CGM MEDISOFT Release Notes

January 2022

CGM MEDISOFT

Practice Management and EHR

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Publication date

January 2022

Product

CGM MEDISOFT 26

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Chapter 1 - Enhancements

This chapter presents a high-level description of the following enhancements to the CGM MEDISOFT® system.

Important: you must have an account set up in eMDs Salesforce and your account must include an “asset code” or “subscription code” for the following features before you can use them: CGM CONNECTION and CPT Lookup, in addition to the asset requirement from v25 for IMO/Diagnosis Code Lookup, and OCR. Verify with your Value-Added Reseller (VAR) that you have an account and that it has your assets and/or subscriptions for these features listed. VARs should contact their VSE for more information.

Microsoft Windows 11, as of GA of Medisoft 26, is not a supported OS. The goal is to support this OS and once successful testing of Windows 11 is complete an announcement will be released.

*******Alert – Read before logging in to v26*********

V26 passwords are now case sensitive and have a minimum password length of 8.

When you log in the first time, **you must enter ALL CAPITAL LETTERS**. If your password is 8 characters or longer, you will be able to log in as normal. If your password is fewer than 8, after you log in **IN ALL CAPITAL LETTERS,** you will be presented with a message that you need to create a new password. **See details below and please read before logging in.**

Rebranding

Medisoft has been rebranded to CGM MEDISOFT. In addition, Revenue Management has been rebranded as CGM REVENUE MANAGEMENT.

Office Hours Professional Standalone

As of CGM MEDISOFT 26, this product has been discontinued. However, you can still use Office Hours as an application integrated with CGM MEDISOFT. Also, as of CGM MEDISOFT v26, there is no 30-day demo of the software available.

Password Enhancement notice

Because of enhancements to CGM MEDISOFT 26 password requirements, you may see a message when you first log in, informing you that you must update your password.

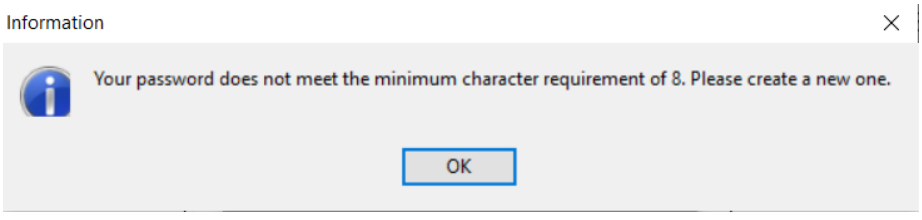

Figure 1. Information screen

When you click the OK button, the Medisoft User Login screen will open.

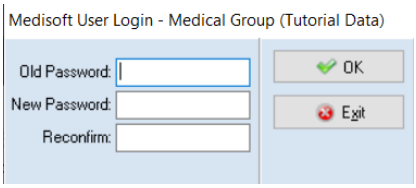

Figure 2. Medisoft User Login screen

Create a new password that is at least 8 characters. You can use alpha characters or numbers and the new password IS case-sensitive. For more information on the new Password Enhancement features, see “Enhanced Security” on page 3.

Note: if your password is already at least 8 characters long, you will be able to log in normally if you log in with all capital letters, since that is how prior passwords were stored.

Product Registration/Activation

Updated Account Registration screen

There is a new screen that you will use to activate CGM MEDISOFT: Account Registration. Enter the information on this screen that you received from your VAR (Value-Added Reseller). Once this is done, you can use CGM MEDISOFT.

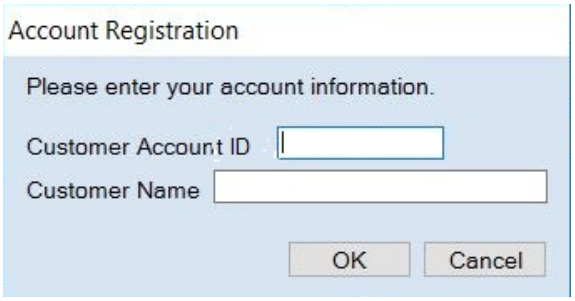

Figure 3. Account Registration screen

Under the new licensing model, the software may only be registered on one application or file server. Application or file server is defined as where Medidata is located and Advantage Database Server is installed. If there are other Remote Desktop Servers in the organization, the client needs to be installed on the application or file server and the software registered to this server.

If the Medisoft database is established on additional servers in the same organization, an error message will appear informing you that the customer/account is already registered. The software will not be functional in this situation.

IMPORTANT: The Customer Account ID IS case-sensitive!

Recommendation

It is recommended that, after entering your Customer Account ID and successfully registering your software, you make a backup of Medisoft Root data (which includes SharedData tables) and store it safely offsite. In this way, in case your server fails or you have to set up a new server, you can restore from that Root Data backup. Registration of Medisoft v26 is tied to the server, so if you do

not have your Medisoft Root Data backed up, you will need to contact your VSE or Support to get your registration reactivated. Perform this one-time backup in addition to the daily practice files backup, which should be performed and stored offsite. Under the new licensing model, the software may only be installed on one server. If the software is installed on additional servers, an error message will appear informing you that the customer is already registered and it will not be functional.

CGM MEDISOFT requires an Internet connection to work properly. However, if you lose your Internet connection, you will be able to use CGM MEDISOFT for up to 30 days without your Internet connection. After this, you will receive a warning message that you have seven days to connect before you are locked out of CGM MEDISOFT.

Account Registration Process Troubleshooting

If you have verified that you do not have a prior installation of Medisoft 26 on your server and have ensured that the IsRegistered check box is removed, but still receive the following error that the SalesForce account is already registered:

Figure 4. Error message

Then, check for a firewall or router that may be blocking some of the Platform Services APIs. The following must all be allowed:

identity.emdscloud.com	eligibilitybenefits.emdscloud.com
licensing.emdscloud.com	ppsmobile.emds.com
terminology.emdscloud.com	api.emdscloud.com

In addition, the two below are required if you are using CGM CONNECTION:

https://cnx.cgmus.com/

https://cnx-mh.cgmus.com/

Enhanced Security

In order to meet more strict security requirements for HIPAA and help prevent unauthorized access, the user login password strengths in CGM MEDISOFT have been enhanced.

New requirements

New password requirements include:

- Required passwords for all users, including a single user. Currently, you can set up a CGM MEDISOFT practice with no password. In CGM MEDISOFT 26, however, a password is required for access to data for all versions of CGM MEDISOFT.
- A password must be at least 8 characters in length. It can contain numbers or alpha characters and IS now **case-sensitive**.

- If you try to save a password that doesn't meet the requirements, you will receive a warning.

New practices

When you create a new practice, a system/administrator **user with** a password with access level of 1(all access) is automatically created for you. The user name for this password is SYSTEM and the password is MEDISOFT1 (all capital letters).

This new login has been added to the Tutorial database and will be added to any practice upon upgrade without any active users.

To create a new practice,

1. In CGM MEDISOFT, select File > New Practice. The Create a New Set of Data screen opens.
2. Enter the practice name and data path.
3. Click Create.

   At this point, the one user of SYSTEM and the password MEDISOFT1 are automatically created. Use these credentials to set up other users with user names and passwords. Be sure to create at least one administrative password with access level of 1. Once this is created, eMDs recommends that you delete the automatically-created system password.

Upgrading practices

The following rules apply:

- If there is at least one active User with an Access Level of 1, then this new SYSTEM user will not be created.
- If a converted practice has no active Users with an Access Level of 1 or has no Users created at all, then the new administrative User with the Login Name of SYSTEM and the Password of MEDISOFT1 will automatically be created. That user's Access Level will be set to 1.
- If a current user has a password that is shorter than the new minimum length (now set with a default of 8 or the length the administrator determines), the user will be prompted to create a new password. The user must enter their old password and then they can create a new password that meets the new password minimum length and other requirements.
- Since current passwords were previously stored as all upper-case, after an upgrade, if a user logs in with a password that meets the minimum length requirement and is all upper-case, no prompt to change is necessary since it meets the new requirements. However, if a current password that meets minimum length requirements but contains any lower-case characters is used, this would no longer be a match and you'll be prompted to create a new password. Alternatively that user can log in with all capitals and then change it later if desired.

  If you are deleting users and attempt to delete the last user with a Level 1 access, CGM MEDISOFT will present a warning message and prevent you from deleting that user.

CGM MEDISOFT Mobile

The CGM MEDISOFT Mobile app will remain case INsensitive for passwords.

Mobile will still allow you to log into a device with your passwords, which were set in a pre-26 Medisoft version that are shorter than the new required 8 minimum after Medisoft has been upgraded to 26 UNTIL that user's password is changed in CGM MEDISOFT.

Revenue Management password

Revenue Management password requirements have been updated to match CGM MEDISOFT.

Updated Login/Password Management screen

The Login/Password Management screen has been updated so that the Minimum Characters is set to 8 by default. In addition, clicking the Reset to Defaults button will set the Minimum Characters back to 8. You can change the minimum characters to a longer amount but the minimum must be 8.

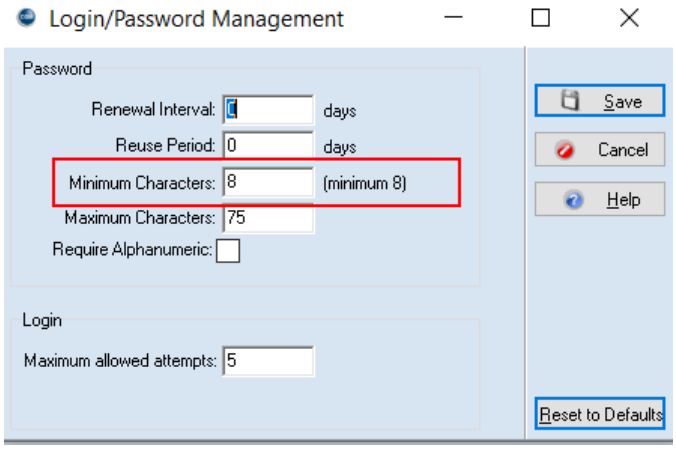

Figure 5. Login/Password Management screen

Updated User Entry screen

The User Entry screen in Security Setup has been updated for the new password requirements. Passwords are now case-sensitive.

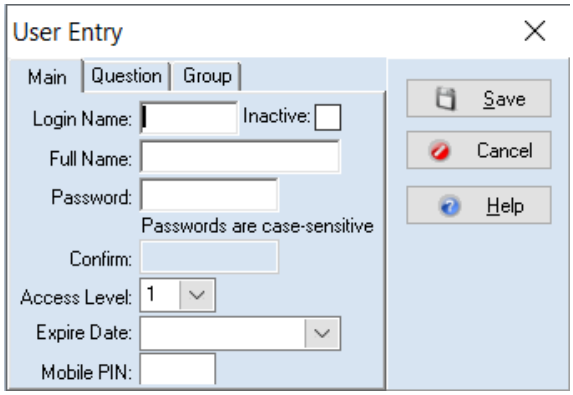

Figure 6. User Entry screen

Updated Global Login Global Options

The new password rules also apply to global logins. The Minimum Characters field is limited to 8 or more and clicking the Reset to Defaults button will set that field to 8 instead of 0.

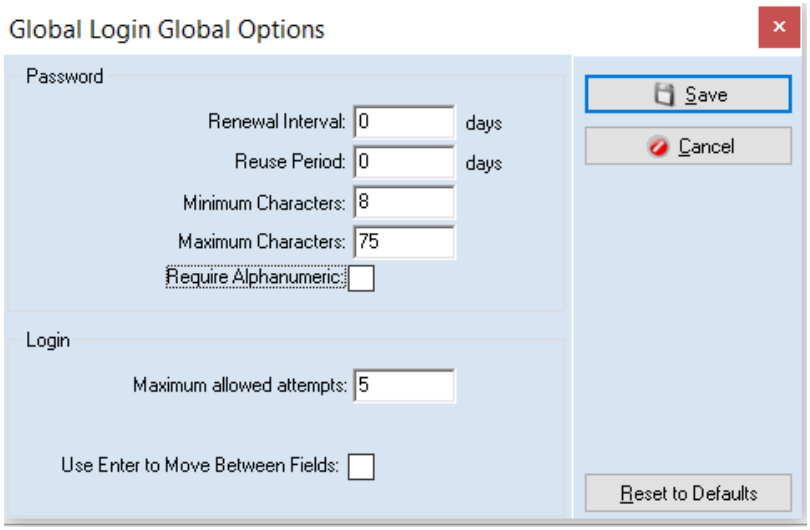

Figure 7. Global Login Global Options screen

Updated login expired message

The following login message has been updated.

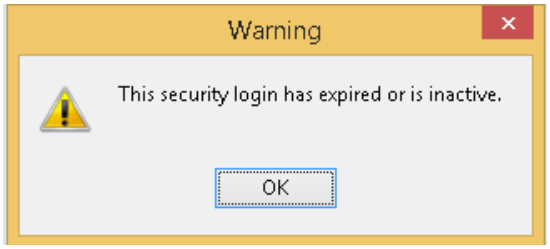

Figure 8. Warning

The user will see this message in the following situations:

- When a user is flagged as Inactive and tries to log in
- The user tries to log in on any day after the Expire Date in their security profile

New Dashboards

You can now view key financial and operational data in CGM MEDISOFT using a new dashboard. These dashboards are available in all versions of CGM MEDISOFT.

There are two new dashboards: Patient Encounter and Practice Financial. Each dashboard shows you key information about that area of your practice using graphs and metrics.

New Permission

There are two new options under Permissions on the Medisoft Security Permissions screen, which you can use to set a user's access to the dashboards.

