ECHOVANTAGE RELEASE NOTES

VERSION 3.25

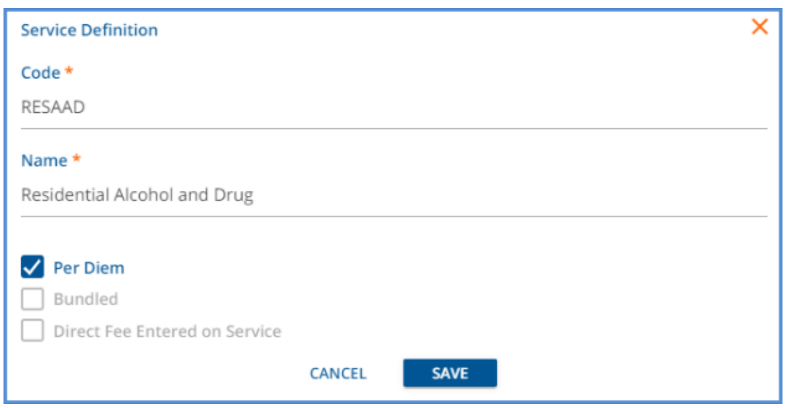
NEW FEATURES

Introducing Per Diem Services

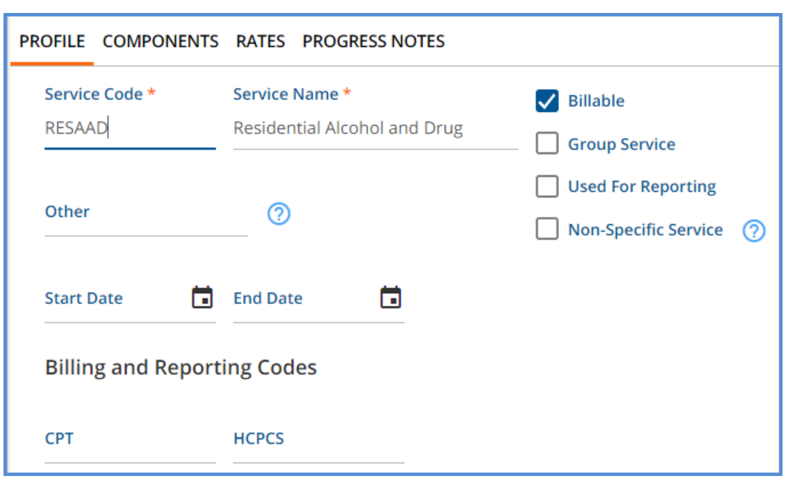
The new Per Diem Services feature allows billing of Date Range Services using an agency-created Template. These Date Range Services do not have a calculated unit but instead pull units directly from the number of days in the Service date range. Access to Per Diem Template management and Service creation is found on the Services screen by hovering over the blue plus "+." The previous Per Diem action was renamed *Census Billing* to reflect its function more accurately. An overview for creating Per Diem Services is below, followed by detailed information for each step.

Create Per Diem Service Definitions

Create a Per Diem Service Definition in *Configuration > Services/Payers > Service Definitions.* The component combination on the Per Diem Service must match a Per Diem Service Definition.

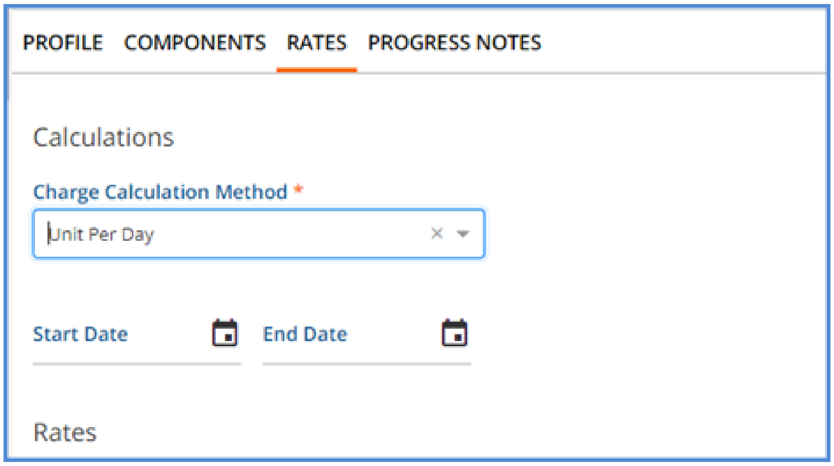


- Only *Code* and *Name* are required when adding a Per Diem Service Definition.
- The checkbox selections are mutually exclusive -- If *Per Diem* is selected, then *Bundled* and *Direct Fee Entered on Service* are disabled.



- The Profile screen does not have the Add On checkbox, Service Duration inputs, or Bundling Options.

- Component combinations do not have to be unique between Per Diem Service Definition and other types of Service Definitions because Per Diem Service Definitions are only valid for Per Diem Services.
- The Component Combinations that define a Per Diem Service Definition must be unique from other Per Diem Service Definitions.

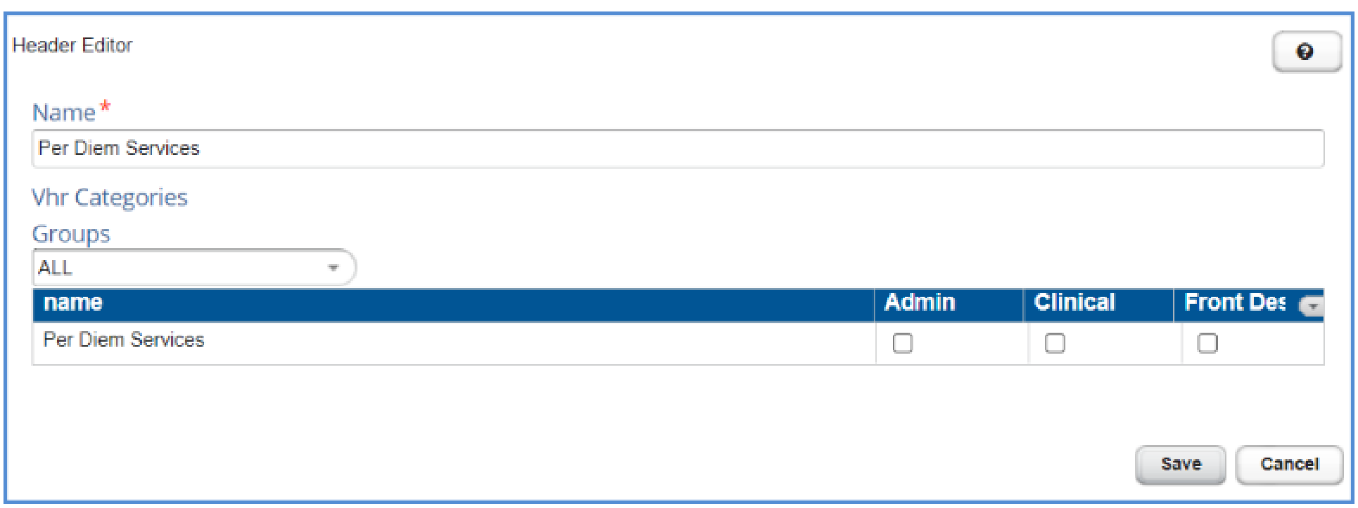


- The Charge Calculation Method drop-down only has two values on the Rates screen, Not billable to most payers and Unit Per Day.
- Because the Per Diem Service does not have a calculated unit but pulls the units from the numbers of days in the Service date range, the Unit Calculation inputs, Minimum Units, and Maximum Units are not needed or displayed.
- Payer-specific rates may also be defined in *Configuration > Services/Payers > Payers > Rates* for Per Diem Service Definitions.

