What's New in

CGM webPRACTICE™ v7.4.18

Final Release Notes

December 5, 2017

Hosted Clients Release Date: Dec. 6, 2017

Self-hosted Clients Release Date: Dec. 13, 2017

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 v7.4.18. 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.7.4.18 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
	N/A	

Summary of Changes to Document

Version 1 of Preliminary Public Release Notes released November 27, 2018.

Section	Function	Added/Deleted/Revised
System	5010 Electronic Claim Loop and Segment Editor	Added release note
System	Patient Check In/Out Integration	Added release note
Schedule	Patient Check In/Out	Added release note
Transactions	Import and Post ERA Files	Added release note

Billing

Paper Claim Editor (Claims Management Menu)

Arizona Medicaid (AHCCCS) has specialized requirements for the values that appear in Box 22-1 on the CMS-1500 paper claim form when you resubmit or void Arizona AHCCCS Fee for Service claims. Resubmitted claims (resubmission code 7) need to contain an "A" and voided claims (resubmission code 8) need to contain a "V". A new **@Claim.Calculated.AHCCCSBox22Resub()** value has been created so you can create a new Profile for the CMS-1500 claim form so the correct values will be included on the claims. These updates were released in Patch # 7.4.17.10 on October 30, 2017.

Collections

Work Accounts (*Insurance Collections*)

A new **Reason** column has been added to the *Work Accounts Summary* screen to display the Follow-up reason when one is entered.

Also, the Work Accounts details screen has been enhanced to display the Follow-up reason when you point to the Collection Status (**Col**) code for a procedure.

Reports

Corporate Reports

Any database that has the **Training Database** check box selected in the *Change Database Parameters* function will no longer be displayed as a selectable option in the **Database Number** list when printing any of the following reports:

- Adjustment Analysis Reports
- Payment Analysis Reports
- Productivity Analysis Reports
- Corporate Batch Report
- Corporate Billing Productivity
- Corporate Daily Register

CGM MIPS™ Reporting Solution (Insurance Related Reports)

The CGM PQRS™ Reporting Solution has been renamed to the CGM MIPS™ Reporting Solution and the functionality has been enhanced to include data for every insurance carrier and to print by **Performing Doctor**.
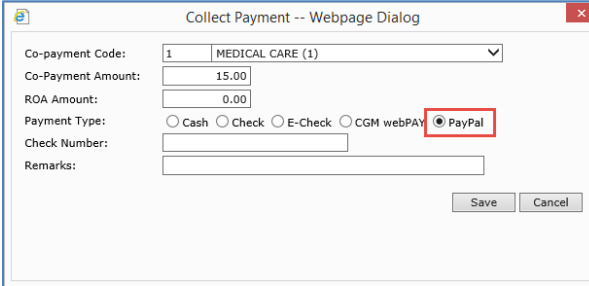
Compile UDS Reports and Print UDS Reports (*UDS Reports*)

Enhancements for the UDS Reports *6a Selected Diagnoses and Services Rendered* and *6b Quality of Care Measures* have been released to meet the new Calendar Year 2017 reporting standards for Reporting Year 2018.

Schedule

Patient Check In/Out

If you completed the new *Additional Payment Type* fields in the *Patient Check In/Out* Integration function, the additional payment type will display in the *Collect Payment* window to the right of the pre-defined payment types. For additional information, see the *Patient Check In/Out Integration* entry under the *System* section of these release notes.

