Change is rampant in healthcare, and laboratories are feeling that change. The year 2016 will continue to present changes and challenges that the lab must be prepared to face. The practice of caring for patients relies heavily on lab results; however, the dynamics of which lab tests are performed and where testing takes place is shifting based on pressures from federal guidelines and changes in reimbursement models. Take a look at some of the legislation that labs need to keep on their radar.

ICD-10
Has Your ICD-10 Transition Been a Y2K?
The ICD-10 transition certainly had its hurdles but overall the healthcare industry has thus far weathered the change much better than predicted. Some have even equated the ICD-10 change to Y2K—for the most part, a non-event. If it felt like an easy transition, this can be chalked up to pre-planning, solid training, and preparation.

CMS Leniency Will Only Last So Long
Remain vigilant, though, because the Centers for Medicare & Medicaid Services (CMS)’s added initial flexibility may be one of the reasons for the ease into ICD-10. Until October 1st, 2016, as long as the submitted code is from the correct family, CMS will process the claim. Stay on your toes because CMS and insurance companies may become more stringent about coding precision as we get further into ICD-10.

ICD-10 Sets the Stage for the Future
Although the ICD-10 move has been disruptive and time-consuming, the transition has been a success. We now have one of the core foundational blocks on which to build continued healthcare improvements. The superior granularity of ICD-10 is expected to set the stage for improvements in patient outcomes and safety, healthcare savings, and advances in population health management. Most likely, we will look back as we prepare our 2017 checklist and wonder why it took us so long to move to a standard that has such clear benefits.

PAMA
What Will Happen to Lab Reimbursements?
The Protecting Access to Medicare Act of 2014 (PAMA), Section 216, “Improving Policies for Clinical Laboratory Tests,” set into motion a plan to begin basing Medicare reimbursements for clinical lab tests on private sector payment rates beginning in 2017. Applicable labs were expected to begin reporting their test volumes and private payor rates (for each test on the Clinical Laboratory Fee Schedule [CLFS]) to Medicare in January 2016. CMS will use this data to establish Medicare payment rates based on the weighted median payments for private payors. If the new payment rate is significantly lower than the current rate, the decrease will be phased in over a six-year period. The maximum reduction for years 2017 through 2019 is 10% of the previous year’s rate and 15% for years 2020 through 2022.

Who Has to Report?
Applicable labs that are expected to report their rates and volumes include independent labs and physician office labs that receive more than $50,000 per year from Medicare. Conversely, labs receiving less than $50,000 per year from Medicare are exempt. Most hospital labs fall under the exemption because the law states that 50% of the entity’s total Medicare revenue must come from the Physician Fee Schedule or the CLFS. This means that most large hospitals, about 50% of independent labs, will be required to report.

2016 Lab Lookout List

Change is rampant in healthcare, and laboratories are feeling that change. The year 2016 will continue to present changes and challenges that the lab must be prepared to face. The practice of caring for patients relies heavily on lab results; however, the dynamics of which lab tests are performed and where testing takes place is shifting based on pressures from federal guidelines and changes in reimbursement models. Take a look at some of the legislation that labs need to keep on their radar.
If Lab Reimbursements Decline, How Will this Impact Your Budget?

While it may come as a relief to not have the burden of reporting this data, this means the information CMS will use to set the new CLFS will be biased. The new rates calculated under PAMA are supposed to go into effect on January 1st, 2017, and will continue through 2022. CMS estimates that reductions to the CLFS will total $5.14 billion from 2017 through 2026. To summarize, administrators, particularly in the hospital setting, need to be aware of the changes to lab payments and need to plan accordingly to handle the impact of the impending fee reductions. Leadership should have a plan in place to offset the losses and process changes to the facility budget.

Meaningful Use
Only 12% of Providers Hit Stage 2

If you are in the midst of Stage 2 Meaningful Use (MU), from the lab’s perspective, Computerized Provider Order Entry (CPOE) and incorporating results as structured data are the two biggest measures that should be on your radar. The CMS website offers a navigable Stage 2 chart of objectives for eligible professionals.

