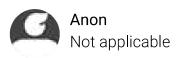


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10-09-2019 11:58 AM

CMP Weekly release 0.0.0.4094 (Part One)

Care Management Platform (CMP)

CMP Weekly Release (UK Edition)

Build 0.0.0.4094 | October 9th, 2019

These are the highlights of the changes available in this week's Care Management Platform (CMP) release. It should be noted that these updates are specifically for those customers using CMP in the UK.

NHS Claims Integration

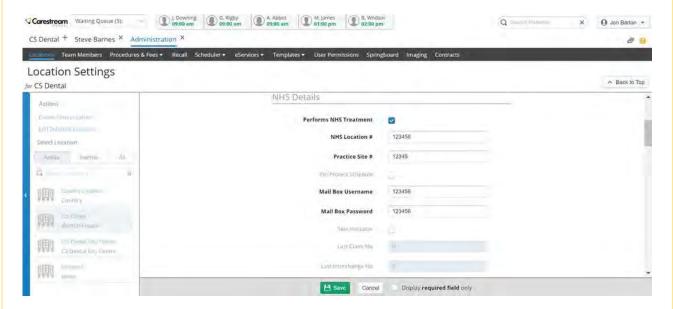
This week's release includes the implementation of the NHS Claims integration, which allows NHS practices to complete NHS-based courses of treatment and transmit claims. This is a major advancement in the workflow support for UK practices using CMP. English and Welsh practices can now configure their locations and team members as NHS performers, along with flagging patients as NHS patients, to allow for the delivery (and reimbursement) of NHS-based courses of treatment.

As a quick summary, UK-based CMP users in England and Wales can now:

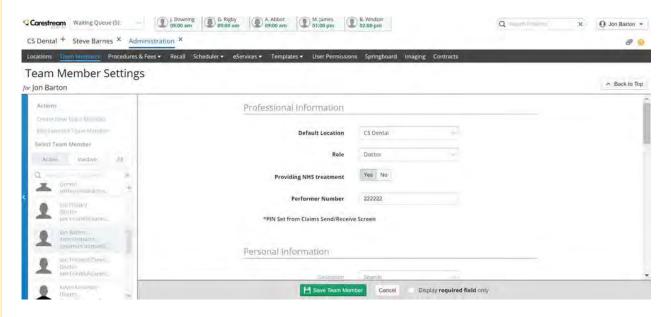
- Set English and Welsh locations and associated team members as NHS performers;
- Create and manage NHS UDA contracts and performance targets;
- Define and manage both NHS and private procedure lists and fee schedules;
- Add / edit specialist treatment items that are not within the standard set of NHS codes;
- Set patients as NHS (or private-only) and define any exemptions;
- Open and chart NHS courses of treatment, with relevant charge banding calculations;
- · Automatically create NHS claims from courses of treatment; and
- Transmit and manage NHS claims, including rejected and adjusted claims.

NHS General Configuration

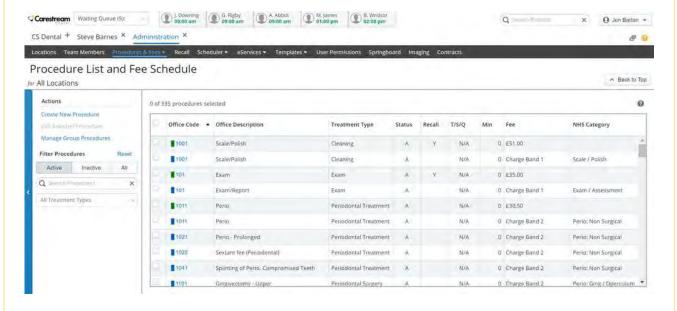
The necessary information for practices performing and claiming NHS treatment can be defined via the new NHS Details fields in the Location Settings UI (Administration Tab → Location Settings). Here, administrators can define that the location does perform NHS treatment and can add the NHS Location Number, Practice Site Number, and NHS Mailbox settings. Additionally, the most recent NHS claim number and interchange number can also be viewed for reference.



Team members can also be configured for performing and claiming NHS treatment via new fields added to the Team Member Settings UI (Administration Tab \rightarrow Team Member settings). Here, users can specify that they provide NHS treatment and define their NHS Performer Number. Note that the provider's PIN will be set and verified when sending and receiving NHS claims.

