

What's New in 9.5.09- 9.5.24

December

2016

This document was developed by Genius Solutions to introduce users to the features/modifications that have been released in 9.5.09 - 9.5.24 of eTHOMAS. Click on the text or page numbers within the Contents page to be brought to that specific item within the document.

eTHOMAS

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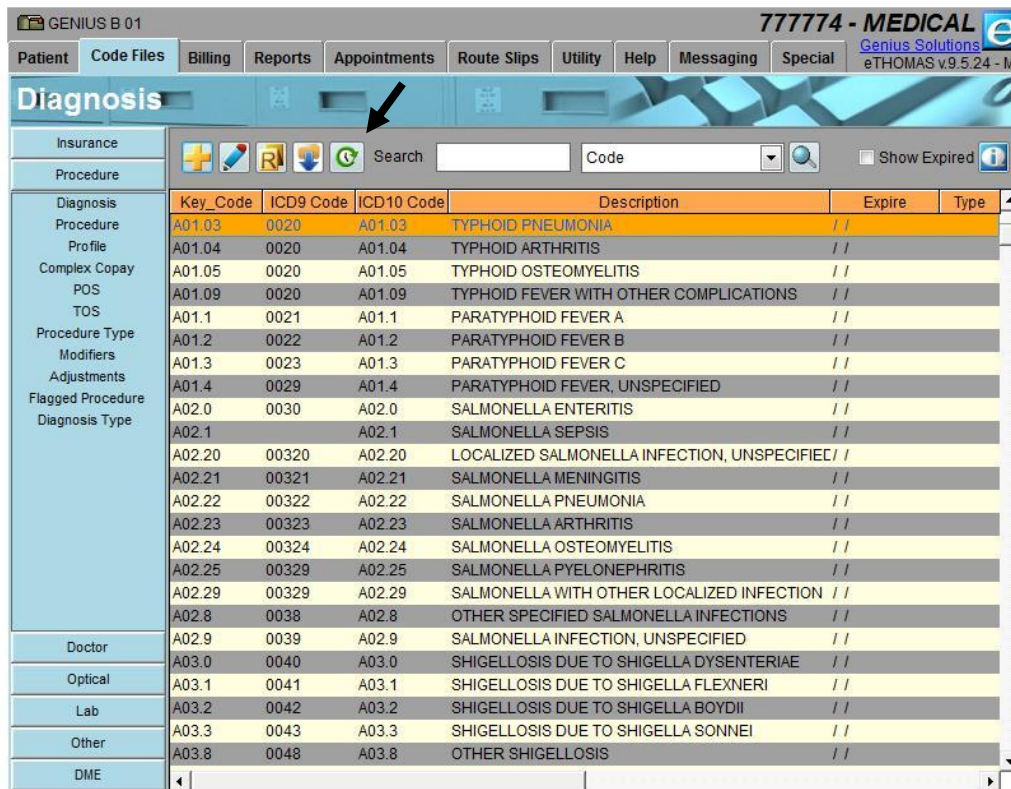
Release Introduction

Since our release of version 9.5.08 at the end of September 2015, we have made significant changes to eTHOMAS that we feel are of benefit to our users. Because of the number of modifications and the impact on our end-users, we have put together a document to outline these features. Our latest version, at the time of this publication, is version 9.5.24. In order to take full advantage of the features outlined within this document, eTHOMAS will need to be updated to that version. Verify your version number by looking in the right corner of eTHOMAS.

Code Files

Syncing Diagnosis and Procedure Codes (9.5.22)

The ability to sync diagnosis codes and procedure codes from eTHOMAS to ehrTHOMAS has been added to eTHOMAS. This feature is useful so that changes to these codes only have to be made in eTHOMAS and with the click of a button will also be made in ehrTHOMAS. This prevents the user from having to add/edit information in both systems. To Sync data from eTHOMAS to ehrTHOMAS, click the “Sync data with ehrTHOMAS” button. Procedure and Diagnosis codes must be synced individually.



Key_Code	ICD9 Code	ICD10 Code	Description	Expire	Type
A01.03	0020	A01.03	TYPHOID PNEUMONIA	//	
A01.04	0020	A01.04	TYPHOID ARTHRITIS	//	
A01.05	0020	A01.05	TYPHOID OSTEOMYELITIS	//	
A01.09	0020	A01.09	TYPHOID FEVER WITH OTHER COMPLICATIONS	//	
A01.1	0021	A01.1	PARATYPHOID FEVER A	//	
A01.2	0022	A01.2	PARATYPHOID FEVER B	//	
A01.3	0023	A01.3	PARATYPHOID FEVER C	//	
A01.4	0029	A01.4	PARATYPHOID FEVER, UNSPECIFIED	//	
A02.0	0030	A02.0	SALMONELLA ENTERITIS	//	
A02.1		A02.1	SALMONELLA SEPSIS	//	
A02.20	00320	A02.20	LOCALIZED SALMONELLA INFECTION, UNSPECIFIED	//	
A02.21	00321	A02.21	SALMONELLA MENINGITIS	//	
A02.22	00322	A02.22	SALMONELLA PNEUMONIA	//	
A02.23	00323	A02.23	SALMONELLA ARTHRITIS	//	
A02.24	00324	A02.24	SALMONELLA OSTEOMYELITIS	//	
A02.25	00329	A02.25	SALMONELLA PYELONEPHRITIS	//	
A02.29	00329	A02.29	SALMONELLA WITH OTHER LOCALIZED INFECTION	//	
A02.8	0038	A02.8	OTHER SPECIFIED SALMONELLA INFECTIONS	//	
A02.9	0039	A02.9	SALMONELLA INFECTION, UNSPECIFIED	//	
A03.0	0040	A03.0	SHIGELLOSIS DUE TO SHIGELLA DYSENTERIAE	//	
A03.1	0041	A03.1	SHIGELLOSIS DUE TO SHIGELLA FLEXNERI	//	
A03.2	0042	A03.2	SHIGELLOSIS DUE TO SHIGELLA BOYDII	//	
A03.3	0043	A03.3	SHIGELLOSIS DUE TO SHIGELLA SONNEI	//	
A03.8	0048	A03.8	OTHER SHIGELLOSIS	//	

Diagnosis Code File

GENIUS B 05 77774 - IMPORTPOST ICD10 e

Patient Code Files Billing Reports Appointments Route Slips Utility Help Messaging Special Genius Solutions eTHOMAS v.9.5.24 - FL

Procedure

Insurance Procedure

Search Code Show Expired

Code	Description	ProcType	TOS	POS	Charge
20550	INJECTION, SINGLE TENDON SHEATH CT			OFFICE	500.00
20552	INJECTION(S); SINGLE OR MULTIPLE CT			OFFICE	500.00
20600	ASPIRATION AND/OR INJECTION; S CT			OFFICE	250.00
20605	ASPIRATION AND/OR INJECTION; IN CT			OFFICE	250.00
20610	ASPIRATION AND/OR INJECTION; M CT			OFFICE	250.00
20612	ASPIRATION AND/OR INJECTION OIC CT			OFFICE	250.00
23350	INJECTION PROCEDURE FOR ENH CT			OFFICE	500.00
24220	INJECTION PROCEDURE FOR ELB CT			OFFICE	500.00
25246	INJECTION PROCEDURE FOR WRI CT			OFFICE	500.00
27093	INJECTION PROCEDURE FOR HIP CT			OFFICE	500.00
27096	INJECTION PROCEDURE FOR SAC CT			OFFICE	750.00
27370	INJECTION PROCEDURE FOR KNE CT			OFFICE	500.00
27648	INJECTION PROCEDURE FOR ANK CT			OFFICE	500.00
62270	SPINAL PUNCTURE, LUMBAR DIAG CT			OFFICE	500.00
62272	SPINAL PUNCTURE FOR DRAINAGE CT			OFFICE	500.00
62273	INJECTION EPIDURAL OF BLOOD CT			OFFICE	500.00
62284	INJECTION PROCEDURE FOR MYE CT			OFFICE	500.00
62311	INJECTION GUIDED LUMBAR OR S			OFFICE	500.00
64420	INJECTION ANESTHETIC INTERCO CT			OFFICE	250.00
64445	INJECTION ANESTHETIC SCIATIC N CT			OFFICE	250.00
64447	INJECTION ANESTHETIC FEMORAL CT			OFFICE	250.00
64450	INJECTION ANESTHETIC OTHER PICT			OFFICE	250.00
64479	EPIDURAL NERVE ROOT SLEEVE ECT			OFFICE	750.00
64483	INJECTION, ANESTHETIC AGENT AICT			OFFICE	750.00
64484	INJECTION, ANESTHETIC AGENT AICT			OFFICE	500.00
64493	INJECTION, ANESTHETIC AGENT AICT			OFFICE	750.00

Diagnosis Procedure Profile Complex Copay POS TOS Procedure Type Modifiers Adjustments Flagged Procedure Diagnosis Type Doctor Other

Procedure Code File

If you are interested in learning more about purchasing ehrTHOMAS, please contact Genius Solutions at 586-751-9080 (out-of-Michigan: 800-645-0955) or email us at Sales2@geniussolutions.com.

Searching Diagnosis and Procedure Codes (9.5.11)

To enable easier look-up of Procedure and Diagnosis codes, a new System Setting called CodeListStart has been created. This setting will work in the search boxes of the Procedure Code and Diagnosis Code file list boxes. If the System Setting has a value of 1, the cursor will default to the search box. If the System Setting has a value of 2, the cursor will default to the list of codes.

