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**From:** Credible Behavioral Health, Inc. <Jaclyn.O'donnell@credibleinc.com>  
**Sent:** Friday, March 16, 2018 4:59 PM  
**To:** Credible Documentation  
**Subject:** Credible Update: Upcoming Enhancements & Task Resolutions

# CREDIBLE

Behavioral Health Software



## UPDATE

### Upcoming Enhancements & Task Resolutions

DEAR CREDIBLE,

**On Thursday evening, March 22nd, between 10:15 PM - 12:15 AM ET**, Credible's Tech Team will release our latest enhancements and updates. For March, Credible has three major announcements.

#### **Credible Plan Available**

Credible Plan is now available to all Partners! This highly flexible and configurable module guides and documents the clients treatment, satisfies regulatory requirements, and enhances an Agency's data-gathering and reporting abilities.

Our thanks go out to the early adopters whose Partnership enabled a final round of fine-tuning for the module, ensuring the best possible experience for our Partners. The Early Adopter program is now closed.

## Record-Setting Credible Update

For this month's release, Credible's software developers, product managers, and QA analysts focused their efforts on burning through open tasks and pushing out as many enhancements and updates as possible, across all areas of the software. In the end, the tech team produced 33 features and enhancements, 118 product updates, and 60 internal stability enhancement projects – a record 211 released items and a **burn-down rate of 20%**!

A Credible update this large is too much to include in one message, so we've listed below 19 items of particular interest. [The full list is available here.](#)

## Credible Care for Windows

Credible Care updates were released for both the iOS and Android versions. Also, Credible Care for Windows has left beta testing, and is now available to our Credible Mobile Partners! You will find links to all three at [mobile.crediblebh.com](http://mobile.crediblebh.com).

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Our current **Partner Satisfaction** rate is at **89.47%**. We are continually looking to improve, so please make your voice heard by completing the surveys provided by your Partner Services Coordinator after every task resolution. At this time, survey responses have dropped dramatically. For Credible to continue to improve and focus on Agency needs, your feedback is essential. Take this opportunity to tell us what we are doing right, and where we have opportunities for improvement.

## Enhancements

### Billing

#### 835: Add Insurance Payments for Debits

When an 835 is received and the BPR segment indicates a Debit (BPR03 Credit/Debit Flag Code = D), a negative check will now be created. Previously, no payment was created at all. According to 835 standards, the amount in the BPR segment should always be a positive number, even when sending a debit. Some payers, however, do send negative amounts to indicate the debit. 835 files are uploaded as normal. The check will be created through the upload process.

Insurance payers will be created as follows:

- Positive Credit = positive check
- Negative Credit = negative check
- Positive Debit = negative check
- Negative Debit = negative check

#### Batching: Limitations on Batching Visits with \$0 Insurance Due

A resubmitted visit claim with \$0.00 balance could not be batched if both **Do Not Batch If No Insurance Due** and **Can Resubmit Voids** were checked.

Visits with \$0.00 for **Insurance Due** can now be batched, even when the payer has **Do Not Batch If No Insurance Due** is checked, if the visit is a resubmission of a claim that was previously sent to that payer.

#### **Billing Matrix: Setting to Use DA or UN for 837 Institutional Claims**

A new setting has been added, **Billing Matrix: Inpatient Unit of Measurement of DA in 837I**. Sending days (**DA**) versus units (**UN**) in 837 Institutional claims can now be controlled in the Billing Matrix instead of at the payer level. This new setting overrides the existing payer setting for sending DA, reducing the need to change payer settings when batching different types of services.

#### **Disallowed Amount Reductions**

Disallowed amounts were being reduced to the remaining balance when a client payment had been previously applied. For example, on a \$100 service, a client made a copay of \$20, leaving an \$80 balance. The 835 from the primary payer indicates a \$75 insurance payment, \$20 disallowed, and \$5 patient responsibility.

Previously, the system would reduce the \$20 disallowed to \$5, making it unclear that the client had paid too much. With this update, a **SERVICE RATE ADJUSTMENT** will occur, allowing the full amount of the disallow to be applied. The visit's total disallowed amount would then become negative.

#### **eMAR Billing: Unit Price and Unit of Measurement**

Some payers require the **Unit Price** and **Unit of Measurement** when billing for medication administration (eMAR). Credible has now added those options.

