



NaviNet Medical Authorizations Participant Guide

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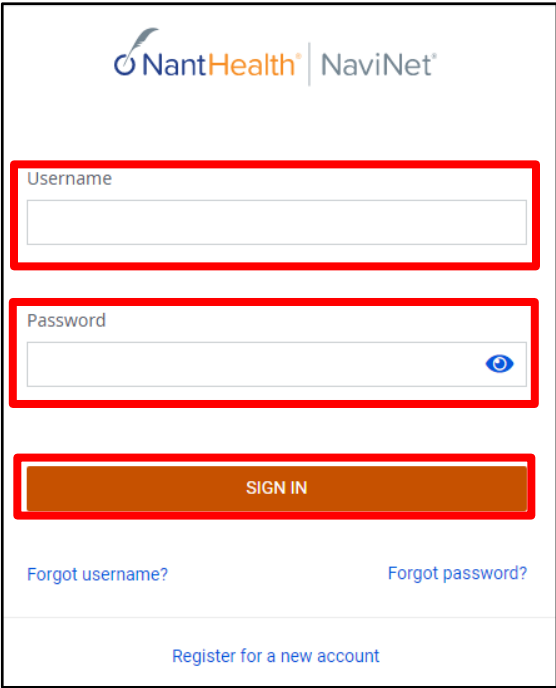
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1 LOGGING IN TO NAVINET

Logging in to NaviNet

| Step | Action |
|------|--|
| 1. | <p>Access NaviNet using the following address: https://navinet.navimedix.com. The following web browsers are supported: Chrome, Firefox, Safari, and Edge.</p> <div data-bbox="602 369 1154 1052" style="border: 1px solid black; padding: 10px; margin: 10px auto; width: fit-content;"></div> |
| 2. | Enter your Username |
| 3. | Enter your Password |
| 4. | Click the Sign In button Result: <i>The NaviNet Home screen will be displayed</i> |

Logging in to NaviNet (cont'd)



Notifications are an important part of the communication process between the health plan and the provider. Users can opt to receive notifications whenever a request is sent from the health plan to the provider. Notifications can be managed from the bell icon  in the top right banner on the home page. Additional information regarding notification settings can be found in the Request For More Information (RFMI) chapter.

A screenshot of the NantHealth NaviNet home page. The top navigation bar is dark blue with the NantHealth logo and 'NaviNet' text. Below the navigation bar are three buttons: 'Top Support FAQs', 'Support Videos', and 'Contact Support'. The main content area features a 'COVID-19 Resources & Information' section with a globe image and a 'covermymed' advertisement. A notification settings modal is open on the right side, with the 'Notifications' tab selected and circled in red. The modal displays 'No Notifications Available' and a large bell icon. The bell icon in the top right of the page is also circled in red.

Logging in to NaviNet (cont'd)

The NaviNet Home Page is not health plan-specific. To locate a health plan:

| Step | Action |
|------|---|
| 1. | Click on HEALTH PLANS in the top menu |
| 2. | Select the appropriate health plan from the drop-down list The Health Plan-specific home page will display, this is also known as Plan Central |



2 PLAN CENTRAL

Plan Central Overview

Plan Central is the health plan specific homepage.

Workflows for this Plan

- Medical Authorizations
- Medical Authorizations Log
- Eligibility and Benefits Inquiry
- Claim Status Inquiry
- Report Inquiry
- Claim Submission
- Provider Directory

Browser requirement: You must use Internet Explorer 10 or 11, or Firefox 26 to use the Jiva 5.6 Provider Portal.

Welcome AmeriHealth Caritas Delaware providers to the **NaviNet Plan Central Page**, your connection between our secure, easy-to-use provider portal and the AmeriHealth Care Network to provide the best care possible for our members.

Check out **Latest News and Updates** regularly for new functionalities to make your office more efficient.

Some functionality already available to you includes member eligibility verification, claims submission and status, electronic prior authorization submission, and member panel management (for all participating providers).

Use Quick Links:

- Provider manual.
- Billing information.
- Provider Quick Reference Guide.


FAQs

- ▶ How do I change my password?
- ▶ I cannot remember my password.
- ▶ How do I set up additional Health Plans?
- ▶ What are the roles and responsibilities of a Security Officer?
- ▶ How do I enable or disable permissions for users in my office?

More ▾

Training Videos

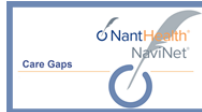
Claims Investigation




Intensive Case Management



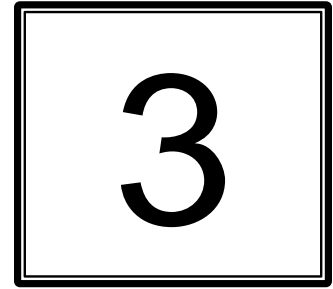
Care Gaps



ADT Alerts



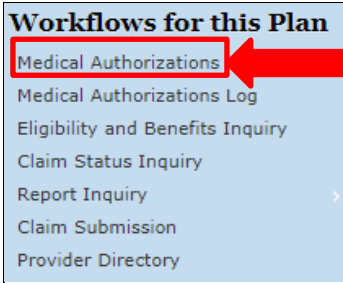
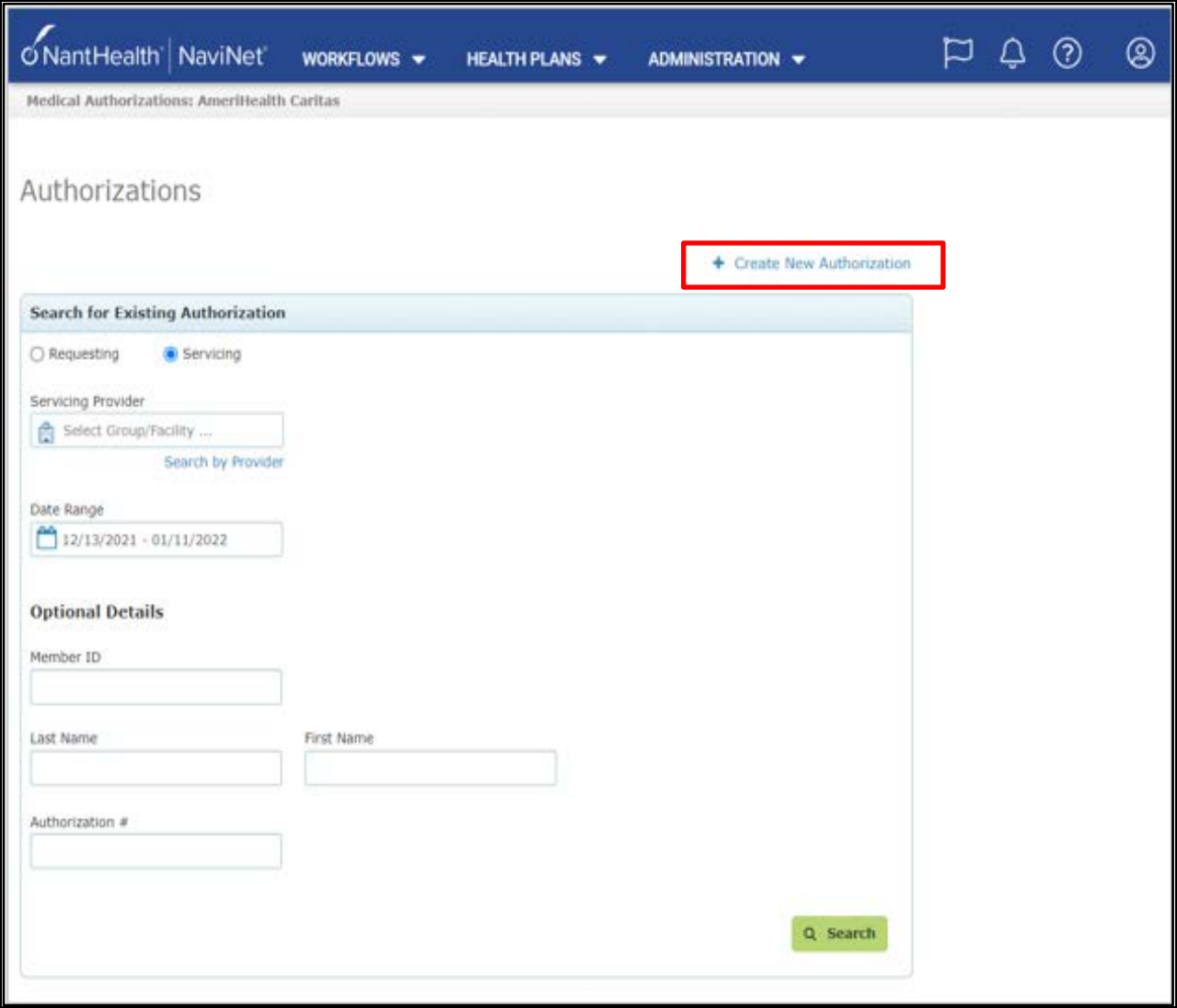
| Plan Central | Topic | Description |
|--------------------------------|-----------------------|---|
| Workflows for this Plan | Plan specific options | <ul style="list-style-type: none"> • Various functionalities are available to include initiating medical authorizations, inquiries, etc. |
| Training Videos | Training Videos | <ul style="list-style-type: none"> • Instructional videos on system usage |




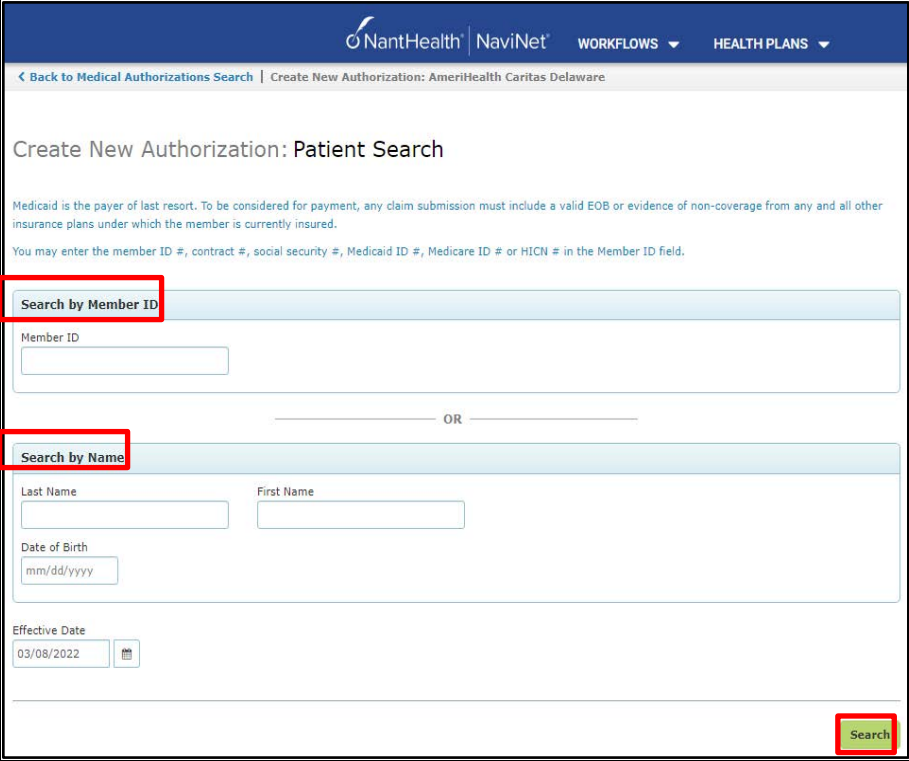
3 CREATING A NEW AUTHORIZATION

Creating a New Authorization

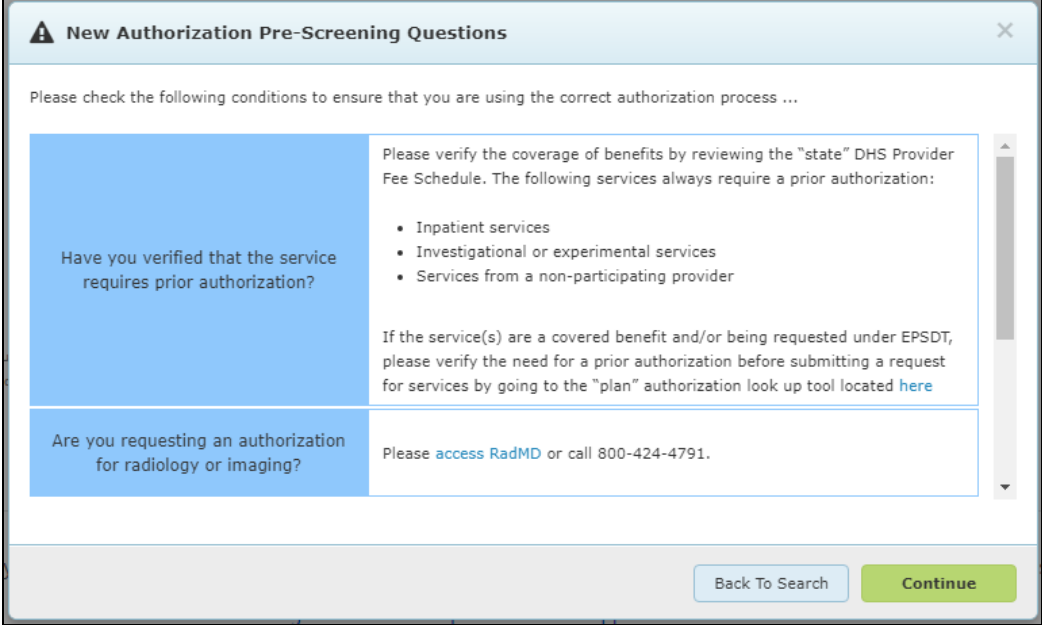
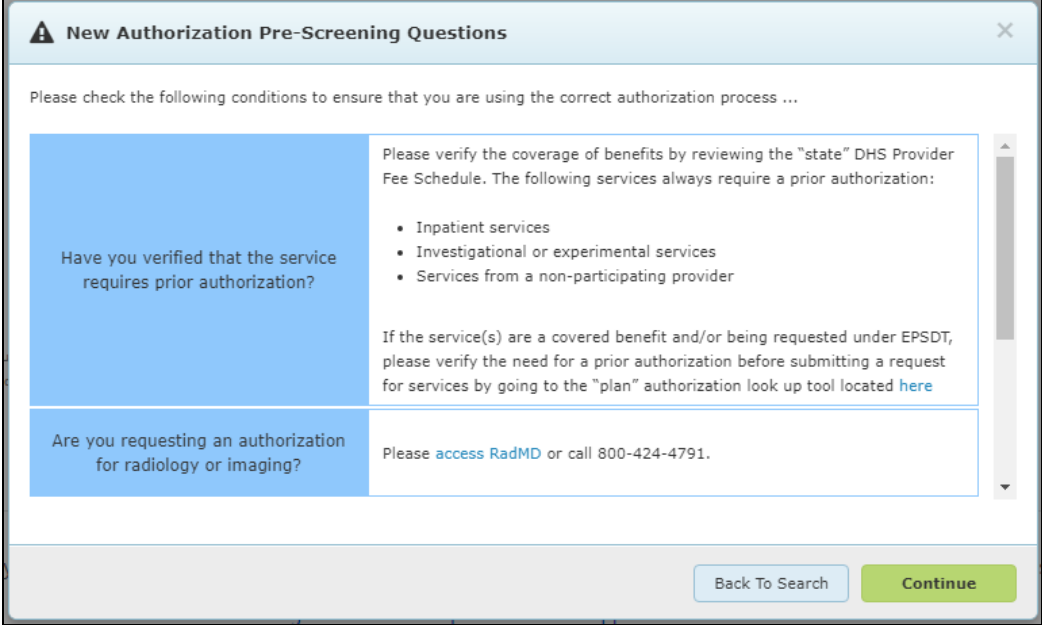
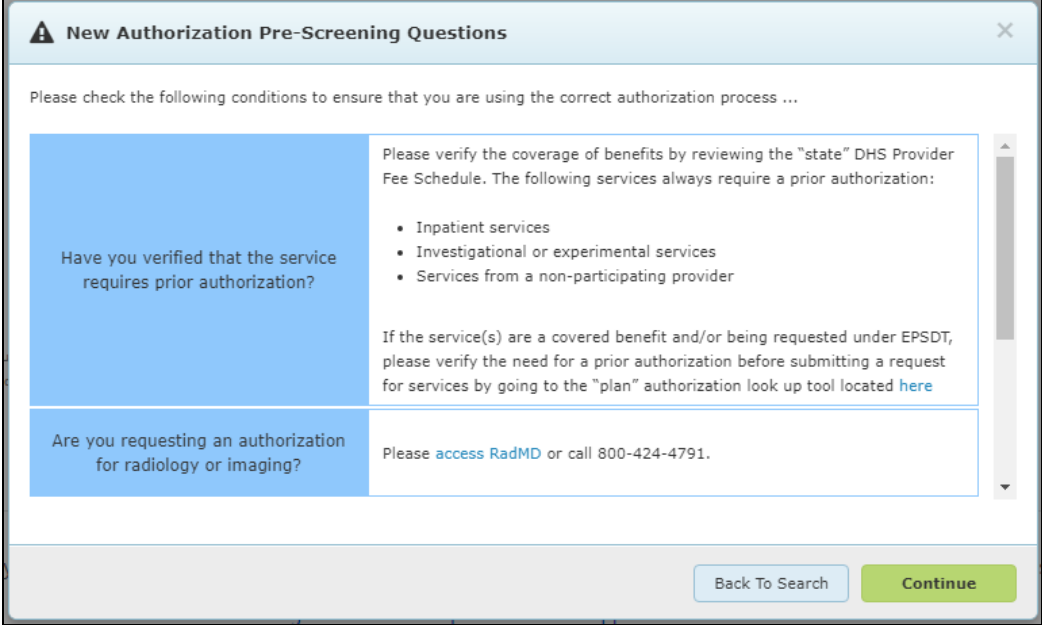
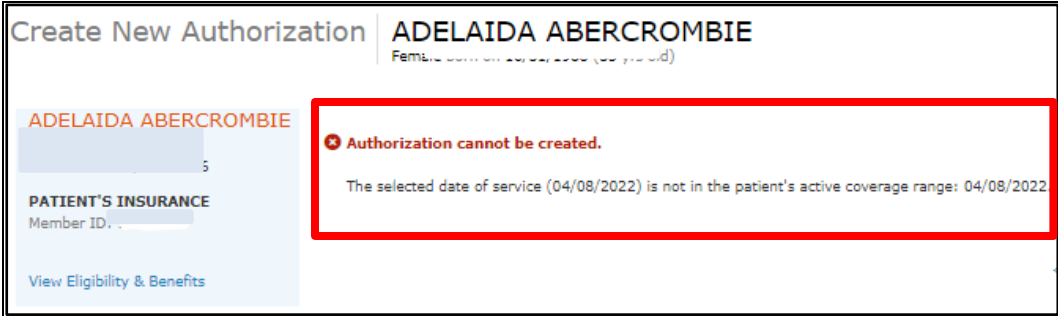
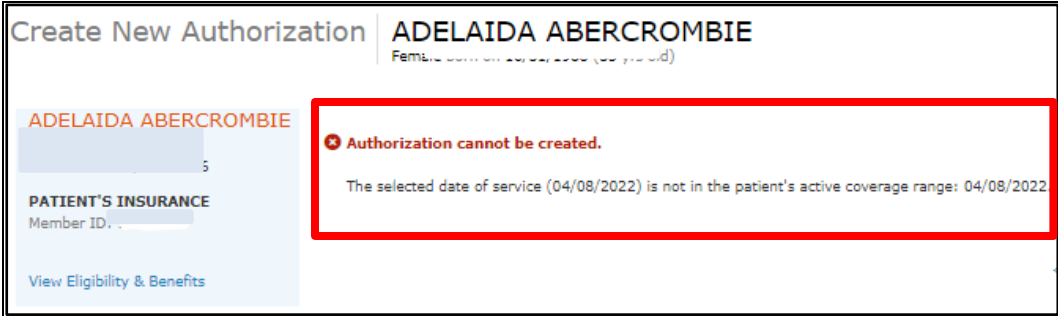
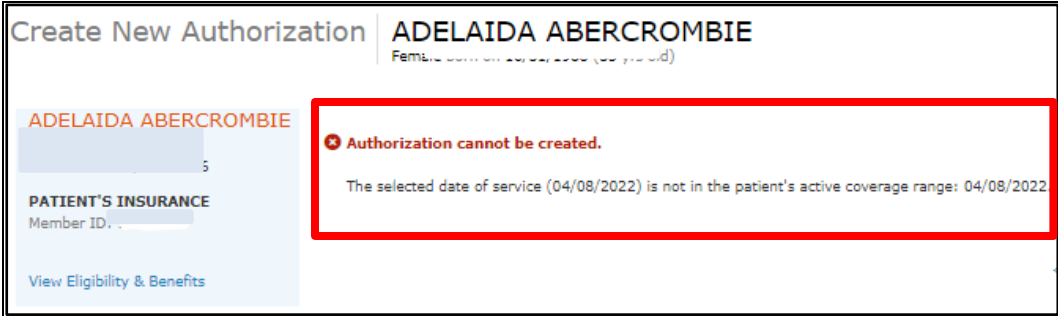
To create a new authorization:

| Step | Action |
|------|---|
| 1. | <p>Launch Medical Authorizations under Workflows for this Plan.</p>  <p>Workflows for this Plan</p> <ul style="list-style-type: none">Medical AuthorizationsMedical Authorizations LogEligibility and Benefits InquiryClaim Status InquiryReport InquiryClaim SubmissionProvider Directory |
| 2. | <p>Click Create New Authorization</p>  <p>NantHealth NaviNet WORKFLOWS HEALTH PLANS ADMINISTRATION</p> <p>Medical Authorizations: AmeriHealth Caritas</p> <h3>Authorizations</h3> <p>+ Create New Authorization</p> <p>Search for Existing Authorization</p> <p><input type="radio"/> Requesting <input checked="" type="radio"/> Servicing</p> <p>Servicing Provider</p> <p>Select Group/Facility ...</p> <p>Search by Provider</p> <p>Date Range</p> <p>12/13/2021 - 01/11/2022</p> <p>Optional Details</p> <p>Member ID</p> <p>Last Name First Name</p> <p>Authorization #</p> <p>Search</p> |


