Welcome to the
NextGen Upgrade
v.5.9.2020.1 Webinar

The presentation will begin shortly.

Please note that all attendees are in listen only mode.

Inquiries may be submitted using the **Questions** window.

A recording of this webinar will be sent out to all attendees.

Presented by: eMedApps™ Smarter. Faster. Easier.

About eMedApps

eMedApps is a Healthcare Information Technology Services company providing practices, clinics and hospitals with a full range of services, as well as a suite of products designed to increase efficiency and facilitate communication.

- Founded in 1999
- Working as partner with NextGen since 2001
- Worked as subcontractor for NextGen
- Serving healthcare clients across USA
- Services and Products for NextGen clients

eMedApps™

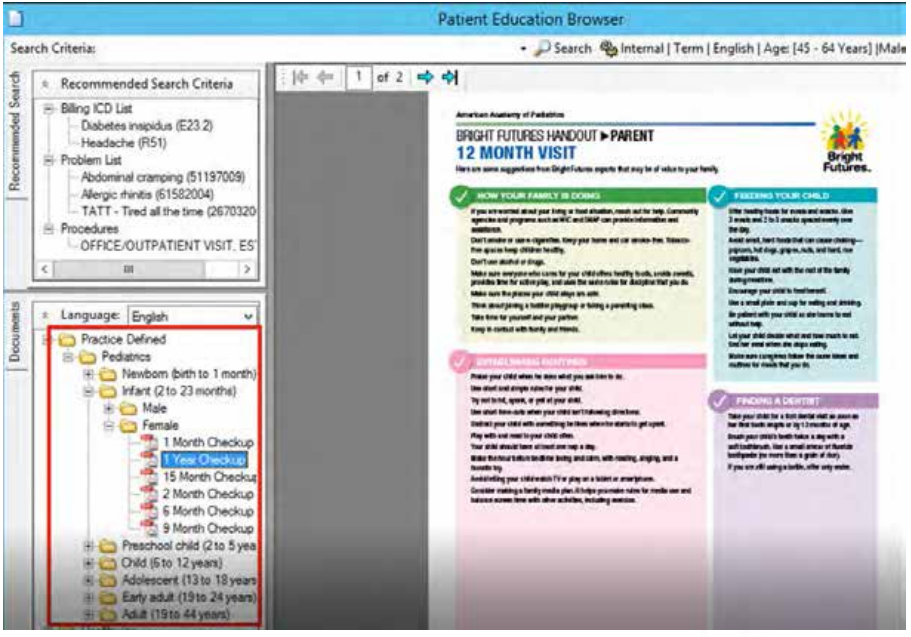
eMedApps.com

NextGen Upgrade 5.9.4/8.4.4 Spring 2020 v.5.9.2020.1

EHR

Practice Defined Patient Education Now Available

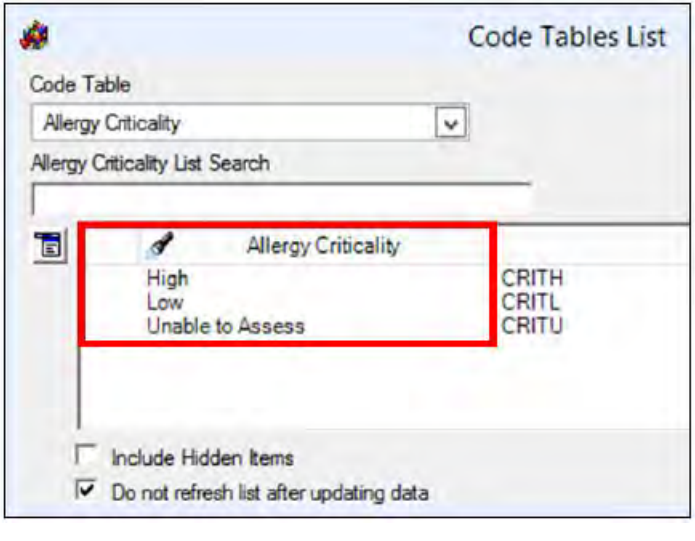
- Similar integration as HealthWise
  - Brower
  - Button triggers, etc.
  - Fax, Save, Send to Pt Portal
  - Advanced Audit



***Configuration Required*

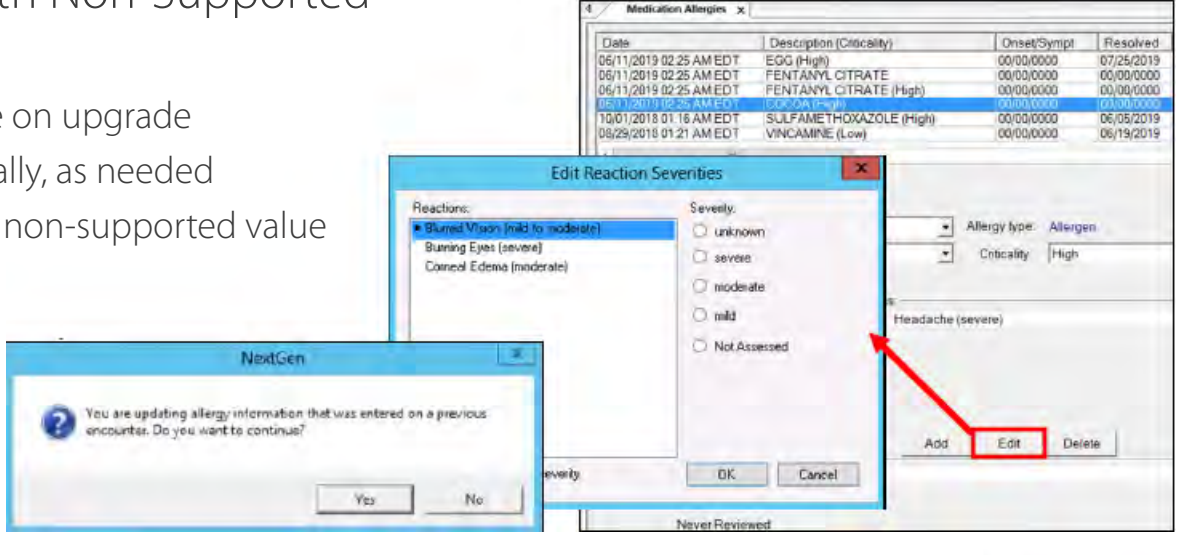
Updates to CCDA R2.1 Validator

- Meets MU3 Standards
- Allergy Criticality Code Table
- Updated Allergy Severity List to contain only:
  - Mild
  - Moderate
  - Severe
  - Unknown
- Removed:
  - Fatal
  - Mild to Moderate
  - Moderate to Severe



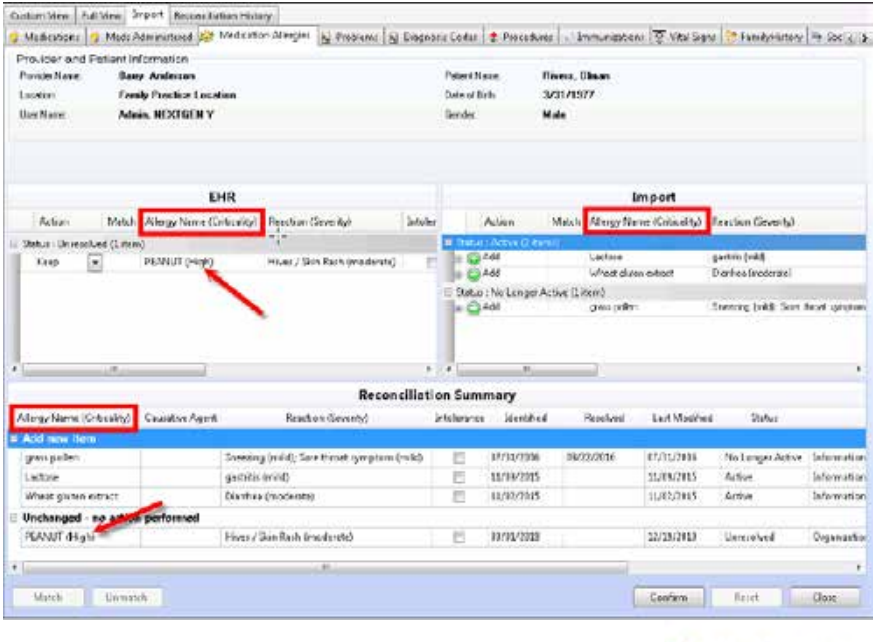
Allergy Module

- Patient's with Non-Supported Values
  - No change on upgrade
  - Edit manually, as needed
  - * indicates non-supported value



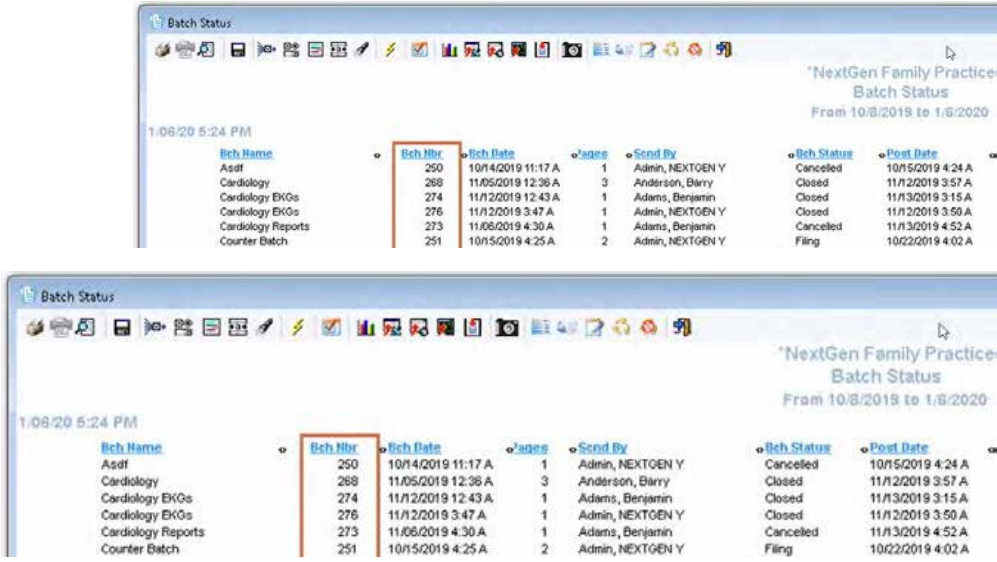
Clinical Reconciliation

- Allergy Criticality Added
- Visible in All Sections
  - EHR
  - Import
  - Reconciliation Summary



Document Management

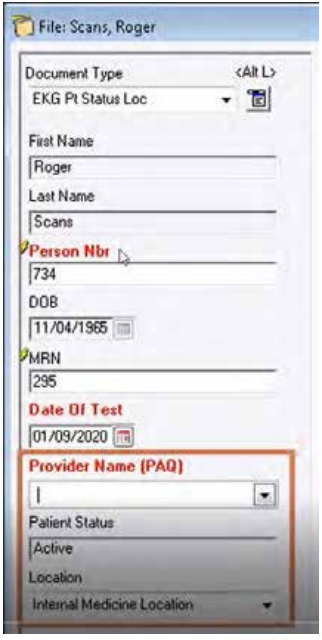
- Added the batch number to the batch status report
  - When reports are ran, the performance is not degraded
- Auto launch image batches screen
  - User preference
- New Report 'Patient by document type'



***Configuration Required*

Document Management Filing Process

- Better option to send images for PAQ or bypass PAQ through Patient Status and Location fields
- Reduce the number of scanned images to review and sign in the PAQ



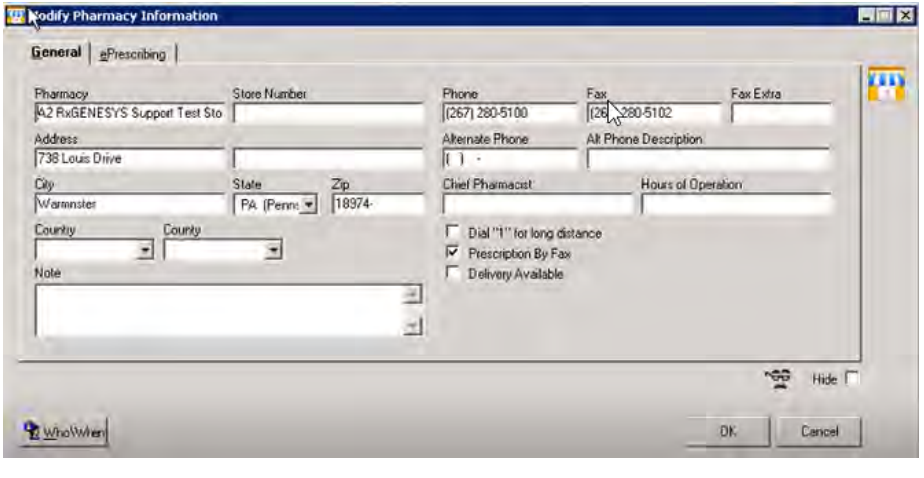
***Configuration Required*

Medications: NCPDP Version 2017071

- NCPDP: National Council for Prescription Drug Programs
- New version 2017071 (old version 10.6). SureScripts will only support 10.6 until 12/01/2020.
- SureScripts maintains pharmacy and provider directories. These directories have been updated to support 2017071.
  - Areas impacted:
    - New admin console (used by NG Support for eRX message management)
    - Pharmacy downloads
    - Provider downloads
    - Provider enrollment and enrollment updates
  - Will not directly impact practices and/or providers
    - **Respond to all eRX messages prior to upgrading**

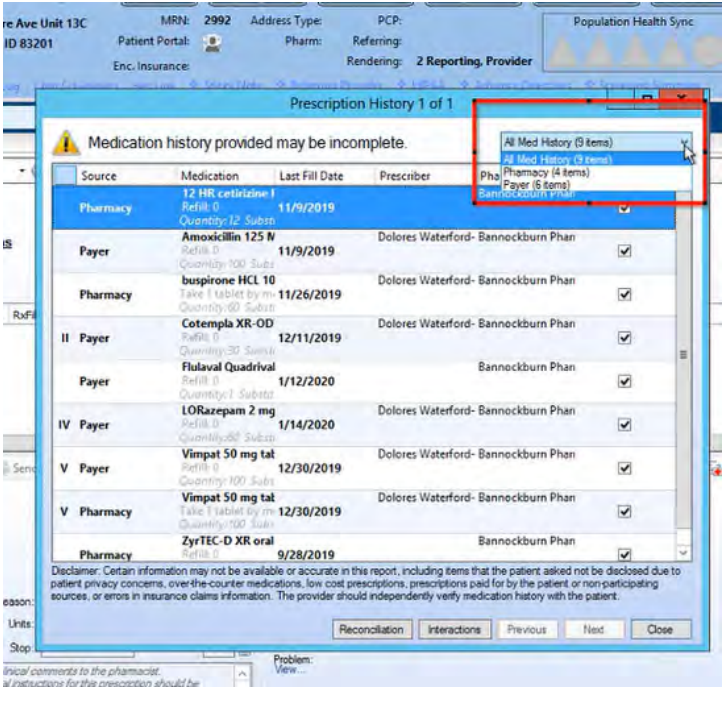
Medications: Directories v.6x

- Changes Include:
  - Pharmacy Name increased from 35 to 70 characters
  - Pharmacy Address like 1 and 2 increased from 35 to 40 characters
  - Country Code is now required
  - Practice Name increased to 40 characters
  - PM Chief Pharmacist added to the pharmacy lookup window
  - Any reports modified to include more characters
  - Person Merge allows for the 70 character pharmacy name



Medications: Medication History v.3x

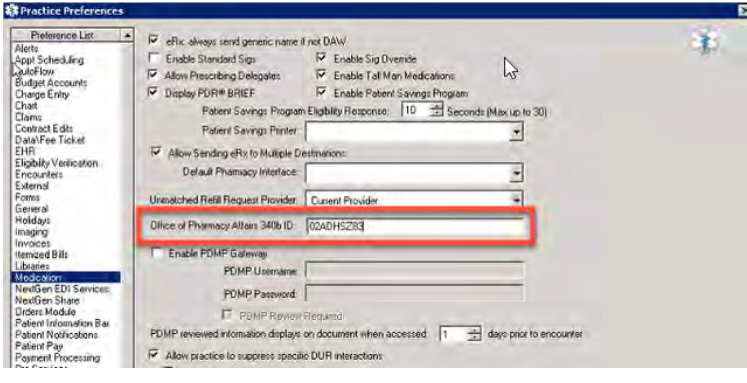
- RxEligibility must be ran prior to receiving Medication History for a patient.
  - SureScripts requires an appropriate eligibility response.
  - Medication History button will remain disabled until one of the following responses are returned:
    - Eligible
    - Multiple Eligibilities
    - No Eligibility
    - Patient Not Found
  - Single request is now sent for both claims and pharmacy data
    - Up to 300 medications can be returned in a single request
    - Increased data from 50 to 500 per page
  - Clinical Reconciliation Module updated to support these standards

