
SuccessEHS Release Notes 7.20

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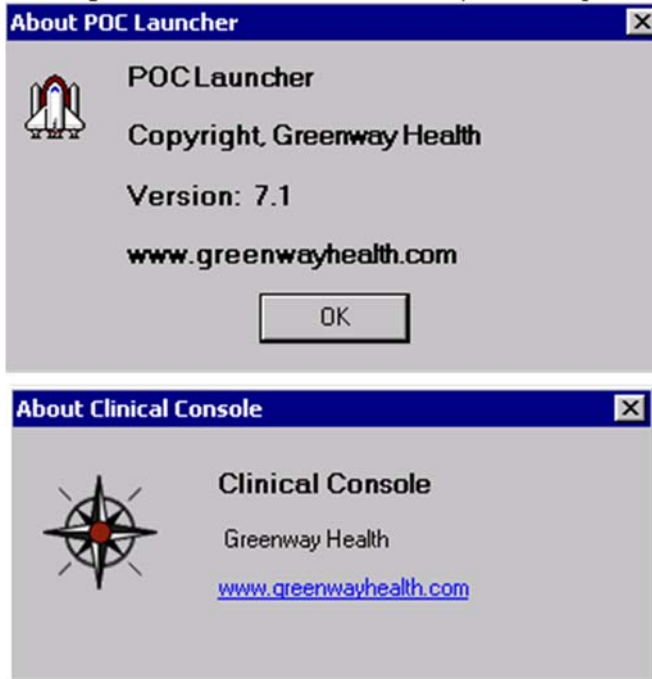
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All Modules

"About" Information for POC Launcher/Clinical Console Updated for Greenway

Project #EHS-20258

The information in the **About POC Launcher** and **About Clinical Console** dialog boxes has been updated to reflect the Greenway branding.



Changes for Inactive/Deceased Patients

Project #EHS-19759, EHS-19792,
EHS-19793, EHS-19794, EHS-19795,
EHS-19796

Changes have been made to better record and reflect the status of inactive and deceased patients in the system.

Patient Administration

- **Inactive label** – An **Inactive** checkbox has been added to the **Demographics** tab.

The screenshot shows the 'Patient Administration' window for 'WALIA, ELIZABETH (Patient Number: 100)'. The 'Demographics' tab is active. The form contains fields for Patient Number, SSN, Chart#, Patient Status, Prefix, First Name, Middle, Last Name, Suffix, Doctor of Record, Financial Group, Privacy/Consent, Birth Date, Age, Sex, Incomplete Demographics, EHR Entry, DMHAS Patient?, Patient Mailing Address (Line 1, Line 2, City, State, Zip, Country), Alternate, Test Patient, Patient's Relationship to Guarantor, Default Guarantor for Encounters (First Name, Middle, Last Name, Suffix, Is a Company/Employer?), Guarantor Address (Line 1, Line 2, City, State, Zip, Country), Guarantor Number, Birth Date, SSN, Gender, Home, Work, Cell, Fax, Employer, Print Hardcopy Statement Only, Statement Template, Acct Status, HH Assessment, Run CEM, Demographics Last Modified, By, Modified From Portal, Apply, Save, Clear, and Close buttons. A red box highlights the 'Inactive' checkbox, which is currently unchecked.

Selecting (checking) the **Inactive** checkbox will display a **PATIENT IS INACTIVE** label, along with the date the patient was marked inactive and the user ID of the person who marked the patient inactive.

The screenshot shows a label with the text 'PATIENT IS INACTIVE'. Below this text is a checked checkbox labeled 'Inactive', followed by the date '11/13/2014' and the user ID 'by SYSADM'.

The **PATIENT IS INACTIVE** label will also display in the following places in the system:

- **Charge Entry** > View > Patient Demographics
- **Check In** > Edit > Patient Demographics
- **Receivables** > Apply Insurance Payments/Adjustments > View > Patient Demographics
- **Scheduling** > Patient Appointment dialog > Patient Details button > Demographics
- **Rounds** > Open Rounding list > Details button
- **Chart Overview** > Patient Data > Demographics tab
- **Inquiry** > View > Demographics
- **Find Patient** dialog box
- **Deceased label** – A **DECEASED** label will display in **red text** when the user enters a **Date of Death** on the **Additional Patient Data** tab in **Patient Administration**, **Check In**, or **Charge Entry**.

The **DECEASED** label will display even if the **Inactive** checkbox is selected (as deceased status overrides inactive status). The **DECEASED** label will display in the same places in the system as the **INACTIVE** label (listed above).

Check In/Charge Entry

- **Warnings** – A warning dialog box will display in **Check In** and **Charge Entry** if a user attempts to access an inactive or deceased patient.

Users may click **Yes** to create a new visit for the patient, or **No** to return to the **Find Patient** dialog box and select a new patient.

- For unposted visits in **Charge Entry**, the system will compare the Date of Service (DOS) with the Date of Death (DOD) or Inactive Date (ID) for deceased and inactive patients respectively. If the DOS is before the DOD or ID, the user will be able to apply/save changes to the patient record. If the DOS is **after** the DOD/ID, the appropriate warning will display again;

users may click **Yes** to save the data entered, or **No** to return to the **Charges** tab and make any necessary changes.

Clinical Event Manager

- **CEM exclusions** – Inactive and deceased patients will be excluded from all rule generations in the **Clinical Event Manager**.

Scheduling

- **Scheduling block** – Inactive and deceased patients will be prohibited from having appointments scheduled for them via the **Scheduling** module.

Problems Now Import in Order Selected

Project #EHS-19593

When importing problems into the superbill via the **Import Pt Problems** dialog box or into **Medcin.NET** from the **Problems** tab on the **Import Data** window, the problems will now import in the order in which they are **selected**, **not** the order in which they are displayed on screen. This will hold regardless of from where the problems are imported.

RSR Report Changes 2014

Project #EHS-18429

The following changes have been made in the system to accommodate the updates to the Ryan White Services Report for 2014.

Patient Administration

1. The following additions have been made to the **Ethnicity** drop-down list on the **Additional Patient Data** tab:

- **Mexican, Mexican American, Chicano/a**
- **Puerto Rican**
- **Cuban**
- **Another Hispanic, Latino/a or Spanish Origin**

The above ethnicities map to **Hispanic/Latino** for UDS reporting.

2. **Other Asian** has been added to the **Race** field (this maps to **Asian** for UDS reporting). This includes the RHIN mappings of Asian, Iwo Jiman, Laotian, Malaysian, Maldivian, Nepalese, Okinawan, Pakistani, Singaporean, Sri Lankan, and Thai.

These race/ethnicity updates have also been added to the **Patient Portal**.

HIV/AIDS Reporting

The following changes have been made on the **HIV/AIDS Reporting Data Review** screen in Clinical Console:

1. **Demographics tab** – A **Sex** field has been added to the **Gender and Transgender** section that displays the patient's sex as recorded in **Patient Administration**.

