# **Business Requirements Document**

### **Document Information**

Project: Availity Essentials Feature Updates

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Version: 1.0

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# **Executive Summary**

This document outlines the business requirements for recent feature updates to the Availity Essentials platform, focusing on improvements to Remittance Viewing, Claims Status, and Portal Consolidation.

#### **Business Context**

Sentara Health Plans is implementing several key updates to streamline provider services and enhance user experience on the Availity Essentials platform.

#### **Stakeholders**

- Healthcare Providers
- Billing Departments
- Sentara Health Plans IT Team
- Availity Platform Administrators

# **Key Feature Updates**

1. Remittance Viewing

**Business Requirement** 

- Enable providers to view remittances for services starting January 1
- Ensure comprehensive and accessible financial documentation

Specific Requirements

- Accessible through Availity Essentials
- Historical view from January 1 onward

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- Clear, downloadable format
- Secure access based on provider credentials

### 2. Claims Status Inquiry

### **Business Requirement**

- Allow providers to track the status of submitted claims
- Improve transparency and reduce support dependency

## Specific Requirements

- Search capability for claims within a 1-year submission window
- Detailed status indicators (e.g., received, in-process, denied, paid)
- Intuitive user interface
- Fallback support via Provider Services: 1-800-229-8822

#### 3. Portal Consolidation

### **Business Requirement**

- Decommission the Virginia Premier Portal by December 31, 2024
- Consolidate all essential functions into Availity Essentials

# Specific Requirements

- Seamless transition of key features
- Claim reconsideration support via Optum registration
- Minimal disruption to provider workflows

### **Business Objectives**

- Improve provider service efficiency
- Consolidate multiple portals into one platform
- Enhance digital self-service capabilities
- Reduce manual processing time and support overhead

#### **Success Criteria**

- 90% provider adoption of new features within six months

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- Measurable reduction in support call volume
- Positive provider satisfaction survey results
- Successful migration of all critical functionalities

### **Constraints and Limitations**

- Limited visibility for claims submitted more than one year ago
- Full access contingent on provider registration
- Varying levels of digital literacy among providers

#### **Risk Assessment**

- Potential user confusion during the transition phase
- Technical complexity of merging platform functionalities
- Resistance to adopting new processes from long-time users

# **Next Steps**

- Finalize detailed technical specifications
- Conduct user acceptance testing (UAT)
- Develop provider training and communication plan
- Implement phased rollout strategy

### **Approvals**

| Business Sponsor: |   |
|-------------------|---|
| T Director:       | _ |
| Date:             |   |

# **Revision History**

Version 1.0 - Initial Draft