Client Portal Guide

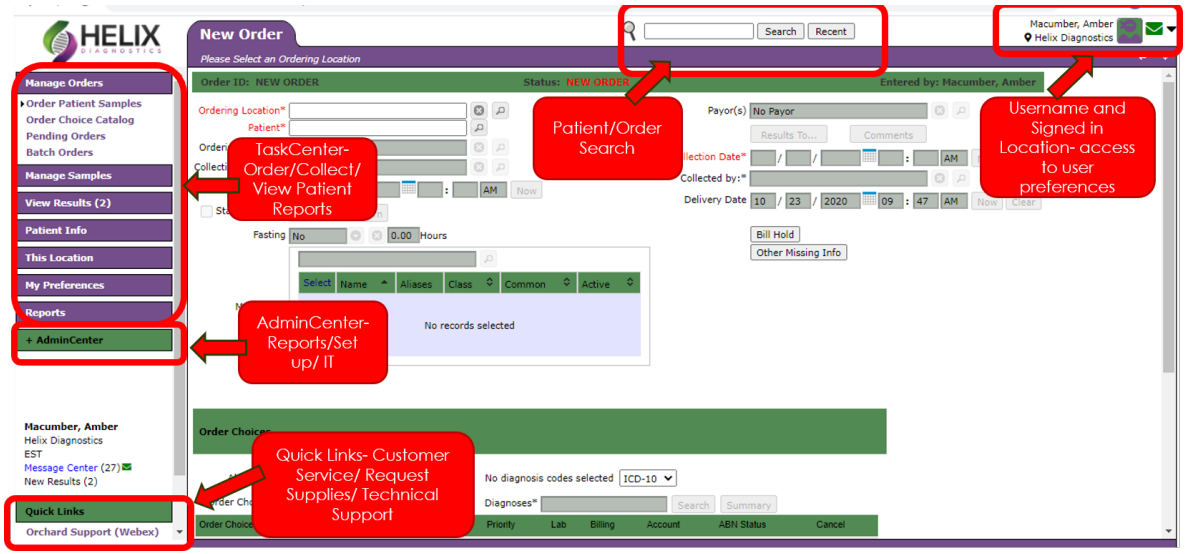
Our portal is **Orchard Copia** or **Copia** for short. This guide will give you instructions on how to login, access results, and place orders for your patients. If you have questions at anytime please contact your Helix Diagnostics representative or our client service department at **888-275-5221.**

Section 1 Login to Copia

Go to ***https://helixorchard.netsmartcloud.com***
This can be saved as a favorite/bookmarked in your browser.

Type in your username and password provided to you by your Helix representative.
Copia will automatically ask you to create your own unique password.

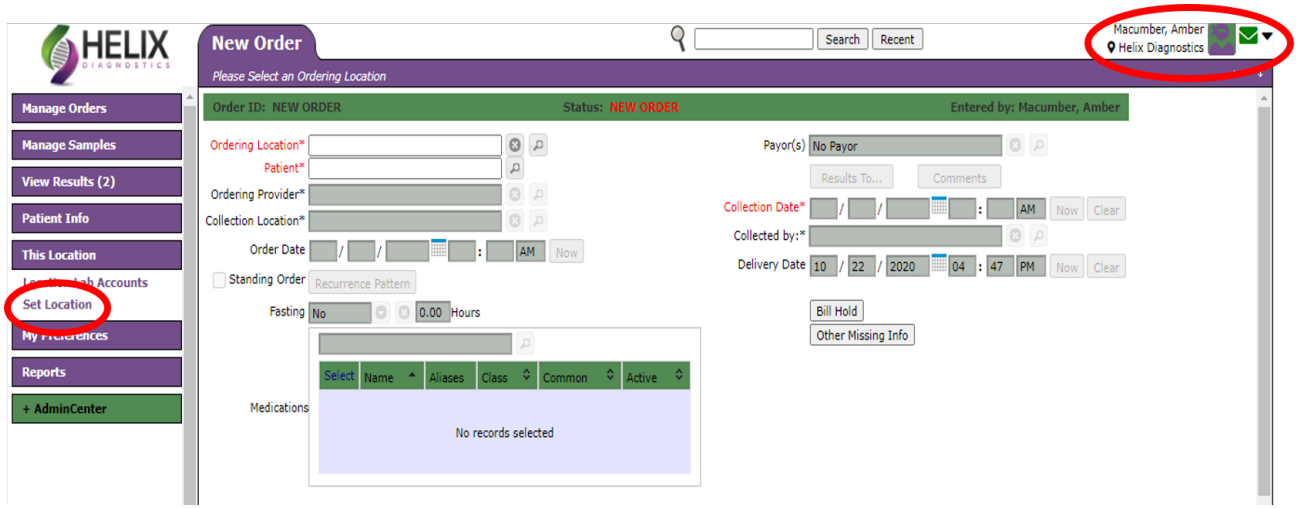
After changing your password you will see a screen like the one to the right. Please look the picture over in comparison to your screen. This will help you to familiarize yourself with the layout of **Copia.**



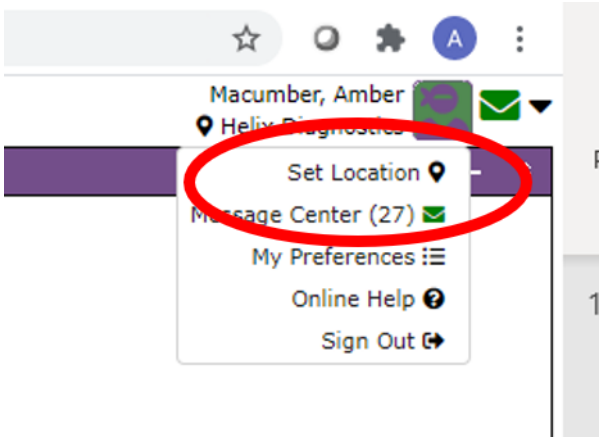
Section 2 Setting the Location

Location settings allow the user to choose a specific location that they are working from so that all location defaults are appropriately set when they log on.
(Example: Fax Number, Result Delivery, Available Providers)

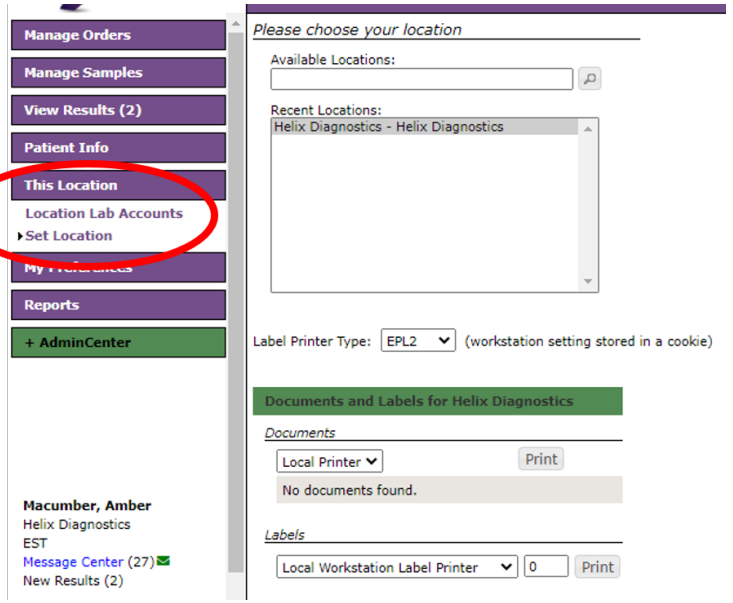
A user can have multiple locations that they can switch between.



- Click the drop in the right corner near your name and choose "***set location.***"

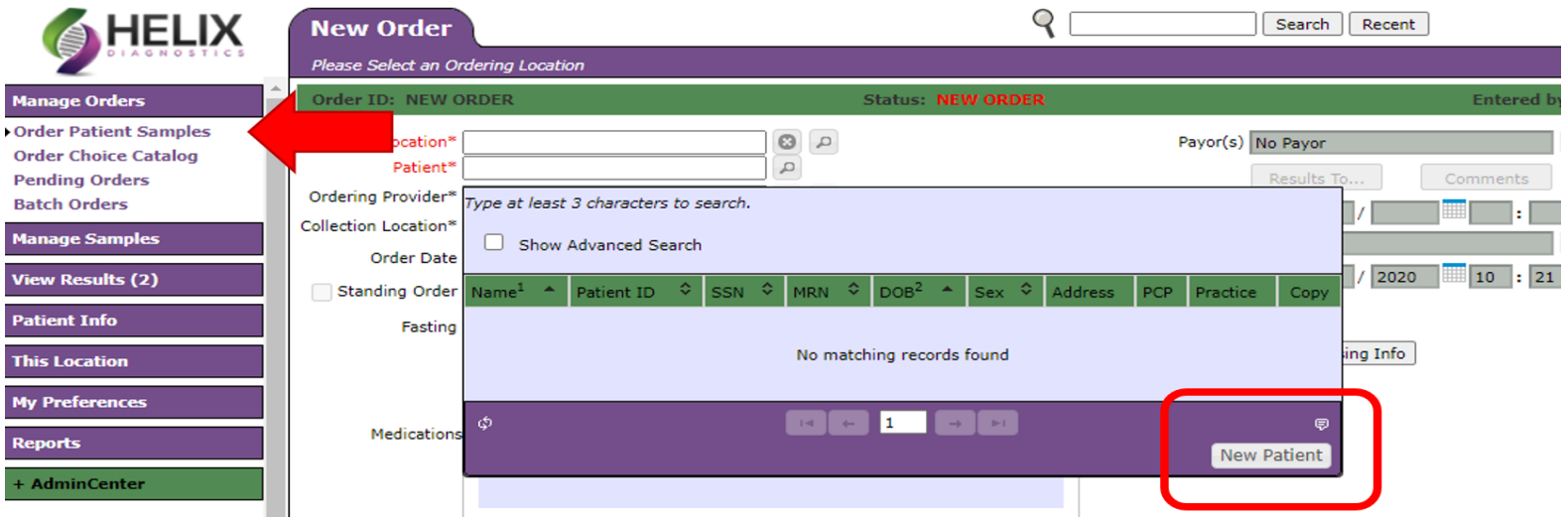


- This action will navigate to the "***This Location***" section of the Task Center.

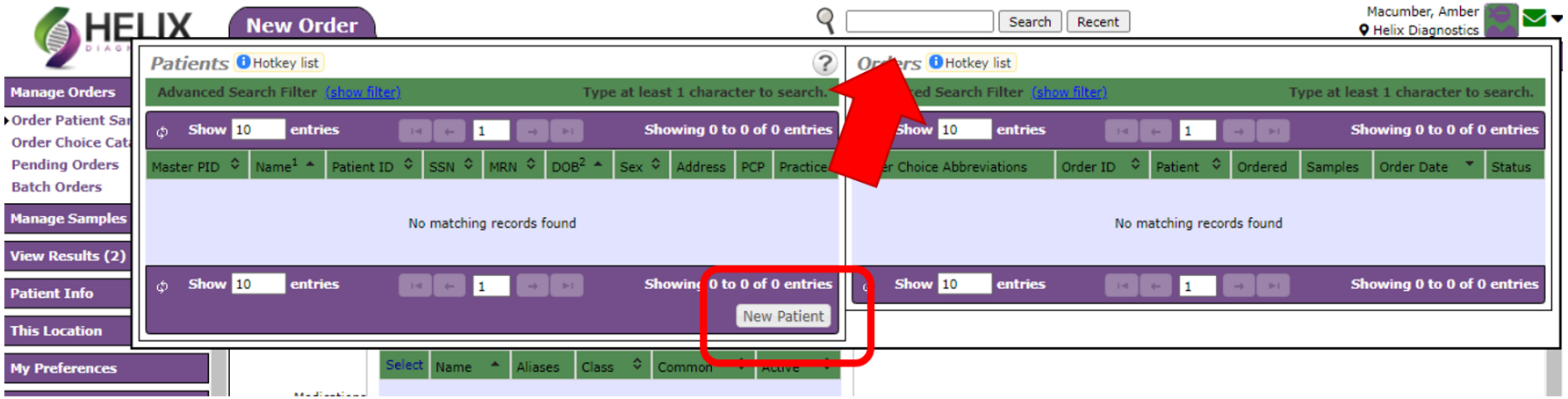


- Choose your location.

Section 3 Creating a New Patient



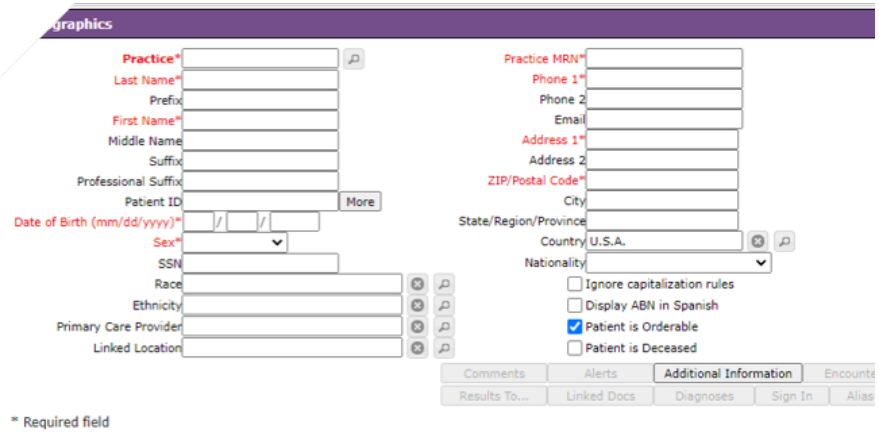
- Under "***Manage Orders***" click on "***Order Patient Samples***" Click into "***Patient***" then a box will appear Choose "***New Patient.***"
- Another way to create a new patient is to click in the top global search box. A box will appear and choose "***New Patient.***"