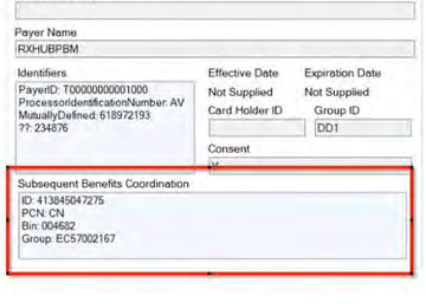


Medications: New Rx Updates

- Changes Include:
  - 340B field

  need to remove from address line 2, upon upgrading
  - Subsequent Benefits Coordination Field: patient savings and benefit coupons. No change needed, if already using.
  - Pt Height and Weight will now be transmitted with prescriptions
  - Quantity Unit of Measure (QUOM)
    - First Databank removed over 50 unit codes
      - Bottle
      - Container
      - Inhaler, etc.
    - This will be included in the Spring 2020 Medication Update. NextGen will retain retired codes for a period of time.
    - Providers will need to update their favorites.
  - Allowable SIG characters updated from 140 to 1000



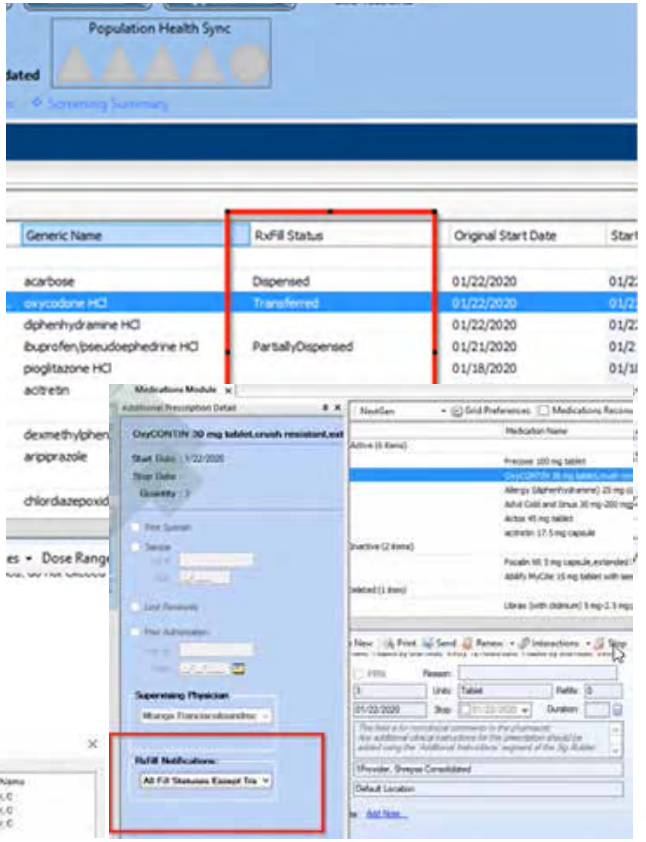


Medications: Renewal Requests

- Pharmacies can now request a specific number of refills in the request
- Provider can modify the quantity of the renewal prior to approval
- Inbox will always show the most recent request in times where multiple requests are sent for the same prescription
- Renewal request can now only be Approved or Denied once in a 24 hour period
- New Response Options
  - Approved with Changes
  - Denied, New to Follow

Medications: Rx Fill

- Service that provides details on the pharmacy dispense activity for a particular medication
- Details return directly to the medication in the patient's chart
  - RxFill Status Column
- Providers can determine which level of RxFill notifications they want to receive
  - Can be determined on a per prescription basis, before sending to the pharmacy
- RxFill History is also available



***Enrollment Required – If already enrolled, update the enrollment*

Medications: Rx Change

- Service that allows pharmacies to send messages to a Provider's inbox when a change is needed for a prescription
  - Generic Substitutions: Provider can edit the response before sending
  - Therapeutic Interchange: Provider can edit the response before sending
  - Drug Use Evaluation: Provider can edit the response before sending. Now separate from Therapeutic Interchange
  - Script Clarification: Provider can edit the response before sending. Now separate from Therapeutic Interchange
  - Prior Authorization Required: No changes
  - New Response Types:
    - Out of stock – Provider can reply with another medication
    - Prescriber Authorization – Provider can reply with necessary info

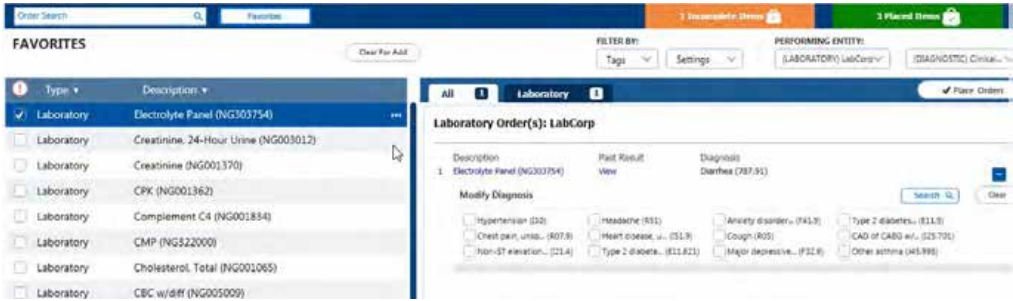
Medications: Rx Change

- Prescriber Authorization – Provider can reply with necessary info

  - **State License status-** Prescriber must confirm their State license status
  - **DEA License status-** Prescriber must confirm their DEA license status in prescribing state
  - **DEA registration status by DEA class-** Prescriber must confirm their DEA registration by DEA class
  - **State controlled substance registration license status-** Prescriber must confirm their State Controlled Substance Registration license status
  - **Prescriptive authority prescribed product registration class-** Prescriber must confirm their registration by State Controlled Substance Registration class
  - **NADEAN license effective date-** Prescriber must confirm their NADEAN license status
  - **NPI-** Prescriber must obtain/validate NPI
  - **Prescription benefit plan enrollment date-** Prescriber must enroll/re-enroll with prescription benefit plan **(This enrollment is NOT completed within NextGen)**
  - **Prescriptive authority prescriber type-** Prescriber must confirm prescriptive authority criteria for prescribed medication is met
  - **REMS enrollment date-** Prescriber must enroll/re-enroll in REMS **(This enrollment is NOT completed within NextGen)**
  - **Assigned patients lock-in date-**Prescriber must confirm their assignment as patients' lock-in prescriber
  - **Supervising provider-** Prescriber must obtain/validate their supervising prescriber
  - **Certificate to prescribe status**

Medications: CPOE

- Can be used in place of current workflow for all Lab, Radiology and Immunization Orders
- Uses most existing set up, some addtl configuration required
- Orders can be placed, modified, etc. in the workflow
- ElasticSearch based search engine housed in Amazon Web Services
- Returns results across all order types
- Search action is triggered after 2 characters
- 3 ways to find tests:
  - Common orders – most frequent orders by user
  - Favorites
  - Categories, now Tags
    - Each user can choose the Tags they prefer

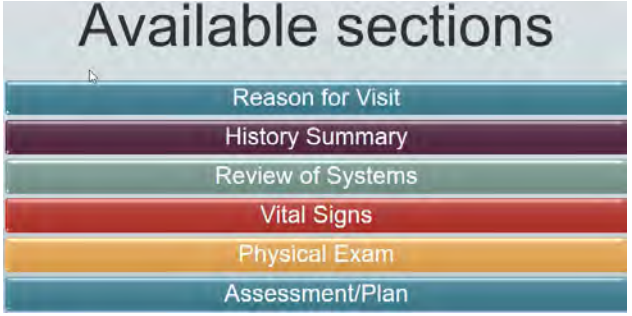


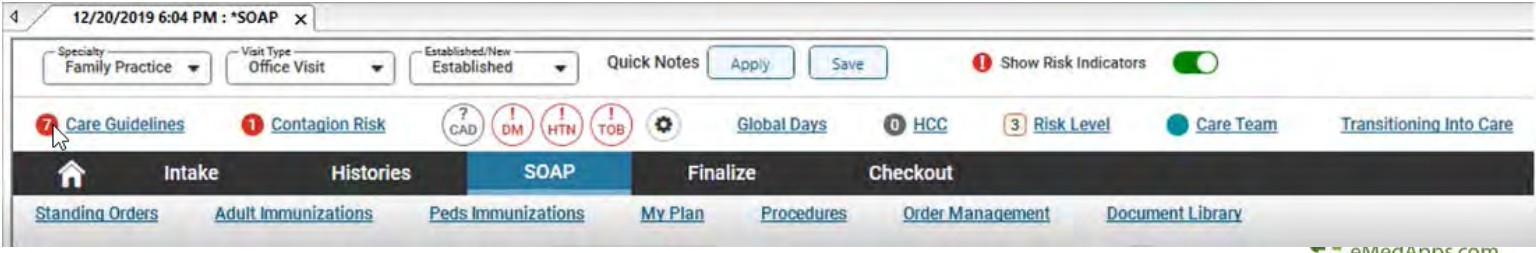
***Configuration Required*

Adaptive Content Engine

SOAP Template Redesign

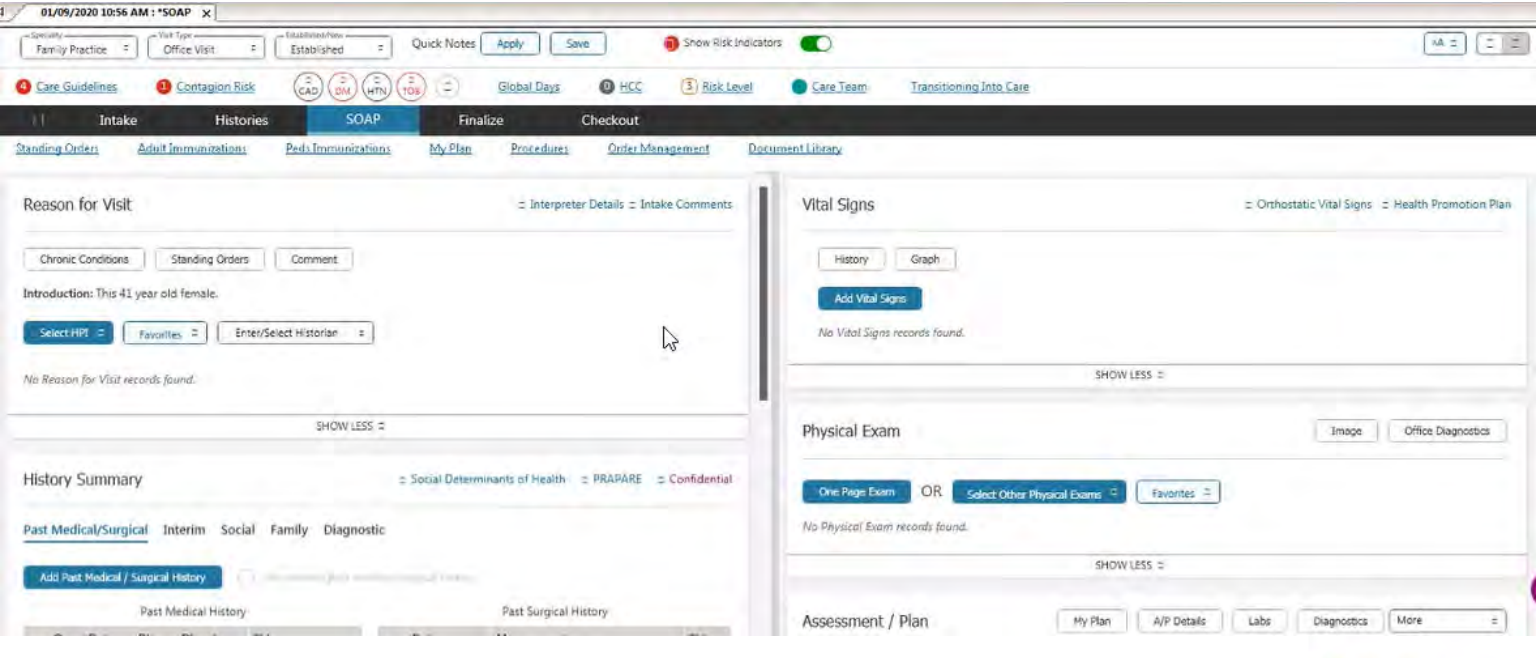
- SOAP template has been redesigned as the next stage of the ACE
- Goal is to improve the user interface and workflow
- Choose template view
- Resize columns and sections
- Change font size on the fly
- Configure buttons on Framework Content
- Can select a single column or Two column view
- "Cards" – Can expand/collapse cards
- Sidebar on the Right





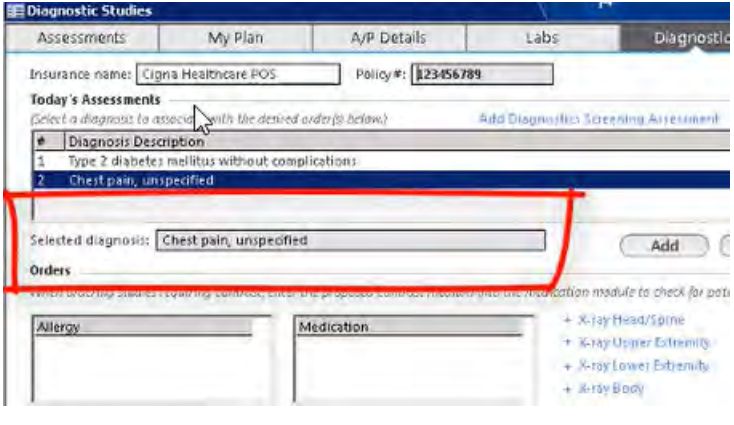
***Configuration Optional*

SOAP Template Redesign



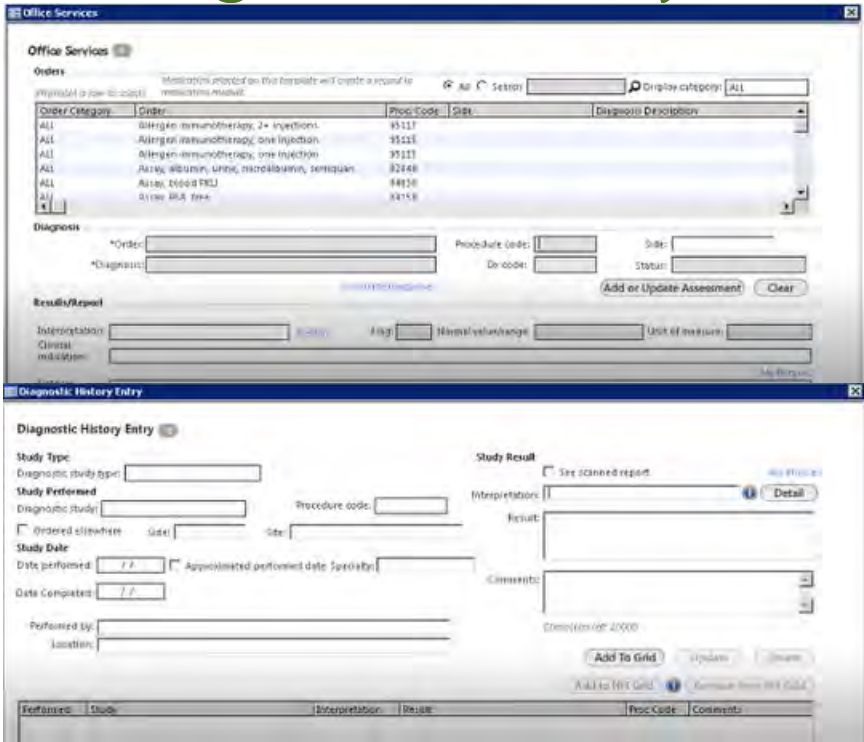
Order Assessment

- The system will remember the last selected assessment on any template where orders are created



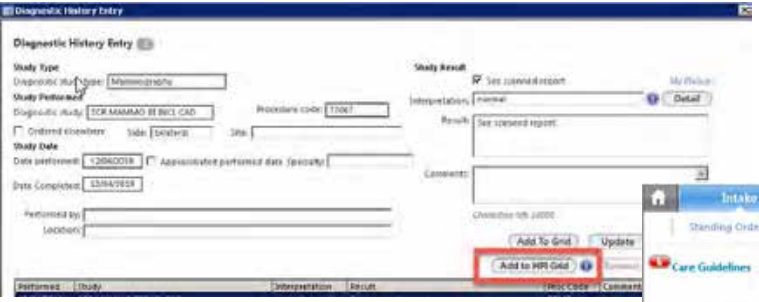
Split Office Services/Diagnostic History

- Previously there is a template that combines Office Services and Diagnostic History
- These templates were split into their own separate templates
- No functionality changes



Diagnostic History to HPI

- Clinical staff often review Diagnostic tests with the patient and need a way to easily add this review to the Reason for Visit documentation
- ‘Add to HPI grid’ new button
- Required diagnostic history data must be completed first

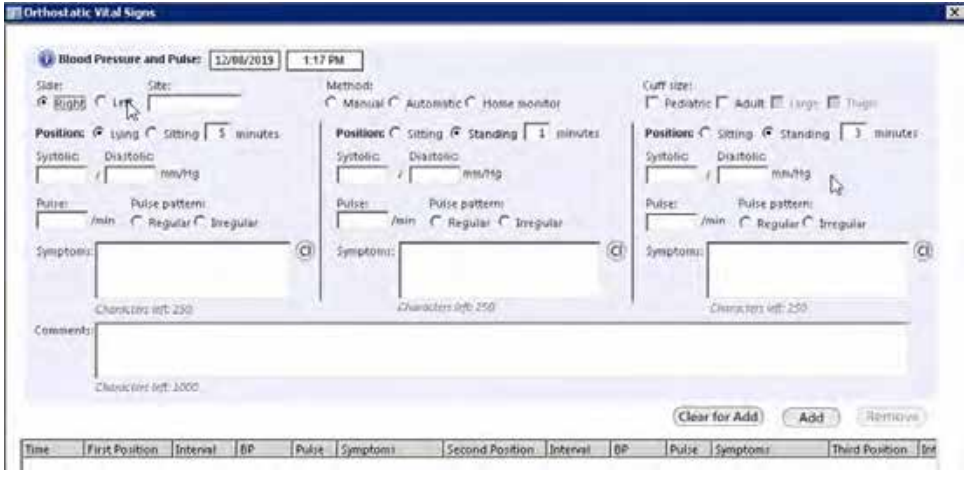


Orthostatic Blood Pressure

- The CDC has updated their guidelines for Orthostatic Blood Pressure
- EM Coding Points are built into the template
- Saves to a separate Orthostatic grid

