



eRAD RIS

CUSTOMER RELEASE NOTES

Build v3.2021.6.7

UPDATED JULY 12, 2021



Table of Contents

Summary	2
Intended Audience.....	2
Who Is Affected.....	2
New Settings	3
RIS.....	3
Database.....	3
New Features	4
Payment Control.....	4
Feature #29943 - Enhancements to pre-approved payment workflow.....	4
Resource Scheduling.....	10
Feature #29647 - Script for Resource Scheduling to Backfill Appointments.....	10
Clinical Tasks.....	10
Feature #30209 - Option to hide incomplete Clinical Tasks on the All Pending Dictation WL.....	10
Login.....	11
Feature #30038 - Support custom sorting and a default selection of Systems on RIS login screen.....	11
Database.....	12
Service-Only Feature #29678 - Deadlock prevention when updating worklist flags.....	12
Resolved Issues and Known Limitations	13
Resolved Issues.....	13
New Known Limitations.....	14
Version Details	15
Package Contents.....	15
Code Stream.....	15
eRAD RIS Release Version Numbers.....	16

Publication History

Revision	Author	Description
July 12, 2021	Kevin Brooks / Hilary Saltmarsh	<ul style="list-style-type: none"> ▪ Commercial release.

SUMMARY

Intended Audience

The intended audience for this CUSTOMER RELEASE NOTES document is the RIS Administration team for all eRAD RIS customers.

This document describes the purpose, configuration, and operation of new features made available with this release, identifies issues resolved in the release, and highlights any unresolved known limitations.

This information should be used by all customers to determine how these changes affect their organization's workflow, and to plan their organization's upgrade strategy for eRAD RIS.

Additional technical details and deploy instructions are available to the Service Team in the SERVICE RELEASE NOTES edition of this document.

Who Is Affected

This release of eRAD RIS v3.2021.6.7 includes both feature enhancements and a variety of resolved issues.

Notable enhancements are changes Clinical Tasks and enhancements to the PreApproved Payment workflow.

This version contains new features and performance improvements, and bug fixes that are recommended to be applied on eRAD RIS v3.2021.5.24 or v3.2021.5.24.1 installations.



Pleased carefully review these release notes even if your system will not be upgraded immediately, to identify and communicate any issues that may affect your organization.

NEW SETTINGS

Summary of all settings that were added, updated, or removed.

RIS

Changes to Access Strings

The following settings were added or updated with this release:

Setting	Default	Purpose
Clinical.PaymentExplanation	Value=[None Full], Default=[None]	Controls access to the "PreApproved Payment Explanation" button and dialog from the Payment Details and Scheduling Review screens. Added in v3.2021.6.7 #29943
Config.LookupEditor.Explanation	Value=[None Full], Default=[None]	Controls access to the "Explanation" lookup table editor for the PreApproved Payment workflow. Added in v3.2021.6.7 #29943

Changes to SysConfig Settings

The following settings were added or updated with this release:

Setting	Default	Purpose
PreApprovedPaymentOnReviewScreen	Value=String, Default=Blank	Text regarding PreApproved payments, displayed on the Review screen at the time of scheduling. When blank, PreApproved Payment information and the PreApproved Payment Explanation button will be hidden on the Review screen. Added in v3.2021.6.7 #29943
PatientTransactionLockEnabled	Value=Boolean, Default=[True]	Deadlock prevention when updating order or study level worklist flags. When [False], lock will be bypassed. Warning: Do not modify unless directed by the Service Team. Caution: Restart of RIS services may be required. Added in v3.2021.6.7 #29678

Changes to ClinicalTask RIS Lookup Table

This table is new with this release.

Database

Stored Procedures

SERVICE-ONLY FEATURE #29647 - SCRIPT FOR RESOURCE SCHEDULING TO BACKFILL APPOINTMENTS

NEW FEATURES

Payment Control

Feature #29943 - Enhancements to pre-approved payment workflow

Summary

This enhancement to Payment Control introduces several additions to the pre-approved payment workflow, introduced in FEATURE #27641, that add information and assist with troubleshooting of this workflow.

- A new "Explanation" workflow assists users in explaining a PreApproved Payment to a patient.
- A new PreApproved Payment Worklist Flag gives users advanced insight into patients expected to make a PreApproved Payment.
- Estimated PreApproved Payment display on Review screen during Scheduling, allowing patients to be informed ahead of time.
- Enhanced Audit History for Payment Details to assist with troubleshooting.

Feature Description

With the introduction of the PreApproved Payment workflow (see feature #27641), staff may be asked to have conversations with patients about money that they've never had before. Because patients are more likely to agree to a PreApproved Payment when they have a good understanding of why they are being asked to do so, this feature provides the RIS user with configurable explanation, instructions, guidance, or possibly even scripts to assist them in communicating with the patient.

