



CompuGroup™
Medical

What's New in

CGM webPRACTICE™ v7.4.9

Final Release Notes

September 15, 2015

Hosted Clients Release Date: Sept. 16, 2015

Self-hosted Clients Release Date: Sept. 23, 2015

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 v7.4.9. 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.7.4.9 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 service packs and 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*.

Posting Encounters with the correct version of ICD codes Disclaimer

Although numerous enhancements have been made to aid in the accurate posting of ICD codes during the ICD-10 transition period, you should be vigilant when entering and posting encounters to confirm you have entered the correct versions of the ICD codes - either ICD-9 code or ICD-10 or both. The diagnosis codes that default on the ICD-9 and ICD-10 Diagnosis tabs in Procedure entry are controlled by default settings in CGM webPRACTICE and can also be affected by Case selection while entering encounters. Although claims will split and generate correctly based on the **ICD-10 Activation** date for the insurance carrier and dates of service on the claims, you need to confirm the necessary ICD codes are posted for each claim to ensure proper reimbursement.

To familiarize yourself with the enhancements provided for ICD-10 functionality, you should review the release notes in CGM webPRACTICE Help (*Release Notes, 7.4 Release Notes*) from version 7.4.4 through 7.4.9 thoroughly for all ICD-10 related enhancements and also the *Required Steps to Use ICD-10 Codes in CGM webPRACTICE* provided in CGM webPRACTICE Help (*Introduction, System Processes*).

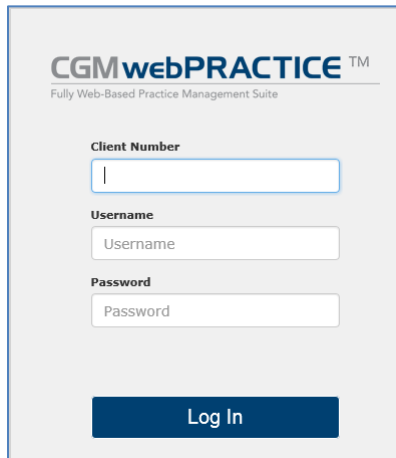
Summary of Action Required Items

Page #	Function	Action
13	Load the AMA HCPCS Codes	Load the updated files if applicable.
13	Import the RVU Unit Values	Load the updated files if applicable.
13	Load ICD-10-CM Codes	Load the 2016 Code Sets.
18	Load the Fee Schedule	Load the updated Medicare Physician Fee Schedule effective July 1, 2015 if applicable.

CGM webPRACTICE Enhancements

CGM webPRACTICE Enhancements

Labels have been added above the input fields – **Client Number**, **Username**, and **Password**. When the login page is first displayed, the first field on the screen will have focus. This restores the functionality from prior to 7.4.8. In addition, the Placeholder text that displays inside of the input fields will now only display if you are running on Internet Explorer version 10 or higher. The Placeholder is the grey text like *Username* that displays inside of the input field before you type something into the field. These updates were released in Patch # 7.4.8.2 on June 30, 2015.



The screenshot shows the login page for CGM webPRACTICE. At the top, the logo reads "CGMwebPRACTICE™ Fully Web-Based Practice Management Suite". Below the logo are three input fields, each with a label above it: "Client Number" (with a cursor in the field), "Username" (with "Username" as placeholder text), and "Password" (with "Password" as placeholder text). A dark blue "Log In" button is positioned below the fields.

CGM webPRACTICE Enhancements

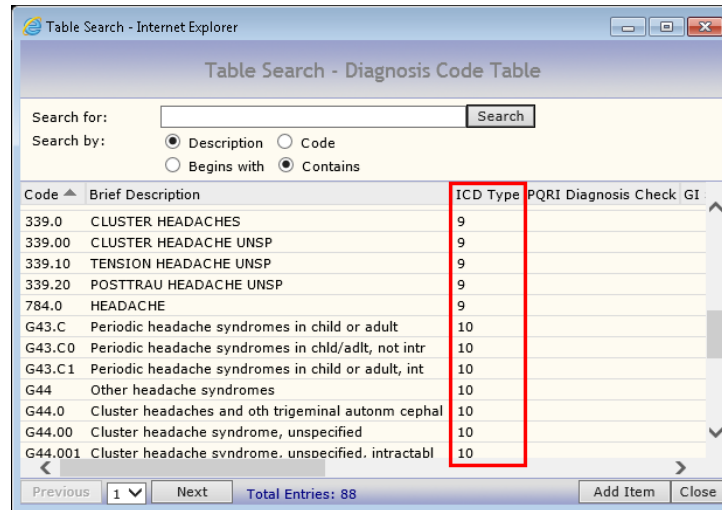
The **Log In** link in the upper-right corner of the Launch page has been removed because it was redundant and also did not function consistently with the **Log in button** in the main portion of the page. These updates were released in Patch # 7.4.8.2 on June 30, 2015.