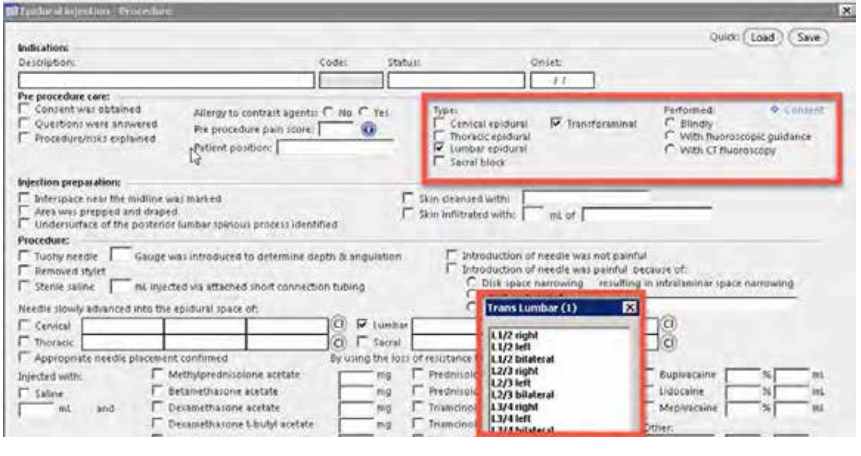
The CDC has updated their guidelines for Orthostatic Blood Pressure

Have patient lay down for 5 minutes	Measure BP and Pulse	Have patient stand	Check BP and Pulse after standing for 1 and 3 minutes



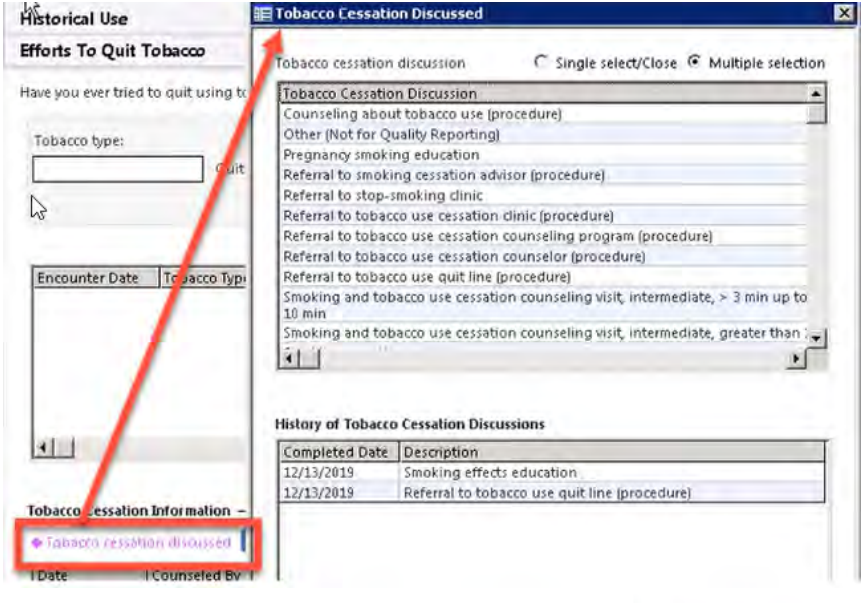
Epidural Injections

- A new picklist was added to indicate right, left or bilateral when transforaminal is selected
- Blindly radio button will be disabled when transforaminal is selected
- Epidural space option auto-selects when the corresponding type is selected
- Caudal Block was changed to Sacral Block



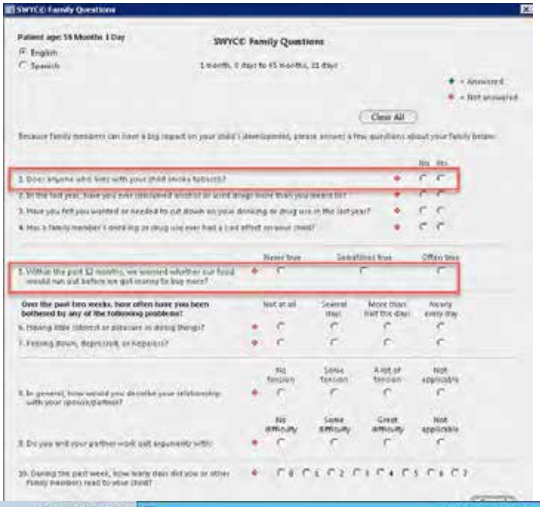
Tobacco Cessation

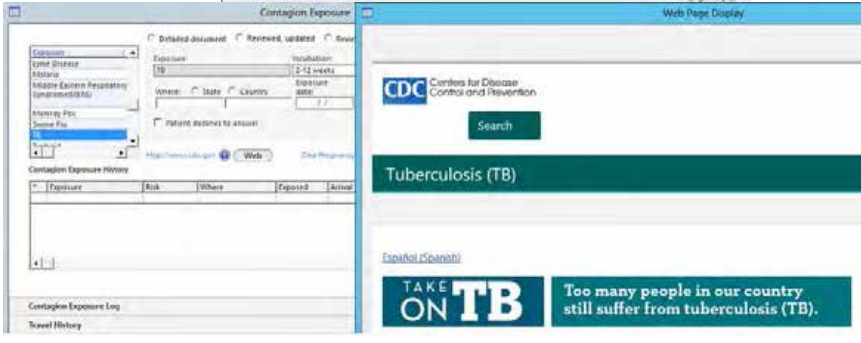
- Workflow tied to the quality measure CMS 138
- Checkbox changed to a link to allow for more specific selections and multi selections



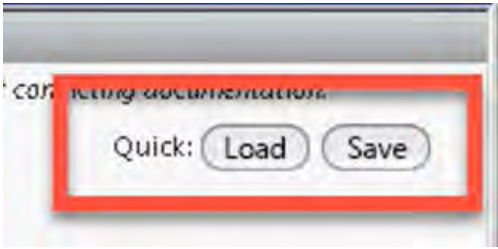
Template References

- Changes have been made throughout the templates to update to the latest references and versions of clinical data.
  - Care Guidelines
  - Recommended Care
  - Order Sets
  - Screening Tools
  - Vital Signs
- Examples
  - SWYC: Includes a 10th question and verbiage change to questions 1 and 5
  - Many web reference links
  - A full list of reference changes are listed in the release notes

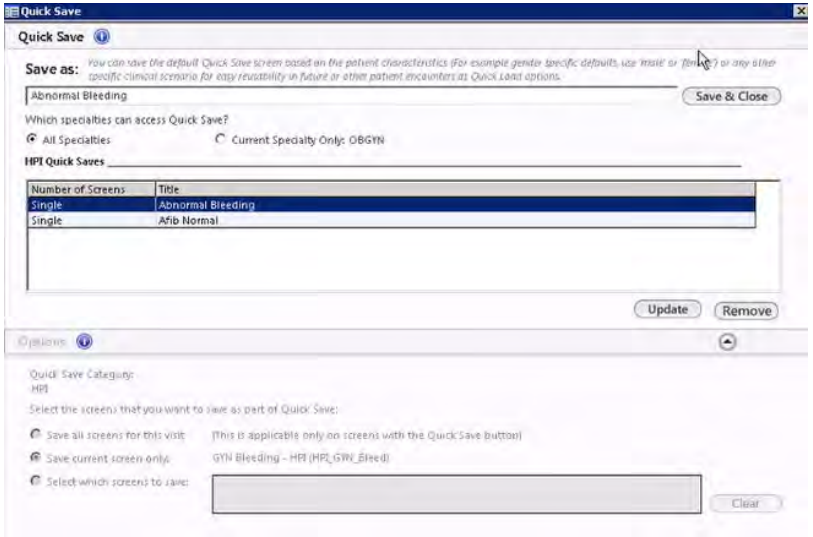




Simplify Quick Saves

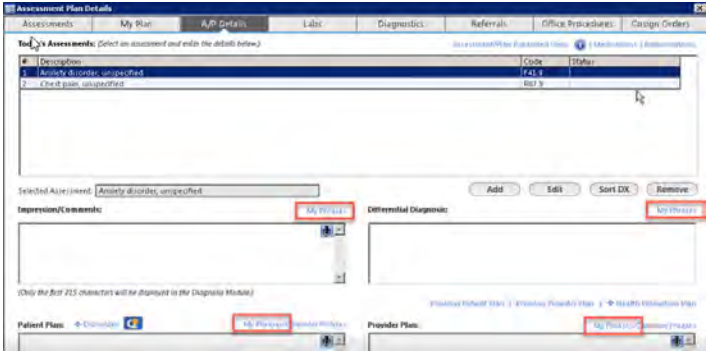


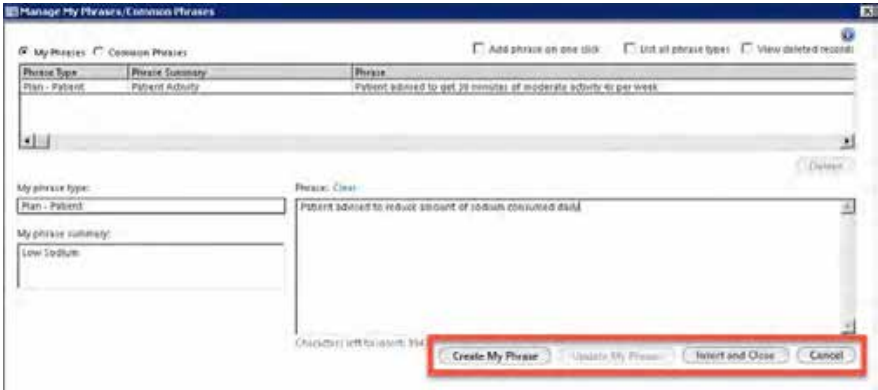
- New Icons
- Usability improvements
  - Changed to display name of the template vs template name
  - Options available
  - No need to change existing defaults
  - Process is very similar, just reduces the steps



Simplify My Phrases

- In prior versions, 3 options:
  - Insert My Phrases
  - Management My Phrases
  - Common Phrases
  - Now combined into 1 link
- Usability improvements
  - No need to change existing defaults
  - Process is very similar, just reduces the steps





Patient Education

- Two new checkboxes added anywhere Pt Education is on the templates.

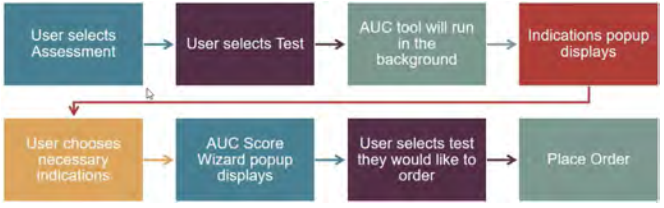
Updated Document Formatting

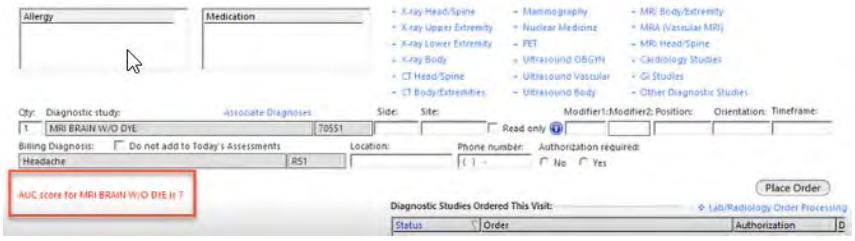
- Updates were added to 13 documents including all their associated sub-documents to standardize formatting.

Section	Font	Size(pt)	Style	Case
Patient Name only (Exception) Section sub headers (like) HPI	Calibri (body)	16	Bold	Title case
Patient information, Document Text and Paragraphs	Calibri (body)	12		
Section Header and Grid Header(Based on the Headers)	Calibri (body)	16 or 14	Bold	Title case, No Colon
Sub Header	Calibri (body)	14	Bold	Title case, No Colon
Grid Column Header,Grid Content	Calibri (body)	11	Bold	Title case, No Colon,Grid should be alternate color Alternate color (Even) - 239,241,244
(Exception) Section Headers (like) Physical Exam, ROS,HPI Problem List,Assessment and Plan and Vital Signs	Calibri (body)	18	Bold	Title case

Document	Specialty
AB_Master	Abortion
ASC_Master	Ambulatory Surgery
CARD_docVisit	Cardiology
dermatology_master	Dermatology
gi_master	Gastroenterology
GYN_Master	Gynecology
Master_Im	Family Practice
neu_master	Neurology
nsg_master	Neurosurgery
OB_Master	Obstetrics
onc_master	Oncology
sur_master	General Surgery
uro_master	Urology

AUC



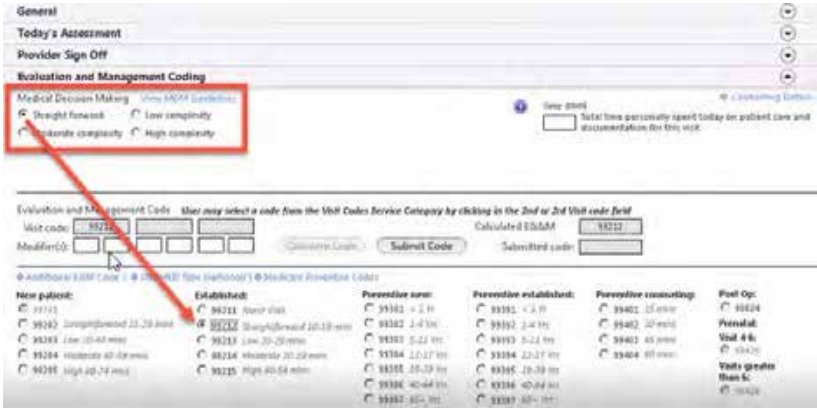


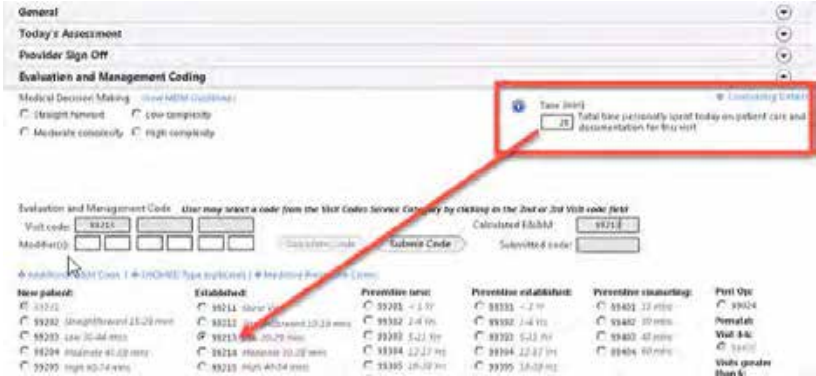
- AUC (radiology score) has been in many versions, but practices will not be complaint until they upgrade to 5.9.4
- Jan 2020 Testing Period/Practice Year
- Jan 2021 Start Date/Payment at Risk
- NextGen will be updated to work with the new CareSelect version 15
- Enhancements:
  - AUC Score and modifier will be displayed on templates, requisitions, claims and HL7 interfaces
  - No Appropriate Indication option added (results in no AUC score)

***Standard AUC Configuration Required*

E&M Coding

- AMA & CMS have made a number of coding and payment changes for E&M Office Visits
  - Reduce the administrative burden
  - Improve payment accuracy
  - Effective Jan 1, 2021
- History and Physical Exam will no longer be used as determining factors for the E&M code level (no points)
- Medical Decision Making and Time will be used to determine the code level 99202 - 99215
- 99201 will be removed
- View MDM Guidelines link updated