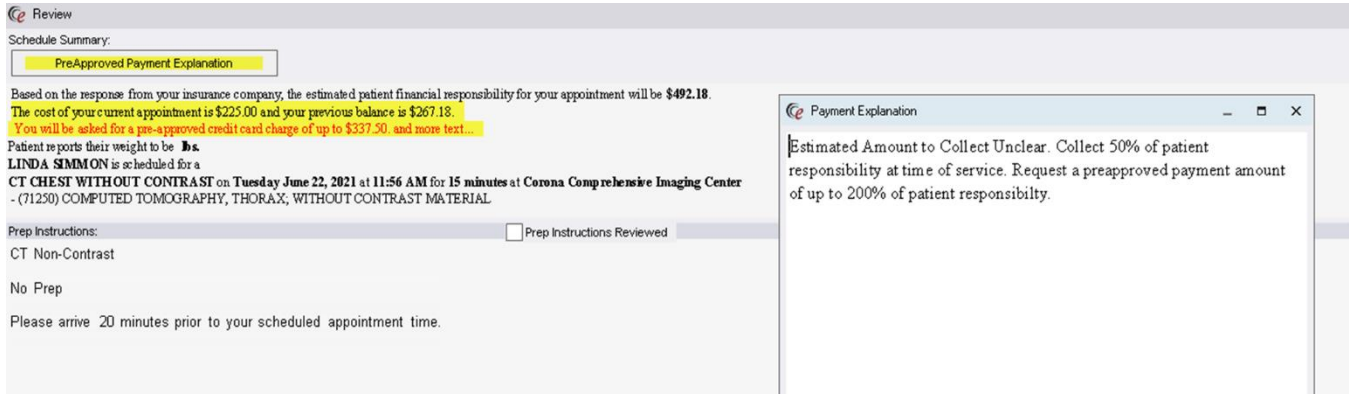
These notes will be configured in a new lookup table and tied to a PreApproved Payment rule via the `PreApprovedPaymentRule` editor. Because the explanation will vary depending on the specific scenario, a new configuration option has been added in the `PreApprovedPaymentRule` editor to allow an administrator to associate one or more explanation notes to the rule.

When a user is viewing `Payment Details`, any explanatory notes that are associated to the matching PreApproved Payment rule will be displayed on a new `Payment Explanation` screen that can be opened via a `PreApproved Payment Explanation` button.

In addition, informative worklist flags, advanced notice of the estimated PreApproved Payment Amount on the Review tab during scheduling, and more informative audit history will assist in the implementation of the PreApproved Payment feature set.

New "Explanation" workflow

To assist users and clarify the logic behind payment rules, explanatory text can now be associated with a matching rule.



A new **Explanation** RIS Lookup Table Editor has been introduced to configure the descriptive text. Initially, this will be used for the pre-approved payment workflow by creating an entry with an **Explanation Type** of **PreApproved Payment**. In the future, additional explanation types will be available for other workflows.

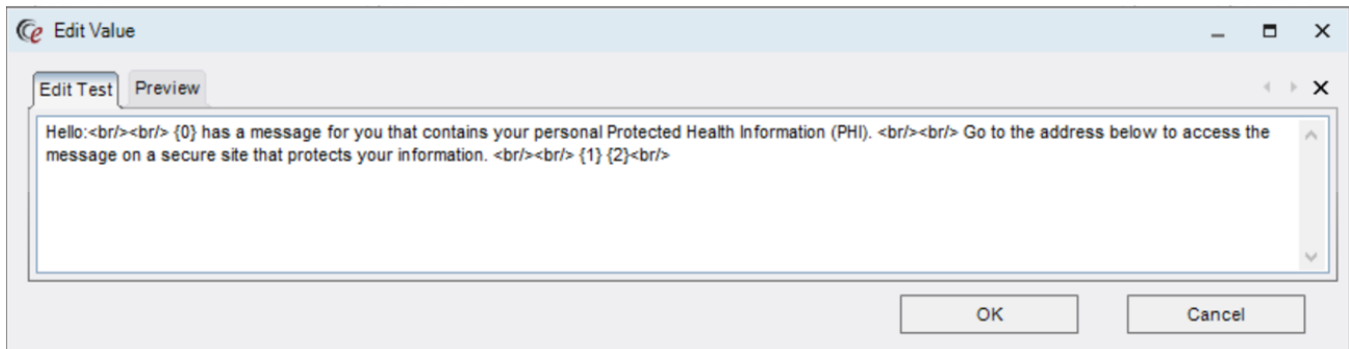
Lookup - Explanation

Explanation Code	Description	Text	Explanation Type	Display Order	Last Updated
t2	test 2	test 2	PreApproved Payment	1	05-31-2021... Y
t1	test 1	test 1 <h>test 1</h>	PreApproved Payment	1	05-31-2021... Y
t3	test 3	test 3 <h>test 3</h>	PreApproved Payment	1	05-31-2021... Y

Messaging is configured by first defining explanatory text, and then associating those messages with pre-approved payment rules. Relevant messaging will then be available on the Payment Details screen and the Scheduling review screen, for example:

The procedure you are having is not expected to be covered by your insurance. We ask that you give us permission to charge your credit card for the full cost of the exam after your insurance has processed the claim. If your insurance does pay a portion of the cost, your card will only be charged for any remaining balance.

A preview of the formatted text is available by selecting **Edit in Popup** from the context menu. This can be helpful when text includes extended formatting.