CGM webPRACTICE Enhancements (cont.)

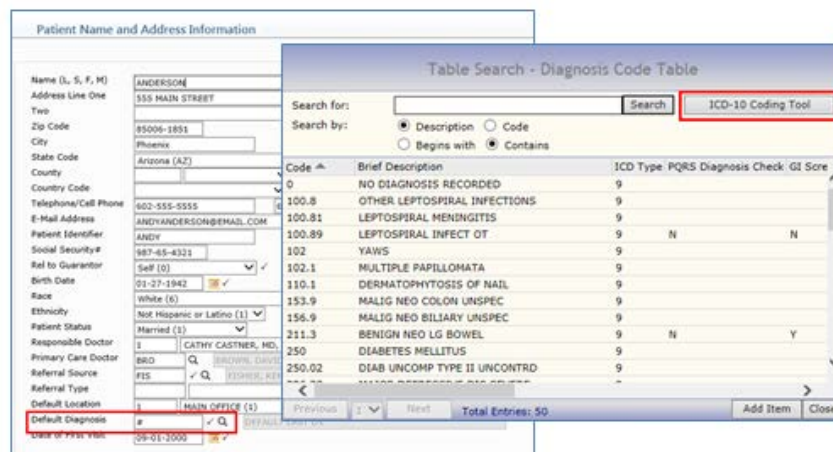
Diagnosis Table Search functions

Enhancements have been made to every **Diagnosis Code** field that provides a magnifying glass to prepare for the transition to ICD-10 Diagnosis codes. Previously, when you clicked the magnifying glass to search, only ICD-9 codes would display, unless you were accessing it directly from the *Maintain Diagnosis Codes* function. Now, when you use the magnifying glass to search, the ICD-10 Diagnosis codes will also be available.



Diagnosis Table Search functions

A new **ICD-10 Coding Tool** button has been added to the Table Search function  for every Diagnosis Code field to provide access to the **ICD-10 Coding Tool**. For additional information, see the *Procedure Entry Function – ICD-10 Coding Tool* entry under the *Transactions* section of these release notes.



CGM webPRACTICE Enhancements (cont.)

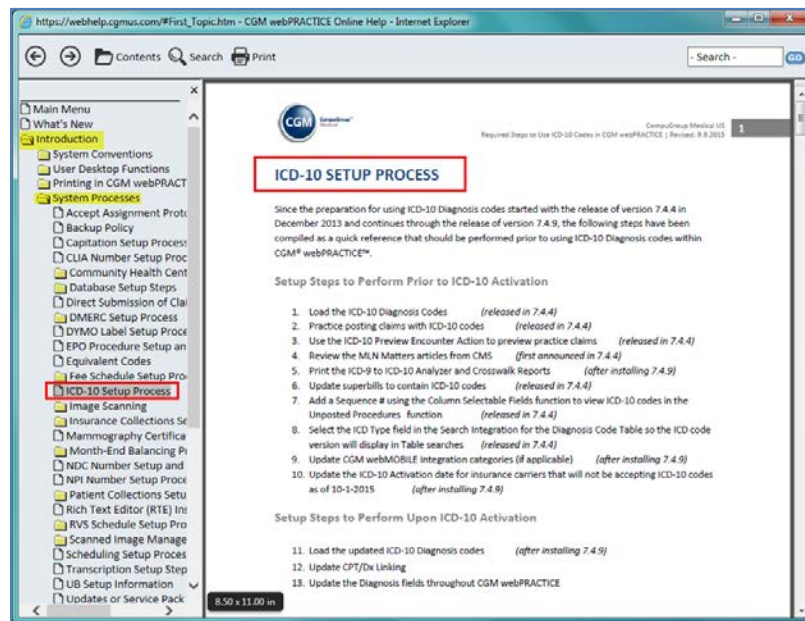
CGM webPRACTICE Enhancements

Enhancements have been made to every report that contains Diagnosis Codes to ensure the codes are printed accurately based on the Date of Service and the ICD-10 Activation date for the insurance carrier, if applicable.

