Vandalia Health

Eligibility Alerts – Part 1

Process Definition Document

Purpose: The Process Definition Document (PDD) formalizes the final design of an automation solution. It functions as an approval artifact for automation and operations teams, enabling the transition from design to development once approved.

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I. AUTOMATION OVERVIEW

1.1 Objectives

The primary objective of this automation is the end-to-end resolution of in-scope eligibility alerts. Utilizing a Dispatcher/Performer architecture, the solution will automate data extraction from eCare, validate eligibility against predefined scope requirements, and perform necessary data enrichment. The process concludes with synchronized updates in Cerner and eCare, supported by a robust exception-handling framework to ensure operational transparency and data integrity.

1.2 Operational metrics

The automation is expected to impact the following operational metrics. Please note that specific targets are currently under review; however, the following represent baseline metrics for this initiative:

- **Operational Productivity:** Automating alert processing directly reduces manual effort, shifting the focus of FTEs toward complex, high-value tasks.

- **Capacity Reinvestment:** Reclaimed labor hours may be redeployed to address backlogs and support revenue-generating initiatives.

1.3 Design Team

The following individuals contributed to the automation design, must be informed of changes, and agree to support the maintenance of this automation

Name	Role / Title	Contact
Jordan Coutu	Operational Owner	Jordan.Coutu@vandaliahealth.org
Dawn Crist	Operational Owner	Dawn.Crist@vandaliahealth.org
Megan Humphreys	Operational SME(s)	Megan.Humphreys@vandaliahealth.org
Lisa Martino	Program Director	Lisa.Martino@tarponhealth.com
Jenn Arlas	Director of Solution Architecture	Jennifer.Arlas@tarponhealth.com
Phil Breeden	Developer	Phil.Breeden@tarponhealth.com

II. AUTOMATION DETAILS

2.1 Automation Overview

Item	Description
Area / Department	Revenue Cycle
Automation Name	Eligibility Alerts – Part 1
Automation Description	Resolution of Eligibility Alerts for alert codes 1461, 24554, 28978 and 29156

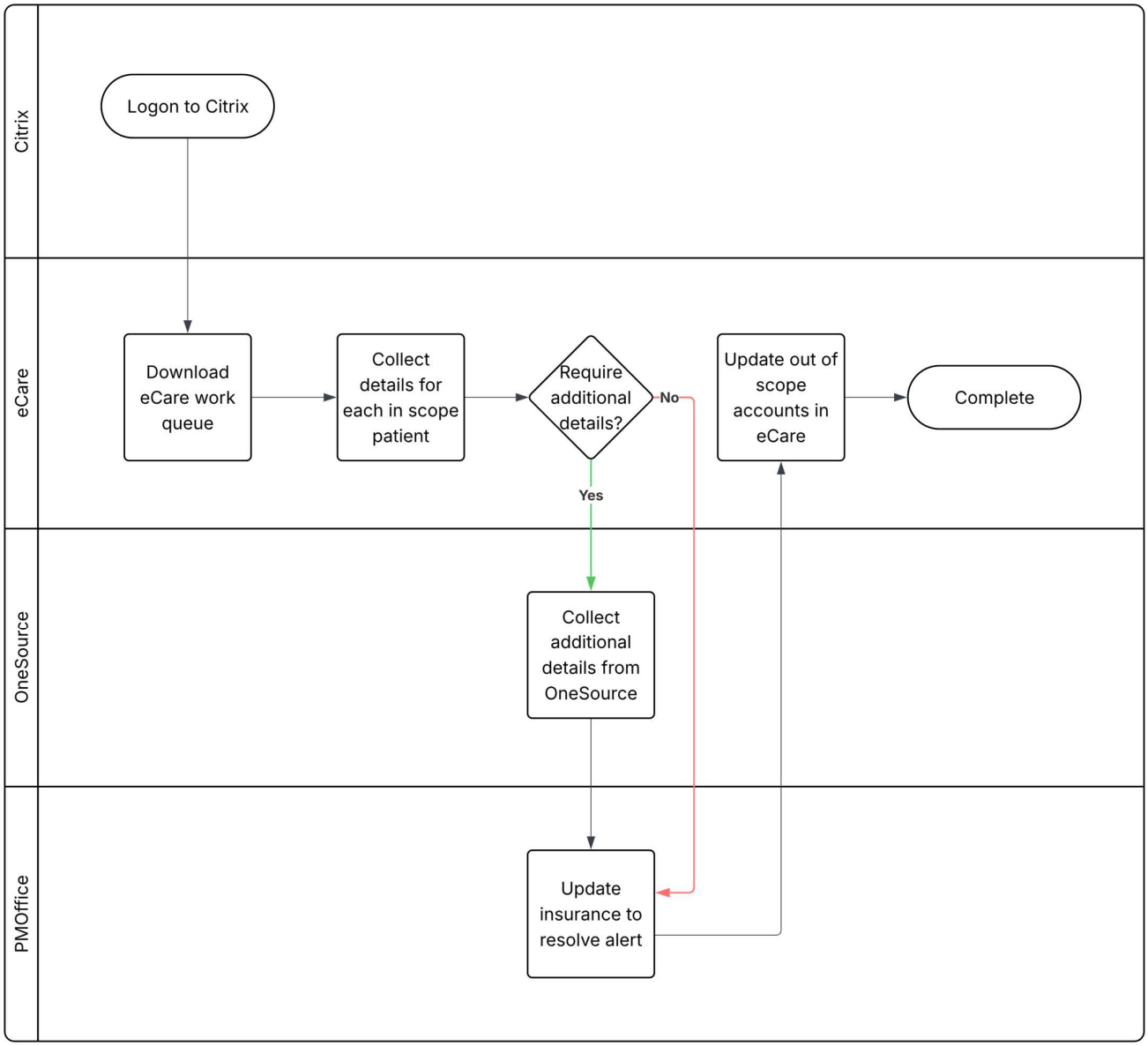
2.2 Applications

The table below lists the applications being utilized by the automation

Application	Comments / Access Needs
Citrix	Require permission to login to access applications required for workflow
Cerner – PM Office	Require permission to access patient accounts and post eligibility alert corrections via 'Modify Insurance' Conversation
ECare NEXT Work Queue (via Experian Nextbar)	Require permission to download in scope work queue(s) & search patients to read additional information
OneSource (via Experian Nextbar)	Require permission to search patients to read additional information

2.3 High-Level Process Map

The diagram below contains the high level steps the automation will take



2.4 Detailed Automation Steps

2.4.1 Assumptions

1. Process will leverage a Dispatcher/Performer architecture with multiple Performers

2. Process will be limited to in scope alerts
    a. 24554 – "Subscriber name in registration does not match subscriber name in eligibility response"
    b. 28978 – "Please Enter the Missing Group Number"
    c. 29156 – "Please Enter the Missing Group Name"
    d. 1461 – "Incorrect Plan Code '[current plan]' should be replaced with one of the following: [replacement plan]"
        i. Some alert 1461 descriptions are out of scope, as outlined in the 'OneSource Crosswalk' tab of the Plan Toolkit

3. Process will be limited to in-scope Patient Types
    a. See 'Patient Type Scope' tab of the Plan Toolkit for full list

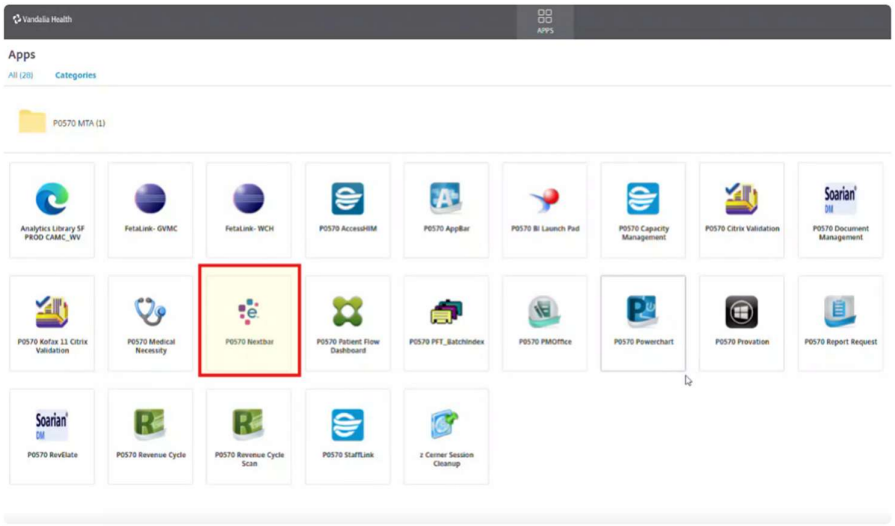
4. Out of scope alert handling
    a. Any alert not outlined above is out of scope for this process
    b. The bot may work any in-scope alert, regardless of additional out of scope alerts present on the same account &/or insurance tab

5. Bot schedule
    a. To start we suggest running the nightly Dispatcher at a time when the least number of staff are likely to be working alerts.
    b. The multiple performers will then run overnight to clear out as many alerts as possible before more staff sign on.
    c. The automation can be updated to run multiple times per day once validated

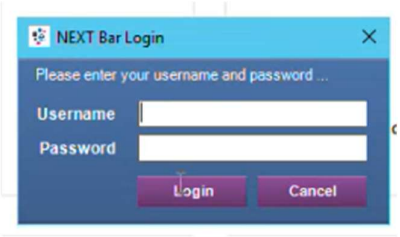
2.4.2 UiPath Dispatcher (export eCare work queue)

1. Login to Citrix via URL
    a. URL path: https://myaccess.camc.org/logon/LogonPoint/tmindex.html
    b. Complete multi factor authentication
    c. Is login successful?
        i. If successful, proceed to step 2
        ii. If not successful, retry (max 3 attempts)
            1. If retry is not successful after 3 attempts, log system exception (SE1)
                a. Reason: Citrix login failure
                b. Post-Condition: Email notification to Operations team & terminate automation
                    To: RPA.Notifications@vandaliahealth.org
                    Subject: Eligibility Alert Bot – Cannot login to Citrix
                    Message: Please be informed that the Eligibility Alert bot was unable to login to Citrix after 3 attempts on [datetime stamp].
                c. Transaction Status: Failed

2. Login to eCare by selecting the Nextbar tile in Citrix

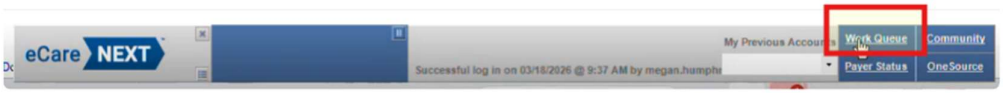


Then enter credentials:

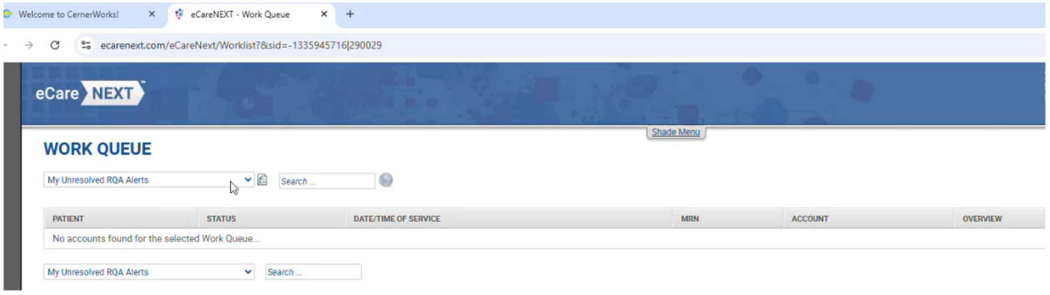


   a. Is login successful?
      i. If successful, proceed to step 3
      ii. If not successful, retry (max 3 attempts)
         1. If retry is not successful after 3 attempts, log system exception (SE2)
            a. Reason: eCare login failure
            b. Post-Condition: Email notification to Operations team & terminate automation
               To: RPA.Notifications@vandaliahealth.org
               Subject: Eligibility Alert Bot – Cannot login to eCare
               Message: Please be informed that the Eligibility Alert bot was unable to login to eCare after 3 attempts on [datetime stamp].
            c. Transaction Status: Failed

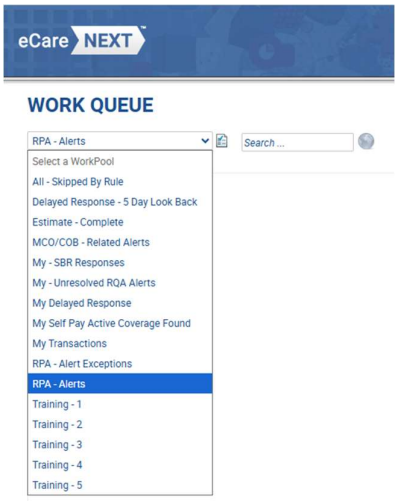
3. Export work queue file from eCare
   a. Click 'Work Queue' from NextBar



