

Service/Application/Module/Sub module/Business Process **Reference and Counter-Reference**

Story Board Specification Document SB_ASS_001_IPS_Receptora

Use Case Version History

Version	Date	Reason for Change	Modified by
1.0	08/07/2021	Document Creation	John Jairo Garcia Montes

Approvals

Approval Date	Number	Role	Approved Version	Company

1. Use Case Diagram

- N/A

2. List of Actors

Actor	Description
IPS Receiver	Portal that allows you to view the cases scaled by New EPS

3. Use Case Identification / Story Board

Code Use Case(CU)/Story Board (SB)	SB_ASS_001
Number	SB_ASS_001_IPS_Receptora
Module	Reference and Counter-Reference
Actors	Receiving IPS User
Description	Functionality of visualization of scaled cases and management by states of the same
Preconditions	The user must be hired ips or not attached
Complexity	Low.
Priority	Loud
Post-conditions	N/A
Related use cases*	N/A
Related requirements	N/A
Related Business Rules	N/A

Risks	N/A
Special considerations	N/A
Extension Points *	N/A
Inclusion Points *	N/A

4. Use Case Documentation / Story Board

Basic sequence of events:

4.1. Receiving IPS Portal

4.1.1. How to get there.

- i. User enters the URL of the defined site
- ii. User authenticates to the system
 1. As a user of the manager I want to be able to authenticate with username and password to guarantee security in access to information and traceability of the activities carried out within the PWA

Acceptance criteria

- a. The system must allow access with username and password
- iii.
 2. As a receiving IPS user I want to visualize the scaled cases to review them and define if they are accepted, pending or rejected.

Acceptance criteria

- a. The system must allow to visualize the cases scaled by new EPS
- b. The system should only allow you to view all pending cases to be managed
- c. The system must not display on the query screen closed cases (accepted or rejected from previous days)
- iv. User manages the assigned cases
 1. As a receiving IPS user I want to manage the cases to respond to the need and comply with the established times

Acceptance criteria

- a. The system should handle the following statuses in case management for the receiving IPS **see IMG_01_IPS RECIPIENT:**
 - NO MANAGEMENT: This status is for when the receiving IPS first consults the request without a response yet
 - ACCEPTED: This is when the receiving IPS accepts the patient
 - PENDING: This status corresponds to a case that the receiving IPS leaves pending or in process temporarily before being accepted or rejected
 - REJECTED: This is when a case is rejected by the receiving IPS
- b. Rejected and pending states must have associated a cause according to the classification that is defined for each state
- c. The system must have an e-mail notification mechanism to the receiving IPS when a case has been escalated or assigned
- d. The system must allow to consult the supports of the cases scaled to the receiving IPS
- e. The system must have a mechanism for notifying New EPS of cases accepted by the receiving IPS
- f. The system must go to an "Unmanaged" state after closing the case in New EPS and not having received a response from the receiving IPS
- g. The system must have a complete visualization of the case information, example **IMG_01_IPS RECEIVER**

v. User historical consultation of managed cases

1. As an IPS Receiving user I want to consult the management of historical cases to respond to internal requirements and control entities, as well as review some case from previous dates

Acceptance criteria

- a. The system must allow to consult the cases managed for a period not exceeding **30 days**, with the summary of the data handled by the Receiving IPS

5. Use Case Annexes / Story Board

RECEIVING_IMG_01_IPS

The storyboard illustrates a web application interface for 'ROL IPS - RECEPTORA'. The interface includes a sidebar with a user profile and navigation links, a main content area with summary statistics and a table of requests, and a right-hand panel for notifications and notes.

Summary Statistics:

- No: 20
- Accepted: 5
- Open: 10
- Rejected: 30

Table: Remisiones a Clínica XXXX Sede Bogotá

Documento	Nombre Paciente	Diagnóstico	Servicio	Acciones
CC 71367981	Carmelo Duque V.	Infarto a miocárdio	Electro cardiograma	Aceptar Rechazar
CC 8289182	Mónica Villa		Resonancia Magnética	Aceptar Rechazar
CC 1728271	Pedro Perez		Hospitalización	Aceptar Rechazar
TI 252618222	Francisco Morales	Covid19	UCI Covid19	Aceptar Rechazar

Right Panel:

- Ultima notificación enviada por Nueva EPS fecha y hora, predeterminada
- Nota NUEVA EPS

Interactions:

- Buttons for 'Aceptar' (green) and 'Rechazar' (red) are present for each row in the table.
- A dropdown menu is shown for the 'Rechazar' button of the first row, listing options: 'Nada', 'Sports', 'Mental', 'Jenis', and 'Willy'.
- A yellow arrow points from the 'Rechazar' button to the 'Nota NUEVA EPS' section.

**Service/Application/Module/Sub module/Business Process Reference
and Counter-Reference**

Story Board SB_ASS_002_IPS_Radicadora

Use Case Version History

Version	Date	Reason for Change	Modified by
1.0	08/07/2021	Document Creation	John Jairo Garcia Montes

Approvals

Approval Date	Number	Role	Approved Version	Company

1. Use Case Diagram

- N/A

2. List of Actors

Actor	Description
IPS Receiver	Portal that allows you to view the cases scaled by New EPS

3. Use Case Identification / Story Board

Code Use Case(CU)/Story Board (SB)	SB_ASS_002
Number	SB_ASS_002_IPS_Radicadora
Module	Reference and Counter-Reference
Actors	IPS Filer User
Description	Functionality of visualization of scaled cases and management by states of the same
Preconditions	The user must be hired ips or not attached
Complexity	Low.
Priority	Loud
Post-conditions	N/A
Related use cases*	N/A
Related requirements	N/A
Related Business Rules	N/A
Risks	N/A
Special considerations	N/A
Extension Points *	N/A
Inclusion Points *	N/A

4. Use Case Documentation / Story Board

Basic sequence of events:

4.1. Portal IPS radicadora

4.1.1. How to get there.

- i. User enters the url of the defined site
- ii. User authenticates to the system
 1. As a user of the manager I want to be able to authenticate with username and password to guarantee security in access to information and traceability of the activities carried out within the PWA

Acceptance criteria

- a. The system must allow access with username and password
- iii.
 2. As an Ips file user I want to visualize the filed cases to review them and define if they are accepted or rejected

Acceptance criteria

- a. The system must have a portal (PWA) different from the case manager (CRM Suite for filing)
- b. The system must allow to visualize the cases filed to new EPS
- c. The system should only allow you to view all pending cases to be managed
- iv. User files request for services that require a transfer
 1. As an IPS Radicadora user I want to file a request to give continuity in patient care in another IPS for one or more requested services

Acceptance criteria

- d. The system must allow a request to be filed according to the type of service requested
- e. The system must allow to attach supports according to the defined classification
- f. The system must allow to attach supports at various times while the case is open
- g. The system should facilitate the registration of the request for IPS and affiliate information

- v. User displays the status of the cases filed

1. As an IPS file user I want to visualize the status of the cases to manage the requested service requested

Acceptance criteria

- a. The system should handle the following statuses in case management for the filing IPS **see IMG_01_IPS FILER:**
 - FILE: This status is for when the IPS requesting the procedure opens the case in the tool and a case number is generated.
 - IN PROCESS: It is when the open case is selected by the reference group to start the transfer management, in this state the case remains while it is with active management.
 - IN FOLLOW-UP: This status corresponds to a case that is accepted by an IPS and the means of transport for the transfer is coordinated, but it is waiting for that admission to the receiving IPS be confirmed.
 - CLOSED: It is when a case is finished managing and closed definitively.

- b. The system must allow to **add supports** of the cases already filed
 - c. The system must have a complete visualization of the case information, example **IMG_01_IPS Filer**
 - d. The system must have the functionality to close the case by the filing IPS when considered by the IPS at any time during the case management before being closed by Nueva EPS
- vi. User historical consultation of managed cases
2. As an IPS Radicadora user I want to consult the management of historical cases to respond to internal requirements and control entities, as well as review some cases from previous dates

Acceptance criteria

- a. The system must allow to consult the cases filed for a period not exceeding **30 days**, with the summary of the data handled by the IPS Radicadora

5. Use Case Annexes / Story Board

IMG_01_IPS Radicadora

ROL IPS REMITENTE - RADICADORA

20
Radicadas

5
En Trámite

10
En seguimiento

30
Cerrado

Actualizar adjuntos cuando se requiera

Documento	Nombre Paciente	Diagnóstico	Servicio	Estado	Actualizar adjuntos	Observación	Notas IPS receptoras
CC 71367081	Camilio Duque V	Infarto a miocárdio	Electro cardiograma	Radicado	Adjuntos		
CC 8289182	Mónica Villa		Resonancia Magnética	Radicado	Adjuntos		
CC 1728211	Pedro Penza		Hospitalización	Radicado	Adjuntos		
TI 252618222	Francisco Morales	Covid19	UCI Covid19	Radicado	Adjuntos		

File Application

View

Requests

Historical Requests

Estado cambia dependiendo el estado del caso

Notas con nombre de IPS, Fecha y Hora y estado

Ej: Clínica el lago – 09/06/2021 11:16 am – **Abierto** – **No disponibilidad de camas**

Clínica Country– 09/06/2021 2:10 pm – **Aceptado**

Service/Application/Module/Sub module/Business
Process **Reference and Counter-Reference**

Use Case Specification Document/Story Board
SB_ASS_001_Gestor_Casos

Use Case Version History

Version	Date	Reason for Change	Modified by
1.0	08/07/2021	Document Creation	John Jairo Garcia Montes

Approvals

Approval Date	Number	Role	Approved Version	Company

1. Use Case Diagram

- N/A

2. List of Actors

Actor	Description
RYF case manager user	Reference and counter-reference case management functionality for patient transfers

3. Use Case Identification / Story Board

Code Use Case(CU)/Story Board (SB)	SB_ASS_001
Number	Case Manager
Module	Reference and Counter-Reference
Actors	Case Manager User
Description	Reference and counter-reference case management functionality for patient transfers
Preconditions	The user must be a collaborator of the New EPS
Complexity	Low.
Priority	Loud
Post-conditions	N/A
Related use cases*	N/A
Related requirements	N/A
Related Business Rules	N/A
Risks	N/A
Special considerations	N/A
Extension Points *	N/A

