



Service Provider User Manual

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WASHTENAW COMMUNITY HEALTH ORGANIZATION

Administrative Website Manual

Table of Contents

Section 1 - Logging Into and Out of the System	4
Logging Into the System	4
What If I Forget My Password?	5
Logging Out of the System.....	7
Section 2 - Navigation Buttons.....	8
Section 3 - Consumer Information	9
View Consumer Demographics	9
View Consumer Person-Centered Plan and Plan Goals.....	10
View Consumer Supported Living Budget.....	12
Section 4 - Authorizations and Claims Submission	14
View Authorizations	14
Submit Claims	15
To Add a HCFA-1500	15
Add a UB-92.....	18
Using the Diagnosis Code Lookup Button.....	20
Claim Batch Review and Send for Approval.....	21
Section 5 - Provider Staff Directory	23
View Staff Directory	23
Add a Staff Member (Contact).....	24
Section 6 - Performance Improvement Network Indicators	26

Logging Into and Out of the System

Logging Into the System

- Open Internet Explorer
- In the address box type in <http://www.ewcho.org> and press Enter on your keyboard.

The following screen will be displayed:

The screenshot shows a Microsoft Internet Explorer browser window titled "Main - Microsoft Internet Explorer". The address bar is empty. The page content includes the WHO logo and the text "washtenaw community health organization". A "Help" button is visible on the left, and a "LOGIN" button is on the right. The main content area is a blue box with the following text: "Welcome to Washtenaw Community Health Organization Consumer Management System". Below this, it states: "Access to this site is limited to authorized Washtenaw County Health Organization Personnel, and authorized affiliates and providers. Unauthorized attempt to access the system is prohibited." To the right of this text is a login form with the heading "Please enter your login ID and password". The form contains two input fields: "User Name:" and "Password:". Below the "Password:" field is a "Login" button. A link "[I forgot my password](#)" is located below the login button. At the bottom of the page, there is a red-bordered box containing a disclaimer: "Washtenaw County Health Organization monitors and logs the activities of this web site. By accessing this web site, you are expressly consenting to these monitoring activities. Unauthorized attempts to access, obtain, alter, damage, or destroy information, or otherwise to interfere with the system or its operation are prohibited and recorded by the Authority." Below the disclaimer, it says "This site is best viewed and operated with version 5.0 or higher of Microsoft Internet Explorer". The status bar at the bottom shows "Done" and "Local intranet".

- Enter your User Name and Password, and then click the Login button. **Please note:**
 - The first time you access your account; your password will be the same as your User ID. You will be prompted to change your password.
 - When changing your password you will provide the answer to two security questions; what is your birth-date and what are the last four digits of your Social Security Number. The answers to these questions will be used if you forget your password.
 - After three unsuccessful login attempts, your account will be locked and you will have to call the Help Desk to have it unlocked.

What If I Forget My Password?

If you have forgotten your password, click on the *I forgot my password* link on the log in screen.

washtenaw community health organization

LOGIN

Welcome to Washtenaw Community Health Organization Consumer Management System

Access to this site is limited to authorized Washtenaw County Health Organization Personnel, and authorized affiliates and providers.

Unauthorized attempt to access the system is prohibited.

Please enter your login ID and password

User Name:

Password:

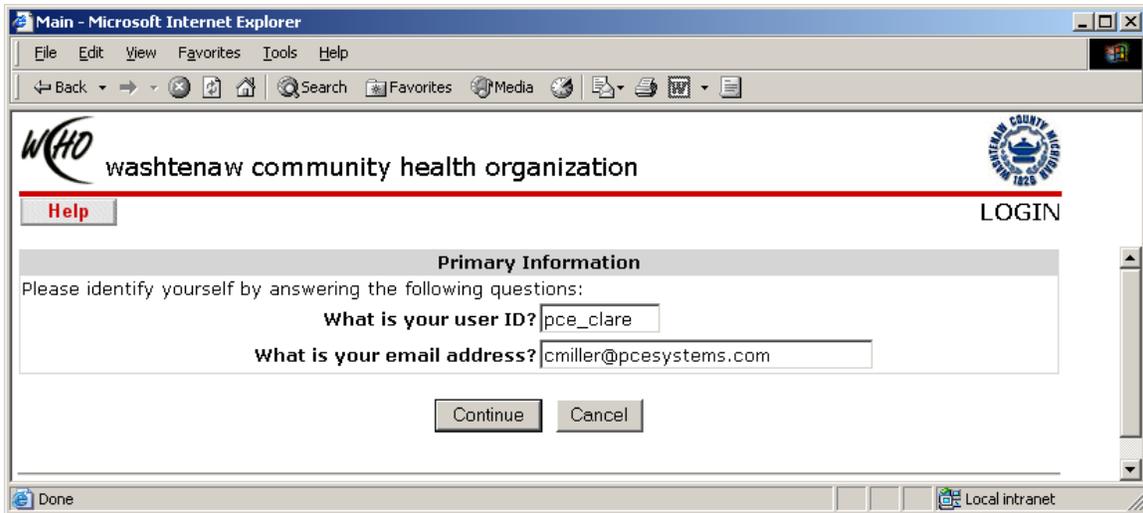
Login

[I forgot my password](#)

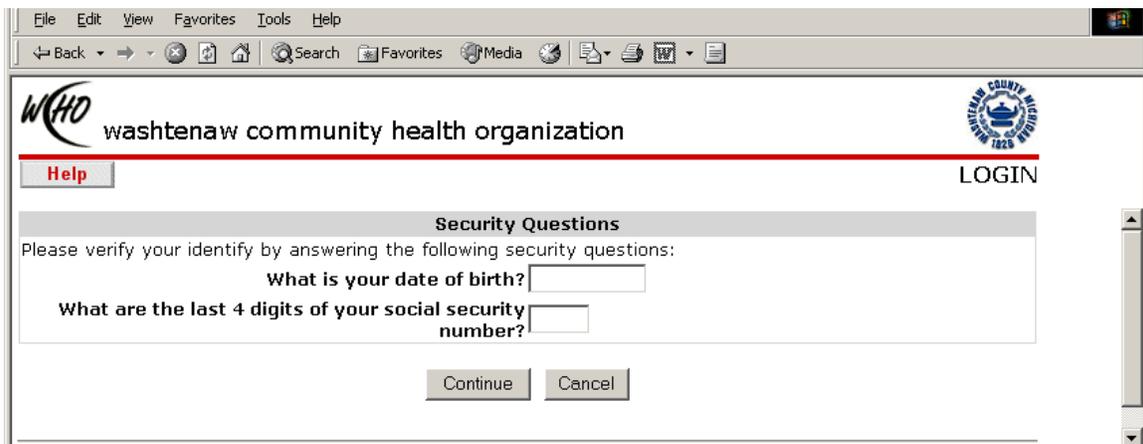
Washtenaw County Health Organization monitors and logs the activities of this web site. By accessing this web site, you are expressly consenting to these monitoring activities. Unauthorized attempts to access, obtain, alter, damage, or destroy information, or otherwise to interfere with the system or its operation are prohibited and recorded by the Authority.

This site is best viewed and operated with version 5.0 or higher of Microsoft Internet Explorer

- Enter your User ID and Email address in the fields provided, and then click the Continue button.



