prognoCIS By Bizmatics

Enhancements Release Notes (EMR)

Table of Contents

    4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

Important Note: *Denali 3.1 is the latest version of PrognoCIS and is supported with Compatibility View Settings OFF for IE 11 browser.*

Following are the browsers with version numbers that are supported by PrognoCIS Denali:

Browser	Version
Internet Explorer	11
Safari	9.1
Chrome	45 and above
Mac OS	OS X EI Capitan
iPhone iOS	6 and above
iPad iOS	9 and above
Android OS	4.1 Jelly Bean and above

Note: *IE and Chrome browsers are supported on Windows 7 and above.*

1 Introduction

- The release notes describe the various new features and enhancements carried out in the new version, **PrognoCIS^{TM} Denali 3.1** with the specifications and UI details wherever applicable.

- 'User' mentioned in the document is any PrognoCIS^{TM} User within their permissible rights assigned to their role.

- The term, 'System' and 'application' are being interchangeably used to refer to PrognoCIS^{TM} application.

- Patient information within images is not real or at times may be blurred to safeguard Clinic information.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

2 Home

2.1 Provided Denali 3.1 B1 upgrade message popup on the click of MU/QPP settings button (Patch 1)

Navigation Goto: Home screen → Click on *MU/QPP Settings* button

On the click of *MU/QPP Settings button*, a popup is provided which informs user about the Denali upgrade 3.1 B1. In the popup, a training video has been provided to explain the new MU/QPP settings screen. Also, *Webinars* hyperlink has been provided through which the user can register for a webinar to get detailed understanding of all the features in the upgraded version.
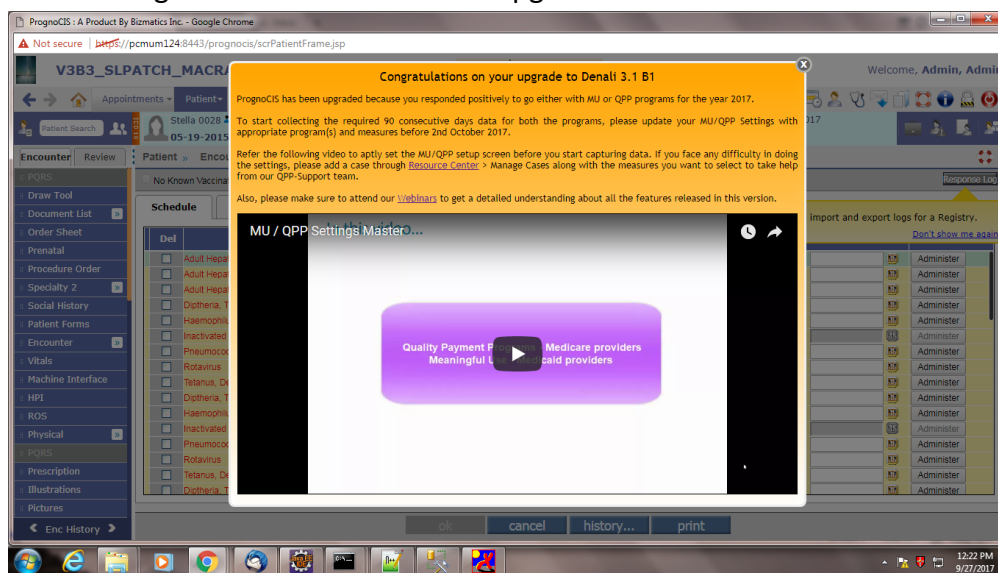
2.2 Provided Independent Patient Login (IPL) link on Info popup (Patch 3)

Navigation Goto menu: Home screen → Click on Info button:

Earlier, there was no information about Independent Patient Login (IPL) link on Info popup. Now, *Independent Patient Login (IPL)* link has been provided under *Other Modules* section of Info popup. *Refer to below figure*

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117   (408) 873-3032
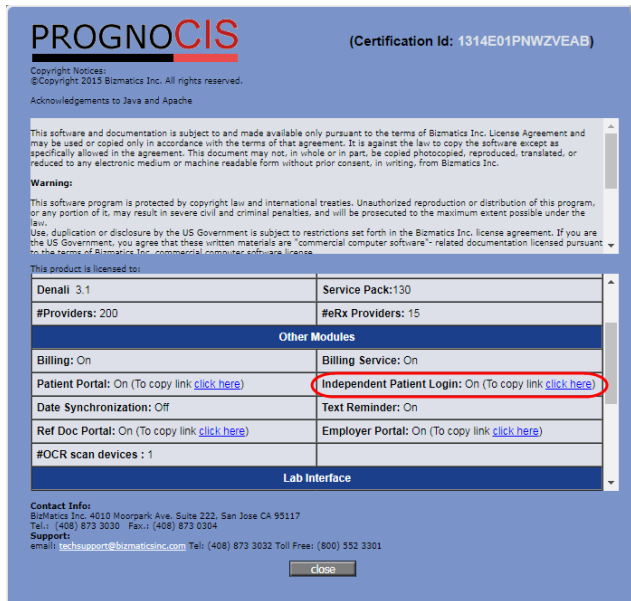
2.3 Provided PrognoFax status information on the Info popup (Patch 42)

Navigation Goto Menu: Home screen → click on Info button:

On the Info popup under *Other Modules* section, *PrognoFax* status is displayed depending upon the value set in the property *prognocis.fax.version*:

1. If property is set to PROGNOFAX1 or PROGNOFAX2 then *PrognoFax* status displays as On
2. If property is set to BIZFAX1 or BIZFAX2 then *PrognoFax* status displays as Off

2.4 SQL queries have been optimized for Mail counts on the Home screen (Patch 65)

Navigation Goto : Home screen

SQL queries have been optimized to execute only once rather than many times for Mail counts, displaying on the Home screen.

2.5 A new 'Dashboard' is now available for EMR (Patch 68)

Navigation Goto: Home screen → click on Dashboard icon:

- Dashboard is a graphical representation of transaction related data.

19

Figure: *EMR Dashboard*
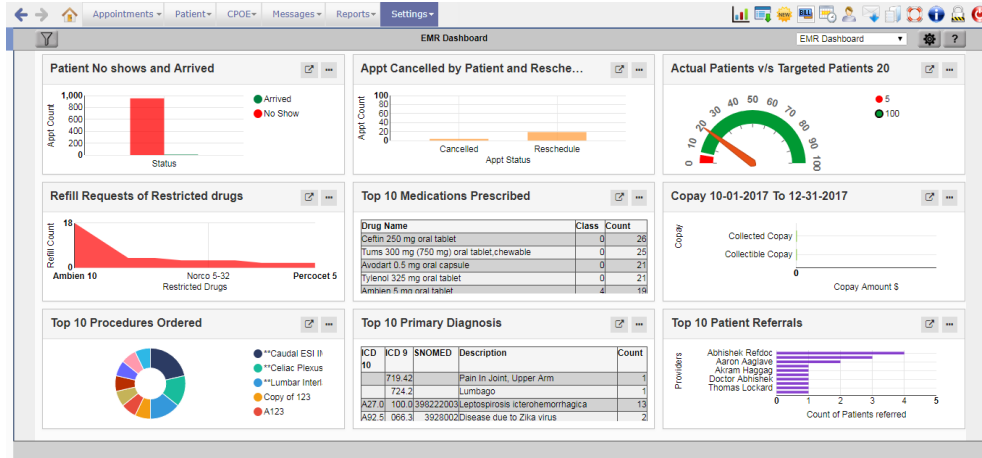
• Now, PrognoCIS has provision to configure 10 Layouts for Dashboard. Out of these 10 Layout, 1st is set as default Dashboard for 'Billing' module and 2nd is set as default Dashboard for 'EMR'. A total of nine cells can be configured on one Layout.

• Along with Graphs and Gauges, Tabular reports and Billing Reports are also supported for Dashboard.

Note: *Billing Reports option is only for 'Billing Dashboard; Hence, the option is not displayed for 'EMR Dashboard'.*

• The default 9 cells of EMR dashboard are as follows:

➤ Patient No shows and Arrived
➤ Appt Cancelled by Patient and Rescheduled
➤ Actual Patients v/s targeted patients
➤ Refill Requests of Restricted drugs
➤ Top 10 Medications Prescribed
➤ Copay
➤ Top 10 Procedures Ordered
➤ Top 10 Primary Diagnosis
➤ Top 10 Patient Referrals

Access rights (Read and Update) for the Dashboard can be defined as follows:

Read(R)	Update(U)	Result

Unchecked	Unchecked	- On EMR side, the Dashboard icon is NOT displayed - On Billing side, the Dashboard icon is displayed. But, clicking on it will show a blank screen.
Checked	Unchecked	- The icon is displayed on both EMR & Billing. - Clicking on the icon will show the dashboard screen. - The setting icon will be hidden.
Checked	Checked	- User will be able to access the dashboard screen. - User will be able to configure the dashboard using 'Setting' dialog.

- Unique set of properties are provided for configuring individual dashboard layouts. Following are the properties:

  ➢ *dashboard.1.inactive* (Property Available to ALL Users):
  This property is a Boolean type property. It is used to check whether the layout should be displayed on Dashboard screen or not. If this property is set to OFF, then the dashboard layout will be displayed. Otherwise, it is not displayed.

  ➢ *dashboard.1.name* (Property Available to ALL Users):
  The value specified in this property is the name of the corresponding dashboard layout.

  ➢ *dashboard.1.emr* (Property Available to ALL Users):
  If this property is set to ON, then the dashboard layout is applicable for EMR. Otherwise, it is for Billing

  Note: *In above mentioned example, 'dashboard.1' refers to Layout # 1.*

- User can select/switch between the dashboards layout using the list-box provided at the top-right corner of the dashboard screen.
- Property *home.dashboard.refresh.mins* is used to refresh the Dashboard layout. By default, this property is set to one min.
- **Filter**
  Dashboard Filter popup allows user to generate the data using filters like Days, Period, Provider and Location.

21

- **Setting** ⚙

  Setting icon is used to map the required graph/gauge/tabular reports of the individual cell.

- Icons present on cells of Layout:

  ➢ Zoom icon 🗗 :

    Zoom icon is given on each cell for the enlarged better view. For Graphs, on zoom popup, a table icon is given on the right corner to view the plotted data in table format. User can also download the selected data in CSV format.

  ➢ Options icon ⋯ :

    On click of this option icon, three options are shown as Refresh, Data and Print.

      ✓ Refresh –

        On click of Refresh icon, the selected cell will get refreshed.
      ✓ Data –

        On click of Data icon, the detailed description of the data used to plot the graph is shown. User is also given provision to download the selected data in CSV format.
      ✓ Print –

        On click of print option user can print the content of the respective cells.

- Slideshow of Dashboard Layouts:

  ➢ PrognoCIS supports slide show of dashboard layouts at certain time interval. User intervention is avoided to switch to the other dashboard layouts manually.

  ➢ A property *dashboard.slideshow* drives the functionality of slide show of dashboard. During the slide show, as per the interval specified in *home.dashboard.refresh.mins*, dashboard layouts will change automatically and next layout will get loaded. Once the last dashboard layout is reached, system will repeat from first layout.

2.6 A message popup to inform Provider about 'MIPS 2017 Submission Deadline' is displayed while logging into PrognoCIS (Patch 118)

Navigation Goto: Home screen

 On Provider login to PrognoCIS, a message popup about **MIPS 2017 Submission Deadline** will be displayed to inform and guide Provider about the MIPS 2017 submission process. If a Provider does not wish to view this message popup again then *Do not show this message again* checkbox needs to be checked.

Also, on top of the PrognoCIS Home screen, the *MIPS 2017 Submission Help* button has been provided which on click would invoke the same message popup.
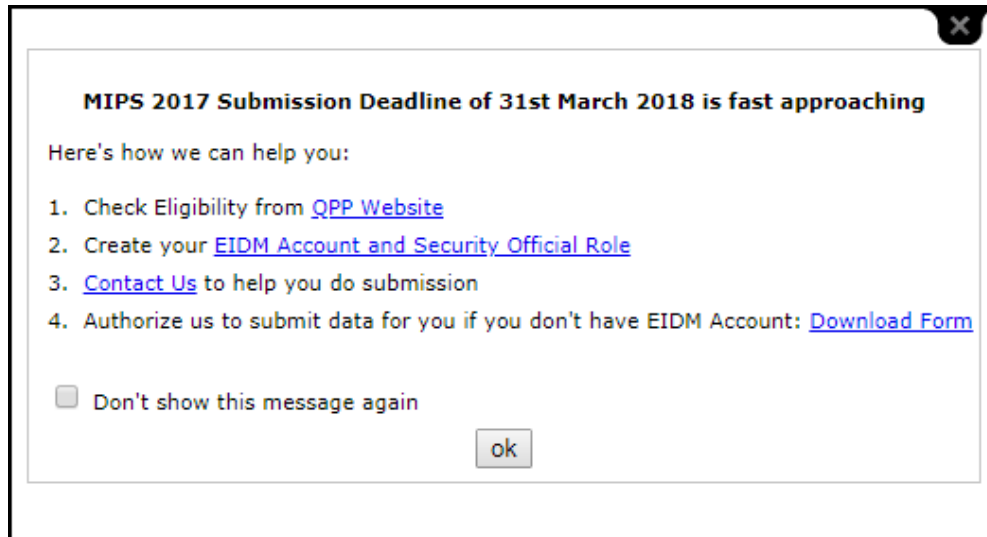
2.7 'MU/QPP Settings' widget on the top banner of PrognoCIS has been relabeled (Patch 166)

The *MU/QPP Settings* widget present on top of PrognoCIS screen has been relabeled to *MU/QPP Updates*. This widget on click would inform the users about the new 32 additional eCQM measures that are certified and its availability in PrognoCIS.

3 Appointments

3.1 Provision to configure mandatory fields on Appointment Schedule popup (Patch 10)

Navigation Goto menu: Appointment → Schedule → double click on the appointment slot → Appointment Schedule popup

A new property *appointment.schedule.mandatory.fields* is added to set mandatory field(s) on Appointment Schedule popup.

Following are the values that can be set in the property:

A. Reason

B. Instructions

When the property value is kept as blank, then none of the above mentioned values are considered as mandatory. By default, property value is blank.

3.2 New 'By Location' screen mode has been introduced on Appointment Schedule screen (Patch 76)

Navigation Goto : Appointment → Schedule → click on *By Location* radio button

- A new screen mode, '*By Location*', similar to the *Daily*, *Weekly* and *View* mode, is introduced on the Appointment schedule screen. The drop down for Provider and Location as displayed on the 'Daily', 'Weekly' and 'View' mode is not available for 'By Location' mode. However, the Previous and Next arrow keys as shown on the view mode are available for users to navigate locations.

- A new property *appointment.bylocation.screen_mode* has been added. By default the property is set to OFF. When the property is set to ON, 'By Location' radio button is displayed as default selected mode on the Appointment Schedule screen. On setting it OFF, the option set in the property, *appointment.default.screen_mode* is displayed as default mode.

- On selecting *By Location* radio button, the Appointment schedule screen will show 7 locations at a time. The working slot for a location is displayed considering the work pattern of all the providers working on the respective location. The background color for the available working slot is the respective location's color.

- While scheduling an Appointment on the 'By Location' mode, the selected location is displayed as default location on the Appointment schedule popup

and default Provider is set to first provider in the list box. Though User is allowed to change Provider and Location on the Appointment schedule popup.

- If 'By location' radio button is selected then following properties are not considered for displaying background color and text on the working slot:
  - ➢ *appointment.enctype.slotcolor*
  - ➢ *appointment.location_wise_color*
  - ➢ *appointment.locationdisplay.applicable*

  In this case, appointment slot's background color is set as Location's color and no text is displayed on the slot.

Note: *By turning the property, appointment.bylocation.screen_mode to ON, the 'By Location' mode will be set as default but if user selects any other mode then that mode will be selected for that session.*

3.3 Appointment scheduler is now shown depending upon the Clinic's open and close time (Patch 116)

Navigation Goto menu: Appointments → Schedule

Earlier, 'Appointment scheduler' was displaying depending upon the property *appointment.anytime.applicable*. Now, 'Appointment scheduler' is displayed according to the respective Clinic's open and close time; irrespective of the property value.

Note:

❖ *If a Provider has 'Work Pattern' defined different than the Clinic's open and close time then the clinic's timing is updated as per Provider 'Work Pattern' and 'Appointment scheduler' is displayed.*

For example:

If a Clinic's working hours are : 9AM to 6PM and Provider's Work Pattern is set for 8AM to 7PM then the clinic's timing gets updated as 8AM to 7PM and Appointment scheduler is updated.

❖ *Now, property appointment.anytime.applicable will only govern the visibility of Anytime checkbox on the 'Appointment Schedule' popup.*

3.4 Order Sheet icon has been provided on the Appointment Schedule screen (Patch 116)

Navigation Goto menu: Appointments → Schedule

1. On the Appointment Schedule screen, the left pane bottom section has been named as 'Patient Information' which includes the patient's details.

2. A new icon: naming on tooltip as 'Icon Drawer' has been provided in the Patient Information section.

3. On mouse hover of the Icon Drawer icon, a soft popup opens which displays all the icons that are currently available.

4. FTUX is shown on Appointment Schedule screen to inform users about the placement of currently available icons in the Icon Drawer as following:

"Hover on this new Drawer icon to access all the icons."

Along with that a new Order Sheet icon: has been given in the soft popup.

5. The Order Sheet icon: gets enabled only when the patient has been marked as 'arrived'. Depending upon the rights, users are able to Save/Create the orders. Audit trail for Save and Create order actions are maintained.

6. Along with the icons, a new property *ordersheet.quick.default.option* has been added to make the default selection for *All* or *Order Set* radio button on the Quick tab of TOC → Order Sheet screen, Assessment → Order Sheet button and Appointment schedule → Order Sheet icon.

Data type of this property is List box with following values:

- All
- Order Set

3.5 On the Patient and Referring Doctor portals for Multi-location, 'Doctor' drop-down list under 'Appointment' tab displays according to Patient registered location (Patch 142)

Navigation Goto: Appointment tab

For Multi-location, on the Patient and Referring Doctor portals, the *Doctor* drop-down list under *Appointment* tab now displays according to the Patient registered location instead of all locations.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

3.6 On Appointment Schedule screen a panel of Icon Drawer has been enhanced (Patch 143)

Navigation Goto menu: Appointments → Schedule → select/schedule an appointment → click on Icon Drawer

Now, background color has been changed of a panel of Icon Drawer and distance between icons has been improvised for a better User Interface experience.

Also, the Drawer icon's panel can be closed by clicking anywhere in the *Patient Information* section.

Note: *The Icon Drawer panel will automatically close after 10 seconds even if the mouse cursor is on the popup.*

4   Patient

4.1   New property guarantor.address.mandatory has been added to have address mandatory on Guarantor screen (Patch 12)

New property *guarantor.address.mandatory* has been added. When this property is turned 'On', address will be mandatory on Guarantor screen.

When New Guarantor is added with First Name and Last Name field and save button is clicked, message 'Address is Mandatory' is displayed to the user. Also, when existing Guarantor is updated it will be mandatory to add Address on Guarantor screen.

4.2   Provided 'save as' button on Letters-Out screen (Patch 28)

- Now, the *save as* button has been provided on the Letters-Out screen. When a user clicks on *save as* button, a copy of letter is created with same Subject as defined for the original letter. When a user tries to create a copy of an existing letter, all the attachments will be also copied from original letter to the new letter.
- The *save as* button is enabled for all users who have access rights for Letters-Out screen and after the first save action on the Letter Out screen.
- When a copy of letter is created in Approved status, the new letter is also in the Approved status depending on the user having Approve right for Letter out. In this case, if user does not have Approve right, new letter will be created with Entered status.
- If a letter is sent out to multiple people, then users are able to see multiple entries in '*Letter To*' column of the search available on letters out screen.
- Since the property, *letter.edit.sent* has been made obsolete; if the letter status is 'sent', then user is not allowed to edit the letter or add the attachments, but only view the attachments.
- On the Document List screen, the '*Person'* column will also display multiple entries of Letter To field from Letters-Out screen. A tooltip of *Person* column displays the complete name(s).

- Also, the *reopen* button and *Reopenletterout* role have been removed from the Letters-Out screen.

4.3 Provision to store printed PDF page count in the Database (Patch 33)

Navigation Goto menu: Patient → Letters-Out

Now, provision has been provided to store the printed PDF page count in the database.

4.4 MBTA Follow-Up Pool Introduced (Patch 52)

Navigation Goto menu: Patient → Follow-Up Pool

1. MBTA has thousands of employees; for whom getting random drug and drug-alcohol screenings periodically done is a federal requirement, considering the kind of jobs they are in.
2. Currently, with the help of the randomization feature, PrognoCIS schedules random drug and drug-alcohol screening appointments for MBTA and MassDOT employees.
3. Employees are entered into a Follow-Up pool when a Substance Abuse Professional prescribes them for testing after failing in Pool1 or Pool2.
4. There are 3 types of Follow-Up Pools:
   - Federal Periodic Follow-Up Pool (Pool No. 3)
   - Non-Federal Periodic Follow-Up Pool (Pool No. 4)
   - Lifetime Follow-Up Pool (Pool No. 5)

5. Following mentioned are the criteria in which an employee is entered into a Follow-Up Pool:
   - Employees who have failed a Federal (DOT) Drug Test are entered into the Federal Follow-Up Pool 3.
   - Employees who have failed a Non-Federal Drug Test are entered into the Non-Federal Follow-Up Pool 4.
   - Those employees who have been released from their position for various reasons and their Back To Work (BTW) agreement stipulates drug testing for the remainder of their career are entered into Follow-Up Pool 5.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117   (408) 873-3032

- Employees are entered into a Follow-Up Pool if their Employee Assistance Program Counselor or their Substance Abuse Professional prescribes testing.

6. **Follow-Up Pool screen:**

   Figure: *Follow-Up Pool screen*
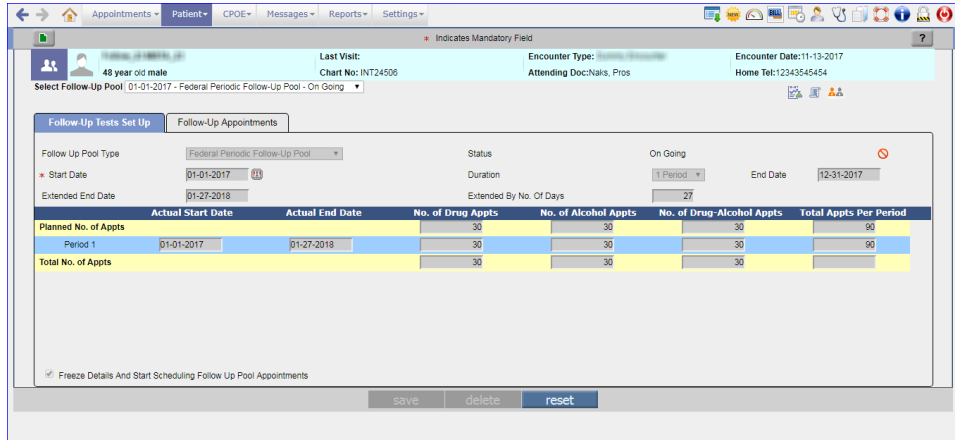
7. Follow-Up screen is divided into 3 sections:

   - **Top Panel**
     - Patient band-

       Click on Search Patient icon: to select a Patient.

       Patient Band is consisted with important selected Patient related information such as Patient's profile photo, Patient's name, Age, last Visit, Chart No, Encounter Type, Attending Doc, encounter Date, Home telephone number

     - Select Follow-Up Pool-
       Select a required Follow-Up Pool from the dropdown list.

     - Lab Matrix -
       Clicking on this icon will display the same Lab Matrix screen as of Encounter → Review.

30

➢ Document List ▦ -

   Clicking on the Document List icon will invoke the Document List screen of a Patient.

   📌**Note:** *This Document List popup would be same as of Specialty screen. All the functions provided and restricted on the Document List popup of Specialty screen would be applicable here as well*

➢ Inactive HR Status Period 👥 -
   Clicking on this icon will invoke the popup from which DAC (Drug and Alcohol Coordinator) would be able to specify the date range for which employee's HR status was marked as Inactive.

- **Follow-Up Tests Set Up**
   Following are the fields on the Follow-Up Tests Set Up screen:

➢ Follow Up Pool Type –
   Select a Follow-up pool type from the dropdown list options.

➢ Status –
    It will display the current status of the Follow-Up pool.

➢ Start Date –
   Select or enter the start date.

➢ Duration –
   Select duration from the dropdown list. A period defines a timeframe of 12 months.

➢ End Date –
   Depending upon the Start Date and Duration field; automatically end Date gets displayed.

➢ Extended End Date –
   This field will display the extended date of Follow-Up Pool depending upon the 'Inactive HR Status period'.

➢ Extended By No. of Days –
   This field will display the auto calculated extended days of Follow-Up Pool depending upon the 'Inactive HR Status period'.

➢ Stop Follow Up Pool –

Click on the icon: 🚫 to explicitly stop the Follow-Up pool.

➢ In the mentioned table user can define the no. of appointments to be scheduled for a Patient. In the **Planned No. of Appts** row, enter the number of planned appointments to be scheduled in the respective mentioned columns for a Follow-Up program.

➢ In the **Total Appts Per Period** column, auto-calculated total value of **No. of Drug Appts**, **No. of Alcohol Appts**, **No. of Drug-Alcohol Appts**

➢ For each Period (equivalent to 12 Months/ Period), DAC must enter the number of appointments to be scheduled in the **No. of Drug Appts**, **No. of Alcohol Appts**, **No. of Drug-Alcohol Appts** columns for the Follow-Up program.

➢ **Actual Start Date** column's value for each Period is auto-populated and may vary depending upon the 'Inactive HR Status period'.

➢ **Actual End Date** column's value for each Period is auto-populated and may vary depending upon the 'Inactive HR Status period'.

➢ After entering all the details User must click the checkbox of **Freeze Details and Start Scheduling Follow Up Pool Appointments**.

➢ After clicking on the **save** button, DAC (Drug and Alcohol Coordinator) would not be able to change any information. Only Document List, Lab Matrix, Inactive HR Status and Stop icons are accessible.

- **Follow-Up Appointments**
  This tab lists all the scheduled Follow-Up appointments of an employee.

  Following columns are displayed on the Follow-Up Appointments screen:

  ➢ Date –
  Display the date of the appointment in MM-DD-YYYY format.

  ➢ From –
  Displays the time when the appointment is scheduled.

  ➢ UpTo –
  Displays the time till which appointment is scheduled. This value is based upon the 'From' time and 'Duration' of the encounter type associated to the appointment.

➢ Provider –

Display the name of a Provider for whom appointment have been scheduled.

➢ Reason for Visit –

Display the reason of a visit for the appointment.

➢ Status –

Display the current status of an appointment.

➢ Status Comments –

Displays the comments, entered from the arrow button while trying to change the status of the appointments from Appointment schedule screen.

➢ Encounter –

This will have the stethoscope button, which will navigate the user to the encounter of the patient. This will be enabled always. If there is encounter of the highlighted row's appointment, the system will take the user to the Face Sheet encounter of the patient OR to the latest open encounter.

➢ Scheduled By –

Display the name of a person who has schedule the appointment.

➢ Last Edited Date –

Display the date and time stamp, when the appointment was last edited.

➢ Edited By –

Display the name of a user who had edited the appointment.

➢ Location –

Display the name of a location, for which appointment has been scheduled.

➢ Encounter Type –

Display the encounter type of scheduled appointment.

4.5 Provision to delete a sent Letter from the Letters-Out screen (Patch 69)

Navigation Goto menu: Patient → Letters-Out

Now, user has provision to delete the sent letter by clicking on *delete* button from Letters-Out screen.

A new role, 'DeleteSentLetterOut' has been added. When this role is assigned to a user then user is allowed to delete a Letter-out with Sent status as well.

The deleted Letters will neither show on the Letters-Out search nor on the Document list screen. Also, it will not be seen under Data Export.

An Audit is maintained for Delete action.

4.6 A new tag is now available to display the selected value on the Clinic Forms output as checked (Patch 187)

Navigation Go to Menu: Patient → Clinic Forms

A new tag *ENC_CCFTEST_RESULTTICK$* has been introduced which will now display the selected options on the Clinic Forms output as checked.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

5   CPOE

5.1   Order Status 'Complete and Reviewed' will not be displayed in Consult and Procedure search popup (Patch 177)

Navigation Goto: CPOE → Procedure

AND

CPOE →Consult

Earlier, 'Complete and Reviewed' *Status* was considered and displayed in the Consult and Procedure search popup.

Now, Consult and Procedure orders with 'Complete and Reviewed' *Status* will not be displayed in search popup.

Note: *The search section under TOC → Procedure Order will keep showing all the Orders, irrespective of Order Status.*

5.2   A new sub-menu, 'Rx Review' has been introduced under CPOE menu (Patch 183)

Navigation Goto menu: CPOE → Rx Review

OR

Goto menu: Messages → Inbox → click on Zoom icon: 🔎 of eRx Refill/Change Request and Cancel Response messages → Rx Review

1. A new sub-menu option **Rx Review** has been added to enhance experience of reviewing Rx messages which are sent to group of providers.
2. When same Rx message is received by a group of Providers in the Message → Inbox screen, it becomes difficult to interpret who has already acted upon the message. If one Provider has acted on the Rx request, then currently the other Providers are able to see the same message in their inbox, even if the action has already been performed. Thus, to make this process efficient where Providers do not have to see the same messages on which action has been performed a new 'Rx Review' screen has been introduced.
3. Rx Review screen displays following types of messages:
   - Change Request
   - Cancel Response
   - Refill Request

- Rx Fill

4. Rx Review screen is divided into two sections as Left pane and Right pane.

5. Left pane:

  - In this, unread messages are listed upon which user action is not yet performed.
  - User may select to view messages by specific Patient and date.
  - Maximum 10 records of SureScripts messages are displayed.
  - First/Last/Next/Previous arrows help user to navigate through the pages of SureScripts messages; if messages are present in large amount.