Insurance Codes (9.5.14)

Insurance Codes may now be searched by Address in addition to Code and Name. Use the drop-down menu to select either Code, Name, or Address to begin a search.

Insurance

Insurance Financial

Search 123 MAIN Address Show Expired

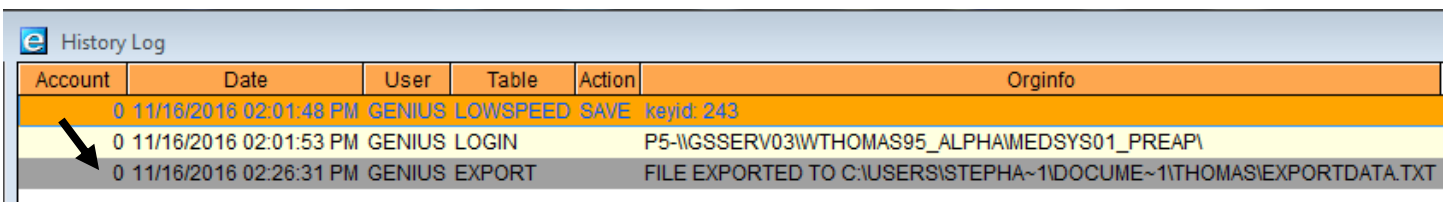
Security (9.5.14)

The security on the Patient List and Patient List printout has been improved to display only the last four digits of the Patient's Social Security Number in ***-**-XXXX format. The searching capabilities within the Patient List remain the same.



Acct No.	Name	Address	City, State, Zip	Dr	Phone	DOB	Cash	Ins	Social	CaseNum
1000	GENIUS, ROYCE D	123 ANY STREET	ROYAL OAK, MI 48067	BW	248-543-0000	07/27/1948	0.00	0.00	***-**-0000	
1010	GENIUS, CHARLES	123 ANY STREET	DETROIT, MI 48224	BH	313-926-0000	05/28/1949	-36.50	0.00	***-**-0000	
1020	SOLUTIONS, DIANE E	123 NORTH MAIN STREET	BIRMINGHAM, MI 48009	BH	248-210-0000	10/31/1960	0.00	0.00	***-**-0000	
1030	SOLUTIONS, CIERA	123 NORTH MAIN STREET	MADISON HTS, MI 48071	BF	248-850-0000	07/29/1993	0.00	0.00	***-**-0000	
1040	GENIUS, WILLIAM	123 ANY STREET	BERKLEY, MI 48072	BK	248-794-0000	10/09/1953	-20.00	0.00	***-**-0000	
1050	GENIUS, STEVEN	123 ANY STREET	SOUTHFIELD, MI 48033	BH	248-796-0000	12/15/1966	0.00	0.00	***-**-0000	
1060	SOLUTIONS, LYNN	123 NORTH MAIN STREET	ROYAL OAK, MI 48073	BK	248-762-0000	05/21/1971	0.00	0.00	***-**-0000	
1070	GENIUS, JAMES	123 ANY STREET	WARREN, MI 48093	BK	586-693-0000	11/28/1946	0.00	242.00	***-**-0000	

In addition, an item will be logged in the History Log as "Export" and the path exported when Patients are exported from the Patient List. This information is useful to keep track of when patient identifiable information is exported out of eTHOMAS.



Account	Date	User	Table	Action	Orginfo
0	11/16/2016 02:01:48 PM	GENIUS	LOWSPEED	SAVE	keyid: 243
0	11/16/2016 02:01:53 PM	GENIUS	LOGIN		P5-WGSSERV03WTHOMAS95_ALPHA MEDSYS01_PREAP
0	11/16/2016 02:26:31 PM	GENIUS	EXPORT		FILE EXPORTED TO C:\USERS\STEPHA~1\DOCUME~1\THOMAS\EXPORTDATA.TXT

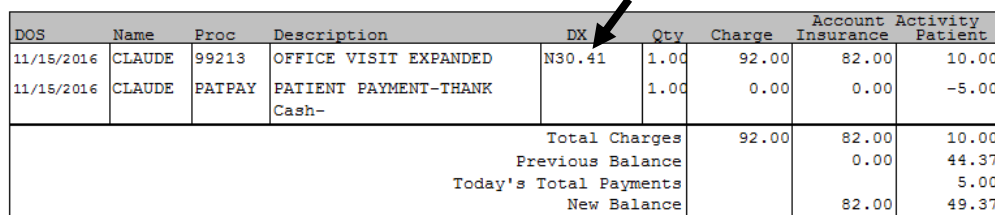
ICD10

Patient Receipts (9.5.10)

The ICD-10 diagnosis code(s) will now print for all receipt types.

Guarantor:
JOHN SMITH
123 MY PLACE
DETROIT, MI 48221

Patient:
CLAUDE GENIUS
123 ANY STREET
DETROIT, MI 48221-1659



DOS	Name	Proc	Description	DX	Qty	Charge	Account Insurance	Activity Patient
11/15/2016	CLAUDE	99213	OFFICE VISIT EXPANDED	N30.41	1.00	92.00	82.00	10.00
11/15/2016	CLAUDE	PATPAY	PATIENT PAYMENT-THANK Cash-		1.00	0.00	0.00	-5.00
Total Charges						92.00	82.00	10.00
Previous Balance							0.00	44.37
Today's Total Payments								5.00
New Balance							82.00	49.37

Check DX Codes (9.5.21)

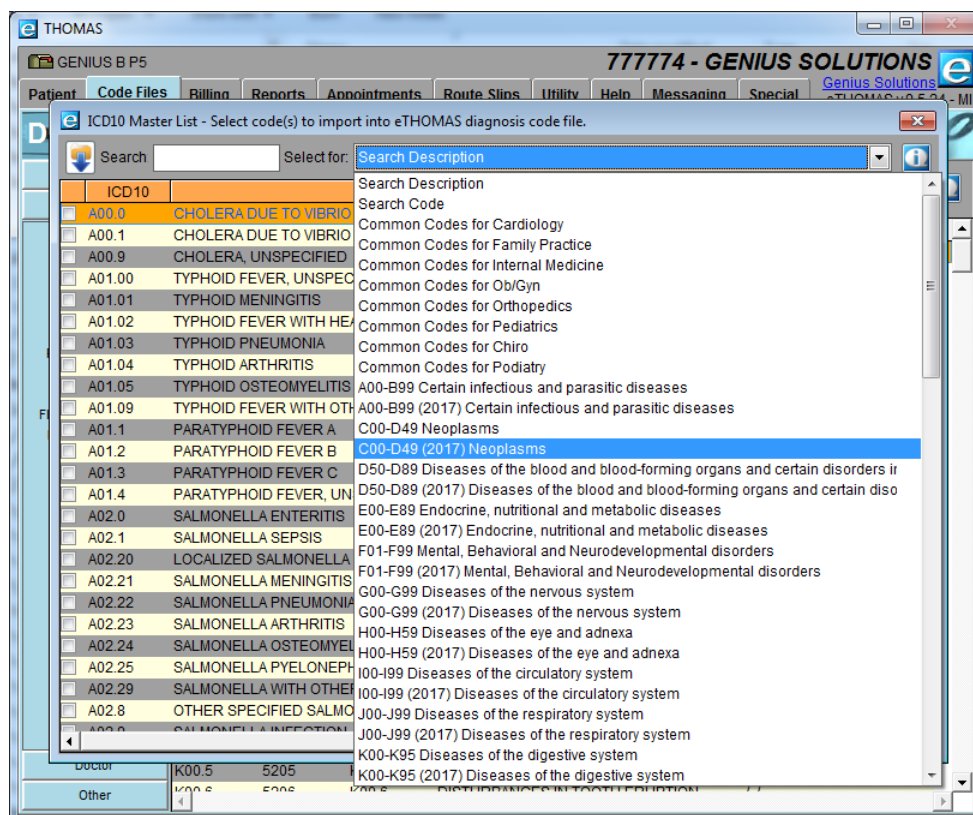
Under Utility | Maintenance | Check DX Codes, when a code is expired we will now display the code description. This allows users to easily identify the code that has expired.



Key Code	Your ICD10	Master ICD10	Your ExpDT	Master ExpDT	Your EMDT	Master EMDT	Your Desc	Master Desc	Your ICD9	Master ICD9
K05.21	SAME	SAME	11	09/30/2016	11	11	AGGRESSIVE PERIODONTITIS, LOCALIZED	AGGRESSIVE PERIODONTITIS, LOCALIZED	SAME	SAME
K05.31	SAME	SAME	11	09/30/2016	11	11	CHRONIC PERIODONTITIS, LOCALIZED	CHRONIC PERIODONTITIS, LOCALIZED	SAME	SAME