Looking well beyond 2016, Meaningful Use Stage 3 continues to be revised and updated, with many sharing the opinion that we should wait and assess the successes and failures of Stage 2 before we finalize Stage 3, particularly in light of the fact that only about 12% of providers have successfully attested for Stage 2.

After Andy Slavitt, CMS’s Acting Administrator, announced that MU would end in 2016, CMS has been quickly backtracking to clarify that current MU regulations, including Stage 3, are still in effect. Plans are to overhaul the MU system to better align with the shift to outcome-based incentives (as opposed to incentives that focus solely on the use of health IT) via the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA).

MU Influences Provider Pay

MACRA, passed this year to replace the sustainable growth rate formula, created the Merit-based Incentive Payment System (MIPS) that is intended to move providers toward risk-based payment models. Under the MACRA payment guidelines planned for 2017, MU is included as a portion of determination for provider pay.

What is in Store for Stage 3?

The Stage 3 final rule has consolidated modifications made to MU 2015-2017 into the Stage 3 rule and should be the last step of MU. Long-range goals include greater flexibility, simplification, interoperability, and measurable improvements in patient outcomes. So far, not a great deal of Stage 3 is of concern for the laboratory other than continuing the initiatives from Stage 2.

While we won’t be seeing Stage 3 until 2018, here are a couple highlights of the final rule: 1. Stage 3 has challenging interoperability requirements that many healthcare organizations are struggling to meet. 2. Stage 3 removes redundancies from previous versions and focuses on improvements in clinical decision support, upping the requirement to include five clinical decisions-support initiatives.

Vendors Asked to Improve Transparency & Interoperability

From a vendor perspective, Stage 3 intends to create greater transparency about products, enforce strict testing requirements, and eliminate “health information blocking.” Vendors will be required to build application programming interfaces (APIs) to allow greater access to data and improve security measures.

Make Sure Your Lab’s Value Shines Through: Whitepapers Available

To face legislative changes such as PAMA, laboratorians must refocus their efforts and find new ways to demonstrate their value. Orchard is here to keep you informed and to provide valuable resources to help you face 2016. On our website at www.orchardsoft.com/whitepapers/, there is a series of informative white papers to keep laboratorians “in the know.”

- The Value of the Lab in the New Healthcare Model
- The Value of Data in the New Healthcare Model
- Structured Data: Essential for Healthcare Analytics & Interoperability
- Laboratory Informatics: Supporting the Future Needs of Healthcare
- Laboratory Point-of-Care Testing: A Future Outlook
- Meaningful Medical Analytics: Driven by Laboratory Data Integration
- Tulare County Public Health Lab’s Lean Journey
In a continuous effort to adapt and better meet the growing needs of our clients, Orchard is restructuring our Account Management team by adding additional account management staff and implementing a team-focused territory alignment.

**Orchard Responds to Changing Client Needs**

Beginning in 2016, Account Management will be realigned into three regional teams (see map for East, Central, and West territory alignments) led by a Regional Executive Manager (REM) and a team of three supporting account managers (see the Team Members box below). While each customer will continue to be assigned a primary account manager contact, under the smaller territory alignment, each team member within the region will be able to provide back-up support and a greater continuity of care. In other words, at your time of need, you will have additional support should your primary account manager be unavailable. The role of Account Management, however, remains unchanged as they are continually dedicated to providing exceptional customer service and guidance regarding your Orchard System(s) to ensure that they meet the needs of your laboratory in your respective healthcare environment.

**Account Managers Available to Provide Guidance**

Your account manager will be able to address your inquiries and present you with new opportunities that will enhance the value of your Orchard System through add-on modules (e.g., Microbiology and Anatomic Pathology), additional licenses, interfaces (instrument, HL7, EMR/PMS/HIS, and reference laboratory), Orchard’s P.A.C.E.-accredited training classes, hardware upgrades (computers, label printers, servers, bar code scanners, etc.), expansions, and on-site assistance, if needed. To reach the Account Management team, call (800) 856-1948.

