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Solutions for the Underserved
and Chronically Ill.

Provider Portal Participant Guide

Corporate Clinical Systems Training Department

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Next Review Date:	05/01/2022
Review Cycle:	Annually

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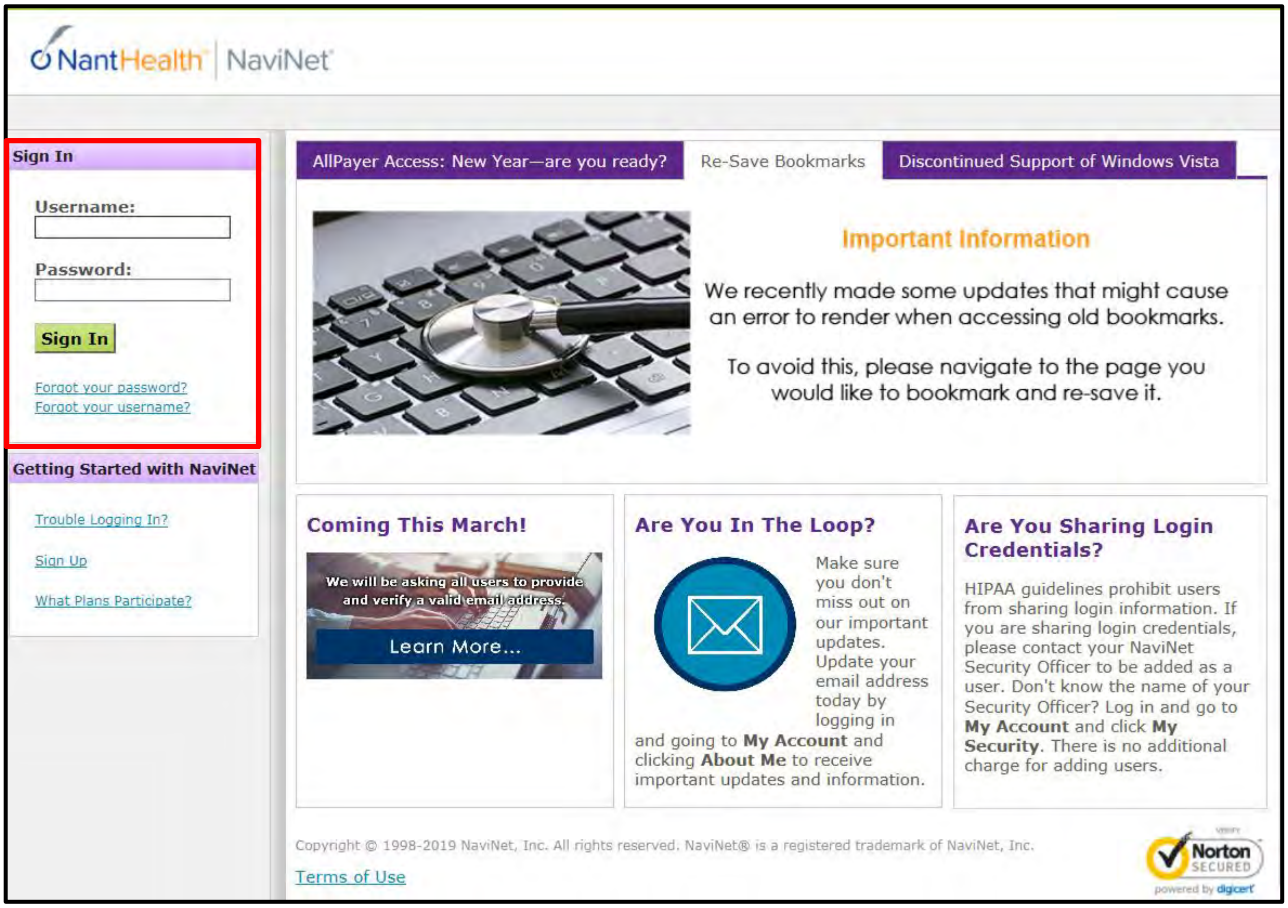
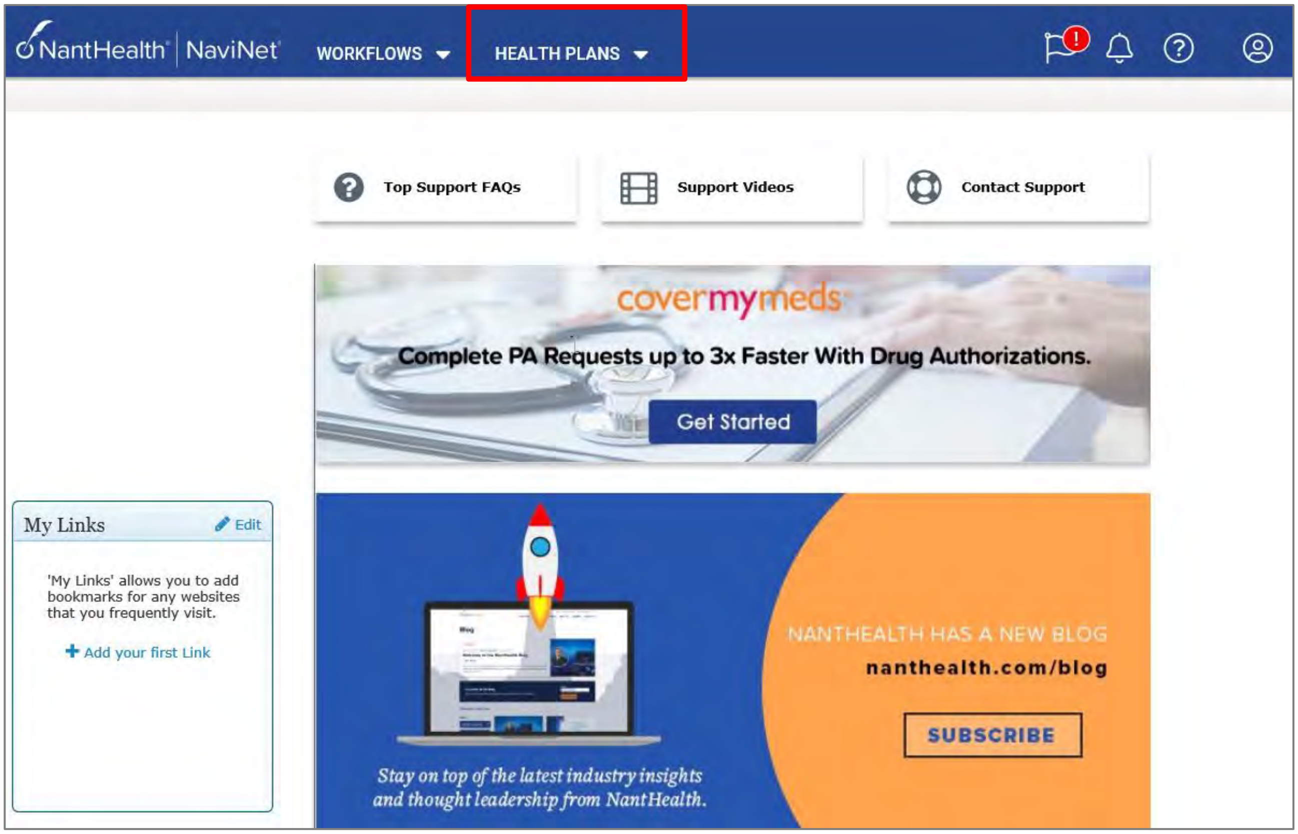
1 LOGGING IN TO THE PROVIDER PORTAL

Logging in to Provider Portal



Step	Action
1.	Access NaviNet using the following address: https://navinet.navimedix.com
2.	Enter your **Username**
3.	Enter your **Password**
4.	Click the **Sign In** button ***Result****: The NaviNet Home screen will be displayed*

Logging in to Provider Portal



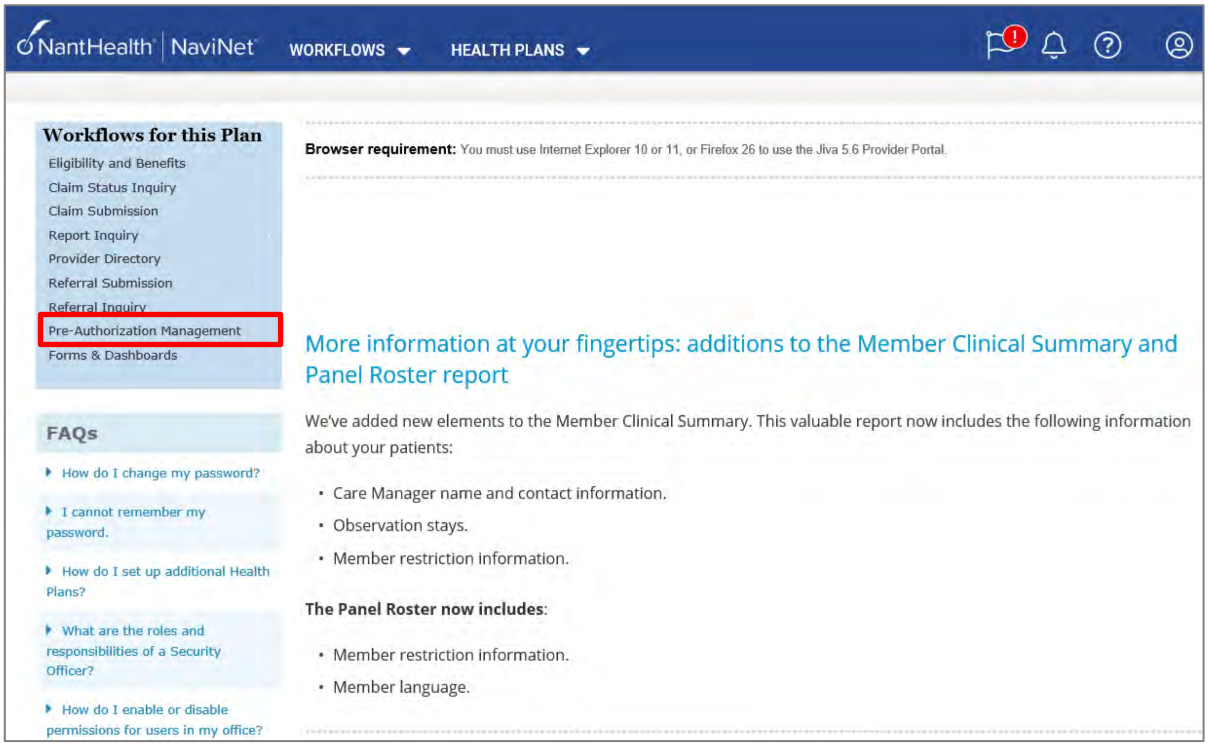
The NaviNet Home Page is not Health Plan-specific.

To locate your Health Plan:

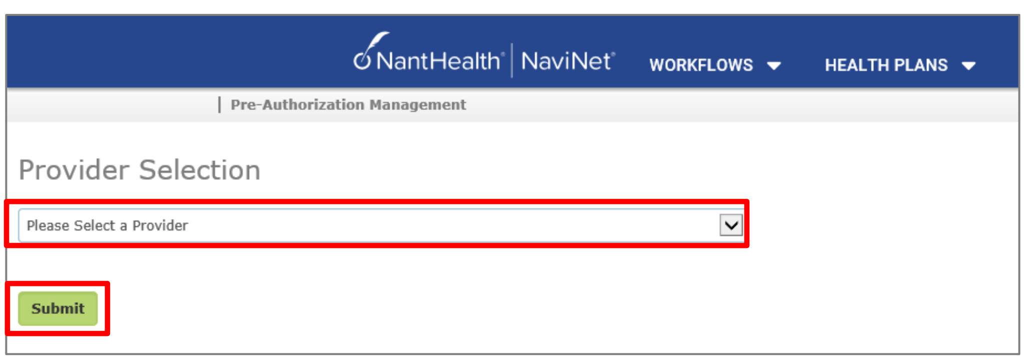
Step	Action
1.	Click on **HEALTHPLANS** in the top menu
2.	Select the appropriate **health plan** from the drop down list ***Result:*** *The Health Plan-specific Home page will display*

Logging in to Provider Portal

The general layout of the Health Plan Home page will be similar across all Health Plans. However, each Health Plan may have customized items on their home page, such as links available in the **Workflows for the Plan** section.



To access the Provider Portal:

Step	Action
1.	Click on the **Pre-Authorization Management** link ***Result:*** *JIVA/Provider Portal will open** ***NOTE:** *Based on the Plan, there may be an additional step prior to the Provider Portal opening. The* ***Provider Selection*** *page may display. If it does, you would select your Provider form the drop-down menu and click on the* ***Submit*** *button. The Provider Portal will then open.* 

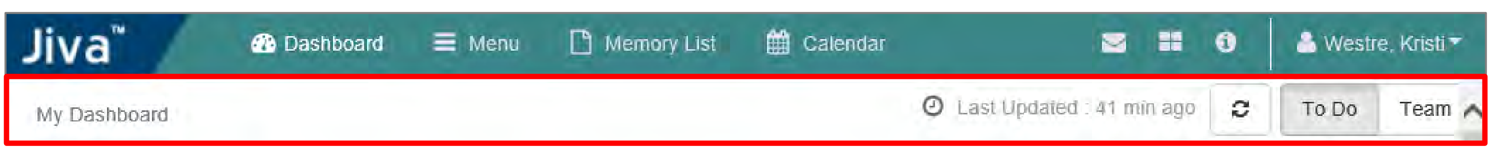
Overview of the Dashboard

The dashboard consists of widgets (*or panels*) that help you to access the tasks that are assigned to you. It also provides high-level information about the episodes and activities assigned to you.

Application Banner

Menu Bar	Description
Dashboard	Click to return to the Dashboard from anywhere within the Provider Portal.
Menu	Click to access ways to search for a member.
Memory ist	The Memory List bookmarks Add and Edit screens. It is an easy way to move back to a member or episode you worked on earlier and have not closed.
Calendar	The calendar will display any tasks that have been assigned to you.
Messaging	N/A – The messaging functionality will not be used.
Legend	Click to see a legend of icons that may be associated with members.
Jiva Help	Click to access help for the screen you are on.
Profile	Click to make changes to the color scheme.

My Dashboard Banner

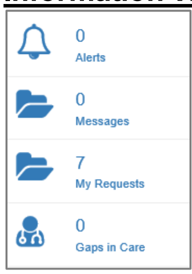


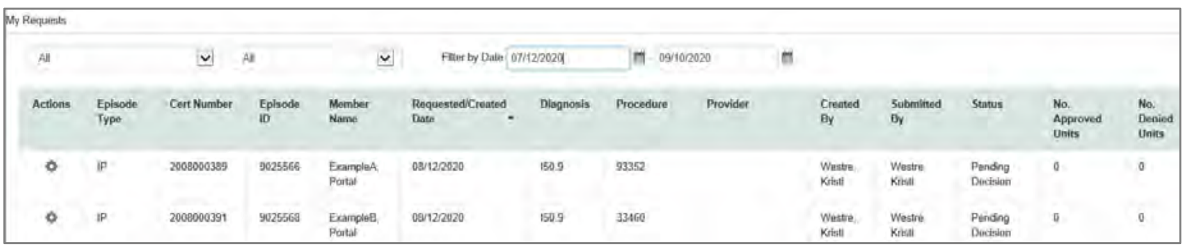
Item	Description
Last Updated	Displays the last time the Dashboard was updated
Refresh	Click the Refresh icon to update the Dashboard to view the most current information.
To Do	Displays the widgets containing information regarding episodes associated with you.
Team	Displays the widgets containing information regarding episodes associated with your team.

Overview of the Dashboard: To-Do View

These widgets contain information regarding the episodes associated with you.

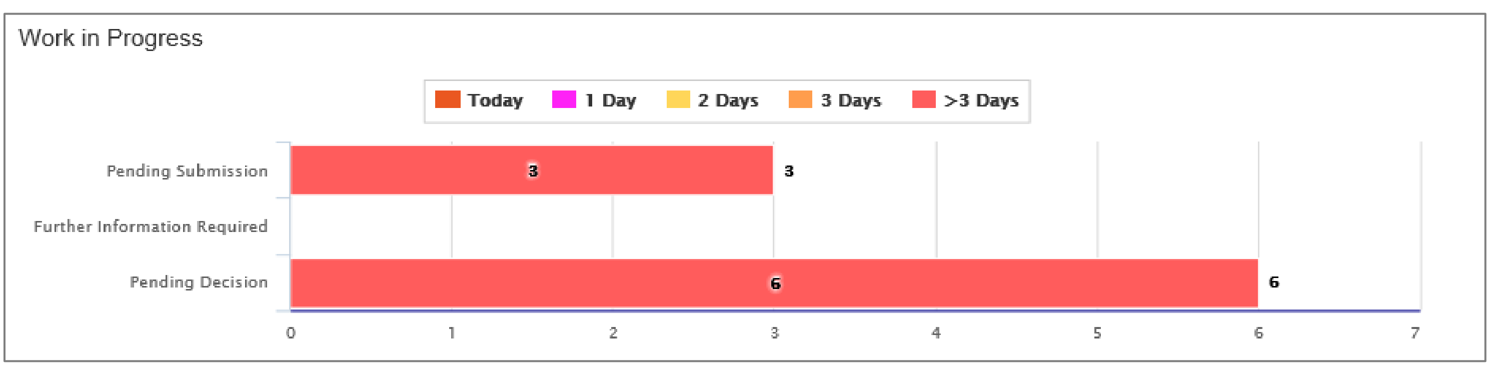
Information Widget



<table>
<thead>
<tr><th>Item</th><th>Description</th></tr>
</thead>
<tbody>
<tr><td>Alerts</td><td>Displays the number of notifications or reminders of an action performed, or to be performed. Click on the hyperlink to view the alerts.</td></tr>
<tr><td>Messages</td><td>N/A – This functionality will not be used.</td></tr>
<tr><td>My Requests</td><td>Displays the number of episodes that have been submitted. Click the hyperlink to view the list of requests.

My Requests
All | All | Filter by Date 07/12/2020 - 09/10/2020
<table>
<tr><th>Actions</th><th>Episode Type</th><th>Cert Number</th><th>Episode ID</th><th>Member Name</th><th>Requested/Created Date</th><th>Diagnosis</th><th>Procedure</th><th>Provider</th><th>Created By</th><th>Submitted By</th><th>Status</th><th>No. Approved Units</th><th>No. Denied Units</th></tr>
<tr><td></td><td>IP</td><td>2008000389</td><td>9025566</td><td>ExampleA, Portal</td><td>08/12/2020</td><td>I50.9</td><td>93352</td><td></td><td>Westre, Kristi</td><td>Westre Kristi</td><td>Pending Decision</td><td>0</td><td>0</td></tr>
<tr><td></td><td>IP</td><td>2008000391</td><td>9025568</td><td>ExampleB, Portal</td><td>08/12/2020</td><td>I50.9</td><td>33460</td><td></td><td>Westre, Kristi</td><td>Westre Kristi</td><td>Pending Decision</td><td>0</td><td>0</td></tr>
</table>
Note: It does not include episodes that are pending submission.</td></tr>
<tr><td>Gaps in Care</td><td>Displays any Gaps in Care for the members associated with you.</td></tr>
</tbody>
</table>

Work in Progress Widget

You can view the request statistics by status in the Work in Progress widget. It displays the number of requests created and their statuses in a graphical representation. It also displays the number of days that a request is in the same status (color coded). Clicking on a bar in the graph will display those given episodes.



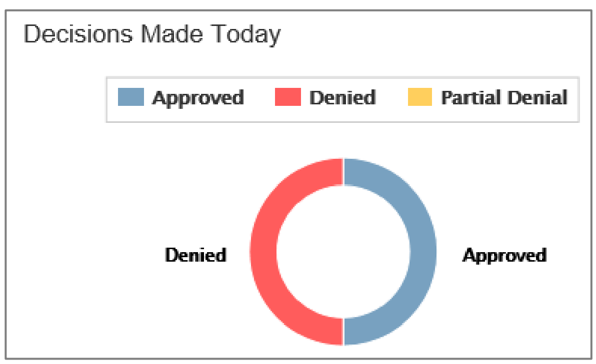
Overview of the Dashboard: To-Do View, continued

Requests by Type Widget

The Requests by Type widget displays the number of requests that are processed, pending for submission, pending for decision, and awaiting further information based on the episode types.

Decisions Made Today Widget

The Decisions Made Today widget displays the statistics of stay and service requests that are approved, denied, or partially denied pertaining to the requests made by you. Click on a status in the graph to view the associated episode(s).



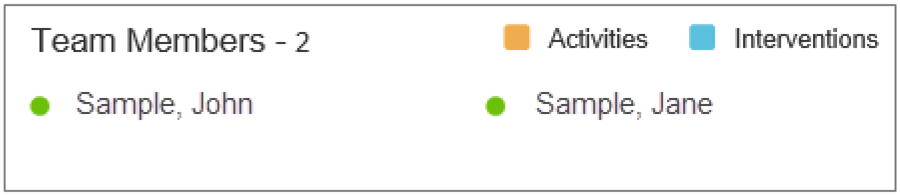
My Activities Widget

The My Activities widget displays the list of activities assigned to you that are schedule to be performed on the current date, by default.

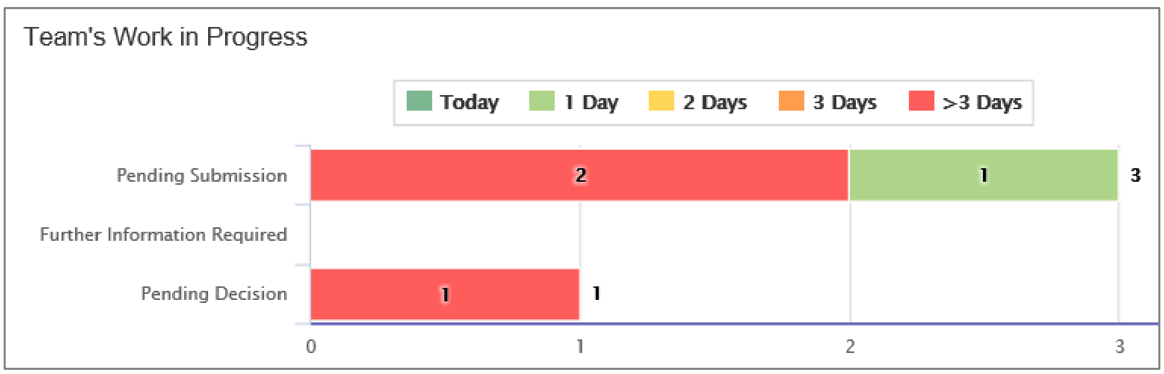
Overview of the Dashboard: Team View

The Team view will display information regarding your team.

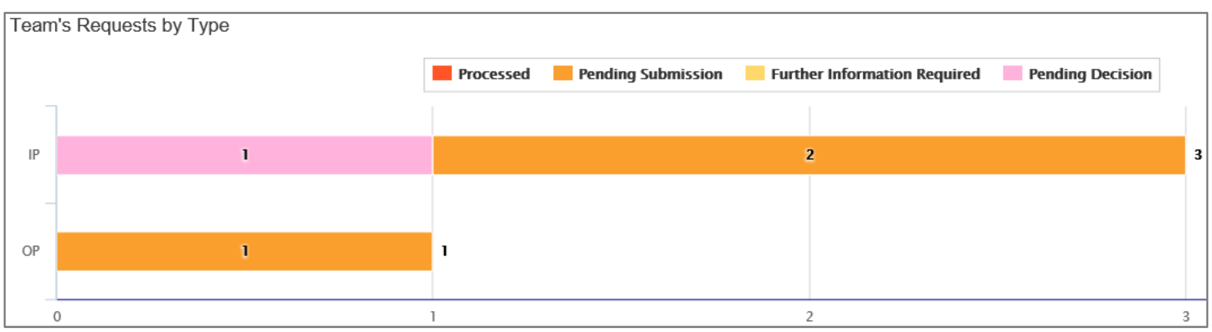
<u>Team Members Widget</u>
The Team Members widget displays the number of team members along with their names. You can access episodes associated with your team members by clicking on their names. This will take you to their Dashboard.



<u>Team's Work in Progress Widget</u>
The Team's Work in Progress widget displays the number of episodes created by your team and is displayed based on the timeline.



<u>Team's Requests by Type Widget</u>
The Team's Request by Type widget displays the number of requests that are processed, pending for submission, pending for decision, and awaiting further information depending on the episode types. You may click on a bar in the graph to access the specific information.



2

2 SEARCHING FOR A MEMBER

Searching for a Member – Search Request Tab

It is recommended that you search for a possible duplication before entering a request. Conducting the search using **Search Request** allows you to view existing requests for a member.

<table>
<tr><td></td><td>

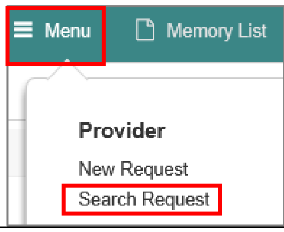
Duplicate Case Check and Alert

- Jiva will compare dates of service, treating provider and procedure request to other cases for the member. You will receive a warning message if a possible duplicate exists.
- Jiva will not auto approve any case that is a possible duplicate. The request will be evaluated by the Utilization Management team.

</td></tr>
</table>

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>

Click on **Search Request** on the menu bar.



</td></tr>
<tr><td>2.</td><td>

Search by one of the following:

<table>
<tr><th>Search Information</th><th>Description</th></tr>
<tr><td>Member ID</td><td>Member ID Type: defaults to ELIG Member ID which is their health plan ID. You will need to enter -01 at the end of the Member ID</td></tr>
<tr><td>Member Name & DOB</td><td>You need to enter both the Member Name and DOB</td></tr>
<tr><td>Certification Number</td><td>If you are searching for a particular submitted or saved request, you may search by the Certification Number</td></tr>
</table>

</td></tr>
<tr><td>3.</td><td>

Select "**Cases Treated By Me"** in the **View Requests** drop down.
This will display requests associated with the selected business entity.

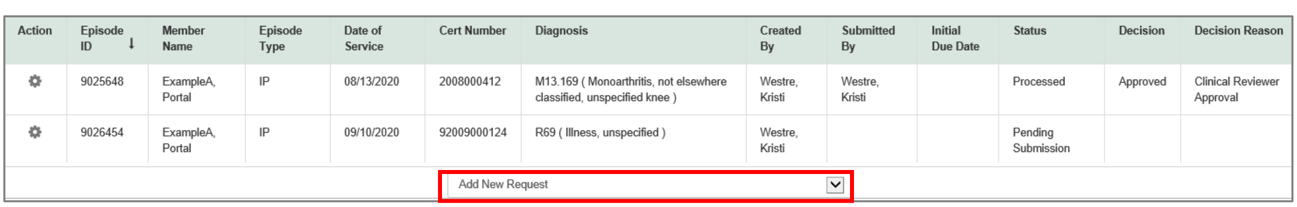
</td></tr>
<tr><td>4.</td><td>

Verify that "**All"** is in the **Business Entity** field.

</td></tr>
<tr><td>5.</td><td>

Click the **Search** button and check for duplicate requests.

Result: Cases found for the specified member will be displayed in the "***Request Search Results***" section, along with the **Add New Request** button. If no matching records for the specified member are found, a message will be displayed indicating this, along with the **Add New Request** button.