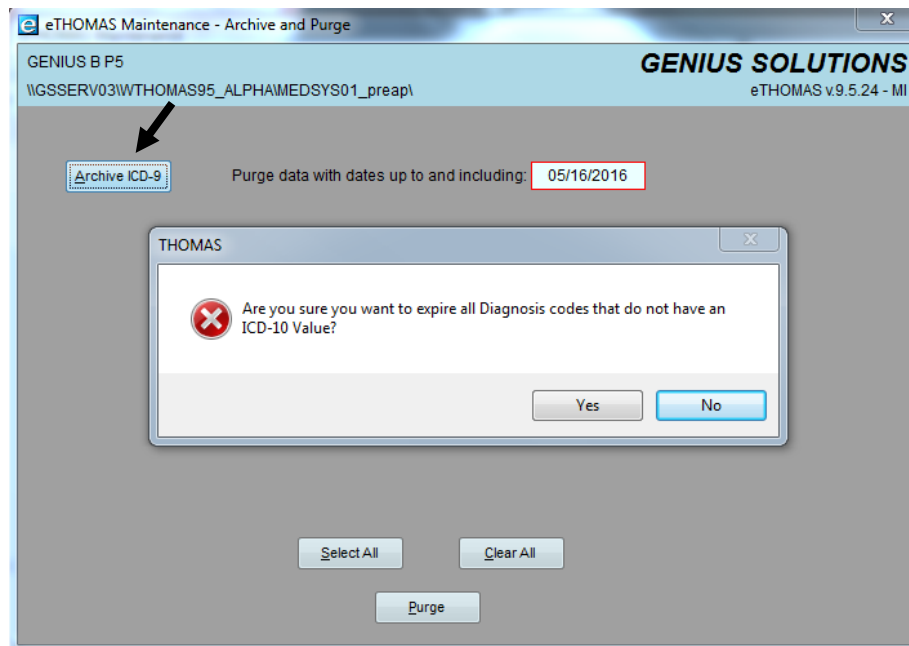
New ICD10 Codes (9.5.21)

The program has been updated to include ICD10 diagnosis code list for fiscal year 2017. From the ICD10 Master List, accessed through Code Files | Procedure | Diagnosis, users select new codes by using the “Select for” drop-down menu. By default, the Select for is Search Description. From the drop-down, choose the category without “2017” next to it will include all codes in that category, including new codes for 2017. Choose the category with “2017” next to it to see get a list of just the new codes for 2017. Improvements were made to the ICD10 master list to include the expiration date and effective date that are contained in this file.

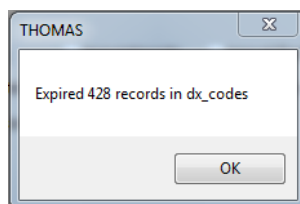


Purge and Archive (9.5.11)

An "Archive ICD-9" button has been added to the eTHOMAS Maintenance utility in the Purge and Archive area. When this button is selected, diagnosis codes that do not have a value in the "ICD-10 Code" and do not have an Expiration date will add an Expiration of 10/01/2015. Click Yes to expire the codes. Click No to quit the expiration process.



Once the program has finished, a message will appear with how many codes were expired.



These expired codes may still be accessed by using the "Show Expired" checkbox from within the Diagnosis Code file.



The Maintenance Program is typically accessed by the manager of the office. No one can be in the medsys directory of eTHOMAS when you are accessing the Maintenance Program. There is typically a shortcut to the Maintenance Program on the eTHOMAS Server (main computer). Genius Solutions recommends that you backup your eTHOMAS system prior to using the Maintenance Program.

HealthCare Referral Forms (9.5.11)

The HealthCare Referral Form (Patient | Utility | Patient Referrals) has been modified to accommodate the ICD-10 diagnosis code.

HealthCare Referral Form
GENIUS SOLUTIONS - REQUEST FOR REFERRAL

Date Written 11/15/2016 Revised Referral ☐ Printed on 11/15/2016 Tuesday 15:22:42

Patient Name GENIUS, CLAUDE Birthdate 02/05/2010
Member Id# XYL900001536
Plan Name MEDICARE PLUS BLUE

Check if Applicable ☐ Worker's Comp ☐ Auto Accident

To: REFERRAL COORDINATOR	FROM:
PCP Name: DONALD DUCK Tax Id: Plan Assigned Id: Phone Number: 586-751-9080 Fax Number:	Provider Name: MICKEY MOUSE Tax Id: 333223333 Plan Assigned Id: Address: 7177 MILLER DRIVE WARREN MI 48092 Phone Number: 586-751-9080 Fax Number:

Dx Code: A12.345 Start Date: / / End Date: / /

Location: ☒ Provider's Office ☐ Outpatient Hospital ☐ ER/UCC
Facility No#: Facility Name:
Date of Service: _____

Statements

Several changes have been made to patient statements. They are outlined below.

Statement Prebilling Report (9.5.24)

Changes have been made to the Statement Prebilling report. These changes include:

- The system setting STMTPREBILLPHONE has been updated. If it is active with a value of 1, the patient's preferred method of contact, as well as the corresponding contact information will be on the statement prebilling report. The Preferred Method of Contact will display as follows:
 - HP = Home Phone
 - WP = Work Phone
 - CP = Cell Phone
 - OP = Other Phone
 - EM = Email
 - TX = Text/SMS
 - PM = Post Mail (patient's post mail address will not print on the report)
- The prebilling report will no longer separate by doctor.
- The prebilling report will now print out in the same order you choose to prepare statements.
- The last patient payment date and last patient payment amount are now included on the prebilling report.

STATEMENT PREBILLING

Printed on 11/01/16 Tuesday 9:46:40

PATIENT	NOTE	LAST STMT	CASH	LAST PAY	LAST PAY AMT
LEONARD GENIUS - 401500 248-497-0000	HP	04/19/12	4.64	08/21/14	4.64
DAVID GENIUS - 401630 313-412-0000		10/07/16	490.00	10/15/14	45.00
JOHN GENIUS - 402770 248-646-0000		11/18/14	24.31	11/21/14	24.31
DENNIS GENIUS - 414230 248-363-0000	WP	10/07/16	70.00	11/01/16	10.00

Cycle Statements (9.5.24)

Cycle statements allow you to prepare statements for patients that have had new activity posted to their account since their last statement. This includes charges, payments, transfer balances, debits and credits. This can be used in conjunction with Min Days Since Last Stmt. Enter the number of days since the patient has received their last statement. This will pull any patients who have not received a statement in the designated number of days.

EXAMPLE

The following patient statements were generated on November 1st.

The screenshot shows the 'Statement Prepare' window with the following sections:

- Summary:** Patients Found: 366, Bad Found: 0, Patients Selected: 366.
- Step 1 Prebilling:** Includes buttons for 'Print', 'Display on Screen', and 'View Bad'.
- Step 2 Alignment:** Includes input fields for 'Top Margin' and 'Left Margin' (both set to 0), and buttons for 'Test' and 'Save'.
- Step 3 Messages:** Includes 'Line 1' (BILLING QUESTIONS? CALL 586-000-0000) and 'Line 2' (MAKE CHECKS PAYABLE TO GENIUS SOLUTIONS). There is also a 'Permanent' checkbox.
- Step 4 Prepare Statements:** Includes buttons for 'Prepare' and 'Display on Screen'.
- Patient List Table:** A table with columns: Account, Name, Bal, LastPayDt, LastPayAmt. It lists 20 patients, including ALICE GENIUS, MICHAEL J GENIUS, ARNOLD GENIUS, etc.
- Buttons:** 'Update', 'Tag Names', and 'Neg Balance' are located at the bottom right.
- Footer:** A message states: 'Some Patients have Unallocated Payments. Click the Neg Balance Button to view a list of these patients.'

Statements Prepared on Nov. 1st

By November 3rd there are many patients with new charges, payments or transfer balances (TRABAL) that have been added to their accounts. Instead of waiting until the next month to send a statement to this patient, you can run Cycle Statements. This feature will generate statement only for patients who have had new activity since their last statement.

Statements

Billing
Claims
Statements
Billing Validation
Post Charges
Post Ins Payment
Post Pat Payment
Other Claim Status
Patient Contracts
Stmnt/Service Charge
Capitated Checks
Inquiry Claims
AutoPost
Insurance Checks
Auto WriteOff
AutoCharge
Reprint Invoice
Profit Recovery Pat
Profit Recovery Ins
Posting Validation
AutoPost Exceptions

Date From: 11/01/2016
Date To: 11/03/2016
Type: Individual
Range: All Patients
Min Cash Bal:
Min Days Since Last Stmt:
☐ Include \$0.00 Balances
☐ Diagnosis on Statement
☒ Cycle Statements
Prepare

Order By: Last Name
Prepare For: Cash
StmntType: Running Total
Location: System Summary
Doctor: System Summary
Note: If include \$0.00 balances is checked, may pull all patients.

Statement Prepare

Patients Found: 48 Bad Found: 0
Patients Selected: 48

Step 1 Prebilling:
Print Display on Screen View Bad

Step 2 Alignment:
Top Margin: 0 Test
Left Margin: 0 Save

Step 3 Messages:
Line 1:
BILLING QUESTIONS? CALL 586-000-0000
Line 2:
MAKE CHECKS PAYABLE TO GENIUS SOLUTIONS
Permanent:
Edit

Step 4 Prepare Statements:
Prepare Display on Screen

Account	Name	Bal	LastPayDt	LastPayAmt
464600	ALICE GENIUS	104.99	11/03/2016	25.00
492980	ROBIN GENIUS	58.30	12/01/2014	80.00
547770	JOHN GENIUS	30.79	/ /	0.00
10580	DENNIS GENIUS	20.00	12/03/2014	20.00
10780	LARRY GENIUS	12.24	10/03/2014	79.68
11160	JAKE GENIUS	21.70	/ /	0.00
12570	SHAWN GENIUS	142.44	12/19/2014	35.00
13660	JOHN GENIUS	81.53	12/10/2014	186.67
13810	BARRY H GENIUS	21.90	/ /	0.00
13870	JEFFERY GENIUS	80.00	/ /	0.00
14030	CHARLES GENIUS	43.55	/ /	0.00
14060	MARK GENIUS	50.00	/ /	0.00
14250	MATTHEW GENIUS	90.55	12/02/2014	110.00
14260	WILLIAM GENIUS	10.22	12/03/2014	70.00
14640	ROBERT GENIUS	99.48	12/12/2014	30.00
14670	ROBERT GENIUS	112.71	12/12/2014	30.00
14720	ROBERT J GENIUS J	19.88	/ /	0.00
14730	MICHAEL GENIUS	249.80	12/15/2014	35.00

Update Tag Names Neg Balance
Some Patients have Unallocated Payments. Click the Neg Balance Button to view a list of these patients.

