HealthSource Clarity

v1.7 Release Notes

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Contact Information

Ciox Health
120 Bluegrass Valley Parkway
Alpharetta, GA 30005
Customer Care Phone Number: 877-358-6939

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You do **NOT** need to update your **TrayApp** to use this new version.

BROWSERS USED DURING DEVELOPMENT

We used these browser versions during the development and testing of **v1.7**:

Browser	OS	Version / Build #
Chrome	Windows 7 or 10	80.0.3987.132
Internet Explorer	Windows 7	11.0.9600.18617
Internet Explorer	Windows 10	11.0.10240.16384
Edge	Windows 10	44.18362.267.0

Check that your browser is up-to-date to avoid possible problems with the new release.

Clear your browser cache daily for best performance.
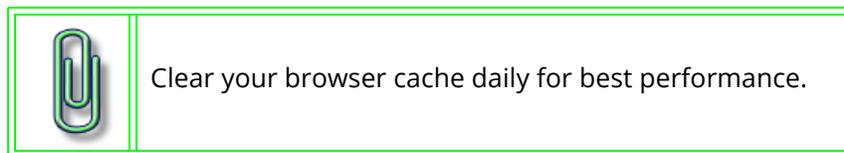
VERIFY PATIENT NAME DURING FULFILLMENT

The new **Verify** function automatically searches the Medical Records for the **Patient Name** and notifies you if the name is not found on every page.

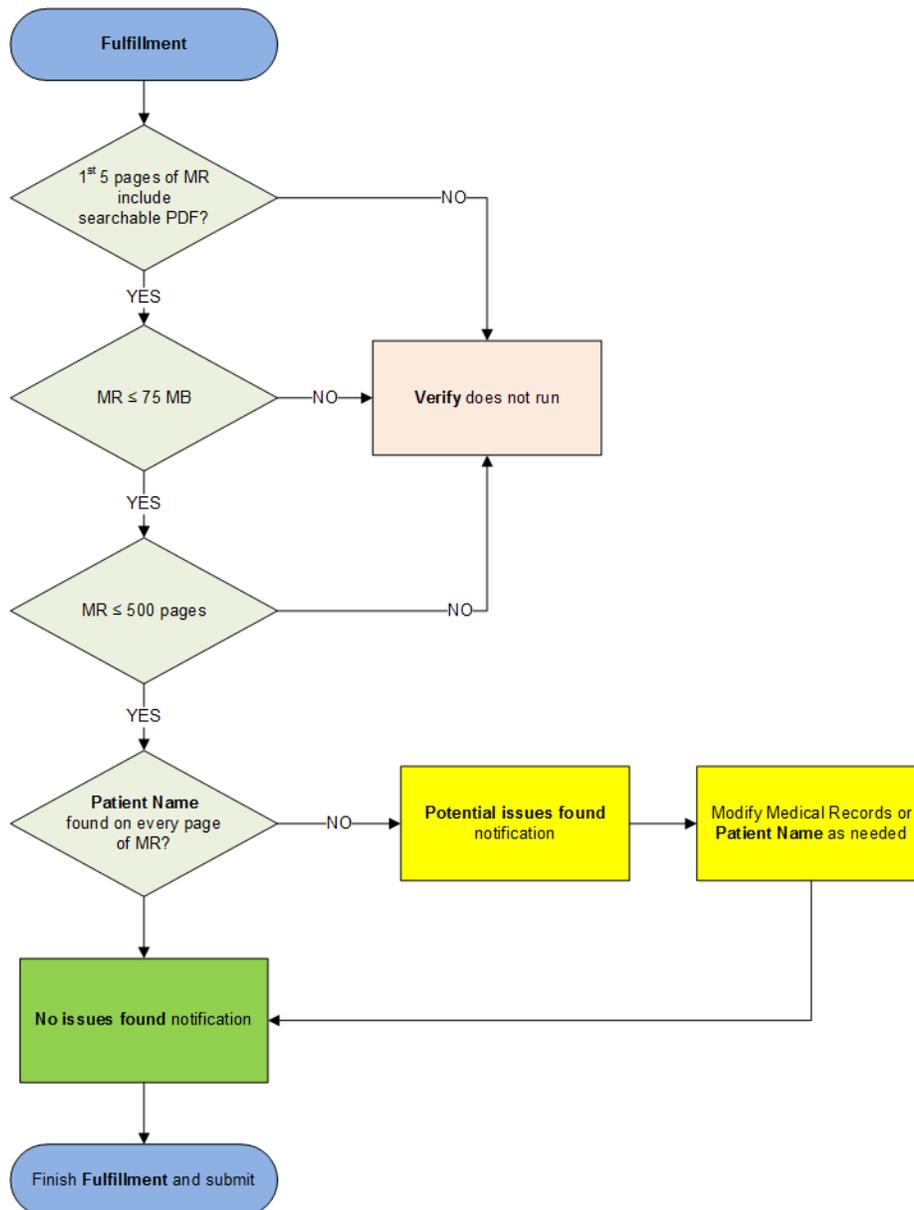## Verify rules

Verify only runs in specific situations:

- the first five (5) pages of the Medical Records must include a **SEARCHABLE PDF**. If not, **Verify** does not run at all, even if later pages do come from a searchable PDF.

- the Medical Records must be **SMALLER** than **75 MB** in size.

- the Medical Records must be **500 PAGES OR FEWER** in length.

When does Verify not run?

| Situation	Why Verify doesn't run
Medical Records scanned to the request.	Scanning creates image files (typically TIF), not searchable PDF pages.
Medical Records printed to the request using Secure Capture or another compatible network printer.	Network printing creates image files (typically TIF), not searchable PDF pages.
Image files are attached to the request as Medical Records.	Image files are not searchable PDF pages.
Medical Records include searchable PDF pages but are larger than 75 MB and / or 500 pages.	To reduce performance impact, **Verify** does not run on files this large.

Simplified view of Verify workflow

This chart shows the most common **Verify** process.

