# Lytec 2019

## Release Notes

**December 2018**

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# Chapter 1 - Enhancements

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

## Move Credits

You can now move a patient credit from one billing to another.

### New Option

There is a new option on the Billing ribbon menu: Move Credit. Click this option to open the Move Credit screen.

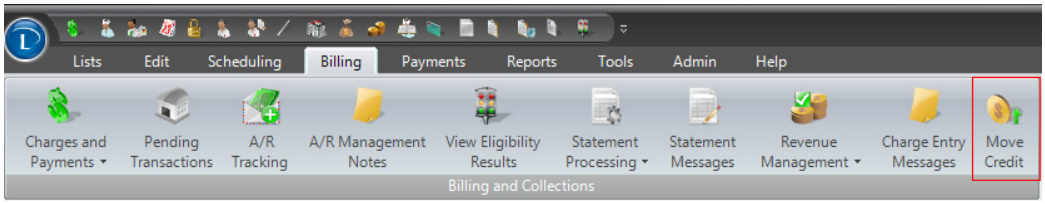



*Figure 1. Billing menu*

When you open the Move Credit screen from this option, it will open with the last patient worked on preselected.

# New Option

There is a new option on the right-click menu in A/R Tracking when you are aging by patient: Move Credit. Click this option to open the Move Credit screen. The Move Credit From section on the Move Credit screen will be populated automatically with the select patient in the A/R Tracking grid.

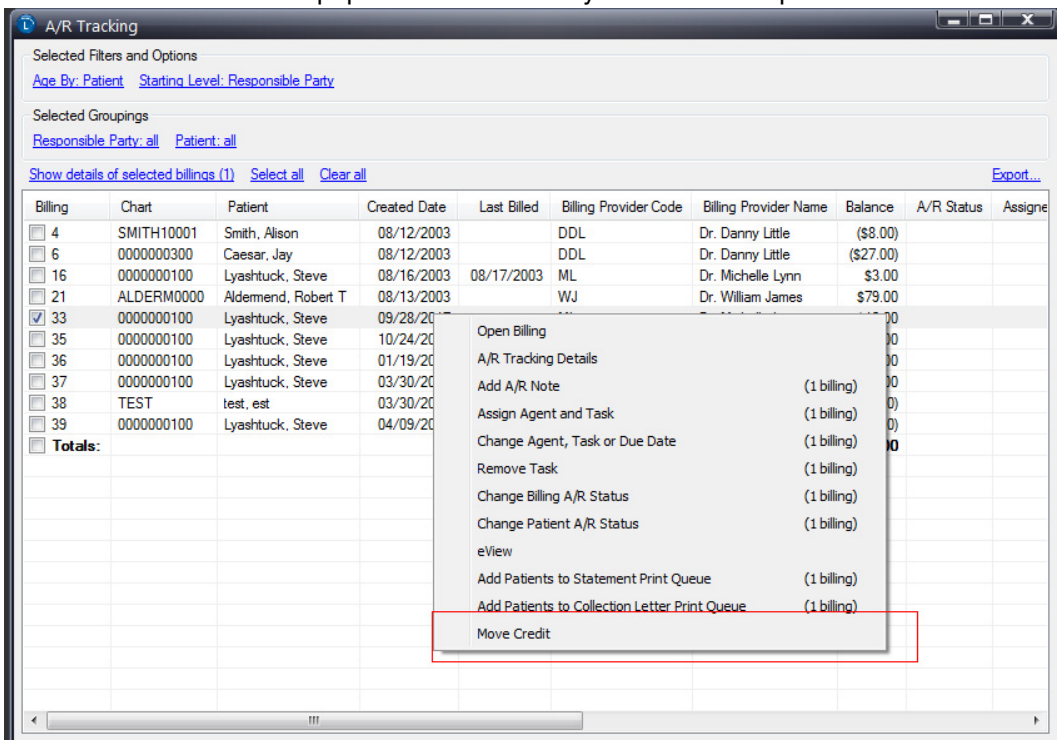



*Figure 2. Right-click menu in A/R Tracking*

Note: if you move a credit with A/R Tracking open, you must re-run the query to see the changes.

# New Move Credit screen

Use the Move Credit screen to move patient credits from one billing to another.

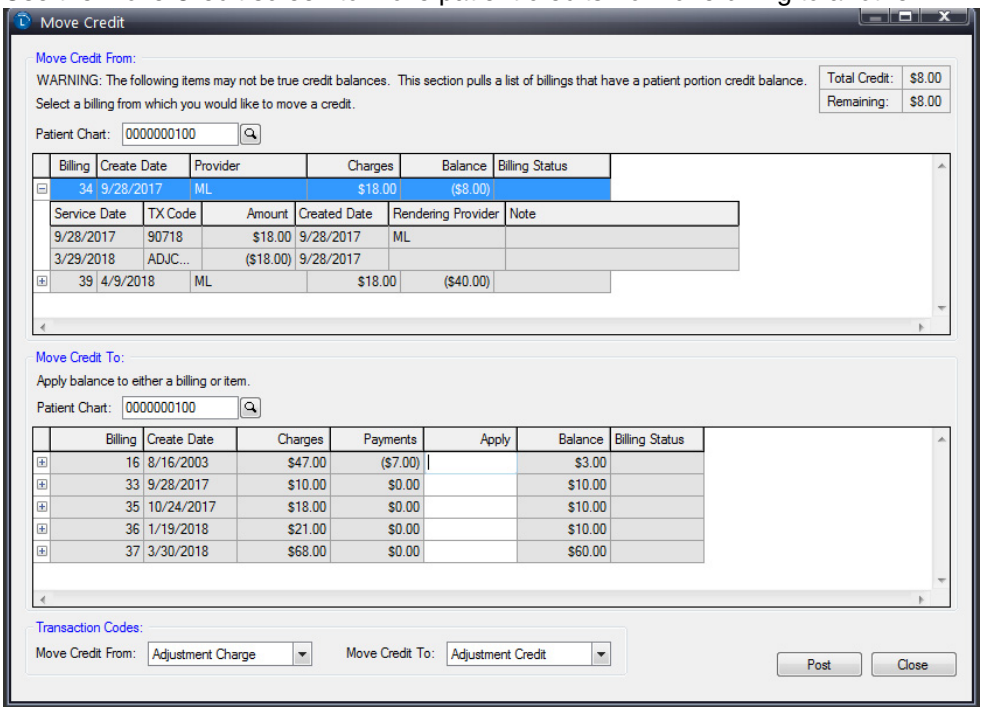



*Figure 3. Move Credit screen*

The table below describes the elements on this screen.

| Element | Description |
|---|---|
| **Move Credit From section** | |
| Patient Chart | Select a patient whose account you are moving the credit from.<br>If the patient you select does not have any billings with patient portions available, you will receive a message.<br>Pressing F3 from this field will open the Patient Lookup list. |
| Grid | After you select a patient, the grid will show you the billing and item details for the patient portion balances that are available. You can see the billing number, date of the billing, charges for the billing, the balance, and the billing status.<br>Click the + sign on the left of the billing to see the line item details for the billing.<br>You cannot enter data in fields that are shaded. |
| **Move Credit To section** | |

| Element | Description |
|---|---|
| Patient Chart | Select the patient that you want to move the credit to.<br>If the patient does not have any billings with a balance, you will receive a message. |
| Grid | After you select a patient, the grid will show you the billing and item details for the patient portion balances that are available. Billings appear with the oldest at the top and the newest at the bottom.<br>Click the + sign to the left of the billing to see the line item details of the billing.<br>You cannot enter data in fields that are shaded.<br>Pressing the Enter key in the “Move Credit To” (bottom) section will advance the cursor to the next “Apply” field. This will advance to the next Apply field whether the plus-sign is clicked on the left side to show the detail or if the plus-sign is not checked and only the billing level is shown. |
| **Transaction Codes section** | |
| Move Credit From | Select a transaction code. The last code used will be retained for the next transfer. Only transaction codes with a Type “Adjustment-Charge” will be allowed. |
| Move Credit To | Select a transaction code. The last code used will be retained for the next transfer. Only transaction codes with a Type “Adjustment-Credit” will be allowed. |
| Post button | Click this button to post the credit transfer. This will update balances on the selected billings. |
| Close button | Click this button to close the screen without making any changes. |

### Record locking

If another user has a billing open in Lytec, you will receive a warning that the record is locked if you select the billing on the Move Credits screen. Also, billings that appear in the Move Credits screen will not appear for other users.

