December 2024 Release Notes

Version 3.48.1

Billing updates for 2025

To support the updates to the Current Procedural Terminology (CPT) codes for 2025, we made several changes to the Billing and Charge Capture screens, effective for appointments on or after January 1, 2025.

New billing code for genetic counseling services

Code 96041 will replace code 96040 to meet the updated reporting requirements for medical genetics and genetic counseling services.

96041 Genetic Counseling will be displayed under the **Additional Codes** section (callout 1) when selecting codes during the billing process.

After selecting **96041 Genetic Counseling**, a drop-down menu (callout 2) will appear so you can choose from the following time-based units:

- 16-45 minutes: 1 unit (default selection)
- 46-75 minutes: 2 units
- 76-105 minutes: 3 units
- 106-135 minutes: 4 units

NOTE: You must select a time-based unit to save the billing code.

shle Specify Billing Code			+ requ	ired
ashb				BR
5440 1				-
E/M Code				
m:	Additional Codes		Modifiers For Additional Codes	
12/02	G2010 Remote image submit by	pt	-24 Unrelated Evaluation and Management Service by the same physician during a	
	99459 Pelvic examination, practi	ce expense	-25 Significant, separately identifiable E/M service by the same physician, same DOS	
t Time	G0447 Behavioral counseling for obesity 15 min 99072 Additional supplies and staff time during a Public Health Emergency due to respiratory disease		57 Decline for Standardy elementative Erim service by the same physical same UOS 56 Staged or related procedure or service by the same physical during the postoperative period 59 Decline throne during service performed on the same day	aft
MAUL				
1/202				
0PM DOAM	99421 Digital E/M SVC 5-10 min		-XE Separate Encounter: A service that is distinct because it occurred during a separate	
1/202	99422 Digital E/M SVC 11-20 mi	n	-XP Separate Practitioner: A service that is distinct because it was performed by a	
OPM	99423 Digital E/M SVC 21+ min	•	different practitioner	
MAOC	96041 Genetic Counseling	2	-XS Separate Structure: A service that is distinct because it was performed on a separate organ/structure	
1/202 0AM	16-45 minutes: 1 unit	~	-XU Unusual Non-Overlapping Service: The use of a service that is distinct because it	
BOAM	16-45 minutes: 1 unit	on/Preventive med counseling	does not overlap usual components of the main service (reporting the same procedure multiple times)	
1/202	46-75 minutes: 2 units	on/Preventive med counseling	-78 Unrelated return to OR for related procedure by the same physician during	
5PM ISAM	76-105 minutes: 3 units	on/Preventive med counseling	-93 Audio-Only Synchronous Telemedicine	
	106-135 minutes: 4 units	on/Preventive med counseling	-95 Synchronous Telemedicine	
	UC.	e medicine, 18-39 years	-GC Service has been performed in part by Resident under the direction of a teaching physician	
iout 6	99386 Initial comprehensive prev		-GT Via interactive audio and video telecommunication systems	
lent :	 99387 Initial comprehensive preventive medicine, 65 years and older 		-Q6 Service furnished by a locum tenens physician -1P Performance Measure Exclusion Modifier Due to Medical Reasons	
NEW F	99395 Periodic comprehensive p	preventive medicine. 18-39 years	-2P Performance Measure Exclusion Modifier Due to Patient Choice	
	99396 Periodic comprehensive p		-3P Performance Measure Exclusion Modifier Due to System Reasons -8P Performance Measure Reporting Modifier - Action Not Performed, Reason Not	
ent N		reventive medicine 65 years and	-or renormance measure reporting mounter - Action Not Performed, Reason Not	-

Once the code is saved, the patient's **Charge Capture Report** will include **96041 Genetic Counseling**. The report will display the code, selected time-based unit, and description for the captured charges.

