

# Release 25.130 - March 6th, 2025

Last Modified on 03/06/2025 12:03 pm EST

## Executive Summary

### My Tasks

New Encounters Access Within PDF Split Window

[Release Note](#)

### Summary of Care

New Diagnosis Filter Option Within The Summary of Care Exports

[Release Note](#) | [Documentation](#)

### Quick Pay Window

New Quick Pay Window Launch

[Release Note](#) | [Documentation](#)

### Statements

New Role Screen to Allow Resetting the Statement

Aging Date

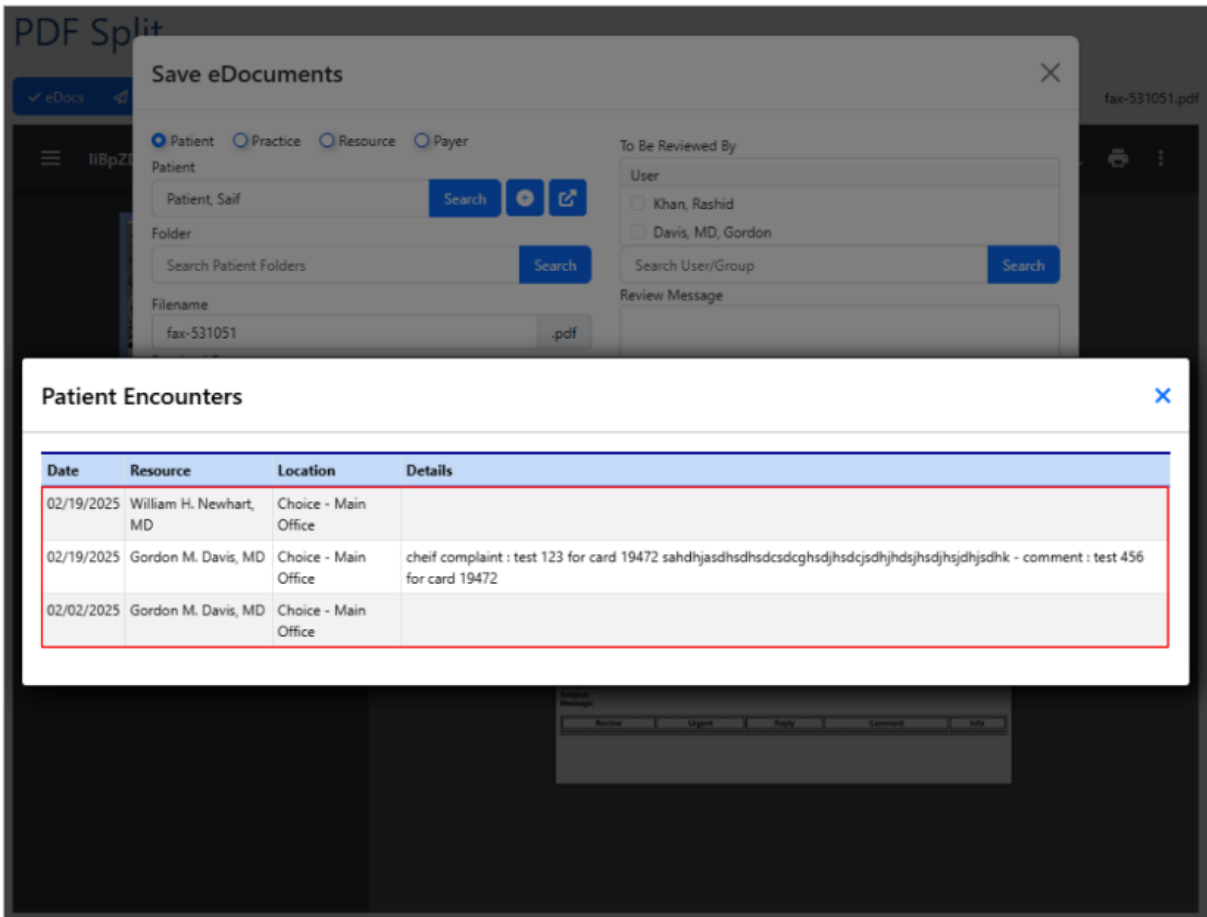
[Release Note](#)