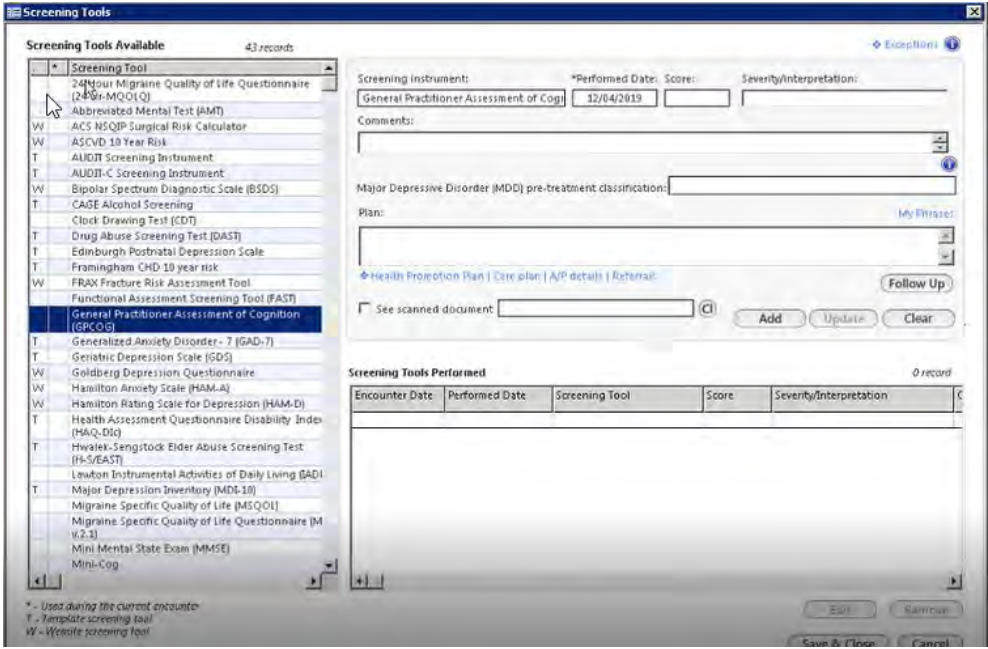




***Configuration Required*

Screening Tools

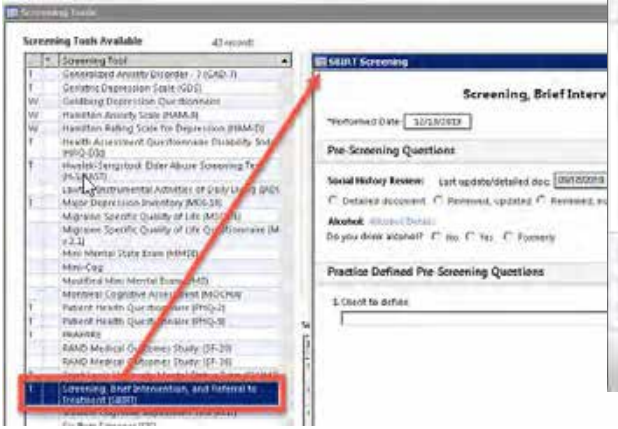
- Screening tools are listed in a grid format that allows unlimited entries
- Details are completed to the right of the list and saved to the grid below
- New plan section
- New functionality to log the screening tools used in an encounter for measure reporting purposes
  - Configuration can be used to add new screening tools to the list, if desired

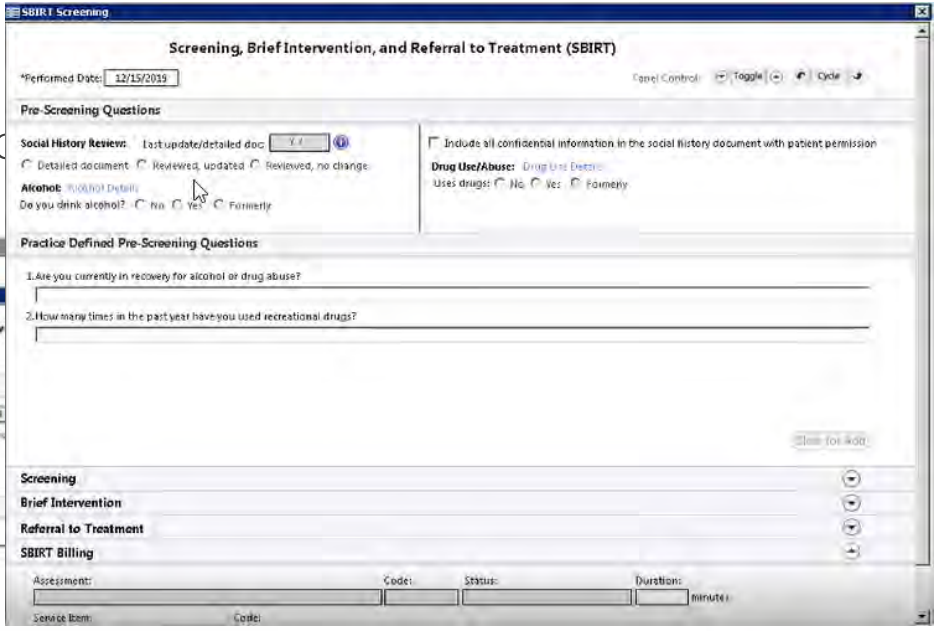


**Configuration Optional*

SBIRT

- New popup
- Included in Screening Too

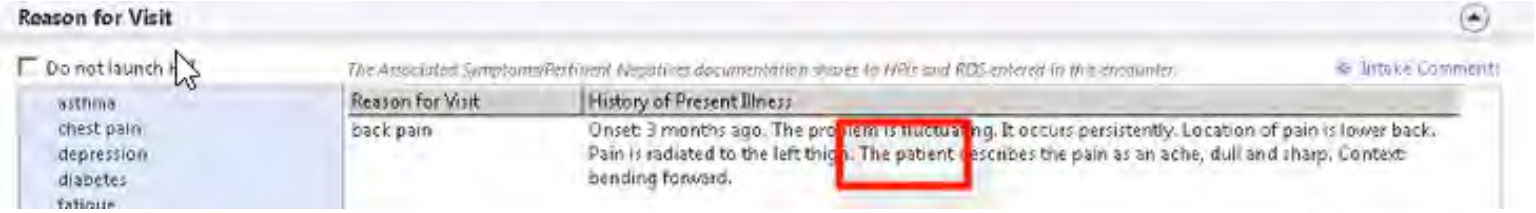




***Configuration Optional*

SOGI: Replace Pronouns

- Patient pronouns are used through the chart.
- In prior versions these were based on birth sex
- Updates were made to allow these pronouns to be replaced with generic statements
  - 'The patient' or 'The client'



***Configuration Required*

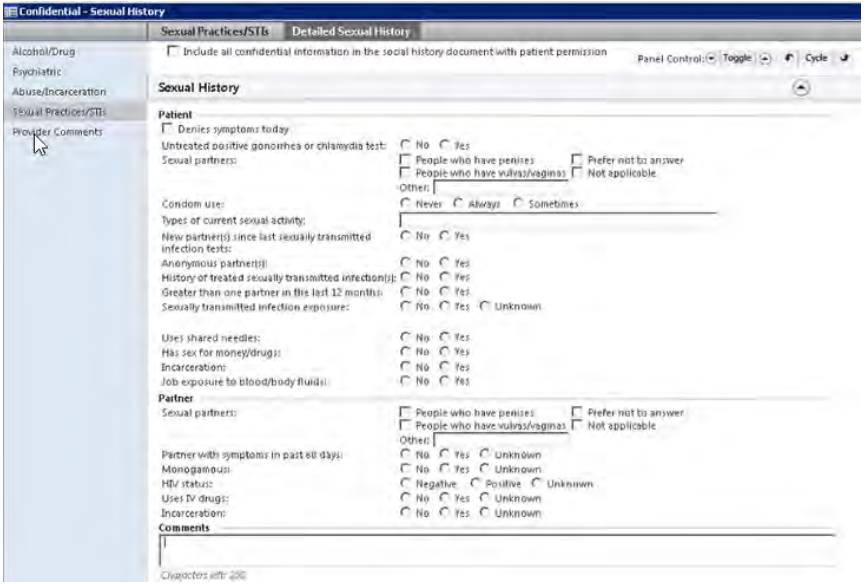
SOGI: Display Gender Data on Document

- New setting to determine which specific gender data will display on the patient document header.
- 3 Options:
  - Birth Sex
  - Current Gender
  - Gender Identity

***Configuration Required*

SOGI: Sexual History

- New template used to document Sexual History
- Part of the Confidential Social History templates
- Used to document sexual history for transgender patients or any other patients



***Configuration Required*

SOGI: Gender Neutral ROS/PE

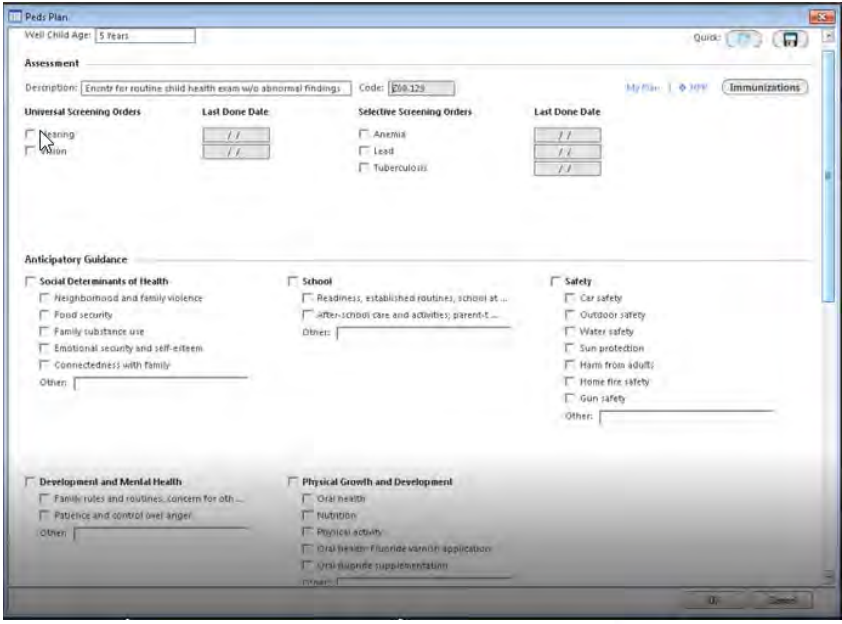
- New functionality that will launch a gender neutral version of ROS or PE templates
- Previous versions launched gender specific templates based on birth sex
- This feature is optional
- Can launch General ROS – Neutral

***Configuration Required*

Pediatrics

Bright Futures 4th Edition Content

- Impacts 20 age specific pop ups
- Updated all the pediatric plan pop ups for anticipatory guidance
- Can include practice specific items
- Bright Futures Patient Education is now available



***Configuration Required*

eMedApps.com

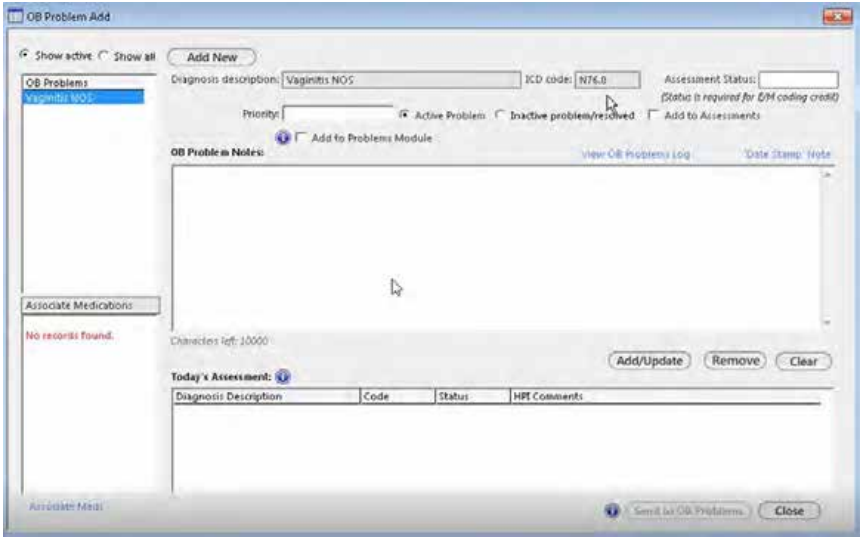
Women's Health
Family Planning

Ultrasound Panel

- Updates were made to the Ultrasound panel for both AB Intake and AB Pre-Procedure templates
  - No/Yes radio buttons for Cardiac activity
  - No/Yes radio buttons for Yolk sac
  - Ultrasound Type radio buttons

Codified OB Problem List

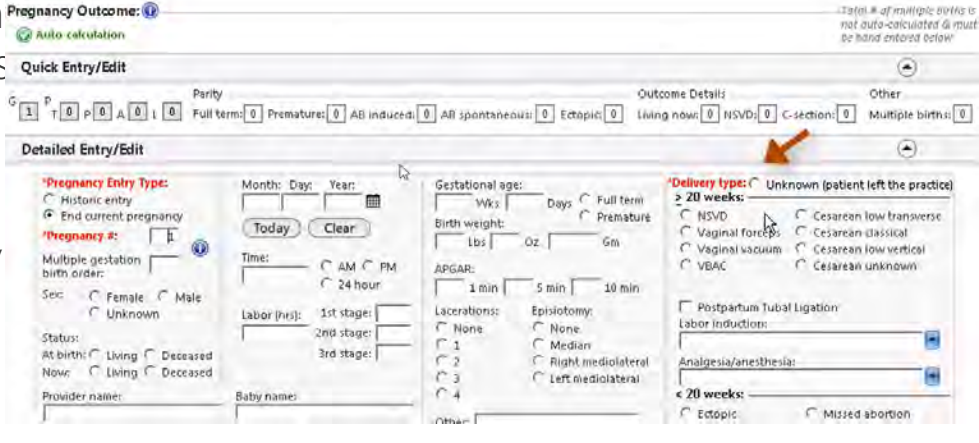
- Increased functionality to include ICD codes
- Ability to create OB Problem related reports
- Option to move the ICD OB Problem to the Problems module
- Move previous pregnancy OB problem into the current pregnancy
- The OB Problems are ICD coded, Not SNOMED coded



***Configuration Required*

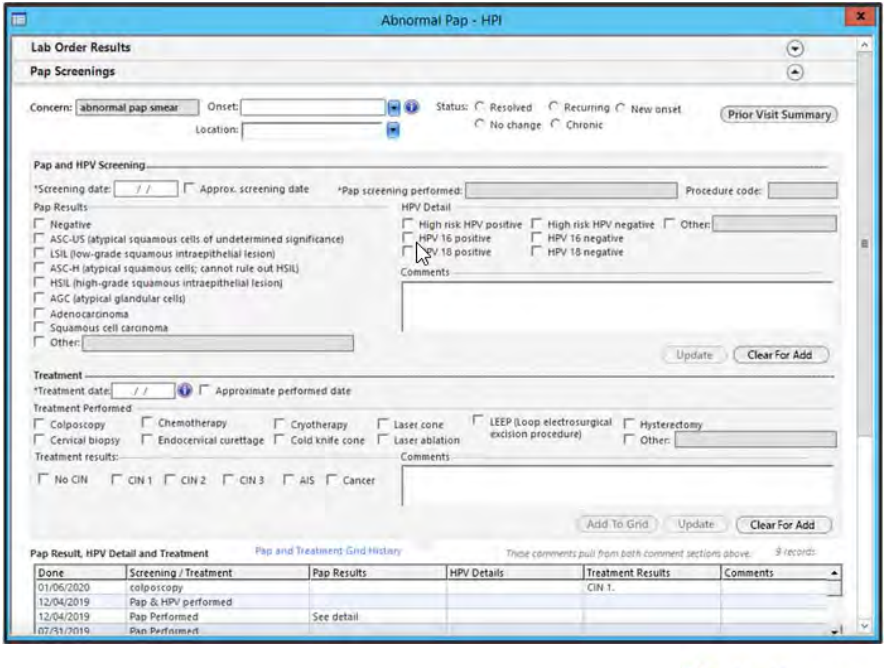
Solution for Patient's Who Leave the Practice

- A new delivery type of 'Unknown' was added on the Pregnancy Outcomes template
  - 3 required fields on the template:
    - End current pregnancy
    - Pregnancy #
    - Unknown (patient left the practice)
  - User must complete the first 2 fields for Unknown to be available/display



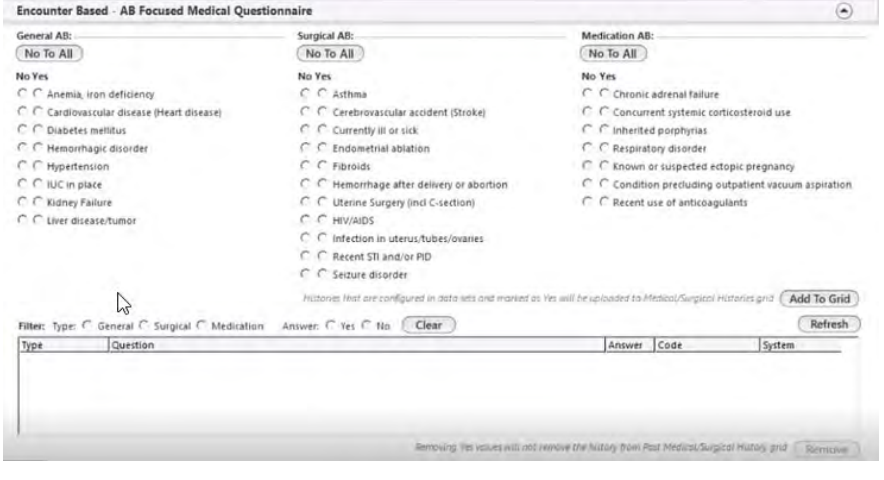
Abnormal Pap HPI

- Ability to create an appropriate E&M code
- Recognize the Pap screening date as the performed date
- Record treatment results for abnormal pap and/or HPV screenings
- Recognize recorded treatment and results associated with a Pap and/or HPV screening
- Edit Pap and/or HPV results (from Order Management)
- Added Historical Test – Quick Entry template



