

6.83 Release Notes

Last Modified on 24/10/2022 9:31 am ACDT

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 6.83

In this article:

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Major Features

Ruby version upgrade

The underlying version of Ruby supported by the CareRight platform now defaults to 2.6.

Admissions > [Accruals](#)

CareRight now supports the calculate likely accommodation charges for a given patient, applying all of the contractual rules configured (ie: step downs).

Click [here](#) view the Accrual Guide

Accruals						
<div>Download Summary</div> <div>Download Details</div>						
ARN	Admitted	Discharged	Patient	Inpatient Days	Health Fund	Amount
000014	01/09/2022 at 05:30 PM		000007 Mr Luke Alford	33	Mock HF (TST)	\$14,100.00
000017	01/09/2022 at 05:30 PM		000017 Mr Ronald MERRETT	33		\$15,500.00
Date	Charge	Item Number	Rate Definition	Region		
01/09/2022	\$500.00	acc1	Private	National		
02/09/2022	\$500.00	acc1	Private	National		
03/09/2022		Billed				
04/09/2022		Billed				
05/09/2022	\$500.00	acc1	Private	National		
06/09/2022	\$500.00	acc1	Private	National		

Accounting > Aged Debtors Report

CareRight provides a built in, standardised [Aged Debtors Report](#). This replaces the previously available *aged accounts* dataset views; and permits a more accurate calculation of debt *as at* a specific date.

Aged Debtors						
<div>Download CSV</div> <div>Dashboard / Locations / Clintel Clinic / Reconciliation</div>						
<div>07/10/2022</div>						
Debtors	Total Due	0 - 30	31 - 60	61 - 90	90+	
Mr Mike Carlson	-\$602.30	\$0.00	\$0.00	\$0.00	-\$602.30	
Mrs Maggie Peggy Carlson	-\$1,576.68	\$0.00	\$0.00	\$0.00	-\$1,576.68	
Mr Paul Dawson Johns	\$2,440.00	\$0.00	\$0.00	\$0.00	\$2,440.00	
Miss Alison Bunyan	-\$100.00	\$0.00	\$0.00	\$0.00	-\$100.00	
Mr Mickey dolye	-\$1,000.00	\$0.00	\$0.00	\$0.00	-\$1,000.00	
Mr Caleb James Gray	\$2,508.50	\$164.60	\$102.30	\$0.00	\$2,241.60	
Mr Edwin Klein	\$51.60	\$0.00	\$0.00	\$0.00	\$51.60	

Deprecation > Invoice Reports

In CareRight 6.41 (2017), we removed the ability to create new Invoice Reports from the system. With 6.83, we've now fully removed this. If you have not done so already, we recommend migrating to a dataset based report for this information.

Enhancements

Dashboard > Provider > Edit > ABN Title

ABN Title can now be added to an invoice template

Accounting

Rate Table

default

Default Service Location

IP

Clintel Clinic

Clinte

Default Hospital Claim Type

Select from list

Default Hospital Consent

Select from list

Linked Bank Account

012345 000456712 Foo33

ABN

123 456 78900

ABN Title

ABN Title name to appear here

INVOICE

ABN

123 456 78900

ABN Title name to appear here

To

Caleb Gray

PO Box 238

Kent Town SA 5067

M/care No

DOB

MRN

For

Mr Caleb James Gray

PO Box 238

Kent Town SA 5067

Invoices > Line Items > Search by Description

A setting has been put in place to allow the search of line items by description.

Accounting setups

Edit

Line Items

Print Details

Your Description (default)

Search by Description

Yes

Click [here](#) to view the updated Guide

Internal ref:[95252](#)

System Administration > Users & Groups > New permission - Can run statutory reports

There is now a separate permission to run Statutory Reports. All existing groups with the System Administration role have been migrated to also include this permission.

Click [here](#) to view the updated Guide

Location Details

- ☒ Can view location details
- ☐ Can assign beds
- ☐ Can override claim processing
- ☐ Can edit batches & claims
- ☐ Can onboard In-hospital Claims (IHC)
- ☐ Can perform banking
- ☐ Can edit HSP batches & claims
- ☒ Can run statutory reports

Internal ref:[95319](#)

System Administration > Correspondence > Letter Templates > Replacement Variables > Formatting of Tables

We now default to having borders around all tabular information, consistently.


Working Diagnoses	Identified Date	End Date
046 (Disease Generic Code) Bladder Infection	07/09/2022	
039 (Disease Generic Code) Bacterial Vaginosis	07/09/2022	
asfdadsfsadf	07/09/2022	

Internal ref:95358

System Administration > Accounting Setup > Allow opening balances

To simplify and improve the accounting model within the CareRight platform, the ability to create Opening Balances is disabled by default. This feature will be restricted in use to only apply to clients who migrate from other platforms, as an interim measure.

Click [here](#) for the updated Guide

 Accounting setups

Edit

Level at which the associate is specified	Invoice
Banking Deposit Slip method	Cheque Number/Account Number
Location	Clintel Clinic
Assistant Item Type	Assistance
Indefinite referral period	5.0
Ask for Multiple Procedure Rule	Yes
Show Direct Deposits on Banking Screen	No
Hide "Payment from Guarantor" from Patient Accounts Screen	No
Enable Loan Accounts	Yes
Use Account Balance Accrual Date	No
Allow new opening balances	No

Internal ref:95399

System Administration > Provider Setup > Prescribing > Validate maxlength of prescriber number as 7 digits

In previous versions, a provider without a Prescriber Number could write a prescription and the printed "Prescriber No" would be blank. A Prescriber Number is now required to write a prescription.