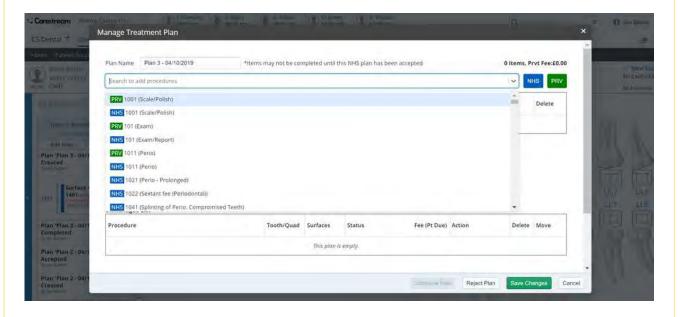


Administrators can also create and manage both NHS and private procedures via the Procedure List and Fee Schedule UI (Administration Tab \rightarrow Procedures & Fees \rightarrow Procedure List & Fee Schedule). Here, users can create both private and NHS procedures, supporting the delivery of treatment and services for both categories of service. For NHS procedures, users simply select the associated NHS Category for the service and the correct charge banding and UDA credit will automatically be determined. The NHS category also ensures the relevant Clinical Data Set item is populated in the NHS claim when that procedure is added to a treatment plan.

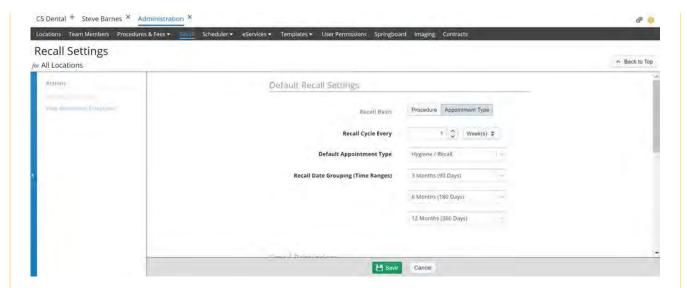




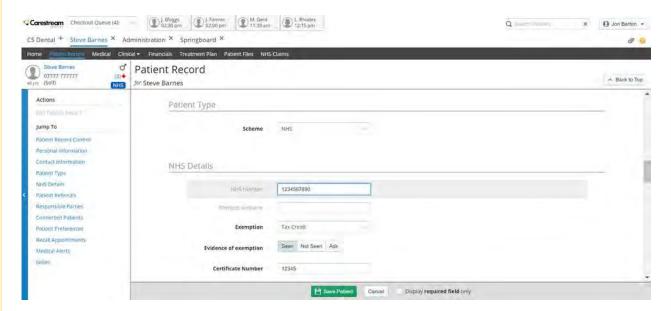
When searching, scheduling, planning, and posting procedures, private procedures will be tagged in green (PRV) and NHS procedures will be tagged in blue (NHS), allowing for users to more easily identify and select the appropriate procedures / charges when working. The ability to select and/or use private and NHS-based procedures (or mixed courses of treatment) is all automated according to NHS rules, making it easy for users to avoid common mistakes.

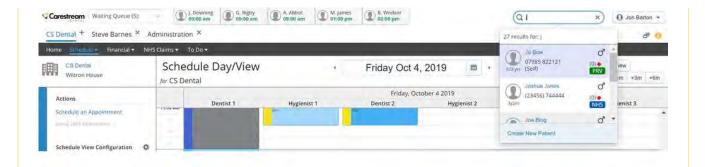


Practices can also now control their recall business by specific (recall-flagged) procedures or by appointment types via the Recall Settings UI (Administration \rightarrow Recall \rightarrow Recall Settings). Previously, practices had to set up specific procedures for controlling the recall date calculation for patients. Recalling patients based on appointment type is strongly advised for any NHS patient and any "Recall" appointment type available can be used as the default to use for new patients. NICE recalls default to a 6 month cycle in the NHS claim, but can be modified by the user as needed.



Finally, users are able to define the requisite details for any patients eligible for NHS treatment using the new NHS Details fields available within the Patient Record UI (Patient Tab → Patient Record). Here, users can now set the patients scheme to NHS, define his or her NHS number, previous surname, and any additional Exemption Details. Additionally, once a patient is designated as the NHS scheme, a blue "NHS" marker will be added to his or her Patient MiniCard UI, making it quick and easy to know whether a patient is NHS or private-only whenever searching for or reviewing a patient.

