M^CKESSON

Business Performance Services



Medisoft 19 Service Pack 1 Release Notes

February 2014

Produced in Cork, Ireland

Copyright notice

Copyright © 2014 McKesson Corporation and/or one of its subsidiaries. All Rights Reserved.

Use of this documentation and related software is governed by a license agreement. This documentation and related software contain confidential, proprietary, and trade secret information of McKesson Corporation and/or one of its subsidiaries, and is protected under United States and international copyright and other intellectual property laws. Use, disclosure, reproduction, modification, distribution, or storage in a retrieval system in any form or by any means is prohibited without the prior express written permission of McKesson Corporation and/or one of its subsidiaries. This documentation and related software is subject to change without notice.

Publication date

February 2014

Produced in Cork, Ireland

Product

Medisoft[®], Release 19 Service Pack 1

Corporate address

McKesson Corporation 1145 Sanctuary Parkway Alpharetta, GA 30009

404-338-6000

Table of contents

apter 1 - Enhancements	1
Medisoft Clinical Server and Client	1
Encoder Pro	1
Insurance Carrier screen.	3
Diagnosis codes	3
CMS-1500 claim form	6
McKesson Practice Interface Center 2.1	8
apter 2 - Resolved Issues	9

Chapter 1 - Enhancements

This chapter presents a high-level description of the following enhancements to the Medisoft[®] system.

In this chapter

Торіс	See page
Medisoft Clinical Server and Client	1
Encoder Pro	1
Insurance Carrier screen	3
Diagnosis codes	3

Medisoft Clinical Server and Client

Medisoft Clinical 19 SP1 comes with many clinical enhancements. For more information on the new features, see the documentation provided on your installation DVD or at the following Internet addresses:

For customers	https://mckwiki.mckesson.com/pps-medisoft-central/documentation
For value-added resellers	https://mckwiki.mckesson.com/pps-var-central/ medisoft%20and%20medisoft%20clinical

Although both Medisoft Client and Medisoft Clinical allow you to enter two values for Race, Clinical currently only takes an update on the first value.

Encoder Pro

Encoder Pro is purchased separately from Medisoft. Contact your Value Added Reseller for information on purchasing Encoder Pro.

You can now map ICD-10 codes to ICD-9 codes using Encoder Pro and bring back both the ICD-9 and ICD-10 codes to create a new code in the Medisoft Diagnosis table.

- You can create a new code with just an ICD-10 with no ICD-9 mapping.
- You can continue to create a new code with an ICD-9 with no mapping as in previous functionality.

When editing an existing ICD-10 code, you can search and map in Encoder Pro and bring back the mapped ICD-9 to update the record, so your Diagnosis code now has both the 9 and 10.

Prior to launching Encoder Pro on a computer with Windows 8, right-click the Medisoft icon on the desktop and select Run as administrator.

New Icon

There is a new icon on the Encoder Pro screen, the 9 icon. This icon will be enabled when you select an ICD-10 code with an ICD-9 mapping.

Clicking it will open a screen on which you can select an ICD-10 code to map. Tabs on this screen allow you to use either GEM or OPTUM (two different data mapping options) to find and select the appropriate code to map.

