

DENTRIX ASCEND

Release Notes: May 19, 2020 (Prod 355)

The product update released May 19, 2020, introduces the ability to color appointments in the schedule according to appointment type. An enhancement to patient communications allows you to see incoming text message responses. With this update, you may edit and resubmit insurance claims without deleting the claim and starting over. The Imaging module now has an offline mode that allows you to capture x-rays in Ascend even if your Internet goes down.

Scheduling

Appointment Colors Based on Procedure

Up to this point, appointment colors in the Calendar were solely a reflection of the colors assigned to the appointment provider. With this update, you may choose a different schema: colors assigned by appointment type. You may use provider and appointment type colors in combination, and specify which view is dominant.

Since dental offices often feel pressed for time, we want to make appointment information immediately accessible for you the moment that you need it. Applying colors to procedures can provide you and your office with the information you need “at a glance.” Coloring appointments by procedure type allows assistants, doctors, and office staff to know what kind of procedures are coming up in each operatory.

To customize your appointment colors, open the Appointment Colors page (**Settings > Appointment Colors**).

Appointment Colors

Appointment Slot Layout & Colors

Information. On this page you can specify appointment colors that are used in the Calendar. Appointment colors can be based on a combination of appointment provider, additional provider, and/or the types of procedures (highest priority of which will determine appointment color). Up to 30 categories are allowed.

Select color layout

Legend

- Provider color
- Additional provider color
- Procedure color

Search for procedure

PRI	ADA Code	Description	Office Code	Treatment Area	Color
1		High Production (48)			
2		Restorative (83)			
3		Recare (113)			
4		Unassigned (540)			

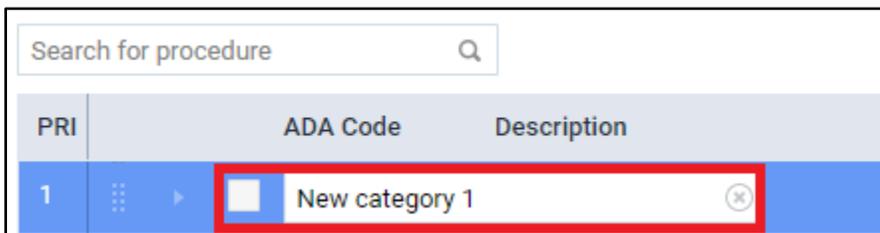
The first thing to do is to select a layout. There are several options available to you. The **Select color layout** legend demonstrates the possible variations. Select a radio button to choose the option that best fits your office needs.



Next, you must define procedure categories. A category is a group of procedures that share an appointment type color. You might choose to label them as Restorative, Preventative, and Recare. Or you might want a different method of categorizing your procedure types. Select **New Category** to add a category for procedures. You can add up to 30 categories.



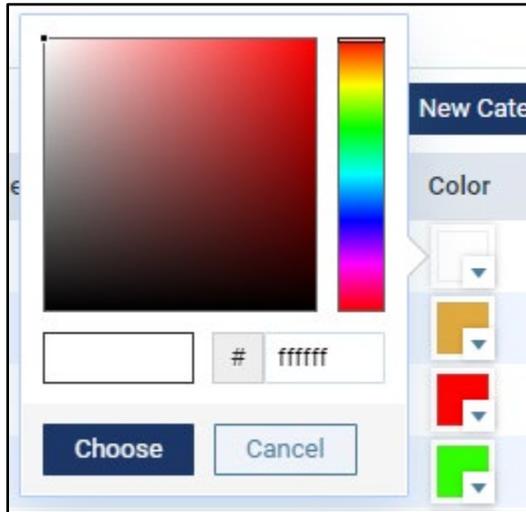
In the **New Category** step, enter the name of your category.



Select the color box to assign a color to this category of procedure.



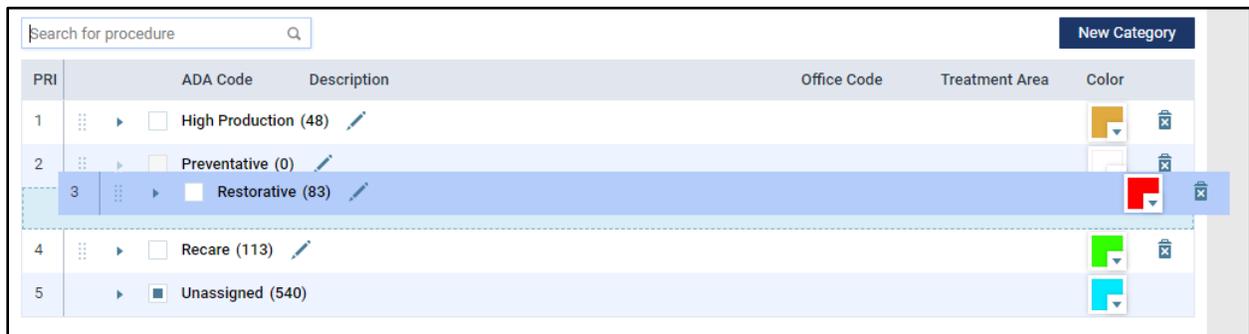
Choose a unique color for this category, either by clicking in the swatch area or by typing a hexadecimal value.



