

Mental health software: 100 functions across nine providers

The best initial product is a connected outpatient practice workflow: client intake, scheduling, clinical documentation, a client portal and straightforward billing. TherapyNotes, SimplePractice, TheraNest and Sessions Health are the most relevant starting references. This is a product-design recommendation, not a claim that one vendor is universally best.

Nine providers and 100 defined functions

Every matrix cell has a score or an explicit unknown. Scores assess documented capability, not clinical effectiveness, usability or reliability.

Two markets require different recommendations

CareLogic targets agency complexity; Kipu brings treatment-center and residential operations. Their lower evidence floors here do not establish lower capability.

A mobile PWA alone is not a unique differentiator

Sessions Health explicitly supports a mobile-friendly browser workflow. Native clinician and patient apps must be assessed separately.

AI drafting is widely offered

The opportunity is to connect accurate records, review, signatures and follow-up around the draft. Ambient recording and prescribing should be later integration phases.

Review date: October 6, 2026. Public official sources only; no signed-in product trials were performed.

Provider scores and evidence coverage

Known points sum the verified scores (0, 1 or 2) across all 100 functions, out of 200. The lighter hatched bar shows the most a provider could reach if every unverified function earned a 2. It is a mathematical bound, not a prediction.

FIT	PROVIDER	KNOWN / 200	EVIDENCE FLOOR AND UPPER BOUND					SCORED	UNKNOWN	2	1	0	PRICE REFERENCE
			0	50	100	150	200						
1	TherapyNotes Outpatient practice · TN	135						71	29	64	7	0	Solo \$69/month; group \$79 first clinician + \$50 each additional.
2	SimplePractice Outpatient practice · SP	119						65	35	57	5	3	\$49 / \$79 / \$99 monthly; additional clinician charges and add-ons apply.
3	Ensora TheraNest Outpatient practice · EN	117						65	35	54	9	2	\$29 / \$59 / \$89 per therapist/month; usage and add-on conditions apply.
4	Sessions Health Outpatient practice · SH	121						68	32	57	7	4	\$39 first practitioner + \$29 each additional/month; telehealth \$10/practitioner/month.
5	Valant Outpatient / IOP / PHP · VA	108						59	41	49	10	0	Quote required; compare the exact modules, onboarding and transaction costs.
6	ICANotes Outpatient / psychiatry / SUD · IC	110						61	39	49	12	0	Tailored quote; clinician type and selected tools affect pricing.
7	TherapyAppointment Outpatient practice · TA	120						68	32	52	16	0	Solo introductory \$10, then \$39, then \$59/month as booked-

FIT	PROVIDER	KNOWN / 200	EVIDENCE FLOOR AND UPPER BOUND					SCORED	UNKNOWN	2	1	0	PRICE REFERENCE
			0	50	100	150	200						
													session thresholds are reached; add-ons extra.
8	Qualifacts CareLogic Enterprise agency · CL	67						40	60	27	13	0	Quote required. Implementation and module scope must be confirmed.
9	Kipu EMR + selected modules Treatment center / SUD / residential · KI	96						54	46	42	12	0	Quote required. EMR, CRM, RCM, AI and engagement modules are distinct commercial scopes.
Known points are documentation floors, not overall quality scores. Fit rank is a separate analyst recommendation for a first outpatient-practice product.													

Known points Possible upper bound if every unknown scored 2

How to read the scores

2

Documented

Official product or help material supports the stated minimum function.

1

Partial or restricted

Only part of the function is established, or the offering is explicitly limited, such as a telehealth-only app.

0

Unavailable

The documented offering excludes the function or names a browser-only substitute for a native app.

?

Unverified

The reviewed sources did not establish it. This is not a negative judgment.

2 – Documented: Official product/help material supports the stated minimum function. This does not imply best-in-class depth or availability on the cheapest plan.

1 – Partial/Restricted: Only part of the defined function is established, or the documented offering is explicitly restricted (for example, a telehealth-only mobile app or an early-access companion).

0 – Unavailable: The documented offering explicitly excludes the function or identifies a browser-only substitute rather than a native app.

? – Unverified: The reviewed source set did not establish the function. This is not a negative capability judgment. A demo or targeted technical inquiry may resolve it.

Known points / 200 sum only verified 0/1/2 scores across 100 functions. **Evidence coverage** counts scored functions; **possible upper** assumes every unknown earns 2 and is only a mathematical bound. Unknowns are never represented as measured zeros. These overlapping bounds do not justify an objective total-quality ranking.

Paid tiers, usage fees and modules are not capability penalties. Score-cell details identify commercial scope where verified. "Commercial scope" means pricing/tier/module/transaction conditions require checking; it does not mean every listed function costs extra on every plan.

Category totals have different maxima because category sizes differ. Every function has equal weight in the overall evidence floor, although these capabilities are correlated and their business importance differs. Use the category view to match a customer segment rather than treating a count as product quality.

The fit rank is a separate analyst recommendation for an initial outpatient-practice product, based on workflow relevance, public pricing and documented operational scope. It is not calculated from known points. The 100 functions are a curated product-design checklist, not a measured popularity ranking.

Competitor profiles and fit ranking

This order reflects fit for the first outpatient-practice build. For an agency, begin with CareLogic; for a residential or SUD treatment center, begin with Kipu and ICANotes. Their placement below is about target fit, not product inferiority.

#1 TherapyNotes

Outpatient practice

Strong documentation and insurance workflow benchmark; mobile companion available.

PRICE REFERENCE

Solo \$69/month; group \$79 first clinician + \$50 each additional.

EVIDENCE

135 known points · 71 scored · 29 unknown

#2 SimplePractice

Outpatient practice

Strong client experience and native mobile benchmark; group workflows require the appropriate plan.

PRICE REFERENCE

\$49 / \$79 / \$99 monthly; additional clinician charges and add-ons apply.

