

# Oracle Health, Claims, Prior Authorizations, and Payments

## Oracle Health, Claims, Prior Authorizations, and Payments Release Notes



April 2026

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May 2026

The Oracle logo, consisting of the word "ORACLE" in white, uppercase letters, centered within a solid red square.

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Oracle Health, Claims, Prior Authorizations, and Payments Oracle Health, Claims, Prior Authorizations, and Payments  
Release Notes, April 2026

G50435-07

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# 1

## Intended Audience

These Release Notes are intended for Oracle customers who use offerings in Oracle Health, Claims, Prior Authorizations, and Payments to process revenue cycle information for Oracle Health EHR. This page provides a summary of new functionality available with this release.

# 2

## Dependencies and Technical Requirements

Review the dependencies and technical requirements for Oracle Health Claims, Prior Authorizations, and Payments.

- Ensure that your domain is integrated with Millennium Identify and Access Management. If your site does not use Millennium Identify and Access Management, contact your Oracle representative to set up integration with Oracle Cloud Infrastructure (OCI) Identify and Access Management (IAM).

# 3

## Available Professional Services

Professional services are available to assist you with Oracle Health Claims, Prior Authorizations, and Payments, if needed.

Currently, no professional services are available for Oracle Health Claims, Prior Authorizations, and Payments.

# 4

## Solution Change Details

The Solution Change Details provide information about the changes made in this release, organized by component.

The Solution Change Details from this release are organized into the following topics:

- [Charge Services Solution Change Details](#)  
Information is available for the features that are released with Charge Services as a part of Oracle Health Claims, Prior Authorizations, and Payments.
- [Denial Management Solution Change Details](#)  
Information is available for the features that are released with Denial Management as a part of Oracle Health Claims, Prior Authorizations, and Payments.
- [Guarantor Balances and Payment Integration Solution Change Details](#)  
Information is available for the features that are released with Guarantor Balances and Payment Integration as a part of Oracle Health Claims, Prior Authorizations, and Payments.
- [Insurance Coverage Solution Change Details](#)  
Information is available for the features that are released with Insurance Coverage as a part of Oracle Health Claims, Prior Authorizations, and Payments.
- [Intelligent Prior Authorization Solution Change Details](#)  
Information is available for the features that are released with Intelligent Prior Authorization as a part of Oracle Health Claims, Prior Authorizations, and Payments.
- [Patient Bill Estimates Solution Change Details](#)  
Information is available for the features that are released with Patient Bill Estimates as a part of Oracle Health Claims, Prior Authorizations, and Payments.

## Charge Services Solution Change Details

Information is available for the features that are released with Charge Services as a part of Oracle Health Claims, Prior Authorizations, and Payments.

The Charge Services Solution Change Details section includes information about the following releases:

- [Charge Services 26.04](#)  
The features below are available with this release.
- [Charge Services 2025.10.1](#)  
The features below are available with this release.

## Charge Services 26.04

The features below are available with this release.


### Highlights

- Ensure users have the correct charge codes at the time of charge creation.

- Reduce manual touches by coders, billers, revenue integrity, and IT staff.
- Reduce the time it takes to bill claims and receive reimbursement.
- The Oracle Health Charge Services Charge agent can now attempt to automatically resolve certain charge issues based on configuration that is completed by your site's IT administrator.
- Billers can now manually add charges to encounters.
- Billers can now select multiple charges when performing manual charge actions.
- Billers can now manually release and absorb charges that are in a status of Suspended.
- Billers and department managers can now view charge information from multiple encounters and patients at once.

Solution Change Details

Solution Change	Component, Description, and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Millennium Platform Charge Event Proxy	<p><b>Component:</b> Oracle Health Clinical Charge Capture</p> <p><b>Description:</b> Billers can now capture charges from previous clinical workflows that require Millennium Platform Charge Services. Customers upgrading to 2026.01, no longer have to process through the Millennium Platform Charge Activity tables and the charges are no longer viewable in those tables after upgrading. However, the Charge Reference data remains in Millennium Platform for 2026.01. In a future release, all Charge Reference data will be included in the new Electronic Health Record Modernization (EHRM) platform.</p>	See the <a href="#">Charge Services Billers User Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>

