ECHOVANTAGE RELEASE NOTES

VERSION 3.32

NEW FEATURES

Client List Filtering Applied to Core Reports

Client List Filters, defined in *Configuration > Staff/Users > Client List Filters,* are now applied to all Client-related Core reports, excluding Billing Reports. For example, a Staff with an Episode type Client List Filter applied now only sees Clients for whom they are listed as Episode Staff when running the *Client List* report. Previously, that Staff person would see a list of *ALL* Clients when the *Client List* report was run.

A new hidden parameter containing the AppUser ID is passed from EchoVantage to the report and is used to filter down the Client list and other related queries. A new view, dbo.VClientFilter_All was added to facilitate these changes.

> ⚠️ Agency created custom reports must be updated for Client List Filters to be applied. Step-by-step instructions for editing custom report *.rdl* files using Report Builder are available at the end of the Release Notes in the *Applying Client List Filters to Custom Reports* section. If a custom report is not updated, Client List Filtering is not applied.

The following core reports were updated to include Client List Filtering.

Administration Reports			
Admissions By Date Range	Clients By Payer	Clients Missing Payer	Enrollment Census Report
Events Missing Services	Schedule Report	Staff Caseload Detail	Staff Caseload Summary
Wait List Report			

The Enrollments Summary Report does not have Client List Filtering applied, while the Enrollment Census Report is filtered. There is potential for these two reports to appear out of sync if a user with a Client List Filter applied has access to both reports.

Client Reports			
Attendance Report	Client List	Client Medications Detail	Client Medications Summary
Clients By Enrollment	Clients Without Appointments	Clients Without Treatment Plans	Medical Face Sheet
PHQ-9 Adolescent Scores Over Time	PHQ-9 Scores Over Time	Progress Note Basic	Services Without Progress Notes
Treatment Plan	Vital Signs Report	_Clients By Enrollment for Export	

| Fiscal Reports			
Aging Detail By Payer	Aging Detail By Program	Aging Report By Payer	AR Status Report for Export
Average Days In AR	Billed vs received	Bundled Services	Cash Receipts Journal
Claims Report	Client Payment Allocation Report	Expiring Authorizations	GL Activity Report
Historical Aging	Outstanding Charges	Payment Detail	Refunds
Remittance Report	Service Authorization Status	Service Detail by Defined Filter	Service Detail With Charges

Service Detail With Charges By Client	Service Detail With Charges By Staff	Service Processing Report	Service Status Report
Unapplied Payments	Unprocessed Services	_Aging Detail For Export	_Aging Report For Export
_Billed vs Received for Export	_Bundled Services for Export	_Cash Receipts Journal for Export	_Claims Report for Export
_Historical Aging Report for Export	_Outstanding Charges for Export	_Payment Detail for Export	_Remittance Report for Export
_Service Authorization Status for Export	_Service Detail by Defined Filter for Export	_Service Detail With Charges for Export	_Service Detail With Charges By Client for Export
_Service Detail With Charges By Staff for Export	_Service Processing Report for Export	_Service Status Report for Export	

Service Definition Management

This release introduces new tools for managing Service Definitions. A copy button is available to the right of the Service Definition search field, which allows users to copy all or selected tabs of an existing Service Definition. This copy feature speeds the creation and entry of Service Definitions, especially those with detailed Charge Calculation structures. An option is also available to copy a Service Definition's Charge Calculation information forward when creating a *New Version of the Charge Calculation*. (A Charge Calculation is the equivalent of a Charge Strategy in the database.) And finally, a *DELETE* option is available when no Charges are associated with the currently selected Charge Calculation. These new tools are covered in more detail below.

Copying Service Definitions

The copy Service Definition icon is to the right of the search in *Configuration > Services/Payers > Service Definitions.*
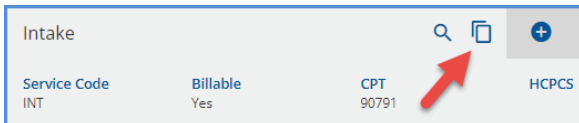
When selected, the copy Service Definition screen displays.

- Entry of a *Code* is required and must be unique.
- *Name* is pre-populated with the value of the selected Service Definition and appended with - *COPY*
- The Service Duration is pre-populated with the values from the copied Service Definition but may be updated.
- *Configuration Data to Copy*
  - Profile data is always selected and copied to the new Service Definition but can be edited after saving.
  - The contents of each selected tab are copied to the new Service Definition.
    - Components
    - Rates – When *Rates* is selected, the buttons next to *All* and *Active* are enabled. Select *All* to copy both active and inactive Charge Calculations or select *Active* to copy the active Charge Calculation only.
    - Progress Notes
- Select *SAVE* to create the copy.

Once *SAVE* is selected, the Service Definition copy is created as a *DRAFT* and is easily identifiable in the Service Definition list.

A yellow banner indicates the copied Service Definition is a draft and remains until the *PUBLISH* or *DISCARD* decision is made. Only published Service Definitions are available in Service Entry. Draft Service Definitions do not affect the duplicate Service Definition check when working in *Events, Per-Diem Services, Service Entry,* or Bundle creation. Click discard to delete the draft, any associated Payer Overrides, and remove the draft from any bundled definitions.

A new column, dbo.ServiceDefinitions.Status was added to differentiate Published Service Definitions from Drafts. Published Service Definitions have a value of *ACTIVE; DRAFT* indicates a draft. Custom reports or forms that reference or match on Service Definitions may need updating to exclude draft Service Definitions.

If an end-dated Service Definition is copied, the new Service Definition is also end-dated after publishing if the dates are not updated.

While the Service Definition is in draft mode, information on any tabs may be updated. When changes are complete, select *PUBLISH* to make the Service Definition available in Service Entry. To maintain consistency, all *NEW* Service Definitions added instead of copied are also created as a draft. This draft status allows the new Service Definitions to be configured over the course of hours or days without affecting the duplicate Service Check or other *Service Entry* configuration settings.

Managing Service Definition Charge Calculations

The Rates tab in *Configuration > Services/Payers > Service Definitions* is restyled with a blue header indicating the displayed information is part of the Service Definition's *Default Rates.* A *NEW VERSION* action is also available where users can choose to add a new Charge Calculation version by copying the currently selected one or creating a new one. The copy feature is a quick way to accommodate a rate change without the need to reenter Procedure or Staff Modifiers.

When *Copy Selected Charge Calculation* is selected in *NEW VERSION*, all *RATES* tab information is copied from the selected Charge Calculation, including Calculations, Rates (Base and any Credentialed), Billing Codes, and Modifiers. The Start Date is populated with the copied Charge Calculation's End Date plus one day, and the End Date is left blank. This copy or new version functionality replaces the blue *VIEW CHARGE CALCULATIONS* button on the bottom left-hand side of the Service Definition Rates screen in prior versions.

On the copied version, a darker blue banner displays *New Charge Calculation* to indicate the displayed Charge Calculation is not a saved default rate. Note in the image below that the *Start Date* is 12/18/2021, which is one day after the *End Date* of the copied Charge Calculation displayed in the previous image. Enter any required updates to Calculations, Rates, or Billing Code sections, then select *SAVE* to record the new Charge Calculation.

When a Service Definition has multiple Charge Calculations, these display in a *Versions* drop-down list. There is an important distinction to note regarding the *Start Date.* The Start Date is not required when there is only a single, Default version of the Service Definition Charge Calculation. However, when a new version is created, the *Start Date* field is marked as required (orange asterisk '*') once the new version is saved. This is not new behavior as *Start Date* has always been essential in defining the active date range of each Charge Calculation version. The best practice is to populate the Start Date field, always.

When copying a Charge Calculation, the selected version must always have an End Date. It can be active (end-dated in the future) or inactive (end-date on or before the current day). If the selected Service Definition does not have an End Date, the following message displays.
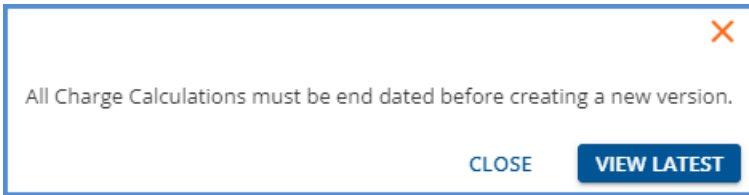
- Select *CLOSE* to exit the modal and return to the selected Service Definition.
- Select *VIEW LATEST* to exit the modal and view the most recent Charge Calculation. If there are existing future-dated Charge Calculations, this action does not return you to the active Charge Calculation.

If a future-dated Charge Calculation is viewed, a yellow banner with the following message displays *"This Charge Calculation is for a future period."*
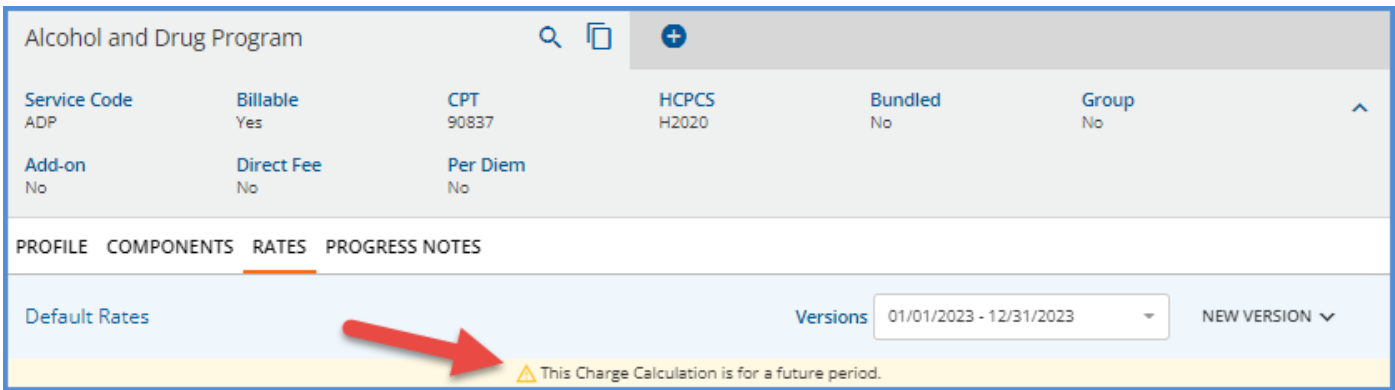
Deleting a Service Definition Charge Calculation

A new *DELETE* option is available on the *Service Definitions > Rates* tab. Delete is enabled when the currently selected Charge Calculation is not associated with any Charges.
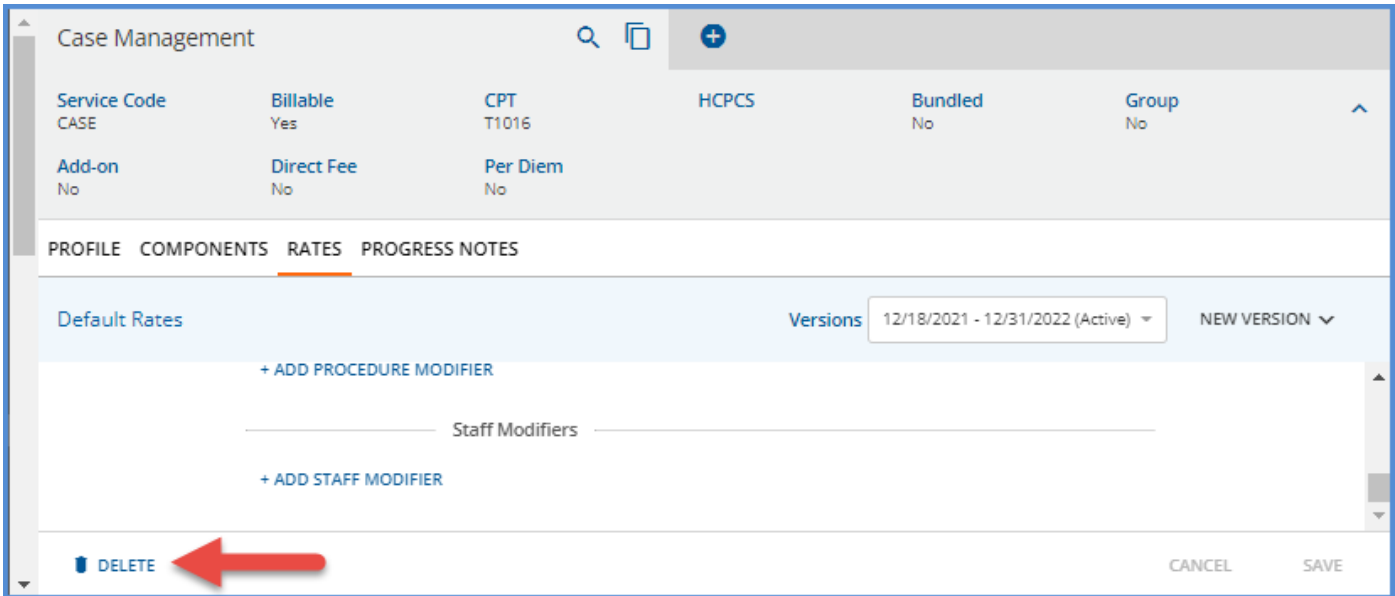
When a Charge Calculation is deleted, the Rates tab displays the next most recently added Charge Calculation. If there are no further Charge Calculations, the *No Rates* page is displayed.

