Release 26.168 - September 10th, 2026

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Ability to Add Multiple Recall Entries for a Patient in EMR
Problem List Notes now support rich text formatting for improved visibility

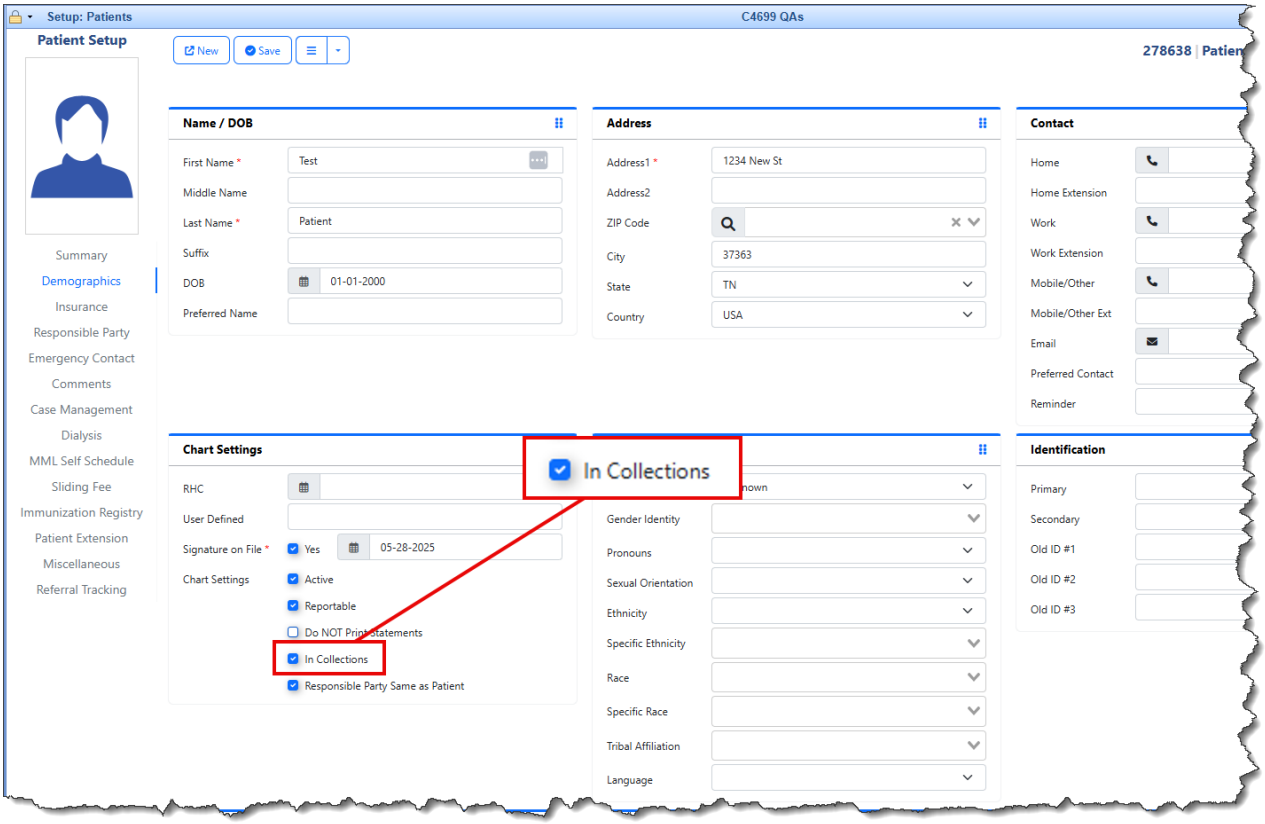
New features

New "In Collections" Alert for Patients

ISL- 6877: Practices needed a way to flag patients who are in collections status so staff are immediately aware, regardless of which screen or portal they're working in. In this release, a new **"In Collections"** flag has been added to Patient Demographics, located under the existing "Do NOT Print Statements" flag. When enabled, this flag triggers a collection alert that displays anywhere the patient is loaded, including:

- Patient/Claim Comments
- Scheduler
- EMR
- Superbill Chart Tab
- Order Entry Chart Tab

This works similarly to the existing RHC alert, When the "In Collections" flag is checked, an alert displays: "This patient is currently in collections with a balance of $xx.xx." The alert includes the user who set the flag and the date, consistent with RHC alert behavior. If the flag is subsequently unchecked, the alert will cease to display as of that date.



For more information on these settings, visit our Patient Demographics Tab Article.