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Solution Change	Component, Description, and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
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Solution Change	Component, Description, and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Coding Agent/ Charge Integration	<p data-bbox="586 306 708 386"><b>UI Impact:</b> Workflow (Automatic)</p> <p data-bbox="586 405 789 779"><b>Component:</b> Oracle Health Clinical Charge Capture</p> <p data-bbox="586 527 789 779"><b>Description:</b> Revenue Integrity users can ensure that the Coding Agent has the ability to pass on any information relevant to creating the charge.</p> <p data-bbox="586 789 708 867"><b>UI Impact:</b> Workflow (Automatic)</p>	See the <a href="#">Charge Services Billers User Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<b>Implementation Impact:</b> None <b>Maintenance Impact:</b> None

Solution Change	Component, Description, and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Charge Agent Automated Actions	<p><b>Component:</b> Oracle Health Charge Services Charge Agent</p> <p><b>Description:</b> The Oracle Health Charge Services Charge agent can now attempt to automatically resolve charge issues in the following issue categories:</p> <ul style="list-style-type: none"> <li>• Modifier 25 Missing</li> <li>• Modifier 26 Missing</li> <li>• Modifier 76 Missing</li> <li>• Modifier 77 Missing</li> <li>• Modifier 91 Missing</li> <li>• Modifier TC Missing</li> <li>• Charge Time Outside Encounter Range</li> <li>• Invalid Duration</li> <li>• Invalid Professional Details</li> <li>• NCCI PTP Edits (Modifier 59, XE, XP, XS, XU)</li> </ul> <p><b>UI Impact:</b> Workflow (Implemented) IT administrators can now configure the Oracle Health Charge Services Charge agent to attempt to automatically resolve certain charge issues.</p>	See the <a href="#">Charge Services Configuration Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>

Solution Change	Component, Description, and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
View Charge Information for Multiple Encounters	<p><b>Component:</b> Oracle Health Charge Services Charges List</p> <p><b>Description:</b> If you access the Charges table as a biller or a department manager, you can now view charge information from multiple encounters and patients at once.</p> <p><b>UI Impact:</b> Visual Only</p>	See the <a href="#">Charge Services Billers User Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>
Release Suspended Charges	<p><b>Component:</b> Oracle Health Charge Services Charges List</p> <p><b>Description:</b> As needed, billers can now manually release or absorb charges that are in a status of Suspended by selecting the appropriate action on the Charges table.</p> <p><b>UI Impact:</b> Workflow (Automatic)</p> <p>Billers can now manually release or absorb charges that are in a status of Suspended.</p>	See the <a href="#">Charge Services Billers User Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>

Solution Change	Component, Description, and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Perform Bulk Charge Actions	<p><b>Component:</b> Oracle Health Charge Services Charges Table</p> <p><b>Description:</b> Billers can now select checkboxes in charge rows on the Charges table to to select multiple charges when performing manual charge actions.</p> <p><b>UI Impact:</b> Workflow (Automatic) Billers can now select multiple charges when performing manual charge actions.</p>	See the <a href="#">Charge Services Billers User Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>
Manually Add Charges	<p><b>Component:</b> Oracle Health Charge Services Charges Table</p> <p><b>Description:</b> Billers can now manually add charges to encounters. Additionally, billers can modify encounter information as needed while manually adding charges.</p> <p><b>UI Impact:</b> Workflow (Automatic) Billers can now manually add charges to encounters.</p>	See the <a href="#">Charge Services Billers User Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>

## Charge Services 2025.10.1

The features below are available with this release.

### Highlights

- Billers now can view, work, and assign or reassign worklist items for charges. Additionally, billers can approve or reject suggested modifications for charges.

- Billers now can view and modify charge information.

### Solution Change Details

Solution Change	Description, and UI Impact	Reference Materials	Validation Guidelines	Validation Guidelines
Working Charge Worklists	<p>Billers now can view, work, and assign or reassign worklist items in the Charge Worklist tab. Billers can use worklist items to approve or reject suggested modifications for charges.</p> <p><b>UI Impact:</b> Workflow (Automatic)</p> <p>Billers can use worklist items in the Charge Worklist tab to view, approve, and reject suggested modifications for charges and view the current status for the worklist items.</p>	See the <a href="#">Charge Services Billers User Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>
Viewing and Modifying Charges	<p>Billers now can view and modify charges.</p> <p><b>UI Impact:</b> Workflow (Automatic)</p> <p>Billers can use the Charges table to view charge information. Additionally, billers can modify existing charge information and credit charges as needed.</p>	See the <a href="#">Charge Services Billers User Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>

## Denial Management Solution Change Details

Information is available for the features that are released with Denial Management as a part of Oracle Health Claims, Prior Authorizations, and Payments.