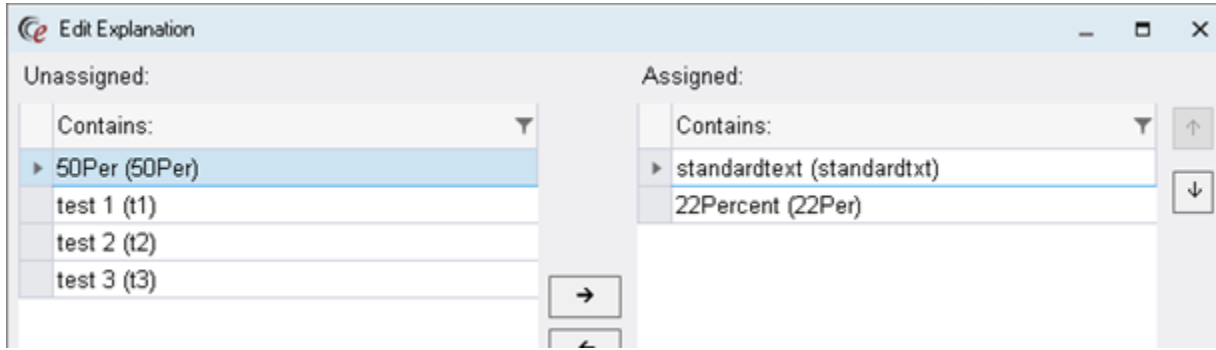


The new **Explanation Code** entries are then associated with pre-approved payment rules via a new **Explanation** column in the **PreApprovedPaymentRule** editor.

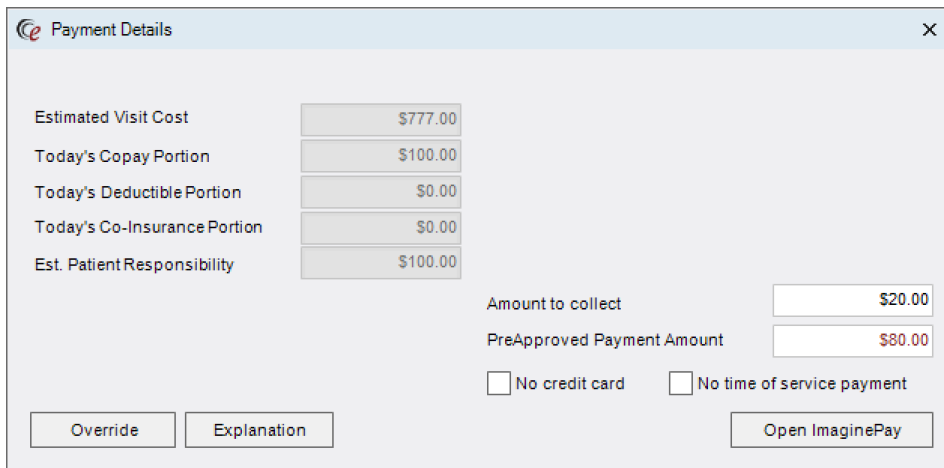
PreApprovedPaymentRule *

Order	Description	Rule Type	Explanation	Default ATC	Default Preapproved Payment A...	Carrier	Carrier Type	Secondary Carr...
1	test 3	Allowed	standardtxt, 22Per	22% of Patient Financial Re...	111% of Patient Financial Resp...	0100d...	(all)	(all)
2	test 2	Allowed	standardtxt, 50Per	50% of Patient Financial Re...	111% of Patient Financial Resp...	0100d...	(all)	(NONE)
3	tes 1	Allowed	standardtxt	100% of Patient Financial R...	111% of Patient Financial Resp...	(all)	(all)	(all)

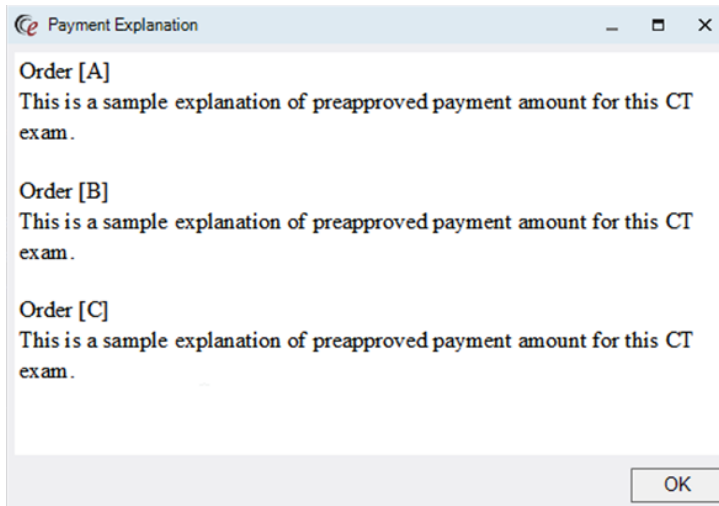
Clicking on a cell in the Explanation column displays an `Edit Explanation` dialog, where multiple explanations can be moved to the Assigned grid on the right, and then re-ordered as desired using the up and down arrows.



When Explanation notes configured in the `PreApprovedPaymentRule` lookup table match the current order (or orders if a payment is being made for multiple orders), a new `Explanation` button will appear on the Payment Details screen for users with `Clinical.PaymentExplanation` permission.



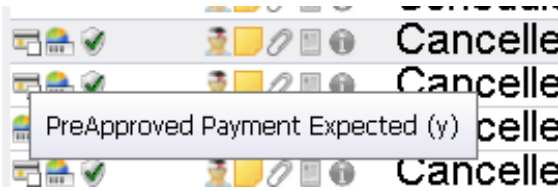
Clicking it will open the new `Payment Explanation` dialog to display relevant messaging. When multiple orders are included in the payment, corresponding entries are identified:



New PreApproved Payment Worklist Flags

To better identify which orders are expected to have a PreApproved Payment and which already have a PreApproved Payment on file, worklists including Reception and Confirmation will now display two new worklist flags.

