WRSHealth

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To:	All WRS Users
From:	WRS Development Team
Date:	02/03/17
Re:	Updates to the WRS Health System

WRS is proud to announce the release of several important software additions and enhancements, including an optimized workflow. Below is an explanation of these enhancements and instructions on how to enable and use each. Items include:

1. **ENHANCEMENTS FOR BIDIRECTIONAL LAB WORKFLOW**

2. **ENHANCEMENTS TO BILLING SUMMARY**

3. **NEW TELEHEALTH VALUE FOR BOX 24B - PLACE OF SERVICE (OPTIONAL)**

4. **NEW - PATIENT LOCATION REGISTRATION (OPTIONAL)**

ENHANCEMENT TO BI-DIRECTIONAL LAB WORKFLOW

Note this change only applies to clients who have active bidirectional lab connections, who currently electronically send and receive orders to/from labs.

Enhancements have been made to the electronic lab ordering process to create an optimal workflow. These changes allow ancillary staff, who add orders on behalf of a provider, to send content as a provider's designee. This data will be captured as discreet data on reports and crediting this activity on Meaningful Use and MIPS reports. Settings for this functionality is found under **ADMINISTRATION> EMR SETUP>SUPERVISING PROVIDERS:**
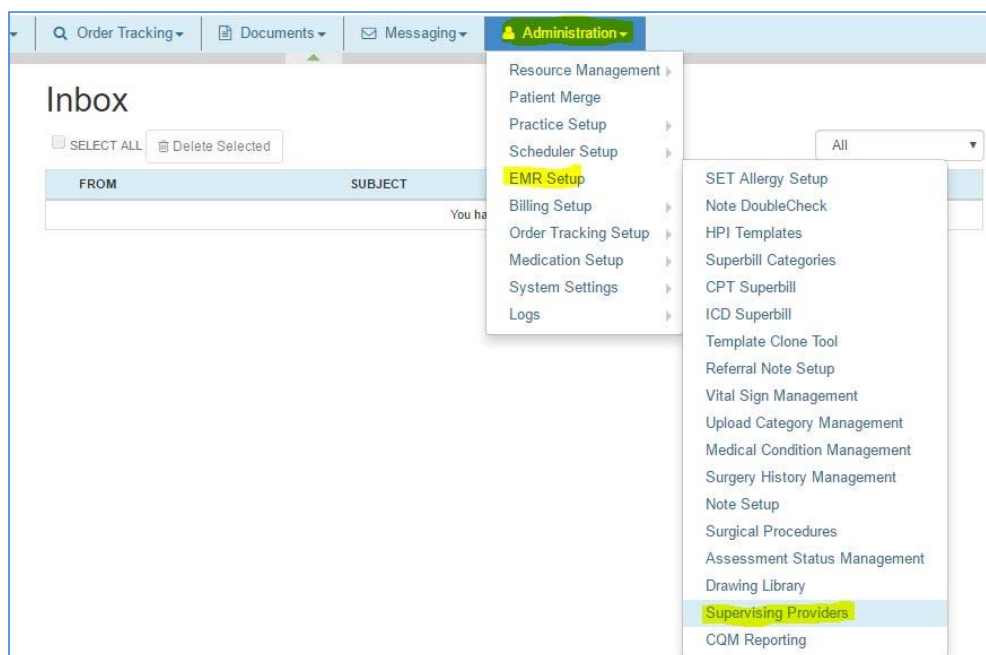
Assigning a **Supervising Provider** to an ancillary staff member (medical assistant, nurse, etc) allows lab data to be recognized as "per the provider" in MIPS and Meaningful Use Reports. In some practices staff may work under multiple providers at varying dates. For this setting, you need only to "assign" that provider once. If a provider, not indicated as the "supervising" provider, is assigned to the note, then their name will be the name identified on the order, prescription, immunization; this user's name will supersede the "**Supervising Provider's**" name.
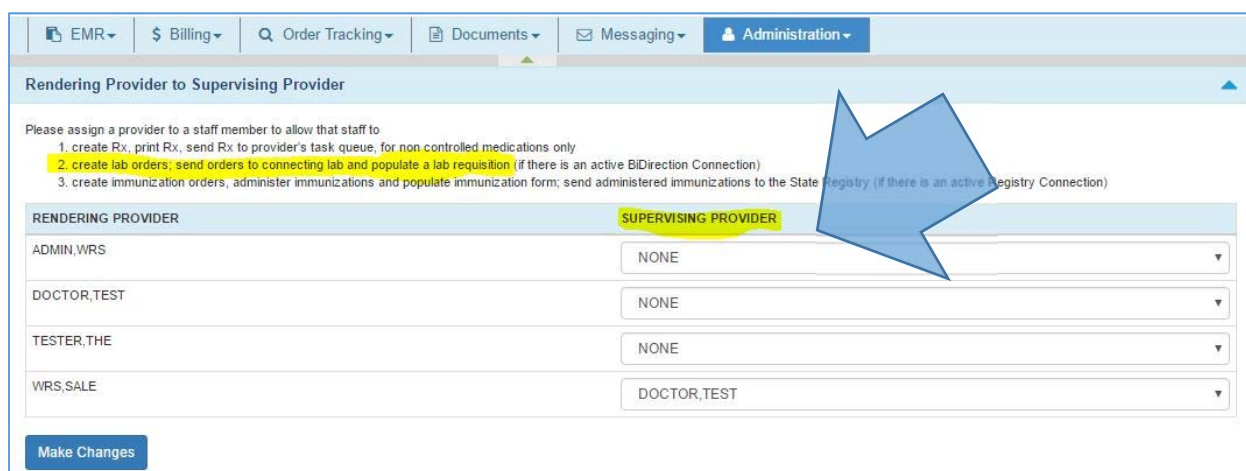
The practice should indicate if their default workflow is to collect specimens at the practice, or if the patient is sent to a Draw Station or The Lab. **ADMINISTRATION>PRACTICE SETTINGS:**

