6.79 Release Notes

About this Release

In each release there may be new features and functions that require one or all of the following:

· Purchase of a module to access

· User Training

· Specific process to be used to ensure the correct functioning

Please read the release notes and the corresponding manual pages to ensure that you understand the changes being made, what module they are associated with, and how they impact your business processes.

If you have any questions about anything in a release, please contact support either by phone or through a Redmine ticket.

Release Notes for CareRight 6.79

Major Features

Healthcare Identifiers Service Integration

https://redmine.clintelsystems.com/issues/91021

CareRight is currently undergoing a certification process with the ADHA for our integration with the Healthcare Identifiers Service; as we continue to build out our MyHealthRecord integration.

When certified, this will:

- Automatically match patients with their relevant identifiers
- Enable access to future functionality.

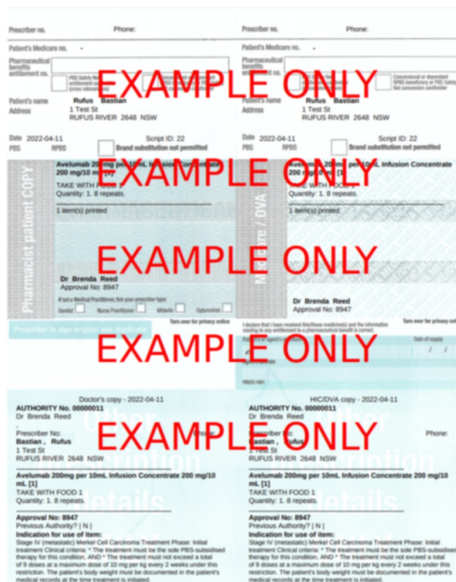You can find found more via Services Australia - Healthcare Identifiers Service for Health Professionals.

Enhancements

Prescription Templates > New 2022 Templates supported (pilot)

https://redmine.clintelsystems.com/issues/93046

CareRight now supports the revised prescription templates. Opt into the new format on a per Provider or Location level.

Note, this is considered a feature in pilot - feedback is being sought.

Setup per Location

Setup per Provider

Invoice templates > Support for 100 line items

https://redmine.clintelsystems.com/issues/93189

In some IHC long stay instances, invoices with up to 100 items are required. CareRight now supports these.

Assessment Elements > Journal Logs & Clinical Notes History

https://redmine.clintelsystems.com/issues/92283?

See the most recent clinical notes easily in your assessments and build them automatically from other inputs.

Clinical Notes History   View All ◀◀ ▶▶ ▶▶|

Assessment Clinical Note with History approved

Created at 28/03/2022 at 10:44 AM (+1030)
Written by M Hall - ASO

Show Assessment

Medicare > IHC Claims > Ability to override Accommodation Status Codes

https://redmine.clintelsystems.com/issues/92735#note-5

In some circumstances, when creating an IHC claim, the Accommodation Status Code will need to be overridden. For example, when the **Same Day Status** is set to **Non Admitted**, but the default behaviour of the system is to recommend Accommodation Status Code: A (Admitted).

Users can now specify valid values in this scenario.

Medicare > Better validate patient health fund information prior to submission

https://redmine.clintelsystems.com/issues/92502

In some cases, a Medicare claim will fail due to a missing Patient detail or similar; but this could only be discovered after sending.

Across all claim types, the system now does:

- OPV (patient summary) - Perform medicare only verification
- OPV (assessments, patient edit) - Better error message before send
- OEC - Better error message before send
- IMC - Better error message before send
- IHC - Already validation on IhcClaim record

Reports > Capture a definition for a report in the system

https://redmine.clintelsystems.com/issues/92275

Customers can now document their report in greater detail, noting changes or linking to original requirements.

Report Title

Admissions Report 1

What is the intended purpose of the report? What recent changes have been made? Are there links to the report definition?

Author: Miss System Administrator   **Created:** 14/02/2022 at 10:37 AM **Updated:** 14/02/2022 at 10:37 AM

Referrals > Contextual hints around referral length, indefinite referrals

https://redmine.clintelsystems.com/issues/92643

Details

Referral From	Dr Felicity Brown [Felicity BBBB] 1234456T Bowen Hills Medical, 112 Bowen bridge Road, Bowen Hills QLD, 4006
Medical Provider	
Referred On	22/03/2022
Activated On	22/03/2022
Notes	12 Months 1234456T

Referral length and provider number. Format is 'N Months' or 'Indefinite' followed by 'Provider Number'

☐ Disabled

Referral Status Active

Reference

Services Select from list

System Administration > Service Location > Validated Provider Numbers

https://redmine.clintelsystems.com/issues/92798

CareRight now provides better validation when setting up a new service location, and entering Medicare Facility identifiers; so that claims are not rejected at a later point.

Billing

Medicare Location ID	
Hosp. Prov No	1234567x

⚠ Please match the format requested.
Hospital Provider Number. 6 digits, 1 practice location character, 1 check digit

Medicare Facility ID	Only set if different to Hosp. Prov
LSPN	
Specimen collection ID	
Billing Provider Number	
Hearing Service Site ID	

☐ All Services are taxable Supplies

System Administration > Metrics > Confidence Levels

https://redmine.clintelsystems.com/issues/90176

Improved user interface and hints for creating and managing confidence levels

System Administration > Appointment Statuses > Allow more appointment statuses

https://redmine.clintelsystems.com/issues/92384

Our system now allows significantly more appointment statuses.

Invoices & Claims > Global View > Performance

https://redmine.clintelsystems.com/issues/92024

With customers with multiple locations, we notice often the presence of performance issues when reviewing the Invoice & Claims screens within the system.

To ensure appropriate performance, users are now are recommended to specify search criteria, or to use the per location variation of this UI.

This change enables CareRight to scale appropriately to larger workloads.

Invoices & Claims > IHC > Sent Thelma Claims now visible

https://redmine.clintelsystems.com/issues/92916

Previously, Thelma claims were not been seen as being sent if the Thelma claim was active.

These now appear appropriately in the Invoice & Claims screens.