EVIDENCE

119 known points · 65 scored · 35 unknown

#3 Ensora TheraNest

Outpatient practice

Best reference for connected scheduling, portal relationships and configurable billing automation.

PRICE REFERENCE

\$29 / \$59 / \$89 per therapist/month; usage and add-on conditions apply.

EVIDENCE

117 known points · 65 scored · 35 unknown

#4 Sessions Health

Outpatient practice

Focused and affordable workflow model for a first product; mobile-friendly browser experience.

PRICE REFERENCE

\$39 first practitioner + \$29 each additional/month; telehealth \$10/practitioner/month.

EVIDENCE

121 known points · 68 scored · 32 unknown

#5 Valant

Outpatient / IOP / PHP

Useful benchmark for outcomes, psychiatric care and structured outpatient programs.

PRICE REFERENCE

Quote required; compare the exact modules, onboarding and transaction costs.

EVIDENCE

108 known points · 59 scored · 41 unknown

#6 ICANotes

Outpatient / psychiatry / SUD

Useful for menu-driven charting, medication workflows and behavioral-health program depth.

PRICE REFERENCE

Tailored quote; clinician type and selected tools affect pricing.

EVIDENCE

110 known points · 61 scored · 39 unknown

#7 TherapyAppointment

Outpatient practice

Broad practice workflows, supervision and client communications; clear core/add-on separation.

PRICE REFERENCE

Solo introductory \$10, then \$39, then \$59/month as booked-session thresholds are reached; add-ons extra.

EVIDENCE

120 known points · 68 scored · 32 unknown

#8 Qualifacts CareLogic

Enterprise agency

Agency benchmark for configurable programs, outcomes, interoperability and payer/state requirements.

PRICE REFERENCE

Quote required. Implementation and module scope must be confirmed.

EVIDENCE

67 known points · 40 scored · 60 unknown

#9 Kipu EMR + selected modules

Treatment center / SUD / residential

Treatment-center benchmark for admissions, occupancy, medication administration and clinical/RCM integration.

PRICE REFERENCE

Quote required. EMR, CRM, RCM, AI and engagement modules are distinct commercial scopes.

EVIDENCE

96 known points · 54 scored · 46 unknown

Five additional categories reveal implementation depth

The original six categories are retained, with 20 extra functions added to their session, intake, mobile and billing workflows. Thirty additional functions form five new categories:

- **Practice administration — 5 functions:** Individual staff accounts, billing/clinical separation, compensation reports, multiple billing entities and assigned tasks. Compensation reports do not imply payroll disbursement.
- **Referrals and care coordination — 5 functions:** Referral/admission stages, record-release authorization, outbound fax, provider directories and post-discharge engagement. A referral-source field is not a full admission pipeline.
- **Medication management — 8 functions:** Medication history, allergies, interaction checks, controlled prescribing, monitoring databases, refill requests, administered doses and lab interfaces. These are specialist prescribing/treatment-center functions, and should follow the launch market.
- **Security and compliance — 8 functions:** Staff MFA, mandatory MFA, record-access auditing, encryption, BAA, recovery safeguards, inactivity logout and federated SSO. Vendor statements document advertised controls; they do not independently establish the customer's compliance.
- **Interoperability and migration — 4 functions:** Demographic import, historical clinical records, standards-based health exchange and a developer API. Import scope and developer access are distinct from exports and calendar sync.

SimplePractice's feature FAQ explicitly excludes public API access and integrated fax. ICANotes, CareLogic and Kipu document developer interfaces with different access scopes. This matters if integration will differentiate your product.

Migration also varies: SimplePractice excludes clinical-note imports from other systems, while Sessions Health documents bulk historical-document migration. Neither statement proves automatic conversion into editable, structured notes.

For the development environment, add staff permissions, MFA, record-access logs, session timeout and import/export to the foundation. Add staff tasks, compensation calculations and release forms to the next wave. Scope clinical exchange, prescribing and labs as integrations. Medication administration and alumni outreach belong in a treatment-center edition.

The original outpatient-fit order is retained. The expanded evidence floors are not a new overall-quality ranking; different documentation coverage and specialist modules still prevent that inference.

Category scores and evidence gaps

Category	Functions	TN	SP	EN	SH	VA	IC	TA	CL	KI
Intake and relationships	8	9/16 3 unknown	13/16 1 unknown	13/16 1 unknown	11/16 2 unknown	11/16 1 unknown	7/16 4 unknown	10/16 2 unknown	6/16 5 unknown	9/16 3 unknown
Scheduling	11	19/22 1 unknown	13/22 4 unknown	18/22 2 unknown	18/22 1 unknown	19/22 1 unknown	15/22 3 unknown	8/22 7 unknown	11/22 5 unknown	11/22 5 unknown
Clinical documentation	16	26/32 3 unknown	22/32 5 unknown	19/32 6 unknown	22/32 4 unknown	21/32 5 unknown	17/32 7 unknown	21/32 4 unknown	9/32 11 unknown	15/32 8 unknown
Client experience and mobile	9	14/18 2 unknown	18/18 0 unknown	11/18 1 unknown	12/18 1 unknown	13/18 2 unknown	10/18 4 unknown	15/18 0 unknown	6/18 5 unknown	15/18 0 unknown
Billing and financial operations	18	27/36 4 unknown	23/36 6 unknown	27/36 4 unknown	29/36 3 unknown	18/36 9 unknown	14/36 10 unknown	22/36 5 unknown	8/36 13 unknown	8/36 12 unknown
AI, governance and specialty	8	10/16 2 unknown	6/16 5 unknown	10/16 2 unknown	10/16 2 unknown	8/16 3 unknown	13/16 1 unknown	9/16 3 unknown	12/16 2 unknown	11/16 2 unknown
Practice administration New category	5	4/10 3 unknown	4/10 3 unknown	8/10 1 unknown	7/10 1 unknown	4/10 3 unknown	3/10 3 unknown	5/10 2 unknown	2/10 3 unknown	4/10 3 unknown
Referrals and care coordination New category	5	0/10 5 unknown	4/10 1 unknown	1/10 4 unknown	0/10 5 unknown	1/10 4 unknown	1/10 4 unknown	3/10 3 unknown	1/10 4 unknown	5/10 2 unknown
Medication management New category	8	10/16 3 unknown	8/16 4 unknown	5/16 5 unknown	0/16 7 unknown	13/16 1 unknown	13/16 1 unknown	12/16 2 unknown	1/16 7 unknown	10/16 3 unknown
Security and compliance New category	8	13/16 1 unknown	6/16 5 unknown	5/16 5 unknown	8/16 4 unknown	0/16 8 unknown	10/16 2 unknown	12/16 2 unknown	7/16 3 unknown	6/16 5 unknown
Interoperability and migration New category	4	3/8 2 unknown	2/8 1 unknown	0/8 4 unknown	4/8 2 unknown	0/8 4 unknown	7/8 0 unknown	3/8 2 unknown	4/8 2 unknown	2/8 3 unknown

