Index of Topics Covered

MDS

- MDS Resumption of Therapy Assessments (OSA only) will no longer include the "R" in the assessment name.
- When printing an assessment, the type of assessment will now be displayed when choosing the sections to print.
- When printing a stand-alone Medicare Replacement assessment or a combined OBRA/Medicare Replacement assessment for "Other Payor," Medicare Replacement start, and end dates will now show up on the printed forms.
- A help pop-up has been added to the section selection options on the MDS Status screen.
- In section "Z" of the MDS, users now have the option to clear out HIPPS codes which have been prematurely calculated for Medicare Replacement assessments.
- The CMS Item Set designators for all MDS assessments and tracking forms have been added in several places, to include:
  - The bottom left corner of the MDS assessment screen as it is being completed (between the MDS type, and Target Date)
  - The Assessment Coding screen
  - MDS Selection Screen
- The Assessment Coding Screen now displays the type of assessment to be created in real time as the user chooses options.

- In the MDS question setup area, on the input tab, X and Y coordinates have been added to simplify accurate linking. Users can now more easily tell exactly where information is coming from in topics where several words are duplicated. For example, in a topic with several yes or no questions, it is now easier to ensure that the correct "no" response is pulling to the assessment.
- The columns within the "MDS Selection Screen" have been condensed to display more information without the need to scroll. Some column names have been shortened to accommodate this.
- In section "A" of the MDS Assessment, A2400B and A2400C, or their Medicare Replacement equivalent fields will now generate fatal errors if completed on an assessment where A0310B =01 or 08, or when A0310H =1.
- There is a new button at the top section "Z" in the MDS. This button states, "Calculate Scores." Choosing this button will allow the user to calculate HIPPS/RUG scores for the assessment. This button has been added for clarity, and the picklist buttons beneath the item numbers for items Z0100-Z0300 that previously served this purpose have been removed.
- When a user starts an entry assessment, item A1700 will now auto-populate. If the last assessment was a DC-RA, and was within the 30 days prior to this entry, it will populate as "Reentry." If the last assessment was either a DC-RNA or was a DC-RA that is dated greater than 30 days prior to this entry, then A1700 with auto-populate as "Admission." Changing the auto-populated selection will result in a warning message to the user.
- In item Z0100BMCR, the text "RUG version code" has been changed to "version code."
- PDPM Mappings have been updated for ICD10 categories, NTA points, and comorbidities.
- PDPM Grouper Version in Z0100B updated to v2.1000 to match CMS.

MDS Analytics

- MDS analytics now provides a simpler way to access QM reports. They are accessible by choosing "Quality Measures" from the drop-down menu.
- MDS Analytics now has a progress bar in the lower left corner, letting users know when it is working.
- The "Medicare Days" report has been temporarily deactivated.
- Title added to the MDS Analytics screen.

MDS Manager

- Assessments can now be opened by double clicking on a resident's name in the MDS manager.
    o Double-clicking on a resident's name in the Held Assessments panel, will open the MDS Selection screen. From this screen, highlighting an assessment and

then clicking "Continue," or double-clicking the assessment name will open that assessment for the user to continue working with.

- o Double-clicking a name within the Transmit Manager panel will open the MDS Selection screen as well. From this screen, highlighting an assessment and clicking "Change" or double-clicking the assessment will open the assessment in a "Change" view, so that the user can make changes to a previously submitted assessment.

Users/User Groups

- Additional search options have been added to the user list under *American Data – ECS > Setup > Security > User.* The new search button in the toolbar on the bottom of the screen can be utilized to search by username, job title, login name, or initials.

Electronic Sign

- In sign tasks that display multiple clients, a header bar will no longer be displayed for clients without any entries.
- Additional help pop-ups have been added in sign tasks setup. These provide instructions for the use of formulas and the Signature Details report.

Electronic Cosign

- There is now a total listed at the bottom of the cosign exception report. This is a total number of entries with at least one cell unsigned on the current task.

Internal Messaging

- In the Internal Messaging inbox, the name of the second column has been changed from "client' to "Names" for program consistency.

Demographics

- When entering Demographics, you can tab from one field to the next, and when you get to the birthda field, you are now able to just begin typing the birthday on your keyboard. You no longer need to click the … button to the right of the birthday field (however you still can if desired.) This was done to improve the efficiency of the data entry.
- In Demographics, the Medicare number has been moved over to the left column, under the Medicaid number. The Client No. has been moved over to the bottom right.