You can rearrange the order of your categories to prioritize the procedure types. Category priority answers the question: if the same appointment has both a restorative procedure and a preventative procedure, which color should the appointment display? To set the priority, click the **Drag and Drop** icon next to the procedure you want to move.



Move the category to the priority level of your choice. Note that the **Unassigned** category is always the lowest priority and cannot be renamed or deleted.



The last step is to add procedures to each category. Search for procedures using the **Search for procedure** bar. Search by code or name. Selections appear as you continue to type.



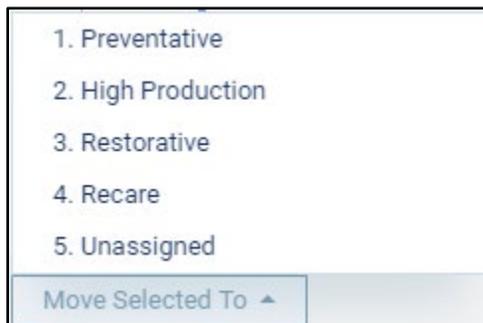
Or you can search the **Unassigned** category to choose procedures. To do so, select the **down arrow** next to the category labeled **Unassigned**.



Select the procedures you want to move to your new category.

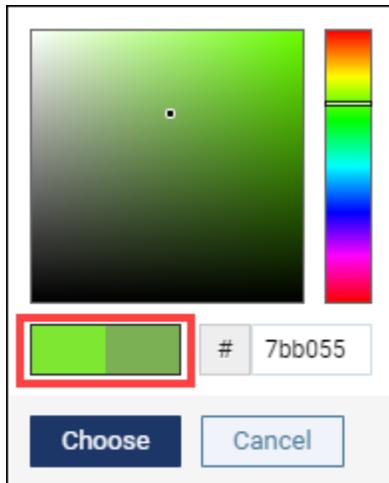
PRI	ADA Code	Description	ADA Code	Location	Color	
5		Unassigned (540)			Blue	
	<input checked="" type="checkbox"/>	Attachment	Attachment placement	Attachment	Mouth	Blue
	<input type="checkbox"/>	BiteAdj	Bite Adjustment	BiteAdj	Mouth	Blue
	<input type="checkbox"/>	CADCAM	CAD/CAM intraoral scan	CAD/CAM	Mouth	Blue
	<input checked="" type="checkbox"/>	D3110	Direct Pulp Cap	PlpCpDr	Tooth	Blue
	<input checked="" type="checkbox"/>	D3120	Indirect Pulp Cap	PlpCplndr	Tooth	Blue
	<input checked="" type="checkbox"/>	D3220	Therapeutic Pulpotomy	pulpect	Tooth	Blue
	<input type="checkbox"/>	D3221	Pulpal Debridement	GrPulDbrd	Tooth	Blue

Next, click **Move Selected To** at the bottom of the page, and select the category where you would like to add the procedures.

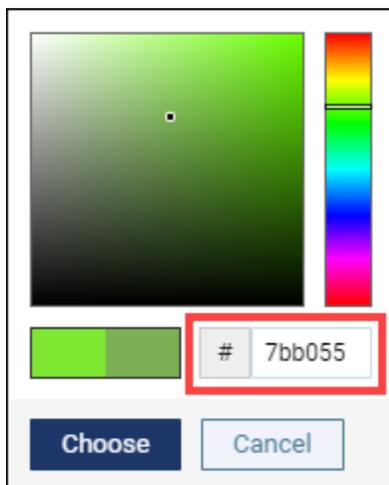


Tip: If you choose to group procedures by treatment categories, you can for example search “D0” to list all procedures D0100 – D0999 and do a select all to speed up sending a range of procedures to a category. You can move individual codes later.

Visit the Calendar to see the effect of your changes. Appointment color settings are location-specific. After seeing your color selections on the schedule, you may decide to make some changes. Just go back into the Appointment Colors page and click a color box to make a change. When you edit a category color, a color preview bar above the **Choose** button shows you both the current color and your new color. Click **Choose** to confirm the change, or **Cancel** to keep your current color.