Statements Prepared on Nov. 3rd

For Running Totals, the patient must have new activity within the To and From date range, as well as activity since their last statement. This does not apply to other statement types, as they will gather data based only on the last statement date.

EXAMPLE

If the patient's last statement was on November 1st and there was new activity on November 2nd, then November 2nd must be included in the "Date From" field when running statements. If it is run from November 3rd, it will not find that patient because there is no new activity within the date range.

Alternate Phone Number (9.5.24)

Users may now enter an alternate phone number in the Statement Address from the Location (Utility | Data | Locations) to appear on patient statements. If the Statement Address and phone number are filled in the alternate phone number will appear on Patient Statements. If the Phone Number is not filled in the system uses the Phone Number from the Location. **The Phone Number is used in conjunction with the Statement Address and not by itself.**

Payment Methods (9.5.24)

Patient statements will now display the payment method attached to each payment.

Insurance Payments

Insurance payments will now display name of the insurance company that made the payment. The insurance name will display whatever is in the Name field in the insurance code. The insurance name is displayed just before the check number. To display insurance payments, you must run statements by Cash/Insurance.

DATE	PATIENT	DESCRIPTION	ACCOUNT ACTIVITY	
			INSURANCE	PATIENT
MARY D SOLUTIONS				
		Date Statement from 10/02/2016 to 11/01/2016		
		Previous Balance		3.29
10/15/2016		99212 EP PROBLEM FOCUSED	65.00	
11/01/2016		INSURANCE PAYMENT	-44.92	
		MEDICARE PLUS BLUE-CHECK#1234		
11/01/2016		PARTICIPATING ADJUSTMENT	-20.08	

Patient Payments

Patient payments will now display the payment type, along with any reference information (check number, for example).

DATE	PATIENT	DESCRIPTION	ACCOUNT ACTIVITY	
			INSURANCE	PATIENT
DENNIS GENIUS				
		Date Statement from 10/02/2016 to 11/01/2016		
		Previous Balance		80.00
11/01/2016		PATIENT PAYMENT-THANK YOU!		-50.00
		Check-5547		

Statement Notes (9.5.13)

The Stmt Note button has been added to the Post Insurance Payment screen. The Statement Note will add an additional line on the Transaction Ledger and on the Statement (if Show on Statement is checked). If the Date From on the stmt note falls within the Date From and Date To of the Statement then the note will be put on the statement. The Stmt Note will use the Procedure Code ~NOTE. Add the Procedure Code ~NOTE if it is not in the Procedure Codes (Code Files | Procedure | Procedure).

Statement notes will now print on Running Total, Open Items and Collection statement types. The system setting StmtShowReference must be activated with a value of 1. This will only display statement notes that have "Show Note on Statement" checked.

Add Statement Note

P5 - 416140 GENIUS, CLAUDE
Cash: 44.37 Ins: 0.00

Date From: 11/07/2016 Date To: 11/07/2016

Doctor: MM - MICKEY MOUSE

Location: GS - GENIUS SOLUTIONS

Code:

Remarks: Please pay \$10 per week, per our agreement.

☒ Show On Statement

Transaction Edit

P5 - 416140 GENIUS, CLAUDE
Cash: 44.37 Ins: 0.00

DOS From: 11/07/2016 To: 11/07/2016 Claim: 0 Ref ID: 55183
 Procedure: ~NOTE Misc Date: / / Sys Date: 11/07/2016 Closed: NO
 Invoice No: 0 Activity: NO

Doctor: MM - MICKEY MOUSE
 Location: GS - GENIUS SOLUTIONS
 Note: PLEASE PAY \$10 PER WEEK, PER OUR AGREEMENT.

☒ Show Note on Statement

Entered by: GENIUS 11/07/2016 11:35:49 AM

History Recalc Show Enc

Electronic Statements via gsTransport (9.5.24)

Electronic Statements and Profit Recovery files can now be sent through GS Transport. When you click on the Send button within the Statement Prepare screen or the Create File button within the Profit Recovery screen, the program will no longer open the Data Sender program, but instead the file will automatically be sent through GS Transport.

Statement Prepare

Patients Found: 364 Bad Found: 0
 Patients Selected: 364

Step 1 Prebilling:
 Print Display on Screen View Bad

Step 2 Alignment:
 Top Margin: 0 Test
 Left Margin: 0 Save

Step 3 Messages:
 Line 1:
 BILLING QUESTIONS? CALL 586-000-0000
 Line 2:
 MAKE CHECKS PAYABLE TO GENIUS SOLUTIONS
 Permanent:
 Edit

Step 4 Prepare Statements:
 Prepare Prepare Electronic File Send

Account	Name	Bal	LastPayDt	LastPayAmt
401500	LEONARD GENIUS	4.64	08/21/2014	4.64
401630	DAVID GENIUS	440.00	11/01/2016	50.00
402770	JOHN GENIUS	24.31	11/21/2014	24.31
414230	DENNIS GENIUS	30.00	11/01/2016	50.00
416140	CLAUDE GENIUS	44.37	09/29/2014	48.37
418550	KENNETH GENIUS	34.07	12/08/2014	70.51
418700	STEVEN GENIUS	7.64	11/26/2014	7.64
432630	LAYMAN O GENIUS	9.27	12/02/2014	9.70
443950	KENNETH W GENIUS	30.00	11/12/2014	30.00
454180	HENRY E GENIUS	3.01	08/06/2014	15.38
455980	JACK GENIUS	7.41	12/02/2014	10.00
460680	LON GENIUS	0.08	11/21/2014	45.00
461470	VINCENT GENIUS	413.61	01/05/2015	140.00
462610	WILLIAM GENIUS	80.00	11/12/2014	17.46
462960	JAMES A GENIUS	24.30	11/24/2014	11.49
463760	JOHN E GENIUS	25.00	12/08/2014	25.00
463930	THOMAS GENIUS	92.00	12/05/2014	46.00
465300	MICHAEL J GENIUS	67.54	/ /	0.00

Update Tag Names Neg Balance

Some Patients have Unallocated Payments. Click the Neg Balance Button to view a list of these patients.

Prepare Statements Screen

GENIUS B P5 77774 - GENIUS SOLUTIONS eTHOMAS v9.5.24 - MI

Patient Code Files **Billing** Reports Appointments Route Slips Utility Help Messaging Special

Profit Recovery Pat

Billing Clear All Select All Selected 449 of 449 Create File

Include	Acct	Name	Cash Bal	Days Old	Last Pay/Srv	Service Dt	Doc Loc
<input checked="" type="checkbox"/>	517350	SOLUTIONS, CAROL	100.00	677	01/08/2015	01/08/2015	BH 01
<input checked="" type="checkbox"/>	464600	GENIUS, ALICE	137.00	679	01/06/2015	12/22/2014	MM GS
<input checked="" type="checkbox"/>	542780	GENIUS, LAWRENCE	92.00	679	01/06/2015	10/28/2014	BS 01
<input checked="" type="checkbox"/>	13770	SOLUTIONS, INES	140.00	679	01/06/2015	11/17/2014	BH 01
<input checked="" type="checkbox"/>	416140	GENIUS, CLAUDE	44.37	680	09/29/2014	12/12/2014	BK 01
<input checked="" type="checkbox"/>	418550	GENIUS, KENNETH	34.07	680	12/08/2014	12/19/2014	BK 01
<input checked="" type="checkbox"/>	444740	SOLUTIONS, DRUCILLA	45.00	680	12/24/2014	12/11/2014	BH 01
<input checked="" type="checkbox"/>	461760	SOLUTIONS, BETTY	9.13	680	12/09/2014	12/09/2014	BF 01
<input checked="" type="checkbox"/>	463760	GENIUS, JOHN E	25.00	680	12/08/2014	12/08/2014	BH 01
<input checked="" type="checkbox"/>	464990	SOLUTIONS, MARGARET	21.18	680	12/02/2014	12/02/2014	BH 01
<input checked="" type="checkbox"/>	467820	GENIUS, JERRY	25.00	680	12/08/2014	12/08/2014	BH 01
<input checked="" type="checkbox"/>	485390	GENIUS, JOHN	18.97	680	12/01/2014	12/08/2014	BH 01
<input checked="" type="checkbox"/>	490620	GENIUS, SAMUEL	9.49	680	12/09/2014	12/09/2014	BH 01
<input checked="" type="checkbox"/>	510120	SOLUTIONS, JOAN	30.17	680	05/23/2014	12/12/2014	BH 01
<input checked="" type="checkbox"/>	510660	GENIUS, DURAY	25.00	680	12/16/2014	12/09/2014	BF 01
<input checked="" type="checkbox"/>	520340	GENIUS, DOUGLAS J	30.00	680	08/28/2014	12/12/2014	BW 01
<input checked="" type="checkbox"/>	536720	SOLUTIONS, JACQUELYN	30.00	680	01/07/2015	12/10/2014	BW 01
<input checked="" type="checkbox"/>	536900	SOLUTIONS, GLADYS	4.64	680	12/09/2014	12/09/2014	BH 01
<input checked="" type="checkbox"/>	542250	SOLUTIONS, ARLENE	75.86	680	01/05/2015	12/10/2014	BS 01
<input checked="" type="checkbox"/>	542740	GENIUS, NICK	45.00	680	10/02/2014	12/08/2014	BH 01
<input checked="" type="checkbox"/>	440	SOLUTIONS, MARY D	3.29	680	12/22/2014	12/08/2014	BH 01
<input checked="" type="checkbox"/>	3630	SOLUTIONS, CLAIRE	25.00	680	11/25/2014	12/26/2014	BK 01
<input checked="" type="checkbox"/>	7590	SOLUTIONS, JENNIFER	12.40	680	12/08/2014	12/16/2014	BS 01
<input checked="" type="checkbox"/>	8570	SOLUTIONS, LORNA	14.80	680	09/30/2014	12/05/2014	WH 01
<input checked="" type="checkbox"/>	10090	GENIUS, JAMES	9.13	680	12/22/2014	10/14/2014	BS 01
<input checked="" type="checkbox"/>	14250	GENIUS, MATTHEW	90.55	680	12/02/2014	12/02/2014	BS 01

Profit Recovery Screen

Send Files (9.5.24)

Send Files also allows users to send electronic files such as electronic statements or Profit Recovery files to Genius Solutions. This feature can be used if a file was unable to be sent to Genius Solutions at the time it was prepared. From the Billing tab, click on Send Files from the left menu. Under File Type, select the type of file to be sent. Next to File, click the browse button to select a file to send. Click the Send button to send the file to Genius Solutions.