HIV/AIDS Reporting Data

Funding Sources | **Demographics** | Services | Screenings | TB | Antepartum Info | Misc

Demographic Information

Date of Birth: 1/23/1951 Date of Death:

* Mother's Maiden Name:

Ethnicity: HISPANIC/LATINO

Race

☐ White ☒ Native Hawaiian/Pacific Islander

☐ Black or African American ☐ American Indian/Alaska Native

☐ Asian ☐ Unknown

Gender and Transgender

Sex: Male to Female Gender: Transgender Transgender: Male to Female

Additional Data

Enrollment/Vital Status: Unknown

First Service Date: 9/1/2009

* # of HIV people in Household:

Eligibility Documents

* Proof of Income: * Date Obtained: * Expiration Date:

* Proof of Residence: * Date Obtained: * Expiration Date:

* Patient ID: * Date Obtained: * Expiration Date:

* ARIES Consent Form: * Date Obtained: * Expiration Date:

* HIV Letter of Diagnosis: * Date Obtained: * Expiration Date:

Living Situation

Housing Status: Residential

* Current Living Situation: Unknown

* Current Living Situation Date:

2. **Misc tab** – A **First OAMC Date after pos result** field has been added to the **HIV/AIDS Status** section that allows users to document the first OAMC date for the patient after a positive result is diagnosed.

HIV/AIDS Reporting Data

Funding Sources | Demographics | Services | Screenings | TB | Antepartum Info | **Misc**

HIV / AIDS Status

HIV / AIDS Status: Unknown

* CDC Disease Stage:

* CDC Disease Stage Source:

HIV Diagnosis Date:

First HIV+ Test Date:

First OAMC Date after pos result:

* HIV Pre-Test Counseling:

* HIV Post-Test Counseling:

CDC Defined AIDS Diagnosis Date:

* AIDS Diagnosis County:

* AIDS Diagnosis State:

* AIDS Diagnosis Source:

Miscellaneous

Mental Health Screening:

* Mental Health Screening Tool Name:

* Mental Health Screening Tool Given On:

Screened for Substance Abuse:

* SA Screening Tool Name:

* SA Screening Tool Given On:

Risk Screening Provided: Unknown

* Agency Status:

* Status As of Date:

HIV Risk Factors

Check all that apply.

☐ Male who has sex with male(s) (MSM) ☐ Heterosexual contact ☐ Worked in Healthcare or Clinical Lab setting

☐ Injecting drug use (IDU) ☐ Sex with Male ☐ Sexual Abuse (pediatric only)

☐ Hemophilia / coagulation disorder ☐ Sex with Female ☐ Other

☐ Receipt of transfusion of blood, blood components, or tissue ☐ Perinatal transmission ☒ Unknown

Report Changes

For details of specific changes within the RSR report, please visit the following website:

https://careacttarget.org/sites/default/files/file-upload/resources/2014%20RSR%20Client%20Level%20Data%20Elements%20FINAL%2011_14.pdf

Alpha II

Alpha II Update Q4 2014

Project #EHS-19932

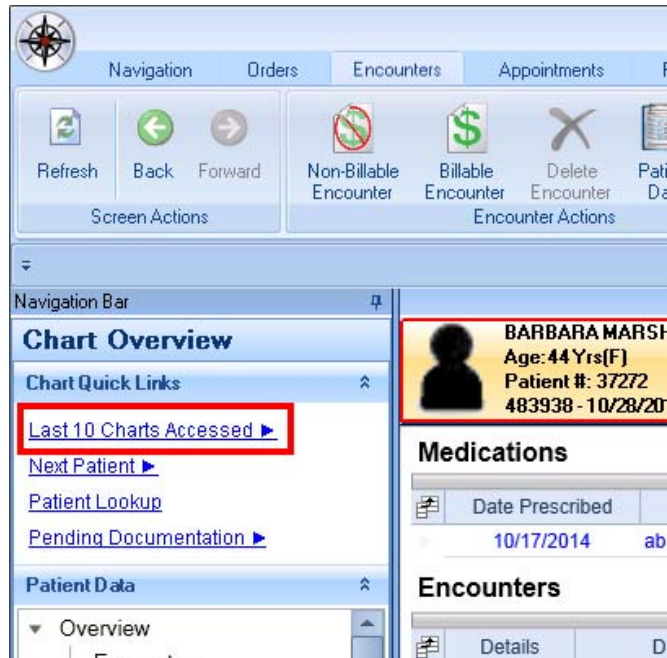
The Alpha II updates for Q4 2014 have been completed.

Chart Overview

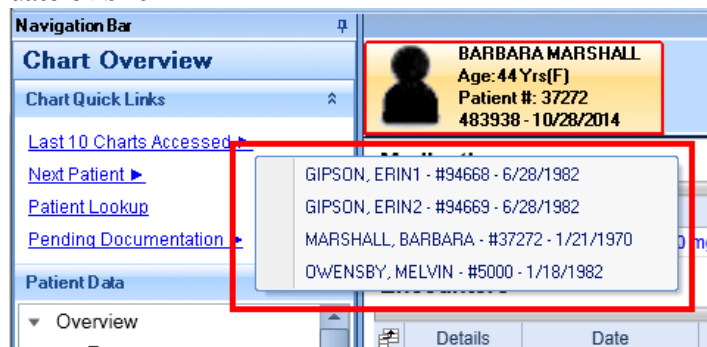
New Last 10 Charts Accessed Quick Link

Project #EHS-19760

A **Last 10 Charts Accessed** quick link has been added to the **Chart Quick Links** list in the main **Chart Overview** mode.



Clicking this link will display a pop-up listing up to the last ten charts accessed by the user in **Chart Overview**. The pop up menu will include the patient's name, patient number, and their date of birth.



Accessing a chart from the pop-up will open the patient's chart. The last ten patient charts will display in **the order they are first selected in the pop-up list**. Once a chart is selected, it will be cycled out of the list after 10 separate charts are accessed; i.e., if Chart #1 is selected, it will cycle out of the "last 10" list once Chart #11 is accessed, even if Chart #1 is re-accessed before the eleventh chart slot is filled.

Clinical Console

Clinical Console Report Changes

Project #EHS-19650, EHS-19639,
EHS-19640, EHS-19641, EHS-19617,
EHS-19659, EHS-19673, EHS-19686

The following changes have been made to reports in Clinical Console.

Default Selections for Reports

- If a reports category in the **Process Reports** screen contains only one report, the report name will automatically populate in the **Select Report** field.

The screenshot shows the 'Report Selection' dialog box. The 'Select Category' dropdown is set to 'Historical Reports'. The 'Select Report' dropdown is set to 'Problem History', which is highlighted with a red rectangle. Below this, the 'Find Data That Match These Criteria' section has 'Show Data Where The' dropdown set to 'Does This'. The 'Does This' section has two radio buttons: 'Is' and 'Is Not'. The 'From' date is '10/28/2014' and the 'To' date is '10/28/2014'. There are buttons for 'And', 'Clear', and 'Delete Criterion'. On the right side, there are buttons for 'Preview', 'Print', 'Fax', 'Cancel', 'Cover Page', and 'Printer Setup'. At the bottom, there is a 'Sort By' section with a table for 'Sort Field' and 'Order', and buttons for 'Add Sort -->', '<-- Delete Sort', 'Ascending', and 'Descending'. There are also 'Move Up' and 'Move Down' buttons.