## New Features and Updates

### My Tasks

#### Fax (Updox)

- User Story 19472: Updated PDF Split to Include Encounters Access: When users handle faxes received from My Task > Fax Updox, access to Encounters information is useful for determining who should review the received data. If the data is filed into eDocuments, Encounters visibility is available (once the patient is selected, the Encounters link displays a list of the patient's past Encounters). However, if the PDF Split tool is used, there is no access to the patient's Encounters information. In this release, we have modified the system so that the last three encounters can be retrieved via a new "Encounters" button within the PDF Split tool (next to the patient add button), similar to the button in the old Save to eDocuments fax window.



## Setup

### Roles

- **U13933: Statement Aging Date Reset:** A new role has been added that allows the user to reset the statement aging date. The new "*Reset Claim Statement Dates*" role screen grants the user access to the Statement Date (under the claim dates) and allows it to be edited. Additionally, a role screen for *Reset Claim Insurance Dates* has been included in this release as well.

| Groups                              | Screens                           | Roles                           | Off                              | Read                  | Update                | Write                            |   |
|-------------------------------------|-----------------------------------|---------------------------------|----------------------------------|-----------------------|-----------------------|----------------------------------|---|
| ✓ Claim Processing                  | Patient and Insurance Aging An... | !AllmedsIncAdmin                | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | V |
| Claim Status                        | Patient Billing and Collections   | !BillnetSolutionsAdmin          | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | V |
| Deposit Posting                     | Patient Billing Monitor           | !Internal-IsalusHealthcareAdmin | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | V |
| Gadgets                             | Patient Claim Extract             | !IsalusAdmin                    | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | I |
| Payment Batch                       | Patient Payment Import            | !SALUSHealthcareAdmin           | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | I |
| Practice                            | Patient/Encounter History         | !VarAdmin                       | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | I |
| Reporting                           | Payer Mix                         | Admin                           | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |   |
| Submission                          | Payment Analysis Report           | Analytics Cube                  | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |   |
| Table Maintenance                   | Practice Aging Tab                | Ancillary Medical Staff         | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |   |
| Practice - Case Management          | Practice Summary Report           | Billing                         | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |   |
| General                             | Prepare Batch                     | EmergencyAccess                 | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |   |
| Practice - ClaimScrub               | Reconciliation Tab                | Front Office                    | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |   |
| Claim Processing                    | Reset claim insurance dates       | new                             | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |   |
| Practice - CoverMyMeds (Legacy SSO) | Reset claim statement dates       | Provider                        | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |   |
| My Tasks                            | Search Claims                     | Read Only                       | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |   |
| User Setup                          | Statement Extract                 |                                 |                                  |                       |                       |                                  |   |
| Practice - Data Export              | Statement Generator               |                                 |                                  |                       |                       |                                  |   |
| Processing                          | Statement Request                 |                                 |                                  |                       |                       |                                  |   |
| Practice - eDocuments               | WHAIC 837 Report                  |                                 |                                  |                       |                       |                                  |   |
| Cabinet                             |                                   |                                 |                                  |                       |                       |                                  |   |
| Chart Tabs                          |                                   |                                 |                                  |                       |                       |                                  |   |
| Fax                                 |                                   |                                 |                                  |                       |                       |                                  |   |
| Processing                          |                                   |                                 |                                  |                       |                       |                                  |   |

## Reports

### Summary of Care

- U17587: Created a Claim Diagnosis Filter for Summary of Care Exports: Added a new Diagnosis filter option within the Summary of Care Exports screen, allowing users to filter by a Procedure Diagnosis Code Group. Additionally, a new screen (Diagnosis Code Group) has been created, accessible from the Summary of Care schedule Add/Edit screen or the Setup > Billing screen. This screen enables users to group diagnosis codes for additional processing. If a schedule is filtered by a Procedure Diagnosis Code group, all active patients with an active problem list containing a code in the group will be exported.