  Note: *RxFill read only messages are excluded from this.*

6. Right pane:

  - In this, depending upon the selection in the Left Pane actual message previews. This screen is same screen as earlier to act upon messages with more efficient user interface.
  - First/Last/Next/Previous arrows in the right pane navigate as per the Message Type.

  Note: *In the Right pane, RxFill type of messages is displayed only when accessed from Zoom icon:* 🔍 *of Message → Inbox screen. Please note that RxFill is not yet enabled by Surescripts in production.*

7. Key Factors of Rx Review screen:

  - If the same SureScript message is being sent to multiple Providers/Staff, all those Providers/Staff members will see this message under following sections:
    ➢ Messages → Inbox
    ➢ CPOE → Rx Review
  - Once any one of the Provider/Staff has taken action on the Rx message from CPOE → Rx Review,
    ➢ Rx message will be dropped-off from the Left pane list of CPOE → Rx Review for all the Providers/Staff member
    ➢ Rx Message will be marked as 'Read' on the Messages → Inbox screen for all the Providers/Staff member
  - If a Provider/Staff member just reads the message from CPOE → Rx Review screen and exit without taking any action,
    ➢ Message will still be available under both CPOE ▯ Rx Review and Messages ▯ Inbox screens
    ➢ The message will be marked as 'Read' for the user who reads it, but will still be 'unread' for all other users

- If a message is deleted from the Messages → Inbox section by any Provider/Staff member, only the message notification will be deleted from that user's Inbox.

The SureScript message (on which no action is performed) will be visible from CPOE → Rx Review screen.

8. Roles and Rights of Rx Review screen:
   - In order to display Rx Review sub-menu under CPOE → Rx Review on the Role screen **Read** access for **Rx Review** should be checked.
   - Access rights for '**eRx Refill/Change Request and Cancel Response**' under **CPOE** would get assigned automatically when **Read** access for **Rx Review** is given.

9. Audit Trails are maintained when the messages are marked as 'Read' from the CPOE → Rx Review → Left Pane.

6   Patient – Register

6.1   Provision to set mandatory fields of Address tab on Patient Registration screen (Patch 40)

Navigation Goto Menu: Patient → Register → click on *Address* tab

Provision has been provided to a user to set mandatory fields of Address tab by using values in the property *patient.address.mandatory*.

Data type of the property *patient.address.mandatory* has been changed from 'boolean' to 'valset'. Following mentioned values are accepted in the property to set mandatory fields on the *Address* tab:

1.   L1 - Line1 and City
2.   HT - Home Tel
3.   CP - Cell Phone
4.   FX – Fax
5.   EM – Email
6.   W1 - Work Tel1
7.   W2 - Work Tel2

This property also considers mandatory fields for the relevant address tab on the 'Quick Registration' screen.

This property is not applicable for setting any field as mandatory on any of the Portals.

If *patient.address.mandatory* is ON for the existing users, then by default, the property value is set as 'L1'.

6.2   On Patient Registration History popup, old/updated history records are shown for imported patient records (Patch 169)

Navigation Goto menu: Patient → Register → click on History button → Patient Registration History popup

On Patient Registration History popup, now for imported patients' record, history is shown in updated and old format using existing property *patient.log.changes*.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

7 Patient – Encounter

7.1 Vendor Field will not get reset to Any Lab and disabled when radio button Order Set is selected (Patch 6)

Navigation Goto Menu: Encounter TOC → Order Sheet

Now, when user selects **Order Set** radio button, the **Vendor** dropdown will not get reset to any lab and will remain enable for user to edit means user has provision to change the vendor. Also, when test name will be selected then on the right side of the screen along with selected Vendor name will be populated. Also, and if user navigate to any other radio button, still the selected Vendor would not get reset to any lab.

7.2 On Radiology Import, Test Level with multiple attachments are now supported on Radiology Result screen (Patch 6)

Navigation Goto menu: Patient → Encounter →Radiology → Results

Earlier on radiology import, result test with multiple attachments were not supported.

Now, Radiology import supports result test level with multiple attachments on Radiology screen.

New property *hl7.result.test.multiple.attach* has been added for HL7. If this property is set to 'Y', it will support result test level with multiple attachments. If the property is set to 'N', it will support result test level with one attachment.

Result tests attachments can be added from the following screens

1. CPOE →Rad Result

2. CPOE →Radiology Review

3. Encounter TOC →Rad Result

4. Rad Result Import

Result tests attachments can be deleted from the following screens:

1. CPOE →Rad Result

2. CPOE →Radiology Review

3. Encounter TOC →Rad Result

Note: *When result test with multiple attachments of same type were added and one attachment was deleted then it was observed the remaining attachments were not getting updated.*

7.3 The Health summary shared on API is now getting counted in Patient Electronic Access measure of MU3 (Patch 7)

Navigation Goto: Patient's Encounter→ Encounter TOC→ Encounter Close

Earlier the *Share Health Summary on API* checkbox on Encounter Close always displayed as disabled. Now, the *Share Health Summary on API* checkbox is displayed as enabled.

For Provider with QPP stage selected as MIPS and/or Meaningful Use stage as Stage 3, if this checkbox and *Share Health Summary on Porta*l checkbox are selected then the Patient will be counted in the Patient Electronic Access measure's numerator.

Note: *For Provider with Meaningful Use stage as Modified Stage 2, this checkbox will not be considered.*

7.4 Changes on Prescription screen (Patch 11)

Navigation Goto: Patient's Encounter→ Encounter TOC→ Prescription

1. Following changes are made when a user sends the Prescription through eRX:
   A. If a Pharmacy supports Cancel eRx, then the *Del* checkbox and *Update* button will become disabled after eRx is sent.
   B. If a Pharmacy does not support cancel eRx, then the *Del* checkbox and *Update* button will remain enabled.
2. If the selected Pharmacy supports Cancel eRx service then before the *Pharmacy* name, 'Cancel-eRx' displays.
3. On *Del* column FTUX is changed to 'If the pharmacy supports Cancel eRx, you will not be able to delete drugs once sent by eRx'.

7.5 A new tag 'ENC_AUDIOMETRY$GRAPH' is added to plot a Graph for Audiometry readings on Progress Notes (Patch 16)

Navigation Goto: Patient's Encounter→ Encounter TOC→ Progress Notes

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

A new tag, **ENC_AUDIOMETRY$GRAPH** has been added to plot a graph for Audiometry readings on Progress Notes.

7.6 Test execs changes have been made on Vitals/Review of System and Physical exam screen (Patch 17)

Navigation Goto Menu: Encounter TOC →Physical /ROS/Vitals

Changes have been made for following Test Exec screen:

- Vitals

- Review of System

- Physical exam

7.7 A new property procedure.schedule.default.value has been introduced (Patch 17)

Navigation Goto Menu: Encounter TOC → Order Sheet

A new property *procedure.schedule.default.value* has been introduced. Value defined in the property is displayed as default value in the dropdown of **Schedule** field present under select tab of **Order Sheet** screen.

A search is given for the property to select the required duration that is to be set as default value in the **Schedule** field dropdown list

If the property is left blank then default value **Now** will be displayed in the **Schedule** field.

Note: *The selected value will be prefixed with **Within** in the **Schedule** dropdown list for procedure of Order Sheet screen.*

7.8 Subject field on View Order Screen will now display name of the Selected Consult (Patch 17)

Navigation Goto Menu: TOC → Order Sheet

Earlier, when an Order was created by selecting Consult name then in the Subject field on View Orders screen name of the selected template was displayed. However, now in the subject field name of the selected Consult will be displayed.

7.9 Set of Quality Measures (earlier PQRS) have been updated according to the latest 2017 list (Patch 22)

Navigation Goto: Patient's Encounter→ Encounter TOC→ Quality Measures

A set of Quality Measures (earlier PQRS) have been now updated according to the latest list of year, 2017.

7.10 Test execs changes have been made on HPI screen (Patch 28)

Navigation Goto Menu: Patient's Encounter → Encounter TOC →HPI

Test execs changes have been made on HPI screen.

7.11 Lab/Radiology tests on the Order Sheet screen are now sorted depending upon the properties (Patch 37)

Navigation Goto Menu: Patient's Encounter → Encounter TOC → Order Sheet

The Lab/Radiology tests on the respective tabs are now sorted depending upon the following properties:

1. *ordersheet.lab.all.sort*
   Based on the database column name entered in this property, the Lab tests in 'All' option on the Order Sheet screen are sorted.

2. *ordersheet.rad.all.sort*
   Based on the database column name entered in this property, the Radiology tests in 'All' option on the Order Sheet screen are sorted.

3. *ordersheet.lab.preferred.sort*
   Based on the database column name entered in this property, the Lab tests in 'Preferred' option on the Order Sheet screen are sorted.

4. *ordersheet.rad.preferred.sort*
   Based on the database column name entered in this property, the Radiology tests in 'Preferred' option on the Order Sheet screen are sorted.

7.12 New tab 'From PMP' has been provided on the Medical History popup (Patch 38)

Navigation Goto menu: Patient's Encounter→ Encounter TOC → Prescription → click on *Med Hist* button

- A new tab *From PMP* has been provided on the Medical History popup to view the Prescription History report of Rx registry, Ohio Automated Rx Reporting System (OARRS).

- OARRS is using an integration service called PMP Gateway to integrate Patient's Prescription history data into application.

- Based on the newly added property, *rx.medhist.frompmp* being turned ON or OFF, the *From PMP* tab is shown or hidden on the screen.

- If property *rx.surescript.getmedhistoryatencstart* is ON then only *Med hist* button is visible and Medication history from PMP can be displayed.

- On the click of From *PMP* tab, HTML History report is displayed from PMP Gateway using web service.

- If interaction is successful with PMP Gateway then below mentioned information is sent:
  - Provider details-
    Logged in users information is sent in the Provider details.
  - Location details-
    Clinic location is 'CL'. At least one of the following identifier is required: DEANumber, NPINumber, or NCPDPNumber, and Address (State code required).
  - Patient details-
    First Name, Last Name, Birth Date, Sex, SSN, Address details are sent in Patient details.

- User need to add Data Mapping for Designation of Medics. Allowed Roles for PMP gateway data mapping code should be 'PMPDESGN'. External Data value is Provider's Designation and another Data value is Allowed Role. Following are the allowed Roles:
  - Physician
  - Pharmacist
  - Pharmacist with prescriptive authority
  - Nurse Practitioner
  - Psychologist with prescriptive authority

➢ Optometrist with prescriptive authority

➢ Naturopathic Physician with prescriptive authority

➢ Physician Assistant with prescriptive authority

➢ Medical Resident with prescriptive authority

➢ Medical Intern with prescriptive authority

➢ Dentist

Note:

❖ *HTML Rx Report will not be stored at PrognoCIS.*

❖ *Returned HTML report is on the basis of Patient's matching criteria at PMP State. So the multiple Patients history can be fetched and Patient matching is depending upon individual PMP State.*

❖ *Error Response log is stored in the PrognoCIS.*

❖ *Audit Trails are not applicable for Medication History popup.*

❖ *On the Medical History popup, there is no provision to interchange From PMP tab with other tabs.*

7.13 Provision to make 'Funding Source' field mandatory on the Administer Vaccine popup (Patch 38)

`Navigation` Goto Menu: Patient's Encounter → Encounter TOC → Vaccination → click on *Administer* button → Administer Vaccine popup → click on *Vaccination on this visit* radio button

User has a provision to make *Funding Source* field mandatory on the Administer Vaccine popup. To make *Funding Source* field mandatory, set value 'B' to the property *vaccination.admin.mandatory*.

7.14 Provided changes for 'Future' and 'Schedule' duration dropdown on the Order Sheet screen (Patch 42)

`Navigation` Goto Menu: Patient's Encounter → Encounter TOC → Order Sheet → click on Lab/Radiology/Procedure tab

- Now, *Future* and *Schedule* duration dropdown will display the list of active durations before inactive durations, while ordering Lab/Radiology and Procedure tests respectively. *Future* and *Schedule* duration dropdown sorting is done by Sequence, No. of days.

- All inactive durations are suffixed with 'Inactive' and displayed in gray color.
- User is not allowed to save test order with Inactive durations.
- If a test order is scheduled with an 'active' duration which is later marked as 'inactive', then user will not be able to create an order. An alert is displayed to inform user to select an 'active' duration from the list. Following is the alert message:

    "Selected duration is Inactive. Please select an active duration for scheduling following test(s)."

- However, if an order is created and then the duration is marked inactive, then users are allowed to Order the test/Procedure.

7.15 MBTA WC Payments Module Introduced (Patch 52)

Navigation Goto: Patient's Encounter → Encounter TOC → MBTA WC → click on *Reserves*/*Payments*/*Responses*

In order to serve MBTA Workers Comp department's need of having to process the payments to be released to claimants/vendors of site injury related cases, a new menu option under HOOK in Encounter TOC as *MBTA WC* with three submenus as *Reserves*, *Payments* and *Responses* has been introduced.

1. Reserves:
    This screen will help the WCDR (Worker's Comp Department Representatives) to enter the amounts, which is used to release payments to Claimants or Vendors.

2. Payments:
    In the Payments screen WCDR's will enter the details of the payments to be released out to claimants or vendors. Once the WCDR enters the details and click on 'Send to AP', then the system generates an XML file and sends it to the FMIS system of MBTA.

3. Responses:
    After receiving the XML, MBTA accounts department will release the check to appropriate party and will create a response XML file. The response XMLs are processed in PrognoCIS and displays under Responses screen.

Note:

❖ *For each Injury, the WCDR will be creating a new encounter.*

❖ *The WCDR will be able to create a Reserve only after answering the specialty template, First Report of Injury or Fatality.*

❖ *The payments will get created only after the WCDR saves the Reserve at least once.*

7.16 User has provision to view acknowledgement status of the exported Vaccination using new filters on the Response Log popup (Patch 53)

Navigation Goto menu: Patient's Encounter→ Encounter TOC → Vaccination → click on *Response Log* button → click on *Export* tab

Now, user has provision to view acknowledgement status of the exported Vaccination using new filters such as *All*, *Success*, *Failure*, *Since Date*, and *UpTo Date* on the Response log popup.

7.17 Changes for MU Summary CCD (Patch 56)

Navigation Goto menu: Patient's Encounter→ Encounter TOC → Assessment

1. Assessment notes added from the *ICD* tab are now displayed under *Assessment* section of MU Summary CCD along with the added Notes.

2. Earlier, only primary ICDs were displayed under Encounter section of MU Summary CCD. Now, all the added ICDs from Assessment screen are displayed under *Encounter* section MU Summary CCD.

3. Added CPT/HCPC from Assessment screen is now displayed under *Procedure* section of MU Summary CCD.

7.18 Provision to mark ICDs as 'billable' irrespective of the 'Billing' module status (Patch 56)

Navigation Goto : Patient's Encounter → Encounter TOC → Assessment → click on *ICD* tab

Earlier, property *assessment.icd.billable* used to mark all the ICDs as 'billable' on the *ICD* tab only if the 'Billing' module is set to ON. If the user is using only EMR module, then the 'billable' checkbox doesn't get auto checked unless the ICD is added from the Assessment screen.

Now, the property *assessment.icd.billable* marks all the ICDs as 'billable' irrespective of the Billing module's status.

7.19 Provided 'TOC Visit Status' dropdown list on the Start/Edit Encounter and Appointment Schedule screens (Patch 60)

Navigation Goto: Patient's Encounter→ Encounter TOC→ Encounter→ Start New/Edit Existing→ Start New/Edit Existing Encounter screen

AND

Goto menu: Appointments→ Schedule→ double click on the Appointment time slot→ Appointment Schedule popup

- Earlier, the *TOC Visit Status* field on Start New/Edit Existing encounter screen was read only. Now, the *TOC Visit Status* dropdown list has been provided on the following screens for a user to select the required Transition of Care visit status:

  - Start New Encounter screen
  - Edit Existing Encounter screen
  - Appointment Schedule popup

- The dropdown list would consists of the following values:

  - No Transition of Care
  - Transition of Care(New Patient)
  - Transition with Summary of Care
  - New Patient without Summary of Care
  - Transition without Summary of Care
  - Transition with Referral Note
  - Transition without Referral Note

- If the CCD is present then at the start of encounter or marking the appointment as Arrived, the TOC Visit Status calculated based on the system logic is considered and the user selection will be ignored.

- However, if the CCD is not present then the user selected TOC Visit Status would be considered and updated at the time of starting an encounter.

- While importing an Appointment, the following logic would be considered for setting the TOC Visit Status:

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

− If the Appointment with Scheduled status is imported, then the TOC Visit Status would be set as 'No Transition of Care'.

− If the imported Appointment is marked as Arrived then based on the availability of the CCD, the TOC Visit Status will be set.

7.20 Provided Audit Trails on Encounter Start (Patch 65)

Navigation Goto Menu: Patient's Encounter → Encounter TOC → Encounter → Start New

Now, Audit Trails have been provided on Encounter Start for an update action.

7.21 Only selected sections in MU Summary/Health Summary are printed from Encounter Close screen and Patient Portal (Patch 76)

Navigation Goto menu: Patient's Encounter → Encounter TOC → Encounter Close → click on *MU Summary* button

OR

Goto Menu: Patient Portal → Health Summary

Now, user has provision to print only the sections which are displayed on the MU Summary/Health Summary screen. Hidden sections are not considered while printing MU Summary. The sections to be displayed or hidden can be configured from MU Summary TOC.

The print does not depend on the property *ccd.show.sections* and *ccd.sections.expand*; hence the sections which are selected and collapsed will also be considered for Print.

7.22 MIPS-Quality-Claims measures are now accessible from Assessment screen (Patch 76)

Assessment screen

Navigation Goto menu: Patient's Encounter → Encounter TOC → Assessment

The following changes have been done on Assessment screen to incorporate the MIPS-Quality-Claims measures:

1. *eCQM* button label changed to *eCQM/EHR*.

2. A new label *MU/QPP Quality Measures* has been added for *eCQM/EHR* and a newly added *Claims* button.

   Note: *If the system level property, prognocis.meaningful.available is set to OFF then the eCQM/EHR button would not be displayed on the Assessment screen.*

3. On the click of *Claims* button, 'Quality Claims Measure' popup is displayed same as of **'MIPS-Quality-Claims'** screen invoked from Encounter TOC.

4. On the 'Quality Claims Measures' popup,
   - ➢ Upon modifying any information if a User clicks on *save* button then the popup get closed and Assessment screen get refreshed.
   - ➢ Cancel button from **'MIPS-Quality-Claims'** screen has been changed to *close* button on the 'Quality Claims Measures' popup which will close the popup without saving any changes.

5. *Claims* button is displayed as enabled only if Patient has insurance with 'Medicare' type otherwise it would be displayed as disabled.

6. If *save* button on the Assessment screen is enabled then on the click of *Claims* button, an alert "Please Save Record first!!" displays and user will not be able to access 'MIPS Quality Claims' popup until user save the changes or refresh the Assessment screen.

7. If Patient's 'Medicare' insurance is not 'active', then on the click of *Claims* button, a confirmation message will be displayed as below,

   "Patient Insurance with Type as MEDICARE has been inactivated. Do you still want to go to this screen?"

   If User clicks on *Yes* button, then Quality Claims popup will get open and on click of *No* button, the popup will not get invoked and user remains on Assessment screen.

   Note: *If system found multiple insurance with type 'Medicare' and any of them is active, and then the confirmation message will not be displayed.*

MIPS-Quality-Claims screen

Navigation Goto menu: Patient's Encounter → Encounter TOC → MIPS-Quality-Claims

On the MIPS-Quality-Claims screen, an alert message, "Quality Claims Measures screen has been moved to Assessment screen. Kindly click on 'Assessment' menu option and then click on button 'Claims' to access this screen as a pop-up." is now displayed.

7.23 MIPS Quality Claims measures have been updated according to the 2018 year list (Patch 85)

Navigation Goto menu: Patient's Encounter → Encounter TOC → MIPS Quality Claims

A set of MIPS Quality Claims measures (earlier PQRS) has been now updated according to the list of 2018 year.

7.24 Changes have been provided on Vaccination screen to restrict administration of Vaccines with expired lot number (Patch 89)

Navigation Goto : Patient's Encpounter → Encounter TOC → Vaccination

In order to, restrict administration of Vaccines with expired lot number, following changed have been provided:

1. If expiry date of a Vaccination is lesser than the Current Encounter date then *Adm When* field is now disabled.
2. On the Vaccination screen → click on *Administer* button → Administer Vaccine popup
   A. In *Vaccination on this visit* section, upon adding an expired Vaccine; alert message, "Cannot administer vaccine with expired Lot number" is displayed.
   B. In *Vaccination not associated with this visit* section, upon adding expired vaccine; the default *Manufacturer*, *Lot number* and *Expiry date* fields of vaccine would be displayed as blank.

Note:

- ❖ *The alert message is not given for expired vaccines with Statuses: 'Vaccination is not associated with this visit', 'Not Tracked', 'Refused by Patient', and 'Refused by Clinic.*
- ❖ *Above mentioned is also applicable for 'State' provided Vaccine.*

7.25 Changes have been given while adding In-House drug on the Prescription screen (Patch 116)

Navigation Goto: Patient's Encounter → Encounter TOC → Prescription

Following are the changes done for adding In-House drug:

1. On the In-House Drug Master screen click on CPT/HCPC button. On the Assign Codes CPT/HCPC popup, maximum digit which can be added in the *Units* field is restricted to 2 digits.

2. When the CPT which is associated to Rx is saved on the Assessment screen, then the modified value of *No. Of Units* is not added to the Prescription screen.

3. For the existing data, when the user tries to add the drug through *Past Rx* button and if the multiplication exceeds 5 digits of *No of Units* field then the respective CPT is not added and the *No of Units* field on the Prescription screen is shown as blank. The user will be prompted to add the *No of Units* on the click of *save* button.

7.26 Sign and SignDate data types has been introduced for Patient Form (Patch 116)

Navigation Goto: Patient's Encounter → Encounter TOC → Patient Forms

Two new data types, *Sign* and *SignDate* are introduced for Patient Form.

Sign data type prints only the signature and SignDate data type prints signature as well as timestamp on the form.

Including these both data types, maximum of 9 data types can be used in one Patient Form. The user can sign using a mouse/stylus/hand.

On printing the form, the printed document resembles the Patient form and shows the signature as well. The patient can fill and sign the form from Patient Portal, Independent Patient Login (IPL) or PrognoCIS.

If any of the signatures filed is left blank, then a warning message is displayed on click of Save/Accept action of the form.

Note: *Above mentioned new data types are not applicable for Doctor Forms.*

7.27 Changes on the eCQM popup (Patch 109)

Navigation Goto : Patient's Encounter → Encounter TOC → Assessment → click on *eCQM/EHR* button → eCQM popup

Following User Interface (UI) changes have been provided on the eCQM popup:

1. Exclusion column has been rearranged. New Exception column has been added and Overall column has been removed.

2. On the click of 'Pass' or 'Fail' or 'NA' hyperlinks user can view the applicable conditions and its relevant codes, which will give information to user, whether the conditions are Passed or Failed.

3. In the Exclusion column now 'Not Selected' or 'Excluded' hyperlinks have been provided wherever it is applicable. On the popup of 'Not Selected' or 'Excluded' hyperlinks user can view the applicable conditions and its relevant codes, which will give information to user reason of patient getting excluded.

4. In the Exception column now 'Not Selected' or 'Exception' hyperlinks have been provided wherever it is applicable. On the popup of 'Not Selected' or 'Exception Met' hyperlinks user can view the applicable conditions and its relevant codes, which will give information to user, reason of patient meeting exception criteria.

5. Copy to clipboard option for Code and Description has been provided on the popup of hyperlinks of columns: Denominator, Numerator, Exclusion , Exception

7.28   A set of eCQM measures have been updated as per 2018 year list (Patch 109)

Navigation Goto: Patient's Encounter → Encounter TOC → Assessment → click on *eCQM/EHR* button → eCQM popup

OR

Goto menu: Settings → Configuration → click on *MU/QPP Settings* under *Workflow* column → select a Provider → click on *EHR based* tab

A set of eCQM measure have been updated as per 2018 year list. Earlier, 26 eCQM measures were supported by PrognoCIS from which below mentioned 4 measures have been removed and now 22 eCQM measures have been updated:

- 0036 - Use of Appropriate Medications for Asthma
- 0060 - Hemoglobin A1c Test for Pediatric Patients
- 0064 - Diabetes: Low Density Lipoprotein (LDL) Management
- 0075 - Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control

7.29 Snomed tab has been provided on the Assessment screen (Patch 109)

Navigation Goto: Patient's Encounter→ Encounter TOC→ Assessment

- Now, Snomed tab has been provided between CPT/HCPC and Goals tabs on the Assessment screen to add the SNOMED codes.
- On click of [+] button of Snomed tab, the popup will be displayed consisting of three tabs as ICD, CPT and Snomed. From each tab user will be able to search ICD, CPT or Snomed.
- On Snomed tab, on selection of SNOMED code from any tab of popup, and click of button OK, the entry is made on SNOMED tab of Assessment with respective Source.
  For example: On selection of a SNOMED code from CPT tab, and click of button OK, the entry made on SNOMED tab of Assessment with Source as "CPT".

- Before saving, the maximum number of fresh records to be saved is defined by the property '*assessment.cpt.newrows*'
- If the property '*prognocis.meaningful.available*' is set ON then only the snomed tab will be visible on assessment screen else it will not be available.

7.30 Provision has been given to calculate the Creatinine Clearance (Patch 107)

Navigation Goto: Patient's Encounter → Encounter TOC → Vitals

Now, Users can calculate the Creatinine Clearance on the basis of Serum Creatinine value, height, weight, age and gender of the Patient. Three new key words have been added to perform this calculation as follows:

1. **IDEAL_BODY_WEIGHT_KG** –
   Calculation for Ideal Body Weight in KG is done using this formula.

2. **IDEAL_BODY_WEIGHT_LBS** –
   Ideal Body Weight is calculated in LBS using this formula.

3. **COCKCROFT_GAULT** –
   Creatinine clearance calculation is done using this formula.

Following are the tests to be defined by the users for calculations:

➢ Serum Creatinine - Result type can be Numeric/Fraction

➢ Ideal Body Weight in KG / Ideal Body Weight in LBS - Result type is Formula

➢ Creatinine Clearance - Result type is Formula

➢ Height and Weight – Result type can be Numeric/Fraction

Note: *If the ABW (Actual Body Weight) is less than the IBW (Ideal Body Weight) then users have to use Actual Body Weight for calculating the Creatinine Clearance.*

7.31 Changes have been provided in the Prenatal workflow (Patch 122)

Navigation Goto : Patient's Encounter → Encounter TOC → Prenatal

Earlier, users in PrognoCIS were allowed to close the Pregnancy cycle in any of the previous open encounter. As a result, the calculations were not to the desired result. Even if Pregnancy cycle was marked as closed (over), Prenatal SC Templates information was getting carry forward to the next encounter if Encounter is closed out of sequence.

To overcome above mentioned issues now prenatal functionality has been evolved in which now if a user wants to mark the pregnancy over in latest visit encounter only.

Now, following changes have been made to the Prenatal workflow:

1. **Validations provided to restrict the user/system to mark the Pregnancy cycle as closed in Previous Encounter(s) as below:**

Once, the user starts a new encounter, the *Close Pregnancy Cycle* checkbox (click on *Set Preg* button) will be disabled in the previous encounter irrespective of new encounter being open or closed.

A. **Disable "Close Pregnancy Cycle" checkbox:**

- If a user want to mark the Pregnancy as over in one of the previous encounter, then user has to delete the subsequent open or close encounters. The check box, 'Close Pregnancy Cycle' will get enabled in the previous encounter once the subsequent open or close encounters are deleted.

- To inform user, a tool tip is displayed on the mouse hover of the disabled check box as:

"Pregnancy cycle can be closed in latest visit encounter only."

B. Warning and alert on "Post Partum" tab:

- Also, when a user fills the *Post Partum* template and clicks on *SAVE*, the pregnancy cycle is auto marked as over. In the above scenario of multiple open encounters, same functionality is implemented on the Save of Post Partum template.

- An alert is displayed on accessing the *Post Partum* tab and also on the click of *Save* of the template.

  "Postpartum form cannot be filled in this encounter as there are subsequent encounter(s) present with same pregnancy number. Please fill the form in latest visit encounter."

2. Carry forward functionality changes:

- In Face Sheet encounter:
  On Face Sheet encounter if a user fills any of the Prenatal Specialty templates which is associated to any option on OB Master, then on the start of an encounter the information is not carried forward in the encounter on the Prenatal tab as well as on TOC → Specialty.

- On the Start of an Encounter:
  - ➢ Specialty Templates other than Prenatal Specialty Templates present in Face Sheet Encounter are carried forward in the next encounter.
  - ➢ If Pregnancy is not over then all Prenatal templates are copied from previous visit encounter into new encounter irrespective of previous encounter being open or closed.

- On Encounter Close:
  Prenatal templates will not get carry forward from current encounter into the Face Sheet encounter.

- Zero duration encounter:
  Users are not allowed to:

  - ➢ Set the Pregnancy No.
  - ➢ To Close Pregnancy Cycle

Note: *Pregnancy No. and Close Pregnancy Cycle fields are disabled.*

Pregnancy No. is copied from previous visit encounter if it is present.

Prenatal Specialty data will not be copied from the previous visit encounter.

