

Office Practicum Release Updates: Version OP 21.1

Last Modified on 04/25/2023 4:20 pm EDT

[Previous](#) | [Next](#)

OP 21.1.6 Release | Availability: Per email communication

This release contains everything included in the [21.1.4 Feature Release](#) 

Scroll down to the **21.1.4 Release** to see all release notes, or navigate using the table of contents below:

- [New Features](#)
- [Resource Updates](#)
- [Improved Functionality For All Users - You Asked, We Answered!](#)
- [Improved Functionality For Providers and/or Clinical Staff](#)
- [Improved Functionality For Non-Clinical and/or Billing Staff](#)
- [Issue Resolutions Impacting Workflows for All Users](#)
- [Issue Resolutions Impacting Providers and/or Clinical Staff Workflows](#)
- [Issue Resolutions Impacting Non-Clinical Staff and/or Billing Staff Workflows](#)

[Issue Resolutions Impacting Workflows for All Users](#)

- Practices who do not use ePrescribing may have received Access Violations at login. This issue has been resolved.

OP 21.1.5 Release | Availability: Per email communication

This release contains everything included in the [21.1.4 Feature Release](#) 

Scroll down to the **21.1.4 Release** to see all release notes.

[Issue Resolutions Impacting Workflows for All Users](#)

- The option to Export documents in Document Management was missing in the 21.1.4 release. This option has been restored.
- Previously, the header on **diagnostic test printouts** (both requisitions and results) was printing the **practice address** from the **Billing/Pay-To Information** (which can be located by navigating to: Practice Management > Staff/Providers > [select user] > Practice Info > Billing/Pay-To Information). This has been corrected so now the Report headings field (intended to show the practice's name and address) is populated from the **Report Headings** and **Full Address** fields, which can be located by navigating to: **Practice Management** > **Staff/Providers** > **[select user]** > **Practice Info**.

21.1.4 Release | Availability: Per email communication

Look out for these icons!



Less Clicks Campaign!



Major Update



You asked, we listened!



New Features

New Status: Cancelled Same Day ♥

Previously, a user could set the **Visit Status** of a broken appointment to only No Show (Red) or Cancelled (dark grey). Similarly, a user could set the Billing Status of a broken appointment to only No Show, No Show* (no-penalty no show), or Cancelled. Now, another option has been added to both areas: **Cancelled Same Day**. This will also appear as dark grey.

Note: Your custom reports may need to be updated to account for this new appointment status.

Archiving Old Tasks

Similar to archiving old Encounter Notes, Diagnostic Tests, and Referral Letters, you can now archive old Tasks in **Admin > Archive Records > Database Cleanup**. All Not Started tasks with a Due date on or prior to a given date can be swept into a **Cancelled** status.

New: Customizable Required Fields ♥

Practices now have the ability to **set additional minimum-necessary pieces of information for a new chart**. In addition to the 7 existing minimum data needed, users have the ability to add any/all of an additional 9 fields as minimum practice requirements to create a new patient. The label of any "required" field that is missing data will turn red as a visual cue.

