Release 24.122 - November 14th, 2024

Last Modified on 11/13/2024 3:33 pm EST

Executive Summary

Company Settings
New Setting to Default Alternate Provider to Rendering Provider
Release Note | Documentation

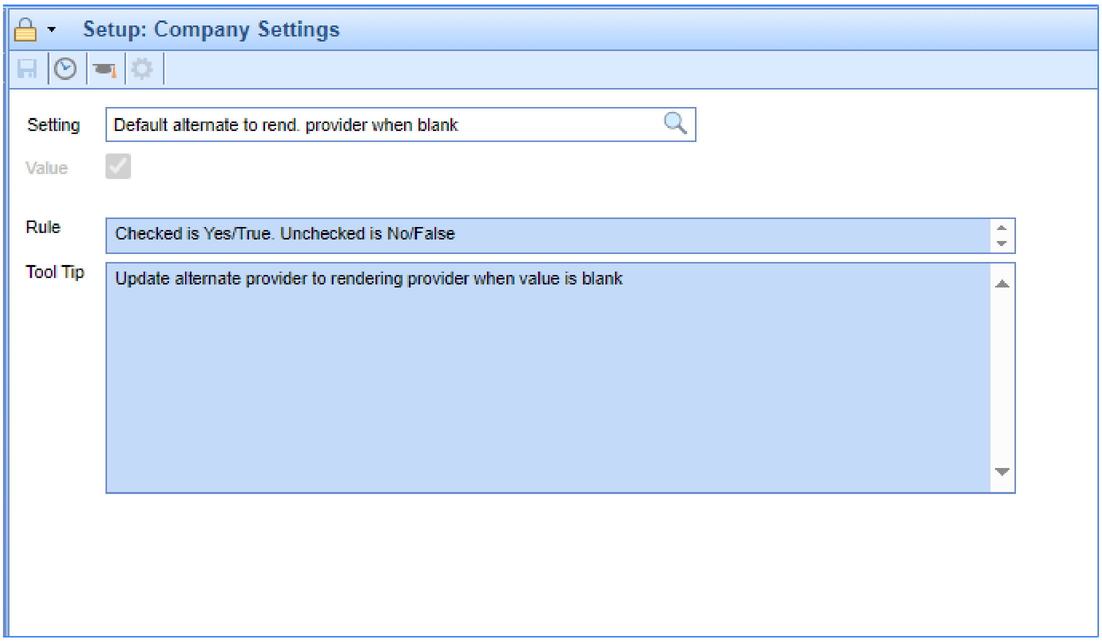
Check In/Out Dashboard
Patient Demographics Labels Color Update
Release Note
Global Search Now Maintains Search Data On The Filtered Search
Release Note

