Release 25.146 - November 20, 2025

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New features | Enhancements | Resolutions

Highlights

New Features

SMART on FHIR Application Manager Updates

New Audit Added to the Claim Comment Window

Enhancements

New Preferred Pharmacy Letters Quick Picks

New PDF Print Layout Quick Pick

Updated Save & Next to Follow Result Processing List Items

Claim Query "Modify Claims" Window Enhancements

Patient Appointment List Screen Modernization

Coming Soon

CCDA Updates Coming in December

To comply with **USCDI v3**, we'll be updating CCDA documents in our December release. These changes are designed to be backward compatible; however, we recommend that practices confirm with any third-party integrations to ensure readiness for consuming USCDI v3 CCDA updates.

New features

SMART on FHIR Application Manager Updates

U20505: The SMART on FHIR Application Manager has been modernized to give practices greater control and visibility over integrated app configurations. Administrators can now document and display key app details such as Description, Citation, Developer, Funding Source, Release, Guide URL, and Additional Source Attributes, directly within the EMR's App Directory. This update not only fulfills ONC HTI-1 SMART on FHIR compliance requirements but also lays the foundation for enhanced interoperability and future app integration across healthcare systems.

Learn more here.

SMART on FHIR practice App Display
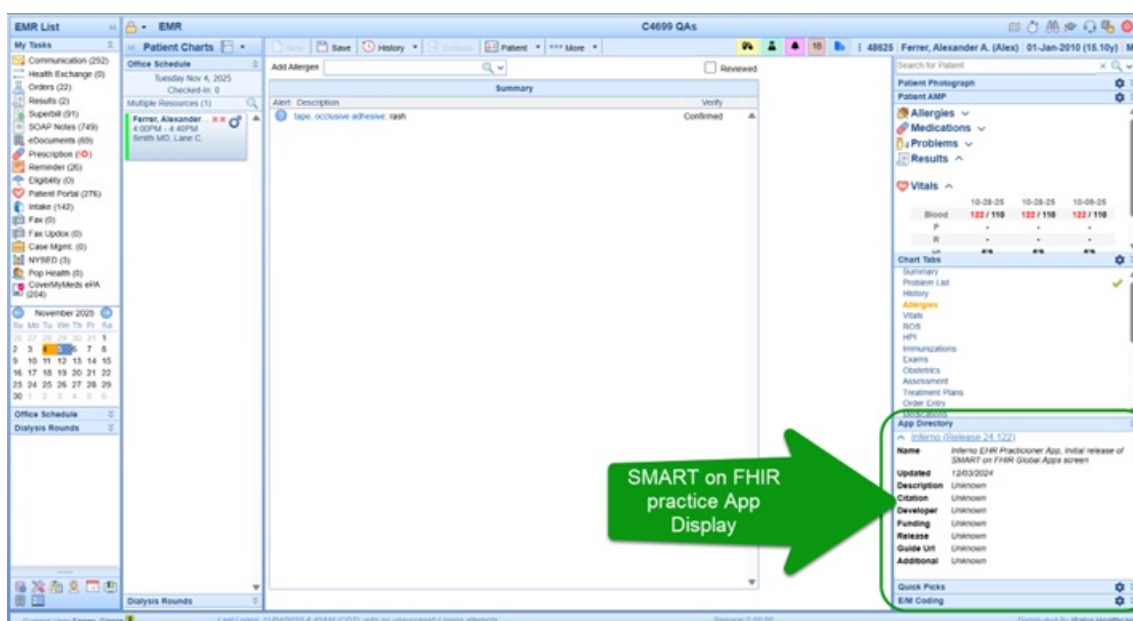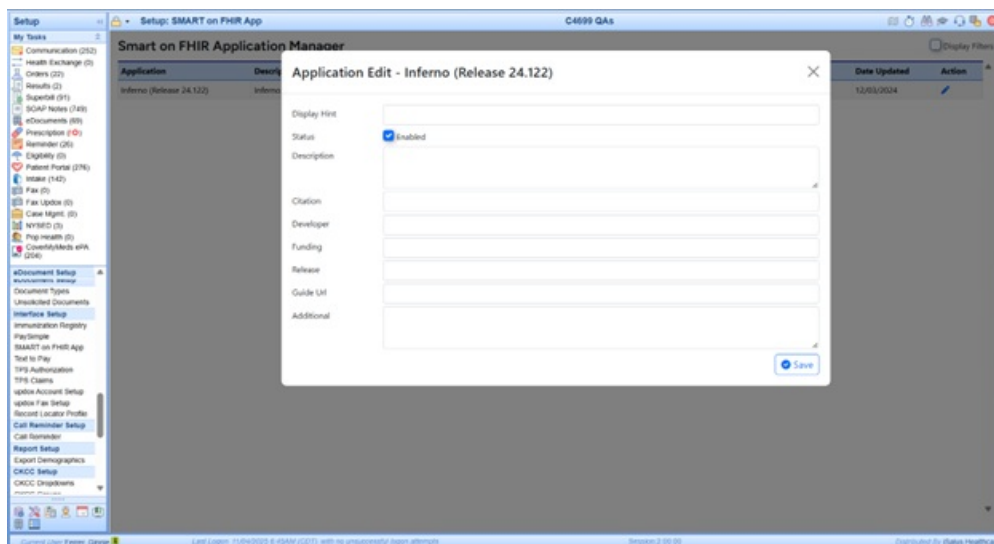
Added Audit to the Claim Comment Window

