Release Notes for Automated Medical Assistant (version 12)

(We thank our users who have suggested these updates, changes, improvements, and bug fixes. We always welcome your feedback and suggestions. Feel free to contact us at our toll free number 1-800-815-BILL (2455).

August 28, 2017

Fixed an error in the rendering of taxonomy codes on insurance claim forms.

July 9, 2017

Fixed an issue with Notes field of the risk assessment section of the Progress Note Template. Under some circumstances, when there was more than 2 lines to the note, the remainder of the note was not printing. This is now fixed.

June 7, 2017

Made some tweaks to the Rapid Payments procedure, which is accessible by going to the Main Menu, then clicking Patient List, and then clicking the link at the bottom of the screen.

May 27, 2017

Added fields for Referrer and PtType to the Charges and Payments reports accessible from the Main Menu, and then Reports Menu; and also to the Charges and Payments lists accessible via the Summary Menu and then Period Totals. Adding these fields allows more fine grain analysis.

May 9, 2017

Upgraded the text messaging features. You always had the ability to send a text message to a patient by clicking the TXT link at the end of an appointment row. We have now added the ability to send text message appointment confirmations to all patients shown on a specific day and provider of the Scheduler. To access this new feature, click the TXT Conf link at the bottom left side of the Scheduler.

March 8, 2017

Fixed an issue that was preventing dxcodes from printing on insurance claims in some very specific circumstances. This is now fixed.

March 3, 2017

Fixed a bug in the Unsigned Notes alert screen that sometimes resulted in the patient's name not being displayed on the screen. This is now fixed. ProgressNotes_List_Notes_Unsigned_Xbasic.a5w line 230

February 10, 2017

Revised the Summary Menu, Period Totals, Payments screen – the list will no longer include Carry forwards, and the search fields of Prov and Code now have drop downs so that you can enter a value by just clicking from the dropdown list.

February 9, 2017

Three new tutorial videos have been added to the Help screen. To view these, click the Help link at the bottom right of any page, and look at the videos in the new section called "Videos: New".

January 29, 2017

Electronic Filing Cabinet - Changed the default number of items listed on a page from 12 to 100.

January 26, 2017

Fixed a bug that prevented the Help page from loading. This is now fixed.

January 5, 2017

Fixed a bug in the Message Center which prevented the viewing of more than 10 messages. This has now been fixed: the records per page selector, and the arrow buttons to navigate back and forth through the pages of the lists, has been restored.

November 5, 2016

Fixed an issue with add-on codes that prevented the Fee from being changed once the item had been billed. This is now fixed.

September 17, 2016

Fixed a bug in the 'old' edit appointment screen (accessible from the Scheduler's Month View), where the dxcode field would display incorrect text in certain circumstances.

August 21, 2016

Fixed a bug in Patient Statements that was preventing the Standard Message from printing on the

Patient Statement in some cases. Also, fixed a bug in the marking as billed procedure that prevented it from completing in some instances.

July 30, 2016

Fixed an occasional calculation error in the Split payment procedure of the Ledger that prevented correct allocation in some instances. This has now been fixed.

July 28, 2016

Fixed a bug in the File Upload to Progress Notes feature. In the past, if you entered a new patient, and then entered an appointment for that patient to the Scheduler, and then uploaded a file to a non-clinical tab of the chart, the file upload was being incorrectly recorded on the Scheduler as a clinical note. This was always able to be fixed after the fact by clicking the CN link at the end of the appointment row, but this is no longer necessary. The bug has been fixed.

July 25, 2016

Fixed a bug on the Insurance Aging Reports, where there was not enough room for the entire insured's ID to display on the reports. This issue has now been fixed.

July 13, 2016

Fixed an issue in the Edit feature of the Ledger that was incorrectly preventing you from saving under certain circumstances.

July 9, 2016

In previous releases, if you edited a charge in the Ledger that has an add-on code, and changed the Fee of add-on code, the Insexp was not being computed correctly in some circumstances. This is now fixed.

June 19, 2016

The ability to view ALL outstanding charges for Primary Insurance has been added. To access this feature, go to Insurance Billing, click View on the Primary Insurance row in the Sent but Not Paid Yet area, and the click the View All Unpaid link at the bottom of the screen.