ICD9 / ICD10 Diagnosis			
Search for: TENDONITIS	9 😰 🐼 🕫 🦉		
Tabular Hesults	Code Detail: << Previous section : Next section >>		
ICD-9 Vol. 1 ▼ ICD-10-CM			
	Lhapter 13 - Diseases of the Musculoskeletal Sys 🔻		
T26 Peripheral enthesopathies and allied syndromes	M65.242 Calcific tendinitis, left hand		
	M65.249 Calcific tendinitis,		
- M65 Synovitis and tenosynovitis	M65.25 Calcific tendinitis, thigh		
M65.2 Calcific tendinitis M65.20 Calcific tendinitis	M65.251 Calcific tendinitis, right		
M65.20 Calcine tendinitis, unspecified site M65.22 Calcific tendinitis, upper arm	thigh		
🖶 - M65.23 Calcific tendinitis, forearm 😑	M65.259 Calcific tendinitis,		
M65.24 Calcific tendinitis, hand	unspecified thigh		
⊞- Mb5.25 Calcific tendinitis, thigh MCE 20 Calcific tendinitis, lower log	M65.26 Calcific tendinitis, lower leg		
H- M65.26 Calcific tendinitis, lower leg	lower lea		
- M65.271 Calcific tendinitis, right ankle and foot	M65.262 Calcific tendinitis, left lower		
M65.272 Calcific tendinitis, left ankle and foot	leg		
M65.279 Calcific tendinitis, unspecified ankle and foot	M65.269 Calcitic tendinitis,		
 M65.28 Calcific tendinitis, other site M65.29 Calcific tendinitis, and field alter 	M65.27 Calcific tendinitis, ankle and foot		
M60.29 Laiciric tendinitis, multiple sites	M65.271 Calcific tendinitis, right		
	ankle and foot		
Total Matches: 92 See Index listing	HED 777 Laterie tendinitie lett ankle		
Code Searched/ Selected (Source) M65.271 - Calcific tendinitis, right ankle and foot Mapped Code Selected (Target)			
OK Cancel			
Preferences View >> Data Versions Help	Add Print History		

Figure 1. ICD9/ICD10 Diagnosis screen in Encoder Pro

When you click the OK button on the main Encoder Pro screen, the ICD-10 code will be added in Medisoft and it will be mapped to the ICD-9 code.

All current functionality for choosing an ICD-9 or ICD-10 code remains the same. Encoder Pro will only add a diagnosis to the Diagnosis List if you choose a mapped code.

The new code will be added with either the ICD-9 code as the Code or the ICD-10 code as the Code based on the Default New Diagnosis Field on the HIPAA/ICD10 tab in Program Options.

Insurance Carrier screen

Removed date check

When entering a future date in the ICD-10 Effective Date field of Insurance Carriers - Options and Codes tab, you will no longer be prompted to confirm. Previously, you would be asked if you wanted to enter a date in the future.

Diagnosis codes

With Medisoft Clinical, Medisoft will no longer send the Diagnosis table items from Medisoft to Medisoft Clinical due to Clinical enhancements and changes in Diagnosis functionality. To ensure that HL7 messages coming from Clinical do not contain diagnosis codes that do not exist in Medisoft, resulting in errors in Unprocessed Charges, Medisoft will analyze the codes in the messages and add them to the Medisoft diagnosis table when needed, before the charges are added into Unprocessed charges.

Based on the Medical records coding in Clinical, a message may come in with both an ICD-9 and an ICD-10 attached to one procedure, or an ICD-10 only, or just an ICD-9. Prior to updating the charges in Unprocessed Charges, Medisoft will look for an exact match between the code(s) in the message and an existing record in Medisoft Diagnosis table in the following way.

Revised functionality in Unprocessed Charges

Medisoft will process diagnosis codes coming from Medisoft Clinical that appear on the Unprocessed Charges screen in the following way.

- Search for an active code, either ICD-9 or ICD-10.
- If an active code is found, use the first one found alphabetically (numbers come first).
- If no active code is found, search for an inactive code.
- If an inactive code is found, use it and display a warning on the Unprocessed Transactions Edit screen. The inactive code must be manually reactivated.
- If no inactive code is found, add the code to the Diagnosis Code list. If the ICD-10 code exists
 but is not paired with an ICD-9, Medisoft will add the ICD-10 code with an A appended to it. It
 will not update an existing code. So in this example the existing ICD-10 code will not get
 updated with the ICD-9 in the message. Instead, a new code is added to exactly match the
 codes in the message. Codes are not updated since there are multiple ICD-10s and ICD-9
 matches and if an existing code was updated that could incorrectly assign a diagnosis to a
 patient where that code had previously been used.