The **PreApproved Payment Expected** flag will display when there is a matching PreApprovedPaymentRule with a Type of either Allowed or Required and the amount that would default for the PreApproved Payment is more than \$0.00.

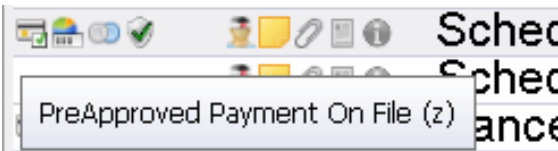


NOTE THE "UNCHECKED" CHECKBOX IN THE PREAPPROVED PAYMENT EXPECTED FLAG.

This flag will not be displayed when there is already a PreApproved Payment recorded for the visit, or if the default Time of Service Amount to Collect would cause the default for PreApproved Payment to be \$0.00.

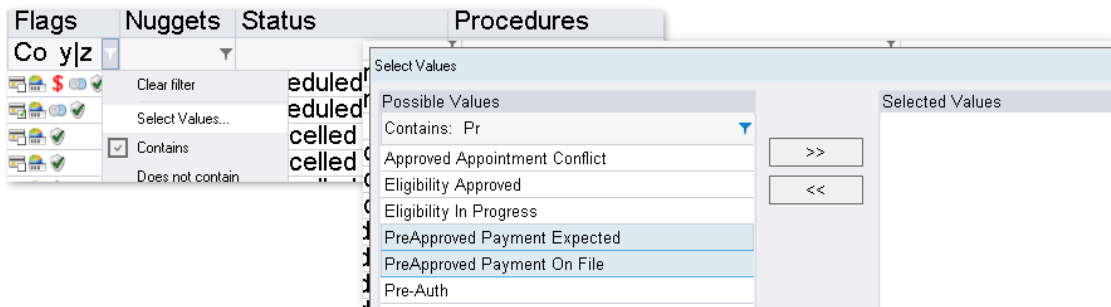
For example, if the Default Time of Service Amount to Collect is 100% of estimated Patient Financial Responsibility and the Default PreApprovedPaymentAmount is ALSO 100% of estimated Patient Financial Responsibility, the expectation is that the patient will satisfy the PreApproved Payment with their time of service payment, so the flag should not display.

The **PreApproved Payment On File** flag will display whenever there is a PreApproved Payment recorded for the visit.



NOTE THE "CHECKED" CHECKBOX IN THE PREAPPROVED PAYMENT ON FILE FLAG.

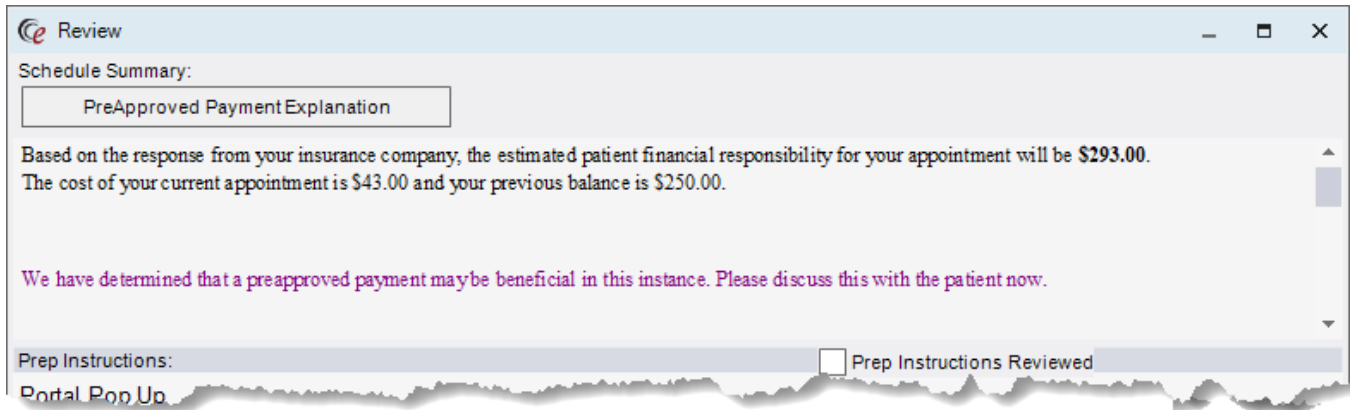
As with other worklist flags, users can filter on these two new PreApproved Payment values:



These new flags can appear on any worklist that displays flags, such as the Reception and Confirmation worklists.

Estimated PreApproved Payment on Review screen

To facilitate a review of PreApproved Payment details with the patient at the time of scheduling, a message regarding pre-approved payment information is now available on the Review screen, in addition to the estimated patient financial responsibility already displayed on the screen.