### Billing updates

When you post a move credit, the billings in Charges and Payments update as follows:

- On the Move From patient/Billing: A billing item line will be added with the Move from Adjustment code selected in the footer with the Amount equaling the total amount that has been placed on all Move To billings
- On the Move To patient/billing: A billing item line will be added with the Move To Adjustment code selected in the footer for the amount entered in the Move Credits screen for that billing (or for each item line)

### Procedure

To move a credit from one billing to another:

1. On the Billing menu, select Move Credit. The Move Credit screen appears.
2. Select a patient in the Patient Chart field in the Move Credit From section. A list of the billings with a patient portion negative amount appears.
3. Select a patient in the Patient Chart field in the Move Credit To section. The patient's billings that have a positive patient portion appear.
4. For the billing that you want to apply to credit to, click the cell in the Apply column for that billing in either the billing or item level.
5. Enter the amount you want to apply.
6. Optional: Repeat the previous two steps as necessary until the total amount of the credit has been applied.
7. In the Transaction Codes section, select an option for Move Credit From.
8. Select an option for Move Credit To.
9. Click the **Post** button.

## Audit Trail

### New option

There is a new option on the Billing section of the Audit Trail Settings screen: Move Credit. Select this option if you want to see the adjustments made using the Move Credit feature.

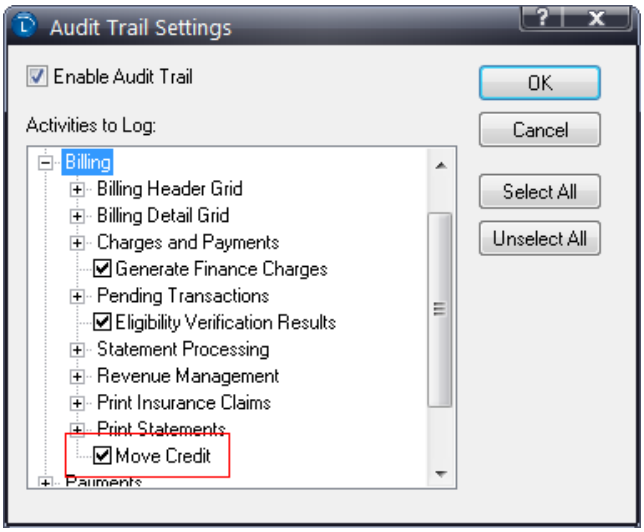



*Figure 4. Audit Trail Settings screen*

Adjustments appear on the report like this:

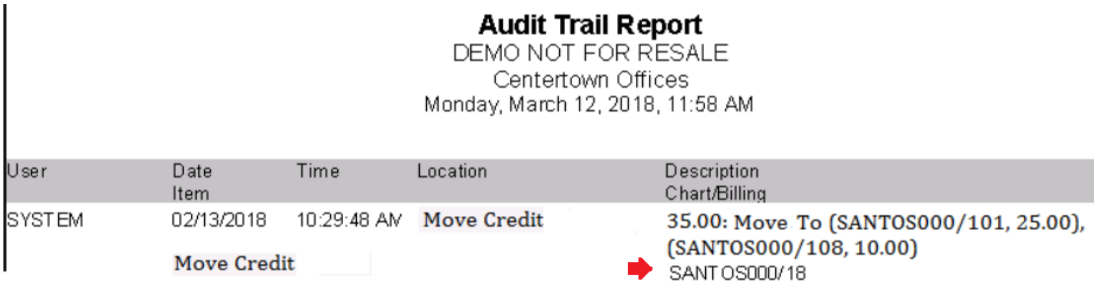



*Figure 5. Audit Trail report*

Note: note that this is the Move Credit FROM information.

# Hold Codes

## New tooltip

There is a new hover-over tooltip on the Appointment grid for the Hold Code column (if displayed). When you hover the cursor over the Hold Code, you will see the note added for the Hold Code. You need only customize the grid for one Hold Code column for one Hold Code but if you hover over the field, ALL Hold Codes will display.

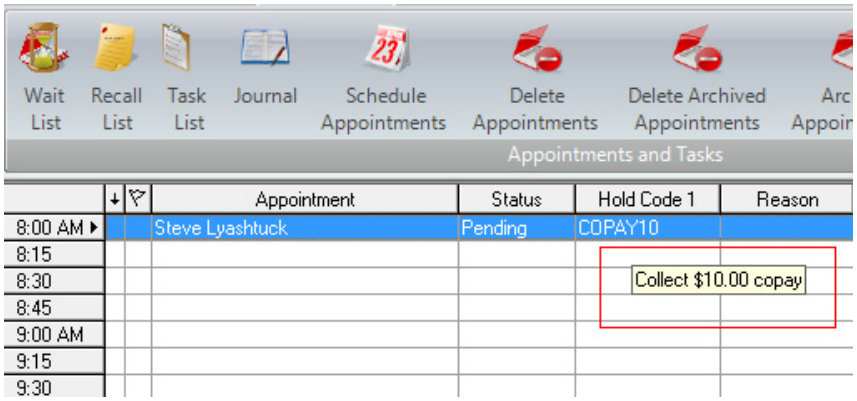



*Figure 6. Appointment grid*

## Updated Hold Code screen

The Hold Code screen has been updated so that you can select to display hold codes on both new appointments and existing appointments that you are editing. When you select the check box for

Display on new/edit appointment, you will see the hold codes popup when you edit an appointment.

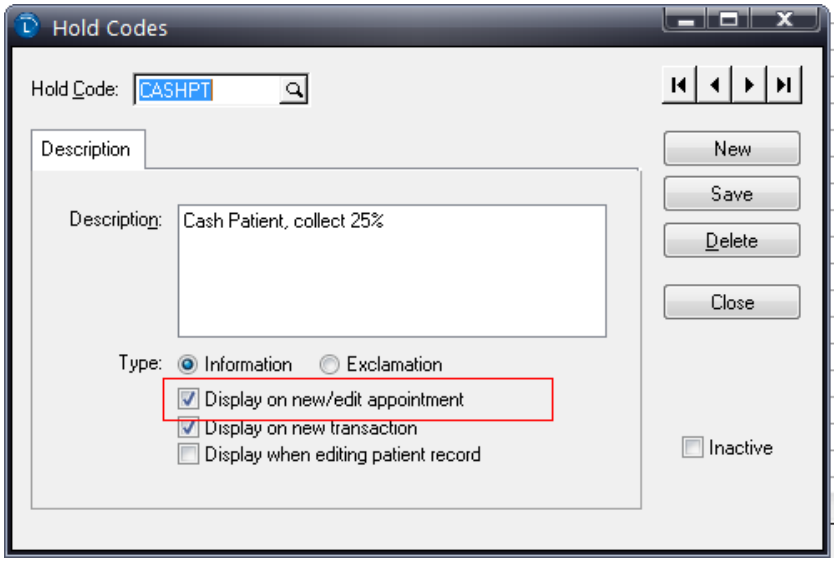



*Figure 7. Hold Codes screen*

## Updated Hold Codes popup

You can now see multiple Hold Codes listed on the same popup when you add or edit an appointment or a repeating appointment, create a new transaction for the patient, apply payments, or edit the patient. Previously, if a patient had multiple Hold Codes, it was necessary to click through them one by one.

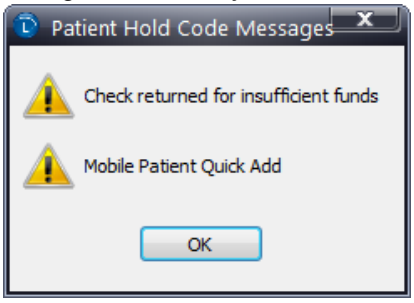



*Figure 8. Hold Codes popup*

Note: the Hold Codes popup will NOT appear when you delete or reschedule an appointment.

For this screen:

- A patient can have up to five hold codes (added to their record on the Diagnosis/Reminders tab)
- The message/description will wrap if it is a long text
- The message will have the "I" icon for informational or the existing ! icon for Exclamation (determined by the Hold Code property)
- A scroll bar will display if there is too much text than can display on the screen

# Insurance

## Updated Insurance Companies screen

You can now track the total days for each insurance for the timely filing deadline.

