

Release 16.10.0 - May 26, 2026

Modified on 05/26/2026 8:34 am EDT

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Highlights

New Features

Alternate Eligibility Payer ID
Universal Import Updates

Enhancements

Claim Status Service Information Now Displayed
New Alerts Column in Claim Control
New Alerts Side Panel in Follow Up Management
Charge Panel Limit Increased

New features

Alternate Eligibility Payer ID

Some HMO payers (specifically Independent Physician Associations, or IPAs, in California) have a specific network payer ID that provides claim services, while the regular payer ID is used for Eligibility. Users have previously requested that we update our system to add a separate connection for Eligibility when the main clearinghouse connection doesn't support Eligibility. In this release, a new checkbox has been added to the patient insurance policy section, allowing users to verify eligibility through an alternative payer. When selected, an additional field appears, enabling users to search for and designate a separate payer. This option is available only when the primary payer does not support eligibility verification.

Edit Policy

Insured Party Payer Info

Priority: Primary Policy Type: Other

Payer: ADVANCED MEDICAL DOCTORS OF CA (13451014)

Check eligibility using a different payer ID

Member ID: 65163512 Group ID:

Copay: 25.00 Co-Insurance %: 0 Deductible: 0.00 Out of Pocket Max: 0.00

Effective Date: Termination Date:

Done Cancel

or more info on how to set up a different payer ID for eligibility, visit our [Add Insured or Payer Policy Help Article](#).

Universal Import Updates

This release introduces more enhancements to the Universal Import feature to improve data matching accuracy, and reduce manual preparation across various import scenarios. These updates include:

- **Anesthesia Support:** Previously, customers were required to manually enter start and stop times for each anesthesia claim during the import process. This will now happen automatically while processing Universal Import files. The system now identifies start and stop times, calculates the duration of anesthesia, and automatically applies the appropriate units and pricing based on those minutes.
- **Fix Import Data Option:** When importing a file, users may receive a warning indicating insufficient information to create patients or claims. The system provides details specifying the requirements needed in the file to resolve these errors. This required the file to be updated and re-uploaded, even if the only change involved a field shared by all patients or claims, such as provider, date of service, or diagnosis. This release introduces a "Fix" button, allowing you to enter missing information directly during the import process. You no longer need to modify and re-import files; you can now update data for all patients or claims directly within the system at the time of import. Please note that this method is only suitable when the missing information is the same across all records, such as a shared diagnosis procedure code, or date of service. If the missing information varies, you must update the import file accordingly before uploading. This approach applies only when the data is identical for all items imported from the claim.

Universal Import: Review

If any data does not import correctly, please adjust column names in the imported file and try again
This file doesn't have enough information to create complete claims. Only patient information will be imported. See Data [Fix]

Patient	Provider	Facility	Charges	Unmatched Columns	
Insurance #1					
Header from File				CMD Field	Value from File
SSN				SSN	
Patient Last Name				Last Name	TestL
Patient First Name				First Name	TestF
DOB				Birth Date	07/26/1965
Gender				Gender	MALE
Address Line 1				Address Line 1	14 CINDY PLACE
City				City	Brentwood
State				State	CA
Zip Code				ZIP Code	94513
Insurance #2					
Header from File				CMD Field	Value from File
Insured Last Name				Insured Last Name	Reneberg
Insured First Name				Insured First Name	Alan
Insured Address Line 1				Insured Address Line 1	14 CINDY PLACE
Insured City				Insured City	Brentwood
Insured State				Insured State	CA
Insured Zip Code				Insured ZIP Code	94513

[import] [Back] [Cancel]

or more information on using the Fix option, visit our [Importing CSV, Excel, TSV, or Pipe-Delimited Files Help Article](#).

