



**Georgia Department of Behavioral Health &
Developmental Disabilities**

Judy Fitzgerald, Commissioner

AVATAR

Netsmart Technologies Incorporated

Starting, please wait...

Admissions Process User Manual

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myAvatar Admission Process

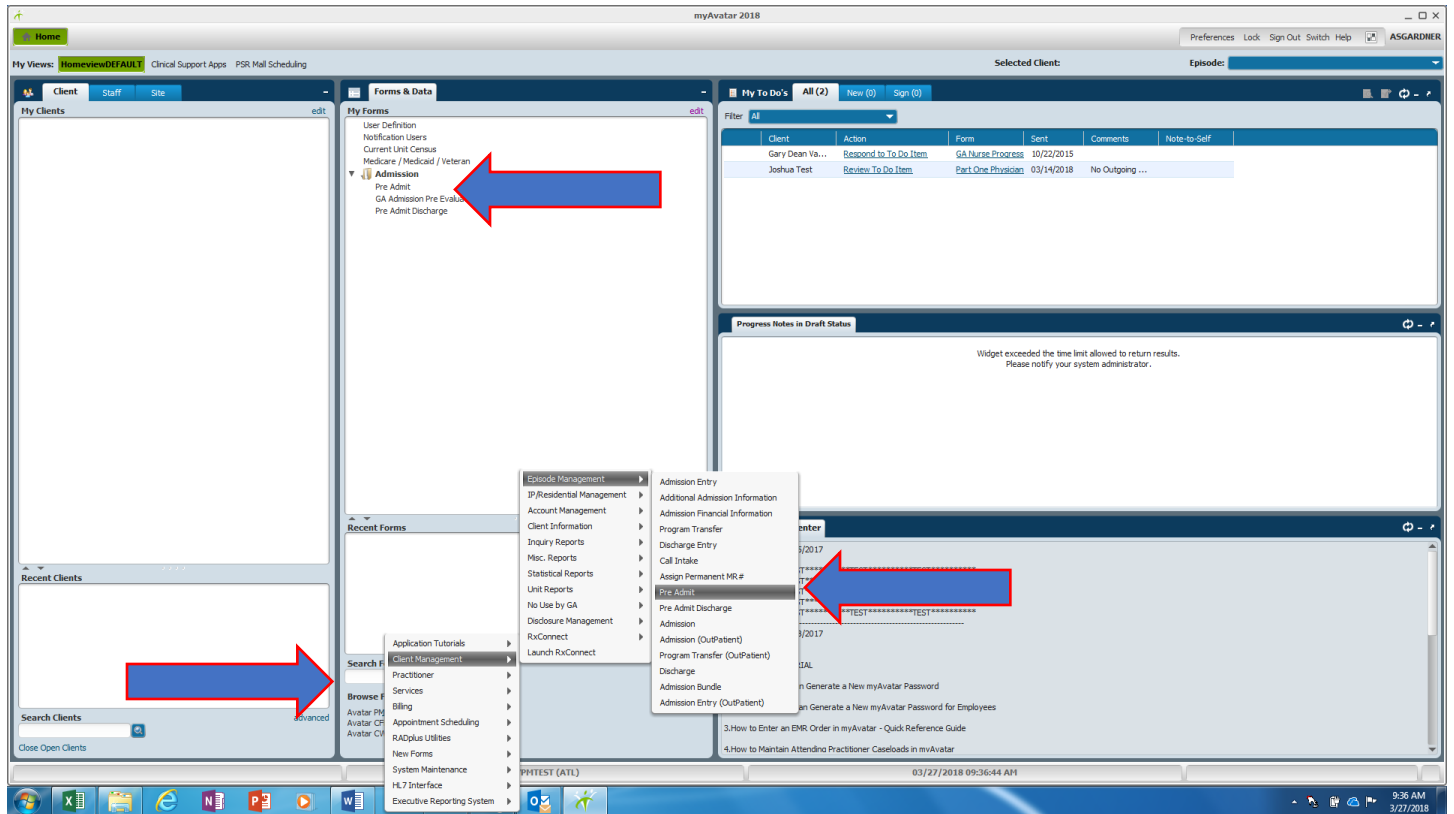
Overview: myAvatar functionality has been updated so that it is no longer necessary to discharge a 23 Hour Temporary Observation episode and create a new Inpatient episode when the individual is admitted to the hospital from 23 Hour Temporary Observation. These guidelines will instruct on how to completely and accurately create the episode for an individual.

There are three phases of movement that happen to all individuals served.

1. Pre-Admit – The Pre-Admit occurs as soon as the individual presents to the hospital and is accepted by a Nurse. It creates an open episode to enable the direct care staff to electronically enter clinical data.
2. Admit into Program Code – The admit to program code occurs after the admitting physician has made an initial determination of a disposition requiring individual movement from the (Pre-Admit) phase. The admit program code is determined by the [physician's order](#) and could be:
 - a. RBO100-Brief Assessment (for Non-Admits)
 - b. JAO260- Preadmit-23 Hour Observation
 - c. AAI600-Adult Mental Health
 - d. HAI600-Forensic Inpatient
 - e. HBI600-Forensic Maximum Secure (CSH Only)
3. Discharge/Release – this is the “final” phase of the individual’s presentation to the hospital process and occurs after the individual has had an initial assessment, and the admitting physician has made a final determination regarding the individual’s next course of treatment.

The first movement for all individuals is the Pre-Admit:

1. Pre-Admit Entry



There are three ways to access the Pre-Admit screen:

1. Add the Pre-Admit to My Forms
2. In the Search Forms field type 'Pre Admit' and select the 'Pre Admit' from the list
3. Use the Browse Forms: Avatar PM→Client Management→ Episode Management→'Pre Admit'

Conduct the “patient look-up” before pre-admitting the individual. Use as little information as possible. It is suggested that the first few characters of first and last name and sex are used as search criteria. This allows the system to identify all possible matches to minimize the risk of creating a duplicate ID for the individual.

- If the individual has never had an evaluation at any facility, click on “add new client” to obtain a new myAvatar number.
- If the individual has had an evaluation at any facility, click on the “select client” to pre-admit.

myAvatar 2018

Home New

New Client (000471926)

Pre Admit

Demographics

Client Demographics

Alias

Clinical Comments

Submit

Facility 44

Episode Number 1

Client Name TEST, ONEMORE

Sex Female Male Unknown

Date Of Birth 06/10/1954

Age 63

Preadmit/Admission Date 03/20/2018

Preadmit/Admission Time 09:56 AM

Program XXO102 - PreAdmit - Brief Asses...

Treatment Setting Outpatient

Treatment Service Brief (Less than 24 hours)

RRG Non-Admits/Outpatient

Priority Of Admission Emergency

Admitting Practitioner

Expected Date of Admission

Schedule Accepting Practitioner

Social Security Number

Social Security Number - 2

Social Security Number - 4

Pre-Admission Diagnosis

Ever A Client In This Hospital Yes No

Employer

Disposition

Pre-Admission Disposition

Team Assignment

On the Pre-admit tab, the RED fields are required to complete. DBHDD also requires additional information to be completed.

1. Client Name
2. Sex
3. Date of Birth
4. Preadmit/Admission Date
5. Preadmit/Admission Time
6. Social Security Number
7. Program – Always select XXO102-Pre Admit-Brief Assessment
8. Priority of Admission – Always “Emergency”
9. Admitting Practitioner = Nurse accepting/signing for patient
10. Verify the accuracy of the information entered on the screen
11. Click on the Demographics tab

myAvatar 2018

Home New

New Client (000471926)

Pre Admit

Pre-Admit

Demographics

Client Demographics

Alias

Clinical Summary

Comments

Submit

Online Documentation

Client Demographics

Client's Address - Street

Client's Address - Street 2

Client's Address - Zipcode

Client's Address - City

Client's Address - County

Client's Address - State

Client's Home Phone

Client's Work Phone

Client's Cell Phone

Client's Email Address

Communication Preference

Email Regular Mail Home Phone

Work Phone Cell Phone Do Not Contact

Text Consumer Portal

Maiden Name

Marital Status

Primary Language

Client Race

American Indian/Alaska Native

Ethnic Origin

Religion

Not Hispanic/Latino Origin

Hispanic/Latino Origin

Not Hispanic/Latino Origin

Unknown

on On The Following

Language

Country Of Origin

Education

Employment Status

Occupation

Alias

On the Demographics tab, you will complete the following:

1. Client Address
2. Client's Phone (at least 1 of the 3)
3. Marital Status (this is critical for DBHDD)
4. Primary Language
5. Client Race – select this from the drop-down*
6. Ethnic Origin – select this from the drop-down
7. Country of Origin
8. Pregnancy Status
9. Verify the accuracy of the information entered on the screen
10. Click on Submit

*Be sure that the Client Race selected is an active race. You should never see an entry like “Black (Inactive Code)” displayed in the Client Race field. If you do, change it to an active code.

This completes the creation of the Pre-Admit episode for the individual.

2. Admit to Program Code

The second entry is 'admit' to program code. This entry happens once the physician has assessed the individual, made a disposition for the individual and written a physician's order.

There are four scenarios for this movement:

1. Individual is to be a "non-admit"
2. Individual is admitted to Temporary Observation
3. Individual is admitted to Temporary Observation and subsequently admitted to an Inpatient Unit
4. Individual is admitted to an Inpatient Unit

Scenario #1: Individual is assessed and determined to be a non-admit. Use the Admission screen.

Select the individual in the Search Clients field
Open the Admission form

The screenshot displays a medical software interface with several panels. The 'My Forms' panel on the left lists various forms, with 'Admission' highlighted by a red arrow. The 'Search Clients' panel at the bottom left shows a search for 'Test, Joshua (000471879)', with a red arrow pointing to the client name. A context menu is open over the 'Admission' form, with a red arrow pointing to the 'Admission' option. The top right of the interface shows the 'My To Do's' section with a table of tasks.