If there are Charges associated with the Charge Calculation, the *DELETE* button is disabled, and a help message containing an explanation is available by clicking on the blue question mark.
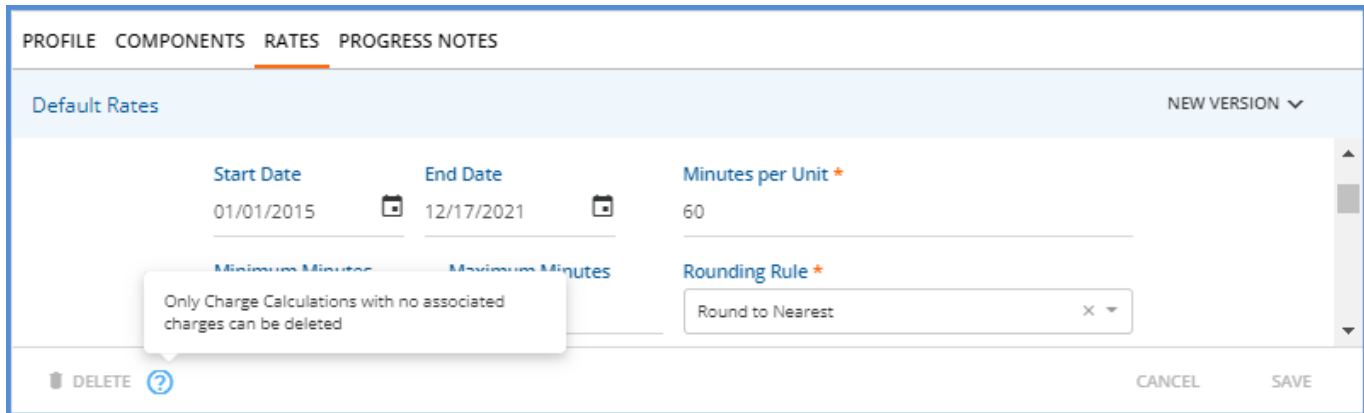
If the user is in the process of creating a new or copying a Charge Calculation, the *DELETE* button is also disabled, and the Help button is not visible.
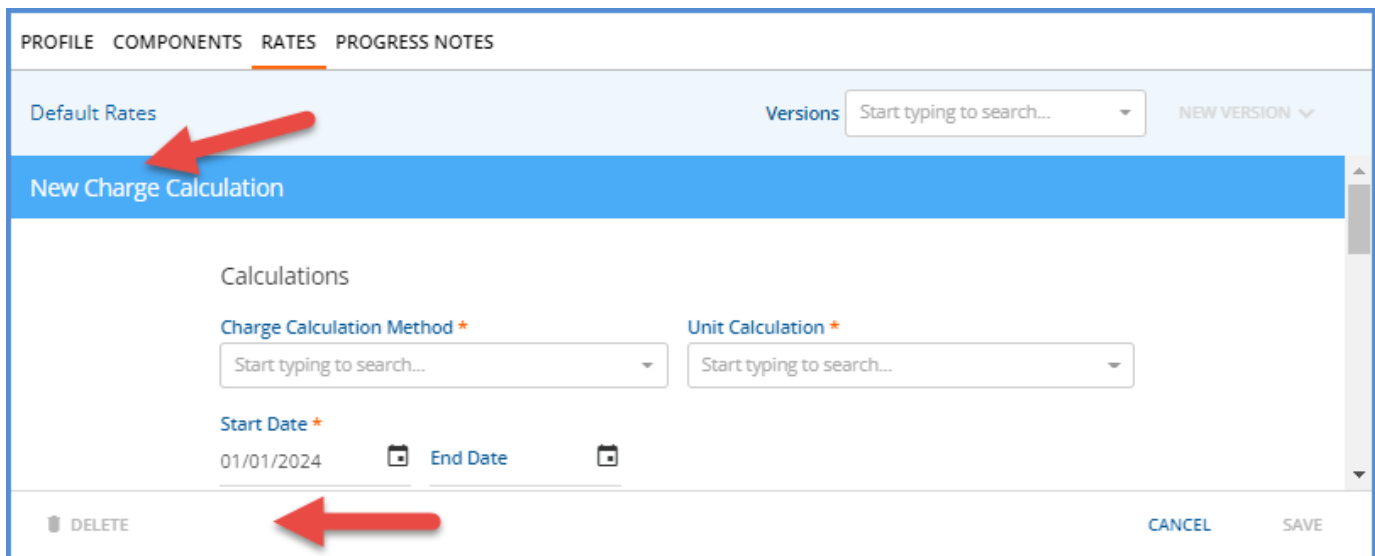

Managing Payer Charge Calculations

Additional tools for managing a Payer's Charge Calculations in *Configuration > Services/Payers > Payers > Rates* were also added. The Rates tab was restyled. A blue header displays the name of the selected Service Definition and the *OVERRIDE SERVICE DEFINITION DEFAULT* button. Like the Service Definitions Rates tab, historical and future Payer Charge Calculations may be selected from a *VERSIONS* drop-down list for viewing. An option to *DELETE* unused Charge Calculations is also included.

