

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	Mckesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-01	1.001	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print a unique Master Client Record.	Implies there is only one active Master Client Record at a time.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	E	NA	E	E	E	E
F-01	1.002	The system shall associate (store and link) key identifier information (e.g., system ID, medical record number) with each Master Client Record.	Examples of Unique Key Identifiers Include: System-generated ID, Provider Organization-assigned Health Record Number, Governmental-assigned client identifiers.  Key identifier information must be unique to the client record, but may take any system-defined internal or external form.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	E	NA	E	E	E	E
F-01	1.003	The system shall be able to store more than one client identifier in each Master Client Record.	Examples of identifiers include: (e.g., Biometrics, SSN, Calif. Medi-Cal CIN, Drivers License, and State ID#). For interoperability, practices need to be able to store a minimum of 3 additional client identifiers. Examples include an ID generated by an Enterprise Master Client Index, a health plan or insurance subscriber ID, regional and/or national client identifiers if / when such become available.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	E	NA	E	E	E	E
F-01	1.005	The system shall use key identifying information to identify (look up) the unique Master Client Record.		E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	E	NA	E	E	E	E
F-01	1.006	The system shall provide more than one means of identifying (looking up) a client.	Examples of alternative identifiers include: Client date of birth, phone number, medical record number, SSN, CIN, name, and Driver's License number.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	E	NA	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-01	1.007	The system shall be able to include or exclude client information from reporting functions.	<p>Examples of inclusion and exclusion include:</p> <ul style="list-style-type: none"> <li>- Inclusion by payer relationship, government requirement, income level, case coordinator, etc.</li> <li>- Exclusion by death, transfer, relocation, etc.</li> </ul> <p>Being exempt from reporting is not the same as de-identifying a client who will be included in reports.</p> <p>Example of restricted viewing of a client identifier is Social Security Number.</p> <p>Inclusion or exclusion information embedded in the Master Client Record may be designed to affect all or only certain reporting functions.</p>	E	E	E	E	E	E	E	NA	E	NA	E	E	3	E	E	E	E	E	NA	E	P	E	E
F-01	1.009	The system shall be able to merge Master Client Records.	<p>Implies client was assigned two or more Master Client Records.</p> <p>Merged data may cause other client data to be merged that is demographic, financial, clinical, etc.</p> <p>Merging doesn't imply destruction of prior information or non-compliance with audit trail requirements.</p>	E	E	P	E	E	E	P	NA	E	NA	E	E	E	P	E	E	E	NA	M	E	E	E	

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-01	1.011	The system shall be able to integrate client records with information from other databases or EHR computer systems (internal or external).	Examples of Information Integration Include: Community resources listings, Client wait lists, Intake Screenings with call logging, client registrations, client referrals, and funding sources (such as CSI, PATH, SAMHSA, UMDAP).  Examples of Call-Logging Data Include: Date of call, staff receiving call, name, telephone number, language requirement, referring party, and call disposition.	M	E	M	NA	M	E	C	NA	E	NA	E	E	E	E	E	C		M	NA	E	E	E	E
F-01	1.013	The system shall be able to link additional client classifications to a unique client record.	Examples of Classifications Include: Client care covered by categorical funding and/or grants, High risk status, etc.	E	E	M	NA	E	E	E	NA	E	NA	E	E	E	E	M	E		E	NA	E	E	E	E
F-01	1.014	The system shall be able to prevent multiple Master Client Records for the same client.	Example of prevention techniques includes: Checking databases for duplicate names, home addresses, data of birth, Social Security, etc.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E	NA	E	E	E	E
F-01	1.015	The system shall be able to link client identifiers with client demographic data.	Implies linkages that support required data reporting.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E	NA	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-02	2.001	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print client demographic data.	Examples of Demographic Information Include: Current Name, Prior name(s), Home or work address; Phone number(s); E-mail addresses; Date of Birth; Contact information for client relatives, friends, or other care advocates; Alternative methods of contact (e.g., alternate addresses, alternate phone numbers, etc.); Etc.  It is assumed that all demographic fields necessary to meet legislative and regulatory (i.e., HIPAA), research, and public health requirements will be included.  Input may include various types of data including: Free text, multiple choice, and drop-down menu items. See 43.040.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E	NA	E	E	E	E
F-02	2.005	The system shall be able to store client demographic information in separate discrete data fields, such that data extraction tools can retrieve these discrete data.		E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E	NA	E	E	E	E
F-02	2.009	The system shall be able to merge separate client demographic data records.		E	E	P	E	E	E	P	NA	E	NA	E	E	E	P	E	E		E	NA	M	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	Mckesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-02	2.01	The system shall be able to display and review all data in two similar type client demographic records for the same client, identifying the data that is different.	This will support determining the client demographic information that should exist subsequent to merging two records to one.	E	E	M	E	E	E	P	NA	P	NA	E	NA	E	P	E	E		E	NA	C	E	E	E
F-02	2.011	The system shall be able to require user confirmation prior to merging any client demographic information.		E	E	P	E	E	E	P	NA	P	NA	E	E	E	P	E	E		E	NA	M	E	E	E
F-02	2.012	The system shall be able to create separate records from client demographic records erroneously merged.		M	NA	M	E	M	E	P	NA	P	NA	E	NA	M	P	M	E		NA	NA	M	E	E	E
F-02	2.013	The system shall be able to register clients who will receive minimal care.	Implies requiring fewer mandatory fields to be completed.	E	E	M	E	E	E	E	NA	P	NA	E	E	E	E	E	E		E	NA	E	E	E	E
F-02	2.014	The system shall be able to capture limited pre-registration information when full registration cannot be completed.		E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E	NA	E	E	E	E
F-02	2.015	The system shall be able to store both permanent and temporary client addresses.		E	P	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E	NA	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

**Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-02	2.017	The system shall be able to navigate between client registration and other screens without loss of registration data already inputted.	Examples of other screens: Scheduling, billing, client identifier lookup, and service / treatment records lookup.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	NA	E	E	E	E	E
F-02	2.019	The system shall allow clients to input data.	Example data includes: demographic, insurance information, family history, social history and prior medical history.  Such data entry may occur via Internet Web interfaces, an in-office kiosk, etc..	C	NA	P	E	E	E	E	NA	P	NA	E	E	E	E	E	E	E	NA	E	M	E	E	
F-15	15.001	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print client consents and authorizations.	Implies handling of: Hardcopy signatures; Electronic Signatures; Refusal to sign notations; Etc.  Includes supporting follow up processes to obtain missing client signatures.  Consents and authorizations may be: Sent electronically, Associated with a specific clinical activity, Displayed chronologically, input in a variety of methods (e.g., scanned)  Implies timely review capacity and HIPAA compliance.  See Practice Management 43.006 and Infrastructure 43.040.	P	E	E	E	E	E	E	NA	E	NA	E	E	E	E	P	E	E	NA	E	M	E	E	

