



ECHOVANTAGE RELEASE NOTES

VERSION 3.13

NEW FEATURES

UB-04 Billing

The UB-04 Billing Method can now be configured by Payer in *Configuration > Services/Payer > Payer > Billing Methods*. To process charges using the UB-04, a **Revenue Code** must be specified on the Payer’s Rates tab in addition to the following Billing Methods configuration fields:

- Contact Phone Number, Required
- Type of Bill, Required
- Payer Accepts Corrected Claims, Optional Checkbox

Note that Legal Gender on the Client Profile page is used to populate the *FL 11 – Patient’s Sex* field. This required field allows either “M” (male) or “F” (female). Selecting “UN” (undifferentiated) on a Client’s Profile tab, will result in this field being left blank.

Monthly Maximum Client Fee

Monthly Maximum can now be selected as the Client Fee Type for a client’s Self Pay Payer. A dollar amount for the Monthly Maximum is specified when this fee type is added and Defined Filters may also be used to apply this maximum to specific services.

Client Fees		
Dates	Amount	Defined Filter
Start Date: 01/01/2020	Monthly Maximum of \$85.00	Mental Health
Start Date: 01/01/2020	Monthly Maximum of \$15.00	Alcohol and Drug

[+ ADD CLIENT FEE](#)

The Monthly Maximum is applied during the charge creation process,

- Month is defined as a calendar month.
- Monthly Maximum is calculated based on the date of service.
- The current charge is created in full if the monthly maximum is not exceeded when added to the total charges for the month.
- If the monthly maximum has not been met and the current charge would push the totals over the configured maximum,
 - A charge is created for the difference. (Monthly Maximum – Monthly Totals to Date)
 - An adjustment is created for the remainder. (Full Charge Amount – Difference)
 - An Info message is generated indicating that “*Client has exceeded the set monthly maximum.*”
 - This message is available to view until the job is Finalized.
- If the monthly maximum has already been met,
 - An adjustment is created for the total amount of the charge.
 - And an Info message is generated indicating that “*Client has exceeded the set monthly maximum.*”
 - This message is available to view until the job is Finalized.



Sliding Fees

A client’s fee can now be based on the client’s fiscal resources through Sliding Fees. Sliding Fee tables based on percentage of fee or a flat fee can be created in *Configuration > Services/Payers > Sliding Fee*. A Defined Filter can be assigned to the table to determine which services qualify for the use of a sliding fee. Tables have Start and End dates making it easy to address changes in the fee schedule and to maintain historical records. Date ranges from version to version should not overlap to avoid processing issues. When an overlapping version is created, a warning displays.

At Home Fees

Sliding Fee Label *
At Home Fees SUBMIT

Start Date * 01/01/2020 End Date Type: Percentage Flat Rate Defined Filter: At Home Versions: 01/01/2020 x + ADD VERSION

	A	B	C	D	E	F	G	H	I	J	
1			Household Size*								
2	Min. GMI	Max. GMI	1	2	3+						
3	\$0	\$200	1.00%	0.50%	0.50%						
4	\$201	\$400	1.50%	1.00%	0.50%						
5	\$401	\$800	2.00%	1.50%	1.00%						
6	\$801	\$1,200	2.50%	2.00%	1.00%						
7	\$1,201	\$1,600	5.00%	2.50%	1.50%						
8	\$1,601	\$2,200	10.00%	5.00%	2.00%						
9											
10											

On the Client Payers tab, *Sliding Fee* is now an option in the Types drop-down listing in the Client Fees section of the Self Pay Payer. When selected the *Amount* and *Defined Filters* fields are replaced by a Sliding Fee drop-down. Select the appropriate Sliding Fee and Save. A record in the Client Fees section will display with the correct *Amount* based on the client’s Household information and the selected Sliding Fee. If a Defined Filter was selected in the table’s configuration, it will also display with that Client Fee record.

Selecting the table shown above results in this Client Fee record:

Client Fees

Dates	Amount	Defined Filter
Start Date: 04/01/2020	2.5%	At Home

[+ ADD CLIENT FEE](#)

Based on this Household information:

TIMELINE SCHEDULE PROFILE **HOUSEHOLD** CONTACT INFO EPISODES ENROLLMENTS

Household Income

Gross Monthly Income * Start Date End Date

\$ 1,100.00 01/01/2020 📅 📅 🗑️

[+ ADD](#)

Household Size

Household Size * Start Date End Date

1 01/01/2020 📅 📅 🗑️

[+ ADD](#)



Corrected Claims for All Billing Methods

A *Payer Accepts Corrected Claims* configuration is available for all Billing Methods. Corrected claims can be processed when this checkbox is selected for the billing method being used.