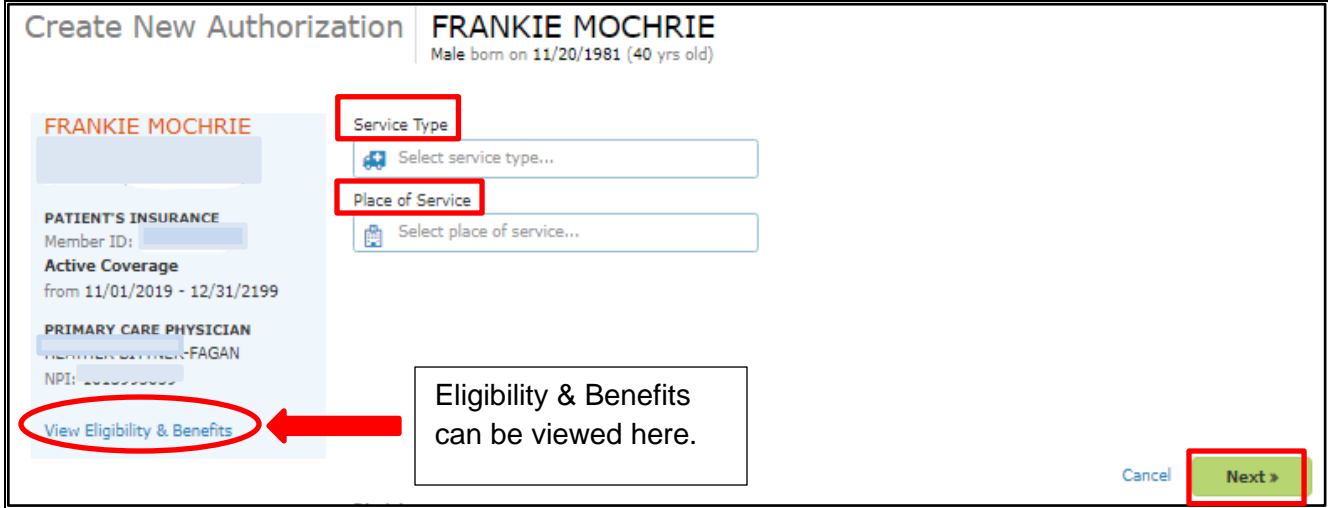

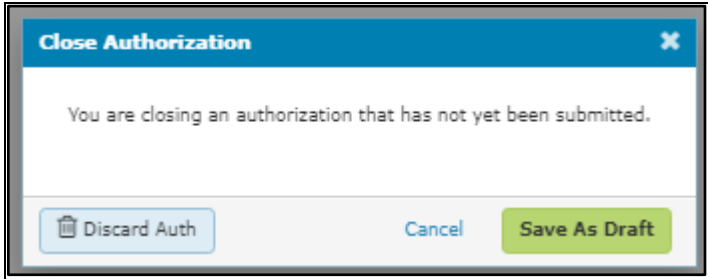
Creating a New Authorization (cont'd)

| Step | Action |
|------|---|
| 3. | <p>Enter patient search criteria information then Search. The patient search screen allows the user to search by Member ID or Search by Name. If searching by name, the member's first name, last name, and date of birth (DOB) are required.</p> <div data-bbox="219 394 1555 537" style="border: 1px solid black; padding: 5px;">  <p>If there are multiple matches based on criteria entered, the user will get a search results screen. On the search results screen, the user selects the appropriate member from the list returned. If there is an exact match, the user is taken to the pre-screening questions.</p> </div> <div data-bbox="219 548 1123 1304" style="border: 1px solid black; padding: 5px;">  </div> |
| | <p>Note: If you enter an incorrect/invalid member ID you will receive the following:</p> <div data-bbox="219 1373 1063 1549" style="border: 1px solid black; padding: 5px;"> <p>Create New Authorization: Patient Search</p> <div data-bbox="219 1465 867 1535" style="border: 2px solid red; padding: 5px; margin-top: 10px;"> <p>✘ Subscriber / Insured Not Found. Please Correct and Resubmit.</p> </div> </div> |

Creating a New Authorization (cont'd)

| Step | Action | | | | |
|---------------------------------------|--|-------|---------|---------------------------------------|--|
| 4. | <p>Address the pre-screening questions pop up box and Continue.</p> <p>Note: If a member is not active with the health plan, you will not be advanced to the pre-screening questions.</p> | | | | |
| | <table border="1"> <thead> <tr> <th data-bbox="194 371 402 420">If...</th> <th data-bbox="402 371 1565 420">Then...</th> </tr> </thead> </table> | If... | Then... | | |
| If... | Then... | | | | |
| | <table border="1"> <thead> <tr> <th data-bbox="194 424 402 472">If...</th> <th data-bbox="402 424 1565 472">Then...</th> </tr> </thead> <tbody> <tr> <td data-bbox="194 472 402 1260"> <p>The member has active coverage</p> </td> <td data-bbox="402 472 1565 1260"> <p>The provider will be advanced to the New Authorization Pre-Screening Questions</p>  <p>The purpose of the New Authorization Pre-Screening Questions is to ensure that the user is following the correct authorization process. It is important to scroll through the questions to ensure that there is not a more appropriate avenue for your specific request. These questions are specific based on the health plan.</p> </td> </tr> </tbody> </table> | If... | Then... | <p>The member has active coverage</p> | <p>The provider will be advanced to the New Authorization Pre-Screening Questions</p>  <p>The purpose of the New Authorization Pre-Screening Questions is to ensure that the user is following the correct authorization process. It is important to scroll through the questions to ensure that there is not a more appropriate avenue for your specific request. These questions are specific based on the health plan.</p> |
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Creating a New Authorization (cont'd)

| Step | Action | | | | | | |
|--------------------------------|---|-------|---------|--------------------------------|------------------------------------|-------------------------------|--------------------|
| 5. | <p data-bbox="203 243 938 279">Enter service type and place of service, then select Next</p> <div data-bbox="256 285 1507 401">  <p data-bbox="444 310 1474 380">View Eligibility & Benefits is available to view under the member's demographic information.</p> </div> <div data-bbox="203 407 1523 911">  </div> <p data-bbox="203 926 1544 1192">Service Type – Select the appropriate service type. Based on the service type selected the user may or may not be prompted to enter the place of service. For example, if the request is for home health care the user will not be prompted to select a place of service because the place of service is in the home. If the service type is physical therapy the user will be prompted to specify a place of service (comprehensive outpatient rehabilitation facility, home, independent clinic, off campus-outpatient hospital, office). If an inpatient service type is selected the user will not be prompted to enter a place of service on this screen.</p> <table border="1" data-bbox="203 1245 1516 1341"> <thead> <tr> <th data-bbox="203 1245 678 1276">If...</th> <th data-bbox="678 1245 1516 1276">Then...</th> </tr> </thead> <tbody> <tr> <td data-bbox="203 1276 678 1308">Creating an outpatient episode</td> <td data-bbox="678 1276 1516 1308">Continue to the next step (step 6)</td> </tr> <tr> <td data-bbox="203 1308 678 1341">Creating an inpatient episode</td> <td data-bbox="678 1308 1516 1341">Continue to step 7</td> </tr> </tbody> </table> <p data-bbox="203 1398 1435 1434">Note: At any time while creating an authorization if you wish to close or save the request select</p> <div data-bbox="203 1440 362 1486">  </div> <p data-bbox="362 1461 1555 1535">which will enable the following pop up and allows the user to discard auth, cancel, and save as draft.</p> <div data-bbox="203 1545 906 1822">  </div> <div data-bbox="932 1545 1500 1822"> <p data-bbox="948 1560 1403 1596"><u>Discard Auth</u> – deletes the request</p> <p data-bbox="948 1625 1419 1661"><u>Cancel</u> – allows the user to continue</p> <p data-bbox="948 1690 1474 1801"><u>Save As Draft</u> – allows the user to come back and complete the request at a later time.</p> </div> | If... | Then... | Creating an outpatient episode | Continue to the next step (step 6) | Creating an inpatient episode | Continue to step 7 |
| If... | Then... | | | | | | |
| Creating an outpatient episode | Continue to the next step (step 6) | | | | | | |
| Creating an inpatient episode | Continue to step 7 | | | | | | |


Creating a New Authorization - Outpatient Request

| Step | Action | | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------|---|---|--|-------------------------|--|---------------|--|-----------------|---|---|--|----------------------------|---|---------------------------|---|------------------|---|-----------|--|--|-------------|--------|-------------------------------|---|----------|---|
| 6. | <p>Complete information in the required fields following the guidelines outlined below for an Outpatient Request. Outpatient request can be entered up to 365 days in advance.</p> <table border="1"> <tr> <td data-bbox="207 268 467 428">Date of Service</td> <td data-bbox="467 268 1552 428"> This defaults to the current date and is not available to be changed. <div data-bbox="477 323 678 420"> </div> </td> </tr> <tr> <td data-bbox="207 428 467 840">Level of Service</td> <td data-bbox="467 428 1552 840"> Choose the appropriate selection from the drop-down list – elective or urgent. <div data-bbox="477 483 964 642"> </div> <table border="1"> <thead> <tr> <th data-bbox="477 651 646 684">If</th> <th data-bbox="646 651 1468 684">Then</th> </tr> </thead> <tbody> <tr> <td data-bbox="477 684 646 747">Elective</td> <td data-bbox="646 684 1468 747">Services scheduled in advance that do not involve a medical emergency</td> </tr> <tr> <td data-bbox="477 747 646 840">Urgent</td> <td data-bbox="646 747 1468 840">Unscheduled admission of patient. An unexpected illness or injury that needs prompt medical attention.</td> </tr> </tbody> </table> </td> </tr> <tr> <td data-bbox="207 840 467 1041">Requesting Provider</td> <td data-bbox="467 840 1552 1041"> Choose the appropriate selection from the drop-down list. Requesting provider is the provider that is requesting the service. <div data-bbox="477 936 945 1033"> </div> </td> </tr> <tr> <td data-bbox="207 1041 467 1234">Servicing Provider</td> <td data-bbox="467 1041 1552 1234"> Choose the appropriate selection from the drop-down list. Servicing provider is the provider completing the service. <div data-bbox="477 1138 945 1234"> </div> </td> </tr> <tr> <td data-bbox="207 1234 467 1843">Diagnoses</td> <td data-bbox="467 1234 1552 1843"> This is a look up field (max number of diagnosis codes that can be attached is 12). <div data-bbox="477 1331 867 1440"> </div> <p>Note: The user has the ability to change the primary diagnosis if more than 1 diagnosis exists and there is also the ability to delete diagnosis that may have been entered in error. The user can hover over the row to reorder (arrow) and or delete (trashcan) the diagnosis.</p> <div data-bbox="477 1621 1422 1793"> <table border="1"> <thead> <tr> <th colspan="3">Diagnoses</th> </tr> </thead> <tbody> <tr> <td>1 (Primary)</td> <td>M62.81</td> <td>Muscle weakness (generalized)</td> </tr> <tr> <td>2</td> <td>T67.01XA</td> <td>Heatstroke and sunstroke, initial encounter</td> </tr> </tbody> </table> </div> </td> </tr> </table> | Date of Service | This defaults to the current date and is not available to be changed. <div data-bbox="477 323 678 420"> </div> | Level of Service | Choose the appropriate selection from the drop-down list – elective or urgent. <div data-bbox="477 483 964 642"> </div> <table border="1"> <thead> <tr> <th data-bbox="477 651 646 684">If</th> <th data-bbox="646 651 1468 684">Then</th> </tr> </thead> <tbody> <tr> <td data-bbox="477 684 646 747">Elective</td> <td data-bbox="646 684 1468 747">Services scheduled in advance that do not involve a medical emergency</td> </tr> <tr> <td data-bbox="477 747 646 840">Urgent</td> <td data-bbox="646 747 1468 840">Unscheduled admission of patient. An unexpected illness or injury that needs prompt medical attention.</td> </tr> </tbody> </table> | If | Then | Elective | Services scheduled in advance that do not involve a medical emergency | Urgent | Unscheduled admission of patient. An unexpected illness or injury that needs prompt medical attention. | Requesting Provider | Choose the appropriate selection from the drop-down list. Requesting provider is the provider that is requesting the service. <div data-bbox="477 936 945 1033"> </div> | Servicing Provider | Choose the appropriate selection from the drop-down list. Servicing provider is the provider completing the service. <div data-bbox="477 1138 945 1234"> </div> | Diagnoses | This is a look up field (max number of diagnosis codes that can be attached is 12). <div data-bbox="477 1331 867 1440"> </div> <p>Note: The user has the ability to change the primary diagnosis if more than 1 diagnosis exists and there is also the ability to delete diagnosis that may have been entered in error. The user can hover over the row to reorder (arrow) and or delete (trashcan) the diagnosis.</p> <div data-bbox="477 1621 1422 1793"> <table border="1"> <thead> <tr> <th colspan="3">Diagnoses</th> </tr> </thead> <tbody> <tr> <td>1 (Primary)</td> <td>M62.81</td> <td>Muscle weakness (generalized)</td> </tr> <tr> <td>2</td> <td>T67.01XA</td> <td>Heatstroke and sunstroke, initial encounter</td> </tr> </tbody> </table> </div> | Diagnoses | | | 1 (Primary) | M62.81 | Muscle weakness (generalized) | 2 | T67.01XA | Heatstroke and sunstroke, initial encounter |
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Creating a New Authorization - Outpatient (cont'd)

| Step | Action |
|------|--|
| 6. | <p>Services</p> <p>From / To</p> <p>From (start date) / To (end date)</p> <div data-bbox="537 323 867 411" style="border: 1px solid #ccc; padding: 5px;"> <p>From <input type="text" value="03/11/2022"/> To <input type="text" value="mm/dd/yyyy"/></p> </div> <p>Note: The user will not be able to submit requests for identical service codes for the same dates. The error message below will be received when the system detects a duplication of services for the same date range. If InterQual is applicable the error message will appear after InterQual is completed. If InterQual is not applicable, the error message will appear when the user clicks Submit.</p> <div data-bbox="537 663 1487 953" style="border: 1px solid #ccc; padding: 5px;"> <div style="border: 2px solid red; padding: 5px; margin-bottom: 10px;"> <ul style="list-style-type: none"> • Invalid / Missing Date(s) of Service - Please Correct and Resubmit </div> <p>Service Type</p> <p><input type="text" value="Outpatient Durable Medical Equipment P..."/></p> <p>Place of Service</p> <p><input type="text" value="Home"/></p> </div> <p>Procedure Code</p> <p>Free text field. If an incorrect procedure code is entered the request may not be processed. The procedure code field is free text and not a lookup field. The user will not be notified if an incorrect code is entered so it is very important for the user to enter the correct code.</p> <div data-bbox="537 1136 740 1234" style="border: 1px solid #ccc; padding: 5px;"> <p>Procedure Code</p> <input type="text"/> </div> <p>Modifiers</p> <p>Free text field. This is not a mandatory field.</p> <div data-bbox="537 1297 813 1388" style="border: 1px solid #ccc; padding: 5px;"> <p>Modifiers</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> </div> <p>Units</p> <p>Free text numeric value.</p> <div data-bbox="537 1451 813 1541" style="border: 1px solid #ccc; padding: 5px;"> <p>Units</p> <input type="text" value="1"/> Unit(s) </div> <p>Add New Service Line</p> <p>The user must add new service line for the system to recognize the request even if only adding 1 request or 1 service. The Add New Service Line will also be utilized when adding additional service requests.</p> <div data-bbox="537 1682 834 1772" style="border: 1px solid #ccc; padding: 5px;"> <p>+ Add New Service Line</p> </div> |

















Creating a New Authorization – Outpatient (cont'd)

| Step | Action |
|------|--|
| 6. | <p data-bbox="228 247 410 279">Attachments</p> <p data-bbox="228 296 467 327">+ Add Document</p> <p data-bbox="542 296 1520 516">Attach supporting clinical documentation (supported document types: pdf, docx, xml, csv, png, gif). The user may attach up to 10 documents. The user can identify the document type based on the drop down list. If the user attaches a document, the document type is mandatory. Select document type drop down. The user also has the ability to delete any document attached in error.</p> <div data-bbox="542 533 1520 772"> <p data-bbox="565 548 688 571">Attachments</p> <p data-bbox="565 596 711 625">+ Add Document</p> <p data-bbox="841 705 1214 735">Drop Documents here to Attach</p> </div> <div data-bbox="542 785 1520 1220"> <p data-bbox="565 793 688 816">Attachments</p> <p data-bbox="565 842 711 871">+ Add Document</p> <p data-bbox="565 898 824 928">  Document 1- for upload.docx </p> <p data-bbox="997 905 1284 934">Select document type ...</p> <ul data-bbox="997 940 1300 1213" style="list-style-type: none"> Select document type ... Progress Report Medical Record Attachment Patient Medical History Document Physical Therapy Notes Continued treatment Nursing Notes Physicians Report Physician Order Justification for Admission Durable Medical Equipment Prescription Orders and Treatment Document Initial Assessment Consent Discharge Summary <p data-bbox="1328 905 1484 934">Delete</p> </div> |

Creating a New Authorization – Outpatient (cont'd)

| Step | Action |
|------|---|
| 6. | <p data-bbox="240 239 324 268">Notes</p> <p data-bbox="253 281 337 310">Notes</p> <p data-bbox="565 281 1518 394">Add pertinent notes. There is a 264 character limit. Once the max character limit is reached, the box will turn red and the user will be unable to add additional characters.</p> <div data-bbox="565 407 1453 562" style="border: 1px solid black; padding: 5px;"> <p data-bbox="581 415 625 436">Notes</p> <p data-bbox="581 441 738 462">Enter Clinical Notes ...</p> <p data-bbox="1323 535 1445 556">264 characters left</p> </div> <p data-bbox="253 583 535 613">Contact Information</p> <p data-bbox="565 583 1518 735">Enter your contact information. First name, last name and phone number are required fields. Fax number and email address are optional fields. The Declaration check box is mandatory and must be checked to submit the request. Select Submit when the request is complete.</p> <p data-bbox="565 745 1356 814">Note: Check Save as default Contact Information for Medical Authorizations to save time in the future.</p> <div data-bbox="565 919 1542 1344" style="border: 1px solid black; padding: 5px;"> <p data-bbox="568 928 779 949">▼ Contact Information</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p data-bbox="568 961 657 982">First Name</p> <p data-bbox="568 991 617 1012">Beth</p> <p data-bbox="568 1039 657 1060">Last Name</p> <p data-bbox="568 1068 641 1089">Williams</p> <p data-bbox="568 1117 682 1138">Email Address</p> <p data-bbox="568 1146 641 1167">Optional</p> </div> <div style="width: 45%;"> <p data-bbox="1063 961 1185 982">Phone Number</p> <p data-bbox="1063 991 1201 1012">(843) 999-9999</p> <p data-bbox="1063 1039 1161 1060">Fax Number</p> <p data-bbox="1063 1068 1136 1089">Optional</p> <p data-bbox="1063 1108 1372 1159"><input checked="" type="checkbox"/> Save as default Contact Information for Medical Authorizations</p> </div> </div> <div style="border: 1px solid red; padding: 5px; margin-top: 10px;"> <p data-bbox="584 1207 714 1228">DECLARATION</p> <p data-bbox="584 1239 1258 1270"><input checked="" type="checkbox"/> By checking this box, I agree to notify the member of any services that are approved.</p> </div> <p data-bbox="1209 1302 1274 1323" style="text-align: right;">Cancel</p> <p data-bbox="1299 1302 1396 1323" style="text-align: right;">« Previous</p> <p data-bbox="1437 1302 1518 1323" style="text-align: right;">Submit</p> </div> <p data-bbox="240 1360 901 1396">***Proceed to Step 8 for Interqual instruction***</p> |