Desktop Tools

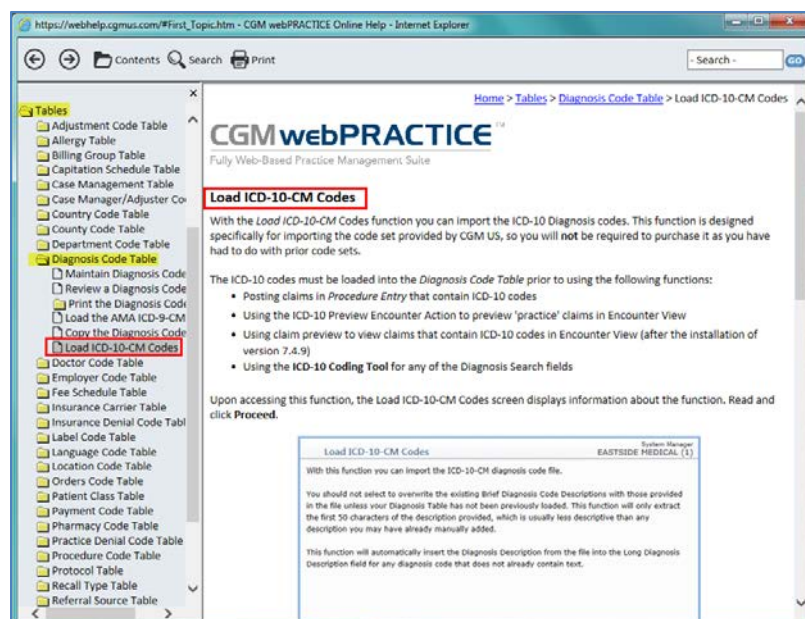
Help

A new **ICD-10 Setup Process** document which contains all of the required setup steps to use ICD-10 codes in CGM webPRACTICE is now available in *CGM webPRACTICE Help* located in the *Introduction\System Processes* folder.



Help

The **Load ICD-10-CM Codes** function has been created in the *Tables\Diagnosis Code Table* folder.



Billing

Insurance Filing Report (*Insurance Billing Functions*) and **Delinquent Filing Report** (*Insurance Billing Functions, Delinquent Insurance Menu*)

The following column headers were changed to allow better data formatting on the reports:

- **Carrier** changed to **Ins**
- **Patient Name and Number** changed to **Pt Acct # - Name**
- **Procedure** changed to **Proc**

Patient

Change Patient Data

Insurance Policy Information - Eligibility History *webVERIFY Clients Only*****

The updated Services Type Codes, effective July 1, 2015 have been loaded into CGM webPRACTICE.

Reports

Edited Transactions Journal (*Transaction Journals*)

Previously, the Diagnosis codes for original transaction would not print. This has been corrected.

ICD-9 to ICD-10 Analyzer and Crosswalk Reports (*Statistical Reports, Detailed Diagnosis Analysis*)

New Functionality

These reports provide a quick reference sheet for your top 50 posted ICD-9 diagnosis codes and a crosswalk to the matching ICD-10 codes. These reports can be run for a range of dates of service and by the following sorting options:

- Insurance Doctor
- Performing Doctor
- Location
- User

All of the diagnosis codes entered for a procedure will be analyzed or you can select to only include the primary diagnosis code entered for a procedure. You can also select if you want to include the ICD-10 code brief description in the report. These reports can also be printed to Microsoft Excel via *My Reports*.

Note: If a crosswalk does not exist between an ICD-9 code and an ICD-10 code, the ICD-10 column will be left blank on the report.