When the override default button is selected, the Payers Rates screen becomes editable, and Payer-specific rate and calculation information for the chosen Service Definition can be updated, just as before.
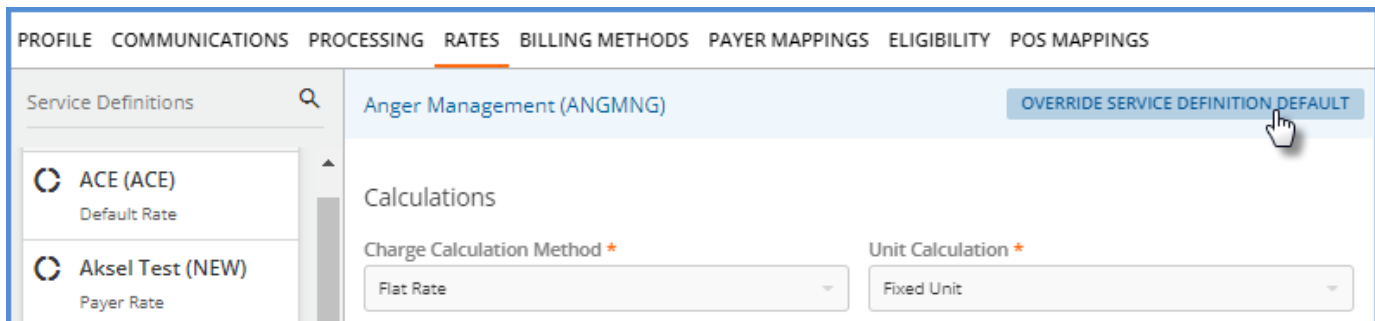
Once a Payer Override is created, the override button is replaced with a *NEW VERSION* option like that found on the Service Definition Rates tab.
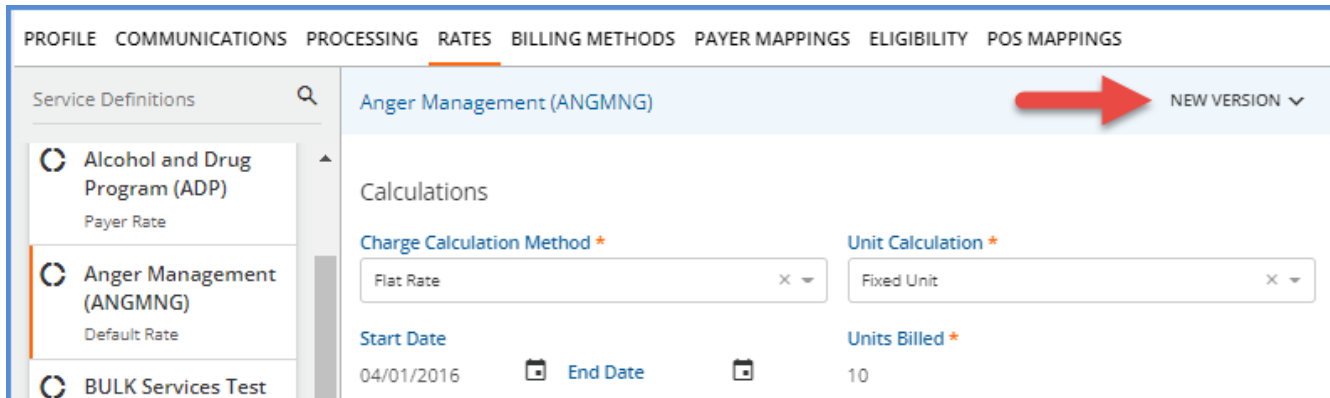
Choose *Copy Selected Charge Calculation* to copy the Rates tab information forward for the current Payer. The selected Charge Calculation must have an End Date for the copy function to be successful as the new Charge Calculation is created with a Start Date that is one day after the copied calculation's End Date. Choose *New Charge Calculation* to create a new Rates tab information without copying any existing values forward.
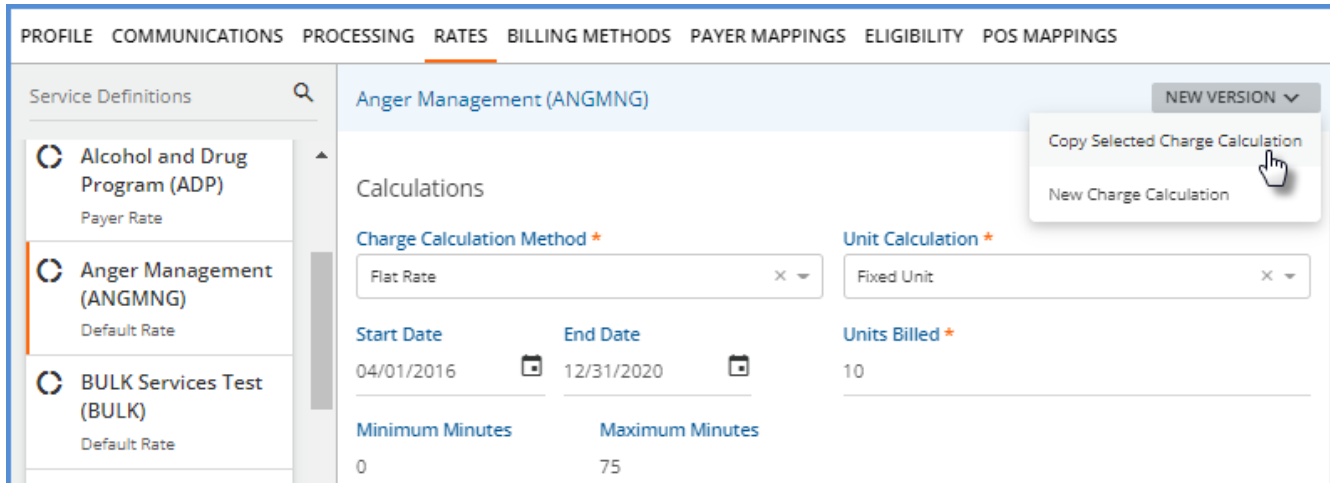
When copied, a blue banner indicates that the *New Charge Calculation* is currently displayed, and all the Calculations, Rates, and Billing Codes information is copied forward. Update as needed and then select *SAVE.*
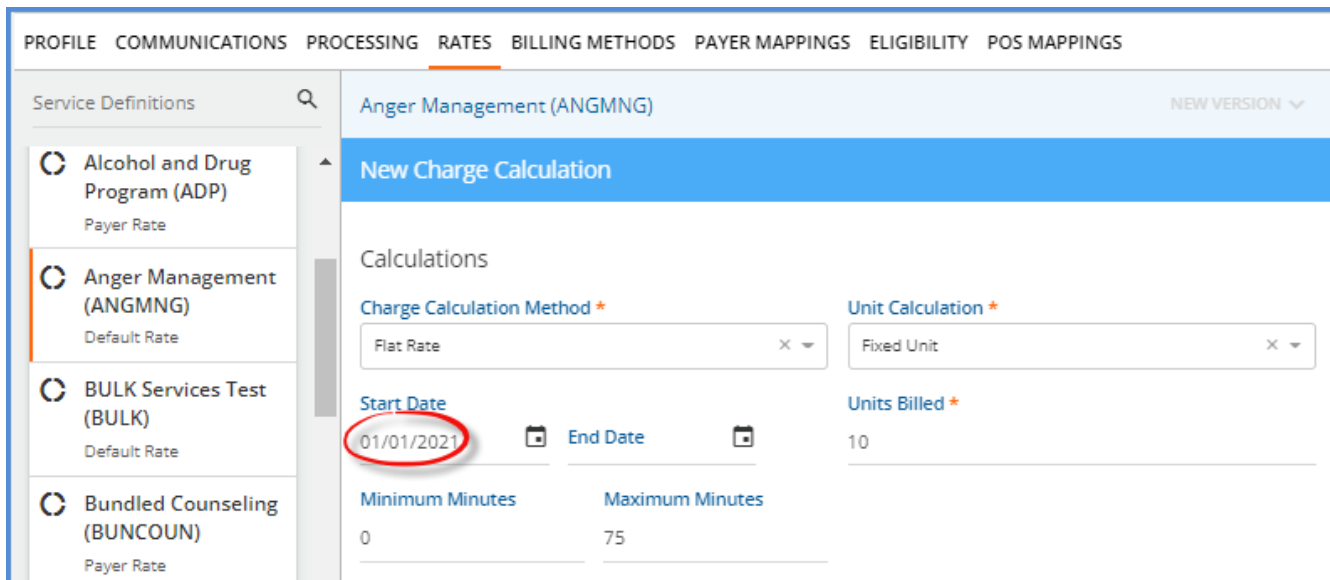
When more than one Payer Charge Calculation exists, a *Versions* drop-down is available in the blue header. The selected Charge Calculation displays on the RATES tab.
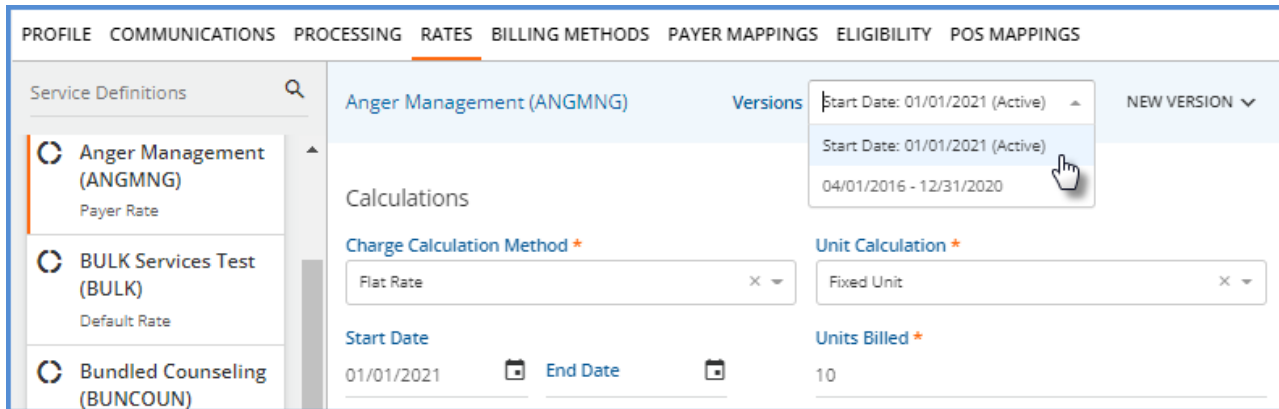
Copying Rates to Other Payers

In addition to the Rates management for a single Payer and Service Definition, a new copy feature allows the current Payer's Rate Override for the selected Service Definition to be copied to other Payers. This means rate updates can be applied to a single Payer and then copied to multiple Payers without the need to reenter information. Access this feature by selecting the blue *COPY RATE TO OTHER PAYERS* button in the footer of the Rates tab. The Service Definition being copied must have the Start Date populated.
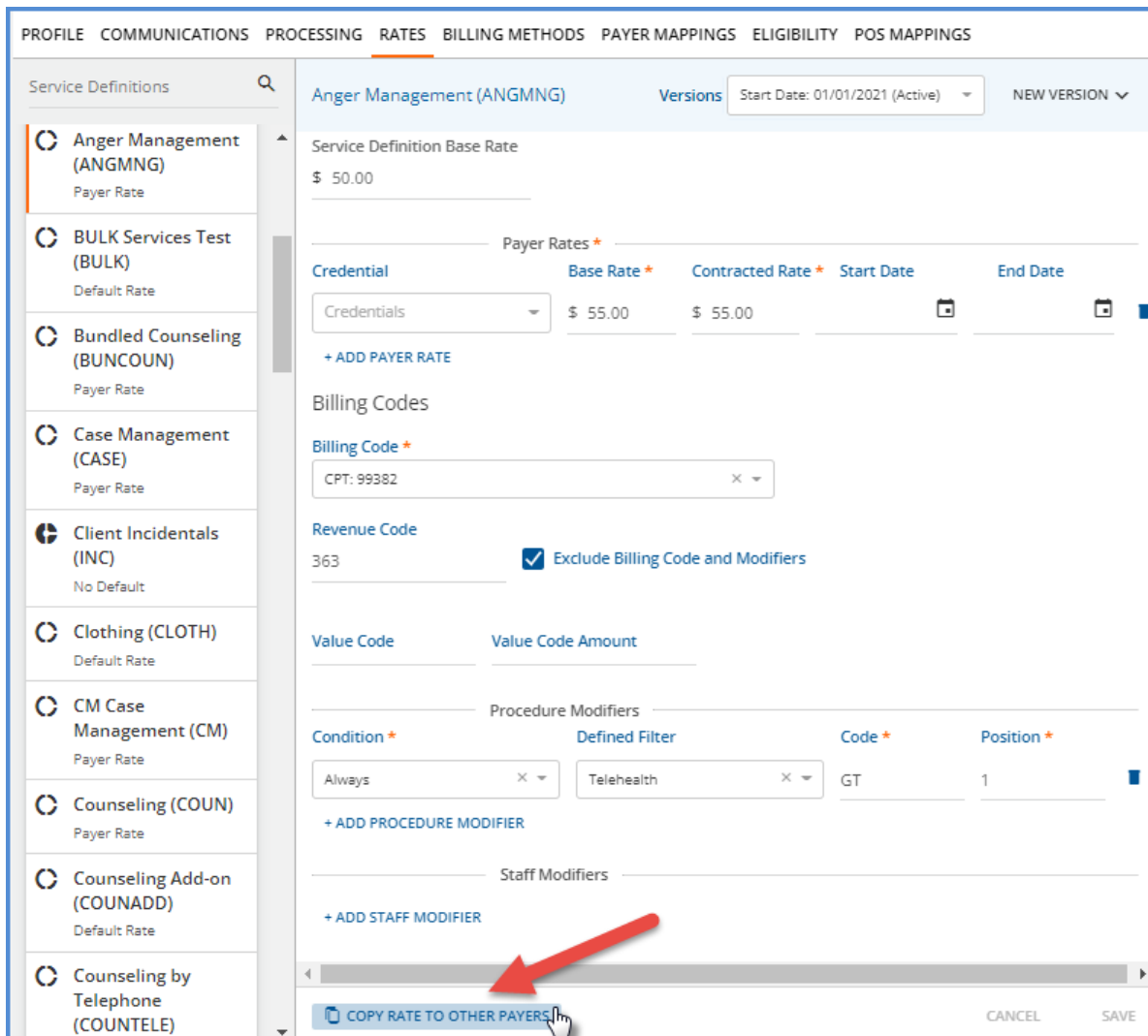
When selected, the following prompt displays.
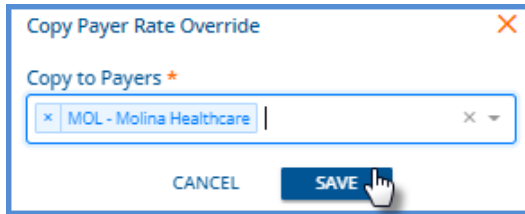
- The drop-down list is populated with all active Payers and Payer Codes.
- Multiple Payers may be selected in the *Copy to Payers* drop-down.
- When *SAVE* is selected, the application checks for Start Date conflicts between the existing Charge Calculation(s) of the chosen *Copy to Payer(s)* for the chosen Service Definition and the currently selected Charge Calculation to be copied.
    - If there are no conflicts,
        - Existing Charge Calculations with a Start Date **before** the Start Date of the Charge Calculation being copied are end-dated. The End Date is the day before the Start Date of the Charge Calculation being copied.
        - The new Charge Calculation information is copied over.
            - If there was no previous override, there is now one Payer Rate version.
            - If a previous override was end-dated, there are now at least two Payer Rate versions, the end-dated one and the copied one.
        - A success message displays indicating the number of Payers that were updated with the copy.
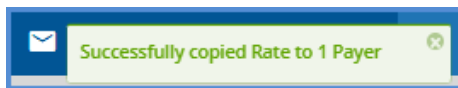
    - If there are conflicts for some of the selected Payers, the following message displays.
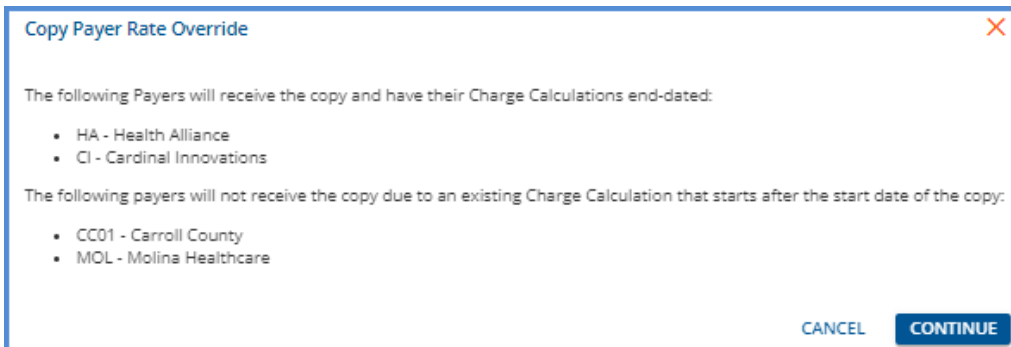
        - The Payers are grouped by those with and those without conflicts.
        - Choose *CONTINUE* to copy the Charge Calculations for the Payers without conflict.
            - No update is made to the Payers with conflict.
            - The success message indicates the number of Payers with a successful copy.
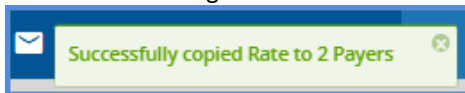
            -
        - Or select *CANCEL* to halt the process and return to the *Copy to Payer* selection prompt.
- If the selected Service Definition does not have a Start Date, the following error message displays when *SAVE* is selected.
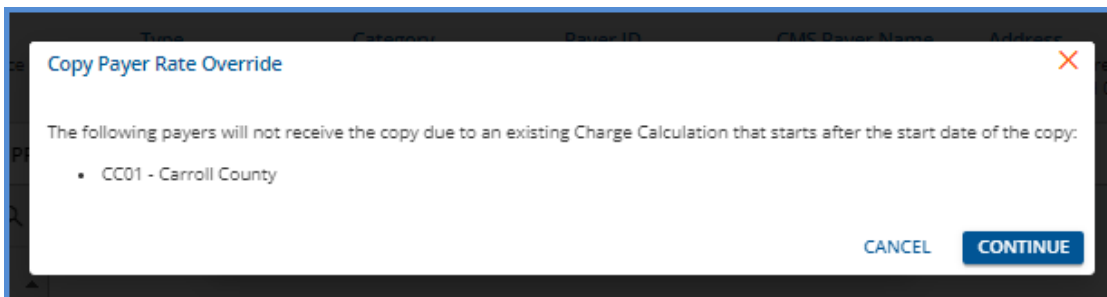
Examples