Each cell shows confirmed points over the category maximum, and the number of unknown functions. Shading follows confirmed share of the maximum; unknowns are not counted as zeros.

The 100-function comparison

Select a score to read its assessment and official source. A ? means unknown, not zero. The original 50 IDs are retained; added functions have IDs 51 to 100. A dot on a score marks an availability or commercial-scope qualification.

Intake and relationships 8 functions

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
1	Client chart MVP Demographics plus a longitudinal clinical/client record.	2	2	2	2	2	2	2	2	2
2	Custom digital intake MVP Client-completed intake with customizable form content.	2	2	2 [•]	2	2	2	2	2 [•]	2
3	Consent and e-signatures MVP Client consent documents can be signed electronically.	2	2	1	2	1	2	2	2 [•]	?
4	Guardian/contact permissions MVP Separate authorized contact access with configurable permission boundaries.	1	2	2	1	1	?	1	?	1
5	Couple/family workflows PHASE 2 Explicit couple/family workflow; group notes alone count only as partial.	?	1	2	2	1	1	?	?	?
51	Prospective-client records MVP Track a prospect separately before activation or admission.	?	2 [•]	2	?	2	?	1	?	2
52	Referral-source attribution PHASE 2 Store where a client was referred from, connected to the client record.	?	2	2	?	2	?	2	?	2 [•]
53	Chosen names and pronouns MVP Separate preferred/chosen name or legal-name handling plus pronoun fields.	2	?	?	2	?	?	?	?	?

Scheduling 11 functions

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
14	Diagnosis coding MVP Structured diagnosis/code fields connected to clinical/billing records.	2	2	2	2	2	2	2	?	?
15	Treatment plans and goals MVP Plans record individualized treatment goals/objectives.	2	2	2	2	2	2	2	2	2
16	Goal-to-note linkage PHASE 2 Treatment goals/objectives carry into or link directly to progress notes.	2	?	1	2	2	1	2	1	2
17	Group session notes PHASE 2 Document multiple clients in a group-session workflow.	2	2 [•]	2	?	2	2	2	?	2
18	Supervisor review/co-sign PHASE 2 Explicit supervised documentation review/signature workflow.	2	2 [•]	2	2	?	?	2	?	?
19	Signed-note lock/amend workflow MVP Explicit signed-note locking or controlled amendment/version workflow.	?	2	?	?	?	?	2	?	?
20	Scored outcome measures and trends PHASE 2 Standardized questionnaires with scoring and longitudinal results.	2	2	?	2	2	2	?	2	2
21	Separate psychotherapy notes MVP Private/process notes separate from standard progress documentation.	2	2	?	2	1	?	2	?	?
22	File/document attachments MVP Attach or share supporting files in the client/clinical workflow.	2	2	2	2	2	?	2	2	2
23	Missing documentation follow-up MVP Explicit status, task or reminder for incomplete/missing clinical documents.	2	?	2	1	2	?	1	?	2
24	Discharge/termination summary PHASE 2 Dedicated discharge/termination document or template.	?	?	?	2	2	2	1	?	?
58	Structured mental status exam PHASE 2 Dedicated mental-status examination fields or explicit MSE template.	2	2 [•]	?	?	?	2	?	?	?
59	Structured clinician risk assessment PHASE 2 Dedicated clinician-completed risk/suicidality assessment fields or template; no autonomous risk decision.	2	?	2 [•]	1	?	2 [•]	?	?	?

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
60	Assign standardized questionnaires Send or assign a standardized clinical measure to an individual client. PHASE 2	2	2	2	2	2	?	1	?	1
61	Search clinical document content Search within note/document text across a client chart; client-name search alone does not qualify. PHASE 2	?	?	?	?	?	?	?	?	?

Client experience and mobile 9 functions

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
25	Client portal Authenticated client interface for practice interactions. MVP	2	2	2	2	2	2	2	2	2
26	Secure client messaging Secure two-way practice/client messages. MVP	2	2	2	2	2	2	2	1	2
27	Secure staff messaging Explicit secure internal team communication. PHASE 2	2	2	?	?	?	2	1	?	2
28	Individual telehealth Video session connected to clinical appointment workflow. INTEGRATION	2	2	2	2	2	2	2	2	2
29	Group telehealth Multiple clients can join the same therapy video session. INTEGRATION	2	2	2	2	2	2	2	?	2
30	Mobile browser access Documented clinician or portal access through a mobile browser. MVP	2	2	1	2	2	?	2	?	2
31	Native clinician mobile app Native staff app for multiple practice functions; recording/video-only counts partial. LATER	2	2	0	0	?	?	1	1	1
32	Native client mobile app Native patient app for broad portal use; video/alumni-only counts partial. LATER	?	2	0	0	2	?	1	?	1
70	Mobile intake/form completion Client completes intake/forms in a mobile app or supported mobile browser. MVP	?	2	2	2	1	?	2	?	1