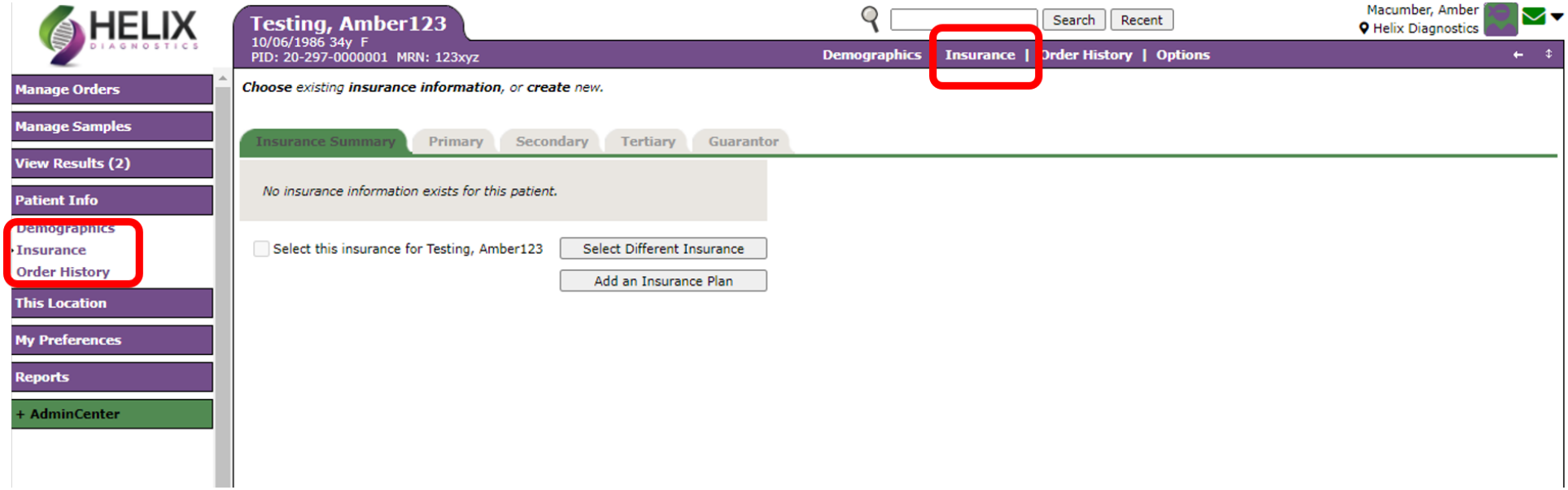


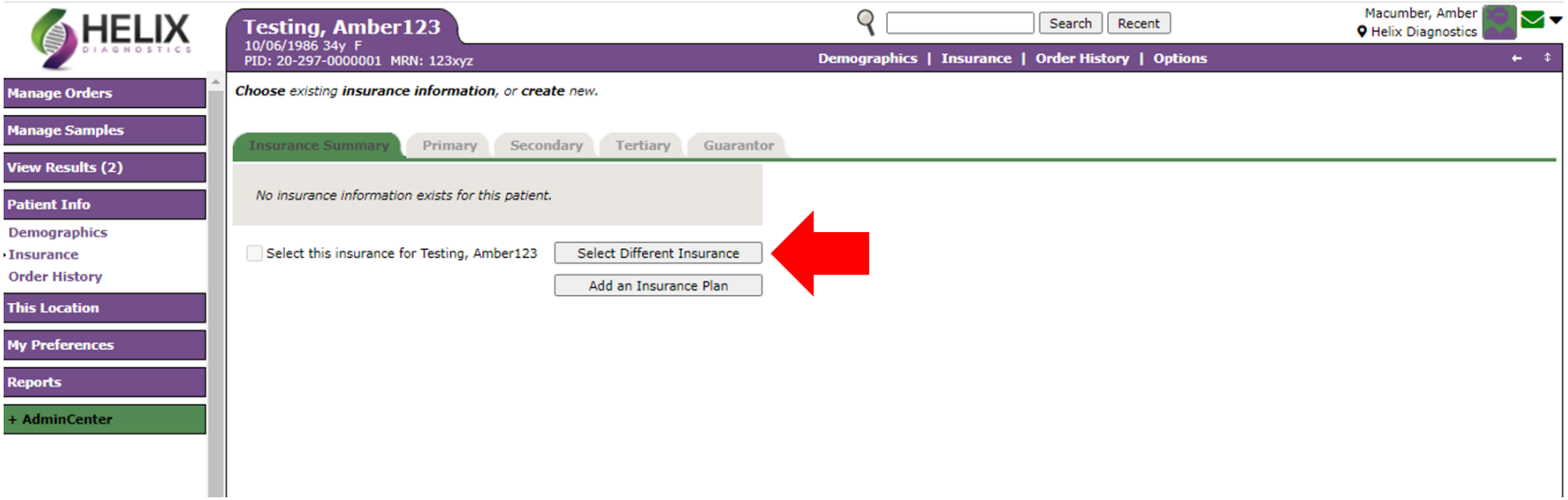
Fill out required information highlighted in **red**.
Then click "***Save.***"

This will take you back to the order screen.
Now click on "***Insurance***" in the top of the purple bar below search.

You can also choose insurance under "***Patient Info***" on the left side of the page.

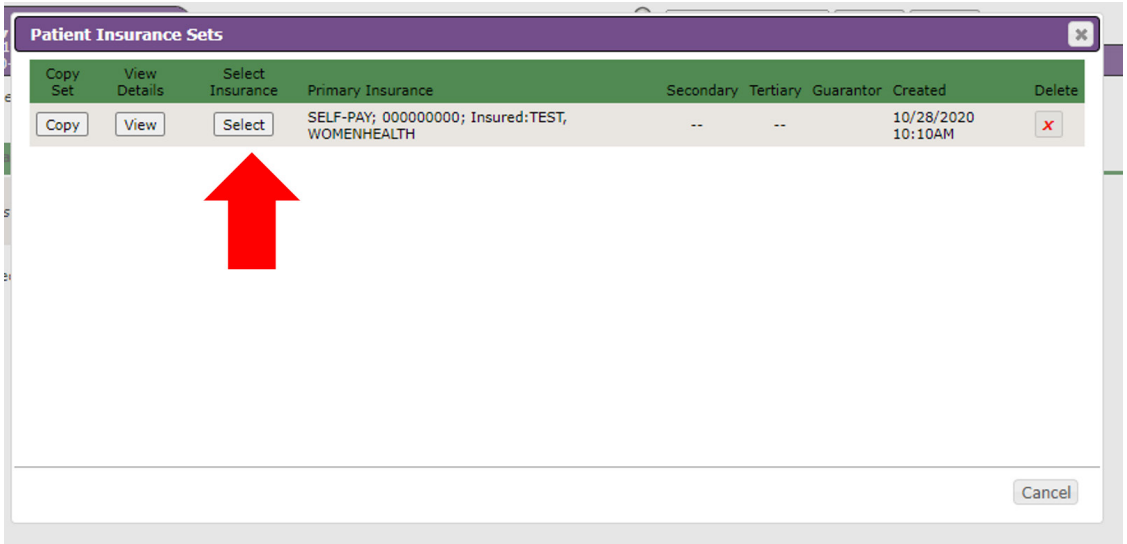




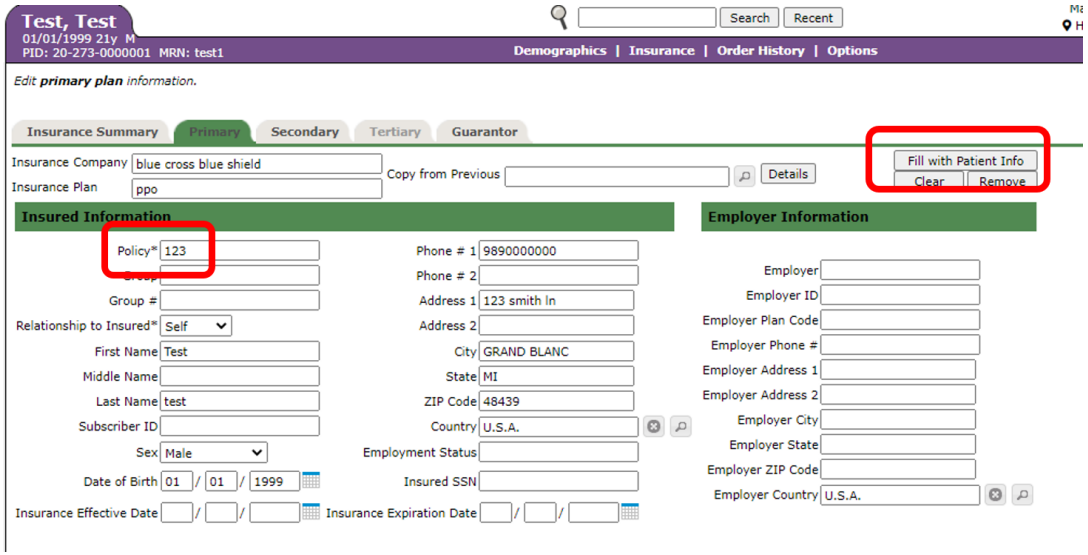


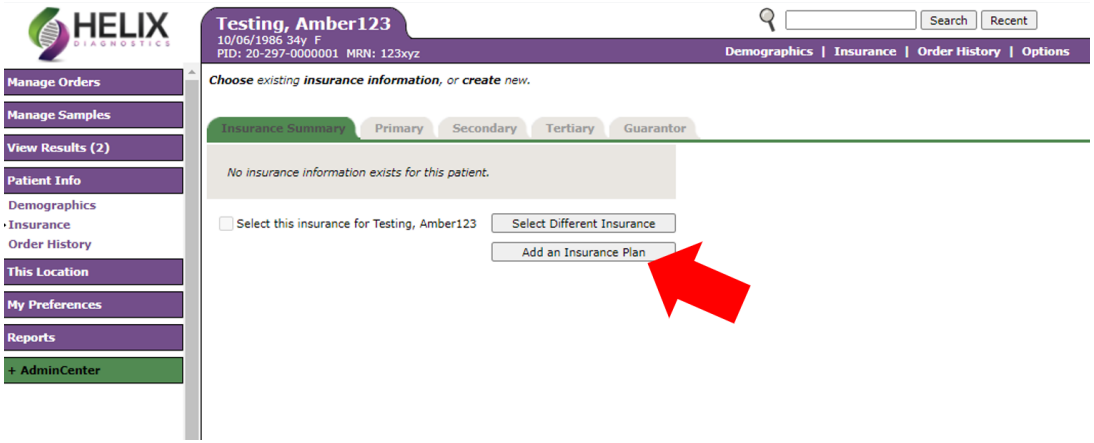
Click on "***Select Different Insurance***" and choose the insurance on the list that matches your patient's insurance. If you do not see the correct insurance, you will have to add the insurance plan.

The instructions to add an insurance will be coming up.



After you have chosen the insurance please enter the policy # and group #, if applicable. On the right side of the page you will see a button "***Fill with Patient Info***." Click this button and the patients demographics will load. Click "***Save***."





To add an insurance that is not listed. Click "***Add an Insurance Plan***." Next click "***New Company and Plan***."

Client Portal Guide

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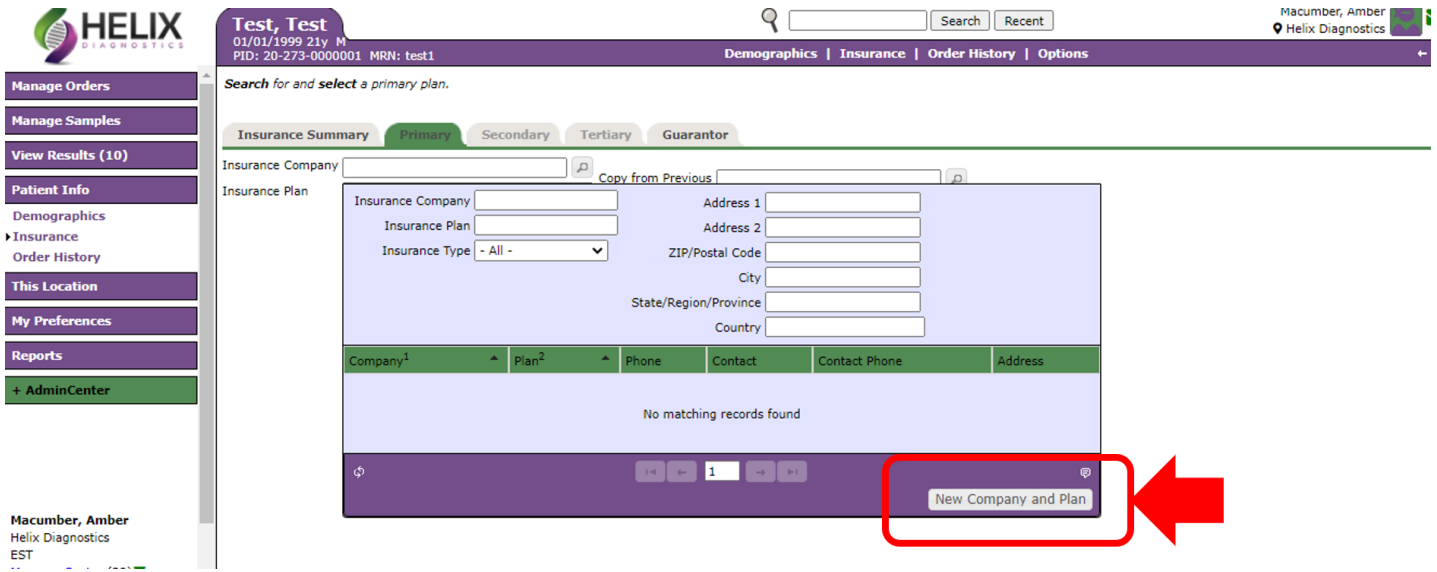
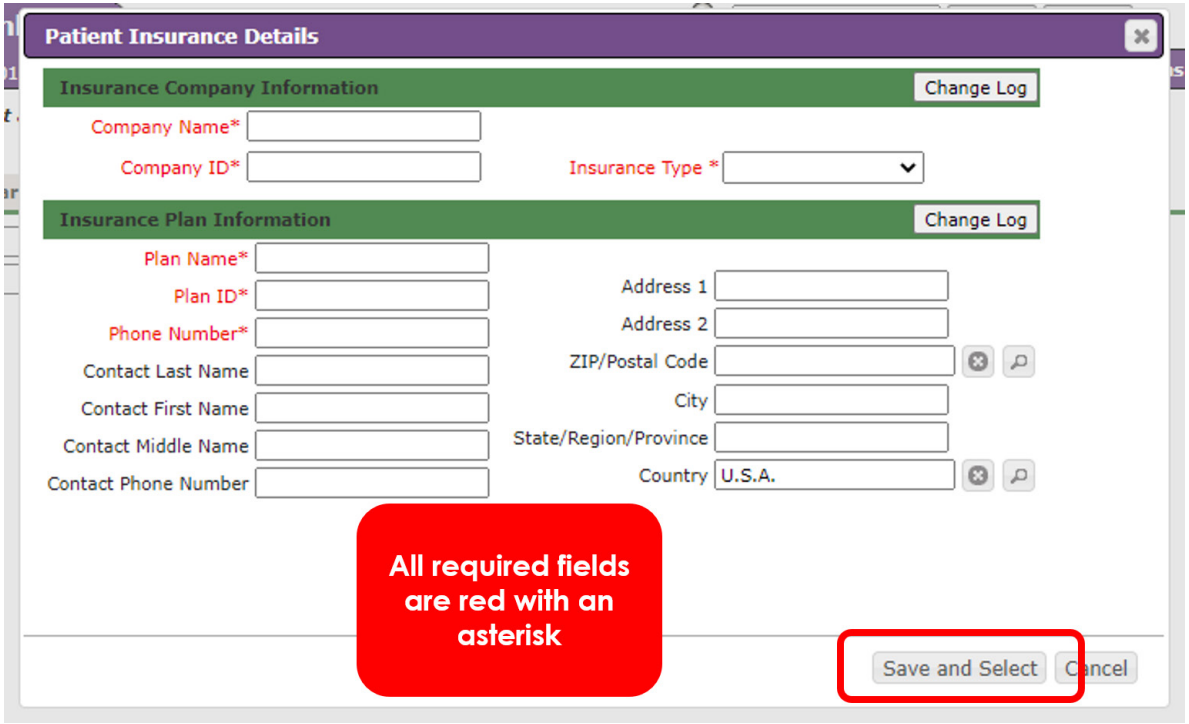
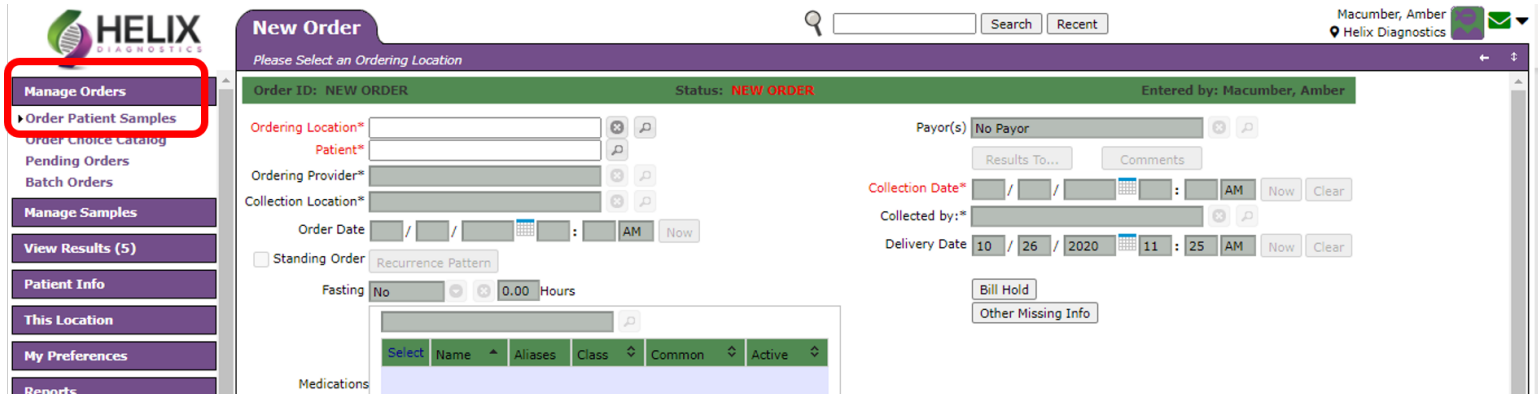