Client	Action	Form	Sent	Comments	Note-to-Self
Gary Dean Va...	Respond to To Do Item	GA Nurse Progress	10/22/2015		
Joshua Test	Review To Do Item	Part One Physician	03/14/2018	No Outgoing ...	

There are three ways to access the Admission form:

1. Add the Admission form to My Forms
2. In the Search Forms field type Admis, and select Admission from the list
3. Use the Browse Forms: Avatar PM → Client Management → Episode Management → Admission
4. You should see the individual has a current XXO102-Pre-admit/Brief Assessment episode on the pre-display screen. The screen will automatically open to begin the non-admit entry. Highlight the XXO102-Pre-admit/Brief Assessment episode and click on 'Edit' to enter the individual into the correct program code.

Step One: Update the Program on the Admission tab of the Admission form.

The screenshot shows the 'Admission' form in a software application. The left sidebar has a 'Demographics' section highlighted with a red arrow. The main form area contains various input fields and dropdown menus. The 'Program' dropdown menu is open, showing a list of options with 'RBO100-Brief Assessment' selected. The 'Priority of Admission' is set to 'Emergency'. The 'Admission' tab is active in the top navigation bar.

The first screen to be completed/verified is the Admission tab on the Admission form.

1. Verify Client Name
2. Verify Sex
3. Verify Date of Birth
4. Update Preadmit/Admission Date to the correct date for the Non-Admit
5. Update Preadmit/Admission Time to the correct time for the Non-Admit
6. Program – Always change the program to RBO100-Brief Assessment
7. Verify Priority of Admission
8. Enter Admitting Practitioner
9. Enter/Verify Social Security Number - is this needed for non-admit???
10. Enter all other information known
11. Verify the accuracy of the information entered on the screen
12. Click on Demographics tab

Step Two: Complete/Verify the Demographics tab on the Admission form

The screenshot shows a web application interface for an admission form. The top navigation bar includes 'Chart' and 'Admission'. The left sidebar contains a menu with 'Admission' expanded, showing 'Demographics' (highlighted in green), 'Client Demographics', 'Alias', 'Other Client Data', 'Inpatient/Partial/Day T...', 'Co...', and 'Site'. A red arrow points to the 'Demographics' tab. The main content area is titled 'Client Demographics' and contains the following fields:

- Address - Street: 2 PEACHTREE ST NW
- Address - Street 2: [Empty]
- Zipcode: 30303
- City: ATLANTA
- State: GEORGIA
- County: FULTON
- Home Phone: 404-222-3333
- Work Phone: 404-555-8888
- Cell Phone: [Empty]
- Email Address: [Empty]
- Communication Preference: Email Regular Mail Home Phone
- Maiden Name: [Empty]
- Marital Status: [Dropdown]
- Primary Language: [Dropdown]
- Client Race: White
- Ethnic Origin: Not Hispanic/Latino ...
- Religion: [Dropdown]
- Client Declined To Provide Information On The Following: Ethnic Origin Race Language
- Place Of Birth: [Empty]
- Country Of Origin: [Dropdown]
- Education: [Dropdown]

The second tab to be completed/verified on the Admission form is the Demographics tab.

1. Verify/update Client Address
2. Verify/update Client's Phone (at least 1 of the 3)
3. Verify/update Marital Status (this is critical for DBHDD)
4. Verify/update Primary Language
5. Verify/update Client Race
6. Verify/update Ethnic Origin
7. Verify/update Country of Origin
8. Verify/update Pregnancy Status
9. Verify/update Citizenship – select Yes or No
10. Enter all known information about the Demographics
11. Verify the accuracy of the information entered on the screen
12. Click on the "Other Client Data" tab.

Step Three: Complete the Other Client Data tab on the Admission form.

The screenshot displays the 'Admission' form interface. On the left sidebar, the 'Other Client Data' tab is highlighted in green, and a red arrow points to the 'Site Specific Admission' button. The main form area is divided into several sections:

- Residence At Admission / Discharge:** A dropdown menu set to 'FAMILY HOME - WITH RELATIVES'.
- Homeless Indicator:** A dropdown menu.
- Client's Living Arrangements:** A dropdown menu.
- Number Living In Household:** A text input field.
- Prescreened:** Radio buttons for 'Yes' and 'No'.
- Prescreened By Whom:** A text input field.
- School Record Requested:** Radio buttons for 'Yes' and 'No'.
- Immunization Records Requested:** Radio buttons for 'Yes' and 'No'.
- Informed of Smoking Policy:** Radio buttons for 'Yes' and 'No'.
- Veteran:** Radio buttons for 'Yes', 'No', and 'Unknown'.
- Military Related Disability:** Radio buttons for 'Yes' and 'No'.
- Military Branch Of Service:** A dropdown menu.
- Military Service From:** A date input field with 'T', 'Y', and 'M' buttons.
- Military Service To:** A date input field with 'T', 'Y', and 'M' buttons.
- Handicap-1, Handicap-2, Handicap-3:** Three dropdown menus.
- Current Medications - 1, Current Medications - 2, Current Medications - 3:** Three dropdown menus.

The third tab to complete is the Other Client Data tab on the Admission form.

1. Select the Residence At Admission/Discharge from the drop-down list. This information is where the individual sleeps at night.
2. Homeless Indicator
3. Client's Living Arrangements
4. Enter all known information about the Other Client Data
5. Verify the accuracy of the information entered on the screen
6. Click on the Site Specific Admission tab

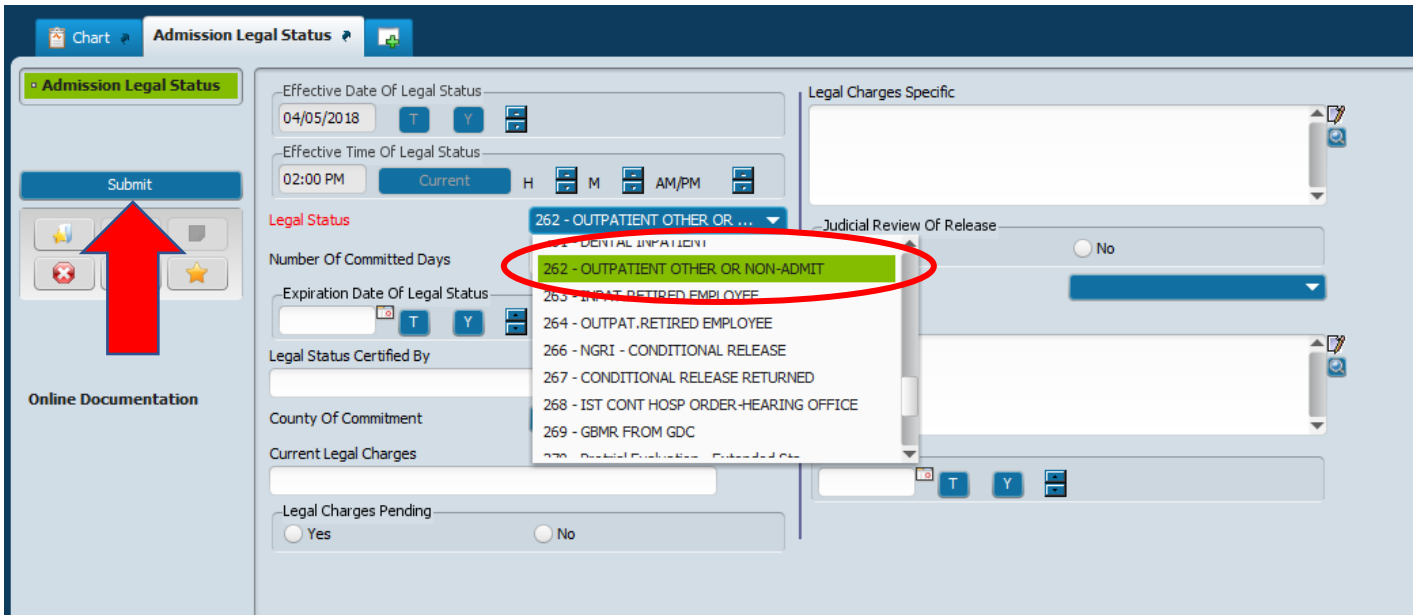
Step Four: Complete the Site Specific Admission tab on the Admission form.

The screenshot shows the 'Site Specific Admission' tab of an admission form. The left sidebar contains a navigation menu with 'Site Specific Admission' highlighted, a 'Submit' button, and a red arrow pointing to it. The main form area is divided into several sections: 'Type Of Admission' (Transfer), 'Reason For Admission' (FAILURE TO TAKE MEDICATION), 'Community Screening Status' (Transferred), 'Admission Alert Types' (checkboxes for Medical Concern, Elopements, Fire Setting), 'Client Level Of Observation' (ROUTINE), 'Disability Category' (Mental Health), 'Chief Complaint' (text area), 'Came From Jail' (radio buttons), 'Sensory Impairment' (No sensory impairment), 'English Proficiency' (Proficient in English), 'Communication' (No impairment noted), 'Other Languages Spoken' (checkboxes for Chinese, English, French), 'Client Pregnant At Time Of Admission' (radio buttons), 'Number Of Children' (text field), 'Admission Staff' (text field), 'History Of Present Illness' (text area), 'Pertinent Past History' (text area), 'Corrections Inmate Number' (text field), 'Admission County of Commitment' (dropdown), and 'Origination Referral' (dropdown).

The fourth tab on the Admission form is the Site Specific Admission tab.