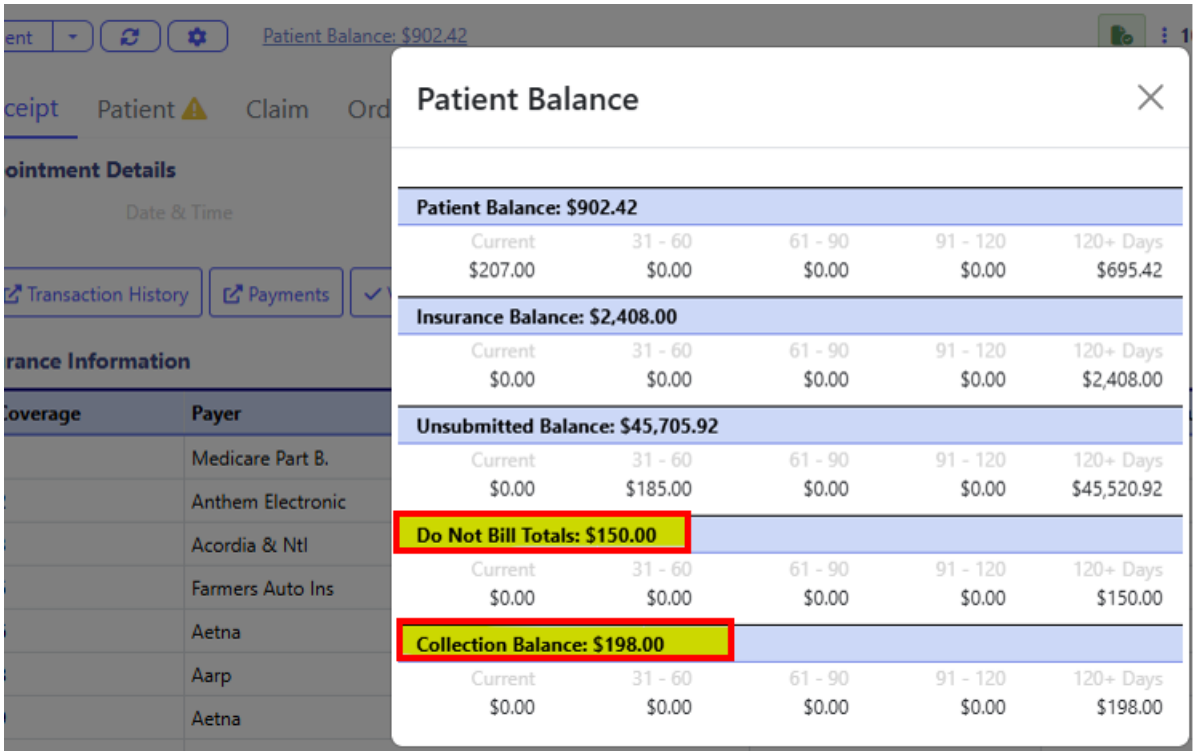
Enhancements

Collection Balance Now Displayed Separately from Do Not Bill Balance

ISL- 5071: Previously, claims with a Collection Status were grouped together with other Do Not Bill balances, making them effectively invisible to front desk staff. For practices that don't write off balances sent to collections, this meant staff had no easy way to see the amount still owed when a patient reached out or came into the practice. In this release, Collection balances are now separated out from the **Do Not Bill Balance** and displayed as their own distinct, aged balance line item.

Where You'll See This

- **Claim Account Query:** A new **Collection Balance** column has been added, reflecting claims where the claim status has a Collection Indicator set to "Y." The existing Do Not Bill Balance now reflects only claims where the Collection Indicator is set to "N."
- **Patient Setup:** A new **Collection Balance** section has been added under Balance Display, shown in aging just like other current balances.
- **Quick Pay:** Uses the same Collection Balance display and functions the same way as in Patient Setup.



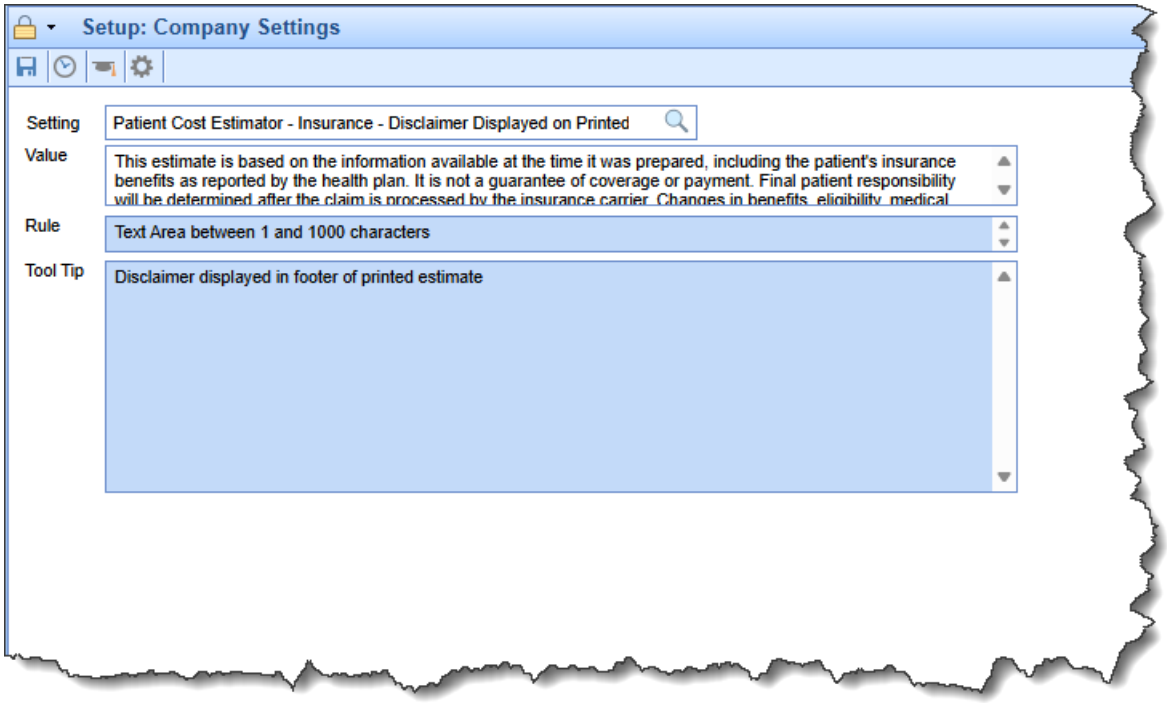
For more information, visit our Claim Account Query Screen Article.

