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Sensei Cloud Release 0.1.7666

Sensei Cloud

Weekly Release

Build 0.1.7666 | May 8th, 2022

This week's Sensei Cloud updates continue to expand core application functionality and deliver on recent customer requests.

[US Only] Enhancements when Printing the ADA Claim Form

To better assist our US customers that file insurance, this week's release includes two changes when printing out the ADA dental claim form in support of certain private insurance carriers. Specifically, these updates include more

consistent handling of the 'Assignment of Benefits' section (box 37), as well as the Billing Dentist or Dental Entity information (boxes 48 - 52). These updates are effective for any printed US dental claims.

The contents of box 37 (Authorizations) when printing the claim depends on how the patient's insurance policy is configured with respect to 'Assignment of Benefits' [Patient Tab > Home > {Update Insurance} > {Edit} (Policy)]. When marked as 'Assigned', indicating that reimbursement should be paid directly to the office, box 37 automatically displays 'Signature on File' and the current date when printing the claim. When set as 'Not Assigned', box 37 will be left blank, so that monies are sent directly to the patient.

AUTHORIZATIONS		A
36. I have been informed of the treatment plan and associated fees. I agree to be responsible for all charges for dental services and materials not paid by my dental benefit plan, unless prohibited by law, or the treating dentist or dental practice has a contractual agreement with my plan prohibiting all or a portion of such charges. To the extent permitted by law, I consent to your use and disclosure of my protected health information to carry out payment activities in connection with this claim.		36
<input checked="" type="checkbox"/> Signature On File	05/06/2022	40
_____ Patient/Guardian Signature	_____ Date	42
37. I hereby authorize and direct payment of the dental benefits otherwise payable to me, directly to the below named dentist or dental entity.		44
<input checked="" type="checkbox"/> Signature On File	05/06/2022	46
_____ Subscriber Signature	_____ Date	48
BILLING DENTIST OR DENTAL ENTITY # (Leave blank if dentist or dental entity is not)		B

This update also ensures that the 'Billing Dentist or Dental Entity' section (boxes 48 - 52) is always completed when printing the ADA claim form. To verify that claims will print as intended, please ensure that the information stored in your location record is complete and correct [Administration Tab > Locations > {Edit Selected Location}]. When printing a claim, the section fields are populated with the information from the location record where the associated services were performed. Box 48 populates with the location's 'Business Name' and 'Billing & Mailing Address', box 49 populates with the location's defined 'NPI Number', box 50 populates with the location's defined 'Business License Number', box 51 populates with the location's defined 'Tax ID Number (TIN)', and box 52 populates with the location's defined primary phone number.