Billing and financial operations 18 functions

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
33	Invoices and statements MVP Generate client billing documents and track balances.	2	2	2	2	2	2	2	2	1
34	Integrated card collection INTEGRATION Collect card payments from the application/portal via a processor.	2	2	2	2	2	2	2	2	?
35	Automatic client payments INTEGRATION Automatically charge saved payment methods for due balances.	2	2	?	2	?	?	1	?	?
36	Superbills PHASE 2 Generate reimbursement-ready out-of-network billing documents.	2	2	2	2	2	?	1	?	?
37	Insurance eligibility INTEGRATION Integrated insurance coverage/benefit verification.	2	2	2	2	2	2	2	1	2
38	Electronic claims and status INTEGRATION Electronic claim submission with status/rejection follow-up.	2	2	2	2	2	2	2	1	1
39	ERA payment posting INTEGRATION Post electronic remittance payments; one-click posting meets this definition.	2	2	2	2	2	2	2	?	?
40	Claim rejection/denial work queue INTEGRATION Identify claims needing correction and support follow-up; rejection-only counts partial.	1	2	2	?	?	1	2	?	?
41	Authorization/session tracking LATER Track payer authorizations and remaining services/expiration.	2	?	?	?	2	?	?	?	1
42	Financial reporting MVP Income, outstanding balances or accounts-receivable reporting.	2	2	2	2	2	2	2	2	2
43	Clinician productivity reporting PHASE 2 Clinician-level activity, attendance or performance reporting.	?	1	2	1	?	?	2	?	1
62	Secondary insurance claims INTEGRATION Create/submit secondary-payer claims with primary payment or adjustment data.	2	2	2	2	?	?	?	?	?
63	Batch claim submission INTEGRATION Submit multiple electronic claims through a single selected batch.	?	?	?	2	?	?	?	?	?
64	Payment refunds INTEGRATION	?	?	2	2	?	?	1	?	?

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
	Process a client payment refund or record an externally processed refund.									
65	Aged accounts receivable PHASE 2 Aging breakdown of unpaid payer or client balances, rather than a single total.	2	?	1	?	2	?	?	?	?
66	Client transaction ledger MVP View client charges, payments and adjustments as a transaction history.	2	2	2	2	?	1	2	?	?
67	Sliding-scale/client-specific rates MVP Set a client-specific service fee that can differ from practice defaults.	?	?	?	2	?	?	?	?	?
68	Manual insurance payment allocation INTEGRATION Record a payer payment and allocate it to service charges, apart from automated ERA posting.	2	?	2	2	?	?	1	?	?

AI, governance and specialty 8 functions

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
44	AI draft notes PHASE 3 AI generates a draft progress note for human approval.	2 [•]	2 [•]	2 [•]	2 [•]	2 [•]	2 [•]	2 [•]	2 [•]	2 [•]
45	Ambient recording to draft note PHASE 3 Capture session audio and generate a clinician-reviewed note.	2 [•]	2 [•]	2 [•]	2 [•]	2 [•]	2 [•]	2 [•]	2 [•]	2 [•]
46	AI longitudinal case summary PHASE 3 AI summarizes multiple existing clinical documents; single-session summary is partial.	2	?	2	2	?	?	1	?	2
47	Electronic prescribing LATER Integrated electronic prescriptions to pharmacies.	2 [•]	2 [•]	2 [•]	0	2 [•]	2 [•]	2 [•]	2 [•]	2 [•]
48	Role controls and audit trail MVP Role-based clinical access plus a documented activity audit mechanism.	1	?	1	2	?	2	?	2	1
49	Data export / integration access MVP Documented export or API path; limited report/client export counts partial.	1	?	1	2	1	1	2	2	?
50	Agency/SUD/residential depth LATER	?	?	?	?	1	2	?	2	2

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
	Program/level-of-care workflows; residential meds/occupancy or agency billing add depth.									
69	Documentation-based code suggestions LATER Suggest billing codes from completed documentation; rules-based coding also qualifies.	?	?	?	?	?	2	?	?	?

Practice administration 5 functions

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
71	Individual staff account provisioning MVP Create/invite distinct staff logins and assign staff roles.	2	2	2	2	?	2	2	1	2
72	Clinical versus billing access MVP Give billing/front-office staff access without granting unnecessary clinical-note access.	2	2	2	2	?	1	1	1	2
73	Clinician compensation calculations PHASE 2 Report clinician payouts using collection/service-based compensation rules; payroll disbursement is not required.	?	?	2	2	2	?	2	?	?
74	Multiple billing entities LATER Manage multiple tax-ID/billing entities within one organization, beyond multiple physical locations.	?	?	?	1	2	?	?	?	?
75	Assignable staff tasks PHASE 2 Assign a task to another staff member with completion/due-date tracking.	?	?	2	?	?	?	?	?	?

Referrals and care coordination 5 functions

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
76	Referral/admission pipeline PHASE 2 Track referral/admission stages and progress; referral-source field alone is insufficient.	?	1	?	?	1	?	?	1	2
77	Release-of-information workflow PHASE 2 Create and sign a client-specific authorization to release clinical records; full revocation tracking is not required.	?	2	?	?	?	1	?	?	?
78	Outbound electronic fax INTEGRATION Send clinical/referral information via integrated outbound fax.	?	0	?	?	?	?	1	?	?

