



CompuGroup™
Medical

What's New in

CGM webPRACTICE™ v2023.4.0

Final Release Notes

November 08, 2023

CGMwebPRACTICE™

Fully Web-Based Practice Management Suite



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INTRODUCTION

This document provides an overview of new features, resolutions, and enhancements available in the release of CGM webPRACTICE v2023.4.0. Each section defines the specific feature and/or enhancement associated with the new CGM webPRACTICE release, as well as any resolved issues.

NEW FEATURES AND ENHANCEMENTS

This section is not meant to be cumulative and only contains information associated with the CGM webPRACTICE v2023.4.0 release.

Note: You will need to complete the *****Action Required***** items (where applicable) to make sure your system functions properly with this updated version.

As with all updates, for all new menu functionality, you will need to identify which users you want to have access to the new menu functions. Then, you must activate the new menus using the *Model User Menus* function located on the *System, User Management* menu. You must also set the security level that you want on the new menus using the *Change Function Security* function located on the *System, User Management, Function Security Menu*.

Summary of Action Required Items

Page #	Function	Action
13	Import Fee Schedules	Load the updated files if applicable
13	Load the HCPCS Codes	Load the updated file if applicable
13	Load ICD-10-CM Codes	Load the updated file if applicable
13	Import RVU Unit Values	Load the updated file if applicable
13	Load the AMA CPT [®] Codes	Load the updated file if applicable

Summary of Changes to Document

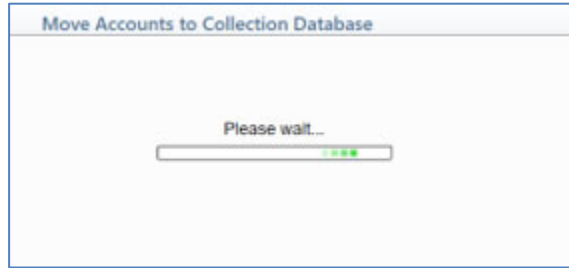
Preliminary Release Notes were released October 30, 2023.

Section	Function	Added/Deleted/Revised
Patient	History-Insurance Ledger	Revised
Tables	Load the AMA CPT [®] Codes	Added
Patient	Patient Summary Screen	Revised
System	Superbill Wizard	Revised
Tables	Interface Notifications	Added

Collections

Move Accounts to Collection Database (*Collections > Patient Collections > Turn Over Functions > Move Accounts to Collection Database*)

This function will now run in the background, to help prevent possible timeout situations and a progress bar will display until the function has completed.



Note: While this function is running you should instruct other users to not use any of the *Patient Collections* functions or make changes to any of the patient accounts that are being moved to the Collection Database.

Work Accounts (*Collections > Patient Collections > Work Accounts*)

To save time while working collection accounts, a **Statement Comment** field has been added. In addition, the **Billing Group** field was moved to the right column, and the **Next Contact** field was moved to the bottom of the right column.

Work Accounts
System Manager
EASTSIDE MEDICAL (1)

- Summary
- Next
- Mark As Worked
- Previous
- Change Patient Data
- Add a Note
- Statement
- Payment Plan
- Find Patient
- Print a Letter
- Procedures
- Payments
- Adjustments

26618 - Fox, Jeremy

Patient Name:	Fox, Jeremy (26618)	Home Ph. / Work Ph.:	/
Guarantor Name:	Fox, Jeremy	Billing Group:	BCBS PATIENTS NEW (BC)
Internal Comment:		Primary Carrier:	BCAZ-BLUE CROSS OF ARIZONA N
Last Statement:	08-30-2023	Secondary Carrier:	
Statement Comment:		Tertiary Carrier:	
Last Ins Pmt:		Send Statement:	Y
Last Per Pmt:	\$100.00 on 03-24-2023	Last Visit:	03-24-2023
Collection Status:	PARTIAL PAYMENT RECEIVED (8)	Payment Plan:	No
Next Letter:	NXT3	Letter Status:	Unsent
Next Contact:		Work Status:	Unworked

	Balance	Current	30	60	90	120	150
Patient:	566.08	0.00	0.00	0.00	0.00	0.00	566.08
Insurance:	303.92	0.00	0.00	0.00	0.00	0.00	303.92
Total:	870.00	0.00	0.00	0.00	0.00	0.00	870.00



Collections (cont.)