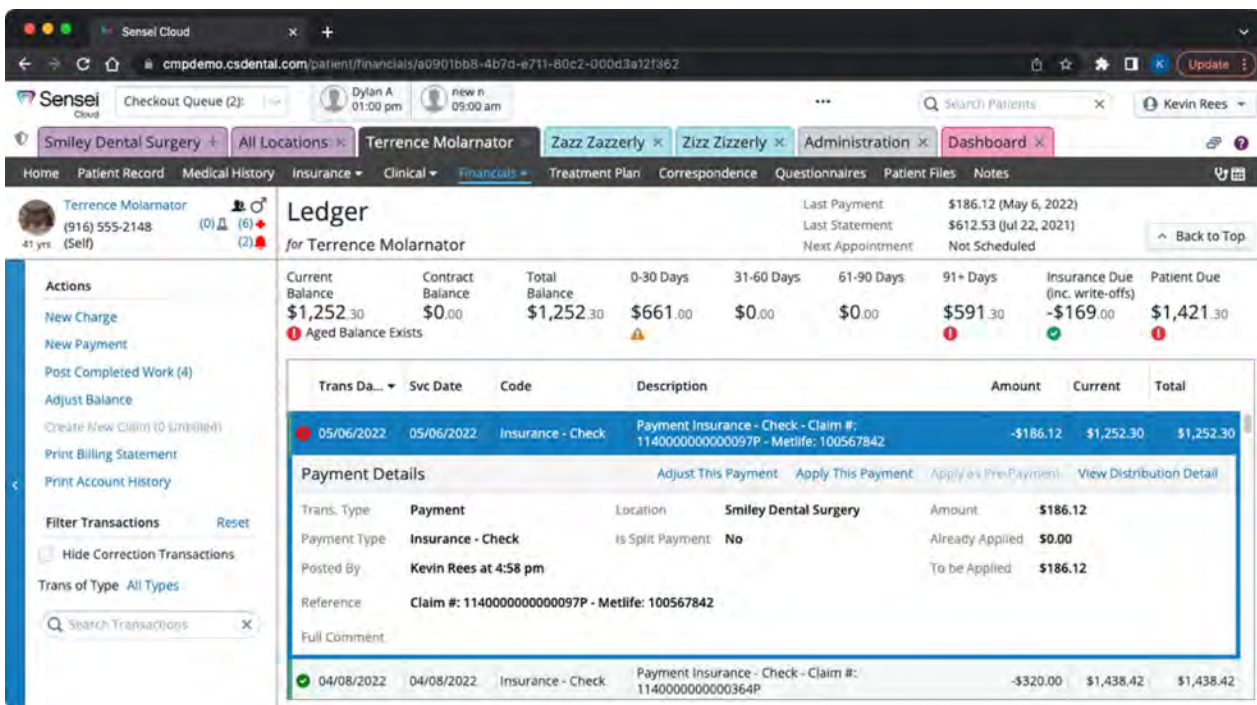
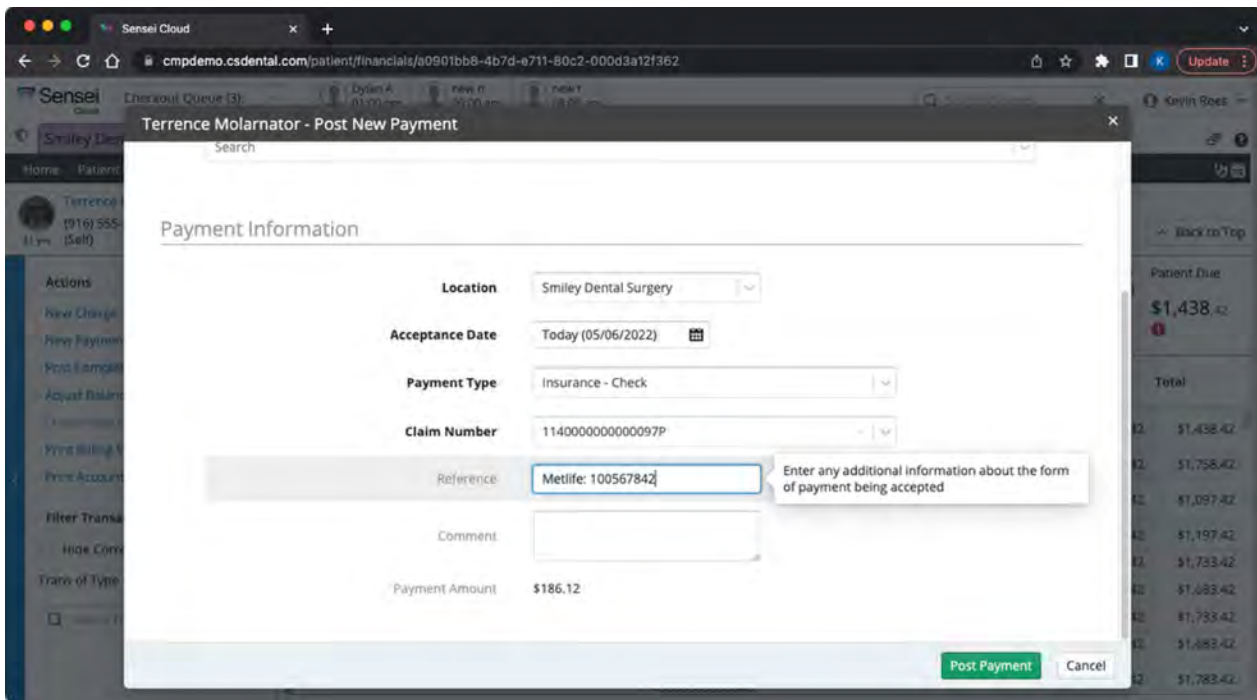
BILLING DENTIST OR DENTAL ENTITY (Leave blank if dentist or dental entity is not submitting claim on behalf of the patient or insured/subscriber.)			T
48. Name, Address, City, State, Zip Code Smiley Dental Surgery 5150 Wooded Glen Drive Grizzly Flats, CA 95630			5
49. NPI 3543543543	50. License Number 0123456789	51. SSN or TIN 435435435	5
52. Phone Number (285) 555 - 9923	52a. Additional Provider ID		5

