



CompuGroup™
Medical

What's New in

CGM webPRACTICE™ v7.4.20

Final Release Notes

June 12, 2018

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 v7.4.20. 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.7.4.20 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
27	Import Fee Schedules	Load the updated files if applicable.
27	Load the HCPCS Codes	Load the updated files if applicable.
27	Import the RVU Unit Values	Load the updated files if applicable.
7	Non-Delinquent Payment Plans	Complete the Non-Delinquent Payment Plan Status fields in the <i>Patient Collections Integration</i> function (<i>System, Database Maintenance Menu, Integrations, Collections Integration</i>), prior to adding a non-delinquent payment plan for a patient.
8	Patient Collections Integrations	***CGM webPAY™ Clients only*** using <i>Payment Plans</i> - select the Automatic Roster Population check box.

Summary of Changes to Document

Version 1 of Preliminary Public Release Notes released June 4, 2018.

Section	Function	Added/Deleted/Revised
Summary of Action Required Items	Non-Delinquent Payment Plans	Added
Collections	Patient Collections	Revised-Added a Note for the ***Action Required***
Collections	Patient Collections	Added
Tables	Credential Code Table	Revised-Added DO and NP codes to the base table
Schedule	Patient Check In/Out and Post No-Show Appointments	Revised-Added the Post No-Show Appointments function and revised warning message text



CGM webPRACTICE Enhancements

User Desktop Functions - Practice Vitals Dashboard

The **Patients New** row has been renamed **New Pt Appts** to better reflect that the totals represent the number of new patient appointments. The totals have also been updated to include any appointments that have a Type of Visit code that has **New Patient** selected or appointments that have **New Patient** selected. Previously, these totals only included appointments that had **New Patient** selected and ignored the Type of Visit, which potentially could cause some appointments from not being counted.

Note: If a patient appointment has **New Patient** selected and also has a Type of Visit code that has **New Patient** selected, that appointment will only be counted as one new patient appointment.

Collections

Patient Collections ***Action Required***

Payment Plan functionality has been enhanced and streamlined for *Work Accounts* and *Non-Delinquent Payment Plans*. In addition, if your practice has a current *CGM webPAY* subscription, both *Collection* and *Non-Delinquent Payment Plans* have been enhanced so you can set them up to automatically collect credit card payments using *CGM webPAY*.

In *Work Accounts*, the Payment Plan fields appear within the screen now instead of a separate Payment Plan dialog box. If *CGM webPAY* is installed and activated in the current database, the *CGM webPAY* options will be available below the Payment Plan fields.

Work Accounts
System Manager
EASTSIDE MEDICAL (1)

Patient Name:	Smith, Taylor (100008)	Home Phone:	
Guarantor Name:	Smith, Taylor	Work Phone:	
Internal Comment:			
Last Statement:	04-17-2018	Send Statement:	Y
Billing Group:	BCBS PATIENTS (BC)	Pri Carrier:	BCBS N
Last Ins Pmt:		Last Visit:	04-20-2017
Last Per Pmt:		Payment Plan:	Yes - CGM webPAY
Collection Status:	PAYMENT PLANS (5)	Next Contact:	
Next Letter:			

	Work Status:			Unworked			
	Balance	Current	30	60	90	120	150
Patient:	108.00	0.00	0.00	0.00	0.00	0.00	108.00
Insurance:	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total:	108.00	0.00	0.00	0.00	0.00	0.00	108.00

Start Date of Plan	03-10-2018						
Payment Amount \$	10.00	<input checked="" type="checkbox"/>					
Payment Days	30	<input checked="" type="checkbox"/>					
Next Payment Date	05-09-2018						
Last Payment Date	04-11-2018						
Last Pmt Amount \$	10.00						
Status for Default	6		PAYMENT PLAN FAILED (6) <input checked="" type="checkbox"/>				

CGM webPAY	<input checked="" type="checkbox"/>						
Merchant							
Payment Method			Visa ending in 8888, Exp. Date: 12/2020				

Q
Save Cancel Delete

The *Non-Delinquent Payment Plan* function has also been enhanced to display the patient's summary and account aging information at the top of the screen. If *CGM webPAY* is installed and activated in the current database, the *CGM webPAY* options will be available below the Payment Plan fields.

Note: *Action Required***** You must complete the **Non-Delinquent Payment Plan Status** fields in the *Patient Collections Integration* function (*System, Database Maintenance Menu, Integrations, Collections Integration*), prior to adding a non-delinquent payment plan for a patient.

Collections (cont.)

Non-Delinquent Payment Plan
System Manager
EASTSIDE MEDICAL (1)

Patient Name: TAYLOR, AMANDA (25477) Home Phone:
 Guarantor Name: TAYLOR, AMANDA Work Phone:
 Internal Comment:
 Last Statement: 12-16-2015 Send Statement: Y
 Billing Group: UHC PATIENTS (UHC) Pri Carrier: UHC Y
 Last Ins Pmt: Last Visit: 12-16-2011
 Last Per Pmt: Payment Plan: Yes - CGM webPAY
 Collection Status: NON-DELINQUENT PAYMENT PLAN (10)

	Balance	Current	30	60	90	120	150
Patient:	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Insurance:	526.00	0.00	0.00	0.00	0.00	0.00	526.00
Total:	526.00	0.00	0.00	0.00	0.00	0.00	526.00

Start Date of Plan: 02-02-2018
 Payment Amount \$: 50.00 ✓
 Payment Days: 30 ✓
 Next Payment Date: 03-04-2018
 Last Payment Date: 03-02-2018
 Last Pmt Amount \$: 100.00
 Status for Default: 10 NON-DELINQUENT PAYMENT PLAN (10) ✓

CGM webPAY:
 Merchant:
 Payment Method: MasterCard ending in 0057, Exp. Date: 12/2020

****CGM webPAY Clients Only** - **Action Required****

If you set up Payment Plans to use CGM webPAY; automatic payment collection is dependent on the Collection Roster being populated daily. In the *Patient Collections Integration* function, you should select the **Automatic Roster Population** check box. Payments will be automatically collected one day prior to the **Next Payment Date** stored on the patient's account, when the Collection Roster is populated and they will be stored as *Unposted Payments* with a **Source of Payment Plan**.

