What's New in OfficeMate/ ExamWRITER 12.0.3

OfficeMate®
ExamWRITER®

Eyefinity announces the newest version of OfficeMate/ExamWRITER! In addition to resolving known issues in previous versions of OfficeMate/ExamWRITER, this updated version improves upon OfficeMate/ExamWRITER's robust attributes and offers useful new features and expanded functionality. For additional information on OfficeMate/ExamWRITER features and training, visit www.eyefinity.com.

This document outlines the changes between OfficeMate/ExamWRITER 12.0 and 12.0.3.

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For more detailed information on how to use the new features in OfficeMate/ ExamWRITER 12.0.3 see the *OfficeMate User's Guide* and *ExamWRITER User's Guide* and schedule additional training with Training & Education.

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NOTES

- OfficeMate/ExamWRITER 11.1 and later has achieved ONC HIT 2014 Edition Complete EHR certification, which designates that the software is capable of supporting eligible providers with meeting the Stage 1 and Stage 2 meaningful use measures required to qualify for funding under the American Recovery and Reinvestment Act (ARRA). OfficeMate/ExamWRITER 11.1 was certified by ICSA Labs, an Office of the National Coordinator-Authorized Certification Body (ONC-ATCB), and is compliant in accordance with applicable criteria adopted by the Secretary of Health and Human Services (HHS).
- For a complete list of system specifications, go to www.eyefinity.com/dam/eyefinity/documentation/OM/SystemSpecifications.pdf.
- If you are using custom templates, then the information in the templates that you previously created may need to be reselected and reprocessed. Due to ICD-10 menu changes throughout ExamWRITER, you may need to open the templates that you previously created in ExamWRITER and reselect and reprocess all of the diagnosis information in those templates.
- When you initially installed ExamWRITER, the most common procedure codes were associated with products and services for you. When you upgrade ExamWRITER, new procedure codes are added to your database, but new products and services are not. To use any new procedure codes, you must create new services in the Products window and select the appropriate procedure code from the **CPT** drop-down menu. This ensures proper billing and automates level II CPT codes for PQRS.
- This document was last updated on August 28, 2018.

Installing OfficeMate/ExamWRITER 12.0.3 SP12

For more information about what's in this service pack, go to "What's New in Service Pack 12" on page 74.

NOTE	You must log in as a user with local administrator rights to install software on the server and each workstation.

1. Ensure that you are already using OfficeMate/ExamWRITER 12.0. If you are not using this version, you must first upgrade to it at Eyefinity.com.
2. Ensure that you have a backup copy of your data. For more information on backing up your data, refer to the *Backing Up & Restoring Data* document.
3. Download OfficeMate/ExamWRITER 12.0.3 SP12 at Eyefinity.com and save it to the OfficeMate Updates folder on your network. If you do not have an OfficeMate Updates folder on your network, create one now.
4. Verify that you have Microsoft .NET Framework version 4.6 installed on each workstation.

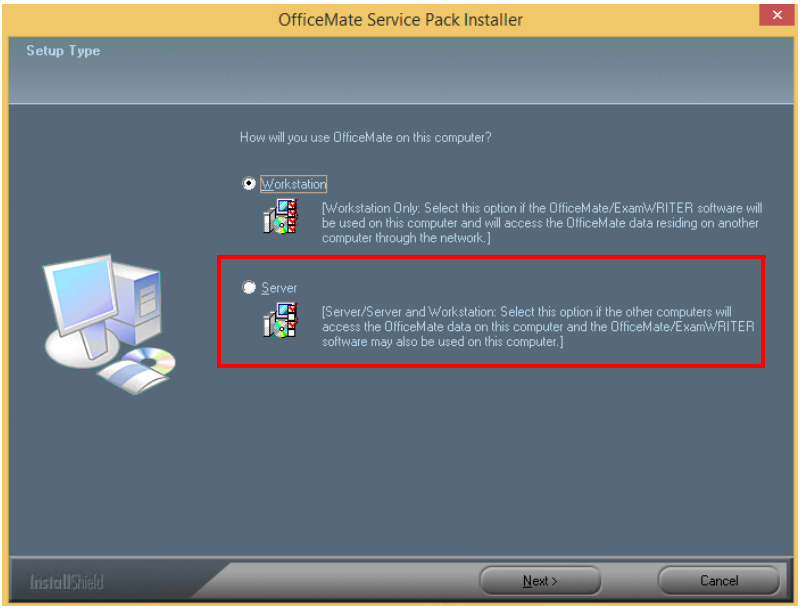
NOTES	• For instructions on how to verify your .NET Framework version, go to https://docs.microsoft.com/en-us/dotnet/framework/migration-guide/how-to-determine-which-versions-are-installed. • To download .NET Framework version 4.6, go to https://www.microsoft.com/en-us/download/details.aspx?id=48130.

5. Ensure that OfficeMate/ExamWRITER is closed on *all* workstations.
6. Ensure that all of your workstations are connected to the Internet.
7. On your server (or your main computer), log in as a local administrator and navigate to your **OfficeMate Updates** folder on your network. If your download folder has a different name, navigate to that folder.
8. Double-click **12.0.3_SP12_Installer.exe**.

   The installer opens and begins running.
9. Select the **Server** radio button.

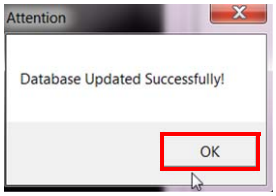
   Select this option if the other computers access the OfficeMate data on this computer and the OfficeMate/ExamWRITER software is also used on this

computer. In short, select this option only for the server in your practice. You will only select this option during one installation (on the server).

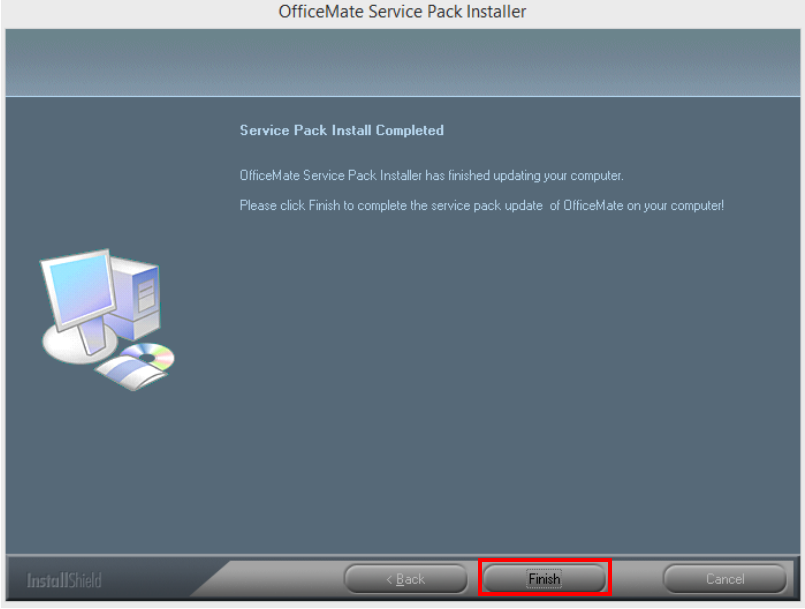


10. Click **Next**.
11. Click **OK** when you receive the Database Updated Successfully message.

NOTE	If your database update is unsuccessful, contact Customer Care at 800.942.5353.



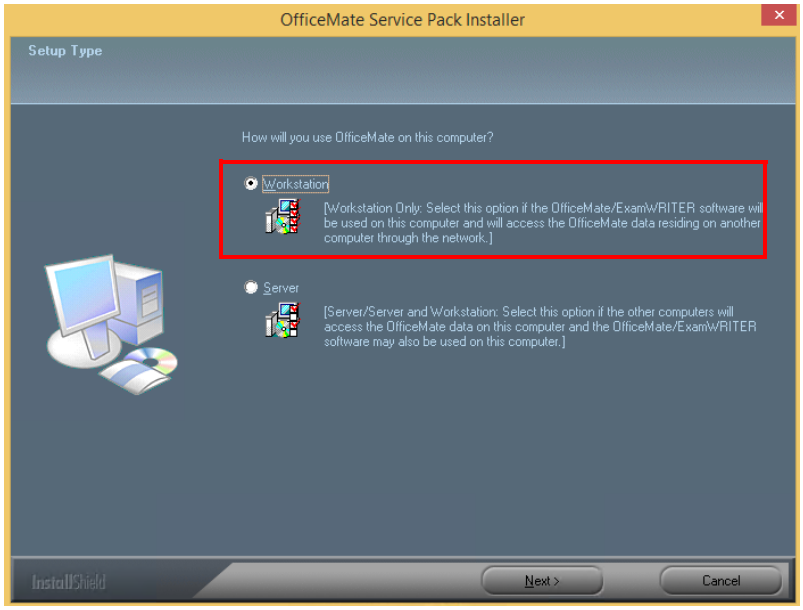
12. Click **Finish** when the installation is complete.



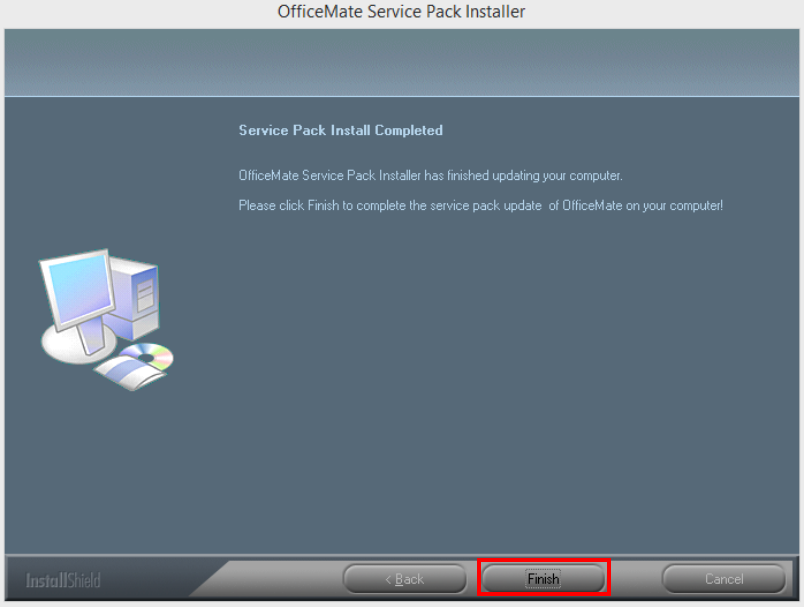
13. On a workstation, log in as a local administrator and navigate to your **OfficeMate Updates** folder on your network. If your download folder has a different name, navigate to that folder.
14. Double-click **12.0.3_SP12_Installer.exe**.

    The installer opens and begins running.
15. Select the **Workstation** radio button.

    Select this option if the OfficeMate/ExamWRITER software is used on this computer and accesses the OfficeMate data residing on another computer through the network. In short, select this option for all the nonserver workstations in your practice.



16. Click **Next**.
17. Click **OK** when you receive the Database Updated Successfully message.
18. Click **Finish** when the installation is complete.



19. Repeat steps 13–18 to install OfficeMate/ExamWRITER 12.0.3 SP12 on each additional workstation in your office.

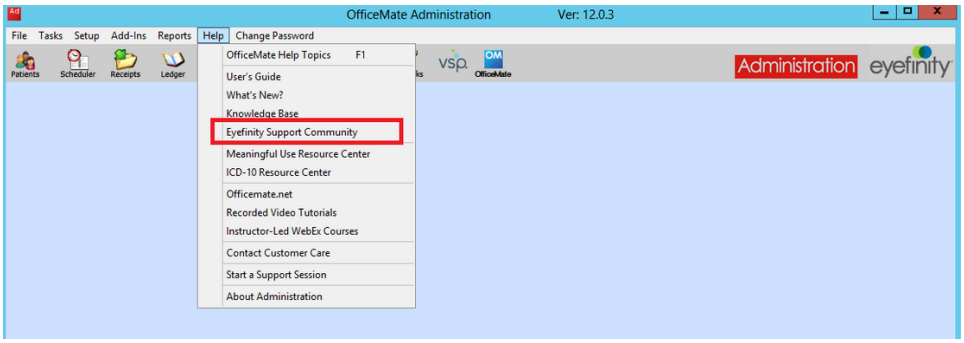
What's New in Service Pack 1

OfficeMate/ExamWRITER 12.0.3 service pack 1 (SP1) was released on September 14, 2015. This service pack includes the following items:

- Eyefinity Support Community, 8
- OfficeMate Enhancements, 8
- ExamWRITER Enhancements, 11
- Secure Messaging Fixed Issues, 14
- OfficeMate Fixed Issues, 15
- ExamWRITER Fixed Issues, 16

Eyefinity Support Community

You can now easily access the new Eyefinity Support Community directly from within OfficeMate, Administration, and ExamWRITER.



OfficeMate Enhancements

OfficeMate 12.0.3 SP1 includes enhancements to the following areas:

- CLIA Numbers on Insurance Claims, 8
- Business Insights Dashboard, Powered by The EDGE, 10

CLIA Numbers on Insurance Claims

Including CLIA numbers on insurance claims, when applicable, reduces claim rejections and ensures that you receive your insurance reimbursements more quickly.

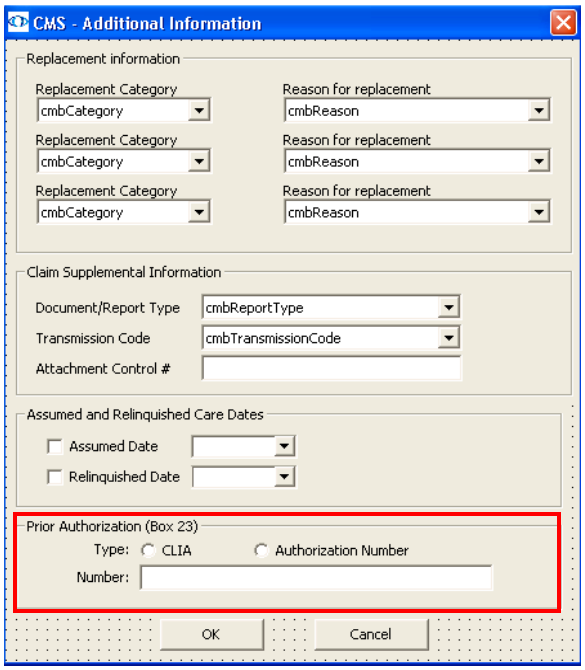
You now have the ability to indicate that the number in box 23 on CMS 1500 claim forms is a CLIA (Clinical Laboratory Improvement Amendment) number.

If you are upgrading to OfficeMate 12.0.3 and you have *existing* insurance claims that have been created, but not yet sent, box 23 will default to include the prior authorization number. If existing or new insurance claims need to include a CLIA number, instead of a prior authorization number, click the **Addl Info** button on the CMS 1500 claim form, select the **CLIA** radio button, and record the CLIA number. This number will appear in box 23 on the claim and the X4 qualifier will be correctly populated in the ANSI file in loop 2300.

New claims will display an error message in the Third Party Processing window to remind you to indicate whether the number in box 23 is a CLIA or prior authorization number. Click the **Addl Info** button on the CMS 1500 claim form, select the appropriate box 23 radio button, and record the CLIA number, if necessary.

NOTES

- You can no longer edit box 23 directly on the CMS 1500 form. If you need to edit the number in this box, click the **Addl Info** button on the CMS 1500 form.
- In OfficeMate 12.0.3 SP3, a fix was made that enables you to indicate that the number in box 23 on CMS 1500 claim forms is a CLIA number, even on non-Medicare insurance claims. Go to "OfficeMate Fixed Issues" on page 18 for more information.
- In OfficeMate 12.0.3 SP4, a fix was made that enables you to indicate that *no* prior authorization number should appear in box 23 on CMS 1500 claim forms. Go to "No Prior Authorization Numbers on Insurance Claims" on page 20 for more information.



Business Insights Dashboard, Powered by The EDGE

The ability to quickly and easily see a dashboard, powered by The EDGE, that displays the important financial details of your practice can help you make the best business decisions for your practice. Viewing a snapshot of your revenue and receivables has never been easier!

You can now view a business insights financial dashboard, powered by The EDGE, directly from within OfficeMate. This dashboard gives you an overview of month-to-date and year-to-date total clinic and optical revenue, revenue per exam, capture rates, average frame sales, and outstanding receivables in a very easy-to-understand graphical format.

NOTES

- Beginning in OfficeMate 12.0.3 SP5, the security access to this integration is controlled through the Administration product > Reports module > Business Insights Dashboard task. If staff members have security rights to this specific task, then they will have access to this integration. For detailed instructions on how to limit access to this integration, read article #000010137 in the Eyefinity Support Community.
- It will take up to 24 hours after you upgrade to OfficeMate 12.0.3 before you will be able to see data in your business insights dashboard.

To access an interactive view of your financial dashboard, click the new **Dashboard** icon in the OfficeMate or Administration main window.

Watch a training video on our YouTube channel about how to use the new business insights dashboard.

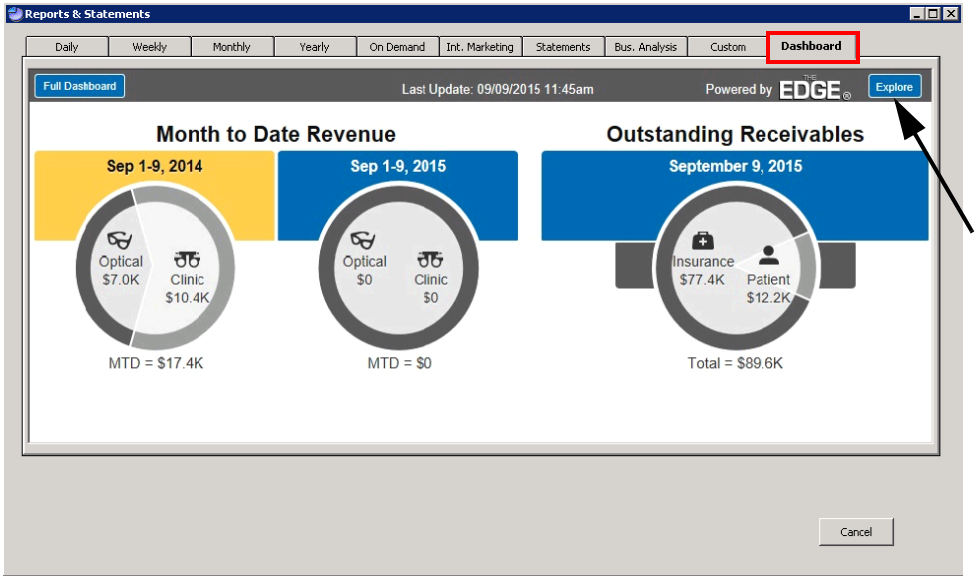
NOTE You must have Microsoft Internet Explorer 9 or above installed to view your personalized business reports from the Dashboard icon.

Click the blue **Explore** button to learn more about The EDGE, or, if you are a current EDGE subscriber, to access your business's financial data.

To understand the terms and values used in the new business insights dashboard, powered by The EDGE, view knowledge articles #000012846 and #000012839 in the Eyefinity Support Community.

To access a static view of your financial dashboard from the Reports & Statements window, click the **Dashboard** tab.

NOTE	If you have security access to the business insights financial dashboard then the Dashboard tab on the Reports & Statements window will be the default tab that will open when you open this window.



Click the blue **Explore** button to learn more about The EDGE, or, if you are a current EDGE subscriber, to access your business's financial data.

ExamWRITER Enhancements

ExamWRITER 12.0.3 SP1 includes enhancements to the following areas:

- Meaningful Use, 11
- CMS Quality Reporting, 12
- Patient Search, 13

Meaningful Use

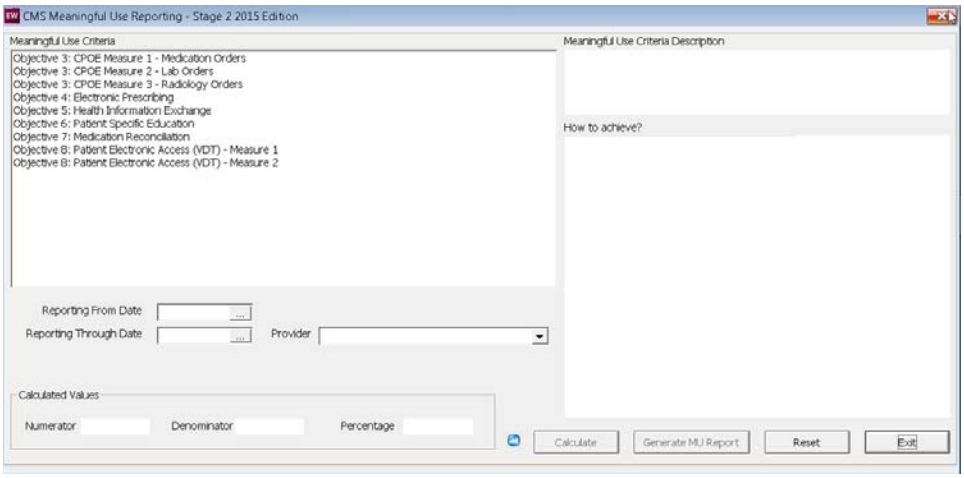
CMS made changes to the meaningful use program in 2015. If you are attesting to meaningful use stage 2 in 2015, you will now be able to gather appropriate information and data from ExamWRITER.