1. Select the Type of Admission from the drop-down list.
 - a. First Admission – This is the first time the individual has been to the facility
 - b. Re-admission – The individual has other admissions to the facility
 - c. Transfer – The individual came from another state hospital facility
2. Select the Reason for Admission from the drop-down list.
3. Select the Community Screening Status from the drop-down list.
4. Select the Client Level of Observation from the drop-down list.
5. Select the Disability Category from the drop-down list.
6. Select the appropriate response for “Came From Jail”
7. Select the Sensory Impairment from the drop-down list.
8. Select the English Proficiency from the drop-down list.
9. Select the Communication from the drop-down list.
10. Verify the accuracy of the information entered on the screen
11. Click Submit

Step Five: Enter the Admission Legal Status



The screenshot shows the 'Admission Legal Status' form. A dropdown menu is open for the 'Legal Status' field, listing various options. The option '262 - OUTPATIENT OTHER OR NON-ADMIT' is highlighted in green and circled in red. A red arrow points to the 'Submit' button on the left side of the form.

Effective Date Of Legal Status: 04/05/2018

Effective Time Of Legal Status: 02:00 PM

Legal Status: 262 - OUTPATIENT OTHER OR NON-ADMIT

Number Of Committed Days: []

Expiration Date Of Legal Status: []

Legal Status Certified By: []

County Of Commitment: []

Current Legal Charges: []

Legal Charges Pending: Yes No

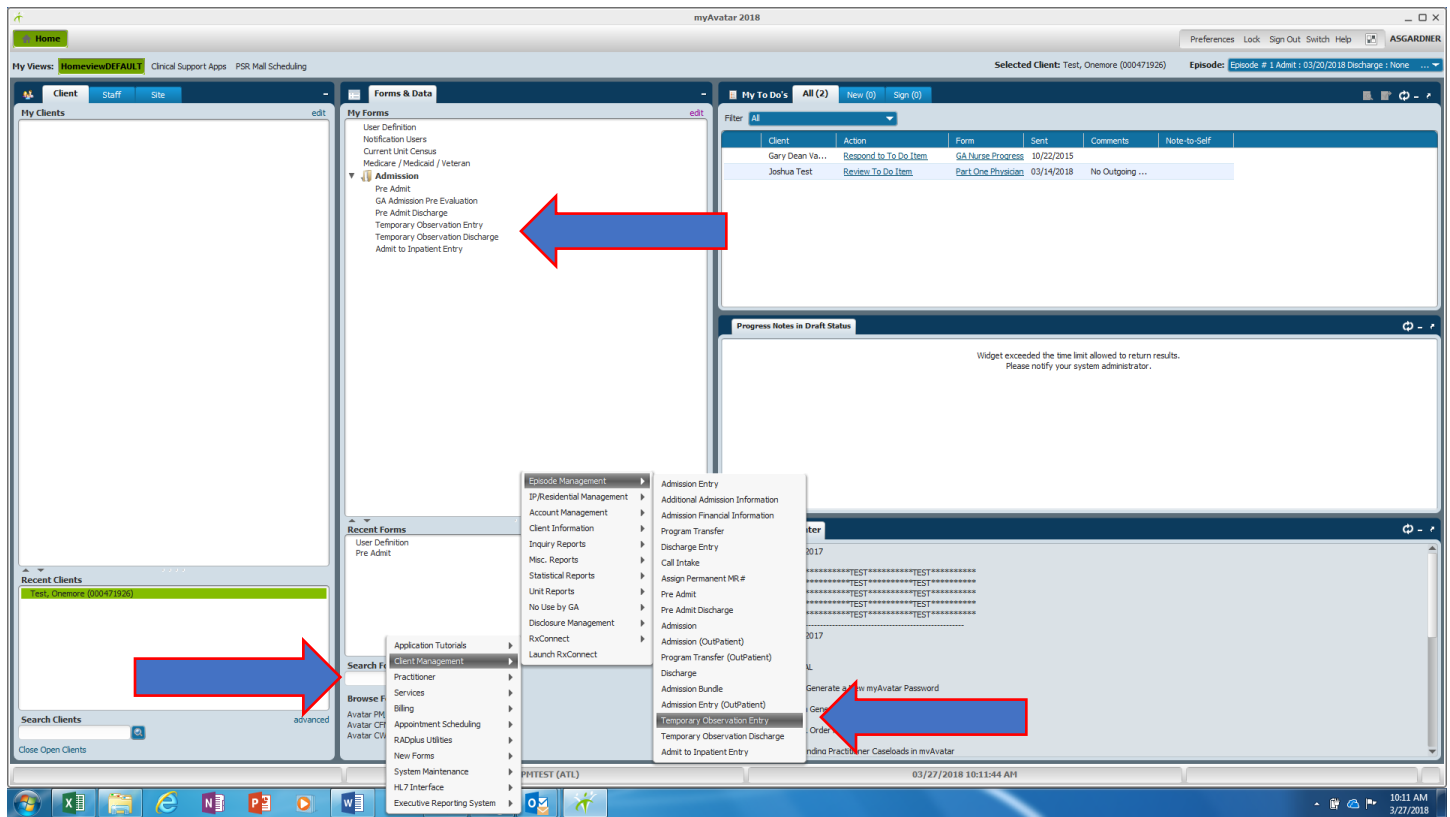
Judicial Review Of Release: No

The second screen is the Admission Legal Status screen.

1. Select the appropriate legal status - NOTE: **262-Outpatient Other or Non-Admit** will always be the legal status used for all non-admits.
2. Enter all known information about the Admission Legal Status
3. Verify the accuracy of the information entered on the screen
4. Click on Submit

This completes the process for entering an RBO100-Brief Assessment (Non-Admit) episode.

Scenario #2: Individual admitted to Temporary Observation. Use the Temporary Observation Entry bundle.



There are three ways to access the Temporary Observation Entry bundle:

5. Add the Temporary Observation Entry bundle to My Forms
6. In the Search Forms field type Temp, and select Temporary Observation Entry from the list
7. Use the Browse Forms: Avatar PM → Client Management → Episode Management → Temporary Observation Entry

Conduct the “patient look-up” before pre-admitting the individual. Use as little information as possible. Suggest using first few characters of first and last name and sex as search criteria. This allows the system to identify all possible matches to minimize the risk of creating a duplicate ID for the individual.

You should see the individual has a current XXO102-Pre-admit/Brief Assessment episode on the pre-display screen. The screen will automatically open to begin the temporary observation entry. Highlight the XXO102-Pre-admit/Brief Assessment episode and click on ‘Edit’ to enter the individual into the correct program code.

Step One: Perform a program transfer

The screenshot shows the 'Program Transfer' form in a software interface. A white box at the top right says 'Enter all required fields'. Three blue arrows point to specific fields: 'Date Of Transfer' (02/20/2018), 'Program' (JAO260-Preadmit-23 Hour Observation), and 'Time Of Transfer' (Current). The form includes various dropdown menus and input fields for patient information, treatment settings, and billing codes.

The first screen is the Program Transfer screen. The information in RED is required and must be completed on this screen:

1. Date of Transfer: Verify the date is correct. If not, update to the appropriate date of the transfer.
2. Program: Select JAO260-Preadmit-23 Hour Observation from the drop-down list.
3. Time of Transfer: Verify the time is correct. If not, update to the appropriate time of the transfer.
4. Verify the accuracy of the information entered on the screen

The Program Transfer form should look like the example below, with appropriate date and time, before clicking submit.

This screenshot shows the 'Program Transfer' form with the 'Submit' button highlighted by a red arrow. The form is filled with data: Facility 44, Date Of Transfer 03/22/2018, Program JAO260-Preadmit-23 Hour Obse..., and Time Of Transfer 12:00 PM. The patient information at the top includes 'TEMPOBS,TEST (000471893)' and 'Ep: 1 : XXO102 - PreAdmit - Brief Assessment'.

5. Click Submit

Step Two: Enter the GA Admit Supplemental Information

myAvatar 2018

Home goofy T

TEST, GOOFY (000471925) Ep: 1 : JAO260-Pre-admit-23 Hour Observation Location: , ,
M Problem P: - Attn. Pract.: No Entry
DX P: Adm. Pract.: No Entry

Chart GA Admit Supplemental

GA Admit Supplemental Consumer's Core Provider

Submit

Access Mental Health Agency, LLC

Non-Core / OTHER (comments required)

Unknown (comments required)

Non-Applicable / NA

None

A Family First Community Services, Inc

Access Mental Health Agency, LLC

Advantage Behavioral Health Systems

Agape Behavioral Healthcare, Inc

The second screen is the GA Admit Supplemental screen.

1. Select Consumer's Core Provider from drop-down
2. Verify the accuracy of the information entered on the screen
3. Click Submit

Step Three: Enter the Client County / Region information

myAvatar 2018

Home goofy T

TEST, GOOFY (000471925) Ep: 1 : JAO260-Pre-admit-23 Hour Observation Location: , ,
M Problem P: - Attn. Pract.: No Entry
DX P: Adm. Pract.: No Entry

Chart Client County / Region

Client County / Region

County Of Residence

BALDWIN

Region Of Residence

Region 2

Region Of Responsibility

Region 2

Update Based On Client's Current Zipcode

Submit

Online Documentation

The third screen is the Client County/Region screen. This information may be prepopulated if the individual's address is entered when the Pre-Admit episode was created. Out of state individuals often need this screen completed.

1. Select County of Residence from drop-down – the remaining fields automatically populate
2. Verify the accuracy of the information entered on the screen
3. Click Submit

Step Four: Enter the Admission Legal Status

The screenshot shows the 'Admission Legal Status' form. On the left, there is a 'Submit' button and an 'Online Documentation' section with icons for help, refresh, and star. The main form area contains several fields: 'Effective Date Of Legal Status' (02/20/2018), 'Effective Time Of Legal Status' (08:00 AM), 'Legal Status' (a dropdown menu with a red circle around it), 'Number Of Committed Days', 'Expiration Date Of Legal Status', 'Legal Status Certified By', 'County Of Commitment', 'Current Legal Charges', and 'Legal Charges Pending' (Yes/No radio buttons). The dropdown menu is open, showing options: '271 - Temp Obs (23 hr) Eval, Invol', '272 - Temp Obs (23 hr) Eval, Vol', '285 - IST, Post Restoration', '286 - OutPt IST, Monitored', '287 - IST RETURN ON COB', '300 - Juv Ct Order, Study/Report', '301 - Juv Ct Order, Competency', and '302 - Juv Ct Order, Transfer Eval'. The first two options are highlighted in green.