4. Use Case Documentation / Story Board

Basic sequence of events:

4.1. Case Manager

4.1.1. How to get there.

i. User authenticates to the system

1. As a user of the manager I want to be able to authenticate with username and password to guarantee security in access to information and traceability of the activities carried out within the manager

Acceptance criteria

- a. The system must allow access with username and password to the case manager
- b. The system should only allow access to the case manager to collaborators of the company

ii. User consults filed cases

1. As a user of the manager I want to view the cases filed to consult the current status or manage any of them.

Acceptance criteria

- a. The system must associate a unique file number to each case
- b. The system should allow you to associate cases with a related parent case if necessary
- c. The system must handle trays of cases filed according to the classification given at the time of filing
- d. The system must allow each user of the main trays to be assigned cases to their own to manage them.
- e. The system must allow filtering in the trays by different options the cases filed

iii. User manages the assigned cases

1. As a user of the manager I want to manage the cases to respond to the need and comply with the established times

Acceptance criteria

- a. The system should handle the following states in case management:

N	STATUS OF THE CASE	DESCRIPTION
1	NEW	<p>In this state the case remains once it is opened in the tool, either by the IPS or by the call advisor and the case travels to the transitory tray so that the filing advisor takes the case and opens the request in the authorizing system of New EPS, after the advisor files the case in the health system, this advisor passes the case to the tray of the reference group, there the case continues as "new".</p> <p>*For cases where the case is opened by Call advisor and there are no supports, from the tool will send directly an email with the link for the loading of supports to the address that the IPS informed at the time of the opening of the case.</p>

2	PENDING SUPPORTS	The case changes to this state when the advisor opens and the case and the tool sends the link to the IPS for the loading of the supports, this status changes once the IPS uploads the supports to the application there the case will change to "in process". In this state the case can be selected by a reference official for its management.
3	IN PROCESS	It changes to this state once, the case is selected by an official of the reference group which will initiate the corresponding management. *If the case continues to be handled and is handed over to another official, it must remain in a "pending" state.
4	APPROVED	It changes to this state when the user is accepted by one of the IPS where it was presented, and it is confirmed that the user will be sent to that IPS. Subsequently, the official must select whether or not the patient requires an ambulance for the transfer: * If you select that "YES" it goes to "AMBULANCE" status and enables the transfer functionality. * If you select that "NO" goes to "tracking" status.
5	AMBULANCE	Change to this state if you select that the case requires an ambulance for the transfer and remains so until the service is requested from the provider and he confirms that Move to the patient and by reference of Nueva service is confirmed.
6	TRACKING	It changes to this state when the ambulance provider confirms that it can perform the service and the Reference group sends the authorization for the transfer to take place. *When the ambulance provider confirms the date and time of delivery of the patient, it goes to "CLOSED" status *When the ambulance provider cannot make the transfer and selects a cause of failure: And according to the selected cause the case is returned to "Ambulance" state or you go to "closed" state, According to the cause sheet of failures.
7	CANCELED	In any part of the process the case can pass this state, this corresponds to when a sending IPS reports that the reference process no longer continues.
8	CLOSED	It changes to this status when the transport provider (land or air) confirms that the patient was handed over to the referring IPS.

- b. The system must handle a log with the traceability of states reported by the IPS with the structure IPS name, Date and Time, Status and cause which must be visible to the IPS manager and portal

Example: Hospital el lago – 09/06/2021 11:16 am – Pending – No availability of beds Hospital Country– 09/06/2021 2:10 pm – Accepted

- c. The system must allow some mechanism for shift delivery allowing the continuity of case management by a different user
- d. The system must have an e-mail notification mechanism to the receiving IPS when a case has been escalated or assigned
- e. The system must allow to attach supports to the scaled cases to the receiving IPS
- f. The system must have a mechanism for reporting cases accepted by the receiving IPS

iv. User scales request to receiving IPS

1. As a user of the manager I want to escalate requests to more than one IPS to manage the acceptance of patients in the requested services

Acceptance criteria

- a. The system must allow to escalate cases to more than one contracted ips and not contracted
- b. The system must send an email notification of escalated requests to the receiving IPS
- c. The system must send information to the IPS portal of the request made

v. User scales request to transfer operator

1. As a user of the manager I want to inform request to more than one transfer operator to manage the transport of patients in the requested services

Acceptance criteria

- a. The system should allow the operator to access the transfer operators
 - b. The system must allow to register the type of transfer requested (**AIR, LAND, TICKETS AND WATER**)
 - c. The system must allow cases to be reported to more than one contracted and non-contracted IPS
 - d. The system must send an email notification of escalated requests to the receiving IPS
 - e. The system must send information to the IPS portal of the request made
 - f. The system should allow the recording of the transfer information by the assigned operator
2. As a transfer operator I want to be able to report a failed transfer with the associated cause to inform Nueva EPS of the non-transfer of the patient

Acceptance criteria

- a. The system must allow to associate a cause of failure in cases where the respective transfer is not carried out

N	CAUSES OF AMBULANCE FAILURES	BECOMES A STATE	AMBULANCE PROVIDER	CASE MANAGER
1	DUPLICATE CASE THE WRONG	CLOSED	X	X
2	DIED	CLOSED	X	X
3	FAMILY DOES NOT ACCEPT REFERRAL	AMBULANCE	X	X
4	IPS RECEIVER CANCELS SERVICE	AMBULANCE	X	X
5	IPS REQUESTER CANCELS SERVICE	CLOSED	X	X
6	COUPLING AMBULANCE EQUIPMENT	AMBULANCE	X	X
7	MEDICAL OUTPUT	CLOSED	X	X
8	CHANGE COMPLEXITY AMBULANCE	AMBULANCE	X	X
9	UNACCOMPANIED	AMBULANCE	X	X
10	NON-COMPLIANCE WITH AMBULANCE PROVIDER	AMBULANCE		X

vi. User closes managed cases

1. As a user of the manager or IPS file Rooter I want to close the cases to finish the management of the assigned cases

Acceptance criteria

- a. The system must allow cases to be closed by the filer IPS or the manager user
- b. The system must handle causes of case closure before being fully managed

CAUSE FOR CLOSING FOR ALL FORMS: INTEGRAL TRANSFERS, ROUND TRANSFERS

N	GROUND FOR CLOSURE	SENDER IPS (PWA)	CASE MANAGER
1	DUPLICATE CASE THE WRONG	X	X
2	STATUS OTHER THAN ACTIVE		X
3	DIED	X	X
4	FAMILY DOES NOT ACCEPT REFERRAL		X
5	IPS LOCATES SERVICE		X
6	HAS NOT EXCEEDED SOAT CAP	X	X
7	NOT REMITABLE		X
8	MEDICAL OUTPUT	X	X
9	VOLUNTARY DEPARTURE	X	X
10	NON-NETWORK OR NON-ADDRESSING IPS IS AUTHORIZED		X
11	SOLVED WITH TELEHEALTH	X	X

CAUSES FOR CLOSURE FOR ALL FORMS: EXIT AMBULANCE AND SCHEDULED SERVICES AMBULANCE

N	GROUND FOR CLOSURE	SENDER IPS (PWA)	CASE MANAGER
1	DUPLICATE CASE THE WRONG	X	X
2	STATUS OTHER THAN ACTIVE		X
3	DIED	X	X
4	VOLUNTARY DEPARTURE	X	X
5	MEDICAL EXIT SUSPENDED	X	X
6	IPS DOES NOT SEND DOCUMENTATION		X
7	GUARDIANSHIP DOES NOT COVER SERVICE		X
8	DOES NOT MEET MEDICAL CRITERIA		X
9	MEANS OF TRANSPORT IS CHANGED		X

- c. The system must allow the closure of the final case
- d. the system must change the status and notify the receiving and sending ips of the closure of the status

vii. User historical consultation of managed cases

1. As a user of the manager I want to consult the management of historical cases to respond to internal requirements and control entities

Acceptance criteria

- a. The system must allow once a case is closed to store in On base the summary of the management of the case, related in the Log of this.

viii. User consults information of managed cases

2. As a user of the manager I want to access the information of the cases to generate reports required by the area

Acceptance criteria

- a. The system must allow to export the information of the managed cases for the realization of the respective reports.
- b. The system must allow to export the information by dates of filing of case (start date – end date)

5. Use Case Annexes / Story Board

1. BASE REFERENCIA_XLS REPORTS

EXHIBIT 3.3.4

**Service/Application/Module/Sub module/Business Process
Authorizations**

Story Board [SB_ASS_001_Marcacion_Complementariedad](#)

Use Case Version History

Version	Date	Reason for Change	Modified by
1.0	27/10/2021	Document Creation	John Jairo Garcia Montes

Approvals

Approval Date	Number	Role	Approved Version	Company

1. Use Case Diagram

- i. N/A

2. List of Actors

Actor	Description
Autorizador Back office	Perform complementarity marking in the Back Office module

3. Use Case Identification / Story Board

Use Case Code(CU)/Story Board (SB)	SB_ASS_001
Number	Complementarity marking Back office
Module	Autorizaciones – Back Office
Actors	Authorizer Back Office - Second Instantiation
Description	Complementarity marking functionality in the Back office module
Preconditions	The user must be authenticated and with a BO access profile
Complexity	Low.
Priority	Loud
Post-conditions	The dialing must be instantiated in the BD Famisana
Related use cases*	N/A
Related requirements	N/A
Related Business Rules	N/A
Risks	N/A
Special considerations	N/A

Extension Points *	N/A
Inclusion Points *	N/A

4. Use Case Documentation / Story Board

Authorize Add-on Service Event Basic Sequence:

4.1 Enter integral health system with username and password

Precondition: User with authorization permissions in the Backoffice module

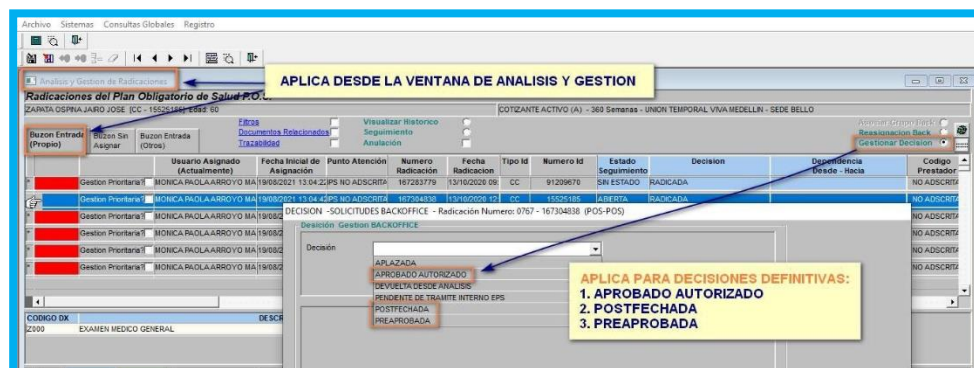
4.2 After entering, you must select with the current flow the **authorizations** option, after this you must click on the **Back-Office** option and finally select the Request **Analysis** option.

