of Physical Health, Behavioral Health, Dental, and Vision encounters.

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE SEARCH SCREEN

Home Example User, Texas Health Passport


Search
Day List

Person Search

Last Name* First Name* Medicaid Id OR OR DFPS Id

Entering Search Data

Enter the First initial of the Member's First and Last Name along with ONE of the ID numbers and click Search to pull up the member's basic information.



SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE SEARCH RESULTS

Home Example User, Texas Health Passport

Search
Day List

Person Search

Last Name* First Name* Medicaid Id OR SSN OR DFPS Id

Person Search Results

NAME	AGE	DOB	GENDER	MEDICAID ID	DFPS ID
DUCK, HEWEY R	12Y 9M	3/17/1995	M	TX00104267101, 515720598	26434518

Search Results

The full name of the member appears along with the basic identifiers and the ID numbers.

The name of the member is a hyperlink, click it to go to the members medical record.

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THE OVERVIEW MODULE – FACESHEET

The Overview Module provides a quick view of the patient's medical record. Visits, Medications, Allergies, and Immunizations are included on the Facesheet Page.

Quick Demographic View

List of Allergies

List of Immunizations

Robert DiPasquale, Texas Health Passport

Search

DUCK, HEWEY 14Y 5M M ALLERGIES: amoxicillin, grape fruit, ibuprofen, bee pollen, [MORE] PCP: FOLEY, MABEL PAULINE DOB: 6/18/1996 DFPS ID:

MENU Overview

Overview Facesheet Recent Activity

Demographics Allergies Medications Visits Forms Vital Signs Disclaimer

DUCK, HUEY R

1234 W DISNEY AVE
ORLANDO, FL 75110
(214) 555-1212
alt: -

Member #: TX00104267101(HP ID- for SUPERIOR use), 515720598(Medicaid ID)

DFPS Id: 26434518(DFPS ID)

Age: 16Y 5M
Gender: Male
DOB: 3/17/1995
Language: N/A

Primary Care Physician
VOGTSBERGER, KENNETH
819 WATER STREET
SUITE 300
KERRVILLE, TX 78028
(830) 792-3300

Print

Allergies Add Allergy

SUBSTANCE	REACTION	STATUS	TYPE
[A] amoxicillin(*)	Anxiety	Active	Allergy
grape fruit(*)	Edema of mouth	Active	Allergy
[A] ibuprofen(*)	Increased systolic blood pressure	Active	Allergy
bee pollen	Rash	Active	Sensitivity
Sunkist Vitamin C		Active	Sensitivity
Tylenol-8 Hour-Gel tabs(*)	Headache	Resolved	Allergy

Immunizations

VACCINE	ADMINISTRATION DATE	ADMIN AGE	SOURCE
Diphtheria, tetanus toxoids, and acellul	8/6/1996	1Y 6M 2W	Texas Health Passport...
Diphtheria, tetanus toxoids, and whole c	1/27/1994		Texas Health Passport...
Diphtheria, tetanus toxoids, and whole c	5/13/1993		Texas Health Passport...
Diphtheria, tetanus toxoids, and whole c	5/22/1992		Texas Health Passport...
Measles, mumps and rubella virus vaccine	1/27/1994		Texas Health Passport...
poliovirus vaccine, live, trivalent	1/27/1994		Texas Health Passport...
poliovirus vaccine, live, trivalent	5/13/1993		Texas Health Passport...

Done

**The Overview module is intended to be a quick reference page for clinicians who are already familiar with the patients full history and do not need to reference the other sections of patients in detail, but rather just need to verify recent visits, medications given, etc.

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THE OVERVIEW MODULE – RECENT ACTIVITY

Search Robert DiPasquale, Texas Health Passport

DUCK, HEWEY 14Y 5M M ALLERGIES: amoxicillin, grape fruit, ibuprofen, bee pollen, [MORE] PCP: FOLEY, MABEL PAULINE DOB: 6/18/1996 DFPS ID:

Overview Facesheet **Recent Activity** Print

DUCK, HUEY R

1234 W DISNEY AVE
ORLANDO, FL 75110
(214) 555-1212
alt: -

Member #: TX00104267101(HP ID- for SUPERIOR use), 515720598(Medicaid ID)

DFPS Id: 26434518(DFPS ID)

Age: 16Y 5M
Gender: Male
DOB: 3/17/1995
Language: N/A

Prints Individual modules

819 WATER STREET
SUITE 300
KERRVILLE, TX 78028
(830) 792-3300

Allergies Add Allergy...

SUBSTANCE	REACTION	STATUS	TYPE
[A] amoxicillin(*)	Anxiety	Active	Allergy
grape fruit(*)	Edema of mouth	Active	Allergy
[A] ibuprofen(*)	Increased systolic blood pressure	Active	Allergy
bee pollen	Rash	Active	Sensitivity
Sunkist Vitamin C		Active	Sensitivity
Tylenol-8 Hour-Geltab(*)	Headache	Resolved	Allergy

Immunizations

VACCINE	ADMINISTRATION DATE	ADMIN AGE	SOURCE
Diphtheria, tetanus toxoids, and acellul	8/6/1996	1Y 6M 2W	Texas Health Passport...
Diphtheria, tetanus toxoids, and whole c	1/27/1994		Texas Health Passport...
Diphtheria, tetanus toxoids, and whole c	5/13/1993		Texas Health Passport...
Diphtheria, tetanus toxoids, and whole c	5/22/1992		Texas Health Passport...
Measles, mumps and rubella virus vaccine	1/27/1994		Texas Health Passport...
poliovirus vaccine, live, trivalent	1/27/1994		Texas Health Passport...
poliovirus vaccine, live, trivalent	5/13/1993		Texas Health Passport...