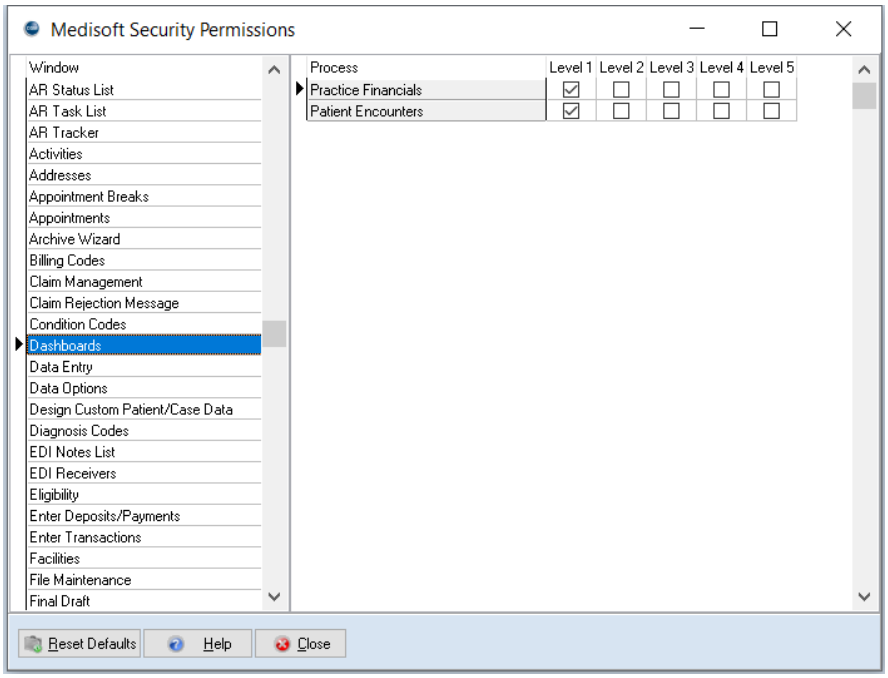

Figure 9. Medisoft Security Permissions screen

New menu option

There is a new menu option on the Reports menu: Dashboard. On this option, there are two sub-options, which you can use to open one of the dashboards.

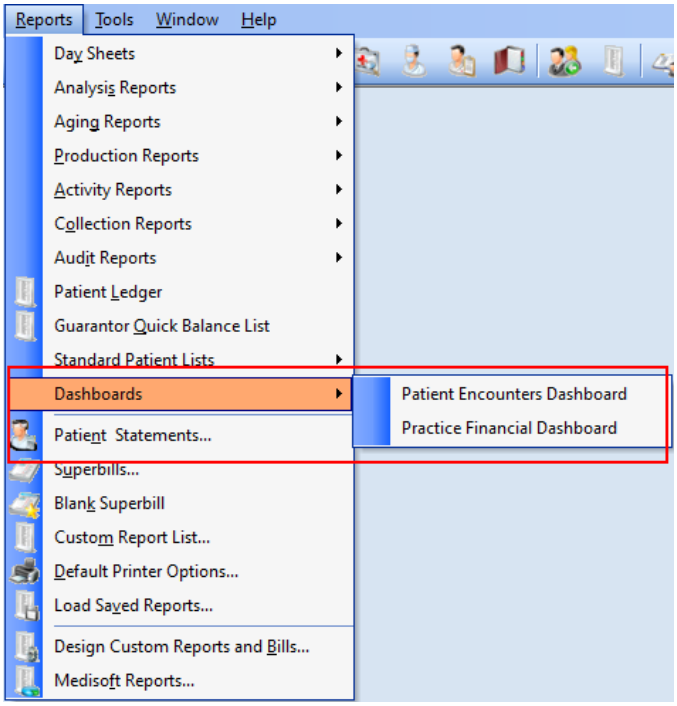

Figure 10. Reports menu

New Dashboard icons

If you want to add icons to the toolbar for either/both of the dashboards, even though they are on the Reports menu, they are listed in the right side Commands list when you select File on the left Category section. Highlight the one you want and drag it up to the Toolbar. For more information on modifying the toolbar, see the online Help for customizing the Toolbar.

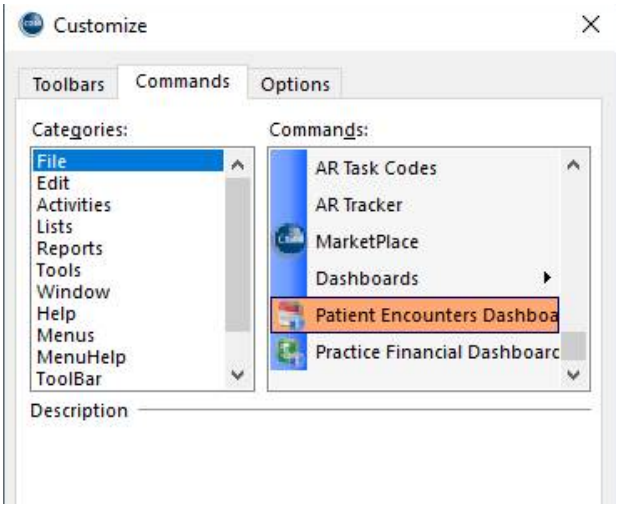

Figure 11. Customize screen

The icons appear as follows:

Icon	Function
	Patient Encounter Dashboard
	Practice Financial Dashboard

Procedure

To add these icons:

1. Open Medisoft and log in to your practice.
2. At the far right of the Toolbar, click the Down arrow and select Add or Remove buttons.

Figure 12. Toolbar

3. Click Customize at the bottom of the menu that appears. The Customize screen opens.

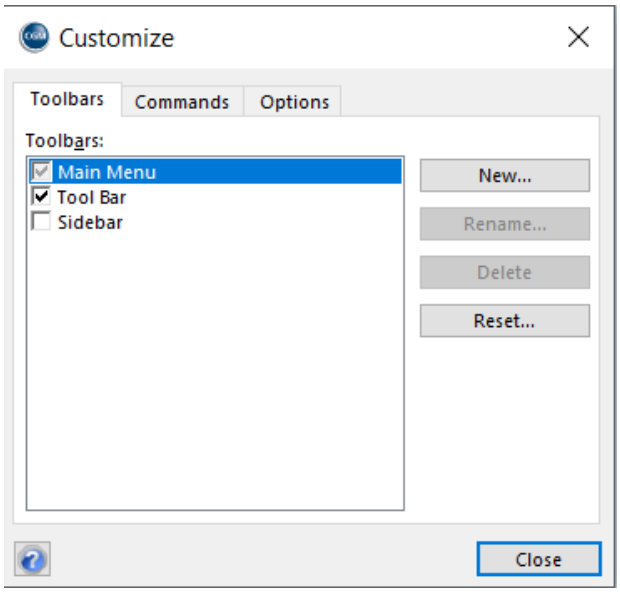

Figure 13. Customize screen

4. Select the Commands tab.
5. Select File under Categories on the left.

6. In the Commands area, scroll to the bottom of the list. The Dashboard icons appear there.

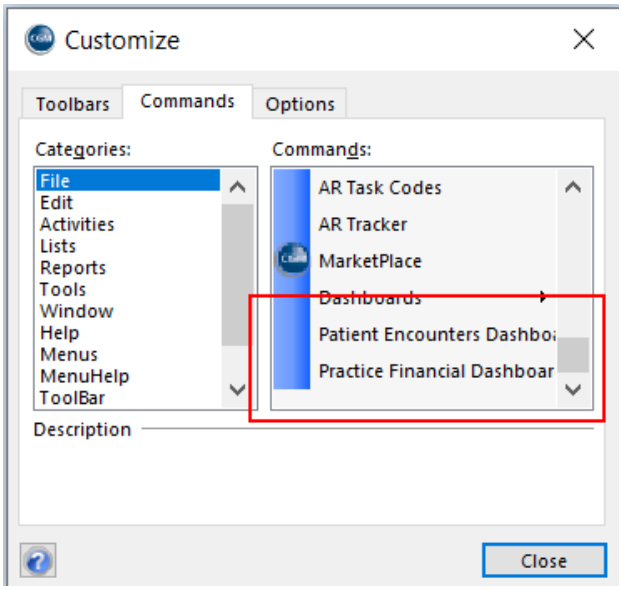

Figure 14. Customize screen

7. Click and drag the Patient Encounters Dashboard icon from the Customize screen to the toolbar at the top of the Medisoft session. The icon appears in the toolbar.

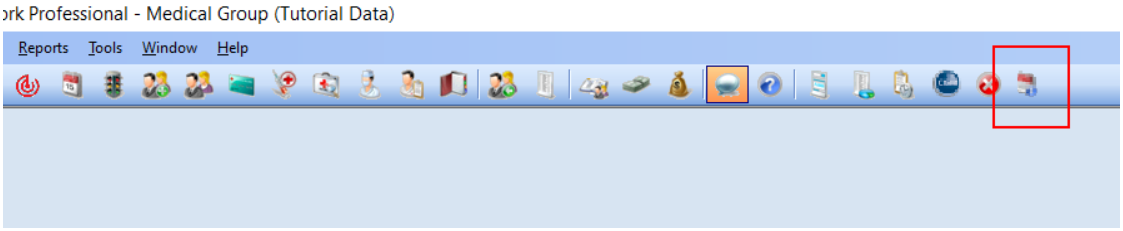

Figure 15. Medisoft screen

8. Repeat Step 7 for the Practice Financial Dashboard icon.
9. Click the **Close** button on the Customize screen.

New Patient Encounter dashboard

The **Patient Encounter** dashboard has three informational sections:

- Patient Visits Count
- Percentage of Canceled and Missed Appointments
- Average Charges Per Visit

Options

- Date Range: You can specify a date range for the information. The date range selected automatically applies to all sections of the dashboard. The date will default to the first of the current month through today.

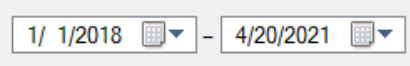

Figure 16. Date Range

If you change the date manually, you must press Enter for the data to refresh.

- Providers: You can select which providers (single, multiple, all) you want to see metrics for. MEDISOFT will remember which providers you selected and automatically filter the dashboard based on the previous selection. If you do not select any providers, all appointments will appear just as if you had selected all.

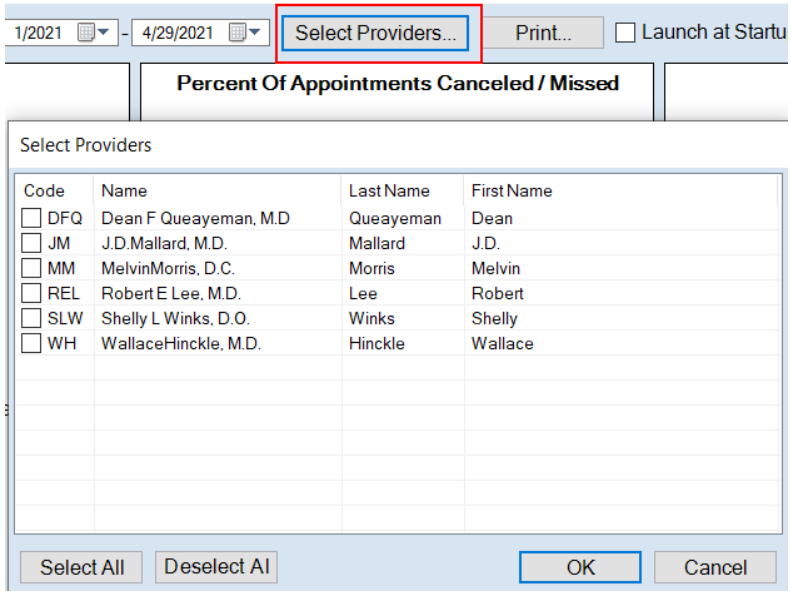

Figure 17. Provider Selection

- Print: if you want to print the information, click the Print icon.

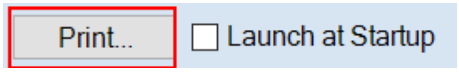

Figure 18. Print button

- Launch at Startup--you can specify which dashboard (if any) you want to open when you start CGM MEDISOFT and log in. By default, this check box is clear on both dashboards and you can only select one of the check boxes.

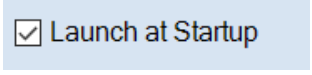

Figure 19. Launch at Startup check box

Patient Visits Count section

This section shows the sum of unique dates of service within billings that were created during the selected time range. Medisoft will calculate the number of visits based on unique Dates of Service (for the listed Procedure Code Types) found in the transaction Entry. Duplicate Dates of Service for a patient will not count as multiple visits. The total count will display on the top of the bar graphs for both the selected period and the prior year of the selected date range.

For the patient visit count using unique Dates of Service, only count those charge lines that contain Procedure Codes with a Code Type of:

- Procedure Charge
- Product Charge
- Inside Lab Charge
- Outside Lab Charge
- Global Surgical Procedure
- Billing Charge

If the charge detail has a Date of Service with a “From” and “To” date which are different, Medisoft will calculate “visits” by using the number of units.

Percent of Appointments Canceled/Missed

This section will individually sum those appointments with a Canceled or Missed status and divide those numbers by the total appointments (with patient charts only) during the same time period, and display a percentage of canceled appointments or percentage of missed appointments of the total appointments.

Average Charges Per Visit

The system will calculate the total amount of charges for the selected time period (charges composed of transactions with a Procedure Code Type of):

- Procedure Charge
- Product Charge
- Inside Lab Charge
- Outside Lab Charge
- Global Surgical Procedure
- Billing Charge

Medisoft will take the total amount of charges for the selected time period and divide that number by the number of visits during the same time period. The number of visits will be unique Dates of

Service, using the criteria specified above. The resulting dollar amount will display on the top of the bar graphs for both the selected period and the prior year of the selected date range.