The fourth screen is the Admission Legal Status screen.

NOTE: When creating the JAO260 Preadmit – 23 Hour Observation episode, it is extremely important that the legal status field be accurate with either “271 – Temp Obs (23 hr) Eval, Invol” or “272 – Temp Obs (23 hr) Eval, Vol” as shown above.

1. Select Legal Status from drop-down
2. Verify the accuracy of the information entered on the screen.
3. Click Submit

Step Five: Enter the Admission Referral Information

The screenshot displays the 'Admission Referral Information' screen. At the top, the patient's name 'TEST, GOOFY (000471925)' and episode of care 'Ep: 1 : JAO260-Preadmit-23 Hour Observation' are visible. The 'Primary Referral Source Code' field is highlighted with a red circle. Below it are dropdown menus for 'Primary Referral Source Category' and 'Primary Referral Source - Specialty'. To the right, there are several text input fields for 'Primary Referral Source - Street Address 2', 'Primary Referral Source - Zipcode', 'Primary Referral Source - City', 'Primary Referral Source - County', 'Primary Referral Source - State', and 'Primary Referral Source - Contact'. A red arrow points to the 'Submit' button at the bottom left of the form area.

The fifth screen is the Admission Referral Information screen. The referral information should reflect who or what agency sent the individual to the facility for evaluation/treatment.

1. Select Primary Referral Source Code – type the first 4-5 characters in the primary referral source name. Then select the source from the list of options based on the search criteria you entered.
 - a. If the individual is a “walk-in”, enter “Self”.
 - b. ~~If the referring agency is not listed, enter “Other”, then enter the name of the agency in the “Primary Referral Source – Agency” field. Should NEVER use Other~~
 - c. If the appropriate code is not found in the drop-down list, contact the Application Support Specialist and request it be added.
2. Once the Primary Referral Source Code is selected, the remaining fields will populate based on the selection made.
3. Verify the accuracy of the information entered on the screen.
4. Click Submit

Step Six: Enter the Client's Representatives

The screenshot shows the 'Client's Representatives' screen in the myAvatar 2018 system. The page header includes a home button, the user 'goofy T', and patient information for 'TEST, GOOFY (000471925)'. The main content area features a 'Client's Representatives' tab and a table with columns for 'Representative Last Name', 'Representative First Name', 'Representative Su...', and 'Representative's Relationship To Client'. Below the table are buttons for 'Add New Item', 'Edit Selected Item', and 'Delete Selected Item'. A form below the table contains fields for 'Representative Last Name', 'Representative First Name', 'Representative Suffix', 'Representative's Relationship To Client', 'Representative Living With Client', 'Representative Number', 'Representative Address - 1', 'Representative Address - 2', 'Representative Zip Code', 'Representative City', 'Representative County', 'Representative State', 'Representative Home Phone Number', 'Representative Work Phone Number', 'Representative Cell Phone Number', and 'Representative Other Phone Number'. A 'Submit' button is located at the bottom left. Three callouts are present: #1 points to the 'Input Client's Represent...' tab, #2 points to the 'Add New Item' button, and #3 points to the 'Representative Last Name' field.

The sixth screen is the Client's Representatives screen.

1. Click on the Input Client's Representatives tab on the left side of the screen
2. Click on Add New Item
3. Enter all information known about the Representative
4. If more than one Representative needs to be entered, repeat these steps starting with the Add New Item button
5. Verify the accuracy of the information entered on the screen.
6. Click Submit

Step Seven: Enter the Client's Relatives

myAvatar 2018

Home goofy T

TEST, GOOFY (000471925)
M

Chart Client's Relatives

Client's Relatives

Input Client's Relatives

Submit

Submit

Online Documentation

Client's Relatives

Relative Last Name	Relative First Name	Relative S...	Relative's Relationship To Client	Is Relative Living	Relative Living With Client
--------------------	---------------------	---------------	-----------------------------------	--------------------	-----------------------------

Add New Item Edit Selected Item Delete Selected Item

Relative Last Name

Relative's Address

Relative First Name

Relative Zip Code

Relative City

Relative Suffix

Relative State

Relative's Relationship To Client

Relative Home Phone Number

Relative Work Phone Number

Relative Other Phone Number

Is Relative Living

Relative Living With Client

The seventh screen is the Client's Relatives screen.

1. Click the Input Client's Relatives tab on the left side of the screen
2. Click the Add New Item button
3. Enter all known information about the Relative
4. If more than one Relative needs to be entered, repeat these steps starting with the Add New Item button
5. Verify the accuracy of the information entered on the screen
6. Click Submit

Step Eight: Enter the Emergency Contacts

myAvatar 2018

Home goofy T

TEST, GOOFY (000471925)
M

Chart Emergency Contacts

Emergency Contacts
Input Emergency Conta...

Submit

Emergency Contact Last Name Emergency Contact First Name Emergency Contact Suffix Emergency Contact's Relationship To Client

Add New Item Edit Selected Item Delete Selected Item

Emergency Contact Last Name

Emergency Contact First Name

Emergency Contact Suffix

Emergency Contact's Relationship To Client

Emergency Contact Living With Client

Emergency Contact's Address

Emergency Contact Zip Code

Emergency Contact City

Emergency Contact State

Emergency Contact Home Phone Number

Emergency Contact Work Phone Number

Emergency Contact Other Phone Number

The eighth screen is the Emergency Contacts screen.

1. Click the Input Emergency Contacts tab on the left side of the screen
2. Click the Add New Item button
3. Enter all known information about the Emergency Contact
4. If more than one Emergency Contact needs to be entered, repeat the steps starting with the Add New Item button
5. Verify the accuracy of the information entered on the screen
6. Click Submit

Step Nine: Enter the Client Employment

myAvatar 2018

Home goofy T

TEST,GOOFY (000471925) Ep: 1 : JAO260-Preadmit-23 Hour Observation Location: , ,
M Problem P: - Attn. Pract.: No Entry
DX P: Adm. Pract.: No

Chart Client Employment

Client Employment

Submit

Employment Status

- FULL TIME
- HOMEMAKER
- NOT LABOR FORCE
- OTHER
- PART TIME
- RETIRED
- STUDENT-WORK
- UNEEMPLOYED

Client Employer Address

Client Employer Zipcode

Client Employer City

Client Employer State

Client Employer Phone Number

The ninth screen is the Client Employment screen.

1. Select Employment Status from the drop-down
2. Complete remaining fields with all appropriate/known information
3. Verify the accuracy of the information entered on the screen
4. Click Submit

Step Ten: Enter Income and Benefits

myAvatar 2018

Home goofy T

TEST,GOOFY (000471925) Ep: 1 : JAO260-Preadmit-23 Hour Observation Location: , ,
M Problem P: - Attn. Pract.: No Entry
DX P: Adm. Pract.: No

Chart Income And Benefits

Income And Benefits

Submit

Receives Social Security
 Yes No

Social Security Amount

Receives Child (TANF)
 Yes No

Child (TANF) Amount

Receives Welfare (SSI)
 Yes No

Welfare (SSI) Amount

Receives Vet/Military
 Yes No

Vet/Military Amount

Receives Retirement
 Yes No

Retirement Amount

Receives Child Support
 Yes No

Child Support Amount

Receives SSI Disability
 Yes No

Social Security Disability Amount

Payee Name

Received Other Benefits
 Yes No

Other Benefit Amount

Other Benefit Type

The tenth screen is the Income and Benefits screen.

1. Complete all appropriate/known information
2. Verify the accuracy of the information entered on the screen
3. Click Submit

Step Eleven: Enter Medicare / Medicaid / Veteran information

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Home goofy T

TEST, GOOFY (000471925) M Ep: 1 : JAO260-Preadmit-23 Hour Observation Location: , ,
Problem P: - Attn. Pract.: No Entry
DX P: Adm. Pract.: No Entry

Chart Medicare / Medicaid / Veteran

Medicare / Medicaid / V...
Insurance Information

Submit

Veteran Number

Medicare Part A Eligible
 Yes No

Medicare Part A Eligibility Effective Date

Medicare Part A Eligibility Termination Date

Medicare Part B Eligible
 Yes No

Medicare Part B Eligibility Effective Date

Medicare Part B Eligibility Termination Date

Medicare Part D Eligible
 Yes No

Medicare Part D Plan

Medicare Part D Eligibility Effective Date

Medicare Part D Eligibility Termination Date

Medicare Number

Medicaid Eligible
 Yes No

Medicaid Eligibility Effective Date

Medicaid Eligibility Termination Date

Medicaid Type

Medicaid Number

NRI defined medicare status

The eleventh screen is the Medicare / Medicaid / Veteran screen.

1. Enter all appropriate/known information
2. Verify the accuracy of the information entered on the screen
3. Click Submit

Step Twelve: Enter Georgia Hold Order Status information as appropriate

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TEST, GOOFY (000471925) M Ep: 1 : JAO260-Preadmit-23 Hour Observation Location: , ,
Problem P: - Attn. Pract.: No i
DX P: Adm. Pract.: No i

Chart Georgia Hold Order Status

Georgia Hold Order Stat...

Submit

Hold Order Date

Hold Order Time

Reason For Hold

Notes

Hold Order Cancel Date

Hold Order Cancel Time

Hold Order Source

Online Documentation


1. Enter all required fields
2. Enter all other information as appropriate/known
3. Verify the accuracy of the information entered on the screen
4. Click Submit

NOTE: If there is no Hold Order for the individual, click on the red stop sign X to close the screen.

This completes the process for admitting an individual to Temporary Observation (23 Hour).

If a Brief Client Inquiry is run, it will show the original admission and the transfer.