### New fields

There are two new fields on the Claims tab for tracking timely filing days: Timely Filing Days and Timely Appeal Days. Enter the appropriate value in each field for each insurance company.

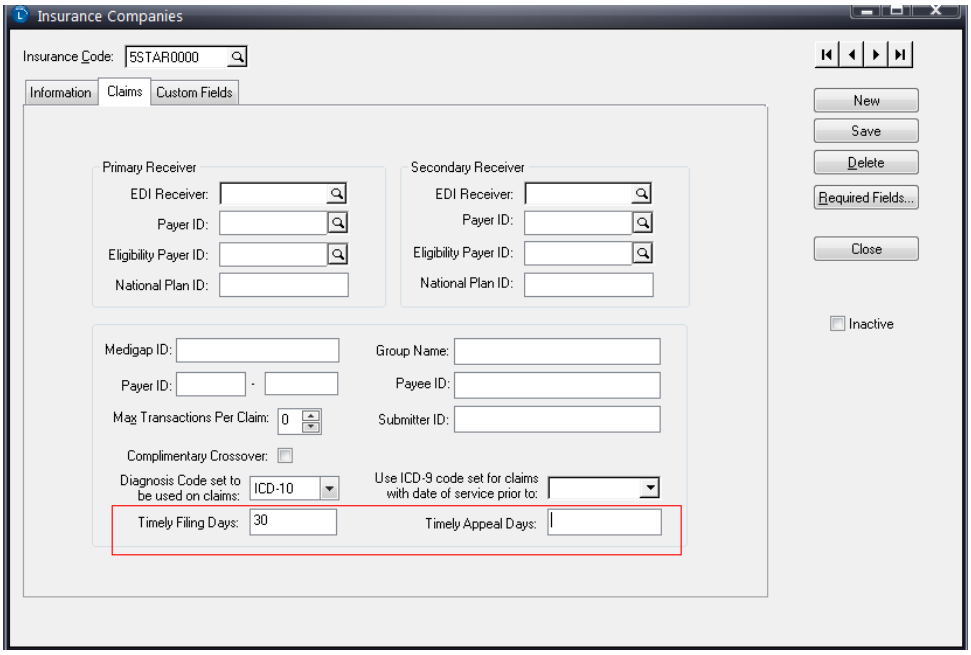



*Figure 9. Insurance Companies screen - Claims tab*

Entries from Timely Filing Days will flow to the A/R Tracking module and display on insurance details with the number of days remaining (from today's day) until timely filing will expire. Entries for Timely Appeal Days is currently informational only.

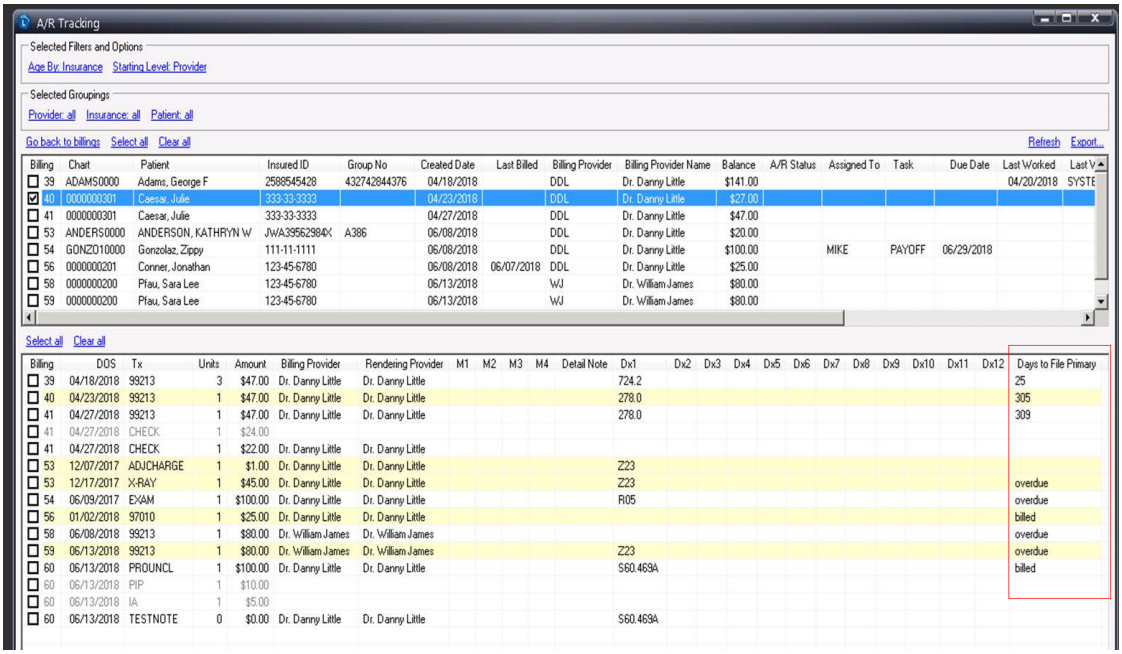



*Figure 10. A/R Tracking with billing detail*

# A/R Tracking

## New column

There is a new column on the A/R Tracking screen when you are viewing patient balances: Copay. Use this column is to see the amount of the patient's copay.

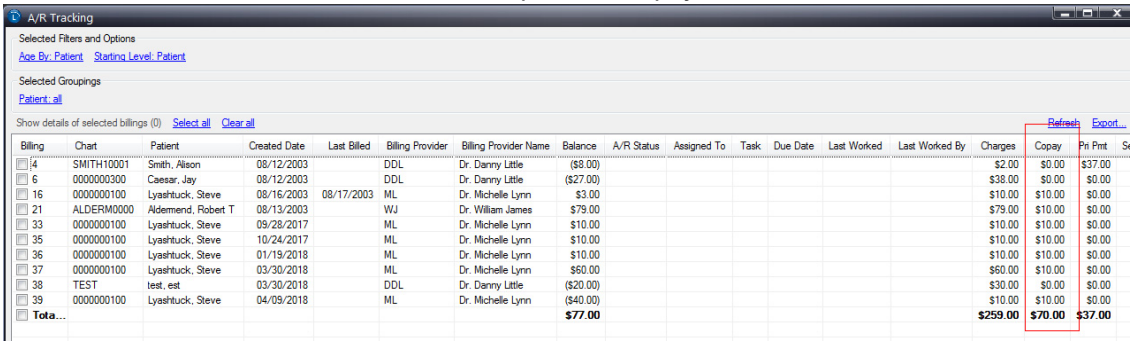
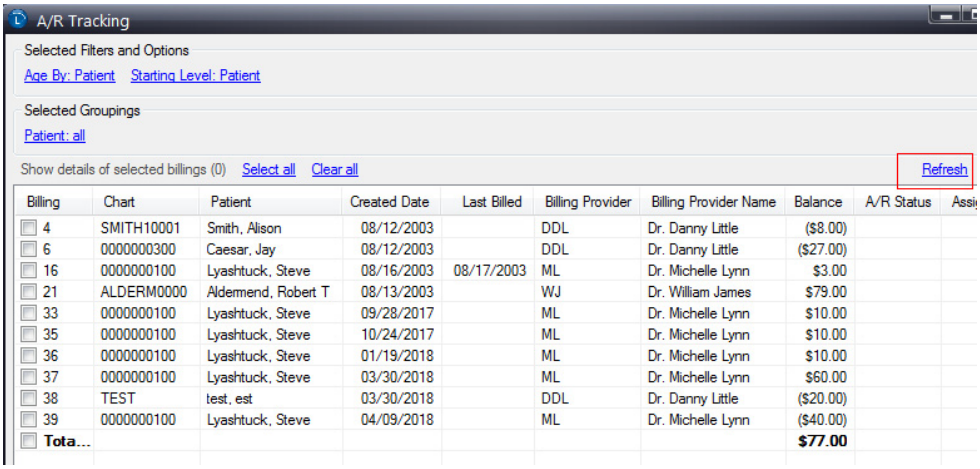



*Figure 11. A/R Tracking screen*

## New link

There is a new link available on the Billing view: Refresh. Click this link to refresh the view on the Billing tab.