New Features and Updates

Setup

Company Settings

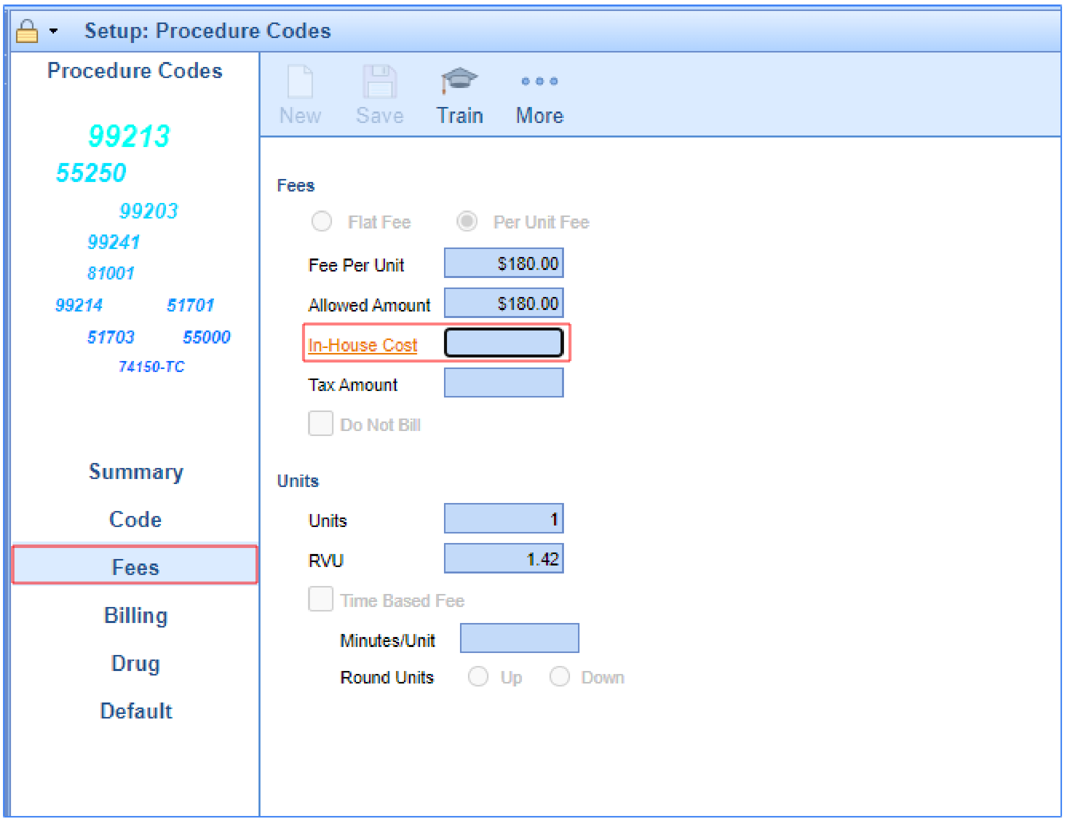
- U18244 - New Company Setting To Default Alternate Provider to Rendering Provider: A new company setting within **Setup > Administrative Settings > Company Settings** has been created to automatically set the Alternate Provider to the Rendering provider when creating or updating a claim. When set, Company Setting: "*Default alternate to rend. provider when blank*" will default the Alternate Provider to the Rendering Provider if the Alternate Provider field is left blank.



Reports

Billing Analytics

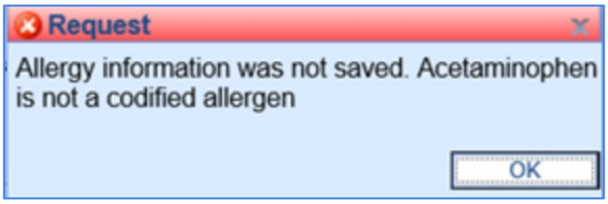
- U18701 - Procedure In-House Cost Added to Billing Analytics Cube: Added a new in-house cost column to the Billing Analytics Cube to allow totaling of the In-House Cost. The In-House Cost amount is extracted from the Procedure Code field on the claim, specifically, the In-House Cost field located on the Fees tab of the Procedure Code Setup Screen.



