

ShareCare Version 8.11.00 is now available!

INTRODUCTION

ShareCare Version 8.11.0 contains enhancements, bugs and county specific customizations, including the Utilization Control (UC) module.

SAAS CUSTOMERS

Echo support will contact you to determine the best time to install this version.

SELF-HOSTED CUSTOMERS

Do not install this version until 8.10.0 has been installed.

IT IS HIGHLY RECOMMENDED THAT YOU PERFORM AND VERIFY A FULL DATABASE BACKUP PRIOR TO INSTALLING ANY UPGRADES, ENSURING THAT YOUR DATABASE CAN BE RESTORED IF NEEDED.

Please note that users will be unable to access ShareCare while the version is being installed.

If you have any questions about this process or about items requiring administration, please contact Echo Technical Support at (510) 238-2727 or e-mail Support@echoman.com.

ENHANCEMENTS IN THIS RELEASE

Ticket #	Description
SC-13	Change Batch Bill Print screen lookup of Payer Plan to allow multi select
SC-31	Add CIN field to search screen on MMEF
SC-34	Fix Consumer Service import that allows NULL in external ID column
SC-45	Enhancement in Admission Screen to create Initial UC record
SC-46	Enhancement in Discharge Screen to expire FPA & SA
SC-47	Create UC Maintenance Screen
SC-53	Create Global Options for the UC module
SC-54	Create new tables for UC module
SC-55	Add UC Maintenance Tab/Flags
SC-56	Add ability to Edit UC Records for Extension
SC-57	Add ability to Renew a UC record

SC-58	Change 837 file generation to allow for multiple payers in one file for a single trading partner
SC-59	Update default values for CC pre-consumer integration
SC-60	Marital Status does not display correctly on Clinical Summary Screen
SC-61	Consumer Service import rejects services by provider terminated after the service date
SC-66	Billable claim created for held provider
SC-67	Group UC module global variables in new grouping
SC-71	Birth first name reports missing after CalOMS is signed
SC-73	Integration Issue uses consumer service id instead of external id
SC-75	837 is not taking the payer plan name with the payer plan ID from payer plan when trading partner agreement is blank
SC-77	Batch Eligibility Import will not add/update MCO-only consumer
SC-80	UC New Auth Trig setting admission_date to Auth Begin not current date

UTILIZATION CONTROL (UC) MODULE

The **Utilization Control (UC) module** is a customized module which helps users to create and manage service authorizations associated with Consumer Plans (Treatment Plans). When this module is activated, participating services will not be billed unless an authorization has been created

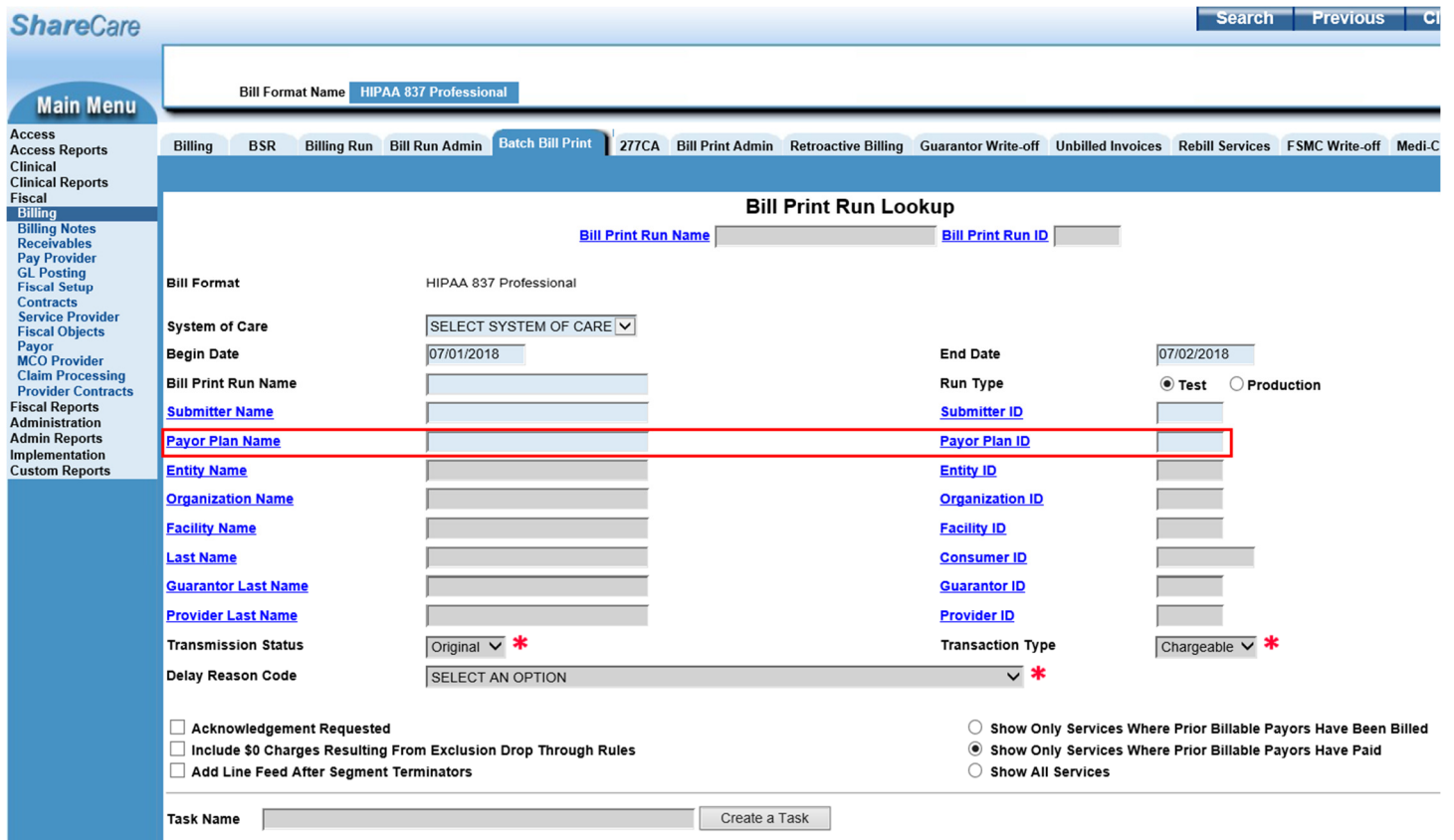
Key features in this development:

- The Admission screen will auto-create the initial facility/program authorization for the consumer.
- The Discharge screen expires the authorization.
- The New UC screen enables the user to perform the following functions:
 - look up UC records by Consumer ID or UC ID;
 - update Consumer Plan dates, which in turn updates the authorization;
 - edit or delete individual Facility/Program authorizations;
 - update other information such as Coordinator Name or Leading Facility/Program flag;
 - renew annual UC cycle for all active authorizations;
 - report to show UC records due for review.

*****The UC Module can only be activated by Echo staff.*****

Ticket # SC-58: Change 837 file generation to allow for multiple payers in one file for a single trading partner

New functionality in ShareCare 8.11.0 allows the generation of one HIPAA 837 Professional file for multiple Payor Plans. When creating a new Batch Bill Print, select the Bill Format HIPAA 837 Professional. As you enter parameters on the next screen, when you click on 'Payor Plan Name' or 'Payor Plan ID', you will be presented with a list of Payors in your database whose Bill Format Type has been set to 'HIPAA 837 Professional' (under Fiscal > Payor > Payor Plan > Bill Format field).



ShareCare Search Previous C

Bill Format Name: **HIPAA 837 Professional**

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Billing | BSR | Billing Run | Bill Run Admin | **Batch Bill Print** | 277CA | Bill Print Admin | Retroactive Billing | Guarantor Write-off | Unbilled Invoices | Rebill Services | FSMC Write-off | Medi-C

Bill Print Run Lookup

Bill Print Run Name: Bill Print Run ID:

Bill Format: HIPAA 837 Professional

System of Care:

Begin Date: End Date:

Bill Print Run Name: Run Type: Test Production

Submitter Name: Submitter ID:

Payor Plan Name: Payor Plan ID:

Entity Name: Entity ID:

Organization Name: Organization ID:

Facility Name: Facility ID:

Last Name: Consumer ID:

Guarantor Last Name: Guarantor ID:

Provider Last Name: Provider ID:

Transmission Status: * Transaction Type: *

Delay Reason Code: *

Acknowledgement Requested Show Only Services Where Prior Billable Payors Have Been Billed

Include \$0 Charges Resulting From Exclusion Drop Through Rules Show Only Services Where Prior Billable Payors Have Paid

Add Line Feed After Segment Terminators Show All Services

Task Name:

Bill Format Name: **HIPAA 837 Professional**

[Billing](#)
[BSR](#)
[Billing Run](#)
[Bill Run Admin](#)
[Batch Bill Print](#)
[277CA](#)
[Bill Print Admin](#)
[Retroactive Billing](#)
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[Unbilled Invoices](#)
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Payor Plan List

Payor Plan ID	Payor Plan Name	Check All
10222	Payor Plan 122	<input type="checkbox"/>
10221	Payor Plan 121	<input type="checkbox"/>
10220	Payor Plan 120	<input type="checkbox"/>
10219	Payor Plan 119	<input type="checkbox"/>
10218	Payor Plan 118	<input type="checkbox"/>
10217	Payor Plan 117	<input type="checkbox"/>
10216	Payor Plan 116	<input type="checkbox"/>
10215	Payor Plan 115	<input type="checkbox"/>
10214	Payor Plan 114	<input type="checkbox"/>
10213	Payor Plan 113	<input type="checkbox"/>
10212	Payor Plan 112	<input type="checkbox"/>
10211	Payor Plan 111	<input type="checkbox"/>
10210	Payor Plan 110	<input type="checkbox"/>
10209	Payor Plan 109	<input type="checkbox"/>
10208	Payor Plan 108	<input type="checkbox"/>
10207	Payor Plan 107	<input type="checkbox"/>
10206	Payor Plan 106	<input type="checkbox"/>
10205	Payor Plan 105	<input type="checkbox"/>
10204	Payor Plan 104	<input type="checkbox"/>
10203	Payor Plan 103	<input type="checkbox"/>
10202	Payor Plan 102	<input type="checkbox"/>
10201	Payor Plan 101	<input type="checkbox"/>
10200	Payor Plan 100	<input type="checkbox"/>
10199	Payor Plan 99	<input type="checkbox"/>
10198	Payor Plan 98	<input type="checkbox"/>

You can 'Check All' Payors, or select the Payors that you wish to generate a claim file for. Please note that this will create one HIPAA 837 Professional claim containing claims for multiple Payor Plans.