The Denial Management Solution Change Details section includes information about the following releases:

- [Denial Management 26.Q1.MR1](#)  
The features below are available with this release.

## Denial Management 26.Q1.MR1

The features below are available with this release.

### Highlights

The Denial Management agent now is available to help create denial appeal packets.

### Intended Audiences

This topic is intended for Oracle Health customers who use Oracle Health EHR to manage denials.

### Solution Change Details

The following solution changes are available with this release:

Solution Change	Description and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Denial Appeal Packet - OHPRI-3	<p>The Denial Management agent works with data entered in Cerner Patient Accounting to compose an appeal packet for denials that require an appeal letter for resolution. The agent can also provide root-cause analysis for those denials.</p> <p><b>UI Impact:</b> Workflow (Automatic)</p> <p>The Denial Management agent creates an appeal packet, which allows you to review, edit, and download to communicate with payers.</p>	See <a href="#">Denial Management Agent Insurance Collector User Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>

Solution Change	Description and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Denial Worklist Enhancements	<p><b>Component:</b> Denial Management Worklist</p> <p>The worklist now displays all denial items and includes additional claim, payer, denial, patient, amount, and status details.</p> <p><b>UI Impact:</b> Workflow</p> <p>Users can review more denial information directly from the worklist and filter by additional values, such as payer, denial reason code, and remark code.</p>	<p>See <a href="#">Denial Management Agent Insurance Collector User Guide</a> for more information.</p>	<p>Verify that you can view denial items, review expanded denial details, and filter the worklist.</p>	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>
Root-Cause Analysis for All Denials	<p><b>Component:</b> Denial Management Agent</p> <p>The agent now provides root-cause analysis and suggested resolution for denial items, including items that are not recommended for appeal.</p> <p><b>UI Impact:</b> Workflow</p> <p>Users can review the root cause and suggested resolution from the denial details.</p>	<p>See <a href="#">Denial Management Agent Insurance Collector User Guide</a> for more information.</p>	<p>Verify that denial items include root-cause analysis and suggested resolution.</p>	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>

Solution Change	Description and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Assisted Appeal Packet Creation (OHPRI-5680)	<p><b>Component:</b> Denial Management Agent</p> <p>Users can initiate appeal packet creation when the agent does not automatically create one. The agent uses the user's justification to generate the packet.</p> <p><b>UI Impact:</b> Workflow</p> <p>Users select Create Appeal, enter a justification in a drawer, and then review and edit the generated packet.</p>	See <a href="#">Denial Management Agent Insurance Collector User Guide</a> for more information.	Verify that you can upload, map, and save an appeal letter template and use it for an appealable denial.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> Low</p> <p>Maintain templates as payer and health plan requirements change.</p>

## Guarantor Balances and Payment Integration Solution Change Details

Information is available for the features that are released with Guarantor Balances and Payment Integration as a part of Oracle Health Claims, Prior Authorizations, and Payments.

The Guarantor Balances and Payment Integration Solution Change Details section includes information about the following releases:

- [Guarantor Balances and Payment Integration 26.04](#)  
The features below are available with this release.

### Guarantor Balances and Payment Integration 26.04

The features below are available with this release.

#### Highlights

- Guarantor account balance information that is sent and processed through Oracle Health Patient Administration or Oracle Health Patient Portal is now visible to billers who are also using Cerner Patient Accounting or Oracle Health Patient Accounting to view this information.
- Payment information that is sent and processed through Oracle Health Patient Administration is now visible to billers who are also using Cerner Patient Accounting or Oracle Health Patient Accounting to view this information; additionally, payment information that is sent and processed through Oracle Health Patient Portal is now visible to billers who are also using Cerner Patient Accounting.

**Solution Change Details**

Solution Change	Description, and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Guarantor Account Balance Information for Consuming Products	Guarantor account balance information is now sent from integrated billing systems to the following areas: <ul style="list-style-type: none"> <li>• Oracle Health Patient Administration</li> <li>• Oracle Health Patient Portal</li> </ul> Account information is now updated automatically in Cerner Patient Accounting and Oracle Health Patient Accounting when related activity occurs in Oracle Health Patient Administration or Oracle Health Patient Portal. As needed, messages are displayed to indicate that payments are posted successfully or to indicate that posting has failed. Activity records are now updated with posting information. <p><b>UI Impact:</b> None</p>	See <a href="#">Guarantor Balances and Payment Integration Configuration Guide</a> for more information	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>