New Company Setting: Separate Cost Estimate Disclaimers for Insured vs. Self-Pay Patients (with Increased Character Limit)

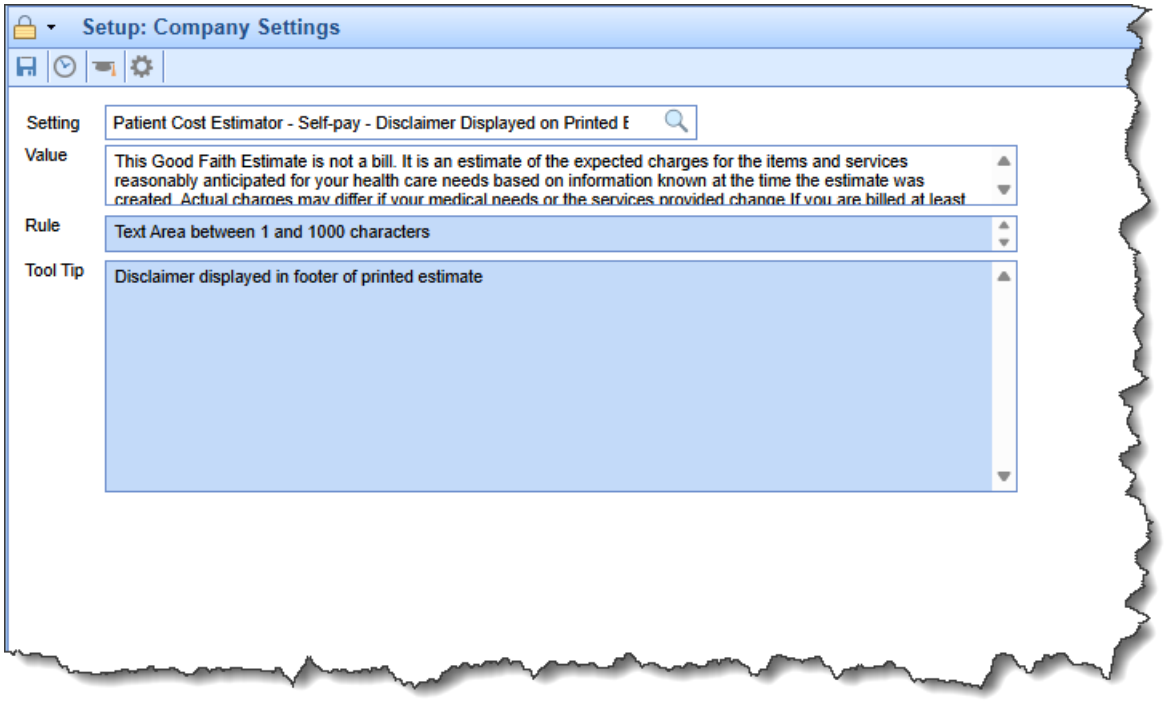
ISL- 14207: Insured and self-pay patients often require different disclaimer language. For example, self-pay patients typically need Good Faith Estimate language referencing the federal dispute resolution process, while insured patients need disclaimer language addressing insurance benefits and final claim processing. Previously, only one disclaimer setting was available, and its character limit (600 characters) was too short to accommodate the full text some practices needed.

With this release, Cost Estimates now support two separate, configurable disclaimers depending on whether the patient is insured or self-pay. With these new Company Settings, when generating a Cost Estimate, the system will now automatically detect whether the patient is insured or self-pay and pull the correct disclaimer accordingly:

- **"Insurance - Disclaimer Displayed on Printed Estimate"** — previously the single "Disclaimer Displayed on Printed Estimate" setting, now relabeled to clarify it applies to insured patients.



- **"Self-Pay - Disclaimer Displayed on Printed Estimate"** *(new)* — a separate setting specifically for self-pay patients, such as those receiving a Good Faith Estimate.



Upon rollout, your existing disclaimer text has been automatically copied into the new Self-Pay disclaimer Company Setting as a starting point. We recommend reviewing and updating both the **Insurance** and **Self-Pay** disclaimer settings to ensure the language is appropriate for each scenario.

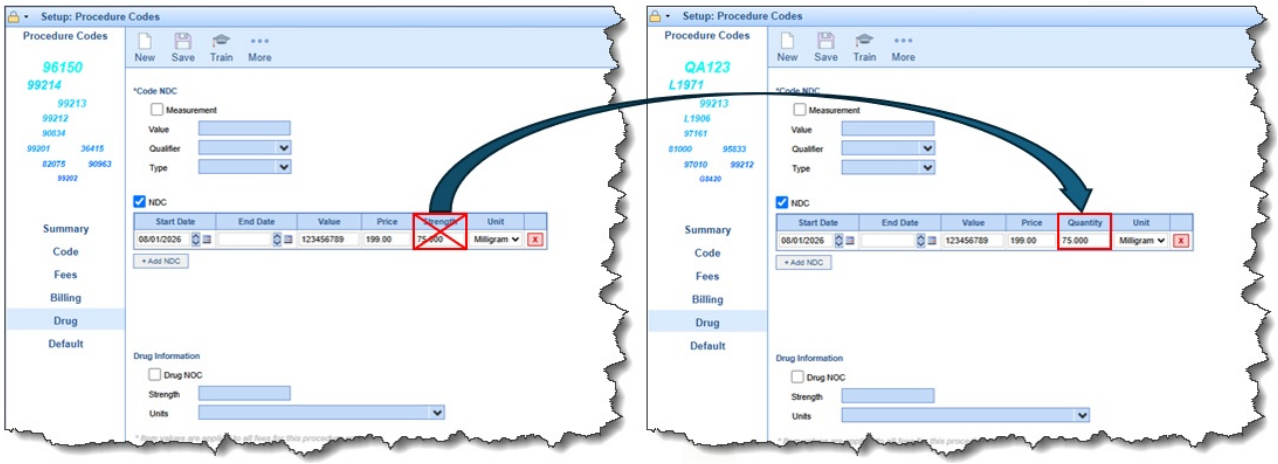
Additionally, the character limit for these disclaimer settings has been increased, allowing for longer, more complete disclaimer language such as the full Good Faith Estimate language required under the No Surprises Act.