3. **EDD (Expected Delivery Date)**

- Property *ob.close.pregnancy.alert* is marked as obsolete and no alert message is displayed to inform user about the EDD (Expected Delivery Date). Now, system will automatically close the pregnancy cycle based on below mentioned criteria:
  - ➢ On the start of a new encounter, depending upon the number of days entered in 'Close Pregnancy: EDD+' field in the Setting → Configuration → OB Master, the pregnancy will be auto marked as over in the previous encounter. Default value for 'Close Pregnancy: EDD+' is 60
  - ➢ A system generated notification message is sent to the 'Attending provider' of last visit encounter to intimate about the auto close of pregnancy.

7.32 Provision to add Review comments for Machine Interface documents (Patch 134)

Navigation Goto: Patient's encounter → Encounter Table of contents→ Document List

Now, provision has been given to add Review comments for the Machine Interface documents from the Document List screen. A *Review* button is now available on preview popup of Machine Interface documents from which comments can be entered.

7.33 A provision has been given to include Review Comments of a Machine Interface document on Progress Note that are added from Document List screen (Patch 145)

Navigation Goto: Patient's Encounter → Encounter Table of Contents → Progress Note

Now, a provision has been given to include Review Comments of a Machine Interface document on Progress Note that are added from Document List screen.

Following are the new tags used on Progress Note screen to include Review Comments:

- *[ENC_MI_REVIEW$]:*
  This tag will print the review comments of each of the machine interface document performed in the current encounter of the patient.

If user wants Specific machine interface's review comments then Tag will be

[ENC_MI_REVIEW$VISION]

OR

[ENC_MI_REVIEW$ECG]

- ***[PT_MI__REVIEW$] :***

  This tag will print the review comments of each of the machine interface document performed in the all of the encounters of the patient.

  If user wants Specific machine interface's review comments then Tag will be

  [PT_MI__REVIEW$VISION]

  OR

  [PT_MI__REVIEW$ECG]

7.34 A provision has been given to access Order Sheet and Calculate MDM popup on Doctor Forms screen (Patch 154)

Navigation Goto: Patient's Encounter → Encounter Table Of Contents → Doctor Forms

Now, a provision has been given to access Order Sheet popup (to create orders directly) and Calculate MDM popup on Doctor Forms screen. In order to make Order Sheet and Calculate MDM popup available on the Doctor Form screen, following configuration should be done on the Doctor Form Master screen (from Settings → Configuration → click Doctor Forms under Report Design column):

Data Type	Param
For Order Sheet	
Button	OSPOPUP
For Calculate MDM	
Button	MDMPOPUP

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

7.35 A provision has been given to manually control Lab/Radiology results that are directly shared on Patient/Referring Provider/Employer portal (Patch 154)

Navigation Goto: Patient's Encounter → Encounter Table Of Contents → Lab/Radiology Results

- Currently, Lab/Radiology results are shared directly onto the Patient/Referring Provider/Employer portal depending upon the *pp.testresult.beforereview* and *pp.testresult.days* properties; and settings of Lab/Radiology results. There is no provision on having control and share documents manually.

- Now, a provision has been given to have control over the Lab/Radiology results that are shared directly on Patient/Referring Provider/Employer portal. In a scenario, if a patient is diagnosed with some severe disease then Provider can control and hide the document to be shared directly on Patient Portal.

- In order to manually control the sharing of document, following new properties have been added:
  - ➢ Patient Portal- *pp.share.testresults.manual*
  - ➢ Referring Provider Portal-*rdp.share.testresults.manual*
  - ➢ Employer Portal- *emp.share.testresults.manual*

- If any Lab/Radiology test is marked as 'Hide All/Show Normal' then while sharing on the Portals from Document List screen, on the click of Share of Portal icon: ◀ along with Portals, a warning message, "There are Hidden/Abnormal test(s) in this Order. Click on 'Save' to proceed else close the popup." is displayed. On the click of *save* button the result is shared on the Portals.

- After sharing a document if clinic wish to unshared the document then on portals the document gets removed from Lab/Radiology Results and Clinic Shared Documents.

- The property *pp.testresult.beforereview* will be applicable only if property *portals.share.testresults.manual* is set to OFF.

- If property *portals.share.testresults.manual* is set to OFF, then while sharing the tests results either from 'Document List' or from 'Lab/Rad Results' screen and the Test level is set to 'Show All', the tests should be shared on the Portals without any alert message.

- If a result is shared on Portal which contains one or more tests as 'Hide' or 'Abnormal' then the result is shared on portals except for tests and respective attachments which are marked as hide/abnormal.
- Also, following new properties have been added independently for Referring Provider and Employer portal in a similar function of Patient Portal properties *pp.testresult.beforereview*, *pp.testresult.days*:

For Referring Provider portal:

  ➢ *rdp.testresult.beforereview*
  ➢ *rdp.testresult.days*

For Employer portal:

  ➢ *emp.testresult.beforereview*
  ➢ *emp.testresult.days*

Note: *Only on Referring Provider Portal, the Lab/Radiology matrix will show all the tests results, even though they are marked as Hide or Abnormal.*

7.36 PrognoCIS now supports all 53 eCQM measures as per 2018 year list (Patch 166)

Navigation Goto: Patient's Encounter→ Encounter TOC→ Assessment→ click on *eCQM/EHR* button→ eCQM popup

OR

Goto menu: Settings→ Configuration→ click on *MU/QPP Settings* under *Workflow* column → select a Provider → click on *EHR based* tab

- Existing eCQM measures have been updated as per 2018 year list.
- Earlier, 26 eCQM measures were supported by PrognoCIS and now additional 32 eCQM measures have been certified, thus PrognoCIS now supports all 53 eCQM measures.

Note: *The newly added 32 eCQM measures are displayed with a yellow background in the MU/QPP Settings pop-up.*

Also in eCQM Compliance Status popup, an additional column, *CMS ID* has been added.

8 Messages

8.1 Provision to view the filled Patient Form from Message→ In screen (Patch 60)

Navigation Goto menu: Messages→ In

- Earlier for the filled Patient Form submitted from the Patient and/or Referring Doc Portal, the notification message was sent to the Clinic User (based on the property, *pp.submit.form.rule*). However, to view that filled Patient form, the User had to navigate to either the respective Patient's encounter→Patient Form screen, if the encounter was present or to Home screen→ click on Patient Form icon, if the Appointment was scheduled. This process of navigating was cumbersome for the User to quickly see what exactly has been submitted.

- Now, to ease this process, a zoom button has been provided for the submitted Patient Form notification message on the Message→ In screen. When a user clicks on the zoom button, the submitted Patient Form will be displayed in another popup.

- If the patient encounter is started after the form is submitted from patient portal then the system enables the buttons such as save, accept, reset, close, delete for the user to edit information and accept the form. And once the encounter has been closed, the buttons except for Reset, Close and Print will be displayed as disabled.

- In case the Patient Form hasn't been accepted and the patient deletes the submitted Form then on click of zoom button of the respective message, an alert message, 'The form you are trying to access has been deleted.' is displayed.

- Also, if the Patient edits the unaccepted form and submits it then the existing Patient Form will be updated on zoom button of Message→ In screen.

- For unaccepted form, if the Patient submits the same Patient Form again then no new notification message will be sent to the User.

- This change is applicable for the Patient Form submitted from all the three portals i.e. Patient Portal, Referring Doc Portal and Attorney Portal.

8.2 On the Message In screen, prefix from the 'Subject' column have been removed (Patch 151)

Navigation Goto menu: Messages → In

Now, on the Message In screen, prefix from the *Subject* column have been removed.

8.3 On the Message → In screen, prefix from the 'Subject' column have been removed (Patch 162)

Navigation Go to Menu: Messages → In

Now, on the Message In screen, prefix from the Subject column have been removed.

8.4 Default drop-down value changed from 'User' to 'Other' for all attach types on the 'Attach Center' and 'Scan/Local Attach' screens (Patch 171)

Navigation Go to Menu: Messages → *Attach Center* → under *Attach To* section → *From* drop-down

OR

Messages → *Scan/Local Attach* → under *Documents Details* section → *From* drop-down

Earlier, the *From* drop down in the *Attach To* section of the *Attach Center,* displayed default value as *User* for all attach types. Similar default value of the dropdown was also present on the *Scan/Local Attach* screen.

Now, the default drop-down for *From* on the aforementioned screens has been changed and set to *Other*.

9 Reports

9.1 MU/QPP Report title has been changed to 'Meaningful Use /QPP MIPS Reports' (Patch 33)

Navigation Goto menu: Reports → MU/QPP Reports

The MU/QPP report title in green color has been changed from '*Meaningful Use Reports*' to '*Meaningful use /QPP MIPS Reports*'.

9.2 Relabeled classification of MU/QPP reports (Patch 33)

Navigation Goto menu: Reports → MU/QPP Reports

Following Classifications for MU/QPP reports have been relabeled:

1. *2017-QPP-MIPS* is changed to *2017-QPP-MIPS-ACI*
2. *2017-MU* is changed to *2017-MU-Core-Objectives*
3. *2016-MU* is changed to *2016-MU-Core-Objectives*
4. *2015-MU* is changed to *2015-MU-Core-Objectives*
5. *2014-MU* is changed to *2014-MU-Core-And-Menu-Set*

9.3 Inactivated two MU/QPP reports (Patch 33)

Navigation Goto menu: Reports → MU/QPP Reports

Below mentioned reports under Classification, *Global Test* have been now inactivated:

1. Global Test Required MACRA ACI
2. Global Test Required MACRA ACI Transition

9.4 Changes for MU/QPP reports (Patch 56)

Navigation Goto : Reports → MU/QPP Reports→ QRDA_3_Cumulative of all eCQM measure Report and All QRDA 1 individual measure reports.

- Now, if the selected *From* and *UpTo* date for QRDA_3_Cumulative of all eCQM measure Report and All QRDA1 individual measure reports is greater than 100 days and when a user click on *Go* button, then the report will run in the background and following alert message is displayed to the user:

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117   (408) 873-3032

"The MU QPP report will be generated in the Background as the selected period is greater than 100 days. You will be notified when the report is generated under Download files."

- Once the Report generation process is completed, then a system generated notification message is sent to the user who has run the report. The notification message is not dependent upon any supported event.

- From Messages → In, user can view the report by clicking on the Zoom icon: 🔍 ; and can view the generated html file.

- If the report generation process is not complete and user click on *Go* button again or tries to run another report on the same screen, then following alert message is displayed:

"Please note that Report requests are resource intensive. There are other report(s) already set to be compiled in the background. PrognoCIS may become unresponsive due to long running of script if multiple reports are set to run concurrently. It is recommended to check download files before initiating a new report request."

- A new category, *MU/QPP Reports* is added in the Setting → Configuration → Clinic → Download files from where the User can download the generated file.

9.5 'NOT DONE' reports have been provided for 'ARRA measures' of 2017 reporting period (Patch 78)

Navigation Goto: Reports → MU/QPP Reports

Now, 'NOT DONE' Reports have been added for ARRA measures of Modified Stage 2/Stage 3 and ACI for 2017 reporting period. The reports will help providers to identify Patients qualifying Denominator but not part of Numerator for the selected period.

9.6 Three new QRDA-3 reports for ACI and IA measures have been added (Patch 109)

Navigation Goto menu: Reports → MU/QPP Reports

Now, three new QRDA-3 reports have been added using which Provider can complete their Attestation on QPP site. Following are the 3 new reports:

- ACI_QRDA3 - Cumulative for all ACI Measures

- IA_QRDA3 - Cumulative for all IA Measures
- QRDA3-Consolidated report for eCQM, ACI & IA measures

9.7 'QPP-MIPS-ACI Transition (2017)' report has been made functional on the MU/QPP Reports screen (Patch 102)

Navigation Goto menu: Reports → MU/QPP Reports

QPP-MIPS-ACI Transition (2017) report was added on the MU/QPP Reports screen; but now it has been made functional. QPP-MIPS-ACI Transition (2017) report is made functional using ACI Measures from Settings → Configuration → Workflow → MU/QPP Settings.

9.8 User Interface of 'QPP-MIPS-ACI Transition' report has been enhanced (Patch 122)

Navigation Goto menu: Reports → MU/QPP Reports

Now, user interface of 'QPP-MIPS-ACI Transition' report has been enhanced to show ACI Transition Category wise Scoring for 2017.

This new layout for 'QPP-MIPS-ACI Transition' report shows category wise measures like Base Score measures, Performance Score measures, Bonus Score measures. This report displays information in the below columns:

- Measure ID
- Measure Name
- Numerator
- Denominator
- Percentage/Status
- Performance Requirement
- Performance Weight
- Performance Score

Total ACI Score along with Total MIPS Score for ACI Transition Category is displayed at the bottom of the report.

9.9 A new report has been provided for MIPS-Quality-Claims to give measure wise summary (Patch 138)

Navigation Goto menu: Reports→ MU/QPP Reports

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117   (408) 873-3032

A new measure wise performance report has been provided for MIPS-Quality-Claims. Following is the details about the report:

Classification:	2017-QPP–MIPS-Quality-Claims
Report Name:	Data Completeness and Performance Met-Summary Report - 2017
Report Title:	MIPS – Quality - Claims Report - Data Completeness and Performance Met – 2017 for <P> Where, <P> is the Period chosen while running the report. For example: 08-01-2017 to 12-31-2017

The report displays the following information:

1. **Quality ID**

2. **Measure name**

3. **Measure type**

4. **Denominator:** This column displays the total sum of all encounters in reporting period where Denominator condition was fulfilled by selecting proper ICD or CPT codes.

5. **Numerator:** This column displays the total sum of all encounters in reporting period where Numerator condition was fulfilled by selecting proper QDC codes.

6. **Measure wise Data Completeness Met % :** This column shows the percentage of patients who have qualified for Data Completeness. It is calculated based on following:

$$\text{Data Completeness \%} = \frac{\text{Data Completeness Numerator}}{\text{Eligible population/}} \times 100$$

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

Denominator

7. **Denominator Exclusion:** This column displays the total sum of all encounters in reporting period where Numerator condition was fulfilled using Denominator Exclusion code.

8. **Performance Met:** This column displays the total sum of all encounters in reporting period where Numerator condition was fulfilled using Performance Met code.

9. **Denominator Exception:** This column displays the total sum of all encounters in reporting period where Numerator condition was fulfilled using Denominator Exception code.

10. **Performance Not Met:** This column displays the total sum of all encounters in reporting period where Numerator condition was fulfilled using Performance Not Met code.

11. **Performance Rate (%):** It is important field in getting Quality Score and MIPS score and finally the Positive Payment Adjustment.

$$\text{Performance Rate } \% = \frac{\text{Performance Met}}{\text{Performance Met} + \text{Performance Not Met}} \times 100$$

12. **Decile Score (approx.):** Decile Score depends on Performance Rate. Performance rate can be calculated for all instances where Data Completeness is met. Each measure's performance rate out of 100 is computed. This performance rate is compared with Decile scores declared by CMS for that measure and based on this comparison; scores are assigned for each measure.

Each measure will get minimum decile score : 3

The measures which have not satisfied any of Denominator/Numerator are not applicable for minimum decile score 3.

The Summary table contains 3 rows displaying below details:

1. Approx. Total Score out of 60 for top 6 measures of Quality-Claims Category
2. Total Performance Score % for top 6 Quality Claims Measures
3. Approx. MIPS Score in % for Quality Category out of 60%

9.10 Hyperlink is now provided for Claim Id column on Tabular Report (Patch 140)

Navigation Goto menu: Reports → Tabular

Now, Claim ID field will be provided with Hyperlink on Tabular Reports screen only when ClaimId title is present for column Name.

Figure: *ClaimId with hyperlink*

Claim Id	Charge Code	DOS	Create Date	Patient	Rendering Doc	Payer Name	Reopened	Status	Charge Bill Amount
1	NOBHChS	01-25-2016	02-04-2016	Dummy Test, John	Dummy Doctor M.D.	Penalty Invoice	N	E	0.00
2	NOBHChS	01-25-2016	02-04-2016	Dummy Test, John	Dummy Doctor M.D.	Penalty Invoice	N	E	0.00
2	600T4	01-25-2016	01-25-2016	Maitland, Jose	Dummy Doctor M.D.	Self PayFresh Employer	N	E	30.00
8	81002	01-10-2016	01-25-2016	Dummy, New	Dummy Doctor M.D.	Self Pay	V	E	40.00
11	71020	12-11-2017	01-25-2016	Roy, Rajeen	Dummy Doctor M.D.	Barkara Life	V	E	200.00

9.11 Tabular Reports have been provided for all eCQM measures (Patch 166)

Navigation Goto: Reports → *MU/QPP Reports*

➢ Earlier, QRDA-I and QRDA-III report formats were present for eCQM measures which took substantially greater amount of time to be generated if the number of patients were more.

➢ Hence, all eCQM reports are now displayed in tabular form which reduces the time required to display them. A new option *Quality-EHR-eCQM-Tabular* is added in the Classifications drop-down list on the MU/QPP reports screen. From the Reports drop-down, the required report of eCQM measure can be selected. This drop-down consists of 59 reports of which 58 is individual measure's report and the last one is a cumulative of all eCQM measures.

➢ The tabular report will show data such as the Chart No, Patient Name, Date of Birth, Measure No, IPP, Denominator, Numerator, Denom. Exclusion and Denom. Exception for the Patient.

➢ In Cumulative eCQM measures report, the table displays the CMS ID, Measure Name; and the total count of IPP, Denominator, Numerator, Denom. Exclusion, Denom. Exception and Performance Rate.

➢ For further details on any measure, the measure name hyperlink has to be clicked which displays all the patients' data for that respective measure.

➢ This data can be exported in Excel or PDF format and taken print of. The print button on the bottom of the popup will print the entire report for that measure.

Note: *The measures with exceptions/exclusion met will be displayed in yellow and the passed measures in green background.*

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

10 Settings

10.1 Role 'PatientAlertDelete' functionality has been updated (Patch 3)

Navigation Goto menu: Settings→ Configuration→ under *Admin* column, click *Role*

PatientAlertDelete has been updated for Patient Alert. Earlier, user having this role was able to 'Delete' the Patient Alerts.
Now, User will be able to Create/Update/Delete the Patient Alerts.

10.2 Property name speciality.subtype.show.blank.classification is changed to specialty.subtype.show.blank.classification (Patch 9)

Navigation Goto Menu: Settings → Configuration → Property

Name of an existing property *speciality.subtype.show.blank.classification* has been changed to *specialty.subtype.show.blank.classification*

10.3 On the Add New Lot No and Edit Lot No popups, the 'Use NDC Code' field now accepts only numeric values (Patch 30)

Navigation Goto menu: Settings → Configuration → click on *Vaccine* under *Codes/Drugs* column → select a Vaccine → click on Add New icon: ✚ and Edit Lot No icon: ✎ → Add New Lot No popup and Edit Lot No popup

On the Add New Lot No popup and Edit Lot No popup, the *Use NDC Code* field will now accept only numeric values.

10.4 Changes on MU/QPP Settings popup (Patch 33)

Navigation Goto menu: Settings → Configuration → click on *MU/QPP Settings* under *Workflow* column → MU/QPP Settings popup

1. The count of selected Claim and EHR based Quality measures is now available on the respective *Claim Based* and *EHR Based* tab of *Quality Measures* accordion.

2. Sequence of '*Save'*, '*Reset'* and '*Close'* buttons have been changed on MU/QPP Settings popup.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

3.	Select all checkbox have been provided inline to the heading on each accordion to select all the measures at one time.

10.5 Provision to map state level DEA classified drug from the newly provided 'Drug State DEA Rules' screen (Patch 40)

Navigation Goto: Settings → Configuration → click on *Drug State DEA Rules* under *Codes/Drugs* column

- PrognoCIS uses FDB from where DEA classification of drugs is considered. Though there are some controlled substance drugs which are DEA classified on State level but not on Federal level. EPCS enabled Provider was unable to send such State level DEA classified controlled substance drugs as EPCS; hence mapping of such Controlled Substance drug to a particular state is performed from this new '*Drug State DEA Rules*' screen.
- Following fields are present on the 'Drug State DEA Rules' screen:

Field	Description
Drug	Select a drug from the search icon: 🔍. It is a mandatory field.
State	Select the state from dropdown list. It is a mandatory field.
DEA Class	Select a DEA Class from the dropdown list to associate to a drug. It is a mandatory field
Comments	Enter a comment of character length 100.
Password	Enter a password. 📝**Note:** *Ideally only eRX Support Group Super Admins will have the 'Password'.*

- Once mapped a drug with a state is not allowed to map twice.
- If a drug with a state is mapped in 'Active' state, then it is allowed to map it in 'Inactive' state as well and vice-versa.

10.6 Changes on Doctor/Patient Forms (Patch 42)

Navigation Goto Menu: Settings → Configuration → click on *Doctor Forms*/*Patient Forms* under *Report Design* column → select a form → Doctor Forms/Patient Forms Master screen

1. **Doctor Forms:**
   - Doctor Forms user interface has been changed. New section, *SETTINGS* has been added for some options.
   - Now, user has provision to set the Doctor Form as per the Specialty of a Provider/Encounter Types/Location. New fields *Encounter Type*, *Location* and *Specialty* button has been added under *SETTINGS* section.
   - Click on search icon: 🔍 to select Encounter Type and Location respectively. Click on *Specialty* button, to select the Specialty.
   - All active values are listed on the popup of Encounter Type, Location and Specialty. Now, when a new form is added, then '*All'* checkbox is selected by default on all the popups, indicating that the respective Doctor Form displays in the search while adding forms.
   - In case of Dependent forms, the new functions of *Encounter Type*, *Location* and *Specialty* are considered only for main form and not for the dependent forms.

     📋**Note:**
     - ❖ *New functions of Encounter Type, Location and Specialty are not considered for Doctor Forms used for Prenatal tabs configuration.*
     - ❖ *On the popups of Encounter Type, Location and Specialty if 'All' checkbox is not selected then the respective Doctor Form is not displayed in the search while adding forms.*

2. **Patient Forms:**
   - Patient Forms user interface has been changed. New section, *SETTINGS* has been added for some options.

10.7 Buttons have been redesigned on the Elements Master screen and Test Master screen (Patch 42)

Navigation Goto Menu: Settings → Configuration → click on *Elements* link of Test Exec(*Social Hist*, *Vitals*, *HPI*, *Specialty*, *Clinic Forms*) column and Tests Master screen(*Lab*/*Radiology*)

- Following mentioned buttons have been redesigned on the Elements Master screen and Test Master screen:
  1. Assign Codes
  2. Remarks
     - ➢ The popup has been labeled as 'Remarks'
  3. SNOMED
     - ➢ User Interface has been changed on SNOMED popup
     - ➢ On SNOMED popup, OK and Cancel button's order has been changed
  4. Move Up / Move Dn
  5. Spl.txt
     - ➢ User Interface has been changed on Spl.txt popup
  6. Assign

10.8 NPIs added in PrognoCIS will now be validated using API connection with NPPES (National NPI Registry) (Patch 64)

PrognoCIS mandates the users to add NPI for various entities in Master files. The screens for which NPI is required or is mandatory as are as follows

- Settings → Configuration → Clinic → Location
- Settings → Configuration → Clinic → Business Unit
- Settings → Configuration → Users → Providers
- Settings → Configuration → Users → Resource
- Settings → Configuration → Users → Ref Doctors
- Settings → Configuration → Users → Org Providers
- Settings → Configuration → Users → Ref Org
- Settings → Configuration → Users → Medical Assistant
- Settings → Configuration → Users → Clinical Staff

As soon as any of the above listed screen loads, PrognoCIS enables the hyperlink for the NPI number. On click a web service call is made to NPI Registry and submitted data is validated. If entered NPI is correct, PrognoCIS would invoke a non-modal popup with NPI data as is stored in NPI Registry. If entered NPI is incorrect, PrognoCIS would display an error message "No Records Found" indicating the entered NPI is not correct.

10.9 Tabular Reports screen has been enhanced (Patch 68)

Navigation Goto Menu: Settings → Configuration → Report Design → click on *Tabular*

1. **Usage Count**: This field is added on Tabular Report Design screen to identify the number of times a tabular report is run by all the users. This count is calculated based on the overall usage of a tabular report by all the users. Each time, when a tabular report is run by a user, the count will be incremented by '1'.

2. The Report Id field has been provided with a hyperlink on the following screens Tabular report Design Screen, Patient, Appointment Encounter, Graph and MU Report. Clicking on the hyperlink navigates the user to Tabular Report Execution screen and Design hyperlink is provided to navigate to the Tabular Report Design screen.

Note: *This feature is applicable only for Admin login*.

3. Help icon ❓ is provided besides Search field of the Code. This icon is enabled only when Code checkbox is checked. New searches options have been added in the search section.

CUSTOMAPPTSTATUS	Custom Appointment Status	STATUS_CODE If Multi select then comma seperated.	CAS_ID , If Multi select then comma seperated IDs.	customapptstatus	Single Search: SELECTED_ID(CAS_ID) Multi Select Search: SELECTED_MID(CAS_ID)
MSTEMPLOYER	Employer Master	EMP_NAME If Multi select then comma seperated.	EMP_ID , If Multi select then comma seperated IDs.	mstemployer	Single Search: SELECTED_ID(EMP_ID) Multi Select Search: SELECTED_MID(EMP_ID)
MSTTPA	TPA Master	TPA_NAME If Multi select then comma seperated.	TPA_ID , If Multi select then comma seperated IDs.	msttpa	Single Search: SELECTED_ID(TPA_ID) Multi Select Search: SELECTED_MID(TPA_ID)
EMPLOYER_DEPT	Employer Department	Department If Multi select then comma seperated.	EPD_ID , If Multi select then comma seperated IDs.	repempdept	Single Search: SELECTED_ID(EPD_ID) Multi Select Search: SELECTED_MID(EPD_ID)
MSTATTORNEY	Attorney Master	Attorney Firm If Multi select then comma seperated.	LAW_ID , If Multi select then comma seperated IDs.	mstattorney	Single Search: SELECTED_ID(LAW_ID) Multi Select Search: SELECTED_MID(LAW_ID)

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

4. Applicable Code title length has been increased to 50 characters on following screens Tabular report Design Screen, Patient, Appointment Encounter, Graph and MU Report Design screen. When the report is run then 20 characters will be shown in Applicable Title field whereas the 50 characters will be shown on tooltip.

5. New Period related keywords have been added in Reports Keyword popup on Tabular Report Design screen.
    1. [LY_QUARTER_START]
    2. [LY_MONTH_START]
    3. [LY_THIS_DAYEND]
    4. [THIS_ACCESS_LOCS]
    5. [THIS_ATTORNEY]
    6. [THIS_PATACCOUNT]

Navigation Goto Menu: Reports →Tabular

Following are the changes on the Tabular Report screen

1. Run In Background feature has been provided on Tabular Report screen When Run in Background checkbox is checked then the generated report is shown under Settings → Download Files → Category "Tabular Report". The user will be notified under Message Inbox and can download the generated report from Settings →Download Files → Category "Tabular Reports". The message in his InBox will have a Zoom Button to display the generated report. The report gets generated under the respective Category section of the Download files. **Note**: Format of the generated report under Category section of the Tabular Report will be in HTML file. The email generated in Inbox is displayed as Message Type N, Subject: Background Process Complete: Tabular Report, Message: Tabular Report is generated. User can click on the Zoom button to view the file.

Limitation:

Alert message is not displayed when more than one user performs Run in Background simultaneously for a report.
If the generated HTML/CSV file is bigger in size than the download popup gets closed automatically. Now, to view the file with bigger size user can view from the Browser Download screen.

2. Pagination has been provided on Tabular Reports screen

Prev and Next: The Prev and Next hyperlink is enabled only when the output of a tabular report requires multiple pages. By default, 2000 records will be displayed on each page. If output exceeds 2000 records, the "Next" hyperlink will be displayed. After the last page is reached, only "Prev" hyperlink will be shown in enable status. "Next" will not have hyperlink. Similarly, on the very first page, hyperlink will not be displayed for "Prev".

Note: *Code search with Keywords with param for specific searches will not work.*

1. DRUGS:PREF
2. DRUGNAME:PREFALL,   SUPPLIES:PREFALL,   NOSUPPLIES:PREFALL, DRUGNAME:PREF, SUPPLIES:PREF
3. NOSUPPLIES:PREF
4. LABTEST:PREFALL , LABTEST:PREF
5. RADTEST:PREFALL , RADTEST:PREF
6. ICD:PREFALL , ICD:PREF
7. CPT:PREFALL , CPT:PREF
8. HCPC:PREFALL , HCPC:PREF

3. Search section has been enhanced.

10.10 In Vaccination export, 'consent affirmation' is sent (Patch 71)

Navigation Goto menu: Settings → Configuration → click on *Properties* under *Admin* column

Now, in Vaccination export, 'consent affirmation' is also sent.

On administering vaccine .imp file gets created at location specified in property *consent.affirm.folder.path* with the 'AFFIRM.Provider-Import-CodeYYDDD.imp' format. If folder path is not mentioned then Consent affirmation is not created.

Also, while merging .imp files, merged file name is in the above mentioned format.

In Affirmation segment 'A', following are the required fields:

➢   Segment Code (A)
➢   Affirmer
➢   Affirmation Date

Below mentioned are newly added properties:

1. Consent Affirmation Files Folder Path

   consent.affirm.folder.path – It is used to set the path for consent affirmation files

2. Consent Affirmation Provider Import Code

   consent.affirm.provider.import.code - It is used to set the Provider import code for consent affirmation

3. Consent Affirmation Affirmer

   consent.affirm.varified.at - The value in this field identifies who or where consent was verified, at least at the clinic level.

4. Consent Affirmation Source Folder Path for Merging

   consent.affirm.merge.folder.path.source – It is used to set the Source folder path for merging consent affirmation files

5. Consent Affirmation Merged File Destination Folder Path

   consent.affirm.merge.folder.path.destination – It is used to set the destination folder path for merging consent affirmation files

6. Consent Affirmation Merged File Backup Folder Path

   consent.affirm.merge.folder.path.backup – It is used to set the backup folder path for merged consent affirmation files

7. *consent.affirm.merge.add.newline* – Set to Y to add new line for merged consent affirmation

8. *consent.affirm.merge.add.newline.endofmessage* - Set to Y to add new line for merged consent affirmation at the end of message

10.11 PrognoCIS now supports unique EDI password for Resellers and RCM team (Patch 77)

Navigation Goto Menu: Settings →Configuration → EDI Setup

PrognoCIS provides EDI screen password for resellers and RCM team.
A new column CLP_RESELLER_NO is added in Database table MST_CLINIC_PARAM. This column would list unique ID given to Bizmatics Reseller. If there is no Reseller involved, the number would be '0'.

