



CompuGroup™
Medical

What's New in

CGM webPRACTICE™ v7.4.21

Updated Final Release Notes

September 26, 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 v7.4.21. 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.7.4.21 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
6	Practice Vitals Dashboard	Add the new <i>Primary Insurance Denial Rate</i> option if applicable.
19	Column Selectable Fields	***CGM webVERIFY™ Clients Only*** Add the new optional Elig Status column for <i>Unposted Procedures</i> if applicable.
20	E-Superbills (Non-Scheduling)	If applicable, complete the <i>E-Superbills (Non-Scheduling) Integration</i> and create an E-Superbill using the <i>Superbill Wizard</i> function located on the <i>System, Form Wizards</i> menu.
21	Import Fee Schedules	Load the updated files if applicable.
21	Load the HCPCS Codes	Load the updated files if applicable.
21	Import RVU Unit Values	Load the updated files if applicable.
22	Load the ICD-10-CM Codes	Load the updated files on October 1 st if applicable.

Summary of Changes to Document

Preliminary Public Release Notes released September 5, 2018.

Final Public Release Notes released September 12, 2018 with the following changes:

Section	Function	Added/Deleted/ Revised
CGM webPRACTICE Enhancements	Practice Vitals Dashboard	Added
Patient	Change Patient Data - Insurance Policy Information and Patient Summary Screen	Revised
Patient	Verify Eligibility by DMS List	Added
Reports	Primary Insurance Denial Rate Report	Added
Schedule	Scheduling Co-pay Report	Added
Schedule	Enter Patient Appointments	Added
Tables	Load the HCPCS Codes	Added
Tables	Import RVU Unit Values	Added
Tables	Maintain Insurance Carriers	Added
Transactions	Procedure Entry, Edit an Encounter, Unposted Procedures	Revised
Transactions	Unposted Payments	Added

Updated Final Public Release Notes released September 26, 2018 with the following changes:

Section	Function	Added/Deleted/ Revised
Tables	Load ICD-10-CM Codes	Added
Action Required Items	Load ICD-10-CM Codes	Added
Tables	Load the HCPCS Codes	Revised

CGM webPRACTICE Enhancements

Practice Vitals Dashboard *New Functionality* ***Action Required***

The **Primary Insurance Denial Rate** option has been added. For additional information, see the *Primary Insurance Denial Rate Report* entry under the *Reports* section.

User Desktop				
Practice Vitals Dashboard				
	Now	Today	MTD	YTD
Current A/R	1,512,181			
Days in A/R	3,917.86			
Charges		200	200	67,658
Payments		40	40	1,329
Adjustments				-1,813
Claims Denied				3,551
Primary Insurance Denial Rate				0.4
Claims Pending				99
Claims Refiled				234,386
New Pt Appts		2	8	24
Patients in Off				
Appointments		8	23	268
Appt No-Shows				

All Doctors

Note: Only the YTD percentage is provided and 'All Doctors' must be selected. This figure does not reflect a real-time percentage because the Caretaker calculates the figure nightly.

Billing

Print Patient Statements

This function will now default to the last printer used, similar to other printing functions in CGM webPRACTICE. Previously, the printer would always default to the *Electronic Statement File* printer in databases set up for Electronic Patient Statements.

Print Patient Statements

A warning message will now display when you select the *Electronic Statement File* printer and an electronic statement file already exists. This warning provides options so you can either continue and overwrite the existing file or cancel the printing of statements.

Collections

Insurance Collections - Work Accounts

The following columns were added:


- **Ins Type** - will indicate if the policy is a Primary, Secondary or Tertiary carrier
- **Plan Code** - will display the Insurance Plan Code for the policy
- **Wrk** - will display 'Y' if the account has been worked or 'N' if the account is unworked



In addition, to ensure consistency throughout the system, the **Filter** Action Column button was renamed **Add/Edit Filter** and Action Column buttons for **Remove Filter** and **Print** were added. The **Print** function will print the data as it is currently displayed on the Work Accounts screen to *Microsoft Excel via MyReports*. Within the Filter function, the **Worked or Unworked Accounts** field has been renamed to **Type of Accounts** and defaults to "All" instead of "Unworked."

