

Enhanced Windows 8 compatibility

Compatibility with the latest Windows version has been improved: various minor UI inconsistencies observed with Internet Explorer 10 are addressed; all features available in Billing, in Client, and on the web site can be used without issues.

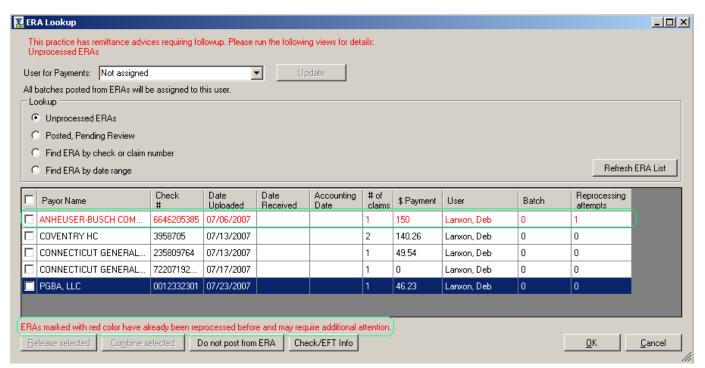
ERA auto-posting changes

- Adjustments will now be auto-posted for non-primary (secondary) payers.
- ERA auto-posting process is now enhanced by an additional match-up table allowing fewer unprocessed ERAs caused by unrecognized payer IDs.
- ERAs with payments belonging to several practices will not be processed automatically.

Additional ERA markup

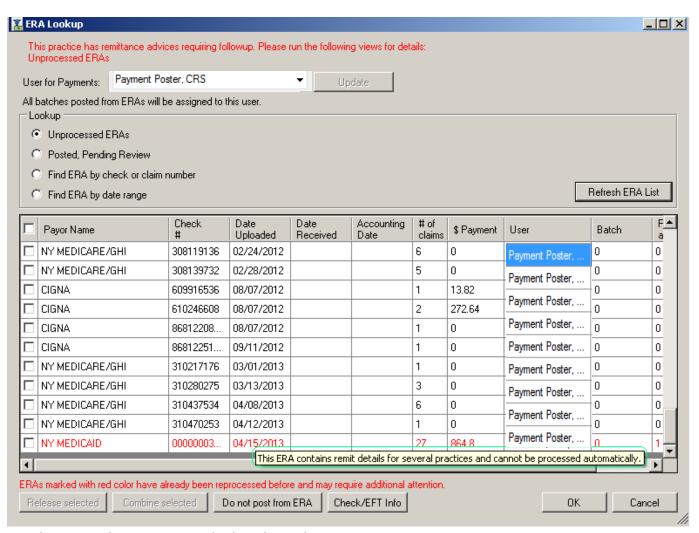
ERAs that may require additional attention will now be noted in the ERA Lookup table:

- Reprocessing attempts counter is now available for every ERA. ERAs that failed to be reprocessed will be noted with red text:





- ERAs containing payments from several practices will be marked up by red text color and will produce a pop-up note when a mouse cursor is hovered over such ERA:



The same changes are applied to the web site:

Edit	NY MEDICARE/GHI	310133380	02/18/2013	3	\$0.00 Ipa		t <u>ERA</u> sted <u>Detai</u>	Select Claims	0	Reprocess
Edit	NY MEDICARE/GHI	310217176	03/01/2013	1	\$0.00 Ipa		t <u>ERA</u> sted <u>Detai</u>	Select Claims	0	Reprocess
Edit	NY MEDICARE/GHI	310280275	03/13/2013	3	\$0.00 I _{Pa}	yment No	t <u>ERA</u> sted <u>Detai</u>	Select Claims	0	Reprocess
Edit	NY MEDICARE/GHI	<u>310393116</u>	03/29/2013	3	\$0.00 I _{Pa}	yment No	t <u>ERA</u> sted <u>Detai</u>	Select Claims	0	Reprocess
Edit	NY MEDICARE/GHI	<u>310401365</u>	04/01/2013	1	\$0.00 lpa	yment No	t <u>ERA</u> sted <u>Detai</u>	Select Claims	0	Reprocess
Edit	NY MEDICARE/GHI	<u>310437534</u>	04/08/2013	6	\$0.00 Ipa	yment No	t <u>ERA</u> sted <u>Detai</u>	Select Claims	0	Reprocess
Edit	NY MEDICARE/GHI	310470253	04/12/2013	1	\$0.00 Ipa	yment No	t <u>ERA</u> sted <u>Detai</u>	Select Claims	0	Reprocess
Edit	NY MEDICAID	000000037179297	04/15/2013 This FRA contains	27	\$864.80 lo		t <u>ERA</u> sted <u>Detai</u>	Select Claims	1	
This ERA contains remit details for several practices and ERAs marked with red color have already been reprocessed to cannot be processed automatically.										