For more information, visit our Insurance Disclaimer Displayed on Printed Estimate and Self Pay Disclaimer Displayed on Printed Estimate Articles.

Label Update: "Strength" Renamed to "Quantity" in Procedure Code Setup NDC Table

ISL- 14119: Within **Procedure Code Setup → Drug tab → NDC table**, the field previously labeled **"Strength"** has been renamed to **"Quantity."** This label update better reflects what the field actually represents, making it clearer and more accurate for users entering NDC information.

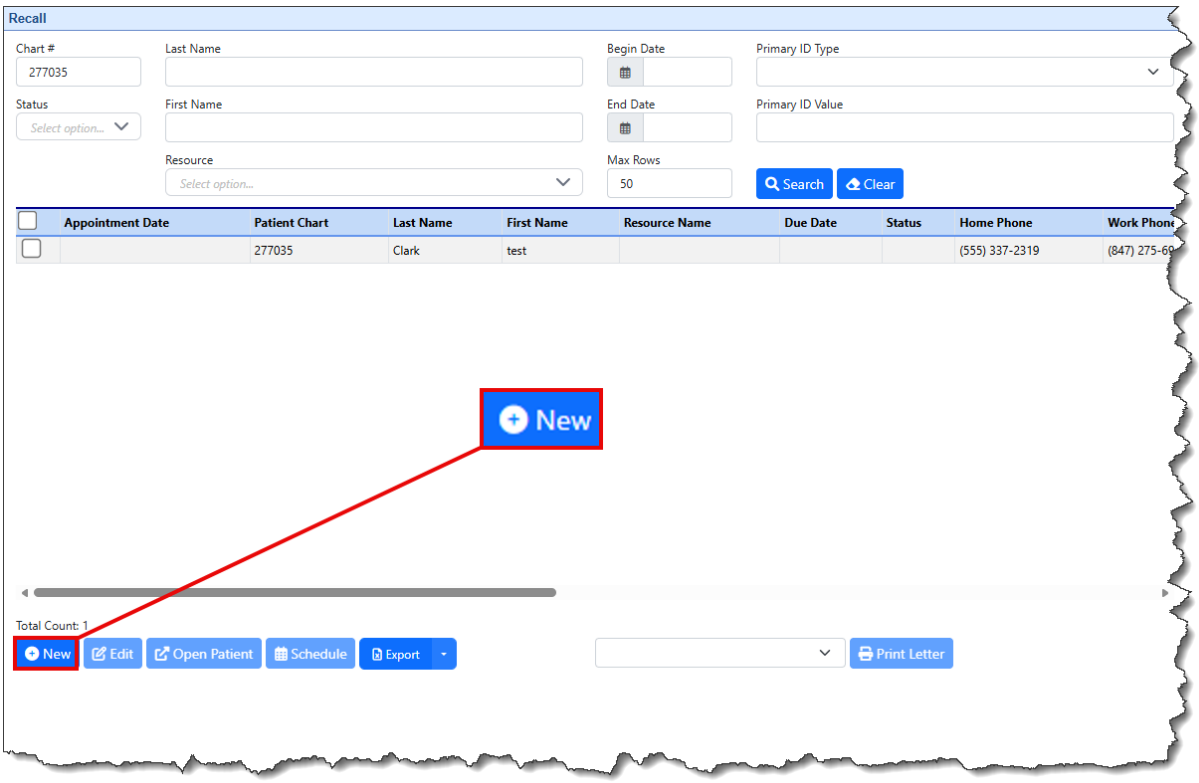
This is a labeling change only so no data, values, or functionality have changed. You'll simply see "Quantity" instead of "Strength" in this field going forward.



For more information, visit our Add NDC Number to Procedure Code Article.

Ability to Add Multiple Recall Entries for a Patient in EMR

ISL- 4299: Previously, adding a recall entry in the EMR would clear any existing entry, since only a single recall entry was supported. The functionality to do this already existed in iScheduler, so in this release the EMR Recall Setup window has been replaced with the modernized **iScheduler - Recall Setup** window, and now includes a **New** button, allowing you to add multiple recall entries for a single patient directly from the EMR.