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**Notes**


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**Team Members**

**West**
- Andy Tolle, REM
- Charity Dehmer
- Adam Howery
- Damian Lahr

**Central**
- Pat Smits, REM
- Derek Ades
- John Boss
- Will Renn

**East**
- Emily Daniels, REM
- Eric Havel
- Ben Williams
- Jesse Garcia

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If you have any questions or suggestions, please contact our publishers, Michael Brazitis and Sarah Goguen, or editor, Kerry Foster, at (800) 856-1948.

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**Contributing authors & editors:**
- Michael Brazitis
- Daphne Davis
- Audrey Lorraine
- Pat Smits
- Kim Futrell
- Christine Henderson
- Eric Charley
- Debbie Schilling
- Bodie Shellenberger
- John Wallihan
- Katherine Wertz

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To meet the growing needs of our clients, Orchard is restructuring our Account Management team by implementing a team-focused territory alignment.
Where in the World is Orchy?

Orchard’s beloved mascot, Orchy, has picked up and left again for yet another stopping point on his everlasting journey. This time, Orchy has landed in a place known for its sandy beaches, cliffs, and majestic seascapes. The island is of Old Norse origin and is home to a famous statue paying homage to the brilliant author of Les Misérables. If you think you know where Orchy has landed, send us your answer at news@orchardsoft.com by March 7th to be eligible to win an Orchard prize package.

On Orchy’s last quest, he was found in Dublin, Ireland, on the Trinity College campus. At first glance, it may have appeared that he was at the University of California in Berkeley. Rest assured, this was not the case as Orchy was thousands of miles away at Ireland’s oldest university. He was spotted at Arnaldo Pomodoro’s “Sphere Within Sphere” sculpture outside the library.

Margaret A. Knapp, MLS(ASCP), CLS, of Knapp-Frazer Consulting, correctly guessed Orchy’s location and won last quarter’s contest. Make sure to visit the Orchard website to see where Orchy has been and where he will go next!

Special Olympics Bowling Tournament

Orchard Software takes pride in supporting the Special Olympics, which helps raise donations and awareness for more than 11,000 Special Olympics athletes from all over Indiana that compete in more than 20 Olympic-type sports.

Orchard Takes to the Lanes to Raise Special Olympics Awareness

In 2015, Orchard supported and participated in the Strikes for Special Olympics Indiana annual bowling tournament. One of our teams came in second place overall! More than $18,000 was raised for Special Olympics Indiana Athletes. Orchard supports Special Olympics in other events as well, such as the Charity Golf Classic and the Plane Pull Challenge. Orchard is looking forward to working alongside Special Olympics Indiana and their athletes as we continue our support in 2016 and beyond!

Special Olympics transforms lives through the joy of sports.
Help us get one more athlete onto the playing field.
At Orchard, we believe in the “power of new.” We have been working for months to kick off 2016 in a big way with our new training center and new, redesigned training courses. We are proud to offer significant improvements and advancements to customers and employees.

All the “Bells & Whistles” to Enhance the Classroom Experience

Located next door to Orchard Software’s Corporate Headquarters, our new, state-of-the-art training facility offers four training rooms that can accommodate both large and small class sizes, each with individual workstations. The building also offers relaxing common areas with modern amenities such as wall-mounted smart TV monitors, ample private spaces for conducting business or checking in at the office, a large kitchen offering snacks and beverages, and generous space throughout to relax or network during breaks and lunch.

Redesigned Courses Based on Client Feedback

Our training facility is not the only thing that is new. We have redesigned our courses with you and your feedback in mind. The new Harvest LIS Advanced User Training class, which debuted in December, offers a blended learning approach that includes lectures, discussions, interactive test system activities, guest speakers, and eLearning components. The class includes an easy-to-use participant guide that has guided exercises and performance scenarios for hands-on learning; increased, built-in networking opportunities with industry-leading guest speakers; and new Orchard Software and Harvest LIS-focused update sections.

The class flow and focused content improvements allow for greater learning opportunity in a shorter, three-day class week. The “What’s New in Harvest” session offers a sneak peak at the latest Harvest LIS build. And our new, streamlined content builds from the existing System Administrator (SA) course, focusing on the advanced knowledge and skills required by experienced SA professionals.