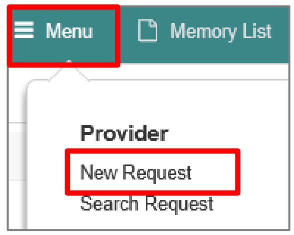
<table>
<tr><th>Action</th><th>Episode ID</th><th>Member Name</th><th>Episode Type</th><th>Date of Service</th><th>Cert Number</th><th>Diagnosis</th><th>Created By</th><th>Submitted By</th><th>Initial Due Date</th><th>Status</th><th>Decision</th><th>Decision Reason</th></tr>
<tr><td></td><td>9025648</td><td>ExampleA, Portal</td><td>IP</td><td>08/13/2020</td><td>2008000412</td><td>M13.169 (Monoarthritis, not elsewhere classified, unspecified knee)</td><td>Westre, Kristi</td><td>Westre, Kristi</td><td></td><td>Processed</td><td>Approved</td><td>Clinical Reviewer Approval</td></tr>
<tr><td></td><td>9026454</td><td>ExampleA, Portal</td><td>IP</td><td>09/10/2020</td><td>92009000124</td><td>R69 (Illness, unspecified)</td><td>Westre, Kristi</td><td></td><td></td><td>Pending Submission</td><td></td><td></td></tr>
</table>

Add New Request

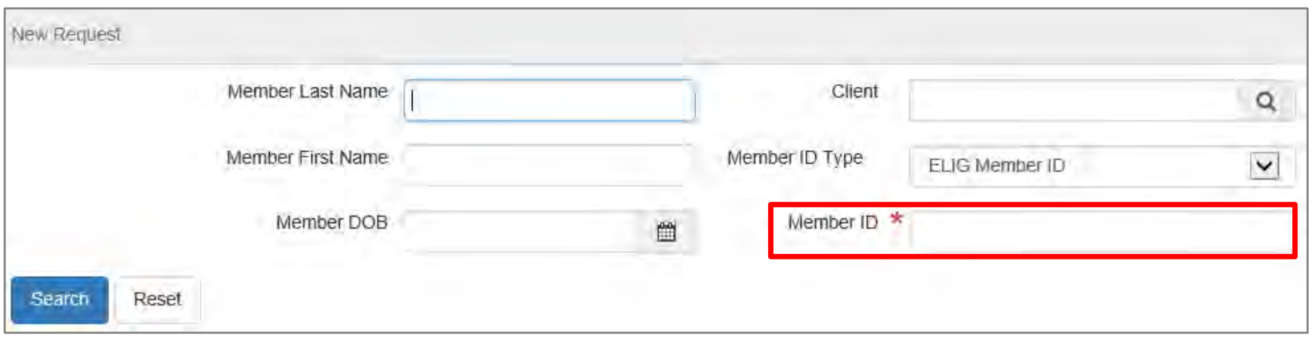
</td></tr>
</table>

Searching for a Member – New Request Tab

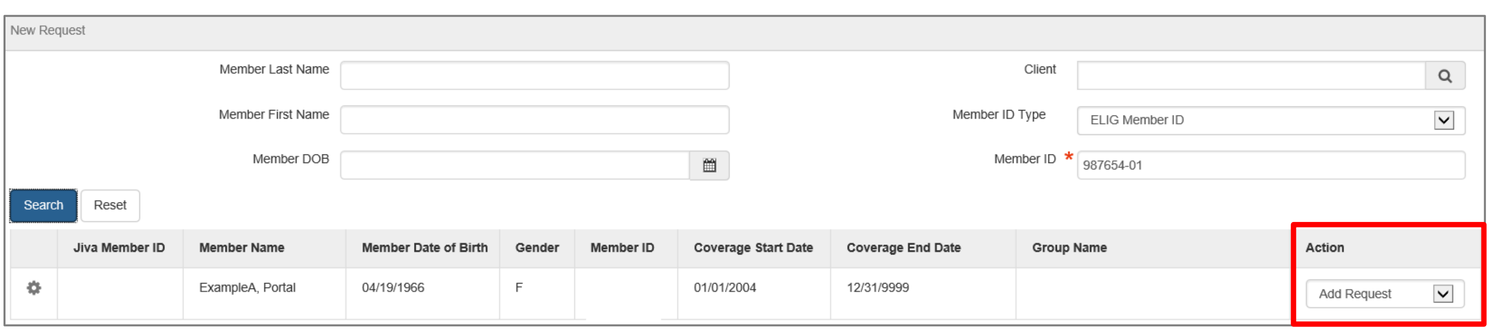
If the **Add New Request** button is not displayed after searching for a member using the **Search Request** tab, you can search for a member and add a new request using the **New Request** tab.



Step	Action
1.	Click on **Menu** on the menu bar.
2.	Select **New Request**



Step	Action
1.	Enter the Member ID in the **Member ID** field.  When searching by **Member ID** you must enter "-01" at the end of the Member ID.
2.	Click the **Search** button to search for the member. ***Result:*** Information for the specified member will be displayed in the ***Member Search Results*** section and the **Add New Request** field will be displayed in the ***Action*** column.



3

3 ENTER AN IP CLINICAL REQUEST

How to Enter an Inpatient Clinical Request

When entering a request you have 2 options:

1) Enter a clinical request which includes all clinical information.
2) Enter a nonclinical request where the clinical information can be added at a later time.

The steps in this chapter outline how to enter an IP clinical request. Reference chapter 4 “How to Enter an IP Non-clinical Request” and Chapter 5 “How to Add Clinical Information to an Existing IP Non-clinical Request” for more information.

When entering a **clinical** request, you **must provide** the following information:

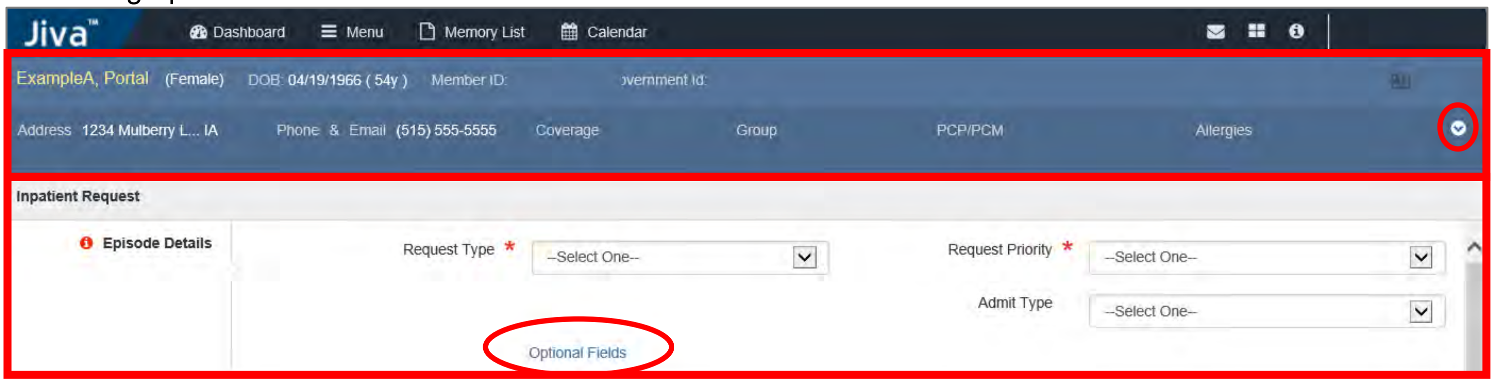
- **Episode Details**
- **Diagnosis- primary a must, secondary is optional**
- **Treating Provider**
- **Attending Physician**
- **Add stay request**
- **Add Assessment (if triggered)**
- **All clinical information**

	Requests where the clinical information is entered may auto approve based on what is requested and the information provided in the Assessment.

Adding a New IP Clinical Request – Adding Episode Details

After locating the member *(following the steps outlined in Chapter 2)*, click on **Add New Request** and select **Inpatient** from the drop-down list.

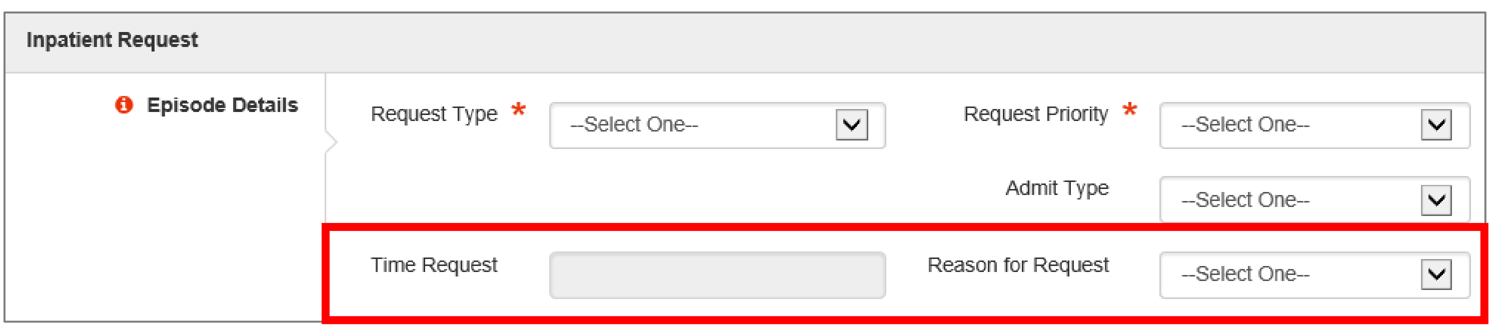
The Member Demographics are at the top of the page. You may click the drop-down caret on the right to expand the demographics window.



Follow these steps to complete the **Episode Details** section:

Step	Action
1.	Select the appropriate **Request Type** from the drop down
2.	Select the appropriate **Request Priority** from the drop down
3.	Select the appropriate **Admit Type** from the drop down

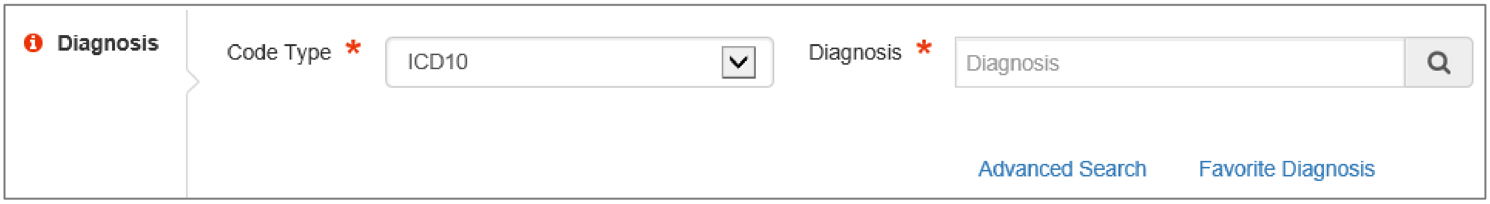
If you click the **Optional Fields** hyperlink, additional fields will be displayed.



- **Time Request:** This field will auto-populated based on the **Request Priority**.
- **Reason for Request:** Select the appropriate reason from the drop down.

Adding a New IP Clinical Request – Adding Diagnosis

You can add multiple diagnoses from this screen or you can utilize the **Favorite Diagnosis** hyperlink to save time and keystrokes. The **Favorite Diagnosis** function will allow you to create and manage a list of frequently used diagnoses. The list is unique to the provider's account. Reference Chapter 9 "*Favorite Diagnosis List – How to Create a Favorites List*."



<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Code Type will default to ICD10. You may select a different code type if applicable.</td></tr>
<tr><td>2.</td><td>Type the diagnosis or code in the Diagnosis field.
You may also use the Advanced Search function, if needed.</td></tr>
<tr><td>3.</td><td>Once you select the diagnosis, it will display on the screen and be attached to the episode.
<table>
<tr><th>Primary Dx</th><th>Code Type</th><th>Diagnosis</th><th>Actions</th></tr>
<tr><td></td><td>ICD10</td><td>I50.9--Heart failure, unspecified</td><td></td></tr>
<tr><td></td><td>ICD10</td><td>R69--Illness, unspecified</td><td></td></tr>
</table></td></tr>
<tr><td>4.</td><td>
<table>
<tr><th>If you…</th><th>Then…</th></tr>
<tr><td>want to add additional diagnoses</td><td>Repeat steps 2 and 3.

<u>Note</u>:
- Click the remove icon to remove a diagnosis from the request.

- You cannot remove a diagnosis unless there is more than one diagnosis already selected

- Click the Star in the Primary Dx column if you need to designate a different diagnosis as primary.</td></tr>
<tr><td><u>do not</u> want to add additional diagnoses</td><td>Proceed to the Providers section of the episode.</td></tr>
</table></td></tr>
</table>

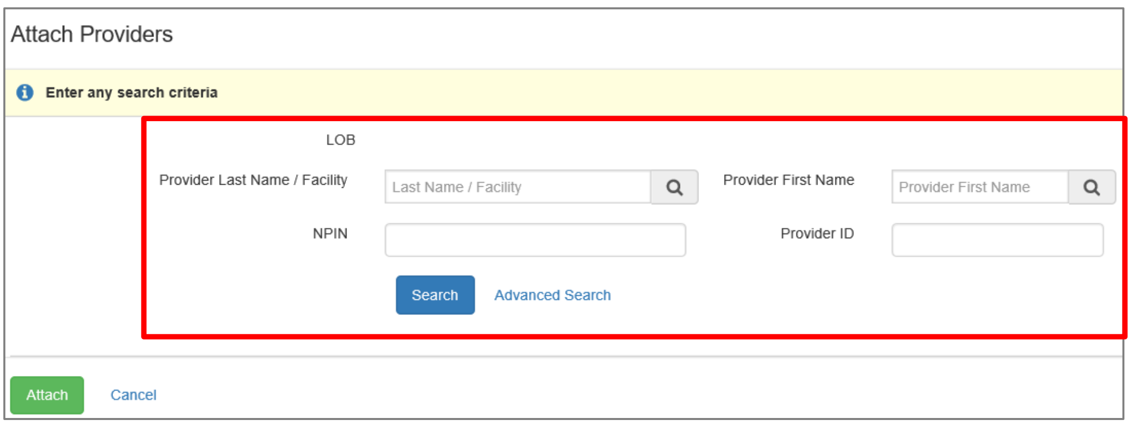
Adding a New IP Clinical Request – Adding Providers

All Inpatient requests require a **Treating** provider (Facility) and an **Attending** physician.

The steps below outline the processes for adding providers to the request.

<table>
<tr><td></td><td>Favorite Providers - You can utilize the Favorite Providers hyperlink to save time and keystrokes. The Favorite Providers list will allow you to create and manage a list of frequently used providers. Reference Chapter 9 “Favorite Provider List–How to Create a Favorites List.”</td></tr>
</table>

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Click the Attach Providers button.

</td></tr>
<tr><td>2.</td><td>Enter the appropriate search criteria and click on Search.

</td></tr>
<tr><td>3.</td><td>After clicking Search:
<table>
<tr><th>If appropriate provider…</th><th>Then…</th></tr>
<tr><td>Is displayed</td><td>Proceed to Step 4.</td></tr>
<tr><td>Is not displayed</td><td>You may use the Advanced Search functionality and click the Attach button after locating the provider

</td></tr>
</table></td></tr>
</table>

Adding a New IP Clinical Request – Adding Providers (cont.)

Step	Action
4.	• Search for the facility. • Once you have located the facility, select "**Treating**" from the drop-down list in the ***Provider Role*** column, click the icon next to the provider row and select Single Attach to attach the provider to the episode. ***Result:*** The Provider will be attached and listed in the **Providers** section of the episode.
5.	• Search for the attending physician. • Once you have located the physician, select "**Attending**" from the drop-down list in the ***Provider Role*** column, click the icon next to the provider row and select Single Attach to attach the provider to the episode. ***Result:*** The Provider will be attached and listed in the **Providers** section of the episode.

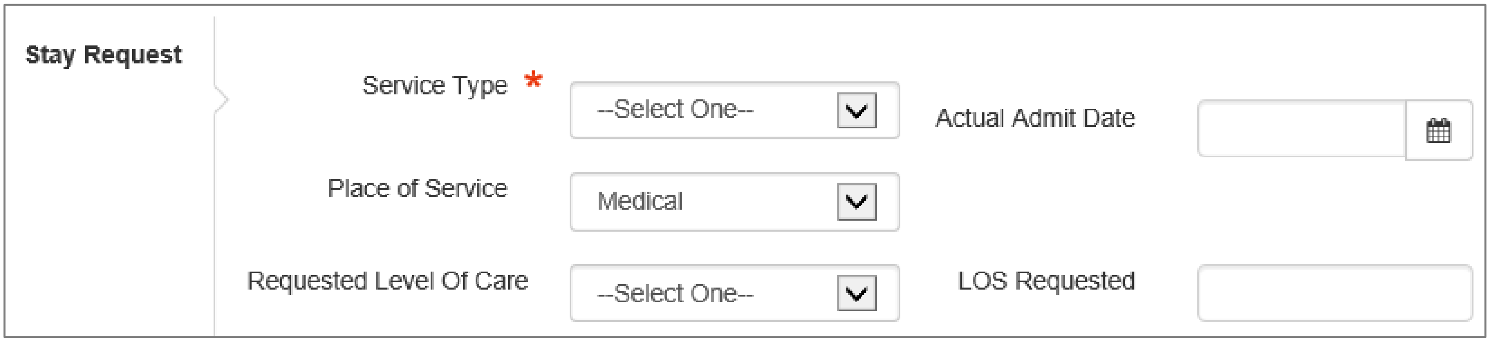
If you want to …	Then…
Attach multiple providers to an episode at the same time	Follow the steps outlined below: • Search for the desired providers • In the row of each desired provider in the search results screen, select the appropriate Provider Role from the drop-down list, click the icon next to the row and select the Multiple Attach option • As each provider is selected, they will be added to the "**Selected Providers List**" at the bottom of the screen • When all providers have been added, verify the selected Provider Role and click the Attach button to add them to the episode.

NOTE:

- If the incorrect provider is attached, click the **Deactivate** icon to deactivate the facility. The facility will be removed from the episode.

Adding a New IP Clinical Request – Adding Stay Request

You can add a Stay Request (length of stay/days in hospital) without adding a Service Request. The Service Request is used to request a surgical procedure. The following steps outline how to add the Stay Request.



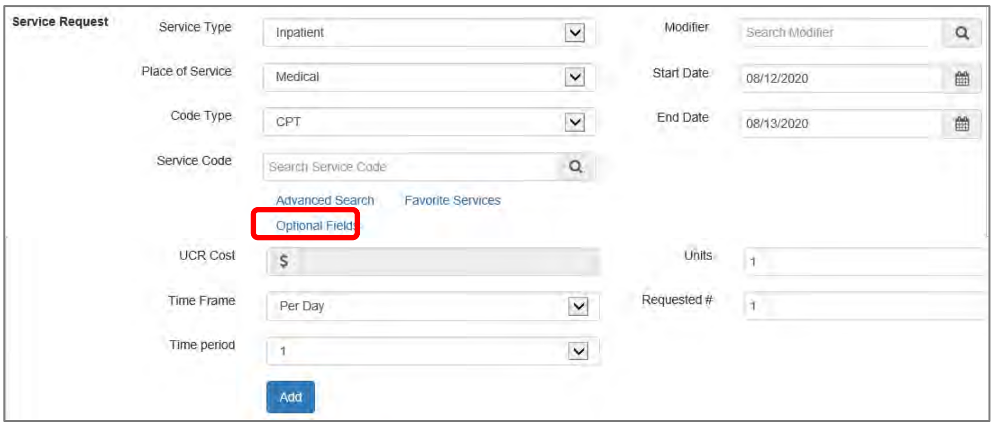
Step	Action
1.	Select the most appropriate choice in the **Service Type** drop down.
2.	Select the most appropriate choice in the **Place of Service** drop down. **Note** - If you are uncertain, select "**Medical**."
3.	Select the most appropriate "type of bed or unit" in which the member was admitted in the **Requested Level of Care** drop down.
4.	Enter the "date of admission" in the **Admit Date** field.
5.	Enter "1" in the **LOS Requested #** field.

Adding a New IP Clinical Request – Adding Service Request (if applicable)

When adding a procedure to an Inpatient request, you will need to complete the ***Service Request*** *section.*

	**Favorite Services -** You can utilize the Favorite Services hyperlink to save time and keystrokes. The **Favorite Services** functionality will allow you to create and manage a list of frequently used services. Reference Chapter 9 "*Favorite Services List–How to Create a Favorites List*."

Step	Action
1.	Complete information in the **Service Request** section (*if applicable*) using the guidelines outlined below:



Service Type	Defaults to Inpatient, but update as needed
Place of Service	Defaults to Medical, but update as needed
Code Type	Defaults to CPT, but update as needed
Service Code	Enter the requested procedure code. ***Note:*** You can type the procedure code or a description of the code. As information is typed, the auto coder will automatically display matches in the drop-down list. Select the appropriate procedure from the list. You can also use the **Advanced Search** link to initiate a search for the procedure code.
Modifier	Enter modifier details as appropriate
Start Date	Defaults to match the Actual Admit date, update as needed
End Date	Defaults to the next day, update as needed

To view these fields, you may need to click on the **Optional Fields** hyperlink.

Time Frame	Defaults to 1, but update as needed
Time Period	Defaults to 1, but update as needed
Units	Defaults to 1, but update as needed
UCR Cost	N/A – not used

Adding a New IP Clinical Request – Adding Service Request (if applicable), cont.

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>2.</td><td>Click the Add button
Result: The Service Request line will now be populated (appears below the Service Request fields)

Service Request
<table>
<tr><th>Action</th><th>☐</th><th>Service Code</th><th>Requested#</th><th>Start Date</th><th>End Date</th><th>Service Type</th><th>Place of Service</th><th>Review Status</th></tr>
<tr><td></td><td></td><td>93352(CPT)</td><td>1</td><td>08/12/2020</td><td>08/13/2020</td><td>Inpatient</td><td>Medical</td><td></td></tr>
</table>

Note: If a Service Request was added in error or with incorrect information, you may click the icon in the Action column to remove the given line.</td></tr>
<tr><td>3.</td><td>Repeat Steps 1 and 2 to add additional services, if appropriate</td></tr>
</table>

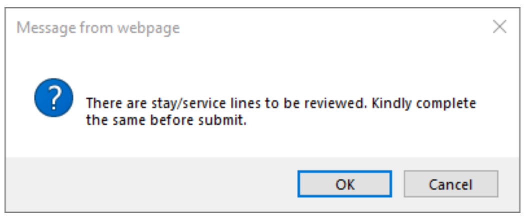
Adding a New IP Clinical Request – InterQual

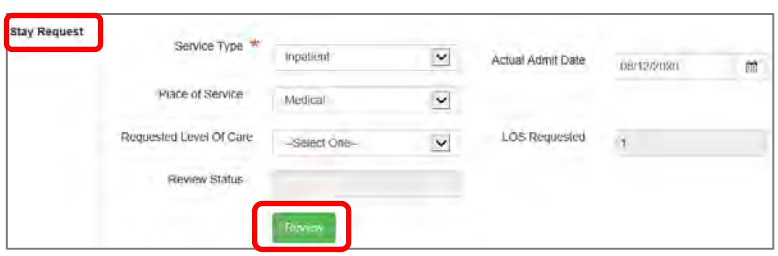
Access and complete InterQual Connect Clinical Criteria

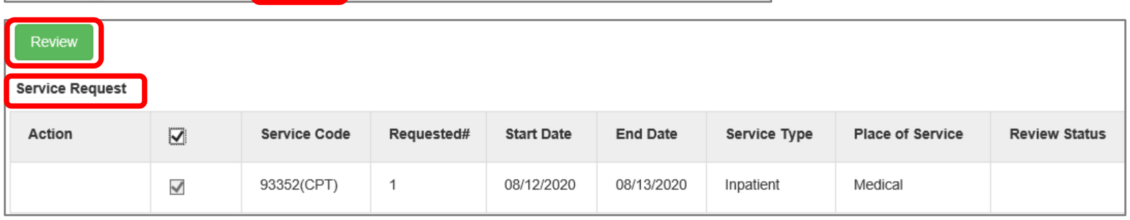
If you need training or have questions regarding the use of InterQual Connect criteria, please contact your facility InterQual trainer or contact your Change HealthCare account representative.

The health plan is certified to conduct training for internal associates only.

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Click the Check for Review button.

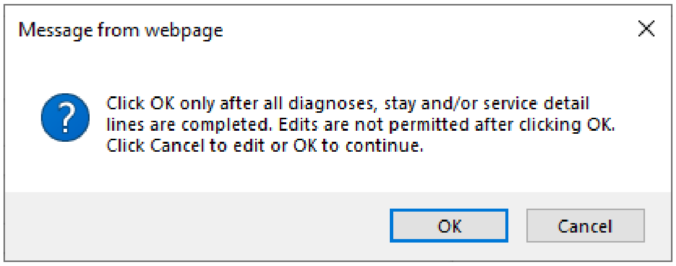

</td></tr>
<tr><td>2.</td><td>Once determined that one or both exists, you will receive the following pop-up message. Click OK.


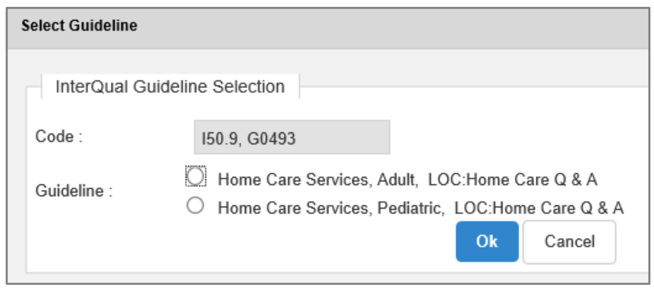
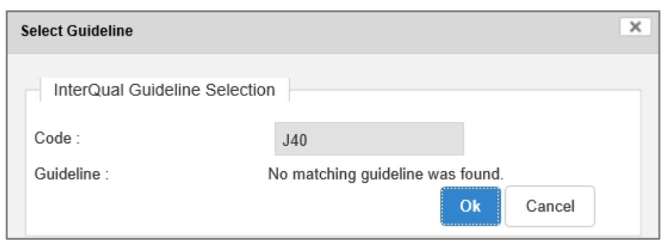
</td></tr>
<tr><td>3.</td><td>Click the appropriate Review button.
<table>
<tr><th>If…</th><th>Then…</th></tr>
<tr><td>Only a Stay Request</td><td>Click the Review button associated with the Stay Request.</td></tr>
<tr><td>Both Stay and Service Requests</td><td>The Review button associated with the Stay Request will be inactive.
Click the Review button associated with the Service Request.</td></tr>
</table>




</td></tr>
</table>

Adding a New IP Clinical Request – InterQual, cont.