If a processing error occurs during the collection of a CGM webPAY Payment Plan payment, a detailed error message will display at the bottom of the Payment Plan screen the next time the patient's Payment Plan is accessed.

Start Date of Plan: 03-01-2018 ✕
 Payment Amount \$: 25.02 ✓
 Payment Days: 30 ✓
 Next Payment Date: 05-30-2018
 Last Payment Date:
 Last Pmt Amount \$:
 Status for Default: 6 PAYMENT PLAN FAILED (6) ✓

CGM webPAY:
 Merchant: Phoenix (88800002842)
 Payment Method: Discover ending in 6909, Exp. Date: 12/2020

→ Payment Attempt on 04/30/2018 failed: Insufficient Funds

Collections (cont.)

For additional information, see the following entries in these release notes:

- *Populate Collection Roster* or *Automated Population* entry and the *Manage Payment Plans* entry under the *Collections* section
- *Patient Collections Integration* entry under the *System* section
- *Unposted Payments* entry under the *Transactions* section

Populate Collection Roster or Automated Population (Patient Collections)

Enhancements have been made so that when the Collection Roster is populated, any CGM webPAY Payment Plan payments that are currently stored in *Unposted Payments* will be taken into account, when determining if an account is delinquent and if a Payment Plan is on track or not.

Note: The following criteria are used to determine when to automatically collect CGM webPAY Payment Plan payments:

- If no personal payments were posted within the payment plan time period (example: last 30 days), then collect the full payment plan payment amount
- If there have been personal payments posted that are greater than or equal to the payment plan payment amount within the payment plan time period, then do not collect the payment plan payment amount
- If there have been personal payments posted that are less than the payment plan payment amount within the payment plan time period, collect the difference between the amounts. For example: If payment plan payment amount is \$50 and there have been only \$30 of personal payments posted within the last 30 days, then CGM webPAY will collect the difference of \$20.
- Co-payments posted on patient accounts are not included in the calculation of personal payments.

For additional information, see the following entries in these release notes:

- *Patient Collections* entry and the *Manage Payment Plans* entry under the *Collections* section
- *Patient Collections Integration* entry under the *System* section
- *Unposted Payments* entry under the *Transactions* section

Manage Payment Plans (Patient Collections) ***New Functionality***



The *Print Payment Plan Report* has been enhanced and renamed to *Manage Payment Plans*. With this function you can view every patient that has a payment plan in a sortable list. You can click anywhere in payment plan row to edit or delete it.



Manage Payment Plans								SYSTEM MANAGER Eastside Medical (1)	
Add/Edit Filter	Acct#	Patient	Plan Started	Next Pmt Date	Last Pmt Amount	Last Pmt Date	# Days to Pay	Collection Status	CGM webPAY
Remove Filter	73	BURNETT, DORIS	02-21-2018	04-23-2018	15.00	03-23-2018	15.00	30 PAYMENT PLANS (5)	Yes
Print	90	SMITH, SHIRLEY	09-26-2017	04-26-2018	5.00	02-01-2018	1,000.00	30 PAYMENT PLAN FAILED (6)	No
Refresh	156	BAILEY, OUIDA	02-26-2018	04-28-2018	10.01		0.00	30 PAYMENT PLAN FAILED (6)	Yes
			Payment Attempt on 04/04/2018 failed: General Card Auth Decline (D2999)						
	9573	ALVORD, CODY	02-25-2018	04-27-2018	10.00	03-26-2018	10.00	30 PAYMENT PLANS (5)	Yes


Collections (cont.)

You can filter the payment plan listing by clicking the **Add/Edit Filter** Action Column button and remove any previously applied filter by clicking the **Remove Filter** Action Column button.


Manage Payment Plans Filter

Start Payment Date  Through 

Next Payment Date  Through 

Patient Acct 

Plan Type CGM webPAY Non-CGM webPAY All

Collection Status 

The **Print** Action Column button allows the printing of the payment plans in a format similar to the previous *Print Payment Plan Report* function, with an added **CGM webPAY** column indicating whether the payment plan is a CGM webPAY payment plan or not. The report will print in the same order as the listing displayed on the screen. The report can also be printed to *Excel via MyReports*.

For additional information, see the following entries in these release notes:

- *Patient Collections* entry or the *Populate Collection Roster* or *Automated Population* entry under the *Collections* section
- *Patient Collections Integration* entry under the *System* section
- *Unposted Payments* entry under the *Transactions* section

Patient Collections

The patient's Primary, Secondary, Tertiary insurance carrier codes and names are now displayed at the top of the *Work Accounts* screen and the *Non-Delinquent Payment Plans* screen. Previously, only the Primary Carrier insurance code was displayed.

Collections (cont.)

Work Accounts (Patient Collections)

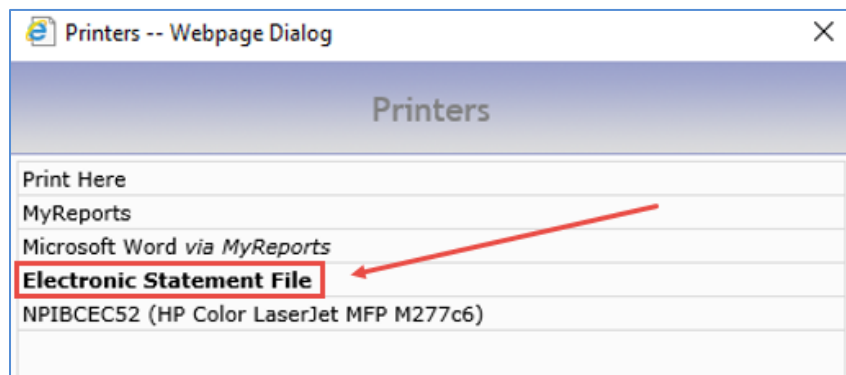
Procedures, Payments and **Adjustments** Action Column buttons have been added so you can easily post transactions while working collection accounts.