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
79	Referring-provider directory PHASE 2 Maintain reusable external provider/referrer contacts with communication details.	?	1	1	?	?	?	2	?	1
80	Post-discharge/alumni follow-up LATER Dedicated post-discharge/alumni contact or engagement management, beyond a discharge note.	?	?	?	?	?	?	?	?	2

Medication management 8 functions

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
81	Medication history/reconciliation INTEGRATION Review/document current and historical medications in a medication-management workflow.	2	2	1	?	2	2	2	?	2
82	Structured medication allergies INTEGRATION Store structured medication allergy entries in the chart or integrated prescribing system.	2	?	2	?	2	2	2	?	2
83	Drug interaction checks INTEGRATION Integrated prescription/order checks for medication interaction alerts.	?	?	?	?	2	2	2	?	2
84	Controlled-substance prescribing INTEGRATION Integrated electronic prescribing of controlled substances following enrollment.	2	2	?	0	2	2	2	?	?
85	PDMP database access INTEGRATION Access prescription monitoring information through an integrated provider workflow.	2	2	?	?	2	2	2	?	?
86	Electronic refill requests INTEGRATION Receive/manage pharmacy refill requests or medication renewals electronically.	2	2	2	?	2	2	2	?	?
87	Medication administration record LATER Track administered/observed doses with a MAR; prescribing alone does not qualify.	?	?	?	?	?	?	?	?	2
88	Electronic lab orders and results INTEGRATION Send lab orders and receive results through an integrated interface.	?	?	?	?	1	1	?	1	2

Security and compliance 8 functions

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
89	Staff two-factor authentication MVP Additional authentication factor for ordinary staff login; EPCS-only authentication does not qualify.	2	2	2	2	?	2	2	2	2
90	Practice-wide mandatory MFA MVP Administrator can require staff MFA across the organization.	2	?	2	?	?	?	2	?	2
91	Client-record access auditing MVP Audit which staff viewed/accessed specific client records, beyond login history alone.	2	2	1	2	?	2	?	1	?
92	Encryption at rest and in transit MVP Official material documents protection of stored data and network transmission.	2	?	?	2	?	1	2	1	?
93	Business Associate Agreement MVP Published provider BAA or explicit offer/execution of a BAA for covered customers.	2	2	?	?	?	2	2	1	?
94	Backup and recovery safeguards MVP Published backup and disaster recovery/recovery safeguards; backups alone are partial.	1	?	?	2	?	1	?	?	?
95	Automatic session timeout MVP System signs users out after inactivity or offers configurable timed logout.	2	?	?	?	?	2	2	?	?
96	Federated single sign-on LATER Staff login through an organization identity provider; portal login alone is insufficient.	?	?	?	?	?	?	2	2	2

Interoperability and migration 4 functions

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
97	Bulk demographic import MVP Import a client list/demographic spreadsheet or equivalent structured file.	2	2	?	2	?	2	2	?	?
98	Historical clinical record migration PHASE 2 Import existing clinical notes/documents in bulk; manual single-file upload is partial.	1	0	?	2	?	1	?	?	?

#	FUNCTION AND MINIMUM SCOPE	TN	SP	EN	SH	VA	IC	TA	CL	KI
99	Standards-based health-data exchange									
	INTEGRATION FHIR, HL7, Direct or HIE clinical exchange; general calendar sync does not qualify.	?	?	?	?	?	2	1	2	?
100	Documented developer API									
	LATER Published API documentation or API scope for approved developers; registration/fees are allowed.	?	0	?	?	?	2	?	2	2

TN = TherapyNotes · SP = SimplePractice · EN = Ensora TheraNest · SH = Sessions Health · VA = Valant · IC = ICANotes · TA = TherapyAppointment
· CL = Qualifacts CareLogic · KI = Kipu EMR + selected modules

What to build in the development environment

Wave 1: connected practice foundation. Practice/tenant setup, staff roles, client charts, custom intake, consent signatures, recurring appointments, clinician availability, reminders, progress-note templates, diagnosis entry, treatment plans, private psychotherapy notes, attachments, documentation follow-up, client portal, messaging, invoices, balances and export. Signed clinical documents need controlled amendments and an audit record from the start.

Wave 2: group-practice depth. Guardian-specific access, joint/couple records, waitlists, room/resource scheduling, external calendar integration, group documentation, supervisor review/co-signing, objective-to-note linkage, scored assessments and outcome trends, discharge documents, clinician reports and superbills. Guardian access belongs in Wave 1 whenever minors are in the launch population.

Wave 3: clinician-reviewed AI. Draft notes from a clinician summary first; then consent-based ambient recording, transcript handling and longitudinal summaries. Every generated statement should be traceable to the input record, and unsupported facts should remain blank. Clinicians must review and sign. Add tasks for unsigned notes and incomplete intake, using actual workflow status rather than speculative clinical decisions.

Integrations, separately scoped: Video sessions, tokenized card payments/Autopay and later clearinghouse eligibility, claims, remittances and exception follow-up. Specialist prescribing integration comes after the intended customer requires psychiatric medication management. RCM software and outsourced billing staff are different deliverables.

Defer enterprise treatment-center operations: Residential occupancy, medication administration, complex institutional billing, multi-program state requirements and agency-level interoperability. These are useful references from ICANotes, CareLogic and Kipu, but they substantially expand the first release.

The strongest differentiator to validate is a complete, easy-to-follow workflow with transparent pricing, dependable mobile access and clear follow-up. Neither a generic calendar nor an AI note generator by itself reproduces this category.

Production boundaries

Use synthetic patient data while building in the development environment. Before processing real patient records, verify the deployed application's hosting contracts, business associate agreements, access controls, audit logging and integration terms. A generated application or a security scan alone does not establish healthcare compliance.

Evaluate an independently deployed production architecture, provider contracts and safeguards before real patient data is introduced. HHS cloud guidance describes applicable cloud-provider business associate agreements and HIPAA responsibilities. The exact requirements depend on the launch market and service scope.

Before a production pilot, verify tenant isolation, clinical/billing/guardian role boundaries, signed-note amendments, consent history, exports, backup/restore and notification content. Appointment reminders should avoid unnecessary clinical details. Licensed clinical content, such as commercial treatment-planner libraries, needs its own permission; implement independently designed workflows and templates.