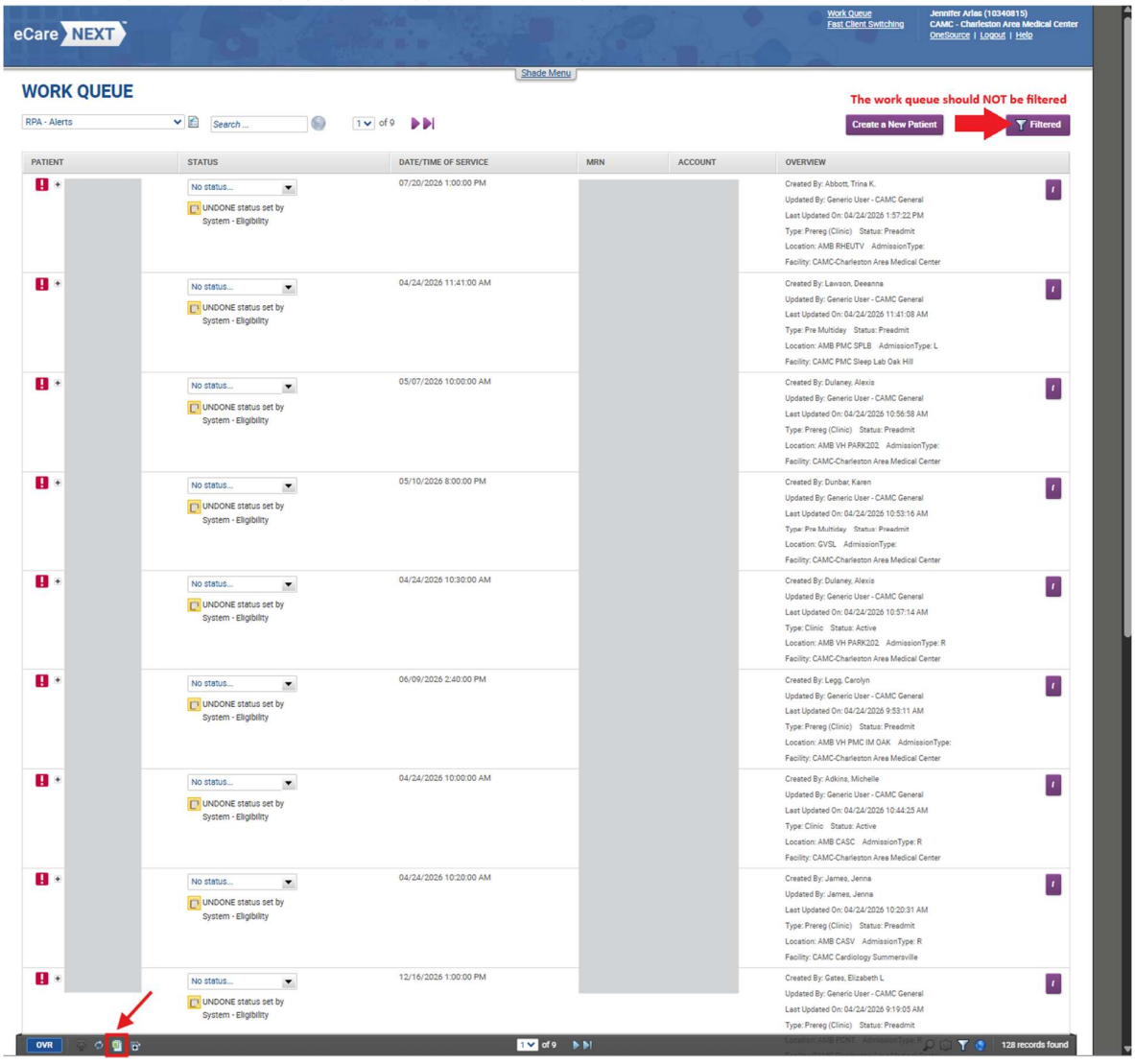
   b. A new tab in the browser window will open per below



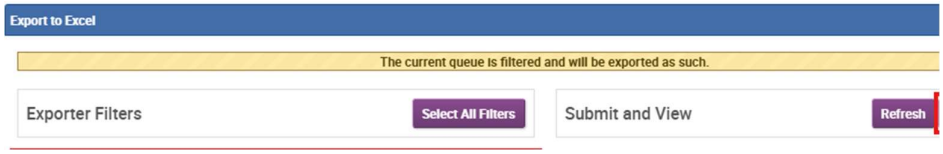
c. Select ‘RPA Alerts’ from drop down



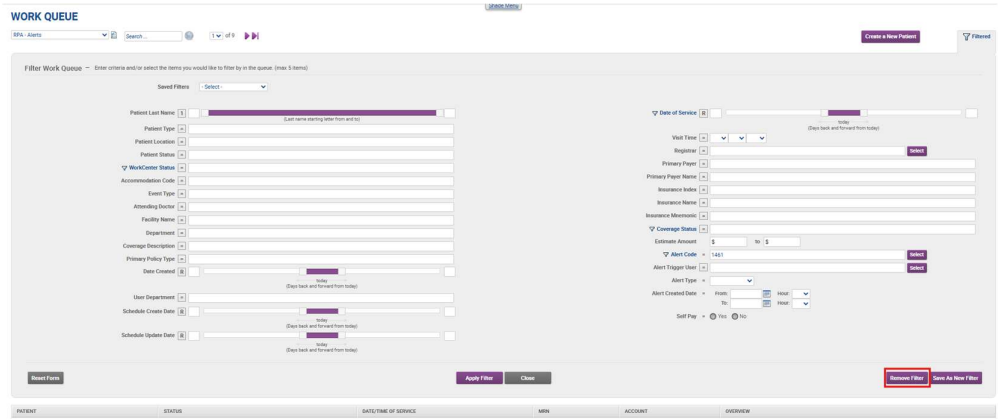
d. Click the export button. A pop-up will appear called ‘Export to Excel’.



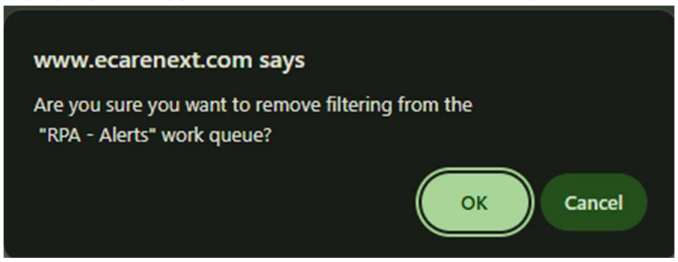
i. Ensure that the work queue is not filtered. If it is, the below banner will appear:



1. To remove filter, click the 'Filtered' button and wait (~20 seconds), then 'Remove Filter' and wait again (~20 seconds)

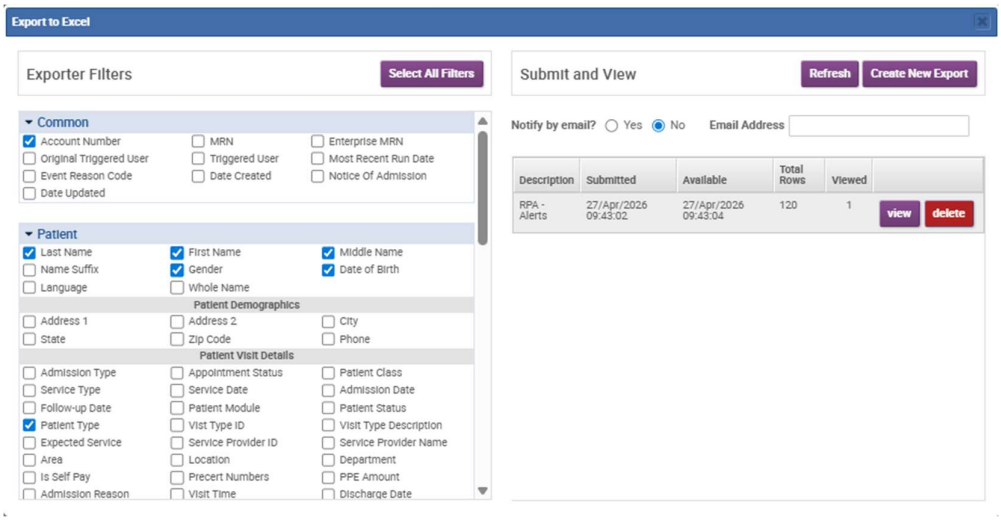


2. A pop-up will appear. Click 'OK', then resume export



e. Select the following fields:
   i. 'Common' section:
      1. Account Number
   ii. 'Patient' section:
      2. Last Name
      3. First Name
      4. Middle Name
      5. Gender
      6. Date of Birth
      7. Patient Type
      8. Service Date
   iii. 'Guarantor' section:
      9. First Name
      10. Middle Name
      11. Last Name
      12. Date Of Birth
      13. Address 1
      14. Address 2
      15. City
      16. State
      17. Zip Code
      18. Relationship
   iv. 'Insurance' section:
      14. Insurance Count (this indicates how many insurances are on file for the account)

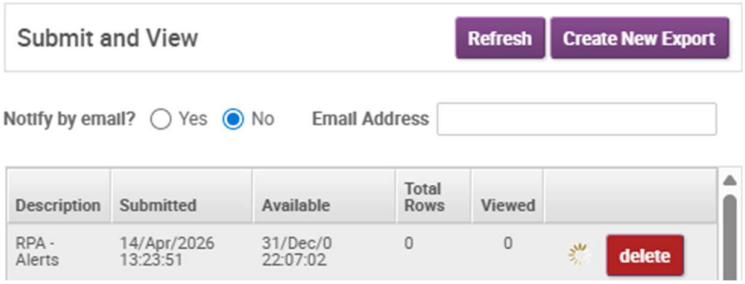
15. Primary Insurance Mnemonic
16. Primary Insurance Policy Number
17. Primary Insurance Group Number
18. Secondary Insurance Mnemonic
19. Secondary Insurance Policy Number
20. Secondary Insurance Group Number
21. Tertiary Insurance Mnemonic
22. Tertiary Insurance Policy Number
23. Tertiary Insurance Group Number
24. Quaternary Insurance Mnemonic
25. Quaternary Insurance Policy Number
26. Quaternary Insurance Group Number
27. Quinary Insurance Mnemonic
28. Quinary Insurance Policy Number
29. Quinary Insurance Group Number



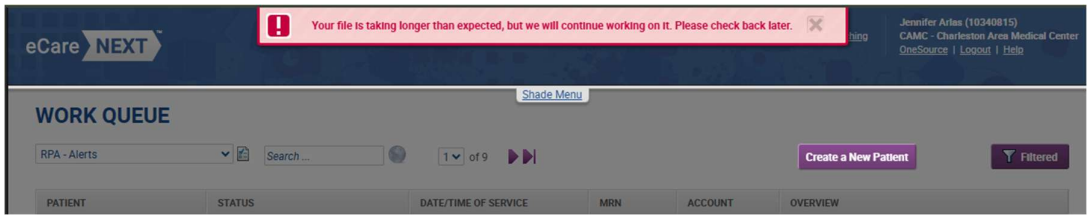
v. No selections should be made in the 'Alerts' section to ensure everything in the queue is exported.

1. If a radio button is selected in the Alerts section, click 'Select All Filters' at the top of the pop-up.
    a. The button will update to say 'Unselect All Filters'. Then click that to remove all selections, then re-select only the intended items.

f. Click 'Create New Export' button, then wait for file to load.
    i. While the report loads, there will be a spinning wheel where the 'view' button will eventually appear (left of the 'delete' button)



ii. If the report takes a while you may additionally see the below alert



g. Click 'view' button next to the newly generated report (top row, 'Viewed' value will be 0)
    i. Clicking 'view' will export the data to the local, where it will be retrieved for the next step

4. Load export data into the Orchestrator Queue
    a. See 'Export & Queue' tab of Plan Toolkit for more detail

5. For each row in the queue, run business validation: Is the patient_type in scope per the 'Patient Type Scope' tab in the Plan Toolkit?
    a. If yes, proceed to next step
    b. If no, log business exception (BE1)
        i. Reason: Patient Type is out of scope.
        ii. Post-Condition: Log BE for this account (will need to update eCare in Performer 4)

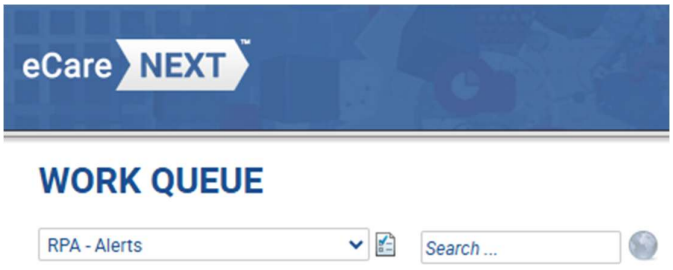
2.4.3 UiPath Performer 1 (read alerts from eCare)

1. Login to Citrix via URL (see step 2.4.2.1)

2. Login to eCare by selecting the Nextbar tile in Citrix (see step 2.4.2.2)

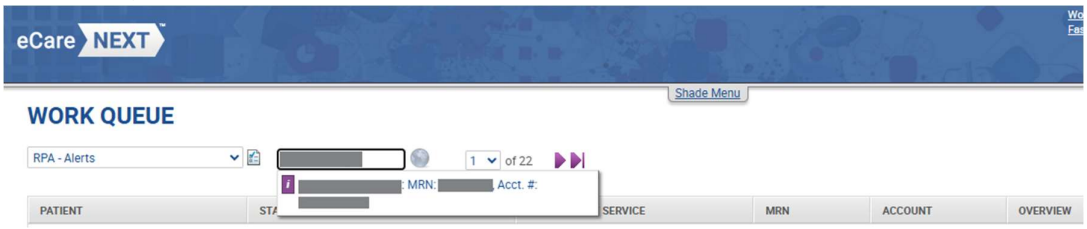
3. Retrieve data from Orchestrator Queue
    a. > 0 pending items in Orchestrator Queue?
        i. If yes, proceed to next step
        ii. If no, end Performer 1

