What's New in ECS 10.1.7.0

Index of Topics Covered

MDS

- The nomenclature structure of the MDS assessments has been adjusted. This is to make things clearer as the users look through the list of MDS records. We removed some unnecessary "Not OBRA" or "Not PPS" parts of the assessment names as well as tried to make things clearer when an assessment is being completed for Medicare Replacement purposes.
- A **zoom** feature has been added to the left of the collect button on the MDS screens. Use the up and down arrows to make the text larger or smaller as desired.
- The possibility on the Type of Assessment/Tracking Screen for **"RUG IV Assessment – Medicare Replacement or Insurance Only"** has been renamed and turned off by default. This possibility is rarely needed anymore as most plans are now switched over to PDPM reimbursement.
  - o If your facility <u>does not</u> need RUG IV assessments for Medicare Replacement or Insurance plans, no setups are needed.

- o If your facility <u>does</u> need RUG IV assessments on the old PPS schedule (5-day, 14-day, 30-day, etc.), then navigate to *American Data – ECS > Setup > Settings > Site Settings* and select your facility's site from the dropdown in the upper left-hand corner. Choose the MDS tab and place a check mark in "RUG IV for Med Replacement or Insurance Billing," and click OK to save changes.
- The second Assessment/Tracking screen for when a user starts an MDS has been renamed to **"Assessment Coding."** This is to reduce confusion as prior to this change, both the first and second screen were named the exact same.
- On the MDS Selection Screen, there was a column added in 2019 for **"PDPM Start Date."** This historically displayed only the Medicare Start Date (A2400). However, now that OBRA assessments are also calculating PDPM HIPPS Codes, this column has been updated.
  - o For a stand-alone OBRA assessment, the ARD (A2300) or the admission date (A1600) will display.
  - o For a stand-alone PPS assessment, the Medicare start date (A2400B) will display.
  - o For a combined OBRA + PPS assessment, the Medicare start date (A2400B) will display.

MDS Analytics
- If a report does not find any results, it will pop up a box which states **"No results found,"** to inform the user it has finished searching and has returned nothing.

MDS Manager
- Residents who have not had an MDS completed in 120 days or more will no longer load into the MDS Manager. This will help clean up old or mistaken assessments.
- A user will only be able to use the **"Accept All"** button in the Transmit Panel only if they have rights to create a transmission/batch file in their user group properties.

MDS Report
- The **Save** and **Save As** button have been moved out onto the task setup screen. The task name displays directly on the setup screen as well. These items were completed to streamline the editing of existing MDS 3.0 Report tasks.
- The **Print, Export**, and **Close** buttons have been moved to upper part of the screen.

Survey Reports
- In the 672-survey report, a new column titled **"Last Refreshed"** has been added. This will populate the last date each resident's row was refreshed as well as the username

who completed the refresh. This is to more easily see when a survey report was refreshed and who completed this.

- In the 802-survey report, a new column titled **"Last Refreshed"** has been added. This will populate the last date each resident's row was refreshed as well as the username who completed the refresh. This is to more easily see when a survey report was refreshed and who completed this.
- In the 802-survey report, the vertical headings have been abbreviated so as to no longer take up so much extra space. This is to help in cases where ECS is not fully maximized and therefore have less room for the names and headings to display. The full heading name will continue to be displayed in the Workspace Editor.

System/Site Settings

- In System Settings, the option for **"HIPAA User Security"** has been removed. The only item this checkbox did was to require the user resetting passwords to know the old password when completing the reset. American Data support staff were often guiding users to remove this check mark to complete password changes, defeating the purpose of it.
- In Site Settings, there is a new tab available when viewing a facility at a service level. This tab is titled MDS and currently only has one checkbox in place titled **"Allow MDS."** If this box is checked, a user will be able to start an MDS record on a name within that service. However, if a service has this unchecked, it will not allow an MDS record to be started. This is to prevent the accidental creation of an MDS record on an incorrect site/service combination (i.e., Outpatient or Assisted Living).
  - o Once the update is applied, all sites/services will default with this box checked. To ensure that services that should not be completing an MDS record (i.e., assisted living, outpatient, independent living, adult day services) no longer are able to click into Site Settings and remove this check mark.