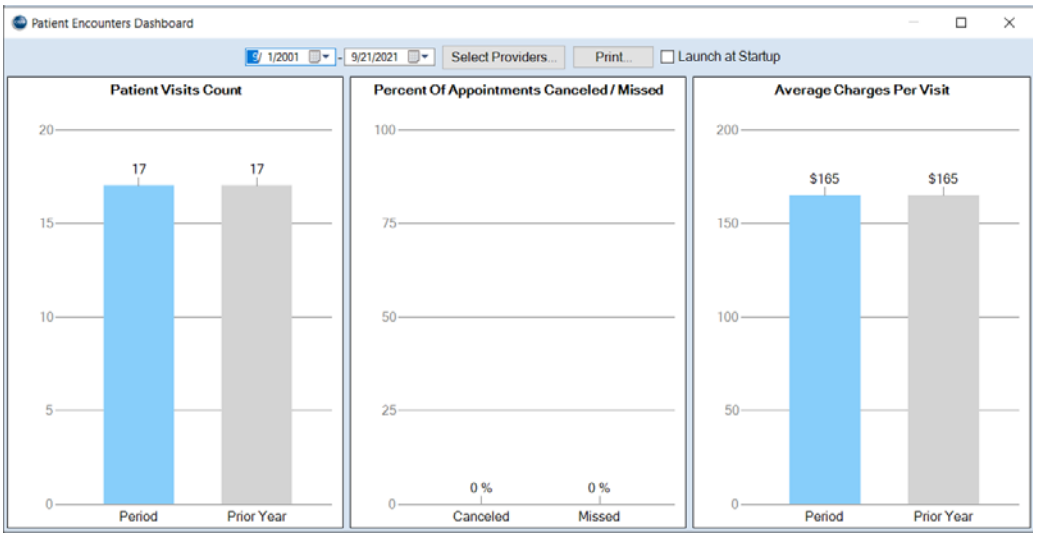

Figure 20. Patient Encounters dashboard

New Practice Financial dashboard

The Practice Financial Dashboard has three informational sections.

- Production Report, including breakdown of Charges, Payments, Adjustments, AR Days, AR % over 90 days
- A line graph of Charges and Payments
- Adjusted Net Collection Percentage

Each of the sections displays data based on the current system date at the time is it displayed. The information is current at the point of displaying the information for the entire practice

Options

Print: You can print the displayed information using the Print button or you can export the information into a PDF. The date and time the dashboard is printed will be included on the printed page.

Launch at Startup: Select the check box if you want this dashboard to open when you launch CGM MEDISOFT.

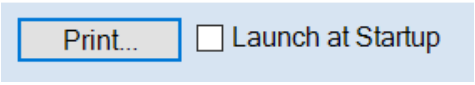

Figure 21. Options section

Note that the selected dashboard will appear on top of any other screens that have been set to open at startup (Patient List or Transaction Entry).

NOTE: Very large practice databases can cause the display of the Dashboard results to take extended time to complete the multiple calculations. It is recommended to initially run the Financial

Dashboard during a time when Medisoft is not being actively used by you so you can obtain an estimate of the amount of time future dashboard requests will take. This will assist in knowing when to run the Dashboard so it does not prevent other work from being performed in Medisoft. If display times are lengthy, you should not check the box to display the dashboard upon entry.

Date: The default is the current system date. You can select a date using the arrow drop-down on the right. When you do, the data in the screen will be updated automatically. You can also manually enter a date and the data will refresh when you press the Enter key.

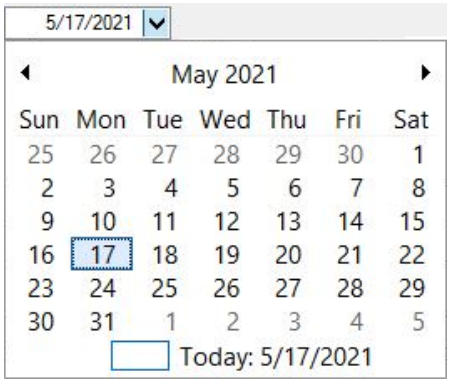

Figure 22. Date selection field

Note: When you select a date other than the current date, the AR Days and % AR Over 90 Days metrics are removed.

Production report

The **Production Report** will display the individual totals for:

- **Charges:** (Procedure Charge, Product Charge, Inside Lab Charge, Outside Lab Charge, Global Surgical Procedure, Billing Charge)
- **Debit Adjustments:** Adjustment (NOT checked as Make Negative), Insurance Adjustment (NOT checked as Make Negative), Insurance Withhold Adjustment (NOT checked as Make Negative)
- **Payments** Insurance Payment, Cash Copayment, Check Copayment, Credit Card Copayment, Cash Payment, Check Payment, Credit Card Payment, Insurance Take Back Adjustments
- **Credit Adjustments** Insurance Adjustment, Adjustment (checked as Make Negative), Insurance Adjustment (checked as Make Negative), Insurance Withhold Adjustment (checked as Make Negative)
- **Net Production** sum of extended amounts from each line

In the Production Report, Medisoft will display no sign if the extended amount is normally a positive number for Charges and Debit Adjustments. If the amount is negative for Charges and Debit Adjustments, it will display a negative sign. In addition it will display a negative sign if the extended amount is normally a negative number for Payments and Credit Adjustments. If the amount is positive for Payments and Credit Adjustments, it will display no sign.

Displayed columns will include the current month, the same month from the prior year, and a Variance amount between the current month and the prior year's same month (Current Month

minus Prior Year Same Month). Other columns will be This Year's Year-To-Date data, the same Year-To-Date period from the Prior Year, and a Variance amount between the current YTD and the prior YTD for the same period. (Current YTD minus Prior Year YTD).

The displayed numbers will allow for up to $9 billion (9,000,000,000), and display in whole dollars (no cents), rounded-up or rounded-down to the nearest dollar.

Accounts Receivable Days is found by Total Accounts Receivable divided by one year revenue multiplied by 365. ((Accts Receivable/Revenue) x 365). The dashboard will display to one decimal place.

> **Calculation:** Total Accounts Receivable as of this date (no date ranges) divided by total Charges (Procedure Charge, Product Charge, Inside Lab Charge, Outside Lab Charge, Global Surgical Procedure, Billing Charge) for one year date range back from today. Multiply this amount by 365.

Percentage of Accounts Receivable Over 90 Days. This is found by Total Accounts Receivable amount over 90 days of Date of Service divided by Total Accounts Receivable. ((AR>90 Days from DOS) / (Total AR)). The dashboard will display this number as a percentage to one decimal place.

> **Calculation:** Total of Charges which are equal to or greater than 90 Days from today's date (using Date of Service for Insurance Balances, Date of Service for Patient Balances, and Date of Service for Patient Co-Pay) that are unpaid. Divide that number by the Total Accounts Receivable as of this date.

Charges and Payments Mix Over 12 Months will be a line graph consisting to two data elements---total charges and total payments. The x-axis will be the current month (at the right side) and twelve prior months displayed to the left of the current month. The y-axis will be flexible dollar amounts depending on the dollar amounts needed to be displayed in the graph.

> **Calculation:** Total Charges (Procedure Charge, Product Charge, Inside Lab Charge, Outside Lab Charge, Global Surgical Procedure, Billing Charge).
>
> **Total Payments:** (Insurance Payment, Cash Copayment, Check Copayment, Credit Card Copayment, Cash Payment, Check Payment, Credit Card Payment, Deductible).

Adjusted Net Collection Percentage will display an amount that will represent the percentage of collections over a rolling 12-month period of time. The calculation of the Adjusted Collection Percentage is the total amount of payments received over the time period, less credits, divided by the total amount of charges created over the time period, less write-offs (negative adjustments). The result will be multiplied by 100 to obtain a percentage.

> (((Total Payments – Credits) / (Total Charges – Write Off's)) x 100).

Total Payments - Credits = all payments received from insurance and patients, less positive adjustments (Medisoft does not have a specific transaction type for Refunds), for the rolling 12-month time period. Net the following Procedure Code Types:

- Insurance Payment
- Cash Copayment
- Check Copayment
- Credit Card Copayment
- Cash Payment

- Check Payment
- Credit Card Payment
- Adjustment [Adjustment Types NOT checked as Make Negative]
- Insurance Adjustment [Adjustment Types NOT checked as Make Negative
- Insurance Withhold Adjustment [Adjustment Types NOT checked as Make Negative]
- Insurance Take Back Adjustments
- Insurance Withhold Adjustment [Adjustment Types checked as Make Negative]

Total Charges - Write Off's = all charges created, minus insurance adjustments, insurance write-offs, patient write-offs, bad debt, for the rolling 12-month time period. Net the following Procedure Code Types:

- Adjustment [Adjustment Types checked as Make Negative]
- Insurance Adjustment [Adjustment Types checked as Make Negative]
- Procedure Charge
- Product Charge
- Inside Lab Charge
- Outside Lab Charge
- Global Surgical Procedure
- Billing Charge
- SalesTax is not included in any calculations.

Figure 23. Practice Financial Dashboard

CGM Connection™

CGM CONNECTION is available only for Medisoft Network Professional.

CGM CONNECTION™ is a platform created by CGM that enables CGM MEDISOFT customers to send automated appointment reminders to their patients via text, email, and voice calls. Patients have the ability to confirm or cancel the appointment, which will automatically get reflected in the CGM MEDISOFT/Office Hours system.

CGM MEDISOFT will interface bi-directionally with CGM CONNECTION, allowing CGM MEDISOFT to update CGM CONNECTION, as well as sending **confirmed or canceled status** changes to appointments from CGM CONNECTION back to CGM MEDISOFT.

CGM CONNECTION with CGM MEDISOFT includes the following;

- Real time interface to send new/updated data.
- Appointment reminder status eg; confirmation/cancellation/ results will display in the CGM MEDISOFT schedule and the results fields can be added to the Appointment List lookup.

Services include:

- Appointment Reminders – Bi-directional notification to and from patients
    - Email, Voice, and text

Other features are available in CGM CONNECTION such as Instant Notifications, No-Show messages, and Mass Messages, but these are currently available in the CGM CONNECTION Customer Portal and are not controlled nor triggered from CGM MEDISOFT.

Initial load

There is no initial load of patient/appointment data from CGM MEDISOFT to CGM CONNECTION. Instead, information is sent only with triggering events in CGM MEDISOFT.

Note that if the patient's Date of Birth is blank in CGM MEDISOFT, it will appear in CGM CONNECTION as 1/1/1900.

Triggering events

From the time that the integration is initiated, CGM MEDISOFT will only send needed data to CGM CONNECTION when certain information is entered or changed in patient demographics and/or appointments, which would trigger the sending of that data AND the patient has opted **in** to at least one contact method. See CONNECTION Prefs section for details ("New CGM CONNECTION Preferences screen" on page 24).

If a patient has been opted in and patient and appointment data has been previously sent to CGM CONNECTION and then later is changed to OPT Out, the opt out preference is sent to CGM CONNECTION so reminders will no longer be sent to the patient.

Triggered events include any new appointment changes in date or time or length to an existing appointment, canceled appointments, deleted appointments, changes to an appointment reason (Appointment Type in CGM CONNECTION), or changes to an appointment provider (Resource and Location in CGM CONNECTION). Triggered events also include any new patients, changes to an existing patient's name, address, date of birth, gender, any phone number field that is being used in the CGM CONNECTION Preferences, any email field, change to an opt-out / opt-in status

via communication preferences, or language. These updates will be on a regular basis set in the Interface Configuration to update the contact database maintained by CGM CONNECTION.

Reason description and provider information will be sent when the patient/appointment is sent.

If the status of an existing appointment changes FROM anything to UNCONFIRMED, CONFIRMED, or CANCELLED, the update is sent to CGM CONNECTION.

If the status of an existing appointment changes TO anything except CONFIRMED or CANCELED, a deleted message is sent to CGM CONNECTION so a reminder will not be sent to patient.

New appointments are only sent to CGM CONNECTION if they are created with the status of UNCONFIRMED.

- Language (note, CGM CONNECTION only utilizes English, French and Spanish. Other languages default to English)
- Appointment changes that trigger sending to CGM CONNECTION will be done in a real-time connection, following the frequency update setup in the initial configuration. (Recall Appointments and appointments without Patient Chart Numbers are always excluded.)
- New data and changes to Audit Trail will be written as normal. Changes made to CGM CONNECTION Preferences will also be written to Audit Trail. Appointment status changes made from CGM CONNECTION will also show in the audit trail with the User HL7 User.
- Triggered fields for data which is new or changed, which should be sent to CGM CONNECTION includes:
    - Appointment Provider (PROV ID)
    - Appointment Reasons (APPT TYPE ID)
    - Appointment Statuses (UNCONFIRMED and CANCELLED status only)
    - Appointment Date/Time
    - Exclude sending appointments with a status of CONFIRMED, RESCHEDULED, CHECKED-IN, MISSED, BEING SEEN, CHECKED OUT
    - Appointment ID
    - Patient demographic details relevant to appointment confirmation
        - Patient First Name
        - Patient Last Name
        - Patient Date of Birth
        - Patient Gender
        - Patient Street 1
        - Patient City
        - Patient State
        - Patient Zip Code
        - Patient Telephone Call (from Preference Window) (unless Opt-Out is selected, then do NOT send any Voice data)

- Phone Preference (Opt-Out from Preference Window) (If Opt-Out is the selected preference do NOT send any data other than Opt-Out)
- Patient Email (Email, from preference window) (unless Email Opt-Out is selected, then do NOT send any Email data)
- Email Preference (Email Opt-Out from preference window) (If Email Opt-Out is the selected preference do NOT send any Email data other than Opt-Out)
- Patient Text Message Number (from preference window) (unless opt-Out is selected, then do NOT send any data)
- Text Preference (Opt-Out from preference window) (If Opt-Out is the selected preference, do NOT send any data other than Opt-Out)
- Opt-out of all CGM CONNECTION (If Opt-out of all CGM CONNECTION (Master Opt-Out) is checked then do not send contact data for the three preferences and send Opt-Out for all three preferences)

Data Transfers

CGM CONNECTION with CGM MEDISOFT includes the following;

CGM MEDISOFT to CGM CONNECITON

- Real time interface to send new/updated patient and appointment data.

CGM CONNECTION to CGM MEDISOFT

- Updates the patient's Appointment Status with response of Confirmed or Canceled from CGM CONNECTION if the existing appointment Status is Unconfirmed.
- Appointment reminder status of confirmation/cancellation results will display in the CGM MEDISOFT schedule in the left panel when the appointment is selected in the grid.
- Leaves the patient's Appointment Status at Confirmed if the response is Confirmed and the status is already set to Confirmed.
- Updates the patient's Appointment Status to Canceled from the response if the existing Status is Confirmed.
- Does not update any other Statuses that may exist on the appointment at that time.