New functionality has been added to allow practices to indicate within the note itself that all Lab Orders and Diagnoses have been added/assigned to that patient for that encounter, and by-pass the "actions" of CHECK-OUT or SIGN NOTE to create the requisition. This is very helpful to those practices that use an open-running note (like Antepartum Notes) to add new Lab Orders per encounter and create a new instance of a requisition that populates with those newly created orders.

Create this functionality through: **ADMINISTRATION>EMR SETUP>NOTE SETUP>SHOW FINALIZE BUTTON**
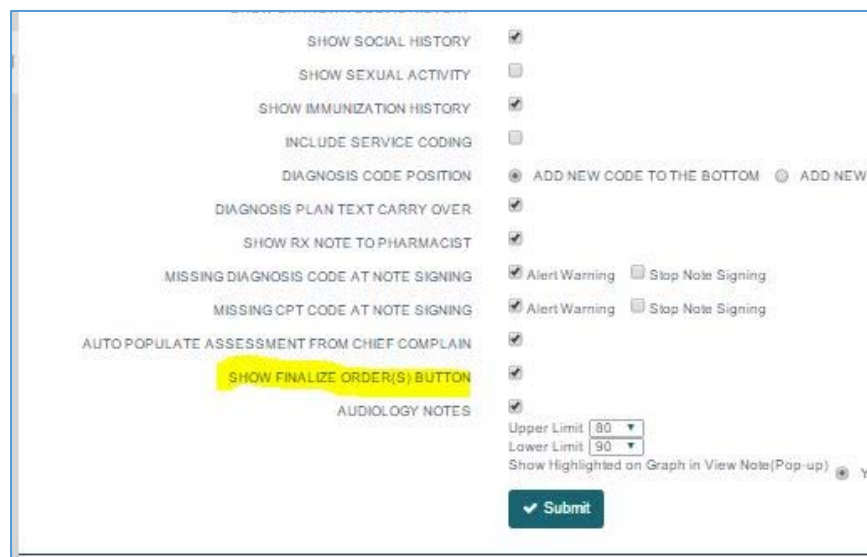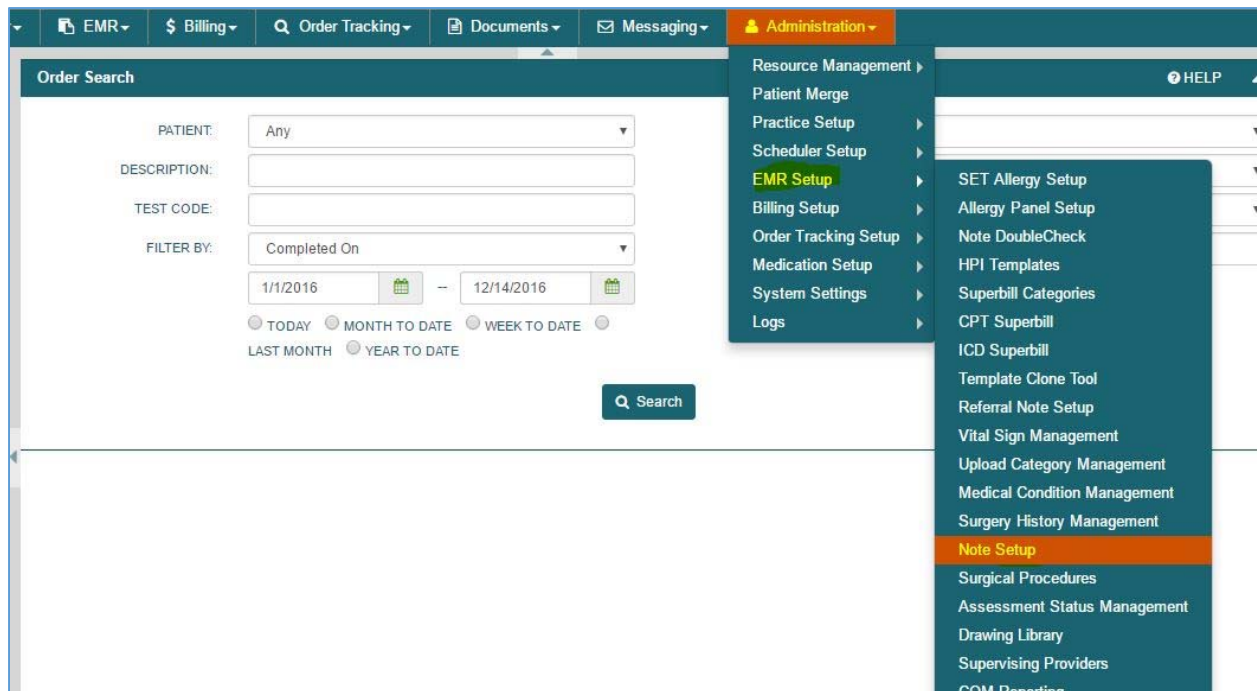
Practices must still assign their correct Lab Connections to the appropriate insurances (in some cases, an insurance could have more than one lab connected) from
ADMINISTRATION>PRACTICE SETUP>EDIT INSURANCES