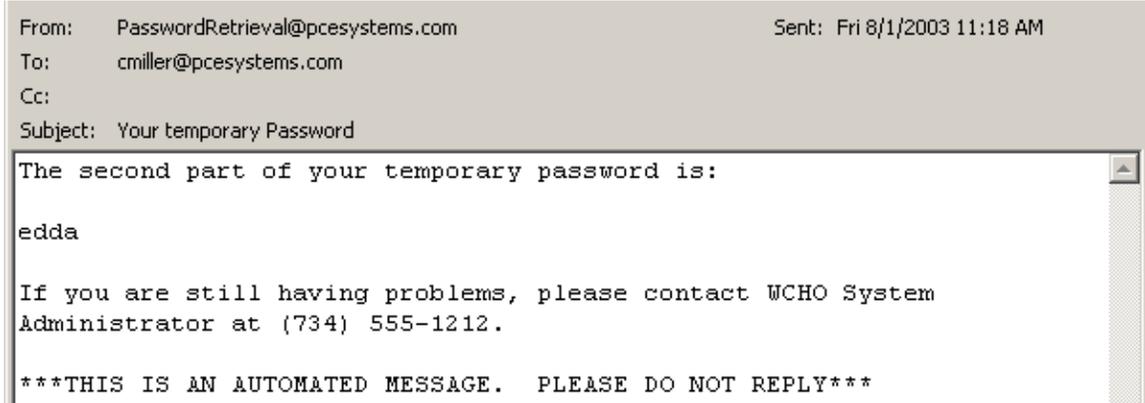
- Enter the answer to the Security Question in the field provided and then click the continue button.



The system will provide you with the first half of the temporary password. Be sure to write down the password displayed, as this screen will no longer be available after you click on the Continue button.



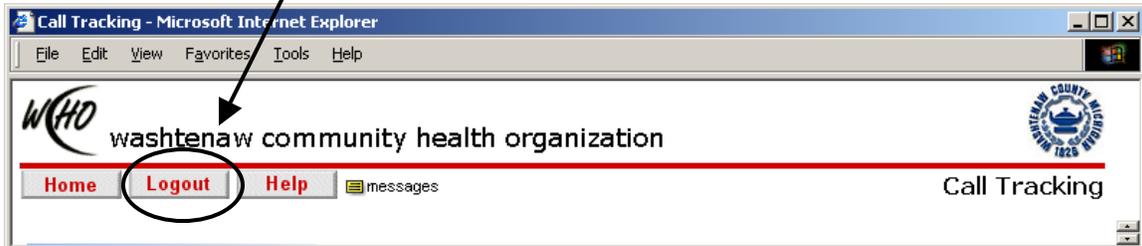
The second half of the password will be sent to your email account.



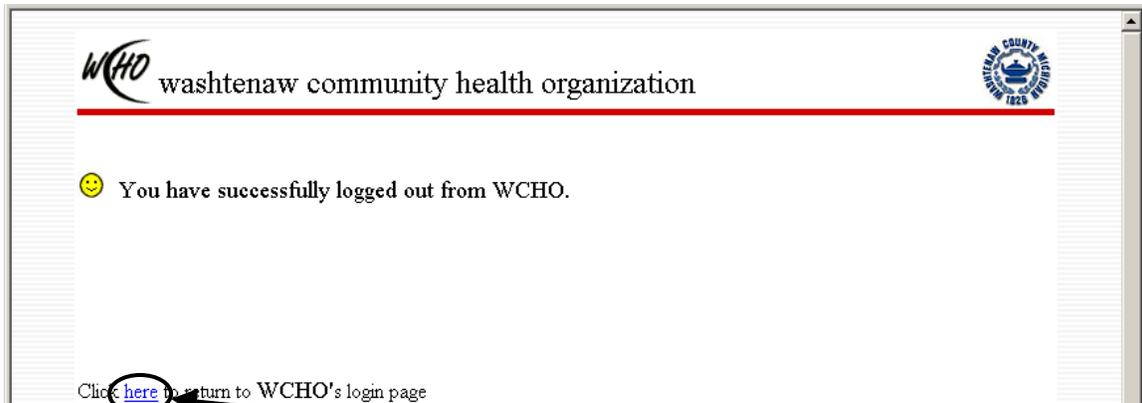
Logging Out of the System

Always log out of the system before shutting down the browser a log out is also necessary when you leave your computer unattended. Logging out prevents unauthorized Users from entering the Administrative System.

- Click on the *Logout* button



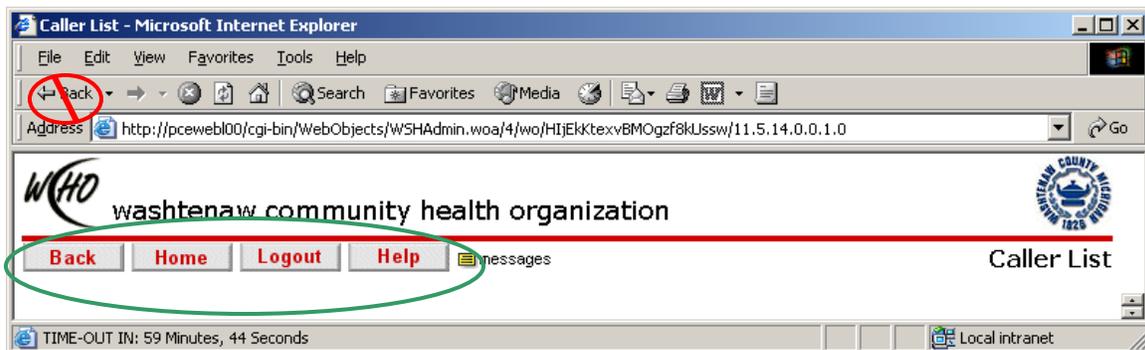
The following screen will be displayed:



If you wish to return to the login screen click the *here* link. It is now safe to close your browser.

Navigation Buttons

When using the WCHO Administrative system, **DO NOT** use your browser's back button. Only use the navigation buttons provided by the system; that is, those below the red line.



Back Click on the back button to go to the previous page. **DO NOT USE YOUR BROWSER'S BACK BUTTON.**

Home The home button will always take you back to the main page.

Logout Click on the logout button to exit the system.

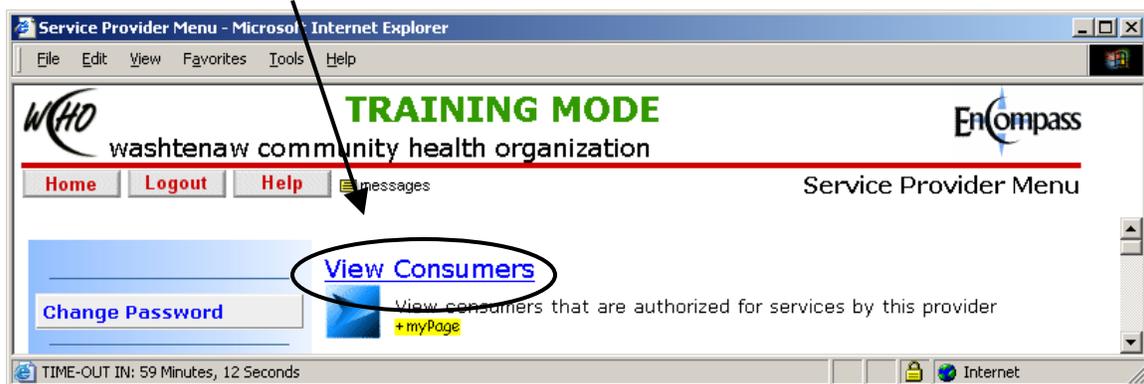
Help Click on the Help button to access this User Manual online.

lookup Use the Lookup button to access database for Providers, Consumers, and Staff in accordance with the screens.