Patient

Change Patient Data

Insurance Policy Information and Patient Summary Screen ***CGM webVERIFY Clients Only***

CGM webVERIFY Status icons have been added next to the Insurance Carrier Code, to display the latest CGM webVERIFY Eligibility Status for the patient's insurance policies, including a new clear  CGM webVERIFY Status icon to denote a policy that has never been verified. If you hover over the icon, a ScreenTip will state either, 'Never Verified' or 'Never Verified. Carrier does not contain a CGM webVERIFY Identifier.' For additional information, see the *Procedure Entry Function, Edit an Encounter and Unposted Procedures* entries under the *Transactions* section of these release notes and the *Enter Patient Appointments* entry under the *Schedule* section.

Insurance Policy Information					
Policies for ANDERSON, ANDY					
	Code	Type	Carrier Name	Spec Bill	Policy
	 MED	(P)	MEDICARE		987654321A
	BCBS	(S)	BLUE CROSS		XBP987654321

Credit Cards ***CGM webPAY™ Clients Only***

A **New Card** Action Column button has been added so you can store a new credit card on a patient's account. Previously, you could only add new cards while collecting a credit card payment. In addition, new **Card Holder Name** and **Card Holder Zip Code** fields have been added for each card. These fields are informational only but will allow you to differentiate between credit cards in cases where there are multiple cards saved on a patient's account.

Note: When you add a new card, it is automatically set to be the **Default Card** on the patient's account and the Guarantor's Name and Zip Code will be populated for the **Card Holder Name** and **Card Holder Zip Code** fields.

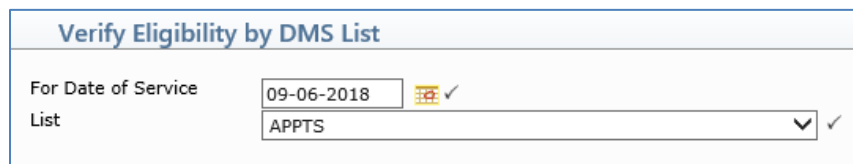
Patient (cont.)

Verify Eligibility by DMS List ***CGM webVERIFY Clients Only*** *New Functionality*

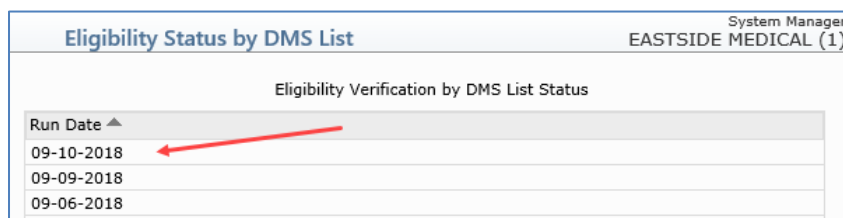
If you do not use *Scheduling* in CGM webPRACTICE and want to use CGM webVERIFY, two new functions now allow you to verify insurance eligibility for patients using a DMS list and view the eligibility status results.



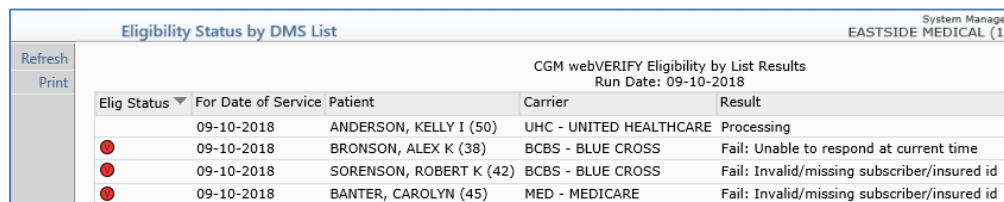
Note: Prior to using the *Verify Eligibility by DMS List* function, you will need to create a DMS List of patient accounts. Upon accessing the function, type or select the **Date of Service** you want to verify eligibility for, select the **List** of patients and click **Save**. When the message *Starting Eligibility Verification in Background* displays, click **OK**. The quantity of time needed for the verification process to complete will vary, depending on the quantity of patients contained in the DMS List. You can determine when the process is complete by accessing the *Eligibility Status by DMS List* function.


