Every Woman Matters Med-IT Data Entry

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How to Access Med-IT

- To first access Med-IT, complete a Med-IT User Profile Form and submit to your TA.
- Forms can be found on our website.
- An annual update is required.

Nebraska Women's and Men's Health Programs

Department of Health & Human Services
DHHS
NEBRASKA

MedIt Profiles New User Form

Please print clearly

Name ____

Title____

Business Name ____

Work Phone (___) ____

Fax number (___) ____

Business E-Mail address ____

Business Street address ____

Business P.O. Box ______________

Business City ______________________Business State _____________

Business Zip _____________-__________

Case Managers Only: Counties Served____

☐ I understand that user profiles are not to be shared with other people. I understand and agree that if my clinic has a new user to add I will contact Nebraska Women's and Men's Health Programs at 1-800-532-2227.

☐ I will notify Nebraska Women's and Men's Health Programs if I will no longer be doing data entry. Failure to do so will result in removal as a MedIt user.

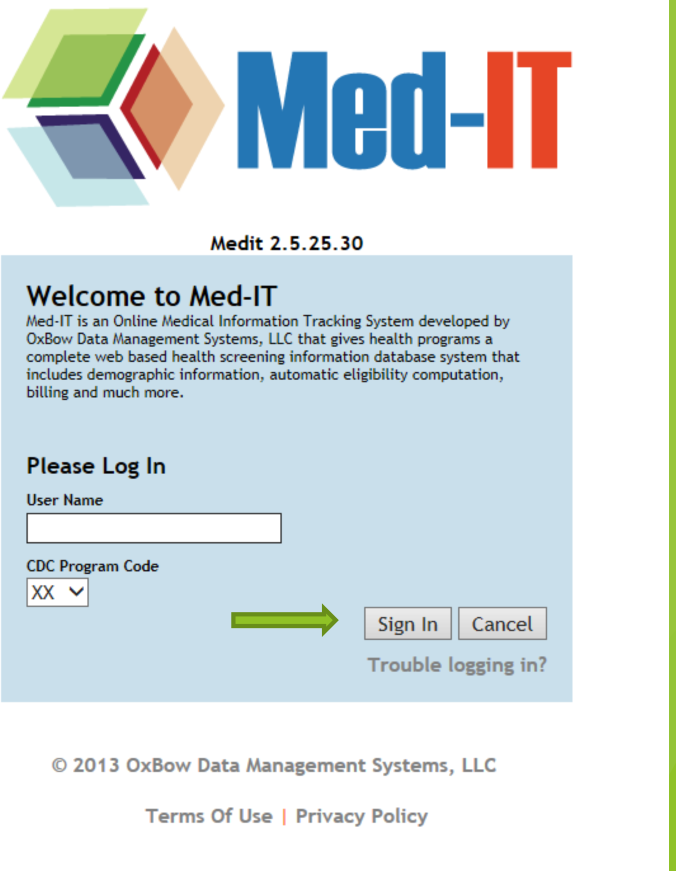
☐ I understand I am required to attend MedIt training.

☐ I acknowledge that unauthorized use, dissemination or distribution of client's Protected Health Information and confidential information is a crime. I agree that I will not use, disseminate or otherwise distribute confidential records of documents containing Protected Health Information either on paper or by electronic means other than in performance of the specific job roles I am authorized to perform. I agree that unauthorized use, dissemination or distribution of confidential information is grounds for immediate termination of my MedIt user profile and may subject me to penalties both civil and criminal.

Signature____ Date___________________

How to Login to Med-IT

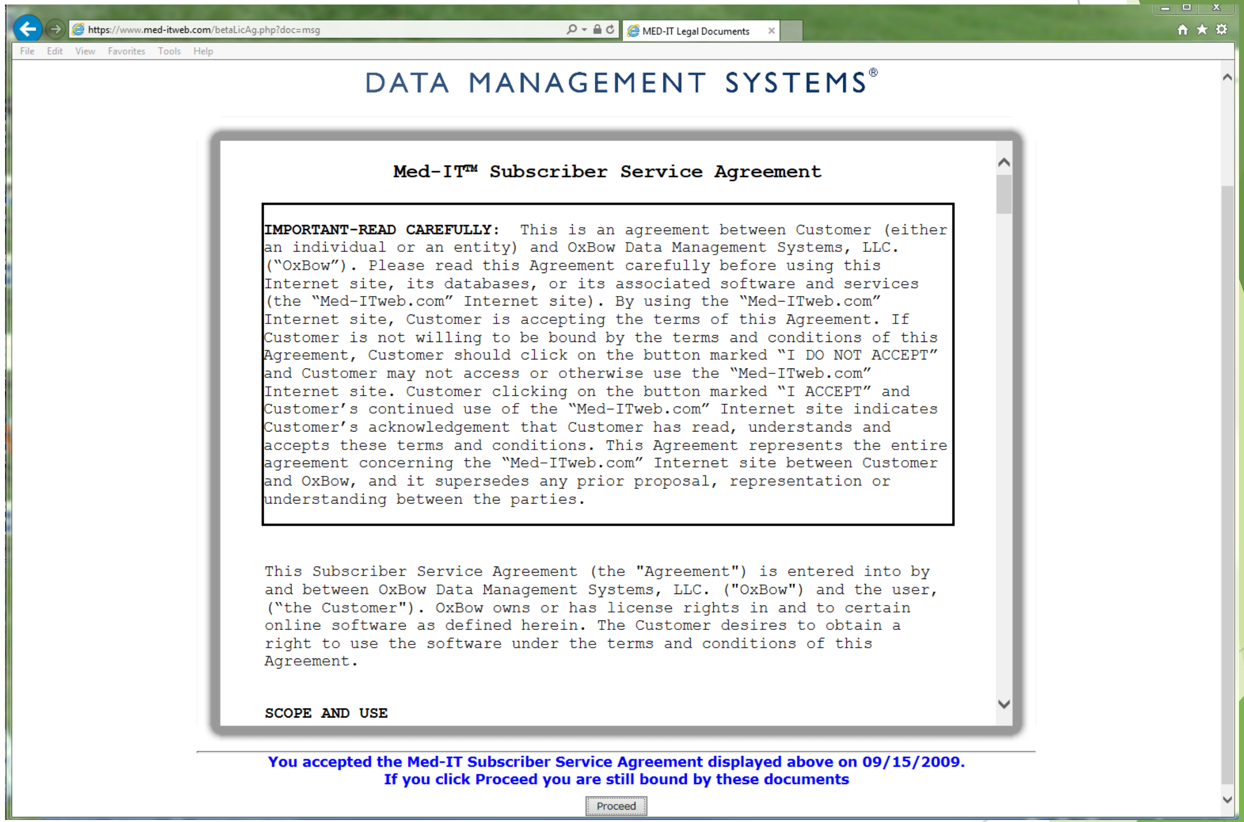
- To access Med-IT go to: www.med-itweb.com
- To Login:
  - Enter User Name
  - CDC Program Code: select NE (for Nebraska)
  - Click on Sign In
  - Next screen enter your Password
  - Click on Login



How to Login to Med-IT

Click ‘Proceed’ to continue. You’ll have to click ‘Proceed’ two times.

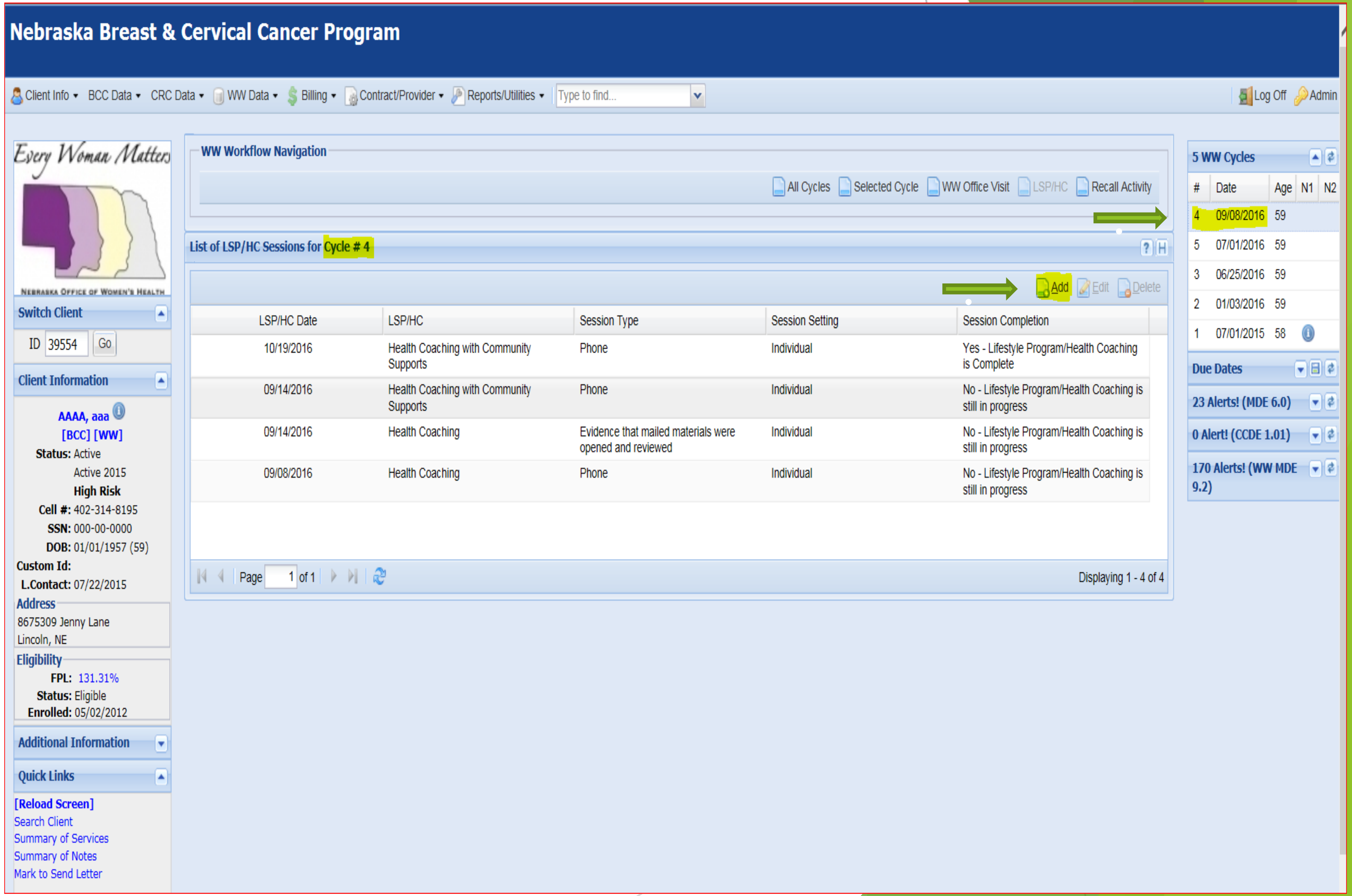
You are now logged into Med-IT.