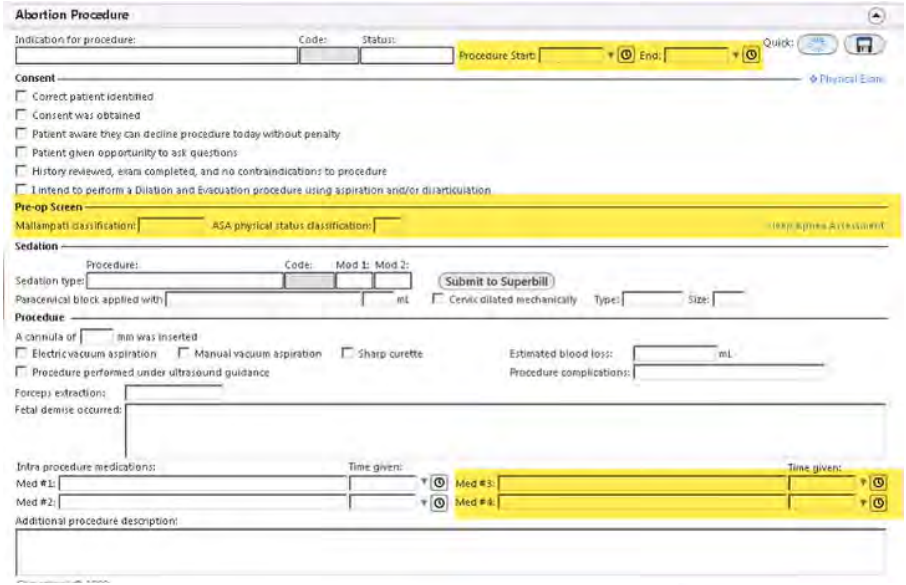
AB Intake

- New Panel: Encounter Based – AB Focused Medical Questionnaire
  - Data is preloaded, but Configurable (Data Sets)
  - Specific medical history details
  - SNOMED codified



AB Procedures

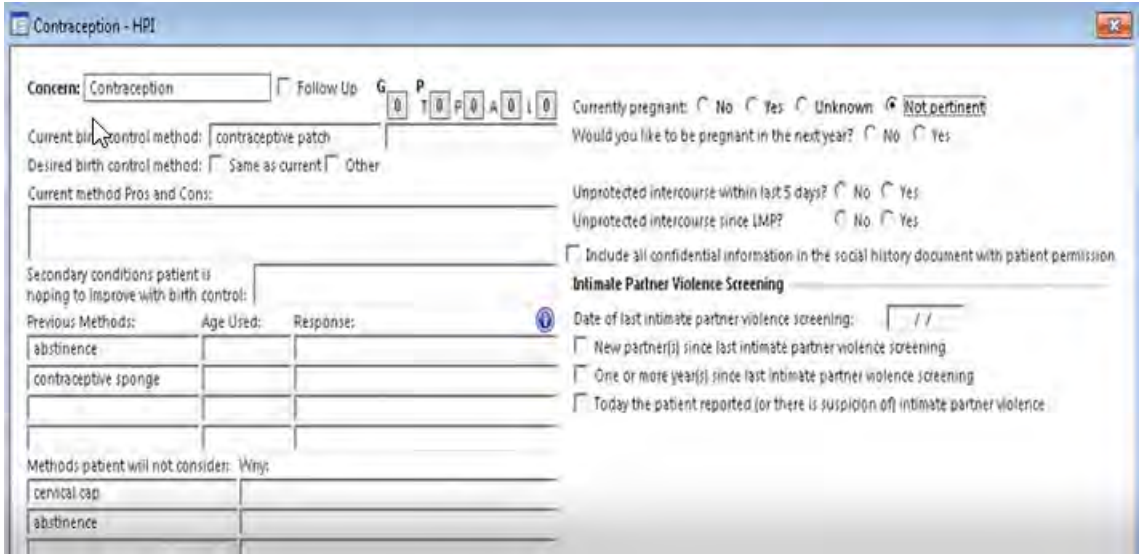
- AB Pre-Procedure
  - Added link for Sleep Apnea
    - Questions will need to be configured
- AB Procedure
  - Procedure Start and Stop
  - Mallampati and ASA physical status classifications
  - Intra procedure medications 3 & 4
  - Contraception and materials given



***Configuration Optional*

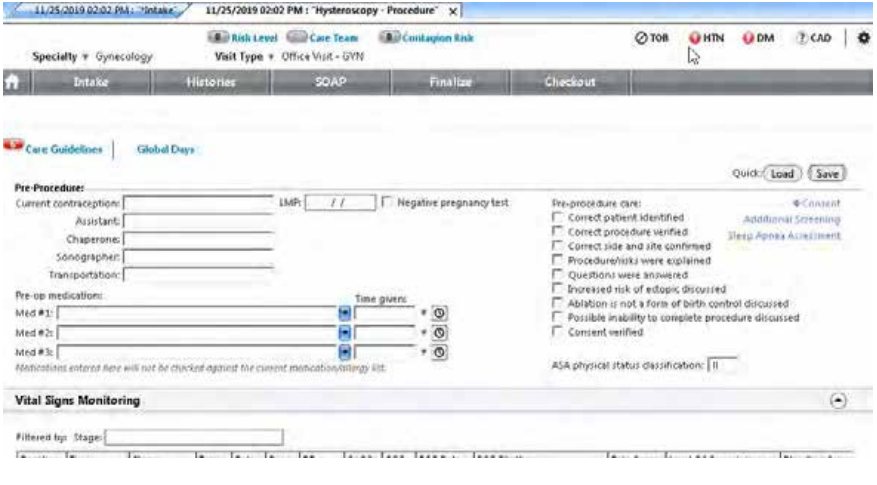
PPFA – Contraception HPI

- Provides the ability to record an HPI visit related to a patient's contraception and family planning information



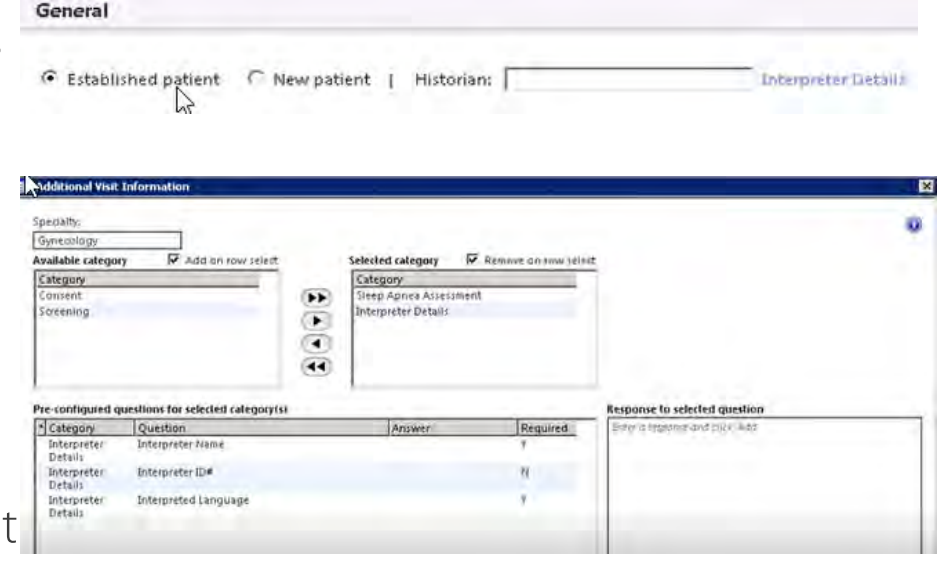
PPFA – Hysteroscopy/Ablation/Sterilization

- Hysteroscopy/Ablation/Sterilization have been combined from the 2-tab pop up template into a single medical record template
- A variety of enhancements were made to this template



PPFA – Interpreter Details

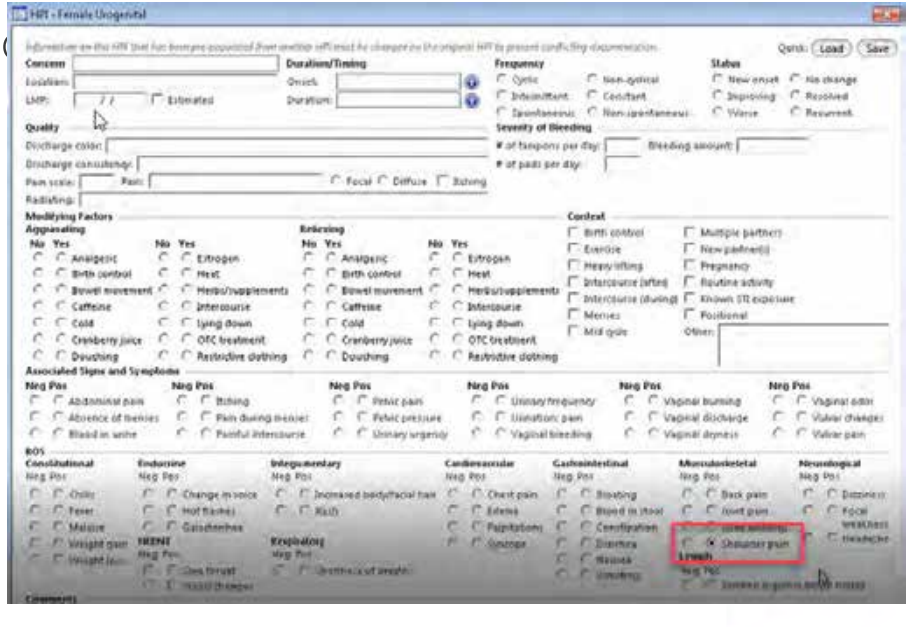
- Added interpreter details link added to *Intake, *SOAP and AB Intake templates
  - Interpreter Name
  - Interpreter ID#
  - Interpreter Language
- Other specialties can use this template by adding it to sub nav, etc.



**Configuration Optional*

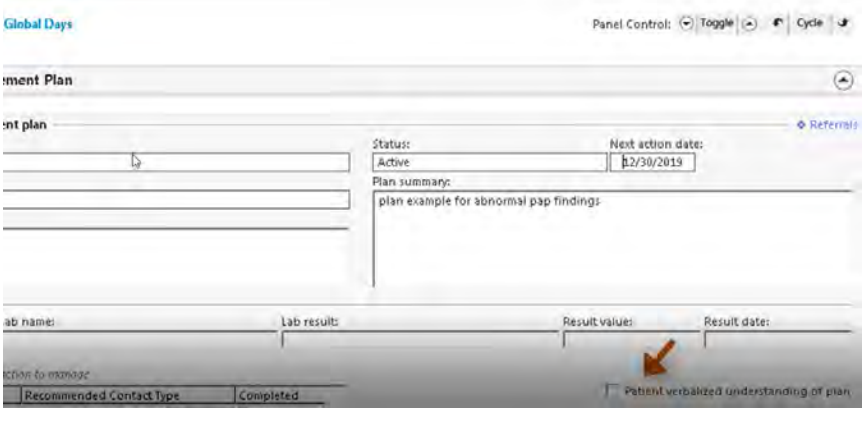
PPFA Protocols – Female Urogenital HPI

- Shoulder pain was adde
  to the HPI template



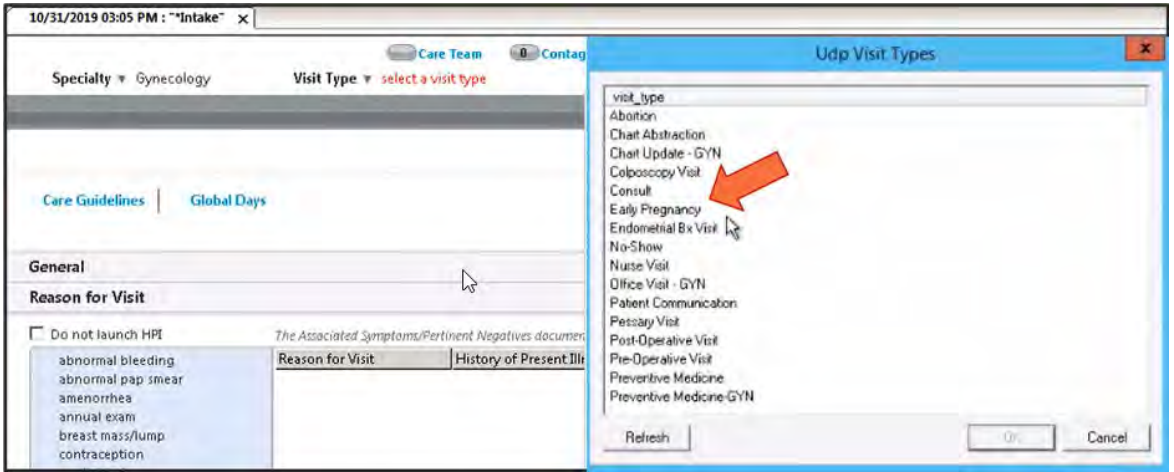
PPFA Protocols – Management Plans

- Checkbox added to indicate the patient has verbalized understanding of the plan
- Added new column called 'Pt Understands'
  - Management Plans template
  - Reports Data grid on Management Plans Reporting template
- Other specialties can use this template by adding it to sub nav, etc.



PPFA Protocols – Early pregnancy Evaluation Management Visit Type

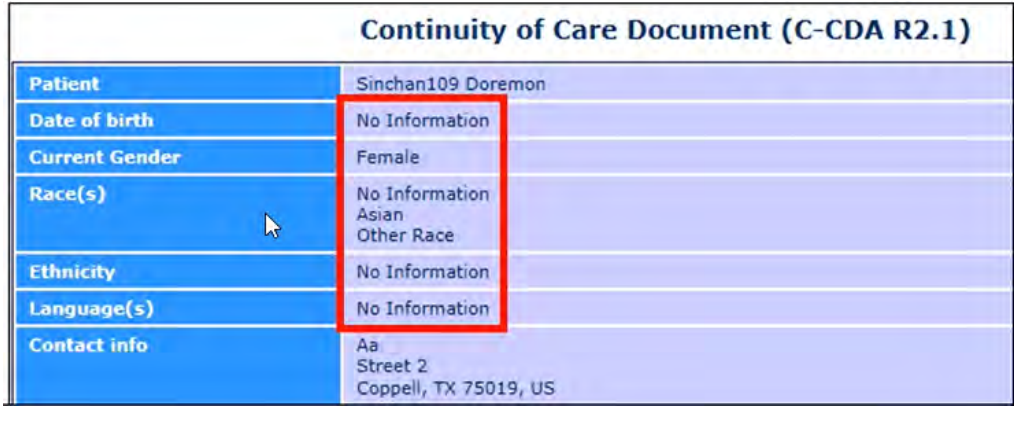
- A visit Type of 'Early Pregnancy' inside of the GYN specialty for the family planning workflow was created



Interoperability

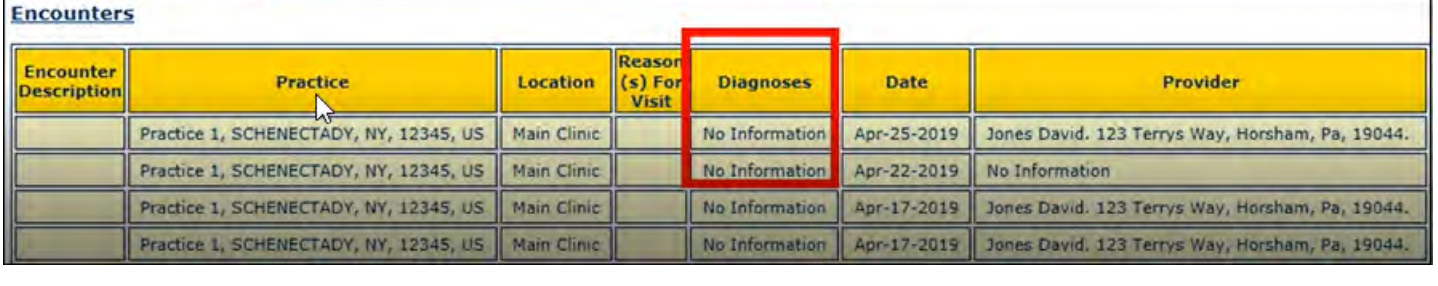
CCDA Enhancements

- 'No Information' Indicator vs blank as it displayed before



Continuity of Care Document (C-CDA R2.1)

Patient	Sinchan109 Doremon
Date of birth	No Information
Current Gender	Female
Race(s)	No Information Asian Other Race
Ethnicity	No Information
Language(s)	No Information
Contact info	Aa Street 2 Coppell, TX 75019, US



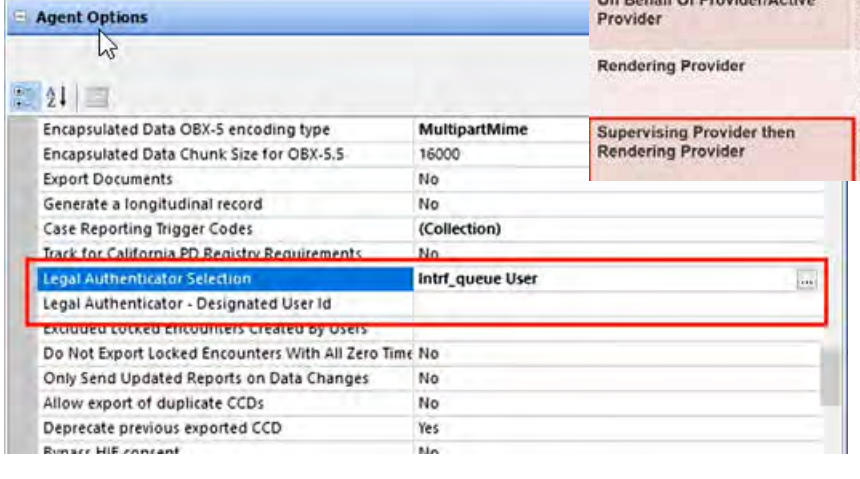
Encounters

Encounter Description	Practice	Location	Reason(s) For Visit	Diagnoses	Date	Provider
	Practice 1, SCHENECTADY, NY, 12345, US	Main Clinic		No Information	Apr-25-2019	Jones David. 123 Terrys Way, Horsham, Pa, 19044.
	Practice 1, SCHENECTADY, NY, 12345, US	Main Clinic		No Information	Apr-22-2019	No Information
	Practice 1, SCHENECTADY, NY, 12345, US	Main Clinic		No Information	Apr-17-2019	Jones David. 123 Terrys Way, Horsham, Pa, 19044.
	Practice 1, SCHENECTADY, NY, 12345, US	Main Clinic		No Information	Apr-17-2019	Jones David. 123 Terrys Way, Horsham, Pa, 19044.