Creating a New Authorization – Inpatient Request

| Step | Action | | | | | | | | |
|--|---|---------------------|--|--|--|-------------------|-------------------|--|--|
| 7. | <p>Complete information following the guidelines outlined below for an inpatient request:</p> <div data-bbox="207 268 522 1033" style="background-color: #e0e0e0; padding: 5px;">Service Type</div> <div data-bbox="535 268 1550 1033" style="border: 1px solid black; padding: 10px;"> <p>Select the appropriate service type and place of service according to the request.</p> <div data-bbox="539 365 1167 600" style="border: 1px solid black; padding: 5px;"> <p>Service Type</p> <div data-bbox="552 422 1148 478" style="border: 1px solid #ccc; padding: 2px;">  Select service type... </div> <p>Place of Service</p> <div data-bbox="552 531 1148 588" style="border: 1px solid #ccc; padding: 2px;">  Select place of service... </div> </div> <table border="1" data-bbox="539 653 1528 825" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Service Type</td> <td>Type of service to be provided to the member. (Based on the service type, the system will request for the user to enter the place of service.)</td> </tr> <tr> <td>Place of Service</td> <td>Location in which services will be rendered.</td> </tr> </table> <p>Once service type is select, click Next to continue.</p> <div data-bbox="539 926 774 1026" style="border: 2px solid black; padding: 5px; text-align: center;"> <div data-bbox="565 947 748 1005" style="background-color: #90ee90; border: 1px solid black; padding: 5px; display: inline-block;">Next »</div> </div> </div> | Service Type | Type of service to be provided to the member. (Based on the service type, the system will request for the user to enter the place of service.) | Place of Service | Location in which services will be rendered. | | | | |
| Service Type | Type of service to be provided to the member. (Based on the service type, the system will request for the user to enter the place of service.) | | | | | | | | |
| Place of Service | Location in which services will be rendered. | | | | | | | | |
| | <div data-bbox="207 1041 522 1959" style="background-color: #e0e0e0; padding: 5px;">Date of Admission/ Date of Discharge</div> <div data-bbox="535 1041 1550 1959" style="border: 1px solid black; padding: 10px;"> <p>Date of admission is a mandatory field. Date of discharge is optional because it may not be known at the time the request is initiated. However, providers can record the members discharge date by amending the inpatient authorization request (refer to Amending an Authorization chapter).</p> <div data-bbox="539 1205 1099 1320" style="border: 1px solid black; padding: 5px;"> <table style="width: 100%;"> <tr> <td style="width: 50%;">Date Of Admission</td> <td style="width: 50%;">Date of Discharge</td> </tr> <tr> <td> 03/09/2022</td> <td> Optional</td> </tr> </table> </div> <p>Note: the user will receive the message below if the dates of service overlap in the same case.</p> <div data-bbox="539 1423 1503 1850" style="border: 2px solid black; padding: 10px;"> <div data-bbox="565 1436 1471 1507" style="border: 2px solid red; padding: 5px; margin-bottom: 10px;"> <ul style="list-style-type: none"> • Invalid / Missing Date(s) of Service - Please Correct and Resubmit </div> <div data-bbox="597 1520 1198 1829" style="border: 1px solid #ccc; padding: 5px;"> <p>Service Type</p> <div data-bbox="607 1556 1198 1604" style="border: 1px solid #ccc; padding: 2px;">  Inpatient Medical Care </div> <p>Place of Service</p> <div data-bbox="607 1667 1198 1715" style="border: 1px solid #ccc; padding: 2px;">  Inpatient Hospital </div> <table style="width: 100%;"> <tr> <td style="width: 50%;">Date Of Admission</td> <td style="width: 50%;">Date of Discharge</td> </tr> <tr> <td> 06/29/2022</td> <td> 06/30/2022</td> </tr> </table> </div> </div> </div> | Date Of Admission | Date of Discharge |  03/09/2022 |  Optional | Date Of Admission | Date of Discharge |  06/29/2022 |  06/30/2022 |
| Date Of Admission | Date of Discharge | | | | | | | | |
|  03/09/2022 |  Optional | | | | | | | | |
| Date Of Admission | Date of Discharge | | | | | | | | |
|  06/29/2022 |  06/30/2022 | | | | | | | | |

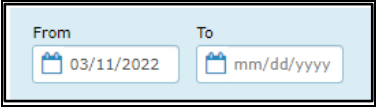
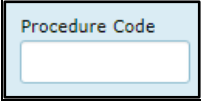

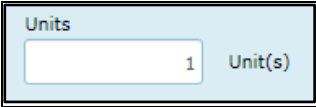
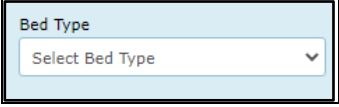
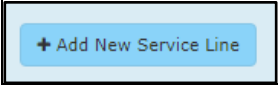
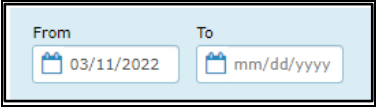
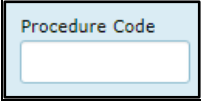

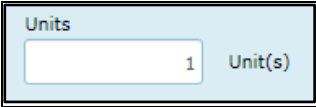
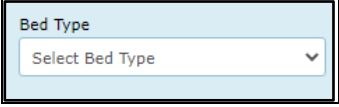
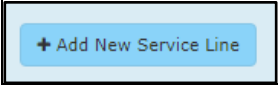
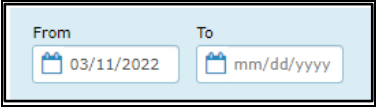
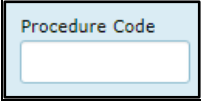

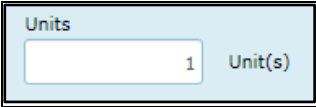
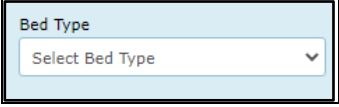
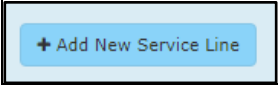
Creating a New Authorization – Inpatient Request

| Step | Action | | | | | | | | |
|-----------------|--|----|------|-----------------|--|---------------|--|-----------------|---|
| 7. | <p>Admission Type</p> <p>Choose the appropriate selection from the drop-down list – Elective, Urgent, or Emergent</p> <div data-bbox="537 296 1040 489"> <p>Admission Type ?</p> <p>Select admission type ...</p> <p>Select admission type ...</p> <p>Elective</p> <p>Urgent</p> <p>Emergent</p> </div> <div data-bbox="1143 283 1531 489" style="border: 1px solid black; padding: 5px;"> <p>The question mark beside admission type provides information regarding the types of admissions.</p> </div> <table border="1" data-bbox="537 495 1531 751"> <thead> <tr> <th data-bbox="537 495 711 531">If</th> <th data-bbox="716 495 1531 531">Then</th> </tr> </thead> <tbody> <tr> <td data-bbox="537 537 711 600">Elective</td> <td data-bbox="716 537 1531 600">Potential admission for illness/injury enrollee not currently admitted</td> </tr> <tr> <td data-bbox="537 606 711 701">Urgent</td> <td data-bbox="716 606 1531 701">Potential admission for illness/injury that can be treated in a 24 hour period and if left untreated could rapidly become a crisis or emergency, enrollee not currently admitted</td> </tr> <tr> <td data-bbox="537 707 711 751">Emergent</td> <td data-bbox="716 707 1531 751">Concurrent review, enrollee is currently admitted</td> </tr> </tbody> </table> | If | Then | Elective | Potential admission for illness/injury enrollee not currently admitted | Urgent | Potential admission for illness/injury that can be treated in a 24 hour period and if left untreated could rapidly become a crisis or emergency, enrollee not currently admitted | Emergent | Concurrent review, enrollee is currently admitted |
| If | Then | | | | | | | | |
| Elective | Potential admission for illness/injury enrollee not currently admitted | | | | | | | | |
| Urgent | Potential admission for illness/injury that can be treated in a 24 hour period and if left untreated could rapidly become a crisis or emergency, enrollee not currently admitted | | | | | | | | |
| Emergent | Concurrent review, enrollee is currently admitted | | | | | | | | |
| | <p>Requesting Provider</p> <p>Choose the appropriate selection from the drop-down list. Requesting provider is the provider that is requesting the service.</p> <div data-bbox="537 894 1081 1003"> <p>Requesting Provider</p> <p>Select Group/Facility ...</p> </div> | | | | | | | | |
| | <p>Servicing Provider</p> <p>Choose the appropriate selection from the drop-down list. Servicing provider is the provider completing the service (also known as the attending provider).</p> <div data-bbox="537 1131 1081 1241"> <p>Servicing Provider</p> <p>Select Provider ...</p> </div> | | | | | | | | |
| | <p>Servicing Facility</p> <p>The servicing facility is the location where the service will be performed.</p> <div data-bbox="537 1308 1292 1451"> <p>Servicing Facility</p> <p>The Servicing Facility is the location where the surgery or service will be performed.</p> <p>Select Group/Facility</p> </div> | | | | | | | | |

Creating a New Authorization – Inpatient (cont'd)

| Step | Action | | | | | | | | | | |
|------|---|----------|---|---|-------------------------------|---|---|--|----------|---|--|
| 7. | <p data-bbox="203 239 370 275">Diagnoses</p> <p data-bbox="203 281 370 317">Diagnoses</p> <p data-bbox="537 281 1495 317">Look up field (max number of diagnosis codes that can be attached is 12).</p> <div data-bbox="537 323 930 443"><p data-bbox="548 331 659 359">Diagnoses</p><input data-bbox="565 380 911 415" type="text" value="Add Diagnoses ..."/></div> <p data-bbox="537 457 1511 604">Note: The user can change the primary diagnosis if more than 1 diagnosis exists and there is also the ability to delete a diagnosis that may have been entered in error. The user can hover over the row to reorder (arrow) and or delete (trashcan) the diagnosis.</p> <div data-bbox="537 617 1549 800"><p data-bbox="548 625 659 653">Diagnoses</p><input data-bbox="565 674 906 709" type="text" value="Add Diagnoses ..."/><table border="1" data-bbox="553 716 1539 793"><tbody><tr><td data-bbox="558 722 574 743">1</td><td data-bbox="591 722 651 743">(Primary)</td><td data-bbox="678 722 743 743">M62.81</td><td data-bbox="802 722 1040 743">Muscle weakness (generalized)</td><td data-bbox="1446 709 1528 758"></td></tr><tr><td data-bbox="558 758 574 779">2</td><td data-bbox="591 758 607 779"></td><td data-bbox="678 758 760 779">T67.01XA</td><td data-bbox="802 758 1133 779">Heatstroke and sunstroke, initial encounter</td><td data-bbox="1446 758 1528 779"></td></tr></tbody></table></div> | 1 | (Primary) | M62.81 | Muscle weakness (generalized) |  | 2 | | T67.01XA | Heatstroke and sunstroke, initial encounter | |
| 1 | (Primary) | M62.81 | Muscle weakness (generalized) |  | | | | | | | |
| 2 | | T67.01XA | Heatstroke and sunstroke, initial encounter | | | | | | | | |

Creating a New Authorization – Inpatient (cont'd)

| Step | Action | | | | | | | | | | | | |
|-------------------------------|--|------------------|---|-----------------------|--|------------------|---|--------------|--|-----------------|--|-------------------------------|---|
| 7. | <p>Services</p> <table border="1"> <tr> <td data-bbox="207 268 527 514">From / To</td> <td data-bbox="527 268 1469 514"> <p>From (start date) / To (end date). The From and To dates are mandatory fields. If you don't know the To date you can advance it by 1 day from the From date.</p>  </td> </tr> <tr> <td data-bbox="207 514 527 871">Procedure Code</td> <td data-bbox="527 514 1469 871"> <p>Free text field. If an incorrect procedure code is entered the request may not be processed. The procedure code field is free text and not a lookup field. The user will not be notified if an incorrect code is entered so it is very important for the user to enter the correct code. If this is an inpatient only request and there is no procedure code do not place anything in the procedure code field.</p>  </td> </tr> <tr> <td data-bbox="207 871 527 1018">Modifiers</td> <td data-bbox="527 871 1469 1018"> <p>This is a free text field and is not a mandatory field.</p>  </td> </tr> <tr> <td data-bbox="207 1018 527 1228">Units</td> <td data-bbox="527 1018 1469 1228"> <p>Free text numeric value. For the inpatient request, units are equivalent to days.</p>  </td> </tr> <tr> <td data-bbox="207 1228 527 1438">Bed Type</td> <td data-bbox="527 1228 1469 1438"> <p>Select the appropriate bed type from the drop down list. This is a mandatory field.</p>  </td> </tr> <tr> <td data-bbox="207 1438 527 1688">+ Add New Service Line</td> <td data-bbox="527 1438 1469 1688"> <p>The user must add new service line for the system to recognize the request. The Add New Service Line will also be utilized when adding additional service requests.</p>  </td> </tr> </table> | From / To | <p>From (start date) / To (end date). The From and To dates are mandatory fields. If you don't know the To date you can advance it by 1 day from the From date.</p>  | Procedure Code | <p>Free text field. If an incorrect procedure code is entered the request may not be processed. The procedure code field is free text and not a lookup field. The user will not be notified if an incorrect code is entered so it is very important for the user to enter the correct code. If this is an inpatient only request and there is no procedure code do not place anything in the procedure code field.</p>  | Modifiers | <p>This is a free text field and is not a mandatory field.</p>  | Units | <p>Free text numeric value. For the inpatient request, units are equivalent to days.</p>  | Bed Type | <p>Select the appropriate bed type from the drop down list. This is a mandatory field.</p>  | + Add New Service Line | <p>The user must add new service line for the system to recognize the request. The Add New Service Line will also be utilized when adding additional service requests.</p>  |
| From / To | <p>From (start date) / To (end date). The From and To dates are mandatory fields. If you don't know the To date you can advance it by 1 day from the From date.</p>  | | | | | | | | | | | | |
| Procedure Code | <p>Free text field. If an incorrect procedure code is entered the request may not be processed. The procedure code field is free text and not a lookup field. The user will not be notified if an incorrect code is entered so it is very important for the user to enter the correct code. If this is an inpatient only request and there is no procedure code do not place anything in the procedure code field.</p>  | | | | | | | | | | | | |
| Modifiers | <p>This is a free text field and is not a mandatory field.</p>  | | | | | | | | | | | | |
| Units | <p>Free text numeric value. For the inpatient request, units are equivalent to days.</p>  | | | | | | | | | | | | |
| Bed Type | <p>Select the appropriate bed type from the drop down list. This is a mandatory field.</p>  | | | | | | | | | | | | |
| + Add New Service Line | <p>The user must add new service line for the system to recognize the request. The Add New Service Line will also be utilized when adding additional service requests.</p>  | | | | | | | | | | | | |

Creating a New Authorization – Inpatient (cont'd)

| Step | Action |
|------|--|
| 7. | <p data-bbox="207 239 386 268">Attachments</p> <p data-bbox="219 281 430 310">Add Document</p> <p data-bbox="537 281 1511 428">Attach supporting clinical documentation (supported document types: pdf, docx, xml, csv, png, gif). The user may attach up to 10 documents. If the user attaches a document, the document type is mandatory. The user also has the ability to delete any document attached in error.</p> <div data-bbox="537 443 1484 674"><p data-bbox="558 457 678 478">Attachments</p><p data-bbox="558 506 711 527">+ Add Document</p><p data-bbox="829 617 1195 638">Drop Documents here to Attach</p></div> <div data-bbox="537 688 1484 1125"><p data-bbox="558 703 678 724">Attachments</p><p data-bbox="558 751 711 772">+ Add Document</p><p data-bbox="558 806 813 827">Document 1- for upload.docx</p><p data-bbox="992 814 1252 835">Select document type ...</p><ul data-bbox="992 842 1276 1115" style="list-style-type: none">Select document type ...Progress ReportMedical Record AttachmentPatient Medical History DocumentPhysical Therapy NotesContinued treatmentNursing NotesPhysicians ReportPhysician OrderJustification for AdmissionDurable Medical Equipment PrescriptionOrders and Treatment DocumentInitial AssessmentConsentDischarge Summary<p data-bbox="1300 821 1455 842">Delete</p></div> |

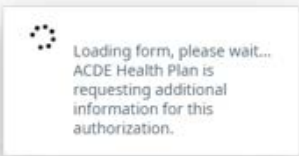
Creating a New Authorization – Inpatient (cont'd)

| Step | Action |
|------|--|
| 7. | <p>Notes</p> <p>Notes</p> <p>Add pertinent notes. There is a 264 character limit. Once the max character limit is reached, the box will turn red and the user will be unable to add additional characters.</p> <div data-bbox="537 407 1533 583"> <p>Notes</p> <p>Enter Clinical Notes ...</p> <p>264 characters left</p> </div> <p>Contact Information</p> <p>Enter your contact information. First name, last name and phone number are required fields. Fax number and email address are optional fields. The Declaration check box is mandatory and must be checked to submit the request. Select Submit when the request is complete.</p> <p>Note: Check Save as default Contact Information for Medical Authorizations to save time in the future.</p> <div data-bbox="537 846 1533 1278"> <p>▼ Contact Information</p> <p>First Name Beth</p> <p>Last Name Williams</p> <p>Email Address Optional</p> <p>Phone Number (843) 999-9999</p> <p>Fax Number Optional</p> <p><input checked="" type="checkbox"/> Save as default Contact Information for Medical Authorizations</p> <p>DECLARATION</p> <p><input checked="" type="checkbox"/> By checking this box, I agree to notify the member of any services that are approved.</p> <p>Cancel « Previous Submit</p> </div> |

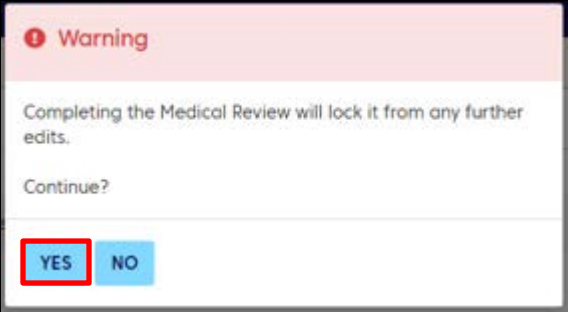
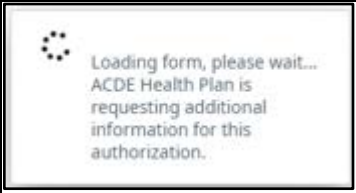
Creating a New Authorization – InterQual – Outpatient and Inpatient



If you need training or have questions regarding the use of InterQual criteria, please contact Change Healthcare.

| Step | Action | |
|------|--|---|
| 8. | After completion of the previous steps, when the user selects Submit InterQual criteria may or may not launch. InterQual criteria is launched based on the diagnosis code and or the service code and whether or not there is criteria to launch for the diagnosis code and or service code that is identified in the episode. If InterQual criteria is not launched after the user submits the request, the user may receive a status of pending or an automatic approval. | |
| 9. | <p>The message below will populate indicating the InterQual page is loading.</p> <div data-bbox="204 640 636 894" style="border: 1px solid black; padding: 10px; text-align: center;">  </div> | |
| 10. | If... | Then... |
| | Outpatient | <p>The system will determine the criteria set and subset based on the diagnosis code and the procedure code (if applicable). To begin the review click on medical review at the bottom of the screen.</p> <div data-bbox="431 1115 709 1199" style="border: 2px solid red; padding: 5px; text-align: center;"> <p>MEDICAL REVIEW ➔</p> </div> <p>Answer the questions as they relate to the patient/member.</p> |
| | Inpatient | <p>The system will direct the user to a guideline selection page. Select the most appropriate guideline then click on medical review.</p> <div data-bbox="431 1335 709 1419" style="border: 2px solid red; padding: 5px; text-align: center;"> <p>MEDICAL REVIEW ➔</p> </div> <p>Select the day on which you wish to complete the medical review then select the pertinent findings/interventions.</p> |

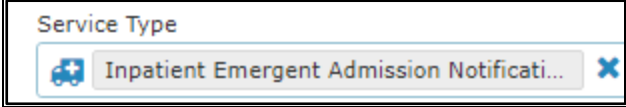
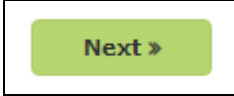
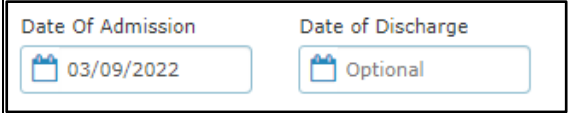
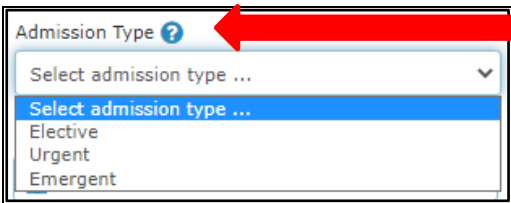
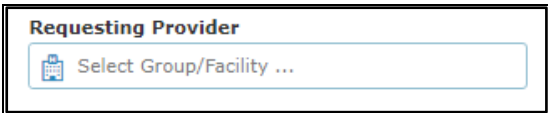

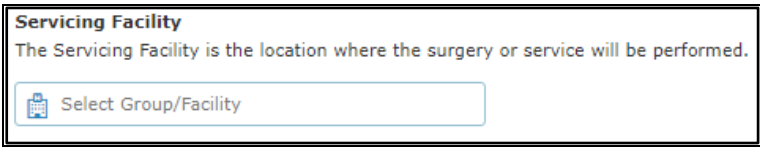
Creating a New Authorization - InterQual (cont'd)

| Step | Action | | | | | | |
|-----------------------------------|---|--------|----------|-----------------------------------|---|-----------------------------------|---|
| 11. | <p>At the end of the InterQual review...</p> <table border="1" data-bbox="207 281 1555 646"> <thead> <tr> <th data-bbox="207 281 704 327">If....</th> <th data-bbox="704 281 1555 327">Then....</th> </tr> </thead> <tbody> <tr> <td data-bbox="207 327 704 449">Q&A criteria is used (outpatient)</td> <td data-bbox="704 327 1555 449">After all questions have been answered the no remaining questions message will display: Click view recommendations to continue.</td> </tr> <tr> <td data-bbox="207 449 704 646">Decision tree is used (inpatient)</td> <td data-bbox="704 449 1555 646">Address all pertinent findings/interventions based on the day selected for the review. At the end of the review the user will receive criteria met or criteria not met. Regardless of if the criteria meets or does not meet, the user should continue.</td> </tr> </tbody> </table> | If.... | Then.... | Q&A criteria is used (outpatient) | After all questions have been answered the no remaining questions message will display: Click view recommendations to continue. | Decision tree is used (inpatient) | Address all pertinent findings/interventions based on the day selected for the review. At the end of the review the user will receive criteria met or criteria not met. Regardless of if the criteria meets or does not meet, the user should continue. |
| If.... | Then.... | | | | | | |
| Q&A criteria is used (outpatient) | After all questions have been answered the no remaining questions message will display: Click view recommendations to continue. | | | | | | |
| Decision tree is used (inpatient) | Address all pertinent findings/interventions based on the day selected for the review. At the end of the review the user will receive criteria met or criteria not met. Regardless of if the criteria meets or does not meet, the user should continue. | | | | | | |
| 12. | <p>When the review is complete, the user will need to click Complete at the bottom, then select YES to continue.</p>  <p>The image shows a warning dialog box with a red header and a red exclamation mark icon. The text reads: "Warning", "Completing the Medical Review will lock it from any further edits.", and "Continue?". At the bottom, there are two buttons: "YES" (highlighted with a red box) and "NO".</p> | | | | | | |
| 13. | <p>The user will get the following notice which indicates that the user is being sent back to NaviNet from InterQual.</p>  <p>The image shows a loading notice with a circular refresh icon. The text reads: "Loading form, please wait...", "ACDE Health Plan is requesting additional information for this authorization.", and "authorization.".</p> | | | | | | |