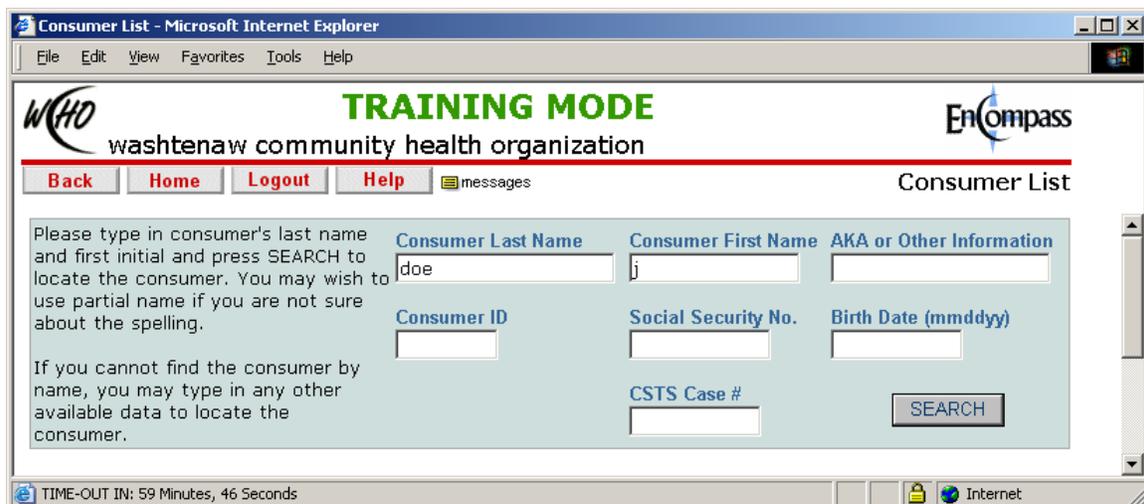
Consumer Information

View Consumer Demographics

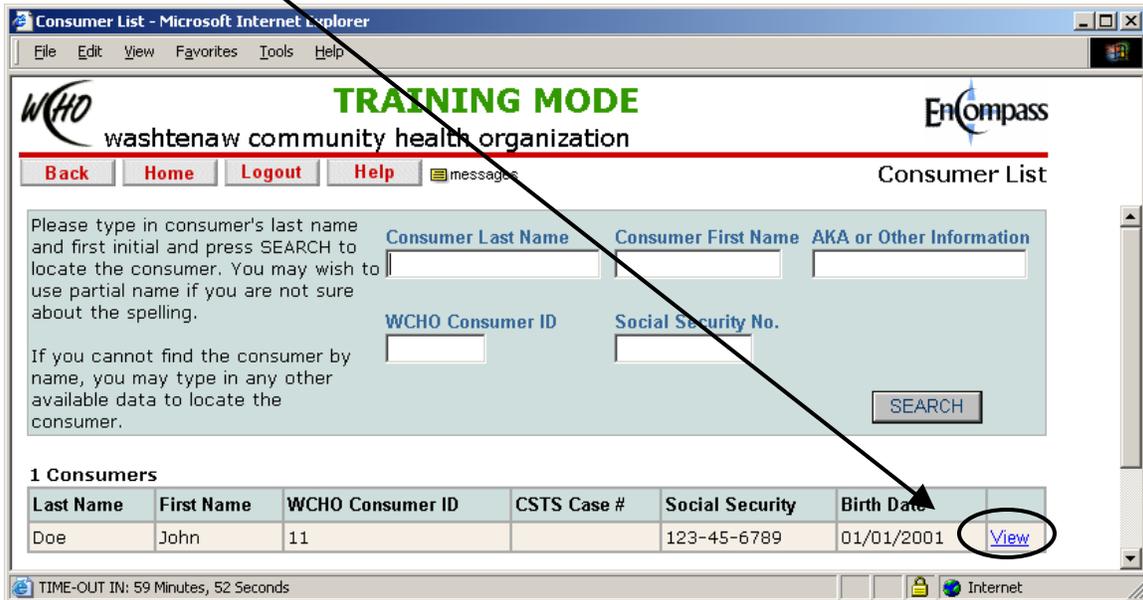
- Click on *View Consumers*



- Search for the Consumer, you may enter a partial name such as the first three letters of the last name and the first initial, and then click the SEARCH button.



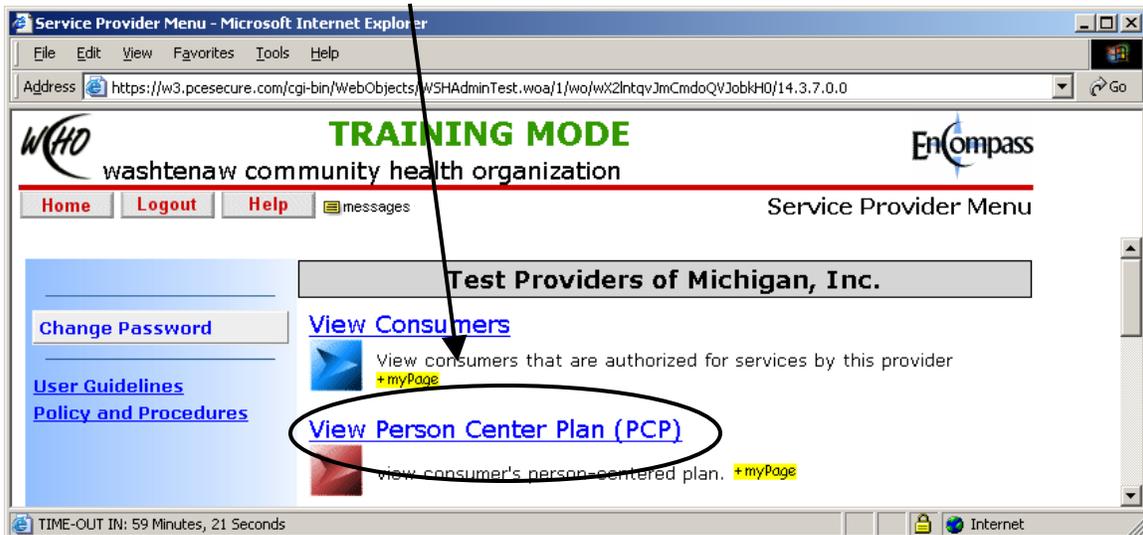
- Click the **View** link to the right of the Consumer's name.



- The Consumer's demographic information is displayed. Use the scroll bars on the right side of the screen to move through the data.

View Consumer Person-Centered Plan and Plan Goals

- Click on **View Person-Centered Plan (PCP)**



- Search for the Consumer, you may enter a partial name such as the first three letters of the last name and the first initial, and then click the SEARCH button.

