Who should read this document?

This document is intended for system administrators and clinic managers. It summarizes new features and describes the latest technical requirements for installing / upgrading to Centricity Practice Solution 11.

Changes in this release are summarized below. For a detailed description of new features and enhancements, review What's New in Centricity Practice Solution in your documentation library.

Download your complete documentation library from http://centricitypractice.gehealthcare.com/centricity_library/. Unzip to a folder on your system. When you open a document from the Centricity Document Library, you can click links to other guides to open them. Links do not work if you copy a document to a location outside the library folder.

If you are the clinic manager or practice administrator...

Carefully review and consider how changes in this release affect your practice setup and workflows. For questions about how these changes affect your clinical settings and workflows, contact Centricity Practice Services at 888.436.8491 option 2 or your Value Added Reseller (VAR).

For questions about how these changes affect your practice management setup or workflows, contact Centricity Services at 888.436.8491 option 1, or your Value Added Reseller (VAR).

If you are the system administrator...

Before installing or upgrading to this release, review the requirements documented in this release note and the system software/hardware requirements and installation/upgrade instructions in your Centricity Practice Solution documentation library:
- Configuring Environments for Centricity Practice Solution
- Installing Centricity Practice Solution
- Upgrading to Centricity Practice Solution

Important! 3rd-party integration requirements. If you integrated Centricity Practice Solution with non-GE products, contact your providers to confirm support for integrations and any new configuration requirements.
What’s new in this release?

In addition to meeting requirements for ICD-10 compliance, Centricity Practice Solution 11 includes a new Account Summary module, enhanced Chart only license option, and updates to existing features. See What’s New in Centricity Practice Solution for detailed descriptions of new and enhanced features.

Account Summary

Account Summary creates a centralized place to review account information and troubleshoot patient account status. This module provides financial summary information for a guarantor account (total balances and aging) and transaction history with detailed ledger information for each visit within a guarantor’s responsibility.

Account Summary features include:

- **Access Account Summary** from the main menu, tool bar, or Registration.
- **Customize Account Summary** window to your workflow and view preferences from Options > Preferences tab and Workstation Settings.
- **Review guarantor’s patients and balance information in the Financial Summary**, which contains financial information for all patients linked to the guarantor.
- **View visit information, procedure, and transaction level detail in the Transaction History.**
- **Dock, undock and close panels to view multiple records or compare transactions.**
- **Customize column display** in the Transaction History panel.
- **Access Help** from a new Help tab.

ICD-10 - revenue cycle management

ICD-10 codes are now included in revenue cycle modules:

- **Practice Management/EMR Systems.** When charges are imported from the Chart, both ICD-9 and ICD-10 codes are sent. Based on the Visit date, the correct ICD code is imported into the Visit. MIK is updated to accommodate both ICD-9 and ICD-10 code sets for external EMR applications.

- **Encounter Forms/Superbills.** CMS 1500, UB 04, and Superbill forms are updated to print either ICD-9 or ICD-10 codes based on the Visit information.
**Administration updates**

ICD-10 codes appear in the user interface throughout Administration. For example:

- **Specify date for ICD-10 support.** You can specify a date when you want ICD-10 codes supported within the enterprise (on Codes > Settings > ICD-10 Settings).

- **Specify settings for ICD-10 or ICD-9 codes.** Where relevant, user interface elements allow you to work with either ICD codes during the transition to ICD-10.

**Visit and Case Management updates**

- **Diagnosis search enhanced.** Improvements to the diagnosis search user interface and workflow are included in revenue cycle areas.
  - Use a single field to search by ICD Code, Code, or Description.
  - See related codes of either version in results and become familiar with ICD-10 formats.
  - **Code type required for billing date automatically set.** Based on Visit Date, system automatically filters for the code type required for the billing date.

- **Problem search enhancements.** Improvements to the problem search user interface and workflow are included in both the clinical and revenue cycle areas. For more information on problem search, see "Other workflow and user interface changes" on page 4.

**Reports updates**

All practice management/financial reports that reference ICD codes are updated to display ICD-9 and/or ICD-10 codes. Criteria are updated as needed to allow users to filter by either ICD-9 or ICD-10 codes.

All clinical reports that reference ICD codes will be updated to display ICD-9 and/or ICD-10 codes in an early service pack. Criteria will be updated as needed to allow users to filter by either ICD-9 or ICD-10 codes.

**Collections configuration enhanced**

The following expanded Collections configuration options were added under System > Application:

- Select whether New visits going into Collections are assigned the same collection status of the last visit that was updated when configuring Guarantor-based letters. This applies only to visits related to the same guarantor who has visits in collection status.
- Prevent visits associated to a guarantor with a payment plan from moving to collections even if the visit meets the criteria to automatically move visits to collections.
- When the **Warn if accessing a patient in collections** option is selected, the Collections warning displays only when a patient in collections is accessed in modules other than Collections. The warning is suppressed if the patient is accessed directly from Collections.