Health Coaching

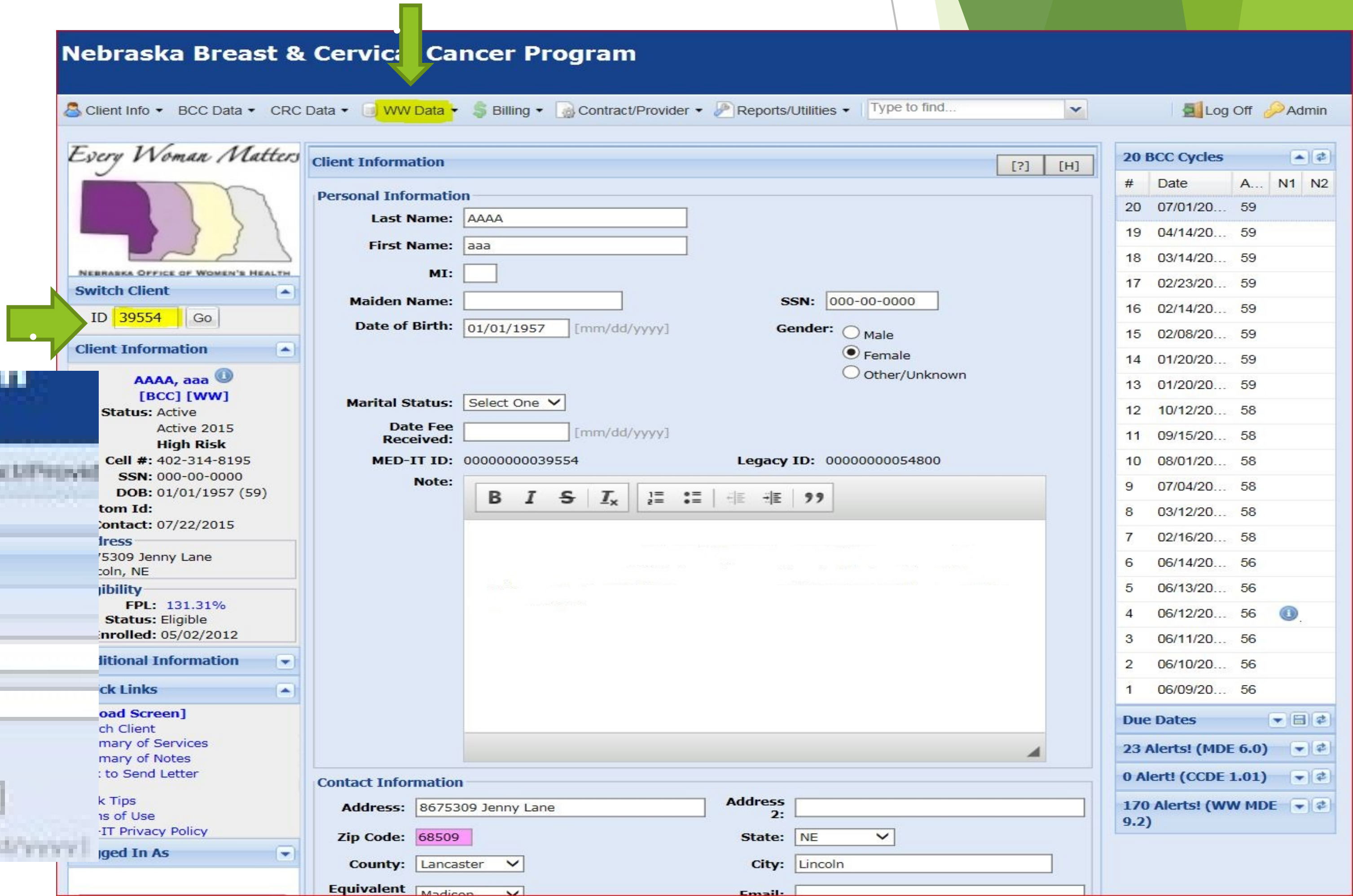
How to Match Client Cycles

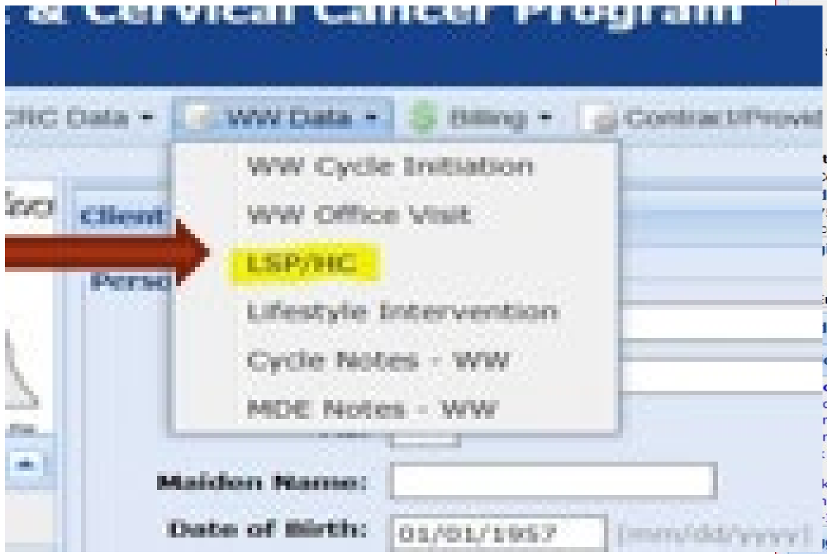
- If client has existing **Health Behavior Support Service (HBSS)** records, you will see these listed.
- Locate the client cycle on the EWM/WW Health Coaching list sent out by your TA in the column titled "**cycle number**" (NOT cycle count).
- Match the cycle on your EWM/WW HC list with the cycle located in the right column of the screen titled "**WW Cycles**". If it doesn't match up, you need to click on the cycle number that matches what is on your list.
- After matching the cycles, click **Add** to bring up the LSP/HC screen.



How to Add a Health Coaching Only Record

- To add a new HC session, enter client ID in ID box located in the left navigation column, Click **Go**
- Select **WW Data** tab located near the top of the screen
- Select **LSP/HC** in the drop down menu

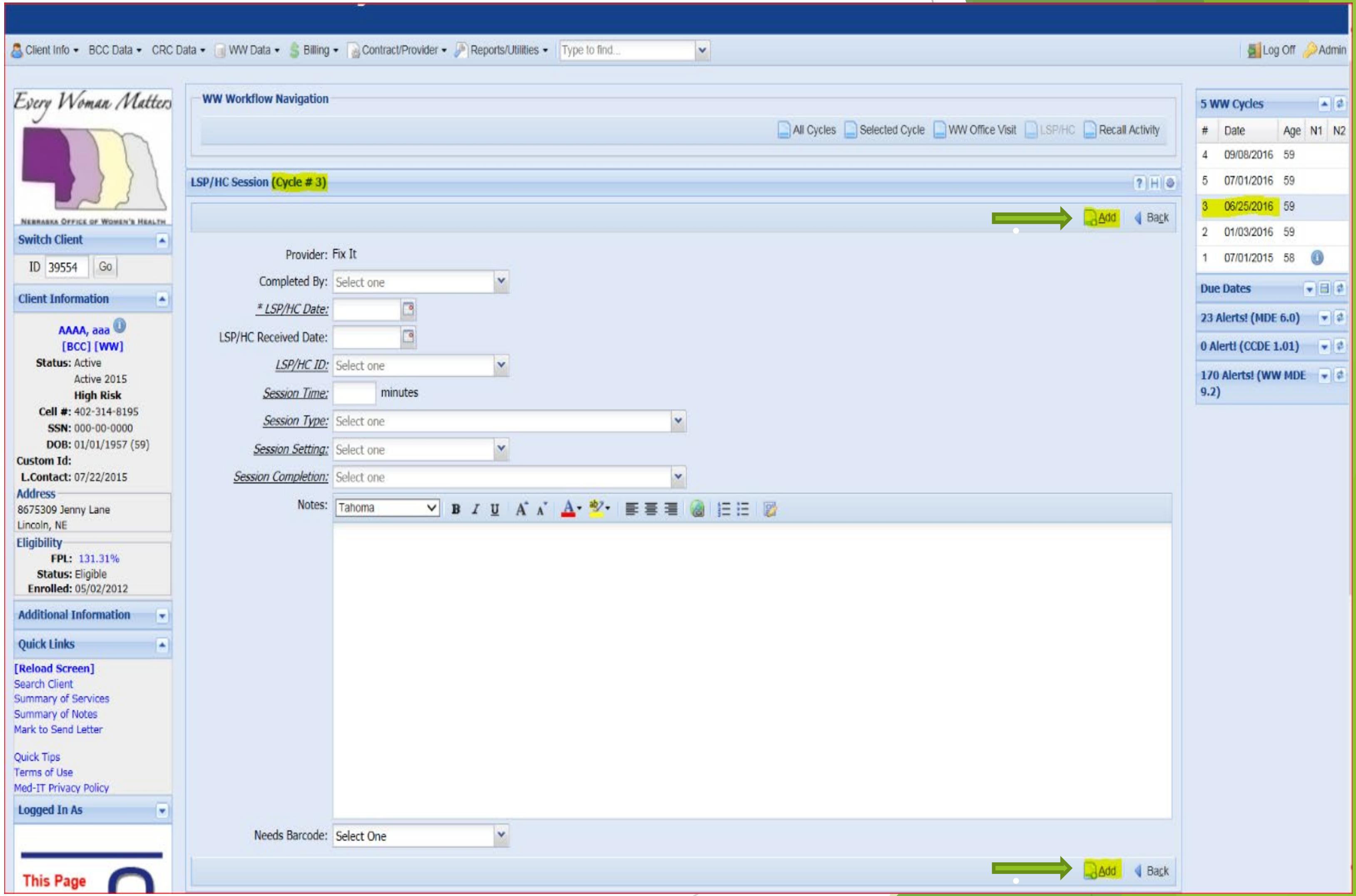




How to Add a HC Only Record

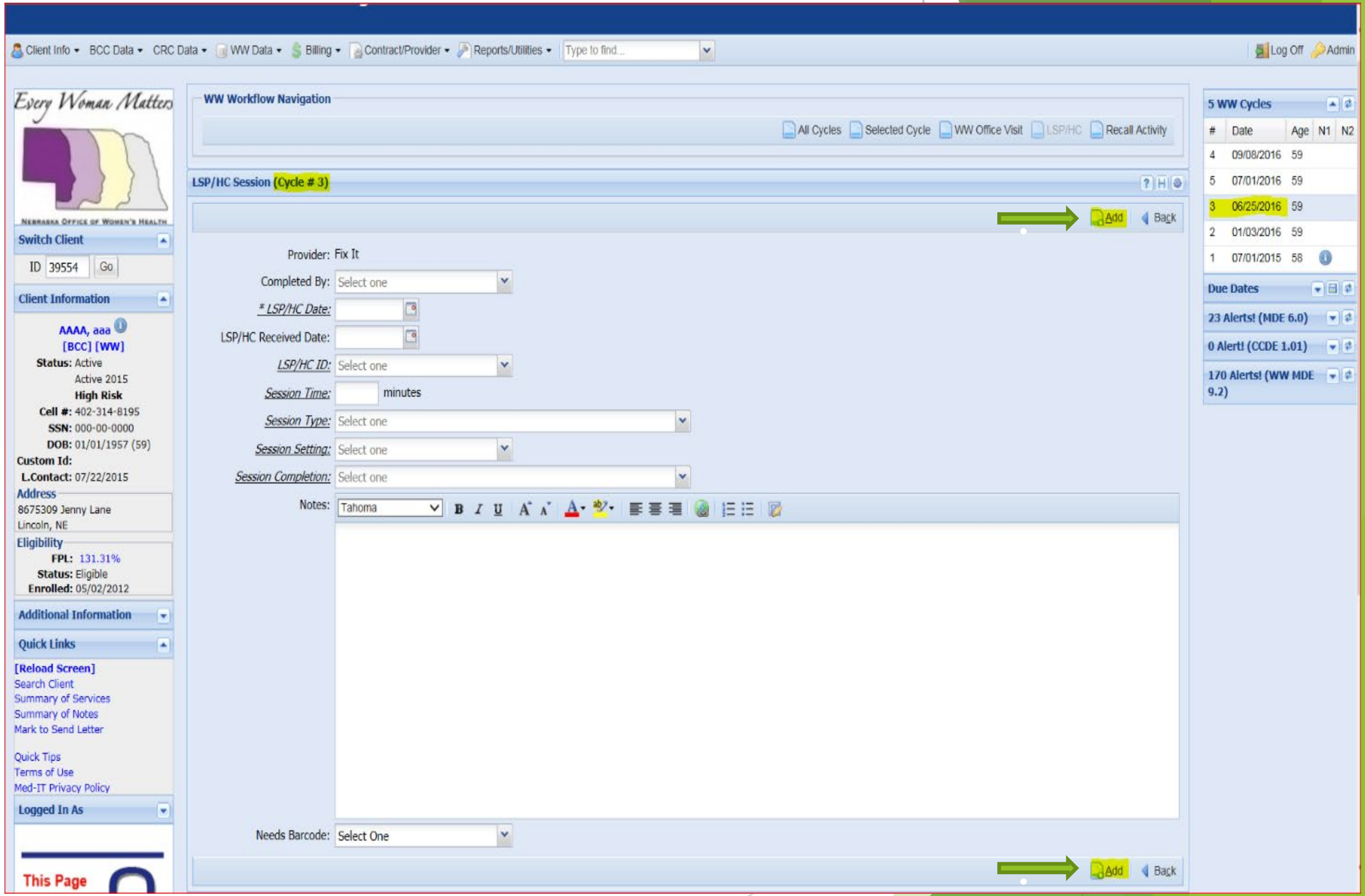
- You will see the screen to the right for entering a new client record and complete the following data entry fields:

- Completed By
- LSP/HC Date
- LSP/HC Received Date
- LSP/HC ID, select **Health Coaching**
- Session Time
- Session Type
- Session Setting
- Session Completion



How to COMPLETE a HC Only Record

- Under **Session Completion-** select *No - Lifestyle Program/ Health Coaching is still in progress*
- Once all data entry fields are complete, click **Add**.
- It is the same data entry process for entering the second HC session.
- Almost the same process for the 3rd HC session, but in the **Session Completion** field you select ***Yes-Lifestyle Program/Health Coaching is Complete***



Data Entry for Health Coaching w/ HBSS Record

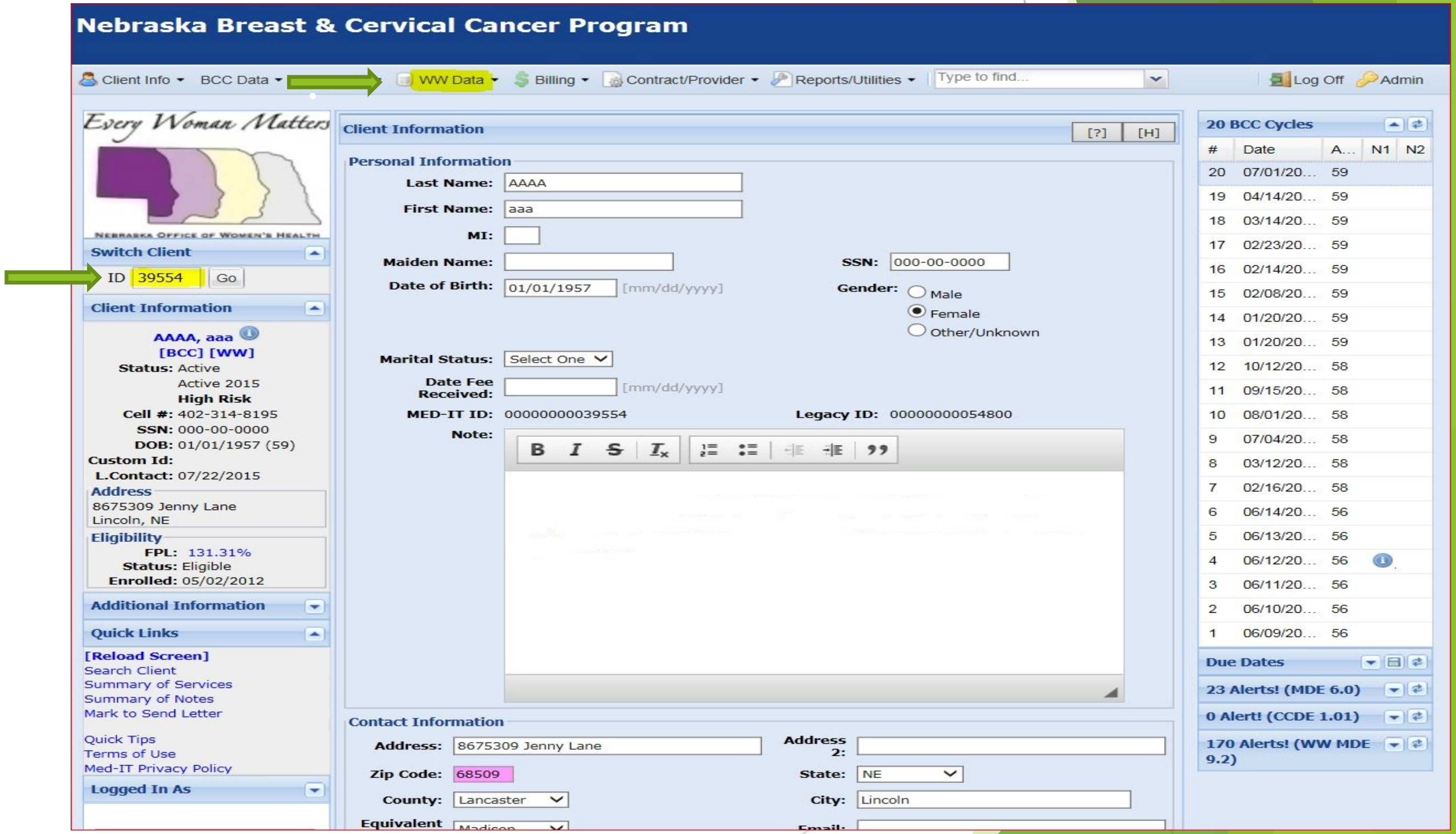
HBSS for EWM/WW clients are documented in Med-IT. **Approved HBSS**' are:

- **Check. Change. Control.**
- **Health Coaching Only**
- **Living Well**
- **National Diabetes Prevention Program**
- **Walk and Talk Physical Activity Toolkit**

****Just one HC or HC w/ HBSS entry per session is required.**

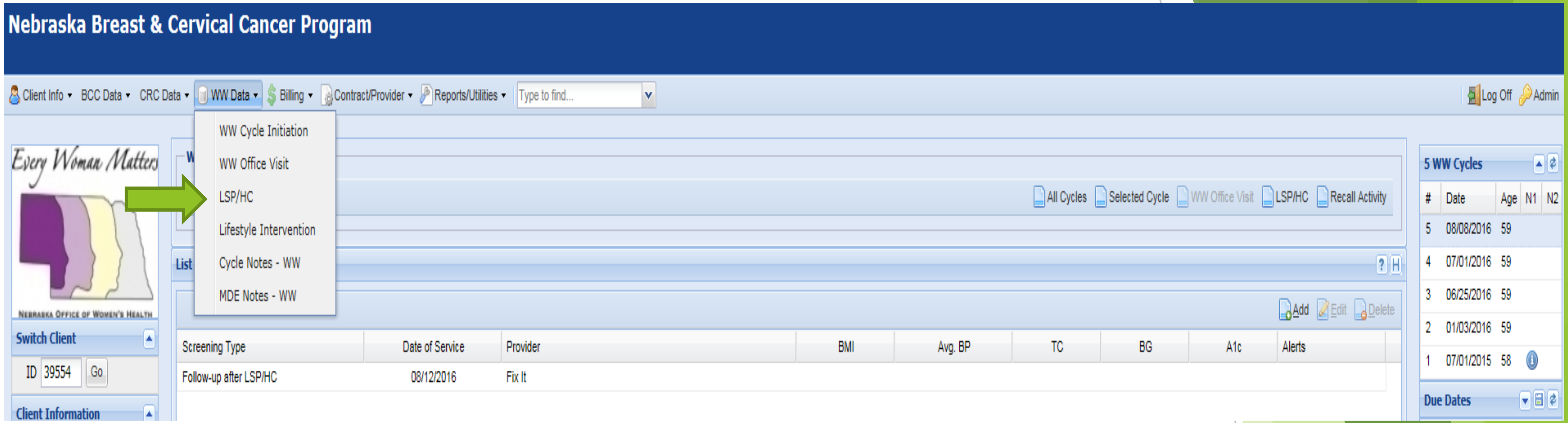
- Enter client ID in ID box located in the left navigation column, click **Go** to locate client in Med-IT.

- Click on **WW Data** tab

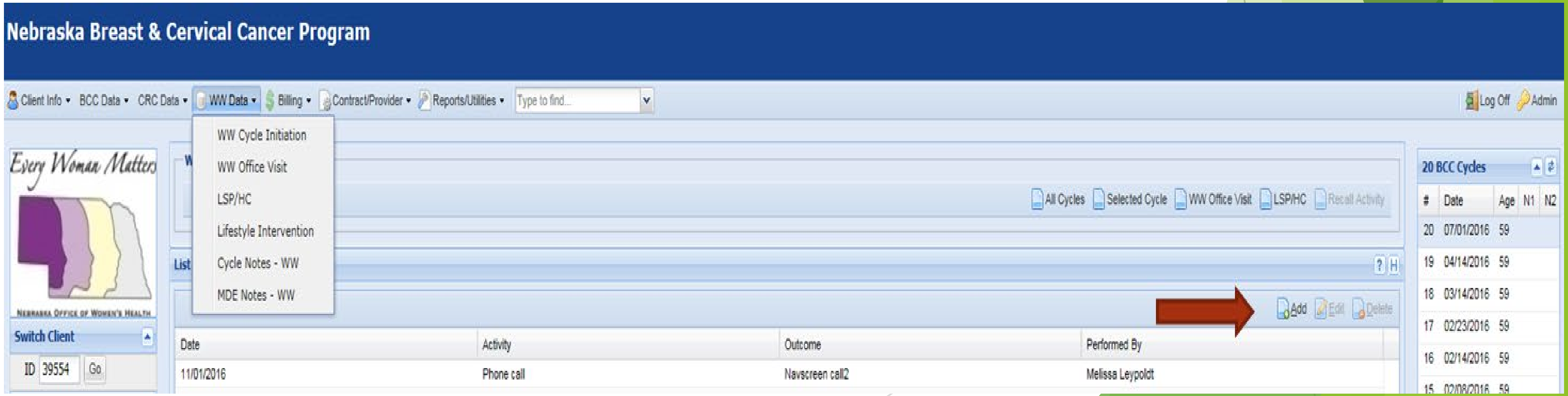


Data Entry for Health Coaching/HBSS

Click on **LSP/HC**



Click on **Add**

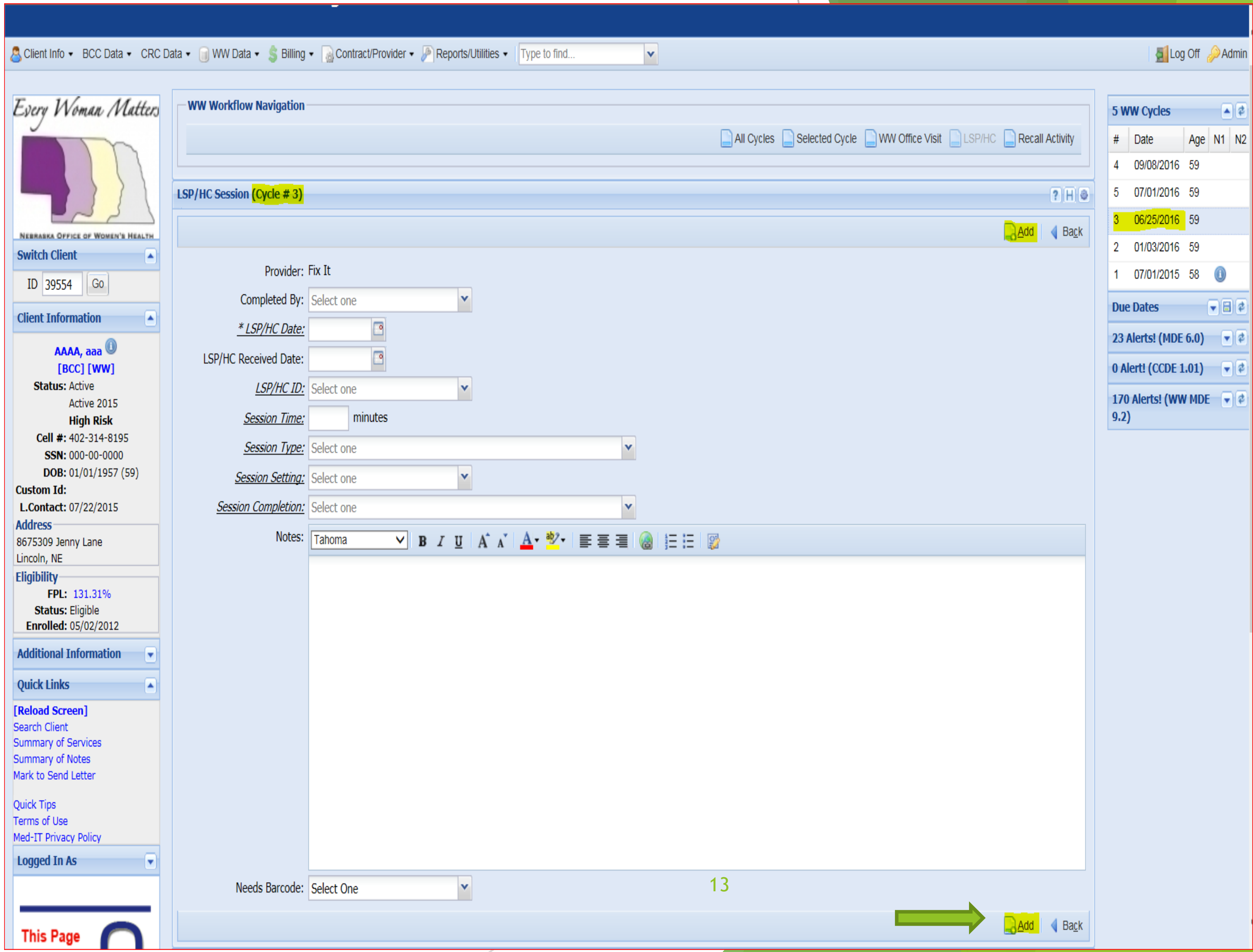


Data Entry for Health Coaching/HBSS

Complete the following data fields:

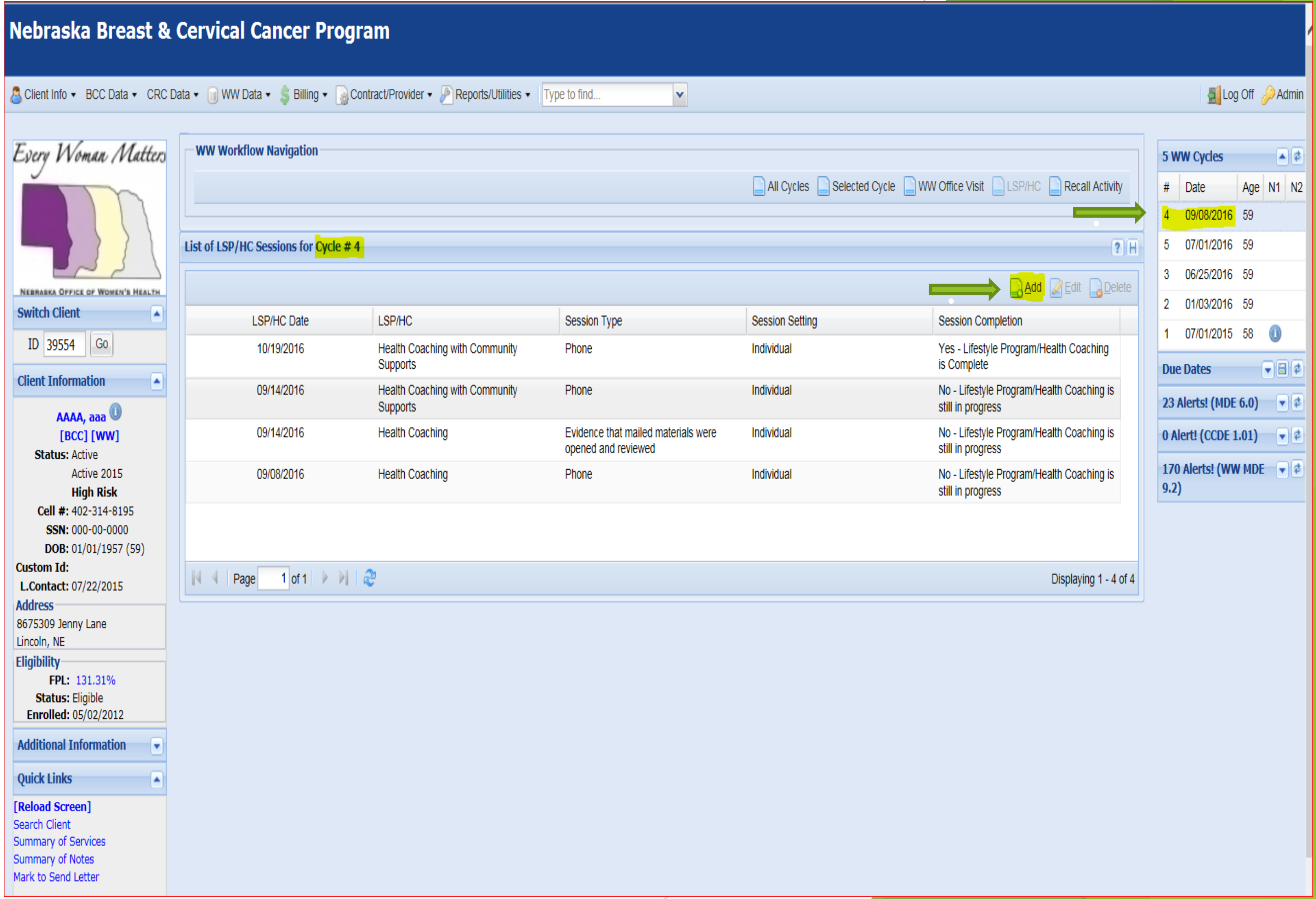
- *Completed By*
- *HBSS Date*
- *HBSS Received Date*
- *LSP/HC ID* (select one):
  - Check. Change. Control.
  - Health Coaching
  - Living Well
  - National Diabetes Prevention Program
  - Walk and Talk Tool Kit
- *Session Time*
- *Session Type*
- *Session Setting*
- *Session Completion*
- *Notes-only if needed*
- *Enter Post Biometrics-weight & 2 BP's at 3rd HC Session*

