

RELEASE NOTES: 07/18/2024.**Monthly Service Pack – SC.CORE.6.0_1.23.000.2406.013****Executive Summary:**

1. The 'Start Date' and 'End Date' are added to Advanced Claim Formats for Plan pop-up. This will help customers to bill for two companies/payers out of SmartCare for different date ranges. (EII #126904).
2. The 'C-SSRS Risk Assessment Lifeline Crisis Center' document is implemented and this is intended to establish a person's immediate risk of suicide and is used in acute care settings. (EII # 128041)
3. When a problem is marked as discontinued in the 'Select Problems' pop-up, the progress note will be updated with an addition of the word "-D/C" beside the problem which has been discontinued. (EII # 127087)
4. The 'Case Rate List' and 'Case Rate Detail' screens are implemented. This Case Rate Detail and List page will help the staff to add case rate setup records to indicate how the services are going to be bundled and their criteria. And also, it would define the Procedure/Program/Location/Duration for the newly created Case Rate services. (EII # 126094)
5. Added the 'Allowed To Open Directly' field in the 'Screen Detail' page. This allows the users to search for a screen by the 'AllowedToOpenDirectly' checkbox rather than the use of QuickLinks. (EII # 127585)
6. A new column 'DispensedDateTime' is added to MedAdminRecords and MATRedispenseDetails tables to store Dispense Date and Time upon Dispense and Re-dispense of a medication. (EII # 127428)
7. A new document 'Eating Disorder Examination Questionnaire- EDE QS' is implemented to capture the Eating Disorder information. The 'Users/Clinicians are filling out form via paper document and scanning it into client's chart earlier. (EII # 126234)
8. Implemented additional Co-signer functionality when a Co-Signer (Staff/Client/Guardian) declines to sign. So, the original author will now receive a new version of the Document/Service Note if the Client/Guardian has declined to Co-sign it. (EII # 127471)
9. The 'CK Editor' is implemented on the DFA Editor screen to format the form item labels of the DFA document. (EII # 125296)
10. The [Staff](#) Dropdowns are changed to 'Typeable search box' based on the System Configuration Key '**DisplayStaffAsTypeableSearchTextBox**':
 - The 'Staff' dropdown is changed to a 'Typeable search box' for the 'Staff Details' screen and 'Provider Staff Details' screen to improve the System performance. (EII # 128209)
 - The 'Staff' dropdown is changed to a 'Typeable search box' for the 'Inquiry Details' screen to improve the System performance. (EII # 127689)
 - The 'Staff' dropdown is changed to a 'Typeable search box' for the 'Scanning' screen to improve the System performance. (EII # 127688)
 - The 'Staff' dropdown is changed to a 'Typeable search box' for the 'Contact/Flags/RWQM widget' to improve the System performance. (EII # 128210)
 - The Staff drop down is changed to Typeable search text box in the 'Coverage' screen to improve the System performance. (EII #128306)

- The Staff drop down is changed to Typeable search text box in the 'Program Assignment' screen to improve the System performance. (EII #128226)
11. A of new configuration key 'ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs' – is implemented to hide and show SNOMED code and descriptions in UI and PDF. (EII # 125541)
 12. The programs are associated while creating a flowsheet through the Whiteboard, regardless of what type of flowsheet the user selects while adding the details. (EII # 128146)
 13. A 'Health-Related Social Needs Screening Tool' document with required field validations is implemented. This is required for CCBHCs and SDOH quality measure reporting. (EII #127176)
 14. The Changes are done to display service notes in the 'Assignment Types'('Documents - To Acknowledge', 'Documents - To Be Reviewed', and 'Documents - To Co-Sign') under the 'Caseload Reassignment' list page. (EII # 128113)
 15. A new 'Initial Crisis Service' Checkbox field is added to the 'Procedure Reporting' tab. This is to ensure that no conflicts occurs when designating a procedure as a crisis service, where the field "Crisis First Contact" Date and Time should appear on the 'Service Detail' Screen. (EII #128328)
 16. To display all flags a client has assigned in the flag column in the Schedule or Primary Care Schedule widget. (EII #127082)
 17. Added new field - BMI percentile (child and Teen) field in the Vitals template of Flowsheet. This is because the Children require a different measurement of BMI - Percentile, which is necessary for CCBHC and Meaningful Use reporting. (EII #123772)
 18. Addition of 2 fields ('Client first communicated issues related to current crisis Date' and 'Time') to service screens when procedure type 'crisis' is checked in Code Details page. (EII#127172)
 19. The Add Flow Sheet and Select Template drop down selections fields are changed to the searchable dropdown fields in Flowsheet screen. When there are a huge number of templates that load into the flowsheet selection field, the ability to mark templates as favourites will let users access their frequently used templates at ease. (EII #127513)
 20. The current Surescripts medication history functionality is not ideal for some scenarios where customers do not schedule appointments. Because it creates time lags and patient safety issues depending on the patient's condition upon admission to the facility. So, the medication history processing has been updated/modified so Medication Orders can be given with the latest information available to improve patient safety. (EII#126349)
 21. A new 'Obsessional Compulsive Inventory-Revised' document is implemented. This is to calculate the 'Total Score' by adding the item scores based on a five-point Likert scale ranging from Scale-0 ("Not at all") to Scale-4 ("Extremely"). (EII#126881)
 22. SmartCare uses matching criteria to determine which Rate Code to display on the claim. The existing matching criteria isn't enough to distinguish the Rate Code in some cases. For these situations, the Medicaid Rate Code (a specific value code) is required on the claims, both 837I and UB04. (EII #127940)
 23. The Value Codes tab is implemented in Plan Details screen to ensure the correct rate code is sent out on claims which would otherwise result in wrong payments. (EII #126705)
 24. The Program Details screen changed are done to configure 'Admit/Discharge Date and Hour' and 'Referring provider' in the claims. (EII #126892)
 25. New options are added in the 'Format Fields' drop-down in the 'Claim Format Configuration Details' screen for the '837 Professional' claim format. This is to populate 837P Claim Service Facility loop based on Claims format configuration. (EII #127546)

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Abbreviation: **EII - Engineering Improvement Initiatives**

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14	EII # 127940	Implemented Value Codes for 837 Institutional and UB 04 claims.	Charges/Claims
19	EII # 127546	Ability to properly populate 837P Claim Service Facility loop based on Claims format configuration.	Charges/Claims
21	EII # 127954	Changes for Billing Outpatient Services on Institutional Claims.	Charges/Claims
22	EII # 127799	Modify ssp_PMCclaimsProcessingData to allow for Millin extract.	Charges/Claims
32	EII # 127428	To Capturing Dispensed Date and Time when Dispensed from MAT Management Details screen.	Client Orders
37	EII #128306	The 'Verified By' drop down is changed to Typeable search text box in the 'Client Plans' screen.	Coverage Plans
43	EII # 127468	'Document Codes Detail' screen: Added new radio button fields in 'Documents/Service Notes' section.	Document Codes
52	EII # 127471	Implemented additional Co-signer functionality when a Co-Signer (Staff/Client/Guardian) declines to sign.	Documents
54	EII # 126133	Changes in Government Performance and Results Act Outcome Measure	Documents
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73	EII # 127815	Inquiry screen: To alphabetize the 'Select Provider/Agency' dropdown in the Inquiry document.	Inquiries
74	EII # 128142	Inquiry Detail screen: Urgency Level and Contact type field validations to be displayed in the validation pop up.	Inquiries
75	EII # 127689	Inquiries: Modify the Staff dropdown fields to Typeable search textbox fields.	Inquiries
76	EII # 127985	Fetching the details of Communication Preferences for ADT and SIU outbound messages	Interface
79	EII # 127517	Added Disruption Type in the Life Event and Implemented a New Global code Category 'FCDisruptionTypes' for Disruption Type.	Life Events
84	EII # 126158	Required Signer Functionality	My Documents
87	EII # 126123	Implemented a new Recode category and removed the hardcoded values from the Stored Procedure.	My Reports
89	EII # 128020	Implemented a logic to Hide Blocked Clients from Reports	My Reports
90	EII # 125744	Changing Server Path dropdown in the Report Detail to Type-able search box.	My Reports
92	EII # 124486	The temp password length is reduced to the last 12 hexadecimal digits.	Non Staff Users
99	EII # 126904	To add 'Start Date' and 'End Date' to Advanced Claim Formats for Plan pop-up.	Plans
100	EII # 126705	Added Value Codes tab in Plan Details screen.	Plans
101	EII # 127087	Added the word 'D/C' at the end of the selected 'Problem' in the 'Medical Progress Note' and in the 'Signed Medical Progress Note' PDF document.	Primary Care
102	EII # 127082	Primary Care Schedule widget: To display all flags a client has assigned to them to show in the flag column	Primary Care
103	EII # 128328	A new 'Initial Crisis Service' Checkbox field is added to the 'Procedure Reporting' tab.	Procedure/Rates
105	EII # 128226	Programs Assignments: Adding a typeable search text box to display staff in the Program Assignment Details page.	Programs
106	EII # 126892	Program Details Screen changes	Programs
111	EII # 127594	The Diagnosis codes are displayed in every page of the Medication List.	Rx Application
112	EII # 126349	Med Consent History without Appointment	Rx Application
117	EII # 127688	Scanning: To modify the Staff drop down to Typeable search based on the 'StaffAccessRules' permission and configuration key 'DisplayStaffAsTypeableSearchTextBox'	Scanning
118	EII # 127585	Added the 'Allowed To Open Directly' field in the 'Screen Detail' page.	Screens

123	EII # 127425	Completing a Service manually is not working the same as a nightly job.	Services
125	EII # 126094	Front End implementation of 'Case Rate List' and 'Case Rate Detail' screens.	Services
131	EII # 127172	Addition of 2 fields to service screens when procedure type 'Initial Crisis Service' is checked in Code Details page	Services
133	EII # 126096	Back End implementation of 'Case Rate List' and 'Case Rate Detail' screens.	Services
139	EII # 125541	Implementation of new configuration key 'ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs' - to hide and show SNOMED code and descriptions in UI and PDF.	Smartcare Improvements
141	EII # 126687	Implementing 'External Identification' Tab in Client Information(C) screen and "External ID" search field on Client Search pop up.	SmartCare Improvements
147	EII # 128209	Implementation of a Typable Search box for Staff in the 'Staff Details' screen and 'Provider Staff Details' screen.	Staff/Users
150	EII # 128146	Whiteboard: To update Whiteboard Flowsheets to include program tag for CDAG	Whiteboard
151	EII # 126729	Whiteboard: Add Client ID to Whiteboard screen	Whiteboard
152	EII # 128210	Typable Search box for Staff in Contact/Flags/RWQM widget	Widgets

TASKS SUMMARY – 'NEW FUNCTIONALITY' RELATED (5)

Sl. No	Task No	Summary	Module Name
46	EII # 127176	Implementing a 'Health-Related Social Needs Screening Tool' document with required field validations.	Documents
47	EII # 128041	Implementing 'CSSRS Risk Assessment Lifeline Crisis Center' document	Documents
51	EII # 126234	The 'Eating Disorder Examination Questionnaire- EDE QS' has been implemented.	Documents
57	EII # 126881	Implementation of a new 'Obsessional Compulsive Inventory-Revised' document.	Documents

TASKS SUMMARY – 'DEFECT FIXES' (102)

Sl. No	Task No	Summary	Module Name
1	Core Bugs # 128088	835 Process Upload Nightly Billing Job failed.	835 File
2	Core Bugs # 127828	Need to ignore ClaimLineItemGroups.PayerClaimNumber if it's Empty string.	837 File
3	Core Bugs # 128100	PRN Activities duplicating on edit.	Activity Tracker
4	Core Bugs # 128193	Activity Tracker report throws an error message when it is accessed from the left navigation menu.	Activity Tracker
5	Core Bugs # 128430	The System was not allowed to process the files if the incoming file message was not in correct format	ADT

6	Core Bugs # 128279	Typable Search added for Staff in the Appointment Search Screen.	Appointment Search
7	Core Bugs # 128298	Arrivals: status not inserted in to the Arrivals History grid.	Arrivals
9	Core Bugs # 127958	Inpatient/Intensive outpatient Coding document : Missing Program in Dropdowns.	Bedboard
11	Core Bugs # 128151	Care Coordination: Screen not Falling Off From Care Coordination Next Step	Care Coordination
13	Core Bugs # 127347	Expected Payment and Expected adjustments not updating for \$0 adjustments	Charges/Claims
15	Core Bugs # 128209	EOB at Claim Level issue with Tertiary Payer billing	Charges/Claims
16	Core Bugs # 128347	837 Institutional SV202-7 should be the RevenueCodeDescription for the charge	Charges/Claims
17	Core Bugs # 128346	Charges/Claims Screen- System Slowness when processing several Charge ID's under single batch.	Charges/Claims
18	Core Bugs # 128140	EAF Segment ordering incorrect	Charges/Claims
20	Core Bugs # 128259	Charges/Claims: Both 'successfully processed claims' and 'claims with charge errors' as marked as 'Billed'	Charges/Claims
23	Core Bugs # 128166	'Claims Provider Overrides' list page not showing the 'Clinician Degree' in the column.	Claims Provider Overrides
24	Core Bugs # 128382	Client Accounts screen slowness.	Client Account
25	Core Bugs # 127705	Client tracking episode triggers new flag every time in a scenario when user ends a previous flag of an episode and modifies Client information screen.	Client Flags
26	Core Bugs # 128276	Added changes to improve the performance of the ssp_PMClientNotesList.	Client Flags
27	Core Bugs # 128134	Client information(C): users are not getting the results in the 'County of Residence' field.	Client Information (C)
28	Core Bugs # 128380	Changes to the Primary Clinician and Primary Physician Staff dropdown to Typeable search in the 'Client Information(C)' page.	Client Information(C)
29	Core Bugs # 128212	One blank page is displayed in the 'Client Order' PDF.	Client Orders
30	Core Bugs # 128344	Client Orders - Slowness issue	Client Orders
31	Core Bugs # 128351	Client Orders: The grid does not list Multiple Lab Orders.	Client Orders
33	Core Bugs # 128447	Staff Calendar 'screen: User was unable to schedule a service entry for a client, due to an error message.	Client Search
34	Core Bugs # 128353	Modify the 'Primary Clinician Search' dropdown fields to Typeable search textbox fields.	Client Search
35	Core Bugs # 128356	Performance issue When the Client search pop up was loaded with huge data of clients.	Client Search
36	Core Bugs # 128180	Issue in Compliance Batch List Page actions	Compliance Batch List page
38	Core Bugs # 128350	Widget Re-ordering issue	Dashboard
39	Core Bugs # 128271	Disclosure Authorized by Releases dropdown list is not displayed in the Disclosure/Request Details screen.	Disclosure/Requests

40	Core Bugs # 128290	'Disclosures/Requests' list pages: The page gets freeze due to a large amount of data being loaded in the 'Disclosed By' and 'Assigned To' dropdowns.	Disclosures/Requests
41	Core Bugs # 128227	All Documents: Alignment issue is present in the 'Document' section of the 'Document Codes Detail' Screen.	Document Codes
42	Core Bugs # 128398	Getting an error message, while trying to set the staff in 'Default Staff to Acknowledge' field under Document Codes Detail screen.	Document Codes
44	Core Bugs #128228	Encounter Form Issue (time): To Remove time field for Session Start Date and Session End Date	Documents
45	Core Bugs # 128417	Diagnosis Document - Red error when entering a description and clicking magnifying glass	Documents
48	Core Bugs #128299	Document Listpage: All staffs were loaded in the All Authors... dropdown	Documents
49	Core Bugs # 128188	Unable to add custom fields to care plan review document	Documents
50	Core Bugs # 127477	The index is missing from the source database to enhance the performance of multiple reports from SmartCare and SmartCareRX.	Documents
53	Core Bugs # 128395	ISP Interventions still Initializing Inactive Auth Codes in the PDF	Documents
55	Core Bugs # 128184	The Program name is not displaying completely in the Goal Plan RDL.	Documents
59	Core Bugs # 128462	Referral Document: Modify the 'From Staff' and 'Receiving Staff' dropdown fields to Typeable search textbox fields.	Documents
61	Core Bugs # 128114	Electronic Eligibility Mapping Maintenance (Admin) screen is displayed with red error.	Electronic Remittance
62	Core Bugs # 128160	Charges/ Claims: Posting 835 payment to the earliest service if many Date of Service exist for the charges.	ERFile
66	Core Bugs # 128362	In FC Discharge Support Plan document :The Aftercare tab fields are not loaded with correct data.	Foster Care
67	Core Bugs # 128218	GL Accounts: Error displayed when trying to add information	GL Accounts
69	Core Bugs # 128331	Signature Checks missing when the Clinician signed the Group Services.	Group Services
70	Core Bugs #128157	Adding Client To Group Service Doesn't Include Diagnosis	Group Services
71	Core Bugs # 128235	Service Notes : The service duration is not calculated correctly based on start date along with start time and end time entered in 'Crisis Tab' of 'Inquiry' screen.	Inquiries
72	Core Bugs # 128215	Client Inquiry Details: While completing the 'Crisis Hotline DFA Form' the red error is displayed.	Inquiries
77	Core Bugs # 128191	System is not allowing to sign the client order with more than 40 order set	Lab Orders
78	Core Bugs #128369	Ordered Date is not sorting properly on Lab Result Review List	Lab Results Review
80	Core Bugs # 128044	Messages screen shows error, when click on Reply, when there is a special character (^) in the message	Messages
81	Core Bugs # 128163	Notification counts are not displayed on the Notification bell icon.	Messages

82	Core Bugs # 127611	Client is showing incorrectly for other program filter in client's treatment team	My Caseload
83	Core Bugs # 128185	Caseload List page taking a longer time to load when clicked on caseload widget count	My Caseload
85	Core Bugs # 128145	Due to a large dataset the 'Month-End AR Rollover Summary' report is not loading.	My Reports
86	Core Bugs # 128256	GL Extract Unapplied Payment Errors	My Reports
88	Core Bugs # 128262	Issues in 'UDS Table 6B Quality of Care Measures' report: Issues in sections E and F	My Reports
91	Core Bugs # 128015	The Overnight Billing Job failed	Nightly Billing job
93	Core Bugs # 128258	The recurring appointments which are synced with Outlook are still retained in the table 'ExternalAppointmentQueue' which is causing performance issues.	Outlook Sync
94	Core Bugs # 128301	Patient Portal - remove ability to get to quick links under login name	Patient Portal
95	Core Bugs # 128026	837 sent with 4 digit revenue code, but Payer 835 received with 3 digit rev code	Payments / Adjustments
96	Core Bugs # 127542	Payments not updating when trying to upload 835 file which has more than 3-digit revenue code.	Payments/Adjustments
97	Core Bugs # 128183	Automatic postings of PLB segments on 835 files (refunds/adjustments/forwarding balances).	Payments/Adjustments
98	Core Bugs #128343	Peer Record Review Detail: Duplicate entries are displayed in 'Summary' tab	Peer Record Review
104	Core Bugs # 128255	Program Assignments: The Color column not working as expected	Programs
107	Core Bugs # 128233	Adding Typable Search box in 'Reception/Front Desk' list page	Reception
108	Core Bugs # 127358	View Medication History - Printlist medication not matching view med history meds with multiple rows of instructions	Rx Application
109	Core Bugs # 128127	Rx Application: The warning messages are displayed instead of validation messages for the service that has been posted-dated.	Rx Application
110	Core Bugs # 128248	Rx: Patient Summary page: instruction is not displaying in the instruction column in the Medication List.	Rx Application
113	Core Bugs # 128052	RX: Missing Response date & time on the medication history	Rx Application
114	Core Bugs # 128240	Scanned Medical Records: Documents orders are getting Changed When Uploading through the 'Batch Upload' screen.	Scanning
115	Core Bugs # 128196	'Scanning' - 'Client Search' text box value disappeared while entering Client Id value.	Scanning
116	Core Bugs # 128280	Scanning: Taking more time to display the uploaded PDF files.	Scanning
119	Core Bugs # 128420	Screens dropdown values are overlapping on the Quicklinks.	Screens
120	Core Bugs # 127860	'Service Completion' job took more time to complete successfully	Services

121	Core Bugs # 128260	Service Detail page: The dataset gets larger due to image data content in the 'ClientNotes' table, leading to session server slowness.	Services
122	Core Bugs # 128174	Services: Recurring service is regenerated for the same date if the recurring service is Cancel, No Show and Errored out.	Services
124	Core Bugs # 128310	The document is not created when the service is created from the Service Detail screen.	Services
126	Core Bugs # 128002	Services : Recurrence services for individual service patterns were not displayed correctly.	Services
127	Core Bugs # 128293	Service Details screen: An warning message is displayed when the old 'Diagnosis Codes' from the 'Diagnosis' document are initialized.	Services
128	Core Bugs # 128411	When Clinicians ends the recurrence services then the services with show status are deleted in that range.	Services
129	Core Bugs # 128427	Getting an Error Message while completing services through Nightly job.	Services
130	Core Bugs # 128460	Service is not created from Batch Service Import as the Duplicate errored service was present.	Services
132	Core Bugs # 128287	Services: Authorization Number column is no longer showing	Services
134	Core Bugs # 127793	Psychiatric Note: Selected SU diagnoses not populating to the Diagnosis tab	Services/Notes
135	Core Bugs # 128296	Psychiatric Note: the text field is displaying to the bottom of the Other checkbox in the signed PDF	Services/Notes
136	Core Bugs # 128413	Getting an error while creating a service.	Services/Notes
137	Core Bugs # 128375	Service Notes: Custom Validation does not seem to fire	Services/Notes
138	Core Bugs # 128237	Removing the use of stored proecudure ssp_RefreshStaffClients from ssp_ValidateHealthDataReport.	Smartcare Improvements
140	Core Bugs # 128192	Failed login attempt countdown not displayed on Login screen	SmartCare improvements
142	Core Bugs # 128547	List page: Popup issue on clicking 'Enable editing' in the exported file	SmartCare Improvements
143	Core Bugs # 128092	SmartView: The Primary Clinician and Primary Physician names are not displayed in the correct format.	SmartView
144	Core Bugs # 128363	Adding Typable search box for Staff field in Resource Calendar.	Staff Calendar
145	Core Bugs # 128349	The 'Staff' field is a dropdown field in the Staff Calendar.	Staff Calendar
146	Core Bugs # 128307	Staff Target Details: ApplyStaffAccessRule logic is added to the staff dropdown.	Staff Target
148	Core Bugs # 128328	Treatment Team List page taking more time to load the data	Treatment Team
149	Core Bugs # 128364	Whiteboard is not accessible	Whiteboard
153	Core Bugs # 128156	Duplicate widgets were displayed in the Dashboard	Widgets
154	Core Bugs # 128229	Dashboard: 'Organization Primary Caseload' widget shows inactive staff	Widgets

155	Core Bugs # 128450	Custom Widget (DLA20-Youth) Error Message on Client Dashboard	Widgets
156	Core Bugs # 128247	CareWeb: 'Page not found' error and users were not able to access the CareWeb link.	Interface

Functionality-wise Task Details:

835 File

Reference No	Task No	Description
1	Core Bugs # 128088	835 Process Upload Nightly Billing Job failed.

Author: Roopa Hemanna

1. Core Bugs # 128088: 835 Process Upload Nightly Billing Job failed.

Release Type: Fix | **Priority:** Urgent

Navigation Path: N/A

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. There was a failure of the 835 Process Upload Job. The SQL Agent Status Report showed that the 835 Process Uploaded Files part of the nightly billing jobs, had a status of Failed with below mentioned error message.

Error Message: 515*****Cannot insert the value NULL into column 'PaymentId', table 'ValleyOaksSmartcareProd.dbo.Refunds'; column does not allow nulls. INSERT fails.*****ssp_PM835PaymentPosting*****1157*****16*****2 [SQLSTATE 42000] (Error 50000) Transaction count after EXECUTE indicates a mismatching number of BEGIN and COMMIT statements. Previous count = 0, current count = 1. [SQLSTATE 25000] (Error 266). The step failed.

With this release, the above-mentioned issue has been resolved. Now, 835 Process Upload Nightly Billing Job is executed successfully without any failures.

837 File

Reference No	Task No	Description
2	Core Bugs # 127828	Need to ignore ClaimLineItemGroups.PayerClaimNumber if it's Empty string

Author: Roopa Hemanna

2. Core Bugs # 127828: Need to ignore ClaimLineItemGroups.PayerClaimNumber if it's Empty string.

Release Type: Fix | **Priority:** Medium

Prerequisites:

1. Record an electronic remittance (835 File) that includes a Claim Control Number.
2. Primary Charge Id is marked as Replaced.

Navigation Path: 'My Office' - 'Charges/Claims' list page - select 'Charge Id' – click on 'Eclaim' button – 'Claims Processing' pop up - click on 'Process Now' button – Click on 'Create Claim File' button.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The replacement batch was missing the segment that showed what claims it was replacing, which affected several replacement files.

With this release, the above mentioned issue has been resolved. Now, additional logic is added to handle the NULL case in one more statement, as well as to handle empty strings properly in the validations. The replacement batch not missing the segment, that showed what claims it is replacing.

Activity Tracker

Reference No	Task No	Description
3	Core Bugs # 128100	PRN Activities duplicating on edit.
4	Core Bugs # 128193	Activity Tracker report throws an error message when it is accessed from the left navigation menu.

Author: Abhishek Naik

3. Core Bugs # 128100: PRN Activities duplicating on edit.

Release Type: Fix | **Priority:** High

Navigation Path 1: 'Client' -- 'Client Activity Tracker' -- Click on 'Activity' – Complete the PRN Activity – Edit the activity again and Click on Save.

Navigation Path 2: 'My Office -- 'My Client Activities' -- Click on 'Activity' – Complete the PRN Activity – Edit the activity again and Click on Save.

Functionality 'Before' and 'After' release:

Before the release, here was the behavior. Duplicate records were created for the PRN activities when the completed activity was edited and saved.

With this release, the above-mentioned issue has been resolved. Now, the duplicate records are not created for the PRN activities when the completed activity is edited and saved.

Author: Abhishek Naik**4. Core Bugs # 128193: Activity Tracker report throws an error message when it is accessed from the left navigation menu.****Release Type:** Fix | **Priority:** Medium**Prerequisite:** 'Activity Tracker Report' is added as a Quick link.**Navigation Path:** Click 'Activity Tracker Report' from the left navigation menu.**Functionality 'Before' and 'After' release**

Before this release, here was the behavior. When the user clicked on the 'Activity Tracker Report' from the left navigation menu, the error 'Unable to connect with the report server.' was displayed.

With this release, the above-mentioned issue has been resolved. Now, the error message is not displayed when the user clicks on "Activity Tracker Report" from the left navigation menu and the user is able to traverse to Activity Tracker Report.

ADT

Reference No	Task No	Description
5	Core Bugs # 128430	The System was not allowed to process the files if the incoming file message was not in correct format.

Author: Munish Sood**5. Core Bugs # 128430: The System was not allowed to process the files if the incoming file message was not in correct format.****Release Type:** Fix | **Priority:** Medium**Navigation Path:** My Office - Alerts**Functionality 'Before' and 'After' release:**

Before this release, here was the behavior. The system was not allowed to process the files if the incoming file

message format was not in correct format and stopping other records to process successfully. Also, there was no functionality to get alerts for failure records.

With this release, the above issue has been resolved. Now, if the incoming file message format is not correct, then the system is updating the record as RecordDeleted='Y' and it will also show a failure alert in the alert screen and will process the next record(s) successfully.

Appointment Search

Reference No	Task No	Description
6	Core Bugs # 128279	Typeable Search added for Staff in the Appointment Search Screen.

Author: Niroop Hassan

6. Core Bugs # 128279: Typeable Search added for Staff in the Appointment Search Screen.

Release Type: Fix | **Priority:** Urgent

Prerequisite: Set the Configuration key 'DisplayStaffAsTypeableSearchTextBox' value as 'Yes' or 'No' by following the below **path**:

Administration - Configuration Keys – DisplayStaffAsTypeableSearchTextBox.

Note: The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' changes the dropdown fields as a type-able search textbox.

- When the key value is set to "Yes", the staff drop-downs will display typeable search text boxes instead of a drop-down.
- When the key value is set to "No", the staff drop-down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behaviour.
Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behaviour, i.e., the same as the key value is "No".

Navigation Path: 'My Office' -- 'Appointment Search' -- 'Appointment Search' list page.

Functionality 'Before' and 'After' Release:

Before this release, here was the behaviour. The 'Appointment Search' list page had a dropdown option for selecting staff.

With this release, the dropdown option has been changed to a searchable option for Staff selection.

Arrivals

Reference No	Task No	Description
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7	Core Bugs # 128298	Arrivals: status not inserted in to the Arrivals History grid.
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Author: Aishwarya Bommaklar

7. Core Bugs # 128298: Arrivals: status not inserted in to the Arrivals History grid.

Release Type: Fix | **Priority:** Medium

Navigation Path: My Office - Arrivals screen - Click on New icon – Select the Client – Enter all the required details – Click on 'Save' icon – Delete the Status History – Change the location – Click on 'Save' icon.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When the Arrival status was deleted to make corrections and then tried to save the same status after changing the location, the status was not inserted into the Arrivals History grid.

With this release, the above-mentioned issue has been resolved. Now, when we delete and add the same status by changing the location, the status is saving and inserted into the Arrival History grid.

Batch Signature

Reference No	Task No	Description
8	EII # 127467	Create new version when Co-Signer declines in a Batch Signature.

Author: Niroop Hassan

8. EII # 127467: Create new version when Co-Signer declines in a Batch Signature.

Release Type: Change | **Priority:** Urgent

Navigation Path 1: 'Administration' – 'Document Codes' - 'Document Codes' list page – Click on the required Document Name hyperlink – 'Document Codes Detail' page - 'Documents/Service Notes' section – Select 'Yes' radio button option for 'Create 'In Progress' Version When Staff Declines 'To Co-Sign' and click on 'Save' icon.

Navigation Path 2: 'My Office' – 'Batch Signature' - 'Batch Signature' list page – Select 'To Cosign' from the dropdown and click on 'Apply Filter' button – Select the required document and click on 'Decline' button – 'Decline to Sign' popup – Select the required option and click on 'Ok' button.

Functionality 'Before' and 'After' Release:

Purpose: To improve the Co-Signer processes and ensure the better compliance.

With this release, the following changes have been implemented:

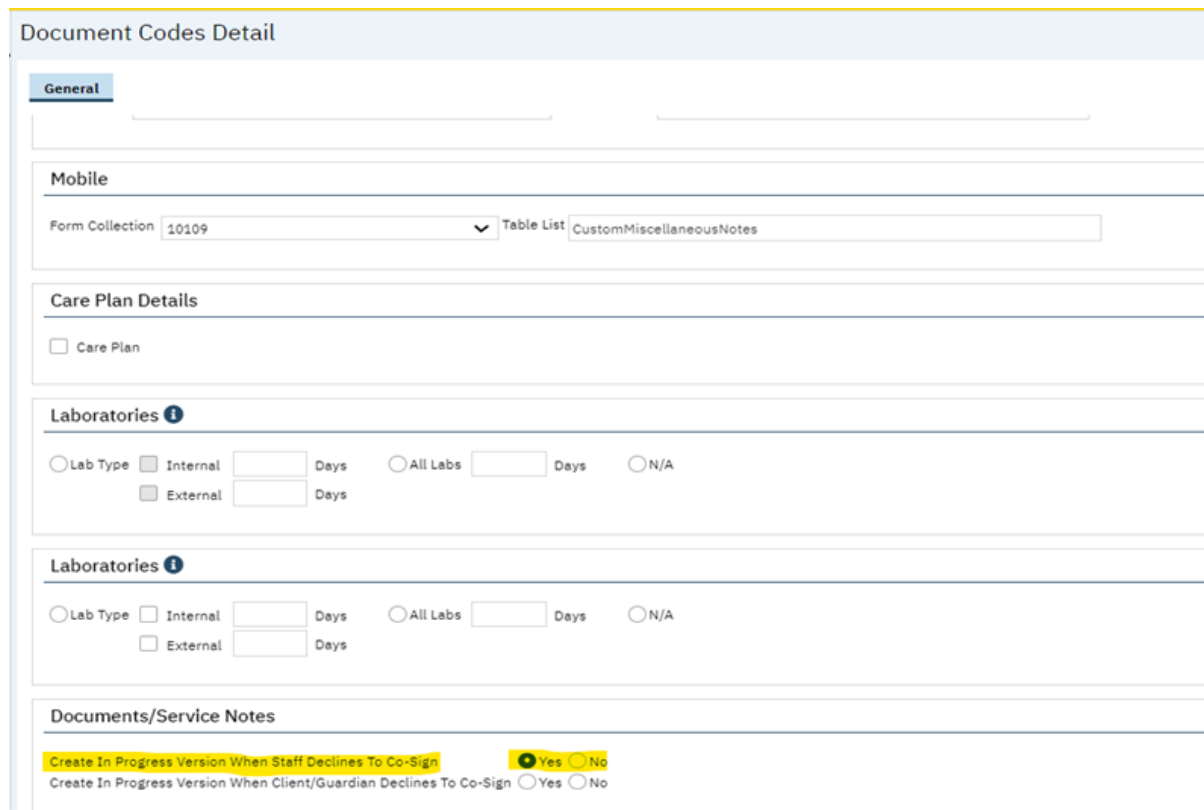
-When 'Create 'In Progress' Version When Staff Declines 'To Co-Sign' is set to 'Yes' and any of the Co-Signers declines to sign a Document/Service Note in the Batch Signature screen, behaves as below:

- The author's document remains as signed.
- An 'In Progress' version of the author's Document/Service Note will be created (for the author of the Document/Service Note) for each declined Document/Service Note.
- All the Co-Signers will be auto associated with the new version.
- If none of the Co-Signers declines to sign a Document/Service Note, the existing behavior will be retained. (Document/Services Notes in Progress version is not created for the above mentioned condition.)

Note:

- When 'Create 'In Progress' Version When Staff Declines 'To Co-Sign' is set to 'No' or none of the radio buttons is selected for this, then the existing behavior is retained whether the Co-Signers declines to sign or not.

Please see the below screenshots for more details:



Document Codes Detail

General

Mobile

Form Collection: 10109 Table List: CustomMiscellaneousNotes

Care Plan Details

☐ Care Plan

Laboratories

☐ Lab Type ☐ Internal Days ☐ All Labs Days ☐ N/A

☐ External Days

Laboratories

☐ Lab Type ☐ Internal Days ☐ All Labs Days ☐ N/A

☐ External Days

Documents/Service Notes

Create In Progress Version When Staff Declines To Co-Sign ☒ Yes ☐ No

Create In Progress Version When Client/Guardian Declines To Co-Sign ☐ Yes ☐ No

Authors document remains as signed:

Batch Signature

Hide List Sign Approved Documents

Client: Test, niru Document: Misc

Effective: 07/04/2024 Status: To Cosign Version: 1 Approved: 1 of 4

Document Validation Error

1 of 1

Client ID: 2105254

Streamline Healthcare Solutions

SmartCare R6

Misc

Client Name:	niru Test	Client ID:	2105254	Status:	Show
Clinician Name:	Niru Test	Service:	test nir procedure 1		
Date Of Service:	07/04/2024	Start Time:	2:57 PM	End Time:	2:57 PM
Team:	test nir program	Duration:	1.00 Days		
Location:	01 & 02 Austria Bangalore	Specific Location:			
Narrative:	test				
Clinician:	Niru Test, DEA, MD, CMA	Signature Date:	07/04/2024 2:58PM		

This document was electronically signed by Niru Test, DEA, MD, CMA on 07/04/2024 2:58PM

Co-Signers declines to Sign the document:

Batch Signature

Hide List Sign Approved Documents

Client: Test, niru Document: Misc

Effective: 07/04/2024 Status: To Cosign Version: 1 Approved: 1 of 4

Document Validation Error

1 of 1

Client ID: 2105254

Streamline Healthcare Solutions

SmartCare R6

Misc

Client ID:	2105254	Status:	Show
Service:	test nir procedure 1		
Start Time:	2:57 PM	End Time:	2:57 PM
Duration:	1.00 Days		
Location:	01 & 02 Austria Bangalore	Specific Location:	
Narrative:	test		
Clinician:	Niru Test, DEA, MD, CMA	Signature Date:	07/04/2024 2:58PM

This document was electronically signed by Niru Test, DEA, MD, CMA on 07/04/2024 2:58PM

Decline to Sign

Are you sure you want to decline signature on the document?

If yes, provide the reason for declining signature.

Test

In Progress Version of the document :

My Documents (2)											
All Clients		All Documents		All Statuses		Due in x days		Other		Apply Filter	
Today		From 07/04/2024		To 07/04/2024		Include External Documents		All Programs			
Client	Document/Description	Group Name	Effective	Status	Ver.	Due Date	Staff to Sign	Author	Others to Sign	Associated Documents	Program
Test_niru/2105254	CPST Note / test nir procedure 1		07/04/2024	To Do (In Pro 1				Test, Niru		Add	test nir program
Test_niru/2105254	Misc / test nir procedure 1		07/04/2024	In Progress 2			Test-Susanna, Test, Niru	Test_niru		Add	test nir program

Bedboard

Reference No	Task No	Description
9	Core Bugs # 127958	Inpatient/Intensive outpatient Coding document: Missing Program in Dropdowns.
10	EII # 126728	Add Client ID to Bedboard and Bed Census screen

Author: Aishwarya Bommaklar

9. Core Bugs # 127958: Inpatient/Intensive outpatient Coding document: Missing Program in Dropdowns.

Release Type: Fix | **Priority:** High

Prerequisite: Client is admitted to a bed.

Navigation Path: Client – Inpatient/Intensive outpatient coding document – Visit Section – Inpatient Visit drop down.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the Inpatient/Intensive outpatient Coding document, the Inpatient visit drop down was not displayed with all the programs in the effective date range. This issue occurred when the Admit Date and Start Date of the bed assignments were different.

With this release, the above mentioned issue has been resolved. Now, the code optimization is done to update Admit date as same as Start Date and the Inpatient visit dropdown is displayed with all the programs in the effective date range.

Author: Aishwarya Bommaklar

10. EII # 126728: Add Client ID to Bedboard and Bed Census screen.

Release Type: Change | **Priority:** Urgent

Navigation Path 1: My Office– Bedboard screen.

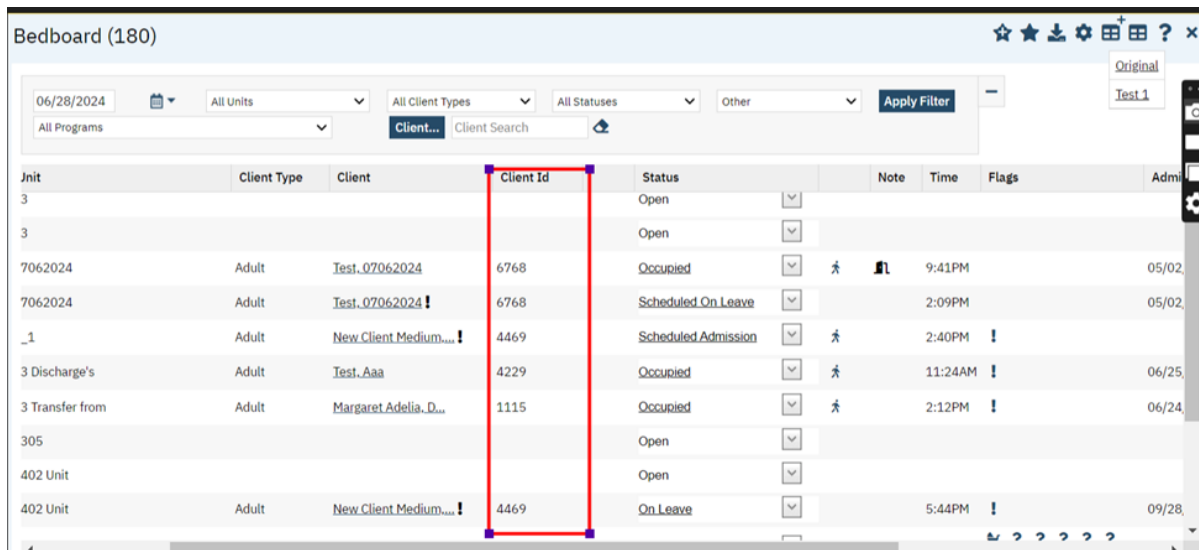
Navigation Path 2: My Office– Bed Census screen.

Functionality 'Before' and 'After' release:

Purpose: The Customers can easily track Clients by Client ID in Bedboard and Bed Census screen. This will ensure that they are referring the correct Client with the help of IDs.

With this release, the below changes are implemented in the Bedboard and BedCensus screens:

- Client Id column is added in both Bedboard and Bed Census screen.



Jnit	Client Type	Client	Client Id	Status	Note	Time	Flags	Adm
3				Open				
3				Open				
7062024	Adult	Test_07062024	6768	Occupied		9:41PM		05/02
7062024	Adult	Test_07062024 !	6768	Scheduled On Leave		2:09PM		05/02
_1	Adult	New Client Medium.... !	4469	Scheduled Admission		2:40PM	!	
3 Discharge's	Adult	Test_Aaa	4229	Occupied		11:24AM	!	06/25
3 Transfer from	Adult	Margaret Adelia_D...	1115	Occupied		2:12PM	!	06/24
305				Open				
402 Unit				Open				
402 Unit	Adult	New Client Medium.... !	4469	On Leave		5:44PM	!	09/28

Bed Census (65)

All Statuses ▾ 06/28/2024 ▾ All Programs ▾ Other ▾ Apply Filter
 All Units ▾ All Rooms ▾ All Beds ▾ Client... Client Search

Client	Client Id ▾	Note	Flags	Bed	Status	Admitted	Admit Time	Discharged
Test_07062024	6768			07062024	Scheduled On Leave	05/02/2024	9:41PM	
Test_07062024	6768	1		07062024	Occupied	05/02/2024	9:41PM	
John_Leo	6685			B6	Scheduled Return From Leave	05/27/2024	11:18AM	
John_Leo	6685	1		B6	On Leave	05/27/2024	11:18AM	
Test_342094	6674			342094	Occupied	05/01/2024	1:10PM	
Test_286548	6671			332516	Occupied	05/01/2024	3:26PM	
Test_Bed board T...	6438			Inbox bed 2	Occupied	03/02/2024	10:20AM	
8371 - 0Fill Outo...	6332	?	?	Trans 1	On Leave	02/26/2024	10:58AM	
Test_Epic 237114...	6245			Bed 237114	Occupied	12/10/2023	8:00AM	
Feature_239195	5088			sso bed	On Leave	02/02/2024	12:24PM	

- Configurable Columns is added in Bed Census Screen. (**Note:** With configurable columns, the customer can create a new view to see the list page with specific columns he/she wants to see.)

Bed Census (65)

All Statuses ▾ 06/28/2024 ▾ All Programs ▾ Other ▾ Apply Filter
 All Units ▾ All Rooms ▾ All Beds ▾ Client... Client Search

Configurable Columns

Client	Client Id ▾	Note	Flags	Bed	Status	Admitted	Admit Time	Discharged
Test_07062024	6768			07062024	Scheduled On Leave	05/02/2024	9:41PM	
Test_07062024	6768	1		07062024	Occupied	05/02/2024	9:41PM	
John_Leo	6685			B6	Scheduled Return From Leave	05/27/2024	11:18AM	
John_Leo	6685	1		B6	On Leave	05/27/2024	11:18AM	
Test_342094	6674			342094	Occupied	05/01/2024	1:10PM	
Test_286548	6671			332516	Occupied	05/01/2024	3:26PM	
Test_Bed board T...	6438			Inbox bed 2	Occupied	03/02/2024	10:20AM	
8371 - 0Fill Outo...	6332	?	?	Trans 1	On Leave	02/26/2024	10:58AM	

- Typeable client search is implemented in filter section of both Bedboard and Bed Census screen. When the user searches for a particular client and click on Apply Filter, the Bedboard and Bed Census will display the data only related to the selected client in the filter section.

Note: The user can search for a Client either by ClientID or Client Name.

- Client Name column is renamed to "Client" in both Bedboard and Bed Census screen.

Care Coordination

Reference No	Task No	Description
11	Core bugs # 128151	Care Coordination: Screen not Falling Off From Care Coordination Next Step

Author: Kiran Tigarimath

11. Core bugs #128151: Care Coordination: Screen not Falling Off From Care Coordination Next Step.

Release Type: Fix | **Priority:** Medium

Navigation Path: 'My Office' -- 'Care Coordination Next Step' -- 'Screen having Custom grid' Hyperlink.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. From the Care Coordination Next Step list page, when a user navigated to any screen with custom grid control and performed any activity related to the grid and clicked on save, that record was still displayed in the care coordination next step list page.

With this release, the above-mentioned issue is resolved. Now, after Save, the particular record will not be displayed in the care coordination next step list page.

Caseload Reassignment

Reference No	Task No	Description
12	EII # 128113	Changes to display service notes in the 'Assignment Types' ('Documents - To Acknowledge', 'Documents - To Be Reviewed', and 'Documents - To Co-Sign') under the 'Caseload Reassignment' list page.

Author: Niroop Hassan

12. EII #128113: Changes to display service notes in the 'Assignment Types' ('Documents - To Acknowledge', 'Documents - To Be Reviewed', and 'Documents - To Co-Sign') under the 'Caseload Reassignment' list page.

Note: This functionality is implemented for a specific customer. If you have Primary and County type of setup and would like to use these functionalities, please get in touch with Streamline Support.

Release Type: Change | **Priority:** Urgent

Prerequisites:

1. The system configuration key 'DisplayCDAGSectionInStaffDetails' value is set to 'Yes'.
2. The system configuration key 'EnableClinicalDataAccessGrouping' value is set to 'Yes'.

Navigation Path: 'My Office' – 'Caseload Reassignment' - 'Caseload Reassignment' list page.

Functionality 'Before' and 'After' Release:

Purpose: 'Ability to re-assign the client service note documents that are in a To Be Reviewed status to another reviewer.

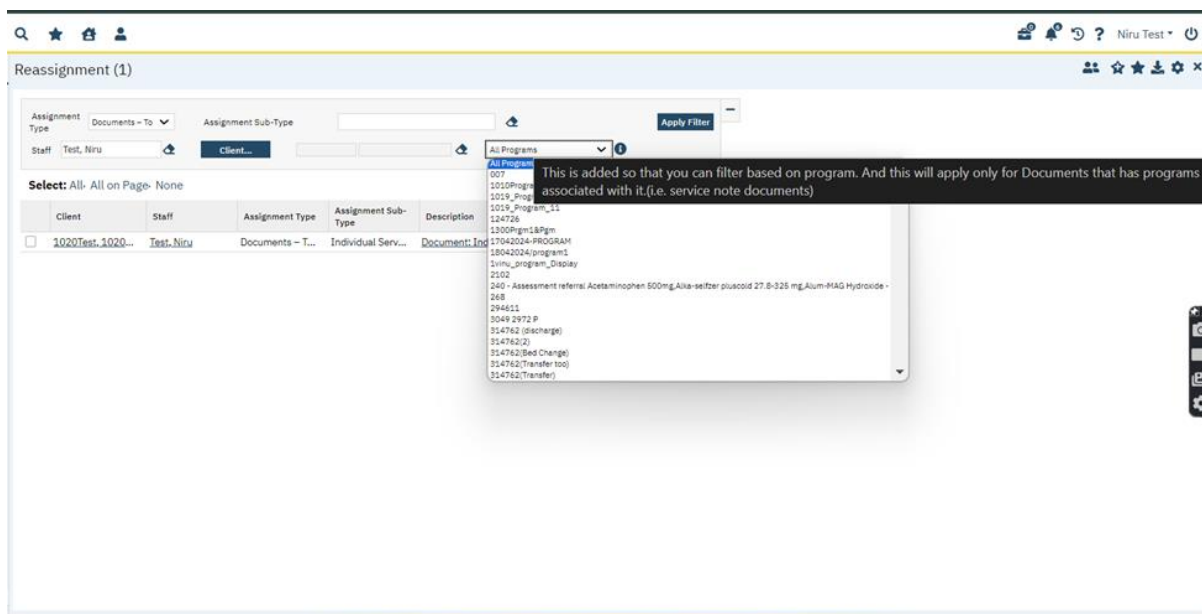
With this release, the following implementation has been done under the 'Caseload Reassignment' list page:

'Caseload Reassignment' list page:

1. 'All Programs' dropdown in 'Filter' Section.
2. 'Program' column in the Grid.
3. 'Service Note' display in the following 'Assignment Types'.
 - Documents - To Acknowledge
 - Documents - To Be Reviewed
 - Documents - To Co-Sign

1. 'All Programs' dropdown in 'Filter' Section:

'All Programs' dropdown: The 'All Programs' dropdown can filter document records based on document program association. The Filter will display all 'Active Programs' same logic as the 'Service Note' list page. **Information icon** - When hovering over the 'i' icon, it displays the following information **"This is added so that you can filter based on program. This will apply only to Documents that have programs associated with it (i.e. service note documents)"**



2. 'Program' column in grid:

- A program column has been included, which displays the program associated with each document. If no program is associated with the document, then this column value will be displayed as 'Program Not Associated'.

Reassignment (6)

Assignment Type
Documents - To
Assignment Sub-Type

Staff
Test, Suganya
Client...
All Programs

Apply Filter

Select: All All on Page None

	Client	Staff	Assignment Type	Assignment Sub-Type	Description	Program
<input type="checkbox"/>	Basava, Test	Test, Suganya	Documents - T...	Misc G/O	Document: Misc G/O - 03/01/2024 - T...	Program Gold ...
<input type="checkbox"/>	Test, Aishu	Test, Suganya	Documents - T...	Miscellaneous	Document: Miscellaneous - 10/10/20...	1019_Program...
<input type="checkbox"/>	Test, niru	Test, Suganya	Documents - T...	Miscellaneous	Document: Miscellaneous - 02/01/20...	Test Nir prog1
<input type="checkbox"/>	Test, niru	Test, Suganya	Documents - T...	Misc G/O	Document: Misc G/O - 06/19/2024 - T...	Test Nir Prog2
<input type="checkbox"/>	Test, PBhange	Test, Suganya	Documents - T...	PHQ9 Assess...	Document: PHQ9 Assessment - 06/1...	No Program as...
<input type="checkbox"/>	Test, Brock	Test, Suganya	Documents - T...	Miscellaneous	Document: Miscellaneous - 04/22/20...	Test Nir prog1

Note:

- When the CDAG is turned on:** For the Service note, it will show the 'Service Program Associated'. And for Documents, it will display the program associated with that document.
- When CDAG is turned off:** It will Display the Program associated with each service Note document. For any document where the program is not associated, then it is displayed as 'No Program Associated'.

3. 'Caseload Reassignment' list page Filter section:

To display 'Service Note' in the following 'Assignment Types':

- The dropdown values 'Documents - To Acknowledge', 'Documents -To Be Reviewed', and 'Documents - To Co-Sign' displayed only Documents earlier. But now, the Service Note documents are also included in the mentioned 'Assignment Types' (Documents - To Acknowledge, 'Documents -To Be Reviewed', 'Documents - To Co-Sign').
- Also, when these 3 dropdown values 'Documents - To Acknowledge', 'Documents -To Be Reviewed', and 'Documents - To Co-Sign' are selected in the 'Assignment Type' dropdown, then the Service Notes document is included in the 'Assignment Sub-Type' typeable Search box as well.

Reassignment (6)

Assignment Type
Staff Test, S...

Documents - To
Assignment Type
Primary Clinician
Flag
Program
Primary Physician
Documents - All
Documents - In Progress
Documents - To Acknowledge
Documents - To Be Reviewed
Documents - To Co-Sign
Documents - To Do
Documents - To Sign
Events
Orders-Assigned
Orders-Autho...
Inquiry
Financial Assignments
Contact Notes
Disclosures
Grievances/Appeals

Assignment Sub-Type

Client...

Client	Assignment Type	Assignment Sub-Type	Description	Program
<input type="checkbox"/> Basava,	Documents - T...	Misc G/O	Document: Misc G/O - 03/01/2024 - T...	Program Gold ...
<input type="checkbox"/> Test, Ais	Documents - T...	Miscellaneous	Document: Miscellaneous - 10/10/20...	1019_Program...
<input type="checkbox"/> Test, nir	Documents - T...	Miscellaneous	Document: Miscellaneous - 02/01/20...	Test Nir prog1
<input type="checkbox"/> Test, nir	Documents - T...	Misc G/O	Document: Misc G/O - 06/19/2024 - T...	Test Nir Prog2
<input type="checkbox"/> Test, PB	Documents - T...	PHQ9 Assess...	Document: PHQ9 Assessment - 06/1...	No Program as...
<input type="checkbox"/> Test, Br	Documents - T...	Miscellaneous	Document: Miscellaneous - 04/22/20...	Test Nir prog1

Charges/Claims

Reference No	Task No	Description
13	Core Bugs # 127347	Expected Payment and Expected adjustments not updating for \$0 adjustments.
14	EII # 127940	Implemented Value Codes for 837 Institutional and UB 04 claims.
15	Core Bugs # 128209	EOB at Claim Level issue with Tertiary Payer billing.
16	Core Bugs # 128347	837 Institutional SV202-7 should be the RevenueCodeDescription for the charge.
17	Core Bugs # 128346	Charges/Claims Screen- System Slowness when processing several Charge ID's under single batch
18	Core Bugs # 128140	EAF Segment ordering incorrect
19	EII # 127546	Ability to properly populate 837P Claim Service Facility loop based on Claims format configuration.
20	Core Bugs # 128259	Charges/Claims: Both 'successfully processed claims' and 'claims with charge errors' as marked as 'Billed'.
21	EII # 127954	Changes for Billing Outpatient Services on Institutional Claims.
22	EII # 127799	Modify ssp_PMCclaimsProcessingData to allow for Millin extract.

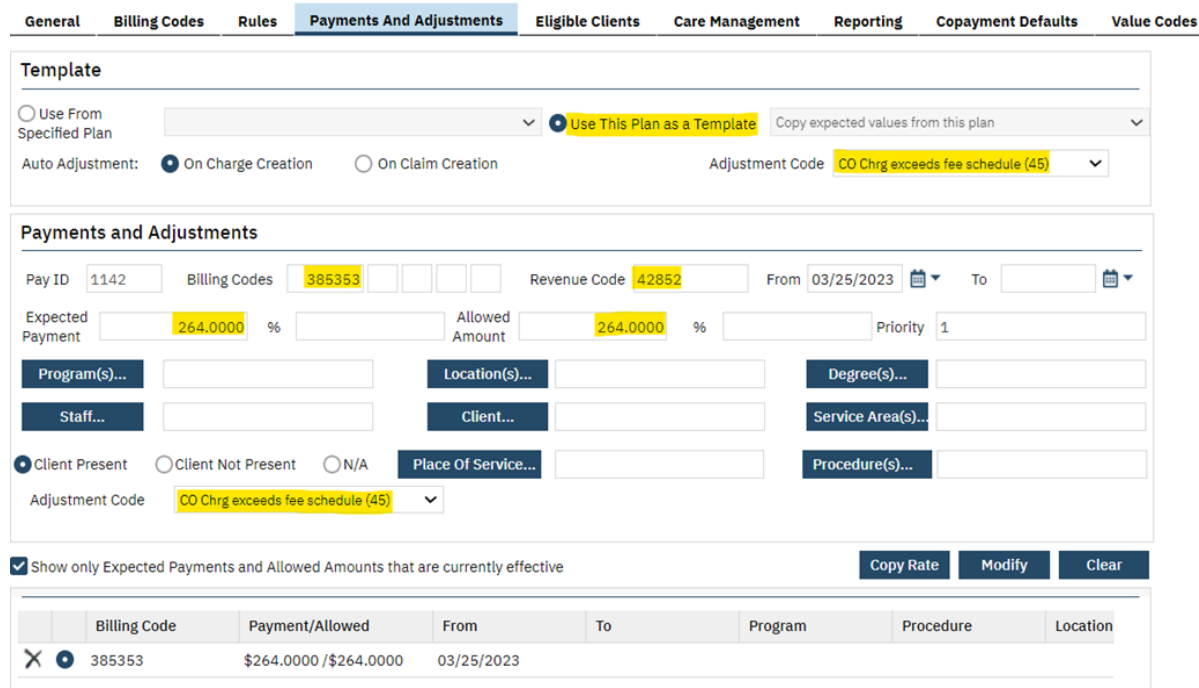
Author: Yashas Kydalappa

13. Core Bugs # 127347: Expected Payment and Expected adjustments not updating for \$0 adjustments.

Release Type: Fix | **Priority:** High

Prerequisite:

1. The below-mentioned configuration is to be done in the Plan Details screen, before completing the service.



Template

☐ Use From Specified Plan ☒ Use This Plan as a Template Copy expected values from this plan

Auto Adjustment: ☒ On Charge Creation ☐ On Claim Creation Adjustment Code: CO Chrg exceeds fee schedule (45)

Payments and Adjustments

Pay ID: 1142 Billing Codes: 385353 Revenue Code: 42852 From: 03/25/2023 To:

Expected Payment: 264.0000 % Allowed Amount: 264.0000 % Priority: 1

Program(s)... Location(s)... Degree(s)...

Staff... Client... Service Area(s)...

☒ Client Present ☐ Client Not Present ☐ N/A Place Of Service... Procedure(s)...

Adjustment Code: CO Chrg exceeds fee schedule (45)

☒ Show only Expected Payments and Allowed Amounts that are currently effective Copy Rate Modify Clear

	Billing Code	Payment/Allowed	From	To	Program	Procedure	Location
X	385353	\$264.0000 / \$264.0000	03/25/2023				

- o The Service charge amount is inserted in the 'Expected Payment' and 'Allowed Amount' text box under the 'Payments and Adjustment' section in the 'Payments and Adjustment' tab of the Plan Details screen.
- o The 'Use This Plan as a Template' radio button is selected under the Template section of the Payments and Adjustment tab in the Plan Detail screen before inserting the values into the grid.
- o The inserted Billing Codes and Revenue codes under the Payments and Adjustment section in the Payments and Adjustment tab of the Plan Details screen is the same as the Procedure rate billing code and revenue code.
- o 'CO Chrg exceeds fee schedule (45)' adjustment code is selected under the adjustment code drop-down.

Path: 'Administration' -- 'Plans' quick link type -- 'Plans' list page -- click on the plan name hyperlink/New button -- 'Plan Details' screen -- 'Payments and Adjustment' tab -- Click on Insert -- Save.

2. The Plan that has configured with the values in 1st step those plans should be associated with client.

Path: 'Client' tab -- 'Finance' -- 'Coverage' -- 'Coverage' screen -- click on the new button 'Client Plans' screen -- select the plan and save the client plan screen with other necessary information -- navigate to back to 'Coverage' screen -- under client plans section give the start date and COB order as 1 -- then click on the Add button -- ensure 'Coverage Plan' has successfully been added in the 'Plans Time Span' section of the coverage screen.

3. The Charge is set with 'Ready to Bill' before running the job.

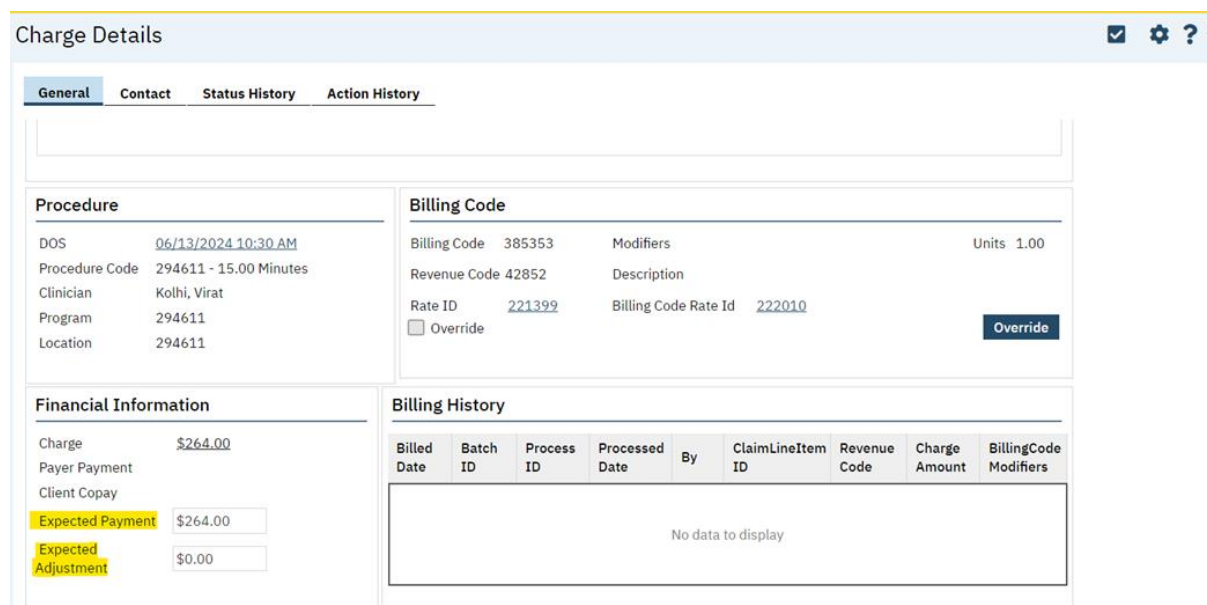
Path: Client -- 'Services' -- Services list page -- click on the new button 'Service Detail' screen -- Create and complete the service -- click on the 'Charge' hyperlink -- 'Ledger Entries' screen -- click on the Charge ID under grid -- 'Charge Details' screen -- 'General' tab -- 'Status' section -- check the 'Ready To Bill' check box and save the Charge Details screen.

