

## NEW PA GUIDE

**CSA Orthopedics**

Patient Agreements Restock Status Billing Analytics

Search All Patient Agreements...

CSA Orthopedics

Help +

CLINICAL

- ⊕ Patient Agreement
- ⊕ Patient
- ⊕ Provider

PA List

**New Patient Agreement**

To start a New Patient Agreement from the main dashboard select:  
+ drop down in upper right nav bar and click + Patient Agreement  
**OR**  
Click New Patient Agreement button

← Patient Agreements

MOTIONMD Clinical Inventory HCPCS Codes Reports Admin

CSA Orthopedics

Help +

OfficeCare

New Patient Agreement for CSA Orthopedics

Missing 1 Requirement

✓ Clinic

✓ Patient

Validate the Account selected

Required fields are marked with an asterisk (\*)

Clinic Location \*

CSA Orthopedics (Main) OfficeCare

PA will be created for this location.

Set the Clinic location depending on where the product is dispensed. If not defaulted, click the drop down to the right to change Clinic

Provider

Type in Provider Name and select  
This is not a mandatory field and can be selected on the Patient

Select a Provider

Selecting New Patient Agreements will open this page

To change account, use the drop down to search and select account

Patient \*

Create New Patient

steve test

Search

To search for a patient, type in patient's name or MRN and click Search. A list of patient's will appear, select the correct patient from the list.

Select a patient from the results below:

Steve Test  
1982-02-02 (42 years old) - MRN 2345678

Patient \*

Create New Patient

Steve Test  
1982-02-02 (42 years old) - MRN 2345678

Remove

**⚠ Patient Agreement Already Exists**  
Found 1 recently created Patient Agreement for Steve Test.

View Patient

View Existing

To create a PA for this patient, click the Create Patient Agreement

**Create Patient Agreement**

If a PA exists for this patient from the last 90 days, an alert will appear. Click **View Patient** to go to the patient record page or View Existing to see the PAs and products dispensed

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**Create New Patient**

Required fields are marked with an asterisk (\*)

First name \* Middle initial Last name \*

First Name Initial Last Name

Gender Birthdate \*

Select Gender Month Day Year

MRN Email

Medical Record Number Email

You will be able to add additional patient information at a later time.

Close Create Patient

If the patient cannot be located searching by name or MRN, click **Create New Patient** button

A modal will open to add patient information. All asterisk fields are required

Click **Create Patient** button to save and create the new patient record

Create New Patient

**Steve Test**  
ID 115967  
CSA Orthopedics (Main)

Actions

Missing 6 Requirements

- ICD-10 Codes 0
- Products 0
- Payment Methods 0
- Signatures (0/2)

These icons will tally the number of Attachments and Notes added to the PA

Created on 01/16/25  
(Updated 01/16/25) by Cynthia Sever

After clicking Create Patient Agreement, the Patient Agreement page will open

Remaining requirements needed to complete the PA show in the grey sidebar. Hover over the 'i' to show missing requirements

- Doctor has not been chosen
- ICD-10 Diagnosis has not been chosen
- No payment methods have been added
- All products must have a billing channel set
- No products have been added
- All products must be valid

As the Patient Agreement sections are completed the section list in the sidebar will show a green check and a tally

This list is interactive, click on the section name and you will be quickly taken to that section of the PA

The Patient Demographics and Medical Information sections appear at the right

Click the Edit button and a modal will open to update any information

Patient Demographics

Name  
Steve Test

Gender  
Male

Birthdate  
1982-02-02 (42)

MRN  
2345678

Edit

Medical Information

Provider  
No Provider Set

Order Date  
-

Product Dispense Date  
-

Injury Date  
-

Surgery Date  
-

Length of Need  
-

Edit

Add Patient Signature

Add Provider Signature

PA is missing provider.