Payments and ERA data access

Payments, batches and ERAs will now be accessible for the currently selected practice only.

CMS field 9d to report the last used primary insurance

CMS field 9d (Other Ins Plan) now reports the last **primary** insurance to which the claim was billed to, if any.

Ability to move money to unapplied for a patient debtor while posting ERAs

Patient debtor is now available for the **Move Payment to Unapplied** transaction on the **ERA Details** screen to allow processing patient overpayments correctly when posting ERAs.

Ability to add Patient Responsible transactions for ERAs without the need to post the ERA claim manually

Patient Responsible transactions can now be added to any **Posted, Pending Review ERA**.

Posting of **Patient Responsible** transactions is enabled when a cell corresponding to a service line is selected in the **new Pt. Resp. column**.

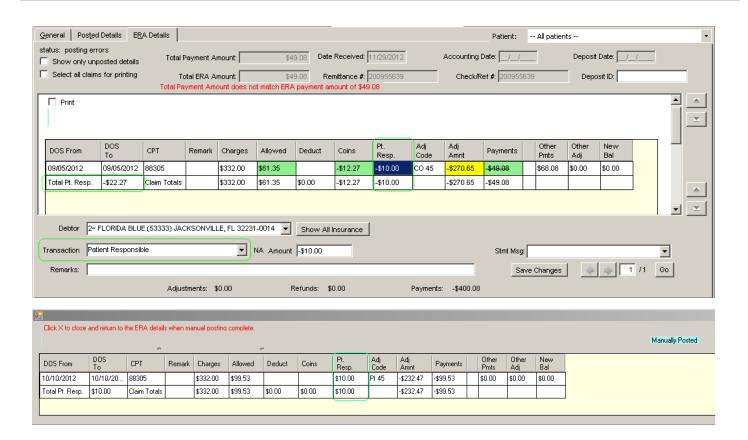
The **Pt. Resp.** column reflects only transactions **added by users**, it does not include Patient Responsible transactions originally present in the ERA.

Total Pt. Resp. cell, however, calculates patient responsible totals for **combined** ERA Patient Responsible transactions and Patient Responsible transactions added by users.

Patient Responsible transactions are subject to the existing posting rules and will appear in Posted Details, on printouts and in the ERA Details table when an ERA is re-opened.





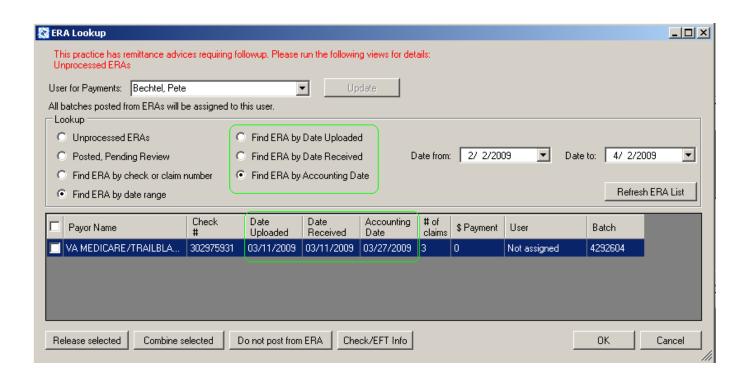


Search ERAs by Accounting Date, by Date Received, and by Date Uploaded

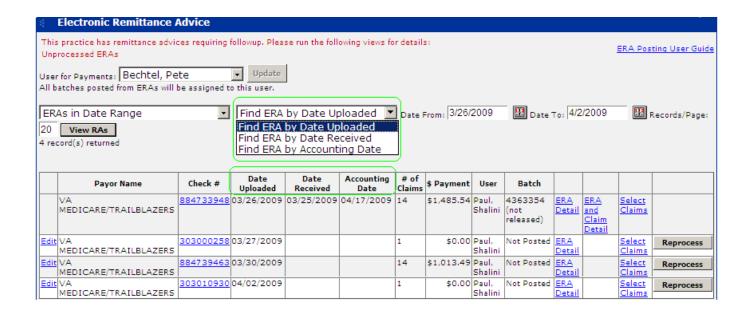
New search options are now available on the ERA lookup screen.

