

Alberta Netcare Portal – 2025N.1.0 Release And eReferral Release 2025R.1.0

This document outlines Alberta Netcare Portal changes available on
July 17, 2025

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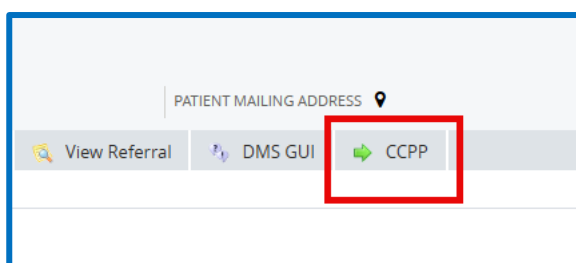
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What's Changed

ANP -> CCPP launch.

Description: To prevent ANP to CCPP launch from unauthorized facilities.

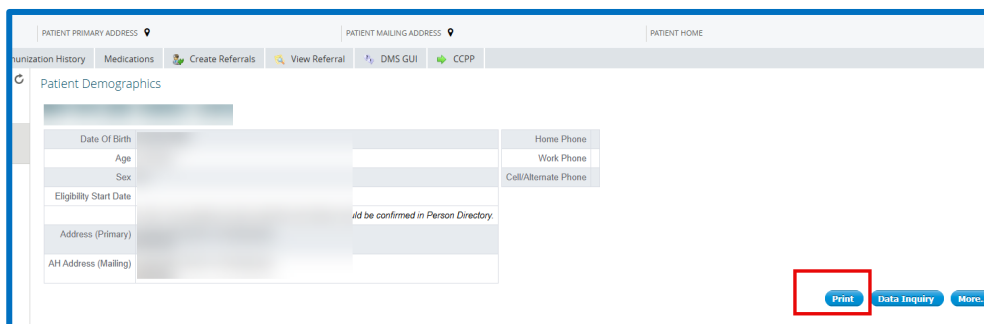
Details: The Connect Care access point has been enhanced to restrict access to Connect Care Provider Portal (CCPP) for users who are logged into the ANP from a facility where they have not been granted access to the portal.



Patient demographics printing.

Description: The Patient Demographics print windows has been enhanced to improve user experience.

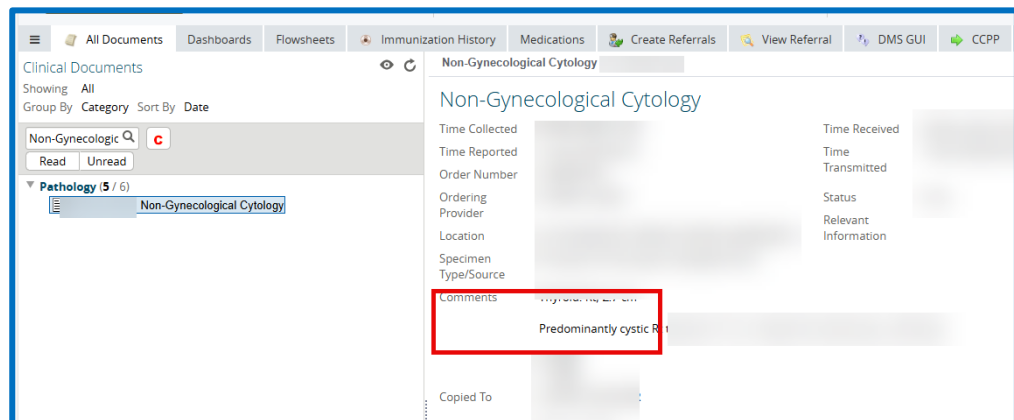
Details: The Patient Demographics print window now loads in under 10 seconds.
The complete Patient Demographics print screen is fully displayed in under 30 seconds.



Netcare viewer lab order level comments in CDV Tree.

Description: Improved maintainability to support lab order level comments of 4,000 characters.

Details: The Lab order level comments of 4,000 characters are displayed in the Netcare Results Viewer for numeric lab, microbiology and textual results in CDV Tree.



eReferral Enhancements

Create Referrals (CR) Standard Form

Release Summary

The below Standard Form changes (Items 1-15) are associated with the ERS (Electronic Referral Solution) Project.

In the future, as a part of the ERS Project, electronic referrals submitted by Referring Providers through both Community EMR's and Connect Care will automatically display in eReferral.