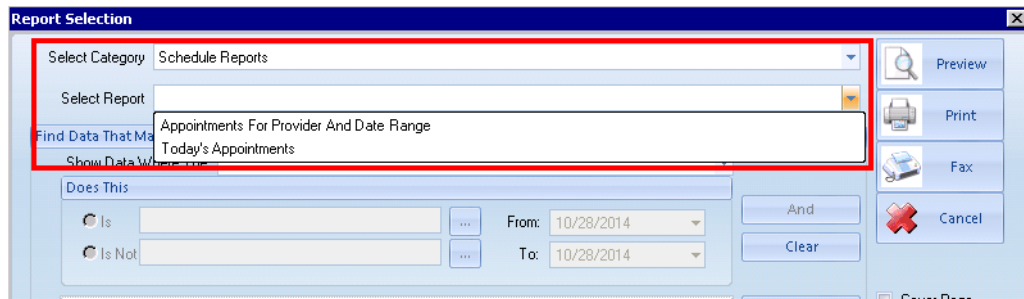
- If a report has only one search criteria connected to the report, the criteria will automatically populate in the **Show Data Where The** field.

The screenshot shows the 'Report Selection' dialog box. The 'Select Category' dropdown is set to 'Message Reports'. The 'Select Report' dropdown is set to 'All Messages For Selected Encounter'. Below this, the 'Find Data That Match These Criteria' section has 'Show Data Where The' dropdown set to 'encounter number', which is highlighted with a red rectangle. The 'Does This' section has two radio buttons: 'Is' and 'Is Not'. The 'From' date is '10/28/2014' and the 'To' date is '10/28/2014'. There are buttons for 'And', 'Clear', and 'Delete Criterion'. On the right side, there are buttons for 'Preview', 'Print', 'Fax', 'Cancel', 'Cover Page', and 'Printer Setup'. At the bottom, there is a 'Sort By' section with a table for 'Sort Field' and 'Order', and buttons for 'Add Sort -->', '<-- Delete Sort', 'Ascending', and 'Descending'. There are also 'Move Up' and 'Move Down' buttons.

New Report Categories/Reports

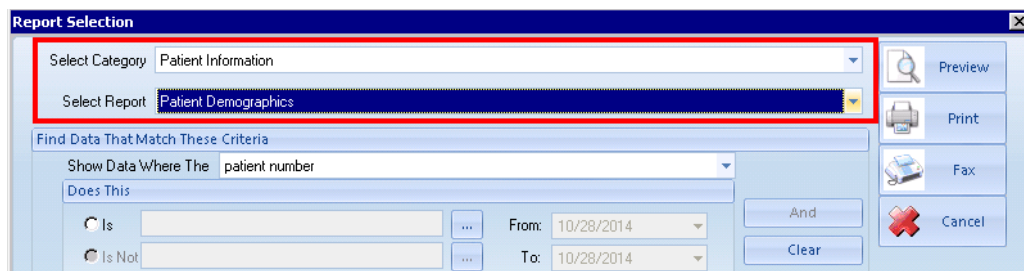
The following new reports categories/reports have been added to Clinical Console.

- **Schedule Reports** – The following reports have been migrated from classic **Chart** to the (new) **Schedule Reports** category:
 - **Appointments for Provider and Date Range**
 - **Today's Appointments**



No criteria or functions have changed in the migration.

- **Patient Information** – The following report has been migrated from classic **Chart** to the (new) **Patient Information** category:
 - **Patient Demographics**



No criteria or functions have changed in the migration.

- **Flag Reports** – The **Flag Reports** category includes the following:
 - **New Reports**
 - **Flag Report By Selected Patient** – Replaces the **All Flags For Selected Patient** and **Active Flags For Selected Patient** reports in classic **Chart**.
 - **Flags Per Provider** – Replaces the **All Provider Flags** and **All Active Provider Flags** in classic **Chart**.
 - **Flags For Selected Encounter** – Replaces the **Flags By Encounter** report in classic **Chart**.

- **Include Released Flags** – An **Include Released Flags** checkbox has been added to the **Find Data That Match These Criteria** section for the **Active Flags by Provider**, **Flags for Selected Encounter**, and **Flags for Selected Patient** reports. When selected (checked), released flags will be included in the appropriate report pull.
- **Order Reports** – The following report has been migrated from the **Patient Alerts** tab in classic **Chart** to the **Order Reports** category:
 - **Deferred Orders for Selected Patient**

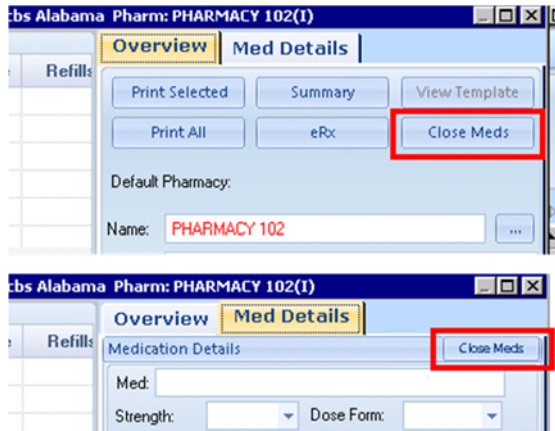
No criteria or functions have changed in the migration.

Medications.NET

Add Medications, New Close Meds Button

Project #EHS-19754

A **Close Meds** button has been added to the **Overview** and **Med Details** tabs on the **Add Meds** screen in **Medications.NET**.

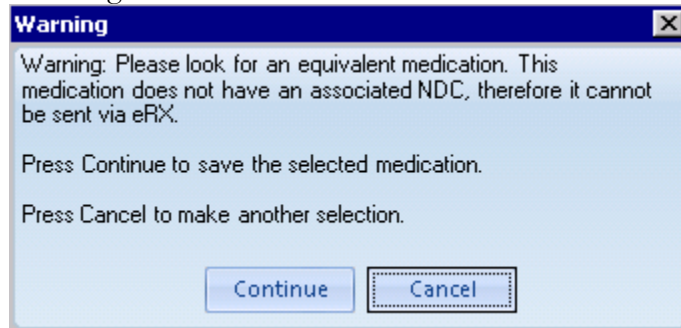


Clicking this button from either tab will exit out of **Medications.NET** completely.

Change in NDC Prompt Warning

Project #BHML3-303

The text in the **Warning** prompt on the **Add Medications** window when prescribing or renewing a medication without an NDC number has changed to the following:



"Warning: Please look for an equivalent medication. This medication does not have an associated NDC, therefore it cannot be sent via eRx."