IMG_001_Ingreso_Back_Office



4.3 select with the current flow the file to be managed and then the option **MANAGE DECISION** to authorize the service

IMG_002_ Decision Management



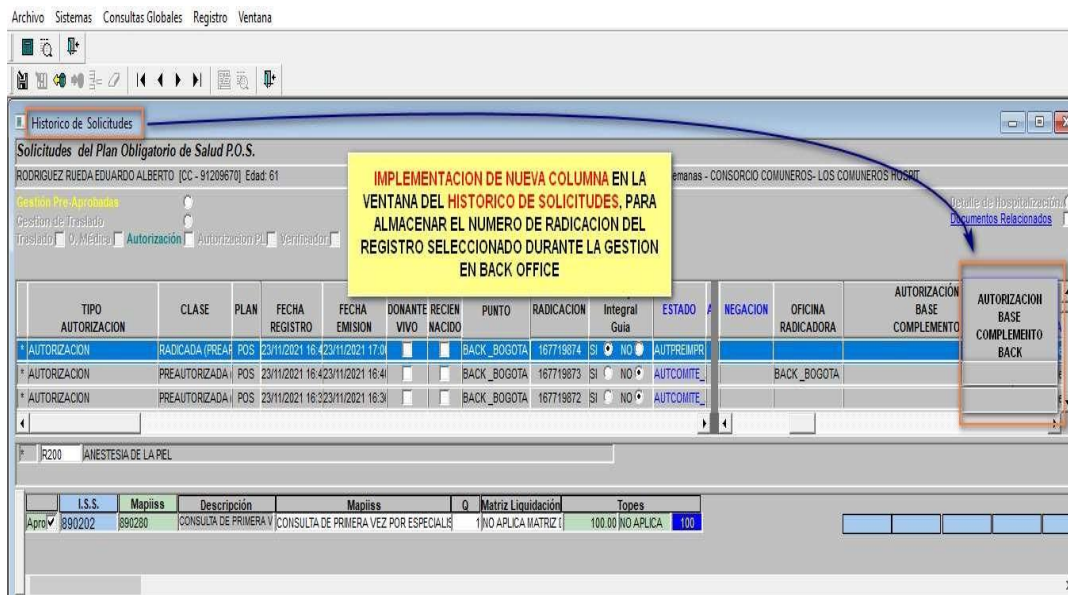
4.4 GENERATE AUTHORIZATION

4.4.1 COMPLEMENTARITY MARKING

- i. **As** a service authorizer, I **want** to be able to associate the complementary services with the service that is being authorized, **in order** to measure indicators of opportunity and monitoring of the operation as required by the control entities (Superhealth – Sentence T760). see functionality referenced IMG_005_Alerta_Funcionalidad_Complementariedad_Modulo_Emisi3n

Acceptance criteria

1. The functionality must open a Pop up from a Click on the screen where the information for the screen is being entered
2. The system must generate alert asking if the authorization being managed is to be made complementary to an existing authorization functionality referenced IMG_005_Alerta_Funcionalidad_Complementariedad_Modulo_Emisi3n
3. The system must select the authorization to be supplemented by viewing referenced functionality
4. The system must have the option to Save and Continue with service authorization
5. the system must have the option to cancel the authorization selected
6. The system must display the list of historical files according to the business rules established with the same fields of the complementarity POP_UP of the Issuance module
7. The system must maintain the styles of the POP_UP and the screens of the complementarity functionality of the Broadcast module.



- ii. **As** a service authorizer, I **want** to be able to view only the relevant authorizations of the authorization history, in order **to** associate by complementarity the previous authorizations that are relevant. view referenced functionality IMG_006_Marcaci3n_Complementariedad_Modulo_Emisi3n

Acceptance criteria

1. The system must include the seats with type of attention that are shown in the complementarity functionality of the emission module and include all the others.

TIPOS DE ATENCION NEPS	ADMINISTRATIVO
	AMBULANCIA
	APOYO DIAGNOSTICO AMBULATORIO
	APOYO TERAPEUTICO AMBULATORIO
	ATENCION ODONTOLÓGICA
	CIRUGIA AMBULATORIA
	CONSULTA MEDICA
	FARMACIA
	FOMENTO Y PREVENCION
	HOSPITALIZACION NO QUIRURGICA
	HOSPITALIZACION QUIRURGICA E INTERVENCIONES
	PAQUETE DE SERVICIOS INTEGRAL
	PAQUETE OBSTERICO
	SERVICIO HOSPITALARIO NO POS
	SUMINISTRO
	SUMINISTRO HOSPITALARIO NO POS
	TRANSPORTE AEREO NO AMBULANCIAS
	TRANSPORTE TERRESTRE NO AMBULANCIAS
	URGENCIAS

2. The system must allow the display of records to which complementarity has already been made, in this case the new record could share the base authorization back complement of the record that was previously supplemented.
3. The system must display the files with the rule already established in the complementarity functionality of the issuance module and include records in **AUTCOMITE_ACEPT** state and validate that drag the **AUTACT, AUTIMPR, ATRIMPR** states
4. The system must show for the status AUTACT-AUTIMPR-ATRIMPR: Date of authorization + days of validity and for the status AUTCOMITE_ACEPT: That the date From -Date To, is CURRENT at the time of the association as complementary.
5. For DESCSTA status: Records that have taken the AUTDESCSTA status up to one year ago from the date of EMISION, the time of the association as a complementary back, will be validated.
6. It must be ensured that the use of the "add-in base authorization" column is not affected
7. The system should not restrict the ability to UNREGISTER A RECORD THAT WAS SELECTED AS THE Base Back Add-on
8. The system should only show post-date authorizations with an effective date of less than the end of the system date
- 8.1 When generating POSTDATES with Complementary Back Association, all deliveries must be associated with the same selected filing number.

Note: It would not apply post-dates not claimed by the affiliate, expired or authorizations that have already ended their time of use or validity.
- iii. **I** as an authorizer of services **wish** to be able to make a marking in the POPUP of complementarity when the related complementary service is not found, in **order to** identify health services that do not have authorization in the application since the service that motivates the transfer belongs to a PGP Inter cities (example CUCUTA – FOSCAL),

Acceptance criteria

1. You must select the option "Without supplements", accept and display the window of annexes of the authorization as defined in the process.
2. At the database level, it must be possible to identify in an additional field where the mark is stored for the records that are not identified complementary, to be able to visualize it in reports at the database level (indicate the technical name of the created field)

Archivo Sistemas Consultas Globales Registro Ventana

Analisis y Gestion de Radicaciones

Radicaciones del Plan Obligatorio de Salud P.O.S. -----> REASIGNADA DESDE TUTELAS - TUTELAS CRONICAS

TORRES AJILA CARLOS DANIEL [RC - 1104952312] Edad: 7 BENEFICIARIO ACTIVO (A) - 26 Semanas - UNION TEMPORAL VIVA BOGOTA - SEDE TOBERN

Buzon Entrada (Propio) Buzon Sin Asignar Buzon Entrada (Otros) Filtros Documentos Relacionados Tracabilidad Visualizar Historico Seguimiento Asignación

Usuario Asignado (Actualmente)	Fecha Inicial de Asignación	Punto Atención	Numero Radicación	Fecha Radicación	Tipo Id	Numero Id	Estado Seguimiento	Decision	Dependencia Desde - Hacia	Codigo Prestador
Gestor Prioritario LIBIA ROSA DELGADO HOYO	14/10/2020 16:02:54	PUNTO DE ATENC	167369222	14/10/2020 09	RC	1104952312	ABERTA	APROBADO AUTORIZADO		860095982
Gestor Prioritario LIBIA ROSA DELGADO HOYO	19/08/2021 13:04:4	PUNTO DE ATENC	167428826	14/10/2020 16	CC	38232766	SIN ESTADO	RADICADA		860095986

Emission de Autorizaciones EN LINEA BACK-OFFICE

Autorizaciones Emitidas del Plan Obligatorio de Salud P.O.S. Radicación: 0746-167369222

TORRES AJILA CARLOS DANIEL [RC - 1104952312] Edad: 7 0 - 26 Semanas - UNION TEMPORAL VIVA BOGOTA - SEDE TOBERN

Por Prestador Remitido: [No Procesados] [V.Previa ?]