Solution Change	Description, and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Payment Information for Consuming Products	<p>Payment information that is sent and processed through Oracle Health Patient Administration is now visible to billers who are also using Cerner Patient Accounting or Oracle Health Patient Accounting to view this information.</p> <p>Payment information that is sent and processed through Oracle Health Patient Portal is now visible to billers who are also using Cerner Patient Accounting. Patient and guarantor accounts are now updated automatically based on information from the product that owns the balance. As needed, messages are displayed to indicate that payments are posted successfully or to indicate that posting has failed. Activity records are now updated with posting information.</p> <p><b>UI Impact:</b> Workflow (Implemented) When the correct transaction aliases (for Cerner Patient Accounting customers) or master financial transactions (MFTs) (for Oracle Health Patient Accounting customers) are set up at your site,</p>	See <a href="#">Guarantor Balances and Payment Integration Configuration Guide</a> for more information	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> Low</p> <p>For Cerner Patient Accounting customers, configure the appropriate transaction aliases to ensure that this feature functions correctly. For Oracle Health Patient Accounting customers, use the current Model Experience configuration for MFTs to ensure that this feature functions correctly.</p> <p><b>Maintenance Impact:</b> None</p>

Solution Change	Description, and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
	payment information is now automatically updated in Cerner Patient Accounting and Oracle Health Patient Accounting when related activity occurs in Oracle Health Patient Administration or Oracle Health Patient Portal.			

## Insurance Coverage Solution Change Details

Information is available for the features that are released with Insurance Coverage as a part of Oracle Health Claims, Prior Authorizations, and Payments.

The Insurance Coverage Solution Change Details section includes information about the following releases:

- [Insurance Coverage 26.04](#)  
The features below are available with this release.

### Insurance Coverage 26.04

The features below are available with this release.

#### Highlights

- A new AI agent now compares data from the visit with information from the payer to determine which benefits are to be applied the encounter.
- Logic now is included to determine the correct health plan based on attributes from the claim after you select the payer.

## Solution Change Details

Solution Change	Description and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Eligibility Verification AI Agent - CDAF-52940	<p>The Eligibility Verification (EV) agent now is available. The EV agent delivers an intelligent, unified eligibility verification engine, designed for real-time automation and integration across Oracle Health applications. The EV agent can identify patient coverage for accurate billing and provider reimbursement.</p> <p><b>UI Impact:</b> None</p>	None	<p>No validation testing is provided because the solution change contains updates to system processes that support front-end functionality and that cannot be tested directly. This solution change is associated with a solution change for the front-end functionality, which includes the certification guidelines necessary to test the functionality. As part of your regression testing, ensure that your system is working as expected.</p>	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>
Additional Payer Detection - CDAF-69916	<p>You now can identify other payers that were not identified on the encounter. Payers may have previously been unidentified due to lack of patient awareness of another health plan, error in entering insurance information, and so on.</p> <p><b>UI Impact:</b> None</p>	None	<p>No validation testing is provided because the solution change contains updates to system processes that support front-end functionality and that cannot be tested directly. This solution change is associated with a solution change for the front-end functionality, which includes the certification guidelines necessary to test the functionality. As part of your regression testing, ensure that your system is working as expected.</p>	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>

Solution Change	Description and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Service Type (AI) and Network Type (Non-AI) Identification - CDAF-69928 and CDAF-69927	To determine the copay amount and benefit summary, you now can use the EV agent as deterministic logic. The EV agent can help identify the specific service type relevant to the encounter and corresponding network type. <b>UI Impact:</b> None	None	No validation testing is provided because the solution change contains updates to system processes that support front-end functionality and that cannot be tested directly. This solution change is associated with a solution change for the front-end functionality, which includes the certification guidelines necessary to test the functionality. As part of your regression testing, ensure that your system is working as expected.	<b>Implementation Impact:</b> None <b>Maintenance Impact:</b> None
Benefit Summary Extraction - CDAF-69923	To determine encounter specific benefits, you now can use the EV agent to view all benefits associated to each selected service type and network type. <b>UI Impact:</b> None	None	No validation testing is provided because the solution change contains updates to system processes that support front-end functionality and that cannot be tested directly. This solution change is associated with a solution change for the front-end functionality, which includes the certification guidelines necessary to test the functionality. As part of your regression testing, ensure that your system is working as expected.	<b>Implementation Impact:</b> None <b>Maintenance Impact:</b> None