GENIUS B P5 77774 - GENIUS SOLUTIONS eTHOMAS v9.5.24 - MI

Patient Code Files **Billing** Reports Appointments Route Slips Utility Help Messaging Special

Send Files

Billing

File Type: Statement

File:

Send

Claims
Statements
Billing Validation
Post Charges
Post Ins Payment
Post Pat Payment
Other Claim Status
Patient Contracts
Stmnt/Service Charge
Capitated Checks
Inquiry Claims
AutoPost
Insurance Checks
Auto WriteOff
AutoCharge
Reprint Invoice
Profit Recovery Pat
Profit Recovery Ins
Posting Validation
AutoPost Exceptions
Send Files

Claim Detail Statements (9.5.24)

Changes have been made to the Claim Detail statements to provide greater readability. The changes have been outlined below:

- Claim Detail statements will now only print claims that have an outstanding cash balance on them.
- The claim number has been added to the statement for easy identification of each claim.
- Claim Detail can only be run by Location Summary and Doctor Summary. Additionally, you must run Claim Detail statements for Cash and Insurance balances.
- Items without a claim number will be displayed at the top of the statement. This includes patient debits (PATDEB) and statement service charges.
- Users will receive a prebilling message that says “Balance Discrepancy” on patients who have unallocated or invalid information in their ledger. It is recommended that you run system Reconcile and Find Unapplied prior to running Claim Detail statements. These options can be found under Utility | Maintenance.
- Patient payments and credits can be allocated to multiple claims. In this instance, the payment line will state that a “partial payment” with the amount that was applied to that claim.

DATE	PATIENT	DESCRIPTION	ACCOUNT ACTIVITY	
			INSURANCE	PATIENT
DAVID GENIUS				
11/07/2014		PATIENT ACCOUNT DEBIT		100.00
04/02/2014		99213 OFFICE VISIT EXPANDED	ClaimNo: 3504	45.00
10/15/2014		PARTIAL PATIENT PAYMENT-THANK YOU!		-15.00
		Credit Card-502798		
04/23/2014		99212 OFFICE VISIT PROBLEM FOCUSED	ClaimNo: 4245	45.00

Billing

Quantity Decimals (9.5.12)

Changes have been made to the Quantity within eTHOMAS to accommodate different billing needs. Quantities greater than 999 but less than 10,000 may now be billed in eTHOMAS. Quantities including decimals can be used when using one of the following special indicators within the procedure code: ID-Include Decimal, N4-NDC in 5-4-2 format, and NR-NDC/Hemoglobin/Hematocrit/Creatin. If you try to enter a decimal on a procedure code that does not have one of these special indicators, you will receive a message that says “The Quantity cannot include a decimal”. **You may only bill quantities greater than 999 and quantities with decimals electronically.** If the Quantity is over 999 and a paper claim is trying to be generated, users will receive a prebilling error message that says “Paper billing with large QTY”.

The following reports have been adjusted to include the larger quantity:

- Daily Activities Report
- Procedure Summary Report
- Referral Procedure Summary Report
- Service History Report
- Sales Tax Report (2)
- Transaction Billing/Payment Report
- Service Analysis Report

Anesthesia Billing (9.5.14)

There have been some improvements to the Anesthesia Billing Module. View the Anesthesia Billing Module for more information <http://www.media.geniussolutions.com/95/Anesthesia.pdf> or access this information by clicking the "GS Documentation" link; select the "Anesthesia Billing Module" document.

Claim Date (9.5.23)

A modification has been made to the Transaction and Claim Edit screens so that it cannot be saved if there is not a System Date. This information is crucial for many reports within eTHOMAS to calculate properly.

Editing Reason Codes (9.5.14)

The Audit Reason from the Post Insurance Payment may now be edited through the History of the Transaction Edit. Within the Audit Reason Edit, users may edit/modify/add up to 30 characters. This feature is useful if the incorrect reason is chosen at the time of posting, or if additional information needs to be added afterward.

To access this information double click on the Reason column from Patient | Ledger > open the date of service > History button.

Transaction Edit

P5 - 920 SOLUTIONS, ALEXANDER
Cash: 25.50 Ins: 0.00

DOS From: 11/17/2016 To: 11/17/2016 Claim: 12428 Ref ID: 55187

Transaction History

P5-920 SOLUTIONS, ALEXANDER
Cash: 25.50 Ins: 0.00

Edit the Reason by double clicking on the Reason; edit the Transaction by double clicking on the Ref ID; edit the Claim by double clicking any of the other columns.

Claim	Line	Proc	Amount	System Date	Service Date	Apply Date	Reason	Ref ID
12428	I	INSPAY	140.00	11/17/2016	11/17/2016	11/17/2016		55188
12428	P	PARADJ	19.50	11/17/2016	11/17/2016	11/17/2016		55189
12428	T	TRABAL	25.50	11/17/2016	11/17/2016	11/17/2016	Copay	55190

Reference: Entered by: GENIUS 11/17/2016 09:15:02 AM

Buttons: History, Recalc, Additional Info, Show Enc

Checkboxes: Interest, Collection, Mail List, Statement, A.D.A.M.S

Edit the Reason and click Save to save the changes.

Transaction History P5-920 SOLUTIONS, ALEXANDER
 Cash: 25.50 Ins: 0.00

Edit the Reason by double clicking on the Reason; edit the Transaction by double clicking on the Ref ID; edit the Claim by double clicking any of the other columns.

Claim	Line	Proc	Amount	System Date	Service Date	Apply Date	Reason	RefID
12428 I								55188
12428 P								55189
12428 T								55190

Audit Reason Edit

Reason: COPAY/COINSURANCE

The ledger will reflect the updated information.

11/17/2016	TRABAL	25.50	0.00	0.00	25.50	0.00	0.00	0.00	0.00	12428	55190
11/17/2016	10021	COPAY/COINSURANCE Ref: 55187									

Assumed and Relinquish Dates (9.5.19)

Two new date fields have been added to the claim header; Assumed and Relinquish dates. If used, will report in Loop 2300 DTP*090 (Assumed Date) and DTP*091 (Relinquish Date) of the 5010 electronic claim file. Enter the dates that the physician assumed and relinquished care for the patient. This is generally used for patients who are receiving post-operative care.

Claim Header P5 - 531930 GENIUS, ROBERT
 Cash: 0.00 Ins: 453.00

Code: OV Description: OFFICE ☐ X Ray Taken

General **All Fields**

DX/Ray/Serv Date: Other Date(15):

Illness/Injury Date(14): Injury date related to:

Total Disability(16): To: Referral(17):

Part. Disability: To: Facility(32):

Hosp Admission(18): To: Att Physician:

Assumed: 10/01/2016 Relinquish: 10/04/2016 Ordering Physician:

Return To Work Date: First Consulted Date:

Other Claim ID(11b): Ref (Last Seen) Date:

Prior Auth(23): Box 10D:

Related to Accident(10) ☐ Auto ☐ Work ☐ Other Hospice Employee Indicator:

Resub Code(22):

Add1 Claim Info(19):

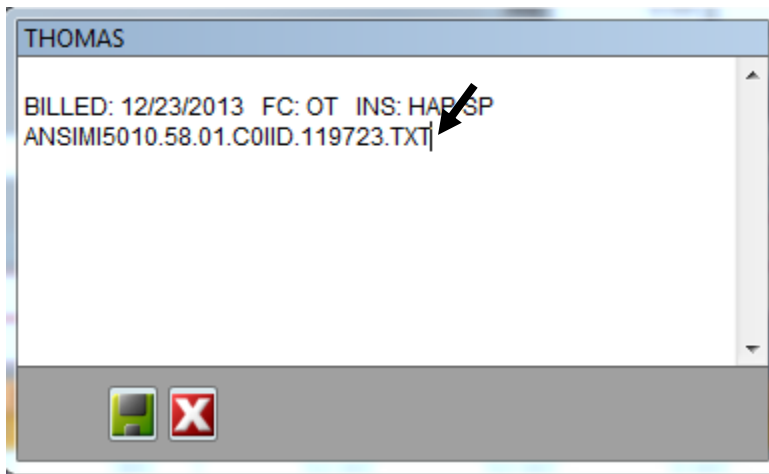
Subluxation: Nature of Condition: State: MI