#### **Logs: Authorization Updates and Log Details**

Changing the payers, visit types, and/or providers for an authorization is now logged with details. Previously, the change was only logged as **UPDATE CLIENT AUTHORIZATION**. Please note: Changes made prior to this release will not contain these details.

#### **Red X: Predefined Red X Rule for Split Visits**

This new Red X rule prevents the batching of services that are part of a split, if at least one of the other services in that split is unapproved. For example, if split visits are used to document a medication administration and the accompanying injection, neither service can be billed unless both are approved.

#### **Red X: Visits of Selected Types with Required Visit Count**

This is a **Custom Red X** rule to Red X visits to prevent batching ACT services when the client has not received enough services in the prior 7 days. When configured, the Red X will automatically appear when running the **Batch Claims Error Report**.

#### **Visit: Closing Adjustment**

When a visit balance reaches zero, the visit was marked as **PAID**, regardless of if it was paid in full, or adjusted off. A new **Closing Adjustment** appears on the visit billing details screen. When a visit reaches a zero balance due to a service adjustment, the type of adjustment will appear as the Closing Adjustment. Closing **Adjustment** also appears as a custom field in **Advanced Visit Search** and **Advanced Ledger Search**, and as a custom filter.

### **Visit: Require E/M level on Sign and Submit**

Users sometimes forget to select an **Evaluation and Management (E/M)** level, causing delayed billing. EHR Admins can now configure the Domain to always require an **E/M Level**, if allowed by the visit type.

When **Require E/M Level** is checked, all visits that use the E/M Level must have a level selected at Sign and Submit, or whenever the visit is updated. Note that this only affects visit types with **Use E/M Level** checked. If **Use E/M Level** is unchecked for the visit type, the E/M Level dropdown does not appear and will not be required, even if the new Partner Config setting is checked.

## **Medications and Orders**

### **Medication: Frequency Unit Added to Dosage**

This enhancement allows users to create a prescription or Add a medication or create an eMAR schedule and select a 'WITH DINNER' option from the Frequency dropdown list when specifying the sig for a medication.

### **Orders 2.0: Allow User-Defined Free-Text Order Type Settings**

Free-text Order Types can now have user-defined settings such as **Complete before Sign** or **Requires Countersignature**.

### **PBM: Drug Interactions Warnings Triggered by PBM History Import**

Users will now receive an alert about **Drug-Drug/Drug-Allergy** interactions based on medications imported via PBM history request.

## **Other Enhancements**

### **Data Dictionary: Increased Length of Axis Fields**

Credible has increased the maximum length of **Axis** fields in the **Data Dictionary > Client** table from 50 characters to 395 characters. This prevents longer ICD descriptions from being truncated in the **Visit Summary**. This new functionality permits Partners to enter longer descriptions for **Client Axis** fields set up in the **Data Dictionary**.

### **Employees: Automatic Deletion Option for Inactive Employees**

This setting will lessen the administrative burden when inactivating and deleting an employee. The default setting leaves the current workflow in place.

### **Forms: Expand Diagnosis Mapping to Include Specifiers**

Credible now includes specifiers with diagnosis mapping, allowing Partners to add a complete and accurate diagnosis to a client's record. Diagnosis specifiers can be edited from within a form.

### **Logs: Update Schedule Entry Details**

**Update Schedule Entry** now records the details of changes in the HIPAA log.

### **Partner Config: Apply Agency Time Zone**

A new setting was added — **Partner Config: Apply Time Zone**. With this setting checked, when the employee's time zone differs from the Agency time zone, scheduled items are displayed in the employee's time zone.

#### **Reports: Home Page Recently Run**

This enhancement allows users to run export reports with saved parameters from the **Home Page** in the **Recently Run** report section. In addition, a new feature has been added showing the export filters and parameter selection fields, allowing users to change the parameters used from the Home Page. This brings export reports in-line with current pre-built reports.

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Credible plans to push these enhancements on **Thursday, March 22, between 10:15 PM - 12:15 AM ET**. There may be intermittent service during this time.

Should you have any questions, please do not hesitate to contact a Partner Service Coordinator for assistance at 301-652-9500. *Please note: In an effort to continually improve our Partnership and quality of service, a task resolution audit will be emailed to you upon the resolution and closure of every single task you have submitted. We strongly encourage you to utilize this tool so that we can better support you.*

Thank you for your continued Partnership,

**Jaclyn O'Donnell**

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**Mission:** Improve the quality of care and lives in Behavioral Health  
for clients, families, providers and management.

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