Page 1 of 1		GA Reg Hosp at Atlanta 3073 Panthersville Road Decatur GA 30034-3828 Brief Client Inquiry GA			Run Date: 2/20/2018		
Client Name: TEST_ONE Client ID: 484567 Last Program / Facility #: CID: Date of Birth: 5/13/1963 Primary Referral Source:		Sex: Female Ethnic Origin / Race: White Last Admission Date / Facility #: 02/20/2018 / 44 Last Discharge Date / Facility #: Attending Clinician: Primary Therapist:					
CLIENT MOVEMENT HISTORY							
EVENT	FROM	TO	DATE	ATT. CLINICIAN	FAC#	ADM#	LOS
Admission		XXO102	02/20/2018		44	1	
Transfer	XXO102	JAO260	02/20/2018		44	1	



Scenario #3: Individual admitted to Temporary Observation and subsequently the Inpatient Unit. Use the Temp Obs to Inpatient Entry bundle.

Perform Client Look Up

Open the Temp Obs to Inpatient Entry bundle

Select the JAO260-Preadmit-23 Hour Observation episode and click the Edit button

Step One: Complete the Admission tab on the Admission form.

The first screen is the Admission screen. On the Admission tab, the RED fields are required to complete. These include:

13. Verify Client Name
14. Verify Sex
15. Verify Date of Birth
16. Update Preadmit/Admission Date to the correct date for the Admission
17. Update Preadmit/Admission Time to the correct time for the Admission
18. Program – This is determined by the physician’s order. Select the appropriate inpatient program: AAI600-Adult Mental Health or HAI600-Forensic Inpatient
19. Verify Priority of Admission
20. Enter Admitting Practitioner
21. Enter Attending Physician
22. Enter/Verify Social Security Number
23. Enter all other information known
24. Verify the accuracy of the information entered on the screen
25. Click on Demographics tab

Step Two: Complete the Demographics tab on the Admission form

The screenshot shows the 'Admission' form with the 'Demographics' tab selected. The left sidebar contains a navigation menu with 'Demographics' highlighted. A red arrow points to this menu item. The main form area is divided into two sections: 'Client Demographics' and 'Alias'. The 'Client Demographics' section includes fields for Address - Street (2 PEACHTREE ST NW), Address - Street 2, Zipcode (30303), City (ATLANTA), State (GEORGIA), and County (FULTON). It also includes Home Phone (404-222-3333), Work Phone (404-555-8888), and Cell Phone fields. There are dropdown menus for Marital Status, Primary Language, Client Race (White), Ethnic Origin (Not Hispanic/Latino ...), and Religion. A checkbox section allows for declining to provide information on Ethnic Origin, Race, and Language. Below this are fields for Place Of Birth, Country Of Origin, Education, Employment Status, and Occupation. The 'Communication Preference' section has radio buttons for Email, Regular Mail, Home Phone, Work Phone, Cell Phone, Do Not Contact, and Text, along with a Consumer Portal option. The 'Alias' section contains ten input fields labeled Alias 1 through Alias 10. At the bottom, there is a Pregnancy Status dropdown menu and an Expected Due Date field.

The second tab on the Admission form is the Demographics tab.

13. Client Address
14. Client's Phone (at least 1 of the 3)
15. Marital Status (this is critical for DBHDD)
16. Primary Language
17. Verify/update Client Race
18. Verify/update Ethnic Origin
19. Country of Origin
20. Pregnancy Status
21. Citizenship – select Yes or No
22. Enter all known information about the Demographics
23. Verify the accuracy of the information entered on the screen
24. Click on the "Other Client Data" tab.

Step Three: Complete the Other Client Data tab on the Admission Form.

The screenshot shows the 'Admission' form with the 'Other Client Data' tab selected in the left sidebar. A red arrow points to this tab. The main form area contains the following fields:

- Residence At Admission / Discharge: HOME - WITHOUT RELATIVES
- Homeless Indicator: [Dropdown]
- Client's Living Arrangements: [Dropdown]
- Number Living In Household: [Text Input]
- Prescreened: Yes (selected) / No
- Prescreened By Whom: [Text Input]
- School Record Requested: Yes / No
- Immunization Records Requested: Yes / No
- Military Related Disability: Yes / No
- Military Branch Of Service: [Dropdown]
- Military Service From: [Text Input]
- Military Service To: [Text Input]
- Handicap-1: [Dropdown]
- Handicap-2: [Dropdown]
- Handicap-3: [Dropdown]
- Current Medications - 1: [Dropdown]

The third tab on the Admission form is the Other Client Data tab.

7. Select the Residence At Admission/Discharge from the drop-down list. This information is where the individual sleeps at night.
8. Homeless Indicator
9. Client's Living Arrangements
10. Enter all known information about the Other Client Data
11. Verify the accuracy of the information entered on the screen
12. Click on the Inpatient/Partial/Day T... tab

Step Four: Complete the Inpatient/Partial/Day T... tab on the Admission Form

The screenshot shows the 'Admission' form with the 'Inpatient/Partial/Day T...' tab selected in the left sidebar. A red arrow points to this tab. The main form area contains the following fields:

- Unit: EAST
- Room: 22
- Bed: 31
- Licensed/Unlicensed: Licensed
- Room And Board Billing Code: (ARHAMH) All Inclusive Rate - Adult Psychiatric
- Admission Charge Code: [Dropdown]
- Daily Charge Code: [Dropdown]
- Partial Hospitalization Days: All Days, All Week Days, Friday, Monday
- Partial Hospitalization Effective Date: [Text Input]
- Partial Hospital Billing Code: [Dropdown]
- Partial Hospital Billing Code 2: [Dropdown]
- Partial Hospitalization Hours: [Text Input]

The fourth tab on the Admission form is the Inpatient/Partial/Day T... tab.

1. Select the Unit from the drop down
2. Select the Room from the drop down
3. Select the first available Bed from the drop down
4. **Never** enter Admission Charge Code, Daily Charge Code nor any Partial Hospitalization fields
5. Verify the accuracy of the information entered on the screen
6. Click on the Site Specific Admission tab.

Step Five: Complete the Site Specific Admission tab on the Admission Form.

The screenshot shows the 'Site Specific Admission' tab of an admission form. The left sidebar contains a navigation menu with 'Site Specific Admission' highlighted. Below the menu is a 'Submit' button and a red arrow pointing to it. The main form area is divided into several sections: 'Type Of Admission' (First Admission), 'Reason For Admission' (DANGEROUS TO SELF DUE TO MENTAL ILLNESS), 'Community Screening Status' (Transferred), 'Admission Alert Types' (checkboxes for medical concern, elopements, and fire setting), 'Client Level Of Observation' (LINE OF SIGHT), 'Disability Category' (Mental Health), 'Chief Complaint' (text area), 'Came From Jail' (radio buttons for Yes/No), 'Sensory Impairment' (No sensory impairment), 'English Proficiency' (Proficient in English), 'Communication' (No impairment noted), 'Other Languages Spoken' (checkboxes for Chinese, English, French), 'Client Pregnant At Time Of Admission' (radio buttons for Yes/No), 'Number Of Children' (text field), 'Admission Staff' (text field), 'History Of Present Illness' (text area), 'Pertinent Past History' (text area), 'Corrections Inmate Number' (text field), 'Admission County of Commitment' (dropdown menu), and 'Origination Referral' (dropdown menu).

The fifth tab on the Admission form is the Site Specific Admission tab.

12. Select the Type of Admission from the drop-down list.
 - a. First Admission – This is the first time the individual has been to the facility
 - b. Re-admission – The individual has other admissions to the facility
 - c. Transfer – The individual came from another state hospital facility
13. Select the Reason for Admission from the drop-down list.
14. Select the Community Screening Status from the drop-down list.
15. Select the Client Level of Observation from the drop-down list.
16. Select the Disability Category from the drop-down list.
17. Select the appropriate response for “Came From Jail”
18. Select the Sensory Impairment from the drop-down list.
19. Select the English Proficiency from the drop-down list.
20. Select the Communication from the drop-down list.
21. Verify the accuracy of the information entered on the screen
22. Click Submit

Step Six: Enter the Admission Legal Status

The screenshot shows a web-based form titled 'Admission Legal Status'. On the left sidebar, there is a 'Submit' button highlighted with a red arrow. The main form area contains several input fields and dropdown menus:

- Effective Date Of Legal Status:** 03/27/2018
- Effective Time Of Legal Status:** 12:42 PM, Current
- Legal Status:** 210 - MH TRANS ER TO EVAL FA...
- Number Of Committed Days:** [Empty field]
- Expiration Date Of Legal Status:** [Empty field]
- Legal Status Certified By:** [Empty field]
- County Of Commitment:** [Dropdown menu]
- Current Legal Charges:** [Empty field]
- Legal Charges Pending:** Yes (selected), No
- Legal Charges Specific:** [Empty text area]
- Judicial Review Of Release:** Yes (selected), No
- Type Of Court:** [Dropdown menu]
- Return To:** [Empty text area]
- Date Of Death:** [Empty field]

The second screen is the Admission Legal Status screen.

1. Select the appropriate legal status based on decision to admit.
2. Enter all known information about the Admission Legal Status.
3. Verify the accuracy of the information entered on the screen
4. Click on Submit

This completes the process for admission to an inpatient unit from Temporary Observation (23 Hour).

If a Brief Client Inquiry is run, it will only display the active inpatient episode. The 23 Hour Temporary Observation program will no longer display here nor on the Cross Facility Display.