The **Find ERAs by date range** option now allows searching by three different types of dates: **Date Uploaded**, **Date Received**, and **Accounting Date**.

The three dates will also be added to the search results table as additional columns.



Updates to ERA lookup will also be available on the **web site** for the **EDI Payments** page.



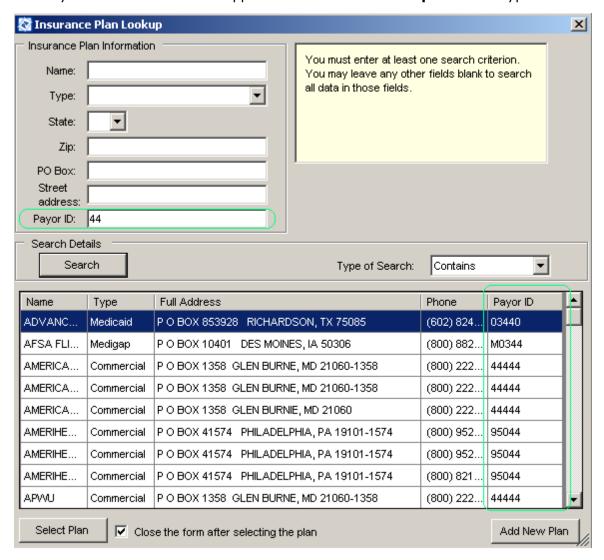


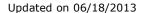
Search insurance plans by Payer ID

The Insurance Plan Lookup window now allows searching insurance plans by payer ID.

Payer ID of insurance plans listed in search results will be displayed in an additional Payor ID column.

The Payor ID search filter will support both **Contains** and **Equal** search types.







Insurance type None is no longer available

The insurance type None is now removed from the list of available insurance types for Insurance Plan Details screen in Billing.

For the existing insurance plans with the None type no changes are made but, the insurances can no longer be re-saved with the type None when edited.

Additional information printed on Patient Demographics

Additional fields are now printed along with the basic information on the **Patient Demographic** printout:

- Ethnicity
- Race
- Language
- Needs Interpreter
- Military Veteran



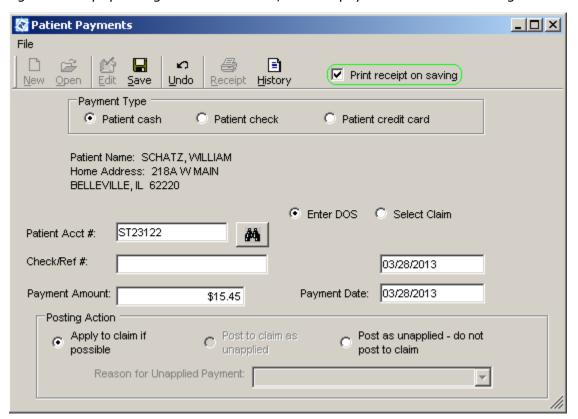


Receipt printing changes

Payment receipts can now be printed via the **Print Receipt** option for a patient payment **only** after the payment itself is saved.

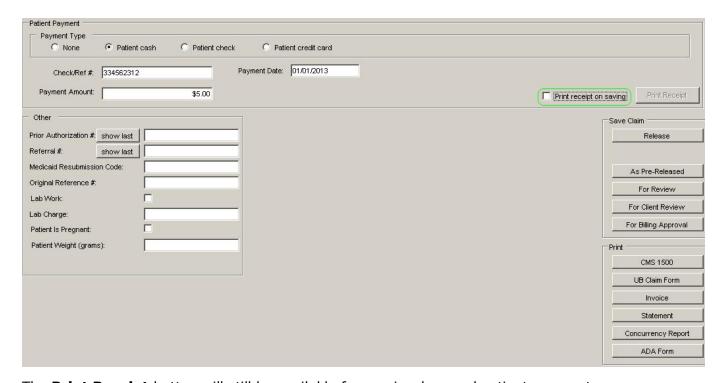
A new option is now available for the **Patient Payments** screen and for **Claim - Final** screen: **Print Receipt on Saving**.