Pagos Afiliado LIQUIDADAS Entida a AFILIADO Pago a Pre Cubrimiento

Origen ENFERMEDAD GENERAL POS Tipo de Atm

MacroServicio POS Tipo de Atm

Ordenada por UROVITAL 2 Clase

Prestador Remite FUNDACION CARDIO INFANTIL INSTITUTO DE CARDIOLOGIA

Prestador Remido No Asignado FUNDACION HOSPITAL UNIVERSIDAD DEL NO

Diagnosticos: DECIMA EDICION

D849 INMUNODEFICIENCIA, NO ESPECIFICADA

Procedimientos: ISS-2001 [EDI_02]

	I.S.S.	Mapas	Descripción	Mapas	Q	Matriz Liquidación	Tipo
1	April	288100	288101	ADENODECTOMIA 900	ADENODECTOMIA VIA ABERTA	1	SERVICIOS CLINIC
2	April	282100	282101	AMIGDALECTOMIA 900	AMIGDALECTOMIA VIA ABERTA	1	SERVICIOS CLINIC

Observaciones al Prestador Remitido Observaciones Internas de la E.P.S. Justificación a BackOffice / Comité QX / PreApro

Anexos de Autorización *RECORROS*

Visualiza Datos Afiliado (Anexos)

Tipo	Aplica	Radicación No	Unidad	Valor	Obs
TUTELA	<input checked="" type="checkbox"/>	240893			
REEMBOLSO	<input type="checkbox"/>				
ENFERMEDAD PROFESIONAL	<input type="checkbox"/>				
MEDICAMENTOS NO POS C.T.C.	<input type="checkbox"/>				
ACCIDENTE DE TRABAJO	<input type="checkbox"/>				
MEDIDA PROVISIONAL	<input type="checkbox"/>				
CERTIFICACION PS PRIMARIA	<input checked="" type="checkbox"/>				
POSTVENTA	<input type="checkbox"/>				

Concedido datos

DESPUES DE SELECCIONAR LA DECISION Y DAR CLIC EN V. PREVIA, SE DEBE MOSTRAR LA VENTANA DE RADICACIONES BASE DE COMPLEMENTARIAS

ANTES DE LA VENTANA DE ANEXOS DE AUTORIZACION

AUTORIZACIONES BASE DE COMPLEMENTARIAS



Desea Realizar la marcación Complementaria

Sí **No**

Autorizacion Base Complementarias BACK

FECHA	PUNTO	Radicación AUTORIZACION	RECEPCION	EXISTENCIA	Tipo	CLASE
04/07/2019 07:04:00	133836620	108256450	<input checked="" type="checkbox"/>	CC	1001675738	INTERNET NORMAL
04/07/2019 07:00:00	133831205	108256230	<input checked="" type="checkbox"/>	CC	1001675738	INTERNET
03/07/2019 09:40:00	133832942	108256239	<input checked="" type="checkbox"/>	CC	1001675738	INTERNET
03/07/2019 14:10:00	133830826	108206700	<input checked="" type="checkbox"/>	CC	1001675738	INTERNET

VENTANA POPUP A IMPLEMENTAR

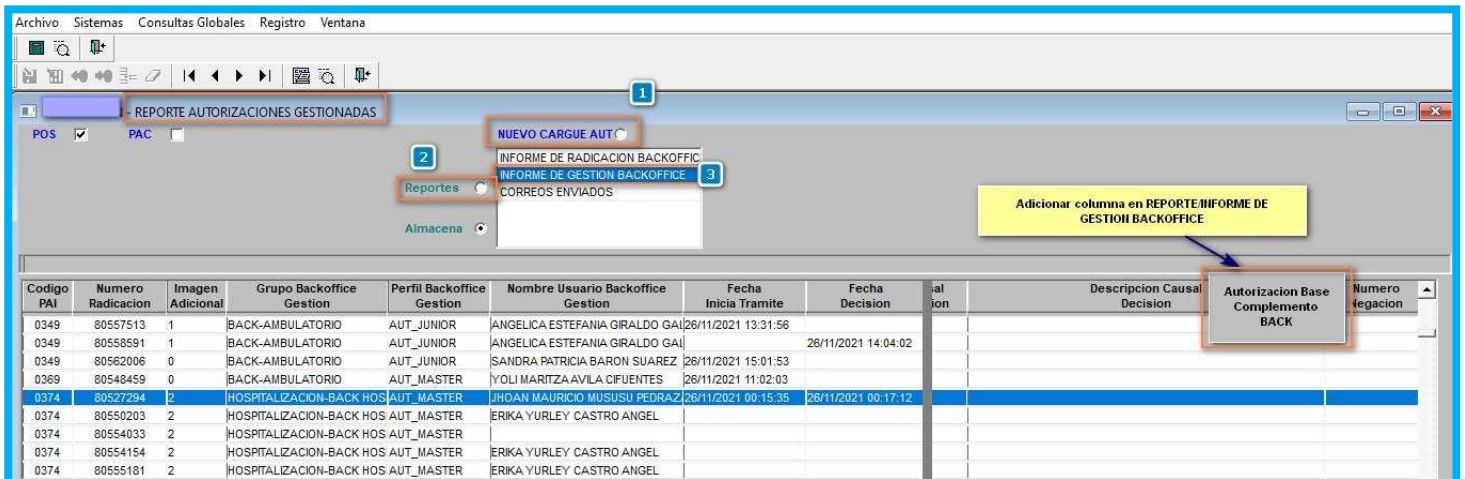
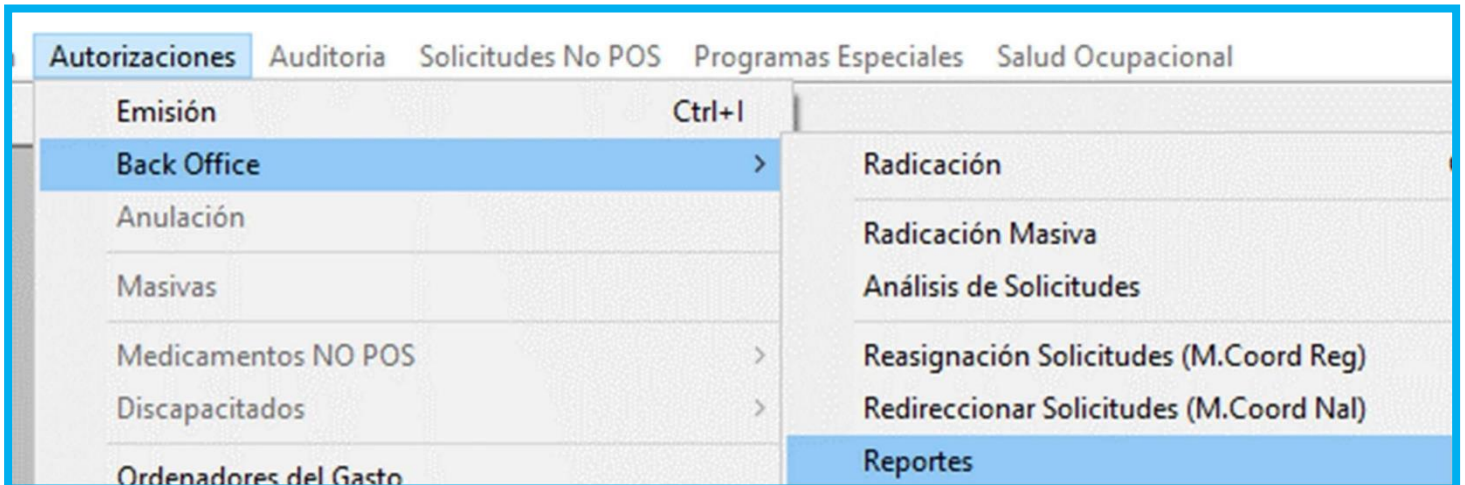
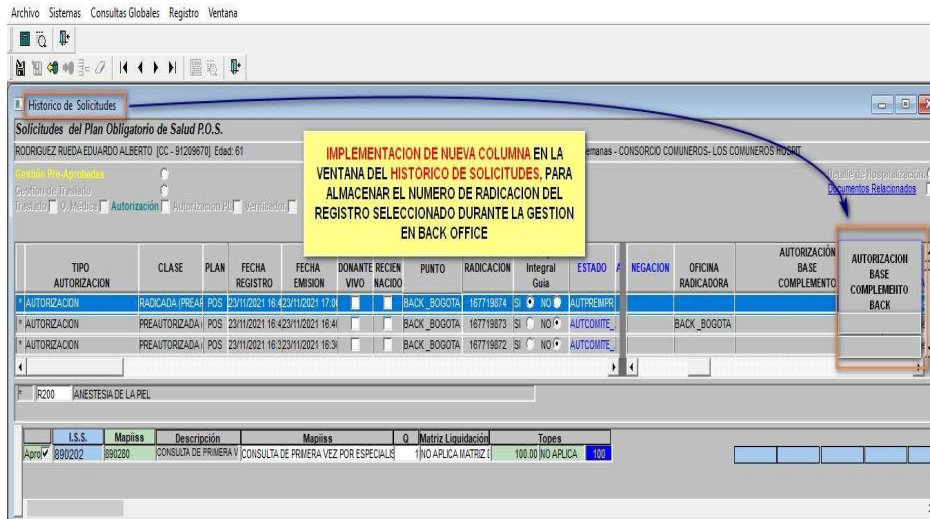
Complementarias ADICIONALES ☐ Complementarias Seleccionadas Sin Complementarias

Guardar y Continuar Cancela

- iv. **As an authorization leader, I want to be able to access authorization history information to generate information on authorized services and their complementary services.**

Acceptance criteria

1. The system must allow to generate a report by database where the authorized services are registered with the complementary services that were associated
2. The system must allow you to view the add-in base authorization in the BACK OFFICE MANAGEMENT REPORT



4.4.2 Continue with the current flow of authorization information, select attachment type, **Save and Continue**

IMG_003_TIPO_ANEXO

Visualiza Datos Afiliado (Anexos)

Tipo	Aplica	Radicación	Tipo	Unidad	Valor	Observaciones
TUTELA	<input checked="" type="checkbox"/>	262138				
RECOBRO	<input checked="" type="checkbox"/>					
ENFERMEDAD PROFESIONAL	<input type="checkbox"/>					
INTEGRALIDAD ACUERDO 029	<input type="checkbox"/>					
MEDICAMENTOS NO POS C.T.C.	<input type="checkbox"/>					
ACCIDENTE DE TRABAJO	<input type="checkbox"/>					
REDIDA PERSONAL	<input type="checkbox"/>					
POSTVENTA	<input checked="" type="checkbox"/>	105103196				
RECOBRO EMPRESARIAL	<input checked="" type="checkbox"/>					

Guardar y Continuar Cancelar

4.5 Generate with the current flow the **AUTHORIZATION**

IMG_004_Autorización

AUTORIZACIÓN DE SERVICIOS

Paciente: 0012301800 PALACIO S TUNJA FLORENCIO NICOMEDES
 Edad: 18 Fecha Nacimiento: 28/09/1990
 Dirección Afiliado: BARRO VILLA UOLA Departamento: NAZARET
 Teléfono Afiliado: (0) 7273812 Correo electrónico: NOTINE@HOTMAIL