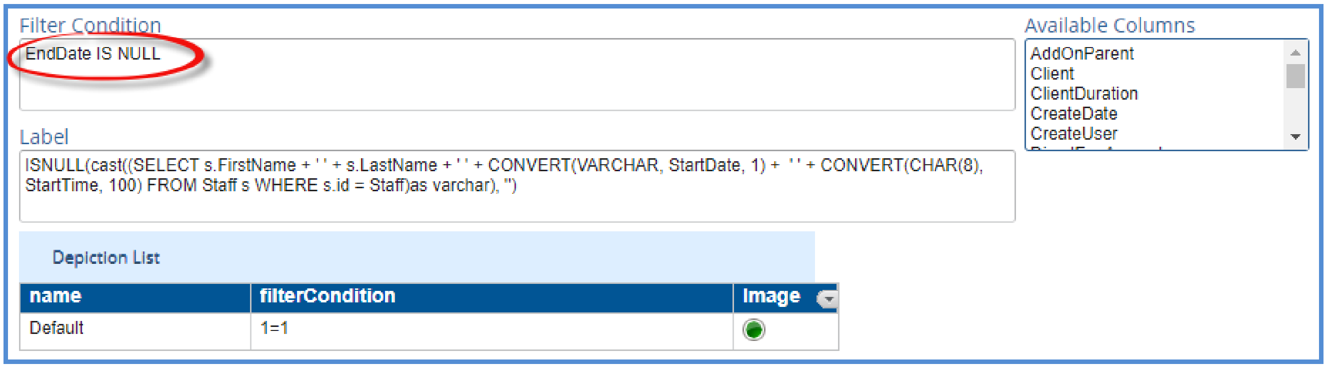
Configure Timeline Depiction

A default timeline depiction is added for Per Diem Services to separate them from regular Services. The depiction is under the Per Diem Services header in *Configuration > Client Chart > VHR Timeline > Category Depiction Manager.*

No groups are assigned this depiction by default, so User Group access must be assigned in the Header Editor. Open the Header Editor by selecting the Per Diem Services Header.



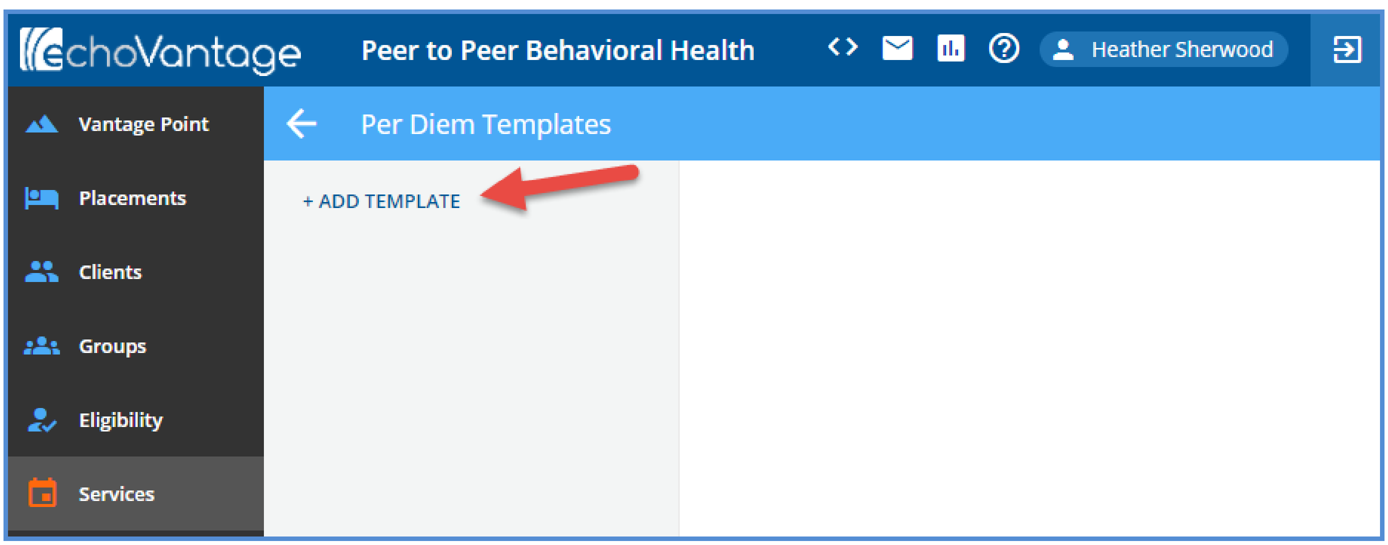
Any regular Service Categories should also be updated so that Per Diem Services are excluded from those depictions by filtering to Services where EndDate IS NULL.



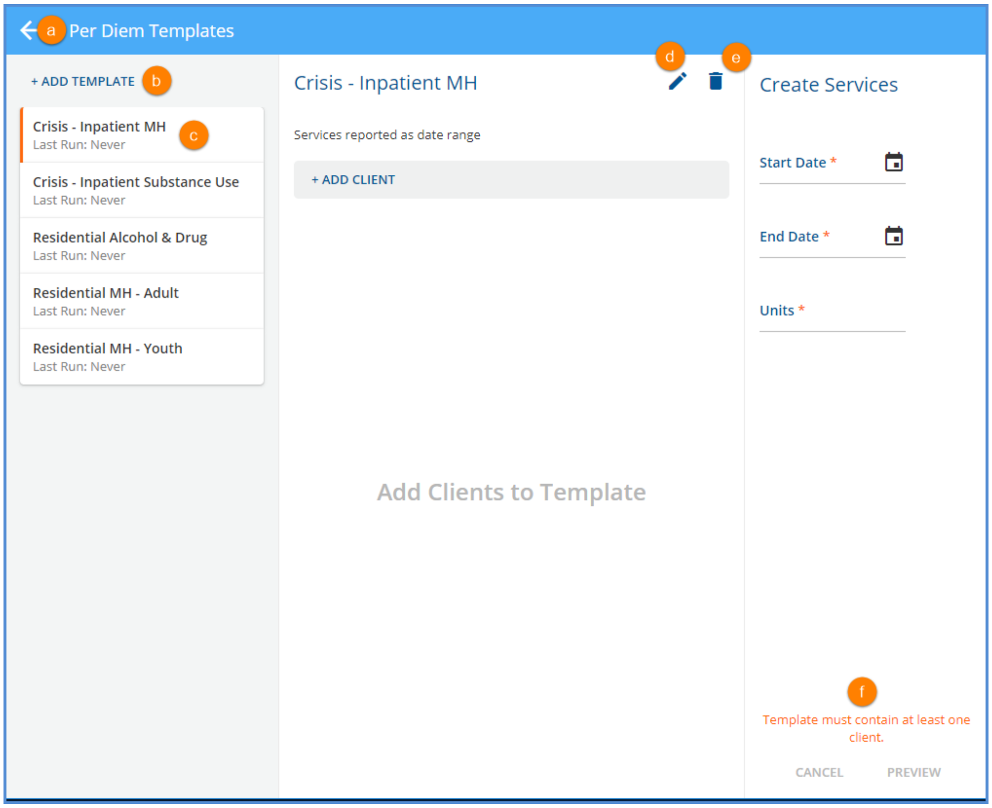
Add Per Diem Templates

Per Diem Templates are added and managed in the Per Diem screen, accessed via the Per Diem button on the Services home screen. Navigate to the *Services* main menu option and hover over the blue plus "+" to display the Per Diem and Census Billing buttons.

Select the *PER DIEM* button to display the Per Diem Templates screen.



