



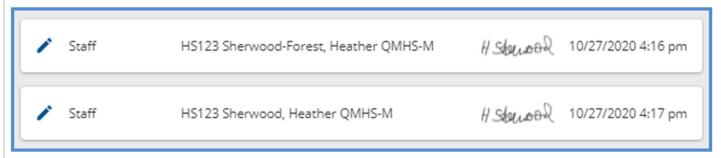
ECHOVANTAGE RELEASE NOTES

VERSION 3.18

NEW FEATURES

Signature Preservation

A name field, *SignerName*, was added to the dbo. Signatures table to capture the current name at the time of signing, allowing the name to be preserved with the signature and displayed correctly in the future should a name change occur.



Patient Responsibility and Client Balance

Now when a Patient Responsibility amount is entered in Remittance Entry, even in cases where a Copay exists, that amount becomes the Client Balance overriding the existing copay for that Service. If a Self Pay charge does exist, adjustments (positive or negative) are created to make the Client Balance the same as the Patient Responsibility amount. The image on the left shows the initial Claims Detail for a charge with a Client Copay. On the right, the same detail displays after a \$0.00 *Payer Payment* was entered with a \$50.00 Patient Responsibility amount. Note the \$40.00 *Fee Adj* to adjust the Payer's balance to \$0.00, and the \$40.00 *Charge Increasing Credit* to adjust the Client's balance to \$50.00.

Date	Amount	Reason
10/04/2020	\$ 50.00	CHARGE CREATE
10/04/2020	\$ 10.00	COPAY ADJ
Balance:	\$ 40.00	
Total Balance:	\$ 40.00	
SELF		
Date	Amount	Reason
10/04/2020	\$ 10.00	CHARGE CREATE
Balance:	\$ 10.00	
Total Balance:	\$ 10.00	

CC		
Date	Amount	Reason
10/04/2020	\$ 50.00	CHARGE CREATED
10/04/2020	\$ 10.00	COPAY ADJ
10/08/2020	\$ 0.00	PAYER PAYMENT
10/08/2020	\$ 40.00	FEE ADJ
Total Balance:	\$ 0.00	
SELF		
Date	Amount	Reason
10/04/2020	\$ 10.00	CHARGE CREATED
10/04/2020	-\$ 40.00	CHARGE INCREASING CREDIT
Balance:	\$ 50.00	
Total Balance:	\$ 50.00	—



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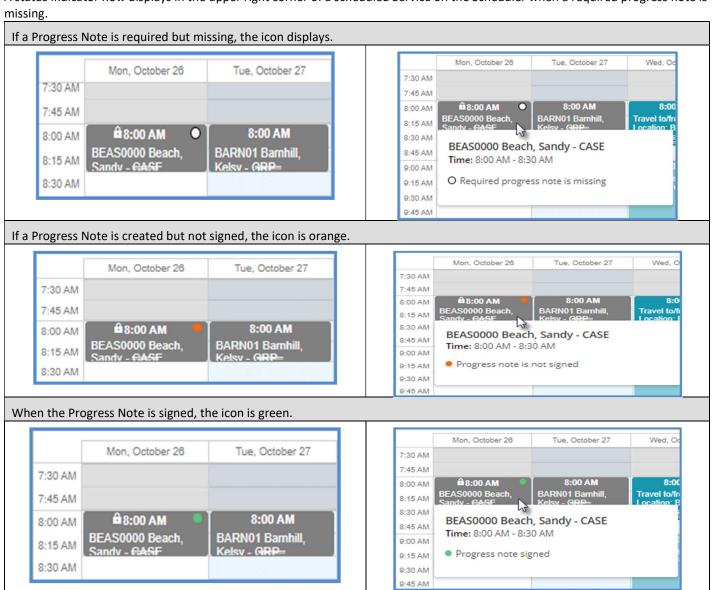
Client Programs on Diagnosis Cards

A Client's enrolled Programs can now be viewed at a glance in the Clients > Diagnosis screen. If an Enrollment or Program is selected in the Diagnosis details, it displays beneath the diagnosis on the card. If an overlapping Enrollment and Program are selected, that Program is only listed once on the card.