| Billing | Chart | Patient | Created Date | Last Billed | Billing Provider | Billing Provider Name | Balance | A/R Status | Assi |
|---|---|---|---|---|---|---|---|---|---|
| 4 | SMITH10001 | Smith, Alison | 08/12/2003 | | DDL | Dr. Danny Little | ($8.00) | | |
| 6 | 0000000300 | Caesar, Jay | 08/12/2003 | | DDL | Dr. Danny Little | ($27.00) | | |
| 16 | 0000000100 | Lyashtuck, Steve | 08/16/2003 | 08/17/2003 | ML | Dr. Michelle Lynn | $3.00 | | |
| 21 | ALDERM0000 | Aldermend, Robert T | 08/13/2003 | | WJ | Dr. William James | $79.00 | | |
| 33 | 0000000100 | Lyashtuck, Steve | 09/28/2017 | | ML | Dr. Michelle Lynn | $10.00 | | |
| 35 | 0000000100 | Lyashtuck, Steve | 10/24/2017 | | ML | Dr. Michelle Lynn | $10.00 | | |
| 36 | 0000000100 | Lyashtuck, Steve | 01/19/2018 | | ML | Dr. Michelle Lynn | $10.00 | | |
| 37 | 0000000100 | Lyashtuck, Steve | 03/30/2018 | | ML | Dr. Michelle Lynn | $60.00 | | |
| 38 | TEST | test, est | 03/30/2018 | | DDL | Dr. Danny Little | ($20.00) | | |
| 39 | 0000000100 | Lyashtuck, Steve | 04/09/2018 | | ML | Dr. Michelle Lynn | ($40.00) | | |
| Tota... | | | | | | | $77.00 | | |

*Figure 12. A/R Tracking screen*

Lytec will retain the selected filters and groupings and update the view based on changes that were made while the view was open.

Note: if there are no longer any billings that match the selected filters and groupings, the view will change to the lowest level that still has an entry that matches the filter and selected groupings.

# Scheduling

You can now select a custom print schedule grid layouts when scheduling a single or multi-view schedule. In addition, you can now include custom fields on custom layouts for printing.

## Updated Single Day Print Schedule

### New field

There is a new field on the Print Schedule screen: Layout. Use this field to select a particular custom print layout when you print the schedule. The drop-down will show all layouts, both for the

user and global, and it will default to the last used layout. If no layout has been selected, it will display Default Report.

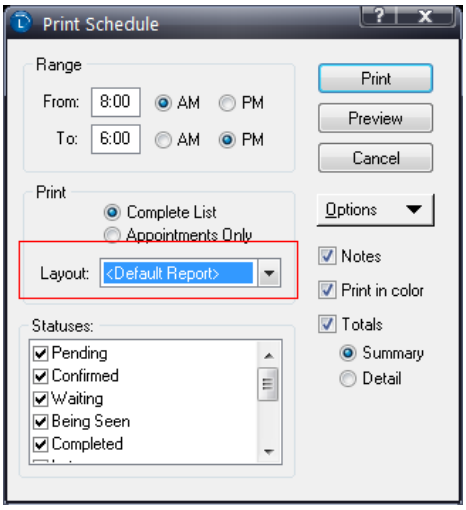



*Figure 13. Print Schedule screen*

## Updated Multi-Resource View Print Schedule

### New field

There is a new field on the Print Schedule screen: Layout. Use this field to select a particular custom print layout when you print the schedule. The drop-down will show all layouts, both for the user and global, and it will default to the last used layout. If no layout has been selected, it will display System Default.

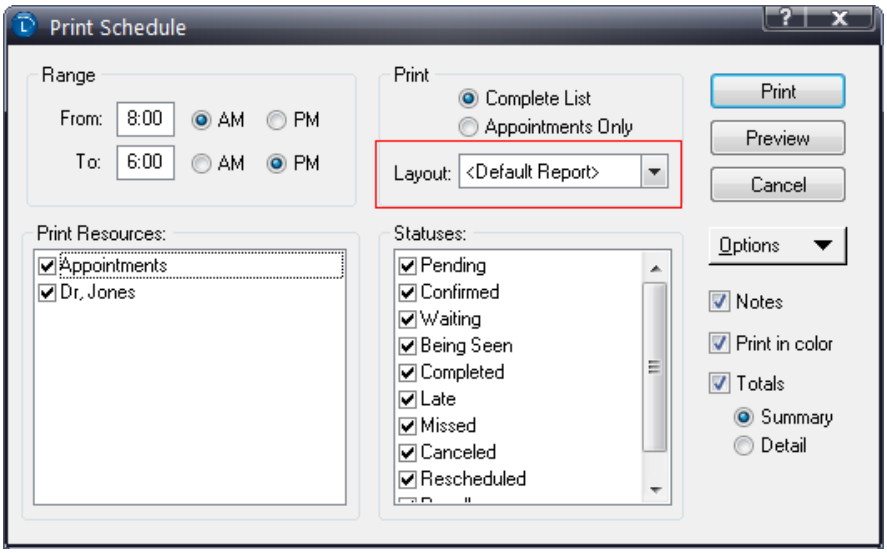



*Figure 14. Print Schedule screen*

### New check box

There is a new check box above the Print in color check box: Notes. Use this check box to choose if you want notes to appear on the printed schedule.

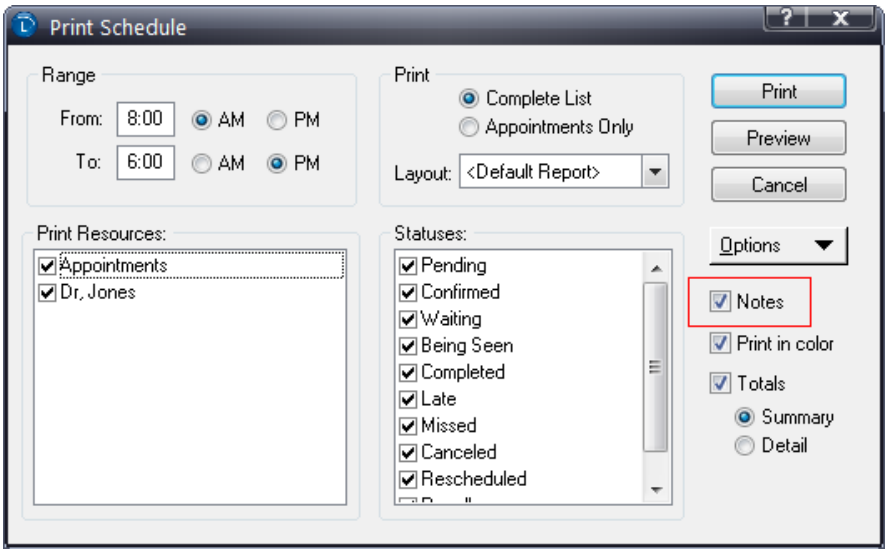



*Figure 15. Print Schedule screen*

Note: this check box is not available when you select the Default Report format. When you select the default report, notes will NOT print.

## New custom schedule grid layouts for schedules

You can now create and select custom schedule grid layouts for printing a schedule, using the Custom reports feature in Lytec. To get started, select to create a new custom report and select an Appointment type report.
Here are a few recommendations:

- Design the report in Landscape mode so you will have more space for columns
- Note the column widths so that you can keep your entire report on a single page. If the layout is too wide for the page, information will be printed on a separate page.

In addition, for multi-resource views, the report will print one resource per page only. There is a sub-header that states the resource's name, and totals will be printed for that resource. A new resource will print on the next page.

Important note: Do not include the appointment notes in a column when building a custom report because text wrapping within a column is not supported. Instead, use the Notes check box on the Print Schedule screen. That will print all notes as a separate line under the appointment information. eMDs recommends that you view the schedule with one custom display format and have a separate custom format for printing the schedule, being sure to remove the Notes field from the custom print formats since checking the Notes check box on the Print Schedule modal will automatically include the appointment notes.

# Patient Email Connect

You can now filter the export of patients using a variety of filters so that you can get the list you need to match your specifications.

## Patient Email Connect and PHI

Please be aware that creation and transmission of exported records and files, using Patient Email Connect, must be accomplished while closely following the HIPAA Security Rule and HIPAA Privacy Rule.