U20137: Previously, claim comment audits were only accessible through the Security Audit report. This release introduces an audit option within the Claim Comment window, enabling users to view additions and modifications to claim comments. A new gear icon, located in the upper right corner of the Claim Comment window, now provides both an Audit option and a Company option for managing claim comment company settings.

Enhancements

New Preferred Pharmacy Letters Quick Picks

U17262: Four new quick picks have been added to the Setup > Letters screen to pull in a patients preferred pharmacy information. These Letter Quick Picks allow users to insert the patient's preferred pharmacy in multiple display formats. By surfacing the preferred pharmacy directly within letters, users can work more efficiently without navigating menus to manually look up pharmacy information. The new letter quick picks are:

Quick Pick Name	Description & Display Example
Patient Preferred Pharmacy Name	This quick pick shows the patient's preferred pharmacy as a comma separated list. **Patient Preferred Pharmacy Example:** Pharmacy1 (NCPDP#), Pharmacy2 (NCPDP#), Pharmacy3 (NCPDP#), ….
Patient Preferred Pharmacy List Name	This quick pick shows the patient's preferred pharmacy as a bulleted list **Patient Preferred Pharmacy Example:** • Pharm1 (NCPDP#) • Pharm2 (NCPDP#)
Patient Preferred Pharmacy Details	This quick pick shows the patient's preferred pharmacy as a comma separated list with details **Patient Preferred Pharmacy Example:** Pharm1 (305-324-8811 at 3344 Royal Blvd, Palm Beach Fl), Pharm2 (423-555-1212 at 515 Brainerd Rd, Chattanooga TN), Pharm3 (954-555-1212 at 3123 Broward Blvd, Ft. Lauderdale FL),….
Patient Preferred Pharmacy List Details	This quick pick shows the patient's preferred pharmacy as a bulleted list **Patient Preferred Pharmacy Example:** • Pharm1 (305-324-8811 at 3344 Royal Blvd, Palm Beach Fl) • Pharm2 (423-555-1212 at 515 Brainerd Rd, Chattanooga TN) • Pharm3 (954-555-1212 at 3123 Broward Blvd, Ft. Lauderdale FL)….

