



CompuGroup™  
Medical

**What's New in**

**CGM webPRACTICE™ v7.4.26**

**Final Release Notes**

**February 12, 2020**

**CGMwebPRACTICE™**  
Fully Web-Based Practice Management Suite



## Table of Contents

Introduction .....	3
New Features and Enhancements .....	4
Summary of Action Required Items.....	4
Summary of Changes to Document.....	4
Reports .....	5
Schedule .....	7
System .....	9
Tables.....	11
Transactions.....	12

## INTRODUCTION

This document provides an overview of new features, resolutions, and enhancements available in the release of CGM webPRACTICE v7.4.26. 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 v.7.4.26 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
11	Import Fee Schedules	Load the updated files if applicable.
11	Load the HCPCS Codes	Load the updated files if applicable.
11	Import RVU Unit Values	Load the updated files if applicable.

### Summary of Changes to Document

Version 1 of Preliminary Release Notes to be released February 4, 2020.

Section	Function	Added/Deleted/Revised
System	Procedure Entry Integration and Unposted Procedures Integration	Added 'matching criteria' for auto-posting co-payments

## Reports

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### **Transaction Detail to Excel Reports** (*Reports > Transaction Journals > Transaction Detail to Excel Reports*)

Added new fields for **From Procedure Code** and **Through Procedure Code**, so you can print this report for a specific procedure code or a range of procedure codes. If you enter data in these fields, the report will print any posted charges for the specified procedure code(s) and any related data for the procedure code(s) based on the data fields you have defined for the report and any additional print parameters you specify.

**Note:** The new fields allow input of up to five characters and do not provide the magnifying glass table search feature in order to allow you to include procedure codes with modifiers. For example, if you enter '99999' in the **From Procedure Code** field and '99999' in the **Through Procedure Code** field, the report will contain all procedure codes that start with 99999, including any codes that also have modifiers (99999, 9999950, 99999LT, etc.)

### **Alphabetic List of Patients** (*Reports > Patient Listings > Alphabetic List of Patients*)

### **Numeric List of Patients** (*Reports > Patient Listings > Numeric List of Patients*)

### **Sorted Lists of Patients** (*Reports > Patient Listings > Sorted Lists of Patients*)

### **Double Sorted Lists of Patients** (*Reports > Patient Listings > Sorted Lists of Patients > Double Sorted Lists of Patients*)

The **SS Number** column has been replaced with the **Cell Phone** column and the **Phone Number** column has been renamed **Home Phone**.

### **List of Patients by Birth Date** (*Reports > Patient Listings > Sorted Lists of Patients > List of Patients by Birth Date*)

The **Print for What Month** field has been changed to **Print for Birth Month** with a list of months provided, so it more clearly reflects you should select the month the patients' birth date occurs.

### **Sorted Lists of Patients** (*Reports > Patient Listings > Sorted Lists of Patients*)

### **Double Sorted Lists of Patients** (*Reports > Patient Listings > Sorted Lists of Patients > Double Sorted Lists of Patients*)

The **Print from Service Date** and **Print through Service Date** fields were not always printing the correct information. They will now look at the actual charges posted on the patient account to determine which data should print, instead of the 'Date of Last Activity'.

### **New Patient/Follow-Up Reports** (*Reports > Patient Listings > New Patient/Follow-Up Reports*)

Updated all of the reports to print to *Microsoft® Excel via MyReports*.

## Reports (cont.)

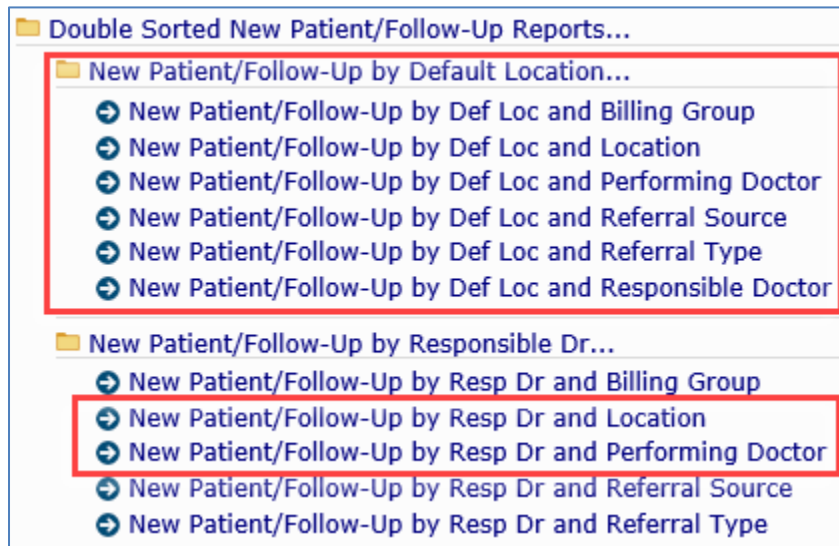
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### **Alphabetic Aged A/R and Numeric Aged A/R** (*Reports > Aged Accounts Receivable (A/R) Reports*)

Renamed the **Starting Date for Report** and **Ending Date for Report** fields to **Print from Date** and **Print through Date**, so they are consistent with the other Aged A/R reports.