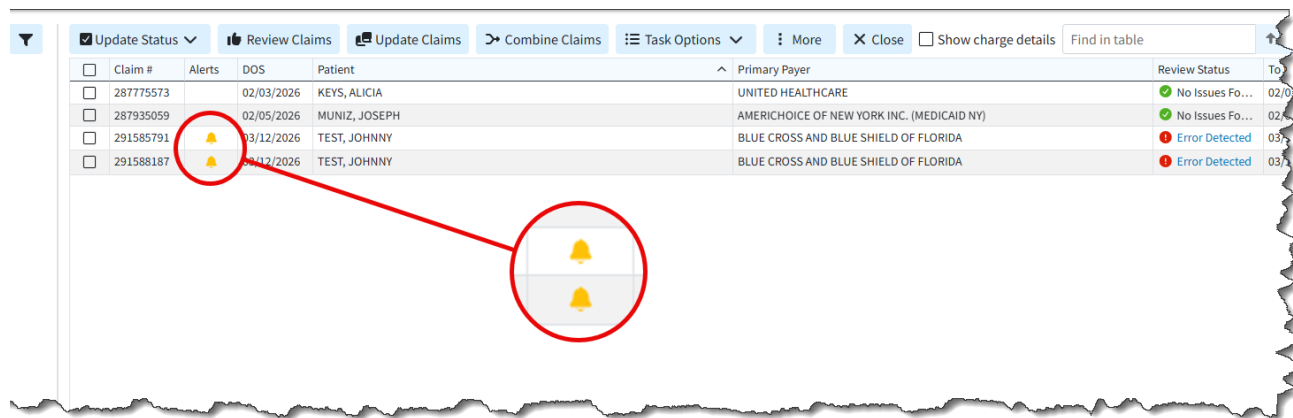
Enhancements

Claim Status Service Information Now Displayed

Previously, electronic claim status responses displayed claim-level payment information but omitted certain charge-level details provided by the payer. Consequently, data such as service line payment amounts were not captured, requiring users to contact the payer directly for this information. In this release, the system will automatically pull in the paid amount for each service line, provided the payer supplies this information. Access to this data will save customers time by eliminating the need to contact the payer for status updates.

New Alerts Column in Claim Control

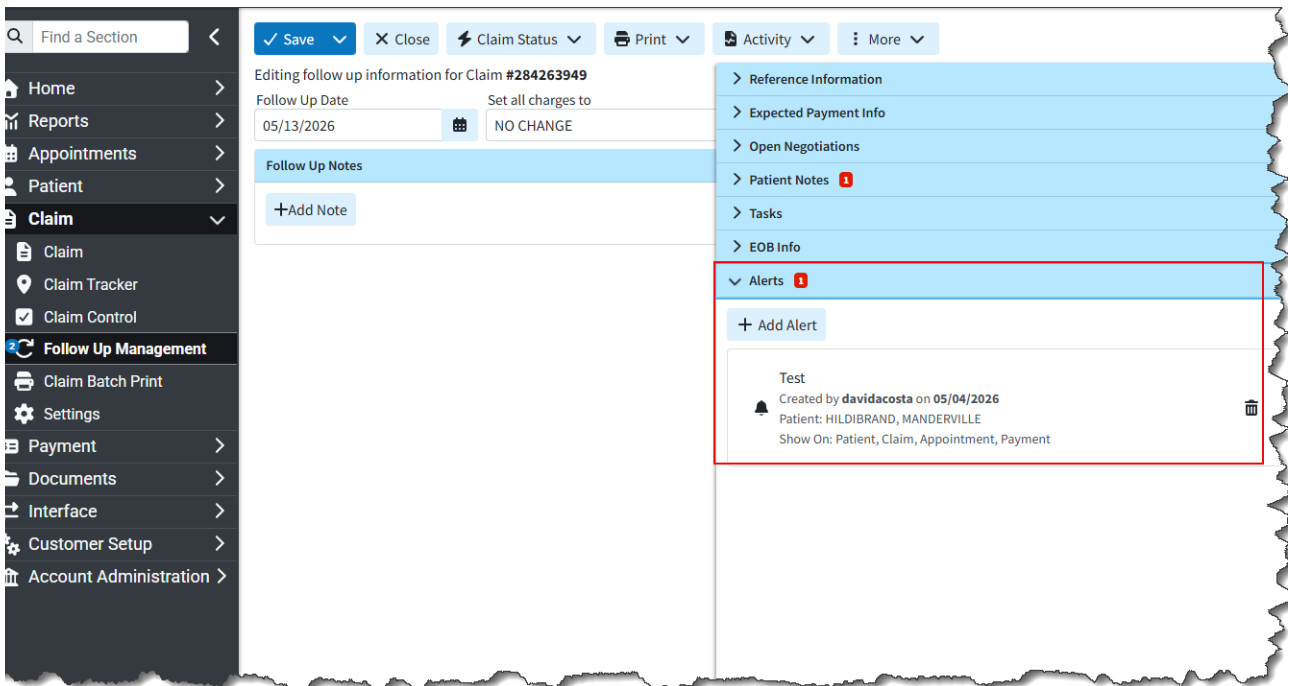
A new "Alerts" optional column has been added to the Claim Control table, allowing users to view alerts while reviewing claims prior to submission. This column is hidden by default and mirrors the functionality in Follow-Up Management, displaying a clickable yellow bell icon when alerts are present. Clicking the icon displays the claim alert pop-up.



Claim #	Alerts	DOS	Patient	Primary Payer	Review Status	To
287775573		02/03/2026	KEYS, ALICIA	UNITED HEALTHCARE	✔ No Issues Fo...	02/0
287935059		02/05/2026	MUNIZ, JOSEPH	AMERICHoice OF NEW YORK INC. (MEDICAID NY)	✔ No Issues Fo...	02/0
291585791	🔔	03/12/2026	TEST, JOHNNY	BLUE CROSS AND BLUE SHIELD OF FLORIDA	❌ Error Detected	03/1
291588187	🔔	03/12/2026	TEST, JOHNNY	BLUE CROSS AND BLUE SHIELD OF FLORIDA	❌ Error Detected	03/1