Example

There is an ICD-10 code O64.1xx0 in the Medisoft Diagnosis screen with no ICD-9:

1	😁 Diagnosis: Obstructed labor		
	Code: 064.1XX0	Save	
	Description: Obstructed labor	Cancel	
	ICD-9 Code: Copy		
	Description:	Encoder Pro	
	ICD-10 Code: 064.1XX0 Copy		
	Description: Obstructed labor		
	HIPAA Approved Inactive Code 📃	e Help	

Figure 2. Diagnosis screen

A transaction with the following codes is sent to Medisoft: ICD-9 = 669.60 and ICD-10 = O64.1xx0. Medisoft will create a new ICD-10 code with an A appended and match the ICD-9 code to it. In addition, the new code O64.1XX0A will appear in Unprocessed Transactions.

😇 Diagnosis:	Obstructed Labor	- • •
Code:	064.1XX0A	C Save
Description:	Obstructed Labor	Cancel
ICD-9 Code:	669.60 Сору	
Description:		Encoder Pro
ICD-10 Code:	064.1XX0A Copy	
Description:	Obstructed Labor	
E HIPA	Approved Inactive Code 📃	<u>e H</u> elp

Figure 3. Diagnosis screen

Codes will be added based on the selection in the Medisoft Clinical Preference: Default New Diagnosis Version field on the HIPAA/ICD-10 tab in Program Options.

Example

The following diagnosis code is going to be added.

ICD-9 = 123.45

ICD-10 = ABC.DE

If Medisoft Clinical Preference: Default New Diagnosis Version field is set to ICD-9, the resulting new code will be as follows:

😑 Diagnosis:		- • •
Code: 123	.45	Save
Description:		Cancel
ICD-9 Code: 123	.45 Copy	
Description:		Encoder Pro
ICD-10 Code: ABC	Copy	
Description:		
🗖 HIPAA App	roved Inactive Code 🦳	<u>e</u> lp

Figure 4. Diagnosis screen

If the Medisoft Clinical Preference: Default New Diagnosis Version field is set to ICD-10, the resulting new code will as follows:

😇 Diagnosis:		- • •
Code: ABC.DE		Save
Description:		Cancel
ICD-9 Code: 123.45	Сору	
Description:		Encoder Pro
ICD-10 Code: ABC.DE	Сору	
Description:		
HIPAA Approved	Inactive Code 🔲	<u>e</u> Help

Figure 5. Diagnosis screen

Note: Descriptions will also be added.

Converting Diagnosis codes

Users who upgrade from Medisoft 19 will NOT have their ICD-10 code fields on the Diagnosis Entry screen cleared. However, users converting from Medisoft 18 or older will have the old Code 3 field cleared. That field has been renamed to ICD-10 in Medisoft 19 and newer.

Revised Initialize Data screen for McKesson Practice Interface Center

The Synch Dx Codes check box has been removed for Medisoft 19 SP1 when practices are synching Medisoft to Medisoft Clinical.

🔓 Initialize Data 🛛 🗙		
Create Master Xfire Synch Files —		
Synch Providers	Last Synch Time:	
Synch Facilities	Last Synch Time:	
Synch Procedure Codes	Last Synch Time:	
	Synch	
Load Patients and Appointments Patients and Appointments Filters Exclude Deceased Patient Exclude Inactive Patients Last Date Seen From	Last Load Time: Last Load Time:	
	Close	

Figure 6. Initialize Data screen

CMS-1500 claim form

Changes for new requirements

The following changes have been made for new and existing requirements.

Box	Box Description	Change on Form
9	Other Insured's Name	For Medicare primary claims:
		If the primary insurance type is Medicare and the EDI Extra 1/Medigap field for the secondary insurance is Y, then Medisoft will print the subscriber's name according to the current rule.
		Otherwise, Medisoft will leave the box blank.
		This excludes the insurance type of Medicaid when Medicaid is the secondary insurance.

