**User Story Number:** USIN-1

**User Story Name:** Remove Insurance Contact Prompt

**Priority:** (High, Medium, Low)

**Rational ID:**

**(Product Backlog ID: 425)**

**Service Request Number:**

**Author:** Amy Schott

# Background (If helpful, otherwise delete)

eInsurance is in the process of removing Insurance Contact Information (called Insurance Review in **GUI**) (Vista Knows it as **IC**). Insurance Contact Information is only available to insurance users. No one in Billing UR is able to see this data. The eInsurance has decided to move this data to a different location in VistA so that others can see it, too. This location will be under *Patient Policy*.

# Story

As an Insurance Verifier, I want IC selections to be removed from VistA, so that I am not distracted from with unused prompts.

# Conversation

Users impacted: Insurance Verifiers

Screens: Insurance Verifier Screen is the only screen that is requiring a change – screen name is **Patient Policy Information Screen**.

See the screenshot below of the current prompts:

**Patient Policy Information** Aug 25, 2016@14:54:14 Page: 1 of 8

For: NAME,PATIENT xxx-xx-xxxx mm/dd/yyyy

DARLENE TEST COMPANY Insurance Company \*\* Plan Currently Active \*\*

Insurance Company

Company: DARLENE TEST COMPANY1

Street: 1234

City/State:

Billing Ph:

Precert Ph:

Plan Information

Is Group Plan: YES

Group Name: NO GRP#

Group Number:

BIN: 234

+ Enter ?? for more actions

PI Change Plan Info GC Group Plan Comments CP Change Policy Plan

UI UR Info EM Employer Info VC Verify Coverage

ED Effective Dates CV Add/Edit Coverage AB Annual Benefits

SU Subscriber Update PT Pt Policy Comments BU Benefits Used

IP Inactivate Plan EA Fast Edit All EB Expand Benefits

EX Exit

Select Action: Next Screen// ea Fast Edit All

Now you may enter the patient specific policy information.

PT. RELATIONSHIP TO SUBSCRIBER: SELF//

NAME OF SUBSCRIBER: , SUBSCRIBEER, NAME Replace

EFFECTIVE DATE OF POLICY: JUN 20,2016//

INSURANCE EXPIRATION DATE:

PRIMARY CARE PROVIDER:

PRIMARY PROVIDER PHONE:

COORDINATION OF BENEFITS:

SOURCE OF INFORMATION:

PHARMACY RELATIONSHIP CODE:

PHARMACY PERSON CODE:

SUBSCRIBER PRIMARY ID: 2342XXX//

Do you want to enter/update Subscriber Secondary IDs? No// NO

SUBSCRIBER'S DOB: 11/07/19XX// (NOV 07, 19XX)

SUBSCRIBER'S SEX: MALE// MALE

SUBSCRIBER'S BRANCH: MARINE CORPS//

SUBSCRIBER'S RANK:

SUBSCRIBER'S STREET 1: 12345 TELLIE STREET Replace

SUBSCRIBER'S STREET 2:

SUBSCRIBER'S CITY: SUMMERSET//

SUBSCRIBER'S STATE: SOUTH DAKOTA//

SUBSCRIBER'S ZIP: 57769//

SUBSCRIBER'S PHONE: (111) 111-1111//

You can now edit information specific to the PLAN. Remember, updating

PLAN information will affect all patients with this plan, if it is a

group plan, and not just the current patient.

GROUP NAME: NO GRP#//

GROUP NUMBER:

BANKING IDENTIFICATION NUMBER: 234//

PROCESSOR CONTROL NUMBER (PCN): 32//

TYPE OF PLAN: MANAGED CARE SYSTEM (MCS)//

ELECTRONIC PLAN TYPE: MEDICARE A or B//

PLAN STANDARD FTF: MONTH(S)//

PLAN STANDARD FTF VALUE: 3//

PLAN FILING TIME FRAME:

IS UTILIZATION REVIEW REQUIRED:

AMBULATORY CARE CERTIFICATION:

IS PRE-CERTIFICATION REQUIRED?:

EXCLUDE PRE-EXISTING CONDITION:

BENEFITS ASSIGNABLE?: YES// YES

You can now enter a contact and relate it to a Claims Tracking Admission entry.

Select RELATED ADMISSION DATE:

Select Contact Date: TODAY// AUG 25, 2016

Are you adding 'AUG 25, 2016' as a new INSURANCE REVIEW? No// (No) ??

Select Contact Date: TODAY// n AUG 25, 2016@14:54

Are you adding 'AUG 25, 2016@14:54' as

a new INSURANCE REVIEW? No// n (No) ??

Select Contact Date: TODAY// ^...................

==

Notes: Please remove the narrative and prompt highlighted in yellow as part of our story.

The Insurance Contact Information prompts shall be removed from EA Fast Edit All action within the patient policy: PI > PI > VP > EA

# Detailed Listing of Acceptance Criteria

|  |  |  |
| --- | --- | --- |
| Requirement ID | Description | External Dependency  (Y/N)  If Y, provide organization and description |
| USIN-1.01 | Select EA from the Patient Policy Information Screen. Proceed through the function, we do not want to see the yellow highlighted text and we do not want the system to give us the yellow highlighted prompt |  |

# Tester Notes:

* Login as Insurance Verifier: Do not expect to see the narrative and prompt.
* Login as other role: Do not expect to see the narrative and prompt.

# Constraints

These changes are only related to Insurance Verifier users.

# Assumptions

Any data is in the “new” location after the previous system changes. Any movement of data is not part of this story.

# Approval Signatures

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**Revision History**

|  |  |  |  |
| --- | --- | --- | --- |
| Date | Version | Description | Author |
| 08/25/2016 | v0.01 | Original | Julie Mann, Leidos |