nterface Settings

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Configure Interface Settings

nterface Settings only allows Auth Reps to manage the interfaces set up for the customer account you are ogged into. In this screen, you can inactivate or activate interfaces and manage configuration options.

n order to activate or configure your interface settings, you must first request an interface from the ervices section. Please refer to our Other Services Help Article for steps on how to request an interface.

Who Can Use This Feature?

Auth Reps and Admins can edit and configure Interface Settings.

1. Select **Interface** > **Settings**.
2. Click the **Edit** button next to the interface you wish to activate/inactivate.
    1. Use the drop-down menu to **activate/inactivate an interface.**

        ⚠ Inactivating an interface? We recommend contacting your interface vendor and requesting for them to deactivate the interface on their end as well.

    2. Depending on the **interface** you will have access to some or all of the options below.
        1. **Allow interface to update existing patient information (address, insurance info, etc)? Nev patients will still be created as needed regardless of this setting.**
            1. Select **Yes** if you want to allow the existing patient information to be updated automatically within CollaborateMD when updates are detected from interface messages.
        2. **Allow interface to archive patient insurance information? Insurance information will still be updated as needed regardless of this setting.**
            1. Select **Yes** if you want to allow previously updated insurance information to be archived automatically within CollaborateMD when updates are detected from interface messages.
        3. **Set charge pricing based on unit price received in interface message? By default, the pricing information within the message is ignored and the charge amount is determined**

based on the pricing information in CollaborateMD (code default price or fee schedule price).

1. Select **Yes** if you want the unit price associated with your procedure codes to pull the price from the Interface.

4. **Set modifiers based on the modifiers received from the Interface? Even if this is set to Ye default and situational modifiers will be used if they are not received from the Interface.**

    1. Select **Yes** (default) if you want to set the modifiers based on the modifiers received from the interface.

    2. Select **No** if you want to ignore the modifiers sent from the interface.

3. Click **Save**.

Manage Interface Automations

CollaborateMD's interfaces provide powerful methods to automatically create patients, appointments, an claims within the CMD system. Additionally, powerful add-on features like eligibility, claim scrubbing, address verification, and estimates can now be automated via our interface. This allows customers to everage value-added features within our application while minimizing manual work!

Enable the Eligibility Interface Automation

With this feature, you can determine if a patient is eligible for insurance benefits in seconds, avoiding possible loss of payment. If you're the Auth Rep, follow the steps below to enable your eligibility interface automation.

1. Select **Account Administration** > **Services**.

2. Click the **button** next to **Real-Time Eligibility**.

3. The ***Enable eligibility checking checkbox allows you to enable or disable this service.***

4. Find your **Eligibility Settings**:

    1. **Automatically check eligibility when an appointment or claim is created over an Interface?**

        1. Select **Yes** if you want an automatic eligibility check when creating an appointment or clain from an SIU or DFT message received via the interface.

    2. **Automatically check eligibility when a patient is created or updated over an Interface?**

1. Select **Yes** if you want an automatic eligibility check when creating a patient from an ADT message received via the interface.

5. Click **Save**.

> For more info on enabling and configuring your Real-Time Eligibility feature, visit our Manage Real-Time Eligibility Help Article.

Enable the Claim Scrubbing Interface Automation

Claim Scrubbing helps you manage the complex rules and terminology of coding. This feature is used to analyze the claims before submission to the clearinghouse as a solution for catching problem claims, maximizing the potential for your healthcare facility to be paid correctly on the first submission. If you're the Auth Rep, follow the steps below to enable the claim scrubbing interface automation.

1. Select **Account Administration** > **Services**.
2. Click the **button** next to **Claim Scrubbing**.
3. The ***Enable Claim Scrubbing checkbox allows you to enable or disable this service.***
4. Find your **Claim Scrubbing Settings**:
    1. **Automatically review and scrub new claims as they are entered through an Interface?**
        1. Select **Yes** if you want to automatically scrub new claims created from a DFT message received via the interface.
5. Click **Save**.

> For more info on enabling and configuring Claim Scrubbing, visit our Manage Claim Scrubbing Help Article.

Enable the Address Verification Interface Automation

Address verification services reviews the address while matching it to the United States Postal Services (USPS) directory. Since the address check is done in real-time, patient address issues are caught and can be corrected immediately. By catching these data errors, you are able to decrease losses, rejections, or denial

due to fraud or simple spelling errors. If you're the Auth Rep, follow the steps below to enable the address verification interface automation.

1. Select **Account Administration** > **Services**.
2. Click the **button** next to **Address Verification**.
3. The ***Enable Address Verification checkbox allows you to enable or disable this service.***
4. Find your **Address Verification Settings**:
    1. **Automatically scrub addresses when the above changes are made via Interface?**
        1. Select **Yes** if you want to automatically scrub addresses (based on your pre-selected options) when creating or editing a patient record from an ADT/DFT message received via the interface.
5. Click **Save**.

> For more info on enabling and configuring your address verification options, visit our Manage Address Verification Help Article.

Enable the Patient Estimates Interface Automation

The Patient Estimates feature allows you to easily create Good Faith Estimates as required by the No Surprises Act. Once an estimate is created using either the Scheduler or the Claim section, users can print the estimate (as required by the No Surprises Act for uninsured or self-pay patients), send a statement electronically or on paper), enter payments in CMD, or have the patients make the payment on the patien portal. If you're the Auth Rep, follow the steps below to enable the patient estimates interface automation

> ⚠ The available estimates for Interface Automations depend on your Practice's selected Default Estimate Options. These options are either Auto (based on eligibility) or Quick (based on copay). Visit our Estimate Defaults Help Articles for more information on configuring this setting...

1. Select **Account Administration** > **Services**.
2. Click the **button** next to **Patient Estimates**.
3. The ***Enable Patient Estimates checkbox allows you to enable or disable this service.***
4. Find your **Patient Estimate Settings**:

1. **Automatically create estimates when new Appointments are created?**
    1. Select **Yes** if you want to automatically create an estimate when creating a new appointment.
2. **Automatically create estimates when new Claims are created that don't already have estimates?**
    1. Select **Yes** if you want to automatically create a quick estimate when creating a new claim, and the claim does not already have an estimate.
3. **Automatically create estimates when the above changes are made via Interface?**
    1. Select **Yes** if you want to automatically create an auto or quick estimate when creating a new appointment or claim (options 1 and/or 2) from an SIU or DFT message received via th interface.

5. Click **Save.**

> For more info on enabling and configuring your patient estimate options, visit ourManage Patient Estimates Help Article.

> Usage of the Patient Estimates feature requires that the Real-Time Eligibility Service be enabled as well.