InSync® PM (Practice Management) and EMR (Electronic Medical Record)

Proprietary Notice Information

These notes provide information about new features to be delivered with the upcoming upgrade release for your application. This document is provided for informational purposes only, and the information herein is subject to change without notice. This document also does not guarantee the delivery of these new features in anyway whatsoever. While every effort has been made to ensure that the information contained within this document and the features and changes described are accurate. IHCS cannot and does not accept any type of liability for errors in, or omissions arising from the use of this information.

Any questions regarding the release notes should be addressed to support@insynchs.com or call 877-346-7962 for customer service.
# InSync Product Release Notes — v.8.6.3

## Table of Contents

**Charting** ........................................................................................................................................ 4

- Facilitated Configuring “Drug Administration” (Treatment Plan) ...................................................... 4
  - Configuring Drug Administration ........................................................................................................... 4
  - Providing Access to Drug Administration Section .................................................................................. 5

- Enhanced Immunizations for Mapping Multiple CPTs with Single Vaccine ........................................ 5
  - Picking Up Appropriate CPT in Adult/Pediatric Immunization ............................................................... 5
  - Showing Multiple CPTs with Single Vaccine in Pediatric Immunizations Configuration .................. 6
  - Removed CPT Column from Adult Immunization – Configuration Section ............................................ 7

**Other Changes in Charting** .............................................................................................................. 8

- SOAP Note Related Changes ..................................................................................................................... 8
- Calculating Encounter Start/End Date/Time Based on Visit Date and Visit Type Duration ................... 8
- Allowed Alphanumeric and Special Characters in Practice Name ........................................................ 9
- Added Alternate Name for the Patient ........................................................................................................ 9

**Billing** .............................................................................................................................................. 10

- Enhanced Daily Payments Report ........................................................................................................... 10
- Using CPT Fee Schedule (Close Match / Perfect Match) ......................................................................... 10
- Downloading Batch Eligibility Report ..................................................................................................... 11
- Introduced A/R Variance Report ................................................................................................................ 11

**General** ............................................................................................................................................ 13

- Showing Exact Diagnosis Code on SOAP Note ....................................................................................... 13
CHARTING

This section includes changes done in the Charting section.

FACILITATED CONFIGURING “DRUG ADMINISTRATION” (TREATMENT PLAN)

In Treatment Plan, the Drug Administered section allows you to record drug details for the patient. Previously you could simply record the drugs to save them in Treatment Plan, there was no separate section to configure the whole list of drugs.

CONFIGURING DRUG ADMINISTRATION

You can configure all the necessary drug details from the Administration > EMR > Drug Administered section and they populate in Treatment Plan whenever you want to record them. When configuring drug details, you can also associate CPT with the drug. When the drug is administered to the patient from Treatment Plan, the associated CPT code is exported to New Charge screen to be used for that patient. To configure the Drug Administration section, from the left menu items, select Administration > EMR > Drug Administered.

Figure 1: Configuring Drug Administration Section

![Image of Drug Administration Configuration]

<table>
<thead>
<tr>
<th>Drug Name</th>
<th>CPT Code</th>
<th>Dosage</th>
<th>Quantity</th>
<th>Drug Route</th>
<th>Site Given</th>
<th>Lot Number</th>
<th>Expiry Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>00124</td>
<td>10 ML</td>
<td>1.00</td>
<td>Oral</td>
<td>Arm, Left</td>
<td>12/14/2016</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td>02124</td>
<td>10 ML</td>
<td>1.00</td>
<td>Oral</td>
<td>Arm, Right</td>
<td>12/14/2016</td>
<td></td>
</tr>
<tr>
<td>C</td>
<td>00145</td>
<td>10 ML</td>
<td>1.00</td>
<td>Oral</td>
<td>Arm, Right</td>
<td>12/14/2016</td>
<td></td>
</tr>
<tr>
<td>D</td>
<td>00151</td>
<td>11 ML</td>
<td>1.00</td>
<td>Intramuscle</td>
<td>Arm, Right</td>
<td>12/14/2016</td>
<td></td>
</tr>
<tr>
<td>E</td>
<td>01234</td>
<td>1 ml</td>
<td>5.00 gm</td>
<td>Intravenous</td>
<td>Thigh, Left</td>
<td>12/14/2016</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>0234</td>
<td>1 ml</td>
<td>1 mL</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G</td>
<td>0345</td>
<td>1 ml</td>
<td>2 mL</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>H</td>
<td>0456</td>
<td>1 ml</td>
<td>3 mL</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Providing Access to Drug Administration Section

The user must have access to configure the drug details in the system. In Administration > Security > Roles & Permissions section, a new function “Drug Administered Configuration” is added in the Configuration section.