NOTE	Do not use the meaningful use ExamWRITER enhancement outlined below until the meaningful use stage 2 2015 final ruling is approved.

A new CMS Meaningful Use Reporting - Stage 2 window includes updated 2015 information about Core Measure #7 Patient Electronic Access #2. Previously, more than 5 percent of all unique patients seen by the EP needed to meet the criteria to achieve the measure. Now, only *one or more* unique patients seen by the EP need to meet the criteria to achieve the measure.

In addition, Core Measure #17 Use Secure Electronic Messaging has been removed from the new CMS Meaningful Use Reporting - Stage 2 window because in 2015, it is no longer a percentage-based measure. Instead, you can achieve this measure by fully enabling the secure messaging functionality in OfficeMate/ExamWRITER.

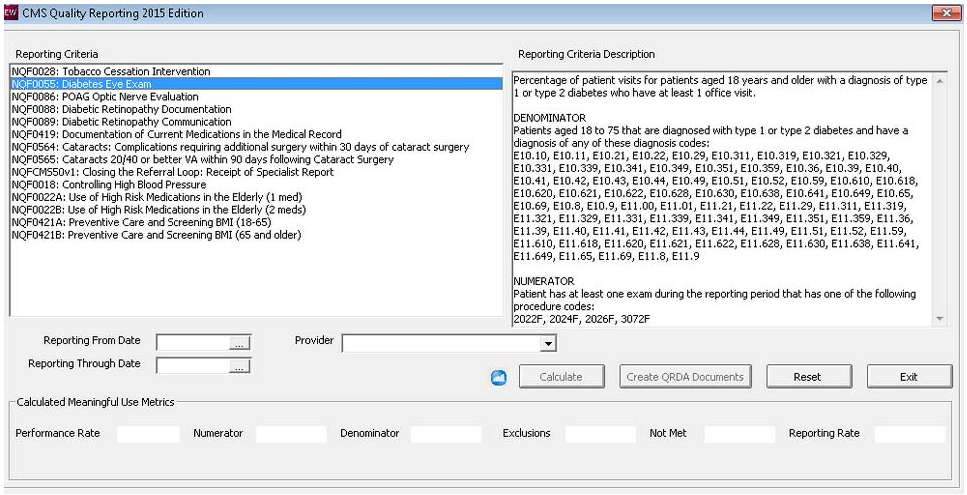
To open the new CMS Meaningful Use Reporting window for 2015, click **Reports**, select **CMS Meaningful Use Reporting - Stage 2**, and then select **CMS Meaningful Use Reporting - 2015 Edition**. If you are attesting to meaningful use stage 2 in 2015, gather information using this new window.



CMS Quality Reporting

A new CMS Quality Reporting window includes updated 2015 information. The reporting criteria for meeting the NQF0086, NQF0088, and NQF0089 measures has decreased from two exams in the reporting period to one exam in the reporting period. In addition, the NQF0055, NQF0086, NQF0088, NQF0089, NQF0564, and NQF0656 measures include updated descriptions with ICD-10 code references instead of ICD-9 code references.

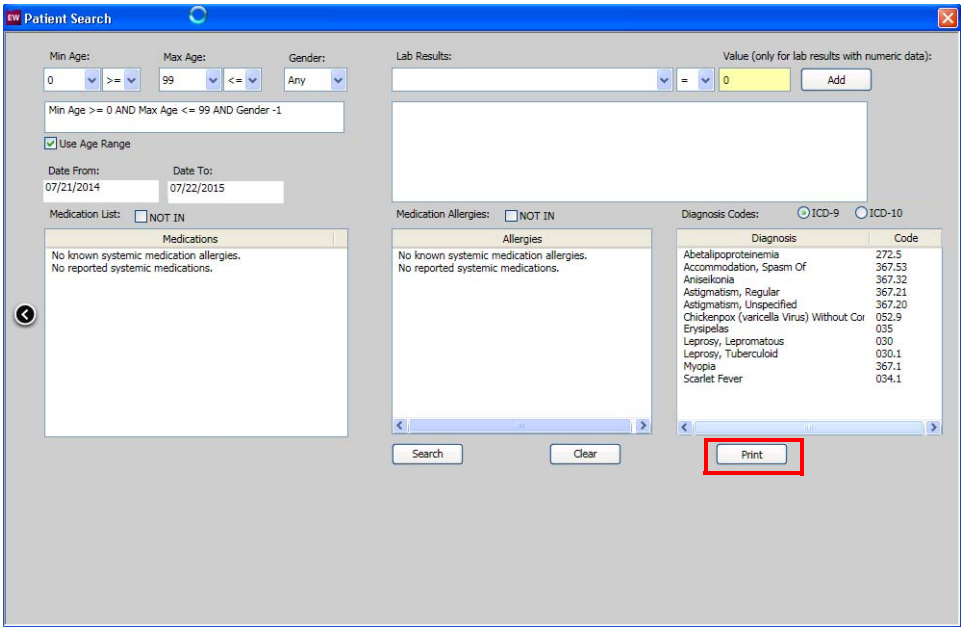
To open the new CMS Quality Reporting window for 2015, click **Reports**, select **CMS Quality Reporting**, and then select **CMS Quality Reporting 2015 Edition**. If you are attesting to meaningful use stage 2 in 2015, gather your CQM data using this new window.



Patient Search

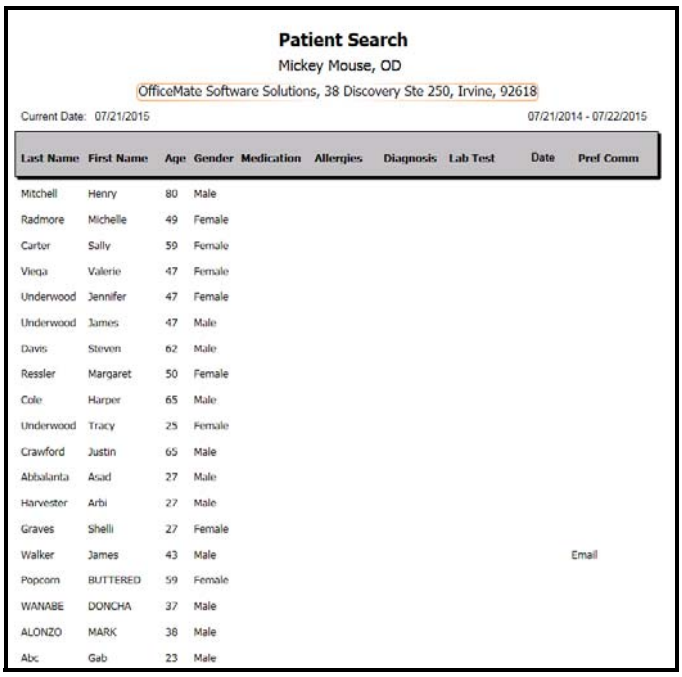
Printing your search results from your attestation reporting period can be beneficial if you are ever audited as part of the EHR Incentive Program.

You now have the ability to print, export, and save your patient search results. After you generate patient search results, click the **Print** button and select a provider.



Printing the new Patient Search report can help you attest to meeting meaningful use Core Measure #3 (stage 2) by demonstrating that 80% of the unique patients that you saw during your attestation period were maintained within ExamWRITER or Core Measure #7 (stage 1) by demonstrating that 50% of the unique patients that you saw during your attestation period were maintained within ExamWRITER. The Patient Search report includes the following details:

- Provider's name
- Company's name and address
- Date range for which the search was completed
- Date that the report was printed
- Patient search results



Patient Search

Mickey Mouse, OD

OfficeMate Software Solutions, 38 Discovery Ste 250, Irvine, 92618

Current Date: 07/21/2015 07/21/2014 - 07/22/2015

Last Name	First Name	Age	Gender	Medication	Allergies	Diagnosis	Lab Test	Date	Pref Comm
Mitchell	Henry	80	Male						
Radmore	Michelle	49	Female						
Carter	Sally	59	Female						
Viega	Valerie	47	Female						
Underwood	Jennifer	47	Female						
Underwood	James	47	Male						
Davis	Steven	62	Male						
Ressler	Margaret	50	Female						
Cole	Harper	65	Male						
Underwood	Tracy	25	Female						
Crawford	Justin	65	Male						
Abbalanta	Asad	27	Male						
Harvester	Arbi	27	Male						
Graves	Shelli	27	Female						
Walker	James	43	Male						Email
Popcorn	BUTTERED	59	Female						
WANABE	DONCHA	37	Male						
ALONZO	MARK	38	Male						
Abc	Gab	23	Male						

Secure Messaging Fixed Issues

The following issue is fixed in the Secure Messaging Portal in version 12.0.3:

- Newly created CDAs sent through the Secure Messaging Portal now display the correct patient name and demographic information in the patient's portal account.

OfficeMate Fixed Issues

OfficeMate 12.0.3 SP1 fixes issues in the following areas:

- ICD-10 Codes, 15
- Fee Slips, 15
- Rx Orders, 15
- Ledger, 15
- Inventory, 15
- Insurance Claims, 15
- Reports, 16
- Eyefinity EHR Integration, 16

ICD-10 Codes

- The 38 invalid ICD-10 codes that were present in OfficeMate 12.0.2 are now deactivated so that they cannot be accidentally recorded on fee slips.

Fee Slips

- Taxes are no longer added to insurance charges when discounts are applied and when the insurance carrier is set up as tax exempt.

Rx Orders

- You can now successfully change the status of an eyewear order to being received without removing the Rx notes.
- Prescriptions are now correctly printed using the printer that you specified in the Location Maintenance window in Administration.

Ledger

- Patients' insurance carriers now properly display on the Patient Ledger when you open the ledger from the Patient Demographics window.
- Double-clicking the Post and Record buttons while posting or transferring insurance charges no longer results in duplicate entries in the Patient Ledger.

Inventory

- You are now able to successfully print multiple barcode labels from purchase orders.
- You are now able to successfully add multiple products to an existing scan count inventory.

Insurance Claims

- Your ANSI 5010-format insurance claims are no longer rejected if there are invalid characters (periods, commas, dashes, etc.) and spaces in the referring physician's last name in Loop 2310A or in the patient's insured ID in Loop 2010.

Reports

- The Sales Tax Register report no longer includes taxes on insurance balances and adjustments when the insurance carrier is set up as tax exempt.
- You no longer receive error 217913 when selecting a frame designer series while printing an internal marketing report.

Letters

- The Physician Referral Thank You letter that you choose to print for patients in the Patient Demographic window is now successfully saved and retained.

Eyefinity EHR Integration

- If you change your password using the Sync Manager, you will no longer have to restart the Sync Service to use the new password.
- The Bridge Status Indicator in Administration now accurately reflects the connectivity status with Eyefinity EHR.

ExamWRITER Fixed Issues

ExamWRITER 12.0.3 SP1 fixes issues in the following areas:

- ICD-10 Codes, 16
- ePrescribing, 16
- Problem List Maintenance, 16
- Exam Analysis Report, 16
- Exam Dates, 17
- Impression/Retina - Vascular, 17
- Change/Add Selections, 17
- Contact Lens Orders, 17

ICD-10 Codes

- The 38 invalid ICD-10 codes that were present in OfficeMate 12.0.2 are now deactivated so that they cannot be accidentally manually recorded in exams.

ePrescribing

- You no longer receive error 5 after prescribing medications and attempting to close the ePrescribing Interface. In addition, prescribed medications are now successfully saved in exams.

Problem List Maintenance

- You no longer receive run time error -2147217865 when you attempt to maintain a patient's problem list.

Exam Analysis Report

- The Exam Analysis Report is now easier to read. It also displays up to 18 procedure codes and 18 diagnosis codes for each patient.

Exam Dates

- Exam dates in current exams no longer erroneously change to previously recorded exam dates.

NOTE	You can no longer access and modify information in the Patient Information Center window if you are viewing a previous exam. Modifying this information in previous exams was causing the exam date in the current exam to erroneously change to a previously recorded exam date. You can only access and modify information in the Patient Information Center window when you are viewing the current exam.

Impression/Retina - Vascular

- With the expanded ICD-10 code set, you can now document a patient's current use of insulin (Z79.4). Selecting this option for patients who are using insulin will assist you in the extended diagnostic coding of diabetic retinopathy. Note that you can no longer select DM Retinopathy – None, as this option is no longer relevant when using ICD-10 codes.

Change/Add Selections

- If you click the Change/Add button on a Current Information window in ExamWRITER, deselect previously selected options, and then process the updated information, you no longer receive a message that states, "NO selections have been made. Quit without Selecting?" Your changes are now properly saved, resulting in faster exam documentation/flow and correct quick coding.

Contact Lens Orders

- You can now select and add a bifocal contact lens to an order in an exam even if the add power for the lens is low, medium, or high (i.e., not a number).

What's New in Service Pack 2

OfficeMate/ExamWRITER 12.0.3 service pack 2 (SP2) was released on September 30, 2015. This service pack includes all of the enhancements and fixes in services pack 1, in addition to the following items:

- OfficeMate Fixed Issues, 17
- ExamWRITER Fixed Issues, 18

OfficeMate Fixed Issues

OfficeMate 12.0.3 SP2 fixes issues in the following areas:

- Insurance Claims, 17
- Reports, 18

Insurance Claims

- You no longer receive error 94 when creating claim files with authorizations for Gateway EDI.

Reports

- The Sales Tax Register report no longer freezes when you attempt to create it.

ExamWRITER Fixed Issues

ExamWRITER 12.0.3 SP2 fixes an issue in the following area:

- ePrescribing, 18

ePrescribing

- You are now able to successfully use the ePrescribing Interface with DrFirst's summer 2015 backend changes.

What's New in Service Pack 3

OfficeMate/ExamWRITER 12.0.3 service pack 3 (SP3) was released on October 20, 2015. This service pack includes all of the enhancements and fixes in services packs 1-2, in addition to the following items:

- OfficeMate Fixed Issues, 18
- ExamWRITER Fixed Issues, 19

OfficeMate Fixed Issues

OfficeMate 12.0.3 SP3 fixes issues in the following areas:

- Third Party Processing, 18
- Fee Slips, 19
- Patient Demographic Letters, 19
- Reports, 19

Third Party Processing

- You no longer receive an invalid ICD version code error when you record ICD-9 codes on fee slips with dates of service prior to October 1, 2015, but posting dates on or after October 1, 2015.
- You now have the ability to indicate that the number in box 23 on CMS 1500 claim forms is a CLIA (Clinical Laboratory Improvement Amendment) number, even on non-Medicare insurance claims. Go to "CLIA Numbers on Insurance Claims" on page 8 for detailed instructions on adding CLIA numbers to CMS 1500 claim forms.

Fee Slips

- You are now able to record ICD-9 codes on fee slips with dates of service on or before September 30, 2015 (even if the posting date is on or after October 1, 2015).
- You are now able to record ICD-10 codes on fee slips with dates of service on or after October 1, 2015.
- You are now able to successfully transfer charges with ICD-9 codes and a date of service prior to October 1, 2015, from one insurance carrier to another insurance carrier.
- Tool tips are now displayed when you hover your mouse cursor over individual ICD-10 codes in the Select Diagnosis Codes window. The tool tips display the complete description of the ICD-10 codes and can help you ensure that you select the correct ICD-10 code.
- Modifiers are no longer duplicated for the right and left eyes when you post open charges billed in ExamWRITER.
- If you are billing a fee slip with ICD-10 codes, the ICD-10 code QuickList Items in the Select Diagnosis Codes window are now displayed when you open the window by pressing F5 on your keyboard.
- You are now able to edit a fee slip and post the original payments on the original posting date; the posting date is no longer changed to the current date.
- If you are transferring a balance from a patient to an insurance carrier and there is no diagnosis code associated with the line item being transferred, then you will not receive a warning message about using the wrong ICD version. Instead, you will receive a warning message stating that an ICD code is missing in the Third Party Processing window.
- Inactive insurance plans are no longer erroneously populated on fee slips.

Patient Demographic Letters

- The Patient Referral Thank You letter that you choose to print for patients in the Patient Demographic window is now successfully saved and retained.

Reports

- You no longer receive error -2147467259 when attempting to print the Contact Lens Listing report.

ExamWRITER Fixed Issues

ExamWRITER 12.0.3 SP3 fixes issues in the following areas:

- Templates, 20
- Diagnosis/Procedure Coding, 20
- ePrescribing, 20

Templates

- ICD-9 codes no longer appear in the Diagnosis/Procedure Coding window in templates that you edit after October 1, 2015. Instead, you can now select ICD-10 codes in templates that you edit after October 1, 2015.
- You no longer receive error 94, "Invalid use of Null," when you attempt to use an existing template to create a new exam after October 1, 2015.

Diagnosis/Procedure Coding

- The 2027F procedure code is now correctly auto coded, when appropriate, in exams with ICD-10 codes.
- The correct ICD-10 codes for cystoid impressions, with and without cataract surgery, are now displayed in ExamWRITER and auto coded on the Diagnosis/Procedure Coding window.
- ICD-10 codes recorded in exams are no longer erroneously copied into the next patient's exams.

ePrescribing

- Therapeutic Rx information is now successfully transferred into ExamWRITER.

What's New in Service Pack 4

OfficeMate/ExamWRITER 12.0.3 service pack 4 (SP4) was released on December 16, 2015, and December 18, 2015, and then was re-released with additional corrections on December 28, 2015. This service pack includes all of the enhancements and fixes in services packs 1-3, in addition to the following items:

- OfficeMate Enhancements, 20
- ExamWRITER Enhancements, 21
- OfficeMate Fixed Issues, 25
- ExamWRITER Fixed Issues, 26

OfficeMate Enhancements

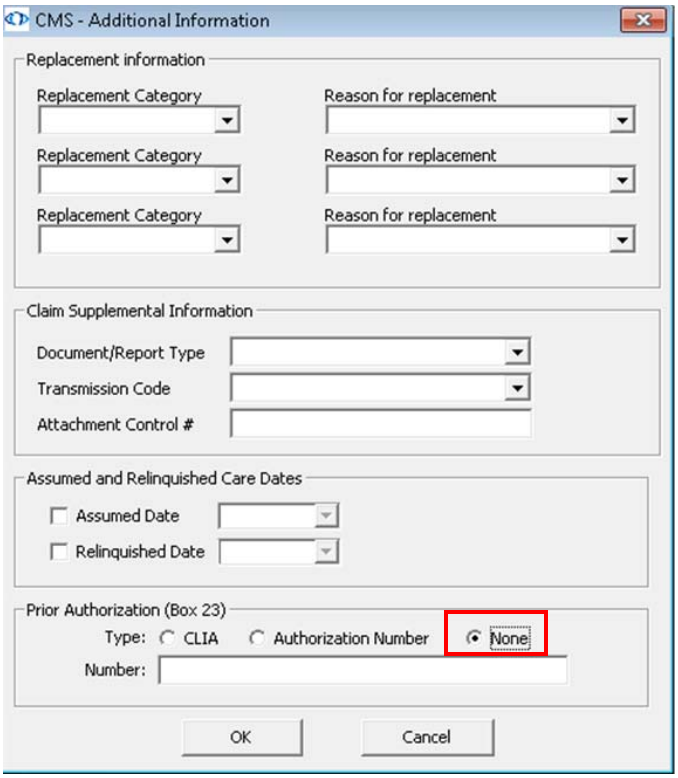
OfficeMate 12.0.3 SP4 includes enhancements to the following area:

- No Prior Authorization Numbers on Insurance Claims, 20

No Prior Authorization Numbers on Insurance Claims

You now have the ability to indicate that *no* prior authorization number (CLIA or otherwise) should appear in box 23 on CMS 1500 claim forms.