Work Accounts			
Summary			
Next			
Mark As Worked	Patient Name:	Allen, Robert (25940)	
Previous	Guarantor Name:	Allen, Robert	
Change	Internal Comment:		
Add a Note	Last Statement:	05-18-2018	
Statement	Billing Group:	BCBS PATIENTS (BC)	
Payment Plan	Last Ins Pmt:		
Find Patient	Last Per Pmt:		
Print a Letter	Collection Status:	PAST DUE REMINDER (1) ▼	
Procedures	Next Letter:	ECL PAST DUE NOTICE ▼	
Payments		Balance	Current 30
Adjustments			

Billing

Print Patient Statements

If you are currently setup to send Electronic Patient Statements, a change has been made to eliminate the need for you to name the statement file when printing it to disk. When you print statements, the *Output to Disk* option had been replaced with *Electronic Statement File*. When statements are printed to the *Electronic Statement File* printer, the statement file will automatically be named by the system. The system-generated filename is guaranteed to be unique and will eliminate any issues caused by not naming statement files with unique filenames. The filename will be in the format of YYYYMMDD.Database# + "S". Example: 20180507.1S. If the auto-generated statement file already exists, the file name will be appended with a number after the date. Example: 20180507_1.1S.

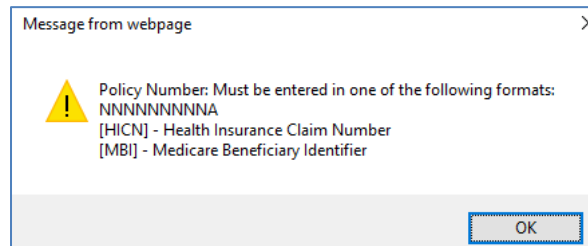


Patient

Change Patient Data

Insurance

If you enter an invalid policy number when adding or editing patient's insurance policy and that insurance carrier code has **Policy# Formats** entered, the warning message now displays each **Policy # Format** on its own line. Previously, every format was listed on the same line separated by commas.



For additional information, see the *Maintain Insurance Carriers* entry under the *Tables* section of these release notes.

Note: This change was also made to the **Policy Number** field in *Quick Registration (Scheduling)*.

Insurance - Verify Eligibility *CGM webVERIFY™ Clients Only*

If you selected the **Ask Date of Service to Verify** check box in the *CGM webVERIFY Integration* function, a new **Date to Verify** field will display when you click *Verify Eligibility* for a patient's insurance policy. This allows you to verify eligibility for past, present or future dates of service. For additional information, see the *CGM webVERIFY Integration* entry under the *System* section of these release notes.

Reports

MyReports

A **Refresh** Action Column button has been added, so you can refresh the listing of reports to see if any new reports have completed while you are within the function.

RVS Productivity Reports (*Statistical Reports, Productivity Analysis Reports*)

All of the reports have been enhanced so you can select if you want to print Facility or Non-Facility amounts. Previously, the reports would only print Non-Facility amounts. Two of the fields were also renamed; **(A)ct or (S)ervice Date** was changed to **Print By** and **Work Units or Total Units** was changed to **Unit Type**. In addition, formatting changes were made to the Excel version to print all of the Summary Totals and the Grand Total at the bottom of the report.

RVS Productivity by Billing Group

RVS Schedule Code	<input type="text"/>	<input type="text"/>	✓
Effective Date	04-18-2018		✓
Begin with Billing Group	<input type="text"/>		
End with Billing Group	<input type="text"/>		
Month for Report	04-2018		
Print with Codes	<input checked="" type="checkbox"/>		
Print By	<input checked="" type="radio"/> Accounting Date	<input type="radio"/> Service Date	✓
Unit Type	<input checked="" type="radio"/> Total	<input type="radio"/> Work	✓
RVS Type	<input type="radio"/> Facility	<input checked="" type="radio"/> Non-Facility	

Reports (cont.)

New Patient/Follow-Up Reports - All Sorting Options

The reports have been modified to count all of the ‘follow-up’ visits after the first date of service posted to the account. Previously, the **Date of First Visit** stored on the *Patient Name and Address* screen was used to determine the date of the first visit, which was not necessarily the actual first visit date and would result in incorrect values for the Follow-Up patient reports.

In addition, the lead-in screens for the reports have been modified to make it clearer which report type you are printing. The first screen provides the two options for you to select which type of report you want to print.

New Patient/Follow-Up by Location Code

New Patients
 Follow-Up Patients ✓

The screen titles were also updated so they reflect which report option you selected.

Sample Follow-Up Patients screen:

Follow-Up Patients Sorted by Location

Begin with Location	<input type="text"/>
End with Location	<input type="text"/>
Beginning Date	<input type="text" value="04-30-2018"/>
Ending Date	<input type="text" value="04-30-2018"/>
Summary Only	<input type="checkbox"/>

Sample New Patients screen:

New Patients Sorted by Location

Begin with Location	<input type="text"/>
End with Location	<input type="text"/>
Print by	<input type="radio"/> Posted Date of Service <input checked="" type="radio"/> Date of First Visit
Beginning Date	<input type="text" value="04-30-2018"/>
Ending Date	<input type="text" value="04-30-2018"/>
Summary Only	<input type="checkbox"/>

Reports (cont.)

Sorted Lists of Patients and Double Sorted Lists of Patients (*Patient Listings*)

The **Patients with Activity Since** field has been removed and new **Print from Service Date** and **Print through Service Date** fields have been added, so you can select a range of dates when printing this report. The **Print from Service Date** field will automatically default to one year prior to the current day.

List of Patients by Loc and Billing Group

Begin with Location Code Q

End with Location Code Q

Begin with Billing Group Q

End with Billing Group Q

Print Detail of Patients

Alpha or Numeric Alphabetic Numeric

Include Address Information

Print from Service Date

Print through Service Date

Include Patients with No Activity

Print from List

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

New double sorted reports have been added. These reports are also available on the *Patient, Patient Listings, New Patient/Follow-Up Reports* menu.

Patient Listings...

