Availity® Patient Care Summary

The Availity Patient Care Summary (PCS) is an electronic health record sourced from claim-based information collected by Blue Cross and Blue Shield of Texas (BCBSTX) from physicians, pharmacies, labs and other health care providers. Providers who are registered with Availity can use the PCS to obtain a consolidated view of a patient’s health history at the point of care. This information can help identify potential treatment issues, such as clinical gaps in recommended care services, missed prescription refills and possible drug interactions.

The PCS includes the following details:

- Demographic patient information (including date of birth, address, phone number)
- The patient’s primary care physician (PCP) and other providers visited in the past 24 months
- Diagnoses and procedures submitted and reflected in the claims records
- Professional, hospital and emergency room services reflected in the claims records
- Prescriptions filled (including the class of the drug, total fills, last date filled)
- Radiological and laboratory services reflected in the claim records

1. Getting Started

Primary Access Administrators (PAAs):
Access will need to be granted to users by going to Account Administration → Assign Access to Users → Manual Assigned → Patient Care Summary

Note: PCS is only available for Availity registered users

Go to availity.com
Select Web Portal Users Login
Key in your User ID and Password
Click Log in

2. Accessing the Patient Care Summary [option 1]
Select Patient Registration from the top mega menu
Select Patient Care Summary Inquiry
3. Patient Care Summary Inquiry

Complete the Patient Care Summary Inquiry

Click **Submit**

**Patient Care Summary Inquiry**

* Indicates required fields

**Payer:** BCBSTX

**Provider Information**

* Organization

Express Entry - Provider: **Select One**

* NPI: 1234567893

**Patient Information**

Search Option: **Patient ID & DOB**

* Patient ID

* Patient Date of Birth

[Submit] [Clear Page]

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4. Patient Care Summary Disclaimer

After thorough review, click **I Agree**

**Note:** This legal disclaimer will populate each time a PCS is requested for a patient

Once accepted, the PCS will populate on the screen with a summary of the requested patient's information

**Patient Care Summary Disclaimer**

Information provided through the Patient Care Summary capability includes only information submitted by participating insurers for payment purposes.

1. Terms and Conditions

In addition to the provisions of the Organizational Access Agreement, your use of the Patient Care Summary capability is subject to the following:

- Only physicians treating the subject patient of the health record (or such physician's designee) may access this information and they must only use it, and are responsible for ensuring that it is only used, for such treatment purposes.
- Physicians must use their professional judgment to verify this information and should not exclusively rely on this information to treat their patients.

2. Disclaimers

- The information is not a medical record, nor is intended to be a complete record of a patient's health information and may contain errors.
- Certain information may have been intentionally excluded (due to its sensitivity - mental health, substance abuse, HIV/AIDS, sexually transmitted diseases, and addiction related costs - or for other reasons).

3. Confidential/Proprietary Information: Limited Use

The information contained in this Patient Care Summary is confidential and proprietary, protected by copyright and subject to protection under federal and state law. A printed copy may be included in the physician's own medical file for the subject patient. No other distribution, transmission or copying is permitted.

By clicking "I Agree" below, you confirm that you are a physician or a physician's designee and acknowledge and accept the foregoing obligations.

[Print]
5. Patient Care Summary Report (Example)

Patient Care Summary

Payer: MEDecision

Patient: SOPHIA AVAILITY
1234 Healthy Lane
Jacksonville, FL 32286
(555) 555-5555

Created On: December 9, 2010

Birthdate: February 2, 1990

Gender: Female

Patient Care Summary Disclaimer

Information provided through the Patient Care Summary capability includes only information submitted to participating insurance companies for payment purposes. The information is not a medical record, nor is it intended to be a complete record of a patient's health information. Certain information may have been intentionally excluded (due to its sensitivity - psychiatric, substance abuse, HIV/AIDS, sexually transmitted diseases, and abortion related data - or for other reasons) and the health record may also contain errors. Physicians must use their professional judgment to verify this information and should not exclusively rely on this information to treat their patients.