Fill out the insurance company and plan information along with the plan ID.
All required fields have an asterik and are in **red.**
Click **"*Save and Continue.*"**

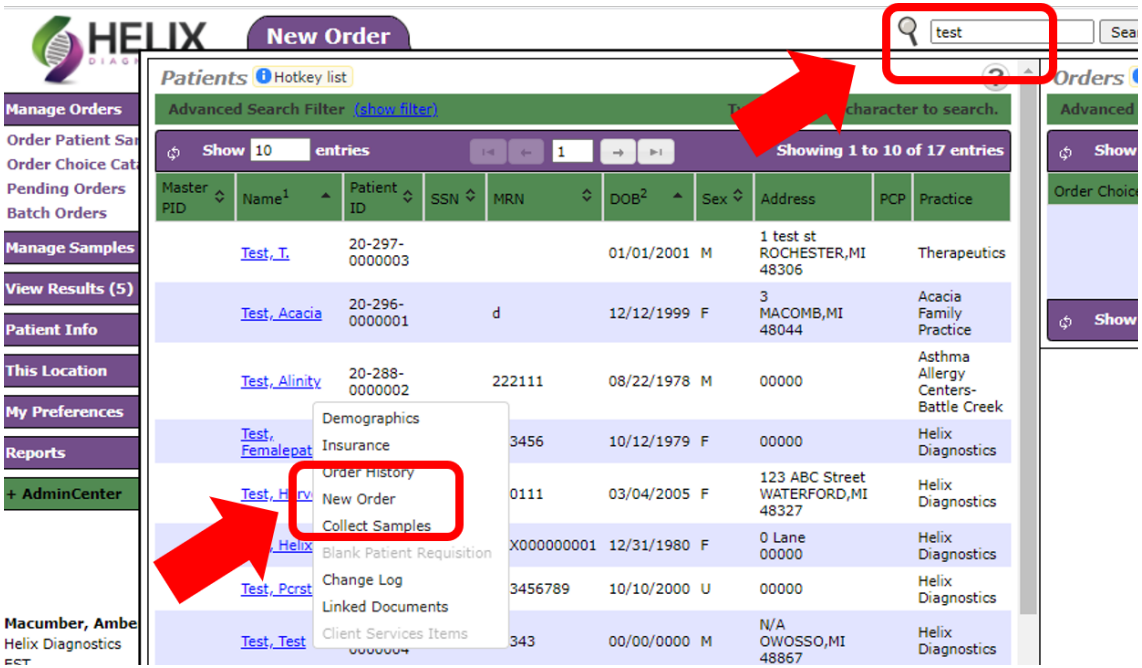


Section 4 Creating a New Order

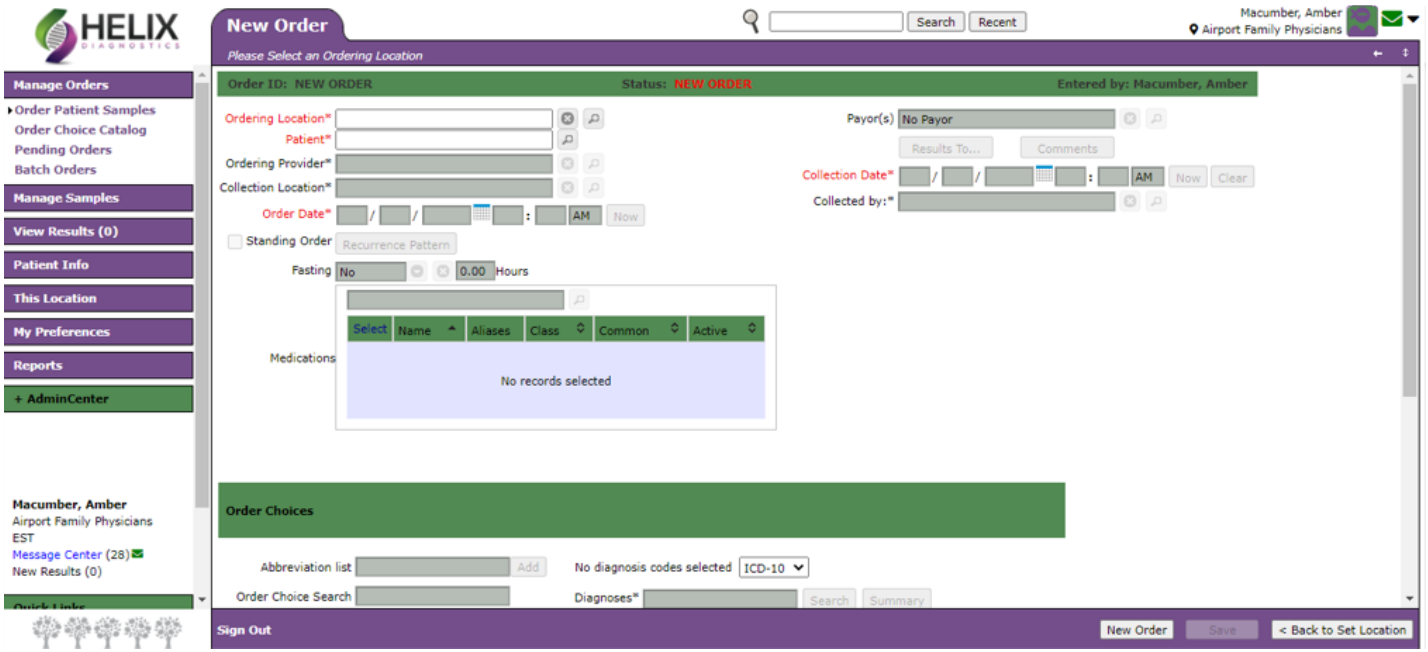


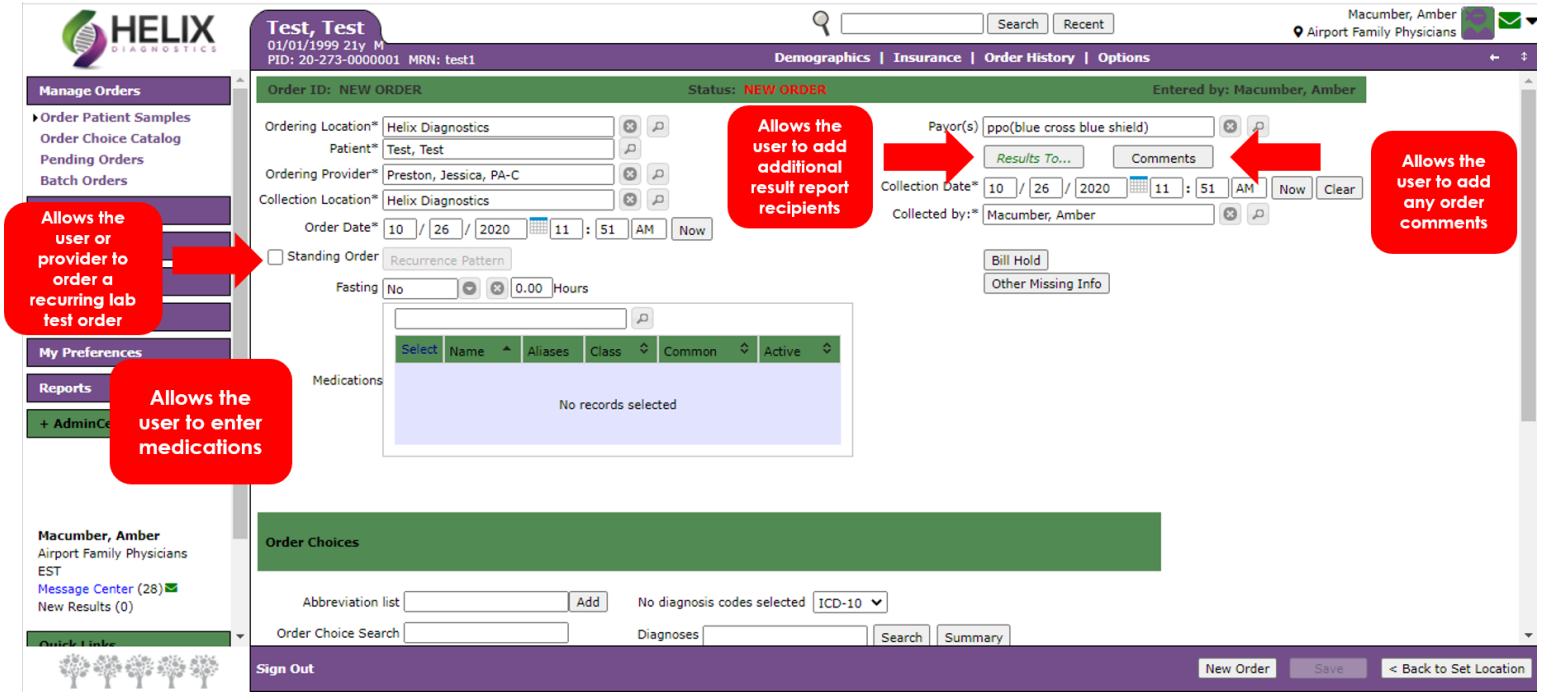
Under manage orders select "***Order Patient Samples***." Type the last name of the patient in "***Patient***" and search. You can then select the patient you would like to place an order on.

Another way is to search the patient in the global search box at the top of the page. Click on the patient name and select "***New Order***".

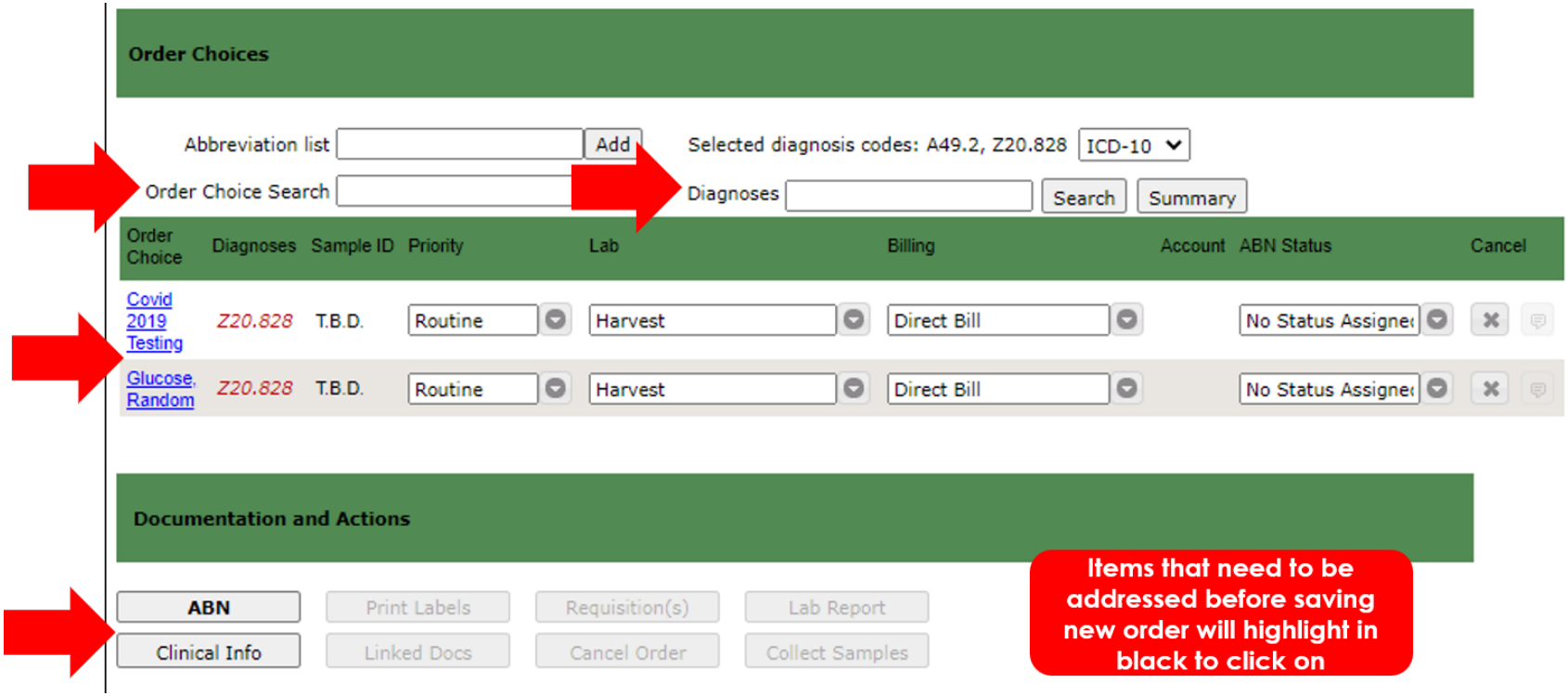


Fields with an asterik and in **red** are **required**.

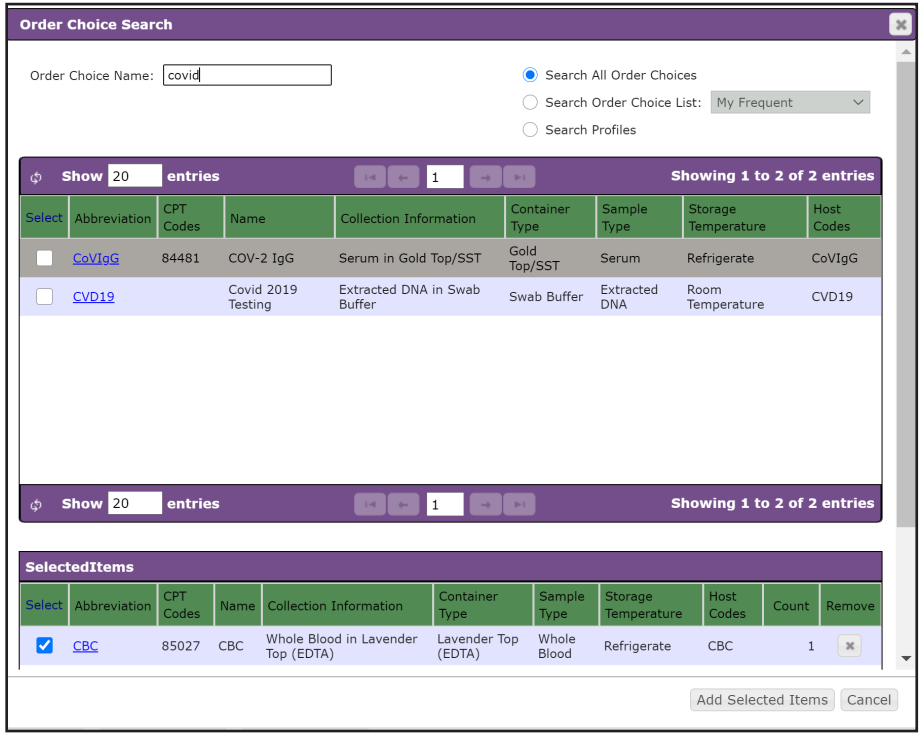




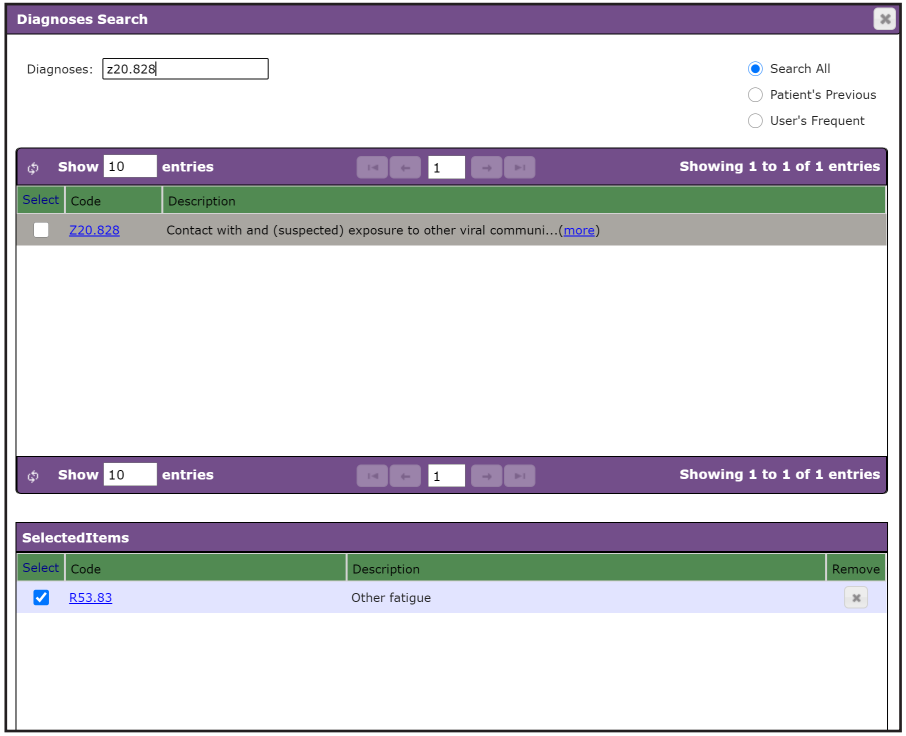
At the time of placing an order you will also have the ability to create a standing order, medication list, send reports to other physicians (CC specialists), and add other comments to the order.



