

WinCare Release Notes

Caution Please Read

WinCare Version 7.1 Service Release 5 - May 2, 2012

General:

- MDS 3 - Section O: Fixed a problem where parts of O0100 column 1 were not enabled correctly.
- MDS 3 - Section Q: Fixed a problem with Q0550A and Q0550B values not always saving when changed.
- MDS 3 - Section V: Added right-click menu with options for Copy and Paste to the Date and Location text boxes and the CAA Resources text boxes.
- MDS 3 - Checking and Closing: Revised the timeout message in Checking and Closing when the VUT doesn't respond to include common solutions for the problem.
- MDS 3: Fixed the printing of the Washington Quarterly assessment.
- Fixed Control panel issues for RCF customers.

Integrated:

- Fixed a problem with the display of invoice dates on the Single Resident Payment screen.
- Fixed a problem in the Change of Status screen where RUG values from non-PPS assessments were being displayed.
- Enhancements made in Billing, Claims, and EDI. Including fixes for Run-time errors.
- Enhancements in Ancillaries - Import Therapy Charges: Files will not import that are missing medical record numbers; fixed some problems in the import log file; added the ability to import therapy minutes if provided from the therapy service.
- Fixed the Medicaid Billing report, Recipient Liability is now showing on the report.

WinCare Version 7.1 Service Release 4 - April 11, 2012

General:

- Fixed the printing of the CAA Summary report from section V of an MDS 3 assessment.
- All Version 1.10 MDS 3 assessments print correctly.
- Fixed the tab order for MDS sections A, B, C, D,E, K, and Q.
- Fixed skip problems on MDS assessments for items A1500, A1510, and K0510C1 - Z1.
- Fixed copy problems for MDS 3 assessments.

Integrated:

- Fixed error that can occur when updating bills.
- Fixed the problem of not being able to print UB04s from the A/R Reports menu.

WinCare Version 7.1 Service Release 3 - March 29, 2012

General:

- The MDS 3 has been updated for the Version 1.10 changes that are effective on April, 1 2012. The entry screens and transmission file creation use the updated specifications. The CAT triggers have been updated for the item changes. Any assessments with an ARD of April 2012 or later, that were created prior to installing Service Release 3 will need to be copied to create new assessments with specification changes.
- The wording changes on some of the Version 1.10 assessment printouts was not completed for the service release, The corrected printouts will be available in another service release.
- The MDS 3 Add screen now includes the Target Date for the assessment, to facilitate the usage of the correct MDS 3 specifications.
- Some of the fields changed in the 1.10 specs of MDS 3 affected RUGs calculation. Therefore, when using this release, you will see a new RUGs calculation version, 1.0266. This will alleviate the messages users were getting warning about their RUGs versions, which happened because the States updated their RUGs systems early.
- Updated the Help in MDS 3 for the April 2012 changes.
- Fixed Missing dates for A2300 on ISC "NO" assessments.
- Updated Section S for Ohio, item S8520C is required on all ISC's effective 4/1/2012.
- Integration with S-cores for real time ADL entry and suggestions for completing the Section G ADL items.

Integrated:

- Fixed missing RUG line "0022" on Medicare Part-A Claims when there is a resumption of Therapy.
- WinCare is in the process of developing an Outpatient module. With this version you will see some references to the new module. It will be available in another service release.
- Reminder for electronic claim submission: You cannot use the payor "PI" (Private INS) for the 5010 format electronic claims which went into effect on 1/1/2012. The actual payor needs to be added to the Payor Definitions in Master Files and used instead of "PI".

WinCare Version 7.1 Service Release 2 - January 18, 2012

General:

- Enhancements in the printing of Start of Therapy (NS) assessments.
- We have started a software page on Facebook. As more people "Like" our Facebook page, we will be able to add additional features. So if you have a Facebook account, please visit us on [Facebook](#) and leave a comment. Check our page often to provide interactive feedback and to receive additional information.

Integrated:

- Includes 2012 HCPCS and CPT codes.
- Enhancements for 5010 electronic claims.
- Enhancements to claims with Change of Therapy assessments.
- Enhancements for the recording of Refunds in the Payments module.
- Reminder for electronic claim submission: You cannot use the payor "PI" (Private INS) for the 5010 format electronic claims which went into effect on 1/1/2012. The actual payor needs to be added to the Payor Definitions in Master Files and used instead of "PI".

WinCare Version 7.1 Service Release 1 - October 26, 2011

General:

- The program for the ADL module in the original Clinical install released on September 30, 2011 was the older version and did not work with 7.1. The 7.1 version of the ADL module is included in this service release.
- The MDS Copy feature in WinCare has changed: When a copy of an assessment is made the ARD is now set to the current date, before it remained the original date of the source assessment. This will fix problems with O0450 when a copy is made of an assessment with an ARD prior to October 1, 2011.
- Fixed a problem with O0450B being active on assessment ISCs "ND" and "SD".
- Updated the HL7 interface for the ADL capture software. This fixes the problem of HL7 files not being created when resident information in WinCare changes.
- Updated the MDS 3.0 printed forms to have the correct version and date on the footer.