Set Provider

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**Diagnoses**

To add Diagnosis Code(s), start typing the ICD-10 into the field and select the correct option

Add Diagnoses - S93.41

S93.41 Sprain of calcaneofibular ligament

S93.411 Sprain of calcaneofibular ligament of right ankle

S93.411A Sprain of calcaneofibular ligament of right ankle, init

S93.411D Sprain of calcaneofibular ligament of right ankle, subs

**Products**

To add a Product, start typing the Name or SKU into the search box and click Search

Add Product - 01ef

Search

Displaying results that match "01ef" Clear Search

In Stock (1) Custom Products

Select the Product by clicking anywhere in the product section

Global  
AirSelect Standard  
DJO - Aircast • Ankle • DME

**Add AirSelect Standard**

Global  
AirSelect Standard  
DJO - Aircast • Ankle • DME

01EF-S Qty 1 Add Item(s)

01EF-M Qty 1 Add Item(s)

To change the quantity, click into the Qty box and adjust the number

Click the Add Item(s) button next to the correct Size to open the section on the right

**Inventory Items 1 Selected**

Add Selected Item(s)

To remove this item click the 'X'

**Select Options** Required fields are marked with an asterisk \*

All required fields are marked with an asterisk

01EF-M

Involved Side \* Left Right N/A

Self Pay/TOS \* No Yes

If item will be Self Pay, click the Yes button

Fulfill From Stock

\* Inventory Location 3 CSA Orthopedics (Main)

\* Billing Channel OfficeCare

Serial # Not Required

Value in pill shows the quantity on-hand of that SKU

Click Add Selected Item(s) at top or bottom of modal to add the item to the PA

Cancel Add Selected Item(s)

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Payment Methods

Add Payment Method

Primary  
Aetna (0000000000001) Import

Secondary  
Cigna (333333) Import

Integrated accounts can import the payor information onto the PA by clicking the Import button(s)

Non-integrated accounts are able to manually add payment methods by clicking the Add button

Add

Signatures (0/2)

To capture the patient's signature, click the Add Patient Signature button and select **Patient Signature**

Add Patient Signature ▾

Patient Signature

Attach AOB

Acceptance of Terms

**PATIENT ACKNOWLEDGEMENTS AND AUTHORIZATIONS:** By signing below, I authorize DJO, LLC, Surgi-Care, Inc., Ortho Pros Ex subsidiaries of Enovis Corporation (collectively known as "Enovis"), or the Contract Supplier (for Medicare beneficiaries only), to submit benefits payable by my insurer for such product(s) and services to Enovis or to the Contract Suppliers. It is my responsibility to notify coverages I have, as well as the order in which my insurer(s) should be billed. I authorize Enovis, or the Contract Supplier, to release the claim. I understand there is no guarantee of payment by my insurer. If my insurer fails to pay Enovis or the Contract Supplier in full, I agree to solely my responsibility to contact my insurer if I have any questions about my financial obligations for the product(s) and services provided to me by Enovis, its representatives, or the Contract Supplier is an ESTIMATE only. If litigation is instituted, I agree to pay reasonable attorney's fees, incurred by Enovis or the Contract Supplier. I also hereby grant permission to Enovis, its contract message, mobile phone, or phone to discuss my outstanding balance or to obtain additional information needed to submit a claim, after 8:00 a.m. and before 9:00 p.m. my local time), unless I indicate another time span in which to be contacted. If I wish Enovis, its communications with me via email, text message, mobile phone, or phone about my outstanding balance/debt, I understand I must Lake Vista Drive, Suite 200, Lewisville, TX 75067.

I also acknowledge and understand that Enovis or the Contract Supplier are the provider of the product(s) prescribed by my physician for the proper care, use, handling, safety, storage, and disposal of the product(s) that I have received. I understand I must contact my physician if I have been provided with access to and understand the Patient Bill of Rights and Responsibilities, the CMS Medicare Supplier Standard, given the patient manual, product warranty, package insert, return and exchange information about my product(s), as well as instructions for use.

In the Acceptance of Terms modal, if the person signing the PA is not the patient, have them choose their Relationship to the patient and type their name into the Guarantor name field

If the patient is signing, have them select Self and their name will auto-populate as Guarantor

Patient can select the method of delivery of their copy of the PA

Patient will click I Accept these terms button to open signature canvas

Patient Name: Steve Test

Language  
English Español

Relationship to Patient (Required)  
Choose Relationship ▾

Guarantor name (Required)  
Guarantor name

Send a copy of the Agreement? (Required)  
Yes, email it. No, print it. No, thanks.