Navigation Path: Client -- 'Services' -- Services list page -- click on new button 'Service Detail' screen -- Create and complete the service -- click on the 'Charge' hyperlink -- 'Ledger Entries' screen -- click on the Charge ID under grid -- 'Charge Details' screen -- 'General' tab -- 'Financial Information' section.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. In the Financial Information section of General Tab in the 'Charge Details' screen, the 'Expected Payment' and 'Expected Adjustment' text boxes were not updating when the expected payment is 100% and the expected adjustment is 0%, after the below job executed.

Job: EXEC dbo.ssp_UpdateChargeAllowedAmounts @AdjustmentCode = 2761



Charge Details

General | Contact | Status History | Action History

Procedure

DOS: 06/13/2024 10:30 AM
 Procedure Code: 294611 - 15.00 Minutes
 Clinician: Kolhi, Virat
 Program: 294611
 Location: 294611

Billing Code

Billing Code: 385353
 Revenue Code: 42852
 Rate ID: 221399
 Billing Code Rate Id: 222010
☐ Override

Financial Information

Charge: \$264.00
 Payer Payment:
 Client Copay:
 Expected Payment: \$264.00
 Expected Adjustment: \$0.00

Billing History

Billed Date	Batch ID	Process ID	Processed Date	By	ClaimLineItem ID	Revenue Code	Charge Amount	BillingCode Modifiers
No data to display								

With this release, the above-mentioned issue has been resolved. The 'Expected Payment' and 'Expected Adjustment' text field will be updated after the nightly billing job runs for the 'Allowed Amount Adjustments' step or when the below query is executed even for the 100% expected payment and 0% allowed adjustment.

Job: EXEC dbo.ssp_UpdateChargeAllowedAmounts @AdjustmentCode = 2761

Author: Yashas Kydalappa

14. EII # 127940: Implemented Value Codes for 837 Institutional and UB 04 claims.

Release Type: Change | **Priority:** Urgent

Prerequisites:

1. The Coverage plan exists with the Value codes. (The Coverage Plan is to be saved with value codes with suitable data under value codes tab of plan detail screen.)

- 2.The client is to be mapped with the coverage plan in which the coverage plan has been saved with value codes.
3. Admit client to the Bed board (Client Admit start date must be equal OR Prior to the Value codes From date.)
- 4.Create and complete the service for the procedure rate ID in which the procedure rate ID has been selected under the Value Codes tab of Plan Details.

5. Institutional Claim and UB 04 claim are generated to Coverage plans which is added in the value codes.

Navigation Path E-Claim: 'My Office'- 'Billing' - 'Charges/Claims'- 'Charges/Claims' list page – Select the Claim - 'E-claim' button -'Process Now' button – 'Create Claim File'.

Navigation Path Paper Claim: 'My Office'- 'Billing' - 'Charges/Claims'- 'Charges/Claims' list page – Select the Claim - 'Paper-claim' button - 'Process Now' button – Print Claim.

Functionality 'Before' and 'After' release:

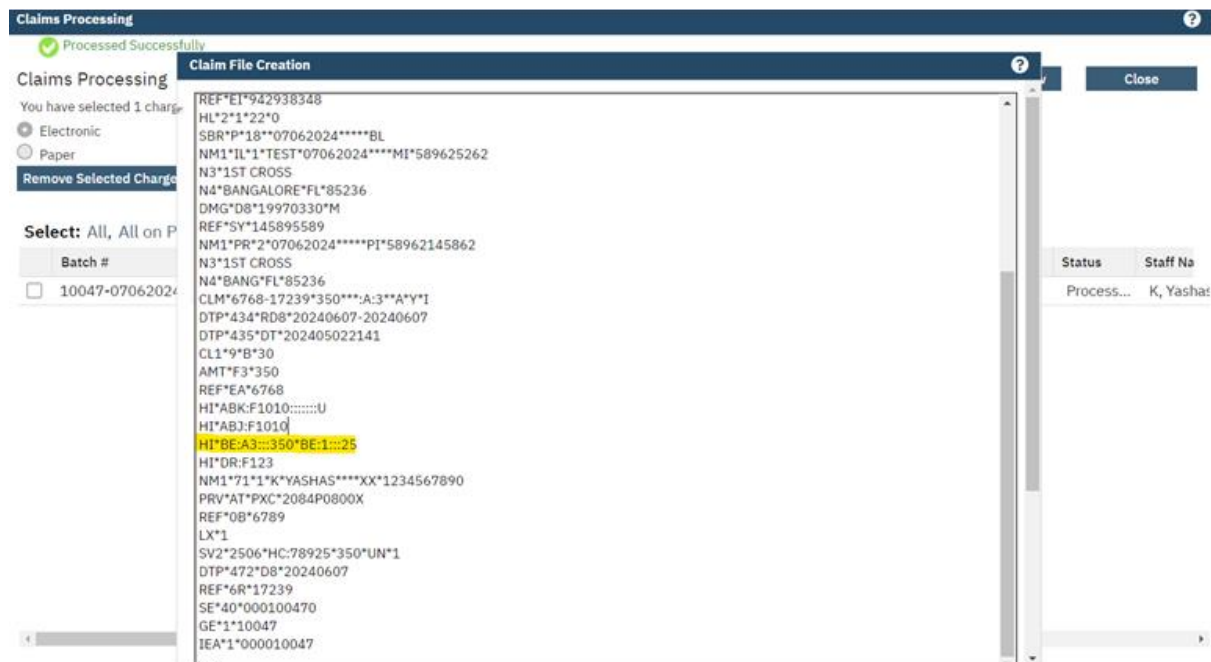
Purpose: The users don't need to update the ValueCodesByRevenueCodes table with insert query to pull the value codes in 837 Institutional and UB04 electronic and paper claims respectively. Instead, once the coverage plan is saved with value codes with suitable values, the system will pull the values into the claims.

With the release, the following changes are implemented in the Value Codes for 837 Institutional and UB 04 claims.

1. Procedure Rate ID column in ValueCodesByRevenueCodes table.

- A new column 'ProcedureRateID' is added for the table 'ValueCodesByRevenueCodes'.
- The Procedure rate Id will be updated with the remaining values under 'ValueCodesByRevenueCodes' table, once the Coverage Plan is saved with value codes under Value Codes tab of Plan Details screen.

2. The Value Codes amount when processing single claim in a batch.



The screenshot displays the 'Claims Processing' window. On the left, there's a sidebar with 'Claims Processing' and 'Claim File Creation' tabs. Below 'Claim File Creation', there's a 'Select: All, All on P' section with a 'Batch #' dropdown and a checkbox for '10047-07062024'. The main area shows a list of value codes, including 'HL*2*1*22*0', 'SBR*P*18*07062024****BL', 'NM1*IL*1*TEST*07062024****MI*589625262', 'N3*1ST CROSS', 'N4*BANGALORE*FL*85236', 'DMG*D8*19970330*M', 'REF*SY*145895589', 'NM1*PR*2*07062024****PI*58962145862', 'N3*1ST CROSS', 'N4*BANG*FL*85236', 'CLM*6768-17239*350***A:3**A*Y*I', 'DTP*434*RD8*20240607-20240607', 'DTP*435*DT*202405022141', 'CL1*9*B*30', 'AMT*F3*350', 'REF*EA*6768', 'HI*ABK:F1010:U', 'HI*ABJ:F1010', 'HI*BE:A3::350*BE:1::25', 'HI*DR:F123', 'NM1*71*1*K*YASHAS****XX*1234567890', 'PRV*AT*PXC*2084P0800X', 'REF*OB*6789', 'LX*1', 'SV2*2506*HC:78925*350*UN*1', 'DTP*472*D8*20240607', 'REF*6R*17239', 'SE*40*000100470', 'GE*1*10047', 'IEA*1*000010047'. On the right, there's a table with 'Status' and 'Staff Na' columns, showing 'Process...' and 'K, Yashas'.

Claims Processing

Print Claims

Process

Electronic

Paper

Remove Selected

Select: All

Batch

10438

Number Of Statements Printed 1

All claims were printed successfully

Close

U804

1 / 1

127%

Download

Print

More

NIAGARA COUNTY DEPARTMENT

401ILLINOISAVE401

AUTOM UT 46040

YASHAS LOCATION

1ST CROSS

BANGALORE FL 85263

6674

942938348

070424

070424

BF3

TEST, 342094

6674

BANGALORE

1ST CROSS

FL 85236

03301997

M

050124

13

1

2

30

1st cross

1

25

00

Bangalore FL 85236

7892506467

2506

350.00

07/04/2024

1.00

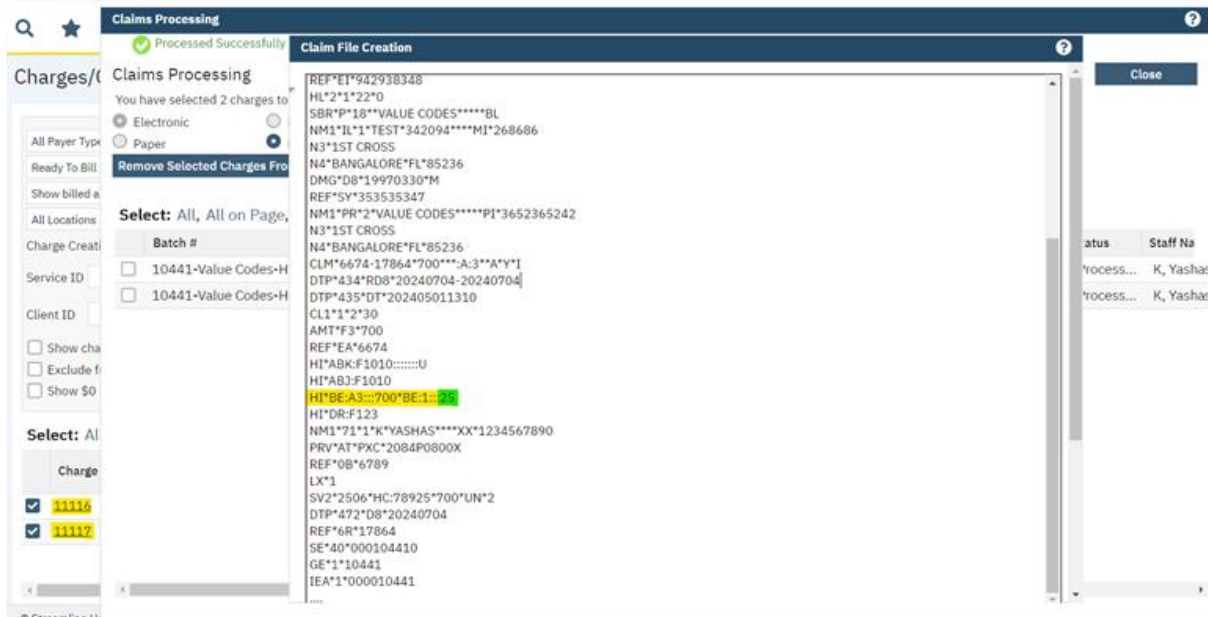
350 00

- The Value Code amount will be displayed when process the 837 Institutional claims based on the amount which has been inserted in the Value Code Amount text box under the value code section of Coverage Plan detail screen.
- Similarly in the UB 04 paper claims under box number 39.

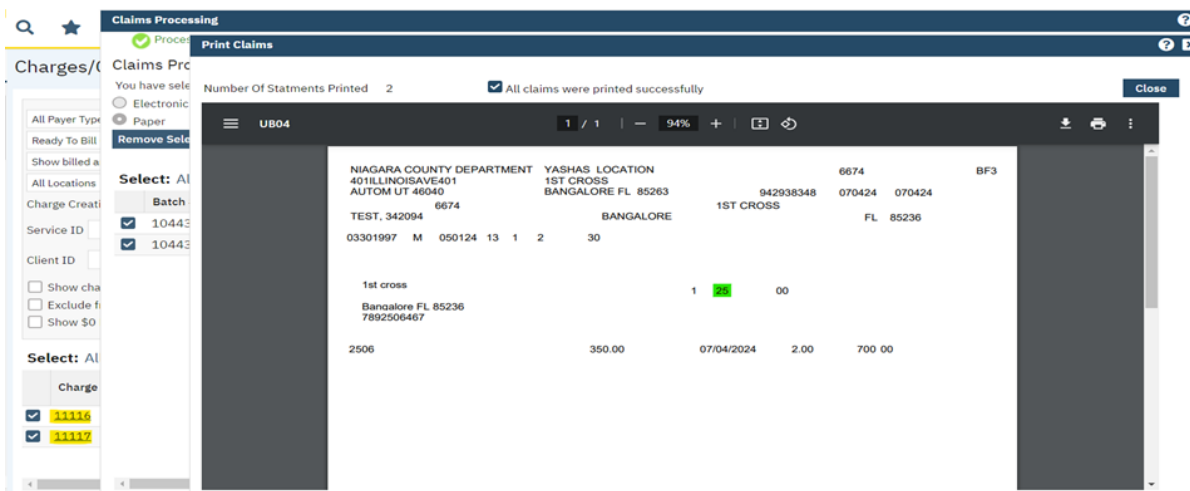
3. The Value Codes amount when processing multiple claims in a batch.

- When processing multiple claims in a batch if the values codes not getting summed up, then the Value Code Amount Type is always used as 'Exactly' under Value Code Amount Type Drop down.

Path: 'Administration' - 'Billing Setup'- 'Plans' - 'Plans' list Page – click on plan name hyperlink or new button 'Plans Details' screen - 'Value Codes' tab - 'Value Codes' section – 'Value Code Amount Type' drop down.



- Similarly in the UB 04 paper claims under box number 39.



4. The Value Codes amount when processing multiple claims in a batch and the value codes summing up.

- When processing multiple claims in a batch if the values codes are not summed up, then the Value Code Amount Type is always used as 'Per Bed Procedure Unit' under Value Code Amount Type Drop down.

Path: 'Administration' - 'Billing Setup' - 'Plans' - 'Plans' list Page – click on plan name hyperlink or new button 'Plans Details' screen - 'Value Codes' tab - 'Value Codes' section – 'Value Code Amount Type' drop down.

Claims Processing

Processed Successfully

Claim File Creation

You have selected 2 charges to be for

☒ Electronic ☐ Paper

Remove Selected Charges From Batch

Select: All, All on Page, No

Batch #

☐ 10447-Value Codes-HI...

☐ 10447-Value Codes-HI...

Charge

☒ 11116

☒ 11117

Claim File Creation

REF*EI*942938348
HL*2*1*22*0
SBR*P*18**VALUE CODES*****BL
NM1*IL*1*TEST*342094****MI*268686
N3*1ST CROSS
N4*BANGALORE*FL*85236
DMG*D8*19970330*M
REF*SY*353535347
NM1*PR*2*VALUE CODES*****PI*3652365242
N3*1ST CROSS
N4*BANGALORE*FL*85236
CLM*6674-17870*700***A:3**A*Y*I
DTP*434*R08*20240704-20240704
DTP*435*DT*202405011310
CL1*1*2*30
AMT*F3*700
REF*EA*6674
HI*ABK:F1010:U
HI*ABJ:F1010
HI*BE:A3::700*BE:1::00
HI*DR:F123
NM1*71*1*K*YASHAS****XX*1234567890
PRV*AT*PXC*2084P0800X
REF*OB*6789
LX*1
SV2*2506*HC:78925*700*UN*2
DTP*472*D8*20240704
REF*6R*17870
SE*40*000104470
GE*1*10447
IEA*1*000010447

- Similarly in the UB 04 paper claims under box number 39.

Claims Processing

Processed Successfully

Print Claims

You have selected

☒ Electronic ☐ Paper

Remove Selected

Select: All

Batch

☒ 1044E

☒ 1044E

Charge

☒ 11116

☒ 11117

Print Claims

Number Of Statements Printed 2 ☒ All claims were printed successfully

UB04

1 / 1 127% +

NIAGARA COUNTY DEPARTMENT YASHAS LOCATION 6674 BF3
401ILLINOISAVE401 1ST CROSS
AUTOM UT 46040 BANGALORE FL 85263 942938348 070424 070424
TEST, 342094 6674 BANGALORE 1ST CROSS FL 85236
03301997 M 050124 13 1 2 30
1st cross 1 50 00
Bangalore FL 85236
7892506467
2506 350.00 07/04/2024 2.00 700 00

Data Model Changes: A new column 'ProcedureRateID' is added in the 'ValueCodesByRevenueCodes' table.

Author: Debanjit Das

15. Core Bugs # 128209: EOB at Claim Level issue with Tertiary Payer billing.

Release Type: Fix | **Priority:** Medium

Navigation Path: 'Charges/Claims' -- Select a Charge Id and click on 'Electronic Claims' button.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When aggregating claims at the claim level, the logic did not consider multiple other insurers that were needed to. So, it would work for secondary billing but not for tertiary billing.

With this release, the logic of aggregating adjustments at the claim level is corrected to consider Other Insured Id's including tertiary billing.

Author: Debanjit Das

16. Core Bugs # 128347: 837 Institutional SV202-7 should be the RevenueCodeDescription for the charge.

Release Type: Fix | **Priority:** High

Navigation Path: 'Charges/Claims' -- Select a Charge ID and click on the 'Electronic Claims' button.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When a 'Revenue Code Description' was added for a Procedure Rate and the Charge was billed for an Institutional claim, then in the SV2 segment, this information was missing in the claim file.

With this release, the above mentioned issue is resolved and the logic is corrected to display the 'Revenue Code Description' in the SV2 segment of 837 Institutional claims.

Author: Yashas Kyadalappa

17. Core Bugs # 128346: Charges/Claims Screen- System Slowness when processing several Charge ID's under single batch.

Release Type: Fix | **Priority:** High

Navigation Path: 'My Office' -- 'Billing' - 'Charges/Claims' -- 'Charges/Claims' list page -- Select the Claim -- 'E-claim' button -- 'Process Now' button -- 'Create Claim File'.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. The system was loading slowly when processing the claims in the Charges/claims screen, which contained several Charge ID's under single batch.

With this release, the above-mentioned issue has been resolved. Now, the performance of the system has been improved when processing the claims in the Charges/claims screen, which contains several Charge ID's under single batch.

Author: Debanjit Das

18. Core Bugs # 128140: EAF Segment ordering incorrect.

Release Type: Fix | **Priority:** Medium

Prerequisite: A Client has 2 Coverage Plans.

Navigation Path 1: Select a Client – Go Search – Services – Create a Service -- Pay partial amount to the Primary and transfer the rest to the secondary coverage plan.

Navigation Path2: Go Search – Charges/Claims -- Select the secondary Charge Id and click on 'E-Claims' button.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. The EAF and DTP segment, for the #837OtherInsuredClaimLines cursor loop were out of order.

With this release, the above mentioned issue has been resolved. Now, the segment ordering in other insured loop at claim line level, has been corrected.

After the SVD line segments, the DTP for payment date and AMT*EAF for Patient Responsibility will appear in this order. AMT*EAF should equal sum of PR group code adjustments on primary plan, if any. If none, it will send 0.00.

Author: Sahana Gururaja

19. EII # 127546: Ability to properly populate 837P Claim Service Facility loop based on Claims format configuration.

Release Type: Change | **Priority:** Urgent

Prerequisites:

1) In the 'Plan Detail' screen, select 'HIPAA 837 Professional' claim format from the 'Standard E Claim Format' drop-down.

2) Create a record in the 'Claim Provider Override Details' screen for the 'Claim Service Facility' field.

3) Go to the 'Claims Format Configuration(s)' list page and click on the 837 Professional 'Claim Format Id' hyperlink.

4) In the "Claim Format Configuration Details" screen, go to the 'Rules' tab and Add a rule with 'Data Source' as required and the 'Data Values' as required, and in the 'Format Fields' field, select a newly implemented values Through below **path**:

Administration - Claims Format Configurations – Click on the required 'Claim FormatId' hyperlink (837Prof) -- Claims Format Configurations Details – Rule tab – Select the required combinations of Data Source, Data Values, and Format Fields – Insert/Modify – Save.

Navigation Path: 'My Office' – 'Charges/Claims'– select the required ChargeId and click on 'E Claim' button – click on 'Process Now' button in the 'Claim Processing' pop-up – click on 'Create Claim File' button – click on 'Save As' button in the 'Claim File Creation' pop-up screen.

Functionality 'Before' and 'After' release:

Purpose: Ability to properly populate 837P Claim Service Facility loop based on Claims format configuration.

With this release, the new options are added in the 'Format Fields' drop-down in the 'Claim Format Configuration Details' screen for the '837 Professional' claim format. Below are the newly added options and these are the Subcodes of the "CLAIMFORMATTYPE" Global Codes.

- 2310C-NM1-03 Name Last or Organization Name
- 2310C - N3 & N4 - Varies - SERVICE FACILITY Address 1
- 2310C - N3 & N4 - Varies - SERVICE FACILITY Address 2
- 2310C - N3 & N4 - Varies - SERVICE FACILITY City
- 2310C - N3 & N4 - Varies - SERVICE FACILITY State
- 2310C - N3 & N4 - Varies - SERVICE FACILITY Zip

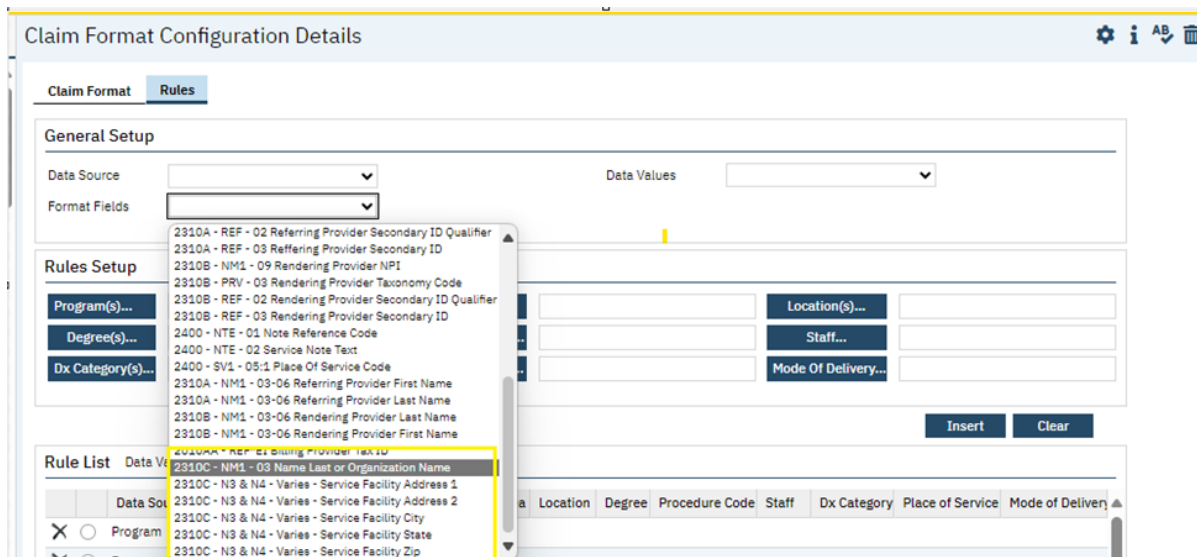
Now, when the user can configure a rule with the above format fields with the required "Data Source" and "Data Value", the system will fetch the required information and will be displayed on the claim file in the 'NM1*77' segment under the '2310C' loop.

If any one of the combinations is not added, then the system will fetch that particular field value as per the given value in the 'Claim provider override screen'.

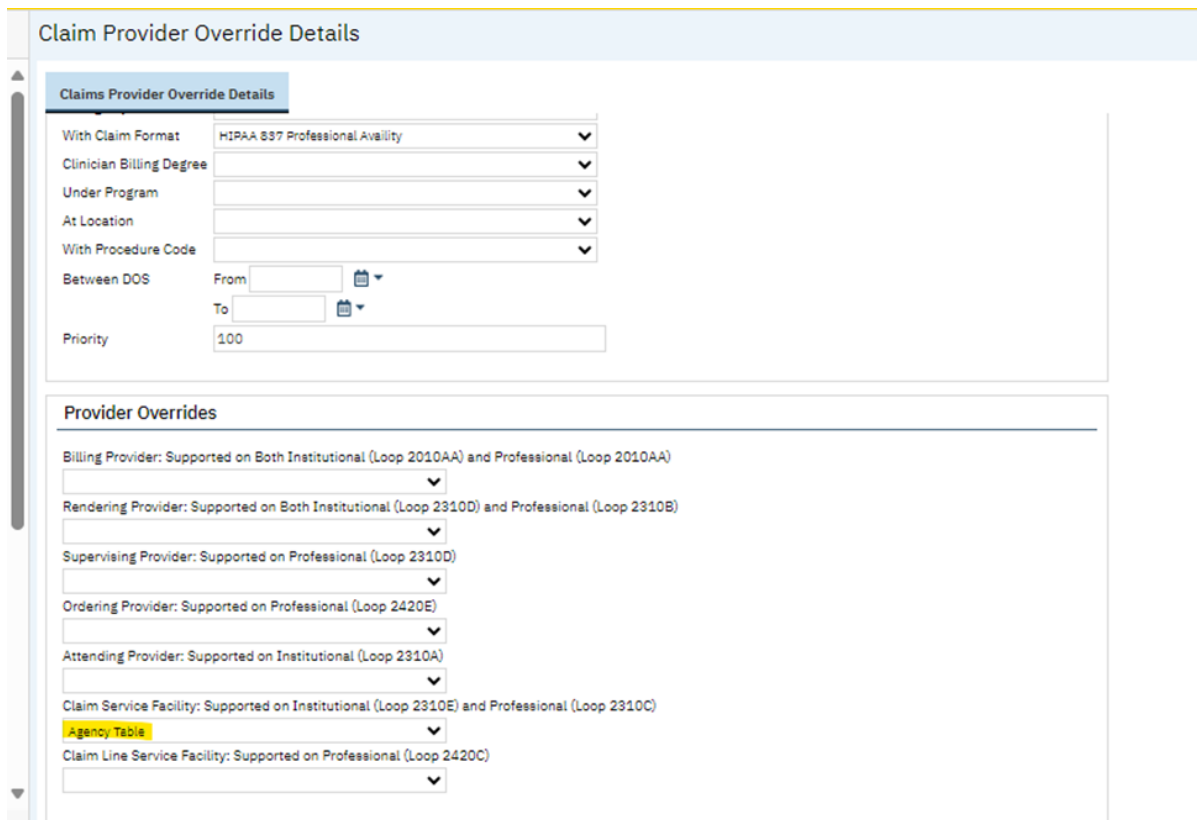
Example: Only a rule with the "2310C - N3 & N4 - Varies - SERVICE FACILITY Zip" option is added then on the claim file, under "2310C N4", the Zip Code will be from the 'Claims Format Configuration' rule, but the 'City and State' will be from the value that is added in 'Claim Provider Override' screen.

Note: To receive the '2310C' loop on the 837 P claims, there should be a set-up in the 'Claim Provider Override' screen with the field 'Claim Service Facility'. Then only the system will send the 'NM1*77' segment under the '2310C' loop. Then the system will override the 'Claim Service Facility' details from 'claim Provider Override' screen and will display the loop with the 'Claim Format Configuration' screen set-up.

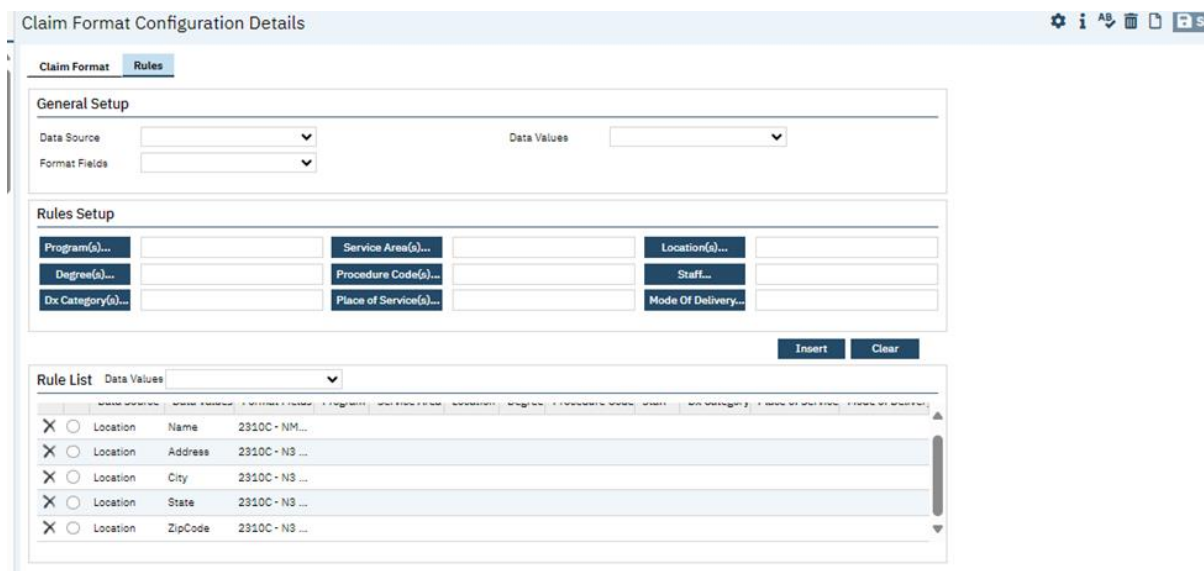
Screenshot of the newly added dropdown values.



Screen Shot of the set-up in 'Claim Provider Override Screen'.

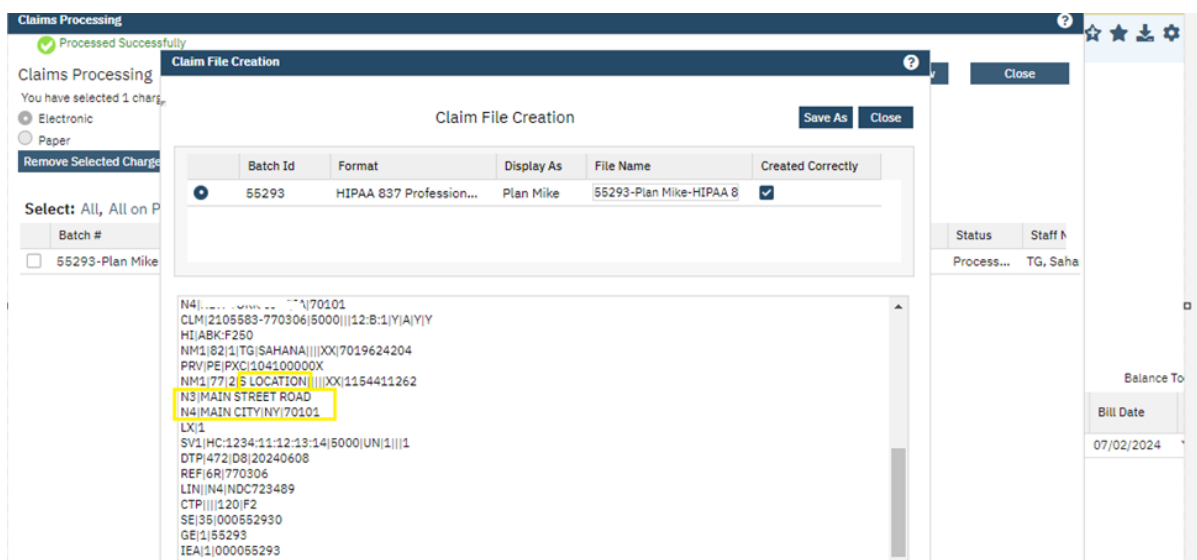


Configured the rules in the 'Claim Format Configuration Details' screen as below:



The screenshot shows the 'Claim Format Configuration Details' window. It has two tabs: 'Claim Format' and 'Rules'. The 'Rules' tab is active, showing a 'Rules Setup' section with fields for Program, Service Area, Location, Degree, Procedure Code, Staff, Dx Category, Place of Service, and Mode of Delivery. Below this is a 'Rule List' table with columns for Name, Address, City, State, and ZipCode. The table contains several rows, each with a radio button and a location name. The 'Data Values' dropdown is set to '2310C - N3 ...'.

Output on the 837 P claim, The NM1(03) field, N3, and N4 segments have the value from the 'Claim Format Configuration Details' screen set-up.



The screenshot shows the 'Claims Processing' window. It has a 'Claim File Creation' section with a table showing the batch ID, format, display as, file name, and created correctly. The table contains one row with the batch ID 55293, format HIPAA 837 Profession..., display as Plan Mike, file name 55293-Plan Mike-HIPAA 8, and created correctly checked. Below the table is a text area showing the claim file content, including segments N4, N3, and N4. The N3 segment is highlighted in yellow.

Note: To Receive "2310C - N3 & N4 - Varies - SERVICE FACILITY Address 2" on the N3 segment, then the address should be updated in the format of (char (13) + char (10)) in the respective table in the backend. Then on the claim file, the address 2 details will be displayed.

The Scenario of getting 'Address 2' on the claim file from the front end, will be delivered in the upcoming build. (This is tracked in the defect ticket - https://dev.azure.com/StreamlineHealthcareSolutions/SmartCare/_workitems/edit/402281)

Author: Yashas Kydalappa

20. Core Bugs # 128259: Charges/Claims: Both 'successfully processed claims' and 'claims with charge errors' as marked as 'Billed'.

Release Type: Fix | **Priority:** Medium

Prerequisite:

1. Process the claim batch which has 1 successfully processed and 1 has charge error, close the pop-up without creating the claims.
2. Make the Charge unready to bill for the charge which has charge error through the **path:**

'My Office' – 'Charges/Claims' – Click on the charge ID -- 'Charge Details' screen -- 'General' tab -- 'Status' section – uncheck 'Ready To Bill' checkbox then click on 'Save' button.
3. Run the 'Ready to Bill' job in the back end.
4. Create a claim file in which the batch has processed under 1st step (Prerequisite 1).

Navigation Path: 'My Office' -- 'Billing' - 'Charges/Claims' -- 'Charges/Claims' list page -- Select the 'Claim' -- 'E-claim' button -- 'Process Now' button -- 'Create Claim File'.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The system displayed claim batches that contained both 'successfully processed claims' and 'claims with charge errors' as 'Billed', after creating a claim file for the successfully processed charge ID under the same batch.

With this release, the above-mentioned issue has been resolved. Now, charges with errors will remain unbilled, and 'successfully processed charges' will be marked as billed.

Author: Namratha Nagaraj

21. EII # 127954: Changes for Billing Outpatient Services on Institutional Claims.

Release Type: Change | **Priority:** High

Navigation Path 1: 'Administration' menu — 'Programs' — Click on 'New' button—Enter required details—Click on 'Claims' tab—Click on 'Do Not send Admit/Discharge Date and hour' checkbox—Click on 'Save' button.

Navigation Path 2: 'Administration' menu — 'Programs' — Click on the 'New' button—Enter required details—Click on the 'Claims' tab—Select a value from the 'Referring Provider' dropdown —Click on the 'Save' button.

Navigation Path 3: 'Administration' menu — 'Plans' — Click on 'New' button—'Plan Details' Page will be opened—Enter all the required details —Select HIPAA 837 Institutional from the 'Standard Electronic Claim Format'— Select UB04 ' from the 'Standard Paper Claim Format'—Click on 'Save' button.

Navigation Path 4: 'My Office' menu – 'Charges/Claims' -- Select the 'Charge Id' – Click on 'E-Claims' button-- Click on 'Process Now' -- Click on 'Create Claim File'.

Navigation Path 5: 'My Office' menu – 'Charges/Claims' -- Select the 'Charge Id' – Click on 'Paper-Claims' button-- Click on 'Process Now' -- Click on 'Create Claim File'.

Functionality 'Before' and 'After' release:

Purpose: The Claims process to allow the billing of outpatient services on 837 Institutional claims.

With this release, the below implementation has been done:

1. During the 'Outpatient Services', under the 'Institutional' section of Claims Tab in the 'Program Details' screen, If the 'Do Not send Admit/Discharge Date and Hour' checkbox is checked, then the 'Admit/Discharge Date and Hour' value will not be displayed in the 'DTP01 segment' of 'Claims'.

Screenshot 1: Program Details screen:

Program Details

General

Rules

Staff

Occupancy

Reporting

Claims

Custom Fields

Institutional

☐ Do Not Send Admitting Diagnosis

☒ Do Not send Admit/Discharge Date and Hour

☐ Display Present on Admission in Service Diagnosis

Admission Source Code

Admission Type Code

Patient Status Code

Default Present on Admission Indicator

Referring Provider

JCCA, Test

Segment File:

Claim File Creation

1 chrg: N3*401ILINOISAVE401
N4*AUTOM*UT*460409999
REF*1B*873
Chrg: REF*E1*942303348
HL*2*1*22*0
SB*P*18**PLAN12*****BL
NM1*1L*1*SAHANA*GURURAJ*****MI*29374
I on P N3*1ST CROSS
N4*NEW YORK CITY*NY*90210
DMG*DB*19970704*F
n12-HI: REF*SV*435780987
N4*19980814162*****05163
N3*7TH MAIN
N4*NEW YORK CITY*NY*90210
CLM*1499-18222*250***11:A*A*Y*
CL1*3*D*30
AMT*F3*250
REF*EA*1499
H1*ABK*P25*****U
H1*BE*AS***250
NM1 72 2 PRADYAL NARAYANA 100 0913070
PR*AT*PKC*101Y0000X
REF*DB*8789
NM1*DN*1*ANARATHA*NAGARAJ
REF*1G*REFERRINGCLINICIAN
LV*1
SY2*AGF845*HC.ASD667435*250*UN*1
OT*P*12*DB*20220407
REF*6R*18222
SE*39*000105690
GP*1*10569
IEA*1*000010569

2. During the 'Outpatient Services', If the 'Do Not send Admit/Discharge Date and Hour' checkbox is not checked in the 'Claims' tab of the 'Program Details' screen (Refer to screenshot 1), then the 'Admit/Discharge Date and Hour' value will be displayed in the 'DTP01 segment' of the 'Claims'.

Segment File:

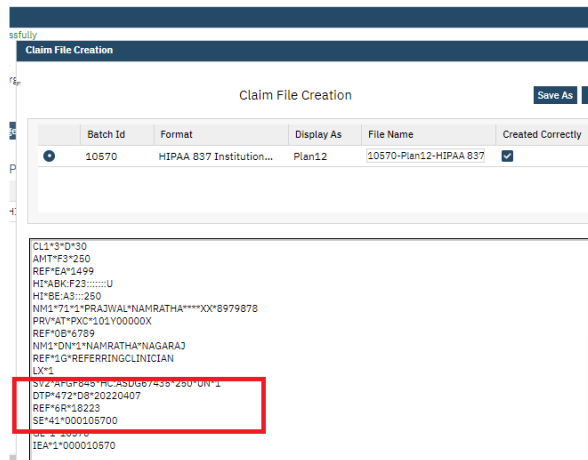
Claim File Creation

NM1^40^2^PLAN12^*****46^U0/U
HL^**20^1
PRV^B^PXC^I03K00000X
NM1^8S^2^NAGARA COUNTY DEPARTMENT OF MENTAL^*****B^1932166980
N3^40ILLINOISAVE401
N4^AUTOM^UT^460409999
REF^1B^073
REP^EI^042938348
HL^2^1^22^0
SBR^P^18^**PLAN12^*****BL
NM1^IL^1^SAHANAGA^GURURA^*****MI^29374
N3^ST CROSS
N4^NEW YORK CITY^NY^90210
DMG^D8^19970704^F
REF^SY^435780987
NM1^VR^2^PLAN12^*****PI^45436
N3^7TH MAIN
N4^NEW YORK CITY^NY^90210
CLM^1499-18223^250^**1A.1A.^*Y^I
DTP^43A^R06^20220407-20220407
DTP^43S^DT^202204070000
DTP^O96^TM^0000
CLL^3^D^30

REF^EA^1499
HI^ABK^F23^.....U
HI^BE.A3^...250
NM1^7^1^FRJAJVAL^NAMRATHA^*****XX^8797878
PRV^AUT^PXC^I01Y00000X
REF^OB^6789
NM1^DN^1^NAMRATHA^NAGARJ
REF^IG^REFERRINGCLINICIAN
LN^1
CMT^H^E060606-ASDC^C^0506060606

3. During the 'Inpatient Services', If the 'Client' is not enrolled in an 'Inpatient (Client Inpatient Visit)' then, the claims process will display the 'Client Program Enrolled Date' for the program selected in the 'Service'.

Segment File:

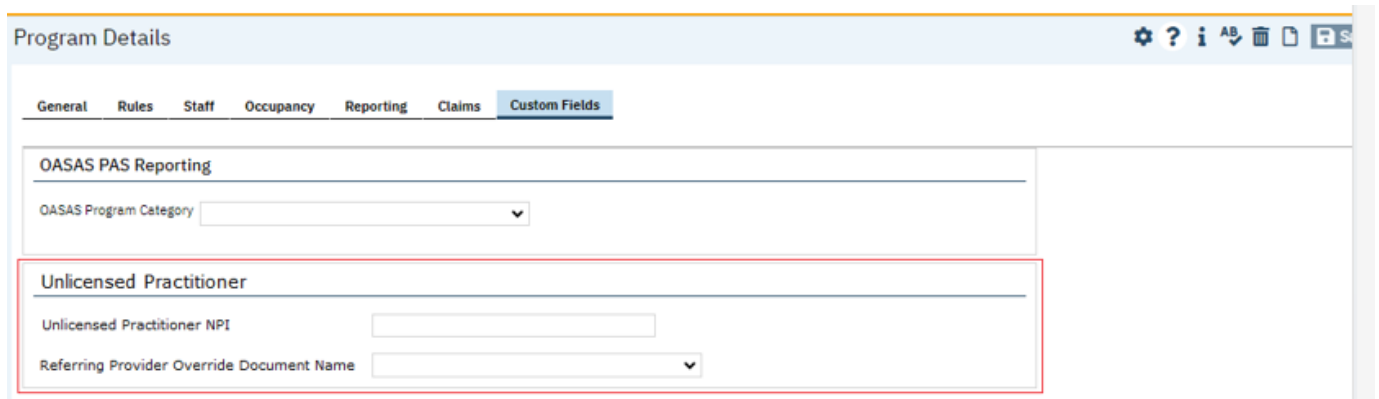


Batch Id	Format	Display As	File Name	Created Correctly
10570	HIPAA 837 Institution...	Plan12	10570-Plan12-HIPAA 837	<input checked="" type="checkbox"/>

```

CL1*3*0*30
AMT*F3*250
REF*EA*1499
HI*ABK*F23*U
HI*BE*43*250
NM1*72*1*PRAJWAL*NAMRATHA***XX*8979878
PRV*AT*PKC*101V00000X
REF*OB*6789
NM1*DN*1*NAMRATHA*MAGARA7
REF*IG*REFERRINGCLINICIAN
LX*1
SV2*AFG*645*PLASD087*35*250*UR*1
DTP*472*08*20220407
REF*AR*18223
SE*42*0000105700
IEA*1*000010570
  
```

4. If a document is selected in the "Referring Provider Override Document Name" dropdown field under the "Unlicensed Practitioner" section of the 'Custom Fields' tab of the 'Program Details' page, then the user who has signed it, that user's name will be displayed in the 'NM1*DN segment' (Refer the below Segment file screenshot) of 'Claims'.



Program Details

General Rules Staff Occupancy Reporting Claims **Custom Fields**

OASAS PAS Reporting

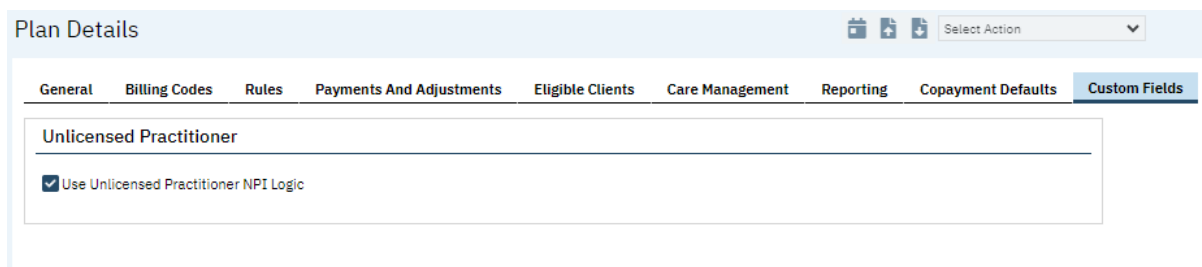
OASAS Program Category

Unlicensed Practitioner

Unlicensed Practitioner NPI

Referring Provider Override Document Name

Note: For "Unlicensed Practitioner" logic to work in Program Details screen, the below setup needs to be done in Plan Details screen.



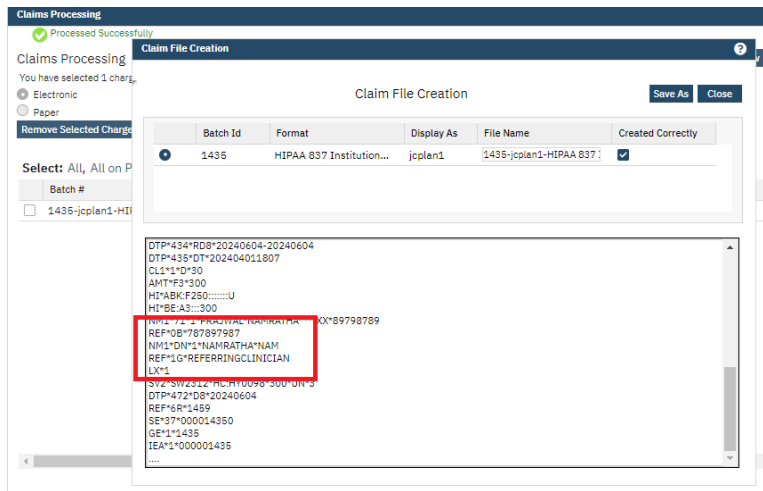
Plan Details

General Billing Codes Rules Payments And Adjustments Eligible Clients Care Management Reporting Copayment Defaults **Custom Fields**

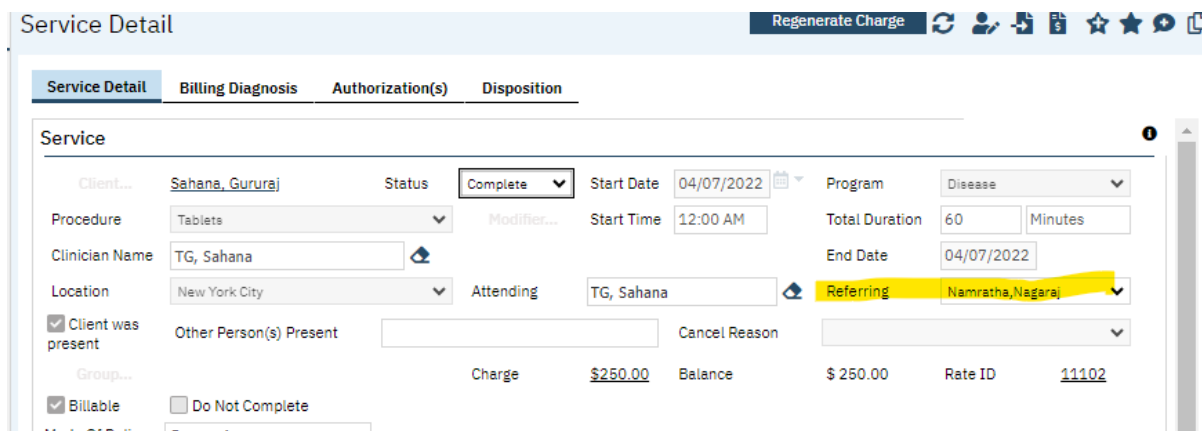
Unlicensed Practitioner

☒ Use Unlicensed Practitioner NPI Logic

Segment File:



5. If the 'Document' is not available in the "Referring Provider Override Document Name" dropdown list under the "Unlicensed Practitioner" section of the 'Custom Fields' tab of the 'Program Details' page and not signed, then the 'Referring Provider' will be fetched from the 'Referring' dropdown field of 'Service Detail' screen and displayed in segment file below.



Segment File:

Claim File Creation

Batch Id	Format	Display As	File Name	Created Correctly
10570	HIPAA 837 Institution...	Plan12	10570-Plan12-HIPAA 837	<input checked="" type="checkbox"/>

CL1*3*D*30
AMT*F3*250
REF*EA*1499
HI*ABK:F23:.....U
HI*BE:A3:..250
NM1*71*1*PRAJ*WAL*NAMRATHA****XX*8979878
PRV*AT*FXC*1*G1Y00000Y
REF*OB*6789
NM1*DN*1*NAMRATHA*NAGARAJ
REF*OB*6789
LX*1
SV2*AFG845*HC:ASDG67435*250*UN*1
DTP*472*D8*20220407
REF*6R*18223
SE*41*000105700
GE*1*10570

6. Values in the 'Referring Provider' drop-down are populated from the global code category 'REFERRINGCLINICIAN'.

Global Code Details

☒ Primary Driven
☒ Allow Addition By Affiliate
☒ Allow Deactivation By Affiliate

Code Details

Code ID: 25688 Code Name: Referring ,2 ☒ Active ☐ Cannot Modify Name or Delete Code
External Code 1: REFERRINGCLINICIAN External Source 1: Sort Order: 2 Code: Referring 2 Color:
External Code 2: External Source 2: Icon: Search or Select
Description:
Add/ Modify Subcodes...

Modify Clear

Code List ☒ Show Active Codes Only

	Code ID	Code Name	Code	Sort Order	Cannot Modify
X	25687	Namratha, Nagara	Referring 1	1	N
X	25688	Referring ,2	Referring 2	2	N
X	11134176	JCCA, Test	Referring 3	3	N

7. If the 'Document' is not available in the "Referring Provider Override Document Name" dropdown list of the 'Claims' tab of the 'Program Details' screen and is not signed, then the 'Referring Provider' will be selected in the 'Claims' tab of the 'Program Details' screen and displayed in the below segment file.

Service Detail
Regenerate Charge

Service Detail
Billing Diagnosis
Authorization(s)
Disposition

Service

Client... Sahana, Gururaj
Status Complete
Start Date 04/07/2022
Program Disease
Procedure Tablets
Modifier...
Start Time 12:00 AM
Total Duration 60 Minutes
Clinician Name TG, Sahana
End Date 04/07/2022
Location New York City
Attending TG, Sahana
Referring
☒ Client was present
Other Person(s) Present
Cancel Reason
Group...
Charge \$250.00
Balance \$ 250.00
Rate ID 11102
☒ Billable
Do Not Complete
Mode Of Delivery Face-to-face

Program Details

General
Rules
Staff
Occupancy
Reporting
Claims
Custom Fields

Institutional

☐ Do Not Send Admitting Diagnosis
☒ Do Not send Admit/Discharge Date and Hour
☐ Display Present on Admission in Service Diagnosis

Admission Source Code
Admission Type Code
Patient Status Code
Default Present on Admission Indicator
Referring Provider JCCA, Test

Segment File:

Claim File Creation

1 ch

Claim File Creation

Save As Close

Batch Id

Format

Display As

File Name

Created Correctly

10572	HIPAA 837 Institution...	Plan12	10572-Plan12-HIPAA 837	<input checked="" type="checkbox"/>
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CL1*3'D*30

AMT*F3*250

REF*EA*1499

HI*ABK*F23*****U

HI*BE*AS*250

NM1*71*1**PRAJWAL*NAME RATHA****XX*8979878

PR*AT*PVC*01Y00000X

REF*OB*6789

NM1*DN*1*30CA*TEST

REF*OB*REFERRING*CLINICIAN

LX*1

SV2*AFG*F845*HC*ASDG*67435*250*UN*1

OT*P*472*08*2022020407

REF*SR*18224

SE*41*000105720

GE*1*10572

IEA*1*000010572

|

Author: Roopa Hemanna

22. EII # 127799: Modify ssp_PMCclaimsProcessingData to allow for Millin extract.

Release Type: Change | **Priority:** Urgent

Navigation Path: N/A

Functionality 'Before' and 'After' release:

Note: This change is specific to the customer and will work for the customer environments who are using the 'Millin Extract Report' Claim Batch Creation.

With this release, the core changes are implemented for the Millin Extract report. The 'ssp_PMClaimsProcessingData' is modified to allow null CoveragePlanId and PayerId for Claim Batches and File Names in the Millin extract claim file.

Claims Provider Overrides

Reference No	Task No	Description
23	Core Bugs # 128166	'Claims Provider Overrides' list page not showing the 'Clinician Degree' in the column.

Author: Sahana Gururaja

23. Core Bugs # 128166: 'Claims Provider Overrides' list page not showing the 'Clinician Degree' in the column.

Navigation Path: 'Administration' – 'Claims Provider Overrides'.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When the user created a record in a 'Claim Provider Override Details' screen with the "Clinician Degree" option, the 'Claims Provider Overrides' list page was not showing the 'Clinician Degree' in the column.

With this release, the above-stated issue has been resolved. Now the 'Clinician Degree' column on the 'Claims Provider Overrides' list page will have the value selected in the Claims Provider Override Details screen.

Client Account

Reference No	Task No	Description
24	Core Bugs # 128382	Client Accounts screen slowness.

Author: Yashas Kydalappa

24. Core Bugs # 128382: Client Accounts screen slowness.

Release Type: Fix | **Priority:** Medium

Navigation Path: Client -- 'Finance' -- 'Client Account' -- 'Client Account' screen. -- Create and complete the service -- click on the 'Charge' hyperlink -- 'Ledger Entries' screen -- click on the Charge ID under grid -- 'Charge Details' screen -- 'General' tab -- 'Financial Information' section.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. The client account screen was loading slowly.

After this release, the above mentioned issue has been fixed. The client account screen is loading faster now after the code optimization.

Client Flags

Reference No	Task No	Description
25	Core Bugs # 127705	Client tracking episode triggers new flag every time in a scenario when user ends a previous flag of an episode and modifies Client information screen.
26	Core Bugs # 128276	Added changes to improve the performance of the ssp_PMClientNotesList.

Author: Girish Jayanna

25. Core Bugs # 127705: Client tracking episode triggers new flag every time in a scenario when user ends a previous flag of an episode and modifies Client information screen.

Release Type: Fix | **Priority:** Medium

Prerequisites: Create a Tracking Protocol with Episode start.

Navigation Path: Client search - 'Client Flags (Client)'

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When a user ended a previously created flag with the episode Start Tracking Protocol, a new flag was created whenever the user modified the client information screen.

With this release, the above issue has been resolved. Now, when a user ends a previously created flag with the episode Start Tracking Protocol, a new flag will not be created whenever the user modifies the client information screen.

Author: Girish Jayanna

26. Core Bugs # 128276: Added changes to improve the performance of the ssp_PMClientNotesList.

Release Type: Fix | **Priority:** Medium

Navigation Path: Client -- 'Client Flags' -- Client Flags list page.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The indexes were missed in the few columns of "ClientNotes", "ClientNoteAssignedRoles".

With this release, the above-mentioned issue has been resolved. Now, Indexes are added to few columns in the table "ClientNotes", "ClientNoteAssignedRoles" and made the below changes in the Stored procedure (ssp_PMClientNotesList) logic to improve the performance.

- Commented on the TrackingProtocols LEFT JOIN condition as this table is not required.
- Changed FlagTypes table LEFT JOIN to JOIN as Notetype is required for CClientFlag creation.
- Added index to the missing columns in the clientnotes, ClientNoteAssignedRoles table.

Data Model Changes: Index included to the missing columns in 'ClientNotes' table and 'ClientNoteAssignedRoles' table.

Client Information (C)

Reference No	Task No	Description
27	Core Bugs # 128134	Client information(C): users are not getting the results in the 'County of Residence' field.
28	Core Bugs # 128380	Changes to the Primary Clinician and Primary Physician Staff dropdown to Typeable search in the 'Client Information(C)' page.

Author: Sachin Ranganathappa

27. Core Bugs # 128134: Client information(C): users are not getting the results in the 'County of Residence' field.

Release Type: Fix | **Priority:** Medium

Navigation Path: Client Search - Client Information - Demographics- Living Arrangement section - 'County of Residence' of residence field.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the client information screen, the users were not getting the results for the 'County of Residence' field under the Demographics tab, i.e. auto suggestions were not working for the 'County of Residence' field.

With this release, the above-mentioned issue has been resolved. Now, in the client information screen, the users are getting the results for the 'County of Residence' field under the Demographics tab, when users enter the 3 letters and hit the spacebar.

Author: Sachin Ranganathappa

28. Core Bugs # 128380: Changes to the Primary Clinician and Primary Physician Staff dropdown to Typeable search in the 'Client Information(C)' page.

Release Type: Fix | **Priority:** Medium

Prerequisite:

1. The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is used to change the dropdown fields as type-able search textbox.

A) When the key-value is set to "Yes", then staff drop-downs will display typeable search text boxes instead of a drop-down.

B) When the key-value is set to "No", then the staff drop down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behavior.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behavior, i.e., the same as the key value is "No".

Navigation Path: 'Client' Search – 'Client Information(C)' – 'General Information' tab – 'Primary Clinician' and 'Primary Physician' fields.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. In the 'Client Information(C)' page, 'Primary Clinician' and 'Primary Physician' were loaded with Staff dropdown. When there were a large number of staff records, this was causing performance issue.

With this release, the above-mentioned issue has been resolved. In the 'Client Information(C)' page, a 'Typeable Search box' for the 'Primary Clinician' and 'Primary Physician' field has been implemented, when the System configuration key DisplayStaffAsTypeableSearchTextBox' is set to "Yes".

Client Orders

Reference No	Task No	Description
29	Core Bugs # 128212	One blank page is displayed in the 'Client Order' PDF.
30	Core Bugs # 128344	Client Orders - Slowness issue
31	Core Bugs # 128351	Client Orders: The grid does not list Multiple Lab Orders.
32	EII # 127428	To Capturing Dispensed Date and Time when Dispensed from MAT Management Details screen.

Author: Chaithali Patil

29. Core Bugs # 128212: One blank page is displayed in the 'Client Order' PDF.

Release Type: Fix | **Priority:** High

Navigation Path 1: Administration -- Orders -- Click on 'New' – Select any order type - fill all required fields – Click on 'Save'.

Navigation Path 2: Client -- Client Order– Click on 'New' – search for (Navigation Path 1) order – fill all required fields – insert order in the grid – Click on 'Save' – Sign the 'Client Order'.

Functionality Before and & After Release:

Before this release, here was the behaviour. When the user signed the 'Client Order', one blank page was displayed in the 'PDF' and only 'Client ID' was printed in it.

With this release, the above-mentioned issue has been Resolved. Now, the blank page is not displayed in the 'PDF' when the user signs the 'Client Order'.

Author: Sithara Ponnath

30. Core Bugs # 128344: Client Orders - Slowness issue.

Release Type: Fix | **Priority:** Urgent

Navigation Path: 'Client' -- 'Client Orders' screen -- Search and select an order -- Enter required data -- Click on the 'Insert' button.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When a user clicked on the 'Insert' button after selecting an order in the 'Client Orders' screen, there was a slowness issue, and the 'Page Unresponsive' message was displayed.

With this release, the above-mentioned issue has been fixed and now the orders can be inserted in the Client Orders screen without any slowness issue.

Author: Madhu Basavaraju

31. Core Bugs # 128351: Client Orders: The grid does not list Multiple Lab Orders.

Release Type: Fix | **Priority:** Medium

Navigation Path: 'Client' search – 'Client Orders' List page – click on 'New' icon – 'Client Order' detail screen – 'Order' tab – search and select Order – enter required fields – Insert - 'Order Set' tab – select multiple Lab Orders – enter required fields - Insert.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. When a user attempted to insert multiple orders simultaneously from the 'Order set' tab in the 'Client Order' details screen, the orders were not inserted, or mixed up all order information into a single order.

With this release, the above-mentioned issue has been fixed. Now, in the 'Client Order' details screen, all selected Lab orders from the 'Order Set' tab are inserted correctly into the grid without any issue.

Author: Varsha Patil

32. EII # 127428: To Capturing Dispensed Date and Time when Dispensed from Management Details screen.

Release Type: Change | **Priority:** High

Navigation Path: N/A

Functionality 'Before' and 'After' release:

Purpose: 'Ability to determine those patients that received medication and that patient has been identified as being incarcerated.

With this release, a new column 'DispensedDateTime' is added to MedAdminRecords and MATRedisponseDetails tables to store Dispense Date and Time upon Dispense and Re-dispense of a medication. The data is recorded for below scenarios:

- 1.Face to Face dispense: The Dispense Date and Time will be stored in 'DispensedDateTime' column of MedAdminRecords table.
2. Take Home dispense: The Dispense Date and Time will be stored in 'DispensedDateTime' column of MedAdminRecords table.
- 3.Re-Dispense: The Dispense Date and Time will be stored in 'DispensedDateTime' column of MATRedisponseDetails table.