Done

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CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE OVERVIEW MODULE – RECENT ACTIVITY CONTINUED...

The Recent Activity page provides a quick reference to view Claim Visits, Medication Claims, and Labs.

Search Example User, Texas

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, Bee Stings, clonidine, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

▼ MENU Overview

Overview **Facesheet** Recent Activity Print

► Show: From 6/2/2006 To 6/2/2007

Claim Visits


DATE	LOS	DIAGNOSIS	CODE	VISIT TYPE	BILLING ENTITY	SOURCE
» 6/2/2007		ACUTE TONSILLITIS	463	Inpatient Hospital	HOSPITAL ALIC, CHRISTUS SPOHN	Superior
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
» 6/2/2007		ACUTE TONSILLITIS	463	Inpatient Hospital	HOSPITAL ALIC, CHRISTUS SPOHN	Superior
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	

Medication Claims

- 5/21/2007 clonidine 0.1 mg oral tablet, #90.000, OLE PHCY #502 (Source: First Health)
- 5/21/2007 clonidine 0.1 mg oral tablet, #90.000, OLE PHCY #502, managed by SCHACK, RICARDO C (Source: First Health)
- 4/23/2007 clonidine 0.1 mg oral tablet, #90.000, OLE PHCY #502, managed by SCHACK, RICARDO C (Source: First Health)
- 3/21/2007 Adderall XR 30 mg oral capsule, extended release, #90.000, OLE PHCY #502, managed by SCHACK, RICARDO C (Source: First Health)
- 3/21/2007 clonidine 0.1 mg oral tablet, #90.000, OLE PHCY #502, managed by SCHACK, RICARDO C (Source: First Health)

All Labs

DATE & TIME (CT)	ITEM	VALUE	ORDERING PHYSICIAN	SOURCE
5/21/2007 12:00 AM	MCV.	94.8 fl.*	TESTPHYSICIAN, BOB	Quest
5/21/2007 12:00 AM	MCHC.	33.7 g/dl.*	TESTPHYSICIAN, BOB	Quest



Click on the **Show** hyperlink to view information within a specific date range or view more than the default of 3 months of information.

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE DEMOGRAPHICS MODULE

Search Day List Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

▼ MENU Demographics Overview Demographics Allergies Medications Visits Immunizations Forms Vital Signs Lab Results Disclaimer

Profile Provides a profile view of the patient. [Print](#)


Name	DUCK, HEWEY R	Primary Address	1234 W DISNEY AVE ORLANDO, TX 90210-1111 BELL (County), USA	Gender	Male	Phone	(314) 555-1234 (Home) (314) 555-6789 (Alternate)
Primary Language	N/A	Marital Status	Single	DOB	3/17/1995	Age	12 Y
Race/Ethnicity	White/Hispanic	Authorized Level of Care	210	Forensic Assessment Indicator	N		

Medical Contacts Lists the patient's medical and personal contact information.

NAME	ADDRESS	PHONE	TYPE
PATEL, ATULKUMAR R	2019 S HENDERSON STE 2 (Primary) KILGORE, TX 75662	903) 984-2002 (Phone)	PCP

Personal Contacts This information is updated daily.

NAME	ADDRESS	PHONE	TYPE
MOUSE, MINNIE	1234 W DISNEY AVE (Primary) ORLANDO, TX 75110 NAVARRO (County)	(214) 555-1212 (Home)	Medical Consenter (Secondary)
DISNEY, MISSY Mother	1234 W DISNEY AVE (Primary) ORLANDO, TX 75110 NAVARRO (County)	(214) 555-1212 (Home)	Medical Consenter (Primary Backup)
DISNEY, WALTER DS	1234 W DISNEY AVE (Primary) ORLANDO, TX 75110 NAVARRO (County)	(214) 555-1212 (Home)	Medical Consenter (Secondary Backup)
DISNEY, WALTER	1234 W DISNEY AVE (Primary) ORLANDO, TX 75110 NAVARRO (County)		Caregiver
DOG, GOOFY	1234 W DISNEY AVE (Primary) ORLANDO, TX 75110 NAVARRO (County)	(214) 555-1212 (Home)	Caseworker
MOUSE, MICKEY Step Father	1234 W DISNEY AVE (Primary) ORLANDO, TX 75110 NAVARRO (County)	(214) 555-1212 (Home)	Medical Consenter (Primary)



SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE ALLERGIES MODULE

Search Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, clonidine, lavender, Lipitor, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

Allergies

Allergy Profile Print

SUBSTANCE	REACTION	STATUS	TYPE
amoxicillin(*)	Confusion	Active	Allergy
bee pollen	Shortness of breath	Active	Allergy
A clonidine	Confusion	Active	Allergy
lavender(*)	Rash	Active	Allergy
Lipitor	Nausea	Active	Allergy
mafenide topical		Active	Allergy
measles virus vaccine	Difficulty swallowing	Active	Allergy
naproxen		Active	Allergy
Oil of Olay	Rash	Active	Allergy
Tucks HC	Lethargy	Active	Allergy
Bee Stings(*)	Abdominal pain	Resolved	Allergy
penicillin(*)	Asthma	Cancelled	Allergy

The **A** denotes that there is a potential for an allergic reaction to take place while the patient is taking this medication. More information can be found by clicking on this icon.