Progress Note Status on the Scheduler

A status indicator now displays in the upper right corner of a scheduled Service on the Scheduler when a required progress note is

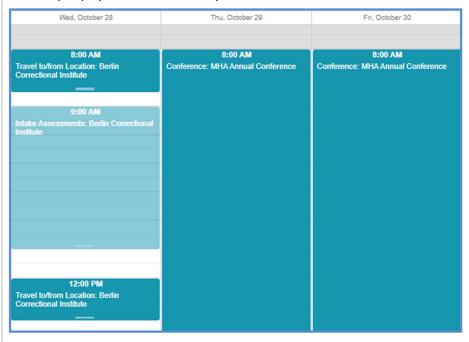


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Staff Time Events on the Scheduler

The Reason and short description, if entered, now display on Staff Time Events when viewing the Scheduler. Previously these were only displayed on the Event entry screen.

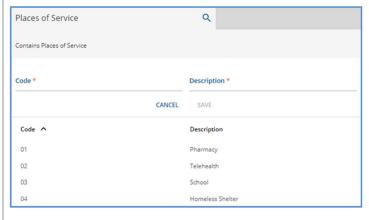


Credential Display Order

In Configuration>Staff/Users>Staff>Credentials, there is now a Signature Order box that allows an agency to specify the order in which a Staff's credentials display with their signature. This numeric field is not required, but the Staff's top three credentials are saved with their signature in the order specified if completed. Credentials that have no value specified in Signature Order are ordered alphabetically. If the Staff has some credentials with and without a Signature Order assigned, credentials without an order display last.

Places of Service Defined List

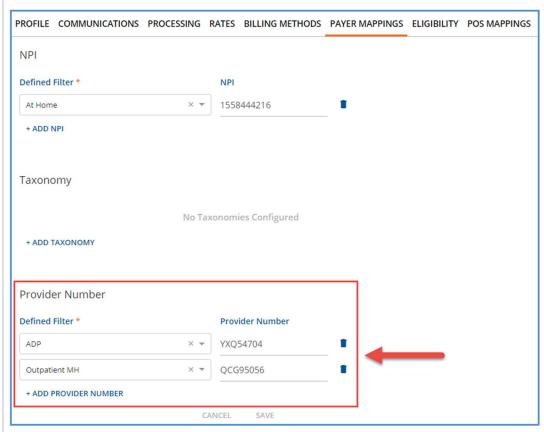
In Configuration > Setup > Defined Lists, there is a new Defined List for Places of Service codes. Previously these Places of Service codes were stored in code and not accessible. Now an agency user with User Group access to the Defined Lists configuration can maintain these codes and add new ones as needed. The update process populates the new Defined List with the existing codes and descriptions.





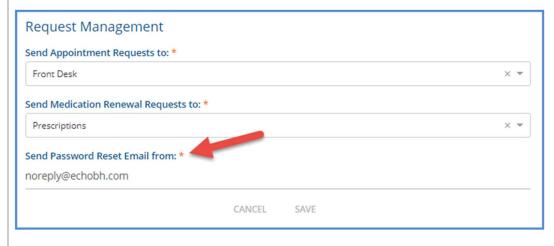
Payer Mappings

In *Configuration>Payers/Services>Payers*, the *NPI & TAXONOMY* tab introduced in version 3.17 is now titled *PAYER MAPPINGS*. On this tab, agencies can now map Payer-specific Provider numbers by Defined Filter for reporting in the 837 in Loop 2010BB, REF*G2.



Password Reset for Client Portal

The email address used to send password reset emails for the Client Portal is now a required field in *Configuration > Setup > Client Portal* and is stored in the EmailFromAddress column of the dbo.ConfigClientPortal table. Previously this email address was stored in the Redirector database.