Category: Acute Manifestation Date: Hour:

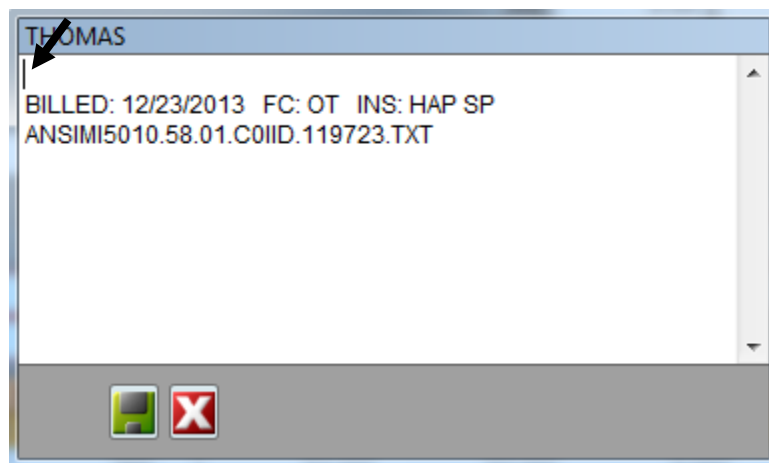
Claim Notes (9.5.24)

A new system setting has been created called NoteCursor. This setting will determine where the cursor will default in the Rpt Note, Claim Note and Ins Remark buttons within the Claim Information screen.

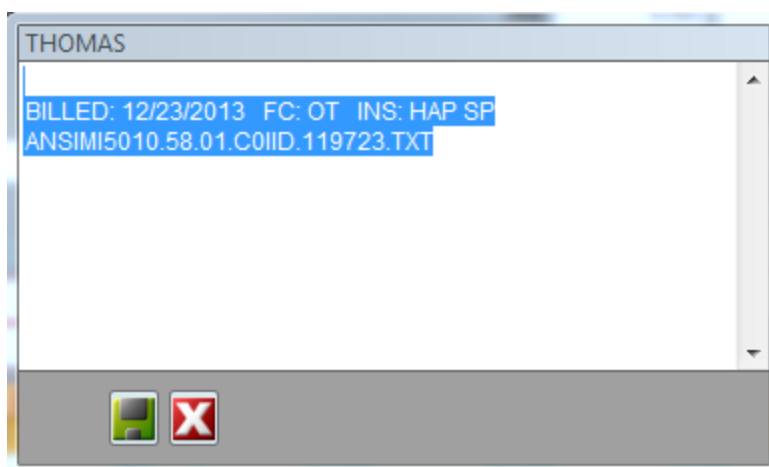
By default, the cursor will reside at the end of the note. With a value of 1, the cursor will default at the beginning of the note. With a value of 2, the note is highlighted upon entry.



Default



NoteCursor with a value of 1



NoteCursor with a value of 2

Expired Insurance Codes (9.5.20)

A modification has been made when an Insurance Code (Code Files | Insurance | Insurance) has been expired, the user will receive a Prebilling Warning that the Insurance Code is expired.

Name / Acct No	Claim#	From	To	Policy	Dr	Charge DX1	DX2
GENIUS, CALVIN P - 405270	12426	11/15/2016	11/15/2016	BC/BC	BS	92.00 1101	
WARN Insurance Code expired							

Prepare Claim from Claim Information (9.5.24)

You can now prepare a claim from the Claim Information screen. Clicking on the Prep Claim button will bring you to the Prepare Claims screen where a paper claim or electronic file can be generated for this claim. eTHOMAS will automatically enter in the patient's account number and claim number into the Prepare Claims screen for ease of use. The Prep Claim button will not be available if the claim is in one of the following statuses: Open, Complete, or Hold.

Claim Information

P5 - 910 SOLUTIONS, MARILYNN
Cash: 42.38 Ins: 92.00

Claim No: 12423 Date: 11/01/2016 Last Paid: Invoice: 0

Doctor: MM - MICKEY MOUSE ICN: Location: GS - GENIUS SOLUTIONS

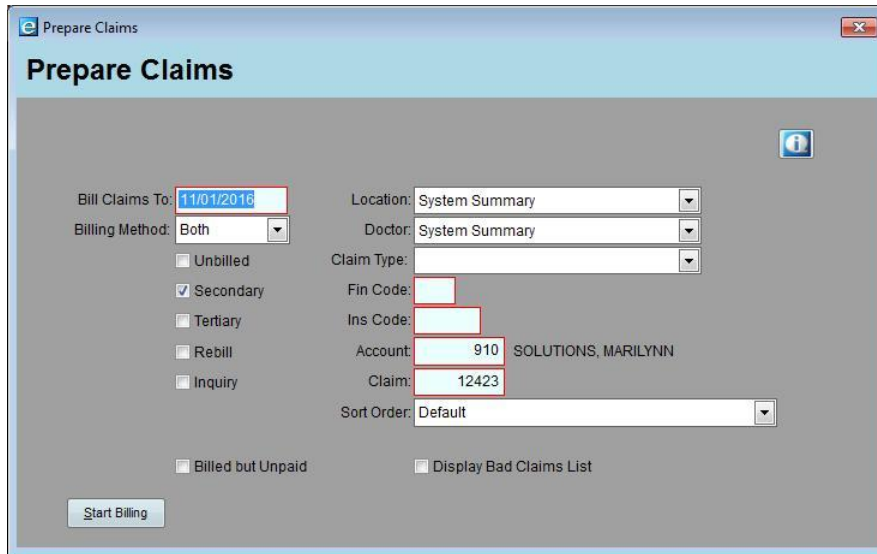
Claim Type: Billing Method: Either Billing Status: Secondary Last Check#: Header Code: OV Last Check Date: Dc Ind: Delay: Dc Type: Benefit: *DEFAULT BE Lab Info:

Diagnosis: A1 07819 B2 C3 D4 E5 F6 G7 H8 I9 J K L

Line	Date	Proc	DXPTR	Dr	Chrg Crdt	Exp Ins	Chrg Pat	Ins Bal	Cash Bal	S
1	10/23/2016	99213	1	MM	92.00	92.00	0.00	92.00	0.00	

OFFICE VISIT EXPANDED

Prep Claim Inquiry Medicaid Rpt Note Claim Note Ins Remark Update Credit Split Claim



Prepare Claims

Bill Claims To: 11/01/2016

Billing Method: Both

☐ Unbilled

☒ Secondary

☐ Tertiary

☐ Rebill

☐ Inquiry

☐ Billed but Unpaid

Location: System Summary

Doctor: System Summary

Claim Type:

Fin Code:

Ins Code:

Account: 910 SOLUTIONS, MARILYNN

Claim: 12423

Sort Order: Default

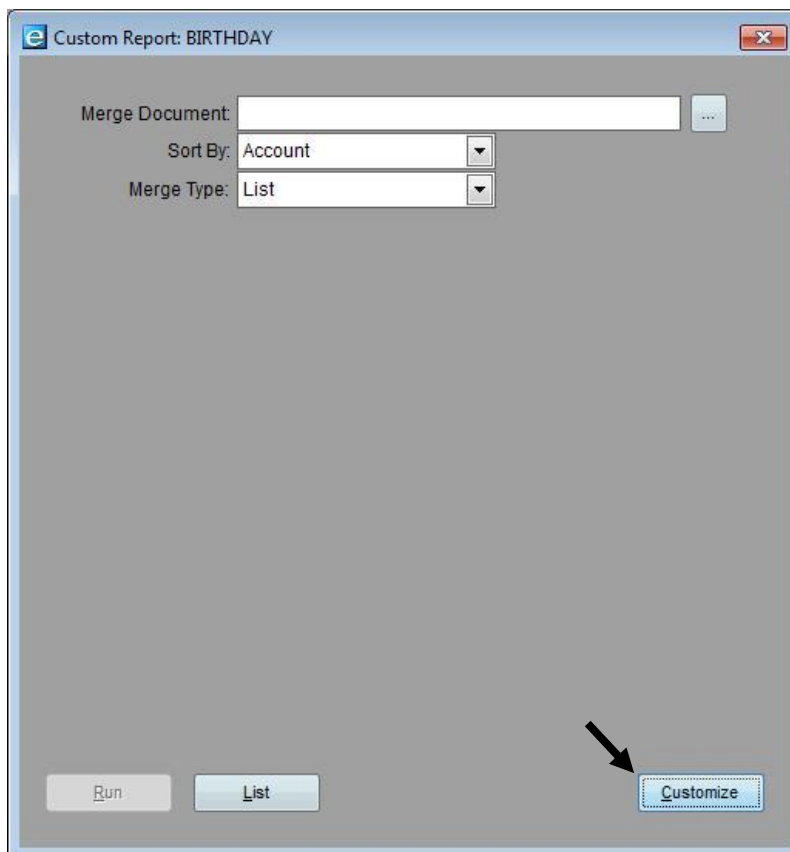
☐ Display Bad Claims List

Start Billing

Reports

Custom Reports (Customize Button) (9.5.24)

The following fields have been added to the Customize option under Custom Reports: Demo Group, Demo Group Desc, Demo Race, Demo Race Desc, Demo Religion, Demo Religion Desc, Demo Misc, Demo Misc Desc, and Demo Income. These fields are pulled from the patient demographic information located in Patient | Utility | Demographics. This feature is found after running a custom report then choosing Customize.