- Click **Add**



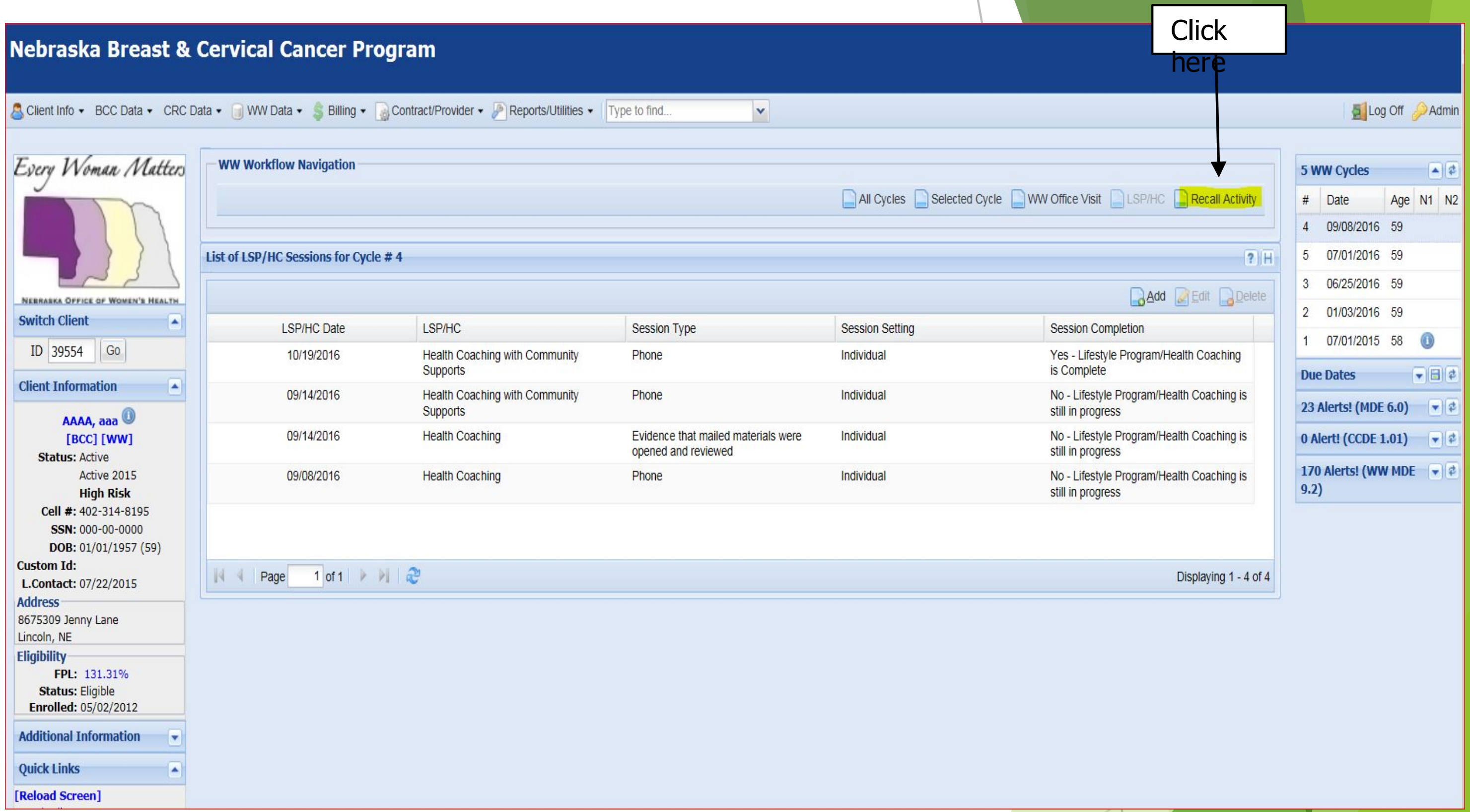
How to Avoid Overriding Previous Documentation

- Do not click into an existing record to enter ***new*** data. This will override previous documentation.
- If you need to edit a previous record, pull up the existing record, enter your edits/changes and then click **Add** to save your changes.



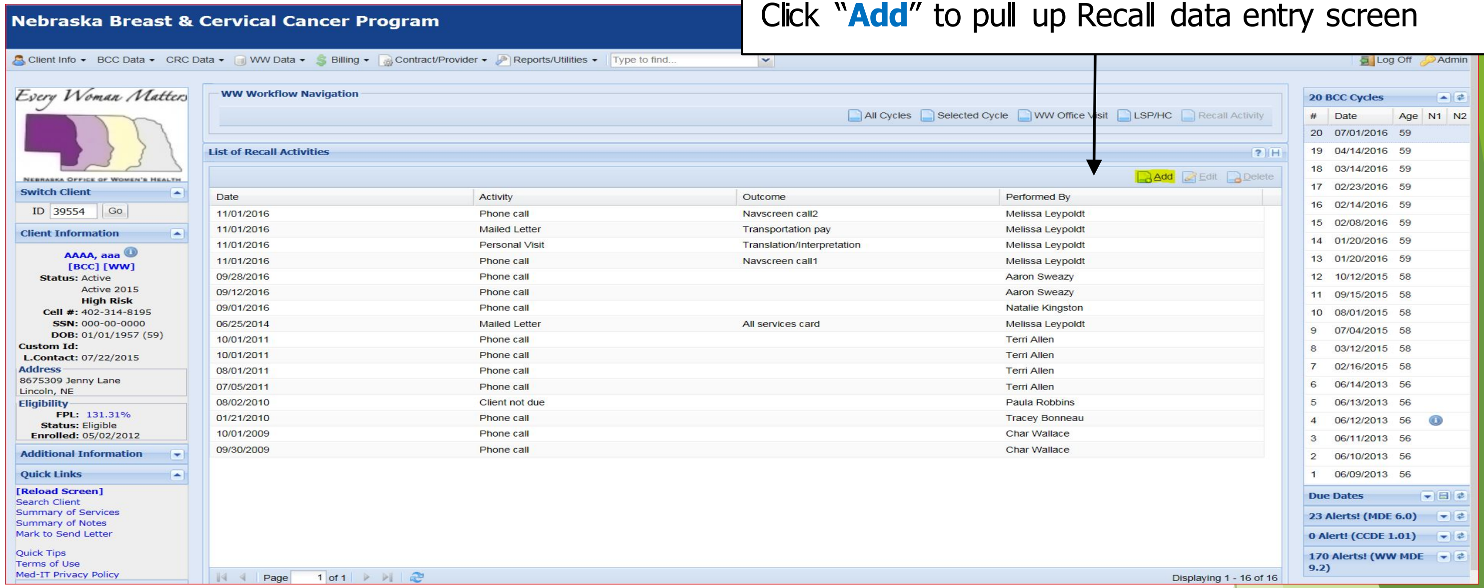
Recording Recall Activity

- All missed call attempts (i.e., not a good time to call even if you talked to client, emails or texts) should be recorded in **Recall Activity**.
- When you click on **LSP/HC (HBSS)** under the **WW Data** tab and if client has existing **HBSS** records, you will see the screen pictured.
- Click on **Recall Activity**

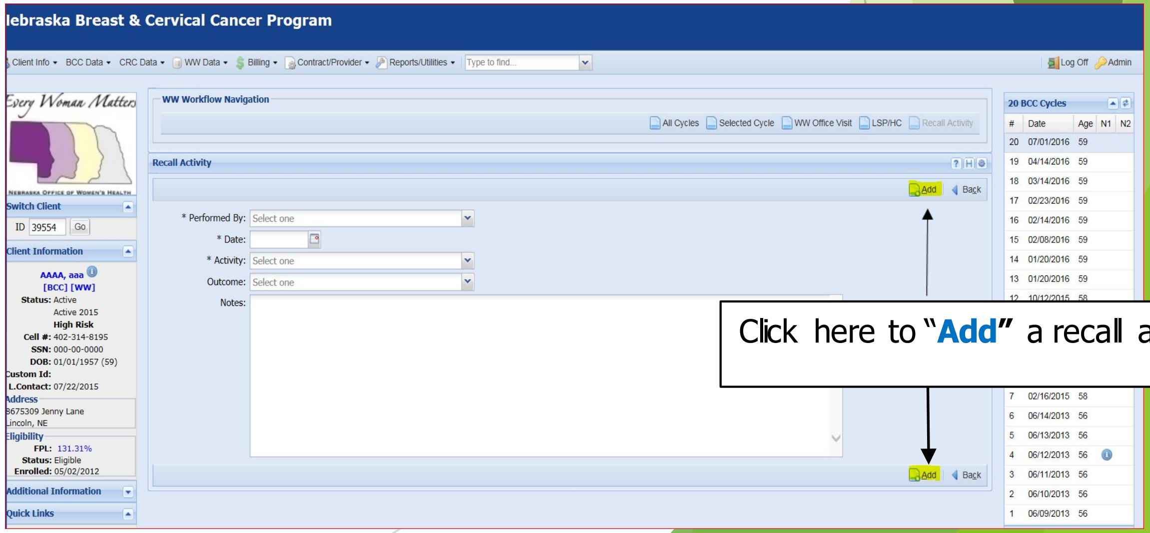


How to Record Recall Activity

Click "**Add**" to pull up Recall data entry screen



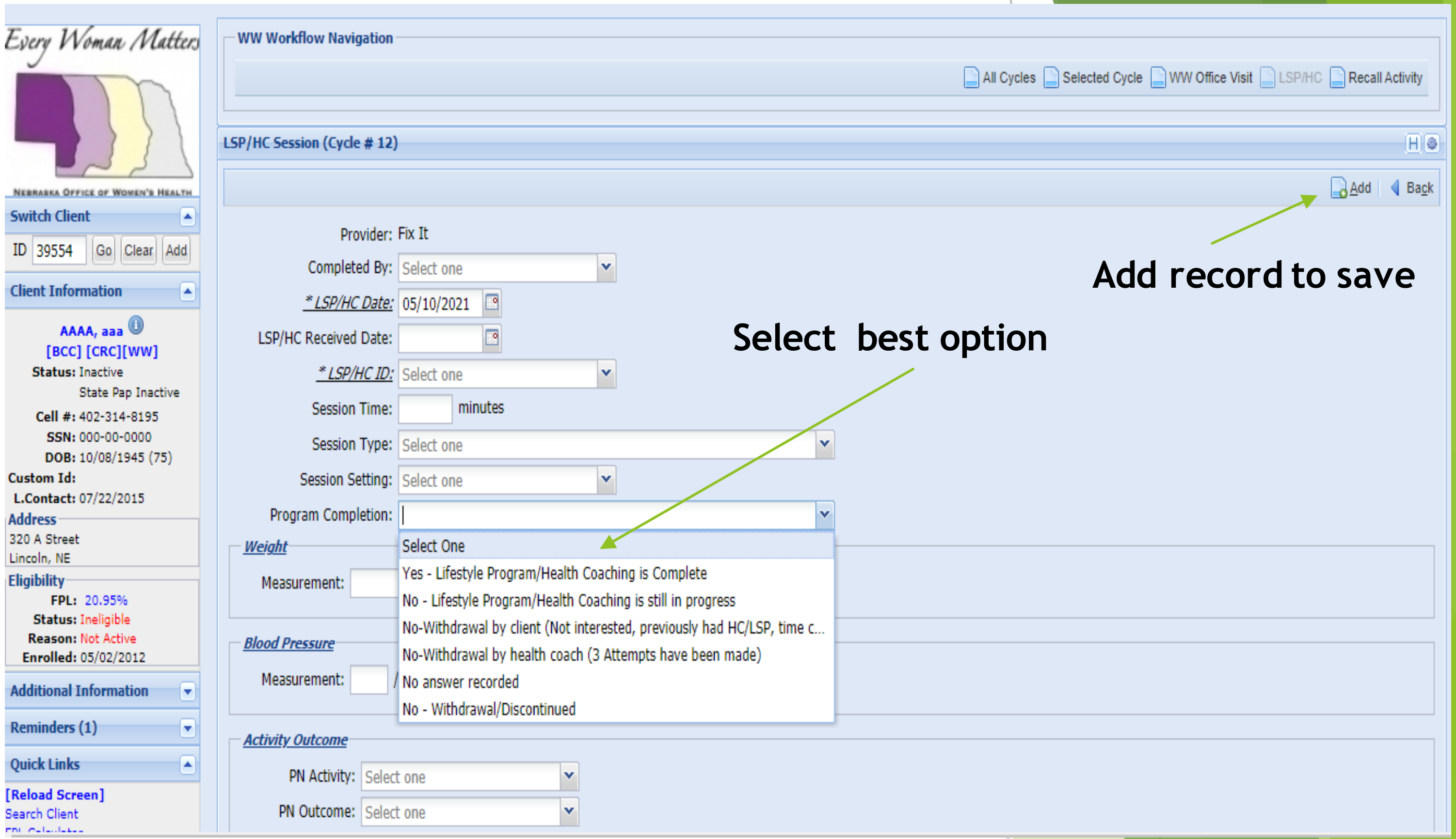
After you complete the data entry fields, click **Add** to add/save the record.



Click here to "**Add**" a recall activity reco

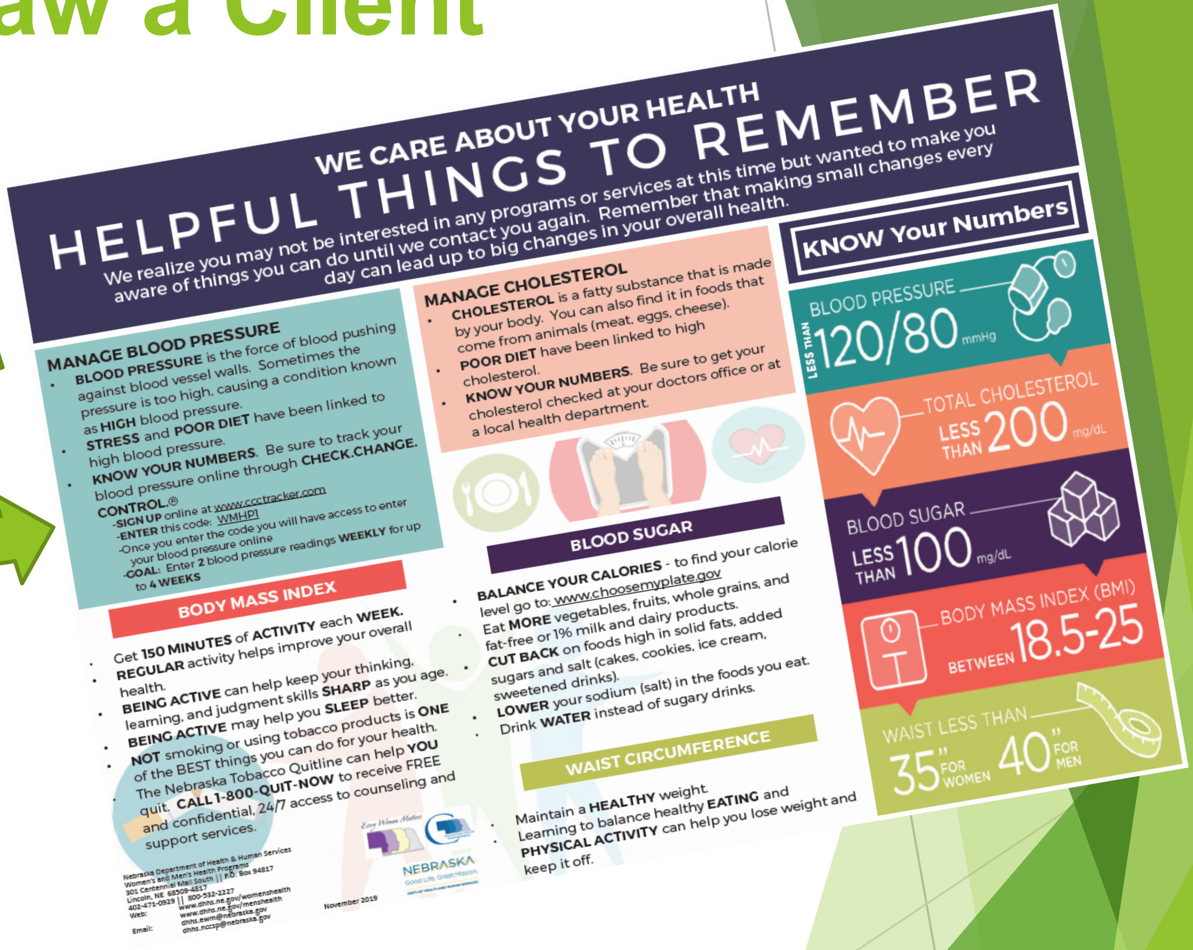
How to Withdraw a Client

- Community Health Hubs will need to enter a HC **WITHDRAWAL** record when:
  - You are unable to reach the client after 3 or more call attempts.
  - Client choses to withdrawal.
  - Client phone is disconnected or out of service.
- Select one drop down choice under **Session Completion** that best describes what has occurred and is resulting in a **WITHDRAWAL**.
- Click **ADD** to make sure the **WITHDRAWAL** record is saved.