4. Read additional data from eCare
    a. Search next 'Account Number' in the 'RPA Alerts' queue by entering it in the search bar



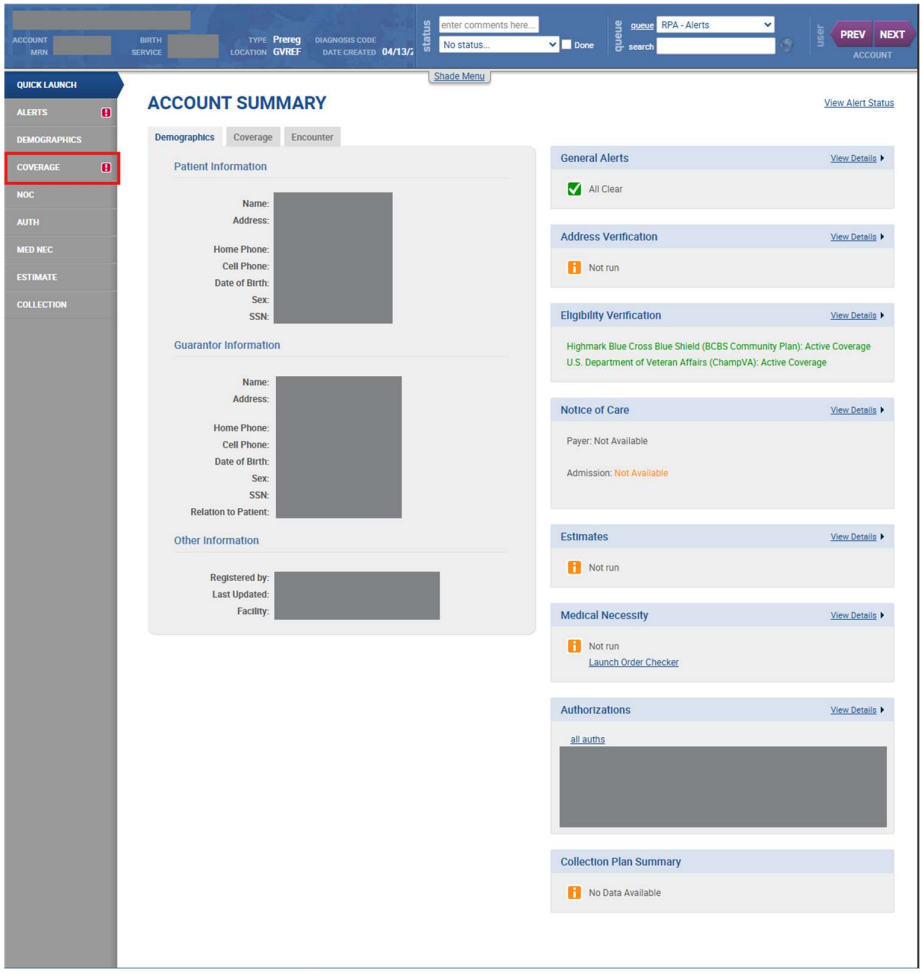
        i. If no results populate, log business exception (BE2)
            1. Reason: Account not found in eCare.
            2. Post-Condition: Log only (cannot update this account in Performer 4 if it cannot be found in eCare)
            3. Transaction Status: Failed

b. If results populate, they will be in a drop down beneath the search bar. To select the result, click on it, or utilize keyboard down arrow, then [Enter].



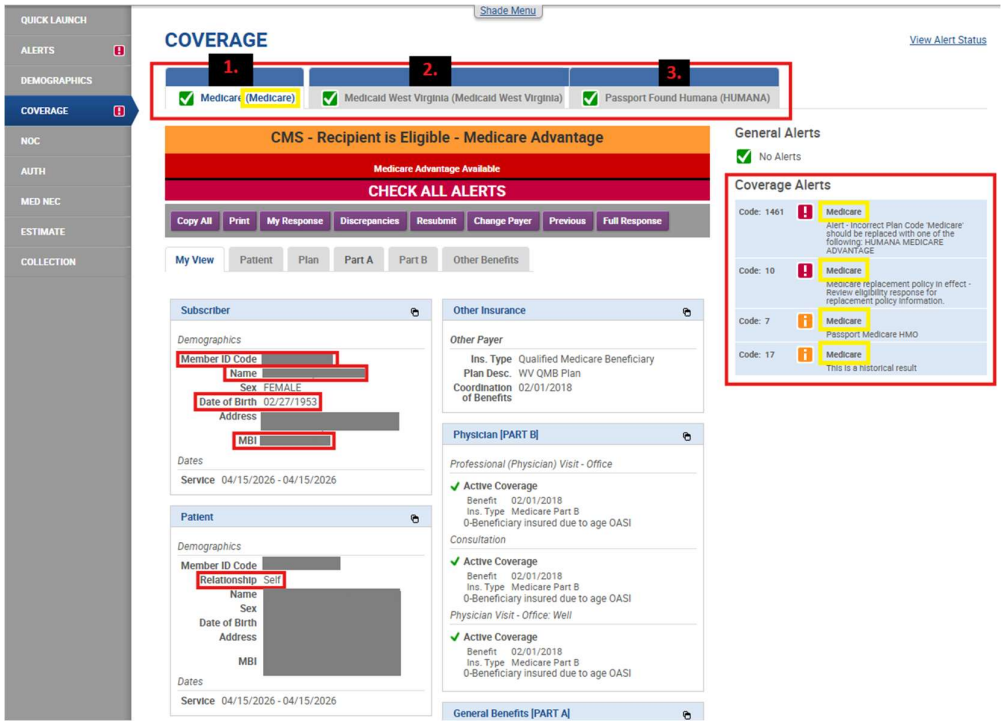
i. If there are multiple results, select the one where the “Acct. #’ in the drop down matches the Account Number from the original export

c. Click ‘COVERAGE’ on left side panel



d. Capture data ***for each insurance tab*** present. Tabs are in order of coverage (first tab = primary, etc.)

i. Capture coverage data

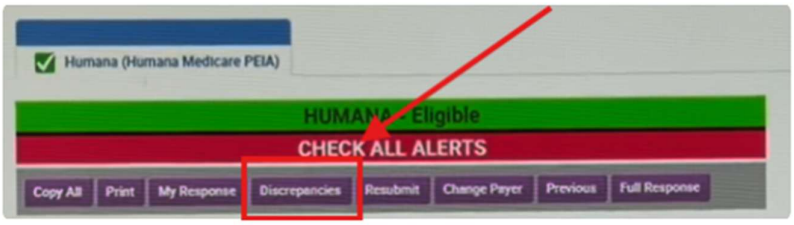


1. From 'Coverage Alerts', capture Insurance name, alert codes, & descriptions
2. From the 'Subscriber' box, capture MBI (if present)

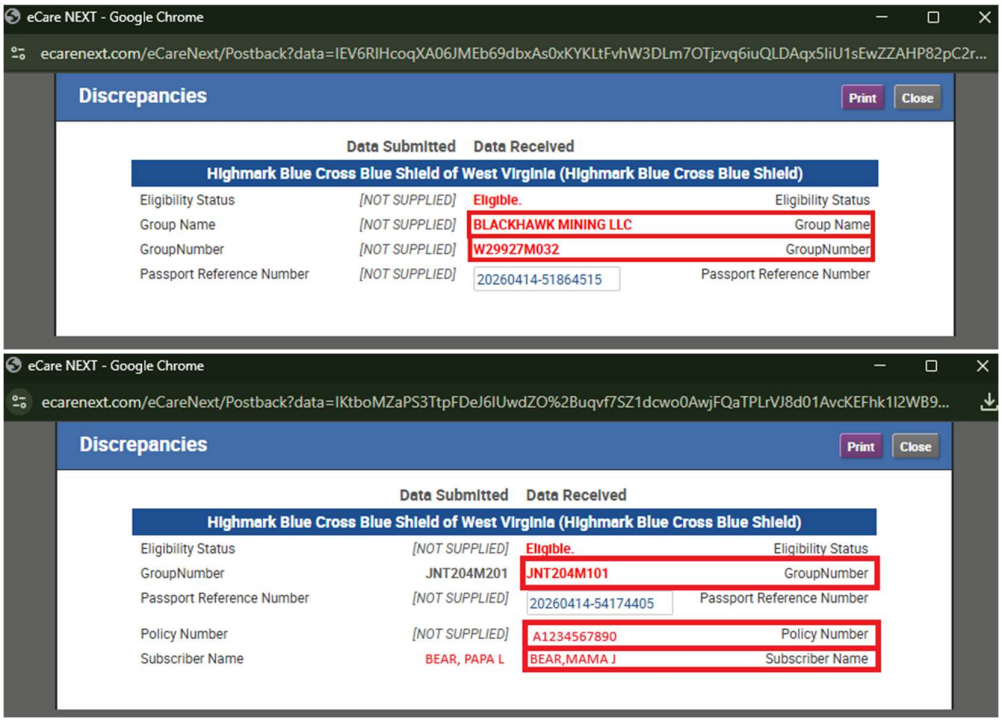
e. Add 1 row for each alert to the Orchestrator Queue

i. For each alert, log BE3 if it is out of scope (see section 2.4.1.2 for scope)
   1. Reason: Alert is not in scope.
   2. Post-Condition: Log BE for this account (will need to update eCare in Performer 4)

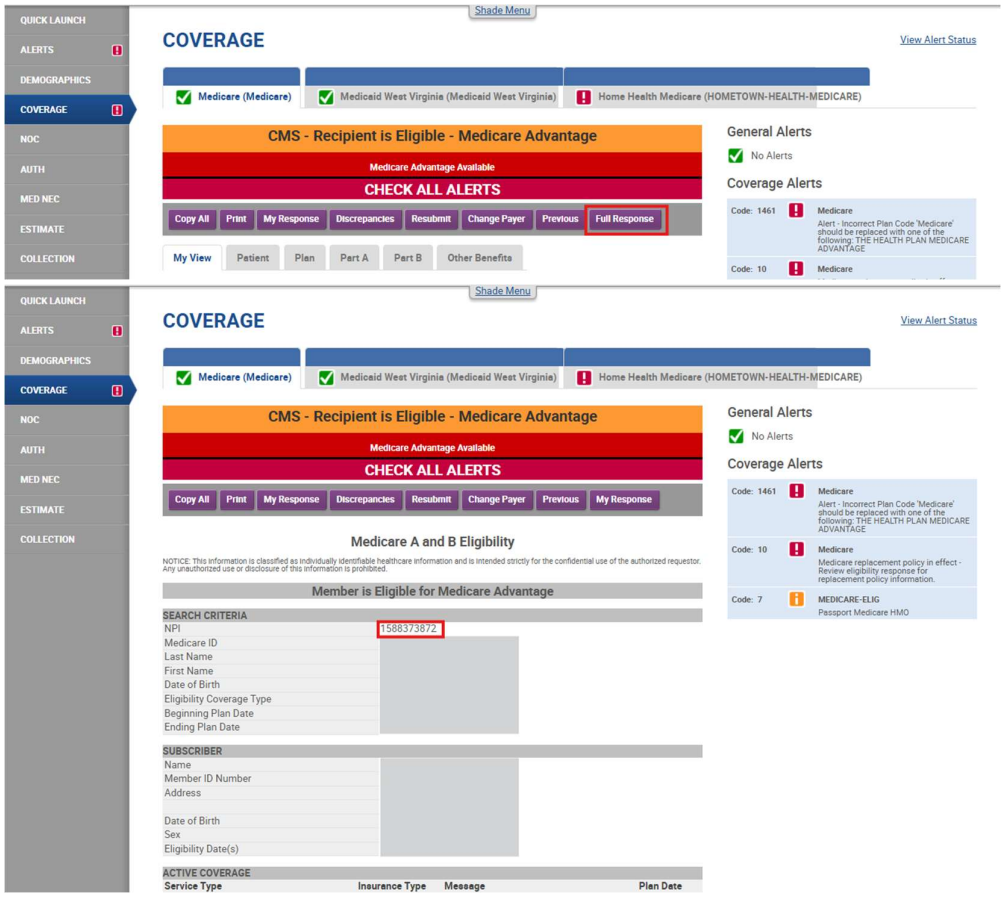
ii. If any of the alerts captured from that tab are in scope, additionally capture any of the following 'Discrepancies' present: Group Name, GroupNumber, Policy Number, Subscriber Name
   1. Click 'Discrepancies'