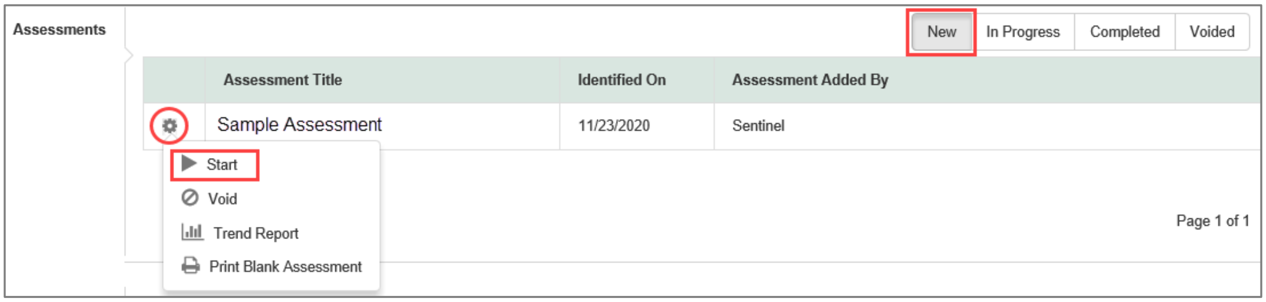
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>4.</td><td>You will receive the following message. Click OK <u>only</u> if you completed the items listed.


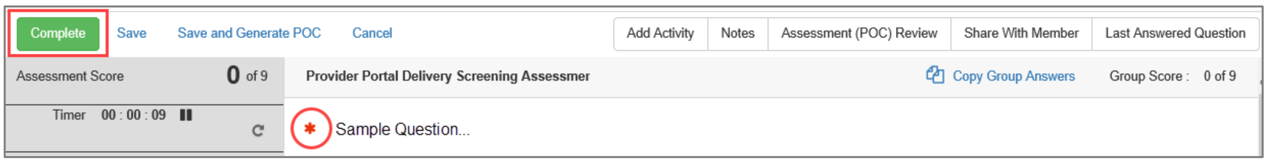
Result: The system will run a diagnostic review of the request to determine if a Stay Request and/or a Service Request is associated with it.</td></tr>
<tr><td>5.</td><td>The system will connect with InterQual and determine if there is a matching guideline.
<table>
<tr><th>If there is…</th><th>Then…</th></tr>
<tr><td>Matching Guideline</td><td>You will receive this pop-up similar to this where you may select the appropriate guideline and click on OK. Proceed to Step 6 in this section.

</td></tr>
<tr><td>No Matching Guideline</td><td>You will receive this pop-up. Click OK to close the window and you will be returned to the request screen. Proceed to Adding Documents.

</td></tr>
</table></td></tr>
</table>

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>6.</td><td>After answering the review questions, the Recommendations page will display either Criteria Met or Criteria Not Met.</td></tr>
<tr><td>7.</td><td>From the Recommendations page:
<table>
<tr><th>If you click…</th><th>Then…</th></tr>
<tr><td>Save</td><td>The review will be saved and can be updated, if needed, prior to submitting the request.</td></tr>
<tr><td>Complete</td><td>The review will be saved and closed. It cannot be updated even if you have not yet submitted the request.</td></tr>
</table></td></tr>
<tr><td>8.</td><td>Close the InterQual tab to return to the Provider Portal</td></tr>
<tr><td>9.</td><td>The request line will now display a status in the Decision column.</td></tr>
</table>

Adding a New IP Clinical Request – Adding Assessments

If an assessment is associated with the request, an **Assessment** section will be displayed where you may access and complete the associated assessment.

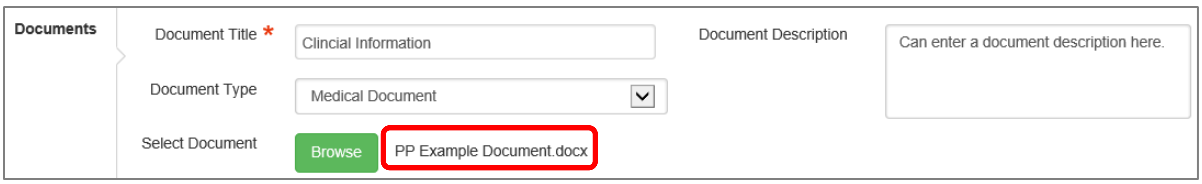




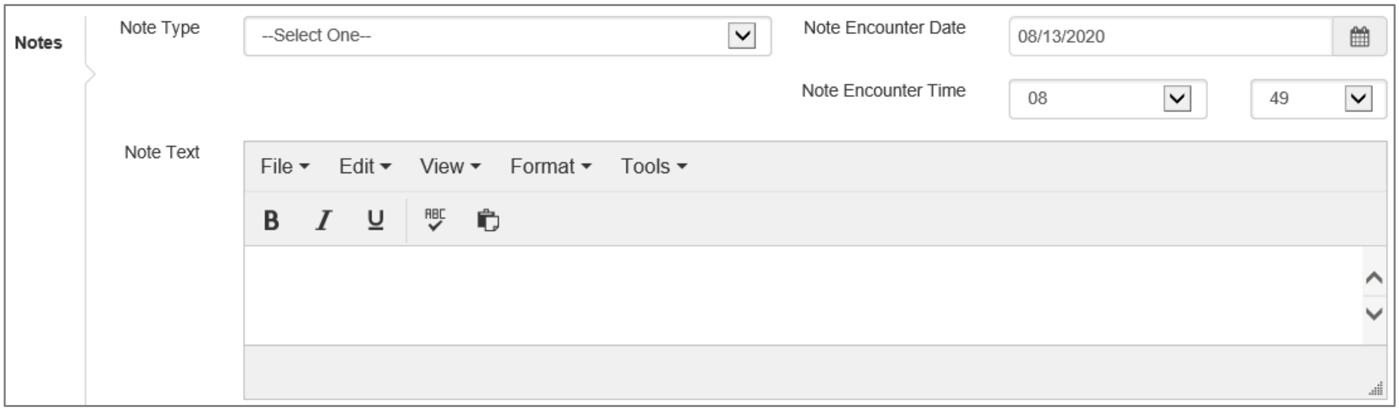
Step	Action
1.	In the **New** Tab of the Assessment section, click on the gear icon to the left of the Assessment and click on **Start**.
2.	Answer the questions. **Note** - Questions in red are mandatory.
3.	Click the **Complete** button to complete the assessment. **Note**- This will trigger any auto approval rules (if configured.) The **Save** button will **not** trigger the auto approval rules.

Adding a New IP Clinical Request – Adding Documents

When submitting an **IP Clinical Request,** you must attach the clinical information. Follow these instructions to add a **Documents**.

Step	Action
1.	Complete the following: a. **Document Title**: enter the title of the document b. **Document Type**: defaults to **Medical Document**, update as needed. c. **Document Description**: optional field d. Click the **Browse** button to search for the document you wish to upload i. Click the desired document and click the **Open** button e. You will see the document name listed next to the Browse button. 

Adding a New IP Clinical Request – Adding Notes



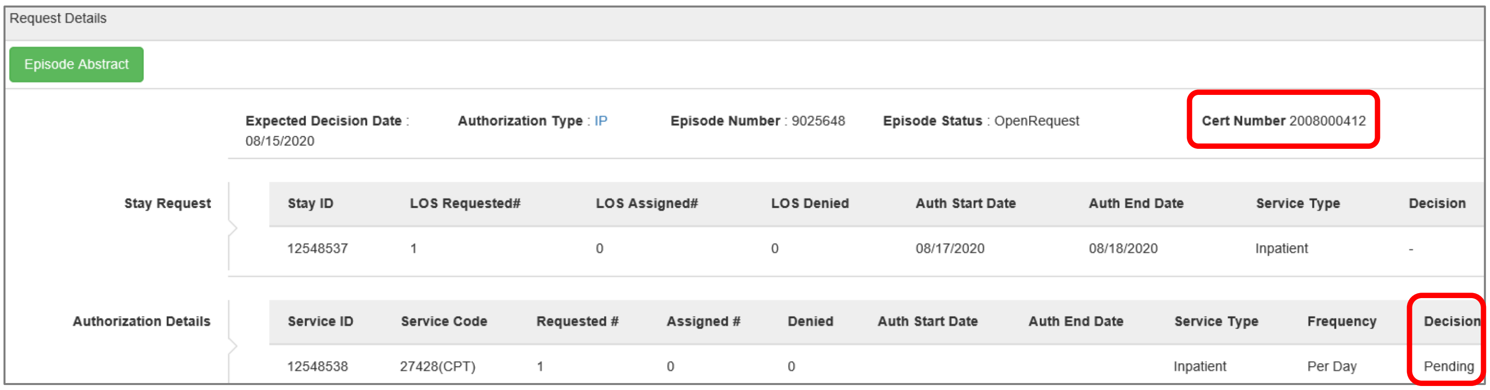
Step	Action
1.	Select the appropriate **Note Type** from the drop-down menu.
2.	Enter the appropriate notes in the notes section. Be sure to include your **name** and **contact information** in the event the Plan needs to contact you.

	This is a shared note field. Notes can be viewed and entered by both you and the plan.

Adding a New IP Clinical Request – Submitting the Request

Once all required sections are completed, you are ready to submit the request.

Step	Action
1.	Click on the **Submit** button to submit your request.  ***Note:*** *The* ***Submit*** *button will not be active until a clinical review has been completed.*
2.	The Request Details information will be displayed, including the Cert Number. ***Note:*** *If the request is programmed to auto-approve, you will see* ***Approved*** *in the* ***Decision*** *column.*



4

4 ENTER AN IP NON-CLINICAL REQUEST

How to Enter an Inpatient Non-Clinical Request

A non-clinical request can be started by non-clinical staff or anyone who does not have clinical information available at the time of entry.

The non-clinical request can be saved and is available to access at a later time in order to add clinical data.

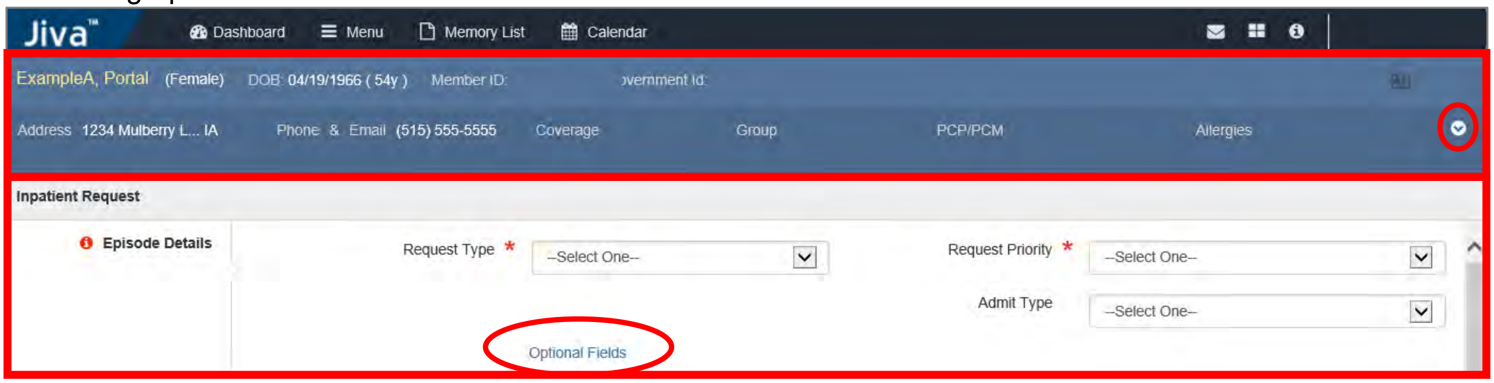
When entering a **non-clinical** request, you **must provide** the following information:

- **Episode Details**
- **Diagnosis- primary a must, secondary is optional**
- **Treating Provider**
- **Attending Physician**
- **Add stay request**

Adding a New IP Non-Clinical Request – Adding Episode Details

After locating the member *(following the steps outlined in Chapter 2)*, click on **Add New Request** and select **Inpatient** from the drop-down list.

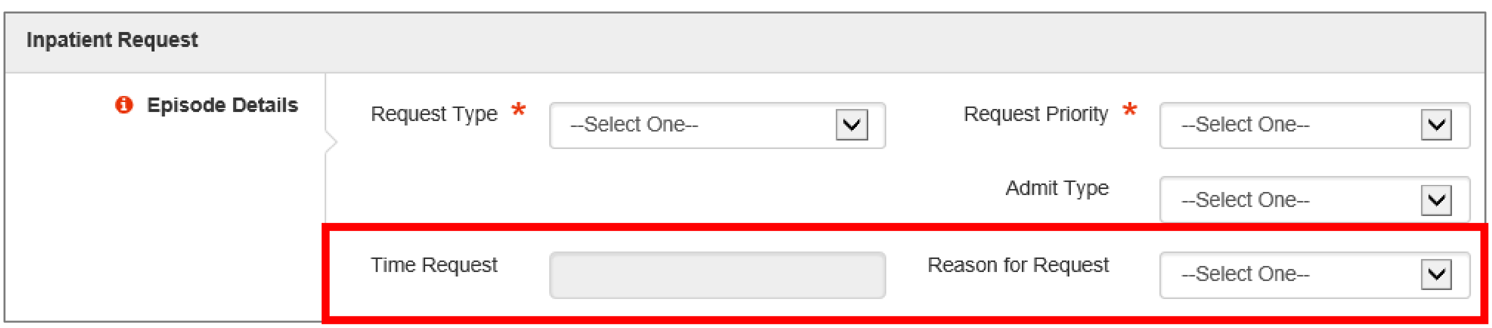
The Member Demographics are at the top of the page. You may click the drop-down caret on the right to expand the demographics window.



Follow these steps to complete the **Episode Details** section:

Step	Action
1.	Select the appropriate **Request Type** from the drop down
2.	Select the appropriate **Request Priority** from the drop down
3.	Select the appropriate **Admit Type** from the drop down

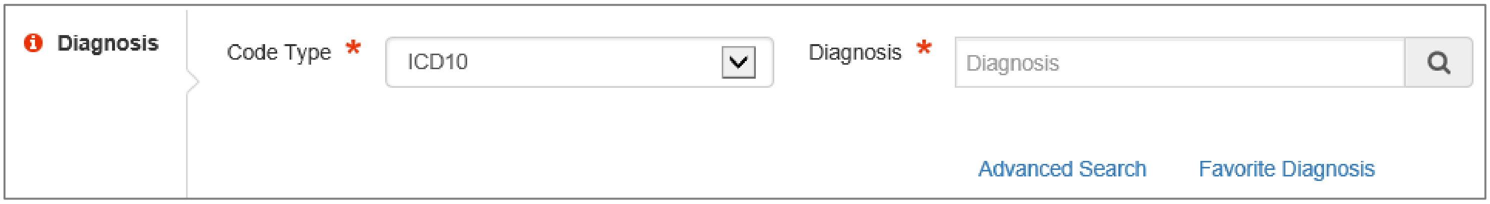
If you click the **Optional Fields** hyperlink, additional fields will be displayed.



- **Time Request:** This field will auto-populated based on the **Request Priority**.
- **Reason for Request:** Select the appropriate reason from the drop down.

Adding a New IP Non-Clinical Request – Adding Diagnosis

You can add multiple diagnoses from this screen or you can utilize the **Favorite Diagnosis** hyperlink to save time and keystrokes. The **Favorite Diagnosis** function will allow you to create and manage a list of frequently used diagnoses. The list is unique to the provider's account. Reference Chapter 9 "*Favorite Diagnosis List – How to Create a Favorites List*."



<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Code Type will default to ICD10. You may select a different code type if applicable.</td></tr>
<tr><td>2.</td><td>Type the diagnosis or code in the Diagnosis field.
You may also use the Advanced Search function, if needed.</td></tr>
<tr><td>3.</td><td>Once you select the diagnosis, it will display on the screen and be attached to the episode.
<table>
<tr><th>Primary Dx</th><th>Code Type</th><th>Diagnosis</th><th>Actions</th></tr>
<tr><td></td><td>ICD10</td><td>I50.9--Heart failure, unspecified</td><td></td></tr>
<tr><td></td><td>ICD10</td><td>R69--Illness, unspecified</td><td></td></tr>
</table>
</td></tr>
<tr><td>4.</td><td>
<table>
<tr><th>If you…</th><th>Then…</th></tr>
<tr><td>want to add additional diagnoses</td><td>Repeat steps 2 and 3.

<u>Note</u>:
- Click the remove icon to remove a diagnosis from the request.

- You cannot remove a diagnosis unless there is more than one diagnosis already selected

- Click the Star in the Primary Dx column if you need to designate a different diagnosis as primary.</td></tr>
<tr><td><u>do not</u> want to add additional diagnoses</td><td>Proceed to the Providers section of the episode.</td></tr>
</table>
</td></tr>
</table>

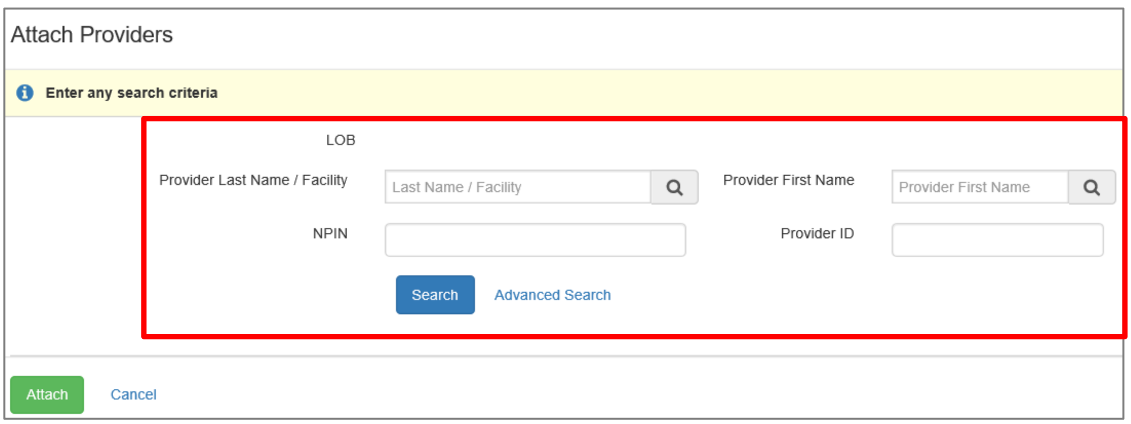
Adding a New IP Non-Clinical Request – Adding Providers

All Inpatient requests require a **Treating** provider (Facility) and an **Attending** physician.

The steps below outline the processes for adding providers to the request.

Favorite Providers - You can utilize the Favorite Providers hyperlink to save time and keystrokes. The **Favorite Providers** list will allow you to create and manage a list of frequently used providers. Reference Chapter 9 "*Favorite Providers List–How to Create a Favorites List*."

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Click the Attach Providers button.

</td></tr>
<tr><td>2.</td><td>Enter the appropriate search criteria and click on Search.

</td></tr>
<tr><td>3.</td><td>After clicking Search:
<table>
<tr><th>If appropriate provider…</th><th>Then…</th></tr>
<tr><td>Is displayed</td><td>Click the Attach button</td></tr>
<tr><td>Is not displayed</td><td>You may use the Advanced Search functionality and click the Attach button after locating the provider

</td></tr>
</table></td></tr>
</table>

Adding a New IP Non-Clinical Request – Adding Providers (cont.)

Step	Action
4.	• Search for the facility. • Once you have located the facility, select "**Treating**" from the drop-down list in the ***Provider Role*** column, click the icon next to the provider row and select Single Attach to attach the provider to the episode. ***Result:*** The Provider will be attached and listed in the **Providers** section of the episode.
5.	• Search for the attending physician. • Once you have located the physician, select "**Attending**" from the drop-down list in the ***Provider Role*** column, click the icon next to the provider row and select Single Attach to attach the provider to the episode. ***Result:*** The Provider will be attached and listed in the **Providers** section of the episode.

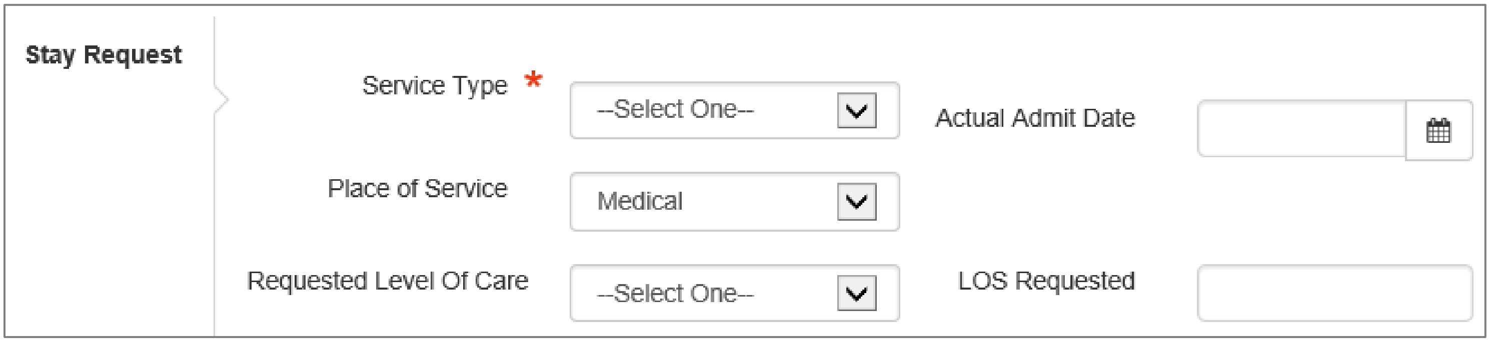
If you want to …	Then…
Attach <u>multiple providers</u> to an episode at the same time	Follow the steps outlined below: • Search for the desired providers • In the row of each desired provider in the search results screen, select the appropriate Provider Role from the drop-down list, click the icon next to the row and select the Multiple Attach option • As each provider is selected, they will be added to the "**Selected Providers List**" at the bottom of the screen • When all providers have been added, verify the selected Provider Role and click the Attach button to add them to the episode.

<u>NOTE:</u>

- If the incorrect provider is attached, click the **Deactivate** icon to deactivate the facility. The facility will be removed from the episode.

Adding a New IP Non-Clinical Request – Stay Request

You can add a Stay Request (length of stay/days in hospital) without adding a Service Request. The Service Request is used to request a surgical procedure. The following steps outline how to add the Stay Request.



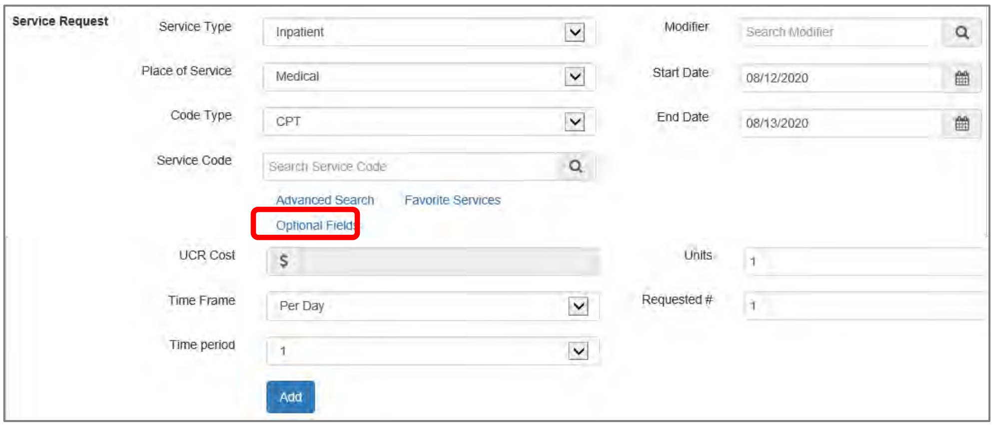
Step	Action
1.	Select the most appropriate choice in the **Service Type** drop down.
2.	Select the most appropriate choice in the **Place of Service** drop down. **Note** - If you are uncertain, select “**Medical**.”
3.	Select the most appropriate “type of bed or unit” in which the member was admitted in the **Requested Level of Care** drop down.
4.	Enter the “date of admission” in the **Admit Date** field.
5.	Enter “1” in the **LOS Requested #** field.

Adding a New IP Non-Clinical Request – Adding Service Request (if applicable)

When adding a procedure to an Inpatient request, you will need to complete the ***Service Request** section.*

Favorite Services - You can utilize the Favorite Services hyperlink to save time and keystrokes. The **Favorite Services** list will allow you to create and manage a list of frequently used services. Reference Chapter 9 "*Favorite Services List–How to Create a Favorites List*."

Step	Action
1.	Complete information in the **Service Request** section (*if applicable*) using the guidelines outlined below:



Service Type	Defaults to Inpatient, but update as needed
Place of Service	Defaults to Medical, but update as needed
Code Type	Defaults to CPT, but update as needed
Service Code	Enter the requested procedure code. ***Note:*** You can type the procedure code or a description of the code. As information is typed, the auto coder will automatically display matches in the drop-down list. Select the appropriate procedure from the list. You can also use the **Advanced Search** link to initiate a search for the procedure code.
Modifier	Enter modifier details as appropriate
Start Date	Defaults to match the Actual Admit date, update as needed
End Date	Defaults to the next day, update as needed

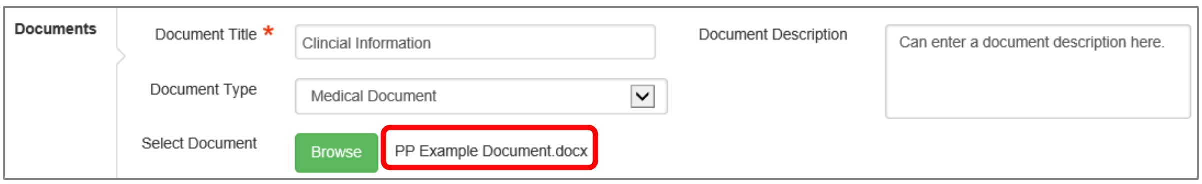
To view these fields, you may need to click on the **Optional Fields** hyperlink.

Time Frame	Defaults to 1, but update as needed
Time Period	Defaults to 1, but update as needed
Units	Defaults to 1, but update as needed
UCR Cost	N/A – not used

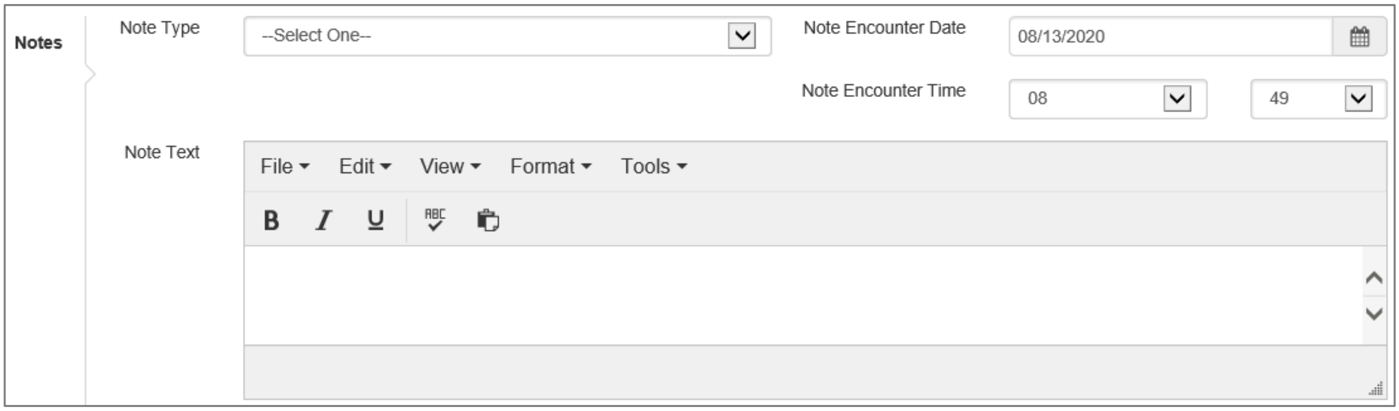
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>2.</td><td>Click the Add button
Result: The Service Request line will now be populated (appears below the Service Request fields)
<table>
<tr><td colspan="9">Service Request</td></tr>
<tr><th>Action</th><th>☐</th><th>Service Code</th><th>Requested#</th><th>Start Date</th><th>End Date</th><th>Service Type</th><th>Place of Service</th><th>Review Status</th></tr>
<tr><td>⊖</td><td></td><td>93352(CPT)</td><td>1</td><td>08/12/2020</td><td>08/13/2020</td><td>Inpatient</td><td>Medical</td><td></td></tr>
</table>
Note: If a Service Request was added in error or with incorrect information, you may click the ⊖ icon in the Action column to remove the given line.</td></tr>
<tr><td>3.</td><td>Repeat Steps 1 and 2 to add additional services, if appropriate</td></tr>
</table>

Adding a New IP Non-Clinical Request – Adding Documents

Follow these instructions to add a **Documents**.