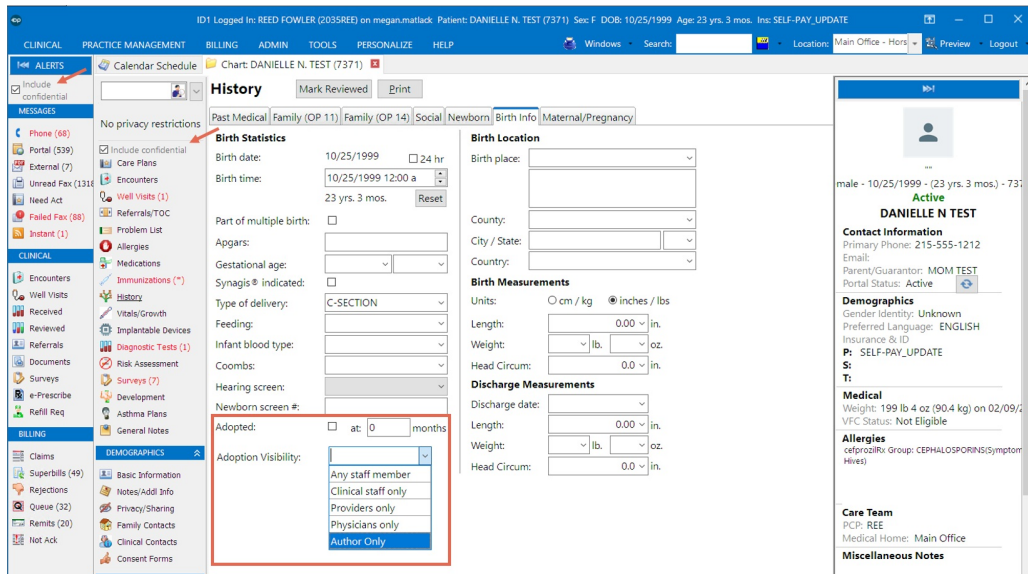
Practices may use this new feature to help meet immunization registry minimum data requirements for their state. For example, practices who are required to submit race and ethnicity to their state immunization registry might opt to make the race and ethnicity fields required.

For more information on this feature, please see the [System Preferences: Demographics](#) article.

Privacy Flag: Patient Adoption Status

A child's adoption status can potentially be a sensitive issue for families. Previously, when a clinician ticked the "Adopted" checkbox in Birth History, there was no way to restrict access to this information (or the age at which the child was adopted). Now, the user can choose a **visibility level** (e.g. Any staff member, Clinical staff only, etc.) for this information. **This checkbox hides ONLY "Adopted: Y/N" and "Adopted at age ____"**. It does NOT hide ANY of the rest of the Birth History.

*Note: To see the adoption status and to make the dropdown setting changeable, the user must have the **Include confidential checkbox** on the child's chart selected.*



Resource Updates



New Bright Futures Handouts

32 new Bright Futures handouts were added to the database (12 English, 20 Spanish) on topics like acne, water safety and burn prevention, circumcision, and much more. To see all handouts, look in **Clinical** > **[More]** > **Patient Education**, then filter by BF (Bright Futures). You can now add these to your Orders/Patient education.

Note: *These handouts will not be automatically added to your well visit templates, but you can select which ones you want and add them as Resources.*

Improved Functionality For All Users - You Asked, We Answered!

Schedule/Tracking Screen

Tracking Screen

- **PCP Now Visible:** Now, a patient's PCP can be seen from the Tracking screen. Viewing/hiding the PCP can be set using the Tracking screen "hamburger".
- **Insurance Now Visible:** Now, a patient's primary and secondary insurance and primary and secondary insurance IDs can be seen from the Tracking screen. Viewing/hiding this information can be set using the Tracking screen "hamburger".

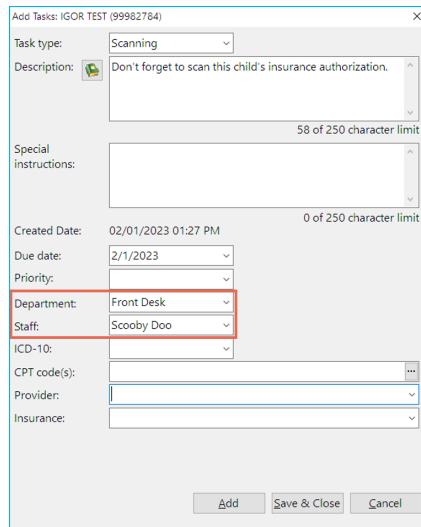
Repositioned Tasks and Slot Usage

The Tasks and Slot Usage panes have been moved **higher on the right side of the Schedule** for easier viewing.