Manage Payment Plans (*Collections > Patient Collections > Manage Payment Plans*)

Work Accounts – Payment Plan (*Collections > Patient Collections > Work Accounts > Payment Plan*)

Non-Delinquent Payment Plan (*Collections > Patient Collections > Non-Delinquent Payment Plan*)

A **Statement Comment** field has been added to the top and bottom portions of the screen. Both **Statement Comment** fields will display the current statement comment stored on the patient's account. The field in the top portion is display only, while the field in the lower portion of the screen you can overwrite it if needed and save it to the patient's account from within this function.

Manage Payment Plans		System Manager EASTSIDE MEDICAL (1)	
Patient Name:	BISCOE, GEORGE (26540)	Home Ph. / Work Ph.:	/
Guarantor Name:	BISCOE, GEORGE	Billing Group:	MEDICARE PATIENTS (MED)
Internal Comment:		Primary Carrier:	MED-MEDICARE Y
Last Statement:	05-19-2023	Secondary Carrier:	AARP-AARP Y
Statement Comment:	CONTACT THE BILLING DEPT RE: PAYMENT PLAN	Tertiary Carrier:	
Last Ins Pmt:	\$5.93 on 03-23-2022	Send Statement:	Y
Last Per Pmt:		Last Visit:	02-26-2022
Collection Status:	PAYMENT PLAN FAILED (6)		
	Balance	Current	30 60 90 120 150
Patient:	116.81	0.00	0.00 0.00 0.00 0.00 116.81
Insurance:	-16.08	0.00	0.00 0.00 0.00 0.00 -16.08
Total:	100.73	0.00	0.00 0.00 0.00 0.00 100.73
Start Date of Plan	12-17-2021	Payment Amount \$	25.00 ✓
Payment Days	30 ✓	Next Payment Date	01-16-2022
Last Payment Date		Last Pmt Amount \$	
Status for Default	6		PAYMENT PLAN FAILED (6) ✓
Statement Comment	CONTACT THE BILLING DEPT RE: PAYMENT PLAN		

Patient

Patient Summary Screen (*Patient > Change Patient Data – Patient Summary Screen*)

The following enhancements were made to the balances displayed in the Guarantor section:

- Changed **Coll Sta** to **Collection Status**
- Added **Patient Collection Balance** below **Patient Balance**. This balance reflects the portion of the patient balance amount that is currently in the collection process in the non-collection database.
- The **Patient Balance** amount will display the total patient balance amount minus the **Patient Collection Balance**.
- Changed **Total Balance** to **Account Balance**, to make it consistent with the wording in the Transaction History screens.
- If the patient account has been moved to the Collection Database, then the **Collection Database Balance** amount will display in red font. This amount is the total of all balances that were transferred to the collection database. **Note:** If you have the *Patient Collections Integration* function set to **Transfer All** charges to the collection database and not just the delinquent charges, this amount will represent the patient balance owed for collections **and** any other balances that were transferred but not yet owed by the patient.