Launching CGM CONNECTION

You can launch CGM CONNECTION website from within CGM MEDISOFT in the following ways:

- Clicking the CGM CONNECTION button on the Iconbar of the Office Hours Appointment screen (for more information, see “New button on the Iconbar” on page 27)
- Clicking the CGM CONNECTION button on the Patient/Guarantor screen (for more information, see “Updated Patient/Guarantor screen” on page 26)
- Selecting CGM CONNECTION on the right-click menu on the Appointments screen (for more information, see “New right-click option” on page 28)
- Clicking the CGM CONNECTION button on the Insert/Edit Appointment screen (for more information, see “Updated New/Edit Appointment Entry screen” on page 29)

Note: if you have not purchased and have not implemented CGM CONNECTION, you will receive a message saying this feature is not available.

CGM CONNECTION documentation

A User Guide for CGM CONNECTION is available on the CGM MEDISOFT 26 Documentation page in the VAR Lightning Portal. This guide shows you how to create customized messages for phone call, text, and email appointment reminders.

New Medisoft Security Permission Option

There is a new security option that you can use to control users' access to the CGM CONNECTION Configuration screen (see "New CGM CONNECTION Configuration screen" on page 21). This option is available under Interface on the Medisoft Security Permissions screen.

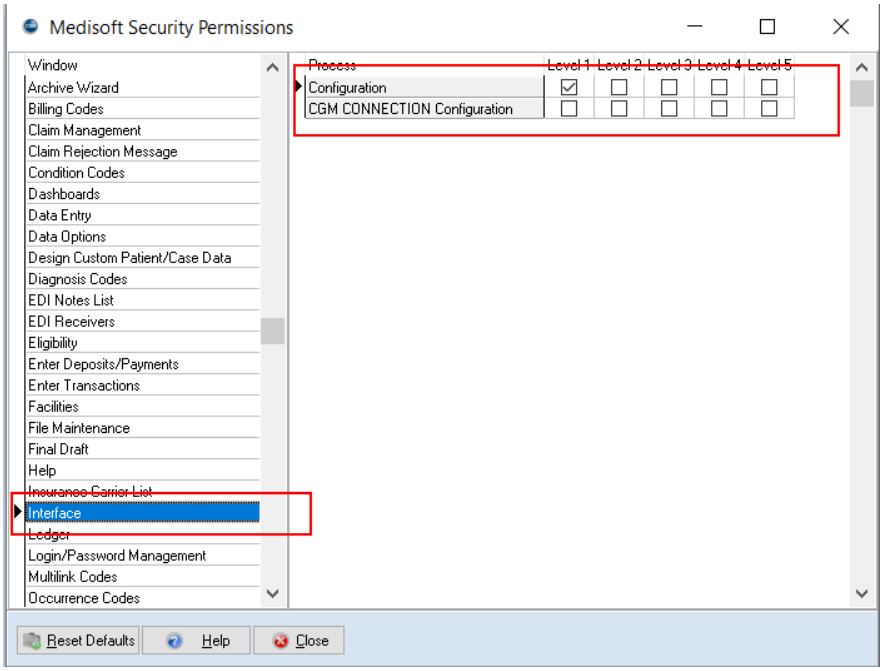

Figure 24. Medisoft Security Permissions screen

Very Important: the default value for ALL access levels is cleared, so you MUST use this screen to select one or more levels of access BEFORE any user can access the new CGM CONNECTION Configuration screen.

Users who do not have access to the new Configuration screen will receive the standard Security Warning message.

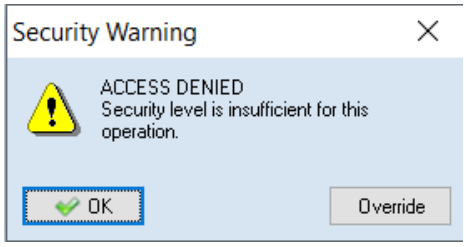

Figure 25. Security Warning screen

New Menu Option

Once you have contracted for CGM CONNECTION, you will set up and enable the interface.

There is a new option on the Tools > Services menu: CGM CONNECTION Configuration. Select this option to open the CGM CONNECTION Interface Configuration screen.

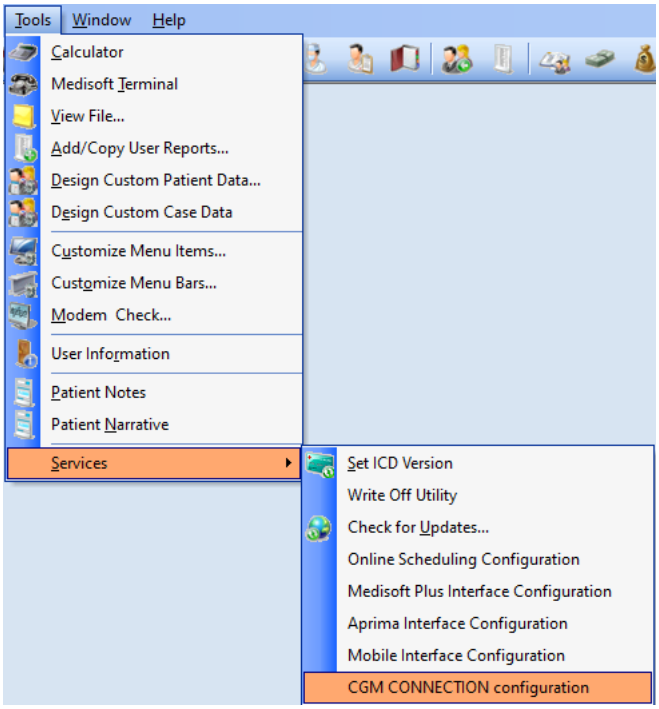

Figure 26. Tools > Services menu

New CGM CONNECTION Configuration screen

Use this new screen to set up interface parameters for CGM CONNECTION.

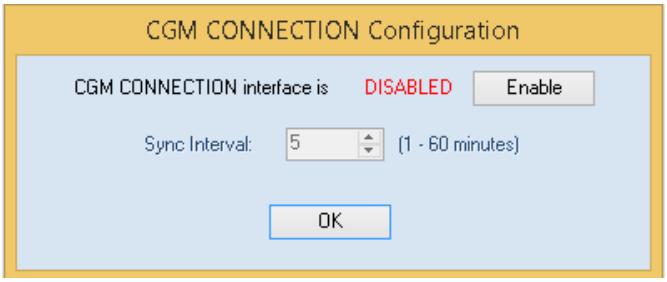

Figure 27. CGM CONNECTION Interface Configuration screen

The table below describes the options on this screen.

Option	Description
Enable/Disable button	Select this button to enable or disable the interface. When you click Enable, the Enter Interface Information screen opens.
Interface ID	Enter the Interface ID that you received. This ID will always be visible on the screen.
Interface Key	Enter the Interface Key that you received.
Sync Interval	Enter the time interval for sending updates to selected patients demographics and preferences, and selected appointment creation or updates. The Sync Interval is in minutes. You can select a range between 1 and 60 minutes, with the default being set at 5 minutes.
OK button	Click this button to save the changes on the screen.

Enabling the interface

1. Contact CGM CONNECTION Implementation and set up your account. You will receive an Interface ID and Interface Key that you will enter on the Enter Interface Information screen.
2. In CGM MEDISOFT, click Tools > Services > CGM CONNECTION Configuration menu. The CGM CONNECTION Configuration screen opens.
3. Click the **Enable** button. The Enter Interface Information screen opens.
4. Enter your Interface ID and Interface Key.
5. Click the **OK** button.
6. Specify the Sync Interval.
7. Click the **OK** button.

Updated Patient/Guarantor screen

New button

There is a new button on the Patient/Guarantor screen: CONNECTION Prefs. Click this button to open the CGM CONNECTION Preferences screen.

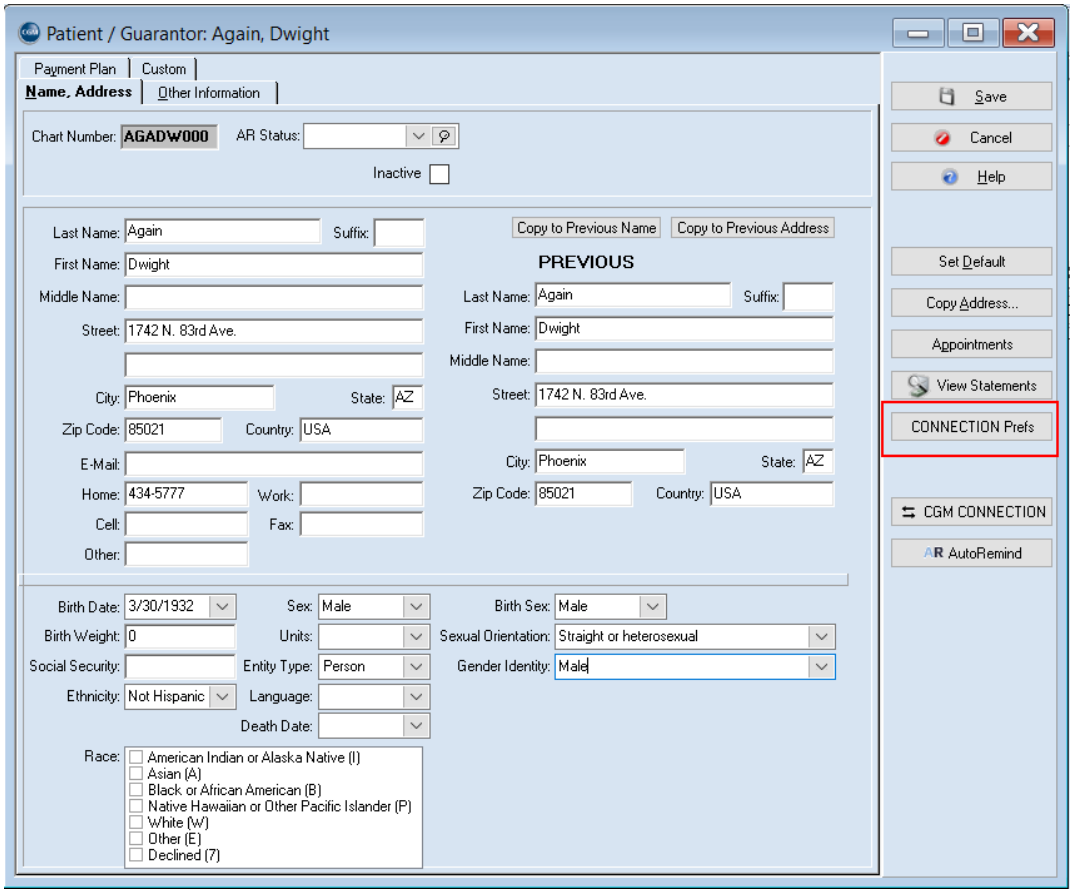

Figure 28. Patient/Guarantor screen

Note: This button will be disabled for new patients until the patient record is saved.

Updated New/Edit Appointment Entry screen

There is a new button on the New/Edit Appointment Entry screen: CONNECTION Prefs. Click this button to open the CGM CONNECTION Preferences screen (for more information, see “New CGM

CONNECTION Preferences screen" on page 24).

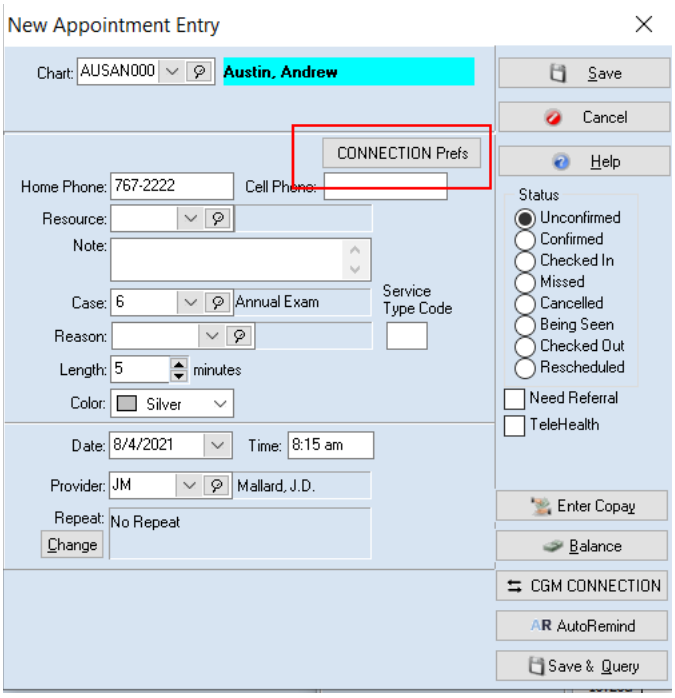

Figure 29. New Appointment Entry screen

New CGM CONNECTION Preferences screen

This new screen will open when you click the CGM CONNECTION Prefs button on the screen. Use this screen to specify whether or not the patient opts-out of CGM CONNECTION, or to select the contact preferences if the patient is opting in to reminders.

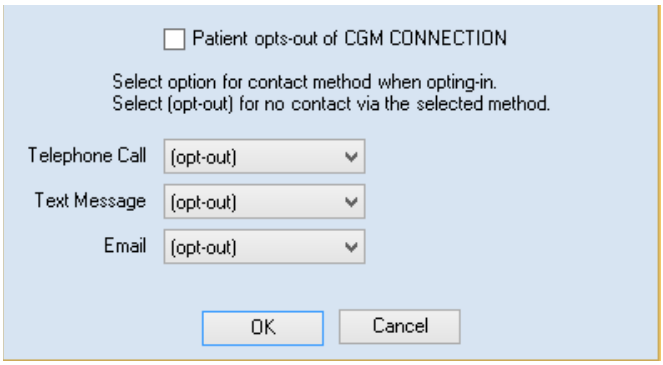

Figure 30. CGM CONNECTION Preferences screen

Note: Phone numbers MUST have an area code. If there is no area code, the number will be blank in CGM CONNECTION.

