



Greenway SuccessEHS / Version 7.50

SuccessEHS Release Notes 7.50

DRAFT — SUBJECT TO REVISION PRIOR TO GENERAL RELEASE

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Revision History

11/19/15

- **EHS-23545** (Template Option Added to Success Speech Dictation) added under **System Administration Console**.
- **EHS-23593** (New Clinical Console Icons) added under **Clinical Console**.

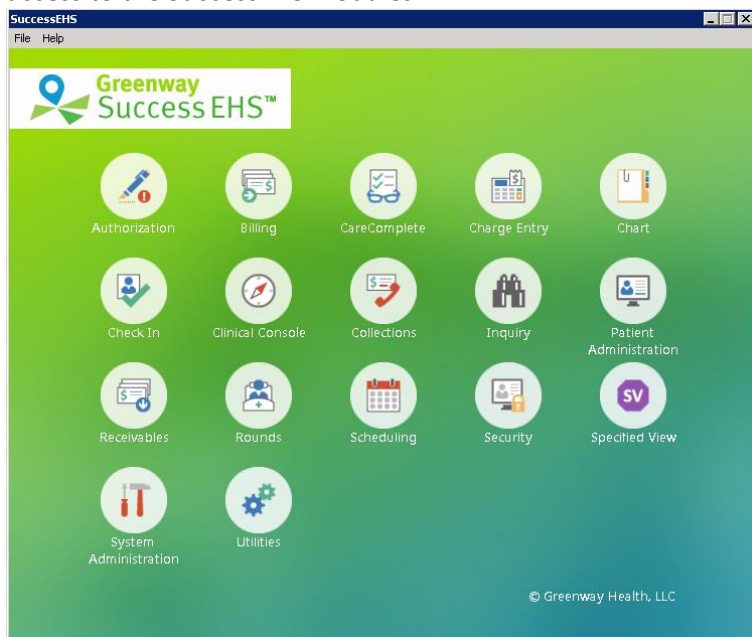
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All Modules

New POC Launcher Screen

Project #SEHS-262

The main **POC Launcher** has been rebranded with new icons. No changes have been made to the functionality or access to the SuccessEHS modules.

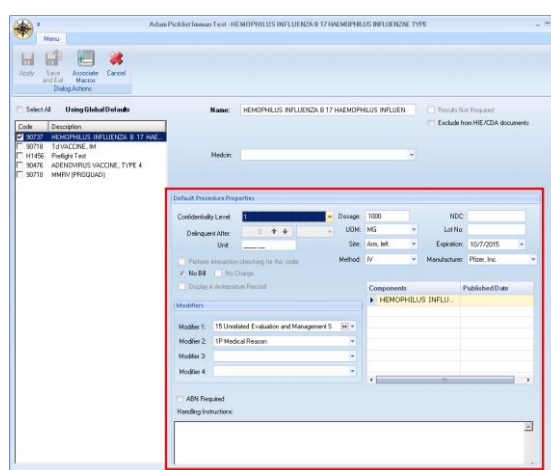
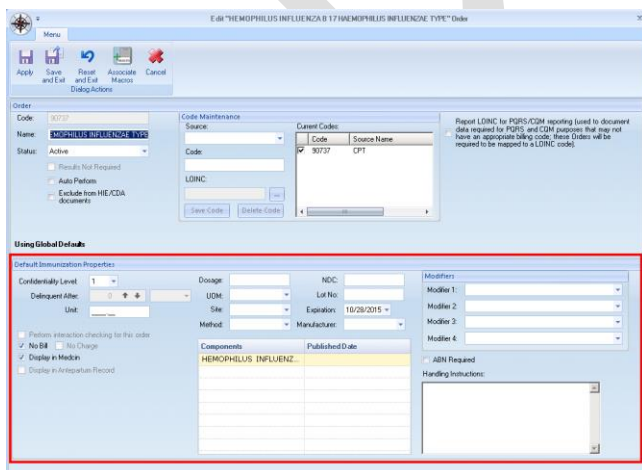


Changes to Immunization Views

Project #SEHS-74, SEHS-169, SEHS-178

The following changes have been made to the various screens in which Immunization orders are configured, entered, and viewed.

System Administration Console



Edit – The Default Immunization Properties section on the Edit window for all immunizations in the Starter Set Builder, and the Default Procedure Properties section on the Edit window for all Immunization and Mixed screens in the Picklist Builder and Order Set Builder, have been rearranged as follows:

1. **Components table** – The **Components** table displays only the vaccine component and its published date. Users may enter an appropriate **Published Date** (or select it from the drop-down calendar) for each component.
2. **Modifiers** – A **Modifiers** section has been added that allows users to select up to four modifiers for an immunization.
3. **Fields rearranged** – The remaining fields each defaults section have been rearranged to accommodate the new Components and Modifiers tables.

Note - Please Note: Because certain fields have been removed from the Components grid (Dosage, UOM, Lot No., NDC, Expiration, Manufacturer) that may have had defaults defined in System Administration, SuccessEHS has provided a conversion in this release. The top row of the components table has been used as the default data for the appropriate fields.

For example, Pediarix is a combo vaccine that has multiple components or vaccines within it. If in System Administration prior to this change, default data was defined for all three component rows (Dosage, UOM, NDC, etc.), we took the first row of the component table and used it to set the default data in the appropriate fields (Dosage, UOM, NDC, etc.). Indicating a default dosage for each of the three components within Pediarix was not a relevant clinical scenario.

Order Detail

IMMUNIZATIONS TAB

1. **Components table** – The **Components** table displays the component name.
 - Users may select (check) the **VIS** checkbox to indicate that the patient has been given the VIS form for that vaccine and enter the date the form was given in the **VIS Given to Patient On** column.
 - Users may enter the **Published Date** for the component, as needed.
2. **Modifiers** – A **Modifiers** section has been added that allows users to select up to four modifiers for an immunization.
3. **Fields rearranged** – The remaining fields each defaults section have been rearranged to accommodate the new Components and Modifiers tables.

EVENTS TAB (NEW)

The Events tab displays the following information for the immunization order:

- **Adverse Reactions / Consequences** – Users may select (check) the appropriate checkbox(es) in the **Adverse Reactions** and **Consequences** lists to indicate any adverse effects from the immunization.
- **Contraindications** – Users may select (check) the appropriate checkbox(es) in the **Contraindications** section to record any immunization contraindications and enter the appropriate date range for each one in the **Vaccine Contraindication/Precaution Effective Date** and **Expiration Date** fields.
- **Comments** – Users may free-text any appropriate comments regarding immunization events.

Code Selector (Advanced Add tab)

Modifiers – A **Modifiers** section has been added that allows users to select up to four modifiers for an immunization. Any modifiers added to the immunization order will display in the appropriate **Modifiers** columns on the **Immunizations (Active)** tab on the **Code Selection** screen in the eSuperbill.

Code/Description Search Functions Combined in eSuperbill and Code Selector

Project #SEHS-175

The **Code** and **Description** radio buttons associated to the search field on the **Code Selection** tab in the eSuperbill and on the **Code Selector** window have been combined into a single **Search** field in both locations.

The screenshot shows two overlapping windows. The top window is the 'Code Selection' tab in the eSuperbill, displaying patient information for CLEMENTINE HANCOCK (DOB: 8/5/1971 (F), Patient #: 27339, 66705 - 10/7/2015) and a 'Search:' text box. The bottom window is the 'Code Selector' window, with the 'Quick Add' tab selected. It features a 'Search:' text box and a 'Search Type:' dropdown menu set to 'Begins With'. Red boxes highlight the search fields in both windows.

You may enter a code or description directly in the **Search** field without specifying whether your entry is code or description text.

In addition, the **Code Selector** tab on the main Code Selector window has been renamed **Quick Add**.

Code Selector, Multiple Selections Available for Historical Immunizations

Project #SEHS-180

Users may now select multiple immunizations while in Historical mode on the **Advanced Add** tab on the **Code Selector** window in order to apply a single Performed date across all selected immunizations.

The screenshot shows the 'Code Selector' window with the 'Advanced Add' tab selected. The 'Type' is set to 'Immunizations'. A red box highlights the 'Historical' checkbox, which is checked. Below the checkbox, a list of immunizations is shown, with several items selected (highlighted in yellow). A red box also highlights the 'Immunization Detail for Multiple Selected' section, which includes fields for 'Performed' date, 'Proposed Date', 'Units', 'Ordering Clinician', 'Circulator Role', 'Deliverer Alter', and 'Comments'. The 'Immunization Detail' section is also highlighted with a red box.

After selecting the **Historical** checkbox, you may select multiple immunizations from the list by pressing the CTRL key and selecting the appropriate items, enter a single **Performed** date for all selections, and click **Save**.

Tip - You may also enter the **Performed** date first and then select the appropriate immunizations.

When entering a Performed date for multiple items, the following values will be entered by default:

- Units – 1.00
- Ordering Clinician – OUTSIDE PROVIDER
- Clinician Role – (none)
- Comments – (none)
- Instructions – (none)
- Confidentiality Level – 1
- Exclude from HIE – Unchecked
- Display in Medcin – Checked

Code Selector, Proposed Date for Deferred Orders Available for All Order Types

Project #SEHS-131

When a **Proposed Date** is added to a deferred order on the **Advanced Add** tab on the **Code Selector** window, the date entered will persist until the user exits the **Code Selector** window.

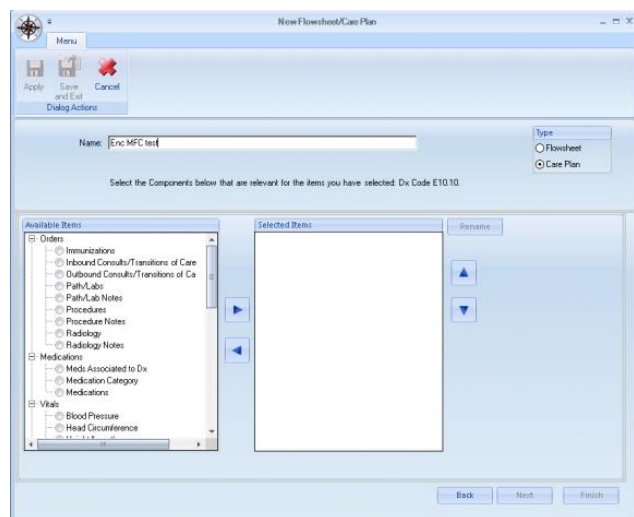
The screenshot shows the 'Code Selector' window with the 'Advanced Add' tab selected. The 'Type' is set to 'Procedures' and the 'Picklist' is 'Starter Set'. The 'STAT' checkbox is checked, and the 'Defer' checkbox is also checked. A list of procedures is displayed, with 'CH Test' (CPT: 00100) selected. The 'Procedures Detail for CH Test (CPT: 00100)' section shows the 'Proposed Date' field set to '06/24/2015'. Other fields include 'Ordered' (02/02/2015), 'Confidentiality Level' (Level 1), 'Units' (1.00), and 'Ordering Clinician' (YANG, CHRISTINA).

Care Plan

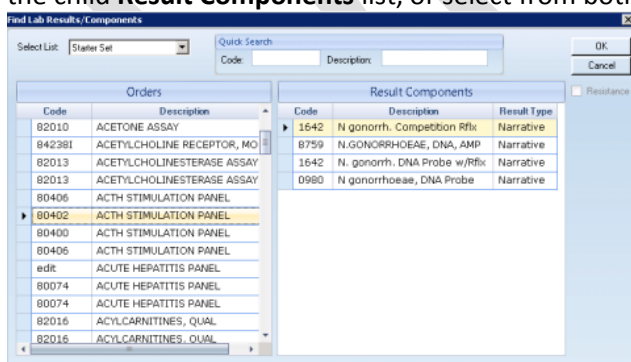
Care Plan, Changes to Order Component Selection

Project #SEHS-220

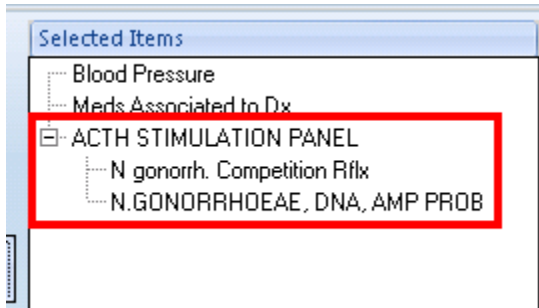
The following changes have been made when selecting order components for Care Plans on the **Flowsheet/Care Plan Configuration** screen in **Clinic Configuration** in the **System Administration Console**:



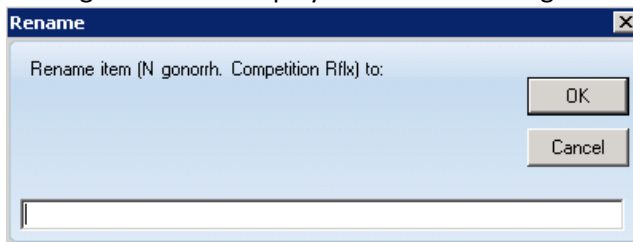
- The **Available Components** and **Selected Components** lists have been renamed **Available Items** and **Selected Items** respectively.
- **Path/Labs, Path/Lab Notes, Procedures, Procedure Notes, Radiology, and Radiology Notes** have been added as selections under the **Orders** list.
- **Lab Comments, Lab Result Component, Procedure Comments, Procedure Components, Radiology Comments and Radiology Components** have been **removed** from the **Orders** list.
- **Find Results/Components** screen – Users may select from the parent **Orders** list **without** selecting from the child **Result Components** list, or select from both lists and click **OK**.



Parent rows will display as left-justified in the **Selected Items** list; child components will display indented.



- Users may rename orders/components within a specific Care Plan by selecting the appropriate item and clicking **Rename** to display the **Rename** dialog box.

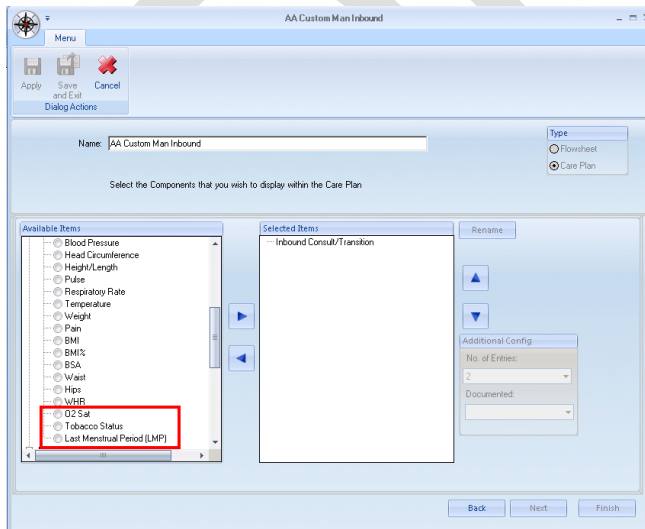


- Only parent/order items in the **Selected Items** list may be moved up/down in the hierarchy. Child/component items may not be re-ranked under a parent item.
- Only parent/order items are eligible for additional configuration. Child/component items under a parent item will assume the configuration of the parent item.

