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What's new in INCISIVE MD?

This document describes a minor update to INCISIVE MD. This release updates and corrects the application for a set of issues related with the end of year release and other minor items that collectively warranted updating the product.

Who should read these release notes?

If you are an INCISIVE MD user ...

Read this entire document for revised features included in this update.

If you are the clinic technical contact ...

No action is required by you to update the software if users have administrative privileges to update the \Program Files directory. The INCISIVE MD application will auto-detect and install the update when the user attempts to log into the application following the release of the update. For clinics using terminal services, please contact INCISIVE Support for instructions on manually updating your users' profiles.

CCI Edits Update for Version 15.0

When Medicare released the latest version of the National Correct Coding Initiative (CCI) edits, Version 16.0 effective on 1/1/2010, they inadvertently released the same file for two different CPT code ranges. The result of this issue was that no CCI edits for AMA CPT code range 27000 to 27999 were available in INCISIVE MD. We have updated the application with the latest information provided by CMS and CCI edits will now display for these CPT codes.

Global Window Modifiers Not displaying for 2010 Surgeries

If someone planned a surgery in 2009 and the surgery was coded in 2010, the global window Modifiers 58, 78, and 79 would display on the **Patient** tab for selection but then would not display on the **Summary** tab. If both the planning and coding were done in 2010, the modifiers would display. We have corrected the issue that would cause the modifiers not to be displayed on the **Summary** tab.

Searching for injection procedures by CPT code

While making end of year changes, we inadvertently removed injection procedures from being searchable by AMA CPT Code. For procedures like CPT 64490, Facet joint injection with imaged guidance, you were able to find the procedure by searching on text like "facet" or "injection" but not "644", "6449", or "64490". Once updated, you will be able to search and find injection procedures by AMA CPT code. However, you still cannot search for injectable Medicare HCPCS supply codes, like J1011.

Washington Labor & Industry Modifier 50 Policy

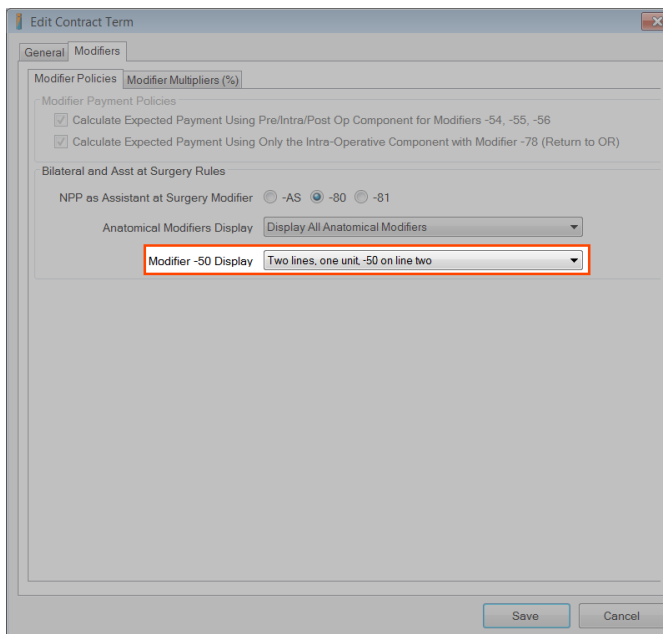
The default setting for Modifier 50 is incorrect for the Washington L&I contract. The current setting is to display Modifier 50 as "One line, one unit, -50 on line one". As stated in the quote from the Washington Labor & Industry administrative rules, Modifier 50 should be billed as "Two lines, one unit, -50 on line two".

“Bilateral Surgery

The bilateral modifier identifies cases where a procedure typically performed on one side of the body is, in fact, performed on both sides of the body. Payment is made at one hundred fifty percent of the global surgery fee for the procedure. Providers must bill using two line items on the bill form. The modifier –50 should be applied to the second line item”

Because many of our Washington customers have probably already planned and coded many surgeries with the display of Modifier 50 on the wrong line, we decided not to automatically correct this issue for existing surgical plans and coded fee tickets for this release. To correct this issue, we have changed the Washington Labor & Industry contract to allow customers to change the setting for **Modifier -50 Display**. To do that:

- 1 Go to **Contracts**.
- 2 Select the **Washington Labor & Industry** contract.
- 3 To the right of the contract list, select the **Washington Labor & Industry 2009** contract term.
- 4 Edit the contract term, click **Modifiers** tab.
- 5 Under **Modifier Policies** tab, switch the **Modifier -50 Display** to “Two lines, one unit, -50 on line two”.



Minor Corrections or Updates to the Software

CPT 27692 shown as soft add-on as well as additional instance of CPT 26791

AMA CPT 27692, “Transfer or Transplant, Single Tendon”, was catalogued as both a soft add-on as well as a multiple instance (second unit) of CPT 26791. When users selected the soft add-on, an application error occurred. To resolve this issue, CPT 27692 is no longer a soft add-on to CPT 26791.

