Release Notes: LogicNets AUC Solution Version 3.0

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1.0 Introduction

LogicNets is pleased to announce a wide-ranging update to the LogicNets AUC Solution, comprising new features and updated protocols from our Provider-Led Entities (PLEs).
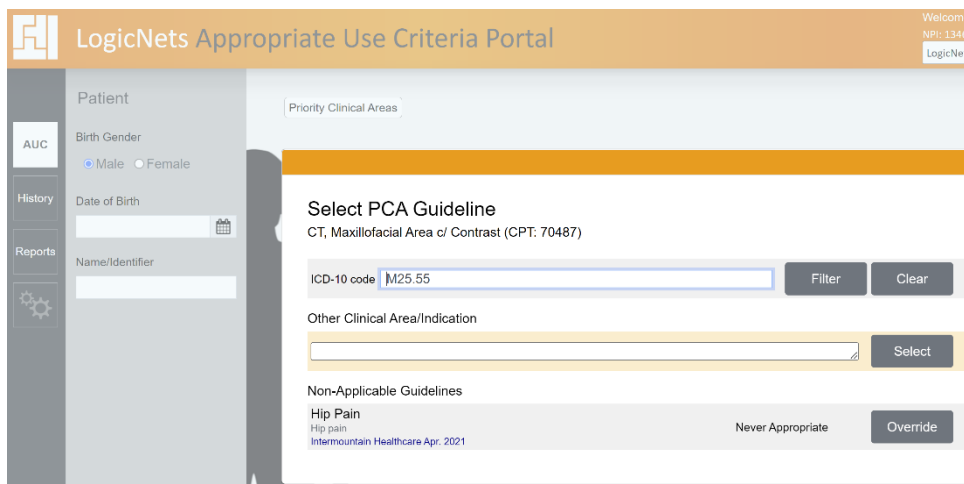
2.0 New Functionality

This section highlights the new features included in this Release.

2.1 AUC Portal

2.1.1 ICD-10 Filtering

Users can filter the list of guidelines based on ICD-10 codes. This is available in both the guideline-selection start screen and in the CPT guideline matching popup window. In many cases clinicians work with ICD-10 codes for specifying medical conditions. Since it is not always obvious how the medical conditions map to the guidelines, matching them based on ICD-10 codes makes it easier to find the correct ones. An additional advantage is that when no match between ICD-10 code and guideline is found the other clinical area/indication can be filled with confidence to generate an outcome of no-criteria-applies.

2.1.2 PLE Clinical Area Guideline Version

The system now displays the version of the protocol next to the PLE protocol name. Users will see this in three places:

- In the initial view of the Clinical Area Guidelines
- When selecting a Guideline from a list of those that contain *Possibly Appropriate* orders
- In the summary view, below the Decision Log

2.1.3 Portal System Administrators for Integrators (EHR Providers) can Invite Customers

Portal System Administrators for Integrators can now invite customers to the AUC portal, and the system will send the Administrators of the invited companies an email with information on configuring their AUC solution. The invited customers can use the Portal for their users if they create profiles for them, or their users can interact through the integrated AUC webservice if their integrators provide access this way. Their integrators can decide to pay for the validations of the invited companies, or the invited companies can pay for the validations themselves. Integrators can see the number of validations that are consumed by the invited companies in corresponding reports.

2.1.4 Proxy Select All

Portal System Administrators can make a user a proxy for all other users by selecting the "Proxy Select All" option. Previously, making a user a proxy for all other users required the portal administrator to create each individual relationship. This is now a one-click setting.
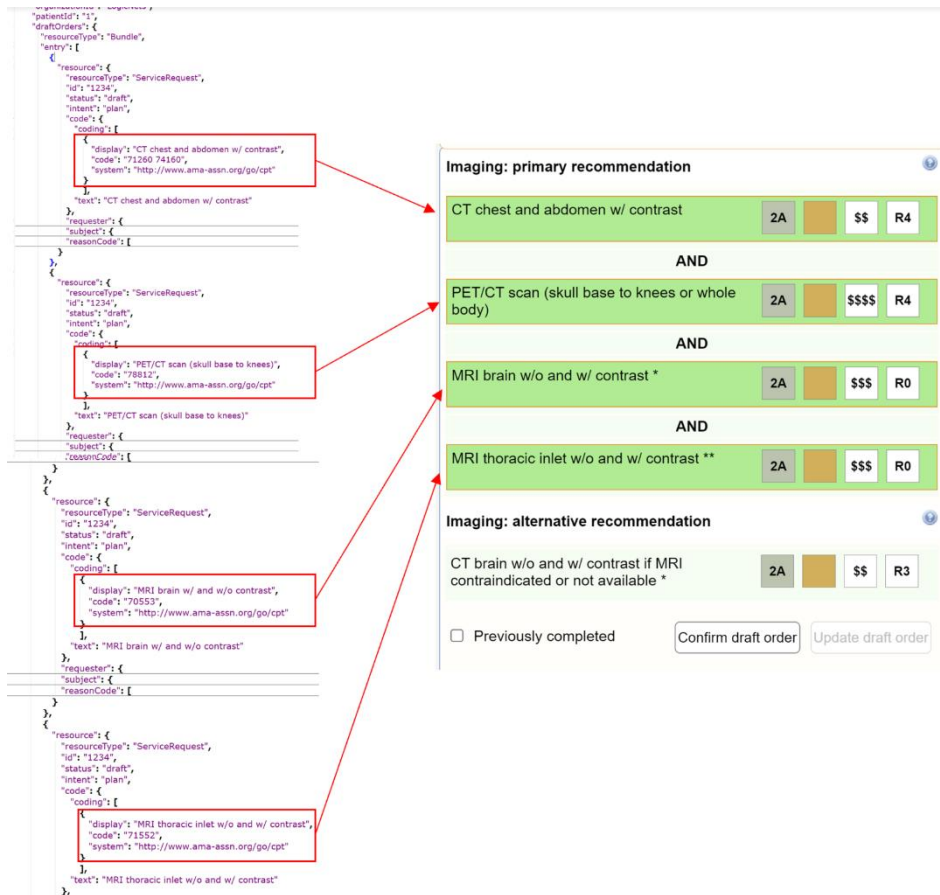
2.2 Webservice

