

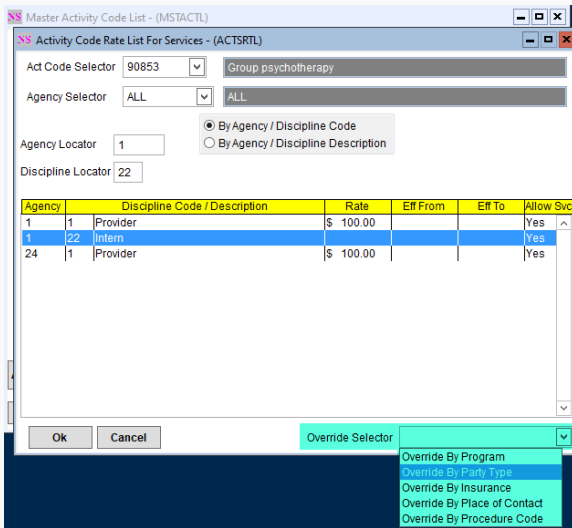
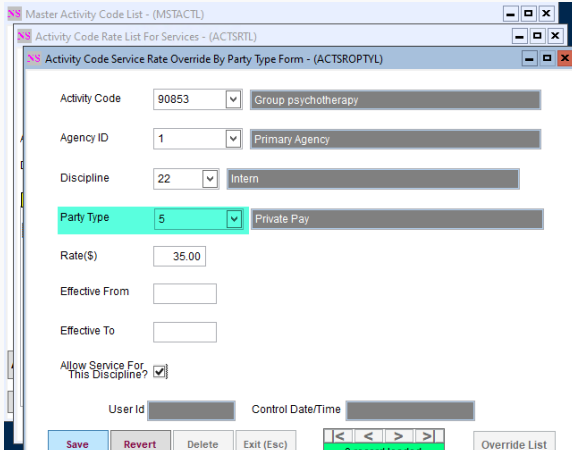
# NEW! 7.11.0 Release Notes

Last Modified on 02/13/2025 11:48 am EST

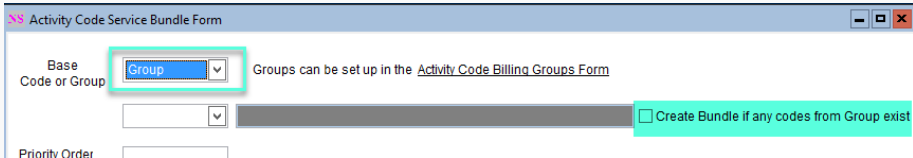
Beta Release Date: Monday, 01/13/25

GA Release Date: **Monday, 01/20/25**

## Feature Enhancements:

| Release 7.11.0                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                               |        |           |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------|--------|-----------|--------|-----------|---|------------|-----------|--|--|-----|---|-----------|--|--|--|-----|----|------------|-----------|--|--|-----|-------|-------|---------------|---------------------------|-----------|------------------|------------|-----------|------------|---------------|----------|-------|----------------|--|--------------|--|------------------------------------|-------------------------------------|
| <b>Override Selector dropdown and Activity Code Service Rate Override by Party Type</b> | <p><i>Maintenance and Setup &gt; Activity Codes &gt; Activity Codes &gt; Srv Rates</i></p> <p>The user interface for the Activity Code Rate List For Services has changed. Instead of multiple buttons, all Service Rate overrides are located in the <b>Override Selector</b> dropdown.</p>  <table border="1"><thead><tr><th>Agency</th><th>Discipline Code / Description</th><th>Rate</th><th>Eff From</th><th>Eff To</th><th>Allow Svc</th></tr></thead><tbody><tr><td>1</td><td>1 Provider</td><td>\$ 100.00</td><td></td><td></td><td>Yes</td></tr><tr><td>1</td><td>22 Intern</td><td></td><td></td><td></td><td>Yes</td></tr><tr><td>24</td><td>1 Provider</td><td>\$ 100.00</td><td></td><td></td><td>Yes</td></tr></tbody></table> <p>In addition, there is now a <b>Service Rate Override By Party Type</b>. This will allow the user to create an override by Activity Code&gt;Agency&gt;Discipline&gt;Party Type.</p>  <table border="1"><thead><tr><th>Field</th><th>Value</th></tr></thead><tbody><tr><td>Activity Code</td><td>90853 Group psychotherapy</td></tr><tr><td>Agency ID</td><td>1 Primary Agency</td></tr><tr><td>Discipline</td><td>22 Intern</td></tr><tr><td>Party Type</td><td>5 Private Pay</td></tr><tr><td>Rate(\$)</td><td>35.00</td></tr><tr><td>Effective From</td><td></td></tr><tr><td>Effective To</td><td></td></tr><tr><td>Allow Service For This Discipline?</td><td><input checked="" type="checkbox"/></td></tr></tbody></table> | Agency    | Discipline Code / Description | Rate   | Eff From  | Eff To | Allow Svc | 1 | 1 Provider | \$ 100.00 |  |  | Yes | 1 | 22 Intern |  |  |  | Yes | 24 | 1 Provider | \$ 100.00 |  |  | Yes | Field | Value | Activity Code | 90853 Group psychotherapy | Agency ID | 1 Primary Agency | Discipline | 22 Intern | Party Type | 5 Private Pay | Rate(\$) | 35.00 | Effective From |  | Effective To |  | Allow Service For This Discipline? | <input checked="" type="checkbox"/> |
| Agency                                                                                  | Discipline Code / Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Rate      | Eff From                      | Eff To | Allow Svc |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| 1                                                                                       | 1 Provider                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | \$ 100.00 |                               |        | Yes       |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| 1                                                                                       | 22 Intern                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |                               |        | Yes       |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| 24                                                                                      | 1 Provider                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | \$ 100.00 |                               |        | Yes       |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| Field                                                                                   | Value                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           |                               |        |           |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| Activity Code                                                                           | 90853 Group psychotherapy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |                               |        |           |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| Agency ID                                                                               | 1 Primary Agency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |           |                               |        |           |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| Discipline                                                                              | 22 Intern                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |                               |        |           |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| Party Type                                                                              | 5 Private Pay                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |           |                               |        |           |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| Rate(\$)                                                                                | 35.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           |                               |        |           |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| Effective From                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                               |        |           |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| Effective To                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                               |        |           |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |
| Allow Service For This Discipline?                                                      | <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |           |                               |        |           |        |           |   |            |           |  |  |     |   |           |  |  |  |     |    |            |           |  |  |     |       |       |               |                           |           |                  |            |           |            |               |          |       |                |  |              |  |                                    |                                     |