The table below describes the options on this screen.

Option	Description
Patient opts out of CGM CONNECTION check box	Select this check box if the patient opts out of CGM CONNECTION entirely. Note that for each of the three contact methods (telephone call, text message or email), the patient can individually opt out.
Telephone Call	Use this field to select which phone number in the patient's record that will be used to send the patient voice messages.
Text Message	Use this field to select which phone number in the patient's record that will be used to send the patient text messages.
Email	Use this field to select which email address in the patient's record that will be used to send the patient email messages.
OK button	Click this button to set the options.
Cancel button	Click this button close the screen without saving any changes.

Note: If selections of phone or email are made in the individual fields and then the master Opt – Out box is checked, the individual selections will remain and be disabled. The opt out preference will be sent to CGM CONNECTION for all fields. The numbers/email remain and are not cleared in case the opt out box was checked in error. If the Opt out box is unchecked, the fields are enabled and the preferences will be resent to CGM CONNECTION.

Updated Patient/Guarantor screen

New button

There is a new button on the Patient/Guarantor screen: CGM CONNECTION. Click this button to launch CGM CONNECTION in your browser.

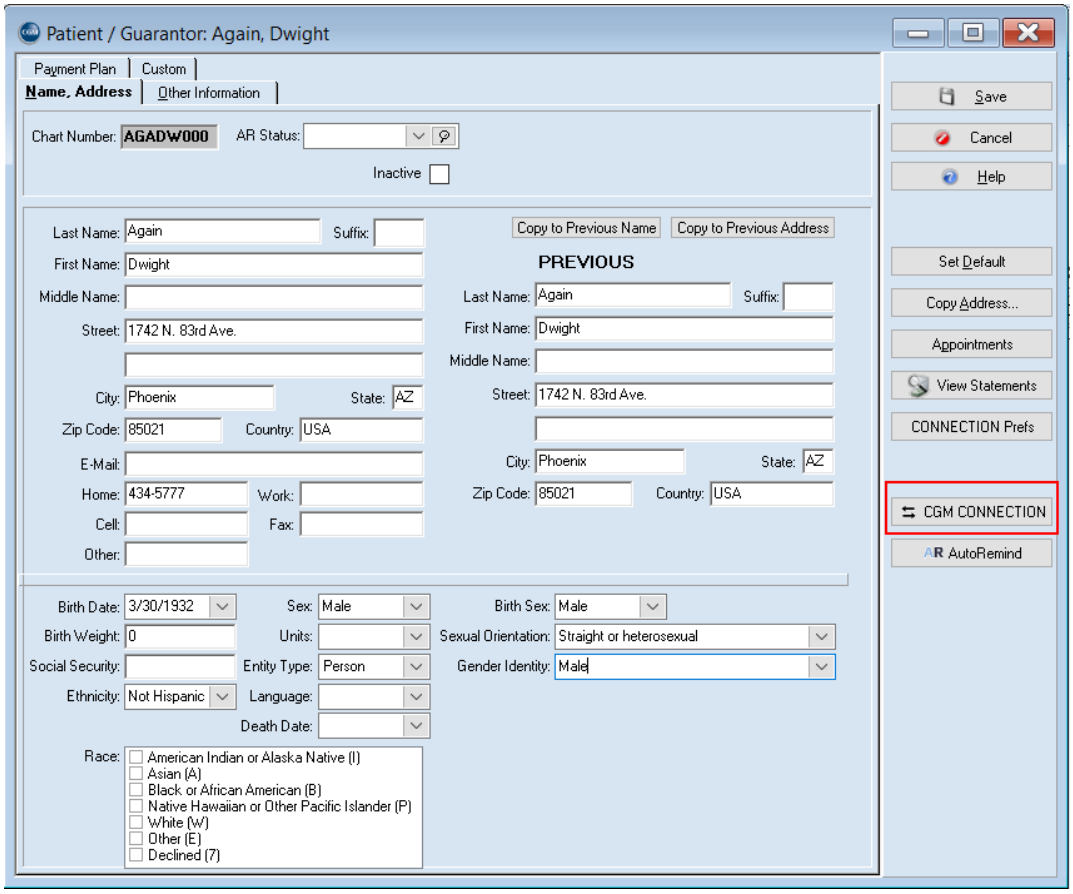

Figure 31. Patient/Guarantor screen

Note: This button will be disabled for new patients until the patient record is saved.

Updated Office Hours Appointment grid

There is now a field on the left that displays the status of the appointment from CGM CONNECTION.

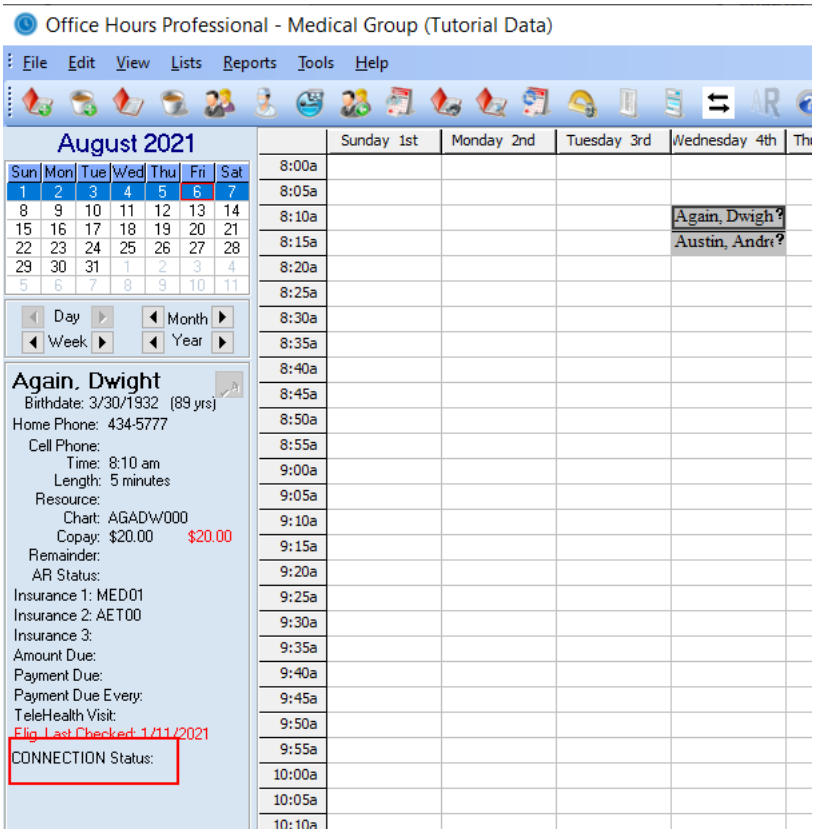

Figure 32. Appointment grid

Values for this field are Confirmed or Canceled. In addition, the date and time will be displayed.

New button on the Iconbar

There is a new button on the Iconbar for CGM CONNECTION. Clicking this icon will launch CGM CONNECTION in your browser.

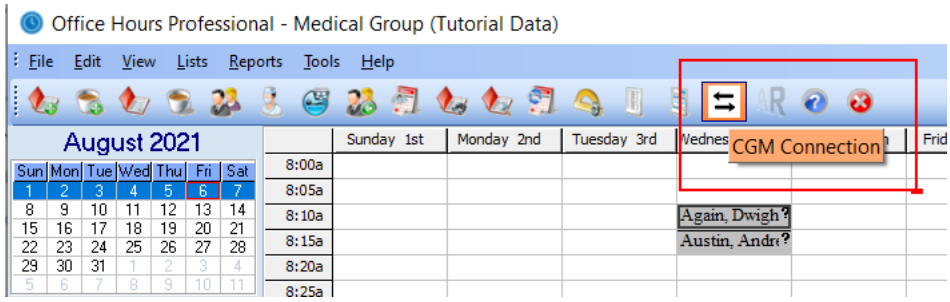

Figure 33. Appointment Schedule Iconbar

New right-click option

There is a new option on the right-click menu for an appointment: CGM CONNECTION. Selecting this option will launch CGM CONNECTION in your browser.

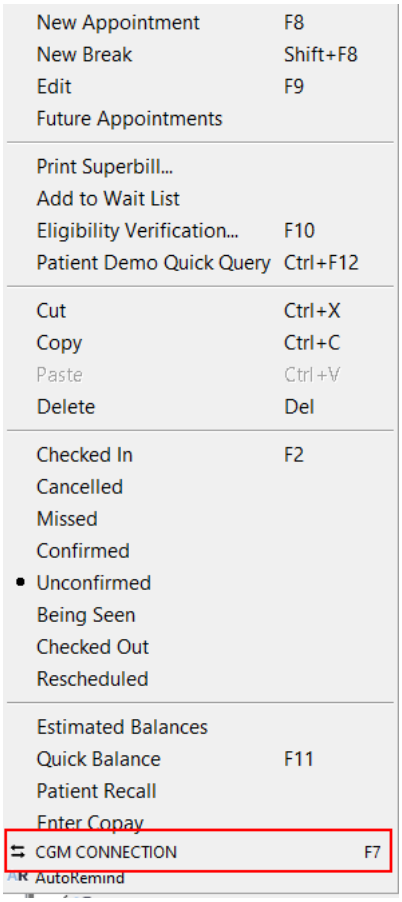

Figure 34. Right-click menu

Note: this option will be enabled only when you are right-clicking on an existing appointment with a Chart number.

Updated New/Edit Appointment Entry screen

There is a new button on the New/Edit Appointment Entry screen: CGM CONNECTION. Click this button to launch CGM CONNECTION in your browser.

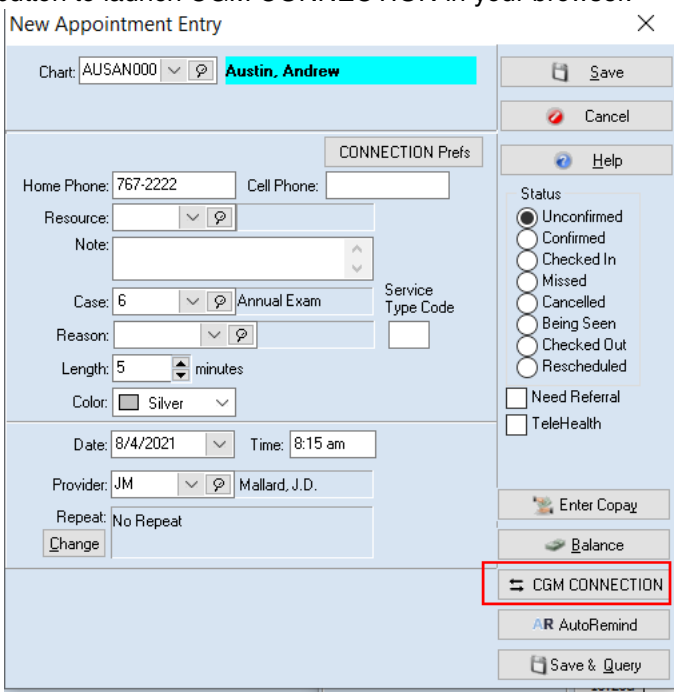

Figure 35. New Appointment Entry screen

Updated Appointment List grid column options

New grid column options

There are two new grid column options that you can add to the Appointment List screen in Office Hours: CONNECTION Status and CONNECTION Status Date.

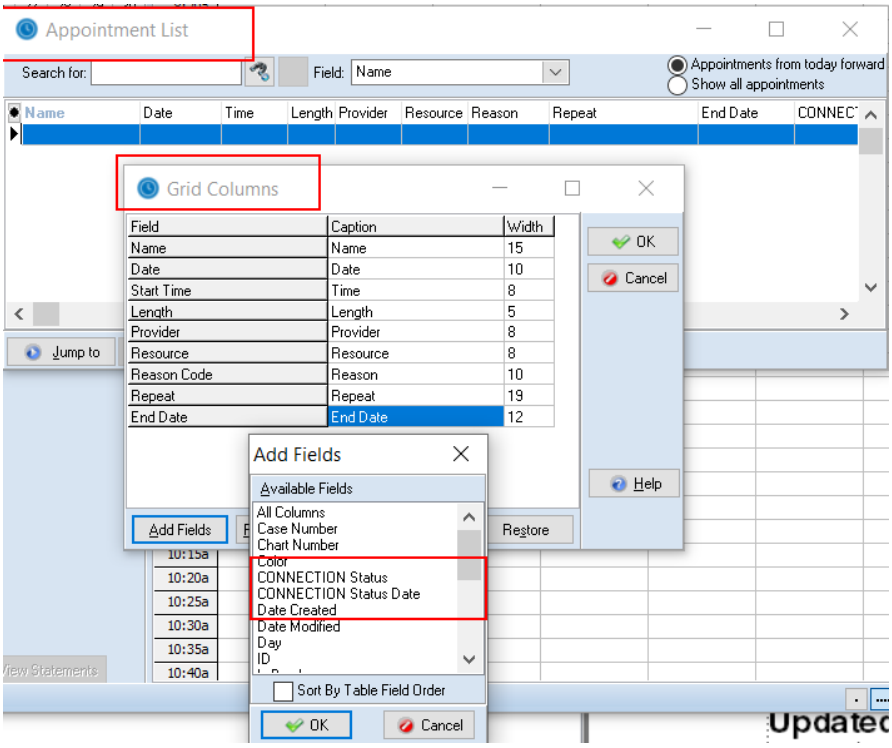

Figure 36. Appointment List/Grid Columns/Add Fields screen

Once you add these columns to the Appointment List grid, you can see the CGM CONNECTION status at a glance.