**Edit Schedule #85**

Export Type  Manual  Third Party Service

TPS Type \*

Entire Population

Provider

Appointment From \*

Appointment To \*

Completed Notes

Notes Starting From \*

Problem List Diagnosis

Group \*

Export Date

Encounter  Latest Encounter

Schedule Setup

Specific Date \*

Recurring Every \*

Alias

Export Time \*

**Diagnosis Code Group**

| Code                     | Code Type   | Description  |
|--------------------------|-------------|--|
| <input type="checkbox"/> | 488.1 ICD9  | INFLUENZA H1N1 INFLUENZA VIRUS                               |
| <input type="checkbox"/> | N10 ICD10   | Acute tubulo-interstitial nephritis                          |
| <input type="checkbox"/> | N11 ICD10   | Chronic tubulo-interstitial nephritis                        |
| <input type="checkbox"/> | N118 ICD10  | Other chronic tubulo-interstitial nephritis                  |
| <input type="checkbox"/> | N119 ICD10  | Chronic tubulo-interstitial nephritis, unspecified           |
| <input type="checkbox"/> | N12 ICD10   | Tubulo-interstitial nephritis, not spcf as acute or chronic  |
| <input type="checkbox"/> | N13 ICD10   | Obstructive and reflux uropathy                              |
| <input type="checkbox"/> | N130 ICD10  | Hydronephrosis with ureteropelvic junction obstruction       |
| <input type="checkbox"/> | N131 ICD10  | Hydronephrosis w ureteral stricture, NEC                     |
| <input type="checkbox"/> | N132 ICD10  | Hydronephrosis with renal and ureteral calculous obstruction |
| <input type="checkbox"/> | N133 ICD10  | Other and unspecified hydronephrosis                         |
| <input type="checkbox"/> | N1330 ICD10 | Unspecified hydronephrosis                                   |
| <input type="checkbox"/> | N1339 ICD10 | Other hydronephrosis   |

**Create New Diagnosis Code Group** **Edit The Diagnosis Code Group** **Delete Selected Codes From Group** **Assign Selected Codes To Group**

## EMR

### Patient Setup

- **U19168: Patient Demographics Nickname Tooltip Update:** A tooltip has been added to the "Nickname" field on the Patient Demographics screen. This field ensures that patient records reflect the name the patient

prefers to be called, which may differ from their legal name. The tooltip for the "Nick" field will now display as "Name to use" on the Patient Demographics screen.

The screenshot shows the 'Patient Setup' form. On the left is a navigation menu with 'Demographics' selected. The main form area is divided into 'Name' and 'Address' sections. The 'Name' section includes fields for First (Test), Middle, Last (Johnny), Nick (Joe), and Suffix. A red box highlights the 'Nick' field, which has a tooltip that says 'Name to use'. The 'Address' section includes fields for Address 1, Address 2, City, State, and Zip. Below these are 'Demographics' and 'Contact' sections. The 'Demographics' section includes Gender (Male), Ethnicity (Declined to specify), Race (Declined to specify), Lang., and Location (Primary Location). The 'Contact' section includes Home, Work, Other, Email, and Reminder. At the bottom, there are checkboxes for 'Active', 'Reportable', and 'Do NOT print Statements'.