**ICD-10 - clinical workflow**

Updated user interface now displays both ICD-10 and ICD-9 codes in new columns in Chart Summary, Problem, and Browser and Mobile Access Problem panes. On mouseover ICD code description pops up. For additional workflows details, see following section.

- System automatically converts an existing code from ICD-9 to ICD-10 on the Problem list.
- Custom lists are auto-populated with ICD-10 codes.
- Physicians can choose the most accurate code at time of visit.
- Existing clinical content (such as CCC encounter forms) automatically populate ICD-10 codes without needing to modify the form.

!!! **Review your custom clinical content!** Before you start coding problems with ICD-10 exclusively, review your clinical content and update any that work with ICD-9 exclusively.

**Other workflow and user interface changes**

In conjunction with support for ICD-10 codes, Centricity Practice Solution 11.0 includes the following changes in Problems and Diagnosis workflows and the user interface.

**Problem Type qualifier is being deprecated**

For customers upgrading from previous versions, legacy patient problems appear in the Chart Summary with the type qualifier and the ICD-9 code, if applicable. For new problems added to the Problem list and for edited reactivated problems, the qualifier is removed and replaced with "DxOf".

When a problem qualifier is removed, an appended problem Comment notes the previous problem qualifier and the ICD code changes. The legacy problem-type qualifier also appears in parenthesis in the problem description.

**Problem/diagnosis search enhanced**

New search capabilities appear in the interfaces and workflows for managing Problems, Orders and Medications.

- **Quick Search.** Provides intelligent search capability that begins searching and displaying problems/diagnosis codes as user begins entering search
Other workflow and user interface changes

Terms, and searches based on commonly used history or relationships to existing codes and observations.

- **Smart List.** Searches frequently used history and can be filtered by specialty group for order entry and claim entry. Specify Smart List to search terms you commonly use.

- **Advanced Search.** A full reference search lets you drill down and select the most accurate code from the appropriate ICD list. With 60+ search results for a term, advanced search provides a guided navigation path through folders and subfolders (based on ICD mapping).

- **Easily switch between ICD-9 and ICD-10 code lists** when searching and sorting.

**Other workflow enhancements**

- **Non-billable codes easier to identify.** All non-billable codes appear grayed-out.

- **Enhanced Custom List maintenance.** Users can quickly find and add ICD codes to custom lists with a minimum of screens and clicks using new Problems search functionality and checking Add to Custom List.

- **Problem/diagnosis code history at a glance.** A new pop-up displays the problem/diagnosis history for the patient when you press Diagnoses... from the Update Order Details window.

- **Changes in the Encounter form navigation.** Ease of navigation has been improved, resulting from changes to the Encounter form window including: mouseover highlights, scroll bar resizing, and reordering of Chart menu items.

- **Sign and send prescription workflow added.** Users can now sign, print, and send new and changed prescriptions using Sign and Send Prescriptions in the Medications panel. When the physician prescribes a new medication or refill, the Sign and Send Prescriptions button becomes active and medication(s) appear as Pending. Clicking the button signs all pending prescriptions and adds them to the update.

- **Task-based printing.** After adding or modifying a service provider, task-based printing can be selected and configured. Expanded task-based printing option Orders now includes pending orders as well as order letters.

- **Chart Inquiries now support the inquiry “Is before (date compare of value)”**. This inquiry considers the date of an observation value as a criteria for selection. Inquiries that support this functionality are “Date of Last Observation [is before | on or after]” for a selected observation, or “Date of Last Observation Entry [is before | on or after]” for any observation.

- **Configure default Quantity and Type of Unit of Measure** for drugs distributed in the practice in Administration.

- **Retrieving/creating charges workflow improved** and simplified to reduce clicks and prevent errors. When importing charges, if required
information is missing, a single message now lists all missing items. After all required items are added, click **Retrieve Charges** again to automatically import the charges. A new confirmation is required when discarding charges or saving a visit to prevent accidental errors.

**Chart-Only version, enhanced product features**

New Centricity Practice Solution - EMR license option provides access to the charting module without Revenue Cycle management components.

While the following features were added or changed to support the Chart-only version, many are also included in the full licensed version of the application.

**New/changed permissions**

- **Change patient contacts.** Allows the user to change the patient's contacts. This permission is applicable in both Centricity Practice Solution and Centricity Practice Solution - EMR. Users with the New Patient permission can also add contacts while adding a new patient.

- **Change patient home location of care.** Allows the user to change the patient's home location of care. This permission is applicable in both Centricity Practice Solution and Centricity Practice Solution - EMR.

- **Change patient photo.** Allows the user to change the patient's photo. This permission is applicable in both Centricity Practice Solution and Centricity Practice Solution EMR. Users with the New Patient permission can also add a photo while adding a new patient.