Data Model Changes:

1. New column **DispensedDateTime** is added to **MedAdminRecords** table.
- 2.New column **DispensedDateTime** is added to **MATRedisponseDetails** table.

Client Search

Reference No	Task No	Description
33	Core Bugs #128447	'Staff Calendar' screen : User was unable to schedule a service entry for a client, due to an error message.
34	Core Bugs # 128353	Modify the 'Primary Clinician Search' dropdown fields to Typeable search textbox fields.
35	Core Bugs # 128356	Performance issue When the Client search pop up was loaded with huge data of clients.

Author: Savitha Siddaraju

33. Core Bugs # 128447:'Staff Calendar' screen: User was unable to schedule a service entry for a client, due to an error message.

Release Type: Fix | **Priority:** Urgent

Prerequisite:

1. Ensure that user has not opened any client in application.
2. The user is able to open the 'Staff Calendar' screen.

Navigation Path: 'My Office' -- 'Staff Calendar' -- 'SmartCare' popup -- New entry type -- select 'New Service Entry' radio button -- click on 'OK' button -- 'Client search popup' -- perform three way search by entering First Name, Last Name, SSN, DOB or search a client through 'Client ID Search' button - click on 'Select' button.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. On 'Staff Calendar' screen, when the user clicked on new Service to schedule a service entry for a client, the below mentioned error was displayed.

Error: "Input string was not in a correct format"

With this release, the above-mentioned issue has been resolved. Now, the user is able schedule a service entry for a client through 'Staff calendar' without any error.

Author: Akshay Vishwanath

34. Core Bugs # 128353: Modify the 'Primary Clinician Search' dropdown fields to Typeable search textbox fields.

Release Type: Fix | **Priority:** High

Prerequisites:

1. The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is used to change the dropdown fields as typeable search textbox.

A) When the key-value is set to "Yes", then staff drop-downs will display typeable search text boxes instead of a drop-down.

B) When the key-value is set to "No", then the staff drop down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behaviour.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behaviour, i.e., the same as the key value is "No".

2. The Existing System Configuration Key 'ApplyStaffAccessRule' is used to apply the rule for 'StaffAccessRules' permission setup.

A) When the key-value is set to "No", the "StaffAccessRules" permission will not be applied. This will be the default value of the key as it drives the existing behavior.

B) When the key-value is set to "Yes", the "StaffAccessRules" permission will be applied.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behavior, i.e. same as the key value being "No".

Navigation Path 1: Login to SmartCare - 'Client Search Pop-up'

Navigation Path 2: 'Administration- 'Configuration Keys' list page – 'Configuration Key Details' screen.

Navigation Path 3: 'Administration- 'Staff/Users' list page – 'Staff Details' – 'Roles/ Permissions' – 'Permission' section – Select the Permission Type as 'StaffAccessRules' – click 'Apply Filter' button.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In 'Client Search Popup', the 'Primary Clinician Search' dropdowns were listed with all the staff and if the system had a large number of qualifying staff values, then it was causing the page to freeze while selecting the dropdown values.

With this release, the above-mentioned issue has been resolved. Now, when System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is set to 'Yes', the 'Primary Clinician Search' fields will be displayed as Typeable search textbox. Also, to limit the data loaded in the fields, the below mentioned permission type is applied to display the values in the 'Primary Clinician Search' typeable search text fields.

Permission Type: StaffAccessRules

Permission Item:

1. AllStaff
2. LimitedStaff

- a) If the logged in staff has "LimitedStaff" Access Rule, then the typeable search textbox displays the staff who are associated with any of the Program that the logged in staff is also associated with.
- b) If the logged in staff has "AllStaff" Access Rule, then it will display all the staff in the typeable search textbox.
- c) If the logged in staff has both "LimitedStaff" and "AllStaff" Access Rule, then "AllStaff" takes Precedence.

Author: Praveen Gangadhara

35. Core Bugs # 128356: Performance issue When the Client search pop up was loaded with huge data of clients.

Release Type: Fix | **Priority:** Medium

Navigation Path: Client Search pop-up - Perform 3 way search - Observe the performance.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When the Client search pop up was loaded with huge data of clients in the SmartCare, it was causing a performance issue.

With this release, the above issue has been resolved. Now, the ssp_SCClientSearch is Optimized to improve the performance when the Client search action is performed.

Data Model Changes:

Index is added in ClientType, OrganizationName columns in the Clients table.

Index is added in AddressType column in the ClientAddresses table.

Index is added in AllowSearch column in the ClientAliases table.

Compliance Batch List page

Reference No	Task No	Description
36	Core Bugs # 128180	Issue in Compliance Batch List Page actions.

Author: Santhosh Krishnegowda

36: Core Bugs # 128180: Issue in Compliance Batch List Page actions.

Release Type: Fix | **Priority:** Medium

Navigation Path: 'My Office' -- 'Compliance Batch List page' – 'Action' dropdown.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. In the Compliance Batch List Page, when the user performed

Manually Accept Batch/Manually Cancel Batch/Manually Reject Batch from Action dropdown, Action was not changing the status of the Batch.

With this release, the above-mentioned issue has been resolved. Now, the action is changing the status of the Batch when the user performs Manually Accept Batch/Manually Cancel Batch/Manually Reject Batch from Action dropdown.

Coverage Plans

Reference No	Task No	Description
37	EII #128306	The 'Verified By' drop down is changed to Typeable search text box in the 'Client Plans' screen.

Author: Shivakanth Moger

37. EII #128306: The 'Verified By' drop down is changed to Typeable search text box in the 'Client Plans' screen.

Release Type: Change | **Priority:** Urgent

Prerequisite: The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is used to change the dropdown fields as typeable search textbox.

A) When the key-value is set to "Yes", then staff drop-downs will display typeable search text boxes instead of a drop-down.

B) When the key-value is set to "No", then the staff drop down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behaviour.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behaviour, i.e., the same as the key value is "No".

Navigation Path: Log in to 'SmartCare' – select any client – 'Coverage' – 'Coverage' screen – 'New' or click on any record of the plan name hyperlink – 'Plan Details' page.

Functionality 'Before' and 'After' release:

Purpose: The staff dropdowns are not responsive when there are large number of active staff in the environment. Now the typeable search text box is implemented for better system performance.

With this release, the 'Verified By' drop down is changed to Typeable search text box in the 'Client Plans' screen. This change will occur when the system configuration key 'DisplayStaffAsTypeableSearchTextBox' is set as 'Yes'.

Client Plans

Contract Scanning [User Icon] [Settings Icon] [Help Icon] [Info Icon] [AB Icon] [Trash Icon] [Print Icon] [Save Icon]

General Claim Information Copayment Monthly Deductible

☐ The Client Has Monthly Deductible
Monthly Deductible Last Met

Comment

COB History

Start Date	End Date	COB	User	Modified On
No data to display				

Eligibility Verification

Date Last Verified [Calendar Icon]

Verified By APITest,testing [Refresh Icon]

Electronic Eligibility Verification

Payer [Dropdown] Insurance Id [Text] [Verify...]

Request Start/End Date	Plan	Verified On	Response	Insured Id	Plan Start Date	Plan End
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Note: When the system configuration key 'DisplayStaffAsTypeableSearchTextBox' is set as 'No', then the existing behaviour is retained.

Dashboard

Reference No	Task No	Description
38	Core Bugs # 128350	Widget Re-ordering issue.

Author: Kiran Tigarimath

38. Core Bugs # 128350: Widget Re-ordering issue.

Release Type: Fix | **Priority:** Urgent

Navigation Path: 'Login' - 'Dashboard' Screen.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. When the user tried to refresh or navigate from any other screen to 'Dashboard' screen for the second time, all the widgets were getting aligned to the left row of the 'Dashboard' screen.

With this release, the above-mentioned issue is resolved. Now, all the widgets will retain in the same position even after refreshing or navigating from any other screen to 'Dashboard' screen.

Disclosure/Requests

Reference No	Task No	Description
39	Core Bugs # 128271	Disclosure Authorized by Releases dropdown list is not displayed in the Disclosure/Request Details screen.
40	Core Bugs # 128290	'Disclosures/Requests' list pages: The page gets freeze due to a large amount of data being loaded in the 'Disclosed By' and 'Assigned To' dropdowns.

Author: Akshay Vishwanath

39. Core Bugs # 128271: Disclosure Authorized by Releases dropdown list is not displayed in the Disclosure/Request Details screen.

Release Type: Fix | **Priority:** High

Navigation Path: 'Client' -- 'Disclosures/Requests' document -- 'Disclosure/Request Details' -- 'Disclosure Authorized by Releases' dropdown – Select any value from the dropdown list.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. When the user navigated to another screen after selecting the 'Disclosure Authorized by Releases' dropdown value from the Disclosure/Request Details' screen and navigated back to the 'Disclosure/Request Details' screen, the dropdown list was not displayed.

With this release, the above-mentioned issue has been resolved. Now, the dropdown list is retaining the selected values when the user navigates back to the Disclosure/Request Details screen from another screen.

Author: Santosh Huggi

40. Core Bugs # 128290: 'Disclosures/Requests' list pages: The page gets freeze due to a large amount of data being loaded in the 'Disclosed By' and 'Assigned To' dropdowns.

Release Type: Fix | **Priority:** Medium

Prerequisites:

The Existing System Configuration Key 'ApplyStaffAccessRule' is used to apply the rule for 'StaffAccessRules' permission setup.

A) When the key-value is set to "No", the "StaffAccessRules" permission will not be applied. This will be the default value of the key as it drives the existing behaviour.

B) When the key-value is set to "Yes", the "StaffAccessRules" permission will be applied.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behaviour, i.e. same as the key value being "No".

Navigation Path 1: 'Client' – 'Disclosures/Requests' list page – 'Disclosed By' and 'Assigned To' dropdowns.

Navigation Path 2: 'My Office' – 'Disclosures/Requests' list page – 'Disclosed By' and 'Assigned To' dropdowns.

Navigation Path 3: 'Administration' – 'Configuration Keys' list page – 'Configuration Key Details' screen.

Navigation Path 4: 'Administration' – 'Staff/Users' list page – 'Staff Details' – 'Roles/ Permissions' – 'Permission' section – Select the Permission Type as 'StaffAccessRules' – click 'Apply Filter' button.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In 'Disclosures/Requests' list page, the 'Disclosed By' and 'Assigned To' dropdowns were listed with all the staff and if the system had a large number of qualifying staff values, then it was causing the page to freeze while selecting the dropdown values.

With this release, the above-mentioned issue has been resolved. Now, in the 'Disclosures/Requests' list page, to limit the data loaded in the staff dropdowns, the below mentioned permission type is applied to display the values in the 'Disclosed By' and 'Assigned To' dropdowns.

Permission Type: StaffAccessRules

Permission Item:

- 1.AllStaff
- 2.LimitedStaff

- a) If the logged in staff has "LimitedStaff" Access Rule, then the staff drop down displays the staff who is associated with any of the Program that the logged in staff is also associated with.
- b) If the logged in staff has "AllStaff" Access Rule, then retain the existing functionality which is to display all the staff in the drop down.
- c) If the logged in staff has both "LimitedStaff" and "AllStaff" Access Rule, then "AllStaff" takes Precedence.

Document Codes

Reference No	Task No	Description
41	Core Bugs # 128227	All Documents: Alignment issue is present in the 'Document' section of the 'Document Codes Detail' Screen.
42	Core Bugs # 128398	Getting an error message, while trying to set the staff in 'Default Staff to Acknowledge' field under Document Codes Detail screen.
43	EII # 127468	'Document Codes Detail' screen: Added new radio button fields in 'Documents/Service Notes' section.

Author: Akshay Vishwanath

41: Core Bugs # 128227: All Documents: Alignment issue is present in the 'Document' section of the 'Document Codes Detail' Screen.

Release Type: Fix | **Priority:** Medium

Navigation Path: 'Go search' – 'Document Codes (Administration)' – 'Document Code' list page - Open any 'Document Code' – 'Document Codes Detail' screen.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. An alignment issue was present for the 'Description', 'Schema', 'HTML' and 'Text Template' fields in the "Document" section of the "Document Codes Detail" screen

With this release, the above-mentioned issue has been resolved. The 'Document' section is now properly displayed without any alignment issue for the 'Description', 'Schema', 'HTML' and 'Text Template' fields under the 'Document Codes Detail' Screen.

Author: Sachin Ranganathappa

42: Core Bugs # 128398: Getting an error message, while trying to set the staff in 'Default Staff to Acknowledge' field under Document Codes Detail screen.

Release Type: Fix | **Priority:** High

Navigation Path: Document Codes - Click on Document Name - "General" tab - "Details" section - "Default Staff To Acknowledge" field.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the Document Codes Detail screen, when the user tried to set the staff in 'Default Staff to Acknowledge' field, the below error message was displayed:

Error message: "Error occurred during dataset merge process at server side, please contact system administrator for further assistance".

With this release, the above-mentioned issue has been resolved. Now, the users are able set the staff in 'Default Staff to Acknowledge' field under Document Codes Detail screen without any error message.

Author: Santosh Huggi

43. EII # 127468: 'Document Codes Detail' screen: Added new radio button fields in 'Documents/Service Notes' section.

Release Type: Change | **Priority:** Urgent

Navigation Path: 'Administration' – 'Document Management' list page – Search for required documents and click on the hyperlink of 'Document Name' – 'Document Codes Detail' screen – 'General' tab – 'Documents/Service Notes' section.

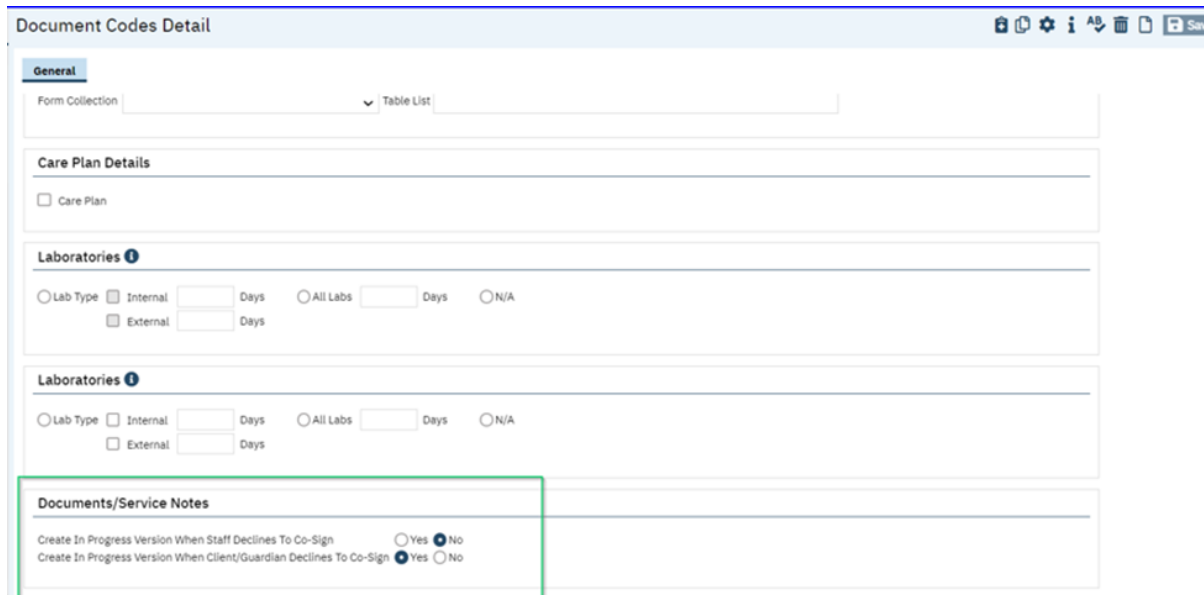
Functionality 'Before' and 'After' release:

Purpose: To improve the Co-Signer processes and better ensure compliance.

With this release, in 'Document Codes Detail' screen, under the 'Documents/Service Notes' section, two new radio button fields have been added, each with 'Yes' and 'No' options:

- Create In Progress Version When Staff Declines To Co-Sign

- Create In Progress Version When Client/Guardian Declines To Co-Sign



Data Model Changes:

'CreateInProgressVersionStaffDeclinesToCoSign' column included in 'DocumentCodes' table.

'CreateInProgressVersionClientGuardianDeclinesToCoSign' column included in 'DocumentCodes' table.

Documents

Reference No	Task No	Description
44	Core Bugs # 128228	Encounter Form Issue (time): To Remove time field for Session Start Date and Session End Date
45	Core Bugs # 128417	Diagnosis Document - Red error when entering a description and clicking magnifying glass
46	EII # 127176	Implementing a 'Health-Related Social Needs Screening Tool' document with required field validations.
47	EII # 128041	Implementing 'CSSRS Risk Assessment Lifeline Crisis Center' document
48	Core Bugs # 128299	Document Listpage: All staffs were loaded in the All Authors... dropdown
49	Core Bugs # 128188	Unable to add custom fields to care plan review document
50	Core Bugs # 127477	The index is missing from the source database to enhance the performance of multiple reports from SmartCare and SmartCareRX.
51	EII # 126234	The 'Eating Disorder Examination Questionnaire- EDE QS' has been implemented.

52	EII # 127471	Implemented additional Co-signer functionality when a Co-Signer (Staff/Client/Guardian) declines to sign
53	Core Bugs # 128395	ISP Interventions still Initializing Inactive Auth Codes in the PDF
54	EII # 126133	Changes in Government Performance and Results Act Outcome Measure
55	Core Bugs # 128184	The Program name is not displaying completely in the Goal Plan RDL
56	EII # 127745	Implementing the expiration date defaults to 1 year from the start date (which currently defaults to today's date), but the user can change it.
57	EII # 126881	Implementation of a new 'Obsessional Compulsive Inventory-Revised' document.
58	EII # 127847	Implementation of two documents namely - 'Fall Risk' and 'Fall Risk Daily Assessment' documents.
59	Core Bugs # 128462	Referral Document: Modify the 'From Staff' and 'Receiving Staff' dropdown fields to Typeable search textbox fields.

Author: Akshay Vishwanath

44: Core Bugs # 128228: Encounter Form Issue (time): To Remove time field for Session Start Date and Session End Date.

Release Type: Fix | **Priority:** Medium

Navigation Path: Client - Go Search — Encounter Form – New.

Functionality 'Before' and 'After' Release:

Before this release, here was the behaviour. In the Encounter Form Page, under Service section, time field was displayed for Session Start Date and Session End Date.

With this release, the above-mentioned issue has been resolved. Now, in the Encounter Form Page under Service section, time Field is removed for Session Start Date and Session End Date.

Data Model Changes:

The following data model changes are done in the table DocumentEncounterForms

- 1) SessionStartDate - Altered the data type from DateTime to Date and Changed Column Name from SessionStartDateTime to SessionStartDate
- 2) SessionEndDate - Altered the data type from DateTime to Date and Changed Column Name from SessionEndDateTime to SessionEndDate
- 3) column SessionStartTime is dropped if it exists.
- 4) column SessionEndTime is dropped if it exists.

Author: Akshay Vishwanath

45: Core Bugs # 128417: Diagnosis Document - Red error when entering a description and clicking magnifying glass.

Release Type: Fix | **Priority:** High

Navigation Path: Client - Go Search - Diagnosis Document(Client) - New - Enter Diagnosis in the Description field - Click on Magnifying glass.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the Diagnosis Document, when the user entered Diagnosis in the Description field and clicked on Magnifying glass, the below issues were observed:

1. Error: Please enter some text in Code/ Description field to search in the pop- up was displayed.
2. The entered text was not retained in the Description field.

With this Release, the above-mentioned issues have been resolved. Now, on clicking Magnifying glass,

- 1: Error is not Displaying and Diagnosis ICD Ten popup is displaying.
- 2: The entered text is retained in the Description field.

Author: Akshay Vishwanath

46: EII # 127176: Implementing a 'Health-Related Social Needs Screening Tool' document with required field validations.

DISCLAIMER: The document is only available to those customers who have purchased an annual subscription. It is a premium add-on to SmartCare and not included in SmartCare Base Subscription. If you are interested in learning more about this document, please contact your account manager.

Release Type: New Functionality | **Priority:** On Fire

Navigation Path: 'Client' - 'Documents' list page – 'Health-Related Social Needs Screening Tool' document.

Functionality 'Before' and 'After' release:

Purpose: Health-Related Social Needs Screening Tool is required for CCBHCs and SDOH quality measure reporting.

With this release, a new 'Health-Related Social Needs Screening Tool' document has been implemented with the required fields and validations as mentioned below:

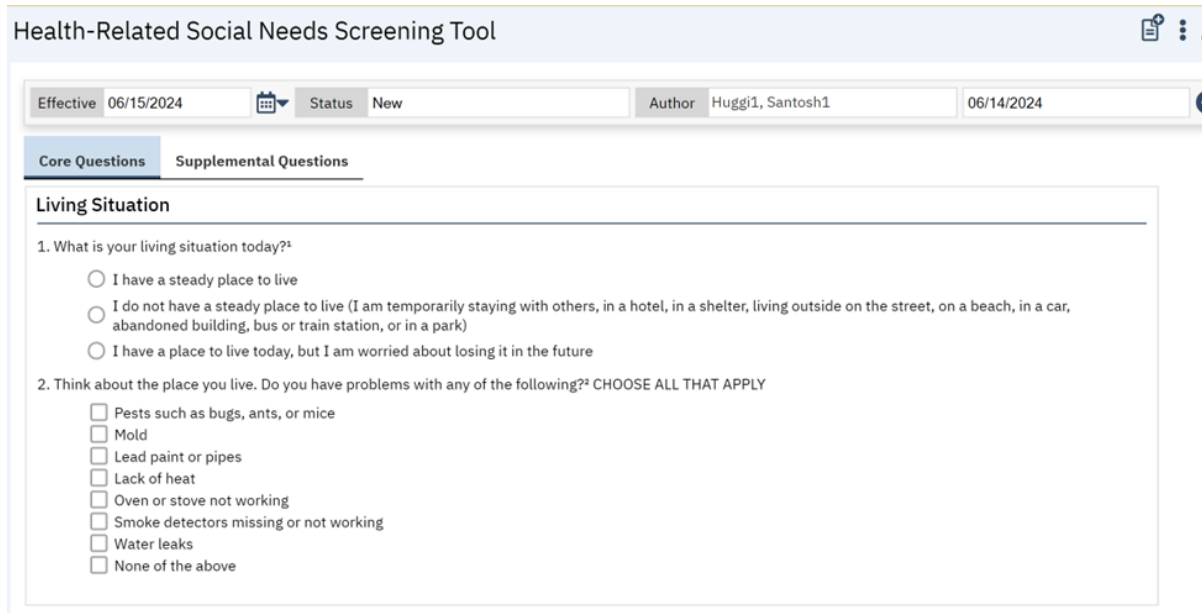
Health-Related Social Needs Screening Tool:

In the 'Health-Related Social Needs Screening Tool' screen, the below mentioned tabs, sections and fields with its radio buttons will be displayed:

Health-Related Social Needs Screening Tool document contains two tabs namely - '**Core Question**' and '**Supplemental Questions**'.

- **Core Question Tab:** It contains sections, namely 'Living Situation', 'Food', 'Transportation', 'Utilities', 'Safety', and 'Scores' Section:

Living Situation' Section: The mentioned fields will be displayed.



The screenshot shows the 'Health-Related Social Needs Screening Tool' interface. At the top, there's a header bar with the title. Below it, a navigation bar includes tabs for 'Core Questions' and 'Supplemental Questions'. The 'Core Questions' tab is active. The main content area is titled 'Living Situation' and contains two questions. Question 1 is a radio button question asking about the current living situation. Question 2 is a multi-select checkbox question asking about problems with the living environment.

Effective 06/15/2024 Status New Author Huggi1, Santosh1 06/14/2024

Core Questions Supplemental Questions

Living Situation

1. What is your living situation today?¹

- ☐ I have a steady place to live
- ☐ I do not have a steady place to live (I am temporarily staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, abandoned building, bus or train station, or in a park)
- ☐ I have a place to live today, but I am worried about losing it in the future

2. Think about the place you live. Do you have problems with any of the following?² CHOOSE ALL THAT APPLY

- ☐ Pests such as bugs, ants, or mice
- ☐ Mold
- ☐ Lead paint or pipes
- ☐ Lack of heat
- ☐ Oven or stove not working
- ☐ Smoke detectors missing or not working
- ☐ Water leaks
- ☐ None of the above

1. What is your living situation today? With the below radio button options

- I have a steady place to live
- I do not have a steady place to live (I am temporarily staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, abandoned building, bus or train station, or in a park)
- I have a place to live today, but I am worried about losing it in the future

These radio button options will bind the values from Global Code Category 'HRSNLS1'.

2. Think about the place you live. Do you have problems with any of the following? 2 CHOOSE ALL THAT APPLY- is displayed with the below multi select check box options:

- Pests such as bugs, ants, or mice
- Mold
- Lead paint or pipes
- Lack of heat
- Oven or stove not working
- Smoke detectors missing or not working
- Water leaks
- None of the above

'Food' Section: The below mentioned fields will be displayed.

Food

Some people have made the following statements about their food situation. Please answer whether the statements were OFTEN, SOMETIMES, or NEVER true for you and your household in the last 12 months.³

3. Within the past 12 months, you worried that your food would run out before you got money to buy more.

- ☐ Often true
- ☐ Sometimes true
- ☐ Never true

4. Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.

- ☐ Often true
- ☐ Sometimes true
- ☐ Never true

Some people have made the following statements about their food situation. Please answer whether the statements were OFTEN, SOMETIMES, or NEVER true for you and your household in the last 12 months.³ -- This is a label.

3. Within the past 12 months, you worried that your food would run out before you got money to buy more. Is displayed with the below radio button options:

- Often true
- Sometimes true
- Never true options

The above options will bind the values from Global Code Category 'HRSNFood'.

4. Within the past 12 months, the food you bought just didn't last and you didn't have money to get more. Is displayed with the below radio button options:

- Often true
- Sometimes true
- Never true

The above options will bind the values from Global Code Category 'HRSNFood'.

Transportation Section: The below mentioned fields will be displayed.

Transportation

5. In the past 12 months, has lack of reliable transportation kept you from medical appointments, meetings, work or from getting things needed for daily living?⁴

- ☐ Yes
- ☐ No

5. In the past 12 months, has lack of reliable transportation kept you from medical appointments, meetings, work or from getting things needed for daily living?⁴ is displayed with the below radio button options:

Yes

No

The above options will bind the values from Global Code Category 'HRSNTransport1'.

'Utilities' Section: The below mentioned fields will be displayed.

Utilities

6. In the past 12 months has the electric, gas, oil, or water company threatened to shut off services in your home?⁵

- ☐ Yes
- ☐ No
- ☐ Already shut off

6. In the past 12 months has the electric, gas, oil, or water company threatened to shut off services in your home?⁵ is displayed with the below radio button options:

Yes

No

Already shut off

The above options will bind the values from Global Code Category 'HRSNUtilities1'.

'Safety' Section: The below mentioned fields will be displayed

Safety

Because violence and abuse happens to a lot of people and affects their health we are asking the following questions.*

7. How often does anyone, including family and friends, physically hurt you?

☐ Never
☐ Rarely
☐ Sometimes
☐ Fairly often
☐ Frequently

8. How often does anyone, including family and friends, insult or talk down to you?

☐ Never
☐ Rarely
☐ Sometimes
☐ Fairly often
☐ Frequently

9. How often does anyone, including family and friends, threaten you with harm?

☐ Never
☐ Rarely
☐ Sometimes
☐ Fairly often
☐ Frequently

10. How often does anyone, including family and friends, scream or curse at you?

☐ Never
☐ Rarely
☐ Sometimes
☐ Fairly often
☐ Frequently

7. How often does anyone, including family and friends, physically hurt you? Is displayed with the below radio button options

- Never
- Rarely
- Sometimes
- Fairly often
- Frequently

The above options will bind the values from Global Code Category 'HRSNSafety'.

8. How often does anyone, including family and friends, insult or talk down to you? Is displayed with the below radio button options:

- Never
- Rarely
- Sometimes
- Fairly often
- Frequently

The above options will bind the values from Global Code Category 'HRSNSafety'.

9. How often does anyone, including family and friends, threaten you with harm? Is displayed with the below radio button options:

- Never
- Rarely

- Sometimes
- Fairly often
- Frequently

The above options will bind the values from Global Code Category 'HRSNSafety'.

10. How often does anyone, including family and friends, scream or curse at you? Is displayed with the radio button options:

- Never
- Rarely
- Sometimes
- Fairly often
- Frequently

The above options will bind the values from Global Code Category 'HRSNSafety'.

'Score' Section: The below mentioned fields will be displayed.

Scores	
Living Situation	Indicated
Food	Indicated
Transportation	Not Indicated
Utilities	Indicated
Safety	Indicated

- **Living Situation:** If user selects ≥ 1 answer where external code 1 = 1 or hardcoded answer value = 1 in section Living Situation, then Living Situation HRSN score will be displayed as Indicated and if user selects < 1 answer where external code 1 = 0 or hardcoded answer value = 0 in section Living Situation, then Living Situation HRSN score will be displayed as Not Indicated.
- **Food:** If user selects answer where external code 1 = 1 in section Food=Food HRSN score will be displayed as Indicated and If user selects answer where external code 1 = 0 in section Food=Food HRSN score will be displayed as Not Indicated.
- **Transportation:** If user selects answer where external code 1 = 1 in section Transportation=Transportation HRSN score will be displayed as Indicated and If user selects answer where external code 1 = 0 in section Transportation=Transportation HRSN score will be displayed as Not Indicated.
- **Utilities:** If user selects answer where external code 1 = 1 in section Utilities= Utilities HRSN score will be displayed as Indicated and If user selects answer where external code 1 = 0 in section Utilities= Utilities HRSN score will be displayed as Not Indicated.
- **Safety:** if score is 11 or higher when all questions in Safety section are summed using External code 1 value then Safety HRSN = Indicated and if score is lesser than 11 when all questions in Safety section are summed using External code 1 value then Safety HRSN = Not Indicated
- **Foot Note :**

1 National Association of Community Health Centers and Partners, National Association of Community Health Centers, Association of Asian Pacific Community Health Organizations, Association OPC, Institute for Alternative Futures. (2017). PRAPARE. <http://www.nachc.org/research-and-data/prapare/>
 2 Nuruzzaman, N., Broadwin, M., Kourouma, K., & Olson, D. P. (2015). Making the Social Determinants of Health a Routine Part of Medical Care. Journal of Healthcare for the Poor and Underserved, 26(2), 321-327.
 3 Hager, E. R., Quigg, A. M., Black, M. M., Coleman, S. M., Heeren, T., Rose-Jacobs, R., Frank, D. A. (2010). Development and Validity of a 2-Item Screen to Identify Families at Risk for Food Insecurity. Pediatrics, 126(1), 26-32. doi:10.1542/peds.2009-3146
 5 Cook, J. T., Frank, D. A., Casey, P. H., Rose-Jacobs, R., Black, M. M., Chilton, M., . . . Cutts, D. B. (2008). A Brief Indicator of Household Energy Security: Associations with Food Security, Child Health, and Child Development in US Infants and Toddlers. Pediatrics, 122(4), 867-875. doi:10.1542/peds.2008-0286
 6 Sherin, K. M., Sinacore, J. M., Li, X. Q., Zitter, R. E., & Shakil, A. (1998). HITS: a Short Domestic Violence Screening Tool for Use in a Family Practice Setting. Family Medicine, 30(7), 508-512

1 National Association of Community Health Centers and Partners, National Association of Community Health Centers, Association of Asian Pacific Community Health Organizations, Association OPC, Institute for Alternative Futures. (2017). PRAPARE. <http://www.nachc.org/research-and-data/prapare/>
 2 Nuruzzaman, N., Broadwin, M., Kourouma, K., & Olson, D. P. (2015). Making the Social Determinants of Health a Routine Part of Medical Care. Journal of Healthcare for the Poor and Underserved, 26(2), 321-327.
 3 Hager, E. R., Quigg, A. M., Black, M. M., Coleman, S. M., Heeren, T., Rose-Jacobs, R., Frank, D. A. (2010). Development and Validity of a 2-Item Screen to Identify Families at Risk for Food Insecurity. Pediatrics, 126(1), 26-32. doi:10.1542/peds.2009-3146
 5 Cook, J. T., Frank, D. A., Casey, P. H., Rose-Jacobs, R., Black, M. M., Chilton, M., . . . Cutts, D. B. (2008). A Brief Indicator of Household Energy Security: Associations with Food Security, Child Health, and Child Development in US Infants and Toddlers. Pediatrics, 122(4), 867-875. doi:10.1542/peds.2008-0286
 6 Sherin, K. M., Sinacore, J. M., Li, X. Q., Zitter, R. E., & Shakil, A. (1998). HITS: a Short Domestic Violence Screening Tool for Use in a Family Practice Setting. Family Medicine, 30(7), 508-512

A new configuration key 'HRSNSupplementalQs' has been implemented. When Key is set to 'Yes' it will allow the 'supplemental questions' will be displayed in the Health-Related Social Needs Tool document and on Selecting 'No' it will hide the supplemental questions tab.

System Configuration Key Details:

Key Name: HRSNSupplementalQs

Read Key as: HRSN Supplemental Qs

Default Value: No

Allowed Values: Yes, No.

Description:

The value of this key is used to show/hide the **Supplemental Questions tab** in the Health Related Social Needs Tool document.

If the key value is set to Yes, then the supplemental questions tab to be displayed in the Health Related Social Needs document.

If the key value is set to No, the system will hide the supplemental questions tab.

Supplemental Questions tab: This tab contains the below sections namely

- Financial Strain
- Employment
- Family and Community Support
- Education
- Physical Activity
- Substance Use
- Mental Health
- Disabilities
- Scores - Supplemental Questions

Financial Strain Section: In this section, the below mentioned fields will be displayed.

Financial Strain

11. How hard is it for you to pay for the very basics like food, housing, medical care, and heating? Would you say it is... ⁷

- ☐ Very hard
- ☐ Somewhat hard
- ☐ Not hard at all

11. How hard is it for you to pay for the very basics like food, housing, medical care, and heating? Would you say it is... ⁷ is displayed with the below radio button options:

- Very hard
- Somewhat hard
- Not hard at all

The above options will bind the values from Global Code Category 'HRSNFinancial'.

Employment Section: In this section, the below mentioned fields will be displayed.

Employment

12. Do you want help finding or keeping work or a job? ⁸

- ☐ Yes, help finding work
- ☐ Yes, help keeping work
- ☐ I do not need or want help

12. Do you want help finding or keeping work or a job? ⁸ is displayed with the below radio button options

- Yes, help finding work
- Yes, help keeping work
- I do not need or want help

The above options will bind the values from Global Code Category 'HRSNEmployment'.

Family and Community Support Section: In this section, the below mentioned fields will be displayed.

Family and Community Support

13. If for any reason you need help with day-to-day activities such as bathing, preparing meals, shopping, managing finances, etc., do you get the help you need? ⁹

- ☐ I don't need any help
- ☐ I get all the help I need
- ☐ I could use a little more help
- ☐ I need a lot more help

14. How often do you feel lonely or isolated from those around you? ¹⁰

- ☐ Never
- ☐ Rarely
- ☐ Sometimes
- ☐ Often
- ☐ Always

13. If for any reason you need help with day-to-day activities such as bathing, preparing meals, shopping, managing finances, etc., do you get the help you need? ⁹ is displayed with the below radio button options:

- I don't need any help
- I get all the help I need
- I could use a little more help
- I need a lot more help

The above options will bind the values from Global Code Category 'HRSNSupport1'.

14. How often do you feel lonely or isolated from those around you? ¹⁰ is displayed with the below radio button options:

- Never
- Rarely
- Sometimes
- Often
- Always

The above options will bind the values from Global Code Category 'HRSNSupport2'.

Education Section: In this section, the below mentioned fields will be displayed.

Education

15. Do you speak a language other than English at home?¹¹

☐ Yes
☐ No

16. Do you want help with school or training? For example, starting or completing job training or getting a high school diploma, GED or equivalent.¹²

☐ Yes
☐ No

15. Do you speak a language other than English at home? ¹¹ is displayed with the below radio button options

- Yes
- No

The above options will bind the values from Global Code Category 'HRSNEducation'.

16. Do you want help with school or training? For example, starting or completing job training or getting a high school diploma, GED or equivalent.¹² is displayed with the below radio button options

- Yes
- No

The above options will bind the values from Global Code Category 'HRSNEducation'.

Physical Activity Section: In this section, the below mentioned fields will be displayed.

Physical Activity

17. In the last 30 days, other than the activities you did for work, on average, how many days per week did you engage in moderate exercise (like walking fast, running, jogging, dancing, swimming, biking, or other similar activities)?¹³

☐ 0
☐ 1
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7

18. On average, how many minutes did you usually spend exercising at this level on one of those days?¹⁴

☐ 0
☐ 10
☐ 20
☐ 30
☐ 40
☐ 50
☐ 60
☐ 90
☐ 120
☐ 150 or greater

17. In the last 30 days, other than the activities you did for work, on average, how many days per week did you engage in moderate exercise (like walking fast, running, jogging, dancing, swimming, biking, or other similar activities)?¹³ is displayed with the below radio button options

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7

The above options will bind the values from Global Code Category 'HRSNPhysical1'.

18. On average, how many minutes did you usually spend exercising at this level on one of those days?¹⁴ is displayed with the below radio button options:

- 0
- 10
- 20
- 30
- 40
- 50
- 60
- 90
- 120
- 150 or greater

The above options will bind the values from Global Code Category 'HRSNPhysical2'.

Substance Use Section: In this section, the below mentioned fields will be displayed.

Substance Use

The next questions relate to your experience with alcohol, cigarettes, and other drugs. Some of the substances are prescribed by a doctor (like pain medications), but only count those if you have taken them for reasons or in doses other than prescribed. One question is about illicit or illegal drug use, but we only ask in order to identify community services that may be available to help you.¹⁵

19. How many times in the past 12 months have you had 5 or more drinks in a day (males) or 4 or more drinks in a day (females)? One drink is 12 ounces of beer, 5 ounces of wine, or 1.5 ounces of 80-proof spirits.

☐ Never
☐ Once or Twice
☐ Monthly
☐ Weekly
☐ Daily or Almost Daily

20. How many times in the past 12 months have you used tobacco products (like cigarettes, cigars, snuff, chew, electronic cigarettes)?

☐ Never
☐ Once or Twice
☐ Monthly
☐ Weekly
☐ Daily or Almost Daily

21. How many times in the past year have you used prescription drugs for non-medical reasons?

- ☐ Never
- ☐ Once or Twice
- ☐ Monthly
- ☐ Weekly
- ☐ Daily or Almost Daily

22. How many times in the past year have you used illegal drugs?

- ☐ Never
- ☐ Once or Twice
- ☐ Monthly
- ☐ Weekly
- ☐ Daily or Almost Daily

A table of instructions: The next questions relate to your experience with alcohol, cigarettes, and other drugs. Some of the substances are prescribed by a doctor (like pain medications), but only count those if you have taken them for reasons or in doses other than prescribed. One question is about illicit or illegal drug use, but we only ask in order to identify community services that may be available to help you.¹⁵

19. How many times in the past 12 months have you had 5 or more drinks in a day (males) or 4 or more drinks in a day (females)? One drink is 12 ounces of beer, 5 ounces of wine, or 1.5 ounces of 80-proof spirits. Is displayed with displayed with the below radio button options:

- Never
- Once or Twice
- Monthly
- Weekly
- Daily or Almost Daily

The above options will bind the values from Global Code Category 'HRSNSubUse'.

20. How many times in the past 12 months have you used tobacco products (like cigarettes, cigars, snuff, chew, electronic cigarettes)? : Is displayed with displayed with the below radio button options:

- Never
- Once or Twice
- Monthly
- Weekly
- Daily or Almost Daily

The above options will bind the values from Global Code Category 'HRSNSubUse'.

21. How many times in the past year have you used prescription drugs for non-medical reasons? Is displayed with displayed with the below radio button options:

- Never
- Once or Twice
- Monthly
- Weekly
- Daily or Almost Daily

The above options will bind the values from Global Code Category 'HRSNSubUse'.

22. How many times in the past year have you used illegal drugs? Is displayed with displayed with the below radio button options:

- Never
- Once or Twice
- Monthly
- Weekly
- Daily or Almost Daily

The above options will bind the values from Global Code Category 'HRSNSubUse'.

Mental Health Section: In this section, the below mentioned fields will be displayed.

Mental Health

23. Over the past 2 weeks, how often have you been bothered by any of the following problems?¹⁶

a. Little interest or pleasure in doing things?

☐ Not at all
☐ Several days
☐ More than half the days
☐ Nearly every day

b. Feeling down, depressed, or hopeless?

☐ Not at all
☐ Several days
☐ More than half the days
☐ Nearly every day

24. Stress means a situation in which a person feels tense, restless, nervous, or anxious, or is unable to sleep at night because his or her mind is troubled all the time. Do you feel this kind of stress these days?¹⁷

☐ Not at all
☐ A little bit
☐ Somewhat
☐ Quite a bit
☐ Very much

23. Over the past 2 weeks, how often have you been bothered by any of the following problems?¹⁶ with sub questions as

'a. Little interest or pleasure in doing things?' Is displayed with displayed with the below radio button options:

- Not at all
- Several days
- More than half the days
- Nearly every day

'b. Feeling down, depressed, or hopeless?' Is displayed with displayed with the below radio button options:

- Not at all
- Several days
- More than half the days
- Nearly every day

The above options will bind the values from Global Code Category 'HRSNMentalHealth1'.

24. Stress means a situation in which a person feels tense, restless, nervous, or anxious, or is unable to sleep at night because his or her mind is troubled all the time. Do you feel this kind of stress these days? ¹⁷ Is displayed with displayed with the below radio button options:

- Not at all
- A little bit
- Somewhat
- Quite a bit
- Very much

The above options will bind the values from Global Code Category 'HRSNMentalHealth1'.

Disabilities Section: In this section, the below mentioned fields will be displayed.

Disabilities

25. Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions? (5 years old or older)¹⁸

☐ Yes
☐ No

26. Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping? (15 years old or older)¹⁹

☐ Yes
☐ No

25. Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions? (5 years old or older) ¹⁸ Is displayed with displayed with the below radio button options:

- Yes
- No

The above options will bind the values from Global Code Category 'HRSNDisabilities'.

26. Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping? (15 years old or older) ¹⁹ Is displayed with displayed with the below radio button options:

- Yes
- No

The above options will bind the values from Global Code Category 'HRSNDisabilities'.

'Scores – Supplemental' Section: The below mentioned fields will be displayed.

Scores - Supplemental Questions	
Financial Strain	Not Indicated
Employment	Not Indicated
Family and Community Support	Indicated
Education	Not Indicated
Physical Activity	Indicated
Substance Use	Indicated
Mental Health	Indicated
Disabilities	Not Indicated

- Financial Strain: If 1 or more answer's external code 1 value =1 in section Financial Strain then Financial Strain HRSN score will be displayed as Indicated and If 1 or more answer's external code 1 value = 0 in section Financial Strain then Financial Strain HRSN score will be displayed as Not Indicated
- Employment: If 1 or more answer's external code 1 value =1 in section Employment then Employment HRSN score will be displayed as Indicated and If 1 or more answer's external code 1 value = 0 in section Employment then Employment HRSN score will be displayed as Not Indicated
- Family and Community Support: If 1 or more answer's external code 1 value =1 in section Family and Community Support then Family and Community Support HRSN score will be displayed as Indicated and If 1 or more answer's external code 1 value = 0 in section Family and Community Support then Family and Community Support HRSN score will be displayed as Not Indicated.
- Education: If 1 or more answer's external code 1 value =1 in section Education then Education HRSN score will be displayed as Indicated and If 1 or more answer's external code 1 value = 0 in section Education then Education HRSN score will be displayed as Not Indicated.
- Physical Activity: If Client Age < 6 years then Physical Activity HRSN score will displayed as Not Indicated or If client Age >= 6 and <18 then Divide [number of minutes of exercise per week] by 7. If result is < 60 then Physical Activity HRSN score will displayed as Indicated and If result is > 60 then Physical Activity

- HRSN score will displayed as Not Indicated. Or If client Age ≥ 18 and [number of minutes of exercise per week] ≤ 150 then Physical Activity HRSN score will be displayed as Indicated and If result is ≥ 151 then Physical Activity HRSN score will displayed as Not Indicated
- Substance Use: if score is ≥ 1 when all questions in Substance Use section are summed then Substance Use HRSN score will displayed as Indicated and if score is < 1 when all questions in Substance Use section are summed then Substance Use HRSN score will displayed as Not Indicated.
 - Mental Health :The score should be displayed on these 2 condition if Sum External Code 1 values for answers to Question 23 parts a and b if score is ≥ 3 then Mental Health HRSN score will displayed as Indicated OR if external code 1 value of answer for question 24 = 1, then Mental Health HRSN score will displayed as Indicated and if Sum External Code 1 values for answers to Question 23 parts a and b if score is < 3 then Mental Health HRSN score will displayed as Not Indicated OR if external code 1 value of answer for question 24 = 0, then Mental Health HRSN score will displayed as Not Indicated
 - Disabilities: If 1 or more answer's external code 1 value =1 in section Disabilities then Disabilities HRSN score will be displayed as Indicated and If 1 or more answer's external code 1 value = 0 in section Disabilities then Disabilities HRSN score will be displayed as Not Indicated.
 - Foot Note :

7 Hall, M. H., Matthews, K. A., Kravitz, H. M., Gold, E. B., Buysse, D. J., Bromberger, J. T., . . . Sowers, M. (2009). Race and Financial Strain are Independent Correlates of Sleep in Midlife Women: The SWAN Sleep Study. *Sleep*, 32(1), 73-82. doi:10.5665/sleep/32.1.73
8 Identifying and Recommending Screening Questions for the Accountable Health Communities Model (2016, July) Technical Expert Panel discussion conducted at the U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services, Baltimore, MD.
9 Kaiser Permanente. (2012, June). Medicare Total Health Assessment Questionnaire. Retrieved from https://mydoctor.kaiserpermanente.org/ncal/Images/Medicare%20Total%20Health%20Assessment%20Questionnaire_tcm75-487922.pdf
10 Anderson, G. Oscar and Colette E. Thayer. Loneliness and Social Connections: A National Survey of Adults 45 and Older. Washington, DC: AARP Research, September 2018. <https://doi.org/10.26419/res.00246.001>
11 United States, US Census Bureau. (2017). American Community Survey. Retrieved from <https://www.census.gov/programs-surveys/acs/>
12 Identifying and Recommending Screening Questions for the Accountable Health Communities Model (2016, July) Technical Expert Panel discussion conducted at the U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services, Baltimore, MD.
13 Coleman, K. J., Ngor, E., Reynolds, K., Quinn, V. P., Koebnick, C., Young, D. R., . . . Sallis, R. E. (2012). Initial Validation of an Exercise "Vital Sign" in Electronic Medical Records. *Medicine and Science in Sport and Exercise*, 44(11), 2071-2076. doi:10.1249/MSS.0b013e3182630ec1
14 Ibid
15 United States, U.S. Department of Health and Human Services, National Institutes of Health. (n.d.). Helping Patients Who Drink Too Much: A Clinician's Guide (2005 ed., pp. 1-34).
16 Kroenke, K., Spitzer, R. L., & Williams, J. B. (2003). The Patient Health Questionnaire-2: validity of a two-item depression screener. *Medical Care*, 41(11), 1284-1292.
17 Elo, A. L., Leppänen, A., & Jähkölä, A. (2003). Validity of a Single-Item Measure of Stress Symptoms. *Scandinavian Journal of Work*, 29(6), 444-451.
18 United States, U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation (n.d.). (2011). Implementation Guidance on Data Collection Standards for Race, Ethnicity, Sex, Primary Language, and Disability Status. Retrieved from <https://aspe.hhs.gov/basic-report/hhs-implementation-guidance-data-collection-standards-race-ethnicity-sex-primary-language-and-disability-status>
19 Ibid.

7 Hall, M. H., Matthews, K. A., Kravitz, H. M., Gold, E. B., Buysse, D. J., Bromberger, J. T., . . . Sowers, M. (2009). Race and Financial Strain are Independent Correlates of Sleep in Midlife Women: The SWAN Sleep Study. *Sleep*, 32(1), 73-82. doi:10.5665/sleep/32.1.73
8 Identifying and Recommending Screening Questions for the Accountable Health Communities Model (2016, July) Technical Expert Panel discussion conducted at the U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services, Baltimore, MD.
9 Kaiser Permanente. (2012, June). Medicare Total Health Assessment Questionnaire. Retrieved from https://mydoctor.kaiserpermanente.org/ncal/Images/Medicare%20Total%20Health%20Assessment%20Questionnaire_tcm75-487922.pdf
10 Anderson, G. Oscar and Colette E. Thayer. Loneliness and Social Connections: A National Survey of Adults 45 and Older. Washington, DC: AARP Research, September 2018. <https://doi.org/10.26419/res.00246.001>
11 United States, US Census Bureau. (2017). American Community Survey. Retrieved from <https://www.census.gov/programs-surveys/acs/>
12 Identifying and Recommending Screening Questions for the Accountable Health Communities Model (2016, July) Technical Expert Panel discussion conducted at the U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services, Baltimore, MD.
13 Coleman, K. J., Ngor, E., Reynolds, K., Quinn, V. P., Koebnick, C., Young, D. R., . . . Sallis, R. E. (2012). Initial Validation of an Exercise "Vital Sign" in Electronic Medical Records. *Medicine and Science*

in Sport and Exercise, 44(11), 2071-2076. doi:10.1249/MSS.0b013e3182630ec1
 14 Ibid
 15 United States, U.S. Department of Health and Human Services, National Institutes of Health. (n.d.).
 Helping Patients Who Drink Too Much: A Clinician's Guide (2005 ed., pp. 1-34).
 16 Kroenke, K., Spitzer, R. L., & Williams, J. B. (2003). The Patient Health Questionnaire-2: validity of a
 two-item depression screener. Medical Care, 41(11), 1284-1292.
 17 Elo, A.L., Leppänen, A., & Jahkola, A. (2003). Validity of a Single-Item Measure of Stress Symptoms.
 Scandinavian Journal of Work, 29(6), 444-451.
 18 United States, U.S. Department of Health and Human Services, Office of the Assistant Secretary for
 Planning and Evaluation (n.d.). (2011). Implementation Guidance on Data Collection Standards for Race,
 Ethnicity, Sex, Primary Language, and Disability Status. Retrieved from <https://aspe.hhs.gov/basic-report/hhs-implementation-guidance-data-collection-standards-race-ethnicity-sex-primary-language-and-disability-status>
 19 Ibid.

Data Model Changes:

Added DocumentHealthRelatedSocialNeedCoreQuestions,
 DocumentHealthRelatedSocialNeedSupplementalQuestions tables.

Author: Ramya Nagaraj

47: EII # 128041: Implementing 'CSSRS Risk Assessment Lifeline Crisis Center' document.

DISCLAIMER: The document is only available to those customers who have purchased an annual subscription. It is a premium add-on to SmartCare and not included in SmartCare Base Subscription. If you are interested in learning more about this document, please contact your account manager.

Release Type: New Functionality | **Priority:** On Fire

Navigation Path: 'Client' -- 'C-SSRS Risk Assessment Lifeline Crisis Center' document.

Functionality 'Before' and 'After' release:

Purpose: The C-SSRS Risk Assessment is intended to help establish a person's immediate risk of suicide and is used in acute care settings.

With this release, a new document named 'C-SSRS Risk Assessment Lifeline Crisis Center' is implemented. The document has below mentioned tabs:

1. C-SSRS Risk Assessment Lifeline Crisis Center.
2. General.

1. 'C-SSRS Risk Assessment Lifeline Crisis Center' tab.

C-SSRS Risk Assessment Lifeline Crisis Center

Effective: 07/04/2024 Status: New Author: Huggi, Santosh

C-SSRS Risk Assessment Lifeline Crisis Center General

Suicidal and Self-Injury Behavior

Instructions: Check all risk and protective factors that apply. To be completed following client interview, review of medical record(s), and/or consultation with family members and/or other professionals.

Suicidal and Self-Injury Behavior	Past Week	Lifetime*
Actual suicide attempt	<input type="checkbox"/>	<input type="checkbox"/>
Interrupted attempt	<input type="checkbox"/>	<input type="checkbox"/>
Aborted attempt	<input type="checkbox"/>	<input type="checkbox"/>
Other preparatory acts to kill self	<input type="checkbox"/>	<input type="checkbox"/>
Self-injury behavior without suicide intent	<input type="checkbox"/>	<input type="checkbox"/>

Suicide Ideation (Most Severe in Past Week)

☐ Wish to be dead ☐ Suicidal thoughts ☐ Suicidal thoughts with method (but without specific plan or intent to act)

☐ Suicidal intent (without specific plan) ☐ Suicidal intent with specific plan

Activating Events (Recent)

☐ Pending incarceration or homelessness ☐ Current or pending isolation or feeling alone

☐ Recent loss or other significant negative event

Describe

1. Suicidal and Self-Injury Behavior section:

C-SSRS Risk Assessment Lifeline Crisis Center General

Suicidal and Self-Injury Behavior

Instructions: Check all risk and protective factors that apply. To be completed following client interview, review of medical record(s), and/or consultation with family members and/or other professionals.

- **Instructions:** Check all risk and protective factors that apply. To be completed following client interview, review of medical record(s), and/or consultation with family members and/or other professionals. – This is a label field.

2. A grid :

Suicidal and Self-Injury Behavior	Past Week	Lifetime*
Actual suicide attempt	<input type="checkbox"/>	<input type="checkbox"/>
Interrupted attempt	<input type="checkbox"/>	<input type="checkbox"/>
Aborted attempt	<input type="checkbox"/>	<input type="checkbox"/>
Other preparatory acts to kill self	<input type="checkbox"/>	<input type="checkbox"/>
Self-injury behavior without suicide intent	<input type="checkbox"/>	<input type="checkbox"/>

Columns: "Suicidal and Self-Injury Behavior", "Past Week", "Lifetime*". Only Lifetime* Column values will be initialized from last signed document.

Checkboxes:

- Actual suicide attempt
- Interrupted attempt
- Aborted attempt
- Other preparatory acts to kill self
- Self-injury behavior w/o suicide intent

3. Suicide Ideation (Most Severe in Past Week) section: This section contains the below radio buttons.

Suicide Ideation (Most Severe in Past Week)

- ☐ Wish to be dead
 ☐ Suicidal thoughts
 ☐ Suicidal thoughts with method (but without specific plan or intent to act)
 ☐ Suicidal intent (without specific plan)
 ☐ Suicidal intent with specific plan

- Wish to be dead
- Suicidal thoughts
- Suicidal thoughts with method (but without specific plan or intent to act)
- Suicidal intent (without specific plan)
- Suicidal intent with specific plan

4. **Activating Events (Recent):** This section contains the below checkboxes.

Activating Events (Recent)

- ☐ Pending incarceration or homelessness
 ☐ Current or pending isolation or feeling alone
 ☐ Recent loss or other significant negative event

Describe

- Pending incarceration or homelessness
- Current or pending isolation or feeling alone
- Recent loss or other significant negative event
- **Describe:** Text area: If the user selects the "Recent loss or other significant negative event." Checkbox only, then 'Describe' text area will be enabled.

5. **Treatment History** section: This section contains the checkboxes as below.

Treatment History

- ☐ Previous psychiatric diagnoses and treatments
 ☐ Hopeless or dissatisfied with treatment
 ☐ Noncompliant with treatment
 ☐ Not receiving treatment

- Previous psychiatric diagnoses and treatments
- Hopeless or dissatisfied with treatment
- Noncompliant with treatment
- Not receiving treatment

6. **Other Risk Factors** section: This is text area field.

Other Risk Factors

7. **Clinical Status (Recent)** section: This section contains the below checkboxes.

Clinical Status (Recent)		
<input type="checkbox"/> Hopelessness	<input type="checkbox"/> Helplessness*	<input type="checkbox"/> Feeling Trapped*
<input type="checkbox"/> Major depressive episode	<input type="checkbox"/> Mixed affective episode	<input type="checkbox"/> Command hallucinations to hurt self
<input type="checkbox"/> Highly impulsive behavior	<input type="checkbox"/> Substance abuse or dependence	<input type="checkbox"/> Agitation or severe anxiety
<input type="checkbox"/> Perceived burden on family or others	<input type="checkbox"/> Homicidal ideation	<input type="checkbox"/> Aggressive behavior towards others
<input type="checkbox"/> Method for suicide available (gun, pills, etc.)	<input type="checkbox"/> Refuses or feels unable to agree to safety plan	<input type="checkbox"/> Sexual abuse (lifetime)
<input type="checkbox"/> Family history of suicide (lifetime)	<input type="checkbox"/> Chronic physical pain or other acute medical problem (AIDS, COPD, cancer, etc.)	

- Hopelessness
- Helplessness*
- Feeling Trapped*
- Major depressive episode
- Mixed affective episode
- Command hallucinations to hurt self
- Highly impulsive behavior
- Substance abuse or dependence
- Agitation or severe anxiety
- Perceived burden on family or others
- Homicidal ideation
- Aggressive behavior towards others
- Method for suicide available (gun, pills, etc.)
- Refuses or feels unable to agree to safety plan
- Sexual abuse (lifetime)
- Family history of suicide (lifetime)
- Chronic physical pain or other acute medical problem (AIDS, COPD, cancer, etc.)

8. Protective Factors (Recent) section: This section contains the below checkboxes.

Protective Factors (Recent)		
<input type="checkbox"/> Identifies reasons for living	<input type="checkbox"/> Responsibility to family or others; living with family	<input type="checkbox"/> Supportive social network or family
<input type="checkbox"/> Fear of death or dying due to pain and suffering	<input type="checkbox"/> Belief that suicide is immoral, high spirituality	<input type="checkbox"/> Engaged in work or school
<input type="checkbox"/> Engaged with Phone Worker *		

- Identifies reasons for living
- Responsibility to family or others; living with family
- Supportive social network or family
- Fear of death or dying due to pain and suffering
- Belief that suicide is immoral, high spirituality
- Engaged in work or school
- Engaged with Phone Worker *

9. Other Protective Factors section: This is a text area field.

Other Protective Factors
<div></div>

10. Suicide, Self-Injury, Aggressive Behavior Description section: This section contains below text area field: This field will initialize from the latest signed document.

Suicide, Self-Injury, Aggressive Behavior Description

Describe any suicidal, self-injury, or aggressive behavior. Include Dates (to/from if known)

- Describe any suicidal, self-injury, or aggressive behavior. Include Dates (to/from if known)—This is a Label.

'General' Tab: 'General' Tab is functions same as "C-SSRS Adult Assessment" document. 'Show/Hide' logic, 'Initializations', and 'Validations' are same as they were in "C-SSRS Adult Assessment".

The following new field is added to **'Preparatory Acts or Behavior'** section:

C-SSRS Risk Assessment Lifeline Crisis Center

Effective 07/04/2024 Status New Author Huggi, Santosh

C-SSRS Risk Assessment Lifeline Crisis Center General

or being stopped by something else.

Has there been a time when you started to do something to try to end your life but you stopped yourself before you actually did anything?

If yes, describe:

Preparatory Acts or Behavior:

Acts or preparation towards imminently making a suicide attempt. This can include anything beyond a verbalization or thought, such as assembling a specific method (e.g. buying pills, purchasing a gun) or preparing for one's death by suicide (e.g. giving things away, writing a suicide note).

Have you taken any steps towards making a suicide attempt or preparing to kill yourself (such as collecting pills, getting a gun, giving valuables away or writing a suicide note)?

If yes, describe:

Suicidal Behavior:

Suicidal behavior was present during the assessment period?

Total # of aborted or self-interrupted

Total # of aborted or self-interrupted

Yes No

Yes No

Total # of preparatory acts

Total # of preparatory acts

- Total # of preparatory acts** field : It is a 2-Digit Numeric Textbox field.
 - It is a required field when 'Yes' radio button option is selected in 'Life Time' and 'Past 3 months' columns for the field "Acts or preparation towards imminently making a suicide attempt" (Just above).
 - If "No" radio button option is selected, then this textbox will default to "0" and will be disabled.
 - If "Yes" is selected, it won't allow "0" as a response; the value should be greater than "0."
- The Below label will be displayed at the bottom in the 'General' tab:

Columbia-Suicide Severity Rating Scale. (C-SSRS) Posner, Brent, Lucas, Gould, Stanley, Brown, Fisher, Zelazny, Burke, Oquendo, Mann. 2008 The Research Foundation for Mental Hygiene, Inc. RISK ASSESSMENT VERSION (*elements added with permission for lifeline centers).