Creating a New Authorization - InterQual (cont'd)

| Step | Action |
|------|--|
| 14. | <p>Once the user arrives back in NaviNet, they will arrive on the authorization details screen.</p> <p>The screenshot displays the 'Authorization Details' page for a patient named FRANKIE MOCHRIE. At the top right is the AmeriHealth Caritas Delaware logo. Below the header, there are navigation links: '+ Create New', 'History', 'Authorization Search', and 'View/Print as PDF'. A status bar indicates the authorization is 'Pending' with the number '1' and the authorization ID '92204002349'. Below this, it states 'Disposition pending review'. The main content area is divided into three columns: <ul style="list-style-type: none"> Requesting Provider: FRANKIE MOCHRIE (with a blurred name), Ahmed, Mohamed F., 379 Walmart Dr Ste 101, Camden Wyoming, DE 19934--1365, (302) 698-4441. Servicing Provider: Alfred I Dupont Hospital, 1600 Rockland Rd, Wilmington, DE 19803--3607. Date of Admission: 04/13/2022, Admission Type: Emergent, Service Type: Inpatient Medical Care, Place of Service: Inpatient Hospital. Servicing Facility: Alfred I Dupont Hospital, 1600 Rockland Rd, Wilmington, DE 19803--3607. Patient's Insurance: (blurred information). Primary Care Physician: HEATHER BITTNER-FAGAN, NPI: (blurred). A link 'View Eligibility & Benefits' is visible at the bottom left of the patient information section. </p> |

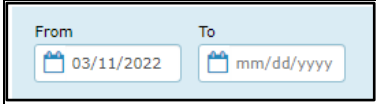
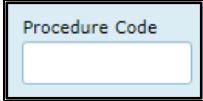


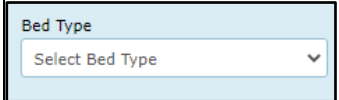
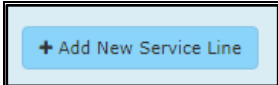
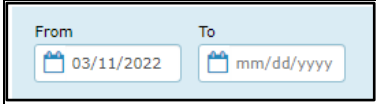
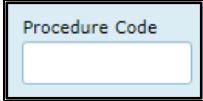


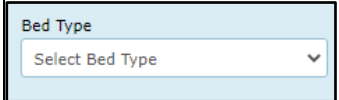
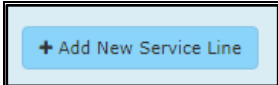
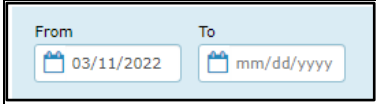
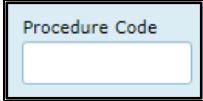


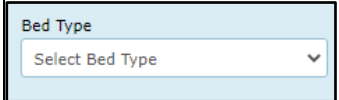
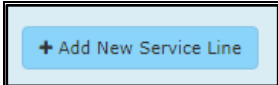
Creating a New Authorization – Inpatient Emergent Admission Notification

| Step | Action | | | | |
|----------|---|----|------|----------|---|
| 6. | Refer to steps 1-5 above under the heading Creating a New Authorization. Complete information following the guidelines outlined below for an Inpatient Emergent Admission Notification. If the user is identified as non-clinical, the user may report an Emergency Admission utilizing the steps below. | | | | |
| | <p>Service Type</p> <p>Select the appropriate Service Type (non-clinical users should select Inpatient Emergent Admission Notification as their service type).</p>  <p>Once Service Type is selected, click Next to continue</p>  | | | | |
| | <p>Date of Admission/ Date of Discharge</p> <p>Date of Admission is a mandatory field. Date of Discharge is optional because it may not be known at the time the request is initiated.</p>  | | | | |
| | <p>Admission Type</p> <p>Choose the appropriate selection from the drop-down list – Elective, Urgent, or Emergent</p>  <div data-bbox="1062 961 1446 1171" style="border: 1px solid black; padding: 5px;"> <p>The question mark beside Admission Type provides information regarding the types of admissions.</p> </div> <table border="1" data-bbox="537 1188 1528 1325"> <thead> <tr> <th data-bbox="537 1188 711 1220">If</th> <th data-bbox="716 1188 1528 1220">Then</th> </tr> </thead> <tbody> <tr> <td data-bbox="537 1226 711 1325">Emergent</td> <td data-bbox="716 1226 1528 1325"> <u>Concurrent review</u>, enrollee is currently admitted Note: Non-Clinical users should select Emergent for Inpatient Admission Notification. </td> </tr> </tbody> </table> | If | Then | Emergent | <u>Concurrent review</u> , enrollee is currently admitted Note: Non-Clinical users should select Emergent for Inpatient Admission Notification. |
| If | Then | | | | |
| Emergent | <u>Concurrent review</u> , enrollee is currently admitted Note: Non-Clinical users should select Emergent for Inpatient Admission Notification. | | | | |
| | <p>Requesting Provider</p> <p>Choose the appropriate selection from the drop-down list. Requesting provider is the provider that is requesting the service.</p>  | | | | |
| | <p>Servicing Provider</p> <p>Choose the appropriate selection from the drop-down list. Servicing provider is the provider completing the service, also known as the attending provider).</p>  | | | | |
| | <p>Servicing Facility</p> <p>Servicing Facility is the location where the service will be performed.</p>  | | | | |


Creating a New Authorization – Inpatient Emergent Admission Notification (cont'd)

| Step | Action | | | | | | | | | | |
|------|---|----------|---|---|-------------------------------|---|---|--|----------|---|---|
| 6. | <p data-bbox="203 235 357 268">Diagnoses</p> <p data-bbox="203 277 357 310">Diagnoses</p> <p data-bbox="535 277 1485 310">Look up field (max number of diagnosis codes that can be attached is 12)</p> <div data-bbox="535 325 933 436"><p data-bbox="544 331 657 361">Diagnoses</p><input data-bbox="560 378 917 409" type="text" value="Add Diagnoses ..."/></div> <p data-bbox="535 451 1510 598">Note: The user can change the primary diagnosis if more than 1 diagnosis exists and there is also the ability to delete a diagnosis that may have been entered in error. The user can hover over the row to reorder (arrow) and or delete (trashcan) the diagnosis.</p> <div data-bbox="535 613 1550 798"><p data-bbox="544 619 657 648">Diagnoses</p><input data-bbox="560 665 917 697" type="text" value="Add Diagnoses ..."/><table border="1" data-bbox="544 709 1534 787"><tbody><tr><td data-bbox="552 718 576 739">1</td><td data-bbox="592 718 657 739">(Primary)</td><td data-bbox="673 718 755 739">M62.81</td><td data-bbox="803 718 1047 739">Muscle weakness (generalized)</td><td data-bbox="1453 709 1534 756"></td></tr><tr><td data-bbox="552 756 576 777">2</td><td data-bbox="592 756 657 777"></td><td data-bbox="673 756 771 777">T67.01XA</td><td data-bbox="803 756 1144 777">Heatstroke and sunstroke, initial encounter</td><td data-bbox="1485 718 1518 749"></td></tr></tbody></table></div> | 1 | (Primary) | M62.81 | Muscle weakness (generalized) |  | 2 | | T67.01XA | Heatstroke and sunstroke, initial encounter |  |
| 1 | (Primary) | M62.81 | Muscle weakness (generalized) |  | | | | | | | |
| 2 | | T67.01XA | Heatstroke and sunstroke, initial encounter |  | | | | | | | |

Creating a New Authorization – Inpatient Emergent Admission Notification (cont'd)

| Step | Action | | | | | | | | | | | | |
|-------------------------------|--|------------------|---|-----------------------|---|------------------|---|--------------|---|-----------------|--|-------------------------------|---|
| 6. | <p>Services</p> <table border="1"> <tr> <td data-bbox="207 268 527 512">From / To</td> <td data-bbox="527 268 1471 512"> <p>From (start date) / To (end date). The From and To dates are mandatory fields. If you don't know the To date you can advance it by 1 day from the From date.</p>  </td> </tr> <tr> <td data-bbox="207 512 527 869">Procedure Code</td> <td data-bbox="527 512 1471 869"> <p>Free text field. If an incorrect procedure code is entered the request may not be processed. The procedure code field is free text and not a lookup field. The user will not be notified if an incorrect code is entered so it is very important for the user to enter the correct code. If this is an inpatient (IP) only request and there is no procedure code do not place anything in the procedure code field.</p>  </td> </tr> <tr> <td data-bbox="207 869 527 1016">Modifiers</td> <td data-bbox="527 869 1471 1016"> <p>Free text field. This is not a mandatory field.</p>  </td> </tr> <tr> <td data-bbox="207 1016 527 1226">Units</td> <td data-bbox="527 1016 1471 1226"> <p>Free text numeric value. For the inpatient request, units is the equivalent to days.</p>  </td> </tr> <tr> <td data-bbox="207 1226 527 1436">Bed Type</td> <td data-bbox="527 1226 1471 1436"> <p>Select bed type from the drop down list. This is a mandatory dropdown field. Select the appropriate bed type.</p>  </td> </tr> <tr> <td data-bbox="207 1436 527 1688">+ Add New Service Line</td> <td data-bbox="527 1436 1471 1688"> <p>The user must add new service line for the system to recognize the request. Add New Service Line will also be utilized when adding additional service requests.</p>  </td> </tr> </table> | From / To | <p>From (start date) / To (end date). The From and To dates are mandatory fields. If you don't know the To date you can advance it by 1 day from the From date.</p>  | Procedure Code | <p>Free text field. If an incorrect procedure code is entered the request may not be processed. The procedure code field is free text and not a lookup field. The user will not be notified if an incorrect code is entered so it is very important for the user to enter the correct code. If this is an inpatient (IP) only request and there is no procedure code do not place anything in the procedure code field.</p>  | Modifiers | <p>Free text field. This is not a mandatory field.</p>  | Units | <p>Free text numeric value. For the inpatient request, units is the equivalent to days.</p>  | Bed Type | <p>Select bed type from the drop down list. This is a mandatory dropdown field. Select the appropriate bed type.</p>  | + Add New Service Line | <p>The user must add new service line for the system to recognize the request. Add New Service Line will also be utilized when adding additional service requests.</p>  |
| From / To | <p>From (start date) / To (end date). The From and To dates are mandatory fields. If you don't know the To date you can advance it by 1 day from the From date.</p>  | | | | | | | | | | | | |
| Procedure Code | <p>Free text field. If an incorrect procedure code is entered the request may not be processed. The procedure code field is free text and not a lookup field. The user will not be notified if an incorrect code is entered so it is very important for the user to enter the correct code. If this is an inpatient (IP) only request and there is no procedure code do not place anything in the procedure code field.</p>  | | | | | | | | | | | | |
| Modifiers | <p>Free text field. This is not a mandatory field.</p>  | | | | | | | | | | | | |
| Units | <p>Free text numeric value. For the inpatient request, units is the equivalent to days.</p>  | | | | | | | | | | | | |
| Bed Type | <p>Select bed type from the drop down list. This is a mandatory dropdown field. Select the appropriate bed type.</p>  | | | | | | | | | | | | |
| + Add New Service Line | <p>The user must add new service line for the system to recognize the request. Add New Service Line will also be utilized when adding additional service requests.</p>  | | | | | | | | | | | | |

Creating a New Authorization – Inpatient Emergent Admission Notification (cont'd)

| Step | Action |
|------|---|
| 6. | <p data-bbox="201 239 386 268">Attachments</p> <p data-bbox="217 281 431 310">Add Document</p> <p data-bbox="532 281 1511 428">Attach supporting clinical documentation (supported document types: pdf, docx, xml, csv, png, gif). The user may attach up to 10 documents. If the user attaches a document, the document type is mandatory. The user also has the ability to delete any document attached in error.</p> <div data-bbox="537 443 1484 674"> <p data-bbox="558 457 678 478">Attachments</p> <p data-bbox="558 499 711 533">+ Add Document</p> <p data-bbox="829 617 1195 646">Drop Documents here to Attach</p> </div> <div data-bbox="537 695 1484 1125"> <p data-bbox="558 701 678 722">Attachments</p> <p data-bbox="558 743 711 777">+ Add Document</p> <p data-bbox="558 806 813 835">  Document 1- for upload.docx </p> <p data-bbox="987 814 1256 844">Select document type ...</p> <ul data-bbox="987 844 1276 1117" style="list-style-type: none"> Select document type ... Progress Report Medical Record Attachment Patient Medical History Document Physical Therapy Notes Continued treatment Nursing Notes Physicians Report Physician Order Justification for Admission Durable Medical Equipment Prescription Orders and Treatment Document Initial Assessment Consent Discharge Summary <p data-bbox="1300 814 1456 848">Delete</p> </div> |


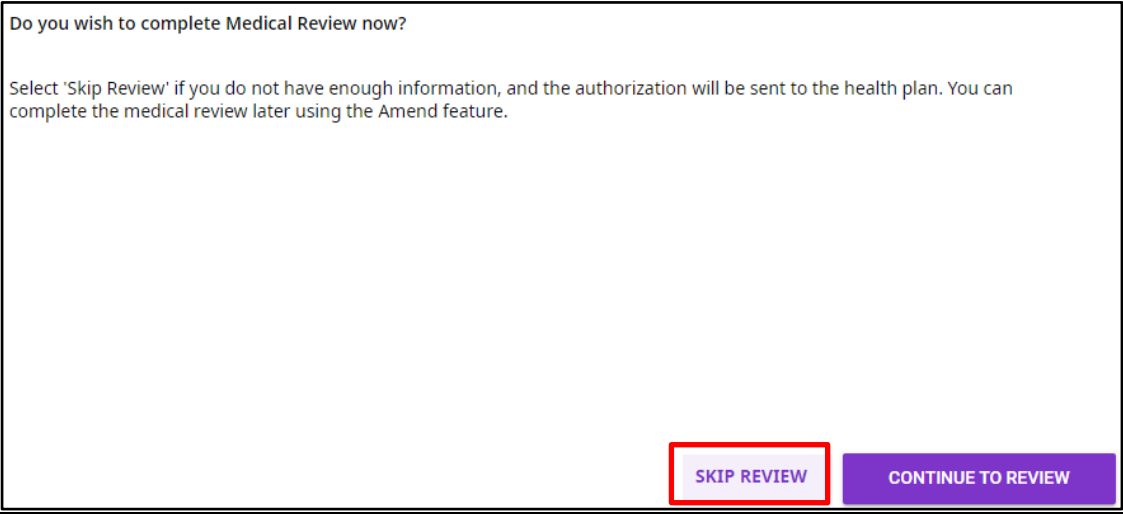
Creating a New Authorization – Inpatient Emergent Admission Notification (cont'd)

| Step | Action |
|------|---|
| 6. | <p>Notes</p> <p>Notes</p> <p>Add pertinent notes. There is a 264 character limit. Once the max character limit is reached, the box will turn red and the user will be unable to add additional characters.</p> <div data-bbox="537 407 1533 583"> <p>Notes</p> <p>Enter Clinical Notes ...</p> <p>264 characters left</p> </div> <p>Contact Information</p> <p>Enter your contact information. First name, last name and phone number are required fields. Fax number and email address are optional fields. The Declaration check box is mandatory and must be checked to submit the request. Select Submit when the request is complete.</p> <p>Note: Check Save as default Contact Information for Medical Authorizations to save time in the future.</p> <div data-bbox="537 846 1533 1255"> <p>▼ Contact Information</p> <p>First Name <input type="text"/></p> <p>Last Name <input type="text"/></p> <p>Email Address <input type="text"/></p> <p>Optional</p> <p>Phone Number <input type="text"/></p> <p>Fax Number <input type="text"/></p> <p>Optional</p> <p><input type="checkbox"/> Save as default Contact Information for Medical Authorizations</p> <p>DECLARATION</p> <p><input type="checkbox"/> By checking this box, I agree to notify the member of any services that are approved.</p> <p>Cancel <input type="button" value="« Previous"/> <input type="button" value="Submit"/></p> </div> |

Creating a New Authorization – Inpatient Emergent Admission Notification (cont'd)

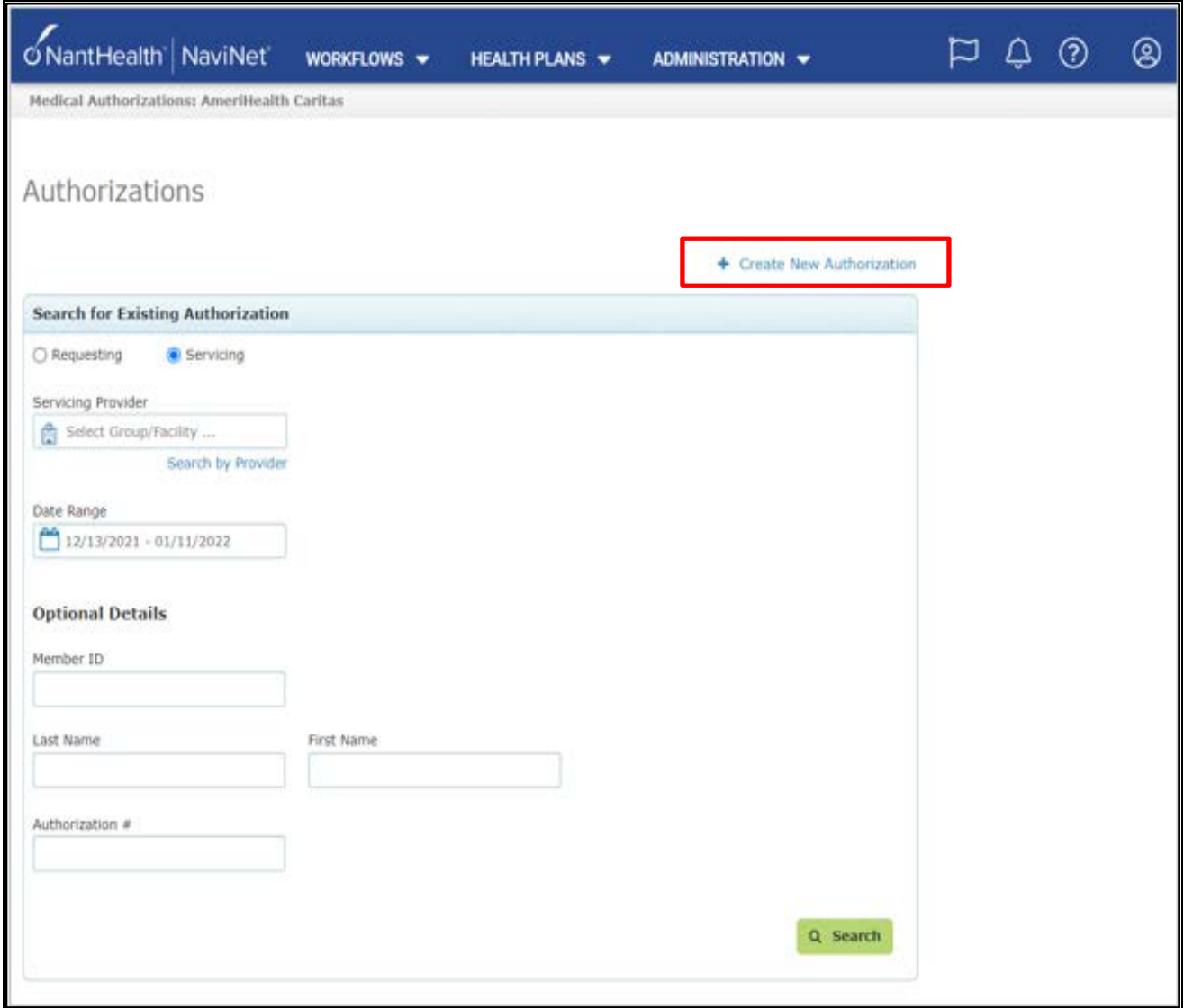


Note: If you are a Non-Clinical user, please follow the steps below in order to bypass the InterQual Review.