Tip: You see a hexadecimal number next to your color selection. This is an HTML color code. If you know a precise value for your color, you can type that code into the box. For help picking complementary colors, visit a site like HTML Color Codes for ideas.

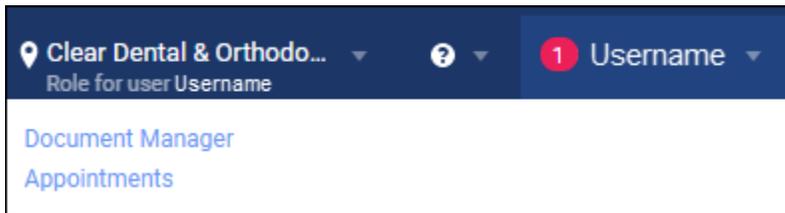


Use of this feature is optional. Coloring appointments by provider continues to be the default. Appointment color configuration is location-specific.

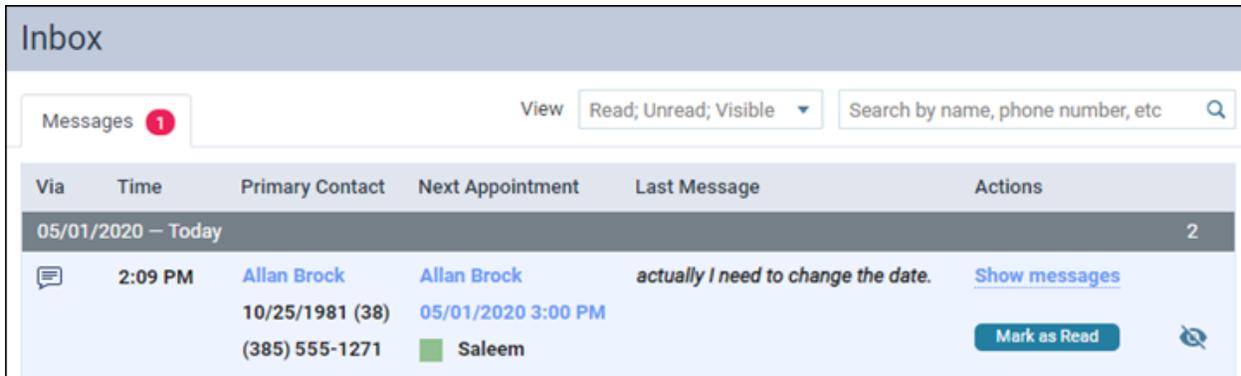
View Text Message Responses

Before this update, if a patient replied to a text appointment reminder with a message like, "Sorry, I can't make it", or "No", or so on, that message was completely lost and Dentrix Ascend had no knowledge or record of it. This new feature allows you to see those replies. You can view all related messages in the context of an appointment and not miss any important responses. Just to be clear, this basic feature does NOT include two-way texting; you can see patient messages but not respond to them from within the platform. Keep in mind also that Dentrix Ascend sends "patient" communications to the primary contact rather than to the patient.

Dentrix Ascend notifies you of messages received by displaying a red dot next to your user name in the blue menu bar. The number in the dot represents the total number of unread messages. Note that this number goes down when *any* team member marks a message as read.



Your user role must have the new **Review inbox messages** right to see this notification. This ensures that only those team members tasked with monitoring patient text responses will see it. As a shortcut, click the notification dot to open the new Inbox page. Alternatively, you can follow **Home > Inbox**.



Unread messages are in ***bold italic*** text. After you have read the message, click **Mark as Read** to indicate you read it. If there is nothing else to do, hide the message from the Inbox by clicking the **Hide** icon. (Clicking **Show messages** to see all the messages in the thread automatically marks the message as Read.)

If you need to respond to the message, the mobile phone number displays along with the message. For more information, the primary contact name is a hyperlink to the Patient Information page, and the next appointment date and time hyperlink opens the appointment panel in the Calendar. You can filter messages using the **View** dropdown and can even look up hidden messages. You can also look for a specific message by typing a patient name or phone number in the search box. (The search finds only those messages that are in the current view.)

You can see a patient's text messages in several areas of the platform. There is a new **Show Messages** button in the appointment detail panel and a new **Show messages** hyperlink in the routing panel.