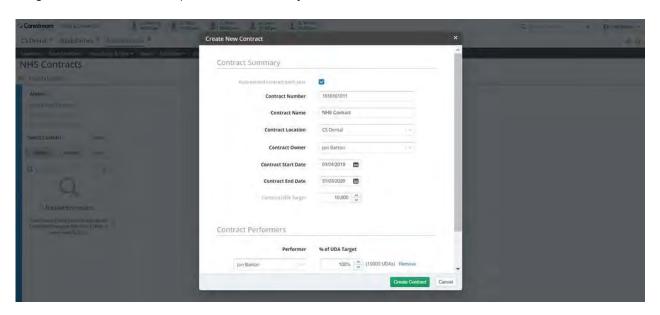




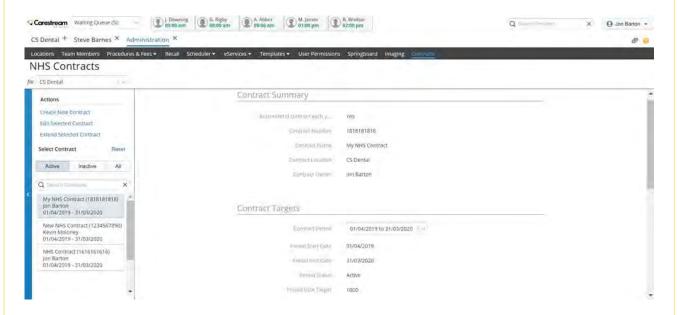
NHS Contracts & UDA Reporting

The practice's NHS contracts can be set up and managed via the new NHS Contracts UI (Administration Tab → Contracts). Here, administrators can set up any applicable contracts, per location, allowing for the definition of the NHS contracts, the associated location and owner, and the contracted UDA target. Additionally, users can search all existing contracts by location (active or inactive), edit the details of an existing contract, and manually extend a contract.

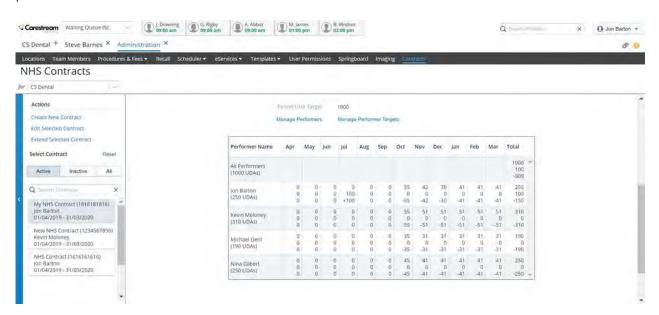
When creating a new contract, there is also the ability to automatically extend the contract at the end of each year, creating a new contract period and inheriting all of the same information. This will ease the annual process requirements for NHS practices when having to establish active contract periods each April. No additional user intervention is required, eliminating the disruption to adding NHS treatment after the past year's expiry date. Of course, if something in the contract terms has changed, users can adjust the UDA targets and associated performers at any time.



Once the base contract details are entered, users can then add NHS performers, and their associated targets / percentages of the overall UDA targets, to the contract. Targets can be defined and modified, per month, once the contract has been created. Performers, and their UDA targets, can be added or removed at any time during the contract period, allowing users to dynamically adjust the fulfillment of the overall contract.



The performed UDAs are tracked against these defined targets, so that administrators can continually monitor how each performer is tracking against his or her monthly (and overall) goal. UDA adjustments can be also be added to adjust any miscalculations or to define the months / time period of the contract that happened outside of the customer actually using CMP (e.g., for customers adopting CMP in the middle of an active contract period.



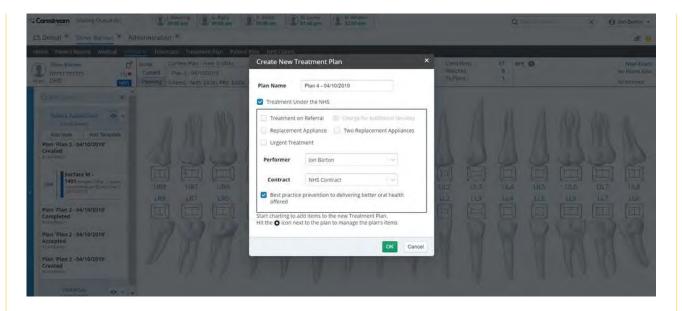
CMP counts performed UDA's based on completed treatment plans, if an NHS claim gets adjusted then that adjustment is reflected in the performed figure once the claim is "marked as settled". The completion date of the treatment plan determines where the UDA

total for the claim is counted, for example if the course of treatment was completed in April 2019, then the UDA total for that claim would be reflected in the April 2019 performed totals.

