

HealthSource Clarity v1.8 Release Notes

June 2020



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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 of **HealthSource Clarity v1.8**:

Browser	os	Version / Build #
Chrome	Windows 7 or 10	81.0.4044.138
Internet Explorer	Windows 7	11.0.9600.18617
Internet Explorer	Windows 10	11.356.18362.0
Edge	Windows 10	81.0.416.72

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



Clear your browser cache daily for best performance.



LIMITED REQUEST LETTER OPTIONS DURING FULFILLMENT

Accidental loading of large files to the **Request Letter** tab causes serious performance problems across the entire **HealthSource Clarity** system. A 100MB file loaded to the wrong place can slow down the application for thousands of users.

These accidents typically occur because users don't switch from the **Request Letter** tab to the **Medical Records** tab in the **Documents** window.

To help prevent such accidents, we've added two rules:

- Rule 1: Edit command required to add Request Letter pages
- Rule 2: Limit Request Letter to 10MB when attaching



Rule 1: Edit command required to add Request Letter pages

IF

a request is open for **Fulfillment**;

AND

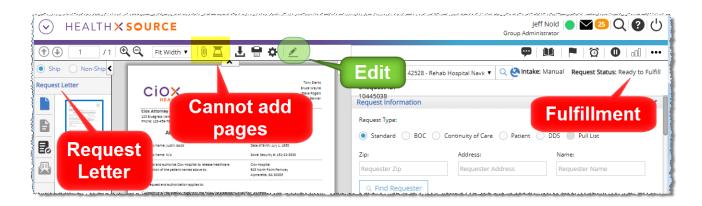
the **Request Letter** tab is open in the **Documents** window;

THEN

you cannot add pages to the Request Letter.

UNLESS

you use the **Edit** command, which opens the Request Letter in a new window.



This rule applies to all methods of adding pages — attach, drag / drop, scan, or from a **HealthSource** printer.



Rule 2: Limit Request Letter to 10MB when attaching

IF

you Edit the Request Letter during Fulfillment (page 6);

AND

use the Attach command (or drag / drop) to add pages;

BUT

the resulting Request Letter larger than 10MB;

THEN

you will be notified that it exceeds the allowed size. You will **NOT** be able to save the revised Request Letter.





This rule does **NOT** apply if you **Scan** or use a **HealthSource** printer.

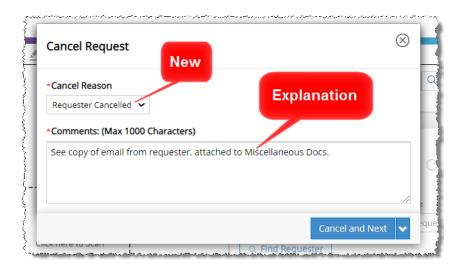


REQUESTER CANCELLED NOW AVAILABLE AS A CANCEL REASON

Based on feedback from the field, we've added <u>Requester Cancelled</u> to the available **Cancel Reason** options. Use this option when a requester "withdraws" a request.

We **HIGHLY** recommend attaching documentation about the cancellation. You may add this documentation to the Request Letter or attach it as a Miscellaneous Document.

You must also enter information in the **Comments** field. We suggest that you reference any documents provided by the requester. If no documents were provided, use the **Comments** to capture the name, date, and contact information of the person who cancelled the request.





Your facility may have specific rules about the cancellation process, including what kind of documentation is required.

Request Search and cancelled requests

You can search for cancelled requests:

- Milestone = Closed
- Status = Cancelled

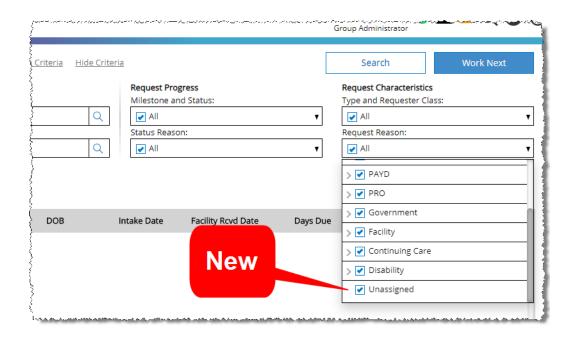
However, the **Search Results** do not show the **Cancel Reason**.



SEARCH FOR REQUESTS THAT LACK PRIMARY REASON FOR REQUEST

As we expand our digital connections to requesters, more requests are being created without a **Primary Reason for Request**.

You can now **Search** for this kind of request by selecting the **Unassigned** option in the **Request Reason** field.





Unassigned can be used in combination with other parameters

As in previous versions of **Request Search**, the new **Unassigned** option can be used in combination with other search parameters. It does not exclude any other search choices.

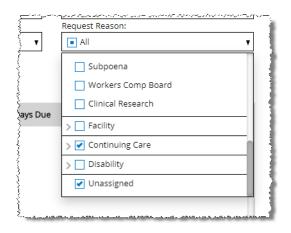
For example, you can search for **Unassigned** requests that also:

- were received in the last 7 days;
- have a Status of Ready to Log;
- were received from Insurance requesters;

Can select multiple Request Reasons for search

The new **Unassigned** option can be selected in combination with other **Primary Reason for Request** choices.