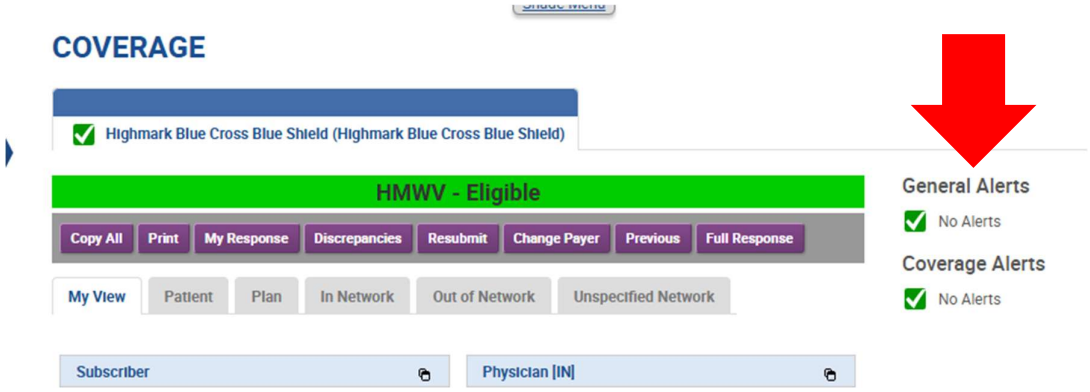
2. A separate pop-up window will appear with any combination of discrepancies



iii. If the alert is 1461, additionally scrape the NPI from the Full Responses tab



iv. Note: Below is what it will look like if there are no alerts at all

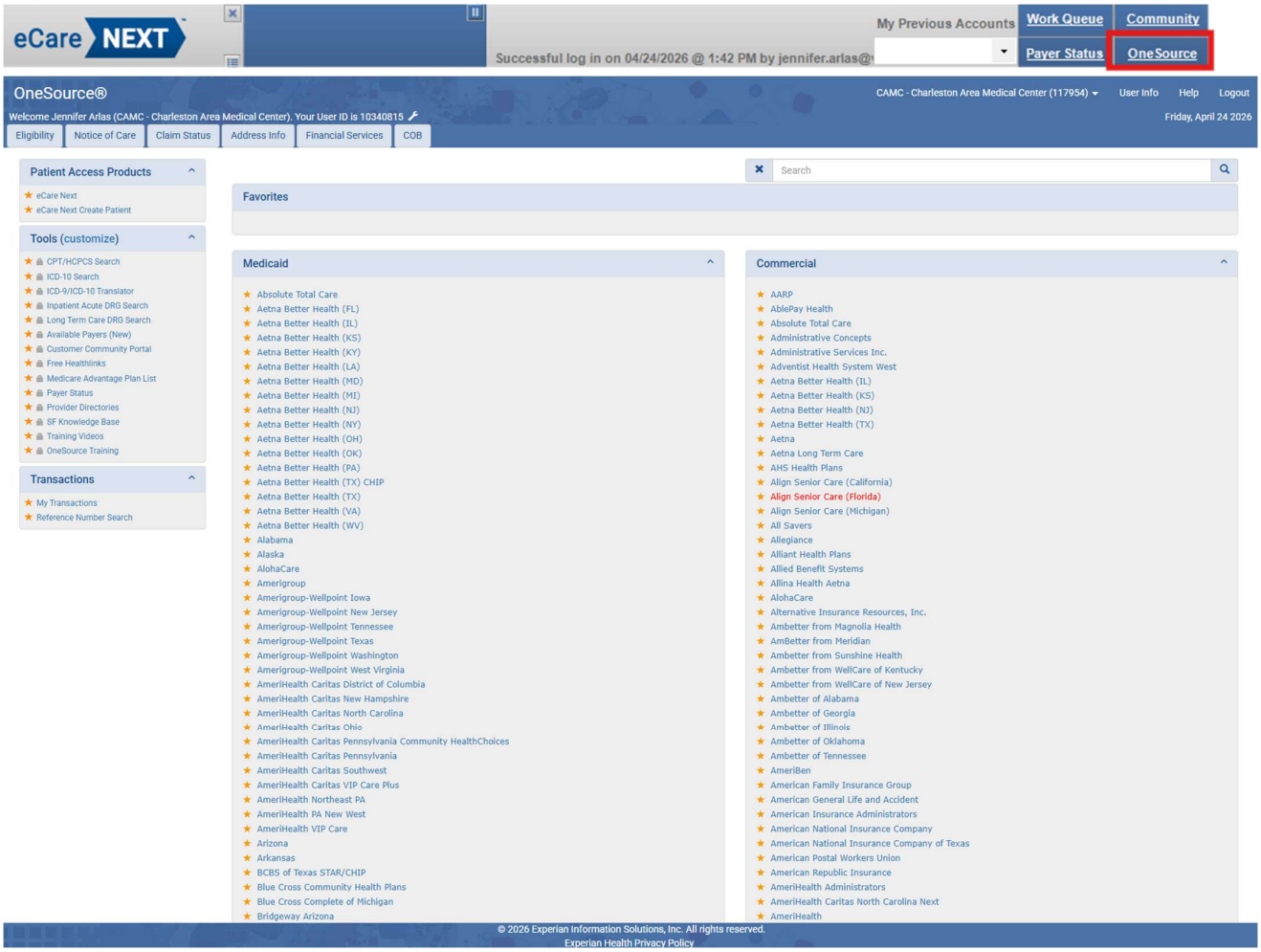


5. Update alert row(s) in Orchestrator Queue w/ additional info

2.4.5 UiPath Performer 2 (Read OneSource data, if required)

1. Login to Citrix storefront (see step 2.4.2.1)

2. Login to OneSource from Nextbar

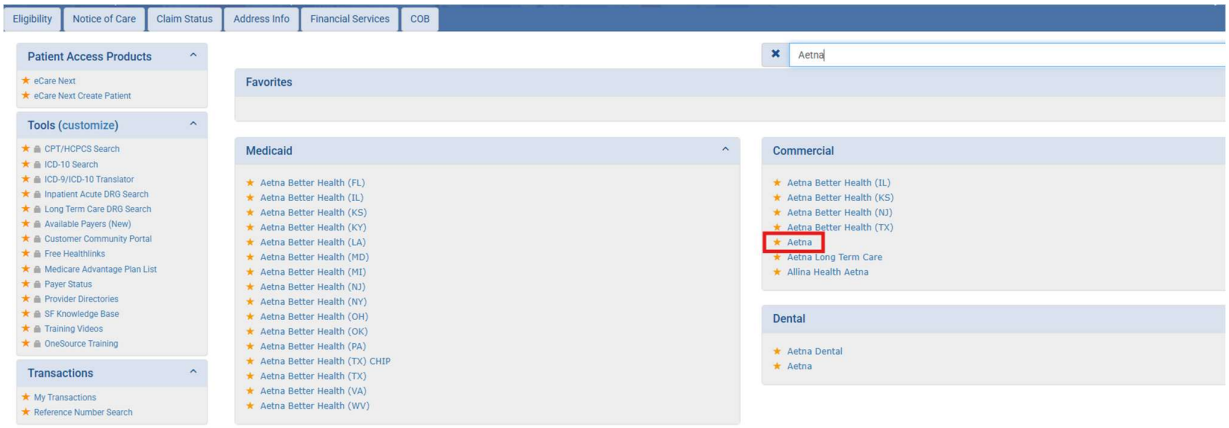


   a. A browser tab will open
   b. Is login successful?
      i. If successful, proceed to step 3
      ii. If not successful, retry (max 3 attempts)

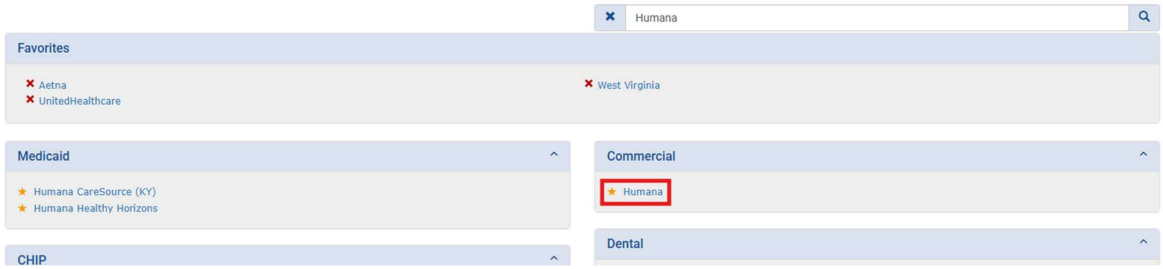
1. If retry is not successful after 3 attempts, log system exception (SE3)
    a. Reason: OneSource login failure
    b. Post-Condition: Email notification to Operations team & terminate automation
        To: RPA.Notifications@vandaliahealth.org
        Subject: Eligibility Alert Bot – Cannot login to OneSource
        Message: Please be informed that the Eligibility Alert bot was unable to login to OneSource after 3 attempts on [datetime stamp].
    c. Transaction Status: Failed

3. Retrieve data from Orchestrator Queue (1 row per alert)
    a. Filter for rows that require OneSource per “OneSource Required?’ column in the 'OneSource Crosswalk'

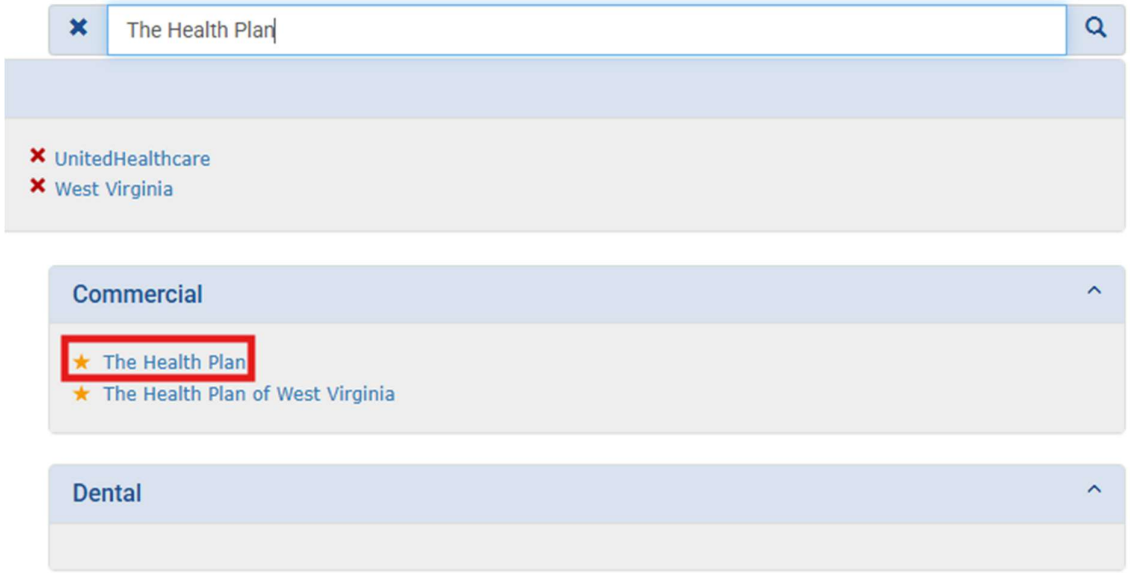
4. Search the insurance per OneSource Crosswalk
    a. Filter for the “Alert Description” column & input the value from the “OneSource Insurance Name” column into OneSource. Then click the correct insurance (see below for an example of each distinct OneSource Insurance)
    b. Aetna



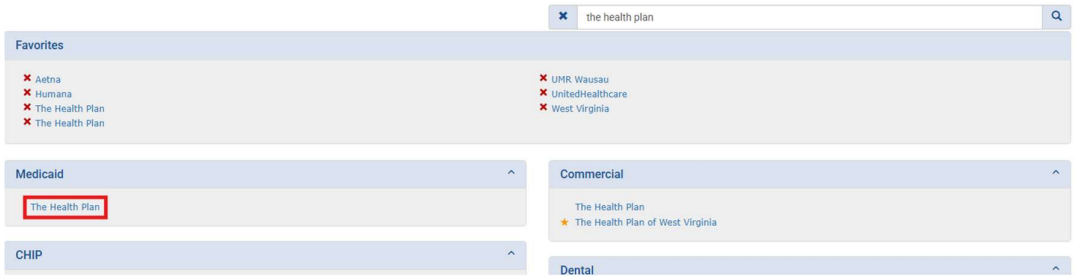
    c. Humana



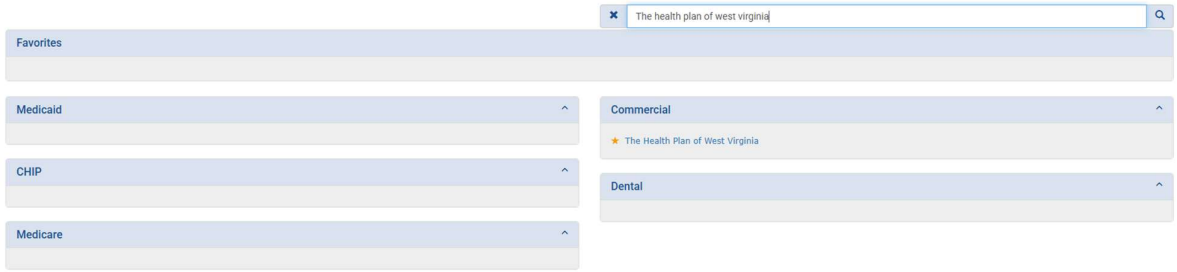
    d. The Health Plan
        i. Replacement Fin Class = Commercial or Medicare Advantage