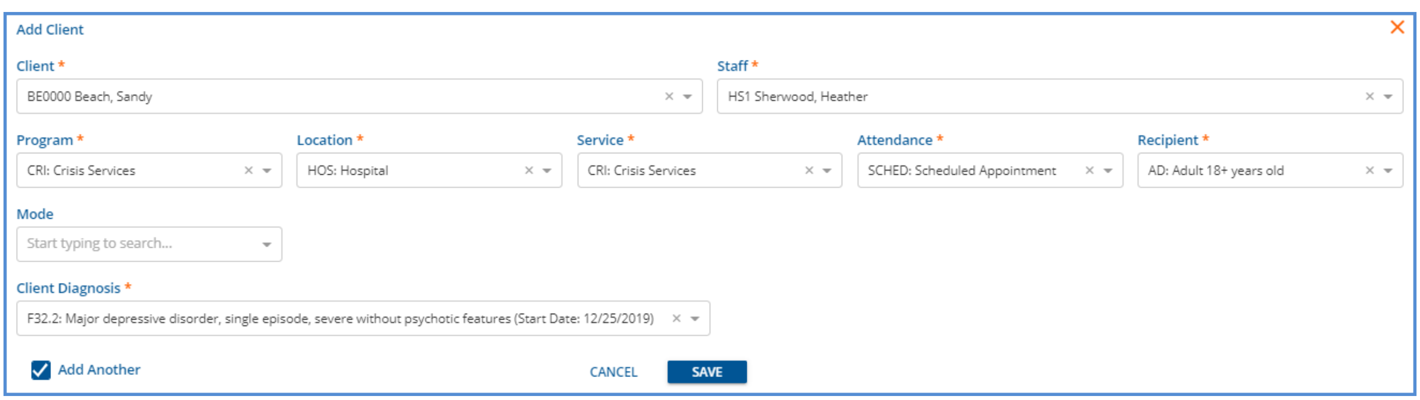
Then select the blue *+ ADD TEMPLATE* button, enter a Template Name, and select *SAVE* to add a Per Diem Template. Currently, for all Per Diem Templates created, Services are reported as a Date Range.



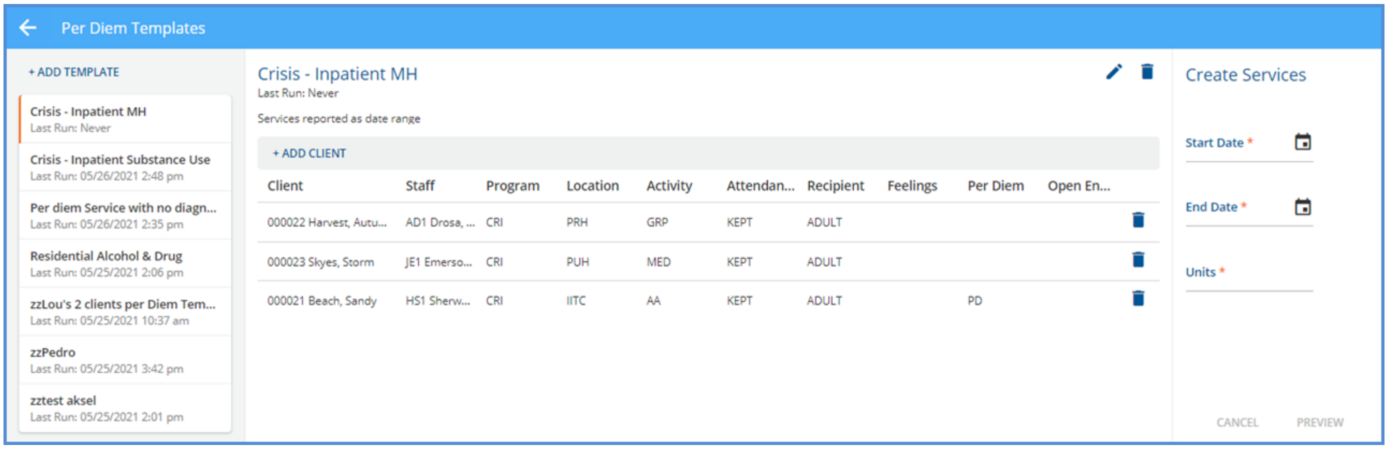
- (a) Use the blue *+ ADD TEMPLATE* button again to create another Template. As Templates are added, they are added to the left-hand list and displayed in alphabetical order.
- (b) Select the left arrow in the upper left-hand corner to return to the Services screen.
- (c) The orange vertical bar indicates the currently selected Template.
- (d) Select the blue pencil icon to edit the name of the currently selected Template.
- (e) Select the blue trash can icon to delete the currently selected Template. Templates may be deleted at any time, either with or without Clients added.
- (f) A message displays indicating that the "*Template must contain at least one client.*" Templates must have Clients added before the Create Services *CANCEL* and *Preview* options are enabled.

Add Clients to the Per Diem Template(s)

Once a Template is created, Clients may be added by selecting the blue *+ ADD CLIENT* button.



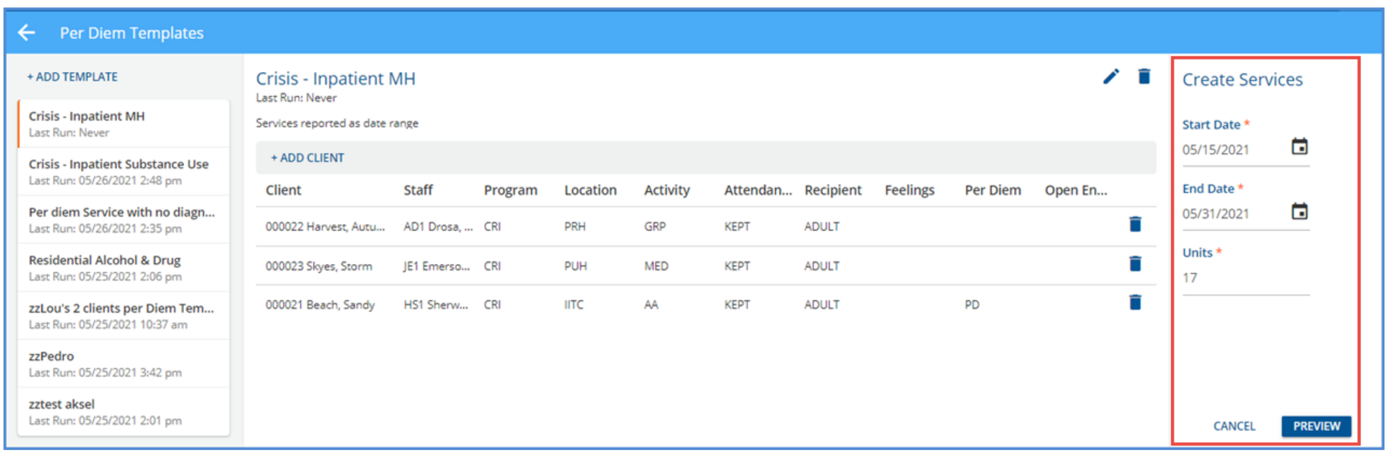
- The *Add Client* screen requires the Client and Staff fields, all required PLAAR components, and a Client Diagnosis.
- The Diagnosis Start and End Dates, if present, are displayed in the drop-down list value.
- Select the *Add Another* box to preserve the Staff and component selections if adding more than one Client.
- Clients are not required to have the same component values.
- Note that the check for a valid Per Diem Service Definition does not take place until Service Preview.