Dedicated to Learning—Dedicated to Our Customers

New space to learn, new streamlined content you can use — at Orchard, the only thing that is not new is our commitment to you. To find out how you can harvest the “power of new” at Orchard, contact your account manager at (800) 856-1948 or visit www.orchardsoft.com.

2016 Advanced User Course Dates

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For more information, contact your account manager at (800) 856-1948 or visit www.orchardsoft.com.
Teaching Others to Use Data to Improve Healthcare

First Orchard School of Medical Analytics: A Resounding Success

October 2015 marked the inaugural class of the Orchard School of Medical Analytics. The four-day course took place in Indianapolis and was attended by pathologists from Boyce & Bynum. As part of Orchard Analytics, a new business unit of Orchard Software Corporation, Orchard’s analytics school offers advanced training to support pathologists, lab leaders, and healthcare administrators in learning to use healthcare data from disparate sources to improve patient care and reduce costs. Dr. Adam Clapper, one of the first attendees, said “the hands-on, interactive training from Dr. Brimhall provided me with a strong foundation of analytics to take back and make a measurable difference within my facility.”

Class began with pathologists ready to make changes and learn how to drive analytics projects within their organization. Led by pathologist Dr. Brad Brimhall — Clinical Professor of Pathology, Staff Pathologist, and Medical Director of Integrated Healthcare Analytics and Bioinformatics, Department of Pathology, University of Texas Health Science Center (San Antonio), — attendees gained background in current healthcare challenges and strategic pressures within the industry.

Moving quickly to the heart of the course, participants learned about types of databases, relational database management systems, database tables, dictionaries, keys, joins, and data quality. The class included a lot of hands-on computer time, practicing with real healthcare data in a relational database. Analytics students said they felt that the interactive hands-on portion of training was of great value and reinforced Dr. Brimhall’s teaching.
Dr. Brimhall presented a comprehensive analytics toolbox that I can use to tackle future in-house analytics projects.

Successful analytics project proposals and results have to be presented to administration to demonstrate their alignment with the overall business strategy. This interaction is so important that Orchard carved out time within the course to learn how to create powerful presentations. Jock Murray of the Jock Murray Group taught how to produce effective project proposals that are well received and that influence the organization in a positive manner.

Successful Analytics Projects

Below are examples of successful projects that have been performed by Dr. Brimhall and his colleagues on his analytics team.

Reduced LOS with Improved Clinical Efficiency

Looking to reduce length of stay (LOS) for sepsis patients, Dr. Brimhall and his colleagues decided to invest in MALDI-TOF technology. However, initial profitability analysis showed a payback period of 26 years. Needless to say, this proposal was not very attractive to administration. With an analytics project delving deeper into the cost of hospital stays, his team was able to determine that the MALDI-TOF not only improved turnaround time, but reduced hospital LOS. The payback period was reduced to only 12.6 weeks with a net present value (NPV) of $5,471,954. Dr. Brimhall explained, “If you invested the same amount in a bank account, you would need to get an 80.79% rate of return in order to match the return from this project.”

Improved Antibiotic Stewardship

Dr. Brimhall and his pharmacy colleagues implemented a successful analytics project that improved antibiotic stewardship and saved more than $649,000 per year. By combining lab microbiology results, pharmacy data, and financial data, they were able to uncover an opportunity to not only provide better care for patients in regards to the appropriateness of their treatment, but simultaneously save a tremendous amount of money.

Improved Radiologist & Patient Satisfaction

To improve wait times and patient satisfaction in imaging, Dr. Brimhall and his colleagues performed an analytics project to justify implementation of a POC creatinine test. Using combined data and analyzing the difference in MRI, CT, and PET scan patient volumes with the POC creatinine in place, the resulting difference in annualized patient volume brought in $377,100 in additional revenue. In addition, the POC devices were paid for in less than one month and the number of walk-outs decreased from 17.7 to 2.6 per month.

Expensive “Gorillacillin” Use

<table>
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</table>

Less Cost of Generic $56,211 $71,461

NET COST SAVINGS $649,665 $825,807

Dr. Brimhall and his colleagues implemented an analytics project that improved antibiotic stewardship and saved money.