June 8, 2016

Fixed a bug in the Request Integrated Credit Card Processing link, located at the bottom of the Main Menu. This is now fixed and requests will be responded to promptly.

June 4, 2016

The program runs well on Windows 10, Microsoft's latest version of their operating system. However, there are issues with their latest browser, called Edge, their new replacement for Internet Explorer. We have always recommended Mozilla Firefox as the browser of choice for using the software on desktop laptop, or notebook computers. For this reason, we now provide a link on the Practice ID screen to download Mozilla.

June 1, 2016

Fixed an issue with our integrated credit card processing feature, that in some circumstances, caused a Ledger posting error. This has now been fixed.

May 29, 2016

Added an easy way to go from one provider to another on the Month View of the Scheduler. Now, each scheduleable provider is listed at the top of the page, and each is hyperlinked. You then simply click on the provider that you want to display.

May 28. 2016

A change has been made to the Missing Notes List. In the past, if you needed to create a note so that a charge could be billed, but that really did not require a detailed note, you could click the NoNoteNeeded link, and a note would be created that said 'No Note Needed'. That link has now been renamed to 'QuickNote'. Clicking this link will create a free form note with a title of 'Quick Note', and the body of the note will simply list the Svcode with its description. For example, if the Svcode is RECDS and its description is Records Request, then the note will simply say 'RECDS – Records Request.'

May 25, 2016

Many speed enhancements have been made, particularly the speed of loading the main menu, and the alerts (accessible by clicking the red 'You have alerts – Click here to view' link at the bottom of the Main Menu. This is still in beta so please let us know of any issues that you encounter.

May 18, 2016

When you enter a new appointment to the Scheduler for a particular provider, the program has always automatically added that provider to the patient's assigned provider's list. Now, the supervisor (if any) of that service will also be automatically added.

Fixed a bug in the New Appt pop-up (first row of links) screen on the Scheduler. The Svcode field was designed to have a progressive lookup, accessible by clicking the upside down triangle. That means that to select a code of 90806, for example, as you type 9, the list narrows to codes starting with a 9; then when you type the 0, the list now contains codes beginning with 90, and so on. This was not working, but is now fixed.

Due to performance issues, the functionality of the View link for the Primary claims that were sent but not paid yet, on the Insurance Billing screen, has been slightly modified and optimized. The ALL PATIENTS option has been removed, so that the first step is to select the patient that you want to work with. This provides a much faster load time of the resulting list. Then, when you save your changes, your are quickly returned to the Patient Select screen, so that you can select the next patient to work with. The overall effect of this change is a significant improvement in speed and efficiency.

May 13, 2016

Fixed a minor bug on the Print Patient Statements screen, where the Last Statement Date was not displaying correctly. This is now fixed.

May 10, 2016

Made changes to the New Referrals screen, accessible by clicking the New Refs link at the bottom of the Patient List screen. You can now view or change the Account Notes and Financial notes by clicking the Notes link at the end of any row. Also, you can change the Status for a patient from NewReferral to Discharged if you have Admin privileges; otherwise the list will just display the Status without allowing it to be changed.

Added more security: Only users with Admin, Biller, or Scheduler privileges can view the schedules of all providers. Clinicians can view their own schedule but not the schedule of other providers. Also, for clinicians, the Change Date / Prov links have been renamed to Change Date, and the Day, Week, and Month views are still available to clinicians, but limited to their own schedule.

May 9, 2016

Anyone can access the notes list, and/or create new notes. However, only the clinician or supervisor of the service can sign, delete, or unsign the associated note.

Admin has access to everything-permissions cannot be over-ridden

Added a link, Revert to Roles, which will clear out all special permission overrides and provide access consistent with the assigned role or roles

Patient List – clinicians and supervisors only can see patients that have been assigned to them. - this occurs automatically whenever an appointment or charge is entered where they are either the rendering or supervising provider, or when an admin or supervisor manually assigns a provider to a patient

Added alphabet button search to the Patient List Find screen, accessible by clicking the Patient List Find link at the bottom of the Patient Select screen.

May 7,2016

Tighter control over who can see or access various aspects of the software. Only users with Admin privileges can see all graphs. Clinicians can see some graphs, but only for data that pertains specifically to them. The same is true of reports.