Change Patient Data		System Manager EASTSIDE MEDICAL (1)																									
Patient <p>Fox, Pansy (26621) 3663 S Central Ave Phoenix, AZ 85021 Phone: (H) E-Mail: SS: BD: 07-21-2003 (20) DR: CATHY CASTNER, MD, DO (1) Ref DR: ALTAMURA, MICHAEL PCP: Stat: 1st Vis: 05-04-17</p>		Guarantor <p>Fox, Pansy 3663 S Central Ave Phoenix, AZ 85021 Phone: (H) E-Mail: SS: BD: 07-21-2003 (20)</p> <table border="1"> <tr> <td colspan="2">Collection Status: 8</td> </tr> <tr> <td>Last Pat Pmt:</td> <td>12-10-2022</td> </tr> <tr> <td>Last Pat Pmt Amt:</td> <td>50.00</td> </tr> <tr> <td>Last Ins Pmt:</td> <td>03-30-2023</td> </tr> <tr> <td>Last Ins Pmt Amt:</td> <td>65.00</td> </tr> <tr> <td>Last Visit:</td> <td>11-05-2022</td> </tr> <tr> <td>Last Statement:</td> <td>08-30-2023</td> </tr> <tr> <td>Patient Balance:</td> <td>534.85</td> </tr> <tr> <td>Patient Collection Balance:</td> <td>0.15</td> </tr> <tr> <td>Insurance Balance:</td> <td>0.00</td> </tr> <tr> <td>Account Balance:</td> <td>535.00</td> </tr> <tr> <td>Collection Database Balance:</td> <td>15.00</td> </tr> </table>		Collection Status: 8		Last Pat Pmt:	12-10-2022	Last Pat Pmt Amt:	50.00	Last Ins Pmt:	03-30-2023	Last Ins Pmt Amt:	65.00	Last Visit:	11-05-2022	Last Statement:	08-30-2023	Patient Balance:	534.85	Patient Collection Balance:	0.15	Insurance Balance:	0.00	Account Balance:	535.00	Collection Database Balance:	15.00
Collection Status: 8																											
Last Pat Pmt:	12-10-2022																										
Last Pat Pmt Amt:	50.00																										
Last Ins Pmt:	03-30-2023																										
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Last Visit:	11-05-2022																										
Last Statement:	08-30-2023																										
Patient Balance:	534.85																										
Patient Collection Balance:	0.15																										
Insurance Balance:	0.00																										
Account Balance:	535.00																										
Collection Database Balance:	15.00																										
Billing Information <p>BG: COL Alert: N Send Stmt: Y Emp: Prim Add: Y Work Phone: Aging Msg: Y Stat: Finance: Y</p> <p>**ACCOUNT TURNED TO COLLECTIONS**</p>		Case Management																									



Patient (cont.)

Change Patient Data - Transaction History – Encounter View and All Transactions View (Patient > Change Patient Data > History)

Enhancements made to display reversed and negated transactions more clearly. The original transaction(s) now have a strikethrough and the reversed or negated transaction(s) contain a more detailed description.

Reversal - Encounter View

Encounter 11669 - 08/10/2023								
Case	0 - Not applicable			Status	Voided			
Billing Group	1			ICD-9 Diagnosis Code(s):	0 - NO DIAGNOSIS RECORDED			
				ICD-10 Diagnosis Code(s):	W61.91XA - Bitten by other birds, initial encounter			
Service Date	Code	Description	\$ Charge	\$ Ins Bal	\$ Pat Bal	\$ Tot Bal	Ins Img	
08/10/2023	99214	Reversed Enc #11668	-400.00	\$0.00	\$0.00	\$0.00	V	
Last Saved 08/31/2023 01:26PM by MEL			Totals:	\$0.00	\$0.00	\$0.00	\$0.00	

Encounter 11668 - 08/10/2023								
Case	0 - Not applicable			Status	Voided			
Billing Group	1			ICD-9 Diagnosis Code(s):	0 - NO DIAGNOSIS RECORDED			
				ICD-10 Diagnosis Code(s):	W61.91XA - Bitten by other birds, initial encounter			
Service Date	Code	Description	\$ Charge	\$ Ins Bal	\$ Pat Bal	\$ Tot Bal	Ins Img	
08/10/2023	99214	OFFICE O/P EST MOD 30-39 MIN	400.00	\$0.00	\$0.00	\$0.00	V	
Last Saved 08/31/2023 01:23PM by MEL			Totals:	\$0.00	\$0.00	\$0.00	\$0.00	

Reversal - All Transactions View

08-10-23	08-10-23	0	1	F	99214	OV EST-LEV 4	400.00	VY
08-10-23	08-10-23	0	1	F	99214	Rev 99214 Ser/Date 08-10-2023;QA Test	-400.00	VY

Negate - Encounter View

Encounter 11719 - 10/02/2023								
Case	0 - Not applicable			Status	Negated			
Billing Group	BC			ICD-9 Diagnosis Code(s):	0 - NO DIAGNOSIS RECORDED			
Service Date	Code	Description	\$ Charge	\$ Ins Bal	\$ Pat Bal	\$ Tot Bal	Ins Img	
10/02/2023	99214	Negated Enc# 11718; charged to wrong acct	-325.00	\$0.00	\$0.00	\$0.00		
Last Saved 10/02/2023 02:50PM by MGR			Totals:	\$0.00	\$0.00	\$0.00	\$0.00	