We hope that these enhancements provide support for claim acceptance with various private payers when printing claims. We look forward to your feedback on any additional updates that are needed to further improve your insurance claim workflows.

[US Only] Custom Reference for Insurance Payments

In response to your feedback, Sensei Cloud now supports the entry of custom reference information when posting insurance payments. This enables you to enter useful identifying / tracking information for the insurance payment (e.g., payer name, check number, EFT tracking number, etc.). NOTE: The associated claim ID, selected when posting an insurance payment, will still automatically be added to the posted transaction details. This change applies when posting a 'Insurance - Check', 'Insurance - Credit Card', or 'Insurance - EFT' payment type.

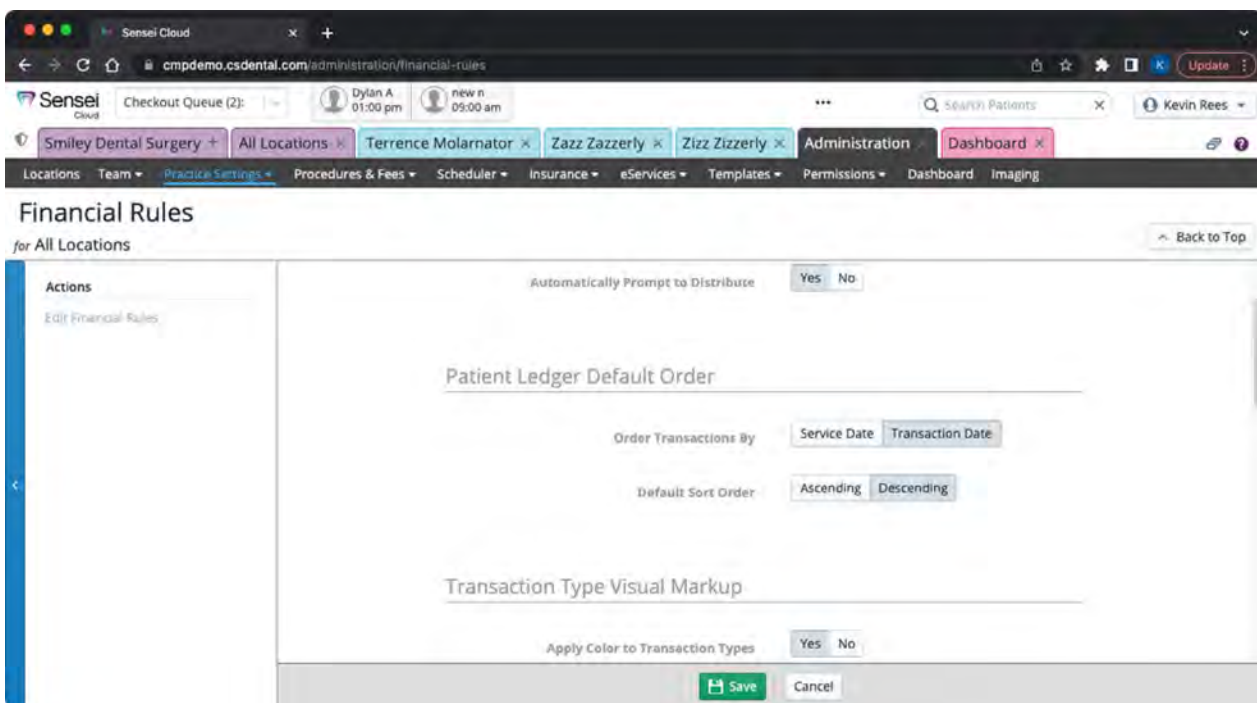
While the basic workflow for posting an insurance payment remains unchanged, the 'Reference' field is now unlocked for entry of custom text after the associated 'Claim Number' has been selected [Patient Tab > Financials > Ledger > {New Payment} > {Select Insurance Payment Type}]. As with all posted payment transactions, any entered 'Reference' text is included in the transaction description and details (again, appended to the associated Claim ID) and displayed in the Patient Ledger, Financial Daysheet, and related reports (including Statement and Account History).