A change to Permission over-rides, where only users who have the role of Admin can access the Admin Menu. In the past, an Admin could grant specific access to the Admin Menu for any user, and also could inadvertently block themselves out of the Admin menu. This has now been changed. There is also now a new function that allows an administrator to display a screen of all active (not locked out) users and change their permission over-rides all on one screen. To access this feature, click the Permission Over-rides link at the bottom of the Users Permissions screen. This link will only be visible to users that have the role of Admin.

May 1, 2016

Made some subtle improvements to the Ledger to make it more readable. Also revised the PQRS screen that appears if you click on the Yes or No in the PQRS column of a charge on the Ledger. The screen now has drop downs showing available PQRS codes. To add more PQRS codes to the library or to 'Pull in some common PQRS codes', go to the Main Menu, click Practice Setup, and then click Svcodes List.

Added major enhancements to the Graphs, accessible by clicking the Graphs link from the Main Menu. There are now more graph types, and they are far more dazzling. They have been rewritten in JavaScript, as opposed to Adobe Flash, which means that they now work on all mobile devices, and render much more quickly. Pie charts are now clickable, meaning that if you click on a pie slice, it will slide out a bit, making it more distinct from the rest of the pie. All graphs can now be exported to JPEG, PNG, PDF, or Vector image files which means that they can be printed to your printer. Simply click on the upside down arrow at the top right of the chart to see these options.

April 29, 2016

Fixed a bug in the entry of a new responsible party on the Patient Information screen. Previously, it was possible to enter the same responsible party more than once for the same patient. This has now been fixed.

Also, the various pop-up screens have been made more uniform and open at top left so that they work better and fit better on mobile devices.

April 26, 2016

Made significant enhancements to the Insurance Billing screen, and Ready to Send screen. Added the

ability to change which Practice Name, NPI, and Tax ID will display in Box 33 of the HCFA. As always, you can still do this through Practice Setup, but now you can also do it from the Ready to Send Screen, by clicking the PtInfo link at the end of any charge row. Also, every column now has extensive bubble help which you can view by simply hovering your mouse over the field in any column. All of this information is also in the context sensitive help, which you access by clicking the P or ?? links at the bottom of the screen.

Made a minor improvement to the Add New Provider screen, accessible via the Admin Menu. After entering the new provider's first name, last name, and, optionally, middle initial, the Prov field will now automatically suggest the initials for the new provider. For example, if the new provider's name is John A. Smith, the Prov field will automatically be filled in with JAS. This can be overridden if you wish.

April 24, 2016

Added the two colors from the top of the new AutomatedMedicalAssistant.com site to the list of choices for the software's background color changer.

Fixed a bug on the edit appointment screen, accessed by clicking the Edit link at the end of an appointment row on the Scheduler. Specifically, if you had set the 'Limit Codes to Superbill' option to Yes on the Practice Preferences menu, then the CX, L/C, L/C 0, NS, and NS 0 links would not work unless you also set those 5 codes to appear on the Superbill. This issue is now fixed.

April 22, 2016

Fixed a bug that would sometimes prevent adding a new provider. This is now fixed.

April 18, 2016

Some improvements and some minor bug fixes have been made to the Patients Discharger and Patients Archiver links, accessible from the Admin Menu. In some cases, certain calculations were inaccurate. This has now been fixed. Also, you can now view all of the patient's appointments from the Discharger, and you can view he patient's Ledger from the Archiver. These new links help you in deciding which of the patients you want to discharge and/or archive, respectively.

April 17, 2016

There is an enhancement to one of the Scheduler reports, specifically the Print Pt List report, accessible by clicking the Print Pt List at the bottom of the Scheduler. This report list all active patients in alphabetical order, and lists the appointments for each patient within the date range (default is the week containing the date of the currently displayed day of the Scheduler) that you specify. It also displays the txplan, e.g. 'sees GT 2x.wk for ind tx'. The latter is typically defined on the Patient Information screen. We have now given you a link, called 'View patient status, tx plan, most future date'. This makes it easy for you to change the txplan, and discharge patients that are no longer being seen and therefore exclude from this report). The report makes it very easy for your front desk person to be sure that all patients are scheduled appropriately

Also, due to many requests, reverted back to the original version of the Electronic Filing Cabinet, with some tweaks and enhancements.