- Click the **PCP** link to the right of the Consumer's name.

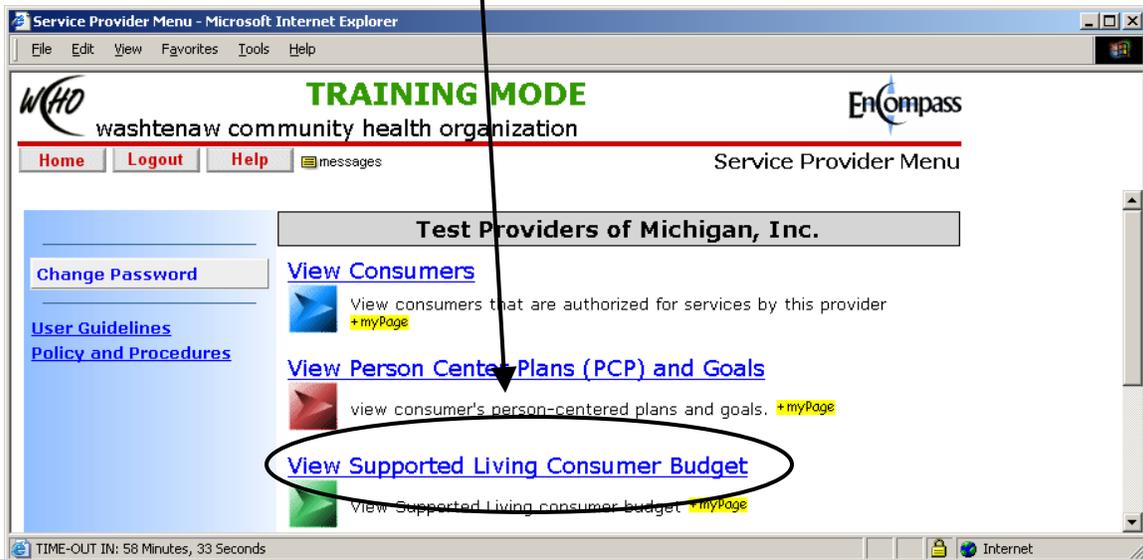
Last Name	First Name	WCHO Consumer ID	CSTS Case #	Social Security	Birth Date	
Doe	John	11		123-45-6789	01/01/2001	PCP

- A list of all of the Person-Center Plans is displayed.
 - o Use the **View** link to view the PCP
 - o Use the **PCP Goals** link to view a list of the PCP Goals for the PCP
 - o Use the **Print** link to print the PCP and PCP Goals.

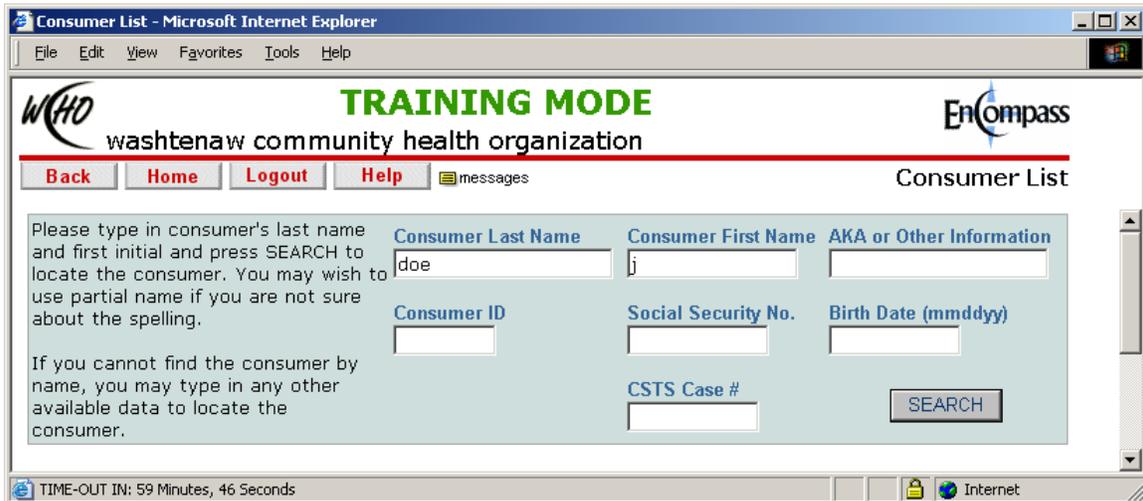
Meeting Date	Meeting Location	Staff Assigned	
08/01/2003	client home	PCE Clinician	View PCP Goals Print

View Consumer Supported Living Budget

- Click on *View Supported Living Consumer Budget*



- Search for the Consumer, you may enter a partial name such as the first three letters of the last name and the first initial, and then click the SEARCH button.



- Click the **Select** link to the right of the Consumer's name.

Select a Consumer - Microsoft Internet Explorer

File Edit View Favorites Tools Help

TRAINING MODE washtenaw community health organization EnCompass

Back Home Logout Help messages Select a Consumer

Please type in consumer's last name and first initial and press SEARCH to locate the consumer. You may wish to use partial name if you are not sure about the spelling.

Consumer Last Name Consumer First Name AKA or Other Information

WCHO Consumer ID Social Security No.

If you cannot find the consumer by name, you may type in any other available data to locate the consumer.

SEARCH

1 Consumers

Last Name	First Name	WCHO Consumer ID	CSTS Case #	Social Security	Birth Date	
Doe	John	11		123-45-6789	01/01/2001	Select

TIME-OUT IN: 59 Minutes, 55 Seconds

- A list of the Supported Living Budgets will be displayed, click the **View** link to view the budget in it's entirety

Supported Living Budget List - Microsoft Internet Explorer

File Edit View Favorites Tools Help

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Back Home Logout Help messages Supported Living Budget List

 Consumer Name: Doe, John Consumer ID: 11 SSN: 123-45-6789 Case#: Address: 1234 main southfield, MI 12345 Home Phone: 248-456-5289 Date of Birth: 01/01/2001 Gender: Male

1 Records

Effective Date	Expiration Date	Total Client Budget	
10/01/2003	12/31/2003	\$2,989.61	View

TIME-OUT IN: 58 Minutes, 48 Seconds

Authorizations and Claims Submission

View Authorizations

- Click on *View Authorized Services and Enter Claims*



- A list of all authorizations is displayed.