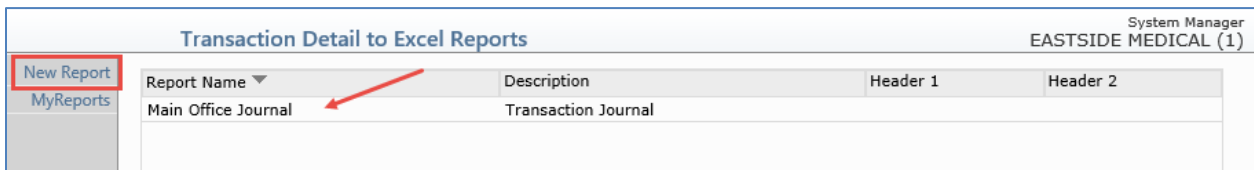
- Alphabetic List of Patients
- New Patient/Follow-Up Reports...
 - New Patient/Follow-Up by Billing Group
 - New Patient/Follow-Up by Date
 - New Patient/Follow-Up by Location Code
 - New Patient/Follow-Up by Patient Class
 - New Patient/Follow-Up by Performing Dr
 - New Patient/Follow-Up by Referral Source
 - New Patient/Follow-Up by Referral Type
 - New Patient/Follow-Up by Responsible Dr
 - New Patient/Follow-Up by Zip Code
 - Double Sorted New Patient/Follow-Up Reports...
 - New Patient/Follow-Up by Resp Dr and Billing Group
 - New Patient/Follow-Up by Resp Dr and Referral Source
 - New Patient/Follow-Up by Resp Dr and Referral Type

Reports (cont.)

Transaction Detail to Excel Reports (Transaction Journals) ***New Functionality***

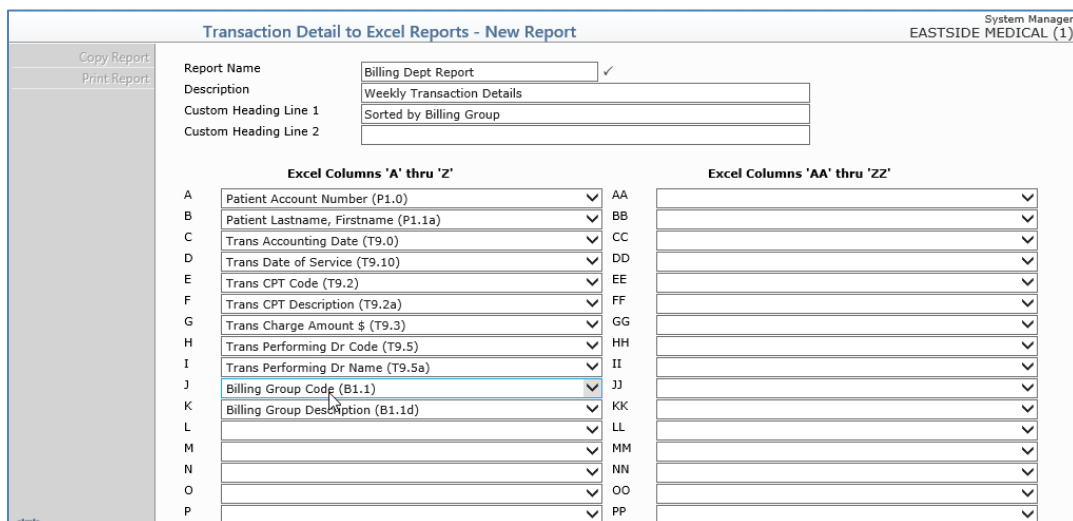
With this new function you can create customized reports to pull extensive transaction detail from each patient account. The reports can be printed to *Microsoft Excel via MyReports*, where you can sort or calculate the data to meet your needs. After you create a report, you can save the report definition for future use, so you do not have to re-define it each time you want to print it. This report is also available on the *Transactions, Transaction Journals* menu.

Upon accessing the function, any previously saved report definitions will be listed. You can select an existing report by clicking anywhere in the row or you can click the **New Report** Action Column button to create a new report.



Transaction Detail to Excel Reports				System Manager EASTSIDE MEDICAL (1)
Report Name	Description	Header 1	Header 2	
Main Office Journal	Transaction Journal			

If you click **New Report**, a blank report definition screen will display. You can name the report, provide a description of the report and set up two customized Headings to print on the report. Using the **Excel Column** fields, you can select from the drop-down lists to include data elements from posted transactions and the patient's account.



Transaction Detail to Excel Reports - New Report				System Manager EASTSIDE MEDICAL (1)
Copy Report	Report Name	Billing Dept Report	<input checked="" type="checkbox"/>	
Print Report	Description	Weekly Transaction Details		
	Custom Heading Line 1	Sorted by Billing Group		
	Custom Heading Line 2			
	Excel Columns 'A' thru 'Z'		Excel Columns 'AA' thru 'ZZ'	
A	Patient Account Number (P1.0)	▼	AA	▼
B	Patient Lastname, Firstname (P1.1a)	▼	BB	▼
C	Trans Accounting Date (T9.0)	▼	CC	▼
D	Trans Date of Service (T9.10)	▼	DD	▼
E	Trans CPT Code (T9.2)	▼	EE	▼
F	Trans CPT Description (T9.2a)	▼	FF	▼
G	Trans Charge Amount \$ (T9.3)	▼	GG	▼
H	Trans Performing Dr Code (T9.5)	▼	HH	▼
I	Trans Performing Dr Name (T9.5a)	▼	II	▼
J	Billing Group Code (B1.1)	▼	JJ	▼
K	Billing Group Description (B1.1d)	▼	KK	▼
L		▼	LL	▼
M		▼	MM	▼
N		▼	NN	▼
O		▼	OO	▼
P		▼	PP	▼

Reports (cont.)

To print a report, select an existing report from the list or create and save a new report definition.

Transaction Detail to Excel Reports				System Manager EASTSIDE MEDICAL (1)
Report Name	Description	Header 1	Header 2	
Billing Dept Report	Weekly Transaction Details	Sorted by Billing Group		
Main Office Journal	Transaction Journal			

When the report definition screen displays, click **Print Report** in the Action Column.

Transaction Detail to Excel Reports
System Manager
EASTSIDE MEDICAL (1)

[Copy Report](#)
[Print Report](#)

Report Name: ✓

Description:

Custom Heading Line 1:

Custom Heading Line 2:

Excel Columns 'A' thru 'Z'

A: ▼

B: ▼

C: ▼

Excel Columns 'AA' thru 'ZZ'

AA:

BB:

CC:

Sorting options are provided to assist in narrowing down the results. Complete the applicable fields and click **Save** to proceed with printing the report to *Microsoft Excel via MyReports*.

Transaction Detail to Excel Reports - Print
System Manager
EASTSIDE MEDICAL (1)

From Patient:

Through Patient:

From Performing Dr:

Through Performing Dr:

From Location:

Through Location:

From Date:

Through Date:

Print By: Accounting Date Service Date ✓

Include Negated Charges:

When the report definition screen displays, click **Cancel** to return to the main listing of reports. Next, click **MyReports** in the Action Column to quickly access the printed report.