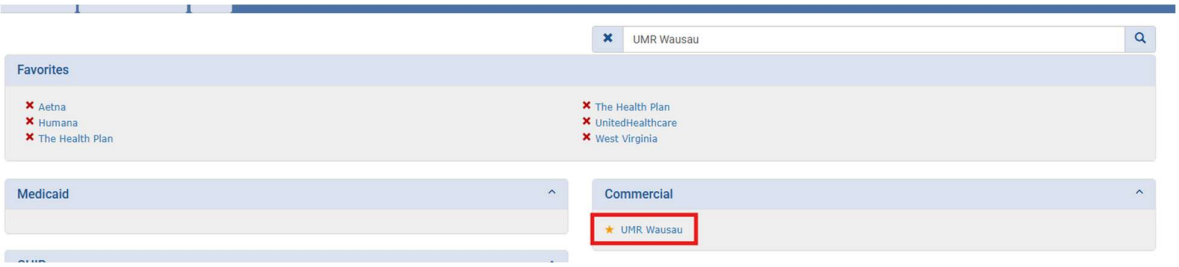
ii. Replacement Fin Class = Medicaid HMO



e. The Health Plan of West Virginia

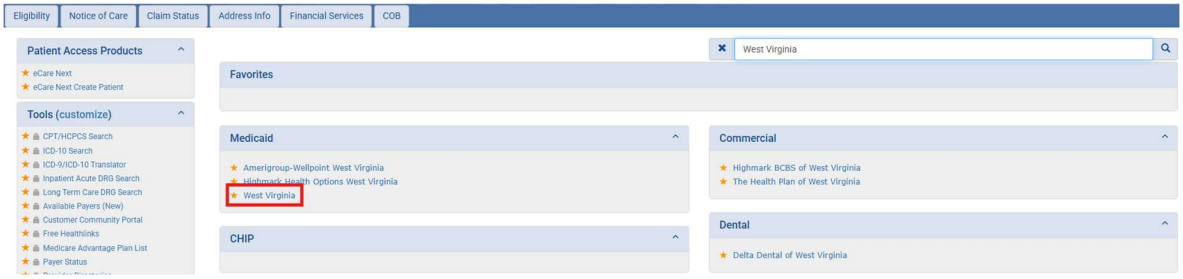


f. UMR Wausau



g. UnitedHealthcare

h. West Virginia

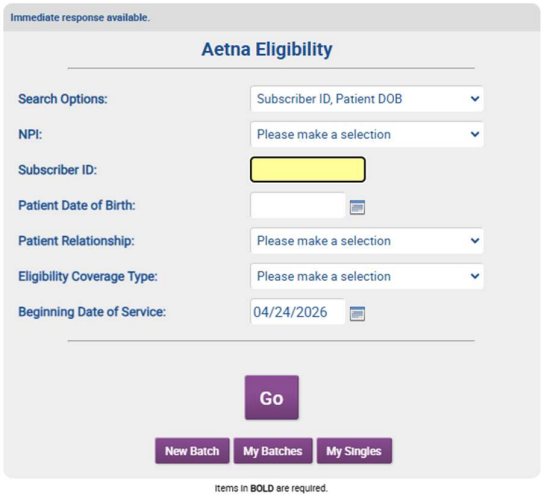


i. For each alert, log BE4 unable to find/select the proper insurance in OneSource
    i. Reason: Unable to locate insurance in OneSource.
    ii. Post-Condition: Log BE for this account (will need to update eCare in Performer 4)

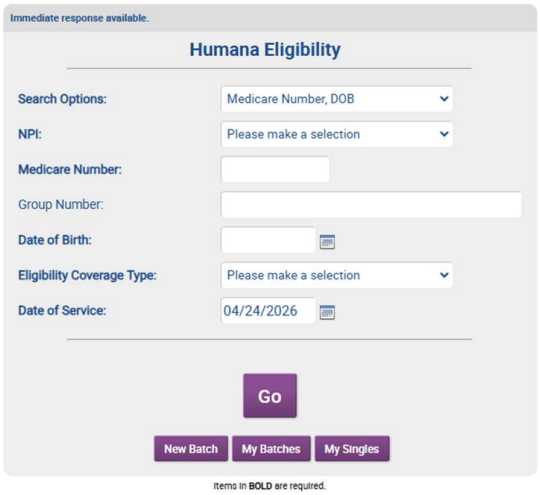
5. Search for patient
    a. OneSource inputs

i. **Search Options**: Input the value from the crosswalk from “OneSource 'Search Options'” (column K)
ii. **NPI**: Input the value read from eCare
iii. **Subscriber Name/Medicare HIC Number/Member ID/Medicare Number**: Input the policy_number exported from eCare
iv. **Patient Name/Name**: Input the patient name exported from eCare
v. **Subscriber DOB:** Input the guarantor DOB exported from eCare
vi. **Patient DOB/DOB**: Input the patient DOB exported from eCare
vii. **Eligibility Coverage Type**: “Hospital – Outpatient”
viii. **Date of Service**: Input the patient Service Date exported from eCare
ix. (see below for an example of each distinct OneSource set of ‘Search Options')

b. Aetna

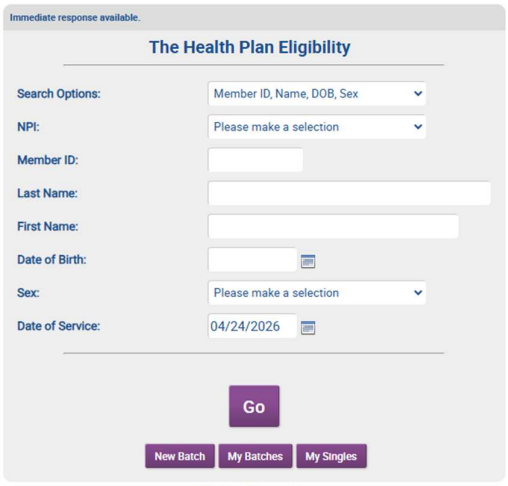


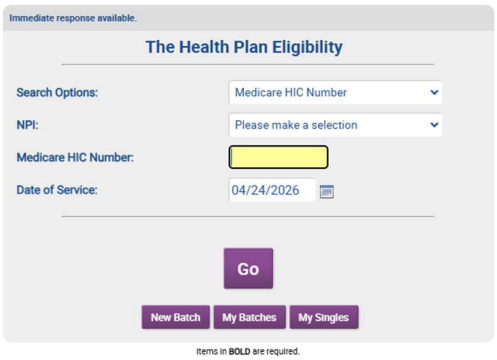
c. Humana



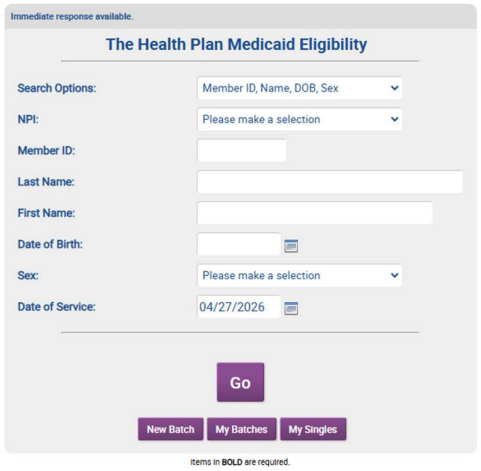
d. The Health Plan

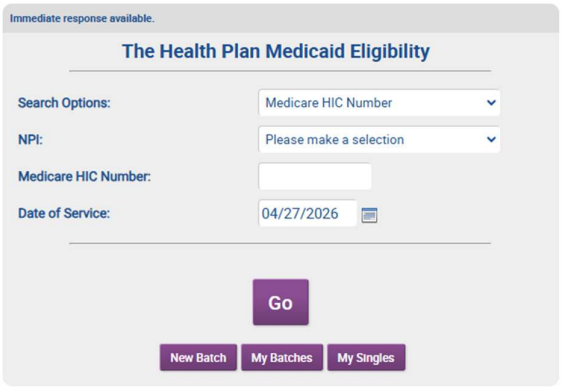
i. Replacement Fin Class = Commercial or Medicare Advantage