EMR

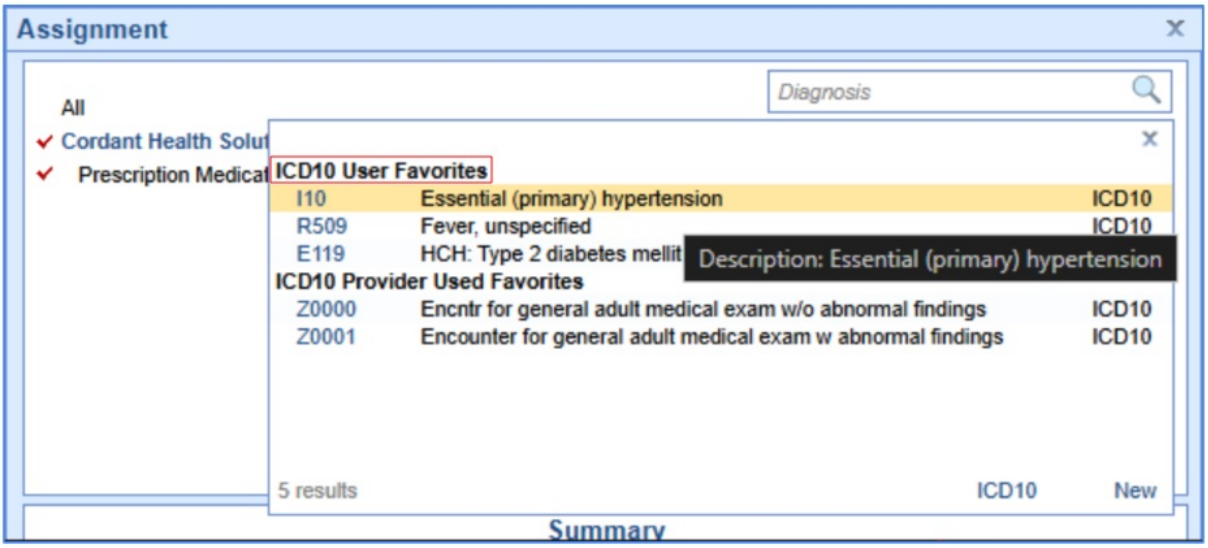
Patient

- U10148 - Associate Non-Codified Allergies Being Entered via Intelligent Intake: When the company setting 'EMR Codified Allergy Required' is enabled and the user uses the Reconciliation Clipboard icon on the patient Timeline Summary to merge allergens, the database generates an error when the patient provides a non-codified allergy via the intake process.



To effectively handle this issue, we implemented a change where if the company setting 'EMR Codified Allergy Required' is turned on and the user attempts to select "Save", a Codify Allergen(s) window will pop up if any of the allergens are set to be codified. This window allows the user to manually associate each allergen with one in the codified list, or to choose not to add them instead.

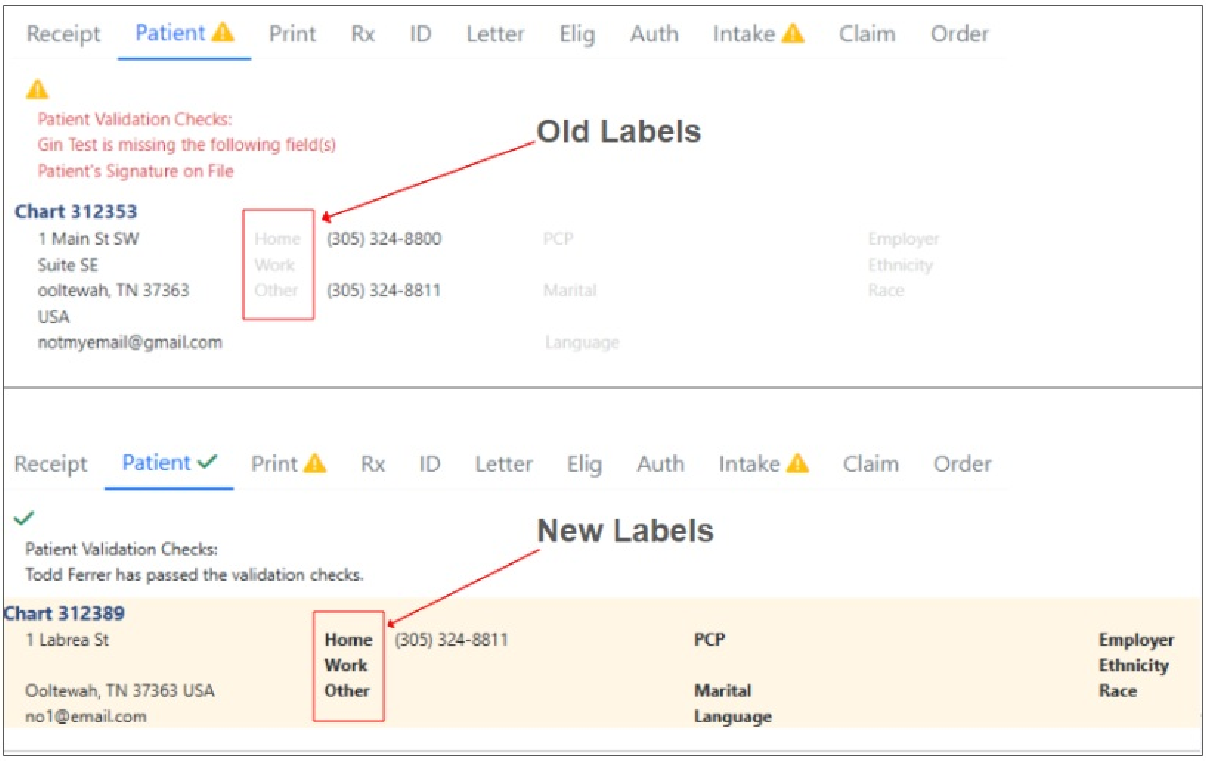
- U18818 - User Favorites added to search results categories: Expanded our functionality of the problem list *User Favorites* by modifying the Diagnosis Code search results to include the *User Favorites* list within **EMR** > **Order Entry** and **EMR** > **Superbill** > **Lookup**.