Streamline Healthcare Solutions, L.L.C. | 1301 W. 22nd St, Suite 305 | Oak Brook, IL 60523 | streamlinehealthcare.com

C-SSRS Risk Assessment Lifeline Crisis Center **General**

Suicidal Behavior:
Suicidal behavior was present during the assessment period? ☐ Yes ☐ No ☐ Yes ☐ No

Answer for Actual Attempts Only	Most Recent Attempt Date: 	Most Lethal Attempt Date: 	Initial/First Attempt Date:
Actual Lethality/Medical Damage: 0. No physical damage or very minor physical damage (e.g., surface scratches). 1. Minor physical damage (e.g., lethargic speech; first-degree burns; mild bleeding; sprains). 2. Moderate physical damage; medical attention needed (e.g., conscious but sleepy, somewhat responsive; second-degree burns; bleeding of major vessel). 3. Moderately severe physical damage; medical hospitalization and likely intensive care required (e.g., comatose with reflexes intact; third-degree burns less than 20% of body; extensive blood loss but can recover; major fractures). 4. Severe physical damage; medical hospitalization with intensive care required (e.g., comatose without reflexes; third-degree burns over 20% of body; extensive blood loss with unstable vital signs; major damage to a vital area). 5. Death			
Potential Lethality: Only Answer if Actual Lethality=0 Likely lethality of actual attempt if no medical damage (the following examples, while having no actual medical damage, had potential for very serious lethality: put gun in mouth and pulled the trigger but gun fails to fire so no medical damage; laying on train tracks with oncoming train but pulled away before run over). 0 = Behavior not likely to result in injury 1 = Behavior likely to result in injury but not likely to cause death 2 = Behavior likely to result in death despite available medical care			

Columbia-Suicide Severity Rating Scale. (C-SSRS) Posner, Brent, Lucas, Gould, Stanley, Brown, Fisher, Zelazny, Burke, Oquendo, Mann. 2008
The Research Foundation for Mental Hygiene, Inc. RISK ASSESSMENT VERSION (*elements added with permission for lifeline centers).

PDF post signature:

C-SSRS Risk Assessment Lifeline Crisis Center

Effective: 07/04/2024 Status: Signed Author: Huggl, Santosh

Document

PdfBytesHandler.axd 1 / 4 63%

SmartCare Rx

C-SSRS RISK ASSESSMENT LIFELINE CRISIS CENTER

Client Information

Client Name: Test, HugglCoreBugs126406 Client ID: 2105360
DOB: 12/19/2000 Effective Date: 07/04/2024

C-SSRS Risk Assessment Lifeline Crisis Center

Suicidal and Self-Injury Behavior

Instructions: Check all risk and protective factors that apply. To be completed following client interview, review of medical record(s), and/or consultation with family members and/or other professionals.

Suicidal and Self-Injury Behavior	Past Week	Lifetime*
Actual suicide attempt	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Interrupted attempt	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Aborted attempt	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other preparatory acts to kill self	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Self-injury behavior without suicide intent	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Suicide Ideation (Most Severe in Past Week)

☐ Wish to be dead ☐ Suicidal thoughts ☐ Suicidal thoughts with method (but without specific plan or intent to act)

☐ Suicidal intent (without specific plan) ☒ Suicidal intent with specific plan

Activating Events (Recent)

☒ Pending incarceration or homelessness ☐ Current or pending isolation or feeling alone

C-SSRS Risk Assessment Lifeline Crisis Center

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Document

2 / 4 63%

Major depressive episode Mixed affective episode Command hallucinations to hurt self

Page 1 Printed on: 07/04/2024

Client Name: HuggCoreBugs126606 Test DOB: 12/19/2000 Medicaid: NA
Client ID: 2105360

Page 2 of 4

Highly impulsive behavior Substance abuse or dependence Agitation or severe anxiety
Perceived burden on family or others Homicidal ideation Aggressive behavior towards others
Method for suicide available (gun, pills, etc.) Refuses or feels unable to agree to safety plan Sexual abuse (lifetime)
Family history of suicide (lifetime) Chronic physical pain or other acute medical problem (AIDS, COPD, cancer, etc.)

Protective Factors (Recent)

Identifies reasons for living Responsibility to family or others; living with family Supportive social network or family
Fear of death or dying due to pain and suffering Belief that suicide is immoral, high spirituality Engaged in work or school
Engaged with Phone Worker *

Other Protective Factors

Suicide, Self-Injury, Aggressive Behavior Description
Describe any suicidal, self-injury, or aggressive behavior. Include Dates (to/from if known)

C-SSRS Risk Assessment Lifeline Crisis Center

Effective: 07/04/2024 Status: Signed Author: Huggi, Santosh

Document

PdfBytesHandler.axd 4 / 4 - 63% +

third-degree burns less than 20% of body; extensive blood loss but can recover; major fractures).
4. Severe physical damage; medical hospitalization with intensive care required (e.g., comatose without reflexes; third-degree burns over 20% of body; extensive blood loss with unstable vital signs; major damage to a vital area).
5. Death
Potential Lethality: Only Answer if Actual Lethality=0
Likely lethality of actual attempt if no medical damage (the following examples, while having no actual medical damage, had potential for very serious lethality: put gun in mouth and pulled the trigger but gun fails to fire so no medical damage; laying on train tracks with oncoming train but pulled away before run over).
0 = Behavior not likely to result in injury
1 = Behavior likely to result in injury but not likely to cause death
2 = Behavior likely to result in death despite available medical care

Columbia-Suicide Severity Rating Scale. (C-SSRS) Posner, Brent, Lucas, Gould, Stanley, Brown, Fisher, Zelazny, Burke, Oquendo, Mann. 2008 The Research Foundation for Mental Hygiene, Inc. RISK ASSESSMENT VERSION (*elements added with permission for lifeline centers).

Clinician: Santosh Huggi, OTHER Oragnaziation, DEA Signature Date: 07/04/2024 2:11PM

This document was electronically signed by Santosh Huggi, OTHER Oragnaziation, DEA on 07/04/2024 2:11PM

Data Model changes:

- Added new table '**DocumentCSSRSRiskAssessmentLifelineCrisisCenters**'.
- Added new table '**DocumentCSSRSRiskAssessmentLifelineCrisisCenterGenerals**'.

Author: Sachin Ranganathappa

48: Core Bugs # 128299: Document Listpage: All staffs were loaded in the All Authors... dropdown.

Release Type: Fix | **Priority:** High

Prerequisite: The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' changes the dropdown fields as a type-able search textbox.

- When the key value is set to "Yes", the staff drop-downs will display typeable search text boxes instead of a drop-down.
- When the key value is set to "No", the staff drop-down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behaviour.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behaviour, i.e., the same as the key value is "No".

Navigation Path: Client Search - Documents (Clients) - All Author search field.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the Document List page, all staffs were loaded in the All Authors... dropdown and this was impacting the performance of application when there were large number of staff records.

With this release, the above-mentioned issue has been resolved. In the Document List page, a Typeable Search box for the 'All Authors...' Search field has been implemented and this will be displayed if the system configuration key 'DisplayStaffAsTypeableSearchTextBox' is set to "Yes" and there by improving the system performance.

Author: Harika Rajendran

49: Core Bugs # 128188: Unable to add custom fields to care plan review document.

Release Type: Fix | **Priority:** High

Navigation Path: Login -- Client Search -- Select a Client -- Go to 'Care Plan Review' Screen.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. The user was unable to add 'Custom Fields' DFA to Care Plan Review Document. This was due to a red error message as displayed below:

Error Message: "Object reference not set to an instance of an object."

With this release, the above mentioned issue has been fixed. The user can add 'Custom Fields' DFA to Care Plan Review Document without any error.

Author: Jagadeesh Raju

50: Core Bugs # 127477: The index is missing from the source database to enhance the performance of multiple reports from SmartCare and SmartCareRX.

Release Type: Fix | **Priority:** Medium

Navigation Path: N/A

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. The Multiple execution timeouts/ expired exceptions happening from various Store procedures. Also, Outlook sync job execution time was getting increased and taking longer time to execute than its usual time which caused an increase in CPU.

With this release, the above-mentioned issue has been resolved. Now, the index is added to the source database to enhance the performance of multiple reports from SmartCare and SmartCareRX.

Note: If a table has a custom index on the same column, we must delete the custom index before applying the core index. Otherwise, the Performance will be degraded.

Author: Muttu Venkatachaliah

51: EII # 126234: The 'Eating Disorder Examination Questionnaire- EDE QS' has been implemented.

DISCLAIMER: The document is only available to those customers who have purchased an annual subscription. It is a premium add-on to SmartCare and not included in SmartCare Base Subscription. If you are interested in learning more about this document, please contact your account manager.

Release Type: New Functionality | **Priority:** High

Navigation Path: 'Client' – 'Documents' – 'Eating Disorder Examination Questionnaire - EDE QS' screen.

Functionality 'Before' and 'After' release:

With this release, a new document 'Eating Disorder Examination Questionnaire- EDE QS' is implemented with the following tabs, sections and fields as per the design document.

Eating Disorder Examination Questionnaire- EDE QS

Effective 06/28/2024

Status New

Author R. Mari

EDE-QS

Eating Disorder Examination Questionnaire

Weight

Height

On How Many of the Past 7 Days...	0 days	1-2 days	3-5 days	6-7 days
1. Have you been deliberately trying to limit the amount of food you eat to influence your weight or shape (whether or not you have succeeded)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Have you gone for long periods of time (e.g., 8 or more waking hours) without eating anything at all in order to influence your weight or shape?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Has thinking about food, eating or calories made it very difficult to concentrate on things you are interested in (such as working, following a conversation or reading)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Has thinking about your weight or shape made it very difficult to concentrate on things you are interested in (such as working, following a conversation or reading)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Have you had a definite fear that you might gain weight?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Have you had a strong desire to lose weight?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Have you tried to control your weight or shape by making yourself sick (vomit) or taking laxatives?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Have you exercised in a driven or compulsive way as a means of controlling your weight, shape or body fat, or to burn off calories?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Have you had a sense of having lost control over your eating (at the time that you were eating)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. On how many of these days (i.e. days on which you had a sense of having lost control over your eating) did you eat what other people would regard as an unusually large amount of food in one go?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Over The Past 7 Days....	Not at all	Slightly	Moderately	Markedly
11. Has your weight or shape influenced how you think about (judge) yourself as a person?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. How dissatisfied have you been with your weight or shape?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

EDE QS' tab: The following section with the respective fields will be displayed under this tab

I. 'Eating Disorder Examination Questionnaire' Section:

- Weight: This is a text box field.
- Height: This is a text box field.

The below fields are displayed in the table format with the radio buttons and it's required to select.

The "On How Many of the Past 7 Days...", this table header will be displayed with the below radio button options:

"0 days", "1-2 days", "3-5 days", "6-7 days"

The questionnaire is as below:

1. Have you been deliberately trying to limit the amount of food you eat to influence your weight or shape (whether or not you have succeeded)?
2. Have you gone for long periods of time (e.g., 8 or more waking hours) without eating anything at all in order to influence your weight or shape?
3. Has thinking about food, eating or calories made it very difficult to concentrate on things you are interested in (such as working, following a conversation or reading)?
4. Has thinking about your weight or shape made it very difficult to concentrate on things you are interested in (such as working, following a conversation or reading)?
5. Have you had a definite fear that you might gain weight?
6. Have you had a strong desire to lose weight?
7. Have you tried to control your weight or shape by making yourself sick (vomit) or taking laxatives?
8. Have you exercised in a driven or compulsive way as a means of controlling your weight, shape or body fat, or to burn off calories?
9. Have you had a sense of having lost control over your eating (at the time that you were eating)?
10. On how many of these days (i.e. days on which you had a sense of having lost control over your eating) did you eat what other people would regard as an unusually large amount of food in one go?

The "Over The Past 7 Days...", table header will be displayed with below radio button options:

"Not at all", "Slightly", "Moderately", "Markedly".

The questionnaire is as below:

11. Has your weight or shape influenced how you think about (judge) yourself as a person?
12. How dissatisfied have you been with your weight or shape?

Author: Kiran Tigarimath

52: EII # 127471: Implemented additional Co-signer functionality when a Co-Signer (Staff/Client/Guardian) declines to sign.

Release Type: Change | **Priority:** Urgent

Prerequisite:

1. For any Documents/Service Notes: Select 'Yes' radio button for 'Create In Progress Version When Client/Guardian Declines To Co-Sign' field and 'Create In Progress Version When Staff Declines To Co-Sign' field using the following path,
Path: 'Administration' -- 'Document Codes' -- 'Document Codes Detail' -- 'Documents/Service Notes' section.
- 2: To display the Guardian, please check the Guardian check box for a contact of client under 'Contacts' tab in 'Client Information' screen.

Navigation Path 1: 'Client' -- 'Documents' Screen.

Navigation Path 2: 'Client' -- 'Services/Notes Screen.

Functionality 'Before' and 'After' release:

Purpose: To improve the Co-Signer processes and better ensure compliance. So, the original author will now receive a new version of the Document/Service Note, if the Client/Guardian has declined to Co-sign it.

With this release, an additional functionality has been implemented when Staff/Client/Guardian declines to Co-Sign the document/Service Notes as follows:

A	B	C	D	E	F	G	H	I	J
Stored Procedure									
Stored Procedure				Initialization					
Enable Edit Validation				View					
New Validation				Validation					
Document									
Description				Schema			Text Template		
HTML									
Mobile									
Form Collection				Table List					
Documents/Service Notes									
Create In Progress Version When Staff Declines To Co-Sign				<input type="radio"/> Yes <input type="radio"/> No					
Create In Progress Version When Client/Guardian Declines To Co-Sign				<input type="radio"/> Yes <input type="radio"/> No					

Use case 1: Client/Guardian declines to Co-Sign:

- When a user selects 'Yes' radio button for 'Create In Progress Version When Client/Guardian Declines To Co-Sign' field for any Documents/Service Notes.
 - The author document will be in the signed status when client/Guardian declines to sign the document.
 - A new in progress version of the document will be created and assigned to author every time when client/Guardian declines to sign the document.
 - The new in progress document will be displayed in 'Assigned Documents' and Documents' widget under 'In progress' column in 'Dashboard' screen.
 - The new 'In progress' document will be displayed in 'My Documents' list page.
 - The 'in progress' record will be removed from widgets and list page only when Client/Guardian signs the document.
- The new 'In progress' version of the Document/Service Notes will not be created When user selects 'Yes' radio button for 'Create In Progress Version When Client/Guardian Declines To Co-Sign' field and Client/Guardian signs the Document/Service Notes.
- The new 'In progress' version of the Document/Service Notes will not be created When user selects 'No' radio button or None of the radio button selected for 'Create In Progress Version When Client/Guardian Declines To Co-Sign' field and Client/Guardian signs or not signs the document.

Use case 2: Staff declines to Co-Sign

1. When user selects 'Yes' radio button for 'Create In Progress Version When Staff Declines To Co-Sign' field for any Documents/Service Notes.
 - a. The author document will be in the signed status until the page is refreshed.
 - b. A new InProgress version of the document will be created and assigned to author every time when Staff Co-Signer declines to sign the document.
 - c. All the Co-Signers including the manually added co-signers will be auto-associated with the new version.
 - d. The new InProgress document will be displayed in 'Assigned Documents' and Documents' widget under 'In progress' column in 'Dashboard' screen.
 - e. The new InProgress document will be displayed in 'My Documents' list page.
 - f. The 'in progress' record will be removed from widgets and list page only when Staff Co-Signer signs the document.
 2. The new 'In progress' version of the Document/Service Notes will not be created when user selects 'Yes' radio button for 'Create In Progress Version When Staff Declines To Co-Sign' field and Staff Co-Signer signs the Document/Service Notes.
 3. The new In progress version of the Document/Service Notes will not be created when user selects 'No' radio button or None of the radio button selected for 'Create In Progress Version When Staff Declines To Co-Sign' field whether the Staff Co-Signers declines to sign or not.
-

Author: Archana Govindappa

53: Core bugs # 128395: ISP Interventions still Initializing Inactive Auth Codes in the PDF.

Release Type: Fix | **Priority:** High

Navigation Path 1: Client – 'Individual Service Plan' document – Enter the details by adding more than one Auth Code (Auth Code1 & Auth Code 2) in Interventions tab – Sign.

Navigation Path 2: Administration – select the Authorization Code (Auth Code 1) entered in Navigation Path1 and uncheck Active check box.

Navigation Path 3: Client – 'Individual Service Plan' document – Enter the details – Sign – PDF – Auth Code 1 should not be displayed in the PDF.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. The inactivated Auth Code in the Intervention was not displaying in the 'Individual Service Plan' document, but it was displaying in PDF after signing 'Individual Service Plan' document'

After this release, the issue has been fixed. Now the inactivate 'Interventions' are not displaying in Individual Service Plan document and the PDF.

Author: Praveen Gangadhara

54: EII # 126133: Changes in Government Performance and Results Act Outcome Measure

Release Type: Change | **Priority:** Urgent

Navigation Path: Client – Documents – ‘Government Performance and Results Act Outcome Measure’ document.

Functionality ‘Before’ and ‘After’ release:

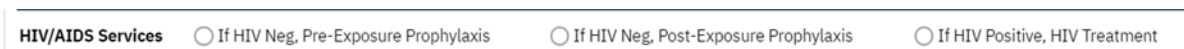
Purpose: ‘Government Performance and Results Act Outcome Measure’ is a data set that measures a client's outcome of Medication Assisted Treatment (MAT). The federal government (SAMHSA) requires this reporting for clinics providing MAT services with funding that falls under this required reporting.

Before this release, here was the behaviour. In ‘Government Performance and Results Act Outcome Measure’ document, the below were the existing behaviour in the ‘General’ tab for the mentioned fields:

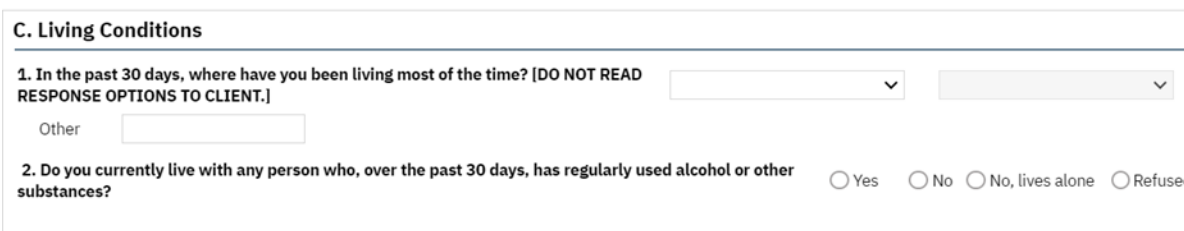
- ‘Was interview conducted?’ field was displaying validations for all ‘Interview Type’ [Baseline, Reassessment and Discharge].
- ‘Interview Date’ field validation was displaying if ‘Was interview conducted?’ field’s was ‘Yes/No’.
- ‘Residential/Rehabilitation’ value was in ‘Medication’ field.



- In ‘HIV/AIDS Services’, radio button field had values ‘If HIV Neg, Pre-Exposure Prophylaxis’, ‘If HIV Neg, Post-Exposure Prophylaxis’ and ‘If HIV Positive, HIV Treatment’.



- ‘C. Living Conditions’ section, 1st question was having drop down and ‘Other’ field with text box.



With this release, the changes have been implemented as mentioned below in ‘General’ tab.

- ‘Was interview conducted?’ field was displaying validations for only ‘Reassessment’ and ‘Discharge’ Interview Type.
- In ‘Interview Date’ field validation displays only when ‘Was interview conducted?’ field value is ‘Yes’.
- ‘Residential/Rehabilitation’ value is moved from ‘Medication’ field to ‘Modality [SELECT AT LEAST ONE MODALITY.]’ field.



In ‘HIV/AIDS Services’ radio button field changed as mentioned below:



- When user selects ‘If HIV Neg’ radio button value, then ‘Pre – Exposure Prophylaxis’ and ‘Post-Exposure Prophylaxis’ check boxes will get enabled.

- When user select 'If HIV Positive, HIV Treatment' radio button, then 'Pre – Exposure Prophylaxis' and 'Post-Exposure Prophylaxis' check boxes will get disabled.
- In 'C. Living Conditions' section'. 1st question when user selects the 'Housed: [IF HOUSED, CHECK APPROPRIATE SUBCATEGORY:]' dropdown value another dropdown field will enable with mentioned values:
 - Own/Rental Apartment, Room, Trailer, Or House
 - Someone Else's Apartment, Room, Trailer, Or House (including couch surfing)
 - Dormitory/College Residence
 - Halfway House or Transitional Housing
 - Residential Treatment
 - Recovery Residence/Sober Living
 - Refused

C. Living Conditions

1. In the past 30 days, where have you been living most of the time? [DO NOT READ RESPONSE OPTIONS TO CLIENT.]

Other

Housed: [IF HOUSED, CHECK F ▼]

2. Do you currently live with any person who, over the past 30 days, has regularly used alcohol or other substances? ☐ Yes ☐ No

Own/Rental Apartment, Room, Trailer, Or House
Someone Else's Apartment, Room, Trailer, Or House (including couch surfing)
Dormitory/College Residence
Halfway House or Transitional Housing
Recovery Residence/Sober Living
Residential Treatment
Refused

Data Model Change:

Added the below 3 columns to the existing core table DocumentGovernmentPerformanceGenerals

- AIDSServicePreExposureProphylaxis
- AIDSServicePostExposureProphylaxis
- LivingConditionDetailed

Author: Harika Rajendran

55: Core bugs # 128184: The Program name is not displaying completely in the Goal Plan PDF.

DISCLAIMER: The document is only available to those customers who have purchased an annual subscription. It is a premium add-on to SmartCare and not included in SmartCare Base Subscription. If you are interested in learning more about this document, please contact your account manager.

Release Type: Fix | **Priority:** High

Navigation Path: Client -- 'Goal Plan' Screen – Enter all the required details -- click on Sign.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the Goal Plan PDF, the Program name provided under the Activity section was not displayed completely.

With this release, the above-mentioned issue has been resolved. Now, the Program name is displayed completely in the Goal Plan PDF.

Data Model Changes: 'ClientProgramId' column included in 'DocumentGoalPlanActivityPrograms' table.

Author: Sachin Ranganathappa

56: EII # 127745: Implementing the expiration date defaults to 1 year from the start date (which currently defaults to today's date), but the user can change it.

Release Type: Change | **Priority:** Urgent

Navigation Path: 'Client' search – Select a 'Client' – Search 'Internal Consent Management (MH)' screen.

Functionality 'Before' and 'After' release:

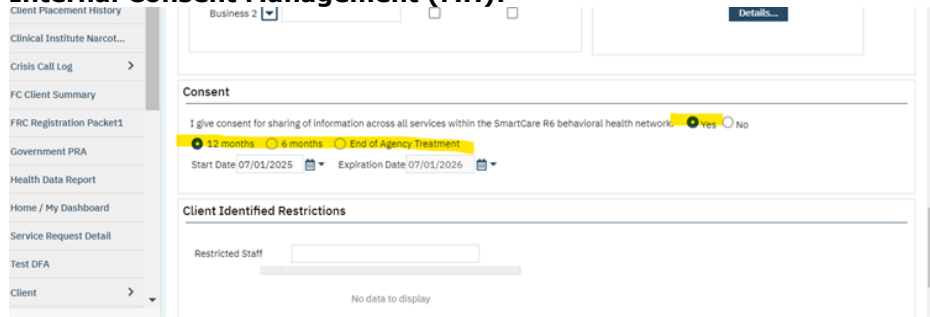
Purpose: The governor of California has signed a new Assembly Bill into the law that limits the duration of disclosures to 1 year or less and legal teams have requested that this document have a default expiration of 1 year to help manage that expectation. To accommodate this, the 'Expiration Date' is defaulting to 1 year from the start date (which currently defaults to today's date), but the user can change it.

With this release, the following implementation has been done in the 'Consent' section of the 'Internal Consent Management (MH)' screen.

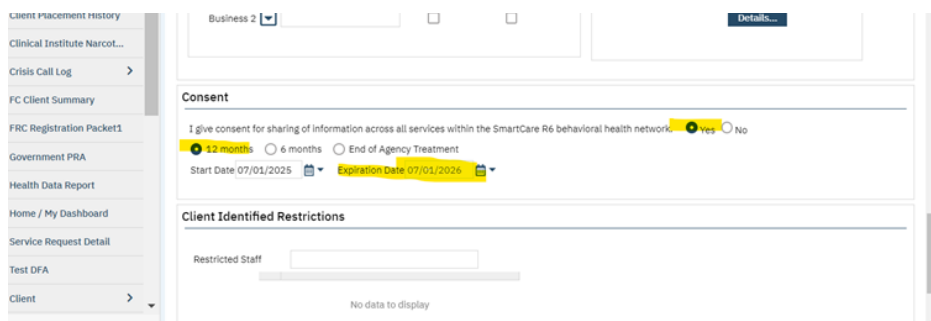
'Consent' section:

When the 'Consent' is granted by selecting the 'Yes' radio button in the 'Consent' section, '12 months', '6 months', and 'End of Agency Treatment' radio buttons are displayed in the 'General' tab of the 'Internal Consent Management (MH)' screen and '12 months' radio button will be selected as default.

Internal Consent Management (MH):



1. When the user opens the 'Internal Consent Management (MH)' document for the first time, by default the 'Expiration Date' field will be set to 1 year from today's date since the 'Start Date' is currently defaulting to Today's date. If the user changes the 'Start Date'. then the 'Expiration Date' will automatically set to 1 year from the 'Start Date' entered.



Business 2

Details...

Consent

I give consent for sharing of information across all services within the SmartCare R6 behavioral health network. ☒ Yes ☐ No

☒ 12 months ☐ 6 months ☐ End of Agency Treatment

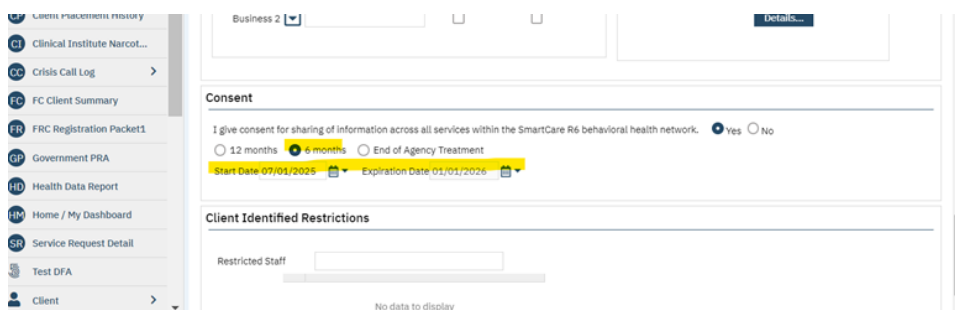
Start Date 07/01/2025 Expiration Date 07/01/2026

Client Identified Restrictions

Restricted Staff

No data to display

- When the '6 months' radio button is selected, the 'Expiration Date' will be updated to '6 months' from today's date since the 'Start Date' is currently defaulting to Today's date. If the user changes the Start Date, the 'Expiration Date' will automatically set to '6 months' from the 'Start Date' entered.



Business 2

Details...

Consent

I give consent for sharing of information across all services within the SmartCare R6 behavioral health network. ☐ Yes ☒ No

☐ 12 months ☒ 6 months ☐ End of Agency Treatment

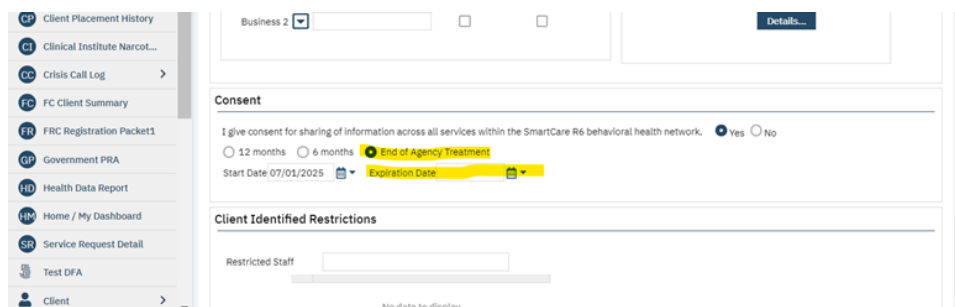
Start Date 07/01/2025 Expiration Date 01/01/2026

Client Identified Restrictions

Restricted Staff

No data to display

- When the 'End of Agency Treatment' radio button is selected, the 'Expiration Date' will be updated manually based on the 'Discharge Date'.



Business 2

Details...

Consent

I give consent for sharing of information across all services within the SmartCare R6 behavioral health network. ☐ Yes ☒ No

☐ 12 months ☐ 6 months ☒ End of Agency Treatment

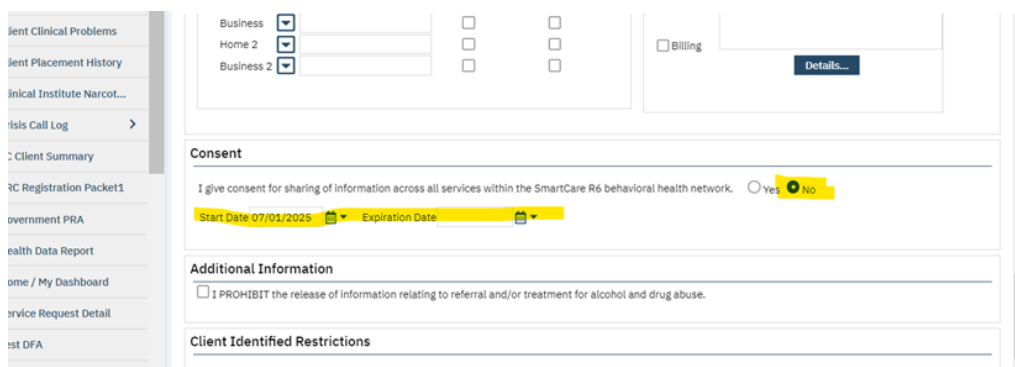
Start Date 07/01/2025 Expiration Date 07/01/2026

Client Identified Restrictions

Restricted Staff

No data to display

- When the 'Consent' is not granted by selecting the 'No' radio button in the 'Consent' section, then the '12 months', '6 months', and 'End of Agency Treatment' radio buttons will be hidden.



Business 2

Details...

Consent

I give consent for sharing of information across all services within the SmartCare R6 behavioral health network. ☐ Yes ☒ No

Start Date 07/01/2025 Expiration Date 07/01/2026

Additional Information

☐ I PROHIBIT the release of information relating to referral and/or treatment for alcohol and drug abuse.

Client Identified Restrictions

Author: Muttu Venkatachalaiah

57: EII # 126881: Implementation of a new 'Obsessional Compulsive Inventory-Revised' document.

DISCLAIMER: The document is only available to those customers who have purchased an annual subscription. It is a premium add-on to SmartCare and not included in SmartCare Base Subscription. If you are interested in learning more about this document, please contact your account manager.

Release Type: New Functionality | **Priority:** High

Navigation Path: 'Client' search – 'Documents' – 'Obsessional Compulsive Inventory-Revised' document screen.

Functionality 'Before' and 'After' release:

Purpose: To calculate the 'Total Score' by adding the item scores based on a five-point Likert scale ranging from Scale-0 ("Not at all") to Scale-4 ("Extremely").

With this release, a new 'Obsessional Compulsive Inventory-Revised' document is implemented with the following 'General' tab, sections, and fields as below:

'Obsessional Compulsive Inventory-Revised' document:

Effective: 07/08/2024

Status: New

Author: Ramesh

Sign

General

OCI-R

The following statements refer to experiences that many people have in their everyday lives. Select the response that best describes **HOW MUCH** that experience has **DISTRESSED** or **BOTHERED** you during the **PAST MONTH**.

Questions	Not at all (Score=1)	A little (Score=2)	Moderately (Score=3)	A lot (Score=4)	Extremely (Score=5)
1. I have saved up so many things that they get in the way.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I check things more often than necessary.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I get upset if objects are not arranged properly.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I feel compelled to count while I am doing things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. I find it difficult to touch an object when I know it has been touched by strangers or certain people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I find it difficult to control my own thoughts.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. I collect things I don't need.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. I repeatedly check doors, windows, drawers, etc.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. I get upset if others change the way I have arranged things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. I feel I have to repeat certain numbers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. I sometimes have to wash or clean myself simply because I feel contaminated.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. I am upset by unpleasant thoughts that come into my mind against my will.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. I avoid throwing things away because I am afraid I might need them later.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. I repeatedly check gas and water taps and light switches after turning them off.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. I need things to be arranged in a particular way.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. I feel that there are good and bad numbers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. I wash my hands more often and longer than necessary.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. I frequently get nasty thoughts and have difficulty in getting rid of them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Total Score

Administration and Scoring

The OCI-R is a short version of the OCD (Foa, Kozak, Selikowitz, Cohen, & Amir, 1998) and is a self-report scale for assessing symptoms of Obsessive-Compulsive Disorder (OCD). It consists of 18 questions that a person endorses on a 5-point Likert scale.

Scores are generated by adding the item scores. The possible range of scores is 0-72. Mean score for persons with OCD is 28.0 (SD = 13.53). Recommended cutoff score is 21, with scores at or above this level indicating the likely presence of OCD.

Foa, E.B., Huppert, J.D., Lieberg, S., Hajcak, G., Langner, R., et al. (2002). The Obsessive Compulsive Inventory: Development and validation of a short version. *Psychological Assessment*, 14, 485-496.

'General' tab: The 'General' tab is displayed with the following sections:

'OCI-R' Section: This section is displayed with the below label as text:

Label: "The following statements refer to experiences that many people have in their everyday lives. Select the response that best describes **HOW MUCH** that experience has **DISTRESSED** or **BOTHERED** you during the **PAST MONTH**."

'OCI-R' Section consists of 18 questions that a person endorses on a 5-point Likert scale and by the selection of these questions, the 'Total score' field will calculate and all the questions are required to be answered.

The Table header is displayed with the below fields:

- Questions
- Not at all (Score=0)
- A little (Score=1)
- Moderately (Score=2)
- A lot (Score=3)
- Extremely (Score=4)

Questions: This field displays the below questions:

1. I have saved up so many things that they get in the way.
2. I check things more often than necessary.
3. I get upset if objects are not arranged properly.
4. I feel compelled to count while I am doing things.
5. I find it difficult to touch an object when I know it has been touched by strangers or certain people.
6. I find it difficult to control my own thoughts.
7. I collect things I don't need.
8. I repeatedly check doors, windows, drawers, etc.
9. I get upset if others change the way I have arranged things.
10. I feel I have to repeat certain numbers.
11. I sometimes have to wash or clean myself simply because I feel contaminated.
12. I am upset by unpleasant thoughts that come into my mind against my will.
13. I avoid throwing things away because I am afraid I might need them later.
14. I repeatedly check gas and water taps and light switches after turning them off.
15. I need things to be arranged in a particular way.
16. I feel that there are good and bad numbers.
17. I wash my hands more often and longer than necessary.
18. I frequently get nasty thoughts and have difficulty in getting rid of them

Total Score: Total score will calculated Based on the responses selected in the 5-point Likert scale from questions (1–18), it will calculate and display the total score as in numerical value.


'Administration and Scoring' Section: This section displays with three labels as below:

"The OCI-R is a short version of the OCD (Foa, Kozak, Salkovskis, Coles, & Amir, 1998) and is a self-report scale for assessing symptoms of Obsessive-Compulsive Disorder (OCD). It consists of 18 questions that a person endorses on a 5-point Likert scale."

"Scores are generated by adding the item scores. The possible range of scores is 0-72. Mean score for persons with OCD is 28.0 (SD = 13.53). Recommended cutoff score is 21, with scores at or above this level indicating the likely presence of OCD."

"Foa, E.B., Huppert, J.D., Leiberg, S., Hajcak, G., Langner, R., et al. (2002). The Obsessive Compulsive Inventory: Development and validation of a short version. Psychological Assessment, 14, 485-496."

PDF: After signing the 'Obsessional Compulsive Inventory-Revised' document and PDF will generate as below:


Obsessional Compulsive Inventory-Revised

Client Information

Client Name:	Client ID:
DOB:	Effective Date:

General

OCI-R

The following statements refer to experiences that many people have in their everyday lives. Select the response that best describes **HOW MUCH** that experience has **DISTRESSED** or **BOTHERED** you during the **PAST MONTH**.

Questions	Not at all (Score=0)	A Little (Score=1)	Moderately (Score=2)	A lot (Score=3)	Extremely (Score=4)
1. I have saved up so many things that they get in the way.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I check things more often than necessary.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I get upset if objects are not arranged properly.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I feel compelled to count while I am doing things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
5. I find it difficult to touch an object when I know it has been touched by strangers or certain people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
6. I find it difficult to control my own thoughts.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
7. I collect things I don't need.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. I repeatedly check doors, windows, drawers, etc.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. I get upset if others change the way I have arranged things.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. I feel I have to repeat certain numbers.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. I sometimes have to wash or clean myself simply because I feel contaminated.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. I am upset by unpleasant thoughts that come into my mind against my will.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
13. I avoid throwing things away because I am afraid I might need them later.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
14. I repeatedly check gas and water taps and light switches after turning them off.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
15. I need things to be arranged in a particular way.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. I feel that there are good and bad numbers.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. I wash my hands more often and longer than necessary.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. I frequently get nasty thoughts and have difficulty in getting rid of them.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Total Score : 33

Administration and Scoring

The OCI-R is a short version of the OCD (Foa, Kozak, Salkovskis, Coles, & Amir, 1998) and is a self-report scale for assessing symptoms of Obsessive-Compulsive Disorder (OCD). It consists of 18 questions that a person endorses on a 5-point Likert scale.

Client Name: Test, Sunil

Page 1

Printed on: 07/06/2024

Client Name: Sunil Test Medicaid: 11245
Client ID: 1687

Page 2 of 2

Scores are generated by adding the item scores. The possible range of scores is 0-72. Mean score for persons with OCD is 28.0 (SD = 13.53). Recommended cutoff score is 21, with scores at or above this level indicating the likely presence of OCD.

Foa, E.B., Huppert, J.D., Leiberg, S., Hajcak, G., Langner, R., et al. (2002). The Obsessive Compulsive Inventory: Development and validation of a short version. *Psychological Assessment*, 14, 485-496.

Data Model Change:

A new table "DocumentObsessionalCompulsiveInventories" is created.

Author: Praveen Gangadhar

58: EII # 127847: Implementation of two documents namely - 'Fall Risk' and 'Fall Risk Daily Assessment' documents.

DISCLAIMER: The document is only available to those customers who have purchased an annual subscription. It is a premium add-on to SmartCare and not included in SmartCare Base Subscription. If you are interested in learning more about this document, please contact your account manager.

Release Type: Change | **Priority:** Urgent

Navigation Path1: Client – Documents – 'Fall Risk' document.

Navigation Path2: Client – Documents – 'Fall Risk Daily Assessment' document.

Functionality 'Before' and 'After' release:

Purpose: To capture the customer fall statistics, medications provided and mental wellbeing to identify a proper treatment plan.

With this release, the 'Fall Risk' and 'Fall Risk Daily Assessment' documents are implemented.

The 'Fall Risk' document is displayed with the below mentioned sections:

- Instructions
- Client Age
- Physical Status
- History of falls in past 6 months
- Mental Status
- Elimination
- Gait

Effective

01/01/2021

Status

New

Author

Test, Previous

01/01/2021

Instructions

Calculate risk by: (1) adding up points for all but medication (radio buttons start at 0 pts, left to right); (2) adding a point per medication class; (3) combining these totals to calculate the overall risk. - Test DFA

Client Age

☐ 18-59
 ☐ 60-70
 ☐ 71 or older

Physical Status

☐ Healthy
 ☐ Generalized weakness
 ☐ Dizzy, syncope, orthostatic changes

History of falls in past 6 months

☐ No history
 ☐ Near falls or fear of falling
 ☐ 1-2 falls
 ☐ Greater than 2 falls

Mental Status

☐ Oriented;cooperative
 ☐ Oriented;uncooperative
 ☐ Confused;memory loss;forgets limitations;questionable detox

Elimination

☐ Independent; continent
 ☐ Catheter; ostomy
 ☐ Diarrhea or any incontinence

Gait

☐ Able to walk, stand unassisted
 ☐ Physically unable to walk, stand (but may attempt)
 ☐ Walks with assistive device

Effective

07/09/2024

Status

New

Author

Test, Praveen

07/09/2024

History of falls in past 6 months

No history

Near falls or fear of falling

1-2 falls

Greater than 2 falls

Medications

Mood stabilizers

Sedative; hypnotics

Benzodiazepines

Anti-psychotics

Diuretics

Anti-depressants

Narcotics

Cardiac meds

Fall Risk

0-6 points Low Risk Observe client

7-10 points Medium Risk Potential for fall treatment plan

10 or more points HIGH RISK FALL TREATMENT PLAN

Able to walk, stand unassisted

Physically unable to walk, stand (but may attempt)

Walks with assistive device

Instructions section: The Instruction section consists of 'Calculate risk by: (1) adding up points for all but medication (radio buttons start at 0 pts, left to right);(2) adding a point per medication class; (3) combining these totals to calculate the overall risk.' : This is a Label.

Client Age Section: The section is displayed with following radio button values,

- 18-59
- 60-70
- 71 or older

Physical Status: The section is displayed with following radio buttons,

- Healthy
- Generalized weakness
- Dizzy, syncope, orthostatic changes

History of falls in past 6 months: The section is displayed with the following radio buttons,

- No history
- Near falls or fear of falling
- 1-2 falls
- Greater than 2 falls

Mental Status: The section is displayed with following radio buttons,

- Oriented;cooperative
- Oriented;uncooperative
- Confused;memory loss;forgets limitations;questionable detox

Elimination: The section is displayed with following radio buttons,

Fall Risk Daily Assessment

GoTo

Effective
Status
Author

4. Mental Status
☐ Alert And Oriented (0)
☐ Non Compliant With Protocol/ Confused/ Forgets Limitations (15)
5. Elimination
☐ Independent (0)
☐ Requires Assistance/Incontinent (5)
6. Medications
☐ None/No Changes (0)
☐ Increase In Dose Of Psychotropic/ Sedative Hypnotic/Antihypertension/ Cardiac Medications (5)
☐ New Psychotropic/Sedative Hypnotics/ Antihypertension/Cardiac Medications (10)
7. Nutritional Intake
☐ Adequate (0)
☐ Poor Oral Intake (5)

TOTAL SCORE

***A Fall Assessment Score greater than 25 requires a Fall Prevention Treatment Plan.**

Risk Identification ☐ Low risk: 0-25 ☐ Moderate to high risk: 26 or greater

- Please complete daily the Fall Risk Assessment Tool for any patient on fall risk protocol.: This is a label.

1. 'History of Falls within the past three months' radio button field is displayed with 'No (0)' and 'Yes(5)' options

2. 'Ambulation/Balance' radio button field is displayed with the below options,

- Normal (0)
- Impaired/Weak (5)
- Assistance With Ambulation Needed Via Device/Staff (10).

3. Visual Impairment: is a radio button field is displayed 'None (0)' and 'Yes (5)' options.

4. Mental Status: is a radio button field is displayed with the below options,

- Alert And Oriented (0)
- Non Compliant With Protocol/ Confused/ Forgets Limitations (15)

5. Elimination radio button field is displayed with below mentioned options,

- Independent (0)
- Requires Assistance/Incontinent (5)

6. Medications radio button field is displayed with below mentioned options,

- None/No Changes (0)
- Increase In Dose Of Psychotropic/ Sedative Hypnotic/Antihypertension/ Cardiac Medications (5)
- New Psychotropic/Sedative Hypnotics/ Antihypertension/Cardiac Medications (10)

7. Nutritional Intake radio button field is displayed with 'Adequate (0)' and 'Poor Oral Intake (5)' options.

TOTAL SCORE': This is an auto filled text box field, the scores will update automatically based on the answers

with value associated with them.

'*A Fall Assessment Score greater than 25 requires a Fall Prevention Treatment Plan.' : This is a label.

Risk Identification radio button is displayed with below options,

- Low risk: 0-25.
- Moderate to high risk: 26 or greater.

It is an auto selected field, based on the total score the radio button, this will select automatically.

Validations: The below Validations are displayed for the 'Fall Risk Daily Assessment' document when no value is selected for the above fields.

Fall Risk Daily Assessment: Fall History Last 3 Months is required.

Fall Risk Daily Assessment : Balance is required.

Fall Risk Daily Assessment :Visual Impairment required.

Fall Risk Daily Assessment : Mental status required.

Fall Risk Daily Assessment :Elimination required.

Fall Risk Daily Assessment :Medications required.

Fall Risk Daily Assessment :Nutritional Intake Required.

Author: Santosh Huggi

59: Core bugs # 128462: Referral Document: Modify the 'From Staff' and 'Receiving Staff' dropdown fields to Typeable search textbox fields.

Release Type: Fix | **Priority:** Medium

Pre-requisites:

1. The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is used to change the dropdown fields as type-able search textbox.

A) When the key-value is set to "Yes", then staff drop-downs will display type-able search text boxes instead of a drop-down.

B) When the key-value is set to "No", then the staff drop down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behaviour.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behaviour, i.e., the same as the key value is "No".

2. The Existing System Configuration Key 'ApplyStaffAccessRule' is used to apply the rule for 'StaffAccessRules' permission setup.

A) When the key-value is set to "No", the "StaffAccessRules" permission will not be applied. This will be the default value of the key as it drives the existing behaviour.

B) When the key-value is set to "Yes", the "StaffAccessRules" permission will be applied.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behaviour, i.e. same as the key value being "No".

Navigation Path 1: 'Client' -- 'Documents' -- 'Referral Document' -- 'Referral' tab -- 'Referral' section.

Navigation Path 2: 'Administration' -- 'Configuration Keys' list page -- 'Configuration Key Details' screen.

Navigation Path 3: 'Administration -- 'Staff/Users' list page -- 'Staff Details' -- 'Roles/ Permissions' -- 'Permission' section -- Select the Permission Type as 'StaffAccessRules' -- click 'Apply Filter' button.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In 'Referral Document' screen, the 'From Staff' and 'Receiving Staff' dropdowns were listed with all the staff and if the system had a large number of qualifying staff values, then it was causing the page to freeze while selecting the dropdown values.

With this release, the above-mentioned issue has been resolved. Now, when System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is set to 'Yes', the 'From Staff' and 'Receiving Staff' fields will be displayed as Type-able search textboxes. Also, to limit the data loaded in the fields, the below mentioned permission type is applied to display the values in the 'From Staff' and 'Receiving Staff' type-able search text fields.

Permission Type: StaffAccessRules

Permission Item:

1. AllStaff
2. LimitedStaff

- a) If the logged in staff has "LimitedStaff" Access Rule, then the type-able search textbox displays the staff who is associated with any of the Program that the logged in staff is also associated with.
- b) If the logged in staff has "AllStaff" Access Rule, then the type-able search textbox will display all the staff.
- c) If the logged in staff has both "LimitedStaff" and "AllStaff" Access Rule, then "AllStaff" takes Precedence.

Note: The "From Staff" field currently uses a dropdown where an empty selection is not allowed. Modifying this dropdown to a type-able search users can clear the value. Hence, introduced the validation with the message "Please select From Staff" for the field 'From Staff'.

Dynamic Forms (DFA)

Reference No	Task No	Description
60	EII # 125296	Implementation of 'CK Editor' on the DFA Editor screen to format the form item labels of the DFA document.

Author: Rakesh Naganagoda

60: EII # 125296: Implementation of 'CK Editor' on the DFA Editor screen to format the form item labels of the DFA document.

Release Type: Change | **Priority:** On Fire

Navigation Path: Login to SmartCare application - 'Administration' - 'DFA Editor' Screen - 'Form Items' Field - Enter the text in the 'Item Label' text field - CK Editor will enable.

Functionality 'Before' and 'After' release:

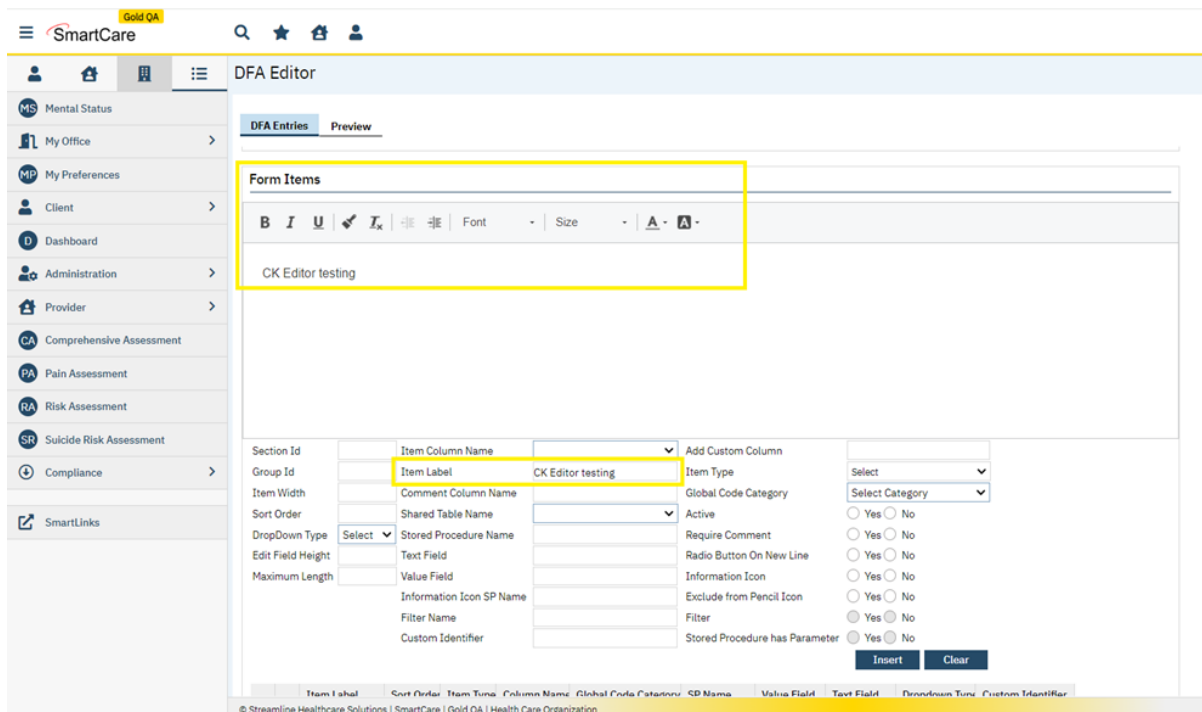
Purpose: Users can use 'CK Editor' on the 'DFA Editor' screen, to format the form item labels of the DFA document.

With this release, the text formatting tool called 'CK Editor' has been implemented on the DFA Editor screen to format the form item labels of the DFA document with some of the text formatting functionality tools.

The data added in the 'Item Label' field, which is auto-populated in the 'CK Editor' tool text area, and it has to be selectable by the user while editing a new document.

The user is able to modify the formatting of the form if it already exists by choosing the 'Item Label' from the grid of Form Items. To apply formatting, the user must select the data that is automatically added from the 'Item Label' to the text area of the 'CK Editor' tool.

Note: CK Editor will not display in the PDF.



The **CK Editor** consists of the below list of text formatting tools along with the tools icons.

- 1. 'Bold' Format:** The Bold Format will convert the text displaying in the text area of the CK Editor into Bold format.
- 2. 'Italic' Format:** The Italic functionality will convert the text displaying in the text area of the CK Editor into Italic format.
- 3. 'Decrease Indent' Format:** The Decrease indent functionality will help in decreasing the space between the initial points to the text displaying in the text area of the CK Editor.
- 4. 'Increase Indent' Format:** The Increase indent functionality will help in increasing the space between the initial points to the text displaying in the text area of the CK Editor.
- 5. 'Font Name' :** The Font functionality will format the text displaying in the text area of the CK Editor into font style which the user will select from the font dropdown.

6. 'Font Size' : The Font Size functionality will format the text displaying in the text area of the CK Editor into font size which the user will select from the size dropdown.

7. 'Underline' : The Underline functionality will help the user to underline the text displaying in the text area of the CK Editor.

8. Text Color: The Text Color functionality will help the user to color the text displaying in the text area of the CK Editor.

9. 'Background Color': The Background Color functionality will help the user to color the background of the text displaying in the text area of the CK Editor.

10.'Copy Formatting' :The Copy formatting functionality will convert the text displaying in the text area of the CK Editor into the format of the text copied.

11. 'Remove Formatting' : The Remove Formatting functionality will help the user to clear/remove all the formatting actions applied on the text displaying in the text area of the CK Editor. After removing the format the text will display in the default size and font.

SmartCare

- Mental Status
- My Office
- My Preferences
- Client
- Dashboard
- Administration
- Provider
- Comprehensive Assessment
- Pain Assessment
- Risk Assessment
- Suicide Risk Assessment
- Compliance
- SmartLinks

DFA Editor

DFA Entries Preview

Form Items

B I U [Link Icon] [Text Color Icon] [Background Color Icon] Verdana 20 A [Image Icon]

CK Editor testing

Section Id	Item Column Name	Add Custom Column
Group Id	Item Label	Item Type
Item Width	Comment Column Name	Global Code Category
Sort Order	Shared Table Name	Active
DropDown Type	Stored Procedure Name	Require Comment
Edit Field Height	Text Field	Radio Button On New Line
Maximum Length	Value Field	Information Icon
	Information Icon SP Name	Exclude from Pencil Icon
	Filter Name	Filter
	Custom Identifier	Stored Procedure has Parameter

Select Category Select Category

Yes No Yes No Yes No Yes No Yes No Yes No Yes No

Insert Clear

Item Label Sort Order Item Type Column Name Global Code Category SP Name Value Field Text Field DropDown Type Custom Identifier

Electronic Remittance

Reference No	Task No	Description
61	Core Bugs # 128114	Electronic Eligibility Mapping Maintenance (Admin) screen is displayed with red error.

Author: Debanjit Das

61. Core Bugs # 128114: Electronic Eligibility Mapping Maintenance (Admin) screen is displayed with red error.

Release Type: Fix | **Priority:** High

Navigation Path: Go search-'Electronic Eligibility Mapping Maintenance (Administration).'

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When a user accessed the 'Electronic Eligibility Mapping Maintenance' screen, a red error message was displayed.

With this release, the above issue has been resolved. Now, an error message is not displayed when the user accesses the 'Electronic Eligibility Mapping Maintenance' screen.

ERFile

Reference No	Task No	Description
62	Core Bugs # 128160	Charges/ Claims: Posting 835 payment to the earliest service if many Date of Service exist for the charges.

Author: Rinki Kumari

62. Core Bugs # 128160: Charges/ Claims: Posting 835 payment to the earliest service if many Date of Service exist for the charges.

Release Type: Fix | **Priority:** Medium

Prerequisites:

1. Services is completed for the selected client.
- 2.Charges are generated for the selected services.

Navigation Path 1: Go Search -Charges/Claims (My Office)-Select the Charge ID for the completed services
- Click on Electronic Claims- Click on Process Now.

Navigation Path 2: Go Search - Payments/Adjustments (My office)- Click on Electronic Remittance icon- Electronic Remittance pop-up- Click on Import File ID(Hyperlink)-Electronic Remittance File Details pop up opens up -Click on Process File.

Navigation Path 3: Go Search -Charges/Claims (My Office)- Click on the Charge(Hyperlink)-Ledger Entries.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When the client had many services and the services on the 835 were posted to the respective service charges, but the payment was being posted to only the earliest date of service that client had, instead of all the date of services.

With this release, the above-mentioned issue has been resolved. Now, if a client has many services and the services on 835 are posted to the respective service charges, then the payment is posted to all the days of services that client has.

ERProcessing Templates

Reference No	Task No	Description
63	EII # 128164	Ability to apply the adjustment actions by Remarks Codes.

Author: Sahana Gururaja

63. EII # 128164: Ability to apply the adjustment actions by Remarks Codes.

Release Type: Change | **Priority:** Urgent

Prerequisites:

1. Create a record in the 'ERProcessing Template Rules' with the newly added field 'Remark Codes' as required for the required "ERProcessingActions", through the below **path**:

Go to the 'Administration' – 'ERProcessing Template Rules'– click on the 'New' icon – 'ERProcessing Template Rules Details' screen – add the required details in all fields and save the screen.

2. Process an 835 file which has a 'Remark Code' along with the 'Adjustment Code' that is specified in the 'ERProcessing Template Rules'. through the 'Payments/Adjustments' screen by following the below **Path**:

Go to 'My Office' – 'Payments/Adjustments'– Click on the 'Electronic Remittance' Icon – click on the required 'Import file Id' hyperlink – 'Electronic Remittance File Details' pop-up – click on the 'Process file' button -- click on 'Save' button and click on 'Close' button.

Note: The 835 File can have a single or multiple remark codes.

Navigation Path: Client -- 'Services' -- click on 'DOS' hyperlink -- 'Service Details' screen -- Click on 'Charge Amount' hyperlink -- 'Ledger Entry' Screen.

Functionality 'Before' and 'After' release:

Purpose: Ability to apply the adjustment actions by Remarks Codes as well.

With this release, the following field has been implemented in the ERprocessing Template Rules list page.

1. A new field 'Remark Code' with a drop-down the option is added in the filter section and added a column "Remark Code" in-between "Adjustment Reason" and "Action Description" in the 'Grid Section' of the 'ERProcessing Template Rules' list page screen.

ERProcessing Template Rules (1558)					
<div> <div>ER Processing Template</div> <div>Adjustment Group</div> <div>Adjustment Reason</div> <div>Processing Action</div> <div>Apply Filter</div> </div>					
<div>Remark Code</div>					
Id	Template Name	Adjustment Group	Adjustment Reason	Remark Code	Action Description
2324	835	CO	38	N9	Post an adjustment to the charge if c...
2331	835	CO	38	N315	Cascade Directly to Client
2329	835	CO	38	N313	Do not post this adjustment. This op...
2330	835	CO	38	N278	Write Off the Adjustment Amount
2328	835	CO	38	N103	Do not post the adjustment and add ...
2327	835	CO	38	MA61	Do not post any adjustments or pay...
2326	835	CO	38	M2	Cascade to next Payer or Client

2) The 'Remark Code' with a drop-down option and a 'Priority' field text box are added.

- The value in the 'Priority' field acts as a tiebreaker in the case where an adjustment code comes back with multiple remark codes. If multiple remark codes are in a payment line for the same adjustment code, then the system will use the adjustment action with the highest priority (value closest to zero).

Note: This "Remark Code" dropdown is mapped with the existing Global Code "835REMARKCODES" and the dropdown will pull all the values from the Global Code.

ERProcessing Template Rules Details

ERProcessing Template Rules Details

ERProcessing Template Rules

Adjustment Code*

Remark Code*

ER Processing Template*

Adjustment Action*

Priority*

- When an 835 file with remark code is processed, the system will apply the adjustment based on the 'Action' that is mapped with the 'Adjustment Code' and 'Remark Code' in the 'ERProcessing Template Rules'.

Example: 1

Record in ERProcessing Templates

Adjustment Code Remark Code(s) Action

CO(45) N6 4

Record in 835 Files

Adjustment Code Remark Code(s) Use Action

CO-45 N6 4

Since the mapping exists in the application, the system will apply the adjustment action '4' for the ERfile.

Example: 2

Record in ERProcessing Templates

Adjustment Code	Remark Code(s)	Action	Priority
CO(45)	N6	4	55
CO(45)	MA61	2	24

Record in 835 Files

Adjustment Code	Remark Code(s)	Use Action
CO-45	N6	2
Co-45	MA61	

Since an adjustment code has multiple remark codes, the system will apply the adjustment based on the priority field (value closest to zero), in the above example, the system will use 'ActionID2' for applying adjustments.

Example 3:

Record in ERProcessing Templates

Adjustment Code	Remark Code(s)	Action
CO(45)	N6	5
CO(45)	NULL	2

Record in 835 Files

Adjustment Code	Remark Code(s)	Use Action
CO-45	M1	2

Since the adjustment code and remark code combination do not exist, the rule for the adjustment code without a remark code will be used for posting adjustment amounts.

Screenshot of the 'ERProcessing Template Rules' list page.

ERProcessing Template Rules (7)

ER Processing Template: Adjustment Group: CO Adjustment Reason: 38 Processing Action:

Remark Code:

Id	For Unknown or Unmapped RemittanceAdviceRemarkCode	Group	Adjustment Reason	Remark Code	Action Description
23	M1		38	N9	Post an adjustment to the charge if c...
23	M10		38	N315	Cascade Directly to Client
23	M102		38	N313	Do not post this adjustment. This op...
23	M103		38	N278	Write Off the Adjustment Amount
23	M104		38	N103	Do not post the adjustment and add ...
23	M105		38	MA61	Do not post any adjustments or pay...
23	M107		38	M2	Cascade to next Payer or Client
23	M109				
23	M11				
23	M111				
23	M112				
23	M113				
23	M114				
23	M115				
23	M116				
23	M117				

Screenshot of the 'ERProcessing Template Rules Details' list page

ERProcessing Template Rules Details

ERProcessing Template Rules

Adjustment Code*: Remark Code*: ER Processing Template*: Adjustment Action*: Priority*:

For Unknown or Unmapped RemittanceAdviceRemarkCode

M1

M10

M100

M102

M103

M104

M105

M107

M109

M11

M111

M112

M113

M114

M115

M116

M117

Data Model Changes: 'RemarkCode' and 'AdjustmentPriority' columns included in ERProcessingTemplateRules table

Flow Sheet

Reference No	Task No	Description
64	EII # 123772	Flowsheet Added new field - BMI percentile (child and Teen) field in the Vitals template.
65	EII # 127513	FlowSheet: The Add Flow Sheet and Select Template drop down selections fields are changed to the searchable dropdown fields.