If an allergy has a comment associated with it, an asterisk (*) appears next to the allergy name. Click the allergy name on the Allergy Profile tab to display additional information, including any comment associated with the allergy.

In addition to an Active allergy, some allergies may have a status of Resolved or Cancelled. Statuses can be changed by clinicians incase an allergy was charted in error or because the patient no longer has a allergic reaction to a substance. Strikethrough text indicates resolved and cancelled allergies.

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THE ALLERGIES MODULE CONTINUED...

Search Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, clonidine, lavender, Lipitor, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

Allergies

Allegry Profile

Allegry Profile > Allegry Details

Lavender

Type
Allergy

First Occurrence Date
12/2/2007

Reaction
Rash

Recorded By
Admin, 1Passport

Date recorded
1/8/2008

Status
Active

Comments
Lavender causes rash on arms.

History

STATUS	VALID FROM	VALID UNTIL	RECORDED BY	REACTION	COMMENT
Active	1/8/2008	Current	Admin, 1Passport	Rash	Lavender causes rash on arms.

After clicking on an allergy you can see more details including who recorded the allergy and any comments that were made.

View charted allergies previously entered by Providers or choose to add an allergy yourself.

SUPERIOR HEALTH PLAN NETWORK

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THE MEDICATIONS MODULE

Search Day List Example User, Texas Health Passport
















DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, Bee Stings, clonidine, [MORE] PCP: PATEL, ATULKUMAR R. DOB: 3/17/1995 DFPS ID: 26434518


Formulary: No formulary found




Medications




Med Claims


Show: 3/6/2006 to 1/28/2007

Medication Claims	QTY	FILL DATE	PHARMACY	MANAGED BY	SOURCE
 clonidine 0.1 mg oral tablet	90.000	1/8/2007	OLE PHCY #502	SCHACK, RICARDO C	First Health
 Adderall XR 30 mg oral capsule, extended release	90.000	12/6/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 clonidine 0.1 mg oral tablet	90.000	12/2/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 clonidine 0.1 mg oral tablet	90.000	10/30/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 clonidine 0.1 mg oral tablet	90.000	9/29/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 Adderall XR 30 mg oral capsule, extended release	90.000	9/13/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 clonidine 0.1 mg oral tablet	90.000	8/28/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 clonidine 0.1 mg oral tablet	90.000	7/28/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 clonidine 0.1 mg oral tablet	60.000	7/3/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 clonidine 0.1 mg oral tablet	60.000	6/9/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 Adderall XR 30 mg oral capsule, extended release	90.000	6/7/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 clonidine 0.1 mg oral tablet	60.000	4/27/2006	OLE PHCY #502	GCI IACK, RICARDO C	First Health
 Zoloft 50 mg oral tablet	30.000	4/19/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 Adderall XR 30 mg oral capsule, extended release	90.000	3/8/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health
 Zoloft 50 mg oral tablet	30.000	3/8/2006	OLE PHCY #502	SCHACK, RICARDO C	First Health

The  denotes that there is a potential for an allergic reaction to take place while the patient is taking this medication. More information can be found by clicking on this icon.

The , ,  drug safety icons display to the left of a medication. If you position your cursor over the icon, a message displays the drug or drugs that cause that alert. Medication-Food and Medication-Medication interaction checking is divided into these three levels of severity.

-  Major Potential Hazard
-  Moderate Potential Hazard
-  Minor Potential Hazard



SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE MEDICATIONS MODULE CONTINUED...

Search Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, clonidine, lavender, Lipitor, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

Medications Formulary: No formulary found

Medication Claims > Claim Details

Adderall XR 30 mg oral capsule, extended release

Dispense # 90.000 , Refill #: Initial fill

Pharmacy **OLE PHCY #502**
Filled: 6/21/2007

Other Managed By: **SCHACK, RICARDO C**
Source: **First Health**

Reference Information
Dosage | Pharmacology | Warnings | Side Effects | Pregnancy
Lactation
Patient Leaflet

Medication Claims for amphetamine-dextroamphetamine (Last 1 year)

	QTY	FILL DATE	PHARMACY	MANAGED BY	SOURCE
Adderall XR 30 mg oral capsule, extended release	90.000	6/21/2007	OLE PHCY #502	SCHACK, RICARDO C	First Health
Adderall XR 30 mg oral capsule, extended release	90.000	3/21/2007	OLE PHCY #502	SCHACK, RICARDO C	First Health

At the bottom of the Medication Details a history of fills for the medication is displayed in reverse chronological order – showing the most recent fill first.