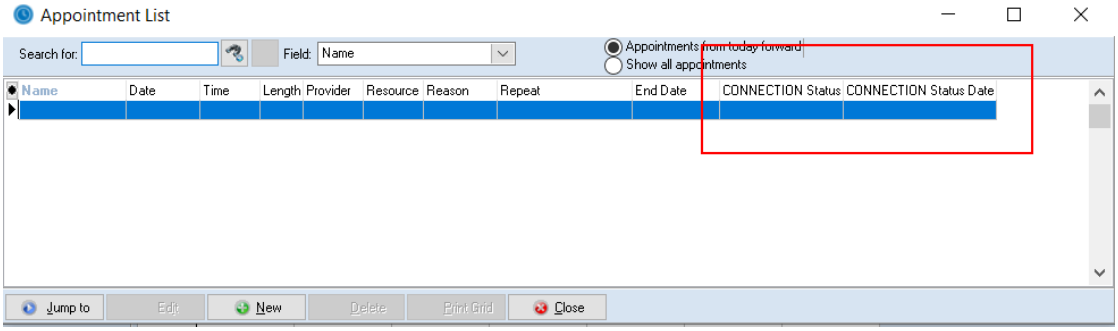

Figure 37. Appointment List screen

Procedure

To add these columns to the Appointment List

1. In CGM MEDISOFT, select Appointment Book from the Activities menu. Office Hours opens.

2. In Office Hours, select Appointment List from the Lists menu. The Appointment List screen opens.
3. Click the black dot to the left of the Name field on the Appointment List columns. The Grid Columns screen opens.

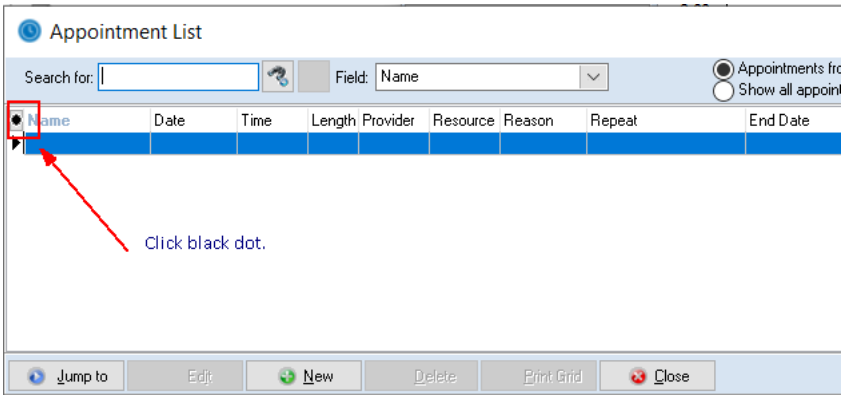

Figure 38. Appointment List screen

4. On the Grid Columns screen, click **Add Fields**. The Add Fields screen opens.
5. Select the CONNECTION Status option you want and click **OK**.
6. Repeat Steps 4 and 5 to add the second column.
7. Use the Move Up and Move Down buttons on the Grid Columns screen to move the new columns to the places you want.
8. Click the **OK** button. The new columns appear in the grid.

Patient record

Updated Patient/Guarantor screen

Several new fields are available on the New/Edit Patient screen to accommodate the USCDI and 21st Century CURES Act Requirements.

- Previous Name
- Previous Address
- Birth Sex
- Sexual Orientation
- Gender Identity

New field

There is a new field on the Name, Address tab of the Patient screen: Previous Name. Use this field to maintain the patient's previous name.

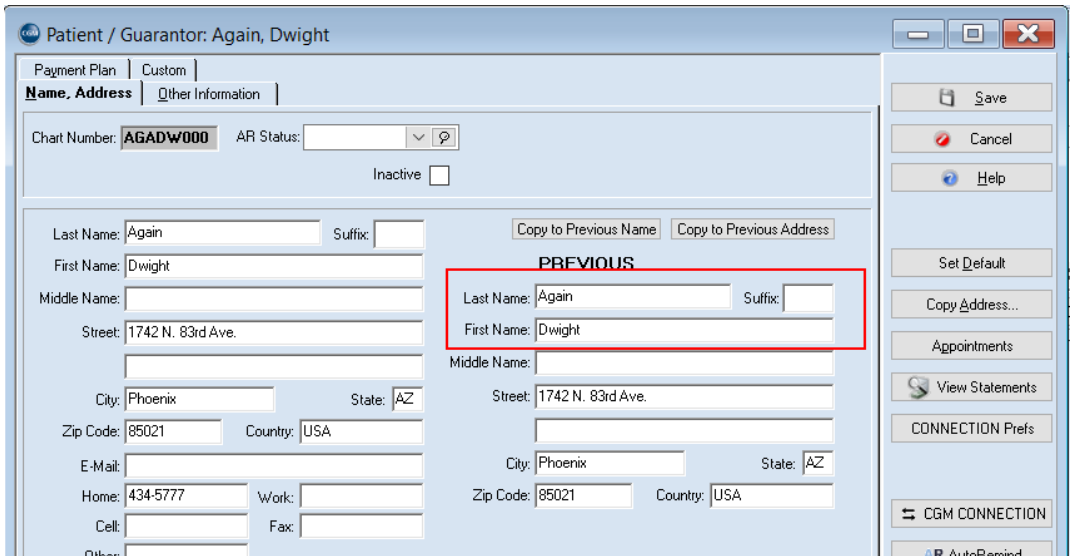

Figure 39. Patient screen - Name, Address tab

There is also a new button: Copy to Previous Name. Use this button to copy the patient's current name to the Previous Name field.

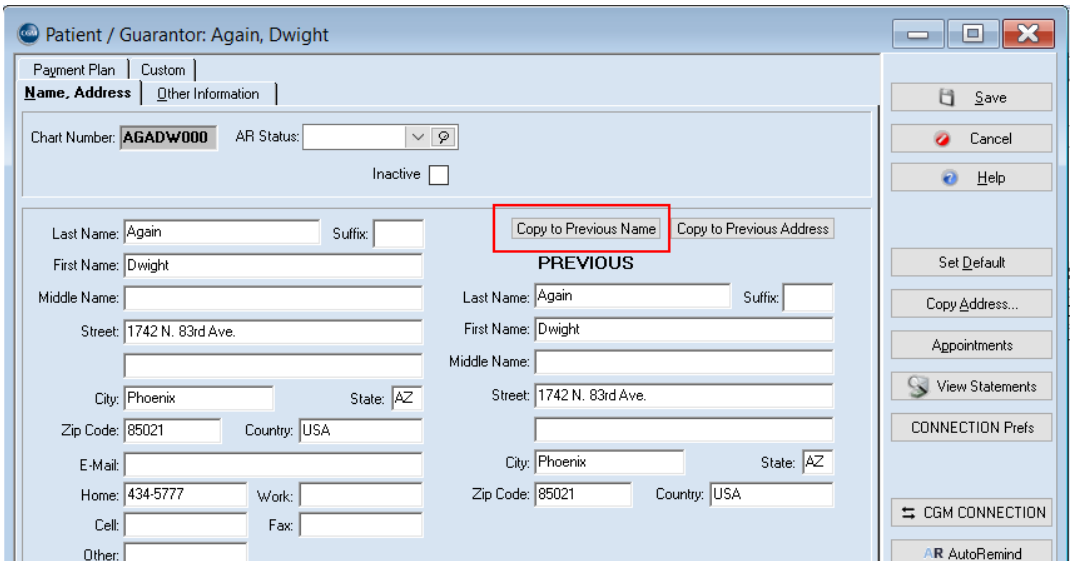

Figure 40. Patient screen - Name, Address tab

This information will be printed on the Cures Patient Demographics report.

New fields

There is a new section on the Name, Address tab of the Patient screen: Previous address. Use the fields here to maintain the patient's previous address.

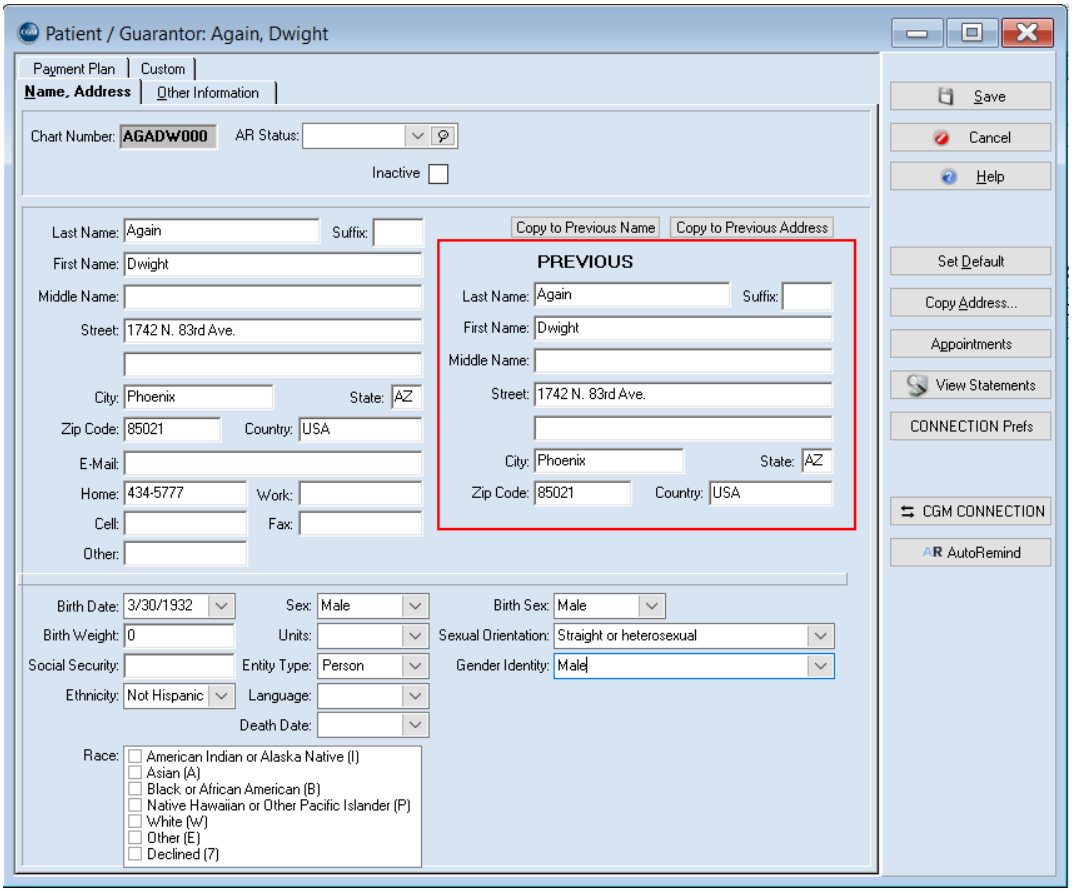

Figure 41. Patient screen - Name, Address tab

There is also a new Copy to Previous Address button. Click this button to copy the address fields for the current address to the Previous Address section.

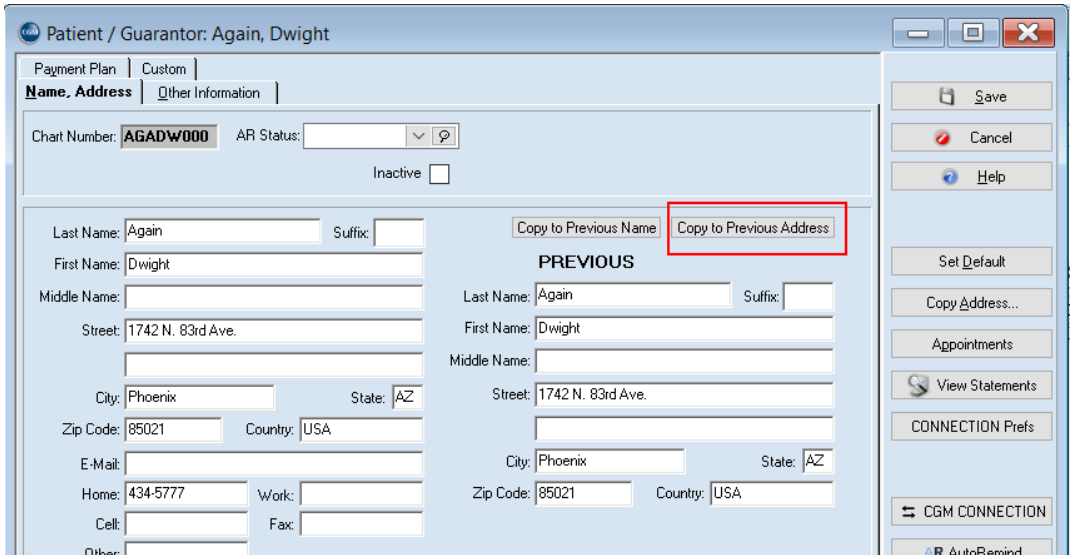

Figure 42. Patient screen - Name, Address tab

This information will be printed on the Cures Patient Demographics report.

New field

There is a new field on the Name, Address tab of the Patient screen: Birth Sex. Choose the patient's sex assigned at birth from the drop-down list.