These Rules protect individuals' electronic personal health information that is created, received, used, transmitted, or maintained by a covered entity. Please ensure that you follow appropriate administrative, physical and technical safeguards to ensure the confidentiality, integrity, and security of electronic protected health information just as you must for all Lytec features.

For more information, see https://www.hhs.gov/hipaa/for-professionals/security/laws-regulations/index.html

## New export option

There is a new option on the Tools > Export menu: Patient Email Connect. Use this option to open the Patient Email Connect Filter screen.

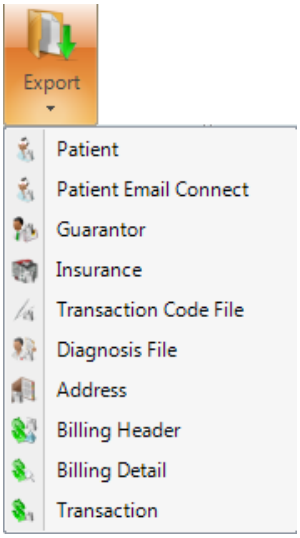



*Figure 16. Export menu*

## Security for Patient Email Connect

Access to Patient Email Connect is controlled by the Export/Patient File setting in Security Profile for each user.

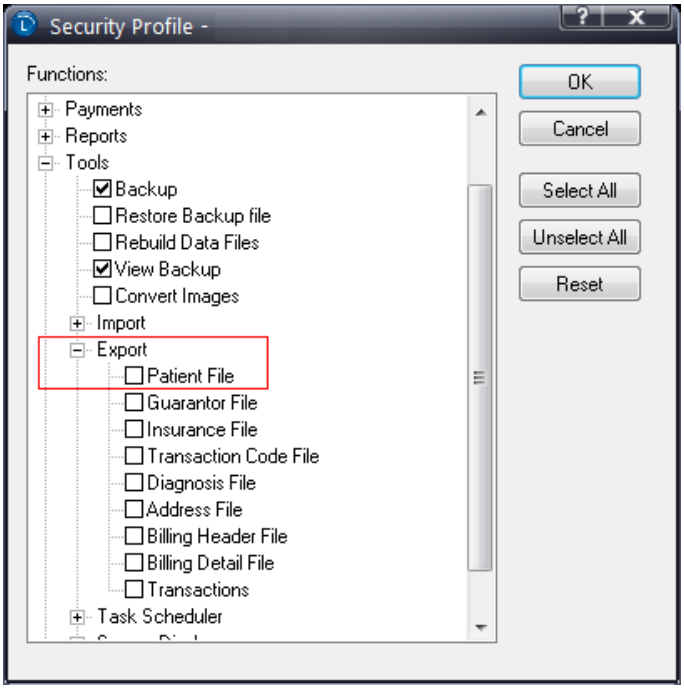



*Figure 17. Security Profile screen*

## New Patient Email Connect Filter screen

When you select to export patients, you will now see a Filter screen. Use this screen to make and save filter selections for patients.

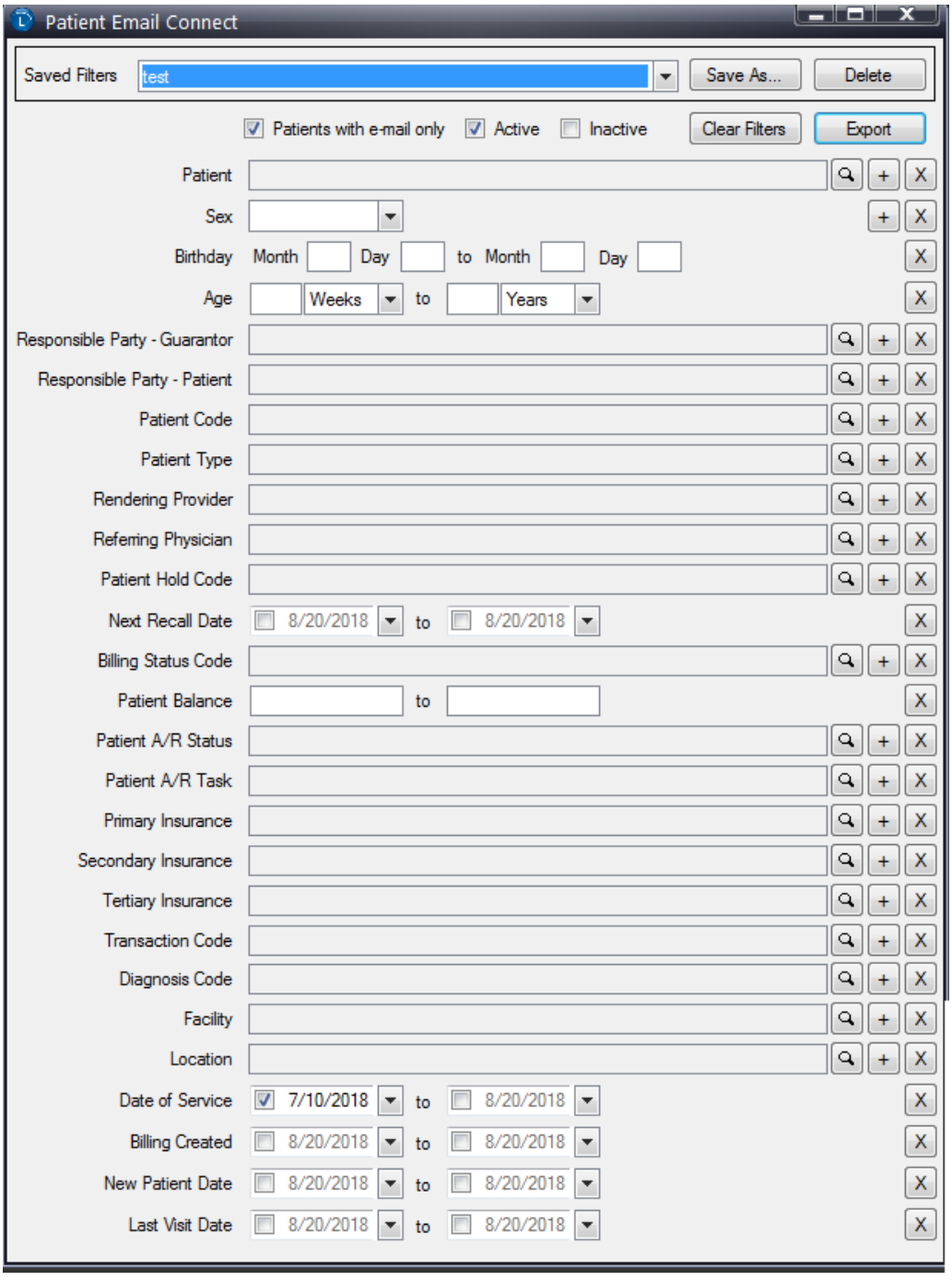



*Figure 18. Patient Email Connect filter screen*

The table below describes the elements on this screen.

| Element | Description |
|---|---|
| Saved Filters | Use this drop-down to select a saved filter name. |
| Save as | Click this button to save your settings. The Save As screen will open and you can enter a name for your filter. |
| Delete | Click this button to delete the selected saved filter. |
| Patients with email only check box | Select this check box if you want the list to include only patients with email addresses in their record.<br>This check box is selected by default. |
| Active check box | Select this check box if you want to include Active patients.<br>This check box is selected by default. |
| Inactive check box | Select this check box if you want to include Inactive patients.<br>Deceased patients will not appear in results by default. |
| Clear Filters | Click this button to clear all of the filter selections. This will also reset all of the Include/Exclude filter options to Include. |
| Export | Click this button to export the filtered data. |
| Patient | Use this field to select which patients you want to include.<br>• Click the Lookup icon to open the screen on which you can select patients. You can select multiple patients by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Sex | Use this drop-down to filter by Sex/Gender.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Birth Date range | Use these check boxes and date selectors to select either a single birth date or a range of birth dates.<br>• Click the X icon to clear the field. |
| Age Range | Use these fields and drop-downs to select a particular age range for patients, in weeks, months, or years.<br>• Click the X icon to clear the field. |