A corrected claim is identified as already having a payment (a zero payment in the case of a denial or a positive payment in the case of an accidental payment) from the payer being billed. When reprocessing or rebilling using billing method:

UB-04 – When a claim is a corrected claim and the Corrected Claims checkbox is selected:

- If the payment has a PCCN, then a UB-04 bill will be created that only contains corrections.
- If the payment does **NOT** have a PCCN, a warning will be logged prior to creating the UB-04 with only the corrections.

CMS-1500 – When a claim is a corrected claim and the Corrected Claims checkbox is selected:

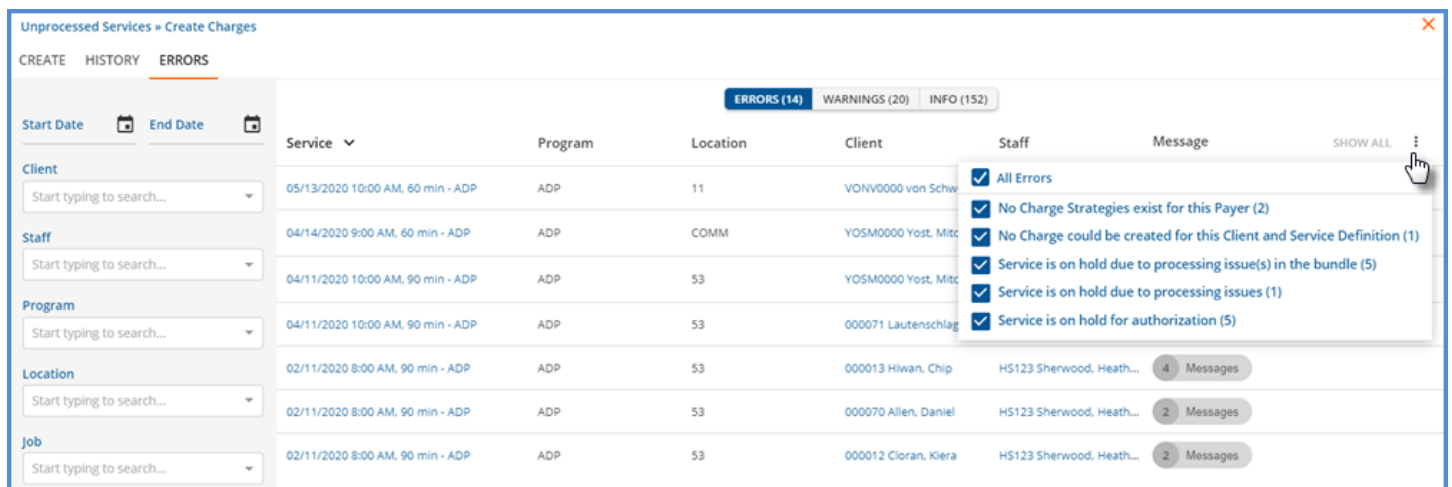
- If the payment has a PCCN,
 - Box 22 Resubmission Code = '7'
 - Box 22 Original Submission Code is the PCCN from the prior Payment
- If there is no PCCN,
 - an error will be logged during bill creation
 - and CMS-1500 will be created that only contains corrections

837P/I – When a claim is a corrected claim and the Corrected Claims checkbox is selected:

- If the payment has a PCCN,
 - CLM05-3 is a '7' instead of a '1'
 - REF*F8 is reported after the Prior Authorization segment but before Claim Diagnoses
 - REF*F8 includes the PCCN from the prior Payment
- If there is no PCCN,
 - a warning will be logged
 - and it will be billed as an original claim

Service Processing Errors

The Service Processing Errors screen has been redesigned with a new layout, additional links to facilitate resolution, and the ability to filter by error type. Errors are tied to the Service instead of the processing job and now persist after jobs are Finalized, until they are resolved in a future job. This facilitates error reporting between jobs.



- The filters are listed on the left side of the screen in a single column and now include: Start and End Date, Client, Staff, Program, Location, and Job.