GA Reg Hosp at Atlanta
3073 Panthersville Road
Decatur GA 30034-3828
Brief Client Inquiry GA

Page 1 of 1 Run Date: 4/2/2018

Client Name: TEST, JOSHUA Sex: Male Ethnic Origin / Race: White
Client ID: 471879
Last Program / Facility #: AAI600 / 44 Last Admission Date / Facility #: 03/27/2018 / 44
CID: Last Discharge Date / Facility #: 03/26/2018 / 44
Date of Birth: 4/30/1975 Attending Clinician:
Primary Referral Source: Community MH Center Primary Therapist:

CLIENT MOVEMENT HISTORY

EVENT	FROM	TO	DATE	ATT. CLINICIAN	FAC#	ADM#	LOS
Admission		ZAO130	08/06/2015		41	1	
Discharge	ZAO130		08/06/2015		41	1	1
Admission		AAI600	03/02/2018	HALL, DUSTIN	44	1	
Discharge	AAI600		03/26/2018	HALL, DUSTIN	44	1	
Admission		AAI600	03/27/2018		44	2	

Scenario #4: Individual admitted to Inpatient Unit. Use the Admission Entry bundle.

Perform Client Look Up

Open the Admission Entry bundle

Select the XXO102-Preadmit-Brief Assessment episode and click the Edit button

Step One: Enter the information on the Admission tab of the Admission screen.

The screenshot displays the 'Admission' screen in a software application. The interface is divided into several sections. On the left, there is a navigation pane with a tree view containing 'Admission', 'Demographics', 'Other Data', 'Inpatient/Day T...', 'Com...', and 'Site Specific Admission'. A red arrow points to the 'Admission' tab. Below this is a 'Submit' button and a set of icons. The main area is a form with the following fields: Facility (44), Episode Number (1), Client Name (TEST, ONE), Sex (Female), Date of Birth (05/13/1963), Age (54), Preadmit/Admission Date (02/20/2018), Preadmit/Admission Time (08:00 AM), Program (XXO102 - PreAdmit - Brief Asse...), Treatment Setting (Outpatient), and Treatment Service (Brief (Less than 24 hours)). On the right side, there are dropdown menus for Priority Of Admission (Emergency), Source Of Admission, Admitting Practitioner, Attending Practitioner, Team Assignment, Practitioner Type, RRG (Non-Admits/Outpatient), Facility Chart Number, Social Security Number, and Social Security Number - 2. A red circle highlights the Preadmit/Admission Date and Time fields.

The first screen is the Admission screen. The first tab on the Admission screen is the Admission tab.

1. Verify Client Name
2. Verify Sex
3. Verify Date of Birth
4. Update program by selecting the appropriate inpatient program for the individual
5. Verify Priority of Admission = Emergency
6. Enter Admitting Practitioner
7. Enter Attending Practitioner
8. Enter remaining non-required fields as known
9. Verify the accuracy of the information entered on the screen
10. Click on Demographics tab

Step Two: Complete the Demographics tab on the Admission form

The screenshot shows the 'Admission' form with the 'Demographics' tab selected. The left sidebar has a red arrow pointing to the 'Demographics' tab. The main form area is titled 'Client Demographics' and contains the following fields:

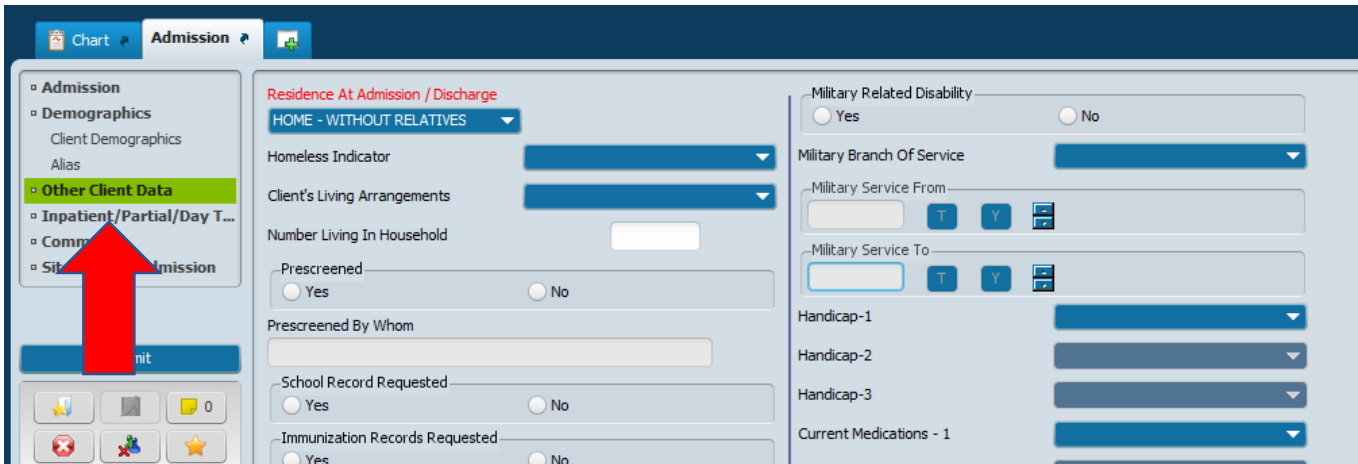
- Address - Street: 2 PEACHTREE ST NW
- Address - Street 2: [Empty]
- Zipcode: 30303, City: ATLANTA
- State: GEORGIA, County: FULTON
- Home Phone: 404-222-3333, Work Phone: 404-555-8888, Cell Phone: [Empty]
- Email Address: [Empty]
- Communication Preference: Email, Regular Mail, Home Phone, Work Phone, Cell Phone, Do Not Contact, Text, Consumer Portal
- Maiden Name: [Empty]
- Marital Status: [Empty]
- Primary Language: [Empty], Client Race: White
- Ethnic Origin: Not Hispanic/Latino ..., Religion: [Empty]
- Client Declined To Provide Information On The Following: Ethnic Origin, Race, Language
- Place Of Birth: [Empty]
- Country Of Origin: [Empty], Education: [Empty]
- Employment Status: [Empty], Occupation: [Empty]

Below the 'Client Demographics' section is the 'Alias' section with 10 input fields (Alias 1 to Alias 10) and a 'Pregnancy Status' dropdown menu.

The second tab on the Admission form is the Demographics tab.

1. Client Address
2. Client's Phone (at least 1 of the 3)
3. Marital Status (this is critical for DBHDD)
4. Primary Language
5. Verify/update Client Race
6. Verify/update Ethnic Origin
7. Country of Origin
8. Pregnancy Status
9. Citizenship – select Yes or No
10. Enter all known information about the Demographics
11. Verify the accuracy of the information entered on the screen
12. Click on the "Other Client Data" tab.

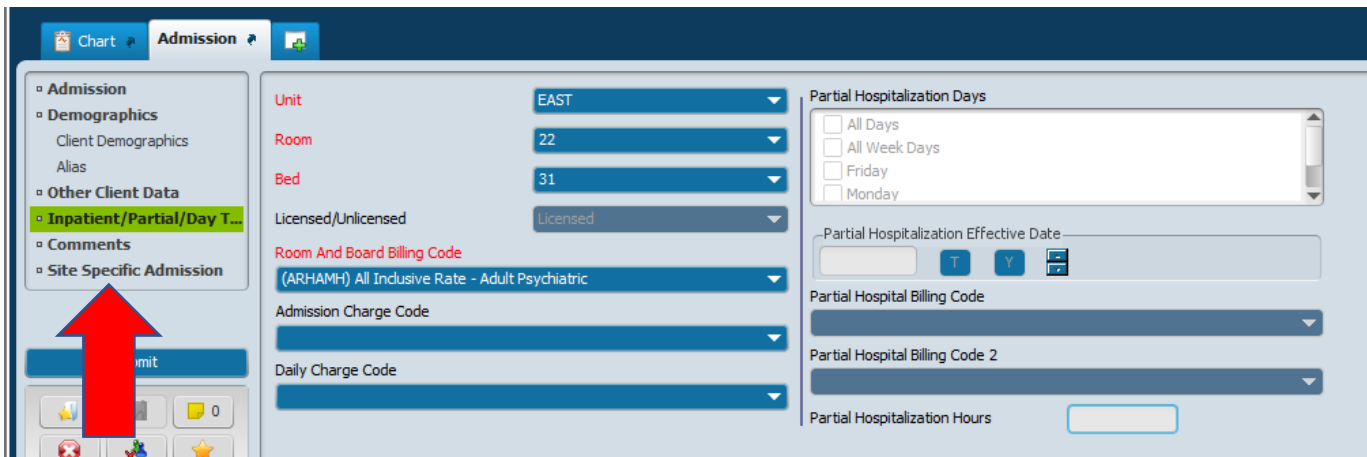
Step Three: Complete the Other Client Data tab on the Admission Form.



The third tab on the Admission form is the Other Client Data tab.

1. Select the Residence At Admission/Discharge from the drop-down list. This information is where the individual sleeps at night.
2. Homeless Indicator
3. Client's Living Arrangements
4. Enter all known information about the Other Client Data
5. Verify the accuracy of the information entered on the screen
6. Click on the Inpatient/Partial/Day T... tab

Step Four: Complete the Inpatient/Partial/Day T... tab on the Admission Form



The fourth tab on the Admission form is the Inpatient/Partial/Day T... tab.

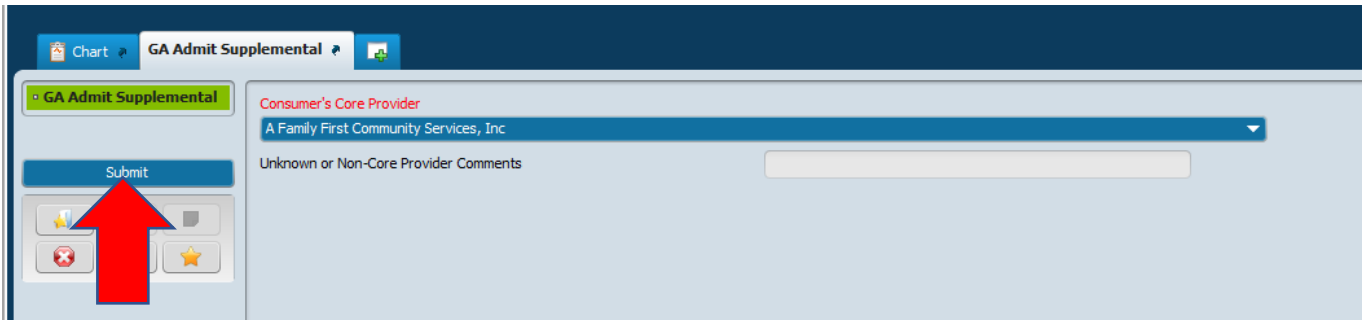
1. Select the Unit from the drop down
2. Select the Room from the drop down
3. Select the first available Bed from the drop down
4. **Never** enter Admission Charge Code, Daily Charge Code nor any Partial Hospitalization fields
5. Verify the accuracy of the information entered on the screen
6. Click on the Site Specific Admission tab.