Solution Change	Description and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Financial Allocation Prioritization - CDAF-74351	To collect the appropriate copay at the time of service or before the service, you now can use the EV agent to determine the primary health plan and expected copay. <b>UI Impact:</b> None	None	No validation testing is provided because the solution change contains updates to system processes that support front-end functionality and that cannot be tested directly. This solution change is associated with a solution change for the front-end functionality, which includes the certification guidelines necessary to test the functionality. As part of your regression testing, ensure that your system is working as expected.	<b>Implementation Impact:</b> None <b>Maintenance Impact:</b> None

## Intelligent Prior Authorization Solution Change Details

Information is available for the features that are released with Intelligent Prior Authorization as a part of Oracle Health Claims, Prior Authorizations, and Payments.

The Intelligent Prior Authorization Solution Change Details section includes information about the following releases:

- [Intelligent Prior Authorization 26.04](#)  
The features below are available with this release.
- [Intelligent Prior Authorization 2025.10.1](#)  
The features below are available with this release.

### Intelligent Prior Authorization 26.04

The features below are available with this release.

#### Highlights

- Support is added for multiple coverages in a prior authorization.
- An Prior Authorization agent now is integrated with Oracle Health Patient Administration with a patient-centric prior authorization view.

## Solution Change Details

Solution Change	Description and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Prior Authorization UI Enhancements - OHPRI-2112	<p>Prior Authorization is enhanced to better meet the requirements of HTI-4, add support for multiple coverages in a prior authorization, further integrate with Oracle Health Patient Administration and Patient Portal, and expand CMS integration for providers impacted by the Wiser program.</p> <p><b>UI Impact</b></p> <p>Workflow (Automatic)</p> <ul style="list-style-type: none"> <li>A Medical Necessity badge is displayed based on Centers for Medicare &amp; Medicare Services (CMS) National Coverage Determination (NCD) and Local Coverage Determination (LCD) guidelines to indicate the that a procedure for prior authorization is likely or unlikely to meet CMS's medical necessity guidelines.</li> <li>When the Prior Authorization AI Agent</li> </ul>	See <a href="#">Intelligent Prior Authorization Provider User Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b></p> <p>None</p> <p><b>Maintenance Impact:</b></p> <p>None</p>

Solution Change	Description and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
	<p>completes the prior authorization questionnaire, or attaches clinical documentation , an explanation and link to the document references is available.</p> <ul style="list-style-type: none"> <li>• When obtaining prior authorization, you can add a billing authorization note to the patient chart for evidence of prior authorization being received from the payer.</li> </ul>			

Solution Change	Description and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Payer Connectivity - OHPRI-2946	<p>Prior authorization capabilities now are expanded to improve collaboration between payers and providers.</p> <ul style="list-style-type: none"> <li>• <b>Enhanced Automation:</b> Improved EDI 278/275 workflows with automated routing and response handling.</li> <li>• <b>Payer Hub Improvements:</b> Easier credential management, refined routing logic, and more flexible endpoint configuration.</li> <li>• <b>Broader Integration:</b> Improve visibility into prior authorizations within registration and scheduling workflows through integration with PAS and Millennium systems.</li> <li>• <b>FHIR API Support:</b> Standards-based connectivity with compliant payers using DaVinci CRD, DTR, and PAS APIs.</li> <li>• <b>AI-Powered Authorization:</b> A Prior Authorization AI agent interprets</li> </ul>	None	No validation testing is provided because the solution change contains updates not visible to users. As part of your regression testing, ensure that your system is working as expected.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>

Solution Change	Description and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
	<p>payer requirements using patient chart data, helping generate more accurate responses.</p> <ul style="list-style-type: none"> <li> <b>Expanded Routing Capabilities:</b> Provider-specific routing supports third-party vendors, including Glidian.                 </li> <li> <b>Centralized Payer Directory:</b> A scalable directory streamlines endpoint management and routing logic.                 </li> </ul> <p><b>UI Impact:</b> None</p>			

## Intelligent Prior Authorization 2025.10.1

The features below are available with this release.

### Highlights

- Prior authorization request functionality.
- The Prior Authorization Management worklist.
- The Prior Authorization Request Details page.