Evidence limits and vendor questions

Sources include current product pages and official help articles, some describing older releases. Current pricing pages govern the price summaries. Historical support claims about free users or one free portal user were excluded where current tiered pricing supersedes them. This report does not assume features in Ensora Fusion, other Ensora products, Qualifacts Credible or InSync automatically exist in TheraNest or CareLogic.

CareLogic's iQ clinical documentation and recording app are included; Qualifacts' billing/scheduling agents described as Credible-only are not assigned to CareLogic. Kipu Helix is scored as restricted early access, and Kipu's alumni engagement app is not treated as equivalent to a broad patient portal app. TherapyAppointment's native app is likewise treated as telehealth-focused.

Unknowns are deliberately retained where public evidence is insufficient. Full-text note search remains unverified across this reviewed set; do not infer it from client-name search. Clinical-record migration means document migration unless a source explicitly promises structured note conversion. Historical certified-module evidence is scored as partial when current availability is uncertain.

The highest-value demo checks are guardian boundaries, joint-family records, signed-note amendment controls, automatic payment behavior, prior-authorization utilization, denial follow-up, exact mobile feature parity and complete clinical data portability. Ask vendors to demonstrate the same synthetic client moving from intake through session, signature, invoice/claim, payment and export.

Pricing figures are US advertised subscription prices or quote-based scope as reviewed. They exclude promotions, taxes, payment processing, implementation and unspecified modules. Conflicting telehealth price descriptions on TherapyAppointment pages were not resolved into a single asserted price; confirm the exact integration and current quote.

This is a desk-research comparison. Availability, reliability, response times, clinical effectiveness, migration quality and hands-on usability were not tested. Treat "documented" as evidence of an advertised workflow, not independent verification.

Official source register

Reviewed October 6, 2026. Every scored cell in the matrix keeps its assessment and source.
188 sources are listed.

TN1	TherapyNotes subscription and options Pricing; messaging; portal; telehealth; insurance services
TN2	TherapyNotes Quick Start: Notes Intake, diagnoses, treatment plans and goal carry-forward
TN3	Schedule a Clinical Appointment Recurring appointments and clinician/service selection
TN4	TherapyNotes Mobile Native clinician companion; agenda, patient access, messaging
TN5	TherapyFuel Overview Draft documentation and client history summaries
TN6	TherapyFuel Scribe Session transcription and note drafts
TN7	TherapyNotes outcome measures Questionnaires and automatic scoring
TN8	Visualizing Outcome Measures Longitudinal graphs and score export
TN9	Set Up Supervision Supervisor review/co-sign options
TN10	Complete a Psychotherapy Note Separate psychotherapy note type

TN11	Billing Overview Patient accounts, statements, insurance and superbills
TN12	TherapyNotes AutoPay Automatic overnight balance collection
TN13	Prior Authorization Overview Authorization usage, units and expiration
TN14	Group Progress Note Wizard Group DAP documentation
TN15	Create a Note Automatic documentation to-do items
TN16	Quick Start: Scheduling Practice calendar and external calendar sync
TN17	Main Billing Page Billing reports and spreadsheet export
TN18	Claim rejection explanation Rejection reasons and correction guidance; historical feature documentation
SP1	SimplePractice plan comparison Plan gates, scheduling, claims, reports, prescribing and AI add-ons
SP2	Client Portal setup Intake, authorized contacts, messages, appointments and billing
SP3	Group practice setup Templates, diagnosis/treatment plans and supervised review
SP4	Clinician iOS mobile app Native mobile notes, messages, payments; desktop-only limitations
SP5	Client Portal mobile app iOS/Android client and contact portal app

SP6	Prebuilt template library Scored measures, intake, notes, treatment plans
SP7	Psychotherapy notes Separate psychotherapy notes
SP8	Signing under supervision Supervisor signature and lock workflow
SP9	Client billing getting started Billing and AutoPay
EN1	TheraNest product Multi-clinician/multi-location practice, templates and broad workflows
EN2	TheraNest scheduling Recurring sessions, room conflicts, online requests, reminders, calendar sync
EN3	TheraNest Client Portal Guardian/contact permission boundaries and portal functions
EN4	TheraNest automated billing Invoices, claims, payer rules, ERA posting and exceptions
EN5	Ensaï AI note assistance, recording consent and case summaries
EN6	TheraNest pricing Plan gates and usage allowances
EN7	Supported devices and browsers No dedicated app; desktop optimized; mobile browser access
EN8	Counseling EHR Assessment, group, progress, contact notes; missing-note reminders
EN9	Treatment plan editing Multiple goals, objectives and status

EN10	Supervisor document notifications Supervisor submission and review notifications
EN11	TheraNest reporting Attendance, billing, missing/signed notes and Excel export
EN12	Ensora products and add-ons Telehealth, payments, clearinghouse, prescribing and RCM service scope
EN13	Client data export Client exports; no bulk note-history export documented
EN14	Nonprofit practice features Activity log and practice roles; historical pricing claims excluded
EN15	Client intake process Client record and diagnosis/treatment workflow
SH1	Sessions Health documentation Custom intake, signatures, goals/notes, autoscored assessments
SH2	Sessions Health scheduling Calendar sync, online requests, couple/family scheduling and room checks
SH3	Sessions Health billing Autopay, invoices, superbills, claims, eligibility and ERA posting
SH4	Sessions Health portal Portal access and client communication
SH5	Sessions Health AI Recorded/written session inputs and draft notes
SH6	Questions about Sessions Health Mobile browser/home-screen route; Claim.MD connectivity
SH7	Creating Progress Notes Private notes, diagnoses, attachments, discharge template; no eRx