Reports (cont.)

Transaction Detail to Excel Reports		
New Report	Report Name ▼	Description
MyReports	Billing Dept Report	Weekly Transaction Details
	Main Office Journal	Transaction Journal

With the **Copy Report** Action Column button, you can easily create a new report by copying an existing report definition and editing it. To make a copy of a report, select an existing report from the list, click **Copy Report**, save it under a new name and add or edit the remaining fields as needed.

Denial Reports & Statistical Denial Reports

Every sorting option available for these reports has been updated with formatting enhancements, so the reports will be easier to read. Any report that contains both Practice (P) and Insurance (I) Denial reasons will now print both reasons (if posted) for each procedure and the column has been increased to print the full denial reason.

The **Include Denials Linked to an Ins Denial** check box for the *Denials by Practice Reason* report has been removed. Now, the report will automatically print any Insurance Denial reasons for each procedure.

May 24, 2018		Localdev Database 1				Page 1		
Denial Report								
Sorted by Performing Doctor								
For Period Beginning 05-01-2018 and Ending 05-24-2018								
2 - ANDREW BAKER, MD								
ID #	Guarantor Name Patient Name	Service Date	Dr	Proc Code	Charge Amount	Denied Amount	Date Denied	Practice Denial Reason (P) / Insurance Denial Reason (I)
26234.1	BUSEY, TERRY							
	TERRY	11-12-17	2	92015	55.00	55.00	05-04-1	(P)DX-NEED SUPPORTING DIAGNOSIS (I)96-Non-cov chg(s), Remark Code(s) must be prov.
	TERRY	12-08-17	2	99213	80.37	80.37	05-04-1	(P)DX-NEED SUPPORTING DIAGNOSIS (I)96-Non-cov chg(s), Remark Code(s) must be prov.
	TERRY	12-08-17	2	36415	14.30	14.30	05-04-1	(P)B-NOT A COVERE'D BENEFIT-PUTTING IN MORE CHARAC (I)204-This svc/equip/drug not cov under the cur plan.

Schedule

Enter Patient Appointments

Quick Registration has been enhanced so that if you register patients through *Scheduling*, a **Default Location** will automatically be stored on the patient's account if you have a **Default Location** stored in the *CGM webPRACTICE Default Values* function.

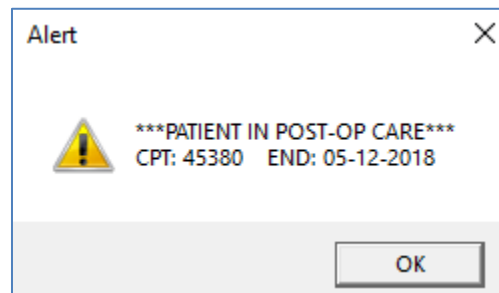
Note: To Quick Register patients through *Scheduling*, **Register** must be selected in the *Scheduling System Integration* function (*System, Database Maintenance Menu, Integrations*).

Patient Check In/Out and Post No-Show Appointments

Enhancements have been made to prevent No Show appointments from being posted for patient appointments that have had their Status changed to **Checked In** or **Checked Out**. You will receive the message, "The No Show function is not available if a patient's appointment status has ever been changed to 'Checked In' or 'Checked Out'."

Patient Check In/Out

When you access a patient account that is currently in a post-op period, a warning message will display as a reminder that a co-payment should not be collected.



Note: This warning message will only display if you have the **Display Post-Op Messages in Schedule** check box selected in the *CGM webPRACTICE Integration Options* function.

Edit Doctor Schedules (*Doctor Schedule Maintenance*)

Enhancements have been made so you can view and edit schedules up to 36 months in the future. Previously, you were limited to viewing only 12 months.

Schedule (cont.)

Print Scheduled Patient Detail to Excel (Scheduling Printing Menu)

New *Check In/Out* Data Elements are available when printing this report.

- Appointment Check In Time
- Appointment Check in User
- Appointment Check Out Time
- Appointment Check Out User

Print Scheduled Patient Detail to Excel (Scheduling Printing Menu) ***New Functionality***

With this new function you can create customized reports to pull extensive appointment detail from each scheduled patient account. The reports can be printed to *Microsoft Excel* via *MyReports*, where you can sort the data to meet your needs. After you create a report, you can save the report definition for future use, so you do not have to re-define it each time you want to print it.

Upon accessing the function, any previously saved report definitions will be listed. You can select an existing report by clicking anywhere in the row or you can click the **New Report** Action Column button to create a new report.

Scheduled Patient Detail to Excel - Report Definitions				System Manager EASTSIDE MEDICAL (1)
Report Name	Description	Header 1	Header 2	
CICO	Check In Check Out			
Daily	Daily Schedule	This is the first line	of the custom heading lines	

If you click **New Report**, a blank report definition screen will display. You can name the report, provide a description of the report and set up two customized Headings to print on the report. Using the **Excel Columns** fields, you can select from the drop-down lists to include data elements from scheduled appointments and the patient's account.

Scheduled Patient Detail to Excel Reports				System Manager EASTSIDE MEDICAL (1)
Report Name	CICO ✓			
Description	Check In Check Out			
Custom Heading Line 1	Time Tracking by User			
Custom Heading Line 2				
Excel Columns 'A' thru 'Z'		Excel Columns 'AA' thru 'ZZ'		
A	Patient Firstname, Lastname (P1.1b) ✓	AA		
B	Appointment Check In Time (C1.1) ✓	BB		
C	Appointment Check In User (C1.2) ✓	CC		
D	Appointment Check Out Time (C1.3) ✓	DD		
E	Appointment Check Out User (C1.4) ✓	EE		
F		FF		
G		GG		

Schedule (cont.)

To print a report, select an existing report from the list or create and save a new report definition.

Scheduled Patient Detail to Excel - Report Definitions				System Manager EASTSIDE MEDICAL (1)
Report Name	Description	Header 1	Header 2	
CICO	Check In Check Out			
Daily	Daily Schedule	This is the first line	of the custom heading lines	

When the report definition screen displays, click **Print Report** in the Action Column.