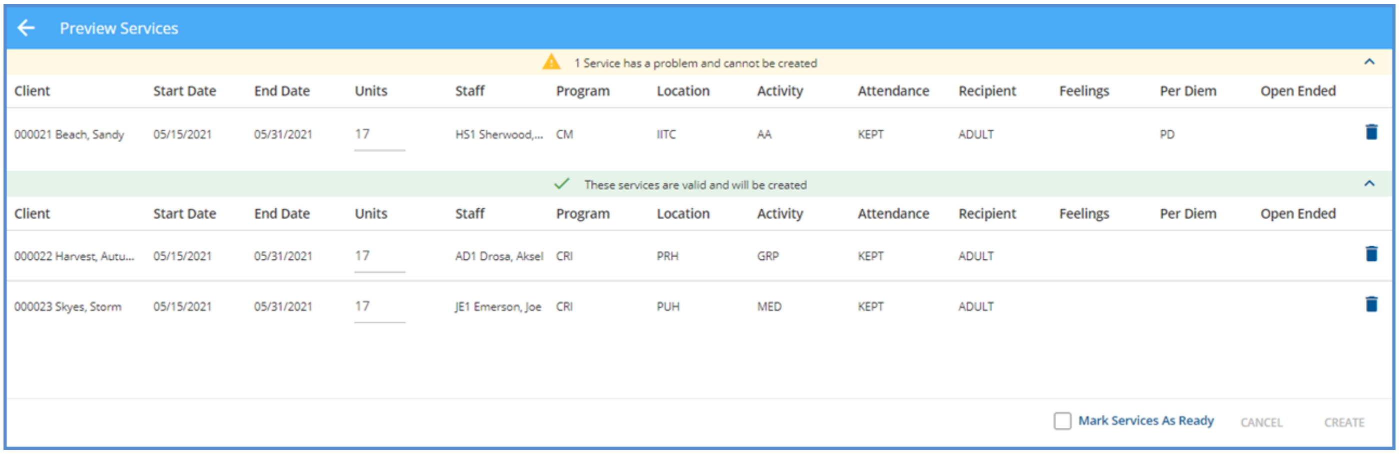
- The client list is populated as Clients are added.
- Summary information (Client, Staff, and Component selections) is displayed.
- Select any row to edit that Client's information.
- Select the delete icon (blue trash can) to remove the Client from the template.
- The *Last Run* information is updated when Services are Created.

Preview and Create Services

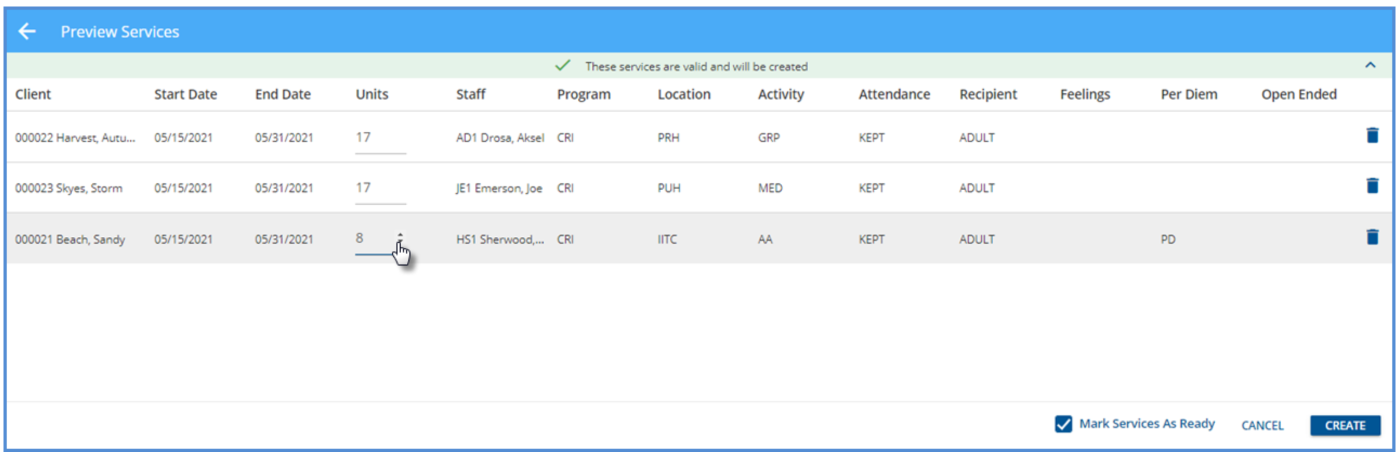
After Templates are created and Clients are added, Services may be Previewed and Created for the selected Template.



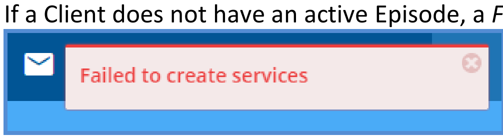
- Enter values for Start Date, End Date, and Units. Note that the application auto-populates the third field if any two fields have values.
- Services may not be billed for more than 31 days (Units) at one time. The following on-screen warnings display
  - *End date beyond 31 days of start date.*
  - *Units must be less than or equal to 31.*
- Once the Date Range and Units are complete, the *PREVIEW* button is enabled. Select to display the Preview Services screen.



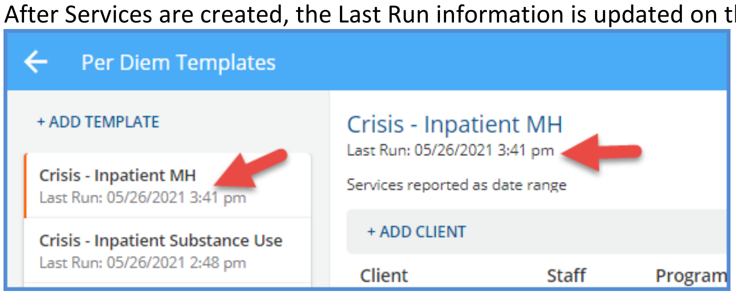
- The Services Preview displays in two groups - Services with problems and Services that pass the Validations.
- The validations on the Preview Services screen checks that the component combination matches on a Per Diem Service Definition.
- Use the left arrow next to *Preview Services* to return the Per Diem Templates screen.
- Use the delete icon (blue trash can) to remove a record from the Preview Services display. *Delete removes the preview record only; the Client is still in the Template Client list.*



- Click on the Units field to adjust the number of Services for that Client. The final number may not be less than one or greater than the number of days in the specified Date Range.
- All Services must pass validation before the *CREATE* button is enabled.
- Select the *Mark Services As Ready* checkbox to Create Services with a *Ready* status.
- Select the blue *CREATE* button to create the Services.
- If a Client does not have an active Episode, a *Failed to create services* error message displays.

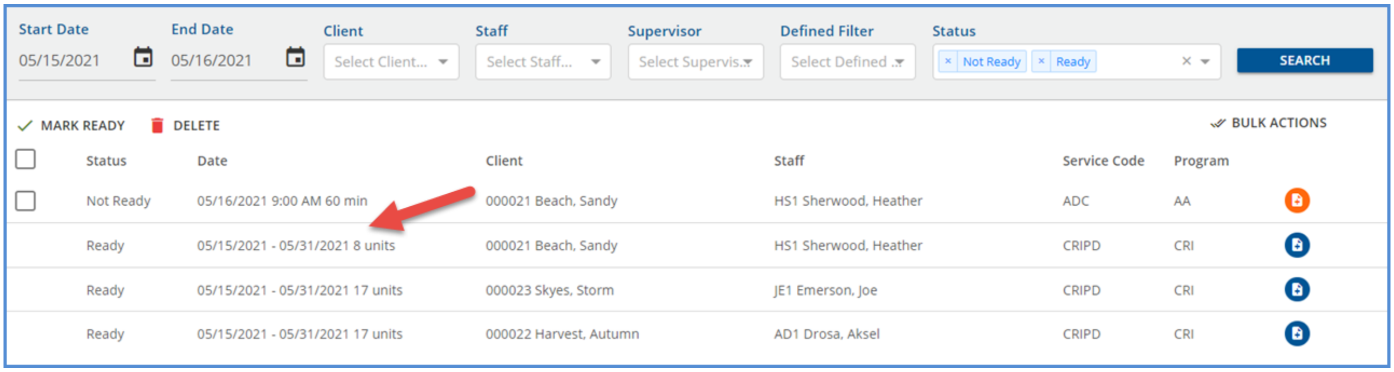


- After Services are created, the Last Run information is updated on the Template Card and Template.