The following examples illustrate the results of the *Copy Rate to Other Payers* function in the following four scenarios.

- (1) The Copy to Payer, Health Alliance, does not have a Payer Rate defined for the copied Service Definition.
- (2) The Copy to Payer, Carroll County, has an existing Payer Rate defined for the copied Service Definition, but that Rate does not overlap the copied Service Definition.
- (3) The Copy to Payer, Molina, has an existing Charge Calculation with a Start Date before the copied Service Definition's Start Date.
- (4) The Copy to Payer, NH Medicaid, has an existing Payer Rate with a Start Date after the copied Service Definition's Start Date.

The following Anthem BCBS Payer Rate for Psychotherapy (PSY60) is selected to copy to the four Payers referenced above. *Please note that the copy function copies all sections of the Rates tab, but these examples only capture the Calculations section of the Rates tab to conserve space.*

The copy job is created and saved, the following message displays, and *CONTINUE* is selected.

The success toast message displays and the three Payers are updated.

(1) The Copy to Payer, Health Alliance, does not have a Payer Rate

Health Alliance does not have any existing Payer Rates for this Service Definition, as shown below.

Anthem's Payer Rate information is copied. The updated Health Alliance Rate screen is shown below.

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(2) The Copy to Payer, Carroll County, has a Non-Overlapping Payer Rate

Carroll County's Payer Rate ended on 12/31/2018, so it does not overlap Anthem's date range of 01/01/2019-12/31/2021.

Anthem's Payer Rate information is copied, and now when viewing Carroll County's Rates for this Service Definition, there are two Versions.

3. The Copy to Payer, Molina, has an existing Charge Calculation with a Start Date before the copied Service Definition's Start Date.

Molina's Payer Rate for the PSY60 Service Definition has been active since 01/01/2018, before the Start Date of 01/01/2019 on Anthem's Rate.

When Anthem's Rate is copied, Molina's existing Rate is end-dated on 12/31/2018, and a new version is created for the copied Rate. Either Rate may be viewed by selecting the row in the now visible *Versions* drop-down.

4. The Copy to Payer, NH Medicaid, has an existing Payer Rate with a Start Date after the copied Service Definition's Start Date.

The Start Date of NH Medicaid's Payer Rate, 01/01/2021, is after the Start Date of the Anthem Rate being copied for the PSY60 Service Definition, 01/01/2019. Anthem's Rate cannot be copied over to NH Medicaid.

Deleting a Payer's Charge Calculation

A new *DELETE* option is available on the *Service Definitions > Rates* tab. Delete is enabled when the currently selected Service Definition's Charge Calculation is not associated with any Charges.

Like Service Definitions, when a Charge Calculation is deleted, the Rates tab displays the next most recently added Charge Calculation. If there are no further Charge Calculations, the *Service Definition* default rate page is displayed.

If the user is in the process of creating a new or copying a Charge Calculation, the *DELETE* button is also disabled, and the Help button is not visible.

IMPROVEMENTS

Implement Payer Mappings for UB-04 and CMS-1500

The *Create Bills* process for the UB-04 was updated to override the Organization NPI when a Payer Mapping for this value exists in *Configuration > Services/Payers > Payers > Payer Mappings.* The NPI value is reported in FL-56. A similar update was applied to the *Create Bills* process for the CMS-1500 to override Organization NPI and Taxonomy when Payer Mappings exist. The NPI is reported in Box 32, and the Taxonomy is reported in Box 33, and reporting of the Staff NPI is not affected.

Configure Reported Organization on CMS-1500

The CMS-1500 configuration page in *Configuration > Services/Payers > Payers > Billing Methods > CMS-1500* was updated to allow agencies to define which Organization or Service Facility information is reported in Boxes 32 and 33. A new drop-down with the following options was added for each box.

- **Matching Organization** (set as default)
- Matching Service Facility
- Default Organization

When a CMS-1500 bill is created for a Service that matches the Organization's or Service Facility's configured Defined Filter,
- The Name, Address, and ZIP are reported from the selected Organization or Service Facility in Box 32.
- If *Matching Service Facility* is selected, and there is no match, the *Matching Organization* is reported instead.
- If there is also no match on *Matching Organization* or if there is no match on the Defined Filter, the reported value falls back to the *Default Organization.*

Configurable Permissions for Progress Notes

In response to requests to set Permissions around Progress Notes, a new features permission is available in *Configuration > Staff/Users > Permissions* called *Service: View Progress Note*. When the checkbox for this Permission is selected for a user group with menu access to the Services screen, members of that User Group can view and edit the Progress Note as before. When this checkbox is not selected (for a User Group with access to the Services screen), those members can view the status but cannot open the progress note to view or edit, as shown below.
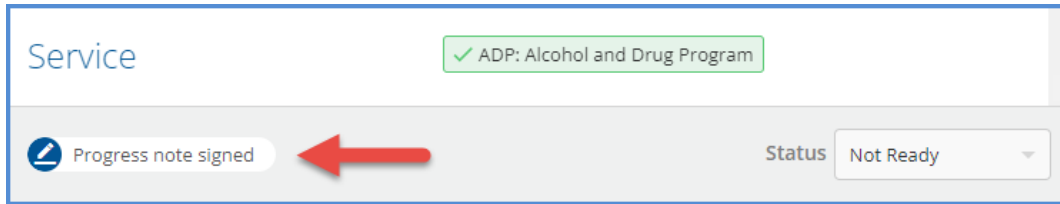
The Progress Note status icon and description on the Service Entry screen match those found on the Services home screen.

🟠	A Progress Note has not been completed and **is** required for the Service Definition.
🔵	A Progress Note has not been completed and is **not** required for the Service Definition.
🟠	A Progress Note exists but has **not** been signed.
🔵	A Progress Note exists and **is** signed.
🟡	Completed Note no longer matches Service Definition.

Link from Service Entry to Client Chart

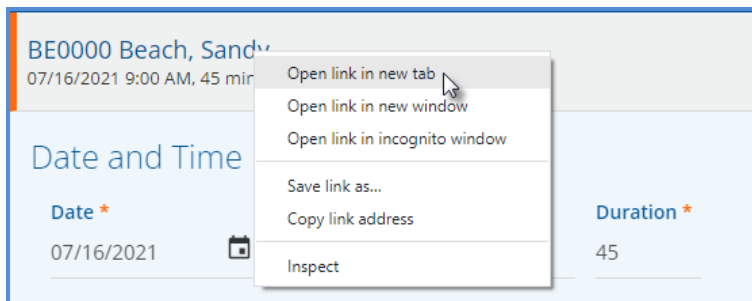Billing users can now quickly get to the Client Chart while working on the Service Entry page by clicking on the Client's code or name. The Client Charge can also be opened in a new tab or window by right-clicking the Client code or name to open the Client Chart in a new tab or window.

FD Next Allergies Form is out of Beta

The FD Next Allergies form is out of Beta. All agencies are encouraged to start using this new form as the first step toward deprecating the legacy Allergies form. After the upgrade is complete, agencies with both forms installed will see *(deprecated)* next to the legacy Allergy form.
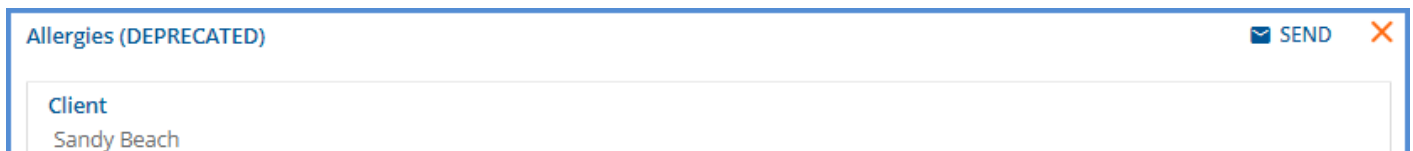
Handling More Lab Results Returned Than Expected (Included in EV-3.31-Hotfix1)

Updates were made to the Labs import process to handle receiving more results than expected. Change HealthCare assigns an Order number and a Set ID (the count of the ordered tests) to each Lab Order. EchoVantage uses the Order number and Set ID to

match results with the requesting lab order. However, some Change HealthCare laboratories perform an additional test or tests if the result of an ordered test is out of range. When this happened, the Set ID on the results no longer matched the Set ID on the lab order, and the application no longer found a match. The results file was downloaded, but instead of displaying on the Timeline, an error Message was logged in dbo.LabReportErrors. A similar error resulted when additional, unexpected result pdf files were included in the HL7 document.

Now when there is no match on the Order number and Set ID, or when more pdf files are received than expected, the import process checks to see if the order was created by EchoVantage. If a matching Order is found, a new dbo.LabOrders record is inserted for the additional Set(s) with *'Unsolicited –'*preceding the inserted test name(s), allowing all results, ordered and unsolicited, to display on the Client's Timeline. A test Client's Orders and Results are shown below.

Update Result Status (HL7) Value Set Codes (Included in v3.31-Hotfix1)

The list of codes in the *Result Status (HL7)* Value Set (Value Set OID 2.16.840.1.114222.4.11.815) was updated to include all listed Concept Codes. EchoVantage now supports the HL7 2.5 Table 0123-Result Status. The Result Status field is required when the OBR segment is contained in a message.

REPORTS

Updated Reports

The following Administration report was deleted.

Clients Missing Paysource – Replaced by the Client Missing Payer report below.

The Following Administration report was added.

Client Missing Payer – Replaced the Client Missing Paysource report and was updated to only include Clients with an open Episode and no assigned Client Payers as of the date the report is run. Results are sorted by the Client's last name.

The following reports were updated.

Administration Reports

Admissions By Date Range – This report was updated to display Episodes grouped by Client, and the count on the report was updated to show the number of unique Episode Admissions. Previously the report displayed a line for each Primary Staff assigned to a Client's Episode and counted each of these listings.

Billing Reports

Selfpay Statement – Now launches without selecting *View Report* and includes the *Address 2* value, if populated.