Additional billing code added for COVID-19 vaccines

When administering any of the COVID-19 vaccines listed below from the MAR > Nursing Care tab, the system will automatically record **code 90480** alongside the corresponding vaccine billing code in the **Charge Capture Report** (callout 1):

Billing Code	Vaccine			
91320	COVID Vaccine (Pfizer) (PF) IM (12 yrs & older)			
91318	COVID vaccine (Pfizer) (PF) IM (6 months thru 4 yrs) (EUA)			
91319	COVID vaccine (Pfizer) (PF) IM (5 yrs thru 11 yrs) (EUA)			
91322	COVID vaccine (Moderna) (PF) IM (12 yrs & older)			
91321	COVID vaccine (Moderna) (PF) IM (6 months thru 11 yrs) (EUA)			
91304	COVID vaccine (Novavax) - adjuv-matrix (PF) IM (12 yrs & older) (EUA)			
Patient: Test Nov255 Primary Ins.: Attending: CvpphIn1 DOB: 02/02/1939 Secondary Ins.: Billing: CvpphIn1 MRN: Nov25Test1 Practice: Onc Hem of MSH Location: Fremont RELEASE DRUG CODES Status: Needase				
Captured Charges Code Count Description ICD NDC Comments 91321 1 COVID vaccine (Moderna) (PF) IM (6 months thru 11 yrs) (EUA). 25 mcg DW = Dispensed/Wasted DW = Dispensed/Wasted Pending Review Code Count Description ICD Comments 0 COVID vaccine (Moderna) (PF) IM (12 yrs & older) Billing unit and ordering unit differ.				
Medication Administratic	Min.* Drug Waste Route Admin Code Description 0 COVID vaccine (Modema) (PF) IM (6 months thru 11 yrs) (EUA) 25 mcg 0 mcg intramuscularly 90480*1 ADMN SARSCOV2 VACC 1 DOSE			
* The number of elapsed minutes	0 COVID vaccine (Moderna) (PF) IM (12 yrs & older) 0.5 mL 0 mL intramuscularly 90480*1 ADMN SARSCOV2 VACC 1 DOSE s between start and stop time minus any minutes when there was simultaneous administration with higher RVU's			



Removal of depreciated E/M Codes

In compliance with the 2025 CPT Code Set guidelines, several outdated E/M Codes will be removed from the Billing Screen to ensure adherence to the latest coding standards and eliminate the use of obsolete codes.

Key updates

- 1. The following E/M Codes will no longer be available for selection under the **Additional Codes** section for appointments on or after Jan. 1, 2025:
 - 96040
 - 99441
 - 99442
 - 99443
 - G2012
- 2. For appointments with dates of service (DOS) **before Jan. 1, 2025**, these codes remain visible, accessible, and selectable in the Billing Screen and Charge Capture Report.
- 3. Providers can continue to make corrections to these codes in a patient's Charge Capture Report within the following timelines:
 - Additions: Up to 12 months from DOS
 - Corrections: Up to 24 months from DOS
 - Billing Revisions: Up to 72 months from DOS

Improved clinical notes behavior to prevent unexpected lockouts

We're addressing the behavior that impacted users preparing clinical notes for upcoming patient visits.

Previously, users encountered a warning message when attempting to complete a draft note. The message stated that the editing session was canceled by another user and all edits would be lost unless copied to another application. This message appeared intermittently, even though no other users were accessing or editing the note.

With this update, the system will verify the clinical note session information and ensure that the same user who authored the note can return to edit without

triggering a lockout. This enhancement streamlines the editing process and eliminates interruptions, improving the overall user experience.

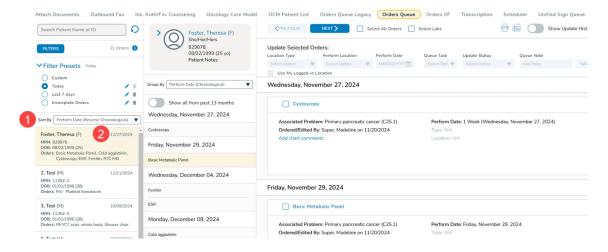
Enhancements to the Orders Worklist

We're introducing updates to the new Orders Queue to improve role-based workflows and streamline tracking, ensuring that orders are completed efficiently and on time.

Prioritize orders that require immediate action

In the Orders Worklist, when sorting by **Perform Date (Reverse Chronological)** or **Perform Date (Chronological)**, the date displayed on the patient card is the earliest perform date for the batch of orders for that patient (callouts 1 and 2).

This enhancement can help schedulers focus on the most urgent tasks and minimize the risk of missing critical orders.



Cleaner queue with suppressed regimens

To reduce clutter, regimens marked as **suspended**, **discontinued**, or **held** will no longer appear in the queue.

This change simplifies workflows for users, such as clinical pharmacists, and reduces unnecessary reviews of non-active regimen orders.

NOTE: Suspended and discontinued regimens already present in the queue will not be removed. However, moving forward, these regimens will no longer populate the queue.