Sample Report:

Aug 21, 2015		EASTSIDE MEDICAL			Page 1
ICD-9 to ICD-10 Analyzer and Crosswalk Report by Performing Doctor					
From Date of Service 07-01-2015 through 08-21-2015					
ICD-9	Description	Freq	ICD-10	Description	
1-CATHY CASTNER, MD, DO					
0	NO DIAGNOSIS RECORDED	16			
100.81	LEPTOSPIRAL MENINGITIS	9	A27.81	Aseptic meningitis in leptospirosis	
100.89	LEPTOSPIRAL INFECT OT	11	A27.89	Other forms of leptospirosis	
250.02	DIAB UNCOMP TYPE II UNCONTRD	4	E11.65	Type 2 diabetes mellitus with hyperglycemia	
296.23	MAJOR DEPRESSIVE DIS SEVERE	1	F32.2	Major depressv disord, single epsd, sev w/o psych	
307.81	TENSION HEADACHE	1	G44.209	Tension-type headache, unspecified, not intractabl	
382.9	OTITIS MEDIA UNSPEC	5	H66.90	Otitis media, unspecified, unspecified ear	
			H66.91	Otitis media, unspecified, right ear	
			H66.92	Otitis media, unspecified, left ear	
			H66.93	Otitis media, unspecified, bilateral	
465.9	ACUTE URI UNSPEC	8	J06.9	Acute upper respiratory infection, unspecified	

Reports (cont.)

ICD9 to ICD-10 Analyzer and Crosswalk Reports (cont.)

Sample Report printed to Excel:

Note: When one ICD-9 code can crosswalk to multiple ICD-10 codes, each ICD-10 possibility will print in a separate row in the worksheet.

	A	B	C	D	E	F	G	H	I
1	21-Aug-15								
2	EASTSIDE MEDICAL								
3	ICD-9 to ICD-10 Analyzer and Crosswalk Report by Performing Doctor								
4	From Date of Service 07-01-2015 through 08-21-2015								
5	ICD-9 Code	Description	Performing Doctor	Description	Frequency	ICD-10	Description		
6	100.81	LEPTOSPIRAL MENINGITIS	1 CATHY CASTNER, MD, DO		9	A27.81	Aseptic meningitis in leptospirosis		
7	100.89	LEPTOSPIRAL INFECT OT	1 CATHY CASTNER, MD, DO		11	A27.89	Other forms of leptospirosis		
8	250.02	DIAB UNCOMP TYPE II UNCONTRD	1 CATHY CASTNER, MD, DO		4	E11.65	Type 2 diabetes mellitus with hyperglycemia		
9	296.23	MAJOR DEPRESSIVE DIS SEVERE	1 CATHY CASTNER, MD, DO		1	F32.2	Major depressv disord, single epsd, sev w/o psych		
10	307.81	TENSION HEADACHE	1 CATHY CASTNER, MD, DO		1	G44.209	Tension-type headache, unspecified, not intractab		
11	382.9	OTITIS MEDIA UNSPEC	1 CATHY CASTNER, MD, DO		5	H66.90	Otitis media, unspecified, unspecified ear		
12	382.9	OTITIS MEDIA UNSPEC	1 CATHY CASTNER, MD, DO		5	H66.91	Otitis media, unspecified, right ear		
13	382.9	OTITIS MEDIA UNSPEC	1 CATHY CASTNER, MD, DO		5	H66.92	Otitis media, unspecified, left ear		
14	382.9	OTITIS MEDIA UNSPEC	1 CATHY CASTNER, MD, DO		5	H66.93	Otitis media, unspecified, bilateral		
15	465.9	ACUTE URI UNSPEC	1 CATHY CASTNER, MD, DO		8	J06.9	Acute upper respiratory infection, unspecified		
16	473.9	CHRONIC SINUSITIS UNSPEC	1 CATHY CASTNER, MD, DO		1	J32.9	Chronic sinusitis, unspecified		
17	477.9	ALLERGIC RHINITIS UNSPEC	1 CATHY CASTNER, MD, DO		9	J30.0	Vasomotor rhinitis		
18	477.9	ALLERGIC RHINITIS UNSPEC	1 CATHY CASTNER, MD, DO		9	J30.9	Allergic rhinitis, unspecified		
19	715.15	LOCALZ PRIM OSTEOART PELVIS	1 CATHY CASTNER, MD, DO		1	M16.0	Bilateral primary osteoarthritis of hip		
20	715.15	LOCALZ PRIM OSTEOART PELVIS	1 CATHY CASTNER, MD, DO		1	M16.10	Unilateral primary osteoarthritis, unspecified hip		
21	715.15	LOCALZ PRIM OSTEOART PELVIS	1 CATHY CASTNER, MD, DO		1	M16.11	Unilateral primary osteoarthritis, right hip		
22	715.15	LOCALZ PRIM OSTEOART PELVIS	1 CATHY CASTNER, MD, DO		1	M16.12	Unilateral primary osteoarthritis, left hip		
23	719.58	JOINT STIFFNESS OT OT JT	1 CATHY CASTNER, MD, DO		4	M25.60	Stiffness of unspecified joint, not elsewhere clas		
24	722.71	CERV DISC DIS W MYEOPAT	1 CATHY CASTNER, MD, DO		1	M50.00	Cervical disc disorder with myelopathy, unsp cervi		
25	722.71	CERV DISC DIS W MYEOPAT	1 CATHY CASTNER, MD, DO		1	M50.01	Cervical disc disorder w myelopathy, high cervica		
26	722.71	CERV DISC DIS W MYEOPAT	1 CATHY CASTNER, MD, DO		1	M50.02	Cervical disc disorder with myelopathy, mid-cervic		
27	722.71	CERV DISC DIS W MYEOPAT	1 CATHY CASTNER, MD, DO		1	M50.03	Cervical disc disorder w myelopathy, cervicothorac		