Client Reports

Medical Face Sheet – References to Episode were removed, and the report now lists all Medications that are active as of the date the report is run. The Dose field now includes the following information.

- Dose
- Dose strength
- Dose unit
- Dose timing
- Route

The information is displayed in the *Dose* field like *1 75mg tablet twice a day by mouth,* for example. The medication end date is also listed if available.
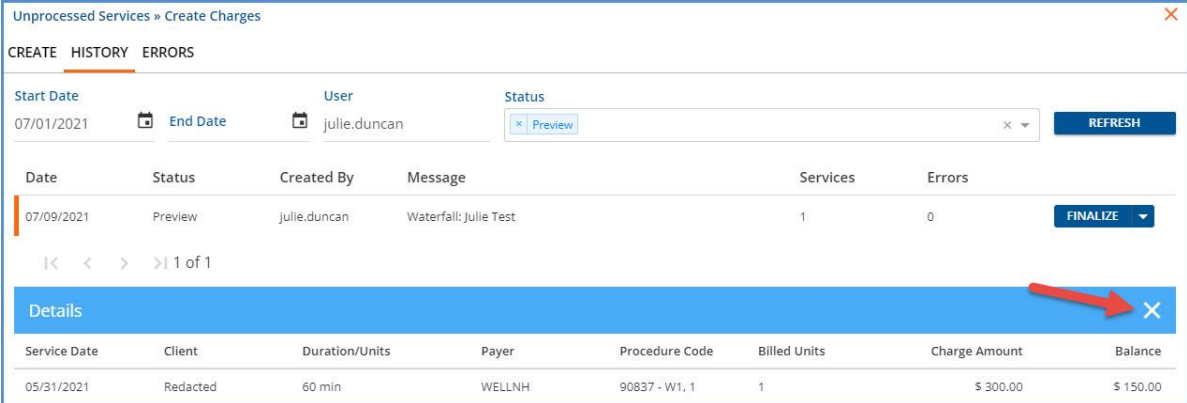
Current Medications:				
Brand Name	**Generic Name**	**Dose**	**Startdate**	**End Date**
doxycycline hyclate	doxycycline hyclate	1 20 mg tablet once a day by mouth	06/20/2019	

Treatment Plan - Updated to ensure all plan signatures are included on a printed report.

Fiscal Reports

Client Payment Allocation Report – The Status filter was removed from this report. The report is only intended to show Client Payments that have been fully processed into a Payment, so only *DONE* or *PREVIEW* status apply.

UPDATES

Ticket #	Description
EV-1645	Updates were made to the *History* tab in *Unprocessed Services* and *Unprocessed Remittances* to allow the details grid displayed when a job in *Preview* status is selected to be closed. Previously the details remained until a new row was selected or the page was refreshed.
	For example, selecting an *Unprocessed Services > History* Preview job row now displays the *Details* grid with a blue header and an 'X.' Selecting the 'X' closes the *Details* grid.

EV-2096	In *Vantage Point > Clinical Home,* the Event popover (the displayed summary information when single-clicking an Event) was updated to show the Event Staff to make determining who is responsible for the Event easier when multiple Staff are selected in the view. The Event's *Staff* name is now listed between the *Client/Group Name* and the *Event Time.*
EV-2151	An update was made to the search behavior in the *Staff* drop-down boxes (Service Entry, Claims Management, Fiscal Overview) to only match on Staff Name and Staff Code. Previously, the search also returned matches on Staff ID, which resulted in some erroneous matches.
EV-2162	In *Configuration > Services/Payers > Payers > Rates,* the Service Definition code is now visible in the Service Definition list in parentheses after the Service Definition name. In addition, users can now search for a specific Service Definition by Code.
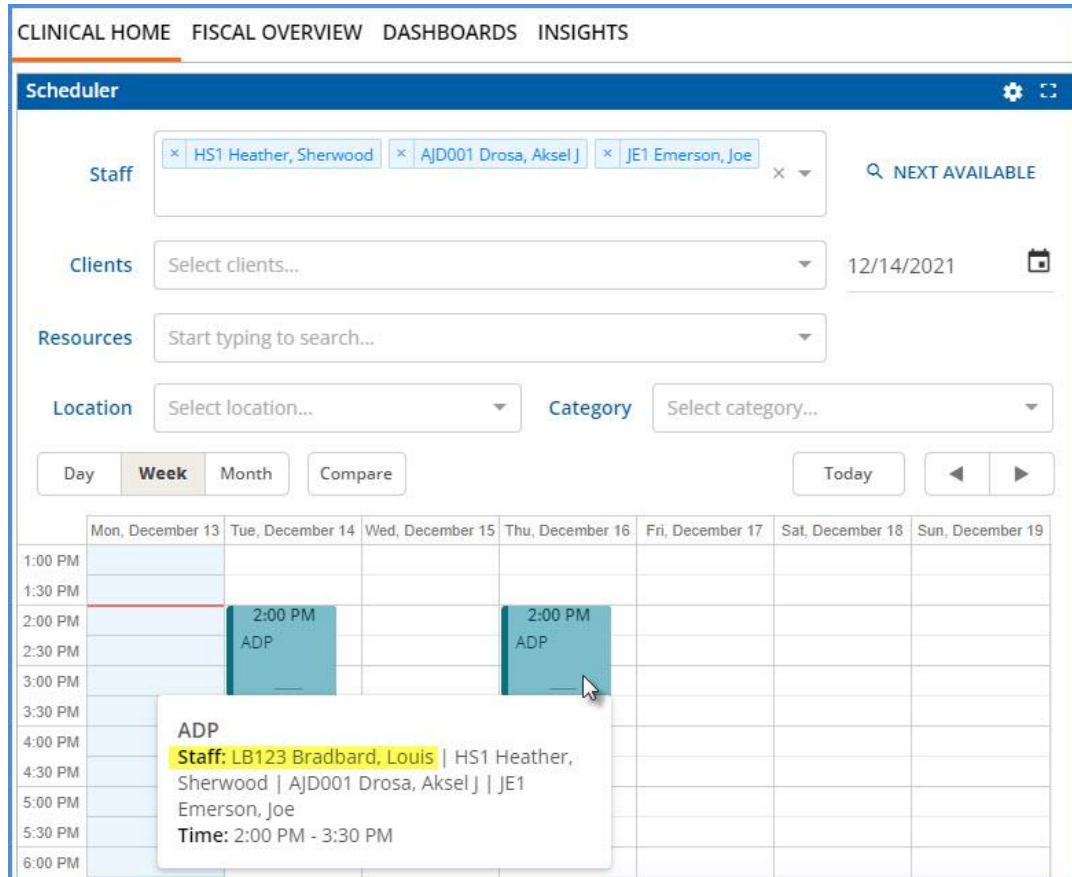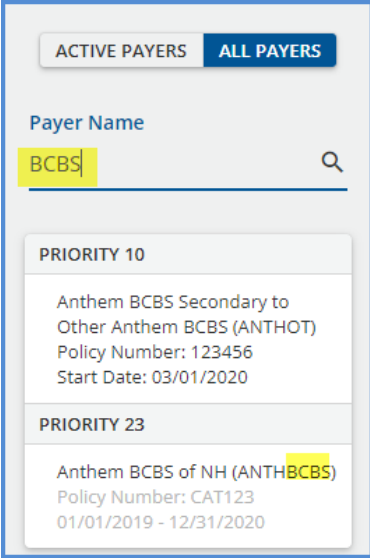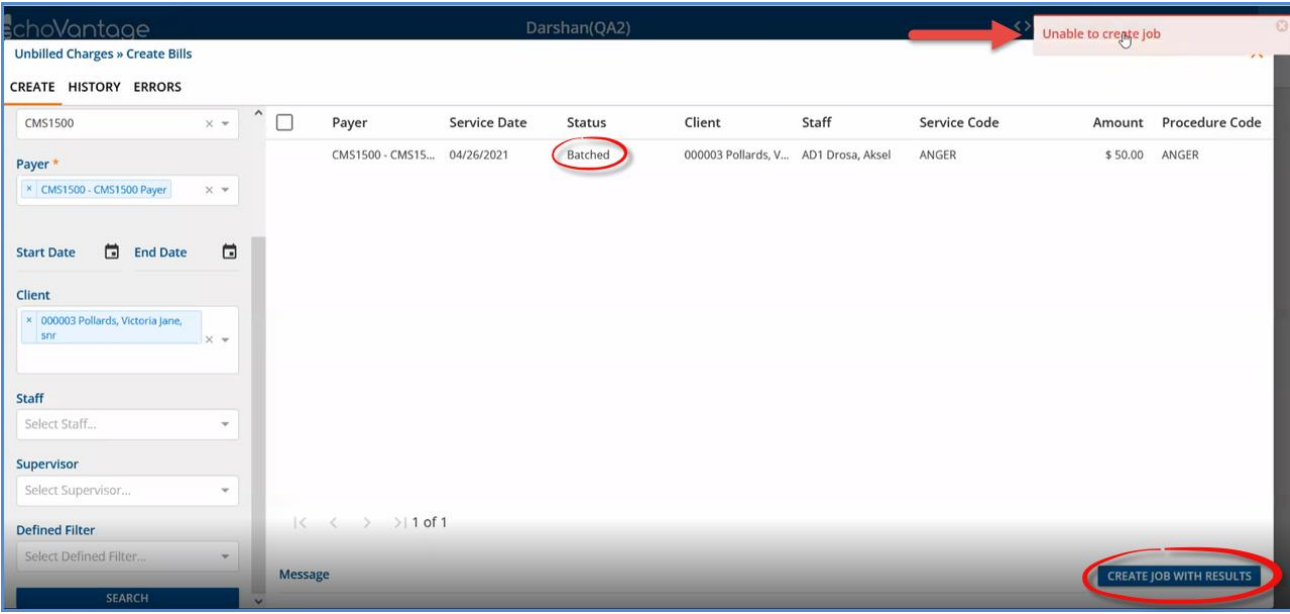
Before Update	After Update
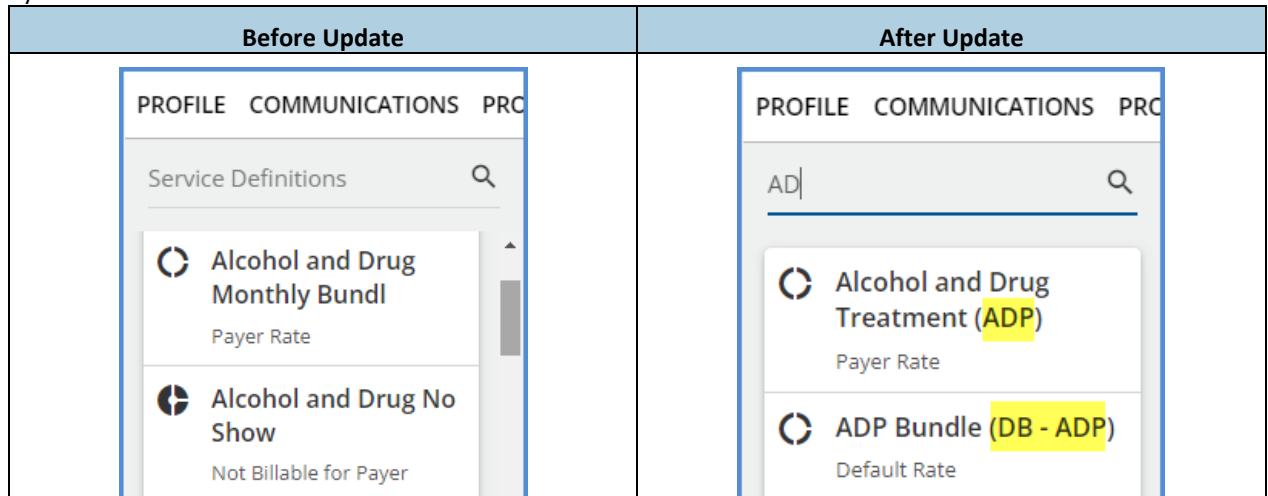
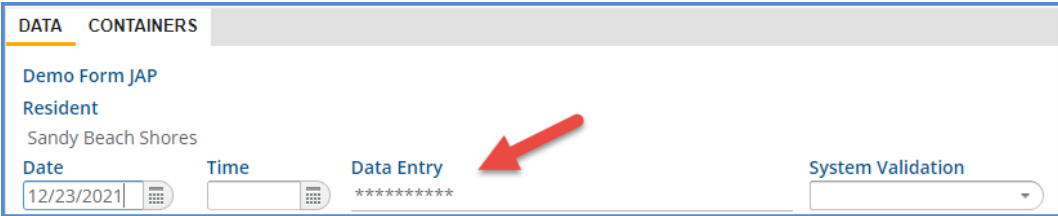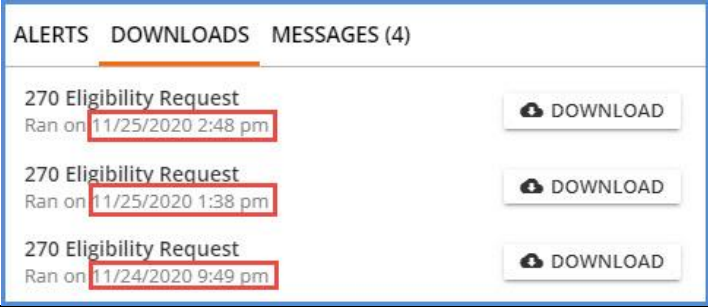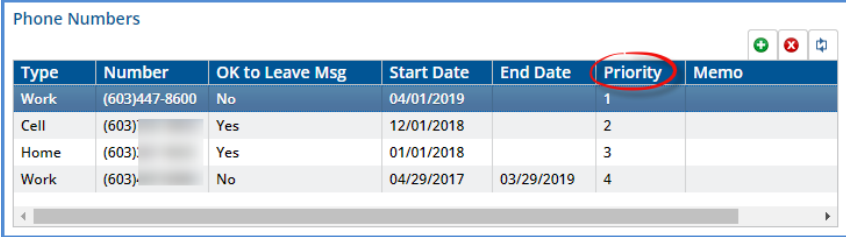| EV-2227	In *Clients > Payers,* users can now search by Payer code in addition to Payer name when *All Payers* is selected.	
EV-2228	In *Vantage Point > Fiscal Overview > Unbilled Charges > Create Bills,* an update was made to prevent the creation of a *Create Bills Job* when there are no valid job items. Now, if the only job items in a *Create Job With Results, Create Bills* job are invalid, an *Unable to create job,* failure message displays. Before this change, selecting *Create Job With Results* included any result, even Charges with a *Batched* status. If none of the job (charge) items were valid, the toast message indicated the number of Charges not included but still created an empty *Create Bills* job.	
EV-2253	Validation was added for the following date fields to accept values in MM/DD/YYYY format only. *Vantage Point > Clinical Home > Scheduler* *Vantage Point > Fiscal Overview > Unbilled Charges > History* *Vantage Point > Fiscal Overview >Unprocessed Remittances > History* *Vantage Point > Fiscal Overview > Unposted GL Transactions > History* *Clients > Schedule* *Configuration > Services/Payers > Service Definitions > Rates* – Credentialed Rates *Configuration > Services/Payers > Payers > Rates* – Payer Rate Override *Configuration > Staff/Users > User Groups > Staff* *Configuration > Services/Payers > Programs > Subprograms*	