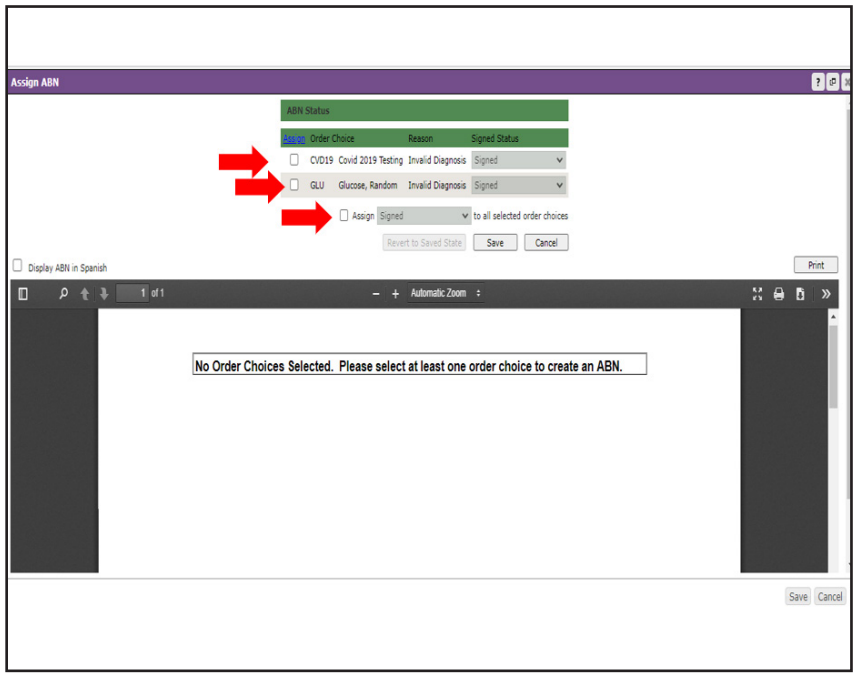
A test can be chosen in **Order Choice Search**, diagnosis code added in the **Diagnosis Search Box** and any items that need to be addressed **(ex. ABN)** will be highighted. Click on the highlighted box to answer the needed information.

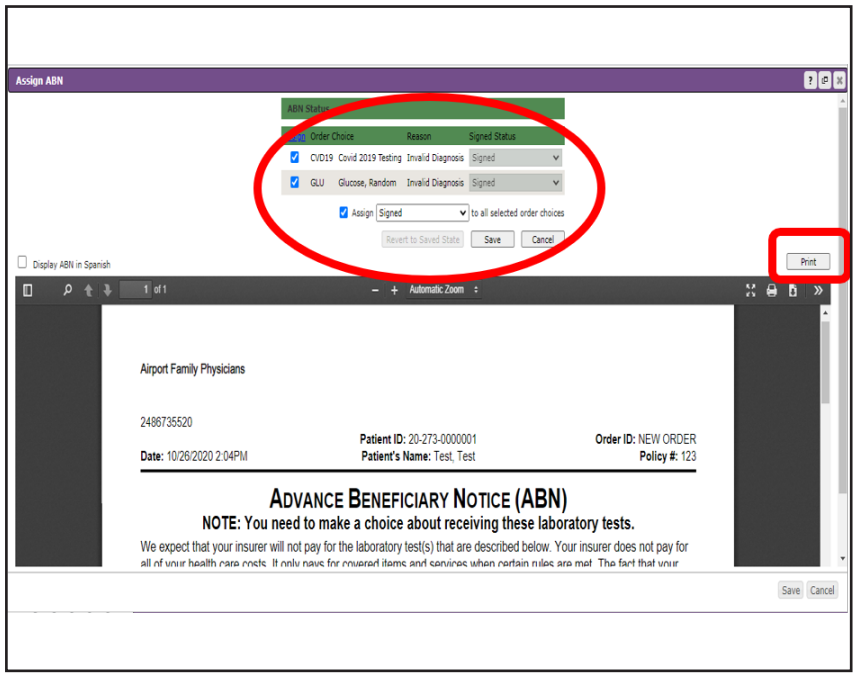


After you click in the **order choice search** and start typing, the above box will come up. You can search for the test by name or test code and matching tests will display. Information such as collection info, container type, and storage temperature will also be displayed. Once a test is selected you will see it in the selected item box at the bottom. After all tests are selected, click "***Add Selected Items***."



After you click in the **diagnosis search** and start typing, the above box will come up. You can search for the diagnosis code by description or diagnosis code and matching codes will display. Once a code is selected you will see it in the selected item box at the bottom. After all codes are selected, click "***Add Selected Items***."

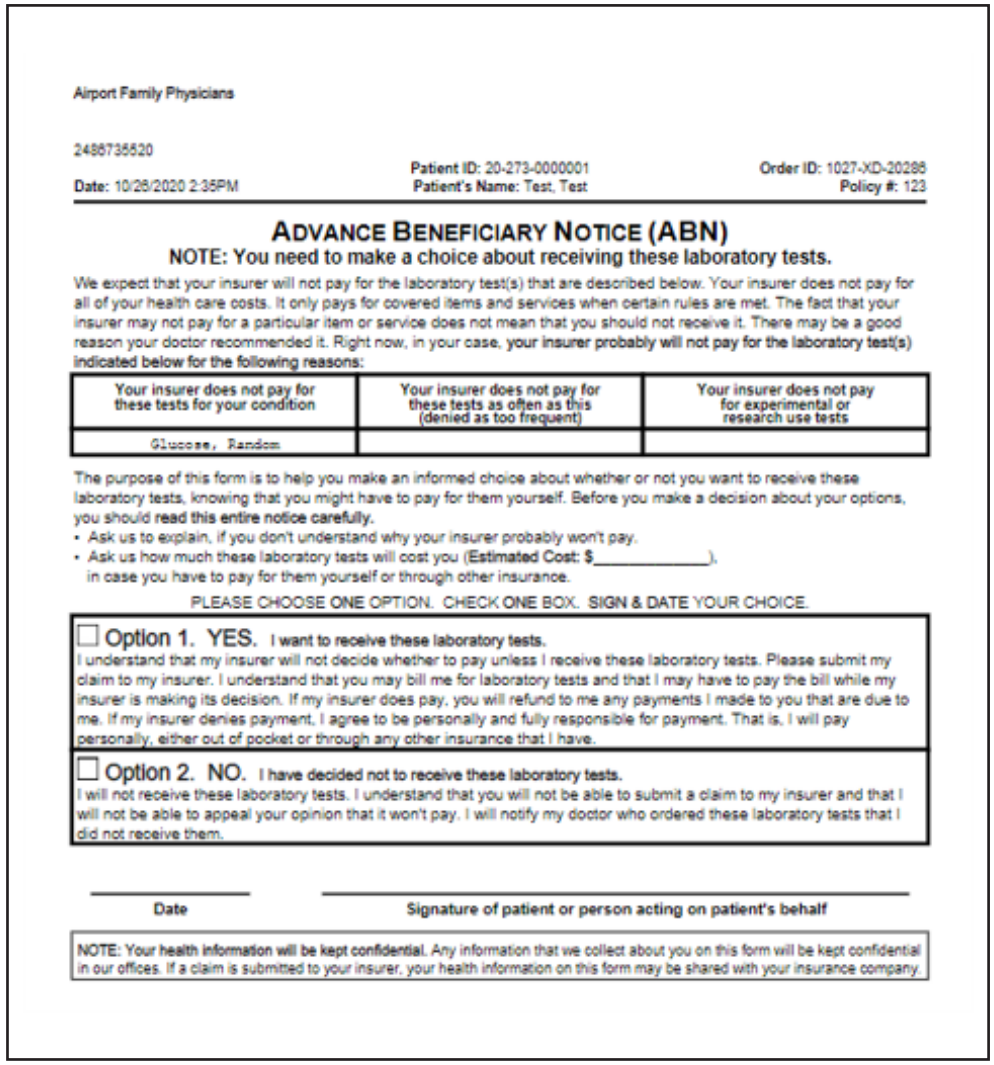




If an order does not satisfy the **ABN** requirements for Medicare patients, you will see the **ABN** action highlighted at the bottom of your order screen in the actions box. Click on the "***ABN***" button and this box will appear. Please choose the selected tests and choose assign. An **ABN** will display and then select print. Please have the patient sign the **ABN** and include it with the requisitions when packaging the sample.

ABN = Advanced Beneficiary Notice

*The **ABN** is a notification to the patient that they Medicare may or may not cover the tests listed and they may or may not be responsible for the bill. They have the right to appeal the claim to Medicare and the right to refuse the testing. There are a menu of tests that are limited coverage. These are listed on the Local and National Coverage Determination lists (**LCD** and **NCD**). Providers can go back in the order and add any missing diagnosis codes that may satisfy the **ABN**.*



Airport Family Physicians

2488735520

Date: 10/26/2020 2:35PM

Patient ID: 20-273-0000001
Patient's Name: Test, Test

Order ID: 1027-XD-20286
Policy #: 123

ADVANCE BENEFICIARY NOTICE (ABN)

NOTE: You need to make a choice about receiving these laboratory tests.

We expect that your insurer will not pay for the laboratory test(s) that are described below. Your insurer does not pay for all of your health care costs. It only pays for covered items and services when certain rules are met. The fact that your insurer may not pay for a particular item or service does not mean that you should not receive it. There may be a good reason your doctor recommended it. Right now, in your case, **your insurer probably will not pay for the laboratory test(s) indicated below for the following reasons:**

Your insurer does not pay for these tests for your condition	Your insurer does not pay for these tests as often as this (denied as too frequent)	Your insurer does not pay for experimental or research use tests
Glucose, Random		

The purpose of this form is to help you make an informed choice about whether or not you want to receive these laboratory tests, knowing that you might have to pay for them yourself. Before you make a decision about your options, you should **read this entire notice carefully.**

- Ask us to explain, if you don't understand why your insurer probably won't pay.
- Ask us how much these laboratory tests will cost you (**Estimated Cost: $_____**), in case you have to pay for them yourself or through other insurance.

PLEASE CHOOSE ONE OPTION. CHECK ONE BOX. SIGN & DATE YOUR CHOICE.

☐ **Option 1. YES.** I want to receive these laboratory tests.
I understand that my insurer will not decide whether to pay unless I receive these laboratory tests. Please submit my claim to my insurer. I understand that you may bill me for laboratory tests and that I may have to pay the bill while my insurer is making its decision. If my insurer does pay, you will refund to me any payments I made to you that are due to me. If my insurer denies payment, I agree to be personally and fully responsible for payment. That is, I will pay personally, either out of pocket or through any other insurance that I have.

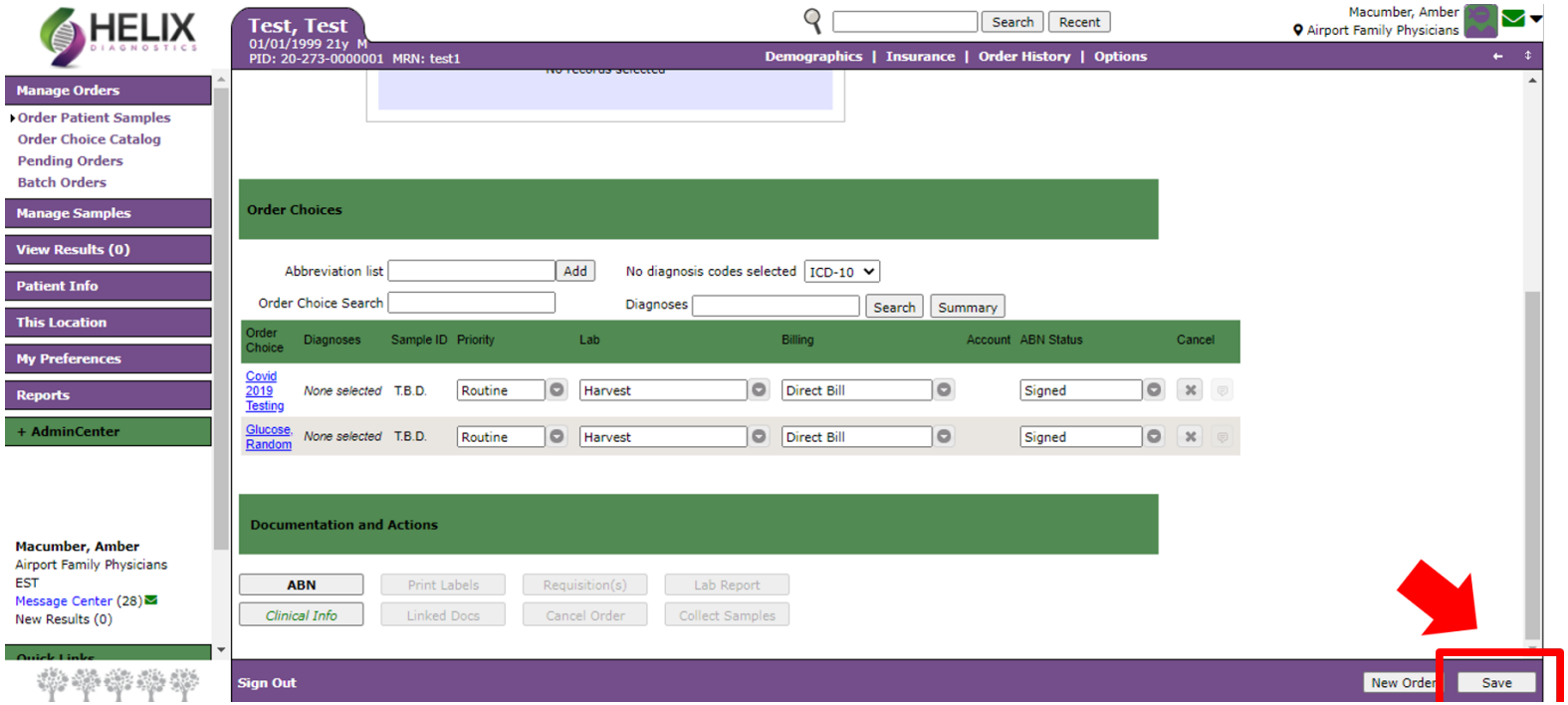
☐ **Option 2. NO.** I have decided not to receive these laboratory tests.
I will not receive these laboratory tests. I understand that you will not be able to submit a claim to my insurer and that I will not be able to appeal your opinion that it won't pay. I will notify my doctor who ordered these laboratory tests that I did not receive them.