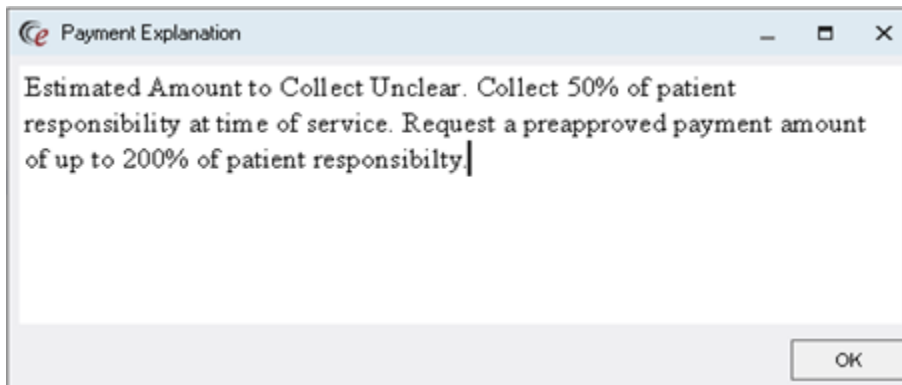


The message, as configured via the new `PreApprovedPaymentOnReviewScreen` RIS System Configuration setting, will appear when the estimated patient responsibility for the order is greater than zero (based on the matching `PreApprovedPaymentRule` applied to the order).

The text can include extended formatting, such as configuring text to display in a red font color for visibility purposes:

```
<span style='color:red'>
  You will be asked for a pre-approved credit card charge of up to {0}.
</span>
```

Along with this message, the `PreApproved Payment Explanation` button will also be visible for users with `Clinical.PaymentExplanation` permission.



Enhanced Audit History for Payment Details

Auditing of pre-approved payment transactions has been improved by adding a new `Payment Details` audit record that is saved after payment result has been returned from Imagine Pay.

Audit entries are now captured each time ImaginePay is opened from the Payment Details, to clarify regular payments vs pre-approved payments, including before and after values:

- Payment for Previous Balance
- Payment for Current DOS
- Amount to Collect
- PreApproved Payment Amount
- Whether No Credit Card is checked
- Whether No Time of Service is checked.

Filters			
<input type="radio"/> Patient	<input type="radio"/> Order	<input checked="" type="radio"/> Study	<input type="checkbox"/> Include retrievals
Date	Action	Description	
Equals: ▼	Contains: ▼	Contains: ▼	Contains: ▼
06-24-2021 9:19 AM	Payment saved	Added PreApproved Payment of \$337.50	
▶ 06-24-2021 9:19 AM	Payment saved	Added payment of \$112.50	
06-24-2021 9:19 AM	Payment saved	Visit updated	
06-24-2021 9:19 AM	Payment Details	Values from payment details dialog Payment for Previous Balance - Before:\$0.00, After:\$0.00 Payment for Current DOS - Before:\$112.50, After:\$112.50 Amt to Collect - Before:\$112.50, After:\$112.50 PreApproved Payment Amount - Before:\$337.50, After:\$337.50	

Configuration Instructions

System Administrators must complete the following actions to enable this feature:

RIS Client

Changes to RIS System Configuration Settings

- Enable this feature by entering a value for `PreApprovedPaymentOnReviewScreen` text.

The following related settings were added or updated:

Setting	Default	Purpose
PreApprovedPaymentOnReviewScreen	Value=String, Default=Blank	Text regarding PreApproved payments, displayed on the Review screen at the time of scheduling. When blank, PreApproved Payment information and the PreApproved Payment Explanation button will be hidden on the Review screen. Added in v3.2021.6.7 #29943

Changes to RIS Access String Settings

- Grant new permissions as necessary.

The following related settings were added or updated:

Setting	Default	Purpose
Clinical.PaymentExplanation	Value=[None Full], Default=[None]	Controls access to the "PreApproved Payment Explanation" button and dialog from the Payment Details and Scheduling Review screens. Added in v3.2021.6.7 #29943
Config.LookupEditor.Explanation	Value=[None Full], Default=[None]	Controls access to the "Explanation" lookup table editor for the PreApproved Payment workflow. Added in v3.2021.6.7 #29943

Resource Scheduling

Feature #29647 - Script for Resource Scheduling to Backfill Appointments

Summary

This enhancement to Resource Scheduling allows previously scheduled appointments to be updated with current resource scheduling information.

Previously, RIS could not recognize resource conflicts for procedures that were scheduled prior to enabling resource scheduling for a site, which resulted in RIS returning timeslots that were already booked by future appointments where a resource should have been reserved but wasn't because the resource configuration didn't exist at the time that study was initially scheduled.

With this change, a database stored procedure has been created to update all future appointments with the least used resource for that day.

This script is intended to be executed whenever there are significant changes are made to resource scheduling configuration.



The script will not un-assign resource assignments made in error; it will only assign values based on newly added resource scheduling configuration.

Configuration Instructions

Service Team assistance is required to enable this feature.

Clinical Tasks

Feature #30209 - Option to hide incomplete Clinical Tasks on the All Pending Dictation WL

Summary

This enhancement to Clinical Tasks introduces the option to exclude certain exams with incomplete Clinical Tasks from both Pending Dictation and All Pending Dictation worklists, configurable at the task level.

Previously, a checkbox in the Clinical Task dialog allowed individual exams to be hidden on the Pending Dictation worklist until the task was completed.

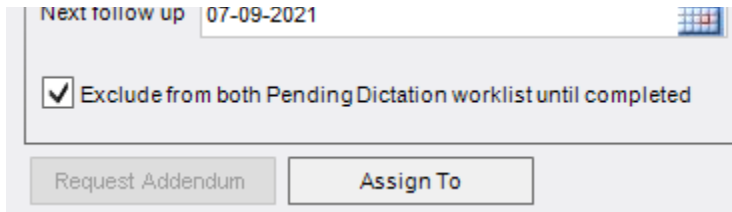
However, these items would still appear on the All Pending Dictation worklist, which normally shows all studies requiring dictation, including Suspended/Problem/Clinical Task studies. This was by design, due to the fact that most customers use the All Pending Dictation worklist as a way of monitoring all cases that are waiting for dictation.

