Release Notes

Version 129.2

Version	Release date	Status
129.2	**August 4, 2026**	**Released**

What's in this release

This release introduces the redesigned Provider Demographic Attestation form for California, adds ophthalmology support for APC, GOM, and AVISTA, and improves guidance during authorization creation with a clearer urgent-request prompt and a more visible IPA Advise option. It also includes CAP configuration updates, a new UC Whiteboard report, and a large batch of fixes across the authorization and Member 360 experience.

New capabilities

Provider Demographic Attestation form (California)

Multi-IPA providers in California can now complete a single demographic attestation instead of a separate form per IPA. The form has been rebuilt with office-level fields (office email, languages spoken, EMR system from a supported dropdown, address typeahead), a sticky section-navigation panel that shows which sections you've reviewed, and the ability to link or unlink offices from your affiliated IPAs. The W-9 upload now only appears when the sections you're updating require it, and the modal has been visually refreshed to match the Astrana clinical design. **Rolling out for California only. Hidden for now — communications will be sent prior to launch.** (AM-5578, AM-5581, AM-5582, AM-5583, AM-5584, AM-5585, AM-5586, AM-5636, AM-5687, AM-5637, AM-5737, AM-5743, AM-5773)

Ophthalmology support (APC, GOM, AVISTA)

Eye exam CPT code validation

Ophthalmology authorizations at APC, GOM, and AVISTA now include CPT frequency checks. Providers under the referring provider's TIN see an alert when a code falls outside its frequency rule; providers under a different TIN can enter these codes without an alert. (AM-5697)

Eye exam CPT code options tightened

For ophthalmology office visits, CPT options are limited to 92012 and 92014 (Office Visit) and 92004 (Specialty Consult). Older codes that used to carry through when duplicating an auth no longer do. (AM-5761)

Ophthalmology and Retina refer-to lists in a set order

Ophthalmology and Retina refer-to provider dropdowns for APC, GOM, and AVISTA now follow a set order approved by Dr. Win. Providers outside the priority list follow in the normal sequence. (AM-5762, AM-5829)

In-app process reminder

A short reminder now appears at the CPT code selection step during auth creation for APC, AVISTA, and GOM, with a link to the ophthalmology submission process resource in the Resources tab. (AM-5842)

Authorizations

IPA Advise button is easier to spot

On Create Authorization, the "Need help choosing a provider?" option is now a clear button rather than a plain text link, so providers who want UM to help pick a provider are more likely to notice it. (AM-5499)

Urgent request prompt

When you select Urgent on a referral, a required prompt now shows the CMS definition of an urgent request. This helps ensure urgent is used appropriately and gives Provider Relations the data to educate on proper referral use. Urgent selections are also written back into EZCap. (AM-5714)

Alpha IPA — Astrana Affiliate providers at the top
On the Alpha IPA referral dropdown, two Astrana Affiliate providers now appear at the top of their specialty. All other providers follow in the normal order. (AM-5738)

CAP configuration

THMG cardiology CAP logic added
For CFC members aged 18 or older being referred to Cardiovascular Disease or Cardiology, the system now checks whether the member's PCP is on the THMG capitated PCP list. (AM-5739)

Data & sync

CCPP provider sync
Specific CCPP providers previously excluded from sync now flow through to the Provider Portal from EZCap. (AM-5579)

Authorization failure recovery
When an authorization submission fails, the system now detects it and either recovers the missing data automatically or re-creates the authorization and cancels the original with a clear note. (AM-5411)

Portal tools

Bulk Portal Invite — invalid TINs stand out
Invalid TINs during Bulk Portal Invite are now highlighted in red so they're easy to spot and fix before sending. (AM-5608)

UC Whiteboard report
A new report shows every UC Whiteboard location in your IPA and daily walk-in volume per location, so Super Admins can see whiteboard usage across the IPA. (AM-5811)

Review Center

This release wraps up the latest round of UAT feedback for Review Center. **Pilot release for selected internal Quality & Risk users only.** Still gated behind a feature flag and not visible to any external users or to internal users outside the pilot group. (AM-5474)

Bug fixes — Create Authorization from Member 360

Issue	What we fixed
Retro Request date validation and Urgent Request guidance didn't match the business rules.	Both now match the current business rules. (AM-5647)
Selecting "Need help choosing a provider?" couldn't be undone.	The selection can now be reversed cleanly. (AM-5648)
Confirming "Switch the servicing provider to IPA Advise" on an initial authorization behaved incorrectly.	The IPA Advise switch prompt now behaves correctly on initial authorizations. (AM-5649)