	PrognoCIS Customer	Reseller Customer	PrognoCIS RCM Customer
EDI Password Generated for PrognoCIS EDI Team	Y	Y	Y
EDI Password Generated for Reseller	N	Y	N
EDI Password Generated for RCM Customer	N	N	Y

Y indicates: The password will work for the respective customer
N indicates: The password will not work for the respective customer

Note: *Resellers and RCM team would be given their respective passwords for EDI Setup screen from Development Team.*

10.12 UI changes have been provided on 'HL7 Property File' popup (Patch 79)

Navigation Goto: Settings → Configuration → click on Interface Master under Admin column → select any Interface → click on HL7 File Properties icon:

New UI changes depending upon the field's datatype have been provided on 'HL7 Property File popup' for the *Value* of respective *Section Name* as follows:

➢ Boolean value as ON/OFF
➢ Drop-down List box
➢ Text field to enter a value
➢ […] button to select multiple values

10.13 Process that exports vaccines using web services has been enhanced to include Illinois State (Patch 79)

Navigation Goto menu: *Settings → Configuration → Properties*

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117   (408) 873-3032

The process, *vaccineExportUseWebService* that exports vaccines using web services, now additionally exports vaccines for Illinois State.

10.14 A new option, 'Users' has been provided on the Login Details popup (Patch 82)

Navigation Goto menu: Settings→ Configuration→ under *Admin* column, click on *Login* Details→ User Login Details popup

Following changes have been done on the User Login Details popup:

1. A new option, *Users* has been provided in the *User Type* dropdown list. When this option is selected then a click on *User Name* search icon would display all the Users of type DR/MA/RN/ST/BL in the search popup.
2. The below *User Type* options have been relabeled:
    a. *Doctors* to *Providers*
    b. *Ref Doctor* to *Ref Provider*

10.15 Process that exports vaccines using web services has been enhanced to include 'Rhode Island' state (Patch 88)

Navigation Goto menu: Settings → Configuration → Properties

The process, *vaccineExportUseWebService* that exports vaccines using web services, now additionally exports vaccines for 'Rhode Island' state.

10.16 'Improvement Activities' measures are now displayed from database (Patch 89)

Navigation Goto menu: Settings → Configuration → click on *MU/QPP Settings* under *Workflow* column → MU/QPP Settings popup → select a *Provider* → select radio button of *MIPS/AIPM*

Earlier, Improvement Activities measures information was manually entered in the JavaScript.

Now, *Improvement Activities* measures are displayed from database depending upon year. New table as 'MST_MU_QPP_IA_MEASURES' has been created for Improvement Activity measures.

10.17 Provision has been given to update AOE questions on the Lab Master screen (Patch 121)

Navigation Goto menu: Settings → Configuration → click on *Lab* under *Vendor* column → Lab Master screen

Now user has provision to update *AOE questions* on the Lab Master screen by clicking on the *AOE Ques* button and uploading the updated AOE questions.

10.18 User has provision to add/update Account number from the Lab Master screen (Patch 101)

Navigation Goto menu: Settings → Configuration → click on *Lab* under *Vendors* column → select a Lab name → Lab Master screen

Earlier, Account No on the CPOE → Lab Order screen was retrieved from the database.

Now, User has provision to add/update Account number from the Lab Master screen. A new button *Add*/*Update* has been added for Account number on the Lab Master screen.

Note: *For a Provider respective to one Lab Vendor of one location only one Account number is added.*

10.19 Added rule 'U' in the HL7 property 'patient.rule' (Patch 101)

A new rule 'U' has been added in the in the HL7 property *patient.rule*. Based on this new rule, Account number, DOB and Name are also checked while importing Patient information.

10.20 Error message on the Import Log screen for failed results of deleted orders has been changed (Patch 101)

Navigation Goto menu: Settings → Configuration → click on *Import Log* under *Admin* column → Import Log screen

If a Lab Order is deleted and result are showed for that order on the Import Log screen under *Failure*, then for these failed results error message was displaying as "Invalid Order Status".

Now, the error message for deleted results has been changed to "Invalid Order Status, Lab Order is deleted".

10.21 Availability of 'Move Appt' button on Provider Master screen is independent of 'Billing' module (Patch 93)

Navigation Goto menu: Settings → Configuration → click on *Providers* under *Users* column → Provider Master screen

Earlier, *Move Appt* button on Provider Master was displaying only if the 'Billing' module was ON. Now, irrespective of 'Billing' module, the *Move Appt* button will be available always.

10.22 Provision to configure columns in the excel file for Data export (Patch 127)

Navigation Goto menu: Settings → Configuration → click on *Data Export* under *Users* column → Export Patient Data popup

A new *Configure* button has been added. On the click of *Configure* button Configure Export Fields popup shows up. From this popup, user can select the column to display in the excel file for Data export process. User can select the required field and click on *Hide* checkbox to not configure it in the excel file.

10.23 Provision to send Facility code in Pharmacy Address Line 2 of the eRx xml (Patch 130)

Navigation Goto menu: Settings→ Configuration→ under Admin column, click Data Mapping

Now, a provision has been given to send Facility code (14 digit code, for example: 340B00001400HH) in the Pharmacy Address Line 2 of eRx xml.

Mapping Facility code and Pharmacy name:

The Facility code and Pharmacy name mapping can be done from the existing screen, 'Data Mapping'.

Following describes the fields of Data Mapping screen that needs to be configured:

1. *Code*: The code should be FCINERX.
2. *Name*: The name for data mapping. For example: Facility code in eRx PH Address Line2
3. *External Data Value*: Facility code should be entered in this column.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

4. *Our Data Value*: Pharmacy name for which the Facility code is to be sent in eRx should be entered in this column.

Facility code on eRx Summary popup:

While sending an eRx, the Facility code will also be displayed in the *Pharmacy Add* field on the eRx Summary popup.

When user tries to send an eRx to the Pharmacy (whose Facility Code mapping is done on Data Mapping screen) then in xml, Address Line 2 will be appended after the Facility code.

Note:

❖ *If the Pharmacy Address Line 2 including Facility code exceeds the limit of 35 characters then the Pharmacy Address line 2 will be truncated.*

❖ *All the above changes are applicable for eRx and Cancel eRx feature only.*

10.24 On the Consults Master screen, the type of 'Pref. Doctor' field is independent of the 'refdoc.selection.listbox' property (Patch 138)

`Navigation` Goto menu: Settings → Configuration → click on *Consults* under *Workflow* column → select/add Consults name → Consults Master screen

Earlier based on the property, *refdoc.selection.listbox* being turned ON or OFF, the *Pref. Doctor* field displayed as dropdown list or search. Now, the *Pref. Doctor* field on the Consults Master screen is independent of this property and it will be displayed as search.

10.25 Changes on Encounter Type Master screen for 'Portal Settings' and 'Defaults' sections (Patch 143)

`Navigation` Goto menu: Settings → Configuration → click on *Enc Types* under *Clinic* column → select/add an encounter type

1. In the *Portal Settings* section, first option *Available for appointment from* <Patient/Ref Doc/Attorney Portal(s)> will display the Portal(s) name on label depending upon whichever portal is on.
2. Now, *Hide Visit Notes Report in Past Visits on Patient Portal* checkbox in the *Portal Settings* section will be hidden if Patient Portal is set to OFF.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

3. In *Defaults* section, *Implanted Device(s)* option has been newly added on the popup of *Encounter* button.

10.26 DB Analysis screen has been changed with export functionality (Patch 145)

Earlier, for DB Analysis screen only PUSH mechanism was functional in which data used to get import.

Now, for DB Analysis screen along with PUSH; PULL mechanism has been implemented which will export the data.

Following are the changes for DB Analysis screen:

1. On the load of DB Analysis screen, DB Analysis Options popup appears with two options:
   - Import (old DB Analysis 'PUSH' mechanism)
   - Export (new DB Analysis 'PULL' mechanism)

   On selecting any of the options, Available Clinic popup appears on which user has to enter a Password and Source Clinic field is set by default. For Available Clinics field select a required clinic to import/export the data.

2. On the DB Analysis screen, following two sections have been added two differentiate the data:
   - Deployment Details
     In this section, user can enter Deployment Name and Description

   - Other Details

     In this section, Deploy to Clinic field will auto-populate the Clinic name which user have selected for import/export

3. After entering the details on the DB Analysis screen, on the click of Deploy button enter information will get import/exported to the respective clinic and on the click of history button user can see the logs.

10.27 A new column, 'User' has been added on the Properties History popup (Patch 149)

Navigation Goto menu: Settings → Configuration→ click on Properties under Admin column → select any Property from the Properties popup

A new column, *User* has been added on the Properties History popup. This column displays the Support User name along with the modified User who has made changes in the Property.

Note: *The **User** column on the Properties History popup will be available only for Admin user login.*

10.28 On DB Analysis screen, property 'prognocis.dbanalysis.password' will govern the password for both import and export functionality (Patch 154)

Navigation Goto menu: Settings → Configuration→ click *DB Analysis* under *Admin* column → DB Analysis screen

Now, property ***prognocis.dbanalysis.password*** will govern the password for both import and export functionality.

10.29 Under Properties section, the property searched from search icon will be shown highlighted in blue band (Patch 155)

Navigation Goto menu: Settings → Configuration → click on *Properties* under *Admin* column

Earlier, when a property was selected from search, it displays all rows for the serial No with the first row selected.

Now, the selected property will be shown selected by Default in Blue band.

10.30 On the Address popup of Provider and Location Master screens, only Support login → Admin users are able to add and modify the 'Secure Email' field value (Patch 160)

Navigation Goto menu: Settings → Configuration → click on *Providers* under *Users* column → Providers Master screen → click on *Address* button → Address popup

OR

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

Goto menu: Settings → Configuration → click on *Location* under *Clinic* column → Location Master screen → click on *Address* button → Address popup

On the *Address* popup, a provision has been given that now only Support login → Admin users are able to modify the *Secure Email* field value.

10.31 Provision to configure subdomain for secure N2N email ID (Patch 166)

Navigation Goto: *Providers* Master → click *Address* button

OR

Locations Master → click *Address* button

Earlier the *Secure Email* field contained only the secure mail domain address. But now Surescripts recommends having a unique subdomain for each clinic which is N2N and service level CIMessage enabled and also has a secure email address.

Once Surescripts has enabled the clinic's subdomain for all its providers and locations, a process *setSubdomainN2Nemail* will be executed to configure the N2N emails with Clinic ID as subdomain.

All the errors and validation messages occurred during the process execution will be sent to erxsupport@bizmaticsinc.com. Optionally, the process can send these messages to another email ID apart from the aforementioned by entering the email ID in the third parameter of process. After process execution is completed, the user is informed about the new configuration through an info popup after login.

Once the new secure email is updated and configured it is also automatically registered at the N2N, eRx gateway and Surescripts server.

10.32 Provision to add Employer protocols in PrognoCIS (Patch 166)

Navigation Settings → Configuration → click on *Employer* under *Vendors* column →click on *Protocol* button.

- The user now has provision to define and print the Employer wise protocols from PrognoCIS. An additional Protocol button has been added in the Employer Master. Click this button to open 'Protocol(s) for Employer' pop-up. Here by clicking on Add button:, a new Protocol can be added along with

various Protocol Tests (Lab, Radiology, Procedure, Physical and Vaccine) and associate Print Template to it.

Note:

❖ *In the Properties Master, click on the search icon and select the required default template to be set for printing the Employer Protocol. By default, the* **employer.protocol.default.template** *property is set to 'Default Employer Protocol Template'.*

❖ *Maximum 20 tests can be added in one Protocol.*

❖ *If the property,* **use.employer.protocol** *is turned ON then the* **Protocol** *button on Employer Master screen will be displayed* *else it will not be displayed.*

- When a user now schedules an appointment for a patient who has Employer Details entered during registration, an *Emp-Protocol* drop-down on the Appointment Schedule popup will be enabled. From this dropdown list, the suitable Protocol can be selected for a Patient.

  Note: *The property,* **use.employer.protocol** *also governs the availability of Emp-Protocol dropdown list on Appointment Schedule pop-up.*

- Once a user selects the protocol from the dropdown list, the test associated to it can be viewed by clicking on the icon: . User can select or deselect the tests for a Patient. By default, when the popup is invoked for the first time, all tests will be selected.

  Note: *Tests not applicable for a particular gender will be disabled (grayed out) depending on the entry made in the Test Master.*

- The selection of tests will be possible only until the appointment status is Scheduled or Tentative. Thus, the user will not be allowed to edit the test list after the patient is marked arrived.

- Tests in the assigned protocol can be viewed and printed from the Patient Information section by clicking on the Employer Protocol icon: available under drawer icon panel.

- Based on the property, *employer.protocol.encounter.workflow.rule*, the workflow for Protocol tests and its associated CPT codes is defined on start of an encounter for the appointment where employer protocol is being used. The

option N in the property would take no action and option E would add all the tests in the following respective screens of an encounter.

Test	Screen
Lab/Radiology/ Procedure	Order Sheet
Vaccine	Vaccination
Physical	Physical

- The tag, **SCHREP_EMPPROTOCOL** is available for a user to print the list of services i.e. Test Type, Test Name & Category in tabular format. This tag will not be seen in the search.

10.33 Changes in UI for MIPS-Quality-Claims related to POS02 (Patch 166)

Navigation Goto: Settings→ Configuration→ click on *Group Types* under *Groups* column

➢ Telehealth Services (code-02) is added for users who previously didn't have this service in 'Place of Services'.

➢ For patients who are assigned to the clinic location having POS02 as place of service, following quality measures will not be applicable to them: **12, 14, 19, 51, 52, 91, 93, 110, 128, 131, 140, 141, 181, 226, 268, 317, 326, 410, 419 and 435.**

➢ In MU/QPP reports, as well, user will not be able to view the above mentioned measures if patient's appointment location is mentioned as POS02.

➢ In Patient's Encounter TOC > MIPS-Quality-Claims, the *'and POS02'* suffix has been added for the above mentioned measures under 'Without Modifier' section of the *Info* button pop-up and same will be applicable for Settings → Configuration→ MU/QPP Settings →Claims → Measure Info.

10.34 Provision to configure subdomain for secure N2N email ID of Referring Provider (Patch 177)

Navigation Goto: *Ref Doctors* Master → click *Address* button

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

Once Surescripts has enabled the clinic's subdomain for all its Referring Provider, a process **_setSubdomainN2NemailRefDoc_** will be executed to configure the N2N emails with Clinic ID as subdomain.

This process will update the domain part in N2N secure email address of those Referring providers whose domain is like

- @securemail.prognocis.com or

- securemail.mdnavigatorclinical.com or

- securemailproemr.mdsynergy.com

All the errors and validation messages occurred during the process execution will be sent to erxsupport@bizmaticsinc.com. Optionally, the process can send these messages to another email ID apart from the aforementioned by entering the email ID in the third parameter of process.

Once the new secure email is updated and configured it is also automatically registered at the N2N, eRx gateway and Surescripts server.

10.35 Login details screen related changes (Patch 182)

Navigation Go to Menu: Settings → Configuration →under Admin column **_Login Details_**

1. Now, **_Security Administrator_** role has access rights to add/modify the "Access IPs" field on **_Login Details_** popup. But this role had access control over other screens as well. Thus, if a User wanted to give access to a Staff to add/modify the **_Access IPs_** field on Login Details screen, then they also gained access to other screens.
    Now, a new Role **_Access IP_** has been introduced to access the **_Access IPs_** field on Login Details screen. User has to explicitly add this role in User Role Master.
    Thus, now instead of the Security Administrator role, the system will consider this new Access IP role.

2. Earlier, if only **_Access IP_** field was changed, then on clicking ok the system asked User to change the password by displaying a validation message "password is mandatory".
    Now, no alert message is displayed and the user is directly allowed to modify the only **_Access IPs_** field.

    Note: *The system will display validation message "password is mandatory" when user modifies **User ID** field as well as **Access IP** field OR only the **User ID** field.*

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

3. Access IP field on screen is small.
    The field size for *Access IP* is increased to multi-lines. Also, now we are supporting Enter key to have the readability.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117   (408) 873-3032

11 Miscellaneous

11.1 Provided modified alerts on some screens in PrognoCIS (Patch 1)

On the following screens, alerts/labels have been modified:

- ➢ Vaccination
- ➢ Patient Registration
- ➢ Family History
- ➢ Prescription
- ➢ MU/QPP Settings

11.2 A message about CVX and NDC codes for Vaccination is provided on User Login (Patch 5)

The following message is provided on the User login to notify about the CVX, NDC codes and Brand name for Vaccination being mandatory:

> As per regulatory authorities, certain changes related to Vaccination have been introduced in this new release.
> In accordance with the same, details such as CVX code, NDC code, and Brand name are now mandatory.
>
> Please update the above details on Vaccine Master screen or contact your admin to update it for uninterrupted workflow.
>
> ☐ Do not show me again.
>
> [ok]
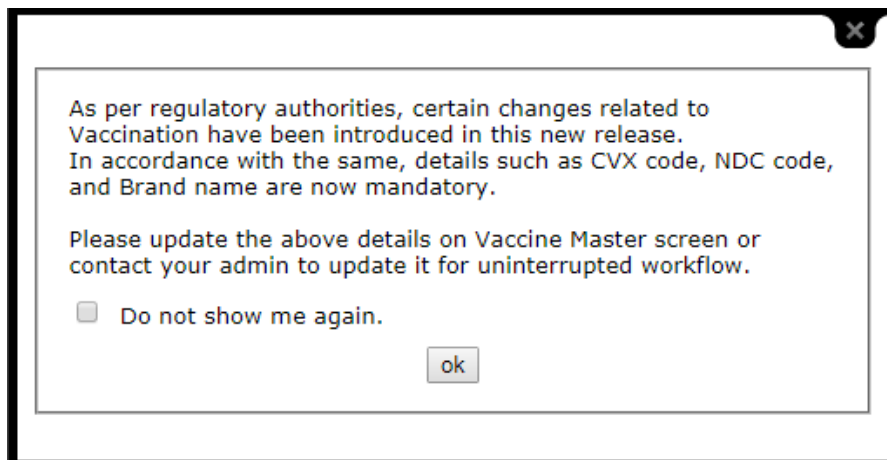
11.3 FTUX is provided to inform user about access rights on the Document List screen (Patch 5)

Document List screen can be accessed from the following ways:

1. TOC → Document List
2. TOC → Specialty → Document list (icon)
3. CPOE → Procedure → Document list (icon)
4. Billing → Patient Account → EMR Docs (button)

On Document List screen, a new FTUX is provided which informs the user about access rights for taking any action on the document.

Following is the FTUX:

"You will be unable to perform any action on documents without access rights. In order to take any action, please contact your Clinic admin for the access rights."

Note: *Once a user hides FTUX on the Document List screen invoked from any of the above navigation then it will not be available again for other navigations in the same session.*

11.4 Progress Note of the Patient displayed on home screen will be based on Encounter Notes rights (Patch 6)

Now, the access rights constraints will be applicable on Homepage → Progress Note icon. If the user does not have access rights Encounter Notes checked on Settings → Configuration → Role screen then on Homepage → Progress Notes icon, alert message 'You do not have access rights to view details' will be displayed.

11.5 Save button on screens have Notes field will get enabled even when user paste text in the Notes fields using mouse (Patch 6)

Navigation Goto Menu: Encounter TOC → Allergy

Encounter TOC → Current Medication

Encounter TOC → Medical History

Encounter TOC → Dictate Transcribe

Encounter TOC → ROS

Encounter TOC → Physical

Encounter TOC → Vitals

Encounter TOC → Social History

Earlier, save buttons present on the follow fields was getting enabled only when user add text in the *Notes* field using the keyboard. Now, save field on the following fields will get enable even when user paste text in the *Notes* field using mouse.

11.6 Changes related to Vaccination screen (Patch 11)

1. **Navigation** Goto menu: Settings → Configuration → click on *Vaccine* under *Codes/Drugs* → select a Vaccine → Vaccination master screen

    A new icon is provided for *CVX code* field to invoke the reference link for CVX code. This will help users to identify the CVX code for associating it to the vaccine.

2. **Navigation** Goto menu: Patient's Encounter → Encounter TOC → Vaccination

    A. On the Vaccination screen, Now *Administer* button is enabled even if CVX code is not added and *Admin When* column will be disabled. The tooltip on the *Admin When* column will be displayed as 'CVX code is missing'.

    B. On the *Administer* popup, *CVX Code* field is added and made mandatory for all options except *Not Tracked*. Also, the FTUX on the *Administer* button is provided as 'You can now associate CVX code from Administer button'.

    Note: *User is not allowed to update the CVX Code.*

    C. NDC code alert is changed to 'Please add NDC code from the Edit icon available for Lot # field'.

11.7 MU/QPP Settings banner is now hidden for White Labelled resellers (Patch 16)

In PrognoCIS, *MU/QPP Settings* banner is now hidden for White Labelled resellers.

11.8 In generated XML file, the <EmailNotificationAddress> tag value is now property based (Patch18)

Earlier, the <EmailNotificationAddress> tag value was hardcoded in generated XML file. Now, this tag value is based on the newly added property, *claims.xml.email.notification.address*. The default value of the property is aqi_tech@asahq.org.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

11.9 Provision to add Patient Workflow Comments from the newly provided search icon on the Patient Workflow popup (Patch 26)

Navigation Goto Menu: Home → Patient Workflow icon: [icon] → Patient Workflow popup

OR

Goto Menu: Appointment → Schedule → schedule/select an Appointment → Patient Workflow icon: [icon] → Patient Workflow popup

OR

Goto: Patient's Encounter → Patient Workflow icon: [icon] → Patient Workflow popup

OR

Goto: Home screen→ Open Enc tab→ click on hyperlink under the *Comment* column→ Comment popup

- Earlier, User had to manually enter comments on the Patient Workflow popup. Now, a new search icon: [icon] has been provided for Comments field to select required active Patient Workflow comments from the defined list. After selecting a comment when a user selects another comment from the Add Comment search icon then it will be appended to the previously selected comment. When the *Comment* field exceeds limit of 255 characters either by entering or selecting comments from the defined list then an alert is displayed to the user.

- A tool tip is displayed on the *Comment* field which will display all the comments that have been added.

- Also, a new Non-system Group type, WC – Patient Workflow Comment has been added to define the comments to be displayed on Patient Workflow Comments search popup.

- On the Patient Workflow Comment search popup, an Add button: [icon] is available which allows user to add new comment in the Group Type master.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

- Only users having access rights for *Patient Workflow Comment* under *Group Types* section on the **Role Master** screen are allowed to perform actions on the Patient Workflow Comments.

- For users having Read only access rights, the Add button: on the Patient Workflow Comment search popup will not be available.

11.10 New Email server has been configured (Patch 29)

Now, a new Email server has been configured in 'Amazon Web Services (AWS)' to send email from PrognoCIS. The new email server does not support SSL.

11.11 ARRA Dashboard and Encounter level Dashboard is now available for performance period 2017 (Patch 33)

Navigation Goto: Click on ARRA Dashboard icon: from the menu bar

AND

Goto: Patient's Encounter→ Encounter TOC→ Encounter Close→ click on Encounter level Dashboard icon:

ARRA Dashboard and Encounter level Dashboard is now available for Modified Stage 2, Stage 3, and ACI measures as per performance period 2017.

11.12 Downloading password protected PDF and ZIP files in .zip format is now property based (Patch 33)

Navigation Goto menu: Patient's Encounter→ Encounter TOC → Document List → click on Gen ZIP/Gen PDF button

OR

Goto menu: Reports → Audit Trail → click on Download icon:

OR

Goto menu: Reports → Tabular → click on Download icon:

Earlier when a User downloaded the password protected PDF or ZIP file then it was downloaded in the .exe format.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

Now, if the property *prognocis.filedownload.noencryption* is set to OFF or property *prognocis.reportcsv.encrypteddownload* (for Reports) is set to ON and a user downloads password protected file then the file will get downloaded in the .zip format.

11.13 Security related changes has been provided to AJAX calls (Patch 34)

Security related changes have been provided to AJAX calls for the following screens:

- Forgot Password Screen of Employer Portal
- PrognoPass Appoinment Details
- PrognoCIS Support Login
- PrognoPass Screen

11.14 Automated Measures have been revised (Patch 36)

1. In 'Secure Electronic Messaging' measure for Reports, 'Medicaid Modified Stage 2 Meaningful Use Report (2017 only)', 'Medicaid Stage 3 Meaningful Use Report (2017)', and 'QPP-MIPS-ACI' conditions are revised as following:
   - Lab Result (within Calendar year) with status Reviewed or Completed for a Patient, so that it can be seen from Portal by Patient.
   - Rad Result (within Calendar year) with status Reviewed or Completed for a Patient, so that it can be seen from Portal by Patient.
   - Patient Form sent by Patient from portal and accepted by Provider.

2. In 'View, Download and Transmit (VDT)' measure, Numerator is incremented on below mentioned conditions:
   - Health Summary (CCD) downloaded or seen or transmitted from Patient Portal (for all stages) within calendar year.
   - CCD downloaded or seen from FHIR (excluding report 'Medicaid Modified Stage 2 Meaningful Use Report (2017 only)') within calendar year.

3. In 'Patient Specific Education' measure, if Education material by the Provider has been given to Patient in any of the below formats then, the Numerator count gets increased:
   - printed (1) or

- emailed (2) or
- sent a URL (3) or
- Brochure (4) or
- Portal (5)

11.15 Provision to send alert notification to a User if Patient's information is not sent to HIE registry (Patch 36)

Provision has been given to send alert notification to User if Patient's information failed to send to HIE registry.

Following properties have been added to define the User to send alert notification:

- *failure.mailto.namefl*
  This property's value will be <Medics First Name> <Medics Last Name>, and then alert notification is sent to medics with this name.

  For example: failure.mailto.namefl=Test Dummy

- *failure.mailto.role*
  This property's value will be <role name>, and then alert notification is sent to all medics in that role.

  For example: failure.mailto.role= nurse3

- *failure.mailto.rule*
  This property's value will be <rule>, and then alert notification is sent by that Rule. Rule property can have multiple values.

  Possible values of rule are as follows:

  - ✓ R - Roles
  - ✓ P - Person
  - ✓ A - Encounter Attending Provider

11.16 MU measure names are now uniformed for some screens (Patch 40)

Earlier, MU measure names for 'ACI measures', 'Modified stage 2', 'stage 3' were not synchronized for the following mentioned screens.

Now, on the following screens MU measure names for 'ACI measures', 'Modified stage 2', 'stage 3' are now uniformed:

1. MU/QPP Settings Screen
2. Reports-MU-QPP Reports
3. ARRA Global Dashboard
4. Encounter close Dashboard

Note: *Above mentioned changes are applicable only for 2017 reports only.*

11.17 Property 'home.show.count' has been changed to 'Listbox' data type (Patch 48)

Navigation Goto: Home

- To show Patient and Appointment count on Home screen, a property *home.show.count* was used. Earlier, the data type of this property was 'Boolean'. Now, it has been changed to 'Listbox'.

- Now, for property *home.show.count* values to be selected are as follows:
  - ➢ N - Do not show the Appt count
  - ➢ Y - Show the Patient and Other Appt counts together
  - ➢ P - Show only Patient Appt Count
  - ➢ O - Show only Other Appt Count
  - ➢ B - Show separate counts for Patient and Other Appt

- Depending upon the selected value of the property, tooltip is provided on the count of Home screen as follows:
  - ➢ Y - Total Arrived appointments / total appointments
  - ➢ P - Total Patient(s) Arrived / total patient appointments
  - ➢ O - Total Other(s) Arrived / total other appointments
  - ➢ B - Total Patient(s) Arrived / total patient appointments
  - ➢ Total Other(s) Arrived / total other appointments

11.18 A new Result Type 'Scale' has been provided on Test exec screen (Patch 48)

Now, a new Result Type 'Scale' has been added on Test exec for defining tests. Users can drag the pointer and place at any value from 0 to 10 on the scale; Fraction is not supported on scale.

This Result Type is not applicable for:

 ➢ Defining Lab tests, Radiology tests

 ➢ Designing Doctor Form/Patient Form

 ➢ Defining grid

11.19 Changes has been provided for PrognoPass (Patch 48)

Following changes have been provided for PrognoPass:

1. The background color of the banner and the color of the font of the Clinic name are now configured with the values set in the two properties, *progno.pass.banner.bgcolor* and *progno.pass.clinicname.fontcolor* respectively.
2. The format in which location Address is shown has been changed.
3. A third option under Get Availability for has been added as On, with a *Date* field and a Calendar button. Using this, now Patients can search for the availability of the Providers for future dates also and not just for today and tomorrow.
4. Provider's availability has now been shown according to the appointment sequence number specified on Provider Master and then alphabetically.
5. The presence of *Patient Type* dropdown on PrognoPass screen is now based on a property, *progno.pass.patienttype.title*. A value present in this property defines the presence and title of the Patient Type dropdown.
6. The form template to be used to show the appointment confirmation message after an appointment is taken successfully from PrognoPass can now be specified in a newly introduced property, *progno.pass.appt.confirmation.template*.
7. Along with showing the appointment confirmation, now an email is also sent to the Patient after an appointment is taken successfully from PrognoPass. A new email template has been introduced as ' Appointment Taken from PrognoPass', which will be used to send this email to the patient.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

11.20 A new Validation introduced in PrognoCIS to verify reported Diagnosis Codes (ICD 10) and Standard Procedure codes (CPT / HCPCS Codes) are active and valid for Date of service / Encounter Date (Patch 54)

- Every year ICD, CPT codes are revised on October 1st, January 1st respectively and HCPC codes are revised on every quarter and every year January 1st.