Custom Report: BIRTHDAY

Merge Document:

Sort By: Account

Merge Type: List

Run

List

Customize

Custom Report: BIRTHDAY

<input checked="" type="checkbox"/> Patient AcctNo	<input type="checkbox"/> Cash Balance	<input type="checkbox"/> Appt DOW	<input type="checkbox"/> Transact Proc	<input type="checkbox"/> Transact Doctor
<input type="checkbox"/> First_Name	<input type="checkbox"/> Ins Balance	<input type="checkbox"/> Appt Time	<input type="checkbox"/> Last Paid Date	<input type="checkbox"/> Guarantor DOB
<input type="checkbox"/> Mid_name	<input type="checkbox"/> Patient Age	<input type="checkbox"/> Appt Code	<input type="checkbox"/> Last Paid Amt	<input type="checkbox"/> Guarantor SS
<input type="checkbox"/> Last_Name	<input type="checkbox"/> LastDX	<input type="checkbox"/> Appt Code Desc	<input type="checkbox"/> Name of Guarantor	<input type="checkbox"/> Patient PMC
<input type="checkbox"/> Address	<input type="checkbox"/> Fin Code 1	<input type="checkbox"/> Appt Code2	<input type="checkbox"/> Address of Guarantor	<input type="checkbox"/> Patient Cell Phone
<input type="checkbox"/> City	<input type="checkbox"/> Fin Code Desc 1	<input type="checkbox"/> Appt Code Desc2	<input type="checkbox"/> City of Guarantor	<input type="checkbox"/> Policy Expire1
<input type="checkbox"/> State	<input type="checkbox"/> Fin Code 2	<input type="checkbox"/> Appt Dr Code	<input type="checkbox"/> State of Guarantor	<input type="checkbox"/> Policy Expire2
<input type="checkbox"/> Zip	<input type="checkbox"/> Fin Code Desc 2	<input type="checkbox"/> Appt Dr Name	<input type="checkbox"/> Zipcode of Guarantor	<input checked="" type="checkbox"/> Demo Group
<input type="checkbox"/> Home_Phone	<input type="checkbox"/> Ins Code1	<input type="checkbox"/> Appt Note	<input type="checkbox"/> Benefit Type	<input checked="" type="checkbox"/> Demo Group Desc
<input type="checkbox"/> Work_phone	<input type="checkbox"/> Ins Code2	<input type="checkbox"/> Name of Business	<input type="checkbox"/> Benefit Date From	<input checked="" type="checkbox"/> Demo Race
<input type="checkbox"/> Fax	<input type="checkbox"/> Ins Name1	<input type="checkbox"/> Address of Business	<input type="checkbox"/> Benefit Date To	<input checked="" type="checkbox"/> Demo Race Desc
<input type="checkbox"/> Otherphone	<input type="checkbox"/> Ins Name2	<input type="checkbox"/> City of Business	<input type="checkbox"/> Benefit Desc	<input checked="" type="checkbox"/> Demo Religion
<input type="checkbox"/> Email	<input type="checkbox"/> Ins Contract1	<input type="checkbox"/> State of Business	<input type="checkbox"/> Benefit Deductible	<input checked="" type="checkbox"/> Demo Religion Desc
<input type="checkbox"/> Birthdate	<input type="checkbox"/> Ins Contract2	<input type="checkbox"/> Zipcode of Business	<input type="checkbox"/> Benefit Max Visit	<input checked="" type="checkbox"/> Demo Misc
<input type="checkbox"/> Sex	<input type="checkbox"/> Ins Group1	<input type="checkbox"/> Phone of Business	<input type="checkbox"/> Benefit Max Benefit	<input checked="" type="checkbox"/> Demo Misc Desc
<input type="checkbox"/> SocSecurity	<input type="checkbox"/> Ins Group2	<input type="checkbox"/> Employer Id	<input type="checkbox"/> Benefit Num Visit	<input checked="" type="checkbox"/> Demo Income
<input type="checkbox"/> Marital Status	<input type="checkbox"/> Ins Sub FName1	<input type="checkbox"/> Clia No	<input type="checkbox"/> Benefit Used To Date	
<input type="checkbox"/> First Date	<input type="checkbox"/> Ins Sub FName2	<input type="checkbox"/> Name of Employer	<input type="checkbox"/> Benefit Copay	
<input type="checkbox"/> Last Date	<input type="checkbox"/> Ins Sub LName1	<input type="checkbox"/> Address of Employer	<input type="checkbox"/> Benefit Auth Number	
<input type="checkbox"/> Doctor Code	<input type="checkbox"/> Ins Sub LName2	<input type="checkbox"/> City of Employer	<input type="checkbox"/> Benefit Next Charge	
<input type="checkbox"/> Doctor Name	<input type="checkbox"/> Ins Srvcode1	<input type="checkbox"/> State of Employer	<input type="checkbox"/> Benefit Last Charge	
<input type="checkbox"/> Primary DX	<input type="checkbox"/> Ins Srvcode2	<input type="checkbox"/> Zipcode of Employer	<input type="checkbox"/> Benefit Charge	
<input type="checkbox"/> Secondary DX	<input type="checkbox"/> Ins Note1	<input type="checkbox"/> Date of Recall	<input type="checkbox"/> Next Appt 1	
<input type="checkbox"/> Alert	<input type="checkbox"/> Ins Note2	<input type="checkbox"/> Recall Procedure	<input type="checkbox"/> Next Appt 2	
<input type="checkbox"/> Notes	<input type="checkbox"/> Ins Address1	<input type="checkbox"/> Type of Referral	<input type="checkbox"/> Next Appt 3	
<input type="checkbox"/> Days Since Visit	<input type="checkbox"/> Ins Address2	<input type="checkbox"/> Code of Referral	<input type="checkbox"/> Next Appt 4	
<input type="checkbox"/> Laststay	<input type="checkbox"/> Ins City1	<input type="checkbox"/> Name of Referral	<input type="checkbox"/> Next Appt 5	
<input type="checkbox"/> Misc Date	<input type="checkbox"/> Ins City2	<input type="checkbox"/> Address of Referral	<input type="checkbox"/> Next Remaining Appts	
<input type="checkbox"/> MISC DATE 1	<input type="checkbox"/> Ins State1	<input type="checkbox"/> City of Referral	<input type="checkbox"/> Patient PCP	
<input type="checkbox"/> MISC DATE 2	<input type="checkbox"/> Ins State2	<input type="checkbox"/> State of Referral	<input type="checkbox"/> Patient Flag	
<input type="checkbox"/> MISC DATE 3	<input type="checkbox"/> Ins Zip1	<input type="checkbox"/> Zipcode of Referral	<input type="checkbox"/> Patient Type	
<input type="checkbox"/> MISC DATE 4	<input type="checkbox"/> Ins Zip2	<input type="checkbox"/> Phone of Referral	<input type="checkbox"/> Patient Stmt	
<input type="checkbox"/> MISC DATE 5	<input type="checkbox"/> Ins DOB1	<input type="checkbox"/> Fax of Referral	<input type="checkbox"/> Patient Interest	
<input type="checkbox"/> Expired Date	<input type="checkbox"/> Ins DOB2	<input type="checkbox"/> Transact Date	<input type="checkbox"/> Patient AutoApp	
<input type="checkbox"/> Case Number	<input type="checkbox"/> Appt Date	<input type="checkbox"/> Transact Dx	<input type="checkbox"/> Patient Collection	

Print

Aging By Patient Report (9.5.24)

Changes have been made to include a statement indicator on all four Aging by Patient Reports. If the Patient has the Statement check-box unchecked in the Patient information screen then an indicator of *N or N will be reported on all four reports. This indicator is closely related to the collection indicator. If the Patient has the Collection check-box checked in the Patient information screen then an indicator of *C or Y is report on all four of these reports as well. The four financial reports affected are: Aging by Patient, Aging by Patient (2), Aging by Patient (Cash Only), and Aging by Patient (Fixed End).

AGING BY PATIENT

Printed on 11/04/2016 Friday 10:04:09

Location System Summary Doctor MICKEY MOUSE Aging To Date 11/04/2016 Use Service Date

Name / AcctNo	Cash						Insurance						Balance Total
	00-30	31-60	61-90	91-120	Over120	Total	00-30	31-60	61-90	91-120	Over120	Total	
GENIUS,ALICE - 464600	*N	25.00	20.00			45.00		82.00				82.00	127.00
SOLUTIONS,MARILYNN - 910							92.00					92.00	92.00
Grand Totals:		25.00	20.00	0.00	0.00	45.00	92.00	82.00	0.00	0.00	0.00	174.00	219.00

Delinquent Claims Report (9.5.14)

The Delinquent Claims Report now has the ability to generate claims by Place of Service (POS) in addition to Procedure Code. Within the report parameters, select "Detail" to view the POS for each line of service within the claim. To view claims for a specific Procedure Code and/or POS, select the desired code.

- If you use Procedure code - any claim that has a line of service with that Procedure Code is included.
- If you use Place of Service - any claim that has a line of service with that Place of Service is included.
- If you use Procedure Code and Place of Service - any claim that has a line of service with that Procedure Code and Place of Service is included.

Name/AcctNo	DOB	Claim#	FirstBill	LastBill	Amount	Balance	Days	CN/*SSN	Type
GENIUS, ROBERT - 531930	12/16/1944	4522	05/02/2014	05/18/2014	165.00	100.00	912	03520000511	
		ServiceDate	Proc	Cpt	POS	Charge	Expected	Paid	Balance
		04/24/2014	11056	11056	3	100.00	100.00	0.00	100.00
		04/24/2014	11721	11721	3	65.00	65.00	46.37	0.00
		GENIUS, ROBERT				165.00	165.00	46.37	100.00

Print All Notes (9.5.18)

The ability to capture Other Notes and Clinical Notes on all patients during a specific time frame has been added to the left-side menu of Reports. To access this feature click the Reports tab and then select Print All Notes from the left-side menu. Enter the date range desired and then choose to include Other Notes and/or Clinical Notes. The report will list any note added in the Notes selected for the date range specified. Generate the report to the screen or to Microsoft Excel. Please reference the help file for definition to the fields printed and exported to Excel.