Box	Box Description	Change on Form
9a	Other Insured's Policy	For Medicare primary claims:
		If the primary insurance type is Medicare EDI Extra 1/Medigap field for the secondary insurance is Y, then Medisoft will print the policy number according to the current rule, with the word MGAP preceded before the printed value.
		This excludes the insurance type of Medicaid when Medicaid is the secondary insurance.
9c	Reserved for NUCC use	For Medicare primary claims:
		If the primary insurance type is Medicare and the EDI Extra 1/Medigap field for the secondary insurance is Y AND the Plan Name is blank, Medisoft will print the secondary insurance address in the following format on one line.: 1257 Anywhere St. City MD 21204.
		If the EDI/Extra 1 Medigap field is blank or it has a Y and the plan name has a value, Medisoft will leave this box blank.
		This excludes the insurance type of Medicaid when Medicaid is the secondary insurance. Otherwise, Medisoft will use the current rules.
9d	Insurance Name	For Medicare primary claims:
		If the primary insurance type is Medicare and the EDI Extra 1/Medigap field for the secondary insurance is Y, AND the Plan Name field has a value, then Medisoft will print the Plan name value. Otherwise, Medisoft will leave the box blank.
		This excludes the insurance type of Medicaid when Medicaid is the secondary insurance.
10d	Claim Codes	If the primary insurance type is Medicare and the secondary insurance type is Medicaid, Lytec will print MCD preceded by the Medicaid policy number.
11	Insured's Policy Group or	For Medicare secondary claims:
	FECA number	When the secondary Insurance type is Medicare, Medisoft will print the Primary Insurance Group Number.
		All other rules remain the same when this condition is not met.

Box	Box Description	Change on Form
11a	Insured's DOB and Gender	For Medicare primary claims:
		If the primary insurance is Medicare, Medisoft will then leave this box blank.
		For Medicare secondary claims:
		If the secondary insurance is Medicare and the subscriber is not the patient, Medisoft will print the subscriber's birth date.
11c	Ins Plan or Program Name	For Medicare secondary claims:
		When the secondary Insurance type is Medicare, Medisoft will print the Primary Insurance Name.
		All other rules remain the same when this condition is not met.
14	Date Current Illness Injury or LMP	For Medicare primary and secondary claims:
		If Insurance type is Medicare, Medisoft will not print a qualifier in the qualifier section of the box.
		Current rules apply for the date.

McKesson Practice Interface Center 2.1

McKesson Practice Interface Center is downloaded separately from Medisoft.

Medisoft 19 SP1 requires McKesson Practice Interface Center version 2.1. If you are currently using McKesson Practice Interface Center, you must upgrade to the latest version after you install Medisoft. You can find the installation file here:

Version	URL
Medisoft 32-bit	http://www.medisoft.com/MPIC/MPIC-Setup32.exe
Medisoft 64-bit	http://www.medisoft.com/MPIC/MPIC-Setup64.exe

Chapter 2 - Resolved Issues

The following issues were resolved with Medisoft Release 19 SP1.

TD	Application	Description
23802	Core	02-12 CMS 1500 Diagnosis pointers 5-12 will now print on claims with the corresponding letters on the 02-12 CMS-1500 claim form. Previously, Medisoft would only print pointers 1-4.
		Steps to recreate
		 On the Activities menu in Medisoft, select Enter Transactions. The Transaction Entry screen appears.
		2. Enter several procedures with the same diagnosis code but different pointers.
		3. Print the 02-12 CMS-1500 claim form.
		 Verify that the first four pointers for each procedure are listed on each claim line.
23811	Core	Multimedia images will no longer increase in size after being saved. Previously, image sizes were increasing.
		Steps to recreate
		 On the Activities menu in Medisoft, select Transaction Entry. The Enter Transaction screen appears.
		2. Select a patient.
		3. Edit the patient's case.
		4. Select the Multimedia tab.
		5. Check the size of the file MWOBJ.ADM in the Medidata folder for the practice before continuing
		6. On the Multimedia tab, click the New button.
		Click the Load from file button and select the image to upload. Note the size of the image.
		8. Click the Save button after the image has uploaded.
		Recheck size of MWOBJ.ADM file and verify that it has increased by the size of the uploaded file and not more.

23813	Core/Office Hours	Office Hours will no longer freeze when Microsoft Outlook 2013 is running. Previously, it would freeze if the user was also running Microsoft Outlook 2013.	
		Steps to recreate	
		1. Launch Microsoft Outlook 2013.	
		2. Launch Office Hours.	
		3. Verify that Office Hours does not freeze and that you can perform standard functions.	