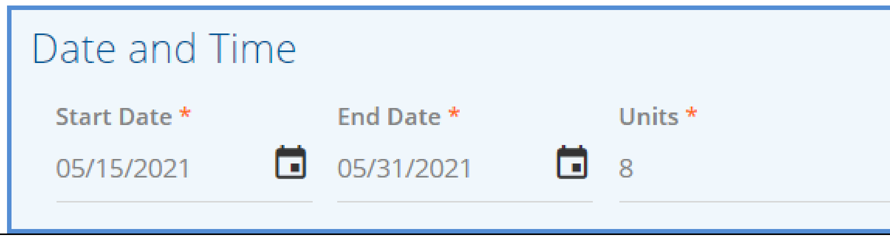
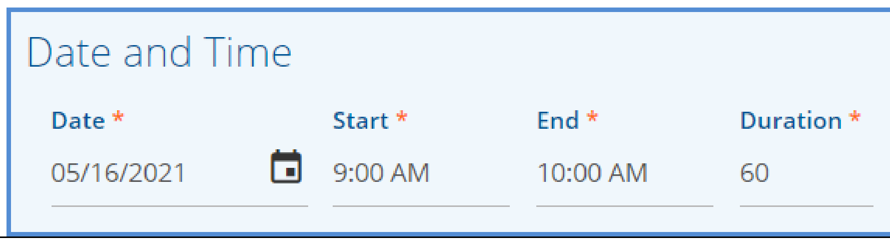
Viewing Per Diem Services

Once Per Diem Services are created, they are available for viewing and editing in the Services screen. The Date field is expanded to show the Start Date, End Date, and Units.



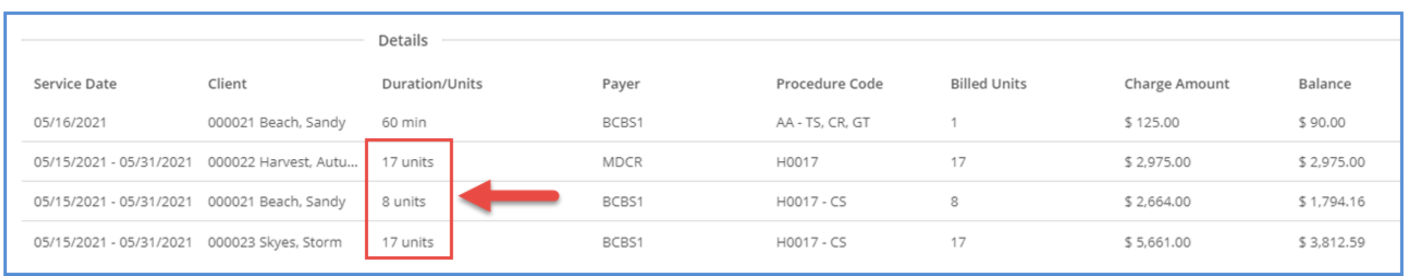
Status	Date	Client	Staff	Service Code	Program
Not Ready	05/16/2021 9:00 AM 60 min	000021 Beach, Sandy	HS1 Sherwood, Heather	ADC	AA
Ready	05/15/2021 - 05/31/2021 8 units	000021 Beach, Sandy	HS1 Sherwood, Heather	CRIPD	CRI
Ready	05/15/2021 - 05/31/2021 17 units	000023 Skyes, Storm	JE1 Emerson, Joe	CRIPD	CRI
Ready	05/15/2021 - 05/31/2021 17 units	000022 Harvest, Autumn	AD1 Drosa, Aksel	CRIPD	CRI

On the individual Service screen, the *Date and Time* section only displays Start Date, End Date, and Units instead of Date, Start (time), End (time), and Duration.

Per Diem Service	
Service by Duration	

Per Diem Services in Fiscal Overview

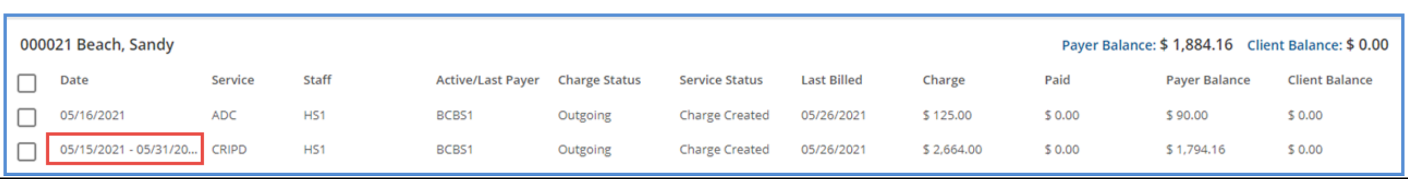
Per Diem Services follow the same workflow for Charge and Bill creation through the Remittance process as Services by Duration. When viewing the job Details on the *Unprocessed Services > Create Charges > History* screen, the **Duration/Units** column displays the billing units for Per Diem Service definitions.



Details

Service Date	Client	Duration/Units	Payer	Procedure Code	Billed Units	Charge Amount	Balance
05/16/2021	000021 Beach, Sandy	60 min	BCBS1	AA - TS, CR, GT	1	$ 125.00	$ 90.00
05/15/2021 - 05/31/2021	000022 Harvest, Autu...	17 units	MDCR	H0017	17	$ 2,975.00	$ 2,975.00
05/15/2021 - 05/31/2021	000021 Beach, Sandy	8 units	BCBS1	H0017 - CS	8	$ 2,664.00	$ 1,794.16
05/15/2021 - 05/31/2021	000023 Skyes, Storm	17 units	BCBS1	H0017 - CS	17	$ 5,661.00	$ 3,812.59

