

# 1 Version 4.0 - 2006 April 30

## 1.1 Summary

### Version 4.0 was released on 30 April 2006

Version 4.0 includes a lot of changes, especially in the main data entry screen. Highlights include...

- All the patient data, address, date of birth, Medicare number and so on are all together on the first page.
- All the health fund data and the address is together on the second page, with enhanced lookup table functions.
- It is now possible to use alternative provider numbers for a single doctor.
- A generic fax cover sheet can be printed for any addressee.
- An item template can be inserted automatically for any specified operation.
- A derived fee function has been created for NSW ASA Workers compensation accounts.
- The diagnostic imaging multiple procedure rule is calculated automatically.
- Easier management of co-payment data entry, printing and receipting.
- Status Phrases and Payment Types can now be edited in lookup lists.
- Field codes can now be used in form letters to substitute for database fields like surgeon, fee, op date etc.
- The Maintenance log has been extended to record data for last 13 months.
- For multiple provider versions - patient details can be searched and copied from multiple doctors files
- Plus quite a few miscellaneous updates and bug fixes.

## 1.2 Data Entry Field Location Changes

Field Location and Format Changes

- To facilitate quick data entry, the patient information fields (gender, dob, age, Medicare num, Veterans' num and MRN) have been moved from the Pt Data tab to the first tab of the data entry form, on the right of the patient's address. The alternative address details have been moved to the second tab with the health fund details, and the tabs have been renamed to Patient and Fund (previously Pt Addr and Pt Data).
- The MRN field has been moved to the bottom of the field list, since this is often tabbed over and not used.
- An Alternative Addressee field has been added to the Patient tab to display a parent or guardian's name in the address window for accounts and letters. If a name is inserted here, it will appear in place of the patient's name in the address section. If left blank, the account is addressed to the patient. You cannot tab into this field (since it will not usually be used), but can click into it or click on the copy shortcut provided to insert the patient's surname. The copy shortcut puts the cursor just to the right of the letter M to allow quick entry of Mr/Mrs etc.
- The Medicare number field has been modified by separating the Patient Reference Number from the Medicare Number. A less ambiguous input format is used (++++ +) which does not accept spaces. No message is given during data entry if the patient reference number is missing. A brief message is given if the Medicare number fails the check digit text. There is a separate link which will run a check digit test on demand.
- The Medicare Patient Reference Number is now displayed on accounts after a slash (/) e.g. 1234 56789 0/1.

### Similar Patients Lookup List

- The similar patients lookup list on the Patient page now displays the Date of Birth & Suburb for easier identification.
- For multiple provider versions, the Date of birth is shown in the multiple provider search form. A filter is provided to limit the patients found to those with the same date of birth as the current patient.
- For multiple provider versions, it is now possible to copy patient details from any patient in any doctors file.

## 1.3 Health Fund Address and Fee Links

### Health Fund Data Entry

- The health fund details are now all shown together on the Fund tab (previously the Pt Data tab).
- Selecting a health fund from the drop down list box will now ...
  1. insert the fund name (this is on the Batch Header tab of the addresses editing form)
  2. insert the Eclipse code if it exists
  3. insert the fund address in the alternative addressee fields
  4. select the default health fund fee
- These functions are made possible by options stored in the addresses lookup table which you can edit by selecting <EDIT> from the drop down list. (The same editing options are available using the 'Look up a stored address' list.)
- The address code may be entered into the health fund field as a shortcut for the above functions.
- An address code may also be entered into the 'Title' field of the 'Send account to' section as a shortcut.

### Automatic DVA Entry

- If a DVA number (Veteran) is entered on the Patient page, when you move to the Fund page, the DVA address will be entered automatically, and the fee will be set to the DVA fee. This will happen only if, in the Addresses lookup table, the DVA address uses the code 'DVA', the 'Insert Address' checkbox is ticked, and a fee schedule is specified. If an alternative address already exists or a fee has been specified for the account, this will not happen.

### Fax Cover Sheet

- A new function allows printing a generic fax cover sheet to any stored addressee. Open this from the addresses editing form. Brief fax subjects (50 char) and messages (255 char) can be saved in a lookup table. Once you enter the details you should print the cover sheet as the details will not be saved.
- A fax number can be saved for each addressee which is separate to the phone number.

### Miscellaneous

- Fixed a bug where the new private fund membership number field didn't print on accounts.
- Added a new field to record details of Informed Financial Consent (100 char).

## 1.4 Operation Page & Provider Number

- Removed the tab stops from the provider number fields since mostly they will either not be used or will be completed automatically from lookup tables. You can click into them if required.
- Adjusted the surgeon data entry to allow saving a provider number which fails the check digit test.
- Allowed adding an item template to the operation field for automatic item entry when a particular operation is chosen. The template items are added as soon as the Items tab is clicked, provided there are no pre-existing items.
- Modified the Operation editing form for easier entry of templates.
- The Quick copy function has been adjusted to insert the stop time from the previous patient as the start time for the current patient. Adjusted Quick and Standard copy functions to copy the new Provider number fields.

