Office Practicum Version 14.6.21
Release Notes

Description:	This document contains the Release Notes for OP Version 14.6.21.
Document Version:	Final V1.0
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1. Office Practicum (OP) Version 14.6.21 Release Notes

Software Release Date: 23-Aug-2017

Flu Season Information
For CDC guidelines regarding the 2017-2018 flu season, **click here**.
To access the FAQ page for the 2017-2018 flu season, **click here**.
For CDC guidelines regarding the 2016-2017 flu season, **click here**.
For Pediatrics-specific 2016-2017 flu season information, **click here**.

These Release Notes are organized according to functionality as presented in the application, which is not necessarily according to general workflow.

If an entry in these release notes is the result of a client's call to customer support and that issue was logged in our issue-tracking system, the Solution ID for that issue is included at the beginning of the solution or resolution.

Note: OP 14.6.21 includes some updates to the DB Viewer. These updates are foundational for a future release and are not fully functional. OP advises clients not to use these foundational features.

2. New Features

2.1 Non Function-Specific New Features

There are no new features in this release that impact the overall application.

2.2 Function-Specific New Features

There are no new features in this release that impact a specific function.

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3. Improved Functionality

3.1 Non Function-Specific Improved Functionality

There is no improved functionality in this release that impacts the overall application.

3.2 Function-Specific Improved Functionality

3.2.1 Tools / QIC (MU Calculator)

Function:	Current versions of OP 14 include report bundles for PCMH 2011 and PCMH 2014 in the QIC (MU Calculator). The NCQA has updated their standard from 2014 to 2017. The QIC in OP 14 needs to support PCMH 2017 reports.
Solution:	Enhanced the software by adding support for 2017 PCMH in the QIC. These enhancements also include adding all necessary new PCMH 2017 report groups and measures and copying and/or modifying reports from existing versions of PCMH as necessary. This includes creating a new report group for each standard PCMH Concept (AC, CC, CM, KM, and QI) and adding all appropriate Measure Groups to each Report Group. These enhancements include the addition of the PCMH Custom tab. This tab replaces the existing PCMH 2011 Custom tab and the PCMH 2014 Custom tab. After clicking the PCMH Custom tab, the end user selects either 2011, 2014 or 2017 from the Standards dropdown. OP 14 then lists the Custom Reports tabs down the left side of the report grid. The end user accesses the PCMH 2017 reports by clicking on the Reports tab in the QIC and then clicking the Report Group dropdown arrow. The PCMH 2017 Report Groups are:

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- PCMH 2017 AC Concepts
- PCMH 2017 CC Concepts
- PCMH 2017 CM Concepts
- PCMH 2017 KM Concepts
- PCMH 2017 QI Concepts

Note: Some reports have their own radio buttons and checkboxes that allow the end user to filter the report on optional criteria. These are indicated parenthetically after the report description.

PCMH 2017 Custom Reports

PCMH 2017 Custom Reports include:

- AC02: Reports on the allotment and usage of same-day appointment minutes.
- AC04: Reports on the amount of time it takes the Practice to respond to their patients. This report includes the following options:
  - Message Response Times: Telephone; Web Portal
  - Received: During Office Hours; After Office Hours; Any Time
- AC11: Reports on the number of times patients see their PCPs.
- CC06: Reports on the number of referrals to a specialist. This report includes the following options:
  - Group by: Specialty, Provider
- KM06: Reports on the diagnosis codes of highest frequency using ICD-10 codes. This report includes both episodic and chronic problems. This report includes the following options:
  - Source: Encounters; Problem List

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- KM08: Reports on the preferred methods the Practices uses to contact their patients. This report includes the following options:
  - Contact Purpose: Medical; Reminder; Recall; Billing; General; Portal
- KM09/10: Reports on a selection of demographic-related information. This report includes the following options:
  - Primary Language; Ethnicity; Race

PCMH 2017 Reports

All of these reports now include the Location: All checkbox or the end user can select a specific Location.

Note: Some of these measures are copied from previous PCMH reports, some are copied and modified, and some are new reports for PCMH 2017.

Reports in the PCMH 2017 AC Concepts Reports

- Measure Group AC11: Reports for a given time period the number of visits provided by using Telehealth (data in the Visit Info field must not be blank).