- **Create facility.** With this permission, user can automatically create a new Facility when creating a Location of Care.

- **Change/Complete/Remove Orders.** In this release, this permission is required *in addition* to Change Chart in order to modify orders. Be sure to grant Change Chart permission to any orders module users who don't already have it.

If you are upgrading from version 9.5 or later, the permissions noted above are automatically assigned to all users who have the Change registration permission. If you are upgrading from a pre-9.5 version these permissions must be manually assigned after the application is updated.
Simplified interface hides or disables unlicensed features

The user interface was modified to either hide unlicensed practice management features or to indicate their unavailability. For example:

- **Main screen.** PM module buttons are not visible on the main screen and the PM-specific Edit menu is not accessible.

- **Registration.** PM-only features are removed or greyed out. When Centricity Practice Solution - EMR is integrated with a 3rd-party practice management application, users can be prevented from accessing Registration features by disallowing the relevant permissions. When users do not have permission to enter data in a field, it is disabled and greyed out. In an integration, features unique to the application registration module are still editable, however, including Get Photo, Home Location (of care), Facility, and Contacts.

- **Administration/Reports.** PM-only screens are also removed in Administration and Reports.

Other Registration changes

- **Facility field.** This field now displays a default facility if a facility is mapped to the selected location of care. Alternatively, click the binocular icon to search and select a facility.

- **Open Chart.** Users can now open the patient’s chart summary from the patient’s Registration.

- **Chart Contributor relabeled to Chart Access.** All users created on systems licensed for Centricity Practice Solution EMR are automatically set for chart access. Additional permissions may be needed to contribute to (update) patient charts.

- **Expanded Faxing capability.** You can now use a stored fax number to fax patient registration records to a referring provider, responsible provider, pharmacy, service providers, insurance companies, and other personal contacts and businesses in patient contacts lists.

  This fax capability is in addition to the earlier capability under Registration > File > Profile > Print, which is unchanged.

LinkLogic changes for Chart-only licensed version

The following changes support integration between the Centricity Practice Solution - EMR and an external practice management system.

- **System-generated schedule template.** When LinkLogic imports scheduling information for a patient with a provider/resource that does not have an active schedule template, the system automatically creates a template for the given day. No prior setup is required in Administration.

  System-generated schedule templates cannot be modified in Centricity Practice Solution - EMR. The Edit button is changed to View.
- **ScheduLink import changes.** LinkLogic now processes SIU messages without AIL segment and/or an Appointment Type.

- **Setting facility.** When an incoming HL7 Scheduling message does not contain the facility, LinkLogic uses the facility associated with the provider’s home location of care or the location of care for the scheduled resource.

- **Creating appointments.** For Centricity Practice Solution- EMR, LinkLogic uses existing schedule templates or creates and uses them dynamically as scheduling (SIU) messages are received. You need not create templates in Administration in advance before importing messages.

  If a schedule template exists for the day for the provider/resource when an HL7 Scheduling message is received, the appointment is created in that template. If no schedule template exists for the day for the provider/resource, then LinkLogic uses a system-generated template. Appointment and slots are created only for the day and date of the imported appointment. There is only one system-generated template for each provider/resource.

  Currently, appointments created with a facility other than the facility of the template/slot are treated as overbooked appointments.

- **Appointment Type is optional.** If SCH-8 is unspecified, the appointment will be created without any Appointment Type.

- **Required message segments.** For the Chart-only version, LinkLogic requires at least one AIS, AIG, or AIP message segment per SIU message, because the doctor/resource is required to create an appointment. The AIL segment is optional.

### Check /rebuild aggregate tables now handled by SQL Agent job

The FixAggregates option in Server Setup > Utilities > Run Script File is now a configurable recurring SQL Agent job. If your financial reports show that aggregate (pre-calculated) financial values do not match live values in your system, you can rebuild the aggregate tables and remove the mismatch by running this job.

After install or upgrade this job is disabled by default. Enable as you would other jobs in SQL Server Management Studio. By default the job is scheduled to run once a week. If you see a message that the job has failed, contact Centricity Services right away to trouble-shoot the cause. It may indicate a serious problem with your database.

- **Server Setup Pre-Validation.** During upgrade if pre-validation check detects that financial aggregates are out of balance, you should run the FixAggregates job after upgrade.
To enable and configure FixAggregates job:
1. Launch SQL Server Management Studio.
2. Go to SQL Agent > Jobs > FixAggregates - <your database name>.
3. Check Enabled below the Job Description.
4. Click Schedules in the left pane.
5. Double-click FixAggregatesSchedule.
6. On the Job Schedule Properties screen, change the frequency and timing of the job as desired.
7. Check Enabled to the right of the Schedule Type list.
8. Click OK to accept the new settings and again to accept Job Properties.