Date

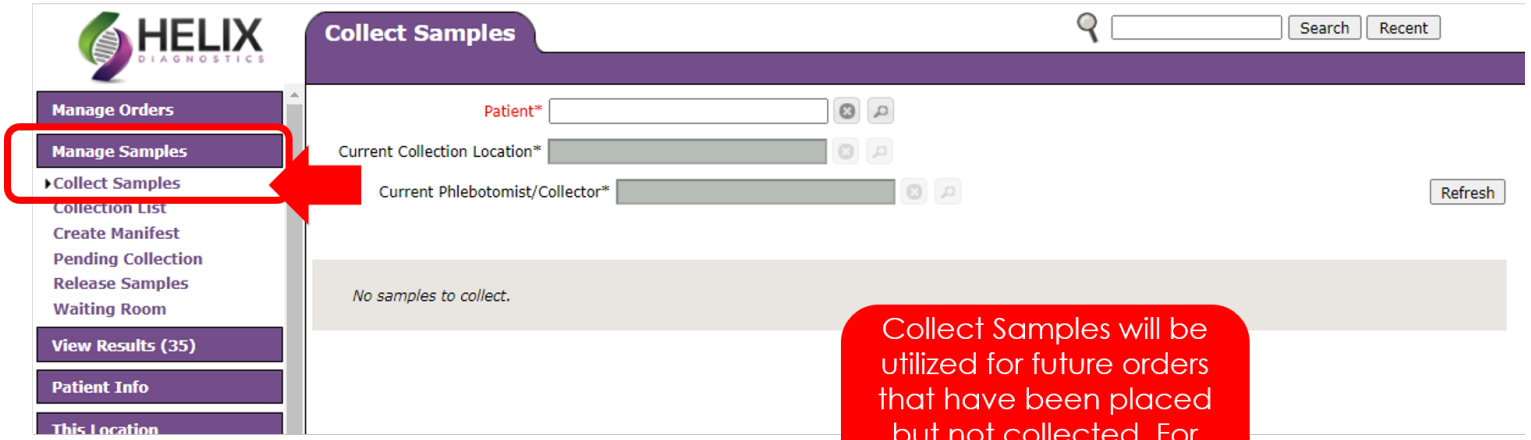
Signature of patient or person acting on patient's behalf

NOTE: Your health information will be kept confidential. Any information that we collect about you on this form will be kept confidential in our offices. If a claim is submitted to your insurer, your health information on this form may be shared with your insurance company.

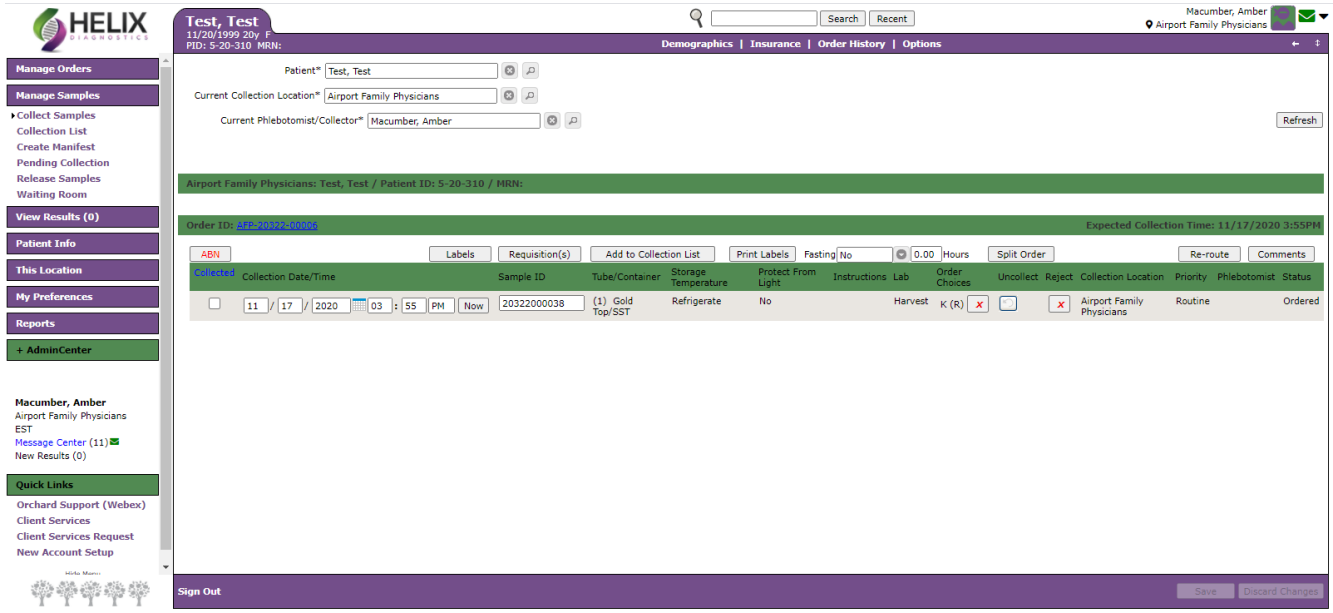
Example of an Advanced Beneficiary Notice



When you are done with the order click "***Save***." If you have missed any necessary information **Copia** will display a box telling you what you have missed. (Ex. Missing source information, Collection date/time) Once you have filled in the missing information click "***Save***." The order will save and a requisition will load to print.



Collect Samples will be utilized for future orders that have been placed but not collected. For example, a standing order.



After saving your order you will be directed to the "***Collect Samples***" screen. For this screen check the box next to the order and save if the sample has been collected. If not, you can "***collect***" the order later. If you place a future order, you will go to this screen to "***collect***" the sample at a later date when the sample is obtained.

Example of the Order Requistion

REQUISITION
Performing Lab: HELIX Diagnostics

Order Information:

Practice: Helix Diagnostics	Date Printed: 11/17/2020 3:55PM
Order ID: 1007-XD-20282	Ordering Location ID: HLXD
Ordering Provider: Preston, Jessica, PA-C	Location: Helix Diagnostics
Date: 10/22/2020 10:43AM	Status: Ordered
Patient Comments:	
Order Comments:	

Patient Information:

Name:	Test, Test 21y M
DOB:	01/01/1999
Patient ID:	20-273-0000001
MRN:	test1
SSN:	
Phone:	989-888-8888
Address:	123 smith ln GRAND BLANC, MI 48439
Primary Provider:	

Insurance Information:

Primary:	none specified	Secondary:	none specified
Ins Co Addr:		Ins Co Addr:	
Subscriber ID:		Subscriber ID:	
Group #:		Group #:	
Policy #:		Policy #:	
Insured Name:		Insured Name:	
Rel to Insured:		Rel to Insured:	
Insured Addr:		Insured Addr:	
Employer:		Employer:	
Employer ID:		Employer ID:	

Order Choices for: Harvest

SID: 20282000011

Priority	CPT Code	Name	Tube/Container	Host Code	ICD Codes	ABN Status
R		Covid 2019 Testing	(1) Swab Buffer	CVD19		N/A
ROOM TEMPERATURE.						
Billing: Patient Bill						

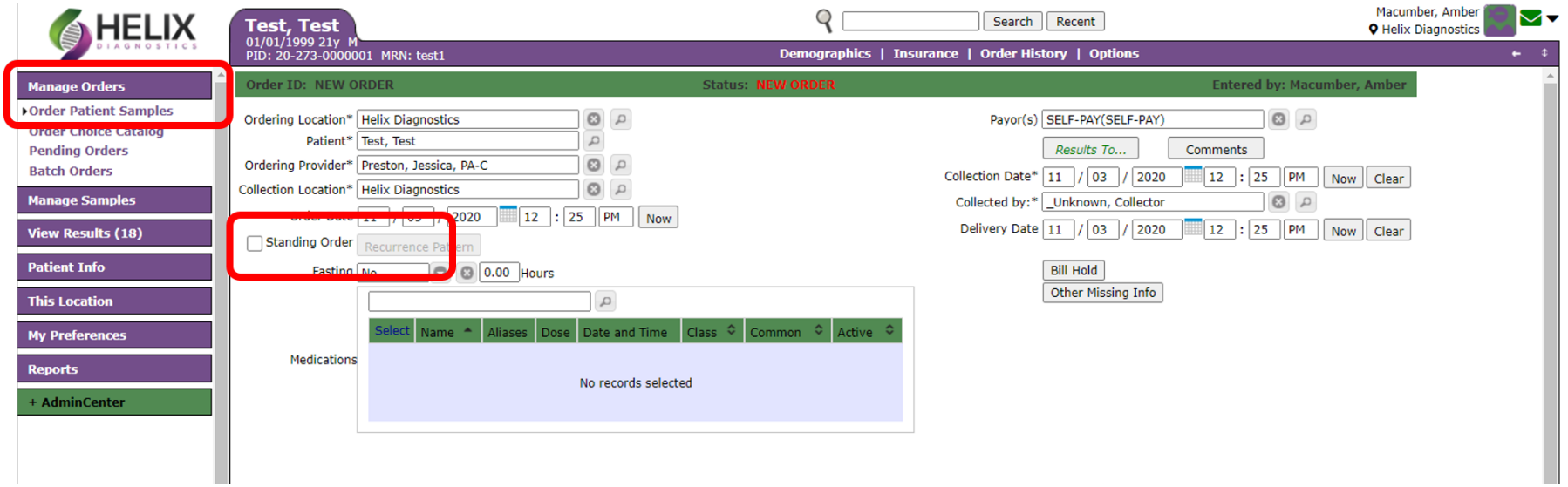
Clinical Info:

Order Choices	Questions	Answers
CVD19	Site	
CVD19	Source	

REQUISITION (Harvest Copy) Page 1 of 1 Test, Test, Order ID: 1007-XD-20282

Example of Specimen Labels

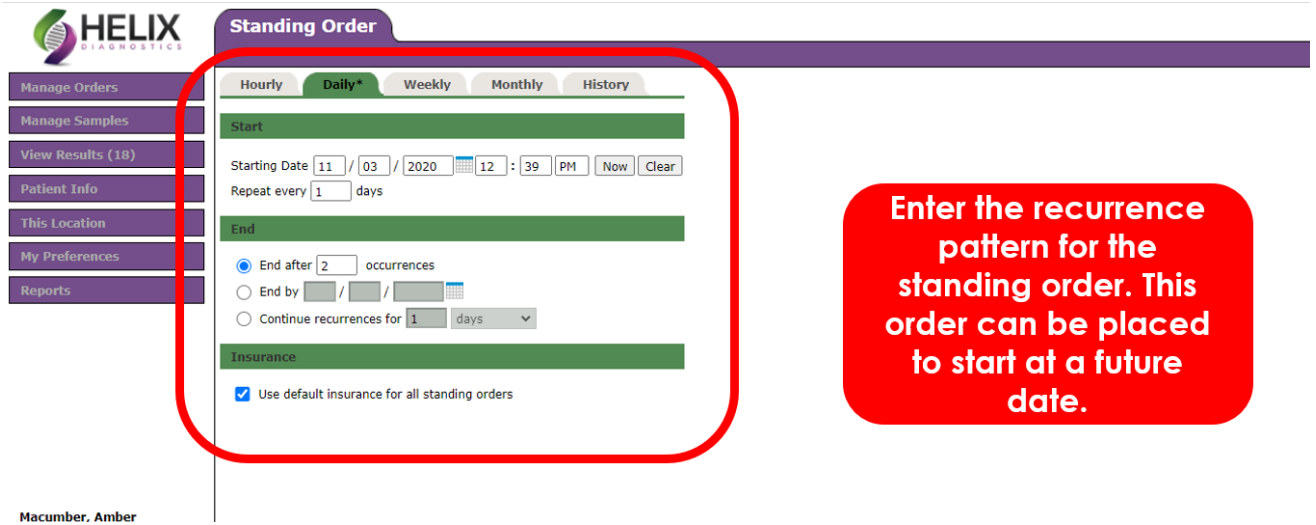
Section 5 Creating a Standing Order



After starting a new order on a patient. Click the box next to "**Standing Order**."

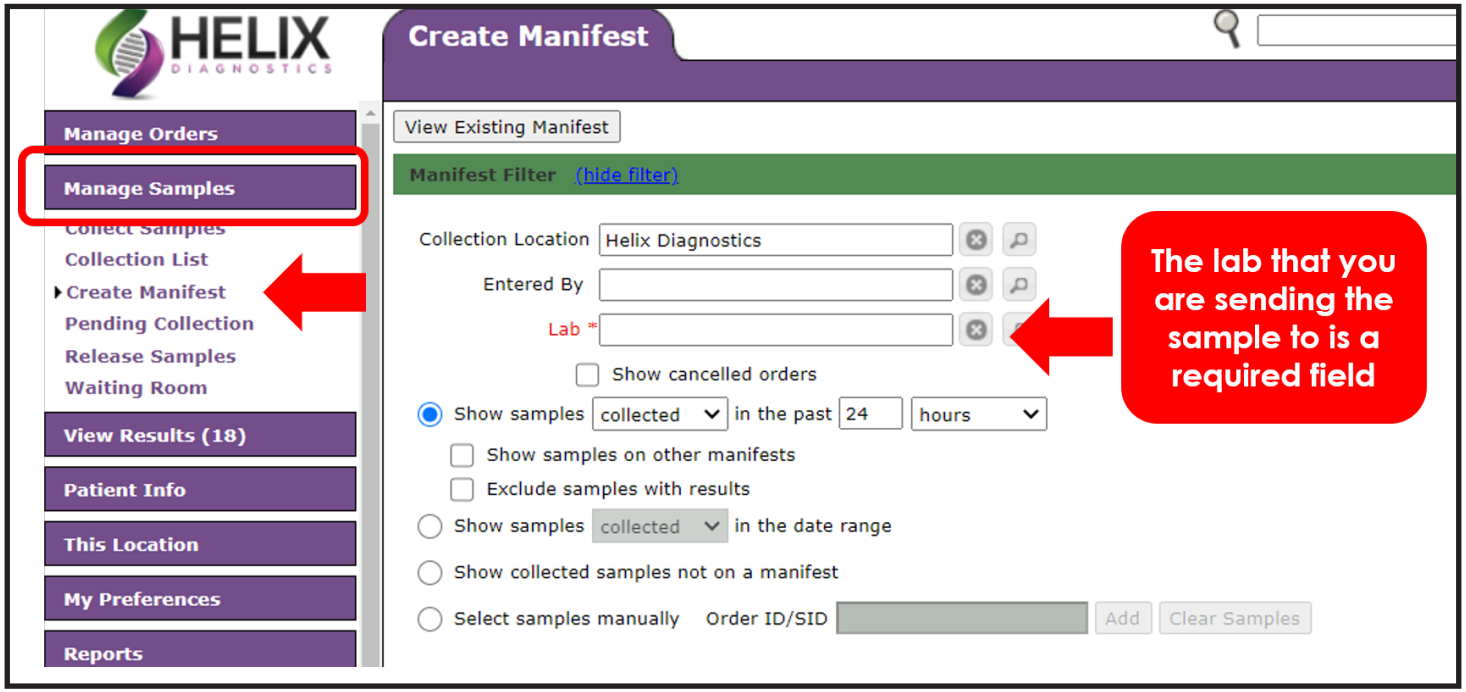
The screen to the right will come up. You can set the recurrence pattern for your standing order on this screen.

When you are done click"**Save.**"



Enter the recurrence pattern for the standing order. This order can be placed to start at a future date.

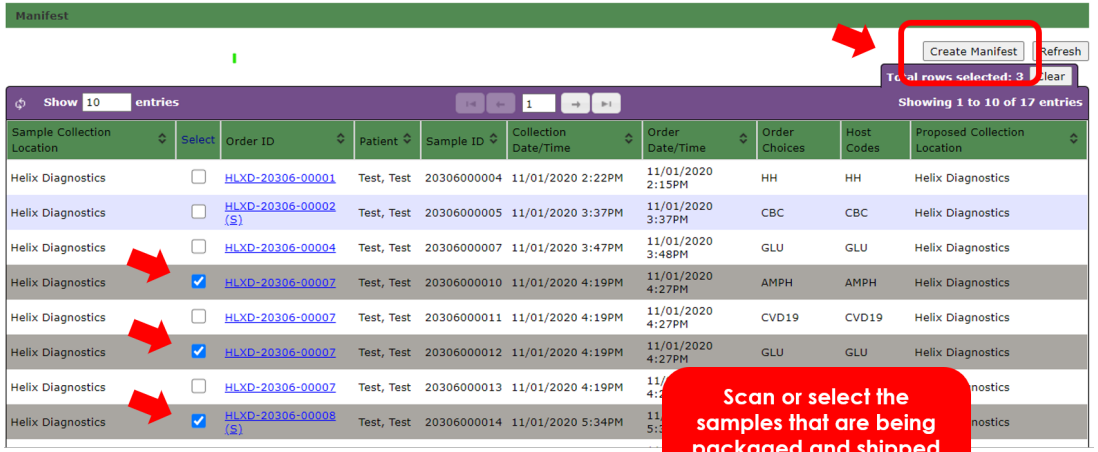
Section 6 Creating a Manifest and Collection List



Manifest - A manifest allows a group of samples to be tracked together to the testing location with one tracking ID and information.

