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# **DRG-REIMBURSED CONTINUED STAY REVIEW REQUEST eQSuite® User Guide**

# Introduction

This user guide is intended to provide guidance for submitting DRG-reimbursed review requests through our web-based system, eQSuite®.

The following will be explained in detail :

- ▶ **Review Submission Timeframe**
- ▶ **Getting Started**
- ▶ **User Log In**
- ▶ **eQSuite Homepage**
- ▶ **Start Tab**
- ▶ **DX/Proc Tab**
- ▶ **Search Function (DX/Proc Tab)**
- ▶ **Summary Tab**

# Review Submission Timeframe

- » DRG-reimbursed hospitalizations require a quality of care screening at the time of discharge.
- » Once the admission is certified by eQHealth, the hospital may complete a continued stay review and submit the claim for payment within **HFS' 180 day claim submission timeframe.**

# Getting Started

## Access to eQSuite®

- » eQSuite is accessed through our website: <http://il.eqhs.org>
- » From the homepage, scroll down to the bottom right side of screen.
- » Click on the first eQSuite link located under eQHealth Web Systems (as shown).



# User Log In

Enter the assigned eQHealth username and password and click login.

Username

Password

Login

[forgot password?](#)

## Message Board:

**Keep Providers Alert**

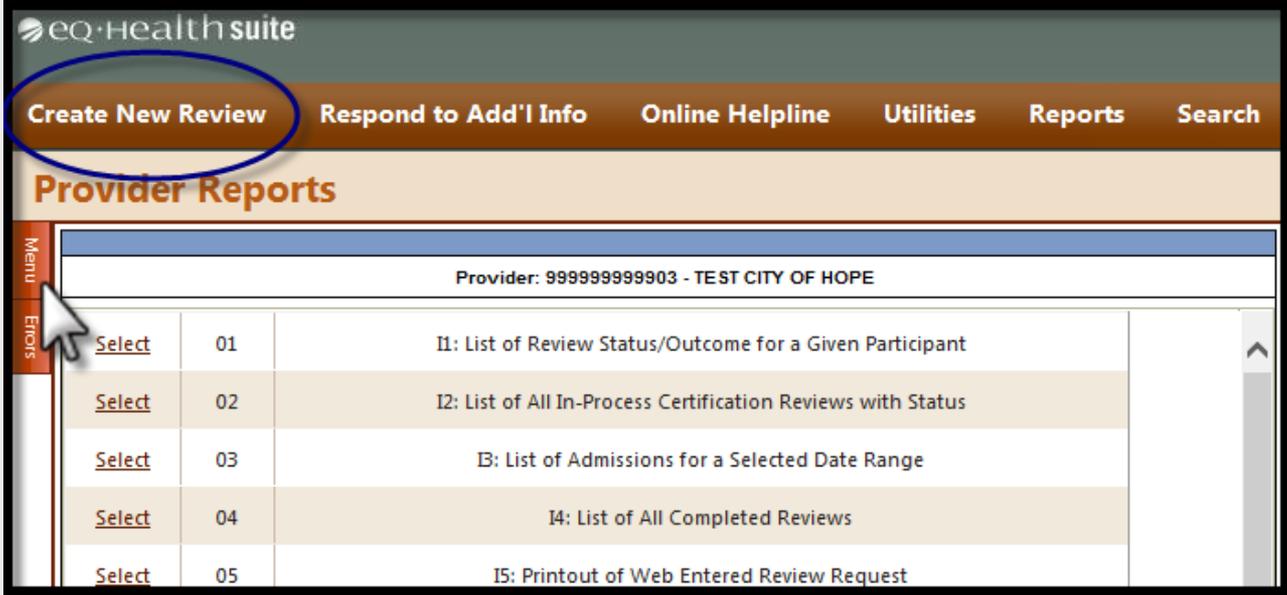
## Forgot Password?

- Click on **forgot password**- you will be instructed to enter your username to receive a temporary password.
- Once logged in, copy new password and follow directions to reset.

**Message Board**- check on the logon screen for important messages regarding the Web.

# eQSuite® Homepage

- » Once the system has been accessed, the Provider Reports menu will appear if you have been given authority by your Web Administrator to run reports.
- » To begin the review, click **Create New Review** from either the menu bar or the sidebar located on the left side of the screen.