 A screenshot of a web form titled 'Verify Eligibility by DMS List'. It has two input fields: 'For Date of Service' with the value '09-06-2018' and a calendar icon, and 'List' with the value 'APPTS' and a dropdown arrow. Both fields have a checkmark icon to their right.

Upon accessing the function, a list of every **Run Date** displays. To view the details, click anywhere on the **Run Date** row.


 A screenshot of a web application screen titled 'Eligibility Status by DMS List'. The top right corner says 'System Manager EASTSIDE MEDICAL (1)'. Below the title is the subtitle 'Eligibility Verification by DMS List Status'. There is a table with a 'Run Date' column and a red arrow pointing to the first row, '09-10-2018'. Other rows show '09-09-2018' and '09-06-2018'.

The CGM webVERIFY Eligibility Status Results screen displays containing each patient account contained in the DMS List, including an Eligibility Status icon, Date of Service verified, Patient Name and Account Number, Carrier Name and the verification result.


 A screenshot of a web application screen titled 'Eligibility Status by DMS List'. The top right corner says 'System Manager EASTSIDE MEDICAL (1)'. Below the title is the subtitle 'CGM webVERIFY Eligibility by List Results Run Date: 09-10-2018'. There is a table with columns: 'Elig Status', 'For Date of Service', 'Patient', 'Carrier', and 'Result'. The table contains four rows of data.

Elig Status	For Date of Service	Patient	Carrier	Result
	09-10-2018	ANDERSON, KELLY I (50)	UHC - UNITED HEALTHCARE	Processing
●	09-10-2018	BRONSON, ALEX K (38)	BCBS - BLUE CROSS	Fail: Unable to respond at current time
●	09-10-2018	SORENSEN, ROBERT K (42)	BCBS - BLUE CROSS	Fail: Invalid/missing subscriber/insured id
●	09-10-2018	BANTER, CAROLYN (45)	MED - MEDICARE	Fail: Invalid/missing subscriber/insured id

Patient (cont.)

If 'Processing' displays in the Result column, the verification process has not completed yet. Click **Refresh** in the Action Column to display updated results. To see detailed eligibility information for a specific patient, click anywhere on the row containing the patient's information.

Eligibility Status by DMS List	
Print Classic View Collapse All	Payer Payer: NAME: CMS, ID: MEDX
	Provider Provider: NAME: ANDERSON, RICK ID: 1770805590
	Insured or subscriber Insured or subscriber: NAME: BANTER, CAROLYN ID: 555127894A **error** invalid/missing subscriber/insured id Date of birth: 08-01-1919 Eligibility: 09-10-2018 - 09-10-2018

Note: The results of the *Verify Eligibility by DMS List* functions are independent of the *Verify Eligibility* functions on the *Schedule* menu.



Reports

User Productivity Report to Excel *New Functionality*

This new report will provide numerous productivity results for each User Code for a specified date or date range and prints to Excel via *MyReports*, so you can perform additional sorting as needed.

User Productivity Report to Excel

Begin with User Code	<input type="text"/>	Q	<input type="text"/>
End with User Code	<input type="text"/>	Q	<input type="text"/>
Begin with Date	07-01-2018	📅	
End with Date	07-31-2018	📅	