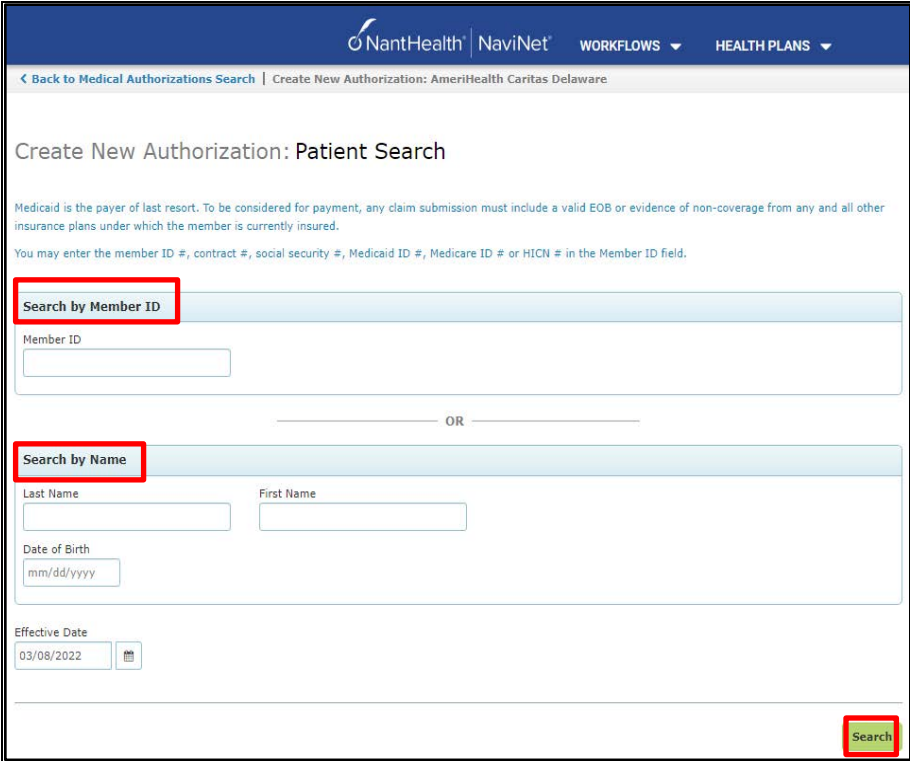
| Step | Action |
|------|--|
| 7. | <p>The message below will populate indicating the InterQual page is loading.</p>  |
| 8. | <p>The system will offer non-clinical users the option to by-pass InterQual Medical Review. In order to bypass, select “Skip Review.”</p>  <p>Once “Skip Review” is selected the user will be routed back to the authorization page notifying them of the status.</p> |

Creating a New Authorization – Inpatient Delivery Notification

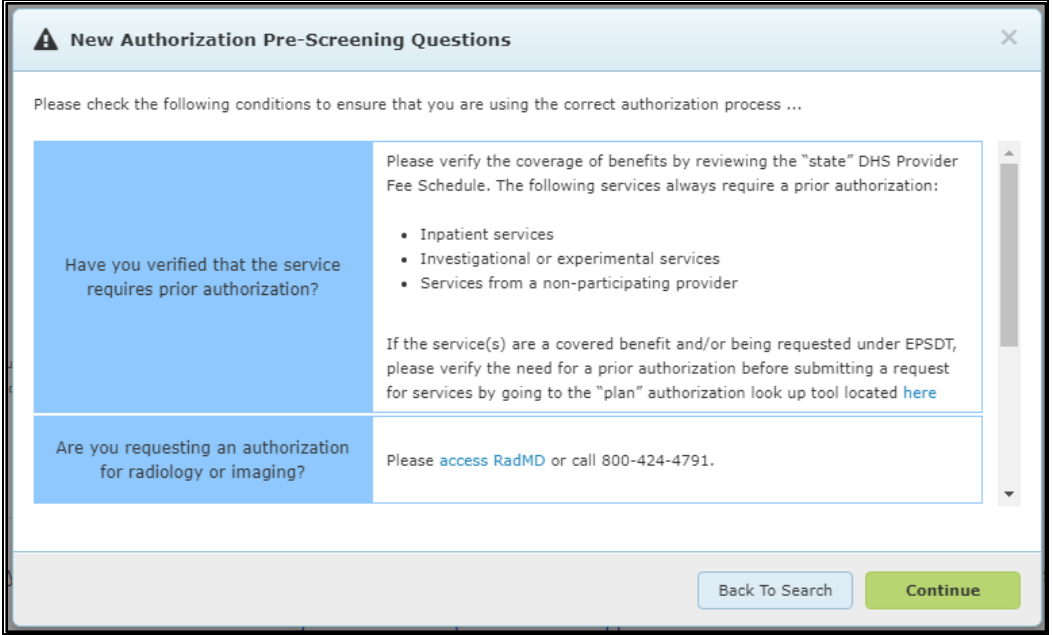
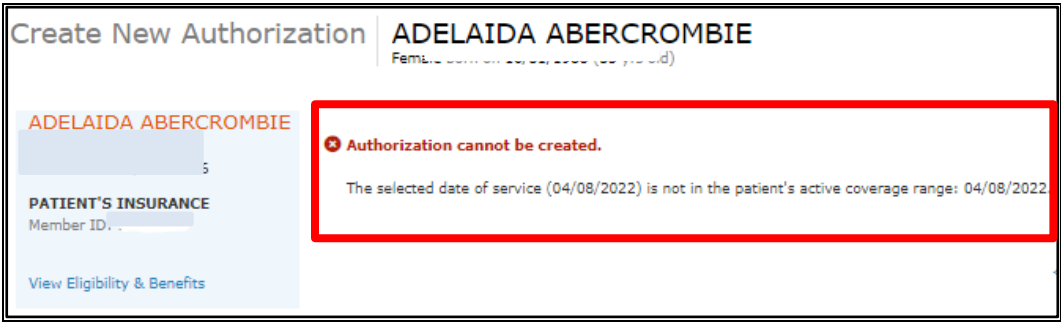
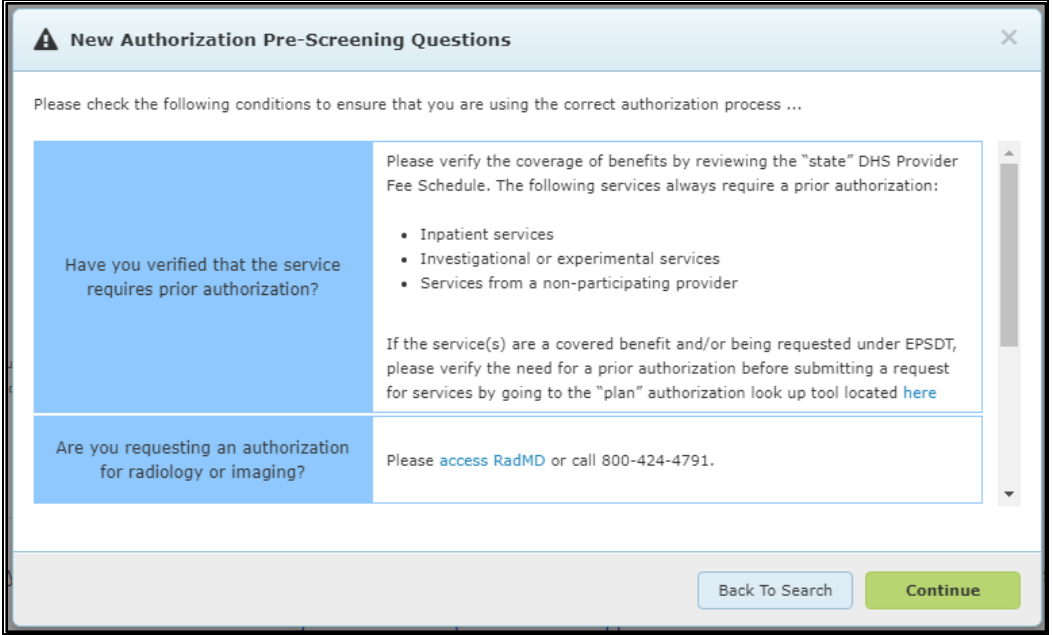
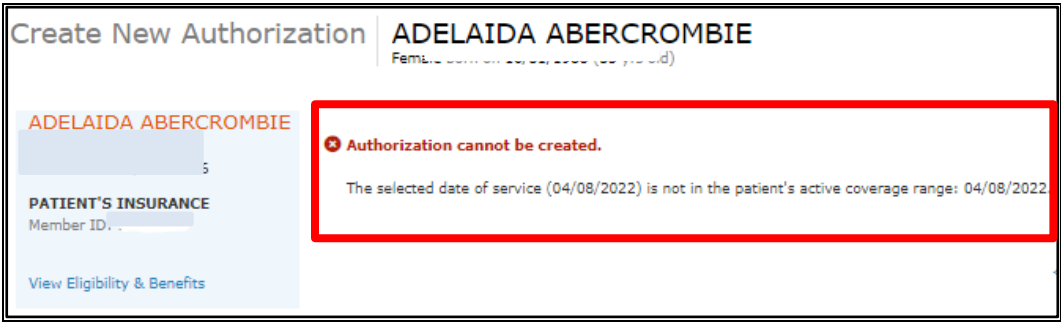
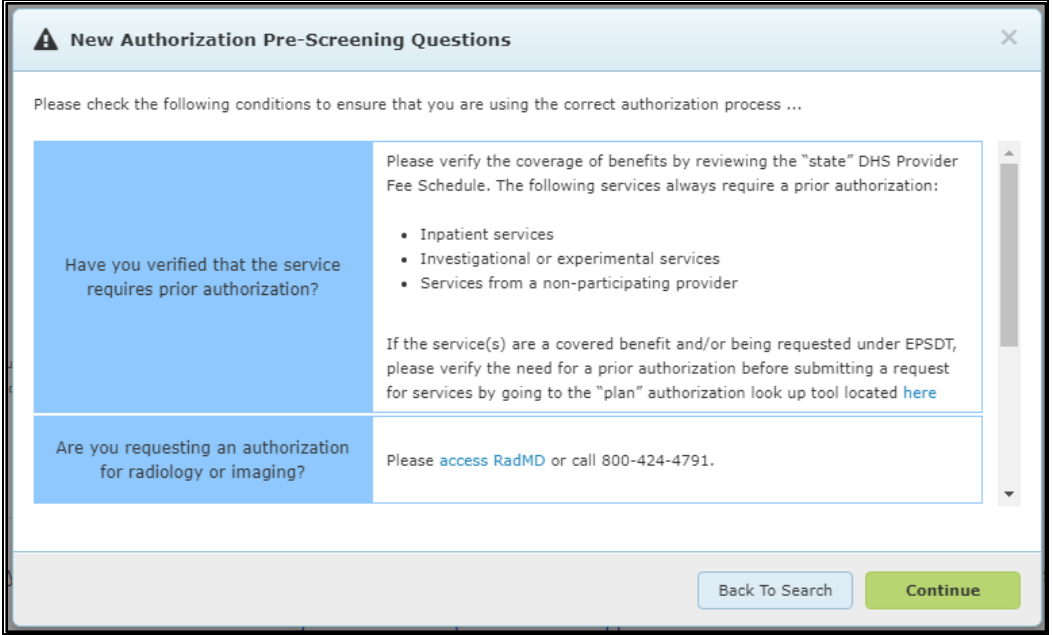
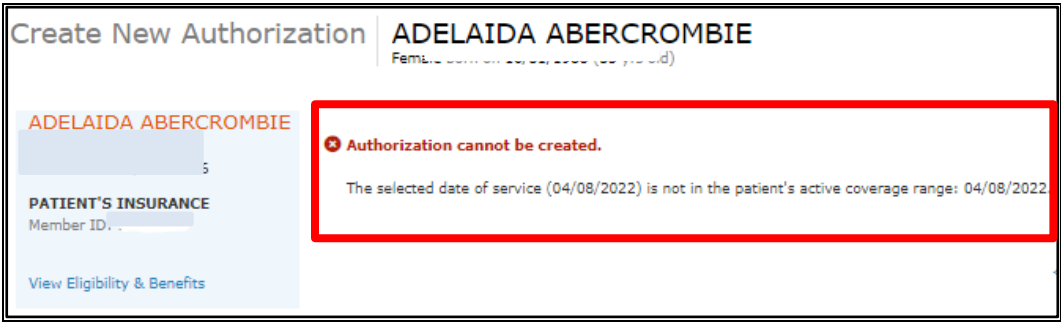
To create an Inpatient Delivery Notification:

| Step | Action |
|------|---|
| 1. | <p>Launch Medical Authorizations under Workflows for this Plan.</p> <div data-bbox="212 306 553 590"><p>Workflows for this Plan</p><ul style="list-style-type: none">Medical AuthorizationsMedical Authorizations LogEligibility and Benefits InquiryClaim Status InquiryReport InquiryClaim SubmissionProvider Directory</div> |
| 2. | <p>Click Create New Authorization</p> <div data-bbox="204 653 1511 1766"></div> |

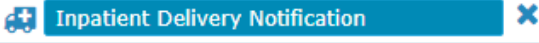
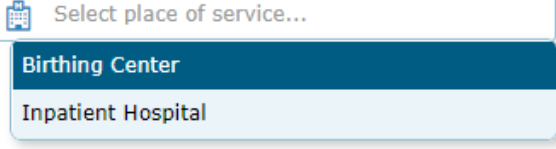
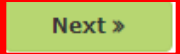

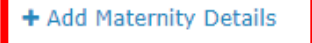
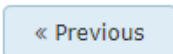
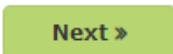
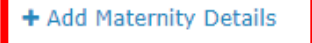
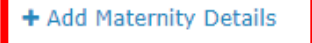
Creating a New Authorization – Inpatient Delivery Notification (cont'd)

| Step | Action |
|------|--|
| 3. | <p>Enter patient search criteria information then Search. The patient search screen allows the user to search by Member ID or Search by Name. If searching by name, the member's first name, last name, and date of birth (DOB) are required.</p> <div data-bbox="220 359 1552 501" style="border: 1px solid black; padding: 5px;">  <p>If there are multiple matches based on criteria entered, the user will get a search results screen. On the search results screen, the user selects the appropriate member from the list returned. If there is an exact match, the user is taken to the pre-screening questions.</p> </div> <div data-bbox="217 512 1122 1268" style="border: 1px solid black; padding: 10px; margin-top: 10px;">  </div> <p>Note: If you enter an incorrect/invalid member ID you will receive the following:</p> <div data-bbox="217 1377 1154 1570" style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p>Create New Authorization: Patient Search</p> <div style="border: 2px solid red; padding: 5px; margin-top: 10px;"> ✘ Subscriber / Insured Not Found. Please Correct and Resubmit. </div> </div> |

Creating a New Authorization – Inpatient Delivery Notification(cont'd)

| Step | Action | | | | | | |
|---------------------------------------|--|-------|---------|---------------------------------------|---|---------------------------------|--|
| <p>4.</p> | <p>Address the pre-screening questions pop up box and Continue.</p> <p>Note: If a member is not active with the health plan, you will not be advanced to the pre-screening questions.</p> <table border="1" data-bbox="207 367 1555 1270"> <thead> <tr> <th data-bbox="207 367 397 415">If...</th> <th data-bbox="397 367 1555 415">Then...</th> </tr> </thead> <tbody> <tr> <td data-bbox="207 415 397 1270"> <p>The member has active coverage</p> </td> <td data-bbox="397 415 1555 1270"> <p>The provider will be advanced to the New Authorization Pre-Screening Questions</p> <div data-bbox="406 472 1453 1102">  </div> <p>The purpose of the New Authorization Pre-Screening Questions is to ensure that the user is following the correct authorization process. It is important to scroll through the questions to ensure that there is not a more appropriate avenue for your specific request. These questions are specific based on the health plan.</p> </td> </tr> <tr> <td data-bbox="207 1270 397 1690"> <p>The member is ineligible</p> </td> <td data-bbox="397 1270 1555 1690"> <p>The provider will receive the authorization cannot be created message.</p> <div data-bbox="406 1323 1461 1648">  </div> </td> </tr> </tbody> </table> | If... | Then... | <p>The member has active coverage</p> | <p>The provider will be advanced to the New Authorization Pre-Screening Questions</p> <div data-bbox="406 472 1453 1102">  </div> <p>The purpose of the New Authorization Pre-Screening Questions is to ensure that the user is following the correct authorization process. It is important to scroll through the questions to ensure that there is not a more appropriate avenue for your specific request. These questions are specific based on the health plan.</p> | <p>The member is ineligible</p> | <p>The provider will receive the authorization cannot be created message.</p> <div data-bbox="406 1323 1461 1648">  </div> |
| If... | Then... | | | | | | |
| <p>The member has active coverage</p> | <p>The provider will be advanced to the New Authorization Pre-Screening Questions</p> <div data-bbox="406 472 1453 1102">  </div> <p>The purpose of the New Authorization Pre-Screening Questions is to ensure that the user is following the correct authorization process. It is important to scroll through the questions to ensure that there is not a more appropriate avenue for your specific request. These questions are specific based on the health plan.</p> | | | | | | |
| <p>The member is ineligible</p> | <p>The provider will receive the authorization cannot be created message.</p> <div data-bbox="406 1323 1461 1648">  </div> | | | | | | |








Creating a New Authorization – Inpatient Delivery Notification(cont'd)

| Step | Action | | | | | | | | |
|---|---|---------------|-----------------|---------------|-----------------|---|--|--|--|
| 5. | <p>Complete information in the required fields following the guidelines outlined below for an Inpatient Delivery Notification:</p> <p>Select Inpatient Delivery Notification for the Service Type Select the applicable Place of Service Birthing Center or Inpatient Hospital Select Next</p> <div data-bbox="175 478 1536 909"><p>Service Type</p><p></p><p>Warning: Service line date ranges cannot overlap with the date range from another service line.</p><p>Place of Service</p><p></p><p>Cancel </p></div> | | | | | | | | |
| 6. | <p>Click + Add Maternity Details to populate the Add Maternity Details pop out box. The fields in this box are mandatory.</p> <div data-bbox="175 1066 1580 1396"><p>Service Type: Inpatient Delivery Notification </p><p>Place of Service: Inpatient Hospital</p><table border="1"><thead><tr><th data-bbox="186 1207 673 1239">Name</th><th data-bbox="673 1207 836 1239">Gender</th><th data-bbox="836 1207 1031 1239">Date of Birth</th><th data-bbox="1031 1207 1567 1239">Delivery Period</th></tr></thead><tbody><tr><td colspan="4" data-bbox="186 1260 1567 1323"></td></tr></tbody></table><p>Cancel  </p></div> | Name | Gender | Date of Birth | Delivery Period |  | | | |
| Name | Gender | Date of Birth | Delivery Period | | | | | | |
|  | | | | | | | | | |

Creating a New Authorization – Inpatient Delivery Notification(cont'd)

| Step | Action |
|------|---|
| 6. | <div data-bbox="185 279 1523 1575"><h3 data-bbox="220 296 542 327">Add Maternity Details ✕</h3><p data-bbox="220 380 1230 422">Baby's Last Name: <input data-bbox="695 363 1230 422" type="text"/></p><p data-bbox="220 464 1230 506">Baby's First Name: <input data-bbox="695 447 1230 506" type="text"/></p><p data-bbox="220 548 1003 590">Gender: <input data-bbox="695 531 1003 590" type="text" value="Select"/></p><p data-bbox="220 632 1003 674">Date Of Birth: <input data-bbox="695 615 1003 674" type="text" value="MM/DD/YYYY"/></p><p data-bbox="220 716 1003 758">Weight in Grams: <input data-bbox="695 699 1003 758" type="text"/></p><p data-bbox="220 800 1003 842">1 Minute Apgar: <input data-bbox="695 783 1003 842" type="text" value="Select"/></p><p data-bbox="220 884 1003 926">5 Minute Apgar: <input data-bbox="695 867 1003 926" type="text" value="Select"/></p><p data-bbox="220 947 347 978">Delivery</p><p data-bbox="220 1010 1003 1052">Delivery Outcome: <input data-bbox="695 993 1003 1052" type="text" value="Select"/></p><p data-bbox="220 1094 1230 1136">Delivery Method: <input data-bbox="695 1077 1230 1136" type="text" value="Select"/></p><p data-bbox="220 1178 1230 1220">Delivery Period: <input data-bbox="695 1161 1230 1220" type="text" value="Select"/></p><p data-bbox="220 1262 1230 1304">Estimated Gestational Age : <input data-bbox="695 1245 846 1304" type="text" value="Select"/> weeks <input data-bbox="1008 1245 1159 1304" type="text" value="0"/> days</p><p data-bbox="220 1346 1003 1388">Estimated Confinement Date: <input data-bbox="695 1329 1003 1388" type="text" value="MM/DD/YYYY"/></p><p data-bbox="220 1430 1003 1472">Nursery type: <input data-bbox="695 1413 1003 1472" type="text" value="Select"/></p><p data-bbox="1268 1514 1511 1556"><a data-bbox="1268 1514 1349 1556" href="#">Cancel <input data-bbox="1403 1507 1511 1566" type="button" value="Save"/></p></div> |







Creating a New Authorization – Inpatient Delivery Notification(cont'd)

| Step | Action | |
|------|--------------------------|--|
| 6. | Baby's Last Name | Free text field. Enter the baby's last name.  |
| | Baby's First Name | Free text field. Enter the baby's first name.  |
| | Gender | Drop down field. The options are Male, Female, Unknown  |
| | Date Of Birth | Select a date from the calendar  |
| | Weight in Grams | Free text field. Enter the weight in grams  |
| | 1 Minute Apgar | Drop down field - select 1-10. Click on the question mark for additional clarification.   <div data-bbox="521 1213 1442 1457" style="border: 1px solid gray; padding: 5px;"> <p>1 Minute Apgar: ? The Apgar score measures five things to check a baby's health. Each is scored on a scale of 0 to 2, with 2 being the best score.</p> <ol style="list-style-type: none"> 1. Appearance (skin color) 2. Pulse (heart rate) 3. Grimace response (reflexes) 4. Activity (muscle tone) 5. Respiration (breathing rate and effort) </div> |

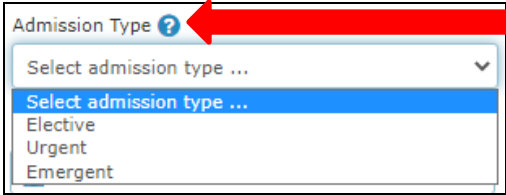
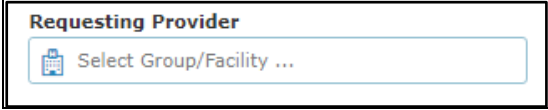