We hope that these changes provide better support in the tracking and reconciliation of insurance-based payments. Please let us know what additional enhancements can be made to further support your financial reporting workflows.

Defining the Default Ledger Order Display

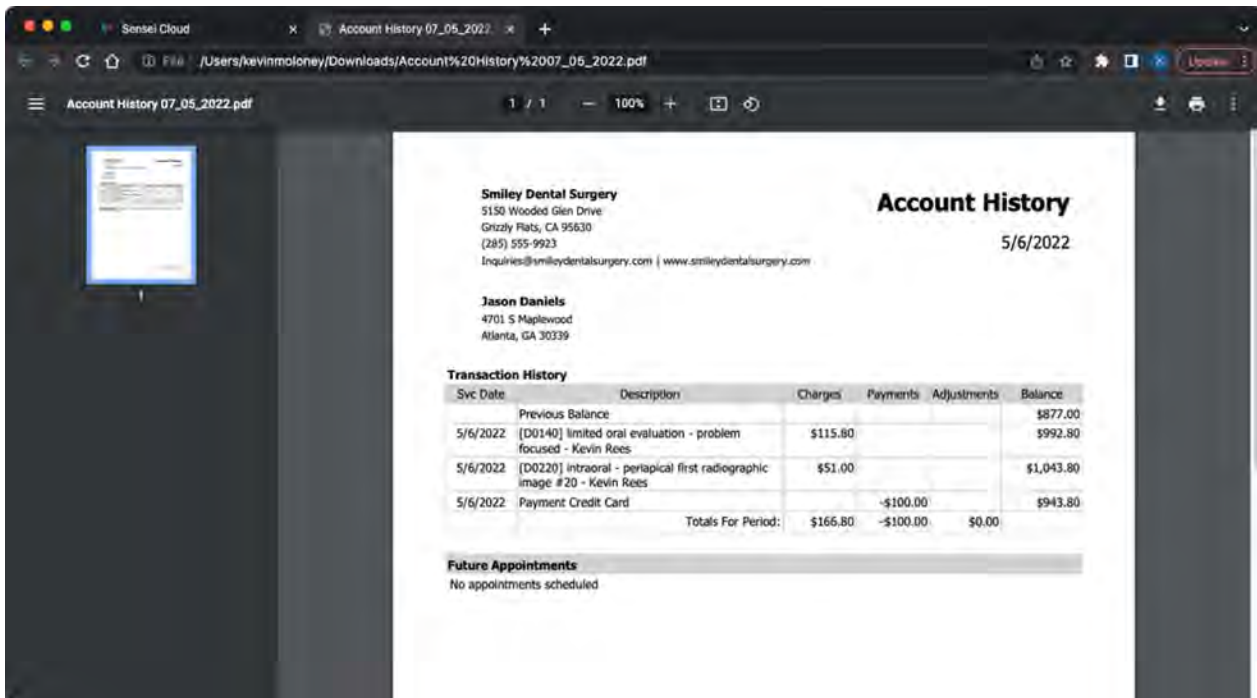
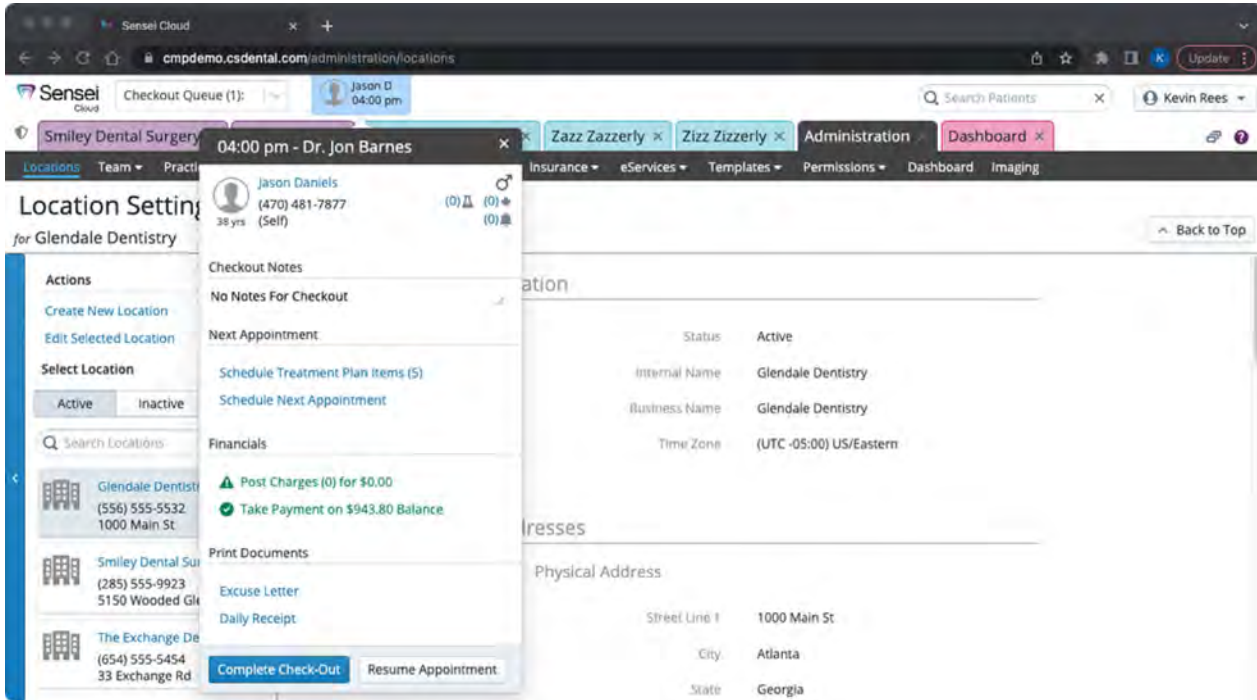
Based on customer request, we have added a new practice-level 'Patient Ledger Default Order' setting that enables you to configure the default order used to display posted transactions in the Patient Ledger. You can now select whether the default display is based on Transaction Date (e.g., posting date) or Service Date and whether to use ascending (e.g., oldest first) or descending (e.g., newest first) date order [Administration Tab > Practice Settings > Financial Rules]. Once applied, these settings determine the default ledger display rules for your practice. However, users can manually change the order by clicking on the column headers in the Patient Ledger. We hope that this enhancement supports your financial workflows and saves your practice some time (& clicks) when reviewing patients' accounts.



