

ArcBITS Newsletter

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ArcSys Hot Tip

If you have an older server running Mvbase, it is important to check periodically on how much disk space it has available. When there is insufficient space, the Windows operating system will cease to accept print jobs from Mvbase. Your printers can appear to be online, and Mvbase thinks that Windows is accepting the print job, but they are going nowhere and nothing ends up printing.

ICD-10 Primer

This is a brief overview of the structure of ICD-10 and it will help you in understanding how to prepare for coding. The following table shows how the codes are organized into 22 categories. (See Wikipedia for more information.)

I	A00–B99	Certain infectious and parasitic diseases
II	C00–D48	Neoplasms
III	D50–D89	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
IV	E00–E90	Endocrine, nutritional and metabolic diseases
V	F00–F99	Mental and behavioural disorders
VI	G00–G99	Diseases of the nervous system
VII	H00–H59	Diseases of the eye and adnexa
VIII	H60–H95	Diseases of the ear and mastoid process
IX	I00–I99	Diseases of the circulatory system
X	J00–J99	Diseases of the respiratory system
XI	K00–K93	Diseases of the digestive system
XII	L00–L99	Diseases of the skin and subcutaneous tissue
XIII	M00–M99	Diseases of the musculoskeletal system and connective tissue
XIV	N00–N99	Diseases of the genitourinary system
XV	O00–O99	Pregnancy, childbirth and the puerperium
XVI	P00–P96	Certain conditions originating in the perinatal period
XVII	Q00–Q99	Congenital malformations, deformations and chromosomal abnormalities
XVIII	R00–R99	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified
XIX	S00–T98	Injury, poisoning and certain other consequences of external causes
XX	V01–Y98	External causes of morbidity and mortality
XXI	Z00–Z99	Factors influencing health status and contact with health services
XXII	U00–U99	Codes for special purposes

Depending on your specialty, you can focus on a subset. As published in our previous newsletter, you can run a report that shows by provider the commonly used ICD-9 codes and how they map to ICD-10. Next month, more information will be presented on tools to assist with coding.





Recent Software Enhancements 2.0.15

02/26/13 - BILLING - The end of month process has been augmented so that it will preserve a snapshot at the transaction record level. This will allow for the generation of detailed aging reports in the past. (Requested by Leslie @ Onsite Care)

02/24/13 - GENERAL - When a power user logs on several audit checks will be performed. These include looking for logon security violations, a file save being performed, CHECKBAL process being performed recently, an end of cycle being completed, and if cross reference files have been rebuilt. This checking only takes place when the first power user logs onto the system for the day.

02/18/13 - EMR - The content of the DG1 segment being sent as an electronic order was not conforming to the specifications. Additionally, if no carrier is identified for the insurance, then it will not be sent. These items have been resolved. (Requested by Charlie @ Labcorp)

02/18/13 - MU - The Check Health Maintenance screen has been updated to allow for the inclusion of specific CPT codes. This allows for being able to check for past due annual examinations such as 99381-99387 and 99391-99397. (Requested by Donna @ Onsite Care)

02/16/13 - EMR - To reduce the likelihood of data entry errors on height and weight, additional edit checks have been incorporated to warn the user if anything unusual is detected. This includes heights < 18 or > 82 inches, weights under 6 pounds or over 350, or BMIs < 13 or > 45. (Requested by Leslie @ Onsite)

02/16/13 - GENERAL - Whenever changes are made to the Company screen, a log will be maintained.

02/14/13 - EMR - The Next Patient screen is used to show the provider the currently scheduled appointments. Color is used to indicate the status of each visit note. From now on, Purple will indicate orders that have a status of OPEN. (Requested by Beth @ Alpine Internal)

02/12/13 - EMR - The process of updating medications from Allscripts has been modified. Only super users will be allowed to auto-update the Rxnorm association table. A new field, ALLSCRIPTS (must be added by ArcSys support), has been added to the RX file. This will make it easier to maintain the association table. (Requested by Beth @ Alpine Internal)

02/12/13 - EMR - When printing an order, the options for preparing the e-order will now default to Y rather than N. (Requested by Labcorp)

02/12/13 - GENERAL - The report which prepares the Diagnosis Utilization has been modified. Most importantly, it saves the information such that it can be used by a future process that will assist with automatic ICD-10 coding. The primary purpose of this report is to show the current ICD-9 codes and how they map to ICD-10.

02/07/13 - BILLING - The setup screen that is used to define EDI formats was modified to handle the various rules required by other insurance carriers.

02/05/13 - REMITS - It is possible for a single 837 file to contain payments for different providers in separate a/rs. Thus, the feature to delete files necessitated a substantial rewrite of how inbound files are treated.

02/04/13 - COLLECTIONS - The contents of the Collection Detail screen has been improved for better readability. (Requested by Chris @ Rocky Mountain)

02/04/13 - GENERAL - When sending a message and an incorrect name is entered, the TO field will display in blue. This allows you to fix any typos. (Annette @ Western Neuro)

02/02/13 - REMITS - It is important to remember that if the choice is made to display the eob report on the screen, that one must press the Enter key to page all the way through the report. Otherwise, any errors that were encountered will not be displayed.

01/29/13 - REMITS - The deductible, copay or coinsurance amount will now be included as part of the comment field. These amounts have already been appearing on the EOB report. Additionally, a detail line will appear on the report in the event there is an anomaly between the name in the patient record and what was received. (Requested by Becky @ Physicians Medical)

(All of these updates can be seen by clicking on the Red Planet button at the bottom of the Menu.)