Scheduled Patient Detail to Excel Reports			
Copy Report	Report Name	CICO ✓	
Print Report	Description	Check In Check Out	
	Custom Heading Line 1	Time Tracking by User	
	Custom Heading Line 2		
Excel Columns 'A' thru 'Z'		Excel Columns 'AA' thru 'ZZ'	
A	Patient Firstname, Lastname (P1.1b)	▼	AA
B	Appointment Check In Time (C1.1)	▼	BB
C	Appointment Check In User (C1.2)	▼	CC

Sorting options are provided to assist in narrowing down the results. Complete the applicable fields and click **Save** to proceed with printing the report to *Microsoft Excel via MyReports*.

Scheduled Patient Detail to Excel - Print			
From Doctor Code	<input type="text"/>	Q	<input type="text"/>
Through Doctor Code	<input type="text"/>	Q	<input type="text"/>
From Location	<input type="text"/>	Q	<input type="text"/>
Through Location	<input type="text"/>	Q	<input type="text"/>
From Date	05-01-2018	📅	<input type="text"/>
Through Date	05-31-2018	📅	<input type="text"/>
From Type of Visit	<input type="text"/>	Q	<input type="text"/>
Through Type of Visit	<input type="text"/>	Q	<input type="text"/>
Include AM Appointments	<input checked="" type="checkbox"/>		
Include PM Appointments	<input checked="" type="checkbox"/>		
New Patients Only	<input type="checkbox"/>		
Print Order	<input checked="" type="radio"/> Doctor	<input type="radio"/> Location	✓

When the report definition screen displays, click **Cancel** to return to the main listing of reports. Next, click **MyReports** in the Action Column to quickly access the printed report.

Schedule (cont.)

Scheduled Patient Detail to Excel - Report Definitions		
New Report	Report Name ▼	Description
MyReports	CICO	Check In Check Out
	Daily	Daily Schedule

With the **Copy Report** Action Column button, you can easily create a new report by copying an existing report definition and editing it. To make a copy of a report, select an existing report from the list, click **Copy Report**, save it under a new name and add or edit the remaining fields as needed.

System

CGM webPRACTICE Default Values (Database Maintenance Menu)

The following fields were relocated to the *Patient Billing and Statements* section of the screen:

- Alert User
- Primary Address
- Release of Information
- Benefits Assignment
- Medicare Patient

Patient Billing and Statements:

Adj Code for Stmts STATEMENT SENT

Erase Stmt Comment	<input checked="" type="checkbox"/>	Finance Charges	<input checked="" type="checkbox"/>
Print Aging Messages	<input checked="" type="checkbox"/>	Send Statement	<input checked="" type="checkbox"/>
Alert User	<input type="checkbox"/>	Primary Address	<input checked="" type="checkbox"/>
Release of Information	<input checked="" type="checkbox"/>	Benefits Assignment	<input type="checkbox"/>
Medicare Patient	<input type="checkbox"/>		

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

After you select a function to review, new **Add/Edit Filter** and **Remove Filter** Action Column buttons have been added so you can filter and narrow down the results.

System Log				System Manager EASTSIDE MEDICAL (1)
	Date/Time ▲	DB	User	Message
<input type="button" value="Add/Edit Filter"/> <input type="button" value="Remove Filter"/>	10-26-2017 03:51PM	2	HOPE	Deleted from 08:00A thru 09:30A for Doctor 1, Location 1, from 10-16-2017 thru 10-16-2017
	10-26-2017 09:25AM	1	HOPE	Deleted from 08:00A thru 09:00A for Doctor 1A, Location 11-209, from 10-09-2017 thru 10-12-2017
	05-17-2017 06:38PM	1	HOPE	Deleted from 08:00A thru 12:00P for Doctor BBA, Location 1, from 06-01-2017 thru 06-01-2018
	04-21-2017 10:26AM	1	HOPE	Deleted from 02:00P thru 05:00P for Doctor 1, Location A03, from 04-21-2017 thru 04-21-2018
	03-27-2017 04:00PM	1	JEN	Deleted from 08:00A thru 12:00P for Doctor 5, Location 1, from 03-29-2017 thru 04-30-2017
	03-27-2017 03:53PM	1	JEN	Deleted from 08:00A thru 04:00P for Doctor 5, Location 1, from 03-29-2017 thru 04-30-2017
	10-06-2016 01:19PM	1	JEN	Deleted from 10:00A thru 01:00P for Doctor 1, Location 1, from 10-10-2016 thru 10-10-2016

When you click **Add/Edit Filter**, a new screen will display so you can enter the criteria you would like to filter the results by.

System Log

From Date Through

Database

User

Message Contains Begins with

Message Contains Begins with

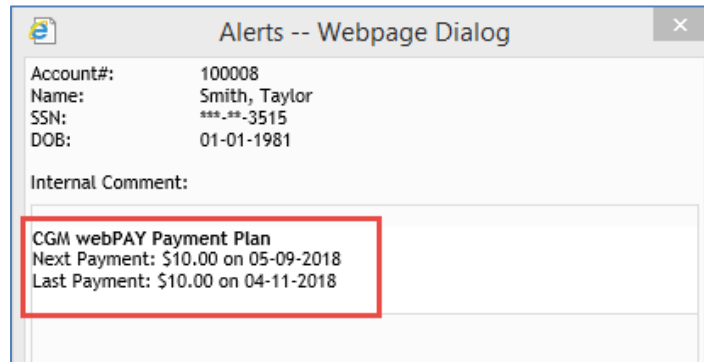
Message Contains Begins with

Message Contains Begins with

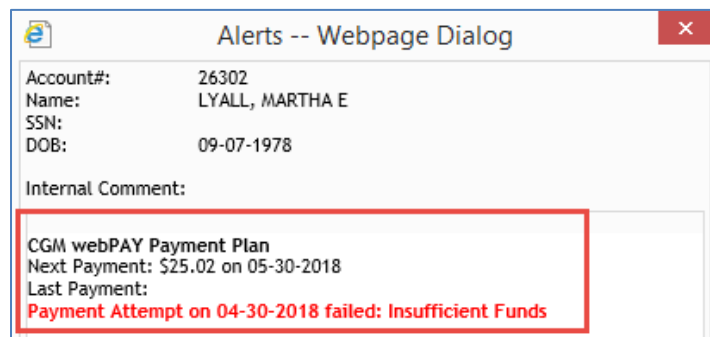
System (cont.)