System

5010 Electronic Claim Loop and Segment Editor (*Claims Management Menu*) ***Professional Claims Only*** –
Previously, secondary **Professional** 5010 electronic claims were not reporting CAS*OA or CAS*PI
adjustment codes and amounts from payments collected through ERA's. To resolve this, new **OA-Other
Adjustments** and **PI-Provider Initiated reduction** CAS segments were added within Loop 2430, with six
Adjustment Reason Code, Adjustment Amount and Adjustment Quantity elements. In addition, the
existing CAS Segments for **Line Adjustments** was changed to **PR-Patient Responsibility** and **Contractual
Adjustments** was changed to **CO-Contractual Adjustments**.
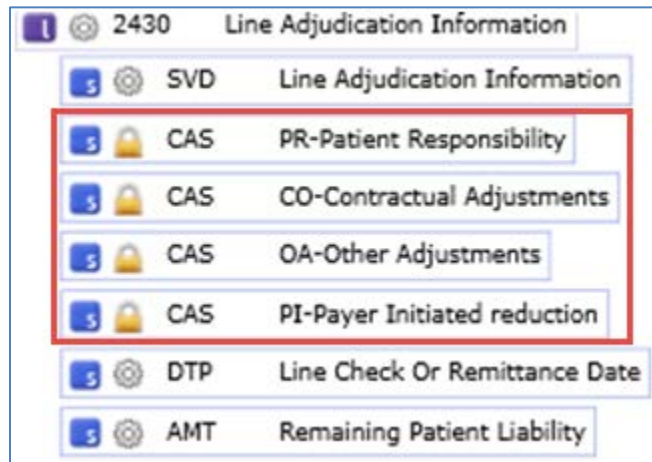
Each of the elements in the **OA-Other Adjustments** and **PI-Payer Initiated reduction** CAS Segments use
@Claim.Calculated.CASCOAdjustment(Line,Element), where **Line** is the line number it needs to return a
value for and **Element** should be **OA** or **PI,** so these pieces can be collected from the ERA.

5010 Electronic Claim Loop and Segment Editor *(Claims Management Menu) *Institutional Claims Only** -
Updates were made to the base claim map for Institutional claims to generate the proper values and
codes for the *Unit or Basis For Measurement Code*. The NUBC UB-04 Manual has a list of 150+ Revenue
Codes that require the number of **Days** with code "DA" in the Loop 2400 SV2 segment, instead of the
standard **Units** code "UN". These updates were released in Patch # 7.4.17.10 on October 30, 2017.

CGM webPAY Integration (*Database Maintenance Menu, Integrations, CGM webTOOLS Integrations*) –
CGM webPAY™ Clients Only
A new **Save Card on File** check box has been added so you can choose if you want the **Save Card on File**
option to default as 'selected' each time the CGM webPAY Payment screen is accessed.

System (cont.)

Patient Check In/Out Integration (*Database Maintenance Menu*, *Integrations, Schedule Integrations*)
You can now define an additional payment type for payments that do not necessarily match the pre-defined options, for example 'PayPal', using the new **Additional Payment Type** fields. You can specify the **Payment Type Button Name** and assign a **Default Payment Code**. For additional information, see the *Patient Check In/Out* entry under the *Schedule* section of these release notes.

Tables

Procedure Price Functions

All of the functions related to Procedure Prices have been renamed and enhanced to provide a more logical workflow.

Maintain Procedure Code Prices – **Non Facility** and **Facility** headings have been added above the price fields, in addition to a **CHC Only** heading above the **Nominal Fee** and **Cost** fields.

Import/Export Procedure Prices has a new lead-in screen to separate the two functions.

Tables (cont.)

In the *Import* function, you have the option to copy the prices for the current effective date into a new or existing effective date, prior to importing new prices. It is no longer necessary to perform the *Copy Procedure Prices* function prior to accessing the *Import* function.

Import Procedure Prices

Copy from Price Effective Date	11-15-2017 11-15-2017 ✓
Copy to Price Effective Date	11-16-2017 ✓
Import File Path	C:\PriceLists\2018Prices.csv

Print Procedure Prices – added the option to sort by **Brief Description** and a **Prices to Print** field with options to select **Facility**, **Non Facility** or **Both**. Two new columns for **Cost** and **Nominal Fee** were added to both the standard report and the Excel version.

Print Procedure Prices

Sort by	○ Code ● Brief Description ○ Procedure Description
Begin with Sort	
End with Sort	
Price Effective Date	11-15-2017 11-15-2017 ✓
Include Zero Amounts	☐
Prices to Print	○ Facility ○ Non Facility ● Both