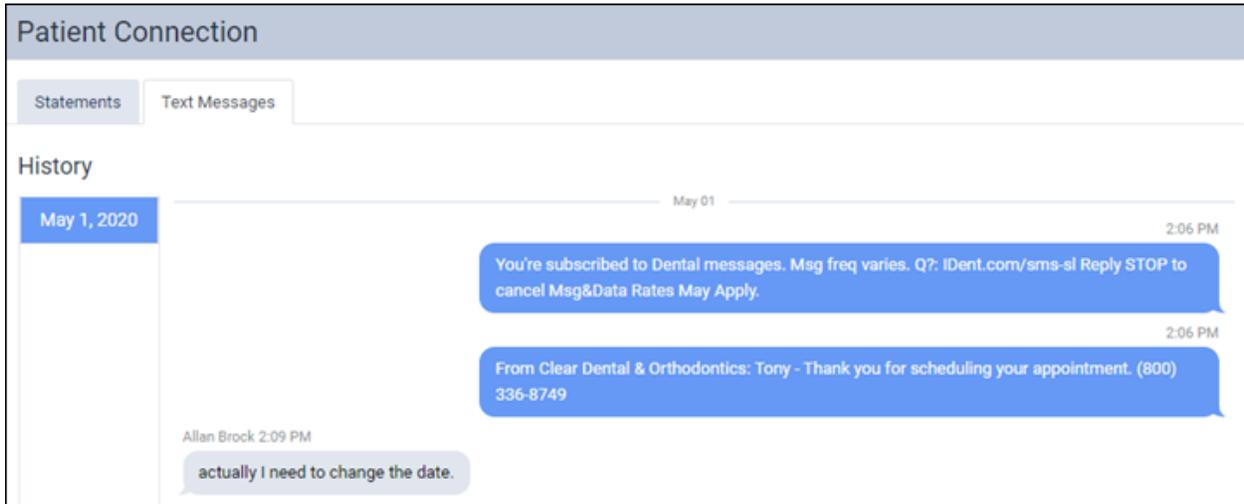
This screenshot shows the patient appointment detail panel for Allan (Tony) Brock, born 10/26/1981 (38 years old). The panel includes tabs for Chart, Ledger, and Tx Planner. Below these are tabs for Appt, Contact Info, Rel. Appts, Med. Alerts, and Lab Case. A 'Status' dropdown is set to 'Unconfirmed' with a 'Schedule' link. A red box highlights the 'Show messages' button. Other buttons include 'Forms (0)'. At the bottom, there are checkboxes for ASAP, Needs Follow-up, Premedicate, and Pinned. Patient preferences for Preferred Days, Preferred Times, and Automated Text Reminders (Yes) are also visible.

This screenshot shows the 'Arriving' routing panel for Allan (Tony) Brock. The appointment is for 4:00 PM on May 1st (Saleem), with a status of 'Unconfirmed'. A red box highlights the 'Show messages' hyperlink. The patient's name, birth date, and insurance (Gold3) are displayed.

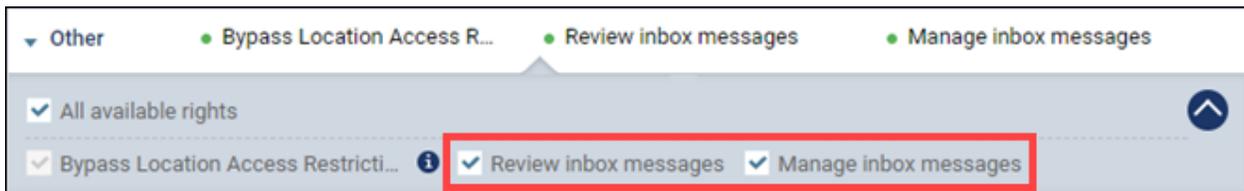
From either link, click to open a pop-up and see the patient's message history. Note that the button or link appear only when a patient has responded to text messaging.

This screenshot shows a pop-up window titled 'Messages for Allan Brock'. It displays a message history for May 01, 2020. The messages are as follows:
- 2:06 PM: 'You're subscribed to Dental messages. Msg freq varies. Q?: IDent.com/sms-sl Reply STOP to cancel Msg&Data Rates May Apply.'
- 2:06 PM: 'From Clear Dental & Orthodontics: Tony - Thank you for scheduling your appointment. (800) 336-8749'
- Allan Brock 2:09 PM: 'actually I need to change the date.'

You can also see patient messages in a new **Text Messages** tab of the **Patient Connection** page.



There are two new user rights associated with this feature. The **Review inbox messages** right allows you see the Inbox page, view the number unread messages in your user menu, see message pop-ups, and mark a message as read or unread. The **Manage inbox messages** right additionally allows you to hide messages. You must have the **Review** right in to have the **Manage** right.



Insurance

Edit and Resubmit Claims

With this update, you can open an unpaid primary or preauthorization claim, make modifications, and resubmit—regardless of its status. There is no need to delete the claim and start over. We hope this makes the claim resubmission process faster and easier. To support this functionality, you will see several changes to the **Claims Detail** window.