### Chart Tabs

- U19172: USCDiv3 Add New Allergy Verification Status Field: Added a new Verification Status field to the Allergy edit screen to support the United States Core Data for Interoperability V3. This optional field allows users to set an allergy Verification Status, maintaining an audit record. Additionally, a new column for the verify field has been added to the summary details and history tables displaying allergies. The new Verification Status drop-down options are:
  - Null/blank - default value
  - Unconfirmed - Allergy has not been confirmed
  - Confirmed - Allergy has been confirmed
  - Refuted - Allergy has been refuted
  - Entered-in-error - If selected, it will auto-select the "Remove Allergy" checkbox

**Pollen** [X]

Symptom #1 [Search] [v]

Symptom #2 [Search] [v]

Symptom #3 [Search] [v]

Symptom #4 [Search] [v]

Symptom #5 [Search] [v]

Comment [Text Area]

Severity [Dropdown] **Verify** [Dropdown]

Remove Allergen

Always display window on new allergen

OK

**Summary**

| Alert | Description                 | Verify      |
|-------|-----------------------------|-------------|
|       | Ace Inhibitors              |             |
| ⚠     | Acetaminophen               |             |
|       | Acetazolamide               |             |
|       | Acetylleucine               |             |
|       | avobenzone                  |             |
|       | Beeswax-Allergen-Ingredient |             |
| ?     | butter                      | Unconfirmed |
|       | Flexeril                    | Unconfirmed |
|       | Gluten                      | Confirmed   |
|       | No Known Drug Allergies     |             |
| ?     | Pollen                      | Confirmed   |

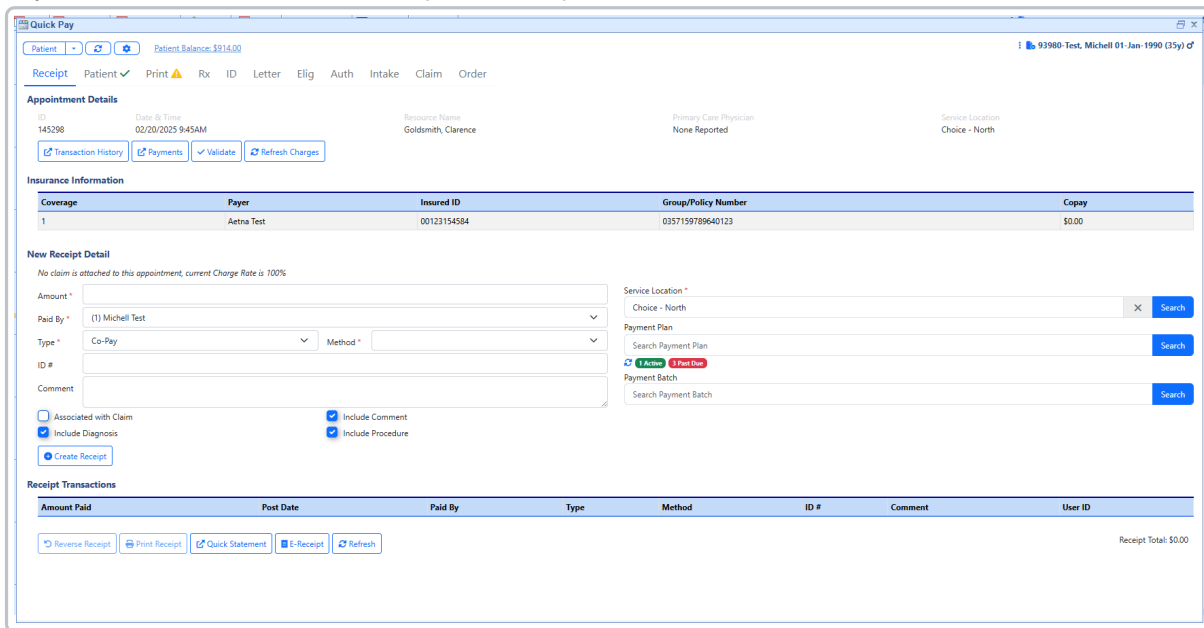
- **U19174: USCDiv3 Add new fields to Problem List Edit Problem Screen:** Added a new Verification Status field to the Problem List screen to support the United States Core Data for Interoperability V3. This optional field allows users to set a Problem Verification Status, maintaining this new data element in the audit record.

