GuidingCare® Release Notes

Authorization Portal Enhancements

Version 8.16 | September 2021

Contents

Real-Time Password Rules Check During Password Change

For users that have direct logins, you can change your password easier with real-time password rule checks on the Change Password page. A checkmark displays next to the rule once it is met. This will help you figure out which password requirements you have or haven't met.

Configuration Changes: No   Schema/Logic Changes: Yes   Issue Key: 182

Save Filters/Set as Default

Name and save your filters to be reused when entering the Authorization List, Appeal List and Draft Authorization List tabs. You can set a saved filter to be used as a default when entering the screen.

Configuration Changes: No   Schema/Logic Changes: Yes   Issue Key: 3821, 2635

New Configurations

We have added the following Authorization Portal configurations to Manage Application Configurations in GuidingCare:

- "Authorization Portal: Withdraw pending authorization": Show/hide the "Request to withdraw a pending Authorization" link on the Authorization Portal Dashboard.
  Configuration Changes: Yes   Schema/Logic Changes: Yes   Issue Key: 4458, 4427

- "Authorization Portal: Allow the provider users to select Appeal list for the navigation bar": Show/hide the Appeal List in the left navigation menu of Authorization Portal.
  Configuration Changes: Yes   Schema/Logic Changes: Yes   Issue Key: 180

- "Display message section in Utilization Management and Authorization Portal": Show/hide the Messages section in the left navigation menu of Authorization Portal.
  Configuration Changes: Yes   Schema/Logic Changes: Yes   Issue Key: 180

- "Authorization Portal: View Notes and View Docs": Show/hide the View Notes and View Docs links when authorizations or appeals are expanded in the Authorization Portal by enabling or disabling this configuration.
  Configuration Changes: Yes   Schema/Logic Changes: Yes   Issue Key: 4462, 4428

- "Authorization Portal: Prepopulate Procedure code from SSO link": When this configuration is enabled, the system always prepopulates the procedure code from single sign on (SSO) while creating authorizations in the Authorization Portal. When the configuration is disabled, the system prepopulates the procedure code from SSO for the first authorization only. We have made this configurable in the case of SSO users that do not want to automatically select the same service again while creating a different authorization.
  Configuration Changes: Yes   Schema/Logic Changes: Yes   Issue Key: 4464, 4430

- "Authorization Portal: Allow only consecutive days for service extension in the authorization": Enable or disable consecutive dates for a service extension for each authorization class.
  Configuration Changes: Yes   Schema/Logic Changes: Yes   Issue Key: 3952, 6010

- "Authorization Portal: Tax ID Logic": Enable or disable tax ID logic in the Authorization Portal and control authorization sharing. If tax ID logic is disabled, authorizations will not be shared with providers with the same tax ID as the provider who entered the authorization. If enabled, authorizations are shared among providers with the same tax ID.
  Configuration Changes: Yes   Schema/Logic Changes: Yes   Issue Key: 2396, 3922

Sort Member's Eligibility by Product Type

Clients now have the option to define the members' eligibilities sort by product type (for example: medical or dental). This enhancement will keep the most relevant product information listed first to help ensure providers

view and select the eligibility while creating an authorization request when a hierarchy of multiple eligibility levels exists. This configuration can be enabled or disabled on the back end by Altruista Health.

Configuration Changes: Yes   Schema/Logic Changes: Yes   Issue Key: 1254, 1568

Out-of-Area Federal Employee Program (FEP) Members

We are now integrated with the Federal Employment Management System (FEMS), so you can automatically search for out-of-area FEP members in Authorization Portal and automatically add the member while creating a new authorization. This allows out-of-area FEP members to be serviced by health plans in GuidingCare and Authorization Portal. Integration is triggered when you search using the specific FEP member ID format (an ID starting with "R" and followed by 8 digits). More than one record may be returned in search results using this ID. Once you select the correct member, the system will either create the member in GuidingCare or update the member details with the latest data behind the scenes. If you are interested in this feature, please contact your account team.

Configuration Changes: Yes   Schema/Logic Changes: Yes   Issue Keys: 1746, 2624, 2623, 1254, 1157, 1156, 1155

UI Updates to Choose Columns and Filters

We made the following UI enhancements to the Authorization List, Appeal List and Draft Authorization List:

- <u>Choose Columns</u>: The button color will change to blue after clicking it.
- <u>Filters</u>: The checkbox label changes to blue when the checkbox is selected and active. When pointing to a date filter, the color changes to blue.

Configuration Changes: No   Schema/Logic Changes: Yes   Issue Key: 175

Update Authorization Priority During Extension Request

Update the authorization priority while requesting an extension. This feature is only applicable when Authorization Priority is configured for the authorization template.

Configuration Changes: No   Schema/Logic Changes: Yes   Issue Key: 2634

Renamed NPI Label

Clients have the option of changing the NPI label to their own custom value throughout GuidingCare using the "Provider Custom Index Name for NPI" configuration. We have extended this configuration to the Authorization Portal with 8.16 and you can now see the configured value for NPI throughout the Authorization Portal.