The **Procedures** tab has the following new features:

- **Add Procedures** button – click to add unattached procedures to the claim
- **Service Date** check boxes – select procedures to be removed from this claim
- **Remove Selected** button – after selecting procedures, click this button to remove those procedures from the claim. These procedures become “unattached” again and you can assign them to a new or different claim with the same service date. Note that you cannot leave the claim empty; if you need to delete the only procedure on the claim, simply delete the claim (click **Delete Claim**).

Claim Detail - Adele Sherrill (Primary) \$230.00 ✕

Procedures | General | Claim Info | Attachments | Status/Notes

Add Procedure Remove Selected

<input checked="" type="checkbox"/>	Service Date	Th	Surfaces	Code	Description	Provider	Amount
<input checked="" type="checkbox"/>	05/01/2020			D0120	Periodic Evaluation &	SARA	70.00
<input checked="" type="checkbox"/>	05/01/2020			D0210	Intraoral Full Mouth Images"<>"	SARA	160.00

Associated conditions i Claim diagnosis codes (max. 4) Total claim charges **\$230.00**

No associated conditions available ▼ No diagnosed conditions have been added yet.

Save
Resubmit
Split Claim
Print
Cancel
Delete Claim

Pre-posted write-offs automatically update when you change the procedures included or the provider (contracted vs. non-contracted) in the claim.

The enhancement to the **General** tab mainly is notification. If you change either the subscriber or the payer associated with the patient while a claim is outstanding, you have the *option* to update the claim. To support this, the **General** tab has the following new features:

- **Warning Notification symbol** – an orange triangle warns you that insurance information changed
- **Modified field warning** – an orange triangle appears next to the **Subscriber** or **Payer** sections to highlight where the change occurred. An orange outline highlights the specific field. Hover over a triangle to read the explanation.
- **Refresh button** – changes to the subscriber or payer do not automatically update the claim. You must do this manually by clicking the refresh button (looks like a recycle symbol), which pulls in the information and updates the field. The reason for this is that even though the patient subscriber or payer information changed, because of the service date you may not want to change that information in *this* claim.

Claim Detail - Adele Sherrill (Primary) \$160.00

Procedures **General** Claim Info Attachments Status/Notes

Billing Provider

Name: James Rockwell DMD PA
 State ID #: 1234567893
 NPI #: 1234567893
 TIN #: 123456789
 Medicaid ID #: 1234567893
 BCBS #: 1234567893
 Provider #:

Rendering Provider

Name: Sara Najafi
 State ID #: 1234567893
 NPI #: 1234567893
 Medicaid ID #: 1234567893
 BCBS #: 1234567893
 Provider #:

Pay To Address

23659 Columbus Rd, Ste. 1
 The Smile Center of Mansfield
 Neola, UT 84053

Patient

Name: Adele Sherrill
 Relation: SELF
 DOB: 09/13/1977
 Gender: Female

Subscriber

Name: Adele Sherrill
 Sub ID: A8ADF8DFD
 DOB: 09/13/1977
 Gender: Female

Payer

Name: MetLife
 Plan Name: a
 Group ID:
 Type: Commercial Insurance Co.
 Phone: (877) 638-3379

Save Submit Print Cancel Delete Claim

The **General** tab provides for a special condition. If you change the **Billing Provider** or the **Rendering Provider** from a non-contracted to a contracted provider, a new **Create contracted write-off when claim is saved** switcher appears to help you determine whether to create a contracted write-off.

Claim Detail - Jackson Howell (Primary) \$55.00

Procedures **General** Claim Info Attachments Status/Notes

Create contracted write-off when claim is saved No

Billing Provider

Name: James Rockwell (CC)
 State ID #: 1234567893

Rendering Provider

Name: Nicole Richards
 State ID #: 1234567893

Pay To Address

23659 Columbus Rd, Ste. 1

The **Status/Notes** tab has the following new feature:

- The **Original Ref Number** field is renamed to **Payer Claim Reference #**

Claim Detail - Adele Sherrill (Primary) \$230.00

Procedures General Claim Info Attachments Status/Notes Create contracted write-off when claim is saved No

Status EXTRACTED Sent 05/01/2020 Created 05/01/2020

Payer Claim Reference #

Replace Claim Void Claim

Notes Add Note

Date & Time	Source	Note
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Save Resubmit Split Claim Print Cancel Delete Claim

When you finish updating the claim, click **Resubmit**. Note that claim editing is only available during the “open” period, i.e. not closed due to transaction locking rules.

Clinical

Sextant Treatment Area

You can now create or modify procedure codes and assign a sextant as the treatment area.