Before this change was made, these fields allowed entry of a date in DD/MM/YYYY but resulted in an error and failed to save.

BUG FIXES

Ticket #	Case #	Description
EV-1951		The Status filter was removed from the Client Payment Allocation report as this report is only intended to show Client Payments that have been fully processed into a Payment. Only *DONE* or *PREVIEW* status apply.
EV-2172	7577	An issue was reported where a printed Treatment Plan did not include all signatures. For adolescent plans specifically, the printed copy listed *"signature not required"* instead of the actual parent or guardian signature. The report was updated, and now all signatures display on Treatment Plan Report.
EV-137 and EV-2177	7602	The Self Pay Statement report was updated, so it now launches without the need to select *View Report first.* An issue was also reported where the Self Pay Statement report did not include the Address 2 value. The report was updated and now includes the Address 2 value, if populated.
EV-2178	7361	The Admissions By Date Range report was updated to display Episodes grouped by Client, and the count on the report was updated to indicate the number of unique Episode Admissions. Previously the report displayed a line for each Primary Staff assigned to a Client's Episode and counted each of these listings.
EV-2179		The Clients Missing Pay Source report was renamed *Clients Missing Payer.* The report now only includes Clients with an open Episode and no assigned Client Payers as of the date the report is run. The results are now sorted by the Client's last name.
EV-2208	7877	An issue was reported where deleting Remittance Batches failed if the batch contained a contractual adjustment AND was included in an *Unprocessed Remittances* job that had been *Reversed.* In this instance, deleting the individual contractual adjustment also failed. Updates were made to ensure that all the job items for Batch Remittance items are cleared when a *Process Transactions* job is reversed, allowing a contractual adjustment and batches containing a contractual adjustment to be deleted.
EV-2212		An issue was reported where the Service Definition List information on the left-hand side of the *Configuration > Services/Payers > Payers > Rates* screen did not refresh when a different Payer was selected. This issue was addressed, and now the Service Definition information on the Payer's Rate screen displays the corrected information for the selected Payer with the need to manually refresh the screen.
EV-2248		An issue was addressed in Form DesignEHR where the mask characters of a field using a custom Display Mask were saved in error when a user edited the masked field but exited without saving. The masked values (****) overwrote the previous value. A patch was created for Form DesignEHR v6.0.30 to prevent this behavior. Now the masked field is cleared when a user tabs or clicks into it. If the user exits without making changes, the field is set to the same values as before.

EV-2269	THOMP	An issue was reported where the Error count on the *Vantage Point > Unprocessed Services > History* tab did not match the count of Errors on the Unprocessed Services *Errors* tab or the *Fiscal Overview* home screen. The History tab was updated to display the count of errors from *ServiceProcessingMessages* instead of ProcessingMessages and now displays the correct count. The only time the counts differ is when a *Reprocessing Job* that contains errors exists. In this case, the Reprocessing Job errors are counted in the Errors tab and Fiscal Overview but are not included in the errors count on the Service Processing History tab.
EV-2270	COOS	The *Ran on* Datetime in the Downloads tab of the Inbox was displaying incorrectly in UTC for the 270 Eligibility Request files. The issue was addressed, and now this date and time display in the user's local time zone.
EV-2306	8162	An issue was reported where the Transaction Date recorded for a reversal of prior payment and any associated transactions (the charge increasing credit, for example) was the date the reversal was processed rather than the expected Transaction Date of the related remittance. This issue was addressed, and now the Apply Unapplied Payment job for a Takeback uses the Transaction Date of the most recent remittance that created the Unapplied Payment. This remittance Transaction Date is used as the Transaction Date for the reversal of prior payment and all associated transactions.
EV-2308		An issue was addressed where the Client Contact Phone Numbers grid had two *Type* fields. The label on the second *Type* field was updated to *Priority* to better reflect the data shown.
EV-2331	8295	An issue was reported where the 271-job failed to create if there were multiple transaction sets (ST-SE) in the file. The problem was addressed, and the 271-job now successfully creates as expected.
EV-2417	8895	An issue was reported on the *Remittances > Batches* screen where the PCCN field only allowed entry of numeric characters. The problem was addressed, and now alphanumeric characters can be entered in the PCCN field.
EV-2460	8542	An issue was reported where the *Print and Save* option in the *Clients > Account* tab would save successfully but fail to print and display an error message instead. The issue was addressed and now selecting *Save and Print* saves the Client Payment information and prints the associated receipt successfully.

APPLYING CLIENT LIST FILTERS TO CUSTOM REPORTS

The process below demonstrates how the *Service Detail With Charges* report was updated to apply Client List Filtering. The process outlined uses Report Builder and provides detailed steps so the same method may be applied to a custom report. There are four primary tasks.

1. Add the new hidden Parameter.
2. Update the Query in Datasets with Client-related information.
3. Repeat for any SubReports.
4. Upload the edited reports to the EchoVantage SSRS report server.

Add the Hidden Parameter

The new hidden Parameter must be added and then moved up in the Parameter list to display just after DatabaseName. With your report open in Report Builder,

1. Right-click on Parameter and select *Add Parameter*

2. Add the Parameter with the following information.

- Name = userId The *Name* value is case sensitive and must be entered exactly as shown.
- Prompt = Any value is acceptable as the Parameter is hidden.
- Choose Hidden for *Select parameter visibility*
- Select OK

Move New Parameter

Use the blue "up" arrow to move the newly added Parameter up in the list. It must come after DatabaseName.

Edit Datasets Related to Client Information

Expand Datasets and make a note of any Client-related information sets. Any Dataset that is Client related needs the Parameter added and the Query altered. In the *Service Detail With Charges* report, both the *Detail* and the *ClientData* Datasets have Client-related information. The steps below walk through updating both Datasets.

1. Right-click on Details, select *Dataset Properties,* and then select *Parameter.*

- Select Add.
- Enter the Parameter Name of **@userId**
- Enter the Parameter Value of **[@userId]**. Use either the drop-down list or the function button (fx) to locate the Parameter Value.
- Select Ok.
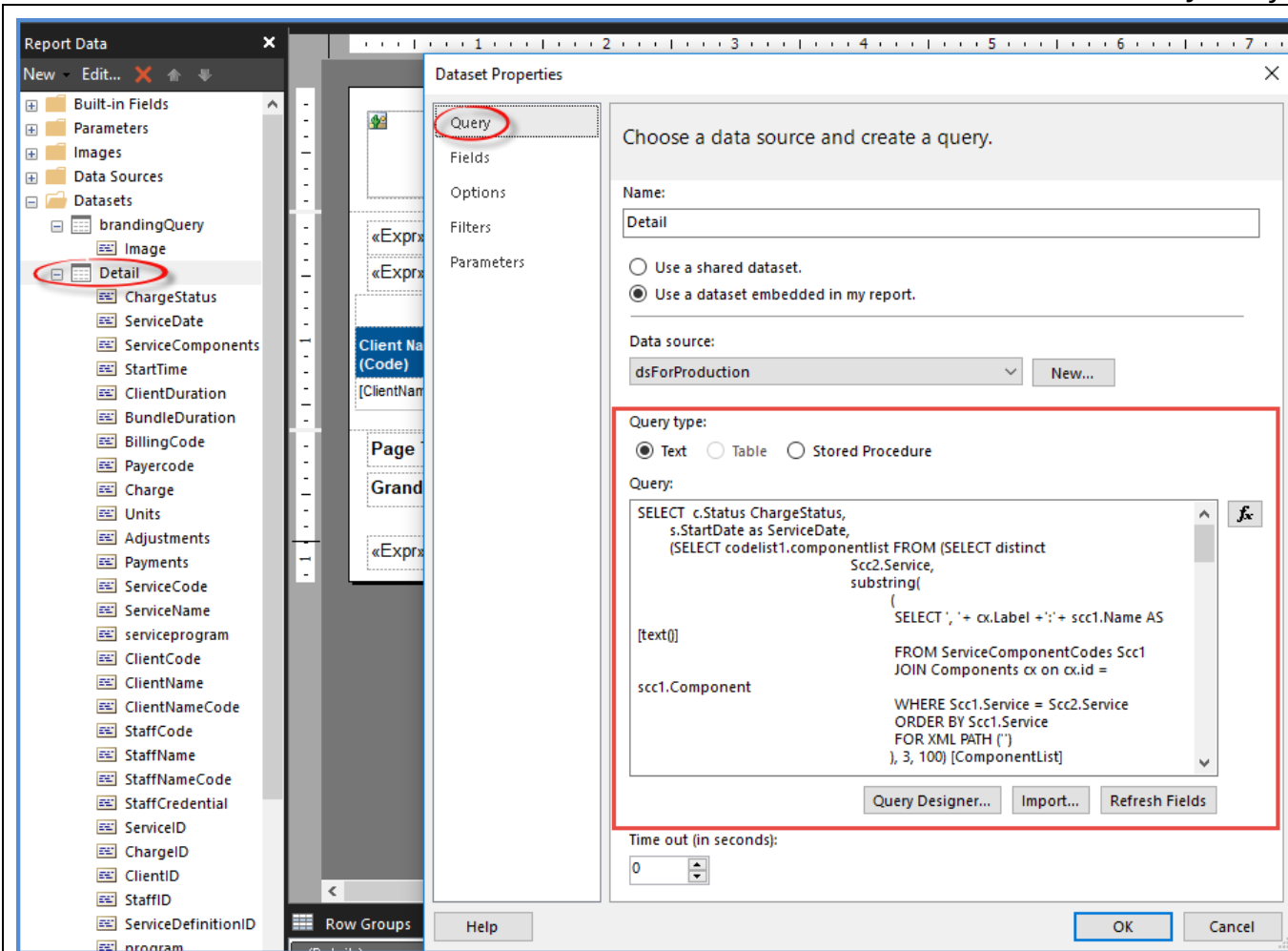
2. Right-click on *Details* and then select *Dataset Properties.*