Schedule

Eligibility Status (*Verify Eligibility Menu*) and **Eligibility History** (*Patient Check In/Out*)

*****CGM webVERIFY™ Clients Only*****

The updated Services Type Codes, effective July 1, 2015 have been loaded into CGM webPRACTICE.

CGM webREMINDER Results *CGM webREMINDER™ Clients Only*****

Additional Confirmation Result types have been added for the Email and Text CGM webREMINDER options.

- Email Sent Appt Confirmed
- Email Sent Reschedule Requested
- Email Sent Cancel Requested
- Email Sent No Response
- Email Not Sent
- Text Message Sent
- Text Message Not Sent
- Text Message Confirmed
- Text Message Cancelled

System

System Log (*File Maintenance Menu, Look-Up Functions*)

*****CGM webREMINDER clients only, that are set up to use the web service *****

Released in Patch # 7.4.8.6 on 07-27-2015

CGM webREMINDER data will now be sent every 30 minutes instead of once a day and the event will be tracked in the System Log. If there are no changes to the data since the last send, a file will not be sent and the System Log will display 'No Changes' for the event.

System Log				
CGM webREMINDER Messages				
Date/Time ▲	DB	# of Records	Event	Status
07-17-2015 11:34AM	1	0	Send	No changes
07-17-2015 11:34AM	1	3	Send	Successful

CGM webMOBILE Integration (*Database Maintenance Menu, Integrations, CGM webTOOLS Integrations*)

*****CGM webMOBILE™ Clients Only*****

The following enhancements have been made to prepare for the transition to ICD-10 Diagnosis codes: The **ICD9 Categories** Action Column button on the CGM webMOBILE Integration screen has been renamed to **ICD Categories** and both ICD-9 and ICD-10 codes can now be added to the ICD categories. Previously only ICD-9 codes were permitted.

Tables

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

The updated ICD-10 code set, effective October 1, 2015-September 30, 2016 is available for loading. These code sets are included in the 7.4.9 release so you will **not** be required to purchase them. There were no changes between the 2013/2014 codes and the 2015 codes, so if you have already loaded the 2013/2014 codes (effective Date-October 1, 2013) you do not need to load the 2015 codes.

Enhancements were also made to reduce the number of steps required to load the codes. Previously, there were three lead-in screens to complete and that has been reduced to two. Also, the **Drive** and **File Name** fields have been deleted since the files are stored internally in CGM webPRACTICE and the **Year** field was renamed **Effective Date**.

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

Updates to the 2015 HCPCS data files, effective July 1, 2015 are available for clients who have purchased that code set. To receive the updated codes you must reload the 2015 file. These updates were released in Patch # 7.4.8.2 on June 30, 2015.

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

The Centers for Medicare and Medicaid Services (CMS) have updated the 2015 Medicare Relative Value Unit files (RVUs) effective July 1, 2015. To receive the updated codes you must load the **2015** file. These updates were released in Patch # 7.4.8.6 on 07-27-2015.

Maintain Insurance Carriers

The **ICD-10 Activation** field has been changed to an 'active' field to prepare for the transition to ICD-10 Diagnosis codes. The date of **10-01-2015** will still be defaulted in the field but now you can change it to a later date if needed.

Maintain Diagnosis Codes (*Diagnosis Code Table*)

Initially, the **PQRI Diagnosis Check** was renamed to **PQRS Diagnosis Check** but upon further research it was determined that the code checking possibilities were too numerous to maintain for the current PQRS program, so the **PQRS Diagnosis Check** field has been removed.