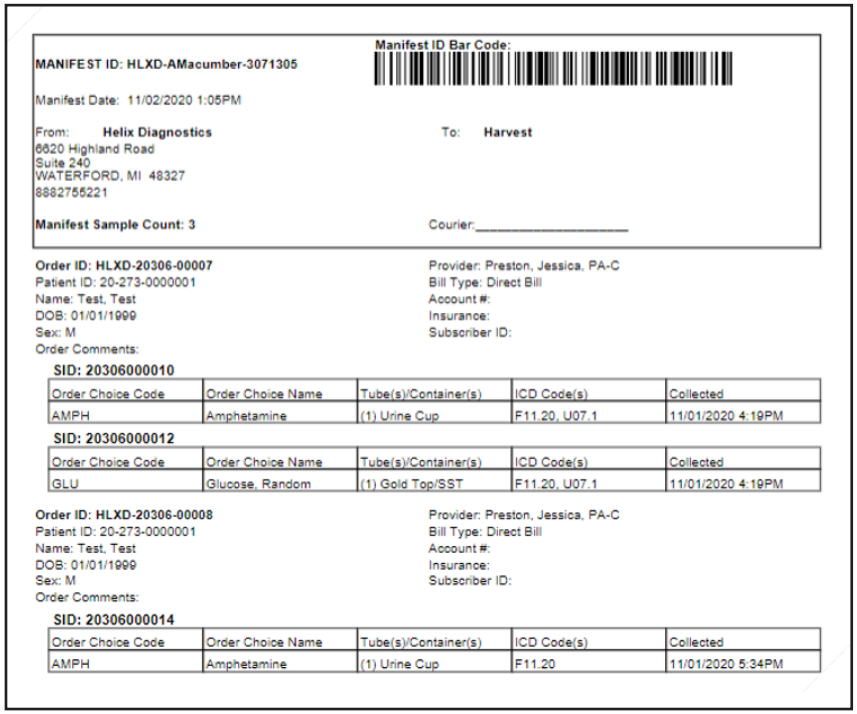
You must choose the lab before creating the manifest.

Select the samples that are being packaged for delivery or shipping to the aboratory. Then select "**Create Manifest**."



Sample Collection Location	Select	Order ID	Patient	Sample ID	Collection Date/Time	Order Date/Time	Order Choices	Host Codes	Proposed Collection Location
Helix Diagnostics	☐	HLXD-20306-00001	Test, Test	20306000004	11/01/2020 2:22PM	11/01/2020 2:15PM	HH	HH	Helix Diagnostics
Helix Diagnostics	☐	HLXD-20306-00002 (S)	Test, Test	20306000005	11/01/2020 3:37PM	11/01/2020 3:37PM	CBC	CBC	Helix Diagnostics
Helix Diagnostics	☐	HLXD-20306-00004	Test, Test	20306000007	11/01/2020 3:47PM	11/01/2020 3:48PM	GLU	GLU	Helix Diagnostics
Helix Diagnostics	☑	HLXD-20306-00007	Test, Test	20306000010	11/01/2020 4:19PM	11/01/2020 4:27PM	AMPH	AMPH	Helix Diagnostics
Helix Diagnostics	☐	HLXD-20306-00007	Test, Test	20306000011	11/01/2020 4:19PM	11/01/2020 4:27PM	CVD19	CVD19	Helix Diagnostics
Helix Diagnostics	☑	HLXD-20306-00007	Test, Test	20306000012	11/01/2020 4:19PM	11/01/2020 4:27PM	GLU	GLU	Helix Diagnostics
Helix Diagnostics	☐	HLXD-20306-00007	Test, Test	20306000013	11/01/2020 4:19PM	11/01/2020 4:27PM			Helix Diagnostics
Helix Diagnostics	☑	HLXD-20306-00008 (S)	Test, Test	20306000014	11/01/2020 5:34PM	11/01/2020 5:34PM			Helix Diagnostics

This form can be printed and packed with the samples for courier to pick up.



MANIFEST ID: HLXD-AMacumber-3071305

Manifest ID Bar Code:

Manifest Date: 11/02/2020 1:05PM

From: **Helix Diagnostics**
6620 Highland Road
Suite 240
WATERFORD, MI 48327
8882755221

To: **Harvest**

Manifest Sample Count: 3

Courier:_____

Order ID: HLXD-20306-00007
Patient ID: 20-273-0000001
Name: Test, Test
DOB: 01/01/1999
Sex: M
Order Comments:

Provider: Preston, Jessica, PA-C
Bill Type: Direct Bill
Account #:
Insurance:
Subscriber ID:

SID: 20306000010

Order Choice Code	Order Choice Name	Tube(s)/Container(s)	ICD Code(s)	Collected
AMPH	Amphetamine	(1) Urine Cup	F11.20, U07.1	11/01/2020 4:19PM

SID: 20306000012

Order Choice Code	Order Choice Name	Tube(s)/Container(s)	ICD Code(s)	Collected
GLU	Glucose, Random	(1) Gold Top/SST	F11.20, U07.1	11/01/2020 4:19PM

Order ID: HLXD-20306-00008
Patient ID: 20-273-0000001
Name: Test, Test
DOB: 01/01/1999
Sex: M
Order Comments:

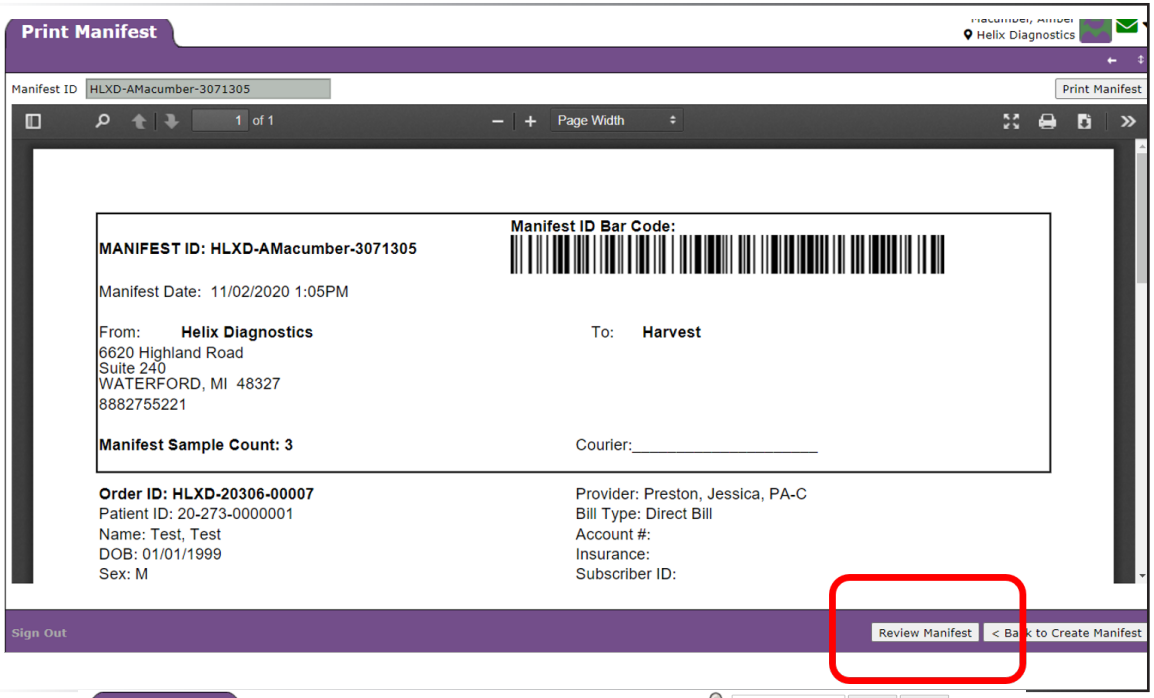
Provider: Preston, Jessica, PA-C
Bill Type: Direct Bill
Account #:
Insurance:
Subscriber ID:

SID: 20306000014

Order Choice Code	Order Choice Name	Tube(s)/Container(s)	ICD Code(s)	Collected
AMPH	Amphetamine	(1) Urine Cup	F11.20	11/01/2020 5:34PM

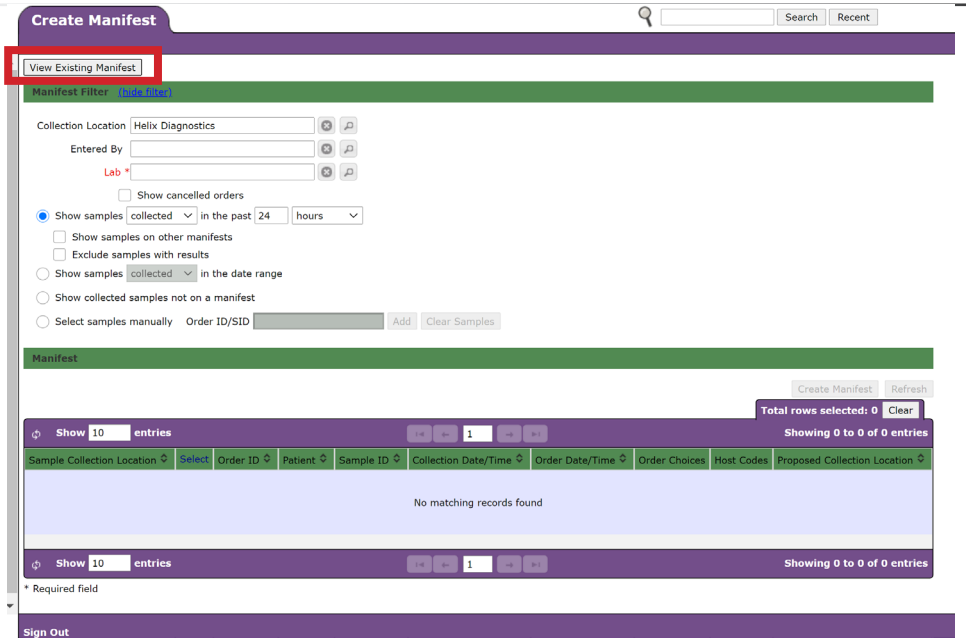
You can print the manifest at this screen. Click "**Print Manifest**"

When done click "**Review Manifest**" and it will take you back to the Create Manifest Screen where you can review the manifest created or view other manifest.

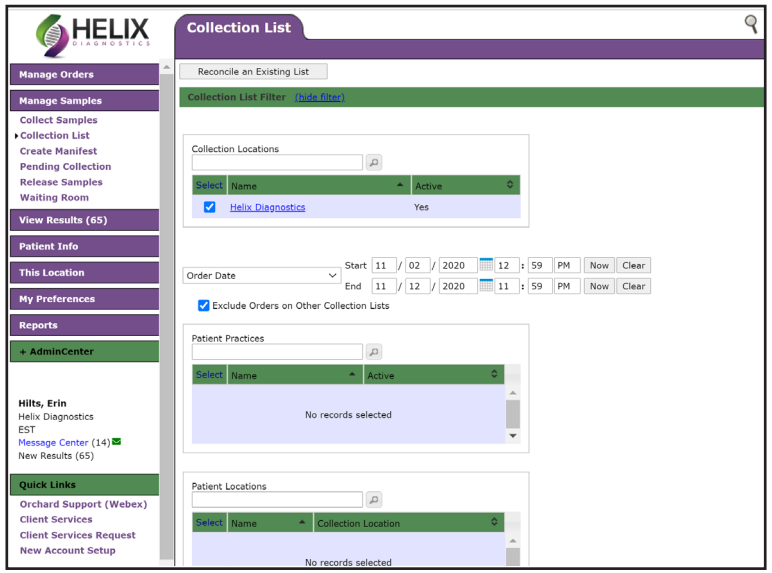


To view your manifest or other manifests click on "**View Existing Manifests**."

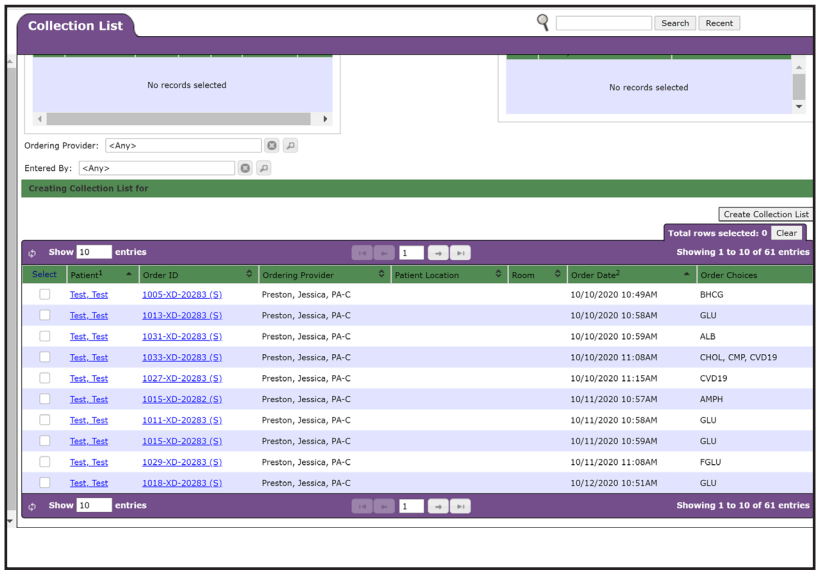
You can review and reprint manifests.



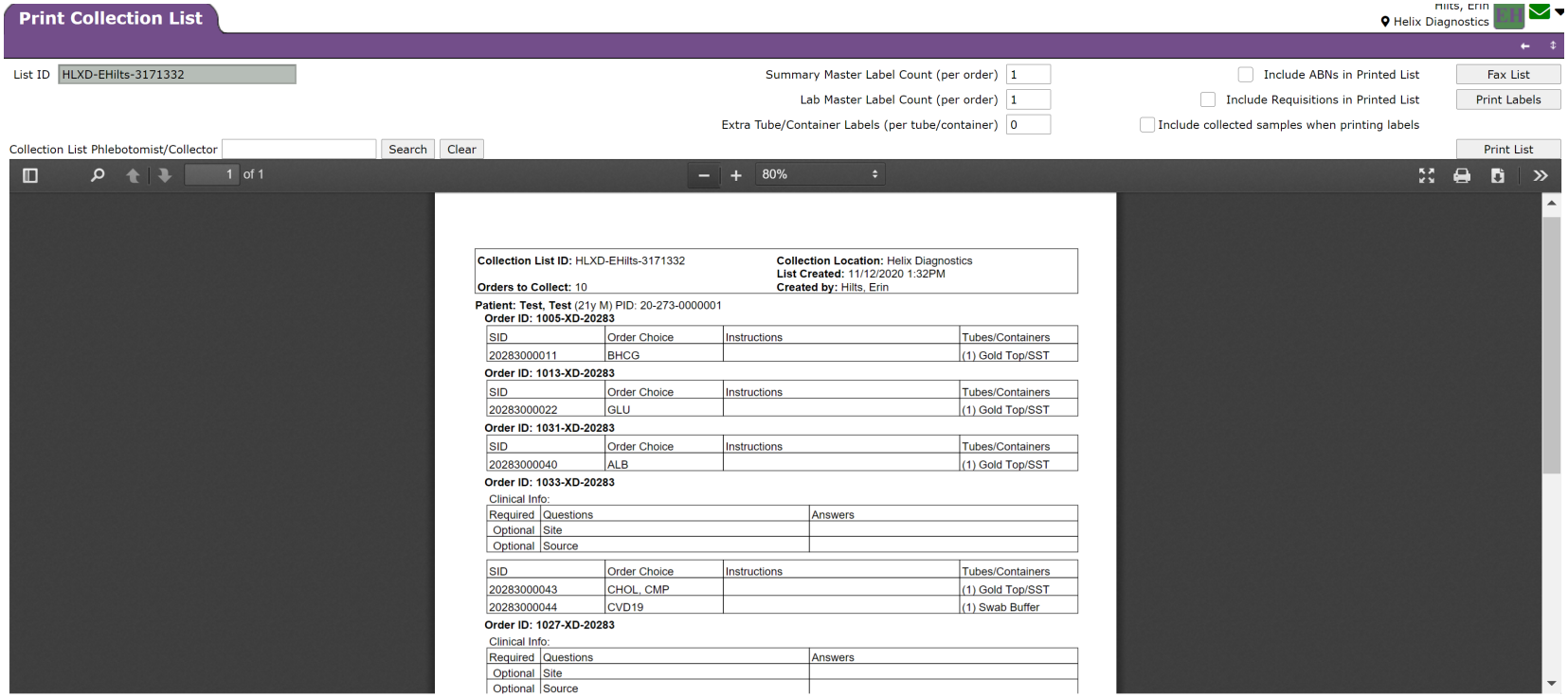
Collection List



A **Collection List** can be used to keep track of your orders.(ex.Draw Log) This is not required but is a helpful tool for your office.
Click "***Collection List***" under Manage Samples.
Choose your location and select a date range.