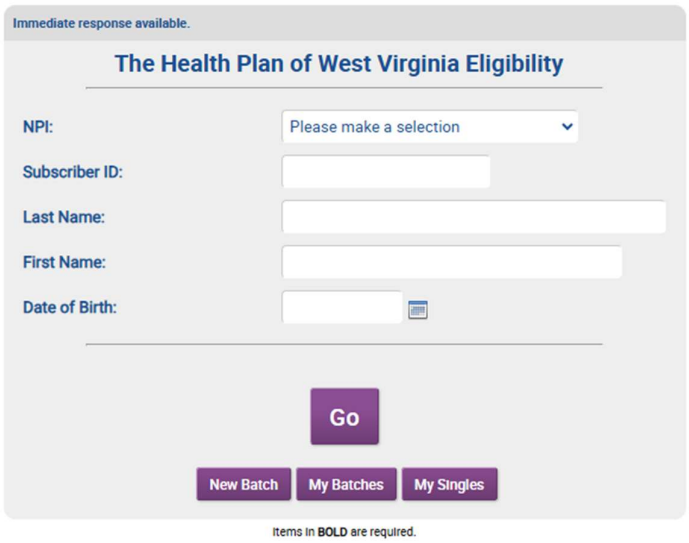


ii. Replacement Fin Class = Medicaid HMO

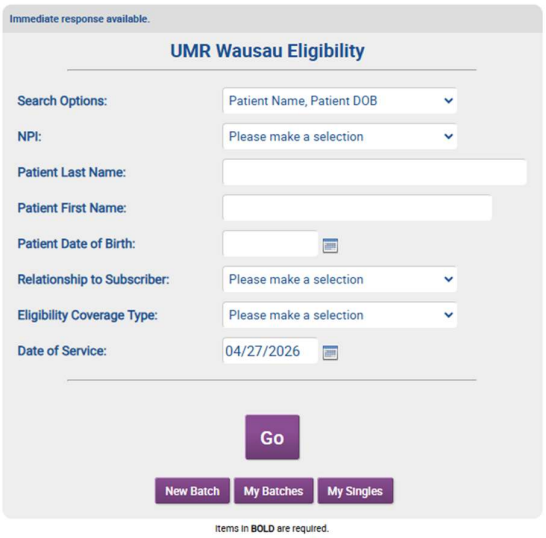




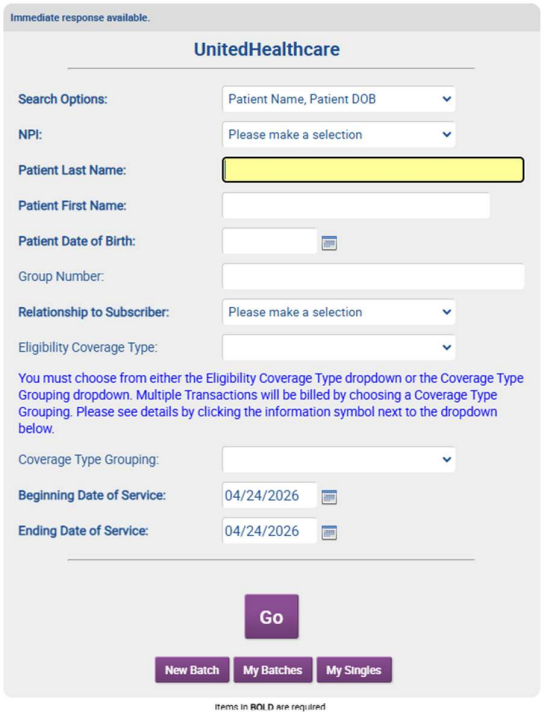
e. The Health Plan of West Virginia



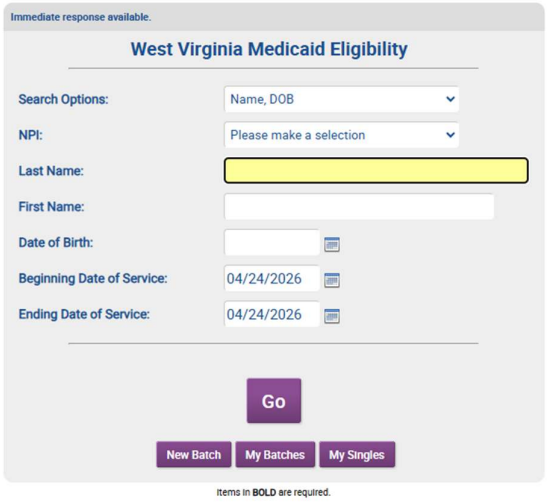
f. UMR Wausau



g. UnitedHealthcare

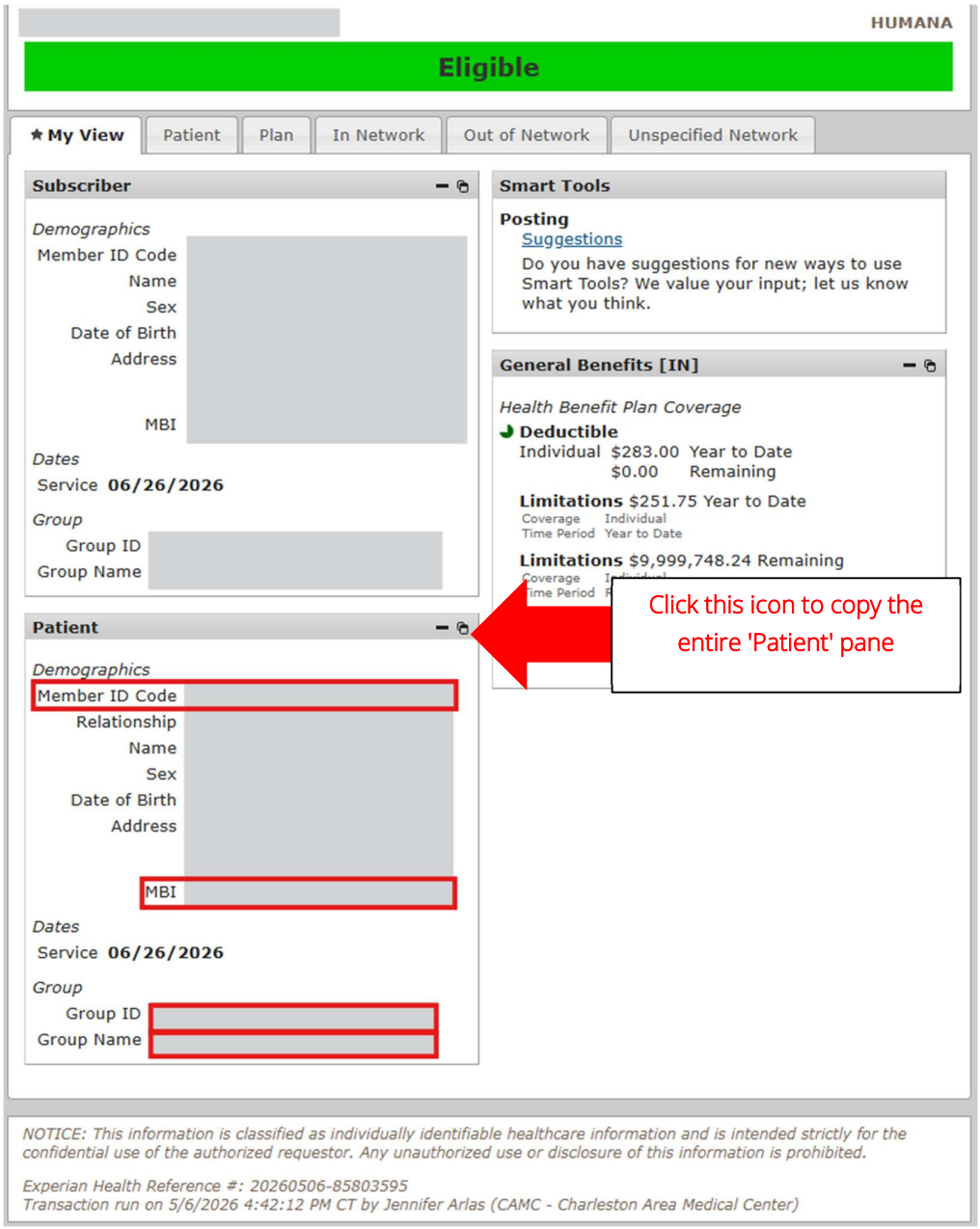


h. West Virginia



i. For each alert, log BE5 if no results are returned for the patient in OneSource
    i. Reason: Unable to locate patient in OneSource.
    ii. Post-Condition: Log BE for this account (will need to update eCare in Performer 4)

6. Read additional data from OneSource



a. Member ID Code
b. MBI (if present)
c. Group ID
d. Group Name

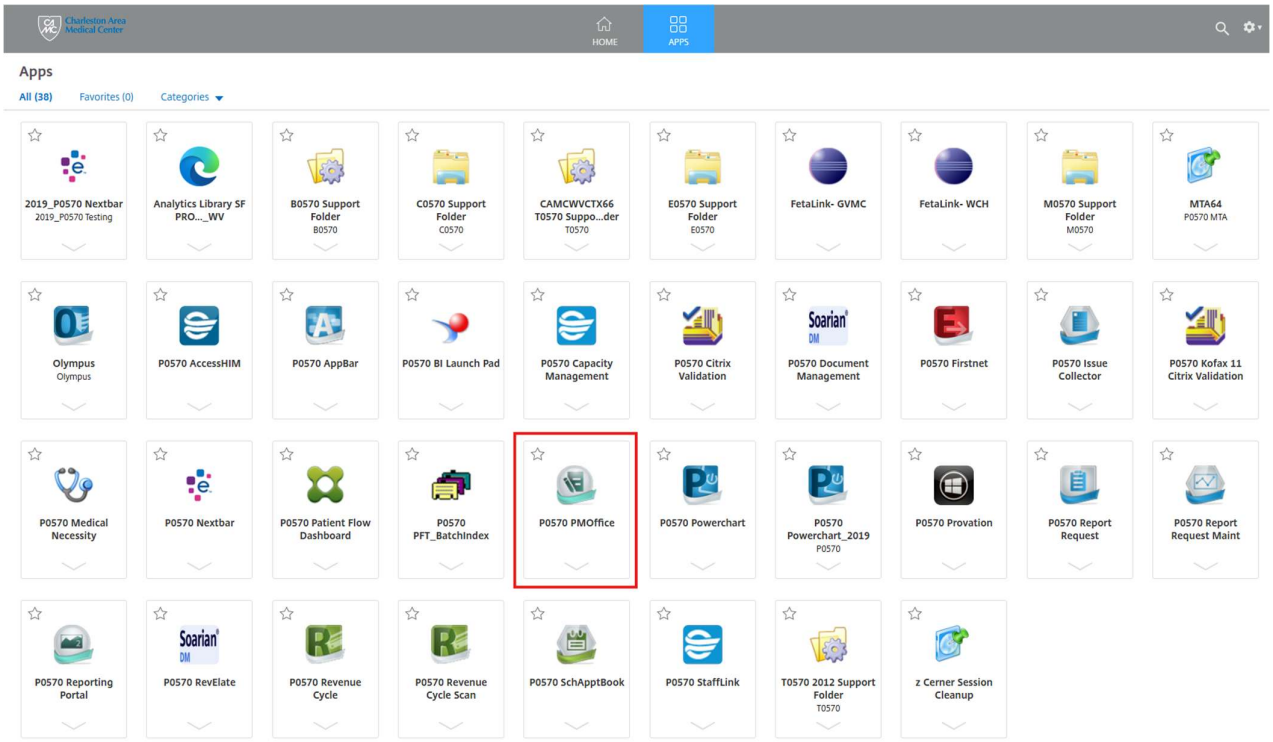
7. Update alert row(s) in Orchestrator Queue w/ the additional information

```python
##  Example model for the performer's unique unit of work (1 row per alert code)
TransactionItem:
    """Represents a single transaction row after the eCare scrape."""
    # 1. Patient Information/Subscriber Information (Repeated for every alert)
    account_number: str
    patient_last_name: str
    patient_first_name: str
    patient_gender: Optional[str]
    patient_dob: date
    patient_type: str
    service_date: date
    guarantor_last_name: str
    guarantor_first_name: str
    guarantor_middle_name: Optional[str]
    guarantor_dob: date
    guarantor_address1: Optional[str]
    guarantor_address2: Optional[str]
    guarantor_city: Optional[str]
    guarantor_state: Optional[str]
    guarantor_zip: Optional[str]
    guarantor_relationship: str

    # 2. Coverage Information (Specific to the alert, transformed from the eCare work queue export insurance fields)
    insurance_priority: int # 1=Primary, 2=Secondary, 3=Tertiary, 4=Quaternary, 5=Quinary
    insurance_mnemonic: str
    policy_number: str
    group_number: Optional[str]

    # 3. Alert Information (The 'Primary Key' of this row, scraped from eCare)
    alert_code: str
    alert_description: str
    npi: Optional[str] # only required when OneSource is required to resolve alert 1461 per OneSource Crosswalk in Plan Toolkit

    # 4. Discrepancy Information (Specific to the alert, scraped from eCare)
    discrepancies_group_name: Optional[str]
    discrepancies_group_number: Optional[str]
    discrepancies_policy_number: Optional[str]
    discrepancies_subscriber_name: Optional[str]
```

2.4.5 UiPath Performer 3 (Write updates into PMOffice)

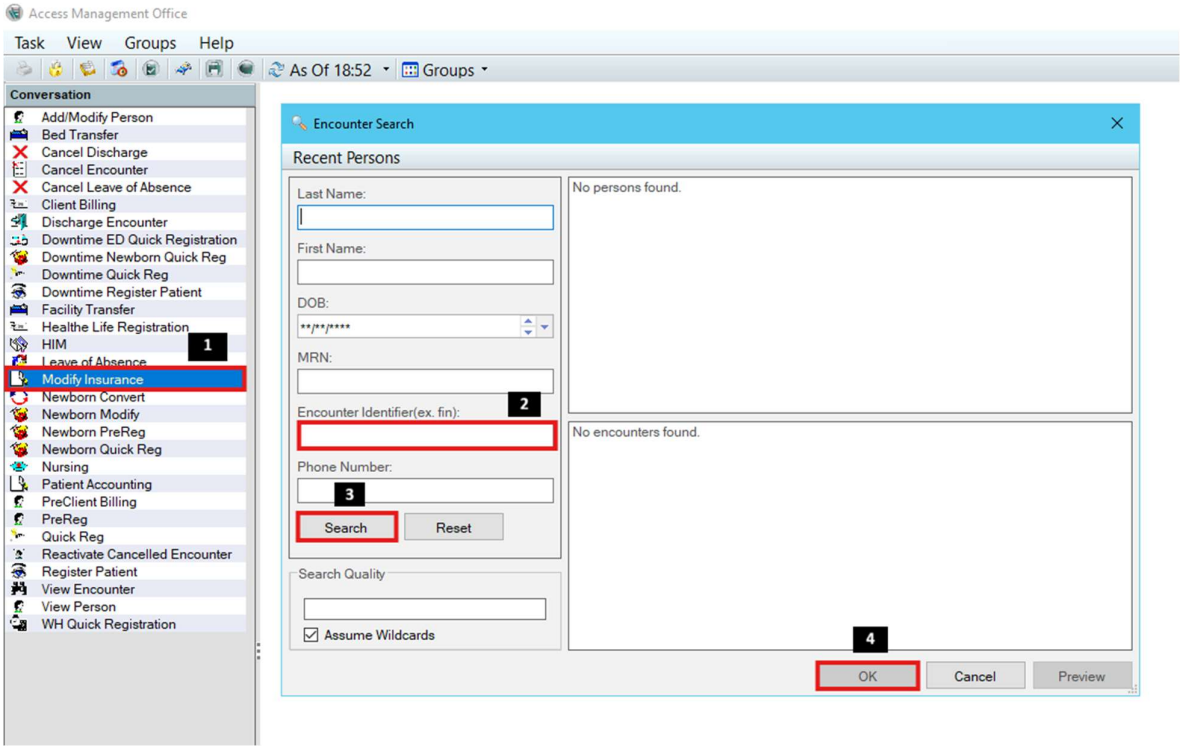
1. Login to Citrix storefront (see step 2.4.2.1)

2. Login to PM Office by selecting the tile in Citrix



3. Retrieve the next pending Transaction Item from the Orchestrator Queue

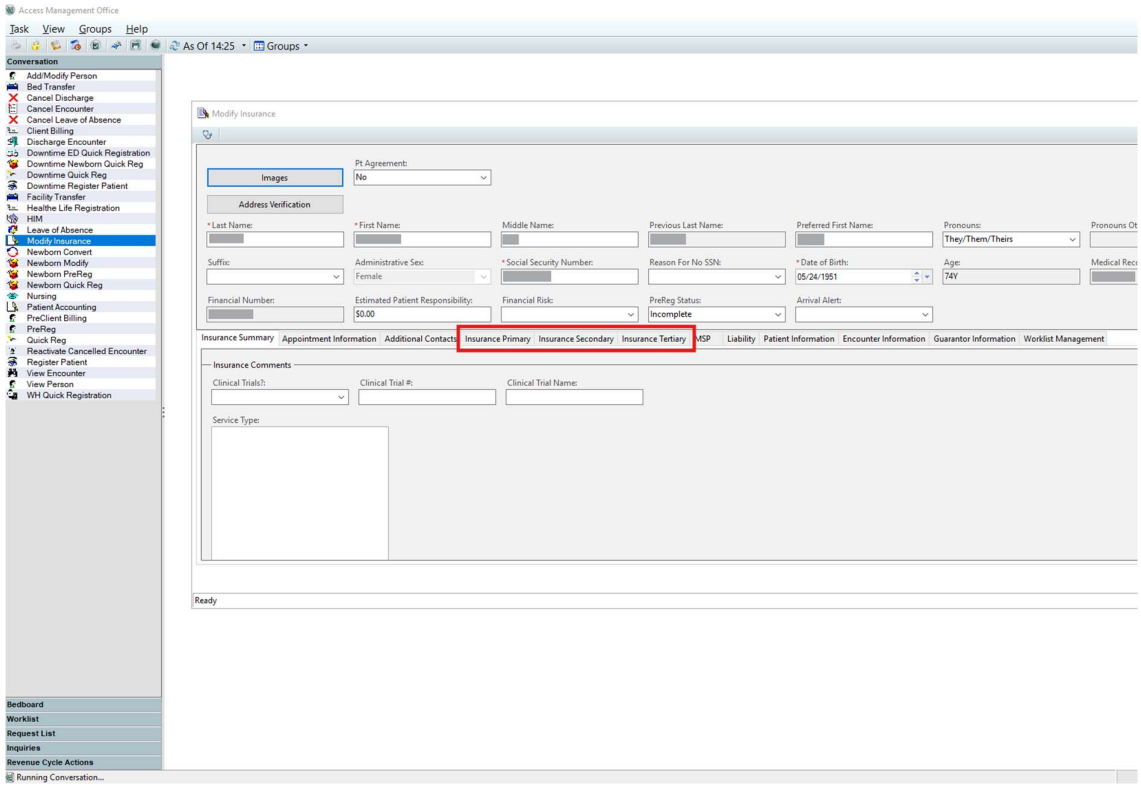
4. Search next FIN



4.1. Double click ‘Modify Insurance’ in the ‘Conversation’ sidebar
4.2. Enter FIN (i.e. “Account Number”) into 'Encounter Identifier’ field
4.3. Keyboard [enter] -OR- click ‘Search’, wait for result to populate where it says ‘No encounters found’ in screenshot above
4.4. Keyboard [enter] -OR- click ‘OK’
4.5. Results will open in a new window
    i. If no encounter is returned, log BE6
        1. Reason: FIN not found in PMOffice
        2. Post-Condition: Log BE for this account (will need to update eCare in Performer 4)
    ii. If a popup occurs
        1. AND it is accounted for in the ‘PMOffice Exceptions’ tab in the Plan Toolkit, handle per ‘Bot action(s)’ (column E)
        2. AND it is NOT account for, log SE5
            a. Reason: Unhandled popup after FIN search in PMOffice
            b. Post-Condition: Log SE for this account (will need to update eCare in Performer 4)