April 16, 2016

Significant enhancement of the Split Payments procedure. When you click the Split link to the right of a payment, instead of going to a separate page, a grid pops up right on the Pyts/Adjs screen. This makes it much easier to see what you need to do. Also, only open charges are shown, again making it much easier to see what needs to be done.

Also, made some minor changes to the Change Date / Prov link at the bottom left of the Scheduler. A spelling error in the title has been fixed. Also, the Date field is presented first, before the Provider field, and the Date picker appears as soon as you enter or click in that field, instead of having to click on the Date picker icon.

Further tweaks were also made to the Progress Notes, making them more readable on tablet and mobile devices.

April 15, 2016

A modification has been made to the Change Payors screen, accessible by clicking the Change Payors link at the bottom of the patient's Ledger. A new requirement has been added that assures that a payor must be assigned to a charge if the expected amount is greater than zero. For example, if a charge has been set up to have a primary insurance expected amount of, say 20.00 (i.e., i1exp>20.00), the the Change Payors screen will give you an error message if you attempt to save the data without specifying a primary insuror for that charge.

April 14, 2016

A new link has been added to the bottom of the Print Patient Statements screen, called 'Patients who owe money and have not paid in last 90 days', which provides a list of patients who owe money but have not paid anything in the last 90 days. Their phone numbers are included, making it easy for you to follow up on these accounts.

April 12, 2016

New patient evaluation appointments (90801, 90791, and 90792) have a gold background on the Scheduler so that they are easily distinguished. Now, these appointments are also distinguishable on the Month View of the Scheduler. Such new patient appointments are prefixed by a capital, bolded letter N, such as:

N-02:00 pm Smith-?

which identifies a new patient evaluation of Smith at 2:00 pm, for whom no note has been done as of yet.

Also, upon request, the Fast Scheduler has been restored to its original version.

Finally, added a link to the bottom of the Main Menu for these Release Notes. We recommend that you check these daily for any new features, updates, or bug fixes. The notes will always have the most recent entries listed first, so that if you keep up with this on a regular basis, you will only need to read the most recent entries. Having them accessible on the Main Menu makes this very easy to keep up with.

April 11, 2016

Some modifications have been made to the Fast Scheduler, accessible by clicking the Fast link at the bottom right of the Scheduler. The row expander, indicated by the plus sign to the left has been removed, as it is very rarely used and had a negative impact on overall performance. The Fast Schedule was never intended to be a full replacement for the main Scheduler, but rather as an alternative way to quickly enter appointments; quickly edit the major details of a day of appointments at once; and to delete one, several, or all of the appointments of a day at once. These latter functions remain, at the request of many of our users.

April 10, 2016

Made a significant change in the Patient Aging Reports. In the past, only charges that had been previously billed to a patient were included in the Patient Aging Reports (account summary; and account summary grouped by patient type). This led to confusion on the part of some users since the Ledger balances would not always be equal to the balances shown on these a/r report, unless patient statements were run and Marked as Billed. This has now been changed so that the ledger balances will always match the Patient a/r reports (including the Patient aging report, Patient aging grouped by patient report, and Open Items for patient report).

The aging reports include all non-archived patients. Also, the report now will have a notation under an account if the patient has been referred to outside collections (indicated by setting the InColl dropdown to Yes on the Patient Information screen).

We have now also included a new feature called 'Patient Archiver', accessible by going to the Main Menu, clicking Admin Menu, and then clicking Patient Archiver. This shows a list of all patients that have had their Scheduling Status changed to 'Discharged' and whose account balance is zero. You should get in the habit of archiving patients that are no longer being seen (i.e., their scheduling status is 'Discharged'), and for whom there is no further billing or collections to be done (i.e., their account balance is zero). Once a patient is archived, they will not appear on Aging reports, as there balances are zero, but they will be included in other reports on the Reports Menu.

Similarly, there is also a new link on the Admin Menu, called Patient Discharger, which will provide a list of active patients that have not been seen in the past 90 days. The list allows you to discharge one or many patients at once. Doing so, will streamline (reduce) the list of patients that you will see on the Scheduler.