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- Social History
- Vital Signs

Allergies, adverse reactions, alerts - Back to Table of Contents

No Data Available

History of medication use - Back to Table of Contents

<table>
<thead>
<tr>
<th>Type (Brand</th>
<th>Drug Description</th>
<th>Route</th>
<th>Fill Date</th>
<th>Amount</th>
<th>Days Supplied</th>
<th>Prescriber</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trademarked Name</td>
<td>EFIDUC 0.1 - 2.5%</td>
<td>Adapalene-Benzoyl Peroxide Oel 0.1 - 2.5%</td>
<td>External</td>
<td>2014-03-08</td>
<td>45</td>
<td>30</td>
</tr>
</tbody>
</table>
5. Patient Care Summary Report *cont.*

### Problem List - Back to Table of Contents

<table>
<thead>
<tr>
<th>Type (Acute Chronic)</th>
<th>Condition</th>
<th>Severity</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute</td>
<td>Back Disorder, Lumbar</td>
<td>Low</td>
<td>2016-03-09</td>
<td>2016-03-10</td>
</tr>
<tr>
<td>Acute</td>
<td>Inflammation and Infection of Skin and Subcutaneous Tissue, Other</td>
<td>Low</td>
<td>2015-09-09</td>
<td>2015-09-09</td>
</tr>
<tr>
<td>Acute</td>
<td>Lymphatic Disorder, Other</td>
<td>Low</td>
<td>2014-12-19</td>
<td>2014-12-19</td>
</tr>
<tr>
<td>Chronic</td>
<td>Epilepsy</td>
<td>High</td>
<td>2014-04-08</td>
<td>2015-04-06</td>
</tr>
</tbody>
</table>

### History of Procedures - Back to Table of Contents

<table>
<thead>
<tr>
<th>Service</th>
<th>Procedure code</th>
<th>Service date</th>
<th>Servicing provider</th>
<th>Phone#</th>
</tr>
</thead>
<tbody>
<tr>
<td>EEG Awake and Asleep</td>
<td>95819</td>
<td>2014-04-08</td>
<td>QUEST DIAGNOSTICS INC</td>
<td>800-888-8333</td>
</tr>
<tr>
<td>MRI Brain Stem W/O &amp; W/O Eye</td>
<td>70553</td>
<td>2014-04-08</td>
<td>QUEST DIAGNOSTICS INC</td>
<td>800-888-8333</td>
</tr>
</tbody>
</table>

### Relevant diagnostic tests and/or laboratory data - Back to Table of Contents

<table>
<thead>
<tr>
<th>Class</th>
<th>Test</th>
<th>Abnormal value</th>
<th>Result</th>
<th>Units</th>
<th>Ref low</th>
<th>Ref high</th>
<th>Date</th>
<th>Source</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chemistry</td>
<td>Alanine aminotransferase [Enzymatic activity/volume] in Serum or Plasma</td>
<td>I</td>
<td>18</td>
<td>UI</td>
<td>9</td>
<td>46</td>
<td>2015-08-18</td>
<td>Available</td>
<td>Available</td>
</tr>
<tr>
<td>Chemistry</td>
<td>Albumin [Mass/volume] in Serum or Plasma</td>
<td>I</td>
<td>4.8</td>
<td>g/dL</td>
<td>3.6</td>
<td>5.1</td>
<td>2015-08-18</td>
<td>Available</td>
<td>Available</td>
</tr>
<tr>
<td>Chemistry</td>
<td>Albumin/Globulin [Mass Ratio] in Serum or Plasma</td>
<td>I</td>
<td>2.1</td>
<td>(calc)</td>
<td>1</td>
<td>2.5</td>
<td>2015-08-18</td>
<td>Available</td>
<td>Available</td>
</tr>
<tr>
<td>Chemistry</td>
<td>Alkaline phosphatase [Enzymatic activity/volume] in Serum or Plasma</td>
<td>I</td>
<td>68</td>
<td>UI</td>
<td>40</td>
<td>115</td>
<td>2015-08-18</td>
<td>Available</td>
<td>Available</td>
</tr>
<tr>
<td>Chemistry</td>
<td>Aspartate aminotransferase [Enzymatic activity/volume] in Serum or Plasma</td>
<td>I</td>
<td>22</td>
<td>UI</td>
<td>10</td>
<td>40</td>
<td>2015-08-18</td>
<td>Available</td>
<td>Available</td>
</tr>
</tbody>
</table>

### Encounters - Back to Table of Contents

<table>
<thead>
<tr>
<th>Type</th>
<th>Facility/Provider</th>
<th>Admit/Service Date</th>
<th>Discharge Date</th>
<th>LOS</th>
<th>Diagnosis/Specialty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist Visit</td>
<td>QUEST DIAGNOSTICS INC</td>
<td>2015-09-18</td>
<td></td>
<td>N/A</td>
<td>LABORATORY</td>
</tr>
</tbody>
</table>
5. Patient Care Summary Report cont.