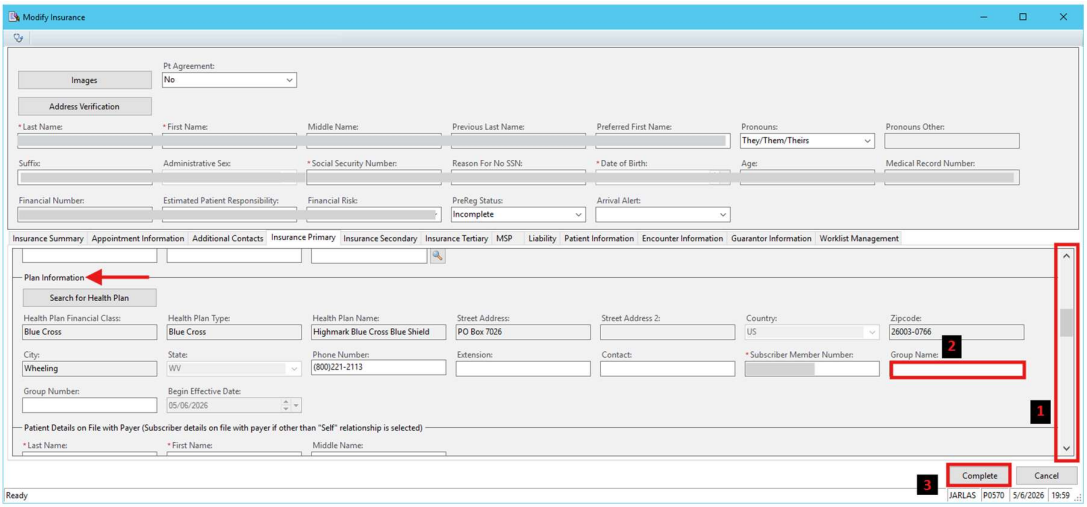
5. Update PMOffice based on alert code

5.1. Alert 29156: Missing Group Name
    i. Select the corresponding insurance tab



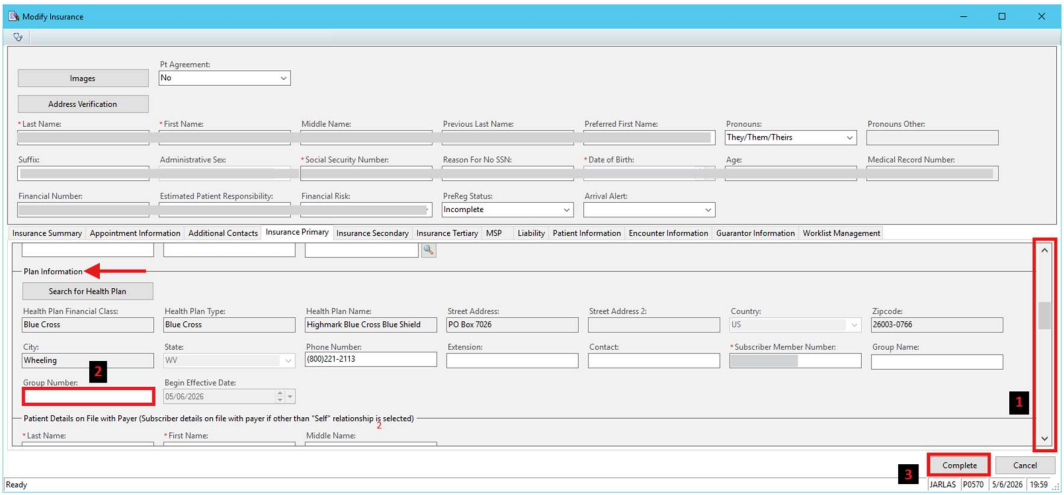
    ii. Scroll to the ‘Plan Information’ section

iii. Input the ‘Group Name’ from eCare



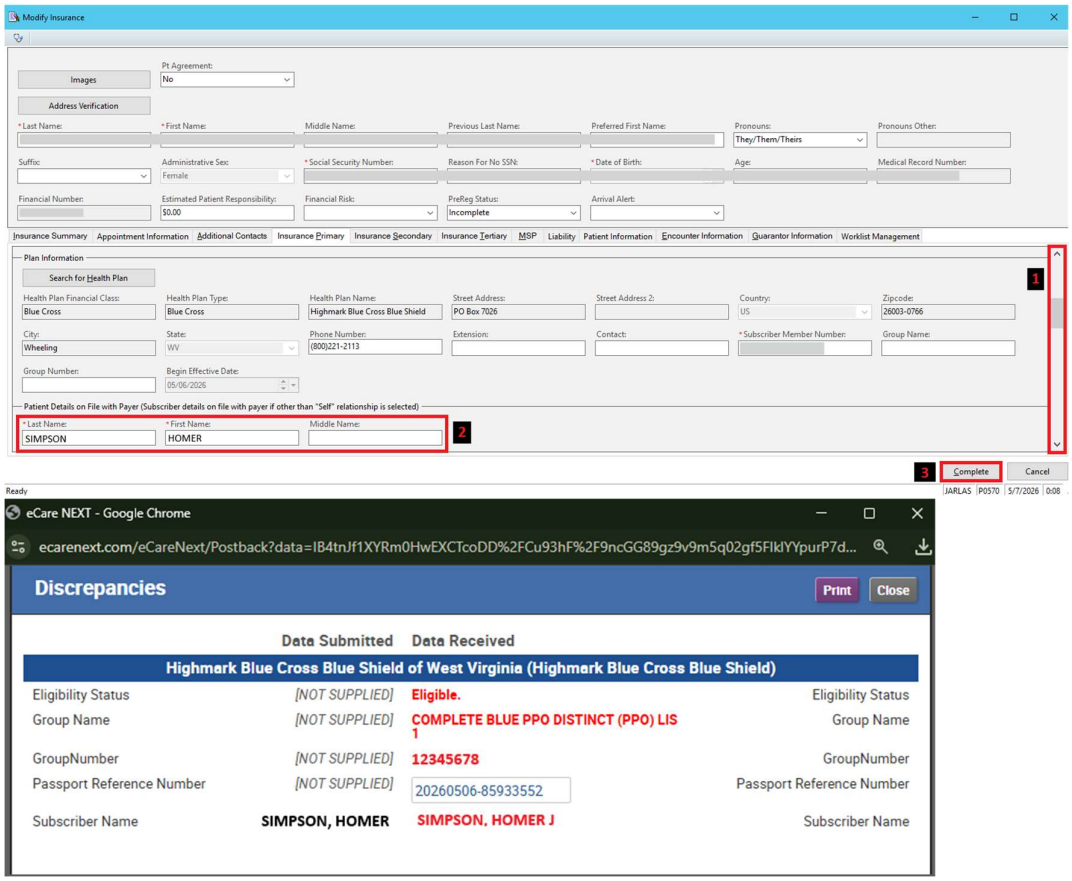
5.2. Alert 28978: Missing Group Number

i. Follow the same steps as 5.1, except update the Group Number for step iii



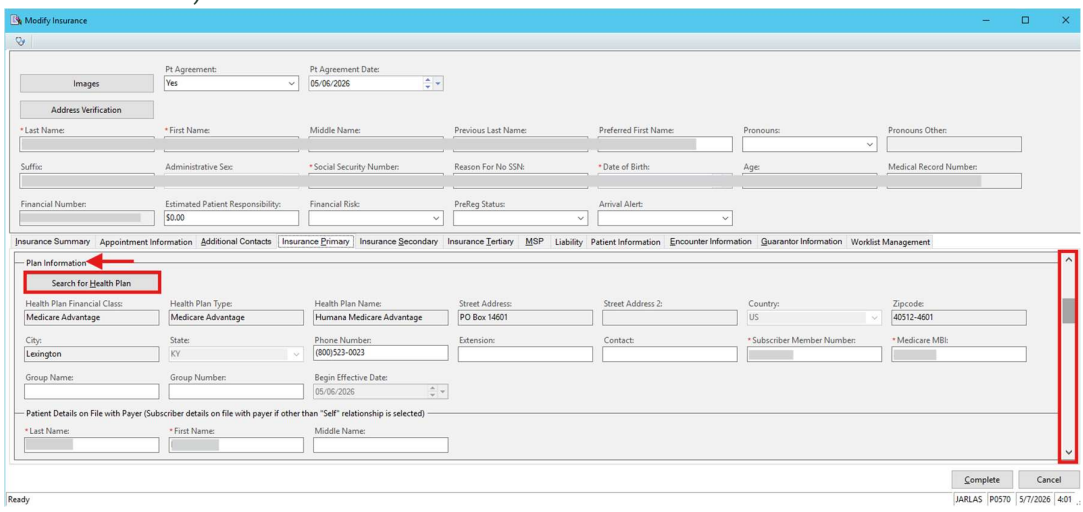
5.3. Alert 24554: Name mismatch

i. Select the corresponding insurance tab (see 5.1.i for visual)
ii. Scroll to the ‘Patient Details...’ section
iii. Parse the ‘Subscriber Name’ read from the Discrepancies in eCare and input into the ‘Last Name’, ‘First Name’, & ‘Middle Name’ fields in PM Office



5.4. Alert 1461: Incorrect plan

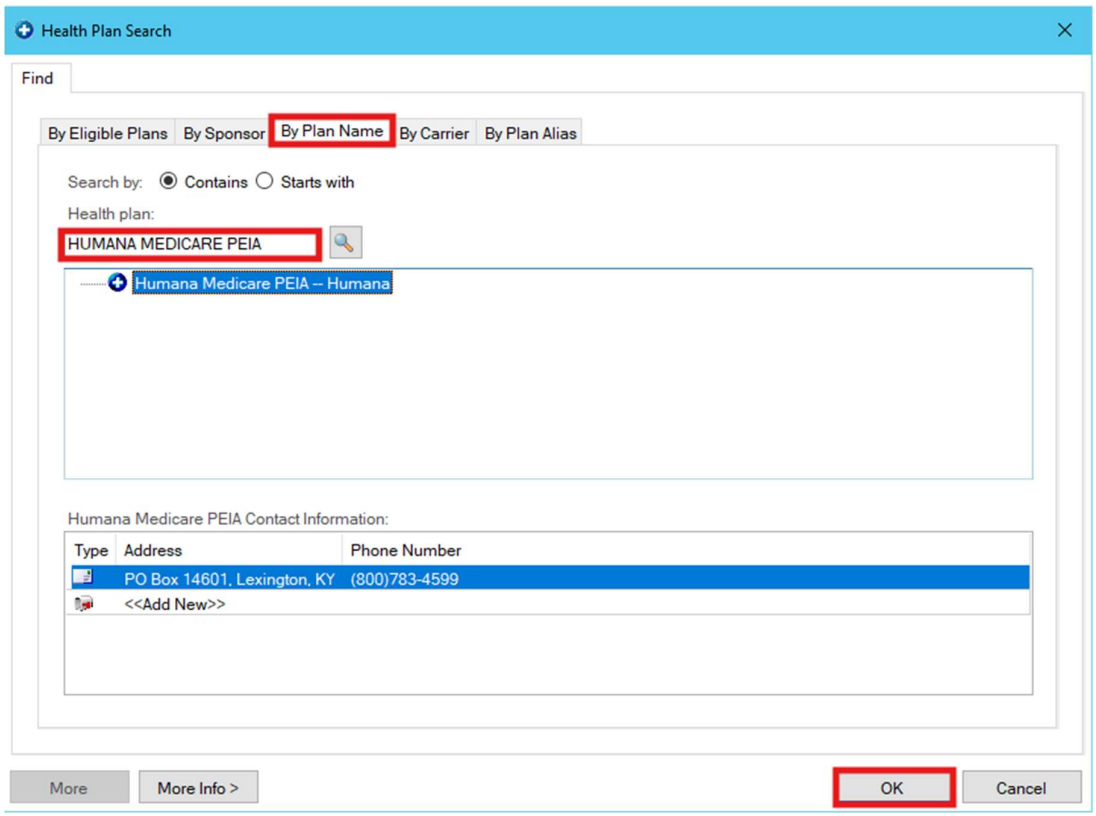
i. Select the corresponding insurance tab (see 5.1.i for visual)
ii. Scroll to the ‘Plan Information’ section and click ‘Search for Health Plan’ (or utilize keyboard shortcut ALT + H)