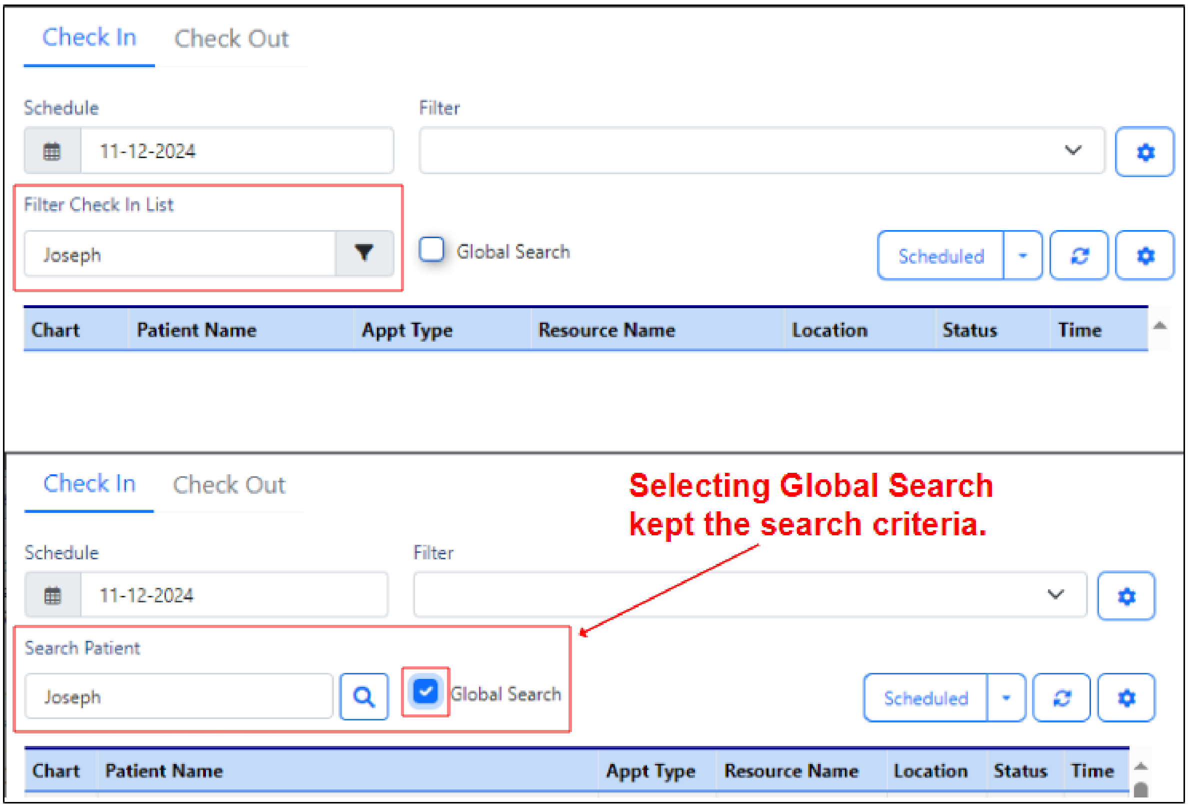
iScheduler

Check In/Out Dashboard

- U18804 - Check In/Out Patient Demographics Labels Color Change: We made an update to the Check In/Out Dashboard's demographics section by modifying the font color of the labels. This was done because users were finding it difficult to read the labels. To make the labels more visible, we have set them to be black in color and have also made them bold. This ensures the labels stand out clearly next to the formatted data.



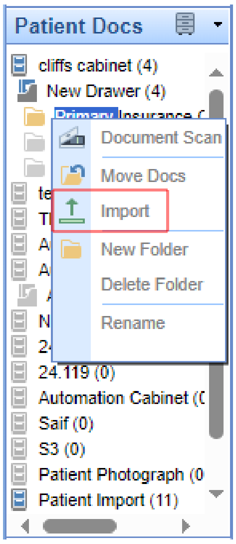
- U18805 - Updated Check In/Out Global Search To Maintain Search Data On The Filtered Search: In the Check In/Out dashboard, we updated the Patient Search field to preserve the search criteria that the user has entered when they select the Global Search option. However, when the user unchecks the Global Search option, the Patient Search field will now be cleared.