FDB Update October 2014

Project #EHS-19901

The FDB update for October 2014 has been completed.

Pharmacy Information Displays in Header Bar

Project #EHS-19749

Pharmacy information for a patient will now display in a **Pharm:** section in the blue header bar on both the **Med Summary** and **Add Meds** screens in **Medications.NET**.

Med Summary for AARONSON, AARON A. Pt #: 94374 DOB: 6/23/1974 (40 Yrs) Weight: 275.32lbs (124.90kg) Ins: Bcbs Alabama Pharm: PHARMACY 102(I)

Buttons: Prescribe Meds, Current Meds, Discontinue, Pharmacy, Interactions, eRx, Print Selected, Sign Off, PBM/CDA Hx, Print Med Report

Meds Reconciled: SYSADM 05/15/2014 01:28 PM

Meds Reconciled Not Performed

Add Meds for AARONSON, AARON A. Pt #: 94374 DOB: 6/23/1974 (40 Yrs) Weight: 275.32lbs (124.90kg) Ins: Bcbs Alabama Pharm: PHARMACY 102(I)

Selected Medications:

<input checked="" type="checkbox"/>	S	Data	Dru	Link	Name	Sig	Dispense	Refills
<input type="checkbox"/>								
<input type="checkbox"/>								
<input type="checkbox"/>								

Overview | Med Details

Buttons: Print Selected, Summary, Print All, eRx

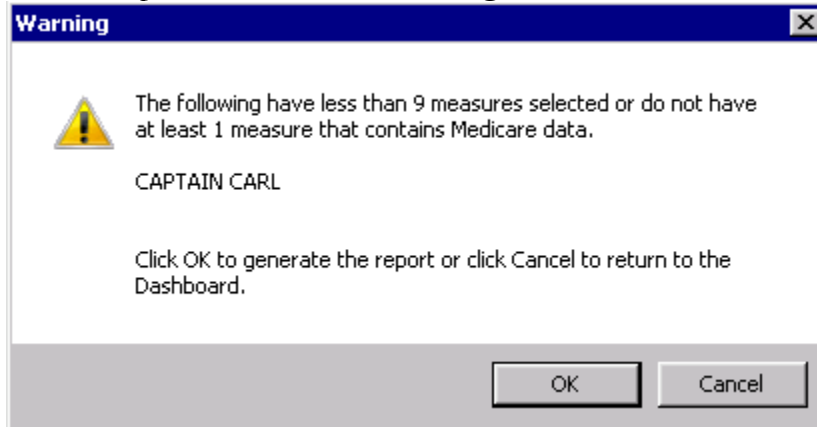
An **(I)** designation after the pharmacy name indicates that the pharmacy is inactive in the system.

Meaningful Use/PQRS/CQM

CQM, Changes to QRDA Wording for Measure Submission

Project #EHS-19866

Changes have been made to the wording on the **Warning** dialog box for users generating CQM measure reports on the **Incentive Programs** window.



Previously, if a planned report had fewer than nine measures selected or no measures with Medicare data, the report would not generate. In this current release, users will be able to generate the CQM report with fewer than nine measures or without Medicare data by clicking **OK** on the **Warning** dialog box.

Patient Administration

Demographics Tab, Privacy/Consent Changes

Project #EHS-19758

Changes have been made to the privacy/consent settings on the **Demographics** tab in **Patient Administration** that enable users to more easily discern the privacy/consent status of patients.

Color-Coding: Color-coding has been added to the **Privacy/Consent** button as follows:

- **Green highlights** – Both the HIPAA privacy statement and the consent form have been documented as active and are not expired on the **Privacy/Consent Information** screen.

This screenshot shows the 'Patient Administration' window for JEMISON, RANDY (Patient Number: 111). The 'Demographics' tab is active. The 'Privacy/Consent' button is highlighted in green, indicating that both the HIPAA privacy statement and the consent form are active and not expired.

- **Yellow highlights** – One or the other (privacy policy or consent form) has expired for the patient.

This screenshot shows the 'Patient Administration' window for FERGUSON, GLADYS (Patient Number: 1295). The 'Demographics' tab is active. The 'Privacy/Consent' button is highlighted in yellow, indicating that either the privacy policy or the consent form has expired.

- **Red highlights** – Neither the privacy policy nor the consent form are currently documented as active (i.e., neither has been documented, or both have expired).

This screenshot shows the 'Patient Administration' window for PARSON, CHARLOTTE (Patient Number: 100). The 'Demographics' tab is active. The 'Privacy/Consent' button is highlighted in red, indicating that neither the privacy policy nor the consent form is currently documented as active.

Order/Immunization Detail Icon: A **Privacy/Consent Info** button has been added to the menu ribbon in all **Order Detail** and **Immunization Detail** screens in **Clinical Console** to display the privacy/consent status for the patient.

This screenshot shows the 'Order Detail' screen in the Clinical Console. The 'Privacy/Consent Info' icon is highlighted in the ribbon, indicating its availability for use.

The **Privacy/Consent Info** icon displayed as follows based on the patient's status:

- If both privacy and consent documented and are not expired, a checkmark icon displays:



- If both privacy and consent are documented and one or both are expired, **OR** neither

privacy nor consent are documented, an X/exclamation point icon displays:



- Clicking the **Privacy/Consent Info** button will launch the main **Privacy/Consent Information** screen from **Patient Administration**, where the user may make any needed updates.

Prompt for Expired/Missing Information: If the system is set up to enforce privacy/consent configuration (via the **Privacy/Consent Configuration** screen in the **System Administration Console**), an **Expired or Missing Privacy/Consent Information** prompt will display in **Patient Administration** and **Charge Entry** if the user saves changes to a patient record that has missing and/or expired privacy/consent information.