Letter Template Name: Dialysis Visit Note

Letter Type: Dialysis

Advanced ↓

Expressions   Row 0 of 452

263 <<Patient His/Her(cap)>>
264 <<Patient His/Her/Their(cap)>>
265 <<Patient his/her/their>>
266 <<Patient his/her>>
267 <<Patient Immunizations>>
268 <<Patient Last Name>>
269 <<Patient Marital Status>>
270 <<Patient Middle Initial>>
271 <<Patient Middle Name>>
272 <<Patient Neck with Units>>
273 <<Patient Neuro consult>>
274 <<Patient New Eval>>
275 <<Patient Nick Name>>
276 <<Patient Nick-First Name>>
277 <<Patient On Exam>>
278 <<Patient Phone Home>>
279 <<Patient Phone Other>>
280 <<Patient Phone Work>>
281 <<Patient Phone>>
282 <<Patient Preferred Pharmacy Details>>
283 <<Patient Preferred Pharmacy List Details>>
284 <<Patient Preferred Pharmacy List Name>>
285 <<Patient Preferred Pharmacy Name>>
286 <<Patient Race>>
287 <<Patient Respirations Minute>>
288 <<Patient SSN>>
289 <<Patient State>>
290 <<Patient Suffix>>
291 <<Patient Temperature>>
292 <<Patient User Defined>>
293 <<Patient Waist with Units>>
294 <<Patient Weight Ounces>>
295 <<Patient Weight>>
296 <<Patient Zip>>
297 <<PCP Address>>
298 <<PCP City State Zip>>
299 <<PCP Fax>>
300 <<PCP First Name>>
301 <<PCP Last Name>>

Dialysis Visit Note

Visit Date: <<Dialysis Patient Visit Date>>

Event: <<Dialysis Event>>

Modality:
<<Dialysis Modality>>
<<Dialysis Patient Visit Modality Short>>
<<Dialysis Patient Visit Modality Long>>

Dialysis Visit Comp. Indicator: <<Dialysis Patient Visit Comprehensive Indicator>>

Visit Count: <<Dialysis Current Month Visit Count>>

Location:
<<Dialysis Location Name>>, Shift: <<Dialysis Shift>>
<<Dialysis Patient Visit Location Address 1>>
<<Dialysis Patient Visit Location Address 2>>
<<Dialysis Patient Visit Location City>>, <<Dialysis Patient Visit Location State>> <<Dialysis Patient Visit Location Zip>>
Phone: <<Dialysis Patient Visit Location Primary Phone>>
Fax: <<Dialysis Patient Visit Location Primary Fax>>

 Dialysis Visit Comments: <<Dialysis Patient Visit Comments>>

<<Template.111755.756369>>

<<Dialysis Patient Visit Provider>>

New PDF Print Layout Quick Pick for User

U20371: Added new **PDF Print Layout Quick Pick** option has been added to allow practices to include the name of the user who printed any PDF-based document. The new quick pick is #user# This enhancement brings PDF Print Layouts into alignment with existing functionality in Letters, Requisitions, and SOAP Notes, where the printed-by user name is already supported. The feature is especially important for clients participating in funded clinical research, where documentation standards require clear identification of the individual printing study-related materials. This update improves compliance, strengthens audit traceability, and ensures consistent user-identification across all printable formats.

Updated Save & Next to Follow the Result Processing List Items Displayed

U17811: We made an update to the Result Processing so that the "Save & Next" option will follow the order of items in the task results list (displayed on the left side) and bypass any "additional pages" until they appear within the "Results to Review" list. This addresses previous confusion caused by the system not progressing sequentially through the "results to review" when multiple pages were associated with a single result. In this release, we removed the code that caused it to moved users to the next page. Users can still manually navigate between pages using the page count controls when desired. This enhancement ensures a smoother, more consistent review process by preventing skipped results and reducing the need to scroll or refresh thus improving efficiency.

Learn more here.

Claim Query "Modify Claims" Window Enhancements

U13678: This release introduces several enhancements to the "Modify Claim" window, accessible via the Claim icon within the Claim Query screen. This window facilitates the modification of claim values for multiple claims simultaneously. The current release expands upon existing functionalities by incorporating multiple new options.

The new options:

- **POS** - This option allows users to modify the POS which updates all procedure lines for the selected claims.

- **Supervising Provider** - This option allows users to assign a supervising provider to the selected claims.