Transactions

Procedure Entry Function, Edit an Encounter, Unposted Procedures, and Pre-Treatment

Enhancements have been made to properly default the applicable Diagnosis Code tab based on the Accounting Date and the ICD-10 Activation date for the primary insurance carrier or the Case insurance carrier (if applicable).

Warning: Although every effort has been made to default the correct Diagnosis tab, some situations may occur that require you to switch to the ICD-9 tab. One possible situation would be, you access the Procedure Entry Function for a patient account that has a primary insurance carrier that has an **ICD-10 Activation** date of 10-1-2015 and the **Accounting Date** is 10-2-2015. The ICD-10 Diagnosis tab will be defaulted, which is correct, but the actual **Date of Service** for the procedures you need to enter is September 30, 2015. In this instance you would need to switch to the ICD-9 tab to enter the diagnosis codes.

Procedure Entry Function

Enhancements have been made to ensure the applicable Diagnosis Codes are defaulted in the proper Diagnosis tabs when a Case is selected in *Procedure Entry* and *Edit an Encounter*, including *Unposted Procedures* that are opened and edited in *Procedure Entry*. The diagnosis codes will default based on the following criteria in the order listed:

- If the **Default DX's from Patient's Last Visit** is selected in the *Procedure Entry Integration* function:
 - If the **Case** has *not* been previously posted with any procedures, the **Primary Diagnosis** for the **Case** will default. If the **Primary Diagnosis** field for the **Case** is blank, then no diagnosis code(s) will default.
 - If the **Case** has been previously posted with procedures, the diagnosis codes for the previously posted procedures for the **Case** will default. Also, if a '#' is stored in the **Primary Diagnosis** field for the **Case**, the diagnosis codes from the previously posted procedures for the **Case** will default.
- If the **Default DX's from Patient's Last Visit** is *not* selected in the *Procedure Entry Integration* function (regardless of whether the **Default Diagnosis** field in the *Patient Name & Address* screen contains a '#' or not):
 - If a **Case** is selected that contains a **Primary Diagnosis**, that Diagnosis Code will default. Also, if a '#' is stored in the **Primary Diagnosis** field for the **Case**, the diagnosis codes from the previously posted procedures for the **Case** will default. If the **Primary Diagnosis** field for the **Case** is blank, then no diagnosis code(s) will default.

Procedure Entry Function and Unposted Procedures

Modifications have been made to allow procedures to be posted when only ICD-10 Diagnosis codes have been entered. Previously, you could not save an encounter without an ICD-9 Diagnosis code.

Transactions (cont.)

Procedure Entry Function and Edit an Encounter

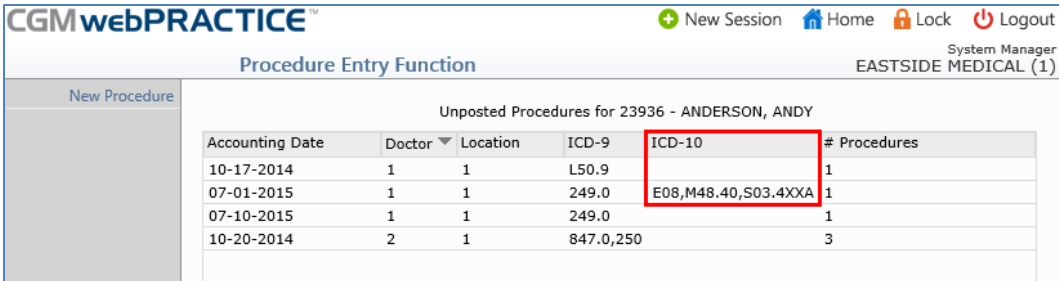
When you enter or edit encounters or edit unposted procedures and click **Save** or **Store**, additional controls have been put in place to ensure that the applicable *type* of ICD codes are entered based on the Date(s) of Service for the procedure(s) and the **ICD-10 Activation** date of the primary insurance carrier.

Procedure Entry Function

During the transition period when insurance carriers are switching over to ICD-10 codes and you need to enter encounters that contain both ICD-9 and ICD-10 Diagnosis codes, you could receive the *CPT/DX Linking* notification message twice - once for the ICD-9 codes and another for the ICD-10 codes.

Procedure Entry Function

When a patient account is selected that has unposted procedures that contain ICD-10 codes, the screen has been updated to display the ICD-10 codes.