If you select the **None** radio button in the CMS - Additional Information window on the CMS 1500 claim form, then you cannot add a prior authorization number in box 23 on the form. If you do need to add a prior authorization number in box 23 on the claim form, select the appropriate authorization type and record the number. For more information about adding prior authorization numbers in box 23 on CMS 1500 claim forms, to go "CLIA Numbers on Insurance Claims" on page 8.



ExamWRITER Enhancements

ExamWRITER 12.0.3 SP4 includes enhancements to the following areas:

- Accessing Meaningful Use/Quality Reporting Calculators & Historical Information, 21
- CMS Meaningful Use Reporting, 23
- Quick MU Report Card - Stage 2, 24

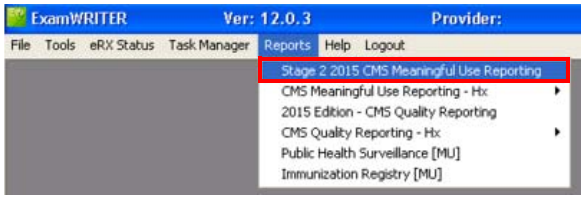
Accessing Meaningful Use/Quality Reporting Calculators & Historical Information

Improvements have been made to the meaningful use and quality reporting menus so that they are up-to-date and easier to access.

Stage 2 2015 Meaningful Use Reporting

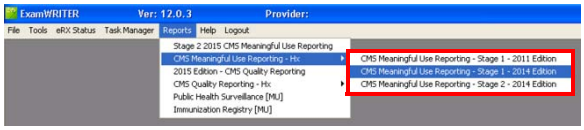
If you are a current meaningful use and quality reporting participant, you must calculate values to use in your attestation process using the 2015 Edition windows. All other windows for all other years are only for historical or auditing purposes.

All meaningful use participants must calculate values to use in the attestation process on the CMS Meaningful Use Reporting - Stage 2 2015 Edition window; this window is now updated to reflect CMS's final ruling that was published in October 2015. To access the updated CMS Meaningful Use Reporting - Stage 2 2015 Edition, click **Reports** and select **Stage 2 2015 CMS Meaningful Use Reporting**.



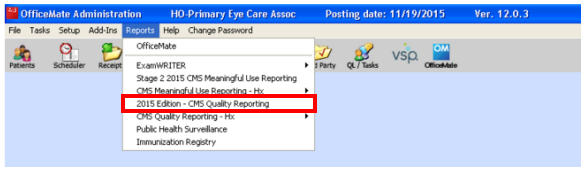
Stage 1 2011, Stage 1 2014, & Stage 2 2014 Meaningful Use Reporting

To access the CMS Meaningful Use Reporting - Stage 1 2011 Edition, CMS Meaningful Use Reporting - Stage 1 2014 Edition, and CMS Meaningful Use Reporting - Stage 2 2014 Edition windows for *historical* or *auditing* purposes, click **Reports**, select **CMS Meaningful Use Reporting - Hx**, and select the appropriate stage and edition.



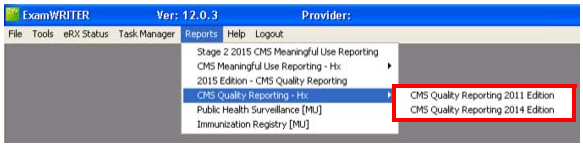
2015 Quality Reporting

All quality reporting participants must calculate values to use in the attestation process on the CMS Quality Reporting 2015 Edition window. To access this window, click **Reports** and select **2015 Edition - CMS Quality Reporting**.



2011 & 2014 Quality Reporting

To access the CMS Quality Reporting 2011 Edition and CMS Quality Reporting 2014 Edition windows for *historical* or *auditing* purposes, click **Reports**, select **CMS Quality Reporting - Hx**, and select the appropriate edition.

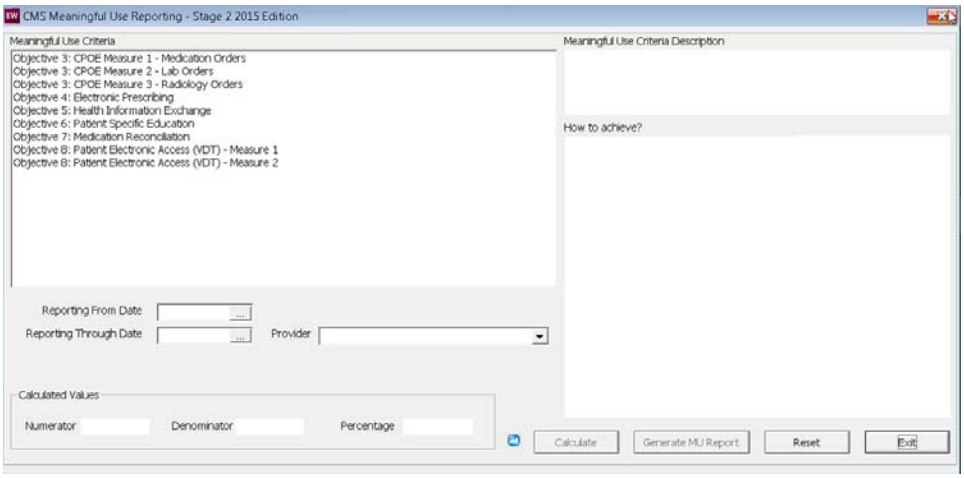


CMS Meaningful Use Reporting

If you are a stage 1 *or* stage 2 meaningful use participant, use the CMS Meaningful Use Reporting - Stage 2 2015 Edition window to calculate meaningful use values to use in your attestation.

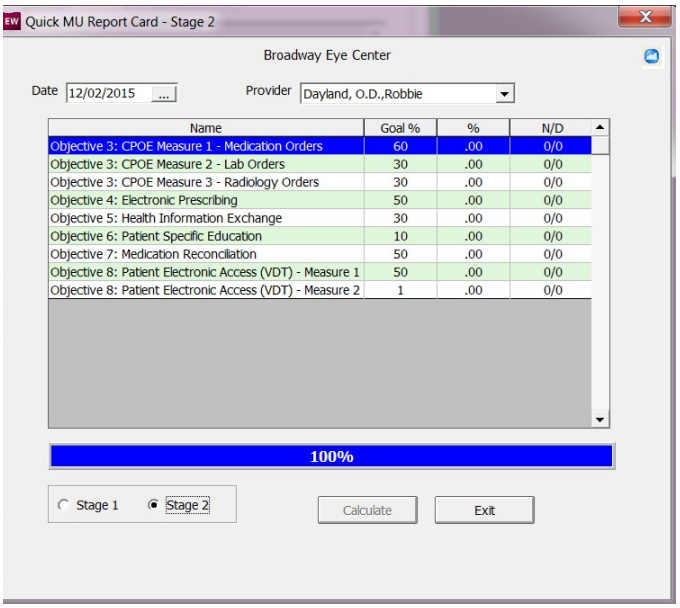
The information in the new CMS Meaningful Use Reporting - Stage 2 2015 Edition window that was added in version 12.0.3 is now updated to reflect CMS's final ruling that was published in October 2015. Although no calculations have been modified, the names and descriptions of measures (now called "objectives") are updated. The table below represents the changes. Only objectives that require calculations are displayed in this window.

Old Measure	New Objective
Core #1a: CPOE Medication Orders	Objective 3: Computerized Provider Order Entry - Measure 1
Core #1b: CPOE Lab Orders	Objective 3: Computerized Provider Order Entry - Measure 2
Core #1c: CPOE Radiology/Imaging	Objective 3: Computerized Provider Order Entry - Measure 3
Core #2: ePrescribing	Objective 4: Electronic Prescribing
Core #3: Demographics	Removed
Core #4: Record Vital Signs - BP Only	Removed
Core #4: Record Vital Signs - HT, WT	Removed
Core #4: Record Vital Signs - HT, WT, BP	Removed
Core #5: Record Smoking Status	Removed
Core #7: Patient Electronic Access #1	Objective 8: Patient Electronic Access (VDT) - Measure 1
Core #7: Patient Electronic Access #2	Objective 8: Patient Electronic Access (VDT) - Measure 2
Core #8: Clinical Summaries	Removed
Core #10: Clinical Lab Test Results	Removed
Core #12: Preventative Care	Removed
Core #13: Patient Specific Educational Resources	Objective 6: Patient Specific Education
Core #14: Medication Reconciliation	Objective 7: Medication Reconciliation
Core #15: Summary of Care - Measure 1	Removed
Core #15: Summary of Care - Measure 2	Objective 5: Health Information Exchange
Menu Set #2: Electronic Notes	Removed



Quick MU Report Card - Stage 2

The names of measures (now called "objectives") on the Quick MU Report Card for meaningful use stage 2 are now updated to reflect CMS's final ruling that was published in October 2015.



OfficeMate Fixed Issues

OfficeMate 12.0.3 SP4 fixes issues in the following areas:

- Insurance Claims, 25
- VSP Interface, 25
- Inventory, 26
- Products, 26
- One-Click Documents, 26
- Customization, 26
- Exam Analysis Report, 26
- Eyefinity EHR Integration, 26

Insurance Claims

- Diagnosis codes in box 21 on printed CMS 1500 paper claim forms no longer contain spaces that cause insurance rejections.
- ICD-10 codes in box 21 D, H, and L on printed CMS 1500 paper claim forms now include up to seven digits.
- CMS 1500 claim forms now display the correct page numbers on them, even if you print a batch of claims for multiple patients. Each patient's claim form is numbered separately using the "Page X of X" format. For example, if you print a batch of three patients' claim forms and each claim is 1, 2, and 3 pages in length, respectively, then the claim forms will print the following page numbering at the top of the forms: "Page 1 of 1"; "Page 1 of 2, Page 2 of 2"; and "Page 1 of 3, Page 2 of 3, Page 3 of 3."
- You no longer receive an incorrect error message stating that the "Prior Authorization Type is not set" on insurance claims where the prior authorization number is already recorded or not necessary.

NOTE	After installing the updated service pack, open and refresh any claims in the Third Party Processing window that have a "Prior Authorization Type Not Set" error. Then, remember to manually modify any information that you previously modified before you refreshed the claims.

VSP Interface

- The Doctor Service Report now displays the quantity (number of boxes) of contact lenses submitted to VSP on Rx orders.
- Frame designer series information is now submitted to VSP on Rx orders. This information helps ensure that you receive proper reimbursements on VSP's multiple promotions.

NOTE	If the Rx order includes an Altair or Marchon frame, you must record a valid designer before it can be sent to VSP. You can select a valid frame designer on the Products window or directly in the Eyewear Order window.

Inventory

- If you have a large number of products in your scan or physical count inventory, the total number of items counted (up to 20,000) is now correct. You can also scan products, exit a count cycle (without closing and updating the quantity on hand), and then reopen it and add new products.
- You are now able to successfully print multiple barcode labels from purchase orders.

Products

- You no longer receive error 3704, "Operation is not allowed when the object is open," when you copy an existing product with a patient fee to a new product.
- Discontinued and inactive contact lens products no longer appear as active in the products database. You can no longer record discontinued and inactive contact lenses on Rx orders.

One-Click Documents

- Referring patients' addresses are no longer encrypted on one-click document letters printed from the Patient Demographics window.

Customization

- Contact lens wearing schedule list box selections are no longer duplicated.

Exam Analysis Report

- You no longer receive run-time error -2147217887 (80040e21), "Multiple-step operation generated errors. Check each status value," when creating the Exam Analysis report.

Eyefinity EHR Integration

- OfficeMate appointments that were created during Daylight Saving time for dates that fall within Standard Time are no longer off by one hour in the Eyefinity EHR Quick List.

ExamWRITER Fixed Issues

ExamWRITER 12.0.3 SP4 fixes issues in the following areas:

- Exam Menu Text, 27
- Impressions, 27
- Surgery, 27
- Exam Analysis Report, 27
- Secure Messaging, 27
- Patient Information Center, 27
- Products, 27
- CMS Quality Reporting, 27
- Equipment Integration, 28

Exam Menu Text

- Incorrect text no longer appears in exam menus. To view the correct text in exam menus, open ExamWRITER *prior* to opening Administration after installing the updated service pack.

Impressions

- "Obscuring vision" now correctly autocodes using the H26.49x ICD-10 code.
- A mild or moderate corneal edema is now labeled as "Secondary corneal edema" instead of "Significant corneal edema."

Surgery

- "Cataract Extracap, complex" is now labeled correctly with the 66982 CPT code.

NOTE	Although "Cataract Extracap, complex" is correctly labeled with the 66982 CPT code, it will not auto code in exams until you open the Products window and select the 66982 CPT code for the "Cataract Extracap, complex" service.

Exam Analysis Report

- You no longer receive run-time error -2147217887 (80040e21), "Multiple-step operation generated errors. Check each status value," when creating the Exam Analysis report.

Secure Messaging

- You can now securely send CDAs for patient's whose ID's contain more than six digits. You no longer receive error 2146233088.

Patient Information Center

- If you have the Patient Information Center or an exam open in ExamWRITER while OfficeMate is also open, but minimized, and you restore OfficeMate to your full screen and then reminimize it, the Patient Information Center or the exam open in ExamWRITER will no longer appear as a very small tab on the screen.

Products

- Discontinued and inactive contact lens products no longer appear as active in the products database. You can no longer record discontinued and inactive contact lenses on Rx orders.
- You no longer receive error 3704, "Operation is not allowed when the object is open," when you copy an existing product with a patient fee to a new product.

CMS Quality Reporting

- You can now successfully create the NQF0018 (Controlling High Blood Pressure) QRDA document. The report no longer times out and generates a -217871 error.

Equipment Integration

- The Humphrey Field Analyzer equipment interface now works correctly. It no longer sends incorrect patient demographic data to the equipment and it now recognizes the correct patient number when sending files to ExamWRITER.

What's New in Service Pack 5

OfficeMate/ExamWRITER 12.0.3 service pack 5 (SP5) was released on March 28, 2016. This service pack includes all of the enhancements and fixes in services packs 1-4, in addition to the following items:

- OfficeMate Enhancements, 28
- ExamWRITER Enhancements, 30
- OfficeMate Fixed Issues, 32
- ExamWRITER Fixed Issues, 34

OfficeMate Enhancements

OfficeMate 12.0.3 SP5 includes enhancements to the following areas:

- Security for Business Insights Financial Dashboard, 28
- Fee Slips, 30

Security for Business Insights Financial Dashboard

Security access to the business insights financial dashboard, *powered by* The EDGE, has been tightened so that you can better control who in your practice has access to the financial data displayed in the dashboard.

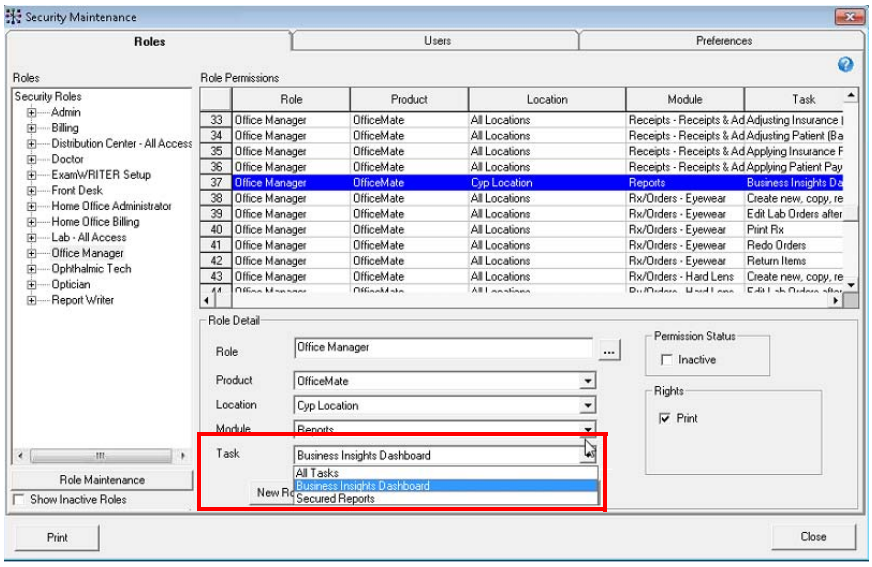
Instead of controlling access to the business insights financial dashboard, *powered by* The EDGE, through the Administration product > Reports module > Secured Reports task, which allowed all staff members who had Administration rights to all secured reports to access the dashboard, access to the dashboard is now controlled through the Administration product > Reports module > Business Insights Dashboard task. Staff members who have security rights to this specific task can access the dashboard and staff members who do not have security rights to this specific task cannot access the dashboard.

When users who have access to the dashboard open the Reports & Statements window, the default tab that will open will be the **Dashboard** tab. When users who do *not* have access to the dashboard open the Reports & Statements window, the default tab that will open will be the **Daily** tab.

NOTE

After you upgrade to OfficeMate 12.0.3 SP5, only staff members who have Administration security rights to All Tasks will be able to access the dashboard. Staff members who have Administration security rights to Secured Reports will no longer be able to access the dashboard. To reassign staff members access to the dashboard, follow the instructions below:

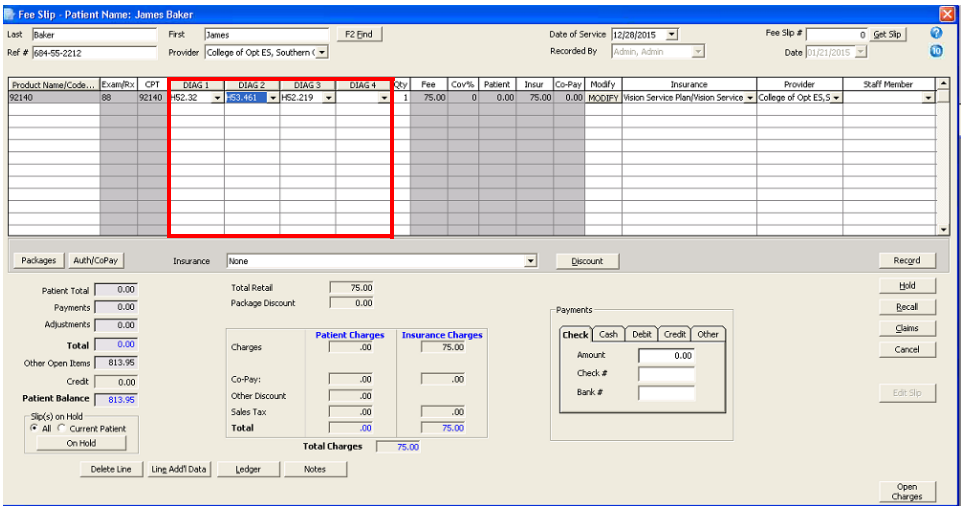
1. From Administration, click **Setup** and select **Security**.
2. Click the **Users** tab, select individual user names, and determine which staff members are assigned which roles.
3. Click the **Roles** tab and select a role on the left side of the window to which a staff member is assigned.
4. Select the role permission that displays **Reports** in the **Module** column and **Business Insights Dashboard** in the **Task** column.
5. Ensure that the Inactive check box in the Permission Status box is *not* selected.
6. Click **Save**.
7. Repeat steps 3–6 for each role to which you want to assign staff members access to the dashboard.
8. Click **Close** to close the Security Maintenance window.
9. Ensure that all users for whom you modified security access log out of OfficeMate and then log back into OfficeMate so that their security permissions are updated.



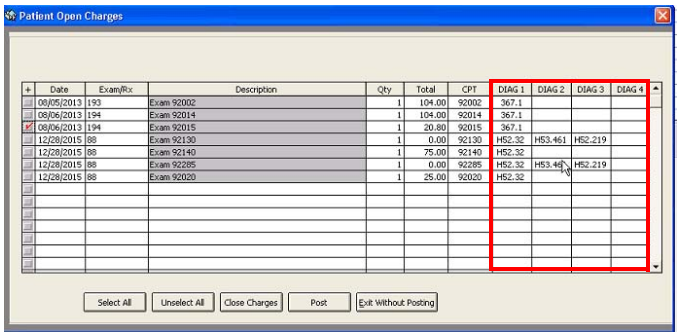
Fee Slips

The ability to link multiple diagnosis codes to one procedure code allows you to more thoroughly document patient issues.

You can now associate multiple ICD-10 diagnosis codes (up to four) with one procedure code.



If you recorded procedure codes and linked them to diagnosis codes in ExamWRITER, then those codes are automatically transferred to OfficeMate fee slips in the Patient Open Charges window and to CMS 1500 forms/ANSI insurance claims. For more information about linking multiple diagnosis codes to one procedure code in ExamWRITER, go to "Diagnosis/Procedure Coding" on page 31.