2.2.1 Relaxed Mode

Normally, the AUC Webservice runs in what LogicNets refers to as *strict mode*. That means that the AUC Webservice requires the exact order set if the guideline recommends multiple orders. In addition, when running in strict mode the system shows the status as "incomplete order" when users only provide a subset of the adherent order set. This results in strict mode in a not-appropriate outcome (MF).

Not every client can submit order sets at once and therefore we have expanded the AUC Webservice with a relaxed mode option. Users can invoke the relaxed mode by adding the parameter "validation_mode=relaxed" to the start URL. When you invoke the AUC Webservice in relaxed mode the system will return an appropriate outcome (ME) even when you do not supply the full set of orders. From a clinical perspective it is recommended that you perform all imaging procedures, but

from a validation perspective your orders are appropriate as long as they are part of the recommended orders.

2.2.2 Hide Update Order Button

Not every ordering application can easily change the original order once it has been validated. Therefore, it is sometimes useful to hide the Update Order button. To do this, include the "disallow_update_draft_order=1".

2.2.3 Cancel/Save

When you hide the update button the user interface shows "Cancel" and "Save" buttons at the top of the screen. The "Save" button saves the user's answers to any questions in the response. When proxy users perform the validation – as part of a downstream authorization process, for example – the user can forward the validation to someone else in case the recommended order is not the same as the order that had to be validated. When the "Update" button is disabled, the user can preserve the answers for use in subsequent calls. Clicking the "Cancel" button provides an easy way to close the validation without preserving the answers.

2.2.4 Text Only Mode

If you include the parameter "textonly=1" in the launch URL, the system hides the interactive visual representation of the pathway and displays a text-only view.

2.2.5 Contract Number Not Required

It is no longer necessary for you to provide the contract number as well as the API key. Only the API key and the contract number are required from this release forward.

3.0 Updates to Clinical Area Guidelines

The following table shows those guidelines that have been updated and their corresponding version number per source (NCCN or Intermountain Healthcare).

Clinical Guideline Area	PLE Version	PLE
Acute Lymphoblastic Leukemia	v.1.2022	NCCN
Acute Myeloid Leukemia	v.1.2022	NCCN
Anal Carcinoma	v.1.2022	NCCN
Basal Cell Skin Cancer	v.1.2022	NCCN
B-Cell Lymphomas	v.1.2022	NCCN
Bladder Cancer	v.1.2022	NCCN
Breast Cancer	v.2.2022	NCCN
Cancer of the lung (primary or metastatic, suspected or diagnosed)	Jan. 2022	NCCN/sublicensed through Intermountain Healthcare
Cervical Cancer	v.1.2022	NCCN
Chronic Lymphocytic Leukemia/Small Lymphocytic Lymphoma	v.1.2022	NCCN
Colon Cancer	v.1.2022	NCCN
Epithelial Ovarian Cancer/Fallopian Tube Cancer/Primary Peritoneal Cancer	v.1.2022	NCCN
Esophageal and Esophagogastric Junction Cancers	v.1.2022	NCCN
Gastric Cancer	v.1.2022	NCCN
Gestational Trophoblastic Neoplasia	v.1.2022	NCCN
Hairy Cell Leukemia	v.1.2022	NCCN
Head and Neck Cancers	v.1.2022	NCCN
Malignant Pleural Mesothelioma	v.1.2022	NCCN
Melanoma Cutaneous	v.3.2022	NCCN
Melanoma Uveal	v.1.2022	NCCN
Multiple Myeloma	v.1.2022	NCCN
Neuroendocrine and Adrenal Tumors	v.1.2022	NCCN
Pancreatic Adenocarcinoma	v.1.2022	NCCN
Prostate Cancer	v.4.2022	NCCN
Squamous Cell Skin Cancer	v.1.2022	NCCN
Systemic Light Chain Amyloidosis	v.1.2022	NCCN
Vulvar Cancer	v.1.2022	NCCN