Print preview became unresponsive and the generated PDF was incomplete.	Print preview is responsive again and the generated PDF is complete. (AM-5650)
Navigation after authorization submission went to the wrong place.	Post-submission navigation now lands users in the correct place. (AM-5651)
Self-referral was disabled even for eligible providers.	Self-referral is now enabled for eligible providers. (AM-5688)
The Distance column was blank in the Select Servicing Provider dialog.	Distance now displays per provider. (AM-5690)
The California Children's Services (CCS) condition prompt was missing when it should have appeared.	The CCS condition prompt now displays when required. (AM-5691)
Adding more than five ICD diagnosis codes caused an error.	You can now add more than five ICD codes without hitting the error. (AM-5692)
Saving a template with an existing template name caused an error.	Saving a duplicate template name now shows a clear validation message instead. (AM-5693)
No unsaved-changes warning displayed when navigating away.	Users now see an unsaved-changes warning before leaving. (AM-5694)
An invalid "? - UNKNOWN" option appeared in the Place of Service dropdown.	That option has been removed. (AM-5699)
Clicking Step 6 or Step 7 in the step tracker scrolled the page incorrectly.	Step navigation no longer scrolls unexpectedly. (AM-5700)
The Submission screen closed automatically when switching browser tabs.	Switching tabs no longer closes the Submission screen. (AM-5701)
The Submission screen was missing patient, provider, and other details.	The Submission screen now shows the full patient, provider, and auth information. (AM-5702)
The Confirmation screen was missing attachments and displayed the section incorrectly.	Attachments now display correctly on Confirmation. (AM-5703)
Total OB authorizations couldn't be submitted (carve-out validation error).	Total OB authorizations now submit without the validation error. (AM-5722)
Selecting the same template a second time cleared the diagnosis codes.	Reselecting a template no longer clears diagnosis codes. (AM-5740)
Applying a template after selecting a provider left the first two steps blank.	Applying a template after selecting a provider now populates the first two steps correctly. (AM-5741)

Uploaded clinical documents couldn't be removed during Create Authorization.	Clinical documents can now be removed. (AM-5764)
The Self-Referral tooltip overflowed outside the page, hiding the guidance text.	The tooltip now stays within the visible area. (AM-5766)
Attachments weren't clickable on the Authorization Submission page.	Attachments open correctly when clicked. (AM-5767)
The facility list didn't load when creating a second Total OB Care authorization.	Facilities now load correctly on subsequent Total OB Care authorizations. (AM-5775)
Submit Authorization showed "Please fix the highlighted errors" even when the form was valid.	The false error message no longer displays. (AM-5777)

Bug fixes — Member 360

Issue	What we fixed
The Risk pill was cut off in the header.	The Risk pill now renders in full. (AM-5241)
Provider names overlapped in the provider dropdown on the Auths tab.	Provider names now display cleanly with proper spacing. (AM-5404)
The Diagnosis status dropdown only showed one option after adding a diagnosis.	The full list of diagnosis status options now displays after adding a diagnosis. (AM-5520)
Facilities didn't load during authorization creation from Member 360 Standalone.	Facilities now load during authorization creation from Member 360 Standalone. (AM-5556)
The Auths list was misaligned and showed "N/A Requested" instead of the request details.	The Auths list now renders correctly with the actual request details. (AM-5629)
"Print PAF" used the older version of the print service.	Print PAF now uses the current version. (AM-5630)
The Auths tab filters didn't return results; dropdowns showed "No matches" for every option.	Auths tab filters now return the expected results. (AM-5632)
Member 360 Standalone showed "Patient not found" after refresh and left users stuck.	Member 360 Standalone loads the patient correctly after refresh. (AM-5716)
Authorization details couldn't be opened in AstraConnect when signed in with a Provider Portal account.	Auth details now open in AstraConnect regardless of which account is signed in. (AM-5750)
Duplicate Authorization opened an empty page.	Duplicate Authorization now opens the source auth data correctly. (AM-5801)

Modify Authorization failed from Member 360 AstraConnect on the Auth tab.	Modify Authorization works from Member 360 AstraConnect. (AM-5803)

Bug fixes — other

Issue	What we fixed
Review Center — the IPA column was blank on newly created reviews.	IPA now populates on newly created reviews. *Pilot only — internal Quality & Risk users.* (AM-5616)
Provider Demographic Attestation — the header label was inconsistent when adding multiple offices.	Header labels stay consistent as offices are added. (AM-5704)
Provider Demographic Attestation — the review status wasn't updated after confirming a reset.	Reset attestation now updates the review status correctly. (AM-5705)
AWV Chase List failed to load patient data on certain searches.	AWV Chase List now loads patient data reliably. (AM-5635)
Authorization Provider Lookup showed the signed-in user's IPA providers instead of the selected member's IPA providers.	Provider lookup now uses the selected member's IPA. (AM-5696)
The IPA Affiliations section didn't display for providers with a single IPA affiliation.	IPA Affiliations now displays for single-IPA providers too. (AM-5724)
ICD diagnosis codes didn't display after applying an Ophthalmology Office Visit template, even though the code was submitted with the auth.	ICD codes now display when the template is applied, and the Diagnosis step reflects the correct state. (AM-5772)
Eligibility — the Member Report, Member360, and exported PDFs showed different eligibility statuses for the same member.	All three now show the same eligibility status. (AM-5810)

Questions or feedback?

Reach out to the product team, or use the in-app Feedback link in the footer to send a note directly.