### **Double Sorted New Patient/Follow-Up Reports** (*Reports > Patient Listings > New Patient/Follow-Up Reports > Double Sorted New Patient/Follow-Up Reports*)

New reports added for the following sorting options:



### **Bank Deposit Report** (*Transactions > Transaction Journals > Bank Deposit Report*)

Added an **Include Check # Breakdown** check box, so you can select if you want the individual check numbers to print for each payment code in the Summary section.

## Schedule

### Credit Manager Report (Schedule > Scheduling Printing Menu > Credit Manager Report)

Additional fields added so you can filter the report by **Billing Group** and **Primary Insurance Carrier** if needed.

Credit Manager Report			
Begin with Billing Group	<input type="text"/>	<input type="button" value="Q"/>	<input type="text"/>
End with Billing Group	<input type="text"/>	<input type="button" value="Q"/>	<input type="text"/>
Begin with Doctor Code	<input type="text"/>	<input type="button" value="Q"/>	<input type="text"/>
End with Doctor Code	<input type="text"/>	<input type="button" value="Q"/>	<input type="text"/>
Begin with Location	<input type="text"/>	<input type="button" value="Q"/>	<input type="text"/>
End with Location	<input type="text"/>	<input type="button" value="Q"/>	<input type="text"/>
Begin with Primary Ins Carrier	<input type="text"/>	<input type="button" value="Q"/>	<input type="text"/>
End with Primary Ins Carrier	<input type="text"/>	<input type="button" value="Q"/>	<input type="text"/>
Begin with Date	11-14-2019	<input type="button" value="📅"/>	
End with Date	11-14-2019	<input type="button" value="📅"/>	
Include AM Appointments	<input checked="" type="checkbox"/>		
Include PM Appointments	<input checked="" type="checkbox"/>		

In addition, the **Patient Class** and **Billing Group** data has been split into two separate fields on the report.

3:00 PM	25786.1	PRINCE, DIANA	OFFICE PROCEDURE	Pat:	65.00
		PRINCE, DIANA		Ins:	1708.87
		Date Last Visit:	09-11-2018	Tot:	1773.87
		H:	602-555-6450	C:	877-270-6700
		W:			
		DOB:	05-16-1984		
		Patient Class:	Billing Group: ACM	Primary Ins:	BIL

## Schedule (cont.)

### Scheduling Co-Pay Report (*Schedule > Schedule Printing Menu > Scheduling Co-Pay Report*)

Added **Type of Visit** sorting options, so you can sort the report by Type of Visit. The Type of Visit (TOV) code will also print on the report for each patient account when you select to sort by Doctor or Location.

### Appointment Details (*Schedule > Enter Patient Appointments > Details*)

Enhanced the Appointment Status section on the Details screen to provide information that is more detailed. The Statuses will display in two sections - **Pre Check In Status** and **Post Check In Status**.

Patient: 26275 Laime-Rosen, Elizabeth		
Referring Doctor: REFERRING DR (0)		
Comment:		
Phone: (H) 207-478-2158 (C) 207-478-2158		Patient E-Mail:
Rsp Doctor: CATHY CASTNER, MD, DO (1)		
Visits since Jan:	No Shows: 1	Sex: F
Pri Ins: BCBS OF CLEV	Copay: 0.00	Spec Copay: 0.
Sec Ins: United Health	Copay: 0.00	Spec Copay: 0.
Last Visit: 02-25-19 - OV EST LEV 4	Col Bal:	
<b>Appointment Details</b>		
Date:	01-28-2020	
Time:	05:45P	
Doctor:	CATHY CASTNER, MD, DO (1)	
Location:	MAIN OFFICE (1)	
Status:	WAITING ROOM (W) 01-27-2020	
Type of Visit:		
Units:	1	
Reason:		
Case:		
Comment:		
Comment:		
PASSPORT REF:		
COMMENT:		
COMMENT:		
Report Comment:		
<b>Post Check In - Status Updates/Location History/User</b>		
January 28, 2020 09:21AM	CHECK IN (CI)	MGR
January 28, 2020 09:24AM	WAITING ROOM (W)	MGR
<b>Pre Check In - Status Updates/Status/User</b>		
January 27, 2020 10:07PM	UNCONFIRMED(UNCON)	MEL
Entered by MELANIE BROOKS on 01-27-2020 at 10:07P		

**Note:** The expanded data for the Statuses will only display for changes made to the Statuses after you have installed 7.4.26.