Changes to LinkLogic

The following changes support exchange of ICD-10 codes when included. See Managing Interfaces with Centricity Practice Solution for detailed descriptions of changes to interfaces and online help for changes to LinkLogic configuration.

ICD-10 changes to LinkLogic and MIK interfaces

- **LinkLogic Problems Export** HL7 interface (PPR message) exports ICD-9, ICD-10, and SNOMED / SNOMED-CT codes in PRB-3 Problem ID fields for diagnoses on patient problem lists.
- **LinkLogic Procedures Export** HL7 interface (DFT message) exports ICD-9, ICD-10, and SNOMED / SNOMED-CT codes in FT1-19 Diagnosis Code fields for diagnoses linked to orders.
- **LinkLogic Orders Export** HL7 interface (ORM message) exports ICD-9, ICD-10, and SNOMED / SNOMED-CT codes in DG1-2 Diagnosis Coding Method, DG1-3 Diagnosis Code, and DG1-4 Diagnosis Description fields for diagnoses associated with each order.
- **LinkLogic Clinical Summary Export** HL7 interface (MDM message) now exports ICD-9, ICD-10, and SNOMED / SNOMED-CT codes for diagnoses in the OBX-5 Observation/Result, which contains the problems section of exported clinical summary documents.
- **MIK Finance Import** HL7 interface (DFT message) now imports ICD-9, ICD-10, and SNOMED / SNOMED-CT codes in FT1-19 Diagnosis Code and DG1-3 Diagnosis Code fields for diagnoses linked to orders.

Backward compatibility is provided for systems that export data in deprecated fields DG1-2 or DG1-4 in ORM messages in a new Standard Add-On IXP file **dg12and4.ixp**. See the “Orders Export HL7 interface specification” and “Using .IXP configuration files” in Managing Interfaces with Centricity Practice Solution.
**ICD-10 changes in LinkLogic and LinkLogic setup**

- **Problems Export New Export Job** (Manual) screen displays ICD-9, ICD-10, and SNOMED problem diagnoses codes for a patient to export from the chart. Where present, both ICD-9 and ICD-10 codes display in patient problems list.

- **Problems Export Constraints supports ICD-10** - Problem SQL filter option enhanced to let you limit LinkLogic problems export based on ICD-10, ICD-9, and SNOMED / SNOMED-CT codes. In addition to basic Code and Description filtering, you can use specified code and description types in your SQL statement to filter for ICD-9, ICD-10 and SNOMED codes. See online help for detailed instructions.

**Other LinkLogic changes**

- **LinkLogic automatically deletes errors, warnings, and notes from the Activity Log after a configured period without stopping DTS**. Previously when no limit was set, when the 50,000 message limit was reached, the DTS shut down without warning. Now when this happens, DTS continues and you see a message in the Error Log.

  Activity Log warnings, notes, and error messages are now regularly removed after a set period by default. GE recommends you do not uncheck these options. Go to **Administration > System >LinkLogic > Defaults**. For the option **Automatically remove error entries [Warnings and Notes] from the Activity Log**, in **Remove entries after**, enter a preferred number of days. Default settings are 30 days for error messages and 7 days for warnings and notes.

- **ScheduLink Import now processes SIU messages without an AIL segment or Appointment Type**.

**.IXP files added in this release**

.IXP files are used to change how LinkLogic interfaces work, the following files are included in this release. For more information about using .IXP files, see “Using .IXP configuration files” in *Managing Interfaces with Centricity Practice Solution*.

- **abbrevlabfooter.ixp**. Imports an abbreviated form of footer lines at the end of lab report documents for each OBR segment so lab report documents look like test results previously received on paper from Sunquest.

- **abbrevlabheader.ixp**. On import, moves OBR lines from lab footer to an abbreviated form beneath each OBR-sub-heading in lab report documents so lab report documents look like test results previously received on paper from Sunquest.

- **llink2.pv1.docloc.ixp**. Root .IXP file that changes PV1-3.4 in ORU Observations Export to include document location of care instead of patient location of care. The location of care for PV1-3.4 is taken from the first document found with observation values to export.
New / changed MEL data symbols

- **obr16sign.ixp.** Exports the order’s signing provider in OBR-16 instead of the order’s authorizing provider.
- **ordinspri.ixp.** Translates the Centricity Practice Solution Insurance order for claims into primary, secondary, or other for IN1-22.
- **pv17sign.ixp.** Exports the order’s signing provider in PV1-7 instead of the patient’s responsible provider.
- **pv119apptid2.ixp.** Populates PV1-19 (Visit Number) with the Appointments ID from an appointment linked to the chart document.
- **labrptheaders.ixp.** Adds header lines with the words OBSERVATION, VALUE, and EXPECTED above the test result lines in imported lab report documents and aligns values beneath in columns.

New / changed MEL data symbols

New and existing data symbols now support ICD-10.

**NEW MEL data symbols**

- **MEL_CHANGE_PROBLEM.** Changes (edits) information for an active problem on the problem list.
- **MEL_REMOVE_PROBLEM.** Removes a problem from the problem list by changing its active status to inactive.

**Updated MEL data symbols**

- **NEWPROBLEM.** Problem type has been deprecated with the implementation of ICD-10. Although NEWPROBLEM will continue to accept the listed types, the argument will have no effect on the New Problem dialog. For code legibility, use the type DX OF for all future use.
- **PROB_AFTER, PROB_NEW, PROB_PRIOR, PROB_REMOVED.** The list format for the PROB_* symbols was updated to return both ICD-9 and ICD-10 codes, and a problem identifier (PRID). The PRID is a unique number to identify the problem. The PRID can be used by other symbols.
- **ORDERS_AFTER, ORDERS_NEW, ORDERS_PRIOR.** A new Diagnosis ICD-10 field was added to the ORDERS_* symbols. This addition affects how the Diagnosis Description and Diagnosis code fields handle multiple entries.
- **LIST_ASSESSMENTS, MEL_ADD_ASSESSMENT, MEL_ADD_MEDICATION.** Updated to use both ICD-9 and ICD-10 codes.
- **MEL_ADD_PROBLEM.** Problem type has been deprecated with the implementation of ICD-10 and does not appear in the application.

**Deprecated MEL data symbols**

- **GETLONGPROBLEMTYPE.** This data symbol is currently included for legacy purposes only and may be removed in a future release.
JBoss / Service Layer changes

**HTTPS now supported**

HTTPS is now required for web service access. All web service (service layer) calls now use HTTPS (SSL). HTTP can still be used to access the Centricity Practice Solution Web site and browser and mobile client access, however all data exchanges between the application and the service layer are secured by HTTPS and encrypted.

This change requires the firewall settings on the JBoss server to be updated to open up port 9443 (or another https port if 9080 is not the default JBoss port). During install/upgrade you'll set the ports and your selections are automatically added to the Windows Firewall Domain Inbound Rule.

Upgrade / install enhancements

Upgrade process reliability is improved and process time reduced by removing redundant steps, optimizing key processes, and adding new validation checks to reduce errors that slow or stop the upgrade process.

*Additional validation checks prevent upgrade errors and failures*

New upgrade checks include—

- **SpreadSheets data integrity** - checks for valid data and removes orphaned SpreadsheetsEditor and SpreadsheetColumn rows.
- **No duplicate user logins in DoctorFacility** - checks for and removes from database any duplicate DoctorFacility.LoginUser values for application versions lower than v9.5.
- **No duplicate Race description values** - checks for duplicate values for Medlists table Race for application versions lower than 9.5. This check blocks upgrade if failed.

*Option to bypass upgrade validation checks*

UpgradeCPS.Inf now includes a “ByPassDBValidations“ switch that can be used to skip the Server Setup Validation screen checks which can be time-consuming.

!!! This feature is disabled by default. DO NOT enable this feature unless recommended by your GE services consultant or VAR. Bypassing validations also skips AutoFixes and Failed Warnings, which may cause a subsequent upgrade failure.

To enable the validation check bypass, open UpgradeCPS.inf file in a text editor and edit the file as follows:

```
[UpgradeParameters]
ByPassDBValidations=1
```
Upgrade / integration considerations

**Supported upgrade paths**

You can upgrade to this version from the following versions:

- Centricity Practice Management 7.1.2
- Centricity Practice Solution v8.x, v9.x, 10.x

**Upgrade path to Chart only version**

You can upgrade to this version from the following versions:

- Centricity Practice Solution v9.5.1
- Centricity EMR v6.1.1, v9.2.6, or v9.5.3

**Compatible client versions**

- **Terminal services/Citrix server**: Centricity Practice Solution 11 and Centricity EMR 9.5x client applications can be installed on the same server running Microsoft® Windows Server 2008 R2 64-bit.
- **Standalone client workstation**: Centricity Practice Solution 11 (PM-only) and Centricity EMR 9.5x clients can be installed on the same workstation.

**Supported platforms/software**

See *Configuring Environments for Centricity Practice Solution* for recommended software and hardware configurations to support Centricity Practice Solution 11 in a variety of computing environments.

Summary requirements include:

- **Database and general server operating system**: Microsoft® Windows Server 2008 R2 64-bit SP1
- **Application Server (JBoss)**: JBoss v5.1 with 64-bit JVM
- **Data Exchange Server**: Microsoft Windows Server 2008 R2 64-bit and supported Windows Client platforms for MIK, Data Transfer Station, and Centricity Clinical Gateway.
- **Hyper-V**: Microsoft Hyper-V Server 2008 or Windows Server 2008 R2 64-bit
- **VMware**: VMWare ESX 4.1, VMWare VMKernel (Linux)
- **Browser and Mobile Access**: Internet Explorer 9, Firefox 8.0, Safari 5.1.1, Google Chrome 10.0
- **Browser and Mobile Access device operating system**: iPhone iOS 5.0.1
- **Client operating systems**: Microsoft Windows 7 Professional (32-bit and 64-bit SP1), Windows Vista Business 32-bit and 64-bit.

  !!! Microsoft Windows XP is no longer supported for the client. Internet Explorer v9 requires Microsoft Windows v7 or Vista.

- **Enterprise applications**: Microsoft Office 2010
- **Citrix® XenApp™ server**: XenApp 6.0 64-bit
- **Citrix XenApp client**: Online Client 12.1.44
- **Microsoft® Windows Remote Desktop Services (OS)**: Microsoft Windows Server 2008 R2 64-bit
- **Microsoft® Windows Remote Desktop Services Client**: RDP 7.1
- **Web browser**: Internet Explorer (IE) 9

**Upgrade instructions**

Detailed instructions for upgrading to Centricity Practice Solution 11 from supported earlier versions are provided in *Upgrading to Centricity Practice Solution* in your documentation library.

![Download your documentation library from http://centricitypractice.gehealthcare.com/centricity_library/. Unzip to a folder on your system. When you open a document from the Centricity Document Library, you can click links to other guides to open them. Links do not work if you copy a PDF to a location outside the library folder.](image)

**Using Domain-level security?**

To use domain level security, you must perform the following after the upgrade completes:

1. Login to the database server as a domain user. It is recommended that a domain administrator account is used.
2. Launch **ServerSetup**.
3. Select **Advanced > Utilities**.
4. Click **Next** to move through the dialogs until you can select the **Security** button.
5. Click **Security** and enter the required information, ensuring your domain is correct.
6. Enter a **domain user**. The user must exist in Active Directory. The user does not have to be a domain administrator.
7. Click **Next** to complete security setup.
Install clinical content / codes

As part of the upgrade, the Knowledge Base update for clinical ICD-10 problem/diagnosis codes is automatically downloaded and applied to your database. However, for licensed revenue cycle modules, you must load ICD-10 diagnosis codes for billing separately.

GE recommends loading only the billing diagnosis codes your practice needs. GE recommends you only load the subset of codes your practice uses at this time. You can defer the ICD-10 update (which includes over 90,000 codes) until you actually need it.

Loading the entire code set takes up to 6 hours. This time is reduced when only the subsets of diagnosis codes and specialties associated with your practice are selected. To further improve loading, make sure all users are logged out of the application while the update is applied.

Clinical content changes

If you have not already installed Centricity Clinical Content (CCC) v 8.3.7.3, designed for Centricity Practice Solution 9.5 and higher, release notes and installation instructions are available on the Centricity Practice Web site at http://centricitypractice.gehealthcare.com/ccc/index.htm.

CCC forms will be updated for ICD-10 before October 2014. Embedded codes have not been updated in this version, however forms using data symbols will pull ICD-10 codes.

Go to http://centricitypractice.gehealthcare.com and navigate to the Clinical Content page to download new and updated clinical content packages and new CCC installer.

For detailed instructions for installing/upgrading your clinical content, see the installation/upgrade instructions for this release:

- Installing Centricity Practice Solution. This guide contains instructions to install and set up Centricity Practice Solution for the first time.
- Upgrading to Centricity Practice Solution. This guide contains instructions for upgrading an existing installation to Centricity Practice Solution 11.

IMPORTANT - Back up customized clinical content before upgrading

During upgrade all factory forms, reports, and other clinical content are overwritten.

Before upgrading to Centricity Practice Solution 11, verify that any clinical content you have customized (note templates, reports, encounter forms) has...
been exported and backed up. You can redeploy custom content to workstations after the upgrade.

Consult your Centricity Services consultant or Value-Added Reseller if you have questions about upgrading your clinical content.

**Visit Manager encounter forms are discontinued**

GE discontinued support for Visit Manager encounter forms with the release of Centricity Practice Solution 9.0. GE provides enhanced functionality for customizations of basic and specialty office visits in Centricity Clinical Content (CCC) suite. Visit Manager is included “as is” and is an optional supplement to the Centricity Practice Solution product.

**Using jobs.txt**

Jobs.txt is a utility you can use to copy updated files such as custom clinical content or reports from the application Web site to multiple workstations. Since the application Web site is under JBoss, the default location for the jobs.txt source folder is

```
[drive]\Program Files\Centricity Practice Solution\jboss\server\default\deploy\[database].war
```

Updated files placed in the source folder are copied to workstations using jobs.txt.

Jobs.txt copy operations permit recursive copy of multiple folders and files from the source folder to the same folder hierarchy on destination workstations. This extends a previous more limited ability to copy multiple files using the wild card character (*).

For detailed instructions for using and configuring jobs.txt, see “Using jobs.txt” in *System Planning and Requirements for Centricity Practice Solution*, in your documentation library.
Important Product Notifications

!!! Administrators and Risk Managers should review these Important Product Notifications for details concerning resolved critical product functionality issues.

The following issues were resolved in this release:

**In Chart Inquiry for specific obs value, system no longer returns values by rounding**

When running an inquiry in Chart Reports for a whole number observation value, the system no longer returns a range of values by rounding. Previously, when running inquiry for labs value of 7, for example, the system returned all patients with values between and including 6.5 to 7.4. SPR26074

**Issues/problems fixed**

The following issues were found and corrected during the Early Adopter program test period.

**Error “The Mime type for this document (Doc Summary) is unknown()”**

When selecting Chart documents in a patient’s chart, this error appeared if there is a null value for Mimetype in the database for the document. User had to click OK to get to the document.

“The Mime type for this document (Doc Summary) is unknown(). The document may not display correctly. Please contact your system administrator.”

The application was changed to prevent this error from occurring.SPR52655

**Centricity occasionally crashes when chart is opened**

Centricity crashed when accessing a chart with this error:

“Error occurred in class WebServiceClientBase, method CallWebService.”

This happened when a user inadvertently copied and pasted text from a document containing embedded (and invisible) low-ASCII control characters (such as line feed, form feed, and so on) to the Message field of a new flag, alert, or pop-up alert. The error/crash occurred when that text was retrieved to populate the Alerts / Flags pane in chart summary.

Now any control characters pasted in to the New Alert/Flag window will be converted to asterisks before being pushed to the database. If you see asterisks in the text of a Flag/Alert message after sending, avoid pasting directly from the source document into the application. To filter out hidden characters in a source document, try pasting into a text editor such as Notepad and then copying into the application. SPR52635
**The CPOE-CCC form freezes temporarily when Commit is selected while assessing a problem**

After selecting the yellow commit button, the system froze for about 2-3 minutes before committing the entry. Form programming was modified to improve the performance and efficiency of the database query. SPR52661

**Centricity Clearinghouse EOB reports do not open in Word even when associated in Folder Options**

EOB reports received from the Centricity Clearinghouse did not open in Word even if the .rcv extension was associated with that application in Folder Options, because Response Management was coded to use Notepad. Now the application is changed so .rcv and .txt files open based on their association in Folder Options, for example, .rcv with WinWord, .txt with Notepad, .rtf with Wordpad, and so on. SPR52607

**Patient Ledger report does not respect date range criteria**

Previously when you entered a Visit or Entered Date range in the Patient Ledger report, the date range criteria were ignored and data was returned from before and after the dates entered. The filter was corrected to return the correct date range. SPR52608

**In certain circumstances charges were retrieved into the wrong patient in Billing Visit**

Previously when bulk retrieve charge settings were set to Always Retrieve into a New Visit and Set Visit Status to X and a user selected multiple visits in the Billing grid and selected Retrieve Charges, if a visit in the list met that criteria, all charges for all visits in the Billing grid list after that visit were created as child visits for that patient visit. The application is modified to prevent this scenario. SPR46509

**Randomly Diagnosis codes do not import when charges are retrieved from the Billing grid**

Corrected a coding error that caused incomplete import of diagnosis codes. After HL7 messages were imported through MIK and the visits were retrieved from Billing (bulk retrieval of charges), occasionally diagnosis codes were missing from some retrieved visits which resulted in approval failure. SPR52735

**When retrieving charges from the Billing grid the Diagnosis did not populate the retrieved visit**

Corrected a problem with charges coming into the application as HL7 messages from Centricity EMR 9.5. Some diagnosis links for imported charges were lost. However, when retrieving from an open visit, the diagnosis was always present. Now diagnosis links for imported charges always appear. SPR52702
Erroneous Transaction Rejected MIK error during Charge Import prevented processing of DFT P03 message

MIK intermittently did not process inbound charges with an error stating that there were more than 12 diagnosis codes, when this was not the case. MIK processing procedure was corrected to prevent a diagnosis from being duplicated erroneously for the visit.

However, you will see the Transaction Rejected error if the HL7 message contains unknown diagnosis codes (ICD codes that are not loaded into the database and appear as ‘????’ when imported).

Scenario 1: If the same HL7 P03 message containing unknown diagnosis codes is imported over and over, MIK will stop processing the message after 12 attempts. MIK reports in the MIK.Log if there are more than 12 unknown codes associated with the same visit. The 12 codes do not appear in the Visit, but they will are recorded in the database, because the codes are unknown to the CPS database. To resolve this issue, review the HL7 message and add any unrecognized codes in Administration. Then try reimporting the message.

Scenario 2: You may also see the Transaction Rejected error if the HL7 message has both known and unknown diagnosis codes in the DG1 segment. In this case, MIK duplicates the known codes if the message is linked to an existing appointment and processed over and over again to the appointment. As in scenario 1, MIK reports this in the MIK.Log if there are more than 12 codes. After import, the visit will display multiple instances of the same known diagnosis. To avoid this, resolve this issue, review the HL7 message and add any unrecognized codes in Administration. Then try reimporting the message.

The sample message below demonstrates scenario number 2. In this example, A80.4 is an unknown (not loaded) ICD code.

DG1|1||A80.4^^I10^309.24^^I9|
DG1|2||E78.0^Pure Hyper^I10^314.0^^I9|
DG1|3||331.0^^I9^A80^^I10|

Duplicate Visits are created when the billing visit status is New and when there is no Checked Out category set in Administration

Due to an earlier change in the product, when an appointment in a Checked Out state before the visit is moved to In Progress, or if no appointment status has a category of Checked Out, the billing screen showed a new visit in addition to the In Progress visit.

Now the stored procedure always correctly connects the visit to the appointment regardless of the status of the appointment. SPR52598

Known issues and troubleshooting

This section contains known issues for this release and application changes related to troubleshooting.
Printers specified for a service provider are not honored when tests and referrals are printed during an update

The order prints out to the system default printer or to the printer specified in the Select Printers option if it is different from the default printer. The order should print out to the printer specified in the Service Provider options. This issue will be addressed in a future release. SPR52673

Print dialog from Alerts/Flags causes wrong window to have focus

In Chart when a window (other than the chart) is open on the workstation that was the last to have focus, when you click Print for an alert or flag highlighted from the Desktop, this previous window pops up on top of the chart/Print dialog.

Workaround: Reselect the Print dialog or Chart. SPR52678

MQIC DPRP Report Show Patient List button not functioning as expected

On the Quality and Reports tab the Show Patient List button for the DPRP report is disabled and a message displays that “No patient fails to meet all selected threshold.”

This issue is resolved in the new version of MQIC which will be available after the general release of this version. Contact your GE account manager to confirm its availability. SPR51965

Some states require prescriptive authority expiry date for providers

The application currently does not have a field for prescriptive authority expiration date required by some states for all prescriptions for NPs and midwives. This requirement will be addressed in an early service pack.

Workarounds:

Option 1: Depending on the length of the license number, an expiry value can be included at the end of the provider license number. Use caution because this may cause an eRx failure if expected length or syntax are not met.

Option 2 (non-eRx only): You might also repurpose the “Data2000” field [User Record, Chart Access Tab] to display the prescriptive authority expiration date. In the field, enter “exp:xx/xx/xxxx”. The colon (:) must be included for the label “exp.” to print along with the date. This field has a maximum length of 15 characters. SPR 40421

System crashes when client running on Windows 2008 R2 server is used to add an attachment

When the client application is running on Windows 2008 R2 server, the system will crash if user attempts to add an attachment such as a patient photo in registration or a scanned document without a camera, Webcam, or scanner attached to the machine. This does not happen when the workflow is
executed on the client running on workstation operating systems such as Windows Vista or Windows 7.

GE recommends you do not authorize users to execute these workflows on the client installed to a database server even with a device attached.

### RDS/Citrix servers running client application

On Windows 2008 R2 Server, GE recommends you enable the Windows feature “Desktop Environment” on the server to support remote application users using these workflows. Please note the following features and limitations in RDS/Citrix environments:

**Digital cameras:** In a RDS/Citrix XenApp environment you can acquire images from digital cameras connected to terminals through USB connectors and then add them to charts. A digital camera enables itself as a removable drive in a Windows operating system that can be seen in the Citrix XenApp/RDS session. If remote drives are enabled, the user can navigate to the drive and acquire the image directly.

**Webcams:** Webcam devices do not support low-level USB redirection. You must acquire Webcam images on a thick client:

1. First acquire images using local tools on a workstation.
2. Store images to a location on your network that all terminals can access.
3. In a chart document, click **Attach** and do the following:
   - Use **File** to navigate to the location of the image file.
   - Use **Clipboard** to acquire an image you have copied onto the clipboard. SPR47288

### Troubleshooting

**Application logout process changes**

Modifications to the application architecture changed logout behavior so that an application logout (gold key) does not change the session state and will not clear an exception error.

**If you encounter an exception error during your workflow:**

1. Click X in the upper right corner of the window to close down the application.
2. Wait at least 3 seconds, and then log back into the application.

**If you continue to experience exception errors:**

1. Click X in the upper right corner of the window to close down the application.
2. Reboot your workstation.
3. Log back into the application.
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Revision history

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