FAQ: Diagnosis for EverHealth Scribe

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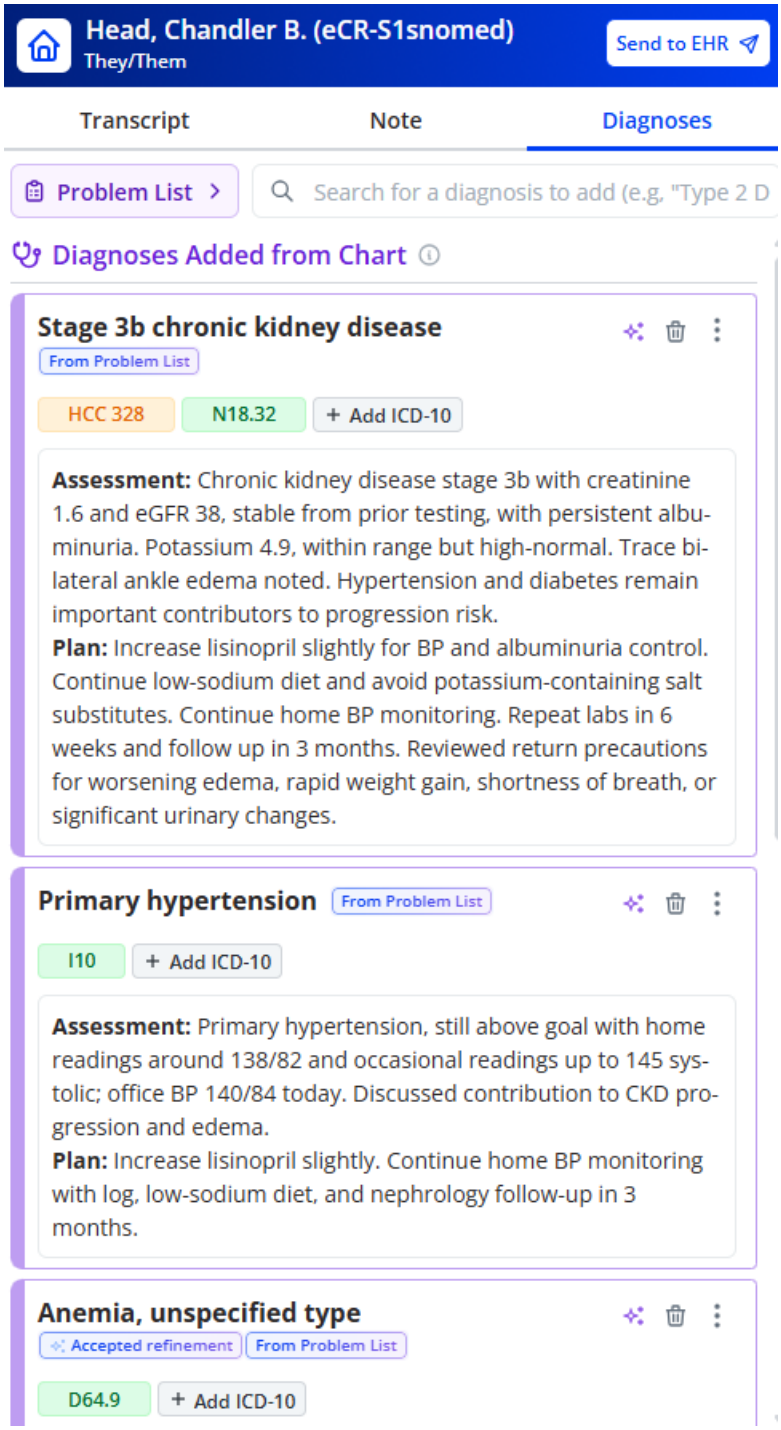
> Everything on the **Diagnoses** tab is a draft you can add to, refine, or remove. One **Send to EHR** writes it to the Problem List, from which OfficeEMR carries it to the Superbill.

Answers to the diagnosis-side questions providers ask most: diagnoses that are missing or extra, codes that look wrong, how refinements work, and how diagnoses reach the Problem List and the Superbill.