SH8	Supervision setting up Required signatures and document review
SH9	AI Treatment Summary AI summaries from eligible clinical documents
SH10	Data questions and export Billing/clinical PDF export and client demographics spreadsheet
SH11	Security and privacy Role permissions and activity audit logs
SH12	Sessions Health pricing Subscription and usage/add-on costs
SH13	Sessions client help categories Documented waitlist feature
VA1	Valant product overview Clinical and administrative product modules
VA2	Valant clinical documentation Templates, outcomes, treatment-plan sync, family/group notes and mobile browser
VA3	Valant intake automation Program/provider based intake and assessment delivery
VA4	Valant scheduling Recurring individual/group sessions, waits, calendar sync and documentation status
VA5	Valant billing Eligibility, claim bundling, ERA posting, superbills and aging
VA6	MYIO portal App/browser portal, messages, intake, payments and group sessions
VA7	Valant AI Notes Assist Ambient in-person/telehealth documentation

VA8	Valant plans and pricing Quote-based plan/module selection
IC1	ICANotes features Behavioral/SUD programs, clinical and administrative capabilities
IC2	ICANotes charting Individual/family/group charting, diagnoses and templates
IC3	ICANotes treatment planning Goal-focused treatment plans
IC4	ICANotes scheduling Clinician/location scheduling and reminders
IC5	ICANotes portal Digital intake, e-signatures, messages, files and payments
IC6	ICANotes billing Claims, eligibility, ERA and billing workflows
IC7	ICANotes security Access controls, auditing and backups
IC8	ICANotes AI scribe AI documentation; recording support separately confirmed in official help
IC9	ICANotes ambient recording help Session audio to draft notes
IC10	ICANotes pricing Tailored pricing
TA1	TherapyAppointment features Practice features and prescribing
TA2	TherapyAppointment clinical notes Templates, private notes, supervision, signed notes and release export

TA3	TherapyAppointment scheduling Online booking, reminders and read-only calendar integration
TA4	TherapyAppointment billing Claims tracking, benefits, payment collection, invoices and ERA
TA5	TherapyAppointment AI Notes Opt-in paid AI recording and draft documents
TA6	Charting and locking Goal progress, diagnosis and final signed/locked note
TA7	Client Portal overview Client communication, forms and scheduling
TA8	Telehealth FAQ Individual/group video; mobile telehealth application scope
TA9	Client Profile Demographics, contacts, insurance and diagnosis
TA10	TherapyAppointment pricing Booked-session tiers, clinician/location reports and add-ons
TA11	TherapyAppointment app listing Telehealth-only app for clients and clinicians
CL1	CareLogic EHR Programs, configurable clinical/billing workflows, outcomes, security and integrations
CL2	CareLogic Schedule help Clinical calendar, billing flow and outward calendar integration
CL3	CareLogic Client help Client record and treatment-plan modules
CL4	Qualifacts Client Engagement Integrated intake, signature, scheduling, portal and payment modules

CL5	Qualifacts virtual care OnCall integration for CareLogic/Credible; telehealth and portal
CL6	Qualifacts iQ documentation Individual/group ambient notes and iQ Mobile recording app
CL7	Qualifacts integration marketplace CareLogic-tagged eligibility and clinical/RCM integration routes
CL8	Qualifacts iQ availability Clinical documentation availability; billing/scheduling agents currently Credible only
KI1	Kipu behavioral health EMR Scheduling, forms, portal, outcomes, labs, meds, occupancy and reporting
KI2	Kipu Intelligence Ambient note drafts and Chart Snapshot summaries
KI3	Kipu Patient Portal help Portal and messaging configuration
KI4	Kipu Helix mobile FAQ iOS/Android clinician app; explicitly early access
KI5	Kipu patient journey workflow Admissions, guardians/guarantors, CRM and bed availability
KI6	Kipu product modules EMR/CRM/RCM/GRC commercial modules
KI7	Team Recovery acquisition Alumni engagement mobile app scope; not a general portal equivalence
KI8	Kipu homepage Integrated platform overview and secure messaging
LV1	Development environment provider rules HIPAA information restriction for add-on services

LV2	Development environment signed DPA Section 3.8 prohibits providing HIPAA PHI to the reviewed development environment
HH1	HHS cloud guidance Cloud safeguards and business associate agreements
TN19	Create a Custom Form Custom client forms, intake documentation and patient signatures
TN20	Customize Progress Notes Practice-customized progress-note templates
SP10	Using scored measures Automatic scoring and repeated-measure graphs
SP11	Note Taker in-person recording Session recording, transcription and draft notes
KI9	Kipu Treatment Plan evaluations Goals, objectives, interventions and plan statuses
KI10	Kipu Golden Thread Links goals and objectives to progress notes and group sessions
N01	TherapyNotes user accounts and roles Individual staff accounts and separation of clinical and administrative access
N02	SimplePractice administrative team roles Administrative role permissions and clinical/billing boundaries
N03	Sessions Health roles and permissions Practitioner, billing and administrative access
N04	TheraNest staff permissions glossary Clinical, billing, referral and activity-log permissions
N05	TheraNest reports glossary Attendance, audit, referral and financial reporting

N06	Sessions Health secondary claims Secondary-payer claims after primary payment or denial
N07	Sessions Health payroll calculations Payment-based compensation calculations and export
N08	TherapyNotes client import Demographic/insurance import; clinical import explicitly excluded; manual documents possible
N09	TherapyNotes security controls Encrypted database/transmission and onsite/offsite backups
N10	TherapyNotes security help index Mandatory 2FA, automatic logout and BAA guidance
N11	TherapyNotes activity log User-specific activity, client filters and audit events
N12	SimplePractice account activity and HIPAA audit log Client viewing, printing/downloading and sign-in events
N13	SimplePractice BAA and security agreements Business Associate Agreement availability
N14	SimplePractice two-factor authentication Individual account 2FA and separate staff logins
N15	Valant ePrescribing Medication history, allergies, interactions, EPCS and PDMP
N16	Valant prescriber suite Refill and renewal workflow
N17	Valant clinical care features Integrated electronic lab offering; detailed interface scope requires confirmation
N18	Valant performance reporting Payer/patient aging, payroll and referral source reporting