Verify runs again if you add or delete Medical Record pages

Each time you add or delete Medical Record pages, **Verify** runs again and displays an updated message. The following table provides some examples:

Pages in original MR		Original finding	Your action	New results
Searchable	**Not searchable**			
4	3	3 possible issues.	Delete 3 not searchable pages.	No issues found.
20	0	No issues found.	Add 5 TIF image pages to end of records.	5 possible issues.
0	10	Verify not available.	Add 2 searchable pages at the front of the Medical Records.	10 possible issues.
40	0	No issues found.	Add 500 page searchable PDF.	Verify not available.
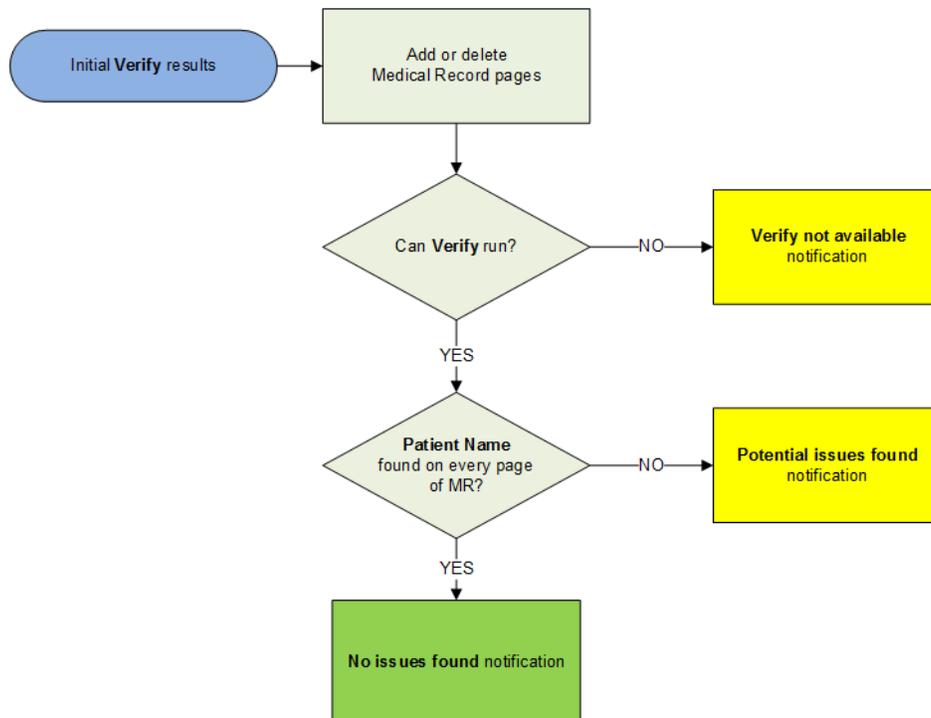
Warning — Verify does not replace your own review!

You may get a "no issues found" message when the Medical Records are actually wrong due to problems that **Verify** cannot find.

We expect **Verify** to be a helpful tool, but **YOU** are still responsible for matching the Medical Records to all of the requirements in the Request Letter.

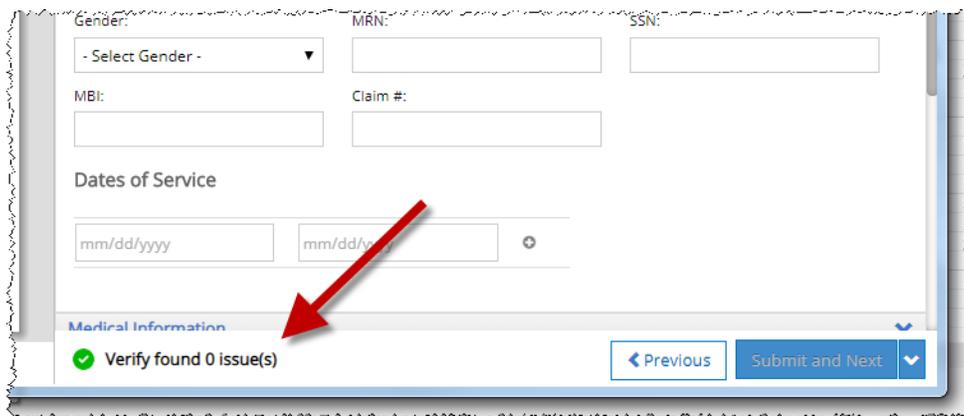| Situation	Potential issues not found because?
Finds the expected **Patient Name** on all Medical Record pages **BUT** the records reflect the wrong **Dates of Service**.	**Verify** only looks for the **Patient Name**, not **DOS** or other values.
Patient Name found on all Medical Record pages **BUT** the name is shared by multiple patients **AND** the Request Letter specifies someone else. For example, a facility might have treated several patients named "Elizabeth Jones."	**Verify** only looks for the **Patient Name**, not **DOS** or other values.
The Medical Records belong to the wrong patient **BUT** the characters of the expected **Patient Name** are found in the correct order **AND** the characters are separated by spaces. For example, the expected **Patient Name** is "John Son" and the Medical Records include the text "Johnson."	**Verify** only looks for the expected characters of the **Patient Name**. Gaps, spaces, and some other characters may not be recognized by **Verify**.

Verify in action

The following pages provide three examples of **Verify** in action:

- Scenario 1 — No issues found

- Scenario 2 — Potential issues found

- Scenario 3 — Verify not available

Scenario 1 — No issues found

1. Open a request that is any **Fulfillment** status and attach the Medical Records.

2. For this scenario, we'll assume two things:

    2.1 Every page of the Medical Records is a searchable PDF.

    2.2 The patient name was found on every page of the Medical Records.

3. You'll see the **Verify found 0 issue(s)** message at the lower left corner of the **Fulfillment** screen.


| ⛔	You **MUST** still manually review the Medical Records!
	Even if **Verify** finds no issues, you must still check that the Medical Records meet the requirements of the Request Letter.