Care Plan Configuration, New Vitals Components for Custom Care Plans

Project #SEHS-223

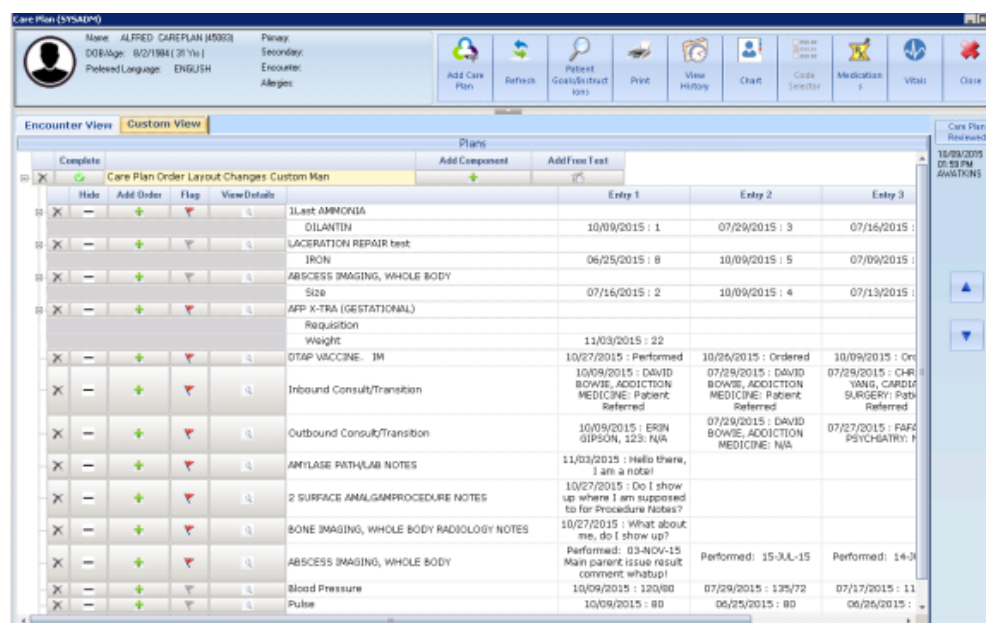
O2 Sat, Tobacco Status, and Last Menstrual Period (LMP) components may be added to Custom Care Plans as under the **Vitals** section under **Details** on the **Care Plan Configuration** screen.



Changes to Care Plan Layout

Project #SEHS-222

The following changes have been made to the Care Plan layout:



LAYOUT

- Order rows have been broken into parent and child rows. Orders will display on the parent row; any components selected for the order in the **Care Plan Configuration** screen will display as child rows. Child rows will display the component name and data columns.
- If parent rows are hidden (via the **Hide** button) or deleted, any child rows will also be hidden/deleted.
- Child rows may be re-ordered (via drag/drop) under a parent row, but must remain grouped underneath their parent.
- The **Add Order** and **Flag** buttons will be enabled for all parent rows at all times.

DATA DISPLAY

- Parent rows display data as follows:
 - Labs, Radiology and Procedures display the Result Comments and Date Performed.
 - If no result comments exist, only the Date Performed will display.
 - If neither result comments nor date performed are available, only **ORDERED** will display.
- Child/component rows display the observation value for the parent order. Values will display in red text if the value is in abnormal range.
- Notes order types will display the text from the **Notes** field in the parent row.

Changes to Medications Associated to Dx Codes

Project #SEHS-19

The following changes have been made to medications that are associated to diagnosis codes in Care Plan templates:

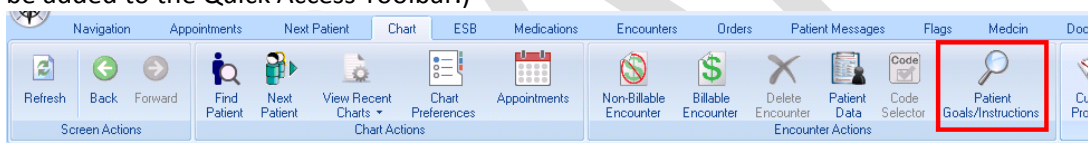
- **Adding medications** – If a medication is added to a patient record, a new row will display in the Care Plan for the medication.
- **Editing/modifying medications** – If an existing medication in a Care Plan is modified via the Med Details tab, the appropriate data will be automatically updated in the Care Plan when the user saves changes.
- **Deleting medications** – Deleting medications from a patient record will remove the appropriate data row from the Care Plan.
- **Discontinuing medications** – Discontinued medications will reflect the discontinued status in the appropriate data column in the Care Plan.

Goals/Instructions Updated

Project # SEHS-205, SEHS-212, SEHS-213, SEHS-214, SEHS-215

Goals and Instructions for Care Plans have been updated as follows:

- **Chart Menu Ribbon.** A **Patient Goals/Instructions** icon has been added to the main **Chart** menu ribbon to enable users to access patient goals/instructions without having to open a Care Plan. (This icon may be added to the Quick Access Toolbar.)



Clicking the **Patient Goals/Instructions** icon will display the main **Goals and Instructions** window:

A screenshot of the 'Goals and Instructions for Patient: CAREPLAN, ALFRED' window. The window has tabs for 'Goals' and 'Instructions'. The 'Goals' tab is active, showing a table with columns: Del, Goal, Due Date, Status, and Last Modified. There are four rows of goals, including 'Testing CarePlan' and 'Not having UE's anymore'. The 'Instructions' tab is also visible, showing a table with columns: Del, Instructions, and Last Modified. There are five rows of instructions, including 'New Instructions, where are you stored' and 'Please don't have UEs'. Buttons for 'Add', 'Save', and 'Cancel' are at the top left. There are also buttons to 'Display Goals in Medin' and 'Display Instructions in Medin'.

Users may add goals/instructions to a selected encounter via the appropriate **Add** buttons and edit information as needed to write to the selected encounter. If no encounter is selected, clicking Add will create a new non-billable encounter in which to add goals/instructions.

- **Removal from Order/Problem Detail.** The **Goals** and **Instructions** fields have been removed from all **Order Detail** and **Problem Detail** screens for patients. All existing and future goals and instructions will now be viewed in the **Goals and Instructions** window above.

- **CCDA Documents.** Goals and instructions will now populate information from the Goals and Instructions table in the **Care Plan** window to the relevant CCDA documents (as opposed to pulling from the previous **Problem Detail** or **Order Detail** screens).
- **Medcin Import.** Goals/instructions imported into the Medcin note from Care Plans have been updated to align with PCMH reporting:

Counseling/Education

- Instructions for patient New Instructions, where are you stored
- Instructions for patient Please don't have UEs
- Patient goals Testing CarePlan by 2 weeks Status: Accomplished Goal
- Patient goals Not having UE's anymore

The Medcin IDs for goals and instructions imported from Care Plans have been updated to the following:

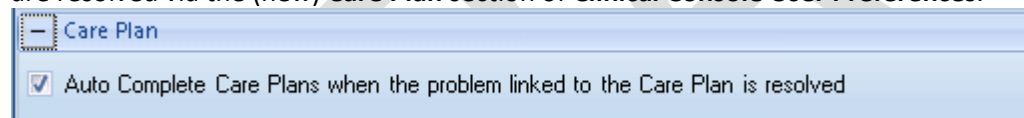
- Goals – Medcin ID **48951**
- Instructions – Medcin ID **74937**

These findings replace all previous findings that were used when importing goals/instructions from Care Plans. Information written to these findings will now be available for PCMH reporting via Success Practice Analytics.

New Auto-Complete Care Plan Function

Project #SEHS-122, SEHS-123

Users may configure to automatically complete a Care Plan when the diagnosis code(s) associated to the plan are resolved via the (new) **Care Plan** section of **Clinical Console User Preferences**.



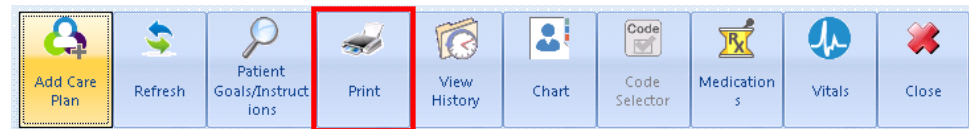
The **Auto Complete Care Plan when the problem linked to the Care Plan is resolved** option, when enabled, will mark a Care Plan as **Complete** when its associated problem(s) are marked **Resolved**. (This preference is enabled [checked] by default in User Preferences.)

Note - If a Care Plan is associated to a range of diagnosis codes, all codes in the range must be resolved on the appropriate patient's problem record before the associated Care Plan will be marked Complete.

New Print Option for Care Plans

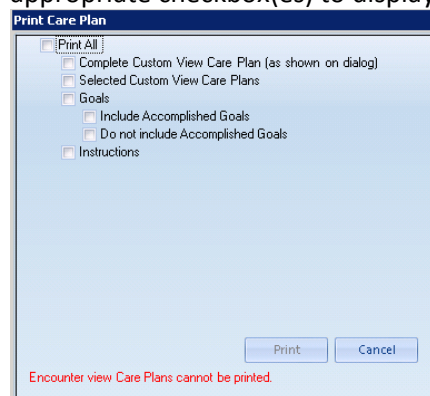
Project #SEHS-61, SEHS-62

A **Print** button has been added to the main **Care Plan** toolbar that enables users to print Custom Care Plans.



Clicking **Print** displays a **Print Care Plan** dialog box where users may select the specific information to display on the Care Plan printout. You may select (check) the **Print All** checkbox to print the entire Care Plan, or select the

appropriate checkbox(es) to display only selected information on the Care Plan printout.



Print Care Plan

☐ Print All

☐ Complete Custom View Care Plan (as shown on dialog)

☐ Selected Custom View Care Plans

☐ Goals

☐ Include Accomplished Goals

☐ Do not include Accomplished Goals

☐ Instructions

Encounter view Care Plans cannot be printed.

Note - Users must make at least one selection on the Print Care Plan dialog box in order to generate a printout.

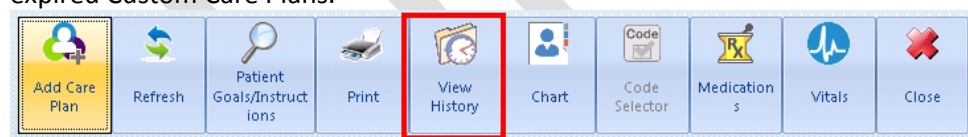
Click **Print** to print the care plan. (Encounter view Care Plans cannot be printed.)

Care Plan for JERRY ZZTEST Patient Id: 40534			
Goal	Due Date	Status	Last Modified
Lose 30 pounds		Improving	Modified by SYSADM on 22-SEP-15
Lose 30 Pounds		Improving	Modified by SYSADM on 22-SEP-15
Lose 30 pounds	03/30/2016	Unknown	Modified by SYSADM on 14-SEP-15
Do not eat bugs		Improving	Modified by SYSADM on 15-SEP-15
Instructions			Last Modified
Do not eat bugs			Modified by SYSADM on 22-SEP-15
Do not eat bugs			Modified by SYSADM on 22-SEP-15
I'm an instruction			Modified by SYSADM on 22-SEP-15
Avoid crickets because they are tasty			Modified by SYSADM on 15-SEP-15

New View History Button for Custom Care Plans

Project #SEHS-59

A **View History** button has been added to the main **Care Plan** toolbar that enables users to view completed and expired Custom Care Plans.



To view a patient's Care Plan history:

1. Click the **View History** button. The **Care Plan History** window displays.

Care Plan History

Filter:

☒ None
☐ Manual Care Plans
☐ Problem Care Plans
☐ Problems

Templates:

Note: For KD10, Templates associated to the Patient or Billing code will be included

Case Plan

Completed

AA Custom Plan ALL NEW				
	Entry 3	Entry 2	Entry 3	Entry 4
AWLAGE	07/29/2015 : Ordered	07/29/2015 : Performed	07/27/2015 : Ordered	07/27/2015 : Ordered
Outbound Consult/Transition	07/29/2015 : DWAO BO.	07/27/2015 : PAPA PAPA	07/27/2015 : ELVIS PHE.	07/27/2015 : GEORGE
DTAP VACCINE, IM	07/29/2015 : Ordered	07/16/2015 : Performed	07/15/2015 : Ordered	07/15/2015 : Ordered
Inbound Consult/Transition	07/29/2015 : LESLIE AN.	07/29/2015 : CHRISTIN.		
LLAST AMMONIA				
DILANTIN	07/10/2015 : 8	07/08/2015 : 8	07/13/2015 : 7	
LACRICATION REPAIR test				
IRON	07/07/2015 : 1	07/10/2015 : 3	07/16/2015 : 4	
BONE IMAGING, WHOLE BODY	07/29/2015 : Ordered			
ABSCCESS IMAGING, WHOLE BODY				
Size	07/16/2015 : 2	07/15/2015 : 5	07/14/2015 : 6	
ABSORBABLE SULFONAMIDE ANTBACTERIA.	07/29/2015 : sulfatrim.	07/17/2015 : sulfachon.		
Xanax	07/29/2015 : Xanax 1.	07/17/2015 : Xanax 1.		
Blood Pressure	07/29/2015 : 135/72	07/17/2015 : 115/80	07/16/2015 : 114/82	
Height/Length	07/29/2015 : 74 in	07/17/2015 : 77 in	07/16/2015 : 76 in	
Pulse	07/07/2015 : 170	07/29/2015 : 100	07/16/2015 : 90	
Resp. Rate	07/29/2015 : 3	07/08/2015 : 3	07/14/2015 : 4	
Temperature	07/02/2015 : 99.5 F	07/10/2015 : 99.4 F	07/06/2015 : 99.3 F	
Weight	07/15/2015 : 150 lbs. 0.	07/08/2015 : 151 lbs. 1.	07/16/2015 : 154 lbs. 2.	
Bain	07/29/2015 : 9	07/13/2015 : 4	07/02/2015 : 4	

2. Select the appropriate **Filter** radio button to filter the history. Selections include the following:
 - **None** – (default) Displays all care plans.
 - **Manual Care Plans** – Displays only Manual care plans.
 - **Problems Care Plans** – Displays only Problems-based care plans.
3. To view a specific complete Care Plan, select the appropriate Care Plan template name from the **Templates** drop-down list.
4. To view all care plans associated to a given problem, select the appropriate problem from the **Pt Problems** drop-down list.
5. The appropriate Care Plan(s) will display in expanded view based on your selections and filters.
 - Care Plans will be listed based on the most recent **Completed** date, in descending order.
 - ICD9 problems will display the ICD9 code and description. ICD10 problems will display both parent and billing codes, as well as descriptions for each.
6. Click the **Close** button to close the **Care Plan History** window.

Values Added to Custom Care Plan Medcin Descriptions

Project #SEHS-129

Values entered in the **Onset**, **Duration**, and **Value** fields in the Medcin note will now display in the Medcin descriptions in all Custom Care Plans.

Hide	Add Order	Flag	View Details	07/17/2015	07/16/2015
X	-	Y	Y	encounter background information	
X	-	Y	Y	head-related symptoms	
X	-	Y	Y	headache	No head symptoms
X	-	Y	Y	skull pain	No headache
X	-	Y	Y	scalp swelling	
X	-	Y	Y	pain behind the ear	
X	-	Y	Y	pain around the ear	
X	-	Y	Y	facial pain	
X	-	Y	Y	headache	
X	-	Y	Y	skull pain	No headache
X	-	Y	Y	scalp swelling	
X	-	Y	Y	pain behind the ear	
X	-	Y	Y	pain around the ear	
X	-	Y	Y	facial pain	

The Medcin descriptions will now read with the following syntax: **[Symptom]** was **[value]** as of **[onset]** lasting **[duration]**.

Charge Entry

Charges Tab, Changes to Auto-Mapping Logic of ICD10 Codes

Project #SEHS-137

For databases that are live in ICD10 that receive inbound ICD9 codes from DFT transmissions, all ICD9 codes that have a **one-to-one** mapping in the system will automatically map the ICD9 code to its equivalent ICD10 code without prompting the user to manually map the code.