With this change, a new `Apply Exclusion To Both Worklists Flag` column in the `ClinicalTask` RIS System Config table allows individual items to be hidden on **both** worklists at the Task level until the task is complete.



Items can either be excluded from the My Pending Dictation worklist, or from both pending dictation worklists; they cannot be excluded only from the All Pending Dictation worklist.

When enabled for a task, the text of the checkbox on the `Edit Clinical Task` dialog will display as `Exclude from both Pending Dictation worklists until completed`, instead of the usual `Exclude from Pending Dictation worklist until completed` wording.



The default value of the checkbox is controlled by the `Exclude from Pending Dictation` flag.

When linked reporting is in use, and any of the studies in a linked set have an incomplete clinical task that excludes it from the All Pending Dictation worklist, all of the linked studies, including the primary study, will be hidden until the clinical task on the non-primary study is completed.

Known Limitations

The following significant limitations have been identified and should be communicated to affected users:

- **BUG #30292- AN ORDER-LEVEL CLINICAL TASK THAT IS EXCLUDED FROM DICTATION WORKLISTS SHOULD HIDE ALL STUDIES ON THE ORDER**

Currently, when an order-level clinical task is assigned to one study on an order with the checkbox to exclude it from dictation worklists checked, that study will correctly be excluded from the worklists, but the other studies on the order will incorrectly continue to appear on the worklists (they will correctly display a task flag).

Configuration Instructions

System Administrators must complete the following actions to enable this feature:

RIS Client

Changes to ClinicalTask Settings

To enable this feature for desired tasks:

- Set the `Apply Exclusion To Both Worklists Flag` column to `Y`.
- To default the checkbox value to selected, set the `Exclude from Pending Dictation` column to `Y`, or set to `N` for unselected.

Login

Feature #30038 - Support custom sorting and a default selection of Systems on RIS login screen.

Summary

This enhancement to the Thick Client GUI screen updates the behavior of the Systems dropdown on the RIS Login screen.

Currently the dropdown forces entries to be sorted in ascending order.

With this optional change, a custom order for the entries in the dropdown can be defined, and a system can be specified as the default.

Configuration Instructions

Service Team assistance is required to enable this feature.

Database

Service-Only Feature #29678 - Deadlock prevention when updating worklist flags

Summary

This Database enhancement adds deadlock prevention when updating order or study level worklist flags.

Previously, a database deadlock could occur when multiple users were updating different orders or studies belonging to the same patient. When two users concurrently performed an edit that resulted in a patient or order level worklist flag to be added or removed, RIS would detect the deadlock and automatically retry the transaction, but both users would experience very long (5-20 second) wait times, and other blocking could occur.

With this change, a new `PatientTransactionLockEnabled` RIS System Config setting locks necessary rows when updating any patient data (visit, order, study, etc) that may affect worklist flags, allowing multiple users to perform their updates in turn.

If issues related to this functionality arise, this feature may be disabled by setting

`PatientTransactionLockEnabled` to `False`.



Note that if RIS Services were started with `PatientTransactionLockEnabled` = `True`, it can be updated to `False` without having to restart RIS Services. Otherwise, a restart of RIS Services is required to enable it.

Configuration Instructions

No System Administrator actions are necessary to enable this feature.

RIS Client

Changes to RIS System Configuration Settings

The following related settings were added or updated:



WARNING: Do not modify `PatientTransactionLockEnabled` unless directed by the Service Team.

Setting	Default	Purpose
<code>PatientTransactionLockEnabled</code>	Value=Boolean, Default=[True]	Deadlock prevention when updating order or study level worklist flags. When [False], lock will be bypassed. Warning: Do not modify unless directed by the Service Team. Caution: Restart of RIS services may be required. Added in v3.2021.6.7 #29678

RESOLVED ISSUES AND KNOWN LIMITATIONS

Resolved Issues

This release resolves the following issues:

Redmine #	Subject
28246	Resolved Scanning issue where initial few pages of attached PDFs are blank.
29381	Resolved Worklists performance issue when querying the rules for Mammo Letters.
29547	Resolved AUC issue where AUC review flag incorrectly remained after carrier is changed.
29702	Resolved Worklists issue where "Add to Folder" from the AUC WL displayed incorrect status and flags.
29713	Resolved AUC issue where External Interface orders without a referring address returned an error when opened in the AUC Review window.
29740	Improved Patient Portal performance when populating the list of persons for the Personnel lookup table.
29756	Resolved Worklists performance issue when saving worklist views.
29763	Resolved Patient Account Page issue where Portals did not recognize phone number updates.
29771	Improved database performance when associating insurance card scans to patient insurance.
29773	Improved Performance of account creation workflow.
29784	Resolved AUC issue where the Edit Billing screen returned an error when RFS is enabled.
29796	Improved Management Reports performance generating the "MQSA List of Exams Performed by Technologist" report.
29809	Improved Patient Portal performance when using iCodes and simple identify verification.
29818	Resolved AUC issue where saving an order after correcting validations was not saving notes.
29990	Resolved Lookup Tables issue where assigned entries appeared in the unassigned list in the InsuranceServiceTypeRule and PreApprovalPaymentRule lookups.
30010	Improved retry error handling of Thick Client GUI communication failures.
30031	Resolved CD Burn memory leak when Exporting CD.
30033	Resolved Payment control issue where combined Payments with PreApproved Payments calculated incorrectly.
30061	Resolved Worklists issue where phone number updates were not recognized by the Billing Exception WL.
30124	Resolved IVT / Precert memory leak on the IVT screen.
30163	Resolved Insurance AI error when AI switched carriers for a split order.
30171	Resolved Scanning memory leak issue from the IVT screen.
30237	Resolved Insurance Management issue where swapping primary and secondary insurances returned an error.
30240	Resolved Scheduling issue where creating a new patient appointment returns an error when an extra row in the procedure grid was deleted.
30254	Resolved Registration issue where creating a New Patient when the pervious patient had financial overrides returned an error.