- Currently PrognoCIS does not have an option to validate any of the codes which are reported on claims for their Active / Deleted status. As a result deleted codes would get sent to insurances causing rejections and denials. PrognoCIS requires to ensure only Active codes are added to claims and assessment data and ensure the Inactive and future codes are stopped.

- In the new process of validation, now each time when the Claims are Assessment is loaded or claims are billed then the appropriate ICD/CPT/HCPC codes are validated according to the visit date/ date of service. If the associated codes are invalid then user gets an alert message.

  For example:

    CPT Code: 00731 is set to become Active on Jan 1st 2018

    ICD Code: E78.00 has become Inactive as of Oct 1st 2017

    Patient's Date of Service is December 30th of 2017 and CPT Code 00731 and ICD Code E78.00 are populated on Assessment screen. Please note both ICDs and CPTs are not valid for Date of service. When User visit Assessment screen or tries to report Claims then error messages would get displayed respectively as the following:

    On Assessment screen- "For Date of Service ICD10 Codes Inactive :E78.00 <enter> HCPC Codes not active yet:00731"

    On Claims screen- "For Visit Date ICD10 Codes Inactive :E78.00 <enter> HCPC Codes not active yet:00731"

    Above mentioned validations are invoked when:

➢ Claims are marked as 'Ready to Send'

➢ Assessment is added then an error message is displayed

➢ On the Close of an Encounter

- **Validation applied on Auto Close of an Encounter:**

For example:

If HCPC code G9906 is set to become active on 01/1/2018

and Date Of Service of the encounter is 12/31/2017 or prior to 01/01/2018. HCPC code G9906 is used in an encounter which is open and property *enc.close.afterdays* is set to 30. If this property enabled then encounters are automatically closed which are open.

Then on 01/30/2018, all the open encounters would get closed automatically. However, for encounters where inactive ICD10/CPT/HCPC code is used; those encounters would not get closed and a message is sent to the 'Attending Physician' of the Encounters (respectively). This message will be a consolidated message. That means, only one message is sent to the respective Attending providers listing all problematic encounters of their patients.

The message details are as below:

"Subject: Could Not AutoClose Encounters - <Date>

Above mentioned Date refers to the date on which the auto close process is run.

Message:

<ENC_DATE> <PT1_LNAME> <PT1_FNAME>

<ENC_DATE> <PT2_LNAME> <PT2_FNAME>

<ENC_DATE> <PT3_LNAME> <PT3_FNAME>"

If 'Attending Physician' of the encounter is inactive then the Encounter would remain in open state with no claims created as no one would receive message in inbox. Same is the case when the Attending Provider is a 'Resource'; then no message is sent for such encounters for which the Resource is acting as 'Attending Provider'. Also, if the Attending Provider of the encounter (having inactive data on assessment) is changed to a different provider, then the message will be sent to the new Attending provider from next time onwards (when the process is ran on daily basis). The message will not be sent to the old attending provider

Note:

❖ *The alert message is applicable to all type of claims- Professional, Institutional, Accident Claims, Employer Claims, Capitation claims etc.*

❖ *PrognoCIS does not validate the source of ICD/ CPT/ HCPC codes which are added to Assessment or Claim. It only prevents the users from billing such claims and closing the encounters with invalid ICD/ CPT/ HCPC codes.*

❖ *Validation of ICD codes is based upon ICD10 codes.*

11.21 New property 'payment.gateway.savecard' has been added (Patch 56)

Earlier, while performing Payment process, *Save card* checkbox was checked by default and here was no provision to keep that checkbox unchecked by default.

Now, a new property *payment.gateway.savecard* has been added and based on this property, the save card checkbox displays checked or unchecked. By default this property is set to ON and if it is set to OFF then *Save card* checkbox gets unchecked.

11.22 Provision to display header and footer while printing/faxing Procedure orders (Patch 56)

Following properties have been added to display header and footer while printing/faxing Procedure orders:

1. *pdf.pr.alignfooter*
2. *pdf.pr.alignheader*
3. *pdf.pr.footer*

4. *pdf.pr.header*
5. *pdf.pr.margins*

If above mentioned properties are defined, then header and footer are displayed while printing/faxing the Procedure order from following screens:

1. Patient encounter → TOC → Procedure Order → Preview/Print
2. Patient encounter → TOC → Order Sheet → Procedure Order → Preview/Print
3. Patient encounter → TOC → Document list
4. Print/fax a Letters-Out with Procedure order/result as an attachment
5. Patient encounter → TOC → Specialty → Preview / Print button (applicable for specialty templates associated to a Procedure order)
6. Patient encounter → TOC → Specialty → Procedure Order hyperlink
7. Health Maintenance → Procedure order Hyperlink

Note: *Above mentioned properties are not considered for displaying header and footer on the Preview screen of TOC → Specialty for Non-Procedural and Procedural templates without any orders.*

11.23 Changes done for MIPS Quality Claims (Patch 60)

Definitions for MIPS-Quality-Claims have been updated as per 2017 year with additional conditions like without ICD/CPT Modifiers, Denominator Exclusion, and Denominator Exception. Following are changes done for MIPS Quality Claims in PrognoCIS:

On MIPS Quality Claims screen

Navigation Goto: Patient's Encounter→ Encounter TOC→ MIPS Quality Claims

- The label of TOC option, *Quality Measures* has been changed to *MIPS-Quality-Claims*.
- Red Asterisks mark (*) would be will displayed after the measure name for measures which are of High priority and which is an Outcome measure.
- A message, "* Indicates Outcome/High Priority Measures. Select at least one such measure from MU/QPP Settings Screen." has been added on top of the screen.
- Tooltip of the QDC column binocular icon is changed to "Numerator Quality Data Coding Options".
- Status messages in Status column has been as below:

- − Denominator Not Met (Missing ICD and CPT/HCPC)
- − Denominator Not Met (Missing CPT/HCPC)
- − Denominator Not Met (Missing ICD)
- − Denominator Not Met (Missing ICD and CPT/HCPC, Missing Additional Condition(s))
- − Denominator Not Met (Missing CPT/HCPC, Missing Additional Condition(s))
- − Denominator Not Met (Missing ICD, Missing Additional Condition(s))
- − Denominator Not Met (Missing Additional Condition(s))
- − Not applicable as ICD 10:<code> added
- − Not applicable (Modifier <comma separated Modifiers list> added)
- − For example: Not applicable (Modifier GQ,GT added)
- − Numerator Not Met (Missing QDC)
- − Data Completeness Numerator Met (Performance Met)
- − Data Completeness Numerator Met (Denominator Exception)
- − Data Completeness Numerator Met (Denominator Exclusion)
- − Data Completeness Numerator Met (Performance Not Met)
- − In Status column, the following text in the bracket () will be displayed in mentioned colors
- − "Denominator Exclusion/Exception" in Yellow
- − "Performance" in Green
- − "Performance Not Met" in Red

- The assigned ICD, CPT/HCPC codes (that are found in the ICD, CPT/HCPC code, or Additional condition) for any measure will get displayed in the tooltip of respective measure's Status column.
- The tooltip displayed is in the below format: "Denominator condition(s) Met ICD10:<code>, CPT/HCPC:<code>, Additional Condition(s)"
- When Denominator is not met for any measure and a user clicks on the QDC binocular icon then an alert message is displayed. This alert message has been changed from "Charge codes cannot be applied on failed measure." to "QDC cannot be added when Denominator is Not Met.".
- For encounters date before 30th Sept 2017, the Status will be displayed as per old functionality i.e. PASS/FAIL. Whereas for encounters dated from 1st Oct 2017, the In Status column, Status will be displayed as per new functionality.

- Without Modifier condition is applicable for following measures:
  - Measure #12 (NQF 0086),
  - Measure #14 (NQF 0087),
  - Measure #19 (NQF 0089),
  - Measure #51 (NQF 0091),
  - Measure #52 (NQF 0102),
  - Measure #91 (NQF 0653),
  - Measure #93 (NQF 0654),
  - Measure #110 (NQF 0041),
  - Measure #131 (NQF 0420),
  - Measure #140 (NQF 0566),
  - Measure #141 (NQF 0563),
  - Measure #181,
  - Measure #226 (NQF 0028),
  - Measure #268 (NQF 1814),
  - Measure #317,
  - Measure #326 (NQF 1525),
  - Measure #410,
  - Measure #419,
  - Measure #435

On Info popup:

Navigation Goto: Patient's Encounter→ Encounter TOC→ MIPS Quality Claims→ click on Info button→ Info popup

AND

Goto menu: Settings→ Configuration→ under Workflow column, click MU/QPP Settings→ select Provider→ select MIPS/AAPM Quality Payment Program→ from the Quality Measures accordion, select Claim Based tab→ click on Info icon: 🗨 for any measure→ Info popup

- Red Asterisks mark (*) would be will displayed after the measure name for which High priority is Yes and which is an Outcome measure.
- Following information has been provided:
  - *Type*
  - *High Priority*

- − *Specialty*
- − *Measure Description*
- − *Benchmark Available*
- − *Topped Out*

- New table with columns, *WITHOUT ICD* and *WITHOUT Modifiers* has been added.
- *Additional Condition(s)* table will display below *WITHOUT ICD* and *WITHOUT Modifiers* table for those measures for which Additional condition is applicable.
- *QDC Category* column has been added in the table of Numerator Criteria.

On QDC popup:

Goto: Patient's Encounter→ Encounter TOC→ MIPS Quality Claims→ click on QDC binocular icon→ QDC popup

- The following message has been added message below *Quality ID* field : "Note: For meeting Data Completeness Numerator criteria please select any other option than None"
- Label "Quality Data Coding options" has been provided below the note field.
- Added Header row in table with headings: Test, QDC and QDC category.
- Note: QDC category is a newly provided column.
- In QDC category, the following categories are available:
  - − Performance Met #
  - − Denominator Exclusion ##
  - − Denominator Exception ##
  - − Performance Not Met ###
- At the bottom of the table, below information is added: "# - For increasing Performance Rate please select Performance Met QDC. ## - Denominator Exception/Exclusion QDC will not contribute towards Performance   Rate. ### - Performance Not Met QDC will reduce the performance rate."

Additional Condition for measures:

1. Measure No. 46

- On Info popup, following Additional Condition message will be displayed:

  "Patient discharged from an inpatient facility (e.g., hospital, skilled nursing facility, or rehabilitation facility) within the last 30 days. EMR Workflow: TOC Specialty Select Template "Injury and Illness" Hospitalization Upto Date <=30 Days from Encounter Date"

- This condition will be applicable for those encounters which are dated from 1st January 2017.

2. Measure No. 435

- On Info popup, following Additional Condition message will be displayed:

  "At least two visits during the performance period including current visit.

  EMR Workflow: Counts of Encounters is => 2 in the Performance Year."

- This condition will be applicable for those encounters which are dated from 1st January 2017.

- All System level Zero duration encounters will be exempted in calculation.

3. Measure No. 110

- On Info popup, following Additional Condition message will be displayed:

  "Patient seen for a visit between October 1 and March 31 of the Performance Year."

- This condition will be applicable for all encounters (dated in both 2016 and 2017 years).

- Record of this measure will NOT be displayed on MIPS-Quality-Claims screen if Additional condition is not met.

4. Measure No. 155

- On Info popup, following Additional Condition message will be displayed:

  "CPT II code 1100F (Patient screened for future fall risk; documentation of two or more falls in the past year or any fall with

injury in the past year) is reported in the numerator for Quality Id # 154."

- This condition will be applicable for all encounters (dated in both 2016 and 2017 years).
- Record of this measure will be displayed on MIPS-Quality-Claims screen even if Additional condition is not met.

MIPS Quality Claims report changes:

- The Report heading has been changed from "MIPS- Quality-Claims Report Detailed - Group Criteria" to "MIPS- Quality- Claims Report- Data Completeness Met".
- A new column, *QDC Category Name* has been provided.

Re-computation on Encounter Close:

Whenever the Denominator and Numerator Data is entered from Assessment screen and if a user does not visit TOC→MIPS Quality Claims screen then on Encounter Close, the MIPS Quality data is processed at the backend and it will be available in the reports.

11.24 New utility has been provided for the conversion of HTML file to PDF (Patch 62)

Now, a new utility has been provided for converting the HTML file to PDF. The blank tag, MSO tag, Page-break tag, background color, Special symbols have been handled in this utility.

11.25 Deleted code list will now be also updated with ICD 10 codes (Patch 64)

An Enhancement was released in Patch 54 which ensured that ICD /CPT and HCPCS codes which are reported on the claim are validated with Active / Inactive / Change table maintained by PrognoCIS. The Active Inactive table is now updated with ICD 10 codes.

Now along with CPT & HCPCS Codes Modified, Deleted Code list is updated with ICD10 code set as well and respective ICD 10 codes as and when are reported on Assessment and Claims will be checked for its effective and deletion dates.

11.26 Employer master Phase 2 Changes (Patch 64)

Following are the Employer master Phase 2 Changes:

1. **Employer Master Changes**

   Navigation Goto Menu: Settings → Configuration → Employer

   New fields have been introduced on Employer Master screen.

   Insurance Policy – Enter the policy number of the Group Insurance given by the employer.

   Purchase Order No - Enter the purchase order no in this field. The character limit supported in this field is 20. New tag BLH_EMPLOYER_PO has been added to display PO number on Employer Invoice.

   FTUX message has been added for Purchase Order No field. FTUX message 'User now can add Purchase Order number to be printed on Employer Invoice. A tag BLH_EMPLOYER_PO could be added on Employer Invoice template to populate Purchase Order details' will be displayed.

   Invoice Group By: This dropdown field is provided to users with following options:

   ➢ Patient – When this option is selected, the employer invoice is generated in the following format

   ➢ Charge Codes - When this option is selected, the employer invoice is generated in the following format

   ➢ Date of Service by Patients - When this option is selected, the employer invoice is generated in the following format

   ➢ Date of Service by Charge Codes - When this option is selected, the employer invoice is generated in the following format

   Hide Charge Code: When this Hide Charge Code checkbox is checked then the charge row code column will not be displayed on invoice generation. When this checkbox is not checked then the charge code row column will be seen when the invoice is generated from Claim → Send → Emp Inv.

Schedule Invoice Cycle: Schedule Invoice cycle drop down has three values Monthly, Weekly and Daily. This describes how the employer would prefer to receive the invoices.

Relabeled fields on Employer Master screen

1. Insurance Company has been relabeled Insurance

2. Policy Number has been relabeled Insurance Policy

3. Generate Employer Invoice By has been relabeled Invoice By

4. Invoice Frequency has been relabeled Schedule Invoice Cycle

5. Invoice Payment days has been relabeled Payment Days

6. Invoice Template has been relabeled Employer Invoice

Newly added labels on Employer Master screen

1. Billing & Invoicing Info.

2. Setup TPA

2. New fields have been added on Employer Export button of the Employer Master
The fields are as follows:
Hide Charge Codes Yes/No
Invoice Group
Payment Days
PO No

3. Scheduled Process 'RunSelfScheduledProcess4AllPoolnames' has been added for existing Practices where these properties have been turned 'On'. After running this Scheduled Process for existing Employers where the property is turned 'On', Hide Charge Code checkbox will be shown checked and Invoice Group By will be shown as by Charge Code.

11.27 Security related changes has been provided to AJAX calls (Patch 66)

Security related changes has been provided to AJAX calls for the following screens:

- Patient Portal
  - Portal Login

- ➢ Quick Sign Up
- ➢ Patient Outstanding
- Referring Doctor Portal
  - ➢ Portal Login
- Employer Portal
  - ➢ Change Password
- Independent Patient Login (IPL)
  - ➢ IPL Login

11.28 Changes related to Radiology Order set (Patch 67)

1. **Navigation** Goto Menu: Settings → Configuration → click on *Order Set* under *Workflow* column → Order Set popup → select *Order Set Type* dropdown as Radiology

   Now, 'Radiology Order Set' type has been changed from RD to RL

2. **Navigation** Goto Menu: Patient's Encounter → Encounter TOC → Radiology → click on Add: → click on Add Test icon: → click on Order Set icon: → click on save button → click on order set button

For Provider login, when a User enters the new Order Test and clicks on icon: then 'Radiology Order Set' is now saved in RL type.

11.29 Changes for CCD bulk import process (Patch 75)

1. In order to support CCD bulk import process, one new Property file is added which should be present at Process path. The property file should be named as 'CCDImportProperties.properties'.
   - Below mentioned three new properties should be present in the Property file:

     - ➢ *ccd.import.enc.notes*

       If this property is set to Y then encounter notes of XML file are added from CCD in the Document List screen with the following values:

       - ✓ Date – Encounter date (from CCD file)
       - ✓ Type – Old Progress Notes
       - ✓ Category – CCD Import
     - ➢ *ccd.incorporate.sections*

This property governs which sections should be incorporated from CCD of Problems (PM), Current Medication (CM), and Allergy (AL). The applicable values for this property are: PM (Problems), CM (Current Medication), and AL (Allergy).

Note: *VC (Vaccination) is not applicable for this property.*

For Example:

ccd.incorporate.sections = CM,AL

So now, only Current Medication (CM) and Allergy (AL) sections are incorporated from CCD and not Problems (PM).

➢ *ccd.reconcile.sections*

This property will govern whether to show data on Patient's record. The applicable values for this property are: PM (Problems), CM (Current Medication), and AL (Allergy), VC (Vaccination).

For example:

ccd.reconcile.sections = PM,AL,VC,CM

So now, data of AL, VC, CM is shown on Patient's record.

Note: *In the examples,* as *PM is not present in the property 'ccd.incorporate.sections' then it will not be reconciled even if it is present in the 'ccd.reconcile.sections' property*

2. Following mentioned are the Unique criteria for Problems (PM), Current Medication (CM), Vaccination (VC) and Allergy (AL) sections. If any one of the following combinations are present for a Patient then respective data will not get imported and any one of the combinations are not present then imported data will get saved into Face Sheet encounter:

- Current Medication (CM):
  (RxNormCode + RxDate)

  OR

  (NdcCode + RxDate)

  OR

  (DrugName + RxDate)

- Allergy:

(RxNormCode)

OR

(AllergyName)

- Problems:
  (SNOMED Code + Since When date)

  OR

  (ICD10 Code + Since When date)

  OR

  (ICD9 Code + Since When date)

- Vaccination:

  ➢ If CVX code is present then following condition is checked:
    (CVX Code + Administer When date)

  ➢ For a drug, if same CVX code is present with different Administer When date, then in the Dose column on Vaccination screen, dose number gets assigned respective to the dates in ascending order.
    For example:

    Administer date for a drug with same CVX code are:

    23rd Jan 2018

    24th Jan 2018

    Then, the dose number is assigned as follows:

Administer date	Dose
23rd Jan 2018	1
24th Jan 2018	2

3. Now, Log files are created in a new folder named as Log folder. Also, messages are shown for failed import. These Log files are saved at Process path.

4. On Vaccination screen, Vaccine name and Source is displayed on a tool tip of a Vaccine.

111

Note: *If Property file is not present at the Process path then CCD import process will continue as earlier.*

11.30 Provision has been given to archive the downloaded 'QRDA 3 Reports' (Patch 78)

Earlier, while downloading 'QRDA 3 Reports' there was no provision to archive the reports.

Now, while downloading 'QRDA 3 Reports' provision has been given to archive the reports. Upon downloading 'QRDA 3 Reports' user is prompted with a confirmation message," Whether this QRDA 3 Report will be final report for Attestation?" which asks the user whether the downloaded report will be used for submission or not. If user clicks on **YES** then the record detail is saved in database and the downloaded file is saved in a separate location in the database.

In the following modules above mentioned functionality has been implemented:

1. Reports → MU/QPP Reports → QRDA3 Reports
2. Settings → Configuration → Clinic → Download Files (QRDA3 Reports only)

11.31 'NPI' hyperlink has been added on some screens (Patch 83)

- NPI hyperlink has been now additionally provided on the following screens:
  1. TOC → Order Sheet →Procedure (External) → click on Add new icon ⊞ → *Ref Provider*
  2. TOC →Order Sheet →Procedure (External) → click on Add new icon ⊞ → *Ref Organization*
  3. TOC → Order Sheet → Consult → click on Add new icon ⊞ → *Ref Provider*
  4. TOC →Order Sheet → Consult → click on Add new icon ⊞ → *Ref Organization*
  5. Patient → Register → Referring Provider → Add New (hyperlink)
  6. Patient → Register →*Physicians* tab → Add New (hyperlink)
  7. TOC → Start Encounter → *Referred by Provider* → Add New (hyperlink)
  8. TOC → Edit Existing → *Referred By Provider* → Add New (hyperlink)
  9. TOC → Edit Existing → *Refer to Provider* → Add New (hyperlink)
- Following validations have been added in all the screens where NPI hyperlink is available:

Validations:

➢ NPI value should be only numeric; if user enters invalid value then on the click of *NPI* hyperlink and *ok* button following alert is displayed:

"Invalid NPI:- Alphabets and special characters are not allowed / NPI Starting with zero."

➢ NPI value should be of 10 digits; if user enters invalid value then on the click of *NPI* hyperlink and *ok* button following alert is displayed:

"NPI must be 10 digit."

➢ If a user keep blank then on the click of *NPI* hyperlink following alert is displayed:

"Please enter NPI."

But if the NPI field is mandatory on some screens and user kept is blank then on the click *ok* button following alert is displayed:

"NPI is mandatory."

11.32 Entering password is not mandatory on the Support Login screen to click on 'Change Password' link (Patch 116)

While performing Support login into PrognoCIS, now entering password on the Login screen is not mandatory when a User clicks on Change Password link in order to modify the password.

Note: *If a user is entering password and click on Change Password link then the entered password should be a valid one and not arbitrary.*

11.33 eRx functionality has been changed for multi-location clinic (Patch 116)

1. Earlier, in a multi-location clinic if a Provider was registered with SureScripts at one location and if any changes were made in the Address from Provider Master, then in second location results were getting copied of first location. Also, in this process SureScripts registration details of the Provider were getting removed from First location.

2. Now, eRx functionality has been changed for multi-location clinic. On updating the Address record of a Provider from any additional location will not update the address at base location or any other additional location.

3. Also, on registering the Provider with SureScripts at base location will not reflect the Provider as 'eRx enabled' on additional locations. The SureScripts registration details are not copied from first location to any other location.

4. eRx team will use 'Add Prescriber location' feature to enable eRx on additional location and can register the Provider with following service levels:

- New Rx
- Refill
- Controlled Substance (EPCS)
- CIMessage
- CIEvent
- Change Rx
- Cancel Rx
- RxFill

Note: *For each additional location, different secure Email ID is required to register the Provider for N2N.*

11.34 A new tag to Print Supervising Physicians details as per appointment location has been added (Patch 116)

A new tag *[ENC_SUPERVISOR__LOC$]* has been added to print the Supervising Physicians details as per appointment location. Following are the values supported after $ sign:

- DEA - Prints location specific DEA number of the encounter supervising physician
- REGN - Prints location specific State License number
- ERX - Prints eRx Regn No
- FTIN - Prints the FTIN number
- EDIN - Prints the EDI number
- SCHNO - Prints billing schedule

11.35 Modifications done by Trizetto gateway is successfully handled in PrognoCIS (Patch 113)

When Insurance eligibility is retrieved from Trizetto EDI then few additional fields would get transmitted to PrognoCIS. This information would include Trace #, and submission date. The date & Time stamp received from Trizetto is time

stamped in CST zone (Trizetto Time). The Trace # which used to be presented at the end of the response is now stamped above.

11.36 New concept of Multilocation has been introduced in PrognoCIS (Patch 108)

A clinic is said to be multi-location, when the Patients List is segregated Location wise. Like staff working at one location will have no access to the Patient's database of another location. All the location will be isolated i.e. the claims / EOBs/ Receipts generated for a Location are NOT mixed up, nor seen at another location. By default a Biller will be able to enter/modify/post a Claim/Receipt at the Logged in location only. As far as reporting is concerned, the outlook is different.

A property *multilocation.billing* is introduced. This property is system level. When the property is turned ON, system first verifies whether EMR is Multilocation or Not. If EMR is multilocation and if the above property is turned ON only then, Billing module is going to support multilocation. Otherwise, Billing will not be multilocation setup.

When Multilocation is turned on for EMR and Billing then the property *Prognocis.search.hide.global* should be set to Y. After setting the property to Y global checkbox on search will be hidden and 'Encounter Location' on Start of Encounter will also get Hidden

How to Change Location
The option ***Change Location*** is provided on Billing Home screen which allows the logged in user to switch between the accessible locations. This option allows users to switch to his other accessible locations quickly without logging out from PrognoCIS.
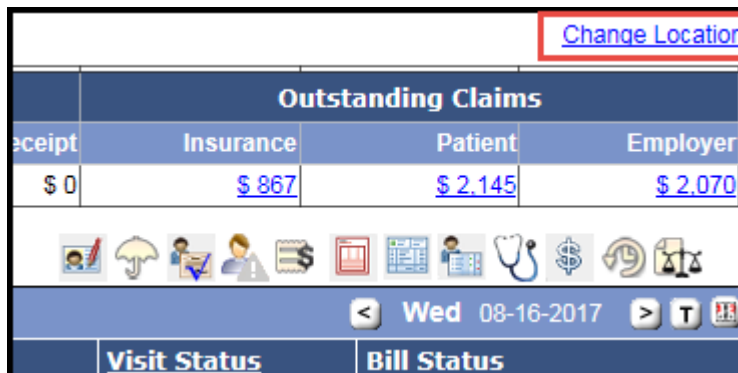
Clicking on the **Change Location** hyperlink a popup is invoked. The drop-down present in the popup lists only those locations for which the logged in user has access to. User can switch to other location by selecting the location from the drop-down and clicking on 'OK' button.

User's logged in location Specific Screens
Below mentioned screen is added with an additional filter condition by considering the users logged in location. Hence, only those records will be displayed which are specific to users logged in location.
- Patient & Patient Search

11.37 Telemedicine is now available in PrognoCIS (Patch 101)

Telemedicine is now available in PrognoCIS. The Provider has provision to evaluate, diagnose and treat patients without the need for an in-person visit. To use the Telemedicine feature in PrognoCIS, the Provider first needs to register with Zoom meeting.

Following changes have been done in PrognoCIS:

1. To use Telemedicine in PrognoCIS, the Provider first need to register with zoom meeting. A new button, **Tele Med** has been provided on the Provider Master screen. On click of this button, a zoom configuration popup is displayed wherein a Provider need to enter the zoom registration details such as API Key, API Secret, API HostId, SDK API Key, and SDK API Secret.

2. The user need to mark an encounter type as Telemedicine encounter by selecting the newly provided checkbox, **Applicable for Telemedicine Appointments** (in the Appointment Settings section) on the Encounter Type master screen.

3. When a Telemedicine appointment is scheduled then the Appointment confirmation mail will be sent to Patient. If a patient does not have Patient Portal login credentials then along with Appointment confirmation mail, patient portal credentials mail will also be sent.

Note: *If the Patient's email address is not present on the registration screen then the Provider will get notification about the same.*

4. On the Home screen of Provider login, the **Visit Type** column would display the Telemedicine appointment's visit type as hyperlink. The tooltip of that Telemedicine visit type will be displayed as "click to join the

meeting". On click of that hyperlink, the zoom meeting will be started and an email notification about the virtual consultation being started will be sent to the Patient.

Note: *Based on the newly added property, prognocis.telemed.appt.markarrive being set to following the Telemedicine appointment will be marked as arrived:*

0 – Will not mark arrived,

1 – Marks arrived when both Patient and Doctor have joined the meeting,

2 – Marks arrived when patient has joined the meeting

5. The Patient needs to login to the Patient Portal App i.e. My Health Records and click on the newly provided option, *Join Virtual Consultation* to join the zoom meeting with Provider.

11.38 Provision to assign ICD codes at Test level and Test Result level (Patch 93)

- Now, Users have provision to assign ICD codes along with CPT/HCPC codes at Test level and Test Result level.

- Existing *CPT/HCPC* button on the Test Master screen has been relabeled as *Assign Codes*. On the Assign Codes popup, for adding codes two buttons are provided as *Add CPTs/HCPCs* and *Add ICDs*. To enable these two buttons, two new properties are introduced :

  1. *addcpt.applicable.test.types*

     Values to be selected for this property are as follows:

     LB - Lab, RL - Rad, RS - Review of system, PH - Physical, SC - Specialty, VT - Vitals, SH - Social History, HP – HPI

  2. *addicd.applicable.test.types*

     Values to be selected for this property are as follows:

     HP - HPI, RS - Review of System, PH - Physical, SC - Specialty, VT – Vitals

- Depending upon the selected test type for both the properties, respective button(s) is available on the Test Master screen. Also, When multiple codes are assigned at Test /Test Result level, following is the sort order of codes on the Assign Codes popup:

  - CPT

➢ HCPC

➢ ICD10

- Units, BNG and Revenue columns are not applicable for ICD10 codes. Mod/ICD9 column will display modifiers for CPT and ICD9 codes for diagnosis codes.

- If a test type is not selected in both the properties then, ***Assign codes*** button is not displayed on the Test Master screen.

Note: *Property* ***assessment.addcpt.fromspltest*** *have been marked as obsolete.*

11.39 New random drug screening numbers are generated on changing the Risk change date (Patch 93)

Now on changing the Risk change date for Random Drug Screening, new random numbers are generated for the selected risk on close of encounter and the next encounter will be considered as first encounter for marking drug screening encounter.

11.40 Version upgraded date is now available on the Info popup (Patch 93)

Navigation Goto: click on Info icon: 🛈 from the menu bar

The ***Version Implementation Date*** (upgraded date) is now available on the Info popup under ***Clinic Information*** section.