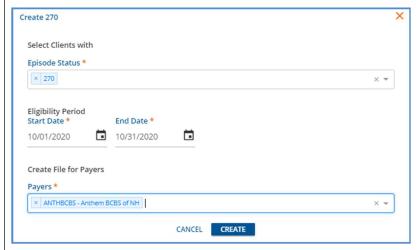




IMPROVEMENTS

Eligibility Period Dates

The behavior of the Eligibility Start and End Date fields is updated to also determine the limits for the reported Episode Values.

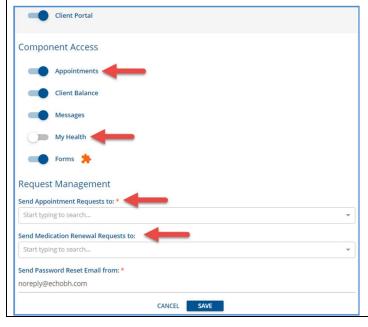


If a Client has an Episode with a matching status that was open any time during the entered period, a request is generated. The values reported in the DTP segment now do not exceed the date range entered. Assuming the 270 Request above is created and the following Clients have the matching 270 Episode Status:

Client	Episode Start Date	Episode End Date	Reports As:
Α	10/03/2020	NULL	DTP*291*RD8*20201003-20201031~
В	09/28/2020	10/05/2020	DTP*291*RD8*20201001-20201005~
С	07/04/2020	NULL	DTP*291*RD8*20201001-20201031~

Client Portal Configuration

In Configuration>Setup>Client Portal, a Group Mailbox selection in the "Send Appointment Requests to" and "Send Medication Renewal Requests to" fields are only required when their associated component, Appointments or My Health respectively, are enabled. When the components are disabled, the orange asterisk to indicate the field is required is no longer present.



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Unapplied Payments

A change was made to the date used when processing Unapplied Payments. Now the Transaction Date of the Parent Remittance is used when an Unapplied Payment is processed against a charge. Previously, the date the Unapplied Payment was processed was used for the Transaction date.

State Acorns

Updates were made to the processing service, oak, to check for held services when the Acorn does not return a bundle. As a result, the Wi and RI Acorns were updated to not create a bundle when the root Service is placed on hold. The following versions will be reflected in the AcornRegistrations table once updated:

- RI Bundling Customization, 1.0.8. RELEASE
- RI 837P Customization, 1.0.8. RELEASE
- WI Bundling Customization, 1.0.35.RELEASE
- WI 837P Customization, 1.0.35.RELEASE

A constraint was added to the dbo.FormsWIthLocations table, which in rare circumstances contains duplicates. A duplicate check and clean-up script were added to the existing State Reporting Acorns to address potential issues proactively.

- MOTS Status File. 1.0.50.RELEASE
- MOTS Service File, 1.0.14.RELEASE
- BHOLD, 1.0.58.RELEASE*

The PA Custom Bundling Acorn was updated to not require Charge Strategies for the four custom bundles. The following version will be reflected in the AcornRegistrations table once updated, PA Bundling Customization, 1.0.7.RELEASE.

UPDATES

Ticket #	Description
10805	Client Portal now has aria labels.
11069	Visual indicators for inactive client diagnoses were improved.
11131	Long alert names no longer cause horizontal scroll bars

BUG FIXES

Ticket #	Case #	Description
10827		Unbilled Charges > History - Payer filter now works.
10892		Reprocessing History User Filter now works.
10972		The unapplied payments job no longer leaves services with a BATCHED status.
10978		Unapplied Payments are no longer created when a payment other than "Payer Payment" is processed with a Loss transaction.
11064		Amendment Request History now points to the proper table name.
11106	74773	Address in client header now respects start/end dates.
11124		Unprocessed Services tooltip now displays the intended message.
11207		Signature Date/Time Stamp now uses Time Zone setting from the default organization.
11212		Template Events that have had a Template Note entered and then deleted can now be deleted also.
11219		Client Balance now updates when there is a Charge Increasing Credit applied to Self Pay.
11224		Charge Increasing Credits are not displaying in GL Audit Report. Resolved with changes to the Patient Responsibility and Client Balance referenced above.

^{*}Additional updates were made to the RI State Reporting Acorn query to accommodate Customer requested table changes.