CPT 27422 Location Shows as Concept.Null

We have updated the background information on the locations for CPT 24722, “Reconstruction, for Dislocating Patella”, so that Patella will now display instead of concept.null.

Unable to view Surgical Plans and Fee Ticket PDF documents

For some surgical plans or fee tickets, users were unable to display the corresponding Adobe Reader PDF document. The links to these few files stored in the INCISIVE MD database were broken and so we regenerated the link. You should now be able to display any surgical plan or fee ticket PDF document.

Illinois Workers Compensation Pricing for Pelvic Ring Fractures

For the Illinois Workers Compensation contract, the new pelvic ring fracture codes expected amounts were being calculated as \$0. These new procedure codes should be priced at 76% of billed charges (POC76). The application will now compute the correct expected amount if an amount is listed in the clinic fee schedule for CPT codes 27215 to 27218. If no amount is available, a billing note will be displayed on the **Summary** tab **Details** tab and listed on the fee ticket that indicates this situation. For example, the billing note would read, “Line 1, code 27215 has an expected payment value of zero because there is no fee schedule entry for this code for the date of service.”

Unable to add facilities with ZIP code 87114

Due to an outdated ZIP code information in the 2010 Medicare geographical pricing cost index (GPCI) table, some existing ZIP codes were not listed in the table and so users were unable to add new facilities with those ZIP codes, such as 87114 for Albuquerque, New Mexico. We have updated our GPCI table with the current listed of ZIP codes from the United States Postal Service.

Audit Payment Worksheet Disputable Amounts Changed

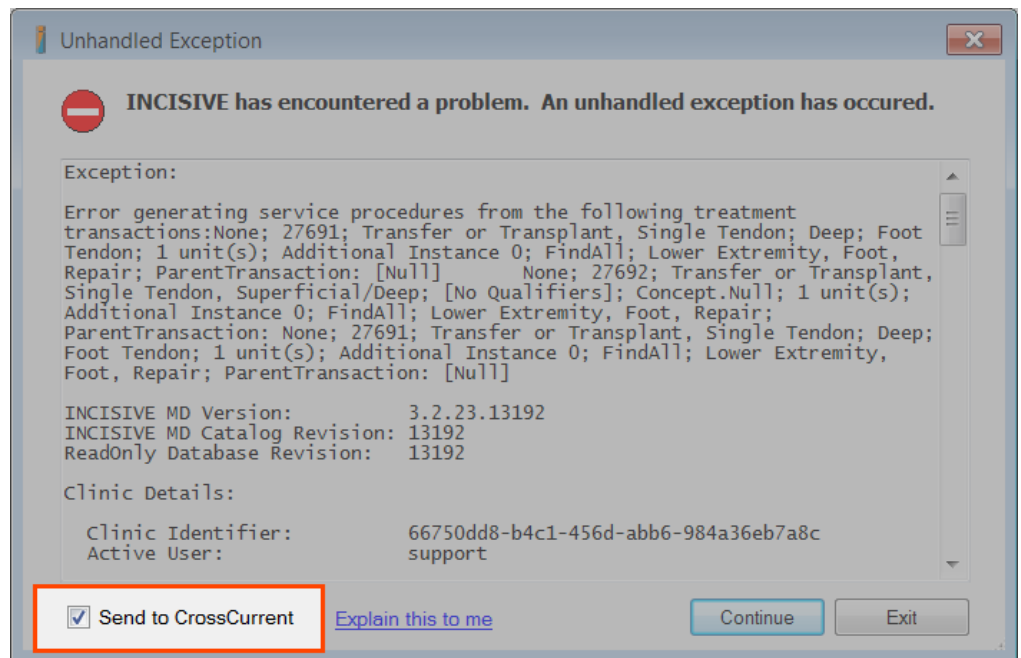
We changed the way the disputable amount on the **Audit Payment Worksheet** is calculated and displayed. Previously, the difference between the contractual expected amount and the payer allowed amount would display negative for over payments and positive for underpayments. This has been reversed so that overpayments now display as positive numbers while underpayments display as negative numbers.

Application Error Reporting Emails

Since we moved offices, the application reporting emails stopped arriving to the INCISIVE Support email box. We have updated our infrastructure to allow these emails to be delivered to INCISIVE Support.

Please report any Unhandled Exceptions

If you do unfortunately see an Unhandled Exception dialog while using INCISIVE MD, please do leave the **Send to CrossCurrent** checkbox checked. If the application tells you that it successfully sent the error message, we will receive these emails and review them as an urgent priority. In many instances, clicking **Continue** may allow you to continue working in the application, but not always. Clicking **Exit** will cause the application to stop working and close immediately causing any unsaved information to be lost.



We ask that if you do see these application errors repeatedly to please call INCISIVE Support immediately to discuss the nature of the error and how you are unintentionally creating the problem.

How do I contact INCISIVE Support?

During normal business hours, 8:00 am to 5:00 pm Pacific Time, you may contact technical support at (503) 546-5323 or by email at support@crosscurrentinc.com. Our INCISIVE MD Support website also offers resources to help answer basic questions about the software.