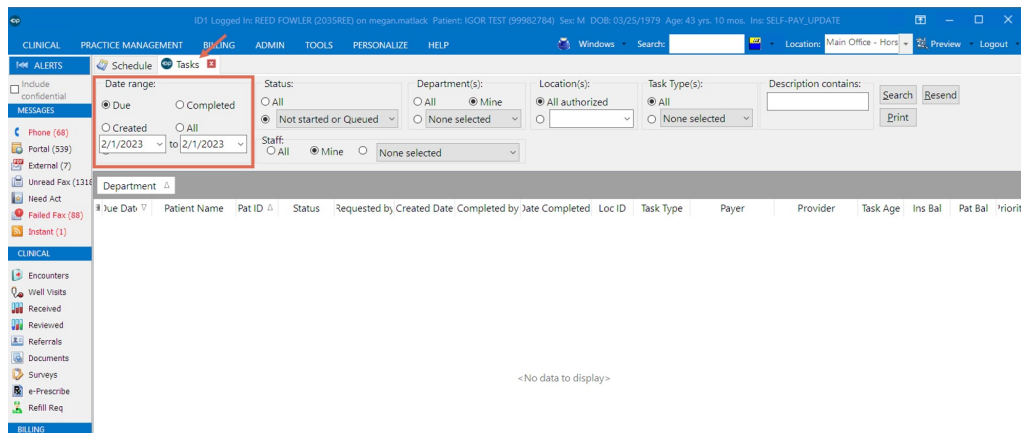
Tasks Now Assignable to Person

Previously, you could assign tasks to a particular department. Now, you can also (in addition) **assign tasks to a specific individual**. Similarly, you can now search and filter for tasks assigned to a particular user.



Task Manager: New Date Filters

Previously, users could apply two types of date range filters to tasks in the Task Manager: date Due or date Requested. Now, users have four choices here: date **Due**, date **Completed**, date **Created**, or **All**. "Due" is unchanged. "Created" functions the same as "Requested" did (only the label is new). "Completed" permits a completion date search. "All" searches for tasks Due, tasks Created, OR tasks Completed within the given date range.



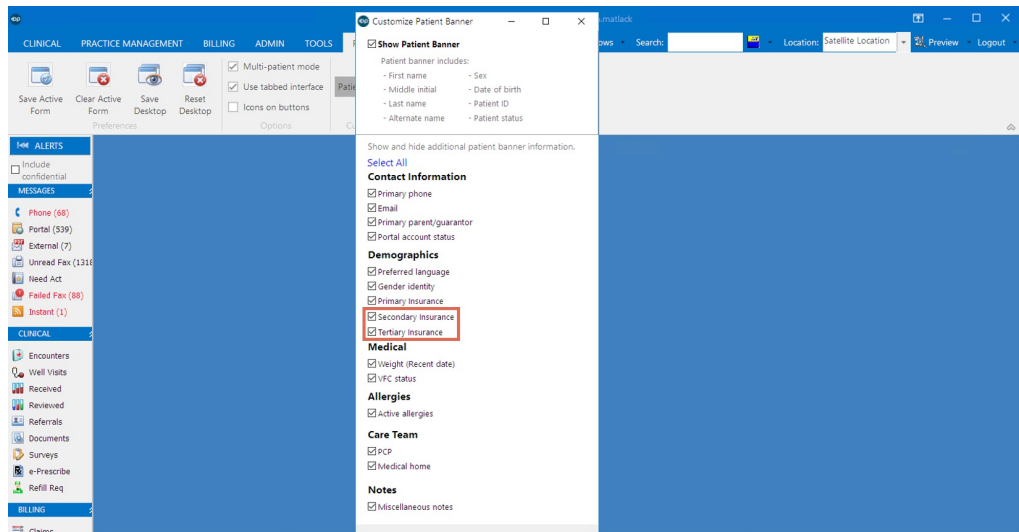
Behind-the-Scenes Improvements

We have:

- Updated components that will improve unity among different parts of the program.
- Replaced older toolbars with new ones that should behave with fewer errors and better performance.
- Increased behind-the-scenes security when OP interacts with your Correspondents (e-prescribing, clearinghouse, etc.)