- The Query page displays by default.
- Review the Query as text.
- Make a note of any references to Client data, for example JOINs to the Clients table.
- The *From* clause needs updating in the example.
  - Add the following SQL immediately after any reference to the Clients table or after a Join to the Clients table LEFT JOIN VClientFilter_All f ON c.id = f.Client AND f.appuser = @userId
  - *The provided query uses c for the Client's table alias (c.id).*
  - *The query may need to be updated to match the Client's table alias in your Query.*

  -
  - In the Service Detail With Charges report, the Client's table alias is cl. The Query above was updated.

- And the Where clause needs updating in the example.
  - Add the following SQL immediately after *Where*
    If.Staff IS NOT NULL OR NOT EXISTS(SELECT 1 FROM Staff s1 JOIN ClientListFilters cf ON s1.id = cf.staff AND s1.AppUser = @userId)) AND

```
JOIN dbo.[Payers] p on p.id = cp.Payer
JOIN dbo.[Staff] st on st.id = s.Staff
JOIN dbo.[Clients] cl on cl.id = s.Client
LEFT JOIN VClientFilter_All f ON cl.id = f.Client AND f.appuser = @userId
WHERE (f.Staff IS NOT NULL OR NOT EXISTS(SELECT 1 FROM Staff s1 JOIN
ClientListFilters cf ON s1.id = cf.staff AND s1.AppUser = @userId)) AND
c.void <> 'Y' AND
(s.startdate between @from AND @to) AND

(@scode = '' OR st.StaffCode in
(SELECT TRIM(value) FROM string_split(@scode,','))) AND

(@ccode = '' OR cl.Clientcode in
(SELECT TRIM(value) FROM string_split(@ccode,','))) AND
```

  -
- Select *OK* after the query updates are complete.

3. Right-click on *ClientData*, select *Dataset Properties,* and select *Parameter.*
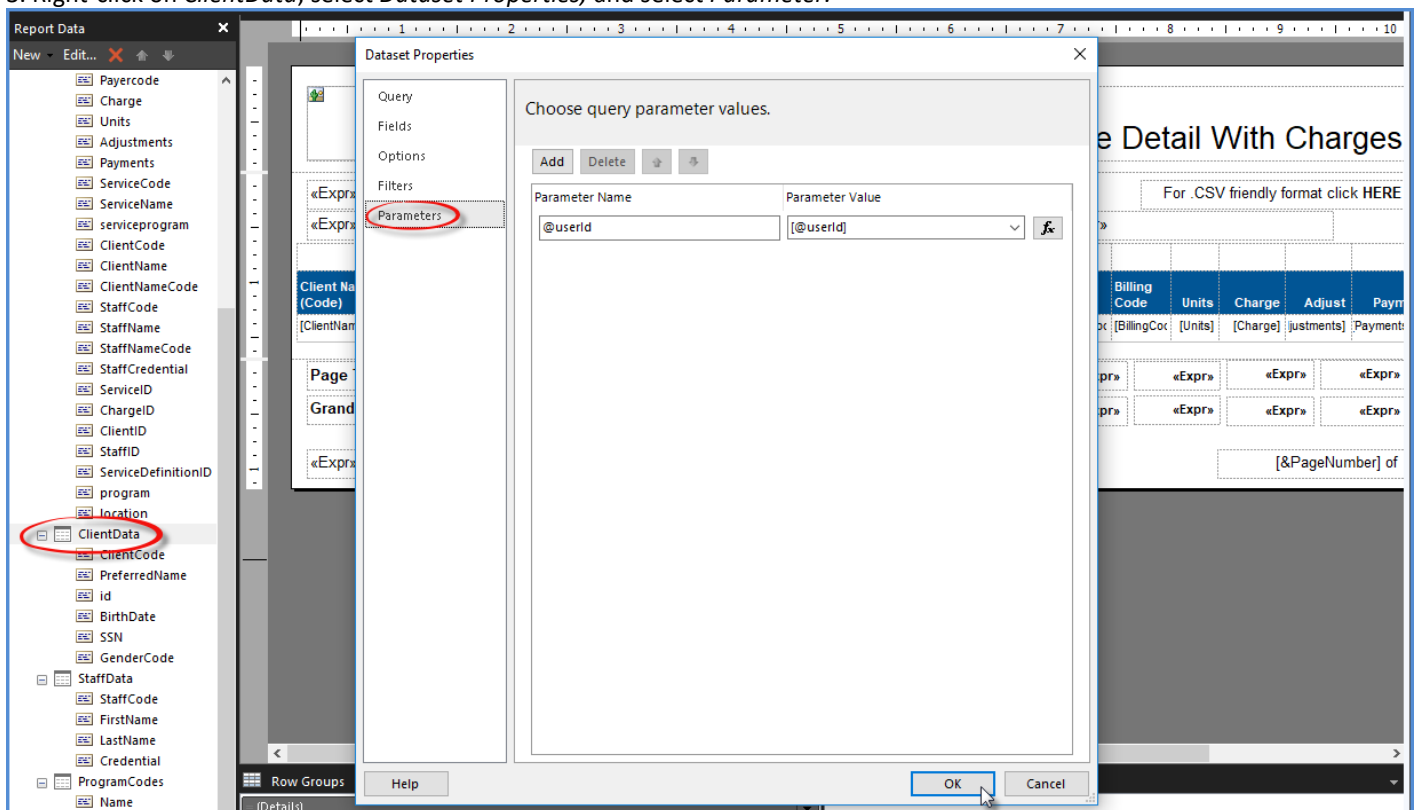
Repeat step 1 above.

- Select Add.
- Enter the Parameter Name of **@userId**
- Enter the Parameter Value of **[@userId]**. Use either the drop-down list or the function button (fx) to locate the Parameter Value.
- Select Ok.

4. Right-click on *ClientData* and then select *Dataset Properties.* The Query page displays by default.
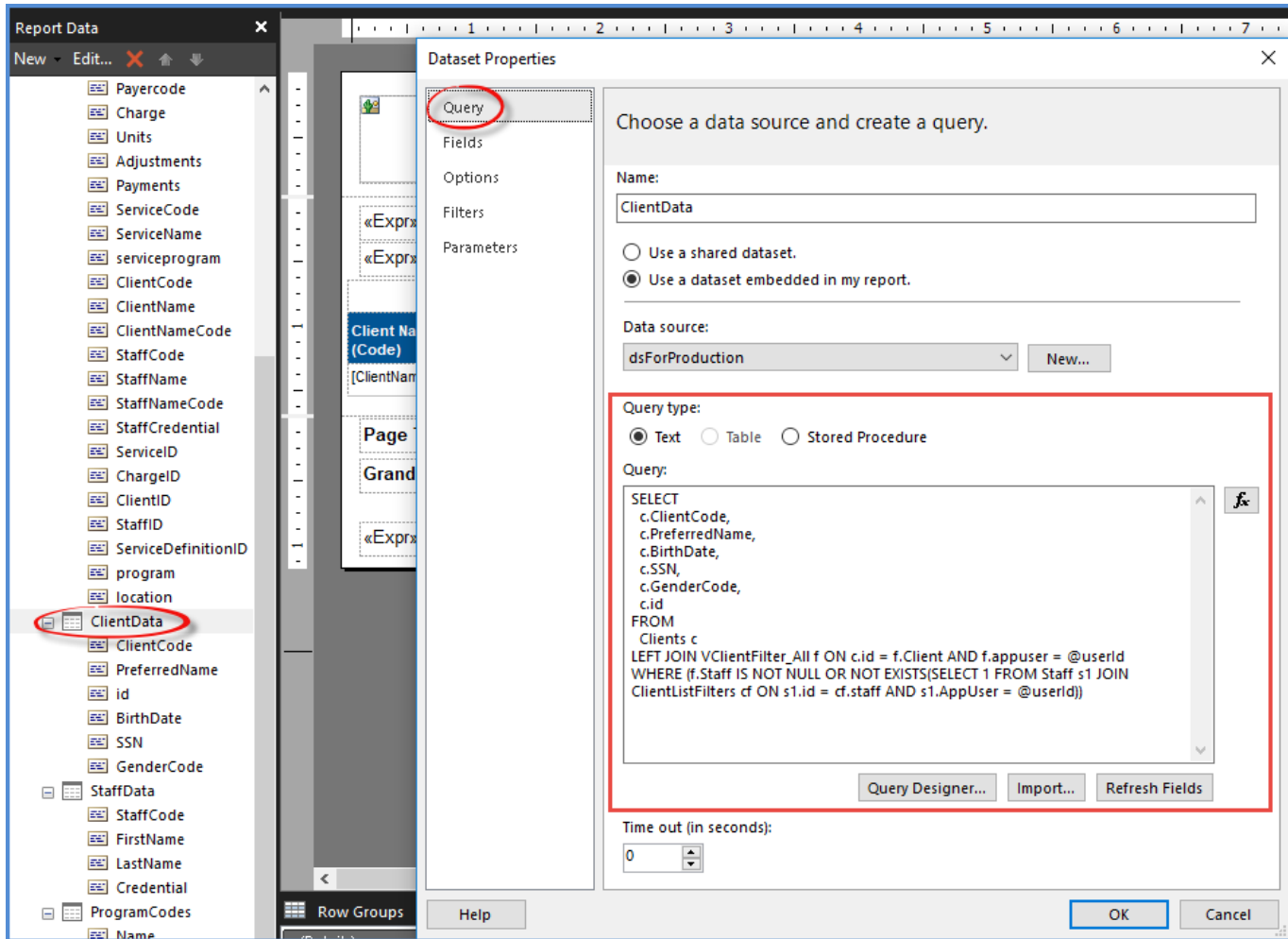
Repeat Step 2 above.

- Review the Query as text.
- Make a note of any references to Client data, for example JOINs to the Clients table.
- The *From* clause needs updating in the example.
  - Add the following SQL immediately after any reference to the Clients table or after a Join to the Clients table
    LEFT JOIN VClientFilter_All f ON c.id = f.Client AND f.appuser = @userId
  - *The provided query uses c for the Client's table alias (c.id).*
  - *The query may need to be updated to match the Client's table alias in your Query.*

  -
 - In the *ClientData* Dataset, the Client's table alias is also *c* - no query edit was needed.