Reserve Your 2016 Seat Now!

If you are an analytics-minded, data-savvy healthcare leader interested in making a difference by using your data, the Orchard School of Medical Analytics has 2016 dates for you to choose from. The four-day course will take place in Carmel, IN. Currently, there are three weeks available:

- Monday, April 11 – Thursday, April 14
- Monday, June 6 – Thursday, June 9
- Monday, October 3 – Thursday, October 6

For more information, visit www.orchardanalytics.com or contact your Account Manager at (800) 856-1948.
A Laboratorian’s Guide to Effective LIS Change Control

Change control is a systematic way of tracking changes made to a system—from a laboratory procedure to LIS modifications. Its purpose is to make sure all changes are documented, to ensure resources are used effectively, and to ease troubleshooting of any issues that arise from the change. Changes made to sample information, such as SID or collection location, are captured and documented according to local laboratory procedure. Likewise, changes made to procedures or settings within Harvest LIS also need to be captured. A change control procedure should blanket any addition, subtraction, or modification to the functioning of the LIS or the data information that is contained. Capturing changes made to the LIS gives laboratory supervisors a means to track and trace modifications. By knowing the modifications made and who made them, troubleshooting may be expedited and the time spent with product support technicians reduced. When a starting point is established, time and money are saved should an issue arise or a rollback be needed later.

Roles & Responsibilities
Pre-planning to determine the appropriate personnel who have the authority to make modifications to the LIS is the first step in establishing an effective change control procedure. In general, access should be limited to staff specifically designated to approve a workflow change or modification to the LIS settings. The rule of minimum accessibility applies to these roles. The roles and security rights for each individual should be established well in advance. A listing of personnel changes to the staff is also appropriate to document. Each and every person who can be involved in a LIS modification should be recorded. The information captured should include, but is not limited to:

- Why was the change performed?
- Who approved this change?
- How was the modification verified for the live system?
- Was an Orchard support ticket generated?

Do You Have a Change Control Procedure in Your LIS Manual?
A change control procedure governs the policies, procedures, and rules affecting the LIS. This track-and-trace operation lends itself well to capturing the reason for a modification, the change made, as well as the individual who made it. Changes made first in a test system are beneficial before implementation in the live LIS. The test system, mirroring the live system, can show any negative impact resulting from a change or modification.

Any changes made to the system affecting laboratory work flow should be tracked & documented. These changes include, but are not limited to:

- Tests & order choices
- Patients
- Billing
- Insurance
- Workstation changes (interface changes)
- ACOs
- Changes to workstations, particularly interfaces & any workstations designated for Micro or AP
- Upgrading or updating servers, workstations, interfaces, faxing servers, etc.

Changes to the LIS can be captured for a variety of parameters: the reason for the change, who approved the change, how the modification was verified, the impact to the LIS, etc. To assist the support staff in troubleshooting, it is helpful to document any Orchard support tickets that are generated to streamline further troubleshooting or rollback.

Make Change Control Part of Your Documentation Process
Documentation of system changes should be stored in an appropriate location. Only those who are required to access this critical information should be allowed access. Feel free to include LIS change management in your previously established document control processes. It is easier and more streamlined to capture changes in that location rather than generating an entirely new system.

A change control procedure for the LIS is critical to the maintenance and operation of the system. Further guidance for implementation may be gathered from the Orchard Software Support Center at (800) 571-5835, or through your internal IT resources. 🌐
A number of enhancements to data browsers are available in the December 2015 release of Harvest LIS and Orchard Pathology. These additional features provide more tools to harvest the power of your laboratory data, increasing the efficiency and productivity of your lab.

**New Email Options**

Among the features added to browser functionality, two new options are available for using browsers with email. Harvest LIS now has the ability to email browser reports as a comma-delimited (.csv) file. Prior to this feature, Harvest LIS’s only option for email was to email the browser report as a PDF file. Along with selecting the file format of the emailed report, there is an additional feature that allows users to send scheduled browser reports to multiple email recipients. Both of these features are available by clicking on the “Edit Schedule & Options” button within the Browser Options window. To activate these options, first select “Email the list to specified address” from the “Output options” drop-down list. Then, designate multiple email addresses by adding a semicolon between addresses in the “Email Address” field. At this point, you can also identify the file type by using the “Email file type” drop-down list.