System Administration

Accounting Periods, Financial Groups Removed from Report

Project #EHS-19905

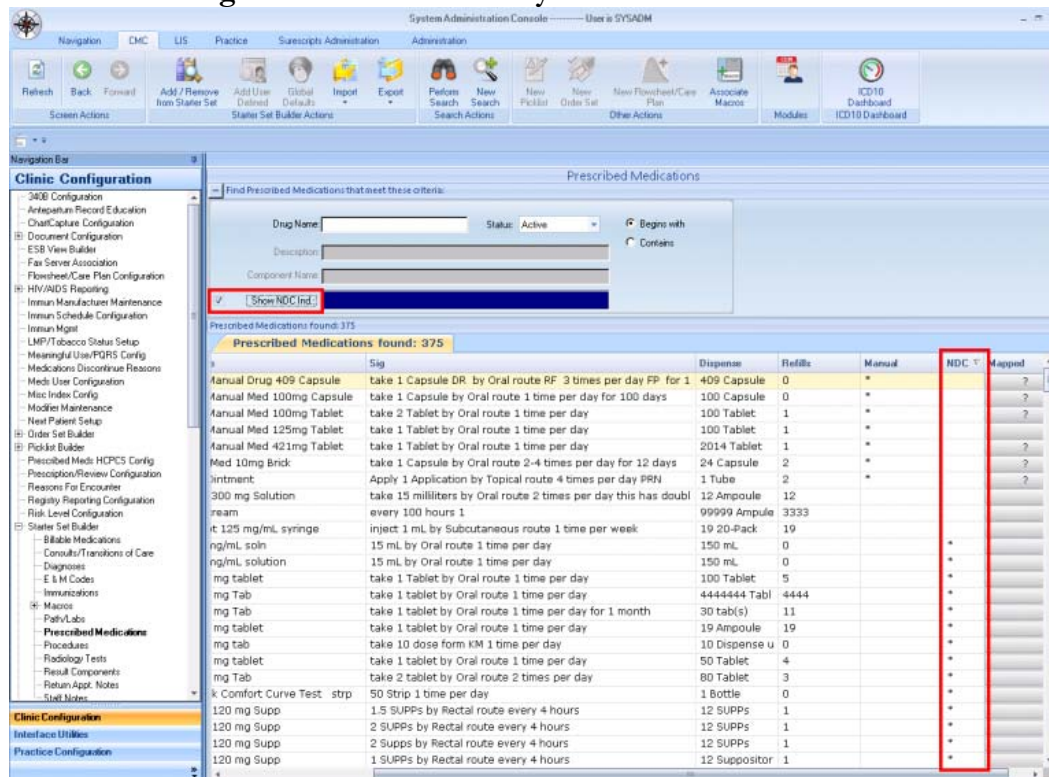
Financial group information has been removed from the **Accounting Period** report in **System Administration**.

System Administration Console

Clinic Configuration, NDC Columns Added to Prescribed Medications Starter Set

Project #BHML3-397

A **Show NDC Indicator** option has been added to the **Prescribed Medications** starter set in the **Clinic Configuration** section of the **System Administration Console**.



Selecting (checking) this option will display an **NDC** column in the **Prescribed Medications** main grid. An asterisk (*) will display for all medications that have an NDC number.

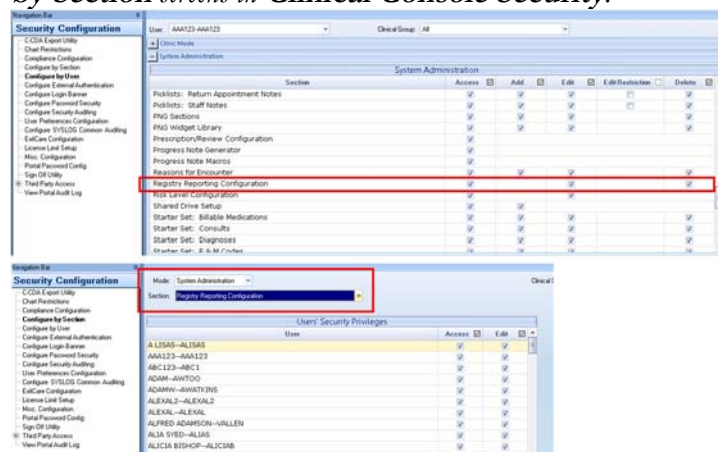
Clinic Configuration, New Registry Reporting Configuration for Blood Lead Tests (FL Clients Only)

Project #EHS-20058

To accommodate blood lead test reporting requirements on in-house equipment for Florida-based clients, a **Registry Reporting Configuration** screen has been added to the **Clinic Configuration** section of the **System Administration Console**.



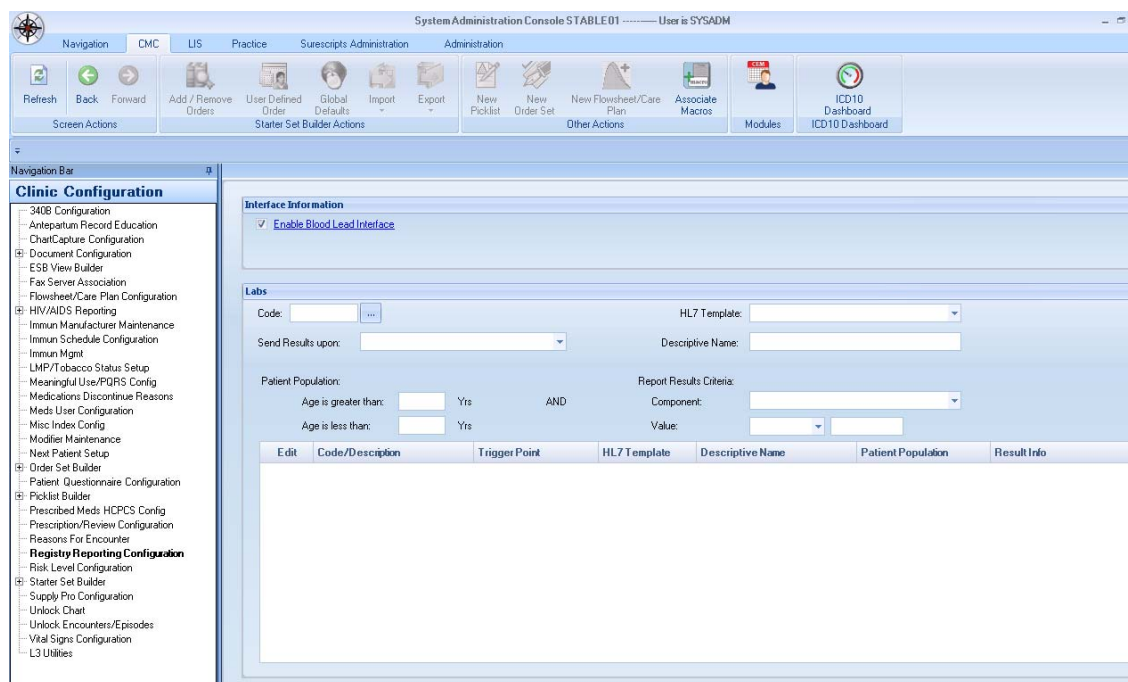
Access is defined by enabling the **Registry Reporting Configuration** option for the user in the **System Administration** mode of the **Configure by User/ Configure by Section** screens in **Clinical Console Security**.