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-15	15.005	The system shall be able to store and display administrative authorizations.	Examples of Administrative Authorizations Include: Privacy notices, etc.  Needed for HIPAA. Scanned copy is acceptable for 2007.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	E	NA	E	E	E	E
F-15a	15a.01	The system shall provide the ability to indicate that a client has completed advanced directive(s).	Important for appropriate use of resources at end-of-life and may just include a Yes/No indication.	E	E	E	E	E	E	E	NA	P	NA	E	E	E	E	E	E	E	E	NA	E	E	E	E
F-15a	15a.02	The system shall provide the ability to indicate the type of advanced directives, such as living will, durable power of attorney, or a "Do Not Resuscitate" order.	This may be recorded in non-structured data or as discrete data.	E	M	E	E	E	E	E	NA	P	NA	E	E	E	E	E	E	E	E	NA	E	P	E	E
F-15a	15a.03	The system shall provide the ability to indicate when advanced directives were last reviewed.	This may be recorded in non-structured data or as discrete data.	E	M	E	E	E	E	E	NA	P	NA	E	E	E	E	E	E	E	E	NA	E	P	E	E
F-20	20.001	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print non-medication referral orders with detail adequate for routing.	This could include referrals to sub-specialists, physical therapy, speech therapy, nutritionists, and other nonmedication, nonclinical orders.  Adequate Detail Includes, But Is Not Limited To: Date; Client name and identifier; "Refer to" specialist name, address, and telephone number; "Refer to" specialty; Reason for referral; Referring physician name; etc.	E	E	M	E	E	E	E	NA	P	NA	E	E	E	E	E	E	E	E	NA	E	M	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	DeFran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	Mckesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-20	20.002	The system shall be able to record user ID and date/time stamp for all referral-related events.	Necessary for medico-legal purposes. Security	E	E	M	E	E	E	E	NA	P	NA	E	E	E	E	E	E	E	E	NA	E	E	E	E
F-20	20.004	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print consultation and referral forms.		E	M	M	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	E	NA	E	E	E	E
F-24	24.001	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print inter-provider communication.	See Practice Management 43.012 and Infrastructure 43.040.	E	E	NA	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	E	NA	E	P	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	Mckesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-26	26.001	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print healthcare service provider demographic information in a directory of healthcare service providers.	Examples of Healthcare Service Providers Include: Health Providers internal or external to the organization responsible for the EHR system.  Examples of Demographic Information Include: Provider name, provider location, salaried or contract employment, credentials, language, days and times worked, service specialties, languages spoken, training accomplished, contact information, effective Start / Stop Dates, etc.  Examples of Credentialing Include: State licensures (MD, MFCC, LCSW, MFT, LPT, etc.), DEA, and NPI numbers. Credentialing and Certification data shall include Effective and Expiration Dates.	M	E	M	E	E	E	E	NA	NA	NA	E	E	E	E	E	E	E	E	NA	E	E	E	E
F-26	26.003	The system shall validate, at the point of service entry, that the rendering healthcare service provider is credentialed to provide the service / treatment.	For example, health care service provider is, or is not, credentialed to perform medical medication support service / treatments.	E	E	M	E	E	E	E	NA	NA	NA	E	NA	M	E	M	E	E	E	NA	E	E	E	E
F-26	26.009	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print healthcare service providers system attributes.	Examples of Healthcare Service Provider System Attributes Include: Relationships to specific fee schedules, specific health plans, specific procedure codes, or groupings of these attributes.	E	E	M	NA	E	E	E	NA	P	NA	E	E	E	E	E	E	E	E	NA	E	E	E	P