NHS Courses of Treatment

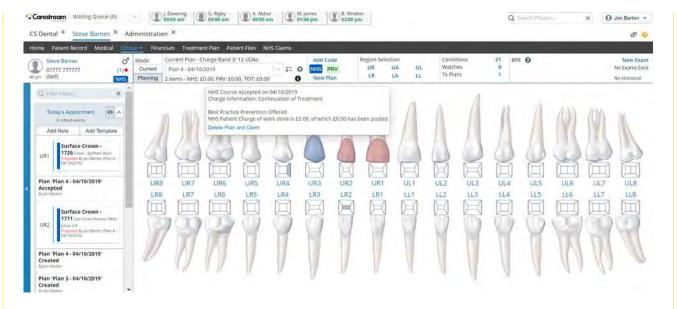
When creating a treatment plan for an NHS patient, users can now specify whether it is an NHS course of treatment (or not). Treatment Plans can be created via the patient's Treatment Plan UI (Patient Tab \rightarrow Treatment Plan) or via the patient's Hard Tissue Chart UI (Patient Tab \rightarrow Clinical \rightarrow Hard Tissue Chart \rightarrow Planning Mode). CMP helps to save users time and avoid common mistakes by logically tailoring the workflow and options available during the treatment planning process. For example, users are not prompted with the "Treatment Under the NHS" options when treatment planning for private-only patients. Also, when specifying an NHS course of treatment, only active performers associated with the selected contract can be selected (and vice versa).

When specifying an NHS course of treatment, users will be provided with the relevant options to identify the specific course type, the associated performer, the associated NHS contract, and whether best practice prevention will apply. As previously mentioned, all of the primary course types are available when specifying an NHS-based course of treatment. When "Treatment on Referral" is selected, the provider will still claim the relevant UDAs, but the patient will not get charged. When a "Replacement Appliance" option is selected, the provider can claim the associated UDAs and the patient will also be charged the associated Replacement Appliance fee. When "Urgent Treatment" is selected, the patient is charged for the relevant band 1 fee and the provider can claim the requisite 1.2 UDAs.



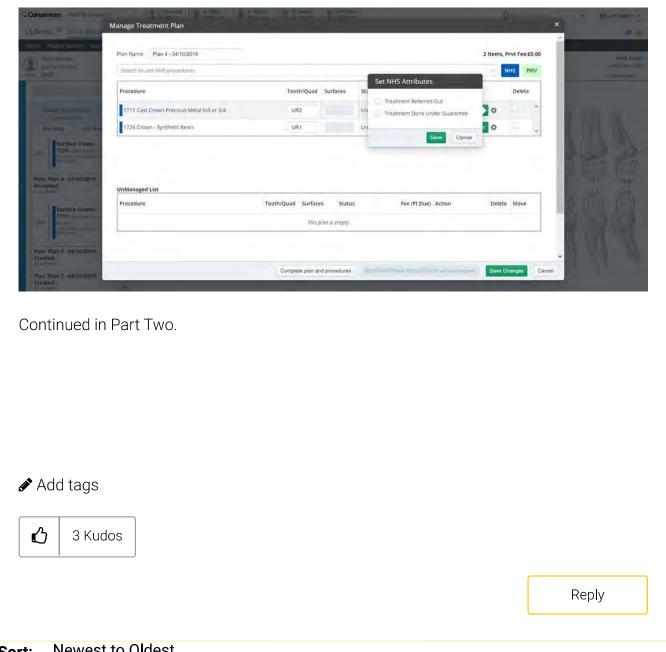
Once the user has opened the NHS course of treatment, he or she can start adding or charting NHS (and/or private) treatment items. It should be noted that private codes can be added to an NHS course of treatment, with CMP automatically handling the calculation of patient charges and exclusion from NHS claims. As previously mentioned, the procedure search / selector controls makes it easy to both identify and/or filter NHS (blue) and private (green) services. As treatment items are selected, the banding and associated charges are automatically calculated. The user also has easy access to a plan summary popover UI that provides core details about the opened course of treatment.





CMP also helps the user by automatically filtering the type of treatment available during treatment planning, based on the type of NHS course that is opened. For example, if an "Urgent Treatment" course is open, the procedures available will be contextually-relevant and different than those available if working within a "Replacement Appliance" course. This is just another example of how CMP is simplifying workflows, saving users time and avoiding common mistakes.

Users can also mark individual treatment items as "under guarantee" or "referred out" when managing the treatment plan (click on the 'cog' icon next to the Treatment Plan name). While managing the Treatment Plan, NHS items have an additional control to define these NHS options (click on the 'cog' icon on the treatment line item). If the "under guarantee" option is selected, then the patient will not be charged but the provider can still claim the associated UDAs. If the "referred out" option is selected, then the patient will be charged, but the provider will not receive credit for the UDAs. The treatment plan summary - including treatment items and NHS vs. private fee calculation - will get updated as changes are made.



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