11.41 Organizational Clinic name is based upon the property 'rx.surescript.accountname' (Patch 122)

Earlier, for organizational N2N email registrations, ***Brief Name*** field of the Location Master screen was used as the Organizational Clinic name.

Now, Organizational Clinic name for organizational N2N email registrations is retrieved from the property ***rx.surescript.accountname***.

11.42 Changes for 'MIPS-Quality Claims Reports' (Patch 122)

Following are the changes for the MIPS-Quality-Claims Reports:

1. Retaining old PQRS Report for previous years:

a) Old PQRS Report is retained with old label (Reports → PQRS Report)

b) This Report will be used to view data till 31 Dec 2016 only.

c) On PQRS Report popup, an alert is added. This alert will invoke, if selected calendar date is after 31 Dec 2016. Alert message is as follows:
This PQRS report generates data only till year 2016

From 2017, PQRS program has been adopted as MIPS-Quality-Claims Program. Hence from 2017 onwards, please navigate to Reports>MU/QPP Reports, select Classification as "2017-QPP-MIPS-Quality-Claims" and run report "MIPS-Quality-Claims Report Data Completeness Met-2017".

2. Shift existing MIPS-Quality-Claims report under MU/QPP Reports :

a) Existing MIPS-Quality-Claims Report has been shifted under MU/QPP reports.

b) New Report is added in PrognoCIS → Reports → MU/QPP Reports with below details,
Classification: 2017-QPP–MIPS-Quality-Claims

Report Name: MIPS–Quality-Claims Report-Data Completeness Met-2017

c) Following are the filters on Reports → MU-QPP Reports for this new report under MU/QPP Reports.
Input Fields for the Report are as below:

- From / Up to Date
- Provider
- Quality Id ,
- Patient Filter &
- Sort Filter

d) Report title for the new report is "MIPS – Quality - Claims Report – Provider wise Patients with Data Completeness Met for <P>"
Where <P> is Period chosen while running the report. On the click of *go* button, an alert is added. This alert will invoke, if calendar date is found before 01 Jan 2017.

 "2017-QPP-MIPS-Quality-Claims" report is applicable from year 2017.

 Please select From and Up to date in the valid date range.

11.43 The MIPS 2017 submission deadline is now extended to April 3, 2018 (Patch 125)

Earlier on logging to PrognoCIS, the message popup about '**MIPS 2017 Submission Deadline**' was displaying the deadline as **March 31 2018**. Now, the CMS has **extended** the deadline to **April 3, 2018**. Thus, on the message popup of MIPS 2017 submission, the following headline will be displayed:

"*Golden Opportunity for Medicare Providers/Clinics!*

CMS extends the MIPS 2017 Submission Deadline to April 3rd 2018."

11.44 Changes related to Education and Employer Notes (Patch 132)

Following changes have been done on the mentioned screens:

1. **Education screen**

   Navigation Goto: Patient's encounter→ Encounter Table of contents→ Education→ click on Add [+] button

   The Education Material search popup now displays *Type* column i.e. the type of education material.

2. **Patient Registration screen and Appointment Schedule popup**

   Navigation Goto menu: Patient→ Register→ click on Contacts tab

   AND

   Goto menu: Appointment→ Schedule→ double click on the appointment slot→ Appointment Schedule popup

   The name of an Employer Notes popup (click on Employer Notes icon:) has been changed from *Employer Notes* to the Patient's Employer name.

11.45 Message popup and widget for MIPS 2017 Submission deadline has been removed (Patch 132)

Earlier on successful login to PrognoCIS, the message popup about '**MIPS 2017 Submission Deadline**' was displayed and on top of the PrognoCIS screen, a widget was displayed for the same. Now, as the deadline has passed, the

message popup and widget has been removed; thus it would not be displayed to the User.

11.46 Security related changes has been provided to AJAX calls (Patch 133)

Security related changes have been provided to AJAX calls for the following screens:

- Employer Master screen
- Remittance →Patient Payment →Receipts
- Remittance → EOB/ERA screen
- Employer's TPA Master

11.47 Enable 'TLS 1.2' in Internet browser setting to use more secured PrognoCIS and related Portals (Patch 138)

Now, user has to **enable TLS 1.2 (Transport Security Level)** internet browser setting in order to use the more secured PrognoCIS and Patient/Referring Doctor/Attorney/Employer portals. If internet browser settings are not changed to 'TLS 1.2' before June 30, 2018 then users would not be able to use PrognoCIS and all portals.

On the login of PrognoCIS and Portals, a message popup has been given to inform and guide user to enable TLS 1.2 settings for respective internet browsers. Following is the message:

"*As suggested by PCI Council, TLS 1.2 (Transport Security Level) needs to be enabled in your web browser to increase the security of PrognoCIS and its Portals. If your browser settings are not changed to TLS 1.2 before June 30, 2018 then you would not be able to use our services.*

Click here to know about how to enable TLS 1.2 in your browser."

11.48 The 'Doc/Doctor' label in some screens of PrognoCIS has been changed to 'Provider' (Patch 139)

Now, the *Doc/Doctor* label in PrognoCIS has been changed to *Provider* on all screens except for following:

- Settings → Configuration → DB Analysis
- Roles → Doctor

- User Roles
- Online Help
- Search Headings
- N2N Messages

Also, for the following modules, label changes have not been made:

- Billing
- Portals
- PrognoPass

Limitation: *Please note that for following labels, the **Doc/Doctor** to **Provider** changes are not done:*

- *Doc Preferred*
- *Doctor Preferred*
- *Referring Doctor*
- *Doctor Form*
- *Doctor Loc Regn*

11.49 Provision has been given to schedule Multi-Visit appointments in a day associated to a single encounter (Patch 144)

Navigation Goto menu: Settings → Configuration→ click *Enc Types* under *Clinic* column → Select an encounter type → Encounter Type Master screen

1. Now, a provision has been given to schedule multiple appointments for a patient on the same day with a single encounter. This Multi-Visit appointment includes different encounter types along with their respective provider/resources. This first multi-visit appointment is also referred as base encounter and the constituent visit types are referred to as the associated visits. The 'Attending provider' of the base encounter is the attending provider of the first associated visit. Also during the course of individual appointments, data will be documented on the single encounter (Base Encounter) by all Providers/Resources.

2. In order to incorporate Multi-Visit functionality following changes have been done on the respective screen:

- **Changes on Encounter Type Master screen:**

A. On the Encounter Type Master screen, a drop-down list has been added with the label as '***Associated with***'. Below mentioned are the values for the drop-down list:

  ➤ Single Provider/Resource –

  For any new encounter type this will be selected by default and this is used for the normal visit or appointment scheduled for a single provider/resource.

  ➤ Multi Provider/Resource –

  This is used for the visits or appointments scheduled for multiple providers or resources. The Multi Provider checkbox is removed from 'Appointment Settings' section of Encounter Type Master and has been included as second value in the drop-down list.

  ➤ Multi-Visits in a day –

  This option is selected to use multi-visit functionality of scheduling multiple appointments in a day as explained in point 1. On selecting this option, Add Visit Types button: appears. On click of the button, the Visit Type popup displays and lists all active, non-zero duration and single provider/ resource encounter types. From this popup, a User should associate at least two Visit types to Multi-Visits in a day encounter type.

B. The duration of Multi-visit encounter type will be calculated considering the duration of associated visits and the minimum wait time set between the visits on the Visit Types popup on Encounter Type Master screen.

  Note: *Users are not allowed to modify duration once it is set.*

- **Changes on the Appointment Schedule screen:**

  A. When a user schedules an appointment of multi-visit encounter type then on Appointment Schedule popup, on selecting multi-visit Encounter Type, Assign Provider/Resource for Associated Visits button: gets enabled; which lists all the active encounter types associated to that multi-visit encounter type.

  B. On clicking the button: multi-visit popup displays fields as below mentioned:

  ➤ ***Date*** - It displays base encounter date

  ➤ ***First Appt Start time*** – It displays base encounter start time

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

- ➢ *Min wait time between visits* -Time between appointments set on the Encounter Type screen of multi-visit encounter type displays
- ➢ *Appointments in sequence* – Associated visits set on the Encounter Type screen of multi-visit encounter type displays
- ➢ *Provider/Resource* - User has to associate Provider/Resource to those associated visits that are available at the respective time/date/location
- ➢ *Dur* - This shows duration of each encounter type as defined in the Encounter Type master
- ➢ *Starts* – Displays start time of base appointment. For each visit start time will not be displayed
- ➢ *End* – End time is displayed only when appointment has been searched and a slot is selected to schedule the appointment

Note:

- ❖ *An appointment that is scheduled with a 'Single Provider/Resource' Encounter Type with multiple recurrence; users are not allowed to change the Encounter Type from 'Single Provider/Resource' to a 'Multi-visit' encounter type*

C. **Search hyperlink:**
Depending upon the providers selected for associated visit, the search will look for the availabilities of all the providers selected for associated visit. However, it will list the first providers schedule considering all other associated encounters. The objective is to be able to complete all visits in one day.

D. Clicking on the *schedule* button will schedule all of the appointments at once based on the availability of the providers. Appointment will be scheduled only when all the associated encounters can be completed on the same day or else an alert message is displayed.

E. Once appointment for a 'Multi-Visit in a day' type has been scheduled, then users can see the appointments for associated encounters on the respective provider/resource schedule in a read only format.

F. On the click of *delete* button, an alert message is displayed to user to inform about deletion of base appointment as well as all associated visits to it.
Note:

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

On the Appointment Schedule popup, Multi-Visit appointment will not be applicable for 'Other' type of appointments.

- **Changes on Home screen:**
  A. On *Appointment* tab, in the *Visit Type* column Multi-visit encounter type is not displayed; however, it will display the associated encounter types. In case of Multi-visit appointment, the encounter type will be suffixed with (MV) on the Home screen.
  For Example:

  If 'Encounter A' has associated visits such as 'v1, v2, v3'. Then in the Appointment tab, v1, v2, v3 are displayed with a suffix (MV). Such as: v1(MV), v2(MV), v3(MV)

  B. On *Open Enc* tab filters, in the Visit Type column multi-visit encounter type (i.e. Encounter A) will display.
  C. On marking any of the associated encounters as Arrived will mark all appointments as arrived.

- **Changes on Start/Edit Encounter:**
  A. On starting the multi-visit encounter, following fields will remain disabled:
    ➢ Date
    ➢ Time
    ➢ Encounter type
    ➢ Appointment location
  B. If a user starts a new encounter from Start encounter tab, then 'Appointment Details' list box will list base encounter and not the associated visit types.
  C. The Provider drop-down will only list the provider/resources which are assigned to associated visit types.

3. Limitations of Multi-Visit functionality:
   - Multi-visit appointments cannot be re-scheduled. Schedule button on the Appointment Schedule popup will be disabled if a provider tries to reschedule any appointment.
   - After scheduling a Multi-visit appointment if period is marked as block time or vacation is marked for that provider/resource, then Multi-visit appointment will not be moved to reschedule list.
   - For following mentioned Multi-visit appointment feature is not applicable:
     ➢ Anytime

     ➢ Overload

     ➢ Mass Scheduling

     ➢ Move appointment

- Multi-visit appointments cannot be scheduled from Patient Portal.

11.50 Security related changes has been provided to AJAX calls (Patch 146)

Security related changes have been provided to AJAX calls for the following screens:

- Settings → Configuration → DB Analysis
- Settings → Configuration → Lab or Radiology
- Settings → Configuration → MU/QPP settings
- Settings → Configuration → Business Unit
- Appointment → Schedule
- Message → In
- Message → scan
- Patient → Register
- Patient → Register → Insurance
- Patient → Register → Legal Doc
- Patient → Register → Card Scan
- CPOE → Radiology order
- Billing Dashboard
- Patient → Encounter → Procedure order
- Home → Appointment tab
- Patient encounter → Table Of Contents → Assessment
- PrognoCIS Support login popup
- Prognosign Support login popup

11.51 Provision to support alternate Modes of payment for payment types has been introduced (Patch 147)

Many of the practices requests to add additional modes of payments such as Care Credit, Paypal, eWallet etc. In order to support these in PrognoCIS *Other Payment Modes* is introduced This payment option is introduced for the following Payment type:

- Copay screen

      4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

Provide Ability to Document Other Payment Source

A new property is *other.pay.modes* is introduced to document Other Payment sources. This property is Admin level.
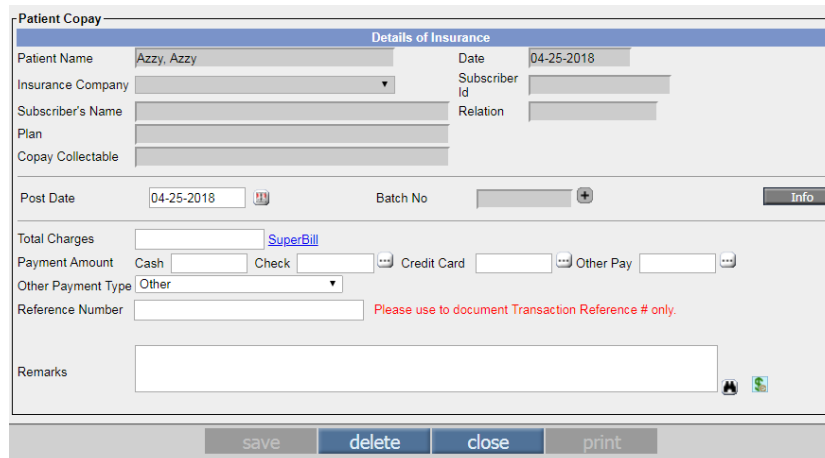
Provide Ability to Document Other Payment Source on COPAY Screen

Other Pay mode functionality is also introduced on Copay screen. Field Other Pay field is present next to Card field, next to the field a three dotted button is also present.

Figure: *Other Payment Modes field on Copay Screen*
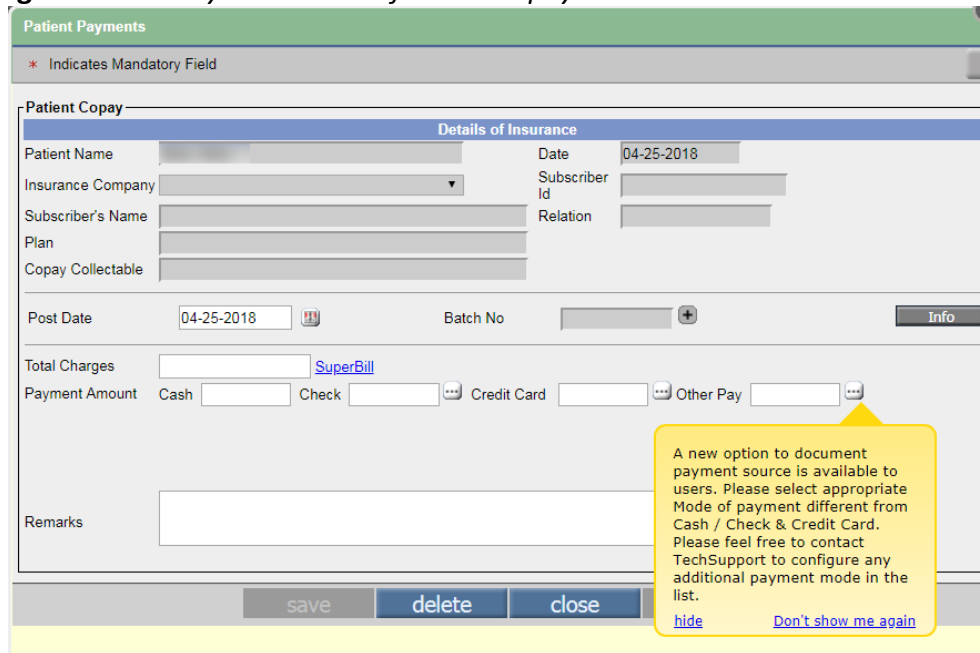
On the click of three dotted button, two new fields *Reference Number* and *Other Payment Type* auto populates just below the Payment Amount field. User is enabled to add reference number for tracking all the transaction made as Other Payments.

In the reference number field user needs to add the transaction reference number. The field supports alphanumeric value, special characters and accepts upto maximum 30 characters.

Other Payment Type field has following options present in the dropdown

- Other

- PAYPAL2

- HEALTHCARD

- NETBANKING

- CARECREDIT

- EWALLET

- EFT

FTUX message has been added on Copay screen. The following message 'A new option to document payment source is available to users. Please select appropriate Mode of payment different from Cash / Check & Credit Card. Please feel free to contact TechSupport to configure any additional payment mode in the list' is displayed.

FTUX message added on Tabular Reports screen

FTUX message has been added on EMR side: Reports →Tabular screen. Following message 'Please Note: Tabular Reports related Collection by payment source are changed to accommodate additional payment types. Listed below:

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117   (408) 873-3032

Old Report codes and Replaced To report codes: LOC-CP to LOC-CP1, DAT-CP to DAT-CP1,MTH-CP to MTH-CP1' is displayed.
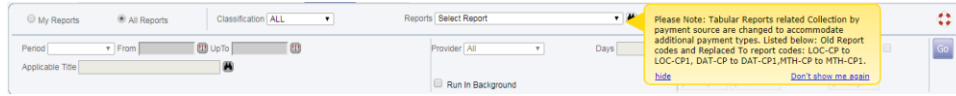
Following are the set of new tabular reports introduced in PrognoCIS:

Old Report Code	New Report Code	Changes
LOC-CP	LOC-CP1	New Column 'Other Pay Amt' has been added
DAT-CP	DAT-CP1	New Column 'Other Pay Amt' has been added
MTH-CP	MTH-CP1	New Column 'Other Pay Amt' has been added

List of Tags have been added

The list of tags added is as follows:

Tag	Description
[ENC_CPAY_EFT__AMT]	This tag will print the amount entered as Other Payments.
[ENC_CPAY_EFT_INSTR_NUM]	This tag will print instrument number for Other Payments

11.52 While generating Line and Area graph, fraction points are now considered (Patch 148)

On the following screens while generating Line and Area graph, fraction points are now considered:

- Chart icon From 'LAB Matrix' screen
- 'Print' from 'LAB Matrix' screen
- EMR Dashboard

11.53 Security related changes has been provided to AJAX calls (Patch 149)

Security related changes has been provided to AJAX calls for the following screens:

- Patient → Register → Add New(Referring Provider)
- CPOE → Consult
- CPOE → Lab order
- CPOE → Rx → Med Adhere
- CPOE → Rx → Add drugs
- Messages → Med Adherence
- Messages → In
- Settings → ICD10 Transition
- Appointments → Schedule
- Reports → MIS Graphs
- Patient → Follow up Pool
- Encounter Table of Contents → Order Sheet
- Encounter Table of Contents → Vaccination
- Encounter Table of Contents → Draw tool
- Encounter Table of Contents → MBTA WC → Payments
- Encounter Table of Contents → MBTA WC → Responses
- TOC →Zeus Claim Test
- User login popup
- Change or Forgot password

11.54 Lab Matrix tag 'PT_LABMATRIX$' have been added in order to display the Lab results according to dates and Pregnancy number (Patch 151)

Now, a new Lab Matrix tag *PT_LABMATRIX$* have been added in order to display the Lab results according to dates and Pregnancy number.

Following are the values to be used with PT_LABMATRIX$ tag:

Values	Example	Description
VENDOR	PT_LABMATRIX$VENDOR:<Lab	Specify a Lab Vendor

	vendor>	Code after the $ sign to get the lab results only for a specific vendor in the matrix.
FORDAYS	PT_LABMATRIX$FORDAYS:<number of days>	Specify number of days after the $ sign. The matrix will show the results only for those many days prior to current date.
PREGNO	PT_LABMATRIX$PREGNO:<pregnancy number> OR PT_LABMATRIX$PREGNO:	Mention a specific pregnancy cycle number after the $ sign and the matrix will display only the results within that cycle. OR Keep it Blank to get the results only for current pregnancy cycle.
THISPREG	PT_LABMATRIX$THISPREG	This will display the results only for current pregnancy cycle.
LASTPREG	PT_LABMATRIX$LASTPREG	This will display the results only for previous pregnancy cycle.
FROMDATE	PT_LABMATRIX$FROMDATE:<date>	Mention the date in mm-dd-yyyy format after the $ sign and

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

		the matrix will display all the results starting from this date till today's date.

11.55 For Consult and Procedure Letters which are faxed, the backend functionality is modified (Patch 168)

Navigation Go to CPOE → *Consult*

OR

CPOE → *Procedure*

OR

TOC → Order Sheet → *Consult* Tab

OR

TOC → Order Sheet → *Procedure* Tab

For *Consult* and *Procedure* Letters which are faxed, functionality has been modified at the backend.

11.56 New utility has been provided for the conversion of HTML file to PDF (Patch 170)

Now, a new utility has been provided for converting the HTML file to PDF. The blank tag, MSO tag, Page-break tag, background color, Special symbols have been handled in this utility.

11.57 Validation message has been added if spaces are entered in FTIN and Tax Id field (Patch 172)

Now, validation message has been added if spaces are entered in FTIN and Tax Id field. If spaces/special characters/alphabets are entered then for Tax Id message 'Invalid Tax Id: - Alphabets and special characters are not allowed.' will be displayed and for FTIN message 'Invalid FTIN: Alphabets and special characters are not allowed.' will be displayed.

Following are the list of screens where validation message has been added:

Settings → Configuration →Location →FTIN
Settings →Configuration →Providers →Tax Id

Settings →Configuration →Ref Doctors →Tax Id

Settings →Configuration →Org Provider → Tax Id

Settings → Configuration →Ref Organizations → Tax Id

Settings → Configuration → Business Unit → Tax Id

11.58 Random Drug Screening feature is now customizable (Patch 179)

Random Drug Screening feature was initially given as a custom feature which included a fixed workflow for Urine Drug Screening and random drug screening based on properties.

Since this workflow was not customizable and to make this feature more user friendly or more customizable as per client's requirements, the following additional properties have been introduced:

Property	Default value	Description
Existing Properties		
random.drugscreening.applicable	OFF	Based on this property the Random Drug Screening is applicable for Clinic or not.
random.drugscreening.exclude.enc.types		The encounter types which need to be excluded for Random Drug Screening are set in this property. **Note:** *Zero duration encounters are excluded by default.*
random.drugscreening.first.visit.date.testcode	FIRSTVISIT	The test code of first risk visit status needs to be set in this property.
random.drugscreening.risk.changedate.test	RISKDATE	The test code of the risk status change date needs to be set in

code		this property.
random.drugscreening.risk.testcode	RISKLEVEL	The test code of the risk level needs to be set in this property. There are four options of risk level i.e. None, Low, Moderate, and High.
random.drugscreening.risklevel.visits	3,4,6	The comma separated number of visits for the different risk levels (low, moderate, and high) in drug screening should be defined in this property. The visit value for High risk level should not exceed a count of 12 and all the 3 values for Low, Moderate and High risk levels must be entered in the property.
random.drugscreening.lab.testcodes		The lab test code that is to be added by default on automatic generated lab order for drug screening.
random.drugscreening.lab.vendorcode		The lab vendor test code that is to be selected by default on automatic generated lab order for drug screening.
Newly Added Properties		
random.drugscreening.after.months	6	This property allow user to decide the start month of Random Drug Screening after the first risk visit. User can set the value in

134

		between 0 to 12.
For Urine Drug Screening		
random.urinescreening.max.visits	5	This property allow user to define the number of visits after the first risk visit for Urine Drug Screening.
random.urinescreening.risklevel.visits	5^2,5^1,4,5	The comma separated numbers of visits for the different risk levels (low, moderate, and high) in Urine drug screening that would be separated by caret (^). For example: If the property is set as 5^2,5^1,4,5 Then it would mean for Low is 5, for Medium is 2,5 and for High is 1,4,5 visits.
random.urinescreening.lab.testcode		The lab test code that is to be added by default on automatic generated lab order for Urine drug screening.
random.urinescreening.lab.vendorcode		The lab vendor test code that is to be selected by default on automatic generated lab order for Urine drug screening.

The properties for Lab test code and vendor are mandatory for Random and Urine Drug Screening.

Note: *If a user wants to opt out the Urine Drug Screening then they can keep the urine drug screening properties blank.*

11.59 Identity provider 'onelogin' introduced to manage user's multiple login URL's and credentials (Patch 182)

Earlier, the user was required to remember different URL's and its corresponding login credentials for accessing PrognoCIS application. A single user can have multiple URL's (e.g. Provider assigned for multi-location clinic etc.) associated with the clinic. Thus, manually keeping track of it caused inconvenience to the user.

Now, the user only needs to remember a single login credential of the identity provider 'onelogin'. All the PrognoCIS logins associated with that user will be displayed on the user's identity provider (onelogin) home screen. By clicking on any of the options displayed, user validation takes place and the user is redirected to the respective PrognoCIS home page.

11.60 'WalkMe' integrated with PrognoCIS for user workflow guidance (Patch 189)

'WalkMe' is a platform which is now been integrated at the backend of PrognoCIS for a particular client. It will help users by providing guidance tour of the process workflow. A snippet will be available on the home screen which will display the list of available guidance tours and also allow the user to perform preferred customization to the snippet settings.

12 Portal (Patient/Referring Doc/Employer/Attorney)

12.1 Attorney Portal has been introduced in 'V3.1B1' (Patch 49)

In order to grow their businesses, clinics are required to tie up with different Attorneys, who would be referring their clients, met with a personal accident, as patients to these clinics. After the visit of the patient, clinics are required to share Patient's visit information like SOAP notes, LAB/RAD results etc. with the Attorney.

Earlier, these details were shared with attorneys by mails or posts. This process was time consuming, so to make the transfer of data fast and in secure fashion Attorney Portal comes into place.

Attorney Portal has the following features:

 ➢ Communication between Patient and Attorney

 ➢ Access records

 ➢ Request and reschedule appointments

 ➢ Check status of requested appointments

 ➢ Attorney Portal is designed to support multiple browsers like Microsoft Internet Explorer, Apple Safari, Google Chrome and iPAD.

Attorney Portal supports both Single as well as Multi Location databases.

In PrognoCIS, on the click of *Info* button: , Attorney Portal link is displayed in the *Other* section *Modules*

Login Credentials

Attorney can be added from the following screens:

 ➢ Goto Menu: Patient → Register → select a Patient → click on *Billing* Info tab → click on *Add New* link

 Or

 ➢ Goto Menu: Settings → Configuration → *Vendors* → Attorney → click on *Add New* button

 Or

 ➢ Goto Menu: Settings → Configuration → click on *Login Details* under *Admin* column → User Login Details popup → select *User Type* as Attorney

The popup is displayed to add the Attorney details.

Note:

❖ *Maximum length of **Law Firm** field is 50 characters.*

❖ *Attorney who are already added in PrognoCIS for them login credentials will not be auto-created from Attorney master.*

Login to Attorney Portal
Figure: *Login page of Attorney Portal*

Perform the following steps to Login into Attorney Portal

➢ Enter PrognoCIS Attorney Portal URL in the address bar of the browser; the login page of PrognoCIS Attorney Portal is displayed.

➢ Click on Login button; Attorney Login popup is invoked.

Figure: *Attorney login popup*
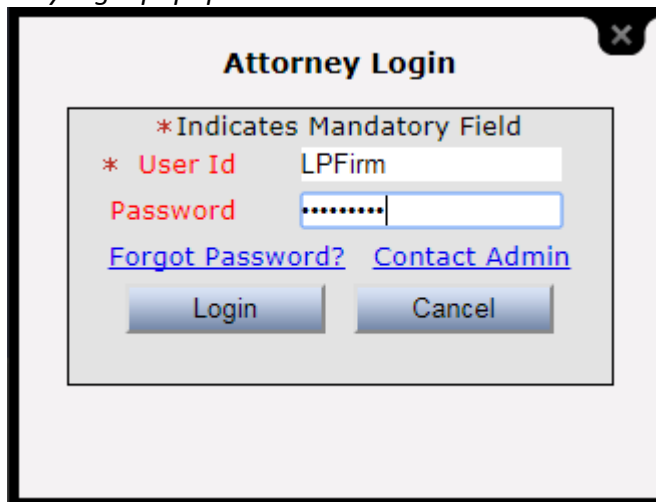
➢ ***ok*** button to open PDF and view your password.

After a user is successfully logged in, a disclaimer is displayed in a popup. Select the ***I Accept*** checkbox provided at the bottom of the disclaimer popup and click on ***Ok*** button.

Attorney Portal Screen

Attorney Portal is made up of three distinct sections or frames. Once the user is logged in into the Attorney Portal, the system selects the first patient from the list by default.

Figure: *Attorney Portal screen can be divided into three main sections*
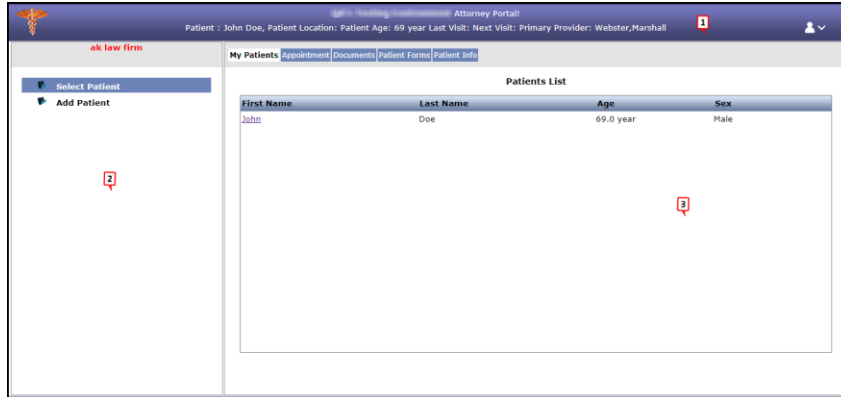
Top Banner: It displays important information such as Clinic logo, Clinic Name. Selected Patient related information is shown in the Patient band such as Patient's Name, Patient's Clinic Name, Patient's Age, Last Visit Date, Next Visit Date and Primary Provider of the patient and Profile icon: . Patient Band is configurable.

