
From: Credible Behavioral Health, Inc. <anne.hunte@credibleinc.com>
Sent: Wednesday, October 19, 2016 7:30 AM
To: Credible Education
Subject: Credible Update: Upcoming Enhancements & Task Resolutions

CREDIBLE

Behavioral Health Software



UPDATE

Upcoming Enhancements & Task Resolutions

DEAR PARTNER,

Credible's Technical Team plans to push enhancements and resolutions for the following items **this Thursday night, October 20th, between 10:15 PM - 12:15 AM ET.**

[Enhancements](#)

[Client Statements 2.0](#)

- Credible has added a new Partner Config setting, **Use Client Statements 2.0**. Partners no longer need to submit a task ticket to have the new statements feature activated on their production or test Domains. Partners are strongly encouraged to preview the new statement on their test domains; this will allow billing staff to become familiar with the new settings, and allows printing a sample statement for review with clients. (Note: If your Agency does not have a test Domain, you may use PREVIEWTEST.)
- Please note: Partners should not switch back and forth between the old and new statement types. *Client Statement 2.0* is a newly designed balance-forward client statement. This new statement calculates a balance forward, while showing the detail for new visits and payments. For additional information, please see Credible Help online at **Help by Tab > Billing > Client Statements and Payments > Client Statements 2.0**.

New Payer Config Settings for Custom Notes

- Payer settings have been added to create custom note (NTE) segments for the 837 Professional (837P) file:
 - **Loop for Custom Reporting Note (837P)**: This is required to use the new custom note settings. When selected, this determines which loop is used for the Custom Note values.
 - **Prefix for Client/Employee Reporting Note (837P)**: This sets the text to be added before the client or employee information. For example, the Employee's ID (51234) could have EI added so that the NTE segment will be sent as **EI51234**. If no text is entered, the raw value from the selected client or employee field will be used, instead.
- Select one and only one of the following settings for the source of the NTE content:
 - **Use Employee Field for Reporting Note (837P)**: Select the employee field being used to store the payer's required information.
 - **Use Client Field for Reporting Note (837P)**: Select the client field being used to store the payer's required information.
 - **Use Payer Information Reporting Note (837P)**: This defines payer-specific text that will be sent in the NTE segment.

Knowledge-Based Authentication Enhancements

- **Streamlined Process**: The KBA process has been streamlined, and now only needs to be redone when:
 - the user is flagged by Credible as needing to do KBA again as part of required auditing; or
 - the user's *username* or *password* has been changed since the last KBA.

Previously, changing any of the following employee profile fields would also trigger a new KBA: *first_name, last_name, address1, address2, city, state, zip, ssn, dob, npi, dea, ctp*. These no longer trigger the check.

- **Overriding KBA**: Partners can now request an override to the KBA process for users who are unable to successfully complete the KBA process. Per Surescripts, requests for a KBA override must be submitted in writing as a notarized attestation. While the override is active, users will not be prompted for KBA, even if their username or password has been changed.

This override can only be activated and deactivated by Credible. Please note: This request is to be used only as a last resort.

Bed Board and 24hr/Military Time

- Accessing Bed Board from **Client** navbar > **Bed Assign** now uses and displays 24hr (military) time when *Partner Config: Display Military Time* is checked. This includes:
 - Viewing the current and historical bed assignments
 - Assigning a bed
 - Placing a bed on hold
 - Checking In or Checking Out for an interval
 - Moving the client to a new bed
 - Ending the Residential/Inpatient stay (RIS)

Client List for Inpatient Module

- In the Inpatient module, a new section has been added, **Inpatient Clients**. This section shows all clients currently assigned to a bed in any facility.
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Updates

Billing Resolutions

- **CMS ICD-10 Updates:** When CMS published the recent update to ICD-10 (effective 10/01/2016), some existing codes became non-billable, while new billable codes were added.
 - *Partner Config: Allow selection of non-billable ICD-10 codes* is UNCHECKED, a user will only be able to select codes that are billable based on the current date.
 - *Partner Config: Allow selection of non-billable ICD-10 codes* is CHECKED, users can still select any ICD-10 code. This has not change
- **Billing Matrix “Page Cannot be Displayed” Error:** An error caused by paging through the *Billing Matrix Payer Specific Settings* while the Edit section was visible has been corrected.