4. Check all other request information — other patient identifiers, dates of service, etc.

5. Complete your **Fulfillment** tasks and submit the request.

Scenario 2 — Potential issues found

1. Open a request that is any **Fulfillment** status and attach the Medical Records.

2. For this scenario, we'll assume two things:

    2.1 At least one page of the first five was a searchable PDF, so that **Verify** will run.

    2.2 The patient name was **NOT** found on every page of the Medical Records.

3. The **Potential Issue(s) Found** window appears. Click **OK**.
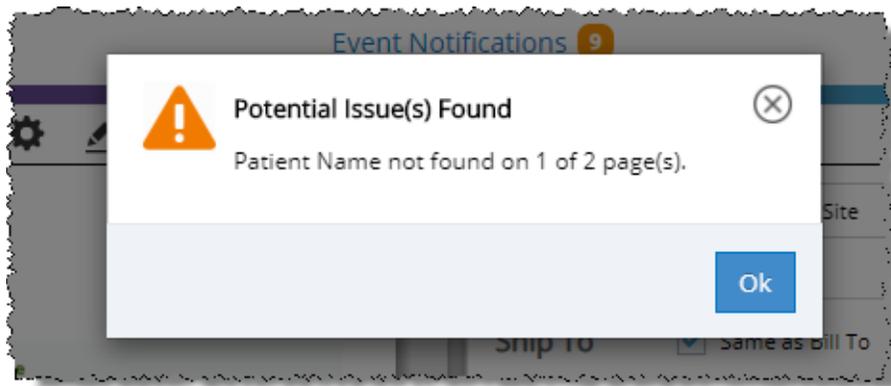
4. You'll also see the **Verify found X issue(s)** message at the lower left corner of the **Fulfillment** screen. Click the **View** link next to this notification.
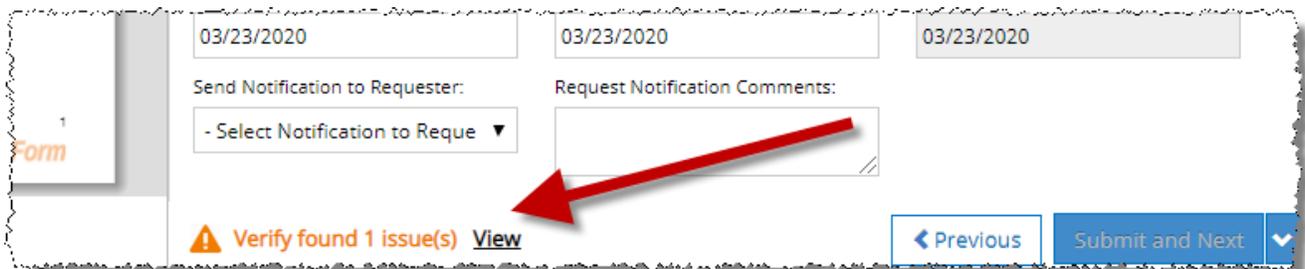
5. The Medical Records open in a new **Edit** window in your browser. The **Verify found X issue(s)** message also appears at the top of this window.

6. Use **Previous** and **Next** to see the pages on which the **Patient Name** was not found.

7. Review the Medical Record pages and take the appropriate corrective action.

   7.1 Treat this list **ONLY** as general guidance. Check with your supervisor for help.

Situation	Corrective Action
Some pages are not searchable. For example, the first 3 pages came from a searchable PDF, but the next 10 are TIF images.	Review the non-searchable pages to determine if they should be included.
Some or all of the Medical Record pages clearly belong to the wrong patient.	Delete the incorrect pages and replace if needed.
The **Patient Name** on the Medical Records is similar to the name on the Request Letter. • "Mike Jones" instead of "Michael Jones" • "Michael Jay Jones" instead of "Michael Jones" • "Micheal" instead of "Michael."	Can you use other patient identifiers, such as DOB, MRN, Account #, to validate the records? **YES** — Continue **Fulfillment** and submit request. **NO** — Delete current records and replace. You may need to ask for a revised Request Letter.
Correct **Patient Name** found on some pages but not all.	Can you determine that the pages without names belong to the correct patient and cover the correct **Dates of Service**? **YES** — Continue **Fulfillment** and submit the request. **NO** — You may need to ask for a revised Request Letter.

8. When you have finished reviewing the Medical Records, click **Save And Close** on the **Edit** window.
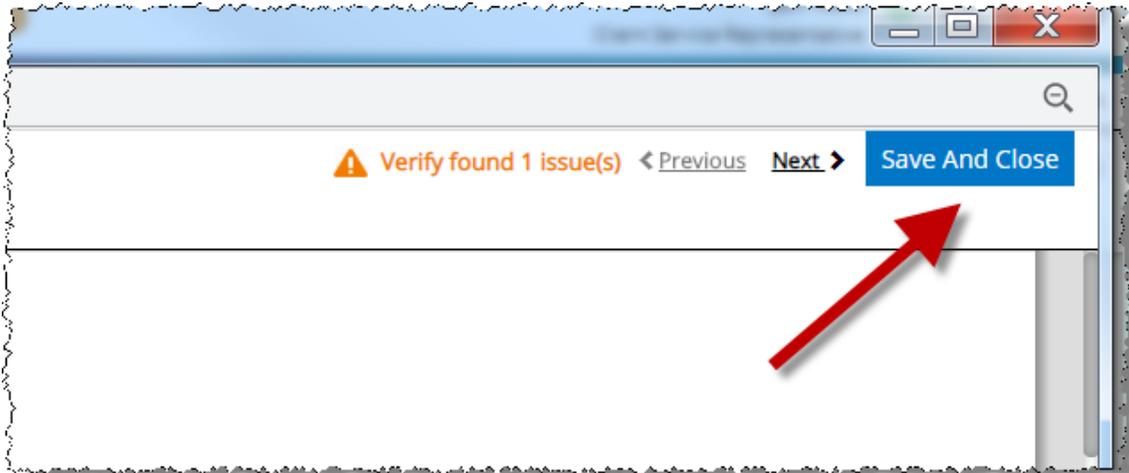
9. You'll return to the **Fulfillment** screen. The **Verify** message may change, depending on what corrective action you took.

In some cases, **Verify** may still show possible issues even though have reviewed the Medical Records and are sure they're correct. For example, there may be a mix of searchable and non-searchable pages.

If you're sure all the pages meet the requirements of the Request Letter, you should submit the request even if **Verify** shows issues.

10. Check all other request information — other patient identifiers, dates of service, etc.

11. Complete your **Fulfillment** tasks and submit the request.

Scenario 3 — Verify not available

1. Open a request that is any **Fulfillment** status and attach the Medical Records.

2. For this scenario, we'll assume that the request was **NOT** eligible for **Verify**:

   2.1   No searchable PDF in the first five pages of the Medical Records;

   2.2   More than 75 MB in size;

   2.3   Longer than 500 pages.

3. You'll see the **Verify unavailable for this request** message at the lower left corner of the **Fulfillment** screen.

You **MUST** still manually review the Medical Records!

Whether or not **Verify** is able to run, you are still responsible for checking the Medical Records against the requirements of the Request Letter.
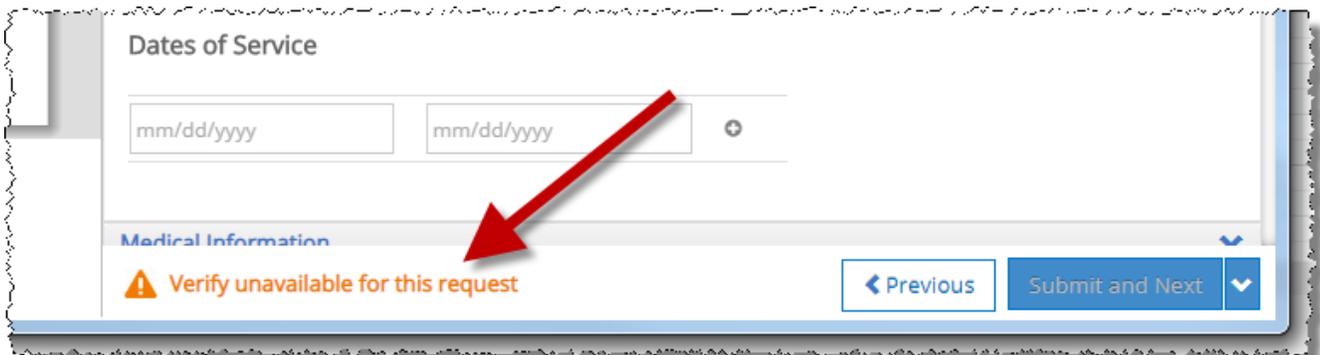
4. Check the Medical Records against the available request information — patient name, other patient identifiers, dates of service, etc.