The screenshot displays the eQSuite homepage. At the top, the logo 'eQ·Healthsuite' is visible. Below it is a navigation bar with the following items: 'Create New Review' (circled in blue), 'Respond to Add'l Info', 'Online Helpline', 'Utilities', 'Reports', and 'Search'. Below the navigation bar is a section titled 'Provider Reports'. On the left side of this section is a vertical sidebar with 'Menu' and 'Errors' options. A mouse cursor is pointing at the 'Menu' option. The main content area shows a table with the following data:

Provider: 999999999903 - TEST CITY OF HOPE			
<a href="#">Select</a>	01	I1: List of Review Status/Outcome for a Given Participant	
<a href="#">Select</a>	02	I2: List of All In-Process Certification Reviews with Status	
<a href="#">Select</a>	03	I3: List of Admissions for a Selected Date Range	
<a href="#">Select</a>	04	I4: List of All Completed Reviews	
<a href="#">Select</a>	05	I5: Printout of Web Entered Review Request	

# Start Tab

## Begin Review:

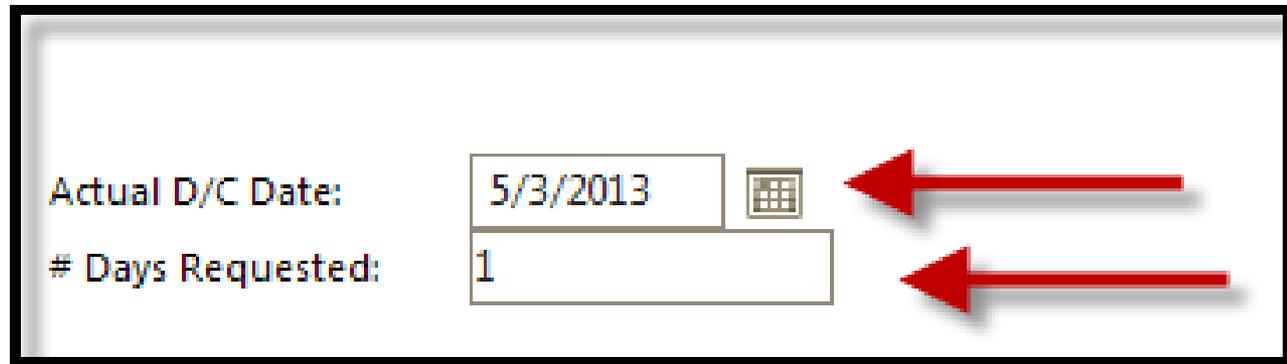
1. Provider ID and Name automatically populates according to the username entered.
2. Select setting: Med/Surg is pre-populated
3. Review Type: Select Cont Stay from drop-down menu
4. Enter TAN
5. Click **Retrieve Data** to proceed with the review request

The screenshot shows a web interface for a 'Start' tab. The main section is titled 'Review Type and Settings'. It contains the following fields and controls:

- Provider ID: 999999999903
- Provider Name: TEST CITY OF HOPE
- Choose Setting:  Med/Surg  Psych
- Review Type: Cont Stay (selected in a dropdown menu)
- TAN: 19000753
- A button labeled 'RETRIEVE DATA' is located at the bottom right, with a red arrow pointing to it.

# Start Tab (continue)

- » Scroll down and enter Actual D/C Date
- » Enter the **# of Days Requested (for this request)**.
- For DRG reimbursed hospital admissions and discharge reviews, always enter in “1”.



Actual D/C Date:  

# Days Requested:

# Start Tab (continue)

## Quality Screening Questions

- » Answer YES or No for all quality screening questions. These questions are required.

**Answer the following and explain on the Summary tab any NO answers:**

Was the H&P completed within 24 hours of admission?  Yes  
 No

Were the patient's vital signs stable 24 hours prior to discharge?  Yes  
 No

Were all critical lab results addressed?  Yes  
 No

Were all critical X-rays and imaging studies addressed?  Yes  
 No

Were discharge or home health care needs addressed?  Yes  
 No

If the patient expired, was the death anticipated?  Yes  
 No

**Answer the following and explain on the Summary tab any YES answers:**

Did the patient develop Stage II or greater decubitus ulcers during hospitalization?  Yes  
 No

Were decubitus ulcers present upon discharge?  Yes  
 No

Did the patient develop any hospital acquired infections?  Yes  
 No

Did the patient incur a health care acquired condition or another preventable condition?  
[HCAC/OPPC List & Code](#)  Yes  
 No

# DX/PROC Tab

- » **Proc Code grid:** Add any procedures that have been performed since the last review point.
- » If there are no procedures skip to next review tab.