User Groups

- In the user group properties, on the rights tab, there is a new option titled **Authorization Delay**. This will allow a facility to setup an authorization delay that is user group specific, rather than only system wide. For example, if a CNA or nurse user typically uses a shared device that is accessible to the public, but a business office manager has a private computer used in their office; these two groups may need different delay settings.
  - o Click into American Data – ECS > Setup > Security > User Group. Double click into a user group that you need to setup the authorization delay on. Enter the number of seconds into the box and click OK to save the changes.

- o If there is a number in a user's group properties, this will override anything that is setup in System Settings. However, if a group has a "0" then the user group will look to system settings to know what the delay should be.

Electronic Sign

- When using the "Multi" buttons to sign out cells, there are several instances where the user is no longer flipped to a blank/exception screen even when an exception topic is linked. Those situations are: if using the multi-sign on cells that are past dates (without also using the "Change" button), signing out future dated cells using the multi-Decline option, or signing out cells that have already been signed by someone else.
- The name of the electronic sign task will display on the tab to distinguish which task is open.
- Within the Sign Backup setups, a user can now set it up to **Print by Filter.** This means that it will group the residents together in separate PDF files based on whichever filter is selected. Prior to this change, a user could only sort by the second filter in the Locate screen.
  - o **SETUP:**
    - Navigate to the Sign Backup properties by going to American Data – ECS > Setup > Sign Backup.
    - Click onto a task to be adjusted and click Edit.
    - Place a check mark in "Print by Filter" and use the drop-down to select the filter to sort by (these options are based on the Locate screen).
    - Click OK to save changes.

Internal Messaging

- There is now a capability to customize the **Subject line** that is sent within internal messages. If a word within a topic is setup with the send property of "Subject," whatever is typed/clicked onto behind that word will appear in the Subject column for any user who receives that message. This better assists in organizing messages.
  - o **SETUP:**
    - On the Toolbar, click onto the Setup icon.
    - Navigate to the Internal Memo/Memo/Messaging topic that these types are messages are written within.
    - Double click onto the word that exists which is used as the "subject" of a message (i.e., Message Regarding, Subject, etc.) to access the word properties. If a word does not already exist, create a new one.
    - Click into the Send tab.
    - Place a check mark in "Subject."
    - Click OK to save changes.
  - o **RULES:**

- If there is no word setup as a subject word within a message, the section/topic will be listed as the subject within the user's inbox. This is how the subject line defaulted before this choice was made available.

General Ledger

- In the Chart of Accounts, if you click Print, you are now prompted if you want to print detail. Click No to get a list of account numbers and descriptions. Click Yes to get a list of account numbers, descriptions, account type, account calculation type, and balance type.
- In the General Ledger Report setup, and when you go to the Ledger icon, you may see a list of account numbers that are not included in the Chart of Accounts or the selected report. There is now a Print button on this list of accounts.
- The same dialog box referenced above will now have additional information about the account to include Description, Account Type, Account Calculation, and Balance Type.
- In the Bank Reconciliation, if a user does not pick a Statement Date, the Statement Date will default to today's date.
- In the Bank Reconciliation screen, you may drag the separator line left or right to make either side of the screen larger or smaller.

Accounts Payable

- In the Vendor Demographics, we have re-arranged the screen so that you see Vendor Name and Vendor No. Vendor No. has been moved to where the Vendor ID was previously found.
- On the Payables/Adjustments screen, in the bottom left side of the screen you will also see the Purpose of the task displayed (Pay Vendors, Apply Debits, Reverse, etc.)
- In Report Maker, we added the ability to pull Vendor No. to a report.
- When you use the Purpose of Reverse (to reverse a payment) the Check No. field will change to say Reference and will automatically populate with the word Reverse. A user can change this if desired.
- When you go to the purpose of Adjustments, the Check No. field will be renamed to say Reference and will be left blank. This will allow users to manually enter in the reason for the adjustment.
- A facility may send payments via ACH. If the ACH file fails, a user at the facility can be notified via email the reason the file failed.

Receipts/Adjustments

- The Month Previous option has been removed from the Receipts/Adjustments Control Screen.

- When the Receipts/Adjustments Screen is launched, there is a new "Please Wait" dialog box and rotating blue circle that appears when the screen is drawing all the lines so that users can see that ECS is still working.
- We have added "Greater Than/Equal To and Less Than/Equal To" fields on the Receipts/Adjustments screen. These fields can be used in conjunction with the Auto-Account. For example, if you want to do Write Offs for all balances less than $1.00, enter 1.00 in the "Less Than/Equal To" field and click the Search button to the right of it, to display all balances $1.00 or less. Enter a Reference, check Fixed Reference, and click Auto-Account. When you click the first line to adjust, ECS will ask what account number you want to use as your adjustment account. Every line you click on thereafter will use the same account number. Click Post All when finished.