Treatment area *

Select a treatment area

Select a treatment area

Tooth

Mouth

Surface

Quadrant

Sextant

Root

Arch

If you choose to work with sextants, you can select sextant treatment areas in the Chart, Perio Exam, and Quick Exam tabs, and in the Clinical Notes pop-up menu. The Chart controls whether sextants display in all these pages. To show sextants, in the Chart **View** menu select **Sextant selectors**.

Clear Selected View ▾

Procedures ⓘ

Today's work All

Include related

Show in Progress Notes

All

Existing Completed Tx Plan

Information

Enabling this option will show sextant selector buttons in every graphical representation of a tooth chart throughout Dentrix Ascend.

Sextant selectors ⓘ

Done

Chart Progress Notes Quick Exam Perio Tx Planner Imaging Clinical Notes Chairside dashboard Off

Add Procedure Add Condition Forms (0) Image Peek ? Clear Selected View ▾

UR **UPPER RIGHT** **UPPER ANTERIOR** **UPPER LEFT** UL

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

W

You can add sextants as quick picks in a clinical note template.

Manage Quick-Picks

Quick-Picks

Sextant – Select One Create New

Select sextant Clear selected

UPPER RIGHT **UPPER ANTERIOR** **UPPER LEFT**

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17

LOWER RIGHT **LOWER ANTERIOR** **LOWER LEFT**

The standard sextant area abbreviations are UR, UA, UL, LR, LA, and LL. You will recognize that quadrants also use UR, UL, LR, and LL as abbreviations. Therefore, in Dentrix Ascend these abbreviations now include a superscript “stx” or “q” wherever they appear, for example in progress notes and clinical notes, to help you distinguish between them.

Date ▾	Th ▾	Surface...	Code ▾	Description ▾	Status ▾
04/30/2020	LR ^{stx}		D4261	Osseous Surgery w/ Flap (1-3)	Tx Plan

Usability

Create Claim Alerts

This update adds condition tag-related alerts to the **Create Claim** page and the **Create Claims** tab of the **Patient Walkout** window. Not only will you get a warning at the top of the page when any claim violates the inclusion of more than four condition codes, but the warning also repeats at the specific claim. This will improve visibility of the error condition when you scroll through a lengthy list of claims.

The screenshot shows the 'Create Claims' interface. At the top, there are filters for 'All' and 'Collapse All', and a 'Place of service' dropdown set to 'Office (11)'. A red alert banner states: 'Alert. One or more claims can not be created because of an excessive number of associated conditions.' Below this, two patient records are shown:

- 11, Pat1** (Service date: 01/26/2018):

Th	Surfaces	Code	Description	Provider	Amount
<input checked="" type="checkbox"/>		D0120	Periodic Evaluation	atest1	79.93
- Adams, Barbara** (Service date: 04/21/2020):

Th	Surfaces	Code	Description	Provider	Amount
<input checked="" type="checkbox"/>		D0160	Detailed & Extensive Evaluation	002	35.00

Below the second patient's claim, an 'Associated conditions' section shows a warning: '(Max. 4 conditions for a claim. Remove excess conditions to proceed.)' with five condition codes in buttons: K03.6, K05.21, K06.0, K08.20, and K08.59.

Bulk Insurance Payments

The number of claims you can upload to a bulk insurance payment increased from 500 to 1000 payments. The **Select Claims** step of the wizard now includes a **Search** field that allows you to search for a patient name, subscriber name, insurance plan, or amount billed in the list of claims. You now can sort the claims in that step by any of the columns. The **Summary** step also has sort the capability.

Create New Bulk Insurance Payment ✕

Setup steps: [Payment Information](#) **[Select Claims](#)** [Summary](#)

Information. Selected claims will be stacked on Summary tab page.

Claims Included on the Bulk Payment from **Aetna** (\$1,000.00) 🔍

Patient Name	Date	Subscriber	Insurance Plan	Amount Billed
<input type="checkbox"/> Levin, Alan	01/08/2020	Levin, Alan	AE0953AB7CA6467 (363752A)	135.00

Deposit Slip Report

We reformatted the report column headers slightly to make more sense in context. The **Bank** and **Check #** headers only appear for check payments, and a new header **Reference #** appears for electronic and financing payments.

Deposit Slip Report Print

The Smile Center of Mansfield Period: 05/01/2020-05/01/2020

Insurance Check Payments

Date/Time	Name	Bank	Check #	Amount
05/01/2020	United Concordia	Pinnacle	12121201	77.00
1 item				Total: 77.00
				Subtotal: 77.00

Credit Card Payments

Date/Time	Name	Amount
05/01/2020	Azzmeiah (Azzmeeya) Adams	110.00
1 item		Total: 110.00

Insurance Electronic Payments

Date/Time	Name	Reference #	Amount
05/01/2020	Guardian Life Insurance Co. of America	E007EB669886	96.00
1 item			Total: 96.00

Quick Exam

When you select a condition, existing work, or treatment plan in the Quick Exam, a quick animation and an emphasis of the column title will help you see that Dentrix Ascend recognized your selection and added it. Previously, you may have felt some uncertainty and clicked multiple times to make sure.