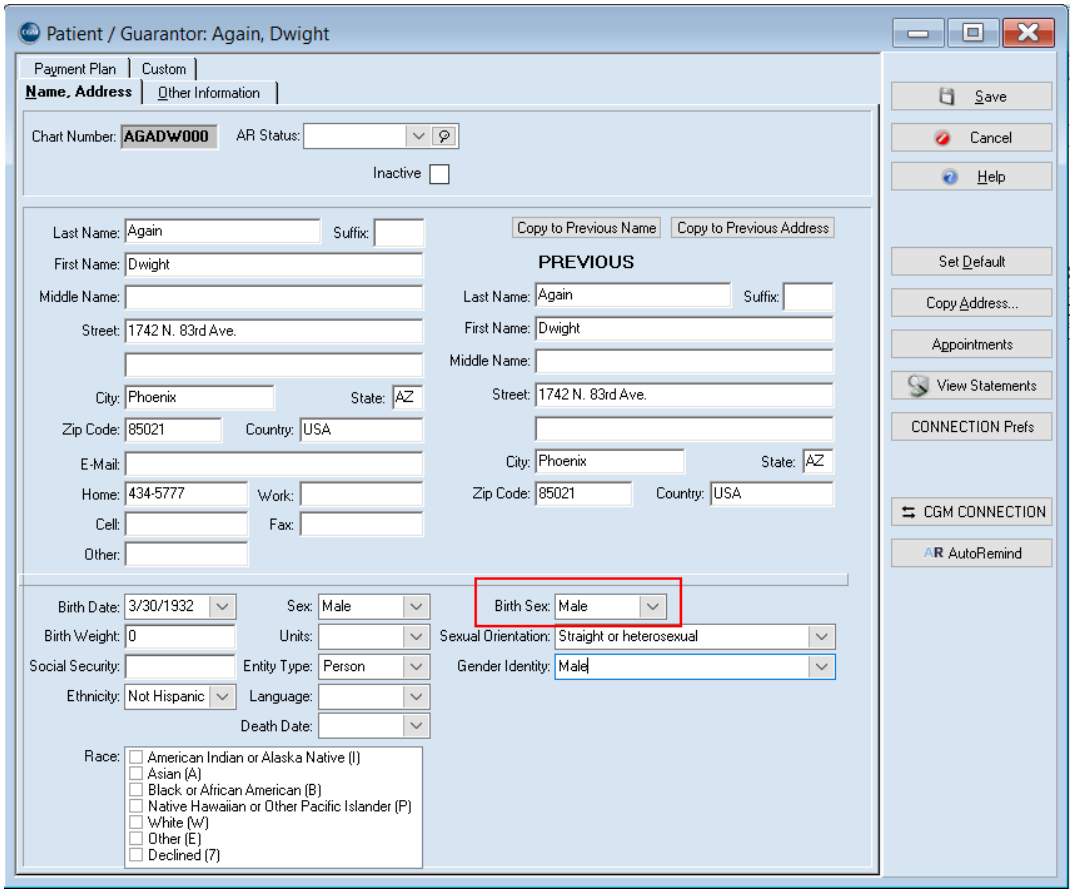

Figure 43. Patient screen - Name, Address tab

This information will be printed on the Cures Patient Demographics report.

New field

There is a new field on the Name, Address tab of the Patient screen: Sexual Orientation. Choose the patient's sexual orientation from the provided drop-down list.

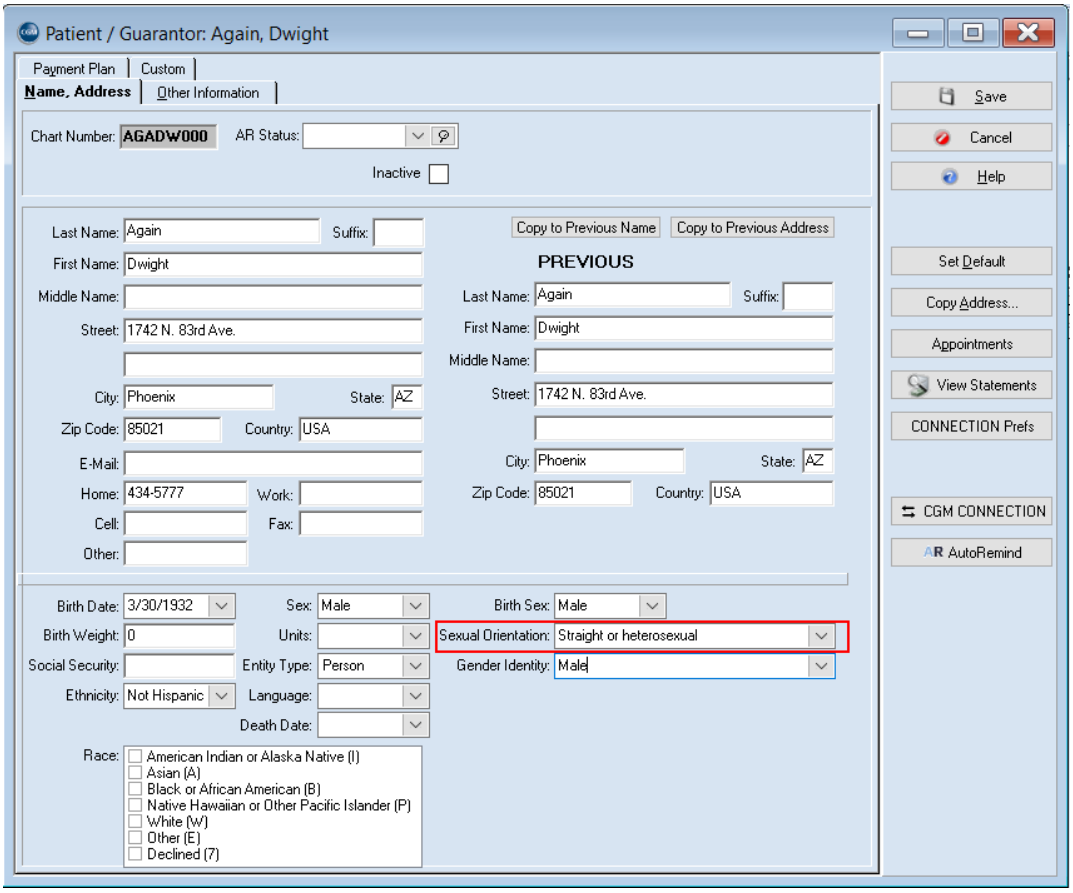

Figure 44. Patient screen - Name, Address tab

This information will be printed on the Cures Patient Demographics report.

New field

There is a new field on the Name, Address tab of the Patient screen: Gender Identity. Choose the patient's gender identity from the provided drop-down list.

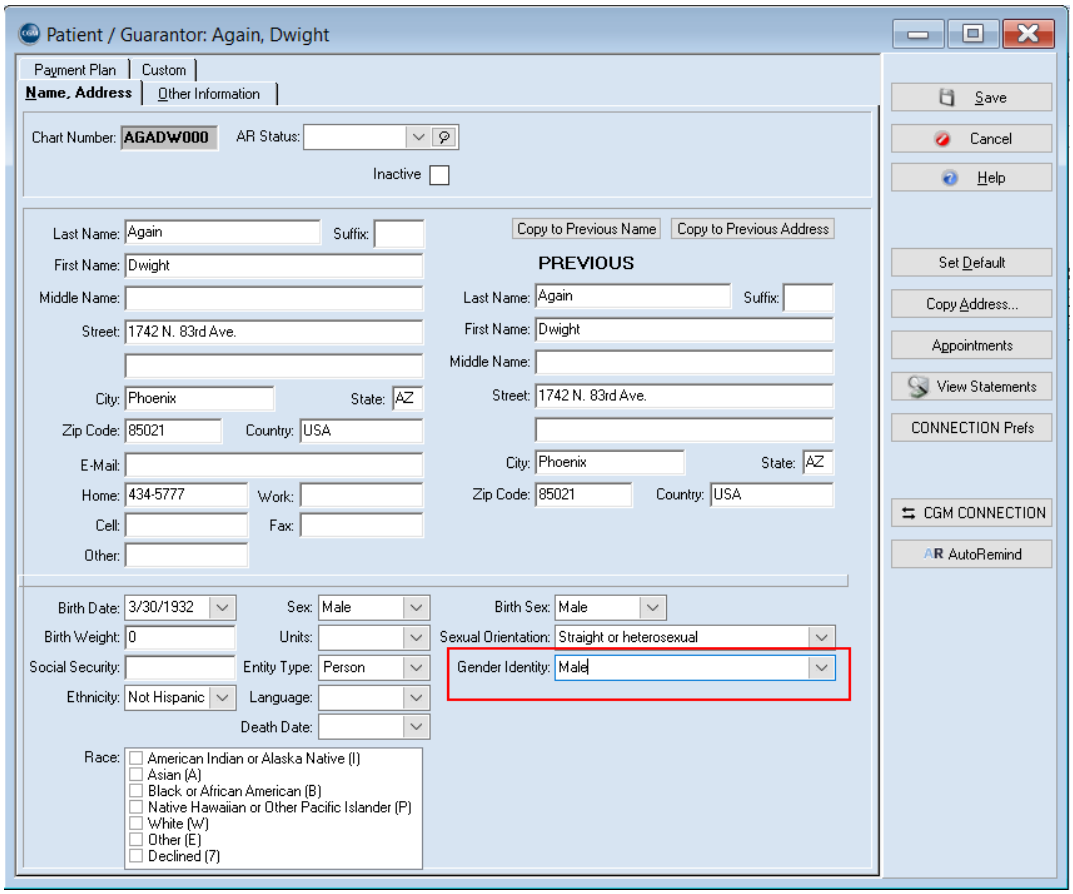

Figure 45. Patient screen - Name, Address tab

This information will be printed on the Cures Patient Demographics report.

Updated Patient List screen

You can now search by Date of Birth on the Patient List screen. Select Date of Birth from the Field drop-down and then enter the date: no slashes are required.

- For single-digit months you must enter the leading zero
- For single-digit days you must enter the leading zero

Enter dates in the MMDDYYYY format with eight-digits when entering a complete date.

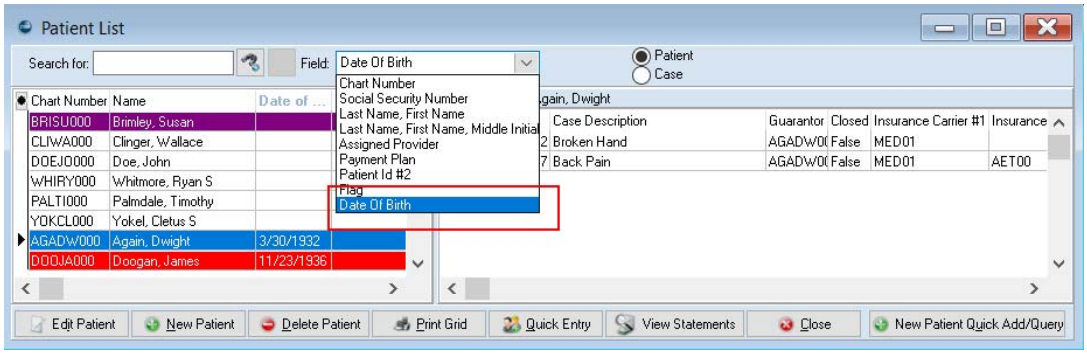

Figure 46. Patient List screen

The filter logic will show all data that is equal to or greater than what you are entering:

- If you have 01 as the month, all data will show until the / is entered and then it will show everything for just January.
- If you have 01/1, all data will show that is in January and equal to or greater than January 1st
- If you have 01/10, all data will show that is in January and equal to or greater than January 10th
- If you have 01/10/2, all data will show that is in January and equal to or greater than January 10th and equal to or greater than year 2
- If you have 01/10/20, all data will show that is in January and equal to or greater than January 10th and equal to or greater than year 20
- If you have 01/10/200, all data will show that is in January and equal to or greater than January 10th and equal to or greater than year 200
- If you have 01/10/2000, all data will show that is in January and equal to or greater than January 10th and equal to year 2000

Transaction Entry

Updated Transaction Entry screen

You can now see the Policy/MBI number on the Insurance tab. This information is for display only.

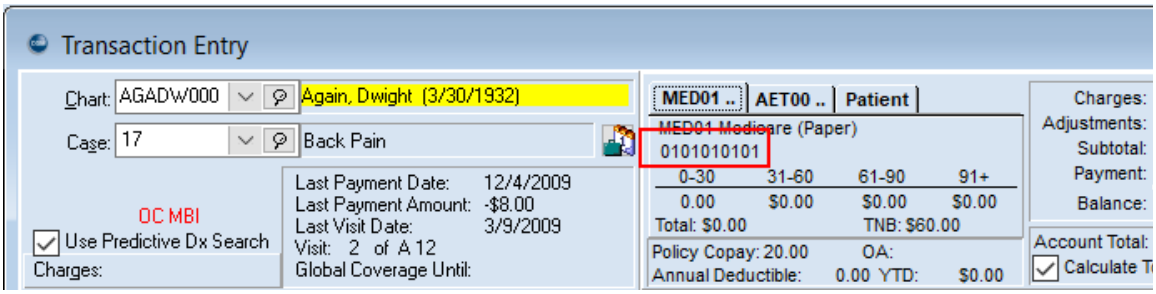

Figure 47. Transaction Entry screen

AR Tracker

New Apply Adjustment to AR Tracker Balance screen

Use this screen to quickly apply patient adjustment amounts to a transaction or write-off a patient balance.

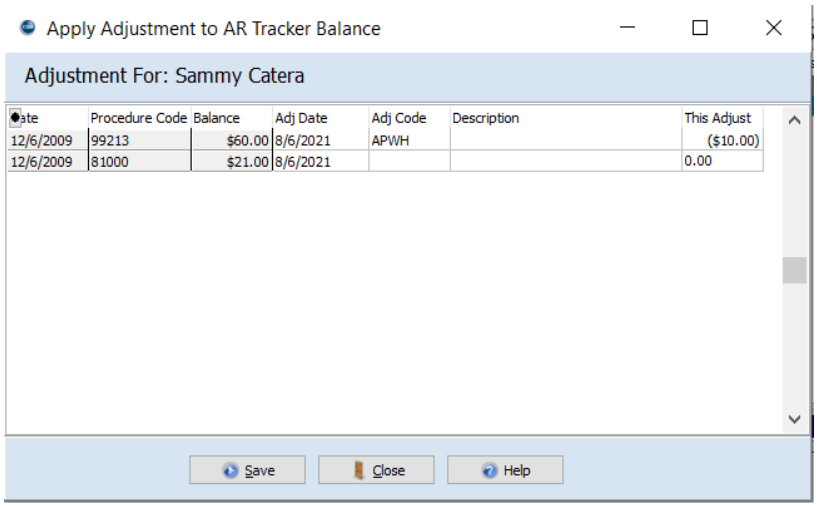

Figure 48. Apply Adjustment to AR Tracker Balance screen

To open this screen, use the new option on the right-click menu of the Details section of the Patient level of AR Tracker: Write-Off/Adjust.

