

# October 2024 Release Notes

Version 3.47

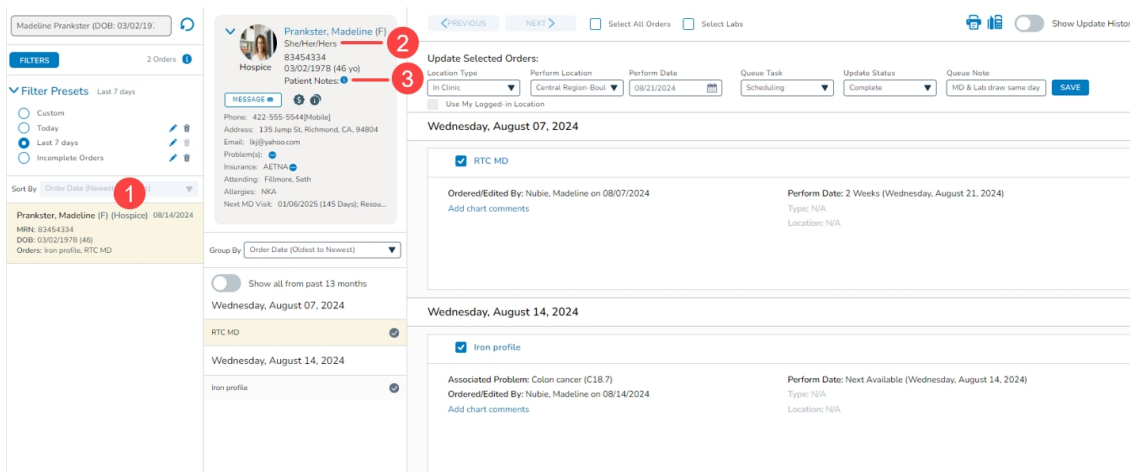
## Orders Queue enhancements to streamline workflow and improve visibility

We're implementing key updates to the Orders Queue to simplify the order processing workflow, improve the visibility of patient information, and make it easier to locate and manage regimen orders. These updates are designed to reduce complexity for clinicians, pharmacists, and other queue users, enhancing both efficiency and user experience.

### View more patient demographic information at a glance

Users often needed to open the patient's chart to access critical information such as preferred pronouns, hospice status, or patient notes, slowing the review process.

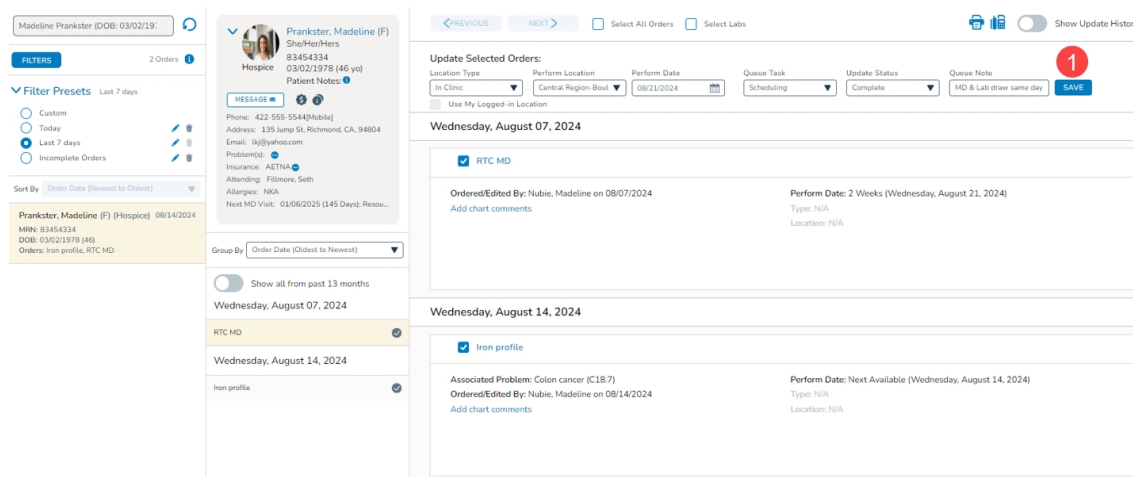
After this release, the patient details within the Orders Queue will include this important information so users can see the patient's hospice status, preferred pronouns, and patient notes, reducing the need to open the patient chart and streamlining the review process (callouts 1-3).