### Alternative Provider Number

- Provided the ability to specify an alternative provider number for any given account. This is similar to the account-specific Designation field which has been moved from the Format page to the Operation page.
- This is intended for use where a doctor needs to use multiple provider numbers.
- Multiple provider numbers can be stored in a lookup list. These all relate to the same provider.
- The default provider number is shown in the Options form. If no provider number or designation is shown on a specific account, the default will be used.
- The provider numbers are saved in a new Lookup table in the User file (which is specific to the doctor for multi-provider versions).

## 1.5 Items Page

A new button has been provided to toggle the height of the Items rows up and down.

### ASA RVG Items for Workers Compensation

Provided a derived fee function which will join an anaesthesia base item, time item and modifiers into a single 'derived' item using the base item number with the cumulative unit value and fee. This is to satisfy new billing arrangements for NSW Workcover where fees that are not attached to specific RVG item numbers will not be paid; i.e. Item numbers 'Time', P3, M2 etc will not be recognised.

### DIAGNOSTIC MULTIPLE SERVICES

Implemented automatic calculation of the diagnostic imaging multiple services rule. If using a diagnostic imaging item such as 55130 (TOE), the fee is reduced by \$35 if there is also a consultation item (e.g. 104) on the account, and is reduced by \$5 if there is a procedure item (incl all anaesthesia items) on the account. The same adjustment is used for fund fees, except where the imaging item uses a percent of MBS fee calculation. The rule is not applied if the consult/procedure item is added after the imaging item.

## 1.6 Fee Changes

- Reformatted all items on the Fee page to improve readability.
- When entering a total \$ fee for the account, this is now entered in the SF Plus row, instead of in the Basic Fee box on the top right. This is to reduce confusion about which fee is selected when a total \$ amount is entered.

- A new function allows calculating the fee based on Medicare rebate plus a \$ amount, as opposed to the SF plus a \$ amount. Type an amount into the relevant box to adjust the fee. This is then inserted appropriately into the SF+ fee calculation details. This also allows easily creating a Medicare only account by entering zero into the SF75+ field. If nothing is entered into this box, it will show the difference between SF75 and the selected fee (i.e. the total gap).

#### Co-Payments

- A check box has been provided to specify that the co-payment fee should be shown on the health fund account. This will appear on the account as a note below the main items list and account message. If no co-payment is charged, a tick in the box will show a 'No co-payment' message on the account.
- An operation date code (#OD) has been added to the available co-payment message codes in the Options form. The default message now states e.g. 'The fee for your anaesthetic service on 27/05/2006 is \$500.00'.
- When printing accounts from the details screen, the print dialog box allows selecting either the standard or co-payment account. This avoids the need to go to the Fee page to print the co-payment or co-payment receipt. The default for the two buttons is the same as it was previously, except where a co-payment payment has been made, the default for the main Print button is changed to the co-payment account.

## 1.7 Payments & Status

#### Status Phrases

- Provided the ability to save custom status phrases. Click <Edit Lookup List> from the Status dropdown box on the top of the data entry screen. The original phrases are deemed built-in and are not editable and can't be reordered. New phrases can be set to close the account, reopen it, or do nothing.

#### Receipts

- Provided a button to print a basic receipt for any individual payment from a patient's account without printing the whole account again (on the Payments tab). This is just to the left of the Add button above the Bank column.
- Provided a button to print a generic receipt for a Miscellaneous payment and for a Batch payment. The button is found on the bottom of the respective editing windows.

#### Payment Types

- Provided the ability to edit the list of Payment Types as a lookup list. For each payment type you can specify whether such payments should appear on a banking slip. New payment types may be added and redundant ones deleted.

#### Co-Payments

- Adjusted the entry of payments to allow tabbing into the Co-payment checkbox. This can then be ticked or unticked using the keyboard spacebar.
- When entering a co-payment, the b shortcut inserts the co-payment amount owing, and if entering a standard payment, the b shortcut enters the total owing excluding the co-payment. Previously the total owing was entered in both cases, without reference to the co-payment amount.
- When printing a receipt for a co-payment, the appropriate message will be inserted depending on whether the co-payment is paid, part paid or overdue. Previously it was assumed to be either not paid, or fully paid if any amount had been received from any source.

### Prepaid Accounts

- If a payment is entered before the account is issued/printed (no Account Date exists), the status is changed to 'Prepaid (in part/in full) - not yet issued', and the account is left open. The status should then be changed manually to close the account.