Encounter 11718 - 10/02/2023								
Case	0 - Not applicable			Status	Negated			
Billing Group	BC			ICD-9 Diagnosis Code(s):	0 - NO DIAGNOSIS RECORDED			
				ICD-10 Diagnosis Code(s):	W53.01XA - Bitten by mouse, initial encounter			
Service Date	Code	Description	\$ Charge	\$ Ins Bal	\$ Pat Bal	\$ Tot Bal	Ins Img	
10/02/2023	99214	OFFICE O/P EST MOD 30-39 MIN-OFFICE O/P EST MOD 30-39 MIN	325.00	\$0.00	\$0.00	\$0.00		
Last Saved 10/02/2023 02:49PM by MGR			Totals:	\$0.00	\$0.00	\$0.00	\$0.00	

Negate - All Transactions View

Acc/Date	Ser/Date	Case	BG	Code	Description	Org/Amt	Ins/Bal	Pat/Bal I	Img	Act
10-02-23	10-02-23	0	BC	F-99214	OFFICE O/P EST MOD 30-39 MIN	325.00		-Y		<input type="checkbox"/>
10-02-23	10-02-23	0	BC	F 99214	Negated Act/Date 10-02-2023; charged to wrong acct	-325.00		Y		<input type="checkbox"/>

Patient (cont.)

Change Patient Data - Transaction History – Encounter View and All Transactions View (*Patient > Change Patient Data > History*)

Corrections were made when negative payments and/or adjustments were posted through the *Payment Entry* function. The word ‘Negate’ has been changed to ‘Negative’ in front of the negative insurance adjustment or insurance payment in Encounter view. In addition, if a **Remark** was entered when the payment was posted, that description will print instead of the word ‘Negative’.

Service Date	Code	Description	
08/01/2023	99214	OFFICE O/P EST MOD 30-39 MIN	
08-31-2023	AETNA PMT		100.00
08-31-2023	W/O AETNA		300.00
08-31-2023	Negative - AETNA PMT		-100.00
08-31-2023	Negative - W/O AETNA		-300.00

DMS – Historical Records (*Patient > Change Patient Data > DMS*)

All DMS Records that are set to store data in the Historical format have been enhanced to provide **Add/Edit Filter** and **Remove Filter** Action Column buttons, so you can locate the records you want more quickly. For example, NOTES, INOTES, etc.

Notes	
26619 - Fox, Sammy	
Date	Description
08-01-2023	Patient was instructed to bring ID and Ins card for the NP appt on 8-3-2023.

When you access the **Add/Edit Filter** page, you have the option to filter the record by Date. The date of the first note stored will automatically default.

Notes	
Filter Options	
Filter Records From Date	08-01-2023
Filter Records Through Date	08-22-2023



Patient (cont.)

History – Insurance Ledger (Patient > Change Patient Data > History)

Enhancements were made to the *Insurance Ledger* so the **Patient Control Number (Pat Ctrl #)** will display anytime an insurance claim has been ‘Sent’ or ‘Printed’.

Note: The **Pat Ctrl #** will only display for claims that are printed or sent after the 2023.4.0 has been installed.

Transaction History for 26629 - Parker, Zaina									
Accounting Date	08-22-2023				Service Date	08-22-2023			
Procedure Code	99214 - OV EST LEV 4				ICD-9:	0			
Procedure Amount	325.00 (1@325.00)				ICD-10:	W53.01XA			
Per Dr/Ins Dr	1 - CATHY CASTNER, MD, DO/1				Encounter ICD-9	0			
Ins Dr Taxonomy	Internal Medicine Physician (207R00000X)				DX's				
Location	1 - MAIN OFFICE				Encounter ICD-10	W53.01XA, G44.201, W21.11XD			
Department					DX's				
Ref Dr	ALT - MICHAEL A. ALTAMURA, MD				Sup#:	Ins: *			
Alt. Desc.					Batch:	Asgn: Y			
					Amount Remaining	\$ 325.00			
					Claim Hold Date:				
					Claim Hold Reason:				
Acct Date	Date	Code	Description	Dr	Lc	Diagnosis	Amount	Applied	Img
Date	Time	Carrier	Action	User	Amount				
08-22-2023	11:47AM	AET - AETNA	Claims Profile - Printed Profile: Default Pat Ctrl # C2010508	ANBARIN	0.00				
08-22-2023	11:47AM	AET - AETNA	Refiled Test Refile for Paper Claim	ANBARIN	325.00				
08-22-2023	11:28AM	AET - AETNA	Claims Profile - Printed Profile: Default Pat Ctrl # C2010230	ANBARIN	0.00				
08-22-2023	11:28AM	AET - AETNA	Filed	ANBARIN	325.00				