Step Five: Complete the Site Specific Admission tab on the Admission Form.

The fifth tab on the Admission form is the Site Specific Admission tab.

23. Select the Type of Admission from the drop-down list.
 - a. First Admission – This is the first time the individual has been to the facility
 - b. Re-admission – The individual has other admissions to the facility
 - c. Transfer – The individual came from another state hospital facility
24. Select the Reason for Admission from the drop-down list. (Page 1 of 2 of the 24-HR IRP under Axis V.)
25. Select the Community Screening Status from the drop-down list.
 - a. Prescr-CMHMR = Referral documentation received from an agency
 - b. Unscr-CMHMR = Affidavit, walk-in
 - c. Prison Screening = Documentation received from jail/prison
 - d. Transferred = Documentation received from another hospital.
26. Select the Client Level of Observation from the drop-down list. This is specified in the Doctor’s Orders.
27. Select the Disability Category from the drop-down list. This is dependent on the Diagnosis
 - a. Mental Health – Primary Diagnosis
 - b. MH/SA – Mental Health + Substance Abuse Diagnosis
 - c. MH/MR – Mental Health + Developmental Disability Diagnosis
 - d. MH/SA/MR – Mental Health + Substance Abuse + Developmental Disability Diagnosis
28. Select the appropriate response for “Came from Jail”
29. Select the Sensory Impairment from the drop-down list.
30. Select the English Proficiency from the drop-down list.
31. Select the Communication from the drop-down list.
32. Enter the Admission Staff name – this is who is entering the information on the admission screens
33. Enter all known information for the Site Specific Admission.
 - a. County of Commitment = the county of the referring agency initiating the individual’s legal status
34. Verify the accuracy of the information entered on the screen
35. Click Submit

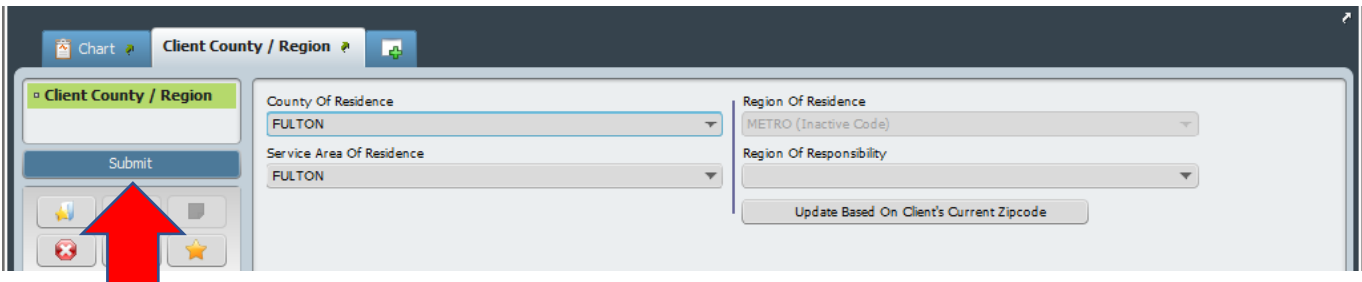
Step Six: Enter the GA Admit Supplemental information



The second screen is the GA Admit Supplemental.

1. Select the Consumer's Core Provider from the drop-down list.
2. Verify the accuracy of the information entered on the screen
3. Click Submit

Step Seven: Enter the Client Count/Region



The third screen is the Client County/Region screen. This information may be prepopulated if the individual's address is entered when the Pre-Admit episode was created.

1. Select County of Residence from drop-down – the remaining fields automatically populate
2. Verify the accuracy of the information entered on the screen
3. Click Submit

Step Eight: Enter the Admission Legal Status

The screenshot shows a web application interface for entering admission legal status. The main form is titled "Admission Legal Status" and contains several sections:

- Effective Date/Time:** Fields for "Effective Date Of Legal Status" (03/27/2018) and "Effective Time Of Legal Status" (12:42 PM). There are "Current" and "AM/PM" radio buttons.
- Legal Status:** A dropdown menu showing "210 - MH TRANS ER TO EVAL FA...".
- Number Of Committed Days:** A text input field.
- Expiration Date Of Legal Status:** A date picker field.
- Legal Status Certified By:** A text input field.
- County Of Commitment:** A dropdown menu.
- Current Legal Charges:** A text input field.
- Legal Charges Pending:** Radio buttons for "Yes" and "No".
- Legal Charges Specific:** A large text area for detailed notes.
- Judicial Review Of Release:** Radio buttons for "Yes" and "No".
- Type Of Court:** A dropdown menu.
- Return To:** A text input field.
- Date Of Death:** A date picker field.

In the left sidebar, there is a "Submit" button and an "Online Documentation" section with a red arrow pointing to the "Submit" button.

The fourth screen is the Admission Legal Status screen. **Legal status is extremely important to enter accurately at the time of the inpatient admission.** Select appropriate legal status for individual's legal circumstance.

1. Effective Date/Time of Legal Status – this is pre-populated
2. Select the Legal Status from the drop-down list. Refer to Policy = **Legal Status for DBHDD Hospitals, 24-106** for use of appropriate legal statuses.
3. Enter the Expiration Date of Legal Status. Refer to Policy = **Legal Status for DBHDD Hospitals, 24-106** for use of appropriate legal status expirations.
4. Enter the County of Commitment – the county of the referring agency initiating individual's legal status
5. Select the appropriate answer for Legal Charges Pending – this is required for all court holds/forensic individuals
6. Enter the Legal Charges Specific – found on High Risk form or documents sent from jail/court
7. Select the appropriate Type of Court from the drop-down list. Select Superior Court for ALL IST's
8. Enter the Return To – List the name of the jail the individual is to be returned to upon discharge, if applicable.
9. Verify the accuracy of the information entered on the screen
10. Click Submit

Step Nine – Enter the Admission Referral Information

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Home goofy T

TEST, GOOFY (000471925) Ep: 1 : JAO260-Preadmit-23 Hour Observation
M Problem P: - Attr
DX P: Adr

Chart Admission Referral Information

Primary Referral
Community Authorizati...
Other Referral - 1
Other Referral - 2

Submit

Online Documentation

Primary Referral Source Code

Primary Referral Source Category

Primary Referral Source - Specialty

Primary Referral Source - Phone

Primary Referral Source - Agency

Primary Referral Source - Street Address

Primary Referral Source - Street Address 2

Primary Referral Source - Zipcode

Primary Referral Source - City

Primary Referral Source - County

Primary Referral Source - State

Primary Referral Source - Contact

The fifth screen is the Admission Referral Information screen. The referral information should reflect who or what agency sent the individual to the facility for evaluation/treatment.

1. Select Primary Referral Source Code – type the first 4-5 characters in the primary referral source name. Then select the source from the list of options based on the search criteria you entered.
 - a. If the individual is a “walk-in”, enter “Self”.
 - b. Other should NEVER be used.
 - c. If the appropriate code is not found in the drop-down list, contact the Application Support Specialist and request it be added.
2. Once the Primary Referral Source Code is selected, the remaining fields will populate based on the selection made.
3. Verify the accuracy of the information entered on the screen.
4. Click Submit

Step Ten: Enter the Client's Representatives

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Home goofy T

TEST, GOOFY (000471925) Ep: 1 : JAO260-Preadmit-23 Hour Observation Location: , ,
M Problem P: - Attn. Pract.: No Entry
DX P: Adm. Pract.: No Entry

Chart Client's Representatives

Client's Representatives
Input Client's Represent...

Submit

Online Documentation

Client Representatives

Representative Last Name	Representative First Name	Representative Su...	Representative's Relationship To Client	Representative
--------------------------	---------------------------	----------------------	---	----------------

Add New Item Edit Selected Item Delete Selected Item

Representative Last Name

Representative First Name

Representative Suffix

Representative's Relationship To Client

Representative Living With Client

Representative Number

Representative Address - 1

Representative Address - 2

Representative Zip Code

Representative City

Representative County

Representative State

Representative Home Phone Number

Representative Work Phone Number

Representative Cell Phone Number

Representative Other Phone Number

The sixth screen is the Client's Representatives screen.

1. Click the Input Client's Relatives tab on the left side of the screen
2. Click the Add New Item button
3. Enter all known information about the Representative
4. If more than one Representative needs to be entered, repeat these steps starting with the Add New Item button
5. Verify the accuracy of the information entered on the screen
6. Click Submit

Step Eleven: Enter the Client's Relatives

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Home goofy T

TEST, GOOFY (000471925)
M

Chart Client's Relatives

Client's Relatives
Input Client's Relatives

Submit

Online Documentation

Client's Relatives

Relative Last Name	Relative First Name	Relative S...	Relative's Relationship To Client	Is Relative Living	Relative Living With Client
--------------------	---------------------	---------------	-----------------------------------	--------------------	-----------------------------

Add New Item Edit Selected Item Delete Selected Item

Relative Last Name

Relative's Address

Relative First Name

Relative Zip Code

Relative Suffix

Relative City

Relative's Relationship To Client

Relative State

Is Relative Living

Relative Home Phone Number

Relative Living With Client

Relative Work Phone Number

Relative Other Phone Number

The seventh screen is the Client's Relatives screen.