### Immunizations

No Data Available

### Payers

<table>
<thead>
<tr>
<th>Subscriber ID</th>
<th>Member ID</th>
<th>Group ID</th>
<th>Line of Business</th>
<th>Plan</th>
<th>Eligibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>0000000897654321</td>
<td>97654321</td>
<td>ABC12345</td>
<td>PPO</td>
<td>ABC9876</td>
<td>2007-01-01 – 2299-12-31</td>
</tr>
</tbody>
</table>

### Plan of Care

No Data Available

### Social History

No Data Available

### Vital Signs

No Data Available

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**Allergies, adverse reactions, alerts** – Any patient allergies or instances where the patient experienced an adverse reaction to one or more medications.

**History of medication use** – Class of any prescription drugs filled at retail pharmacies billed during the given time period. Prescriptions billed on non-pharmacy claims, such as hospital and physician claims, are not included. The number of times each prescription was filled and the last time it was filled is included.

**Problem List** – All diagnosis by the service date. If more than one diagnosis was submitted on a claim, all of the diagnosis codes are listed.

**History of Procedures** – Procedure types, codes and a description of each procedure.

**Encounters** – Any admissions to an inpatient facility, such as hospitals, rehabilitation centers and other similar facilities, the number of emergency room visits that took place and were adjudicated during the given time period as well as all provider visits that were adjudicated during the time period.

**Plan of Care** – Treatment opportunities based on the clinical intelligence rules applied to the data. If the system detects a test that should be ordered, per evidence-based medicine, but no claim for that test was found during the time period, a message to the clinical staff displays in this section. *(i.e., the patient has diabetes and no claims for an annual dilated eye exam or A1C test are found or have been performed in the appropriate time frame, a treatment opportunity flag displays.)* This section also indicates any missing recommended preventive care opportunities, typically based on age and gender of the member as identified by Clinical Intelligence Rules.
6. Accessing the Patient Care Summary [option 2]

Select **Patient Registration** from the top mega menu

Select **Eligibility and Benefits Inquiry**

![Image of Availity Home menu with Patient Registration highlighted]

Complete the Eligibility and Benefits Inquiry screen

Click **Submit**

**Helpful Hint:**

For assistance completing and utilizing the Eligibility and Benefits Inquiry, reference the [General Eligibility and Benefit Tip Sheet](http://www.bcbsxx.com/provider) located on www.bcbsxx.com/provider

After completing a successful Eligibility and Benefits Inquiry, the Patient Care Summary option will be available at the top & bottom of the screen for **eligible** members only.

![Image of Patient Care Summary options]

* See page 7 for a list of exceptions
7. Patient Care Summary Exceptions (TX)

When a PCS return may be unavailable and/or exclude information:

- The Primary Access Administrator (PAA) for your Availity Patient Care Summary account has not granted you access to the Availity Patient Care Summary.
- The Eligibility & Benefits Inquiry was not returned successfully.
- The patient is a twin for which the Eligibility & Benefits inquiry requires the first name and last name to be entered.
- The patient pays out-of-pocket and no claim is filed for the service; BCBSTX has no record of the service.
- The claims were adjudicated by a payer or health plan other than BCBSTX that does not participate in the Availity Patient Care Summary program (Out-of-State).
- The patient has restricted access to his or her claim information.
- The services were performed too far in the past. BCBSTX returns results from the past 24 months.
- The patient is new and does not have claim history for BCBSTX.
- The patient resides outside of the area where Availity Patient Care Summary has been implemented.
- The service involves sensitive information, such as psychiatric treatment, substance abuse, genetic testing, or HIV/AIDS-related treatment.
- The patient is eligible for Medicare or has other primary health care coverage (coordination of benefits)
- Claim data has not completed the clinical intelligence rules application. Claims processed within 90 days may not be available to view on the Patient Care Summary.

Questions? Email the Provider Education Consultants at pecs@bcbstx.com.

Be sure to include your name, direct contact information, Tax ID or Billing NPI.