Prescriber Numbers which were previously recorded as 8 digits with leading zeroes will need to be edited before they can write a prescription.

Prescribing

Prescriber Number

aaa

Prescription Authority
Number

14



Please match the format requested.
PBS/Medicare Prescriber Number (6-7 digits)

Prescriber CNS Number

CNS123

Script Paper

Select from list

Prescription Provider
Number

PPN123



Internal ref: 95034

Statutory Reporting > VAED > Ability to exclude cancelled admissions

Where a specific admission is being included when it should not, you can now opt to exclude it from VAED.

ALERT

ALLERGY

NOTICE

Clinical

Redmine

Vitro

MRN: 000540 CRN: 12346 ERN: 12345 Home: Bette McNee Street, 18 Dequetteville Terrace, ADELAIDE SA 5008
Male, aged 2 years and 8 months, born on January 01, 2020, last admitted to Clintel Clinic

No Medicare Card

Overseas Patient

48218 33

Pre Admit

Dashboard / Patients / 000540: Mr Ben2 Price2 / Admissions

Cancelled Admissions

Admission Date	Discharge Date	Location	ARN	
01/05/2022 at 08:00 AM (at location)		Clintel Clinic	001007	Add to VAED
12/08/2021 at 08:31 AM (at location)		Clintel Clinic	000888	Add to VAED
13/05/2021 at 01:14 PM (at location)		Clintel Clinic	000866	Remove from VAED
13/05/2021 at 01:04 PM (at location)		Clintel Clinic	000865	Add to VAED

Internal ref: 95862

Locations > Account Balance > Add date range filters

Where an organisation has old debt (greater than 3 or 6 years, depending on state legislation) that has not been written on in the system, it can be now excluded from viewing the balances for a given period.

Click [here](#) to view the updated Guide

From:

01/04/2021

To:

01/04/2021

Search

Balance of All locations on 01/04/2021

Type	Amount
Unpaid Invoices	\$100.50
Unallocated Deposits / Receipts	\$0.00
Unallocated Opening Balance Debits	\$0.00
Unallocated Opening Balance Credits	\$0.00
Unallocated Debit Adjustments	\$0.00
Unallocated Credit Adjustments	\$0.00
Balance	\$100.50

Internal ref:[95278](#)

Defects & minor enhancements

- Statutory Reporting - DVA admissions without an Invoice were not written to a separate DVA insurer file (QHAPDC)
- List views (Patient notices) - text areas format differently
- Clinical Note options new ones added not appearing in Alphabetical order, inactive items shown
- Medicare - Intermittent Error 2030 - data range search - improve UI restrictions
- Appointments
 - Improved use of *appointment editor* permissions to restrict UI controls
 - Referral warnings now state the specific provider when creating an appointment. A practice referral may still be available.
- Patient Import
 - Fix issues with Title (Mr, Ms) not importing correctly
- Patient Export - Fix assorted minor issues
 - Patient with slashes / non-ascii characters in name
 - Patient with a document without created_at
 - Patient with assessments with very long names to check truncation
 - Patient without any medications
 - Now includes correspondence, appointments, diagnoses
- Admissions
 - Fix behaviour with timestamps when checking for current admission across all database engines

- Regression with adding Misc Service Codes
 - Fix defects viewing cancelled admissions
 - Preadmission OEC Dates now consistent
- Receipts - remove legacy code
- Programs
 - Programs - Admission List - Improve Sort Order to see most recent to least recent
 - Programs - Attendance List - Improve Sort Order to see most recent to least recent
 - Programs Waitlist - Unable to enroll from it, deletes entry when trying to
- Estimates
 - Currency formatting now renders properly
 - Invoices & Credits - List - Formatting of Total
 - Correspondence - New Email (new quote email) - Capitalise the Send button properly
 - New Patient Account - Fix Label
 - OECW - Ensure patient IRN is rendering
 - Add line item - Undefined method inpatient_rate for nilclass
 - Remove line item button should be styled better
 - Print selected controls removed from list views
 - Consistent wording
- Assessments - Fix location based assessments
- MyHealthRecord > ActionView::Template::Error: undefined method 'ihi_validity_period' for nil:NilClass
- Claiming
 - Exclude Morphology codes from IHC claims
 - Ensure ventilation hours behaviour is correct in IHC claims
 - Fix availability of "Unprepare" button
 - Prevent batch being sent multiple times
 - System Admin > Claim Contracts > Edit > Select Guarantors > Includes inactive guarantors
 - Payment From Guarantor - Eclipse, Manual - Receipt does not get Guarantor populated correctly
- Reallocation: The "Billed" column now features clickable amounts, to avoid data transcription errors.
- Custom Templates
 - Now warned if invalid fonts are detected
 - Templates validated on list view
- Results
 - When matching to a patient, merged patient records are no longer displayed
- Datasets
 - Possible to enter a malformed version number, which prevents copying later.
 - It is now possible to delete old datasets and the associated reports
- Clinical Notes
 - Fix restrictions on new clinical note "10 most recent" form.
- Tasks

- No longer relies on 'tasks enabled' as a global setting. Users require appropriate permissions set.
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