Cancel I accept these terms

Add Provider Signature ▾

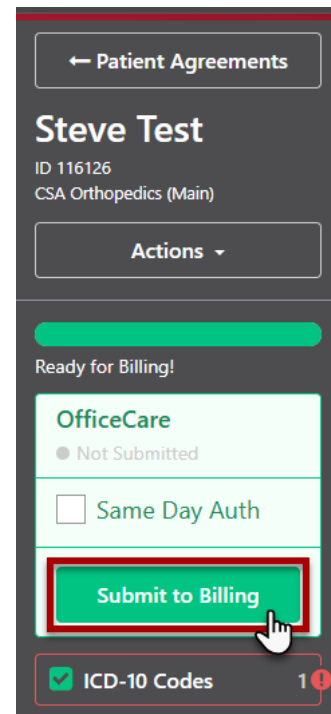
Provider Signature

Attach Script

If provider is signing within the PA page, have them click Add Provider Signature button and select Provider Signature to open the signature canvas to sign

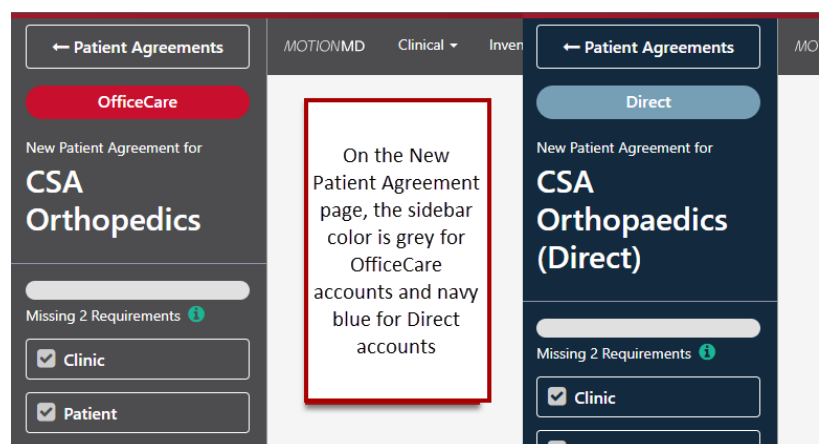
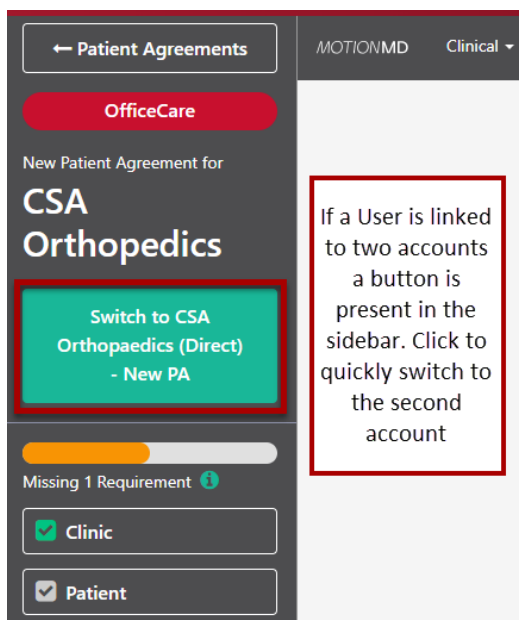
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Once all Billing Requirements are met on the Patient Agreement, the progress bar will show Green and the Submit to Billing button will appear on the sidebar to select.



