



	V20*	V21*	V22*	V23*	V24	V25	V26
Updated CMS-1500 Claim Form for ICD-10	✓	✓	✓	✓	✓	✓	✓
Added race and ethnicity fields for quality reporting	✓	✓	✓	✓	✓	✓	✓
More specific filters in Unprocessed Charges tool	✓	✓	✓	✓	✓	✓	✓
Enhancements to MEDISOFT Mobile UI		✓	✓	✓	✓	✓	✓
Updates to ICD-10 mapping utility		✓	✓	✓	✓	✓	✓
Pending Patients tool for adding patients to MEDISOFT		✓	✓	✓	✓	✓	✓
Updated log-in security			✓	✓	✓	✓	✓

*Please note that MEDISOFT V20-V23 are no longer supported by the developer.



	V20*	V21*	V22*	V23*	V24	V25	V26
Write-Off tool for outstanding balances			✓	✓	✓	✓	✓
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					✓	✓	✓

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	V20*	V21*	V22*	V23*	V24	V25	V26
Transaction & statement notes added to walkout receipts					✓	✓	✓
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						✓	✓

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EHR Interface with the award-winning CGM APRIMA solution						✓	✓
Financial KPI dashboard to display financial performance year-over-year for charges, adjustments, and payments							✓
Patient encounters KPI dashboard to display patient visits, missed appointments, and average charges per visit							✓
Search patients by DOB							✓
Easy write-off adjustments from AR Tracker							✓
Integration with CGM CONNECTION - a robust patient engagement tool**							✓
Enhanced password security							✓
Report enhancements to meet 21st Century Cures Act demographic requirements							✓

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** Priced separately

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