The diagnosis pointers in box 24E on CMS 1500 forms will also automatically populate (up to four) so that all of the procedure codes in box 24D have all of the necessary diagnosis codes from box 21 associated with them.

ExamWRITER Enhancements

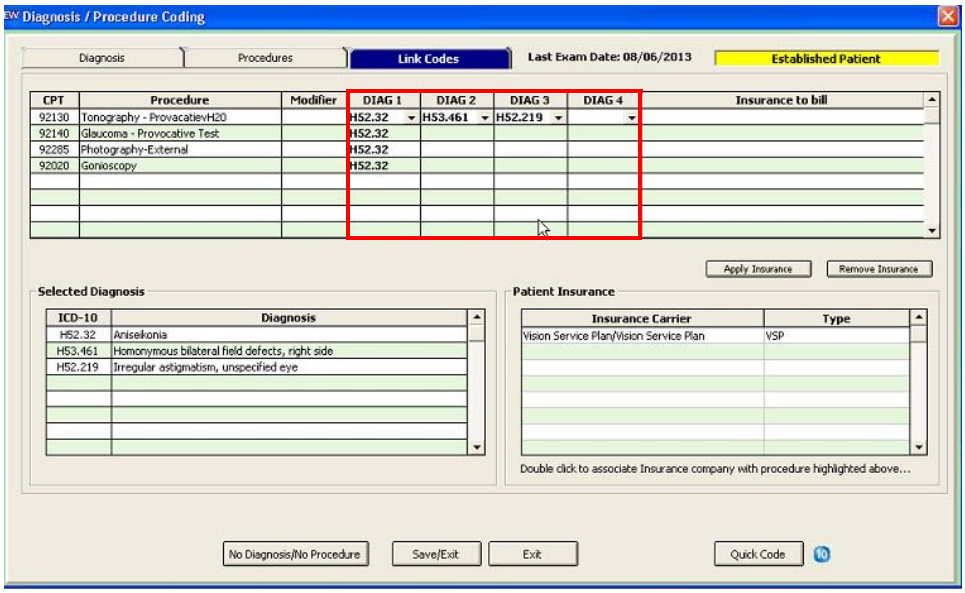
ExamWRITER 12.0.3 SP5 includes enhancements to the following areas:

- Diagnosis/Procedure Coding, 31
- Physician Quality Reporting System (PQRS), 31
- State Health Information Exchanges, 32

Diagnosis/Procedure Coding

The ability to link multiple diagnosis codes to one procedure code allows you to more thoroughly document patient issues.

You can now associate multiple ICD-10 diagnosis codes (up to four) with one procedure code on the Link Codes tab in the Diagnosis/Procedure Coding window.



All of the diagnosis codes transfer to OfficeMate fee slips and to CMS 1500 forms/ANSI insurance claims. For more information about associating multiple ICD-10 diagnosis codes with one procedure code on fee slips, to go "Fee Slips" on page 30.

Physician Quality Reporting System (PQRS)

Recording PQRS measures allows you to submit appropriate data to the CMS through your Medicare Part B claims or to a PQRS reporting registry.

You can now easily report on the 2015 PQRS Measure #317, Preventative Care and Screening: Screening for High Blood Pressure and Follow-Up Documented.

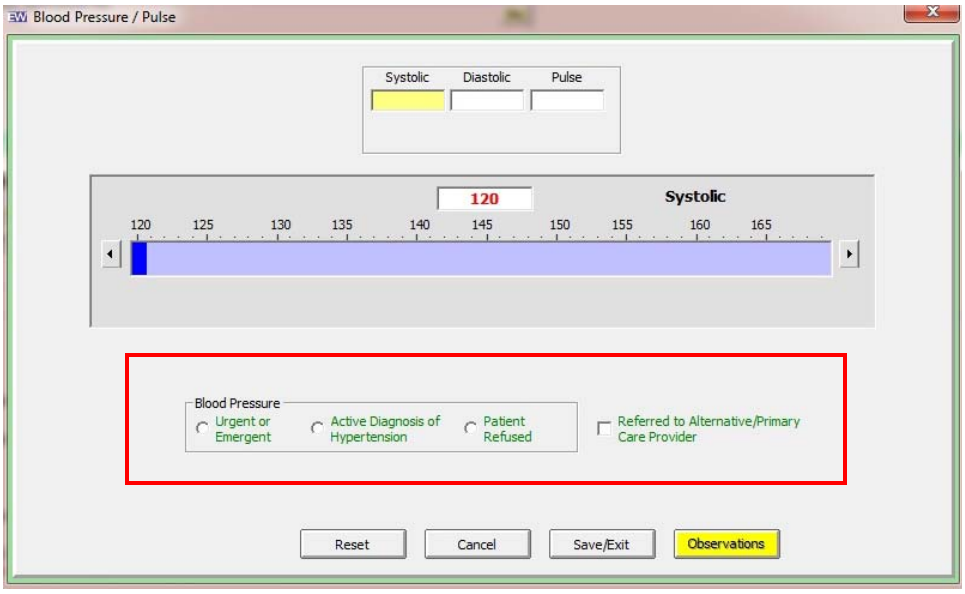
When you are recording blood pressure measurements in a PQRS exam, select one of the new Blood Pressure radio buttons to autocode the correct PQRS procedure code in the exam.

- If you select **Urgent or Emergent, Active Diagnosis of Hypertension**, or **Patient Refused**, the G8784 PQRS procedure code will autocode in the exam.
- If abnormal blood pressure readings are documented (for example, readings above 120/80) and you select **Referred to Alternative/Primary Care Provider**, the G8950 PQRS procedure code will autocode in the exam.
- If abnormal blood pressure readings are documented (for example, readings above 120/80) and you do *not* select **Referred to Alternative/Primary Care Provider**, the G8952 PQRS procedure code will autocode in

the exam. Additionally, the BP measurements and field in the exam will be highlighted red.

- If blood pressure readings are *not* documented, the G8785 PQRS procedure code will autocode in the exam.
- If normal blood pressure readings are documented, the G8783 PQRS procedure code will autocode in the exam.

NOTE	As a reminder, green text in an exam signifies that the item is associated with a PQRS procedure code.



State Health Information Exchanges

Submitting syndromic surveillance data can help you meet the CMS meaningful use public health objective 10, measure 2, requirement.

You can now generate and submit syndromic surveillance data (protected health information and the ICD-10 codes) to the Kentucky Health Information Exchange.

OfficeMate Fixed Issues

OfficeMate 12.0.3 SP5 fixes issues in the following areas:

- Patient Demographics, 32
- Fee Slips, 33
- Rx Orders, 33
- Third Party Processing, 33
- Products, 33
- Reports, 33
- Eyefinity EHR Integration, 33

Patient Demographics

- You no longer receive error 94, invalid use of null, when clicking the Insurance tab.

Fee Slips

- OfficeMate no longer freezes and crashes when you record VSP fee slips that only contain exam charges.
- Inactivating an insurance carrier no longer removes the insurance carrier from all fee slips on which it was recorded.
- You no longer receive runtime error 13 when you click on an empty cell in the On Hold Orders window.
- Line items added to fee slips from the Product Quick List window (F5) now appear on fee slips with the correct CPT codes displayed next to the items.
- You can no longer modify diagnosis codes on recorded fee slips unless you have first clicked the Edit button.

Rx Orders

- Rx special instructions and notes from existing orders no longer copy to new Rx orders.

Third Party Processing

- The place of service that you select for patients in their demographic records (Insurance tab) is now correctly displayed in box 32 on the CMS 1500 form, even when you have 500 places of service recorded in Administration.
- Medicare ANSI insurance claims are no longer rejected because the SE-01 segment contains the wrong segment count.

Products

- Modifications to patient fee types and fees in the Products window for existing products are now properly saved and retained. They are no longer overwritten or duplicated.

Reports

- Custom Production Reports now display product names that are "handwritten" on fee slips.

Eyefinity EHR Integration

- Rescheduled appointments are no longer displayed in the Eyefinity EHR Quick List on the original date/time.

ExamWRITER Fixed Issues

ExamWRITER 12.0.3 SP5 fixes issues in the following areas:

- Patient History, 34
- Examination, 34
- Impressions, 34
- Special Testing, 35
- Surgery, 35
- Plan, 35
- Diagnosis/Procedure Coding, 35
- Printing, 35
- Meaningful Use, 35
- Equipment Integration, 35

Patient History

- The "No known systemic medication allergies" text no longer appears on patient records when patients do have medication allergies.

Examination

- Diagnosis codes are no longer incorrectly autocoded with an unspecified laterality when right eye, left eye, or bilateral eyes are selected.

Impressions

- Conjuctiva nevus, Papilloma, neurofibroma, and Melanocytoma in the left eye now properly autocode using the D31.02 ICD-10 code.
- The 2021F PQRS procedure code is no longer autocoded for diabetic retinopathy exams, as this code was retired in 2015. Instead, the 32451-7 LOINC is associated with impressions on diabetic retinopathy exams.
- Blepharitis selections for the left and right eyes and upper and lower lids (both lids) now properly autocode with all of the appropriate ICD-10 codes.
- Extended ophthalmoscopy white w/out pressure now properly autocodes using the H35.469 (unspecified eye), H35.461 (left eye), H35.462 (right eye), and H35.463 (bilateral eyes) ICD-10 codes.
- Tramatic Uveitis now properly autocodes with the appropriate ICD-10 codes.
- Inflammation, PC, now properly autocodes with the appropriate ICD-10 codes.

Special Testing

- High resolution biomicroscopy text is updated to reflect the post-ICD-10 medical environment.
- Blepharitis selections for the left and right eyes and upper and lower lids (both lids) now properly autocode with all of the appropriate ICD-10 codes.
- Extended ophthalmoscopy white w/out pressure now properly autocodes using the H35.469 (unspecified eye), H35.461 (left eye), H35.462 (right eye), and H35.463 (bilateral eyes) ICD-10 codes.

Surgery

- Blepharitis selections for the left and right eyes and upper and lower lids (both lids) now properly autocode with all of the appropriate ICD-10 codes.

Plan

- High resolution biomicroscopy text is updated to reflect the post-ICD-10 medical environment.

Diagnosis/Procedure Coding

- You no longer receive error 13, a type mismatch, in an outdated template.

Printing

- Left unaided acuity measurements no longer incorrectly display as right unaided acuity measurements on printed formal health records.
- Left vertical phoria measurements no longer incorrectly display as right vertical phoria measurements on printed exams.

Meaningful Use

- You no longer receive a "100 Error(s) and 100 Warning(s) returned. Validate another file" error message when uploading and validating QRDA CATIII files on the QualityNet website.
- You no longer receive error -467261 when you create a CDA. Clinical summaries are now successfully created in ExamWRITER.
- You can now successfully create QRDA documents without receiving a "Measure=CATI_CMS143, Exception message = Input string was not in a correct format" error message in your log files.
- You can now successfully create the NQF0421A (Preventative Care and Screening BMI (18-65)) QRDA document. The report no longer stops at measure 13 and is now completely generated.

Equipment Integration

- You no longer need to exit Optos Capture in order to return to an exam in ExamWRITER after capturing images with Optos. You also no longer need to exit Optos Review in order to return to an exam in ExamWRITER after reviewing images. You are able to have both Optos Capture/Review and ExamWRITER open at the same time.

What's New in Service Pack 6

OfficeMate/ExamWRITER 12.0.3 service pack 6 (SP6) was released on August 9, 2016. This service pack includes all of the enhancements and fixes in services packs 1-5, in addition to the following items:

- OfficeMate Enhancements, 36
- ExamWRITER Enhancements, 36
- OfficeMate Fixed Issues, 39
- ExamWRITER Fixed Issues, 40

OfficeMate Enhancements

OfficeMate 12.0.3 SP6 includes enhancements to the following areas:

- Insurance Claims, 36
- Patient Welcome Forms, 36

Insurance Claims

Multilocation practices located in Maine can now enter a location number after the facility ID in CMS 1500 box 32b required by Maine Medicaid.

Patient Welcome Forms

You now have the ability to print welcome forms for all scheduled patients or for confirmed patients only. In OfficeMate, click **Tasks**, select **Print Patient Welcome Forms**, select **Appointments**, select **Appointment Date**, and click **Print Patient Welcome Forms**.

ExamWRITER Enhancements

ExamWRITER 12.0.3 SP6 includes enhancements to the following areas:

- Impressions, 36
- Meaningful Use, 37
- Physician Quality Reporting System (PQRS), 38
- Equipment Integration, 38

Impressions

- You can now select **Demodex Infestation** from the Impression/Eyelashes window.
- The word "syndrome" has been removed from the textual description of most dry eye conditions list on the Impressions/Dry Eye window.

Meaningful Use

- NQF 0055, "Diabetes Eye Exam," has been updated to reflect procedure and diagnosis changes in 2016:
  - The following procedure codes have been added to the measure:

    92002, 92004, 92012, 92014
  - The following ICD10 codes have been added to the measure:

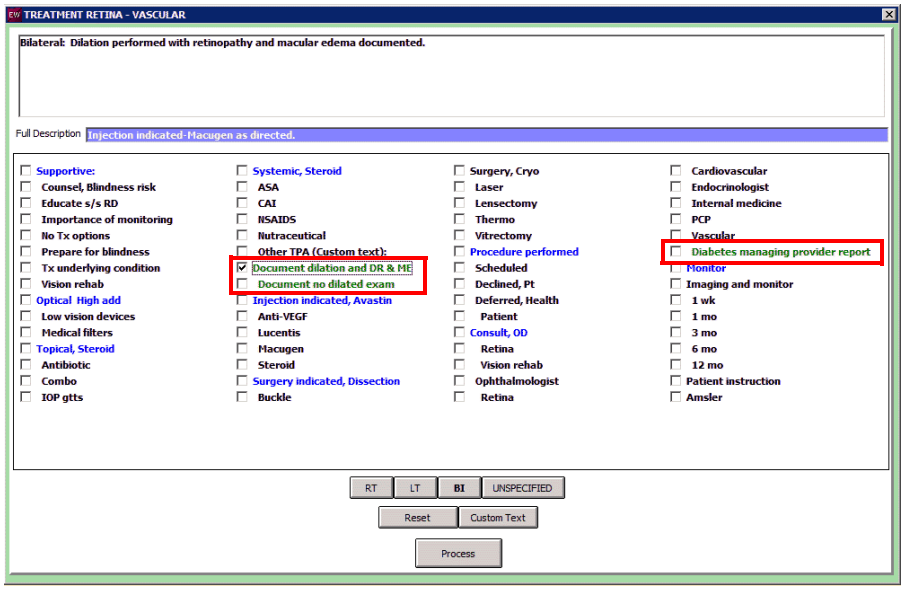
    E13.00, E13.01, E13.10, E13.11, E13.21, E13.22, E13.29, E13.311, E13.319, E13.321, E13.329, E13.331, E13.339, E13.341, E13.349, E13.351, E13.359, E13.36, E13.39, E13.40, E13.41, E14.42, E13.43, E13.44, E13.49, E13.51, E13.52, E13.59, E13.610, E13.618, E13.620, E13.621, E13.622, E13.628, E13.630, E13.638, E13.641, E13.649, E13.65, E13.69, E13.8, E13.9
- Updated the text in the CMS Meaningful Use Reporting - Stage 2 2015 Edition window to more accurately reflect eligible exclusion criteria in 2016. The following table provides an overview of the clarifications; however, meaningful use participants are strongly encouraged to review the *Achieving Meaningful Use 2015–17 with OfficeMate/ExamWRITER* document available in the Eyefinity Support Community.

Objective	Exclusion
Computerized physician order entry (CPOE)	**Measure 1:** Alternate measure applies only to providers who were scheduled to report Stage 1 in 2015. Alternate measure not available in 2016. **Measure 2:** Alternate measure applies only to providers who were scheduled to report Stage 1 in 2015 or 2016. **Measure 3:** Alternate measure applies only to providers who were scheduled to report Stage 1 in 2015 or 2016.
Electronic Prescribing	Alternate measure applies only to providers who were scheduled to report Stage 1 in 2015. Alternate measure not available in 2016.
Health Information Exchange	Alternate exclusion applies only to providers who were scheduled to report Stage 1 in 2015. Alternate exclusion not available in 2016.
Patient-Specific Education	Alternate exclusion applies only to providers who were scheduled to report Stage 1 in 2015. Alternate exclusion not available in 2016.
Medication Reconciliation	Alternate exclusion applies only to providers who were scheduled to report Stage 1 in 2015. Alternate exclusion not available in 2016.
Patient Electronic Access	Measure 2: Alternate exclusion applies only to providers who were scheduled to report Stage 1 in 2015. Alternate exclusion not available in 2016.

Physician Quality Reporting System (PQRS)

PQRS 19/NQF 0089, "Communication with the Physician Managing On-Going Diabetes Care": the Treatment Retina – Vascular window in ExamWRITER has the following selection and text changes:

- "Dilation, Performed" to "Document dilation and DR & ME"
- "Not Performed" to "Document no dilated exam"
- "PCP Report" to "Diabetes managing provider report"
- "Dilation performed with retinopathy and macular edema performed" to "Dilation performed with retinopathy and macular edema documented"



Equipment Integration

- The following measurements are now imported from Marco Connect: NPC, anisekonia, fusion, stereopsis, vergence, AC/A ratio.
- Added support for Marco ARK1s.
- Added support for Optovue iCam, iVue, and iFusion.

OfficeMate Fixed Issues

OfficeMate 12.0.3 SP6 fixes issues in the following areas:

- The EDGE Dashboard, 39
- Fee Slip, 39
- Claims, 39
- Reports, 40
- Scheduler, 40
- Eyewear Order, 40
- Soft Contact Lens Order, 40
- Security, 40
- VSP Lens Loader, 40

The EDGE Dashboard

- Corrected the "Dashboard Display Error." The EDGE dashboard now displays correctly in the Reports and Statements window.

Fee Slip

- Corrected an issue that caused duplicate diagnoses columns in the fee slip when the user tabbed through the fields.
- Corrected an issue that caused error 9 when removing diagnosis codes from the fee slip.
- Resolved an issue that prevented the diagnosis drop-down menus and the Modify button from being selected.
- Resolved an issue that prevented the primary diagnosis code from being selected and notes from being added without clicking Edit Fee Slip.
- Corrected an error caused by tabbing through the Fee Slip window.

Claims

- Corrected an issue that prevented the Place of Service from being included on some claims during batch processing.
- The Third Party Processing window now warns users when the patient's signature is not on file in the Patient Demographic window (Insurance tab). This warning is intended to reduce insurance claim rejections for missing information in box 12 and 13.

Reports

- Corrected the Production reports to accurately reflect when a duplicate payment was reversed. Previously the reports displayed negatives for the two payments.
- Corrected the Production reports so that insurance payment reversals no longer display as refunds.
- Resolved an issue that caused the Production report to return an error -2147217915 when Financial Group and Summary were selected.
- Resolved an issue that caused error 217887 when opening the Open Charges report.
- Frames Sales report now includes frames sold for $0.00.

Scheduler

- Inactive insurances are no longer selectable while scheduling a patient.

Eyewear Order

- Fixed an issue that resulted in Error 94 when searching for historical eyewear orders.
- Corrected a bug that changed the Designer name to "0" when the order was recorded.
- Fixed an issue that caused the Manufacturer and Designer fields to remain populated after a frame was deleted.

Soft Contact Lens Order

- Corrected an issue related to the patient's Ship To address when shipping soft contact lenses through VisionWeb.

Security

- Corrects an issue that prevented users assigned a role that included access to all tasks from being able to use the Task Manager.

VSP Lens Loader

- The TD2 scratch coating can again be downloaded through the VSP Lens Loader.

ExamWRITER Fixed Issues

ExamWRITER 12.0.3 SP6 fixes issues in the following areas:

- Control Center, 41
- Examination, 41
- Diagnosis/Procedure Coding, 41
- Blood Pressure, 41
- Printed Exam/Autoletter, 41
- Equipment Integration, 41

Control Center

- Fixed an issue that caused Error 3704 when the user clicked Patient Hx. this error prevented the patient's history from displaying on any workstation.

Examination

- Orbit Preseptal Cellulitis impression is now properly coding H05.xx.
- Corrected a situation that caused notes and addendums to delete before the user clicked a button to confirm the deletion.
- Optic Atrophy impression is now properly coding H47.231, H47.232, H47.233, and H47.239.
- NAION impression now properly adds "Non-Arteritic Ischemic Optic Neuropathy" to the exam text.