In the following picture, note that the **Continuing Care** and **Unassigned** options are both selected:





NEW SECONDARY REASON FOR REQUEST

IF

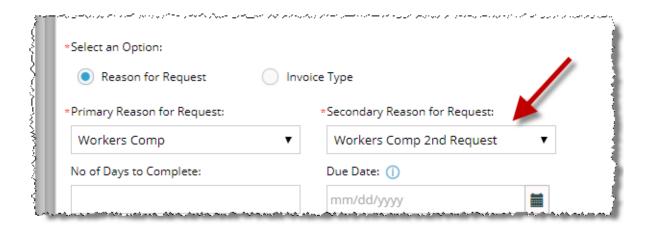
the Requester Type is Insurance;

AND

the **Primary Reason for Request** = Workers Comp;

THEN

the <u>Workers Comp 2nd Request</u> option is available as a **Secondary Reason for Request** at every site.



This option is available whether the **Major Class** for the requester = **Insurance** or **Copy Service**.

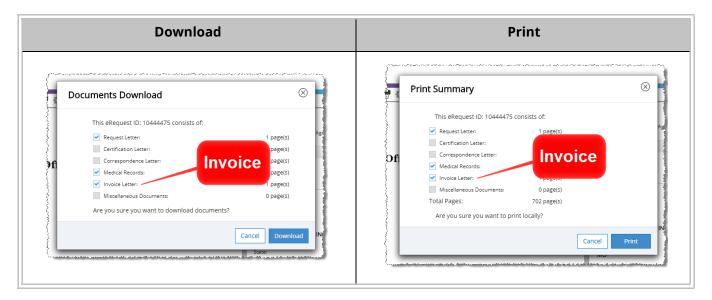
Previously, this choice was only available at sites in Kentucky.



DOWNLOAD OR PRINT INVOICES FOR PAYMENT PENDING REQUESTS

You can now download or print the **Invoice Letter** for requests with a **Status** of <u>Payment Pending</u>.

Previously, the **Invoice Letter** was not available for these requests.



The ability to download or print the **Invoice Letter** is **NOT** restricted by user role. If you have access to the site at which the request was processed, the **Invoice Letter** will be available to you.



UPDATED EMAIL ADDRESS FOR MESSAGES

We have changed the email address associated with **Customer Service** roles in the **CorpWeb** application.

Customer Service specialists use **CorpWeb** to review requests submitted from **HealthSource Clarity**. When these specialists have questions about requests, they send a **Message** to the field and are notified by email when the field responds.

Previously, the response notifications were sent to the <u>repmessages@cioxhealth.com</u> account, which was not consistently monitored. The notifications will now be sent to <u>service@cioxhealth.com</u>.



DEFECTS FIXED

v1.8 fixes these issues reported by users:

Defect

When **Disability** requests were created through the Electronic Intake process, the **Requester Type** was incorrectly set to **Government** instead of Disability (**DDS**).

Users were allowed to create **Fulfillment Correspondence** without providing all required patient identifier values, such as **DOB**, **Account #**, **SSN**, **MBI**, **Gender**, etc.

These values must now be provided before a user can create and send **Fulfillment Correspondence** to the requester.

Some requests lacked the **Reason for Request** / **Invoice Type** information after reaching the **Back Office** segment of the ROI workflow. This lack of data made it difficult to price and bill the requests.

This problem typically occurred in these situations:

- **Reason for Request** = RAC Medicaid (Invoice Type 85)
- Site was changed during Fulfillment
- Request closed due to Correspondence

Users could not download and / or print Medical Records for requests with a **Request Status** of:

- Packaging Payment Pending
- Packaging Hold

The **Certification** indicator was not being displayed for **Packaging — Payment Pending** requests.

WHEN a request was originally identified as a Pull List;

BUT a user then selected the **Split Request** command;

AND "child" requests were created by splitting the original request;

THEN the child requests could experience these problems:

- Requester Search not available;
- · Request Letter missing or wrong.

Requests that had been submitted to and fixed in the **New Requester** process would not load the **Site Location** value and could not be logged.

14 Defects fixed



Defect

Users forced to clear and re-enter **DOB** value during **Fulfillment** in order to submit the request.

This problem occurred when a Site was configured to require the **DOB** during **Fulfillment** but not during **Logging**.

WHEN the **Primary Reason for Request** = <u>Patient Transfer</u>;

AND the Bill To Address was different than the Ship To Address;

THEN the **Bill To Address** overwrote the **Ship To Address** when the request was submitted from **Logging**.

This issue affected only Internet Explorer and Edge browsers:

If Medical Record pages were deleted because the **Verify** process found possible problems, the request could not be submitted.

Request creation through API failed if:

- the **Requester Name** exceeded 30 characters;
- the email value (typically Patient Email) was a sub-domain format, such as @dhs.ga.gov.

This change will not be visible to most users, since it affects request creation through the API.

This error affected only requests created through a batch process (Intake = Electronic)

BOC requests were incorrectly associated with a **Government** requester, which caused the **Primary Reason for Request** or **Invoice Type** values to be empty.

Request creation failed when no **Due Date** was provided for:

- Direct Payor (PAYD) requests submitted from Ciox Phoenix;
- Indirect Payor (PAYI) requests created through the Indirect Chase process.

A **Due Date** is not required to create requests.

WHEN the **Request Type** = <u>COC</u> (Continuity of Care);

AND the **Delivery Method** = Fax;

BUT the request was flagged as a possible duplicate;

THEN the **Ship To Address** populated with the Ciox Alpharetta address. These requests do not require a delivery address.