CUSTOMER ONBOARDING

A calm first day for every care team.

A practical, no-PHI guide to moving from questionnaire to a confident Care Axis workspace.

What this packet covers

Your package, the onboarding path, the first-day product tour, documents and billing, transportation follow-up, Voice Scribe boundaries, and the launch handoff.

Synthetic/no-PHI edition

Use fictional names, dates, addresses, documents, and payments during demonstrations and training. Real patient or billing data belongs only in an accepted, tenant-scoped production workspace.

Care Axis

One platform. Specialized packages for every practice model.

01 | YOUR FIRST DAY

From questionnaire to workspace

Care Axis turns your answers into a reviewed scope, a clear launch plan, and a workspace your team can learn in one sitting.

Stage	Owner	What happens
1. Questionnaire	Customer	Choose a package, locations, users, document needs, referral partners, transportation needs, and billing contact. Keep public intake no-PHI.
2. Scope and quote	Care Axis	Review assumptions, exclusions, modules, implementation, migration, support, and billing recipient. Approve a written proposal.
3. Tenant launch	Care Axis	Provision the isolated tenant, roles, entitlements, templates, retention, support path, and release evidence.
4. Orientation	Customer admin	Accept invitations, verify role access, complete a synthetic case, and confirm the next-action queue.
5. Go-live	Both	Record acceptance, confirm invoice/receipt, schedule the seven-day review, and move real work only after launch gates pass.

Your package

Every customer starts with a shared operating core and a vertical package. Optional modules are enabled only when the approved quote and signed license include them.

Package	Designed for
PI360	Personal-injury clinics, case managers, and lawyer coordination
DPC360	Membership-first primary care operations
Practice360	Cash-pay, insurance, hybrid, and multi-specialty teams
Ortho360	Orthopedic groups and ASC-aligned operations
Pain360	Pain clinics and interdisciplinary teams

02 | THE PRODUCT TOUR

The five-minute flow

Start with what needs attention, then follow one synthetic case through the work your team performs every day.

Step	Show	The habit to teach
1	Home and worklists	Every item has an owner, due date, status, and next action.
2	Patient and case	Use the timeline and linked actions instead of private messages or memory.
3	Scheduling and rides	Keep transportation visible until scheduled, confirmed, or escalated.
4	Tasks and reminders	Write a specific action and close it only after recording the result.
5	Documents and add-ons	Complete structured fields first; preview and verify before saving.
6	Referrals and portals	Share only the scoped view and assign the next action.
7	Billing and support	Use the Care Axis portal for invoices and the named support path for help.

Transportation worklist

For every ride, record requested time, pickup/drop-off, vendor, confirmation number, status, owner, and follow-up time. Unscheduled patients remain visible until closed.

Voice Scribe

Enable only after consent, retention, access, and human-review rules are configured. Review and correct every draft; Voice Scribe never auto-signs a clinical note or replaces clinician judgment.

03 | DOCUMENTS

Make recurring packets easier

Guided document add-ons keep source files, structured fields, and prepared output together. The same workflow supports summary bills, affiliate billing statements, cover sheets, affidavits, referral packets, and custom templates.

Affiliate billing statement example

[ ] Open Documents -> Add document.

[ ] Choose Affiliate billing statement.

[ ] Enter the synthetic provider and one or more imaging/procedure rows.

[ ] Add diagnosis and CPT codes, cost per area, and number of areas.

[ ] Confirm the calculated total and remove any incorrect row.

[ ] Attach or prepare the source document, preview it, verify recipient and case, then save.

Verification habit

A saved document is not complete until its title, document date, recipient, patient/case link, source attachment, and calculated totals are correct.

Billing and invoice handoff

Check	Confirm before sending
Customer	Legal customer and intended billing contact are correct.
Scope	Package, quantities, implementation, recurring fees, discounts, tax, currency, and due date match the approved proposal.
Account	The invoice is attached to the correct Care Axis account and payment destination.
Privacy	No PHI, credentials, internal notes, or unrelated tenant information appears.
Status	Payment, receipt, overdue, or refund state is visible in the billing portal.

04 | HANDOFF

The launch checklist

The customer admin and Care Axis operator sign off together. A build passing is not the same as a tenant being accepted.

First login and orientation

Use the tenant-specific invitation link sent by Care Axis, create a unique password, and complete MFA before opening patient work. Use the public product tour and onboarding packet for orientation only; never use the synthetic demo for real customer data.

Customer admin

[ ] Accept invitation and complete password/MFA setup.

[ ] Verify each user and role with a synthetic case.

[ ] Complete one synthetic intake -> task -> document -> referral workflow.

[ ] Confirm transportation status and open-work queues.

[ ] Review invoice/receipt, support contact, retention boundary, and Voice Scribe review boundary.

Care Axis operator

[ ] Confirm isolated tenant, release identifier, domains, roles, entitlements, templates, and retention.

[ ] Verify required configuration without exposing secret values.

[ ] Run smoke checks for sign-in, tenant routing, documents, tasks, transportation, and portal visibility.

[ ] Record release-scoped acceptance evidence for all six domains.

[ ] Schedule the seven-day review and record escalation ownership.

Stop conditions

Do not declare go-live if PHI is present in public/demo data, a shared password is used, tenant isolation or role checks fail, the billing recipient is ambiguous, document behavior is untested, Voice Scribe is auto-signing, or the six-domain acceptance is not passed.

05 | ACCEPTANCE

Six domains, one accountable release

The authorized reviewer records Old UI, New UI, and Result for each domain using synthetic data. Submit in order and retest any failed row in the same release.

Domain	Minimum evidence
Clinical	Synthetic chart, timeline, encounter context, and draft-note linkage.
Scheduling	Appointment plus transportation owner, follow-up, and persistent status.
Billing	Synthetic billing context, new worklist visibility, and account separation.
Documents	Guided add-on, structured rows, calculated total, preview, and save.
Referrals	Scoped partner visibility, next action, and synchronized status.
Administration	Role boundaries, audit/accountability visibility, logout, and session behavior.

Evidence format

Old UI: [what was visible and tested].
New UI: [what was visible and tested].
Result: [pass/fail, synthetic data used, and any follow-up].

Release gate

The server-side validator must report: [PASS] exact canonical six-domain matrix passed for current release. A green website, build, or public demo does not substitute for authenticated acceptance evidence.

Support

When something is unclear, record the screen, action, timestamp, release, and synthetic reproduction steps. Do not work around a failed gate with real data.