CCDA Enhancements

- Provider or User as a Legal Authenticator (must be a person, not a system user)

Intrf_queue User *(default)*	User from *intrf_queue.created_by*.
Designated User Id	User populated in *Legal Authenticator- Designated User Id*. The selected user MUST be a person, not a system user.
Intrf_queue Provider	Provider in the *intrf_queueprovider_id* (if present) will be used for the Legal Authenticator. If there is no provider present in the *intrf_queue* table, the CCDA will not have a Legal Authenticator.
No Legal Authenticator	No Legal Authenticator present in the CCDA.
On Behalf Of Provider/Active Provider	On Behalf Of provider in MSU OR Active Provider in the EHR. Do not select this option if Automated CCDA Generation is supported. If selected, no Legal Authenticator will be present for automated generation.
Rendering Provider	Rendering provider on the *intrf_queue.enc_id* (if present) OR the latest encounter with a rendering provider. If this option is selected and no encounters have a Rendering Provider, the CCDA will not have a Legal Authenticator.
Supervising Provider then Rendering Provider	Supervising OR Rendering provider on the *intrf_queue.enc_id* (if present) OR latest encounter with a supervising/rendering provider. If the Supervising Provider exists it will be used, otherwise Rendering Provider will be used.



CCDA Enhancements

- Support for Veradigm (payer services): History and Physical
- 4 new CCDA sections
  - General status (Constitutional PE elements)
  - Physical Exam (All PE elements, other than Constitutional)
  - ROS
  - Past Medical History (Only past medical history)
- These sections are not codifed

General Status

Findings	Details
Comments	Posture - Normal posture Gait - Normal Hydration - Well hydrated
Normal	Quality of Voice - Normal.
*	Nourishment - Well-nourished, Well developed. Overall appearance - Cooperative, Not in acute distress, Not Sickly.

Physical Examination

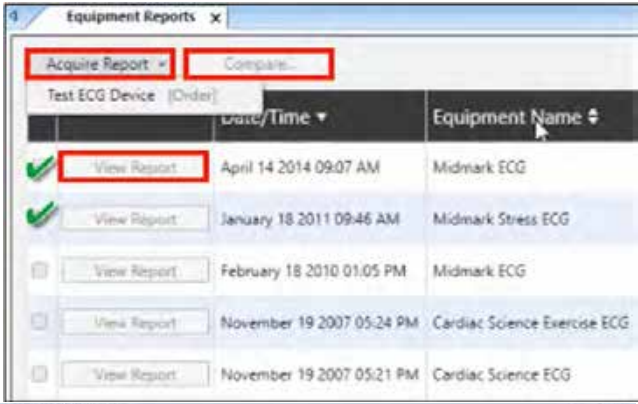
Exam	Findings	
Nose/Mouth/Throat	Normal	External nose - Normal. Nares - Right: Normal, Left: Normal. Nasal Mucosa - Normal. Lips/teeth/gums - Normal. Tongue - Normal. Buccal muco
Cardiovascular	Comments	Shape - Normal and Symmetric Movements - Symmetrical Accessory muscles - No use of accessory muscles in breathing. Carotid Artery - Bilateral - Inspection Normal Jugular vein - Bilateral - Inspection Palp/Percu - No Thrills No Carotid Bruit
Abdomen	Normal	Percussion - Normal. Anterior palpation - No guarding, No rebound. No hernia. No palpable mass.
Abdomen	*	Auscultation - no bruit, normal bowel sounds.

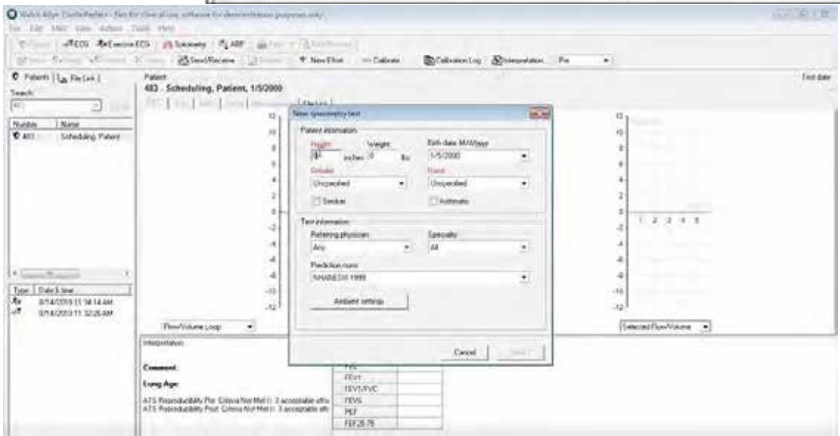
***Configuration Required*

Equipment Module

- Equipment Reports Module is 15 years old
- Added support for Midmark's Newest SDK, v10.x
- Code updated to C#
- Requires a reimplementation of Midmark
- Enhanced Module to:
  - Use latest technology
  - Clear up workflows
  - Easier to add new equipment in the future
  - Accommodates:
    - Midmark (requires v10)
    - Welch Allyn
    - GE Cardiosoft
    - Cardiac Science

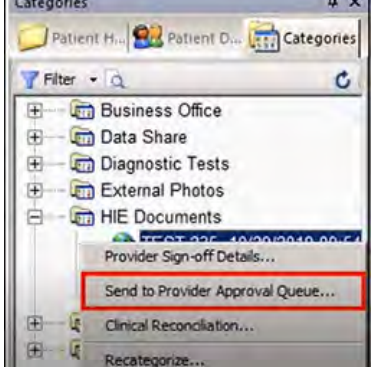
***Configuration Required*

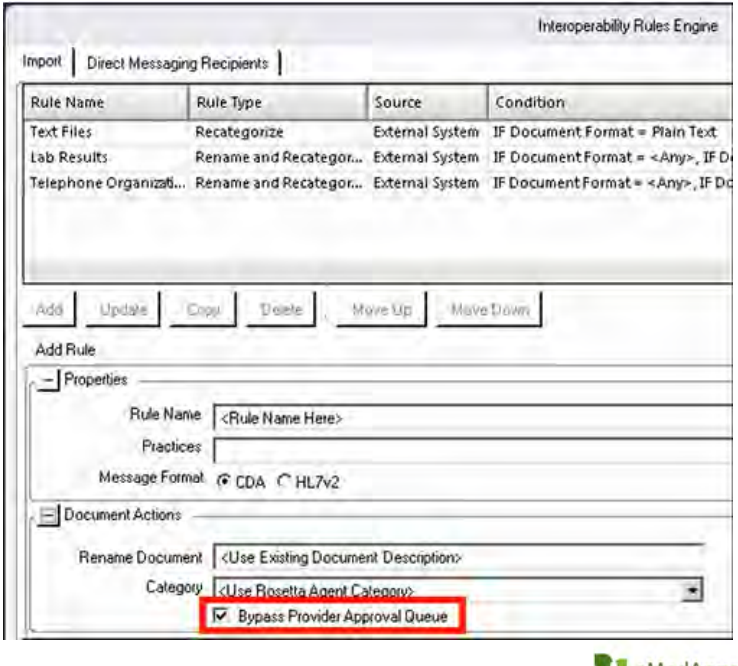




Enterprise Enhancements

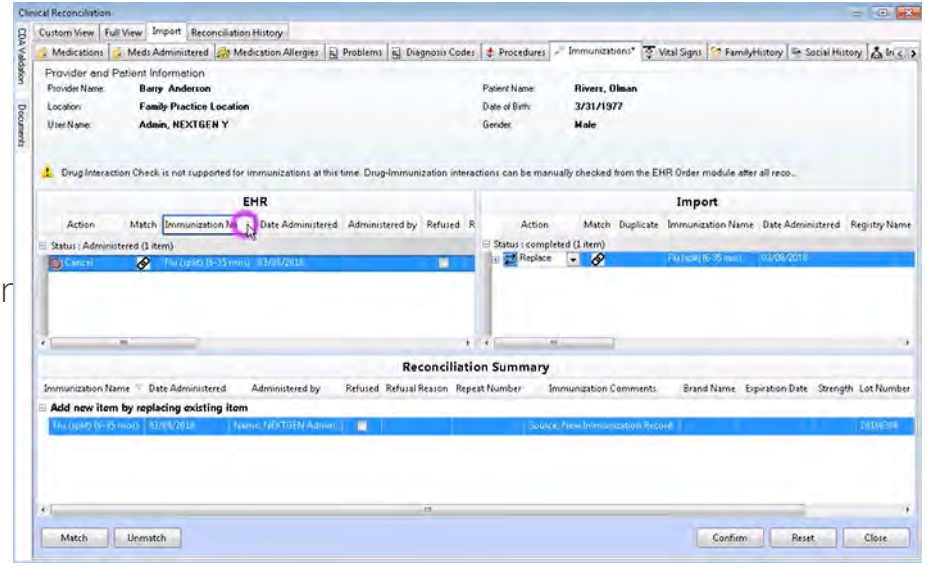
- Interop Rules Engine – Route CCDs to PAQ
  - Rules based on:
    - Message format
    - Source
    - Document format
    - Document info
  - If PAQ was bypassed, can manually send





Enterprise Enhancements

- Clinical Reconciliation Module – Sort Immunization column headers
  - Includes all column headers in the 3 grids



Rosetta HIE Gateway

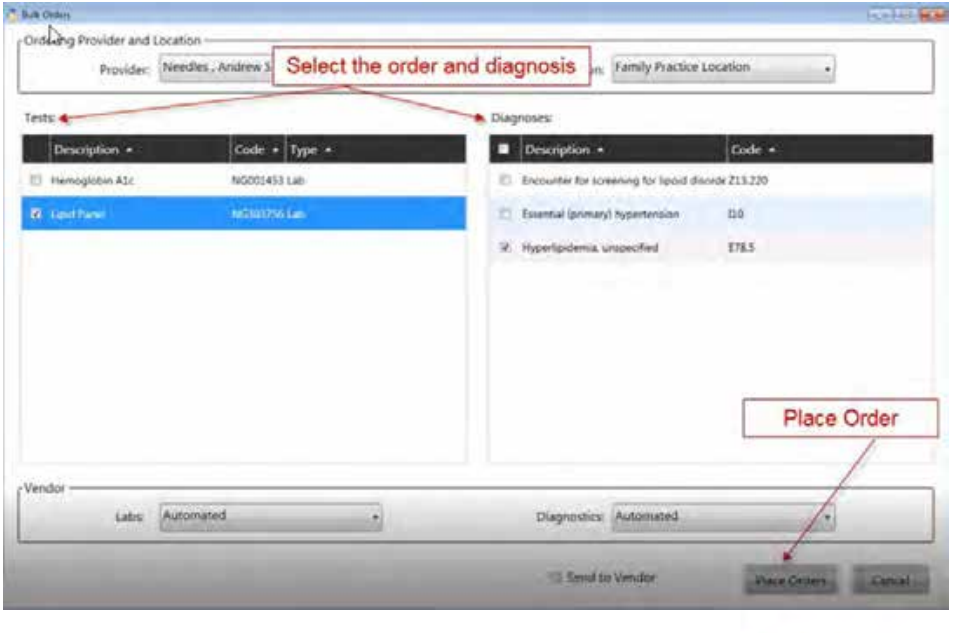
- Support Veradigm lab project
  - Supports multiple status updates per order (hidden to other lab agents)
    - New API Routes
      - Order status update
      - Order task creation
      - Order tracking comment
  - Supports time stamps w/time zone
  - Supports results import for multiple external systems
- Supports multiple back up users in Rosetta for lab results
- Set time limits on notifications sent via Rosetta
- Send Encounter Provider in ORM (PV1-7) instead of Ordering Provider

***Configuration Required*

NextGen Care

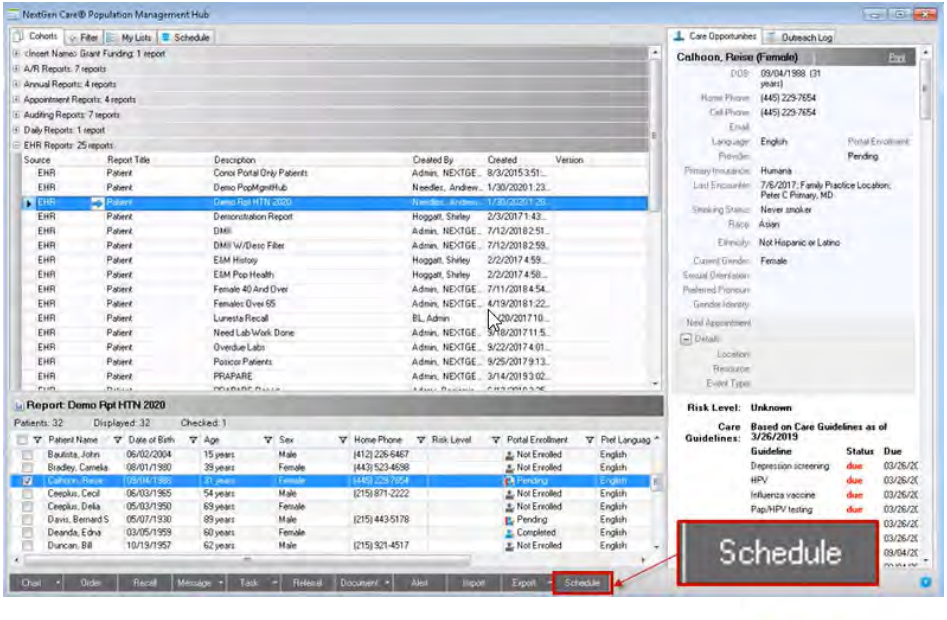
Population Management Hub – Bulk Ordering

- Bulk Ordering in a Background Process
  - Separate windows process
  - If the user who initiates the bulk orders process logs out of the software, the process will continue to run until it's ended by a user or the process has completed



Population Management Hub – Appointment Scheduling

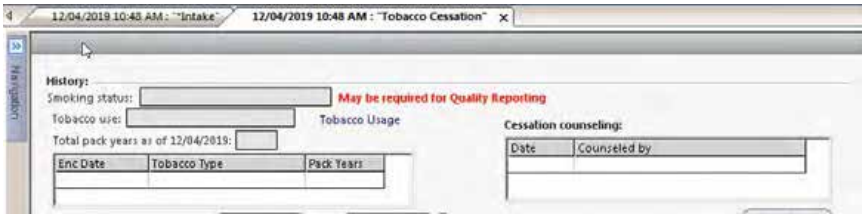
- Quickly schedule appointments in the PM, while working in the Hub
- New Schedule button
  - Launches Appointment Search Ahead window

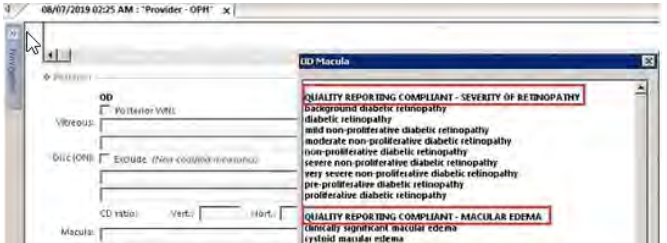


Regulatory

Replaced MU References

- All references to MU were removed and replaced with a more generic regulatory statement
- Q Button Pop Up – Labels for Meaningful Use replaced with Quality Reporting
- Removed the Q icon in some cases
- Changed labels to appear for ages 12+ (prior was 13+)





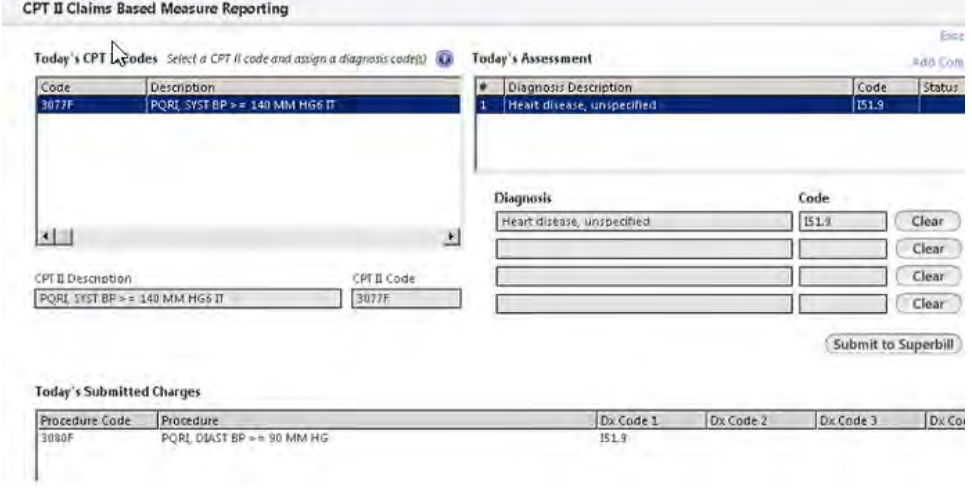
Coded Results Solution

- Template was available prior to the upgrade
  - Added value range mapping

***Configuration Optional*

CPTII Auto Submit

- CPTII are tracking codes ($0 charge)
- Current functionality is still available, but requires manual submission. This is the only place to address measure exceptions. The automated functionality doesn't address exceptions
- New feature incorporates CPT II codes into the Coded Results Solution and allows the codes to be submitted automatically when the field value requirements are met
  - HEDIS measures added out of the box
  - Other programs can be added
- New panel on Finalize 'CPTII Claims Based Measure Reporting'