Sample Excel report - Columns A through M

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	8/14/2018												
2	EASTSIDE MEDICAL												
3	User Productivity Report to Excel												
4	From 07-01-2018 To 07-31-2018												
5	For All User Codes												
6	Date	User Code	Pts Registered	Pt Accts Edited/Deleted	Pts Appts Scheduled	Pt Appts Rescheduled	Pt Appts Deleted	Total Trans Posted	# of Chgs Posted	Total Chg \$	# of Pmts Posted	Total Pmts \$	# of Ins Pmts Posted
7	7/1/2018	DMR						6	6	4,367.57			
8	7/1/2018	MARS											
9	7/2/2018	MGR						1	1	147			
10	7/3/2018	MGR			1								
11	7/5/2018	DMR						4			2	-142.55	2
12	7/6/2018	DMR						2			1	-70.76	1
13	7/10/2018	MEL			1								
14	7/13/2018	MEL			1								
15	7/15/2018	MEL		1				1			1	-2.5	
16	7/16/2018	MEL			1								
17	7/16/2018	MGR		1									
18	7/17/2018	MGR			1								
19	7/25/2018	MEL		18	2			27	27	35,163.80			
20	7/26/2018	MEL			1								
21	7/30/2018	DMR		1									
22	7/30/2018	MEL		2	3								
23	7/30/2018	MGR		1				1	1	147			
24	7/31/2018	DMR	1	17									
25	7/31/2018	MGR				1							
26	TOTALS	DMR	1	18				12	6	4,367.57	3	-213.31	3
27	TOTALS	MARS											
28	TOTALS	MEL		21	9			28	27	35,163.80	1	-2.5	
29	TOTALS	MGR		2	2	1		2	2	294			
30	End of Report. Reports/User Productivity Report to Excel												
31	Requested by MGR and completed at 3:44PM on Aug 14 2018												

Reports (cont.)

Primary Insurance Denial Rate Report (*Insurance Related Reports*) *New Functionality*

This new report provides by primary insurance carrier, the total amounts filed and denied for a specified date range and calculates the denial rate percentage for each primary carrier. This report is also available on the *Billing, Insurance Billing Functions, Insurance Management Reports* menu. The report can also be printed to *Microsoft Excel via MyReports*. For additional information, see the *Practice Vitals Dashboard* entry under the *CGM webPRACTICE Enhancements* section.

Primary Insurance Denial Rate Report	
Begin with Insurance Carrier	<input type="text"/>
End with Insurance Carrier	<input type="text"/>
Print By	<input checked="" type="radio"/> Accounting Date <input type="radio"/> Service Date ✓
Print from Date	06-01-2018 <input type="button" value="🗓️"/>
Print through Date	06-30-2018 <input type="button" value="🗓️"/> ✓

Sample report:

Carrier	Amount Filed	Amount Denied	Denial Rate
AET AETNA	7987.68	584.63	7.30%
BC BCBS OF CLEVELAND	2498.74	1245.00	50.00%
BCBS BLUE CROSS	625.79	68.35	11.00%
BCFL BCBS OF FLORIDA	500.00	275.91	55.20%
MED MEDICARE	108800.00	36248.00	33.30%
TOTALS:	120412.21	38421.89	32.00%

End of Report. Reports/Insurance Related Reports/Primary Insurance Denial Rate Report
Requested by MGR and completed at 2:29PM on Sep 10 2018

Schedule

Appointment Inquiry (Enter Patient Appointments)

To aid in the prevention of scheduling duplicate appointments, enhancements have been made to display any existing appointments in red text that are for the same date currently selected in the schedule. In addition, **Same-Day Warning** and **Days for Future Appt Warning** messages will display if you have those options set up in the *Scheduling Integration Settings*. The information included in the warning messages will display the details for up to five appointments and also indicate if there are additional appointments scheduled. For additional information, see the *Scheduling System Integration* entry in the *System* section of these release notes.

Note: The quantity of future appointment(s) displayed on the Appointment Inquiry screen is determined by the value stored in the **Days for Future Review** field in the *Scheduling Integration Settings*.


Appointment Inquiry and Wait List (Enter Patient Appointments)

A new **Expand/Collapse** icon has been added so you can view additional details for each patient appointment. The data that displays when the details are expanded, is controlled by the settings defined in the *Appointment Display Integration* function on the *System, Database Maintenance Menu, Integrations, Schedule Integrations* menu.



Schedule (cont.)

Enter Patient Appointments ***CGM webVERIFY Clients Only***

A new clear  CGM webVERIFY Status icon has been added to denote a policy that has never been verified. If you hover over the icon, a ScreenTip will state either, 'Never Verified' or 'Never Verified. Carrier does not contain a CGM webVERIFY Identifier.' For additional information, see the *Insurance Policy Information* entry under the *Patient* section of these release notes, the *Procedure Entry Function, Edit an Encounter and Unposted Procedures* entries under the *Transactions* section.

