

TIERED ROLLOUT IN THREE RELEASE PERIODS JUNE 13, 22 & 29

SUMMER 2023 STRENGTHENING OUR FOUNDATION FOR YOUR PRODUCTIVITY.

Provider List View: Check-in Enhancements

Claim Status 277 Download

Unsolicited Claim Attachments

Patient Chart Layout Upgrade

Medication Card Filters

Patient Forms in the Clinical App

PRACTICE MANGEMENT

Provider List View: Check-in Enhancements

Perform appointment actions directly from the Provider List View. Previously, this was available in Check In Appointments. This enhancement can speed up your process of changing appointment statuses. In addition, you can perform these actions in our EHR.

Claim Status 277 Download

In Claim Status Inquiry, you can now view the 277 EDI file sent from payors. This allows you to review valuable information and efficiently work A/R faster.

Unsolicited Claim Attachments

You can now attach documents to claims. You can send clinical notes, images, labs, and diagnostics to carriers directly, which saves a significant amount of time and work. You can attach documents from all Charge Entry and Edit screens by importing, scanning, and selecting documents from Chart Files. Deliverability status is displayed for easier workflow within the Claim Attachments screen.

Solicited Claim Attachments by Fax & Mail

You can send requested documents to carriers for denied claims by fax or mail. These include EOBs and appeals. You can attach documents from all Charge Entry and Edit screens by importing, scanning, and selecting documents from Chart Files. The status of all attachments is now available making it easier to track within the Claim Attachments screen.

Reorganization of the Race and Ethnicity Codes

To match the federal standard core set, frequently used race and ethnicity codes are now visible at the top of the list. The extended detailed list of values follows in alphabetical order to improve productivity when entering patient demographics.

Preferred Language Codes Set

The list of values for Patient Preferred Language has been updated to the federal standard ISO 639.2 Codes for the representation of names of languages. This new list includes a larger number of individual languages you can see here: <u>IISO 639-2 Language Code List – Codes for the representation of names of languages (Library of Congress)</u> (loc.gov).

New Support Manager Role for Case Management

Those using our Central Billing Office (CBO) feature for multiple office keys now have a new role for managing support cases through Case Management. Previously, there were two roles: support contacts had access to cases created by themselves. Admin contacts could access everything on all keys. The new support manager role lets you view and manage all cases including those created by others, but only for the subset of office keys you have permissions for. This new role adds flexibility for larger practices to better manage support cases.

PM BETA Features

Simplified Provider Setup: Tax ID and Bill as Setup

We have improved the setup and configuration of Provider IDs and Carrier ID exceptions. Claims can be billed more accurately based on your credentialling needs. You can set start and end dates, have multiple exceptions, and see historic and future exceptions. This enhancement makes it clearer which IDs are included on claims.

Payor Contractual Reimbursement Tracking

The write-off calculation on all payment screens has been enhanced and includes ERAs, making it easier to ensure you are receiving expected payments. You can control how the write-off is calculated, either by allowed amount or by expected amount.

Credit Card on File Worklists

We are releasing new Credit Card on File worklists to simplify the patient payment process. It's now easier to manage expiring cards, work declined payments, track contact attempts, and schedule follow-up calls. Prioritized tasks can now be assigned to staff for more efficient administrative workflow.

ERA Center

We have redesigned our eRemittance Review and Details screens to give a more streamlined and efficient experience. You can search, review, and post multiple payments faster.

Fee Schedule Import

Fee Schedule import is more intuitive and lets you create new Fee Schedules faster. You can assign charges by provider type. Claims can be billed with different amounts for the same service based on provider level. Fee Schedules can be imported directly from Excel or CSV files.

Payer EDI Agreement Gateway

Our new Payor Gateway makes your EDI enrollment process faster and easier, improving time to collections. You can create, submit, and track the status of enrollments for claims, remittance, and eligibility natively within our practice management. Easily manage enrollments without visiting third-party websites or deal with dozens of emails. New Patient Self-scheduling and Patient Intake Enhancements

Patient Chart Layout Upgrade

Our modern patient chart framework lets you choose a dynamic or fixed card layout. The new fixed layout keeps the patient cards in a consistent location on the chart. Quickly find key clinical information as you move from patient to patient.

Medication Card Filters

Medication filters have been enhanced to filter by a preset or custom date, by provider, or by status. Filter and view all new denied refilled requests in the patient medication card. This allows you to view a specific set of prescriptions relevant to the patient.

Set Destination Pharmacy for Multiple Medications

While prescribing multiple medications, you can now edit the destination pharmacy with one choice. Save time by updating all medications in one step.

Auto-Calculate of Days and Units

We have enhanced the calculations that help while prescribing. Days now precedes quantity on the form, so you can specify the number of days for the medication and auto-calculate quantity based on frequency. For medications dispensed in specific packaging, entering days autocalculates the number of packages and the quantity. If the quantity is updated manually, a new recalculate icon allows you to reset the value.

Send Medications for Multiple Patients from Dashboard

You can now send multiple non-controlled medications for multiple patients from the Prescriptions donut on our dashboard. Electronic Prior Authorization (ePA) and patient notifications are now available from the dashboard confirm screen. Automatically request prior auth when needed or manually request prior auth for the selected medications. Enabling patient notifications when prescribing improves medication adherence and drug education.

Prescription Printing for Multiple Patients

You can now print multiple prescriptions for multiple patients when accessing the confirm screen from the dashboard.

Visibility of Denied Renewal Requests

Denied renewal requests are now visible in the patient medication list, saving you time from running reports or searching multiple screens. New filters allow you to see only denied requests in the medication card.

Printed Current Medication List

The printed medication list has been reformatted and includes

practice information and patient allergies. Medications in the report are reformatted to a more professional look for sending to other clinicians and for clarity.

Medication Card Style Updates

To increase visibility of 'other provider' and 'record-only' prescriptions, we have added shading. Denied renewal requests now display in red in the pharmacy column with a notification banner that offers more detail. The info icon displays the reason for denial.

Medication Card Opens from Multiple Locations

We have updated various locations in the patient chart that opened legacy ePrescribing to now open the new medication card.

CQR: Sub-Group Reporting

To support the new MIPS Value Pathways program (MVP), our Clinical Quality Reporting (CQR) lets you report eCQM quality measures to CMS QPP as a sub-group. Sub-groups lets group practices collect a dedicated set of measures and activities related to a given specialty or medical condition.

EHR BETA Feature

New Flowsheet Card

We are adding a new flowsheet card for faster access to clinical information in an easy-to-read format. Chart and graph clinical data to monitor patient progress over time. Improve quality of care with a clear and concise overview of your patient data. Capture new observations directly in the card, simplifying data entry.

MOBILE

Patient Forms in the Clinical App

You now have full access to patient forms in our clinical app. Assign, review, and accept forms right in your workflow without switching between two separate apps. Functionality previously available in the front office app is now available in our flagship clinical app.

Patient Preferred Name in the Kiosk App

Patients can add and edit preferred name through our patient kiosk app.