- And the *Where* clause needs updating in the example.
  - Add the following SQL immediately after *Where,* remove the ending *AND* if not needed
    f.Staff IS NOT NULL OR NOT EXISTS(SELECT 1 FROM Staff s1 JOIN ClientListFilters cf ON s1.id = cf.staff AND s1.AppUser = @userId)) AND

    ```
    SELECT
      c.ClientCode,
      c.PreferredName,
      c.BirthDate,
      c.SSN,
      c.GenderCode,
      c.id
    FROM
      Clients c
    LEFT JOIN VClientFilter_All f ON c.id = f.Client AND f.appuser = @userId
    WHERE (f.Staff IS NOT NULL OR NOT EXISTS(SELECT 1 FROM Staff s1 JOIN
    ClientListFilters cf ON s1.id = cf.staff AND s1.AppUser = @userId))
    ```
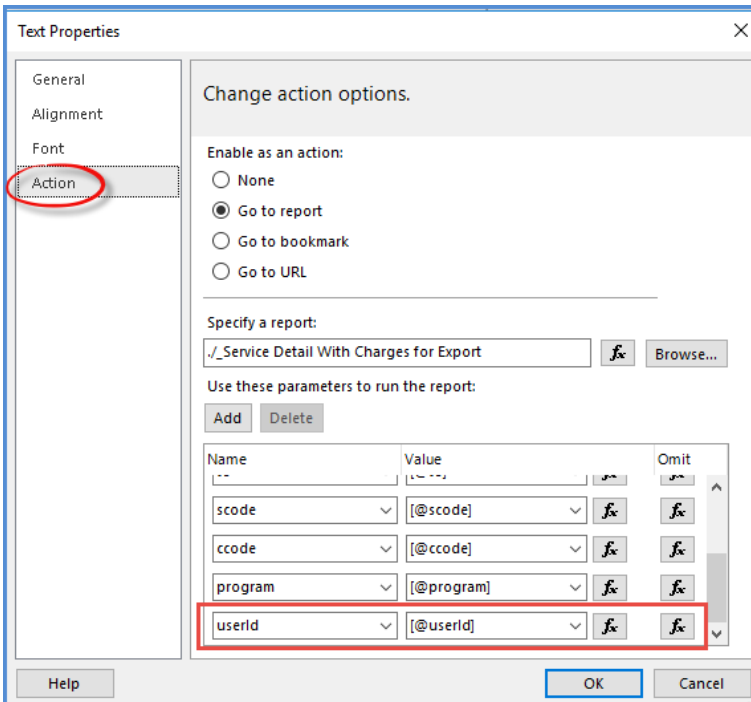 -
- Select *OK* after the query updates are complete.

5. If the report has any SubReports, the hidden Parameter must be added to the *Go to report* action.

- Right-click on the SubReport's **HERE** link and select *Text Properties*
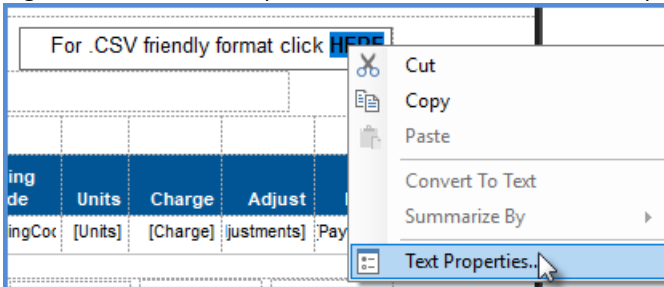
-
- Then select *Actions.*
- Add the new hidden Parameter Name and Parameter Value.

-
- Note the location of this Parameter in the list. When the Parameter is added to the SubReport .rdl file, it must be in the exact location in that report's Parameter list.

Update the SubReport .rdl File

If your custom report has any SubReports, these must also be updated. The process is the same except for one critical distinction; the hidden Parameter must be listed in the same order that it is called from the main report on the *Go to report Action* page (see number 5 above). The example below details the changes made to the *Service Detail With Charges for Export* SubReport.

1. Open the *Service Detail With Charges for Export* SubReport in Report Builder.

2. Add the hidden Parameter.

- Right-click Parameter and select *Add Parameter*
- Add the hidden Parameter Name and Parameter Value as shown in the image below.
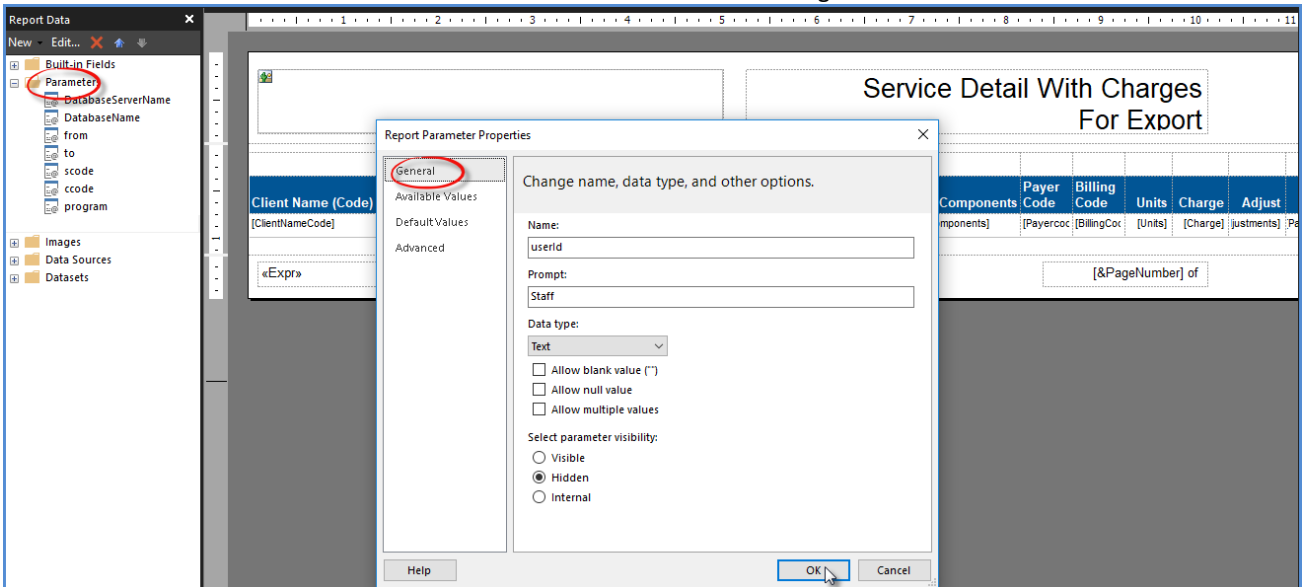
-
- Select ok

3. Review the Parameter list to ensure the new Parameter displays in the list in the exact location as listed in the *Use these parameters to run the report* section of the *Go to report Actions.* (Step 5 above.)
- On the SubReport Parameter list, the userId parameter is last after the program.

-
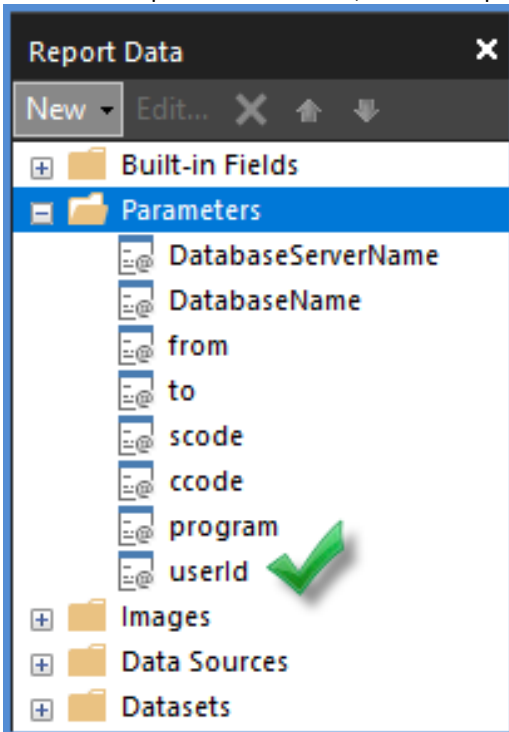
- On the *Go to report Actions,* userId is also last on the list after the program.
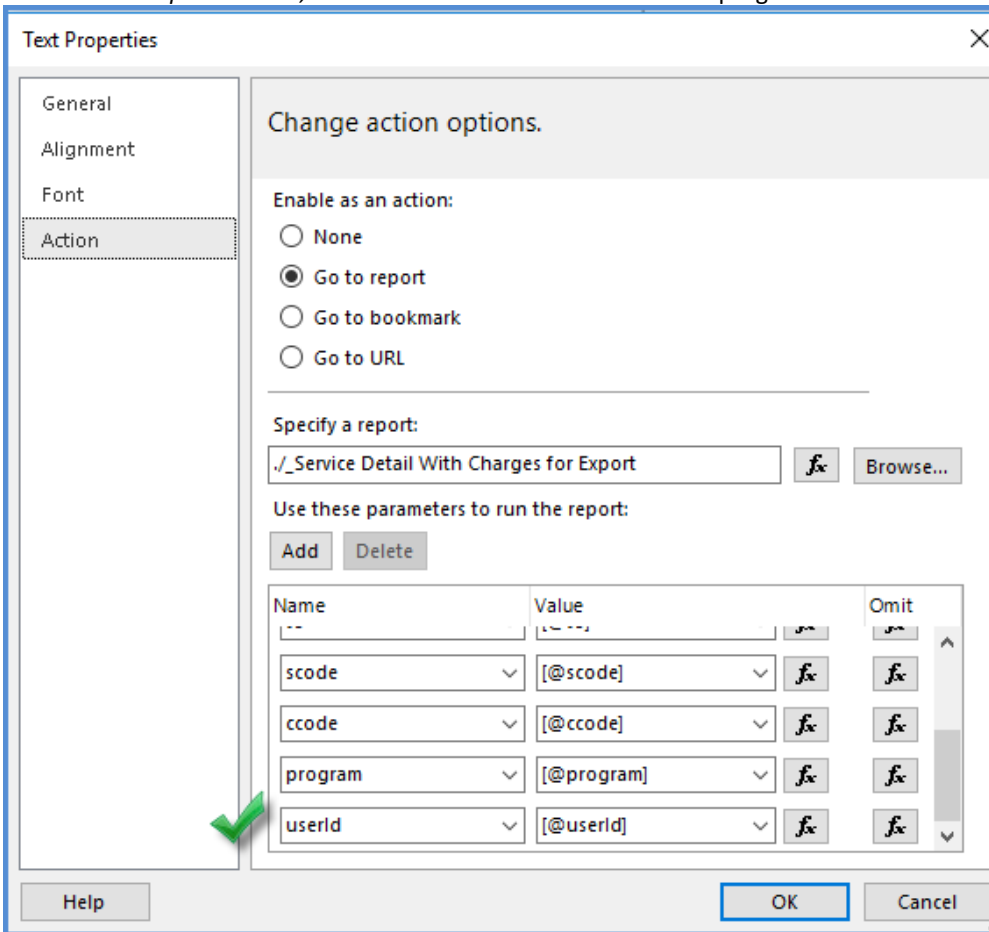
4. Edit DataSets related to Client information. For this SubReport, these are the same actions as Steps 1-4 of the *Edit DataSets related to Client information section above.*

- Step 1 – Add Parameter to the *Details* DataSet.
- Step 2 - Alter the Query for the *Details* DataSet.
- Step 3 – Add the Parameter to the *ClientData* DataSet.
- Step 4 – Alter the Query for the *ClientData* DataSet.

Upload Edited Reports to EchoVantage

When all necessary edits are complete for applying Client List Filters to reports, the updated report .rdl files must be uploaded to the EchoVantage SSRS report server.