The screenshot displays the DX/PROC tab interface. At the top, there are three tabs: 'Start', 'DX/PROCS' (which is highlighted in yellow), and 'SUMMARY'. Below the tabs, there are two data grids. The left grid has columns for 'DX Code', 'Description', 'Code Identified Date', and 'Principal'. It contains one record with DX Code 486, Description 'PNEUMONIA ORGANISM NOS', Code Identified Date '05/01/2013', and Principal 'Y'. The right grid has columns for 'Proc Code', 'Description', 'Procedure Date', and 'Cancelled'. It displays the message 'No records to display.' Both grids have 'Add', 'Search', and 'Refresh' buttons above them.

DX Code	Description	Code Identified Date	Principal		
486	PNEUMONIA ORGANISM NOS	05/01/2013	Y		

Proc Code	Description	Procedure Date	Cancelled		
No records to display.					

# Search for ICD-9 CM Codes

The screenshot shows a navigation bar with tabs for 'Start', 'DX/PROCS', 'VITALS/LABS', 'FINDINGS', and 'D'. Below the navigation bar is a toolbar with 'Add', 'Search', and 'Refresh' buttons. The 'Search' button is circled in black. A yellow callout box with a red arrow pointing to the 'Search' button contains the following text: 'If a requestor needs assistance with identifying a code, click on the word **Search** and follow the steps listed on the right side of the page.'

The **Code Text Search Page** will appear (as shown below).

1. Type in a key word.
2. Click search. A list of codes will appear. Find the code and click **select**.
3. Click **Add Selected** to insert the code in the grid.

The screenshot shows the 'Code Text Search Page' interface. It features a search input field containing the text 'abdominal', a 'Search' button, a 'Clear' button, and a 'Close' button. Below the search field is an 'Add Selected' button, which is being pointed to by a mouse cursor. The number '1' is placed above the search input field, the number '2' is placed above the 'Search' button, and the number '3' is placed below the 'Add Selected' button.

# Summary Tab

- » Provide a quick discharge summary of the 24-48 hours prior to discharge and enter a discharge plan, give pending lab results and record any HACs.
- » Our system is Microsoft window-based therefore you can use the “copy/paste” function to insert data from your electronic medical records. Please keep in mind to:
  - Only include clinical information that is relevant to the patient’s condition.

Start DX/PROCS SUMMARY

Include a short discharge summary of the 24 to 48 hours prior to discharge, report resolution of signs and symptoms, pending lab results, and readiness for discharge.

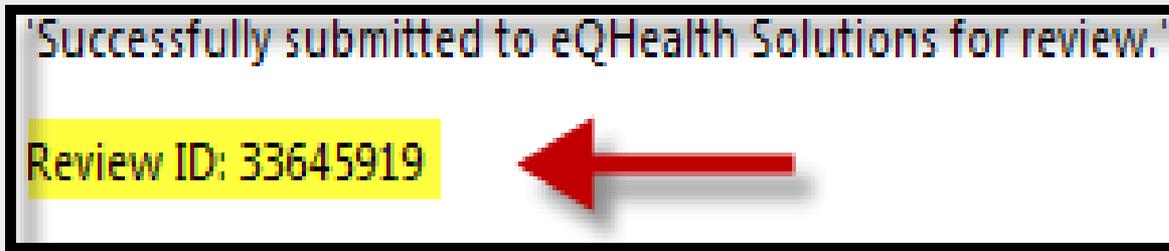
Home w phys follow up. sat 98% on ra. blood culture neg. home w 4l and o abx. ( report and HACs)

EXAMPLE

» Click **Submit for Review** at the bottom of the screen to submit review.

# Completed Review

The following message will appear once the review has been submitted:



»A Review ID will be assigned; this is *not* a certification (TAN). Record the number for tracking purposes and to run report17: *Web Review Request Printout*.