Provider Information:

Provider Test (SA) Provider of Michigan	Address 12345 Second SA Street Suite 345 Ann Arbor, MI 48123
Phone 734-2223-5656	Fax 734-2223-7878

2 Authorizations

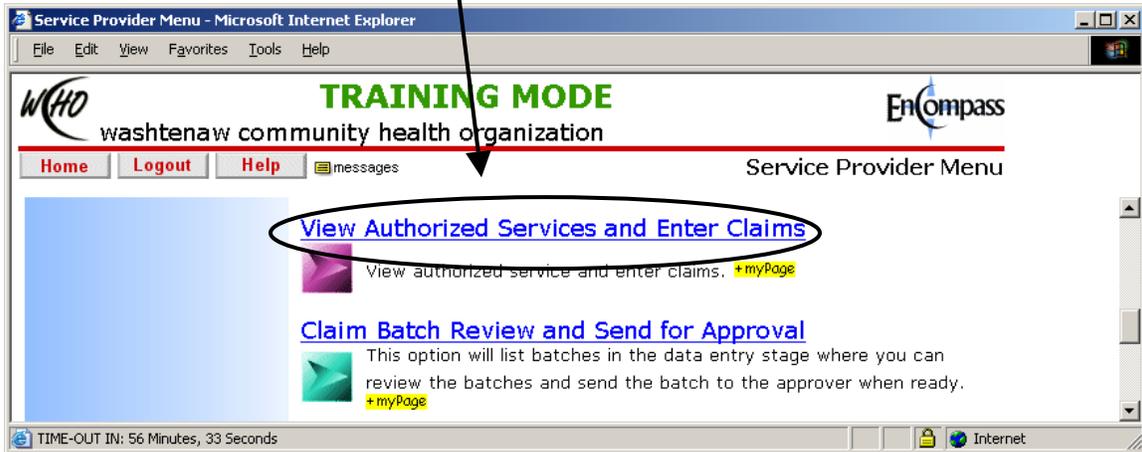
Authorization #	Consumer Name	Service Date Range	Status	
200300001265	John Doe	06/01/2003 - 06/30/2003	Authorized	View Auth Add HCFA-1500 Add UB-92
200300001266	John Doe	09/01/2003 - 09/30/2003	Authorized	View Auth Add HCFA-1500 Add UB-92

0 Claims

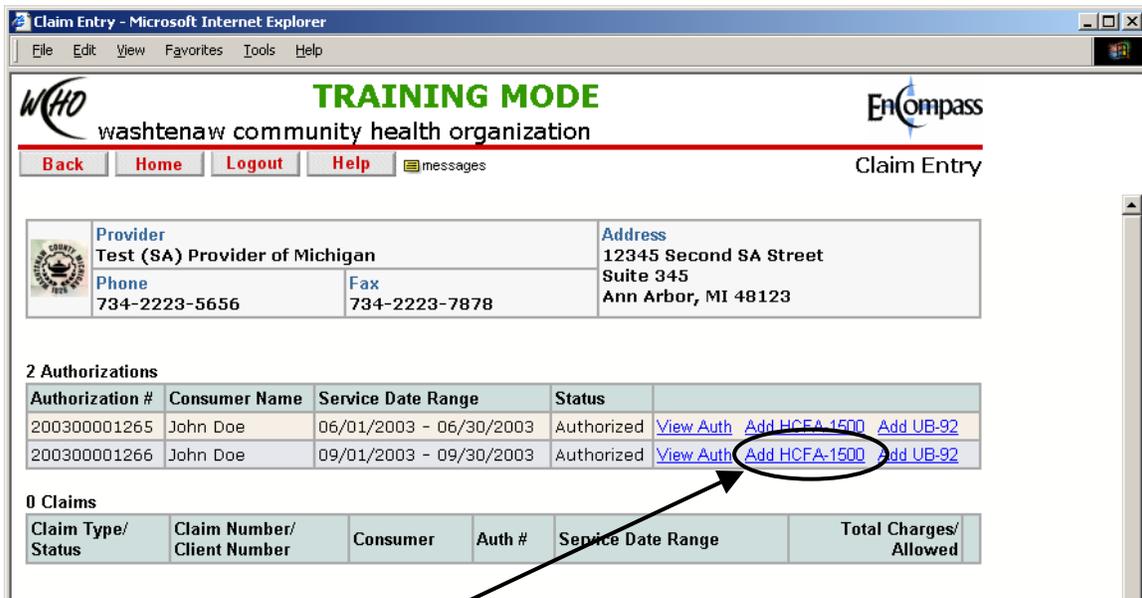
Claim Type/ Status	Claim Number/ Client Number	Consumer	Auth #	Service Date Range	Total Charges/ Allowed
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Submit Claims

- Click on *View Authorized Services and Enter Claims*



- A list of all authorizations is displayed.



To Add a HCFA-1500

- Click on the *Add HCFA-1500* link to the right of the authorization you wish to submit a claim against.

- Use the drop down menu to select the batch that this claim will belong to. If you do not wish to include this claim in a batch at this time select PEND CLAIM from the drop down menu.

- Enter the received date

- Scroll to the bottom of the screen and enter the diagnosis. You may type in the diagnosis code or use the lookup button to search the diagnosis code database. Please see the end of this Section to see further instructions on using the lookup button.

- Continue to scroll, enter the detail lines. If you need additional detail lines click on the *Add More Detail Lines*

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Back Home Logout Help messages Add HCFA-1500 Claim Form

[Add More Detail Lines](#)

24.	A		B	C	D		E	F	G	H	I	J	K
	From	To	POS	TDS	Procedures/ Service CPT/HCPCS	Mod	Diagnosis	Charges	Units	Family Plan	EMG	COB	Local Use
	06/01/2003	06/30/2003	11				1		3				
	06/01/2003	06/30/2003	11				1		10				
	06/01/2003	06/30/2003	11		H0012		1		10				
	06/01/2003	06/30/2003	11		H0020		1		30				

25. Tax ID: SSN EIN
 26. Patient Account No.: 123456789
 27. Accept Assignment? YES NO
 28. Total Charge: 0.00
 29. Amount Paid:
 30. Balance Due:
 31. Signature of Physician or Supplier:
 32. Name and address of Facility: TEST (SA) PROVIDER OF MICHIGAN, 12345 SECOND SA STREET, ANN ARBOR, MI 48123
 33. Billing Name and Address: TEST (SA) PROVIDER OF MICHIGAN, 12345 SECOND SA STREET, ANN ARBOR, MI 48123, 734-2223-5656
 Comments:
 SAVE CANCEL

TIME-OUT IN: 49 Minutes, 22 Seconds

- Once all of the claim information is entered, click the SAVE button.
- The Claim is now displayed. If you indicated that this claim is part of a new batch, the system will assign a batch number to the claim.

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Back Home Logout Help messages Claim Entry

Provider
Test (SA) Provider of Michigan
Phone: 734-2223-5656 Fax: 734-2223-7878
Address: 12345 Second SA Street, Suite 345, Ann Arbor, MI 48123

2 Authorizations

Authorization #	Consumer Name	Service Date Range	Status	
200300001265	John Doe	06/01/2003 - 06/30/2003	Authorized	View Auth Add HCFA-1500 Add UB-92
200300001266	John Doe	09/01/2003 - 09/30/2003	Authorized	View Auth Add HCFA-1500 Add UB-92

1 Claims

Claim Type/ Status	Claim Number/ Client Number	Consumer	Auth #	Service Date Range	Total Charges/ Allowed	
HCFA-1500 000005 - Ready (svcprvsa)	000032	DOE,JOHN	200300001265	06/01/2003 - 06/30/2003	130.00 .00	Change Delete View

- You may change or delete claim until it is sent to WCHO for approval, adjudication and payment.

Add a UB-92

- Click on the **Add UB-92** link to the right of the authorization you are entering a claim against.
- Use the drop down menu to select the batch that this claim will belong to. If you do not wish to include this claim in a batch at this time select PENDING CLAIM from the drop down menu. Enter a received date.