Step	Action
1.	Complete the following: a. **Document Title**: enter the title of the document b. **Document Type**: defaults to **Medical Document**, update as needed. c. **Document Description**: optional field d. Click the **Browse** button to search for the document you wish to upload ii. Click the desired document and click the **Open** button e. You will see the document name listed next to the Browse button. 

Adding a New IP Non-Clinical Request – Adding Notes



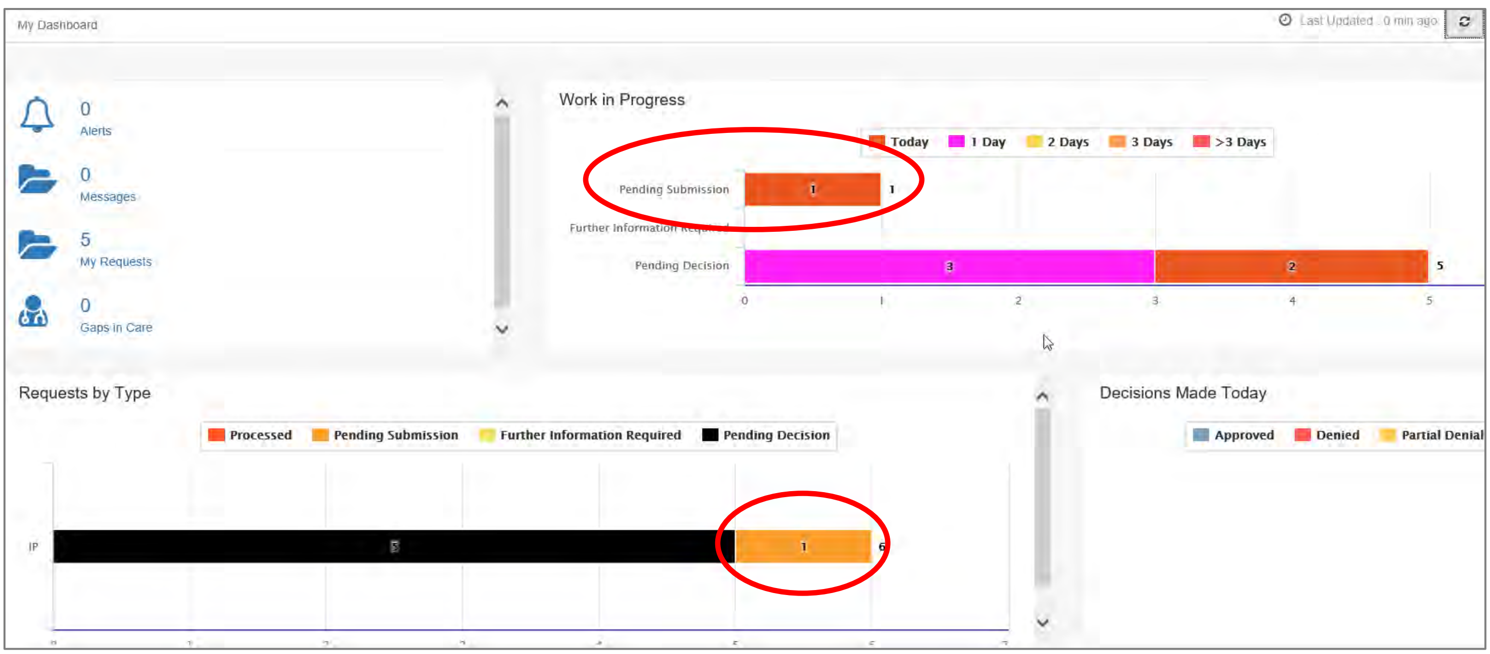
Step	Action
1.	Select the appropriate **Note Type** from the drop-down menu.
2.	Enter the appropriate notes in the notes section. Be sure to include your **name** and **contact information** in the event the Plan needs to contact you.

	This is a shared note field. Notes can be viewed and entered by both you and the Plan.

Adding a New IP Non-Clinical Request – Save as Draft

The **Non-clinical** request must be saved so it is available to access at a later time in order to add clinical data.

Step	Action
1.	Click on the **Save as Draft** button to save your request.  ***Note:*** *The **Submit** button will not be active until a clinical review has been completed.*
2.	You will be taken to the top of the request where you will see that it is now in **Draft** status (upper left corner). 
3.	You may click on **Dashboard** to exit the request where you see the request displayed as ***Pending Submission*** in the Work in Progress and Requests by Type widgets.



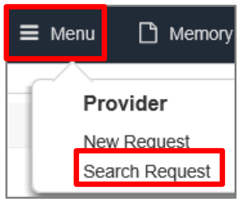
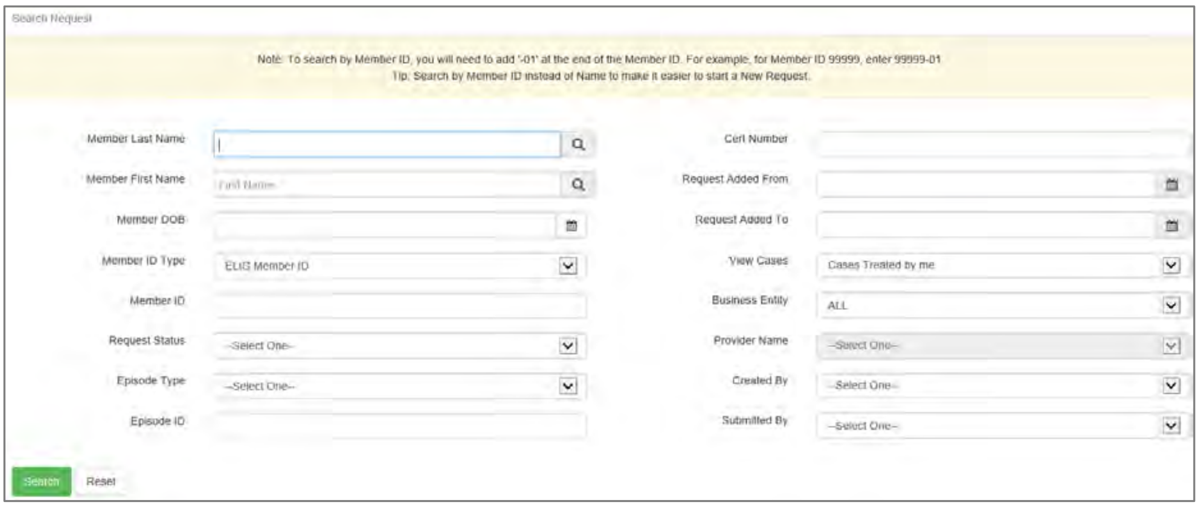
5

5 ADD CLINICAL TO AN EXISTING IP NON-CLINICAL REQUEST

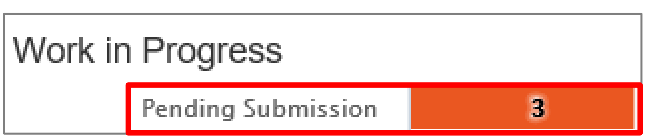
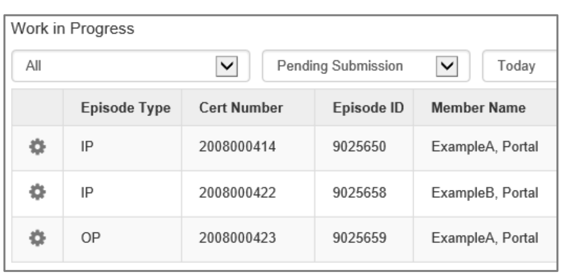
How to Add Clinical Information to Existing IP Non-Clinical Request

There are three options for accessing the non-clinical request.

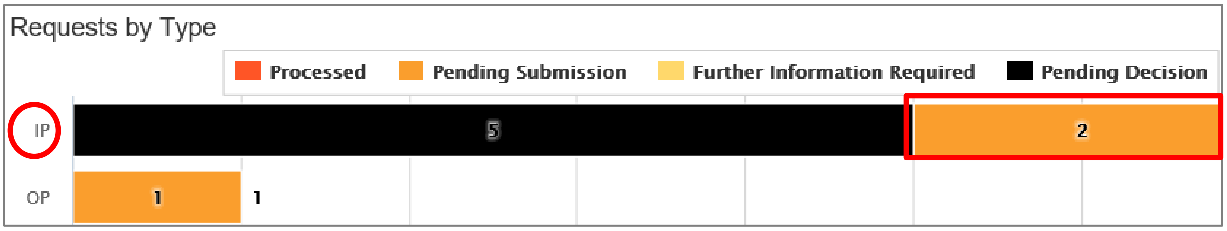
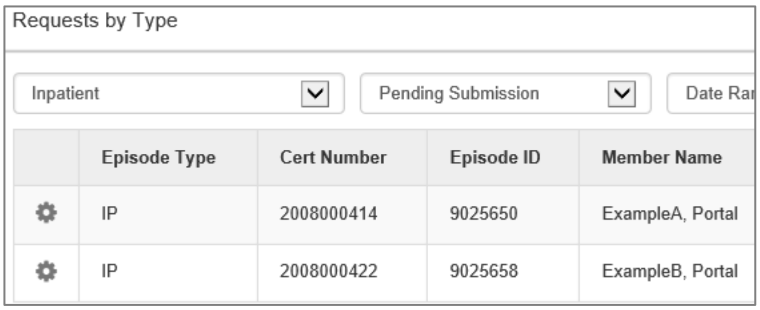
Option #1: Search Request

Step	Action
1.	Click on **Menu** and select **Search Request** 
2.	Enter the appropriate search criteria and click on the **Search** button. 
3.	What results display will be based on the refinement of the search criteria. ***Note:*** *Only those episodes for which you are either the Treating or Attending will be displayed.*

Option #2: Dashboard – Work in Progress Widget

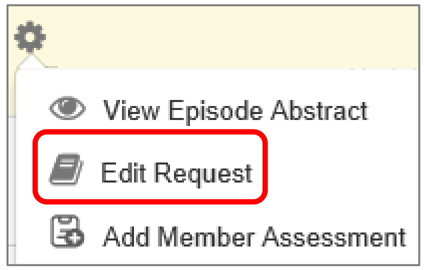
Step	Action
1.	Click on the **Pending Submission** hyperlink bar in the *Work in Progress* widget 
2.	All Pending Submission requests, regardless of Episode Type, will be displayed. 

Option #3: Dashboard – Requests by Type Widget

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Click on the Pending Submission hyperlink bar in the Request by Type widget

</td></tr>
<tr><td>2.</td><td>All Pending Submission requests for that Episode Type will be displayed.

Requests by Type
Inpatient | Pending Submission | Date Ra
<table>
<tr><th></th><th>Episode Type</th><th>Cert Number</th><th>Episode ID</th><th>Member Name</th></tr>
<tr><td></td><td>IP</td><td>2008000414</td><td>9025650</td><td>ExampleA, Portal</td></tr>
<tr><td></td><td>IP</td><td>2008000422</td><td>9025658</td><td>ExampleB, Portal</td></tr>
</table></td></tr>
</table>

Adding Clinical Information to Existing IP Non-Clinical Request – Edit Request

Follow these steps to open the request for editing.

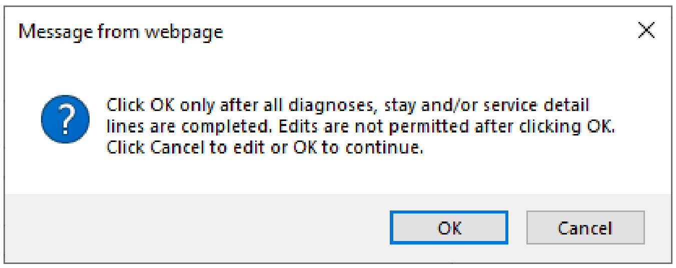
Step	Action
1.	Click on the ⚙ icon to the left of the episode and select **Edit Request**.   ***Note:*** *Depending on how you accessed the episode, you may see different options under the gear.*
2.	The request will open and is read to be updated.

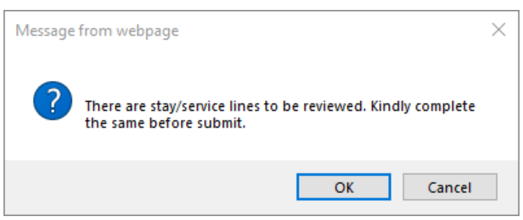
Adding Clinical Information to Existing IP Non-Clinical Request – InterQual

If you need training or have questions regarding the use of InterQual Connect criteria, please contact your facility InterQual trainer or contact your Change HealthCare account representative.

The health plan is certified to conduct training for internal associates only.

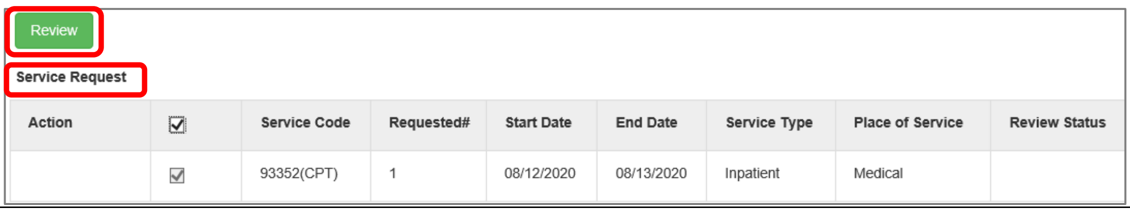
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Click the Check for Review button.

</td></tr>
<tr><td>2.</td><td>You will receive the following message. Click OK <u>only</u> if you completed the items listed.


Result: The system will run a diagnostic review of the request to determine if a Stay Request and/or a Service Request is associated with it.</td></tr>
<tr><td>3.</td><td>Once determined that one or both exists, you will receive the following pop-up message. Click OK.

</td></tr>
</table>

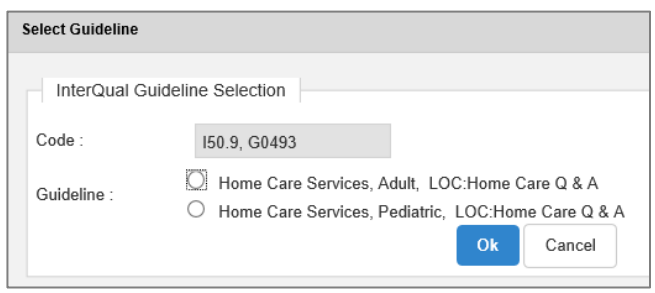
Step	Action
4.	Click the appropriate **Review** button.

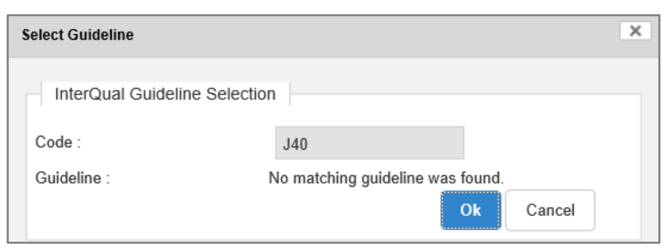
If…	Then…
Only a **Stay Request**	• Click the **Review** button associated with the **Stay Request**.
Both **Stay** and **Service Requests**	• The **Review** button associated with the Stay Request will be inactive. • Click the **Review** button associated with the **Service Request**.



Step	Action
5.	The system will connect with InterQual and determine if there is a matching guideline.

If there is…	Then…
Matching Guideline	You will receive this pop-up similar to this where you may select the appropriate guideline and click on OK. ***Proceed to Step 6 in this section.***
No Matching Guideline	You will receive this pop-up. Click **OK** to close the window and you will be returned to the request screen. ***Proceed to Adding Documents***.



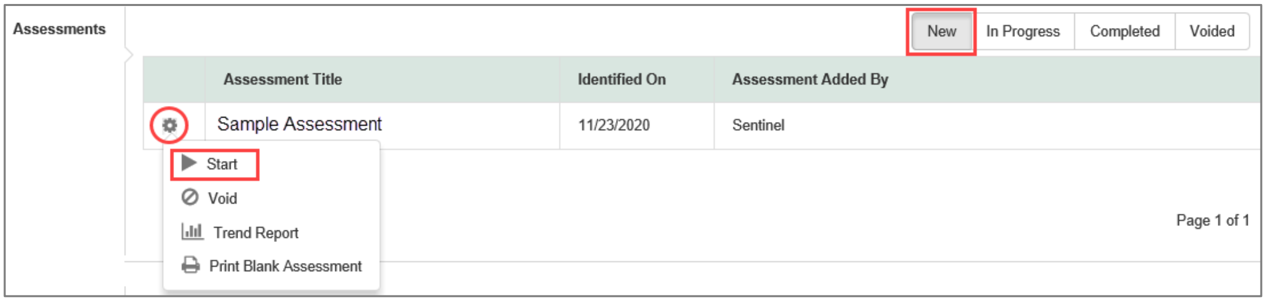


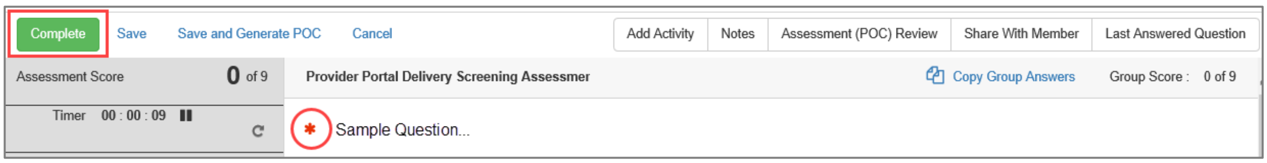
Adding Clinical Information to Existing IP Non-Clinical Request – InterQual, cont.

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>6.</td><td>After answering the review questions, the Recommendations page will display either Criteria Met or Criteria Not Met.</td></tr>
<tr><td>7.</td><td>From the Recommendations page:
<table>
<tr><th>If you click…</th><th>Then…</th></tr>
<tr><td>Save</td><td>The review will be saved and can be updated, if needed, prior to submitting the request.</td></tr>
<tr><td>Complete</td><td>The review will be saved and closed. It cannot be updated even if you have not yet submitted the request.</td></tr>
</table></td></tr>
<tr><td>8.</td><td>Close the InterQual tab to return to the Provider Portal</td></tr>
<tr><td>9.</td><td>The request line will now display a status in the Decision column.</td></tr>
</table>

Adding Clinical Information to Existing IP Non-Clinical Request – Assessments

If an assessment is associated with the request, an **Assessment** section will be displayed where you may access and complete the associated assessment.





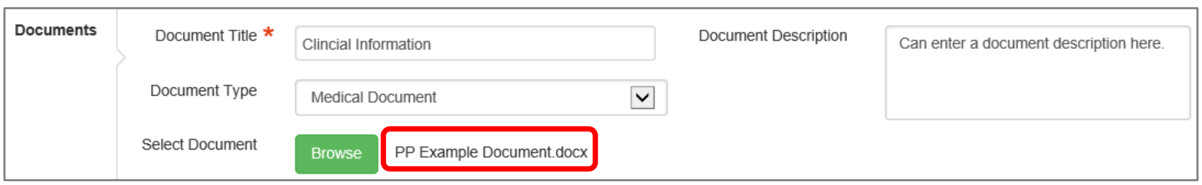
Step	Action
1.	In the **New** Tab of the Assessment section, click on the gear icon to the left of the Assessment and click on **Start**.
2.	Answer the questions. **Note** - Questions in red are mandatory.
3.	Click the **Complete** button to complete the assessment. **Note-** This will trigger any auto approval rules (if configured.) The **Save** button will **not** trigger the auto approval rules.

Adding Clinical Information to Existing IP Non-Clinical Request – Adding Documents

When submitting an **IP Clinical Request,** you must attach the clinical information. Follow these instructions to add a **Documents**.

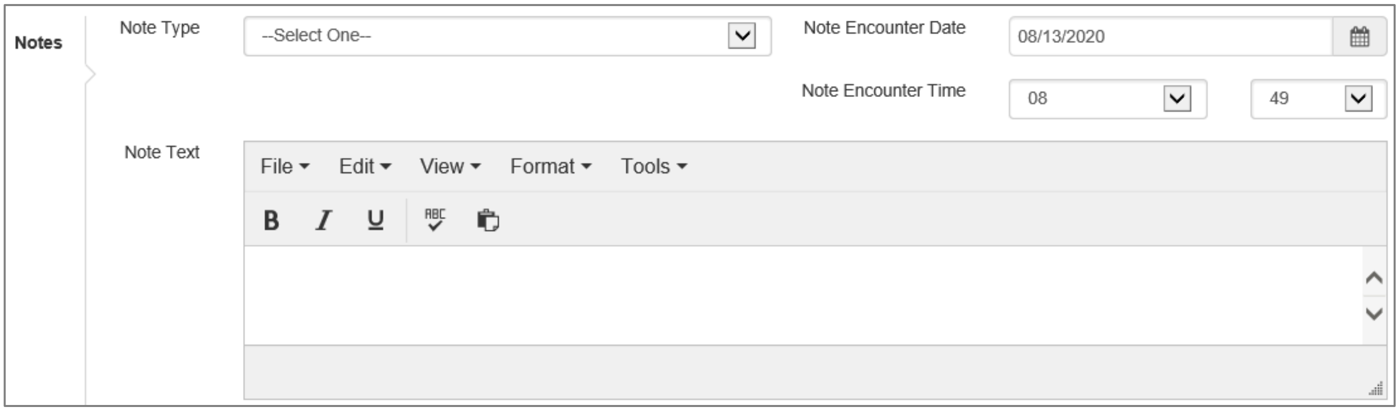
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>2.</td><td>
Complete the following:

a. **Document Title**: enter the title of the document
b. **Document Type**: defaults to **Medical Document**, update as needed.
c. **Document Description**: optional field
d. Click the **Browse** button to search for the document you wish to upload
    iii. Click the desired document and click the **Open** button
e. You will see the document name listed next to the Browse button.



</td></tr>
</table>

Adding Clinical Information to Existing IP Non-Clinical Request – Adding Notes



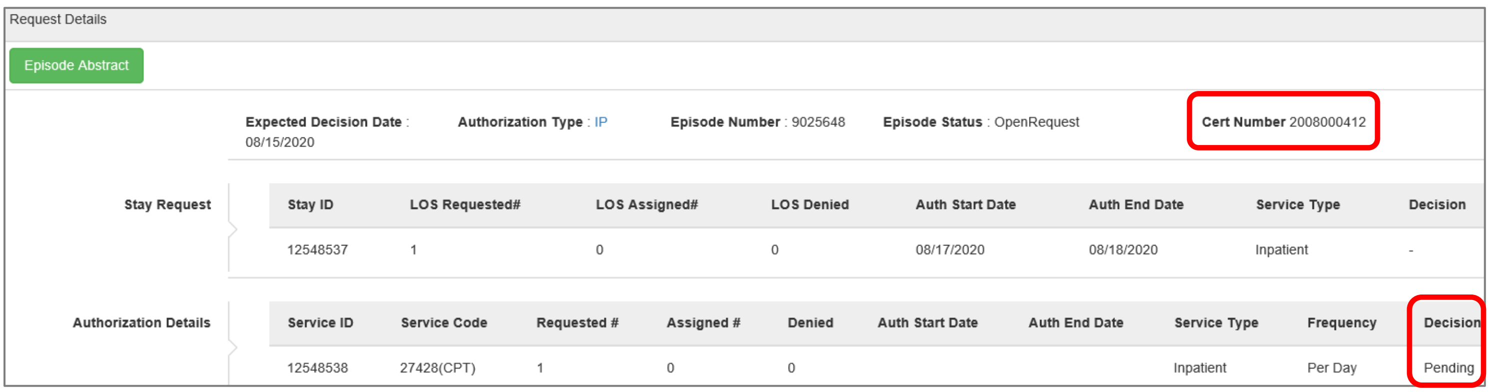
Step	Action
3.	Select the appropriate **Note Type** from the drop-down menu.
4.	Enter the appropriate notes in the notes section. Be sure to include your **name** and **contact information** in the event the Plan needs to contact you.

	This is a shared note field. Notes can be viewed and entered by both you and the Plan.

Adding Clinical Information to Existing IP Non-Clinical Request – Submitting the Request

Once all required sections are completed, you are ready to submit the request.

Step	Action
1.	Click on the **Submit** button to submit your request.  ***Note:*** *The* ***Submit*** *button will not be active until a clinical review has been completed.*
2.	The Request Details information will be displayed, including the Cert Number. ***Note:*** *If the request is programmed to auto-approve, you will see* ***Approved*** *in the* ***Decision*** *column.*



Request Details

Episode Abstract

Expected Decision Date : 08/15/2020 **Authorization Type** : IP **Episode Number** : 9025648 **Episode Status** : OpenRequest **Cert Number** 2008000412

Stay Request

Stay ID	LOS Requested#	LOS Assigned#	LOS Denied	Auth Start Date	Auth End Date	Service Type	Decision
12548537	1	0	0	08/17/2020	08/18/2020	Inpatient	-

Authorization Details

Service ID	Service Code	Requested #	Assigned #	Denied	Auth Start Date	Auth End Date	Service Type	Frequency	Decision
12548538	27428(CPT)	1	0	0			Inpatient	Per Day	Pending

6

6 ENTER AN OP CLINICAL REQUEST

How to Enter an Outpatient Clinical Request

When entering a request you have 2 options:

1) Enter a clinical request which includes all clinical information.
2) Enter a non-clinical request where the clinical information can be added at a later time

The steps in this chapter outline how to enter an OP clinical request. Reference chapter 7 “How to Enter an OP Non-clinical Request” and Chapter 8 “How to Add Clinical Information to an Existing OP Non-clinical Request” for more information.

When entering a **clinical** request, you **must provide** the following information:

- **Episode Details**
- **Diagnosis- primary a must, secondary is optional**
- **Treating Provider**
- **Referring Provider**
- **Add service request**
- **Add Assessments (if triggered)**
- **Clinical Information**

Adding a New OP Clinical Request – Adding Episode Details

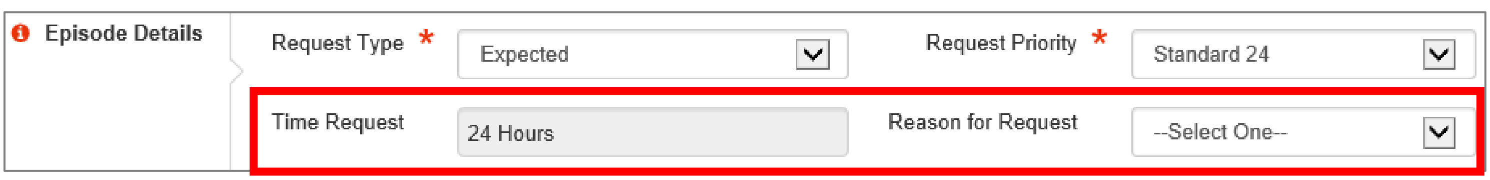
After locating the member *(following the steps outlined in Chapter 2)*, click on **Add New Request** and select **Outpatient** from the drop-down list.