CGM webPRACTICE™						
Procedure Entry Function						
Unposted Procedures for 23936 - ANDERSON, ANDY						
Accounting Date	Doctor	Location	ICD-9	ICD-10	# Procedures	
10-17-2014	1	1	L50.9	E08,M48.40,S03.4XXA	1	
07-01-2015	1	1	249.0	E08,M48.40,S03.4XXA	1	
07-10-2015	1	1	249.0		1	
10-20-2014	2	1	847.0,250		3	

Procedure Entry Function - ***CGM webCODER™ Clients Only***

The CGM webCODER interface has been updated to support checking ICD-10 codes. Previously, it only supported checking ICD-9 codes. The **Check Codes** Action Column function checks the codes separately for ICD-9 and ICD-10 codes. The type of codes checked when you click **Check Codes** is determined by which Diagnosis tab is the 'active' tab.

A new **Check ICD-## Codes** Action Column button has been added to the *webCODER Results* screen so you can easily check the other version of ICD codes. The button label will toggle between **Check ICD-9 Codes** and **Check ICD-10 Codes**, depending on which codes were initially checked.

Unposted Procedures - ***CGM webCODER Clients Only***

Enhancements have been made so that all procedures that originate from webMOBILE, E-Superbill or Interfaces will be checked for both ICD-9 and ICD-10 codes, if both types of codes have been entered for the procedures. The most critical **Status** icon will be displayed in the **Status** column, if the results are different between ICD-9 and ICD-10. For example, if the results for checking ICD-9 codes returns a green Status icon but the ICD-10 code results for the same procedures returns a red Status icon, the red Status icon will display on the *Unposted Procedures* screen.

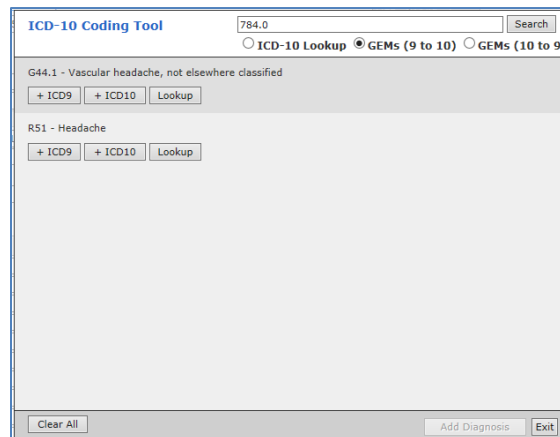
Transactions (cont.)

Procedure Entry Function – ICD-10 Coding Tool

The **ICD-10 Coding Tool** has been enhanced to provide easier navigation and code selection. A **Back** button has been added in addition to redesigning and renaming the diagnosis code selection buttons. Screenshot examples for the ‘before enhancements’ and ‘after enhancements’ have been provided below in addition to the button functionality.

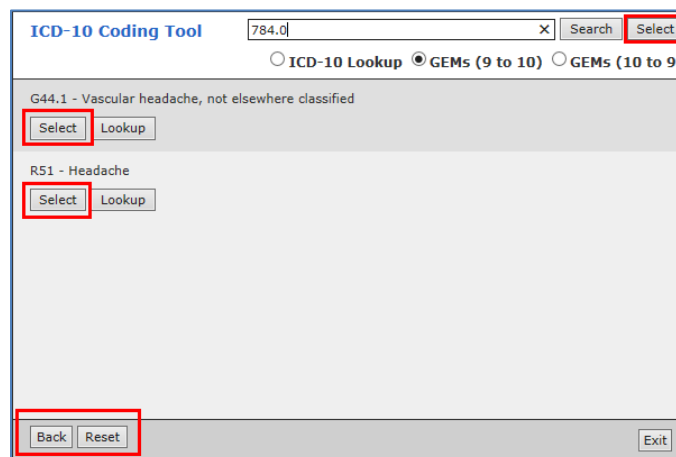
Before Enhancements:

After typing in the ICD-9 diagnosis code 784.0 and selecting the GEMS (9 to 10) function, the equivalent ICD-10 codes display. You could click the **+ ICD9** button below either code to add the ICD-9 code (784.0) typed in the field at the top of the window or you could click the **+ ICD10** button below one of the codes to add it.