The screenshot shows a web browser window titled "Add UB-92 Claim Form - Microsoft Internet Explorer". The page header includes the WCHO logo, "TRAINING MODE" in green, and the EnCompass logo. Below the header are navigation buttons: Back, Home, Logout, Help, and a messages icon. The main content area is titled "Add UB-92 Claim Form" and contains a form for "UB-92 HCFA-1450". The form has several fields: "Batch Number" with a dropdown menu showing "000005" and a sub-menu with "NEW BATCH" and "PENDING CLAIM"; "Received Date" with an empty text box; "3 PATIENT CONTROL NO." with the value "123456789"; and "4. TYPE OF BILL" with a dropdown menu. The status bar at the bottom indicates "TIME-OUT IN: 59 Minutes, 38 Seconds".

- Scroll down; enter the detail lines for the claim. If you need more detail lines, click the **Add More Lines** link.

The screenshot shows the same web browser window, but the form is scrolled down to a table of detail lines. The table has the following columns: 42. REV CD, 43. DESCRIPTION, 44. HCPCS / RATES, 45. SERV. DATE, 46. SERV UNITS, 47. TOTAL CHARGES, 48. NON-COVERED CHARGES, and 49. (empty). The table contains 10 rows of data. The first row has "R0910" in column 42, "10" in column 46, "10.00" in column 47, and ".00" in column 48. The second row has "H0020" in column 44, "10" in column 46, "100.00" in column 47, and ".00" in column 48. Below the table is an "Add More Lines" link and a "TOTAL CHARGE" label. The status bar at the bottom indicates "TIME-OUT IN: 57 Minutes, 10 Seconds".

42. REV CD	43. DESCRIPTION	44. HCPCS / RATES	45. SERV. DATE	46. SERV UNITS	47. TOTAL CHARGES	48. NON-COVERED CHARGES	49.
1 R0910				10	10.00	.00	
2		H0020		10	100.00	.00	
3							
4							
5							
6							
7							
8							
9							
10							
Add More Lines		TOTAL CHARGE					

- Continue to scroll down; enter the Consumer's diagnosis code. You may type in the diagnosis code or use the lookup button to search the diagnosis code database. Please see the end of this Section to see further instructions on using the lookup button.

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Back Home Logout Help messages Add UB-92 Claim Form

83. TREATMENT AUTHORIZATION CODES
 200300001266

84. ESC 85. EMPLOYER'S NAME 86. EMPLOYER LOCATION

87. PRIN. DIAG. CD 88. CODE 89. CODE 70. CODE 71. CODE 72. CODE 73. CODE 74. CODE 75. CODE 76. ADM. DIAG. CD 77. E CODE 78.

look up look up look up look up

79. PC 80. PRINCIPAL PROCEDURE 81. OTHER PROCEDURE OTHER PROCEDURE 82. ATTENDING PHYSICIAN ID (Last,First,MI,Cred)
 CODE DATE CODE DATE CODE DATE CODE DATE

OTHER PROCEDURE OTHER PROCEDURE OTHER PROCEDURE
 CODE DATE CODE DATE CODE DATE

83. OTHER PHYSICIAN ID.

TIME-OUT IN: 54 Minutes, 53 Seconds

- Once all of the information has been entered, click the SAVE button.
- The Claim is now displayed. If you indicated that this claim is part of a new batch, the system will assign a batch number to the claim.

WCHD **TRAINING MODE** **EnCompass**
 washtenaw community health organization

Back Home Logout Help messages Claim Entry

Provider
 Test (SA) Provider of Michigan
 Phone: 734-2223-5656 Fax: 734-2223-7878
 Address: 12345 Second SA Street, Suite 345, Ann Arbor, MI 48123

2 Authorizations

Authorization #	Consumer Name	Service Date Range	Status	
200300001265	John Doe	06/01/2003 - 06/30/2003	Authorized	View Auth Add HCFA-1500 Add UB-92
200300001266	John Doe	09/01/2003 - 09/30/2003	Authorized	View Auth Add HCFA-1500 Add UB-92

2 Claims

Claim Type/ Status	Claim Number/ Client Number	Consumer	Auth #	Service Date Range	Total Charges/ Allowed	
HCFA-1500 000005 - Ready (svcprvsa)	000032	DOE,JOHN	200300001265	06/01/2003 - 06/30/2003	130.00 .00	Change Delete View
UB-92 000006 - Ready (svcprvsa)	000033	DOE,JOHN	200300001266	09/01/2003 - 09/30/2003	110.00 .00	Change Delete View

TIME-OUT IN: 55 Minutes, 54 Seconds

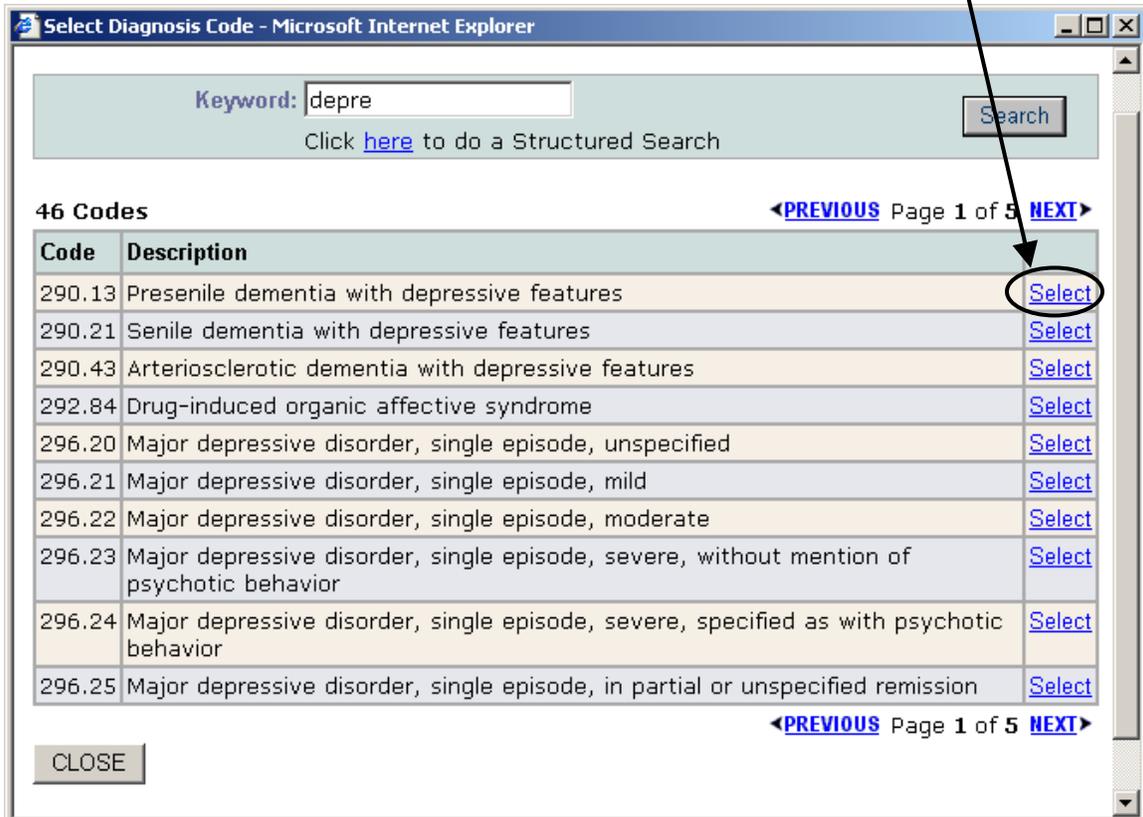
- You may change or delete claim until it is sent to WCHO for approval, adjudication and payment.