Flag Referral (For Referring Provider Use)

Description:	Remove "Flagged for Referrer".
Details:	<p>Remove the "Flagged Referral" checkbox from the Standard Form on both creation of Referral and on referral view post submission.</p> <p>Remove the "Flagged for Referrer" column from the "In Progress" Worklist on My Referrals dashboard.</p>

Patient unable to communicate adequately in English checkbox – "Details" field – Remove Mandatory Requirement

Description:	Remove mandatory requirement of Details population.
Details:	<p>When "Patient unable to communicate adequately in English" checkbox is checked the additional field of "Details" opens; the mandatory requirement of populating this field to be removed.</p>

Language – Add Additional Selections

Description:	Add additional languages and dialects.
Details:	<p>When "Patient unable to communicate adequately in English" checkbox is checked the field of "Language" opens:</p> <ul style="list-style-type: none"> - This field will now be a smart (auto populate) field. When a user starts typing the name of a language or dialect it will produce results a user can select from. - The list of available languages and dialects will increase from 14 to 1,054.

Additional Information – Patient Preferred Language

Description:	Addition of patient preferred language information.
Details:	<p>To accommodate when a patient can speak English but has a preferred different language, the “Special Considerations” field under Additional Info will be populated with patient language preference information from CII messaging.</p> <p>Example: Special Considerations: Patient language preference: German</p>

Patient has hearing or vision requirements checkbox – “Details” field – Remove Mandatory Requirement

Description:	Remove mandatory requirement of Details population.
Details:	When “Patient has hearing or vision requirements” checkbox is checked the additional field of “Details” opens; the mandatory requirement of populating this field to be removed.

Provider Information – “Phone Number” – Remove Mandatory Requirement

Description:	Remove mandatory requirement of field.
Details:	Under both Referring Provider Information and Primary Care Provider (when “Different from Referring Provider” is checked) the phone number fields will no longer be mandatory.

Submission Method

Description:	Improve the options available in the Submission Method drop-down menu.
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Details:	<p>The following Submission Methods are removed:</p> <ul style="list-style-type: none"> - Phone - Mail <p>The following Submission Method are added:</p> <ul style="list-style-type: none"> - Automatic <p>The Submission Method of "Connect Care" will change to "Fax from Connect Care". The drop-down menu will display in the following order:</p> <ul style="list-style-type: none"> - eReferral - Fax - Fax rerouted from non-FAST Office - Fax from Connect Care - Automatic <p>The default on the drop-down will be "eReferral".</p>
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Referring Provider Information – Add Facility Name

Description:	New label/field of "Facility Name" to be added to Standard Form.
Details:	<p>In the Referring Provider section, the new label/field of "Facility Name" will be included and populated:</p> <ul style="list-style-type: none"> - Referrals from Community EMR will populate Facility Name. - Referrals originating in Connect Care the field will be present but populated with a dash. - When a referral is generating by a user directly in eReferral this field will not be visible.

Primary Care Provider Information – Add Facility Name

Description:	New label/field of "Facility Name" to be added to Standard Form.
Details:	<p>In the Primary Care Information section for the Primary Care Provider, when "Different from Referring Provider" radio button is selected and additional fields open for the Primary Care Provider Information, the new "Facility Name" field will now be included.</p>

Patient Information – Addition of Middle Name

Description:	Patient middle name to be added to displaying Patient Information.
Details:	<p>In Patient Information the patient's middle name will now be displayed to match the patient's name displaying on the header (Patient Context), which is populated from the Client Registry.</p>

Referral ID Number

Description:	eReferral ID update for External Referrals.
Details:	<p>"External Referral ID" will be a new read-only field in the eReferral header/metadata which will display the Connect Care Referral ID information when a referral originates from Connect Care.</p> <p>When a referral originates from a Community EMR this field will not be visible.</p> <p>There are no changes to current state data flow from eReferral to My Health Records (MHR).</p>

Source System Identifier – "Submission Source"

Description:	New label/field of "Submission Source" for referrals coming through Community EMR and Connect Care.
Details:	<p>Displaying in the Referral Header is the new field of "Submission Source" which is a read-only field that displays either:</p> <ol style="list-style-type: none"> 1) Connect Care – Electronic 2) Community EMR – Electronic <p>If the field is null, the label is hidden.</p>