The Member Demographics are at the top of the page. You may click the drop-down caret on the right to expand the demographics window.

Follow these steps to complete the **Episode Details** section:

Step	Action
1.	**Request Type**: defaults to **Expected**, update if appropriate
2.	**Request Priority:** defaults to **Standard 24**, update if appropriate

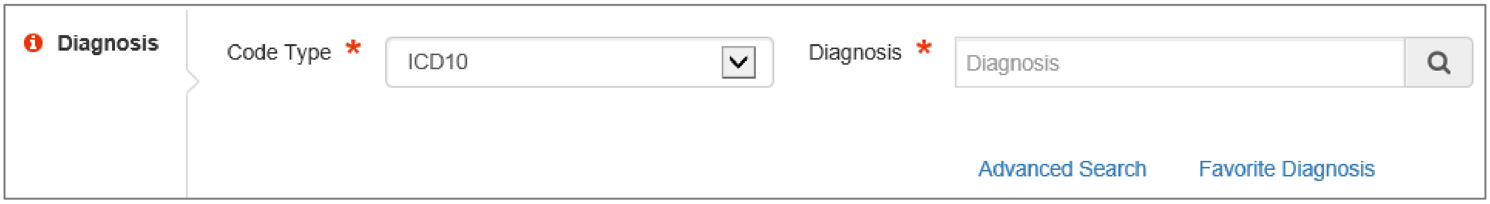
If you click the **Optional Fields** hyperlink, additional fields will be displayed.

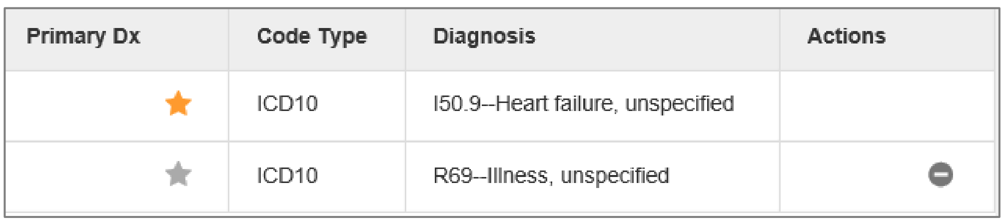


- **Time Request:** This field will auto-populated based on the **Request Priority**.
- **Reason for Request:** Select the appropriate reason from the drop down.

Adding a New OP Clinical Request – Adding Diagnosis

You can add multiple diagnoses from this screen or you can utilize the **Favorite Diagnosis** hyperlink to save time and keystrokes. The **Favorite Diagnosis** function will allow you to create and manage a list of frequently used diagnoses. The list is unique to the provider's account. Reference Chapter 9 "*Favorite Diagnosis List – How to Create a Favorites List*."



<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Code Type will default to ICD10. You may select a different code type if applicable.</td></tr>
<tr><td>2.</td><td>Type the diagnosis or code in the Diagnosis field.
You may also use the Advanced Search function, if needed.</td></tr>
<tr><td>3.</td><td>Once you select the diagnosis, it will display on the screen and be attached to the episode.

<table>
<tr><th>Primary Dx</th><th>Code Type</th><th>Diagnosis</th><th>Actions</th></tr>
<tr><td></td><td>ICD10</td><td>I50.9--Heart failure, unspecified</td><td></td></tr>
<tr><td></td><td>ICD10</td><td>R69--Illness, unspecified</td><td></td></tr>
</table></td></tr>
<tr><td>4.</td><td>
<table>
<tr><th>If you…</th><th>Then…</th></tr>
<tr><td>want to add additional diagnoses</td><td>Repeat steps 2 and 3.

<u>Note</u>:
- Click the remove icon to remove a diagnosis from the request.

- You cannot remove a diagnosis unless there is more than one diagnosis already selected

- Click the Star in the Primary Dx column if you need to designate a different diagnosis as primary.</td></tr>
<tr><td><u>do not</u> want to add additional diagnoses</td><td>Proceed to the Providers section of the episode.</td></tr>
</table>
</td></tr>
</table>

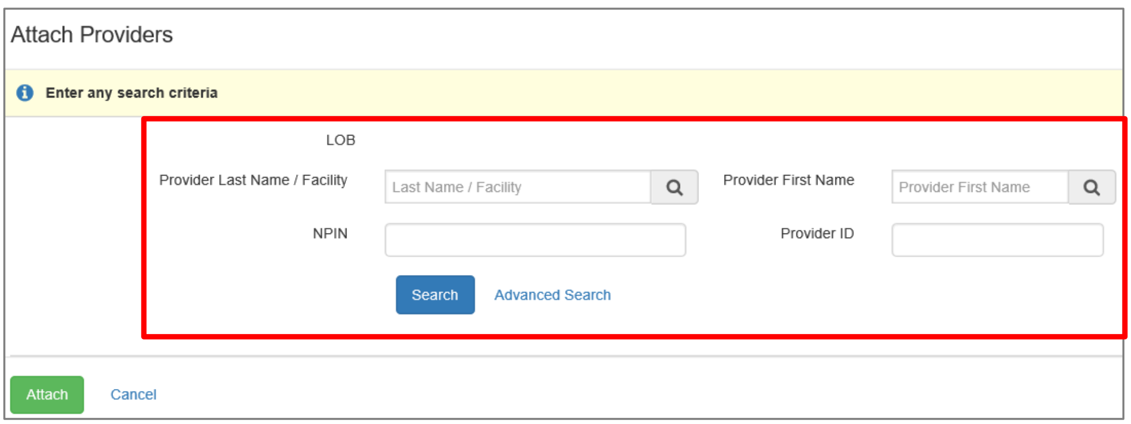
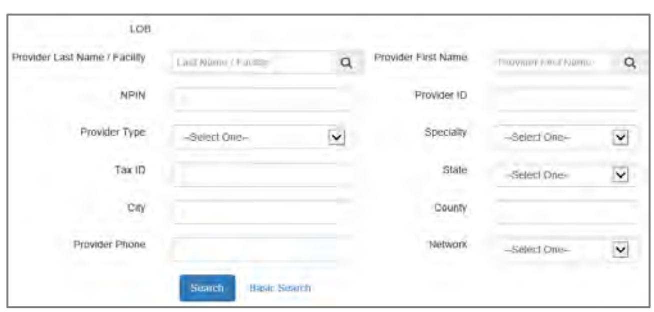
Adding a New OP Clinical Request – Adding Providers

All Outpatient requests should contain a **Treating** provider (Facility or Agency providing the service) and a **Referring** provider (physician or group referring the member for services).

The steps below outline the processes for adding providers to the request.

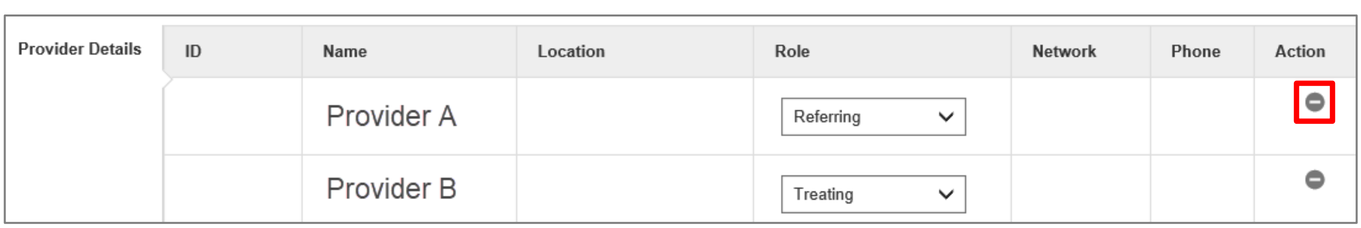
	**Favorite Providers** - You can utilize the Favorite Providers hyperlink to save time and keystrokes. The **Favorite Providers** list will allow you to create and manage a list of frequently used providers. Reference Chapter 9 "*Favorite Providers List–How to Create a Favorites List*."

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Click the Attach Providers button.

</td></tr>
<tr><td>2.</td><td>Enter the appropriate search criteria and click on Search.

</td></tr>
<tr><td>3.</td><td>After clicking Search:
<table>
<tr><th>If appropriate provider…</th><th>Then…</th></tr>
<tr><td>Is displayed</td><td>Click the Attach button</td></tr>
<tr><td>Is not displayed</td><td>You may use the Advanced Search functionality and click the Attach button after locating the provider

</td></tr>
</table></td></tr>
</table>

Step	Action
4.	• Search for the facility. • Once you have located the facility, select "**Treating**" from the drop-down list in the ***Provider Role*** column, click the icon next to the provider row and select Single Attach to attach the provider to the episode. ***Result:*** The Provider will be attached and listed in the **Providers** section of the episode.
5.	• Search for the attending physician. • Once you have located the physician, select "**Referring**" from the drop-down list in the ***Provider Role*** column, click the icon next to the provider row and select Single Attach to attach the provider to the episode. ***Result:*** The Provider will be attached and listed in the **Providers** section of the episode.

If you want to …	Then…
Attach <u>multiple providers</u> to an episode at the same time	Follow the steps outlined below: • Search for the desired providers • In the row of each desired provider in the search results screen, select the appropriate Provider Role from the drop-down list, click the icon next to the row and select the Multiple Attach option • As each provider is selected, they will be added to the "**Selected Providers List**" at the bottom of the screen • When all providers have been added, verify the selected Provider Role and click the Attach button to add them to the episode.



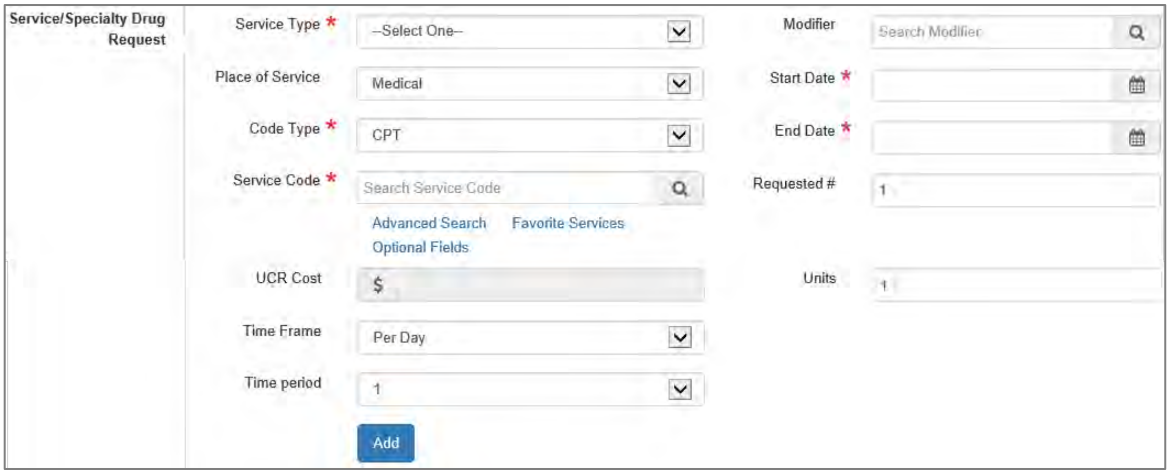
<u>NOTE:</u>

- If the incorrect provider is attached, click the **Deactivate** icon to deactivate the facility. The facility will be removed from the episode.

Adding a New OP Clinical Request – Adding Service Request

You will need to complete the ***Service/Specialty Drug Request*** *section.*

> **Favorite Services** - You can utilize the Favorite Services hyperlink to save time and keystrokes. The **Favorite Services** list will allow you to create and manage a list of frequently used services. Reference Chapter 9 "*Favorite Services List–How to Create a Favorites List*."



Step	Action
1.	Complete information in the **Service Request** section (*if applicable*) using the guidelines outlined below:

Service Type	Choose the appropriate selection from the drop-down list.
Place of Service	Choose the appropriate selection from the drop-down list.
Code Type	Auto-populated to CPT, update if necessary.
Service Code	Enter the requested service code. ***Note:*** You can type the service code or a description of the code. As information is typed, the auto coder will automatically display matches in the drop-down list. Select the appropriate service from the list. You can also use the **Advanced Search** link to initiate a search for the service code.
Modifier	Enter modifier details as appropriate
Start Date	Enter the date of the requested service
End Date	Enter the end date of the service
Requested #	Enter the appropriate units/visits

To view these fields, you may need to click on the **Optional Fields** hyperlink.

Time Frame	Defaults to Per Day.
Time Period	Defaults to 1.
Units/Visits	Defaults to 1. Enter the appropriate units/visits.

Adding a New OP Clinical Request – Adding Service Request, cont.

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>2.</td><td>Click the Add button.
Result: The Service Request line will now be populated (appears below the Service Request fields)

Service Request
<table>
<tr><th>Action</th><th>Service Code</th><th>Requested#</th><th>Start Date</th><th>End Date</th><th>Service Type</th><th>Place of Service</th></tr>
<tr><td>⊖</td><td>G0493(HCPC)</td><td>5</td><td>08/17/2020</td><td>09/01/2020</td><td>Home</td><td>Medical</td></tr>
<tr><td>⊖</td><td>S9131(HCPC)</td><td>14</td><td>08/19/2020</td><td>09/02/2020</td><td>Home</td><td>Medical</td></tr>
</table>
Note: If a Service Request was added in error or with incorrect information, you may click the icon in the Action column to remove the given line.</td></tr>
<tr><td>3.</td><td>Repeat Steps 2 & 3 if additional service requests need to be added</td></tr>
</table>

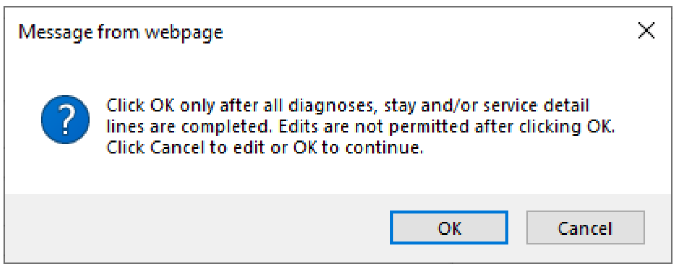
Adding a New OP Clinical Request – InterQual

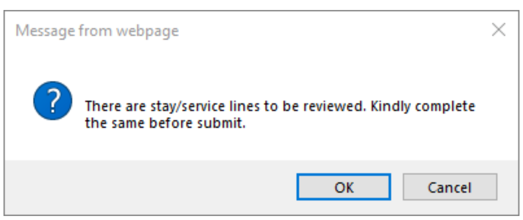
Access and complete InterQual Connect Clinical Criteria

If you need training or have questions regarding the use of InterQual Connect criteria, please contact your facility InterQual trainer or contact your Change HealthCare account representative.

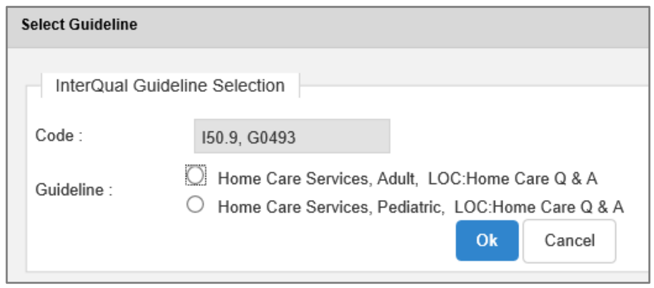
The health plan is certified to conduct training for internal associates only.

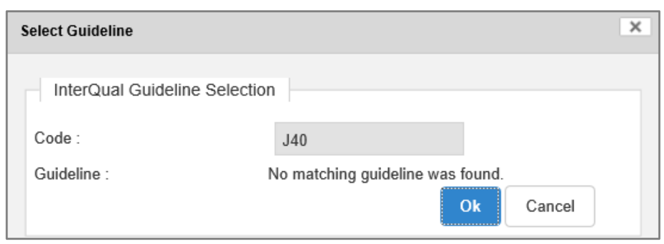
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Click the Check for Review button.

</td></tr>
<tr><td>2.</td><td>You will receive the following message. Click OK <u>only</u> if you completed the items listed.


Result: The system will run a diagnostic review of the request to determine if a Stay Request and/or a Service Request is associated with it.</td></tr>
<tr><td>3.</td><td>Once determined that one or both exists, you will receive the following pop-up message. Click OK.

</td></tr>
</table>

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>4.</td><td>Click the Review button.


</td></tr>
<tr><td>5.</td><td>The system will connect with InterQual and determine if there is a matching guideline.
<table>
<tr><th>If there is…</th><th>Then…</th></tr>
<tr><td>Matching Guideline</td><td>You will receive this pop-up similar to this where you may select the appropriate guideline and click on OK. Proceed to Step 6 in this section.


</td></tr>
<tr><td>No Matching Guideline</td><td>You will receive this pop-up. Click OK to close the window and you will be returned to the request screen. Proceed to Adding Documents.


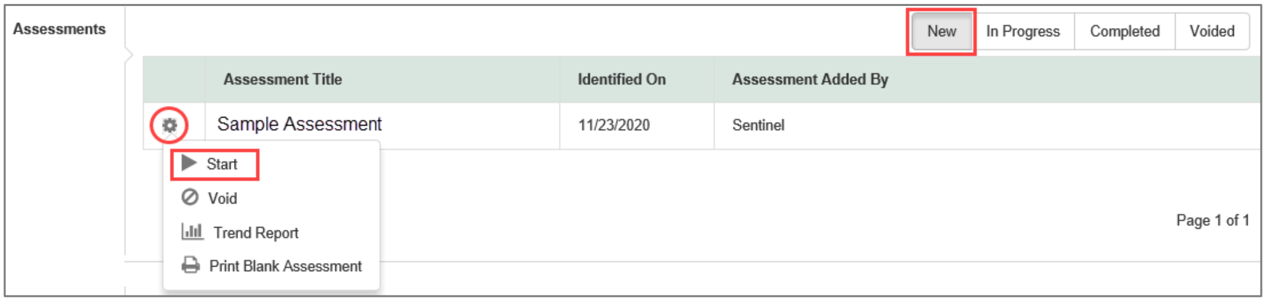
</td></tr>
</table>
</td></tr>
</table>

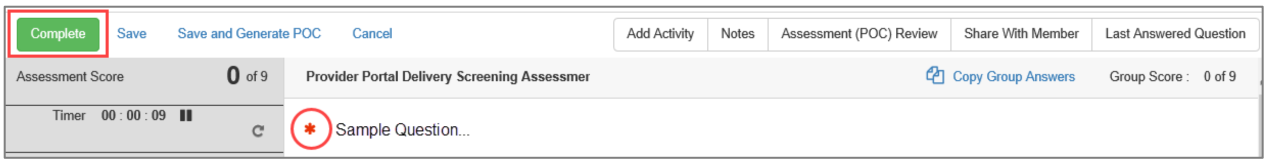
Adding a New OP Clinical Request – InterQual, cont.

Step	Action
6.	After answering the review questions, the Recommendations page will display either **Criteria Met** or **Criteria Not Met.**
7.	From the **Recommendations** page: <table><tr><th>If you click…</th><th>Then…</th></tr><tr><td>**Save**</td><td>The review will be saved and can be updated, if needed, prior to submitting the request.</td></tr><tr><td>**Complete**</td><td>The review will be saved and closed. It cannot be updated even if you have not yet submitted the request.</td></tr></table>
8.	Close the InterQual tab to return to the Provider Portal
9.	The request line will now display a status in the **Decision** column.

Adding a New OP Clinical Request – Adding Assessments

If an assessment is associated with the request, an **Assessment** section will be displayed where you may access and complete the associated assessment.

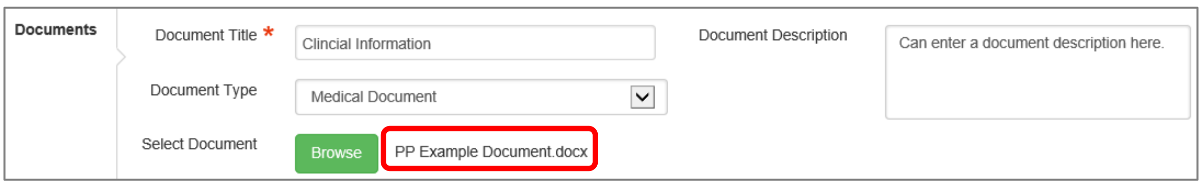




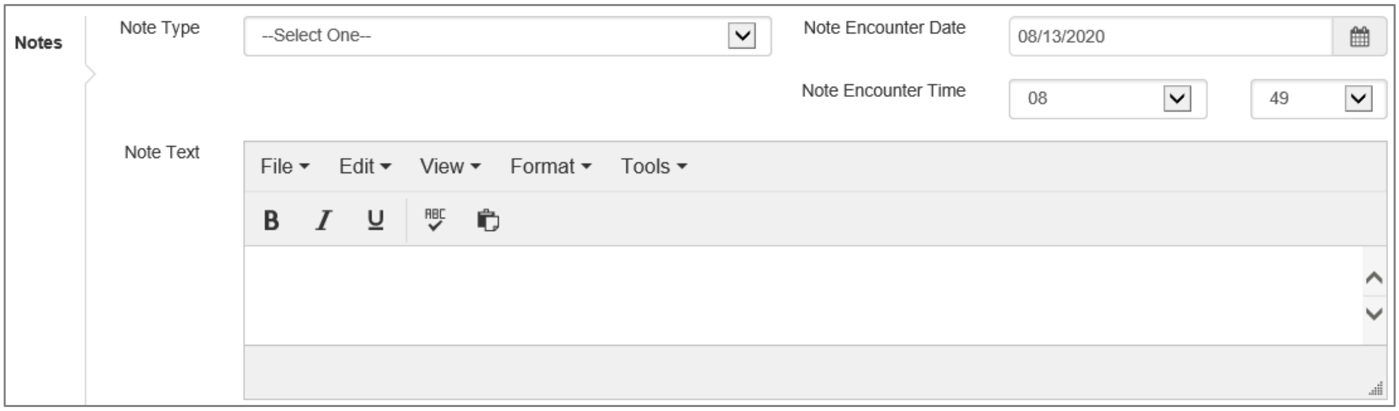
Step	Action
1.	In the **New** Tab of the Assessment section, click on the gear icon to the left of the Assessment and click on **Start**.
2.	Answer the questions. **Note** - Questions in red are mandatory.
3.	Click the **Complete** button to complete the assessment. **Note**- This will trigger any auto approval rules (if configured.) The **Save** button will **not** trigger the auto approval rules.

Adding a New OP Clinical Request – Adding Documents

When submitting an **OP Clinical Request,** you must attach the clinical information. Follow these instructions to add a **Documents**.

Step	Action
1.	Complete the following: a. **Document Title**: enter the title of the document b. **Document Type**: defaults to **Medical Document**, update as needed. c. **Document Description**: optional field d. Click the **Browse** button to search for the document you wish to upload iv. Click the desired document and click the **Open** button e. You will see the document name listed next to the Browse button. 

Adding a New OP Clinical Request – Adding Notes



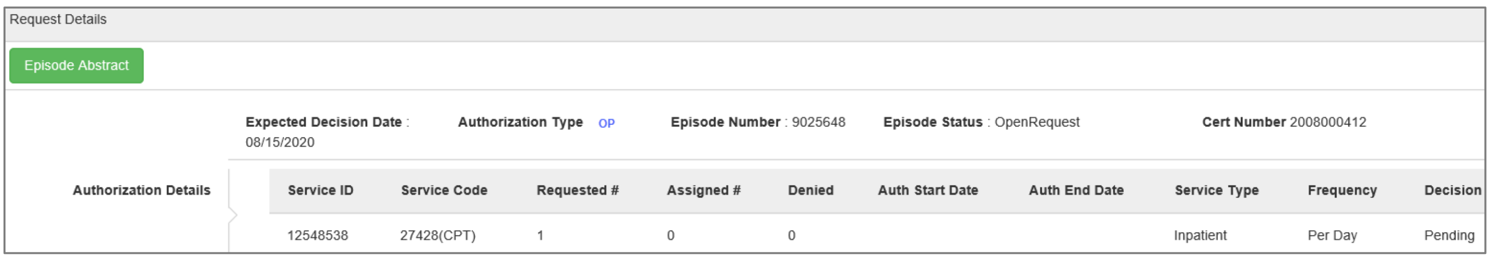
Step	Action
1.	Select the appropriate **Note Type** from the drop-down menu.
2.	Enter the appropriate notes in the notes section. Be sure to include your **name** and **contact information** in the event the Plan needs to contact you.

	This is a shared note field. Notes can be viewed and entered by both you and the Plan.

Adding a New OP Clinical Request – Submitting the Request

Once all required sections are completed, you are ready to submit the request.

Step	Action
1.	Click on the **Submit** button to submit your request.  ***Note:*** *The* ***Submit*** *button will not be active until a clinical review has been completed.*
2.	The Request Details information will be displayed, including the Cert Number. ***Note:*** *If the request is programmed to auto-approve, you will see* ***Approved*** *in the* ***Decision*** *column.*



7

7 ENTER AN OP NON-CLINICAL REQUEST

How to Enter an Outpatient Non-Clinical Request

A non-clinical request can be started by non-clinical staff or anyone who does not have clinical information available at the time of entry.

The non-clinical request can be saved and is available to access at a later time in order to add clinical data.

When entering a **non-clinical** request, you **must provide** the following information:

- **Episode Details**
- **Diagnosis- primary a must, secondary is optional**
- **Treating Provider**
- **Referring Provider**
- **Add service request**

Adding a New OP Non-Clinical Request – Adding Episode Details

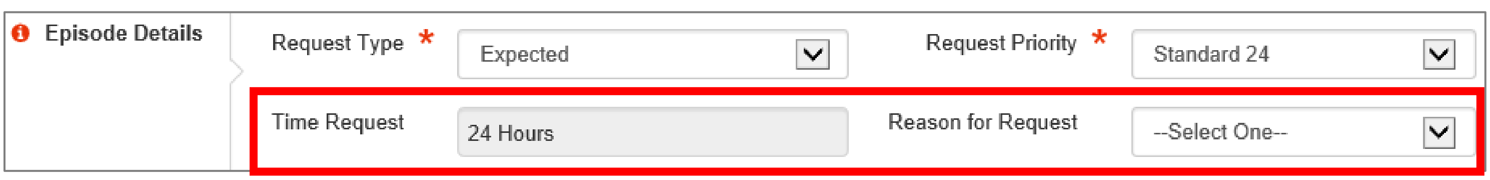
After locating the member *(following the steps outlined in Chapter 2)*, click on **Add New Request** and select **Outpatient** from the drop-down list.

The Member Demographics are at the top of the page. You may click the drop-down caret on the right to expand the demographics window.