Sample Report

```
Nov 16, 2017                           EASTSIDE MEDICAL                              Page 40
                                   Print Procedure Prices
                                  Sorted by Brief Description
                                  Procedure First through End
                                  Price Effective Date 11-15-2017
                                 Facility and Non Facility Prices


    Code      Description            Price     Cost  Nominal Fee       Rate A   Rate B   Rate C   Rate D   Rate E
    -------------------------------------------------------------------------------------------------------------


    01214     ANESTH, REPLACEMENT      0.00     0.00       0.00  Fac:
    01402     ANESTH, REPLACEMENT    100.00     0.00       0.00  Non Fac:
    01402     ANESTH, REPLACEMENT      0.00     0.00       0.00  Fac:
    01215     ANESTH, REVISE HIP R   100.00     0.00       0.00  Non Fac:
    01215     ANESTH, REVISE HIP R     0.00     0.00       0.00  Fac:
    00100     ANESTH, SALIVARY GLA   100.00     1.50      13.50  Non Fac:    2.50     3.50     4.50     5.50     6.50
    00100     ANESTH, SALIVARY GLA     7.50     1.50      13.50  Fac:        2.50     3.50     4.50     5.50     6.50
    01622     ANESTH, SHOULDER ART   100.00     0.00       0.00  Non Fac:
    01622     ANESTH, SHOULDER ART     0.00     0.00       0.00  Fac:
```

Tables (cont.)

Copy Procedure Prices – Modified the **Effective Date** field names to provide a better description of the functionality.

For additional information, see the *Update Procedure Prices Functions* entry and the *Update Fee Schedule Amounts* entry under the *Tables* section of these release notes.

Update Procedure Prices Functions

In an effort to improve the workflow for updating procedure prices, the existing functionality has been combined into a single function, *Update Procedure Prices*.

From within this function, you can select to update the prices, update prices using a Fee Schedule or update prices with RVU Values.

After you select a function, you will have the option to copy the prices for the current effective date into a new or existing effective date, prior to updating them. It is no longer necessary to perform the *Copy Procedure Prices* function prior to accessing the function. In addition, many of the fields have been enhanced to provide consistency and ease of use while updating prices. For additional information, see the *Update Fee Schedule Amounts* entry and the *Procedure Prices Functions* entry under the *Tables* section of these release notes.

Tables (cont.)

Update Fee Schedule Amounts (*Fee Schedule Table) ***New Functionality****

The functionality to *Update Fee Schedule Amounts* has been removed from the *Update Procedure Prices* function and placed into a separate function under the *Fee Schedule Table* menu. Previously, this functionality would only update the Non Facility Alternate Fee Amounts. It has been enhanced so you can select which Alternate Fees to update – **Facility**, **Non Facility** or **Both**. In addition, the **Begin with Procedure Code** and **End with Procedure Code** fields have been enhanced to provide Table search functionality. The **Percent Update** field was also renamed to **Percentage to Update Prices**.

For additional information, see the *Update Procedure Prices Functions* entry and the *Procedure Prices Functions* entry under the *Tables* section of these release notes.

Taxonomy Code Table (*Doctor Code Table*)

The updated Taxonomy Codes, effective October 1, 2017 have been released. The description for code 226000000X has been changed to Recreational Therapist Assistant and codes 207WX0109X (Neuro-ophthalmology) and 207WX0110X (Pediatric Ophthalmology and Strabismus Specialist) were added. These updates were released in Patch # 7.4.17.2 on October 2, 2017.

Transactions

Daily Register (*Transaction Journals*)

If you select to print the report with **Transaction Details**, enhancements have been made to provide a list of the individual transactions that every payment and adjustment was allocated to and the amount allocated.

Quick Post

Previously, if you entered a **Batch Number**, it was possible that the number would not display or store properly after you clicked **Save** to proceed with posting procedures. This has been resolved. This update was released in Patch # 7.4.17.10 on October 30, 2017.

Edit an Encounter

A new **Original Source** Action Column button has been added to provide an audit trail for accountability when unposted procedures are received from CGM webMOBILE™ or charge interfaces. Since encounters may be modified prior to posting, you can now access a list of the procedure codes initially contained in each encounter along with the Source, Date and Time received and the User Code if the procedures were received from CGM webMOBILE.

> **Note**: The **Original Source** Action Column button will only display if the procedures were received from CGM webMOBILE or a charge interface.

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

A new "*Duplicate Procedure Found – not posted*" ERA Exception reason has been added for situations when two or more procedures for a date of service, amount and/or modifiers, match the ERA. The payment will be placed on the Payment Exception report so you can determine which procedure it should be applied against.