Profile icon:

From this, logged in user has the provision to change Attorney Portal account User ID and Password. When this icon is selected, three options are displayed namely,

-Change User ID
From this screen, logged in user has the provision to change Attorney Portal Account User ID.

-Change Password

From this screen, logged in user has the provision to change their Attorney Portal Account Password.

-Log Out
From this, logged in user can logout.

Left Section: It displays the logged in Attorney's name and depending upon the tab selected from the middle section, its respective Table of Contents (TOC) is displayed. For example, in the above figure the tab, **My Patients** is selected

therefore its respective TOC consisting of the menus, **Select Patient** and **Add Patient** is displayed.

Display section: This section comprise of following tabs:

- ✓ My Patients
- ✓ Appointment
- ✓ Documents
- ✓ Patient Forms
- ✓ Patient Info

Tab: My Patients

There are two menu options displayed in the TOC section namely:

Select Patient: Select Patient menu option displays list of Patients, who have the logged in Attorney associated to them on Patient Registration screen in PrognoCIS EMR. Select Patient menu option displays Patients with following details First Name; Last Name; Age; and Sex.

Add Patient: Add Patient option displays Basic Details screen. From this screen, Patient's basic information can be added.

When a User selects a Patient/after adding a Patient, navigates to the screen mentioned in the property *atp.default.menu*.

Tab: Appointment

A logged in Attorney is eligible to take appointments on behalf of a Patient from PrognoCIS Attorney Portal. Appointment can be taken or requested for the patient from the available slots.

Tab: Documents

Displays two menu options in TOC section namely,

Clinic Shared Documents

From this screen, logged user has provision to view the documents of Patient shared on Referring Doctor Portal :

The Clinic Shared Documents submenu displays the following information about the document:

Column	Description
Visit Date	Displays the document date.

Type	Displays the type of the document.
Category	Displays the selected category of the document.
Subject	Displays the entered subject of the document.
Attending Doc	Displays the Patient's Attending Doctor.
View	On click of zoom icon: 🔍, the document is displayed.

Submit Documents

From this screen, logged in user can attach Patient's documents. Once the document is attached, a message gets sent to the provider's inbox.

Tab: Patient Forms

Two menu options are displays in the TOC section namely:

Existing Patient

The tab displays Patient forms of existing patient. The Patient forms for Existing and New Patients can be configurable by settings under Settings → Configuration →Interface master.

New Patient

When logged in user click on the new patient menu then all the patient forms applicable for new patients are displayed as hyperlinked. Clicking on the hyperlink invokes the respective Patient form in which logged in user can fill the required details

Tab: Patient Info

Displays two menu options in the TOC section namely:

Basic Details

From this screen, logged in user has the provision to edit or view the basic details of the Patient like First Name, Last Name, Location, Sex, Primary Doc, Address and so on.

Emergency Contact Information

The menu option displayed the following fields where Emergency contact information of the patient is to be filled, like Name, Relation, Address details such as Street, Apt/Suite, ZIP, City, State, Home Phone, Cell Phone, Work Phone 1, Work Phone 2, Fax, and Email Address.

Note: *Email templates used in portals (Referring Doctor/Patient/Employer/Attorney) are now displayed under Settings → Configuration → Email only if respective Portal is ON.*

12.2 Three new tags have been added to print the order details for Procedure and Consult (Patch 56)

- Following three new tags have been added to print the order details for Procedure and Consult:

  1. *[ENC_PROCEDURES__STR]*

     This tag prints the following details:

     Order No: <Order #> Dated: <Order date> Scheduled On: <Scheduled date> Procedure: <Procedure Name> Performed By: <Performing Physician display name>

  2. *[ENC_CONSULTS__STR]*

     This tag prints the following details:

     Order No: <Order #> Dated: <Order date> Consult: <Consult Name> Refer to: <Referred to Physician display name>

  3. *[ENC_REVIEW__PROCEDURE]*

     To print the details using this tag, a new property, *procedure.review.tag.fields* has been added. Data type of this property is 'MVALSET' with *Move up* and *Move down* buttons.

     Supported values of this property are as follows:

     ➢ HR - Header (Prints Procedure Order Date, Order # and Name of the Procedure in bold followed by a line break)
     ➢ OD - Order Date
     ➢ ON - Order Number
     ➢ PR - Procedure Name
     ➢ OP - Order By
     ➢ SD - Scheduled Date
     ➢ DD - Done Date
     ➢ PP - Performed By
     ➢ RC - Review Comments
     ➢ LR - Latest Review Comments

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

Note: *When Header is selected in the property then it should always be kept first because the value will print header details in bold and followed by a line break.*

- To facilitate the adding of Procedure details in an Encounter, *Add* button has been provided on TOC → Procedure Order screen. The button is available only after the status of the Procedure order changes to 'Result received', 'Result received & Reviewed', 'Complete' or 'Complete & Reviewed'. This will not include the Procedure result on Progress Note.

12.3 Provider was not getting Text reminder messages of appointments scheduled from Patient portal (Patch 58)

It was observed that Provider was not getting Text reminder messages of appointments scheduled from Patient portal.

12.4 Provision to add new Patient from My Health Records App (Patch 60)

- On the login screen of Patient Portal App i.e. My Health Records, a new link *Add Patient* has been provided to add new Patient in PrognoCIS.

- A tap on *Add Patient* link would invoke a screen wherein a User has to enter the following Patient details:

  - Title
  - First Name
  - Middle Name
  - Last Name
  - Birth Date
  - Sex
  - Marital Status
  - Primary Doc
  - Home Phone
  - Cell Phone
  - Email Address
  - Notes

- After entering the patient details when a user taps on *save* button, the Patient is added into PrognoCIS.

12.5 Password field related changes done in PrognoCIS and Portals (Patch 89)

Now, on the following screens, maximum length of 'Password' field has been set to 30 characters. When a User tries to enter more than 30 characters then it would be restricted.

- PrognoCIS
  - ➢ User Login (Change Password and Forgot Password)
  - ➢ Login Details (Settings → Configuration → Admin → Login Details)
- Patient / Employer / Attorney / Referring Doc Portal
  - ➢ Change Password
  - ➢ Forgot Password

12.6 Changes related to Portals (Patch 149)

1. For Patient, PrognoPass, Referring Doctor and Attorney portals, the Doctor labels have been changed to Provider. Hence, now it is referred as **Referring Provider portal**.
   Screens are as follows to display **Referring Provider portal**:

   - Info popup → Other Modules
   - Document List Screen
     - ➢ Share on Portal
     - ➢ Filters button popup
   - Specialty Element Master screen → Share on Portal

2. For easier access, files of Patient and Referring Provider Portal have been separated in the backend independently.

3. Following new properties have been added for Patient /Referring Provider/Employer/Attorney portal:

Sr.No	Property	Description
1	*pp.portal.debug*	It is an admin level property. Set this ON, to show logs of Patient portal, else OFF
2	*rdp.portal.debug*	It is an admin level property. Set this ON, to

		show logs of Referring Provider portal, else OFF
3	*emp.portal.debug*	It is an admin level property. Set this ON, to show logs of Employer portal, else OFF
4	*atp.portal.debug*	It is an admin level property. Set this ON, to show logs of Attorney portal, else OFF
5	*rdp.show.disclaimer*	Set this ON, to show disclaimer to the Referring Provider on first time login, else OFF
6	*rdp.clinic.name*	Enter the clinic name to be shown on Referring Provider Portal. **Note:** *If this property is kept blank, the system will print the clinic name of PrognoCIS, on the portal.*
7	*atp.clinic.name*	Enter the clinic name to be shown on Attorney Portal. **Note:** *If this property is kept blank, the system will print the clinic name of PrognoCIS, on the portal.*

4. On the following screens, multi-location supports; i.e. information is displayed specific to a user logged in location :
   - Patient Portal

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

A. Appointment screen

B. Documents → Clinic Shared documents

- Referring Provider Portal

A. My Patients → Patient List

B. Appointment screen

C. Documents → Clinic Shared documents

5. On the following screens, multi-location does not supports; i.e. information is not displayed specific to a user logged in location :

- Patient Portal

A. Sign Up → Add Patient

On the Sign Up of Patient portal alert message, "This screen is not supported for Multi Location." displays and on the click of ok button of alert message home screen displays.

B. Message Center → Compose

- Referring Provider Portal

A. My Patients → Add Patient

Add Patient menu is not displayed on the Referring Provider portal though it is configured in property.

In a browser if a user has logged into Patient portal and tries to login to Referring Provider portal then an alert message, "Either another instance of one of the PrognoCIS product suite is already open in this browser or the previous session did not logout properly. Please click OK to continue with new login and terminate the previous session" displays.

12.7 Modified the submit form rule property for Patient/ Referring Provider/Attorney portals (Patch 162)

Navigation Go to Menu: Settings → Configuration → Properties

1. Property Value 'A': Previously, last Patient Encounter was taken into consideration for acquiring the Attending Clinical Staff's ID and based on that the notification would be sent to these users.

Now, since there is no encounter associated with Patient form filled by Patient from Patient Portal, the property value '*A – Message to Attending Clinical Staff assigned on Start/Edit Encounter screen of the encounter*' is changed to '*A – Message to the Primary Provider of the patient*' which means that notifications will now be sent to the Primary Doctor of the Patient.

2. Property Value 'N': Previously, Patient's last Encounter was taken into consideration for acquiring the Attending Doctor ID. And based on the Doc ID, the Nurse's Id was searched and the notification would be sent to these users.

Now, since there is no encounter associated with Patient form filled by Patient from Patient Portal the property value 'N – *Message to All Nurses assigned to Attending Doc of the encounter*' has been removed.

Note:

For Patient/Referring Provider Portal, users who had Property Value set as 'N', it will now be changed to 'S – Message to Staff playing the role specified in the property *pp.submit.form.mailto***'**.

For Attorney Portal, users who had Property Value set as 'N', it will now be changed to 'S – Message to Staff playing the role specified in the property *atp.submit.form.mailto*'.

12.8 In Multi-location of Portals, location specific message notifications will be sent (Patch 162)

i)   Previously, for Multi-Location setup on Patient/ Referring Provider/Attorney Portal, message notifications for various actions were sent to all users of all locations with the assigned user roles.

Now, only the assigned users of patient's location will receive the message notifications.

For Multi-Location setup, on Basic details screen of Patient Portal a new non-editable field, Location is added which will display the location where the patient is registered.

Based on the following properties being set, the message notification would be sent from the respective screens of the Portal:

Patient Portal

1   Patient Form

- In EMR, if the property '*pp.submit.form.rule*' is set to 'S – Message to Staff' then the role specified in the property *pp.submit.form.mailto*' is considered.

- Based on the role set in '*pp.submit.form.mailto*' property, the message notifications will be sent to the respective assigned user's role of the patient's location.

Note: For Attorney Portal the properties considered are *atp.submit.form.rule* and *atp.submit.form.mailto*

2   Appointment

- In EMR, if the property '*pp.appointment.rule*' is set to 'S – Message to Staff' then the role specified in the property *pp.appointment.mailto*' is considered.

- Based on the role set in '*pp.appointment.mailto*' property, the message notifications will be sent to the respective assigned user's role of the patient's location.

Note: For Attorney Portal the properties considered are *atp.appointment.rule* and *atp.appointment.mailto*

3   Attach Documents Screen

For Multi-Location setup, when a document is attached from Patient Portal, the system sends a message to the users of the patient's location having "portalAttachments" role assigned through EMR.

Note: *Above screen settings are applicable for Patient, Referring Provider and Attorney Portals.*

4   Message Center (Compose Screen)

For Multi-Location setup, when '*pp.message.sendto.doctor*' is set to 'S - ONLY to the patient support personnel' in EMR, then the system sends a message to the users of the patient's location having "ppSupportRole" role assigned.

5   Billing(Patient Outstanding Screen)

For Multi-Location setup, when a payment is done from Patient Portal, the system sends a message to all the users defined in the property '*pp.payment.message2role*' of that particular location.

ii)   For Multi-Location setup, on Basic details screen of Patient Portal a new non-editable field, Location is added which will display the location where the patient is registered.

12.9 Audit trail of all actions are maintained for Employer portal (Patch 167)

Earlier, for Employer portal Audit trails were maintained only for login and logout actions.

Now, for Employer portal along with login and logout; Audit trails are maintained for every action such as Read, Update, Delete, Print, Email and Export/Download etc.

For following screens on Employer portal Audit Trail is maintained:

- Clinic Shared Documents
- Patient Clinic Shared Documents
- List of User
- List of Department
- Add new User
- Add new Department
- Change User ID
- Change Password

12.10 Patient portal website supports Spanish language (Patch 186)

1. Now, a provision has been given to access Patient Portal website in Spanish language.
2. Following two new properties have been added:

Property	Description
pp.multilanguage.applicable	Set this property ON to get the Patient portal with Multi-Language support else turn it OFF.
pp.default.language	Select the appropriate default language for Patient Portal from drop-down list. Language values to be selected are: ➢ en – English ➢ es – Spanish

3. Following mentioned information will be displayed in Spanish:
   ➢ Labels of Text field/Text Area
   ➢ Radio button labels
   ➢ Check-box labels
   ➢ Drop-down list options
   ➢ Table and column headers
   ➢ Error/ Warning/Alert /Tooltip messages

4. On the Login screen of Patient portal user have an option to choose medium of language by clicking on *Language* hyperlink and have the access to Patient Portal in the required language.

5. Consider a scenario wherein, if a User has bookmarked the Patient Portal website which was in Spanish language and later set the property *pp.multilanguage.applicable* OFF then on the click of Login/Sign Up button an alert message, "Multi-language is not supported. Please navigate to English Patient portal URL to access the Patient portal" is displayed.

Note: *Any third party screens such as payment gateway that are part of the workflow are not considered for Spanish language support.*

12.11 User interface of Attorney portal has been elevated (Patch 188)

1. Now, user interface of Attorney portal has been elevated in more user interactive manner.

2. Home screen of Attorney portal has been changed to "List of Client" screen that displays clients of the logged in Attorney and can be viewed as follows:

- However, tabular form on the Home screen can be modified based upon the following properties:

➢ *atp.homepage.fields*

Enter the comma separated database column names to be displayed on the Home screen. Default values are: PT _FNAME, PT _LNAME, PT_AGE, PT_SEX

If user want to view **Injury** and **hospitalization** date on Home screen then add following comma separated values also:

dbo.fnCaseInjuryDate(PT_ID), dbo.fnCaseHospUptoDate(PT_ID)

➢ *atp.homepage.sort*

Depending upon the columns defined in the property *atp.homepage.fields* need to set 'Y' value for the respective columns to sort out.

➢ *atp.homepage.titles*

Depending upon the columns defined in the property enter the comma separated table column names to be displayed on the Home screen.

Default values are: First Name, Last Name, Age, Gender

➢ *atp.homepage.widths*

Enter the width for the columns which are defined in the property *atp.homepage.fields* to be displayed on Home screen. Default values are: 30, 30 ,30 ,30

3. Following new add-ons are present on Attorney portal screen:

- :

   Click on this icon to navigate to Home screen. (i.e. List of   Client)

- :
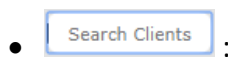
   Enter a required client name to be searched and on client selection user navigates to Patient Info → Basic Details screen.

- :

   Click on Client Search icon to invoke Client Info popup and client selection user navigates to My Patients → Add Patient screen.

   Following new properties have been added to modify search selection:

   ➢ *search.atpclient.datawidth*
   ➢ *search.atpclient.fieldlist*

151
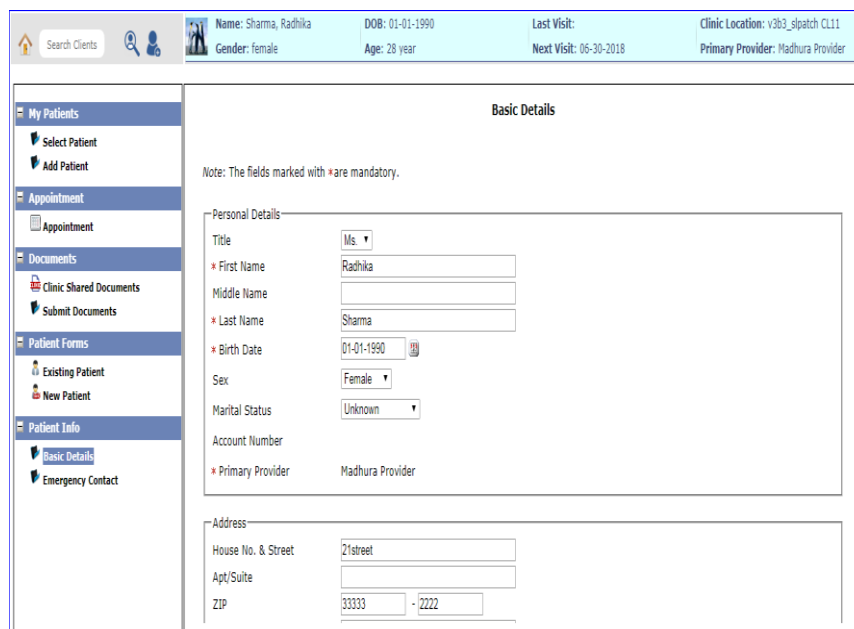
➢ *search.atpclient.fieldlistsort*

➢ *search.atpclient.message*

➢ *search.atpclient.orderby*

➢ *search.atpclient.returnlist*

➢ *search.atpclient.rowcount*

➢ *search.atpclient.table*

➢ *search.atpclient.titlelist*

➢ *search.atpclient.where*

- :

  Click on this Add New Client icon to add new patient (i.e. Client).

4. From Home screen, on selecting any patient information is displayed in the modified screen is showed as follows:

- Patient Band:

  Patient band is configured based upon following new properties:

  ➢ *portal.attorneyband.tag.r1.c1*

  ➢ *portal.attorneyband.tag.r1.c2*

  ➢ *portal.attorneyband.tag.r1.c3*

  ➢ *portal.attorneyband.tag.r1.c4*

  ➢ *portal.attorneyband.tag.r2.c1*

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117   (408) 873-3032

> - *portal.attorneyband.tag.r2.c2*
> - *portal.attorneyband.tag.r2.c3*
> - *portal.attorneyband.tag.r2.c4*

- Now, menus have been shifted in the left pane. User may expand the Menus to view sub-menus.
- On the Appointment screen,
  On selecting Future Appointments radio button appointments are displayed of following statuses:

  - Scheduled
  - Requested
  - Tentative

  On selecting Past Appointments radio button appointments are displayed of following statuses:

  - Scheduled
  - Arrived
  - Ready for Clinical Staff
  - With Clinical Staff
  - Ready for MA
  - With MA
  - Ready for Doc
  - With Doc
  - Ready for Review
  - Ready for Checkout
  - Checked out
  - Complete
  - Cancelled by Patient
  - Cancelled by Clinic
  - No Show
  - Deleted

Note:

- ❖ *While showing Past appointments duration from which appointments needs to be showed are defined in the property rx.pastrx.days.*

❖ *All of the Future appointments will be displayed in ascending order whereas all of the past appointments will be displayed in descending order.*

5. If an appointment is marked as NO SHOW and Cancelled by Patient from PrognoCIS then an email is sent to the respective Attorney to inform about it. For this, a new email template **"No Show of Patient Appointments Email Notification to Attorneys"** has been added under Settings → Configuration → click on E-Mail under Output Templates column.
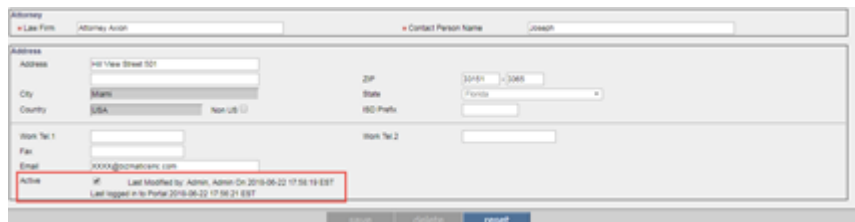
The email to Attorney is sent only if checkbox *Email Notification for NOSHOW Appointments* is checked on the Attorney Master screen (from under Settings → Configuration → Vendors → Attorney Master) for the Attorney. This checkbox is enabled only if Attorney portal is ON and valid *Email* address is entered on Attorney Master screen.

12.12 Attorney Billing has been introduced (Patch 188)

Now, new property *enable.attorney.billing* has been introduced. This property is system level. This property when turned on and if attorney is added in PrognoCIS then the same record also gets added in Insurance Master. And if the same attorney is added to patient's registration then the newly added Attorney Insurance would also be listed on Patient's Insurance Umbrella icon as one of the insurance defined as "Attorney".

Changes on Attorney Master
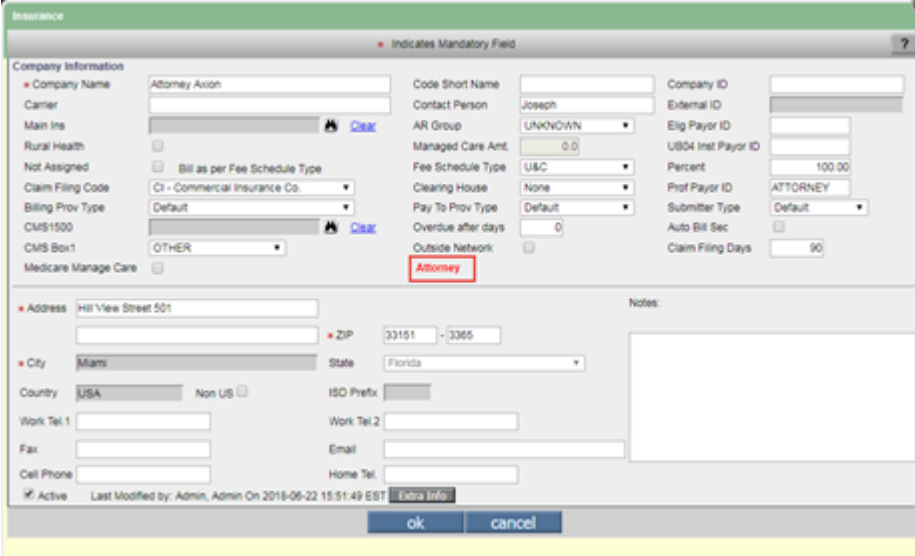
➢ When user adds an Attorney then same attorney is added in Insurance master.

➢ On Attorney Master a time stamp *Last logged in Portal* is added next to the Last Modified by timestamp

➢ On Attorney Master, a checkbox is added to mark the Selected Attorney as Active / Inactive.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032
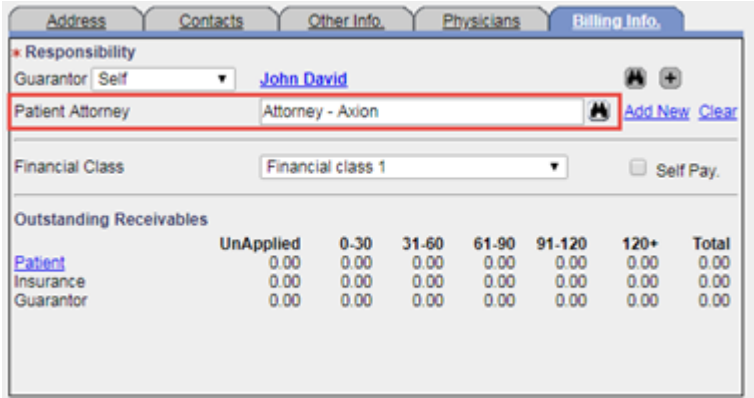
Note: *When Attorney is added, Address of the attorney should be defined prior on save of Attorney record.*

Insurance Master

Once Attorney is linked to insurance, keyword Attorney will be displayed on Insurance master screen.

Attorney on Patient Registration screen

Note: *It is mandatory to associate Attorney on Patient Attorney which is mapped to Insurance in order to create an Attorney Claim.*

Patient Insurance screen

Option 'Attorney' is added in Defined as field of the Patient Insurance screen only when the property **enable.attorney.billing** is set to 'Y'.
When Attorney is added to Patient registration screen, the associated Attorney is added to Patient's Insurance with Insurance Defined as "Attorney".

Note:

❖ *Once the attorney is associated on Patient Registration screen then user has to explicitly click on the Insurance icon which turns red in color*

❖ *On Patient Insurance Screen, Insurance type of Insurance defined as "Attorney" cannot be changed to any other insurance type as the same insurance is linked to Attorney Master.*

Limitations:

- Any modification made to Attorney Master will not be reflected on Patient Insurance screen related to Attorney.
- Insurance record gets added as an attorney only if attorney is added in the PrognoCIS.
- Insurance icon turns red in color only when the Attorney is associated to Insurance and user explicitly clicks on the Insurance icon.
- Attorney keyword will not be displayed on Claims screen if the Claim is already billed to Attorney and then the property enable.attorney.billing is to 'N'.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

- As of now, Attorney address is not mandatory on Attorney Master Screen.
- Existing Attorney records will not get mapped with the Insurance

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117   (408) 873-3032

13 My Health Records App

13.1 Provision to attach document or send reference link from My Health Records App (Patch 138)

Earlier the Patient could attach documents or send reference link from Patient Portal web only. Now, this provision has been given from Patient Portal App i.e. My Health Records as well.

A new Attach Documents icon: has been provided on the Home screen of My Health Records App. A tap on this icon would invoke the screen same as Attach Documents screen on Patient Portal web.

To attach a document:

- The patient has to tap on the *Attach* option, select the *Category* of the document, enter *Subject*, and attach the required document by tapping on *Attach* button.
- It is mandatory for a Patient to select the Category.
- The list of file extensions that are allowed to be attached is displayed in red below the Attach button.

To send a Reference Link:

- The patient has to tap on the *Reference Link* option then on the invoked popup, enter required reference link and notes, and tap on the *Attach* button.

Document List section

- All the attached documents are displayed in this section. It displays information such as Category, Subject, Status, Reason, and Date of the document. To preview any document, the Patient has to tap on the zoom icon: .
- The Patient also has provision to sort the attached documents list in ascending or descending order of Date, Category, or Subject.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

14 Internal

14.1 A new button, 'expResult' has been provided on the Lab Vendor master screen to export Lab result in bulk (Patch 9)

Navigation Goto menu: Settings →Configuration → click on *Lab* under *Vendors* column → select a lab

At times, generating the Lab Result HTML file for huge amount of HL7 Lab Result file becomes a tedious process. Thus to make it easier process, a new button, *expResult* has been provided on the Lab Vendor master screen.

The property, *exportdata.destination.folder* defines a folder used for Export Data. If the file LabResultsOutputForOrderNos.xls is found in the folder defined in the property and a user clicked on *expResult* button then the process will find the Order numbers in the OrderNo column of xls and generate the Result Template Html for each lab result. Then it will be converted to Pdf with the name, OrderNo.pdf and copy the file to the folder mentioned in the property.

14.2 During Lab Result import, only 5 attachments will be imported (Patch 9)

Earlier in Lab Result import, more than 5 attachments could be imported. Now, only 5 attachments will be imported and if the attachments count exceeds the limit then those attachments are ignored and an alert notification will be sent.

14.3 Provision to have consolidated XML file for Claims (Patch 9)

Earlier, for each claim, single XML file used to get generated while running a process. Now, for all the claims, a single XML file is generated.

14.4 In Syndromic Surveillance export, Chief Complaint is now sent in the OBX3.5 field (Patch 14)

Earlier during Syndromic Surveillance export, the Problem Note i.e. Encounter Start Reason in PrognoCIS was sent in the OBX3.5 field. Now, if the Chief Complaint is present then it is sent in the OBX3.5 field else the Problem Note is sent.

14.5 During Lab export, some reserved characters in IN1.4 field are now escaped with new characters (Patch 14)

During Lab export, the following reserved characters are now escaped with new characters in the IN1.4 field which consists of Insurance Company name:

Reserved Character	Escaped with
\	\E\
|	\F\
~	\R\
^	\S\
&	\T\

14.6 MBTA export changes have been made (Patch 17)

MBTA export changes have been made.

14.7 In MU3 Vaccination export, CVX code is now sent in RXA5 field for Vaccines with status as 'Vaccination on this visit' (Patch 18)

Earlier in MU3 Vaccination export, the NDC code was getting sent in RXA5 field for Vaccines with status as 'Vaccination on the visit' and for all other statuses, the CVX/CPT code was being sent.

Now, sending NDC or CVX/CPT code in RXA5 field for Vaccines with status as 'Vaccination on the visit' is dependent on the newly added property, *hl7.export.send.NDC*. If the property is set to Y then the NDC code is sent and if set to N then CVX/CPT code is sent. By default, the property is set to Y.

14.8 Modified the process for eRx Change Request, Cancel Response, Rx fill, and Push messages (Patch 20)

The existing process, *SS_GetERXMessages* has been modified for eRx Change Request, Cancel Response, Rx fill, and Push messages.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

14.9 A new tag has been provided to import Patient Location wise through the process, MbtaDataImportFromXls (Patch 21)

A new tag, PT_LOCATION_CODE has been provided to import Patient Location wise through the process, *MbtaDataImportFromXls*. If this tag is present in the xls and the Client is Multi-location then based on the Location code specified in the xls, the Patient data would be imported.

14.10 The logic of computing Start/End date of Daylight Saving Time is now automated (Patch 21)

Day Light Saving (DST) in United States is the practice of setting the clock forward by one hour during the warmer part of the year (i.e. between March-November) so that evenings have more daylight and mornings have less and setting the clock backward in autumn by one hour to the standard time (i.e. between November-March).

DST Start Date: Second Sunday in March at 2:00 a.m. local time. DST End Date: First Sunday in November at 2:00 a.m. local time.