Patient Collections Integration (*Database Maintenance Menu, Integrations, Collections Integration*)

A new **Display Payment Plan Alert** check box has been added, so you can select if you want an alert to display when you access a patient account that has a payment plan.



Note: **CGM webPAY Clients Only** - For patients with CGM webPAY payment plans, if the last payment attempt failed, the payment plan alert will display when selecting the patient account, even when the **Display Payment Plan Alert** check box is not selected and the payment error reason will display in the alert in red text.



For additional information, see the following entries in these release notes:

- *Patient Collections* entry, the *Populate Collection Roster* or *Automated Population* entry and the *Manage Payment Plans* entry under the *Collections* section
- *Unposted Payments* entry under the *Transactions* section

System (cont.)

Patient Images Look-up (File Maintenance Menu, Look-Up Functions) ***New Functionality***

This function provides an audit trail of any changes made to Patient images, Guarantor images or Insurance Card images stored on a patient's account. Upon accessing this function and selecting a patient account; any changes made to any of these image types will be listed. Each change recorded will list the date and time the change was made, the type of image changed, the User that made the change, which type of change (action) was made and any notes. For insurance carrier image types, the insurance carrier code will also display in the **Image Type** column along with the policy number of the insurance carrier in the **Notes** column.

Image History for Account 23936 - ANDERSON, ANDY					System Manager EASTSIDE MEDICAL (1)
23936 - ANDERSON, ANDY					
Date ▲	Time	Image Type	User	Action	Notes
01-11-2017	03:21P	Patient	System Manager	Acquired	
12-30-2016	11:34A	Insurance - MED	System Manager	Acquired	Policy # 0121414
08-18-2016	02:56P	Guarantor	System Manager	Deleted	
08-18-2016	02:56P	Patient	System Manager	Deleted	
08-18-2016	02:49P	Guarantor	System Manager	Acquired	
08-18-2016	02:48P	Patient	System Manager	Acquired	
08-18-2016	02:45P	Patient	System Manager	Acquired	
09-09-2015	07:56P	Insurance - MED	System Manager	Deleted	Policy # 0121414
09-09-2015	07:56P	Insurance - MED	System Manager	Insurance Card has been Mapped	Policy # 0121414
03-28-2014	09:28A	Patient	System Manager	Acquired	

Note: This function only provides an audit trail of the changes made to a patient's account; not actual image files.

Change Function Security (User Management, Function Security Menu)

The **Track Usage** and **Alternate Name** fields have been removed, since they only pertained to the old Text product which is now obsolete.

CGM webVERIFY Integration (Database Maintenance Menu, Integrations, CGM webTOOLS Integrations)

CGM webVERIFY Clients Only

A new **Ask Date of Service to Verify** field has been added, so you can indicate if you want to have the option of verifying eligibility for past, present or future dates of service from within the *Change Patient Data* function. For additional information, see the *Insurance – Verify Eligibility* entry under the *Patient* section of these release notes.

Tables

Maintain Insurance Denial Codes (*Insurance Denial Code Table*)

The updated Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC), effective March 1, 2018 have been loaded into CGM webPRACTICE. These updates were released in Patch #7.4.19.5 on May 8, 2018.

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

Updates to the 2018 HCPCS data files, effective April 1, 2018 are available. To receive the updated codes, you must load the 2018 file. These updates were released in Patch #7.4.19.5 on May 8, 2018.

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

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

- 2018 Medicare Physician Fee Schedule, effective April 1, 2018
- 2018 Medicare DME Fee Schedules; Prosthetics/Orthotics, and Supplies (DMEPOS), effective April 1, 2018

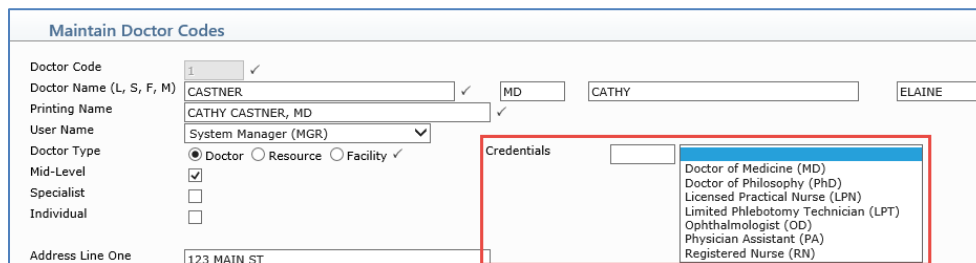
These updates were released in Patch # 7.4.19.5 on May 8, 2018. The updated files are available for import by selecting 2018 in the **Fee Schedule Year** list and the applicable file name in the **Fee Schedule File** list.

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

The Centers for Medicare and Medicaid Services (CMS) have updated the 2018 Medicare Relative Value Unit files (RVUs) effective April 1, 2018. To receive the updated codes, you must load the **2018** file. This update was released in Patch # 7.4.19.5 on May 8, 2018.

Maintain Doctor Codes (*Doctor Code Table*)

A new Credentials field has been added so you can store the credentials for each Doctor Code. This field has been added in anticipation of future enhancements. For additional information, see the *Credential Code Table* entry under the *Tables* section.



The screenshot shows the 'Maintain Doctor Codes' form with the following fields and values:

- Doctor Code: 1
- Doctor Name (L, S, F, M): CASTNER
- Printing Name: CATHY CASTNER, MD
- User Name: System Manager (MGR)
- Doctor Type: Doctor Resource Facility
- Mid-Level:
- Specialist:
- Individual:
- Address Line One: 123 MAIN ST
- Credentials: A dropdown menu is open, showing options: Doctor of Medicine (MD), Doctor of Philosophy (PhD), Licensed Practical Nurse (LPN), Limited Phlebotomy Technician (LPT), Ophthalmologist (OD), Physician Assistant (PA), and Registered Nurse (RN).

Tables (cont.)

Maintain Insurance Carrier Codes (*Insurance Carrier Table*)

An enhancement has been made to eliminate the need to edit patient accounts after you edit the **Medigap #** field on an existing insurance carrier and change it to “**CR**”. Now you will receive the message, “Do you want the ‘Bill this Carrier’ field automatically changed to ‘E’ on every patient account, when this is the Secondary Insurance Policy and Medicare is the Primary?”