Diagnosis/Procedure Coding

- Corrected an issue that caused Error 6 when moving some procedures with the green left and right arrows.
- Corrected a situation that caused a patient's blood pressure PQRS code to appear on the following patient's coding window.

Blood Pressure

- The blood pressure selections that were added in SP5 to fulfill PQRS measure 317 now appear on the exam and in the autoletter. These selections include the following:
  - Urgent or Emergent
  - Active Diagnosis of Hypertension
  - Patient Refused
  - Referred to Alternative/Primary Care Provider

Printed Exam/Autoletter

- Language on the printed exam has been changed from "Attending Physician" to "Attending Phys./Practitioner" per CMS recommendations.

Equipment Integration

- Fixed an issue that prevented ExamWRITER from connecting to the Zeiss iProfiler.
- Fixed an issue that caused error 3021 when transferring information from Marco RT-5100.

What's New in Service Pack 7

OfficeMate/ExamWRITER 12.0.3 service pack 7 (SP7) was released September 15, 2016, re-released with corrections on October 10, 2016, and then released for a final time with additional corrections on October 13, 2016. This service pack includes all of the enhancements and fixes in services packs 1-6, in addition to the following items:

- OfficeMate Enhancements, 42
- ExamWRITER Enhancements, 42
- OfficeMate Fixed Issues, 45
- ExamWRITER Fixed Issues, 45

OfficeMate Enhancements

OfficeMate 12.0.3 SP7 includes enhancements to the following areas:

- ICD-10, 42
- Fee Slip, 42

ICD-10

To prepare for the updated ICD-10 codes, complete the tasks in the Preparing for ICD-10 Updates document.

The OfficeMate/ExamWRITER database has been updated to include new ICD-10 codes that are required starting October 1, 2016. Additionally, several general ICD-10 codes will be deactivated on October 1. The retired codes will still remain in the database and must be used on claims for service dates prior to October 1.

Fee Slip

The ICD-10 codes available to select on the Fee Slip window are based on the Date of Service. You may notice that some of the general codes you used prior to October 1, 2016, are no longer available, and you must now select more specific, newer codes. Refer to the 2017 ICD-10 Updates document for a list of new codes.

ExamWRITER Enhancements

ExamWRITER 12.0.3 SP7 includes enhancements to the following areas:

- ICD-10, 42
- Meaningful Use Reporting, 43
- CMS Quality Reporting, 43
- Examination, 44
- Coding, 45

ICD-10

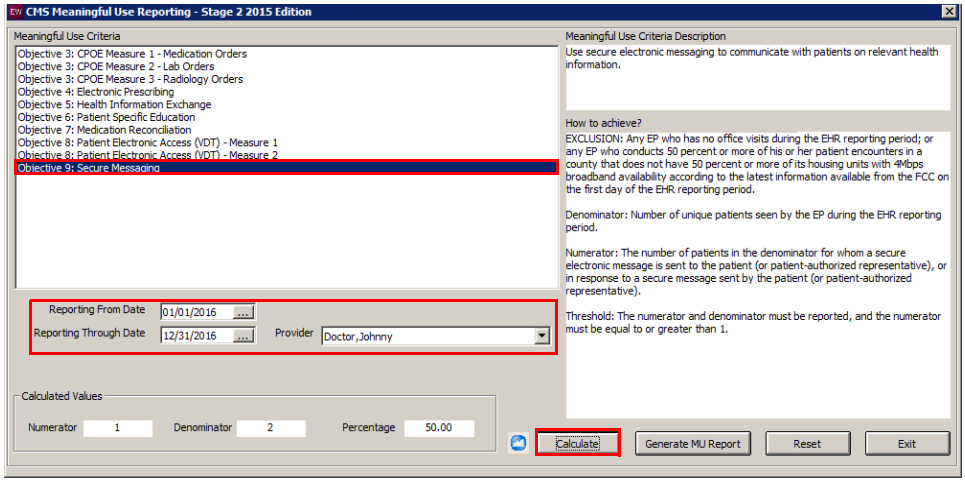
To prepare for the updated ICD-10 codes, complete the tasks in the Preparing for ICD-10 Updates document.

The OfficeMate/ExamWRITER database has been updated to include new ICD-10 codes that are required starting October 1, 2016. Additionally, several general ICD-10 codes will be deactivated on October 1. The retired codes will still remain in the database and must be used in exams with service dates prior to October 1.

Meaningful Use Reporting

The ability to calculate secure messaging counts has been restored. In 2015, the calculation was removed because participating providers only had to enable secure messaging to qualify. In 2016, participating providers must log into the secure messaging portal and send at least one message to a patient or respond to at least one message from a patient. In 2017, the threshold will increase to 5% of the patients seen.

To calculate your secure messaging counts, open **Administration**, click the **Reports** menu, and select **Stage 2 2015 CMS Meaningful Use Reporting**. Select **Objective 9**, select the **Reporting Dates**, select your name from the **Provider** drop-down, and click **Calculate**.



CMS Quality Reporting

Group practices can now generate the files required by the PQRS GPRO Web Interface.

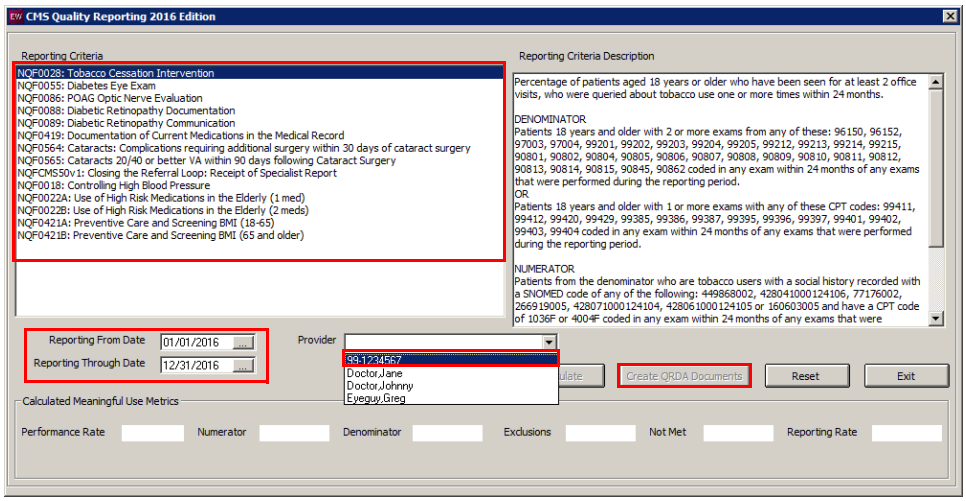
Group practices with two or more providers that bill under a single tax identification number (EIN) may choose to report their 2016 PQRS measures as a group. To qualify for this option, the group practice must have registered for GPRO by June 30, 2016. Once you register for GPRO, you cannot later decide to return to claims-based reporting. Group reporting is only required for practices with 100 or more eligible providers.

Individual providers who bill under their own EIN and group practices that don't register for GPRO should continue claims-based reporting through 2016.

To create the file, open **Administration**, click the **Reports** menu, and select **2016 Edition - CMS Quality Reporting**. Select a **Reporting Criteria**, select the **Reporting Dates**, select your group EIN from the **Provider** drop-down, and click **Create QRDA Documents**.

NOTES

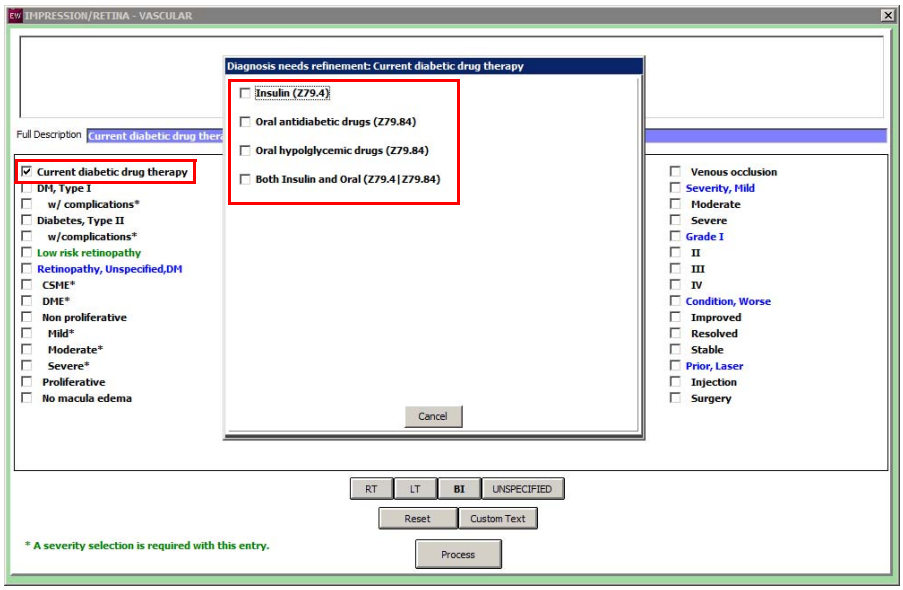
- Individual providers in the practice are listed by name. If two or more providers have the same EIN (Employer Identification Number) recorded on the Resources Setup window, that EIN will also appear in the Provider drop-down.
- The EIN must be entered exactly the same for all providers included in the group, including hyphens.



Examination

- When you select an impression, the ICD-10 that gets coded is based on the date of service. Refer to the 2017 ICD-10 Updates document for a list of new codes.
- Some diagnoses have shifted on the Impressions windows to accommodate expanded impressions required by the 2017 ICD-10 changes.
- Inactive ICD codes (either ICD-9 or retired ICD-10 codes) appear in blue text. You'll need to reselect items in blue text (most likely diagnoses copied forward from a previous exam) before you can close or finalize the exam.
- A new window allows you to record insulin and oral antidiabetic use when documenting current diabetic drug therapy. This refined documentation is

required only for exams on or after October 1, 2016, and the window will not appear before that date.



Coding

The ICD-10 codes available to select on the Diagnosis/Procedure Coding window are based on the Date of Service. You may notice that some of the general codes you used prior to October 1, 2016, are no longer available, and you must now select more specific, newer codes. Refer to the 2017 ICD-10 Updates document for a list of new codes.

OfficeMate Fixed Issues

OfficeMate 12.0.3 SP7 fixes issues in the following area:

- Welcome Window, 45

Welcome Window

- Corrected an issue that prevented the latest news and updates from displaying on the Welcome or login window.

ExamWRITER Fixed Issues

ExamWRITER 12.0.3 SP7 fixes issues in the following area:

- Meaningful Use Reports, 45

Meaningful Use Reports

- Corrected a timeout error that prevented some historical meaningful use reports from running on large databases.

What's New in Service Pack 8

OfficeMate/ExamWRITER 12.0.3 service pack 8 (SP8) was released on December 21, 2016. This service pack includes all of the enhancements and fixes in services packs 1-7, in addition to the following items:

- OfficeMate Enhancements, 46
- ExamWRITER Enhancements, 47
- ExamWRITER Fixed Issues, 52

OfficeMate Enhancements

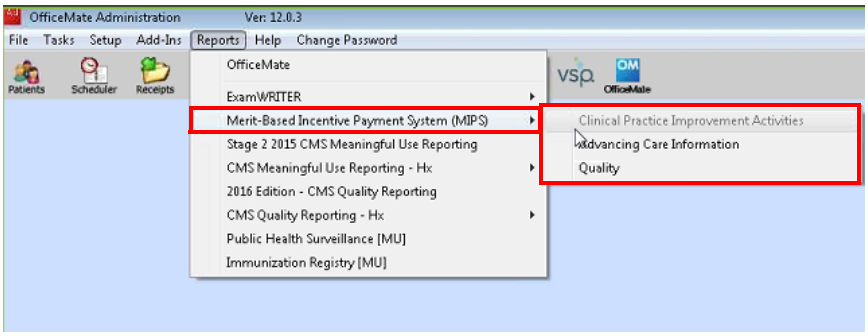
OfficeMate 12.0.3 SP8 includes enhancements to the following areas:

- Merit-Based Incentive Payment System (MIPS), 46
- MIPS Reporting Options, 47

Merit-Based Incentive Payment System (MIPS)

For more information on MIPS, go to the Eyefinity MIPS Resource Center.

You can now gather and prepare to report on measures that are part of the MIPS (Merit-Based Incentive Payment System) program beginning in 2017. From the Administration main window, click **Reports**, select **Merit-Based Incentive Payment System (MIPS)**, and then select **Clinical Practice Improvement Act** (coming soon!), **Advancing Care Information** (to calculate meaningful use measures), or **Quality** (to calculate PQRS measures).

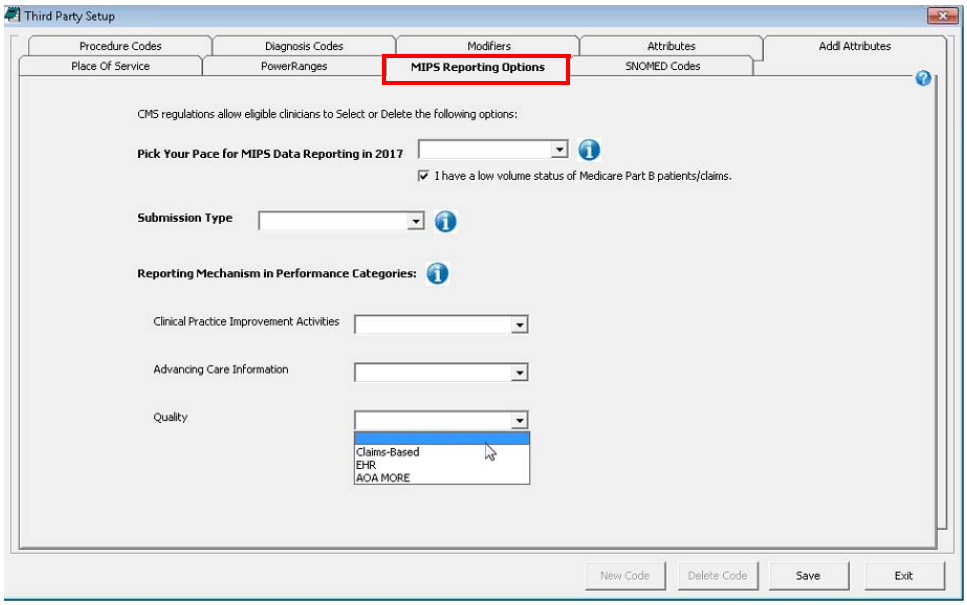


MIPS Reporting Options

You can now set up your reporting option preferences for the MIPS program. To set up MIPS reporting options, from the Administration main window, click **Setup**, select **Third Party Setup**, and click the **MIPS Reporting Options** tab.

NOTE	Currently, these preferences are only saved in the OfficeMate/ExamWRITER database; they do not yet impact any of the MIPS reporting processes.

- **Pick your Pace for MIPS Reporting in 2017** and select the length of your MIPS data reporting period in 2017.
- Select a **Submission Type** to indicate whether you will submit MIPS data as an individual or as a group. Group reporting is based on the group NPI number.
- Select the **Reporting Mechanism in Performance Categories** to indicate if you will submit your MIPS data manually, through your EHR, through the AOA MORE registry, or through claims (quality reporting only).



ExamWRITER Enhancements

ExamWRITER 12.0.3 SP8 includes enhancements to the following areas:

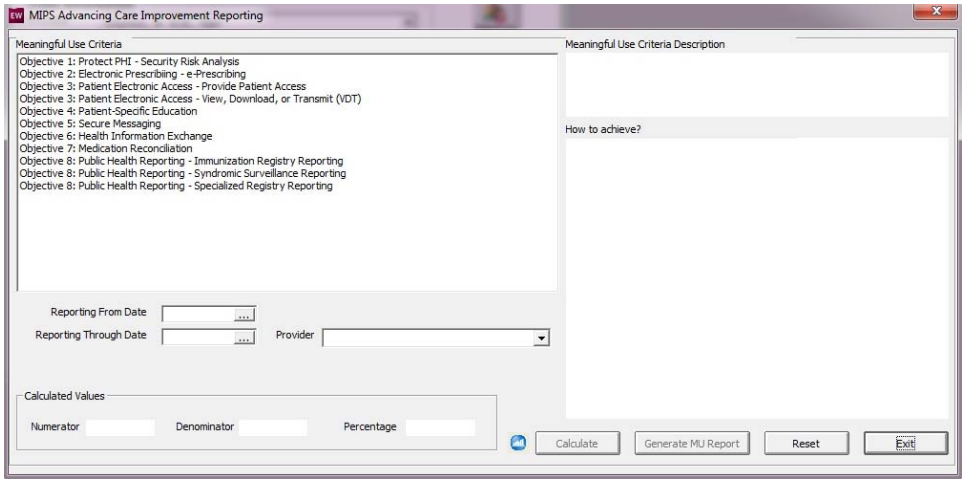
- MIPS Advancing Care Improvement Reporting, 48
- CMS MIPS Quality Reporting, 49
- Physician Quality Reporting System (PQRS) Selections, 51
- Equipment Integration, 51

MIPS Advancing Care Improvement Reporting

NOTE	To set up MIPS reporting options and select your Advancing Care Improvement reporting mechanism, go to "MIPS Reporting Options" on page 47.

The previous CMS Meaningful Use Reporting - Stage 2 window has been renamed and updated to reflect the MIPS Advancing Care Improvement criteria and calculated values. Some objectives have been renamed and reorganized and others, like the ones listed below, have been removed:

- Objective 2a: Clinical Decision Support
- Objective 2b: Drug Interaction Checks
- Objective 3a: Medication Orders
- Objective 3b: Laboratory Orders
- Objective 3c: Radiology Orders



The MU Report has also been updated with the new MIPS Advancing Care Information measures and calculations.

Measure	Numerator	Denominator	Percentage
	0	0	0
Objective 2: Electronic Prescribing - e-Prescribing	0	0	0
Objective 3: Patient Electronic Access - Provide Patient Access	0	12	0
Objective 3: Patient Electronic Access - View, Download, or Transmit (VDT)	0	12	0
Objective 4: Patient-Specific Education	0	12	0
Objective 5: Secure Messaging	0	12	0
Objective 6: Health Information Exchange	0	0	0
Objective 7: Medication Reconciliation	0	0	0
	0	0	0
	0	0	0
	0	0	0

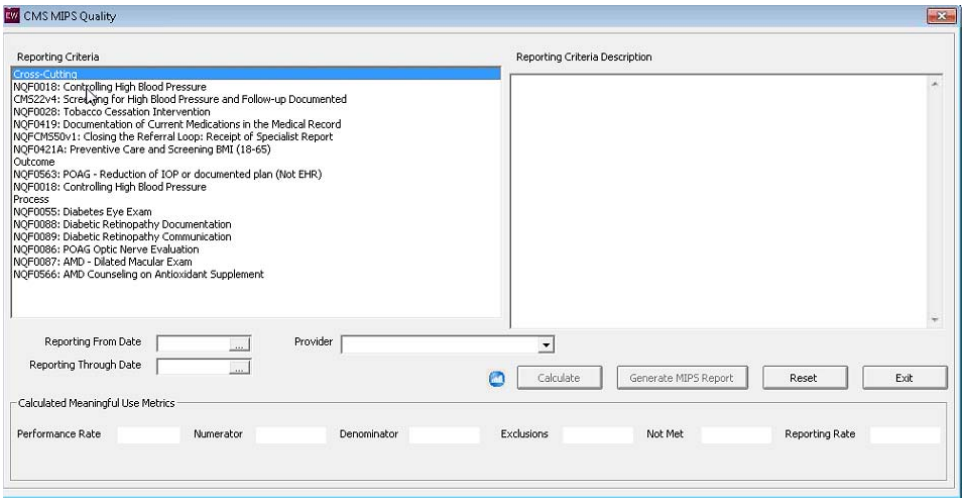
CMS MIPS Quality Reporting

NOTE	To set up MIPS reporting options and select your Quality reporting mechanism, go to "MIPS Reporting Options" on page 47.

You can now gather data and prepare to report on the following new NQF and CMS quality measures as part of the MIPS program beginning in 2017. You can also gather data and report on the CMS22v4, NQF0087, and NQF0566 measures through the PQRS claim submission process in 2017.

If you plan to participate in the MIPS program for the full year in 2017, then you must start documenting the NQF and CMS Quality measures in January 2017.