Earlier, the Start and End date of Daylight Saving Time were manually computed and hardcoded into PrognoCIS. Now, the logic of computing Start and End date of Daylight Saving Time is automated.

14.11 Provision to export Patient's preferred language with code in Vaccination export (Patch 26)

The following new properties have been added to export Patient's preferred language with code during Vaccination export:

- *hl7.export.language.with.code*
- *maptype.export.language.code*
- *hl7.export.language.codingsys*

If the properties, *hl7.export.language* and *hl7.export.language.with.code* are set to Y then only code gets exported.

Note: *Default value of property hl7.export.language.codingsys is HL70296.*

14.12 In HL7 Vaccination export, a new property 'obx3.5.field.supportVISPublish' has been provided (Patch 30)

In HL7 Vaccination export, a new HL7 property *obx3.5.field.supportVISPublish* has been provided.

If the property value is set to Y then the OBX3.5 field will set the VIS publish date (as per ONC 2014) and if the property is set to N then VIS Name and Barcode of the Vaccine is set.

14.13 Provision to import data based on Provider's NPI (Patch 30)

Now, provision has been given to import the data based on Provider's NPI number. If the *docter.rule*/*refdoctor.rule* property consists of the value, 'I' then in the import process it will check Provider's NPI. This property is used in the below mentioned interfaces:

- ✓ Lab Import
- ✓ Radiology Import
- ✓ Appointment Import
- ✓ Charge Import
- ✓ Claim Charge Import
- ✓ Patient Import

14.14 Process to create 'Monthly Claim For Patient Registration' is now executed in Self Scheduled process (Patch 33)

For a specific client, the process to create Monthly Claim For Patient Registration was an independent scheduled process. Now, create Monthly Claim For Patient Registration is moved under Settings → Scheduled Process and the Scheduled Process can be generated from PrognoCIS.

14.15 Process 'shareClinicalDataWithHIXNY' has been added in the common process 'shareClinicalDataWithHIERegistry' (Patch 40)

Earlier, a common process 'shareClinicalDataWithHIERegistry' was used to share CCD to HIE registry and an independent 'shareClinicalDataWithHIXNY' process was used for HIXNY registry.

Now, 'shareClinicalDataWithHIXNY' process has been added in the common process 'shareClinicalDataWithHIERegistry'.

14.16 New HL7 property 'hl7.add.obr13.toComments' has been provided (Patch 44)

New HL7 property *hl7.add.obr13.toComments* has been provided. If this property is set to 'Y', then the 'OBR 13' value gets added in the Report comments.

14.17 Security and performance has been improved in PrognoCIS (Patch 57)

1. Changes have been made in the JSP files to make PrognoCIS more secure.
2. While printing/downloading any file in PrognoCIS, unnecessary appearance of blank window has been handled to improve the performance.
3. Properties *letters.maxfiles.infolder* and *prognocis.resize.applicable* are now read, only once while logging into PrognoCIS instead of reading it for multiple screens.

14.18 SQL queries have been optimized for some tags (Patch 65)

SQL queries have been optimized for the following tags:

- ENC_PROCEDURES_STRLIST
- ENC_PROCEDURES_BULLIST
- ENC_PROCEDURES_NOSLIST

14.19 Vendor account number is now prefixed with Order number in Lab export (Patch 71)

In Lab export, earlier with order number only Prefix was sent. Now, Vendor account number is also sent along with Prefix.

If property *hl7.orderno.prefix* is set to [DOC_VEN_ACC_NO] then in the segments: ORC.2, ORC.3, OBR.2, OBR.3, Vendor Account number is sent.

In Lab import, If property *hl7.orderno.prefix* is set to [DOC_VEN_ACC_NO] then from ORC.2, ORC.3, OBR.2, OBR.3 segments Vendor Account number is removed and then result is imported.

14.20 The properties for datafiles will now be considered on load of PrognoCIS screens (Patch 73)

Earlier, the properties *letters.maxfiles.infolder* and *prognocis.resize.applicable* were read only once while logging into PrognoCIS. Now, the properties will be considered on load of PrognoCIS screens and not while logging into PrognoCIS.

14.21 Provision to save information from CSV file of Inphonite application in the database (Patch 76)

While sending an appointment reminder as a text reminder, Inphonite application creates csv file in response. Now, provision has been given to save the information from csv file in the PrognoCIS database.

14.22 Full year data availability of eCQM measures for 2017 performance period (Patch 76)

The eCQM measures data for entire 2017 year will be now processed as per 2017 performance period.

14.23 A new property 'hl7.lab.createclaims.unsoliciated.results' has been added to create claims (Patch 79)

Earlier, in Lab import, claims were not getting created for unsolicited Lab result (unidirectional lab results).

Now, a new property *hl7.lab.createclaims.unsoliciated.results* has been added. If this property is set to ON then claims are getting created for unsolicited Lab results.

14.24 A new process has been given to delete consolidated files of Lab/Radiology results from 'Datafiles' folder (Patch 84)

A new process 'deleteConsolidatedLabRadResult' has been added to delete the consolidated files of Lab/Radiology results from the 'Datafiles' folder in the backend to reduce the discrepancy of PDF files.

14.25 In Lab export, provision has been given to set default value for 'OBR 13' field (Patch 88)

Now, in Lab export provision has been given to set default value for 'OBR 13' field. A new property *default.value.in.obr.13* has been added to set default value for 'OBR 13' field if fasting status is not present.

14.26 Provision to share CCD documents with GHHC Registry using Web service (Patch 88)

Now, provision has been given to share CCD documents with GHHC Registry using Web service.

In a process of sharing CCD documents with GHHC Registry using Web service following new properties have been added:

- ➢ *hie.registry.OID*
- ➢ *hie.keystore.filename*
- ➢ *hie.webservice.header.host*
- ➢ *hie.webservice.header.contenttype*

14.27 CCD is exported when the appointment is marked as arrived (Patch 121)

- Now, when appointment is marked as arrived, and the properties are present in "HL7AppointmentExport.properties" property file then based on the latest encounter of the patient, CCD file is generated.
- CCD file is generated based upon the value present in the following properties:

  hl7.export.appt.locationcode

  hl7.export.appt.medicid

  hl7.export.appt.enctype

- To export CCD file, a newly added property, *hl7.export.appt.ccd* should be set to 'Y'.
- CCD file is generated and saved to a folder path mentioned in the newly added property, *hl7.export.appt.ccd.path*
- Changes **for CCD bulk import process:**
  - The data will get automatically reconciled to Face Sheet encounter, if there are no encounters present for the patient.

− If there are any encounters present for this patient, then the imported data will be available in the Transition Of Care (TOC) section for Allergy, Current Medication, PMH of the next encounter which will be open or started.

− For Vaccines, the imported data will display on the *Records* tab of Vaccination screen on Face Sheet encounter.

14.28 A new property 'consent.affirm.filename.date.format' has been added (Patch 121)

A new property, *consent.affirm.filename.date.format* has been added to change the date format for Consent Affirmation File Naming Convention. Default value for the property is YYDDD.

14.29 Added rule to export Patient Identifier in AMD Chart (Patch 121)

In AMD Patient export, a new rule has been added to export Patient Identifier in AMD Chart. The rules to be set in the property, *patient.id.rule.4amd.chart* are as follows:

- E - External Id
- A - Account No
- C- Chart No

Default rule of the property is 'C'.

Also, a new property *patient.default.chart.auto* has been added. If this property value is set to Y then And Patient Identifier is blank then AMD chart is set as Auto instead of failing the AMD Patient export.

14.30 A new property has been added to define the rule for generating Patient's User ID (Patch 118)

Earlier the Patient's User ID was generated based on Patient First and Last name. Now, it is based on the newly added property, *login.patient.userid.rule*. Depending on the following value set in the property, the Patient's User ID will be generated:

Value	Description
C	Chart number
D	Date of birth
N	First and Last name

14.31 Data availability of Quality measures for 2017 performance period has been provided (Patch 102)

Full Year 2017 Quality-Claims Data availability Process is been provided. On the MIPS-Quality-Claims screen, instead of showing Pass or Fail, users will get to know about the Denominator and Numerator criteria if it is met or not from January 2017.

14.32 Process that export vaccines using web services has been enhanced to include CARIDE-California State (Patch 101)

The process, *submitCAVaccRecordsUsingWS* to export vaccines using web services, now additionally exports vaccines for CARIDE-California State.

14.33 A new system level property 'doclist.use.storedproc' has been added (Patch 97)

A new system level property *doclist.use.storedproc* has been added. This property is used to list the documents on Document list using **stored procedure** to improve the performance. If this property is set to OFF then old logic (union of all documents query) will be executed.

Please note, if the property is set to ON then the Filter and Clear options would be displayed as disabled and Pagination will not be available on Document List screen of PrognoCIS.

In order to use the above mentioned functionality, property *review.doclist.types* should be set as blank.

14.34 Changes done to incorporate new endpoint provided by Trizetto gateway (Patch 126)

Changes have been done to incorporate new endpoint that is provided by Trizetto gateway for Insurance eligibility.

14.35 Provision to share CCD documents with HIE (NCHC) Registry using Web service (Patch 127)

Now, provision has been given to share CCD documents with HIE (NCHC) Registry using Web service.

14.36 FTUX related performance improvement done at the backend (Patch 130)

Earlier the implementation of FTUX on any screen of PrognoCIS was giving too many server calls to load the data. On every refresh of the screen, the FTUX data was fetched from the server.

Now, the FTUX data of the screen will be fetched in one server call on load of that respective screen. Also, no server calls will be made even if that screen is refreshed or the user navigates to another screen and visits again to the same screen. The server call will be made only in the new session of PrognoCIS or if the browser window is closed.

14.37 New process added to export Patient Demographics details in CSV (Patch 134)

A new process, *ExportPatientDataFromControlXls* has been added to export the Patient Demographics details in CSV irrespective of encounter is present or not.

14.38 During Patient Import, some fields related to Emergency contact are now supported (Patch 134)

During Patient import, when a *MbtaDataImportFromXls* process is executed, following fields related to Emergency contact in xls are now supported:

- PT_EMERGENCY_TEL_CELL
- PT_EMERGENCY_TEL_WORK
- PT__EMERGENCY_TEL_HOME

- PT_DEPARTMENT

14.39 Failure log statements have been added in the ShareClinicalDataWithHIERegistry process (Patch 137)

Now, failure log statements have been added in the *ShareClinicalDataWithHIERegistry* process.

14.40 A new process has been added to recreate procedure print template (Patch 138)

A new process, *recreateProcedureFiles* has been added to recreate newly associated procedure print template for the procedure forms.

Note: *Recreate procedure print template process is applicable only for the templates which are not modified by user.*

14.41 Performance improvement and code optimization has been done for DATE CALC and Review Matrix in PrognoCIS (Patch 140)

Performance improvement and code optimization has been done for DATE CALC and Review Matrix in PrognoCIS.

14.42 While exporting CCD in HIE registry more information is included in CCD file (Patch 145)

Now, while exporting CCD in HIE registry following information will be included in the CCD file:

1. Problems:
   - Problem Id
   - Attending Provider
2. Results:
   - Filler Order Number
3. Medications:
   - Medication ID
4. Encounters:
   - Encounter ID
   - Attending Provider

14.43 Provision to export Lab orders to a Lab vendor in XML format using web service (Patch 145)

Earlier, in HL7 lab ordered were directly exported to FormFox.

Now, in HL7 from PrognoCIS to Lab Vendor, lab orders are exported in XML format using web service and lab vendor will send further to FormFox.

On the Lab Order screen, on click of eSend button order in XML is generated and sent to configured point. If these labs order pass/fail then in both cases acknowledgement is displayed.

Following are the requirement to export lab orders in XML format:

➢ Order should contain one test per order
➢ Through AOE questions, Sample Type, Sample Method, Cut Off Level, Wait Time, Testing Authority information is entered

Note:

Only <createOrdertest> is supported and <updateOrderset> is not supported while exporting lab order to XML.

14.44 In Appointment Export a provision has been given to export Referring Provider details in 'PV 1.8' segment (Patch 150)

Now, in Appointment Export a provision has been given to export Referring Provider details in PV 1.8 segment.

14.45 A new process 'patCaseManagementImportFromXls' has been implemented to import Patient Case management information from XLS file (Patch 150)

A new process '*patCaseManagementImportFromXls*' has been implemented to import Patient Case management information from XLS file.

Following are the fields that are imported from Patient Case Management:

- PCM_CASE_NO,
- PCM_INJURY_DATE,
- PCM_INJURY_PLACE,
- PCM_INJURY_STATE,
- PCM_BODY_PART,

- PCM_FIRST_ILL_FROM_DATE,
- PCM_FIRST_ILL_UPTO_DATE,
- PCM_SIMILAR_ILLNESS_DATE,
- PCM_HOSP_FROM_DATE,
- PCM_HOSP_UPTO_DATE,
- PCM_CANT_WORK_FROM_DATE,
- PCM_CANT_WORK_UPTO_DATE,
- PCM_CLOSE_DATE, PCM_COMMENT,
- PCM_PS_STATUS_ID

14.46 A process 'xmlDataImport4Medica' has been given to import Patient, Clinical and Prenatal data from XML for 4Medica (Patch 150)

A new process *xmlDataImport4Medica* has been given to import Patient, Clinical and Prenatal data from XML for 4Medica.

The data will get associated to the Patients only and not to their Encounters. Data is imported on Patient basis only.

14.47 A new property 'export.icd9codes.in.icd10enc' has been added to export only ICD 10 codes in AMD Charge export (Patch 150)

A new property *export.icd9codes.in.icd10enc* has been added to export only ICD 10 codes in AMD Charge export.

If this property is set N then only ICD 10 codes are exported and if this property is set to Y then ICD9 and ICD10 codes are exported. Default value of the property is N.

14.48 Performance has been enhanced for update scripts (Patch 154)

Now, update scripts performance has been enhanced at source level.

14.49 Progress Note in unstructured CCD file is exported to GHHC registry (Patch 156)

Now, Progress Note in unstructured CCD file is exported to GHHC registry.

14.50 A new column 'PT_EMPLOYER_TEXT' has been introduced to add any Employer while importing Patient (Patch 156)

Earlier, in Patient import processes *MbtaDataImportFromXls*, *UpstatePatImportFromXls* if mentioned Employer was not present in PrognoCIS then import used to fail.

Now, a new column 'PT_EMPLOYER_TEXT' has been introduced. User has provision to enter an Employer in this column. Even if entered employer is not present in the PrognoCIS, import does not fail and the record is imported.

14.51 A new cleanup process has been added to explicitly delete data from the backend (Patch 160)

A new process *constant:deletePatAndEncDataForCleanup* has been introduced to explicitly delete data from the backend.

This process can delete:

- Patient's information
- Patient's encounter related information
- Provider (All providers or few)

Note: *An Email is sent to the user if any data is deleted using this process.*

14.52 On Encounter Close, data is exported in HL7 patient export (Patch 161)

Now, if the property *hl7.export.patient.message.on.enclose* is set to ON then on Encounter Close, data is exported in HL7 Patient export. Also, following fields are exported in HL7 patient export only on close of an encounter:

PV1.19 Visit Date

PV1.44 - VISIT ID

PV1.45 DISCHARGE DATE

Note: Above mentioned fields are exported only on close of encounter in HL7 Patient export.

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

14.53 For OHP registry, Patient MRN/Global Identifier and HIE registry OID is added while sending CCD (Patch 161)

Now, For OHP registry, while sending CCD, Patient MRN/Global Identifier and HIE registry OID is added in CCD file.

14.54 A new process has been added to recalculate the BMI percentile (Patch 162)

A new process reCalculateFormula has been added to recalculate BMI percentile.

This process considers the following parameters:

- Process Constant
- Pool Name
- Test Type
- Test Code
- From Date
- To Dat.

14.55 A new process 'fetchAndImportCCDForTomorrowAppts' has been added to import Patient's data from Clinic to Surgery location (Patch 169)

A Clinic has two different set-up of PrognoCIS for normal Patient visits (i.e. Client database) and Surgery location (i.e. Surgery database). Now, provision has been given to import Patient's data from Clinic database to Surgery location.

A a new process *fetchAndImportCCDForTomorrowAppts* is executed every night, to fetch data in the form of CCD and import it into Surgery database based on below mentioned properties:

1. *ccd.fetch.url* - This property contains URL; from where patient data need to be fetched
2. *ccd.fetch.poolname* - Clinic Database pool name to be mentioned in this property
3. *ccd.fetch.search.criteria* - This property contains below mentioned values:

   F - First Name

173

L - Last Name

D - Date of birth

G - Gender

R - Race

E – Ethnicity

I - External ID

Limitation:

- If any encounter is open then system will not auto-reconcile patient data during import and it will be displayed under TOC section of PMH/Allergy/Current Medication screen.
- If any drug on Current Medication screen have *Upto Date* less than appointment/encounter date, then that drug will be available in *Past Rx* option on Current Medication screen only and not under option *Current*.
- As Patient data is imported a day before appointment date and in case appointment is marked as Cancelled/ No Show, then data still gets imported into Surgery location.

14.56 Performance enhanced for update scripts (Patch 171)

Changes done to enhance the performance of update scripts.

14.57 In CCD export, for Lab or Radiology 'Ordering Provider' information is sent in Results section (Patch 176)

Now in CCD export, for Lab/Radiology **Ordering Provider** information is sent in Results section. Also, in Medications section direction is sent.

14.58 Provision has been given to remove headers from CSV files while importing patients (Patch 176)

In a process *ImportPatientFromFile* Patients from CSV files are imported considering file does not have headers.

Now, for files having headers, a new property *remove.header.row.from.datafile* has been added to remove headers from file and then import Patients.

If this property is set to Y then first row from file is removed and if set to N then without removing first row, file is processed. The default value of this property is N.

14.59 Performance enhanced for update scripts (Patch 177)

Changes done to enhance the performance of update scripts.

14.60 Performance enhanced of update scripts for certain screens (Patch 182)

Changes have been done to enhance the performance of update scripts for below mentioned screens:

- Appointment → Schedule
- Settings → Configuration → E and M
- PrognoCIS Login Screen
- Change Password screens
- Settings → Configuration → OB Master
- Patient → Encounter → OBGYN
- Patient → Encounter → Education
- Patient → Register
- Patient → Register → Pref Pharmacy
- Various Payment screens (e.g. Patient Receipts)
- Patient → Register → Legal Doc → Prognosign
- Process HL7ExtractQuestDatabase
- ARRA DASHBOARD
- Settings → Configuration → Report Design
- Patient → Guarantor
- Patient → Encounter → Surgery
- Settings → Configuration → Vendors → Lab
- Settings → Configuration → Vendors → Radiology
- Settings → Configuration → Vendors → Pharmacy

14.61 Upgraded the jQuery library for some screens (Patch 182)

The jQuery library has been upgraded from 1.11.3 to 3.2.1 version for below mentioned screens:

- Home Screen
- Home → Appointment Tab → Room pop-up

- Home → Open EncTab → Comments
- Home → Appointment Tab → Workflow
- Patient Login Info
- Patient Register
- Patient Alert
- Patient Insurance
- Patient Sibling
- Patient → Pref Pharmacy
- Patient Reminder
- Patient Ins Scan
- Patient Photo Scan
- Patient Notes
- Patient Legal Doc
- Patient Implanted Device
- Patient Case Management
- Patient Billing Notes
- Patient Appointment History
- Patient Deny/Allow Access

14.62 Upgraded the jQuery library for some screens (Patch 184)

The jQuery library has been upgraded from 1.11.3 to 3.2.1 version for below mentioned screens:

- Encounter Tab TOC → Procedure Order
- Encounter Tab TOC → Encounter → Start & Edit
- Encounter Tab TOC → Implanted Devices
- Encounter Tab TOC → Specialty
- Encounter Tab TOC → Allergy
- Encounter Tab TOC → Face Sheet
- Encounter Tab TOC → Document List
- Encounter Tab TOC → Vitals
- Encounter Tab TOC → HPI
- Encounter Tab TOC → Social History
- Encounter Tab TOC → ROS
- Encounter Tab TOC → Physical → Table & Diagram
- Encounter Tab TOC → Machine Interface
- Encounter Tab TOC → Education
- Encounter Tab TOC → Pictures
- Encounter Tab TOC → Order Sheet

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

- Encounter Tab TOC → Lab → Order/Result/Matrix
- Encounter Tab TOC → Prescription
- Encounter Tab TOC → Radiology → Order/Result/Matrix
- Encounter Tab TOC → Dictate Transcribe
- Encounter Tab TOC → E & M
- Encounter Tab TOC → Progress Notes → Progress Notes & Report
- Encounter Tab TOC → Encounter Close
- Encounter Tab TOC → Prenatal
- Encounter Tab TOC → Items
- Encounter Tab TOC → Surgery
- Encounter Tab TOC → Personal Notes
- Encounter Tab TOC → Medical history
- Encounter Tab TOC → Family History
- Encounter Tab TOC → Encounter Close
- Encounter Tab TOC → Current Medication
- Encounter Tab TOC → Encounter Tab TOC → Encounter Close
- Encounter Tab TOC → Vaccination
- Encounter Tab TOC → MBTA WC → Reserve Payments Reports
- Encounter Tab TOC → Encounter Notes
- Review Tab TOC → Face Sheet
- Review Tab TOC → Vital Matrix
- Review Tab TOC → Lab Matrix
- Review Tab TOC → Lab Order List
- Review Tab TOC → Radiology Order List
- Review Tab TOC → Correspondence
- Review Tab TOC → Messages
- Review Tab TOC → Encounter Notes
- Review Tab TOC → Document List
- Review Tab TOC → Legal Document
- Review Tab TOC → Summary of Care
- Review Tab TOC → List of CCD/CCR
- Review Tab TOC → Patients Amendments
- Review Tab TOC → Picture List
- Review Tab TOC → Other Documents
- Review Tab TOC → Fax Sent Report

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

14.63 Performance enhanced of update scripts for certain screens (Patch 184)

Changes have been done to enhance the performance of update scripts for below mentioned screens:

- Appointment → Work Pattern
- Appointment → View
- Patient → Encounter → Assessment
- Patient → Encounter → Order Sheet
- Patient → Register → Contact Tab → Spouse/ Parent → More Button
- Patient → Register → Siblings
- Patient → Growth Chart
- Settings → Configuration →Address Book
- Settings →Configuration → Attorney
- Settings →Configuration → Business Unit
- Settings →Configuration → Holidays
- Settings →Configuration →CPT →CO CPT Button
- Settings →Configuration → CPT →CO Msg Button
- Settings →Configuration → Pref CPT
- Settings → Configuration →Pref ICD
- Settings →Configuration → Pref Items
- Settings →Configuration → Expressions
- Settings →Configuration → Group Type
- Settings →Configuration → Items
- Settings →Configuration → Location
- Settings →Configuration → Medics
- Settings →Configuration → Medics > Workflow Button
- Settings →Configuration → Phrases Type
- Settings →Configuration → Role
- Settings →Configuration → Scheduled Process
- Settings →Configuration → Social History →Test →SNOMED Code field Audit Trail
- Settings →Configuration →Collection Agency (in Billing Module only)
- MU / QPP Reports →QARA Reports →Download button
- Patient portal →Basic Details
- Patient portal →Patient Form
- Patient portal →Document Attach

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

14.64 Changes in HL7 file segments and properties (Patch 185)

1. Value of segment 'RXR 1.1' is now based upon newly added property *rxr1.1.std.route*. If this property is set to 'Y' then RXR 1.1 segment will have standard codes instead of special codes.

2. Title of segment 'RXA-10' is now based upon newly added property, *maptype.title*. If the value is set in the property is Code from the Data Mapping screen, then user defined External Data Value will be sent. Otherwise title as mentioned in PrognoCIS will be sent.

3. Default value of property *pid3.4.field.value* has been changed to 'blank'.

14.65 Performance enhanced of update scripts for certain screens (Patch 189)

Changes have been done to enhance the performance of update scripts for below mentioned screens:

- Schedule Process → AR As on Date
- Patient Insurance→ Preauthorization
- Settings → Configuration → Boolean Result Text
- Settings →Configuration → Data mapping
- Settings →Configuration → DB Analysis
- Settings →Configuration → Pref Family History
- Settings →Configuration → Pref Lab
- Settings →Configuration → Pref Rad
- Settings → Configuration →Employer → Dept
- Settings →Configuration → Employer → User
- Settings →Configuration → Group Types (Long Groups)
- Settings →Configuration → Order Set
- Settings →Configuration → Lab → Tests (Panel Tests)
- Settings →Configuration → Rad → Tests (Panel Tests)
- Settings →Configuration → Lab → Tests (Assign Items button)
- Settings →Configuration → Rad → Tests (Assign Items button)
- Settings →Configuration → QRDA1 Import
- Settings →Configuration → Diagram Pins
- Settings →Configuration → MU/ QPP Settings
- Settings →Configuration → Clinic Protocols
- Settings →Configuration → Sync Conf
- Patient →Register →Patient Notes
- Patient →Encounter → Specialty → Diagram

- Patient →Encounter → HPI → Diagram
- Patient →Encounter → Physical → Diagram
- Patient →Encounter → ROS → Diagram
- Patient →Encounter → Social History → Diagram
- Scrubber Checks
- Process: FDB Import
- Process: FDB Import (Type: PQRS)

14.66 Upgraded the jQuery library for some screens (Patch 189)

The jQuery library has been upgraded from 1.11.3 to 3.2.1 version for below mentioned screens:

- Settings → Configuration → under *Groups* column
  - Group Types
  - Ins Types
  - Marital Status
  - Title
  - Illustrations
  - Classification
  - Family Problems
  - Family Relations
  - Medical History
  - Environmental
  - Food
  - Surgery
  - Phrases Types
  - Boolean Result Text
- Settings → Configuration → under *Clinic* column
  - Group Types
  - Locations
  - Holidays
  - Pref ICD
  - Pref Cpt/HCPC
  - Pref Drug
  - Pref LAB
  - Pref RAD
  - Enc Types
  - In-House Drug
  - Pref Family History
  - Education
  - Scheduled Process

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117 (408) 873-3032

- ○ Download Files
- ○ Receipts Batch No
- ○ Data Portability
- ○ Pref Items
- ○ QRDA1 Import
- ○ NAMCS Export
- Settings → Configuration → under **Users** column
  - ○ Designation
  - ○ Specialty
  - ○ Providers
  - ○ Resource
  - ○ Medical Assistant
  - ○ Clinical Staff
  - ○ Office Staff
  - ○ Ref Doctors
  - ○ Billing Staff
  - ○ Org Provider
  - ○ Ref Org
  - ○ Address Book
  - ○ Doc Loc Regn
  - ○ Purge Data
  - ○ Data Export
- Settings → Configuration → under **Vendors** column
  - ○ Lab
  - ○ Radiology
  - ○ Pharmacy
  - ○ Insurance
  - ○ Employer
  - ○ Items
  - ○ Attorney
  - ○ Ins Adjuster
  - ○ EDI Codes
  - ○ Clinic Codes
  - ○ Business Unit
  - ○ EDI Setup
  - ○ Patient PayPlans
- Settings → Configuration → under **Codes/Drugs** column
  - ○ ICD
  - ○ CPT®
  - ○ HCPC
  - ○ Drug Frequency
  - ○ Stop Reasons

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117   (408) 873-3032

- ○ Vaccine
- ○ E and M
- ○ Custom Appt Status
- ○ OB Master
- ○ Drug State DEA Rules
- Settings → Configuration → under **Workflow** column
  - ○ Complaints
  - ○ Work Flow Event Forms
  - ○ Work Flow Definition
  - ○ Expressions
  - ○ Guidelines
  - ○ Complaint Event Guideline
  - ○ Clinic Protocols
  - ○ Consults
  - ○ Procedure
  - ○ Diagram Pins
  - ○ Order Set
  - ○ MU / QPP Settings
  - ○ Employer Portal Settings
- Settings → Configuration → under **Output Templates** column
  - ○ Progress Notes
  - ○ Forms
  - ○ Patient Signature
  - ○ Preprinted Letters
  - ○ Lab Order
  - ○ Lab Result
  - ○ Radiology Order
  - ○ Radiology Result
  - ○ Prescription
  - ○ Encounter
  - ○ Appointment
  - ○ Billing
  - ○ E-Mail
  - ○ Label
  - ○ Fillable Forms
- Settings → Configuration → under **Report Design** column
  - ○ Matrix
  - ○ Tabular
  - ○ Patient
  - ○ Encounter
  - ○ Appointment
  - ○ Graph

4010 Moorpark Avenue, Suite 222, San Jose, CA 95117   (408) 873-3032

- Patient Forms
- Doctor Forms
- Meaningful Use
- Settings → Configuration → under *Admin* column
  - Role
  - User Role
  - Audit Trail
  - Properties
  - Import Format
  - Data Mapping
  - Login Details
  - Import Log
  - Reminders
  - DB Analysis
  - Query Analyzer
  - UDF Master
  - Sync Conf
  - Diagnostics
- Settings → Configuration → under *Social history* column
  - Category
  - Elements
  - Template
  - Sequence
- Settings → Configuration → under *Vitals* column
  - Category
  - Elements
  - Template
  - Sequence
- Settings → Configuration → under *HPI* column
  - Category
  - Elements
  - Template
  - Sequence
- Settings → Configuration → under *ROS* column
  - Organ Systems
  - Bullets
  - Template
  - Sequence
- Settings → Configuration → under *Physical* column
  - Organ Systems
  - Bullets
  - Template

- o Sequence
- Settings → Configuration → under *Specialty* column
  - o Category
  - o Elements
  - o Template
  - o Sequence
- Settings → Configuration → under *Clinic Forms* column
  - o Category
  - o Elements
  - o Template
  - o Sequence
- Settings → Configuration → under *Lab* column
  - o Category
  - o Tests
  - o Vendor Tests
  - o Sequence
- Settings → Configuration → under *Radiology* column
  - o Category
  - o Tests
  - o Vendor Tests
  - o Sequence