



RADIOLOGY / NUCLEAR MEDICINE RELEASE NOTES

Patch RA*5.0*77

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Department of Veterans Affairs
Health Systems Design & Development
Provider Systems

Release Notes: Patch RA*5*77

This defect resolution patch addresses the following five issues:

1. When the user attempts to display an alert in CPRS initial Patient Selection, a subscript error is filed in the error trap.
2. In the new wRVU report options, certain CPT codes do not reflect correct workload credit.
*Special note - this is NOT related to the 2007 wRVU being available from Fee Basis.
3. When displaying the Activity Log within View Exams by Case No. [RA VIEWCN] option, if there are more than two entries for 'Exam Activity', the excess activity scrolls out of view without a pause or 'press return to continue' prompt.
4. If the Fee Basis RVU data has not yet been released for the current calendar year, all wRVU reports show zeros for any exams performed in the current calendar year.
5. At the bottom of the Scaled RVU reports, a listing of the scaling factors by imaging type is provided. Currently, imaging types without a defined scaling factor default to a scaling factor of 1, but they do not appear in the list of Imaging Types at the end of the reports.

See the Patch Description for installation instructions and full background information.

#1 – Subscript error

When a user attempts to display a Radiology alert notification in the CPRS Patient Selection screen, a subscript error is filed in the error trap. This happens when an alert is opened/read elsewhere and the data has not yet been updated in CPRS. In other words, CPRS does not know that the alert has been read and the accompanying TMP global nodes have been deleted.

Resolution: Routine RAO7PC4 has been modified to sense the absence of the data variable causing the subscript error, allowing normal logic flow to continue.

#2 – Missing RVU values

When using the new RVU (Relative Value Unit) reporting software, no RVU is being returned/utilized on some CPT codes.

Resolution: It has been determined that "G" codes recently converted to CPT codes do not contain an RVU value for entries without CPT code modifiers. The RVU reporting software has been modified to default a -26 CPT modifier when calling the API RVU^FBRVU. This will ensure that the appropriate RVU is returned. It is only called if the RVU value is 0 and the modifier is null.

#3 – Scrolling issue

When using View Exam by Case No. [RA VIEWCN] option, the Exam Activity section scrolls out of view when displaying to the screen if there are more than two lines of Exam Activity to be displayed.

Resolution: Routine RAPROD1 has been modified to cause the display to pause and ask 'Press Return to continue or "^" to exit:' to prevent exam data from scrolling out of view.

#4 – RVU Reporting issues

Normally, a Fee Basis patch is released each year that contains the new RVU data for the current calendar year. In some instances the needed data will not be available for an unspecified amount of time into the new calendar year.

Resolution: The RVU reporting routines have been modified to sense whether the new RVU data is available from FEE BASIS and if not, will calculate the reports with the previous year's RVU data. A note will also be placed in the report headers to denote the use of a previous calendar year's data.

#5 – Scaling Factor issues

When listing the Work RVU Scaling factors, the following Scaled RVU reports do not print scaling factors for imaging types that do not contain an entry in the IMAGING TYPE file (#79.2), SCALING FACTOR CY field (#200):

- Physician scaled wRVU Report by Imaging Type [RA WKLIPHY SWRVU ITYPE]
- Physician scaled wRVU Report by CPT [RA WKLIPHY SWRVU CPT]
- Procedure Scaled wRVU/CPT Report [RA PROC CPTSWRVU]

Resolution: Modifications will be made to the Work RVU reporting routines to print a default listing of each imaging type that does not have an entry in the SCALING FACTOR CY field (#200) of the IMAGING TYPE file (#79.2) by showing that it has a default scaling factor of 1.

Example:

ULTRASOUND	US	1.00 (default)
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