



Information about the IMS Implementation Process

The IMS implementation process has many checks and balances to ensure your software is registered, installed, and implemented as efficiently as possible.

Our standard implementation usually takes up to six weeks. At the end of this period there will be a go "Go Live" that includes 2-5 days of onsite time. We can speed this up or slow it down based on the office learning curve and availability.

With our experienced staff we can usually get a good feel for how long the process will take after the first 2 or 3 online trainings. **The success of this project is dependent on the time that your office staff dedicates to learning and assisting with the implementation of IMS.**

Our goal is to maximize the effectiveness to you, our client, of IMS while minimizing the overall costs of implementation through a smooth implementation process.

Training

- Training is an important step in ensuring a successful Go Live. It is your responsibility to ensure that your staff has allocated time to train on the IMS software. In addition to attending their designated training sessions, your staff should practice what they learnt by repeating the training sessions in the practice IMS environment.
- The training outline below may or may not be followed in sequence. Ideally, you want to complete building your master data tables first. However, this will depend on the data conversion you wish to complete. For example, if you want to convert the appointments, procedures and employees from your existing database then you will not be able to create that data in IMS until the data is converted.
- Although there are numerous training sessions outlined, you do not need all staff to attend each training session. Choose only the Super Users and employees that need to learn the stated objectives in each training session. Prior to the training, you will be given a detailed outline of what the training will cover.
- Both on-site and remote hours will be tracked according to time actually used. It may be necessary, however, to purchase additional hours depending on your clinic's training needs. In the unfortunate event that you miss more than three trainings you will be billed accordingly. If your representative trainer delays or misses any training, then you will receive additional training equal to the missed or delayed training at no charge. Both you and the representative trainer will be allowed to reschedule at least 3 trainings giving a 48 hour notice.



Clinic Project Manager (Super User)

- The Clinic should identify a single Project Manager (Super User) who will serve as the primary contact for the assigned Project Manager representative to oversee the complete project.
- Additionally, Super Users should be defined based on work specialty, for example billing, front office, clinical, etc. The Super Users will be trained on Setups and Parameters related to their duties. All users will be trained on using the software as it relates to their day-to-day duties. Super Users should ideally be your committed employees who are computer literate and who are quick learners.
- The Client Project Manager and the VAR Project Manager have joint responsibility to ensure a smooth and successful implementation.

Remote Implementation/Training

- Off-site assistance includes software installation, remote training through gotomeeting and project management.
- Project management is defined as the process to organize, direct, track and train for a specific period to meet mutually agreed upon project objectives. This will include telephone consultations, e-mail correspondence, conference calls, document preparation and any other activities we perform on behalf of the practice.
- On completion of the remote training process one or two of our team members will attend your "Go-live".

On-Site Implementation

- During our time on-site we will assist you with integrating IMS into your office workflow.
- On-site training is given in two blocks of four hours in an eight-hour day during normal business hours and must be used continuously as defined by the implementation package purchased.
- **Unused on-site hours can be exchanged for remote assistance; unused off-site hours *cannot* be exchanged for on-site hours. Any unused hours will expire 90 days following Go Live.**
- Once the Implementation process has been validated and if you have training time remaining, we would be happy to spend additional time with you covering the advanced features or working with you on optional features.
- The following table represents a schedule of what items and training that needs to be covered to make your implementation a success.



Billing/EDI/Clearing House

- A smooth transition in billing is required to ensure that you do not have any cash flow delays. Many delays can occur due to untimely completion of Clearing House Enrollment paperwork.
- Other delays can occur if incorrect Provider identifiers are entered into IMS's billing setup. Your Billing Super User should complete all necessary Clearing House paperwork and ensure that all data related to billing is accurate.

Database Conversion

- Should you decide to purchase data conversion from your existing software, this should be provided in an ASCII TAB delimited format with proper mapping information and/or guidance. In some cases, the VAR representative can assist in pulling the data for an additional charge.
- The items that can be converted will be determined after reviewing the data. Typically the data that can be readily converted includes: Patient Demographics (Insurances are not always linked to patient), Contact Master, Referral Doctor Master, Insurance Master.
- The Database Conversion Specialist will provide you with an explanation of items to be converted, once the conversion has been completed you will be required to verify the conversion via e-mail.

Clinician's Commitment

- Clinicians need to block out, schedule, and dedicate time (*estimated to be a minimum of 16 hours*) to work with the medical team in customizing/developing and testing the necessary clinical templates. All clinician users are expected to chart a minimum of 25 patient visit notes. They will also be required to sign-off on acceptance of the Visit Note templates. Failure to chart the minimum of 25 visit notes and sign off on the templates by the end of the blocked time will **delay** the Go Live.



IMPLEMENTATION GUIDE

The following guide represents a typical implementation. Below is an outline of the activities that your practice will achieve to prepare for “Go Live” – the point when your practice will use IMS for your daily operations.

| TRAINING TOPIC | ATTENDEES | WHAT YOU WILL NEED TO HAVE READY FOR THE TRAINING | OBJECTIVE |
|--|-------------------|--|---|
| Office Set-Up | Super User | Office contact details, including billing address, telephone nos. | This is where you will be entering office specific information |
| Employee/Doctor Master | Super User | Employee names, provider IDs and license numbers | Here you will enter all employees names and provider details |
| Security Rights/User Name and Password | Super User | Nothing required | Provides user access to the system. Decide what rights you want the clinic employees to have. |
| Pharmacy, Referral Doctor and Facility Set Up (Medical Services) | Assigned employee | List of local and mail-in pharmacies i.e. Medco, referral doctors, facilities include nursing homes, assisted living and children's homes, diagnostic and lab centers, etc. Its important to have all the fax nos. | Enter data into the system to allow communication with outside organizations |
| IMS Navigation and Short Code Keys | All Staff | Nothing required | How to quickly flow through IMS. |
| On-Line Help | All Staff | Nothing required | How to access help to resolve IMS issues |
| Patient Master | All Staff | If data is converted nothing required otherwise all patient details | How to enter patient details and demographics |
| Set Up of Billing Templates | Biller | Clinic superbill and a completed HCFA | |
| Insurance Carriers and Plans | Biller | Details on all registered plans | Enter data for electronic and paper billing |
| Scheduler Set Up | Super User | Providers current schedule | |



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|--|--|---|--|
| Reminder Set Up | Super User | Nothing required | |
| Letter Templates | Super User | Letters | |
| Forms to be Filled and Forms to be Signed | Super User/Assigned Employee | All documentation signed and/or completed by patients | |
| Document Scanning | Super User | | |
| Patient Appointments (Scheduler) general training | Front Desk Staff | | |
| Check-In/Check Out | Front Desk Staff | | |
| EMR (Visit Note) general overview | Medical Assistants/Nurses | | |
| EMR (Visit Note) general overview | Providers/Physician Assistants/Nurse Practitioners | | |
| Visit Note Specific Training for Dx/lab, Diagnosis, Prescription, Super Bill, Follow-up, Letters | Providers/Physician Assistants/Nurse Practitioners | | |
| Prescription set-up, prescription refill f | Providers/Physician Assistants/Nurse Practitioners | | |
| Template Customization Training | Providers/Physician Assistants/Nurse Practitioners | | |
| Reminders, My Task, Notes, and Notes Alerts | All Staff | | |
| Incoming and Outgoing Faxes | Assigned Employee | | |
| Authorization and/or Referral Tracking | Assigned Employee | | |
| Parameters and IMS Back Up | Super User | | |