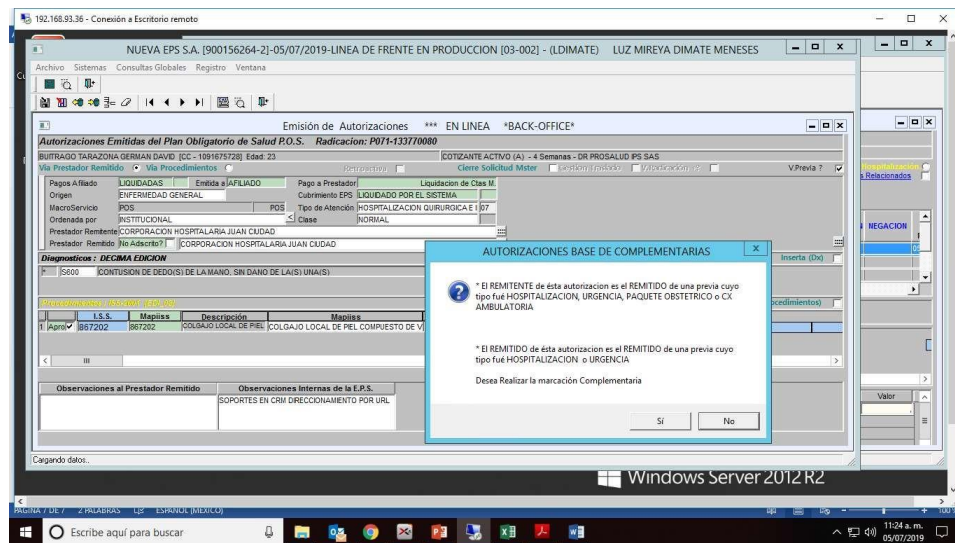
Servicio: 0012301800 PALACIO S TUNJA FLORENCIO NICOMEDES
 No: 0012301800-0 Correo: 0012301800
 Dirección: CALLE 28 NORTE # 28-17 BARRIO SAN VICENTE Departamento: VALLE DEL CAUCA
 Teléfono: (0) 4450118 Correo electrónico: NOTINE@HOTMAIL

Observaciones: 0012301800 PALACIO S TUNJA FLORENCIO NICOMEDES
 No: 0012301800-0 Correo: 0012301800
 Dirección: CALLE 28 NORTE # 28-17 BARRIO SAN VICENTE Departamento: VALLE DEL CAUCA
 Teléfono: (0) 4450118 Correo electrónico: NOTINE@HOTMAIL

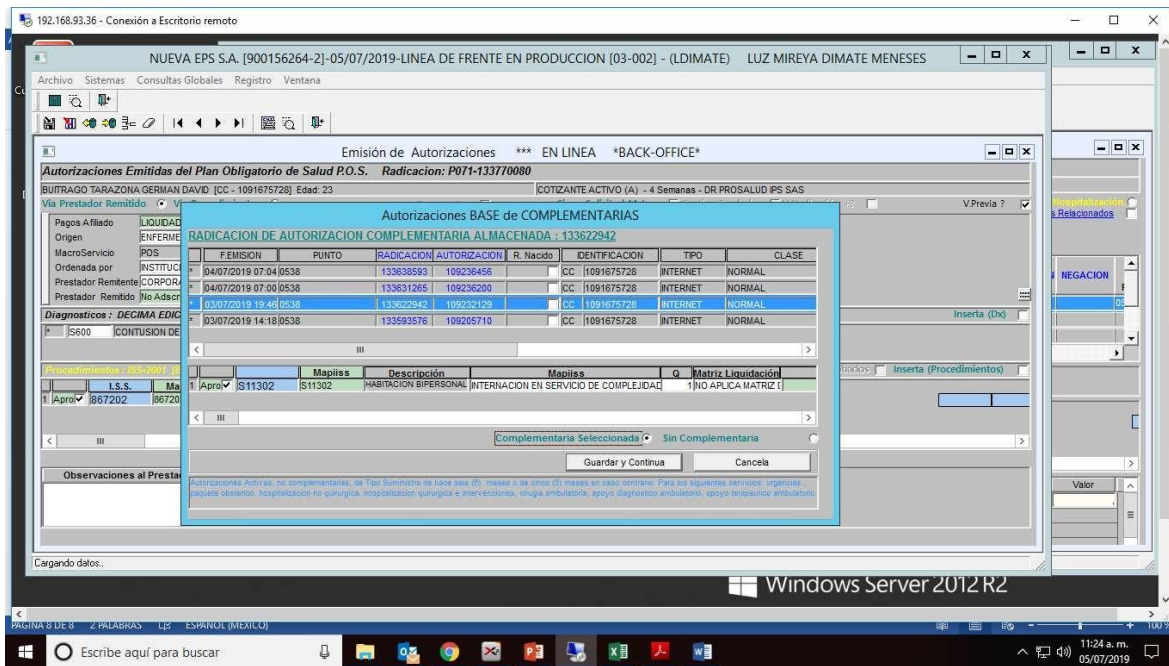
SERVICIO	UNIDAD	VALOR
0012301800	0	0.0000000000
0012301800	1	0.0000000000
0012301800	2	0.0000000000
0012301800	3	0.0000000000

Annexes

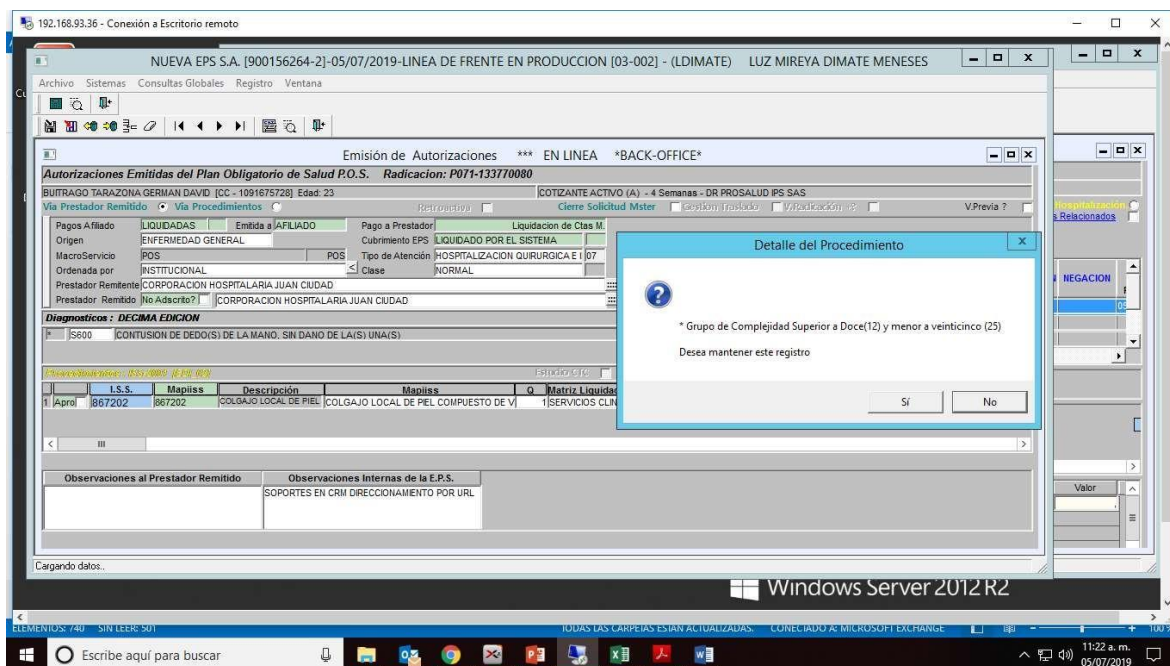
IMG_005_Alerta_Funcionalidad_Complementariedad_Modulo_Emisión



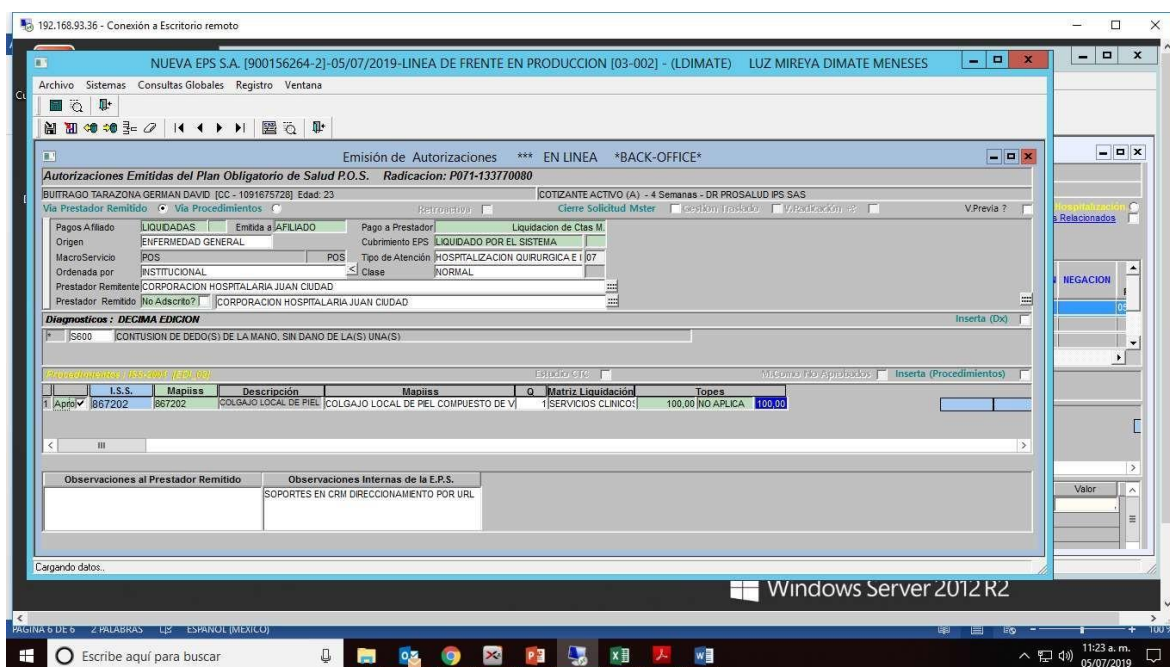
IMG_006_Marcación_Complementariedad_Modulo_Emisión



By the issuance module you enter the case filed or to carry out the filing to manage the authorization