| Release 7.11.0                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
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| <p><b>Ability to hide the SVD loop on a payer level</b></p>                              | <p><i>Maintenance and Setup &gt; Insurance &gt; Insurance</i></p> <p>On Page3 of the Master Insurance Form, there is now a setup option: <b>Do Not Include Loop 2430 on 837P.</b> This gives the user the ability to hide the Line Adjudication Information. This setup option was requested for a specific Iowa Substance Use Prevention Grant and should only be used with careful consideration.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <p><b>Activity Code Groups in the Service Bundle setup should not be restrictive</b></p> | <p><i>Maintenance and Setup &gt; Activity Codes &gt; Activity Code Bundle Setup</i></p> <p>NextStep Billing now has a setup option to <b>“Create Bundle if any codes from Group exist”</b> when setting up the <b>Activity Code Bundle Setup</b> rules. This checkbox can be used for Base Group Codes. When checked, the Services Preprocessor will not require every code in the group to be present when matching Base Code(s) to the final Bundled Activity Code.</p>  <p>The screenshot shows a window titled "Activity Code Service Bundle Form". It contains a dropdown menu for "Base Code or Group" with "Group" selected. To the right, there is a checkbox labeled "Create Bundle if any codes from Group exist" which is currently unchecked. A tooltip above the dropdown menu reads "Groups can be set up in the Activity Code Billing Groups Form".</p> |
| <p><b>Place of Contact Override to Activity Code Service Bundle Form</b></p>             | <p><i>Maintenance and Setup &gt; Activity Codes &gt; Activity Code Bundle Setup</i></p> <p>NextStep Billing has a new <b>Contact Type</b> field in the <b>Activity Code Service Bundle Form</b>. If your final Bundled Activity Code requires a different place of contact/service, the user can now add that while editing this form.</p> <p><u>Note:</u> This will override the place of contact that was originally connected to the service but will not override the Activity Code Override by Insurance setup.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## Issues Resolved:

| Release 7.11.0                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|--------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Activity Code Groups should not have an automatic Print Status N if they are not added to the Bundle Setup</b></p> | <p><i>Maintenance and Setup &gt; Activity Codes &gt; Activity Code Billing Groups</i></p> <p>Previously, if an Activity Code Billing Group was created but not added to the Activity Code Bundle Setup, any Line Items that contained a code from the Activity Code Billing Group were made with a Print Status N. This has been corrected.</p> <p>If the Activity Code Billing Group is not added as a rule in the Activity Code Bundle Setup, it will display Line Items in Print Status Y.</p> |
| <p><b>835 Form - Units not resetting to 0 between claims</b></p>                                                         | <p>Previously, when running the 835 Form with the Un-Roll Transactions box checked, if "normal" matching failed or we were unrolling a remit into multiple lines, the "nOrigUnits" value used may be out-of-sync and not even from that record in the file. This has been fixed.</p>                                                                                                                                                                                                              |



# NEXT STEPS

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