Figure 2: Providing Access for Drug Administration

Enhanced Immunizations for Mapping Multiple CPTs with Single Vaccine

The Immunizations section is now enhanced for mapping multiple CPTs with the single vaccine. As per CDC guidelines, single vaccination can have multiple CPTs associated with it. When you administer vaccine from Pediatric or Immunization section, the system retrieves a list of associated CPTs with that vaccine (based on the age range) from the CDC website. You can choose appropriate CPT from the list. If there is only single CPT associated the vaccine, the CPT field shows that CPT code and remain disabled on the screen. The CPT used when administering vaccine is used while creating a charge in the system.

Picking Up Appropriate CPT in Adult/Pediatric Immunization

When you administer vaccine from the Adult Immunizations section, you can locate the CPT drop down below beneath the Time field. If the vaccine you are trying to administer, has multiple CPT codes associated with it, the CPT drop down will display all such CPT codes. You can choose the one you want. If only one CPT code is associated with that vaccine, then drop down will remain in disabled mode with the selection of that CPT.

Note: Similarly when administering vaccines in Pediatric Immunizations, you can pick up appropriate CPT from the drop down list.
To administer appropriate CPT when administering vaccine (Adult/Pediatric):

1. From the top menu bar, click Facesheet.
2. Select pediatric or adult patient.
3. Access Immunization section in charting.
4. Administer the dose.
5. Locate the CPT drop down showing multiple CPTs for the selected vaccine.

**Figure 3: Picking Up Appropriate CPT in Adult/Pediatric Immunization**

![Immunization screenshot](image)

**SHOWING MULTIPLE CPTS WITH SINGLE VACCINE IN PEDIATRIC IMMUNIZATIONS CONFIGURATION**

In the Pediatric Immunization – Configuration section, you can view an additional column listing the CPT codes associated with the vaccine. Upon clicking the Edit icon, you can view the Information icon next to the CPT field. The Information icon shows up all the CPT codes associated with the vaccine based on the age range.

**To view multiple CPTs with single vaccine in Pediatric Immunizations:**

1. From the left menu items, select Administration > EMR > Immunization.
2. The Immunization Configuration screen appears.
3. In the Pediatric tab, click the Edit icon.
4. Locate the Information icon next to CPT field. A popup appears showing all associated CPT codes with the vaccine.
In the Immunization Configuration section for adult patients, previously the CPT column was displayed. The CPT column is now removed as there will be only single CPT associated with the single vaccine for the adult patients. From the left menu items, select Administration > EMR > Immunization section and then select the Adult tab. Locate that the CPT column is now removed.

**Figure 4:** Showing Multiple CPTs with Single Vaccine in Pediatric Immunizations Configuration

**Figure 5:** Removed CPT Column from Adult Configuration Section
OTHER CHANGES IN CHARTING

This section includes other changes done in the Charting section.

SOAP NOTE RELATED CHANGES

There are few changes made in the SOAP Note Configuration section.

- If the default SOAP note is configured at practice level, however if another SOAP note is configured at provider level, then system will consider provider level SOAP not configuration when printing SOAP note of that particular provider.
- If 2 SOAP notes are configured for the same provider (but for different facilities), then system will check for the facility selected in encounter at the time of printing SOAP note.
- System will now restrict configuring multiple SOAP notes for same provider and facility.
- When the SOAP note is configured but template configuration is not done, then the system will consider hard coded template configuration for the look and feel of the SOAP note.
- From the Delimited and Report options, Report option is now removed.

CALCULATING ENCOUNTER START/END DATE/TIME BASED ON VISIT DATE AND VISIT TYPE DURATION

When you start encounter from the scheduler, the Start Date/Time and End Date/Time is automatically calculated based on the Visit Date/Time and Visit Type Duration.

*Figure 6: Calculating Encounter Start and End Date Based on Visit Date and Time*
ALLOWED ALPHANUMERIC AND SPECIAL CHARACTERS IN PRACTICE NAME

System allows you to update practice name from the Practice Defaults section. System now allows you to use alphanumeric and special characters when updating practice name. Following special characters are allowed in the practice name: . , # ' ( ) [ ] &

Figure 7: Using Alphanumeric and Special Characters in Practice Name

ADDED ALTERNATE NAME FOR THE PATIENT

When you add patient details in the system, now you can also add patient’s alternate name, if required. A new field “Alternate Name” is added below the Last Name field. You can also add alternate name when adding patient from the Quick Patient Registration screen. Patient Portal users can also find this field in the My Profile section. When searching patient from the Discrete Search section, you can search patient based on the alternate name.

Figure 8: Adding Alternate Name for the Patient
BILLING

This section includes changes done in the Billing section.

ENHANCED DAILY PAYMENTS REPORT

When generating Daily Payments Report, you can now generate it for a specific patient, if required. Also, the Payment Mode drop down is added to filter the report based on payment modes (cash, check, credit card, and so forth). From the left menu items, select Reports > Reconciliation Report > Daily Payments.