To view reference information about a medication, choose a relevant link in the Reference Information section such as Dosage, Pharmacology, Warnings, Side Effects, Pregnancy, or Lactation. You can also choose Patient Leaflet to display detailed information provided by the manufacturer.

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE VISITS MODULE

Search Day List Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, Bee Stings, clonidine, [MORE] PCP: PATEL, ATLUKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

▼ MENU

- Overview
- Demographics
- Allergies
- Medications
- Visits**
- Immunizations
- Forms
- Vital Signs
- Lab Results
- Disclaimer

Visits

Claims Data

View by: **visit** | Diagnosis | Procedure

DATE	LOS	DIAGNOSIS	ICD9-CM	SETTING	BILLING ENTITY	SOURCE
>> 6/2/2007		ACUTE TONSILLITIS	463	Inpatient Hospital	HOSPITAL ALIC, CHRISTUS SPOHN	Superior
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	

Visit Details

Claim: 100023002007159424046281 End of Service: 6/2/2007 Billing Entity: HOSPITAL ALIC, CHRISTUS SPOHN Attending Provider: Admitting Provider:

PROCEDURES	CODE	TERM	DATE
- No procedures found -			

>> 6/2/2007		ACUTE TONSILLITIS	463	Inpatient Hospital	HOSPITAL ALIC, CHRISTUS SPOHN	Superior
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
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>> 6/2/2007		ACUTE TONSILLITIS	463	Inpatient Hospital	HOSPITAL ALIC, CHRISTUS SPOHN	Superior
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
>> 6/2/2007		ACUTE TONSILLITIS	463	Inpatient Hospital	HOSPITAL ALIC, CHRISTUS SPOHN	Superior
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
>> 6/2/2007		ACUTE TONSILLITIS	463	Inpatient Hospital	HOSPITAL ALIC, CHRISTUS SPOHN	IMHS
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
>> 6/2/2007		ACUTE TONSILLITIS	463	Inpatient Hospital	HOSPITAL ALIC, CHRISTUS SPOHN	IMHS
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
>> 6/2/2007		ACUTE TONSILLITIS	463	Inpatient Hospital	HOSPITAL ALIC, CHRISTUS SPOHN	IMHS
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
>> 6/2/2007		ACUTE TONSILLITIS	463	Inpatient Hospital	HOSPITAL ALIC, CHRISTUS SPOHN	TVHP
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
		LABORATORY EXAMINATION	V72.6		HOSPITAL ALIC, CHRISTUS SPOHN	
>> 6/2/2007		ACUTE TONSILLITIS	463	Inpatient Hospital	HOSPITAL ALIC, CHRISTUS SPOHN	TVHP

View information organized by Visit, Diagnosis or Procedure. Also choose a blue column header to sort information by that criterion.

Visit Details

PROCEEDURES CODE TERM DATE

- No procedures found -

DATE LOS DIAGNOSIS ICD9-CM SETTING BILLING ENTITY SOURCE

>> 6/2/2007 ACUTE TONSILLITIS 463 Inpatient Hospital HOSPITAL ALIC, CHRISTUS SPOHN Superior

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

ACUTE TONSILLITIS 463 Inpatient Hospital HOSPITAL ALIC, CHRISTUS SPOHN Superior

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

ACUTE TONSILLITIS 463 Inpatient Hospital HOSPITAL ALIC, CHRISTUS SPOHN Superior

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

ACUTE TONSILLITIS 463 Inpatient Hospital HOSPITAL ALIC, CHRISTUS SPOHN IMHS

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

ACUTE TONSILLITIS 463 Inpatient Hospital HOSPITAL ALIC, CHRISTUS SPOHN IMHS

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

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ACUTE TONSILLITIS 463 Inpatient Hospital HOSPITAL ALIC, CHRISTUS SPOHN IMHS

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

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ACUTE TONSILLITIS 463 Inpatient Hospital HOSPITAL ALIC, CHRISTUS SPOHN TVHP

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

ACUTE TONSILLITIS 463 Inpatient Hospital HOSPITAL ALIC, CHRISTUS SPOHN TVHP

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

LABORATORY EXAMINATION V72.6 HOSPITAL ALIC, CHRISTUS SPOHN

ACUTE TONSILLITIS 463 Inpatient Hospital HOSPITAL ALIC, CHRISTUS SPOHN

SUPERIOR HEALTH PLAN NETWORK

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THE VISITS MODULE

CONTINUED...

Search Day List Example User, Texas Health Passport

DUCK, HEWYER R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, Bee Stings, clonidine, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

▼ MENU

- Overview
- Demographics
- Allergies
- Medications
- Visits**
- Immunizations
- Forms
- Vital Signs
- Lab Results
- Disclaimer

Visits

Claims Data

View by: Visit | Diagnosis | **Procedure** Print

DATE	PROCEDURE	CODE	TERM	BILLING ENTITY	SOURCE
» 6/2/2007	Antibody; Helicobacter pylori	86677	CPT4	HOSPITAL ALIC, CHRISTUS SPOHN	TVHP
» 6/2/2007	Antibody; Epstein-Barr (EB) virus, viral capsid (VCA)	86665	CPT4	HOSPITAL ALIC, CHRISTUS SPOHN	TVHP
» 6/2/2007	Blood count; complete (CBC), automated (high, Hct, RBC, WBC and platelet count) and automated differential WBC count	85025	CPT4	HOSPITAL ALIC, CHRISTUS SPOHN	TVHP
» 6/2/2007	Antibody; Epstein-Barr (EB) virus, early antigen (EA)	86663	CPT4	HOSPITAL ALIC, CHRISTUS SPOHN	TVHP

By clicking on the Procedure hyperlink the visits will be sorted by procedure.