5. Complete your **Fulfillment** tasks and submit the request.

Frequently Asked Questions about Verify

Question	Answer
What's the purpose of **Verify**?	By warning you of possible problems before you submit a request, **Verify** should lower the chance of an Unauthorized Disclosure (UAD). It should also cut down how often requests are "pulled and destroyed" after printing but before delivery.
Do all Medical Records need to be searchable PDFs now?	No. Your supervisor will let you know if and when to change your process.
What if the wrong **Patient Name** was entered during **Logging**, but the Medical Records are for the right patient?	Change the **Patient Name** on the **Fulfillment** screen. **Verify** does **NOT** run again. The **Verify** message in the lower left corner of the **Fulfillment** screen will **NOT** change, even if the "new" **Patient Name** is found on every page of the Medical Records.
Will **Verify** slow me down?	Not enough to notice. During testing, **Verify** evaluated a 387 page searchable PDF in less than 2 seconds. None of the pages included the expected **Patient Name**, so it flagged 387 possible issues. The time you'll spend reviewing the Medical Record pages should be no different than it was before. As described on page 8, you're still responsible for checking the Medical Records regardless of what **Verify** finds.
Can I submit a request with potential issues?	Yes. There may be valid reasons to submit this kind of request. For example, if the Medical Records include both searchable and non-searchable pages, each non-searchable page would be flagged even if they all contain the **Patient Name**.
Is submitting a request with potential issues tracked in **Request History**?	Yes. The **Request History** shows "Request submitted with # potential issue(s) found by Verify."

FULFILLMENT QUALITY CONTROL

Requests can now be routed for a Quality Control review after being submitted from **Fulfillment**. This process consists of these main steps:

| Step	Description	Request Status
1	The request is routed to the **Fulfillment Quality Control** workflow only if it meets certain rules.	N/A
2	We turn the Medical Records into a searchable PDF file — regardless of the original format.	QC in Progress
3	An automatic review checks these values in the Medical Records against what was entered for the request: • Patient Name • Patient Date of Birth • Dates of Service	QC in Progress
4	If possible problems are found in Step 3, the request requires manual review. • Requests can be "forced" to manual review even if the automatic review find no potential problems.	Fulfillment Quality Control
5	A **HealthSource Clarity** user with the **QC Reviewer** permission checks the request and decides how to handle it: • allow the request to continue to the next step in the workflow — certification, invoicing, indexing, delivery, etc.; • flag it as an **Exception** so that it can be corrected by a Client Service Representative.	Fulfillment Quality Control

New user role for Fulfillment Quality Control

You must have the new **QC Reviewer** permission to manually review requests that have been routed to **Fulfillment Quality Control**.

If you don't have this permission, you can still open these requests, but they will be displayed in read-only mode.

Fulfillment Quality Control workflow

This diagram shows the main steps of the **Fulfillment Quality Control** process.
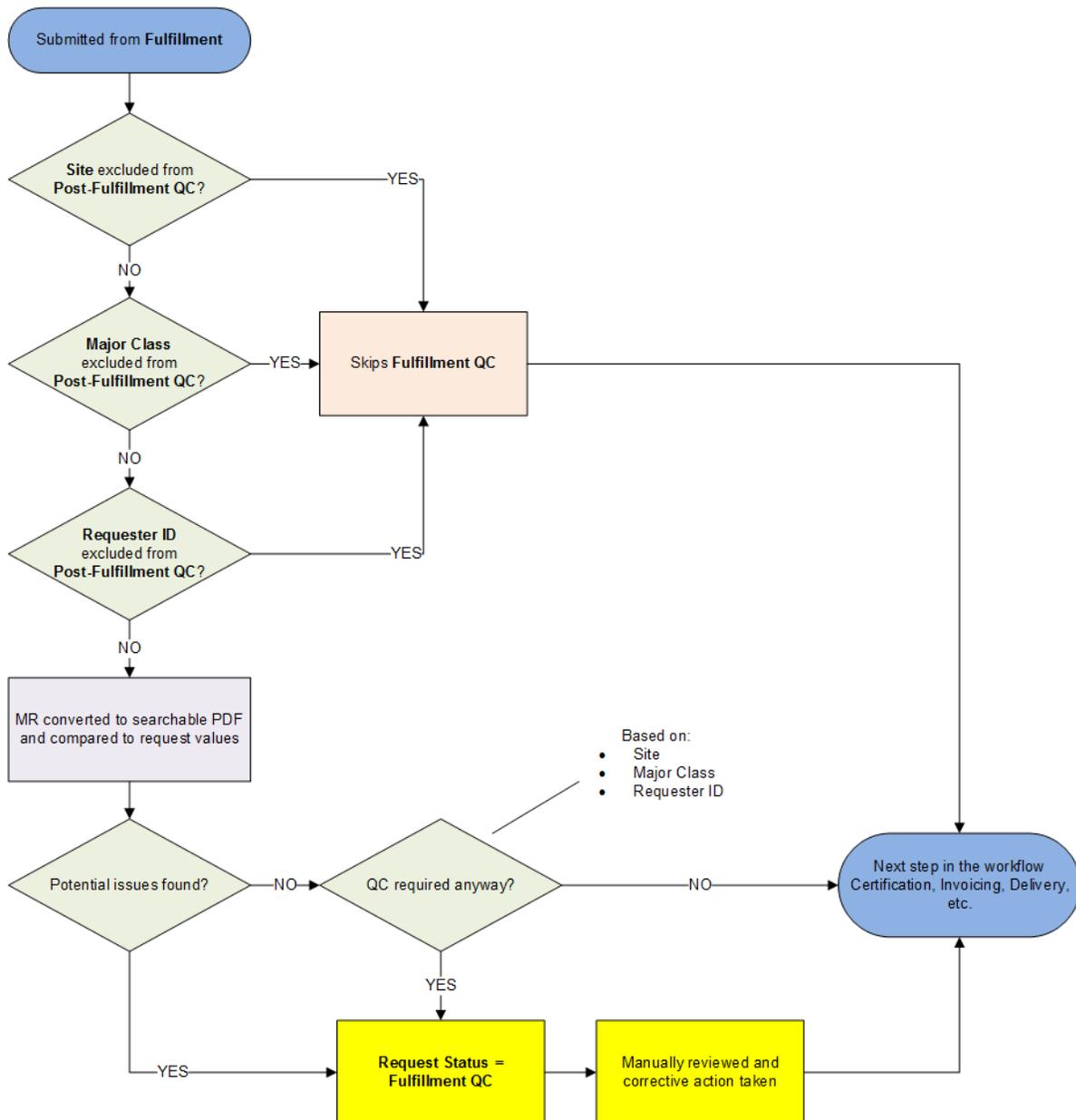
Fulfillment Quality Control Rules