### Reduced clicks to complete order workflows

Previously, users expressed that it required too many clicks to complete an order, particularly around assigning or updating key fields.

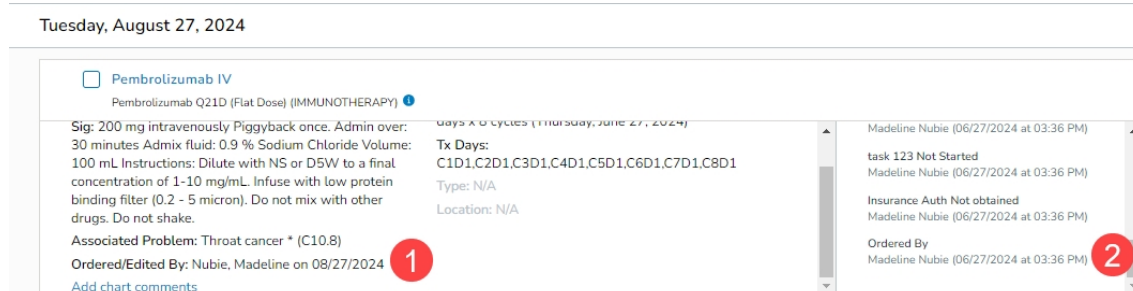
We're optimizing the order workflow by consolidating several key steps. Users can now assign or update the order's **Location Type**, **Perform Location**, **Perform Date**, **Queue Task**, **Status**, and **Queue Note**, and use one **Save** button to apply all the updates (callout 1). This reduction in clicks accelerates order processing and improves overall workflow efficiency.



## Easily locate updated regimen orders

Previously, users found it difficult to locate updated regimen orders in the queue because the search was based on the original order date. This made it challenging for pharmacy and clinical reviewers to track orders that had undergone modifications.

We're updating the queue to display regimen orders based on the modification date rather than the original order date (callouts 1-2).



This will make it easier to find regimen orders that have been updated. Pharmacy reviewers, clinical users, and others responsible for reviewing regimen changes will benefit from quicker access to modified orders.

## New Payer ID column in Demographics

To help prior authorization teams verify that they are contacting the correct insurance during the authorization process, we're adding a new **Payer ID** column in Demographics > Insurance (callout 1).

This column will show the internal practice management system ID for the patient's insurance. It's also read-only and cannot be updated manually.

Lastly, If the payer ID is received via the interface for the patient's insurance, the ID will be displayed in this column. If no payer ID is received, then the column will appear blank.

**NOTE:** If you would like to see the Payer ID column populated there will likely be setup that is required by your practice management system to ensure that the ID is sent in the ADT messages received by iKnowMed Generation 2. Please work with your account manager and practice management system administrator to ensure this information is being sent to the interface so that it can be captured and displayed in iKnowMed.

Chart Summary   Clinical Profile   Flowsheet   Orders   Results   Documents   **Demographics**   Nursing Care   Schedules

### Demographics

▼ Contacts

Edit

**Address**  Add Address   **Phone**  Add Phone

**Email**  Add Email

**Contacts/Next of Kin**  Add Contact

► Providers

► Patient Preferences

► Intake Documents

▼ Insurance

**ADD INSURANCE**   EDIT INSURANCE   REMOVE INSURANCE

Insured Name	Type	Effective Date	Expiration Date	Carrier	Payer ID	Policy #	Document Name	Status	Comments
Elaine Test	Primary			CHAMPVA		1234569000		Active	<a href="#">i</a>
Elaine Test	Secondary			Medicare		AM0903456P		Active	<a href="#">i</a>

## Fixes (A-Z)

### Billing Screen

- In this release, we're removing G2061, G2062, and G2063 from the Additional Codes visit type as these are expired E/M codes. If these codes were already

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associated with an appointment, the billing remains, but because these codes are no longer used, they have been removed from the billing screen to prevent users from billing in error.

- We're updating the Time-Based Billing area of the E/M screen so that the G2211 visit complexity code remains selected when a user chooses more than 80 minutes from the time-based drop-down.

## **Patient List**

We're updating the Patient List to ensure correct results are displayed when the Insurance filter and "Include Any Match" checkbox are used together to filter the list.