When enabled, this option will produce a receipt printing dialog when a payment is saved (**Patient Payments**) or a claim is released (**Claim - Final**) without the need to load the saved payment again. Receipt printing can be cancelled, but the payment will be saved regardless.





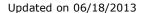
Updated on 06/18/2013



The **Print Receipt** button will still be available for previously saved patient payments.

Patient payments associated with a claim on the **Claim - Final** screen will no longer be available for editing.

The name of the user who had printed the payment receipt will now be available on the receipt printout.





PATIENT RECEIPT and INVOICE

PA DEMO ACCOUNT 3512 HARRIS AVE ST LOUIS, MO 63116 Phone: (245) 624-6246 x5246

Tax ID:

Guarantor:

JENNIFER SCHELLINGBURGER 123 ANYWHERE DR. WAIKIKI, HI 12345 Patient: JENNIFER SCHELLINGBURGER Account Number: ST23096 Date Printed: 04/01/2013 Printed By: Doe, John

For billing questions, call (245) 624-6246 x5246. Patient Balance: -\$10.00 Payment Received: \$10.00 Payment Date: 4/1/2013

Payment Type: cash Payment Check/Ref#: Date of Service: 04/01/2013

Patient Transaction History available from the Patient Payments screen

A new **History** button will be available on the **Patient Payments** screen to provide access to patient's transaction history. The **Patient Transaction History** screen opened from the Patient Payments window will allow switching between the Patient Payments and Patient Transaction History screens.

The modified Patient Transaction History screen will retain much of the original functionality, except for the following:

- The modified **Patient Transaction History** window will display transactions **only** for the patient currently loaded on the Patient Payments screen.
- The **Go to Claim**, **Go to Patient**, **Go to Payment**, **patient selection controls** and the **ability to open the Claim Transaction Details screen** by double-clicking on a claim in the main Transaction History table will not be available.



Updated on 06/18/2013

Patient and claim **notes**, **HCFA view** of the selected claim, **statements** view, transaction history report printing, and the **Force Next Statement** option will be available along with all filtering options not related to switching the current patient.

The modified Patient Transaction History will rely on the Patient Payments screen to define a patient whose transaction history should be displayed.

Transaction history tables will be empty if the Patient Transaction History screen is opened with **no patient selected** on the Patient Payments form; transaction history tables will be filled automatically after a patient is loaded on the Patient Payments screen.

The modified Patient Transaction History will be automatically closed when the Patient Payments screen is closed.

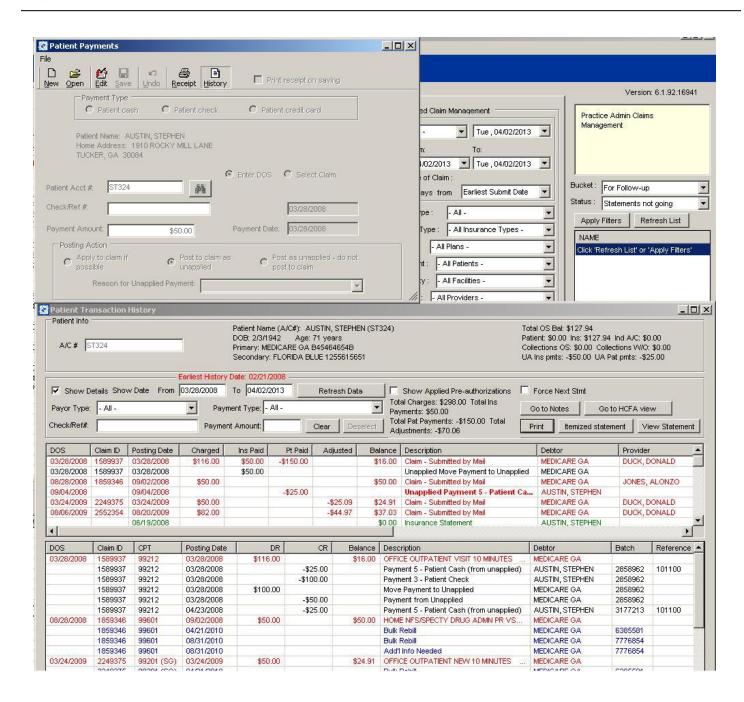
The Transaction History window will always be displayed with the **Details** option enabled by default when accessed from the Patient Payments screen.