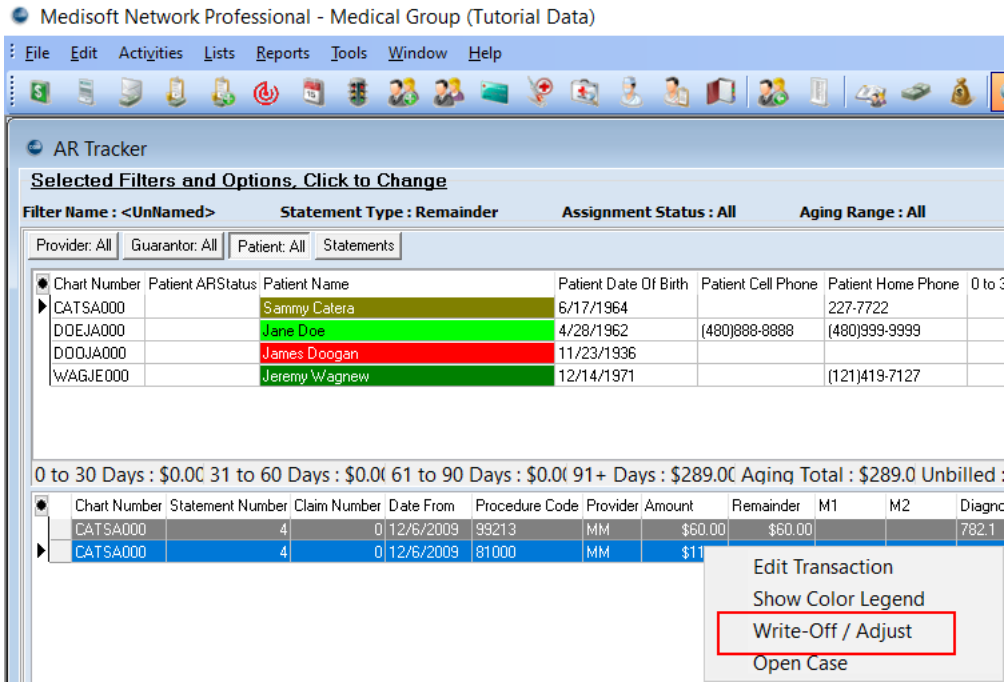

Figure 49. AR Tracker - Patient level

On this Apply Adjustment screen, you can see the line items for the selected transaction and the remaining balance.

Note that when you right click on a line, only transaction lines with a balance and that are within the same Case will appear.

Select an Adjustment Code and enter an amount for the adjustment.

Important Note: Both positive and negative adjustment codes will display in the adjustment drop-down.

Click the OK button to apply the adjustment and return to the AR Tracker screen. The balance on the transaction will be adjusted immediately and the new balance will appear. In addition, the amount will appear in the Adjustment Amount column.

Procedure

To adjustment a balance or write-off an amount:

1. Open AR Tracker.
2. On the Filter screen, enter your criteria, selecting Patient for Aging Type.
3. Click the **Apply** button. The results display on the grid.
4. Select the Patient tab.
5. In the lower grid, select a line item and right-click.
6. Select Write-Off/Adjust. The Apply Adjustment to AR Tracker Balance screen opens.
7. Select an Adjustment date for the line item if it is different from today's date.
8. Select an Adjustment Code.
9. Enter a Description if needed.
10. Enter an Amount, making sure you enter the correct sign for the adjustment, based on the Adjustment Code setting.
11. Click the **Save** button. You are returned to the AR Tracker grid and the adjustment appears and the balances have been updated.

Deposits

Updated Deposit: (new/edit)

The EFT Tracer field has been increased to a maximum of 25 characters. Previously, it was 10.

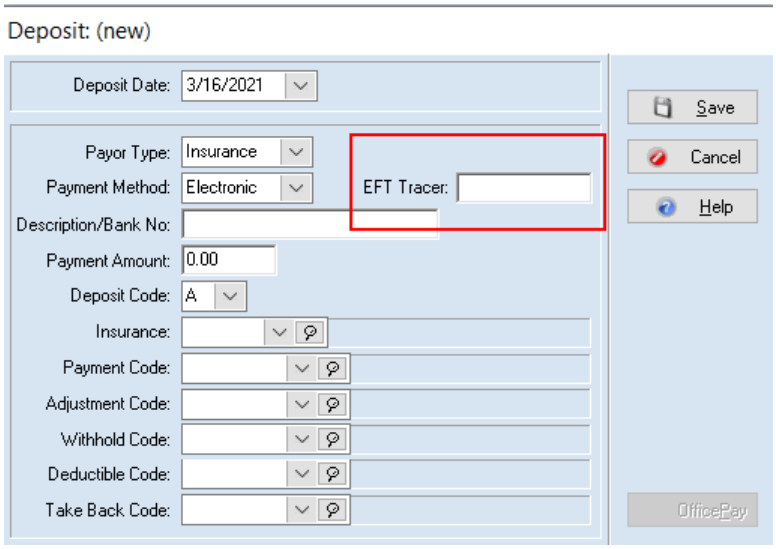

Figure 50. Deposit: (new) screen

In addition, Revenue Management has been updated to autopost ERAs and remit files with a check number length up to 25 characters. The check number will also show correctly in the Reports Viewer as well.

Office Hours

Updated New Appointment Entry screen

There is a new check box on the New Appointment Entry screen for both single and repeating appointments: TeleHealth. Selecting this check box is informational only at this time, and signifies

that the appointment is a TeleHealth appointment. This check box enables you to keep better track of appointments that are TeleHealth appointments.

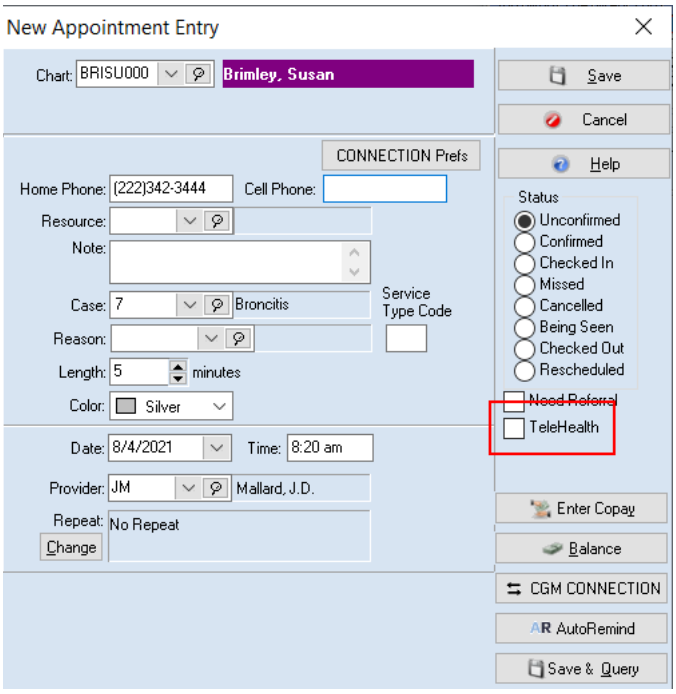

Figure 51. New Appointment Entry screen

Interfaces with eMDs EHR systems do not currently use this new field.

Updated Office Hours main screen

There is a new field on the Office Hours main screen in the left panel: TeleHealth visit. If the TeleHealth check box is selected for a patient's appointment, you will see a Yes next to this field label, indicating that the patient's appointment is a TeleHealth appointment.

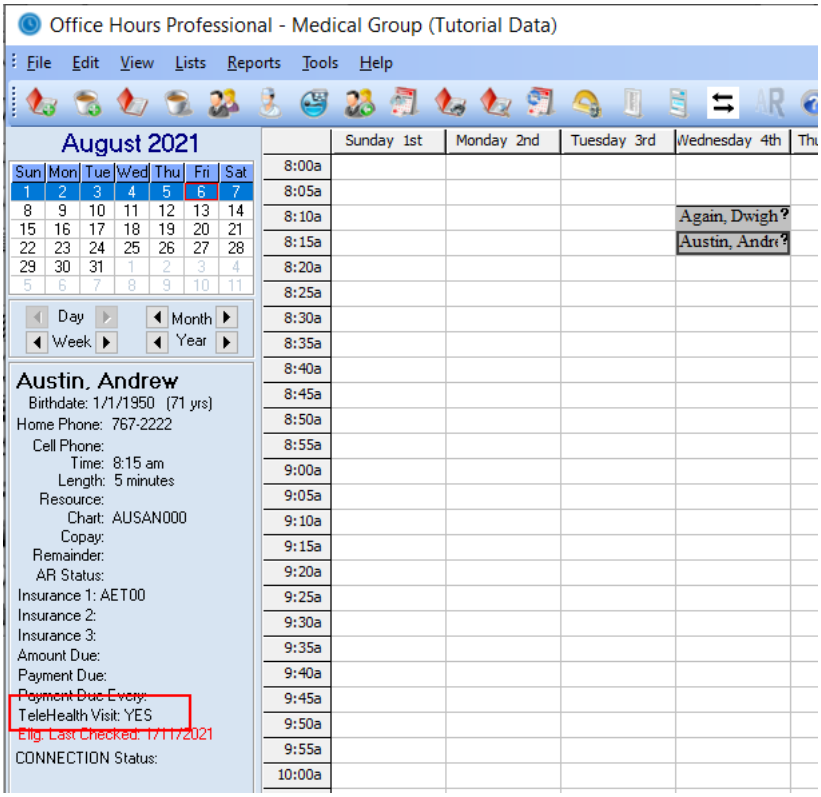

Figure 52. Office Hours main screen

Custom Reports

Updated CURES Patient Demographics report

The following fields have been added to the CURES Patient Demographics report:

- Previous First Name
- Previous Middle Name
- Previous Last Name
- Previous Suffix
- Previous Address 1
- Previous Address 2
- Previous City, State, Zip, Country
- Birth Sex

- Sexual Orientation
- Gender Identity

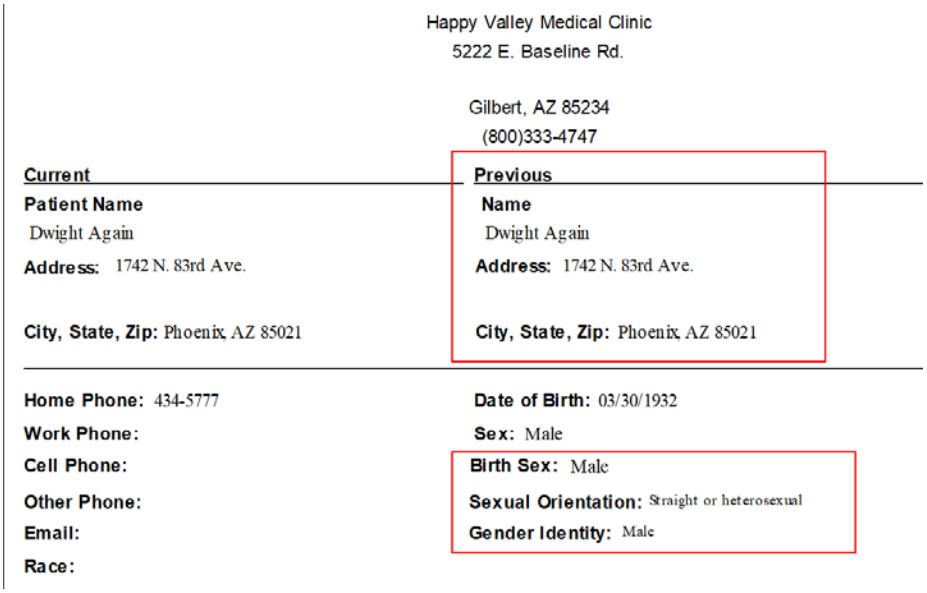

Figure 53. CURES Patient Demographics report

Updated Field name

The apostrophe (‘) has been removed from the field name “Don’t print on insurance.” If you use this field on any custom reports, you will need to add it to the report with the new field name.

Chapter 2 - Resolved Issues

Below are a list of issues that were resolved with this release.

Resolved Issues

The following issues were resolved with CGM MEDISOFT Release 26.

PBI	Application	Description
67577	CGM Medisoft - Eligibility	Scheduled Eligibility tasks will no longer run multiple times for an appointment when run a certain number of days in advance. Eligibility will be verified only once. Steps to recreate 1. Schedule an eligibility task set to several days in advance. 2. Allow the task to run. 3. Verify it runs only one time per appointment.
67580	CGM MEDISOFT	You no longer must enter the “slashes” when entering a date in the Injury/Illness/LMP or Date Similar Symptoms fields. Previously, in CGM MEDISOFT 25 slashes were necessary when entering a date. Steps to recreate 1. In CGM MEDISOFT, select a patient case. 2. Select the Condition tab. 3. In the Injury/Illness/LMP Date field, enter “01012021”. 4. Tab to another field and verify that you do not receive an error. 5. Repeat for the Date Similar Symptoms field.
67627	Revenue Management	Multiple Antivirus programs are removing files from the Revenue Management installation. Steps to recreate None
69547	CGM MEDISOFT	You can now scroll through months in the Calendar widget, including most screens that have a field that has a calendar widget. Steps to recreate 1. On any screen that has a Date field (for instance, Transaction Entry), open the Calendar on the Date field. 2. Click the right and left arrows to verify that the scrolling of months occurs correctly.

73522	CGM MEDISOFT	The Insurance Analysis report will no longer increase the Total Charges and Total Number of Claims every time the Search option is selected and run. Steps to recreate 1. Click Reports > Analysis Reports > Insurance Analysis. 2. Select Preview the report on the Screen and then Start. 3. Select ClaimsPrimary, ClaimsSecondary, Insurance, and click OK. The results appear. 4. Click the Magnifying Glass. 5. Click OK in the Search screen. Verify that the Total Charges and Total Number of Claims remains the same.
81028	Revenue Management	When opening an ERA/remittance file in the Revenue Management Reports Viewer, the header row that represents a service/charge line will no longer have text labels positions changed or be moved to a different location that was not present in earlier versions of Revenue Management. Steps to recreate 1. In Revenue Management, place an ERA/remittance file in the Download folder of any practice and open the remit file in Revenue Management Reports. 2. Verify that the new labels of text align with the legend at the top of the grid.