These rules determine if a request is sent for an automated Quality Control review in the first place.

Depending on the automated results, the request can then be sent for manual review or to the next "normal" step in the workflow, such as delivery.

Rule	Default condition	Options
Delivery Method	If the request uses an on-site **Delivery Method**, it is **NOT** routed to **Fulfillment Quality Control**: • CD / DVD / Flash Drive • Faxed • Walk-In Because the CSR sends or gives these Medical Records to the requester, there is no point in sending them for review.	
Site	All **Sites** are enabled for **Fulfillment QC** by default.	Can be disabled for a specific **Site**.
Major Class	Enabled, except for: • Direct Payor (PAYD) • Government (GOV) • Continuity of Care (COC)	Can be disabled for a **Major Class**.
Requester ID	Enabled for all requesters, except for the excluded **Major Classes** listed above.	Can be disabled for a specific **Requester ID**.
Suspects found	Did the automated **Fulfillment QC** review find suspicious Medical Record pages? **YES** — routed for manual review. **NO** — sent to the next step in the request workflow (certification, invoicing, delivery, etc.).	Requests can be forced to manual review, regardless of the automated results, based on: • **Site** • **Major Class** • **Requester ID**

What does Fulfillment Quality Control look for?

When **Fulfillment Quality Control** automatically searches the Medical Records, it looks at these values:

- Patient Name

- Patient Date of Birth

- Dates of Service

Any mismatch between the values found in the Medical Records and the values entered on the request are flagged as **Suspected Conflicts**.

Request Search defaults for QC Reviewer role

When a user with the **Fulfillment Quality Control** role logs into **HealthSource Clarity**, the **Request Search** page appears and shows these requests by default:

| Search criteria	Search parameters	Can be changed?
Date Range	• Intake Date • Last 6 months	Yes
Sites or Groups	All Sites	Yes
Request Progress		
Milestone	**Fulfillment**	No
Request Status	**Fulfillment Quality Control**	Yes Can also choose **QC In Progress**
Request Characteristics		
Type and Requester Class	All	Yes
Request Reason	All	Yes
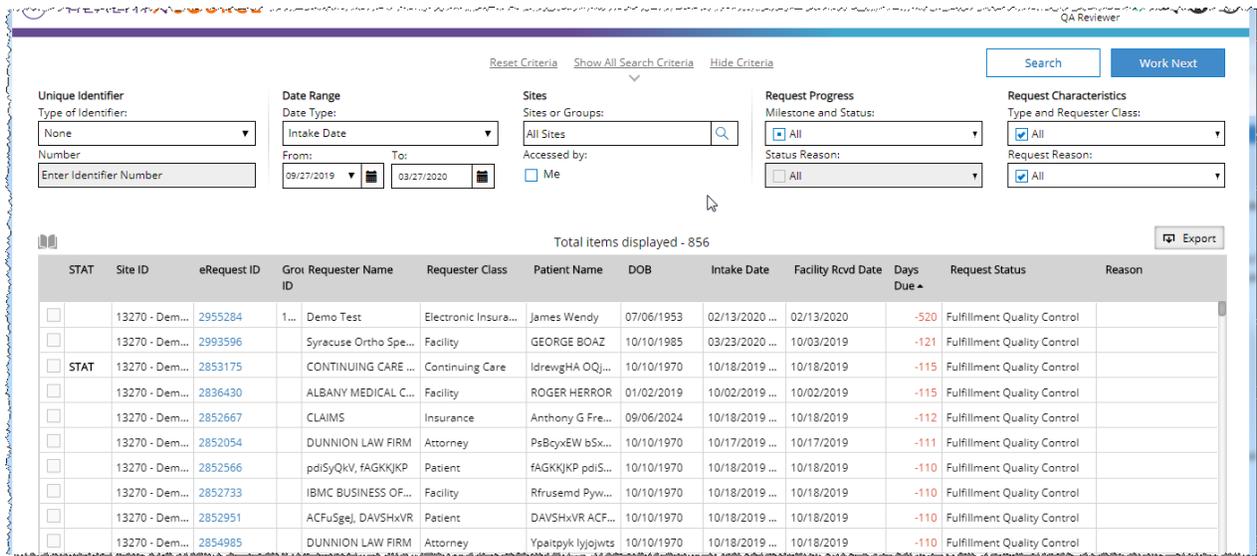
Manual review of Fulfillment Quality Control requests

|	The character recognition (OCR) and Natural Language Processing (NLP) tools used during automatic evaluation can cause:
⚠️	• False negatives — Correct values flagged as suspects • False positives — Incorrect values not identified as suspects You must still review the Medical Records for requests sent to Fulfillment Quality Control.

1. Log in to **HealthSource Clarity** as a user with the QC Reviewer permission.

2. On the **Request Search** page, click **Work Next**.

3. The request opens, with the Request Letter displayed in the **Document** window on the left side.

4. Do you see a **Review Suspected Conflicts** notification at the bottom of the **Data Entry** window?

    4.1 **YES** — Go to Step 5.