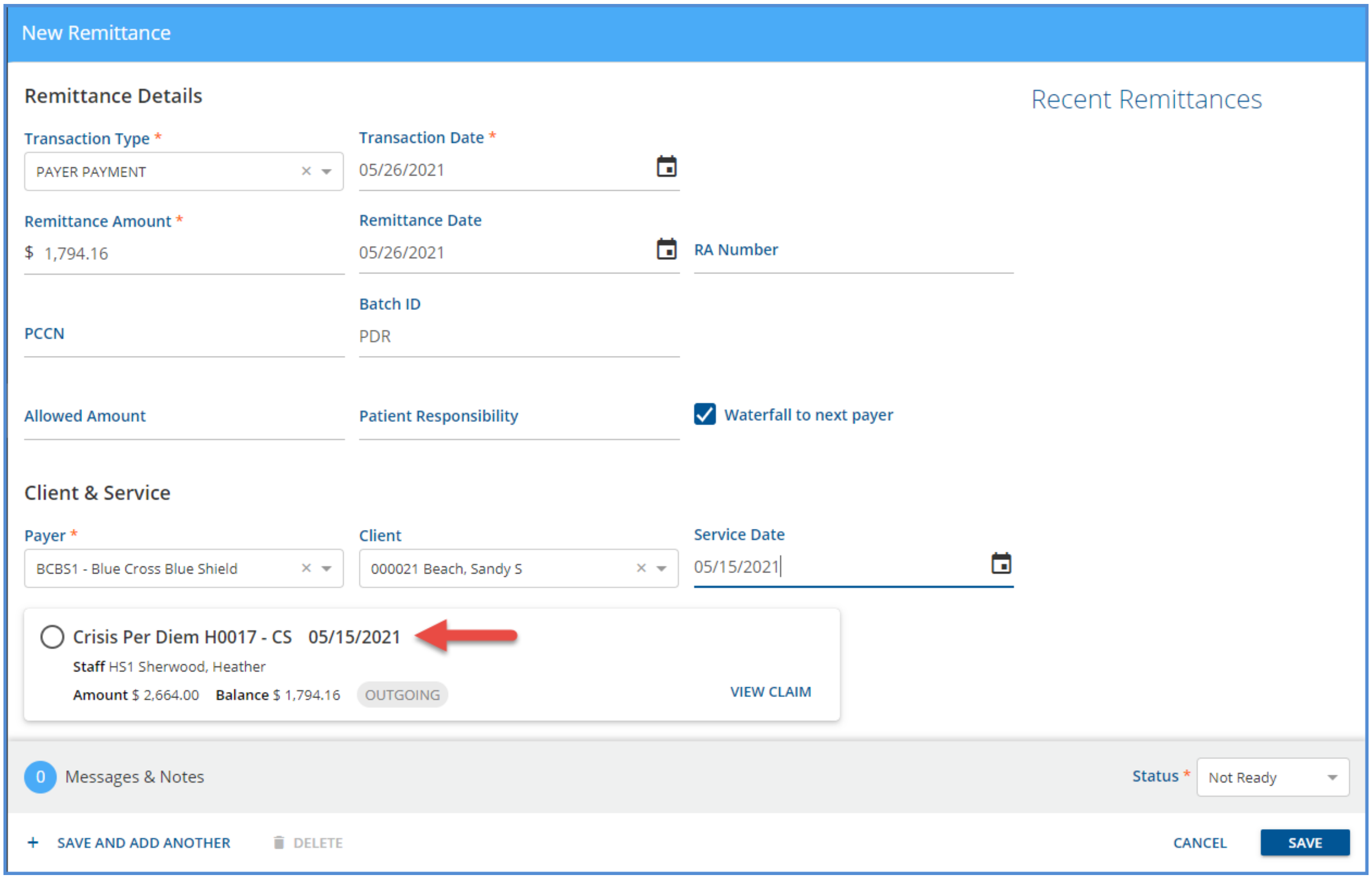
The Service Date (or Date) field was expanded to show the Date Range for Per Diem Services on the Create Bills, Claims, and Unapplied Payments screens. An example of the Claims screen for Client Sandy Beach is below.



000021 Beach, Sandy — Payer Balance: $ 1,884.16 Client Balance: $ 0.00

Date	Service	Staff	Active/Last Payer	Charge Status	Service Status	Last Billed	Charge	Paid	Payer Balance	Client Balance
05/16/2021	ADC	HS1	BCBS1	Outgoing	Charge Created	05/26/2021	$ 125.00	$ 0.00	$ 90.00	$ 0.00
05/15/2021 - 05/31/20...	CRIPD	HS1	BCBS1	Outgoing	Charge Created	05/26/2021	$ 2,664.00	$ 0.00	$ 1,794.16	$ 0.00

In Remittances, however, the Start Date of a Per Diem Service is used for the Service Date when processing payments and adjustments. A remittance for the Per Diem Service above, outlined in red, is shown in the image below.



Future Improvements

Future Improvements are coming to the 837I Report. The report will include the End Date and actual admission time for Per Diem Services.

Preparing for the Future Chartless Clients Release

In preparation for the new Chartless Clients feature, Client Types will be introduced in a future release. Please note that this addition will require all forms and reports to be updated. Echo will provide views to make this transition easier.

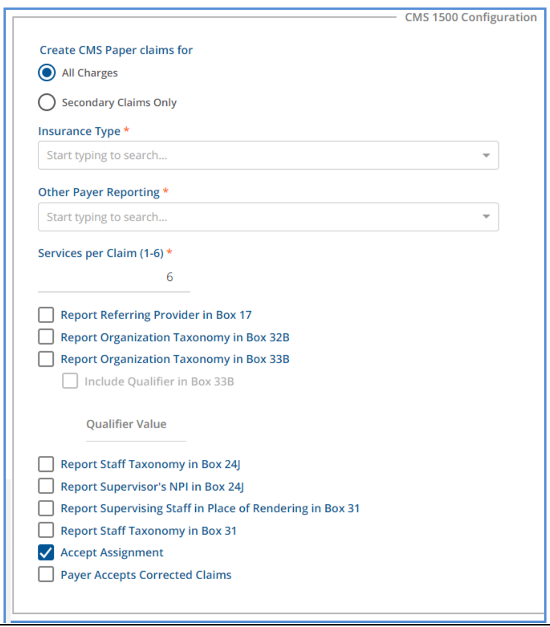
Also note that once the Chartless Client feature is released, enabling the *Create chartless client* permission will add Client Type values to the *Clients* table. Forms and reports that have not been updated will include both types of Clients unless a change is made to filter to a specific type.

IMPROVEMENTS

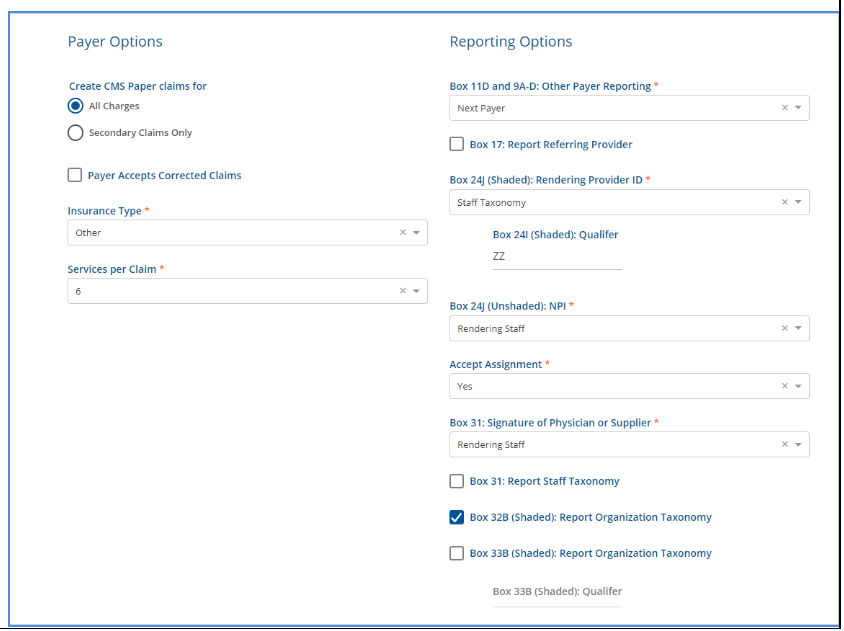
CMS 1500 Changes

The CMS 1500 Configuration screen now has a new layout with some new configuration options. The screen is divided into *Payer Options* and *Reporting Options* columns, drop-down lists replace some user-entered data fields, and the Reporting Options are now ordered by Box number. A brief description of the changes are listed beneath the sample image below.

Before



After



- Services per Claim now has a drop-down list with values of 1-6 for selection.
- Box11D and 9A-D: Other Payer Reporting has selection values of *Next Payer* or *Prior Payer.*
  - The following is reported for the Payer currently being billed.
    - Box 11: Client Payer Policy Number
    - Box 11a: Subscriber's date of birth and Male or Female checkbox selected
    - Box 11c: Client Payer Policy Name
    - Box 11d: The checkbox has an X if there is a Client Payer with a higher priority
  - The following is reported based on the selection of either *Next Payer* or *Prior Payer.*
    - Box 9a: Next or Prior Payer's Client Payer Policy Number
    - Box 9d: Next or Prior Client Payer's Name
- Configuration for Box 24J was split between Shaded and Unshaded, and configuration for Box 24I was added.
  - Box 24J(Shaded): Rendering Provider ID – *Organization Provider Number* was added to the drop-down list.
    - When selected, the value that matches the Defined Filter in *Configuration > Services/Payers > Payers > Payer Mappings > Provider Numbers* is reported.
    - If nothing matches, it is left blank.
  - Box 24I (Shaded) Qualifier – When entered and a value is reported in Box 24J(Shaded), the entered Qualifier is reported. If the Staff Taxonomy option is selected in Box24J(Shaded), the Qualifier defaults to ZZ but can be overridden.
  - Box 24J(Unshaded): NPI – Added a *Report Nothing* option to the drop-down list. When selected, no NPI information is reported in Box 24J.
- Accept Assignment now has a drop-down list with two values, *Yes* and *No.* The default value is *Yes* and may be changed.
- The "Include Qualifier in Box 33B" checkbox was removed. A value for the Qualifier must be entered for it to report in Box 33B; the default is no value.
- A change was made so that no value is reported, for any reason, in Box 24H

The CMS 1500 billing and configuration reports were also updated to reflect the added reporting information.