N19	Valant prospective patient management Prospective patient management offering
N20	ICANotes ePrescribing EPCS, PDMP, medication history, interaction alerts and pharmacy refill requests
N21	ICANotes integrations Lab and health-information-exchange interfaces
N22	ICANotes therapy security FAQ BAA, automatic session timeout and access controls
N23	ICANotes two-step verification FAQ ICANotes+ login 2FA using an authenticator app
N24	ICANotes clinical document exchange Direct exchange and electronic record-request fulfillment
N25	ICANotes FHIR API Approved partner FHIR R4/OAuth2 access for providers, patients, availability and booking
N26	ICANotes demographic import ICANotes+ demographic spreadsheet import
N27	CareLogic security CareLogic security scope; certification is not feature parity evidence
N28	CareLogic FHIR API documentation Registered-developer access; licensed customer scope; third-party BAA requirements
N29	CareLogic certified-health-IT module scope Historical optional lab orders/results and prescribing interfaces; current commercial scope requires confirmation
N30	TherapyAppointment ePrescribe Medication history, interaction/allergy checks, EPCS and PDMP
N31	TherapyAppointment DoseSpot prescribing help Medication/allergy records and refill workflow

N32	TherapyAppointment fax referral source Limited outbound referral/care communication fax and Practice Contacts
N33	TherapyAppointment security settings Timed sign-out, 2FA requirements and single sign-on
N34	TherapyAppointment security FAQ Encryption in transit/at rest and BAA; automatic logout
N35	TherapyAppointment reporting Income journal, percentage payout calculator, charges/refunds and insurance payments
N36	TherapyAppointment demographic import Demographic and insurance spreadsheet import
N37	TherapyAppointment triage account setup Triage account for clients not yet assigned to a therapist
N38	TherapyAppointment Oklahoma HIE Oklahoma-only submission interface; not general bidirectional exchange
N39	Kipu drug allergies and interactions Allergy records and interaction warnings; Canadian limitation noted
N40	Kipu medication administration overview MAR administration/observation, orders and role-specific records
N41	Kipu security overview Login security, protected tabs and restricted patient records
N42	Kipu practice-wide login security Super Admin configuration of password expiry and 2FA
N43	Kipu federated authentication Identity-provider login by request with one-time setup fee
N44	Kipu API FAQ Developer-built EMR integrations; access and permissions require setup

N45	Kipu CRM Referral/admissions pipeline, business development and alumni management
N46	Kipu patient pre-admission record Pre-admission, admission and discharged/closed chart phases
N47	TherapyNotes ePrescribe workflow Medication history, allergy records and refill requests
N48	TherapyNotes EPCS enrollment Optional controlled-substance prescribing and identity proofing
N49	TherapyNotes PDMP Easy Access PDMP access for enrolled EPCS prescribers
N50	SimplePractice ePrescribe Medication history, refills, controlled prescribing and optional PDMP
N51	TheraNest ePrescribe Quick Start Ensora eRx access from TheraNest chart; allergies, refills and tasks
N52	TheraNest MFA configuration Organization-wide or individual staff MFA and login audits
N53	TheraNest payroll by rendering provider Collected-payment compensation using provider payout settings
N54	TheraNest staff task assignment release Task assignees, due-date alerts and CSSRS/BDI/ASAM form changes
N55	TherapyNotes mental status and risk assessment Structured mental status and clinician-entered risk assessment
N56	TherapyNotes preferred name and pronouns Separate preferred name and pronoun fields
N57	Sessions Health chosen name and pronouns Chosen/legal name separation and pronouns

N58	Sessions Health system forms Assessment and intake templates; questionnaires
N59	Sessions Health bulk record import Bulk documents imported into existing client charts
N60	Sessions Health demographic import Client-list template; practitioner invites must be accepted before import
N61	Sessions Health custom service fees Client-specific fees for sliding scales and appointment service defaults
N62	Sessions Health refunds Full/partial integrated refunds or record refunds processed externally
N63	Sessions Health batch claims Bulk submission of selected pending electronic claims
N64	TherapyNotes secondary claims Electronic secondary claims after primary ERA posting
N65	TherapyNotes insurance payment allocation Manual insurance remittance and allocation
N66	TherapyNotes insurance aging Outstanding insurance balances by age and clinician
N67	SimplePractice secondary claims Electronic secondary claims with primary payment information
N68	SimplePractice prospective-client inquiries Separate prospective-client inquiries workflow
N69	SimplePractice client information and referrals Referral-source fields; name/identity fields need specific verification
N70	SimplePractice ROI templates Client-specific or intake release-of-information signatures

N71	SimplePractice client migration limits Demographic template transfer; clinical note/billing/appointment import excluded
N72	TheraNest secondary payment workflow Payment allocation and secondary claims via partnered clearinghouse
N73	TheraNest refunds Processor-specific full refunds
N74	TheraNest client details and prospects Prospective-client activation and demographic record
N75	TheraNest referral directory/report Organization referrers logged at client level and reported
N76	Sessions Health multiple-tax-ID superbills Location/payer-based tax ID selection for superbills; not a complete multi-entity accounting system
N77	ICANotes structured risk and mental-status fields Mental-status examination and suicide/violence-risk fields in primary-care template
N78	Sessions Health assessment updates C-SSRS standardized clinical assessment availability
N79	SimplePractice clinical document exports Mental-status exams are a separately listed clinical document type in complete and session exports

Desk research from public official sources. No signed-in product trials were performed. Scores describe documented capability, not clinical effectiveness, usability or reliability.