All Patient Notes

Printed on 11/15/2016 Tuesday 09:30:16

Name: 531930 GENIUS ROBERT

248-399-0000

Date	Type	Subject
------	------	---------

11/12/2016	OTHER	
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Note: THESE ARE OTHER NOTES.

11/15/2016	CLINICAL	CLINICAL NOTES
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Note: THESE ARE CLINICAL NOTES.

Users will need to assign access to this report as with all new reports in eTHOMAS. From Utility | Settings | Groups, edit the desired group, scroll to the Reports category and set the PrintAllNotes report to Full Access.

Appointments

Location on Appointments (9.5.24)

There is now a location drop-down in the appointment edit screen that will allow users to choose the location that the patient's appointment will be. This information has been designed to work in conjunction with ehrTHOMAS. When a new encounter is created in ehrTHOMAS, the provider and location will default to the provider and location information that is provided on the appointment rather than defaulting to the previous encounter information.

New Appointment

Fri 11/04/2016 10:15AM Copay: \$0.00 Last Visit: 12/12/2014
Book: GENIUS SOLUTION Room: Cash: 44.37 Ins: 0.00

Recent: 416140 - GENIUS, CLAUDE

Account: 416140

Name: GENIUS, CLAUDE

Phone: 313-862-0000 W Phone:

Doctor: MM - MICKEY MOUSE

Location: GS - GENIUS SOLUTIONS

App Types: OV - OFFICE VISIT

Notes:

User: GENIUS

☐ Waiting List ☒ Reminder Card

Date	Time	Book	Room	Type	Typ2	Dr	S

☐ Family Appointment

Preferred Method of Contact: POST MAIL: 123 ANY STREET DETROIT, MI 48221-1659

Buttons: Block, Template, Emergency, Policy, Patient Tear Off

Tagged Appointments (9.5.18)

The Tagged Appointments List contains appointments that have been imported and scheduled into eTHOMAS, appointments that have been moved to the Rescheduled List, and appointments on the Waiting List. These three types of appointments are considered "Tagged".

Type Reschedule

Any appointment rescheduled through a time block will be placed on the Tagged Appointments with a Type of Reschedule.

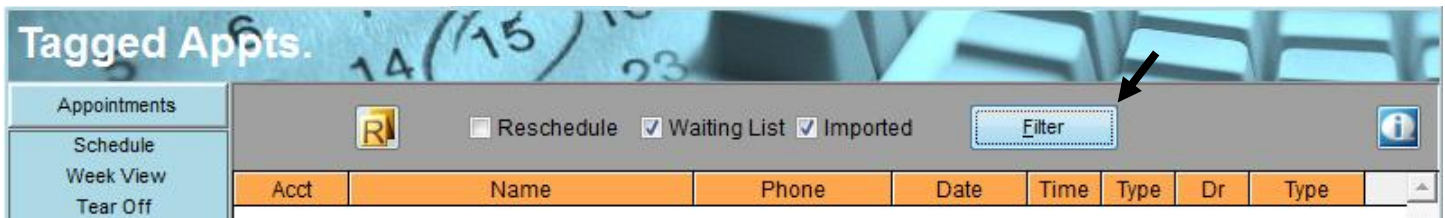
Type WaitingList

Any appointment that was placed on the Waiting List when scheduling an appointment and the Waiting List check box was checked will be placed on the Tagged Appointments with a Type of WaitingList.

Type Imported

Any appointment imported and scheduled into the Appointment Book will be placed on the Tagged Appointments List with the patients Account, Name, Phone, Date of appointment, Time of appointment, Type of appointment, Dr assigned, and a Type of Imported. Appointments are imported and scheduled through the Portal Appts.

Appointments can be filtered to only display certain statuses by selecting or deselecting the check boxes at the top of the screen and clicking the Filter button.



Portal Appointments (9.5.18)

Appointments may be imported and scheduled through a third-party software using GS Interface. Appointments imported into eTHOMAS will first be listed in the Portal Appts. Once the appointment(s) is scheduled, it will be removed from the Portal Appts list and placed on the Tagged Appts list with a Type of Imported. Any appointment with a message will not be scheduled until the error is corrected.



Messages for appointments that need attention include:

- **Acct does not match** - The patient's account number does not appear to be correct. Please edit the appointment and select the correct patient account.
- **Acct not found** - The patient's account cannot be found. Please edit the appointment and select the correct patient account.
- **Acct zero** - The patient's account cannot be found. Please edit the appointment and select the correct patient account.
- **Appt in past** - This appointment time is in the past and cannot be scheduled.
- **Book not found** - The appointment book cannot be found. Please edit the appointment and select the correct Book from the drop down menu.
- **No Appt Doctor** - The appointment doctor cannot be found. Please edit the appointment and select the correct doctor from the drop down menu.
- **No Appt Type** - The appointment type cannot be found. Please edit the appointment and select the correct type from the drop down menu.
- **Outside Book Time** - The appointment cannot be scheduled for the current time. Please edit the appointment and change the appointment time.
- **Room not Found** - The appointment room cannot be found. Please edit the appointment and select the correct room.
- **Time Slot Taken** - The appointment cannot be scheduled for the current time. Please edit the appointment and change the appointment time.

Utilities/Messaging

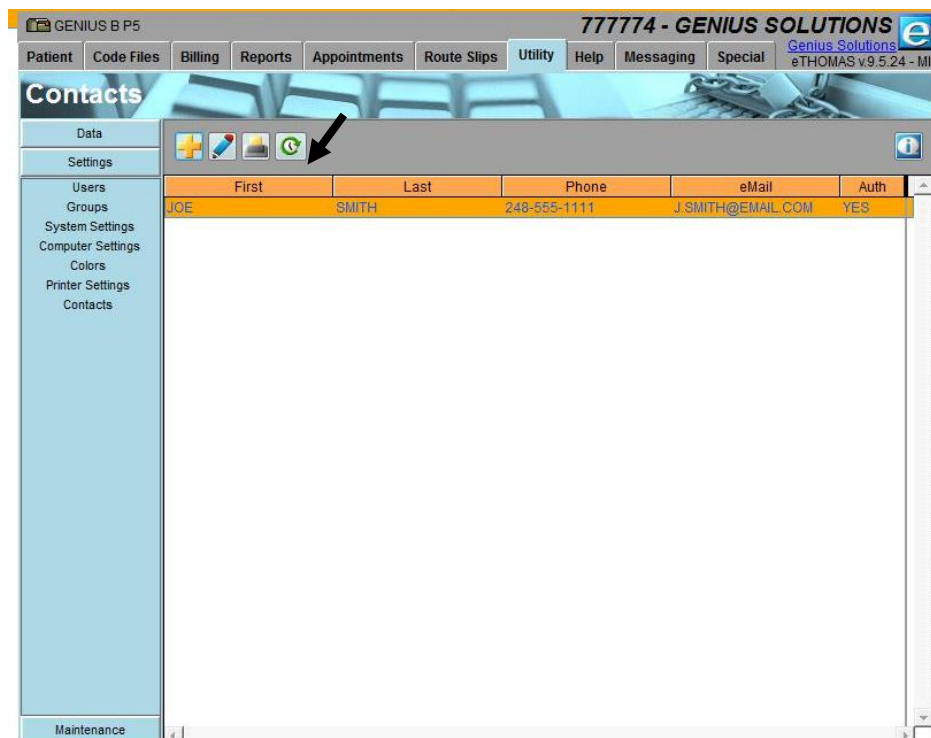
Connecting to Genius Solutions (9.5.14)

We have created a link within eTHOMAS to help make connecting with Genius Solutions easier. When our Support Department asks to connect to your computer, you will now be able to launch our connection tool from within eTHOMAS through Messaging | Connect to GS Support. Use the connection tool only when asked to connect by a Genius Solutions' representative.

Authorized Callers (9.5.18)

An area to assign and supply Authorized Callers to Genius Solutions has been added to eTHOMAS called Contacts. Contacts may be accessed through Utility | Settings | Contacts. An Authorized Caller is an individual approved by the Licensee of Genius Solutions software to represent the Licensee in the use and maintenance of the software and any data contained therein. This individual should be trained on how to use the software. Maintaining a list of Authorized Callers will assist Genius Solutions staff in identification of individuals who should be contacting Genius Solutions regarding the computer system and data as it relates to Genius Solutions software. Once all contact information is complete, click the Sync button to send the information to Genius Solutions. The Contacts feature works per account number. Offices with more than one data directory (medsys) will share contacts throughout all directories.

All Authorized Callers should be added to the Contact List. When the information is Synced with Genius Solutions, only the Contacts listed will be considered Authorized to speak to Genius Solutions.



Users will need to assign access to this area as with all new features in eTHOMAS. From Utility | Settings | Groups, edit the desired group, scroll to the Utility category and set the Contact to the desired access level.

System Settings (9.5.11)

An improvement has been made to the system settings giving users the ability to search for a new system setting by description. To Search for a description, use the drop-down and select "Description". In the Search area you can type in a word to search. This will search any description that starts with that word. If you include an "*" before the word it will search any description that contains that word.