    1. This will open up a separate window

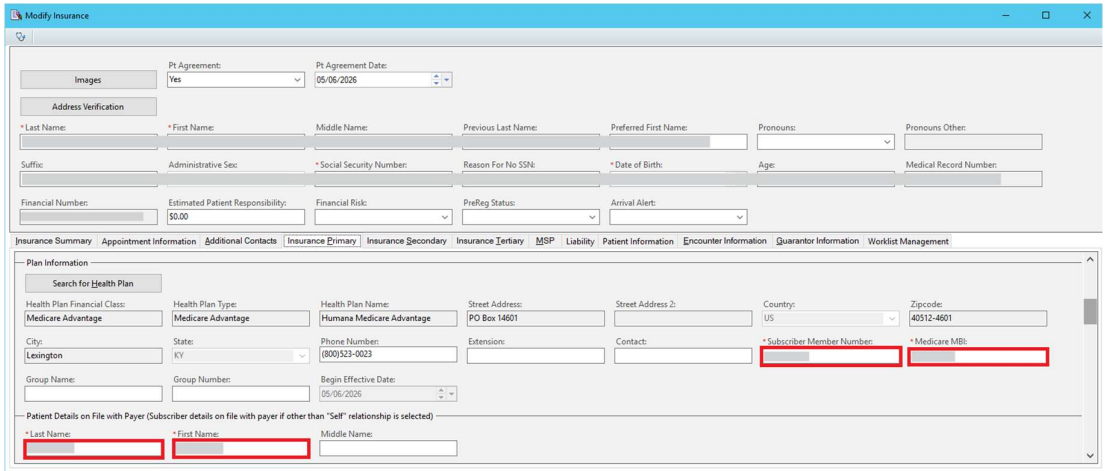
iii. Click’ ‘By Plan Name’ tab
iv. Paste the value from the ‘Replacement Plan’ column in the OneSource Crosswalk of the row with the corresponding ‘Alert Description’
v. Enter

vi. Click ‘OK’ or Enter again



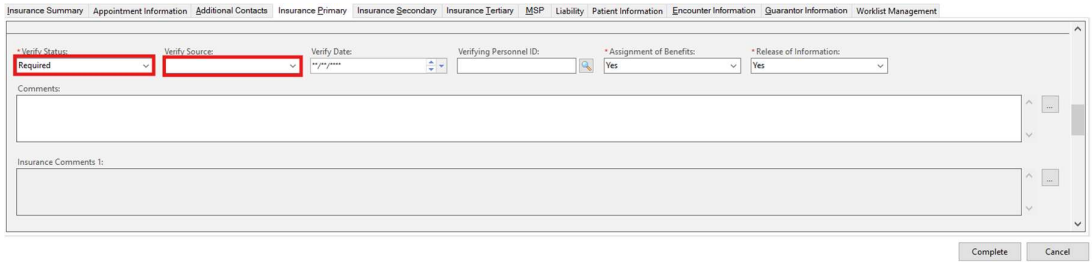
1. Information is automatically updated and the ‘Health Plan Search’ window should disappear

vii. Update the ‘Subscriber Member Number’, ‘Medicare MBI’, ‘Group Name’, & ‘Group Number’ with the Subscriber information scraped from eCare or obtained from OneSource



viii. Scroll to ‘Verify Status’ and select “Verified” from the drop down

ix. In the ‘Verify Source’ field, select “Automated” from the drop down



5.5. Save Changes + pop up handling

i. Click 'Complete'
   1. Popup identified as a BE in the 'PMOffice Exceptions' tab in the Plan Toolkit, handle per 'Bot action(s)' (column E)
      a. UiPath Result: Failure (log exception details)
   2. Popup identified in the 'PMOffice Exceptions' tab in the Plan Toolkit & is NOT a BE, handle per 'Bot action(s)' (column E)
      a. UiPath Result: Success
   3. If a popup occurs and it NOT is accounted for in the 'PMOffice Exceptions' tab in the Plan Toolkit, log SE6
      a. Reason: Unhandled popup after attempting to save in PMOffice
      b. Post-Condition: Log SE for this account (will need to update eCare in Performer 4)

ii. **Known items to follow up on during development:**
   1. There are several exceptions not yet completely outlined in the Plant Toolkit. Those details will be added as test cases are created and outstanding questions are answered.
   2. Follow up questions on the scenario where a clock icon appears in the 'Insurance Summary' tab indicating an expired plan that needs to be removed.

6. Update alert in Orchestrator queue

2.4.6 UiPath Performer 4 (Update eCare status, if required)

1. Login to Citrix via URL (see step 2.4.2.1)

2. Login to eCare by selecting the Nextbar tile in Citrix (see step 2.4.2.2)

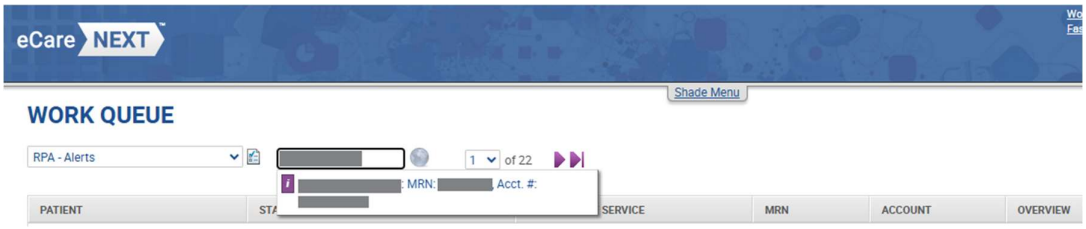
3. Export work queue file from eCare (see step 2.4.2.3)

4. Load export data into **new** eCare status Orchestrator Queue (1 row per account #)

5. Retrieve data from **original** Orchestrator Queue (1 row per alert)

6. Identify exception accounts from original queue also present in the new queue
   a. **If**: The **original** queue identified that the account number requires an eCare status update per column G in the 'Exception Handling' tab of the Plan Toolkit
      -AND-
      The account number is present in the **new** queue export (i.e. still in the eCare RPA work queue)
      i. **Then**: Proceed to next step
   b. **If**: The **original** queue identified that the account number requires an eCare status update per column G in the 'Exception Handling' tab of the Plan Toolkit
      -AND-
      The account number is **NOT** present in the **new** queue export (i.e. no longer in the eCare RPA work queue)
      i. **Then**: Skip & update logs to indicate the account no longer requires an eCare status update to 'RPA Exception'
   c. **Else**: Skip, no action or logging

7. Search ‘Account Number’ in the ‘RPA Alerts’ queue by entering it in the search bar

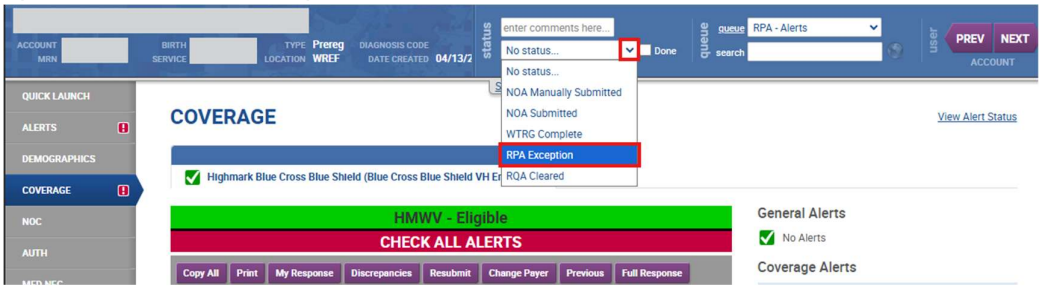


   a. If no results populate, log business exception (BE2)
      i. Reason: Account not found in eCare.
      ii. Post-Condition: Log only (cannot update this account if it cannot be found in eCare)
   b. If results populate, they will be in a drop down beneath the search bar. To select the result, click on it, or utilize keyboard down arrow, then [Enter].
      i. If there are multiple results, select the one where the “Acct. #’ in the drop down matches the Account Number from the original export

8. Read alerts to confirm the alert tied to the exception is still present (see step 2.4.3.4.d for steps to read alerts)

   a. If the alert that raised the exception is still present, proceed to next step
   b. If the alert that raise the exception is no longer present, skip & update logs to indicate the account no longer requires an eCare status update to 'RPA Exception'

9. Update status to 'RPA Exception'



10. Update the Orchestrator Queue to indicate that the eCare status was updated to 'RPA Exception' for all successful updates

   a. Note that if an account number is updated for 1 alert, it does not need to be updated for other alerts on that same account number BUT it should be logged for all relevant exceptions that also require an eCare status update
   b. Example: Account 123456789 has 3 alerts with BE1.
      i. BE1 requires an update in eCare per the Plan Toolkit ‘Exception Handling’ tab
      ii. The bot only needs to update the eCare status for account 123456789 once (because the account will fall off the work queue after that is done for the alert in row #1). So, the performer does not need to take those steps again in eCare for rows 2 & 3.
      iii. The log for rows 2 & 3 should still be updated to indicate that the performer action did occur for that account though

Row #	Account Number	Alert Code	Orchestrator Status	Performer 4 Action	Update Log
1	123456789	28978	BE1: Patient Type is out of scope	Update status to ‘RPA Exception’	BE1: Patient Type is out of scope (Updated status to ‘RPA Exception’)
2	123456789	29156	BE1: Patient Type is out of scope	None (already updated)	BE1: Patient Type is out of scope (Updated status to ‘RPA Exception’)

3	123456789	24554	BE1: Patient Type is out of scope	None (already updated)	BE1: Patient Type is out of scope (Updated status to 'RPA Exception')
4	987654321	28978	Success	None (Success)	n/a

2.5 Toolkit documentation

The table below provides a list of toolkits and links to the completed ROI, planning toolkits, and any additional design documentation

Toolkit	Link to documentation	Comments
Plan Toolkit	Vandalia_Eligibility Alerts_Plan Toolkit.xlsx	Detailed description of input and output fields, exception handling, OneSource Crosswalk, list of in scope Patient Types, handling for Cerner pop ups

2.6 Out of scope

The table below provides a list of automation scenarios or account populations that are out of scope or unobtainable

Scenario / Population	Rationale
Patient Type must be a specific value (outlined in Plan Toolkit)	The Patient Type values in scope for this automation allow insurance updates via 'Modify Insurance' in PMOffice
The alert description for alert 1461 must be listed in the 'OneSource Crosswalk' of the Plan Toolkit	The resolution of this alert requires logic to reference that crosswalk
Pop ups that are not specifically identified in the 'PMOffice Exceptions' tab of the Plan Toolkit are not in scope	Build handling for high volume pop ups and allow low volume popups to cause system exceptions. We can add handling if volume supports it.

III. APPROVAL

3.1 Approval

Upon review and approval of this Process Definition Document (PDD), I, _____ hereby approve this plan for development.

I acknowledge that while this automation will experience downtime, the ultimate responsibility for the process remains with my department. I commit to collaborating with the automation team to maintain the automation and meet our uptime goal. This commitment extends to ongoing responsibilities, including but not limited to: testing, implementing enhancements, handling break-fix scenarios, managing application upgrades, and supporting process changes or improvements as required.

3.2 Future Initiatives

Below is a list of future operational, technical, or known application changes that may impact the automation

- Alerts can exist in multiple work queues at once, so staff members may work alerts that are in scope for RPA

3.3 Downtime Plans

Below are the actions the operational team will take in the event of automation downtime

Scenario	Action (taken by operations)	Contact
Level 1 *Downtime = 1-2 days*		
Level 2 *Downtime = 2-7 days*		
Level 3 *Downtime = 7-14 days*		
Level 4 *Downtime = Indefinitely*		

3.4 Revisions

Complete the table below for any document revisions

Rev. #	Date	Section/page	Revision summary	Author
1	3/18/2026	All	Added detailed prose	Michael Bordador
	3/20/2026	All	Sent to Vandalia for review	Michael Bordador
2	3/30/2026	All	Adjusted formatting	Jenn Arlas
3	4/16/2026	II. Automation Details	Added more detail + Updated to reflect REFramework / updated design & logging	Jenn Arlas
4	Regular edits through 5/6/2026	All	Added steps for new alert 1461, revised step by step, various updates in other sections as needed	Jenn Arlas
5	5/7/2026	2.4.6	Updated performer 4 to include steps to download export a 2nd time for comparison to original export, as well as read alerts again (before making the status change in eCare).	Jenn Arlas
	5/7/2026		Sent to Vandalia for review	Jenn Arlas