The Visits Module displays encounters a patient has had at various provider site types. This information is populated by claims data from Texas Medicaid & Healthcare Partnership, Delta Dental, StarDent, Total Vision Health Plan of Texas (Opti-Care), Superior HealthPlan, and Integrated Mental Health Services (IMHS).

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE IMMUNIZATIONS MODULE

Search Day List Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, Bee Stings, clonidine, [MORE] PCP: PATEL, ATUAKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

▼ MENU

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- Demographics
- Allergies
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- Visits
- Immunizations**
- Forms
- Vital Signs
- Lab Results
- Disclaimer

Immunizations

[View Child Immunization Schedule](#) | [View Adult Immunization Schedule](#) | [Print](#)

VACCINE	ADMINISTRATION DATE	ADMIN AGE	SOURCE
Diphtheria, tetanus toxoids, and acellul	5/20/2000	5Y 2M	ImmTrac
Diphtheria, tetanus toxoids, and whole c	12/17/1996	1Y 9M	ImmTrac
Diphtheria, tetanus toxoids, and whole c	12/23/1995	9M	ImmTrac
Diphtheria, tetanus toxoids, and whole c	9/23/1995	6M	ImmTrac
Diphtheria, tetanus toxoids, and whole c	7/27/1995	4M 1W	ImmTrac
Measles, mumps and rubella virus vaccine	5/20/2000	5Y 2M	ImmTrac
Measles, mumps and rubella virus vaccine	9/24/1996	1Y 6M	ImmTrac
poliovirus vaccine, live, trivalent	5/20/2000	5Y 2M	ImmTrac
poliovirus vaccine, live, trivalent	12/17/1996	1Y 9M	ImmTrac
poliovirus vaccine, live, trivalent	9/23/1995	6M	ImmTrac
poliovirus vaccine, live, trivalent	7/27/1995	4M 1W	ImmTrac

Click the above hyperlinks to view the Child Immunization or Adult Immunization Schedules.

This information is populated bi-weekly by ImmTrac, the Texas Immunization Registry.

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE FORMS MODULE

The screenshot shows the 'Forms' module interface for a patient named DUCK, HEWEY R. The interface includes a search bar, patient information, and a list of form categories. A table displays a list of forms with columns for checkboxes, service date, title, provider, author, status, and action. Three yellow callout boxes provide instructions: 1) 'The number of forms within a folder is easily known by the number within the parentheses.' pointing to the '(0)' next to 'Behavioral Health'. 2) 'Check the box desired to make a print of that form.' pointing to the checkbox next to the form with service date '12/20/2007'. 3) 'After you find the form you want to use, click the View button.' pointing to the 'View' link in the action column of the selected form. Buttons for 'Print Selected' and 'Print Completed' are visible at the top and bottom right of the form list.

Search Day List Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, clonidine, lavender, Lipitor, [MORE] PCP: PATEL, ATULKUMAR R. DOB: 3/17/1995 DFPS ID: 26434518

Forms

Documents Create

Show: All

Documents

Expand All | Collapse All

- Behavioral Health (0)
- Dental (0)
- ECI (Early Childhood Intervention) (0)
- Other (0)
- Physical Health (0)
- Superior Member Service Plan (0)
- THSteps (1)

<input type="checkbox"/>	SERVICE DATE	TITLE	PROVIDER	AUTHOR	STATUS	ACTION
<input type="checkbox"/>	12/20/2007	7-12 Months	--	Ramathal, noel	Completed	View Update Print History

Forensic Assessment (0)

Print Selected Print Completed

Print Selected Print Completed

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE FORMS MODULE

CONTINUED...

Search Day List Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, clonidine, lavender, Lipitor, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

Forms

Documents Create Print Selected

Create a New Document

Expand All | Collapse All

- Behavioral Health (2)
- Dental (1)
- Other (1)
- THSteps (14)