Appointment Details (Enter Patient Appointments)

Rescheduled appointment audit log information will now display at the bottom of the Appointment Details screen, so you can see the when the appointment was rescheduled, which User rescheduled it, and the details for original appointment.

Enter Patient Appointments
System Manager
EASTSIDE MEDICAL (1)

Patient: 23936 ANDERSON, ANDY
 Referring Doctor: KENNETH M FISHER, MD (FIS)
 Comment:
 Phone: (H) 602-555-5555 (W) 602-555-0111 (C) 602-555-0127 Patient E-Mail: ANDYANDERSON@EMAIL.COM
 Rsp Doctor: CATHY CASTNER, MD, DO (1)
 Visits since Jan: 3 No Shows: 1 Sex: M Age: 11-30-1971 (46) Billing Grp: MED
 Pri Ins: MEDICARE Copy: 10.00 Spec Copy: 20.00 Pat \$: -310.48
 Sec Ins: AARP Copy: N/A Spec Copy: N/A Ins \$: 10366.31
 Last Visit: 01-25-17 - IN-HOSPITAL ON Col Bal: 9423.25 Tot \$: 10055.83

August							September						
S	M	T	W	T	F	S	S	M	T	W	T	F	S
			1	2	3	4							1
5	6	7	8	9	10	11	2	3	4	5	6	7	8
12	13	14	15	16	17	18	9	10	11	12	13	14	15
19	20	21	22	23	24	25	16	17	18	19	20	21	22
26	27	28	29	30	31	23	24	25	26	27	28	29	
													30

Appointment Details

Date: 08-01-2018	Patient Number: 23936
Time: 11:00A	New Patient: N
Doctor: CATHY CASTNER, MD, DO (1)	Phone: 602-555-5555
Location: MAIN OFFICE (1)	Auth Number:
Status: Confirm Phone (CONP)	Superbill #:
Type of Visit: FOLLOW UP (FU)	Last Visit: 03-01-2018
Units: 1	Last Pmt Date: 10-31-2017
Reason: FOLLOW UP	Last Pmt Amt: 4.80
Case:	Co-Pay Amt: 10.00
Comment:	Billing Group: MED
COMMENT:	Collection Status:
PASSPORT REF:	Date of Birth: 11-30-1971 (46)
COMMENT:	Social Security #: 987-65-4321
Report Comment: REPORT COMMENT	

Status/Location History/User

10:11AM Confirm Phone (CONP) MGR

Rescheduled Appointment History

On 07-31-2018 10:11A Rescheduled by MGR Rescheduled From Dr: 1, Date: 07-31-2018, Location: 1, Time: 11:00A
 Reason : DD-Different Date needed

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Schedule (cont.)

Appointment Inquiry (Enter Patient Appointments)

The **Doctor** and **Location** columns were enhanced so the column headings would not be abbreviated. The code Descriptions also display now. Previously, only the codes displayed.

Date	Time	Doctor	Location	Reason	Type of Visit	Delete/Reschedule Comment
09-11-2018	08:30A	1 - CATHY CASTNER, MD, DO	1 - MAIN OFFICE	OFFICE PROCEDURE	OFFICE PROCEDURE	
09-10-2018	08:30A	1 - CATHY CASTNER, MD, DO	1 - MAIN OFFICE	OFFICE PROCEDURE	OFFICE PROCEDURE	
09-07-2018	08:30A	1 - CATHY CASTNER, MD, DO	1 - MAIN OFFICE	OFFICE PROCEDURE	OFFICE PROCEDURE	

Patient Check In/Out - Collect Payment (Payment Entry Function)

The **Co-Payment Code** field has been renamed **Co-Payment Type** and an **Override Payment Code** field has been added, so you have the option of selecting a different payment code that will override the default payment code defined in the *Patient Check In/Out Integration* function. If you use CGM webPAY to collect the payment and enter an **Override Payment Code**, it will override the default payment code defined in the *CGM webPAY Integration* function.

Note: The Collect Payment screen in the *Payment Entry* and *Pre-Treatment* functions also received these enhancements.

Patient Check In/Out ***CGM webVERIFY Clients Only***

A new **Elig Status** column has been added to the right of the *E-Superbill* column, to display the latest CGM webVERIFY Eligibility Status icon for the patient's primary insurance policy.