April 9, 2016

Made significant improvements to the Print link on the patient ledger. Previously, there were three print formats available. There are now seven. The first three are essentially the same as before, but the print-outs have been made significantly easier to read. The next 3 reports are: charges (really a type of statement), payments, and a statement report. The latter 3 have been added to provide still other ways to print statements for patients, and to provide lists of payments or charges for patients who may need them for submitting to their own insurance carrier, or to their accountant at year end. Finally, the last report is the Primary Insurance form that was formerly accessible by clicking the HCFA link at the bottom of the ledger. It is more convenient to have it here.

Also, because this is a feature that is used very frequently, the option to go directly to the Print screen of the Ledger has been added as another option on the Patient Select screen. The option is called Ledger Print. And the Select Patient link has also been added to the bottom of the Print screen. These additions make it easy to go from patient to patient, printing whatever ledger report, statement, or HCFA form you may need.

The Statement link remains on the bottom of the Ledger for users who still wish to print those statement types. The Mark as Billed function has been removed from this screen. If that function is desired, then you must print patient statements from the Print Patient Statements screen accessible from the Main Menu.

The HCFA and Fin (to create finance charges) links have been removed from the Ledger bottom.

April 5, 2016

The New Referrals screen, accessed by clicking the New Refs link on the Patient Select screen, has been fixed and updated. There was a bug that showed patients on the list that were not actually new referrals, as they did have an appointment or charge.

Also, you can discharge patients from the list. The list also shows their phone numbers and there is a link to the scheduler. These additions make it easy for you to call New Referrals that have not yet been scheduled, and then access the Scheduler to make the appointment while you are on the phone with the patient.

Also, fixed a bug in Split Payments. When applying payments to individual charges, the screen would jump. This is now fixed. Also, the Split Payment screen, by default, showed all charges, regardless of whether the charge was still open (i.e., still had a balance). This can lead to very long lists which can be difficult to navigate. That is still the default behavior, but you now have the option to narrow the list to just charges where an amount is still owed. To do this, select the >0 option in one of the drop-downs, and then click Search.

April 3, 2016

Made significant improvements to the Period Totals lists, accessible by going to the Main Menu, then

clicking Summary Menu.

After filling in the desired date range, and the Provider (or leave blank for all providers), you select Charges or Payments from the dropdown, and then click Submit.

For the Charges screen, there is now a search on the top that allows you to narrow the list by any patient, Prov, Svcode, Primary Insco Name, Secondary InsCo Name, Tertiary Insco Name, RespName, or Dx. This is a very powerful function: If you want to see how much you charged for any patient within a date range, or how much you charged for any type of service such as psych testing, or for any particular diagnosis, or for any particular insurance company, or any combination of these, just fill in the blanks and click Search. For the Payments screen, you can search by patient, ID, provider, or type of payment or adjustment.

Also note that a ViewNote link has been to each row of the Charges screen where that charge has a signed note attached to it. This feature provides a convenient way to print all notes for a particular date range, or for a particular patient, or a particular insurance company, or whatever you need. Also, remember all columns are sortable so clicking on the column title will sort the list first in ascending order, and then in descending order.

April 2, 2016

Rapid Payment Entry has been vastly improved and debugged. This function is accessible from the Patient Select screen. To use this feature, click the Rapid Payment Entry link at the bottom of the Patient Select screen. You then enter deposit date on the first screen, which will be the default payment date for all payments that you will enter. Click Submit to proceed to the next screen. You now select the first patient that you want to post a payment to. The charges for that patient will now appear below their name. Click the charge you want to post to and click Submit. You now are taken to the familiar Posting Payments screen. Post your payment, and any adjustments. When done posting for that charge, click Return to Rapid Payment entry on the bottom of the Payments screen. You will be returned to the Rapid Payment entry screen. If you have another payment to post to a charge for that same patient, then select that charge from the drop down by clicking on it and click Submit. You will again be taken to the familiar Posting Payments screen. Post your payment (and adjustment if any), and again click Return to Rapid Payment entry on the bottom of the screen. If you want to post a payment to a charge for another patient, select another patient by clicking on their name, That patient's charges will now be in the dropdown below the name. Continue in this fashion until all the payments are posted. You can click the View Payments link at any time to check on the payments you have already entered. And you can use that link when you are done to be sure the payments you have entered match your deposit ticket. A

April 1, 2016

Revised Practice Preferences screen, adding a tab for New Patient Entry, allowing you to define the common values you would like to start with when adding a new patient. To use this feature, from the Main Menu, click Practice Settings. Then click Practice Preferences. On the Practice Preferences screen, click the tab at the top that says New Patient Entry. Fill in whatever fields you want. From now on, when you add a new patient, the values you entered here will be automatically filled in for you, and of course, you can override them if you wish at that time.