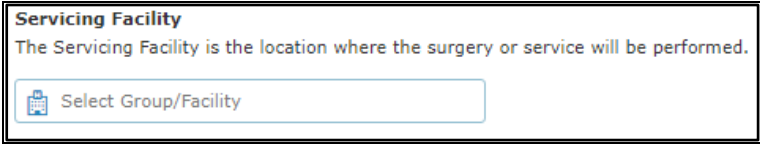
Creating a New Authorization – Inpatient Delivery Notification(cont'd)

| Step | Action | | | | | | | | | | | | | | | | |
|---|---|-----------------------|---|-------------------------|---|------------------------|--|------------------------|--|--|---|-----------------------------------|--|---|--|--|--|
| 6. | <table border="1"> <tr> <td>5 Minute Apgar</td> <td>Drop down field - select 1-10. 5 Minute Apgar: <input type="text" value="Select"/></td> </tr> <tr> <td>Delivery Outcome</td> <td>Drop down field – select live birth or non live birth. Delivery Outcome: <input type="text" value="Select"/></td> </tr> <tr> <td>Delivery Method</td> <td>Drop down field – select c-section or normal vaginal delivery. Delivery Method: <input type="text" value="Select"/></td> </tr> <tr> <td>Delivery Period</td> <td>Drop down field – select day of admission, day after admission, or 2 or more days after admission. Delivery Period: <input type="text" value="Select"/></td> </tr> <tr> <td>Estimated Gestational Age</td> <td>Select the appropriate values from the drop down fields. Estimated Gestational Age : <input type="text" value="Select"/> weeks <input type="text" value="0"/> days</td> </tr> <tr> <td>Estimated Confinement Date</td> <td>Type the date of use the calendar to select the appropriate date. Estimated Confinement Date: MM/DD/YYYY</td> </tr> <tr> <td>Nursery type</td> <td>Drop down field – select well baby or NICU. Nursery type: <input type="text" value="Select"/></td> </tr> </table> | 5 Minute Apgar | Drop down field - select 1-10. 5 Minute Apgar: <input type="text" value="Select"/> | Delivery Outcome | Drop down field – select live birth or non live birth. Delivery Outcome: <input type="text" value="Select"/> | Delivery Method | Drop down field – select c-section or normal vaginal delivery. Delivery Method: <input type="text" value="Select"/> | Delivery Period | Drop down field – select day of admission, day after admission, or 2 or more days after admission. Delivery Period: <input type="text" value="Select"/> | Estimated Gestational Age | Select the appropriate values from the drop down fields. Estimated Gestational Age : <input type="text" value="Select"/> weeks <input type="text" value="0"/> days | Estimated Confinement Date | Type the date of use the calendar to select the appropriate date. Estimated Confinement Date: MM/DD/YYYY | Nursery type | Drop down field – select well baby or NICU. Nursery type: <input type="text" value="Select"/> | | |
| 5 Minute Apgar | Drop down field - select 1-10. 5 Minute Apgar: <input type="text" value="Select"/> | | | | | | | | | | | | | | | | |
| Delivery Outcome | Drop down field – select live birth or non live birth. Delivery Outcome: <input type="text" value="Select"/> | | | | | | | | | | | | | | | | |
| Delivery Method | Drop down field – select c-section or normal vaginal delivery. Delivery Method: <input type="text" value="Select"/> | | | | | | | | | | | | | | | | |
| Delivery Period | Drop down field – select day of admission, day after admission, or 2 or more days after admission. Delivery Period: <input type="text" value="Select"/> | | | | | | | | | | | | | | | | |
| Estimated Gestational Age | Select the appropriate values from the drop down fields. Estimated Gestational Age : <input type="text" value="Select"/> weeks <input type="text" value="0"/> days | | | | | | | | | | | | | | | | |
| Estimated Confinement Date | Type the date of use the calendar to select the appropriate date. Estimated Confinement Date: MM/DD/YYYY | | | | | | | | | | | | | | | | |
| Nursery type | Drop down field – select well baby or NICU. Nursery type: <input type="text" value="Select"/> | | | | | | | | | | | | | | | | |
| 7. | <p>Select Save when the Add Maternity Details are complete. If this is a multiple gestation pregnancy and additional births should be reported, select + Add Maternity Details to complete the details then select Next.</p> <table border="1"> <thead> <tr> <th>Name</th> <th>Gender</th> <th>Date of Birth</th> <th>Delivery Period</th> </tr> </thead> <tbody> <tr> <td>JESSICA BODLEY</td> <td>Female</td> <td>09/29/2022</td> <td>Day of admission</td> </tr> <tr> <td colspan="4"> <input type="button" value="+ Add Maternity Details"/> </td> </tr> <tr> <td colspan="4" style="text-align: right;"> <input type="button" value="Cancel"/> <input type="button" value="« Previous"/> <input type="button" value="Next »"/> </td> </tr> </tbody> </table> | Name | Gender | Date of Birth | Delivery Period | JESSICA BODLEY | Female | 09/29/2022 | Day of admission | <input type="button" value="+ Add Maternity Details"/> | | | | <input type="button" value="Cancel"/> <input type="button" value="« Previous"/> <input type="button" value="Next »"/> | | | |
| Name | Gender | Date of Birth | Delivery Period | | | | | | | | | | | | | | |
| JESSICA BODLEY | Female | 09/29/2022 | Day of admission | | | | | | | | | | | | | | |
| <input type="button" value="+ Add Maternity Details"/> | | | | | | | | | | | | | | | | | |
| <input type="button" value="Cancel"/> <input type="button" value="« Previous"/> <input type="button" value="Next »"/> | | | | | | | | | | | | | | | | | |

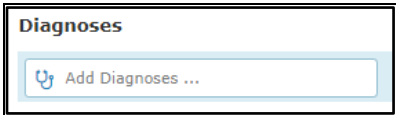
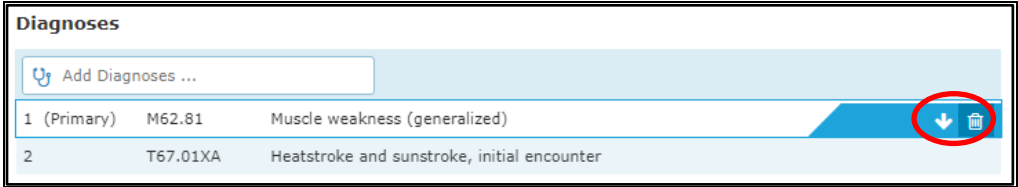
Creating a New Authorization – Inpatient Delivery Notification

| Step | Action | | |
|---|---|---|---|
| 8. | <p data-bbox="217 212 516 289">Date of Admission/ Date of Discharge</p> <p data-bbox="537 212 1547 363">Date of admission is a mandatory field. Date of discharge is optional because it may not be known at the time the request is initiated. Providers have the ability to add the date of discharge by amending an authorization (see Amending an Authorization chapter).</p> <div data-bbox="537 373 1101 489" style="border: 1px solid black; padding: 5px;"><table data-bbox="537 373 1101 489"><tr><td data-bbox="537 380 787 472">Date Of Admission  03/09/2022</td><td data-bbox="792 380 1101 472">Date of Discharge  Optional</td></tr></table></div> <p data-bbox="537 506 1547 577">Note: the user will receive the message below if the dates of service overlap in the same case.</p> <div data-bbox="537 590 1507 678" style="border: 2px solid red; padding: 5px;"><ul data-bbox="597 625 1463 657" style="list-style-type: none"><li data-bbox="597 625 1463 657">• Invalid / Missing Date(s) of Service - Please Correct and Resubmit</div> | Date Of Admission  03/09/2022 | Date of Discharge  Optional |
| Date Of Admission  03/09/2022 | Date of Discharge  Optional | | |

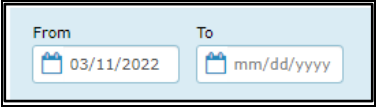
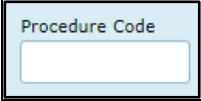

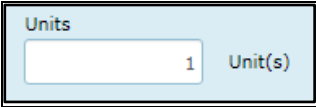
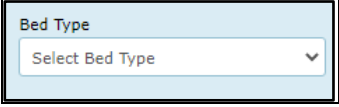
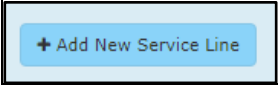
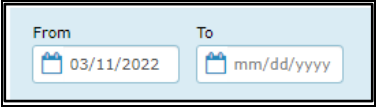
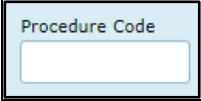

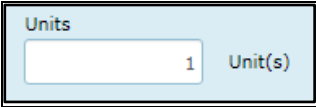
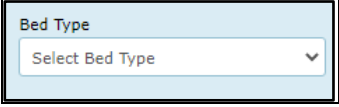
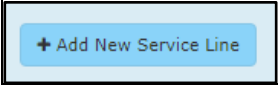
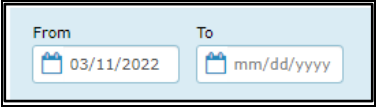
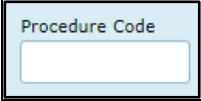

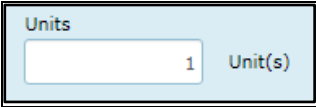
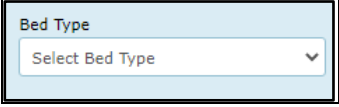
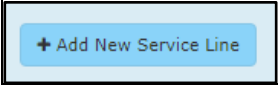
Creating a New Authorization – Inpatient Delivery Notification

| Step | Action | | | | | | | | |
|-----------------|--|----|------|-----------------|--|---------------|--|-----------------|---|
| 9. | <p data-bbox="217 212 516 247">Admission Type</p> <p data-bbox="537 212 1528 285">Choose the appropriate selection from the drop-down list – Elective, Urgent, or Emergent</p> <div data-bbox="537 296 1040 489">  <p>Admission Type ?</p> <p>Select admission type ...</p> <p>Select admission type ...</p> <p>Elective</p> <p>Urgent</p> <p>Emergent</p> </div> <div data-bbox="1143 285 1528 489" style="border: 1px solid black; padding: 5px;"> <p>The question mark beside admission type provides information regarding the types of admissions.</p> </div> <table border="1" data-bbox="537 495 1528 751"> <thead> <tr> <th data-bbox="537 495 711 531">If</th> <th data-bbox="716 495 1528 531">Then</th> </tr> </thead> <tbody> <tr> <td data-bbox="537 537 711 600">Elective</td> <td data-bbox="716 537 1528 600">Potential admission for illness/injury enrollee not currently admitted</td> </tr> <tr> <td data-bbox="537 606 711 701">Urgent</td> <td data-bbox="716 606 1528 701">Potential admission for illness/injury that can be treated in a 24 hour period and if left untreated could rapidly become a crisis or emergency, enrollee not currently admitted</td> </tr> <tr> <td data-bbox="537 707 711 751">Emergent</td> <td data-bbox="716 707 1528 751">Concurrent review, enrollee is currently admitted</td> </tr> </tbody> </table> | If | Then | Elective | Potential admission for illness/injury enrollee not currently admitted | Urgent | Potential admission for illness/injury that can be treated in a 24 hour period and if left untreated could rapidly become a crisis or emergency, enrollee not currently admitted | Emergent | Concurrent review, enrollee is currently admitted |
| If | Then | | | | | | | | |
| Elective | Potential admission for illness/injury enrollee not currently admitted | | | | | | | | |
| Urgent | Potential admission for illness/injury that can be treated in a 24 hour period and if left untreated could rapidly become a crisis or emergency, enrollee not currently admitted | | | | | | | | |
| Emergent | Concurrent review, enrollee is currently admitted | | | | | | | | |
| | <p data-bbox="217 816 516 852">Requesting Provider</p> <p data-bbox="537 816 1438 890">Choose the appropriate selection from the drop-down list. Requesting provider is the provider that is requesting the service.</p> <div data-bbox="537 896 1081 1005">  <p>Requesting Provider</p> <p>Select Group/Facility ...</p> </div> | | | | | | | | |
| | <p data-bbox="217 1054 516 1089">Servicing Provider</p> <p data-bbox="537 1054 1528 1127">Choose the appropriate selection from the drop-down list. Servicing provider is the provider completing the service (also known as the attending provider).</p> <div data-bbox="537 1134 1081 1243">  <p>Servicing Provider</p> <p>Select Provider ...</p> </div> | | | | | | | | |
| | <p data-bbox="217 1268 516 1304">Servicing Facility</p> <p data-bbox="537 1268 1463 1299">The servicing facility is the location where the service will be performed.</p> <div data-bbox="537 1306 1292 1451">  <p>Servicing Facility</p> <p>The Servicing Facility is the location where the surgery or service will be performed.</p> <p>Select Group/Facility</p> </div> | | | | | | | | |


Creating a New Authorization – Inpatient Delivery Notification(cont'd)

| Step | Action | | | | | | | | | | | | |
|-------------------|--|---|--|--|-------------------|--|--|-------------|--------|-------------------------------|---|----------|---|
| 9. | <p>Diagnoses</p> <p>Diagnoses</p> <p>Look up field (max number of diagnosis codes that can be attached is 12).</p> <div data-bbox="537 323 930 436">  </div> <p>Note: The user can change the primary diagnosis if more than 1 diagnosis exists and there is also the ability to delete a diagnosis that may have been entered in error. The user can hover over the row to reorder (arrow) and or delete (trashcan) the diagnosis.</p> <div data-bbox="537 615 1549 800">  <table border="1"> <thead> <tr> <th colspan="3">Diagnoses</th> </tr> <tr> <th colspan="3">Add Diagnoses ...</th> </tr> </thead> <tbody> <tr> <td>1 (Primary)</td> <td>M62.81</td> <td>Muscle weakness (generalized)</td> </tr> <tr> <td>2</td> <td>T67.01XA</td> <td>Heatstroke and sunstroke, initial encounter</td> </tr> </tbody> </table> </div> | Diagnoses | | | Add Diagnoses ... | | | 1 (Primary) | M62.81 | Muscle weakness (generalized) | 2 | T67.01XA | Heatstroke and sunstroke, initial encounter |
| Diagnoses | | | | | | | | | | | | | |
| Add Diagnoses ... | | | | | | | | | | | | | |
| 1 (Primary) | M62.81 | Muscle weakness (generalized) | | | | | | | | | | | |
| 2 | T67.01XA | Heatstroke and sunstroke, initial encounter | | | | | | | | | | | |


Creating a New Authorization – Inpatient Delivery Notification(cont'd)

| Step | Action | | | | | | | | | | | | |
|-------------------------------|--|------------------|---|-----------------------|--|------------------|---|--------------|--|-----------------|--|-------------------------------|---|
| 9. | <p>Services</p> <table border="1"> <tr> <td data-bbox="207 268 527 514">From / To</td> <td data-bbox="527 268 1469 514"> <p>From (start date) / To (end date). The From and To dates are mandatory fields. If you don't know the To date you can advance it by 1 day from the From date.</p>  </td> </tr> <tr> <td data-bbox="207 514 527 871">Procedure Code</td> <td data-bbox="527 514 1469 871"> <p>Free text field. If an incorrect procedure code is entered the request may not be processed. The procedure code field is free text and not a lookup field. The user will not be notified if an incorrect code is entered so it is very important for the user to enter the correct code. If this is an inpatient only request and there is no procedure code do not place anything in the procedure code field.</p>  </td> </tr> <tr> <td data-bbox="207 871 527 1018">Modifiers</td> <td data-bbox="527 871 1469 1018"> <p>This is a free text field and is not a mandatory field.</p>  </td> </tr> <tr> <td data-bbox="207 1018 527 1228">Units</td> <td data-bbox="527 1018 1469 1228"> <p>Free text numeric value. For the inpatient request, units are equivalent to days.</p>  </td> </tr> <tr> <td data-bbox="207 1228 527 1438">Bed Type</td> <td data-bbox="527 1228 1469 1438"> <p>Select the appropriate bed type from the drop down list. This is a mandatory field.</p>  </td> </tr> <tr> <td data-bbox="207 1438 527 1688">+ Add New Service Line</td> <td data-bbox="527 1438 1469 1688"> <p>The user must add new service line for the system to recognize the request. The Add New Service Line will also be utilized when adding additional service requests.</p>  </td> </tr> </table> | From / To | <p>From (start date) / To (end date). The From and To dates are mandatory fields. If you don't know the To date you can advance it by 1 day from the From date.</p>  | Procedure Code | <p>Free text field. If an incorrect procedure code is entered the request may not be processed. The procedure code field is free text and not a lookup field. The user will not be notified if an incorrect code is entered so it is very important for the user to enter the correct code. If this is an inpatient only request and there is no procedure code do not place anything in the procedure code field.</p>  | Modifiers | <p>This is a free text field and is not a mandatory field.</p>  | Units | <p>Free text numeric value. For the inpatient request, units are equivalent to days.</p>  | Bed Type | <p>Select the appropriate bed type from the drop down list. This is a mandatory field.</p>  | + Add New Service Line | <p>The user must add new service line for the system to recognize the request. The Add New Service Line will also be utilized when adding additional service requests.</p>  |
| From / To | <p>From (start date) / To (end date). The From and To dates are mandatory fields. If you don't know the To date you can advance it by 1 day from the From date.</p>  | | | | | | | | | | | | |
| Procedure Code | <p>Free text field. If an incorrect procedure code is entered the request may not be processed. The procedure code field is free text and not a lookup field. The user will not be notified if an incorrect code is entered so it is very important for the user to enter the correct code. If this is an inpatient only request and there is no procedure code do not place anything in the procedure code field.</p>  | | | | | | | | | | | | |
| Modifiers | <p>This is a free text field and is not a mandatory field.</p>  | | | | | | | | | | | | |
| Units | <p>Free text numeric value. For the inpatient request, units are equivalent to days.</p>  | | | | | | | | | | | | |
| Bed Type | <p>Select the appropriate bed type from the drop down list. This is a mandatory field.</p>  | | | | | | | | | | | | |
| + Add New Service Line | <p>The user must add new service line for the system to recognize the request. The Add New Service Line will also be utilized when adding additional service requests.</p>  | | | | | | | | | | | | |

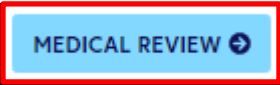
Creating a New Authorization – Inpatient Delivery Notification(cont'd)

| Step | Action |
|------|---|
| 9. | <p data-bbox="201 239 386 268">Attachments</p> <p data-bbox="217 281 431 310">Add Document</p> <p data-bbox="532 281 1511 428">Attach supporting clinical documentation (supported document types: pdf, docx, xml, csv, png, gif). The user may attach up to 10 documents. If the user attaches a document, the document type is mandatory. The user also has the ability to delete any document attached in error.</p> <div data-bbox="537 443 1484 674"> <p data-bbox="558 457 678 478">Attachments</p> <p data-bbox="558 499 711 533">+ Add Document</p> <p data-bbox="829 617 1195 646">Drop Documents here to Attach</p> </div> <div data-bbox="537 695 1484 1125"> <p data-bbox="558 701 678 722">Attachments</p> <p data-bbox="558 743 711 777">+ Add Document</p> <p data-bbox="558 806 813 835">  Document 1- for upload.docx </p> <p data-bbox="987 814 1256 844">Select document type ...</p> <ul data-bbox="987 844 1276 1117" style="list-style-type: none"> Select document type ... Progress Report Medical Record Attachment Patient Medical History Document Physical Therapy Notes Continued treatment Nursing Notes Physicians Report Physician Order Justification for Admission Durable Medical Equipment Prescription Orders and Treatment Document Initial Assessment Consent Discharge Summary <p data-bbox="1300 814 1456 848">Delete</p> </div> |

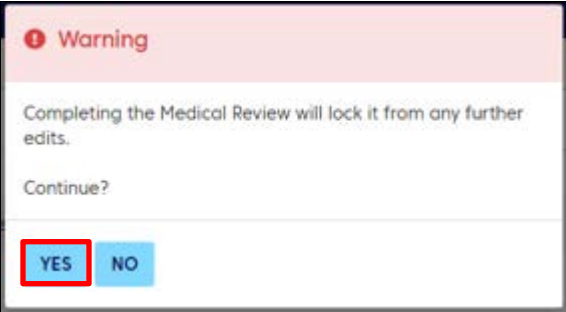
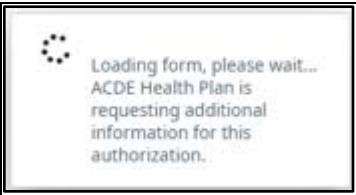
Creating a New Authorization – Inpatient Delivery Notification(cont'd)

| Step | Action |
|------|--|
| 9. | <p>Notes</p> <p>Notes</p> <p>Add pertinent notes. There is a 264 character limit. Once the max character limit is reached, the box will turn red and the user will be unable to add additional characters.</p> <div data-bbox="537 407 1533 583" style="border: 1px solid black; padding: 5px;"> <p>Notes</p> <p>Enter Clinical Notes ...</p> <p style="text-align: right;">264 characters left</p> </div> <p>Contact Information</p> <p>Enter your contact information. First name, last name and phone number are required fields. Fax number and email address are optional fields. The Declaration check box is mandatory and must be checked to submit the request. Select Submit when the request is complete.</p> <p>Note: Check Save as default Contact Information for Medical Authorizations to save time in the future.</p> <div data-bbox="537 846 1533 1260" style="border: 1px solid black; padding: 5px;"> <p>▼ Contact Information</p> <p>First Name <input type="text"/></p> <p>Last Name <input type="text"/></p> <p>Email Address <input type="text"/></p> <p>Optional</p> <p>Phone Number <input type="text"/></p> <p>Fax Number <input type="text"/></p> <p>Optional</p> <p><input type="checkbox"/> Save as default Contact Information for Medical Authorizations</p> <p>DECLARATION</p> <p><input type="checkbox"/> By checking this box, I agree to notify the member of any services that are approved.</p> <p style="text-align: right;"> <input type="button" value="Cancel"/> <input type="button" value="« Previous"/> <input type="button" value="Submit"/> </p> </div> |
| 9. | <p>After completion of the previous steps, when the user selects Submit InterQual criteria may or may not launch. InterQual criteria is launched based on the diagnosis code and or the service code and whether or not there is criteria to launch for the diagnosis code and or service code that is identified in the episode. If InterQual criteria is not launched after the user submits the request, the user may receive a status of pending or an automatic approval.</p> |
| 10. | <p>If Interqual is launched, the message below will populate indicating the InterQual page is loading.</p> <div data-bbox="204 1560 634 1814" style="border: 1px solid black; padding: 10px; text-align: center;">  <p>Loading form, please wait... ACDE Health Plan is requesting additional information for this authorization.</p> </div> |

