

# 2025 Release Notes

Modified on 04/02/2025 11:25 am EDT

## Release 15.6.0 - March 31, 2025

### Enhancements

## Enhancements

### Provider Adjustments Details screen update

Updated the Help Text for the Provider Adjustment Details screen at the top to include links pointing directly to help pages that will aid customers in understanding what provider-level adjustments are and how to post them. The text will now provide a brief description of what provider adjustments are and include links to help articles on associating and applying provider adjustments on claims, as well as automatically posting interest amounts as payments.

### Provider Adjustment Details

**Provider adjustments are payments that are not associated with a specific claim or service. To apply provider adjustments to claims, see our help articles:**

- [Associate and apply provider adjustments to claims](#)
- [Automatically post interest amounts as payments](#)

| Date         | Reason | Reference # | Amount        | Claims | Remove |
|--------------|--------|-------------|---------------|--------|--------|
| <b>Total</b> |        |             | <b>\$0.00</b> |        |        |

[+ Add Provider Adjustment](#)

[Done](#) [Cancel](#)

## Knowledge base articles (when there's a list)

- Associate and apply provider adjustments to claims
- Configure Payment Settings for Users

## Referring Provider filter updated in multiple locations

The Referring Provider filter has been modified to function as a search field instead of a dropdown menu when the number of referring providers exceeds 20. This change aligns the behavior of the Referring Provider filter with that of the Rendering Provider and Payer search fields across the Control, Tracking, and Batch sections of the application. This search field offers enhanced searching and improved performance for accounts with more than 20 referring providers while maintaining the simplicity of a dropdown menu for customers with fewer than 20.

### All Referring Providers

Search for referring providers

| Selected                 | Name                                   | Reference # | NPI        | Address   |  |
|--------------------------|--|-------------|------------|---|--|
| <input type="checkbox"/> | ACTIVE, RADIO (#10589394)              | CHAS        |            | FL  |  |
| <input type="checkbox"/> | AHOY, CHIPS (#11805299)                |             |            | 123 COOKIE WAY, IL                                |  |
| <input type="checkbox"/> | BELL, EDITH (#10404204)                |             | 3773978330 | UT  |  |
| <input type="checkbox"/> | BELL, EDITH (#11172899)                |             | 3773978330 | FL  |  |
| <input type="checkbox"/> | BELL - MD, EDITH (#11218397)           |             | 3773978330 | UT  |  |
| <input type="checkbox"/> | BILLY, BOB (#11714164)                 |             |            | TX  |  |
| <input type="checkbox"/> | BIRD, ITSA (#11291637)                 | 123         | 1651984613 | 42039 ITS A PLANE PLACE, ORLANDO, FL 32817        |  |
| <input type="checkbox"/> | BLUE, DR (#11813529)                   |             |            | FL  |  |
| <input type="checkbox"/> | BOWLER, DONNY (#11324581)              |             |            | 857-10 PIN LANE, LOS ANGELES, CA 12345-5845       |  |
| <input type="checkbox"/> | BRAD TEST ORG (#11712702)              |             |            | FL  |  |
| <input type="checkbox"/> | BRADSHAW - REF TEST, KEVIN (#11171554) |             | 0646465406 | 123 MAIN STREET, ORLANDO, FL 32805                |  |
| <input type="checkbox"/> | BRADSHAW - TEST, KEVIN (#11171455)     |             | 6546546540 | 123 MAIN STREET, ORLANDO, FL 32805                |  |
| <input type="checkbox"/> | BRAIN, PINKY (#10170578)               |             | 1223334444 | 12 SNARF WAY, ORLANDO, FL 32801                   |  |
| <input type="checkbox"/> | BROWN, ERIC (#12076905)                |             | 1417622671 | 439 S UNION ST UNIT 2104, LAWRENCE, MA 01843-2800 |  |
| <input type="checkbox"/> | BURKE, DARLENE (#11218440)             |             | 5231532236 | TX  |  |
| <input type="checkbox"/> | BURNS, TEST (#11295403)                |             | 3546846263 | AZ  |  |
| <input type="checkbox"/> | BURR, JADE (#11233476)                 |             | 0060964643 | GA  |  |
| <input type="checkbox"/> | CAKES, NATTIE (#10039281)              | 78674       | 5214693585 | 654 CATS MEOW LANE SUITE #3, KITTY, PA 71254      |  |
| <input type="checkbox"/> | CAT, LUNA (#11846012)                  |             | 0000000001 | REF PROV AVE, TAMPA, FL 00000-1111                |  |
| <input type="checkbox"/> | CHANG, JOHN (#11759319)                |             | 1073516027 | 169 N MIDDLETOWN RD, PEARL RIVER, NY 10965-       |  |

Select All

## Release 15.5.0 - March 17, 2025

## New Features and Updates

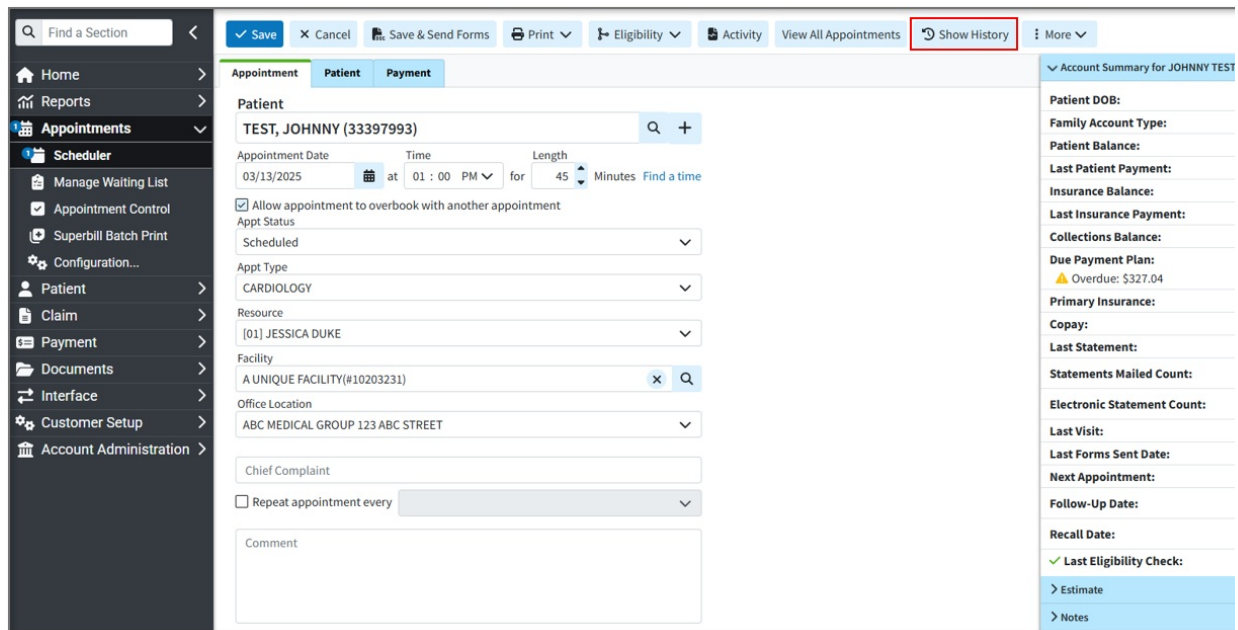
### General

#### Appointments

- **New Enhanced Auditing (Show History) for Appointments** CollaborateMD has been working on a new enhanced auditing project that will provide offices with an easy and transparent way of auditing

changes made in the application. We previously released our new Enhanced User Auditing feature in the Customer Setup, Patient, and Claim sections of the application, allowing users to see a detailed list of changes made to specific records throughout the application.