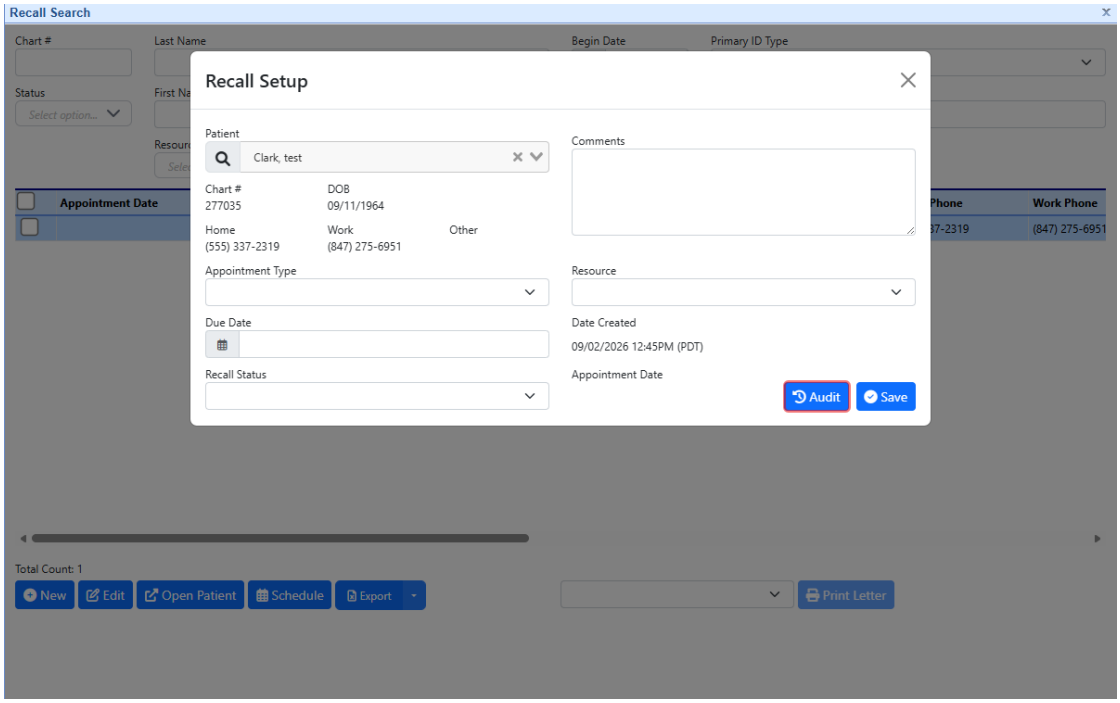
Improvement: Recall Search in iScheduler Now Supports Partial Name Matches

ISL- 3001: Searching for a name in Recalls would previously only return an exact match. For example, searching for "Johns" would return a patient with the last name "Johns," but would not return a patient with the last name "Johnson." With this release, the Recall search in iScheduler now returns results for any name that **contains** the entered search text, rather than requiring an exact match. This ensures searches return all matching results, making it easier to find the recall you're looking for.

Security Audit Added to Recall Setup

ISL- 7684: Previously, there was no way to see who created or modified a patient's Recall Setup, or when those changes were made. The **Recall Setup** screen now includes a security audit log, accessible via a new "Audit" button next to the save button at the bottom of the screen. The audit log tracks when a Recall was created, and adds visibility and accountability by logging changes to key fields such as:

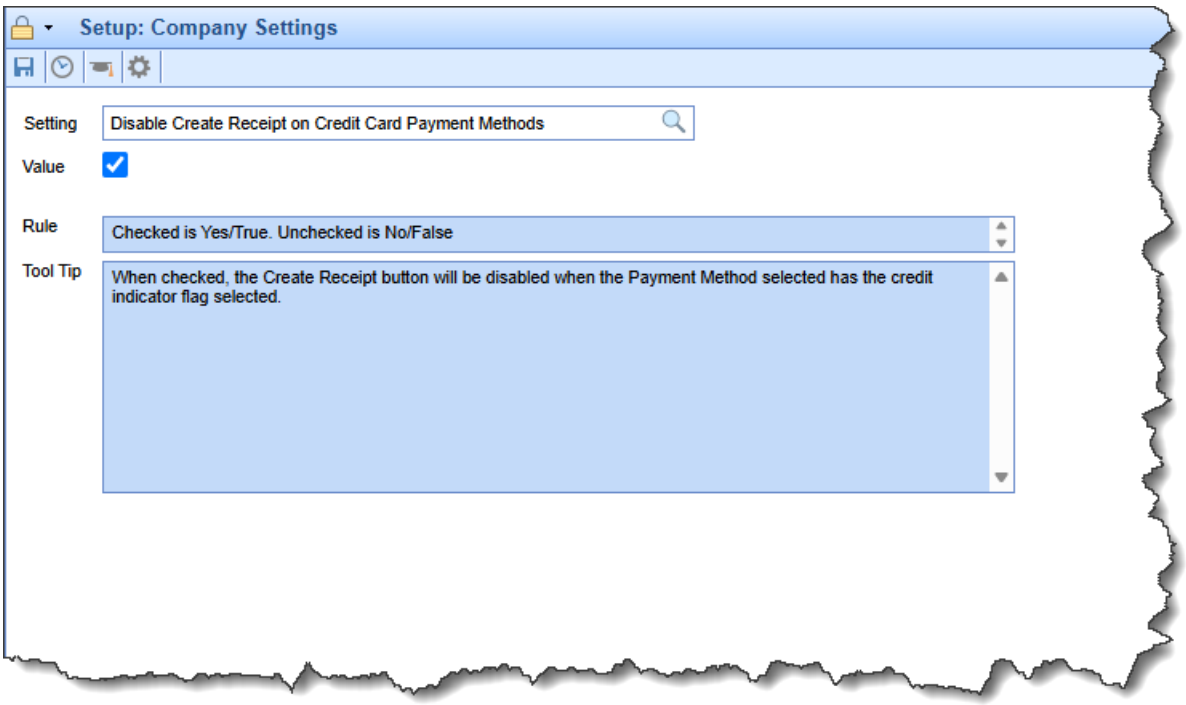
- Appointment Type
- Due Date
- Recall Status
- Comments
- Resource



New Setting to Disable "Create Receipt" for Credit Card Payment Methods in Quick Pay

ISL- 7690: Some users were mistakenly clicking **Create Receipt** instead of **Take Payment** or **Text to Pay** when processing a credit card payment (often out of habit). This could require reversing the receipt to properly process the credit card payment, or in some cases, result in the credit card payment never being run at all, since the receipt made it appear as though payment had already been collected.