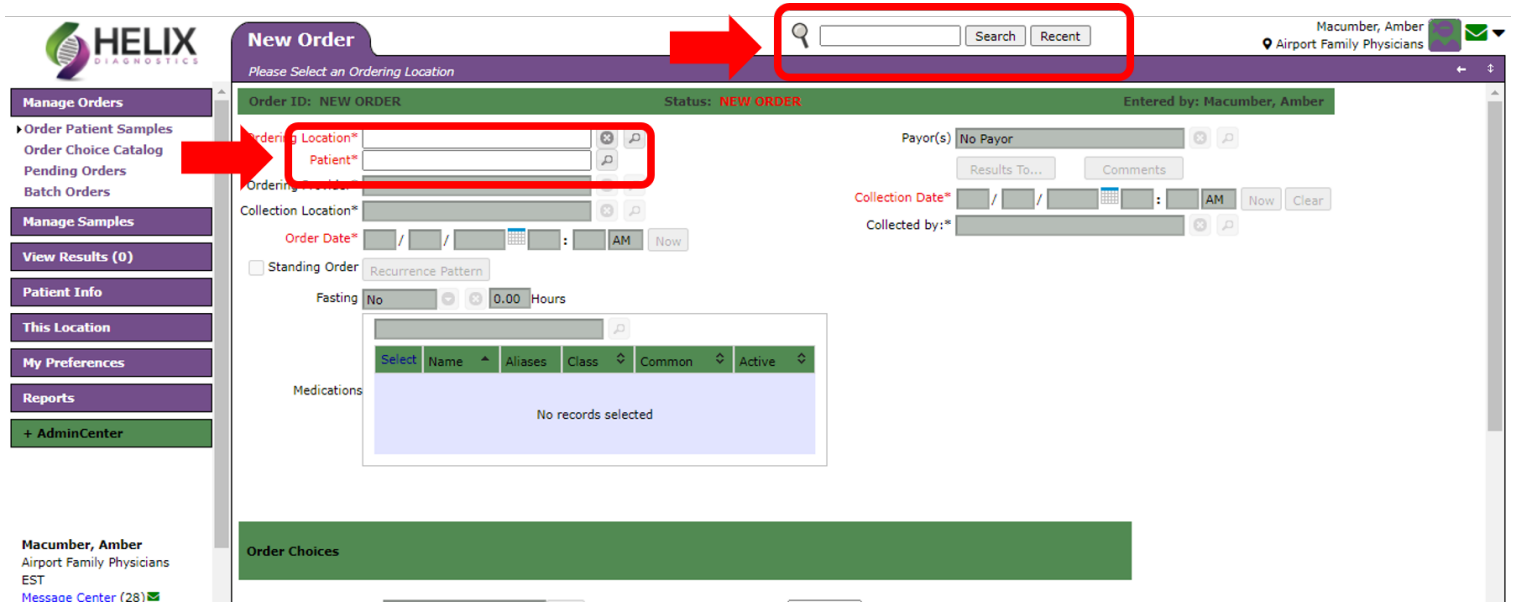


Scroll down to the bottom of the page and select the orders for that date and then click "***Create Collection List***."



Example of a Collection List - This list can be printed. Click back to collection list to get out of this screen.

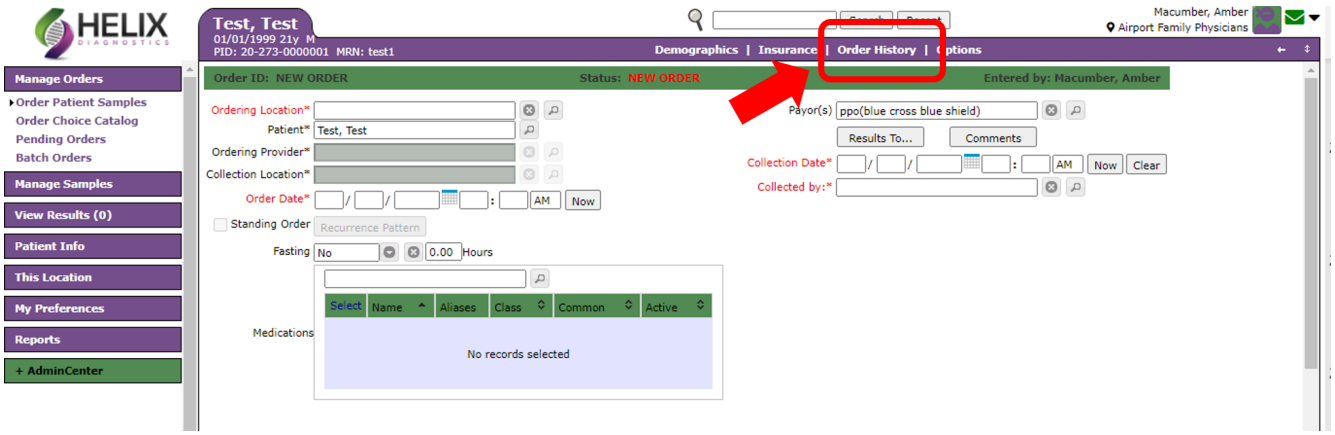
Section 7 Searching for a Patient or Order



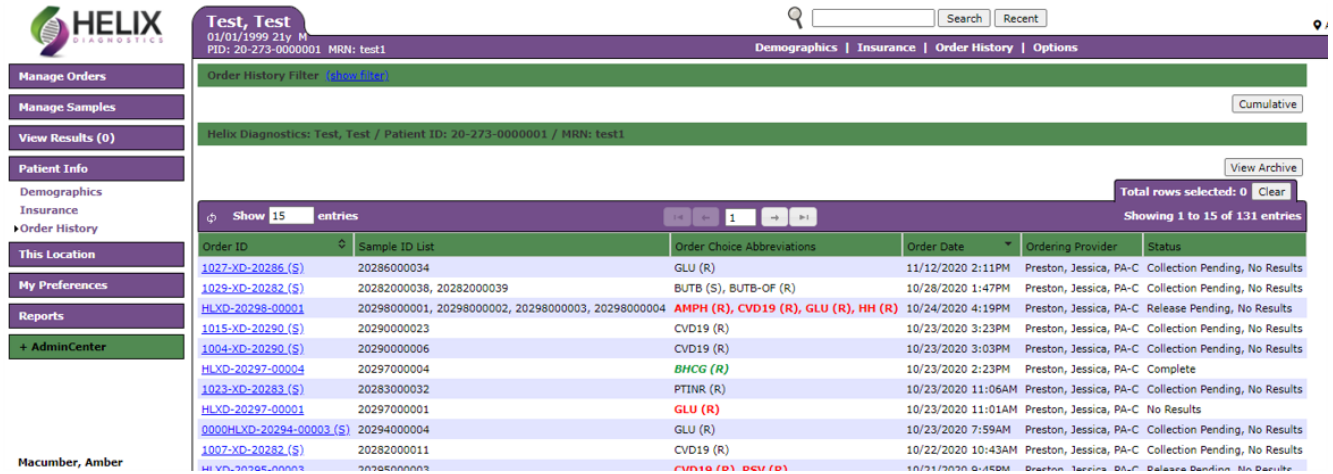
There are two ways to search for a patient's order. You can search a patients name in the global search box or under "***Order Patient Samples***."

The global search, searches all patients in the system. Searching under "***Order Patient Samples***" only searches the patients already under your location. If you have never seen the patient before you can search to see if they have ever been to Helix and you can import the patient demographics.

When searching through the "***Order Patient Samples,***" after the patient is chosen. Click on "***Order History***" in the top purple bar.

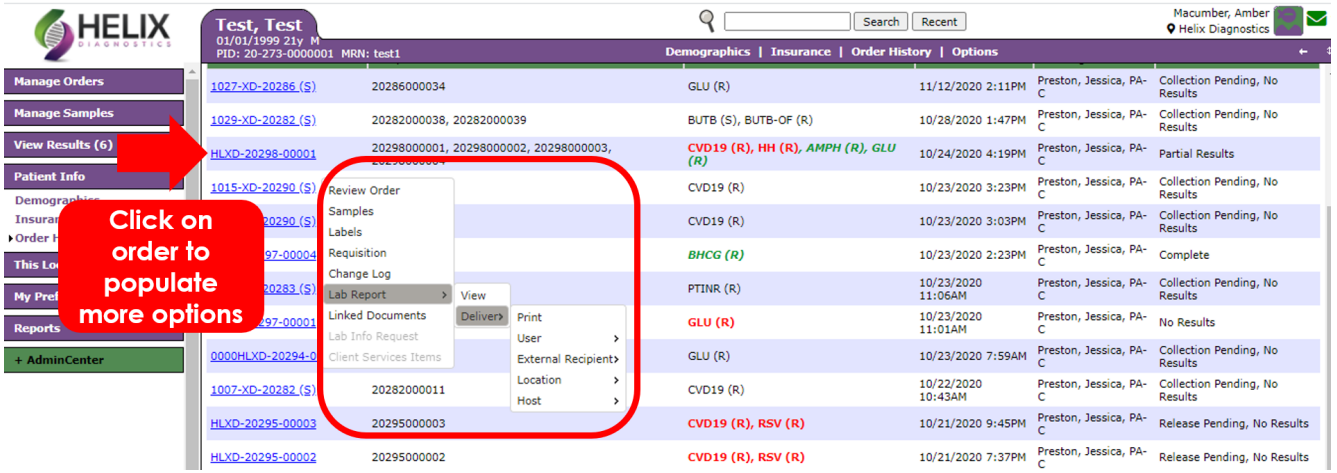


The order history will come up and show all the orders placed under the patient.

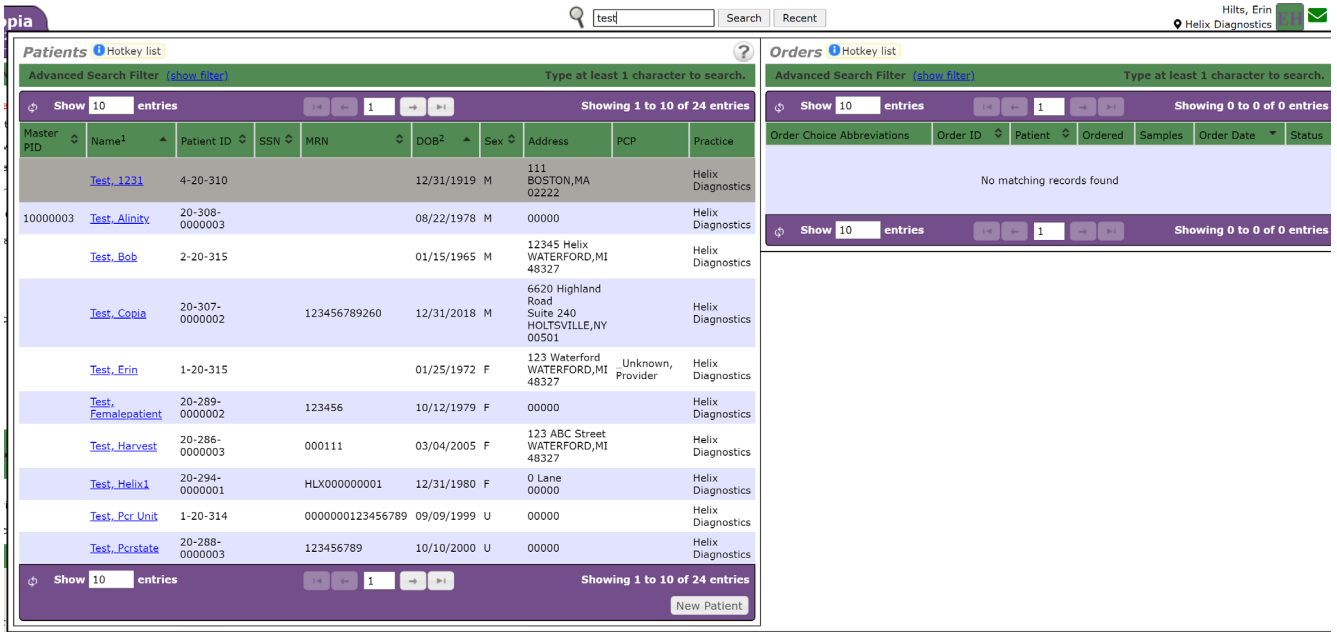


Client Portal Guide

Click on the order to populate more options.
(Ex. Review Order, Labels, Lab Report)

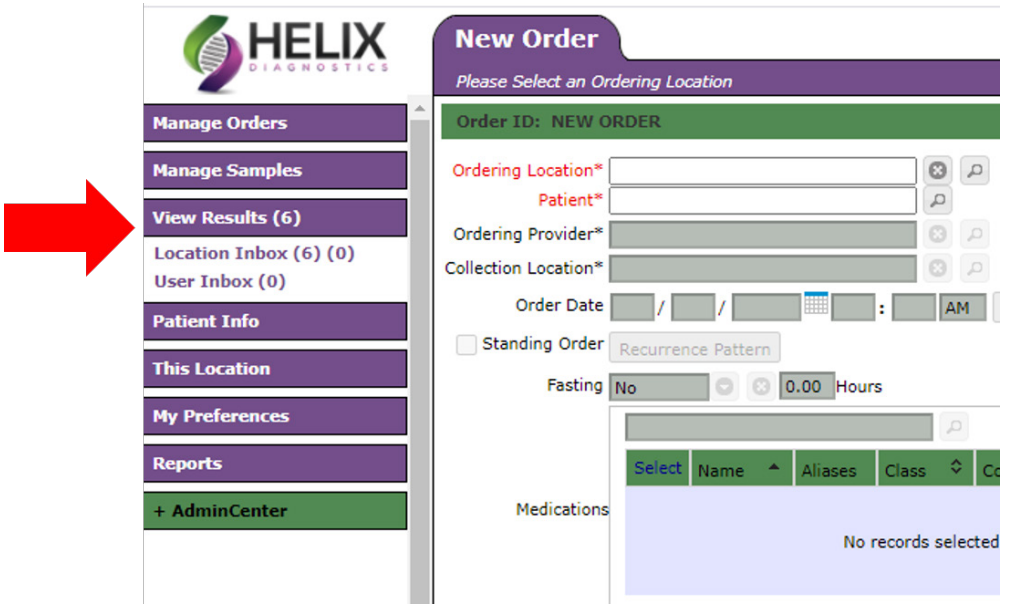


To search in the main gobal search box, type in the patient name. Click on the patient name and other options will pop up. Click "***Order History***" and the order history will populate like the above screens.