Integrated:

- The Medicare-A claims creation used to use either the Admit/Reentry date for the start of a Medicare-A PPS Schedule or the change from a non-skilled to skilled level of care. Now the software will rely on the A2400 Date (Start of Last Medicare Stay) of each assessment. This will help the software handle better the cases of when the PPS Schedule does not start with the Admission/ReEntry.
- Fixed a problem that prevented creating claims from adjustment invoices.
- Fixed an error that can occur when checking a claim that is incorrectly filled out.
- Fixed a problem that can occur when creating 5010 837I electronic claim files.

WinCare Version 7.1 - September 30, 2011

General:

- The MDS 3.0 has been updated to support version 1.02 of the MDS 3 Specifications which go into effect on 10/1/2011. Assessments with a reference date of 10/1/2011 or later must follow the version 1.02 specifications. Please refer to the updated CMS RAI Manual for information on the Change of Therapy assessment (COT), Resumption of Therapy assessment (EOT-R), and the new PPS assessment schedule.
- The MDS 3 Scheduler supports the new PPS Schedule, it does NOT support COT scheduling at this time. Facilities will need to manually track their COT assessments, see chapter 2 of the CMS RAI manual for the COT schedule.
- The MDS 3 Section Help in WinCare has been updated with the latest CMS RAI Manual Chapter 3 files.
- The Section S changes for Connecticut and Ohio that are effective 10/1/2011 are included in this release.
- For assessments with an ARD in October that were created prior to installing Version 7.1, there may be problems with the values in the new fields: O0450A, O0450B, X0900E. If the Validation Utility Tool reports an error like " Invalid value for this item., Value "; " for the new fields, then make a copy of the assessment which will update the values for the new fields.
- **If any assessment has A0310C=0, 1 or 4 OR A0310F not equal 99, then O0450A and O0450B must be grayed out.** If you attempt to send your assessment on/after 10/1/2011 without this being the case, the assessment will be rejected. To fix this, just go to MDS 3, highlight the assessment. Click copy and OK. The copied assessment will then have O0450 enabled/grayed as appropriate. Send the copied assessment normally. You can delete the original. NEW assessments created on or after 10/1/11 won't have this problem, it only applies to assessments that were made prior to installing 7.1 but have Assessment Reference Date (A2300) of 10/1/2011 or later.
- CMS has updated the Validation Utility Tool (VUT) to version 1.2, we have the new version in the download section of our website. The VUT now supports version 1.02 of the MDS 3 Data Specifications, while continuing to support versions 1.0 and 1.01 for older assessments. Version 1.02 is effective on 10/1/2011. You need to be using version 1.2 of the VUT by 10/1/2011.
- To insure data integrity when WinCare starts, it will check that the program files and the data files are the same version. All workstations need to be running the same version and service release. If the program detects that they are not the same version, the problem must be fixed before access to WinCare will be allowed.
- To inform users of WinCare updates, the program will check the WinCare website for the current version of WinCare and display a message if there is a newer version. If there is a newer version the user can contact their computer person (IT professional) to install the update.

Integrated:

- Notice for facilities that are submitting electronic claims to Medicare: In May, CMS announced two changes for Medicare A billing that went into effect on August 1, 2011. WinCare does not automatically fill in values for these mandated entries. A future service

release will do these entries automatically, however until then, this is what you need to do:

1. In all cases where an MDS End of Therapy (EOT) - Other Medicare Required Assessment (OMRA) is completed, SNFs must submit occurrence code 16, date of last therapy, to indicate the last day of therapy services (e.g. physical therapy, occupational, and speech language pathology) for the beneficiary. Please note that only one occurrence code may be billed on a single claim, therefore, you would use the final date therapy was provided in relation to the latest EOT OMRA applicable for the claim being billed. (Note: If the HIPPS code for Rev. Cd. 0022 on the claim ends in 4, 5, or 6, then the assessment was an EOT and you need to add the occurrence code 16. The date for the occurrence code will be the latest date for O0400A6, O0400B6, or O0400C6 from the EOT MDS assessment.)
 2. Therapy services, that is revenue codes 042x, 043x, and 044x, the units need to now represent the number of calendar days of therapy provided. For example, if the beneficiary received physical therapy, occupational therapy and speech-language pathology on May 1, that would be considered one calendar day and would be billed as one unit. If a resident received physical therapy three distinct times on a given day, it will be reported on the Part-A claim as one unit of Physical Therapy.
- Facilities using electronic billing in WinCare can begin testing the 5010 Institutional claim format with Medicare and Medicaid. As of January 1, 2012 all claims must be submitted in the 5010 format, and you cannot send 5010 claims for payment until you have passed 5010 testing with your provider. Significant changes have been made in the EDI setup for the new 5010 format and the existing 4010 format, the WinCare Support team is available to help make the changes that are needed. **If you are doing electronic billing with WinCare please contact WinCare Support (800-889-2349) after installing this release. If you have electronic claims that need to be transmitted soon, we recommend that you finish that billing and claim submission before installing the upgrade.**