Payments posted while the Transaction History window is opened **will not** appear in the history tables **automatically**, a manual refresh will be required to see changes.

All changes are only applied to the Transaction History window available from the Patient Payments screen; the original Patient Transaction History available from other screens will remain the same.



Updated on 06/18/2013

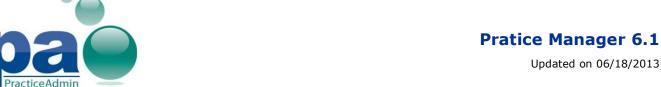






Fixed issues

- 1. An issue when a random insurance plan belonging to a patient may be reported in **CMS field 9d** (**Other Ins Plan**) for non-primary claims is now addressed.
- An issue when the users were unable to uncheck the Send Pre-Collection Letters option if the Switch Past Due accounts to Pre-Collection letters automatically option was enabled is now addressed.
- 3. An issue when claims saved with insurance payers with type **None** produced an error when processing is now addressed.
- 4. An issue when scheduling-only providers were included in the referring Providers list on the Claim-General screen is now addressed.
- 5. An issue when the patient's date of birth may be shifted one day back when performing patient search is now addressed.
- 6. An issue when an incorrect icon was displayed for Billing application in Windows taskbar is now addressed.
- 7. An issue when tabulation order may be incorrect on the **Workers Compensation** tab of the **Patient** screen is now addressed.
- 8. An issue when a state ZIP code could be printed incorrectly on an UB-04 form is now addressed.
- 9. An issue when an incorrect provider could be picked for a batch eligibility request is now addressed.
- 10. An issue when a payment could be 'lost' after combining batches is now addressed.
- 11. An issue when an incorrect Date Received could be assigned to a payment for practices using the last day of the current month as a cut-off date is now addressed.
- 12. An issue when an incorrect data could be displayed in the Last Diagnoses list for patients with unprocessed claims is now addressed.
- 13. An issue when the Location value could be displayed incorrectly for claims with multiple service lines on the Claim Details screen is now addressed.



- 14. An issue when incorrectly formatted POS (place of service) codes could cause EDI rejections is now addressed.
- 15. An issue when an incorrect user could be assigned to an ERA after reprocessing is now addressed.
- 16. An issue when an incorrect user could be assigned for payment details processed after saving a Posted, Pending Review ERA is now addressed.
- 17. An issue when Patient Search was limited to patients belonging to the current practice only is now addressed.



New Patient Statements report

A new **Patient Statements** report is available in *Billing*. The report presents a total number of statements sent for each patient along with details on every created statement and the patient's balance.

The report can be run for Practice Total, for each facility, and for individual facilities for a set date range.

Each report row represents patient's balance sent in a statement taking into account the facility filter - only balances for the selected facility will appear in the results if the report is run for an individual facility.

Statements on demand are not included in the statement count, but will still appear in the results. Information about the patients' next statements will also be reported, if available.

New Active Insurances report

A new report is available in Billing: **Active Insurances**. The report provides the list of all insurances currently active for the practice along with basic information on the listed insurances.

Insurance balance in the Pre-Collections Completed report

Insurance balances transferred to collections are now reported in the Pre-Collections Completed report in the corresponding column (Insurance Balance), separately from the patient balance.

Totals are available for both Insurance Balance and Patient Balance columns.

Combined Report v.4 update

Each report section will now begin on a separate page when printing via the **Print** button.

Open in Excel feature is not affected.

Fixed issues

- 1. An issue with the Claims by DOS/Accounting Date with CPT Detail report not allowing wildcards for CPTs longer than 4 symbols is now addressed.
- 2. An issue when the **Charge Masters** report could provide incorrect override values due to rounding is now addressed.