| Element | Description |
|---|---|
| Responsible Party-Guarantor | Use this field to select which guarantors you want to include.<br>• Click the Lookup icon to open the screen on which you can select guarantors. You can select multiple guarantors by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Responsible Party-Patient | Use this field to select which responsible party patients you want to include.<br>• Click the Lookup icon to open the screen on which you can select responsible parties. You can select multiple responsible parties by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Patient Code | Use this field to select which patient codes you want to include.<br>• Click the Lookup icon to open the screen on which you can select patient codes. You can select multiple codes by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Patient Type | Use this field to select which patient types you want to include.<br>• Click the Lookup icon to open the screen on which you can select patient types. You can select multiple types by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Rendering Provider | Use this field to select which rendering providers you want to include.<br>• Click the Lookup icon to open the screen on which you can select rendering providers. You can select multiple providers by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |

| Element | Description |
|---|---|
| Referring Physician | Use this field to select which referring physicians you want to include.<br>• Click the Lookup icon to open the screen on which you can select referring physicians. You can select multiple physicians by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Patient Hold Code | Use this field to select which hold codes you want to include.<br>• Click the Lookup icon to open the screen on which you can select hold codes. You can select multiple codes by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Next Recall Date range | Use the check boxes and drop-downs to select a recall date range.<br>• Click the X icon to clear the field. |
| Billing Status Code | Use this field to select which billing status codes you want to include.<br>• Click the Lookup icon to open the screen on which you can select status codes. You can select multiple codes by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Patient Balance range | Use this fields to filter email addresses using a range of patient balances.<br>• Click the X icon to clear the field. |
| Patient A/R Status | Use this field to select which patient A/R statuses you want to include.<br>• Click the Lookup icon to open the screen on which you can select statuses. You can select multiple statuses by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |

| Element | Description |
|---|---|
| Patient A/R Task | Use this field to select which patient A/R tasks you want to include.<br>• Click the Lookup icon to open the screen on which you can select tasks. You can select multiple tasks by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Primary Insurance | Use this field to select which primary insurances you want to include.<br>• Click the Lookup icon to open the screen on which you can select insurances. You can select multiple insurances by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Secondary Insurance | Use this field to select which secondary insurances you want to include.<br>• Click the Lookup icon to open the screen on which you can select insurances. You can select multiple insurances by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Tertiary Insurance | Use this field to select which tertiary insurances you want to include.<br>• Click the Lookup icon to open the screen on which you can select insurances. You can select multiple insurances by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Transaction Code | Use this field to select which transaction codes you want to include.<br>• Click the Lookup icon to open the screen on which you can select transaction codes. You can select multiple codes by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |

| Element | Description |
|---|---|
| Diagnosis Code | Use this field to select which diagnosis codes you want to include.<br>• Click the Lookup icon to open the screen on which you can select diagnosis codes. You can select multiple codes by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Facility | Use this field to select which facilities you want to include.<br>• Click the Lookup icon to open the screen on which you can select facilities. You can select multiple facilities by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Location | Use this field to select which locations you want to include.<br>• Click the Lookup icon to open the screen on which you can select locations. You can select multiple locations by using the Shift or Ctrl keys. No selection here will include all items.<br>• Click the Toggle icon to include or exclude this filter.<br>• Click the X icon to clear the field. |
| Date of Service range | Use the check boxes and date selectors to select a date or service date range.<br>• Click the X icon to clear the field. |
| Billing Created date ranges | Use the check boxes and date selectors to select a billing created date range.<br>• Click the X icon to clear the field. |
| New Patient Date range | Use the check boxes and date selectors to select a new patient date date range.<br>• Click the X icon to clear the field. |
| Last Visit Date | Use the check boxes and date selectors to select a last visit date date range.<br>• Click the X icon to clear the field. |

### Fields that are exported

Exported data will include (with data labels in the first row):

- Patient Chart

- Patient First Name
- Patient Last Name
- Patient Middle Name
- Address 1
- Address 2
- City
- State
- Zip Code (both five digit code and additional four in separate adjoining field)
- Zip Plus 4
- Home Phone
- Work Phone
- Mobile Phone
- Main Phone
- Home Email
- Work Email
- Sex
- Patient Code
- Patient Type
- Birth date
- New Patient Date (from Patient file).
- Responsible Party First Name
- Responsible Party Last Name
- Patient Balance
- Next Recall Date (the single next Recall date in the future from current date)
- Primary Insurance Code (from Patient file only, NOT from individual Billings)
- Primary Insurance Name (from Patient file only, NOT from individual Billings)
- Secondary Insurance Code (from Patient file only, NOT from individual Billings).
- Secondary Insurance Name (from Patient file only, NOT from individual Billings).
- Tertiary Insurance Code (from Patient file only, NOT from individual Billings)
- Tertiary Insurance Name (from Patient file only, NOT from individual Billings)
- Last Visit Date (from Patient file).
- Hold Code 1
- Hold Code 2

- Hold Code 3
- Hold Code 4
- Hold Code 5

### Procedures

#### Exporting patients

To export a list of patients:

1. On the Tools menu, select Export > Patient Email Connect. The Patient Email Connect Filter screen appears.
2. Make all of your filter selections.
3. Click the Export button. The Export Results screen appears.
4. Navigate to a folder where you want to save your results and enter a name for the *.csv (comma separated values) file.
5. Click the **Save** button. The file will be saved and you can open it in spreadsheet applications and print it from there.

When you import your saved files, zip codes and other numeric fields may be interpreted as numbers by your spreadsheet program and have their leading zeros stripped. For instance, in Microsoft Excel you will need to make the zip code column a “text” column (during Import) so that any leading zeros will be retained. Be sure to repeat this with other numeric columns.

#### Saving filter selections

To save a set of filter selections:

1. On the Tools menu, select Export > Patient Email Connect. The Patient Email Connect Filter screen appears.
2. Make all of your filter selections.
3. Click the **Save As** button. The Save Filter screen appears.
4. Enter a name for your selections in the Save As field.
5. Click the **Save** button. After this, this filter will be available for selection in the Saved Filters drop-down.

# BillFlash Payments

Several updates have been made that allow you to send cash payments from patients to BillFlash so that their accounts at BillFlash coincide with their accounts in Lytec.

## Best Practices

- Use proper care and consideration regarding which users are granted access in the User Security Profile to make changes or deletions for "Apply Patient Payments" and "Billing/ Charges and Payments".
- Each day OfficePay or ePay are used, generate the Payment Transaction Report from the BillFlash website, which will show the payment transactions for the day, and carefully match

those payments to the Day Sheet to verify everything was posted in Lytec correctly and completely. This is an important step to reconcile between the BillFlash entries and Lytec entries to remain in balance.

- Be certain that the Audit Trail is enabled, so changes or deletions can be reviewed if a problem is detected at a later date.

## Updated Apply Patient Payment screen

The Office Pay button is now enabled when Cash is selected as a Patient Payment (method). This enables you to enter a cash payment that will go to BillFlash, keeping the BillFlash account balanced. In addition, the patient name is now sent to BillFlash as well.

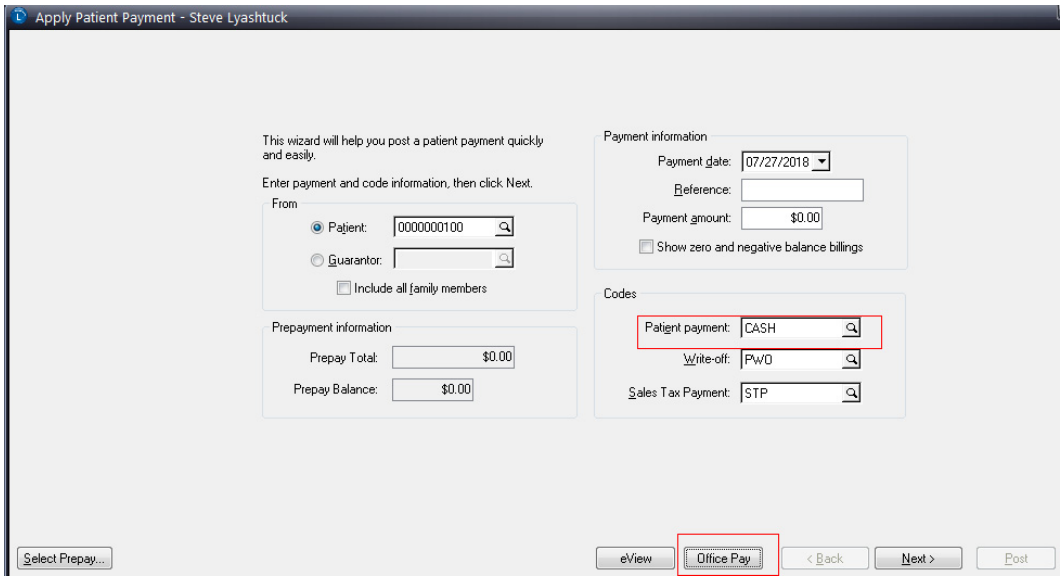



*Figure 19. Apply Patient Payment screen*

When you are applying payments from BillFlash on this screen, you can now select the patient or the Guarantor for the patient and you can change any of the Payment information fields.