Follow these steps to complete the **Episode Details** section:

Step	Action
1.	**Request Type**: defaults to **Expected**, update if appropriate
2.	**Request Priority:** defaults to **Standard 24**, update if appropriate

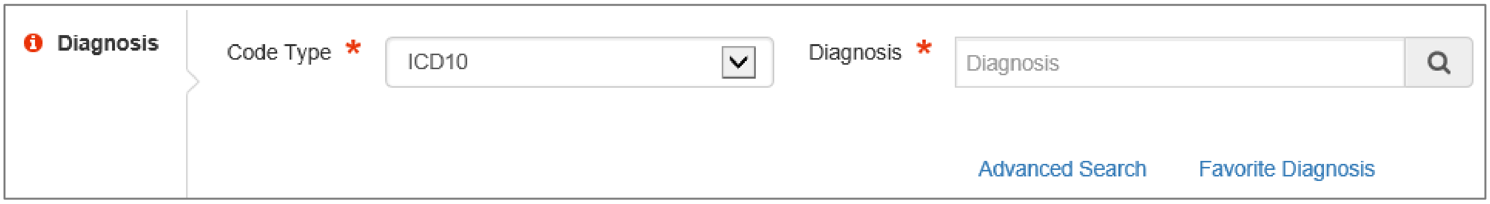
If you click the **Optional Fields** hyperlink, additional fields will be displayed.

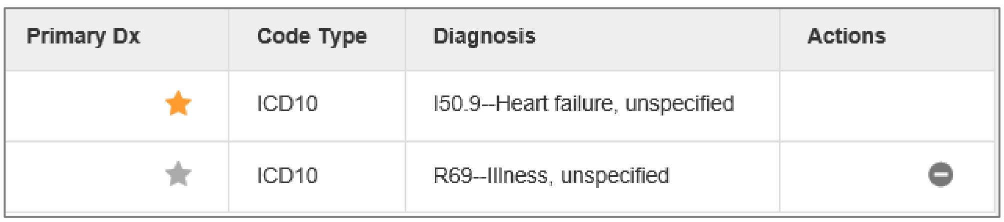


- **Time Request:** This field will auto-populated based on the **Request Priority**.
- **Reason for Request:** Select the appropriate reason from the drop down.

Adding a New OP Non-Clinical Request – Adding Diagnosis

You can add multiple diagnoses from this screen or you can utilize the **Favorite Diagnosis** hyperlink to save time and keystrokes. The **Favorite Diagnosis** function will allow you to create and manage a list of frequently used diagnoses. The list is unique to the provider's account. Reference Chapter 9 "*Favorite Diagnosis List – How to Create a Favorites List*."



<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Code Type will default to ICD10. You may select a different code type if applicable.</td></tr>
<tr><td>2.</td><td>Type the diagnosis or code in the Diagnosis field.
You may also use the Advanced Search function, if needed.</td></tr>
<tr><td>3.</td><td>Once you select the diagnosis, it will display on the screen and be attached to the episode.

<table>
<tr><th>Primary Dx</th><th>Code Type</th><th>Diagnosis</th><th>Actions</th></tr>
<tr><td></td><td>ICD10</td><td>I50.9--Heart failure, unspecified</td><td></td></tr>
<tr><td></td><td>ICD10</td><td>R69--Illness, unspecified</td><td></td></tr>
</table></td></tr>
<tr><td>4.</td><td>
<table>
<tr><th>If you…</th><th>Then…</th></tr>
<tr><td>want to add additional diagnoses</td><td>Repeat steps 2 and 3.

<u>Note</u>:
- Click the remove icon to remove a diagnosis from the request.

- You cannot remove a diagnosis unless there is more than one diagnosis already selected

- Click the Star in the Primary Dx column if you need to designate a different diagnosis as primary.</td></tr>
<tr><td><u>do not</u> want to add additional diagnoses</td><td>Proceed to the Providers section of the episode.</td></tr>
</table></td></tr>
</table>

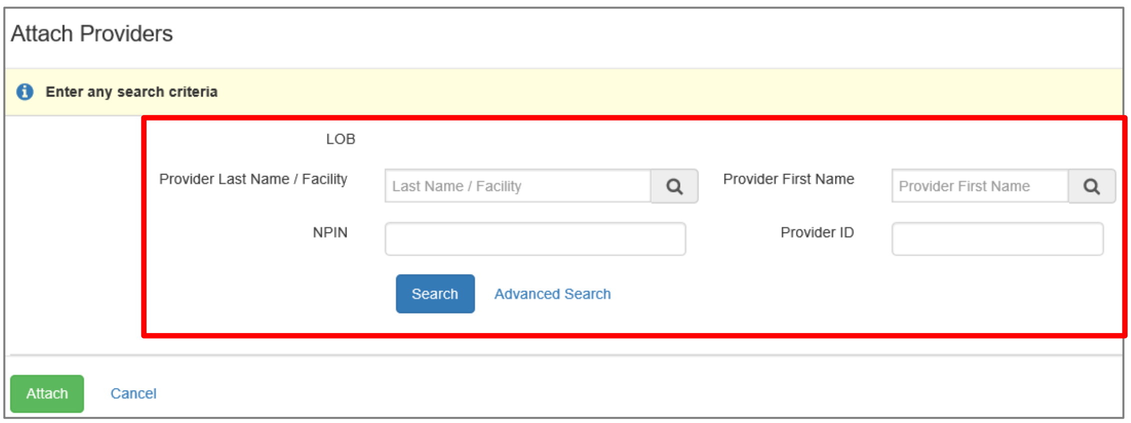
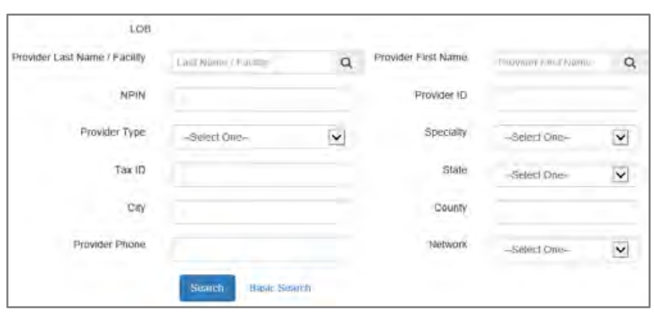
Adding a New OP Non-Clinical Request – Adding Providers

All Outpatient requests should contain a **Treating** provider (Facility or Agency providing the service) and a **Referring** provider (physician or group referring the member for services).

The steps below outline the processes for adding providers to the request.

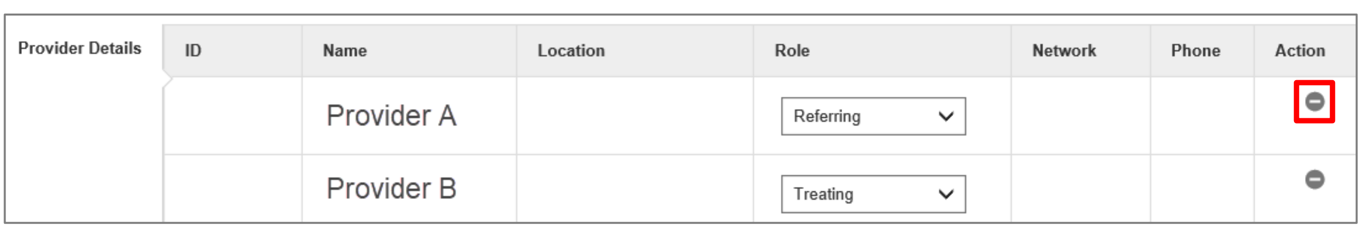
<table>
<tr><td></td><td>Favorite Providers - You can utilize the Favorite Providers hyperlink to save time and keystrokes. The Favorite Providers list will allow you to create and manage a list of frequently used providers. Reference Chapter 9 “Favorite Providers List–How to Create a Favorites List.”</td></tr>
</table>

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Click the Attach Providers button.

</td></tr>
<tr><td>2.</td><td>Enter the appropriate search criteria and click on Search.

</td></tr>
<tr><td>3.</td><td>After clicking Search:
<table>
<tr><th>If appropriate provider…</th><th>Then…</th></tr>
<tr><td>Is displayed</td><td>Click the Attach button</td></tr>
<tr><td>Is not displayed</td><td>You may use the Advanced Search functionality and click the Attach button after locating the provider

</td></tr>
</table></td></tr>
</table>

Step	Action
4.	• Search for the facility. • Once you have located the facility, select "**Treating**" from the drop-down list in the ***Provider Role*** column, click the icon next to the provider row and select Single Attach to attach the provider to the episode. ***Result:*** The Provider will be attached and listed in the **Providers** section of the episode.
5.	• Search for the attending physician. • Once you have located the physician, select "**Referring**" from the drop-down list in the ***Provider Role*** column, click the icon next to the provider row and select Single Attach to attach the provider to the episode. ***Result:*** The Provider will be attached and listed in the **Providers** section of the episode.

If you want to …	Then…
Attach <u>multiple providers</u> to an episode at the same time	Follow the steps outlined below: • Search for the desired providers • In the row of each desired provider in the search results screen, select the appropriate Provider Role from the drop-down list, click the icon next to the row and select the Multiple Attach option • As each provider is selected, they will be added to the "**Selected Providers List**" at the bottom of the screen • When all providers have been added, verify the selected Provider Role and click the Attach button to add them to the episode.



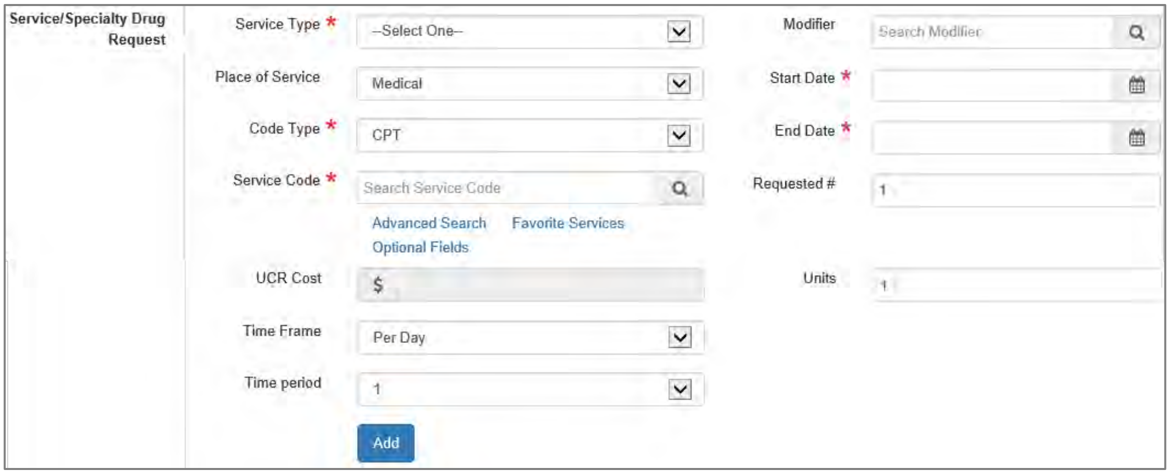
<u>NOTE:</u>

- If the incorrect provider is attached, click the **Deactivate** icon to deactivate the facility. The facility will be removed from the episode.

Adding a New OP Non-Clinical Request – Adding Service Request

You will need to complete the ***Service/Specialty Drug Request*** *section.*

	**Favorite Services** - You can utilize the Favorite Services hyperlink to save time and keystrokes. The **Favorite Services** list will allow you to create and manage a list of frequently used services. Reference Chapter 9 "*Favorite Services List–How to Create a Favorites List*."



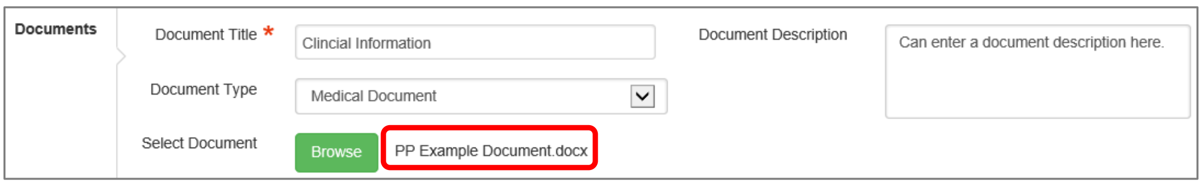
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>
Complete information in the Service Request section (if applicable) using the guidelines outlined below:
<table>
<tr><td>Service Type</td><td>Choose the appropriate selection from the drop-down list.</td></tr>
<tr><td>Place of Service</td><td>Choose the appropriate selection from the drop-down list.</td></tr>
<tr><td>Code Type</td><td>Auto-populated to CPT, update if necessary.</td></tr>
<tr><td>Service Code</td><td>Enter the requested service code.
Note: You can type the service code or a description of the code. As information is typed, the auto coder will automatically display matches in the drop-down list. Select the appropriate service from the list. You can also use the Advanced Search link to initiate a search for the service code.</td></tr>
<tr><td>Modifier</td><td>Enter modifier details as appropriate</td></tr>
<tr><td>Start Date</td><td>Enter the date of the requested service</td></tr>
<tr><td>End Date</td><td>Enter the end date of the service</td></tr>
<tr><td>Requested #</td><td>Enter the appropriate units/visits</td></tr>
</table>
To view these fields, you may need to click on the Optional Fields hyperlink.
<table>
<tr><td>Time Frame</td><td>Defaults to Per Day.</td></tr>
<tr><td>Time Period</td><td>Defaults to 1.</td></tr>
<tr><td>Units/Visits</td><td>Defaults to 1. Enter the appropriate units/visits.</td></tr>
</table>
</td></tr>
</table>

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>2.</td><td>Click the Add button.
Result: The Service Request line will now be populated (appears below the Service Request fields)

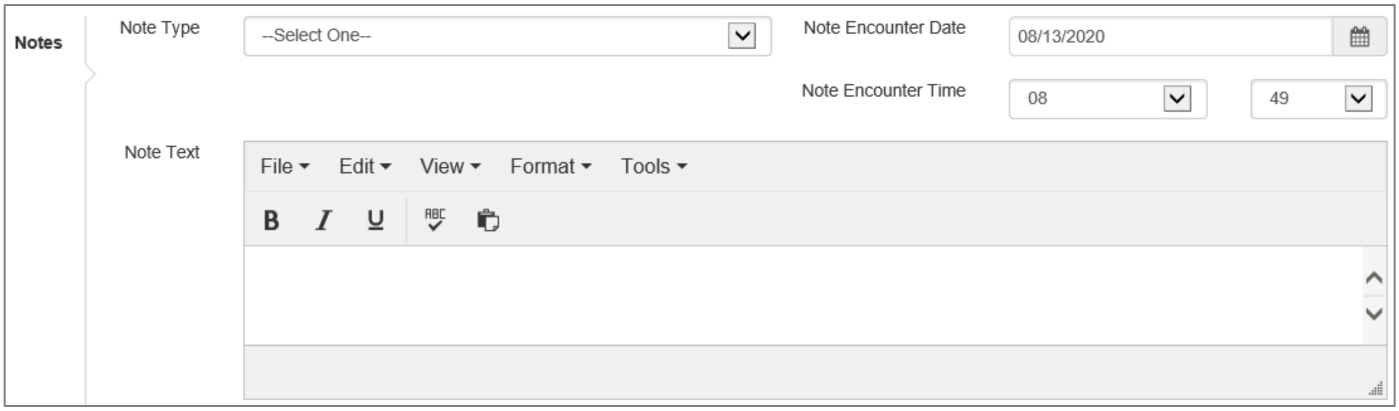
Service Request
<table>
<tr><th>Action</th><th>Service Code</th><th>Requested#</th><th>Start Date</th><th>End Date</th><th>Service Type</th><th>Place of Service</th></tr>
<tr><td></td><td>G0493(HCPC)</td><td>5</td><td>08/17/2020</td><td>09/01/2020</td><td>Home</td><td>Medical</td></tr>
<tr><td></td><td>S9131(HCPC)</td><td>14</td><td>08/19/2020</td><td>09/02/2020</td><td>Home</td><td>Medical</td></tr>
</table>
Note: If a Service Request was added in error or with incorrect information, you may click the icon in the Action column to remove the given line.</td></tr>
<tr><td>3.</td><td>Repeat Steps 2 & 3 if additional service requests need to be added</td></tr>
</table>

Adding a New OP Non-Clinical Request – Adding Documents

Follow these instructions to add a **Documents**.

Step	Action
1.	Complete the following: a. **Document Title**: enter the title of the document b. **Document Type**: defaults to **Medical Document**, update as needed. c. **Document Description**: optional field d. Click the **Browse** button to search for the document you wish to upload v. Click the desired document and click the **Open** button e. You will see the document name listed next to the Browse button. 

Adding a New OP Non-Clinical Request – Adding Notes



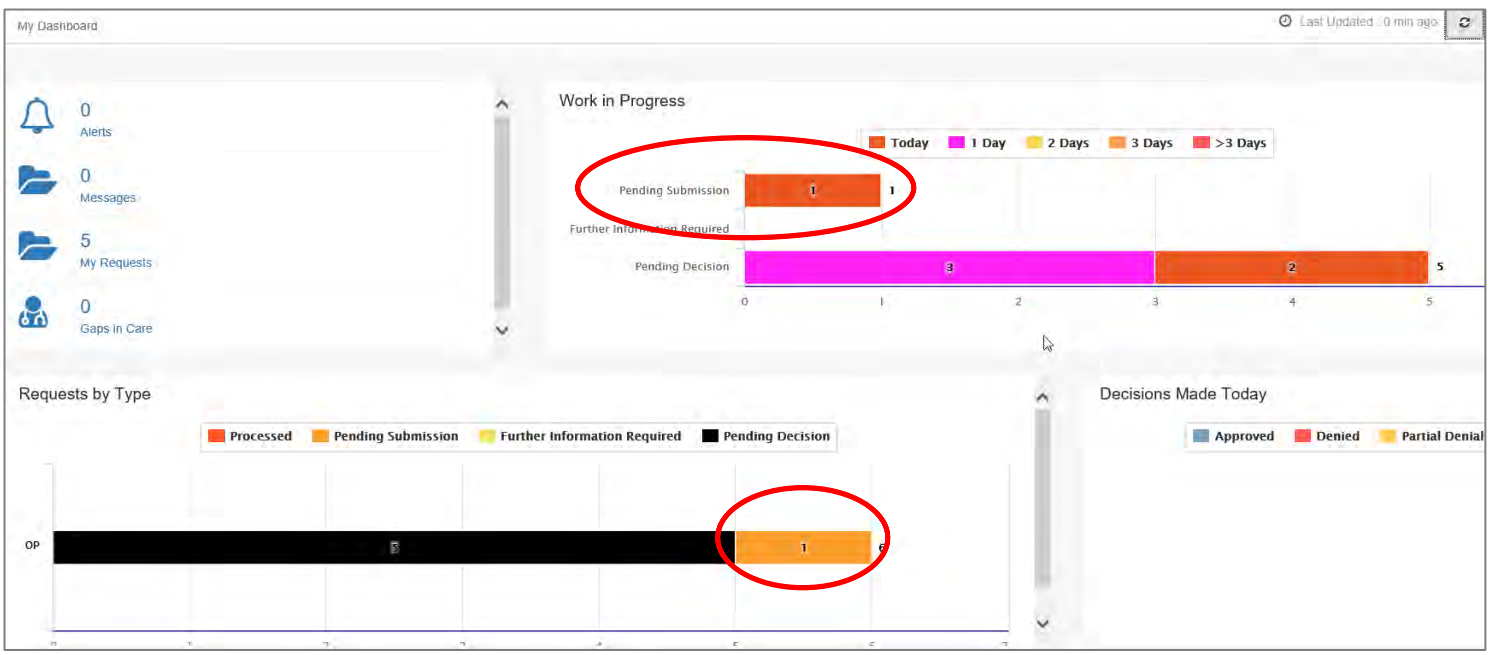
Step	Action
1.	Select the appropriate **Note Type** from the drop-down menu.
2.	Enter the appropriate notes in the notes section. Be sure to include your **name** and **contact information** in the event the Plan needs to contact you.

	This is a shared note field. Notes can be viewed and entered by both you and the Plan.

Adding a New OP Non-Clinical Request – Saving as Draft

The **Non-clinical** request must be saved so it is available to access at a later time in order to add clinical data.

Step	Action
1.	Click on the **Save as Draft** button to submit your request.  ***Note:*** *The **Submit** button will not be active until a clinical review has been completed.*
2.	You will be taken to the top of the request where you will see that it is now in **Draft** status (upper left corner). 
3.	You may click on **Dashboard** to exit the request where you see the request displayed as ***Pending Submission*** in the Work in Progress and Requests by Type widgets.



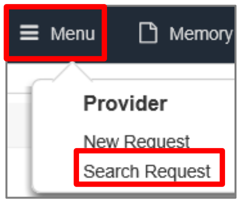
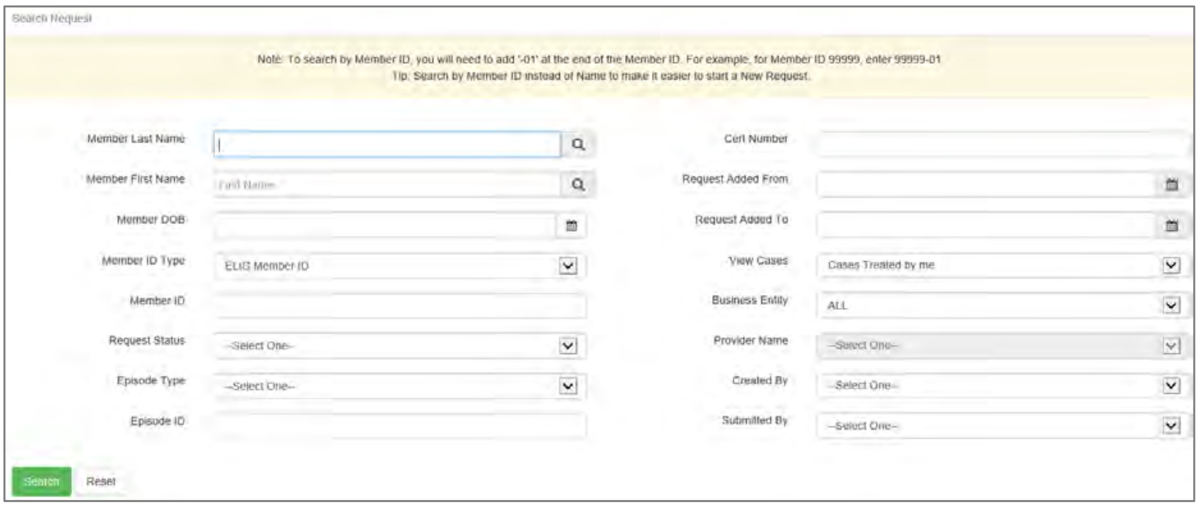
8

8 ADD CLINICAL TO AN EXISTING OP NON-CLINICAL REQUEST

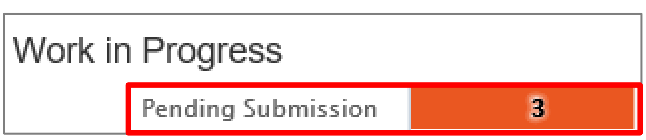
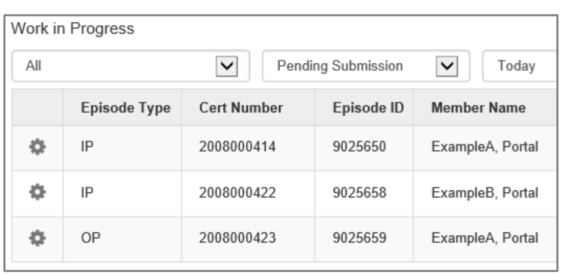
Adding Clinical Information to an Existing OP Non-clinical Request

There are three options for accessing the non-clinical request.

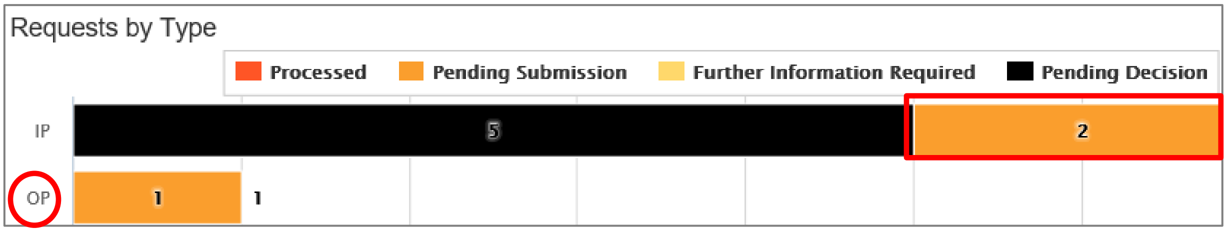
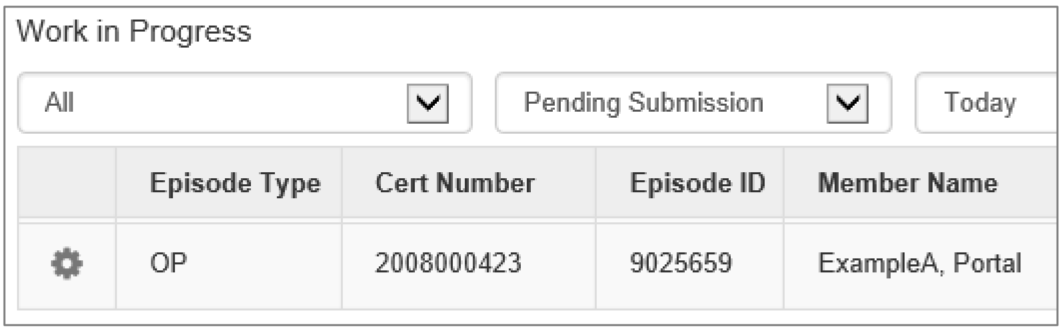
Option #1: Search Request

Step	Action
1.	Click on **Menu** and select **Search Request** 
2.	Enter the appropriate search criteria and click on the **Search** button. 
3.	What results display will be based on the refinement of the search criteria. ***Note:*** *Only those episodes for which you are either the Treating or Attending will be displayed.*

Option #2: Dashboard – Work in Progress Widget

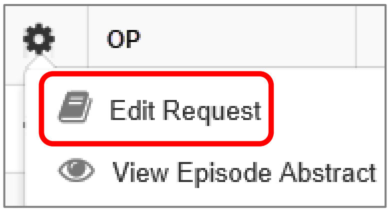
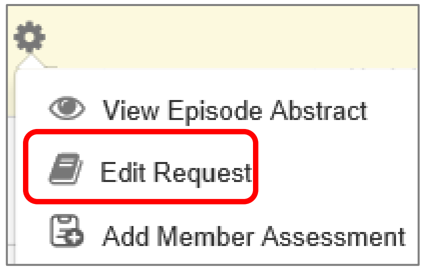
Step	Action
1.	Click on the **Pending Submission** hyperlink bar in the *Work in Progress* widget 
2.	All Pending Submission requests, regardless of Episode Type, will be displayed. 

Option #3: Dashboard – Requests by Type Widget

Step	Action
1.	Click on the **Pending Submission** hyperlink bar in the *Request by Type* widget 
2.	All Pending Submission requests for that Episode Type will be displayed. 

Adding Clinical Information to Existing OP Non-Clinical Request – Edit Request

Follow these steps to open the request for editing.

Step	Action
1.	Click on the icon to the left of the episode and select **Edit Request**.  ***Note:*** *Depending on how you accessed the episode, you may see different options under the gear.*
2.	The request will open and is read to be updated.