How to Withdraw a Client

- An example of an educational mailing piece our EWM/WISEWOMAN Program has available that you can send to a client that has withdrawn or already participated in a healthy behavior support service.
- Hubs are now responsible for following up by mail with clients on their health coaching list whom they are unable to connect with by phone, email and/or texting. By mail is the final attempt to engage and highlight health coaching services.



HBSS/HC Notes & Examples in Med-It

Notes written by Health Coaches must follow policy for writing notes and include:

- Current date
- Clients name
- Clients date of birth
- Note---Maintain quality content and appropriateness
- Signature/title (first initial and full last name, professional initials or job title)

EXAMPLE: 11/15/2020 - Sarah A. Jones, DOB 05/11/1956 called for health coaching. Sarah has been ill for the last week. She will review the materials and I will call her back at the end of the week. NKingston, Program Coordinator

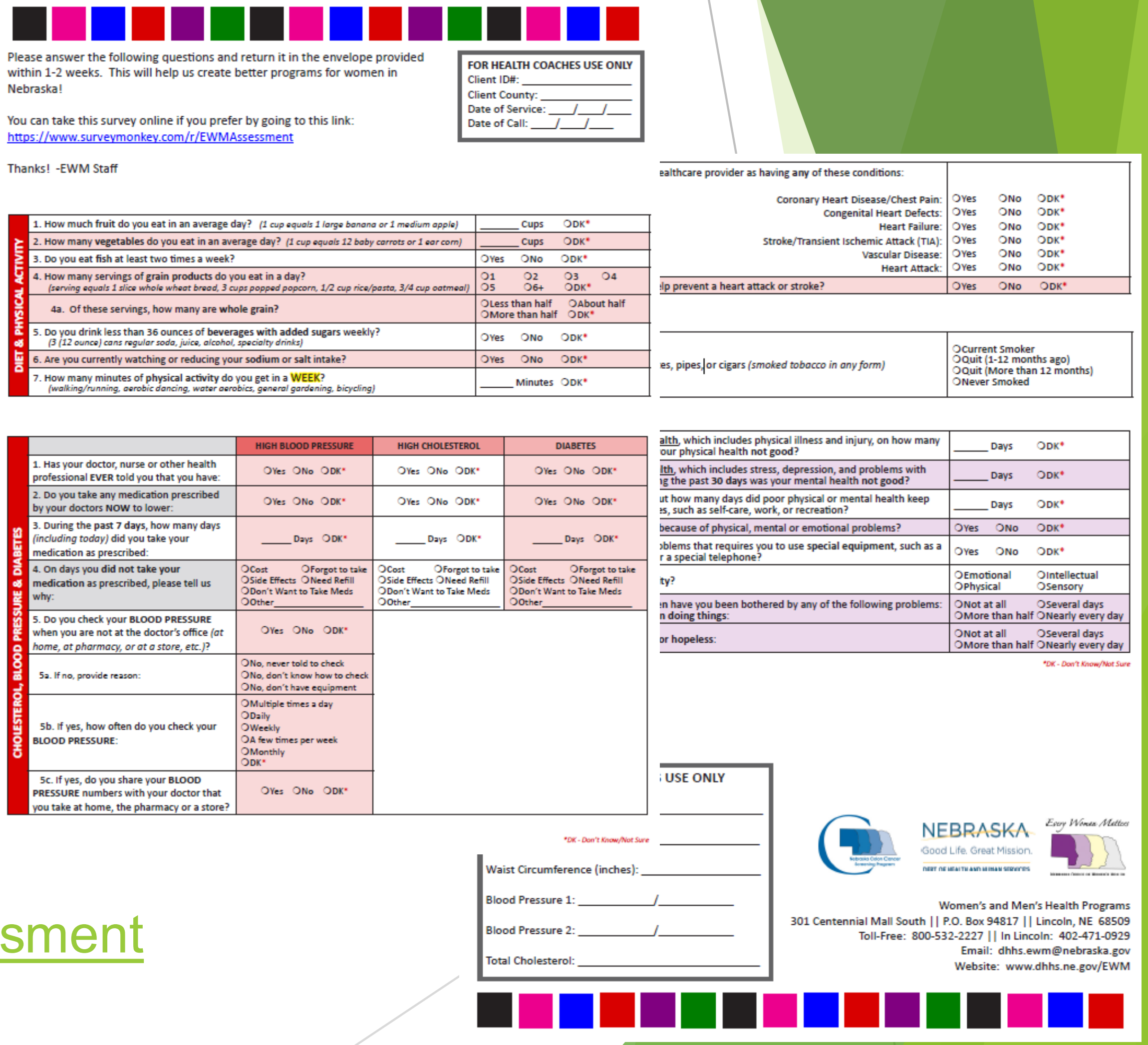
Call or email DHHS if the client needs any changes for the following reasons:

- Address change
- Income change
- Marital status change
- Number of dependents change
- Health insurance change
- Eligibility change such as from State pap to diagnostic
- Client discusses medical issues (history of breast cancer not diagnosed in our program)
- Anytime there is a conversation that ‘OTHERS MAY NEED TO KNOW’

How to Initiate a Follow-up Assessment After HC/HBSS Completion

- The CHH web page has hard copies of the assessment available for download

OR


Please answer the following questions and return it in the envelope provided within 1-2 weeks. This will help us create better programs for women in Nebraska!

You can take this survey online if you prefer by going to this link: https://www.surveymonkey.com/r/EWMAssessment

Thanks! -EWM Staff

FOR HEALTH COACHES USE ONLY
Client ID#: ____
Client County: ____
Date of Service: ___/___/___
Date of Call: ___/___/___

DIET & PHYSICAL ACTIVITY

1. How much fruit do you eat in an average day? *(1 cup equals 1 large banana or 1 medium apple)*	____ Cups ○DK*
2. How many vegetables do you eat in an average day? *(1 cup equals 12 baby carrots or 1 ear corn)*	____ Cups ○DK*
3. Do you eat fish at least two times a week?	○Yes ○No ○DK*
4. How many servings of grain products do you eat in a day? *(serving equals 1 slice whole wheat bread, 3 cups popped popcorn, 1/2 cup rice/pasta, 3/4 cup oatmeal)*	○1 ○2 ○3 ○4 ○5 ○6+ ○DK*
4a. Of these servings, how many are whole grain?	○Less than half ○About half ○More than half ○DK*
5. Do you drink less than 36 ounces of beverages with added sugars weekly? *(3 (12 ounce) cans regular soda, juice, alcohol, specialty drinks)*	○Yes ○No ○DK*
6. Are you currently watching or reducing your sodium or salt intake?	○Yes ○No ○DK*
7. How many minutes of physical activity do you get in a WEEK? *(walking/running, aerobic dancing, water aerobics, general gardening, bicycling)*	____ Minutes ○DK*

CHOLESTEROL, BLOOD PRESSURE & DIABETES

	HIGH BLOOD PRESSURE	HIGH CHOLESTEROL	DIABETES
1. Has your doctor, nurse or other health professional EVER told you that you have:	○Yes ○No ○DK*	○Yes ○No ○DK*	○Yes ○No ○DK*
2. Do you take any medication prescribed by your doctors NOW to lower:	○Yes ○No ○DK*	○Yes ○No ○DK*	○Yes ○No ○DK*
3. During the past 7 days, how many days *(including today)* did you take your medication as prescribed:	____ Days ○DK*	____ Days ○DK*	____ Days ○DK*
4. On days you did not take your medication as prescribed, please tell us why:	○Cost ○Forgot to take ○Side Effects ○Need Refill ○Don't Want to Take Meds ○Other____	○Cost ○Forgot to take ○Side Effects ○Need Refill ○Don't Want to Take Meds ○Other____	○Cost ○Forgot to take ○Side Effects ○Need Refill ○Don't Want to Take Meds ○Other____
5. Do you check your BLOOD PRESSURE when you are not at the doctor's office *(at home, at pharmacy, or at a store, etc.)*?	○Yes ○No ○DK*		
5a. If no, provide reason:	○No, never told to check ○No, don't know how to check ○No, don't have equipment		
5b. If yes, how often do you check your BLOOD PRESSURE:	○Multiple times a day ○Daily ○Weekly ○A few times per week ○Monthly ○DK*		
5c. If yes, do you share your BLOOD PRESSURE numbers with your doctor that you take at home, the pharmacy or a store?	○Yes ○No ○DK*		

*DK - Don't Know/Not Sure

...ealthcare provider as having any of these conditions:

Coronary Heart Disease/Chest Pain:	○Yes ○No ○DK*
Congenital Heart Defects:	○Yes ○No ○DK*
Heart Failure:	○Yes ○No ○DK*
Stroke/Transient Ischemic Attack (TIA):	○Yes ○No ○DK*
Vascular Disease:	○Yes ○No ○DK*
Heart Attack:	○Yes ○No ○DK*
...lp prevent a heart attack or stroke?	○Yes ○No ○DK*
...es, pipes, or cigars *(smoked tobacco in any form)*	○Current Smoker ○Quit (1-12 months ago) ○Quit (More than 12 months) ○Never Smoked
...alth, which includes physical illness and injury, for how many ...our physical health not good?	____ Days ○DK*
...lth, which includes stress, depression, and problems with ...g the past 30 days was your mental health not good?	____ Days ○DK*
...ut how many days did poor physical or mental health keep ...es, such as self-care, work, or recreation?	____ Days ○DK*
...because of physical, mental or emotional problems?	○Yes ○No ○DK*
...oblems that requires you to use special equipment, such as a ...r a special telephone?	○Yes ○No ○DK*
...ty?	○Emotional ○Intellectual ○Physical ○Sensory
...en have you been bothered by any of the following problems: ...n doing things:	○Not at all ○Several days ○More than half ○Nearly every day
...or hopeless:	○Not at all ○Several days ○More than half ○Nearly every day

*DK - Don't Know/Not Sure

...USE ONLY
Waist Circumference (inches): ____
Blood Pressure 1: ____/____
Blood Pressure 2: ____/____
Total Cholesterol: ____

NEBRASKA
Good Life. Great Mission.
Every Woman Matters

Women's and Men's Health Programs
301 Centennial Mall South || P.O. Box 94817 || Lincoln, NE 68509
Toll-Free: 800-532-2227 || In Lincoln: 402-471-0929
Email: dhhs.ewm@nebraska.gov
Website: www.dhhs.ne.gov/EWM

- The assessment link is available online: https://www.surveymonkey.com/r/EWMAssessment

Initiation of the Follow-up Assessment After HBSS/HC Completion

- HC initiates the Follow-Up assessment during the 3rd and final HC call. The Health Coach has the option of completing the assessment with the client using the survey monkey link or by hard copy.

- Completion of the follow-up assessment is an important step for data collection and MDE submission to CDC.

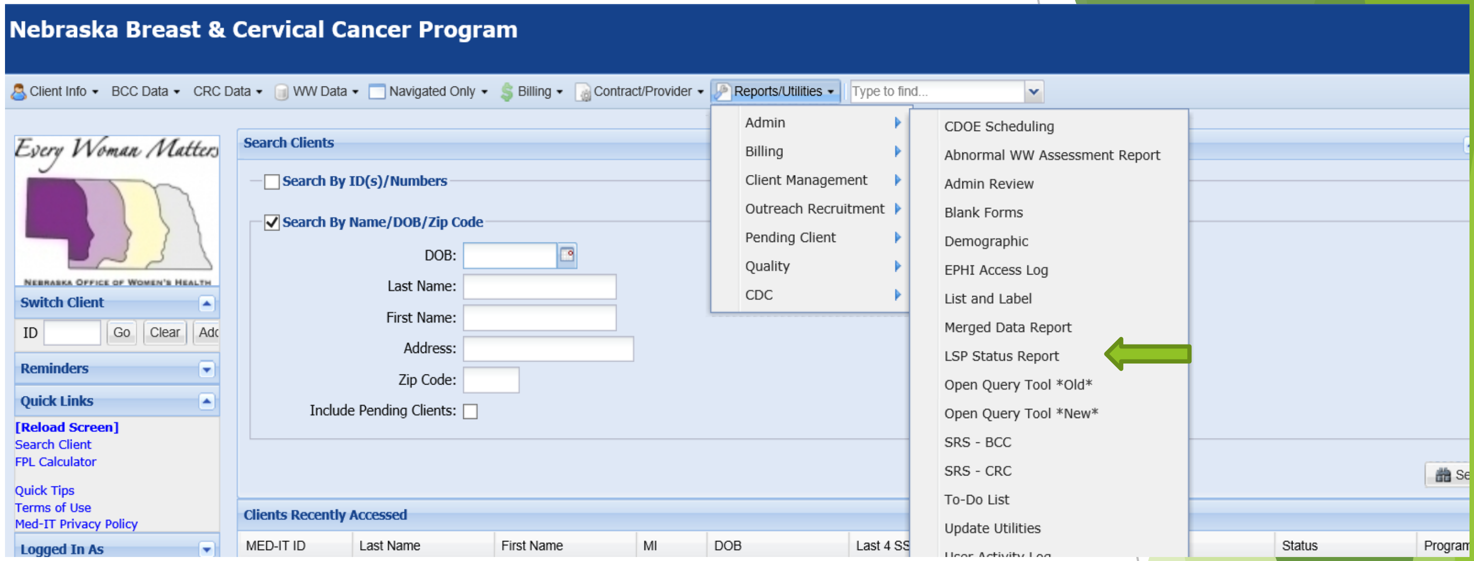
- If the HC completes the hard copy, please include the client ID, the county she resides in, date of service and your call date on the hard copy form, then scan and fax to the DHHS central office at 402-471-0913.