Inbound ICD9 codes that have multiple ICD10 mapping possibilities will continue to prompt the user to map the codes manually to the appropriate ICD10 equivalents.

Charges Tab, ICD9 Equivalent Search Function Added

Project #SEHS-145

Users may search for ICD10 codes in the **Code Lookup** window through their ICD9 equivalents by entering a **9:** prefix before the appropriate ICD9 code or description.

ICD10 Code	ICD10 Short Description	ICD10 Long Description	Effective Date	Expiration Date
E10.10	TYPE 1 DIABETES MELLITUS	TYPE 1 DIABETES MELLITUS w/ 01-Oct-2013		
E10.11	TYPE 1 DIABETES MELLITUS	TYPE 1 DIABETES MELLITUS w/ 01-Oct-2013		
E10.21	TYPE 1 DIABETES MELLITUS	TYPE 1 DIABETES MELLITUS w/ 01-Oct-2013		
E10.29	TYPE 1 DIABETES MELLITUS	TYPE 1 DIABETES MELLITUS w/ 01-Oct-2013		
E10.311	TYPE 1 DIABETES w/ UN	TYPE 1 DIABETES MELLITUS w/ 01-Oct-2013		
E10.319	TYPE 1 DIABETES w/ UN	TYPE 1 DIABETES MELLITUS w/ 01-Oct-2013		
E10.36	TYPE 1 DIABETES MELLITUS	TYPE 1 DIABETES MELLITUS w/ 01-Oct-2013		
E10.39	TYPE 1 DIABETES w/ OTH	TYPE 1 DIABETES MELLITUS w/ 01-Oct-2013		
E10.40	TYPE 1 DIABETES MELLITUS	TYPE 1 DIABETES MELLITUS w/ 01-Oct-2013		
E10.51	TYPE 1 DIABETES w/ DIA	TYPE 1 DIABETES MELLITUS w/ 01-Oct-2013		
E10.618	TYPE 1 DIABETES MELLITUS	TYPE 1 DIABETES MELLITUS w/ 01-Oct-2013		

To search for ICD10 codes via ICD9 information, enter **9:** followed by the appropriate search text in the **Code** or **Description** fields. (A minimum of three (3) characters must be entered in either field after the **9:** prefix; e.g., **9:250** for diabetes codes.) All ICD10 codes mapped to the ICD9 search information will display in the **Diagnosis Codes found** table.

Inst Data Tab, New FL 70 Visit Codes Option

Project #SEHS-226

An **FL 70: Reason for Visit** button has been added to the **Inst Data** tab in **Charge Entry** and on the **Institutional Claim Detail** screen in **Claims Console** that enables users to search and select up to three reason for visit ICD10 codes to populate the FL 70 A, B, and C fields on the 837 file.

Charge Entry Batch ID: 2692 - TEST Claim ID: 66368 ASSESSMENT: C

Patient Information: Patient Number: 44470 Claim ID: 66368 Guarantor Name: SMITH, ANNIE Check-In: 07/30/2015 3:31 PM [SYSADM]
Patient Name: SMITH, ADAM Patient Date of Birth: 07/01/1988 Check-out: 10/23/2015 9:44 AM [SYSADM]

Summary | Charges | Cash Dis | Prof Data | Additional Patient Data | Notes | Transaction Details | Inst Data | Dental Data

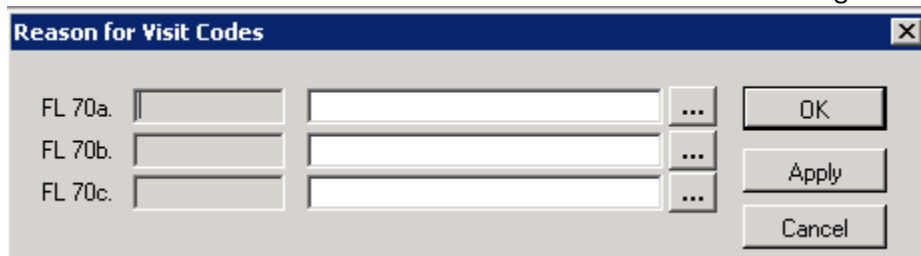
FL 2: Misc: FL 4: Bill Type: 711 FL 18-29: Condition Codes
FL 6: Statement Covers Period: From: 07/30/15 Through: 07/30/15 FL 39-41: Value Codes
FL 12: Admission Date: FL 13: Hour: FL 31-35: Occurrence Codes
FL 14: Admission Type: FL 64: Internal Control B:
FL 16: Discharge Hour: FL 70: Reason for Visit
FL 15: Admission Source: Paperwork

Institutional Claim Data


FL 2: Misc: FL 4: Bill Type: 131 FL 18-29: Condition Codes
FL 6: Statement Covers Period: From: 10/08/2015 Through: 10/08/2015 FL 39-41: Value Codes
FL 12: Admission Date: FL 13: Hour: FL 31-35: Occurrence Codes
FL 14: Admission Type: FL 64: Internal Control B:
FL 16: Discharge Hour: FL 70: Reason for Visit
FL 15: Admission Source:
FL 17: Patient Status:
FL 69: Admitting Diagnosis:
FL 72: Emergency Diagnosis:
Number of Days (UB9-92 Only - Not Available on UB04)
FL 7: Covered Days: FL 9: Coinsurance Days:
FL 8: Non-Covered Days: FL 10: Lifetime Reserve Days:
Claim Remarks:

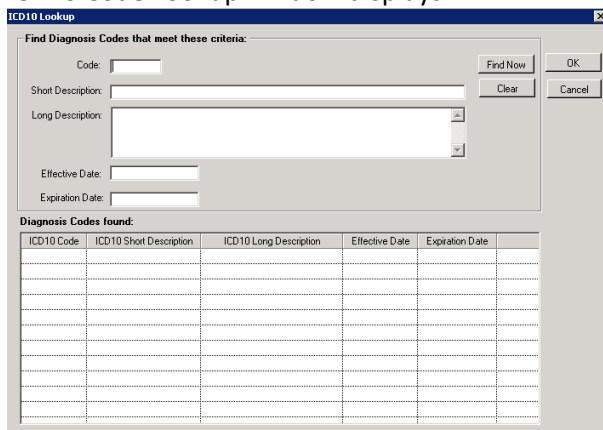
To add reason for visit codes in the FL 70 fields:

1. Click the FL 70: Reason for Visit button. A Reason for Visit Codes dialog box displays.



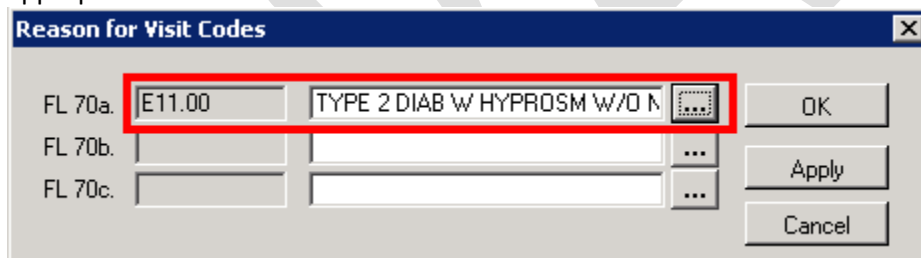
The 'Reason for Visit Codes' dialog box has a title bar with a close button. It contains three rows of input fields labeled FL 70a, FL 70b, and FL 70c. Each row has a text box, a dropdown menu (indicated by three dots), and a button. To the right of the input fields are three buttons: OK, Apply, and Cancel.

2. Click  in each **FL 70** field in order (FL 70a, FL 70b, FL 70c) to search for the appropriate ICD10 code. An ICD10 Code Lookup window displays.



The 'ICD10 Lookup' window has a title bar with a close button. It contains a search section with fields for Code, Short Description, Long Description, Effective Date, and Expiration Date. There are buttons for Find Now, OK, Clear, and Cancel. Below the search section is a table titled 'Diagnosis Codes found:' with columns for ICD10 Code, ICD10 Short Description, ICD10 Long Description, Effective Date, and Expiration Date. The table is currently empty.

3. Search for and select the appropriate code and click **OK**. The ICD10 code and description will populate in the appropriate FL 70 field.



The 'Reason for Visit Codes' dialog box is shown with the FL 70a field populated with 'E11.00' and the dropdown menu showing 'TYPE 2 DIAB W HYPROSM W/O N'. The FL 70b and FL 70c fields are empty. The OK, Apply, and Cancel buttons are visible on the right.

4. Click **Apply** to save your changes. Click **OK** to save your changes and close the dialog box.

The visit codes entered in each field will populate on the 837 file in the appropriate location (A, B, or C).

Note - You must enter the FL 70 reason for visit codes in order (A > B > C).

Chart

Classic Chart Removed from System

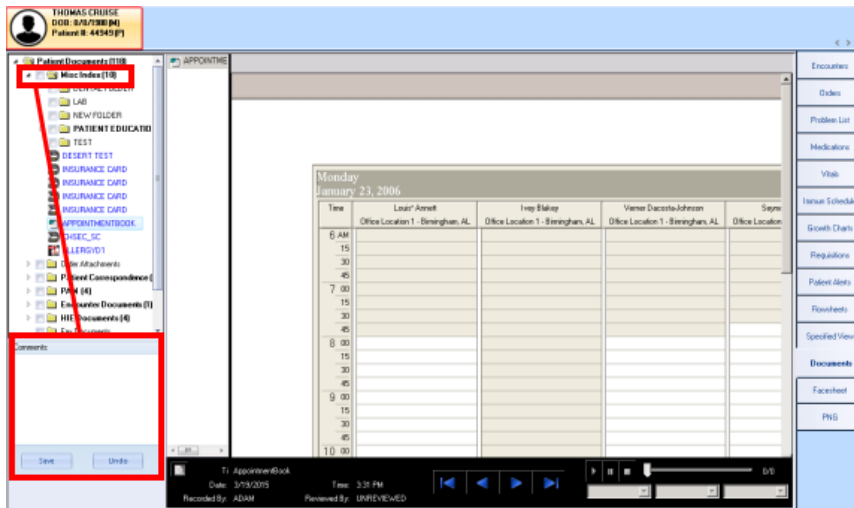
Project #SEHS-48, SEHS-49

All icons and references to the **Classic Chart** module have been removed from the SuccessEHS software in the 7.50 release. Classic Chart will no longer be accessible or supported in version 7.50 and later.

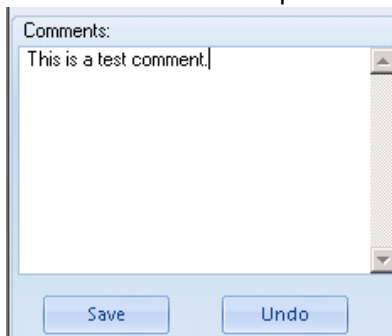
Documents Tab, Comments Field Added for Misc Index Documents

Project #SEHS-271

A **Comments** field has been added to the **Documents** tab in **Chart** that enables users to add comments to **Misc Index** documents.



Users may enter comments in the **Comments** field for a selected Misc Index document and click **Save** to attach the comments to the open document. Click **Undo** to cancel the comment.



Note - The Comments field is only enabled for Misc Index document types.

Note - All comments entered for previous documents on the Misc Index tab in Classic Chart will populate in this field.

Orders Tab, Export Button Added for Radiology Orders

Project #SEHS-232

An **Export** button has been added to the **All** and **Radiology** orders groups that enables users to export radiology orders to appropriate radiology interfaces. This button will only enable if the database is configured for a

radiology interface.

Orders: Radiology (2)											
Order Date	Performed Date	CPT	Description	Order Type	Link Probe	Signed By	Sign Off	Not Perfor	Defer Order	Delete	ORDERING CLINICIAN
05/2013		70210	X-RAY SINU...	Radiology T...							ROBERTS, DARRELL
21/2013		70450	CT HEAD/BR...	Radiology T...							ROBERTS, DARRELL

Note - On the All orders group grid, the Export button will only be available if Radiology orders exist in the database.

Clinical Console

New Icons in Clinical Console

Project #EHS-23593
















The following icons have been updated in the menu ribbons and screens in Clinical Console.






















Note - Some icons may appear on more than one menu ribbon or screen; only the first instance of the icon will be displayed below.

Global Icons/Screen Actions




















Refresh 	Back 	Forward 	Quick Close 	Add 
Apply 	Calendar 	Cancel/Close 	Delete 	Save and Exit 

Navigation Ribbon

Authorizations 	ACOG/Antepartum Record 	Billing 	Charge Entry 	Chart 
Check In 	Collections 	Inquiry 	Medcin 	Medications 
Patient Administration 	Patient Correspondence 	Receivables 	Rounds 	Scheduling 

Security 	Specified View 	System Administration 	Utilities 	eSuperbill 
PNG 	Chart Capture 	CEM 	Flowsheets 	Care Team 
CCD 	Risk Levels 	Risk Levels generated manually 	Risk Levels changed 	Risk Levels changed manually 
Next Patient 	Patient Data 	Pending Corrections 	Code Selector 	Map Problems 
Care Plan 				

Appointments

Calendar 	Today 	Go back 1 day 	Go back 1 month 	Go back 1 year 
Go back 7 days 	Go forward 1 day 	Go forward 1 month 	Go forward 1 year 	Go forward 7 days 
Undo Check-In 	Patients Not checked out 	Check-In Patient 	Multi-Patient Check-In 	Mark Departed 
Undo Mark Departed 	Mark Arrival 	Undo Mark Arrival 	Patient PMH 	

Next Patient

Submit ESB 	Patient Alerts (inactive) 	Patient Alerts (active) 	Patient Alert Notes (active and inactive) 	Chief Complaint/Assign Room
Change Clinician 	HIE Actions 	Med. Necessity 	Growth Charts 	Vitals
Patient Education 	Update Preference 	Select Positions 	Change Date 	Reset All Rooms

Chart

Find Patient 	Non-Billable Encounter 	Billable Encounter 	Delete Encounter 	Patient Goals/Instructions
Current Problem 	Problem History 	Reconcile Problems 	Addenda 	Appointments

Encounters/Encounter Detail







Review (active and inactive) 	Print Summary 	Print Doc./Dictation 	Export Doc./Dictation 	
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ESB















Appts/Notes 	Appts/Notes (notes present) 	Import Pt Problems 	Dx Master List 	CPT Master List
Episode Dates 	Delete ESB and Encounter 	Global Period 	Process ESB Report 	Print Med
eRx 	Immun Schedule 	Adjust CPT Fee 	Clinical Notes 	Pend

Dictate 	eSuperbill (red) 	eSuperbill (teal) 	eSuperbill (gray) 	
--	---	--	--	--










Medications

Accept 	Deny 	Remove Completed 	Find Patient 	Find Medication 
Find Pharmacy 				

Orders/Order Detail

Attachments 	Link Problems 	Not Performed 	Send Direct Message 	Sign Off 
Edit Order 	Edit Log 	Apply eSignature 	Remove eSignature 	Privacy/Consent Info 
Privacy/Consent Info absent 	Image (Radiology) 	First 	Last 	






















Patient Messages

Save/Send 	Undo 	Save and Signoff 	Refresh Direct Messages 	Create Patient Message 
Add Personal Message 	Reply 	Reply and Save 	Patient Messages Overview 	

Flags

Flag 	Release Flag 	Reply (Flags) 	Reply and Save (Flags) 	Flags Overview 
---	---	--	--	---