Reports

Compile UDS Reports (Reports > UDS Reports > Compile UDS Reports) and Print UDS Reports (Reports > UDS Reports > Print UDS Reports)

Enhancements released for the following UDS Reports to meet the new reporting standards.

- Table 6A - Selected Diagnosis and Services Rendered
- Table 3B - Demographic Characteristics
- Table 5 - Staffing and Utilization

Schedule

Patient Check In/Out (Schedule > Patient Check In/Out)

The following enhancements and changes were made:

- Removed the **Select Status** Action Column button.
- Changed the name of the **Filter** Action Column button to **Add/Edit Filter** to be consistent with other functions.
- Added a **Remove Filter** Action Column button.

Patient Check In/Out									
System Manager EASTSIDE MEDICAL (1)									
MAIN OFFICE - Oct 11, 2023									
Time	Patient Name	Status	Doctor	Reason for Visit	Changed	Procedures	E-Superbill	Elig Status	
08:00A	Johnson, Noah (26597)	CHECK IN	1	ALLERGY SHOT	09:56A	✓	-	⊕	
08:10A	Dash, Khloe (26623)	CONFIRMED	1	FOLLOW UP OB		✓	ESB	⊕	
08:15A	SMITH, LAURA (25835)	CHECK IN	2	ALLERGY SHOT	09:57A		-	⊕	
08:25A	Dash, Kris (26626)	CONFIRMED	2	FOLLOW UP OB			-	⊕	
08:35A	Washington, George (26201)	CONFIRMED	1				-	⊕	
08:40A	Carter, Blue (26370)	CONFIRMED	2				-	⊕	

- Added a **Status** field to the **Add/Edit Filter** function.

Patient Check In/Out

Date

Location

Doctor

Procedures

Status

CHECK IN (CI)

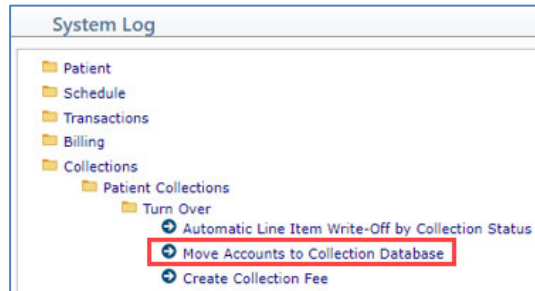
CONFIRMED (CONF)

EXAM RM 1 (1)

System

System Log (System > File Maintenance Menu > Look-Up Functions > System Log)

The **Move Accounts to Collection Database** function has been added to the Turn Over folder, so that each time the function is run a note will display.

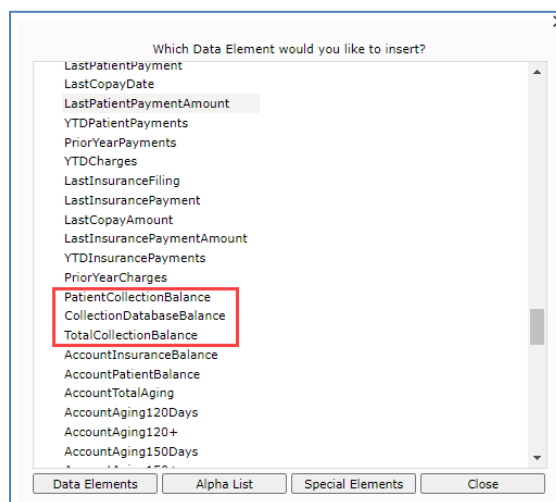


System Log			
Collections/Patient Collections/Turn Over/Move Accounts to Collection Database			
Date/Time ^	DB	User	Message
09-06-2023 05:14PM	1	MARS	For Collection Agency 1 for Date 07-03-2023 with Integration Transfer option as Delinquent

Superbill Wizard (System > Superbill Wizard)

The following changes were made to the Data Element library:

- Changed the name of the **CollectionBalance** element to **PatientCollectionBalance**
- Added a new **CollectionDatabaseBalance** element, which is the patient balance from the collection database. **Note:** If you have the *Patient Collections Integration* function set to **Transfer All** charges to the collection database and not just the delinquent charges, only the 'patient balance' portion of the collection database balance prints.
- Added a new **TotalCollectionBalance** element, which is the collection balance in the current database plus any patient balance that is in the collection database.