Time	Patient Name	Status	Doctor	Reason for Visit	Changed	Procedures	E-Superbill	Elig Status
01:30P	ANDERSON, ANDY (23936)	Confirm Phone	1	ALLERGY SHOT		✓	-	

The CGM webVERIFY Status icons will also display next to the **Last Verified On** field after you select a patient.

Schedule (cont.)

Eligibility Status (Verify Eligibility) ***CGM webVERIFY Clients Only***

A new **Elig Status** column has been added to display the CGM webVERIFY Eligibility Status icons. In addition, a **Type of Visit** column was added and the insurance carrier code will now display in front of the carrier name.

Eligibility Status						
CGM webVERIFY Eligibility Results Run Date: 08-16-2018						
Elig Status	Doctor	Scheduled Date	Patient	Carrier	Result	Type of Visit
	CATHY CASTNER, MD, DO (1)	08-16-2018	RUBIO, PETER C (26019)	UHC - United HealthCare	Pass	OP - OFFICE PROCEDURE
	CATHY CASTNER, MD, DO (1)	08-16-2018	ANDERSON, ANDY (23936)	MED - MEDICARE	Fail: Unable to respond at current time	FU - FOLLOW UP

Scheduling Co-pay Report (Scheduling Printing Menu)

The **Print in Doctor Order** and **Print in Location Order** fields were combined into one **Sort by** field with the options to select **Doctor** or **Location**. In addition, if a patient had two appointments on the same day and a co-payment was collected for one of the appointments, it was possible for the co-payment to print on the report for both appointments. This has been resolved.

System

Scheduling System Integration (*Database Maintenance Menu, Integrations, Scheduling Integrations*)

New **Same-Day Warning** and **Days for Future Appt Warning** fields have been added to provide warning messages when scheduling patient appointments, to help prevent the scheduling of duplicate appointments.

- **Same-Day Warning** - If you want a warning message to display when a patient already has an appointment scheduled for the currently selected date (for any doctor or location) you can select this check box
- **Days for Future Appt Warning** - If you want a warning message to display when a patient already has an appointment scheduled for a specified number of days in the future (from the current date), you can type the number of days to search for appointments in the future. The warning message will list out the appointment details for up to 5 future appointments and also indicate if there are additional appointments scheduled.

For additional information, see the *Appointment Inquiry* entry in the *Schedule* section of these release notes.

Column Selectable Fields (*Database Maintenance Menu*)

A new **System Default Fields** (User) has been added, so that column selectable fields can be defined at a practice level for all users who do not currently have column selectable fields defined. After you access the *Column Selectable Fields* function and select which function you want to edit, a new screen will display listing all of the User Codes that currently have column selectable fields defined. From this screen, you can select the **System Default Fields** User or your User Code and edit as needed.

Note: If you select any User Code besides the **System Default Fields** User or your User Code, you will only be able to review the current settings and not make any changes.

A new **Reset Fields** Action Column button has also been added, so the selected fields for a User Code can be reset back to the system default fields if needed. Previously, there was no method to reset the selected fields for a user.

Column Selectable Fields (*Database Maintenance Menu*) *****CGM webVERIFY Clients Only*****

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

A new optional **Elig Status** column is now available for the *Unposted Procedures* function, to display the latest CGM webVERIFY Eligibility Status icons for the patient's primary insurance policy. For additional information, see the *Unposted Procedures* entry under the *Transactions* section of these release notes.

System (cont.)

Column Selectable Fields (System, Database Maintenance Menu)

The *Work Accounts* functions for both Patient Collections and Insurance Collections are now column selectable, so you can customize which columns you want to display and in what order to display them. In both functions, all columns except the **Acct** and **Name** columns can be selected/deselected and re-ordered.