Medcin

Lists 	Forms 	Medcin Toolkit 	Encounter Detail 	Search 
Prompt 	IP 	Group 	List Size 	Reset 
EM Calculator 	ROS 	Import/Import Note 	Normal <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	AutoPos <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Make all unentered page entries positive 	Make all unentered page entries negative 	Duplicate Finding 	Expanded View 	Concise View 
Save as List 	Delete Note 	Dictation Audio 		

Documentation

HIV/AIDS Reporting 	Auto-Link 	Manual Link 	Request Patient EHR 	Clinical Exchange 
--	---	---	---	---






















Reports

Printer Setup 	Process Reports 	Process ESB Report 	Print Order Reports 	Fax Order Reports 
Immun Reports 	MU/PQRS Reports 	Clinical Exchange 	Refresh Fax Queue 	

Transaction Logs

From 	To 	View 		
--	--	--	--	--

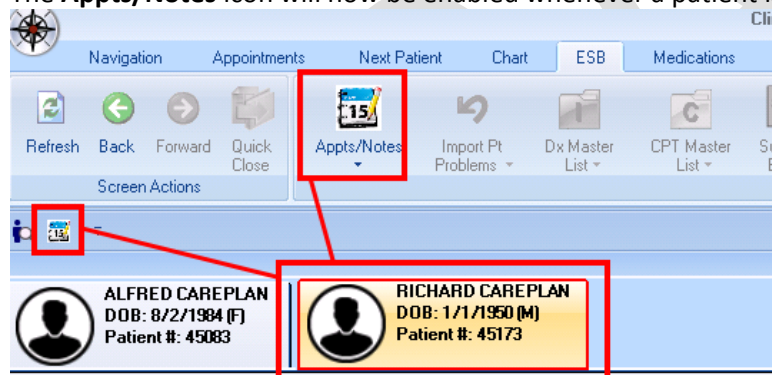
Patient Documents/Templates

Print 	Fax 	Review 	Misc. Index Folders 	Scan 
Cut 	Copy 	Paste 	Font 	Page Setup 
Bold 	Italic 	Underline 	Highlight 	Bullets 
Numbering 	Left 	Center 	Right 	Justify 
Image 				

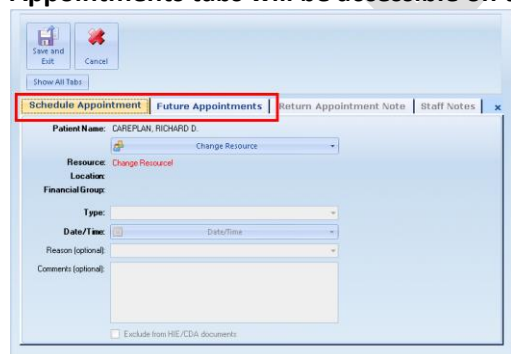
Appts/Notes Icon Enabled When Patient Selected

Project #SEHS-174

The **Appts/Notes** icon will now be enabled whenever a patient is selected and in context on screen.



Note - When a patient is selected (but no encounter is selected), only the Schedule Appointment and Future Appointments tabs will be accessible on the Appts/Notes dialog box.

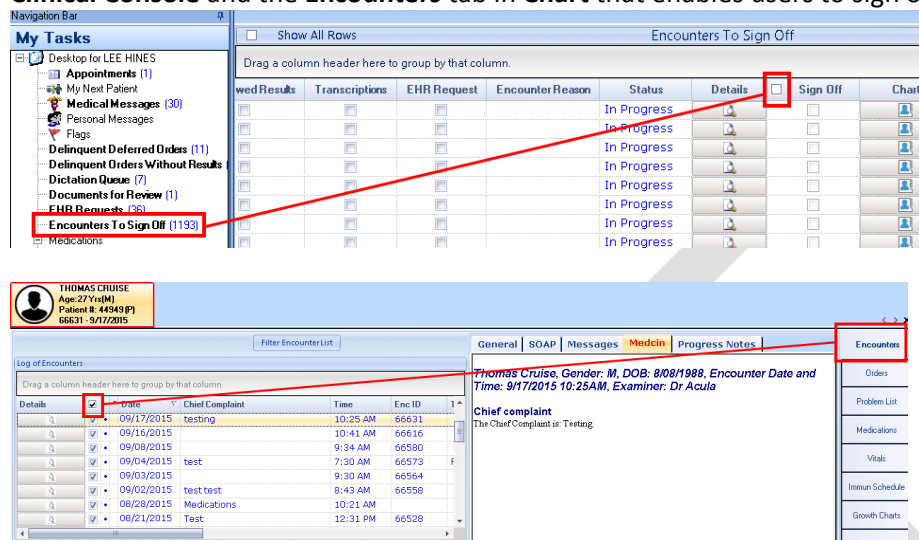


If a billable encounter is selected for a patient, all tabs will be enabled. If a non-billable encounter is selected, all tabs except Staff Notes will be enabled.

Encounters, New Select All Sign Off Option

Project #SEHS-243

A **Select All** checkbox has been added to the **Sign Off** column header on the **Encounters to Sign Off** screen in **Clinical Console** and the **Encounters** tab in **Chart** that enables users to sign off all encounters on screen.



To sign off all active encounters, select (check) the **Select All** checkbox and click **Sign Off Selected** in the main **Encounters** menu ribbon in either module.

ExitCare Updates

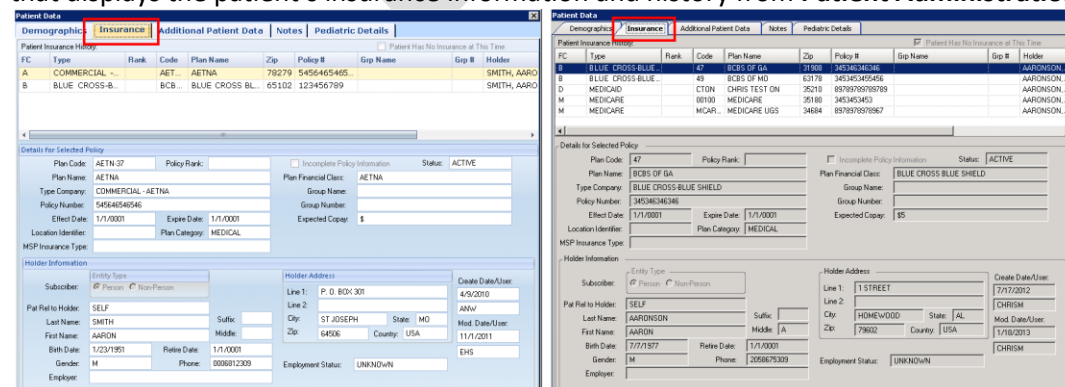
Project #EHS-23556

The ExitCare Q3 2015 updates have been completed.

Insurance Information Added to Patient Data Window

Project #SEHS-70

An **Insurance** tab has been added to the **Patient Data** window in **Clinical Console** and **Clinical Event Manager** that displays the patient's insurance information and history from **Patient Administration**.



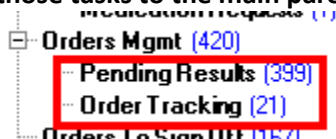
My Tasks, Task List Order Editable

Project #SEHS-182

Users have the ability to re-order the tasks in the **My Tasks** list by dragging and dropping individual tasks into the desired order in the list.

This function is available for all parent tasks, or all child tasks within a parent task.

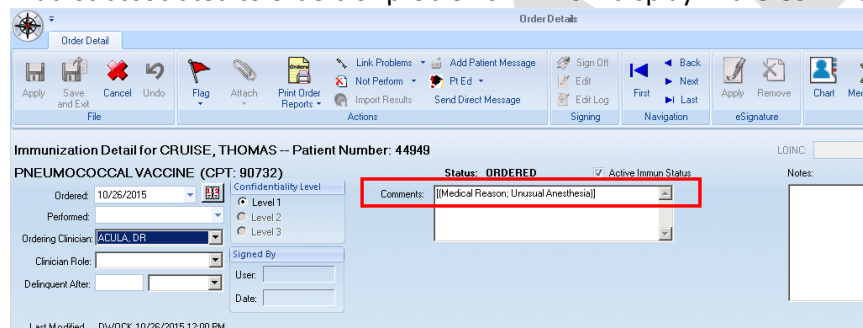
Note - Users cannot move a child task into the parent level, or vice-versa. For example, users may re-order the Orders Tracking and Pending Results tasks within the Orders Management parent, but cannot move either of those tasks to the main parent row in the My Tasks list.



Order Details, Macros Now Display in Comments Field

Project #SEHS-237

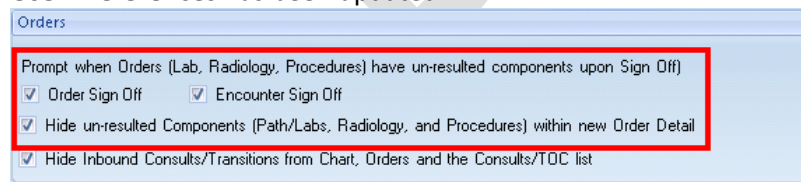
Macros associated to orders or problems will now display in the **Comments** field on the **Order Detail** window.



User Preferences, Changes to Order Components Logic in General Preferences

Project #SEHS-58

The logic governing order components in the **Orders** section of the **General Preferences** tab in **Clinical Console User Preferences** has been updated.



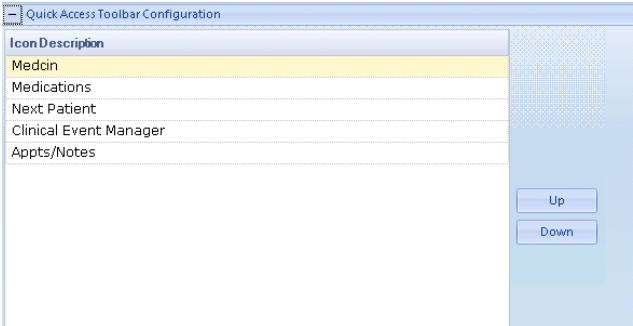
Previously, users could not enable the **Prompt when Orders have unresulted components upon Sign Off** and the **Hide un-resulted Components within Order Detail** options at the same time; only one of the options could be enabled.

This has changed; users may now enable the option to hide unresulted orders and prompt when orders have unresulted components.

User Preferences, New Quick Access Toolbar Configuration

Project #SEHS-177

A **Quick Access Toolbar Configuration** tab has been added to **Clinical Console User Preferences** that enables you to customize the order of the **Quick Access Toolbar**.



The **Quick Access Toolbar Configuration** tab lists the names of all icons currently residing on the QAT, in descending order from left to right on screen (i.e., the first name on the list corresponds to the leftmost icon on the QAT, the second name on the list corresponds to the item second from the left, etc.).

1. To change the position of an icon on the QAT, select the appropriate icon name and click the **Up** or **Down** buttons to move the name to the desired position on the list. Repeat this for each icon you wish to re-order on the QAT.
2. Click **Save & Exit** on the **User Preferences** screen to save your changes.

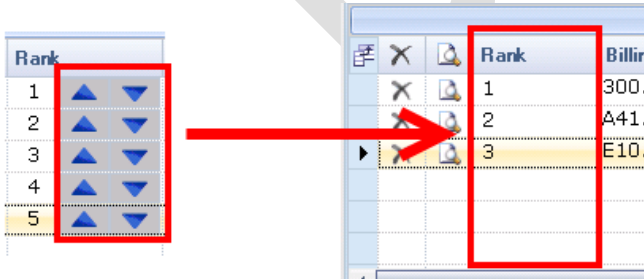
eSuperbill

New Drag/Drop Function for Ranking Problems

Project #SEHS-181

Users may now re-rank problems in the **Diagnoses** tables on the **Visit Summary** tab on eSuperbill and in all **Encounter Detail** windows by dragging and dropping the appropriate problem rows into the desired ranking order.

The **Rank** column will automatically re-rank problem rows as they are re-ordered by the user. The ranking arrows have been removed from the Rank column to accommodate this function.



HIV/AIDS Reporting

Client Level Data Configuration, Expanded Code Mapping Options

Project #SEHS-17, SEHS-147, SEHS-148

DEMOGRAPHICS TAB

CPT Codes and **Components** mapping options have been added to the **Enrollment/Vital Status** and **Living Situation** line items on the **Demographics** tab on the **Client Level Data Configuration** screen under **HIV/AIDS Reporting** in the **System Administration Console**.

SCREENINGS TAB/TB TAB

All line items on the **Screenings** and **TB** tabs on the **Client Level Data Configuration** screen now have all four options available for mapping: **CPT Codes**, **Dx Codes**, **Medcin Findings**, and **Components**:

Line Item: Chlamydia Lab Value

Line Item Answer: Chlamydia Lab Value

Select those codes that map to this service or line item. When a mapped code appears on an encounter, the service or line item will be considered performed for HIV/AIDS reporting.

☐ CPT Codes (0)
 ☐ Dx Codes (0)
 ☐ Medicin Findings (0)
 ☒ Components (1)

Mapped Components

Drop	Code	Description	CPT Code	CPT Code Description
		GABE TEST- CODED TEXT	87536	GABE's HIV Lab component

Available Quantitative Components

Add	Code	Description	CPT Code	CPT Code Description
		% CD 4 Pos. Lymphs > 70100	JAW 4 VIEWS OR LESS X-RAY	
		% CD 4 Pos. Lymphs > 70110	X-RAY EXAM OF JAW	
		% CD 4 Pos. Lymphs > 74000	AB-OMEN X-RAY	
		% CD 4 Pos. Lymphs > 78607	BRAIN IMAGING (3D)	
		% CD 4 Pos. Lymphs > 80406	ACTH STIMULATION PANEL	
		% CD 4 Pos. Lymphs > 82055	ALCOHOL, (SALIVA)	
		% CD 4 Pos. Lymphs > 82950	CPK	
		% CD 4 Pos. Lymphs > 82977	GOT	
		% CD 4 Pos. Lymphs > 83615	LDH	
		% CD 4 Pos. Lymphs > 84080	Alkaline Phosphatase, Isoenzymes /or Alkaline Phosphatase, Isoenzymes	
		% CD 4 Pos. Lymphs > 86660	ASD	
		% CD 4 Pos. Lymphs > 06920	1.BW	

Note - CD4 Count and Viral Load Count on the Screenings tab are the only line items that do not have the four above mapping options available. Only the Components option is available for these line items.

HIV/AIDS Reporting, Eligibility History Added

Project #SEHS-8, SEHS-38

An **Eligibility** tab has been added to the **HIV/AIDS Reporting Data Review** window that enables users to enter eligibility date ranges for a patient.

HIV/AIDS Reporting Data Review Log Out

Find Patient: **Current Patient: ANNETTE.ZWISCH - 3379** Reporting Period: From: 12/1/2013 To: 12/31/2015 Load

☒ Enrolled in Ryan White Reporting - ☒ Enrolled in AIDS Reporting Issues labeled with an asterisk - are used for HIVIS reporting.