<input type="checkbox"/>	TEMPLATE TITLE	DESCRIPTION
<input type="checkbox"/>	13 Months-2 Years	Child Health Record Preventative Health Visit for children ages 12 months - 2 years. Contains family profile and health, development, child's health, nutrition, physical exam, sensory, health education, assessment, plan, mental health, development. To be completed by provider.
<input type="checkbox"/>	2-6 Months	Child Health Record Preventative Health Visit for children ages 2 - 6 months. Contains family profile and health, development, child's health, nutrition, physical exam, sensory, health education, assessment, plan, mental health, development. To be completed by provider.
<input type="checkbox"/>	3-5 Years	Child Health Record Preventative Health Visit for children ages 3 - 5 years. Contains family profile and health, development, child's health, nutrition, physical exam, sensory, health education, assessment, plan, mental health, development. To be completed by provider.
<input type="checkbox"/>	6-10 Years	Child Health Record Preventative Health Visit for children ages 6 - 10 years. Contains family profile and health, development, child's health, nutrition, physical exam, sensory, health education, assessment, plan, mental health, development. To be completed by provider.
<input type="checkbox"/>	7-12 Months	Child Health Record Preventative Health Visit for children ages 7 - 12 months. Contains family profile and health, development, child's health, nutrition, physical exam, sensory, health education, assessment, plan, mental health, development. To be completed by provider.
<input type="checkbox"/>	Birth-1 Month	Child Health Record Preventative Health Visit for children ages birth - 1 month. Contains family profile and health, development, child's health, nutrition, physical exam, sensory, health education, assessment, plan, mental health, development. To be completed by provider.
<input type="checkbox"/>	Mental Health Interview Tool/Referral Form (Ages 0-2 Years)	Mental Health Interview Tool/Referral Form. For this age group information is gathered from the parent/caregiver and from the provider's observations of the child. To be completed by provider.
<input type="checkbox"/>	Mental Health Interview Tool/Referral Form (Ages 3-9 Years)	Mental Health Interview Tool/Referral Form. For this age group information is gathered from the parent/caregiver and from the provider's observations of the child. To be completed by provider.
<input type="checkbox"/>	Mental Health Interview Tool/Referral Form (Ages 10-12 Years)	Mental Health Interview Tool/Referral Form. For this age group information is gathered from the parent/caregiver and from the provider's observations of the child. Addresses feelings, behavior, social interactions, thinking. To be completed by provider.
<input type="checkbox"/>	Mental Health Interview Tool/Referral Form (Ages 13-20 Years)	Mental Health Interview Tool/Referral Form. For this age group information is gathered from the parent/caregiver and from the provider's observations of the child. Addresses feelings, behavior, social interactions, thinking, physical problems, substance abuse, other. To be completed by provider.
<input type="checkbox"/>	Child Health History	Child health record preventative health visit. Contains pregnancy and birth history, maternal complications, substance use, family and child medical history, progress notes. To be completed by provider.

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE FORMS MODULE

CONTINUED...

Example User, Texas Health Passport

Search Day List

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, Bee Stings, clonidine, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

Forms

Documents

Signatures

Pages

Attachments

Comments

Department of State Health Services
Child Health Record
Preventive Health Visit

Family Profile and Health

No change in household since last visit

Child lives with:

Mother Father Stepparent Grandparent

Other

Total adults living in home: _____

Total children living in home: _____

Primary caretaker for this child: _____

Relationship: _____

Family's concerns/problems: _____

Development

Parent's concerns: _____

Developmental Assessment: P F

Type of Developmental Screen:

Standardized Parent Questionnaire: _____

Standardized Observational Screen: _____

Other: _____

Further assessment needed: Y N

Mental Health (see "Key Elements" on reverse side): _____

Client Information

Name: _____

DOB: _____

Age: _____ Sex: _____

SSN/Record No.: _____

Race/Ethnicity: _____

Informant/Relationship: _____

Medical Home: _____

Nutrition

Problems: special diet, inappropriate weight gain, anemic, chronic GI problems, major food allergies, refusal of any food group, developmental _____ Y _____ N

**If answered yes, further assessment needed.*

Usual Servings Per Day:

____ Dairy _____ Formula _____ Breast _____ Vegetables WIC: Y N

____ Breads, cereal, rice, and pasta

____ Meat, poultry, fish, eggs, and dry beans

____ Fruits

Sensory

Vision Screen: Normal Abnormal

Hearing Screen: Normal Abnormal

Screen used: Hearing Checklist for Parents

Health Education

Injury Prevention

Car safety restraints

Choking, unsafe toys

Sibling rivalry

Toilet training

Health Promotion

125%

1 of 2

To prevent loss of valuable data, be sure to save often.

Cancel Save Draft Complete

provider's observations of the child. To be completed by provider.

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE VITAL SIGNS MODULE

Search Day List Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, clonidine, lavender, Lipitor, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

Vital Signs Add Vital Signs

Show: Last 1 year Print

DATE & TIME (CT)	TEMP °F/°C	PULSE BPM	SYSTOLIC BP MM/HG	DIASTOLIC BP MM/HG	RESP BR/MIN	WEIGHT LBS OZ / KG
1/8/2008 1:57 PM	79.0 26.1*					
11/20/2007 9:59 AM	101.0 38.3	28	140	85	12	72 lbs 32.7 kg*

Click the Date and Time hyperlink in the displayed vital signs to view additional information about the vital sign. A line drawn through a vital sign (a strikethrough) indicates that the vital sign has been removed from the chart. This may occur if, for instance, a vital sign is entered in error.

An asterisk (*) by a vital sign indicates that a comment related to the vital sign is available. Click the Date and Time hyperlink to view the comment in the detailed view.

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE VITAL SIGNS MODULE CONTINUED...