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netsmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-27	27.001	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print information of an Electronic Scheduler.	<ul style="list-style-type: none"> <li>Examples of Electronic Scheduler functionality include: System wide access; Scheduling of clients, healthcare service providers, interpreters, space, equipment, vehicles, and other resources; Inquiries such as "find first available appointment for Dr. X"; Multi-month advance scheduling for client services and medication management; Entry of recurring appointments, staff comments, and reason for appointment; Overbooking management; User notifications/warnings of potential appointment problems; Assigning resource non-availability; Many to one (providers to client) scheduling, and cancelling, rescheduling or other modification of existing appointments; Modification of appointments to show them as missed, re-scheduled or completed appointments; Interface with charge entry system(s); Interface with Client Appointment Waiting List system(s).</li> <li>Examples of scheduler information include: Client name, client chart number, client date of birth, client gender, client appointment date/time, client telephone number and address, provider name, client co-pay due, service/treatment authorization expiration dates, insurance expiration dates, etc.</li> <li>Scheduler data may be populated either through data entry in the system itself or through an external application interoperating with the system.</li> </ul>	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	E	NA	E	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-27	27.027	The system shall be able to communicate language-appropriate scheduling information to clients.	Examples of scheduling information include: Email, letters, address labels, notices, reminders, phone messages, etc.  Examples of reasons for communication include: Missed, canceled, scheduled, or rescheduled appointments; Appointment related follow up communication.  Includes automated communication protocols such as: auto-telephone messages and auto e-mail.	M	M	E	E	E	E	E	NA	P	NA	E	E	3	E	M	E		M	NA	E	M	E	3
F-27	27.038	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print information of a Client Appointment Waiting List.	Similar to Electronic Scheduler comments.	E	M	M	E	M	E	E	NA	P	NA	E	E	E	E	E	E		M	NA	C	P	E	E
F-27	27.041	The system shall be able to display or print information on clients who missed or cancelled appointments.	Displayed / printed information may: Be bound by a user-selected date/time period; Include reasons for cancellations.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E	NA	E	E	E	E
F-27	27.044	The system shall be able to print a charge ticket (super bill) before the appointment or when the client arrives and checks in.		E	E	E	NA	E	E	E	NA	3	NA	E	E	E	E	E	E		M	NA	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platon Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-28	28.001	The system shall be able to generate reports based on existing, or missing, healthcare service, financial, and administrative data.	<p>Implies: Both adhoc and scheduled reporting capability; Ability to Interface to internal and external reporting tools.</p> <p>Reporting Examples include: Reports on multiple clients (i.e., group therapy); Monthly trend reports; Client Diagnosis analysis reports; Healthcare service provider comparison reports: Cost reporting; Usage of disease registries; Usage of standard reports; Usage of complex reporting data queries; Capability to report on all data in the system; Capability to export data to other electronic office formats (e.g., MS Excel, MS Access, etc.); Reporting with multi-layered data sorts; Usage of "wild cards" in report selection parameters; Computation based on system information and report parameters; Analysis related to medications and service / treatments; "Dashboard" reporting; Missing data reports.</p> <p>Examples of Missing Data Reports: A lab test has not been performed or a blood pressure has not been measured in the last year.</p>	E	E	E	E	E	E	E	NA	P	NA	E	E	3	E	E	M		E	NA	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	Mckesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-28	28.004	The system shall allow users to specify report parameter variables (e.g., sort and filter criteria).	Example Variables: 1) Client Demographic and Clinical Data (i.e., all male clients over 50 that are diabetic and have a HbA1c value of over 7.0 or that are on a certain medication). Minimum demographic data are age and gender. 2) Data date ranges. 3) Program Type. 4) Organizational Department. 5) Provider.  Examples of Data Date Ranges Include: One or more times per day, weekly on specified day, monthly on first day of month and fiscal period, etc.  Includes modifying one or more parameters of a saved report specification.	E	E	E	E	E	E	E	NA	E	NA	E	E	3	E	E	E		E	NA	E	E	E	E
F-28	28.005	The system shall be able to upload, download, and access report information.	Examples include: Access to print files data output; Upload and download of plain text, MS Excel, Adobe PDF, and XML file formats.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E	NA	E	E	E	E
F-28	28.007	The system shall be able to save report parameters for generating subsequent reports.		E	E	E	E	E	E	E	NA	E	NA	E	E	M	E	E	E		E	NA	E	M	E	E
F-28	28.009	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print a variety of outcome measurement instruments.	Includes using locally-defined and third-party licensed scoring protocols to summarize outcome instrument data.	E	M	M	NA	E	E	E	NA	P	NA	E	E	E	E	NA	E		E	NA	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-28	28.011	The system shall allow on-line clinical review of outcome score trends over time.	This capacity is intended to support clinical decisions.	E	M	NA	E	E	E	E	NA	P	NA	E	E	E	E	E	C		M	NA	E	E	E	E
F-28	28.013	The system shall be able to report in various formats.	Includes reporting to different media, (E.g., Screen displays, Printed paper, and electronic files)  Examples of formats include: ASCII , XLS, CSV, PDF, MDB, TXT, DIF, XML, etc.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E	NA	E	E	E	E
F-28	28.014	The system shall allow report specifications to be copied, edited and added to the reports menu with a new report name.	Storage location of report specifications and created reports should be able to be configured by the individual facility.	M	E	E	E	E	E	E	NA	P	NA	E	M	E	E	E	E		M	NA	E	E	E	E
F-28	28.016	The system shall support the collection, compilation, reporting and analysis of all mandated outcomes.		M	E	M	E	E	E	E	NA	P	NA	E	E	E	E	E	P		M	NA	E	E	E	E
F-28	28.017	The system shall support reporting and data analysis of the County's Quality Assurance Programs.	Quality Assurance: The development and production of reports based on Payor- and County-identified performance and outcome measures for access, assessment, service/care planning, service / treatment delivery, etc. Also aids random chart sampling and review processes.	E	E	M	E	E	E	E	NA	P	NA	E	3	E	E	E	C		M	NA	E	E	E	E
F-28	28.018	The system shall support reporting and data analysis of the County's Quality Improvement Programs.	Quality Improvement: The development and production of reports that track and trend quality measures over time and can support the identification of variation that is material and statistically significant.	E	E	M	E	E	E	E	NA	P	NA	E	3	E	E	E	C		M	NA	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platoon Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-28	28.019	The system shall support reporting and data analysis of the County's Utilization Review Programs.	Utilization Review: The development and production of reports that track utilization throughout the county and identify specific clients, clinicians, service / treatments, and/or programs that are above or below user-designated trigger thresholds.	E	E	M	E	E	E	E	NA	P	NA	E	3	E	E	E	C		M	NA	E	E	E	E
F-28	28.022	The system shall be able to measure system performance impacts due to the execution of reports simultaneous to other system operations.		M	E	M	E	E	E	E	NA	NA	NA	E	NA	E	E	E	E		E	NA	E	E	E	E
F-28	28.024	The system shall be able to interface with SQL-compliant third-party report writer applications.	Examples of Third-Party Report Writers Include: Crystal Reports, Microsoft Access, R&R Report Writer, etc.	E	E	P	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E	NA	E	E	E	E
F-28	28.025	The system shall support a letter-writing/mail merge function.	Examples of merge includes: Microsoft Word integrated with the system to produce letters to clients, clinicians and other parties.	M	M	E	P	E	E	E	NA	NA	NA	E	E	3	E	E	E		E	NA	E	E	E	E
F-28	28.026	The system shall support letter templates.	Examples of Support Include: Automated generation of a referral letter; generation of a follow-up client letter when an appointment is recorded as a missed appointment.	M	M	E	E	E	E	E	NA	E	NA	E	E	3	E	E	E		E	NA	E	E	E	E
F-28	28.028	The system shall support the export of production database data to a reporting server or data store.	Implies support for maintaining integrity of production data and improving system performance.	E	E	P	E	E	E	E	NA	NA	NA	E	E	E	E	E	E		E	NA	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-28	28.031	The system shall be able to display and print database documentation.	Examples of Database Documentation Include: A complete data dictionary and Entity Relationship Diagram of all of the tables, table relationships, fields, and field attributes.	E	E	M	E	E	E	NA	NA	E	NA	E	3	E	E	E	E		E	NA	E	E	E	P
F-28	28.032	The system shall support drill-down reporting to examine the underlying data behind figures on report displays.	Common to "Dashboard" reporting.	M	E	M	E	E	E	P	NA	NA	NA	E	E	E	E	E	E		E	NA	C	E	E	P
F-28	28.034	The system shall provide predefined views of data sets that merge data from multiple tables into logical reporting groupings.	Examples of Predefined Views Include: Predefined by Clients; Predefined by healthcare service providers; Predefined by administrative staff; Predefined views including service / treatments, service / treatment authorizations; Etc.  Predefined views assist nontechnical users in creating new standard, management, and ad hoc reports.	E	E	M	E	E	E	E	NA	NA	NA	E	3	E	E	E	E		E	NA	NA	E	E	E
F-28	28.035	The system shall be able to report by groupings of client demographics data.	Examples of grouping include: User-defined population cohorts, geographic clusters of ZIP codes, groupings of client eligibilities, etc.	E	E	E	E	E	E	E	NA	E	NA	E	E	3	E	E	M		E	NA	E	E	E	E
F-28	28.036	The system shall support bidirectional transfer of data between business associates.	Examples of business associates include: State and County or County to County	E	E	M	E	E	E	C	NA	M	NA	E	E	E	E	E	C		E	NA	E	E	E	E
F-28	28.037	The system shall be able to report data through national healthcare electronic transaction standards.	Examples of national standards include: HL-7 and ASC X12N transactions; support the translation of data sets based on predefined translation code tables; support the development of error-checking routines, flagging via error reports, and the ability to readily resolve nonmatching data.	M	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	C		E	NA	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-28	28.038	The system shall be adaptable to specification changes from payors, and other business associates.		E	E	M	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	NA	E	E	E	E	E
F-28	28.039	The system shall support client satisfaction surveys reporting.	Implies scheduled and on-demand surveys.	M	E	M	NA	E	E	E	NA	NA	NA	E	M	E	E	E	C		E	NA	E	E	E	P
F-30	30.016	The system shall be able to notify user immediately of data entry validation errors.	Examples of Data Entry Validation Include: Authorized practitioner scope of practice, service site, department, service provider, etc.	E	E	M	E	E	E	E	NA	P	NA	E	NA	M	E	E	E		E	E	E	E	E	E
F-30	30.021	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print client service / treatments, including those that are group based.	Implies participants in a group may be coordinated by several different teams within the same agency; groups can easily be created or modified.  Implies when service / treatments are entered for a group, all group members are to be displayed for rapid data entry.  Implies data entry retrieval by date, client identifier, service / treatment type, provider identifier, diagnosis, referred provider, client care funding, and client financial liability, etc.	E	E	M	E	E	E	E	NA	P	NA	E	E	E	E	E	P		E	E	C	E	E	E
F-30	30.022	The system shall allow for multiple healthcare service providers in a group to have different billing and documentation times per client service.		E	E	E	P	E	E	E	NA	P	NA	E	E	M	E	E	P		E	E	C	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-31	31.002	The system shall be able to select, or offer choice, of an appropriate billing code and billing fee based on data input for, or supporting, a client service / treatment.	Examples of choice include:: Selection of a CPT Evaluation and Management code based on provider documentation. May be accomplished via a link to another application.	E	E	3	E	E	E	E	NA	E	NA	E	E	E	E	E	P		E	NA	E	E	E	E
F-31	31.004	The system shall provide the ability to interface the most current procedure code with the current service/Care Plan.		E	E	M	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E		C	E	E	E
F-31	31.005	The system shall support financial and administrative rules that allow posting charges for more than one day for one client on one screen.		E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	E	E		E		C	E	E	E
F-31	31.009	The system shall support financial and administrative rules that allow exporting charges to a current or future practice management system.		M	E	M	E	E	E	C	NA	3	NA	E	E	E	E	E	M		E	E	E	E	E	E
F-31	31.01	The system shall support financial and administrative rules that ensure actual payor charges match the clinical charting.		E	E	NA	E	E	E	E	NA	3	NA	E	E	E	E	E	E		E	NA	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	Mckesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-31	31.015	The system shall have the ability to provide a list of financial and administrative codes.	For example, ICD-9 CM, ICD-10 CM, and CPT-4 codes.	E	E	E	P	E	E	E	NA	E	NA	E	E	E	E	E	E	E	E	E	E	E	E	E
F-32	32.001	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print eligibility data obtained from a client's third party payor.	Implies participants in a group may be coordinated by several different teams within the same agency; groups can easily be created or modified.  Implies when service / treatments are entered for a group, all group members are to be displayed for rapid data entry.  Implies data entry retrieval by date, client identifier, service / treatment type, provider identifier, diagnosis, referred provider, client care funding, and client financial liability, etc.	E	E	3	E	E	E	E	NA	3	NA	E	E	E	E	E	C	E	E	E	E	E	E	E
F-32	32.004	The system shall be able to process retroactive health plan eligibility.	Implies that a new eligibility record is added to the system for each client monthly Medi-Cal eligibility, including all retroactive additions to Medi-Cal.	E	E	M	E	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	E
F-32	32.005	The system shall be able to comply with electronic transmission of HIPAA-Compliant Eligibility Determination, Enrollment and Disenrollment formats.	Implies usage for benefit eligibility determination in Medi-Cal, Medicare, Insurance, and other third party payor systems.	E	E	M	E	E	E	E	NA	3	NA	E	E	E	E	E	P	E	E	E	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-32	32.007	The system shall support Medi-Cal eligibility evaluation of registered clients..	Examples of Evaluation Support Include: For clients with no Third-Party coverage reporting their full names, identification information, and all encounters / charges within a user-specified date range; Obtaining financial screening information necessary for determining Medi-Cal eligibility; etc.  Evaluation may be ad hoc or scheduled daily, weekly, monthly, etc.	E	P	M	NA	E	E	E	NA	3	NA	E	NA	E	E	M	P		M		E	P	E	E
F-32	32.009	The system shall support the manual on-line review and update of insurance records, as necessary.	Examples of Special Handling Conditions Include: Partial eligibility match requiring investigation, Clearing Medi-Cal Share-of-Cost responsibility, CMSP eligibility, other State aid codes, Medicare, private insurance, and Medi-Cal clients with a different responsible county.	E	E	M	E	E	E	E	NA	3	NA	E	E	E	E	E	P		E		E	E	E	E
F-32	32.015	The system shall integrate Medi-Cal eligibility assessments processes with eligibility referral systems.		M	P	M	E	M	E	E	NA	3	NA	E	NA	E	E	E	P		M		C	P	E	E
F-32	32.016	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print data required for the support of various pharmaceutical company indigent client, "Patient Assistance Programs (PAP)".	Patient Assistance Programs support indigent healthcare.	E	M	NA	NA	E	E	E	NA	3	NA	E	E	E	M	M	M		M		C	M	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-32	32.017	The system shall be able to generate medication-specific "Patient Assistance Programs (PAP)" applications forms to request medications at no cost from manufacturers.	Implies different application forms for multiple Patient Assistance Programs	M	M	NA	NA	E	E	E	NA	3	NA	E	E	E	M	M	M		M		C	M	E	E
F-32	32.019	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print "Patient Assistance Programs (PAP)" forms and the status of related pending applications.		M	M	NA	NA	E	E	E	NA	3	NA	E	E	E	M	M	M		M		C	M	E	E
F-33	33.001	The system shall be able to identify by name all healthcare service providers associated with a specific client service / treatment.	A healthcare service provider is defined as anyone delivering clinical care such as physicians, PAs, CNPs and nurses; the provider is the person who completes the note.	E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E		E		E	E	E	E
F-33	33.002	The system shall be able to specify the role of each provider associated with a patient, such as encounter provider, primary care provider, attending, resident, or consultant.	This is simply meant as a means to define the provider role. Display of that data is not addressed.	E	E	E	E	E	E	E	NA	P	NA	E	E	E	E	E	E		E		E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-33	33.003	The system shall be able to display and print the primary or principal provider responsible for the care of a client within a care setting.		E	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	E
F-33	33.004	The system shall be able to create a list of all clients who have had a service / treatment with a given healthcare service provider.		E	E	E	E	E	E	E	NA	E	NA	E	E	E	E	E	E	E	E	E	E	E	E	E
F-40	40.001	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print all mandated reporting data.	Examples of Mandated Reporting Data Areas Include: California CSI, DCR, and OSHPD reporting.	E	P	M	E	E	E	E	NA	P	NA	E	E	E	E	E	M		M		C	E	E	E
F-40	40.002	The system shall be able to import and integrate external mandated reporting data.	Examples of External Mandated Reporting Data Areas Include: DCR and Cost-Reporting. (XML Schema Definition files, etc.)	P	M	M	E	M	E	C	NA	NA	NA	E	C	M	E	E	C		M		C	P	E	C
F-40	40.004	The system shall be able to produce reports based on absence of mandated data elements.		E	E	M	E	E	E	E	NA	NA	NA	E	3	3	E	E	C		E		E	E	E	E
F-40	40.006	The system shall be able to generate error or suspension reports prior to submission of a mandated report.		E	E	M	E	E	E	E	NA	NA	NA	E	NA	E	E	M	C		E		E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-40	40.007	The system shall be able to specify the output file format for mandated reporting.	Examples of file formats include: XML, CSV, etc.	E	E	M	E	E	E	E	NA	P	NA	E	E	E	E	E	E		M		M	E	E	E
F-40	40.008	The system shall be able to produce all mandated reports.	Examples of mandated reports include: DMH EOY Cost Reporting, CSI & OSHPD, MHSA, PATH, and SAMHSA Reporting.	E	P	M	E	E	P	C	NA	P	NA	E	E	E	M	E	C		M		C	E	E	E
F-40	40.009	The system shall be able to translate healthcare service provider coding into required reporting formats.	Examples of Data Coding Include: Ethnicity codes, Gender, etc.  Implies automated and manual translation capability.	E	E	M	E	E	E	E	NA	NA	NA	E	NA	E	E	E	E		E		E	E	E	E
F-40	40.011	The system shall support validation of mandated reporting data.	Examples of validation include: Verifying date of service / treatment consistent with provider employment or contract period; Treatment / Service meets any authorization requirements; Reporting adheres to all mandated reporting rules; Target population for reporting matches system data attributes, Etc.	E	P	M	E	E	E	E	NA	NA	NA	E	NA	E	E	E	C		E		E	E	E	E
F-40	40.012	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print healthcare service Treatment Authorization Requests (TARs).	Examples include both Inpatient and Outpatient TARs.	M	P	M	E	E	E	E	NA	NA	NA	E	E	E	E	E	P		E		E	E	E	E
F-40	40.013	The system shall be able to input modify, inactivate, delete, update, display, copy, and print client care episodic data.	Examples include: Inpatient and Outpatient episodes data; Related Utilization Review notes; User-defined checklists; Daily census and bed statistics; etc.	E	E	M	NA	E	E	E	NA	NA	NA	E	NA	E	E	P	P		E		E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-41	41.001	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print Accounts Payable information.	Examples of Accounts Payable information include: Receiving HIPAA 837 and 997 transactions; Receiving hardcopy health claims information;	E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	E
F-41	41.002	The system shall be able to adjudicate health claims payment-related requests.	Examples of Health Claims Payment-Related Requests Include: Receiving HIPAA 837 and 997 transactions; Receiving hardcopy health claims.  Examples of Adjudication Basis Include: Payee eligibility; Client eligibility; Insurance plan priority for sequential payors; Date of service; Service or provider authorization; Covered diagnosis; Fee schedules; etc.  Examples of Requirements Include: Reimbursement by case rate, fee for service, capitation, fixed fee payments; etc.  Examples of Adjudication Process Include: Printing of hardcopy Explanation of Balance (EOB) information when appropriate; User-defined letters to issue to health claim providers; etc.	E	E	E	P	E	E	E	NA	3	NA	E	NA	E	E	E	P	E	E	C	E	E	E	E
F-41	41.003	The system shall be able to adjudicate health claims to a per claim line basis.	Implies automated and manual adjudication capability.	E	E	E	C	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	C	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal	
F-41	41.005	The system shall transmit HIPAA-compliant transactions in response to receipt of incoming HIPAA-compliant transactions.	Examples of HIPAA-compliant transactions include: ASC X12N 835 - Healthcare Payment and Remittance Advices	E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	E	3
F-41	41.006	The system shall be able to forward External Provider ASC X12N 837 Health Claims to claim payors.	Examples of claim payors include: Short-Doyle Medi-Cal, Medicare, Insurance, and other providers (such as other Counties).	E	P	M	P	E	E	E	NA	3	NA	E	E	E	E	E	P	E	E	E	E	E	E	E	E
F-41	41.007	The system shall be able to pend claims for review and subsequent approval or denial.		E	E	NA	P	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	E	E
F-41	41.008	The system shall be able to integrate with an accounts payable system that supports EHR related claiming.		E	E	NA	E	E	E	E	NA	E	NA	E	C	E	E	E	E	E	E	E	C	E	E	E	C
F-41	41.01	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print Accounts Payable (A/P) claim payments, denials, and adjustment transactions.	Examples of Adjustments Include: Claim A/P entries that are to be reversed; Credit balances cleared; etc.  Implies that adjustments shall also be included in related Remittance Advices.	E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	C	E	E	E	E	E
F-41	41.011	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print A/P audit trail transactions.	Implies ability of an audit trail for all A/P transactions; integration with Audit Trail business rules.	E	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	C	E	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platon Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-41	41.012	The system shall be able to input, modify, inactivate, delete, update, copy, and print payment and denial information from providers related to coordination of benefits.		E	E	M	P	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	C	E	E	E	E
F-41	41.014	The system shall be able to limit EHR-related claims by claim payment limits.	Examples of Limits Include: Total contract amount; Fee Schedule Maximums; Contract term; etc.	M	E	NA	NA	M	E	E	NA	3	NA	E	E	E	E	E	P	E	E	C	E	E	E	E
F-41	41.015	The system shall be able to display and print claim information by various criteria.	Examples of Criteria Include: Vendor identification, Payor source, Payment amount, Denial or approved status, Client identification, etc.	E	E	NA	P	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	C	E	E	E	E
F-41	41.016	The system shall be able to generate required Internal Revenue Service (IRS) Form 1099 documents each calendar year end.		P	3	NA	NA	M	3	NA	NA	3	NA	E	NA	3	P	E	P	M	M	C	M	E	E	E
F-41	41.018	The system shall be able to reimburse payors due to A/R adjustments.	Reimbursements may be due to overcharges, overpayments, incorrect service / treatment entry, incorrect software application routines, therapeutic adjustments, etc.	E	P	M	P	E	E	E	NA	3	NA	E	NA	E	E	E	E	E	E	C	P	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Genner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netsmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-42	42.001	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print Accounts Receivable (A/R) transactions information.	<ul style="list-style-type: none"> <li>Examples of A/R transactions input methods include: Electronic ASC X12N 835 - Payment and Remittance Advice data; Hardcopy A/R data; Etc.</li> <li>Example of A/R Transactions Include: Charge, payments, and adjustments.</li> <li>Examples of Transactions Information Include: Payor source; Payment reason; Contractual allowance amount; Sliding-scale discount amount; Incorrect fee adjustment; Therapeutic adjustment (authorized by County Mental Health Director); Bad debt write-offs; Client identification; Account identification; Name of the person who posted the transaction; Posting date; Transaction type; Transaction amount; Updates to account balances; etc.</li> <li>Examples of Adjustments Reasons Include: Service / treatment costs adjustments due to capitated or grant-in-aid funding streams; Medicare adjustments due to "accepting assignment"; Retroactive health plan enrollment (e.g., Medi-Cal, Medicare, and private insurance); client sliding-fee scale liability changes (e.g., UMDAP); etc.</li> <li>Examples of Transaction Processing Include: Automated, manual, real-time, batched, scheduled and adhoc posting; posting that minimizes repetitive keystrokes; Payments posted though there are no related charges; Payments/ Charge matching suspended though payments posted; Running totals that allow verification that individual payment detail postings matches check or remittance advice total; Receipt posting to a specific month of service/treatment, oldest balance or to individual open items; Linking transactions to client accounts and to specific charges/invoices. Posting of multiple client transactions by same payor; Notification of discrepancies in transaction posting, Linking transaction a payment or adjustments category (type); A/R linkage to A/P payments for required payor reimbursement; Adjustments to client account balances (including UMDAP); etc.</li> <li>Input implies integration of A/R data with related EHR system functions.</li> </ul>	E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-42	42.002	The system shall be able to transmit and receive A/R health claims information.	Examples of A/R information include: HIPAA 837 and 997 transactions; "Passing through" claims data to another healthcare services provider; ASC X12N 835 transactions; Other uploads and downloads such as client UMDAP liability; Etc.	E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	E
F-42	42.003	The system shall provide accounts receivable support for cost reporting requirements.	Examples of Accounts Receivable Support Include: Translations to mode of service and service function codes; Unit of service calculations based on minutes; Limitations per Scheduled Maximum Allowance (SMA); Legal Entity & Provider Codes; Revenue classifications such as Healthy Families, AB3632, EPSDT, Medi-Cal, Medicare, Medi-Cal / Medicare, Indigent, etc.  Examples of Required Reporting: DMH EOY Cost Reporting, CSI & OSHPD, MHSA, PATH, and SAMHSA Reporting.	E	P	M	C	E	E	E	NA	3	NA	E	E	E	E	E	P	E	E	C	E	E	E	E
F-42	42.005	The system shall be able resubmit or to correct, then resubmit Health Claims.	This requirement allows rebilling payors for lost claims, etc., as well as void, replacement, correction and resubmission of claims previously denied by the health claim payor.	E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	P	E	E
F-42	42.008	The system shall be able to print paper-based A/R claims information.	Examples of Paper-based A/R Claims Include: HCFA-1500, UB-92 and user-defined formats; ad hoc or scheduled printing.  This includes claims which are forwarded electronically to the County from contract providers for submission to payors and the corresponding forwarding of remittance advices back to the contract providers.	E	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Genier Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netsmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-42	42.009	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print all required A/R business rules.	<ul style="list-style-type: none"> <li>Examples of Areas of A/R Rules Include: Third-Party Payor rules (e.g., Medicare, Medi-Cal, Insurance); Service / treatment authorization; Benefit limits; Deductibles; Co-pays; Service / treatment coverage; Required payment write-offs; Documentation requirements complete prior to billing; Reimbursement methods (e.g., Fee-for-service, case rates, per diem, capitation, and the bundling and unbundling of service / treatment codes by payor); Fee schedule rules (e.g., County Board of Service approved fees; UMDAP fees, CalWorks, Healthy Family, Federally Qualified Health Center (FQHC), and Refugee Population programs fee rules; Multiple payor fee prioritization, fee effective start/stop dates; Fee type (e.g., fees per program, payor, contractual agreements; Ensuring that revenue and A/R balances do not overstate outstanding amounts by reporting balances for multiple payors simultaneously; Sending follow-up reports to staff based on transaction notes information; Most recent assigned client diagnosis becomes the default global client diagnosis used for current A/R purposes; Data validation;</li> <li>Automatic translation of health care provider coding into required accounts receivable related claiming or reporting formats; etc.</li> <li>Implies fee schedules are interfaced with other EHR systems.</li> <li>Examples of Medi-Cal billing Rules Include: Preventing billing for clients that have no known Medi-Cal eligibility during the month of service / treatment, Clients who have not met Medi-Cal Share of Cost liability; Healthcare provider documentation that is incomplete; Duplicate claiming; Clients who reside in an Institute for the Mentally Diseased (IMD), Board and Care costs on a Psychiatric Health Facility, etc.</li> </ul>	E	E	M	NA	E	E	E	NA	3	NA	E	E	E	E	M	M		E		E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platon Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal	
F-42	42.01	The system shall be able to enforce all required A/R business rules.	<p>Implies system has capability for automatic and manual calculation of all client benefit-plan(s) co-pays and deductibles.</p> <p>Examples of payor sources with billing rules include: Medicare, Medi-Cal, Insurance, California State funding programs (E.g., CalWorks, SAMHSA, PATH, MHSA FSP, AB3632/26.5 and MIOCR funding sources; California Specific AB3632 (where payments are limited to those service / treatments authorized in a youth's Individualized Education Program (IEP) authorization);</p> <p>Examples of required billing rules may be found in a variety of sources such as: CA DMH Information Notices; CA DMH Letters; CA DMH HIPAA 837 Companion Guide; CA DMH CSI manuals; Federal OMB Circulars; and Federal Medicare Guidelines.</p>	E	E	M	C	E	E	E	NA	3	NA	E	NA	E	E	M	P		E		E	E	E	E	E
F-42	42.02	The system shall be able to display and print payor billing invoices.	<p>Examples of Client Billing Invoice Content Include: Appropriate UMDAP-related fees; Medi-Cal Share-of-Cost charges; One bill has charges for all service / treatments provided within the billing invoice date range.</p> <p>Invoice printing may be ad hoc and scheduled.</p>	E	E	M	NA	E	E	E	NA	3	NA	E	E	P	E	E	P		M		E	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

**Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-42	42.027	The system shall support client liability collection processes.	Implies automated and manual collections support processes.  Examples of Collection Support Include: Documentation of attempts at obtaining client outstanding liability and support for adherence to provider A/R debt transfer protocols; Support for related tickler systems; Transfer of client account to collections; Reporting on A/R related contract dates, collections notes, and grouping of payors for collections purposes.	E	E	M	P	M	E	E	NA	3	NA	E	E	E	P	E	E		M		E	E	E	E
F-42	42.029	The system shall be able to display and print billing statements.	Implies adhoc and scheduled billing statements,Creation of user-defined billing statement formats.	E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	E	E		E		E	E	E	E
F-42	42.03	The system shall be able to prevent printing of client billing statements and client invoices, and note the reason.	Implies client bills will have all applicable charges, payments and adjustments.  Examples of Reasons to Prevent Billing Are: Management billing overrides; AB3632 eligibility; Clients who have Medi-Cal coverage shall not receive statements; Entire client billing processes suspended; Awaiting a response from a third-party payor; Research on client accounts underway, etc.	E	M	E	E	E	E	E	NA	3	NA	E	E	M	E	E	E		M		E	E	E	E
F-42	42.031	The system shall be able to redirect client billing statements.	Examples are: Redirection of client statement to the client/guarantor, the client's conservator, or both.	E	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	M		E		E	E	E	E
F-42	42.032	The system shall be able to place messages in client billing statements.	Examples are: Culturally appropriate billing warnings, payment thank-you messages, and healthcare service provider messages.	E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	E	E		M		E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-42	42.034	The system shall be able to display and print an audit trail of client billing invoices and statements.		E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	E	E		E	E	E	E	E	E
F-42	42.038	The system shall support estimated costing of all provider service / treatments rendered (direct and indirect service / treatments).	The estimated cost of a direct service / treatment for a client is typically determined as stated in Standard fee setting requirement above. Estimated cost of either direct or indirect service / treatment is intended to assist the provider in managing or reporting on estimated year end service / treatment or program costs. Usage of this capability will be provider specific.	E	3	M	NA	E	E	E	NA	3	NA	E	E	E	E	E	E		M		C	E	E	P
F-42	42.039	The system shall be able to compare service / treatment fees to the related Statewide Maximum Allowance (SMA) set by the CA DMH.	The SMA is a SD/MC rate cap which is updated annually by CA DMH.	E	3	M	E	E	E	E	NA	3	NA	E	NA	E	P	E	P		M		C	E	E	P
F-42	42.044	The system shall be able to issue sequentially numbered payment receipts.		E	E	M	P	M	E	E	NA	3	NA	E	E	E	E	E	E		M		E	M	E	E
F-42	42.048	The system shall support controls for reconciling A/R postings.	Examples of Support Include: Ad hoc or scheduled printing of receipts information regarding Posting staff, service / treatment, provider organization, date range, site, service / treatment charges, total deposit amount, bank and check numbers, etc.	E	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	E		M		E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	Mckesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-42	42.051	The system shall support that outstanding charges remain as an open receivable until paid or adjusted.		E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	E
F-42	42.052	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print A/R audit trail transactions.	Implies ability of an audit trail for all A/R transactions; integration with Audit Trail business rules.	E	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	P	E	E
F-42	42.055	The system shall display and report Aged A/R data.	Examples of Reporting Include: Ad hoc and scheduled displays or reports; reports of claims paid, claims denied, claims in suspense, claims re-billed; Detailed aged accounts receivables by user-defined sorts and subtotal criteria including payor, provider, client, program, location; Reporting by selected date ranges, etc.	E	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Gerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netsmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-42	42.057	The system shall be able to display and report A/R transaction history information.	<ul style="list-style-type: none"> <li>Examples of Account Transaction History Include: Charges, Payments, Guarantor information, Account status codes, Account balances, Assignment acceptance, Effective Start/Stop Dates, Transaction adjustments, Provider and support staff notes attached to A/R transactions, etc.</li> <li>Displays and reports may be configured for accrual versus cash basis, selected payors and date ranges.</li> <li>Examples of Displays and Reports Management Include: Filtering to show the same information for a single payor (including client responsibility), A/R status displays on various system screens such as those for client registration or scheduling.</li> <li>Examples of Reports Include: Revenue analysis reports by provider, service / treatment type, funding source, program, etc; Claim status reports; Insurance or Provider comparison reports; Credit Balance Reports; Bad debt reconciliation reports; Client refund reports; Outstanding Balance reports summarizing inactiivty; Overdue payment report; Payor Denial reports, Non-Sufficient Fund payment reports; Capitated Funded Clients listing; and Daily transaction log report.</li> <li>Daily transaction logs may be organized by patient name in alphabetical order or by account number, and include: Date of service/treatment, posting date, provider's name, transaction description, transaction type, and transaction amount.</li> </ul>	E	E	E	P	E	E	E	NA	3	NA	E	E	E	E	M	E		E		E	P	E	E
F-42	42.058	The system shall be able to attach notes to A/R transactions.	Examples of A/R notes include: Notes regarding collection calls to clients; Client verbal consents regarding account payments; Follow-up notes to provider staff; etc.	E	E	E	E	E	E	E	NA	3	NA	E	E	E	P	E	E		E		E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	Mckesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-42	42.089	The system shall be able to provide A/R notifications and messages to users.	Examples of A/R Notifications and Messages Include: Prompting user with client payor-specific questions, Displaying comments or flags indicating client-related information, Billing information to relate to client during client appointment, etc.	E	E	M	E	E	E	E	NA	3	NA	E	E	E	E	E	E	E	M	E	P	E	E	
F-42	42.099	The system shall support single source billing.		E	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	
F-42	42.102	The system shall support client directed billing rules.	Examples of Support Include: Billing or not billing for AB3632-related children services, Monthly payments on annual UMDAP liability, etc.	E	E	M	C	E	E	E	NA	3	NA	E	E	E	E	E	E	E	M	E	E	E	E	
F-42	42.107	The system shall support compliance with Generally Accepted Accounting Principles (GAAP).		E	E	NA	E	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	
F-42	42.113	The system shall be able to prevent entering non-valid A/R data.	Examples of Prevention Include: Preventing posting A/R data to the wrong open receivable, provider, service, client, etc.	E	E	C	E	E	E	E	NA	3	NA	E	E	E	E	NA	E	E	E	E	E	E	E	
F-42	42.121	The system shall be able to follow mail specifications of the US Postal Service.	Examples of mail specifications include: Printing ZIP+4 and bar coding requirements.	E	M	M	E	M	E	E	NA	3	NA	E	E	E	E	E	E	E	M	E	E	E	E	
F-42	42.124	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print information regarding accounts in collections.		M	E	E	P	E	E	E	NA	3	NA	E	E	E	P	E	E	E	M	E	P	E	E	

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

**Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-42	42.125	The system shall generate collection letters.	Implies ability to create / use collection letter templates.	M	M	E	P	E	E	E	NA	3	NA	E	E	E	P	E	E		E		E	P	E	E
F-42	42.142	The system shall be able to inform A/R staff of client data changes made outside A/R scope of practice but which affect A/R processes.	Examples of Changes Include: Client address changes; Name changes, etc.  System rules may allow automatic updates of A/R system data.	E	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	E		E		E	E	E	E
F-42	42.147	The system shall support double entry accounting.		M	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	C		NA		NA	E	E	E
F-42	42.154	The system shall support general ledger journal entries.	Examples of support include: Detailing revenue, adjustments, payments, bad debts, and refunds by account number (segmented by site and department).	E	E	M	P	E	E	E	NA	3	NA	E	E	E	E	E	E		NA		NA	E	E	E
F-43	43.001	The system shall support accounting for all daily staff work time.	Examples of Staff Time Include: Client-related and nonclient-related activities.	E	E	NA	E	E	E	E	NA	3	NA	E	NA	E	E	E	M		E		E	E	E	E
F-43	43.002	The system shall be able to input, modify , inactivate, delete, update, display, copy, and print critical incidents.	Examples of Critical Incidents Include: Critical incidents occurring in client's life or client care.  Examples of Support Include: Data entry which "triggers" critical incident reporting / messaging according to staff responsibilities.  Examples of Staff Responsibility Areas Include: Clinical, administrative, and financial.	E	E	M	E	E	E	E	NA	3	NA	E	E	E	E	E	P		E		E	P	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal	
F-43	43.004	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print information of a personal task list.	Examples of Information in a Personal Task List Include: Client appointments for the day; Staff meetings; QI reminders on record problems; Automated alerts (i.e., time to renew a service/Care Plan).  The personal task list may be interfaced with third-party products.  See 43.009, 43.010, and 43.012.	E	E	NA	NA	E	E	E	NA	3	NA	E	E	M	E	E	C		E		E	E	E	E	E
F-43	43.005	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print documentation related to local policies and procedures.	Implies documentation may be accessed by standard office word processing software (E.g., Microsoft Word).	M	E	NA	E	E	E	E	NA	3	NA	E	E	E	E	E	C		E		E	E	E	E	

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	Mckesson	Netsmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-43	43.006	The system shall support efficient and user-friendly workflows.	<ul style="list-style-type: none"> <li>Efficient implies reducing staff time to complete system operation. User-friendly implies high user-acceptance of system interfaces and information displays.</li> <li>User-Acceptance May Include: Easy ability to navigate screens; add data record fields; interface to third-party software products (e.g., Microsoft Excel &amp; Word); ability to have automatic updates of reference information (done through internal or external software linkages); ability to create / configure data displays, entry forms and system data linkages; etc.</li> <li>Examples of System Function Data Linkages Include: Scheduler may cause message routing, Assessments may engage access to Best Practice guidelines, Attempts to access data may cause messages to providers, Treatment data may be seen in Episode data screens.</li> <li>Displays and printing may be ad hoc or automated per business rules (unless otherwise stated).</li> <li>Example Workflow Areas Include: Quality management functions; Client, customer or provider satisfaction surveys; Complaint and compliment forms, Referral functions; and user-definable screen configurations or data fields, etc.</li> </ul>	E	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	E	E	E	E	E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	Mckesson	Netsmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNICare Sys	Universal
F-43	43.009	The system shall be able to input, modify, inactivate, delete, update, display, copy, and print all required Workflow Business Rules.	<ul style="list-style-type: none"> <li>Examples of Business Rules Support Include: Workflows that are controlled or "guided" ("guided" implies user choice) by system implemented business rules.</li> <li>Example Business Rules Areas Include: Documents creation or manipulation; Following standard procedures related to critical incidents and staff advisories; Client pre-registration or registration; Client screening and admission; Client discharges; Client referrals; Client billing; Handling of client Medi-Cal Share of Cost; Client call logging; Referrals; Message, notification, alert, or document routing protocols; Signature acquisition protocols; Decision support; Diagnostic support; Workflow control; Access privilege; Data manipulation (e.g., creation, modification, deletion, inactivation, obsolescence, transfer, etc.); Audit trail management; Work assignments; Task lists; Human resources; Work prioritization; Work re-direction; Work reassignment; Client instructions linked to specific conditions (e.g., diagnosis, client preferences, etc.); "Escalation" of alerts, notifications, reminders, and tasks; etc.</li> <li>Examples of "Escalation" include forwarding information to supervisors/managers display highlights, and increasing frequency of information display, etc.</li> <li>See 42.009 and 42.010</li> </ul>	E	E	NA	NA	E	P	E	NA	NA	NA	E	E	E	M	E	C		C		E	E	E	E
F-43	43.01	The system shall be able to enforce all Workflow Business Rules.		E	E	NA	E	E	E	E	NA	3	NA	E	NA	E	M	E	E		C		E	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	NetSMART NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-43	43.012	The system shall be able to input, modify, inactivate, delete, update, display, print, and route messages, alerts, notifications, and documents to system users, providers and clients.	Examples of Information in Messages, Alerts, Notifications and Documents Include: Information, action, etc., are due or overdue, due dates; service / treatment authorizations; Incomplete client assessments, service/Care Plans, progress notes, or discharge summaries; Missing signatures; Loss of Third-Party Payor eligibility; Client advisories; Tasks information detail, Follow-up letters; Health information request; Etc;  Alert configurations may include length of advance timing and who should be alerted.  Examples of Support Include: Automated or manually created e-mails, text displaying in pop-ups, links to documents, Ad hoc and scheduled messages; Adherence to Best Practice standards; etc.	E	E	M	E	E	E	E	NA	P	NA	E	E	E	E	E	E	E	E	E	E	P	E	E
F-43	43.018	The system shall support client referrals.	Examples of support include: Referrals to Business Associates by HIPAA ASC X12N 278 - Referral Certification and Authorization format; Client referrals to other providers in same organization; Client referrals to other staff supporting client care, Client referrals to other county departments, etc.	E	P	NA	NA	E	E	E	NA	P	NA	E	P	E	E	E	E	E	E	E	E	M	E	E
F-43	43.021	The system shall support accessing community resource databases.	Examples of Support Include: Uploading or manual entry of community resources information into a searchable database that can be filtered based on user criteria; Integrating with or keeping community resource information separate from other organizational provider directories; etc.	C	M	NA	E	E	E	E	NA	P	NA	E	E	E	E	E	C		M	C	M	E	E	

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
P = Planned;  
M = with Modification;  
C = Custom;  
3 = 3rd Party;  
NA = Not Addressed;  
<blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	McKesson	Netsmart NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platon Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-43	43.023	The system shall support moving clients from a Wait List to service / treatment.	Example of Support Includes: Tracking and sorting prospective clients by priority to assist in moving individual into service / treatment; etc.	E	E	E	E	E	E	E	NA	3	NA	E	E	E	E	E	P		M		C	P	E	E
F-43	43.025	The system shall support a Grievance and Complaints system.		C	E	NA	NA	E	E	E	NA	NA	NA	E	NA	E	E	E	M		E		E	E	E	P
F-43	43.026	The system shall support client admission and discharge.	Examples of Support Include: User-defined online admission/discharge forms; Episodic discharge due to automated driven reviews of client inactivity; Coordination of system function for client admissions and discharges occurring on same day; etc.	E	E	M	E	E	E	M	NA	NA	NA	E	NA	E	E	E	P		E		C	E	E	E
F-43	43.027	The system shall support transfers of client information.	Examples of Support Include: Real-Time and Batched information transfer; Transfers of data internal to EHR system; Transfer of data between Business Associates; Transfers that are HIPAA compliant; Culturally-appropriate information transfers; etc.	M	E	E	E	E	E	E	NA	3	NA	E	C	E	E	E	M		E		E	M	E	E
F-43	43.028	The system shall ensure that workflows are compliant with federal, state, and local laws, rules, and regulations.		E	E	M	E	E	E	E		3	NA	E	NA	E	E	NA	E		E		NA	E	E	E

**A Comparison of Detailed Vendor Responses to the  
Department of Mental Health CA BH-EHR Functional Requirements Survey**

## **Practice Management – 162 Requirements:**

*Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.*

E = Existing;  
 P = Planned;  
 M = with Modification;  
 C = Custom;  
 3 = 3rd Party;  
 NA = Not Addressed;  
 <blank> = No Response

Req. Ctg.	Req. Nbr.	Requirements Description	DMH Comments	Anasazi Software	Askesis Dev Group	Benchmark Sys	Cerner Corp	Defran Sys	Duke BH Informatics	Eclipsys Practice Solutions	eWebHealth	ICANotes	InterComponentWare	Libera	Mckesson	NetSMART NY	NextStep	Noteworthy Medical Sys	OCHIN	Orion Health	PCE Systems	Platton Technologies	Raintree Sys	The Echo Group	UNI/Care Sys	Universal
F-43	43.031	The system shall support 24-hour client care.	Examples of Support Include: Creation, modification, deletion, and review of client related data; Tracking of clients by unit, room and bed, and midnight bed checks; Using the information to generate daily room charges; Monitoring facility capacity and documents bed availability; Tracking of dietary requirements for each 24-hour patient by unit, room, and, bed; Dietary orders for the kitchen based on the dietary orders; Monitoring of client valuables placed in 24 hour care; etc.	E	E	NA	E	E	E	E	NA	3	NA	E	NA	E	E	E	P		M		C	E	E	E
F-43	43.035	The system shall support single sign-on software products.	Implies maintaining internal security controls.	M	E	M	E	E	E	E	P	NA	NA	E	NA	E	E	E	E		E		C	E	E	E
F-43	43.037	The system shall be able to auto-populate data fields with client demographics.	May include user definition of which data will be auto-populated.	E	E	M	E	E	E	E	NA	NA	NA	E	E	E	E	E	E		E		E	E	E	E