Author: Suganya Sivakumar

64. EII # 123772: Flowsheet Added new field - BMI percentile (child and Teen) field in the Vitals template.

Release Type: Change | **Priority:** Medium

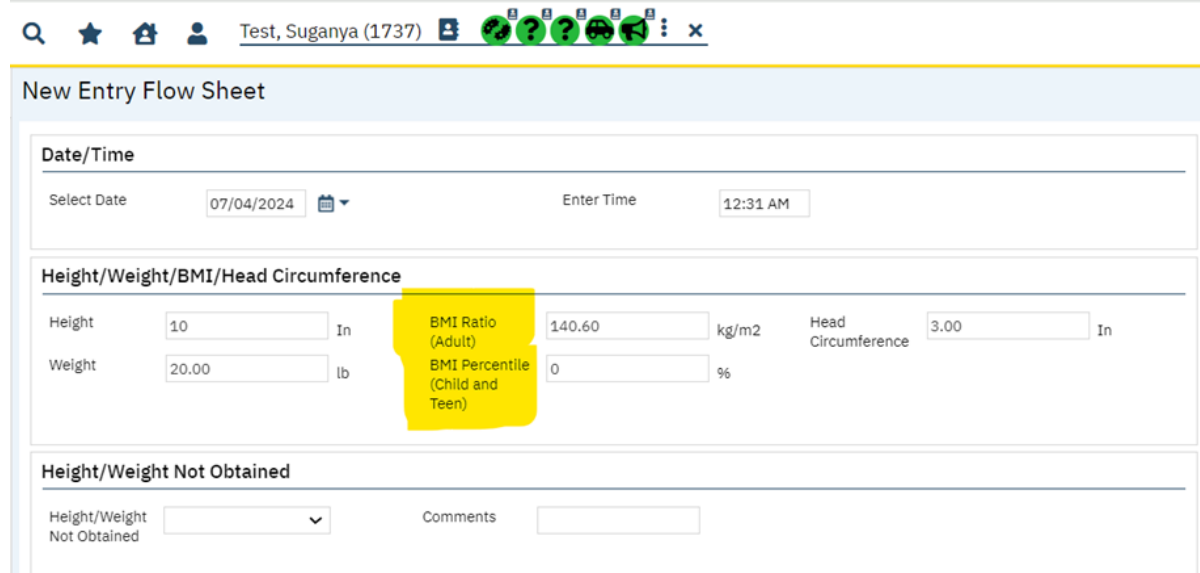
Navigation Path: Perform Client Search --- Select Client --- Navigate to Flow Sheet Quick Link --- Client --- Flow Sheet List Page --- In Vital History tab --- Select Meaningful Use/ Vitals template --- From Add Flow Sheet dropdown filter --- Click on New Icon --- New Entry Flow Sheet Detail page --- Enter all required fields in Height/Weight/BMI/Head Circumference section --- Click on Save Icon.

Functionality 'Before' and 'After' release:

Purpose: Children require a different measurement of BMI - Percentile, which is necessary for CCBHC and Meaningful Use reporting. The Flow sheet and Health Attribute table has been updated to allow for improved CCBHC/Meaningful Use reporting.

With this release, the below new field BMI percentile (Child and Teen) has been implemented in the Flow Sheet screen under the Height/Weight/BMI/Head Circumference section.

- The BMI Ratio (Adult) field name has been modified from BMI().
- The BMI percentile (Child and Teen) is denoted with % symbol.



The screenshot shows the 'New Entry Flow Sheet' form. The 'Date/Time' section has 'Select Date' set to 07/04/2024 and 'Enter Time' set to 12:31 AM. The 'Height/Weight/BMI/Head Circumference' section contains the following fields:

Field	Value	Unit
Height	10	In
Weight	20.00	lb
BMI Ratio (Adult)	140.60	kg/m2
BMI Percentile (Child and Teen)	0	%
Head Circumference	3.00	In

The 'Height/Weight Not Obtained' section has a dropdown menu for 'Height/Weight Not Obtained' and a 'Comments' field.

1. When the Client's age is between (0-18) years in the New Entry Flowsheet and the Height and Weight values are provided, then the system will auto calculate and initialize the value according to the Height and weight values entered in the BMI percentile (Child and Teen) field.

Search ★ Home User Test, Boy (4674) [Icons]

New Entry Flow Sheet

Date/Time			
Select Date	07/04/2024	Enter Time	12:45 AM

Height/Weight/BMI/Head Circumference			
Height	14 In	BMI Ratio (Adult)	197.27 kg/m2
Weight	55.00 lb	BMI Percentile (Child and Teen)	100.00 %
Head Circumference 5.00 In			

Height/Weight Not Obtained	
Height/Weight Not Obtained	Comments

2. When the Client age is above 18 years of age in the New Entry Flowsheet screen and the Height and the Weight values are provided, then the system will auto-calculate values and initializes the value according to the Height and Weight values entered to BMI Ratio (adult) field.

Search ★ Home User Test, Suganya (1737) [Icons]

New Entry Flow Sheet

Date/Time			
Select Date	07/04/2024	Enter Time	12:31 AM

Height/Weight/BMI/Head Circumference			
Height	10 In	BMI Ratio (Adult)	140.60 kg/m2
Weight	20.00 lb	BMI Percentile (Child and Teen)	0 %
Head Circumference 3.00 In			

Height/Weight Not Obtained	
Height/Weight Not Obtained	Comments

Author: Aishwarya Bommaklar

65. EII # 127513: FlowSheet: The Add Flow Sheet and Select Template drop down selections fields are changed to the searchable dropdown fields.

Release Type: Change | **Priority:** Urgent

Navigation Path 1: Client– Flowsheet.

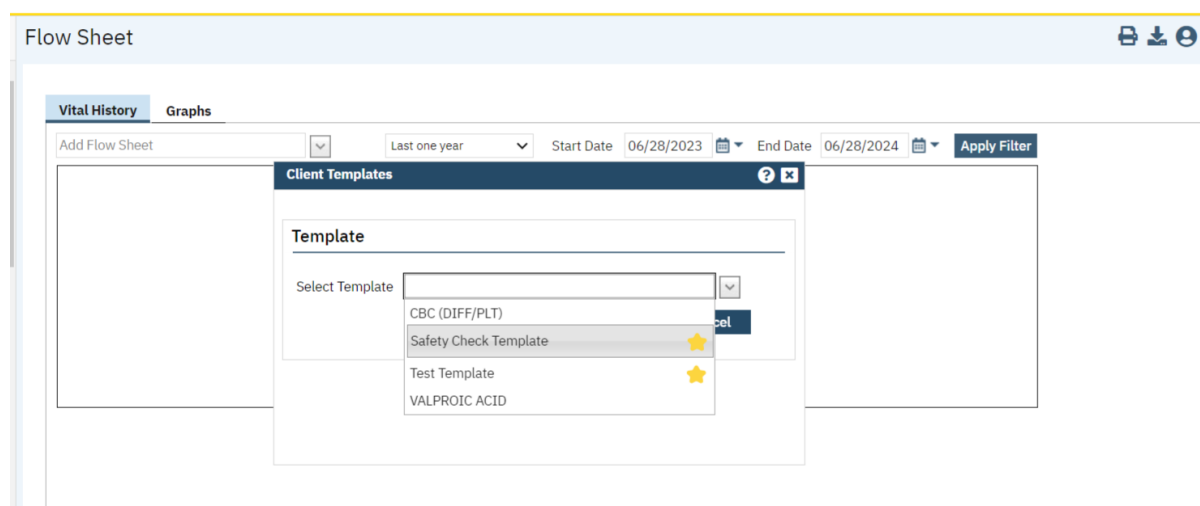
Navigation Path 2: Administration – Recodes screen – Select SetDefaultFlowsheetTemplates and click on Recode Category hyperlink – Enter the Template name, Health Data Template ID in Integer Code ID – Click on Insert – Click on Save icon.

Functionality 'Before' and 'After' release:

Purpose: When there are a huge number of templates that load into the flowsheet selection field, then the ability to mark templates as favourites will let users access their frequently used templates at ease.

With this release, the following changes have been implemented in the Flow Sheet screen.

1. The Add Flow Sheet and Select Template drop down fields are changed to searchable drop down fields under the Flow Sheet screen. When the user searches for the template, the matching templates with the typed text will display in the drop down.



2. A new recode category 'SetDefaultFlowsheetTemplates' has been created. When the Health Data TemplateID is mapped in the Integer Code ID field in Recode details, those templates will be displayed as the default templates in Add Flow Sheet and Select Template drop down fields.

Recode Detail

Recodes

Category Code

SetDefaultFlowsheetTemplate

Category Name

SetDefaultFlowsheetTemplates

Mapping Entity

HealthDataTemplates.HealthID

Description

The purpose of this recode category is to map health data template ids that must be displayed/listed by default in Template search drop-list on the flow sheet screen

Recode Details

Code Name

Start Date

End Date

Character Code Id

Integer Code Id

Insert

Clear

Recode List

	Code Name	From Date	To Date	Character Code Id	Integer Code Id
<input checked="" type="checkbox"/>	Basic Metabolic Panel	07/01/2024			117

3. The Favourite icons are implemented to each Health Data Templates so that users can make their own favorite Health Data Templates. Once the template is marked as favorite, the Yellow star icons will be displayed and these Templates are also displayed as the default Templates in Add Flow Sheet and Select Template drop down fields.

When the user no longer need the Templates as favorite, they can remove the favorite icon by clicking on the Yellow Star icon.

Flow Sheet

Vital History

Graphs

Add Flow Sheet

CBC (DIFF/PLT)

Safety Check Template

Test Template

VALPROIC ACID

Last one year

Start Date

06/28/2023

End Date

06/28/2024

Apply Filter

No data found for the period specified

Note: When a Template is added as a favorite and also in the recodes as a default, then that is not duplicated in the Add Flow Sheet and Select Template drop down fields in the Flow sheet screen.

Data Model Changes: Created "StaffHealthDataTemplateFavorites" table.

Foster Care

Reference No	Task No	Description
66	Core Bugs # 128362	In FC Discharge Support Plan document: The Aftercare tab fields are not loaded with correct data.

Author: Lakshmi Kumarappan

66. Core Bugs # 128362: In FC Discharge Support Plan document: The Aftercare tab fields are not loaded with correct data.

Release Type: Fix | **Priority:** High

Navigation Path: 'Client' - 'FC Discharge Support Plan' document.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the FC Discharge Support Plan document, when the user navigated to the Aftercare tab from other tabs, it was loaded with the fields of Current Service Providers/Discharge Info tab fields.

With this release, the above-mentioned issue has been resolved. Now, when the user navigates to the Aftercare tab from other tabs, it is loaded with the fields of the Aftercare tab details.

GL Accounts

Reference No	Task No	Description
67	Core Bugs # 128218	GL Accounts: Error displayed when trying to add information

Author: Saravanakumaar Nagarajan

67. Core Bugs # 128218: GL Accounts: Error displayed when trying to add information.

Release Type: Fix | **Priority:** High

Navigation Path: GL Accounts -- GL Accounts (Administration) -- Select the GL Accounts (Administration) -- Click new icon button -- Enter data -- Save.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In "GL Accounts (Administration)", the user was unable to add/ Save any information due to an error message being displayed.

With this release, the above-mentioned issue has been resolved. Now, the user can add information in the 'GL Accounts (Administration)' and is able to save and update the data.

Group Services

Reference No	Task No	Description
68	EII # 126629	Group Note: To implement Validation Message when Changing the group note.
69	Core Bugs # 128331	Signature Checks missing when the Clinician signed the Group Services.
70	Core Bugs # 128157	Adding Client To Group Service Doesn't Include Diagnosis.

Author: Suganya Sivakumar

68. EII # 126629: Group Note: To implement Validation Message when Changing the group note.

Release Type: Change | **Priority:** On Fire

Navigation Path 1: My office --- Groups --- Groups List page --- Click on New Icon --- Group Detail page --- Mode of Delivery dropdown field --- Enter all the required fields --- Click on Save button --- Navigate to Schedule tab --- Click on New Group Service button --- Group Service Clients popup --- Select Date of Service and Clients --- Click on Select button.

Navigation Path 2: Navigate to Group Service Detail Screen --- Enter all the required fields in the Service Tab --- Click on Save Button --- Navigate to Note tab --- Under Client Note enter some values --- Click on Save Button.

Navigation Path 3: Go to Navigation Path 1 --- In the Group Detail page --- Under the General section --- Group Note field --- change the group note.

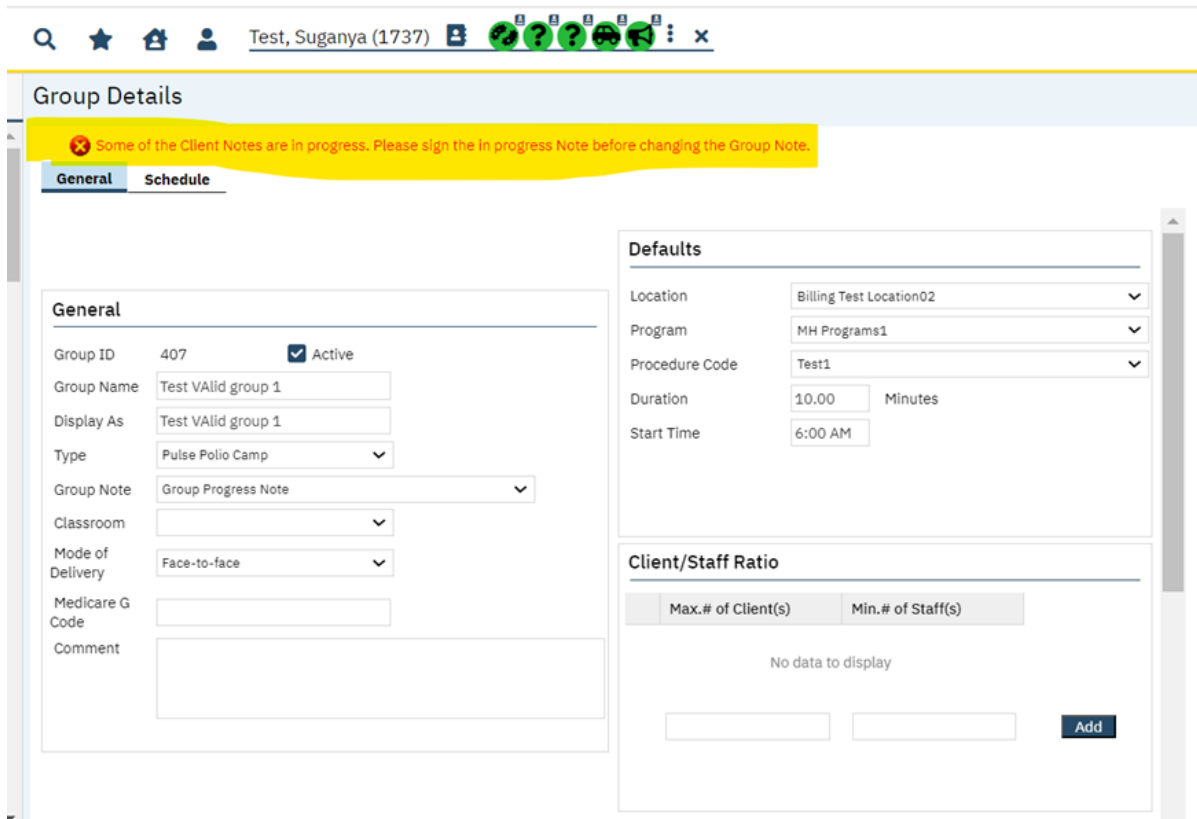
Functionality 'Before' and 'After' release:

Purpose: Currently the users are able to update the Group Note at any time. If there are any in progress Client Notes are present and staff tries to change the Group Note, then previously added Group Note will get lost. The Customers do not want their staff to change the Group Note if they have one or more in progress Client notes. This is to make sure that in progress notes/documents are completed under any of the Group Services for that Group before switching to another Group Note.

With this release, when the Client Note is 'in progress' status in the Group Service Detail screen, when the user tried to change the Associate Group Note in the Group Details page and clicks on save, there will be a Validation message triggered.

Validation Message:

"Some of the Client Notes are in progress. Please sign the in progress Note before changing the Group Note."



Author: Suganya Sivakumar

69. Core Bugs # 128331: Signature Checks missing when the Clinician signed the Group Services.

Release Type: Fix | **Priority:** Medium

Navigation Path: My Office -- Managing Groups -- 'Groups' List page -- Click on New Icon -- 'Group Details' Page -- Enter all the Required fields -- Click on Save -- Navigate to 'Schedule' tab -- Click on 'New Group Service' button -- 'Group Service Client' popup -- Select Date of Service -- Click on Select button -- 'Group Service Detail' Screen -- Enter all the required fields in Service tab -- Navigate to 'Note' tab -- 'Client Note' section -- Enter all the required details -- Sign the Group Services.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the Group Service detail screen, the Signature Checks were Missing when the clinician signed the Group Services Document in the client Notes tab.

With this release, the above-mentioned issue has been resolved. Now, in the Group services detail screen, the signature checks are displayed correctly once the group services document is signed in the Client Notes tab.

Author: Niroop Hassan

70. Core Bugs # 128157: Adding Client To Group Service Doesn't Include Diagnosis.

Prerequisite: 'Diagnosis Document' is signed for the client.

Release Type: Fix | **Priority:** Medium

Navigation Path: 'My Office' – 'Groups' – 'Groups' list page – Click on 'New' icon – 'Group Details' page – Enter required data – Click on 'Save' icon – Click on 'Schedule' tab – Click on 'New Group Services' button – 'Group Service Client' popup – Enter and select required data and click on 'Select' button – 'Group Service Detail' page – Add client from either 'Add Client from Roster' or from 'Add client that are enrolled in the program' – Select the added client and click on 'Billing Diagnosis' tab.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the Group Service Details, when the client was added from 'Add Client from Roster' or from 'Add client that are enrolled in the program', the 'Billing Diagnosis' was not initialized even though the 'Diagnosis Document' was signed for the client.

With this release, the above-mentioned issue has been resolved. Now, in the Group Service Details, the 'Diagnosis Document' is initialized for the client when the client is added from 'Add Client from Roster' or from 'Add client that are enrolled in the program' if the 'Diagnosis Document' is signed for the client.

Inquiries

Reference No	Task No	Description
71	Core Bugs # 128235	Service Notes : The service duration is not calculated correctly based on start date along with start time and end time entered in 'Crisis Tab' of 'Inquiry' screen.
72	Core Bugs # 128215	Client Inquiry Details: While completing the 'Crisis Hotline DFA Form' the red error is displayed.
73	EII # 127815	Inquiry screen: To alphabetize the 'Select Provider/Agency' dropdown in the Inquiry document.
74	EII # 128142	Inquiry Detail screen: Urgency Level and Contact type field validations to be displayed in the validation pop up.
75	EII # 127689	Inquiries: Modify the Staff dropdown fields to Typeable search textbox fields.

Author: Savitha Siddaraju

71. Core Bugs # 128235: Service Notes: The service duration is not calculated correctly based on start date along with start time and end time entered in 'Crisis Tab' of 'Inquiry' screen.

Release Type: Fix | **Priority:** High

Navigation Path: Client search popup - perform 3 way search by entering first name, last name, SSN, DOB - 'Inquiry (Selected client)' button - 'Initial' tab - 'Inquirer Information' section - select 'Crisis' checkbox - 'Crisis' tab - fill all required fields - Save the inquiry - click on 'Open service note' hyperlink - navigates to service notes screen - 'Service' tab - 'Service' section - 'Service time' field.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the Services/Notes screen, the service duration was not calculated correctly based on values entered in the fields of 'Start Date', 'Start Time' and 'End Time' in the 'Crisis Tab' of 'Inquiry' screen.

With this release, the above-mentioned issue has been resolved. Now, in the services/ Notes screen, the service duration is calculated correctly based on values entered in the fields of 'Start Date', 'Start Time' and 'End Time' in the 'Crisis Tab' of 'Inquiry' screen.

Author: Rakesh Naganagoda

72. Core Bugs # 128215: Client Inquiry Details: While completing the 'Crisis Hotline DFA Form' the red error is displayed.

Release Type: Fix | **Priority:** High

Navigation Path: Login to SmartCare – 'Client' search – 'Inquiry Details' Screen – 'Crisis' tab.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The user received a red error when attempting to complete the 'Crisis Hotline DFA Form'.

With this release, the above-mentioned issues have been resolved. Now, the user can 'Complete/Save' the 'Crisis Hotline DFA Form' without any red error.

Author: Shivakanth Moger

73. EII # 127815: Inquiry screen: To alphabetize the 'Select Provider/Agency' dropdown in the Inquiry document.

Release Type: Change | **Priority:** Urgent

Prerequisite: Create Multiple Provider/Agency values by following the below **Path:**

Administration – Global Codes – Global Codes List page – Select the 'ProviderOrAgency' value in the 'All Categories' dropdown field – click on Apply Filter – Click on the 'ProviderOrAgency' hyperlink – 'Global Code Details' screen – enter required details – click on Insert – click on Save.

Navigation Path 1: Login to 'SmartCare' – 'Client Inquiries' – 'New' – 'Inquiry Details' – 'Disposition' section – 'Select Provider/Agency' drop-down.

Navigation Path 2: Login to 'SmartCare' – 'Care Coordination Referral List Page' – 'New' – 'Referral Details' – 'Follow Up' tab – 'Disposition' section – 'Select Provider/Agency' drop-down.

Navigation Path 3: Login to 'SmartCare' – 'Service Request List' – 'New' – 'Service Request – Review/ Approval Detail' – 'Approval' tab – 'Disposition' section – 'Select Provider/Agency' drop-down.

Navigation Path 4: Login to 'SmartCare' – 'Service/Notes' – 'New' – 'Service Note' – 'Disposition' tab – 'Disposition' section – 'Select Provider/Agency' drop-down.

Navigation Path 5: Login to 'SmartCare' – 'Services' – 'New' – 'Service Detail' – – 'Disposition' tab – 'Disposition' section – 'Select Provider/Agency' drop-down.

Navigation Path 6: Login to 'SmartCare' – 'Assessments (C)' – 'New' – 'Assessments (C)' – 'Disposition' tab – 'Disposition' section – 'Select Provider/Agency' drop-down.

Navigation Path 7: Login to 'SmartCare' – 'Reception/Front Desk' – 'Reception/Front Desk' screen – Click the Scheduled status hyperlink – in the 'Change Status' pop-up change the 'Show' to 'No Show' and click on Change button -- Disposition pop-up will come – 'Disposition' section – 'Select Provider/Agency' drop-down.

Functionality 'Before' and 'After' release:

Purpose: To make it easier to find the Provider/Agency in the dropdown when sorted alphabetically. Before this release, the values were not sorted in chronological order when the user clicked on the 'Select Provider/Agency' drop-down.

With this release, the values are sorted in chronological order when the user clicks on the 'Select Provider/Agency' drop-down.

Author: Ramya Nagaraj

74. EII # 128142: Inquiry Detail screen: Urgency Level and Contact type field validations to be displayed in the validation pop up.

Release Type: Change | **Priority:** Urgent

Navigation Path 1: 'Client search' pop up - Enter First Name, Last Name, DOB and SSN - Perform three way search - Click on Inquiry (New Client) button.

Navigation Path 2: 'Client search' pop up - Enter First Name, Last Name, DOB and SSN - Perform three way search - Select the client in result set and Click on Inquiry (Selected Client) button.

Functionality 'Before' and 'After' release:

With this release, in 'Inquiry' detail screen when 'Urgency Level' and 'Contact type' fields are left blank, then the below mentioned validations will be displayed in the validation pop up.

- 1.Initial - Client Information (Potential) - Contact type is required
- 2.Initial - Client Information (Potential) - Urgency Level is required

Author: Santosh Huggi

75. EII # 127689: Inquiries: Modify the Staff dropdown fields to Typeable search textbox fields.

Release Type: Change | **Priority:** Urgent

Prerequisites:

The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is used to change the dropdown fields as typeable search textbox.

A) When the key-value is set to "Yes", then staff drop-downs will display typeable search text boxes instead of a drop-down.

B) When the key-value is set to "No", then the staff drop down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behavior.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behavior, i.e., the same as the key value is "No".

Navigation Path 1: 'Client' – 'Client Inquiries' list-page – click on 'New' icon - 'Inquiry Details' – 'Initial' tab and 'Demographics' tab.

Navigation Path 2: 'My Office' – 'Inquiries' list-page – click on 'New' icon and select the client - 'Inquiry Details' – 'Initial' tab and 'Demographics' tab.

Navigation Path 3: 'Administration' – 'Configuration Keys' list page – 'Configuration Key Details' screen.

Navigation Path 4: 'Administration' – 'Staff/Users' list page – 'Staff Details' – 'Roles/ Permissions' – 'Permission' section – Select the Permission Type as 'StaffAccessRules' – click 'Apply Filter' button.

Functionality 'Before' and 'After' release:

Purpose: The staff dropdowns are not responsive when there are large number of active staff in the environment. Now the typeable search text box is implemented to avert this scenario and for the better system performance.

Before this release, here was the behaviour. In 'Inquiries' and 'Client Inquiries' list pages, the 'Recorded By All' and 'Assigned To All' dropdown and in 'Inquiry Details' screen, the 'Information Gathered By', 'Assigned To', 'Primary Care Coordinator', 'Medical Provider' dropdowns were listed with all the staff and if the system had a large number of qualifying staff values, then it was causing the page to freeze while selecting the dropdown values.

With this release, the above-mentioned issue has been resolved. Now, when System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is set to 'Yes', the above-mentioned dropdown fields will be displayed as Typeable search textboxes. Also, to limit the data loaded in the fields, the below mentioned permission type is applied to display the values in the typeable search text staff fields.

Permission Type: StaffAccessRules

Permission Item:

1. AllStaff
2. LimitedStaff

a) If the logged in staff has "LimitedStaff" Access Rule, then the typeable search textbox displays the staff who is associated with any of the Program that the logged in staff is also associated with.

b) If the logged in staff has "AllStaff" Access Rule, then it will display all the staff in the typeable search textbox.

c) If the logged in staff has both "LimitedStaff" and "AllStaff" Access Rule, then "AllStaff" takes Precedence.

Note: In 'Inquiry Details' screen, under 'Initial' tab, in 'Inquiry Handled By' section, the 'Recorded By' field is changed from read-only dropdown to read-only label field.

Interface

Reference No	Task No	Description
76	EII # 127985	Fetching the details of Communication Preferences for ADT and SIU outbound messages
156	Core Bugs # 128247	CareWeb: 'Page not found' error and users were not able to access the CareWeb link.

Author: Munish Sood

76. EII # 127985: Fetching the details of Communication Preferences for ADT and SIU outbound messages.

Release Type: Change | **Priority:** Urgent

Navigation Path 1: Client - Services - Create New Service with Schedule status – Save.

Navigation Path 2: Client - Services - Open scheduled service/existing client service - Reschedule the Service by changing into future date/time – Save.

Navigation Path 3: Client - Services - Open Scheduled service/existing client service - Change status to 'Show' – Save.

Navigation Path 4: Client - Services - Open Scheduled service/existing client service - Change status to 'Complete' – Save.

Navigation Path 5: Client - Services - Open Scheduled service/existing client service - Change status to 'Cancel' – Save.

Navigation Path 6: Client - Services - Open Scheduled service/existing client service - Change status to 'No Show' – Save.

Navigation Path 7: My Office - Staff Calendar - Click on the time interval to schedule a new service - Select 'New Service Entry' radio button - Service Note - Enter data in required fields with Schedule status – Save.

Navigation Path 8: My Office - Staff Calendar - Click on the time interval for existing scheduled service - Change Service Time to Reschedule - Click Save.

Navigation Path 9: My Office - Staff Calendar - Click on the time interval existing scheduled service - Select Cancel Status and Select Reason to Cancel the Service – Save.

Navigation Path 10: My Office - Staff Calendar - Click on the time interval to schedule service - Select Show Status - Click Save.

Navigation Path 11: My Office - Staff Calendar - Click on the existing time interval of schedule service - Select No Show Status - Click Save.

Navigation Path 12: My Office - Staff Calendar - Click on the time interval to schedule service - New Entry Type='New Primary Care Entry' - New Primary Care Entry with Schedule status – Save.

Navigation Path 13: My Office - Staff Calendar - Click on the existing time interval of schedule service - Primary Care Entry with Cancel status – Save.

Navigation Path 14: My Office - Reception/Front Desk - Click on 'Enter Service' icon from right side top Menu - New Service -- Enter details with Schedule status – Save.

Navigation Path 15: My Office - Reception/Front Desk - Click on 'Enter Service' icon from right side top Menu - Click on the existing time interval of status with schedule - Reschedule the Service by changing into future date/time – Save.

Navigation Path 16: My Office - Reception/Front Desk - Click on 'Enter Service' icon from right side top Menu - Click on the existing time interval of status with schedule - Change status to 'Show' – Save.

Navigation Path 17: My Office - Reception/Front Desk - Click on 'Enter Service' icon from right side top Menu - Click on the existing time interval of status with schedule - Change status to 'No Show' – Save.

Navigation Path 18: My Office - Reception/Front Desk - Click on 'Enter Service' icon from right side top Menu - Click on the existing time interval of status with schedule - Change status to 'Complete' – Save.

Navigation Path 19: My Office - Reception/Front Desk - Click on 'Enter Service' icon from right side top Menu - Click on the existing time interval of status with schedule - Change status to 'Cancel' – Save.

Navigation Path 20: My Office - Reception/Front Desk - Click on 'Create Primary Care Visit' icon from right side top Menu - New Service -- Enter details with Schedule status – Save.

Navigation Path 21: My Office - Reception/Front Desk - Reception/Front Desk list page - Click on the existing time interval of status with schedule - Primary Care Entry with Cancel status – Save.

Navigation Path 22: Client - Service Note - Create New Service with Scheduled Status – Save.

Navigation Path 23: Client - Service Note - Open Scheduled service/existing client service - Reschedule the Services by changing into future date – Save.

Navigation Path 24: Client - Service Note - Open Scheduled service/existing client service - Modify the Services by Changing status to 'Show' – Save.

Navigation Path 25: Client - Service Note- Open Scheduled service/existing client service - Change status to 'Cancel' – Save.

Navigation Path 26: Client - Program Assignments - Program Assignment Details – Save.

Navigation Path 27: Client - Client information - Save.

Navigation Path 28: Administration - Messages Interface - Messages Interface Detail.

Functionality 'Before' and 'After' release:

With this release, the below functionalities are implemented when the Client Services is 'Scheduled', 'Show', 'No Show', 'Rescheduled', 'Complete' and 'Cancel' status from service details screen, Service Note screen, Staff Calendar screen and Reception/Front Desk screen:

- 'Voice^N~eMail^Y~Text^Y' will be displayed in PID.35 for SIU HL7 outbound messages based on the selection of Communication Preference for all three options Text message, Email and Voice (check boxes) under Demographics tab.
- Displaying '\T\' SIU AIS-3.2 if the Procedure Code Name is having '&' symbol in AIS.3.2 segment only for SIU messages.
- The SIU AIS-3.1 is displaying service Id and AIS-3.2 is displaying procedure Code Information.
- Appointment Id will be displayed for SIU AIS-3.1 if Primary Care Service is scheduled for a client.

- Also, 'Voice^N~eMail^Y~Text^Y' will be displayed in PID.35 when a user enrolls a client in any program, discharges a client from any enrolled program, and updates a client in any program of client demographic(s) information.

-

Author: Munish Sood

156. Core Bugs # 128247: CareWeb: 'Page not found' error and users were not able to access the CareWeb link.

Release Type: Fix | **Priority:** Medium

Navigation Path: Clients - Careweb

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The SystemConfigurationKey 'SetSAMLSSOUrl' was configured against each environment(s) separately. As their multiple instances referred to the same database and it was difficult to manage the url. So only one instance used to work at a time & other(s) instance was showing a blank screen with error 'Page not found' when clicked on Careweb quick link.

With release, the above mentioned issue has been resolved. Now code is added to fetch the instance(url) name dynamically and SSOScreenId will be fetched from the SystemConfigurationKey to make it work with multiple instances with same database.

Lab Orders

Reference No	Task No	Description
77	Core Bugs # 128191	System is not allowing to sign the client order with more than 40 order set.

Author: Munish Sood

77. Core Bugs # 128191: System is not allowing to sign the client order with more than 40 order set.

Release Type: Fix | **Priority:** High

Navigation Path: 'Client' - 'Client Orders' - 'New Order' - 'Save and Sign'.

Functionality 'Before' and 'After' Release:

Before this release, here was the behaviour. The system was not allowing to sign the client order with more than 40 order set and was displaying below validation.

Validation: "We can add max. 40 Orders in single requisition."

With this release, the above-mentioned issue has been resolved. Now, the System is allowing to sign the client order with more than 40 order set and not displaying the validation.

Lab Results Review

Reference No	Task No	Description
78	Core Bugs # 128369	Ordered Date is not sorting properly on Lab Result Review List.

Author: Sithara Ponnath

78. Core Bugs # 128369: Ordered Date is not sorting properly on Lab Result Review List.

Release Type: Fix | **Priority:** Medium

Navigation Path: 'Client' -- 'Lab Result Review List' screen -- Sort the 'Ordered Date' column.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When the user sorted the 'Ordered Date' column in the 'Lab Result Review List' screen, the 'Ordered Date' was not sorting properly by year.

With this release, the above-mentioned issue has been resolved. Now the 'Ordered Date' column is sorting properly by year.

Life Events

Reference No	Task No	Description
79	EII # 127517	Added Disruption Type in the Life Event and Implemented a New Global code Category 'FCDisruptionTypes' for Disruption Type.

Author: Suganya Sivakumar

79. EII # 127517: Added Disruption Type in the Life Event and Implemented a New Global code Category 'FCDisruptionTypes' for Disruption Type.

Release Type: Change | **Priority:** Urgent

Navigation Path 1: Administration --- Global Codes --- Global Codes List page --- Click on New Icon --- Global Code Details page --- In Code Details section --- Add Code Name --- Insert in the Code List section --- Click on Save Icon.

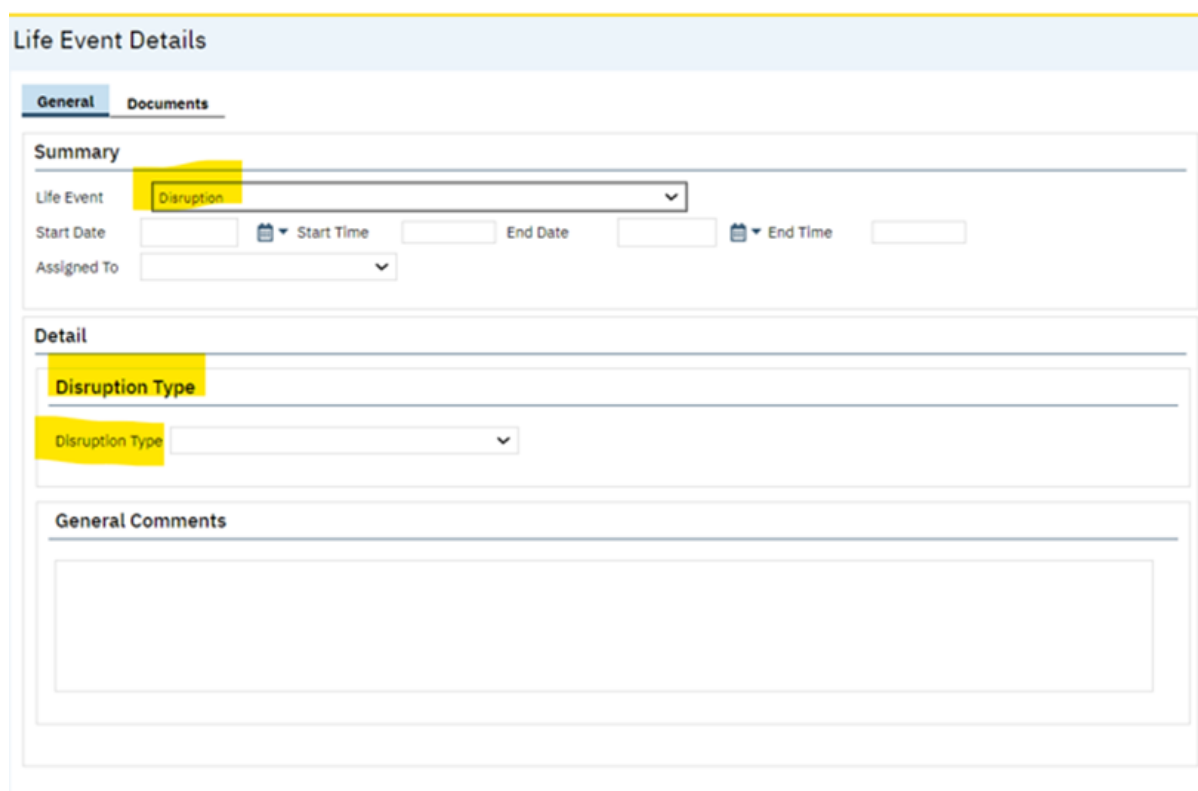
Navigation Path 2: Client -- Navigate to Life Events -- Client Life Events List page -- Click on New Icon -- Life Event Details page -- General tab -- Summary section -- Life Event dropdown -- Select Disruption Type value -- Enter all the required fields in the Detail section -- Click on Save Icon.

Functionality 'Before' and 'After' release:

With this release, the below mentioned changes have been implemented in the Life Event Detail screen and a New Global code Category 'FCDisruptionTypes' is implemented for Disruption Type.

Disruption Types:

- Disruption type is added in the Life Event dropdown values under Summary section.
- When the Disruption type value is selected from the Life Event dropdown, the Detail section contains Disruption Type details.
- The Disruption Type values are initialized from the Global code category "FCDisruptionTypes".



The screenshot displays the 'Life Event Details' form. At the top, there are two tabs: 'General' (selected) and 'Documents'. Below the tabs is the 'Summary' section, which includes a 'Life Event' dropdown menu. This dropdown is highlighted with a yellow box and shows the option 'Disruption'. Below the dropdown are fields for 'Start Date', 'Start Time', 'End Date', and 'End Time', each with a calendar icon. There is also an 'Assigned To' dropdown. Below the Summary section is the 'Detail' section, which contains a 'Disruption Type' dropdown menu, also highlighted with a yellow box. At the bottom of the form is a 'General Comments' section with a large text area.

Global Code: A new Global Code Category 'FCDisruptionTypes' is implemented for Disruption Type.

Global Code Details
Settings *Info* *AB* *Print* *Save*

Category

Category Code: FCDisruptionTypes
Category Name: FCDisruptionTypes
☒ Active
☐ User Defined Category

☒ Allowed to add/modify/delete codes
☒ Allowed to modify code names
☒ Allowed to modify sort order
☐ Has Subcodes

Description

Organization/Affiliate Setup

☒ Primary Driven
☒ Allow Addition By Affiliate
☒ Allow Deactivation By Affiliate

Code Details

Code ID: 11133843
Code Name: Test
☒ Active
☐ Cannot Modify Name or Delete Code

External Code 1:
External Source 1:
Sort Order:
Code:
Color:

External Code 2:
External Source 2:
Icon: Search or Select

Description:
Add/ Modify Subcodes...

- When the Values are added in the Global Code Details page for the Global code category "FCDisruptionTypes", it will reflect in the Life Events Detail page.

Global Code Details
Settings *Info* *AB* *Print* *Save*

Category

Category Code: FCDisruptionTypes
Category Name: FCDisruptionTypes
☒ Active
☐ User Defined Category

☒ Allowed to add/modify/delete codes
☒ Allowed to modify code names
☒ Allowed to modify sort order
☐ Has Subcodes

Description

Code Details

Code ID: 11135995
Code Name: Test 1
☒ Active
☐ Cannot Modify Name or Delete Code

External Code 1:
External Source 1:
Sort Order:
Code:
Color:

External Code 2:
External Source 2:
Icon: Search or Select

Description:
Add/ Modify Subcodes...

Code List
☒ Show Active Codes Only

Modify

Clear

	Code ID	Code Name	Code	Sort Order	Cannot Modify
<input checked="" type="checkbox"/>	11135995	Test 1			N
<input checked="" type="checkbox"/>	11135996	Test 2			N
<input checked="" type="checkbox"/>	11135997	Test 3			N

- Global code values are displayed in the Life Events Details page Disruption Type dropdown.

Life Event Details

General Documents

Summary

Life Event

Disruption

Start Date

Begin Time

End Date

End Time

Assigned To

Detail

Disruption Type

Disruption Type

Test 1

Test 2

Test 3

General Comments

Data Model Changes: 'DisruptionType' column included in 'ClientLifeEventDetails' table

Messages

Reference No	Task No	Description
80	Core Bugs # 128044	Messages screen shows error, when click on Reply, when there is a special character (^) in the message.
81	Core Bugs # 128163	Notification counts are not displayed on the Notification bell icon.

Author: Ramya Nagaraj

80. Core Bugs # 128044: Messages screen shows error, when click on Reply, when there is a special character (^) in the message.

Release Type: Fix | **Priority:** High

Navigation Path: 'New Message' - 'Message Detail' screen.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. In the 'Message Detail' screen, below error message was displayed when the user attempted to reply to a message containing special character(^) .

Error Message: 'Message cannot be sent to the user'

With this release, the above-mentioned issue has been resolved. Now the user is able to reply to a message which contains a special character without any error.

Author: Rakesh Naganagoda

81. Core Bugs # 128163: Notification counts are not displayed on the Notification bell icon.

Release Type: Fix | **Priority:** Medium

Navigation Path 1: Client – Client information© -- General tab -- Make logged in user as Primary Physician.

Navigation Path 2: Client – Contact Notes – click on new icon – Contact Note Detail – Enter all the required details – Check 'Notify team about this contact' checkbox – click on Save -- Observe the notification bell icon for the notification.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. In the Contact Note Detail screen, when a message was sent to the staff, a message notification count did not show on the Notification (bell) icon unless the screen was refreshed, or the staff logged out then logged in back.

With this release, the above-mentioned issues have been resolved. Now, the notification count will pop up on the Notification bell icon without refreshing the screen or the staff logging in after logging out.

My Caseload

Reference No	Task No	Description
82	Core Bugs # 127611	Client is showing incorrectly for other program filter in client's treatment team.
83	Core Bugs # 128185	Caseload List page taking a longer time to load when clicked on caseload widget count.

Author: Niroop Hassan

82. Core Bugs # 127611: Client is showing incorrectly for other program filter in client's treatment team.

Release Type: Fix | **Priority:** High

Prerequisite: Staff is part of client's Treatment team member.

Navigation Path: 'My Office' - 'My Caseload' - 'My Caseload' list page.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. When the user filtered with the program in the My Caseload screen, the Client was showing incorrectly for other program filters in the client's treatment team.

With this release, the above-mentioned issue has been resolved. Now, when the user filters with a program in the My Caseload screen, the client is showing correctly for the filtered program in the client's treatment team.

Author: Niroop Hassan

83. Core Bugs # 128185: Caseload List page taking a longer time to load when clicked on caseload widget count.

Release Type: Fix | **Priority:** High

Navigation Path: Go Search - Dashboard (My Office) - Dashboard - Caseload widget - click on the count hyperlink.

Functionality 'Before' and 'After' Release:

Before this release, here was the behavior. When the user clicked on count hyperlink in the Caseload widget, the Caseload List page was taking longer time to load.

With this release, the above-mentioned issue has been resolved. Now, when the user clicks on count hyperlink in the Caseload widget, the Caseload List page is loading without any performance issues.

My Documents

Reference No	Task No	Description
84	EII# 126158	Required Signer Functionality

Author: Savitha Siddaraju

84. EII# 126158: Required Signer Functionality

Note: This functionality is implemented for a specific customer. If you have Primary and County type of setup and would like to use these functionalities, please get in touch with Streamline Support.

Release Type: Change | **Priority:** Urgent

Prerequisites:

1. The system configuration key 'DisplayCDAGSectionInStaffDetails' value is set to 'Yes'.
2. The system configuration key 'EnableClinicalDataAccessGrouping' value is set to 'Yes'.

Navigation Path 1: 'My office' – 'My documents' – 'All Programs' dropdown filter - 'Program' column grid.

Functionality 'Before' and 'After' Release:

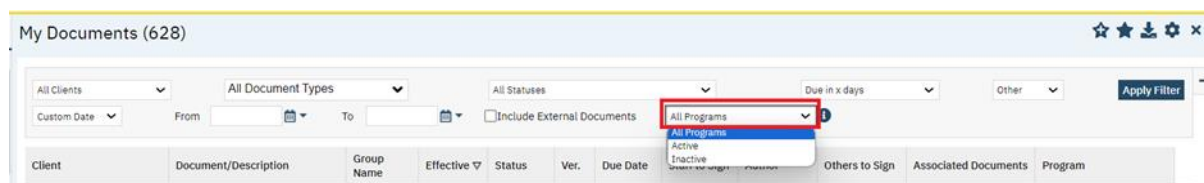
Purpose: Providing customer the Ability to view the associated Program for each Documents/Service Notes on My Documents list page.

With this release, the below implementations have been done in 'My documents' screen:

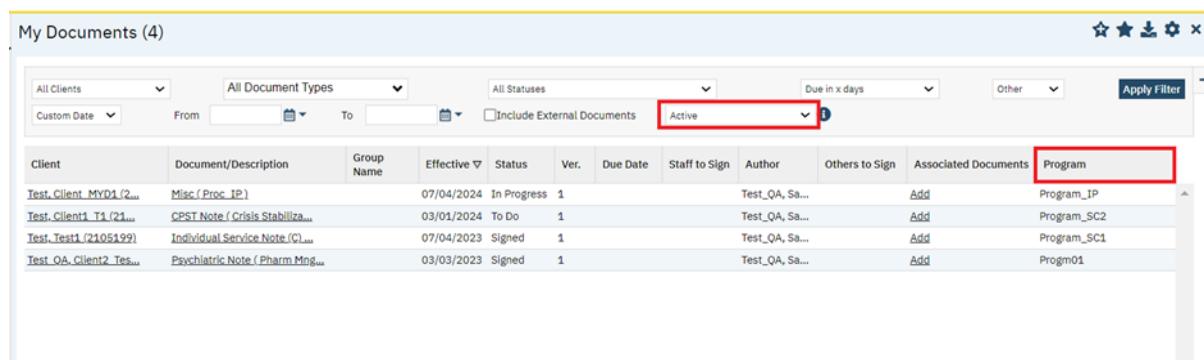
- 'All Program' dropdown along with an information icon.
- 'Program' column in grid.

When the CDAG is turned off:

- The 'All Program' dropdown filter contains 3 options: 'Active' 'Inactive' Or 'All' programs.
- In the Grid, a 'Program' column that displays the program associated with each documents and service programs associated for Service note. If no program is associated with the document, then the column value will be displayed as 'Program Not Associated'.



- When user select 'Active' dropdown option, then the active records will be displayed in the grid.



- When user select 'Inactive' dropdown option, then the inactive records will be displayed in the grid.

My Documents (1)

All Clients: All Document Types: All Statuses: Due in x days: Other: Apply Filter

Custom Date: From: To: ☐ Include External Documents Inactive 1

Client	Document/Description	Group Name	Effective	Status	Ver.	Due Date	Staff to Sign	Author	Others to Sign	Associated Documents	Program
Test_Client_MYD2 (2...	Individual Service Note (C...		06/30/2024	In Progress	1			Test_QA, Sa...		Add	Test Program

- When user select 'All Programs' dropdown option, then all records will be displayed in the grid.

My Documents (622)

All Clients: All Document Types: All Statuses: Due in x days: Other: Apply Filter

Custom Date: From: To: ☐ Include External Documents All Programs 1

Client	Document/Description	Group Name	Effective	Status	Ver.	Due Date	Staff to Sign	Author	Others to Sign	Associated Documents	Program
Test_Client_MYD1 (2...	Misc (Proc_IP)		07/04/2024	In Progress	1			Test_QA, Sa...		Add	Program_IP
Test_Client_MYD1 (2...	Internal Consent Management (Mh)		07/04/2024	Signed	1			Test_QA, Sa...		Add	No Program associate...
Test_Client_MYD1 (2...	Diagnosis Document		07/04/2024	Signed	1			Test_QA, Sa...	Test_Client_MYD	Add	No Program associate...
Test_Client_MYD1 (2...	DAST 10		07/04/2024	Signed	1			Test_QA, Sa...		Add	No Program associate...
Test_Client_MYD1 (2...	Daily Progress Note		07/04/2024	To Be Review	1		New.Staff01	Test_QA, Sa...		Add	No Program associate...
Restricted_Client4...	Registration Document (C)		07/04/2024	In Progress	1			Test_QA, Sa...		Add	No Program associate...

When CDAG is turned ON:

- The 'All Program' dropdown filter contains 'All Programs' and Individual program options (Which displays the programs which is mapped in 'Programs' section of 'Proc/Prog/Loc/Proxy/Supervisor' tab in 'Staff/User' screen).
- In the Grid, a 'Program' column that displays the program which is mapped to 'Programs' section of Staff/Users' screen and associated with each document and service programs associated for Service note.

My Documents (94)

All Clients: All Documents: All Statuses: Due in x days: Other: Apply Filter

Custom Date: From: 12/29/2023 To: 07/05/2024 ☐ Include External Documents All Programs 1

Document/Description Group Name Effective Status Ver. Due Date Staff to Sign Author Others to Sign Associated Documents Program

- When the user selects 'All Programs' dropdown option, then all records will be displayed in the grid.

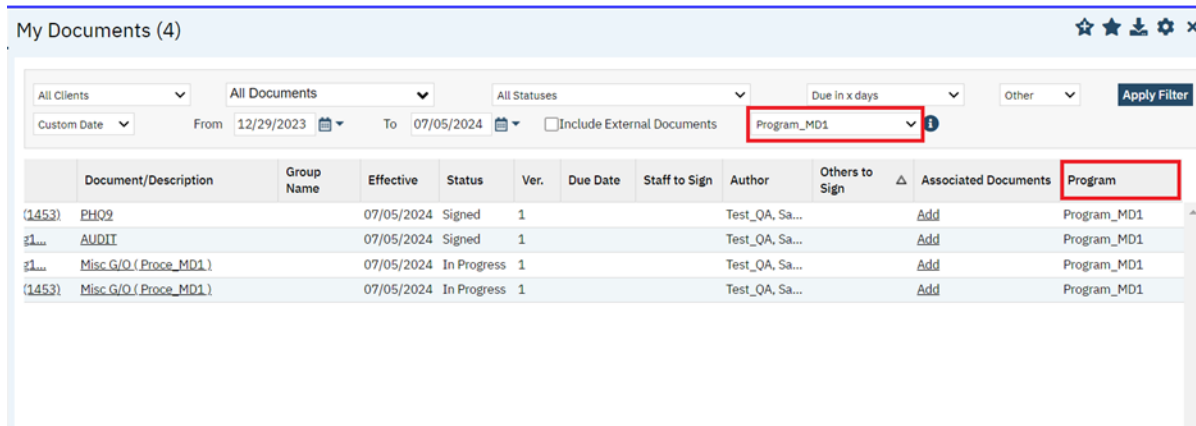
My Documents (94)

All Clients: All Documents: All Statuses: Due in x days: Other: Apply Filter

Custom Date: From: 12/29/2023 To: 07/05/2024 ☐ Include External Documents All Programs 1

Client	Document/Description	Group Name	Effective	Status	Ver.	Due Date	Staff to Sign	Author	Others to Sign	Associated Documents	Program
Test_Client_MYD1 (1453)	Misc G/O (Proc MD1)		07/05/2024	In Progress	1			Test_QA, Sa...		Add	Program_MD1
Test_Client_SA_Cdg1...	Misc G/O (Proc MD1)		07/05/2024	In Progress	1			Test_QA, Sa...		Add	Program_MD1
Test_Client_SA_Cdg1...	AUDIT		07/05/2024	Signed	1			Test_QA, Sa...		Add	Program_MD1
Test_Client_MYD2 (1454)	Diagnosis Document		07/05/2024	In Progress	1			Test_QA, Sa...		Add	Program_MD2
Test_Client_MYD2 (1454)	DAST 10		07/05/2024	Signed	1			Test_QA, Sa...		Add	Program_01
Test_Client_MYD1 (1453)	Release of Information		07/05/2024	Signed	1			Test_QA, Sa...		Add	Program_IP
Test_Client_MYD1 (1453)	Release of Information		07/05/2024	Signed	1			Test_QA, Sa...		Add	Program_IP
Test_Client_MYD1 (1453)	PHO2		07/05/2024	Signed	1			Test_QA, Sa...		Add	Program_MD1
Test_Client_MYD1 (1453)	GAD-7 (Core)		07/05/2024	Signed	1			Test_QA, Sa...		Add	Program_MD2
Test_Client_MYD1 (1453)	Assessment		07/05/2024	In Progress	1		Huggi.Santosh	Test_QA, Sa...		Add	Program_MD3
Test_Client_MYD1 (1453)	Miscellaneous (Proc MD2)		07/04/2024	In Progress	1			Test_QA, Sa...		Add	Program_MD2
Test_Client_SA_Cdg1...	Assessment (C)		06/10/2024	In Progress	2			Test_QA, Sa...		Add	Program_IP

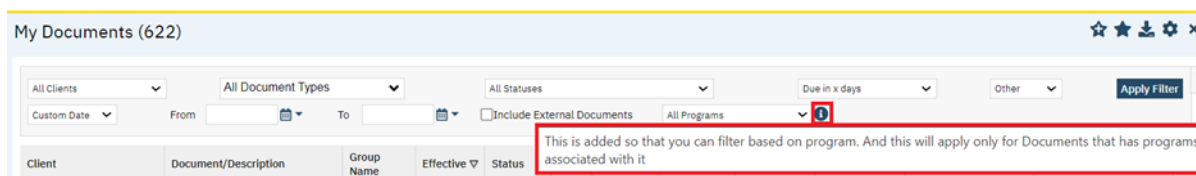
- When the user selects the individual programs dropdown options, then the respective records will be displayed in grid.



The screenshot shows the 'My Documents (4)' interface. At the top, there are several filters: 'All Clients', 'All Documents', 'All Statuses', 'Due in x days', and 'Other'. Below these, there is a 'Custom Date' section with 'From' and 'To' date pickers. A dropdown menu for 'Program_MD1' is highlighted with a red box, and an information icon (i) is visible next to it. Below the filters is a table with columns: Document/Description, Group Name, Effective, Status, Ver., Due Date, Staff to Sign, Author, Others to Sign, Associated Documents, and Program. The table contains four rows of data, all with 'Program_MD1' in the 'Program' column.

Information icon (i):

- The below information icon will be displayed beside in 'All Program' dropdown filter.



The screenshot shows the 'My Documents (622)' interface. At the top, there are several filters: 'All Clients', 'All Document Types', 'All Statuses', 'Due in x days', and 'Other'. Below these, there is a 'Custom Date' section with 'From' and 'To' date pickers. A dropdown menu for 'All Programs' is highlighted with a red box, and an information icon (i) is visible next to it. A tooltip is displayed below the dropdown, stating: 'This is added so that you can filter based on program. And this will apply only for Documents that has programs associated with it'.

- The readable text will be displayed. When hovering over it displays the following information "This is added so that you can filter based on program. And this will apply only for Documents that has programs associated with it"

Note: In Dashboard, whenever the user navigates to 'My document' list page through hyperlink, from the 'Documents' and 'Assigned Document(s)' widgets, the new 'All Program' dropdown filter will be displayed.

My Reports

Reference No	Task No	Description
85	Core Bugs # 128145	Due to a large dataset the 'Month-End AR Rollover Summary' report is not loading.
86	Core Bugs # 128256	GL Extract Unapplied Payment Errors.
87	EII # 126123	Implemented a new Recode category and removed the hardcoded values from the Stored Procedure.
88	Core Bugs # 128262	Issues in 'UDS Table 6B Quality of Care Measures' report: Issues in sections E and F.
89	EII # 128020	Implemented a logic to Hide Blocked Clients from Reports.

90	EII # 125744	Changing Server Path dropdown in the Report Detail to Type-able search box.
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Author: Saranakumaar Nagarajan

85. Core Bugs # 128145: Due to a large dataset the 'Month-End AR Rollover Summary' report is not loading.

Release Type: Fix | **Priority:** Medium

Navigation Path: 'My Office' – 'Month-End AR Rollover Summary' report.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The "Month-End AR Rollover Summary" report was not loading due to the large dataset. The system kept spinning when the user tried to load the report.

With this release, the above-mentioned issues have been resolved. Now, the 'AR rollover' report is loading fine when there are large datasets.

Author: Sahana Gururaj

86. Core Bugs # 128256: GL Extract Unapplied Payment Errors.

Release Type: Fix | **Priority:** Urgent

Prerequisites: Create an unposted payment record in the application for the last date of the month through the **Path:**

'My Office' -- 'Payments/Adjustments' -- click on 'New EOB/Payment/Adjustment' button – 'Payment/Adjustment Posting' screen -- add the 'Date', 'Amount', and 'Payment Category' in the 'Payment Information' section and click on 'Update' button and click on 'Close' button.

Navigation Path: 'My Office' -- 'My Reports' quick link -- 'GL Extract Detail' report -- select the required 'Accounting Period' and click 'View Report'.

Functionality 'Before' and 'After' release:

Before the release, here was the behavior. The GL report was not correctly fetching last-day payments of the accounting period, and entries intended to reverse the prior period were being duplicated instead of properly reversing. Furthermore, the process for reversing entries from the prior accounting period included entries not intended for that period but reverse periods before the prior one.

With this release, the logic is revised within the stored procedure "ssp_SCGLCalculateUnappliedPayments" to resolve the above-mentioned issues." and now the unposted payment entered on the last date of the month and reverse entries will be included in the report, and there will be no duplicate entries.

Data Model Changes: Added a new column EntryType to the table GLEExtractUnappliedPayments.

Author: Ravindra Pitta

87. EII # 126123: Implemented a new Recode category and removed the hardcoded values from the Stored Procedure.

Release Type: Change | **Priority:** Urgent

Navigation Path 1: 'My Office' – 'Document Timeliness' report

Navigation Path 2: 'My Office' – 'Document Timeliness with Detail' report.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The stored procedures that were used in the 'Document Timeliness' and 'Document Timeliness with Detail' reports have hardcoded values to display the 'Document Names' and 'Number of days'.

With this release, the above-mentioned issue has been resolved. Now, a new 'Recode Category (AddDocumentsToTimelinessAndTimelinessWithDetailReports)' is introduced.

Recode Details screen:

Recode Detail

Recodes

Category

Category Code

AddDocumentsToTimelinessAr

Category Name

AddDocumentsToTimelinessAndTimeline

Mapping Entity

DocumentCodeId

Description

This recode category is used to display the Documents, Service Notes, and Group Notes in "Document Timeliness" and "Document Timeliness With Detail" reports based on documents specified in the recode.

Recode Details

Code Name

Assessment Completion 7 Days

Start Date

06/03/2024

End Date

Character Code Id

7

Integer Code Id

101

Modify

Clear

Recode List

	Code Name	From Date	To Date	Character Code Id	Integer Code Id
<input checked="" type="checkbox"/>	Assessment	06/03/2024			101
<input checked="" type="checkbox"/>	Assessment	06/03/2024			1469
<input checked="" type="checkbox"/>	Assessment Completion 7 Days	06/03/2024		7	101
<input checked="" type="checkbox"/>	Assessment HRM	06/03/2024			349
<input checked="" type="checkbox"/>	Assessment HRM Completion 7 Days	06/03/2024		7	349
<input checked="" type="checkbox"/>	Note	06/03/2024			6

Recode Category is introduced to add the 'Document Names' and 'Number of days' and will displayed in the 'Document Timeliness' and 'Document Timeliness with Detail report' and the 'Stored Procedure' has been modified to 'Standard Stored Procedure'.

'Document Timeliness' Report:

StartDate	6/17/2024	EndDate	7/20/2024
Staff Name	Chinnusamy, Boovendiran	Team	All

1 of 2 Find | Next

Document Timeliness

For Document Effective Dates: 6/17/2024 - 7/20/2024

Author Name	Document Name	Total Documents	Signed Within Allotted Time	% Signed Within Allotted Time
<i>Unknown</i>				
Chinnusamy, Boovendiran	Assessment	1	1	100.00 %

Time Allotted for Signature: Assessment = 7 Days, Note = 1 Days, Treatment Plan = 7 Days

Printed On 7/3/2024

Page1 of 2

'Document Timeliness With Detail' Report:

Before the release, for the sections E and F of the 'UDS Table 6B Quality of Care Measures', the following issues were observed:

The logic for the field 'Meets Numerator' was to pull the value as '1' based on the below logic:

1. BMI recorded in the flowsheet.
2. In the 'Flowsheet' → BMI intervention → 'Exercise/ Physical activity counseling' checkbox or 'Nutrition Counseling' checkbox was checked.