- **Ordering Provider** - This option allows users to assign an ordering provider to the selected claims.

- **Claim Comments** - This field allows users to add a claim comment to the selected claims.

For more information on modifying multiple claims at once, Click here.

Added Patient Nickname to Patient Name in Claim Account Query

U14040: The patient's preferred name (nickname) has been added to the Patient Name display in the Claim Account Query to facilitate patient identification, similar to the iScheduler patient search. With this update, the patient's preferred name will appear in parentheses within the Patient Name display in both the Claim Account Query and the Claim Query window.

Added Recall Search Total Patient Count & Selected Patient Count to Search Recall Screen

U15860: The Total Patient Count and Selected Patient Count were previously removed from the iScheduler's "Recall Search" during the screen's revamp. This count was originally displayed above the column headers. In this release, this data has been reinstated due to its utility in office workflows. The data will now be displayed in the lower-left corner of the results, above the action buttons, mirroring the location used in other reports such as the appointment report.

Claim Query - Advanced Search Claim Substatus Sort Order Grouping Update

U16461: The Claim Query Advanced Search Substatus List was previously sorted alphabetically, without regard for any Substatus grouping. In this release, we updated the sort order to now list the Substatus based on grouping, followed by alphabetical order.

Patient Appointment List Screen Modernization

U20633: In this release, we enhanced our existing Patient Appointment List screen. We modernized it with a Vue design and improved functionality by adding advanced filters for Resource, Location, Status, and Type, as well as new sort options. This makes the screen more visually appealing, functional, and easier to use for reviewing appointment history, checking statuses, and managing upcoming visits.

Learn more here.

New Eligibility Check Warning for Differing Member ID's On 271 & 270

U19869: A warning was implemented for eligibility checks when the 271 response contains a different member ID than the 270 request. This can occur when an insurance provider confirms active coverage but supplies an alternate member ID in the response. If this discrepancy is not identified, any submitted claims are subsequently denied due to an invalid member ID. In this release, code was added to compare the member IDs from the 270 request and 271 response, and a warning is now displayed in both real-time and batch eligibility screens when the member IDs do not match. We also updated the printable view to display warnings where applicable.

Added USA Flag to Icons List on Patient Flags

U19880: In this release, we added the American flag icon to the Patient Flags section, allowing users to assign it to patients (e.g., patients with VA insurance). This USA Flag option is located within the Setup portal > Patient Flags.
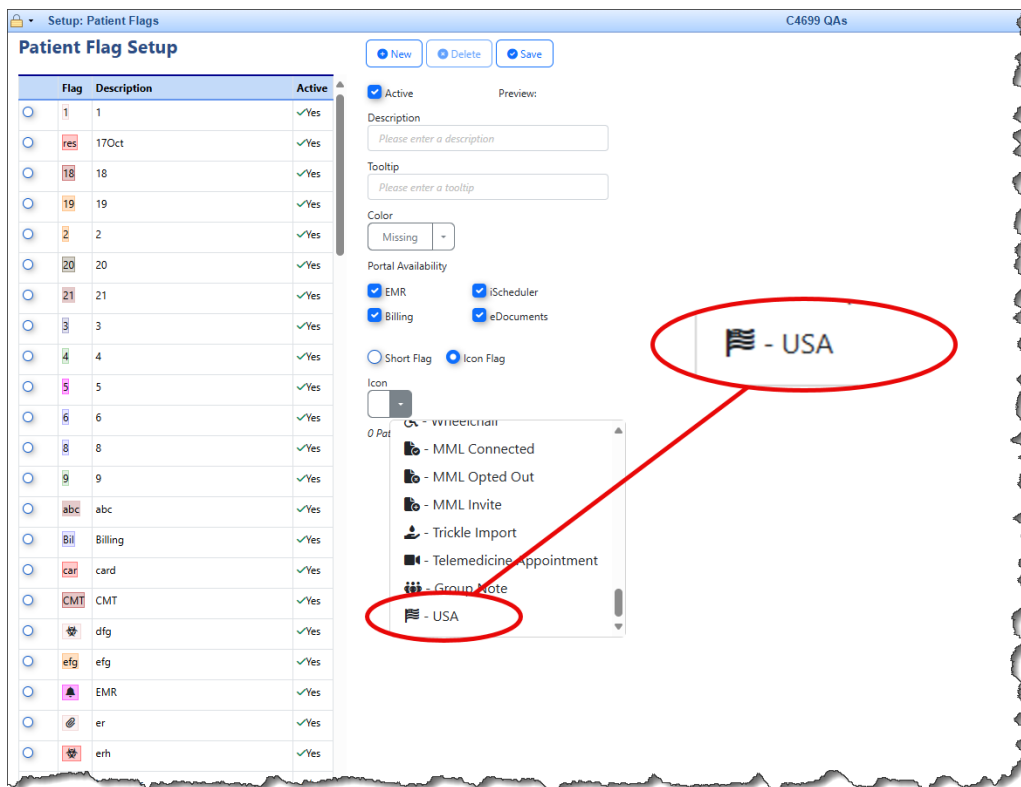
New Notification for Un-synced System Clock