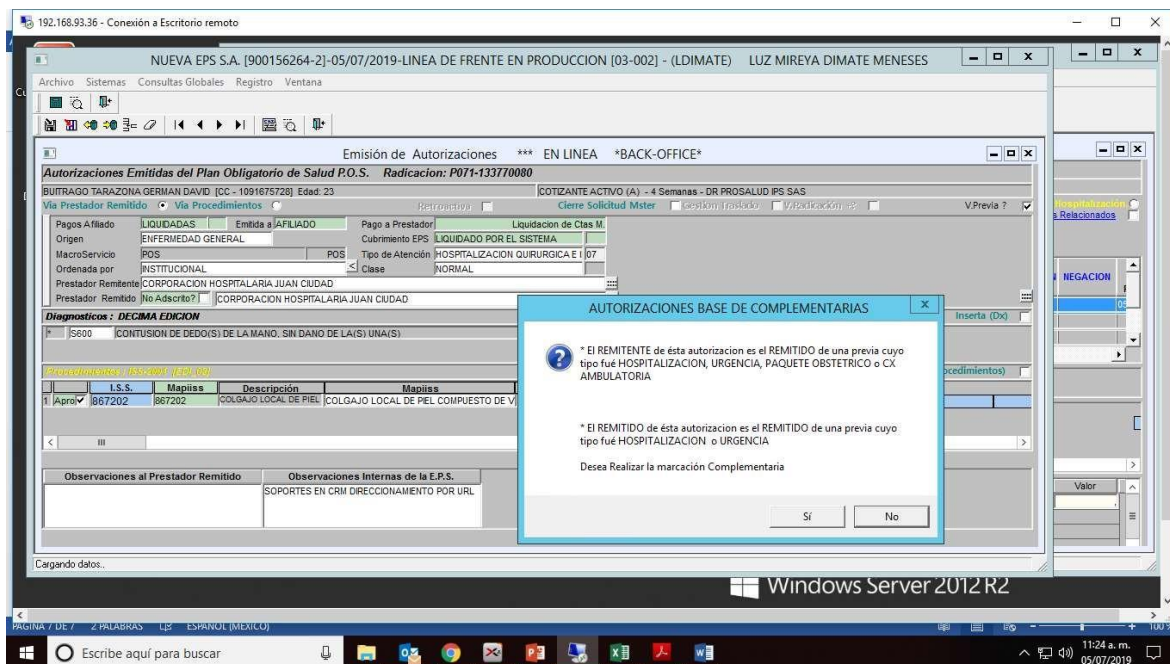


Click on the option "via provider referred" – Top left

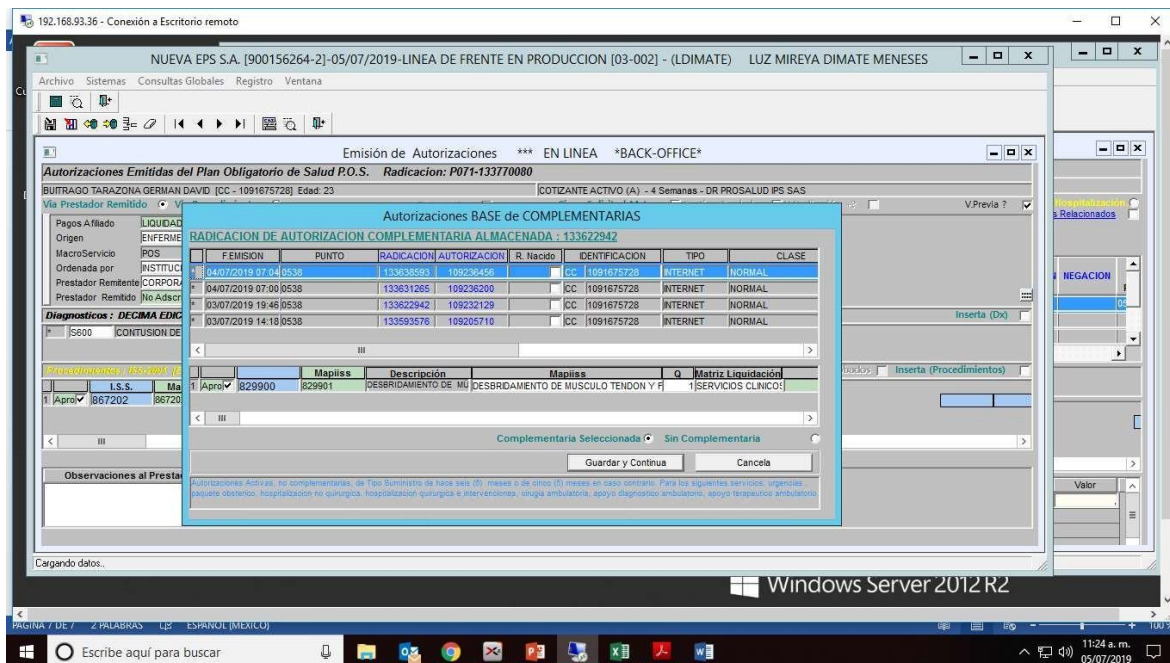


When selecting the option of "V.Previous?" – Top right

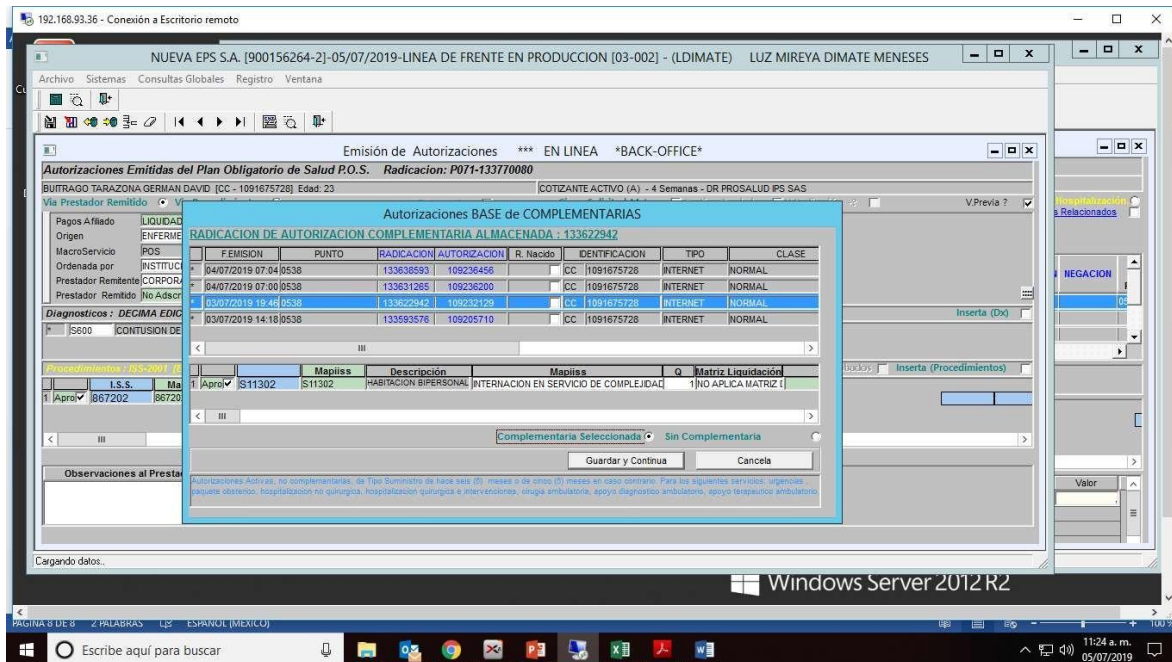
Generates alert asking if the authorization that is being managed is to be made complementary to an existing authorization – select YES



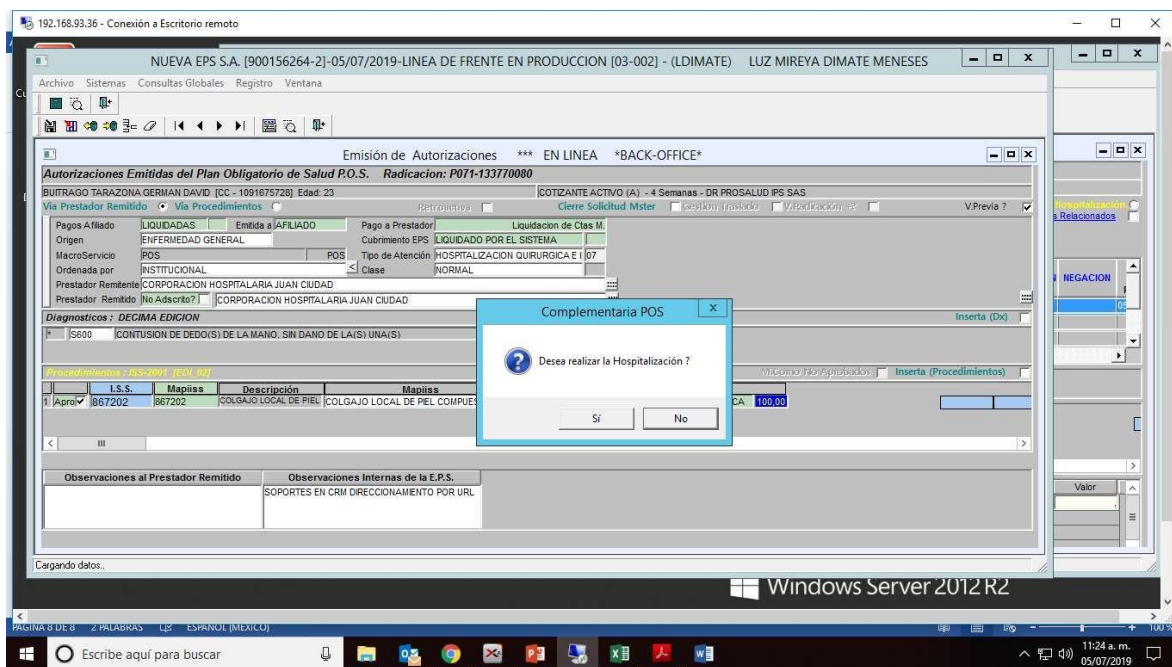
When selecting YES in the previous window, a new pop-up is displayed where the existing authorization must be selected to which the one being managed will be made complementary