With this release, the above-mentioned issues have been resolved for Section 'E' and Section 'F' as below:

For Section 'E':

A Logic is modified, so that the 'Meets Numerator' field pulls the value '1' from meaningful use/vitals flowsheet, when the following conditions are met:

1. BMI recorded in the flowsheet.
2. 'Flowsheet' → BMI intervention → if any of the following checkboxes 'Education' OR 'Exercise/Physical Activity Counseling' OR 'Nutrition Counseling' are checked and the health data attribute ID is mapped with recode categories (UDSFQHCBMIEducation,UDSFQHCEExerciseOrPhysicalActivityCounseling, UDSFQHCNutritionCounseling).

For Section 'F':

A Logic is modified, so that the 'Meets Numerator' field pulls the value '1' from meaningful use/vitals flowsheet when the following conditions are met:

1. BMI recorded in the flowsheet.
2. In meaningful use/vitals Flowsheet > BMI intervention > ('Education', 'Exercise/Physical Activity Counseling', 'Nutrition Counseling', 'Dietary supplements', 'Referral', 'Pharmacological intervention') any one of the checkboxes is checked and health data attribute ID is mapped with recode categories (UDSFQHCBMIEDUCATION, UDSFQHCEExerciseOrPhysicalActivityCounseling, UDSFQHCNutritionCounseling, UDSFQHCBMIReferral, UDSFQHCDietarySupplements & UDSFQHCParmacologicalIntervention).

Author: Sachin Raganathappa

89. EII # 128020: Implemented a logic to Hide Blocked Clients from Reports.

Note: This functionality is implemented for a specific customer. If you have Primary and County type of setup and would like to use these functionalities, please get in touch with Streamline Support.

Release Type: Change | **Priority:** Urgent

Prerequisites:

1. The system configuration key 'DisplayCDAGSectionInStaffDetails' value is set to 'Yes'.
2. The system configuration key 'EnableClinicalDataAccessGrouping' value is set to 'Yes'.
3. For a particular staff, deny access to some clients through the **path:** 'Staff/Users' ->'Staff Details' screen ->'Client Access Overrides' tab.

Navigation Path 1: Login to the 'SmartCare' application – Search 'ICD 10 Mapping By Service' – Enter the mandatory search fields – 'View Report'.

Navigation Path 2: Login to the 'SmartCare' application – Search 'Revert Episode Discharge' – Enter the mandatory search fields – 'View Report'.

Navigation Path 3: Login to the 'SmartCare' application – Search 'ICD10 Mapping By Primary Clinician' – Enter the mandatory search fields – 'View Report'.

Navigation Path 4: Login to the 'SmartCare' application – Search 'Client Contacts Address History' – Enter the mandatory search fields – 'View Report'.

Functionality 'Before' and 'After' release:

Purpose: The CDAG logic is in place to filter out PHI for Reports, but do not have the logic that looks at sequestered/blocked client for the staff. This logic is added to all reports.

With this release, a logic for logged-in staff is added where the 'Staff Client Access and Denied Client Rule' is considered. If the client is blocked on their staff records, then the user will not be able to see a client (or their detail) for the below-mentioned reports:

- a) ICD 10 Mapping By Service.
- b) Revert Episode Discharge.
- c) ICD10 Mapping By Primary Clinician.
- d) Client Contacts Address History.

Author: Sachin Raganathappa

90. EII # 125744: Changing Server Path dropdown in the Report Detail to Typeable search box.

Release Type: Change | **Priority:** Urgent

Navigation Path: Login -- Search 'Reports (Administration)' -- Click on Report Name -- 'Report Server Path' field.

Functionality 'Before' and 'After' release:

Purpose: Currently when accessing the report from admin tab if user tries to select or change the server path an error gets displayed and the system gets slowed down. So, the Server Path dropdown in the Report Detail is changed to Typeable search box to improve the system performance.

With this release, a Typeable Search box for the 'Report Server Path' Search field has been implemented in the Report Detail screen. If the user types the Report Server Path, the relevant results will be displayed.

Report Detail

Report Detail

Report Server SmartCareR6QA

Report Server Path registration

- /RDRegistrationMain
- /RDRegistration
- /SubReportCoreRegistrationEpisode
- /SubReportCSRegistrationEpisode
- /SubReportCalOMSRegistrationAuthRequest
- /SubReportCalOMSRegistrationClientContacts
- /SubReportCalOMSRegistrationDemographics
- /SubReportCalOMSRegistrationDiagnosis
- /SubReportCalOMSRegistrationEpisode

Nightly Billing Job

Reference No	Task No	Description
91	Core Bugs # 128015	The Overnight Billing Job failed.

Author: Rinki Kumari

91. Core Bugs # 128015: The Overnight Billing Job failed.

Release Type: Fix | **Priority:** High

Navigation Path: NA

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The "Overnight Billing Job" failed at Step 7, which is the Allowed Amount setup step. Here is the error from the job history:

Executed as user: AZURE\bradforddbserver. Warning: Null value is eliminated by an aggregate or other SET operation. [SQLSTATE 01003] (Message 8153) 207*****Invalid column name 'ChargeId'.*****ssp_PMClaimsGetBillingCodes*****690*****16*****1 [SQLSTATE 42000] (Error 50000). The step failed.

With this release, the above issue has been resolved. Now, "Overnight Billing Job" query is executed successfully.

Non-Staff Users

Reference No	Task No	Description
92	EII # 124486	The temp password length is reduced to the last 12 hexadecimal digits.

Author: Lakshmi Kumarappan

92. EII # 124486: The temp password length is reduced to the last 12 hexadecimal digits.

Release Type: Change | **Priority:** Urgent

Navigation Path 1: Go search-Non/staff(Administration)-Enter all the required fields – Save button.

Navigation Path 2: Login as a Patient portal user- Click on the 'Please Login to the Patient Portal here' hyperlink – Enter the Login credentials(Patient portal username/Password) Non/staff users– Click on the New icon- Enter all the required fields – Save -Reset Password button- Click Yes on the Do you want to print this information pop-up-Click on the Reset Password link on the PDF/Email.

Functionality 'Before' and 'After' release:

Purpose: The temp password received in the PDF/Email was quite long, which would have caused the security issues.

Before this release, here was the behavior. The temp password length received in the Email/PDF GUID(Global Unique Identifier) was long to type and it caused the security issues.

With this release, the above-mentioned issue has been resolved. Now, the temp password length has been reduced to the last 12 hexadecimal digits for the GUID.

Screenshot of PDF:



Non Staff User Login Information

Hello **Tesla, June,**

Please find your login details below, you can use these details to change your password and login to your account.

User Code: LPriya123

Temp Password: ce99783e00aa

Please follow the below steps to login:

1) To Reset your password visit the below specified link and change your password.

Reset Password Link : <https://blrqashs2.smartcarenet.com/SmartCareR6QA/ChangePasswordScreen.aspx?Guid=ce99783e00aa&StaffID=28514>

Please choose from the below options if temp password is expired,

1) Use the Forgot password link to reset the password.

2) If still facing issues, Please contact the Administrator.

Thanks,

Screenshot of Email:

Hello, June Tesla.

SmartCare recently received a request to change the password on your account. If you requested this change, please click the link below within 24 hours of the time this email was issued.

Your temporary password is:
ce99783e00aa

...

This password will be pre-filled when you click the link below and arrive at the reset page. You will be required to enter a new password and confirm it.

If you believe you have received this message in error, please disregard this email.

[Click here to change your password](#)

Thanks,

Outlook Sync

Reference No	Task No	Description
93	Core Bugs # 128258	The recurring appointments which are synced with Outlook are still retained in the table 'ExternalAppointmentQueue' which is causing performance issues.

Author: Aishwarya Bommaklar

93. Core Bugs # 128258: The recurring appointments which are synced with Outlook are still retained in the table 'ExternalAppointmentQueue' which is causing performance issues.

Release Type: Fix | **Priority:** Medium

Navigation Path: My Office -- Staff Calendar – Click on Calendar screen – Select New Calendar Entry – Click on OK – Enter all the details – Click on Recurrence checkbox – Select the Recurrence pattern – Click on OK.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. Once the recurring Appointments were created through SmartCare and Synced with the Outlook, those recurring appointments were still retained in the table 'ExternalAppointmentQueue'. This was causing the performance issues.

With this release, the above-mentioned issue has been resolved. Once the recurring appointment is Synced with the Outlook, it is removed from the 'ExternalAppointmentQueue' table.

Data Model Changes: Non clustered Index is included in 'AppointmentId' column of 'ExternalAppointmentArchive' table.

Patient Portal

Reference No	Task No	Description
94	Core Bugs # 128301	Patient Portal - remove ability to get to quick links under login name.

Author: Sunil Belagali

94. Core Bugs # 128301: Patient Portal - remove ability to get to quick links under login name.

Release Type: Fix | **Priority:** High

Navigation Path: Login to SmartCare Patient Portal application – Logged in Username dropdown (user manual).

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The Patient Portal users were able to access the quick links/dropdown values under Logged in username.

With this release, the above mentioned issue has been resolved. Now the Username dropdown (user manual) is removed for the Patient Portal users, so the Patient Portal users can't access the quick links/dropdown values under Logged in username.

Payment/Adjustments

Reference No	Task No	Description
95	Core Bugs # 128026	837 sent with 4-digit revenue code, but Payer 835 received with 3 digit rev code.
96	Core Bugs # 127542	Payments not updating when trying to upload 835 file which has more than 3-digit revenue code.
97	Core Bugs # 128183	Automatic postings of PLB segments on 835 files (refunds/adjustments/forwarding balances).

Author: Sahana Gururaj

95. Core Bugs # 128026: 837 sent with 4-digit revenue code, but Payer 835 received with 3 digit rev code

Release Type: Fix | **Priority:** High

Prerequisite:

- Process the 835 files having 3 digits revenue codes.
- Find a file for which the claim has 4-digit revenue code starting with 'Zero' in the system, but the payer returns only 3-digit revenue code.

Navigation Path: 'My Office' – 'Payments/Adjustments' – Click on 'Electronic Remittance' Icon – click on the required 'Import file Id' hyperlink – 'Electronic Remittance File Details' pop-up – click on 'Process file' button -- click on 'Save' button and click on 'Close' button.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The system was not updating the payments when the user tried to upload/process an 835 file with 3-digit revenue codes, for which the claim had a 4-digit revenue code starting with 'Zero' in the system.

With this release, the above-mentioned issue has been fixed. Now, the revenue codes are modified and updated in the "ClaimLineItems" table. If the claim has 3 digits and the payment has 4 digits (starting with 'Zero'), or if the claim has 4 digits (starting with 'Zero') and the payment has 3-digit revenue codes in the 835 files, then the system will post the payments correctly.

Author: Sahana Gururaj

96. Core Bugs # 127542: Payments not updating when trying to upload 835 file which has more than 3-digit revenue code.

Release Type: Fix | **Priority:** Medium

Prerequisites:

- Process the 835 files having 3 digits revenue codes.
- Find a file for which the claim has 3 digit revenue code in the system, but the payer returns 4 digit revenue code starting with 'Zero'.

Navigation Path: 'My Office' – 'Payments/Adjustments' – Click on 'Electronic Remittance' Icon – click on the required 'Import file Id' hyperlink – 'Electronic Remittance File Details' pop-up – click on 'Process file' button -- click on 'Save' button and click on 'Close' button.

Functionality Before and after:

Before this release, when the user tried to upload/process an 835 file with more than a 3-digit revenue code, the system was not updating the payments.

With this release, the above-mentioned issue has been fixed. All the revenue codes in the "ClaimLineItems" table are updated. Now the 835 will be processed and the payments will be applied, even if the revenue code in the 835 is NULL, and more than 3-digit revenue code in the claim line item.

Author: Sahana Gururaj

97. Core Bugs # 128183: Automatic postings of PLB segments on 835 files (refunds/adjustments/forwarding balances).

Release Type: Fix | **Priority:** Medium

Prerequisites:

1. The system configuration key "CREATE835PAYMENTSBYPAYER" value is set to 'N'.
2. The system configuration key "835PostPLBToRefunds" value as 'Yes'.
3. Process an 835 file created from the coverage plan, which has a PLB segment - refunds/adjustments.

Navigation Path: 'My Office' – 'Payments/Adjustments' – Click on 'Electronic Remittance' icon – click on the required 'Import file Id' hyperlink – 'Electronic Remittance File Details' popup – click on the 'Process file' button - - click on 'Save' button – click on 'Close' button.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. When the 835 file was processed which had a PLB segment on '835 files (refunds/adjustments)', the amount was not calculated, and it was not reported in the 'Payment/Adjustments' screen under the "Ref/Adj Amt" column, when posting payments by Coverage Plans.

With this release, the above-mentioned issue has been resolved. Now, a new system configuration Key '**835PostPLBToRefunds**' is added to handle the process to determine if provider level adjustments post to the refunds table or not, when posting payments by Coverage Plan.

Now the posting of provider-level adjustments will be determined by the configuration key value.

System Configuration Key Details:

Key Name: 835PostPLBToRefunds

Read Key as 835 Post PLB To Refunds.

Default Value: Yes

Allowed Values: Yes, 'No' or NULL

Description: Read Key as 835 Post PLB To Refunds

The config key is used to determine if provider level adjustments should be posted to the refunds table or not (in ssp_PM835PaymentPosting) when posting payments by Coverage Plan. When posting payments by payer the provider-level adjustments are always posted to the refunds table. Accepted Values are 'Yes', 'No', or NULL.

A) If the key-value is set to "No" or NULL, then the application will not post provider-level adjustments paid to the refunds table when posting payments by coverage plan.

Default Property B) If the key-value is set to "Yes", then the application will post provider-level adjustments to the refunds table for payments made by coverage plan.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider it as 'No'.

Configuration Key Details

Configuration Keys

Key

835PostPLBToRefunds

SourceTableName

Module

Screen

Value

Yes

Description

Read Key as: 835 Post PLB To Refunds

The config key is used to determine if provider level adjustments should post to the refunds table or not (in ssp_PM835PaymentPosting) when posting payments by Coverage Plan. When posting payments by payer the provider level adjustments are always posted to the refunds table. Accepted Values are 'Yes', 'No' or NULL

A) If the key-value is set to "No", or NULL then the application will not post provider level adjustments paid to the refunds table when posting payments by coverage plan.

Default Property B) If the key-value is set to "Yes", then the application will post provider level adjustments to the refunds table for payments made by coverage plan.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider it as 'No'.

Peer Record Review

Reference No	Task No	Description
98	Core Bugs # 128343	Peer Record Review Detail: Duplicate entries are displayed in 'Summary' tab.

Author: Ramya Nagaraj

98. Core Bugs # 128343: Peer Record Review Detail: Duplicate entries are displayed in 'Summary' tab

Release Type: Fix | **Priority:** Medium

Navigation Path: 'My Office' - 'Peer Record Reviews' detail screen - 'Summary' tab.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. In the 'Summary' tab of 'Peer Record Reviews' detail screen, if a document was attached, then, the duplicate row which does not have any documents attached was displayed. Also, the selection made for individual documents was getting cleared on click of Save button.

With this release, the above-mentioned issue has been resolved. Now, the duplicate rows are not getting created in the 'Summary' tab of 'Peer Record Reviews' detail screen when a document is attached and the selection made for individual documents are saved without any issues after clicking on Save button.

Plans

Reference No	Task No	Description
99	EII # 126904	To add 'Start Date' and 'End Date' to Advanced Claim Formats for Plan pop-up.
100	EII # 126705	Added Value Codes tab in Plan Details screen.

Author: Yashas Kydalappa

99. EII # 126904: To add 'Start Date' and 'End Date' to Advanced Claim Formats for Plan pop-up.

Release Type: Change | **Priority:** Urgent

Navigation path: 'Administration' -- 'Billing Setup' -- 'Plans' -- 'Plans' list Page -- click on plan name hyperlink or new button 'Plans Details' screen -- 'General' tab -- 'General Information' section -- click on the 'Advanced...' button under 'Standard Electronic Claim Format' drop down -- 'Advanced Claim Formats for Plan' pop-up.

Functionality 'Before' and 'After' release:

Purpose: The customers need to bill for two companies/payers out of SmartCare for different date ranges. The addition of 'Start Date' and 'End Date' fields on 'Advanced Claim formats' will help in handling this scenario while billing.

With this release, the following implementations have been done:

Batch Id	Format	Display As	File Name	Created Correctly
10160	HIPAA 837 Institution...	342094_1	10160-342094_1-HIPAA	<input checked="" type="checkbox"/>

ISA*00* *00* *ZZ*C990000000000000*ZZ*F69456380000000*240624*1858**^00501*000010160*0*P*:
GS*HC*COHEW*382069753*20240624*1858*10160*X*005010X223A2
ST*837*000101600*005010X222A1
BHT*0019*00*000010160*20240624*1858*CH
NM1*41*2*NIAGARA COUNTY DEPARTMENT OF MENTAL*****46*COHEW
PER*IC*AUTOM_BILLINGCONTACT*TE*8017436164
NM1*40*2*342094_1*****46*00710
HL*1**20*1
PRV*BI*PXC*103K00000X
NM1*85*2*NIAGARA COUNTY DEPARTMENT OF MENTAL*****1A*1932166980
N3*401ILLINOISAVE401
N4*AUTOM*UT*460409999
REF*1A*PP11
REF*EI*942938348
HL*2*1*22*0
SBR*S*18**342094_1*****BL
NM1*IL*1*TEST*342094****MI*852985625

- The inserted date is not in the 'Date of Service' range, then the system considers the claim format which has been selected under standard claim format drop downs in claim information section of general tab in plan details screen.
- When the inserted 'DOS From and DOS To' date in Advanced Claim Formats for Plan pop-up, is in between the range of Date of service or empty, then while processing the claims, the system will override the claim format which has been selected in standard claim formats and considers the claim format, which has been selected under pop-up.

Data Model Changes: New Columns '**DateOfServiceFrom**' and '**DateOfServiceTo**' are added in table 'CoveragePlanClaimFormats'.

Author: Yashas Kydalappa

100. EII # 126705: Added Value Codes tab in Plan Details screen.

Release Type: Change | **Priority:** Urgent

Navigation Path: 'Administration' -- 'Billing Setup' -- 'Plans' -- 'Plans' list Page – click on plan name hyperlink or new icon -- 'Plans Details' screen -- 'Value Codes' tab.

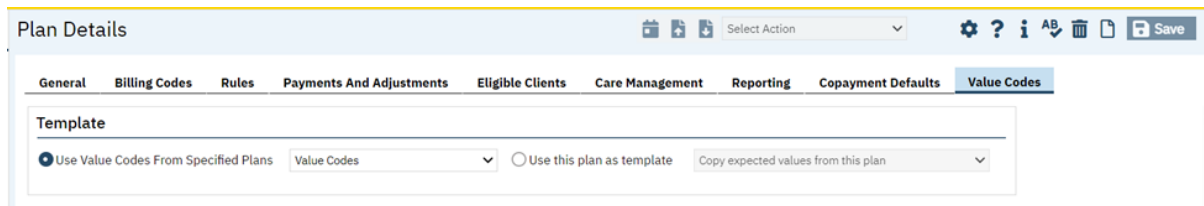
Functionality 'Before' and 'After' release:

Purpose: To ensure the correct rate code is sent out on claims which would otherwise result in wrong payments.

With the release, a new tab called 'Value Codes' is implemented in the Plan Details screen. The Value Codes tab has 3 sections.

1. Template
2. Value Codes
3. Value Codes List

1. Template



Plan Details

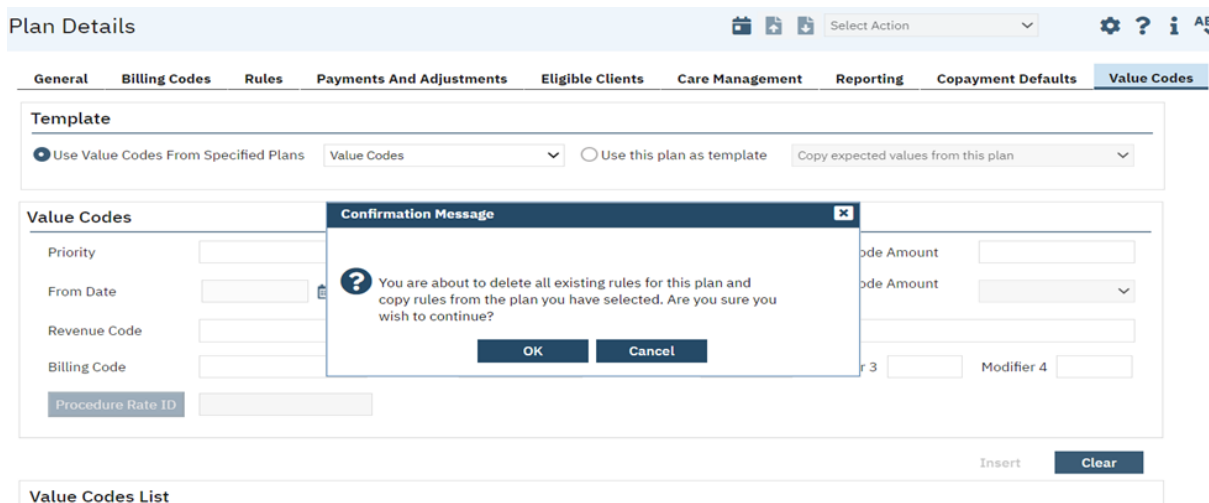
General Billing Codes Rules Payments And Adjustments Eligible Clients Care Management Reporting Copayment Defaults Value Codes

Template

☒ Use Value Codes From Specified Plans Value Codes ☐ Use this plan as template Copy expected values from this plan

i. Use Value Codes From Specified Plans:

- 'Use Value Codes From Specified Plans' is a Radio Button with Drop Down option.
- Whenever selecting any coverage plan from the drop down, the system will delete the value codes which have been inserted in Grid (Value Codes List) and ask for a below confirmation message. Clicking on Ok makes the Value codes copy from specified coverage plan.
- When copying the value codes from other coverage plans through the 'Use Value Codes From Specified Plans' radio button, the value codes which have been inserted in other coverage plans can't be modifiable in the current coverage plan under the value codes tab.



Plan Details

General Billing Codes Rules Payments And Adjustments Eligible Clients Care Management Reporting Copayment Defaults Value Codes

Template

☒ Use Value Codes From Specified Plans Value Codes ☐ Use this plan as template Copy expected values from this plan

Value Codes

Confirmation Message

? You are about to delete all existing rules for this plan and copy rules from the plan you have selected. Are you sure you wish to continue?

OK Cancel

Priority From Date Revenue Code Billing Code Procedure Rate ID

Value Codes List

Insert Clear

ii. Use this plan as template

- 'Use Value Codes from Specified Plans' is a Radio Button with Drop Down option.
- When selecting the 'Copy expected values from this plan' option under drop down with radio button, then the current coverage plan value codes are eligible to get copied to other coverage plans.
- Whenever selecting any coverage plan from the drop down the system will delete the value codes which have been inserted in Grid (Value Codes List) and ask a confirmation message in pop-up stating that, 'You are about to delete all existing rules for this plan and copy rules from the plan you have selected. Are you sure you wish to continue?'. Clicking on Ok makes the Value codes copy from specified coverage plan.
- When copying the value codes from other coverage plans through the 'Use this plan as template' radio button, the value codes which have been inserted in other coverage plans could be modified here but the value codes can't be affected from the coverage plan where it has been copied from.

2. Value Codes

Value Codes

Priority	<input type="text" value="2"/>	Value Code Id	<input type="text" value="2 - Hospital has no semi"/>		Value Code Amount	<input type="text" value="50.00"/>			
From Date	<input type="text" value="04/01/2024"/>	To Date	<input type="text" value="04/30/2024"/>	Value Code Amount Type	<input type="text" value="Per Bed Procedure Ur"/>				
Revenue Code	<input type="text" value="7845"/>	Revenue Code Description	<input type="text" value="Value codes for smart can"/>						
Billing Code	<input type="text" value="54612089564"/>	Modifier 1	<input type="text" value="12B"/>	Modifier 2	<input type="text" value="H5"/>	Modifier 3	<input type="text" value="FG6"/>	Modifier 4	<input type="text" value="89MN"/>
Procedure Rate ID	<input type="text" value="64507"/>								

Modify
Clear

i. Priority

- The Priority is the textbox for numeric values, the system will throw the error when the values which have been inserted are not numerical and integers.

ii. Value Code ID

- The Value Code ID is a drop down and required field, the system will throw the error stating 'Please Enter Value Code Id' if the value codes are not selected.
- The Initiation options for Value Code ID drop down is from the global code category 'INSTVALUECODE'.

iii. Value Code Amount

- The Value Code Amount is the required text box, the system will throw the validation 'Please Enter Value Code Amount' when trying to insert the value code amount with an empty text box.
- The Value Code Amount text box can accept decimal values also.

iv. From Date

- From date is a calendar control required field, system will throw the error stating 'Please Enter From Date' when try to insert value codes without from date.

v. To Date

- To date is a calendar control field.
- System will throw the error stating 'Start Date should be less than End Date.' if in case To Date is less than From Date.

vi. Value Code Amount Type

- Value Code Amount Type is the required drop down, the system will throw the error 'Please Enter Value Code Amount Type' when try to insert the value code amount type with no value.
- The Initiation options for Value Code Amount Type drop down is from the global code category 'InstValueCodeAmtType'.

vii. Revenue Code

- Revenue Code is the required field, system will throw the error 'Please Enter Revenue Code' when try to insert the without Revenue Codes.
- Revenue code will be the same as Standard Revenue Code under Standard Billing Codes section of Rates/Billing Codes tab of Procedure Code Details screen, if not system won't pull the value codes amount under claims.

Viii. Revenue Code Description

- Revenue Code Description is Textbox.
- Revenue Code Description will be the same as rev code description under Standard Billing Codes section of Rates/Billing Codes tab of Procedure Code Details screen, if not system won't pull the value codes amount under claims.

ix. Billing Code

- Billing Code is Textbox.
- Billing Code will be the same as Standard Billing Code under Standard Billing Codes section of Rates/Billing Codes tab of Procedure Code Details screen, if not system won't pull the value codes amount under claims.

X. Modifiers

- Modifiers have 4 textboxes named Modifiers 1, Modifiers 2, Modifiers 3 and Modifiers 4.
- Modifiers will be the same as billing code modifiers under the Standard Billing Codes section of Rates/Billing Codes tab of Procedure Code Details screen, if the system won't pull the value code amount under claims.

xi. Procedure Rate ID

- Procedure Rate ID is a button, "Select Procedure RateId Popup" will be displayed when the user clicks on this button.

Rate ID	From Date	To Date	Charge	Billing Code Modifiers	Revenue Code	Program Group Name	Degree Group Name	Mode of Delivery Group Name	Location Group Name
No data to display									

- **Enter the Procedure Code Name to see the list of associated rates:** It is a typable search box, related Procedures will be displayed when searching for the procedure in the search box.
- **Search:** It is a button, the Procedure rates will be displayed when selecting the procedure and clicking on the search button.

Rate ID	From Date	To Date	Charge	Billing Code Modifiers	Revenue Code	Program Group Name	Degree Group Name	Mode of Delivery Group Name	Location Group Name
<input type="radio"/> 264679	03/22/2024		\$12.00	:::		007			
<input type="radio"/> 264682	03/25/2024		\$1.00	:::		ALL			
<input type="radio"/> 264683	03/25/2024		\$1.00	:::		ALL			
<input type="radio"/> 264684	03/25/2024		\$990.00	:::		ALL			ALL

- **Show only those rates that are currently effective:** It is a Checkbox and will be checked by default.
- The Rate ID will be displayed in disabled form when selecting the radio button in Select Procedure RateId Popup and then click on Save button.

Plan Details

General Billing Codes Rules Payments And Adjustments Eligible Clients Care Management Reporting Copayment Defaults Value Codes

Value Codes

Priority: 1 Value Code Id: 2 - Hospital has no semi Value Code Amount: 26.5

From Date: 06/01/2023 To Date: Value Code Amount Type: Per Bed Procedure U

Revenue Code: 238385 Revenue Code Description: Medicaid billing process

Billing Code: 78925 Modifier 1: B1 Modifier 2: BH6 Modifier 3: GH9 Modifier 4: 78D

Procedure Rate ID: 264679

Insert Clear

Value Codes List

Xi. Insert/Modify/Clear

- The data will get inserted into the grid when clicking on the Insert button.
- When selecting the radio button in the grid, the Modify button will be displayed, for modifying the existing values codes which are already inserted in the grid.
- Clear button will clear the Value Code information.

3. Value Codes List Grid:

- Value codes List grid section will be displayed the values which has been inserted in Value Codes section.

Plan Details

General Billing Codes Rules Payments And Adjustments Eligible Clients Care Management Reporting Copayment Defaults Value Codes

Value Codes

Priority: 2 Value Code Id: 2 - Hospital has no semi Value Code Amount: 50.00

From Date: 04/01/2024 To Date: 04/30/2024 Value Code Amount Type: Per Bed Procedure U

Revenue Code: 7845 Revenue Code Description: Value codes for smart can

Billing Code: 54612089564 Modifier 1: 12B Modifier 2: H5 Modifier 3: FG6 Modifier 4: 89MN

Procedure Rate ID: 64507

Modify Clear

Value Codes List

	Priority	Value Code Id	Value Code Amount	From Date	To Date	Value Code Amount Type	Revenue Code	Re
X	1	1 - Most comm...	25.00	04/01/2024		Per Bed Procedure Unit	2506	
X	2	2 - Hospital ha...	50.00	04/01/2024	04/30/2024	Per Bed Procedure Unit	7845	Val
X	3	1 - Most comm...	78.00	04/01/2024		Per Bed Procedure Unit	7845	

Data Model Changes: 'ValueCodeTemplate' and 'UseValueCodeTemplateId' columns included in 'CoveragePlans' Table.

Primary care

Reference No	Task No	Description
101	EII # 127087	Added the word 'D/C' at the end of the selected 'Problem' in the 'Medical Progress Note' and in the 'Signed Medical Progress Note' PDF document.
102	EII # 127082	Primary Care Schedule widget: To display all flags a client has assigned to them to show in the flag column

Author: Sithara Ponnath

101. EII # 127087: Added the word 'D/C' at the end of the selected 'Problem' in the 'Medical Progress Note' and in the 'Signed Medical Progress Note' PDF document.

Release Type: Change| **Priority:** Urgent

Navigation Path: 'Client' --- 'Medical Progress Note' screen – Click on the 'New' icon – Select a template - Click on the 'Ordered Diagnosis' or 'Order Problem List' tag – Search and select a diagnosis from the 'Select Problem' pop-up and click on 'Insert' button – Check the 'D/C' checkbox – Enter other required data such as Complexity of Problem, Injury date etc. – Click on 'Ok' button --- Click on 'Save/Sign' button.

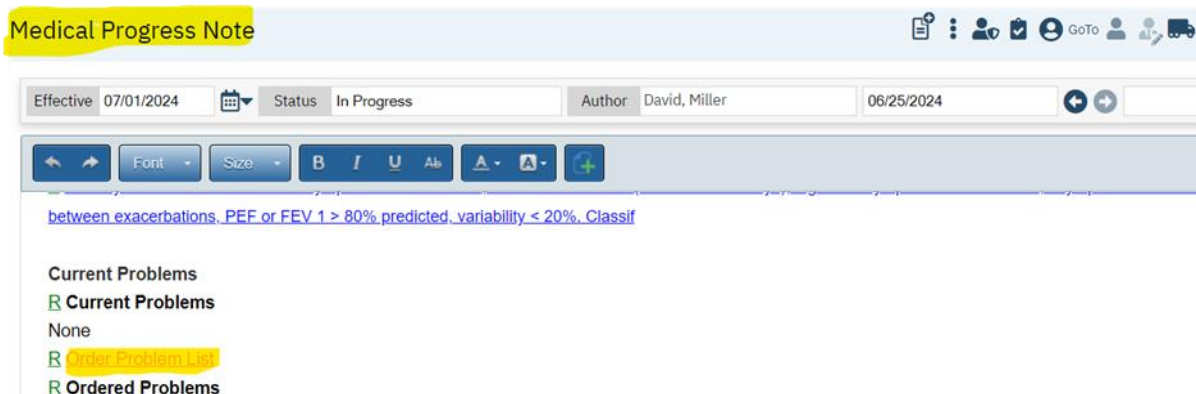
Functionality 'Before' and 'After' release:

Purpose: When a problem is marked as discontinued in the 'Select Problems' pop-up, the progress note will be updated with an addition of the word "-D/C" beside the problem which has been discontinued.

With this release, the below change has been implemented in the 'Medical Progress Note'.

When the user selects the 'D/C' checkbox for a problem or diagnosis from the 'Select Problem' pop-up, the selected problem or diagnosis will be displayed with a 'D/C' word at the end of it in the 'Medical Progress Note' and in the 'Signed Medical Progress Note' PDF document.

'Order Problem List' tag in the 'Medical Progress Note'



The screenshot shows the 'Medical Progress Note' interface. At the top, there's a header with the title 'Medical Progress Note' and several icons. Below the header, there's a form with fields for 'Effective' (07/01/2024), 'Status' (In Progress), 'Author' (David, Miller), and '06/25/2024'. Below the form, there's a toolbar with buttons for 'Font', 'Size', 'B', 'I', 'U', 'A', and a plus icon. Below the toolbar, there's a text area with the text 'between exacerbations, PEF or FEV 1 > 80% predicted, variability < 20%, Classif'. Below the text area, there's a sidebar with the following items: 'Current Problems', 'Current Problems', 'None', 'Order Problem List' (highlighted in yellow), and 'Ordered Problems'.

The 'Select Problem' pop-up is displayed when the user clicks on the 'Order Problem List' tag under 'Medical Progress Note'.

Select Problem

Insert

* DSM 5 code

	DSM 5/ ICD 10	SNOMED	ICD/DSM Description	SNOMED Description	D/C	Complexity of Problem	Injury Date	Injury Type	Diagnosis Order
X	D00.00	1163347004	Carcinoma in situ of oral cavity, un...	Neoplasm of oral cavity and lip an...	<input checked="" type="checkbox"/>	Chronic illnesses v	07/02/2024	Employment	1

OK Cancel

Diagnosis List

Order	DSM/ICD 10	SNOMED	R/O	ICD/DSM Description	SNOMED Description	Type	Severity	Source	Comments
1	F13.10	1230074002		Sedative, hypnotic, or anxiol...	Nondependent hypnotic abu...	Primary	Low		

The 'D/C' word is displayed in the 'Ordered Problems' section of 'Medical Progress Note'.

Medical Progress Note

Effective 07/01/2024 Status In Progress Author David, Miller 06/25/2024 Sign

Font Size B I U Ab A A

Assessment:

R Asthma Severity: [Intermittent](#) [Mild Persistent](#) [Moderate Persistent](#) [Severe Persistent](#) [none](#)

R Classify as "INTERMITTENT" for symptoms <= 2 time/wk, brief exacerbations (hours to a few days), nighttime symptoms <= 2x/month, asymptomatic with normal lung function between exacerbations. PEF or FEV1 > 80% predicted, variability < 20%. Classif

Current Problems

R Current Problems

None

R [Order Problem List](#)

R [Ordered Problems](#)

1 - Carcinoma in situ of oral cavity, unspecified site : D00.00 : Injury Date - 07/02/2024 : Injury Type - Employment -D/C

Complexity of Problem - Chronic illnesses with exacerbation, progression, or side effects of treatment

Medications

R Current Allergies

None

The 'D/C' word is displayed in the 'Ordered Problems' section of the 'signed Medical Progress Note PDF' document.

Medical Progress Note

Effective 07/01/2024
Status Signed
Author David, Miller
06/25/2024
Sign

Document

PdfBytesHandler.axd
1 / 2
100%

Objective
Exam
Paradoxical pulse: General: Skin: Ears: Nose: Mouth: Teeth/Gums: Pharynx: Neck: Heart: Lungs: Abdomen:
Extremities: Musculoskeletal:

Assessment:
Asthma Severity:

Current Problems
Current Problems
None

Ordered Problems
1 - Carcinoma in situ of oral cavity, unspecified site : D00.00 : Injury Date - 07/02/2024 : Injury Type - Employment -D/C
Complexity of Problem - Chronic illnesses with exacerbation, progression, or side effects of treatment

Page 1
Printed on: 07/01/2024

Author: Sithara Ponnath

102. EII # 127082: Primary Care Schedule widget: To display all flags a client has assigned to them to show in the flag column.

Release Type: Change | **Priority:** Urgent

Navigation Path 1: 'My Office' --- 'My Calendar' screen – Click on a date slot – Select 'New Primary Care Entry' radio button to schedule a primary care appointment – Click on 'Ok' button – Enter required data in the 'New Primary care Entry' pop-up such as Client Name, Program and Procedure etc. --- Click on 'Ok' button.

Navigation Path 2: 'My Office' --- 'Dashboard' screen – 'Schedule' or 'Primary Care Schedule' widget – 'Flags' column.

Functionality 'Before' and 'After' release:

Purpose: To display all flags a client has assigned to them to show in the flag column in the Schedule or Primary Care Schedule widget.


With this release, the below changes have been implemented in the 'Schedule' or 'Primary Care Schedule' widget.

- The primary care schedule widget will display a maximum of 3 flags in the 'Flags' column for the respective client.
- If the client has more than 3 flags, then 3 dots will be displayed beside the flags.

Dashboard

Schedule

David, Miller ▼ Thursday, July 4, 2024 ↻

	Time	Status	Client Name	Flags	Sex	DOB
	12:45...	Scheduled	Manu, Trainee	 	M	03/29/1999 (25)
	1:00 AM	Checked In	Test, Chaithra	   	F	11/01/1997 (26)

When mouse hovered on the 3 dots, it will display a message: "More".

Dashboard

Schedule


David, Miller ▼ Thursday, July 4, 2024 ↻


	Time	Status	Client Name	Flags	Sex	DOB
	12:45...	Scheduled	Manu, Trainee	 	M	03/29/1999 (25)
	1:00 AM	Checked In	Test, Chaithra	   	F	11/01/1997 (26)









More








When clicked on these 3 dots, it will display the rest of the 'Flags' present for that client.

Dashboard

Schedule 


David, Miller  Thursday, July 4, 2024


	Time	Status	Client Name	Flags	Sex	DOB
	12:45...	Scheduled	Manu, Trainee	 	M	03/29/1999 (25)
	1:00 AM	Checked In	Test, Chaithra	   	F	11/01/1997 (26)









   
  








The recent 10 flags will be displayed on the widget in total for the respective client.

Dashboard

Schedule 

David, Miller  Thursday, July 4, 2024

	Time	Status	Client Name	Flags	Sex	DOB
	12:45...	Scheduled	Manu, Trainee	 	M	03/29/1999 (25)
	1:00 AM	Checked In	Test, Chaithra	   	F	11/01/1997 (26)

Procedure/Rates

Reference No	Task No	Description
103	EII # 128328	A new 'Initial Crisis Service' Checkbox field is added to the 'Procedure Reporting' tab.

Author: Debanjit Das

103. EII # 128328: A new 'Initial Crisis Service' Checkbox field is added to the 'Procedure Reporting' tab.

Release Type: Change | **Priority:** On Fire

Navigation Path: 'Administration' – 'Procedure/Rates' screen – 'Reporting' tab.

Functionality 'Before' and 'After' release:

Purpose: A new 'Initial Crisis Service' Checkbox field is implemented to ensure no conflicts occur when designating a procedure as a crisis service.

With this release, a new 'Initial Crisis Service' checkbox is added in the 'Quality Measures' section under the 'Reporting' tab of the 'Procedure Code Details' screen.

'Procedure Code Details' screen:

Procedure Code Details

General
Rates/ Billing Codes
Programs/ Credentials
Add-On Procedure Codes
CQM Configurations
Bundle Codes
Reporting

UDS Reporting

Major Service Category
Select

Quality Measures

Initial Crisis Service
☒

Data model Changes: A new column 'InitialCrisisService' is added in the 'ProcedureCodes' table.

Programs

Reference No	Task No	Description
104	Core Bugs # 128255	Program Assignments: The Color column not working as expected
105	EII # 128226	Programs Assignments: Adding a typeable search text box to display staff in the Program Assignment Details page.
106	EII # 126892	Program Details Screen Changes.

Author: Shivakanth Moger

104. Core Bugs # 128255: Program Assignments: The Color column not working as expected.

Release Type: Fix | **Priority:** Medium

Navigation Path: 'Program Assignments' Quicklink – 'Program Assignments' list page.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The Color column was not working as expected due to the newly added WaitListPriorityComment column in the 'Program Assignments' list page.

With this release, the above-mentioned issue has been fixed and now, the Color column is functioning as expected in the 'Program Assignments' list page.

Author: Shivakanth Moger

105. EII # 128226: Programs Assignments: Adding a typeable search text box to display staff in the Program Assignment Details page.

Release Type: Change | **Priority:** Urgent

Prerequisites:

1. The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is used to change the dropdown fields as type-able search textbox.

A) When the key-value is set to "Yes", then staff drop-downs will display typeable search text boxes instead of a drop-down.

B) When the key-value is set to "No", then the staff drop down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behavior.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behavior, i.e., the same as the key value is "No".

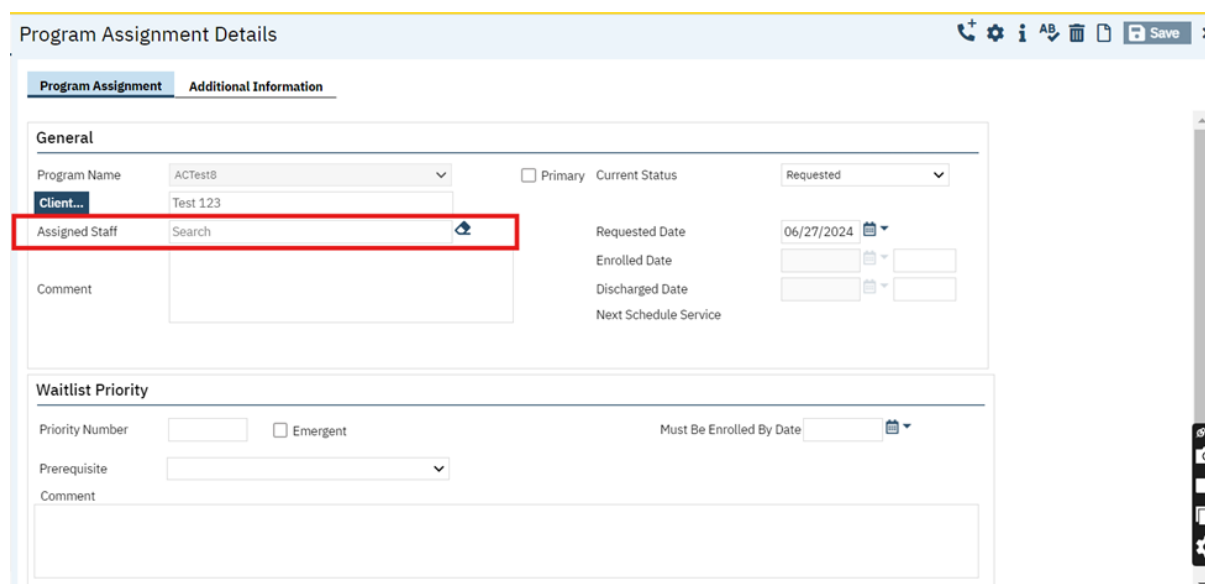
Navigation Path 1: Log in to 'SmartCare' - select any client - 'Program Assignments' quick link - 'Program Assignments' list page - 'New' or click on any record status hyperlink text - 'Program Assignment Details' page.

Navigation Path 2: Log in to 'SmartCare' - select any client - 'Programs' quick link - 'Programs' list page - 'New' - 'Program Assignment Details' page.

Functionality 'Before' and 'After' Release:

Purpose: The staff dropdowns are not responsive because there were large number of active staffs in the environment. So, the staff drop-downs are modified to type-able search text boxes to improve the system performance.

With this release, the Staff drop-down field is changed as a Type-able search text box for the 'Assigned Staff' field in the 'Program Assignment Details' page. This change will occur when the system configuration key 'DisplayStaffAsTypeableSearchTextBox' is set as 'Yes'.



Author: Namratha Nagaraj

106. EII # 126892: Program Details Screen Changes.

Release Type: Change | **Priority:** High

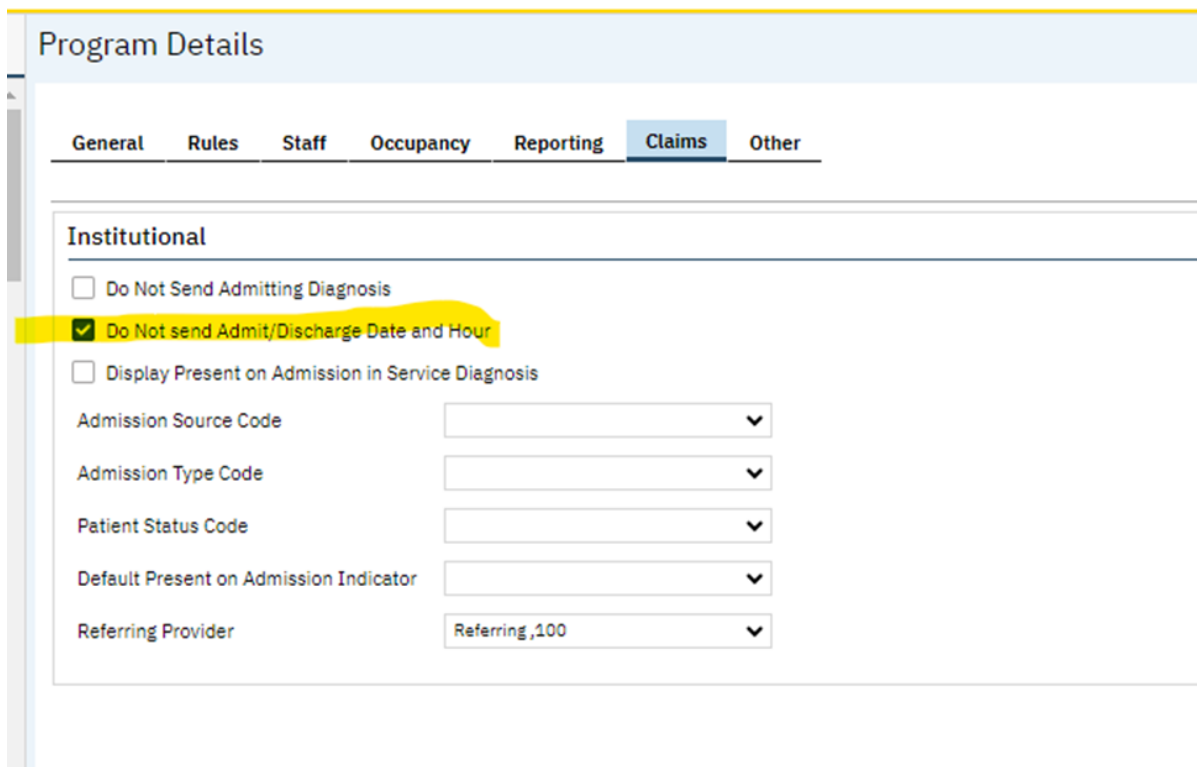
Navigation Path: 'Administration' -- 'Programs' - 'Programs' list page -- Click on 'New' icon -- 'Program Details' screen -- 'Claims' tab.

Functionality 'Before' and 'After' release:

Purpose: To configure 'Admit/Discharge Date and Hour' and 'Referring provider' in the claims.

With this release, the following changes have been implemented in Program Details screen:

1. A new checkbox 'Do Not send Admit/Discharge Date and hour' is added in the 'Claims' tab.



Program Details

General Rules Staff Occupancy Reporting **Claims** Other

Institutional

☐ Do Not Send Admitting Diagnosis

☒ Do Not send Admit/Discharge Date and Hour

☐ Display Present on Admission in Service Diagnosis

Admission Source Code

Admission Type Code

Patient Status Code

Default Present on Admission Indicator

Referring Provider

- a. If the checkbox 'Do Not send Admit/Discharge Date and hour' is checked then, Admit/Discharge Date and hour will not be sent in the Claims.
 - b. If the checkbox 'Do Not send Admit/Discharge Date and hour' is not checked then, Admit/Discharge Date and hour will be sent in the Claims.
2. A new dropdown 'Referring Provider' is added in the 'Claims' tab of the 'Program Details' page. The Referring Provider dropdown values will initiate from 'REFERRINGCLINICIAN' Global Code.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behavior, i.e., the same as the key value is "No".

Navigation Path: 'My Office' – 'Reception/Front Desk' – 'Reception/Front Desk' list page.

Functionality 'Before' and 'After' Release:

Before this release, here was the behavior. In the 'Reception/Front Desk' list page, a dropdown option was there for selecting 'All Clinicians' field. When there were a large number of staff records in "All Clinicians" dropdown, the performance issue was observed during the staff selection.

With this release, the 'All Clinicians' dropdown is changed to a typeable search box for selecting a Clinician in the 'Reception/Front Desk' list page, when the System configuration key DisplayStaffAsTypeableSearchTextBox' is set to "Yes".

Rx Application

Reference No	Task No	Description
108	Core Bugs # 127358	View Medication History - Printlist medication not matching view med history meds with multiple rows of instructions
109	Core Bugs # 128127	Rx Application: The warning messages are displayed instead of validation messages for the service that has been posted-dated.
110	Core Bugs # 128248	Rx: Patient Summary page: instruction is not displaying in the instruction column in the Medication List.
111	EII # 127594	The diagnosis codes are displayed in every page of the Medication List.
112	EII # 126349	Med Consent History without Appointment
113	Core Bugs # 128052	RX: Missing Response date & time on the medication history

Author: Rajgopal Yajurvedi

108. Core Bugs: 127358: View Medication History - Printlist medication not matching view med history meds with multiple rows of instructions.

Release Type: Fix | **Priority:** High

Prerequisite: Client has a Medication prescribed by following the below **Path:**

Login to SmartCare Application -- 'Client' -- 'Medication Management Rx' link -- Rx Application -- 'Patient Summary' screen -- New Order button -- New Medication Order Page -- Select the Drug with starting three letters -- Fill all required fields -- click on 'Insert' button -- click on 'Prescribe' button -- 'Patient Summary' page.

Navigation Path: Login to SmartCare Application -- My Office -- 'Medication Management (Rx)' link -- Rx Application -- 'Patient Summary' screen -- 'Medication History' button -- 'View Medication History' Page -- Click the Print List button -- ClientMedicationHistory report.

Functionality 'Before' and 'After' release:

Before this release, here was behavior. When a user clicked on the 'Medication History' button and navigated to the 'View Medication History' Page and clicked the Print List button, then, the prescriptions/records with various rows of instructions were displayed in ClientMedicationHistory report. These were not the same as the prescriptions/records with various rows of instructions present in View Medication History page.

With this release, the above-mentioned issue has been fixed. Now the prescriptions/records with multiple rows of instructions in ClientMedicationHistory report, are same as the prescriptions/records with respective rows of instructions in the View Medication History page.

Author: Rajgopal Yajurvedi

109. Core Bugs: 128127: Rx Application: The warning messages are displayed instead of validation messages for the service that has been posted-dated.

Release Type: Fix | **Priority:** Medium

Prerequisite: Service is scheduled through the below **path:**

Login to 'SmartCare Application' - 'Client' search - 'My Office' - 'Service' (My office) - Click on the 'New' icon - 'Service Detail' screen - Select the Status = Schedule - Select the Start Date as 'Future Date' - Select the required fields - Click on the 'Save' button.

Navigation Path: Login to 'SmartCare Application' - 'Client' search - 'Medication Management Rx' - 'Rx Application' - 'Patient Summary' screen - 'Medication History' Tab - Click on the 'Real Time-Med History' button.

Functionality 'Before' and 'After' release:

Before the release, here was the behavior. In the 'Rx Application', in the 'Patient Summary' page, when the user clicked on the 'Real Time-Med History' button, the below generic warning messages were displayed in the 'Rx Application'.

1. When in the SmartCare Application, if the service was scheduled for post/future dates for the client,

Warning Message: "Processing the Medical History"

2. When in the SmartCare Application, if the service was not scheduled for the client.

Warning Message: "No Service/Primary Care appointment has been created for this Client."

With this release, the above-mentioned issues have been resolved. Now, the below validation messages are displayed in the 'Rx application' when the user clicks the 'Real Time-Med History' button.

1. When in the 'SmartCare Application', if the service is scheduled for post/future dates for the client:

Validation Message: "This Client Service/Appointment date must be within 3 days of the current date to process medication history."

2. When in the 'SmartCare Application', if the service was not scheduled for the client:

Validation Message: "No Service/Primary Care appointment has been created for this Client within 3 days of the current date to process medication history."

Author: Rajgopal Yajurvedi

110. Core Bugs 128248: Rx: Patient Summary page: instruction is not displaying in the instruction column in the Medication List.

Release Type: Fix | **Priority:** Medium

Navigation Path 1: Login to SmartCare application - 'Client' - 'Medication Management Rx' link - Rx Application - 'Patient Summary' screen - Add Medication button - Add Medication (Non Ordered Locally) Page - Select the drug by entering the starting three letters - Fill all required fields without selecting the Unit - click on 'Insert' button - click on 'Save' button - 'Patient Summary' page - Medication List - Instruction column.

Navigation Path 2: Login to SmartCare application - 'Client' - 'Medication Management Rx' link - Rx Application - 'Patient Summary' screen - Select the Non Ordered Medication in Medication list - Update Medication (Non Ordered Locally) Page - Select the radio button - update the required fields without selecting the Unit - click on 'Insert' button - click on 'Save' button - 'Patient Summary' page - Medication List - Instruction column

Functionality 'Before' and 'After' release:

Before the release, here was the behavior. When the user added or updated the non-ordered medication in the Add Medication / Update Medication page without selecting the unit, the below issues were observed on saving the medication:

Issue 1: In the Patient Summary page for the added medication, Instruction column was displayed empty in Medication List.

Issue 2: In the Patient Summary page when user clicked the non-ordered medication in the Medication List and navigated to Update Medication (Non Ordered Locally) page, then in Medication List, Instruction column was displayed empty.

With this, the above mentioned issues have been fixed. Now, in Update Medication (Non Ordered Locally) page, Medication List, Instruction column is displayed when user clicked the non-ordered medication in the Medication List.

Author: Manjunath Malipatil

111. EII # 127594: The Diagnosis codes are displayed in every page of the Medication List.

Release Type: Change | **Priority:** Urgent

Navigation Path: Login to SmartCare Application—Select a client – Medication Management (Client) – Patient Summary screen (Rx Application)—Click on Print List Button -- check the diagnosis codes in the print list

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. When the user printed the medication list, the diagnosis codes were getting displayed in every page of the printed Medication List.

With this release, the above-mentioned issue has been resolved. Now, when the user prints the medication list, the diagnosis codes are displayed only in the header of the first page.

Author: Rajgopal Yajurvedi

112. EII # 126349: Med Consent History without Appointment

Release Type: Change | **Priority:** Urgent

Prerequisite:

- Appointment is created for patient via below **path**:
Login to SmartCare Application -- Search and select 'Client'– My Calendar (My Office) – Click to 'Create New Primary Care Entry' button – 'New Primary Care Entry' popup – Select the required fields – Select the Status as 'Scheduled/Checked In/Exam Room' – Click 'OK' button.
- Prescriber is registered with SureScript via below **path**:
Login to SmartCare Application – Staff/User page – Search and Select the Staff – All the Required values entered – Save – Medication Management'(My Office)– Rx Application – 'Start Page' page – 'My Preference' page – 'User Preference' page – SureScript section – Select the required values – Click Save button.
- To have the any Signed Document 'DocumentId' mapped in new recode 'MEDCONSENTDOCUMENT'.
Path: Login to SmartCare Application – Search and Select 'Client'– Search and Select any document – Sign the document – Take the DocumentId – Recodes (Administration) – Category dropdown – Select MEDCONSENTDOCUMENT – Recode Detail - Recode Details – Enter the above document name – Enter the DocumentId in Integer Code Id text box – Click Insert button – Click Save.

Navigation Path 1: Login to SmartCare Application – Search and Select 'Client'– 'Bedboard (My Office)– Bedboard page– 'Status' dropdown – Select 'Admit/Schedule Admission' link – 'Census Management Admit/Schedule Admission' Page - Select the required values and Physician – Click Save button – Bedboard page.

Navigation Path 2: Login to SmartCare Application - 'Client' – 'Medication Management Rx' link – Rx Application – 'Patient Summary' screen – Medication History.

Functionality 'Before' and 'After' release:

Purpose: The current Surescripts medication history functionality is not ideal for some scenarios where customers do not scheduled appointments. Because it creates time lags and patient safety issues depending on the patient's

condition upon admission to the facility. So, the medication history processing has been updated/modified so Medication Orders can be given with the latest information available to improve patient safety.

Before the release, here was the behavior. In Rx application, previously the Medication History was processed only when:

- Staff is registered with SureScript.
- Staff schedules an appointment for the Client.
- Staff signs the Medication History Consent Document for the client.

With this release, A new recode MEDCONSENTDOCUMENT has been implemented. And the functionality to process Medication History updated/changed. Now Medication History is processed when:

- Staff is registered with SureScript.
- Client does not have a scheduled the appointment but has a bed enrolled in Occupied/Scheduled Admission.
- Staff signs the Medication History Consent Document for client.
- If the client does not have the Medication History Consent Document signed, but has the other document signed. The signed 'DocumentId' is mapped with MEDCONSENTDOCUMENT recode.

Note: If the End Date in the MEDCONSENTDOCUMENT Recode is reached, the recode will be considered inactive. Any 'DocumentId' linked to this record will be excluded from the Medication History Processing. If the Prescriber selects the Real-Time Med History button in the Rx Application, then Medication History will not be generated.

Author: Manjunath Malipatil

113. Core Bugs # 128052: RX: Missing Response date & time on the medication history.

Release Type: Fix | **Priority:** Medium

Prerequisite:

- Medication History Request Consent document is signed.
- There is a scheduled service for a client in the last 3 days.

Navigation Path: Client -- Medication Management -- Patient Summary Screen (Rx Application) -- Click on Real-Time Med History button -- Once Medication History response is received check for the labels.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. In the 'Medication History' tab of the 'Patient Summary' screen, Medication History Response time and date and medication History Retrieved Period labels were not displayed.

With this release, the above-mentioned issue has been resolved. Now, when the Medication history is received, 1) Medication History Response time and date 2) Medication History Retrieved Period labels are displayed, in the Medication History tab in the Patient Summary screen in Rx Application.

1. Below Screenshot refers to the label of medication History Retrieved Period

Preferred Pharmacy...
Patient Overview
Reconciliation
Eligibility
Medication History

Retrieved Medication History from : 07/03/2022 To 07/03/2024

Client Eligibility Information (Transaction Set: 0001)

Patient:
First Name: Baxter Last Name: Dallesandro
Gender: Male DOB: *07/21/2010
Patient Id: YTE%488DESHN3 Information Contact:
Patient Address: *315 Filmore Ave *13C
Patient City: Pocatello Patient State: ID Patient Zip: 83201

2. Below Screenshot refers to the label of Medication History Response date and time

Preferred Pharmacy...
Patient Overview
Reconciliation
Eligibility
Medication History

7	12 HR cetirizine HCl 5 MG / Pseudoephedrine HCl 120 MG ER Oral Tablet	00113014753ND NDC11	Quantity Received: 12	Last Fill Date: 2024-04-26	Allowed	1014571SCD	
8	Amoxicillin 125 MG/5 ML suspension	65862070655ND NDC11	Quantity Received: 100	Last Fill Date: 2024-04-26	Allowed	H6504ABFacute serous otitis media, recurrent, right ear	3137975CD
9	Zyrtec-D XR oral tablet	50580072812ND NDC11	Quantity Received: 12	Last Fill Date: 2024-03-15	Allowed	1014583SBD	

[Medication History Response for the client is received on : 7/3/2024 4:21:56 PM]

Disclaimer: Certain information may not be available or accurate in this report, including items that the patient asked not be disclosed due to patient privacy concerns, over-the-counter medications, low cost prescriptions, prescriptions paid for by the patient or non-participating sources, or errors in insurance claims information. The provider should independently verify medication history with the patient.

Scanning

Reference No	Task No	Description
114	Core Bugs # 128240	Scanned Medical Records: Documents orders are getting Changed When Uploading through the 'Batch Upload' screen.
115	Core Bugs # 128196	'Scanning' – 'Client Search' text box value disappeared while entering Client Id value.
116	Core Bugs # 128280	Scanning: Taking more time to display the uploaded PDF files.
117	EII # 127688	Scanning: To modify the Staff drop down to Typeable search based on the 'StaffAccessRules' permission and configuration key 'DisplayStaffAsTypeableSearchTextBox'

Author: Lavanya Gowdru

114. Core Bugs # 128240: Scanned Medical Records: Documents orders are getting Changed When Uploading through the 'Batch Upload' screen.

Release Type: Fix | **Priority:** High

Navigation Path: 'My Office' --- 'Scanning' -- 'Start Batch Upload' -- 'Upload the records' -- Enter the required values -- 'Save'.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The document order was changing and moving around on selecting the client, which was uploaded through the 'Batch Upload' screen.

With this release, the above-mentioned issues have been resolved. Now, the records uploaded through the 'Batch Upload' screen are displayed without changing the order when selecting the client.

