



**Enhancements**

**Expanded! Additional checkboxes available on Release**

**Authorization Template** (S2K-2415) - Two new fields are available on the Release Authorization settings. These can be populated for additional details about the information the patient is agreeing to release. This is available in the Gears module (for users with Administrative access) > Settings > Clinic Settings > "Rel Auth" tab. Once the additional fields are utilized, they will appear as checkboxes to select on each release authorization that is created for patients' from the Case History (Tx).

Important Note: Modifying these fields is retroactive; meaning that previously signed release authorizations will now reflect the new selections on the Release Authorization in the patients' Tx. The selections will be unchecked and the printed version will reflect exactly as it did when the authorization was originally signed, therefore while the settings changes do show, they do not impact the content of the release. This includes modifications made to the text in the settings. See the knowledge base article [here](#) for more information.

**Resolved Issues**

Dosing	
<b>Subutex Labels Printing Incorrect Dispensing Strategy</b> (S2K-2592)	The dispensing instructions were not properly carrying over to the prescription label for Subutex medication. The change to dispensing instructions accurately saved in the data but did not carry over to the label. This has been resolved.
<b>Bottle History Sporadically Not Recording Transferred In/Out Entry on Accuvert Pump</b> (S2K-244)	This issue pertains to users of the Accuvert Methadone pump only. Due to the way this pump is configured, there was a sporadic issue that would occur when transferring to a new bottle after emptying the initial bottle that would result in the software missing the record for the transfer of 84 mg that would be left in the tubing on the pump. This has been corrected such that the logging is enhanced to more frequently catch this issue and in cases where the software does not record the transfer in or the transfer out, the software recognizes this and alerts the user with an error message so that it can be properly recorded manually.
Billing	
<b>Bundle Configuration and Services completed after billing may cause a new bundle to bill</b> (S2K-2577)	Services that were completed after a bundle was billed would incorrectly trigger a new bundle to bill for the patient. This has been resolved so that services that are completed after a bundle has billed will not trigger additional billing.
<b>Error when Resubmitting Denied or Voided Claims and Reproduce Existing Claims</b> (S2K-2580)	An issue was identified where the Reproduce Existing and Resubmit Denied and Voided claims grids did not generate correctly when the original claims were not grouped by week. This has been resolved so that the grid will now generate correctly.
<b>Recipient ID and Authorization Numbers that included leading or trailing spaces in the patient's coverage profile caused Invalid claims</b> (S2K-2587)	An issue was identified where spaces in the Recipient ID and/or Authorization numbers on the patient's coverage profile cause Invalid claims as the trailing and leading spaces were included in the claim file segments. This has been resolved where the software will not save any trailing or leading spaces in these fields. Old data will be corrected when this fix is implemented.
<b>NDC was not included in the 837-5010-P claim for Medication Reimbursement encounter claims</b> (S2K-2601)	Encounter Claims for Medication Reimbursement services did not include the NDC (National Drug Code) in the 837-5010-P claim file. This has been resolved so that the NDC is included for all medication reimbursement claims. SMART also identified that Medication Reimbursement services were put into a separate claim in the claim file. These issues have been resolved so that the NDC will be included in the 837-5010-P claim file for medication reimbursement encounter claims and the Medication Reimbursement Services will be included in the weekly claim.
<b>Reproduce Existing Claims Grid are showing claims twice when claims include \$0.00 encounter claims and invoices</b> (S2K-2605)	On the Reproduce Existing Claims Grid, claims are showing twice when the claims include \$0.00 encounter claims and invoices. This has been resolved so that the Reproduce Existing Claims will only show claims once on the grid.

<b>Medication Reimbursement bills for both Bundle and Fee for service causing duplicates</b> (S2K-2603)	Medication Reimbursement Services were billing for both the bundle and the Fee for Service when the service was configured both ways. This has been resolved so that when a medication Reimbursement Services are configured for both, the service will trigger the bundle and the service will not bill as a Fee for Service.
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**Clinical**

<b>Counselor was allowed to sign as Counselor Supervisor even though they don't have the "Can Approve Treatment Plan" flag on</b> (S2K-2602)	An issue was identified where a counselor was allowed to sign as the Counselor Supervisor even though they don't have the privilege "Can approve Treatment Plan' flag on. This has been resolved so that the Clinical Supervisor signature field will not be enabled when the counselor does not have 'Can Approve Treatment Plan" flag on.
<b>All Signatures are Showing as Invalid if Touchscreen is Enabled for the Clinic</b> (S2K-2606)	<p>Due to a change made in SMART 4.5.5, clinics that have the touchscreen signature enabled encountered an issue whereby any digital certificate signature was showing as invalidated. The signature was not actually invalidated, but was presenting this way to the user. We have resolved this issue which will prevent digital signatures from being corrupted and restore any that showed as invalidated between updating to 4.5.5 or beyond and this update.</p> <p><i>Note:</i> Users on 4.5.4 or earlier versions would not have seen this problem. This only impacted clinics that use Touchscreen as an option for Signatures.</p>

**Medical**

<b>Unable to Submit Request for AWL</b> (S2K-2585)	Users were receiving an error when attempting to post AWL orders that were pending. This error suggested that there was already an open AWL when in fact there was not. This issue has been resolved such that pending AWL orders can now be posted without issue as long as no other AWL order is outstanding for the same time period.
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**Reports**

<b>Sales Journal Summary with Service Period Info current period and prior period amounts incorrect for some transactions</b> (S2K-2411)	An issue was identified with the Sales Journal Summary with Period Information where the calculated amount for some journal entries were not calculated correctly. This has been addressed so that the calculated amounts for the journal entries are correct. For more information about this report, please see the Knowledge Base article <a href="#">here</a> .
<b>Unable to Print Receipts by User Report</b> (S2K-2584)	The Receipts Journal by User would not print when a program in the clinic had been retired. This has been resolved so that the report will run correctly even when a Program is retired.

**MA DPH Integration**

<b>A03 should not generate for a treatment unit or level of care change (Internal transfer)</b> (S2K-2599)	<b>For customers using our new MADPH integration:</b> Due to the way that SMART handles patient treatment unit and level of care changes, we found that these actions were generating false A03 (discharge messages) to integration partners. This primarily affects Massachusetts partners that are interested in the new electronic integration with DPH. We have modified the trigger for these discharge messages such that the action of transferring a patient's treatment unit and level of care will no longer create an A03 through the integration engine.
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