Using the Diagnosis Code Lookup Button

- Click on the Lookup button
- Search for the diagnosis code by entering the partial name of the diagnosis and click the SEARCH button. For example, to search for a depression diagnosis type “depre” in the field provided (see below)



- Any diagnosis matching the keyword will appear, use the *Previous* and *Next* links to change pages. Once you have found the correct diagnosis, click the *Select* link to the right of the diagnosis information.

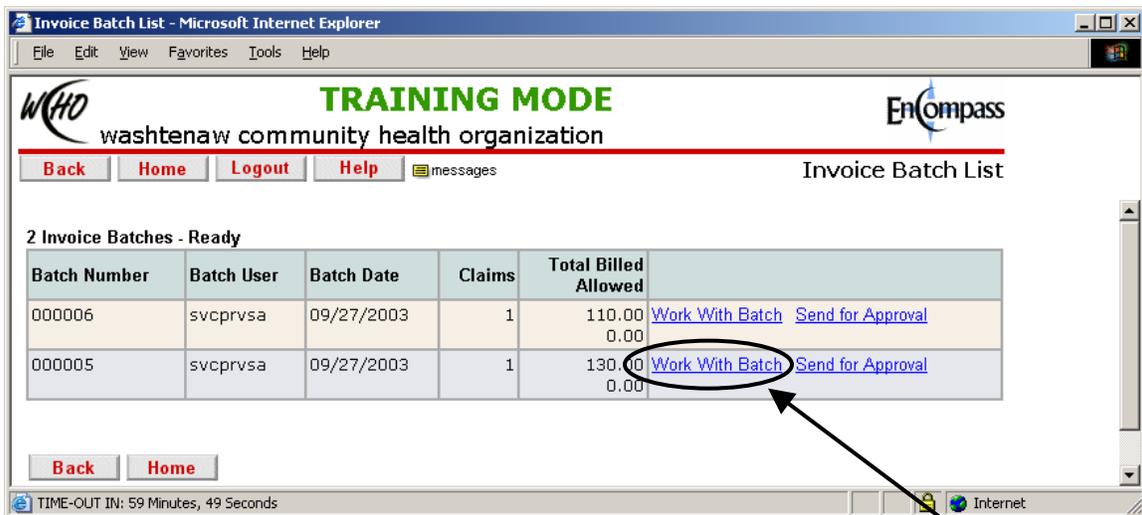


Claim Batch Review and Send for Approval

- Click on *Claim Batch Review and Send for Approval*



- Any existing batches that have not been sent to WCHO for approval will be displayed.



- To view the claims that are included in the batch click on the *Work with Batch* link.
- A listing of all the claims included in the batch will be displayed. Use the *Change* or *Delete* links to edit or remove the claims.



- Once the claims have been reviewed, click on the BACK button to return to the send approval screen.

The screenshot shows a web browser window titled "Invoice Batch List - Microsoft Internet Explorer". The page header includes the WHO logo, "TRAINING MODE" in green, and "washtenaw community health organization". The EnCompass logo is in the top right. Navigation buttons for "Back", "Home", "Logout", and "Help" are visible, along with a "messages" icon. The main content area is titled "Invoice Batch List" and displays "2 Invoice Batches - Ready".

Batch Number	Batch User	Batch Date	Claims	Total Billed	Allowed	
000006	svcprvsa	09/27/2003	1	110.00	0.00	Work With Batch Send for Approval
000005	svcprvsa	09/27/2003	1	130.00	0.00	Work With Batch Send for Approval

At the bottom of the page, there are "Back" and "Home" buttons. The status bar at the very bottom indicates "TIME-OUT IN: 59 Minutes, 49 Seconds" and "Internet".

- Click on the *Send for Approval* link to send the batch to WCHO for approval, adjudication and payment.

Provider Staff Directory

The Provider Directory is a list of the Provider's Staff members that have access to the Encompass system. System Administrators will use the Staff Directory to add additional Users to the database.

View Staff Directory

- Click on *Provider Staff Directory*

Service Provider Menu - Microsoft Internet Explorer

File Edit View Favorites Tools Help

WHO **TRAINING MODE** EnCompass
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Home Logout Help messages Service Provider Menu

the pending bills back to an active batch. [+ myPage](#)

[Complete Batch List](#)
View a list of all batches regardless of current status. This option can be useful for looking up historical claims. [+ myPage](#)

Provider Staff Directory

Add/Change/Delete Provider's Staff [+ myPage](#)

Saturday, September 27, 2003 11:43 AM Eastern Time Peter Parker (SA)

TIME-OUT IN: 59 Minutes, 52 Seconds Internet

- A listing of the Provider Staff Members with access to Encompass will be displayed

WHO **TRAINING MODE** EnCompass
washtenaw community health organization

Back Home Logout Help messages Contact List

	Provider Test (SA) Provider of Michigan	Address 12345 Second SA Street Suite 345 Ann Arbor, MI 48123
Phone 734-2223-5656	Fax 734-2223-7878	

Person Name: (Type any part of the last or first name)

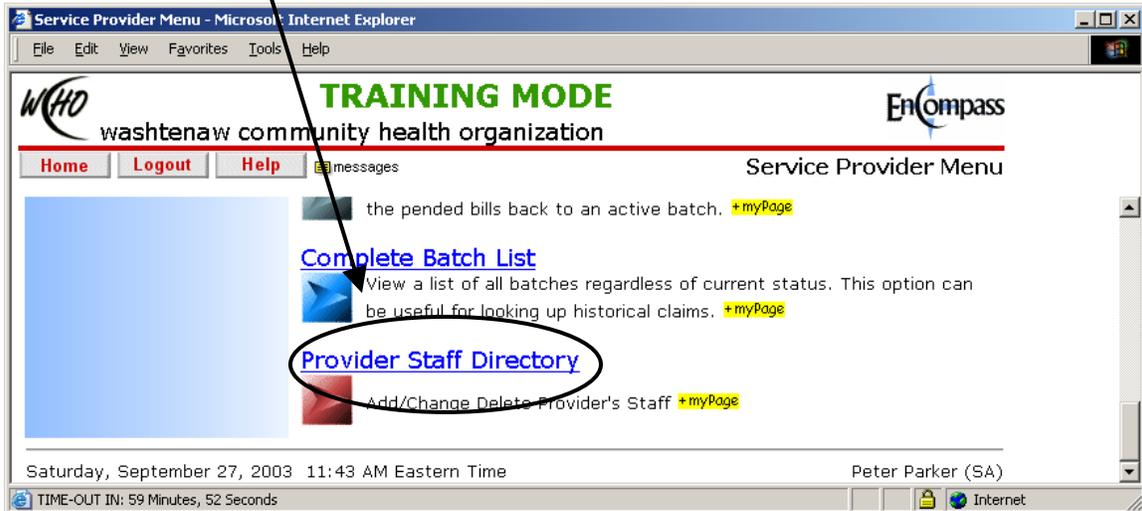
1 Matched

Name	Phone	Status	Add/Change/Delete
Peter Parker (SA)	313-902-2345	Active	Change Delete View

