



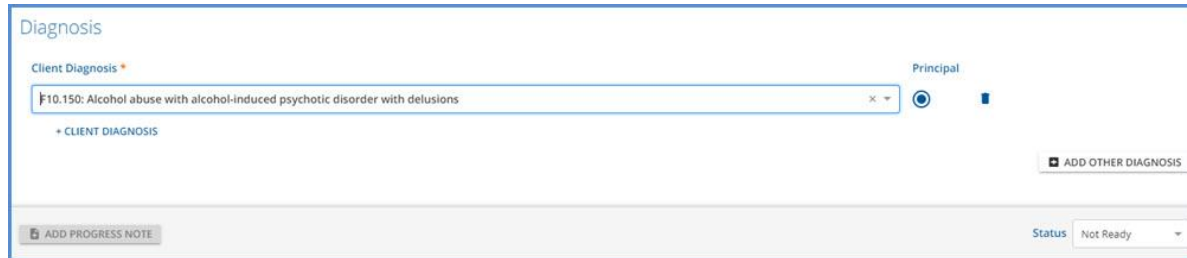
ECHOVANTAGE RELEASE NOTES

VERSION 3.09

NEW FEATURES

Client Diagnosis Added to Service Entry

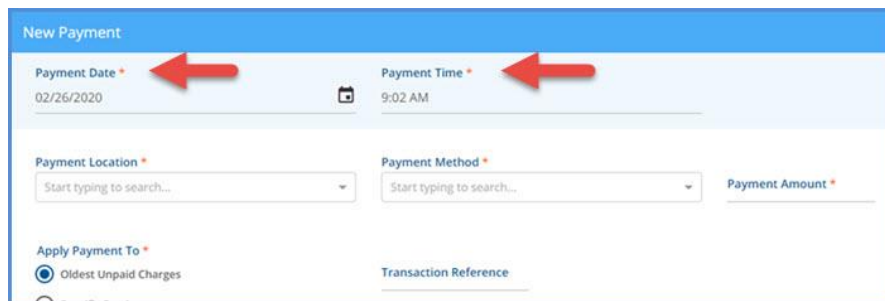
A new control was added that only displays the diagnoses, as defined on the Client Diagnosis tab, that are active for the selected Client and Service date. This drop-down box defaults to the Client's primary and billable diagnosis, that is active for the entered Service date, with the Principal button selected.



- The default Client diagnosis can be changed or deleted.
- Additional Client diagnoses can be added.
- Select the *+ Add Other Diagnosis* button to enter a diagnosis that does not already exist on the Client Diagnosis tab.
- Any diagnosis entered for the Service can be marked as Principal.
- When changes are made to either the Client or Date, all selected diagnoses are cleared and the active, billable, primary diagnosis for the New client and Date combination is displayed.
- The diagnosis listed on previously entered Services are stored as an *Other Diagnosis*.

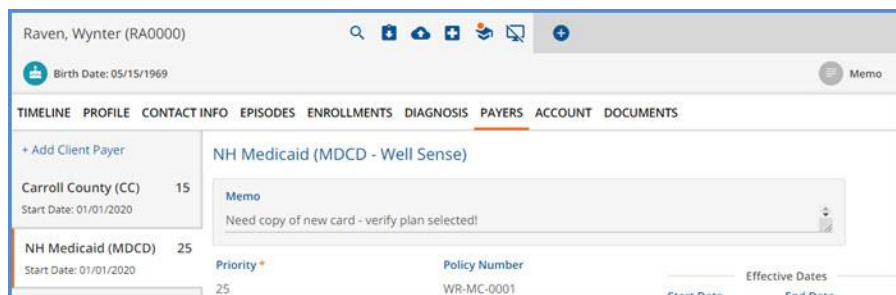
Manually Enter a Client Payment Date and Time

Payment Date and Payment Time fields are now available when entering a Client payment. These fields default to the current date and time but may be edited during payment entry. The Client Payment Receipt now includes this Payment Date.



Notes in Client Payers

A memo field in the Client Payers screen is now available to store notes specific to the currently selected Client and Payer. These notes are visible to all users with access to the Client > Payers menu option.





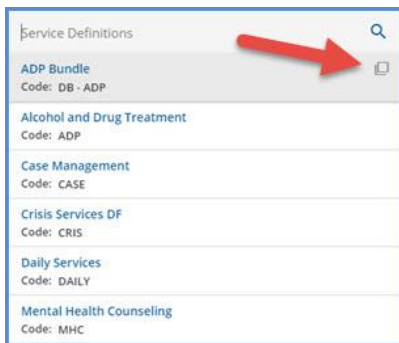
PIN Signatures

The username on the main application header is now a button that opens a Staff Preferences page. On this page Staff can select the option to setup up their PIN signature. Once configured, the Staff member can sign forms via this 4-6 digit PIN.



Service Definition Bundled Indicator

On the Service Definitions Configuration page, the Bundled icon makes it easy to identify a bundled Service Definition in the drop-down list.