### Miscellaneous

- Added a RECALC button to the payments tab to recalculate the amount owing and payment status in the rare event that this is not updated automatically.
- After deleting a payment, the Payment Status is set to either 'Awaiting payment' or 'Overdue' depending on the time since the Account Date. Previously the status was set to the generic note 'Unpaid'.
- When deleting a batch payment, the word DELETE must be entered. Previously a click was enough.

### Payment Reports

- Displayed GST in the printed List of Payments (and removed the redundant Type column).
- Provided the ability to select one of several optional fields to show on the List of Payments report (replaces previously mandatory DrsLogNumber). Select the field in the Options form - Banking page. Any valid field name may be entered, although only a few are provided in the list.
- Added a GST column to the Group Practice Payment Summary. This allows easily identifying which doctors received GST within a specified time period.
- Added optional report notes to the top of the brief and detailed GST reports.

## 1.8 Letters

- Provided ability to use field codes in letters. This allows substituting values such as the surgeon, operation date, fee and so on, from an account directly into a letter. This also allows easily creating a generic receipt as a form letter, for use with pre-payments or other purposes.
- The list of form letters has been put into a drop-down list box and a specific button must be pressed to insert the form letter text into the current letter. Another button allows viewing the text before inserting it. This makes it less easy to inadvertently overwrite an existing letter with the text from a form letter.
- A new window has been created for easier editing of form letters. Select <EDIT> from the form letters list.
- Fixed a bug where printing a new letter may print the top letter in the list, instead of the selected letter.

## 1.9 Multiuser Issues

- Added alphabetical sorting of the list of providers in the selection window.
- Made the trial and satellite versions essentially the same. Once there are more than 25 accounts, the data is rendered read-only. Satellite clients no longer require a registration number, they can just use the trial version. Also adjusted some additional functions to ensure no errors occurred when the satellite file was made read-only.
- Maintenance log adjusted for multiple provider versions to record all entries for last 13 months (single user versions continue to record last 5000 entries even if longer than 13 months).

### Bugs fixed

- Adjusted the provider selection function to ensure that if a data file is not attached or

refreshed correctly, a definitive reattachment method is done automatically. This is to avoid having a data file reattached but the forms not refreshed (& vice versa) to avoid confusion in the data.

- Fixed bug where splitting a single user file into a multi-user file did not correctly delete site tables from user file. This could cause another bug where registering multi-user version may set user file to be the site file.
- Since the EmptyMU.aau file was abandoned, multi-user data files have been created without default values. This was a problem for some fields, and was fixed as follows. Default PaymentsT!PaymentType and PatientsT!CreationDate are now inserted by the form control. PaymentsDeletedT!DateDeleted and PaymentsDeletedT!ReferredAccounts are inserted in a code procedure. Checked that all other fields did not need a default value in the table. Set some other defaults in the PatientsF form.
- The data file creation function sets AllowZeroLengthFields to True for all text fields in hic\_\* tables.
- Data file creation function creates primary and other indexes on relevant tables in 3 hic\_\* tables.
- Put DBEngine.Idle dbRefreshCache into data file opening procedure (2) to improve networking issues.

## 1.10 Miscellaneous Updates

- Provided the ability to specify a number of copies when printing a batch header.
- Adjusted code to speed up creating new accounts (removed unnecessary items in Form\_Current procedure).
- Disabled Items and Payments forms for Trial version with more than 25 accounts.

## 1.11 Bugs Fixed

- The ASA time was not calculated if the duration was entered without start/stop times.
- The NumLock key turned off by itself in some situations (replaced the SendKeys function).
- Pressing the New account button, then the Escape key, could result in an account with no account number, which then couldn't be saved.
- Pressing the New account button, then the PgUp/PgDn key, could result in an account with no surname.
- Cancelling a new account did not delete the status log entries.
- If a user tried to switch providers when entering a payment, it was possible to get part way through the switching process then get errors which resulted in forms not refreshing completely. A warning is now given and the payment must be completed.
- Added a missing surname message to the PatientsF\_BeforeUpdate event to handle scroll wheel use.
- The link to an old ldb file could sometimes still exist after switching to another provider - due to hicClaimsF form not being refreshed correctly if new Dr had no claims data.
- The ordering of the category list in the MBS book was not correct (previously RVG items appeared after surgical items.)
- Printing all accounts could cause an Object Variable Not Set error, and thence the pgm would print one account at a time. (WHERE statement missing in SQL clause.) Also adjusted some other query criteria which could cause cumulative problems when using the tagged printing functions on the List of Accounts.
- The Practice Activity Summary could be inappropriately printed across two pages.
- The DrsLogNumber may have been missing from the <standard> datasheet formats.
- Modified the automatic Web Update function to avoid getting into an infinite loop which has occasionally occurred with some systems.
- Fixed data type bug which caused errors updating data files on Mac computers.