U17491: A system check and notification have been added for users logging into the application with an un-synced system clock. An un-synced device clock can cause system issues, so we added support for notifying users if their system clock is more than two minutes out of sync. This will now notify the user and direct them to sync their clock before logging in to prevent any issues.
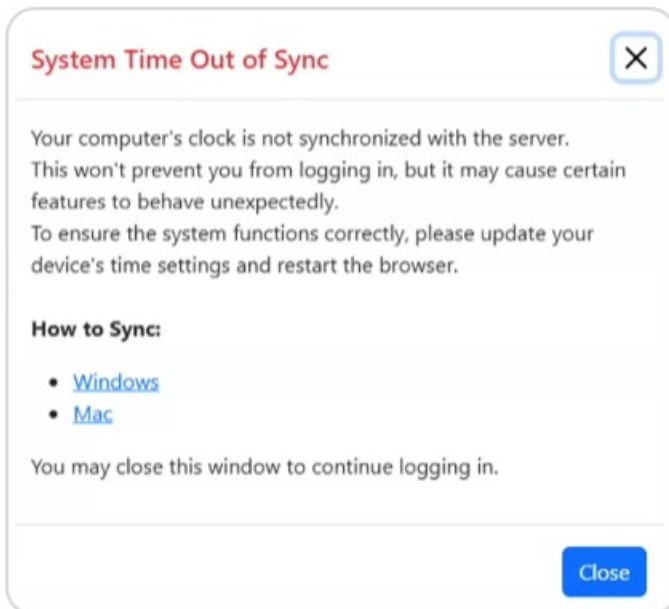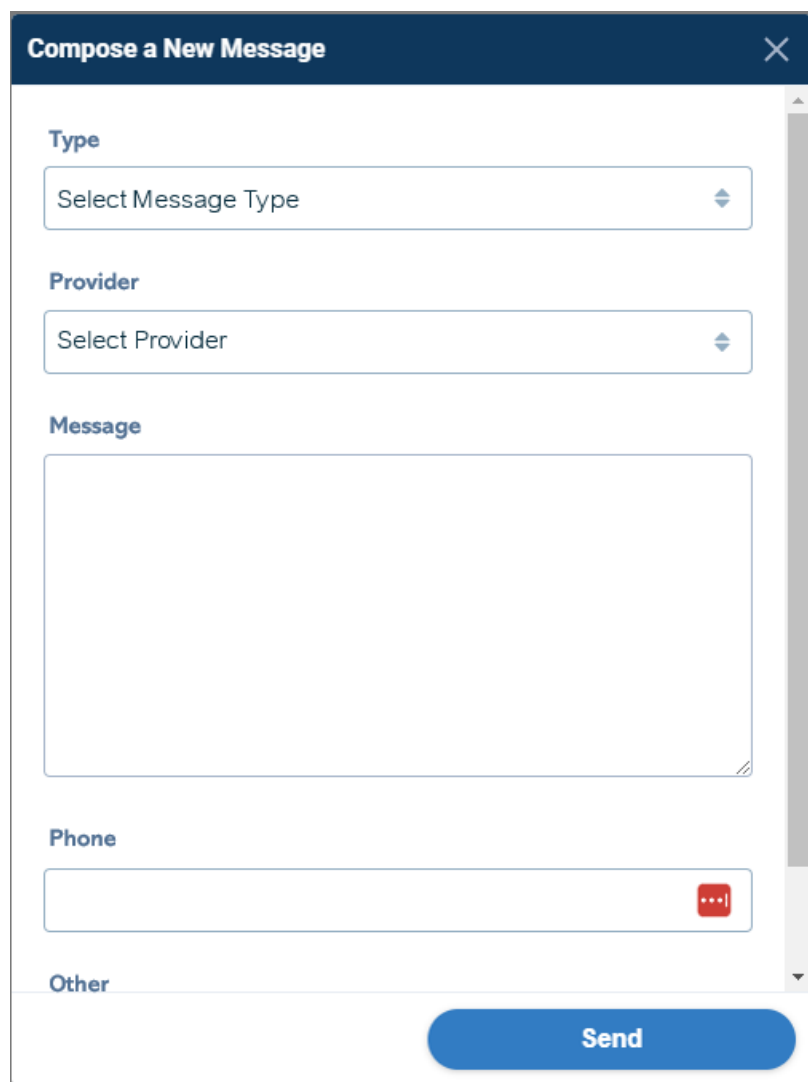
New Password Expiration Notification