Provider View

This enhancement is for you who prefer to work in the Calendar using the provider view. As a continuation of the feature introduced in the last update that made a provider name a hyperlink to make that provider unavailable for a day, the Calendar **View** menu now has a new switcher available

when the view is by provider. Toggle the **Show only working providers** switcher to On to hide any providers who have no working hours on the Calendar date(s) in view.

Columns by
 Operatory Provider

View mode by
 Day Week

Time block size
 Large Medium Small

Show only business days Off

Show missed appointments On

Show template time slots On

Warn when double-booking Off

Hide patient names Off

Show only working providers On

Show all providers

<input checked="" type="checkbox"/>	DDS2 Hanna, Raouf	
<input checked="" type="checkbox"/>	Saleem Baba, Saleem	

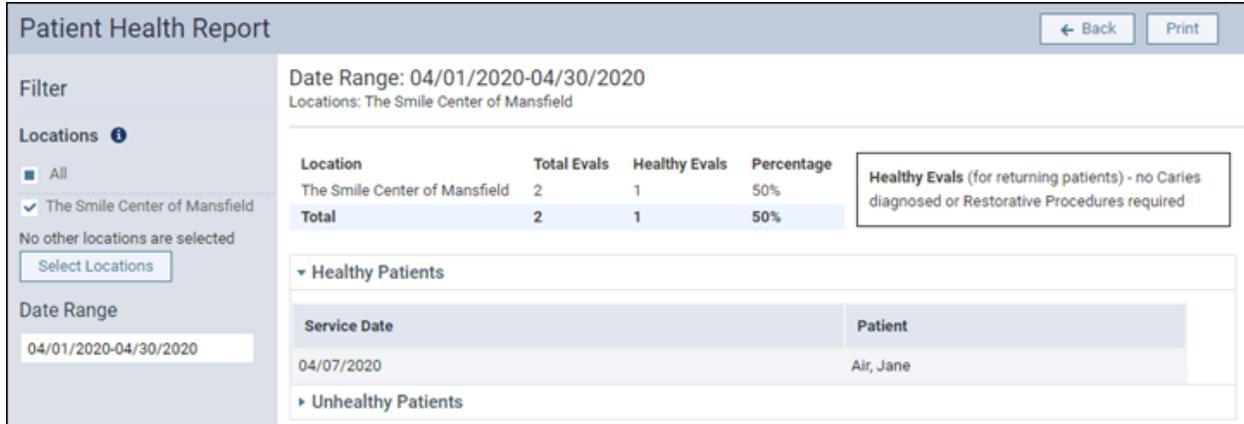
Done

Power Reporting

The Patient Health Report—introduced in the last update—received several enhancements. First, the Insights dashboard glimpse now includes evaluation counts.



The report breaks out healthy and unhealthy patient exam numbers and lists the patients seen. You can view and print either list. We also added an explanation of what constitutes a “healthy” evaluation.



User Rights

The following changes to user rights are included in this release:

- A new **Review inbox messages** right allows you to see the Inbox page, view the number unread messages in your user menu, view message threads (a group of related messages), and mark the message status as read or unread.
- A new **Manage inbox messages** right allows you to hide a specific message or entire thread. You must have the Review right to have the Manage right.

Select Patient

Offline Mode

Information: Please be aware that you are about to acquire images in offline mode. All images that are acquired in this mode will be synchronized and have their corresponding procedures posted in your online database as soon as the internet connection is restored.

To continue in offline mode enter the first name, last name, and date of birth for the patient whose image(s) you will be acquiring, then click the Acquire Images button.

First name * Last name * Birthdate *

Enter first name Enter last name mm/dd/yyyy

Adult dentition

Pediatric dentition

Once the Imaging module opens, run it as you normally would, with the exception that favorites and custom templates will not be available, because they are stored on the cloud. The images go to a temporary location in your device's local hard drive. Don't worry about locating them; they leave when you synchronize and send them up to the cloud.

When you are once again on the Internet and able to access Dentrix Ascend, again close your browser and then turn off Offline Mode (you cannot synchronize patients to the online database when offline mode is open). The next time you open the Imaging module it will start prompting you to synchronize. You can click **Remind Me Later** to continue working at this time (for example if you have a patient in the chair right now).

