ECHOVANTAGE RELEASE NOTES

VERSION 3.08

NEW FEATURES

Programs Attached to Diagnoses

Programs can be associated with one or more client Diagnoses. More than one program can be attached when adding a new or editing an existing diagnosis. This information will be used to associate Diagnoses to Services in a future release.

Sending to Group Mailboxes

Messages can now be sent to a Group Mailbox from sendable modals such as a Timeline Form or a Progress Note. Users must have *SEND* permissions for the Group Mailbox for it to be visible in the *Recipient* drop-down listing. Group mailboxes can be identified in the list by the blue multi-person icon. These messages may be marked for *Review* or *Signature Requested* the same as when sending to an individual inbox.

Replying to Group Mailboxes

In addition to the agency defined action buttons for a Group Mailbox, users can now reply to the entire group.

- The Reply will not be seen by the original sender if not in the group.
- All members of the group will be able to view the Reply.
- The User must be granted *Send* and *View* permissions for that mailbox.
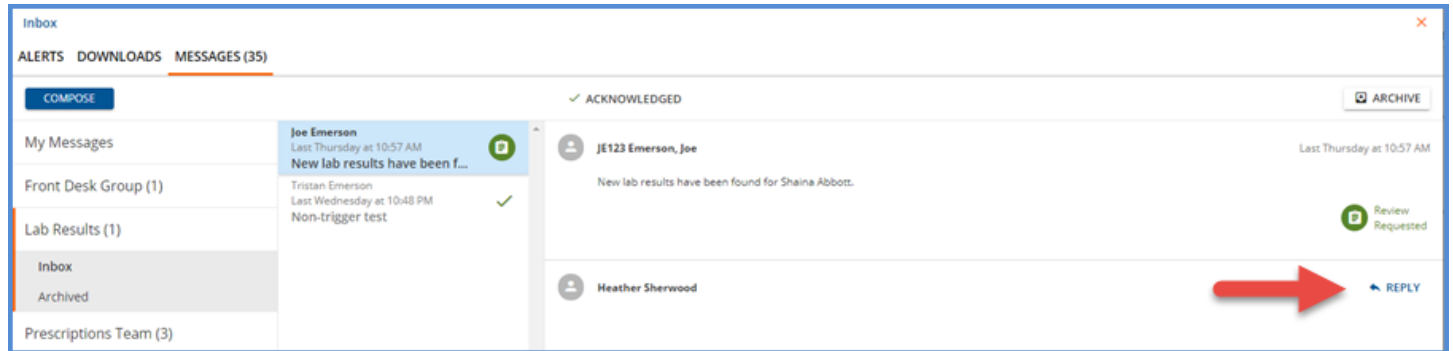
## Sending and Viewing Progress Notes in the Inbox

When Progress notes are sent to a Personal or Group Mailbox for review and/or signature, the Progress Note will display within the message body rather than just as a link to the Parent Service. If the form is signable and the *Signature Requested* was selected prior to sending, a signature box will also be available in the message. Progress Notes may be sent from any of the following locations and still display:

- Timeline
- Scheduler
- Service Entry Page
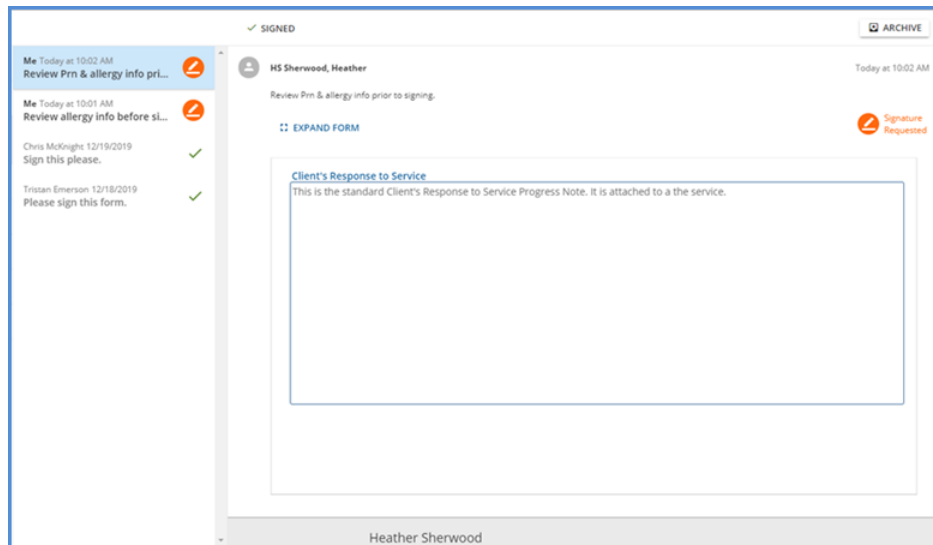
Referring Providers Information

The *Clients>Enrollments* tab has been redesigned to accommodate changes to the Referring Providers grid required to capture information needed for 837P. Six new columns have been added; the first four in the list below replace the existing *Referred By* column.

First Name · Middle Name · Last Name · Suffix · NPI · Priority

NOTE

1. The *Referred By* column will not be deleted and will remain in the database. The first 50 characters from this field will be migrated to the Last Name column during the upgrade process.

2. Care Plan Referrals will not be documented in the 837P. Referrals must be done through the Enrollments page to be included.

Services without Diagnoses

Services can now be saved without a diagnosis in order to capture a provided service before the client has been diagnosed. The Service Definition *Billable* Flag determines whether the Service can be marked as Ready without a Diagnosis.

- If the service is billable, the service cannot be set to Ready until at least one Diagnosis is entered.
- If the service is not billable, the service can be set to Ready without a Diagnosis entered.
- When using a bulk method to *Mark Services as Ready*, Billable services without a Diagnosis will fail.

Billing Non-Specific Services

A new *Non-Specific Service* checkbox is available when creating and editing Service Definitions. When selected, a Non-Specific Service description up to 80 characters may be entered. When a service matching on this Service Definition is billed, the generated 837P will report the Non-Specific Service Description text in Loop 2400 section SV101-7.

Locking Services with Signed Progress Notes

Signing a Progress Note now locks a Service Record leaving only the Status as updatable.

- System Admin users can grant permission to specific User Groups to edit these locked Services.
- A new Permissions configuration for *Services: Edit Signed Services* is available.
- This permission will be enabled for all User Groups by default.
- When a Service is locked Add-on services cannot be created or edited except for the Status.
- When the Progress Note is Unlocked, the Service becomes editable again.

Reprocessing Unbilled Services

Users that have been granted the Features Permissions for *Services: Change Status* can change the status of a Service that has been marked *DONE* to *NOT READY* if there is **no charge amount** associated with it. This *Not Ready* service can then be marked Ready and reprocessed in a new *Create Charges* job.

UPDATES

Ticket #	Description
8471	The signature box on signable forms has been widened.
8697	Continued work on Claims screen to improve performance with large datasets.

BUG FIXES

Ticket #	Description
8344	Wait List Alerts now send to all Staff listed in the Episode staff list.
8533	The buttons on the compose in the sendable modal are no longer outside the popover.
8652	FormDesignEHR no longer generates IDs less than 36 characters.
8794	Retry option is no longer missing in Unbilled Charges>Create Bills>History screen.
8798	In Claims Management, the *Rebill Active Payer* Action and Confirmation have been changed to Rebill Outgoing Charges for both.
8834	Navigating away to Alerts and back to Messages no longer results in an endless spinner.