![Figure 9: New Fields on Daily Payments Report](image)

USING CPT FEE SCHEDULE (CLOSE MATCH / PERFECT MATCH)

InSync allows you using CPT Fee Schedule in 2 ways: Based on “Close Match” and “Perfect Match”

Consider a scenario where CPT fee schedule is configured for a combination of CPT and Modifier, example, $50 is configured for a combination of CPT 25000 and Modifier 51.

**Close Match**: When you enter CPT 25000 in New Charge, or a combination of CPT 25000 and Modifier 73, system still brings $50 from the fee schedule, as an entered CPT is the closest match with the configured list (though modifier is not matching.)

**Perfect Match**: When you enter CPT 25000 in New Charge, or a combination of CPT 25000 and Modifier 73, system will not bring $50 from the fee schedule, as an entered CPT is the perfect match with the configured list. $50 will be brought up from fee scheduler only when you enter a combination of CPT 25000 and modifier 51.

By default, system considers Close Match option for importing fee schedule.

If you wish to have Perfect Match for importing fee schedule, you may please contact our customer support team at 877-346-7962 or e-mail us at support@insynchcs.com.
DOWNLOADING BATCH ELIGIBILITY REPORT

When checking patients’ insurance eligibility, you may want to check the status of patients for whom insurance eligibility request is already sent for eligibility check. You can now check the insurance eligibility of such patients for recent 3 months from the Patient Batch Eligibility screen.

To check status of patients for whom insurance eligibility request is already sent:

1. From the top menu bar, click Scheduler.
2. On the top right corner, click the Patient Batch Eligibility icon.
3. Select date range in the Download Date From and To fields. Do not select period more than 3 months.
4. Click Search.

*Figure 10: Added Download Date From and To on the Patient Batch Eligibility Screen*

INTRODUCED A/R VARIANCE REPORT

In order to facilitate practices taking their financial and operational decisions smoothly, a new “A/R Variance Report” is introduced in the system. The report displays accounts receivables on the starting and ending of the month. It also shows the charges, payments, adjustments, and refunds for that month. Ending A/R amount is calculated by adding charges and refunds to starting A/R and subtracting payments and adjustments from starting A/R. A/R Variance is the difference between starting A/R and ending A/R.

*Note: The help icon is provided next to the report title to view how the A/R Variance is calculated.*

To generate A/R Variance Report:

1. From the left menu items, select Reports > Financial Reports > A/R Variance.
2. The A/R Variance Report screen opens. Do the following:
   - In the A/R By field, select Date of Service or Date of Posting option.
   - Select the period for which report is to be generated. By default, the report is generated for the most recent 30 days.
   - Select Facility, Provider, Payer, Patient Category, and Billing Entity according to your requirement.
   - Select the sorting options Month/Year or A/R Variance in ascending or descending order.
3. Click Generate Report.
Figure 11: Generating A/R Variance Report

<table>
<thead>
<tr>
<th>A/R Variance Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>A/R By: Date of Service</td>
</tr>
<tr>
<td>Facility: --Select--</td>
</tr>
<tr>
<td>Patient Category: --Select--</td>
</tr>
<tr>
<td>Sort By: Month-Year</td>
</tr>
</tbody>
</table>

![Example A/R Variance Report]

```
InSync NYC Practice, Inc.
311 N Cedar Ave
Piscataway, NJ 08854
Phone: 732-456-8883
Fax: 732-456-8883

Accounts Receivable Variance

<table>
<thead>
<tr>
<th>Month-Year (Date of Service)</th>
<th>Starting A/R ($)</th>
<th>Charges ($)</th>
<th>Payments ($)</th>
<th>Adjustments ($)</th>
<th>Refunds ($)</th>
<th>Ending A/R ($)</th>
<th>A/R Variance ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nov-2016</td>
<td>143,917.73</td>
<td>130.00</td>
<td>130.00</td>
<td>9,294.23</td>
<td>272.20</td>
<td>143,917.73</td>
<td>119,422.72</td>
</tr>
<tr>
<td>Dec-2016</td>
<td>143,917.73</td>
<td>140,586.58</td>
<td>12,141.83</td>
<td>9,294.23</td>
<td>272.20</td>
<td>143,917.73</td>
<td>119,422.72</td>
</tr>
<tr>
<td>Total A/R Variance ($)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>119,422.72</td>
<td></td>
</tr>
</tbody>
</table>
```
GENERAL

This section includes general changes done in the system applicable for Charting and Billing modules.

SHOWING EXACT DIAGNOSIS CODE ON SOAP NOTE

When you record any diagnosis in the system that had multiple codes associated, system captured only the first code in SOAP note. For example, you recorded “M25.561 - Acute pain of both knees” in the Diagnosis section. Now, this diagnosis has 2 codes, M25.561 – for right knee and M25.562 – for left knee, however system captured only M25.561 on the SOAP note.

System is now enhanced to show both the codes for right and left knee on the SOAP note when you have recorded the diagnosis for both the knees. This will help the billers making the accurate billing for each diagnosis.

*Figure 12: Diagnosis Code in Charting*

*Figure 13: Diagnosis Codes on SOAP Note*