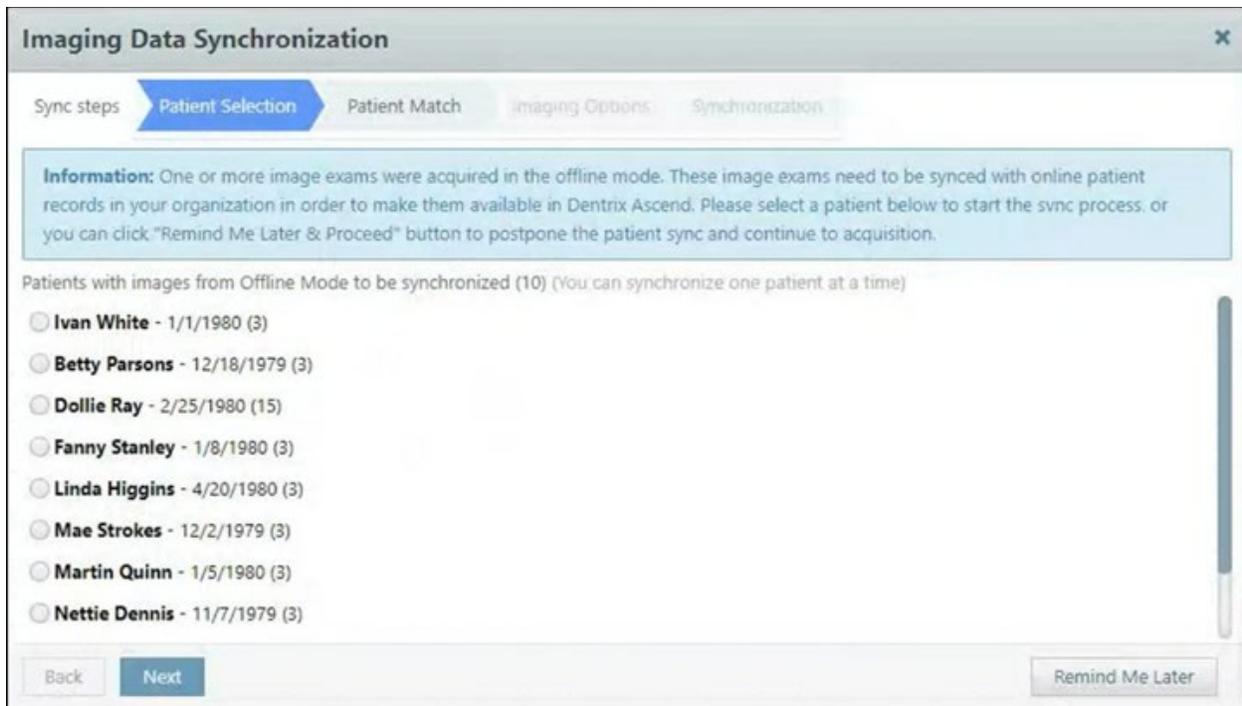
Sync Offline Procedures

One or more imaging procedures were acquired in Offline Mode.

Would you like to sync these offline procedures now?

Synchronize Procedures Remind Me Later

Click **Synchronize Procedures** to open a sync wizard. The wizard walks you through one patient at a time to double-check that images upload to the correct patient. If the offline patient has a match in the database, Dentrix Ascend automatically selects that patient. If the match is not exact, Dentrix Ascend waits for you to use the **Search** box to find and select the patient.



New Sensor Support

This update provides integrated support for the KaVo IXS (new Gendex/KaVo intraoral x-ray sensor).

New Learning Content

Hungry for more? The Dentrix Ascend Practice Education team is always cooking up more content to satisfy your appetite for learning and using the platform. Here is a sampler platter for you. Click a topic title to open the article.

[Updating Fee Schedules from File](#)

Updating fee schedules doesn't have to be a chore! Next time you are ready to update your fee schedules, you have the option to perform the update speedily and in bulk by importing a .CSV file.

[Using the Chairside Dashboard](#)

Having the tooth chart, progress notes, and images together in one view streamlines your workflow and improves your working efficiency.

[Checking Patient Remaining Benefits](#)

Learning how to check a patient's remaining benefits is important, so that you and your patient have a clear understanding of the amount that remains for the benefit period before any treatment starts.

[Deleting Images](#)

You may sometimes want to delete an image from a patient's record. Perhaps you acquired an image on the wrong patient record, or perhaps the image is blurry. No problem.

[Adjusting Online Booking to Align with New Office Hours](#)

Your Online Booking configuration does not recognize when you decide to move to new extended or reduced hours. When that happens, you also need to adjust your Online Booking.

[Running an Outstanding Claims Report](#)

Running an outstanding claims report is one way you can improve the cash flow in your dental practice. The Outstanding Claims Report displays aged claims for payers who owe you money.