March 29, 2015

Added NPI Registry link to the bottom of the Referrer screens, allowing you an easy way to find the NPI of a referring physician. To use this feature, just click the NPI registry link at the bottom of the Referrer List screens.

March 28, 2016

The Timely Filing screen has been upgraded. This feature is accessed by clicking the Timely Filing link at the bottom of the Insurance Billing screen. The screen shows charges and appointments where the date of service is more than 30 days ago, the primary insurance balance is greater than zero, and the charge has not been billed yet. The screen serves as a useful reminder so that you can avoid lost revenue because of timely filing issues. Also, for any charges in the list, there are links to go to that patient's Ledger or to the Pyts/Adjs screen for that specific charge, making it easier for you to investigate the specifics of the situation for that charge and take appropriate action. For any appointments in the list (i.e., appointments that have not yet been converted to charges), there is a link to go to the Scheduler for that appointment's specific date and provider, again allowing you to investigate the specifics of that appointment and take appropriate action.

If you post one appointment at a time, which may be convenient at times, you do run the risk of forgetting to post some or many prior appointments, and thus they will not get billed. We recommend the Post Appts link at the bottom of the Scheduler, which will post ALL appointments up through the currently displayed date, thus guaranteeing that you will never forget to post any appointments. If you do prefer posting one appointment at a time, we recommend that you still run Post Appts at regular intervals, say weekly or bi-weekly, to be sure that you do not forget to post any prior appointments, thereby avoiding timely filing issues. You can also run the Timely Filing function, described above, as an additional safeguard.

March 29, 2016

On the clearinghouse reports screen, accessible by clicking clearinghouse reports on the insurance billing screen, we have now given a link providing the ability to archive old clearinghouse reports, with options to archive any reports that are older than 7, 14, 30, 60, or 90 days.

March 26, 2017

Changed certain aspects of the patient billing screen, including changing the statement message link to Dunning messages, and also added a link to produce a list of all patients in the practice, with an opportunity to enter individual messages for each patient that you want printed on the bottom of the patient statement. Also added bubble help to most of the links on the bottom of the patient statement screen.

March 25, 2016

Added a new link at the top of the Svcodes List, allowing you to pull in some of the most common PQRS codes. To access this feature, go to the Main menu, click Practice Settings, and then click Svcodes List. You will see a new yellow link at the top of that screen. Click it to pull in the common PORS codes.

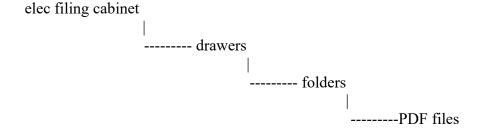
March 20, 2016

Made numerous changes to various screens so that they appear optimal on tablet devices. This includes significant changes to the Scheduler, the clinical note features, positioning of lookup tables, and a variety of other issues.

March 18, 2016

Upgraded the Elec Filing Cabinet. Previously, you could create an unlimited number of folders, and put an unlimited number of PDF documents into those folders. We have now added the concept of groups, which is analogous to a drawer in a filing cabinet. So, now think of the electronic filing cabinet as an unlimited number file cabinet drawers, into which you can place an unlimited number of folders, and into those folders, you can place an unlimited number of PDF files.

Think of this as:



March 15, 2016

Changed the Charges and Payments reports to allow only printing of a maximum of 31 days, due to excessive demands placed on the servers. This is sufficient in most cases as most users rely on these reports to produce daily, weekly, or monthly Charges and Payments reports. However, if you are in need of viewing charges or payments for a larger date range, (such as the need to see annual totals at the end of a year), you can still accomplish this by using the Period Totals feature, accessible from the Main Menu, then click Summary Menu, and then click Period Totals.

March 14, 2016

Fixed a bug in the Patient Statement marking procedure where a copy of the statements was not being properly saved to the billed date link in the patient's ledger. This is now fixed.