☒ Enrolled in Ryan White Reporting ☒ Enrolled in AIDS Reporting

[Display Code Summary](#) 41 141 36

Funding Sources **Demographics** **Services** **Screenings** **TB** **Antiretroviral Info** **Misc** **CPICDMS** **CPICDMS (cont)** **Eligibility**

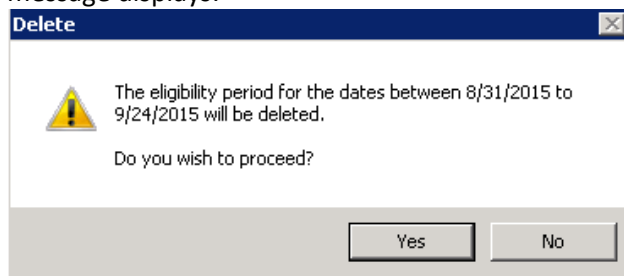
Eligibility

Date	Tx	Last Modified	Last Modified Date
12/16/2014	12/25/2014	ANNTZWS	6/16/2015 4:38 PM
8/10/2015	8/12/2015	ANNTZWS	6/18/2015 4:19 PM
6/3/2015	6/7/2015	ANNTZWS	6/18/2015 4:19 PM
6/2/2015	6/4/2015	ANNTZWS	6/18/2015 4:15 PM
7/18/2015	7/26/2015	ANNTZWS	6/18/2015 4:22 PM
3/20/2014	3/11/2014	ANNTZWS	6/18/2015 4:20 PM

Find Save Cancel View Audit

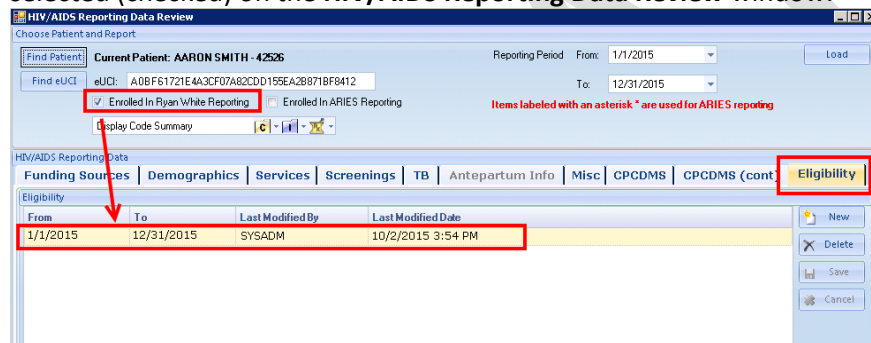
To add eligibility ranges:

1. Click the **New** button on the **Eligibility** tab. A blank row displays.
2. In the **From** and **To** fields, enter the appropriate eligibility date range (or select the appropriate date from the drop-down calendar in each field).
3. Click **Save** on the Eligibility tab to save your changes.
4. To delete a date range, select the appropriate row and click **Delete** on the Eligibility tab. A confirmation message displays:



Click **Yes** to delete the row, or **No** to cancel deletion.

For the 7.50 release, all patients currently enrolled in Ryan White reporting will automatically have an eligibility record created for 2015 on the (new) **Eligibility** tab when the **Enrolled in Ryan White Reporting** checkbox is selected (checked) on the **HIV/AIDS Reporting Data Review** window.

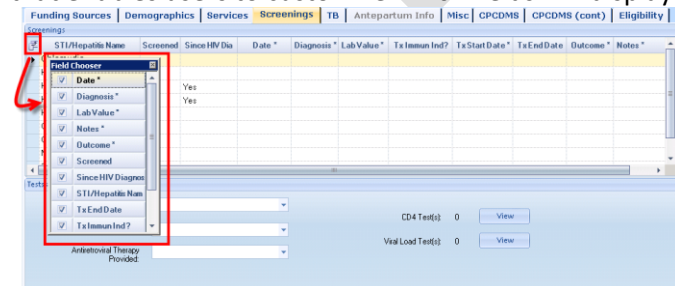


This eligibility covers the entire 2015 calendar year.

HIV/AIDS Reporting, Field Chooser Added to Screenings Tab

Project #SEHS-14

A **Field Chooser** option has been added to the **Screenings** tab on the **HIV/AIDS Reporting Data Review** window that enables users to customize which fields will display on the tab.



You may select (check) the checkbox for each field you want to display on the **Screenings** tab.

RSR Generation, New Ignore Eligibility History Function

Project #SEHS-45

An **Ignore Eligibility History** option has been added to the **RSR Generation** screen under **Clinic Configuration** in the **System Administration Console**.

The screenshot shows the 'Create RSR' form in the 'Clinic Configuration' section. The 'Ignore Eligibility History' checkbox is checked and highlighted with a red box. The 'Reporting Period' is set from 1/1/2015 to 12/31/2015. The 'Status' is 'Ready'. Below the form, there is a table of 'Patients Excluded From HIV/AIDS Reporting' with columns for Patient ID, First Name, and Last Name. The table contains three rows: 25396 ADA SMITH, 59252 AARON BROWN, and 94542 ABEL JONES.

This option is deselected by default. When the user selects (checks) this option, RSR reports will generate as though all patients enrolled in Ryan White reporting had an eligibility history covering the entire year.

An **Ignore Eligibility** column has been added to the **Current Reports** table that indicates (with a checkmark) those RSR reports that were generated without eligibility history.

The screenshot shows the 'Current Reports' table. The 'Ignore Eligibility' column is highlighted with a red box. The table has columns: Save, Summary, CLD, User Created, Date Created, Time Taken, Result, and Ignore Eligibility. The 'Ignore Eligibility' column contains checkmarks for several reports.

Save	Summary	CLD	User Created	Date Created	Time Taken	Result	Ignore Eligibility
			AWATKINS	09/09/2015 10:42 AM	00:00:03	Complete	
			DDAVIS	09/09/2015 10:38 AM	00:00:04	Complete	
			DDAVIS	09/09/2015 10:33 AM	00:00:04	Complete	
			DDAVIS	09/09/2015 10:32 AM	00:00:05	Complete	
			AWATKINS	09/09/2015 10:12 AM	00:00:04	Complete	
			AWATKINS	09/09/2015 09:56 AM	00:00:04	Complete	
			AWATKINS	09/09/2015 09:53 AM	00:00:04	Complete	
			CHRISM	09/09/2015 09:40 AM	00:00:04	Complete	
			AWATKINS	09/09/2015 09:34 AM	00:00:04	Complete	
			AWATKINS	09/09/2015 09:33 AM	00:00:04	Complete	
			CHRISM	09/09/2015 09:28 AM	00:00:04	Complete	
			CHRISM	09/09/2015 09:20 AM	00:00:04	Complete	
			AWATKINS	09/09/2015 08:57 AM	00:00:04	Complete	
			AWATKINS	09/09/2015 08:35 AM	00:00:18	Complete	
			CHRISM	09/09/2015 06:54 AM	00:00:04	Complete	
			AWATKINS	09/08/2015 04:50 PM	00:00:04	Complete	
			AWATKINS	09/08/2015 04:45 PM	00:00:13	Complete	
			AWATKINS	09/08/2015 12:06 PM	00:00:21	Complete	

RSR Generation, New Mass Unenroll Function

Project #SEHS-16

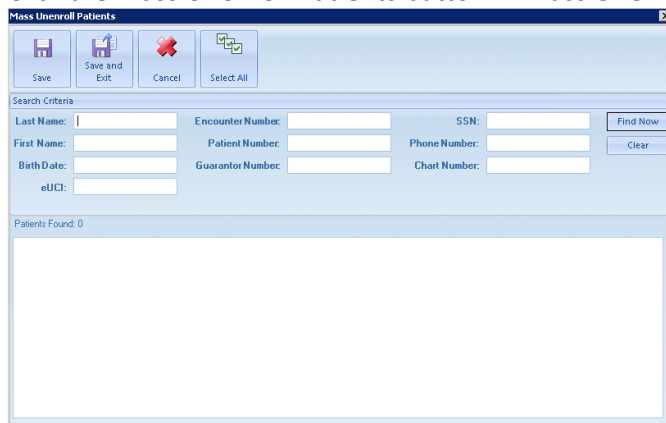
Users may un-enroll multiple patients from Ryan White reporting at once.

A **Mass Unenroll Patients** button has been added to the **RSR Generation** screen under **Clinic Configuration** in the **System Administration Console**.

The screenshot shows the 'Create RSR' form in the 'Clinic Configuration' section. The 'Mass Unenroll Patients' button is highlighted with a red box. The 'Reporting Period' is set from 1/1/2015 to 12/31/2015. The 'Status' is 'Ready'. Below the form, there is a table of 'Patients Excluded From HIV/AIDS Reporting' with columns for Patient ID, First Name, and Last Name. The table is empty. Below the table, there is a 'Current Reports' table with columns: Save, Summary, CLD, User Created, Date Created, Time Taken, Result, and Ignore Eligibility. The 'Current Reports' table contains several rows of reports.

To unenroll multiple patients:

1. Click the **Mass Unenroll Patients** button. A **Mass Unenroll Patients** window displays.



2. Search for the appropriate patient via the fields in the **Search Criteria** section.

You may search by last name, first name, DOB, eUCI number, encounter number, patient number, guarantor number, SSN, phone number, or chart number.

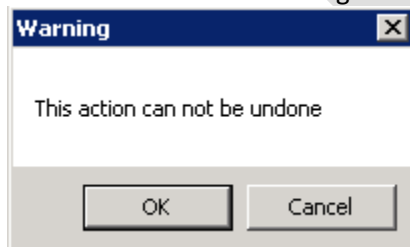
Note - The search only includes patients currently enrolled in Ryan White Reporting.

3. Click **Find Now**. The patient will display in the **Patients Found** table.



Unenroll	Patient #	First Name	Last Name	MI	DOB
<input type="checkbox"/>	42526	AARON	SMITH		01/23/1951
<input type="checkbox"/>	25396	ADA	SMITH	L	07/26/1952
<input type="checkbox"/>	58926	LEON	SMITH		12/16/2005

4. Repeat Steps 2–3 to find additional patients.
5. Select (check) the **Unenroll** checkbox for each patient you wish to unenroll. To select all patients, click the **Select All** button.
6. Click **Save** to unenroll the patients and keep the window open, or **Save and Exit** to unenroll the patients and close the window. A warning message displays.



Click **OK** to confirm the unenrollments, or **Cancel** to cancel the action.

Caution - Unenrolling patients from Ryan White reporting cannot be undone.

RSR Generation, New Eligible Scope for Ryan White Services Report

Project #SEHS-9

For the 2015 reporting year Ryan White reporting is moving from Funded Scope to Eligible Scope. To accommodate these changes, patients will now pull into the RSR when they meet the following criteria:

1. The patient is checked as **Enrolled in Ryan White Reporting** in the HIV/AIDS Reporting module.
2. The patient has a period of eligibility during the reporting period. This is recorded on the new **Eligibility** tab of the HIV/AIDS Reporting module.
3. The patient has a funded service from a mapped provider during the period of eligibility.
4. Services will only be included in the RSR when they are performed during the patient's period of eligibility. If a service is performed during the reporting period but outside the patient's period of Eligibility that service will not be included.

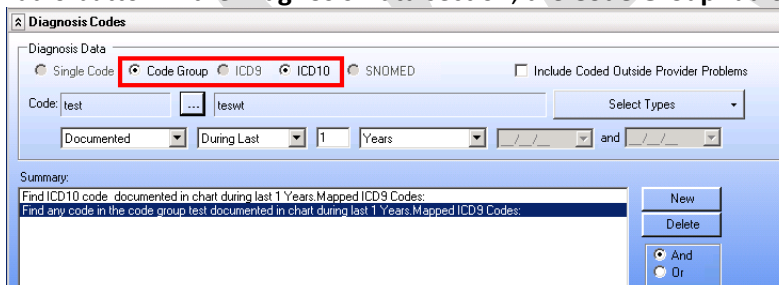
ICD10

CEM Changes for ICD10 Code Groups

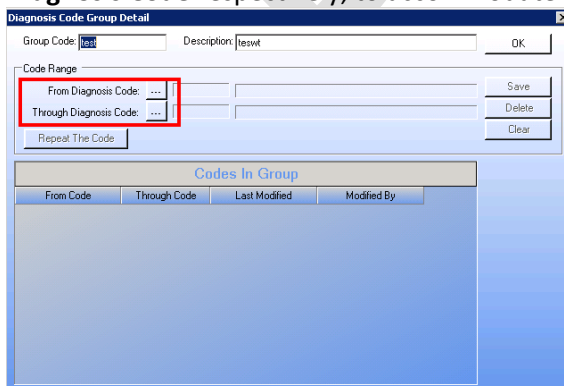
Project #SEHS-225

Changes have been made to the **Diagnosis Codes** section of the **Rule Definitions** screen in **Clinical Event Manager** to accommodate ICD10 codes.

- **Code Groups** – ICD10 codes are now included in code group searches. When the user selects the **ICD10** radio button in the **Diagnosis Data** section, the **Code Group** radio button will also be enabled.



- **Code Ranges Renamed** – The **From ICD9 Code** and **Through ICD9 Code** fields in the **Code Range** section on the **Diagnosis Code Group Detail** window have been renamed **From Diagnosis Code** and **Through Diagnosis Code** respectively, to accommodate ICD10 codes.



Changes to Auto-Mapping of ICD10 Problems

Project #SEHS-132

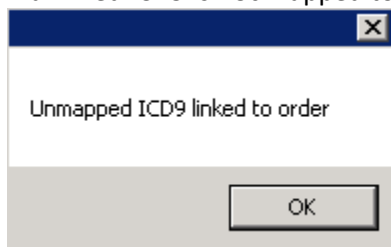
Auto-mapping ICD9 codes to their equivalents on the same billable encounter as the patient's visit will no longer prompt a duplicate prompt. If users elect to map ICD9s to their equivalent ICD10s on the same billable encounter for the visit, the duplicate check will be temporarily disabled for that given encounter.

Changes to ICD9s Linked to Deferred Orders

Project #SEHS-118

The following changes have been made when ICD9 codes that are linked to deferred orders that have been activated in databases that have gone live on ICD10:

1. If an ICD9 linked to a deferred order is mapped to an ICD10 code, the ICD10 codes will automatically be added to the superbill/encounter.
2. If a linked ICD9 is **not** mapped to an ICD10, a prompt will display to indicate the unmapped status:

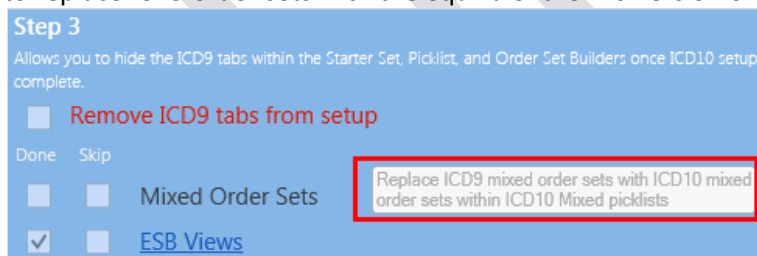


You may click **OK** to close the prompt and select the appropriate ICD10 code from the **Code Lookup** screen to add to the encounter.

ICD10 Dashboard, New Mixed Order Sets Option (Clinical Setup)

Project #SEHS-125

A **Mixed Order Sets** option has been added to Step 3 of **Clinical Setup** in the **ICD10 Dashboard** to enable users to replace ICD9 order sets with the equivalent ICD10 version of the mixed order set in Mixed picklists.



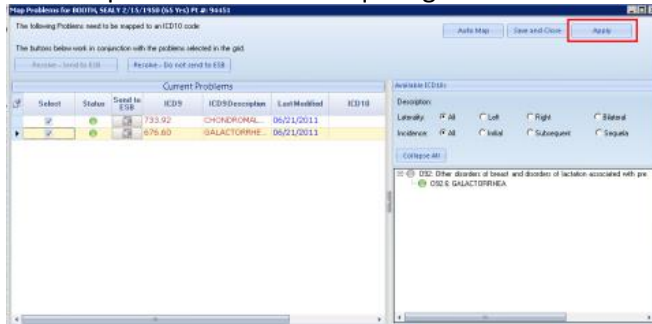
Clicking the **Replace ICD9 mixed order sets with ICD10 mixed order sets within Mixed ICD10 picklists** button will make the appropriate replacements. Once the replacements are made, the **Done** checkbox will automatically be selected (checked) under the **Mixed Order Sets** option.