eDocuments

Import

- U18863 - eDocuments Save Verification: We have updated the eDocuments Import and Scan functionality to verify that the image file exists and contains data. If these conditions are not met, the user will receive an error message. This will ensure that all documents can be displayed, guaranteeing that documents are successfully imported and saved.

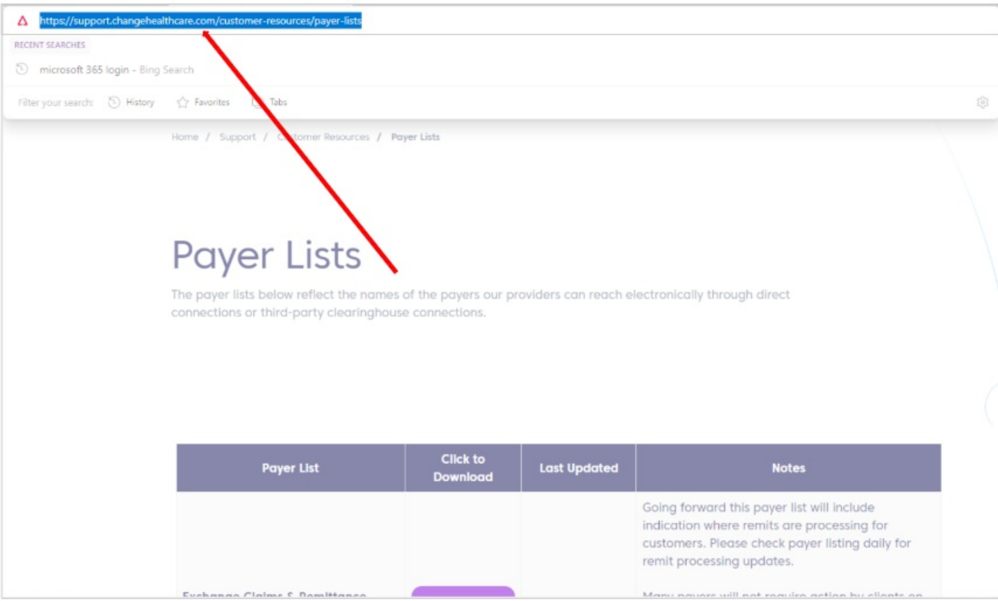


Bug Fixes

Setup

Payers

- B18833 - Update To The Clearinghouse Payers Link: Updated the "*Clearinghouse Payers*" link within **Setup** > **Payers** > **More** and in **Billing** > **Web Searches** to the updated URL https://support.changehealthcare.com/customer-resources/payer-lists.