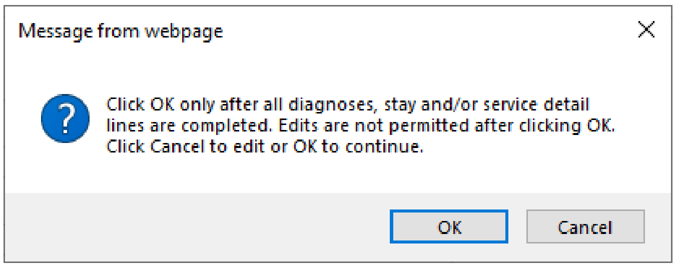
Adding Clinical Information to Existing OP Non-Clinical Request – InterQual

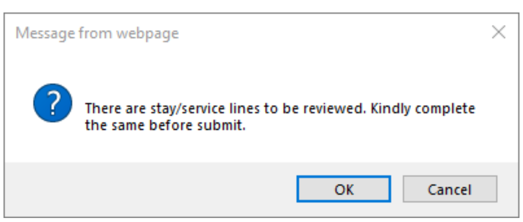
Access and complete InterQual Connect Clinical Criteria

If you need training or have questions regarding the use of InterQual Connect criteria, please contact your facility InterQual trainer or contact your Change HealthCare account representative.

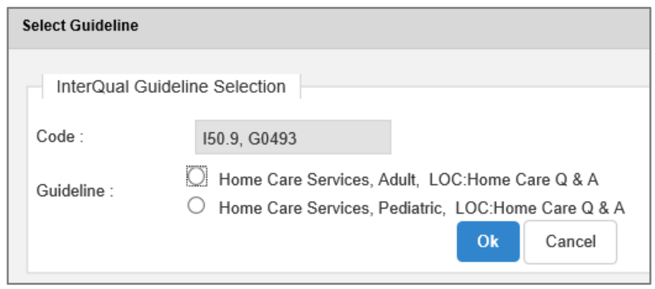
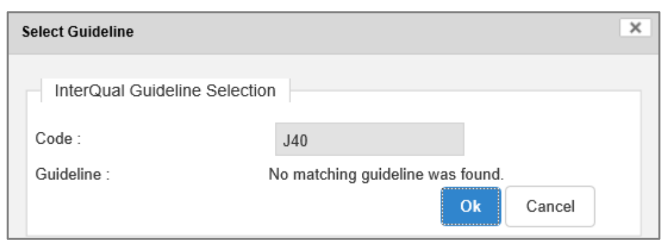
The health plan is certified to conduct training for internal associates only.

Step	Action
1.	Click the **Check for Review** button. 

2.	You will receive the following message. Click **OK** ***only*** if you completed the items listed.
	
	
	Result: *The system will run a diagnostic review of the request to determine if a* ***Stay Request*** *and/or a* ***Service Request*** *is associated with it.*
	
	Note: *The* ***Check for Review*** *button is disabled in the following scenarios:*
	• *When stay and service lines can be processed by Sentinel rules. Based on the sentinel auto-approval rule, the Decision and Reason for Decision are as follows:*
	    o *Pending and Auto Pended*
	    o *Approved and Auto Approval*
	When medical review is not supported based on the service code, diagnosis code, and episode type, the decision is displayed as ***Pending*** *and the Reason for Decision is displayed as* ***Medical Review Not Required****. Manual review is required in this case.*

3.	Once determined that one or both exists, you will receive the following pop-up message. Click **OK**. 

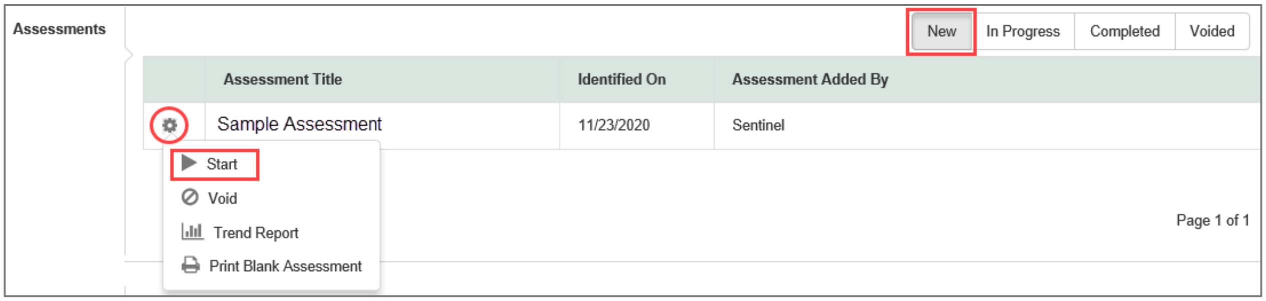
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>4.</td><td>Click the Review button.

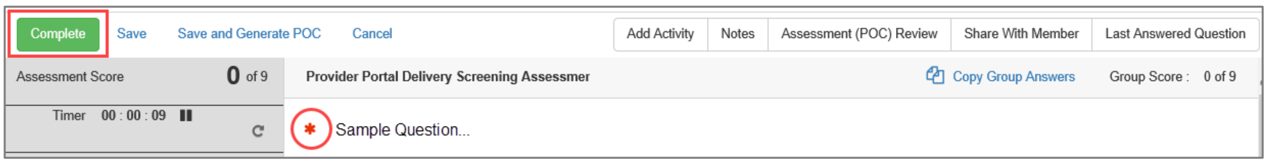
</td></tr>
<tr><td>5.</td><td>The system will connect with InterQual and determine if there is a matching guideline.
<table>
<tr><th>If there is…</th><th>Then…</th></tr>
<tr><td>Matching Guideline</td><td>You will receive this pop-up similar to this where you may select the appropriate guideline and click on OK. Proceed to Step 6 in this section.

</td></tr>
<tr><td>No Matching Guideline</td><td>You will receive this pop-up. Click OK to close the window and you will be returned to the request screen. Proceed to Adding Documents.

</td></tr>
</table></td></tr>
</table>

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>6.</td><td>After answering the review questions, the Recommendations page will display either Criteria Met or Criteria Not Met.</td></tr>
<tr><td>7.</td><td>From the Recommendations page:
<table>
<tr><th>If you click…</th><th>Then…</th></tr>
<tr><td>Save</td><td>The review will be saved and can be updated, if needed, prior to submitting the request.</td></tr>
<tr><td>Complete</td><td>The review will be saved and closed. It cannot be updated even if you have not yet submitted the request.</td></tr>
</table></td></tr>
<tr><td>8.</td><td>Close the InterQual tab to return to the Provider Portal</td></tr>
<tr><td>9.</td><td>The request line will now display a status in the Decision column.</td></tr>
</table>

Adding Clinical Information to Existing OP Non-Clinical Request – Assessments

If an assessment is associated with the request, an **Assessment** section will be displayed where you may access and complete the associated assessment.

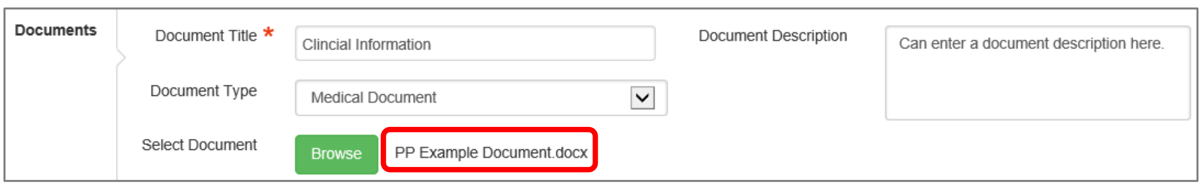




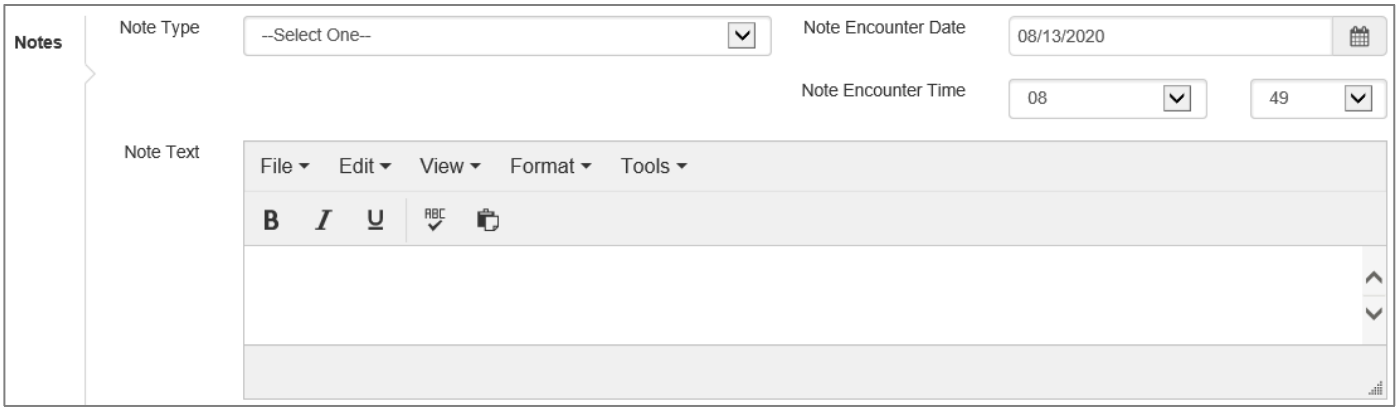
Step	Action
1.	In the **New** Tab of the Assessment section, click on the gear icon to the left of the Assessment and click on **Start**.
2.	Answer the questions. **Note** - Questions in red are mandatory.
3.	Click the **Complete** button to complete the assessment. **Note**- This will trigger any auto approval rules (if configured.) The **Save** button will **not** trigger the auto approval rules.

Adding Clinical Information to Existing OP Non-Clinical Request – Adding Documents

When submitting an **OP Clinical Request,** you must attach the clinical information. Follow these instructions to add a **Documents**.

Step	Action
1.	Complete the following: f. **Document Title**: enter the title of the document g. **Document Type**: defaults to **Medical Document**, update as needed. h. **Document Description**: optional field i. Click the **Browse** button to search for the document you wish to upload vi. Click the desired document and click the **Open** button j. You will see the document name listed next to the Browse button. 

Adding Clinical Information to Existing OP Non-Clinical Request – Adding Notes



Step	Action
1.	Select the appropriate **Note Type** from the drop-down menu.
2.	Enter the appropriate notes in the notes section. Be sure to include your **name** and **contact information** in the event the Plan needs to contact you.

	This is a shared note field. Notes can be viewed and entered by both you and the Plan.

Adding Clinical Information to Existing OP Non-Clinical Request – Submitting Request

Once all required sections are completed, you are ready to submit the request.

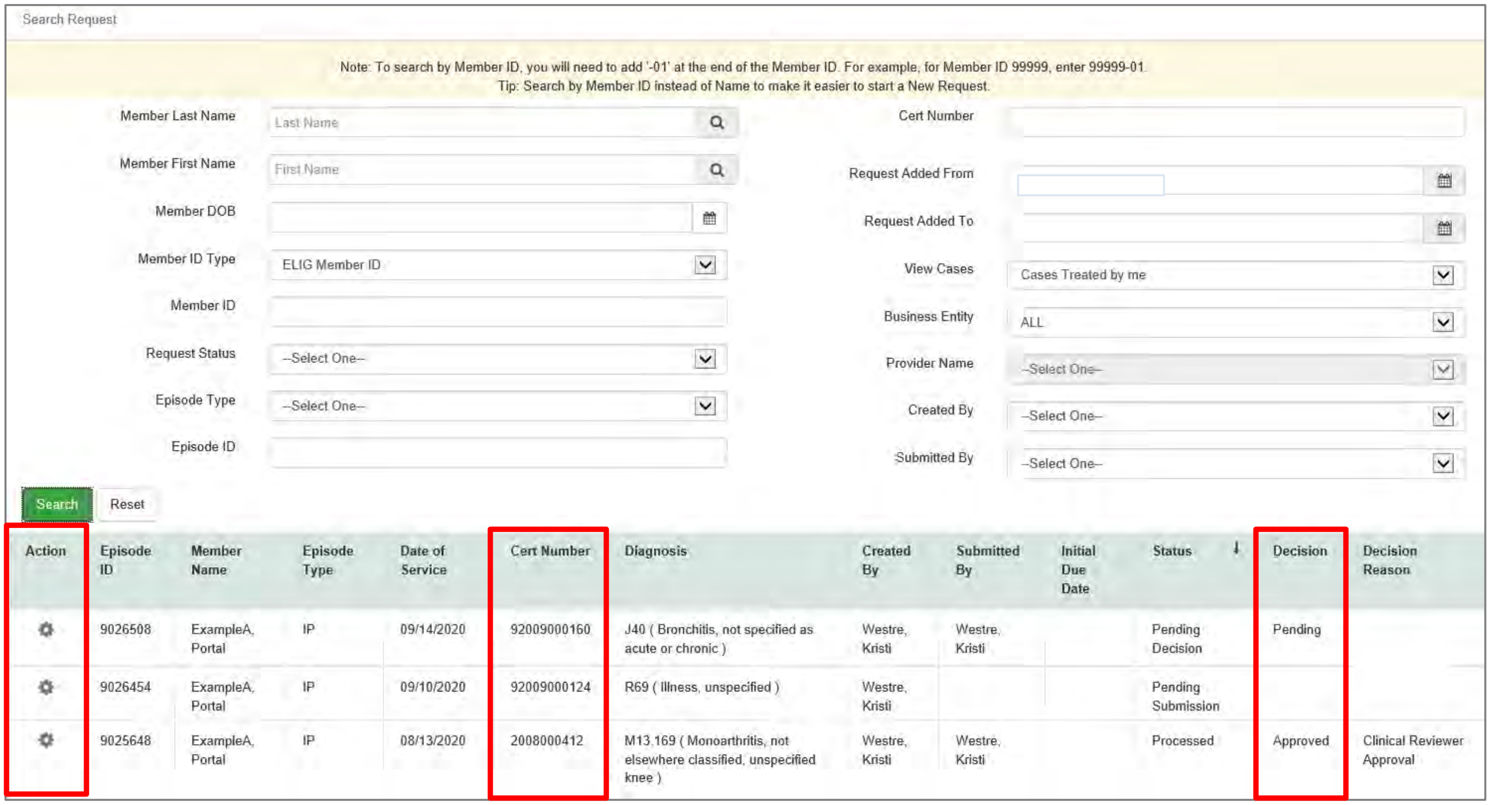
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Click on the Submit button to submit your request.

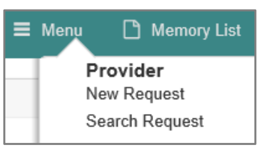
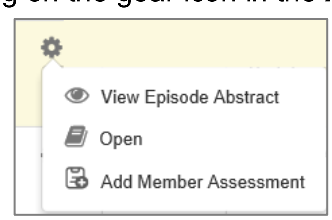

Note: The Submit button will not be active until a clinical review has been completed.</td></tr>
<tr><td>2.</td><td>The Request Details information will be displayed, including the Cert Number.
Note: If the request is programmed to auto-approve, you will see Approved in the Decision column.</td></tr>
</table>

9

9 ADDITIONAL PROCESSES

Search for Determination

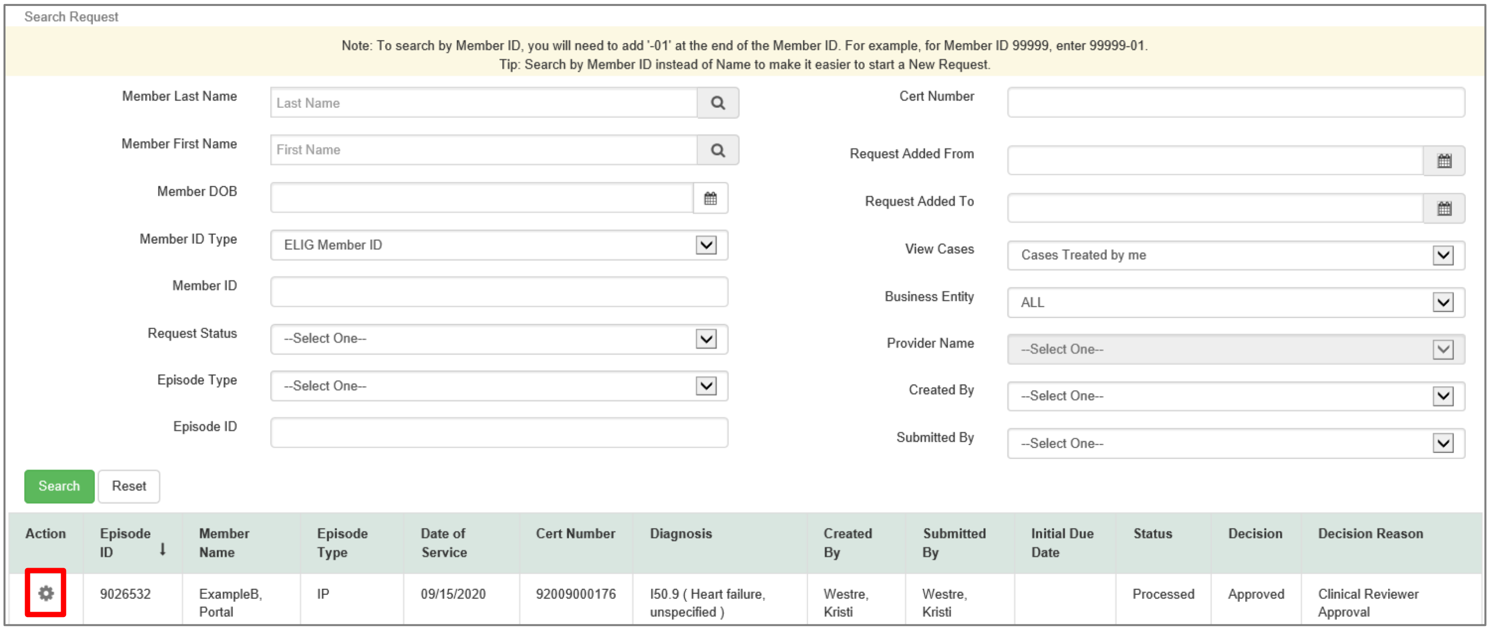


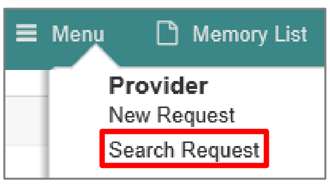
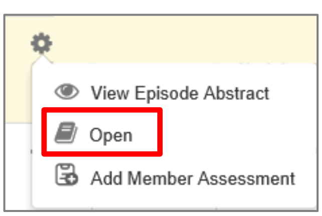
Step	Action
1.	Click **Menu** and select **Search Request** 
2.	Enter the “certification number” in the **Cert Number** field. **Note** – You can also search using the member ID or name/DOB.
3.	Select “**Cases Treated By Me**” from the **View Cases** drop down box.
4.	Verify that “**All”** is in the **Business Entity** field.
5.	Click the **Search** button.
6.	The determination will be in the **Decision** column (Approved, Pending or Denied).
7.	Clicking on the gear icon in the **Action** column will allow you to do the following: 

Extending an Existing Request

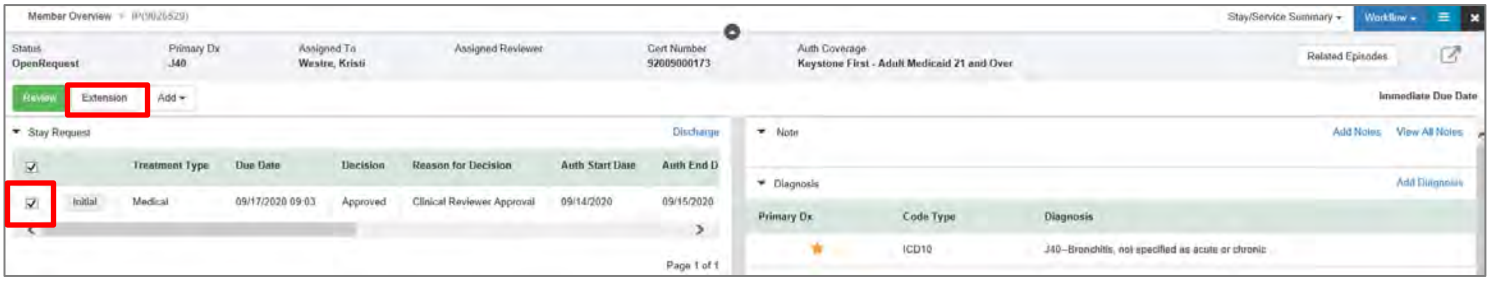
Closed Episodes will be accessible in a 'view only' format. If you would like to extend the request or add notes to a closed case, you will need to contact the Utilization Management Department to request to have the case reopened.

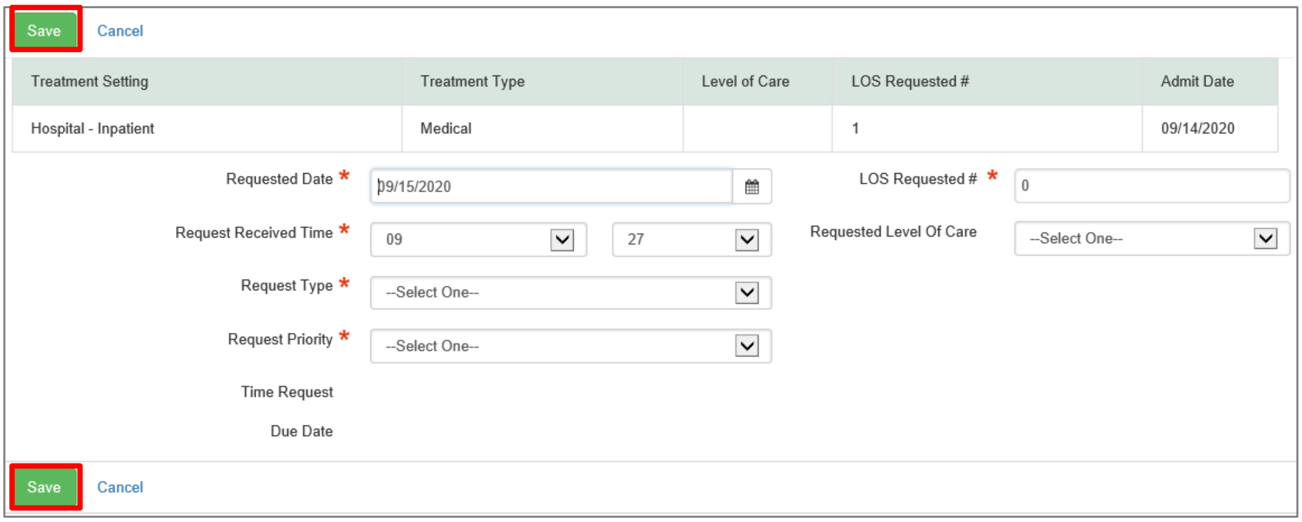
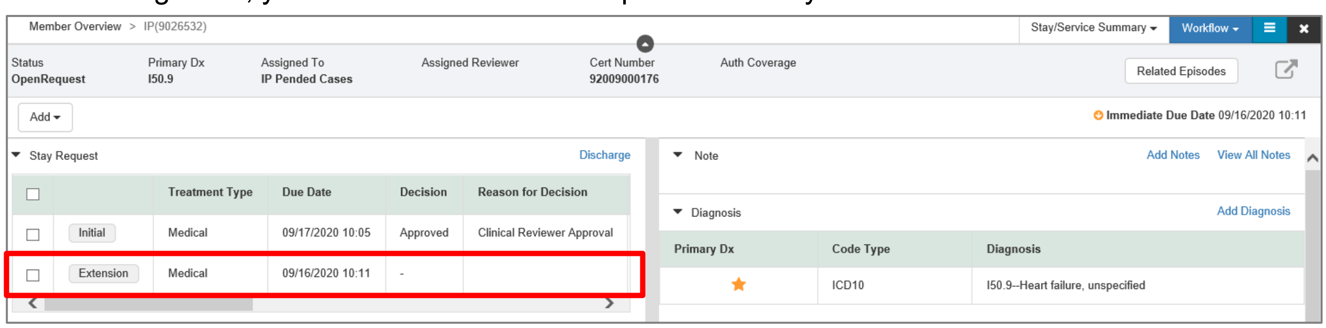
If the case is **Open**, you may follow the instructions below.



Step	Action
1.	Click **Menu** and select **Search Request** 
2.	Enter the "certification number" in the **Cert Number** field. **Note** – You can also search using the member ID or name/DOB.
3.	Select "**Cases Treated By Me**" from the **View Cases** drop down box.
4.	Verify that "**All**" is in the **Business Entity** field.
5.	Click the **Search** button.
6.	Click the gear icon in the **Action** column and select **Open** 

Extending an Existing Request, cont.



Step	Action
1.	Select the line that needs to be extended. **Note:** You can only select one line at a time.
2.	Click the **Extension** button
3.	Complete the required fields with the appropriate information and click **Save** 
4.	After clicking Save, you will be returned to the episode where you will now see the Extension line. 

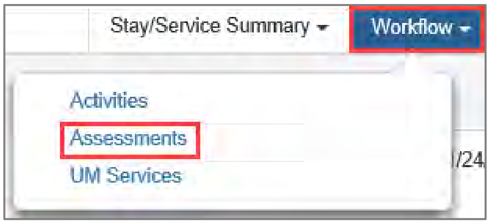
Clicking Save will submit your extension request. However, you must enter a note and attach any appropriate documentation to support the extension request.

Extending an Existing Request – Adding Assessments

If an assessment is to be completed, you will need to follow the guidelines below.

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>

Click on **Workflows** in the upper right corner of the episode and click on the **Assessments** hyperlink.

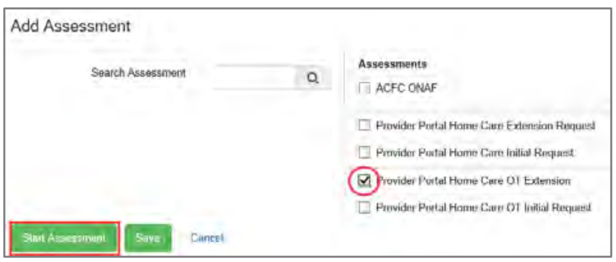


</td></tr>
<tr><td></td><td>

In the **New** Tab of the Assessment section, click on the **Add Assessment** button.

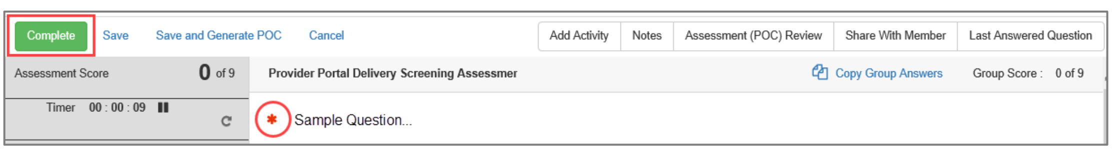
</td></tr>
<tr><td></td><td>

Select the appropriate assessment and click on the **Start Assessment** button.



</td></tr>
<tr><td>2.</td><td>

Answer the questions.