Configuration Changes: Yes   Schema/Logic Changes: Yes   Issue Key: 4081

Audit for Save as Draft

The Authorization Portal now saves authorization draft information in a table to track changes to authorization drafts. Draft audit data will be permanently deleted from this new table when the draft authorization archival data is permanently deleted from the database after 30 days. The system will also save the latest information entered on the authorization entry page when the draft authorization becomes an actual authorization.

Configuration Changes: No   Schema/Logic Changes: Yes   Issue Key: 4316

Client Logo Proportional to Header

We have updated logo dimensions to ensure client logos are aligned and proportional to the header in the Authorization Portal.

Configuration Changes: No   Schema/Logic Changes: No   Issue Key: 171

Moved Authorization Portal Disclaimer Tab

We have moved the Authorization Portal Disclaimer tab from UM > Auth Template to UM > Authorization Portal Configuration.

Configuration Changes: No   Schema/Logic Changes: Yes   Issue Key: 173

Changed "Auth ID" to "Authorization ID"

Wherever you previously saw "Auth ID" in the Authorization Portal, we have changed it to "Authorization ID" in version 8.16.

Configuration Changes: No   Schema/Logic Changes: Yes   Issue Key: 183

Member Name Consistency

Member names now display consistently throughout the Authorization Portal in the "First Name Last Name" format.

Configuration Changes: No   Schema/Logic Changes: Yes   Issue Key: 5364

Changed "Provider Portal" to "Authorization Portal"

We have continued our effort to change from the old name of "Provider Portal" to "Authorization Portal" in notes, documents and alerts across GuidingCare.

Configuration Changes: No   Schema/Logic Changes: Yes   Issue Key: 174

Highlights

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Care Management

Single-Click Care Planning

We have transformed care planning in GuidingCare with our new opportunity, goal and intervention (OGI) bundles. This new experience allows you to select from predefined OGI bundles. The care plan will display in a tile view, making the OGI bundles easy to view and great for users who prefer a keyboard instead of a mouse. Quickly select from a group of your favorite OGI bundles and then customize them for the specific member's use. You can still create manual OGIs, but we recommend our new bundle feature for speed and efficiency.

Eligibility Reconciliation

We made changes to identify members who have issues surrounding their eligibility. In the past, eligibility issues caused problems in several sections within Care Management.

With 8.16, several of these areas have been addressed. Eligibility information will no longer be required in the following sections:

- Medications
- Diagnosis
- Manual Visits

Required activities will now display an alert when they are attached to a program that requires eligibility information be updated.

Appeals and Grievances

Healthcare appeals and grievances are a complex, multi-level process that is highly regulated and can be different across different types of healthcare, types of insurance and at the various event levels. Over the past 12 months, Altruista Health has taken the necessary steps to improve process efficiency, ensure regulatory compliance and resolution timeliness to meet the complex needs and variations in this process.

In earlier releases, the Appeals and Grievance module introduced level toggling, packets, packet logs, complaint logs, AOR and WOL tracking and enhanced turnaround time configuration. In addition, updates were made to Worklog Manager, MD Review Activities and InterQual integration.

The 8.16 release consists of existing features plus many new features, configurations and an updated user interface. The new UI is designed to create an organized and efficient user experience that empowers you to use these features to their fullest.

Some of the new features and configurations are listed below:

Complaint Template
Configure Appeals and Grievances complaint templates by eligibility and template fields by level. The template has been broken into multiple accordions/sections, which allows you to add custom fields to specific sections.

CMS-Regulated Fields
Two new standard fields are available to meet CMS regulations:

- Sponsor Appealed ALJ Decision
- Level of Service

Show/Hide Logic
Introduced show/hide logic to reveal sub-sections and fields based on values selected in the main field. This simplifies each screen by showing only the fields that need to be entered based on previous choices, creating a more streamlined user experience.

Complaint Status Reason
A new field, Status Reason, has been added. Status Reason can be used to provide more details about the complaint status selected.

Notes
We have added section-specific note descriptions. When the section-specific note is saved, it will also show in the Notes page with the note type associated to the section.

Mark all notes as viewable by Internal Users Only or All Users.

Linked Internal Authorization Fields
We have added 5 additional fields to display with linked internal authorizations.

External Authorization Fields
We have added 5 additional fields to display for data input with external authorizations.

Claim Information
Add linked internal and external claim information.

User Interface

We have taken steps to make the module more accessible:

- Larger text
- Use the Tab key to navigate fields

Provider Search

We enhanced the Provider Quick Smart Search in the Utilization Management module and the Provider Advanced Search throughout GuidingCare.

Quick Search

- We've Included additional columns, Network Status (PAR) and Contract in the search grid.
- We've also added Contract and Contract Status to Quick Search results to choose providers based on network.

Advanced Search

We've added an application-level configuration to choose which provider search view fits your needs. The Flat View retains the existing functionality of the Advanced Search. In 8.16, we are introducing the Expand View to provide more flexibility to quickly find providers.