Prac ID (Practitioner Identification Number)

Description:	New label/field of "Prac ID" for Referring Provider Information.
Details:	<p>Referring Provider Information will have a new label/field of "Prac ID". Prac ID will be displayed under Referring Provider, above the new label/field of "Facility Name"</p> <p>For referrals being entered manually by the FAST team, when adding a Referring Provider through the Provincial Provider Registry (PPR) search, the Prac ID will display during the search (but not as a searchable field) and will populate upon selection of provider, on the form.</p> <p>When "Different from Referring Provider" is selected, Prac ID will not be added or included in the fields that open for Referring Provider information input.</p> <p>The Prac ID is displayed in the User Interface for referrals only; eConsult's are out of scope.</p>


	<p>For referrals entered directly in the User Interface (UI):</p> <ul style="list-style-type: none"> - The data from a user's account is prepopulated into the form from My Details (On Behalf Of) but Prac ID is not an included data field therefore there will be a non-mandatory user-enterable field named Prac ID under Referring Provider in place of the non-editable field, for user input. - If a provider is selected through the Provincial Provider Registry (PPR) that does not have a Prac ID the non-mandatory user-enterable field will display for manual entry. - If a provider is selected through Provincial Provider Registry (PPR) and they have a Prac ID associated, the read-only Prac ID field will be populated and be non-editable.
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Referral Priority – “Referring Provider Priority”

Description:	New label/field of “Referring Provider Priority” for Referring Provider.
Details:	<p>The new non-mandatory editable label/field of “Referring Provider Priority” will be present on the Standard Form with the following radio button selections:</p> <ul style="list-style-type: none"> - Routine - Semi-Urgent - Urgent <p>This new field is to provide information to FAST Triage with regards to the referral priority from the opinion of the Referring Provider, at the time of referral creation.</p>

Platinum Five – Patient Information Mismatch

Description:	New section of “Patient Information Mismatch” from Patient Context.
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Details:	<p>The new section of "Patient Information Mismatch" displays after the referral is submitted – visible below "Patient Information", above "Request Created For".</p> <p>When a mismatch exists the below will alert the user:</p> <div data-bbox="462 430 1079 504">  </div> <p>Mismatched fields will come across from the source system and be displayed in read-only format.</p> <ul style="list-style-type: none"> - Only mismatched fields display in read-only format for user review. The fields are non-mandatory. - Matched fields will not display. - If one or more but not all fields are a mismatch the fields with a match will remain hidden. <p>As a ULI mismatch is impossible the fields included will be:</p> <ul style="list-style-type: none"> - Name: <i>LAST, First Middle</i> - Sex: - DOB:
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New Worklist

<i>New Worklist</i>	
Description:	A new module named "Intake" added to eReferral Worklists.
Details:	<p>A new module called "Intake" has been added to the eReferral Worklists to manage Connect Care and community EMR messages that are missing ULIs or contain invalid referral reasons.</p> <p>This module is designed to capture and manage unregistered referrals.</p> <p>The two new screens included in the Intake module are:</p> <ol style="list-style-type: none"> 1. Intake Worklist – Search Filter: Allows users to filter and review incoming unregistered referrals. 2. Submit Screen: Enables users to complete and submit the referral once the missing or incorrect information has been resolved. <p>Note: This feature does not apply to eConsult.</p>

Bug Fixes

<i>Fixed Bugs and Issues Impacting User Experience</i>	
Description:	System performance improved to enhance user experience and cleaner data.

Details:	<ol style="list-style-type: none"> 1. Improved access control by fixing a system issue that prevented users with Read Only permissions from accessing files in the Referral Attachments screen. 2. To streamline data structure and reduce redundancy, the 'CancelDate,' 'DeclineDate,' and 'ResponseDate' fields have been removed from the Referral/eConsult metadata header.
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Materialized View Changes

<i>Updates to the Materialized View</i>	
Description:	Updates were made to the materialized view.
Details:	<p>The following fields were added to the Materialized View:</p> <ol style="list-style-type: none"> 1. First Clerical Triage in Progress Date 2. Submission Source 3. Referrer Facility 4. Source Referral ID 5. Priority Set by Provider <p>The following field was removed from the Materialized View:</p> <ol style="list-style-type: none"> 1. Last Waiting for Clerical Triage Date