Credential Code Table (*Doctor Code Table*) ***New Functionality***

This new table allows you to create **Credential Codes** for various forms of degrees/credentials, which you can then add to individual Doctor Codes. The following credential codes will be automatically loaded when this new table is installed.

- LPN - Licensed Practical Nurse
- LPT - Limited Phlebotomy Technician
- MD - Doctor of Medicine
- OD - Ophthalmologist
- PA - Physician Assistant
- PhD - Doctor of Philosophy
- RN - Registered Nurse
- DO - Doctor of Osteopathic Medicine
- NP - Nurse Practitioner

This table has been added in anticipation of future enhancements. For additional information, see the *Maintain Doctor Codes* entry under the *Tables* section.

Maintain Insurance Carriers (*Insurance Carrier Table*)

The width of the **Policy # Format** field has been increased so that more policy formats are visible if a carrier has multiple formats available. In addition, two new special formats can now be entered in the **Policy # Format** field for Medicare Carriers:

Policy # Format	Description
[MBI]	Medicare Beneficiary Identifier
[HICN]	Health Insurance Claim Number

The [MBI] and [HICN] formats will automatically validate all variations of the Medicare policy numbers. When you type either of the new format options in the **Policy # Format** field, they must be enclosed in brackets as shown above.

Policy # Format	NNNNNNNNNA,[HICN],[MBI]
-----------------	-------------------------

For additional information, see the *Insurance (Change Patient Data)* entry under the *Patient* section of these release notes.

Transactions

Payment Entry Function

An update has been made to the Payment Allocation screen when populating copayment amounts, so that if a **Spec Co-Pay** amount is not stored on the patient's primary insurance policy, the amount stored for the regular **Co-Payment Amount** will now populate.

Note: This will only occur for situations when you enter a Payment Code that has the **Insurance Payment** type set to **Copayment** and the Performing Doctor stored for the procedure is set to **Specialist**.

Transaction Journals to Excel (*Transaction Journals*)

The menu function for this report has been moved directly above the *Transaction Journals Summary to Excel* menu function to improve workflow.

Note: The *Transaction Journals* menu functions on the *Reports* menu will remain in alphabetical order.

Unposted Payments

The **Source** column has been updated to display "Payment Plan" for any CGM webPAY payments that are collected for Payment Plans. You can edit, void or prints receipts the same as you would for other CGM webPAY payments.

For additional information, see the following entries in these release notes:

- *Patient Collections* entry, the *Populate Collection Roster* or *Automated Population* entry and the *Manage Payment Plans* entry under the *Collections* section
- *Patient Collections Integration* entry under the *System* section

Unposted Payments




In an effort to reduce the amount of time spent reviewing patient accounts to determine if an E&M procedure has been posted that matches the Co-Payment date, a **Status** column has been added that will display charge status icons for Co-Payments.

Unposted Payments							
Status	Source ▼	Account	Patient Name	Amount	Payment Date	Payment	Loc
	Check In/Out	50	ANDERSON, KELLY I	7.00	01-03-2018	ROA	1
●	Check In/Out	66	MARQUEZ, NANCY M	20.00	01-31-2017	Co-Payment	2
●	Check In/Out	66	MARQUEZ, NANCY M	30.00	01-31-2017	Co-Payment	2
●	Check In/Out	80	SMITH, KENNEDY	20.00	01-31-2017	Co-Payment	2
●	Check In/Out	80	SMITH, KENNEDY	30.00	01-31-2017	Co-Payment	2
●	Check In/Out	23936	ANDERSON, ANDY	30.00	01-25-2017	Co-Payment	1
●	Check In/Out	23936	ANDERSON, ANDY	30.00	07-13-2017	Co-Payment	1
●	Check In/Out	23936	ANDERSON, ANDY	15.00	12-01-2017	Co-Payment	1
●	Check In/Out	25215	BAKER, BETTY	50.00	06-12-2017	Co-Payment	1
	Check In/Out	25215	BAKER, BETTY	50.00	06-12-2017	ROA	1




Transactions (cont.)

One of the following messages will display when you point to an icon, so you can quickly identify if the payment is ready to be posted.

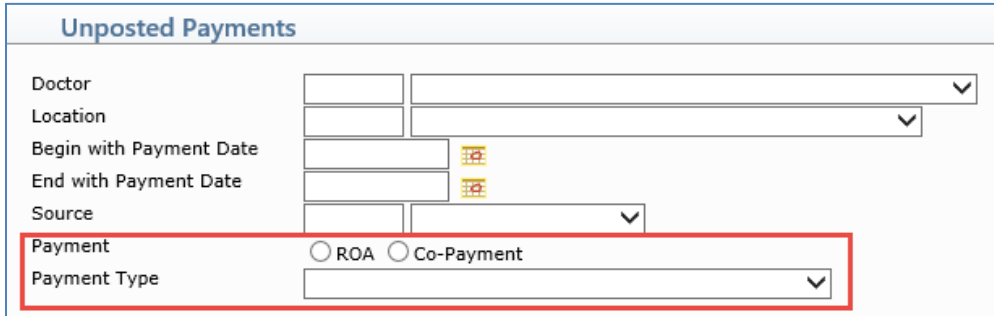
If there is a Doctor tied to the payment:

	E&M Charge posted for DOS and Dr
	No Charge posted for DOS and Dr
	Non E&M Charge posted for DOS and Dr

If there is not a Doctor tied to payment:

	E&M Charge posted for DOS. No Dr tied to payment
	No Charge posted for DOS
	Non E&M Charge posted for DOS. No Dr tied to payment

The **Add/Edit Filter** function has also been enhanced with new sorting options for **Payment** and **Payment Type**.



Unposted Payments

Doctor

Location

Begin with Payment Date

End with Payment Date

Source

Payment ROA Co-Payment

Payment Type

ERA Exception Report (*Electronic Remittance Advice (ERA), Import and Post ERA Files*)

Enhancements have been made to the standard printed report and to the Excel version.

Standard:

- **Exception Reason** column has been changed to the **Exception Code**
- **Adjustment Code** column has been added
- An asterisk (*) will print next to the Exception Code and Exception Reason for Warning messages
- The Exception Code and Exception Reason will now print directly under the Procedure line item
- **Batch** has moved from the body of the report into the heading.

Excel:

- **Adjustment Code** column added
- **Exception Code** column added