    4.2 **NO** — The automated review did not find possible conflicts, but the request was forced to manual QC review anyway. See No Suspected Conflicts flagged? on page 27.
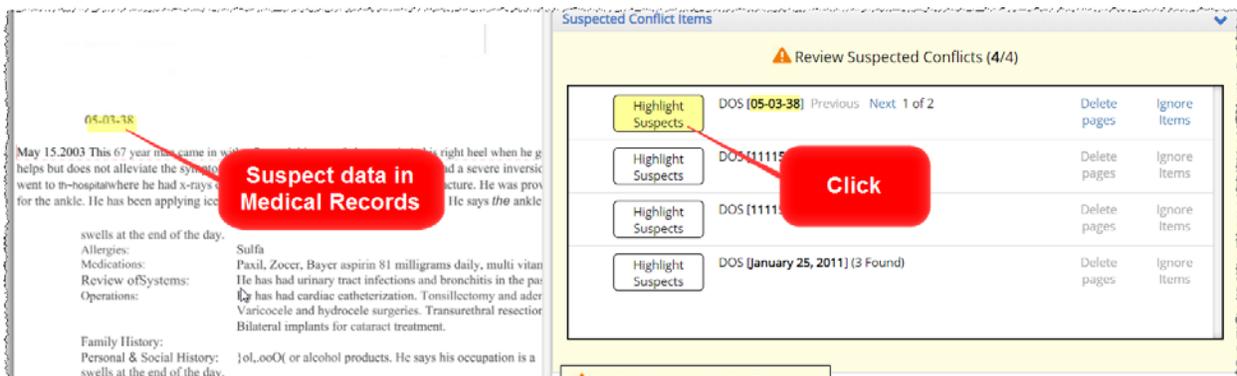
Yes	No
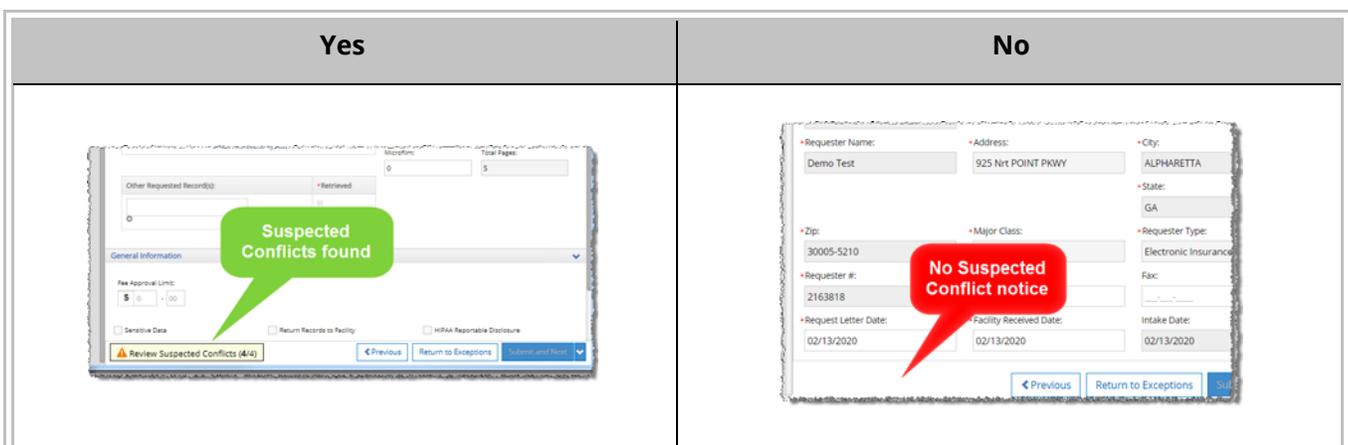
5. Click the **Review Suspected Conflicts** notification.

6. The screen changes to the **Fulfillment Quality Control** view, showing you the **Medical Records**, **Patient Information**, and the list of **Suspected Conflict Items**.
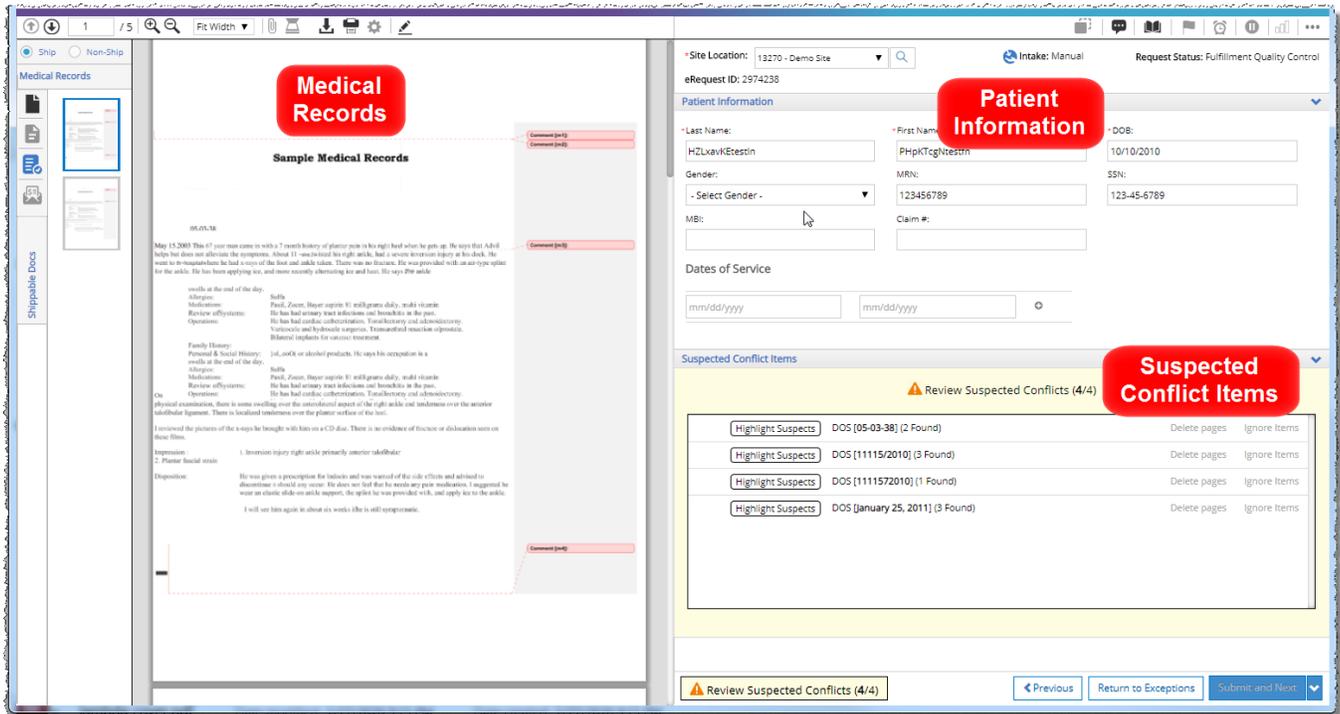
7. Click **Highlight Suspects** for the first **Suspected Conflict Item**. The suspect data is highlighted in the Medical Records.