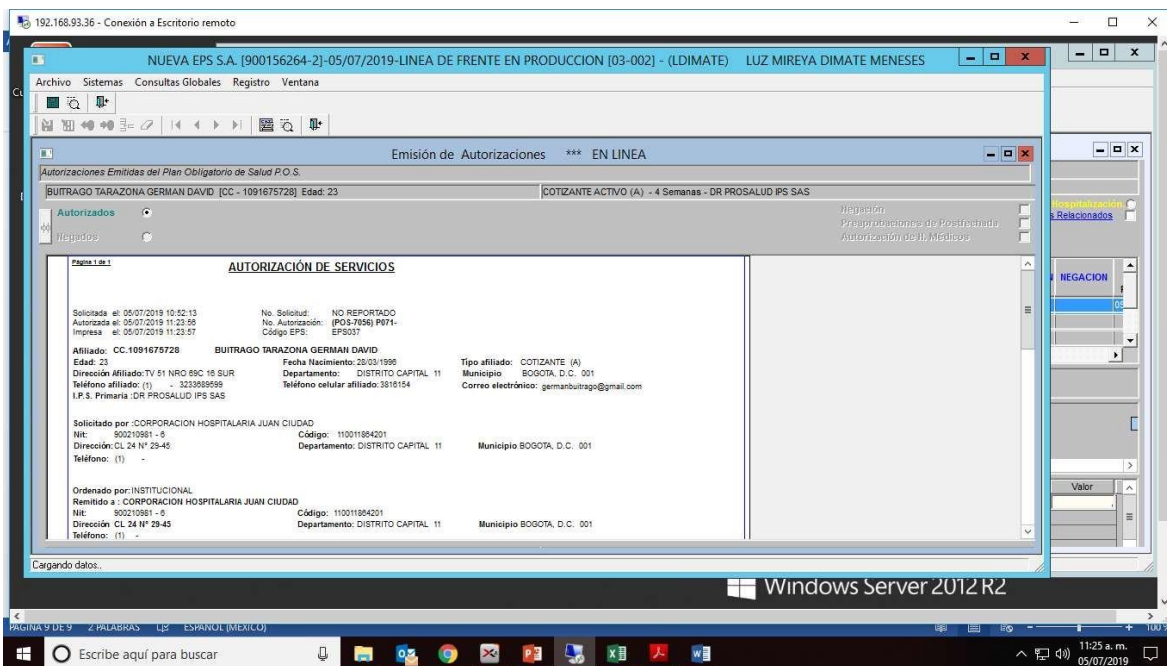
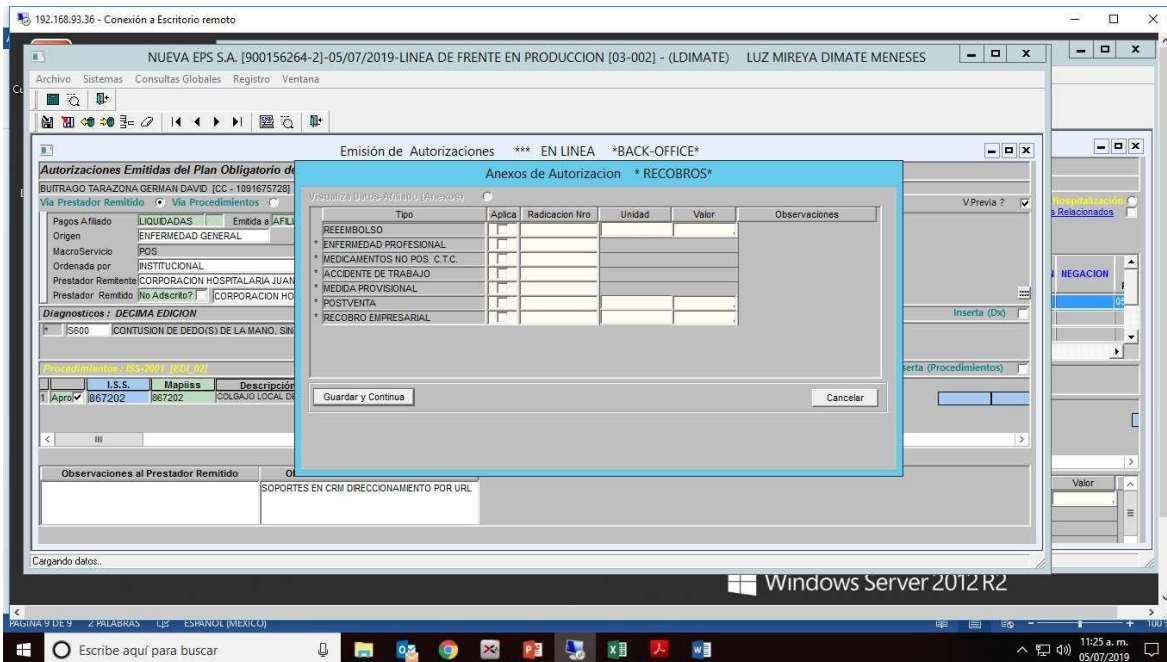


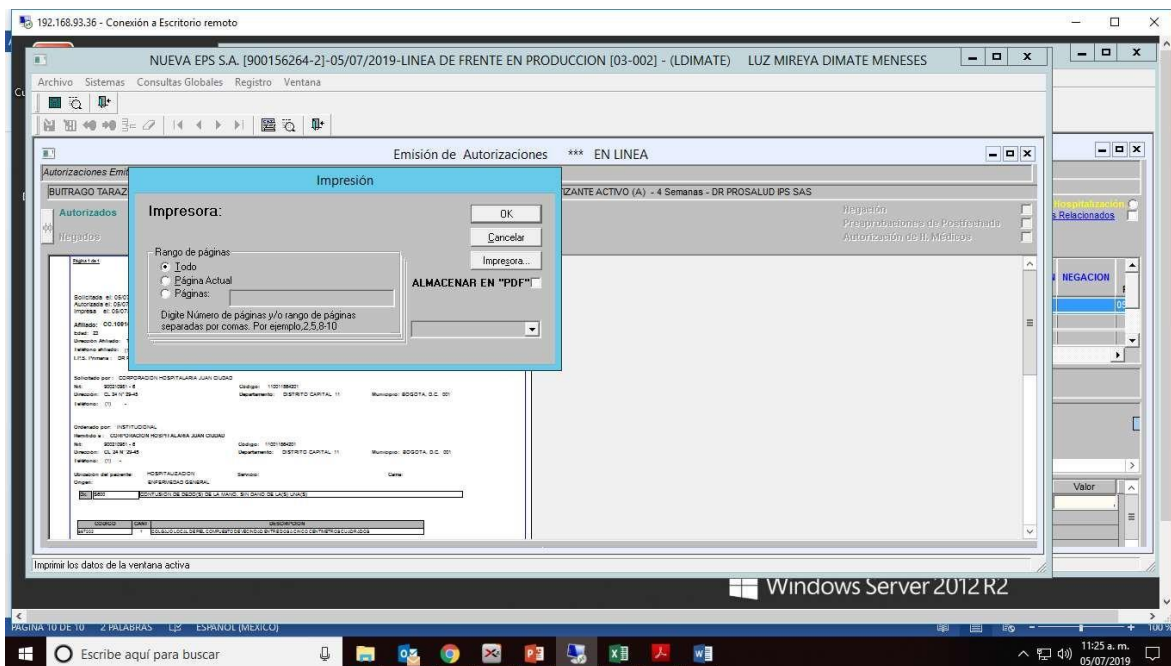
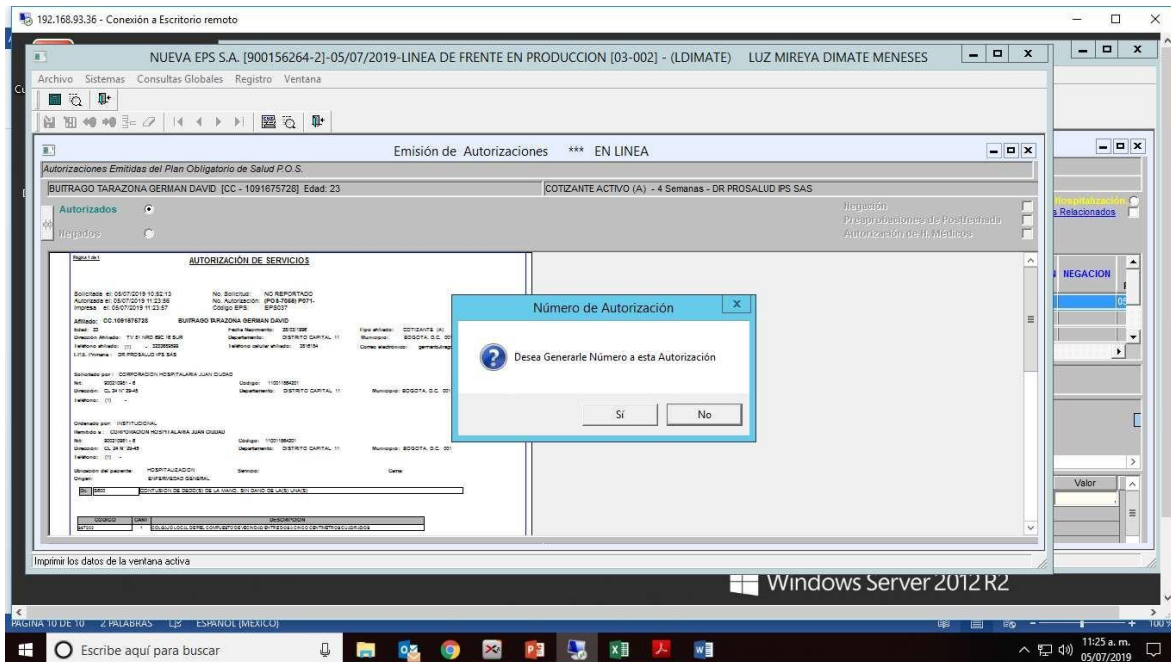
Click on the selected authorization and click on "selected companion"