***Configuration Required*

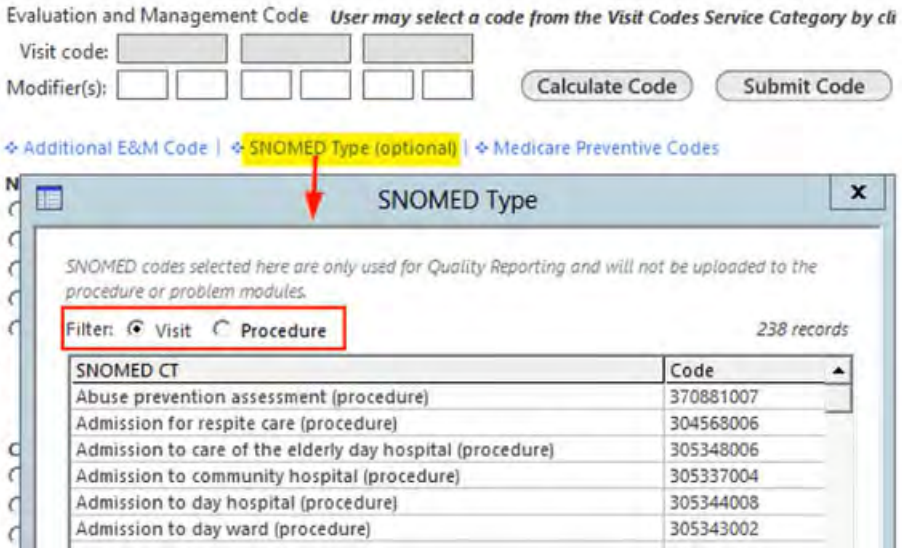
eMedApps.com

Exceptions Details

- Updates were made to the picklist choices for individual measures on the Exception/Measures Template
- Retired Measures
  - CMS 140
  - CMS 141
  - CMS 147
  - CMS 61
  - QID 334
- Rx Ingredient Norm changed back to Rx Medication Norm
  - CMS 135
  - CMS 138
  - CMS 144
  - CMS 145
  - CMS 22
  - CMS 69

CQM Workflow

- SNOMED visit types added to Finalize
  - Label changed to SNOMED
  - Added edit ability for SNOMED Visit Types
  - Can enable some settings in SNOMED Visit Type in Custom DBPicklist
- New LOINC code for Alcohol Intake Risk Factor
  - 11287-0
- HCPCS for Females unable to bear children
  - M1016



***Configuration Optional*

Care Guidelines

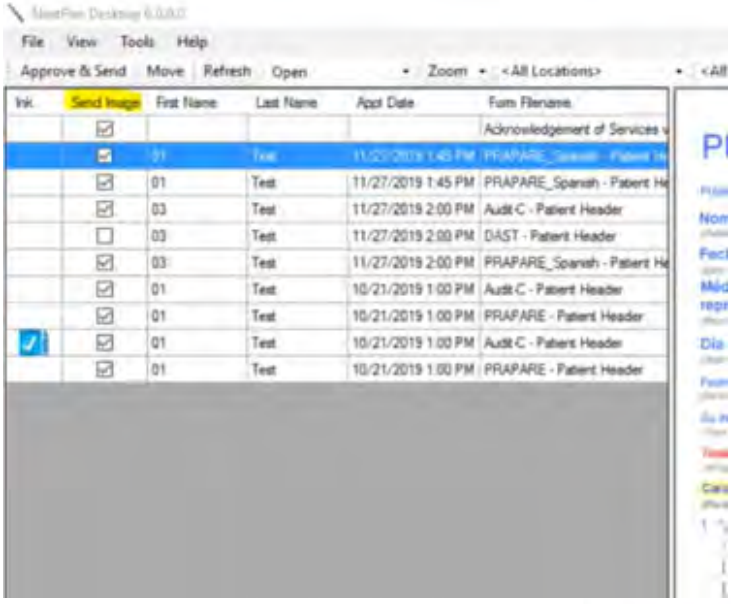
- Changes have been made to specific Care Guideline items
  - Diabetes
    - ASCVD 10 year risk
    - Hep B
    - Review Exercise Program
  - Health Maintenance
    - HPV
    - Updated Colon Cancer Screening options added
      - CT Colonography
      - FIT
      - FIT DNA
  - Cervical Cancer Screening
    - Women ages 21-29 pap every 3 years
    - Women ages 30-65 should have one of the following:
      - Pap every 3 years
      - High Risk HPV + Pap every 5 years
      - High Risk HPV every 5 years
        - » Completed Pap/HPV will mark PAP and HPV as complete
        - » Completed HPV or Pap will not make combined Pap/HPV complete
- Rolling year vs calendar year option added

***Configuration Optional*

NextPen 5.0

Sending Form Image

- Now have the ability to send the form image to a Category in EHR
  - Allows provides to reference this information later if it is necessary to compare the completed form to the chart



***Configuration Required*

Spanish PRAPARE Form

- Notes to staff will remain in English

PRAPARE

Protocol for Responding to and Assessing Patient Assets, Risks, and Experiences

Nombre del paciente:
(Patient Name)

Fecha de nacimiento:
(Birth Date)

Sexo:
(Sex)

Médico de representación:
(Rendering Provider)

Numero de historia CLINICA:
(MRN)

Día de la cita:
(Appt Date)

Fecha de realización
(Performed Date)

Su información actual en el archivo se muestra en las cajas negras. Si es incorrecto o falta, por favor responda
(Your current information on file is displayed in the black boxes. If incorrect or missing, please answer.)

*Todas las preguntas con un * asterisco deben ser contestadas*
(All questions with an * asterisk must be answered)

Características Personales
(Personal Characteristics)

1. *¿Es hispano, latino o de origen español?
(*Are you Hispanic or Latino?)

NOTE TO STAFF: Any Ethnicity in the "Other" field must be entered manually in Modify Patient Information Sensitive into PMSH-II

☐ Sí (Yes) ☐ No (No) ☐ Prefiero no responder a esta pregunta (I choose not to answer this question)

☐ Otro (Other)

2. *¿Cuál es su raza? Marque todo lo que sea aplicable
(*Which race are you? Check all that applies)

☐ Asiático (Asian)
☐ De las Islas del Pacífico (Pacific Islandia)
☐ Blanco (White)
☐ Nativo de Hawaii (Native Hawaiian)
☐ Negro/Afro Americano (Black/African Americans)
☐ Indio de los Estados Unidos / Nativo de Alaska (American Indian)

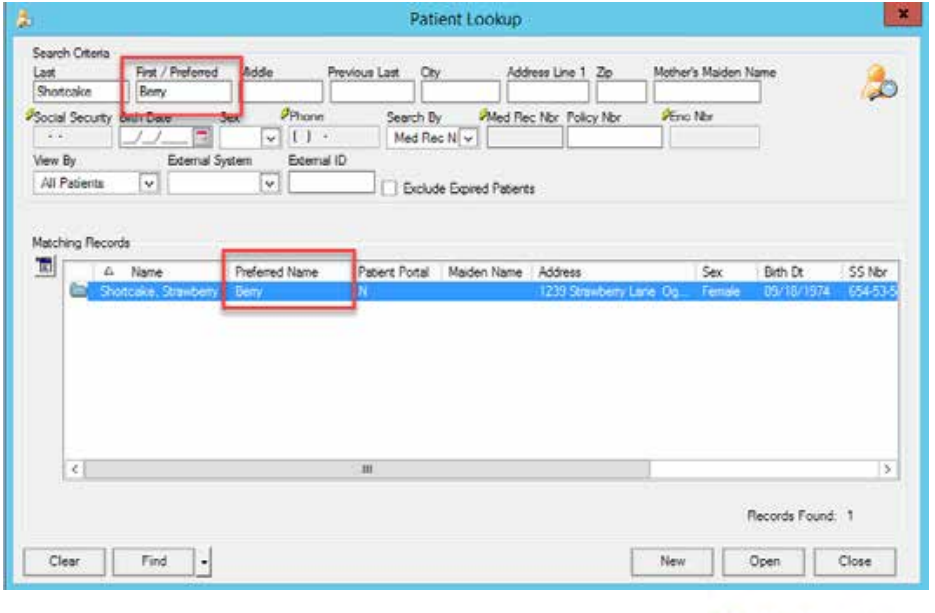
A continuación se enumeran sus 3 mejores raza (s) actualmente en nuestro sistema. Si las casillas están en blanco o son incorrectas, por favor seleccione su (s) raza (s) e indique el orden correcto por ingresando un número que comienza con 1, teniendo la mayor porcentaje.

1
2
3

PM

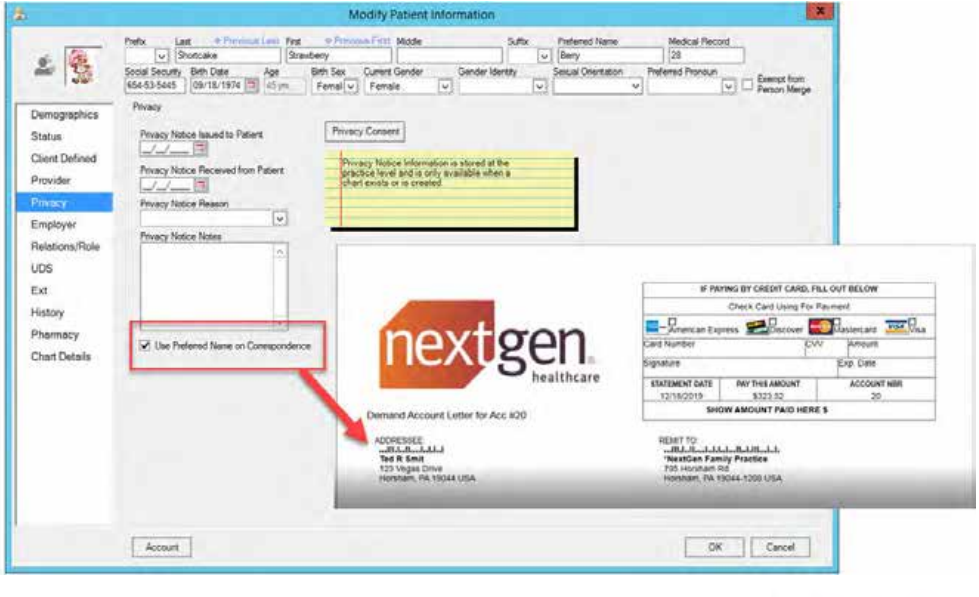
Preferred Name

- **Nickname** field has been changed to **Preferred Name** in:
  - All information demographics screens.
    - Person, Patient, Guarantor, Relationship, etc.
  - All Lookup screens
    - People, Patient, Guarantor, Head of Household, etc.)
  - Patient Information Bar
  - Account Profile
  - Add/Edit Group Appointment window
  - Appointment Information Tooltip
  - Appointment Lookup (column must be configured)
  - Data Repository for Forms, Forms Enhances, Labels, and Letters



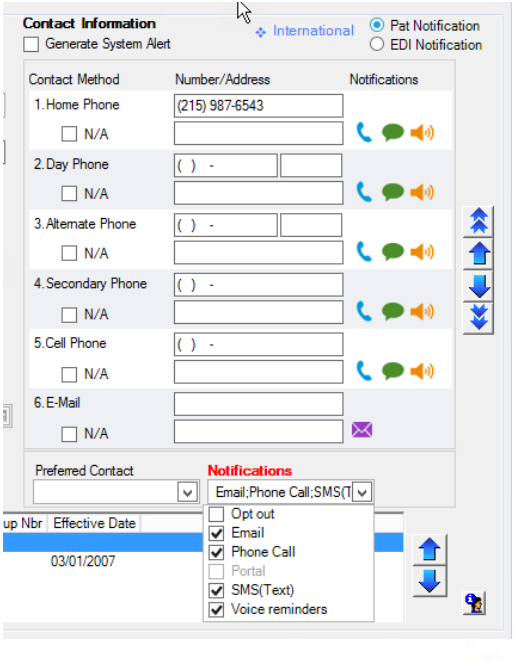
Preferred Name on Correspondence

- If the Use Preferred Name on Correspondence is enabled then this will be used on Statements, Forms, Letters, and Labels.
- If enabled, but no Preferred Name is present, First Name will be used.



Patient Notification Enhancements

- Notification icons will only display if the corresponding notification is selected in the Notifications drop down in the demographics screen.



Account Receipt

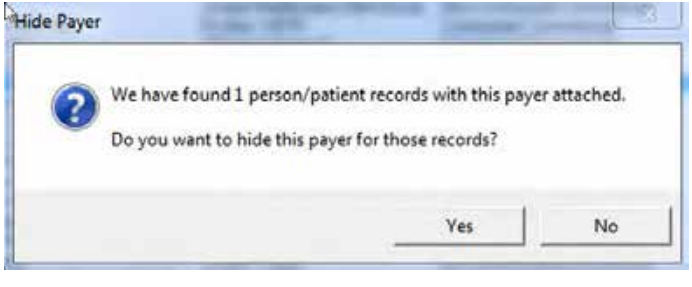
- Date of Service added to be clear to the patient what the receipt is for. This will also help in reimbursement for HSA/FSA accounts.
- Header and Footer added so it will be more consistent like an encounter bill or statement.

Claim Edit #311

- Edit is triggered if the encounter payer is invalid for the specified service location(s)
  - Use Case: The practice might need to bill different MACs depending on location.
  - Use Case: The practice might offer services in multiple locations that are in different states or regions.
- Claim edit is configured based on location, financial class, and payer combinations

Hidden Insurance Enhancements

- This new enhancement offers an option to hide a payer at the person/patient level when it is hidden in File Maintenance.
- User Alerts when a hidden payer in File Maintenance is being linked to an encounter.
- Hidden payers will not automatically attach a payer from a previous encounter if it has been hidden at the person/patient level.

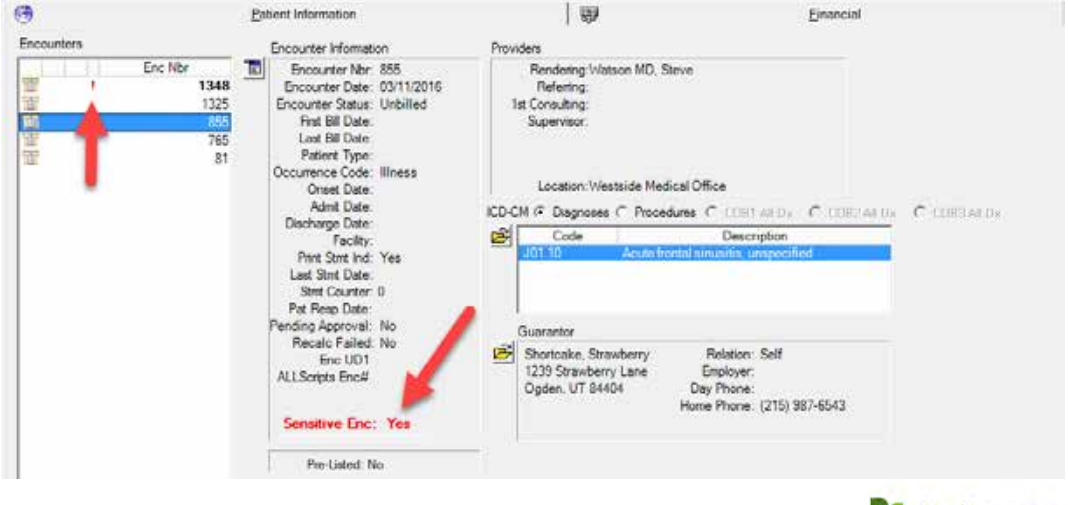


Sensitive Encounter Indicator

Encounters Marked as Sensitive in the EHR indicators will display in the PM.