New Known Limitations


















A previously-existing limitation has been identified:

- **BUG #30292- AN ORDER-LEVEL CLINICAL TASK THAT IS EXCLUDED FROM DICTATION WORKLISTS SHOULD HIDE ALL STUDIES ON THE ORDER**

VERSION DETAILS

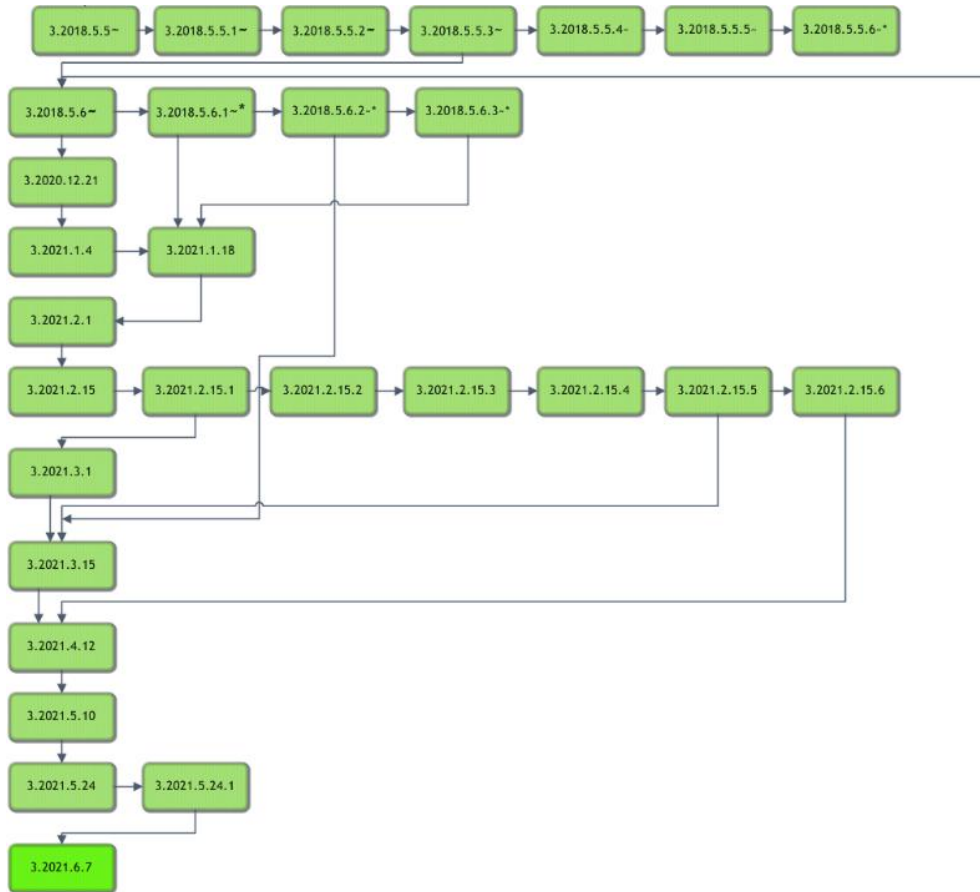
Package Contents

The release package includes the following folders:

Name	Date modified
 @Hotfixes	04-20-2012 8:51 AM
 _Documentation	07-08-2021 3:19 PM
 _ReleaseNotes	07-11-2021 10:41 PM
 Client Application	07-08-2021 3:14 PM
 DB	07-08-2021 3:15 PM
 External WebAPI	07-08-2021 3:15 PM
 Identity Service	07-08-2021 3:15 PM
 Management Reports	07-08-2021 3:16 PM
 PACS Citrix Bridge	07-08-2021 3:16 PM
 RIS Service	07-08-2021 3:16 PM
 Service Tools	07-08-2021 3:17 PM
 Web Digital Forms	07-08-2021 3:17 PM
 Web Patient Connect	07-08-2021 3:17 PM
 Web Referring Connect	07-08-2021 3:18 PM
 Web UM Connect	07-08-2021 3:18 PM
 Build_2021.6.7.zip	07-08-2021 10:14 AM
 RISServerMasterCert.pfx	03-31-2016 1:38 PM

Code Stream

The following source code branches have been merged into this release:



~* Previous years patches released in 2021
 ~ Previous years patches released in 2020
 *** = previous years patches released in 2019

LEGEND:

- Light Green = Previously Released software
- Gray = Internal version, non-release version
- Bright Green = Current Release

eRAD RIS Release Version Numbers

The following table details the version identifiers for components in this release:

Build	Patch	UI Version	Core Version	WS Version	DB Version	Digital Forms	Patient Portal	UM Portal	Provider Portal	Notes
2018.5	6	3.18.5.6(3GB)	3.18.5.6	3.18.5.6	3.18.5.6.0.02571320	3.18.5.6.0	3.18.5.6.0.1050	3.18.5.6.0.1050	3.18.5.6.0.1050	Full version release
2018.5	6.1	3.18.5.6.1(3GB)	3.18.5.6.1	3.18.5.6.1	3.18.5.6.1.02601339	3.18.5.6.1	3.18.5.6.1.1070	3.18.5.6.1.1070	3.18.5.6.1.1070	GUI, Web Services, DB, Patient/Provider/UM Portals and Digital Forms
2018.5	6.2	3.18.5.6.2(3GB)	3.18.5.6.2							GUI
2018.5	6.3	3.18.5.6.3(3GB)	3.18.5.6.3	3.18.5.6.3	3.21.5.10.002823110					GUI and Webservices
2020.12.21	-	3.20.12.21.0(3GB)	3.18.5.6	3.20.12.21.0	3.20.12.21.0.02608693	3.20.12.21.0	3.20.12.21.0.897	3.20.12.21.0.897	3.20.12.21.0.897	Full version release
2021.1.4	-	3.21.1.4.0(3GB)	3.21.1.4				3.21.1.4.0.1075	3.21.1.4.0.1075	3.21.1.4.0.1075	GUI and Patient/Provider/UM portals
2021.1.18	-	3.21.1.18.0(3GB)	3.21.1.18	3.21.1.18.0	3.21.1.18.002652234	3.21.1.18.0	3.21.1.18.0.1081	3.21.1.18.0.1081	3.21.1.18.0.1081	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.2.1	-	3.21.2.1.0(3GB)	3.21.2.1	3.21.2.1.0	3.21.2.1.002672074	3.21.2.1.0	3.21.2.1.0.1090	3.21.2.1.0.1090	3.21.2.1.0.1090	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.2.15	-	3.21.2.15.0(3GB)	3.21.2.15	3.21.2.15.0	3.21.2.15.002698266	3.21.2.15.0	3.21.2.15.0.1111	3.21.2.15.0.1111	3.21.2.15.0.1111	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.2.15	1	3.21.2.15.1(3GB)	3.21.2.15.1	3.21.2.15.1		3.21.2.15.1	3.21.2.15.1.1113	3.21.2.15.1.1113	3.21.2.15.1.1113	GUI, Web Services, Patient/Provider/UM portals and Digital Forms
2021.2.15	2	3.21.2.15.2(3GB)	3.21.2.15.2	3.21.2.15.2		3.21.2.15.2	3.21.2.15.2.1122	3.21.2.15.2.1122	3.21.2.15.2.1122	GUI, Web Services, Patient/Provider/UM portals and Digital Forms
2021.2.15	3	3.21.2.15.3(3GB)	3.21.2.15.3							GUI
2021.2.15	4	3.21.2.15.4(3GB)	3.21.2.15.4	3.21.2.15.4	3.21.2.15.402732838	3.21.2.15.4	3.21.2.15.4.1133	3.21.2.15.4.1133	3.21.2.15.4.1133	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.2.15	5	3.21.2.15.5(3GB)	3.21.2.15.5	3.21.2.15.5	3.21.2.15.502738557					GUI, Web Services and DB
2021.2.15	6	3.21.2.15.6(3GB)	3.21.2.15.6	3.21.2.15.6						GUI and Web Services
2021.3.1	-	3.21.3.1(3GB)	3.21.3.1	3.21.3.1	3.21.3.1.002712308	3.21.3.1	3.21.3.1.0.1119	3.21.3.1.0.1119	3.21.3.1.0.1119	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.3.15	-	3.21.3.15(3GB)	3.21.3.15	3.21.3.15	3.21.3.15.002747230	3.21.3.15	3.21.3.15.0.1144	3.21.3.15.0.1144	3.21.3.15.0.1144	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.4.12	-	3.21.4.12(3GB)	3.21.4.12	3.21.4.12	3.21.4.12.002778929	3.21.4.12	3.21.4.12.0.1167	3.21.4.12.0.1167	3.21.4.12.0.1167	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.5.10	-	3.21.5.10(3GB)	3.21.5.10	3.21.5.10	3.21.5.10.002823110	3.21.5.10	3.21.5.10.0.1189	3.21.5.10.0.1189	3.21.5.10.0.1189	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.5.24	-	3.21.5.24(3GB)	3.21.5.24	3.21.5.24	3.21.5.24.002842120	3.21.5.24	3.21.5.24.0.1205	3.21.5.24.0.1205	3.21.5.24.0.1205	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.5.24	1	3.21.5.24.1(3GB)	3.21.5.24.1	3.21.5.24.1	3.21.5.24.102880695	3.21.5.24.1	3.21.5.24.1.1224	3.21.5.24.1.1224	3.21.5.24.1.1224	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.6.7	1	3.21.6.7(3GB)	3.21.6.7	3.21.6.7	3.21.6.7.002898418	3.21.6.7	3.21.6.7.0.1234	3.21.6.7.0.1234	3.21.6.7.0.1234	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms