Lytec 2010 Enhancements

Product Bulletin

The Lytec® 2010 practice management system from McKesson offers significant enhancements over previous versions of Lytec that will drastically improve the user's experience and office productivity.

Performance Enhancements

Lytec 2010 features improvements to system logic and processes in 52 areas of the application to decrease the time the application takes to complete key tasks. The entire application is up to 40% faster, which enables office staff to complete more tasks faster. Users will experience the faster application when performing tasks such as:

- searching lists
- using the Appointment Scheduler
- generating claims and statements
- launching the application
- logging into a practice
- loading practice data

One side-by-side comparison of the Appointment Scheduler found that if a practice were to schedule 60 appointments per day, the person scheduling the appointments could save 1.5 hours per week. That time could be devoted to other patient care-related and revenue-generating tasks such as appointment reminders or reaching out to patients for health maintenance.

New User Interface with Ribbon Technology

Ribbons streamline typical user actions by combining a command bar and a tab bar. The combination of commands and tabs are intuitive and improve productivity for office staff by making it easer for a user to find what he or she is looking for.

In addition, the new user interface will make training new staff on Lytec 2010 much easier than in the past. Beta testers reported that they were able to be productive users of Lytec 2010 in just two to three days, vs. more than one month with previous versions of Lytec.

The Lytec 2010 user interface has been completely redesigned using ribbons, which were introduced with the Microsoft® Office 2007 user interface.

Improved Claim Generation with Flexible Grids

The structure used to generate ANSI 4010-compliant electronic claims has been overhauled to replace personal identification numbers (PINs) with customizable, rules-based grids. With Lytec 2010, practices can set up Practice, Provider, Referring Physician and Facility ID grids to meet the practices' needs to successfully file claims. The flexibility in the new grid system enables practices to enter limitless scenarios for any combination of insurance companies, insurance categories, facilities, referring providers, providers, and the practice to address different carrier filing requirements.

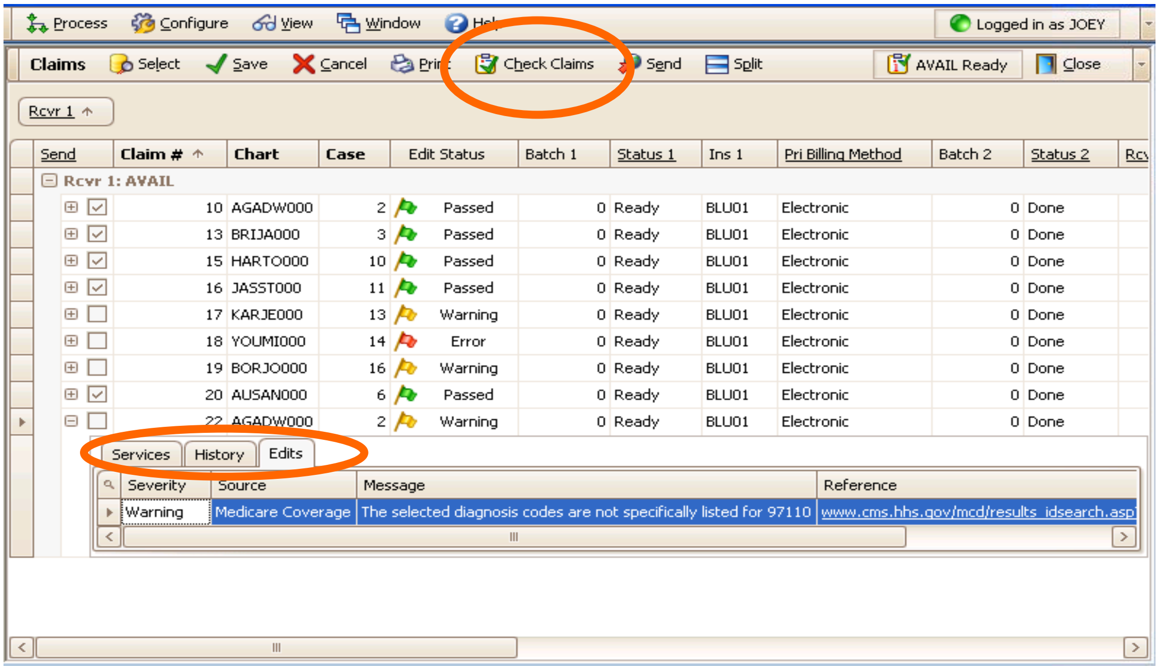
The update to the ANSI claim generation functionality in Lytec 2010 is an important step to prepare for the new ANSI 5010 regulations scheduled to go into effect in January 2012. ANSI 5010 contains hundreds of new data elements that will be required on electronic claims submissions in order for the claims to be paid. By taking an interim step to Lytec 2010, practices can prepare the data structure in the software now to handle the new data elements required for ANSI 5010.

Revenue Management: New Electronic Claims, Eligibility Verification and ERA Processing

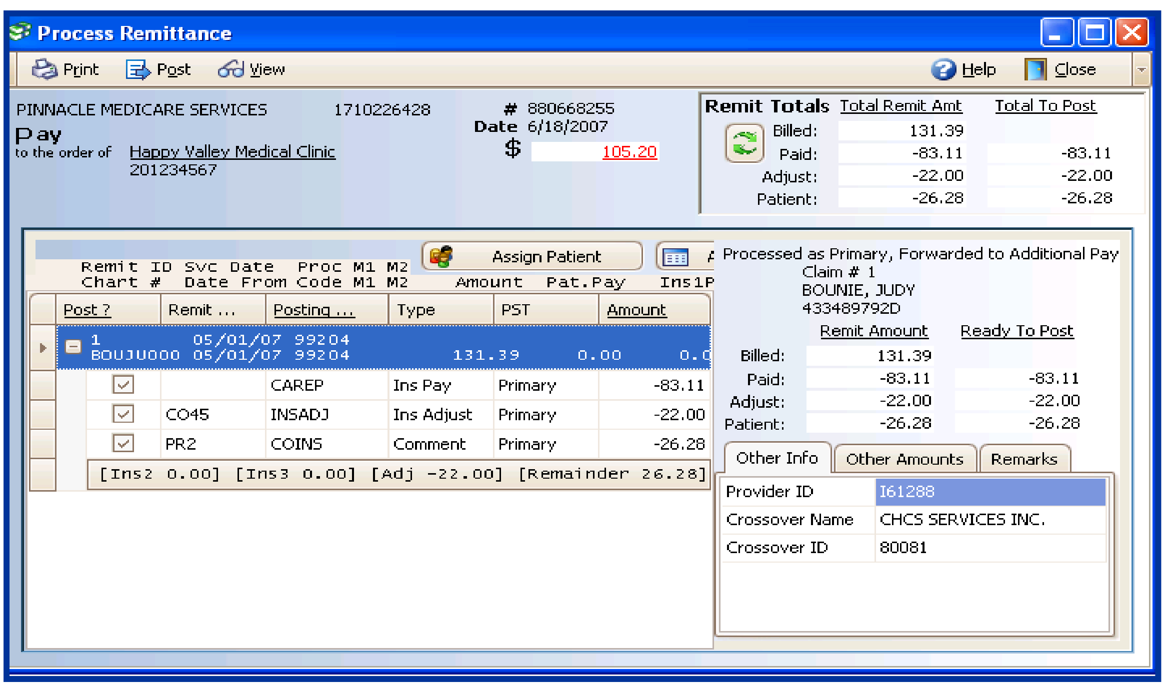
Lytec 2010 offers a new, integrated electronic claims solution called Revenue Management. Revenue Management is a software tool that expands the electronic data interchange (EDI) functionality of Lytec to improve the electronic connections that physician practices make to clearinghouses like RelayHealth as well as direct connections to payors. Revenue Management improves the claims submission, eligibility verification and electronic remittance advice (ERA) posting processes, as well as revenue cycle reporting:

- **Claim submission:**
    - Claims are run against a set of pre-claim edits to check medical policies, CCI edits, CPT and Dx codes, and user rules before the claims are submitted to the payor. Warning flags indicate if there are issues with a claim so that the claim can be corrected before submitting for payment. Fixing claims on the front end reduces the time it takes to pay the claim and can help a practice generate additional revenue by eliminating rejected claims that often aren't researched and resubmitted for payment.
    - Flexible claims processing includes the ability to process professional/1500 claims and institutional/UB claims with intelligent processing for accurate transactions.
    - Comprehensive claim history including claim edits and any reports posted to the claims is easily available with one-click access.
- **Eligibility verification:**
    - Integrated eligibility with complete and accurate eligibility reports enables a practice to verify a patient's eligibility for services.
    - New eligibility data entry and processing logic in Lytec 2010 allows practices to define when the system checks for updates to payor IDs.
- **Electronic remittance advice (ERA) posting:**
    - The ERA functionality in Lytec has been significantly upgraded with Revenue Management. Previously Lytec required that an entire 835 remittance file be posted all at once. If there were errors, the biller had to go back into the system, find the errors and fix them one at a time. It was a tedious process. Now with Lytec 2010, remittance details are displayed in an intuitive window that allows the biller to review the payment information before posting, make changes if necessary, and post (or not post) each individual payment and adjustment.
    - After posting is complete, a report is generated to show exactly what was entered into the system. The new ERA posting process greatly improves the productivity of a practice's billing staff.