In this release, we are expanding our Enhanced Auditing functionality to the Appointments section, enabling users to track modifications, changes, and updates made to appointments within CMD for better auditing and accountability. With the new "Show History" feature, you can now determine which user changed/updated specific appointment information in the software and when by providing an auditing table with all updates or changes made to a record, including the user, date and time, and the record changed.



These new auditing records are also included in our existing User Audit Report, making it an even stronger tool for auditing multiple records simultaneously. The Show History capability has currently been deployed in the Customer Setup, Patient, Claim, and Appointments sections, and we will be systematically adding it to other sections of the application.

For more information on using our new Add New Same/Similar Code List feature, please visit our [Enhanced Auditing Help Articles](#).

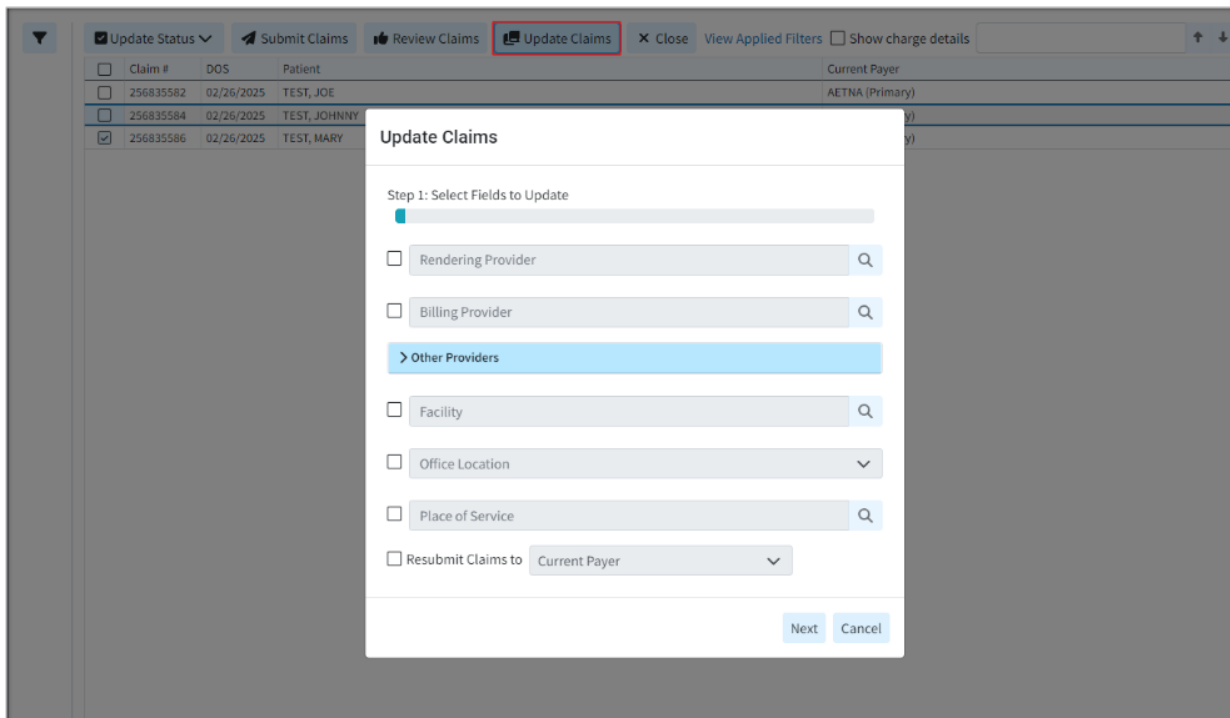
## Release 15.4.0 - March 3, 2025

# New Features and Updates

### General

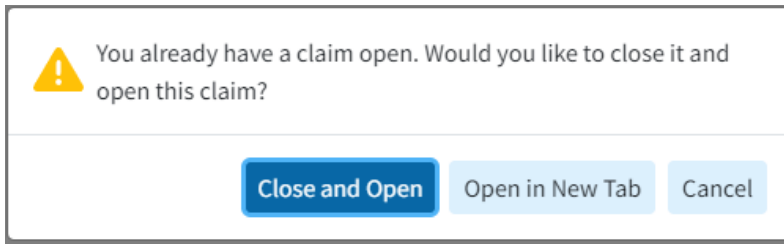
## Claims

- **New Mass Claim Updates Feature:** CollaborateMD has always provided powerful tools for working with individual claims, but the platform's ability to make changes to multiple claims at once was limited. With this release, users no longer have to open each claim individually when correcting minor mistakes, such as setting the wrong rendering provider or place of service code on claims. We added a new Mass Claim Updates feature that enhances the existing Status Control screen with capabilities to modify multiple claims. The Status Control screen has been renamed Claim Control, where users can now manage the review of incoming claims from their EHR, submit or resubmit claims, and make updates to multiple claims at once, such as updating the Rendering and Billing Providers, the Facility, the Office Location, or the Place of Service by simply selecting the claim(s) and choosing the Update Claims option.



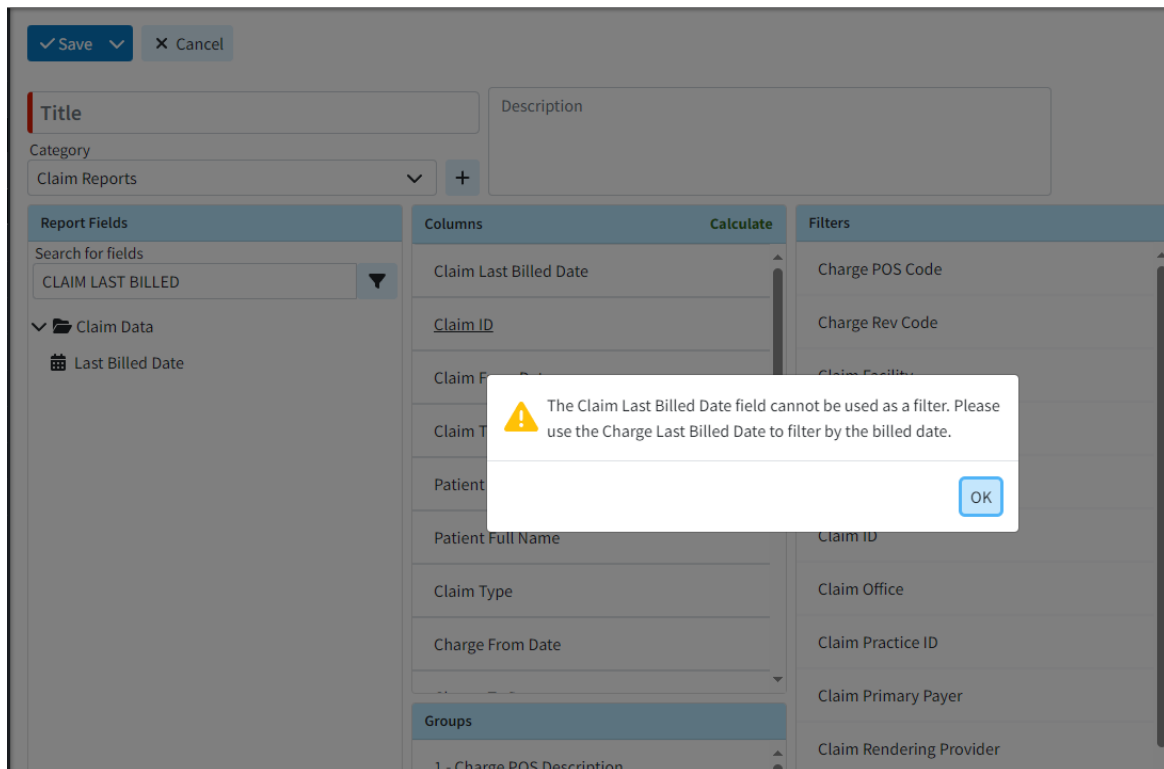
For more information on updating multiple claims at once, please visit our [Update Multiple Claims Help Article](#).