**Added Enhancements for Searching, Viewing, & Accessing Data**

During the course of your busy workday, simplifying tasks by reducing the number of clicks is essential to heightened productivity. A new feature is available that provides users with the ability to list previously defined data browsers in the Reports menu of Harvest LIS and Orchard Pathology. This provides users with quick access to frequently used browsers.

Another time-saving feature within the browsers allows users to scan bar codes to search for a specific record within the browser results. Previously, it was time consuming to scroll through a browser that had hundreds and possibly thousands of rows, trying to locate a specific patient/case record. The new feature allows users to bar code scan in three of the browsers: Result, Order/Case, and Order Choice/Specimen. Scanning a valid bar code will highlight the corresponding record within the browser, making it easier to locate the desired record.

**New Security Features Available for Secure Dissemination of Browser Data**

System administrators now have the option of restricting access to certain browsers to individual system security groups. Previously, users could define browsers as “Private” (available only to the user who created the browser), “Public” (available to all users), or Admin (available only to system administrators). The new feature includes an additional option labeled “Limited”. After
selecting “Limited”, you are prompted to select the security groups that include users who are permitted access to that particular browser.

To further support increased security, a feature is available within the browser functionality that allows users to restrict non-reportable comments from browser reports. Reportable comments are important for data review and sharing with non-laboratory departments and clients. Non-reportable comments should only be viewed by internal laboratory personnel. This new option allows users to add the optional columns “Comments”, “Comments: Reportable”, and “Comments: Non-reportable” for each comment type (e.g., patient, order, order choice, and test) to their browser options. By adding this column, users can easily exclude from the queried information any comments that have the “Don’t report” checkbox marked.

**User Action Log Enhancements**

System administrators use the User Actions Log for a variety of tasks to ensure laboratory compliance and productivity. A feature has been added to the User Actions Log that will identify which saved criteria was used when a user ran a browser report. In the new release, the report title is added to the Browser Criteria column text in the User Actions Log. This will help system administrators identify any issues within a specific report.

For detailed information on all the new features available in the December 2015 release of Harvest LIS, visit our website at [www.orchardsoft.com](http://www.orchardsoft.com) or contact Orchard Software Support Center at (800) 571-5835.
The Quality Assurance (QA) team at Orchard Software has a primary goal of systematically working toward maximizing the predictability, efficiency, and maintainability of the deliverables for Orchard’s Operations Department. Alongside this goal, QA researches and develops new, innovative methods and technologies to improve the overall Orchard experience for both clients and employees.

Meet the QA Team Members

Quality Assurance consists of five talented, driven, and intelligent employees, all working toward the same goal of improving Orchard Software and the overall positive experience of the software systems. Quality Assurance Manager Ryan Howard oversees the QA team, ensuring that his employees have the tools and resources necessary to make Orchard a better company.

Joshua Impson and John Kramer, Test Automation Engineers, are responsible for building, maintaining, modifying, and running all automated testing systems. This includes, but is not limited to, stress and load, performance, and varied scenario testing, and also includes targeted regression tests, such as InstallShield and browser functionality testing. These two automation members design, build, and maintain all stress and security tests that Orchard runs against its own major products.

Jennifer Smith and Patrick Cunningham, Software Support Engineers, are responsible for assisting the Operations Department with daily troubleshooting issues—primarily assisting with incoming escalated issues to ensure the timely resolution of any occurring problems. All problems that cannot be handled through traditional methods of support end up here; issues such as bug fixes cause analysis for bigger problems. They are subject-matter experts who are extremely knowledgeable about Orchard’s product suite — how it works, how it breaks, and the underlying technologies that make Orchard’s software systems function.

The Quality Assurance team is an integral part of Orchard. Their expansive knowledge of all Orchard products is a fine example of why Orchard Software is the best in the business.

