

Tx Plus Enhancements, PBM Med History on Orders Screen, & More



May 2013 Release Highlights

- Tx Plus enhancements
- PBM med history on Physician's Order screen
- Section-by-section view for imported client summaries
- Signature functionality for updates to liability forms
- Flagging non-physicians for incident to billing
- Creating eRx G-codes by default
- Configurable past due messages for client statements
- Multiple time frames for same employee credentials

Release 8.1 Features Available May 11, 2013

Credible continues to focus on improving the Tx Plus module and for those Partners that wish to do so, providing a way to transition from Tx Plan to Tx Plus. For example, you can now set up your system to automatically activate Tx Plus plans when they are approved — and use the approval date as the treatment plan start date. With a new ImportTxPlus table, you can import a treatment plan created with the original Tx Plan module into a Tx Plus plan.

With this latest release, you can take advantage of two new user interface features — PBM medication history has been added to the Physician's Orders screen and there is a new section-by-section view for imported client summaries.

On the documentation front, you can now capture client and employee signatures after updates have been made to an existing liability form. And on the Sign & Submit screen, you can flag a non-physician for incident to billing without using the is_doctor field and create an eRx G-code by default.

Also new in this release is the ability to configure past due messages for your client statements and set up multiple time frames for the same employee credential.

Please refer to the Release 8.1 Configuration document for the steps to configure and use all of the new features.

Software Spotlight

Tx Plus enhancements, PBM medication history on Physician's Orders screen, section-by-section view for imported client summaries, signature functionality for updates to liability forms, flagging non-physicians for incident to billing, creating eRx G-codes by default, configuring past due messages, and multiple time frames for same employee credential

Release 8.1 Is Certified for Meaningful Use

CCHIT®, an ONC-ATCB, extended the ONC-ATCB 2011/2012 Complete EHR certification status to this latest release of Credible Behavioral Health Software.

Complimentary Webinar Tutorials on the New Features!

Register for a webinar by clicking on a date below. Once registered, you will receive an email confirming your registration with information you need to join the webinar.

[Tuesday, May 14, 2013 at 12:00pm - 1:00pm EDT](#)

[Thursday, May 16, 2013 at 4:00pm - 5:00pm EDT](#)

Tx Plus Enhancements

You can now set up your system to automatically activate a Tx Plus plan when the visit in which it was built is approved and use the approval date as the treatment plan start date (original date entered will be overwritten).

Tx Plus	
Use Tx Plus:	<input checked="" type="checkbox"/>
Use Custom Tx Plus Library:	<input checked="" type="checkbox"/>
Use Tx Plus Extended Fields:	<input checked="" type="checkbox"/>
Manage Tx Plus Extended Fields:	<input type="checkbox"/> Manage
Activate Tx Plus On Approval:	<input checked="" type="checkbox"/>
Use Approval Date As Tx Plus Plan Start Date:	<input checked="" type="checkbox"/>
On Template Change Children Dates:	<input type="checkbox"/>

You can view the treatment plan in the visit in which it was built but you cannot document against it until the visit is approved.

If your organization uses Tx Plus templates, you can now configure your system to use the Tx Plan start date you enter for all items in the plan after you select a template.

Use Approval Date As Tx Plus Plan Start Date:	<input checked="" type="checkbox"/>
On Template Change Children Dates:	<input checked="" type="checkbox"/>
No Program Selector on Builder Screen:	<input type="checkbox"/>

If you are using Tx Plus extended fields, you can choose whether users can document against them in the web form (the default) or when the plan is accessed via the Client nav bar. The new Form Documentation Only setting in the Tx Plus Extended Fields popup controls the “documentation venue” for each extended field.

	Tx Plus Type	Field Label	Field Type	Order	Form Documentation Only
edit	Issue	Program	Dropdown	1	<input type="checkbox"/>
edit	Issue	Severity	Dropdown	2	<input checked="" type="checkbox"/>
edit	Issue	ProblemCheckBoxDocOnly	Checkbox	3	<input type="checkbox"/>

When you uncheck this setting, the documentation venue *switches* from a web form to the Client Tx Plus Builder screen when accessed via the Client nav bar.

**Next release:
August 17, 2013**

Look for an email with information on what you can expect from the next Credible software release!

Tx Plus Enhancements continued

With a new ImportTxPlus table, you can now import a treatment plan created with the original Tx Plan module into a Tx Plus plan. Since Tx Plan categories do not have a hierarchical structure, you will indicate the Tx Plus level each one corresponds to (problem, goal, objective, intervention) when you create the import file in Excel.

PBM Medication History on Physicians' Orders Screen

A client's medication history for the past two years from the PBMs will now be displayed on the Physicians Orders screen. If your physicians use the Orders function to create prescriptions (recommended as a best practice), they can stay on the same screen to check the retail medication history for a client.