- The count of each message type (Errors, Warnings, Info) is displayed above the error results grid.
 - Click on the type to display messages of that type in the grid.
 - The currently selected message type has a dark blue background.
- Use the Ellipsis (three dots) to the right of *SHOW ALL*.
 - To display specific errors of that type
 - Or to revert to Show All errors of that type
- In the results grid navigate quickly by using the blue links:
 - Time & Duration links open the specific Service.
 - Client link opens that client’s menu.
 - Staff link opens that staff’s configuration page in *Configuration>Staff/Users>Staff*.
- The previous page and filter settings are retained when you navigate away and return in the same session.

Service Definitions New Field

A new field *Other* is now available in the Service Definitions *PROFILE* tab. This optional 20 character alpha/numeric field may be used for internal or state reporting purposes allowing flexibility to store additional Service Definition information.

The screenshot shows the 'PROFILE' tab of the Service Definitions interface. It includes fields for 'Service Code *' (containing 'CASE'), 'Service Name *' (containing 'Case Management'), 'Other', 'Start Date' (05/01/2019), and 'End Date'. A red arrow points to the 'Other' field, and a tooltip above it states: 'This field may be used for internal purposes.' The 'PROGRESS NOTES' tab is also visible.

IMPROVEMENTS

Religious Preference

The Religious Preference drop-down listing on the Client Profile tab is now sorted alphabetically ascending instead of Defined List order.

Credentialed Rate Sort by List Order

The Credentialed Rates drop-down listing on both the Service Definitions and Payers Rates tab are now sorted alphabetically.



REPORTS

Updated and New Reports

The Following Reports have been Updated:

Administration

Schedule Report – This report now includes templated events.

Billing Reports

_837Audit – the 837P audit report now indicates which claims will be sent as corrections.

_837IAudit - the 837I audit report now indicates which claims will be sent as corrections.

_CMS1500 – Aligned Box 22 Resubmission Code and Box 22 Original Submission Code for new corrected claim information.

_GL Audit Report – This report now correctly reports the client payment date and time based on the organizations time zone configuration setting.

Client Reports

_Clients By Enrollment for Export – References to Client Termination Date were removed.

Clients By Enrollment – References to Client Termination Date were removed.

Services without Progress Notes – This report has been updated to only report services that require a progress note.

Fiscal Reports

Cash Receipts Journal – Report now filters by and shows Transaction Date instead of Remittance Date.

Client Payment Allocation Report – The header row has been updated to just pull the first value of client payment instead of summing payment by the number of services to which it was applied.

Service Detail With Charges – Added a new report for export to csv and removed Client Termination Date from Client lookup query.

Service Detail With Charges By Client - Added a new report for export to csv and removed Client Termination Date from Client lookup query.

Service Detail With Charges By Staff - Added a new report for export to csv and removed Client Termination Date from Client lookup query.

The Following New Reports have been Added:

Billing Reports

_UB04 – New report for reviewing and printing UB-04 claims.

_UB04_TEST – This is the same report as above but with a watermark to assist with initial printer alignment set up. This should NOT be used after setup is complete.

Fiscal Reports

_Service Detail With Charges for Export – A csv friendly export format added to the existing Service Detail With Charges report.

_Service Detail With Charges By Client for Export - A csv friendly export format added to the existing Service Detail With Charges By Client report.

_Service Detail With Charges By staff for Export - A csv friendly export format added to the existing Service Detail With Charges By Staff report.



UPDATES

Ticket #	Description
9335	"Select an alert" hint message is now centered in the Alerts Inbox.
9634	GL Audit Report - "Transaction date" now account's for organization's timezone.
9668	The 837 I/P audit reports now display which claims will be sent as corrections.
9806	Aligned Corrected Claim for the CMS1500 report.

BUG FIXES

Ticket #	Case #	Description
9333		A <i>Cannot join Telemed session in the past</i> message now displays when attempting to view a Telemed session that has ended. This message is displayed when the current date and time is more than 30 minutes after the scheduled Telemed session.
9575		Cursor now focuses on legal Gender after a new client is created.
9627	72773, 71065	An additional check for a matching Event ID and a disabled Save button while checking for duplicates was added to prevent two Services being created from the same Event.
9773		Corrected the header row on the Client Payment Allocation report to just pull the first value of client payment instead of summing.
9815	73105, 73248	Fixed an issue where a divide by zero error could occur if an individual bundled service definition was edited prior to the job being finalized, preventing the job from finalizing.
9816		Save and New Service button on Service Entry no longer requires two clicks to save and open a new service.
9825		An additional check was added during the client payments posting process before the PostToGL flag is updated to 'Y'.
9902		Reprocessed transactions now finalize even when errors cause no new charges to be created in the job.