Reports in the PCMH 2017 CC Concepts Reports

- NQF 5A6, Measure Group CC02: Newborn screens performed
- Measure Group CC11: Closing the referral loop: receipt of specialist report
- Measure Group CC11: Referral response before flag date

Reports in the PCMH 2017 CM Concepts Reports

- NQF 4A6, Measure Group CM02: Under care management

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	• NQF 4A6, Measure Group CM05: Care plan communicated Reports in the PCMH 2017 KM Concepts Reports • NQF 901, Measure group KM01: Maintain up-to-date problem list • NQF 0418, Measure Group KM03: Screening for clinical depression and follow-up plan • Measure Group KM05 o Oral health assessed o Primary Caries Prevention Intervention, Ages 1-3 • Measure Group KM07: Assess social determinants of health • NQF 7, Measure Group KM14: Medication reconciliation, inbound care transitions, 2014 Stage 2 • NQF 902, Measure Group KM15: Maintain active medication list • NQF 4C4, Measure Group KM16: Medication list reviewed for 4C4 • NQF 4C5, Measure Group KM17: Medication list reviewed for 4C5 • Measure Group KM18: E-Prescribe controlled substance, checked PMP Reports in the PCMH 2017 QI Concepts Reports This PCMH 2017 QI is a miscellany of reports from standard measures and programs. This report group includes two new reports that Practices may find particularly useful. They are: • ASQ Survey: Two by age 3 • M-Chat Survey: Two by age 3 *Measure Group: Care Coordination* • NQF 6B1: Newborn care coordination • Urgent care use • Urgent care excess use

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	• Emergency department excess use *Measure Group: Chronic/Acute Care* • NQF 0108_b: ADHD: Follow-up care for children prescribed ADHD medication, follow-up • NQF0108_a: ADHD: Follow-up care for children prescribed ADHD medication, initial • NQF 0069: Appropriate treatment for children with URI • NQF 0060: Hemoglobin A1c test for pediatric patients • NQF 0047: Asthma pharmacologic therapy • NQF 0036: Use of appropriate medications for asthma • NQF 0002: appropriate testing for children with pharyngitis • NQF 0001, PQRI 64: Asthma assessment *Measure Group: Immunizations* • NQF H009: Adolescent immunizations: Meningococcal 11-13 years • NQF H010: Adolescent immunizations: Meningococcal 16-18 years • NQF H011: Adolescent immunizations: Adolescent tetanus • Adolescent immunizations: Adolescent Meningococcal/Tetanus by 13 • HPV immunization completed by 13 years • HPV immunization completed by 18 years *Measure Group: Preventive Care* • NQF 0028: Tobacco use: Screening and cessation intervention • NQF 0024_i: Physical activity counseling for adolescents • NQF 0024_h: Nutrition counseling for adolescents • NQF 0024_g: BMI for adolescents

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	• NQF 0024_f: physical activity counseling for children • NQF 0024_e: Nutrition counseling for children • NQF 0024_d: BMI for children • NQF 0024_c: Physical activity counseling for children/adolescents • NQF 0024_b: Nutrition counseling for children/adolescents • NQF 0024_a: BMI for children/adolescents • Primary Caries prevention intervention as offered by PCPs • Children who have dental decay or cavities • Survey ASQ: two by age 3 • Survey M-CHAT: Two by age 3 • Well visits during measurement period (0-15 months) • Well visit during calendar year (3-6 years) • Well visit during calendar year (12-21 years)

Function:	For Practices that focus on PCMH, OP 14 needs to include Care Coordinator in QIC reports.
Solution:	Enhanced the software by adding the Care Coordinator field to the Patient List / Description subtab under the Reports tab in the QIC. With this enhancement, if Care Coordinator information is added to the Patient Register / Coord Care tab (under Descriptor), OP 14 includes that data in all PCMH-related reports in the QIC.

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4. Resolved Issues

4.1 Non Function-Specific Resolved Issues

There are no resolved issues in this release that impact the overall application.

4.2 Function-Specific Resolved Issues

4.2.1 Tools / Diagnostic Test Import and Patient Chart / Diagnostic Tests

Issue:	When the end user selected a test in the OP Diagnostic Test Import Utility (DTI), created a Requisition for the selected test, and then opened the next test before the grid refreshed. OP 14 renamed and overwrote the subsequent test the end user selected.
Resolution:	Updated the software so that OP 14 does not undertake any action while it is creating a Requisition for a selected test. This ensures that subsequent tests that the end user selects while the Requisition is being created are not renamed or overwritten.

4.2.2 Patient Chart/Medications

Solution ID: 00008454

Issue:	When a practice sent out multiple scripts to the same pharmacy, OP 14 displayed the error message, "[CxnException] No National Pharmacy ID supplied" for the second script.
Resolution:	Updated the software so that OP 14 commits any database transaction connected to the medications grid. This ensures that all changes occur to the medication when the end user clicks the Send button. After the end

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	user clicks the Send button, OP 14 successfully transmits multiple scripts to the same pharmacy without displaying an error message.

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5. Known Critical Issues

There are no known issues in this release.

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