Updates to Patient Account History

Based on customer feedback, the 'Account History' document functionality has been enhanced to improve the user experience. This includes updates to the general formatting of the existing document (removing the 'Amount Due' information), providing the ability to define the date range of transaction history to include, and an update to the Checkout Queue process to support the printing of a 'daily receipt'. These enhancements should make it faster and easier for you to generate 'Account History' documents that meet patient needs, such as the previous year's transaction history for FSA / HSA purposes.

In addition to the changes to the actual patient 'Account History' document (more detail on these changes below), there have also been some changes to the associated document generation workflows via the Patient Ledger and the Checkout Queue. With this release, the Checkout Queue workflow (e.g., when checking out a patient appointment) now supports the generation of a 'Daily Receipt' (as opposed to a 'Billing Statement') that includes a simple accounting of all the transactions - charges, payments, and adjustments - posted on the current date (assuming that nothing was backdated).



When you need to produce an 'Account History' for reasons other than a current appointment, use the 'Print Account History' option from the Patient Ledger [Patient Tab > Financials > Ledger]. You are now provided with the ability to define a date range when generating the 'Account History'. This enables you to specify the amount of transaction history to include in the document, including the patient's total transaction history, the current date, a fixed period of time, or a custom date or date range. IMPORTANT: The 'Account History' displays transactions based on the associated service date and does not take the transaction date (e.g., when it was posted) into account. All posted transactions from the specified date range are included in the 'Account History' document except for mathematically-offsetting adjustments (e.g., the hidden 'correction' transactions). NOTE: The included transactions are independent of the current, on-screen ledger view, which may have specific filters or sorting applied. A .PDF is created, which can be printed or emailed to the patient.

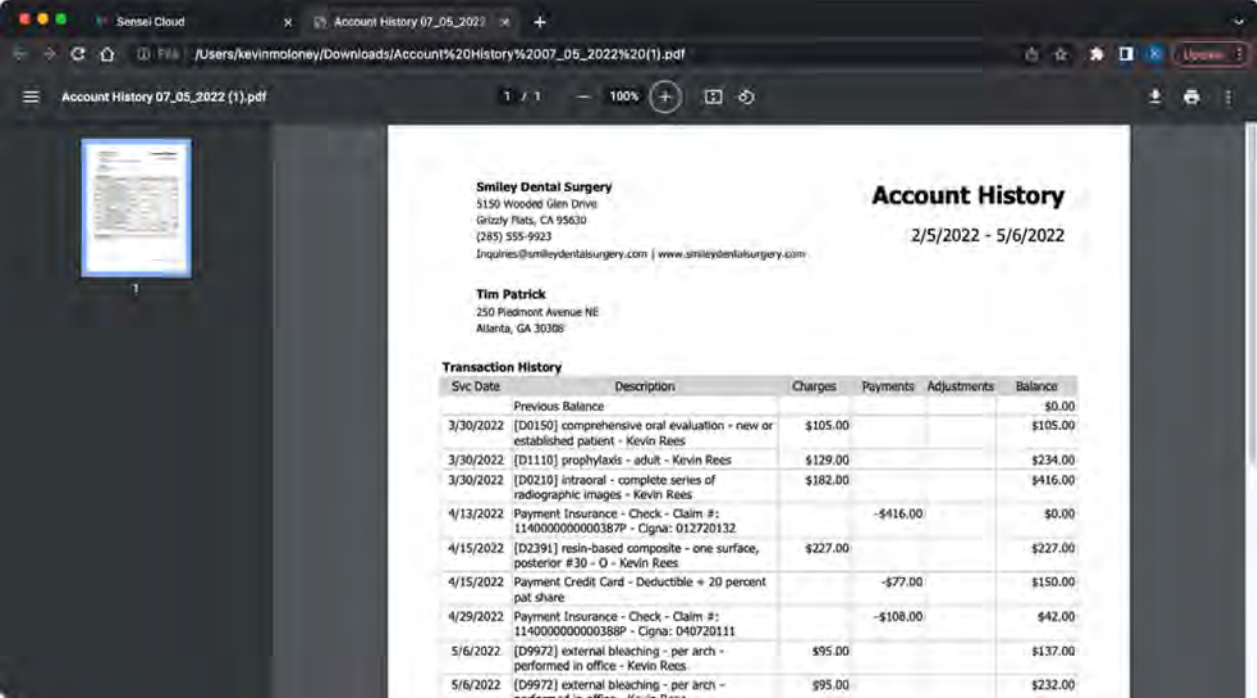
The screenshot shows the 'Ledger' page for patient Tim Patrick. A 'Date Range' dropdown menu is open, showing options: 'All Dates', 'Today', 'Last 7 Days', 'Last 30 Days', 'Last 45 Days', 'Last 60 Days', and 'Last 90 Days'. The main table displays the following transactions:

Trans Da...	Svc Date	Code	Description	Amount	Current	Total
		Discount	DISCOUNT: Paid-in-full Discount	-\$19.00	\$0.00	\$0.00
		Cash	Payment Cash	-\$171.00	\$19.00	\$19.00
		D9972	(LA) external bleaching - per arch - performed in office	\$95.00	\$190.00	\$190.00
		D9972	(UA) external bleaching - per arch - performed in office	\$95.00	\$95.00	\$95.00
		Write-Off	WRITE-OFF: Contracted Insurance	-\$42.00	\$0.00	\$0.00
		Insurance - Check	Payment Insurance - Check - Claim #: 1140000000000388P - Cigna: 040720111	-\$108.00	\$42.00	\$42.00
		Credit Card	Payment Credit Card - Deductible + 20 percent pat share	-\$77.00	\$150.00	\$150.00
		D2391	(#30 O) resin-based composite - one surface, posterior	\$227.00	\$227.00	\$227.00
		Insurance - Check	Payment Insurance - Check - Claim #: 1140000000000387P - Cigna: 012720132	-\$416.00	\$0.00	\$0.00

As previously mentioned, the 'Account History' document itself was redesigned to ensure that its use was less ambiguous and provided the necessary transaction information for patients. Changes include:

- The title of the document has changed from 'Statement' to 'Account History';
- The selected date range (used to determine the included transaction history) is now displayed below the title;

- The due date, recent charges, and recent payments information has been removed;
- NOTE: To print a document with a visible due date and aging information, please choose the 'Print Billing Statement' option.
- The transaction date (e.g., the posting or entry date) has been removed to avoid the confusion of displaying two date values for each transaction;
- The transactions are displayed in ascending order by associated service date;
- An adjustments column was added to make write-offs and discounts clearer, rather than including them as negative values in the charge column;
- The aging information was removed from the bottom of each page; and
- The date that the document was printed is displayed along with the applicable page number.



Date	Description	Amount	Balance
4/15/2022	[D2391] resin-based composite - one surface, posterior #30 - Kevin Rees	\$227.00	\$227.00
4/15/2022	Payment Credit Card - Deductible + 20 percent pat share	-\$77.00	\$150.00
4/29/2022	Payment Insurance - Check - Claim #: 114000000000388P - Cigna: 040720111	-\$108.00	\$42.00
5/6/2022	[D9972] external bleaching - per arch - performed in office - Kevin Rees	\$95.00	\$137.00
5/6/2022	[D9972] external bleaching - per arch - performed in office - Kevin Rees	\$95.00	\$232.00
5/6/2022	WRITE-OFF: Contracted Insurance		-\$42.00
5/6/2022	Payment Cash	-\$171.00	\$19.00
5/6/2022	DISCOUNT: Paid-in-full Discount		-\$19.00
	Totals For Period:	\$833.00	-\$772.00
			-\$61.00

Future Appointments
No appointments scheduled

Date Printed: Friday, May 6, 2022
1 of 1

We hope that these enhancements improve the usability of the existing Account History document, so that it better meets the needs of your patients. The changes should make it faster and easier to produce the necessary documentation for a given use case. We look forward to your feedback on what else can be done to improve your financial documentation workflows. Please watch for several additional improvements coming to the Patient Ledger and Billing Statement workflows in the next releases.

Optimizations and Fixes

The following fixes and optimizations have been added to Sensei Cloud this week.

1. Fixed a small UI defect created by a recent browser update in which a small scrollbar was displayed next to the application tabs.
2. Addressed a bug that would cause insurance claims to get stuck in the 'Queued' status and not transmit to the clearinghouse if the associated provider had an undefined middle name.
3. Fixed an error that would sometimes occur when accessing the Patient Minicard if the patient (or a connected patient) did not have recall preferences properly configured in the Patient Record.
4. Resolved an API error that sometimes occurred when trying to scan and upload a document to Patient Files.
5. Fixed a bug in which a patient portrait was being incorrectly maintained after clicking 'Remove Portrait' if the capture and removal happened in the

same workflow.

6. Addressed a minor UI issue in which the reference for an insurance payment included a trailing hyphen when no additional reference text was entered at the time of posting the transaction.
7. Resolved a bug in which an error occurred when trying to save a converted patient record that was associated with multiple addresses.

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