U20150: To help notify users of an upcoming password reset, we implemented a new notification message. This

notification will inform users that their password will expire and they need to reset their password in 7, 5, 3, 2, or 1 day(s). The message will be displayed as a toast notification upon successful login to OfficeEMR.

Removed Defaults when Composing a Message in MML

U17272: Previously, in MyMedicalLocker, when a patient wrote a message to the practice, the "Type" and "Provider" fields were already defaulted, often leading to an incorrect message routing. In this release, to ensure appropriate message routing, when the "Compose a New Message" screen loads, these defaults have been replaced with a prompt requiring the patient to select the Type and Provider (required fields). The "Content" field was also modified to "Message."

Resolutions

EMR > Timeline > Wrong Patient Note Intermittently Displays when accessing SOAP Note from Patient Timeline

B20526: Corrected an issue reported by a client where, on rare occasions, accessing SOAP Notes via the **EMR > Timeline** intermittently displayed the wrong patient note in the UI. This release implements validation in two areas to confirm that the correct chart number is associated with the viewed note. This validation now occurs both when the timeline loads and again when a user selects a SOAP Note from the timeline. If a mismatch is detected, a warning message is displayed, instructing the user to reset the EMR and try again. The data is then cleared so that previous information is not displayed.

PDMP - 404 Errors Reported

B19934: Resolved a reported issue with PDMP requests where the remote server returned a (404) Not Found error when requesting PMP results. This was reported by multiple clients (behind old_code_use). We applied a fix that included required TLS/Certificate updates due before the end of 2025.