Aging

- We changed the printing of the Aging when you print with Notes. On the Aging screen, when you click Print, you can print Notes only if you select Details first. When you select Details and Notes, a Print Preview screen will appear as a new tab, displaying the printout. You may print this or save it as a PDF.

Financial Forms

- The Diagnosis Code fields on the UB04 will check diagnosis codes for the appropriate discipline if the option for Discipline Specific Processing is turned on in the setup. This is helpful, in addition to the Discipline Specific Processing that is used for fields 31-34 on Medicare (B) Type claims, to pull only diagnosis codes associated with the therapy services on the UB04. To use this, Medicare (B) Processing must be turned on in the UB04 setup. The search will check for Revenue Codes in field 42 to determine which discipline related diagnosis codes should appear. If there are multiple diagnosis codes that qualify (for example a resident who as PT and OT in the same month) one of the codes will be pulled.
- We have enhanced the Diagnosis Code fields 21a–21l on the 1500 forms to allow us to pull additional codes. You may now set any/all Diagnosis Code fields on the 1500 to pull Secondary Diagnosis Codes from the Calendar. The fields will not duplicate codes. If the Return to Provider checkbox is checked, these codes will not pull at all. Each field that you want a potential code to pull to must be set up to pull Secondary Diagnosis Code. The order that the codes are pulled cannot be defined.
- We enhanced the processing of field 35-36 on the UB04 so that it will look for the appropriate Qualifying Hospital Stay Dates (code 70). The processing will look for Qualifying Hospital Start Date within 30 Days of the Admission Date on the form. If nothing is found, it will check for a prior discharge date. If the Discharge Date is within 30 days of the Admission Date on the UB04, ECS will go back to the Admission Date

(prior to that discharge) and find a qualifying hospital stay within 30 days of that Admission. It will not populate Qualifying Hospital Stay dates outside of that range.

- When creating Financial Forms, the message presented has changed to assist users with what to answer. The heading of the message now says UB04 or 1500, depending on the form being created. The actual message says "Do you want to create new forms? Click yes to create new UB04 (or 1500) forms. Click no to return to the form screen."

Journals

- When you export the Journals, displaying details, you will see an O for an original next to the Posting Date (which correlates with the green square in journals), an R for Reversal (which correlates with a blue square in the journals), and an A (which correlates with an orange square in journals). These letters/colored symbols represent items that are an original of a reversal, a reversed item, and an auto-adjusted item.

View Calculations

- The View Calculations screen, by default, sorts by Client ID and then Invoice No. We change the sorting so that if you click on a column heading, it will sort in reverse order.

Report Maker/Site Settings

- Within Site Settings, at the Service level, we added a tab called Picture. This allows you to attach a picture to a Service. For example, a logo. You can then add a picture field to a report and have it pull the Service specific picture. Within Report Maker, in a Picture field, there is a new checkbox called Use Site/Service Picture. For example, you may want to put a logo on many reports. If/when the logo is updated, you only must update it in Site Settings and all reports will be updated automatically.

Importing

- There is a new feature, called Document from Table Tasks, that allows us to link multiple Document from Table tasks together. For example, we can link the 3 PT, OT, and ST Therapy Document from Table tasks together so that they can be run at the same time. This can be implemented by any facility who currently imports therapy.
  - Setup Instructions:
    - Go to American Data-ECS>Maintenance>Document from Table Task. (Your User Group will need to be granted access rights by your System Supervisor to use this.)
    - Click New.
    - Enter a Task Name (like Therapy) in the top.

- Click Add at the bottom. Select all talks to be included (PT, OT, and ST) and click OK. Note: You must select tasks that use the same table. The tables are listed on the right of the task list.
- Click OK.
- Select the appropriate Sites/Services that should have access to this task and click OK.
- Select the appropriate User Groups that can have access to this task and click OK.
- Link the new task to an access button on your Therapy access screen.
  - Using the new tasks:
    - From the Main Menu click Ancillary Charges, and Therapy.
    - Click the new access button you created.
    - Click Go.
    - Click Import.
    - A log will appear when all of the services (for PT, OT, and ST) have been imported. If everything imported correctly, the log will display Import Success – No Errors. If there are errors, normal Document from Table instructions apply. Contact American Data's Financial Support Department for questions/assistance.