Creating a New Authorization – Inpatient Delivery Notification(cont'd)

| Step | Action |
|------|--|
| 11. | <p>The system will direct the user to a guideline selection page. Select the most appropriate guideline then click on medical review.</p>  <p>Select the day on which you wish to complete the medical review then select the pertinent findings/interventions.</p> |

Creating a New Authorization – Inpatient Delivery Notification (cont'd)

| Step | Action |
|------|---|
| 12. | Address all pertinent findings/interventions based on the day selected for the review. At the end of the review the user will receive criteria met or criteria not met. Regardless of if criteria is met or does not meet, the user should continue. |
| 13. | When the review is complete, the user will need to click Complete at the bottom, then select YES to continue.  A warning dialog box with a red header bar containing a warning icon and the word "Warning". The main text reads: "Completing the Medical Review will lock it from any further edits." Below this is the question "Continue?". At the bottom are two buttons: "YES" (highlighted with a red box) and "NO". |
| 14. | The user will get the following notice which indicates that they are being sent back to NaviNet from InterQual.  A loading notice box with a circular loading icon on the left. The text reads: "Loading form, please wait... ACDE Health Plan is requesting additional information for this authorization." |

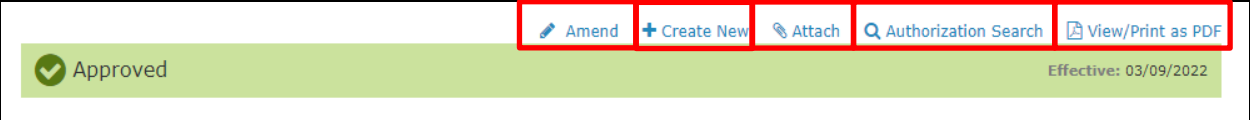

Creating a New Authorization - Inpatient Delivery Notification (cont'd)

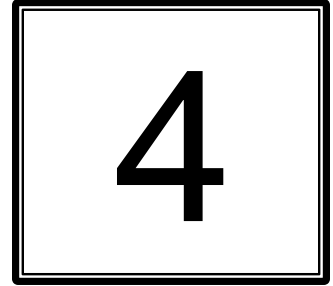
| Step | Action |
|------|--|
| 15. | <p>Once the user arrives back in NaviNet, they will arrive on the authorization details screen.</p> <p>The screenshot displays the 'Authorization Details' page for a patient named FRANKIE MOCHRIE. At the top right is the AmeriHealth Caritas Delaware logo. Below the header, there are navigation links: '+ Create New', 'History', 'Authorization Search', and 'View/Print as PDF'. A status bar indicates 'Pending' with a clock icon and 'Authorization #: 92204002349'. Below this, a message states 'Disposition pending review'. The main content area is divided into three columns: <ul style="list-style-type: none"> Requesting Provider: FRANKIE MOCHRIE (with a blurred name), Ahmed, Mohamed F., 379 Walmart Dr Ste 101, Camden Wyoming, DE 19934--1365, (302) 698-4441. Servicing Provider: Alfred I Dupont Hospital, 1600 Rockland Rd, Wilmington, DE 19803--3607, Date of Admission: 04/13/2022, Admission Type: Emergent, Service Type: Inpatient Medical Care, Place of Service: Inpatient Hospital. Servicing Facility: Alfred I Dupont Hospital, 1600 Rockland Rd, Wilmington, DE 19803--3607. On the left side, there are sections for 'PATIENT'S INSURANCE' (with a blurred number) and 'PRIMARY CARE PHYSICIAN' (HEATHER BITTNER-FAGAN, NPI: [blurred]). A link 'View Eligibility & Benefits' is also visible.</p> |

Authorization Status – Approved and Pending

The user will get an approved or pending status once the request has been submitted to the health plan.

Note: Denials are not processed automatically, pended status submissions will require medical review by the health plan. If a denial is processed by the plan, a telephone call/letter will be made/sent to the provider.


| If... | Then it will look like this... | | | | | | | | | | |
|----------------------|---|------------|---|------------|---------------------------------|----------------------|--------------------------------|----------------------|--|-------------------|--|
| Approved | <div data-bbox="277 380 1520 499" style="border: 1px solid black; padding: 5px;">  </div> <p>Approved and partially approved requests can be amended (see chapter on Amending).</p> <p>The following actions can be taken on an approved request from the authorization status page:</p> <table border="1" data-bbox="277 636 1208 877"> <tr> <td>Amend</td> <td>Extending existing services or requesting another service on the same authorization</td> </tr> <tr> <td>Create New</td> <td>Creating a new request</td> </tr> <tr> <td>Attach</td> <td>Attaching a document</td> </tr> <tr> <td>Authorization Search</td> <td>Searching for an authorization</td> </tr> <tr> <td>View/Print as PDF</td> <td>View and print authorization status request as PDF</td> </tr> </table> | Amend | Extending existing services or requesting another service on the same authorization | Create New | Creating a new request | Attach | Attaching a document | Authorization Search | Searching for an authorization | View/Print as PDF | View and print authorization status request as PDF |
| Amend | Extending existing services or requesting another service on the same authorization | | | | | | | | | | |
| Create New | Creating a new request | | | | | | | | | | |
| Attach | Attaching a document | | | | | | | | | | |
| Authorization Search | Searching for an authorization | | | | | | | | | | |
| View/Print as PDF | View and print authorization status request as PDF | | | | | | | | | | |
| Pending | <div data-bbox="277 982 1520 1102" style="border: 1px solid black; padding: 5px;">  </div> <p>Note: Pended status submissions will require medical review by the health plan. Requests that have a pending status cannot be amended.</p> <p>The following actions can be taken on an approved request from the authorization status page:</p> <table border="1" data-bbox="277 1304 1208 1476"> <tr> <td>Create New</td> <td>Creating a new request</td> </tr> <tr> <td>History</td> <td>Detailed history of the request</td> </tr> <tr> <td>Authorization Search</td> <td>Searching for an authorization</td> </tr> <tr> <td>View/Print as PDF</td> <td>View and print authorization status request as PDF</td> </tr> </table> | Create New | Creating a new request | History | Detailed history of the request | Authorization Search | Searching for an authorization | View/Print as PDF | View and print authorization status request as PDF | | |
| Create New | Creating a new request | | | | | | | | | | |
| History | Detailed history of the request | | | | | | | | | | |
| Authorization Search | Searching for an authorization | | | | | | | | | | |
| View/Print as PDF | View and print authorization status request as PDF | | | | | | | | | | |



4 AMENDING AN AUTHORIZATION

Amending an Authorization Request

Amending a request is the process of extending existing services **or** requesting another service on the same authorization. Each time an amendment is made the note character limit will be reduced. Amending is only available to requests that have been approved or partially approved by the health plan. The maximum number of services that can be added to an authorization is 15.

| | |
|---|---|
|  | <p>When making an amendment the user has the ability to add diagnoses, add services, add notes (as long as the maximum character limit has not been met) and add documents.</p> |
|---|---|

| Step | Action | | | | | | |
|--|--|-------|---------|------------------------------------|--|--|---|
| 1. | <p>Locate the existing request under Workflows for this Plan</p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p>Workflows for this Plan</p> <p>Medical Authorizations</p> <p>Medical Authorizations Log</p> </div> <table border="1"> <thead> <tr> <th>If...</th> <th>Then...</th> </tr> </thead> <tbody> <tr> <td>The request was created in NaviNet</td> <td>Select Medical Authorizations Log</td> </tr> <tr> <td>The request was not created in NaviNet (for example if the request was faxed, phoned, or submitted via Jiva)</td> <td>Select Medical Authorizations and then Search for Existing Authorization (also referred to as Authorization Inquiry by NaviNet)</td> </tr> </tbody> </table> | If... | Then... | The request was created in NaviNet | Select Medical Authorizations Log | The request was not created in NaviNet (for example if the request was faxed, phoned, or submitted via Jiva) | Select Medical Authorizations and then Search for Existing Authorization (also referred to as Authorization Inquiry by NaviNet) |
| If... | Then... | | | | | | |
| The request was created in NaviNet | Select Medical Authorizations Log | | | | | | |
| The request was not created in NaviNet (for example if the request was faxed, phoned, or submitted via Jiva) | Select Medical Authorizations and then Search for Existing Authorization (also referred to as Authorization Inquiry by NaviNet) | | | | | | |
| 2. | <p>Select Auth Details on the request that needs to be amended</p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p>GRETA EMERSON Date of Service: 03/18/2022 Date of Submission: 03/18/2022 ✔ Approved <small>as of 03/18/2022</small></p> <p>AmeriHealth Caritas Auth #: 92203003350</p> <p style="text-align: right;"> Auth Details + Create New 🕒 History 📎 Attach 🔄 Refresh Status </p> </div> | | | | | | |
| 3. | <p>Select Amend</p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p style="text-align: right;"> Amend + Create New 🕒 History 📎 Attach 🔍 Authorization Search 📄 View/Print as PDF </p> <p style="background-color: #e0f0e0; padding: 5px;"> ✔ Approved Authorization #: 92203003026 Effective: 03/31/2022 </p> </div> | | | | | | |
| 4. | <table border="1"> <thead> <tr> <th>If...</th> <th>Then...</th> </tr> </thead> <tbody> <tr> <td>Amending an outpatient request</td> <td>The following items can be addressed: date of service, diagnosis, add new service line, add document, notes and contact information.</td> </tr> </tbody> </table> | If... | Then... | Amending an outpatient request | The following items can be addressed: date of service, diagnosis, add new service line, add document, notes and contact information. | | |
| If... | Then... | | | | | | |
| Amending an outpatient request | The following items can be addressed: date of service, diagnosis, add new service line, add document, notes and contact information. | | | | | | |

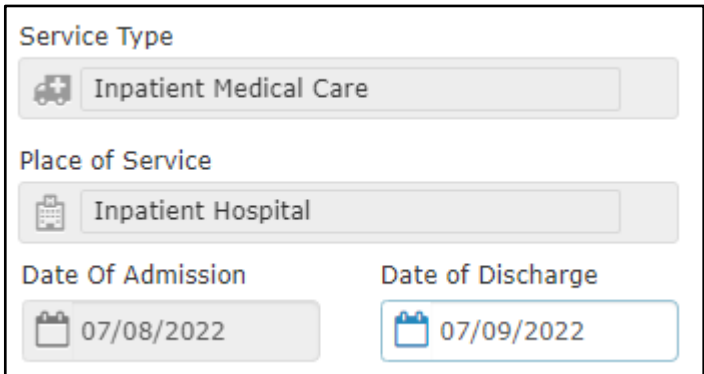
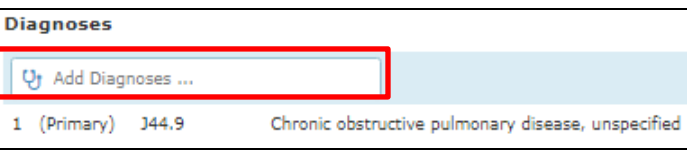
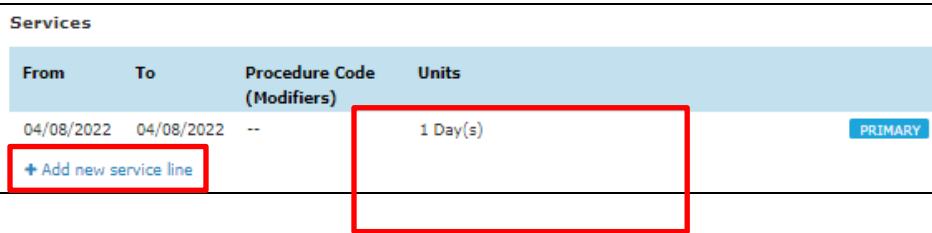
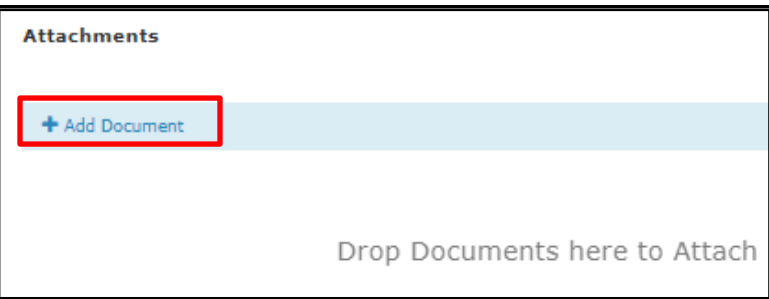
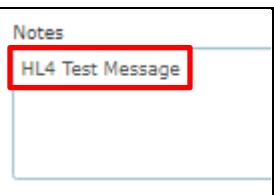
Amending an Authorization Request (cont'd)

| Step | Action | | | | | | | | |
|---|--|----------------------------|-------|----------------------------|-------|---|--|--|--|
| 5. | <p>Amending an outpatient request</p> <div data-bbox="240 296 667 894"> <p>Address the Date of Service</p> </div> <div data-bbox="678 296 1284 894"> <p>Service Type <input type="text" value="Outpatient Chiropractic"/></p> <p>Place of Service <input type="text" value="Office"/></p> <p>Date Of Service <input type="text" value="04/01/2022"/></p> <p>Level of Service ? <input type="text" value="Select Level of Service ..."/></p> <p>Requesting Provider <input type="text" value="180 MEDICAL INC"/></p> <p>Servicing Provider <input type="text" value="180 MEDICAL INC"/></p> </div> <div data-bbox="240 894 667 1083"> <p>Add additional diagnoses if applicable</p> </div> <div data-bbox="678 894 1284 1083"> <p>Diagnoses</p> <p><input type="button" value="+ Add Diagnoses ..."/></p> <p>1 (Primary) A02.8 Other specified salmonella infections</p> </div> <div data-bbox="240 1083 667 1318"> <p>Add new service line</p> </div> <div data-bbox="678 1083 1284 1318"> <p>Services</p> <table border="1"> <thead> <tr> <th>From</th> <th>To</th> <th>Procedure Code (Modifiers)</th> <th>Units</th> </tr> </thead> <tbody> <tr> <td colspan="4"><input type="button" value="+ Add new service line"/></td> </tr> </tbody> </table> </div> <div data-bbox="240 1318 667 1524"> <p>Add attachments if applicable</p> </div> <div data-bbox="678 1318 1284 1524"> <p>Attachments</p> <p><input type="button" value="+ Add Document"/></p> <p><input type="text" value="Doc3.docx"/> <input type="text" value="Medical Record Attachment"/></p> </div> <div data-bbox="240 1524 667 1755"> <p>Add notes if applicable</p> </div> <div data-bbox="678 1524 1008 1755"> <p>Notes</p> <p><input type="text" value="HL4 Test Message"/></p> </div> | From | To | Procedure Code (Modifiers) | Units | <input type="button" value="+ Add new service line"/> | | | |
| From | To | Procedure Code (Modifiers) | Units | | | | | | |
| <input type="button" value="+ Add new service line"/> | | | | | | | | | |

Amending an Authorization Request (cont'd)

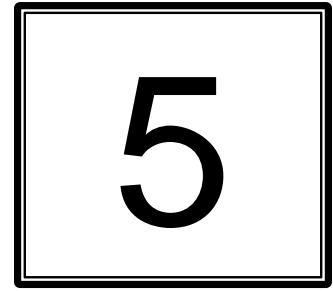
| Step | Action | | | | | | | | | | | | |
|-----------------------------|---|------------|--------------|------|----------------|-----------|------------|----------|----------|---------------|--|----------|--|
| 5. (cont.) | <p>Amending an outpatient request</p> <p>Enter contact information, check the Declaration box and Submit</p> <div data-bbox="704 344 1560 711"><p>▼ Contact Information</p><table><tr><td>First Name</td><td>Phone Number</td></tr><tr><td>Beth</td><td>(843) 999-9999</td></tr><tr><td>Last Name</td><td>Fax Number</td></tr><tr><td>Williams</td><td>Optional</td></tr><tr><td>Email Address</td><td><input checked="" type="checkbox"/> Save as default Contact Information for Medical Authorizations</td></tr><tr><td>Optional</td><td></td></tr></table><p>DECLARATION</p><p><input checked="" type="checkbox"/> By checking this box, I agree to notify the member of any services that are approved.</p><p>Cancel « Previous Submit</p></div> | First Name | Phone Number | Beth | (843) 999-9999 | Last Name | Fax Number | Williams | Optional | Email Address | <input checked="" type="checkbox"/> Save as default Contact Information for Medical Authorizations | Optional | |
| First Name | Phone Number | | | | | | | | | | | | |
| Beth | (843) 999-9999 | | | | | | | | | | | | |
| Last Name | Fax Number | | | | | | | | | | | | |
| Williams | Optional | | | | | | | | | | | | |
| Email Address | <input checked="" type="checkbox"/> Save as default Contact Information for Medical Authorizations | | | | | | | | | | | | |
| Optional | | | | | | | | | | | | | |

Amending an Authorization Request (cont'd)

| Step | Action | | | | |
|---|--|-------|----------|-------------------------------|---|
| 6. | <p>Amending an inpatient request</p> <table border="1" data-bbox="240 281 1555 489"> <thead> <tr> <th data-bbox="240 281 894 331">If...</th> <th data-bbox="894 281 1555 331">Then....</th> </tr> </thead> <tbody> <tr> <td data-bbox="240 331 894 489">Amending an inpatient request</td> <td data-bbox="894 331 1555 489">The following items can be addressed: date of date of discharge, diagnosis, add new service line, add document, notes and contact information</td> </tr> </tbody> </table> | If... | Then.... | Amending an inpatient request | The following items can be addressed: date of date of discharge, diagnosis, add new service line, add document, notes and contact information |
| If... | Then.... | | | | |
| Amending an inpatient request | The following items can be addressed: date of date of discharge, diagnosis, add new service line, add document, notes and contact information | | | | |
| . Providers have the ability to enter the date of discharge for members that have discharged. |  <p>The screenshot shows the 'Service Type' dropdown set to 'Inpatient Medical Care' and the 'Place of Service' dropdown set to 'Inpatient Hospital'. The 'Date of Admission' is 07/08/2022 and the 'Date of Discharge' is 07/09/2022.</p> | | | | |
| Add additional diagnoses if applicable |  <p>The screenshot shows the 'Diagnostics' section with a red box around the '+ Add Diagnoses ...' button. Below it, a list shows '1 (Primary) J44.9 Chronic obstructive pulmonary disease, unspecified'.</p> | | | | |
| Add new service line |  <p>The screenshot shows a table with columns 'From', 'To', 'Procedure Code (Modifiers)', and 'Units'. A row shows '04/08/2022', '04/08/2022', '--', and '1 Day(s)'. A red box highlights the '+ Add new service line' button and the '1 Day(s)' unit field. A 'PRIMARY' button is also visible.</p> | | | | |
| Add attachments if applicable |  <p>The screenshot shows the 'Attachments' section with a red box around the '+ Add Document' button. Below it, the text 'Drop Documents here to Attach' is visible.</p> | | | | |
| Add notes if applicable |  <p>The screenshot shows the 'Notes' section with a red box around the 'HL4 Test Message' text.</p> | | | | |

Amending an Authorization Request (cont'd)