PHYSICIANS ORDERS: John Doe (10819) Physicians Orders Report

Order History : Rx Eligibility: Last Updated 4/26/2013 10:20:52 AM

Order Date	Created Date	Sign Date	Category	Physician	Type	Order	Completed	Disc	Notes
5/1/2013	5/1/2013	5/1/2013	Medications	[Redacted]	Phone	aspirin (bulk) 100% Powder			
5/1/2013	5/1/2013	5/1/2013	Medications	[Redacted]	Phone	Tylenol 325 mg Tab			

PBM MEDICATION HISTORY: Update History

Medication	Quantity	Days Supply	Source	Prescriber	Date	Pharmacy
Amoxicillin 250 MG/5 ML SUSP	100	10	PBMC	Mike Fox	5/1/2012	WE CARE PHARMACY

DISCLAIMER: Certain information may not be available in this report such as medications that the client asked a payer not to disclose due to privacy concerns, over-the-counter medications, low-cost prescriptions, and prescriptions paid for by the client or non-participating sources. In addition, the information may not be accurate due to errors in insurance claims information. The provider should independently verify the medication history with the client.

Pending Orders :

Section-by-Section View for Imported Client Summaries

With a new detail button on the Attachments List screen, you can now view each section in an imported client summary (Continuity of Care Record or Document). Note that previously uploaded client summaries will need to be re-uploaded to make the detail button available.

Client Summary Detail View

Category: Profile

Category: Diagnosis

Problems

Condition	Effective Dates	Condition Status
Asthma	1950	Active
Pneumonia	Jan 1997	Resolved
"	Mar 1999	Resolved
Myocardial Infarction	Jan 1997	Resolved

Return to Attachments

Do you want to share these release notes with a colleague? Email sarah@credibleinc.com with your request.

Signature Functionality for Updates to Liability Forms

After a new liability form is saved, an Update Signature button becomes available for the client and employee signatures. If changes are made to the form, you can use the button to clear the previous signature and obtain a new one — “documentation” that the client has seen and agreed to the new liability level and understands his/her responsibility for payment of services.

The screenshot shows a web interface for a liability form. At the top, there are two buttons: "Save Liability Form" and "Start New Form". Below these, there are two signature fields. The left field is labeled "Client Signature:" and contains a handwritten signature "John Doe". The right field is labeled "Employee Signature:" and contains a handwritten signature "J Smith". Below each signature field is a button labeled "Update Signature". A blue box highlights both "Update Signature" buttons.

Flagging Non-Physicians for Incident to Billing

With the addition of the `is_incident_to` field to the Employee table, you can now flag non-physicians for incident to billing without using the `is_doctor` field. To support the need to report non-physician employees as rendering providers on a service-by-service level, employees with `is_incident_to` set to Yes will appear in the Supervising Physician dropdown on the Sign & Submit screen.

Creating eRx G-Codes by Default

If your system is configured to flag for G-codes, you can now set up the Create eRx G-Code field on the Sign & Submit screen so it defaults to Yes for the appropriate visit types. This will eliminate the need for clinicians to determine when they need to create an eRx G-code and help ensure that your organization meets the requirements of the [eRx Incentive Program](#).

The screenshot shows a portion of a form with two radio button options. The first option is "Non-Billable:" with "No" selected (indicated by a blue dot) and "Yes" unselected. The second option is "Create eRx G-Code:" with "No" unselected and "Yes" selected (indicated by a blue dot). A blue arrow points to the "Yes" radio button for "Create eRx G-Code:". Below the options, the word "ATTACHMENTS" is partially visible.

Configurable Past Due Messages for Client Statements

With a new Manage Past Due Messages function on the Billing tab, you can set up the past due messages you want the system to include on client statements.

Manage Past Due Messages:

	30 to 59	60 to 89	
<input type="button" value="Edit"/> <input type="button" value="Delete"/>	Your account is 30 days past due.	Your account is 60 days past due. That's not good. We're starting to get irritated.	Yc nc the

The past due messages are tied to a new Statement Due Date field on the Client Statement screen. If a statement is past due, the appropriate message will appear above the Remit To area on the statement.

Multiple Time Frames for Same Employee Credential

With a new Add Credential Time Frame function on the Employee Credentials screen, you can add multiple time frames for the same credential. If you link a credential to a Billing Matrix entry (via the Credential Group field), the system will use existing red X functionality to check all time frames for that credential. If a visit occurs during an expired time frame, it will red X (No Match on the Credential Group in the Billing Matrix) and will not be pulled into the Generate Batch screen as a result.

EMPLOYEE CREDENTIALS: Jane Smith

Edit	Credential	Start Date (opt)	En
<input type="button" value="Edit"/>	PA		

EMPLOYEE CREDENTIALS: Jane Smith

Select Credential: --SELECT--

Start Date (Optional):

End Date (Optional):

External ID (Optional):

Order: 1

Notes:

We want to hear from you!

If you have an idea, question, or comment regarding Credible software releases or our release process, please call or email Credible today.



CCHIT is a registered trademark of CCHIT.

2101 Gaither Road, Suite #400,
Rockville, MD 20850

301-652-9500 credibleinc.com
info@credibleinc.com

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