Orchard’s Quality Assurance Team: Ryan Howard, Joshua Impson, John Kramer, Jennifer Smith, and Patrick Cunningham
Tech Tip: Improving the Use of ACOs

The Advanced Configuration Option (ACO) Guide contains hundreds of options for users to customize the features and behaviors for their Orchard product. These options are added to the System-Wide, Workstation, and/or Web/Server tabs on the Advanced Configuration Options window in Harvest LIS or Orchard Pathology.

You may find the ACO Guide on the Orchard Resource Center (ORC) or in Harvest LIS or Orchard Pathology. Access the guide in the program by clicking the View ACO Guide button on the Advanced Configuration Options window.

The guide is divided into two parts. The first, marked with blue banners, is ACOs for Your Orchard System. This contains all non-instrument interface ACOs. The second, marked with orange banners, is Instrument Interface. This contains all instrument interface ACOs.

To search the guide, press [Ctrl] + [F] and type your search query in the search box that appears. To return to the top of the page, press the [Home] key. To jump to an ACO header, select a header from the “Header” drop-down list.

Applying ACOs by User or Security Group

Many of our clients regularly use our ACOs to personalize their versions of Harvest LIS or Orchard Pathology, but may not realize they can set ACOs that apply to specific system security groups or specific users. This is a great option for administrators who want to limit settings, either for a whole group or on an individual basis.

To set system security group-specific ACOs, place the name of the system security group after the setting, followed by a colon (replace spaces with underscores).

[<header>]
<setting>:<security_group>=<value>

For example, to disable the “Defer this order” checkbox for all users in the “Order Entry” system security group, use this syntax:

[Order]
DisableDefer:Order_Entry=true

To set user-specific ACOs, append a colon and an ID to the ACO option.

Orchard Harvest LIS and Orchard Pathology users will insert the CLIA ID because many sites do not set up IDs for their users. Orchard Webstation users will insert the Webstation user ID. (Check the [Webstation] section of the ACO Guide for more information about ACO entries for Webstation users.)

[Section Header]
ACO:<CLIA ID or user ID>=<value>

For example:

[General]
RestrictedTab:tjones=Micro|AP
RestiredTab:jsmith=Hematology
RestrictedTab=All

When checking an ACO, Harvest LIS and Orchard Pathology will first look for a user-specific ACO.

If a user-specific ACO is not found, they will then look for a system security group-specific ACO.

If a system security group-specific ACO is not found, they will finally look for a regular ACO.

We ask you to make sure you only add the ACO settings that you need. If you have any questions or need assistance with ACOs, please call the Orchard Software Support Center at (800) 571-5835. 🍎
Join us in Downtown Indianapolis for Orchard’s 2016 User Group Meeting & Symposium!

Orchard is pleased to announce the dates and location for our 2016 annual User Group Meeting & Symposium. The event will be held at the Omni Severin Hotel in downtown Indianapolis on June 22nd & 23rd.

Our User Group Meeting & Symposium is designed for current and prospective users alike, providing each with an opportunity to learn more in-depth information about the lab industry, Orchard Software, and Orchard’s various lab information system products. The symposium also offers an opportunity to meet Orchard employees and other users of Orchard Software systems.

Registration will be available in late February. For more information on this event — agenda, registration, and hotel accommodations — visit our symposium webpage at www.orchardsoft.com/symposiums/. Or contact your Account Manager at (800) 856-1948.

We look forward to seeing you in Indianapolis!

Orchard Software
Harvest the Power
Orchard's 2016 Annual User Group Meeting & Symposium
Downtown Indianapolis

Orchard is pleased to announce the dates and location for our 2016 annual User Group Meeting & Symposium. The event will be held at the Omni Severin Hotel in downtown Indianapolis on June 22nd & 23rd.

Orchard’s User Group Meeting & Symposium is designed for current and prospective users alike, providing each with an opportunity to learn more in-depth information about the lab industry, Orchard Software, and Orchard’s various lab information system products. The symposium also offers an opportunity to meet Orchard employees and other users of Orchard Software systems.