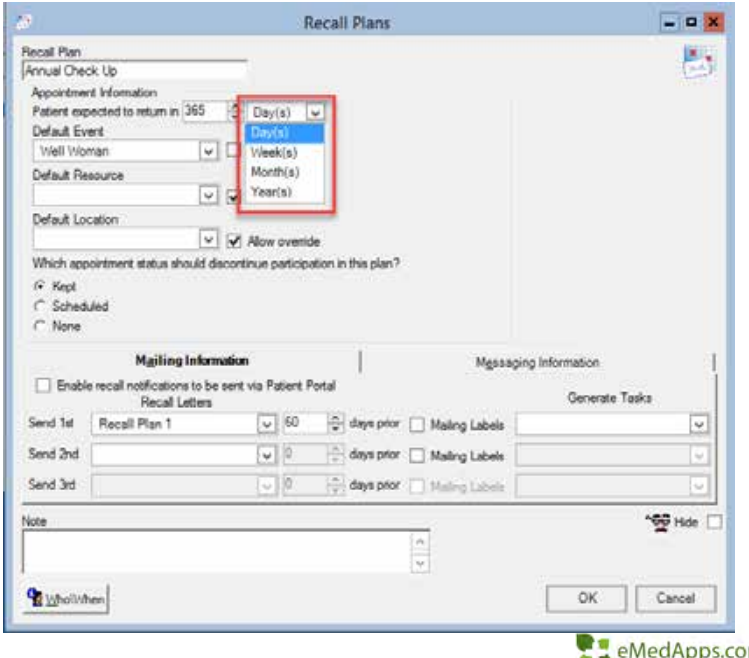
Sensitive Encounter Indicator column added to the following PM reports:

- Daily > Encounters
- Accounts Receivable > Unbilled Encounters



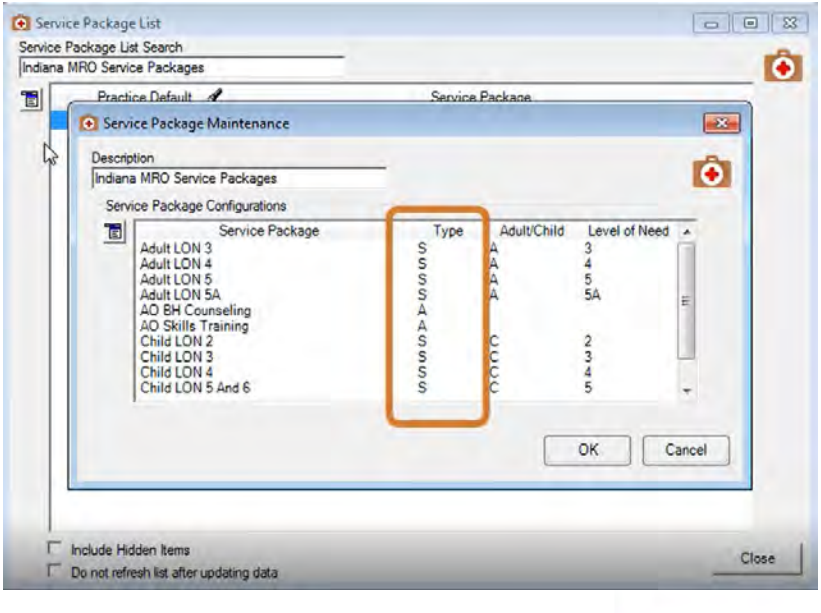
Recall Plans Enhancements

- Recall Plans can be set to:
  - Day(s)
  - Week(s)
  - Month(s)
  - Year(s)
- Previously only Day(s) was available
- This has been added to:
  - File Maintenance > Practice > PM > Recall Plans > Recall Plan window
  - Practice Preference > Alerts > Active Recall Plans Due in ____
  - PM > Recall Plan Maintenance window



Indiana Medicaid Rehabilitation Option

- Practice can track and manage all MRO services regardless of weather they are part of an existing package or add on after authorization
- Practice can edit service unit amounts and duration when they are authorized at different amounts than the standard package

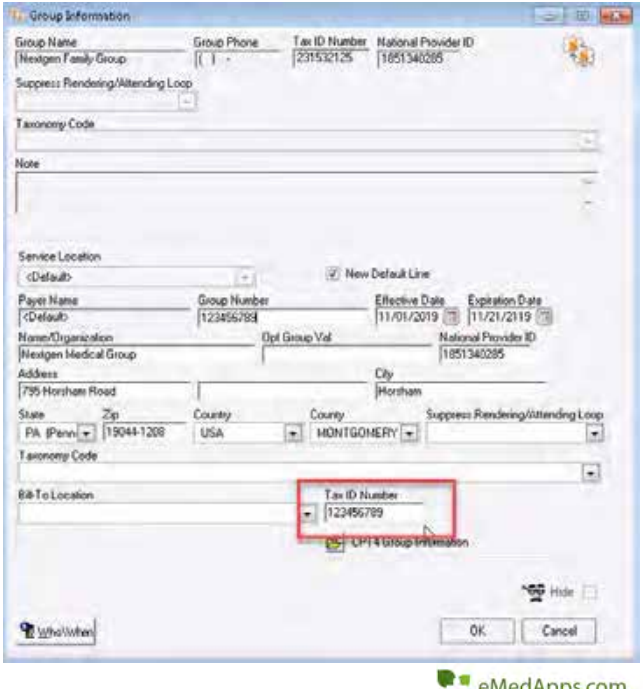


Multiple Default Group Enhancement

- An organization may acquire a new practice and often the previous Tax ID may need to be used on claims for a period of time before switching to the new Tax ID.
- An organization changes their Tax ID, claims prior to the effective date of the new Tax ID may still need to be billed or rebilled using the previous Tax ID.

Multiple Default Group Enhancement

- NextGen has added a new Tax ID field to the Group Detail window.
- You can now add multiple default rows within the Group Master File
- No longer need to create a new group for the new Tax ID
- Claims will be billed/rebilled based on the effective and expiration dates



Place of Service 99 Enhancements

POS 99 functionality was created in 5.9.1 to allow practices to define a location name and address when the place of service is 99 (other unlisted facility)

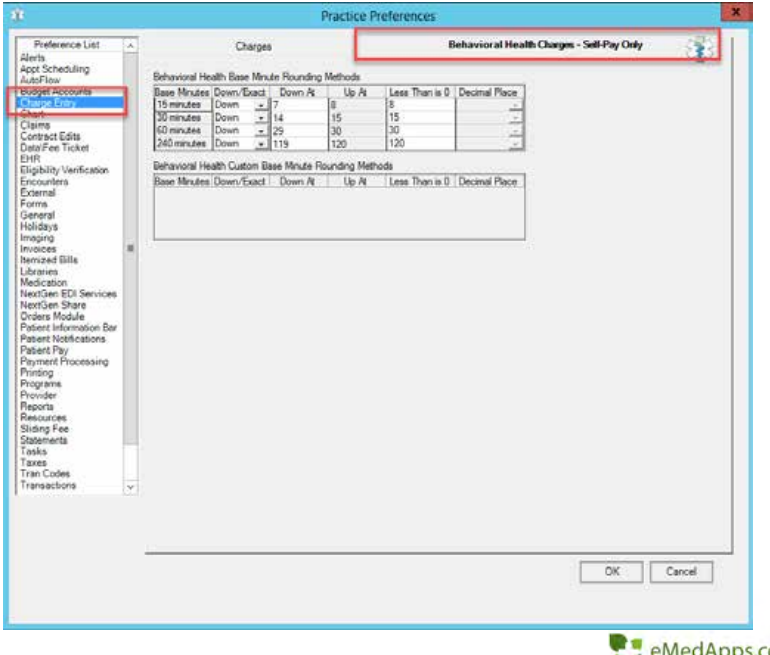
- Charge Posting Screen > POS Address window country now defaults to USA
- EDI Claim Profile Library > Payer Rules for EDI > Professional tab > General EDI Options:
  - Send Service Facility Location Loop with POS 99 Details (disabled upon upgrade)
    - When this setting is **enabled**: the electronic 1500 claim (837P) 2420C Service Facility Location Loop is populated with the POS 99 address details from Charge Posting
    - When this setting is **disabled**: the electronic 1500 claim (837P) 2420C Service Facility Location Loop is populated with the encounter Service Location address

PM Behavioral Health Enhancements

BH Rounding & Base Minutes Phase 3

- Previously limited to hard coded base minutes
- Rounding configuration was not available for custom built minutes
- No indication that it was for Self Pay

- Custom minute rounding configuration will now be available in a new tab for Self Pay

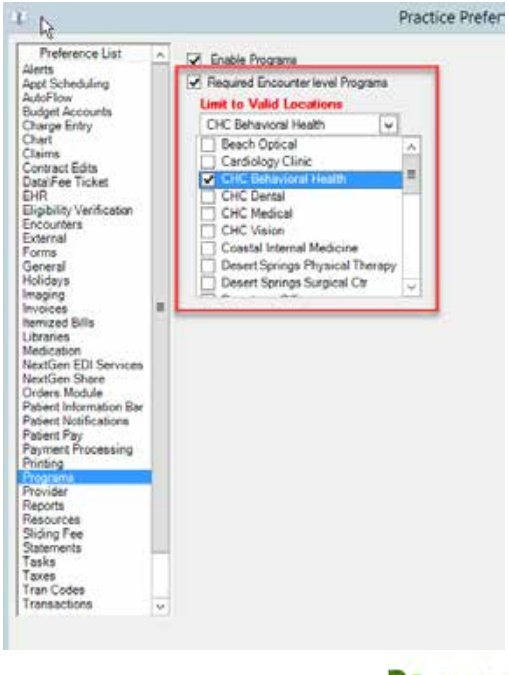


BH Programs Phase 3: Security

- System Admin has added security for Programs.
  - Operation > Chart/Demographic/Employer
- New Program Rights will control
  - Program Dropdown on the Encounter Lookup screen.
  - Program Tab under Patient Information in the Patient Chart
  - Program Field on the Encounter Information screen.
  - Encounter Maintenance Program Dropdown

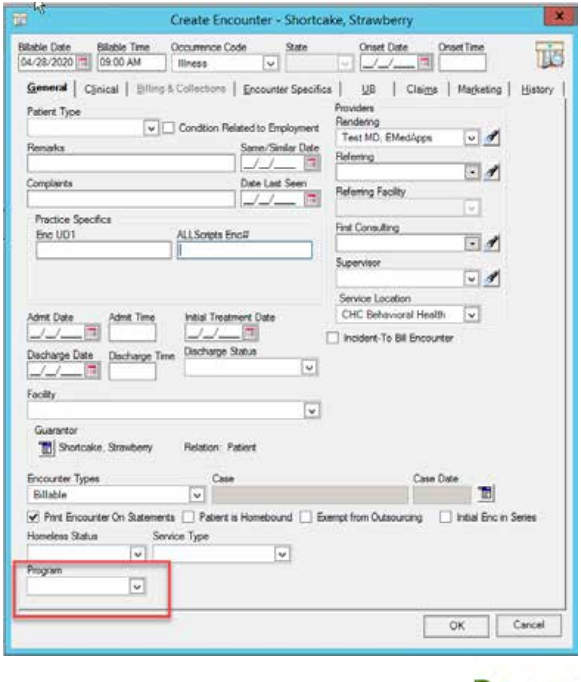
BH Encounter Level Program Requirement

- This feature will allow the practice to make the encounter Program field required by location.
- If a user has access to Programs and attempt to create an encounter for a location which requires Programs.
  - The system **allows** the user to created an encounter without assigning a program if the patient is not enrolled in any Program
  - The system **restricts** the user to create an encounter without assigning a program if the patient is enrolled in a Program
  - The system **restricts** the user to update an encounter irrespective of the Patient enrollment in an encounter



BH Encounter Level Program Requirement

- If the user has NO access to Programs and attempts to create an encounter for a location which requires Programs:
  - The system **allows** the user to create an encounter without assigning a program if the patient is not enrolled in any Program.
  - If the patient is enrolled in a Program, the system alerts the user they do not Program rights and **restricts** the user from creating an encounter

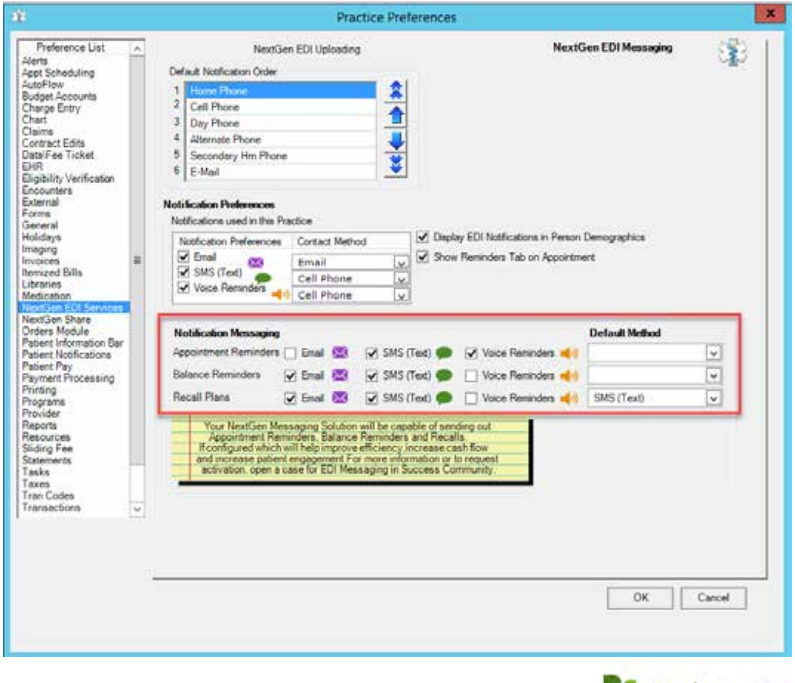


NextGen EDI Patient Notification Enhancements

EDI Patient Notification Enhancements

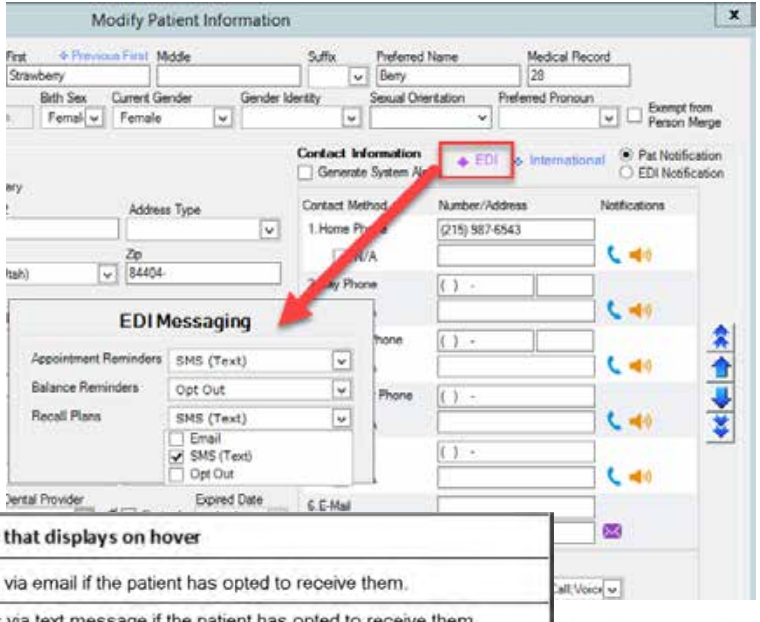
New Practice Preference setting has been added to allow the practice to select type of messaging notification that can be user for: **Appointment Reminders, Balance Reminders, and/or Recall Plans.**

- This will enable an EDI hyperlink on the demographics screen where the user can select the patients preference.



EDI Patient Notification Enhancements

- The drop down option will only display the options selected in Practice Preferences.
- If a default option was select this will automatically be preset.

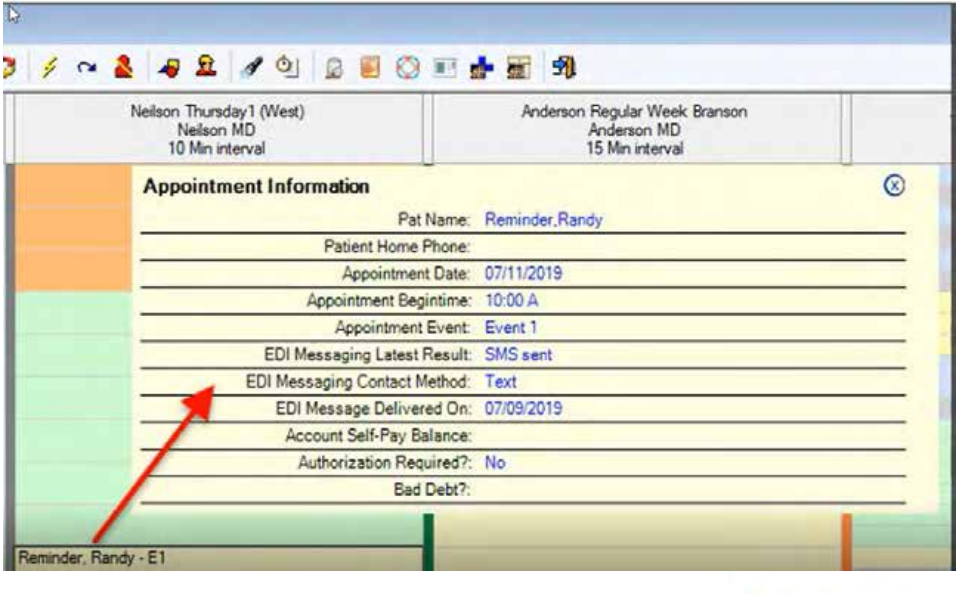


	Icon	Verbiage that displays on hover
Email		This contact can be used to send EDI notifications via email if the patient has opted to receive them.
SMS (Text)		This contact can be used to send EDI notifications via text message if the patient has opted to receive them.
Voice Reminders		This contact can be used to send EDI notifications via voice reminder if the patient has opted to receive them.

EDI Patient Notification Enhancements

Information about Appointment Confirmation information has been added to the appointment tooltip*

- Previously this was only available in the appointment window or by running a report.



*Must be configured in Practice Preferences and Appointment Scheduling Preferences.

Q&A

847-490-6869
info@emedapps.com