The following access levels are available:

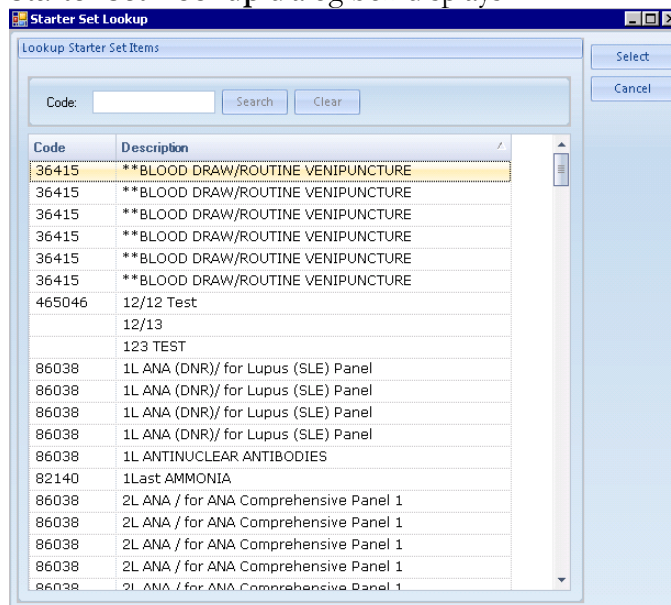
- **Access** – Enables users to access the screen.
- **Edit** – Enables users to edit the CPT code selection and the trigger point on screen.
- **Delete** – Enables users to delete a CPT code from the code table.

The **Registry Reporting Configuration** screen enables SYSADM users to configure certain CPT codes in the system to automatically send blood lead results to the state when certain values are present on the appropriate order.




To configure CPT codes for the blood lead interface:


1. Select (check) the **Enable Blood Lead Interface** checkbox in the **Interface Information** section. The **Labs** section will enable.
2. Click  in the **Code** field and search for the appropriate CPT code to configure. A **Starter Set Lookup** dialog box displays.



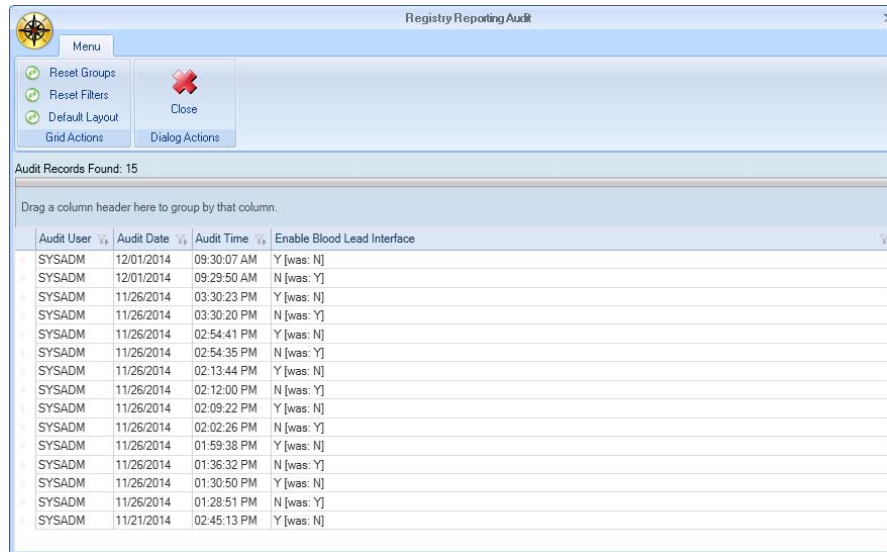
Search for and select the appropriate code and click **Select** to populate the **Code** field on the main screen.

3. Select the appropriate trigger point (the point at which to send the lab results) from the **Send Results upon** drop-down list. Selections include **Order Sign Off** and **Encounter Sign Off**.
4. Enter the appropriate **Patient Population** age range from which to send the results.
5. Select the appropriate **HL7 Template** to use to send the results from the drop-down list. The **Descriptive Name** field will populate once a template is selected.
6. In the **Report Results Criteria** section, enter the appropriate **Component** and **Value** configurations for the CPT code.
7. Once the above information is entered, the record will automatically save and display on the main grid.

Edit	Code/Description	Trigger Point	HL7 Template	Descriptive Name	Patient Population	Result Info
	83718 HDL CHOLESTEROL	Order Sign Off	LABCORP	Labcorp Lab out		
	84703 URINE PREGNANCY...	Encounter Sign Off	LABCORP	Labcorp Lab out	> 18 Yrs, < 50 Yrs	<=12345

Users may click  in the **Edit** column to edit the information in a particular record; the information will populate the appropriate fields and allows the user to make changes.

8. **Auditing** – Users may click the **Enable Blood Lead Interface** hyperlink in the **Interface Information** section to display the interface enable audit.



The screenshot shows a window titled "Registry Reporting Audit". It has a menu bar with "Menu" and a toolbar with "Reset Groups", "Reset Filters", "Default Layout", "Grid Actions", "Close", and "Dialog Actions". Below the toolbar, it says "Audit Records Found: 15". There is a header row for the table with columns: "Audit User", "Audit Date", "Audit Time", and "Enable Blood Lead Interface". The table contains 15 rows of data, all with "SYSADM" as the user and dates from 11/21/2014 to 12/01/2014.

Audit User	Audit Date	Audit Time	Enable Blood Lead Interface
SYSADM	12/01/2014	09:30:07 AM	Y [was: N]
SYSADM	12/01/2014	09:29:50 AM	N [was: Y]
SYSADM	11/26/2014	03:30:23 PM	Y [was: N]
SYSADM	11/26/2014	03:30:20 PM	N [was: Y]
SYSADM	11/26/2014	02:54:41 PM	Y [was: N]
SYSADM	11/26/2014	02:54:35 PM	N [was: Y]
SYSADM	11/26/2014	02:13:44 PM	Y [was: N]
SYSADM	11/26/2014	02:12:00 PM	N [was: Y]
SYSADM	11/26/2014	02:09:22 PM	Y [was: N]
SYSADM	11/26/2014	02:02:26 PM	N [was: Y]
SYSADM	11/26/2014	01:59:38 PM	Y [was: N]
SYSADM	11/26/2014	01:36:32 PM	N [was: Y]
SYSADM	11/26/2014	01:30:50 PM	Y [was: N]
SYSADM	11/26/2014	01:28:51 PM	N [was: Y]
SYSADM	11/21/2014	02:45:13 PM	Y [was: N]

The following information is available for viewing:

- **Audit User** – Displays the user ID of the person that modified the audit (always SYSADM).
- **Audit Date** – Displays the date the modification was made.
- **Audit Time** – Displays the time the modification was made.
- **Enable Blood Lead Interface** – Indicates (via Y or N) whether the interface was enabled or disabled for the in-house equipment.

Configure SuccessEHS, Duplicate Patient Override Checkbox Removed

Project #EHS-19761

The **Duplicate Patient Override** checkbox has been removed from the **Patient Administration** section of **Configure SuccessEHS** under **Practice Configuration** in the **System Administration Cons**

Financial Classes, New Timely Filing Limit Option

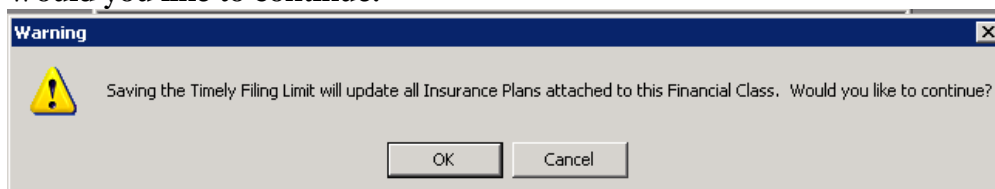
Project #EHS-20185

A **Timely Filing Limit** option has been added to the **Financial Class** dialog box in the **Financial Class** dialog box in **Core Setup** under **Practice Configuration** in the **System**

Administration Console:

The Timely Filing Limit option allows users to enter a set number of days in the **Timely Filing Limit** field past which the claim is considered overdue for timely filing for all claims in the appropriate financial class.