Empowerment & Education All Rolled Into Two Days
The User Group Meeting & Symposium is spread over two days. Day one is packed with empowering educational opportunities that will provide updates on the changes taking place in healthcare and how those changes impact the laboratory. Robert Michel, Editor-in-Chief of The DARK Report, will provide a global picture of current healthcare and laboratory legislative and regulatory changes and share beneficial insights for laboratory leaders. Dr. Michael Astion, pathologist and Medical Director of Laboratories at Seattle Children’s Hospital, will discuss the role of proper test utilization and the best way for test orders to be part of the laboratory’s successful transition into value-based healthcare.

On day two, attendees glean succinct and useful ideas on how to maximize the use of Orchard’s products to show value and to thrive in the new healthcare arena, learning ways to demonstrate that laboratories have a direct influence on positive patient outcomes and cost efficiency. Examples of day two topics: Lean Lab Thinking: Make Rules Work for You as you Transition to Evidence-Based Practices, Client Services Module: New Tools to Streamline Business Practices for Your Lab & Your Clients, and several “Ask the Experts” sessions to give you an opportunity to have your questions answered.

P.A.C.E. Credits Available
You can attend day one, day two, or both, and many sessions include P.A.C.E. credits toward continuing education requirements. Registration will be available on our website in late February. For more information on this event — agenda, registration, and hotel accommodations — visit our symposium webpage at www.orchardsoft.com/symposiums/. Or contact your Account Manager at (800) 856-1948. 🍎
**Day 2 Sessions**

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<thead>
<tr>
<th>Session</th>
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<tr>
<td>What’s New in Orchard Copia</td>
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<tr>
<td>What’s New in Orchard Harvest LIS</td>
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<td>Effective Use of LOINC Codes for Successful LIS Integration</td>
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<td>IT Best Practices</td>
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<tr>
<td>Orchard Copia Analytics &amp; Data Mining</td>
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<td>How to Use Laboratory Data to Increase the Lab’s Contribution &amp; Value</td>
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<td>HL7 Integration: Ask the Experts</td>
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<td>Lean Lab Thinking: Make Rules Work for You as You Transition to Evidence-based Practices</td>
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<td>Orchard Harvest LIS: Ask the Experts</td>
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<td>Orchard Pathology: Ask the Experts</td>
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Great fun and tons of learning took place at Orchard’s 2015 User Group Meeting & Symposium down in Orlando. You won’t want to miss it in 2016!
## 2016 Orchard Software Event Calendar

<table>
<thead>
<tr>
<th>Date</th>
<th>Trade Show/Event</th>
<th>Location</th>
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<tbody>
<tr>
<td>2/29 - 3/4/2016</td>
<td>HIMSS</td>
<td>Las Vegas, NV</td>
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<tr>
<td>3/8 - 3/12/16</td>
<td>AMGA</td>
<td>Orlando, FL</td>
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<tr>
<td>3/20 - 3/23/16</td>
<td>CLMA</td>
<td>Orlando, FL</td>
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<tr>
<td>4/6 - 4/8/16</td>
<td>G2 Lab Revolution</td>
<td>Chandler, AZ</td>
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<td>4/27-4/30/16</td>
<td>Becker’s Hospital Review</td>
<td>Chicago, IL</td>
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<td>5/23 - 5/26/16</td>
<td>Pathology Informatics Summit 2016</td>
<td>Pittsburgh, PA</td>
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<td>6/6 - 6/9/16</td>
<td>APHL Annual Meeting</td>
<td>Albuquerque, NM</td>
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<tr>
<td>7/31 - 8/4/16</td>
<td>AACC Clinical Lab Expo</td>
<td>Philadelphia, PA</td>
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<tr>
<td>8/9 - 8/11/2016</td>
<td>Allscripts Client Experience (ACE)</td>
<td>Las Vegas, NV</td>
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<tr>
<td>9/6 - 9/10/2016</td>
<td>PAINWeek</td>
<td>Las Vegas, NV</td>
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<tr>
<td>9/14 - 9/17/2016</td>
<td>2016 ASCP Annual Meeting</td>
<td>Las Vegas, NV</td>
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Read the [2016 Lab Lookout List](#) for the Latest News on ICD-10, PAMA, & MU!