- Please reach out to your TA with any additional questions or concerns.

LSP Status Report

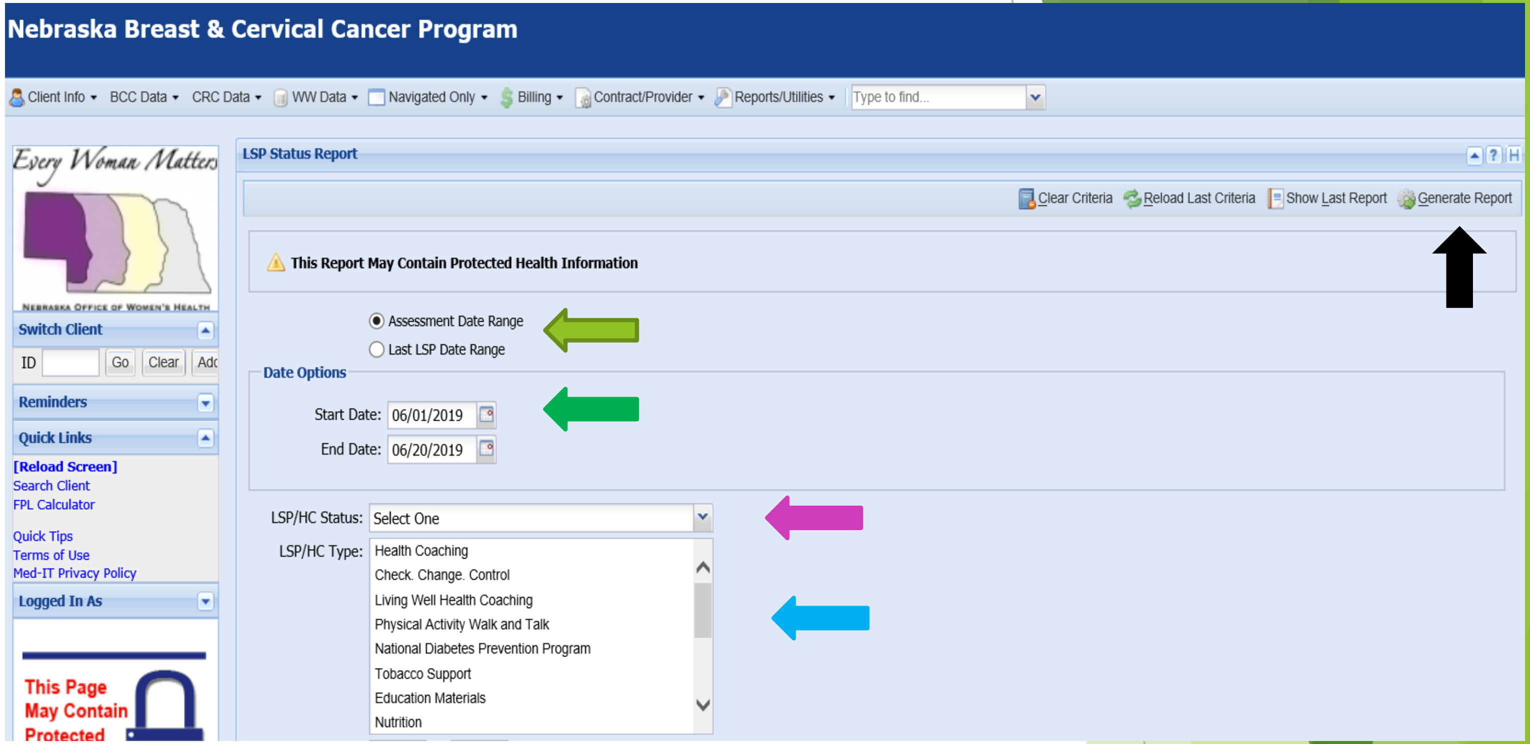
LSP Status Report

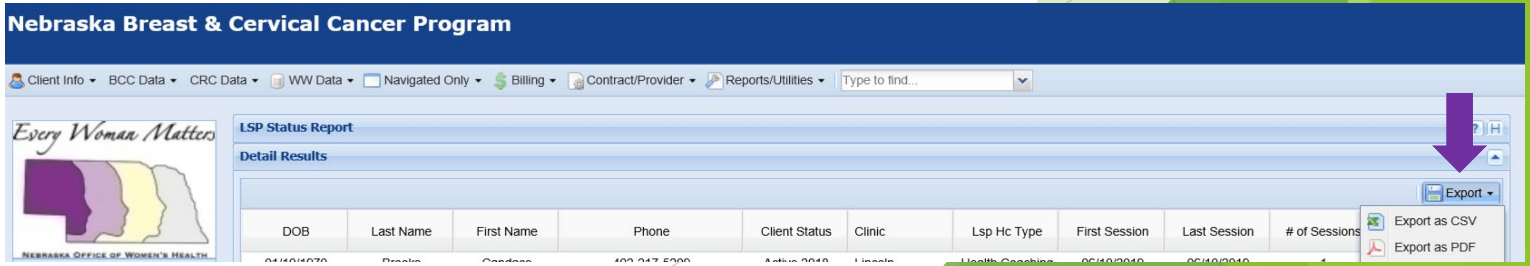
- Click on **Reports/Utilities** tab
- Click on **Admin**
- Select **LSP Status Report**



LSP Status Report Continued

- Select **Assessment Date Range** to show all clients in selected date range
- Select **Last LSP Date Range** to show only clients that have health coaching started in selected date range.
- Enter **Date Range**
  Enter approved start date for HC.
- **LSP/HC Status**: Leave 'Select One' to have all health coaching show or choose a Status to run all of the Completed, In Progress or Withdrawn for selected date range.
- **LSP/HC Type**: Report can be run by specific health coaching types (Health Coaching, Check.Change.Control etc.)
- Click **Generate Report**
- Select **Export**
  Report can be **exported** as PDF or CSV
- Clients on this list are specific to the CHH running the report.





Mammography Prompt Report

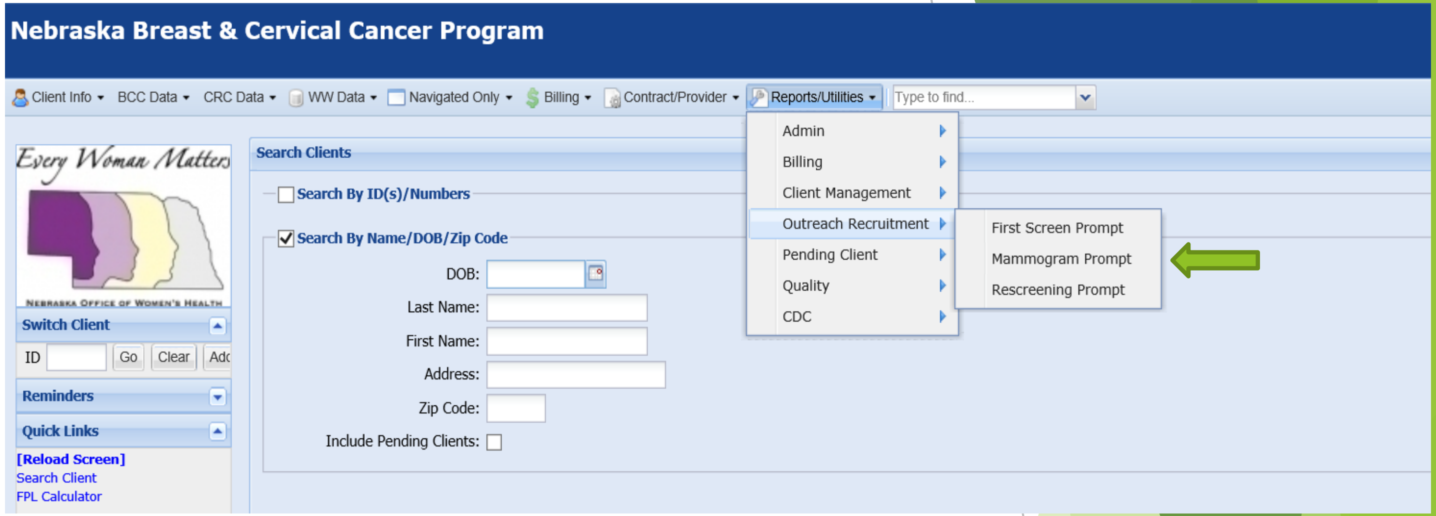
Mammogram Prompt Report

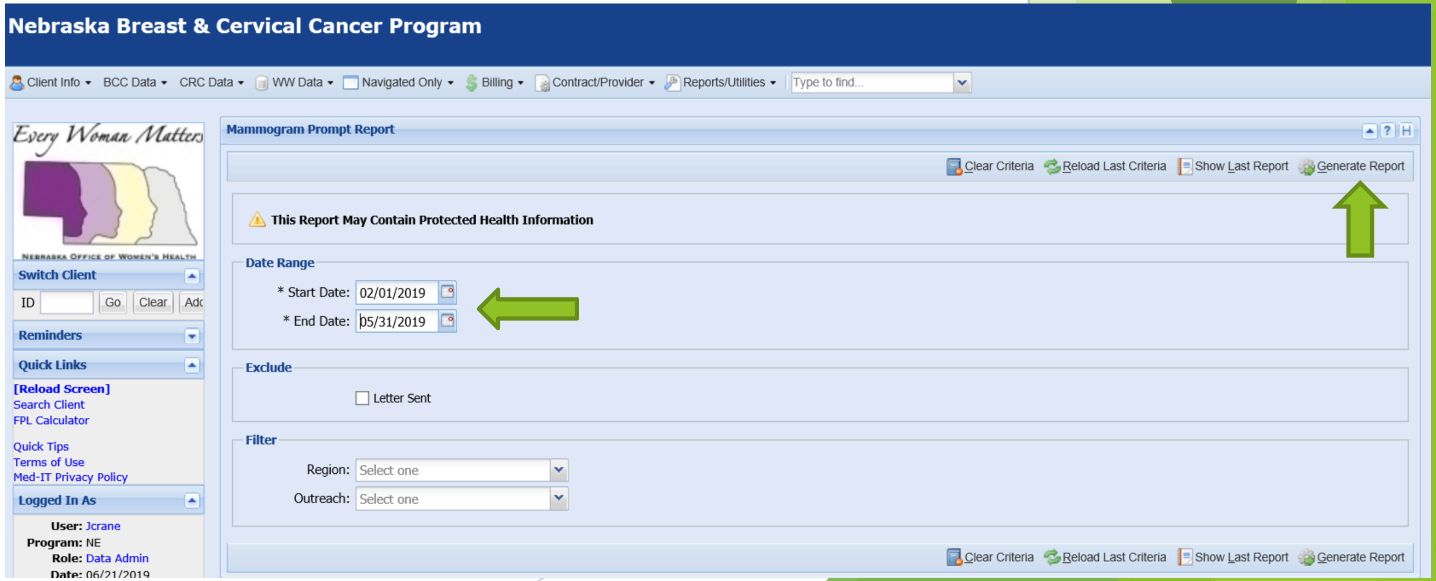
The Mammography Prompt Report includes women 40 and over who have had their clinical breast exams and have had a mammogram ordered, but have not followed through with obtaining a mammogram.

- Click on **Reports/Utilities**
- Click on **Outreach Recruitment**
- Select **Mammogram Prompt**
  - This report runs by the person that is logged in *(ie: If staff at LLCHD runs the report they will only get LLCHD counties, etc.)*
- Enter **Date Range**
  - Reports will need to be run 3 months after mammogram ordered.