Tables

Import RVU Unit Values (*Tables > Relative Value Schedule Table > Import RVU Unit Values*) ****Action Required****

The Centers for Medicare and Medicaid Services (CMS) have updated the 2023 Medicare Relative Value Unit files (RVUs) effective October 1, 2023. To receive the updated codes, you must load the **2023** file.

Import Fee Schedules (*Tables > Fee Schedule Tables > Import Fee Schedules*) *****Action Required*****

The Centers for Medicare and Medicaid Services (CMS) have released the following Fee Schedules:

- 2023 Medicare Clinical Laboratory Fee Schedule, effective October 1, 2023
- 2023 Medicare DME Fee Schedules; Prosthetics/Orthotics and Supplies (DMEPOS), effective October 1, 2023

The updated files are available for import by selecting 2023 in the **Fee Schedule Year** list and the applicable file name in the **Fee Schedule File** list.

Load the HCPCS Codes (*Tables > Procedure Code Table > Load the HCPCS Codes*) *****Action Required*****

Updates to the 2023 HCPCS data files, effective October 1, 2023 are available. To receive the updated codes, you must load the 2023 file.

Load ICD-10-CM Codes (*Tables > Diagnosis Code Table > Load ICD-10-CM Codes*) *****Action Required*****

The updated ICD-10 code set, effective October 1, 2023-September 30, 2024, is available for loading. This code set is included, so you are **not** required to purchase it.

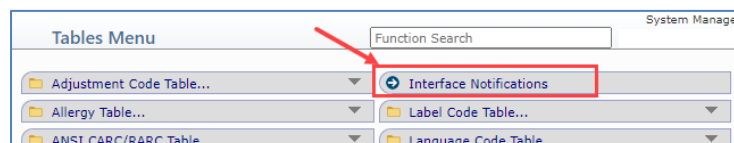
Load the AMA CPT® Codes (*Tables > Procedure Code Table > Load the AMA CPT® Codes*)

*****Action Required*****

The 2023 **PLA** CPT codes effective January 1, 2024, are available. The PLA codes are Vaccine Specific CPT Codes for Coronavirus Immunizations and can be loaded by selecting the **Pathology and Lab** code category.

Interface Notifications (*Tables > Interface Notifications*) *****Inbound Interface Clients Only*****

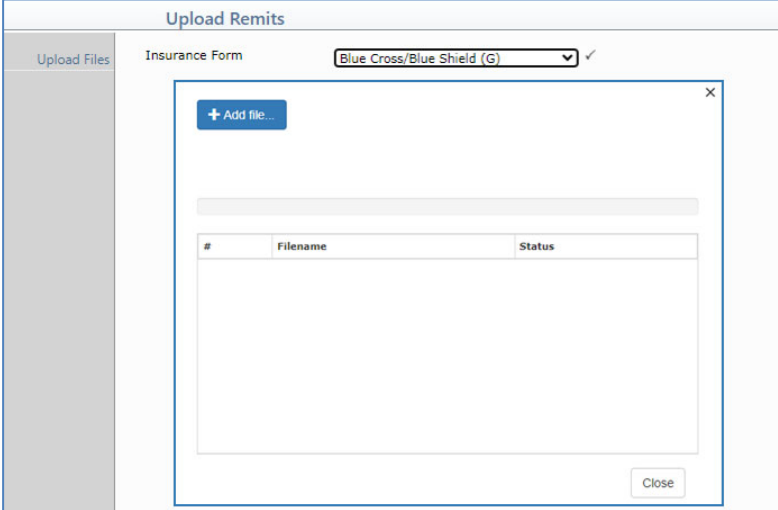
This function has been added to the **Tables** menu to make it more accessible. The function will only display when notifications exist that need to be worked for the database. This function was originally released in v2021.3.0 on the **System** menu (*System > Interfaces > Interface Notifications*)



Transactions

Upload Remits (*Transactions > Electronic Remittance Advice (ERA) > Upload Remits*) ****Hosted Clients Only****

An **Upload Files** Action Column button has been added so the standard upload files functionality is available.