Patient Banner: Secondary/Tertiary Ins

When customizing the Patient Banner, options to show **secondary** and **tertiary insurance** are now available.



Address Book

NPI Visible in Address Book Overview

Each Address Book entry has an entry where the user may put that contact's NPI (found in **Edit Address > Staff/Provider** tab.) However, previously the NPI was not one of the visible/filterable/sortable columns in the Address Book. Now, viewing/hiding the NPI can be set using the Address Book screen "hamburger".

Basic Email Validation

Basic email formatting validation has been added to the Address Book's email field. Further/advanced email validation will be added in a future release.

Staff Search Improvements

You can now **search for staff in a case-insensitive** way, i.e. BERTHA or bertha will find staff member Bertha Jones. You can now also **initiate a search by pressing Enter** as opposed to having to click the Search button.

Improved Functionality For Providers and/or Clinical Staff

Allergy

Allergy Group "User Assigned Title"

In the Allergy Data Map crosswalk window (**Allergies > New > Allergy Group**), the column previously labeled Description is now changed to User-Assigned Title. This better disambiguates between the SNOMED Description column (which should

remain unchanged being part of the externally-defined SNOMED codeset) and a user-defined "friendly" name, which might be a synonym.

Allergy Classification

OP now gets the **RXNORM** code, not just the NDC, when the user creates a new Allergy to a medication. This will help make allergies by groups more accurate.

Customize CDA: "Notes" Option

A practice can customize which parts of an incoming CDA appear, and in which order. Now the **Notes section** of the CDA can also be set in this way.

Immunization Reports: More MMR Space

Immunization reports (**Immunization Status Letter**, **Imm Status with Growth Info letter**, and **Imm Chart only**) now have extra space in the MMR section (**6 slots**) to account for historical or international measles, mumps, and rubella vaccines given separately.

Patient Records SQL

A new SQL job in your Database Viewer called **Single Patient EHI Export** lets you export every single OP record in your primary database that relates to one patient. At runtime, you will be prompted for a patient number and a date range. This permits rapid export of all patient data in machine-readable format to comply with the 21st Century Cures act. For more information on use of this SQL job, see the [How to Export All EHI For a Given Patient](#) article.

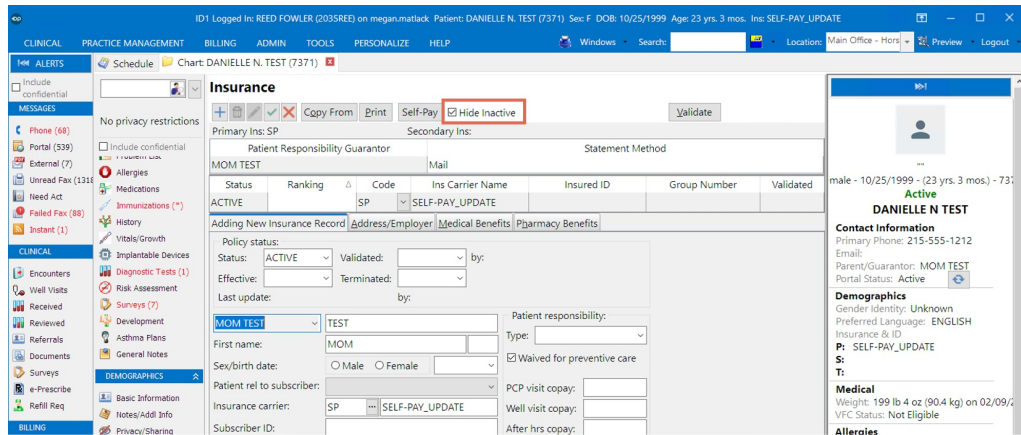
CCD Generation

If you have been generating CCDs to send via DIRECT messages to external recipients, this will now take place within OP as opposed to within Intelichart. If you don't use Intelichart, the Clinical Document Architecture creation within OP has been updated to [Version 2.1](#).