After Enhancements:

After typing in the ICD-9 diagnosis code 784.0 and selecting the GEMS (9 to 10) function, the equivalent ICD-10 codes display. You can click the **Select** button in the top-right portion of the window to add the ICD-9 code (784.0) typed in the field at the top of the window or you can click the **Select** button below one of the ICD-10 codes to add it. The **Clear All** button has been renamed **Reset** and a **Back** button has been added to the left of it.



Transactions (cont.)

Quick-Post

Enhancements have been made to the Diagnosis 1 and Diagnosis 2 fields to prepare for the transition to ICD-10 Diagnosis codes. In the past, if a **Default DX** was entered in the Default CPT/DX DMS record on the patient's account, this code would default into the **Diagnosis 1** field and if the **Default DX** field was blank, the primary and secondary diagnosis codes from the last posted Encounter on the patient's account would default. Now, the **Default DX** will still default if it has been entered, but the current system date controls which diagnosis codes from the last posted encounter will default. If the current date is 9-30-15 or earlier, the primary and secondary diagnosis codes from the last posted ICD-9 Encounter will default and if the current date is 10-1-2015 or later, the primary and secondary diagnosis codes from the last posted ICD-10 Encounter will default.

E-Superbill and Unposted Procedures

Enhancements have been made to support ICD-10 Diagnosis codes. The **Diagnosis Code** field has been expanded in the E-Superbill function and the codes will populate into the applicable diagnosis code column in Unposted Procedures.

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

**Released in Patch 7.4.8.6 on 07-27-2015*

The Centers for Medicare and Medicaid Services (CMS) have released the 2015 Medicare Physician Fee Schedule effective July 1, 2015. The updated files are available for import by selecting **2015** in the **Fee Schedule Year** list and the applicable file name in the **Fee Schedule File** list.

Import and Post ERA Files (*Electronic Remittance Advice (ERAs)*)

Any payment exception messages that are only *warning* messages and do not prevent the payment(s) or adjustment(s) from posting, have been modified to print differently on the Exception report. Any warning messages that print for a line item will be preceded by an asterisk (*) and the additional message text will print at the end of the report. For example, the '*Allowed Amount doesn't match – ITEM POSTED*' warning message has been changed to '**Allowed Amount doesn't match.*' and then at the end of the report, '**This message is only a warning. Item posted unless an Exception was encountered during processing*' will print.

Transactions (cont.)

Import and Post ERA Files (*Electronic Remittance Advice (ERAs)*)

When ERA payments are received from secondary payers, they always include adjustment code **OA-23** as an informational code to indicate another payer previously adjudicated the payment. Typically, we instruct clients to not select the **Auto Adjustment (ERA)** check box in the *Insurance Denial Code* table for Adjustment Code 23, since the amount indicated to be written off will have already been paid or adjusted by the primary payer. This turned out to cause a lot of unnecessary review since the *'Adjustment needs review'* payment exception message was appearing on every single transaction for a secondary ERA file. To resolve this, the payment exception message *'Adjustment needs review'* for adjustment code **OA-23**, will now be suppressed from printing on the Payment Exception report.

Import and Post ERA Files (*Electronic Remittance Advice (ERAs)*)

The payment exception message *'Adjustment needs review-not adjusted'* has been modified to more clearly reflect the actual Adjustment Code that could not be posted. The message has been changed to *'The Following Adj Code could not be posted: Code – XX' (XX = Adjustment Code.)* In addition, if the insurance carrier did not pay anything on the line item, the following messages will be provided:

- If the Adjustment Code in the *Insurance Denial Code* table has the **'Auto Post \$0.00 Payment (ERA)** check box selected, ***'A \$0.00 payment was posted'*** will print.
- If the Adjustment Code in the *Insurance Denial Code* table does not have the **'Auto Post \$0.00 Payment (ERA)** check box selected, ***'A \$0.00 payment was not posted'*** will print.

The following new **'Tip'** has also been added to the Excel version of the Exception report: *'This adjustment can be changed to automatically post for ERA's using the Maintain Insurance Denial Codes function.'*



CGM webTOOLS™

CGM webMOBILE

Enhancements have been made to allow the entry of ICD-10 codes. When saving new encounters in CGM webMOBILE, you can now enter either ICD-9 codes or ICD-10 codes but not a combination of ICD-9 and ICD-10 for the same procedure. All ICD9 field labels and menus within CGM webMOBILE have been changed to “ICD”.