Note: The Guarantor radio button will be disabled if the patient is the Responsible Party.

## Updated Enter Copay as Prepayment screen

The Office Pay button is now enabled when Cash is selected as a Transaction Code. This enables you to enter a cash payment that will go to BillFlash, keeping the BillFlash account balanced.

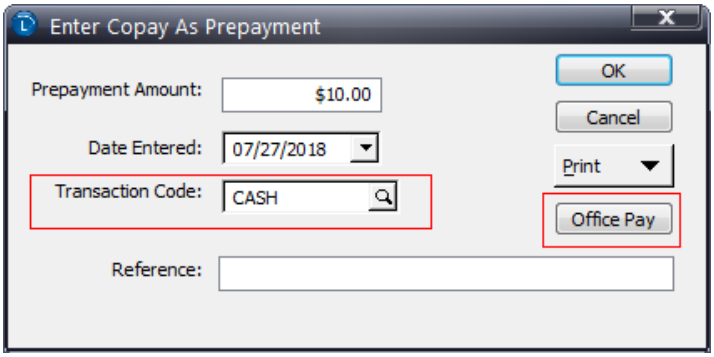



*Figure 20. Enter Copay as Prepayment screen*

In addition, the patient name is now sent to BillFlash as well and you can edit the fields on this screen.

## Updated Charges and Payments screen

The Office Pay button is now enabled when Cash is selected as a Tx Code. This enables you to enter a cash payment that will go to BillFlash, keeping the BillFlash account balanced.

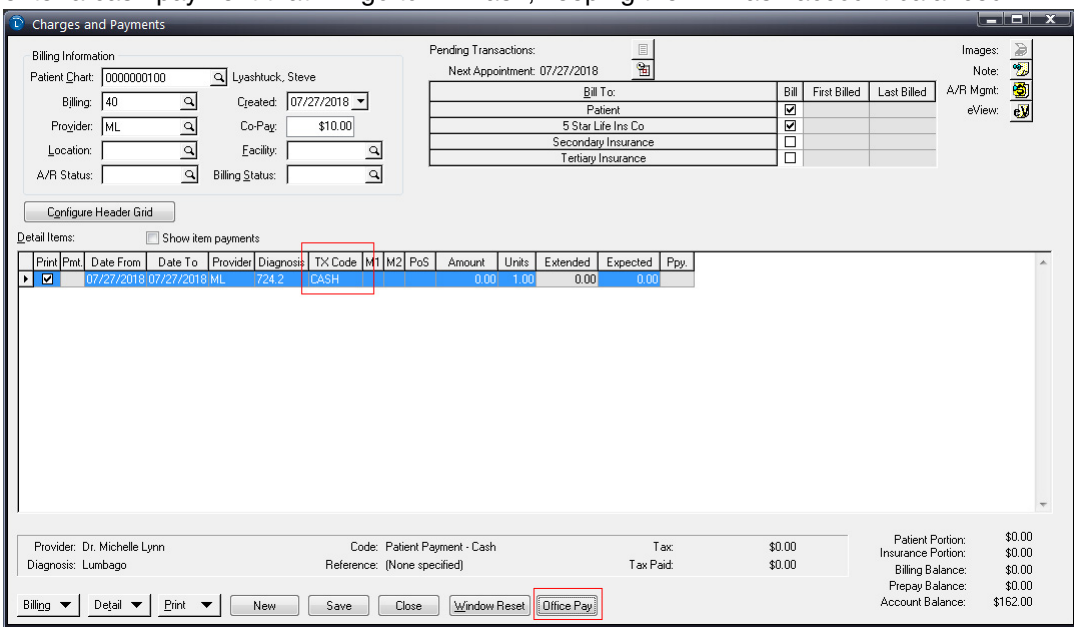



*Figure 21. Charges and Payments screen*

In addition, the patient name is now sent to BillFlash and fields can be edited the same manner as non Billflash payments.

## Updated Add New Prepayment screen

The Office Pay button is now enabled when Cash is selected as a Transaction Code. This enables you to enter a cash payment that will go to BillFlash, keeping the BillFlash account balanced.

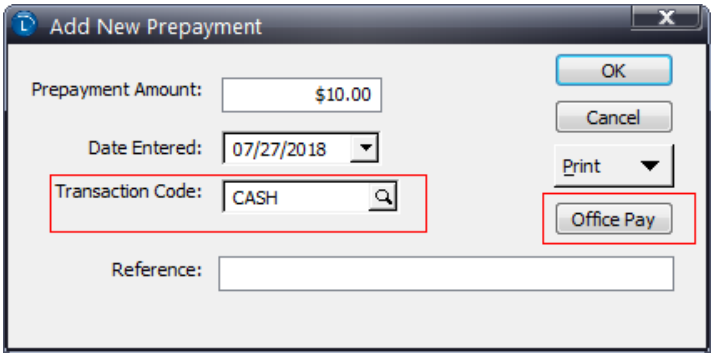



*Figure 22. Enter Copay as Prepayment screen*

In addition, the patient name is now sent to BillFlash and fields can be edited the same manner as non Billflash payments.

# Duplicate Patient Checking

Checking for duplicate patients has been updated to include checking for duplicate last names AND dates of birth. Previously, duplicate checking was limited to social security numbers. Updated checking will take place when you save a new patient or a Quick Add patient.

Note: duplicate checking is NOT performed on archived patients.

## New Warning message

There is a new message that will appear if there is both a duplicate Last Name AND Date of Birth. This will occur regardless of the value in the Social Security number field; and the check is NOT case sensitive for the last name.

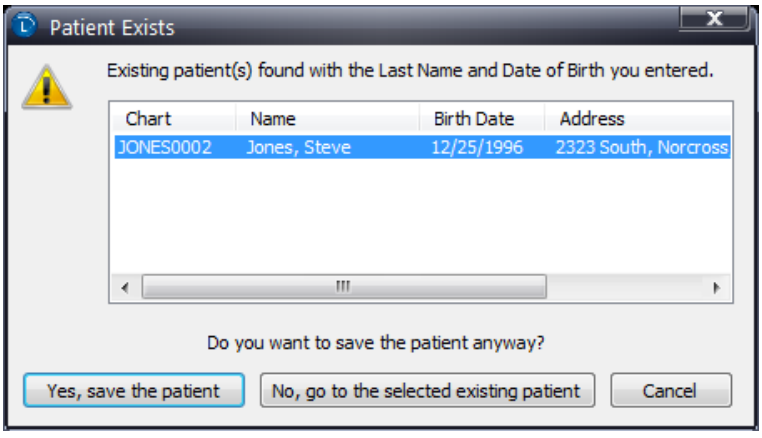



*Figure 23. Duplicate Patient warning*

- If you select “yes, save the patient,” Lytec will save the new patient with the duplicate information.

- If you select “No, go to the selected existing patient,” Lytec will open the existing patient record in the Patient screen
- If you select “Cancel,” Lytec will not save the record but will return you to the New Patient screen so you can update the new information to clear the duplicate data.

If there are multiple duplicate records that have the same last name and date of birth, the message will display the last name and dates of birth for all duplicates.