Measure	Description
CMS22v4: Screening for High Blood Pressure and Follow-up Documented	This measure reports the percentage of patients aged 18 years and older seen during the reporting period who were screened for high blood pressure AND a recommended follow-up plan is documented based on the current blood pressure (BP) reading as indicated.
NQF0563: POAG - Reduction of IOP or documented plan (Not EHR)	This measure reports the percentage of patients aged 18 years and older with a diagnosis of primary open-angle glaucoma (POAG) whose glaucoma treatment has not failed (the most recent IOP was reduced by at least 15% from the pre-intervention level) OR if the most recent IOP was not reduced by at least 15% from the pre-intervention level, a plan of care was documented within 12 months.
NQF0087: AMD Dilated Macular Exam	This measure reports the percentage of patients aged 50 years and older with a diagnosis of age-related macular degeneration (AMD) who had a dilated macular examination performed which included documentation of the presence or absence of macular thickening or hemorrhage AND the level of macular degeneration severity during one or more office visits within 12 months.
NQF0566: AMD Counseling on Antioxidant Suppliment	This measure reports the percentage of patients aged 50 years and older with a diagnosis of age-related macular degeneration (AMD) or their caregiver(s) who were counseled within 12 months on the benefits and/or risks of the Age-Related Eye Disease Study (AREDS) formulation for preventing progression of AMD.



NOTE The **Create QRDA Documents** button is no longer applicable and has been removed from this window. It was replaced with the **Generate MIPS Report** button, which, when clicked, displays the MIPS Quality Measures Report with information about your quality reporting progress.

Physician Quality Reporting System (PQRS) Selections

The PQRS selections in green text will help alert you to items that can be recorded to help you meet MIPS quality reporting guidelines in all exams.

PQRS selections are now in green text in all exams, even non-Medicare-type exams that are not set up to automate PQRS coding; however, PQRS procedure codes are *only* transferred to fee slips and claims for Medicare-type and HEDIS program exams that are set up to automate PQRS coding.

NOTE

You must ensure that 92x and 99x procedure codes are *not* set up as level II procedure codes; otherwise, they will not transfer to OfficeMate fee slips.

If a 92x or 99x procedure code is not transferring to fee slips in OfficeMate, follow the instructions below to ensure that it is not set up as a level II procedure code:

1. In Administration, click **Setup** and select **Third Party Setup**.
2. On the **Procedure Codes** tab, find and select the 92x or 99x procedure code.
3. Select the **Level II CPT Codes** check box.
4. Click **Save**.
5. Repeat steps 2–4 for each 92x and 99x procedure code that is not transferring to fee slips in OfficeMate.
6. Click **Exit**.
7. Close and then reopen ExamWRITER.
8. Open the exam in ExamWRITER that contained procedure codes that were not transferring to fee slips in OfficeMate.
9. Click the **Coding** icon.
10. Click the **Procedures** tab.
11. Select and *remove* the procedure codes that you modified in step 3 and then select and *re-add* them to the table of selected procedure codes.
12. Click **Save/Exit**.
13. Open the patient's fee slip in OfficeMate and ensure that the open charges from the modified procedure codes transferred from ExamWRITER.

Equipment Integration

- Added support for Optovue iScan OCT and Avanti Widefield OCT. You can now successfully capture images using the interface for all supported Optovue equipment.
- Added support for Topcon KR-800S Autorefractor/Keratometer.
- Added support for OptosAdvance.
- Added support for OCULUS Keratograph 4 and 5M.
- Added support for Zeiss i.Com iPad app.

ExamWRITER Fixed Issues

ExamWRITER 12.0.3 SP8 fixes issues in the following areas:

- CMS Quality Reporting, 52
- Special Testing, 52
- Impressions, 52
- Review of Systems, 52
- Equipment Integration, 52

CMS Quality Reporting

- You no longer receive run-time error 438 when you attempt to create QRDA documents.
- Measure NQF0055 - Diabetes Eye Exam now includes the 92002, 92004, 92012, and 92014 procedure codes and appropriate updated ICD-10 diagnosis codes in the reporting calculations for 2016.
- Measure NQF0086 - POAG Optic Nerve Evaluation now includes the appropriate updated ICD-10 diagnosis codes in the reporting calculations for 2016.
- Measure NQF0088 - Diabetic Retinopathy Documentation now includes the appropriate updated ICD-10 diagnosis codes in the reporting calculations for 2016.
- Measure NQF0089 - Diabetic Retinopathy Communication now includes the appropriate updated ICD-10 diagnosis codes in the reporting calculations for 2016.

Special Testing

- E50.5 (Vitamin A deficiency with night blindness) is no longer auto-coded at the same time as H53.003 (Consistent with, Amblyopia).

Impressions

- Iridectory and Iridotomy now properly autocodes with the Z98.890 ICD-10 code.

Review of Systems

- The Endocrine A1c levels have been updated to meet the American Diabetes Association guidelines of less than 5.7, between 5.7 and 6.4, and 6.5 and greater.

Equipment Integration

- You no longer receive an error that prevented Optovue iCam Review images from displaying.

What's New in Service Pack 9

OfficeMate/ExamWRITER 12.0.3 service pack 9 (SP9) was released on March 14, 2017. This service pack includes all of the enhancements and fixes in services packs 1-8, in addition to the following items:

- ExamWRITER Enhancements, 53
- OfficeMate Fixed Issues, 60
- ExamWRITER Fixed Issues, 60

ExamWRITER Enhancements

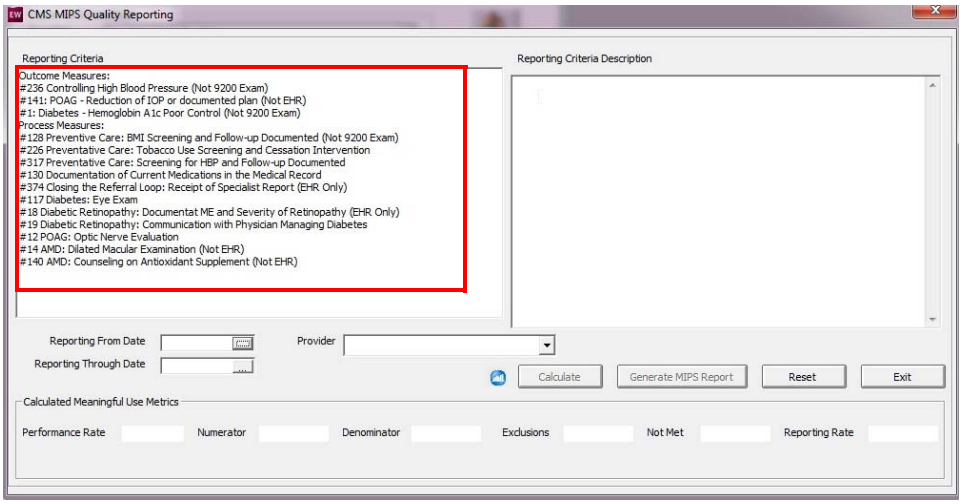
ExamWRITER 12.0.3 SP9 includes enhancements to the following areas:

- MIPS Quality Reporting, 53
- Patient Systemic Medications and Allergies, 55
- Impressions, 56
- Blood Pressure, 59

MIPS Quality Reporting

For more information on documenting MIPS quality measures, see article #000012383 in the Eyefinity Support Community.

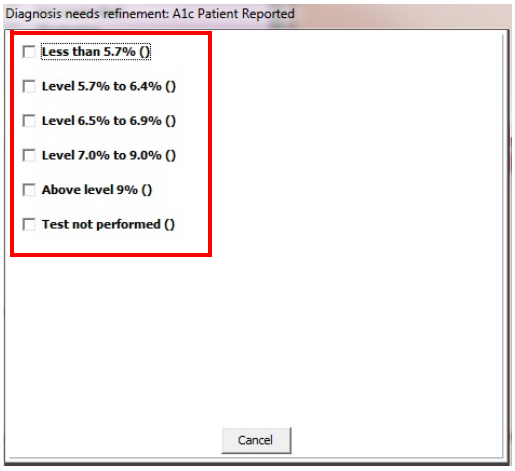
The list of quality measures has been updated to reflect the current CMS naming and PQRS numbering conventions. They are also now visually grouped together as outcome measures and process measures. The cross cutting heading for grouping measures was removed.



You can also now gather data and report on quality measure #1 (NQF0059), Diabetes - Hemoglobin A1c Poor Control. Document a diabetes diagnosis for the patient and then follow the instructions below to record the patient's A1c level:

1. Open a patient's exam.
2. Click the **Patient Hx - ROS** tab.
3. Click the **Review of Systems** bar.
4. Select **Endocrine** and click **Process**.
5. Select **A1c Patient Reported** and click **Process**.

6. Select the A1c level.



Based on your selection, ExamWRITER will autocode the 3044F (A1c level < 7%), 3045F (A1c level 7% to 9%), or 3046F (A1c level > 9% or test not performed) PQRS procedure code.

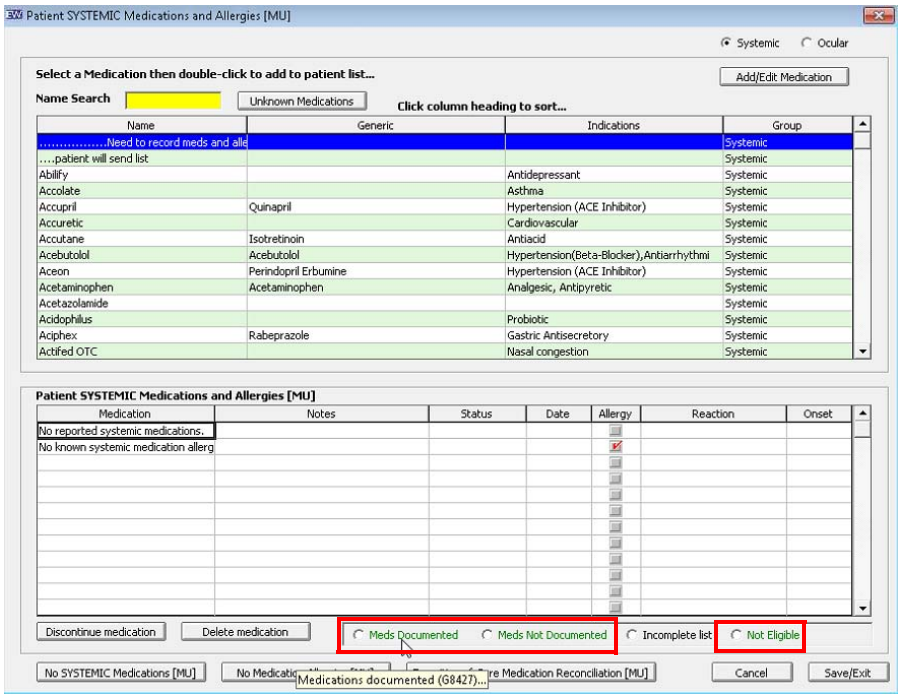
NOTE	NQF059 is an inverse quality measure. A *lower* calculated performance rate for this measure indicates better clinical care or control. The patient is numerator compliant if the most recent A1c level > 9% or is missing a result or if an A1c test was not done during the measurement year. If the most recent A1c level >9% or is missing, then the numerator will *not* increment. A good score for this measure is a low numerator (i.e., 2/30).

Patient Systemic Medications and Allergies

For more information on documenting MIPS quality measures, see article #000012383 in the Eyefinity Support Community.

If you are collecting quality data as part of the MIPS program, there are now updated medication verification selections for you to choose to document your performance of quality measure #130 (NQF0419), Documentation of Current Medications in the Medical Record:

- **Meds Documented**. This selection was previously called Verified Medications. It will continue to autocode G8427, indicating that you met the performance measure.
- **Meds Not Documented**. This selection was previously called Meds listed, not verified. It will continue to autocode G8428, indicating that you did *not* meet the performance measure.
- **Not Eligible**. This selection was previously called Not available to verify. It will now autocode G8430, indicating a exception to meeting the measure.

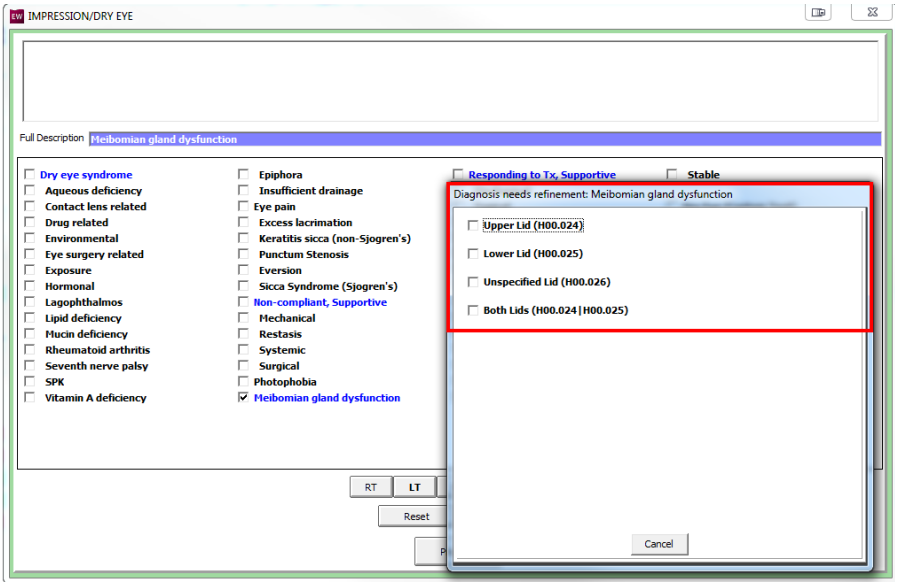


Impressions

Specifying impressions recorded in exams will lead to fewer Medicare insurance claim rejections.

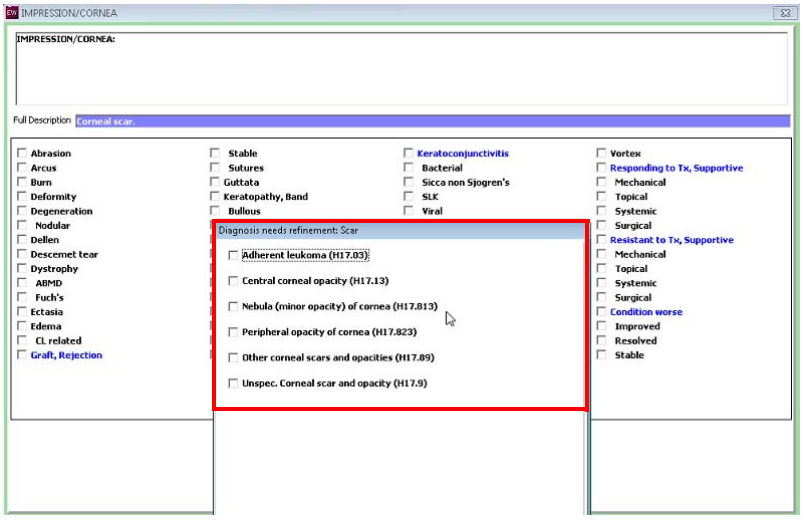
- You can now record a meibomlan gland dysfunction dry eye impression. When selected, you can specify the following lids:
  - Right upper lid (H00.021)
  - Right lower lid (H00.022)
  - Right unspecified lid (H00.023)
  - Both right lids (H00.021 and H00.022)
  - Left upper lid (H00.024)
  - Left lower lid (H00.025)
  - Left unspecified lid (H00.026)
  - Both left lids (H00.024 and H00.025)
  - Both left and right lids
  - Unspecified lids (H00.029)

  Your selections are autocoded.

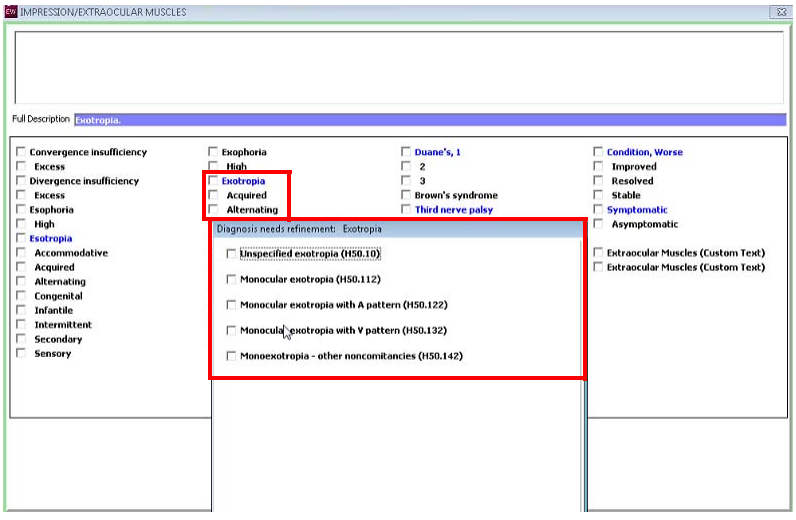


- You can now record types of cornea scar impressions. When selected, you can specify the following impressions:
  - Adherent leukoma (H17.0X)
  - Central corneal opacity (H17.1X)
  - Nebula (minor opacity) of cornea (H17.81X)
  - Peripheral opacity of cornea (H17.82X)
  - Other corneal scars and opacities (H17.89)
  - Unspecified corneal scar and opacity (H17.9).

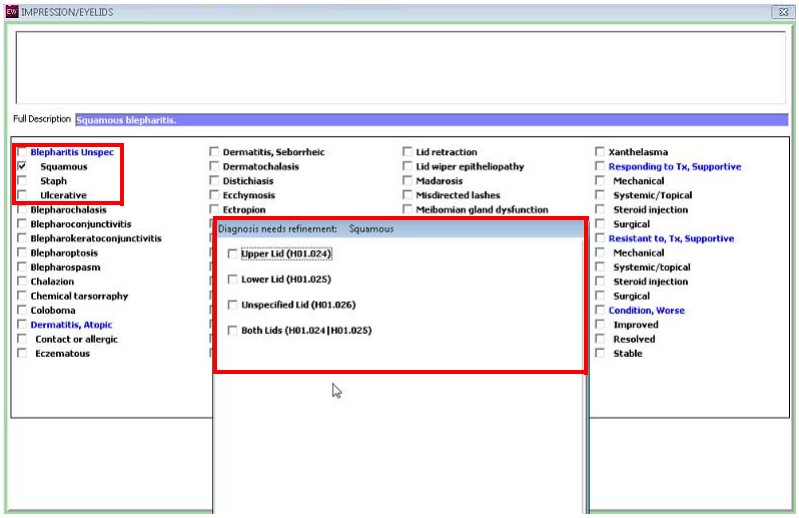
  Your selections are autocoded.



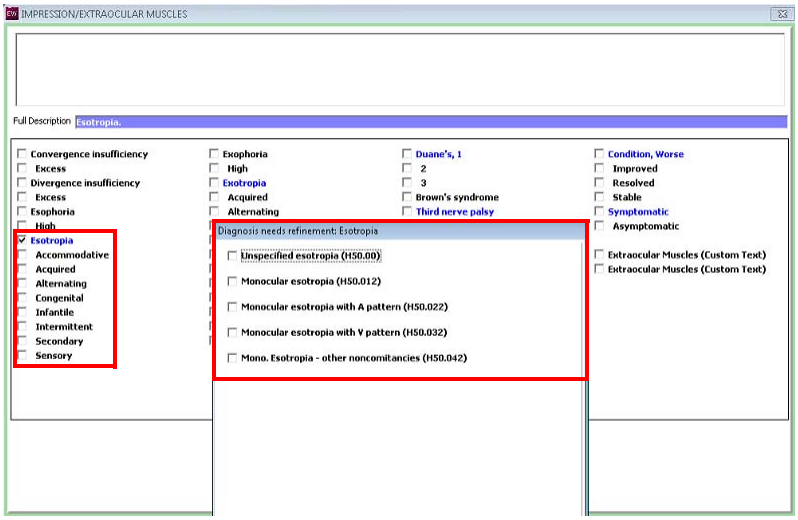
- You can now record types of exotropia impressions. When selected, you can specify the eye. Your selections are autocoded.



- You can now record types of blepharitis impressions. When selected, you can specify the eye. Your selections are autocoded.



- You can now record types of esotropia impressions. When selected, you can specify the eye. Your selections are autocoded.



Blood Pressure

For more information on documenting MIPS quality measures, see article #000012383 in the Eyefinity Support Community.