The screenshot displays the EMR interface with the 'Edit Problem' window for 'Acute frontal sinusitis'. The 'Verify' dropdown menu is open, showing options: Unconfirmed, Confirmed, Provisional, Differential, and Entered-in-error. The 'Logging Information' window shows a record for 'Verify (U): Acute frontal sinusitis' with a status change from '0' to '2' (Confirmed).

# iScheduler

## Quick Pay Window

- **U19374: New Quick Pay Window Launch:** As part of our ongoing efforts to modernize the platform, we have created a new Quick Pay window, which has been utilized over the last several months on the Check In/Out dashboard. As part of this release, we will be pushing out the new Quick Pay window to the remainder of the system. The below Quick Pay window is the new window that will be accessed when accessing Quick Pay from the iScheduler, Patient Setup, and Receipts.

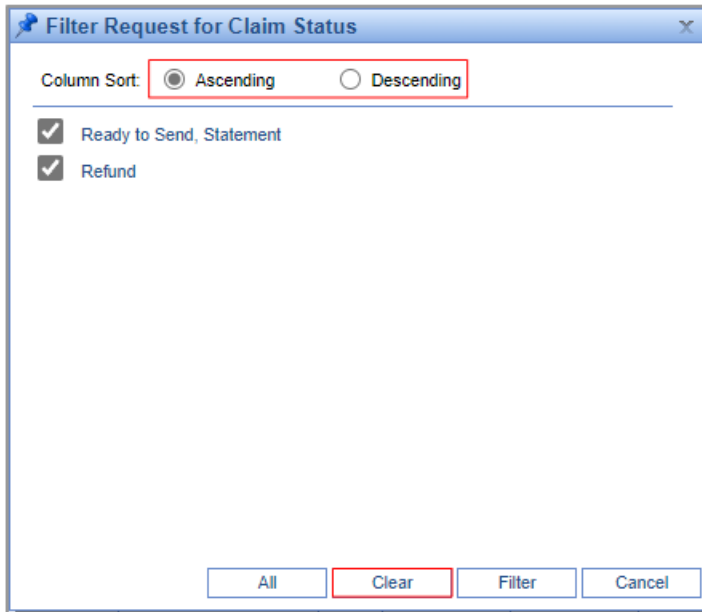


# Bug Fixes

## Billing

### Claim Query

- **B19403 - Claim Query Filters Issues:** Corrected an issue affecting the claim query filters where, once a filter was applied, the clear button would be missing under certain circumstances. We also resolved an issue in which the Sort toggle would automatically switch between Ascending and Descending, as well as the Filter display not showing in ascending order when results are displayed on a single page. We have modified the code so that the ascending/descending order is maintained for the last item sorted, as well as to correctly sort the data when there is a single page and to ensure the clear button is visible in all scenarios.



### Claim Submission

- B19449 - Institutional Claims With Medicare as Secondary Failing 837 Validation For MSP Reason: Resolved a coding issue that could cause the 837 database validation to fail when Medicare is secondary on an institutional claim due to the MSP (Medicare Secondary Payer) reason, even though the MSP reason is not applicable on institutional claims.

### Deposits

- B19430 - Deposit Posting Not Showing Deposit Claim Error For Unlinked Procedures: Corrected an issue where the deposit posting did not show errors when the procedure from the ERA was not linked to a procedure line on the claim. We have resolved this so that whenever we cannot link the ERA procedure to a claim procedure, a deposit claim error for a missing procedure is generated.

### Receipts

- B17829 - Receipt Not Being Flipped to Error Status After Hold Date: Corrected an issue where receipts that were not fully applied were not changing to an error status after the hold date expired. This was resolved by updating the receipt logic to flip receipts that have not been fully applied by the hold date to an "Error" status the day after the hold date.
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