Box 24J Examples

In addition, when the Staff person being reported has a different NPI than another Staff on the Claim, the Services for the separate Staff are no reported on a different claim form. The following scenarios outline what is reported for a Client with Services from Rendering Staff 1 and Rendering Staff 2 ready to bill.

Scenario 1 • Box 24J NPI (Unshaded) is set to Rendering Staff. • Staff 1 and Staff 2 have different NPIs. • Result: There are two (2) claim forms.	**Scenario 2** • Box 24J NPI (Unshaded) is set to Supervising Staff. • Staff 1 and Staff 2 do not have NPIs, but the same Supervising Staff is on both services. • Box 31 has Supervising Staff selected. • The Supervisor has an NPI. • Result: There is one (1) claim form.
Scenario 3 • Box 24J NPI (Unshaded) is set to Supervising Staff. • Staff 1 and Staff 2 have different NPIs, and each service has a different Supervising Staff. • Both Supervisors have an NPI. • Result: There are two (2) claim forms.	**Scenario 4** • Box 24J NPI (Unshaded) is set to Report Nothing. Result: Services are reported on the same page regardless of the Service Staff.

Claim Details Performance Improvements

Performance Improvement work within the application was focused on the *Claim Details* modal, which opens from the *Claims Management* screen when a record is selected. The changes resulted in a much fast loading time. For Clients with many reprocessed Claims and many Payers, the *Claims Detail* modal loaded 16 times faster than it did before the improvements.

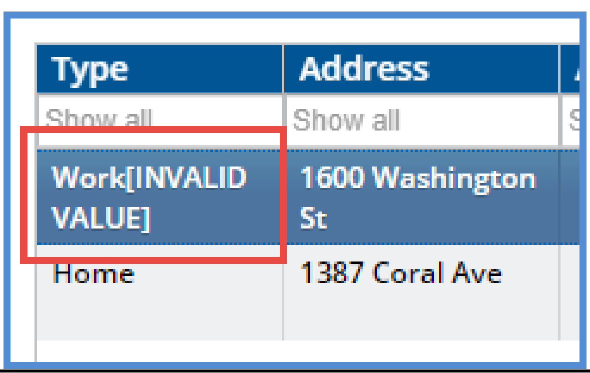
Procedure and Staff Modifiers

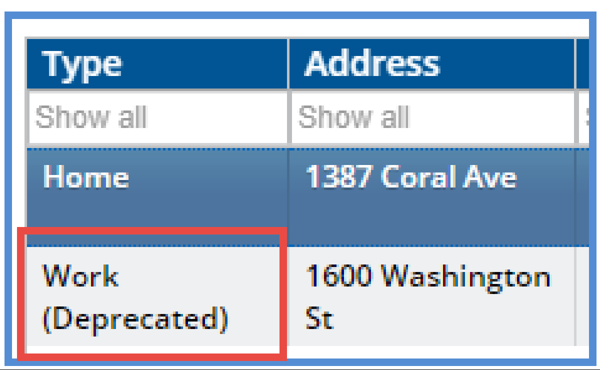
Validations were added to the *Rates* screens in Service Definitions, and Payer Overrides to prevent adding or changing a Procedure or Staff Modifier position to zero '0.' (A Modifier with a position results in a billing job failure.)

Note that the same position number cannot be used in both a Procedure Modifier and a Staff Modifier, but the same position may be repeated within the modifier type. For example, the Staff Modifier may have multiple position 2 modifiers, but the Procedure Modifier for that same Service Definition/Payer Override may not have anything pointing to position 2.

Expired User Type Validation Entries in Form DesignEHR

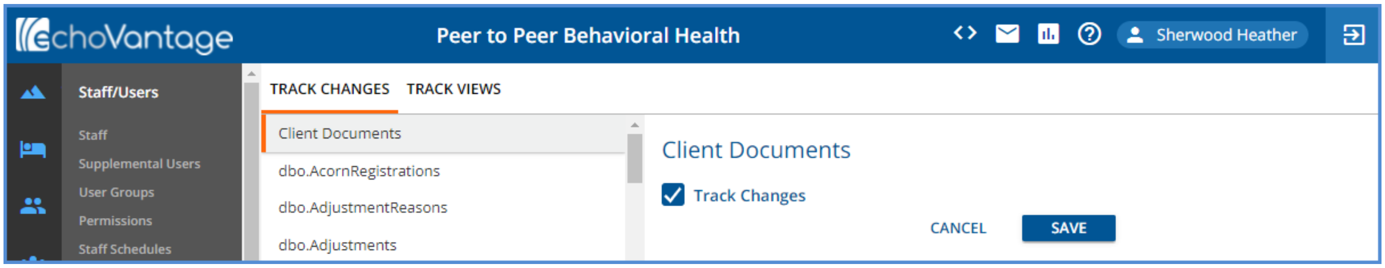
Support was added to display expired User Type Validations entries like when the "Validation Description SQL" property is set for Table Driven Validations. Because the User Type Validation uses the same table for its validation entries, the functionality was built into Form DesignEHR and does not require setting a property manually. Now when a value is expired, the value description with the word "deprecated" is displayed. Previously only *[INVALID VALUE]* was displayed.





Auditing of Client Documents

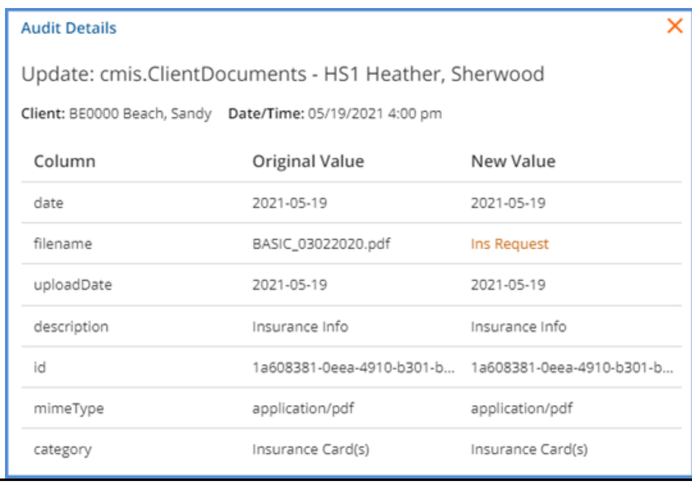
Updates were made to allow auditing of *View/Insert/Delete* actions on Client Documents. A Client Documents option, disabled by default, is no available on the *Track Changes* tab of the Audit Configuration screen in *Configuration > Setup > Audit.*

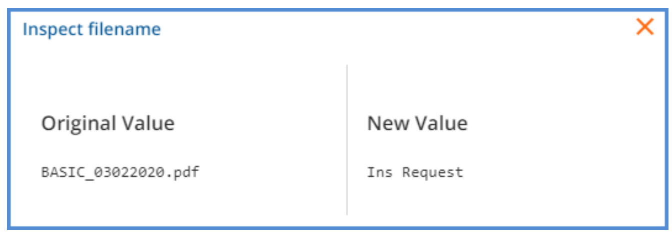


When "Track Changes" is enabled for the Client Documents option, the View/Insert/Delete events are stored in the Audit system. In the *Audit Search* screen, these audit events are linked to the Client and user.