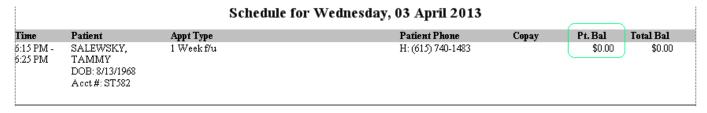
Extended information on Patient balance in Appointment Details

The right part of the patient details area is now rearranged to include the patient part of the outstanding balance information.

Copay details split by insurance rank can now be reviewed by moving the mouse cursor over the exclamation mark in the Copay cell.



Patient part of the total outstanding balance is now reported separately on the **Schedule** printout.



New column available in the Appointment List by Patient report

The **Mobile Phone** column is now present in the list of available additional columns for the **Appointment List by Patient** report. The column will not be displayed in the report by default; it will be present in the list of available columns available via the **Change Columns** button.

Editing appointment notes via the Appointment List by Patient report

Appointment notes can now be edited directly from the Reports screen without the need to open individual appointments in Scheduling. This ability is also available on the web site.

The existing Appointment Notes window available via the **Appointment List by Patient**, **Unbilled Appointments** and the **Patient Registration form** reports now allows editing and saving appointment notes.

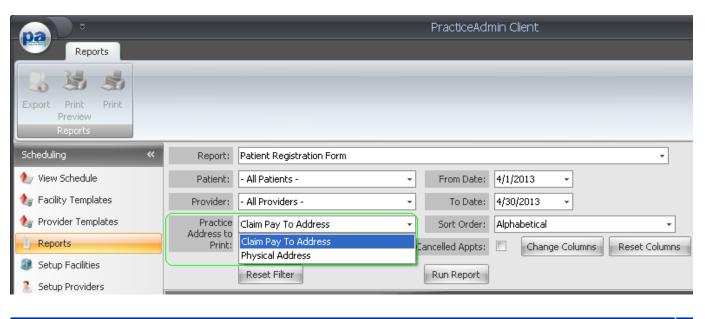


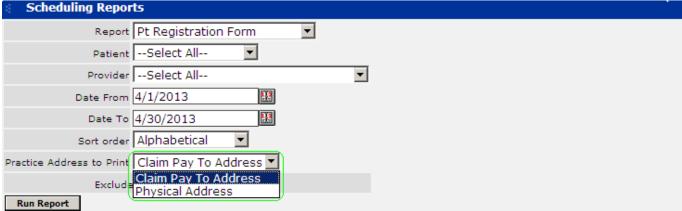
On the web site, an additional column with editing links is now available for editing appointment notes for the same set of reports. (Appointment List by Patient, Unbilled Appointments and the Patient Registration form)

	Patient Name	Acct Number	<u>Date/Time</u>	<u>Provider</u>	<u>Facility</u>	Appt Type	Appt Notes	<u>Status</u>
Edit	BUCCI, ROBERT M	AN1211	4/5/2013 11:30 AM	NELSON, A SUSAN	A SUSAN NELSON ARNP, INC (689)	90805 (30 Min & Med Mgmt)	6 months.	Pending
Edit	TALLEY, MADISON M	AN2388	4/12/2013 2:00 PM	NELSON, A SUSAN	A SUSAN NELSON ARNP, INC (689)	90805 (30 Min & Med Mgmt)	6 months	Pending
<u>Edit</u>	BOLEY HANLON, LESLIE	AN15	4/15/2013 2:00 PM	NELSON, A SUSAN	A SUSAN NELSON ARNP, INC (689)	90805 (30 Min & Med Mgmt)	6 months Pt getting married.	Pending
Update Cancel	SACCAVINO, LAUREN	AN1110	4/17/2013 7:00 AM	NELSON, A SUSAN	A SUSAN NELSON ARNP, INC (689)	90804 (30 Min)	Another appointment note.	Pending
Edit	BUYERS, DAVID	AN1434	4/24/2013 2:00 PM	NELSON, A SUSAN	A SUSAN NELSON ARNP, INC (689)	90805 (30 Min & Med Mgmt)	6 months	Pending
<u>Edit</u>	PINDER, THERESA	AN2203	4/26/2013 9:00 AM	NELSON, A SUSAN	A SUSAN NELSON ARNP, INC (689)	90805 (30 Min & Med Mgmt)	6 month	Pending
Edit	MULLANEY, RENATE	AN740	4/29/2013 11:30 AM	NELSON, A SUSAN	A SUSAN NELSON ARNP, INC (689)	90805 (30 Min & Med Mgmt)	6 months	Pending

