Release Notes

Connect Platform 22.5

This document describes the issues included in the CONNECT software release.

Enhancements

Enhancements include new features and modifications for the following issues:

Application	*Category*	*Issue*	*Description*
Back Office	Accounts	14834	Changed the label on the **View Transaction** window (accessed from the **Accounts / Active AR** tab for a CLAIM-E line item): • *Subscriber Demographics* information renamed *Patient Demographics* on an external claim transaction.
	Charge Batches	15336, 15346	A new **Check Eligibility: Missing Mappings** tab was added to the **Check Eligibility** workflow for users to map non-TPS payers to a TPS Payer ID.
		15503, 15985, 16017	A new **Check Eligibility: Errors** tab was added to the **Check Eligibility** workflow for users to review and fix data errors in their eligibility request submissions.
		15922	Added system check to generate an error message when trying to submit cases where: • Directed provider has case time without a directing provider for the same (concurrent) time *and* • Facility is not set up to *Allow directed only CRNA services*
	Claims	15697, 15824	Renamed **View Rejection** button to **View Message** for rejected claims. When **Status** = *Rejected*, *Rejected* will display in red text.
		15822, 15871	Added **Rebill** button to the **Claims / Electronic Claims** tab to allow users to rebill single claims as needed from this tab.

Application	*Category*	*Issue*	*Description*
	Eligibility	15314, 15338, 16048	Added new **Create Payer Mapping** window to create and add payers to the **Eligibility > Payer List** tab. Added new **Eligibility – Payer Mappings** permissions to Back Office (View, Create, Update, Delete) for granting access to Payer Mapping admin functionality.
		15315	Added new **Eligibility > Payer List** tab to view and manage the full list of TriZetto payers and their corresponding payer mappings.
		15345	Modified logic to only present payers in the **Check Eligibility** window that TPS supports; this cuts down on the number of records being returned with a "Payer Not Supported" message.
		15780, 15813	Added **Date Mode** with *Date of Service* and *Request Date* as dropdown options to the search filters on the **Charge Batches / Eligibility** tab.
		16051	Updated logic to send all Medicare eligibility transactions to Payer ID: ELCMS and determine the NPI to include on the 270.
		16081	Updated functionality to default the *Practice NPI* into the **Practice/Provider NPI** column of the **Check Eligibility** window, allowing the user to update to the *Provider NPI* as needed (only for non-Medicare eligibility requests).
	Fee Schedules	15128, 15983	Added new **Round to zero if the first time unit is less than ___ minutes** classification to the **Custom Time Unit Rounding Point** section of the **Fee Schedule / Anesthesia Billing Information** tab. **Note:** *Checkbox is only available on Expected Fee Schedules.*
	Payers & Plans	15181	Added new dropdown option to Box 24J (unshaded) in the **Plan / Paper Claim Options** tab: • *Always Print Physician NPI if there is one*

Application	*Category*	*Issue*	*Description*
	Practices	15729, 15811	Added **Include Facility Name on statements/e-statements** checkbox to the **Practice > Statements > DMA/Statement Vendor** section. Added **Facility Name** to DMA statement file to be populated if the checkbox is selected.
	Quality	15529	Updated *AQI Reports* export to include both ASA and CPT codes.
	Reports	14969	Added new **Posted Date** and **Posted By** fields to the *Payment Entry Productivity Detail* report.
		15072	Added *Accounting Date* option to the **Date Mode** search parameter field of the *Charge Analysis Detail* report.
		15074	Added new fields to the *FAS – Payments to Line Items Detail* report: • **Modifier 1-6** **Modifier 1** displays the concurrency modifier on the service line for solo cases. Remaining procedure modifiers display in **Modifier 2-6** columns. • **Facility Case Number** • **Tertiary Payer** • **Tertiary Plan**
		15075	Added new fields to the *Account Adjustment Analysis Detail* report: • **Modifier 1-4** **Modifier 1** displays the concurrency modifier on the service line for solo cases. **Modifier 2** displays the concurrency modifier on the service line for team or teaching modifiers. Remaining procedure modifiers display in **Modifier 3** and **Modifier 4** columns.
		15170	Added the **Patient DOB** field to the *Patient Responsibility Detail* report.
		15405	Added new **Check Date** field to the *Deposit Analysis Detail* report.

Application	*Category*	*Issue*	*Description*
		15534	Updated the **Date of Service Group By** output fields of the *Practice Performance Summary* report to display the date with MM/DD/YYYY format.
		15555	Added new **Submitted Date** and **Submitted By** fields to the *Charge Entry Productivity Detail* report.
		15620	Updated the *Production Analysis Summary* report: • Updated the **Group By** option: *CPT* changed to *Procedure Code.* • Removed the **Group By** option: *ASA.* • If *Procedure Code* is selected for the **Group By** filter, then the **Procedure Code – CPT Short Description** will be populated in the **Group By** column of the generated report.
		15772	Added new **Send to AQI** field to the *Provider Details* report to quickly identify providers set up to be sent to AQI.
		15875, 15876	Added new **Provider Group** filter to the *Anesthesia Case Utilization – Performing Provider Output* and *Anesthesia Case Utilization – Case Output* reports.
	Security	13385, 13398	Updated the SSN search functionality within Back Office to allow a 4 digit or 9 digit search. • If 9 digits are entered, the full SSN must match the search criteria in order for the record to be returned. • If 4 digits are entered, only records with the last 4 digits of the SSN matching the search criteria are returned.
	Rooms	15055, 15057	Added new functionality to create and manage rooms from Back Office Admin.
		15058	Added new **Rooms** permissions to Back Office (View, Create, Update, Delete) for granting access to Rooms admin functionality.
		15059	The **Room** field on the **Case / General Case Information** tab no longer accepts free text, requiring the user to select one of the Rooms associated with the selected facility.

Application	*Category*	*Issue*	*Description*
Front Office	Facility Rooms	15061	Removed **Admin > Facility Rooms** from Front Office, moving the functionality to Back Office.

Fixes

Fixes include corrections for the following issues:

Application	*Category*	*Issue*	*Description*
Back Office	Eligibility	16050	Fixed issue causing 270 to generate with incorrect NPI.
	Health Dashboard	15975	Fixed issue preventing the Internet Download Speed value from displaying on the Health Dashboard. Internet Upload Speed value was removed.
	Payment Batches	13551	Removed extra **Close** button at bottom of **Payment Batch / Import Exceptions** tab that was not working as expected.
		15705	Fixed issue causing the total balance for the coinsurance amount (**New Balance**) to not display on the service lines.
	Refunds	15506	Fixed issue causing the **Reverse** window to cut off on the right side when the payer name is too long. If name is too long, will now be truncated and display with an ellipses (…).
	Reports	14586	Fixed the *Anesthesia Case Utilization – Performing Provider Output* report issue causing errant negative worked minutes to be displayed.
		15732	Modified logic for *Insurance Collection Action Detail* report to pull claim numbers from their service lines, rather than the cases.
		16003	Fixed the *Payment Entry Productivity Detail* report to display both "Yes" and "No" values in the **Posted** column, depending on if the payment has been posted or not yet posted.