Improved Functionality For Non-Clinical and/or Billing Staff

[Hide Inactive Insurances via Checkbox](#)

Previously, inactive insurances would accumulate in the Insurance window, cluttering the view. Now, a checkbox to **Hide Inactive Insurances - checked by default** appears on the patient Insurance screen. A user can view inactive insurances by unchecking the Hide Inactive box. The checkbox is not affected by preference setting.



New Document PATNO: Jump to Results

When creating a new Document in Document Management, one of the first steps is for the user to select a patient. A user might directly type in the patient number (PATNO) and hit enter. The search pane, with a single search result (the patient with that PATNO) appears. Previously, however, the focus of the screen was not on the single search result but higher up, on the search parameters. The user would have to mouse/tab to the search result every time. Now, after a successful PATNO search, the panel **auto-focuses on the search result** and the user can simply hit **Enter** to accept it.

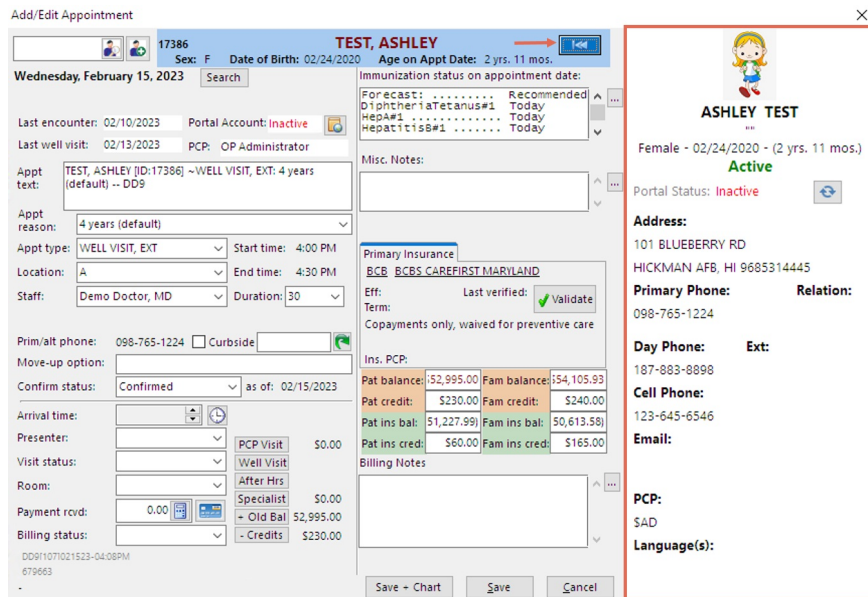
Schedule: "Save + Chart" Button

After using the **Add/Edit appointment** screen to create or view a scheduled appointment, the user may now **close the screen with a Save + Chart button**, which will automatically bring up that patient's chart in the **Basic Information** window.

Add/Edit Appointment Patient Demographic Banner

Users asked for additional demographic information to show on the Add/Edit Appointment screen while scheduling an appointment. We tried making the Add/Edit appointment screen bigger but ran into "screen real estate" issues. However, we've added this information to a **collapsible/expandable Appointment Patient Banner**.

*Note: this is a different feature than the **general Patient Banner**, but the interfaces behave similarly.*



Capture "Created By" for Charges

A **Created By** column has been added to patient Superbills. This displays the user who created each charges for the patient. Capturing the charge creator depends on the type of charge (e.g. E&M code, Survey, in-house lab, vaccine, etc); for a detailed crosswalk, see [this article](#). To view this column in a patient's Charges window, click the **hamburger** in the **Superbill (Unposted Charges)** pane.