If the user chooses to enter a timely filing limit, the following message displays:
“Saving the Timely Filing Limit will update every plan attached to this Financial Class. Would you like to continue?”



Clicking **OK** will update all insurance plans associated to the appropriate financial class with the entered timely filing limit. **Any existing information on the affected insurance plans will be overwritten.**

Clicking **Cancel** will cancel the setting of a filing limit to the financial class.

Timely filing limits are editable and auditable in the **Financial Classes** screen, and will be reportable in Business Objects reports.

Timely Filing in Claims Console

Individual claims in **Claims Console** are color-coded to indicate the status of timely filing limits.

History	Claim ID	Seq	Rank	Timely Filing	Current Claim Status	Claim Date	Status Date	Patient #	Patient Name	Billing Provider
	479986	A	1	Exceeded	HELD	09/05/2012	09/06/2012	94593	SMITH, DIANA	ABDUL, LEWIS A (MD)
	479994	A	1		HELD	09/06/2012	09/06/2012	94584	SMITH, DEENA	ANDREWS, JULIE ANN (...)
	479996	A	1		UNPOSTED	09/06/2012	09/06/2012	94664	SMITH, MARK	ANDREWS, JULIE ANN (...)

- **Claims in black text** – The claim is within the timely filing limit.

- **Claims in red text** – The claim has exceeded the timely filing limit. An **Exceeded** label will also display in the **Timely Filing** column.
- **Claims in purple text** – The claim is past due and has been marked for review. Past due claims marked for review that have also exceeded the timely filing limit will display in **red text** as indicated above.

Filtering Timely Filing in Claims Searches

In **Claims Console**, users can search for only those claims that have a Timely Filing alert attached to them by selecting (checking) the **Timely Filing Alerts Only** checkbox in the search section of the **Claims Management** screen.

A **Timely Filing** column has been added to the search results grid that displays the number of days in which the timely filing limit will be reached; an **Exceeded** label indicates that the limit has passed.

Detail	History	View/Id	Claim ID	Seq	Rank	Timely Filing	Current Claim Status	Claim Date	Status Date	Patient #	Patient Name	Billing Provider
			480630	A	1	280	READY TO SEND	12/13/2012	02/05/2013	22967	SYLVESTER, SUE	ANDREWS, JULIE
			480543	A	1	238	SENT	10/12/2012	03/06/2013	3596	HACKER, CLIFFORD	WOLFORD, RATHA
			480121	A	1	150	ERROR	09/16/2012	02/01/2013	88343	KING, AUBREY	BONDY, CECIL
			479767	A	1	82	READY TO SEND	05/29/2012	03/06/2013	94468	AYCOX, JOSH	LEONARD, ALEXA
			479768	A	1	82	RESTART PREPARE	05/29/2012	06/19/2014	94468	AYCOX, JOSH	LEONARD, ALEXA
			479336	A	1	14	READY TO SEND	03/22/2012	03/06/2013	94468	AYCOX, JOSH	LEONARD, ALEXA
			479135	A	1	Exceeded	SENT	02/16/2012	08/20/2014	76405	WEEMS, MELVIN	BALL, CHARLES W
			479111	A	1	Exceeded	READY TO SEND	02/08/2012	03/06/2013	94468	AYCOX, JOSH	LEONARD, ALEXA
			479086	A	1	Exceeded	READY TO SEND	02/02/2012	02/02/2012	35944	WEEMS, MARLON	DO NOT USE-ABC
			479025	A	1	Exceeded	READY TO SEND	01/27/2012	03/06/2013	94468	AYCOX, JOSH	LEONARD, ALEXA
			478986	A	1	Exceeded	READY TO PRINT	01/26/2012	03/06/2013	94315	MASON, MOSES	ANDREWS, JULIE
			483859	A	1	Exceeded	READY TO BE PREPARED	09/15/2014	09/15/2014	94338	PRELIGHT, CE (DO NOT...	JOHN, DR. J
			483830	A	1	Exceeded	READY TO BE PREPARED	09/05/2014	09/16/2014	91316	NABORS, GAY	BENEDICT, JOSEPH
			483671	A	1	Exceeded	READY TO BE PREPARED	08/19/2014	08/19/2014	94269	MCFLERNDORF, FLETTY	APPOINTMENT, NC
			483673	A	1	Exceeded	READY TO BE PREPARED	08/19/2014	08/19/2014	94269	MCFLERNDORF, FLETTY	APPOINTMENT, NC
			483672	A	1	Exceeded	READY TO BE PREPARED	08/19/2014	08/19/2014	94269	MCFLERNDORF, FLETTY	APPOINTMENT, NC
			478510	A	1	Exceeded	READY TO PRINT	12/12/2011	03/06/2013	94269	MCFLERNDORF, FLETTY	JOHN, DR. J
			478443	A	1	Exceeded	READY TO PRINT	12/09/2011	03/06/2013	94269	MCFLERNDORF, FLETTY	JOHN, DR. J
			478406	A	1	Exceeded	READY TO SEND	12/07/2011	02/05/2013	94382	AARONSON, ABBIE	DO NOT USE-ABC
			483404	A	1	Exceeded	READY TO SEND	04/12/2013	06/07/2013	94375	AARONSON, AAMY	JEFFERSON, THOM
			478389	A	1	Exceeded	REJECTED	11/30/2011	12/15/2011	94330	BYRD, BIRDIE	ARZOLA COLLAZO
			478239	A	1	Exceeded	REJECTED - HIPAA 997	11/10/2011	12/09/2011	94330	BYRD, BIRDIE	HILL, CADEN
			483506	A	1	Exceeded	ERROR	06/20/2014	08/19/2014	94369	MCFLERNDORF, FLETTY	JOHN, DR. J
			483502	A	1	Exceeded	ERROR	06/20/2014	08/19/2014	94369	MCFLERNDORF, FLETTY	JOHN, DR. J
			483504	A	1	Exceeded	ERROR	06/20/2014	08/19/2014	94369	MCFLERNDORF, FLETTY	JOHN, DR. J

Timely Filing in Other Modules

- Inquiry** – A **Timely Filing** column has been added to the **Balances By Visit** grid in **Inquiry** that displays the number of days in which the timely filing limit will be reached (similar to **Claims Management** above).