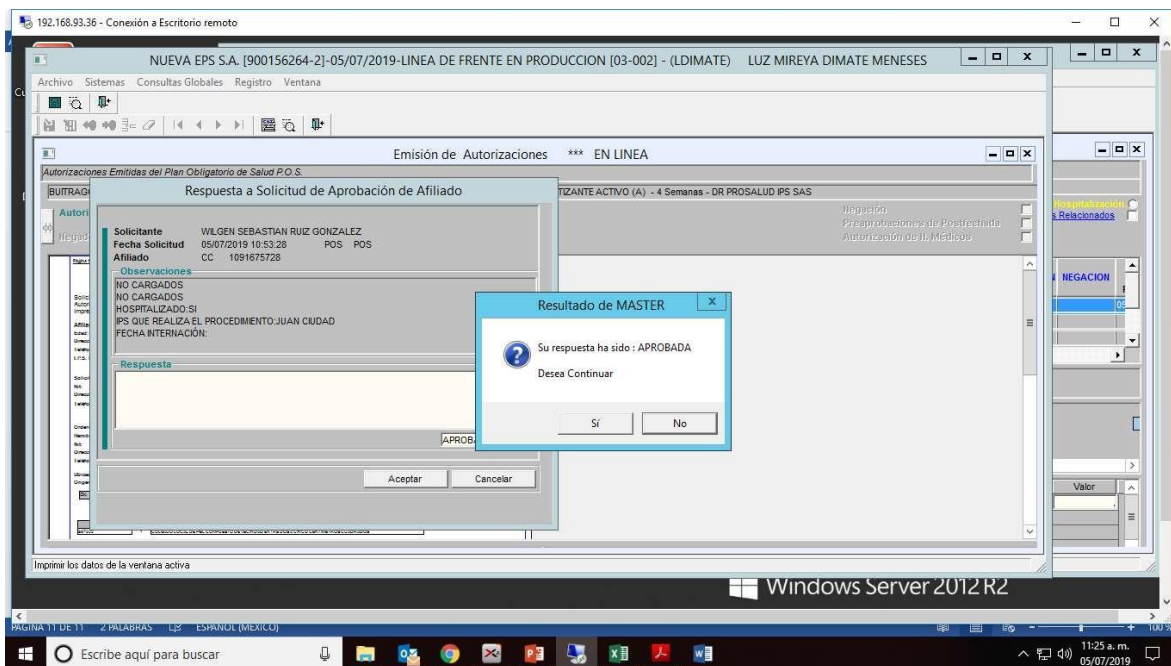
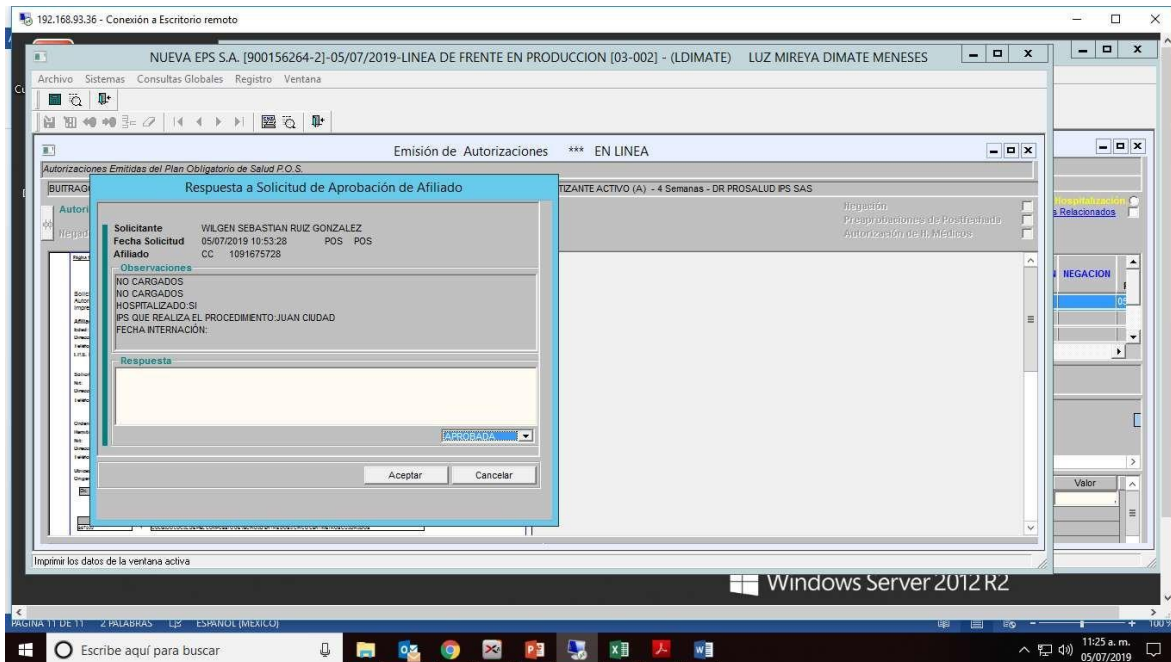


Management continues.









192.168.93.36 - Conexión a Escritorio remoto

NUEVA EPS S.A. [900156264-2]-05/07/2019-LINEA DE FRENTE EN PRODUCCION [03-002] - (LDIMATE) LUZ MIREYA DIMATE MENESES

Archivo Sistemas Consultas Globales Registro Ventana

Emisión de Autorizaciones *** EN LINEA

Autorizaciones Emisidas del Plan Obligatorio de Salud P.O.S.

BUITRAGO TARAZONA GERMAN DAVID [CC - 1091675728] Edad: 23 COTIZANTE ACTIVO (A) - 4 Semanas - DR PROSALUD IPS SAS

Autorizados Negados

Historial de Negaciones de Autorización de Ingresos Negación de Autorización de Ingresos

AUTORIZACIÓN DE SERVICIOS

Solicitada el: 05/07/2019 10:52:13 No. Solicitud: NO REPORTADO
 Autorizada el: 05/07/2019 11:23:50 No. Autorización: (POS - 7340) PD71 - 108348600
 Impresa el: 05/07/2019 11:33:57 Código EPS: EPS037

Afiliado: CC: 1091675728 BUITRAGO TARAZONA GERMAN DAVID
 Edad: 23 Fecha Nacimiento: 28/03/1998 Tipo afiliado: COTIZANTE (A)
 Dirección Afiliado: TV 51 NRO 89C 16 SUR Departamento: DISTRITO CAPITAL 11 Municipio: BOGOTÁ, D.C. 001
 Teléfono afiliado: (1) - 3233695959 Teléfono celular afiliado: 3810154 Correo electrónico: germanbuitrago@gmail.com
 I.P.S. Primaria: DR PROSALUD IPS SAS

Solicitado por: CORPORACION HOSPITALARIA JUAN CIUDAD
 NIT: 800210981 - 8 Código: 110011864201
 Dirección: CL 24 N° 29-45 Departamento: DISTRITO CAPITAL 11 Municipio: BOGOTÁ, D.C. 001
 Teléfono: (1) -

Ordenado por: INSTITUCIONAL
 Remitido a: CORPORACION HOSPITALARIA JUAN CIUDAD
 NIT: 800210981 - 8 Código: 110011864201
 Dirección: CL 24 N° 29-45 Departamento: DISTRITO CAPITAL 11 Municipio: BOGOTÁ, D.C. 001
 Teléfono: (1) -

Imprimir los datos de la ventana activa

Windows Server 2012 R2

PAGINA 12 DE 12 2 PALABRAS LIS ESPAÑOL (MEXICO)

Escribe aquí para buscar

11:25 a.m. 05/07/2019

It is validated in the authorization history, that the authorization that is being managed remains with the mark of the authorization to which complement was made in the field "complement base authorization" that was selected in previous steps.

192.168.93.36 - Conexión a Escritorio remoto

NUEVA EPS S.A. [900156264-2]-05/07/2019-LINEA DE FRENTE EN PRODUCCION [03-002] - (LDIMATE) LUZ MIREYA DIMATE MENESES

Archivo Sistemas Consultas Globales Registro Ventana

Historico de Solicitudes *** EN LINEA

Solicitudes del Plan Obligatorio de Salud P.O.S.

BUITRAGO TARAZONA GERMAN DAVID [CC - 1091675728] Edad: 23 COTIZANTE ACTIVO (A) - 4 Semanas - DR PROSALUD IPS SAS

Gestión Clínica: Trazabilidad
 Gestión de Tratamiento: Negación, Anulación, Renovación

CLASE	PLAN	FECHA REGISTRO	FECHA EMISION	DONANTE VIVO	RECIBIENDO	PUNTO	RADICACION	Manejo Integral Guía	ESTADO	AUTORIZACION	NEGACION	OFICINA RADICADORA	AUTORIZACION BASE COMPLEMENTO	PAGO AL PRESTADOR
3RMAL	POS	05/07/2019 11:11	05/07/2019 11:11			CALL-CENTER	133770080	SI	NO	AUTACT	109348600	0538	133622942	Pago por Cuentas Méd. L
DRMAL	POS	04/07/2019 7:04	04/07/2019 7:04			0538	133638593	SI	NO	AUTACT	109236456			Pago por Cuentas Méd. L
DRMAL	POS	04/07/2019 7:00	04/07/2019 7:00			0538	133631265	SI	NO	AUTACT	109236200			Pago por Cuentas Méd. L

P: S600 / CONTUSION DE DEDO(S) DE LA MANO: SIN DAÑO DE LA(S) UNA(S)

L.S.S.	Mapas	Descripción	Mapas	G	Matriz Liquidación	Topes
Apróv	867202	867202	COLGAJO LOCAL DE PIEL	COLGAJO LOCAL DE PIEL COMPUETO DE V	1(SERVICIOS CLINICOS)	100.00 NO APLICA 100

Observaciones al Prestador Remitido Observaciones Internas de la E.P.S.

SOPORTES EN CRM DIRECCIONAMIENTO POR URL

Tipo Aplica Radicación Nro Unidad Valor Qt

* REEMBOLSO
 * ENFERMEDAD PROFESIONAL
 * MEDICAMENTOS NO POS C.T.C.

Cargando datos...

Windows Server 2012 R2

PAGINA 12 DE 12 2 PALABRAS LIS ESPAÑOL (MEXICO)

Escribe aquí para buscar

11:26 a.m. 05/07/2019