If no equivalent ICD10 mixed order set exists, the ICD9 mixed order set will simply be removed and no ICD10 replacement will be made.

Map Problems, Apply Button Added

Project #SEHS-130

An **Apply** button has been added to the **Map Problems** window that enables users to map ICD9 codes to their ICD10 equivalents without requiring an encounter to be selected or when an encounter is signed off.



When the user maps a problem and clicks **Apply**, the **Resolve-Do not send to ESB** button will activate and create a new encounter, on which the user may resolve the problem.

Map Problems, Auto Map Code Field Added and Sibling Codes Expanded

Project #SEHS-234

The following changes have been made to the **Map Problems** dialog box for ICD10 mapping:

The **Map Problems** dialog box now displays not only all one-to-one auto-mapped codes from CMS, but also any sibling codes associated with the auto-mapped code. This enables users to map a non-specific code to a more specific (sibling) code within the ICD10 code listing; for example, an ICD9 code for a generic fracture could be mapped to an ICD10 code describing a specific right ankle delayed healing fracture.

To accommodate this change, an **Auto Map Code** field has been added to the **Map Problems** window that displays the ICD10 code for one-to-one mapping between ICD10 codes and their equivalent ICD9 codes. This helps easily identify which code in the tree the ICD9 would be mapped to if the auto map feature is used.



When the user selects an ICD9 code from the **Current Problems** grid to map to an ICD10 code, the **Auto Map Code** field will display the default ICD10 code that will map to the selected ICD9. Clicking the **Auto Map** button will map the default ICD10 code to the selected ICD9.

Note - Users may select a different code than the displayed Auto Map Code to map to the ICD9 code, if desired.

Note - The Auto Map Code field will be blank for ICD9 codes that have a yellow (mapping required) status or that have multiple ICD10 mapping possibilities.

Meaningful Use

Query Changes to Summary of Care Measure (Stage 2)

Project #SEHS-73

Providers designated as a referral source by enabling (checking) the **Add as Referral Source** checkbox in the **Providers** table in the **System Administration Console** will **no longer be included** in the denominator calculations for the **Stage 2 Meaningful Use Core Measure #15: Summary of Care**.

The screenshot shows the 'Provider Details' form in the System Administration Console. The 'Add as Referral Source' checkbox is highlighted with a red box. Other fields include Name and Specialty, Date of Birth, Specialty, Default Location, and Clinic Address.

Medications

Auto-Signoff for Medication Encounters

Project #SEHS-242

Medication encounters may now be signed off automatically.

An **Automatically sign off medication encounters** option has been added to the **Medication Preferences** screen in **Clinical Console User Preferences**.

The screenshot shows the 'Medication Preferences' screen in the Clinical Console User Preferences. The 'Automatically sign off Medication encounters' checkbox is highlighted with a red box. Other options include 'Read Only', 'Display the following Interactions', and 'Display Drug-Drug Interactions Severity'.

When this option is enabled (checked), encounters created when adding medications will be signed off automatically when the user leaves the Medications module or tab. This pertains to medications added/renewed both from the main Medications.NET module and the Medications tab in Chart.

Medcin.NET

Blank Result Components Hidden in Medcin Note

Project #SEHS-71

Blank result components imported into a Medcin note will be hidden from view in the note (no component lines will display).

New Medcin Description Updates for Z80–Z87 Diagnosis Codes (ICD10)

Project #SEHS-126, SEHS-127

ICD10 codes in the **Z80–Z87** range now have prefixes in addition to Medcin descriptions and prefixes (where applicable) associated to them in the **Starter Set, Picklist, and Order Set Builders in Clinic Configuration** in the **System Administration Console**.

For Medcin descriptions in the above code range, an applicable **Prefix** field or column has been added to the following places in the system:

- **System Administration Console**
 - **Edit Defaults** screens for all **Diagnoses** starter sets, picklists, and order sets; and **Mixed** picklists and order sets where ICD10 codes are present.

281.0 - FAMILY HISTORY OF INTELLECTUAL DISABILITIES

Menu

Apply Save and Exit Associate Macros Cancel Dialog Actions

Select All Using Global Defaults

Name: FAMILY HISTORY OF INTELLECTUAL DISABILITIES

Equivalent ICD10: Z81.0

Medcin Prefix: Family history of

Medcin: INTELLECTUAL DISABILITIES

- **Starter Set Builder – Diagnoses screen**

ICD10 Diagnoses

Code: Z81.0 Status: Active English: Yes

Description: FAMILY HISTORY OF INTELLECTUAL DISABILITIES

Component Name: INTELLECTUAL DISABILITIES

Code	Description	Prefix	Medcin Description	S. Code	Description
Z80.0	REPORTED FAMILY HISTORY OF CANCER		REPORTED FAMILY HISTORY OF CANCER	Z80.0	FAMILY HISTORY OF PRIMARY MALIGNANT NEOPLASIA
Z80.1	GASTRIC NEOPLASIA MALIGNANT		GASTRIC NEOPLASIA MALIGNANT	Z80.1	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF GASTRIC
Z80.2	METASTASIS TO LUNG		METASTASIS TO LUNG	Z80.2	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF METASTASIS TO LUNG
Z80.3	LARYNGEAL NEOPLASIA MALIGNANT		LARYNGEAL NEOPLASIA MALIGNANT	Z80.3	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF LARYNX
Z80.4	ESOPHAGEAL NEOPLASIA MALIGNANT		ESOPHAGEAL NEOPLASIA MALIGNANT	Z80.4	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF ESOPHAGUS
Z80.5	COLONIAL NEOPLASIA MALIGNANT		COLONIAL NEOPLASIA MALIGNANT	Z80.5	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF COLON
Z80.6	RECTAL NEOPLASIA MALIGNANT		RECTAL NEOPLASIA MALIGNANT	Z80.6	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF RECTUM
Z80.7	PROSTATE GLAND NEOPLASIA MALIGNANT		PROSTATE GLAND NEOPLASIA MALIGNANT	Z80.7	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF PROSTATE GLAND
Z80.8	TESTICULAR NEOPLASIA MALIGNANT		TESTICULAR NEOPLASIA MALIGNANT	Z80.8	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF TESTIS
Z80.9	VAGINAL NEOPLASIA MALIGNANT		VAGINAL NEOPLASIA MALIGNANT	Z80.9	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF VAGINA
Z81.0	MALIGNANT NEOPLASIA OF UTERUS		MALIGNANT NEOPLASIA OF UTERUS	Z81.0	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF UTERUS
Z81.1	RENAL NEOPLASIA - LOCATION		RENAL NEOPLASIA - LOCATION	Z81.1	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF KIDNEY
Z81.2	BLADDER NEOPLASIA MALIGNANT		BLADDER NEOPLASIA MALIGNANT	Z81.2	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF BLADDER
Z81.3	RENAL PELVIS NEOPLASIA - CALYCES		RENAL PELVIS NEOPLASIA - CALYCES	Z81.3	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF KIDNEY
Z81.4	LEUKEMIA		LEUKEMIA	Z81.4	FAMILY HISTORY OF LEUKEMIA
Z81.5	LYMPHOMA		LYMPHOMA	Z81.5	FAMILY HISTORY OF LYMPHOMA
Z81.6	SKIN NEOPLASIA MALIGNANT		SKIN NEOPLASIA MALIGNANT	Z81.6	FAMILY HISTORY OF MALIGNANT NEOPLASIA OF SKIN
Z81.7	REPORTED FAMILY HISTORY OF CANCER		REPORTED FAMILY HISTORY OF CANCER	Z81.7	FAMILY HISTORY OF MALIGNANT NEOPLASIA
Z81.8	REPORTED FAMILY HISTORY OF MENTAL AND BEHAVIORAL DISORDERS		REPORTED FAMILY HISTORY OF MENTAL AND BEHAVIORAL DISORDERS	Z81.8	FAMILY HISTORY OF MENTAL AND BEHAVIORAL DISORDERS
Z81.9	REPORTED FAMILY HISTORY OF ALCOHOL ABUSE AND DEPENDENCE		REPORTED FAMILY HISTORY OF ALCOHOL ABUSE AND DEPENDENCE	Z81.9	FAMILY HISTORY OF ALCOHOL ABUSE AND DEPENDENCE
Z82.0	REPORTED FAMILY HISTORY OF TOBACCO ABUSE AND DEPENDENCE		REPORTED FAMILY HISTORY OF TOBACCO ABUSE AND DEPENDENCE	Z82.0	FAMILY HISTORY OF TOBACCO ABUSE AND DEPENDENCE
Z82.1	REPORTED FAMILY HISTORY OF OTHER PSYCHOACTIVE SUBSTANCE ABUSE AND DEPENDENCE		REPORTED FAMILY HISTORY OF OTHER PSYCHOACTIVE SUBSTANCE ABUSE AND DEPENDENCE	Z82.1	FAMILY HISTORY OF OTHER PSYCHOACTIVE SUBSTANCE ABUSE AND DEPENDENCE
Z82.2	REPORTED FAMILY HISTORY OF SUBSTANCE ABUSE AND DEPENDENCE		REPORTED FAMILY HISTORY OF SUBSTANCE ABUSE AND DEPENDENCE	Z82.2	FAMILY HISTORY OF SUBSTANCE ABUSE AND DEPENDENCE

- **Code Selector – Advanced Add tab for Diagnoses**

Code	Prefix	Description
Z80	Family History	FAMILY HISTORY OF PRIMARY MALIGNANT NEOPLASM
Z80.0	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF DIGESTIVE ORGANS
Z80.1	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS
Z80.2	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER RESPIRATORY
Z80.3	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF BREAST
Z80.4	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF GENITAL ORGANS
Z80.41	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF OVARY
Z80.42	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF PROSTATE
Z80.43	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF TESTIS
Z80.49	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER GENITAL ORGANS
Z80.5	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF URINARY TRACT
Z80.51	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF KIDNEY
Z80.52	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF BLADDER

- **eSuperbill**

- **Code Selection (Dx Codes tab) and Visit Summary tabs**

Rank	ICD10 Parent	Parent Description	Medicine Description	Prefix	Billing Description
1	M95.5	OTHER ACQUIRED DEFORMITY OF PELVIS	ACQUIRED DEFORMITY OF PELVIS		ACQUIRED DEFORMITY OF PELVIS
2	D51.0	VITAMIN B12 DEFICIENCY	ANEMIA MACROCYTIC PERNICIOUS		VITAMIN B12 DEFICIENCY
3	Z80.0	FAMILY HISTORY OF MALIGNANT NEOPLASM OF DIGESTIVE ORGANS	GASTRIC NEOPLASM MALIGNANT	Family History	FAMILY HISTORY OF MALIGNANT NEOPLASM OF DIGESTIVE ORGANS

Rank	Billing Code	Billing Description	ICD10 Parent	Parent Description	Prefix	Medicine Description	Status
1	M95.5	ACQUIRED DEF...	M95	OTHER ACQUIR...		ACQUIRED DEFO...	Active
2	D51.0	VITAMIN B12 D...	D51	VITAMIN B12 D...		ANEMIA MACROC...	Active
3	Z80.0	FAMILY HISTOR...	Z80	FAMILY HISTOR...	Family Histor...	GASTRIC NEOPL...	Active

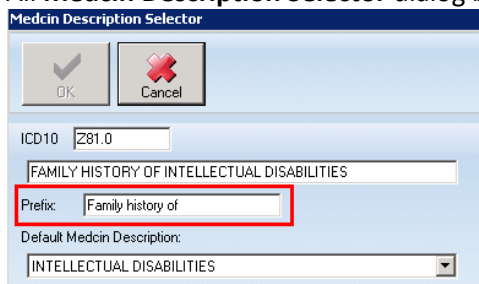
- **Import Patient Problems dialog box**

ICD9	ICD9 Description	Prefix	ICD10 Billing
765.24	27-28 COMPL...	Family Histo...	Z80.0
032.2	ANTERIOR N...		D51.0
520.4	APLASIA OF C...		M95.5
145.9	MALIGNANT...		Z80.0

- **Medcin – Import Problems-Other screen**

SB	Display In Medcin	Map	ICD10 Billing	Billing Description	ICD10 Parent	Parent Description	ICD9	ICD9 Description	Date Identified	Onset Date	Prefix	Medicine Description	Exoner
			Z85.49	PERSONAL HIST...	Z85.4	PERSONAL HIST...			08/06/2015		History of	PENILE NEOPL...	YANG
		Map	M00.161	PNEUMOCOCCAL...	M00.16	PNEUMOCOCCAL...			09/08/2014				YANG
		Map	859	PNEUMOCOCCO...	859	PNEUMOCOCCO...			09/08/2014				YANG
		Unmap	S89.80XA	OTHER SPECIF...	S89.80	OTHER SPECIF...	959.7	INJURY OF LO...	02/07/2014				YANG
		Unmap	A05.1	BOTULISM FOO...	A05	OTHER BACTERI...	005.1	BOTULISM FOO...	11/11/2013			BOTULISM DU...	HOLL
		Unmap	R63.149	VISUAL DISCOM...	R63.14	VISUAL DISCOM...	368.13	NYSTRAISM	07/29/2011				HOLL
		Unmap	R19.07	GENERALIZED I...	R19.0	INTRA-ABDOMI...	789.37	ABDOMINAL G...	07/29/2011				HOLL

- All **Medcin Description Selector** dialog boxes



The image shows a 'Medcin Description Selector' dialog box. It has an 'OK' button with a checkmark and a 'Cancel' button with a red X. Below the buttons, there is a text field for 'ICD10' containing 'Z81.0'. Underneath is a text field containing 'FAMILY HISTORY OF INTELLECTUAL DISABILITIES'. A red box highlights the 'Prefix' field, which contains 'Family history of'. Below that is a 'Default Medcin Description:' label and a dropdown menu showing 'INTELLECTUAL DISABILITIES'.

- All **Problem Detail** screens

When diagnoses in the Z80–Z87 range are added to an encounter (via ESB, Code Selector or Chart), the appropriate Medcin descriptions plus prefixes will now display in the Medcin note. If a **Prefix** column or field is present, the appropriate prefix will display in the column/field. All Medcin descriptions with prefixes will display the appropriate prefix at all times.

Server Update

Project #EHS-23517

The Medcin server updates have been completed.

Mobile EHR

ICD10 Diagnoses Display Automatically in Rounding Patients


Project #SEHS-206

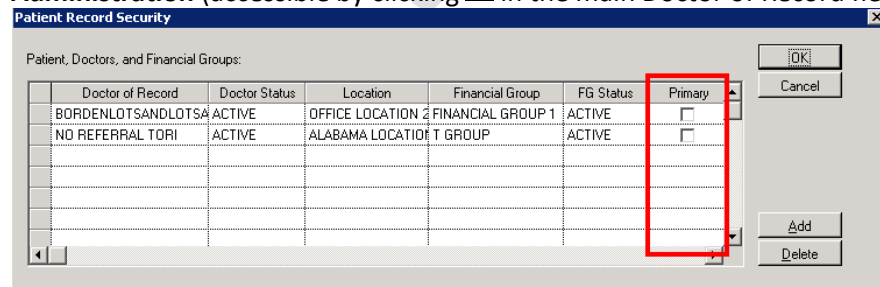
All diagnosis codes will display automatically as ICD10 codes in the **Diagnoses** section of the **Rounding Patients** screens on the SuccessEHS Mobile EHR app.