Scanning - Dynamsoft Service Install Issues

B20846: Users within the last couple of weeks were experiencing issues where they could not scan because attempting to do so was blocked by a prompt to install Dynamsoft (despite already being installed). This issue was related to Chromium v142+, which introduces a new Local Network Access security policy requirement. Requests for loopback addresses are now blocked unless the user or an admin policy explicitly grants access. Because Dynamic Web TWAIN communicates with a local service, these restrictions can prevent normal operation, causing the reported behavior of getting stuck in an install loop. Use the learn more link below for details on the issue, including steps to resolve for affected users manually or via network policy.
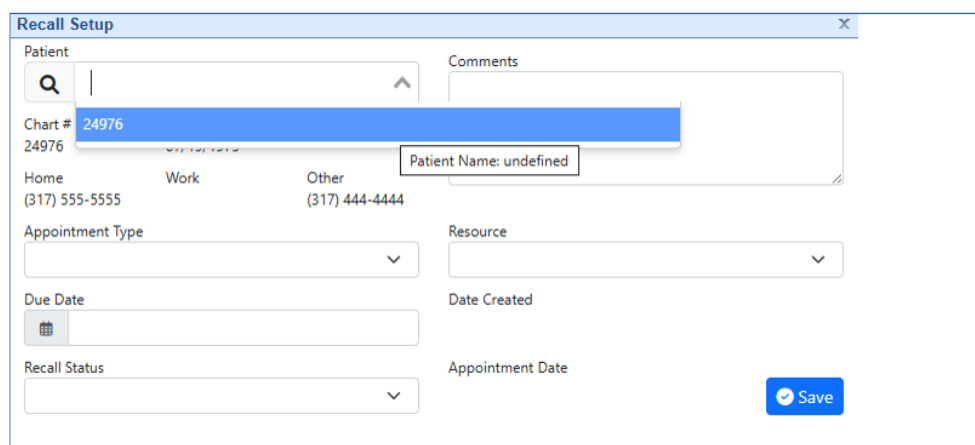Learn more here.

Claim Entry Remains Greyed Out When The Patient Setup > Insurance Is Opened

B20768: Resolved an issue where accessing the Patient Setup -> Insurance tab from a claim by clicking "Primary" caused the claim entry window to remain grayed out even after closing the Patient Setup window.
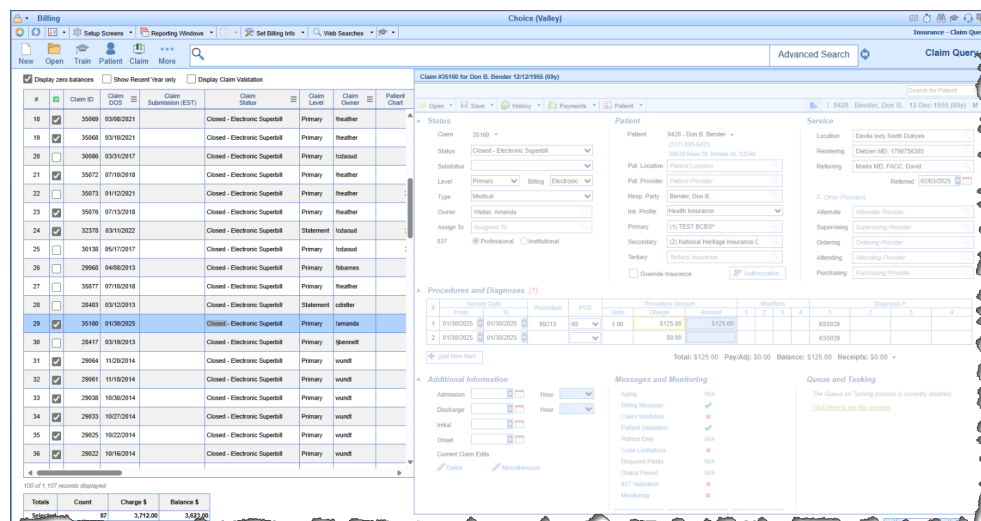
Add Recall List From Patient Appointment Not Displaying Patient Name

B20560:Corrected an issue where, when adding a patient to the recall list from an appointment, the patient's chart number and details were displayed, but their name was not. Additionally, the hover-over feature for the patient name search dropdown showed "undefined."

Quick Pay Screen Receipt Transactions Not Refreshing After Taking a Credit Card Payment

B20769: Corrected an issue on the QuickPay window where, after a credit card payment was taken and the credit card screen was closed, the Receipt Transactions were not refreshed to reflect the payment.

Monthly Financial Report Duplicating Providers and Not Yielding Results on Drilldown

B20636: Corrected a database issue where running the Monthly Financial report for a month, grouped by Rendering Provider without a subgroup, resulted in duplicate rendering providers. This occurred because the system did not correctly handle scenarios with a single groupBy and no secondary one. Code was added to resolve the empty drill-down and the display of duplicate provider names.