Visit Summary For All Financial Groups

Balances by Visit: **Claim Notes** | **Rejections** | **Close**

Posted Date	Visit Date	Claim #	Financial Group	Patient #	Patient Name	Primary Ins.	Guar Bal	Ins Bal	Wk/Comp Bal	Coll Bal	Other	Total	Timely Filing
01/18/13	01/18/13	480839	FINANCIAL GROUP	100	PARSON, CHARLOTTE V	AETNA	7.50	15.00	0.00	0.00	0.00	22.50	
01/18/13	01/18/13	480841	FINANCIAL GROUP	100	PARSON, CHARLOTTE V	AETNA	12.50	15.00	0.00	0.00	0.00	27.50	
01/18/13	01/18/13	480842	FINANCIAL GROUP	100	PARSON, CHARLOTTE V	AETNA	15.00	15.00	0.00	0.00	0.00	30.00	
01/17/13	01/17/13	480833	FINANCIAL GROUP	100	PARSON, CHARLOTTE V	AETNA	15.00	15.00	0.00	0.00	0.00	30.00	
TOTAL							330.00	323.00	0.00	0.00	0.00	653.00	

Claims Filed History

Claim ID	Seq	Rank	Date	Status	Amount	Method	Filed To	Code	Plan Name	File ID	NSF Batch ID	Rejection Code	Description
480839	A	1	11-Feb-2014	ERROR	30.00	E-PROF	RELAYHEA	AETN-01	AETNA				
480839	A	1	10-Feb-2014	ERROR	30.00	E-PROF	RELAYHEA	AETN-01	AETNA				
480839	A	1	02-Jan-2014	ERROR	30.00	E-PROF	RELAYHEA	AETN-01	AETNA				
480839	A	1	06-Dec-2013	ERROR	30.00	E-PROF	RELAYHEA	AETN-01	AETNA				
480839	A	1	15-Oct-2013	CLAIM DELETED FRO	30.00	E-PROF	RELAYHEA	AETN-01	AETNA				
480839	A	1	12-Sep-2013	CLAIM BATCH DELET	30.00	E-PROF	RELAYHEA	AETN-01	AETNA				
480839	A	1	01-Feb-2013	ERROR	30.00	E-PROF	RELAYHEA	AETN-01	AETNA				

Claim Transaction Detail

Responsible	Code	Description	Diagnoses	Date	Copy	FC	Fee	Split	Pmts	Adjst	Balance	Reference Number	Post Date	Provider Name	Servic
AETNA	99212	OFFICE/OUTP	100.0	18-Jan-2013	A		15.00	15.00			15.00		18-Jan-2013	HILL, CADEN	ALABA
AETNA	99212	OFFICE/OUTP	100.0	18-Jan-2013	A		15.00	15.00			15.00		18-Jan-2013	HILL, CADEN	ALABA
RESP	RESPONSIBIL			18-Jan-2013	A					-15.00	0.00		18-Jan-2013		
Guarantor	RESP	RESPONSIBIL		18-Jan-2013	P					15.00	15.00		18-Jan-2013		
BCADJ	BCBS ADJUS			18-Jan-2013	P					-7.50	7.50		18-Jan-2013		

- Charge Entry alerts** – Users with System Administration access can configure timely filing alerts to display for individual users in **Charge Entry** via the **Timely Filing Alerts Configuration** screen in the **Additional Configuration** section under **Practice Configuration** in the **System Administration Console**.

System Administration Console STABLE 01 — User is SYSADMIN

Navigation: CMC | LIS | Practice | Subscriptions Administration | Administration

Refresh | Back | Forward | Save | Undo | Reset Available Filter | Reset Selected Filter | Eligibility Configuration Eligibility | ICD10 Dashboard | ICD10 Dashboard

Navigation Bar

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 - Split Visit
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 - Timely Filing Alert Configuration**
 - UDS Tables Configuration
 - User Defined Fields
 - Value Code Rules
 - ZIP Codes
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- Management Reports



Timely Filing Alert Configuration

Selected users will receive Timely Filing Alerts in Charge Entry

Users	SuccessEHS
A LISAS	<input type="checkbox"/>
AAA123	<input type="checkbox"/>
AARON ARMER	<input checked="" type="checkbox"/>
ABC123	<input type="checkbox"/>
ADAH	<input type="checkbox"/>
ADAMW	<input type="checkbox"/>
ADHINSB	<input type="checkbox"/>
ALEXAL	<input checked="" type="checkbox"/>
ALEXAL2	<input type="checkbox"/>
ALFRED ADAMSON	<input type="checkbox"/>
ALJA SYED	<input type="checkbox"/>
ALICIA	<input checked="" type="checkbox"/>
ALICIA BISHOP	<input type="checkbox"/>
ALISA	<input type="checkbox"/>
ALL FG	<input type="checkbox"/>
ALPHAII	<input type="checkbox"/>
ALUSER	<input type="checkbox"/>
AMANDA BREWSTER	<input type="checkbox"/>
AMANDA BREWSTER	<input type="checkbox"/>
ANDREW C	<input type="checkbox"/>
ANGIE HOBBS	<input checked="" type="checkbox"/>
ANITA COMMUNITY	<input type="checkbox"/>
ANNE SMITH	<input type="checkbox"/>
ANWHEHUNT	<input type="checkbox"/>
APRJR	<input type="checkbox"/>
AUDITUSER	<input type="checkbox"/>
AWHEHUNT	<input type="checkbox"/>
AWTEST1	<input type="checkbox"/>
AWTEST2	<input type="checkbox"/>
AWTEST3	<input type="checkbox"/>
BARRY WESSON	<input type="checkbox"/>

Users	SuccessEHS
ANNE	<input checked="" type="checkbox"/>
DAVID ROTTEN	<input type="checkbox"/>
DROSSEN	<input type="checkbox"/>
MELISSA	<input type="checkbox"/>
MELISSA2	<input type="checkbox"/>
SUBHA	<input type="checkbox"/>

Classic Configuration | Interface Utilities | **Practice Configuration**

Users may select the appropriate user IDs in the **Available Users** column and click  to move them to the **Selected Users** column. To remove one or more users, select the users in the **Selected Users** column and click  to return it to the **Available Users** column.

Selected users will receive timely filing alerts in **Charge Entry** when a claim exceeds the timely filing limit.

HIE Consent Configuration, Restrictions for Syndromic Surveillance Outgoing Messages

Project #EHS-20347, EHS-20349

Restrictions are now in effect for all outgoing messages sent regarding syndromic surveillance.

- **Consent-based restrictions** – Only patients with a signed HIE consent form (via the **Privacy/Consent Information** window in **Patient Administration**) will have syndromic surveillance messages sent when the ESB is submitted and the applicable financial group is configured (via the **HIE Consent Configuration** screen in the **System Administration Console**) to send data to the applicable HIE. If patient consent is not present and/or the financial group is not configured appropriately, no data will be sent.
- **Financial group restrictions** – In addition, messages are also subject to financial group restrictions. If Financial Group A is configured to send messages to State X, then only messages generated for patients checked in to Group A will be sent. Messages will not be sent to State X from any other financial group.