IMPROVEMENTS

Staff Schedules

The number of segments available to schedule per day for an individual staff has been increased from 2 to 24. Additionally, users can now specify a Category (defined list) and Location (component code) for each time segment. These Categories and Locations will be included in the Scheduler's *Search for Next Available* function in a future release.

| Start * | End * | Staff Schedule Category | Location |
|----------|----------|----------------------------------|------------------------|
| 6:30 AM | 8:30 AM | PRN: Progress Note Update/Review | HOM: Home |
| 9:00 AM | 11:00 AM | INT: Intake Assessments | OFF: Provider's Office |
| 11:30 AM | 12:30 PM | GRPT: Group Therapy | COM: Community Center |
| 12:30 PM | 1:30 PM | LCH: Lunch | HOM: Home |
| 1:30 PM | 4:30 PM | MHC: Mental Health Counseling | SCH: School |

+ ADD



Client and Service Date on GL Audit Report

To help troubleshoot posting errors, the GL Audit Report has been redesigned to include Client Name and Service Date. This provides enough information to identify the component codes related to the error(s) to help determine what may be missing.

| echoVantage | | GL Audit Report | | | | | |
|-------------------------|-------------------------|-------------------------|--------------|---------------|------------------|------------------|------------------|
| Post Type: Pre-Post | Cutoff Date: 2020-02-26 | GL Post Date: 2/26/2020 | GL Month: 2 | GL Year: 2020 | | | |
| Post Status: PREVIEW | Posted By: HS1 | | | | | | |
| Payer: Carroll County | | | | | | | |
| Account: | Client Name | Service Date | Debits | Credits | Transaction Date | Transaction Code | Transaction Type |
| | Harvest, Autumn | 02/26/2020 | 75.00 | 0.00 | 02/26/2020 | CHG | Charge |
| | Harvest, Autumn | 02/26/2020 | 0.00 | 75.00 | 02/26/2020 | CHG | Charge |
| | Account Total | | 75.00 | 75.00 | | | |
| Account: 1000-4500-7500 | | | | | | | |
| | Beach, Sandy | 02/27/2020 | 20.00 | 0.00 | 02/03/2020 | PAY | Payment |

Reminder Notes

A button is now displayed in the Service Entry screen for Reminder Notes that exceed 120 characters. Selecting the button displays the note in a separate Modal. The text of Reminder Notes with 120 characters or less continue to display on the Service Entry screen.



REPORTS

The following reports have been updated.

Administration

Enrollment Census Report - The Enrollment Census report now uses *Discharge Date* instead of *Projected Discharge Date*.

Staff Caseload Detail - Added filter options for *active enrollments* and *staff no longer on episode*. Report now allows more flexible selection of Staff Roles as configured by the agency in Defined Lists.

Staff Caseload Summary - Allows more flexible selection of Staff Roles as configured by the agency in Defined Lists.

Billing Reports

_GL Audit Report - The Client and Service Date of a transaction have been added to the GL Audit Report.

_CMS 1500 - CMS 1500 report can now be run for multiple payers without duplicating claims.

_SelfPayStatementReport - SelfPayStatementReport now looks for its subreport using `"/_SelfPayStatementSubReport "`.

Fiscal Reports

Outstanding Charges - A Payer column and Payer totals have been added to the Outstanding Charges report.

Remittance Report - Fixed a bug in the Remittance Report where a remittance with multiple Adjustment Reasons would be duplicated.



UPDATES

| Ticket # | Description |
|----------|---|
| 8471 | The signature box on signable forms has been widened. |
| 8625 | Improvements were made to the rendering time when switching dates with large amounts of data visible on the VHR Timeline. |
| 8640 | The Enrollment Census report now uses <i>Discharge Date</i> instead of <i>Projected Discharge Date</i> . |
| 8641 | Added filter options for active enrollments and staff no longer on episode for the Staff Caseload Detail report. |
| 8697 | Continued work on the Claims screen to improve performance with large datasets. |
| 8720 | Service Entry screen was redesigned so that Service Components are selected before assigning or verifying a Client's Diagnosis for a Service. |
| 8747 | A Payer column and Payer totals have been added to the Outstanding Charges report. |
| 8874 | The Status field on the Claims screen now allows multiple values. |
| 8887 | The Client and Service Date of a transaction have been added to the GL Audit Report. |
| 8890 | SelfPayStatementReport now looks for its subreport using "./_SelfPayStatementSubReport". |
| 8942 | The "Number of Services in a Bundle" Unit option is now available in Payers > Rates when overriding the Service Definition default. |
| 8976 | Performance improvements were made to the loading of the Unprocessed Services History screen. |

BUG FIXES

| Ticket # | Case # | Description |
|--------------|--------|---|
| 8600 | 70675 | FD Grids now honor 'Required' flag for validated fields. |
| 8601 | 70676 | A description or primary key can now be entered as a Custom default value in Form DesignEHR allowing a Table-Validated Grid field that has a Default Value to populate without error. |
| 8731 | | FD Forms in Insert mode do not cancel properly. Resolved by disallowing the cancel option. |
| 8745 | 70949 | Staff Caseload Detail and Summary reports can now use the agency configured roles in Defined Lists. |
| 8826 | | A Bundled charge is now properly created for a billable third payer when the services in the bundle are not billable to the first two payers. |
| 8827 | | Self-Pay charges are updated appropriately when a service with an existing co-pay is denied with a Patient Responsibility and contractual adjustment indicated. |
| 8885 8916 | | Fiscal Overview job error links have been correctly directed to the Client > Contact Info page. |
| 8907 | | The Client Payments job no longer becomes stuck <i>In Progress</i> . |
| 8963 | | Remittance report no longer duplicates records by the number of Remittance messages. |
| 8973 | | The Min Minutes field label no longer overlays the Duration text when entering a new Service Definition. |
| 8975 | | Remittances with null patient responsibilities are now allowed. |
| 8977 | 71286 | CMS 1500 report can now be run for multiple payers without duplicating claims. |



| | | |
|-------------|--------------|--|
| 8981 | | Resolved Errors when working in Placements > Occupancy with the Vacancy check box and filters. |
| 8988 | | Rules engine test input is now aligned with field. |
| 9004 | | Lazy load exception errors in Unprocessed Services were addressed. |
| 9006 | | Login issues resolved when CMIS service is near capacity. |
| 9014 | 71528 | Template Event Notes now remain in the header of the child Progress Note for each service. |
| 9074 | | The Program drop-down no longer displays below the user's visible area when DSM and SNOMED codes are not used. |