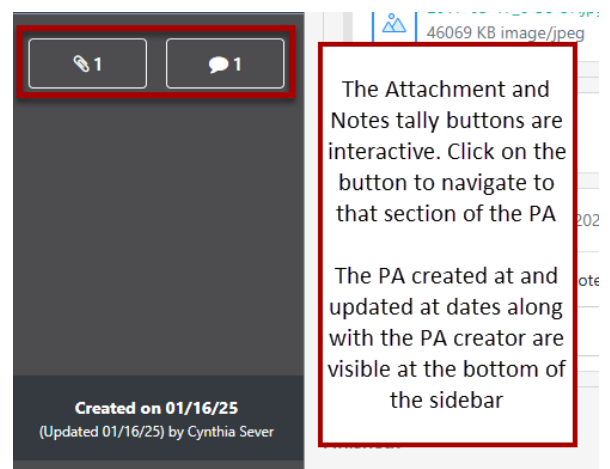
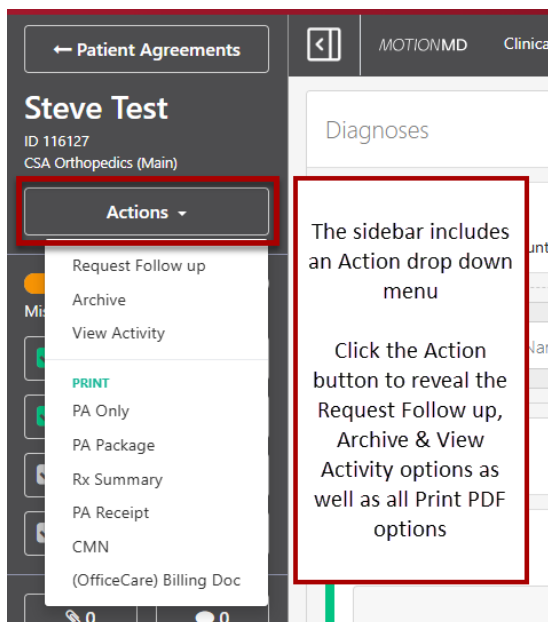
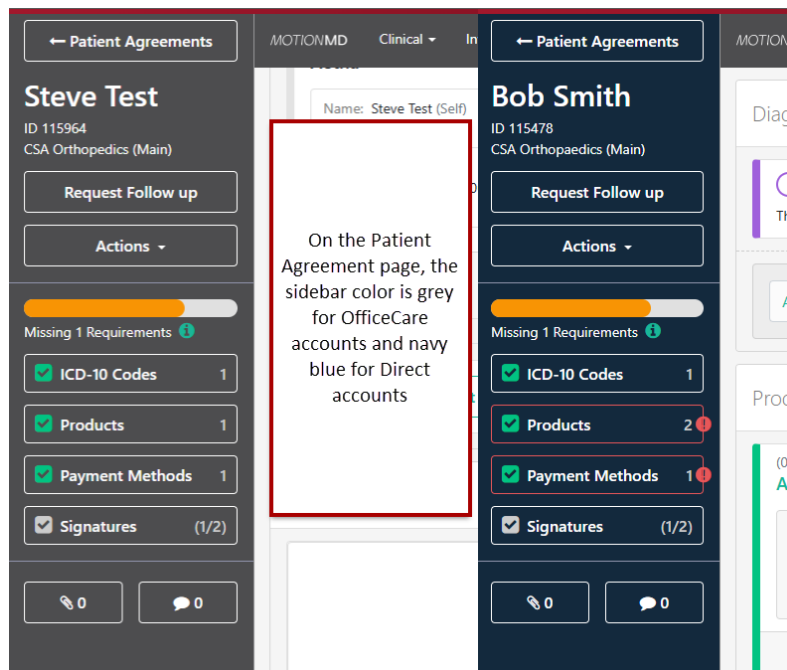
### Additional Features:

On the New Patient Agreement page:



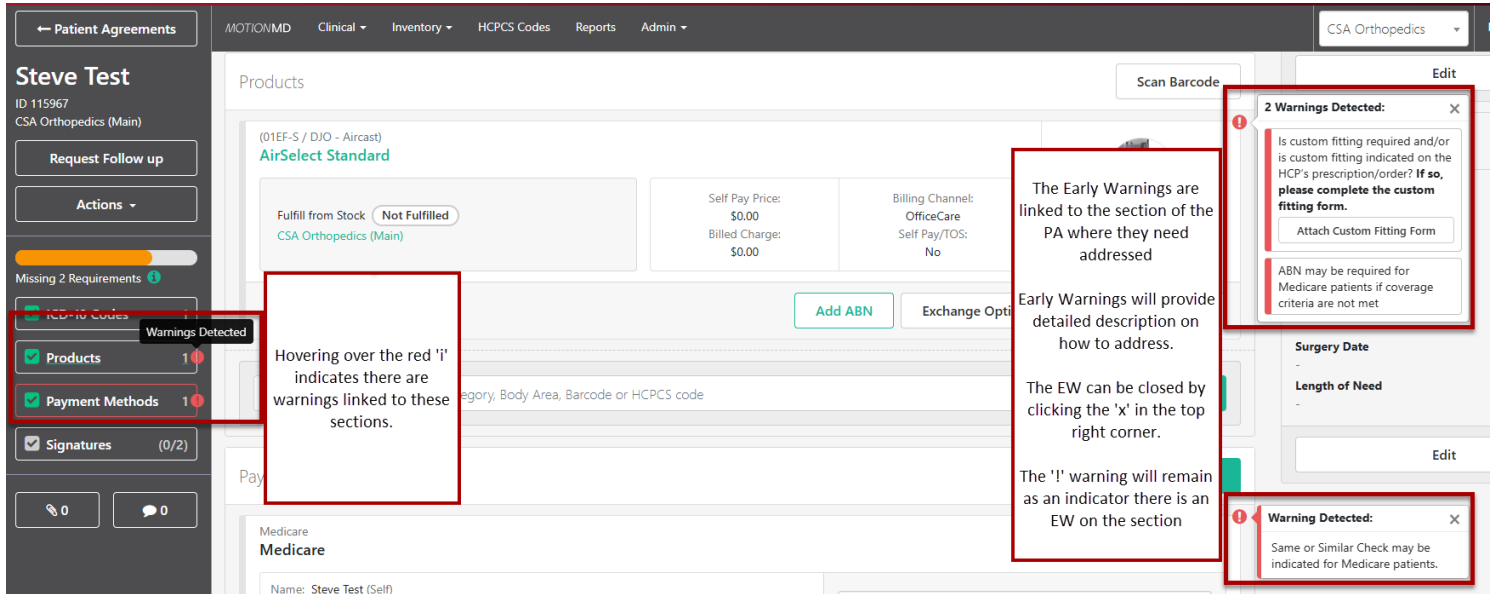
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On the Patient Agreement page:



## NEW PA GUIDE

On the Patient Agreement Page (continued):



**Steve Test**  
ID 115967  
CSA Orthopedics (Main)

**Products**  
(01EF-S / DJO - Aircast)  
**AirSelect Standard**

Fulfill from Stock: **Not Fulfilled**  
CSA Orthopedics (Main)

Self Pay Price: \$0.00  
Billed Charge: \$0.00

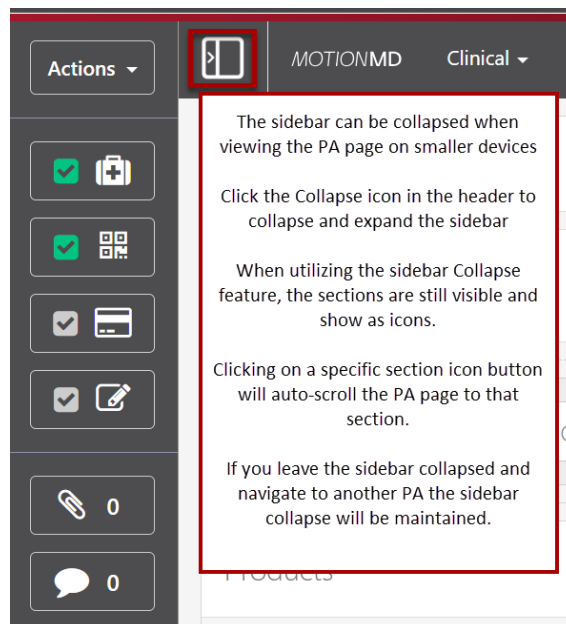
Billing Channel: OfficeCare  
Self Pay/TOS: No

**Warnings Detected:**

- 2 Warnings Detected:
  - Is custom fitting required and/or is custom fitting indicated on the HCP's prescription/order? **If so, please complete the custom fitting form.**
    - Attach Custom Fitting Form
  - ABN may be required for Medicare patients if coverage criteria are not met
- Warning Detected:
  - Same or Similar Check may be indicated for Medicare patients.

**Early Warnings** are linked to the section of the PA where they need addressed. Early Warnings will provide detailed description on how to address. The EW can be closed by clicking the 'x' in the top right corner. The '!' warning will remain as an indicator there is an EW on the section.

Hovering over the red '!' indicates there are warnings linked to these sections.



**Actions**

**Collapse Icon**

The sidebar can be collapsed when viewing the PA page on smaller devices.

Click the Collapse icon in the header to collapse and expand the sidebar.

When utilizing the sidebar Collapse feature, the sections are still visible and show as icons.

Clicking on a specific section icon button will auto-scroll the PA page to that section.

If you leave the sidebar collapsed and navigate to another PA the sidebar collapse will be maintained.