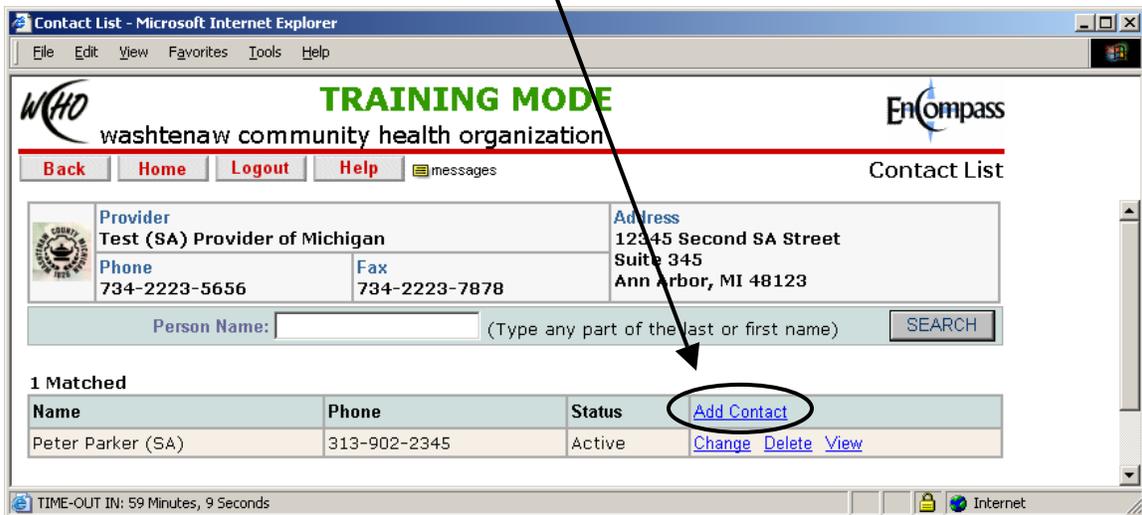
- Click on the **View** link to view the details of the Staff Member, such as licensing and credentials.

Add a Staff Member (Contact)

- Click on **Provider Staff Directory**



- To avoid entering a duplicate record, search the Staff Member database before adding a new Staff record. If your search does not return any results, it is safe to enter a new record, click on the **Add Contact** link.



- Enter the following information about the Staff Member
 - o Name
 - o Contact Information – phone, fax numbers and email address
 - o Job Information – department, job title, hire date, and job functions
 - o ORR Training – dates of initial and last OOR training dates
 - o Credentials – Use the drop down menu to select educational degree, discipline, and billing type.

- o License – Use the drop down menu to select license type, enter the license number, license name, State, and expiration date.
- o User ID – Enter the Staff Members User ID.
- Once all of the Staff Member information has been entered, click the SAVE Button
- The new Staff Member will now appear in the directory and a User ID has been added.

Performance Improvement Network Indicators

Step 1: Click on *Performance Indicator* button.

The screenshot displays the EnCompass web application interface. At the top, the logo for 'WCHD washtenaw community health organization' is on the left, 'TRAINING MODE' is in the center, and the 'EnCompass' logo is on the right. Below the logo is a navigation bar with buttons for 'Home', 'Logout', and 'Help', and a 'messages' icon. The main content area is divided into two columns. The left column is a sidebar menu with the following items: 'Clinical Information', 'Authorization', 'Claim Processing', 'Performance Indicator' (circled in red), 'Incident Reports', 'Staff Directory', 'Medifax Lookup', 'Change Password', and 'User Guidelines'. The right column contains three main sections: 'View Consumers' (with a blue icon and '+myPage' link), 'View Screening and Assessment Records' (with a red icon and '+myPage' link), and 'View Substance Abuse Referral Forms (SARF)' (with a green icon and '+myPage' link). Below these sections is a link for 'Complete Substance Abuse Admission Forms'. A red arrow points from the 'Performance Indicator' button in the sidebar to the 'View Consumers' section.

Step 2: Click on *Performance Improvement Network Indicators* to submit Performance Improvement Data.

WCHD washtenaw community health organization

TRAINING MODE

EnCompass

Home Logout Help messages Performance Indicator

- Clinical Information
- Authorization
- Claim Processing
- Performance Indicator**
- Incident Reports

[Performance Improvement Network Indicators](#)
Complete Performance Improvement Network Indicator forms [+ myPage](#)

Step 3: Choose the quarter you wish to update (1, 2, 3 or 4). Click on the quarter you are updating.

1 Performance Indicators

Contract	Form	Effective & Expiration Date	
35962 - Licensed Setting-ALS	Licensed Settings	10/01/2003 - 09/30/2004	Update Q1 Update Q2 Update Q3 Update Q4

Step 4: Fill out all required fields (data and discussion).



Some fields on this form contain calculated data. To update these fields to reflect your changes, click the button below

Update Calculated Fields

Quarter 1

Satisfaction with Services Provided (reported annually) - Data due April 30, 2004			
# of Surveys Distributed	# of Surveys Collected	Response Rate (calculated)	Satisfaction Rate (from Satisfaction Survey Compilation Form)
<input type="text" value="20"/>	<input type="text" value="15"/>	75%	<input type="text" value="90.00"/>

Community Integration (reported quarterly)				
	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
# of consumers served this quarter	<input type="text" value="25"/>			
Target # of group activities per quarter	<input type="text" value="10"/>			
Actual # of group activities for the quarter	<input type="text" value="6"/>			
Target # of consumer chosen activities per quarter	<input type="text" value="5"/>			
Actual # of consumer chosen activities for the quarter	<input type="text" value="2"/>			

Staff Retention (reported quarterly)				
	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
# of staff working 6 months or more	<input type="text" value="4"/>			
Total # of staff	<input type="text" value="10"/>			
Percentage of staff working 6 months or more (calculated)	40%			

Discussion of Network Indicators

We gave our satisfaction surveys October 15, 2004. Our satisfaction rate was 90%. This is the area the provider should discuss any questions that scored lower than the target. The provider should also include any plans to improve scores on those questions over the next year.

Step 5: Click on the *Update Calculated Fields* button at the top of the page.

WCHD **TRAINING MODE** **EnCompass**
washtenaw community health organization

[Back](#) [Home](#) [Logout](#) [Help](#) messages [Change Performance Indicators](#)

	Provider Adult Learning Systems	Address 1954 South Industrial Hwy Suite A Ann Arbor, MI 48104	
	Phone 734-668-7447	Fax 734-668-2772	
	Site No. 416		

Contract Name Licensed Setting-ALS	Contract Number 35962	Effective-Expiration Dates 10/01/2003 - 09/30/2004
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Quarterly Performance Improvement Network Indicators
Licensed Settings

Some fields on this form contain calculated data. To update these fields to reflect your changes, click the button below

[Update Calculated Fields](#)

Quarter 1

Step 6: Click the *save* button on the bottom of the page.

Discussion of Network Indicators

We gave our satisfaction surveys October 15, 2004. Our satisfaction rate was 90%. This is the area the provider should discuss any questions that scored lower than the target. The provider should also include any plans to improve scores on those questions over the next year.

Record Added
wchdva 03/31/2004 10:26:31

Record Changed

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[Back](#) [Home](#)