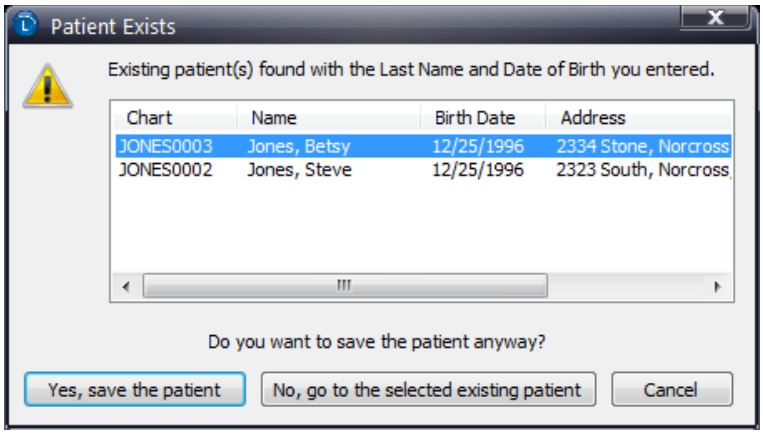



*Figure 24. Multiple Duplicate Record warning*

- If you select “yes, save the patient,” Lytec will save the new patient with the duplicate information.
- If you select “No, go to the selected existing patient,” Lytec will open the existing patient record in the Patient screen.

# Revenue Management

The following changes have been made for Revenue Management.

## Updated Process Remittance screen

The Process Remittance has been updated to improve the workflow for identifying secondary claim processing as follows:

## New column

There is a new column: Next Payer that shows you the next payer if the patient has more than one insurance.It will also show the filing method (EDI or paper) for the next payer.

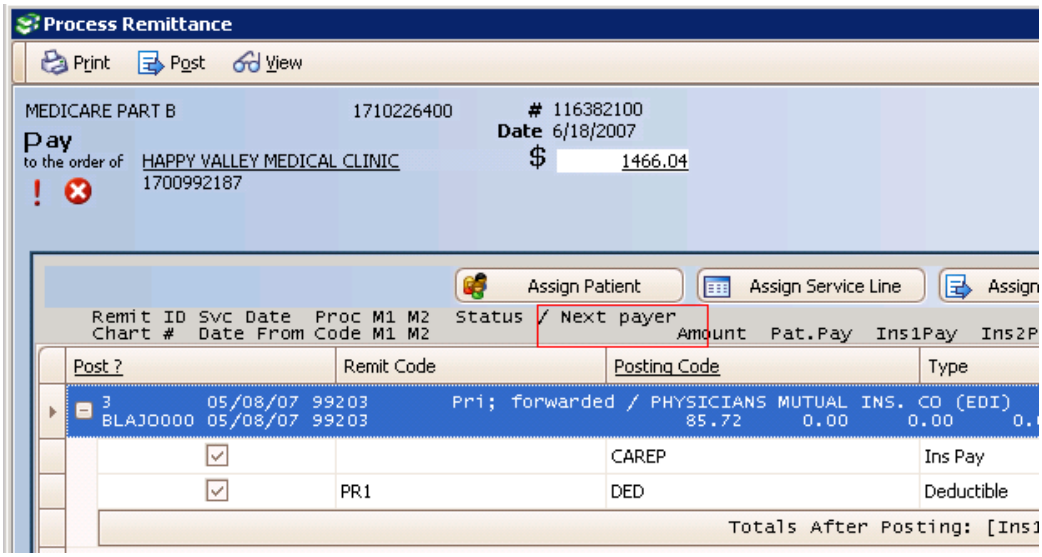



*Figure 25. Process Remittance screen*

## New Column

There is a new column on the Process Remittance screen: Status. In this column, you can see an abbreviated notation of the status of the remittance.

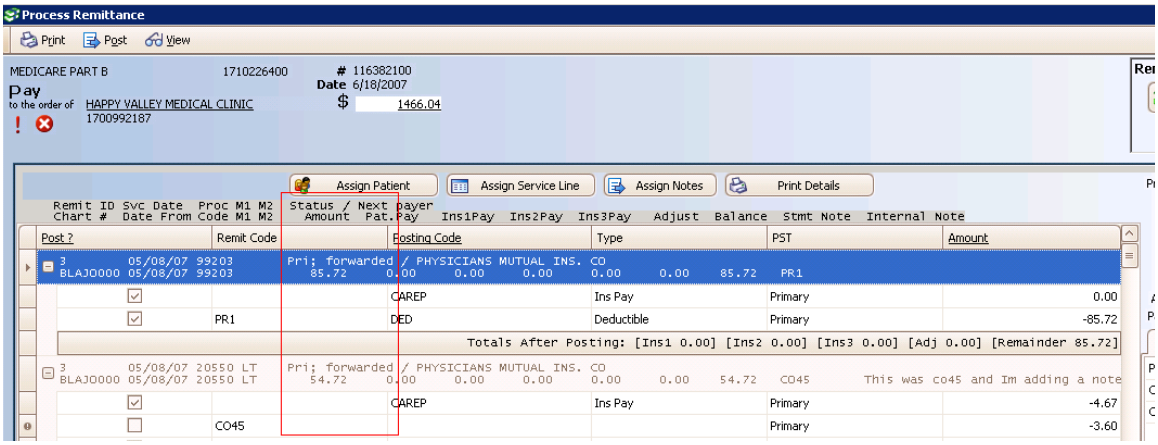



*Figure 26. Process Remittance screen*

The table below shows the possible values shown in the column.

| Status | Abbr displayed | Description on right |
|---|---|---|
| 1 | Primary | Processed as Primary |
| 2 | Secondary | Processed as Secondary |
| 3 | Tertiary | Processed as Tertiary |
| 4 | Denied | Denied |

| | | |
|---|---|---|
| 19 | Pri; forwarded | Processed as Primary, Forwarded to additional payer(s) |
| 20 | Sec; forwarded | Processed as Secondary Forwarded to additional payer(s) |
| 21 | Ter; forwarded | Processed as Tertiary Forwarded to additional payer(s) |
| 22 | Reversal | Reversal of Previous Payment |
| 23 | Not our claim; forwarded | Not Our Claim, Forwarded to Additional Payer(s) |
| 25 | Predetermination Pricing Only | Predetermination Pricing Only - No Payment |

# Chapter 2 - Resolved Issues

The following issues were resolved with Lytec 2019.

| PBI | Application | Description |
|---|---|---|
| 196901 | Revenue Management Reports | The Report Viewer will no longer hang because Revenue Management was creating very long file names for TriZetto remits. TriZetto remits are now handled like other clearinghouse reports and are renamed only once and given a date stamp.<br><u>Steps to recreate</u><br>1. Launch Revenue Management and select Reports.<br>2. Click Get Reports to get remits from TriZetto.<br>3. Verify that the remits appear and Revenue Management does not “hang.” |
| 197566 | Claims Editor | Revenue Management has been updated so the claims editor will no longer always checks diagnosis codes using the value stored in the ICD-9 field.<br><u>Steps to recreate</u><br>1. Select a patient whose insurance company has a default diagnosis code set up for ICD-10.<br>2. Enter a billing and create a service line with at least one or more diagnosis codes on the service line. Be sure to use codes that have an ICD-10 value entered in the CODE field. Additionally, make sure the ICD-9 field contains the legitimate ICD-9 code.<br>3. Save the billing.<br>4. Launch Revenue Management and view the billing.<br>5. Verify that there is no error regarding the ICD-10 code(s). |
| 198144 | Revenue Management | Communication Sessions for TriZetto claims and eligibility are now automatically added for practices that have used Revenue Management in the past.<br><u>Steps to recreate</u><br>1. In Lytec, Launch Revenue Management.<br>2. On the Configure menu, select Communications.<br>3. Verify that the TRICL and TRIEV sessions appear in the grid. |

| | | |
|---|---|---|
| 198872 | Billing | Data that is entered in the Original Reference # field and the Resubmission # field will not populate the CMS 1500 02-12 regardless of the Payer position.<br>Steps to recreate<br>1. In Charges and Payments, click Billing, and then Bill Options.<br>2. Select the Billing More Information 2 tab.<br>3. Enter numbers in the Original Reference # field and the Resubmission # field.<br>4. Save the claim.<br>5. Click Print and select Primary Insurance .<br>6. Select CMS 1500 02-12 - Standard.lci and click Open<br>7. Click on Preview and verify that the information from the Billing More Information 2 tab does not appear in box 22. |
| 198891 | Claims | You will no longer receive errors in Claim Preview when using the UB-04 Implementation Guides, for Loops 2310D Rendering and 2310F Referring Providers. The Implementation Guides have been updated so that these Loops are not used.<br>Steps to recreate<br>None |