Payer: New Claim Category Override

Typically, when users create new claims, they want that claim to immediately move to the claims queue (Category Q1) or save it to be queued later (Category Q0). However, sometimes users want to automatically pend certain types of claims, e.g. for newborns. **The Claim Category Override feature permits users to automatically set a different default Category when they save new claims for a particular payer.** For example, a practice who assigns newborn claims to a placeholder insurance of NEWBORN might activate this feature and put all NEWBORN claims in a pending (Category P0) state. An unusual payer that requires special manual handling of claims might be auto-set to Queued for Office (Category QR).

PMX: More Room to Text

Text (SMS) messages are limited to 160 characters. When sending Patient Message eXchange (PMX) messages, OP needs to reserve some of these 160 characters for statutory requirements, like the opt out message. Previously, OP limited users to 116 characters. Now, users may use as many as **137 characters**.

Note: Messages are still limited to 160 characters total. It is possible that a message to a patient with a very long name may have the end of the message cut off if the practice does not reserve enough space for name substitution.

Changing Zipcode Updates City and State

In OP, when creating a new patient, you can simply enter the patient's zip code and it would automatically populate the city

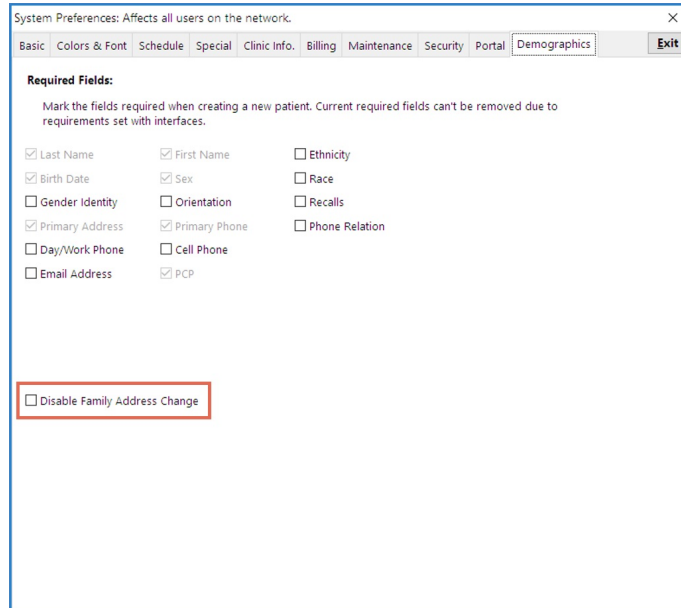
and state associated with that zip code. However, previously if you changed an existing zipcode, the city and state would not update. Now they do.

Family Address Change: New Preference



A new global preference **disables the Family Address Change form** from opening any time a primary phone or address is changed on a patient. A practice that chooses not to update linked family contacts may now change this setting.

Note: By default, all practices will still have Family Address Change enabled, i.e. no change from current behavior.



The screenshot shows a window titled "System Preferences: Affects all users on the network." with a tabbed interface. The "Demographics" tab is selected. Under the heading "Required Fields:", there is a list of checkboxes for various patient information fields. The "Disable Family Address Change" checkbox is highlighted with a red box.

Required Fields:		
Mark the fields required when creating a new patient. Current required fields can't be removed due to requirements set with interfaces.		
<input checked="" type="checkbox"/> Last Name	<input checked="" type="checkbox"/> First Name	<input type="checkbox"/> Ethnicity
<input checked="" type="checkbox"/> Birth Date	<input checked="" type="checkbox"/> Sex	<input type="checkbox"/> Race
<input type="checkbox"/> Gender Identity	<input type="checkbox"/> Orientation	<input type="checkbox"/> Recalls
<input checked="" type="checkbox"/> Primary Address	<input checked="" type="checkbox"/> Primary Phone	<input type="checkbox"/> Phone Relation
<input type="checkbox"/> Day/Work Phone	<input type="checkbox"/> Cell Phone	
<input type="checkbox"/> Email Address	<input checked="" type="checkbox"/> PCP	
<input type="checkbox"/> Disable Family Address Change		