CURRENT MONTH	USE THIS MONTH FOR 3 MONTH REPORT	USE THIS DATE RANGE FOR 3 MONTH REPORT
JANUARY	OCTOBER	10/01/YYYY – 10/31/YYYY
FEBRUARY	NOVEMBER	11/01/YYYY – 11/30/YYYY
MARCH	DECEMBER	12/01/YYYY – 12/31/YYYY
APRIL	JANUARY	01/01/YYYY – 01/31/YYYY
MAY	FEBRUARY	02/01/YYYY – 02/28/YYYY
JUNE	MARCH	03/01/YYYY – 03/31/YYYY
JULY	APRIL	04/01/YYYY – 04/30/YYYY
AUGUST	MAY	05/01/YYYY – 05/31/YYYY
SEPTEMBER	JUNE	06/01/YYYY – 06/30/YYYY
OCTOBER	JULY	07/01/YYYY – 07/31/YYYY
NOVEMBER	AUGUST	08/01/YYYY – 08/31/YYYY
DECEMBER	SEPTEMBER	09/01/YYYY – 09/30/YYYY

- Click on **Generate Report**



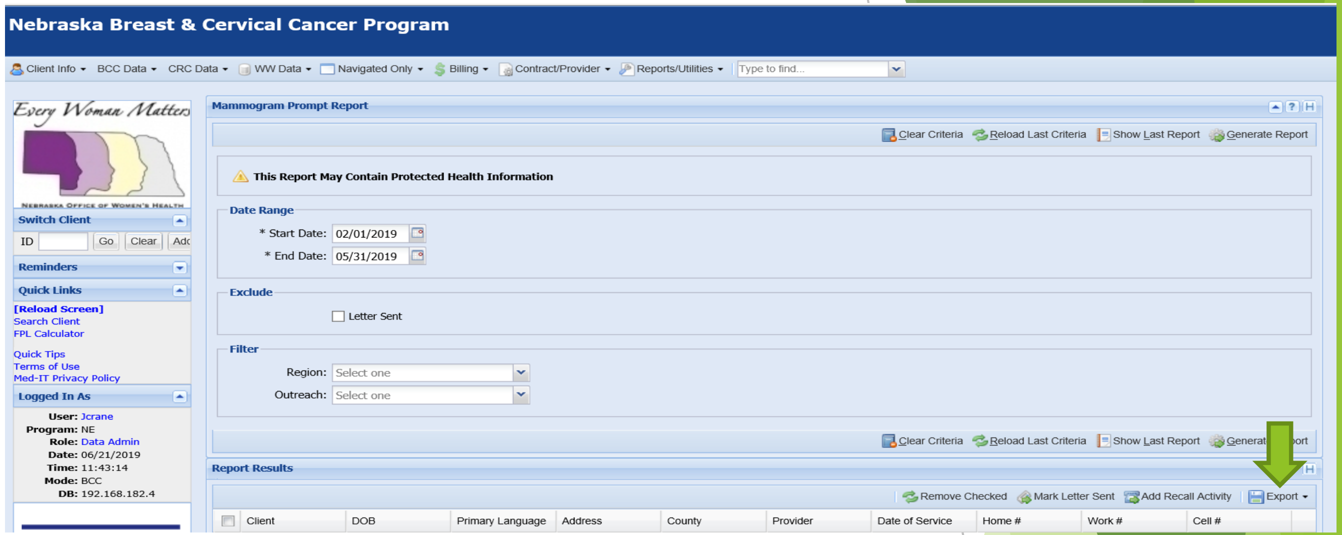


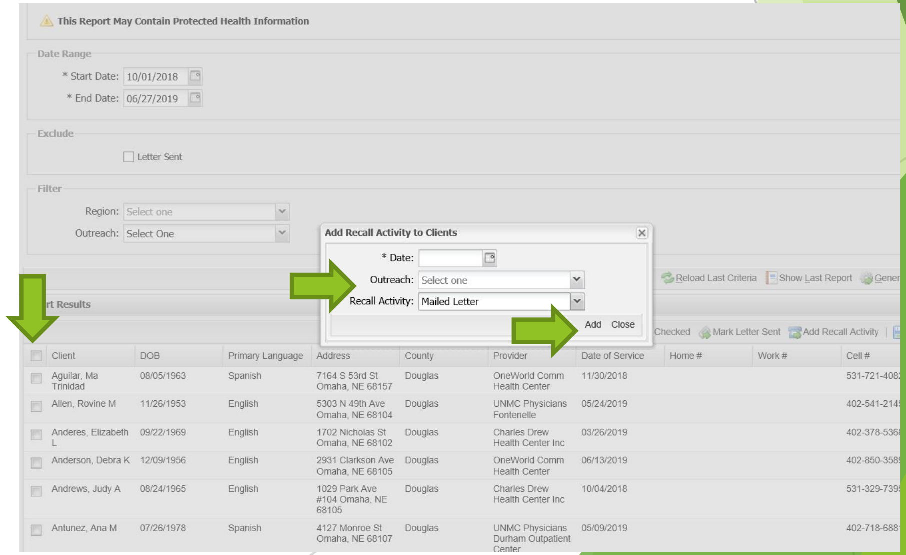
Mammogram Prompt Report Continued

- Select **Export**
  - Report can be Exported as PDF or CSV
  - This report will be attached to your Special Budget Project Report Invoice

- These clients get entered under **Recall Activity**

- **Check the box** to the far left by each of the clients that you are going to send a letter to or call on the phone.
  - Date: Enter **todays date**
  - Outreach: Select **your CHH name**
  - Recall Activity: Select **Phone Call** or **Mailed Letter**
  - Select **Add**





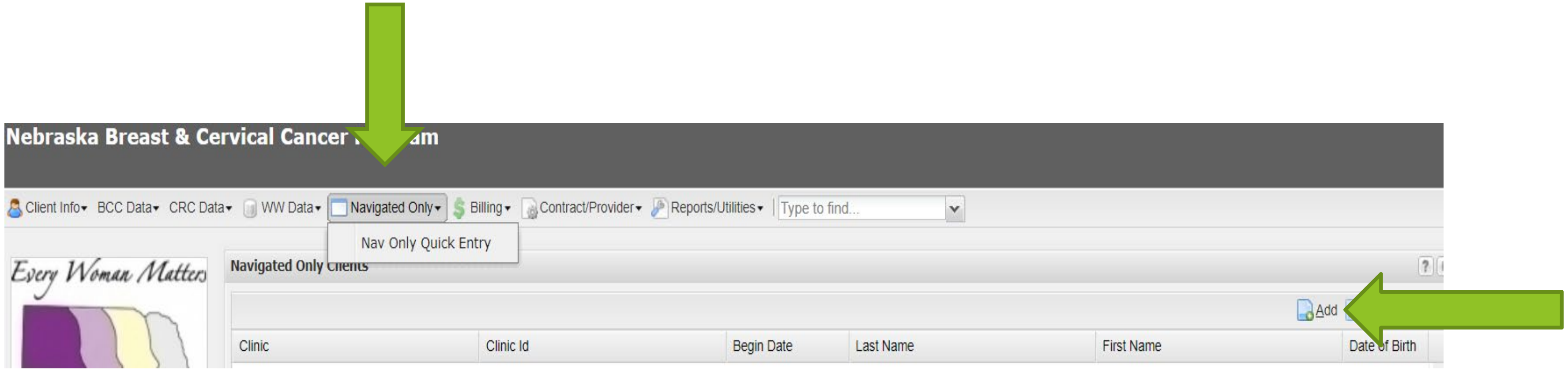
Navigated Only Clients

- No client identifying information is provided other than clients date of birth, race, whether or not Hispanic and zip code.
- Clients must be 21-74 years of age and in need of either Breast and/or Cervical Navigation
- Navigation requires documentation of 2 contacts for Navigation to Screening/or Diagnostics. Navigation contacts can be made by mail, phone, text, 1:1 or in person.
- Clients to be Navigated must have a structural barrier that is addressed by LHD.
  - For example: Interpretation, Child Care, Transportation.
- If the client has had both Breast and Cervical Navigation they will have to be entered twice.

How to Start a Navigated Only Client

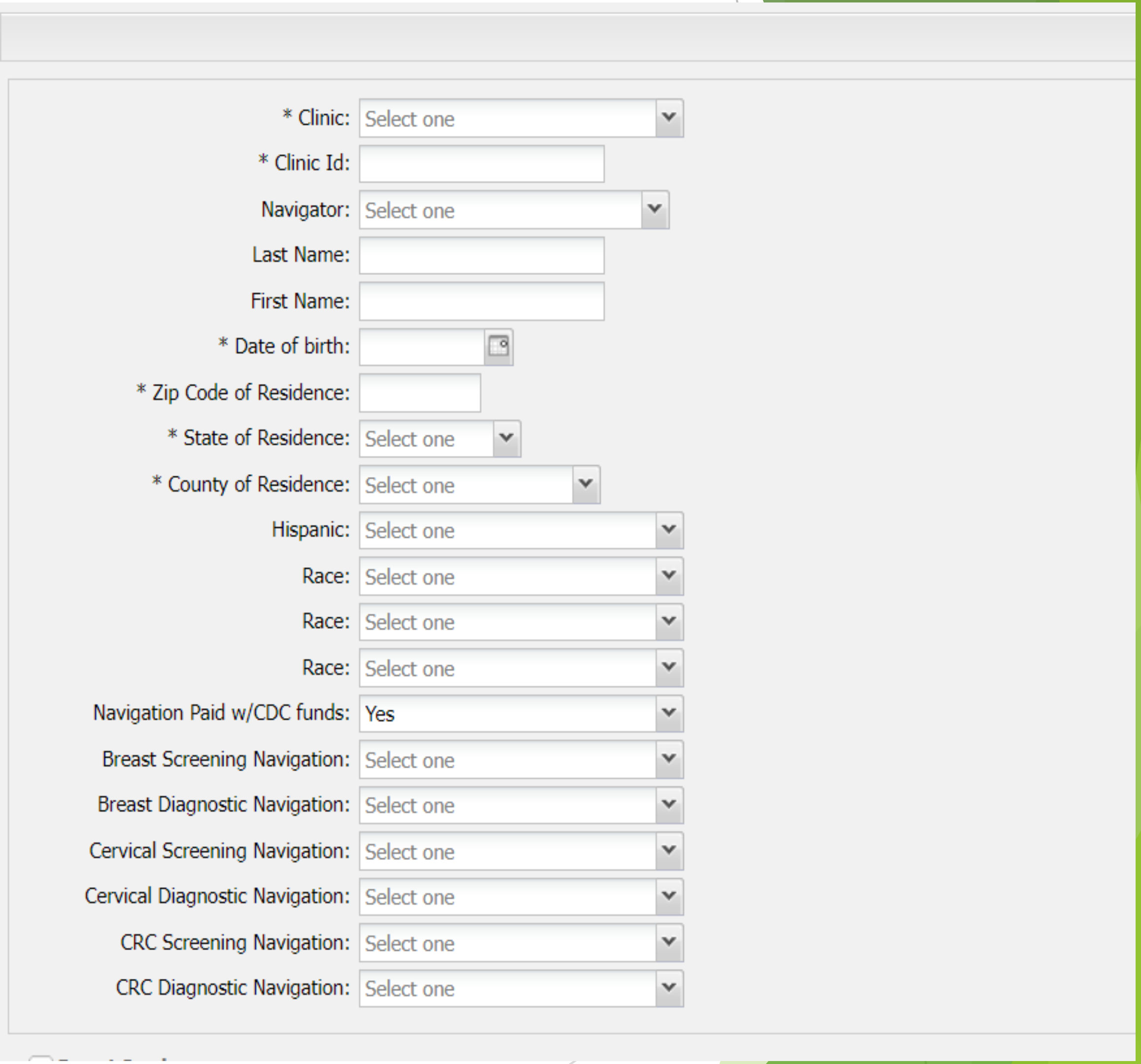
- Click on Navigated Only Tab in Med-It

- Select Nav Only Quick Entry
- Add – to enter new client navigation



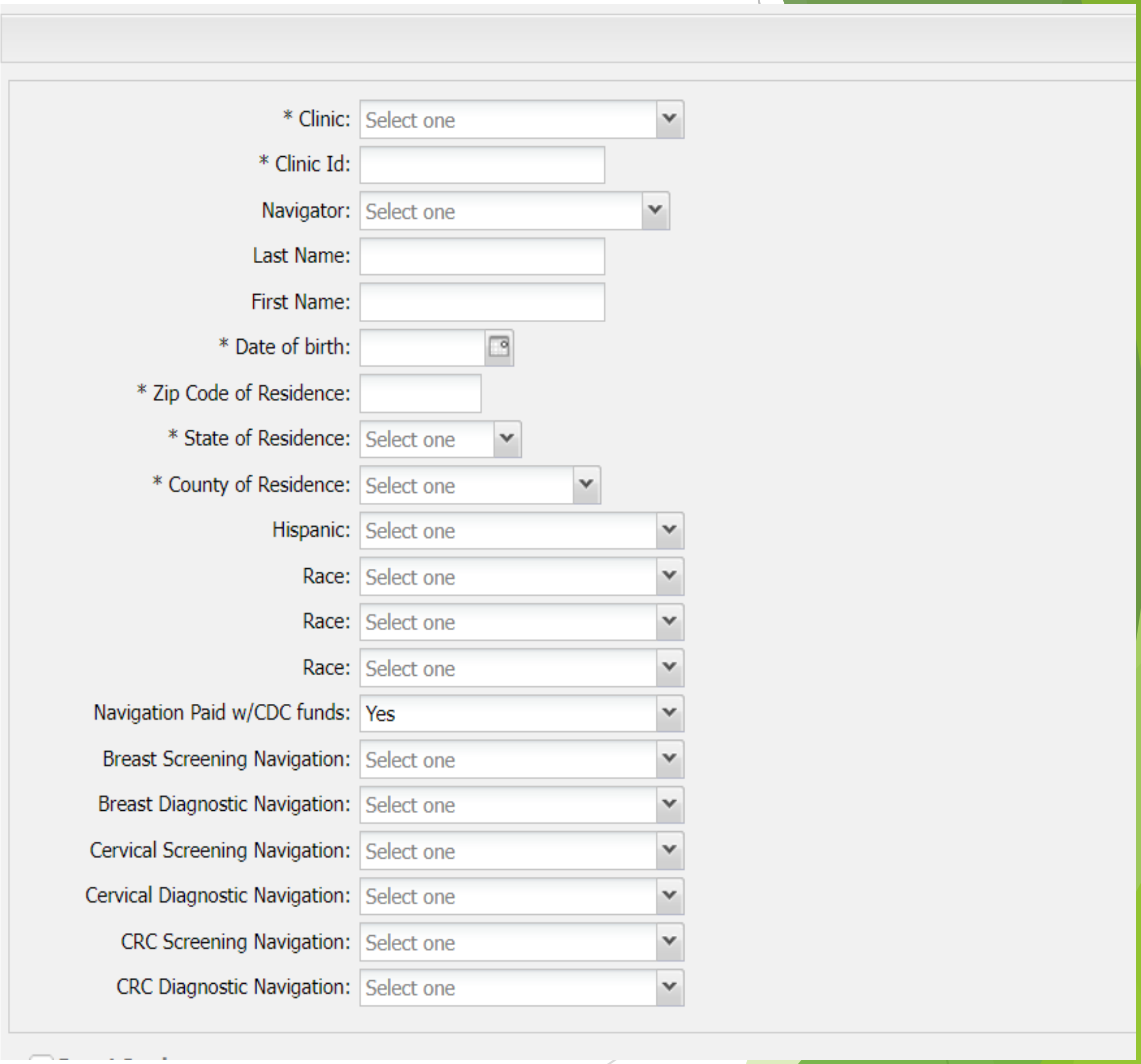
Navigated Only Client Data Entry

- Clinic: Choose HUB name from drop down
  - Examples:
    - HUB-ELVPHD
    - HUB-SHDHD
    - HUB-CDHD
- The Clinic Id Choose one of the following
  - LHD/B – When Entering Breast Navigation
  - LHD/C – When entering Cervical Navigation
- Navigator: Choose your HUB from drop down list
  - Examples:
    - HUB-Elkhorn Logan Valley
    - HUB-South Heartland
    - HUB-Central District Health
- Last name is the name or acronym of the Local Health Department
  - Examples:
    - ELVPHD
    - SHDHD
    - CDHD
- First name is the unique Id number created the Local Health Department.
  - Examples:
    - 22156P
    - 45864
    - XX654df



