Santrax® Agency Management and Santrax® Payor Management 6.9.44

Release Date: Thursday, January 31, 2019

UNIVERSAL RELEASE NOTES

The content of the enclosed Release Notes is dependent upon final Quality Assurance validation. If you have any questions or concerns about the content therein, please contact Customer Care at your agency's designated telephone number. The final version will be available in your online library post-release.

Valued Provider:

We are now including all items in the release notes. They may or may not apply to your configuration.
In reviewing the notes below, please refer to the "prerequisites" line which indicates the required functionality, product, or audience associated with the item.
If the functionality is not automatically available, please contact your Sales Representative or Customer Care for additional information.

CLIENT

1. **UPDATED CALENDAR VIEW.**
   Modifications were made to ensure overnight schedules that span two different weeks of service display for the correct day of service when displayed using the calendar view in the client's EHR.
   Prerequisite: None
2. **ADDED NEW HEADER TO SCHEDULE CALENDAR VIEW.**
   Updated the calendar view's header in the *Schedule* section of the client's EHR (**Client** > search and open the EHR> **Schedules**) to display weekly and daily totals.
   Weekly Fields:
   - **Proposed Hrs** - the total **Proposed** (scheduled) hours for the week
   - **Actual Hrs** - the total **Santrax** hours for the week
   - **Billed Hrs** - the total billed for hours for the week
   - **Pay Hours** - the total pay hours for the week
   - **Weekly Authorized Hrs** - the authorized weekly **Total** hours
   - **Auth/Pay Diff Hrs** - the difference between the week's authorized and actual hours

   Daily Fields:
   - **Auth** - the authorized daily limitations
   - **Diff**: **Over/Under** - the difference between the daily authorized and actual hours

   Prerequisite: Authorization Functionality
3. **CLONE ADMISSION MODIFICATIONS.**
   The **Referral No.** field is no longer required when using the Clone Admission functionality.
   Prerequisite: Change Payer Functionality
4. **NPI VALIDATION.**
   Updated the NPI validation process to ensure that when entering a physician on the client's EHR, the NPI entered is 10 digits and meets the NPI format requirements. Select **Save** to validated the NPI. The client's EHR is only saved when the value entered in the NPI field is valid or the field is left blank.
   Prerequisite: None

STAFF

5. **UPDATED COMPLIANCE ITEMS.**
   Modifications were made to ensure that a staff compliance item retains the original date in the **Expires** field when a date is entered in the **Completed** field. These fields are located in the compliance section of the staff profile.
   Prerequisite: None

SCHEDULING

6. SANTRAX MAINTENANCE SCREEN MODIFICATIONS.
Modifications were made to ensure the *Santrax Maintenance* screen's **Bill Hrs** and **Pay Hrs** columns do not support negative numbers or a value greater than 24, when manually edited. An error message displays if the value entered is invalid.
Prerequisite: None

7. SMC REPLACEMENT STAFF MODIFICATIONS.
When a staff member other than the one scheduled uses Sandata Mobile Connect (SMC) to check in and out, for a scheduled visit, the system no longer flags that visit with an 'Unknown Staff' exception. The visit is instead flagged with the 'Assigned Staff Updated by Caller' exception and the visit is automatically confirmed.
Prerequisite: Sandata Mobile Connect

8. AUTOMATIC TRAVEL TIME UPDATES.
Modifications were made to ensure when a schedule qualifies for automatic travel time, the **TT Estimate** and the **TT Pay** fields are calculated and applied correctly to the schedule based on configurations.
Prerequisite: Automatic Travel Time Functionality

9. UPDATES TO SCHEDULING OVERVIEW.
Added page navigation buttons to the *Scheduling Overview* screen's client and staff views (available using the context menu) to allow users to view a large number of results across multiple pages.
Prerequisite: None

BILLING

10. MODIFICATIONS TO THE TAKEBACK PAYMENT CODE.
A new **Takeback** field was added to the *Billing* section of the **System Settings** screen to allow users to choose a default payment code to label takeback payments. The selected code is used to identify takebacks on invoices and the following reports:

- *Aged Invoices-Detailed*
- *Adjustments Receipts-Detail CSV*

Prerequisite: Electronic Remittance Functionality

11. UPDATED MEDICARE BILLING RULES.
Updates were made to ensure that when a Request for Anticipated Payment (RAP) or final claim is created with an ending date on or before 12/31/2018 the value code 85 is excluded from the invoice and the 837 file. Any RAP or final claim created with an ending date on or after 1/1/2019 the value code 85 is included on the invoice and the 837 file. This value code is displayed in the *Supplemental Codes* tab in the invoice.
Prerequisite: Medicare Billing

12. REMITTANCE REPORT MODIFICATIONS.

Modifications were made to ensure all takebacks, received via an 835, that cannot be posted due to no prior payment are identified and labeled on the *Remittance* report for easy reference. These takebacks are not posted but are included in the totals.

NOTE: It is best practice to preview and print/save the report to identify any takeback payments that cannot be posted.

Prerequisite: Electronic Remittance Functionality

13. UPDATES TO THE BILLING REVIEW SCREEN.

Modifications were made to ensure when an NPI number is missing from the client's EHR all associated schedules are flagged with the **Not OK to Bill Reason**, 'Physician missing NPI' on the *Billing Review* screen. A new **Navigate to:** option on the context menu (opened by right-clicking) allows users to quickly change screens and resolve Not OK to Bill Reasons. Hover over the **Navigate to:** option and select **Client** to open the client's EHR.

NOTE: The 'Physician missing NPI' not OK to bill reason, only displays if the account is configured to require a physician NPI.

Prerequisite None

PAYROLL

14. PAYROLL - MASTER RATES DROP-DOWN MENU MODIFICATIONS.

Modifications were made to ensure the full drop-down list displays on the *Master Rates* (Payroll) screen when a user clicks a field on a rate line.

Prerequisite: None

REPORTS

15. ACTIVE PATIENT LIST (DETAILED) REPORT MODIFICATIONS.

The *Active Patient List (Detailed)* report is now the *Active Client Roster with Visit Count*. Modifications were made to improve performance and support a maximum date range of 2 years.

Prerequisite: None

16. UPDATED THE STAFF LIST BY HIRE/REHIRE DATE REPORT.

Added a new **Rehire Date** checkbox to the to the *Staff List by Hire/Rehire Date* report's filters. Select this checkbox to change the **Hire Date From** and **Hire Date To** filters to **Rehire Date From** and **Rehire Date To**. When the **Rehire Date** checkbox is selected, the *Staff List by Hire Date* report name changes to the *Staff List by Rehire Date* and the report output includes a new **Rehire Date** column.

Prerequisite: None

17. STAFF MAILING LABELS REPORT MODIFICATIONS.

Added a new filter, **Staff Status Reason**, to the *Staff Mailing Labels* report. Use this filter to limit the report's results based on the reason for change selected when updating the *Employment Status* located in the *General* section of the staff profile.

Prerequisite: None

18. PAYROLL REVIEW REPORT MODIFICATIONS.

Added a new **Use Export Date** checkbox to the *Payroll Review* report's filters. Select this checkbox to change the **Date From** and the **Date To** filters to **Export Date From** and **Export Date To**. This limits the results based on the payroll export date rather than the date of service.

Prerequisite: None

19. CAREGIVER REPLACEMENT REPORT MODIFICATIONS.

The *Caregiver Replacement* report supports a maximum date range of six months (183 days). When the **Date From** and **Date To** fields span a period greater than six months, the following message displays: "Date range must be 6 months or less."

Prerequisite: None