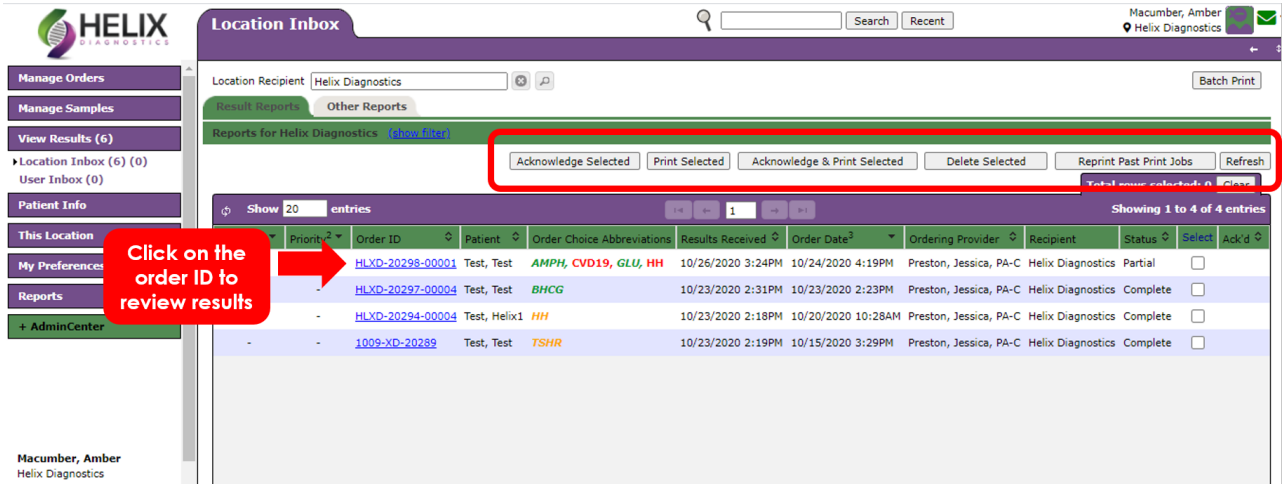


Section 8 Viewing Results - Inbox

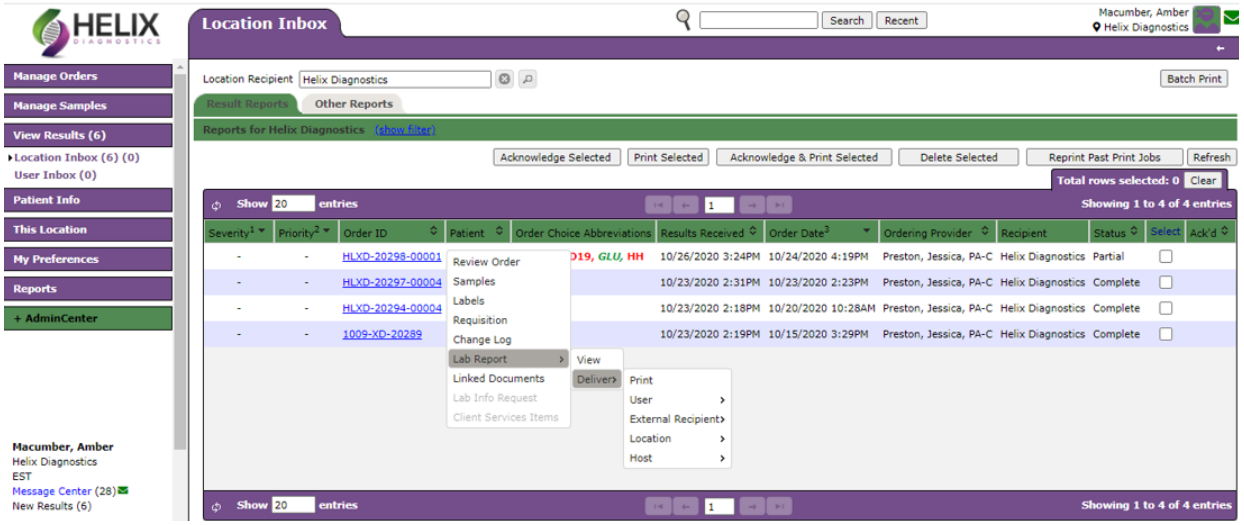
To view results in your inbox, on the left side of the screen click on "**View Results**."
You have the choice of **Location Inbox** or **User Inbox**. The user inbox is specific to the results ordered by the specific provider. The location inbox is all results ordered under that location.

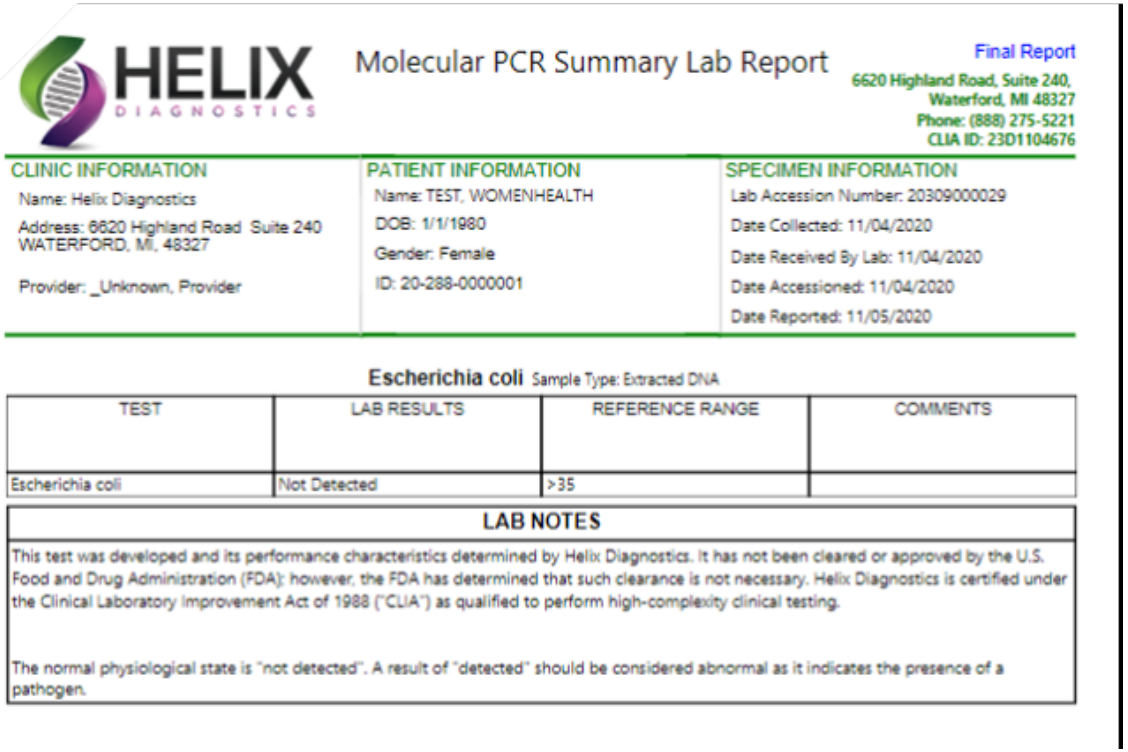


Click on the **Order ID** to review a result.
Once a result is reviewed/acknowledged it will no longer appear in the inbox but is still available under the specific patient. If you do not acknowledge the results your inbox will build up.



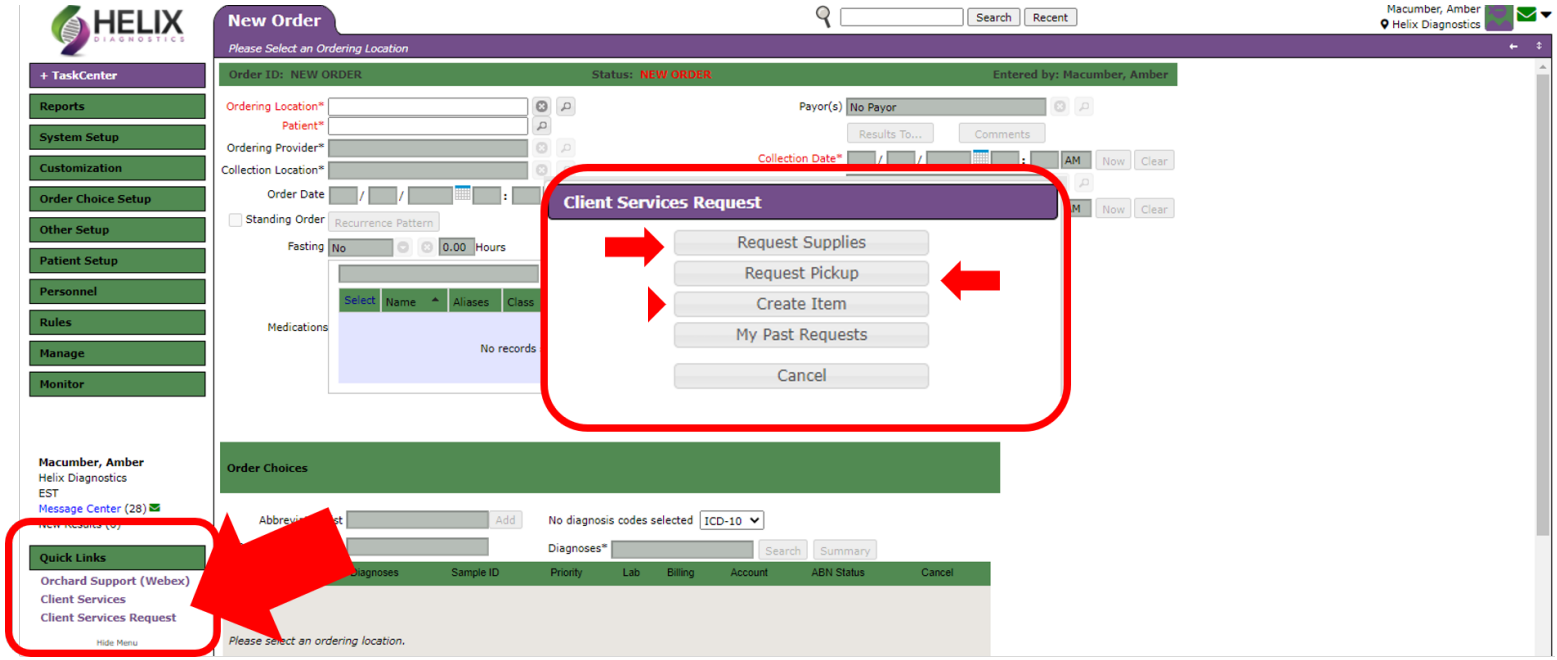
When you click on the **Order ID** you will be given more options. You have the ability to view the report, print the result, or even send to an external recipient.





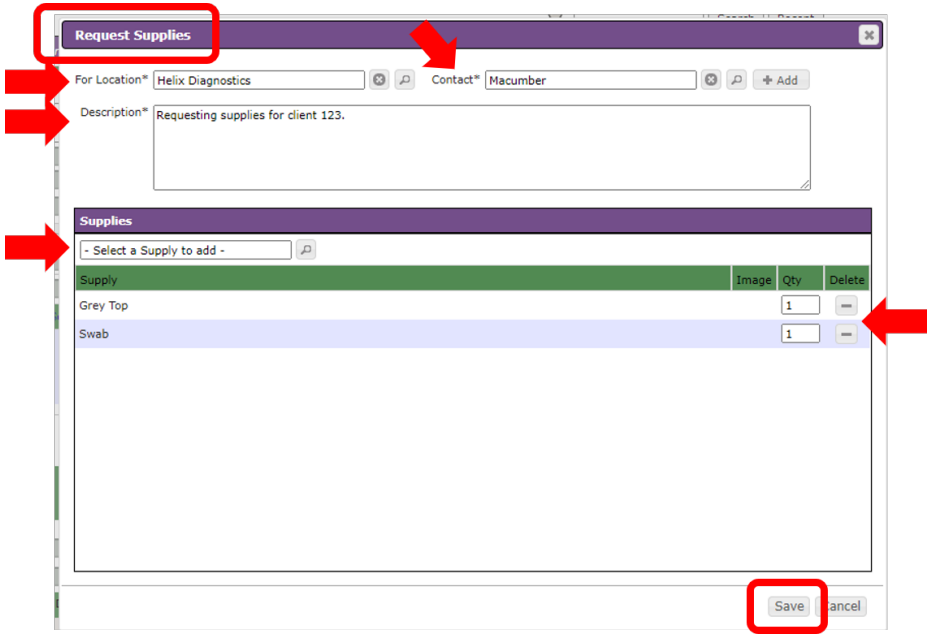
Example of a patient report

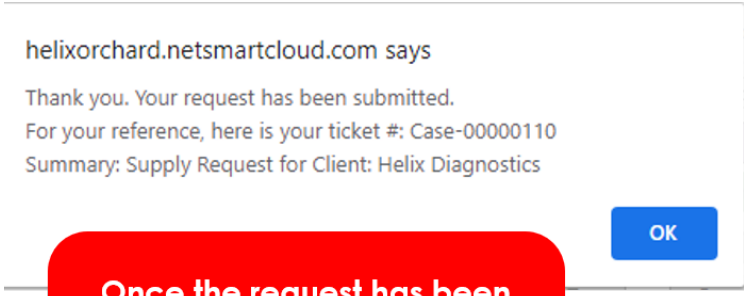
Section 9 Client Service Request



Copia also allows for you to input client service requests for supplies and pickups. This feature is located on the bottom left of your screen under "***Quick Links***." Click on "***Client Services Request***" and a box will pop up. You can click on "***Request Supplies***" or "***Request Pickup***."

Client Service Request - Supply Request

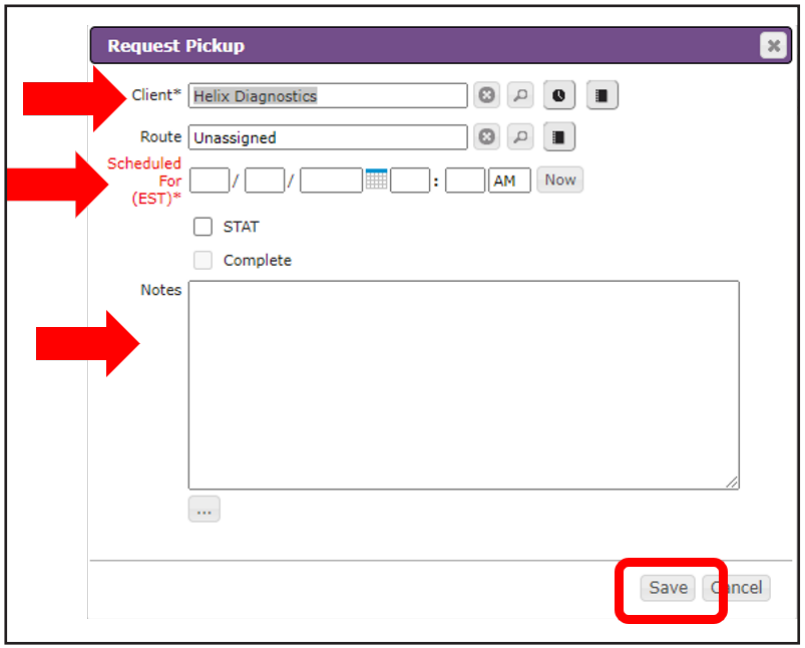




Once the request has been saved a message will pop-up displaying a summary of your request and a case number

Click on "***Request Supplies***." The box above will pop up. Items with an asteriks and highlighted in **red** are required. Choose your location and enter your name in the contact field. Search the supplies by typing in the name or once you click in the the search field a supply list will pop up. Click on the desired supply and then put in the quantity. In the description field you can type in notes about the order or if you do not see a supply type in this box. When done click "***Save***."

Client Service Request - Pickup Request



Click on "***Request Pickup***." The box to the left will pop up. Items with an asterik and in **red** are required. Choose your location choose the date and enter any notes needed. ***(ex. specimens in the box after 5pm")***

Click "***Save***"