Calendar

- The default font on the Calendar has been increased to 10-point font so that users can see the data better. This impacts what you see on the screen. There is no change to printed/exported reports.
- We get requests to provide a report to show what a resident's payer source is on the date they discharged. Some clients (specifically AR clients) chart what the payer is on discharge, which not only allows for this report to be generated, but also allows ECS to capture revenue on the date of discharge. However, we have added an option to the Calendar so that all clients, even those who do not chart payer on discharge, can generate this report. The new function is called Data on Day Before (which correlates with the payer source on the date before discharge.)
    - SETUP INSTRUCTIONS:
        - In the Calendar, you first want to pick the words that will trigger the calendar to look for the date prior. For example, Discharge Date and/or Transfer Date must be added to the Calendar task.
        - Add the words that are to be counted on the day before. For example, add the Payer Source words.
        - Place a checkmark in the Data on Day Before checkbox on the Calendar control screen.
        - Un-check Show Names Without Data.
        - Save your task.
    - TO USE THIS:
        - Run this task as normal, picking date ranges desired.
        - The calendar report will generate as normal.
        - On the top of the Calendar, click the Data on Day Before button. A new tab called Data on Day Before will be displayed.
        - The report will show total discharges for each resident and count the Total Discharges, plus the totals per payer source. This report may be printed or exported by clicking the associated button at the top of the report. You may switch between the Calendar and Data on Day Before tabs at the top of the screen. Click Exit to close this tab.
    - RULES:
        - The "non-recurring" words will be the trigger words as to what date to look at. The calendar will look at the "recurring" words on the date before the non-recurring words. The Discharge and/or Transfer Date are the non-recurring words in this example, and the Payer Sources are the recurring words, to be counted on the date before they end.
        - Clients who use ECS Clinical and not ECS AR may utilize this functionality but must keep up census in ECS. Residents must have Occupancy Status and Payer Sources charted upon Admission and Re-Admission. Admission/Re-Admission Date, Transfer/Discharge Date

must be charted in addition to Occupancy Status and Payer Source. All 3 pieces are required to be charted for this to work accurately.
- o IMPORTANT:
  - If you are using ECS AR, and want to capture Revenue on the date of discharge for any payer, the additional documentation being done in the Status topic is still required

Receipts/Adjustments

- When reversing a Payment/Adjustment from the Receipts/Adjustments screen, the word "Reverse" will now be populated automatically in the reference. You may edit the reference if desired.
- When posting a payment, using an electronic 835 file, the buttons of Auto-Account, Display All, and Summary have been grayed out, as they are not to be used.
- We moved the Equal and Unequal buttons on the Receipts/Adjustments screen over to the left just to reduce the amount of mouse movement needed on this screen.
- Fixed Reference is now checked by default. We felt that it is more frequently used than not, so we default it to be on. Users may still un-check it if desired.

Aging

- You can export the Aging to include any Notes that have linked to outstanding charges.
  - o TO USE THIS:
    - Run your Aging.
    - On your Aging toolbar, click **Export**.
    - Select **Detail**.
    - Place a checkmark in **Notes**.
    - Click **OK**.
    - Navigate to the location where you'd like to save the file.
    - Enter a **file name** and click **Save**.
    - Open the saved file in Microsoft Excel. Notes associated with an outstanding charge will appear in the last column.
    - Notes displayed on the right-panel on the aging will appear in black text instead of red text. This is just a visual change so that it doesn't appear that the notes can edited.
- When printing an aging with notes, that has identifiers, the identifier information will no longer print at the bottom of the report.
- Notes viewed on the aging will be controlled by the Topic properties. If you would like to see the Notes where most recent is at the topic, change the Topic Property setups to be set to Reverse Chronological Order.

Financial Forms

- On the UB04, when processing, if there were duplicate diagnosis codes found (for example, the same code listed as Primary and Secondary) a warning would appear, placing the UB04 on hold. The duplicate would be removed but the user would need to click Save to clear the warning. In this situation, the UB04 will no longer remain on hold, and ECS will continue to remove the duplicate, saving the UB04 automatically.
- When printing the UB04 or 1500 form, and the form has multiple pages, users can select which page(s) they would like to print. When you click the Print button, select which page(s) you want to print, rather than All.
- A new field was added to the 1500 forms (Field 55) which is called Payer ID. The Payer ID is a code used for sending claims electronically. Field 55 allows us to pull the Payer ID to the form, and then to the electronic claim file.
- We added the ability to link the Insurance fields (found at the bottom of the 1500 form) to the electronic claim file. This allows us to populate information for different insurances for submitting claims electronically.
- In a prior update, we change the processing of field 35-36 to pull more accurate Qualifying Hospital Stay dates. In this update, we changed the processing to look at Qualifying Hospital End Date (rather than Start Date).

Calculating Screen

- If you calculate for one name only, ECS will provide a message asking if you want to process all and put results on hold. This is the exact same message that is presented when you have multiple names selected. This is a change so that users do not have to manually click the Calculate button when they only have one name selected. If you want to look at the screen and manually click Calculate, just click No on the message that appears.

Charge Master

- You can print rates based on a selected date range, to see rates that are effective for a specific period. To use this, load a charge master task.
    - TO USE THIS:
        - Go to American Data – ECS>Print.
        - You may choose to Print All Values, Print Last Values, or Print Date Range. If you select Print Date Range, you can select the period of Today, Current Month, Last Month, or choose a custom Start Date/End Date.
        - Click OK to preview and then print the rates.

Other

- Access Screen setups – we have added Date Override actions to the Action Details of the word properties for access buttons. This was programmed for use with Report Maker reports, Calendar reports, and Journal reports. This allows us to create one report, with default dates, but run the same report for various dates, without creating multiple reports with default date settings. For example, when you have reports that need to be run for Last Month vs Current Month. To set up an access button with the Date Override, in the word properties, in the Action Details, when you have a Report Maker report, or Calendar report, or Journal Report selected, you will see a Date Override section. Select the date period that you'd like the access button to run the report for and click OK to save the setups.
- The American-Data Logo has been updated on the "hide" screen to match other locations in the system.

Contact Information

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