"Imm Chart Only" Return Address

Two of the three standard patient immunization reports (Immunization Status Letter and Imm Status with Growth Info) list the practice's address in the upper left hand corner, suitable for showing in a return address window. Previously, the third report (**Imm Chart Only**) did not. Now all three show the practice's address in the upper left corner.

Schedule

Schedule Template: Basic Information Buttons

Practices experience confusion when trying to apply schedule slot templates to a provider's schedule. We have added **yellow Info buttons** next to the **Apply Through** and **Reapply As Of** with hints. Hint language will be refined in a future release.

Tracking Billing Panel: Family Balance

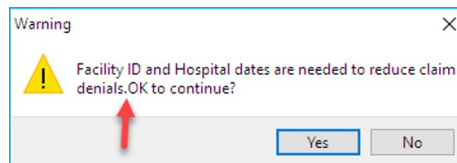
The Billing Panel (visible from the Tracking Screen when "Show Billing Panel" is checked) now shows family balance and family credits, in addition to patient balance and credits.

Hide Broken Appointments Option

In the Schedule in the Settings dropdown, you now have the option to **hide appointments with a broken status** (No Show, Cancelled, or Cancelled Same Day). Individual users can save this setting as a [screen preference](#). By default, these boxes will not be checked.

POS 21 Alert

Previously, when a biller entered charges for POS 21, it was easy to forget to enter the Facility ID and Hospital Dates blank. Sending a claim for inpatient services without this data results in rejections and denials. Now, if either of those fields are left blank when POS is 21, a warning message appears that facility ID and hospital dates are needed.



Hide Expired "Contracts for CPT"

OP permits you to see your contracted rates with each payer for a particular CPT **Clinical > Procedure (CPT) Codes > Contracts**). Previously, all contracted rates - even those contracts that had expired - were visible. Now **expired contracts are hidden by default**. You can still view expired contracts by unchecking the Hide Expired checkbox.

Insurance field now in Statements

Pending statements (**Billing Center > Statements**) can be sorted by balance, patient name, or other fields. Now you can **sort statements by a patient's current primary insurance**. This field can be enabled using the "hamburger."

***Note:** This field shows the patient's CURRENT insurance, which may or may not be the same as the insurance(s) covering the patient during periods in the statement.*

Issue Resolutions Impacting Workflows for All Users

Hyphens in Message Phone Numbers

Previously, messages would frequently display without hyphens in the Phone field of the Messages window. Now, hyphens will display in phone numbers **IF** the phone numbers are created correctly in the patient Register.

***Note:** Phone numbers which are improperly formatted in the Register - less than 10 digits, more than 10 digits, or that contain alpha characters - may continue to display oddly in the Message window and elsewhere in OP.*

Schedule: Phone Numbers Keep Hyphens

OP prints phone numbers with hyphens in the Schedule appointment text. Previously, if the phone number was changed

AFTER an appointment was added to the schedule, the phone number attached to the appointment would update, but the hyphens would disappear. Now **the phone number updates and preserves the hyphens**



Register Reports in Disclosures

Patient documents printed from OP should have **copies automatically generated** in that patient's Document Management in the Disclosures section. Previously, documents printed from Register Reports did not have copies appear automatically in **Disclosures**. Now they do.