7.1 If the suspect data was found on multiple pages, click **Next** / **Previous** until you have reviewed all the places on which it was detected.
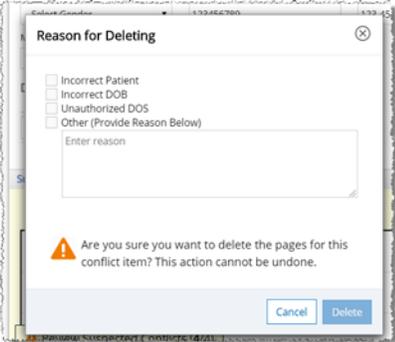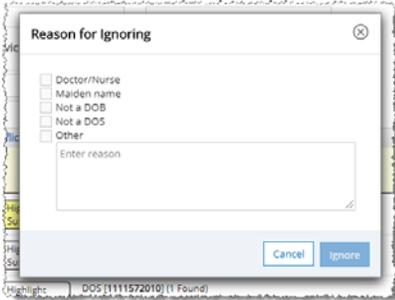
8. Review the **Patient Information** and decide how to proceed.

    8.1   You may need to check the Request Letter to find exactly what was authorized.

    8.2   Check with your supervisor if you have questions about how to proceed. These instructions are more technical (how-to) than operational (why-to).

| Action	Result	Use when
Delete Pages	Deletes **EVERY** page on which the suspect data was found. You **CANNOT** undo the deletion of pages.	The Medical Record page clearly was not requested — it reflects the wrong **Patient** and / or the wrong **Dates of Service**. In some cases, you may want to Ignore the suspected problems rather than delete the pages. For example, you may want the CSR to be able to see the "wrong" pages so they are not captured again.
Ignore Items	Leave the pages in the Medical Records. This action effectively means "I looked at the suspect item and it is not a cause for concern."	The suspect item is **NOT** the **Patient Name**, **Patient DOB**, or requested **Date of Service**. For example, a doctor's name may be flagged as a suspect.
		Patient Name, **Patient DOB**, or **Date of Service** is in a different format than expected but the Medical Records still meet the request. For example, the Request Letter may refer to Jane Doe, while the Medical Records are for Janet B. Doe. You might also see simple typos (mistakes) flagged as suspects. If this happens, use other patient identifiers (DOB, Account, Case, etc.) to verify that the correct Medical Records were captured.
		The patient information was entered incorrectly during **Logging** or **Fulfillment**. See page 28 for more information.

9. Provide a **Reason for Deleting** or **Reason for Ignoring**:

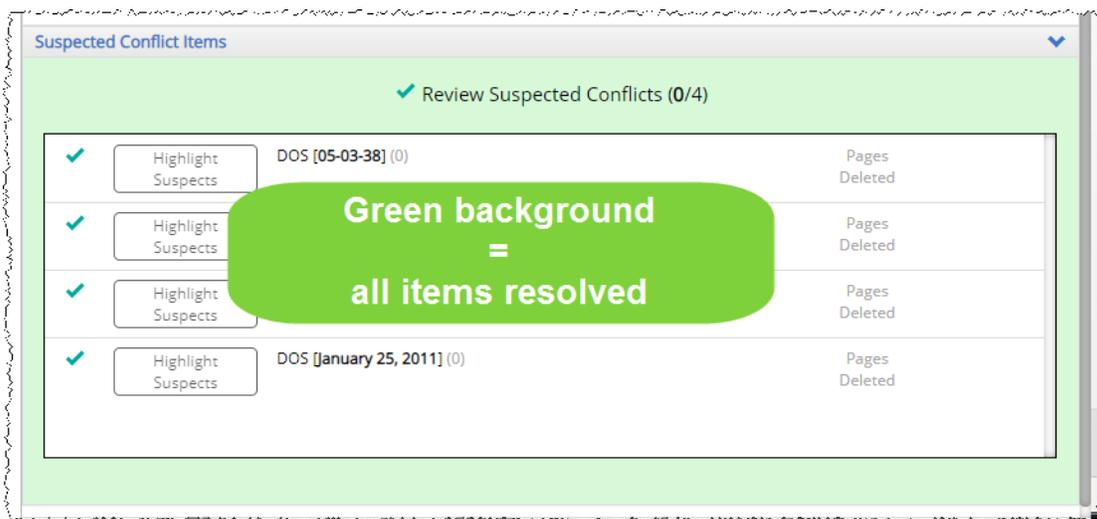| Reason popup	Reason	Use when
	Incorrect Patient	Medical Records belong to the wrong patient.
	Incorrect DOB	Medical Records belong to the wrong patient.
	Unauthorized DOS	Medical Records cover **Dates of Service** not authorized by the Request Letter.
	Other	You must provide details to explain why you deleted the pages.
	Doctor / Nurse	The name belongs to a health care practitioner, not the patient.
	Maiden name	The name reflects the correct patient but the Medical Records come from a time before the patient's name was legally changed.
	Not a DOB	The suspect date value is something other than the patient's **Date of Birth**. For example, it might be a date of treatment.
	Not a DOS	The suspect date value is something other than a **Date of Service**. For example, it might be a **Date of Birth** or a dated comment.
	Other	You must provide details to explain why you ignored the suspect data.

10. The first **Suspected Conflict Item** is marked with a **GREEN CHECKMARK**.

    10.1 If you deleted pages, and those pages originally contained other suspect items, the "later" suspects will be removed from the list.

    10.2 Click **Revisit Items** to "undo" the **Ignore Items** command. You **CANNOT** use **Revisit Items** to restore pages that you deleted.
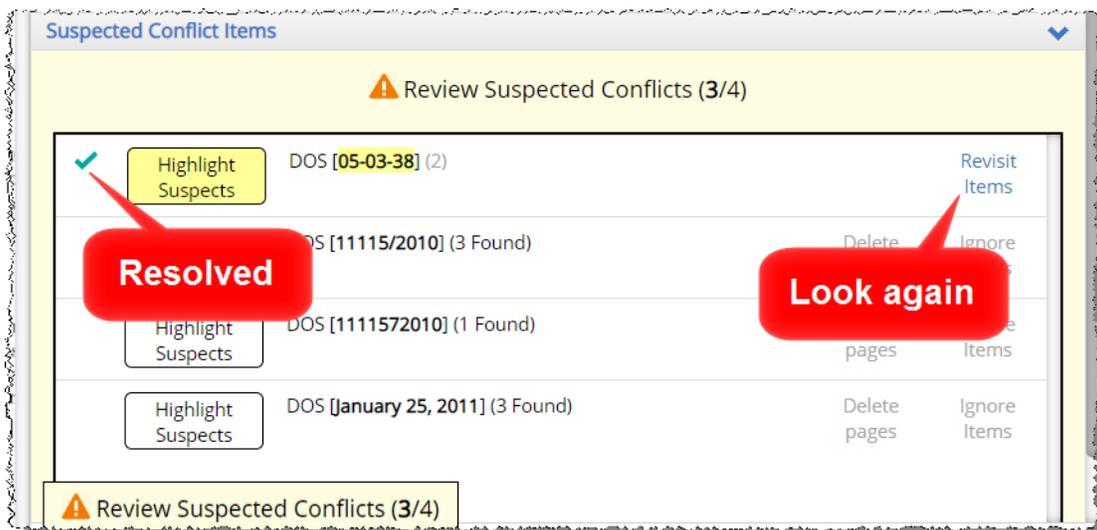
11. Repeat Step 8, Step 9, and Step 10 until you resolve everything. At that point, the background of the **Suspected Conflict Items** window turns **GREEN**.