Type	Item	Client	Staff	User	Date/Time
Insert	cmis.ClientDocuments	BE0000 Beach, Sandy	HS1 Heather, Sherwood	heather.sherwood	05/19/2021 11:59 am
View	Client Document	BE0000 Beach, Sandy	HS1 Heather, Sherwood	heather.sherwood	05/19/2021 11:58 am
Insert	cmis.ClientDocuments	BE0000 Beach, Sandy	HS1 Heather, Sherwood	heather.sherwood	05/19/2021 11:58 am
Delete	cmis.ClientDocuments	BE0000 Beach, Sandy	HS1 Heather, Sherwood	heather.sherwood	05/19/2021 11:58 am
View	Client Document	BE0000 Beach, Sandy	HS1 Heather, Sherwood	heather.sherwood	05/19/2021 11:58 am

View the Audit Details of the Add/Insert/Delete actions by selecting a row. View previous values by clicking on the orange text.





State Billing Acorns

The following new or updated State Billing Acorns are available with this release of EchoVantage.

- NC-DSS Custom Billing
- NSCC Custom Billing
- WI Custom Billing

Updates to ensure future changes made to a single Billing Acorn do not require re-releasing any other Acorns were made to all billing Acorns. Each Acorn's functionality remains the same, but the following Acorns were split and require additional configuration once installed. The Charge Customization and Service Processing values must be selected in the Acorn drop-down list in *Configuration > Services/Payers > Payers > Processing.*

- NH Billing Acorn
- OH BH Redesign Acorn
- PA Custom Billing Acorn

Click HERE for the Acorn Release Notes page of the Echo Online Help site.

REPORTS

Updated and New Reports

The following Reports were updated to display the Service Definition Bundle name instead of the name for the Detail Service. Any additional changes are noted for the relevant report.

Billing Reports

_837Audit

_837IAudit

_CMS1500 – Updated to include new reporting information as outlined in the Improvements section. **Customized versions of this report may need to be updated as well.**

Fiscal Reports

Aging Report by Payer.rdl

Aging Report by Program.rdl

_Aging Report for Export.rdl

Aging Detail By Payer.rdl

Aging Detail By Program.rdl

_Aging Detail For Export.rdl

Cash Receipts Journal.rdl – Relabeled the “Show Voids” column to “Show Voided Client Payments.”

_Cash Receipts Journal for Export.rdl

Claims Report.rdl

_Claims Report for Export.rdl

Outstanding Charges.rdl

_Outstanding Charges for Export.rdl

Remittance report.rdl – Removed the “Show Voids” option and now only list Remittances attached to non-voided Charges.

_Remittance Report for Export.rdl

Service detail With Charges.rdl

_Service Detail With Charges for Export.rdl

Service Detail With Charges By Client.rdl

_Service Detail With Charges By Client for Export.rdl

Service Detail With Charges By Staff.rdl

_Service Detail With Charges By Staff for Export.rdl

Service Detail by Defined Filter.rdl

_Service Detail by Defined Filter For Export.rdl

UPDATES

Ticket #	Description
EV-140	Reports referencing the name of a Service were updated to display the name of the Bundled Service instead of the Detail Service.

EV-287	The bundle indicator on the Claims Management screen was updated to include the count of all Services within all bundles. Some custom billing requires daily or weekly bundles to be rolled up into weekly or monthly bundles. These bundled bundles were not being included in the count on the Claims Management screen.
EV-651	The Bundled Service Name is now displayed for a bundled Charge on the *Create* tab of *Fiscal Overview > Unbilled Charges,* and on the *Claims Management* and *Claims Detail* screens. Previously, the name of one of the bundled Services was displayed.

BUG FIXES

Ticket #	Case #	Description
EV-203	77091, 78381	A bug was fixed where an additional toast message for a *Charge not added to job* was being returned in error during the Create Bills process in *Fiscal Overview > Unbilled Charges > Create.* Now when Create Bills jobs are created, the number of successfully created charges and the charges not added to the job equal the total number of records included in the job.
EV-400		The Claims list was sometimes displaying incorrect data after running a *Reverse Service Transactions* reprocessing job. Now when this Action is selected, and the job is finalized, • The Active/Last Payer displays a dash. • The Charge Status displays *Reversed.* • The Charges amount displays a dash.
EV-430		An issue was addressed where the *Create Charges* process was not respecting the Staff credential End Date when using the Credentialed Rate defined in the Service Definitions/Payers Rates. Now the Staff credential used for determining the rate must be active for the Service date, end date is inclusive. All inactive credentials are filtered out before selecting the credential with the highest rate to create the Charge.
EV-439		A check was added so that unfinalized reprocessed Claims are no longer included in the Unposted GL transactions. In addition, the Post to GL job now fails if an unfinalized item is included in the job.
EV-489		Previously applied Unapplied Payments were considered when determining if an Unapplied Payment is an Overpayment, Takeback, or Other type. A legitimate Takeback type Unapplied Payment was classified as an Other type in certain situations and could not be applied. Now Unapplied Payments with a Status of *DONE* are NOT considered when determining the type.
EV-508		An issue was reported where Takeback remittances were not getting reprocessed, only the Overpayment Remittance. Now, if a claim is reprocessed, there are two remittances created with a Status of *Reprocessed,* one for the Overpayment AND one for the Takeback.
EV-520		Fixed an issue where FDnext tables were listed multiple times on the Audit configuration screen. These now correctly show once.
EV-523		Fixed an issue where reprocessing marked Copy remittances Void. Now only the original and reversing remittance are marked as Void in the database.
EV-531		The Unapplied Payments summary on the Fiscal Overview screen was updated to show the total count of the number of Unapplied Payments, like Unposted GL Transactions, rather than a dollar amount.
EV-537		Tabbing issues were reported with pop-up forms when accessed from forms configured in the *Forms* main menu option. Now, when a pop-up form is opened, the cursor is positioned in the first field (lowest tab order item) on the form. Previously the tab focus did not shift to the opened pop-up and could only tab in the background out of sight.
EV-609		An issue was addressed where processing a Takeback for a Payer overpaid Charge with a Copay overstated the Payer Payment amount and reversed the Copay adjustment. Now, when applying an Unapplied Payment for a Charge with a Copay, the original Self Pay Charge is not affected and remains open until paid by the Client or manually adjusted to zero.

EV-643	2509	Contractual Adjustments failed to waterfall from one Payer to the next when the charges were bundled for both Payers. The waterfall now works correctly from one bundled Charge to the next Payer's bundled Charge when the *Contractual Adjustments Waterfall to the Next Payer(s)* checkbox is selected for the first Payer in *Configuration > Services/Payers > Payers > Processing.*
EV-649		Form DesignEHR threw an error when adding a record in a Grid using the green plus "+" button. The error only occurred when the form uses a Checkbox with a database column also used in the Grid. Now, new records can be added without the error, even when the same database column is displayed in the Grid and used by a Checkbox.
EV-757		An issue was addressed for Form Unlocking, where all values in the *Unlock Reason* drop-down list were not always viewable. Now all values in the *Unlock Reason* drop-down are visible when unlocking a form.
EV-792		A bug was fixed where opening a Form DesignEHR form that still referenced a deleted User type Validation List resulted in a *Null Pointer Exception* error that crashed EchoVantage. Now when a form referencing a deleted User type Validation List is opened, there is no longer an *NPE* error and no interruption in EV.