E-Superbills (Non-Scheduling) Integration *New Functionality* (Database Maintenance Menu, Integrations, Transactions Integrations)

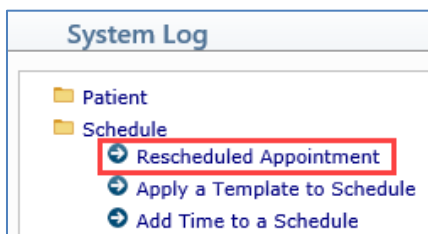
If you do not use Scheduling in CGM webPRACTICE and want to use E-Superbills, you can activate the *E-Superbills (Non-Scheduling)* function using this integration function. For additional information, see the *E-Superbills (Non-Scheduling)* entry under the *Transactions* section of these release notes.

Upon accessing this function, you will need to select the **Activate** check box to activate the *E-Superbills (Non-Scheduling)* function on the *Transactions* menu. Next, you can select if you want the patient's **Resp Dr** and **Default Location** to populate automatically when you enter E-Superbills.

E-Superbills (Non-Scheduling) Integration	
Activate	<input checked="" type="checkbox"/>
Default Patient's Resp Dr	<input checked="" type="checkbox"/>
Default Patient's Default Location	<input checked="" type="checkbox"/>

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

Enhancements have been made to track rescheduled patient appointment information and can be viewed using the **Rescheduled Appointment** link.



Tables

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

The Centers for Medicare and Medicaid Services (CMS) have released the 2018 Medicare Physician Fee Schedule effective July 1, 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. In addition, updates for the locality codes were included for 2018. These updates were released in Patch # 7.4.20.6 on August 17, 2018.

Maintain Billing Group Codes (*Billing Group Table*)

A new **Security Level** field has been added, so you have the option of restricting users from adding, editing or deleting Billing Group Codes on patient accounts and transactions if the Security Level for their User Code is not the same or higher than the value stored in this field.

Note: The following functions have also been enhanced to use the new Billing Group Security Level update:

- Procedure Entry & Edit an Encounter (*Transactions*)
- Patient Registration (*Patient*)
- Billing Information (*Patient, Change Patient Data*)
- Edit Encounter (*Patient, Change Patient Data, History*)
- New Patient/Quick Reg (*Scheduling, Enter Patient Appointments*)

Maintain Insurance Carrier Codes (*Insurance Carrier Table*) *CGM webVERIFY Clients only*****

The *Simply Healthcare Plans* payer is now available in the **CGM webVERIFY Identifier** list.

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

Updates to the 2018 HCPCS data files, effective July 1, 2018 and October 1, 2018 are available for loading. To receive the updated codes you must load the 2018 file.

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 July 1, 2018. To receive the updated codes you must load the **2018** file.



Tables (cont.)

Maintain Insurance Carriers (*Insurance Carrier Table*) *CGM webVERIFY Clients Only*****

Previously, when the **CGM webVERIFY Identifier** field contained a value but the **Eligibility Verification Frequency** field was empty, a background default of 30 days was automatically set, but it did not display in the **Eligibility Verification Frequency** field. This has been resolved.




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

The updated ICD-10 code set, effective October 1, 2018-September 30, 2019 is available for loading. This code sets is included, so you will **not** be required to purchase it.

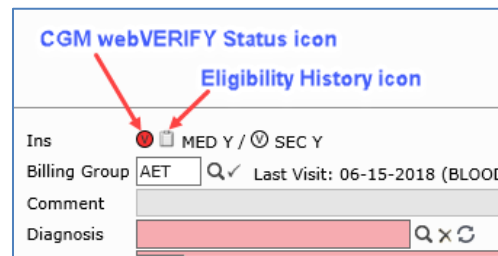
Transactions

Procedure Entry Function ***CGM webVERIFY Clients Only***

The following enhancements have been made:

- CGM webVERIFY Status icons  display next to the Insurance Carrier Codes, to provide the latest CGM webVERIFY Eligibility Status for the patient's insurance policies. You can click the Status icon to re-check eligibility for the insurance carrier.
- A new Eligibility History icon  that you can click to display the eligibility results history.
- A new clear  CGM webVERIFY Status icon to denote a policy that has never been verified. If you hover over the icon, a ScreenTip will state either, 'Never Verified' and you can click the Status icon to check eligibility for the carrier or 'Never Verified. Carrier does not contain a CGM webVERIFY Identifier.'