iScheduler

Appointment Entry

- B18507 - Authorization Selection Using Current Date instead Of Appointment Date: Corrected an issue within iScheduler where scheduling an appointment and linking an authorization would use the current date to display active authorizations instead of the appointment date. We have modified this so the authorization list uses the scheduled date to generate a valid authorization list.

Patient Setup

- B18648 - Patient Balance Displaying Red Font For Outstanding Balances: Within the Patient Setup screen, the patient's outstanding balance was displayed in red when they had an unpaid balance. This contrasts with the Patient Transaction History screen, where the outstanding balance is shown in black, and only credits are displayed in red. To ensure consistency, we have modified the **Patient Setup** > **Summary** Tab to display the outstanding balance in black.

Intelligent Intake

- B11847 - Encoding Error When Apostrophes Are Entered Via Safari: Corrected an issue that was causing apostrophes entered in Safari to not be encoded properly. This resulted in "???" being displayed in the database whenever an apostrophe (') was entered on the intake form or any other area where we accept data input via Safari. We have fixed this issue so that the typographic apostrophe used in Safari will now be replaced with a standard apostrophe in the database.

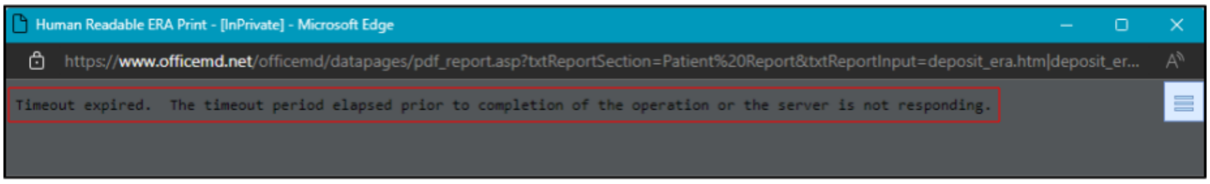
Billing

Deposits

- B18708 - Different Amounts Shown between the Posted Paid and Total Posting For Deposits PDF: Resolved an issue that was causing a customer to display a different deposit payment total within the Deposit Details screen, than the payment total shown when generating a PDF. We updated the function that supports the printed PDF to align with the function we use to retrieve payments on the posting total window so that the deposits match between the two.

- B18792 - Deposit Payment Exceeding the Claim Charge Resulting Claim Being Flipped to "Refund Status": Corrected an issue where, when a deposit paid amount exceeded the claim charge amount and a positive adjustment was added to the deposit to offset the claim balance, the calculation during the deposit posting still set the claim to a Refund status, even though the claim did not have an actual credit. We updated the code to calculate an estimated claim balance before the user submits the information for posting. Previously, we were handling the credit/flip logic on an individual payment line basis. Now, we can view the overall claim balance across all payment lines and determine if a refund or credit needs to be processed.

- B18736 - Printing Human Readable ERA Timing Out: Corrected an issue within the Deposits window that resulted in a particular customer experiencing a timeout error when printing the human-readable Electronic Remittance Advices (ERAs).


Human Readable ERA Print - [InPrivate] - Microsoft Edge
https://www.officemd.net/officemd/datapages/pdf_report.asp?txtReportSection=Patient%20Report&txtReportInput=deposit_era.htm|deposit_er...
Timeout expired. The timeout period elapsed prior to completion of the operation or the server is not responding.