

# Change Order Process

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Change orders are submitted to Novari by the [Support Coordinator](#) within your organization . It is important to collaborate internally on the details of the proposed change order request to ensure all potential workflow impacts are considered.

## Change Order Types

**eRequest or MIRM Configuration or Workflow Changes** - Specific configuration or changes within your work relating to the eRequest and MIRM products. This form helps in discerning specific questions to enable us to process your request efficiently.

**Feature Request** - New product requests that are not modifications of existing functionality.

**Product Feedback/Suggestions** - Feedback and suggestions that may be considered for future enhancements for the products improvement for all clients. Novari maintains a product feedback log and is reviewed and scheduled quarterly. The log is assessed and prioritized according to product/company needs, security and privacy impacts, and the needs of all clients.

**Project Management** - Related to Go live date changes.

**Purchase Additional Product Licenses** - Related to additional Care Venue or Provide Licenses.

**Roadmap Item** - A roadmap item is a feature that our team has deemed to be a positive impact the entire product platform and multiple organization workflows. A roadmap item is added to our board as a prospective enhancement feature to add to the platform. Novari maintains a product roadmap item log and is reviewed and scheduled quarterly. The log is assessed and prioritized according to product/company needs, security and privacy impacts, and the needs of all clients.

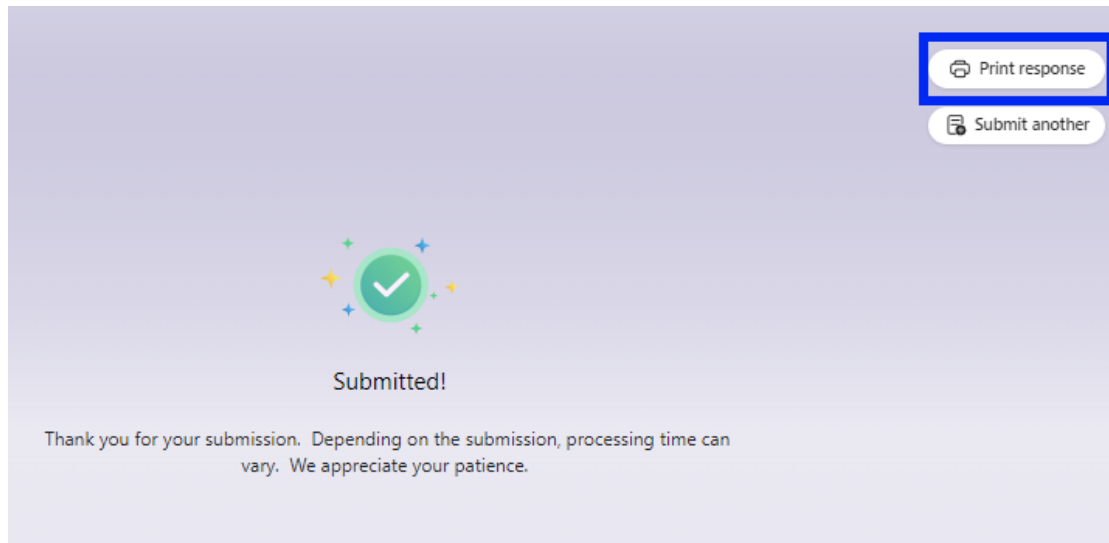
To assist you effectively, we request that you provide us with as much detailed information as possible. To ensure our team can effectively evaluate and process your request, please ensure that the information provided is detail specific and comprehensive.

This information, where applicable, should include:

- Clear and comprehensive description of the proposed change.
- Specific aspects of the modifications including design and/or specifications.
- If you think it would be beneficial to include a screenshot for your change request, please email your screenshots to [changeorders@novarihealth.com](mailto:changeorders@novarihealth.com).
- Detailed description of the current workflow verses the workflow you are requesting.
- Reason behind the proposed change. This will assist us in understanding the objectives, benefits, or challenges that have prompted the request.

## [Novari Health Change Order Request Form](#)

Once the form has been completed, we recommend saving a PDF copy of your request for your organization's records (*see image below*). You will also receive an automated email with your request information and a change order request number, CO-XXXX-XXXX-XX-XX. If screenshots are required or you would like to begin communication, we recommend you reply all to the automatic email.



Once a change order request has been submitted, the team will perform an initial review to ensure your request has all the necessary information and is assigned to the appropriate resource for the next steps. The team is required to investigate the request to ensure feasibility, estimated development and implementation efforts and assess potential risks to the product, workflow, or other clients.

Investigations can be quite timely as there are many factors that are considered and analyzed during this step.

Once the investigation has been completed and the request is deemed technically feasible, we will provide your organization with an acceptance criteria to review and approve. The acceptance criteria's are designed to ensure that both organizations have clear visibility into the proposed work for the change request. With approval, the request will be assigned to the Novari Health Finance team to complete and provide your organization with an estimate.

Once your organization has reviewed and approved the estimate, a purchase order will be required. Please note that pricing is valid for 90 days from the effective date of the quote. We kindly ask that any document regarding your change order request, including the return of the signed change order document and purchase order, should be sent to on an existing change order communication or to [changeorders@novarihealth.com](mailto:changeorders@novarihealth.com). With the PO, our team will schedule the work into an upcoming iteration. Once a timeline has been established it will be communicated to you through an open support ticket and/or bi-weekly release notes.

Should you have any questions or wish for an update on your request, please do not hesitate to reach out to us at any time at [changeorders@novarihealth.com](mailto:changeorders@novarihealth.com)