Provider Zip Code Search Varchar Error

B19642: Resolved an issue in the Provider Search window where the Zip Code search field, located under Advanced Search, produced an error when used as a search parameter. To resolve this, the control type was changed to match the zip code's requirements. The same change was applied to the location search, as it was similarly affected.
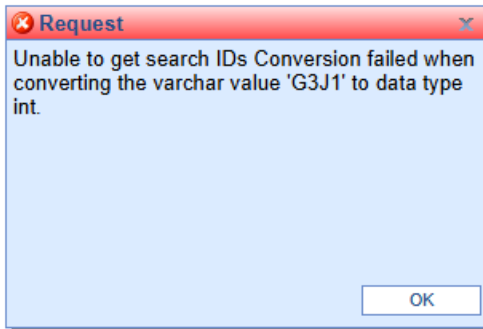
MML Payment History Reflecting Duplicate Payments for a Single Receipt

B20417: Corrected an issue where, in MML, the Payment History reflected patient payments multiple times when applied to multiple procedures. For example, if a patient paid $5.00 via MML and the receipt was applied to two different procedures on the same claim ($2.50 on each), the MML Payment History would reflect two $5.00 payments. The code was updated to pull the amount from the payment table, and not from the payment_id.

MML Billing - Estimate History Not Displayed For Practices W/O PaySimple Feature

B20489: Corrected an issue within the MML under Billing where the Estimate History and Payment History tabs were not displayed if the practice connected to the patient did not have the PaySimple feature enabled. To resolve this, these two history sections were added to the non-PaySimple template.
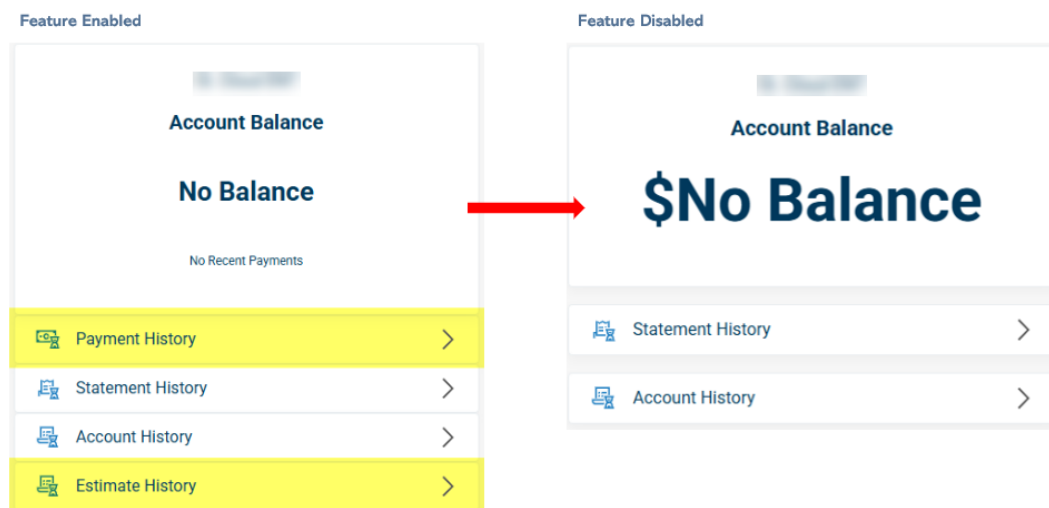
Intelligent Intake - Reminder Texts Received Without A Link

B20771: Corrected an issue within the intake reminder process that caused Intelligent Intake messages to be sent to patients without an included link. Code was added that will now verify a link exists and is always included

before sending the message.

REMINDER: Complete your
medical forms before your
upcoming visit with ███████ ██
███████. You can access your
Intelligent Intake by clicking on the
link: ..▆▆▆▆▆▆▆▆▆▆▆

Message and data rates may
apply. Text HELP for support or
STOP to opt-out.

As part of this release, we are continuing our ongoing work to assess, monitor, and address any security vulnerabilities.