1. Click the Input Client's Relatives tab on the left side of the screen
2. Click the Add New Item button
3. Enter all known information about the Relative
4. If more than one Relative needs to be entered, repeat these steps starting with the Add New Item button
5. Verify the accuracy of the information entered on the screen
6. Click Submit

Step Twelve: Enter the Emergency Contacts

The screenshot shows the 'Emergency Contacts' screen in the myAvatar 2018 system. The user is logged in as 'goofy T' (TEST, GOOFY (000471925) M). The interface includes a navigation bar, a sidebar with 'Emergency Contacts' and 'Input Emergency Conta...' tabs, and a main content area. The main area features a table for listing emergency contacts and a form for adding new ones. Three blue arrows indicate key steps: #1 points to the 'Input Emergency Conta...' tab, #2 points to the 'Add New Item' button, and #3 points to the 'Emergency Contact First Name' field. A red arrow points to the 'Submit' button.

The eighth screen is the Emergency Contacts screen.

1. Click the Input Emergency Contacts tab on the left side of the screen
2. Click the Add New Item button
3. Enter all known information about the Emergency Contact
4. If more than one Emergency Contact needs to be entered, repeat the steps starting with the Add New Item button
5. Verify the accuracy of the information entered on the screen
6. Click Submit

Step Thirteen: Enter the Client Employment

myAvatar 2018

Home goofy T

TEST,GOOFY (000471925) Ep: 1 : JAO260-Preadmit-23 Hour Observation Location: , ,
M Problem P: - Attn. Pract.: No
DX P: Adm. Pract.: No

Chart Client Employment

Client Employment

Submit

Employment Status

- FULL TIME
- HOMEMAKER
- NOT LABOR FORCE
- OTHER
- PART TIME
- RETIRED
- STUDENT-WORK
- UNEMPLOYED

Client Employer Address

Client Employer Zipcode

Client Employer City

Client Employer State

Client Employer Phone Number

The ninth screen is the Client Employment screen.

1. Select Employment Status from the drop-down
2. Complete remaining fields with all appropriate/known information
3. Verify the accuracy of the information entered on the screen
4. Click Submit

Step Fourteen: Enter the Income and Benefits

myAvatar 2018

Home goofy T

TEST,GOOFY (000471925) Ep: 1 : JAO260-Preadmit-23 Hour Observation Location: , ,
M Problem P: - Attn. Pract.: No Entry
DX P: Adm. Pract.: No Entry

Chart Income And Benefits

Income And Benefits

Submit

Receives Social Security
 Yes No

Social Security Amount

Receives Child (TANF)
 Yes No

Child (TANF) Amount

Receives Welfare (SSI)
 Yes No

Welfare (SSI) Amount

Receives Vet/Military
 Yes No

Vet/Military Amount

Receives Retirement
 Yes No

Retirement Amount

Receives Child Support
 Yes No

Child Support Amount

Receives SSI Disability
 Yes No

Social Security Disability Amount

Payee Name

Received Other Benefits
 Yes No

Other Benefit Amount

Other Benefit Type

The tenth screen is the Income and Benefits screen.

1. Complete all appropriate/known information
2. Verify the accuracy of the information entered on the screen
3. Click Submit

Step Fifteen: Enter the Medicare/Medicaid/Veteran

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Home goofy T

TEST,GOOFY (000471925) M Ep: 1 : JAO260-Preadmit-23 Hour Observation Location: , ,
 Problem P: - Attn. Pract.: No Entry
 DX P: Adm. Pract.: No Entry

Chart Medicare / Medicaid / Veteran

Medicare / Medicaid / V...
 Insurance Information

Submit

Veteran Number

Medicare Part A Eligible
 Yes No

Medicare Part A Eligibility Effective Date

Medicare Part A Eligibility Termination Date

Medicare Part B Eligible
 Yes No

Medicare Part B Eligibility Effective Date

Medicare Part B Eligibility Termination Date

Medicare Part D Eligible
 Yes No

Medicare Part D Plan

Medicare Part D Eligibility Effective Date

Medicare Part D Eligibility Termination Date

Medicare Number

Medicaid Eligible
 Yes No

Medicaid Eligibility Effective Date

Medicaid Eligibility Termination Date

Medicaid Type

Medicaid Number

NRI defined medicare status

The eleventh screen is the Medicare / Medicaid / Veteran screen.

1. Enter all appropriate/known information
2. Verify the accuracy of the information entered on the screen
3. Click Submit

Step Sixteen: Enter the Georgia Hold Order Status

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TEST,GOOFY (000471925) M Ep: 1 : JAO260-Preadmit-23 Hour Observation Location: , ,
 Problem P: - Attn. Pract.: No i
 DX P: Adm. Pract.: No i

Chart Georgia Hold Order Status

Georgia Hold Order Stat...

Submit

Hold Order Date

Hold Order Cancel Date

Hold Order Time

Hold Order Cancel Time

Reason For Hold

Hold Order Source

Notes

Online Documentation

1. Enter all required fields
2. Enter all other information as appropriate/known
3. Click Submit
4. Verify the accuracy of the information entered on the screen

NOTE: If there is no Hold Order for the individual, click on the red stop sign X to close the screen.

This completes the creation process of the inpatient episode for the individual.

4. Discharge Entry

The third entry is the Discharge Entry. This entry happens once the physician has released an individual to the community, or transferred an individual to jail/prison.

There are two scenarios for the discharge entry process:

1. Discharge from the RBO100-Brief Assessment program as a non-admit
2. Discharge from the JAO260-Preadmit-23 Hour Observation program

Scenario #1 – Individual is discharged from the RBO100-Brief Assessment program. Use the [Discharge Entry](#) bundle.

The screenshot shows a software interface for entering discharge information. On the left, there is a sidebar with a 'Discharge' menu and a 'Submit' button. A red arrow points to the 'Submit' button. The main area contains several input fields and dropdown menus. The 'Episode Number' is set to 2. The 'Date of Discharge' field is empty. The 'Discharge Time' is set to 'Current' with 'H' and 'M' fields. The 'Discharge Day Of Week' and 'Length Of Stay' fields are empty. The 'UB92 Discharge Type' is a dropdown menu. The 'Discharge Practitioner' field is empty. The 'Accompanied By' field is empty. The 'Discharge Presenting Problems - Primary', 'Secondary', and 'Tertiary' are dropdown menus. The 'Residence At Admission / Discharge' is a dropdown menu. The 'Homeless Indicator' is a dropdown menu. The 'Discharge Remarks/Comments' and 'Hospital Discharge Instructions' are text areas.

The first screen is the Discharge screen. Complete all the following information:

1. Date of Discharge
2. Discharge Time
3. UB92 Type
4. Discharge Practitioner
5. Accompanied By
6. Residence at Admission/Discharge – select where the individual will go when discharged. This will be where the individual will sleep at night. This field should NEVER indicate “STREETS”.
7. No Demographics as this information pulls from the original demographic information entered – if the address needs to be updated, this must be done on the “Update Client Data” form.
8. Verify the accuracy of the information entered on the screen
9. Click Submit

Chart Supplemental Discharge Information

Supplemental Discharge 1

Submit

Referred To

Referred To Appointment Date

Discharge Transportation Requirements

Reason For Non-Admit

Reason For Discharge

Review Admission Information

```

***** Admission Information For Episode 2 *****
Admission Date: 03/27/2018      Admission Time: 12:42 PM
Referred From: 99029 - Community MH Center      Source Of Admission: 1 - PHYSICIAN REFERRAL
Active Program: AAI600 - AAI600-Adult Mental      Active Unit: 44000022 - EAST

```

Online Documentation

The second screen is the Supplemental Discharge Information screen. Complete the following information:

1. Referred To – This is where the individual will go for follow-up treatment
2. Reason for Discharge
3. Referred to Appointment Date
4. Discharge Transportation Requirements
5. Reason for Non-Admit – This is only filled out for RBO100 (non-admit) individuals
6. Verify the accuracy of the information entered on the screen
7. Click Submit

Scenario #2 – Individual is discharged from Temporary Observation. Use the Temporary Observation Discharge bundle.

The screenshot shows the 'Pre-Admit Discharge' screen. On the left, a sidebar contains a navigation menu with 'Pre-Admit Discharge' selected, and 'Site Specific Discharge' highlighted with a red arrow. The main area contains various input fields and dropdown menus for discharge information, including Episode Number, Date Of Discharge, Discharge Time, Discharge Day Of Week, Length Of Stay, UB92 Discharge Type, Discharge Practitioner, Accompanied By, Discharge Presenting Problems (Primary, Secondary, Tertiary), Residence At Admission / Discharge, Homeless Indicator, and Discharge Remarks/Comments.

The first screen is the Pre-Admit Discharge screen. Complete all the following information on the Pre-Admit Discharge tab.

1. Date of Discharge
2. Discharge Time
3. UB92 Type
4. Discharge Practitioner
5. Accompanied By
6. Residence at Admission/Discharge
7. Verify the accuracy of the information entered on the screen
8. Click on the Site Specific Discharge tab

The screenshot shows the 'Site Specific Discharge' screen. The left sidebar shows 'Site Specific Discharge' selected. The main area contains dropdown menus for Reason for Admission, Sensory Impairment, English Proficiency, Communication, and Admission County of Commitment. A note box is present on the right side of the screen.

***NOTE: Will replace this screen when Admission County of Commitment is un-required

The second tab requiring information is the Site Specific Discharge tab.

1. Select the Reason for Admission from the drop-down list.
2. Select the Sensory Impairment from the drop-down list.
3. Select the English Proficiency from the drop-down list.
4. Select the Communication from the drop-down list.
5. If known, select the Admission County of Commitment from the drop-down list.
6. Verify the accuracy of the information entered on the screen
7. Click Submit

This screen is followed by the Supplemental Discharge Information screen. See Supplemental Discharge Information instructions on page 35 above for completing the necessary information.

Attachment A: Workflow for Admission Process

