

LTC Features Version 2 Update Notes September 29, 2016

Technical Installation Information

This version should be installed after the installation of LTC General Release Version 16.07.12 Read all release notes and instructions before beginning any installation or upgrade. A complete release note library is available at the American HealthTech website: <u>http://myhealthtech.net/whatsnew.php</u>

Please ensure you are running the most current version of CorePoint, *LTCCorePointInstall_16.07.12.exe*. If you find you are running an older version, please download the current version from MyHealthTech Technical Center at: <u>http://myhealthtech.net/downloads.php</u>. The CorePoint version must be compatible with the LTC Software version and the updates must be run together to keep both programs in sync and functioning properly.

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LTC Features Version 2 Update

Smart Charting

Data Collection History Report/ADL Flowsheet-

Documented Smart Charting information (for example ADL's, Behaviors, etc) in Scheduled/Unscheduled Care that is documented within one minute apart is now pulling to the Data Collection History report and ADL Flowsheet.

ADL Flowsheet Creation-

The ADL Flowsheet is now printing without receiving the following error message, '>=FromPage out of range'. Also, the report is displayed successfully when preview is selected.

Clinical

MDS Discharge Assessment-

Discharge Assessments, coded as Death in Facility (A0310F equals 12), are creating successfully without receiving the following 2 error messages, 'CAT Worksheet population failed for this assessment' and 'These columns don't currently have unique values', during assessment creation.

Billing

Case Mix Rates Setup-

The system will now make the necessary calculations for each state's Medicare rates based upon the selection of Rural or Urban Case Mix type in AR Type Rates setup. The implemented feature alleviates the manual entry process preventing data keying errors.*

*If your organization has already imported the new Part A CMG Rates that go into effect on October 1st, 2016, the associated CMG tables should be deleted and then added back to the system following the installation of the LTC Features Version 2 Update.

Case Mix Rates Setup, RUGS Type-

The RUGs Type, Medicare, is no longer saving for all newly created Case Mix Tables when the RUG Type selection is State, RUGS or Other.*

*If a non-Medicare CMG table has been added after the installation of LTC General Release Version 16.07.12, the CMG table should be deleted and then added back to the system following

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the installation of the LTC Features Version 2 Update. The following additional action is required to recalculate resident's charges:

- Run Calculate Billing to correct the resident's current month charges.
- Select resident in Prior Month Adjustments for applicable month to correct prior month charges.

Diagnosis B20 RUG Rates Calculations-

With LTC General Release Version 16.07.12, manual entry of Medicare rates was no longer needed for some rates. With proper setup, the LTC system made calculations for each state's Medicare rates based upon the selection of Rural or Urban Case Mix type in Case Mix Rates setup. This feature alleviated the manual entry process and prevented data keying errors for rates included. Diagnosis B20 RUG rates were not yet included in this enhancement. With the installation of this Update, Diagnosis B20 RUG rates are now included in this enhancement. The following actions must be taken to utilize this feature.

- If you have already created a CMG table for Fiscal Year 2017 and you need the Diagnosis B20 RUG rates calculation, delete the existing FY2017 table. Upon addition of a new table the Diagnosis B20 RUG rates will be included.
- If you have not yet created a CMG table for Fiscal Year 2017, upon creation of this new table LTC will automatically calculate the Diagnosis B20 RUG rates (even if the facility did not have Diagnosis B20 RUG rates previously).

Pharmacy

LTC will provide a warning message window to the user if a substitution message is processed within the E-Link Orders queue that does not appear to be related to the original order based upon the NDC numbers.

Interoperability

Interoperability Framework users now have the ability to send Admit, Update, Bed Hold, and Discharge ADT messages for Outpatients.