Visit Resolutions

- **Liability and Merged Visits:** The primary visit in a merge contains the full rate for all the visits in that merge, as well as the liability adjustments. If additional visits were added, or the visits were updated, the primary visit might change. Thus, the new primary visit would then be adjusted for liability without taking the full rate into consideration. When the primary visit in a merge changes, liability adjustments now auto-reverse, and are reapplied to the new primary visit.
- **Visit Advanced Search – Pending Claims:** An issue was corrected where 835 adjustment codes did not display in Visit Advanced Search results for pending claims. Also, the Adjust Code filter box now searched properly for pending claims.
- **Visit Tab - Filtering by Only Red X:** When using the *Only RedX* filter while searching on a client's name on the Visit tab, an error sometimes occurred. This has been corrected.

Tx Plus Resolutions

- **Tx Plus Extended Fields Display Encoding:** URL/ASCII encoding (such as %20) occasionally appeared instead of the proper characters. This has been corrected.
- **Removing Tx Plus Documentation:** When updating a visit, Tx Plus documentation would reappear after saving if all characters were fully removed; the only method of removing the documentation was to replace it with some other character. Tx Plus documentation can now be removed simply by deleting the text and clicking *Complete*.
- **Diagnosis Removal from Tx Plus Problem:** Attempting to remove diagnosis codes from a Tx Plus Problem would sometimes result in an “*object reference not set to an instance of an object*” error. This has been resolved.
- **Spellcheck in Tx Plus:** Spellchecking as you typed – using the *Enable SCAYT* setting – did not work when documenting on Tx Plus items in a form. This has been corrected.
- **Editing Large Tx Plus Plans:** Editing a large Tx Plus plan could be slow to display, and sometimes cause the page to stop responding. This is no longer the case.

Bed Board Resolutions

- **Bed Board Interval Edit:** Credible has resolved an error occurring when editing a bed board interval linked to a team that the client is no longer assigned to. The Team dropdown now includes all of the client's current team assignments as well as the team linked to the interval, even if the client is no longer assigned to that team. Additionally, when editing an existing interval, the *Out Reason* now keeps the original selection, and no longer defaults to the first item in the dropdown.
- **Checks to Prevent Overlapping Intervals:** Additional checks have been added to prevent a user from editing a bed board interval and inadvertently creating overlapping intervals.

Knowledge-Based Authentication Resolutions

- **Non-SPI Users and ID Proofing:** Non-SPI users no longer have to go through the ID Proofing process, and will no longer be prompted for Knowledge-Based Authentication (KBA). Prescriptions can only be printed, faxed, or sent if the selected *prescriber* has completed KBA. If the selected prescriber has been flagged for a KBA check, a Non-SPI user will only be able to create submit prescriptions through the *Submit for Approval* process.

Other Resolutions

- **Employee Logging when Updating Insurance:** When a user updated a client insurance record, the employee who previously updated it would sometimes be logged. This occurred when the client insurance record was tied to batched visits and the *Update Insurance Failed* page displayed with a list of affected visits. When the *Update Insurance Failed* page is displayed, the insurance changes are now properly reversed, and are logged with the correct employee as a *ROLLBACK CLIENT INSURANCE* action.
- **Employee Forms - Unable to Attach Saved Signature:** Credible has resolved an issue wherein saved signatures could not be attached to the second Signature box in an Employee form.
- **Printed Prescriptions & Supervisor Signature Line:** Printed prescriptions included a signature line for a supervisor, even when the prescriber did not need a supervisor and no supervisor was selected, causing some pharmacies to reject the prescription. Printed

prescriptions now only show the supervisor signature line when a supervisor is selected when creating the prescription.

- **YOQ Links:** Users clicking a YOQ link would sometimes receive an error (“*Login failed for supplied username and password*”). This no longer occurs.
- **Physician’s Orders Default Date:** Orders will default to today when the Order Date field is left blank. To improve clarity, the Order Date field will now display the current date and time. The Order Date can still be edited as needed.
- **Editing Medical Profile Date:** Changing the date and/or time of the *Medical Profile* displayed an error popup if the datetime was not entered in a specific format. Calendar and time pickers have been added to the *Medical Profile Date* field to allow for easier entry.

Credible plans to push these enhancements Thursday, October 20th, 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.

Thank you for your continued Partnership,

Anne Hunte

Director of Partner Services

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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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