Consent Form Now Standard Zoom

[Read More](#) 

Database Viewer

[Read More](#) 

Alert for Blank "Preferred Email"

[Read More](#) 

General Letters: "Date Written"

[Read More](#) 

Schedule

[Read More](#) 

Documents/Document Manager

[Read More](#) 

Issue Resolutions Impacting Providers and/or Clinical Staff Workflows



Weird Lab Order/Result Crossover

Previously, users might see seemingly-random results attached to Diagnostic Test Orders. The results were often for a different patient, for a different test, and/or for a test done years ago. We have **improved validation** and added a **second level of matching order/result linkages** to resolve this issue.



Respect the NDC!

Medications may exist in several very-similar,-but-not-quite-identical forms, each with its own NDC. While in many cases a provider may not care which particular presentation of "amoxicillin, suspension, 400 mg/5 ml" he/she prescribes, there may

be circumstances (e.g. Medicaid formulary) where a very particular NDC prescription must be issued. Previously, when a user prescribed a particular NDC using the Master List, the NDC sent to the pharmacy was not necessarily the NDC that the provider had chosen. Surescripts would send the first drug in its list that had a matching FDB Rx ID - which may, or may not, have been the precise NDC selected. This failure to "Respect the NDC" sometimes caused conflicts between a prescriber record and a pharmacy record. Now, this behavior has been fixed and **the eRx system will Respect the NDC prescribed by the provider.**

***Note:** This only applies to prescriptions issued from the Master List - prescriptions generated from Med Favorites already respect the choice of NDC.*

Immunizations

[Read More](#) 

CDA

[Read More](#) 

Controlled Substances Theoretical Loophole Blocked

[Read More](#) 

Signing Non-Med/School Note "Rxs"

[Read More](#) 

School Exam: Defaults for "Neurologic"

[Read More](#) 

Rescored Survey Alerts

[Read More](#) 

Asthma Plans: View/Print

[Read More](#) 

Same Day Orders on Notes

[Read More](#) 

Issue Resolutions Impacting Non-Clinical Staff and/or Billing Staff Workflows

 [Bulk Payment Errors Fixed](#) 

OP permits you to post a large amount against multiple patient accounts, known as **bulk posting**. Previously, when the patient also had an available credit, OP would get confused and interrupt your bulk insurance payment process so that you could apply the patient credit. In doing so, it lost several variables that the user had set, such as the payment date and the payment method. This potentially required the user to re-enter these variables multiple times during a bulk payment activity. This has been fixed.

INS CARRIER CODE returns

In a prior update, the primary (and secondary, if applicable) insurance carrier codes were removed from the Claims view. This meant practices were unable to tell which insurance carrier posted which payment/adjustment. Now, **insurance carrier codes have been restored to charge, payment, adjustment, patient responsibility, and revert patient responsibility transaction lines.**

Appointment Reason Now Shows

This fixes a bug seen on scheduled appointments. Previously, when creating a new appointment, if a user entered the appointment reason ("Cough") before selecting the appointment type ("EST. SICK"), the appointment reason would not appear in the appointment text box on the Schedule. Now, users can **enter the appointment reason before the appointment type** and both the appointment type and appointment reason will show in the appointment text box.

Copying Insurance from Family

To create a new insurance record, one method that OP permits is copying from a family member. Previously, however, when clicking the **Copy From** in the **Insurance** screen, the user had to click around several places in the Search screen to get the family members of the index patient to appear. Now the user need only click "**Family**" in the **Search pane** for family members to appear.

Guarantor

[Read More](#) 

Statements: Penny Charges Now Visible

[Read More](#) 

OP AWARE

[Read More](#) 

Cleaner POS Overrides

[Read More](#) 

Financial Analytics: Unnecessary Radio Buttons

[Read More](#) 

[Third-Party Consent Dates Alert](#)

[Read More](#) 

[Schedule/Appointments](#)

[Read More](#) 

[Death Date After Birth Date](#)

[Read More](#) 

[Register Tasks: Not My Department!](#)

[Read More](#) 

[Converted/Forwarded CPT line items](#)

[Read More](#) 

["Current \(not daysheeted\)" Count](#)

[Read More](#) 