To prevent this, a new company setting has been added: **"Disable Create Receipt on Credit Card Payment Methods."** When enabled, this setting disables the **Create Receipt** button in the Quick Pay window whenever a Payment Method with the Credit indicator flag is selected.

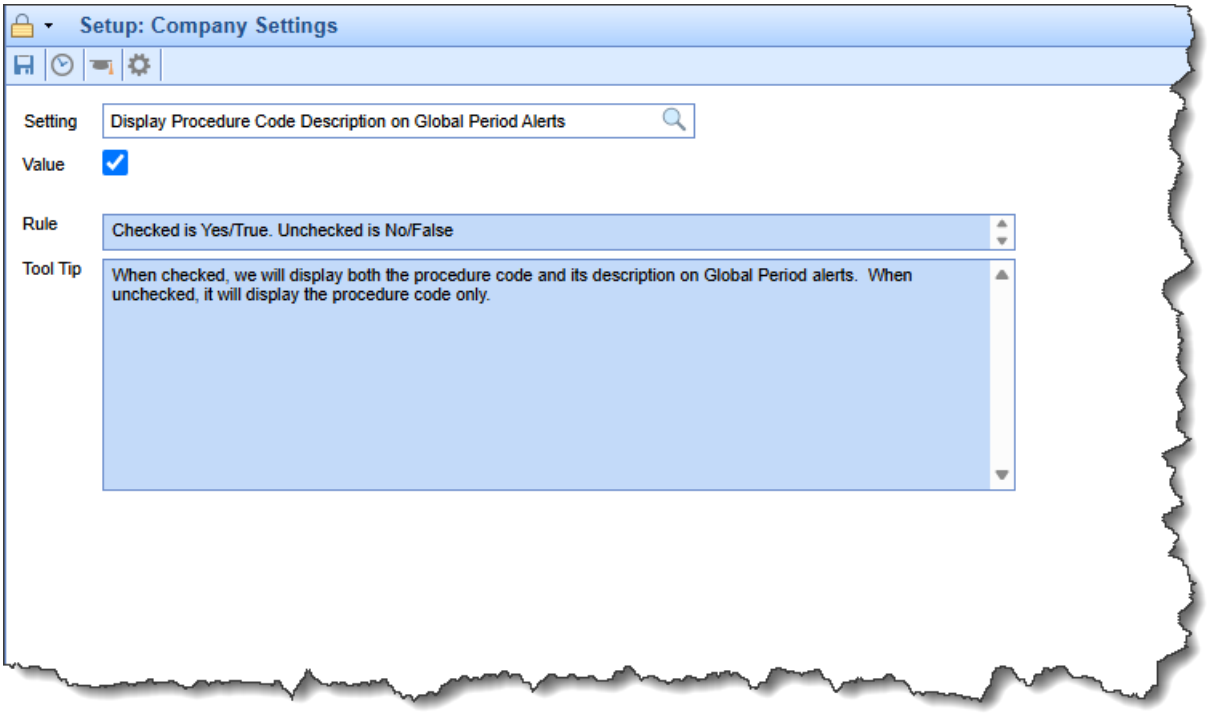


This setting is **disabled by default**, so your existing Quick Pay workflow will remain unchanged unless you choose to enable it. When enabled, the Create Receipt button will be disabled specifically for payment methods flagged as Credit, helping guide users toward the correct payment action.

For more information, visit our Disable Create Receipt on Credit Card Payment Methods Article.

New Setting to Include Procedure Code Description in Global Period Alerts

ISL- 2616: Previously, the Global Period alert only displayed the procedure code, without any accompanying description. A new company setting has been added that allows the **Global Period alert** to display the procedure code's description, in addition to the procedure code itself. This update gives you the option to include the description as well, providing more context when the alert appears.