## System

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### **Procedure Entry Integration and Unposted Procedures Integration** (*System Management Functions > Database Maintenance Menu > Integrations > Transactions Integrations*)

The **Auto-post Co-pays** and the **Manual Posting - Auto-post Co-pays** fields control whether you want co-payments automatically posted when you post procedures through *Procedure Entry* or that were previously stored as *Unposted Procedures*. To aid in figuring out why some co-payments will not auto-post (when you feel they should), we are providing the 'matching' criteria that is used to determine if a co-payment can be auto-posted or not.

#### **Definitions:**

**Procedure (TOS)** Type of Service - stored in Procedure Code

**Co-Payment (TOS)** Type of Service - finds the Co-Payment Type Code selected in the Collect Payment window then finds the Type of Service tied to that code

**Appointment (TOS)** Type of Service - finds the Type of Service tied to the Type of Visit code on the appointment

**Co-Payment Date** - finds the appointment date (if the co-payment was tied to an appointment) or the date the co-payment was entered

The following matching criteria are listed in the order of priority and as soon as a match is found, the co-payment will be posted and no further match checking will be performed. If no matches are found, the co-payment will not be posted and you must manually post it.

If the procedure is tied to an appointment:

- Finds co-payment(s) tied to same appointment:
  - If **Co-Payment (TOS)** matches **Procedure (TOS)**, posts copay
  - If no **Co-Payment (TOS)**, finds **Appointment (TOS)**. If **Appointment (TOS)** matches **Procedure (TOS)**, posts copay
  - If no **Co-Payment (TOS)** AND no **Appointment (TOS)**. Posts copay to procedure because they are both tied to the same appointment

If the procedure is not tied to an appointment:

- Finds co-payments that have a Co-Payment Date that matches the procedure's Date of Service
  - If **Co-Payment (TOS)** matches **Procedure (TOS)**, posts copay
  - If no **Co-Payment (TOS)**, finds **Appointment (TOS)** (if copayment is tied to an appointment). If **Appointment (TOS)** matches **Procedure (TOS)**, posts copay
  - If no **Co-Payment (TOS)** AND no **Appointment (TOS)**. Posts copay to procedure because the **Co-Payment Date** matches the procedure's Date of Service.

## System (cont.)

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### **Procedure Entry Integration** (*System > Database Maintenance Menu > Integrations > Transactions Integrations > Procedure Entry Integration*)

During a recent code audit, we found that the **Default Per Dr for Ins Dr** field has been obsolete for a few years. The 'basic system default' has been to always default the **Per Dr** in the **Ins Dr** field unless you enter a code in the **Default Ins Dr** field for the Performing Doctor's code.

### **Procedure Entry Integration** (*System Management Functions > Database Maintenance Menu > Integrations > Transactions Integrations > Procedure Entry Integration*)

Added an **Auto-post Co-pays** option so that you can control if co-payments should auto-post when you are posting procedures from within the *Procedure Entry Function*. This option functions in the same manner as the **Manual Posting - Auto-post Co-pays** option in the *Unposted Procedures Integration*.

## Tables

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### **Maintain Insurance Denial Codes** (*Tables > Insurance Denial Code Table > Maintain Insurance Denial Codes*)

The updated Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC), effective November 1, 2019 have been released.

**Note:** No updates were necessary for the codes for January 1, 2020.

### **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:

- 2020 Medicare Physician Fee Schedule, effective January 1, 2020
- 2020 Medicare Clinical Laboratory Fee Schedule, January 1, 2020
- 2020 Medicare DME Fee Schedules; Prosthetics/Orthotics, and Supplies (DMEPOS) and Parenteral and Enteral Nutrition (DMEPEN), effective January 1, 2020

An additional update for the 2020 Medicare Physician Fee Schedule was also released later in January. The updated files are available for import by selecting 2020 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 2020 HCPCS data files, effective January 1, 2020 are available. To receive the updated codes you must load the 2020 file.

### **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 2020 Medicare Relative Value Unit files (RVUs) effective January 1, 2020. To receive the updated codes you must load the **2020** file.

## Transactions

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### **Import and Post ERA Files** (*Transactions > Electronic Remittance Advice (ERA) > Import and Post ERA Files*)

Added a new **Auto Archive Settings** Action Column button, allowing you to select if you want to archive any posted ERA files that are older than a specified number of days. If enabled, this function will automatically run each evening.

**Note:** Posted ERA files must be at least seven days old before they can be auto archived.

### **Procedure Entry Function** (*Transactions > Procedure Entry Function*)

Updated the **Claim Hold Date** field to prevent the entry of past dates.