- **Alternate Option To Open A Claim In a Separate Tab When Another Claim Is Already Open:** We have introduced a new dialog box option that appears when a user attempts to open a claim from any section within the CMD while a claim is already open. This feature will now provide the user with the following options:
  - **Close and Open** - Closes the open claim and opens a new one (it will display the usual unsaved changes warning and allow the user to save if there are unsaved changes).
  - **Open in New Tab** - Opens a new window/tab with the correct URL/claim
  - **Cancel** - Closes the dialog and keeps the claim open.



## Reports

- **Update to the Report Builder to Prevent the "Claim Last Billed Date" Field from Being Added as a Filter:** Updated the Report Builder to prevent adding the "Claim Last Billed Date" report field as a Report Filter. While some customers may still try using this field as a filter, we've added a warning message directing them to use the "Charge Last Billed Date" instead, which provides the same results, is much faster, and can potentially be improved further via an index.



## Patient

- **New Appointment View Option From The Patient Section:** Previously, the "View All Appointments" button directed users to the Appointment section to view a patient's appointment details, requiring them to leave the current section even if they only needed the dates of past appointments. In this release, we added a new "Appointments" option in the patient side panel that displays a list of all appointments (categorized into Past Appointments and Future Appointments) for the patient without

leaving the screen. The section will still provide an option for users to access the "View All Appointments" button, directing them to the Appointment section where they can see patient appointment details.

The screenshot shows a patient record for 'JOE TEST'. The interface includes a top navigation bar with 'Save', 'Close', 'Print', 'Merge', 'Eligibility', 'Activity', 'Show History', and 'More' options. The patient's name is 'TEST' (Last Name) and 'JOE' (First Name). The patient is male, born on 01/16/1982, and has an SSN of 987-65-4321. The 'Appointments' section is expanded, showing a list of past appointments with dates, times, and durations. The 'View All Appointments' button is highlighted in blue.

| Date       | Time     | Duration   | Provider                |
|------------|----------|------------|-------------------------|
| 10/10/2024 | 3:00 PM  | 45 minutes | [01] JESSICA DUKE       |
| 06/06/2024 | 11:00 AM | 45 minutes | [01] JESSICA DUKE       |
| 06/03/2024 | 11:00 AM | 45 minutes | [01] JESSICA DUKE       |
| 09/07/2023 | 12:45 PM | 45 minutes | [01] JESSICA DUKE       |
| 06/15/2023 | 12:00 PM | 45 minutes | [001] STEPHEN KOZLOWSKI |
| 06/12/2023 | 10:00 AM | 45 minutes | [1212] DR DISNEY        |
| 06/09/2023 | 10:45 AM | 30 minutes | [001] STEPHEN KOZLOWSKI |

For more information on our new Appointments dropdown, please visit our [View Appointments From Patient Section Help Articles](#).

## Customer Setup

- **New Option to Open Contracts and Fee Schedules From Procedure & Revenue Codes Section:** We added the ability for users to open contracts and fee schedules directly from the Procedure and Revenue Codes sections. This new functionality enables users to click on the Fee Schedule/Contract Name (which is now a clickable link) within the Contracts and Fee Schedules side panel, allowing them to access and view the associated contracts and fee schedules.

### Procedure Codes

Save    Close  

**Code**    Type     Make this code inactive  
 0005F    CPT®/HCPCS    Dept.

Description  
OSTEOARTHRITIS ASSESSED

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**Claim Defaults**

Exclude this code from duplicate service checks  
 This is an all inclusive code  
 This code is a percentage of the claim total

Default Price: 100.00    Default Units: 1.00    Default Charge Status:

Rev Code: 0020    Place of Service: 11

CLIA Number    Type of Service

Narrative Notes

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**Modifiers (Global & Situational)**

Global 1    Global 2    Global 3    Global 4

| Modifiers | Applies To                 | Notes |
|-----------|----------------------------|-------|
| 25        | Provider - ABDUL, SAMANTHA |       |
| 1P        | Payer - AARP               |       |

[+ Add Situational Rule](#)

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**Billing Alerts**

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**Fee Schedules**

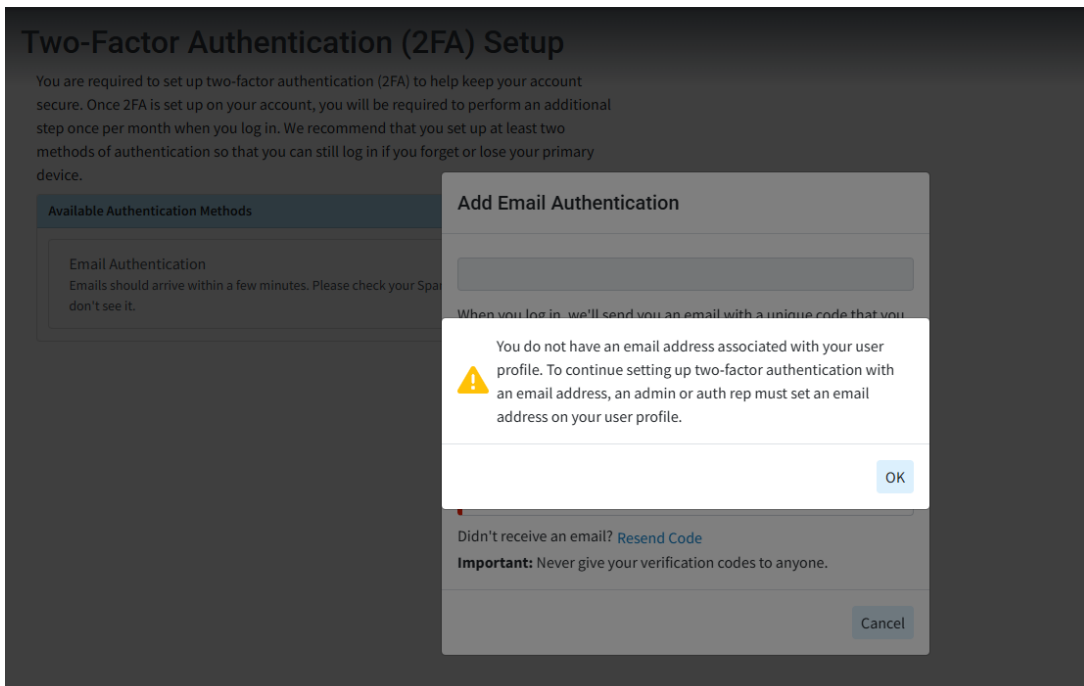
| Fee Schedule               | Price  |
|----------------------------|--------|
| REV101                     | 0.00   |
| AETNA03020                 | 100.00 |
| BCBS                       | 100.00 |
| COURT APPEARANCE FEES      | 100.00 |
| COURTESY                   | 100.00 |
| MEDICARE                   | 100.00 |
| ERROR TEST                 | 0.00   |
| HORIZON                    | 100.00 |
| MEDICARE TEST MARY 123     | 100.00 |
| PB CASH FEE 2022           | 23.00  |
| PB CLINIC 2022 - INSURANCE | 50.00  |
| SDFGHJK                    | 0.00   |
| SELF PAY                   | 100.00 |
| T1016                      | 0.00   |
| TANYAS FEE SCHEDULE        | 0.00   |
| TEST                       | 600.00 |
| TEST                       | 100.00 |
| TEST FEE                   | 0.00   |
| TEST FEE SCHED             | 100.00 |
| TEST FS                    | 0.00   |

[View Medicare Physician Fee Schedule \(MPFS\) Information](#)

For more information on accessing fee schedules/Contracts from procedure codes, please visit our [Procedure Codes Fee Schedules](#) or [Procedure Codes Contract Help Articles](#). For information on accessing fee schedules/Contracts from revenue codes, please visit our [Revenue Codes Fee Schedule](#) or [Revenue Codes Contract Help Articles](#).

## User Profile

- New Email Option For Two-Factor Authentication:** We updated our Two-Factor Authentication to now support email authentication. This option will send an email message with a 6-digit login code, similar to the SMS verification, and can only be set up with the email attached to the user's CMD profile. Please note that if an email address is used that does not match the one set in your user profile you will receive a warning.



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## Release 15.3.0 - February 18, 2025

# New Features and Updates

### General

#### Patient

- **New Balance Due Insurance Optional Column:** Some healthcare providers rarely bill patients directly, instead focusing primarily on the balance owed by insurance companies rather than the patient's balance. The patient search screen (results dialog) already displayed the balance owed by insurance, but this information was not shown in the recently opened table. In this release, We added the Balance Due Insurance as an optional column (hidden by default) within the Patient Search screen's Recently Opened list.



### Select Columns

| Available Columns    | Visible Columns  |
|----------------------|------------------|
| Reference # +        | Account #        |
| Facility +           | Name             |
| Rendering Provider + | Date of Birth    |
| Balance due Ins. +   | Insured          |
|                      | Balance due Pat. |
|                      | Account Type     |

**Done**

- New A/R Control Filters Related To Payment Portal Invites:** We recently added an option to Send Payment Portal Invites as a batch action from Patient A/R Control. In this release, we added new filters within A/R Control to determine whether or not a patient has enrolled with the payment portal. Customers can now search by a new Date Search Option "**Days Since Last Payment Portal Invite Sent**" or by the Claim Search Option "**Payment Portal Status**" (Invitation Not Sent, Invitation Sent but Not Registered, Registered).

### Date Search Options

Filter search by:  By # of days  By date range

Days Since Last Seen  
Any

Days Since Last Payment  
Any

Days Since Last Statement  
Any

Days Since Last FDN  
Any

Days Since Last Collection  
Any

Days Since Date of Service  
Any

Days Since First Billed  
Any

Days Since Set To Due Patient  
Any

Days Since Last Statement Sent for Claim  
Any

Days Since Last Payment Portal Invite Sent  
Any

### Claim Search Options

Payer

Charge Balance  
Any

Charge Status  
Balance Due Patient, Pending Patient, Collection, Claim At Insu...

Rendering Provider

Referring Provider

Paper Statements Sent  
Any

Electronic Statements Sent  
Any

Total Statements Sent  
Any

Patient

Account Type

Set to Send Statement  
Any

Set to Send FDN  
Any

Payment Portal Status

For more information on determining if patients have enrolled in the payment portal, please visit our [Search For Patient Balances Help Article](#).

## Claim

- Updated the Claim Search Capability:** When users receive communication from the payer about a claim, it often includes the payer's claim number: the ICN (Internal Control Number), Claim Control Number, or Original Reference #. These numbers are automatically populated on the claim after the ERA is applied, so the ability to find claims by the ICN is a great tool to have when working on appeals. In this release, we updated the Claim Search capability to include searching by all three claim control numbers, making it easier to locate specific claims during the appeals process.

Search by name, DOB, account#, member ID, claim ID, or TCN Number

+ Add Professional Claim

+ Add Institutional Claim

Show exact matches only
  Show unpaid claims only

Search

Find for MUNIZ, JOSEPH

Recently Opened

| Claim ID | DOS | Patient | Total Charges | Balance |
|----------|-----|---------|---------------|---------|
|          |     |         |               |         |

✓ Save   ✕ Close   🗑️ Delete   🖨️ Print   📄 Review   📅 Activity   ⚡ Claim Status   🏠 Open Patient

**Claim**   Charges   Additional Info   Ambulance Info

Rendering Provider  
 DUKE, JESSICA (10128215)

Billing Provider  
 DUKE, JESSICA (10128215)

Supervising Provider

Ordering Provider

Referring/PCP Provider

Sales Rep

Facility

Office Location  
 ABC MEDICAL GROUP 123 ABC STREET

Primary Insurance  
 AMERICHoice OF NEW YORK INC. (MEDICAID NY) (10069010)

Hide Primary Policy Details

Member ID: 36515   Policy Type: Other   Copay Due: 0.00

Group Number: 553   Claim Control / Original Ref. #: 123456789

Authorization #   Referral Type: Prior Auth Number

Secondary Insurance  
 HUMANA (10102666)

Hide Secondary Policy Details

- New Optional Column For Document Count:** We added a new optional column (hidden by default) to the Claim, Patient, and Payment sections that display a count of the documents associated with each item. This column helps indicate if a patient, claim, or payment has a document association before opening it.

Please note that this column option will only appear on the search screen after a search is performed, not on the Recently Opened List.

**Search Results**

Filter your results

| Searched By   | Claim #   | Type         | Account # | Patient Name  | Documents | Rendering | From       | To         | Lines | Charges  | Payments | Adjustme |
|---------------|-----------|--------------|-----------|---------------|-----------|-----------|------------|------------|-------|----------|----------|----------|
| First: JOSEPH | 256238298 | Professional | 37190993  | MUNIZ, JOSEPH | 1         | DUKE      | 02/18/2025 | 02/18/2025 | 1     | \$100.00 | \$0.00   |          |
| First: JOSEPH | 252696024 | Professional | 37190993  | MUNIZ, JOSEPH | 0         | DUKE      | 01/03/2025 | 01/03/2025 | 2     | \$294.00 | \$0.00   |          |
| First: JOSEPH | 246038322 | Professional | 37190993  | MUNIZ, JOSEPH | 2         | DUKE      | 10/11/2024 | 10/11/2024 | 3     | \$300.00 | \$0.00   |          |
| First: JOSEPH | 244816660 | Professional | 37190993  | MUNIZ, JOSEPH | 1         | DUKE      | 09/26/2024 | 09/26/2024 | 2     | \$100.00 | \$0.00   |          |
| First: JOSEPH | 242777502 | Professional | 37190993  | MUNIZ, JOSEPH | 0         | DUKE      | 08/30/2024 | 08/30/2024 | 1     | \$0.00   | \$0.00   |          |
| First: JOSEPH | 239111944 | Professional | 37190993  | MUNIZ, JOSEPH | 3         | DUKE      | 07/16/2024 | 07/16/2024 | 1     | \$100.00 | \$0.00   |          |
| First: JOSEPH | 237758587 | Professional | 37190993  | MUNIZ, JOSEPH | 0         | DUKE      | 06/27/2024 | 06/27/2024 | 6     | \$679.00 | \$0.00   |          |
| First: JOSEPH | 235925615 | Professional | 37190993  | MUNIZ, JOSEPH | 0         | DUKE      | 06/03/2024 | 06/03/2024 | 1     | \$100.00 | \$0.00   |          |
| First: JOSEPH | 203068504 | Professional | 37190993  | MUNIZ, JOSEPH | 1         | DUKE      | 03/16/2023 | 03/16/2023 | 1     | \$650.00 | \$0.00   |          |
| First: JOSEPH | 195211259 | Professional | 37190993  | MUNIZ, JOSEPH | 0         | DUKE      | 11/21/2022 | 11/21/2022 | 3     | \$300.00 | \$50.00  | \$2      |
| First: JOSEPH | 192053855 | Professional | 37190993  | MUNIZ, JOSEPH | 0         | DUKE      | 10/04/2022 | 10/04/2022 | 2     | \$850.00 | \$0.00   |          |
| First: JOSEPH | 185965232 | Professional | 37190993  | MUNIZ, JOSEPH | 0         | DUKE      | 07/05/2022 | 07/05/2022 | 2     | \$194.00 | \$0.00   |          |
| First: JOSEPH | 182987148 | Professional | 37190993  | MUNIZ, JOSEPH | 0         | ABDUL     | 05/19/2022 | 05/19/2022 | 2     | \$444.00 | \$0.00   |          |

Close

## Payment

- Updated The Refund Receipts:** Previously, when refund receipts were generated, they appeared identical to a standard receipt, except that the refund amount was displayed within parentheses. To make these receipts more easily identifiable and comprehensible, we modified the refund receipt by adding the word "Refund" to the text and displaying negative numbers with a negative symbol instead of using parentheses, making it clearer.



**Receipt**  
Receipt # 10002247

**CMD FAMILY PRACTICE - WEST**

PO BOX 555, ORLANDO, FL 32488-1111  
<https://www.bestdoctorever.com> • (321) 251-7915

**Payment Refund**  
**-\$12.50**

Patient: MCCLOUD, FOX  
Account: 25017512

Check received on 02/12/2025

Thank you for your payment.

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## Release 15.2.0 - February 4, 2025

# New Features and Updates

### General

#### Appointments

- **New Appointment Setting to Hide The Status of Received/Applied Intake Forms:** Some users who have tightly packed schedules (double/triple booked) may struggle to see the specifics of their appointments due to the two types of icons we show (the eligibility icon and the forms icon) taking up a lot of the appointment space. To help with this, we introduced a setting that allows users to hide the checkmark that indicates forms that have been submitted.

Appointment Settings for User: josephmuniz

Show a warning when opening a past appointment:  
 Yes  No

---

Prompt me to schedule requests from the waiting list when:  
 Moving an appointment  
 Deleting, canceling, or rescheduling an appointment

---

Enable drag-and-drop in the scheduler:  
 Yes  No

---

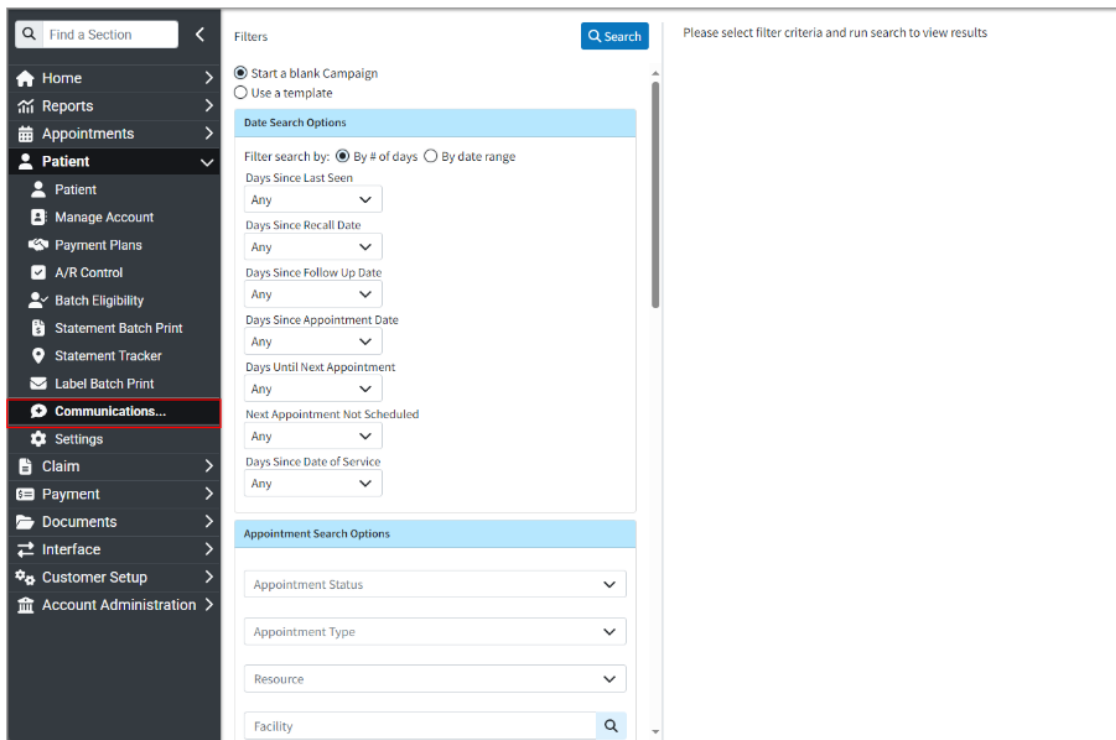
Hide the status of Intake Forms on the scheduler when intake forms have been received and applied?  
 Yes  No

Visit our [Configure User Appointment Settings Help Articles](#) for more information on how to turn on this setting.

## Patient

- **New Patient Broadcast Communications Feature** Patient engagement is the collaborative process between healthcare providers and patients aimed at improving patient health. Over the past few years, the significance and prevalence of patient engagement have grown considerably. Research indicates that when patients feel involved and take an active role in their medical care, they achieve improved health results. Simultaneously, providers observe increased patient satisfaction and retention.

In order to meet the growing needs of both providers and patients, CollaborateMD has developed an introduced a new Patient Broadcast Communications feature. This feature allows providers to send targeted one-way communications to multiple patients using various methods (text, email, or phone). Customers can set campaigns with customized parameters to target specific patients, helping them with their healthcare needs and encouraging retention or usage of optional/elective medical services through intelligent marketing.



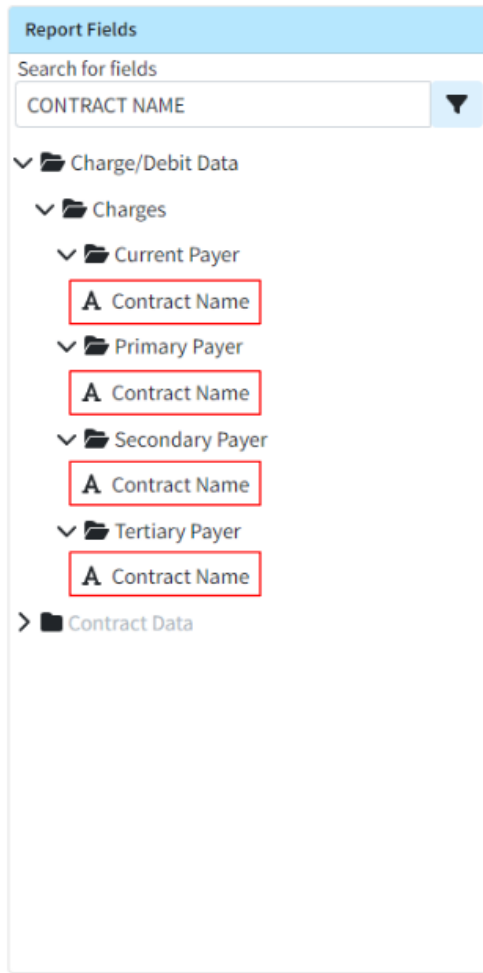
For more information on using our new Patient Broadcast Communications feature, please visit our [Broadcast Communications Help Articles](#). For instructions on how to enable and configure the feature, visit our [Manage Broadcast Communications Help Article](#).

- **New A/R Control Filters:** Some of our customers have very particular workflows and have requested to be able to search in A/R Control by Referring and Rendering providers. This would enable them to send out statements only for claims from a particular provider. To address this need, we added the ability to filter by Rendering or Referring Provider within A/R Control, allowing customers to send statements only for claims from a specific provider or referrer. These new filter options were added under a new header within the A/R Control Filters called "Claim Search Options." Additionally, the existing Payer, Charge Balance, and Charge Status filters have been moved under the Claim Search Options.

For more information on these new filters, please visit our [Search For Patient Balances Help Article](#).

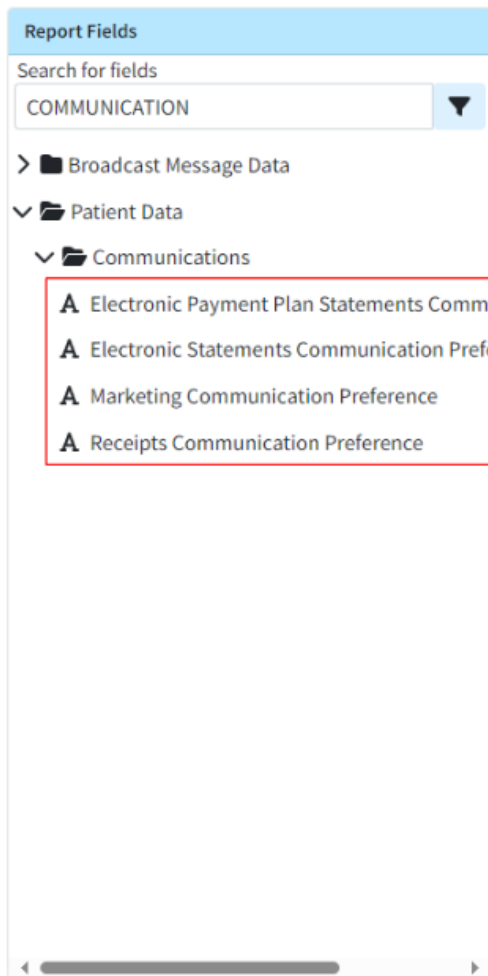
## Reports

- **New Report Fields For Contract Name:** We previously had a number of fields that could be used to show the contract price that applies to a charge. In this release, we added "**Contract Name**" as a report field under those same data sections. This new field is available under Charge/Debit Data > Charges > Current Payer (as well as Primary/Secondary/Tertiary Payers).



- **New Report Fields For Patient Communication Preferences** We added the ability to include information about communication opt-ins in reports, enabling customers to conduct targeted outreach to patients to encourage them to opt-in. The following new communication preferences report fields have been added under **Patient Data > Communications**:
  - Electronic Payment Plan Statements Communication Preference
  - Electronic Statements Communication Preference
  - Marketing Communications Preference
  - Receipts Communication Preference





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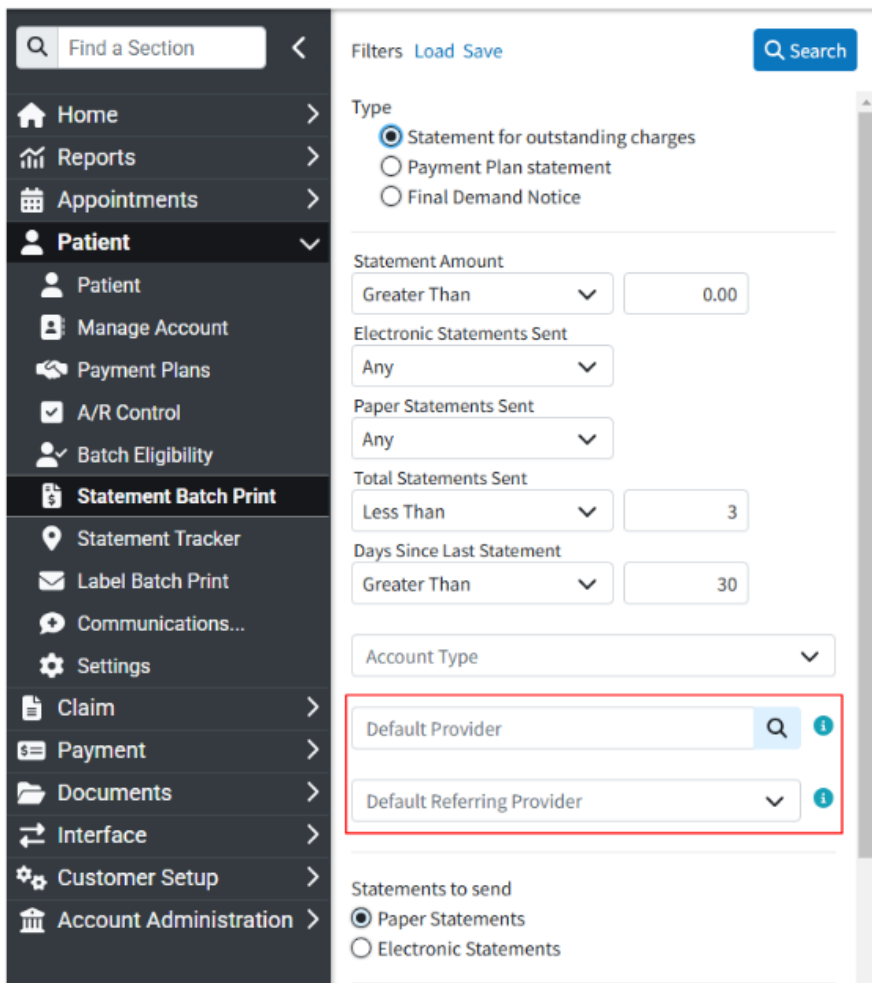
Release 15.1.0 - January 21, 2025

## New Features and Updates

### General

#### Patient

- **New Statement Batch Print Search Options:** We added the Default Provider and the Default Referring Provider as search (filter) options within Statement Batch Print, so only patients with the selected default referring or rendering providers are returned. This option will not affect the generated statement, which will continue to include all charges regardless of the rendering or referring provider on the claim.



## Payment

- Updated The Default ACCOUNT CREDIT & APPLY ACCOUNT CREDIT Memos:** We updated the default account credit memo, created when an account credit is generated based on a payment or adjustment, to include more information about the credit. In this release, we also updated the APPLY ACCOUNT CREDIT memo line to include additional details (such as the source and check number) that will be visible in the Manage Account and Activity screens once the credit is applied.

| DOS / Received Date | Procedure | Status / Memo  | Amount   | Applied  | Balance |
|---------------------|-----------|--|----------|----------|---------|
| 01/21/2025          |           | APPLY ACCOUNT CREDIT - PATIENT PAYMENT - CHECK - 123456789 | \$100.00 | \$100.00 |         |
| 08/16/2022          |           |  | \$600.00 | \$200.00 | \$400   |
| 08/16/2022          | 00100     | SEND TO HUMANA VIA CLEARINGHOUSE                           | \$600.00 | \$200.00 | \$400   |
| 10/05/2022          |           | PAYMENT FROM AETNA   | \$200.00 | \$200.00 |         |
| 10/05/2022          |           | ADJUSTMENT BY AETNA  | \$0.00   | \$0.00   |         |
| 08/16/2022          | 00600     | CLAIM AT AETNA   | \$0.00   | \$0.00   | \$0     |
| 10/05/2022          |           | PAYMENT FROM AETNA   | \$0.00   | \$0.00   |         |
| 10/05/2022          |           | ADJUSTMENT BY AETNA  | \$0.00   | \$0.00   |         |
| 08/11/2022          |           |  | \$457.00 | \$457.00 | \$0     |
| 08/11/2022          | 85004     | PAID   | \$300.00 | \$300.00 | \$0     |

- **New ERA Auto Post:** Added a new ERA Auto-Post billing option that can be configured by Payer and pay priority (primary, secondary, etc.). Once enabled and configured, the Electronic Remittance Advice will automatically check for errors or warnings on most ERAs and, if the ERA is free of issues ("clean"), will automatically apply the payments with no interaction or review required.

The screenshot shows a configuration interface for Billing Options. The 'ERA' tab is selected. It contains two radio button questions and a section for 'Electronic Remittance Advice Automation'.

Process PR-45 (patient responsibility amount in excess of fee schedule/maximum allowable) as an Adjustment when an ERA is posted, rather than as Unpaid?  
 Yes  No

Process PR-242 (services not provided by network/primary care providers) as an Adjustment when an ERA is posted, rather than as Unpaid?  
 Yes  No

**Electronic Remittance Advice Automation**

- Allow this payer's ERAs that fully apply with no errors to auto-post without review
  - Show a dialog with the payment details before auto-posting
  - Commit the payment after it has been applied
  - Allow secondary payments to auto-post
  - Allow payments that do not match the contract amounts to auto-post
  - Allow payments with denials or \$0.00 allowed amounts to auto-post
  - Allow duplicate payments (remit code 18) to auto-post
  - Allow payments with refunds/reversals to auto-post
  - Allow payments to patients/claims with Payment Alerts to auto-post
  - Allow payments with Provider Adjustments that were not applied to claims to auto-post

For more information on configuring this new ERA Automation billing option, please visit our [ERA Billing Options Tab Help Article](#).

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Release 15.0.0 - January 6, 2025

## New Features and Updates

### General

#### Appointments

- **Added UI Improvements To The Scheduler's Eligibility & Forms Icons:** We reduced the size of the

Eligibility and Forms icons and allowed them to take up vertical space when available, enabling more appointment information to be visible on the scheduler. We also changed the color of the "intake forms sent but not filled out" icon from yellow to gray, distinguishing it from the "intake forms not sent" icon.

|       |                                   |
|-------|-----------------------------------|
| 12 pm |                                   |
| 15    |                                   |
| 30    |                                   |
| 45    |                                   |
| 1 pm  | ✓ SILVERTONGUE, LYRA - CONSULT 30 |
| 15    |                                   |
| 30    | 🕒 TEST, JOHNNY - CARDIOLOGY       |
| 45    |                                   |
| 2 pm  |                                   |
| 15    |                                   |

## Patient

- Updated The Statement Tracker "Status" Column:** Updated the Statement Trackers Status column to include the "user printed name." This allows users to see the print status, as well as the individual who printed the document, which improves the auditing process.

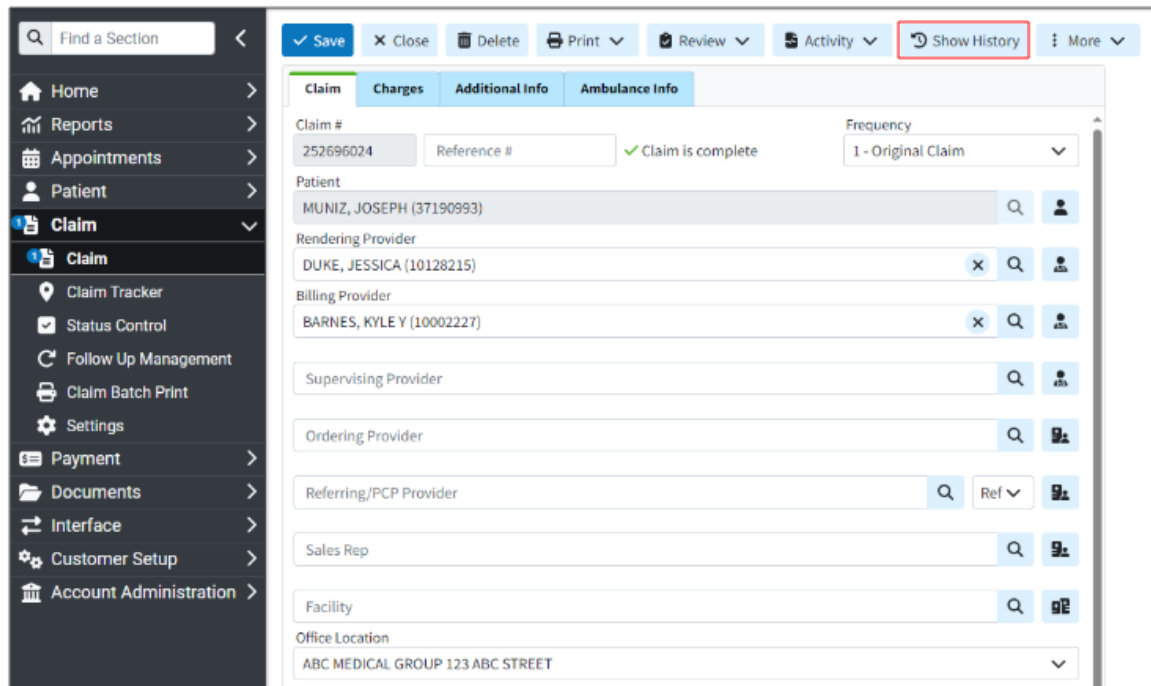
| <input checked="" type="checkbox"/> | Patient          | Invoice #                  | Date       | Amount   | Type               | Status                                     |
|-------------------------------------|------------------|----------------------------|------------|----------|--------------------|--|
| <input type="checkbox"/>            | ALEXANDER, JONES | <a href="#">1262243014</a> | 10/20/2024 | \$142.00 | Statement          | User Printed by alexramirez - Enhanced     |
| <input type="checkbox"/>            | BEAR, TORI       | <a href="#">1262243019</a> | 10/20/2024 | \$13.00  | Statement          | User Printed by alexramirez - Enhanced     |
| <input type="checkbox"/>            | TEST, ANGIE      | <a href="#">1262243020</a> | 10/20/2024 | \$837.00 | Statement          | User Printed by alexramirez - Enhanced     |
| <input type="checkbox"/>            | GROOT, IAM       | <a href="#">1262243023</a> | 10/20/2024 | \$13.10  | Statement          | User Printed by alexramirez - Enhanced     |
| <input type="checkbox"/>            | MCCLLOUD, FOX    | <a href="#">1270798112</a> | 11/12/2024 | \$20.00  | Estimate Statement | User Printed by danielgoldsmith - Enhanced |
| <input type="checkbox"/>            | TEST, JOHNNY     | 1289758024                 | 01/06/2025 | \$998.04 | Statement          | User Printed by josephmuniz - Plain Text   |

## Claim

- New Enhanced Auditing (Show History) for Claims** CollaborateMD has been working on a new enhanced auditing project that provides offices with an easy and transparent way of auditing changes made in the application. We previously released our new Enhanced User Auditing feature in the Customer Setup and Patient sections of the application, allowing users to see a detailed list of changes made to specific records throughout the application.

In this release, we are expanding our Enhanced Auditing functionality to the Claim section enabling users to track modifications, changes, and updates made to claims within CMD for better auditing and

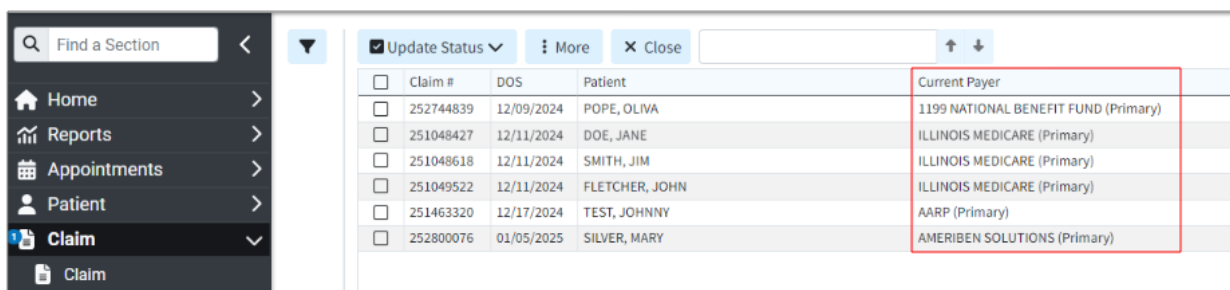
accountability. With the new "Show History" feature, you can now determine which user changed specific Claim information in the software and when, by providing an auditing table with all updates and changes made to a record, including the user, date and time, and the item changed.



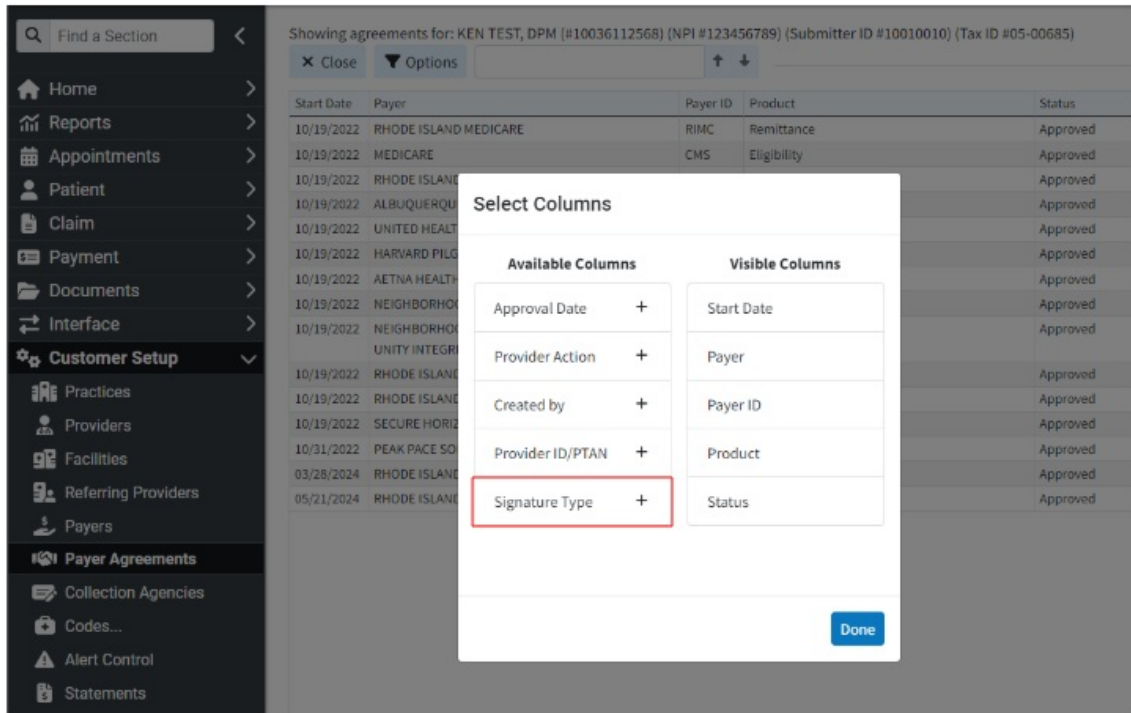
These new auditing records are also included in our existing User Audit Report, making it an even stronger tool for auditing multiple records simultaneously. The Show History capability has currently been deployed in the Customer Setup, Patient, and Claim sections, and we will be adding it to other sections of the application systematically.

For more information on using our new Add New Same/Similar Code List feature, please visit our [Enhanced Auditing Help Articles](#).

- **Status Control's "Current Payer" Column Update:** Updated the Status Control results screen to show more details about which payer is displayed. The "Current / Primary Payer" column will now be "Current Payer," and will include the payer priority (primary, secondary, tertiary) in parentheses if the filtered charge status is a payer status.



- **New Signature Type Column Within Agreement Lookup:** Added a new column, hidden by default, to the agreement lookup screen. This column will store and display the "Signature Type" (based on the Provider Action field received from ePS) and includes a new report field under Agreement Data. The possible actions for the "Signature Type" are:
  - \* Electronic Signature
  - \* Online Enrollment
  - \* Wet Signature
  - \* Other



## Payment Portal

- **New UI Updates to The Payment Portal:** Added some UI enhancements to the Payment Portal relate to new colors and margins for better consistency and a better customer experience. We also updated the Payment Portals password requirements to now require at least 12 characters and disallow the reuse of any previous passwords.

- 🏠 My Statement >
- 👤 Visit History
- 💰 Payment History
- ⚙️ Preferences
- ← Sign Out

**You owe \$877.00**

Due **today**. Thank you!

**Pay Now**

Pay Over Time!

**\$48.73 - \$146.17** per month.

**Choose Your Plan**

## Account Summary

|                       |          |
|-----------------------|----------|
| Total Charges         | \$877.00 |
| Insurance Payments    | \$0.00   |
| Insurance Adjustments | \$0.00   |

## Recent Visit Summary