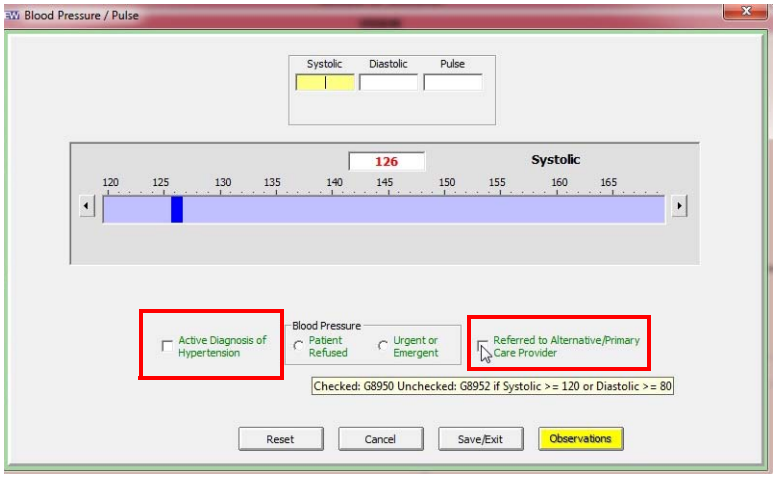
You can now more accurately record and autocode blood pressure data. Based on the systolic and diastolic measurements that you record (or don't record), the exam is autocoded with procedure codes to help you meet MIPS quality measures #236 (NQF0018), Controlling High Blood Pressure, and #317, Preventative Care and Screening - Screening for High Blood Pressure and Follow-Up Documented.

To meet MIPS quality measure #236 and to autocode the exam with the procedure codes noted in the bulleted list below, you must record a 992xx procedure code and the I10 hypertension ICD-10 code. Then:

- If the systolic measurement is <140, the G8752 procedure code is autocoded.
- If the systolic measurement is >=140, the G8753 procedure code is autocoded.
- If the diastolic measurement is <90, the G8754 procedure code is autocoded.
- If the diastolic measurement is >=90, the G8755 procedure code is autocoded.
- If the systolic and diastolic measurements are not recorded, the G8756 procedure code is autocoded.

To meet MIPS quality measure #317 and to autocode the exam with the procedure codes noted in the bulleted list below, you must record a 992xxx or 92xxx procedure code. Then:

- If the systolic and diastolic measurements are not recorded, the G8785 procedure code is autocoded.
- If you select the **Active Diagnosis of Hypertension** check box, the G9744 procedure code is autocoded.
- If you do *not* select the **Active Diagnosis of Hypertension** check box, you can document that the patient was or was not **Referred to Alternative/ Primary Care Provider**. Based on the systolic and diastolic measurements that you recorded, the G8950 (>=120 or >=80) or G8952 (>=120 or >=80) procedure code is autocoded.



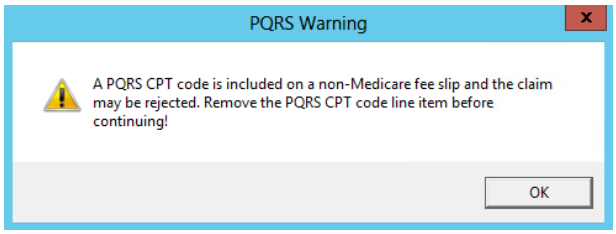
OfficeMate Fixed Issues

OfficeMate 12.0.3 SP9 fixes issues in the following areas:

- Fee Slips, 60
- Downloading VSP Lists, 60

Fee Slips

- If you are using Eyefinity EHR with OfficeMate and you record a PQRS code in an exam, you will receive a warning message when the charges populate on the OfficeMate fee slip. Non-Medicare fee slips that include PQRS codes may result in rejected insurance claims; the new warning message suggests that you remove the PQRS CPT code line items.



Downloading VSP Lists

- You no longer receive runtime error -2147217887 (80040e21) when downloading the Lens Style 3 list.
- You can now view and save updated VSP Lab lists that you download. Prior to this update, the downloaded labs were not visible on the VSP Approved Labs tab in the VSP Product Mapping window.

ExamWRITER Fixed Issues

ExamWRITER 12.0.3 SP9 fixes issues in the following areas:

- MIPS Quality Reporting, 60
- Blood Pressure, 60
- Special Testing, 61
- Surgery, 61
- Impressions, 61
- Formal Health Record, 61

MIPS Quality Reporting

For more information on documenting MIPS quality measures, see article #000012383 in the Eyefinity Support Community.

- The criteria description for quality measure #19 (NQF0089), Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care, no longer includes the 2021F CPT code; instead, it includes "performed macular exam."

Blood Pressure

- An active diagnosis of hypertension is now autocoded with the G9744 procedure code. If the patient refused blood pressure testing, the exam is

autocoded with the G9745 procedure code. G8784 is no longer autocoded for any blood pressure diagnoses, as that code was retired by CMS in 2017.

Special Testing

- Provocative testing is no longer autocoded with the 92140 procedure code, as that code was retired by CMS in 2017.

Surgery

- Release aqueous is no longer autocoded with the 65805 procedure code, as that code was retired by CMS in 2017. Instead, it is auto-coded using the 65800 procedure code.

Impressions

- Drusen rentina impressions now properly autocode with the H35.40 ICD-10 code.
- VR degen-secondary retina impressions now properly autocode with the H35.461 (right eye), H35.462 (left eye), H35.463 (bilateral eyes), and H35.469 (unspecified eye) ICD-10 codes.

Formal Health Record

- Right (RT) and left (LT) eye labels for pachymetry, CD ratio, and k-reading measurements are now correctly displayed. Prior to this service pack, measurements for both the right and left eyes were labeled RT.

What's New in the ExamWRITER Regulatory Patch

An ExamWRITER Regulatory Patch was released on June 14, 2017. This patch includes all of the enhancements and fixes in services packs 1-8, in addition to the following items. It does not include all of the enhancements and fixes in service pack 9, which must be installed prior to installing the ExamWRITER Regulatory Patch.

- ExamWRITER Enhancements, 61
- ExamWRITER Fixed Issues, 64

ExamWRITER Enhancements

The ExamWRITER Regulatory Patch includes enhancements to the following areas:

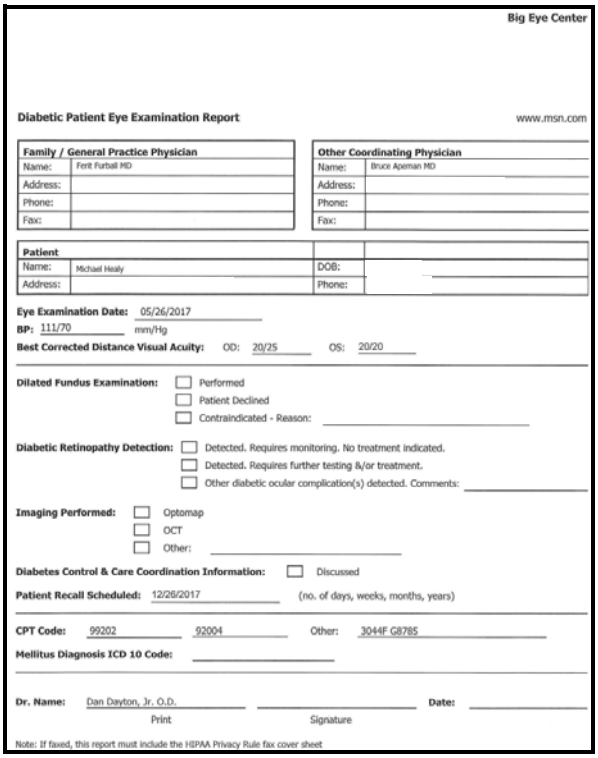
- Diabetic Letter, 62
- Glaucoma Letter, 63
- Products, 64

Diabetic Letter

You can now automatically generate and print a detailed routing slip for diabetes exams. To print the new diabetic patient eye examination report from within a patient's exam in ExamWRITER, click the **Print** icon and select **Diabetic Letter**.

NOTES

- Ensure that you have the following data recorded in the Location Maintenance window in OfficeMate/ExamWRITER Administration so that it populates in the letter:
  - Corporate Logo
  - Website
- Ensure that you have the following data recorded in the Reason for Visit window in the exam so that it populates in the letter:
  - Primary Care Physician and/or
  - Other Physician
- The following additional data, if recorded in ExamWRITER, will also populate in the letter:
  - Patient name, address, DOB, and home phone number
  - Exam date
  - Blood pressure
  - Visual acuity
  - Recall date
  - CPT codes
  - Diabetes ICD-10 code



Big Eye Center

Diabetic Patient Eye Examination Report www.msn.com

Family / General Practice Physician		Other Coordinating Physician	
Name:	Ferit Furball MD	Name:	Bruce Apeman MD
Address:		Address:	
Phone:		Phone:	
Fax:		Fax:	

Patient			
Name:	Michael Healy	DOB:	
Address:		Phone:	

Eye Examination Date: 05/26/2017
BP: 111/70 mm/Hg
Best Corrected Distance Visual Acuity: OD: 20/25 OS: 20/20

Dilated Fundus Examination: ☐ Performed ☐ Patient Declined ☐ Contraindicated - Reason:

Diabetic Retinopathy Detection: ☐ Detected. Requires monitoring. No treatment indicated. ☐ Detected. Requires further testing &/or treatment. ☐ Other diabetic ocular complication(s) detected. Comments:

Imaging Performed: ☐ Optomap ☐ OCT ☐ Other:

Diabetes Control & Care Coordination Information: ☐ Discussed

Patient Recall Scheduled: 12/26/2017 (no. of days, weeks, months, years)

CPT Code: 99202 92004 Other: 3044F G8785

Mellitus Diagnosis ICD 10 Code:

Dr. Name: Dan Dayton, Jr. O.D. **Date:**
Print Signature

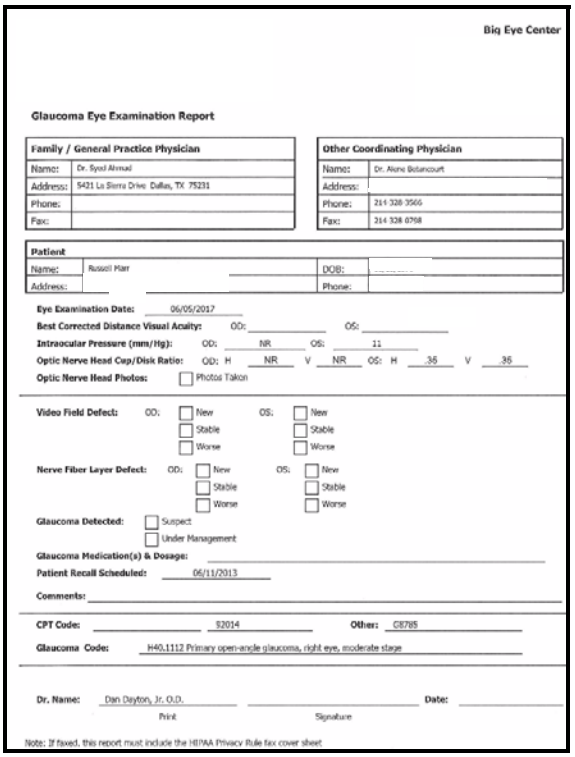
Note: If faxed, this report must include the HIPAA Privacy Rule fax cover sheet

Glaucoma Letter

You can now automatically generate and print a detailed routing slip for glaucoma exams. To print the new glaucoma eye examination report from within a patient's exam in ExamWRITER, click the **Print** icon and select **Glaucoma Letter**.

NOTES

- Ensure that you have the following data recorded in the Location Maintenance window in OfficeMate/ExamWRITER Administration so that it populates in the letter:
  - Corporate Logo
  - Website
- Ensure that you have the following data recorded in the Reason for Visit window in the exam so that it populates in the letter:
  - Primary Care Physician and/or
  - Other Physician
- The following additional data, if recorded in ExamWRITER, will also populate in the letter:
  - Patient name, address, DOB, and home phone number
  - Exam date
  - IOP
  - CD radio
  - Recall date
  - CPT codes
  - Glaucoma ICD-10 code



Big Eye Center

Glaucoma Eye Examination Report

Family / General Practice Physician	
Name:	Dr. Syed Ahmad
Address:	5421 La Sierra Drive Dallas, TX 75231
Phone:	
Fax:	

Other Coordinating Physician	
Name:	Dr. Alana Betancourt
Address:	
Phone:	214 328 3566
Fax:	214 328 6768

Patient			
Name:	Russell Marr	DOB:	
Address:		Phone:	

Eye Examination Date: 06/05/2017
Best Corrected Distance Visual Acuity: OD: OS:
Intraocular Pressure (mm/Hg): OD: NR OS: 11
Optic Nerve Head Cup/Disk Ratio: OD: H NR V NR OS: H .35 V .35
Optic Nerve Head Photos: ☐ Photos Taken

Visual Field Defect: OD: ☐ New ☐ Stable ☐ Worse OS: ☐ New ☐ Stable ☐ Worse
Nerve Fiber Layer Defect: OD: ☐ New ☐ Stable ☐ Worse OS: ☐ New ☐ Stable ☐ Worse
Glaucoma Detected: ☐ Suspect ☐ Under Management
Glaucoma Medication(s) & Dosage:
Patient Recall Scheduled: 06/11/2013
Comments:

CPT Code: 92014 Other: G8785
Glaucoma Code: H40.1112 Primary open-angle glaucoma, right eye, moderate stage

Dr. Name: Dan Dayton, Jr. O.D. Date:
Print Signature

Note: If faxed, this report must include the HIPAA Privacy Rule fax cover sheet

Beginning on July 1, 2017, doctors in FL, KY, LA, NV, NJ, ND, OH, OR, and RI are required to report CPT 99024 codes when providing care during a postoperative period.

Products

The **Postoperative follow-up visit** product with the 99024 CPT code was added to your products database so that you can now add it to exams and bill it on fee slips.

ExamWRITER Fixed Issues

The ExamWRITER Regulatory Patch fixes issues in the following areas:

- Blood Pressure Procedure Codes, 64
- MIPS Quality Reporting, 64
- Medication Orders, 64
- Impressions, 65
- Special Testing, 65

Blood Pressure Procedure Codes

- If the systolic measurement is exactly 140 or the diastolic measurement is exactly 90, the correct procedure codes will now be autocoded and counted towards meeting MIPS quality measure #236 (NQF0018 and CMS165), Controlling High Blood Pressure.
- The G9744, Active Diagnosis of Hypertension, procedure code is now counted as an exclusion towards meeting MIPS quality measure #317 (CMS22), Preventative Care and Screening - Screening for High Blood Pressure and Follow-Up Documented.
- The description of the G8756, No Documentation of Blood Pressure Measurement, Reason Not Otherwise Specified, is correct.
- The G8756, No Documentation of Blood Pressure Measurement, Reason Not Otherwise Specified, procedure code now autocodes properly. You no longer need to record a measurement in the blood pressure fields and then delete it to autocode G8756.

MIPS Quality Reporting

For more information on documenting MIPS quality measures, see article #000012383 in the Eyefinity Support Community.

- You no longer receive run time error -2147467259 (80004005), connection error 467259, or query timeout expiration error 21781 when you are calculating MIPS quality measure #1 (NQF0059 and CMS122), Diabetes – Hemoglobin A1c Poor Control, and generating a MIPS report.
- You can now record when you receive a specialist report after a patient referral to help you meet MIPS quality measure #374 (CMS50), Closing the Referral Loop – Receipt of Specialist Report.

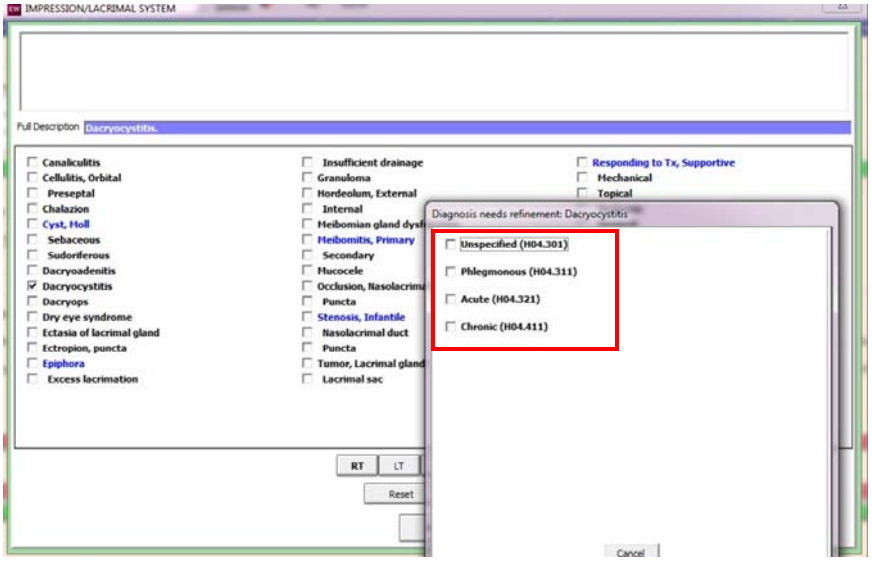
Medication Orders

- Medication details (strength, quantity, dosage, route, etc.) now automatically populate in medication orders if the medication selected contains those details. You no longer need to manually record these details in the order if the medication contains them.

Impressions

Specifying impressions recorded in exams will lead to fewer Medicare insurance claim rejections.

- You can now record types of Dacryocystitis impressions. When selected, you can specify the eye. Your selections are autocoded.



- Retina for RPE hyperplasia now correctly autocodes with the H35.89 ICD-10 code for all lateralities.
- Infiltrative Keratitis now correctly autocodes with the H16.8 ICD-10 code for all lateralities.

Special Testing

- Infiltrative Keratitis now correctly autocodes with the H16.8 ICD-10 code for all lateralities.

What's New in Service Pack 10

OfficeMate/ExamWRITER 12.0.3 service pack 10 (SP10) was released on September 20, 2017. Go to "Installing OfficeMate/ExamWRITER 12.0.3 SP12" on page 4 to install SP10. This service pack includes all of the enhancements and fixes in services packs 1-9 and the ExamWRITER Regulatory Patch, in addition to the following items:

- OfficeMate Enhancements, 65
- ExamWRITER Enhancements, 66
- OfficeMate Fixed Issues, 71
- ExamWRITER Fixed Issues, 71

OfficeMate Enhancements

OfficeMate 12.0.3 SP10 includes enhancements to the following areas:

- ICD-10, 66
- Merit-Based Incentive Payment System (MIPS), 66
- Eyefinity EHR Integration, 66

ICD-10

To prepare for the updated ICD-10 codes, complete the tasks in the Preparing for ICD-10 Updates document.

The OfficeMate/ExamWRITER database has been updated to include new ICD-10 codes that are required starting October 1, 2017. Additionally, several general ICD-10 codes will be deactivated on October 1. The retired codes will remain in the database and must be used on claims for service dates prior to October 1. To view a list of the 89 ICD-10 code changes that Eyefinity has identified as eyecare-related, read the 2018 ICD-10 Updates document.

Merit-Based Incentive Payment System (MIPS)

In OfficeMate 12.0.3 SP10, you can no longer access the Merit-Based Incentive Payment System (MIPS) menu options in OfficeMate Administration. You can, however, still access all MIPS menu options in ExamWRITER. In OfficeMate 14.0, you will once again be able to access MIPS menu options in OfficeMate Administration.

Eyefinity EHR Integration

When available with Eyefinity EHR in the near future, trial soft contact lenses will transfer from Eyefinity EHR to OfficeMate and be denoted as trial prescriptions in the Soft Lens order window.