New Alerts Side Panel in Follow Up Management

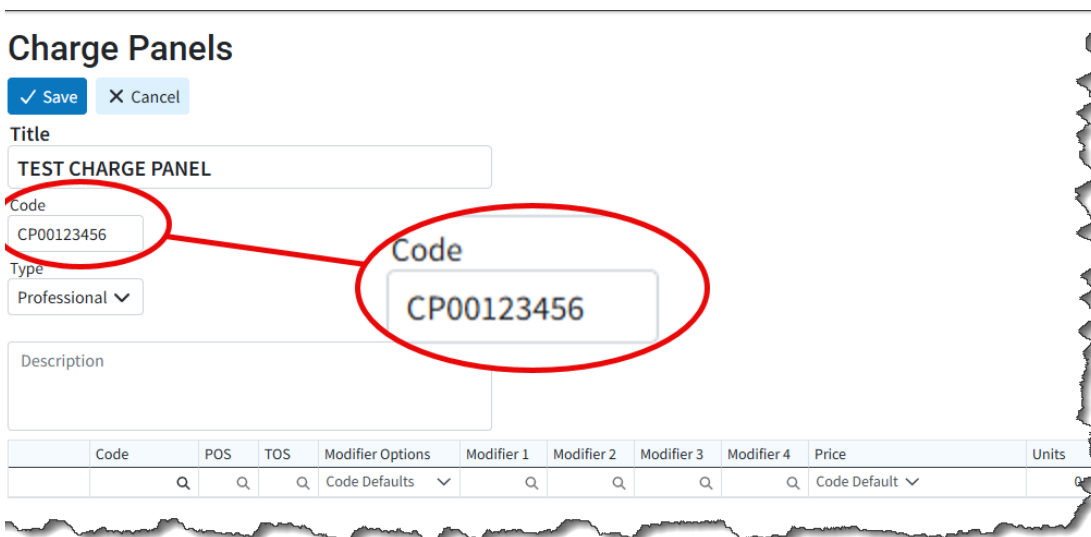
This release introduces alert visibility when viewing individual claims within Follow Up Management. Previously, alerts were only accessible via the main table's yellow bell icon. Users can now view or add alerts directly within the side panel, enabling immediate issue identification during claim processing.



Visit our [View/Add Alerts From Follow Up Help Article](#) for more information.

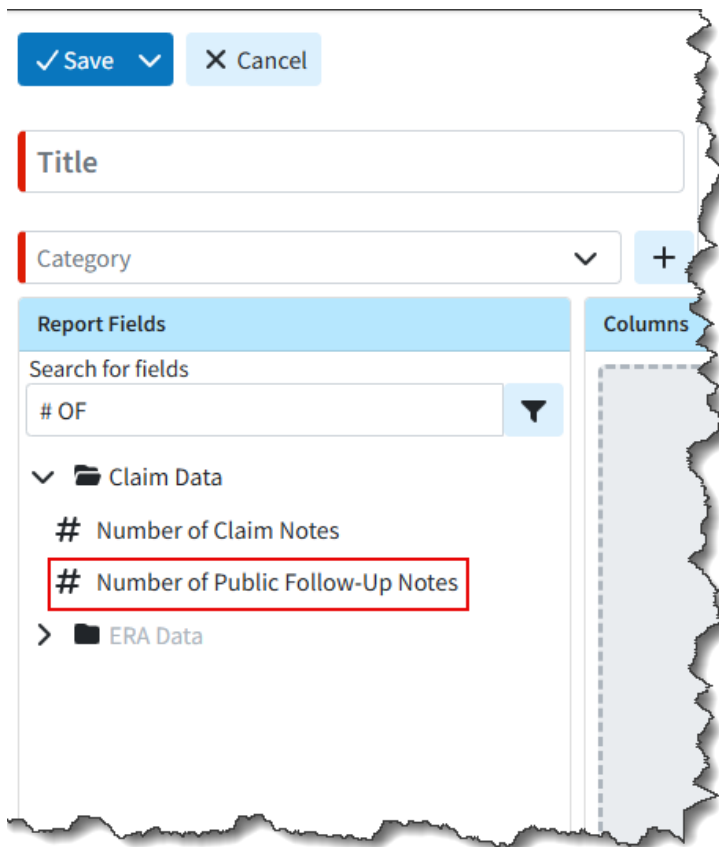
Charge Panel Limit Increased

Previously, our charge panels were limited to five-character codes, restricting the system to 999 panels. In this release, we have increased the code limit to 10 characters to support a larger volume of panels, allowing customers to create an unlimited number of charge panels per account.



New Report Field: # of Public Follow Up Notes

Previously, it was possible to retrieve the number of claim notes but not follow-up notes. This release introduces a new report field, "*# Number of Public Follow-Up Notes*," allowing users to see the number of public claim follow up notes in reports. This release also renames the existing "*# Number of Notes*" field to "*# Number of Claim Notes*."



Resolutions

Denials and Unpaid Reasons Reports Slowness When Using Remittance Received date

Resolved an issue causing slowness in "Denials and Unpaid Reasons" reports when using the Remittance Received date filter. This fix significantly improves the performance of the remittance received report filter for customers.

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