For additional information, see the *Insurance Policy Information* entry under the *Patient* section of these release notes and the *Edit an Encounter* and *Unposted Procedures* entries under this section and the *Enter Patient Appointments* entry under the *Schedule* section.



Note: In order to verify eligibility from within the Procedure Entry Function, you must have security access to *Change Patient Data*. In order to view eligibility history from within the *Procedure Entry Function*, you must have security access to *Change Patient Data* or *Review Patient Data*.

Unposted Procedures, Unposted Payments and Pre-Treatment

A new gear icon has been added to the lower right corner of the screen to allow you to change your Column Selectable Fields directly from within the current function. In the past, if you did not have access to the *System* menus you would not be able to define your Column Selectable Fields. Now, when you click the gear icon you will be taken directly into the *Column Selectable Fields* screen for the function you are currently accessing. You will be returned to the original function after you make edits and click **Save**.








Unposted Procedures ***CGM webVERIFY Clients Only***

A new optional **Elig Status** column is now available, to display the latest CGM webVERIFY Eligibility Status icons for the patient's primary insurance policy. You can add the **Elig Status** column in the *Column Selectable Fields* function (*System, Database Maintenance Menu*). For additional information, see the *Column Selectable Fields* entry under the *System* section of these release notes.


Transactions (cont.)

Unposted Payments

You can post unposted co-payments that have a green status icon for multiple patients at one time, using the automatic posting check boxes. You can select a check box for individual co-payments or select the check box at the top of the column to select all of the eligible co-payments.

Unposted Payments								
Filter Applied								
<input checked="" type="checkbox"/>	Status ▾	Source	Account	Patient Name	Amount	Payment Date	Payment	Loc
<input checked="" type="checkbox"/>		Check In/Out	26166	ZIMBARI, STEPHANIE	14.50	08-27-2018	Co-Payment	1
<input type="checkbox"/>		Check In/Out	26240	SHELTON, BLAKE	10.00 	07-13-2018	Co-Payment	1
<input type="checkbox"/>		Check In/Out	26240	SHELTON, BLAKE	20.00 	08-21-2018	Co-Payment	1
<input type="checkbox"/>		Check In/Out	26393	MOON, HALF	10.00	08-13-2018	Co-Payment	1
<input checked="" type="checkbox"/>		Check In/Out	100028	MCKAY, DYLAN	22.50	08-27-2018	Co-Payment	1

Edit an Encounter ***CGM webVERIFY Clients Only***

CGM webVERIFY Status icons have been added next to the Insurance Carrier Codes, to display the latest CGM webVERIFY Eligibility Status for the patient's insurance policies, including a new clear  CGM webVERIFY Status icon to denote a policy that has never been verified. If you hover over the icon, a ScreenTip will state either, 'Never Verified' or 'Never Verified. Carrier does not contain a CGM webVERIFY Identifier.' For additional information, see the *Insurance Policy Information* entry under the *Patient* section of these release notes and the *Procedure Entry Function and Unposted Procedures* entries under this section and the *Enter Patient Appointments* entry under the *Schedule* section.

E-Superbills (Non-Scheduling) *New Functionality* ***Action Required***

This new function allows the entering of E-Superbills when you do not use Scheduling in CGM webPRACTICE. You can enter E-Superbills for patients without the need to link them to appointments, unlike E-Superbills entered through the *Schedule, Check In/Out* function. For additional information, see the *E-Superbills (Non-Scheduling) Integration* entry under the *System* section of these release notes. For detailed instructions on entering *E-Superbills (Non-Scheduling)*, see *CGM webPRACTICE Help*.

Note: Prior to using this function, you need to complete the *E-Superbills (Non-Scheduling) Integration* and create an E-Superbill using the *Superbill Wizard* function located on the *System, Form Wizards* menu. For detailed instructions on creating E-Superbills, see *CGM webPRACTICE Help*.

E-Superbills (Scheduling)

This function was renamed *E-Superbills (Scheduling)* to make it clear that this function relies on you using Scheduling, since these E-Superbills must be linked to patient appointments.

Transactions (cont.)

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

The **Service Date** column has been replaced with a **Beginning Service Date** column and an **Ending Service Date** column has been added, to better reflect the data that is received on ERAs.