

**OLIVE VIEW-UCLA MEDICAL CENTER
PATIENT ACCESS
POLICY & PROCEDURE**

**NUMBER: 794
VERSION: 1**

**SUBJECT/TITLE: CREATING MEDICAL RECORD NUMBERS AND RECURRING
OUTPATIENT ACCOUNTS**

POLICY:

PURPOSE: To ensure every patient receiving treatment at Olive View-UCLA Medical Center has an established Medical Record Number (MRN) in the Hospital Information System (HIS) to capture all types of services.

DEPARTMENTS: PATIENT ACCESS

DEFINITIONS:

**PROCEDURES:
RESPONSIBILITY**

- CREATING A MRN**
1. Conduct a thorough patient search verify patient does not exist in HIS and has a MRN
 - A. Search appropriate application and conversation, i.e. in PM Office “*Add/Modify Person*” and “*Modify Encounter*”
 - B. Search using SSN, Last Name, First Name, and DOB.
 - C. Select “*Search*”. The system will search criteria for possible matches

NOTE: Review tiebreaker before selecting a possible match to ensure selecting the correct patient such as; Mother’s maiden name, address and or phone number.
 2. If there is a duplicate MRN in the system, submit a merge request and follow existing merge request procedure.

NOTE: All merges are handled by the Medical Records Department

 - A. From the populated list, select appropriate patient.
 - B. After exhausting all resources and it is determined the patient is not

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found you may generate a MRN (*hand patient a Patient Information Form, PIF in their preferred language then begin updating information*)

3. Using PIF, Patient ID and or other documents, complete required fields:
 - A. Name (*as written on the valid ID provided*)
 - B. Sex (*as seen on ID*)
 - C. Identifies as (*sex patient identifies as/with – patients choice*)
 - D. Mother's Maiden Name (LAST NAME, FIRST NAME). If unavailable enter the last name and annotate "*Unable to obtain full name*"
 - E. Social Security Number, SSN (*if patient does not have a SSN update the reason/patient's residency status*)
 - F. DOB
 - G. Include any and all known patient information in HIS, such as Driver's License Number (*DL/Other ID Number*)
 - H. **Do Not** make up patient information to satisfy system requirements

NOTE: Unknown system required data should be entered as noted in the Office of Patient Access (OPA) "*Registration & Financial Screening Reference Guide*".

4. Upload patient ID, SS Card, insurance card, etc. into patients chart
5. Under "*Patient Information*" enter the following (*if available*);
 - A. Enter patient's Race
 - B. Country of Birth (*if patient was born outside of the USA add by hierarchy the Out of County, OOC carrier code*)
 - C. Mailing Address

NOTE: If the patient is Homeless, enter temporary address (*if available*) and follow the homeless procedure as noted in the OPA "*Registration & Financial Screening Reference Guide*"

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- D. Phone number and email
 - I. Auto Appt. Reminder (*requires patients permission*)
 - II. Preferred Phone Number
- E. Ask patient if they want to join the Patient Portal. If so send MyWellness Invitation, select challenge questions and challenge answer
- F. In “*New Person Comments*”, annotate patient’s Primary Language and indicate if interpreter is needed. Once an encounter/FIN is created update primary language field and indicate if an interpreter is needed
- G. Enter patient’s Spouse Name in “*New Person Comments*”, once an encounter/FIN is created update field

NOTE: Any changes/updates made in/to the patients chart, i.e. Address, document the change in “*New Person Comments*”, for example:
Patients address changed from _____ to _____ (*refer to Policy and Procedure [515.1](#), Financial Practice and [515.11](#)*)

- 6. Under “*Insurance Primary, Secondary*” Tabs
 - A. Select the “*Patients Relationship to Subscriber*”
 - B. Update employer information (*if available*)
 - C. Enter Insurance information in appropriate insurance tab(s) (*ensure carrier code hierarchy is accurate*)
 - D. Select “*Verify Source*” from drop down menu
 - E. Repeat 6A. through 6. D in “*Secondary Insurance*” tab
- 7. In the “*Emergency Contact (EC)*” tab
 - A. Select “*Patient’s Relationship*” to EC (*if EC is available*) otherwise select “*Complete*” and annotate MRN and print label for the Medical Record Card and issue to patient (*refer to job aid for printing labels*)
 - B. Data enter: Last Name and First Name, DOB, Sex and whether or not patient and EC share the same address

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- C. Select relationship to patient
- A. Select whether or not the Emergency Contact is also the Emergency Medical Contact (EMC) by choosing “Yes” or “No”
- 8. Select “Complete” and annotate MRN to print label for the Medical Record Card and issue to patient (*refer to job aid for printing labels*)
- 9. Once Encounter is created, update “Insurance Primary, Secondary” Tabs
 - F. Verify information entered is accurate
 - G. Select “Verify Status” from the drop down menu
 - H. Select “Verify Source” from the drop down menu
 - I. Send/run 270 transaction
 - J. If returned 271 transaction matches your entry, proceed to “Insurance Summary Tab” and view summary for accuracy
 - K. If the insurance carrier(s) differ from your entry, update insurance tab(s), then re-run 270 transaction until 271 returned transaction matches your entry (*ensure carrier code hierarchy is accurate*)
 - L. If patient has a PPO or HMO plan, enter Primary Care Medical Home (PCMH) Site in the designated area
 - M. Switch the “No” to “Yes” when applicable (*only appears when financially screening from worklist*)

References:	
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