## Solution Change Details

Solution Change	Description, and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Prior Authorization Request Functionality	<p>Prior authorization request functionality now is available in Oracle Health EHR.</p> <p><b>UI Impact:</b> Workflow (Automatic)</p> <p>Providers can create prior authorization requests automatically by placing orders using Oracle Health EHR.</p>	USER GUIDE LINK	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>
Prior Authorization Management Worklist	<p>The Prior Authorization Management worklist now is available for providers.</p> <p><b>UI Impact:</b> Workflow (Automatic)</p> <p>Providers can use the Prior Authorization Management worklist to view, search, and open prior authorization request records.</p>	USER GUIDE LINK	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>
Prior Authorization Request Details Page	<p>The Prior Authorization Request Details page now is available for providers.</p> <p><b>UI Impact:</b> Workflow (Automatic)</p> <p>Providers can use the Prior Authorization Request Details page to review and submit the details for prior authorization requests.</p>	USER GUIDE LINK	Verify that you can successfully complete the workflows in the Reference Materials.	<p><b>Implementation Impact:</b> None</p> <p><b>Maintenance Impact:</b> None</p>

## Patient Bill Estimates Solution Change Details

Information is available for the features that are released with Patient Bill Estimates as a part of Oracle Health Claims, Prior Authorizations, and Payments.

The Patient Bill Estimates Solution Change Details section includes information about the following releases:

- [Patient Bill Estimates 26.04](#)  
The features below are available with this release.

### Patient Bill Estimates 26.04

The features below are available with this release.

#### Highlights

- **Automated generation of draft estimates:** For scheduled appointments, patient bill estimates are automatically generated in a draft status for user review.
- **Estimates for self-pay and insured patients:** Estimates are generated for self-pay and insured patients.
- **Human review and approval:** In Oracle Health Patient Administration, the provider staff can perform the following actions:
  - View a draft estimate for a scheduled appointment or visit.
  - Add or remove expected services.
  - Request a revised estimate and approve an estimate.
- **Generate estimate letters in a PDF:** Provider staff can generate and download a PDF file of an approved estimate for sharing with patients.

#### Solution Change Details

Solution Change	Description, and UI Impact	Reference Materials	Validation Guidelines	Implementation and Maintenance Impact
Patient Bill Estimates for Scheduled Services (PATIENT-5267)	Oracle Health Patient Administration provider staff now can use the new Patient Bill Estimates functionality to generate an estimate of a self-pay or insured patient's potential out-of-pocket costs for scheduled healthcare services or procedures. <b>UI Impact:</b> Workflow (Automatic)	See <a href="#">Patient Bill Estimates User Guide</a> for more information.	Verify that you can successfully complete the workflows in the Reference Materials.	<b>Implementation Impact:</b> None <b>Maintenance Impact:</b> None



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## Known Issues

Oracle has identified the known issues below in Oracle Health Claims, Prior Authorizations, and Payments. The list is updated when issues are identified or resolved in a new release.

### Charge Services

- When navigating back to the Item Details page from the Charges List Add drawer, the following fields do not retain their previously selected values (OHPRI-9793):
  - Performing Location
  - Unit of Measure
- When a charge contains modifiers from a parent event (such as an Order, PowerForm, or Manual Charge Entry), an encounter modification may cause modifiers to be removed or updated unexpectedly. (OHPRI-11215)
- When a department manager assigns a worklist item to a non-department manager for review, a value should not display in the Requester Reference field. Currently, this field remains valued by the original requester. (OHPRI-11281)

### Denial Management

Currently, no known issues have been identified for this product area.

### Guarantor Balances and Payment Integration

Currently, no known issues have been identified for this product area.

### Insurance Coverage

Currently, no known issues have been identified for this product area.

### Intelligent Prior Authorization

- Address information may not be displayed correctly. (OHPRI-5675)
- If you attempt to save a questionnaire form, an error message may be displayed that indicates that your answers were not saved. (OHPRI-5660)
- Addresses for ordering providers may not include the associated state. (OHPRI-5671)
- The Care Setting value may be incorrectly displayed as blank. (OHPRI-5666)
- You may be unable to sort the Health Plan column. (OHPRI-5665)
- Null information that is sent from a selected document may not be processed correctly. (OHPRI-5674)
- If you accept a suggested modification for an item in a status of **Needs Further Action**, the modification may not be performed. (OHPRI-5213)
- An Error 404: Not Found message may be displayed for the service facilities of work items. (OHPRI-5670)
- Prior authorization receives the incorrect adjudication item, or items, requested in the prior authorization. (OHPRI-9934)

**Patient Bill Estimates**

Currently, no known issues have been identified for this product area.

# Glossary

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