Improvements as part of Expand View:

- Review the search criteria you've entered using the Show Search Fields toggle.
- View selected/deselected items from the Specialty and Eligibility sections in chips.
- Clear search text within a particular section.
- View all search fields vs. fields with search text/input.
- Search providers with and without a contract.
- View Provider Name, Code, NPI, Tax ID, Network Name, Primary Address details, Premium Provider and Accepting Patients in the search results.
- Expand a provider row to view additional addresses, network contracts and identifiers in the search results.

Utilization Management and Authorization Portal

Searching for out-of-area members just became easier! The GuidingCare Utilization Management module and Authorization Portal seamlessly integrate with the Federal Employment Management System (FEMS) to provide real-time Federal Employee Program (FEP) out-of-area member identification and information transfer. This feature improves efficiency by decreasing administrative costs and time.

If you are interested in this feature, please contact your account team.

Mobile Clinician

We are unveiling new features to make care planning in the field much easier. If you visit a member frequently, you can pin member cards to the My Members page. This provides easy access to members' information and helps case managers manage their workload.

Design

We are introducing a collapse/expand design on the left navigation menus in the Care Management, Population Health, Appeals and Grievances, and Utilization Management modules. The left navigation took up a lot of space on the page, making it difficult to work through large grids and complex workflows. Allowing you to collapse the grids provides you more real estate on the page and improves the overall user experience.

Browser Health Check

Check your browser's compatibility with GuidingCare in 8.16! We have introduced a new feature called Browser Health Check, which is located in the bottom right corner of the application. Identify any hurdles in terms of loading any page or carrying out any member-level transactions in case of technical or network-related difficulties. Browser Health Check alerts you if there are browser-related issues that require immediate action. Self-check for any issues by clicking the link, which displays a pop-up with all parameters. Parameters checked include Pop Up Windows, Cookies, Screen Resolution and Browser Version. The pop-up displays a validation message specific to the case and instructions to resolve it.

Interoperability

We've added 12 new services to our API Suite to support patient access to FHIR and USCDI defined resources. These REST services will allow health plans to retrieve GuidingCare data in real time to support patient access.

- **GET /Member/Detail** - Retrieves the member details, including member identifiers and demographic information.
- **GET /Member/Caregiver -** Retrieves the caregivers listed for a member.
- **GET /Member/Family -** Retrieves the related family members for a given member.
- **GET /Member/AdvanceDirective** - Retrieves the advance directives for a given member.
- **GET /Member/ConsentForm** - Retrieves the consent forms for a given member.
- **GET /CarePlan -** Retrieves the care plans for a given member.
- **GET /Member/Appointment -** Retrieves the appointments for a given member.
- **GET /Member/Referral/SDOH -** Retrieves the SDOH referrals on a member's record.
- **GET /Member/AllergyIntolerance -** Retrieves manually entered allergy information on a member's record.
- **GET /Member/HealthIndicators -** Retrieves the health indicators on a member's record.
- **GET /Member/Medication/Manual -** Retrieves the manually entered medications on a member's record.
- **GET /Member/Document** - Retrieves all the documents attached to a given member's record.

More details are available on **GuidingCare's Developer Portal**.

Application Programming Interface (API)

Appeals and Grievances Services

We have updated our Complaint API suite to incorporate the many new features added to the complaint template configuration.

New Services

We have added 7 new services to our API suite across Care Management and Utilization Management.

- Create Pharmacist Activity on a Member (POST /Activity/Pharmacist v2)
- Create a New Authorization (POST /Authorization v2)
- Add a New Service Line to an Authorization (POST /Authorization/ServiceLine v2)
- Update Service Line for an Authorization (PUT /Authorization/ServiceLine v2)
- Retrieve Claim Details (GET /Claim/{claimNumber}/Detail v2)
- Retrieves Assessment Template (GET /Assessment/Template v2)
- Assessment Submission (POST /Assessment v2)

Service Deprecation & Retirement Notice

As we continue to release new APIs, we will be deprecating and retiring older versions of our APIs. In 8.16, we are deprecating 11 services retiring 13 services in version 0. Version 2 of these services will continue to serve our customers' needs. For the deprecated services, we encourage all our clients to start scheduling their upgrade and migration to the latest versions.

Find the full set of changes on **GuidingCare's Developer Portal**.

Configuration Management

There is now easier management of classifications with new options to download, assign/unassign, active/inactivate records, etc.

Aunt Bertha

Use Aunt Bertha to search for community service providers, create referrals and receive status updates from providers without leaving GuidingCare!

COMING SOON Member Portal

An all-new look is coming soon to Member Portal! Not only are we refreshing the design, but we are taking major strides to make it more responsive to the needs of your members, including those who may have vision or mobility challenges:

- Updating color and contrast to improve readability
- Making screens fully readable using screen reader technology for audio and braille support
- Enhancing the navigation menu design
- Replacing less accessible My Calendar with My Appointments list view
- Making the portal more responsive to the needs of your member base

We are working closely with Accessible360 to ensure the Member Portal conforms to industry-best accessibility standards.

For more information about the Member Portal, please contact your Account Management Team.