ExamWRITER Enhancements

ExamWRITER 12.0.3 SP10 includes enhancements to the following areas:

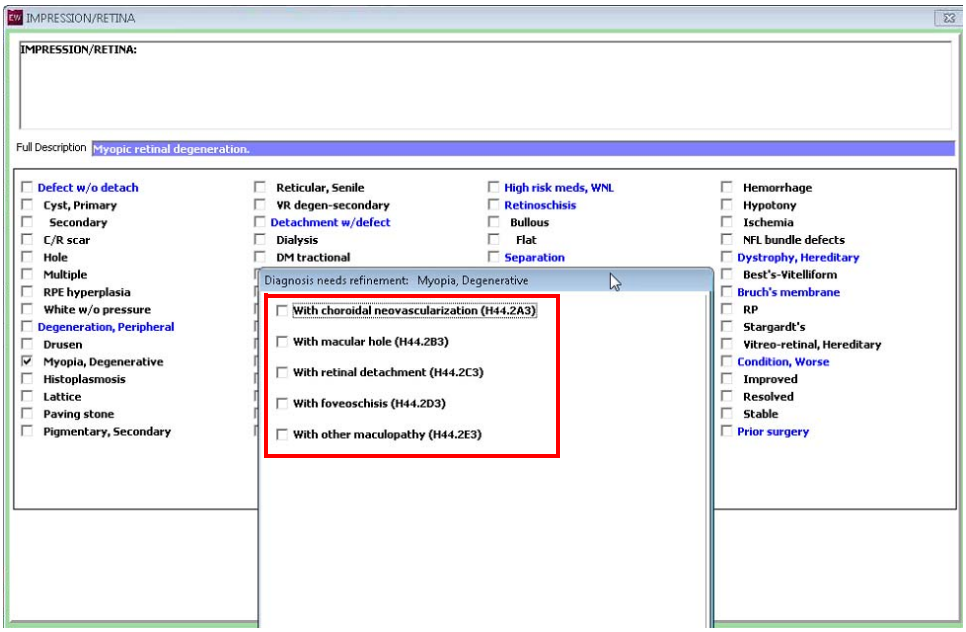
- ICD-10, 66
- MIPS Advancing Care Information, 67
- CMS MIPS Quality Reporting, 68
- Clinical Practice Improvement Activities, 69
- Tonometry, 70
- Diabetic Retinopathy, 70
- Diopsys Equipment Integration, 70

ICD-10

To prepare for the updated ICD-10 codes, complete the tasks in the Preparing for ICD-10 Updates document.

The OfficeMate/ExamWRITER database has been updated to include new ICD-10 codes that are required starting October 1, 2017. Additionally, several general ICD-10 codes will be deactivated on October 1. The retired codes will remain in the database and must be used on claims for service dates prior to October 1. To view a list of the 89 ICD-10 code changes that Eyefinity has identified as eyecare-related, read the 2018 ICD-10 Updates document.

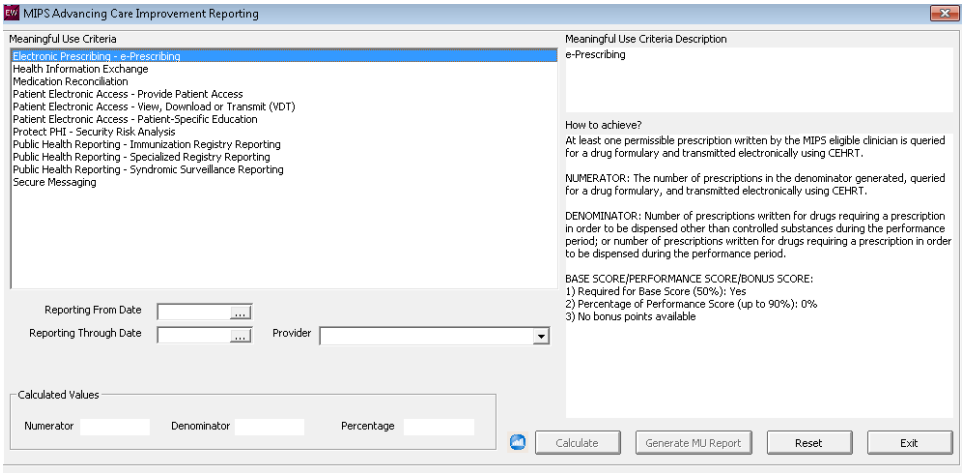
The only autocoding change occurred with myopic retinal degeneration (previously, high myopia); all other coding changes occurred with the simple addition or deactivation of ICD-10 codes that you manually add to exams.



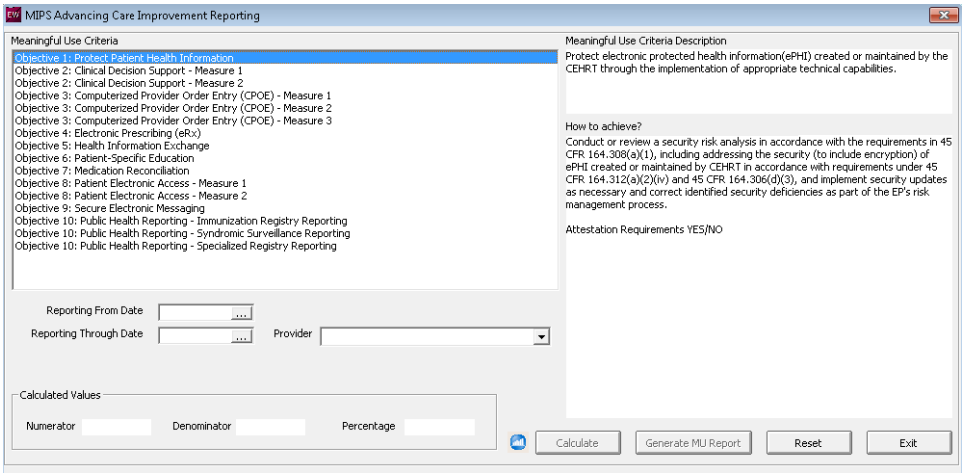
MIPS Advancing Care Information

In 2017 and 2018, there are slightly different objectives for reporting advancing care improvement information in the Medicare and Medicaid programs. All reporting measures and descriptions have been updated to include procedure and diagnosis inclusions and exclusions that CMS released in May 2017.

If you are participating in the *Medicare* program, calculate values for your advancing care improvement objectives by clicking **Reports** on the main window toolbar, selecting **Merit-Based Incentive Payment System (MIPS)**, selecting **Advancing Care Information**, and then selecting **Medicare**.



If you are participating in the *Medicaid* program, calculate values for your advancing care improvement objectives by clicking **Reports** on the main window toolbar, selecting **Merit-Based Incentive Payment System (MIPS)**, selecting **Advancing Care Information**, and then selecting **Medicaid**.

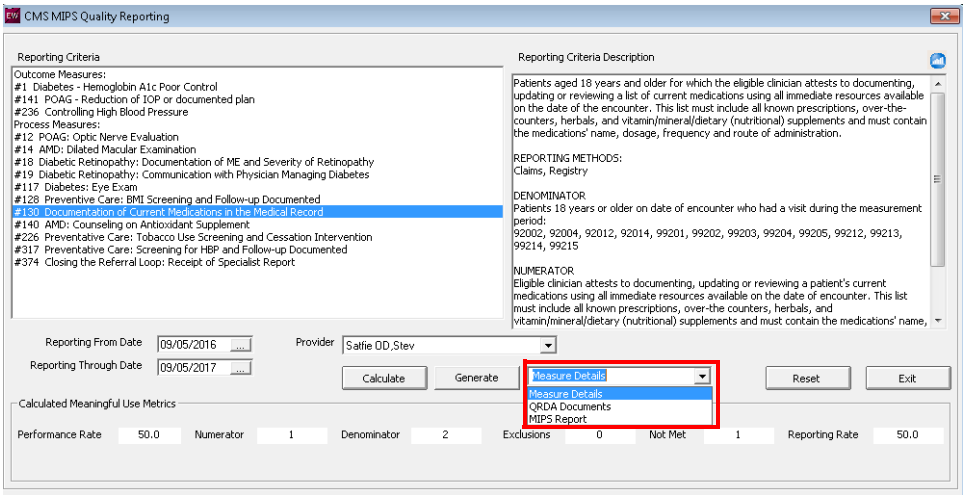


NOTE The Quick MU Report Card, previously accessible by pressing F8, is no longer applicable in the new MIPS program and, therefore, is no longer accessible. Instead, access historical meaningful use data in the CMS Meaningful Use Reporting windows.

CMS MIPS Quality Reporting

In addition to updating the reporting measures and descriptions to include procedure and diagnosis inclusions and exclusions that CMS released in May 2017, the following additional changes have been made in the CMS MIPS Quality Reporting window:

- Measure Details, 69
- QRDA Documents, 69
- MIPS Report, 69



Measure Details

Viewing quality measure details will clearly show you which patients were used to calculate the values for the objective and can help you troubleshoot reporting issues.

You can now view the details of each measure that you calculate. These details include dates, exam numbers, patient names, CPT codes, and ICD-10 codes. To view these details, calculate your metrics, select **Measure Details** from the drop-down menu next to the Generate button, and then click **Generate**.

NOTE	Improvements are still being made to the quality measure details and will be available in future versions. Currently, the details for measures #1, #18, #19, #117, #140, #226, and #317 could include deleted exams. In addition, the details for measure #14 AMD could include past exams outside of the reporting period. These known issues do *not* impact calculated metrics for reporting.

#12 POAG: Optic Nerve Evaluation

Date	Exam No	Patient Name	Exam CPT	Diagnoses
2017-09-19	17856	Cathy Bachman	99213,92014,4004F,G8427,G8397,5010F,3285F,0517F,4177F,3046F,2027F,2022F,2019F,G8783,G8752,G8754	I10,H47.22,H35.30,E10.3313,H40.1132
2017-09-15	17847	Daniel Deal	99213,G8952,G8752,G8754	I10
2017-09-16	17849	Medicare Patient	99214,92004,4004F,G8397,5010F,3285F,0517F,3046F,2027F,2022F,G8427,G8952,G8752,G8754,4177F,2019F	I10,H47.293,H40.1131,H35.30,E10.3213,H35.3111

QRDA Documents

You can now generate CAT III files that meet 2017 requirements. To generate these files, calculate your metrics, select **QRDA Documents** from the drop-down menu next to the Generate button, and then click **Generate**.

MIPS Report

As in prior versions, you can still generate a MIPS report; however, now you must calculate your metrics, select **MIPS Report** from the drop-down menu next to the Generate button, and then click **Generate**.

Clinical Practice Improvement Activities

From ExamWRITER, you can now directly access a document that details the 2017 MIPS improvement activities most applicable to eyecare practices. To access this document, click **Reports** on the main window toolbar, select **Merit-Based Incentive Payment System (MIPS)**, and then select **Clinical Practice Improvement Activities**.

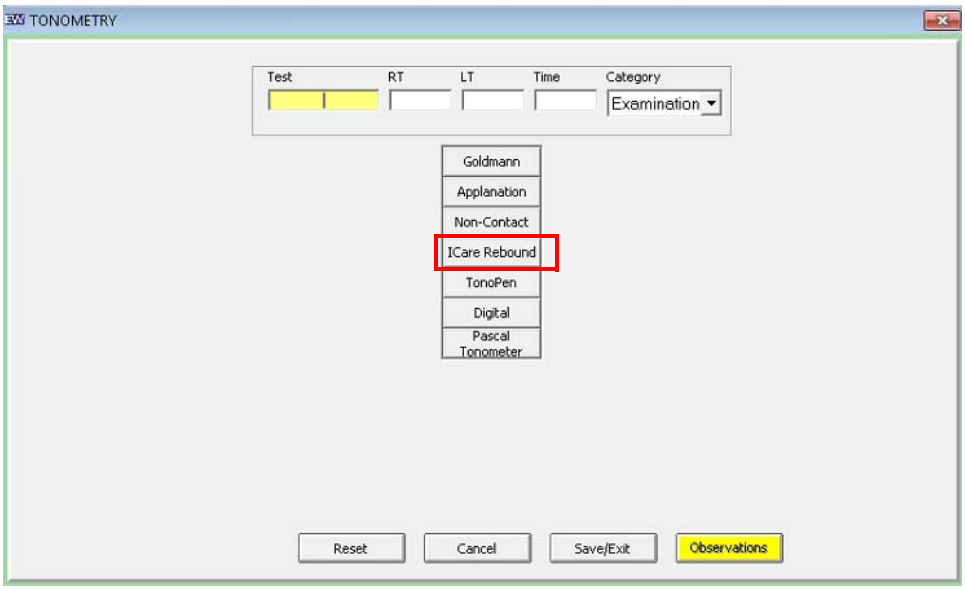
In this new performance category for 2017, you're rewarded for care focused on care coordination, beneficiary engagement, and patient safety. The Improvement Activities category is worth 15% of your total MIPS score.

You may select activities that match your practice's goals from a list of more than 90 options. Medium weighted activities are worth 10 points, and heavily weighted activities are worth 20 points. You must select different activities every year.

Tonometry

Customer Request: This enhancement resulted from a customer request made through Facebook.

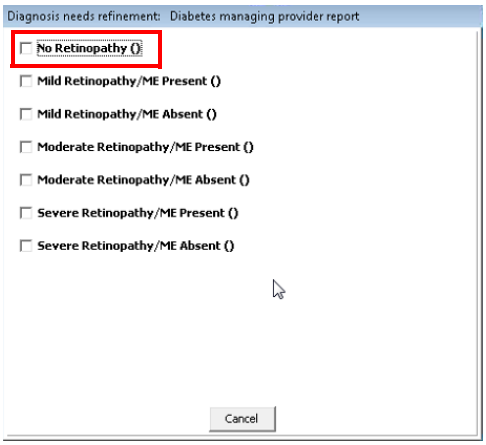
You can now record **ICare Rebound** tonometry tests. The older Indentation test was replaced with the more modern ICare Rebound test.



Diabetic Retinopathy

Customer Request: This enhancement resulted from a customer request made through Facebook.

You can now document a patient with no retinopathy in a diabetes managing provider report. Selecting this option does not autocode an ICD-10 code and does not impact CMS MIPS quality measure #19 - Diabetic Retinopathy: Communication with Physician Managing Diabetes, but it does allow you to more accurately record patient plan information.



Diopsys Equipment Integration

You can now integrate with the Diopsys ERG to transfer electroretinography vision tests and reports to ExamWRITER. You can also integrate with the Diopsys VEP to transfer visual evoked potential vision tests and reports to ExamWRITER. For more information on using these new pieces of diagnostic equipment, see the *ExamWRITER Equipment Integration User's Guide*.

OfficeMate Fixed Issues

OfficeMate 12.0.3 SP10 fixes issues in the following areas:

- Fee Slips, 71
- UB04 Claims, 71
- Eyefinity EHR Integration, 71

Fee Slips

- If you create a fee slip that contains a product with a PQRS CPT code and select an insurance set up to bill PQRS codes, then you will no longer receive a warning message that suggests that you remove the PQRS CPT code line item. You will only receive the warning message if you select an insurance that is *not* set up to bill PQRS codes.

UB04 Claims

- You can now successfully create a batch file of UB04 claims.

Eyefinity EHR Integration

- Soft contact lenses transferred from OfficeMate to Eyefinity EHR now contain the correct prescription information and special instructions.

ExamWRITER Fixed Issues

ExamWRITER 12.0.3 SP10 fixes issues in the following areas:

- CMS MIPS Quality Reporting, 71
- Glaucoma Letter, 71
- Diabetic Letter, 71

CMS MIPS Quality Reporting

- The calculations for quality measure #1, Diabetes - Hemoglobin A1c Poor Control, are now correct in the MIPS Quality Reporting window.

Glaucoma Letter

- You no longer receive error 9 when trying to print the Glaucoma letter.

Diabetic Letter

- You no longer receive error -217887 when trying to print the Diabetic letter.

What's New in Service Pack 11

OfficeMate/ExamWRITER 12.0.3 service pack 11 (SP11) was released on March 1, 2018. Go to "Installing OfficeMate/ExamWRITER 12.0.3 SP12" on page 4 to install SP11. This service pack includes all of the enhancements and fixes in services packs 1-10 and the ExamWRITER Regulatory Patches, in addition to the following items:

- OfficeMate Fixed Issues, 72
- ExamWRITER Fixed Issues, 72

OfficeMate Fixed Issues

OfficeMate 12.0.3 SP11 fixes issues in the following area:

- Third Party Setup, 72

Third Party Setup

- PQRS code 2019F (ARMD Dilated Exam) is no longer accepted by CMS and was removed from OfficeMate. This code was replaced with G9974 (Dilated Macular Exam Performed). Additionally, the new G9975 (Dilated Macular Exam not Performed Medical Reasons), G9892 (Dilated Macular Examination not Performed Patient Reasons), and G9893 (Dilated Macular Examination not Performed Unspec. Reason) procedure codes were added to your database so that you can record them on fee slips when necessary.
- The new G9902 (Patient Screened for Tobacco Use, Tobacco User), G9903 (Patient Screened for Tobacco Use, Non Tobacco User), G9904 (Tobacco Screening not Performed, Medical Reason), and G9905 (Tobacco Screening not Performed, No Reason Given) procedure codes were added to your database so that you can record them on fee slips when necessary.

ExamWRITER Fixed Issues

ExamWRITER 12.0.3 SP11 fixes issues in the following areas:

- CMS MIPS Quality Reporting, 72
- Diagnosis/Procedure Coding, 73

CMS MIPS Quality Reporting

- You no longer receive run-time error -2147217871, query timeout expired, when attempting to calculate 2016 NQF measures.
- You can now successfully generate 2017 MIPS Quality QRDA files that include exam data from ExamWRITER. After generating these files, you can submit them to CMS for MIPS Quality reporting.

  QRDA files are required only for the EHR submission method. If you used claims-based reporting or the AOA MORE registry, you may also report using EHR submission, but you are not required to. CMS will give you credit for the submission method that yields the highest score in the quality category. For detailed information on how to generate and submit QRDA files, go to www.eyefinity.com/dam/eyefinity/documentation/OM/MIPS/2017quality/2017-MIPS-Quality-QRDA-Generator.pdf.

Submit 2017 Quality data to CMS before March 31, 2018, by creating and submitting the QRDA file to https://qpp.cms.gov/. You can attest for the same measures that you could with the AOA MORE Registry and could possibly receive a higher score.

NOTE	If you plan to generate 2017 MIPS Quality QRDA files, verify that you have Microsoft .NET Framework version 4.5.2 installed on the workstation on which you plan to generate the QRDA files prior to generating the files. For instructions on how to verify your .NET Framework version, go to https://docs.microsoft.com/en-us/dotnet/framework/migration-guide/how-to-determine-which-versions-are-installed. To download .NET Framework version 4.5.2, go to https://www.microsoft.com/en-us/download/details.aspx?id=42642.

Diagnosis/Procedure Coding

The new Dilated Macular Examination procedure codes added to ExamWRITER ensure that you are able to generate correct data for MIPS measure #14, Age-Related Macular Degeneration (AMD): Dilated Macular Examination.

- PQRS code 2019F (ARMD Dilated Exam) is no longer accepted by CMS and was removed from ExamWRITER. This code was replaced with G9974 (Dilated Macular Exam Performed) and is auto-coded when you process the following selections in ExamWRITER:
  - Exam > Macula > Geographic atrophy/thinning of the macula structure is noted
  - Impressions > Macula Choroid, Atrophy, Areolar > Geographic; Degeneration, ARM; Disciform; Exudate; Non-exudative; Unspecified; Wet; Severity (Mild, Moderate, Severe)
  - Exam > Choroid > Geographic

  Additionally, the new G9975 (Dilated Macular Exam not Performed Medical Reasons), G9892 (Dilated Macular Examination not Performed Patient Reasons), and G9893 (Dilated Macular Examination not Performed Unspec. Reason) procedure codes were added to your database so that you can record them on fee slips when necessary.

The new Tobacco procedure codes added to ExamWRITER ensure that you are able to generate correct data for MIPS measure #226, Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention.

- The new G9902 (Patient Screened for Tobacco Use, Tobacco User) and G9903 (Patient Screened for Tobacco Use, Non Tobacco User) procedure codes are auto-coded when you process the following selections in ExamWRITER:
  - Social History > Smoking (G9902)
  - Social History > Non Smoking (G9903)

  Additionally, the new G9904 (Tobacco Screening not Performed, Medical Reason) and G9905 (Tobacco Screening not Performed, No Reason Given) procedure codes were added to your database so that you can record them on exams when necessary.

What's New in Service Pack 12

OfficeMate/ExamWRITER 12.0.3 service pack 12 (SP12) was released on August 28, 2018. Go to "Installing OfficeMate/ExamWRITER 12.0.3 SP12" on page 4 to install SP12. This service pack includes all of the enhancements and fixes in services packs 1-11 and the ExamWRITER Regulatory Patches, in addition to the following items:

For more information about the ICD-10 changes effective October 1, refer to the "2019 ICD-10 Updates" document.

- Updated the ICD-10 code set for 2019. This enables OfficeMate and ExamWRITER to automatically switch to the new code set on October 1, 2018.
- Updated security protocols to restore GPN The EDGE dashboard access.

Known Issues

The following issues will be fixed in a future version of OfficeMate/ExamWRITER:

- **Custom Diagnosis Code Descriptions:** If you are upgrading from version 12.0.3 SP9 or below, then any diagnosis codes descriptions that you customized are overwritten after installing SP11.
- **Missing Payment Method in OfficeMate Patient Ledger:** The Reference column in the Patient Ledger window does not retain the correct payment method when a fee slip is edited.