To Unchart a Vital Sign:

1. Click the Select Vital(s) to Unchart checkbox for the vital sign that you want to remove from the chart. You can select more than one vital sign if you are removing them for the same reason.
2. Select the reason for removing the vital sign from the list at the bottom of the vital sign display.
3. Click the Unchart button to remove any selected vital signs. The vital signs display on the Vital Signs tab with a strikethrough line over them.

After clicking on a charted vital sign clinicians can see more details including who recorded the vitals and any comments that were made.

Select a reason to unchart: Unchart

RESULT	RECORDED BY	COMMENT	SELECT VITAL(S) TO UNCHART		
28 mmHg	Cody, Sloane		<input type="checkbox"/>		
Systolic Blood Pressure					
140 mmHg	Cody, Sloane		<input type="checkbox"/>		
Diastolic Blood Pressure					
85 mmHg	Cody, Sloane		<input type="checkbox"/>		
Respiratory Rate					
12 /min	Cody, Sloane		<input type="checkbox"/>		
Weight					
72 lbs 32.7 kg	12/20/2007	Current	Cody, Sloane	Member being treated for Anorexia - weight being tracked weekly	<input type="checkbox"/>

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE LAB RESULTS MODULE

Search Day List Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, Bee Stings, clonidine, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

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Lab Results


All Labs Allergens Chemistry Coagulation Hematology Immunology/Serology Toxicology Urinalysis

» Show: Last 1 year [Print](#)

Clinicians can view a compiled list of labs in the All Labs tab or select a tab to show a categorized break down of different lab results.

DATE & TIME (CT)	ITEM		ORDERING PHYSICIAN	SOURCE
5/21/2007 12:00 AM	MCV.	94.8 fl.*	TESTPHYSICIAN, BOB	Quest
5/21/2007 12:00 AM	MCHC.	33.7 g/dL.*	TESTPHYSICIAN, BOB	Quest
5/21/2007 12:00 AM	RED BLOOD CELL COUNT	4.48 Million/ μ L.*	TESTPHYSICIAN, BOB	Quest
5/21/2007 12:00 AM	PROTEIN, TOTAL	7.8 g/dL.*	TESTPHYSICIAN, BOB	Quest
5/21/2007 12:00 AM	CREATININE.	0.8 mg/dL.*	TESTPHYSICIAN, BOB	Quest
5/21/2007 12:00 AM	AST.	16 U/L.*	TESTPHYSICIAN, BOB	Quest
5/21/2007 12:00 AM	ALT.	18 U/L.*	TESTPHYSICIAN, BOB	Quest
5/21/2007 12:00 AM	HDL. CHOLESTEROL	69 mg/dL.*	TESTPHYSICIAN, BOB	Quest
5/21/2007 12:00 AM	CARBON DIOXIDE	25 mmol/L.*	TESTPHYSICIAN, BOB	Quest
5/21/2007 12:00 AM	ALBUMIN/GLOBULIN RATIO	1.3 (calc)*	TESTPHYSICIAN, BOB	Quest

Note: Not inclusive of all lab work performed



SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE LAB RESULTS MODULE CONTINUED...

Search Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, clonidine, lavender, Lipitor, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

▼ MENU

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- Visits
- Immunizations
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- Lab Results
- Disclaimer

All Labs Allergens Chemistry Coagulation Hematology Immunology/Serology Toxicology Urinalysis