Patient Administration

Demographics Tab, New Primary Option for Doctor of Record

Project #SEHS-266

A **Primary** column has been added to the **Doctor of Record** dialog box on the **Demographics** tab in **Patient Administration** (accessible by clicking  in the main Doctor of Record field).



The image shows a 'Patient Record Security' dialog box. It has a title bar with a close button. Below the title bar is a label 'Patient, Doctors, and Financial Groups:'. There is a table with the following columns: Doctor of Record, Doctor Status, Location, Financial Group, FG Status, and Primary. The 'Primary' column has a checkbox. The first row shows 'BORDENLOTSANDLOTS' as the Doctor of Record, 'ACTIVE' as Doctor Status, 'OFFICE LOCATION 2' as Location, 'FINANCIAL GROUP 1' as Financial Group, and 'ACTIVE' as FG Status. The 'Primary' checkbox is unchecked. The second row shows 'NO REFERRAL TORI' as the Doctor of Record, 'ACTIVE' as Doctor Status, 'ALABAMA LOCATION' as Location, 'T GROUP' as Financial Group, and 'ACTIVE' as FG Status. The 'Primary' checkbox is unchecked. There are 'Add' and 'Delete' buttons at the bottom right. A red box highlights the 'Primary' column.

Doctor of Record	Doctor Status	Location	Financial Group	FG Status	Primary
BORDENLOTSANDLOTS	ACTIVE	OFFICE LOCATION 2	FINANCIAL GROUP 1	ACTIVE	<input type="checkbox"/>
NO REFERRAL TORI	ACTIVE	ALABAMA LOCATION	T GROUP	ACTIVE	<input type="checkbox"/>

Users may select (check) the **Primary** checkbox for one doctor of record.

New Email Patient Search Option

Project #SEHS-194

Users may now search for patients in **Patient Administration** by email address by entering the appropriate address in the new **Email** field on the **Find Patient** window.

Patient Correspondence

Dispense Value Added to Merge Fields

Project #SEHS-146

The full, non-abbreviated text of the **Dispense** value for medications has been added to the medication data displayed in the following merge fields in **Patient Correspondence**:

- **AddedMeds**
- **AddedMedsandAssociatedDx**
- **MedsCurrentWithSig&Notes**
- **MedsNewWithSig&Notes**

These merge fields may be used in Custom Rx Templates.

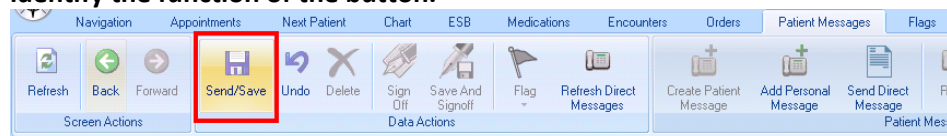
Note - The Dispense value is only spelled out when the medication is a scheduled drug.

Patient Messages

Medical Messages, Save Button Renamed to Send/Save

Project #SEHS-195

The **Save** button on the main Patient Messages menu ribbon has been renamed **Send/Save** to more clearly identify the function of the button.



Scheduling

Appointment Book Color Change

Project #EHS-23551

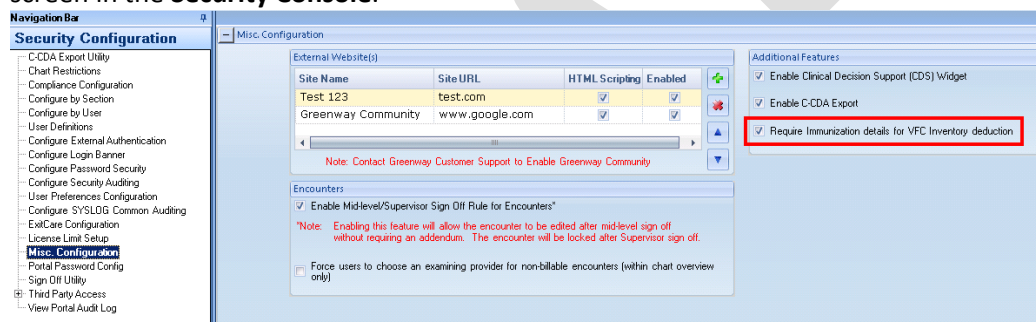
For users in a Windows 2012 server environment, the light gray color indicating that an override is required to schedule an appointment within a specific clinic hour range in the Appointment Book in Scheduling has been darkened to be more visible.

Security Console

Misc. Configuration, New Requirements for Immunization VFC Deductions

Project #SEHS-179

A **Require Immunization details for VFC Inventory deduction** option has been added to the **Misc. Configuration** screen in the **Security Console**.



When this options is enabled (checked), the following data must be entered on all Performed immunization orders:

- VFC
- Source
- Manufacturer
- Lot No
- Expiration

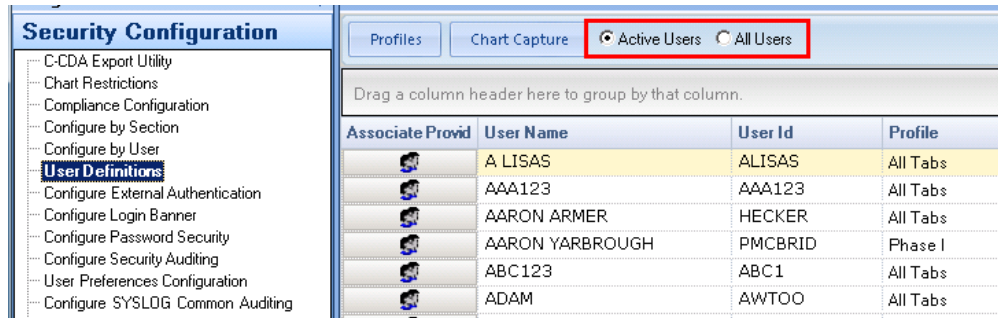
If a user attempts to save a Performed immunization without data in all of the above fields, a warning message will prompt the user that the immunization cannot be saved without data in the missing fields.

Note - This requirement does not apply to immunizations where the provider is designated as OUTSIDE PROVIDER, as these are considered Historical immunizations.

User Definitions, Active Users Filter Added

Project #SEHS-140

An **Active Users** filter has been added to the main **User Definitions** screen in the **Security Console**.



Associate	Provid	User Name	User Id	Profile
		A LISAS	ALISAS	All Tabs
		AAA123	AAA123	All Tabs
		AARON ARMER	HECKER	All Tabs
		AARON YARBROUGH	PMCBRID	Phase I
		ABC123	ABC1	All Tabs
		ADAM	AWTOO	All Tabs

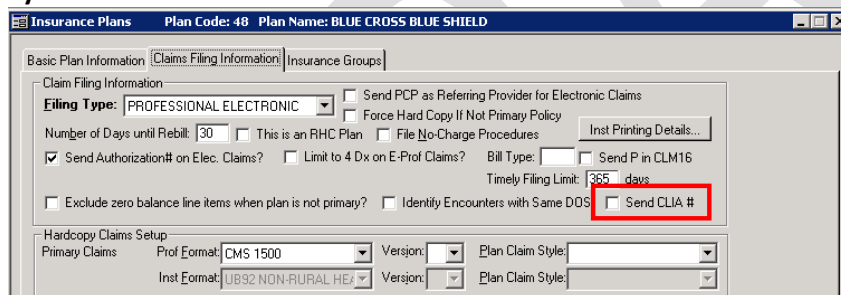
You may select the **Active Users** radio button to view only active users in the User Definitions screen, or select **All Users** to view both active and inactive users.

System Administration

Insurance Plans, New CLIA # Option

Project #SEHS-228

A **Send CLIA #** option has been added to the **Claims Filing Information** tab on the **Insurance Plans** window in **System Administration**.



Insurance Plans Plan Code: 48 Plan Name: BLUE CROSS BLUE SHIELD

Basic Plan Information | **Claims Filing Information** | Insurance Groups

Claim Filing Information

Filing Type: PROFESSIONAL ELECTRONIC ☐ Send PCP as Referring Provider for Electronic Claims
☐ Force Hard Copy If Not Primary Policy
Number of Days until Rebill: 30 ☐ This is an RHC Plan ☐ File No-Charge Procedures
☒ Send Authorization# on Elec. Claims? ☐ Limit to 4 Dx on E-Prof Claims? Bill Type: ☐ Send P in CLM16
Timely Filing Limit: 365 days
☐ Exclude zero balance line items when plan is not primary? ☐ Identify Encounters with Same DOS ☒ **Send CLIA #**

Hardcopy Claims Setup

Primary Claims Prof Format: CMS 1500 Version: Plan Claim Style:
Inst Format: UB92 NON-RURAL HE/ Version: Plan Claim Style:

When this option is enabled (checked) for an insurance plan, the CLIA ID number will be sent in all electronic claims files (5010 837) in the 2300 Loop REF02 element.

Insurance Plans, New Do Not Report in RSR Option

Project #SEHS-15, SEHS-39

A **Do Not Report in RSR** option has been added to the **Basic Plan Information** tab on the **Insurance Plans** window in **System Administration**.

The screenshot shows the 'Insurance Plans' window with the 'Basic Plan Information' tab active. The 'Plan Code' is 'AETNA-97' and the 'Plan Name' is 'AETNA'. The 'Status' is 'ACTIVE'. The 'Financial Class' is 'COMMERCIAL' and the 'Type Company' is 'COMMERCIAL INSURANCE COMPANY'. The 'Insurance Profile' is 'JPA'. The 'Policy Format' is 'Expected Copy'. The 'Web Address' is 'F-mail'. The 'Do Not Report in RSR' checkbox is highlighted with a red box.

You may enable (check) this option for an insurance plan to omit the appropriate insurance plan from being reported on the Ryan White Services Report. If this option is enabled, the insurance will be reported as **No insurance** in the RSR.

System Administration Console

Dictation Users, Template Option Added to Success Speech Dictation

Project #EHS-23545

A **Use Template** option has been added for all Success Speech users in the **Dictation User** screen under **Document Configuration** in the **System Administration Console**.

The screenshot shows the 'Dictation User' screen in the 'System Administration Console'. The 'Use Template' checkbox is highlighted with a red box. The table below shows the data for the 'Success Speech Users List'.

POC UserID	Full Name	Author ID	Work Type	E-Signature	Use Template	Review Transcriptions
CHRISM	CHRISM	49	PROGRESS NOTE	B. Darrell Roberts, MD	<input type="checkbox"/>	<input type="checkbox"/>
MANDYH	MANDY HANCOCK	47	PROGRESS NOTE		<input type="checkbox"/>	<input type="checkbox"/>
QAUSER	QAUSER	8	PROGRESS NOTE	Testing	<input type="checkbox"/>	<input type="checkbox"/>

This options is deselected (unchecked) by default. When selected for a user, the **Progress Note Generator** will launch when the user selects the **Dictation** microphone icon. If the user has a default PNG template configured, that template will automatically open; if not, the user may select from the available PNG templates.

Diagnosis Codes, Code Descriptions Editable in All Code Lookup Tables/Fields

Project #SEHS-133, SEHS-143

The **Short Description** data on the **Diagnosis Codes** screen in **Practice Configuration** in the **System Administration Console** are now the default descriptions that display in the following places:

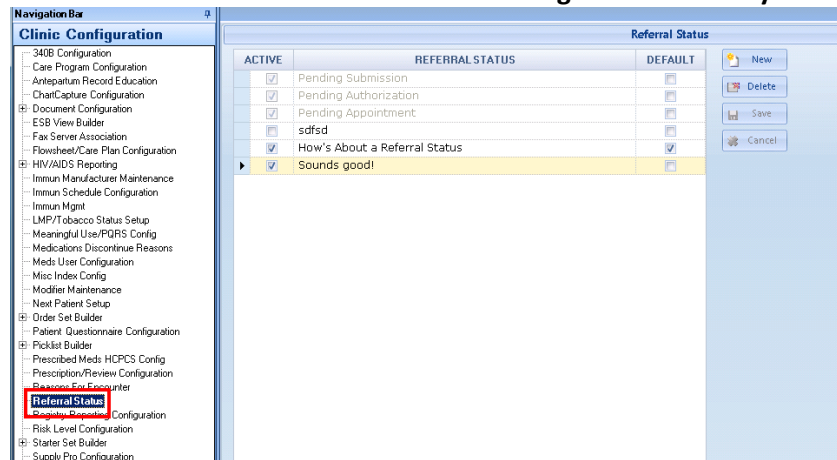
- **Dx Master List** window
- All **Problem Description** fields
- All **Billing Description** fields
- **Problem Mapping** dialog box (**Chart > Problems** tab)

Any edits made to the **Short Description** data in the **System Administration Console** will subsequently display in the above fields.

New Referral Status Functionality

Project #SEHS-54, SEHS-55, SEHS-56, SEHS-57

Users are now able to create and add custom referral statuses to Consult/Transition of Care orders via the new Referral Status screen under Clinic Configuration in the System Administration Console.

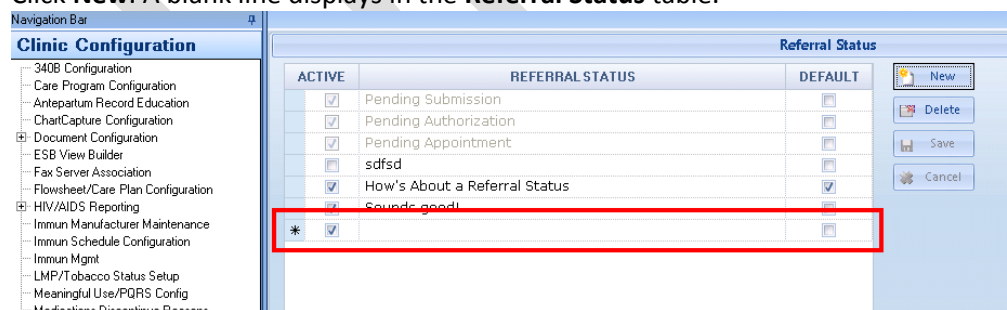


Note - Access to the Referral Status screen is defined by enabling the Referral Status option for the user in the System Administration mode of the Configure by User/ Configure by Section screens in Clinical Console Security.

Creating a Referral Status

To create a custom referral status:

1. Access the Referral Status screen in the System Administration Console.
2. Click **New**. A blank line displays in the **Referral Status** table.



Note - Three built-in statuses will display in the Referral Status table: Pending Submission, Pending Authorization, and Pending Appointment. These statuses are hard-coded and cannot be edited or deleted.

3. Select (check) the **Active** checkbox to make the referral status active.
4. Enter the appropriate name for the status in the **Referral Status** field.
5. Select (check) the **Default** checkbox to indicate the default referral status in the list.

- Click **Save** to save the new status, or **Cancel** to cancel the status creation.
- To delete a referral status, select the appropriate status record and click **Delete**. The status will be deleted from the table.

Applying Referral Statuses to Orders

For Consult/Transition of Care orders, users may select the appropriate status from the Referral Status drop-down list on the Consult/Transition of Care Details tab on the Order Detail window for all consult orders.

Consult/Transition of Care Details

Name: MASON, JIMMIE
 Specialty: OBSTETRICS AND GYNECOLOGY
 SNOMED Code: 54395008
 SNOMED Description: Patient referral for medical consultation (procedu
 Office Name: REFERRING LOCATION 120
 Street Address: 7317 2ND AVE SO.
 Address 2:
 City, State, Zip: ST JOSEPH, MO 64506
 Phone: (816) 271-1090
 Fax: (816) 271-1097
 E-mail:

Transition/Referral Reason:

Referral Status: Pending Authorization

The selected status may be viewed in the Referral Status column on the Order Tracking tab on the Orders Management screen for Consult/Transition of Care order types.