Navigated Only Client Data Entry

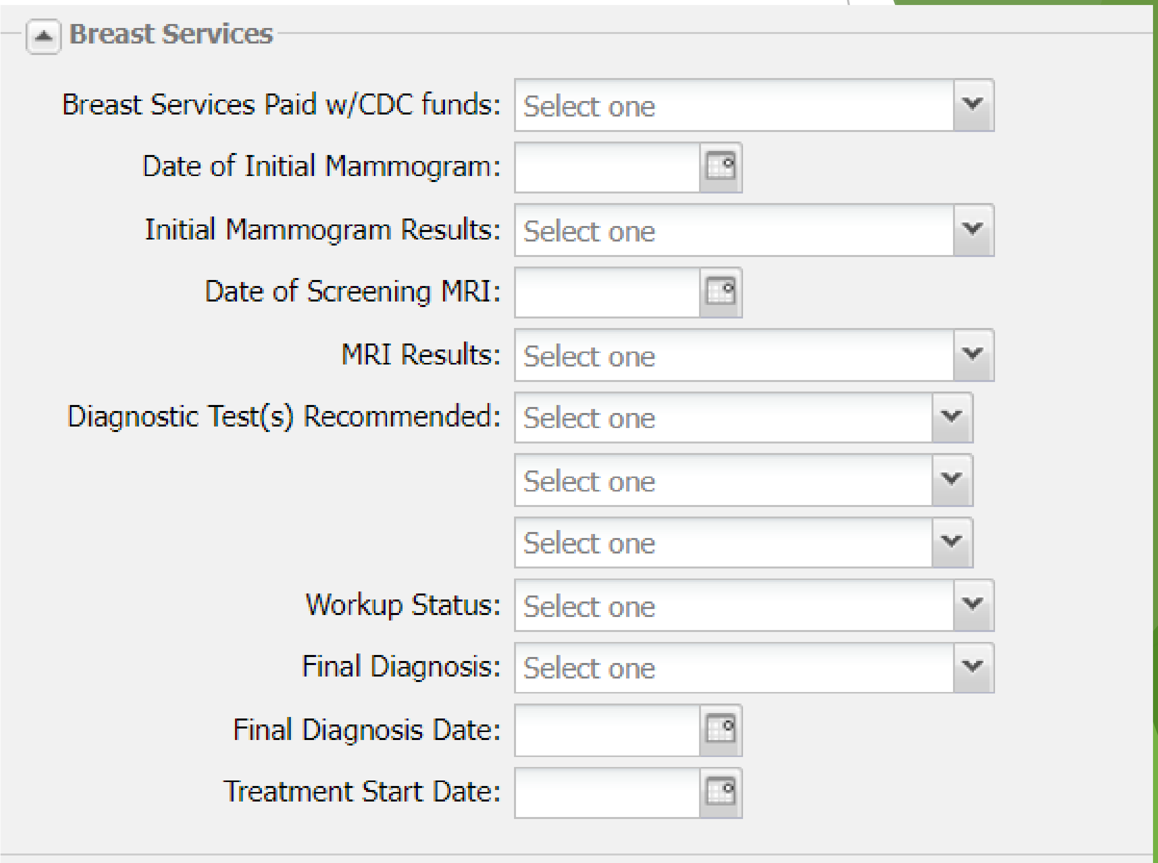
- Enter date of birth of the client
- Enter zip code of the client
  - State and County of Residence will automatically populate when zip code is added.
- Hispanic – Choose from drop down
- Race – Choose from drop down
- Navigation Paid w/CDC funds:
  - Automatically populates with Yes
- Breast Screening Navigation:
  - Choose yes if entering Breast Screening Navigation
  - SKIP if not doing Breast Screening Navigation
- Breast Diagnostic Navigation:
  - Choose Yes if entering Breast Diagnostic Navigation
  - SKIP if not doing Breast Diag Navigation
- Cervical Screening Navigation:
  - Choose yes if entering Cervical Screening Navigation
  - SKIP if not doing Cervical Screening Navigation
- Cervical Diagnostic Navigation:
  - Choose Yes if entering Cervical Diagnostic Navigation
  - SKIP if not doing Cervical Diagnostic Navigation
- CRC Screening Navigation: SKIP
- CRC Diagnostic Navigation: SKIP



Entering Breast Services

- Select No for Breast Services Paid with CDC Funds.
- Enter Date of Initial Mammogram.
- Select the results of Mammogram when the initial results are available.
- Enter date of Screening MRI if done.
- Select results of MRI when the results are available if MRI done (otherwise these two fields are left blank).
- Enter Diagnostic Tests Recommended if done
- Select Workup Status from the drop down box as appropriate.
- Select Final Diagnosis from the drop down table. Once final diagnosis is known, workup status should be changed to complete.

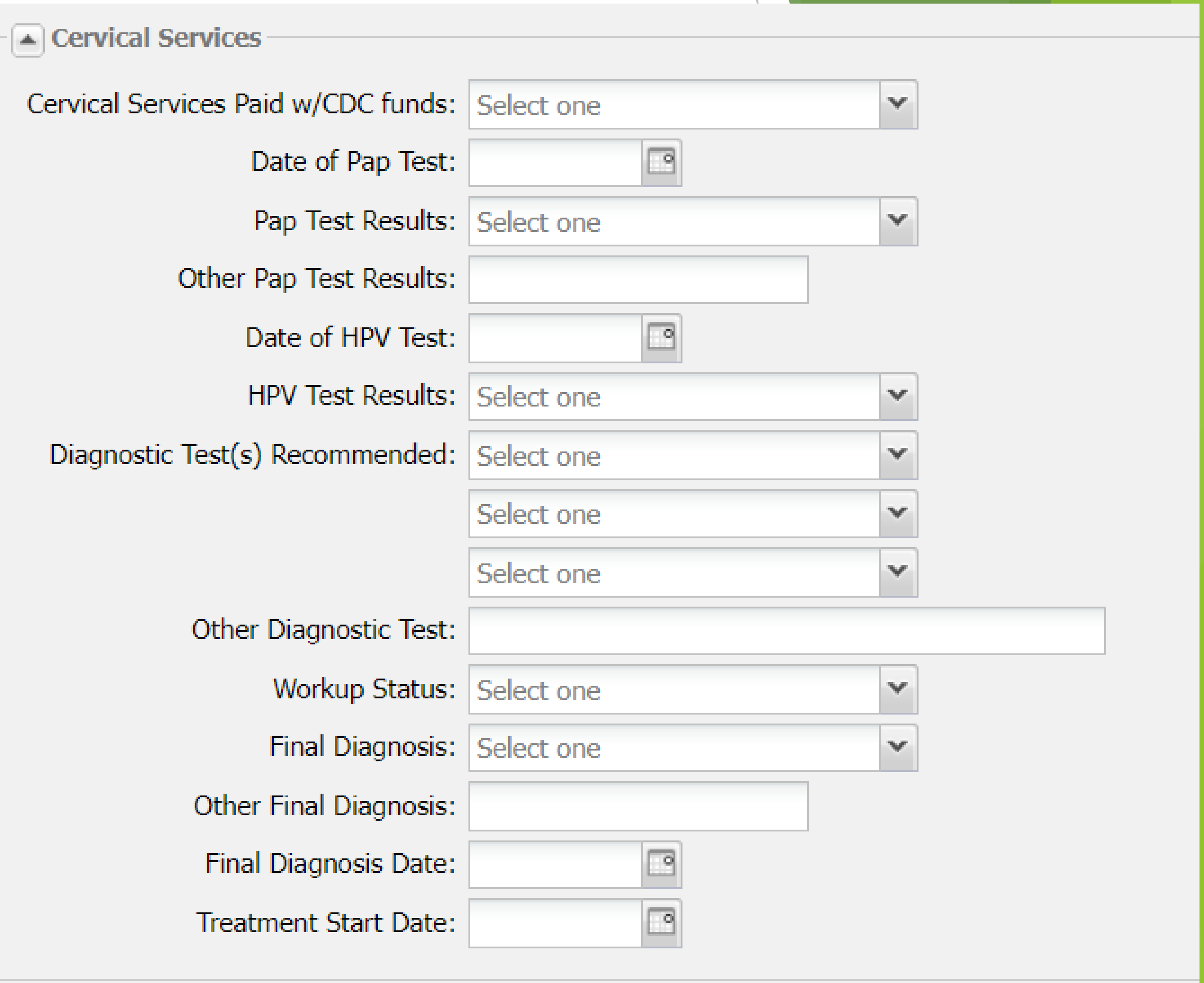
SKIP – Cervical Services
SKIP – CRC Services


Breast Services

Breast Services Paid w/CDC funds: Select one
Date of Initial Mammogram:
Initial Mammogram Results: Select one
Date of Screening MRI:
MRI Results: Select one
Diagnostic Test(s) Recommended: Select one
Select one
Select one
Workup Status: Select one
Final Diagnosis: Select one
Final Diagnosis Date:
Treatment Start Date:

Entering Cervical Services

- Breast Services – SKIP
- Select “No” for Cervical Services Paid with CDC Funds.
- Enter Date of Initial Pap Test.
- Select results of Pap Test when the results are available.
- If results are not listed in table, type in results from pathology report in the Other Pap Test Results box.
- Enter date of HPV Test if done.
- Select results of HPV Test when the results are available if Pap done (otherwise these two fields are left blank).
- Select Workup Status from the drop down box as appropriate.
- Select Final Diagnosis from the drop down table. Once final diagnosis is known, workup status should be changed to complete.
- If Final Diagnosis is not on drop down list, report in the Other Final Diagnosis box.
- SKIP - CRC Services



Cervical Services

Cervical Services Paid w/CDC funds: Select one

Date of Pap Test:

Pap Test Results: Select one

Other Pap Test Results:

Date of HPV Test:

HPV Test Results: Select one

Diagnostic Test(s) Recommended: Select one

Select one

Select one

Other Diagnostic Test:

Workup Status: Select one

Final Diagnosis: Select one

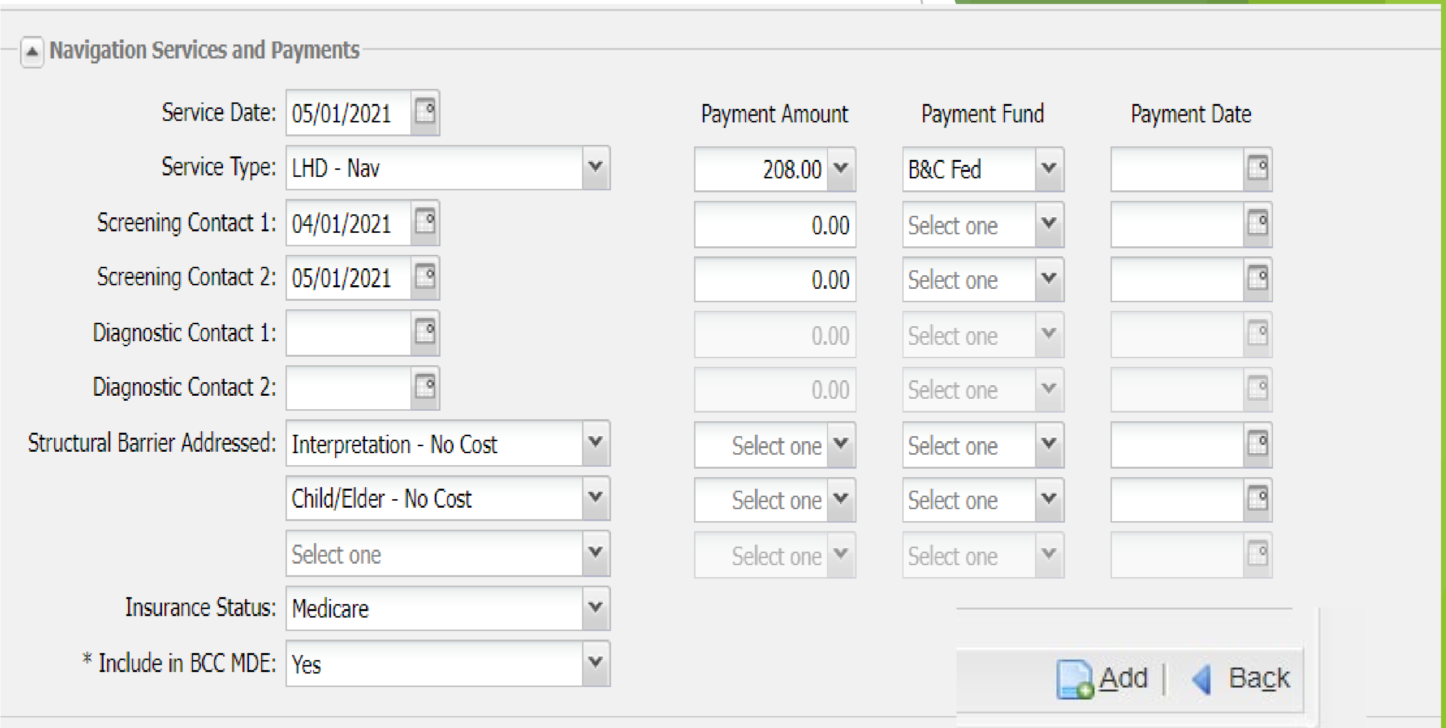
Other Final Diagnosis:

Final Diagnosis Date:

Treatment Start Date:

Entering Navigation Services and Payments

- Service Date: 2nd contact date
- Service Type: Choose **LHD-Nav** from drop down
  - Payment Amount: Choose from drop down
  - Payment Fund: Choose **B&C Fed** from drop down
  - Payment Date: **SKIP**
- Screening Contact 1: 1st contact date
  - SKIP Payment Amount, Payment Fund and Payment Date
- Screening Contact 2: 2nd contact date
  - SKIP Payment Amount, Payment Fund and Payment Date
- Enter Structural Barrier addressed during navigation. If barrier(s) are not on the list, notify DHHS to add.
  - SKIP Payment Amount, Payment Fund and Payment Date
- Insurance Status: Choose from drop down
- Include in BCC MDE: choose Yes from drop down
- Add – The record is only saved when you click the Add button



Questions??

Contact your Technical Assistance liaison at DHHS if you have any questions:

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