

# Configuration Management Enhancements

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Contents	
Legacy Menu Migration	2
Hide Engagement Outreach Activity and Member Enrollment	2
New Validation Messages in Data Migration Assistant	2
Authorization Portal Label	2
Assign Classification and Unassign Classification Options	3
Import and Export Script Templates	3
Profile Logic for Scripts and Care Activity	3
Note/Document Configuration Changes	3
Importing Care Staff User Loads	4
Priority in Care Plan Automation	4
Auth Template Validations	4
Label Change from CPT Code to Find Code	4
Validation Message for Engagement Outreach	5
Appeals and Grievances Legacy Gaps in Configuration Management	5
Turn Around Time Recalculation	5
Complaint Type Updates	5
Authorization Portal Disclaimer	5

Complaint Control Validations	5
Complaint Custom Fields	5
System-Defined Records	6
Coordinator Type Matrix	6
Dependency Matrix Updates	6
Explanatory Text for Role Decision Mapping	6
Eligibility Mapping Panel	6
Activation and Inactivation of Matrix Configurations	7
Select All Checkbox	7

## Legacy Menu Migration

We have added the following configurations to Manage Configurations that were previously only available in the legacy configuration menus:

- Utilization Management (UM)
  - Authorization Portal Configuration > Banner Message

Configuration Changes: No Schema/Logic Changes: Yes Issue Key: 134021

Authorization Portal Configuration > Authorization Portal Assessments

Configuration Changes: No Schema/Logic Changes: Yes Issue Key: 144961

- Appeals and Grievances (AG)
  - Matrix > AOR/WOL Matrix

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 3520

## Hide Engagement Outreach Activity and Member Enrollment

Starting in 8.16, we are hiding the "Engagement Outreach Activity" record in the Manage Configurations > Care Management > Care Activity grid.

Configuration Changes: No Schema/Logic Changes: Yes Issue Key: 143765

Because clients were not using Member Enrollment, we have removed this option from Advanced Search and the Config menu.

Configuration Changes: No Schema/Logic Changes: Yes Issue Key: 112463

# New Validation Messages in Data Migration Assistant

We introduced new validation messages in Data Migration Assistant. These messages display in red when the prerequisites are not meeting the data migration requirements. This checklist is used to verify before starting the sync process.

Configuration Changes: No Schema/Logic Changes: Yes Issue Key: 342

## Authorization Portal Label

We changed the old "Provider Portal" label to "Authorization Portal" in Configuration Management and Data Migration Assistant. We also removed the Provider Portal checkbox from Guidelines (Assessments) and added Authorization Portal Assessments.

Configuration Changes: No Schema/Logic Changes: Yes Issue Key: 128279

# Assign Classification and Unassign Classification Options

We introduced Assign Classification and Unassign Classification options for the for CM, UM and AG sections. This allows you to assign/unassign the classifications to the records.

### Appeals and Grievances

- Intake Department
- Responsible Department

## Care Management

- Facility Configuration
- Programs (Level Name, Level Value, Level Mapping)
- Quick Search Values

When a parent level configuration is unassigned, automatically all the child level configurations get unassigned. However, when a child level configuration is unassigned, the parent level configurations will not be affected. If the designated classification is not matched with the selected records classification, then it will display the validation message "Selected Classification is xxx (the designated classification)", and unassignment would not be executed for the mismatched record.

The Assign Classification and Unassign Classification options are configurable by role under Admin > Manage Roles > Manage Configuration Roles.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 6849, 6857, 6850, 1604, 1602

# Import and Export Script Templates

Import and export scripts in the Manage Configurations > CM > Script > Scripts section. The new options, Import Scripts and Export Scripts, are available in the Action menu.

Configuration Changes: No Schema/Logic Changes: Yes Issue Key: 6845

## Profile Logic for Scripts and Care Activity

We have implemented profile logic in the CM > Script > Scripts and CM > Script > Care Activity in Manage Configurations. Now care staff will only be able to see scripts and care activities aligned to their profile.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 6856

# Note/Document Configuration Changes

We have made the following changes to note and document-related configurations in the following sections of Manage Configurations:

- Care Management (CM)
  - Document Type Changed data entry type from Inline View to Form View, removed the Document Template column from the grid and added the Is Manual column.
  - Health Note Type Removed the Note Template column from the grid.
- Utilization Management (UM)
  - Actions > Auth Document Type Changed data entry type from Inline View to Form View. If a document template exists, the Document Template column says "Yes".
  - Actions > Auth Note Type If a note template exists, the Note Template column says "Yes".

- Appeals and Grievances (AG)
  - Master > Complaint Document Type Changed data entry type from Inline View to Form View. The Note Template field is no longer mandatory.
  - Master > Complaint Note Type Changed data entry type from Inline View to Form View.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 1158

# Importing Care Staff User Loads

To help eliminate errors by manually managing care staff users, you can now import care staff through data loads under Import Export Configurations > Import > User Load. Download the user load template and load users to the application.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 2399

# Priority in Care Plan Automation

We added Priority to Config > Care Plan Automation > CPA.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 1642, 1644, 30-8306

# **Auth Template Validations**

A new validation message displays if you try to delete configurations associated with the authorization template: "Selected Auth type(s) are already in use". This is applicable for both the transaction level and configuration level:

- Auth Template > Auth control Validations
- Auth Configuration > Auth Priority
- Auth Required Activities > Auth Required Activities
- Guidelines > Assessments
- Guidelines > External Links
- Guidelines > External Guidelines
- Authorization portal Assessments

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 1666

- Authorization Portal Configuration > Preset Data
- Authorization Portal Configuration > Authorization Portal Attestations
- Auth Configuration > Default Data
- Service Plan > Service Plan
- Auth Configuration > Appeals Adjudication Window

# Label Change from CPT Code to Find Code

We changed the field name "Find CPT Code" to "Find Code".