My Tasks

- Desktop for MATTIE NAYLOR
- Appointments
- My Next Patient
- Medical Messages (229)
- Personal Messages
- Flags (5)
- Delinquent Deferred Orders (7)
- Delinquent Orders Without Results
- Dictation Jobs
- Dictation Queue (55)
- Documentation Log
- Documents for Review (2)
- EHR Requests (34)
- Encounters To Sign Off (336)
- Medications (1)
- Orders Mgmt (419)
- Pending Results (398)
- Order Tracking (21)**
- Orders To Sign Off (116/7)
- Pending Documentation (308)

Order Tracking (21)

Show All Rows

Drag a column header here to group by that column.

Details	Chart	Ordered Date	Patient Name	Description	Order Type	Referral Status	Date Performed
		09/04/2015	BOSWORTH...	SUMNER, T...	Outbound C...	ssdfsdfs	
		09/04/2015	BOSWORTH...	MASON, JIM...	Outbound C...	Pending Auth...	
		01/30/2015	JONES, ALM...	X-Ray Of Hip	Radiology T...		
		01/29/2015	JONES, ALM...	X-Ray Chest	Radiology T...		
		04/22/2014	SMITH, AAR...	Aldridge, Ch...	Outbound C...		
		04/22/2014	SMITH, AAR...	Aldridge, Ch...	Outbound C...		
		08/29/2013	SMITH, ALIC...	ANKLE X-RA...	Radiology T...		
		08/29/2013	SMITH, ALIC...	ANKLE X-RA...	Radiology T...		
		06/14/2013	HORNBUCKL...	Alexander,...	Outbound C...		
		08/29/2012	BOSWORTH...	AUTOMATED...	Path/Labs		
		06/20/2012	ORLOWSKI...	Beam, Tom...	Outbound C...		
		06/20/2012	ORLOWSKI...	Mike was here	Outbound C...		

In addition, users may filter information on the Order Tracking tab by referral status by selecting the appropriate Referral Status in the drop-down menu on the Order Tracking Filter dialog box.

Order Tracking Filter

☐ Auth. Required and missing Auth. number

☐ Missing Appointment Dates

☐ Follow up is due today

☐ Follow up Date is overdue

Referral Status: [Dropdown Menu]

☐ [Dropdown Menu] before Appointment Date

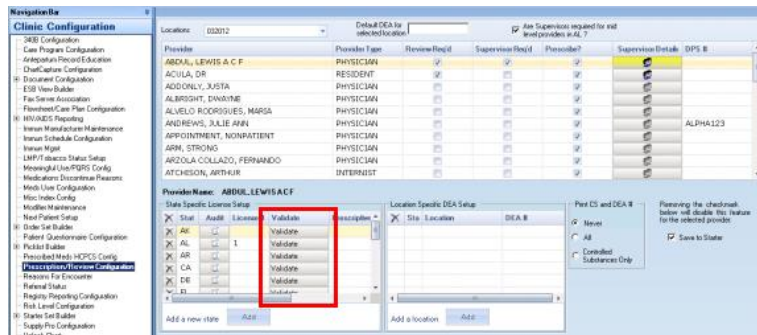
☐ [Dropdown Menu] before Follow up

OK Reset

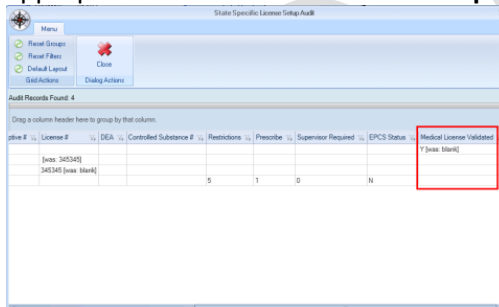
Prescription/Review Configuration, New Validate Button

Project #SEHS-41

A **Validate** button has been added to the **State Specific License Setup** table on the **Prescription/Review Configuration** screen in **Clinic Configuration** in the **System Administration Console**. This button enables administrators to indicate they have “validated” a particular provider’s medical license number and is important for future auditing in order for providers to be part of the new Identify Proofing requirements for newly added eRx providers required as of April 2016.



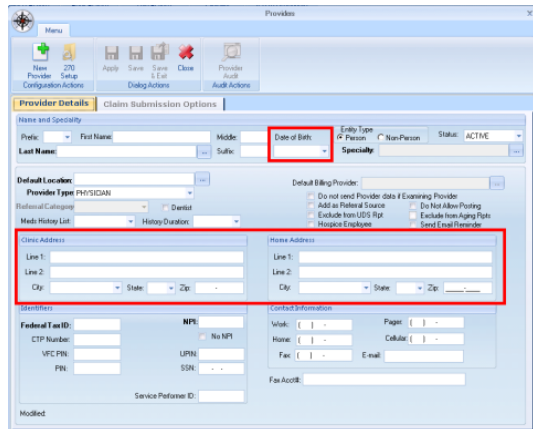
- To validate a state license, click the **Validate** button for the appropriate state row. The **Validate** button may be clicked more than once if needed.
- Validating a state license is an auditable event and will display in the **Medical License Validated** column on the **State Specific License Setup Audit** window with a **Y (Yes)** indicator. To view this window, click the appropriate Audit button in the **State Specific License Setup** table.



Provider Table Additions

Project #SEHS-21, SEHS-69

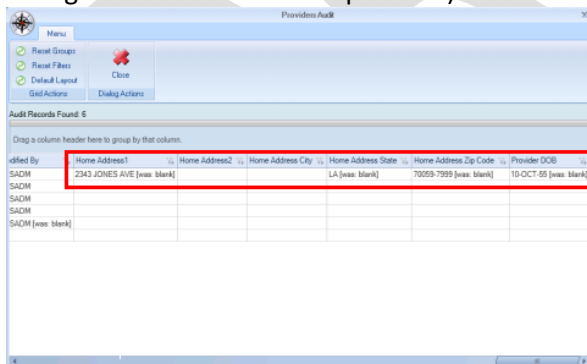
The following changes have been made to the **Providers** table in **Practice Configuration** in the **System Administration Console** to meet upcoming eRx requirements that require a provider to complete Identity Proofing for any provider that signs up for eRx services beginning in April 2016.



- A **Date of Birth** field has been added in the **Name and Specialty** section. Users may enter the provider's date of birth in mm/dd/yyyy format or select the appropriate date from the drop-down calendar.
- The **Address** section has been renamed **Clinic Address**. A new **Home Address** section has been added to enter the provider's home address.

Note - Both the Date of Birth and Home Address information are required to use eRx services.

- All of the above fields are auditable and will display on the **Providers Audit** window (accessible via the **Providers Audit** icon on the **Practice** menu ribbon on the main screen or the menu ribbon on the **Edit** dialog box for the individual provider).



Home Address1	Home Address2	Home Address City	Home Address State	Home Address Zip Code	Provider DOB
2343 JONES AVE [view blank]		LA [view blank]	76059-7699 [view blank]	10-OCT-69 [view blank]	
SADM					
SADM					
SADM					
SADM [view blank]					

Starter Set Builder, Enter Key Performs Search

Project #SEHS-184

For all search fields in the **Starter Set Builder**, pressing the **Enter** key on your keyboard after entering search criteria will initiate the search function in addition to clicking the **Perform Search** button on the menu ribbon.

Starter Set Builder, Modifiers Added to Immunizations

Project #SEHS-67

A **Modifiers** section has been added to all **Edit** screens for Immunization order types in the **Starter Set Builder**.

The screenshot shows the 'Edit HEP B/TRAVEL CLINIC (HEP)' dialog box. The 'Modifiers' section is highlighted with a red box. It contains a list of modifiers: Modifier 1, Modifier 2, Modifier 3, and Modifier 4. Below the list is a text area for 'ABN Required Handling Instructions'.

Users may select one or more modifiers for an Immunization order via the drop-down lists in the **Modifiers** section. Up to four modifiers may be selected.

Modifiers will display in the Medcin note for an Immunization order in parentheses directly after the order.

- [An automated urinalysis with microscopic exam \[\(Medical Reason; Significant, Separately Identifiable Evaluation and Management Service by the Same Physician on the Same Day of the Procedure or Other Service; Unrelated Evaluation and Management Service by the Same Physician During a Postoperative Period\)\]](#)
- [DTaP vaccine](#)

Greenway Community – New Care Programs Functionality

A new Care Programs functionality has been added to the SuccessEHS system with this software release in preparation for the new Greenway Community system. Greenway Community users may set up and assign care programs to individual patients via this functionality.

Configuring Care Programs

A Care Program Configuration screen has been added under Clinic Configuration in the System Administration Console to enable users to create specific care programs (similar to the functionality on the 340B Configuration screen).

The screenshot shows the 'Care Program Configuration' screen. On the left is a sidebar with 'Clinic Configuration' and '340B Configuration'. The 'Care Program Configuration' section is highlighted. The main area displays a table of care programs:

Care Program Description	Care Program ID	Active
CP 3	61	<input checked="" type="checkbox"/>
CP 4	62	<input checked="" type="checkbox"/>
Care Program 1	41	<input checked="" type="checkbox"/>
Care Program 3	42	<input checked="" type="checkbox"/>
Test Updated	83	<input type="checkbox"/>
cari test #2 :)	2	<input checked="" type="checkbox"/>
cari's care program test	1	<input type="checkbox"/>
testing 123	82	<input checked="" type="checkbox"/>

On the right side of the table are buttons for 'New', 'Save', and 'Cancel'.

To create a care program:

1. Select Care Program Configuration under **Clinic Configuration** in the **System Administration Console**. The **Care Program Configuration** screen displays with a list of all current care programs.
2. Click **New**. A blank record row displays with a system-generated Care Program ID.

Care Program Description	Care Program ID	Active
CP 3	61	<input checked="" type="checkbox"/>
CP 4	62	<input checked="" type="checkbox"/>
Care Program 1	41	<input checked="" type="checkbox"/>
Care Program 3	42	<input checked="" type="checkbox"/>
Test Updated	83	<input type="checkbox"/>
can test #2 :)	2	<input checked="" type="checkbox"/>
can's care program test	1	<input type="checkbox"/>
testing 123	82	<input checked="" type="checkbox"/>
	121	<input type="checkbox"/>

3. Enter the appropriate Care Program Description.
4. Select (check) the **Active** checkbox to activate the care program.
5. Click **Save** to save your changes.

Linking Care Programs to Patients

Care programs are linked to patients via the Care Programs button on the Demographics tab in Patient Administration.

Patient Administration for WALIA, ELIZABETH (Patient Number: 100)

Demographics | Insurance | Additional Patient Data | Related Accounts | Contacts/Communications | Notes

Account Status: NONE EXIST

Patient Number: 100 SSN: 421-38-2717 Chart#: 3243 Patient Status: NO STATUSES

Prefix: First: ELIZABETH Middle: C Home Phone: (000)841-6160 Work: (000)123-4567 Ext: Cell: Fax:

Last: WALIA Suffix: Doctor of Record: MULTIPLE EXIST Financial Group: FINANCIAL GROUP 1

Nickname: Gender: F Sex: F Incomplete Demographics: ☒ EMP Exists ☐ DMHAS Patient? Portal Setup: Care Programs: ☒

Birth Date: 08/11/1951 Age: 64 Yrs

Patient Mailing Address: Line 1: 6430 RANSOM ROAD Line 2: City: HOOVER State: AL Zip: 35216 Country: USA

City: HOOVER State: AL Zip: 35216 Country: USA

Email: Direct Address: Patient's Relationship to Guarantor: OTHER

Default Guarantor for Encounters: Prefix: First Name: SEATRICE Middle: J SSN: 426-90-4572 Gender: F Birth Date: 04/22/1948

Last Name: WALDEN Suffix: Is a Company/Employer? Home: (000)690-9227 Work: Cell: Fax: Employer:

Guarantor Address: Line 1: 1821 SPRINGFIELD STREET Line 2: City: NEW ORLEANS State: LA Zip: 70121 Country: USA

City: NEW ORLEANS State: LA Zip: 70121 Country: USA

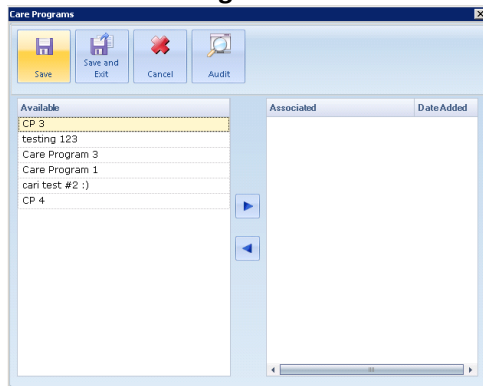
Email: Statement Template: Default (English) Print Hardcopy Statement Only

Accot Status: HH Assessment Run CEM

Demographics Last Modified: 07/17/2013 By: TM Modified From Portal: Apply Save Clear Close

To link a care program:

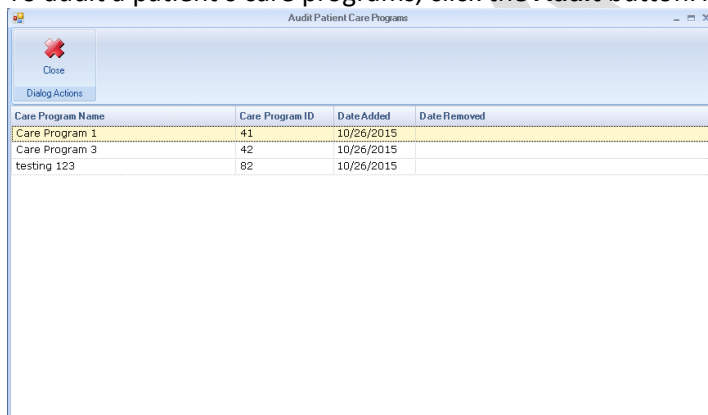
1. Click the **Care Programs** button. A **Care Programs** window displays.



2. Select the appropriate care program(s) in the **Available** column and click  to move it to the **Associated** column.

To remove a care program, select the item in the **Associated** column and click  to return it to the **Available Data** column.

3. Click **Save** to save your changes and keep the window open, or **Save and Exit** to save your changes and close the window.
4. To audit a patient's care programs, click the **Audit** button. A **Care Programs Audit** window displays.



The following information is available for viewing:

- **Care Program Name** – Displays the name of the care program.
- **Care Program ID** – Displays the system-generated ID number of the care program.
- **Date Added** – Displays the date the care program was added to the patient's record.
- **Date Removed** – Displays the date the care program was removed from the patient's record, if applicable.

Viewing Care Programs in Chart

A **Care Programs** section option has been added to the **Facesheet** in **Chart** that displays a read-only list of all active care programs assigned to a patient.

The screenshot displays a patient's medical chart. On the left, a list of medical history items is shown with dates. Below this is a 'Medication List' section. On the right, the 'Patient Goals/Instructions' section is visible. The 'Care Programs' section is highlighted with a red box and contains a list of active care programs. Below this is the 'Consult History' section, which is a table listing consultations with dates, descriptions, follow-up dates, and statuses. A 'Facesheet' button is located on the right side of the chart area.

Date	Description	F/U On	Status
9/3/2015	WASHINGTON, GEORGE		ORDERED
9/3/2015	PRESLEY, ELVIS		ORDERED
9/3/2015	BOWIE, DAVID		ORDERED
6/24/2015	ALTMAN, JESSIE		ORDERED
6/24/2015	MCCOY, CASE		ORDERED