Author: Santhosh Huggi

115. Core Bugs # 128196: 'Scanning' – 'Client Search' text box value disappeared while entering Client Id value.

Release Type: Fix | **Priority:** High

Navigation Path 1: Log in to SmartCare Application – select the 'Client' – Navigate to 'Scanning' – 'Scanning' list screen – 'Batch Upload', 'Batch Scan', 'Scanned Medical Record Detail' and 'Upload File Detail' screens.

Navigation Path 2: Log in to SmartCare Application – 'My Office' – Navigate to 'Scanned Medical Records' – 'Scanned Medical Records' list screen – 'Batch Upload', 'Batch Scan', 'Scanned Medical Record Detail' and 'Upload File Detail' screens.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The value entered in the Client Search text field disappeared while typing the Client ID on the 'Batch Upload', 'Batch Scan', 'Scanned Medical Record Detail', and 'Upload File Detail' screens due to the autofill feature of the Edge browser.

With this release, the above-mentioned issue has been resolved and the entered Client ID now displays correctly in the 'Client Search' text field.

Author: Tejaswini Srinivas

116: Core Bugs: 128280: Scanning: Taking more time to display the uploaded PDF files.

Release Type: Fix | **Priority:** Medium

Navigation Path: My office - Scanning - Click on Start Batch upload - upload multiple PDFs - view the PDF.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. The large amount of data was stored in the session server while uploading files in SmartCare, which resulted in more loading time to display the PDF files attached.

With this release, the above-mentioned issue has been fixed. Now, the uploaded files are displayed quickly and the user is able to upload a large amount of data files.

Author: Lavanya Gowdru

117: EII # 127688: Scanning: To modify the Staff drop down to Typeable search based on the 'StaffAccessRules' permission and configuration key 'DisplayStaffAsTypeableSearchTextBox'.

Release Type: Change | **Priority:** On Fire

Prerequisite:

1. The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is used to change the dropdown fields as type-able search textbox.

A) When the key-value is set to "Yes", then staff drop-downs will display typeable search text boxes instead of a drop-down.

B) When the key-value is set to "No", then the staff drop down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behavior.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behavior, i.e., the same as the key value is "No".

2. Based on the 'Allow Access to All scanned Documents' checkbox setup, the 'Staff Access Rule' permission is considered while listing the staffs under 'All Scanning Staff' typeable search text box through the **path:**

Log into the application -- Staffs/Users under 'Administration' -- Open the logged in staff -- 'General' tab --- 'Access Rights' section -- Check/uncheck the 'Allow Access to All scanned Documents' checkbox' -- click on Roles/Permissions tab -- Select the 'StaffAccessRule' permission type and check the permission Item set for the same.

Navigation Path 1: My Office --- Scanning --- 'All Scanning Staff' typeable search text box.

Navigation Path 2: Client --- Scanning --- 'All Scanning Staff' typeable search text box.

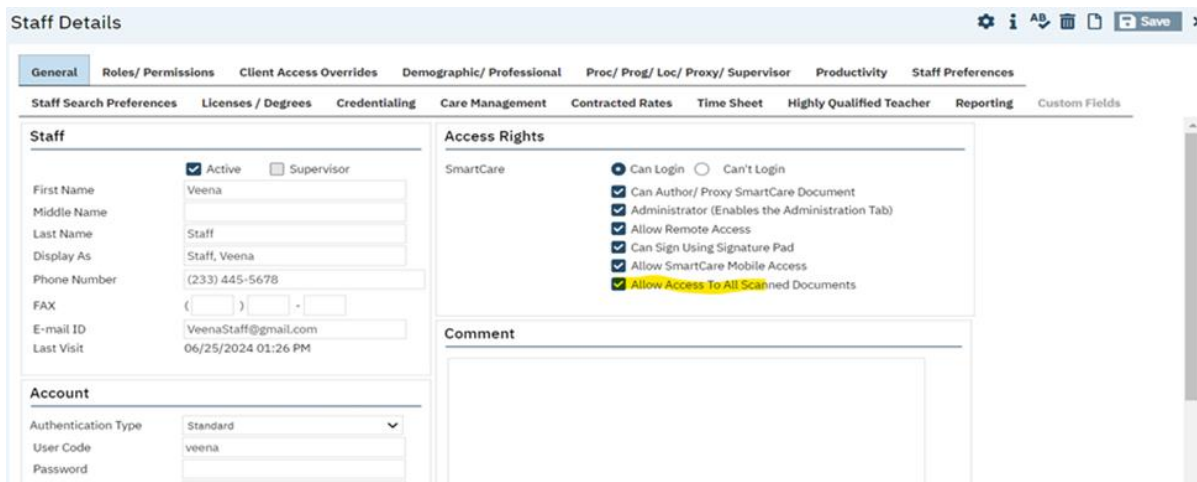
Functionality 'Before' and 'After' release:

With this release, the 'All Scanning Staff' dropdown under Scanning list page has been changed to Typeable search text box on updating the 'DisplayStaffAsTypeableSearchTextBox' configuration key to 'Yes' and the below changes have been implemented on listing the staffs in the 'All Scanning Staff' typeable search text box.

a. When 'Allow Access to All Scanned Documents' checkbox is checked under 'Staff Details' screen, then the 'All Scanning Staff' typeable search text box will check the 'Staff Access Rule'.

i.e.

- If 'Staff Access Rule' is set to 'All Staff', then all active staff will be displayed under 'All Scanning Staff' typeable search text box.
- If 'Staff Access Rule' is set to 'Limited Staff', then all staff associated with the program and the logged-in staff will be displayed under 'All Scanning Staff' typeable search text box



Staff Details

General | Roles/Permissions | Client Access Overrides | Demographic/Professional | Proc/Prog/Loc/Proxy/Supervisor | Productivity | Staff Preferences

Staff Search Preferences | Licenses/Degrees | Credentialing | Care Management | Contracted Rates | Time Sheet | Highly Qualified Teacher | Reporting | Custom Fields

Staff

☒ Active ☐ Supervisor

First Name: Veena
Middle Name:
Last Name: Staff
Display As: Staff, Veena
Phone Number: (233) 445-5678
FAX: () -
E-mail ID: VeenaStaff@gmail.com
Last Visit: 06/25/2024 01:26 PM

Access Rights

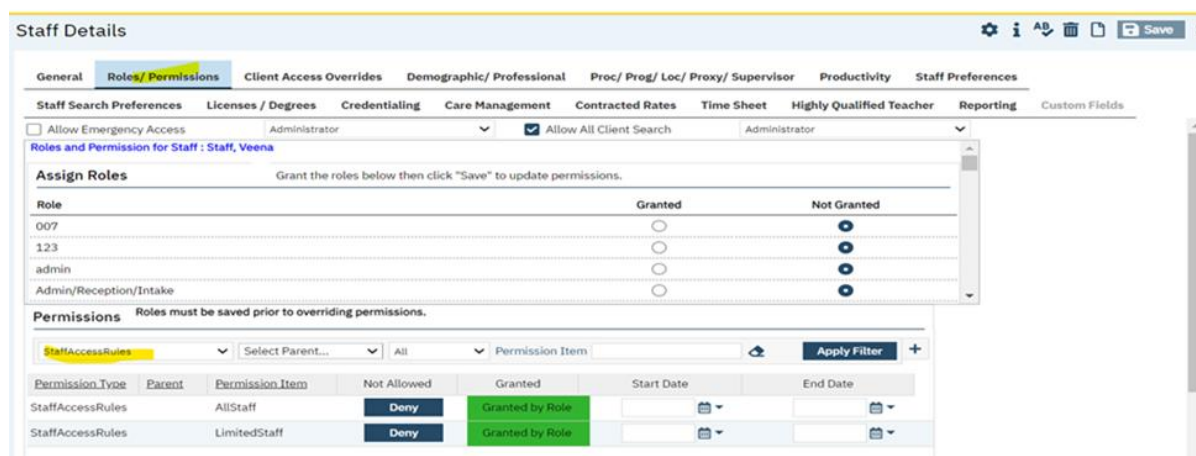
SmartCare

☒ Can Login ☐ Can't Login

☒ Can Author/Proxy SmartCare Document
☒ Administrator (Enables the Administration Tab)
☒ Allow Remote Access
☒ Can Sign Using Signature Pad
☒ Allow SmartCare Mobile Access
☒ Allow Access To All Scanned Documents

Account

Authentication Type: Standard
User Code: veena
Password:



Staff Details

General | **Roles/Permissions** | Client Access Overrides | Demographic/Professional | Proc/Prog/Loc/Proxy/Supervisor | Productivity | Staff Preferences

Staff Search Preferences | Licenses/Degrees | Credentialing | Care Management | Contracted Rates | Time Sheet | Highly Qualified Teacher | Reporting | Custom Fields

☐ Allow Emergency Access Administrator ☒ Allow All Client Search Administrator

Roles and Permission for Staff : Staff, Veena

Assign Roles Grant the roles below then click "Save" to update permissions.

Role	Granted	Not Granted
007	<input type="radio"/>	<input checked="" type="radio"/>
123	<input type="radio"/>	<input checked="" type="radio"/>
admin	<input type="radio"/>	<input checked="" type="radio"/>
Admin/Reception/Intake	<input type="radio"/>	<input checked="" type="radio"/>

Permissions Roles must be saved prior to overriding permissions.

StaffAccessRules Select Parent... All Permission Item Apply Filter

Permission Type	Parent	Permission Item	Not Allowed	Granted	Start Date	End Date
StaffAccessRules	AllStaff	Deny	Granted by Role			
StaffAccessRules	LimitedStaff	Deny	Granted by Role			

Scanned Medical Records (0)
Start Batch Upload
Start Batch Scan

All Associations
Show Scanned/Uploaded
Effective Dates Between
Staff
S. Veena
Staff, Veena
Test, Veena

All Record Types
All Statuses
Created Between 03/01/2024 And 06/18/2024

Associated With
ID
Name
Created
Effective
Scanned By
Version
Status
BatchId
Provider
Insurer

No data to display

b. When 'Allow Access to All Scanned Documents' checkbox is unchecked under 'Staff Details' screen, then the 'All Scanning Staff' typeable search text box will not consider the 'Staff Access Rule'.

· Irrespective of Staff Access Rule, the logged in staff will be displayed under 'All Scanning Staff' typeable search text box.

Staff Details

General
Roles/ Permissions
Client Access Overrides
Demographic/ Professional
Proc/ Prog/ Loc/ Proxy/ Supervisor
Productivity
Staff Preferences

Staff Search Preferences
Licenses / Degrees
Credentialing
Care Management
Contracted Rates
Time Sheet
Highly Qualified Teacher
Reporting
Custom Fields

Staff

☒ Active
☐ Supervisor

First Name: Veena
Middle Name:
Last Name: Staff
Display As: Staff, Veena
Phone Number: (233) 445-5678
FAX:
E-mail ID: VeenaStaff@gmail.com
Last Visit: 06/25/2024 01:26 PM

Access Rights

SmartCare
☒ Can Login
☐ Can't Login
☒ Can Author/ Proxy SmartCare Document
☒ Administrator (Enables the Administration Tab)
☒ Allow Remote Access
☒ Can Sign Using Signature Pad
☒ Allow SmartCare Mobile Access
☐ Allow Access To All Scanned Documents

Account

Authentication Type: Standard
User Code: veena
Password:
Confirm Password:

Comment

Scanned Medical Records (0)

Start Batch Upload
Start Batch Scan

All Associations

Show Scanned/Uploaded
Staff

Effective Dates Between

Staff, Veena

All Record Types

All Statuses

Created Between
03/01/2024
And
06/18/2024

Apply Filter

Associated With	ID	Name	Record Type	Created	Effective	Scanned By	Version	Status	BatchId	Provider	Insurer
No data to display											

Screens

Reference No	Task No	Description
118	EII # 127585	Added the 'Allowed To Open Directly' field in the 'Screen Detail' page.
119	Core Bugs # 128420	Screens dropdown values are overlapping on the Quicklinks.

Author: Sunil Belagali

118. EII#127585: Added the 'Allowed To Open Directly' field in the 'Screen Detail' page.

Release Type: Change | **Priority:** Urgent

Navigation Path 1: Login to 'SmartCare' application – 'Screens' list page – Select any Screen – 'Screens Detail' page – 'Allowed To Open Directly' checkbox.

Navigation Path 2: Table editor –Run the query for the respective screen selected in **Navigation Path 1** – Observe that the 'AllowedToOpenDirectly' column is updating accordingly

Functionality 'Before' and 'After' release:

Purpose: To allow users to search for a screen by the 'AllowedToOpenDirectly' checkbox rather than the use of QuickLinks.

With this release, a new 'Allowed To Open Directly' Checkbox is added to the 'Screen Details' page.

SmartCare 16, Jann (6198)

Screen Details

General

Screen Name: Screens

Primary Key:

Refresh Permission: ☐ Yes ☐ No

Screen Parameters:

Help URL:

Screen Type: List Page Navigation Context: Administration

Active: ☒ Yes ☐ No

☐ Care Coordination

☒ Allowed To Open Directly

Stored Procedure

Initialization:

Validation Update:

Validation Complete:

Warning Complete:

When this checkbox is checked, it will update the table editor 'AllowedToOpenDirectly' column as 'Y', for the respective Screen. Thus, it allows the user to access any Screens directly from the Go Search.

SmartCare 16, Jann (6198)

Table Editor

Table: Top:

Order By:

SQL Query: select * from screens where screenid like '%screens%' and screenid = 506

Execute Save

PhraseCategory	ScreenParameters	Code	SynchronizeStoredProc...	AllowedToOpenDirectly	Active	CareCoordina
				Y		

Note: When the 'Allowed To Open Directly' checkbox is unchecked, in the Table editor 'AllowedToOpenDirectly' column will be updated as 'N'.

Author: Sunil Belagali

119. Core Bugs # 128420: Screens dropdown values are overlapping on the Quicklinks.

Release Type: Fix | **Priority:** Medium

Navigation Path 1: Login to SmartCare application – Open any 'Screen' that has dropdown field – Click on the 'Dropdown' – Do not select anything.

Navigation Path 2: Hover on the parent QuickLinks that has Child QuickLinks – Observe that Dropdown values are overlapping on the 'Child QuickLinks'.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When the user opened any 'Screens' that has a 'Dropdown' field, the dropdown field values was overlapped on the "QuickLinks" when hovering on the 'QuickLinks', without having selected any values in screens.

With this release the above mentioned issue has been resolved. Now, when a user opens any screens containing a dropdown field and hovers over the QuickLinks without selecting any values, the dropdown field values will no longer overlap on the QuickLinks.

Services

Reference No	Task No	Description
120	Core Bugs # 127860	'Service Completion' job took more time to complete successfully
121	Core Bugs # 128260	Service Detail page: The dataset gets larger due to image data content in the 'ClientNotes' table, leading to session server slowness.
122	Core Bugs # 128174	Services: Recurring service is regenerated for the same date if the recurring service is Cancel,No Show and Errored out.
123	EII # 127425	Completing a Service manually is not working the same as a nightly job.
124	Core Bugs # 128310	The document is not created when the service is created from the Service Detail screen.
125	EII # 126094	Front End implementation of 'Case Rate List' and 'Case Rate Detail' screens.
126	Core Bugs # 128002	Services : Recurrence services for individual service patterns were not displayed correctly.
127	Core Bugs # 128293	Service Details screen: A warning message is displayed when the old 'Diagnosis Codes' from the 'Diagnosis' document are initialized.
128	Core Bugs # 128411	When Clinicians ends the recurrence services then the services with show status are deleted in that range.
129	Core Bugs # 128427	Getting an Error Message while completing services through Nightly job.
130	Core Bugs # 128460	Service is not created from Batch Service Import as the Duplicate errored service was present.
131	EII # 127172	Addition of 2 fields to service screens when procedure type ' Initial Crisis Service' is checked in Code Details page.
132	Core Bugs # 128287	Services: Authorization Number column is no longer showing
133	EII # 126096	Back End implementation of 'Case Rate List' and 'Case Rate Detail' screens.

Author: Sahana Gururaj

120. Core Bugs # 127860: 'Service Completion' job took more time to complete successfully.

Release Type: Fix | **Priority:** High

Navigation Path: NA**Functionality 'Before' and 'After' release:**

Before this release, here was the behaviour. The 'Service Completion' job took more time to complete successfully.
Job : ssp_PMCompleteShowServices @UserCode = 'SERVICE COMPLETE'.

With this release, the above mentioned issue has been resolved. Now, code optimization is done for 'Service Completion' job and the job will take around 2hr to complete successfully as required.

Note: When the 'Service Complete' job is being executed and within a few seconds if the user applies changes to the service, then that particular service will not be picked by the 'Service Complete' process as the service is in progress by the User and it will be stored in 'Unsaved Changes' list.

Author: Suganya Shivakumar

121: Core Bugs # 128260: Service Detail page: The dataset gets larger due to image data content in the 'ClientNotes' table, leading to session server slowness.

Release Type: Fix | **Priority:** Medium

Navigation Path: 'Client' Search --- Select a Client --- Navigate to 'Services' quicklink --- 'Client' --- Click on the 'New' Icon --- 'Service Detail' Page --- Select the 'Program', 'Procedure', and 'Location' --- Enter all the required fields --- 'Status' dropdown --- set to 'Complete' --- Click on 'Save' icon.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the 'Service Detail' screen, the dataset gets larger due to image data content in the 'ClientNotes' table, leading to session server slowness.

With this release, the above-mentioned issue has been fixed. Now, the ClientNotes table is removed from the Dataset (DataSetServiceDetail) in the 'Service Detail' screen. This improved the performance and usability of the 'SmartCare' application.

Author: Aishwarya Bommaklar

122. Core Bugs # 128174: Services: Recurring service is regenerated for the same date if the recurring service is Cancel, No Show and Errored out.

Release Type: Fix | **Priority:** High

Navigation Path 1: Go search-Client (Services)-click on New icon – Enter all the required fields – Click on Save icon – Click on Make Recurring icon – Select the date and patterns and click on Create Immediately check box – Click on OK.

Navigation Path 2: Go search-Client (Services)- Select any one of the above Recurrence Service – Click on DOS hyperlink – Change the status to Cancel/No Show/Error – Click on Save icon – Click on Edit Recurrence icon – Extend the End Date, Select Create Immediately checkbox – Click on OK.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When a user created a recurrence service and marked any one of the services as Cancel/No Show/Error and extend the end date of the recurrence service, then the Cancel/No Show/Error services were created with new scheduled status for the same date of service.

With this release, the above-mentioned issue has been resolved. Now, the recurring service is not getting regenerated for the same date of service if the recurring service is Cancel, No Show and Errored out.

Author: Suganya Sivakumar

123. EII # 127425: Completing a Service manually is not working the same as a nightly job.

Release Type: Change | **Priority:** Urgent

Prerequisite: Create a Service with Charge, Add-On Procedure Codes, and the Authorization setup.

Navigation Path: Client --Services -- Click on New icon --- 'Service Detail' Page --- Select the Program, Procedure, and Location --- Enter all the required fields --- Select 'Complete' from Status dropdown --- Click on Save Icon.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. In the Service Detail screen, when the services were completed manually, the system was calling the different Stored Procedure for charge creation, Warning checks, service add-on codes, and authorization setup.

With this release, when the services are completed manually in the Service Detail screen, the system will call the "SSP_PMSERVICECOMPLETE" stored procedure, which works the same for service completion done by Nightly job. This SSP takes care of all the charge creation, Warning checks, service add-on codes, and authorization setup.

Author: Aishwarya Bommaklar

124. Core Bugs # 128310: The document is not created when the service is created from the Service Detail screen.

Release Type: Fix | **Priority:** High

Navigation Path 1: Client -- Services screen -- Click on New icon -- Service Detail -- Enter all the required details -- Select Schedule Status -- click on Save icon -- Click on Move Document icon -- Select any Service -- Click on Ok.

Navigation Path 2: Client -- Documents -- Documents list page.

Functionality 'Before' and 'After' release:

Before this release, the below mentioned issues occurred:

- When the user created a Service from the Service Detail screen, a document was not created to that Service.
- When the user created a Service from Service Detail screen and tried to Move the Document, then the below a validation message was displayed, even though the Service was in Scheduled status.

Validation Message: "The document associated with the new service is signed."

With this release, the above-mentioned issues have been resolved. Now, the document is created for all the Services.

Note: When the user creates a Service with Complete Status, only then the document is not created for that Service until the user makes some changes in Service Note and Save the Service Note screen.

Author: Roopa Hemanna

125. EII # 126094: Front End implementation of 'Case Rate List' and 'Case Rate Detail' screens.

Release Type: Change | **Priority:** Urgent

Navigation Path 1: Administration -- 'Case Rate' List screen.

Navigation Path 2: Administration -- 'Case Rate' List screen -- click on New -- 'Case Rate Details' screen.

Functionality 'Before' and 'After' release:

Purpose: This Case Rate Detail and List page will help the staff to do a setup on their own where they can add case rate setup records to indicate how the services are going to be bundled and their criteria. And also, it would define the Procedure/Program/Location/Duration for the newly created Case Rate services.

With this release, the 'Case Rate List' and 'Case Rate Detail' screens have been implemented.

1. Case Rate Workflow Process:

- All the daily services which are completed will be pulled in the already existing custom report. Now, the custom report has been converted to core.
- The existing custom case rate tables will record all the services from the report. Now, the custom tables are converted to Core. Also, the new columns are added from case rate detail page to the core table.
- The Case Rate Report will run, and it will execute the job.

Case Rate List Screen:

Case Rate List (5)

All Statuses
Period
All
Apply Filter

From Date
01/01/2024
To Date
12/31/2024

Select: All, All on Page, None

ID	Case Rate Name	Start Date	End Date	Period	Status
26	Year	01/01/2024	12/31/2024	Year	Active
11	KHR_Day	01/01/2024	12/31/2024	Week	Active
25	KHR Week	06/01/2024	06/30/2024	Month	Active
16	KHR FLDS	07/01/2024	12/31/2024	Day	Active
9	KHR 1	04/01/2024	12/31/2024	Month	Active

The 'Case Rate List' page has below mentioned fields:

Filter section:

- **Case Rate Search:** Searchable textbox. Staff will be able to search the Case Rate Name.
- **All Statuses:** Drop Down field with below mentioned values:
 - All Statuses
 - Active
 - Inactive
- **Period :** Drop Down field with the below mentioned values:
 - All
 - Day
 - Week
 - Month
 - Year
- **From Date:** Calendar Control Text Box field. This is a required field and a validation message will be displayed when there is no value in the field.
- **To Date:** Calendar Control Text Box field. This is a required field and a validation message will be displayed when there is no value in the field.
- **Apply Filter:** Button

Grid Section:

- **ID:** Displays the Case Rate ID.
- **Case Rate Name:** Displays the Case Rate Name
- **Start Date:** Displays the Start Date of the Case Rate Record.
- **End Date:** Displays the End Date of the Case Rate Record.
- **Period:** Displays the Period of Case Rate Record
- **Status:** Displays the Status of Case Rate.

Case Rate Details Screen:

The Case Rate Details screen has a General tab with the below mentioned sections:

- General
- Case Rate Service
- Case Rate Setup
- Case Rate List

Case Rate Detail

CaseRateId: 16

Created By: roopa

Created Date: 07/03/2024 4:05 PM

Modified By: roopa

Modified Date: 07/03/2024 5:05 PM

General

Case Rate Name

KHR FLDS

Active

Start Date

07/01/2024

End Date

12/31/2024

Period

Month

Case Rate Service

Procedure

RKH Chial Proc

Program

Roopa Program

Location

RKH_FEATURE 239443_Lo

Clinician

27970

Clinician CSP

Duration

Minutes

Duration Based on Services

Aggregate Time Minimum

0

Minutes

Aggregate Time Maximum

1000

Minutes

Comments

Case Rate Setup

Procedure Code(s)...

RKH Proc

Program(s)...

RKH Program

Location(s)...

RKH Loc

Mode Of Delivery...

Face to Face

Aggregate Encounter Minimum

0

Aggregate Encounter Maximum

500

Time Encounter Minimum

0

Minutes

Time Encounter Maximum

1000

Minutes

Modify

Clear

Case Rate List

	Procedure	Program	Location	Aggregate Encounter Minimum	Aggregate Encounter Maximum	Mode of Delivery
X	RKH Proc	RKH Program	RKH Loc	0	500	Face to Face

© Streamline Healthcare Solutions | SmartCare | SmartCare R6 | Health Care Organization

General Section:

Case Rate Details

General

Case Rate Name

Active

Start Date

MM/DD/YYYY

End Date

MM/DD/YYYY

Period

- **Case Rate Name:** Text box: This is a required field. Standard Validation message will be displayed when there is no value in this field.
- **Active:** Check Box: Case Rate will be made active or inactive based on the checkbox selected.
- **Start Date:** Calendar Control Text box: This is a required field. Standard Validation message will be displayed when there is no value in this field. The added Case Rate record will be available from the start date entered here.
- **End Date:** Calendar Control Text box: The added Case Rate record will be available up to the end date entered here.
- **Period:** Drop Down: With options Day, Week, Month, Year. This is a required field. Standard Validation message will be displayed when there is no value in this field.
 - This field will use the External Code field of this Global code category to determine if the service creation is 'Automatic' or 'Manual'.
 - The case rate report will run and execute the job. If frequency in the external code 1 is set to 'A', the services will be recorded automatically.
 - If frequency is not "A", then services will be recorded via the report.

Case Rate Service Section:

Case Rate Service

Procedure

Program

Location

Clinician

Clinician CSP

Duration Minutes

☒ Duration Based On Services

Aggregate Time Minimum Minutes

Aggregate Time Maximum Minutes

Comments

- **Procedure:** Drop Down: This dropdown will have All Procedures. This is a required field. Standard Validation message will be displayed when there is no value in this field. The Procedure selected here will be used when creating the service based on the bundled case rate setup.
- **Program:** Drop Down: This dropdown will have All Programs. This is a required field. Standard Validation message will be displayed when there is no value in this field. The Program selected here will be used when creating the service based on the bundled case rate setup.
- **Location:** Drop Down: This dropdown will have All Locations. This is a required field. Standard Validation message will be displayed when there is no value in this field. The Location selected here will be used when creating the service based on the bundled case rate setup.
- **Clinician:** Typeable Search Text Box: 'Either Clinician OR Clinician CSP is required'. Standard Validation message will be displayed when there is no value in this field. The Clinician selected here will be used when creating the service based on the bundled case rate setup.
- **Clinician CSP:** Text Box: 'Either Clinician OR Clinician CSP is required'. Standard Validation message will be displayed when there is no value in this field.
 - The Clinician selected here will be used when creating the service based on the bundled case rate setup.
 - If Staff wants to get the Clinician from Stored procedure, they can use this Clinician CSP field. This field will pull the Clinician name from this stored procedure Clinician CSP.
- **Duration Based on Service:** Check box:
 - When this check box is checked, the Duration will be considered based on the Services.
 - When this check box is unchecked, the Duration has to be considered from 'Duration' field. As per the current functionality, this Duration field is set to 1 in the table, so that it will be considered as 1 unit for service creation.
- **Duration:** Text Box: The Duration entered here will be used when creating the service based on the bundled case rate setup.
- **Aggregate Time Minimum:** Text Box:
 - The Aggregate Time Minimum/Maximum will be calculated based on the value entered in 'Encounter Time Minimum/Maximum' field for the Procedure codes added in the Case Rate Setup. If multiple Procedure codes are added, then Aggregate Time Minimum will be calculated considering all the Procedure codes.
 - The Aggregate Time Minimum/Maximum will be always in 'Minutes'.
- **Aggregate Time Maximum :** Text Box:
 - The Aggregate Time Minimum/Maximum will be calculated based on the value entered in 'Encounter Time Minimum/Maximum' field for the Procedure codes added in the Case Rate Setup. If multiple Procedure codes are added, then Aggregate Time Minimum will be calculated considering all the Procedure codes.
 - The Aggregate Time Minimum/Maximum will be always in 'Minutes'.

- **Comments : Text Box**

Case Rate Setup Section:

Case Rate Setup

Procedure(s)...

Program(s)...

Location(s)...

Mode Of Delivery

Aggregate Encounter Minimum

Aggregate Encounter Maximum

Time Encounter Minimum

Minutes

Time Encounter Maximum

Minutes

Insert

Clear

Procedure(s): Button: On this button click, it will open the pop-up window to select the Procedures.

SmartCare

Select Procedure Codes(s)

Save

Close

Group Name

Test Sanity

Show Only Selected Procedure Code(s)

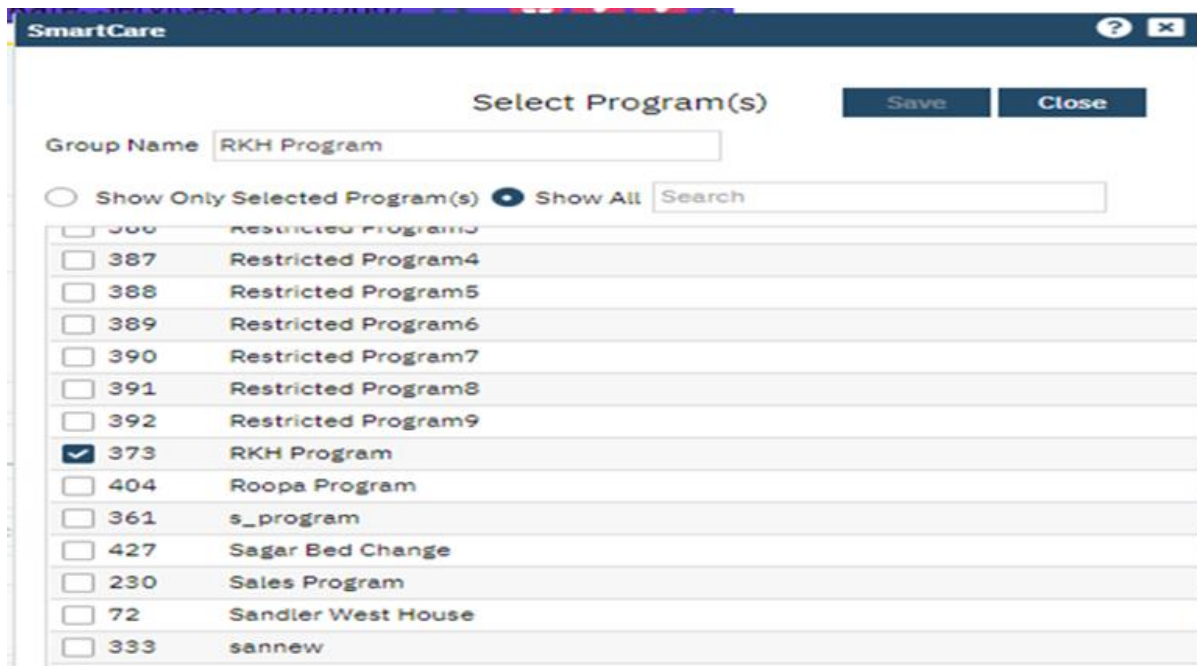
Show All

Search

	ProcedureCode Id	ProcedureCode Name
<input checked="" type="checkbox"/>	49	Test Sanity

- The Procedures pop up has the following fields:
- Group Name: Text Box
- Save : Button: On click the made selection will be Saved.
- Close: Button: On click closes the pop up
- Show Only Selected Procedure Code(s): Radio Button: This will show the selected procedures list
- Show All: Radio button: will show all the procedures in the list.
- Grid with columns: A Multi select Checkbox, ProcedureCodeId, ProcedureCodeName.

- **Program(s):** Button: On this button click, it will open the pop-up window to select the Programs.



ProgramId	ProgramName	Selected
386	Restricted Program3	<input type="checkbox"/>
387	Restricted Program4	<input type="checkbox"/>
388	Restricted Program5	<input type="checkbox"/>
389	Restricted Program6	<input type="checkbox"/>
390	Restricted Program7	<input type="checkbox"/>
391	Restricted Program8	<input type="checkbox"/>
392	Restricted Program9	<input type="checkbox"/>
373	RKH Program	<input checked="" type="checkbox"/>
404	Roopa Program	<input type="checkbox"/>
361	s_program	<input type="checkbox"/>
427	Sagar Bed Change	<input type="checkbox"/>
230	Sales Program	<input type="checkbox"/>
72	Sandler West House	<input type="checkbox"/>
333	sannew	<input type="checkbox"/>

- The programs pop up has the following fields:
- Group Name: Text box.
- Save : Button: On click the made selection will be Saved.
- Close: Button: On click closes the pop up.
- Show Only Selected Program(s): Radio Button: This will show the selected programs list
- Show All: Radio button: will show all the Programs in the list.
- Grid with columns: A Multi select Checkbox, ProgramId, ProgramName.

Location(s): Button: On this button click, it will open the pop-up window to select the Locations.



Select Location(s) [Save] [Close]

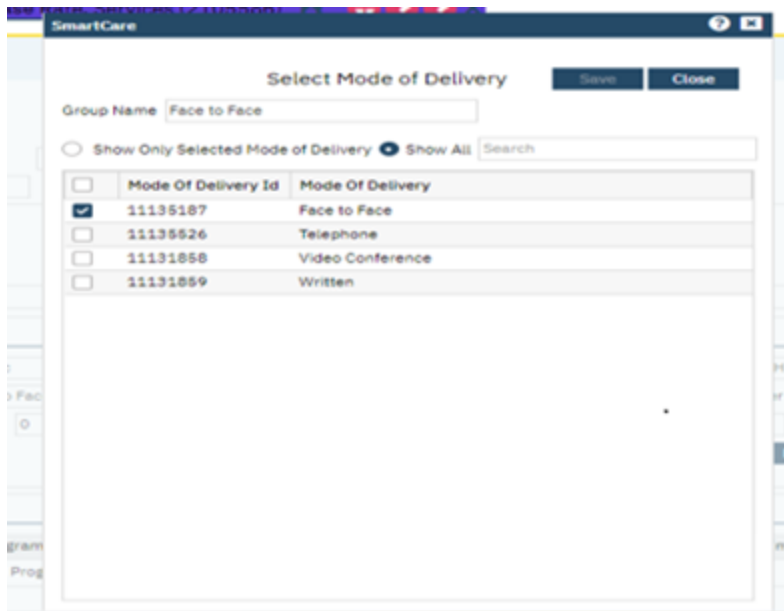
Group Name:

☐ Show Only Selected Location(s) ☒ Show All

<input type="checkbox"/>	334	prisha2
<input type="checkbox"/>	100	Prison/Correctional Facility
<input type="checkbox"/>	6	Public Place
<input type="checkbox"/>	173	Punta Gorda
<input type="checkbox"/>	133	Res Substance Abuse Tx Facility
<input type="checkbox"/>	101	Residential SA Tx Facility
<input type="checkbox"/>	153	Richmond County
<input type="checkbox"/>	38	Ridge Apts
<input type="checkbox"/>	47	River House
<input checked="" type="checkbox"/>	316	RKH Loc
<input type="checkbox"/>	348	RKH_ FEATURE 239443_Location
<input type="checkbox"/>	309	Roopa Location
<input type="checkbox"/>	48	Rowan Trees
<input type="checkbox"/>	247	S Location
<input type="checkbox"/>	325	s_location
<input type="checkbox"/>	347	Sagar Bed Change
<input type="checkbox"/>	164	Sales Location
<input type="checkbox"/>	49	Sandler Center

- The Locations pop up has the following fields:
- Group Name: Text box.
- Save : Button: On click the made selection will be Saved.
- Close: Button: On click closes the pop up
- Show Only Selected Location(s): Radio Button: This will show the selected Location list
- Show All: Radio button: will show all the Location in the list.
- Grid with columns: A Multi select Checkbox, LocationId, LocationName.

Mode of Delivery(s): Button: On this button click, it will open the pop-up window to select the Mode of Delivery's.



- The Mode Of Delivery pop up has the following fields:
 - Group Name: Text box.
 - Save: Button: On click the made selection will be Saved.
 - Close: Button: On click closes the pop up
 - Show Only Selected Mode Of Delivery: Radio Button: This will show the selected Location list
 - Show All: Radio button: will show all the Location in the list.
 - Grid with columns: A Multi select Checkbox, Mode Of Delivery Id, Mode Of Delivery.
- **Aggregate Encounter Maximum:** Button: This field is used to set the Maximum number of services that are taken for the bundle.(Refer Case Rate Setup section mentioned above)
- **Aggregate Encounter Minimum:** Button: This is a required field: A Standard Validation message will be displayed when there is no value.
- **Time Encounter Minimum:** Text box: This field is used to set the Minimum amount of time that needs to be considered for bundling.
- **Time Encounter Maximum:** Text box: This field is used to set the Maximum amount of time that needs to be considered for bundling.
- **Insert:** Button :
 - Clicking on Insert button will insert the values from the following fields to the grid: Procedure, Program, Location, Aggregate Encounter Minimum, Aggregate Encounter Maximum and Mode of Delivery.
 - When a Select Radio button is selected for a line in the Case Rate List grid - It will show the values of the above fields.
 - Then Clicking on the Modify button can update the changes done in these fields.
- **Clear :** Button:
 - When the Select Radio button is selected for a line in the Case Rate List grid - It will show all the values that are added for the following fields: Procedure, Program, Location, Aggregate Encounter Minimum, Aggregate Encounter Maximum and Mode of Delivery.
 - The clear button will clear the values that are displayed in these fields.

Case Rate List-Grid Section:

Case Rate List						
	Procedure	Program	Location	Aggregate Encounter Minimum	Aggregate Encounter Maximum	Mode of Delivery
X	RKH Proc	RKH Program	RKH Loc	0	500	Face to Face

- **Radio Button for selecting a row:** On selecting a row using the radio button, it will show the values in the above fields which are added.
- **Delete (X):** On click of Delete icon, the following confirmation message will be displayed: "Do you want to delete this record?" With OK and Cancel Button.
 - Clicking on OK will delete the record.
 - Clicking on Cancel will close the confirmation message pop-up without deleting the record.
- **Procedure:** Column: It will display the Procedures that are added above for each Case Rate record.
- **Program:** Column: It will display the Programs that are added above for each Case Rate record.
- **Location:** Column: It will display the Locations that are added above for each Case Rate record.
- **Aggregate Encounter Minimum:** Column: It will display the Minimum Number of Services that are added above for each Case Rate record.
- **Aggregate Encounter Maximum:** Column: It will display the Maximum Number of Services that are added above for each Case Rate record.
- **Mode of Delivery:** Column: It will display the Mode of Delivery of the Case Rate record that are added above for each Case Rate record.

Note: Front end task FEATURE 310172_EII#126094 and Back end task FEATURE 285495_EII #126096.

DataModel Changes:

- The new tables "**CaseRates**", "**CaseRateSetup**", "**CaseRateSetupProcedureCodes**", "**CaseRateSetupPrograms**", "**CaseRateSetupLocations**" and "**CaseRateSetupModeOfDeliveries**" are implemented.

Author: Suganya Sivakumar

126. Core Bugs # 128002: Services: Recurrence services for individual service patterns were not displayed correctly.

Release Type: Fix | **Priority:** Medium

Navigation Path 1: Perform Client Search - Select Client - Navigate to Services- Client - Click on New Icon - Service Detail Page - Enter all the required fields - Click on Save Icon.

Navigation Path 2: Services (Client) - Select the service(which is created in the **Navigation Path 1**) Click on the Make Recurring Icon - Recurring Services popup- Select the Start and the End Date in the Date Range section- select the appropriate values in the Recurrence Pattern section - Click on Create Immediately checkbox- Click on OK button.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. The Recurrence services for individual service patterns were not displayed correctly in the Services list page.

With this release, the above-mentioned issue has been resolved. Now, the recurrence services for all individual service patterns are displayed with correct details in the service list page.

Author: Suganya Sivakumar

127. Core Bugs # 128293: Service Details screen: A warning message is displayed when the old 'Diagnosis Codes' from the 'Diagnosis' document are initialized.

Release Type: Fix | **Priority:** High

Navigation Path: 'Client' Search --- Select a 'Client' --- Navigate to 'Services' --- 'Client' --- Click on 'New' Icon --- 'Service Detail' Page --- Select the 'Program, Procedure, and Location' --- Enter all the required fields --- 'Status' dropdown --- set to 'Complete' --- Click on 'Save' Icon.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When the old diagnosis codes initialized from the diagnosis document, the below warning message was displayed in 'Warnings/Errors' section of the 'Service Detail' screen.

Warning Message: 'Invalid Diagnosis code' warning during 'Nightly job service completion'.

With this release, the above-mentioned issue has been fixed. Now, the 'Billing Diagnosis' initializes Billing Diagnosis Codes' only from the 'Current Financial Year' without any warning message being displayed in the 'Warnings/Errors' section of the 'Service Detail' screen.

Author: Aishwarya Bommaklar

128. Core Bugs # 128411: When Clinicians ends the recurrence services then the services with show status are deleted in that range.

Release Type: Fix | **Priority:** Medium

Navigation Path 1: Go search -Services (Client) -Click on New- Enter all the fields -Save- Click on Make Recurring icon - Recurring service pop up opens-- enter the start date and End date range - Select weekly radio button for every Thursday on recurrence pattern then click on 'Ok'.

Navigation Path 2: Client – Select one of the above recurrence Service – Change the status to Show – Click on Save icon.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When the Clinicians/Staff ended the recurrence services before the planned end date, the services with 'Show' status were deleted in that date range.

With this release, the above mentioned issue has been resolved. Now, when the clinicians/staff ends the recurrence services before the planned end date, then the services with 'Show' status are not deleted in that date range and it is deleting the services of 'Schedule' status.

Author: Suganya Sivakumar

129. Core Bugs # 128427: Getting an Error Message while completing services through Nightly job.

Release Type: Fix | **Priority:** Medium

Navigation Path: 'Client' Search --- Select a Client --- Navigate to 'Services' --- 'Client' --- Click on 'New' Icon --- 'Service Detail' Page --- Select the Program, Procedure, and Location --- Enter all the required fields --- 'Status' dropdown --- 'Set to Show' status --- Click on 'Save' Icon.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. The below error message was displayed in the "Service Detail" screen, when the services were completed through the Nightly job process.

Error Message: Duration does not match Date Time In/Date Time Out.

With this release, the above-mentioned issue has been fixed. Now, in the 'Service Detail' screen, an exception handling code has been added to capture errors while calculating duration or end date and time.

Author: Niroop Hassan

130. Core Bugs # 128460: Service is not created from Batch Service Import as the Duplicate errored service was present.

Release Type: Fix | **Priority:** Medium

Prerequisite:

1. An errored Service is present for a client.
2. The Batch Service Import File has the same data as the errored service data.

Navigation Path: My Office -- 'Batch Service Import Files' - 'Batch Service Import Files' list page -- Click on 'Upload Import File' icon -- 'Upload New Services' popup -- Click on 'Select' button and select required file and click on 'Upload' button.

Functionality 'Before' and 'After' Release:

Before this release, here was the behaviour. When the user tried to upload a file through Batch Service Import, the upload was not happening as the errored Service was present for the same data.

With this release, the above-mentioned issue has been resolved. Now, the user can upload the file through Batch Service Import without any issues.

Author: Aishwarya Bommaklar

131. EII # 127172: Addition of 2 fields to service screens when procedure type 'Initial Crisis Service' is checked in Code Details page.

Release Type: Change | **Priority:** On Fire

Prerequisite: 'Initial Crisis Service' check box is selected in the Procedure Code details page.

Navigation Path 1: Client- Services screen – Services list page – Click on New icon – Service Detail screen – Select the Procedure marked as 'Initial Crisis Service'.

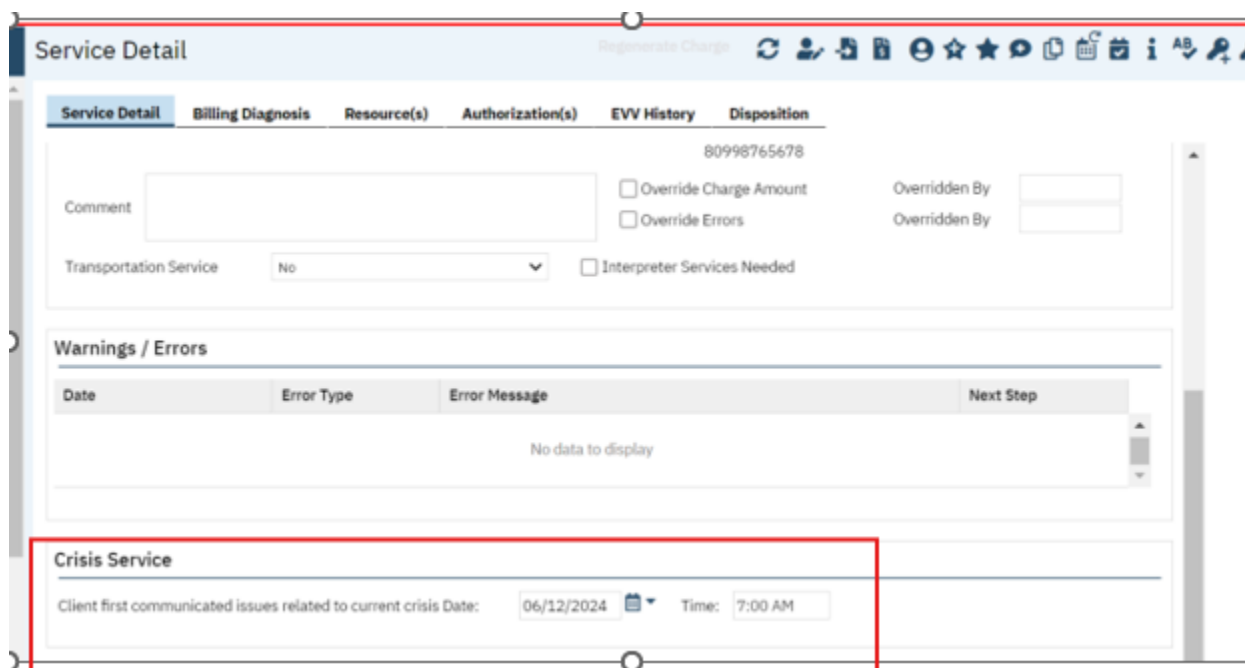
Navigation Path 2: Client- Services/Notes screen – Services/Notes list page – Click on new icon – Service Note screen – Select the Procedure marked as 'Initial Crisis Service'.

Functionality 'Before' and 'After' release:

With this release, the below fields are implemented under the Crisis section in Service details and Service Note screen. These fields will be displayed only when the 'Initial Crisis Service' checkbox is selected in the Procedure code detail page.

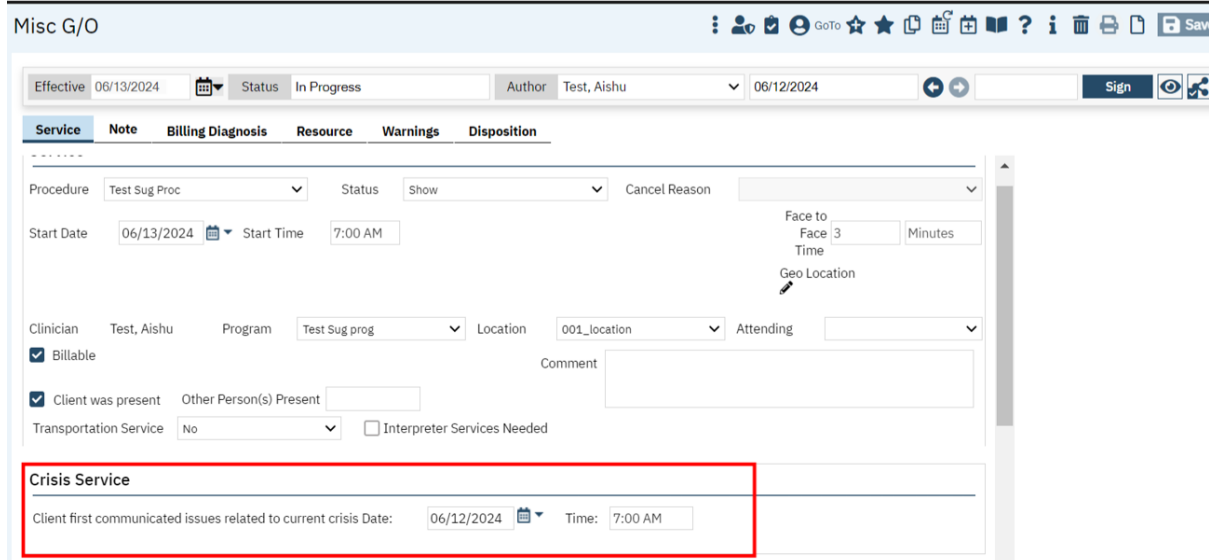
1. Client first communicated issues related to current crisis Date:
2. Time

Service Detail screen:



The screenshot shows the 'Service Detail' screen with a red box highlighting the 'Crisis Service' section. The section contains two fields: 'Client first communicated issues related to current crisis Date:' with a date picker set to '06/12/2024' and a time picker set to '7:00 AM'.

Service Notes screen:



The data for these fields will be initialized to the new service when the Start Date is less than 24 hours than the previous service.

Data Model Changes: Added CrisisFirstContactDateTime column in services table.

Author: Shivakanth Moger

132: Core Bugs # 128287: Services: Authorization Number column is no longer showing.

Release Type: Fix | **Priority:** High

Navigation Path: Select any client – Go Search – ‘Services’ – ‘Services’ list page – New – ‘Service Detail’ page – add all the required fields and save the screen – ‘Authorization(s)’ tab.

Functionality ‘Before’ and ‘After’ release:

Before this release, here was the behaviour. In the ‘Service Detail’ screen, the ‘Authorization Number’ column was not showing in the ‘Attached Authorization(s)’ and ‘Available/Potential Authorization(s)’ sections.

With this release, issue has been fixed. Now, the ‘Authorization Number’ column is added in the ‘Attached Authorization(s)’ section and ‘Available/Potential Authorization(s)’ sections.

Author: Roopa Hemanna

133. EII # 126096: Back End implementation of ‘Case Rate List’ and ‘Case Rate Detail’ screens.

Release Type: Change | **Priority:** Urgent

Prerequisite:

1. Services is completed and provided to the clients.

Path: Client' tab – 'Services' List screen.

2. Case Rate setup is done with Period: Day, Week, Month and Year.

Path: 'Administration' tab – 'Case Rate' List screen – click on the New button – enter mandatory details in 'General' section – Go to Case Rate Service section – enter mandatory details – click on the Save button.

3. Case rate setup is to be done with the procedure, program, location, and Mode of Delivery. Based on this setup, job will check the existing services list with the case rate start date and end date for all clients.

Path: 'Administration' tab – 'Case Rate Details' screen – 'Case Rate Setup' section – enter mandatory details – click on Insert button – Case Rate List grid section – click on Save button.

Navigation Path 1: Administration -- 'Case Rate' List screen.

Navigation Path 2: Administration -- 'Case Rate' List screen -- click on New button -- 'Case Rate Details' screen.

Navigation Path 3: ssp_SCJobToCreateCaseRateServices.

Functionality 'Before' and 'After' release:

Purpose: Youth Act is a single program and many types of services could be provided. The customer wants to bill for all types of services under the Youth Act program. This Case Rate Detail and List page will help the staff to do a setup on their own where they can add case rate setup records to indicate how the services are going to be bundled and their criteria. And also, it would define the Procedure/Program/Location/Duration for the newly created Case Rate services.

With this release, following functionalities have been implemented:

1. All the daily services which are completed will be pulled in the existing custom report. Now the custom report has been converted to core. The new columns from case rate detail page are added to the core table. The Case Rate Report will run, and it will execute the job.
2. This Case Rate Detail and List page will help the staff to do a setup on their own where they can add case rate setup records to indicate how the services are going to be bundled and their criteria (Period: Day, Week, Month, Year). And also, it would define the Procedure/Program/Location/Duration for the newly created Case Rate services.
3. Youth Act is a single program that provides many types of services. The customer wants to bill for all types of services under the Youth Act program, each identified by different Procedure codes. The system would automatically evaluate the services provided throughout the month and create the appropriate service at the end of the month for billing based on Period Day, Week, Month and Year. The charges, CPT codes, modifiers, revenue codes, and Medicaid rate codes are all based on the criteria met during the month. To achieve this, the existing case rate table functionality is utilized and provided a front-end screens to set up case rates.
4. A new Configuration Key '**CalculateCaseRateMonthlyDateOfService**' has been added.

System Configuration Key Details:

- **Read Key as:** Calculate Case Rate Monthly Date Of Service.
- **Allowed Values:** FDS, FLDM, FLDS, LDS
- **Default Value:** FDS
- **Modules:** SCM Accounts Receivable
- **Description:** This configuration key controls the date of service and end date for services generated for Monthly Case Rate Services.
 - If the value is **FDS** this stands for First Date of Service. If this is the configuration key value, the start date and end date will both be stored as the first date of service in the bundle.

- If the value is **FLDM** this stands for First and Last Date of the Month. If this is the configuration key value, the start date and end date will be the first and last date of the calendar month.
 - If the value is **FLDS** this stands for First and Last Date of Service. If this is the configuration key value, the start and end date will be the first and last date of service included in the bundle.
 - If the value is **LDS** this stands for Last Date of Service. If this is the configuration key value, then the start and end date will be the Last Date of Service.
- 5. There are three different rate levels: Full Rate, Partial Rate, and Inpatient Rate. The service is billed monthly, indicating the date range of the billing month. Different levels or rates can be billed based on qualifying services provided.
- 6. The full rate is the highest of the three rates, so whenever possible, that is the rate that will be used. There are standard conditions under which the full rate can be billed, as well as exceptions.
- 7. The **Mode of Delivery field** is used to identify the different types of contacts and modalities (Mode of Delivery can be filtered based on the procedure code). Identifying services that are collateral contacts and determining the modality of the service.
 - **Client Contact** - a service provided to the client.
 - **Collateral Contact** - a service provided to a family member or other person, but not the client.
 - **Modality** - the method of providing the service: face to face, telehealth, participants (client and collateral).
- 8. **Full Rate:** To bill the Full Rate for the month, all of the following criteria must be true
 - The client must have at least 3 client contacts of any modality in the month.
 - The client must have at least 3 collateral contacts of any modality in the month.
- 9. **Partial Rate:** To bill the Partial Rate for the month, all of the following criteria must be true
 - The client must have 2 client contacts of any modality in the month.
 - The client must have at least 3 collateral contacts of any modality in the month.
- 10. **Inpatient Rate:** To bill the Inpatient Rate, all of the following criteria must be met:
 - The client must have at least 2 client contacts while at an inpatient program. The service must be provided at an inpatient facility (will be a separate procedure).
- 11. **Full Rate, Exception:** Another way that the Full Rate can be billed for the month, is based on the following criteria.
 - If the client receives 2 inpatient contact AND
 - The client receives 4 or more community-based contacts AND
 - The total services from the above items equal 6 or more total contacts in the month AND
 - All 6 or more total contacts must occur within the Month of Admission or the Month of Discharge from the Youth Act program.
- 12. **Partial Rate, Exception:** Another way that the Partial Rate can be billed for the month, is based on the following criteria.
 - If the client receives 1 inpatient contact AND
 - The client receives 2 or more community-based contacts AND
 - The above services total 3 or more total contacts in the month.
- 13. If none of the above criteria is met, then none of the 3 rate types can be billed. The component services will not trigger anything for billing.

Note: The fix for Duplicate case rates is available in BUG 401932 (Core Bugs, 128506). The changes will be released in June Hotfix build and formal release will be available in July MSP.
BUG 401932: [Case Rate] - Creating duplicates Case Rates & unknown creation logic.

Services/Notes

Reference No	Task No	Description
134	Core Bugs # 127793	Psychiatric Note: Selected SU diagnoses not populating to the Diagnosis tab.
135	Core Bugs # 128296	Psychiatric Note: the text field is displaying to the bottom of the Other checkbox in the signed PDF.
136	Core Bugs # 128413	Getting an error while creating a service.
137	Core Bugs # 128375	Service Notes: Custom Validation does not seem to fire.

Author: Kiran Yogendra

134. Core Bugs # 127793: Psychiatric Note: Selected SU diagnoses not populating to the Diagnosis tab.

Release Type: Fix | **Priority:** Medium

Navigation Path 1: Client - 'Clinical Documents' – Go to the 'Services/Notes'– Create New - Select the Procedure related to the 'Psychiatric Note' – Enter the required values in the 'Service' tab – Click on the 'Note' tab – General sub-tab – 'Substance Use Hx' section – Select some of the 'Substance Use' – Click on 'Save' button.

Navigation Path 2: Client - 'Clinical Documents' – Go to the 'Services/Notes'– Create New - Select the Procedure related to the 'Psychiatric Note' – Enter the required values in the 'Service' tab – Click on the 'Note' tab -- Go to the 'Medical Decision Making' sub-tab – Click on the 'Add Problem' URL – Click on the 'Problem' button – Check if the corresponding code/diagnoses added on the 'EM Note Problem Pop up'.

Navigation Path 3: Client - 'Clinical Documents' – Go to the 'Services/Notes'– Create New - Select the Procedure related to the 'Psychiatric Note' – Enter the required values in the 'Service' tab – Click on the 'Note' tab -- Go to the 'Diagnosis' sub-tab – Check if the same (Navigation Path 2) Diagnosis is listed in the 'Diagnosis List' section.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When signing a 'Psychiatric Service' note, the corresponding codes/diagnoses of the selected 'Substance Use' were not populating into the 'Problem'/'Diagnosis' section on Saving the Note.

With this release, the above-mentioned issue has been resolved. Now, all the diagnoses are getting populated into the 'Problem' and 'Diagnosis' sections when the user selects 'Substance Use' under the 'Substance Use Hx' section.

Psychiatric Note

Effective 05/06/2024 Status New Author Yogendra, Kiran 05/14/2024

Service

Note

Billing Diagnosis

Resource

Warnings

Disposition

Encounter Form

General

MSE

Medical Decision Making

AIMS

Diagnosis

Psychotherapy

History and Physical

Substance Use Hx

Substance Use

☐ None
 ☒ Alcohol
 ☒ Amphetamines

F10.10 - Alcohol use disorder, Mild

How Much?

Frequency?

Most Recent Use?

☐ Standardized Alcohol Screening Completed
 ☐ Unhealthy alcohol use identified
 ☐ No unhealthy alcohol use identified
 ☐ Could not screen due to medical reasons

F15.10 - Amphetamine-type substance use disorder, Mild

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Psychiatric Note

Effective 05/06/2024 Status New Author Yogendra, Kiran 05/14/2024

Service

Note

Billing Diagnosis

Resource

Warnings

Disposition

Encounter Form

General

MSE

Medical Decision Making

EM Note Problem Popup

Problem 1

Problem....

Complexity of Problem

Associated signs/systems; other information

Data Reviewed

DSM V/ ICD 10	DSM IV/ ICD 9	DSM V	Description
<input type="radio"/> F10.10	305	Yes	Alcohol use disorder, Mild
<input type="radio"/> F15.10	305.7	Yes	Amphetamine-type substance use disorder, Mild

OK Cancel

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Order	DSM 5/ ICD 10	SNOMED	R/O	ICD/ DSM Description	SNOMED Description	Type	Severity	Source	Comments
1	F10.10	160592...		Alcohol use disorder	Alcohol intake above...	Additional	Low	SUALc...	
2	F15.10	123007...		Amphetamine-type	Amphetamine and/or...	Additional	Low	SUAm...	

Author: Navyashree Jois

135. Core Bugs # 128296: Psychiatric Note: the text field is displaying to the bottom of the Other checkbox in the signed PDF.

Release Type: Fix | **Priority:** High

Navigation Path: Open a client – Search for 'Services/Notes' - New - Select the Procedure associated with Psychiatric Note– Enter the required values – Go to Note tab – Medical Decision-Making tab – Non-Counseling Activities Section – Check 'Other' Checkbox – Enter value for 'Other' comment textbox – Sign the Service Note – PDF.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When the user tried to sign a 'Psychiatric Note', the 'Other' comment text field in the Non-Counseling Activities section under the 'Medical Decision Making' tab, was at the bottom of the 'Other' Checkbox on the signed 'Psychiatric Note' PDF.

With this release, the above mentioned issue has been resolved. Now, the 'Other' comment text field in the Non-Counseling Activities section under the Medical Decision Making tab, is displaying next to the 'Other' checkbox with proper alignment in the signed 'Psychiatric Note' PDF.

Author: Jagadeesh Raju

136. Core Bugs # 128413: Getting an error while creating a service.

Release Type: Fix | **Priority:** High

Navigation Path: Client -- Service Note -- Click on New icon -- Service Note -- Enter Procedure and all the required details -- Click on Save.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the Service Note, when the user tried to create a client service for a specific procedure, the below mentioned error was displayed.

Error Message: "Cannot find column 2"

With this release, the above-mentioned issue has been resolved. Now, the error message is not displayed when the user creates a client service for a specific procedure.

Author: Aishwarya Bommaklar

137. Core Bugs # 128375: Service Notes: Custom Validation does not seem to fire.

Release Type: Fix | **Priority:** Medium

Navigation Path: Client – Services/Notes screen – Click on New icon – Enter the required details under Service tab – Click on Sign icon.

Functionality 'Before' and 'After' release:

Note: This change is specific to the customer who is having the customization logic in their environment.

Before this release, here was the behaviour. When the Note tab was loaded in the Service Notes screen, the function "ValidateCustomPageEventHandler()" was not called in Service Note which was used to include custom validations.