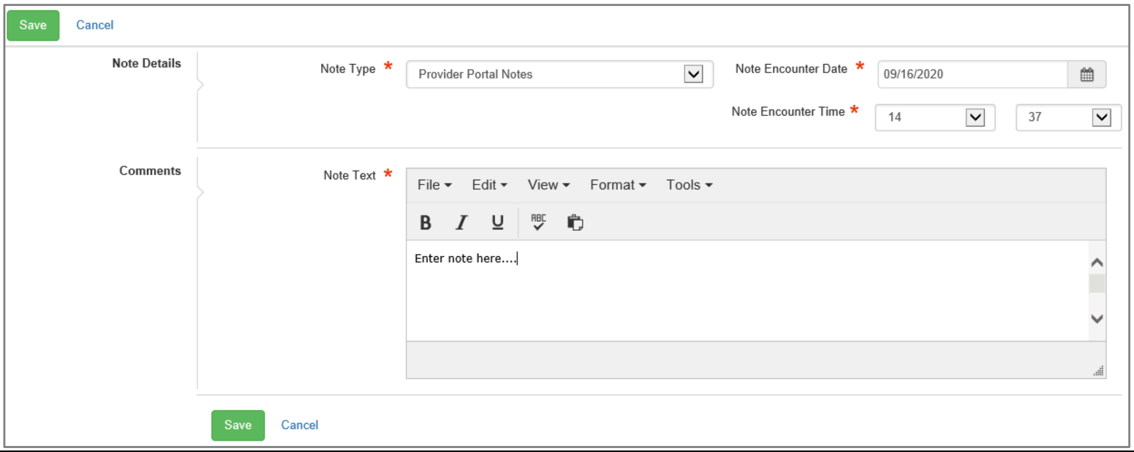
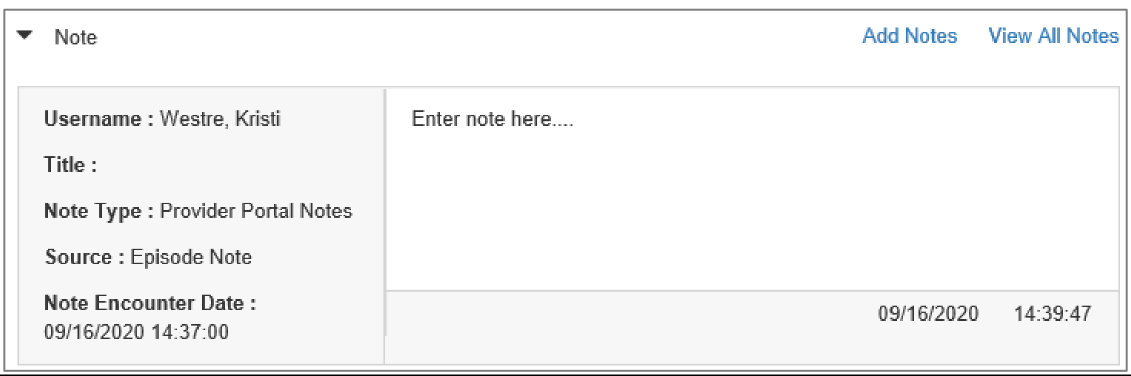


Note - Questions in red are mandatory.

</td></tr>
<tr><td>3.</td><td>Click the Complete button to complete the assessment.</td></tr>
</table>

Extending an Existing Request – Adding Notes

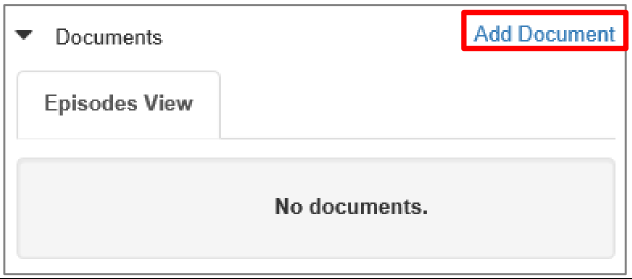
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Within the Note widget on the right side of the episode screen, click on Add Notes

</td></tr>
<tr><td>2.</td><td>Enter the appropriate notes for the extension in the notes section. Be sure to include your name and contact information in the event the Plan needs to contact you.

</td></tr>
<tr><td>3.</td><td>Click the Save button
Your note will now be displayed in the Notes widget.

</td></tr>
</table>

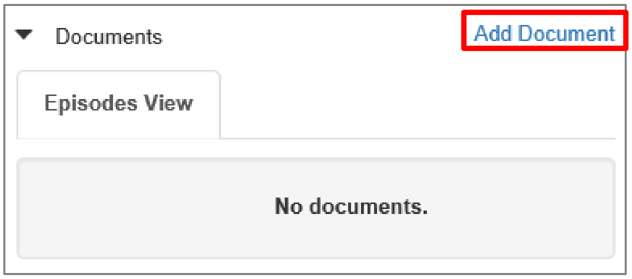
This is a shared note field. Notes can be viewed and entered by both you and the plan.

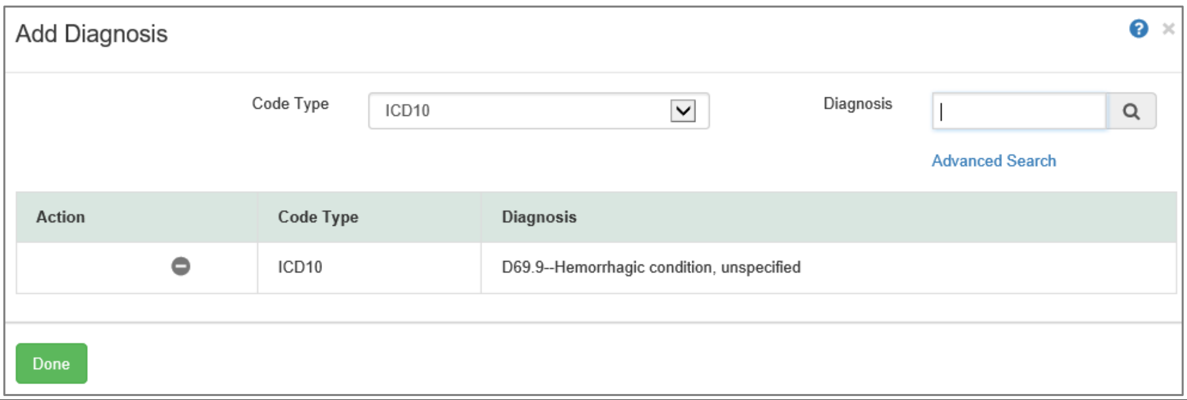
Extending an Existing Request – Adding Documents

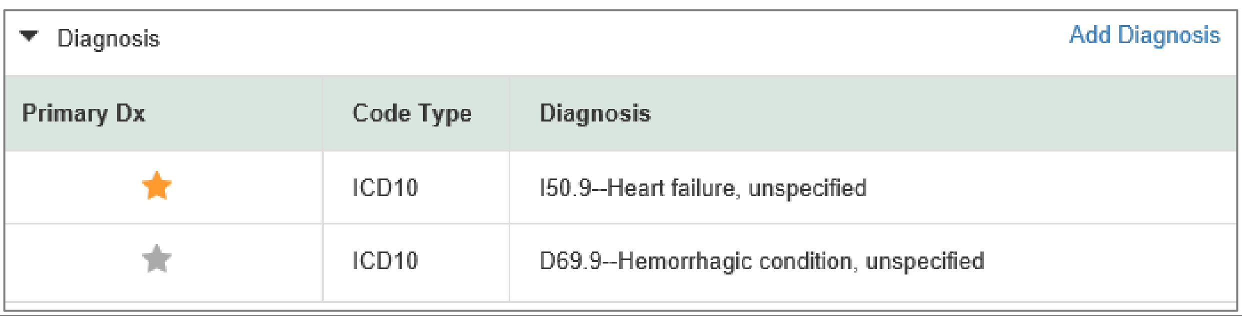
IMPORTANT: Be sure to attach any clinical documentation to support the request for extension

Step	Action
1.	Within the **Documents widget** on the right side of the episode screen, click on **Add Document** 
2.	Upload any clinical documentation to support the request for extension

Add Additional Diagnoses to an Existing Request

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>Locate and open the appropriate episode.</td></tr>
<tr><td>2.</td><td>Within the Diagnosis widget on the right side of the episode screen, click on Add Diagnosis


</td></tr>
<tr><td>3.</td><td>From the Add Diagnosis screen, search for the appropriate diagnosis by either entering the code or using the Advanced Search, and attach to the episode.


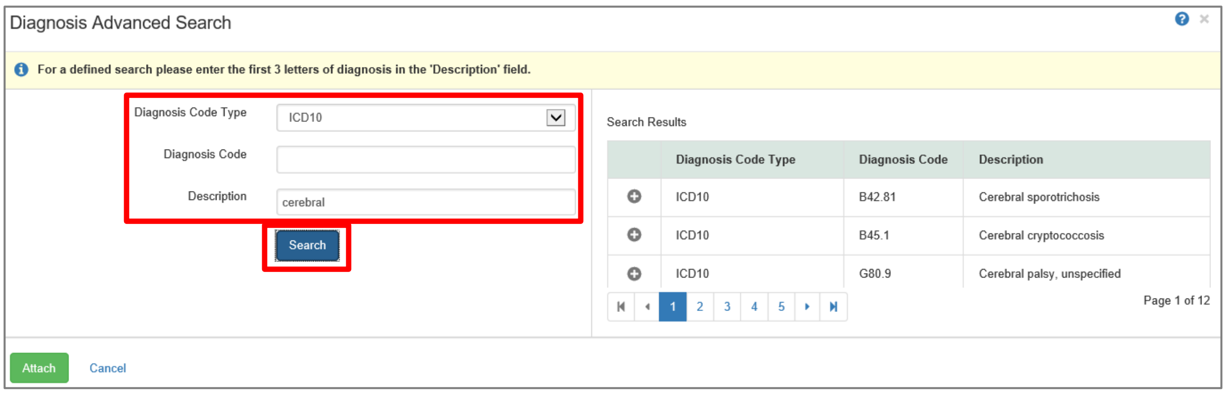
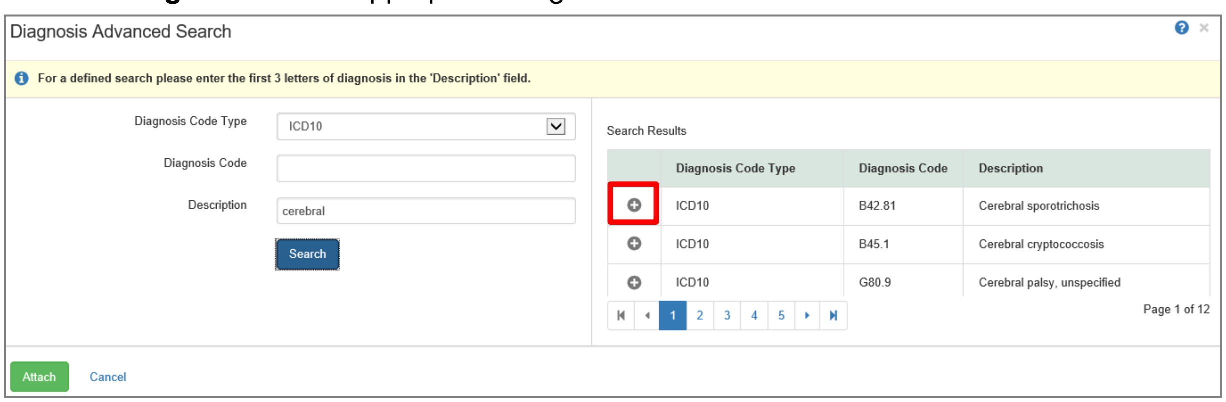
</td></tr>
<tr><td>4.</td><td>The new diagnosis will now be displayed in the Diagnosis widget


</td></tr>
</table>

Favorite Diagnosis List – How to Create

The **Favorites Diagnosis** function will allow you to create and manage a list of frequently used diagnoses. The list is unique to the provider's account.

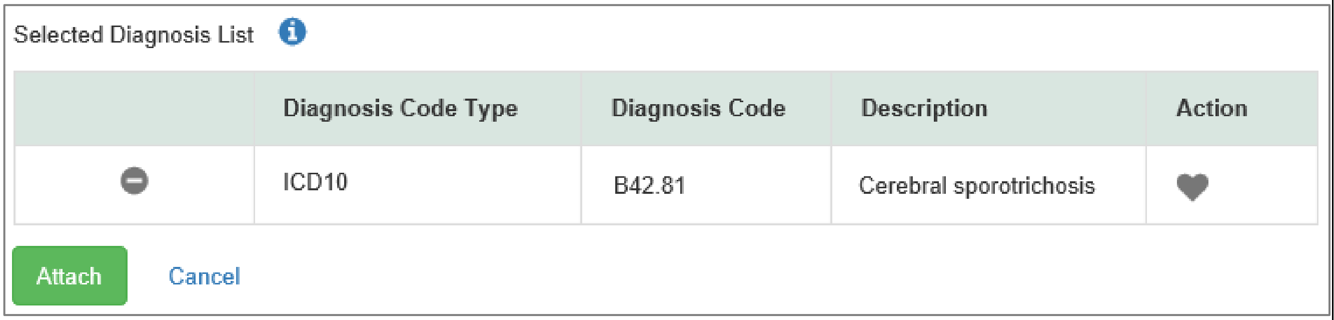
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>When creating an episode, click on the Advanced Search hyperlink to search for a diagnosis

</td></tr>
<tr><td>2.</td><td>Type the code or description in the appropriate field and click on Search

</td></tr>
<tr><td>3.</td><td>Click on the + sign next to the appropriate diagnosis code

</td></tr>
</table>

Favorite Diagnosis List – How to Create (cont.)

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>4.</td><td>The diagnosis will then appear in the Selected Diagnosis List at the bottom of the Search window.

Tip: You may need to enlarge the search window or scroll down to see the Selected Diagnosis List section.



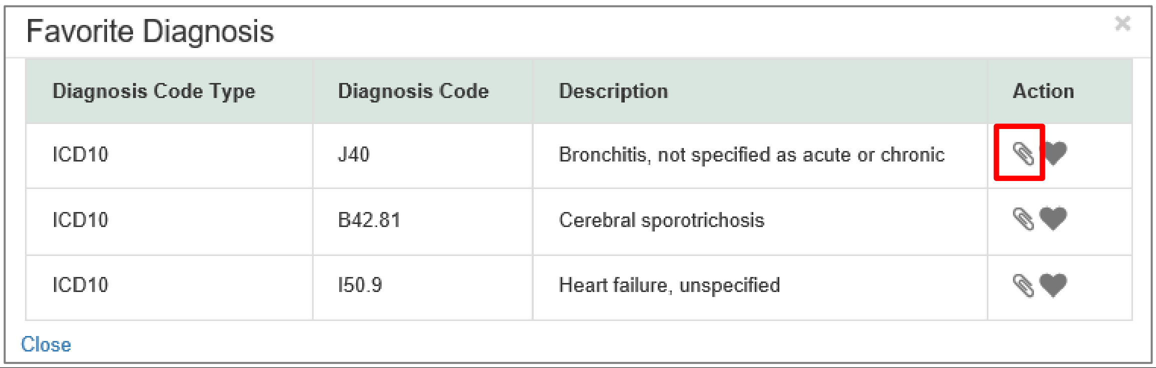
<table>
<tr><th>If…</th><th>Then…</th></tr>
<tr><td>You wish to add the diagnosis to your Favorite Diagnosis list</td><td>Click on the heart icon in the Action column</td></tr>
<tr><td>You wish to add the diagnosis to the episode</td><td>Click the Attach button</td></tr>
</table></td></tr>
<tr><td>5.</td><td>Repeat steps 1-4 as needed or desired

<u>Note:</u> You may add diagnoses to your Favorite Diagnosis list through this method even if you do not need to attach them to this given request.</td></tr>
</table>

Favorite Diagnosis List – Utilizing the List

Once your **Favorite Diagnosis l**ist is set up, you do not need to search for these diagnoses in order to add them to the request.

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>When creating an episode, click on the Favorite Diagnosis hyperlink

</td></tr>
<tr><td>2.</td><td>Click on the Attach Icon (paperclip) to add the diagnosis to the request.

</td></tr>
</table>

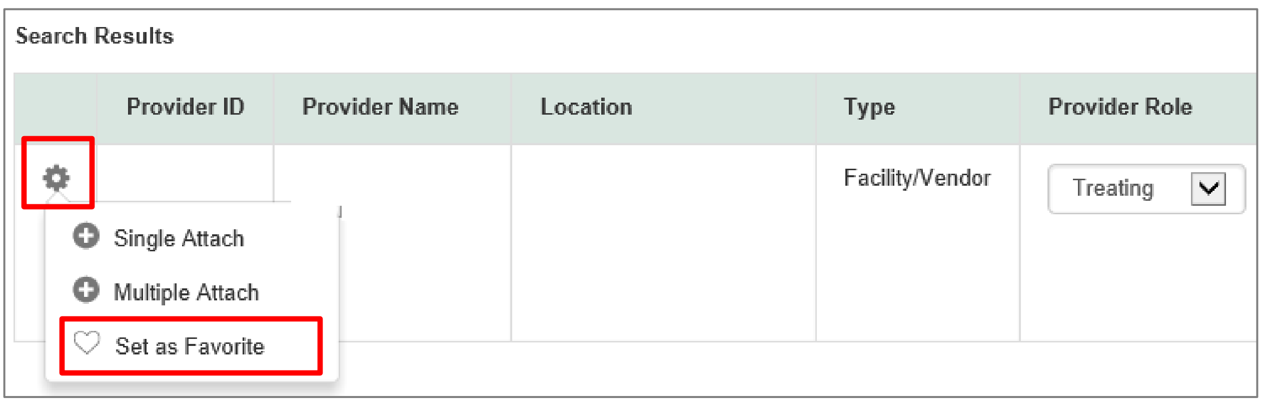
Click the heart icon to remove a diagnosis from your **Favorite Diagnosis** list.

Favorite Providers List – How to Create

The **Favorite Provider** functionality will allow you to create and manage a list of frequently used providers. The list is unique to the provider's account.

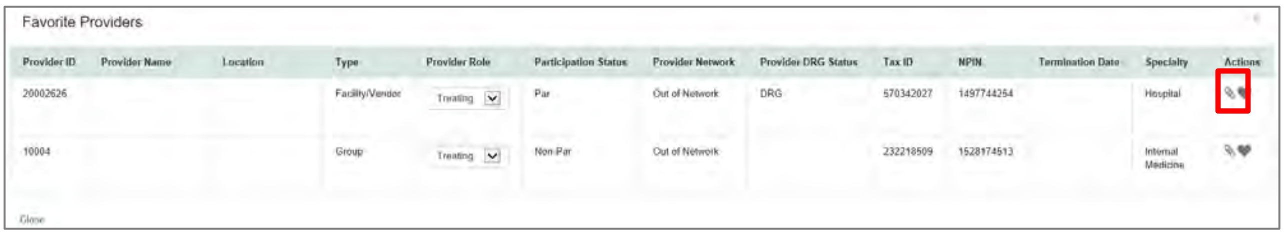
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1.</td><td>When creating an episode, click on the Attach Providers button

</td></tr>
<tr><td>2.</td><td>Enter the appropriate criteria from the Basic Search screen or from the Advanced Search screen and click on Search</td></tr>
<tr><td>3.</td><td>The Provider will then appear in the Search Results section

To add the provider as a favorite:
a. Click on the gear icon
b. Click on Set as Favorite

</td></tr>
</table>

Favorite Providers List – Utilizing the List

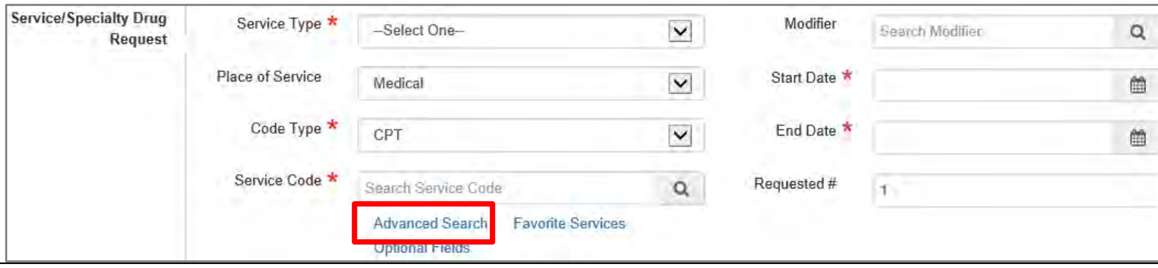
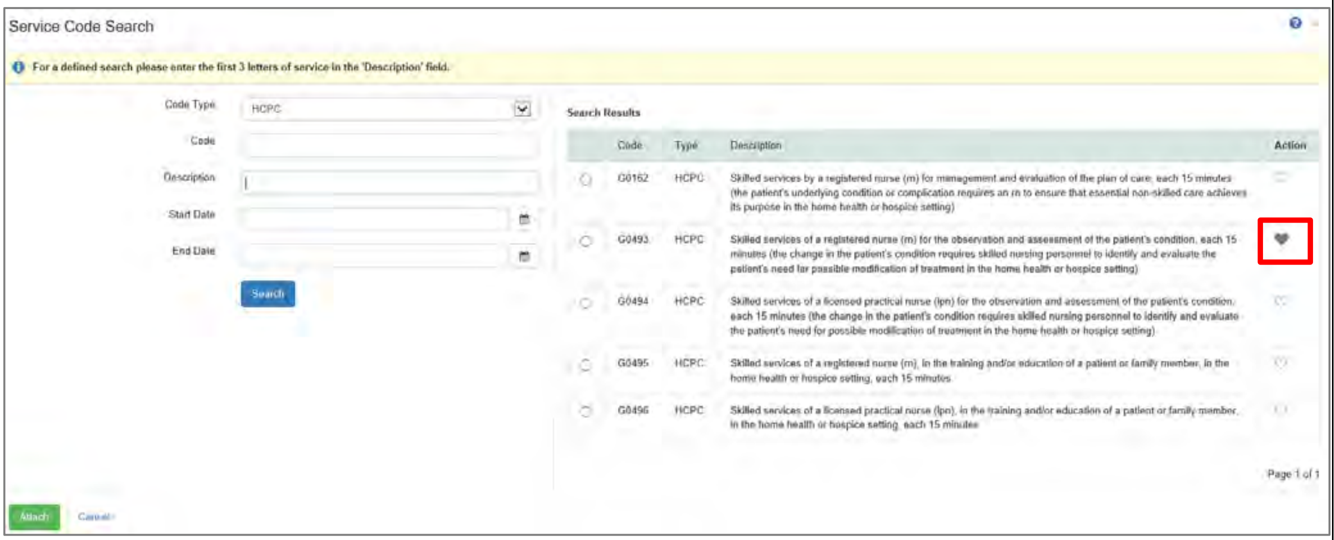
Once your **Favorites List** is set up, you do not need to search for those providers in order to add them to the request.

Step	Action
1.	When creating an episode, click on the **Favorite Providers** hyperlink 
2.	Click on the **Attach Icon** (paperclip) to add the provider to the request. 

	Click the heart icon  to remove a Provider from your **Favorite Providers** list.

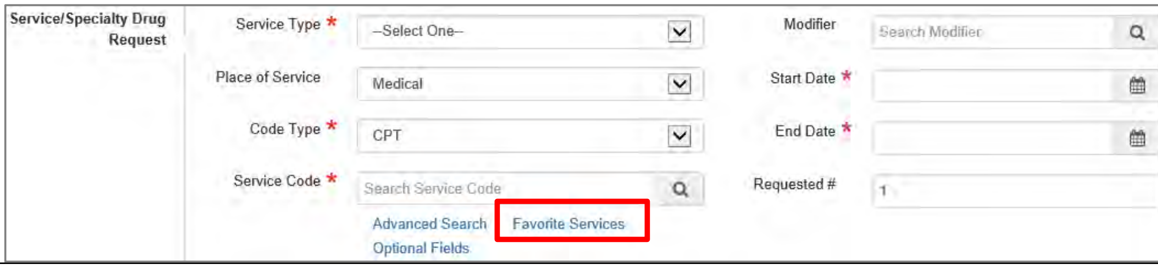
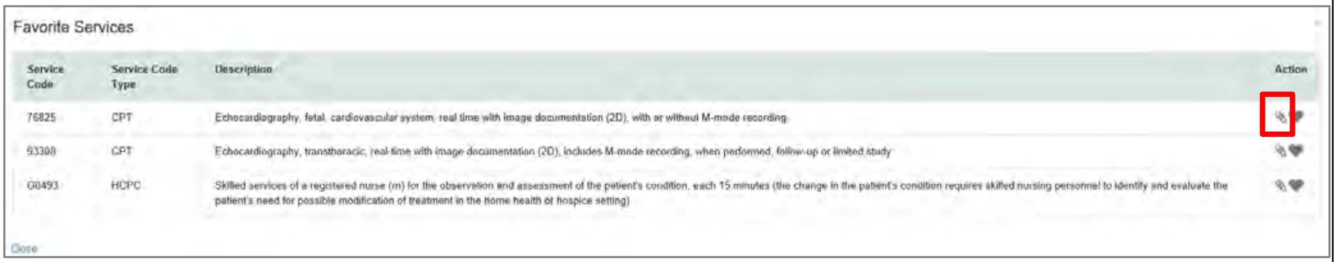
Favorite Services List – How to Create

The **Favorite Services** functionality will allow you to create and manage a list of frequently used services. The list is unique to the provider's account.

Step	Action
1.	When creating an episode, click on the **Advanced Search** hyperlink 
2.	Enter the appropriate criteria from the Basic Search screen or from the Advanced Search screen and click on **Search**
3.	The service(s) will then appear in the **Search Results** section Click on the **heart icon** to add the service as a favorite. 

Favorite Services List – Utilizing the List

Once your **Favorites List** is set up, you do not need to search for those services in order to add them to the request.

Step	Action
1.	When creating an episode, click on the **Favorite Services** hyperlink 
2.	Click on the **Attach Icon** (paperclip) to add the service code to the request. 

 Click the heart icon  to remove a service from your **Favorite Services** list.

10

10 RESOURCES

Plan Contact Information

LOB	UM Phone Number	UM Fax Number
AmeriHealth Caritas Delaware	855-396-5770	866-423-0946
AmeriHealth Caritas District of Columbia	800-408-7510	877-759-6216
AmeriHealth Caritas Louisiana	888-913-0350	866-397-4522
AmeriHealth Caritas New Hampshire	833-472-2264	833-469-2264
AmeriHealth Caritas North Carolina	833-900-2262	833-893-2262
AmeriHealth Caritas Northeast	888-498-0504	888-743-5551
AmeriHealth Caritas Pennsylvania	800-521-6622	866-755-9949
Blue Cross Complete of Michigan	888-312-5713	888-989-0019
Keystone First	800-521-6622	215-937-5322
Prestige Health Choice	855-371-8074	855-236-9285
Select Health of South Carolina	888-559-1010	888-824-7788

Escalation Process and Training Requests – Account Executives and Providers

If…	Then email…
Access Issues and/or Technical Issues	DL-ACFC: Jiva and Client Letter Support (ACFC_JivaCLSupport@amerihealthcaritas.com)
Account Executive Training Requests	Corporate Provider Network Management Training (CPNMT@amerihealthcaritas.com)
Provider Training Requests	DL-ACFC: Clinical Training (ClinicalTraining@amerihealthcaritas.com)