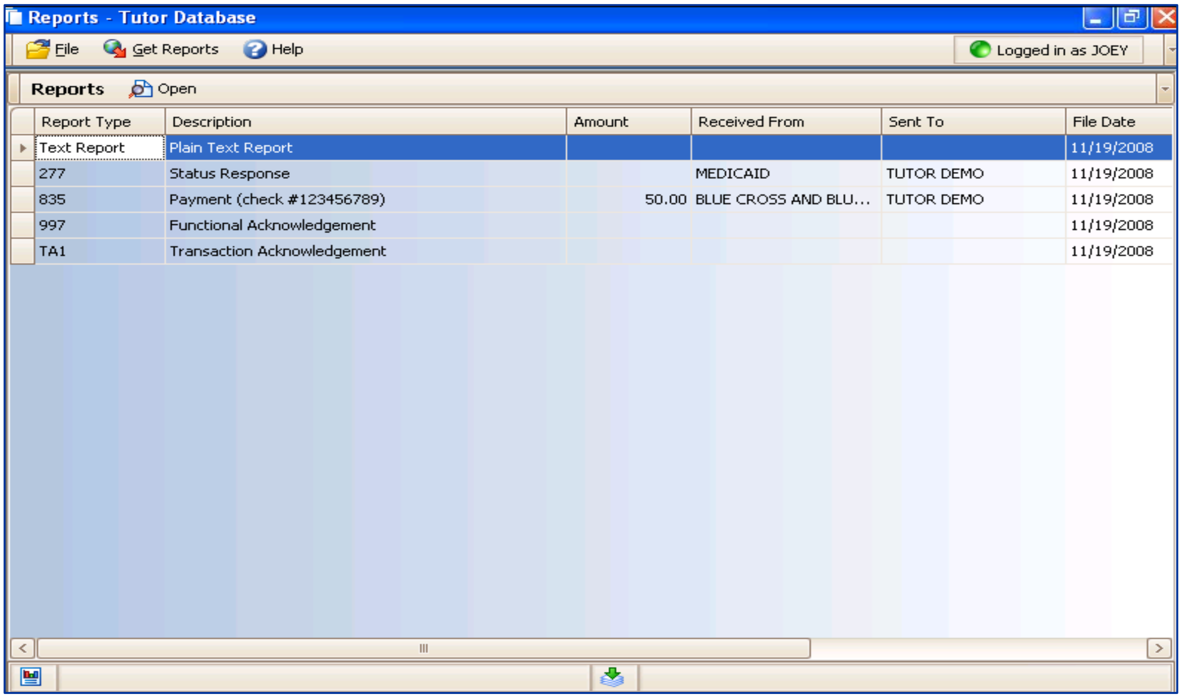
Revenue Management Screens



When a biller clicks the Print/Send button in Lytec, the Revenue Management Claims screen opens. The biller is able to check the claims against pre-claim edits. Color-coded flags indicate whether a claim has passed the edits, has an error or has a warning message. The biller then chooses a patient on the screen to drill down and view the warning message and all actions taken on the claim including services, history and edits before the claims are submitted for payment.



The ERA processing screen enables billers to view payments in an intuitive user interface. Billers make modifications to adjustments and payments before posting to avoid the need to correct payments in the practice management system after posting. ERAs can be posted at the claim level or line level.



The powerful Reports engine interprets ANSI reports, text reports and any reports posted to the claims. All reports are presented in a single window that is easy to navigate. The 835 transaction includes the check number and payment amount on the window. The Revenue Management Advanced option consolidates the number of RelayHealth reports and offers a more efficient method for managing claims outcomes.

Other Lytec 2010 Enhancements

- More than 50 software defects have been corrected in Lytec 2010.
- The new user interface can be customized using a new interface skinning feature. This allows the user to apply one of 12 “skins” to customize the appearance of the application background, windows, title bars, buttons, labels and more.
- Lytec 2010 includes a new Refresh button in the Appointment grid that enables users in a multi-user environment to quickly refresh the screen before scheduling an appointment.
- Lytce 2010 is now installed from a single DVD (or a single .iso file if being installed by a Value Added Reseller). The DVD install drastically cuts the time and complexity required to install the software.
- Lytec 2010 now supports Windows 2008 Server (Standard) in either 32-bit or 64-bit for the server component of Lytec 2010 Client Server.
- An enhancement to the security features of Lytec 2010 locks the application such that a user cannot close, minimize, maximize or restore the application without logging back into the application. This method helps protect data integrity.

To learn more about Lytec 2010 and your upgrade path, please contact your Value Added Reseller or call McKesson direct at 1-800-333-4747, Option 1.

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