With this release, the issue has been fixed. Now, logic is added to call the function "ValidateCustomPageEventHandler()" so that the validations defined inside this function are displayed when the Note tab is enabled and loaded in Service Note.

SmartCare Improvements

Reference No	Task No	Description
138	Core Bugs # 128237	Removing the use of stored procedure ssp_RefreshStaffClients from ssp_ValidateHealthDataReport.
139	EII # 125541	Implementation of new configuration key 'ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs' - to hide and show SNOMED code and descriptions in UI and PDF.
140	Core Bugs # 128192	Failed login attempt countdown not displayed on Login screen.
141	EII # 126687	Implementing 'External Identification' Tab in Client Information(C) screen and "External ID" search field on Client Search pop up.
142	Core Bugs # 128547	List page: Popup issue on clicking 'Enable editing' in the exported file.

Author: Munish Sood

138. Core Bugs # 128237: Removing the use of stored procedure ssp_RefreshStaffClients from ssp_ValidateHealthDataReport.

Release Type: Fix | **Priority:** High
Navigation Path: N/A

Functionality 'Before' and 'After' release:

With this release, the stored procedure 'ssp_RefreshStaffClients' has been removed from 'ssp_ValidateHealthDataReport' to enhance the 'SmartCare' application's performance.

Author: Akshay Vishwanath

139. EII # 125541: Implementation of new configuration key 'ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs' - to hide and show SNOMED code and descriptions in UI and PDF.

Release Type: Change | **Priority:** High

Prerequisite: Set the 'ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs' configuration key to 'Yes' or 'No'.

Navigation Path 1: 'Client' search - 'Document'- Navigate to the below document- Diagnosis document, Individualized Service Plan Document, Inpatient/Intensive Outpatient Coding Document, Assessment (Custom).

Navigation Path 2: 'Client' search - 'Service/Notes' - Navigate to below 'Service/Notes', 'Psychiatric note', 'Individual Service Note', 'Nurse Med Management Note'.

Navigation Path 3: 'Client' search - 'Problem Detail', 'Problem Lists', and 'Primary Care Diagnosis' screen.

Navigation Path 4: 'My Preferences' screen - 'General' tab - 'General Setting' section - 'Diagnosis Search Preference' dropdown.

Functionality 'Before' and 'After' release:

Purpose: To hide and show SNOMED code based on the new configuration key 'ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs' setup and descriptions in UI and PDF.

With this release, a new system configuration key 'ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs' is implemented, and the value of this key is used to hide or show SNOMED code and descriptions in 'all the documents/Service Notes' UI and its corresponding PDFs.

Documents: Diagnosis document, Individualized Service Plan Document, Inpatient/Intensive Outpatient Coding Document, Assessment.

Service Notes: "Service/Notes", 'Psychiatric note', 'Individual Service Note', 'Nurse Med Management Note'.

Screen: 'My Preferences' screen, 'Problem Detail', 'Problem Lists', and 'Primary Care Diagnosis' screen, 'ICD 10' popup screen.

System Configuration Key Details:

Key: ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs

Read Key As: Show SNOMED Code And Description On Screens And PDFs.

Default Value: Yes

Allowed Values: Yes, No

Modules: SCM Clinical 1, SCM Clinical 2, SCM Core, SCM Primary Care

This is a change to an existing feature of the core product by introducing a system configuration key. We have SNOMED codes and their descriptions that are currently shown on all screens where Diagnosis codes can be searched AND also on all screens where SNOMED codes and descriptions are displayed. The value of this key will determine whether the SNOMED codes and descriptions will be shown or hidden in all these screens and document PDFs.

A) If the key value is set to "Yes", show SNOMED codes and their descriptions in all screens where Diagnosis codes can be searched for, all screens where SNOMED codes and descriptions are displayed, and in document PDFs. This will be the default value of the key as it drives the existing behaviour.

B) If the key value is set to "No", do not show SNOMED codes and their descriptions in all screens where Diagnosis codes can be searched for. Also, do not show this on all screens where SNOMED codes and descriptions are displayed, and in document PDFs.

Note:

1. If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behaviour, i.e. same as the key value is "Yes".
2. Client Clinical Problems screen will be excluded from the logic of this configuration key.
3. Acronym: SNOMED - Systemized Nomenclature of Medicine.

Configuration Key Details

Configuration Keys

Key: ShowSNOMEDCodeAndDescriptionOnScreensAndI

SourceTableName:

Module: SCM Clinical 1, SCM Clinical 2, SCM Core, SCM Primary Care

Screen: Diagnosis (13), My Preferences (17), Problem Detail (719), Problems (718), Psychiatric Note (11000)

Value: No

Description:

Read Key as: Show SNOMED Code And Description On Screens And PDFs

This is a change to an existing feature of the core product by introducing a system configuration key. We have SNOMED codes and their descriptions that are currently shown on all screens where Diagnosis codes can be searched for AND also on all screens where SNOMED codes and descriptions are displayed. The value of this key will determine whether the SNOMED codes and descriptions will be shown or hidden in all these screens and document PDFs.

A) If the key value is set to "Yes", show SNOMED codes and their descriptions in all screens where Diagnosis codes can be searched for, all screens where SNOMED codes and descriptions are displayed, and in document PDFs. This will be the default value of the key as it drives the existing behavior.

B) If the key value is set to "No", do not show SNOMED codes and their descriptions in all screens where Diagnosis codes can be searched for. Also, do not show this on all screens where SNOMED codes and descriptions are displayed, and in document PDFs.

Note:

1) If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behavior, i.e. same as the key value is "Yes"

Diagnosis Document:

When the configuration key 'ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs' is set to '**Yes**', then the 'SNOMED code' and their descriptions are displayed in the 'Diagnosis ICD Ten' popup.

Diagnosis Document

Diagnosis ICD Ten PopUp

F21

☒ ICD10 ☐ SNOMED Billable and Non Billable

Search

* DSM-5-TR

DSM 5/ICD 10	Billable	ICD/ DSM Description	SNOMED	SNOMED Description
<input type="radio"/> F21*	Yes	Schizotypal personality disorder	111482003	Subchronic schizophrenia with acute exacerbations (disorder)
<input type="radio"/> F21*	Yes	Schizotypal personality disorder	191559008	Latent schizophrenia (disorder)
<input type="radio"/> F21*	Yes	Schizotypal personality disorder	191561004	Subchronic latent schizophrenia (disorder)
<input type="radio"/> F21*	Yes	Schizotypal personality disorder	191562006	Chronic latent schizophrenia (disorder)
<input type="radio"/> F21*	Yes	Schizotypal personality disorder	191563001	Acute exacerbation of subchronic latent schizophrenia (disorder)
<input type="radio"/> F21*	Yes	Schizotypal personality disorder	191564007	Acute exacerbation of chronic latent schizophrenia (disorder)
<input type="radio"/> F21*	Yes	Schizotypal personality disorder	191565008	Latent schizophrenia in remission (disorder)
<input type="radio"/> F21*	Yes	Schizotypal personality disorder	247804008	Schizophrenic prodrome (disorder)
<input type="radio"/> F21*	Yes	Schizotypal personality disorder	274952002	Borderline schizophrenia (disorder)
<input type="radio"/> F21*	Yes	Schizotypal personality disorder	31027006	Schizotypal personality disorder (disorder)
<input type="radio"/> F21*	Yes	Schizotypal personality disorder	4926007	Schizophrenia in remission (disorder)

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OK Cancel

When the configuration key 'ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs' is set to '**No**', then the 'SNOMED' code will be hidden in the PDF.

PDF screenshot:

Diagnosis Document

Effective: 03/07/2024 Status: Signed Author: r, Ramu

Document

PdfBytesHandler.axd 1 / 2 110%

Diagnosis Document

Client Name: Test, Time span Client ID: 4777
DOB: 10/17/1998 Effective Date: 03/07/2024

Diagnosis

Schizotypal personality disorder

DSM5/ICD10 F21

ICD/ DSM Description Schizotypal personality disorder

Remission	Partial	Specifier	Type	Primary
Source		Severity	Order	1
Rule Out	No	Billable	Yes	

Benign neoplasm of unspecified conjunctiva

DSM5/ICD10 D31.00

ICD/ DSM Description Benign neoplasm of unspecified conjunctiva

Remission	Partial	Specifier	Type	Additional
-----------	---------	-----------	------	------------

When the '**ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs**' configuration key is set to '**No**', in the 'Diagnosis ICD Ten' popup, on searching for an 'ICD10' code that has multiple 'DSM' and 'Non-DSM' codes available, then the search result will display top most records - one for 'DSM' and another for 'Non-DSM' (**Refer the below screenshot**)

Screenshot for SNOMED code and their descriptions hidden when configuration key is set to 'No'.

Diagnosis Document

Diagnosis ICD Ten PopUp

F21

☒ ICD10 Billable and Non Billable

Search

* DSM-5-TR

	DSM 5/ICD 10	Billable	ICD/ DSM Description
<input type="radio"/>	F21*	Yes	Schizotypal personality disorder
<input type="radio"/>	F21	Yes	Schizotypal disorder

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OK Cancel

In the 'Diagnosis ICD Ten' pop-up, the 'SNOMED' checkbox will be displayed when the '**ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs**' configuration is set to '**Yes**'

Screenshot for the SNOMED checkbox displayed

Diagnosis Document
Diagnosis ICD Ten PopUp

f21

☐ ICD10 ☒ SNOMED Billable and Non Billable

* DSM-5-TR

DSM 5/ICD 10	Billable	ICD/ DSM Description	SNOMED	SNOMED Description
F21*	Yes	Schizotypal personality disorder	111482003	Subchronic schizophrenia with acute exacerbations (disorder)
F21*	Yes	Schizotypal personality disorder	191559008	Latent schizophrenia (disorder)
F21*	Yes	Schizotypal personality disorder	191561004	Subchronic latent schizophrenia (disorder)
F21*	Yes	Schizotypal personality disorder	191562006	Chronic latent schizophrenia (disorder)
F21*	Yes	Schizotypal personality disorder	191563001	Acute exacerbation of subchronic latent schizophrenia (disorder)
F21*	Yes	Schizotypal personality disorder	191564007	Acute exacerbation of chronic latent schizophrenia (disorder)
F21*	Yes	Schizotypal personality disorder	191565008	Latent schizophrenia in remission (disorder)
F21*	Yes	Schizotypal personality disorder	247804008	Schizophrenic prodrome (disorder)
F21*	Yes	Schizotypal personality disorder	274952002	Borderline schizophrenia (disorder)
F21*	Yes	Schizotypal personality disorder	31027006	Schizotypal personality disorder (disorder)
F21*	Yes	Schizotypal personality disorder	4926007	Schizophrenia in remission (disorder)

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OK Cancel

In the 'Diagnosis ICD Ten' pop-up, the 'SNOMED' checkbox will be hidden when the 'ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs' configuration is set to 'No'.

Screenshot for SNOMED checkbox hidden

Diagnosis Document
Diagnosis ICD Ten PopUp

f10

☒ ICD10 Billable and Non Billable

* DSM-5-TR

DSM 5/ICD 10	Billable	ICD/ DSM Description
F10.10*	Yes	Alcohol use disorder, Mild
F10.10	Yes	Alcohol abuse, uncomplicated
F10.11	Yes	Alcohol abuse, in remission
F10.120	Yes	Alcohol abuse with intoxication, uncomplicated
F10.121*	Yes	Alcohol intoxication delirium, With mild use disorder
F10.121	Yes	Alcohol abuse with intoxication delirium
F10.129*	Yes	Alcohol intoxication, With mild use disorder
F10.129	Yes	Alcohol abuse with intoxication, unspecified
F10.130	Yes	Alcohol abuse with withdrawal, uncomplicated
F10.131	Yes	Alcohol abuse with withdrawal delirium
F10.132	Yes	Alcohol abuse with withdrawal with perceptual disturbance

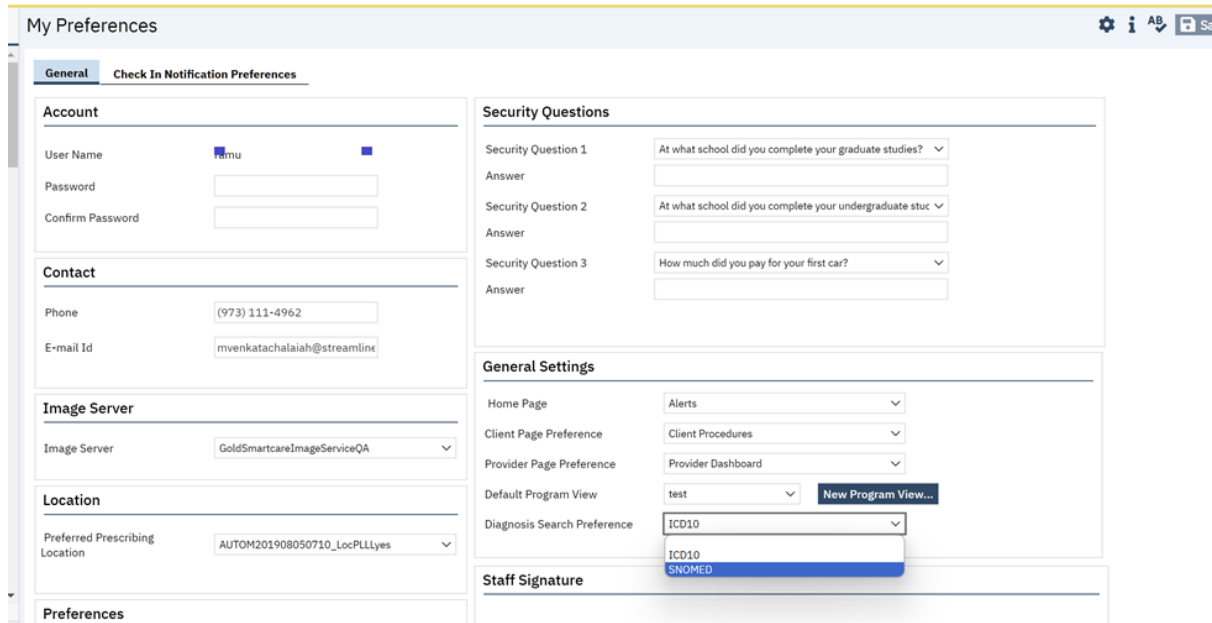
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OK Cancel

'My Preferences' screen:

In the 'My Preferences' screen of the 'Diagnosis Search Preference' dropdown, the 'SNOMED' value will be displayed when the 'ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs' configuration is set to 'Yes'.

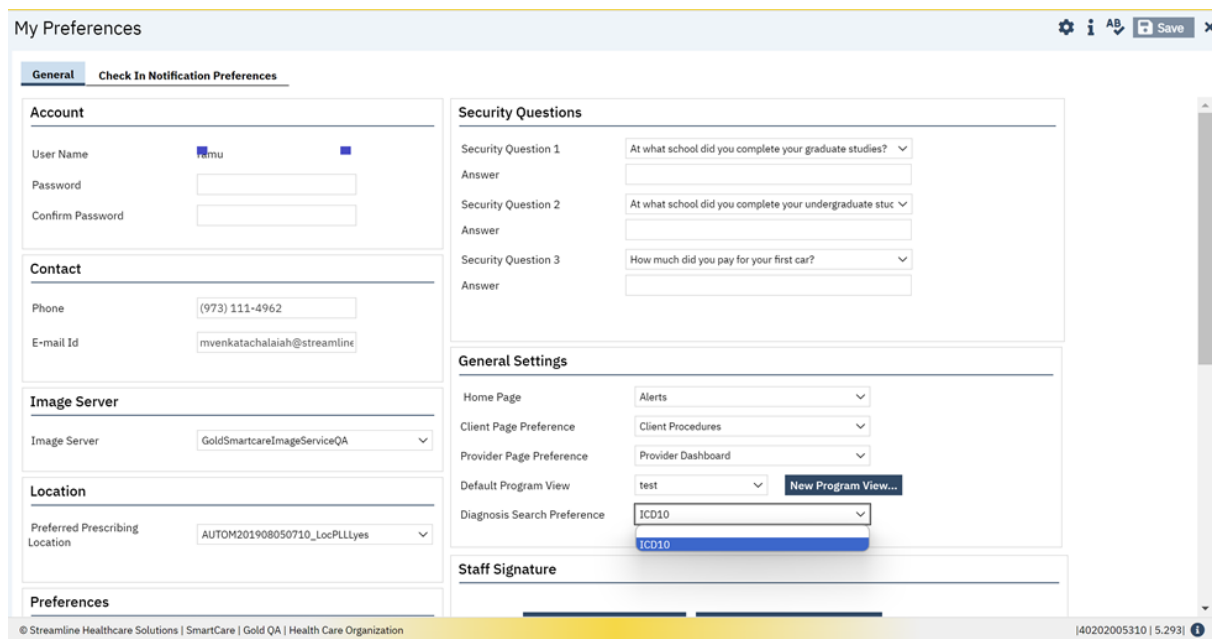
Screenshot for SNOMED value displayed in Diagnosis Search Preference dropdown



The screenshot shows the 'My Preferences' interface. On the left, there are sections for 'Account' (User Name, Password, Confirm Password), 'Contact' (Phone, E-mail Id), 'Image Server', and 'Location'. On the right, there are 'Security Questions', 'General Settings', and 'Staff Signature'. The 'General Settings' section includes 'Home Page', 'Client Page Preference', 'Provider Page Preference', 'Default Program View', and 'Diagnosis Search Preference'. The 'Diagnosis Search Preference' dropdown is open, showing 'ICD10' and 'SNOMED' options. A 'New Program View...' button is also visible next to the 'Default Program View' dropdown.

In the 'Diagnosis Search Preference' dropdown of 'My Preferences' screen, the 'SNOMED' value will be hidden when the '**ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs**' configuration is set to 'No'.

Screenshot for SNOMED value hidden in Diagnosis Search Preference dropdown



This screenshot is similar to the previous one, but the 'SNOMED' option is hidden from the 'Diagnosis Search Preference' dropdown. Only 'ICD10' is visible in the dropdown list. The rest of the interface remains the same.

Diagnosis Document:

In the 'Diagnosis ICD Ten' Popup, the 'SNOMED code' column is moved towards the right before the 'SNOMED description' regardless of the configuration key is set to 'Yes' or 'No'.

Screenshot for the SNOMED code column

Author: Rakesh Naganagoda

140. Core Bugs # 128192: Failed login attempt countdown not displayed on Login screen.

Release Type: Fix | **Priority:** Medium

Prerequisite: Set the Login Attempt Count key value in Configuration Keys by following the below **Path:**

Login to SmartCare -- Administration -- 'Configuration Keys' screen -- Set the value in the 'LoginAttemptCount' configuration key -- Save.

Navigation Path: Login to the SmartCare application with incorrect passwords -- Failed login attempt counts will display in the login page.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. The user was not seeing a failed login counts message on doing an incorrect login attempt on the login screen.

With this release, the above-mentioned issues have been resolved. Now the user is getting the failed login counts message on the login screen.

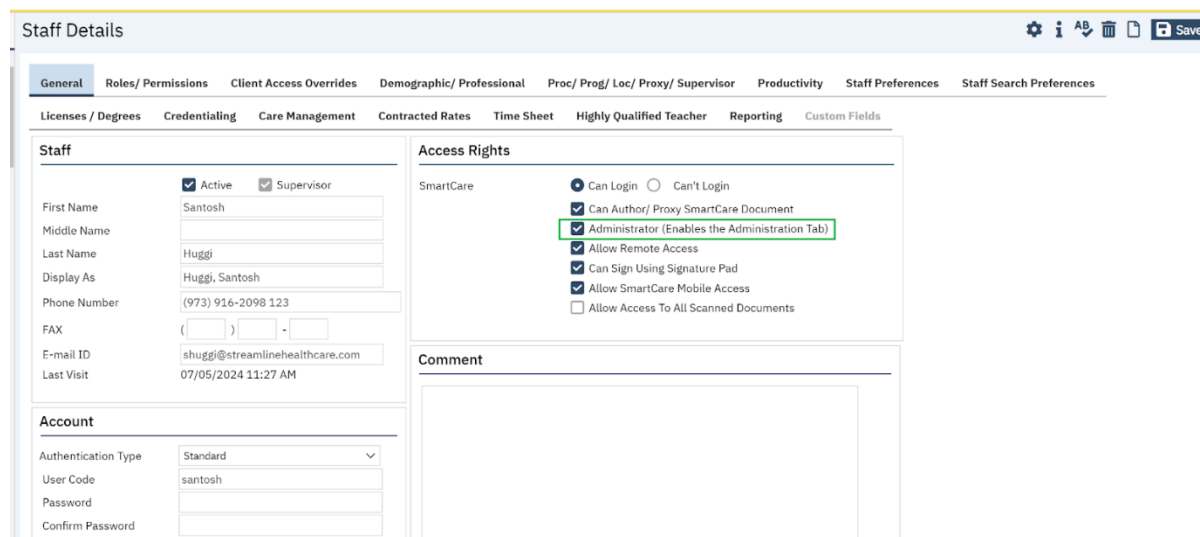
Author: Akshay Vishwanath

141. EII # 126687: Implementing 'External Identification' Tab in Client Information(C) screen and "External ID" search field on Client Search pop up.

Release Type: Change | **Priority:** On Fire

Prerequisite 1: To enable External ID field in client search popup.

Path: Go search - select the required staff - staff details - General Tab - Access rights section -- check the checkbox of 'Administrator (Enables the Administration Tab)' -Click on Save.



Navigation Path 1: 'Client' -- 'Client information (c)' -- "External Identification" tab.

Navigation Path 2: Login to SmartCare -- 'Client search popup'.

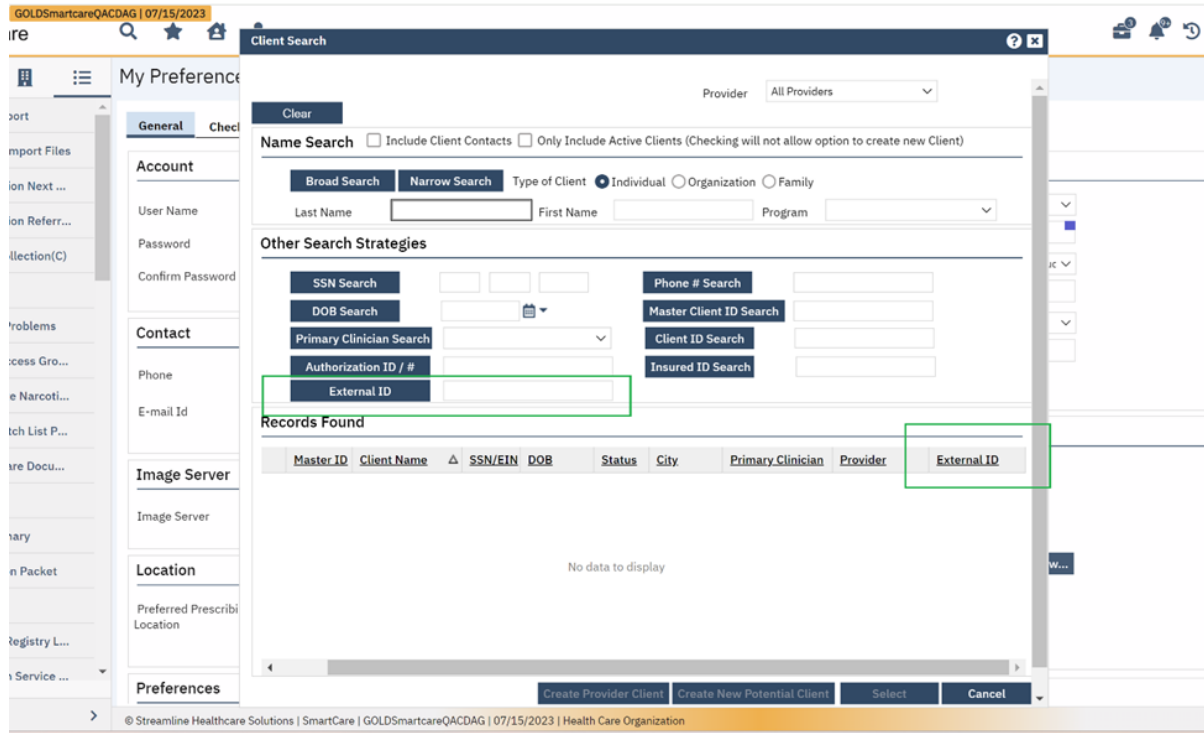
Functionality 'Before' and 'After' release:

Purpose: Ability to document a client's alphanumeric external ID and search on the field in Client Search.

Note: This task is previously released in May MSP, but this task had an issue which is fixed in this release.

Before this release, here was the behaviour. The "External ID" search field on Client Search pop up under the section "Other Search Strategies" was not displaying.

With this release, the "External ID" (Both External ID button and External ID column) is displaying Client search Popup as shown below:



- **"External ID" search field:** This is a Button with a TextBox.
- **Records Found grid:** A new column **External ID** has been added.
 - If a client has multiple external IDs, they will be displayed each separated by a comma and truncated.
 - When hovered over, all the external IDs will be displayed.

Author: Kiran Tigarimath

142. Core Bugs # 128547: List page: Popup issue on clicking 'Enable editing' in the exported file.

Release Type: Fix | **Priority:** Medium

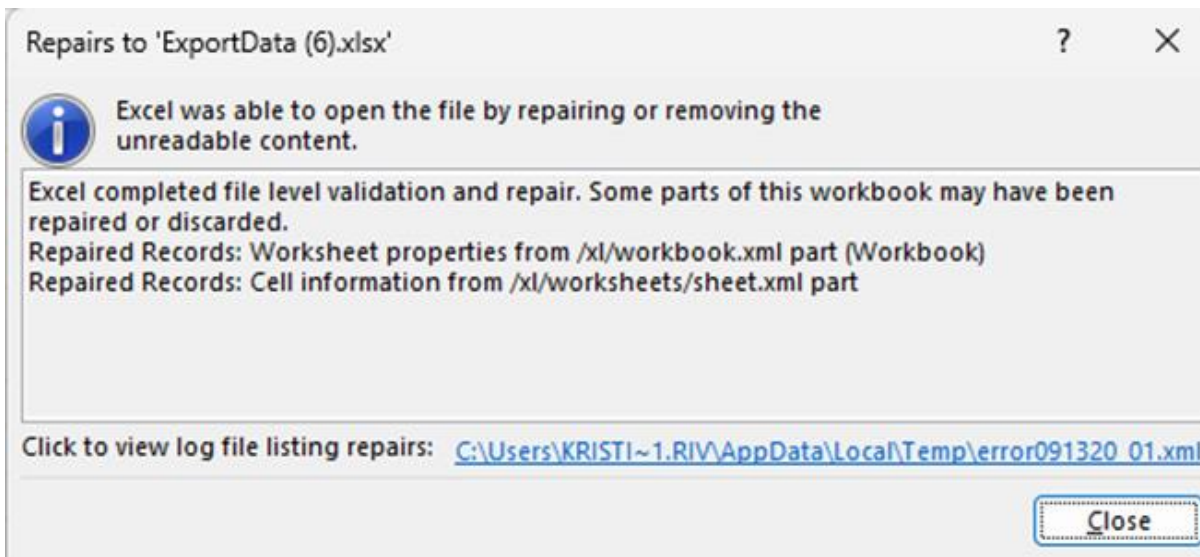
Prerequisite: Set the configuration key 'SetFileFormatForExport' to 'Xlsx' value using the following **path:** 'Administration' - 'Configuration Keys' - 'Configuration Key Details' Screen.

Release Type: Fix | **Priority:** High

Navigation Path: 'Login' - 'Navigate to list page having export button' (Eg: Inquiries, Payments and adjustments.)

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. The below-mentioned popup was displayed when user clicked on 'Enable editing' to open the exported file from any list page.



With this release, the above-mentioned issue is resolved. Now, the user is able to open the downloaded excel without any popup.

Smart View

Reference No	Task No	Description
143	Core Bugs # 128092	SmartView: The Primary Clinician and Primary Physician names are not displayed in the correct format.

Author: Akshay Vishwanath

143. Core Bugs # 128092: SmartView: The Primary Clinician and Primary Physician names are not displayed in the correct format.

Release Type: Fix | **Priority:** High

Navigation Path: Client' – 'Client Information(c)' – 'SmartView' icon- Client summary.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the SmartView popup, the Primary Clinician and Primary Physician names were displayed as Firstname, Lastname format.

With this release, the above-mentioned issue has been resolved. Now, the Primary Clinician and Primary Physician names are displayed as Lastname, Firstname format in SmartView Popup.

Staff Calendar

Reference No	Task No	Description
144	Core Bugs # 128363	Adding Typable search box for Staff field in Resource Calendar.
145	Core Bugs # 128349	The 'Staff' field is a dropdown field in the Staff Calendar.

Author: Aishwarya Bommaklar

144. Core Bugs # 128363: Adding Typable search box for Staff field in Resource Calendar.

Release Type: Fix | **Priority:** Medium

Prerequisite: 1. The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is used to change the dropdown fields as type-able search textbox.

A) When the key-value is set to "Yes", then staff drop-downs will display typeable search text boxes instead of a drop-down.

B) When the key-value is set to "No", then the staff drop down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behavior.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behavior, i.e., the same as the key value is "No".

Navigation Path: My Office -- Resource Calendar -- Select 'Click to Create New Resource Entry' -- 'Resource Scheduler Event' pop up.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. In the 'Resource Scheduler Event' pop up of Resource Calendar, the Staff field was a dropdown field. When there were a large number of staff records, the staff selection from the dropdown was causing performance issue.

With this release, the Staff drop down field is modified as a Typeable search text box when the configuration key 'DisplayStaffAsTypeableSearchTextBox' is set as 'Yes' in the Staff field in Resource Calendar.

Author: Aishwarya Bommaklar

145. Core Bugs # 128349: The 'Staff' field is a dropdown field in the Staff Calendar.

Release Type: Fix | **Priority:** Urgent

Prerequisite: 1. The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is used to change the dropdown fields as type-able search textbox.

A) When the key-value is set to "Yes", then staff drop-downs will display typeable search text boxes instead of a drop-down.

B) When the key-value is set to "No", then the staff drop down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behavior.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behavior, i.e., the same as the key value is "No".

Navigation Path: 'My Office' – 'Staff Calendar' – Select Single 'Staff View'.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. The 'Staff' field was a dropdown field in the Staff Calendar. When there were a large number of staff records, the staff selection from the dropdown was causing performance issue.

With this release, the above-mentioned issues have been resolved. Now, the 'Staff' Dropdown field has been modified as a 'Typeable search' textbox in the 'Staff' field under the 'Staff Calendar' screen, when the system configuration key 'DisplayStaffAsTypeableSearchTextBox' value set as 'Yes'.

Staff Target

Reference No	Task No	Description
146	Core Bugs # 128307	Staff Target Details: ApplyStaffAccessRule logic is added to the staff dropdown.

Author: Suganya Sivakumar

146. Core Bugs # 128307: Staff Target Details: ApplyStaffAccessRule logic is added to the staff dropdown.

Release Type: Fix | **Priority:** Urgent

Prerequisites: The Existing System Configuration Key 'ApplyStaffAccessRule' is used to apply the rule for 'StaffAccessRules' permission setup.

A) When the key-value is set to "No", the "StaffAccessRules" permission will not be applied. This will be the default value of the key as it drives the existing behaviour.

B) When the key-value is set to "Yes", the "StaffAccessRules" permission will be applied.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behaviour, i.e. same as the key value being "No".

Navigation Path 1: Administration- Staff/Users- Staff/Users List Page - Search for the Logged in Staff Name - Click on Staff Name Hyperlink- Staff Detail page - Navigate to Roles/Permissions tab - In Permissions section - Filter for Staff Access Rules -Grant Permission for "Limited Staff" OR "All Staff".

Navigation Path 2: Administration - Staff Targets- Staff Target List Page - Click on New Icon - Staff Target Detail page - In General section -Check for Values in Staff dropdown - Enter all required fields - Click on Save.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. In the Staff Target detail page, the staff dropdown displayed with all the staff names.

With this release, the above-mentioned issue has been resolved. Now, in the Staff Target detail page, the ApplyStaffAccessRule logic has been added to the Staff dropdown which displays the staff names based on the Configuration Key and the Staff permissions rules.

Staff/Users

Reference No	Task No	Description
147	EII # 128209	Implementation of a Typable Search box for Staff in the 'Staff Details' screen and 'Provider Staff Details' screen.

Author: Renuka Gunasekaran

147. EII # 128209: Implementation of a Typable Search box for Staff in the 'Staff Details' screen and 'Provider Staff Details' screen.

Release Type: Change | **Priority:** On Fire

Prerequisites:

The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is used to change the dropdown fields as typeable search textbox.

A) When the key-value is set to "Yes", then staff drop-downs will display typeable search text boxes instead of a drop-down.

B) When the key-value is set to "No", then the staff drop down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behaviour.

Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behaviour, i.e., the same as the key value is "No".

Navigation Path 1: 'Administration' – 'Staff/Users' – 'Staff Details' screen – 'Staff Preference' – 'Default Staff for Schedule Widget' – 'Staff' dropdown.

Navigation Path 2: 'My Office' – 'Provider Staff' – 'Provider Staff Details' – 'Staff Preference' – 'Default Staff for Schedule Widget' section – 'Staff' typeable textbox.

Navigation Path 3: 'Administration' – 'Configuration Keys' list page – 'Configuration Key Details' screen.

Navigation Path 4: 'Administration' – 'Staff/Users' list page – 'Staff Details' – 'Roles/ Permissions' – 'Permission' section – Select the Permission Type as 'StaffAccessRules' – click the 'Apply Filter' button.

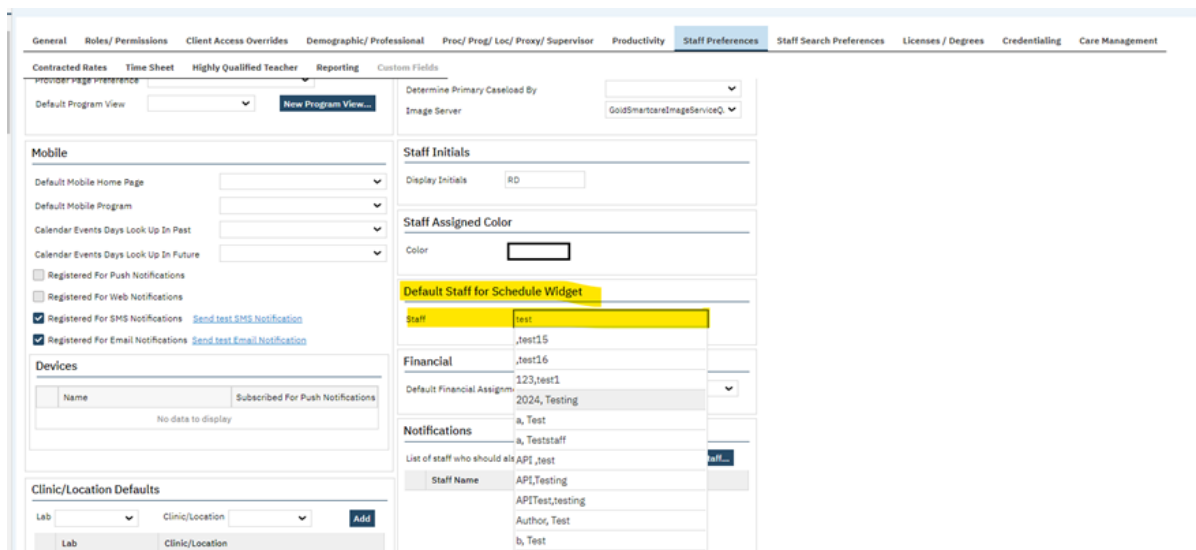
Functionality 'Before' and 'After' release:

Purpose: The staff dropdowns are not responsive because there were large number of active staffs in the environment. So, the staff drop-downs are modified to typeable search text boxes with a system configuration key to improve the system performance.

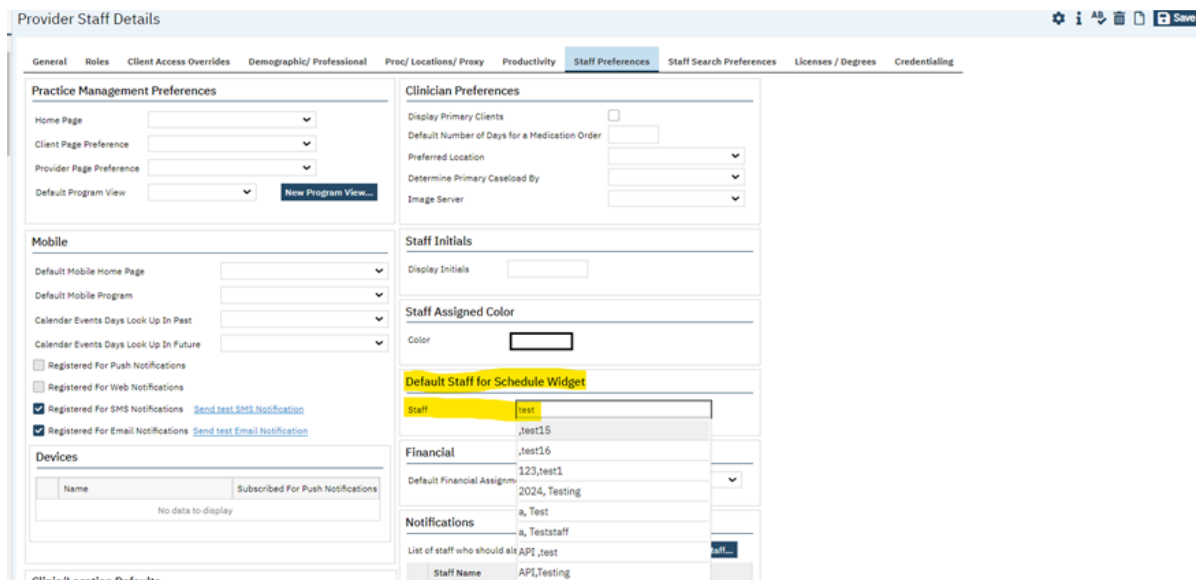
With this release, when the System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is set to 'Yes', the 'Staff' dropdown field is changed to the 'Typeable Search textbox' in the 'Default Staff for Schedule Widget' section of the 'Staff Preference' tab for the 'Staff Details' screen and the 'Provider Staff Details' screen.

When the user searches with any staff name under the Staff 'Typeable Search textbox', a typeable search textbox displays the list of staff names in the typeable search text staff field for the 'Staff Details' screen and the 'Provider Staff Details' screen.

Staff Details screen:



Provider Staff Details screen:



The below-mentioned permission type is applied to display the values in the typeable search text staff fields for the 'Staff Details' screen and the 'Provider Staff Details' screen.

Permission Type: StaffAccessRules

Permission Item:

1. AllStaff

2. LimitedStaff

- a) If the logged in staff has "LimitedStaff" Access Rule, then the typeable search textbox displays the staff who is associated with any of the Program that the logged in staff is also associated with.
- b) If the logged in staff has "AllStaff" Access Rule, then it will display all the staff in the typeable search textbox.
- c) If the logged in staff has both "LimitedStaff" and "AllStaff" Access Rule, then "AllStaff" takes Precedence.

Treatment Team

Reference No	Task No	Description
148	Core Bugs # 128328	Treatment Team List page taking more time to load the data.

Author: Akshay Vishwanath

148. Core Bugs # 128328: Treatment Team List page taking more time to load the data.

Release Type: Fix | **Priority:** Medium

Navigation Path: Go Search – Treatment Team – Treatment Team List page.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. Treatment Team List page was taking long time to load the data.

With this release, the above mentioned issue has been fixed. Now, when the user clicked on Treatment Team, Treatment Team list page is loading the data without any performance issues.

Whiteboard

Reference No	Task No	Description
149	Core Bugs # 128364	Whiteboard is not accessible.
150	EII # 128146	Whiteboard: To update Whiteboard Flowsheets to include program tag for CDAG.
151	EII # 126729	Whiteboard: Add Client ID to Whiteboard screen.

Author: Abhishek Naik

149. Core Bugs # 128364: Whiteboard is not accessible.

Release Type: Fix | **Priority:** Medium

Navigation Path: Go search - Whiteboard (MyOffice).

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When the user attempted to open the whiteboard screen, the below red error message was displayed.

Error: "Object reference not set to an instance of an object."

With this release, the above mentioned issue has been resolved. Now, the user can open the Whiteboard screen without any error message.

Author: Shivakanth Moger

150. EII # 128146: Whiteboard: To update Whiteboard Flowsheets to include program tag for CDAG.

Note: This functionality is implemented for a specific customer. If you have Primary and County type of setup and would like to use these functionalities, please get in touch with Streamline Support.

Release Type: Change | **Priority:** Urgent

Prerequisites:

1. The system configuration key 'DisplayCDAGSectionInStaffDetails' value is set to 'Yes'.
2. The system configuration key 'EnableClinicalDataAccessGrouping' value is set to 'Yes'.

3. A signed Safety Check type orders exists through the **path:**

Login to 'SmartCare' – select any client – 'Client Orders' – 'Client Orders' list page – New – 'Client Order' screen – search for any 'Safety Checks' order and sign the order.

Navigation Path: Go Search -- 'Whiteboard' – 'Whiteboard' screen – click on any time hyperlink text to the 'Next Check' column – 'Flow Sheet Detail popup' screen – add/modify some data and click on 'Save & Close' button – Login to the database check the 'ClientHealthDataAttributes' table.

Functionality 'Before' and 'After' release:

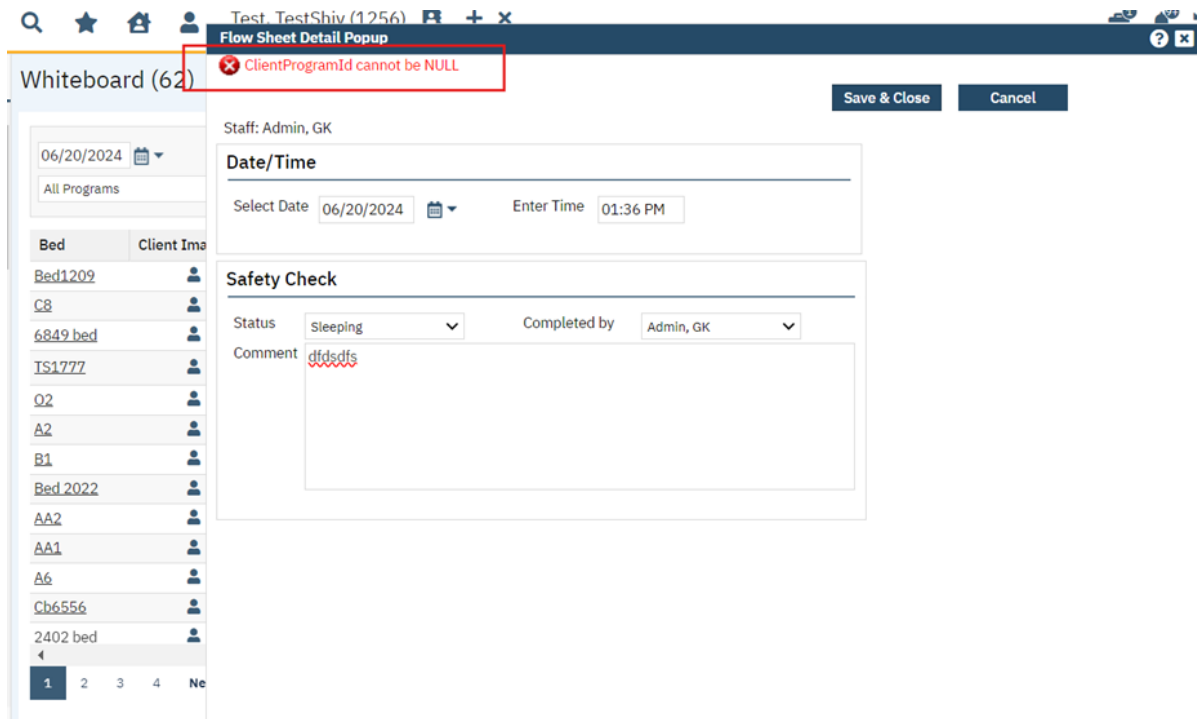
Purpose: SmartCare will tag the flowsheets created on the whiteboard with the program associated to the bed in the row, where the flowsheet was created. Therefore, it will have a program tagged and will follow CDAG rules for availability to be seen.

With this release, a logic is implemented to associate the programs while creating a flowsheet through the Whiteboard, regardless of what type of flowsheet the user selects while adding the details.

In the CDAG-enabled environment, in the Whiteboard screen, when the user clicks on any time hyperlink text in the 'Next Check' column and the user adds/modify something in the 'Flow Sheet Detail popup' screen and clicks on 'Save & Close' button, the programs which is added in the bed for the client will be added to the ProgramId and ClientProgramId column to the ClientHealthDataAttributes table.

If there is an issue with tagging the program to the flowsheet, the system will not allow the user to save the flowsheet and the below-mentioned warning message will be displayed.

Warning message: ClientProgramId cannot be NULL



Author: Shivakanth Moger

151. EII # 126729: Whiteboard: Add Client ID to Whiteboard screen.

Release Type: Change | **Priority:** Urgent

Navigation Path: Login to 'SmartCare' – 'Whiteboard' quick link – 'Whiteboard' screen.

Functionality 'Before' and 'After' Release:

Purpose: The customers can easily track Clients by Client ID in Whiteboard. This will ensure that they are referring the correct Client with the help of IDs.

With this release, the below-mentioned changes have been implemented in the Whiteboard screen:

1. **Client Search** button: On Clicking this button Client Search pop-up will open and allow the user to select the Client.
2. **Client Search (Placeholder):** This is the Typeable Searchable textbox that allows the Client to search using Client Name and ID.
3. **Erase** icon: The user can clear the **Client Search (Placeholder)** textbox.
4. **Client ID** label: The new Client ID column will be next to the Client Column.
5. The Client Name column is renamed to **Client**.

Whiteboard (115)

06/28/2024 All Units All Attending All D&A All Beds Apply Filter

All Programs Client... Client

Bed	Client Image	Client	Client ID	Next Check	Last Check
snam789		Test, Nam789	6597		
ssp bed					
Suman 123		Test, Lucy	1134		
T1777		AAA	1312		
Test 125030		Test, 125030	4490		
Test Bed		Test, 3609	1051		
Test' Be'd					
TEST Bed n...		Test, Flowsheet	1149		
test bed002			6373		
test bed003		Nathan, Senthil	6636		
test bes001					
Test Bk Bed		Amru, Fee	4369		
test15					

6. **Client ID** new column is added to the "New Column Configuration" option to the list page.

View Settings

Save Close

TestShiv Test

View Name ☐ Active ☐ Default ☐ Permission

Show Column	Column Name	Order	Width	Fixed	Export
<input checked="" type="checkbox"/> (Show)	Bed (Bed)	10	(10) 75 (75)	<input checked="" type="checkbox"/> (Fixed)	<input checked="" type="checkbox"/> (Export)
<input checked="" type="checkbox"/> (Show)	Client Image (Client Image)	15	(15) 100 (100)	<input checked="" type="checkbox"/> (Fixed)	<input type="checkbox"/> (Not Export)
<input checked="" type="checkbox"/> (Show)	Client (Client)	20	(20) 150 (150)	<input checked="" type="checkbox"/> (Fixed)	<input checked="" type="checkbox"/> (Export)
<input checked="" type="checkbox"/> (Show)	Client ID (Client ID)	25	(25) 70 (70)	<input checked="" type="checkbox"/> (Fixed)	<input checked="" type="checkbox"/> (Export)
<input type="checkbox"/> (Hide)	Chosen Name (Chosen Name)	30	(30) 120 (120)	<input checked="" type="checkbox"/> (Fixed)	<input type="checkbox"/> (Not Export)
<input checked="" type="checkbox"/> (Show)	Legal Status (Legal Status)	40	(40) 100 (100)	<input checked="" type="checkbox"/> (Fixed)	<input checked="" type="checkbox"/> (Export)
<input type="checkbox"/> (Hide)	Legal Status (Legal Status)	50	(50) 80 (80)	<input checked="" type="checkbox"/> (Fixed)	<input checked="" type="checkbox"/> (Export)
<input checked="" type="checkbox"/> (Show)	UO (UO)	60	(60) 50 (50)	<input type="checkbox"/> (Not Fixed)	<input checked="" type="checkbox"/> (Export)
<input checked="" type="checkbox"/> (Show)	MAR (MAR)	70	(70) 150 (150)	<input type="checkbox"/> (Not Fixed)	<input checked="" type="checkbox"/> (Export)
<input checked="" type="checkbox"/> (Show)	Level (Level)	80	(80) 150 (150)	<input type="checkbox"/> (Not Fixed)	<input checked="" type="checkbox"/> (Export)
<input checked="" type="checkbox"/> (Show)	Observations (Observations)	90	(90) 250 (250)	<input type="checkbox"/> (Not Fixed)	<input checked="" type="checkbox"/> (Export)

Insert Clear

View List

Widgets

Reference No	Task No	Description
152	EII # 128210	Typable Search box for Staff in Contact/Flags/RWQM widget
153	Core Bugs # 128156	Duplicate widgets were displayed in the Dashboard.
154	Core Bugs # 128229	Dashboard: 'Organization Primary Caseload' widget shows inactive staff.
155	Core Bugs # 128450	Custom Widget (DLA20-Youth) Error Message on Client Dashboard.

Author: Girish Jayanna

152. EII # 128210: Typable Search box for Staff in Contact/Flags/RWQM widget.

Release Type: Change | **Priority:** On Fire

Navigation Path 1: 'Administration- 'Configuration Keys' list page -'Configuration Key Details' screen.

Navigation Path 2: 'My Office' -- 'Dashboard'

Prerequisites: The Existing System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is used to change the dropdown fields as typeable search textbox.

A) When the key-value is set to "Yes", then staff drop-downs will display typeable search text boxes instead of a drop-down.

B) When the key-value is set to "No", then the staff drop down will be displayed as a drop-down. This will be the default value of the key, as it drives the existing behavior.

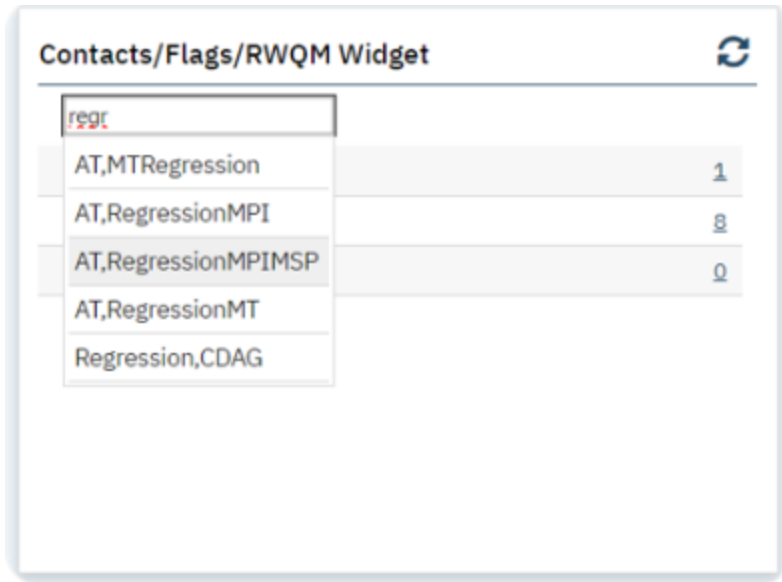
Note: If by chance the value of the key is updated with any value apart from the allowed values, the system will consider the default behavior, i.e., the same as the key value is "No".

Functionality 'Before' and 'After' release:

Purpose: The staff dropdowns are not responsive because there were large number of active staffs in the environment. So, the staff drop-downs are modified to typeable search text boxes with a system configuration key to improve the system performance.

Before this release, here was the behaviour. The Contact/Flags/RWQM widget had a dropdown for searching the staff. This listed with all the staff and if the system had a large number of qualifying staff values, then it was causing the page to freeze while selecting the dropdown values.

With this release, Now, when System Configuration Key 'DisplayStaffAsTypeableSearchTextBox' is set to 'Yes', the above-mentioned dropdown fields will be displayed as Typeable search textboxes.



Author: Prabhavati Bhangre

153. Core Bugs # 128156: Duplicate widgets were displayed in the Dashboard.

Release Type: Fix | **Priority:** Medium

Navigation Path: Login – Dashboard - New Alerts/Messages Widget.

Functionality 'Before' and 'After' release:

Before this release, here was the behavior. There were two widgets in the Dashboard with the same name 'New Alerts/Messages' and 'New Alert/Messages'.

With this release, the above mentioned issue has been resolved. Now, both widgets column has been updated in one Widget that is 'New Alerts/Messages' and 'New Alert/Messages' Widget has been removed.

Author: Niroop Hassan

154. Core Bugs # 128229: Dashboard: 'Organization Primary Caseload' widget shows inactive staff.

Release Type: Fix | **Priority:** High

Navigation Path: 'My Office' -- 'Dashboard' -- 'Organization Primary Caseload' widget.

Functionality 'Before' and 'After' Release:

Before this release, here was the behaviour. The 'Organization Primary Caseload' widget was showing Inactive Staff data.

With this release, the above-mentioned issue has been resolved. Now, the Inactive Staff data is not shown in the 'Organization Primary Caseload' widget.

Author: Sunil Belagali

155. Core Bugs # 128450: Custom Widget (DLA20-Youth) Error Message on Client Dashboard.

Release Type: Fix | **Priority:** Medium

Navigation Path 1: Login to SmartCare application – Client – 'DLA20-Youth' document – Sign.

Navigation Path 2: Navigate to Client Dashboard - "DLA20-Youth" widget.

Functionality 'Before' and 'After' release:

Before this release, here was the behaviour. When the user signed a 'DLA20-Youth' document for a client and navigated to Client Dashboard, "DLA20-Youth" widget was not displaying the Graphs. Instead, the respective Widget was displaying the error message.

Error message: "Error while loading Widget."

With this release, the above mentioned issue has been resolved. Now, when the user signs a 'DLA20-Youth' document for a client and navigates to Client Dashboard, "DLA20-Youth" widget is displaying the Graphs without any error message.

Glossary of System Configuration Keys, Global Codes, Recodes, Data Model Changes.

System Configuration Keys

[6. DisplayStaffAsTypeableSearchTextBox](#)

[12. DisplayCDAGSectionInStaffDetails](#)

[12. EnableClinicalDataAccessGrouping](#)

[28. DisplayStaffAsTypeableSearchTextBox](#)

[34. DisplayStaffAsTypeableSearchTextBox](#)

[34. ApplyStaffAccessRule](#)

[37. DisplayStaffAsTypeableSearchTextBox](#)

[40. ApplyStaffAccessRule](#)

[46. HRSNSupplementalQs](#)

[48. DisplayStaffAsTypeableSearchTextBox](#)

[59. DisplayStaffAsTypeableSearchTextBox](#)

[59. ApplyStaffAccessRule](#)

[75. DisplayStaffAsTypeableSearchTextBox](#)

[84. DisplayCDAGSectionInStaffDetails](#)

[84. EnableClinicalDataAccessGrouping](#)

[89. DisplayCDAGSectionInStaffDetails](#)

[89. EnableClinicalDataAccessGrouping](#)

[97. CREATE835PAYMENTSBYPAYER](#)

[97. 835PostPLBToRefunds](#)

[105. DisplayStaffAsTypeableSearchTextBox](#)

[107. DisplayStaffAsTypeableSearchTextBox](#)

[117. DisplayStaffAsTypeableSearchTextBox](#)

[133. CalculateCaseRateMonthlyDateOfService](#)

[139. ShowSNOMEDCodeAndDescriptionOnScreensAndPDFs](#)

[140. LoginAttemptCount](#)

[142. SetFileFormatForExport](#)

[144. DisplayStaffAsTypeableSearchTextBox](#)

[145. DisplayStaffAsTypeableSearchTextBox](#)

[146. ApplyStaffAccessRule](#)

[147. DisplayStaffAsTypeableSearchTextBox](#)

[150. EnableClinicalDataAccessGrouping](#)

[150. DisplayCDAGSectionInStaffDetails](#)

[152. DisplayStaffAsTypeableSearchTextBox](#)

[156. SetSAMLSSOUrl](#)

Global Codes

[19. CLAIMFORMATTYPE](#)

[21. REFERRINGCLINICIAN](#)

[46. HRSNLS1](#)

[46. HRSNFood](#)

[46. HRSNTransport1](#)

[46. HRSNUtilities1](#)

[46. HRSNSafety](#)

[46. HRSNFinancial](#)

[46. HRSNEmployment](#)

[46. HRSNSupport1](#)
[46. HRSNSupport2](#)
[46. HRSNEducation](#)
[46. HRSNPhysical1](#)
[46. HRSNPhysical2](#)
[46. HRSNSubUse](#)
[46. HRSNMentalHealth1](#)
[46. HRSNDisabilities](#)
[73. ProviderOrAgency](#)
[79. FCDisruptionTypes](#)
[100. INSTVALUECODE](#)
[100. InstValueCodeAmtType](#)
[106. REFERRINGCLINICIAN](#)

Recodes

[65. SetDefaultFlowsheetTemplates](#)
[87. AddDocumentsToTimelinessAndTimelinessWithDetailReports](#)
[88. UDSFQHCBMIEDUCATION](#)
[88. UDSFQHCEExerciseOrPhysicalActivityCounseling](#)
[88. UDSFQHCNutritionCounseling](#)
[88. UDSFQHCBMIReferral](#)
[88. UDSFQHCDietarySupplements](#)
[88. UDSFQHCPharmacologicalIntervention](#)
[112. MEDCONSENTDOCUMENT](#)

Data Model Changes

[14. A new column 'ProcedureRateID' is added in the 'ValueCodesByRevenueCodes' table.](#)
[26. Index included to the missing columns in 'ClientNotes' table and 'ClientNoteAssignedRoles' table.](#)
[32. New column DispensedDateTime is added to MedAdminRecords table](#)
[32. New column DispensedDateTime is added to MATRedispenseDetails table.](#)
[35. Index is added in ClientType, OrganizationName columns in the Clients table.](#)
[35. Index is added in AddressType column in the ClientAddresses table.](#)
[35. Index is added in AllowSearch column in the ClientAliases table.](#)

- [43. 'CreateInProgressVersionStaffDeclinesToCoSign' column and 'CreateInProgressVersionClientGuardianDeclinesToCoSign' column included in 'DocumentCodes' table](#)
- [44. SessionStartDate - Altered the data type from DateTime to Date and Changed Column Name from SessionStartDateTime to SessionStartDate in DocumentEncounterForms table](#)
- [44. SessionEndDate - Altered the data type from DateTime to Date and Changed Column Name from SessionEndDateTime to SessionEndDate in DocumentEncounterForms table](#)
- [44. column SessionStartTime is dropped if it exists in DocumentEncounterForms table](#)
- [44. column SessionEndTime is dropped if it exists in DocumentEncounterForms table](#)
- [46. Added DocumentHealthRelatedSocialNeedCoreQuestions, DocumentHealthRelatedSocialNeedSupplementalQuestions tables.](#)
- [47. Created 'DocumentCSSRSRiskAssessmentLifelineCrisisCenters' table and DocumentCSSRSRiskAssessmentLifelineCrisisCenterGenerals table.](#)
- [51. Created new 'DocumentEatingDisorderExaminations' table](#)
- [54. Added AIDSServicePreExposureProphylaxis, AIDSServicePostExposureProphylaxis and LivingConditionDetailed columns to the existing core table DocumentGovernmentPerformanceGenerals](#)
- [55. 'ClientProgramId' column included in 'DocumentGoalPlanActivityPrograms' table](#)
- [57. Created new 'DocumentObsessionalCompulsiveInventories' table](#)
- [63. 'RemarkCode' and 'AdjustmentPriority' columns included in ERProcessingTemplateRules table](#)
- [65. Created "StaffHealthDataTemplateFavorites" table.](#)
- [79. 'DisruptionType' column included in 'ClientLifeEventDetails' table](#)
- [86. Added a new column EntryType to the table GLExtractUnappliedPayments.](#)
- [93. Data Model Changes: Non clustered Index is included in ' ExternalAppointmentArchive ' table 'AppointmentId' column.](#)
- [99. New Columns 'DateOfServiceFrom' and 'DateOfServiceTo' are added in table 'CoveragePlanClaimFormats'.](#)
- [100. 'ValueCodeTemplate' and 'UseValueCodeTemplateId' columns included in 'CoveragePlans' Table.](#)
- [103. A new column 'InitialCrisisService' is added in the 'ProcedureCodes' table.](#)
- [106. 'ClaimDoNotSendAdmissionDischargeDateTime' and 'ClaimReferringProvider' columns included in 'Programs' table.](#)
- [125. Created a new "CaseRates" Table.](#)
- [125. Created a new "CaseRateSetup" table.](#)
- [125. Created a new "CaseRateSetupProcedureCodes" table.](#)
- [125. Created a new "CaseRateSetupPrograms" table.](#)
- [125. Created a new "CaseRateSetupLocations" table.](#)
- [125. Created a new "CaseRateSetupModeOfDeliveries" table.](#)
- [131. Added CrisisFirstContactDateTime column in services table](#)