Option to print physical practice address on the patient registration form

An option to print either practice's **physical address** or the **Claim Pay To** address is now available in the **Patient Registration Form** report in Client and on the web site.





New column in the Eligibility Results report: Eligibility type

A new column has been added to the Eligibility results report in Client: Eligibility Type. The column reflects the type of a request:

- Batch corresponds to a scheduled batch eligibility request
- **Real-Time** corresponds to an eligibility request made on-demand

Fixed Issues

1. An issue when appointments were not displayed on the View Schedule screen is certain cases is now addressed.

- 2. An issue when the eligibility service always returned Processing Error if the Client's time was different from the server's time is now addressed.
- 3. An issue when appointment statuses would not be updated for the remaining occurrences of a recurring appointment when changing its status to Cancelled is now addressed.
- 4. An issue when encounter forms could be printed without images when using the Print All Forms option is now addressed.
- 5. Client's desktop icons are now displayed correctly when using any standard desktop icon size.
- 6. An issue when the Eligibility Result icon was not updated after the eligibility result is received is now addressed.
- 7. An issue when Referral Source could be printed partially when printing encounter forms is now addressed.



Option to allow Pre-Released claims data in the Show Last selection

A new option is available on the **Setup** - **General** page on the web site: **Allow Pre-released** claims for **Show Last buttons**.

The option provides control over data which can be used for the **Show Last** buttons in Billing.

If the option is enabled, claims saved to any of the **pre-released** statuses will be accounted when the **Show Last** button is pressed, otherwise only fully released claims will be taken into account.

The following **Show Last** buttons are affected:

- The **Show Last** button for the last used **referring provider**, Claim General screen
- The **Show Last** button for the last used **relevant dates**, **Current:** date, Claim General screen
- The **Show Last** button for the last used **hospitalization dates**, Claim Details screen

CC E-mails to Manager	CC Manager
Practice Manager E-mail	asnphd@bellsouth.ne
EDI Claims E-mail	asnphd@bellsouth.ne
EDI Payments E-mail	asnphd@bellsouth.ne
Billing Inquiries Phone #	(772) 692-3140
Prompt when pmt posting for low pay reason?	Do not calculate allowed amounts
Do Not Calculate Charges	
Set new claims to hold	
Allow submission of \$0 balance claims	┍
Show Ref Prov and PCP on pt form	┍
Include flag for emergency services	
Default Number of Diagnoses to Show	4 -
Allow Employment-Related Claims for Primary Insurance	
Allow Sending Claims to EDI as Voided	┍
Local Coverage Determinations	Do not check
Allow Printing Additional Diagnosis Codes on CMS-1500	
Allow pre-released claims for Show Last buttons	

PA Web Site v6.1





XLS format for Fee Schedule import and export

Overrides for allowable schedules and charge masters can now be imported as an Excel table (XLS) without the need to save it to CSV. The XLS support effectively eliminates import errors related to special symbols (for example, delimiters like commas, dots, or semicolons)

Import of CSV files is still possible.

Exported values are now saved in XLS format.

Also, format of the import template is now unified with the format of the exported values; both contain the same set of columns and both are ready for import once filled with a set of values to import or edited; no additional formatting is required.

Please note that XLSX files are not supported.

Fixed issues

- 1. An issue when previously generated collections files were unavailable for download is now addressed.
- 2. An issue when the Login Help page was not displayed when the Login Help link is clicked on the Login screen is now addressed.
- 3. An issue experienced when using Internet Explorer 10 with column width on the Scheduling tab on the web site is now addressed.
- 4. An issue when certain content links on the web site were pointing to content on an incorrect server is now addressed.
- 5. An issue when an error could be observed when reviewing claims on the Review Claims tab on the web site is now addressed.