Always make sure this area is the mirror image of your INSURANCE PICK LIST and that your Registration Staff are using the correct Insurance ID's when registering insurances for patients.
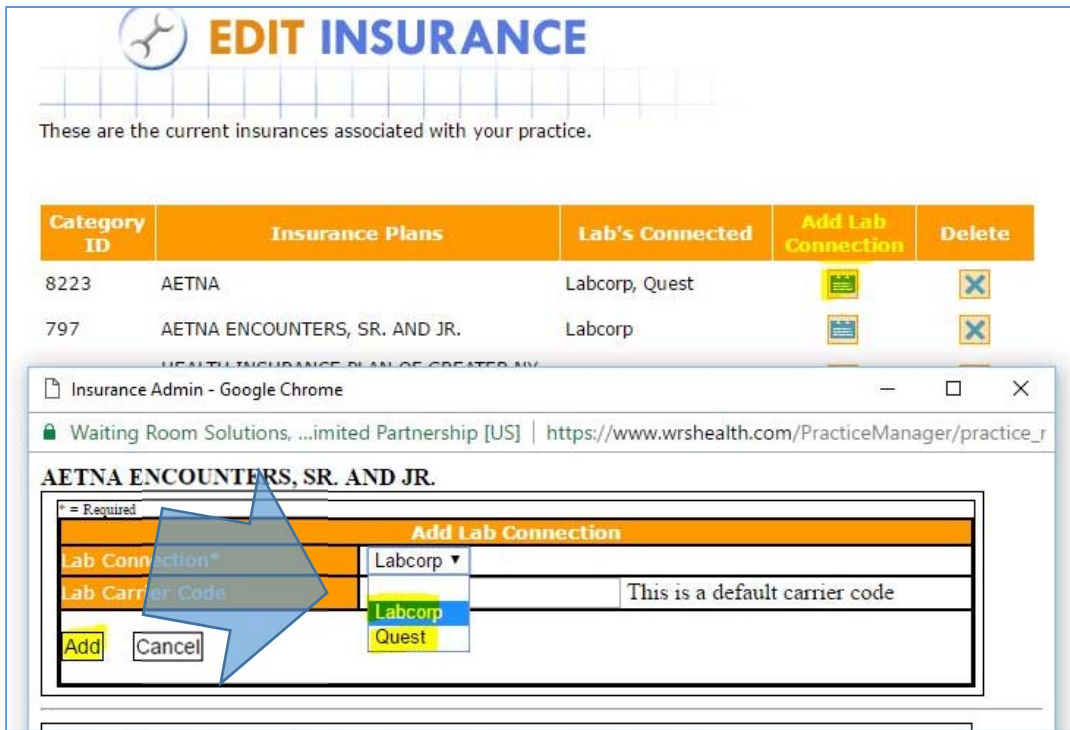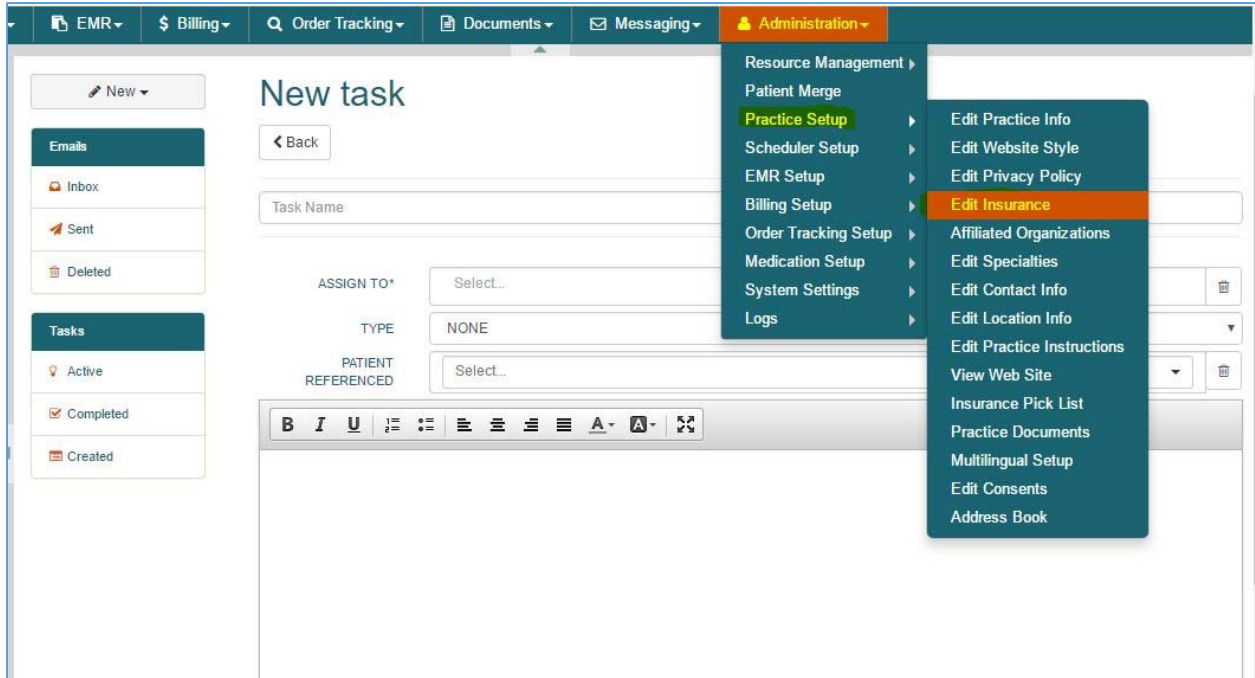
New functionality has made the need to add LAB CORP and QUEST specific codes to your working CPT Superbill obsolete. From the Orders Page, and when adding as an ORDER, select any CPT LAB CODE, as it will be mapped directly to the associated Lab Corp or Quest code.