Quick fixes

What you're seeing	Try this
A condition I addressed isn't on the Diagnoses tab	Add it from the search field at the top of the tab. Type the condition or the code. If it should have been caught from the conversation, a thumbs-down flags it for the Scribe team.
There's a diagnosis I didn't address	Use the remove action on that card. A condition mentioned in passing is not one you managed, and it should not go to the Problem List or the claim.
The code attached to a diagnosis looks wrong	Remove the code and attach the right one with **+ Add ICD-10**. If a more specific version exists, check **Refine** first.
The diagnosis is too vague	Select **Refine** on the card, read the reasoning, and select **Adjust** if your documentation supports the more specific version.
I don't see **Refine** on a card	Scribe didn't find a more specific version the visit supports. Attach codes yourself with **+ Add ICD-10**.
The diagnoses didn't reach the Problem List after Send to EHR	If the chart was already open before you sent, refresh it by selecting the patient from the **Office Schedule** again. The first-sign-in demos never write back, so record a real or test appointment from your OfficeEMR schedule.
The note and the Diagnoses tab don't agree	They're drawn from the same visit, so correct whichever is wrong and check both before sending.



Frequently asked questions

How does Scribe decide which diagnoses to list?

From the visit. Scribe uses the transcript to work out which conditions you actually addressed, then separates them into conditions already on the patient's Problem List, marked **From Problem List**, and new conditions it is proposing from the conversation.

What does the From Problem List chip mean?

That the condition is already on this patient's Problem List and you addressed it during this encounter. A card without the chip is a new problem Scribe is suggesting, which will be added to the Problem List if you send it.

Do diagnoses go to the Superbill?

Yes. **Send to EHR** writes the approved diagnoses to the patient's Problem List, and OfficeEMR's existing behavior

carries Problem List items through to the day's Superbill as the encounter's diagnosis codes. There is nothing extra to do in Scribe or in OfficeEMR.

Does Scribe enter my procedure codes and charges?
No. Scribe supplies the encounter's diagnoses. Orders, Medications, and the procedure and charge side of the Superbill are still entered the way you do today.

What are the HCC chips?
They show the risk-adjustment category a coded condition maps to (Hierarchical Condition Category). They are informational. They don't change what is billed, and they are not a prompt to code beyond what your documentation supports. They make the effect of specificity visible.

Will a refinement change my diagnosis automatically?
No. A refinement is a suggestion and nothing changes until you select **Adjust**. See Refining a Diagnosis in EverHealth Scribe.

Why is a refinement suggesting a link between two conditions?
Because it found language in the note connecting them. The suggestion shows you the reasoning and quotes what it relied on, so you can judge whether the documentation truly establishes that relationship. If it doesn't, don't select **Adjust**. A causal code needs a documented cause.

I dismissed the "Draft suggestions only" message. Did that change anything?
Only the banner. **Don't show again** hides the reminder. Refinements still wait on **Adjust**, and you remain responsible for reviewing every diagnosis and code before signing.

Can I fix a diagnosis after it reaches the chart?
Yes. Diagnoses that reach the Problem List are editable in OfficeEMR like any other Problem List entry, and you can correct them before you sign off.

Can I try the diagnosis flow without a real patient?
Yes. Add a test patient to the provider's schedule in OfficeEMR and record that appointment. That runs the complete path, including **Send to EHR** and the write to the Problem List. The first-sign-in demos (**Practice Visit** and **Sample Note**) are in-app only and never write back.

Am I responsible for the codes Scribe attaches?
Yes. Scribe drafts, but you are the author of record for the note and the codes. Review every diagnosis and code for clinical correctness and coding compliance before signing. Specificity should follow your documentation, never lead it.

> **You own the note and the codes.** EverHealth Scribe creates a draft, including the coded diagnoses. Always review and edit before you sign. Give particular attention to specificity you can support, causal relationships the description claims, laterality, and acute versus chronic. See Using EverHealth Scribe Safely.

Still stuck? Submit a support ticket at support@isalushealthcare.com and include what you were doing, the patient or appointment involved, and whether you were on the browser extension or the mobile app.