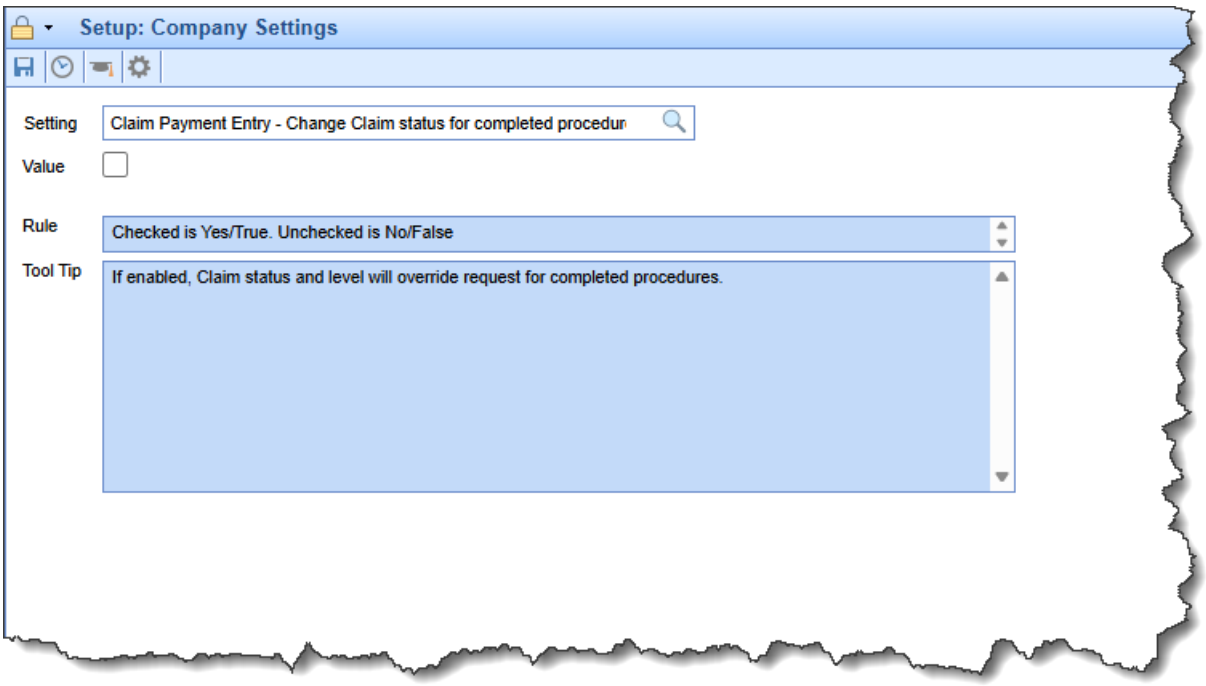


This is an **opt-in** setting and is **disabled (set to "False") by default**, so your existing Global Period alerts will continue to display exactly as they do today unless you choose to enable this option.

For more information, visit our Display Procedure Code Description on Global Period Alerts Article.

New Setting: Control Whether Claim Status Changes to Done/Completed on Zero Balance

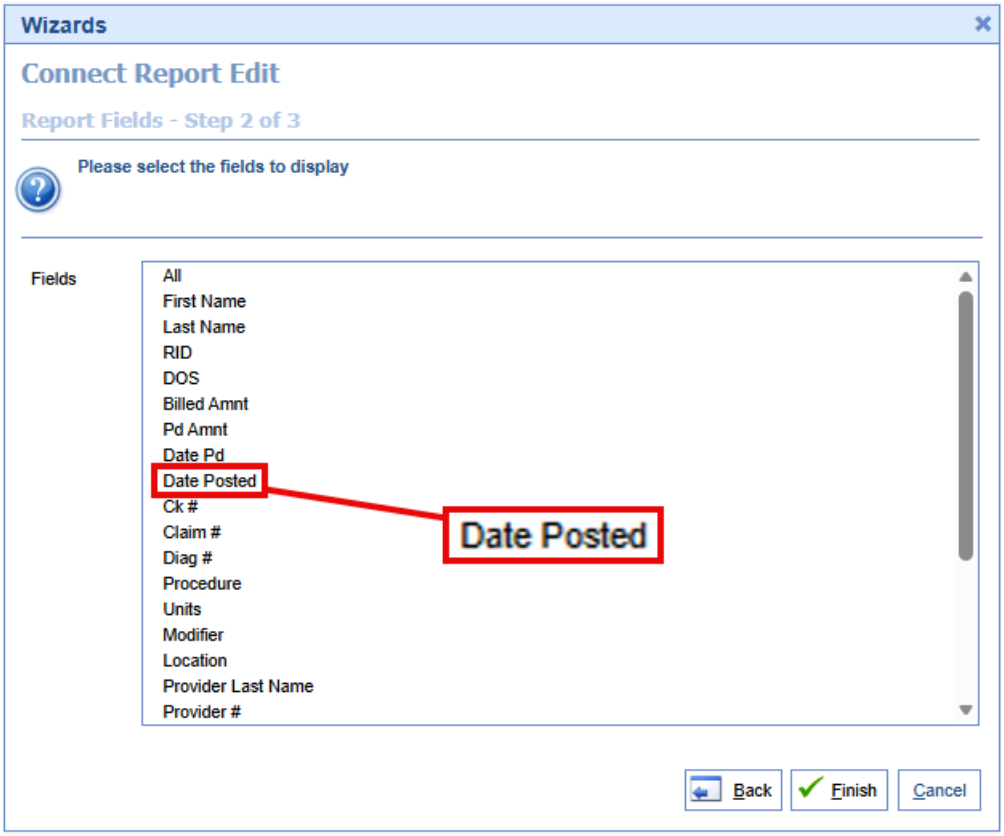
ISL-14209: Previously, when a payment resulted in a zero balance, the claim's status and level were automatically set to Done/Completed, even if the user had manually selected a different status prior to posting. While this automatic behavior is helpful in many cases, it could unintentionally overwrite a status the user had deliberately chosen. To correct this, a new company setting has been added: **"Claim Payment Entry - Change Claim Status for Completed Procedures."** This setting controls whether a claim's status and level are automatically updated to Done/Completed when a payment posted from the Claim Payment Entry window results in a zero balance.



For more information, visit our Change Claim Status for Completed Procedures Article.

Posting Date Now Available as a Display Field in Connect Report "Payment Posting"

ISL- 8368: Previously, the "Payment Posting" Connect Report displayed Date of Service (DOS) and Date Paid, but did not include an option to display the Posting Date. In this release, we added that visibility. The screen now includes **Posting Date** as an available display field giving you more complete visibility into your payment posting activity.