We added a Procedure Code Category filter, which will be mandatory to limit search results due to performance speed. You will receive a validation message to enter either the procedure code or procedure description. Impacted sections are:

- Config > Service Plan > Add > Find Code
- Config > Service Plan > Edit > Find Code
- Config > Service Plan > Import with Procedure Code

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 1168

# Validation Message for Engagement Outreach

If you try to modify the "Engagement Activity" care activity type from the Manage Configurations > CM > Script > Care Activity, the message "System defined activity type 'Engagement Outreach' exists" displays to alert you that the configuration can only be done through the system automation.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 1668

# Appeals and Grievances Legacy Gaps in Configuration Management

## **Turn Around Time Recalculation**

We have introduced the recalculation of TAT functionality in the Manage Configurations > AG section. You can now easily view the recalculation information, including configured values in the available grids. For values that are not configured, GuidingCare now displays them as N/A. "Request of Info. TAT" has been renamed to "AOR/WOL Requested" and "Receipt of Info. TAT" has been renamed to "AOR/WOL Received".

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 2589

# **Complaint Type Updates**

Following the Appeals and Grievances module redesign, we added new accordions/sections Manage Configurations > AG > Complaint Template > Complaint Type. The new sections are:

- Eligibility
- Authorization Source
- Claims Source
- Intake Details
- Provider Details
- Quality of Care

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 2590, 2643

- Resolution Details
- Reviewer Details
- Participants Details
- Episode Details
- Additional Information Requested Details

## Authorization Portal Disclaimer

The "Authorization Portal Attestations" name is changed to "Authorization Portal Disclaimer" in the Configuration Management > Manage Configuration > Utilization Management left menu, Dependency Matrix, Export, Classification Based Download, DMA, Roles and Permissions sections.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 2462

# **Complaint Control Validations**

Configure required validations for sections from the complaint control validations section, which display while creating a complaint. When the configured section/accordion details are not entered, the validation messages display.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 2592

# **Complaint Custom Fields**

Configure custom fields for complaints by section. The following new options have been added to the Accordion drop-down list in Manage Configurations > AG > Complaint Template > Complaint Custom Fields section:

- Eligibility
- Authorization Source

- Quality Of Care (QOC) Details
- Resolution Details

- Claims Source
- Intake Details
- Provider Details
- Appointment of Representative

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 2591

- Reviewer Details
- Participants Details
- Episode Details
- Additional Information Requested Details

# System-Defined Records

We made changes to system-defined records in Manage Configurations as they are non-editable records:

- **CM > Address Type > Address Type**: A new validation message displays if you try to add a new record with "System" as Address Type, which is hidden in the user interface.
- CM > Health Note Type > Health Note Type: Removed Edit, Delete, Inactivate and Assign Classification
  options for system-defined records.
- CM > Document Type > Document Type: Removed Edit, Delete, Inactivate and Assign Classification options for system-defined records.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 2472, 2174

# Coordinator Type Matrix

We identified gaps from the legacy menu in the AG > Coordinator Type Matrix section, so we updated the data entry from Inline View to Form View and included an option to select all records at once.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 3253, 4394

# **Dependency Matrix Updates**

We have closed gaps identified in the Dependency Matrix by adding field value and section dependency across all modules. Below are few examples:

- Scripts Authorization Portal Assessments, Estimated Risk
- Client Template, Indicator Allocation
- Complaint Subcategory Matrix Complaint Class Matrix, Complaint Category Matrix as field dependency with Field Name as Complaint Category Matrix

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 1664

## **Explanatory Text for Role Decision Mapping**

In Manage Configurations > UM > Decisions > Role Decision Mapping, we added the following explanatory text: "This configuration gives access to change Decision Status on Auth Class and Auth Types based on certain roles". We also added an "i" icon, which displays additional information related to Role Decision Mapping.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 3256

## Eligibility Mapping Panel

In the following sections, the Complaint Type is now loading based on the eligibility selected:

- Complaint Category Matrix
- Resolution Sub Category Matrix
- Resolution Category Matrix
- Complaint Class Matrix

- Decision Time
- Complaint Sub Category Matrix
- TAT Configuration

- Complaint Class Matrix

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 5016, 5017, 5018, 5019, 5020, 5021

## Activation and Inactivation of Matrix Configurations

We implemented delete functionality for Matrix section configurations. When you inactivate any matrix configurations, related child functionalities should also be inactivated (Category, Sub Category) or when you reactivate, only that particular configuration will be reactivated but not the related child levels. We added a validation message to display if you try to delete records used at the transaction level. If no transaction is available, the system will allow you to delete it.

Configuration Changes: Yes Schema/Logic Changes: No Issue Key: 6023, 6033

## Select All Checkbox

In the Manage Configurations > UM > Decisions > Refer To User section, we added an option to select all.

Configuration Changes: No Schema/Logic Changes: Yes Issue Key: 1419



# Highlights

Version 8.16 | September 2021

## 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!



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 Accessible 360 to ensure the Member Portal conforms to industry-best accessibility standards.

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