WRS advises that you do update your "basic" Laboratory Superbill selections (ADMINISTRATION>EMR SETUP>CPT SUPERBILL) to ensure you have the full compendium of frequently ordered labs on your Superbill for easy selection from the Orders Page.

Please Note: only Lab Corp and Quest Lab orders are currently mapped to CPT codes. We will be updating this to other labs in the future. All other Labs should continue to be added as an order by using THAT LAB SPECIFIC CODE for those Bidirectional Connections.

Once a Lab CPT has been selected as an Order for a patient that has been correctly registered with an insurance associated with Lab Corp and/or Quest, the note will display the options to add that order as either a Lab Corp Order, and/or Quest Order, or to add as CPT code (for those cases where the patient may not be getting the labs done by those laboratories).

Whichever option tag is selected, the order will be added specific to that lab. If the practice has selected the FINALIZE BUTTON action, that button will be activated, for those staff with permissions. Select the FINALIZE button when all orders and diagnoses have been added to the encounter.

Prior to "Finalizing" the Orders, the practice has the option of adding specific diagnoses per order which will bypass the diagnoses on the Assessment Page, and only add those diagnoses indicated with the Orders to the requisition. You can add diagnoses from searching, or by selecting from the current note assessments. If only one diagnosis applies to multiple orders, you only need to add that diagnosis once to at least one order

If no diagnoses have been added directly to an order(s), when the "Finalize" button is selected, all diagnoses on the Assessment Page will add to the requisition.

Once all orders and diagnoses have been created and "finalized", the requisition will populate within 5 minutes (and can be tracked/printed from ADMINISTRATION>ORDER TRACKING>MESSAGES SENT TO LAB) and the "Finalize" button will gray out.

If new orders are added after these actions have been completed, it would result in a new requisition. Just to repeat, this is a better workflow for those practices that utilize open, running notes.

ENHANCEMENTS TO BILLING SUMMARY

WRS has added "misc charges" as well as the Current Procedural Terminology (CPT) codes to the Billing Summary

NEW TELEHEALTH VALUE FOR BOX 24B - PLACE OF SERVICE

WRS has now added the ability to bill for Place of Service, Telehealth . This option can be enabled under **Administration>Billing Setup>Practice Place of Service .** Select "2 Telehealth" to add this option during the creation of claims. This will now be available to use on the CMS1500 in box 24B (Place of Service)

NEW - PATIENT LOCATION REGISTRATION (OPTIONAL)

Functionality has been added to allow for Patient Location to be entered during registration. An additional control allows the practice to specify if Location is required or optional at registration.

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CPT SUPERBILL LEVEL	○ PRACTICE LEVEL SUPERBILL	◉ USER CUSTOMIZED SUPERBILL
SPECIMEN COLLECTED AT	☐ DRAW STATION ☐ PRACTICE	
PATIENT REGISTRATION	○ COMPLETE ⑦ ○ PORTAL-COMPLIANT ⑦ ◉ QUICK ⑦	
INCLUDE PRACTICE LOCATION ON PATIENT REGISTRATION	◉ ENABLED ○ DISABLED	
PRACTICE LOCATION IS MANDATORY ON PATIENT REGISTRATION	○ ENABLED ◉ DISABLED	

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