Beta Feature Enhancement: Modernized Problem List Notes Now Support Rich Text Formatting

ISL-7865 : Based on feedback for the Modernized Problem List beta feature, List notes now support rich text formatting. This is only available in the Modernized Problem List. Users can apply formatting such as bullets, numbered lists, bold, and italics to organize notes and make important clinical information easier to review.

Resolutions

Performance Improvement: Faster, More Reliable Schedule Navigation

ISL-13847: Some customers experienced slowness and errors when navigating between days on the Schedule, particularly affecting customers on a specific database server. This was caused by performance issues in the process that loads the Schedule view. This issue has now been fixed. We've optimized the underlying process that loads the Schedule view, improving reliability and reducing errors when navigating between days, resulting in enhanced performance for users.

Resolved Issue: Missing Claims Drill-Down on Revenue Cycle Wheel Showing 404 Error

ISL-14193: We resolved an issue where, selecting the **Missing Claims** drill-down on the Revenue Cycle wheel resulted in a 404 error instead of displaying the expected results. This same issue also occurred when clicking **Provider Counts** under the Reporting windows on the Billing toolbar.

This issue has been fixed and you can now use the Missing Claims drill-down on the Revenue Cycle wheel, as well as Provider Counts from the Billing toolbar, without encountering a 404 error.



Resolved Issue: User ID Field Could Be Unexpectedly Changed by Password Manager Auto-Fill

ISL-14111:We corrected an issue where, when login into OfficeEMR, the User ID field could be unintentionally overwritten by a password manager's auto-fill feature (such as LastPass) without any explicit action by the user. The issue could also cause the incorrect auto-filling of credential fields on subsequent screens, such as User Setup.

This issue has been resolved to prevent login User IDs and those in User Setup from being unintentionally overwritten by the password manager auto-fill.

Resolved Issue: Valid Payer IDs Incorrectly Showing as Invalid in Payer Setup

ISL-14128: Corrected an issue where, in some databases, the Payer Setup screen's Submission tab would display a Payer ID as **Invalid**, even though that Payer ID was valid and active in the Global Payer list. This occurred because the system was also checking against the Global Payer ID that was originally used when the payer was added from the Global Payer list, in addition to the Payer ID itself.

Resolved Issue: Payment Import Window Limited to Viewing 99 Imports

ISL-14357: Corrected an issue where the Payment Import window only displayed the last 99 imported payments, with no ability to filter the results or view error details for records that failed to import. This made it difficult to identify and troubleshoot problem records.

Resolved Issue: Lab Results Failing to Load for Family/Dependent Member Accounts in MML

ISL-14385: Corrected an issue where patients using the MML patient portal could intermittently be unable to view lab results for a family or dependent member's chart (for example, a parent viewing results for a child added as a family member). Clicking to view the result would open a blank tab or display an "Unable to load the report" error, and the result would never display. This issue has been fixed. Lab results now correctly display for all family members within MML, including dependent/family sub-accounts.

Resolved Issue: Import Button Not Working in Patient Setup eDocuments

ISL-14175: When importing a document via **Patient Setup → More → eDocuments**, the Import button in the File to Import dialog appeared clickable but did not respond. Clicking it did not open File Explorer or import a file, and no error was shown. This issue has been fixed and was specific to the Patient Setup access path; importing documents via the separate eDocuments portal application or the EMR Patient Chart → eDocuments tab was not affected.

Resolved Issue: Medicare Advantage Batch Eligibility Incorrectly Flagging Member ID Mismatch

ISL-14294: When running Batch Eligibility for Medicare Advantage plans where the patient's Member ID included a suffix (such as a dependent identifier), the eligibility response would incorrectly return a "Member ID on the eligibility request does not match the Member ID on the response" error. This caused the claim to be placed into "Needs Review" unnecessarily. This issue has been fixed. Member ID validation now checks whether the shorter Member ID is contained within the longer one (requiring a minimum of 6 matching characters), rather than requiring an exact match. This allows Member IDs with suffixes to be correctly validated without triggering a false mismatch.

Resolved Issue: Beta Feature - Modernized Patient Setup: Add to Print/Fax Queue buttons disabled when printing Patient FaceSheet

ISL-14514: Updated security access so that when users are in the Modernized Patient Setup, the Add to Print/Fax Queue buttons are accessible, as expected.

Resolveed Issue: Beta Feature - Modernized Patient Setup > History intermittently pulled the wrong Claim History

ISL-14516: The intermittent nature of the Modernized Patient Setup screen pulling the wrong patient claim transaction history was related to the referencing of an entity ID value which matching the patient's chart number. An updated validation ensures the transaction history matches the patient chart in focus.

Beta Program

As iSalus modernizes the application, there is an option to opt in to early access to a specific feature and provide feedback before releasing it to all users or deprecating a legacy version. Below is the list of items available for your team to enable. Read more about the Beta Program

Name & Description	Status
EverHealth Scribe *Ambient AI Scribe for drafting Notes and managing the Problem List*	**Available**
Modernized Allergies *Modernized Allergies screen within the EMR to better manage a patient's allergies.*	**Available 9/14/2026**
Modernized Problem List *Modernized Problem List Screen for efficient management of patient Diagnoses and ongoing management of chronic problems.*	**Available Now on Demand** **Rolls out to All on October 31st**
Modern Patient Summary & Demographics *Updated Patient Demographics, allowing for starred contacts for a patient, reorganization of patient demographics sections, and simplification of the patient summary screen, allowing for customization by the user.*	**Available Now on Demand** **Rolls out to All on October 31st**