Other

- A menu option under Maintenance has been created to assist in alarm/IC deletion. If a user were to leave for an extended period and returns to find that they have trouble logging into ECS, it may be that they have too many ICs/alarms within their user profile.
  - TO USE:
    - Navigate to American Data – ECS > Maintenance > Alarm/IC Cleanup Utility.
    - You will be presented with the user list.
    - If needing to only remove ICs/alarms for a specific date range, start by entering in a Date and Date To. If wanting to delete all ICs and/or alarms, no selection is necessary.
    - Highlight a user within the list, and click onto "Remove Alarms" or "Remove IC."
    - You will be prompted with a warning confirming that you would like to delete the alarms/ICs for the selected user. Click Yes.
  - RULES:
    - If no date range is selected, all ICs within the user's inbox and any subsequent folders or outstanding alarms which have not yet been confirmed will be deleted.

- Upon updating to this version, the user group with ID #27 (should be 'ECS System Supervisor') will be given rights to this feature. Users within this group may then grant access to any other user group as well.
- Graph reports will no longer allow a user to edit a blank element group when equations are in use.

Contact Information

Email Addresses
- Signing up for E-mail Lists: CARES@american-data.com
- Clinical Support: clinical@american-data.com
- Financial Support: financial@american-data.com

Phone Number
- General Inquiries/Support: 1-800-464-9942

MDS Nomenclature Changes

The below table details the MDS nomenclature changes which will take effect as of the 10.1.7.x update. The below table is not an all-exhaustive list, but rather provides some examples.

Assessment Type	Existing Name	New Name (10.1.7.x Release)
OBRA Assessments		
Admission	Admission – Not PPS	No change
Quarterly	Quarterly 90/180/270 – Not PPS	Quarterly (1)/(2)/(3)/(4) – Not PPS
Annual	Annual – Not PPS	No change
Significant Change in Status	Significant Change in Status – Not PPS	No change
PPS Assessments		
5-day scheduled	Not OBRA – 5 day	No change
IPA-Interim Payment	Not OBRA – IPA	IPA
PPS Discharge	Not OBRA – Not PPS – PPS Discharge	PPS Discharge
PPS Assessments (for Medicare Replacement)		
5-day scheduled	Not OBRA – Not PPS (5 day)	Not OBRA – 5 day (Med Replacement)
IPA-Interim Payment	Not OBRA – IPA	IPA (Med Replacement)
PPS Discharge	Not OBRA – Not PPS – (PPS Discharge)	PPS Discharge (Med Replacement)
Tracking Records		
Entry	Not OBRA – Not PPS – Entry	Entry
Discharge RNA	Not OBRA – Not PPS – DC RNA	DC RNA
Discharge RA	Not OBRA – Not PPS – DC RA	DC RA
Death in Facility Tracking	Not OBRA – Not PPS – Death	Death
Combined Assessments OBRA/PPS		
Admission, 5-day	Admission – 5 day	No change
Admission, 5-day, PPS Discharge	Admission – 5 day – PPS Discharge	No change
Admission, 5-day, DC RA, PPS Discharge	Admission – 5 day – DC RA – PPS Discharge	No change
Discharge RNA, PPS Discharge	Not OBRA – Not PPS – DC RNA – PPS Discharge	DC RNA – PPS Discharge

Combined Assessments OBRA/PPS (for Medicare Replacement)		
Admission, 5-day	Admission – Not PPS (5 day)	Admission – 5 day (Med Replacement)
Admission, 5-day, PPS Discharge*	Admission – Not PPS (5 day) – (PPS Discharge)	Admission – 5 day – PPS Discharge (Med Replacement)
Admission, 5-day, DC RA, PPS Discharge*	Admission – Not PPS (5 day) – DC RA – (PPS Discharge)	Admission – 5 day – DC RA – PPS Discharge (Med Replacement)
Discharge RNA, PPS Discharge*	Not OBRA – Not PPS – Discharge RNA – (PPS Discharge)	DC RNA – PPS Discharge (Med Replacement)

*Although CMS does not require a PPS Discharge assessment for purpose of Medicare Replacement/Insurance billing, ECS does require this to end the stay on the PDPM Analyzer.