The screenshot displays the 'Upload Remits' window. On the left is a sidebar with an 'Upload Files' button. The main area is titled 'Insurance Form' and features a dropdown menu set to 'Blue Cross/Blue Shield (G)'. Below this is a '+ Add file...' button. A table with three columns—'#', 'Filename', and 'Status'—is shown, currently empty. A 'Close' button is located at the bottom right of the main area.

CGM webTOOLS™

Procedure Entry Function (*Transactions > Procedure Entry Function – Check Codes*)

CGM webCODER™ will be powered by eMEDIX instead of FinThrive when the v2023.4.0 update has been installed and every client account will be automatically switched over to eMEDIX. Below are the changes and enhancements required for the switchover of service:

- The edit checks for **Check Codes** have been enhanced to provide more accurate results.
- The **CGM webCODER Website** Action Column button was removed since that functionality is no longer available.
- The *CGM webCODER Results* screen has been redesigned and a **Print** button has been added, so you can print the results.

The screenshot displays the 'CGM webCODER Results' interface. At the top, it shows 'System Manager EASTSIDE MEDICAL (1)'. The main content area is titled 'eMEDIX Reimbursement Solutions Claims in Error Report'. It lists submission details: Submitter ID: CGMTEST, Job ID: 1441499139, File Name: CGMTEST_ebc3073c-55d3-4099-a33b-881c7ad8623f.EDI, File Submitter Name, Processed Date: 10/24/2023 12:20:55 PM - 0.2, and Duration (seconds). Below this is a table of claim data:

Claim ID	Trace ID	Medical Record Number	Patient Account	Patient Name (DOB)	Provider	Destination Payer	Billed Amount	Facility
000001	1		26617	RABBIT, BETTY (3/22/2005)	Eastside Medical	BC/BS BLUE CROSS OF ARIZONA	\$325.00	MAIN OFFICE

Below the claim table is an 'Edit Severity' section with the following entries:

Edit Severity	Edit #	Edit Description
Reduced Payment	CW15013	(DATE) A diagnosis code or external cause code is present that indicates the service was rendered due to an accident or injury. The date of the accident, injury, or condition onset date is either missing or is after the date of service. External cause code - W53.01XA
Informational Message	CW5004	(MN-PROP) The diagnosis code(s) reported may not support this level of E/M service and might be considered over coding; however, a review of the medical record is recommended to confirm whether, under the circumstances, the level of service is justifiable. Procedure - 99214
Claim Returned to Provider	CW3503	(ICD) This external cause diagnosis code may not be billed as the primary diagnosis. Diagnosis code - W53.01XA

At the bottom, there is a table for 'Seq', 'DOS From', 'DOS To', 'POS', 'CPT Code', 'Modifiers', 'Units', 'Diagnoses', 'Billed', and 'Edits'.

Seq	DOS From	DOS To	POS	CPT Code	Modifiers	Units	Diagnoses	Billed	Edits
01	10-24-2023	10-24-2023	11	99214		1	W53.01XA	\$325.00	CW15013 CW5004 CW3503

Finally, there is a 'Code Type' section with a 'Code Description' for CPT 99214: 'OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH REQUIRES A MEDICALLY APPROPRIATE HISTORY AND/OR EXAMINATION AND MODERATE LEVEL OF MEDICAL DECISION MAKING.' The interface also includes a sidebar with navigation options like 'tasks (1)', 'inbox (8)', 'calculator', 'calendar', 'rolloDEX', 'cue cards', 'help', and 'support', and buttons for 'Proceed' and 'Proceed and Save'.

- The ability to update modifiers within the *CGM webCODER Results* screen is no longer available.

CGM webCODER Integration (*System > Database Maintenance Menu > Integrations > CGM webTOOLS Integrations > CGM webCODER Integration*)

Removed the **Website User** field, since the *CGM webCODER Website* functionality is no longer available.