12. Do the Medical Records now meet the requirements of the Request Letter?

Decision	Action
YES	1. Click **Submit and Next**. 2. A new request appears.

NO	1. Click **Return to Exceptions**.
	
	2. The **Flag as Exception** window appears.
	
	3. The **Exception Reason** is <u>Fulfillment QC Failed</u> and cannot be changed.
	
	4. In the **Comments**, provided a meaningful explanation of why the request failed QC.
	
	  • If possible, add suggestions as to corrective action. For example, the CSR might need to ask for a revised Request Letter covering the available Dates of Service.
	
	5. Click **Exception and Next.**
	
	6. The request goes back to the site at which it was processed:
	
	  • **Request Status** = <u>Fulfillment Exception</u>.
	
	  • **Exception Reason** = <u>Fulfillment QC Failed</u>.

No Suspected Conflicts flagged?

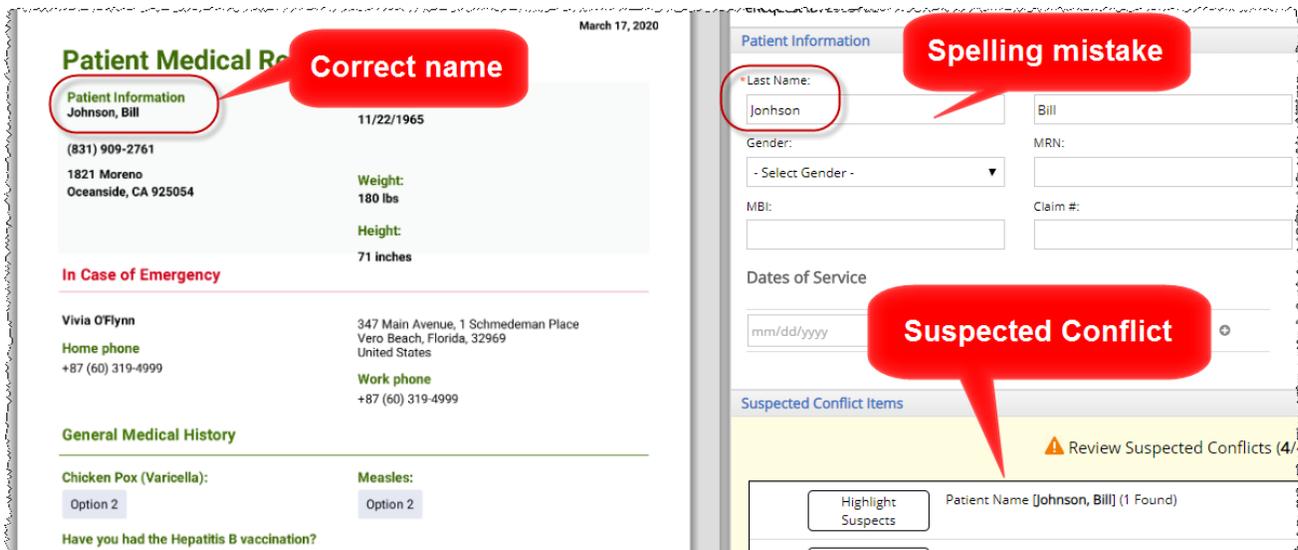You may open a **Fulfillment Quality Control** request and see no **Suspected Conflict Items**.

When this happens, the request was pushed to the manual **Fulfillment Quality Control** step by a business rule (page 18), not because possible problems were found.

1.   Review the Request Letter, Medical Records, and Patient Information.

2.   Do the Medical Records meet the requirements of the Request Letter?

    2.1   **YES** — **Submit and Next**.

    2.2   **NO** — **Return to Exceptions**.

![Ciox Health logo]

Medical Records are right, patient information entered wrong

In some cases, **Fulfillment Quality Control** may identify possible suspects because of data entry errors during **Logging** or **Fulfillment**. For example:

- the **Patient Last Name** typed incorrectly as "Jonhson" during **Logging**.

- The automated review finds a **Suspected Conflict** on every Medical Record page that included the correct name, "Johnson."

If this happens:

1. Change the incorrect value on the **Patient Information** section of the **Data Entry** window. The **Suspected Conflict** message is **NOT** updated — we **DON'T** push the request back through the automated **Fulfillment QC** review.

2. **Ignore** the suspects that were caused by the data entry error. Use the **Other** reason and explain that the problem was caused by a mistake during **Logging** or **Fulfillment**.

3. Review the Medical Records for any other potential problems.

4. **Submit** the request.

FAQ

Question	Answer
Can a request go to **Fulfillment Quality Control** only one time?	**NO**. There is no limit to the number of times a request may visit **Fulfillment Quality Control**.
I changed the **Patient Name** but it still shows as a conflict.	We **DON'T** check again after you change a data entry value. **Ignore** the **Suspected Conflict Items** and explain that you switched the value.
I opened a request and there were no **Suspected Conflicts**.	A request can still be "forced" to **Fulfillment Quality Control** even if the automated review of the Medical Records did not find any potential issues. You must carefully review these requests and decide if they meet the requirements of the Request Letter.
Does **Fulfillment Quality Control** slow down the delivery of a request?	**YES**, but the benefits outweigh the time delay. A request that was perfectly handled by a CSR, but goes through **Fulfillment Quality Control** anyway, will be slightly delayed compared to the same request that skips QC. The exact amount of time depends on the size of the Medical Records and how long the QC process takes. However, **Fulfillment Quality Control** should cut down the number of Unauthorized Disclosures and incomplete requests. The reduction of "emergency" work to pull and destroy requests, retrieve shipments before delivery, or deal with the financial and legal penalties for a UAD is well worth the extra time spent in QC.