All Labs > HDL. CHOLESTEROL Details 5/21/2007 12:00 AM

HDL. CHOLESTEROL

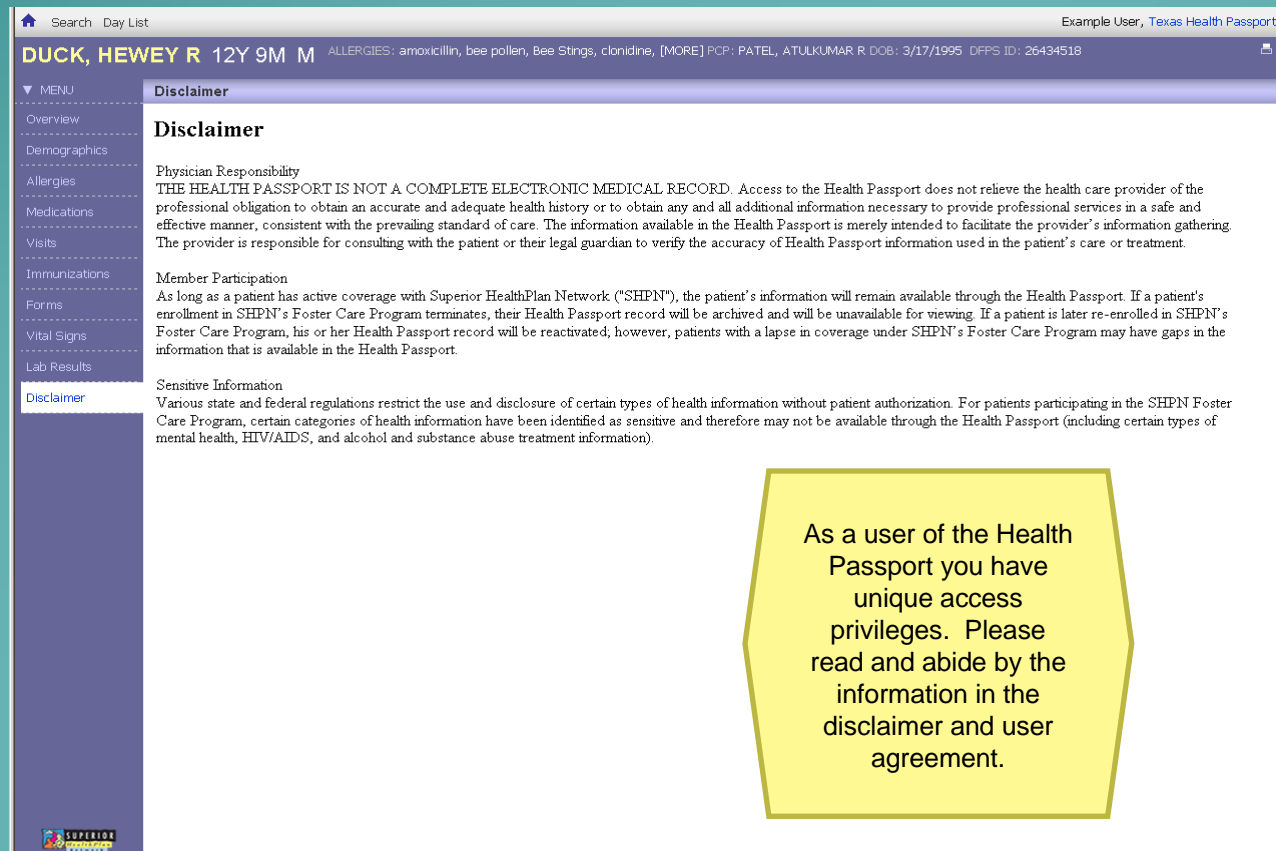
VALUE	ORDERING PHYSICIAN	COMMENT	SOURCE
69 mg/dL*	TESTPHYSICIAN, BOB	PLEASE NOTE: ALTHOUGH THE REFERENCE RANGE FOR VITAMIN ABNORMALITIES DUE TO OCCULT B12 DEFICIENCY; LESS THAN 1% OF PATIENTS WITH VALUES ABOVE 400 PG/ML WILL HAVE SYMPTOMS. 5 AND 10% OF PATIENTS WITH VALUES BETWEEN 200 AND 400 B12 IS 200-1100 PG/ML, IT	Quest

After clicking on a lab result you can see comments relative to the lab performed.

SUPERIOR HEALTH PLAN NETWORK

CLINICAL HEALTH PASSPORT TRAINING GUIDE

THE DISCLAIMER



The screenshot shows a web interface for a patient's Health Passport. At the top, there is a search bar and navigation links for 'Search' and 'Day List'. The patient's name is 'DUCK, HEWEY R 12Y 9M M'. Below the name, there are medical details: 'ALLERGIES: amoxicillin, bee pollen, Bee Stings, clonidine, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518'. A left-hand menu lists various sections: Overview, Demographics, Allergies, Medications, Visits, Immunizations, Forms, Vital Signs, Lab Results, and Disclaimer (which is currently selected). The main content area is titled 'Disclaimer' and contains three sections: 'Physician Responsibility', 'Member Participation', and 'Sensitive Information'. A yellow callout box is overlaid on the right side of the disclaimer text.

Search Day List Example User, Texas Health Passport

DUCK, HEWEY R 12Y 9M M ALLERGIES: amoxicillin, bee pollen, Bee Stings, clonidine, [MORE] PCP: PATEL, ATULKUMAR R DOB: 3/17/1995 DFPS ID: 26434518

▼ MENU **Disclaimer**

Overview

Demographics

Allergies

Medications

Visits

Immunizations

Forms

Vital Signs

Lab Results

Disclaimer

Disclaimer

Physician Responsibility
THE HEALTH PASSPORT IS NOT A COMPLETE ELECTRONIC MEDICAL RECORD. Access to the Health Passport does not relieve the health care provider of the professional obligation to obtain an accurate and adequate health history or to obtain any and all additional information necessary to provide professional services in a safe and effective manner, consistent with the prevailing standard of care. The information available in the Health Passport is merely intended to facilitate the provider's information gathering. The provider is responsible for consulting with the patient or their legal guardian to verify the accuracy of Health Passport information used in the patient's care or treatment.

Member Participation
As long as a patient has active coverage with Superior HealthPlan Network ("SHPN"), the patient's information will remain available through the Health Passport. If a patient's enrollment in SHPN's Foster Care Program terminates, their Health Passport record will be archived and will be unavailable for viewing. If a patient is later re-enrolled in SHPN's Foster Care Program, his or her Health Passport record will be reactivated; however, patients with a lapse in coverage under SHPN's Foster Care Program may have gaps in the information that is available in the Health Passport.

Sensitive Information
Various state and federal regulations restrict the use and disclosure of certain types of health information without patient authorization. For patients participating in the SHPN Foster Care Program, certain categories of health information have been identified as sensitive and therefore may not be available through the Health Passport (including certain types of mental health, HIV/AIDS, and alcohol and substance abuse treatment information).

As a user of the Health Passport you have unique access privileges. Please read and abide by the information in the disclaimer and user agreement.

