



Powerful Solutions for Hard Working Practices

	V19	V20	V21	V22	V23	V24	V25
Updated CMS-1500 Claim Form for ICD-10	✓	✓	✓	✓	✓	✓	✓
Added Race and Ethnicity fields for Quality Reporting	✓	✓	✓	✓	✓	✓	✓
New, more specific filters in Unprocessed Charges tool		✓	✓	✓	✓	✓	✓
Enhancements to Medisoft Mobile UI			✓	✓	✓	✓	✓
Updates to ICD-10 Mapping utility			✓	✓	✓	✓	✓
New Pending Patients tool for adding patients to Medisoft			✓	✓	✓	✓	✓
Updated log-in security				✓	✓	✓	✓
New Write-Off tool for outstanding balances				✓	✓	✓	✓
Integration with AutoRemind for appointment reminders				✓	✓	✓	✓



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New Patient Online Appointment Scheduling tool				✓	✓	✓	✓
New Accounts Receivable Tracker for working AR balances				✓	✓	✓	✓
Enhancements to Real-Time Eligibility and EOB functionality				✓	✓	✓	✓
Insurance card scanning to policy and multimedia tabs					✓	✓	✓
Auto-assign statements notes					✓	✓	✓
Advanced duplicate patient record matching					✓	✓	✓
Color coding functionality for patient statuses and incomplete transactions					✓	✓	✓
Insurance timely filing calculator					✓	✓	✓
Secondary claim status in Revenue Manager					✓	✓	✓
Reporting best practices documentation					✓	✓	✓
Cash posting of payments & unlocked fields in BillFlash OfficePay					✓	✓	✓
Transaction Entry Alerts for present and missing content						✓	✓
Enhanced eligibility response displays						✓	✓
Report header updates to Aging Reports plus new Primary Insurance Aging Summary report						✓	✓
Transaction & statement notes added to walkout receipts						✓	✓

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Multiple mobile app enhancements including: <ul style="list-style-type: none"> Addition of cases Ability to edit and delete appointments Detailed patient balances View additional insurance information Add middle initial to patient names Add facility code 						✓	✓
NDC codes added to unprocessed transactions						✓	✓
OCR scanning of insurance cards and return of demographic information							✓
Enhanced ICD-10 Search Tool powered by IMO® Terminology							✓
Demographic information returned on eligibility checks							✓
Multiple revenue management improvements related to batch eligibility checks							✓
Fewer clicks for real-time eligibility checks							✓
Login/Logout audit trail reporting							✓
Insurance codes added to Transaction Entry Tab							✓
Deposit list enhancements to use in-screen persistence of payer type/payer method values							✓
Include up to 12 diagnosis codes from the patient case on the unprocessed transactions edit							✓
Added patient DOB, age, and last Eligibility Check date to OHP appointment screen							✓
EHR Interface with eMDs award-winning Aprima solution							✓