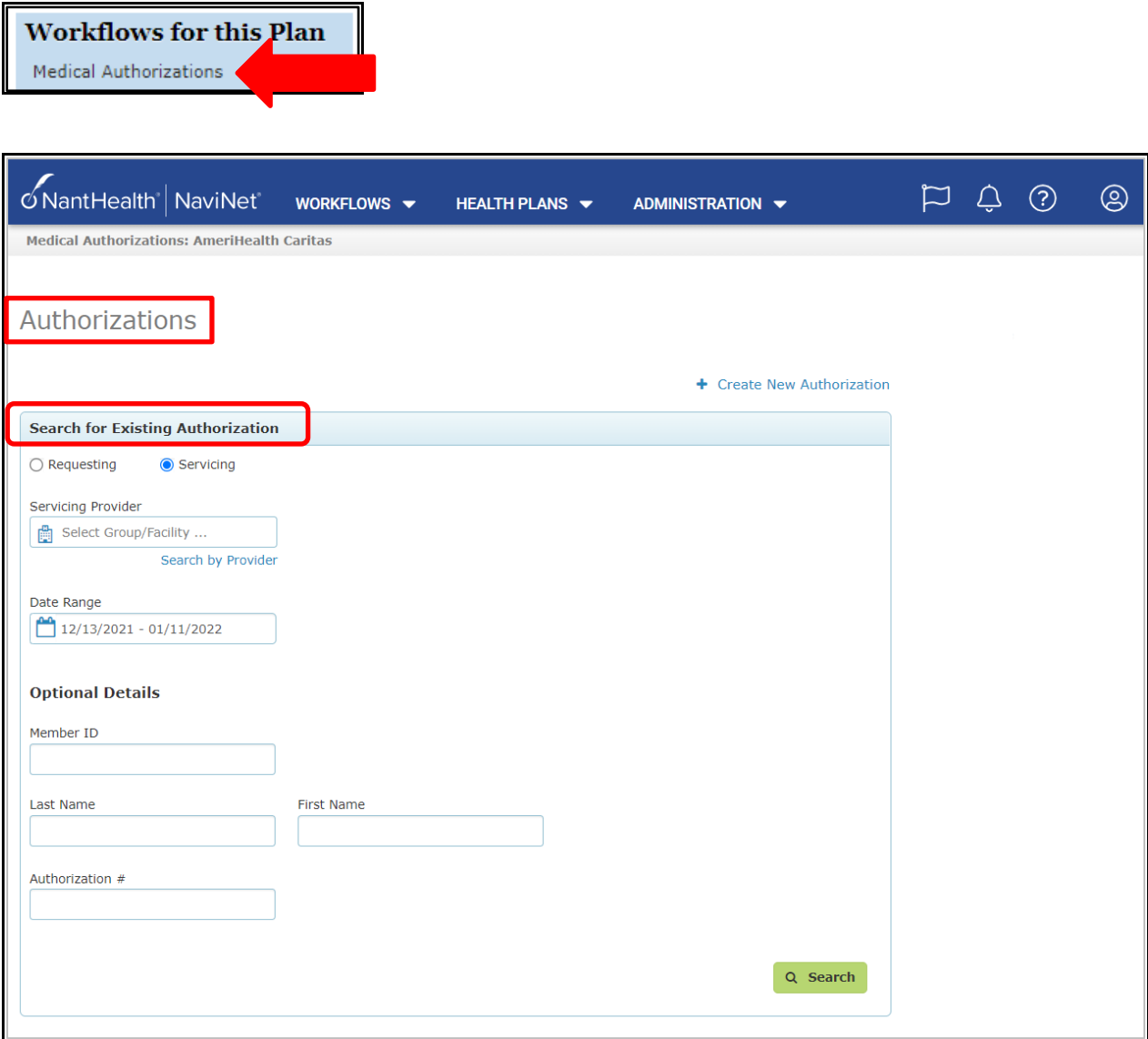
| Step | Action |
|---------------|---|
| 6. (cont.) | <p>Amending an inpatient request</p> <p>Enter contact information, check the Declaration box and Submit</p> <div data-bbox="565 331 1560 739"><p>Contact Information</p><p>First Name: <input type="text" value="Beth"/> Phone Number: <input type="text" value="(843) 999-9999"/></p><p>Last Name: <input type="text" value="Williams"/> Fax Number: <input type="text" value="Optional"/></p><p>Email Address: <input type="text" value="Optional"/></p><p><input checked="" type="checkbox"/> Save as default Contact Information for Medical Authorizations</p><p>DECLARATION</p><p><input checked="" type="checkbox"/> By checking this box, I agree to notify the member of any services that are approved.</p><p>Cancel <input type="button" value="« Previous"/> <input type="button" value="Submit"/></p></div> |



5 SEARCH FOR AN EXISTING AUTHORIZATION

Search for an Existing Authorization

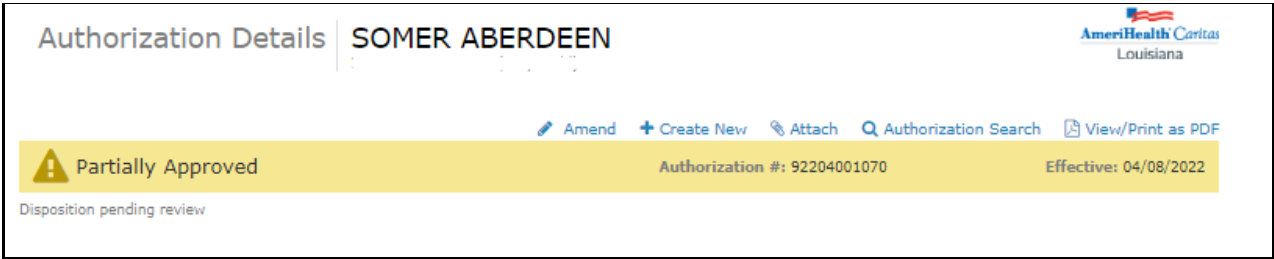
Search for an Existing Authorization (also known as Authorization Inquiry) is a way to search for authorizations that may not have been initiated in NaviNet, for example they may have phoned, faxed or created in Jiva.

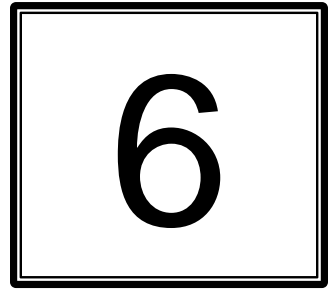
| Step | Action |
|------|--|
| 1. | <p>Providers will only see authorizations/requests for members that are under their care. To search for an existing authorization select Medical Authorizations under Workflows for this Plan. NaviNet refers to this as Authorization Inquiry.</p>  <p>The screenshot shows the NantHealth NaviNet interface. At the top, there is a navigation bar with 'NantHealth NaviNet' and menu items for 'WORKFLOWS', 'HEALTH PLANS', and 'ADMINISTRATION'. Below the navigation bar, the page title is 'Medical Authorizations: AmeriHealth Caritas'. A red box highlights the 'Authorizations' section. Below this, there is a '+ Create New Authorization' link. A red box highlights the 'Search for Existing Authorization' section. This section contains several input fields: 'Requesting' (radio button) and 'Servicing' (radio button, selected), 'Servicing Provider' (dropdown menu with 'Select Group/Facility ...' and 'Search by Provider'), 'Date Range' (calendar icon and date range '12/13/2021 - 01/11/2022'), and 'Optional Details' (Member ID, Last Name, First Name, and Authorization #). A green 'Search' button is located at the bottom right of the search form.</p> |

Search: Search for an Existing Authorization (cont'd)

| Step | Action | | | | | | | | | | | | | | | | | | | | | |
|-----------------|---|--|-----------------------|--------------------|---------------------|--------------------|-------|-------------------|-------------|----------------|--|---------|---------|-------|------------|-------------|----------------|---|---------|---------|-------|------------|
| 2. | <p>Select Servicing or Requesting Provider and adjust the date range then Search.</p> <div data-bbox="243 283 1453 1260"> <p>Authorizations</p> <p style="text-align: right;">+ Create New Authorization</p> <div style="border: 1px solid #ccc; padding: 5px;"> <p>Search for Existing Authorization</p> <p> <input type="radio"/> Requesting <input checked="" type="radio"/> Servicing </p> <p>Servicing Provider</p> <p><input type="text" value="Select Group/Facility ..."/></p> <p>Date Range</p> <p><input type="text" value="02/09/2022 - 03/10/2022"/></p> </div> <p>Optional Details</p> <p>Member ID</p> <p><input type="text"/></p> <p>Last Name First Name</p> <p><input type="text"/> <input type="text"/></p> <p>Authorization #</p> <p><input type="text"/></p> <p style="text-align: right;"><input type="button" value="Q Search"/></p> </div> | | | | | | | | | | | | | | | | | | | | | |
| 3. | <p>Click the authorization that you wish to view.</p> <div data-bbox="243 1333 1437 1617"> <p>Authorizations: Search Results</p> <p><input type="text" value="Filter Results ..."/></p> <table border="1"> <thead> <tr> <th>Authorization #</th> <th>Patient (Member ID) ^</th> <th>Status</th> <th>Requesting Provider</th> <th>Servicing Provider</th> <th>Proc.</th> <th>Date of Service v</th> </tr> </thead> <tbody> <tr> <td>92204001070</td> <td>SOMER ABERDEEN</td> <td>● Cancelled</td> <td>CUTTING</td> <td>CUTTING</td> <td>31365</td> <td>06/07/2022</td> </tr> <tr> <td>92204001069</td> <td>SOMER ABERDEEN</td> <td>○ Pending</td> <td>CUTTING</td> <td>CUTTING</td> <td>31365</td> <td>05/07/2022</td> </tr> </tbody> </table> </div> | Authorization # | Patient (Member ID) ^ | Status | Requesting Provider | Servicing Provider | Proc. | Date of Service v | 92204001070 | SOMER ABERDEEN | ● Cancelled | CUTTING | CUTTING | 31365 | 06/07/2022 | 92204001069 | SOMER ABERDEEN | ○ Pending | CUTTING | CUTTING | 31365 | 05/07/2022 |
| Authorization # | Patient (Member ID) ^ | Status | Requesting Provider | Servicing Provider | Proc. | Date of Service v | | | | | | | | | | | | | | | | |
| 92204001070 | SOMER ABERDEEN | ● Cancelled | CUTTING | CUTTING | 31365 | 06/07/2022 | | | | | | | | | | | | | | | | |
| 92204001069 | SOMER ABERDEEN | ○ Pending | CUTTING | CUTTING | 31365 | 05/07/2022 | | | | | | | | | | | | | | | | |

Search: Search for an Existing Authorization (cont'd)


| Step | Action | | | | | | | | | | |
|----------------------|---|-------|---|------------|------------------------|--------|----------------------|----------------------|--------------------------------|-------------------|--|
| 4. | <p>The user will be directed to the authorization details of the authorization that was selected in the previous step.</p> <div data-bbox="240 306 1507 562" style="border: 1px solid black; padding: 10px;">  </div> <p>Note: Additional actions may be accessed from the authorization details to include amending (only available for approved or partially approved requests), create new, attach, authorization search, and view/print as PDF.</p> <table border="1" data-bbox="240 667 1175 913"> <tbody> <tr> <td>Amend</td> <td>Extending existing services or requesting another service on the same authorization</td> </tr> <tr> <td>Create New</td> <td>Creating a new request</td> </tr> <tr> <td>Attach</td> <td>Attaching a document</td> </tr> <tr> <td>Authorization Search</td> <td>Searching for an authorization</td> </tr> <tr> <td>View/Print as PDF</td> <td>View and print authorization status request as PDF</td> </tr> </tbody> </table> | Amend | Extending existing services or requesting another service on the same authorization | Create New | Creating a new request | Attach | Attaching a document | Authorization Search | Searching for an authorization | View/Print as PDF | View and print authorization status request as PDF |
| Amend | Extending existing services or requesting another service on the same authorization | | | | | | | | | | |
| Create New | Creating a new request | | | | | | | | | | |
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| View/Print as PDF | View and print authorization status request as PDF | | | | | | | | | | |



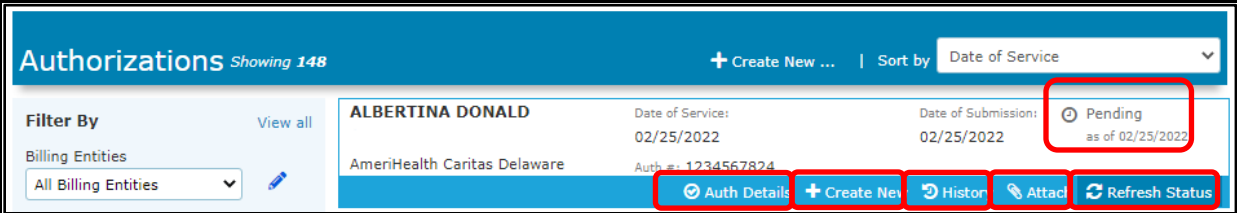


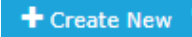
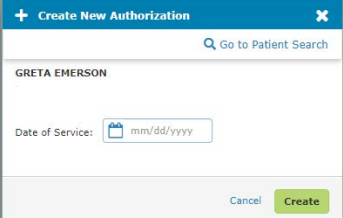

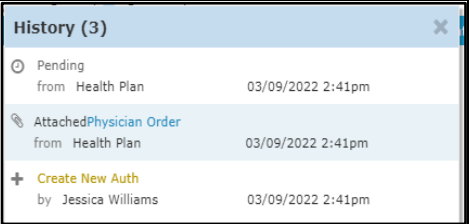

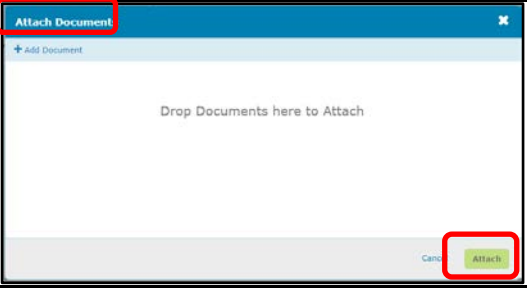

6 MEDICAL AUTHORIZATION LOG

Search: Medical Authorization Log

Only requests that have been submitted via NaviNet Open Medical Authorizations will appear in the Authorization Log. To see cases that have been initiated outside of NaviNet use Authorization Inquiry.

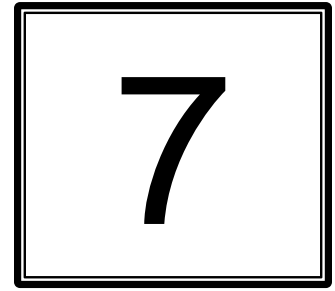
| Step | Action | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---------------------------------------|--------------------------------|---------------------------------------|-------------------------------|---|--|---------------------------------------|--------------------------------|---------------------------------------|-------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---------------------------------------|--------------------------------|---|--------------------------------|------------------------------|---------------------------|---------------------------------------|--------------------------------|---|
| 1. | <p>Select Medical Authorization Log under Workflows for this Plan. Result: All requests submitted by your office/facility via NaviNet can be found here.</p> <div data-bbox="240 441 669 604" style="border: 1px solid black; padding: 5px;"> <p>Workflows for this Plan</p> <ul style="list-style-type: none"> Medical Authorizations Medical Authorizations Log  </div> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. | <p>The user can +Create New, Sort by and Filter By. To see Authorizations created by you, check the box in front of Authorizations Created By Me.</p> <div data-bbox="240 730 1562 1831" style="border: 1px solid black; padding: 5px;"> <div style="background-color: #0070c0; color: white; padding: 5px;"> Authorizations <i>Showing 148</i> + Create New ... Sort by Date of Service </div> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;"></th> <th style="width: 30%;">ALBERTINA DONALD</th> <th style="width: 20%;">Date of Service:</th> <th style="width: 25%;">Date of Submission:</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;"> <div style="border: 1px solid red; padding: 2px; margin-bottom: 5px;">Filter By</div> <div style="margin-bottom: 5px;"> Billing Entities All Billing Entities ▼ </div> <div style="margin-bottom: 5px;"> Patient Details Search for name or ID... </div> <div style="margin-bottom: 5px;"> Authorization # <input type="text"/> </div> <div style="margin-bottom: 5px;"> Servicing Provider Search for name or ID... </div> <div style="margin-bottom: 5px;"> Date of service 12/11/2021-03/10/2022 </div> <div style="border: 1px solid red; padding: 2px; margin-bottom: 5px;"> <input type="checkbox"/> Authorizations Created By Me </div> <div> Status <input type="checkbox"/> Draft <input type="checkbox"/> Incomplete <input type="checkbox"/> Duplicate <input type="checkbox"/> Invalid Request <input type="checkbox"/> Required <input type="checkbox"/> Supplemental Information <input type="checkbox"/> Auth Not Required <input type="checkbox"/> Pending <input type="checkbox"/> Approved <input type="checkbox"/> Partially Approved <input type="checkbox"/> Denied <input type="checkbox"/> Modified <input type="checkbox"/> Cancelled <input type="checkbox"/> Complete <input type="checkbox"/> Expired <input type="checkbox"/> Contact Payer <input type="checkbox"/> Third Party </div> </td> <td style="vertical-align: top;"> <table border="1" style="width: 100%; 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| | ALBERTINA DONALD | Date of Service: | Date of Submission: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <div style="border: 1px solid red; padding: 2px; margin-bottom: 5px;">Filter By</div> <div style="margin-bottom: 5px;"> Billing Entities All Billing Entities ▼ </div> <div style="margin-bottom: 5px;"> Patient Details Search for name or ID... </div> <div style="margin-bottom: 5px;"> Authorization # <input type="text"/> </div> <div style="margin-bottom: 5px;"> Servicing Provider Search for name or ID... </div> <div style="margin-bottom: 5px;"> Date of service 12/11/2021-03/10/2022 </div> <div style="border: 1px solid red; padding: 2px; margin-bottom: 5px;"> <input type="checkbox"/> Authorizations Created By Me </div> <div> Status <input type="checkbox"/> Draft <input type="checkbox"/> Incomplete <input type="checkbox"/> Duplicate <input type="checkbox"/> Invalid Request <input type="checkbox"/> Required <input type="checkbox"/> Supplemental Information <input type="checkbox"/> Auth Not Required <input type="checkbox"/> Pending <input type="checkbox"/> Approved <input type="checkbox"/> Partially Approved <input type="checkbox"/> Denied <input type="checkbox"/> Modified <input type="checkbox"/> Cancelled <input type="checkbox"/> Complete <input type="checkbox"/> Expired <input type="checkbox"/> Contact Payer <input type="checkbox"/> Third Party </div> | <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="font-size: small;">AmeriHealth Caritas Delaware</td> <td style="font-size: small;">Auth #: 1234567824</td> <td style="font-size: small;">Servicing: Shock Trauma Associates Pa</td> <td style="font-size: small;">⊙ Pending as of 02/25/2022</td> </tr> <tr> <td style="font-size: small;">AmeriHealth Caritas Delaware</td> <td style="font-size: small;">Reference Id: NNA-9AESRZ4</td> <td style="font-size: small;">Servicing: Shock Trauma Associates Pa</td> <td style="font-size: small;">⚠ Required as of 02/25/2022</td> </tr> <tr> <td style="font-size: small;">AmeriHealth Caritas Delaware</td> <td style="font-size: small;">Reference Id: NNA-9AESRZ7</td> <td style="font-size: small;">Servicing: Shock Trauma Associates Pa</td> <td style="font-size: small;">⚠ Required as of 02/25/2022</td> </tr> <tr> <td style="font-size: small;">AmeriHealth Caritas Delaware</td> <td style="font-size: small;">Reference Id: NNA-9AESRZ8</td> <td style="font-size: small;">Servicing: Shock Trauma Associates Pa</td> <td style="font-size: small;">⚠ Required as of 02/25/2022</td> </tr> <tr> <td style="font-size: small;">AmeriHealth Caritas Delaware</td> <td style="font-size: small;">Reference Id: NNA-9AESRZ9</td> <td style="font-size: small;">Servicing: Shock Trauma Associates Pa</td> <td style="font-size: small;">⚠ Required as of 02/25/2022</td> </tr> <tr> <td style="font-size: small;">AmeriHealth Caritas Delaware</td> <td style="font-size: small;">Reference Id: NNA-9AESRZA</td> <td style="font-size: small;">Servicing: Shock Trauma Associates Pa</td> <td style="font-size: small;">⚠ Required as of 02/25/2022</td> </tr> <tr> <td style="font-size: small;">AmeriHealth Caritas Delaware</td> <td style="font-size: small;">Reference Id: NNA-9AESRZC</td> <td style="font-size: small;">Servicing: Shock Trauma Associates Pa</td> <td style="font-size: small;">⚠ Required as of 02/25/2022</td> </tr> <tr> <td style="font-size: small;">AmeriHealth Caritas Delaware</td> <td style="font-size: small;">Reference Id: NNA-9AESRZF</td> <td style="font-size: small;">Servicing: Shock Trauma Associates Pa</td> <td style="font-size: small;">⚠ Required as of 02/25/2022</td> </tr> <tr> <td style="font-size: small;">AmeriHealth Caritas Delaware</td> <td style="font-size: small;">Reference Id: NNA-9AESRZF</td> <td style="font-size: small;">Servicing: Shock Trauma Associates Pa</td> <td style="font-size: small;">⚠ Required as of 02/25/2022</td> </tr> </tbody> </table> | AmeriHealth Caritas Delaware | Auth #: 1234567824 | Servicing: Shock Trauma Associates Pa | ⊙ Pending as of 02/25/2022 | AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZ4 | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZ7 | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZ8 | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZ9 | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZA | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZC | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZF | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZF | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | <div style="font-size: small;">02/25/2022</div> <div style="font-size: small;">02/25/2022</div> <div style="font-size: small;">--</div> <div style="font-size: small;">--</div> <div style="font-size: small;">--</div> <div style="font-size: small;">--</div> <div style="font-size: small;">--</div> <div style="font-size: small;">--</div> <div style="font-size: small;">--</div> <div style="font-size: small;">--</div> | | | | | | |
| AmeriHealth Caritas Delaware | Auth #: 1234567824 | Servicing: Shock Trauma Associates Pa | ⊙ Pending as of 02/25/2022 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZ4 | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZ7 | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZ8 | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AmeriHealth Caritas Delaware | Reference Id: NNA-9AESRZ9 | Servicing: Shock Trauma Associates Pa | ⚠ Required as of 02/25/2022 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Search: Medical Authorization Log (cont'd)

| Step | Action |
|---|---|
| 3. | <p>Once the user selects the desired authorization for review they have the ability to view the following if the request is in pending status:</p> <p>Auth Details, +Create New, History, Attach, and Refresh Status.</p>  |
| Field | Function |
|  | <p>Details related to the authorization</p>  |
|  | <p>Create New Authorization for the member</p>  |
|  | <p>Provides detailed history of the request</p>  |
|  | <p>Ability to attach documents</p>  |
|  | <p>Allows the user to refresh the status for any updates.</p> |

Search: Medical Authorization Log (cont'd)

| Step | Action | | | | | | | | | | |
|-----------------------|---|-------|----------|--|--|--|---|--|--|--|--|
| <p>3. (cont.)</p> | <p>If the request is in draft status different fields are available. Continue, Delete, Create New, and History</p> <div data-bbox="256 298 1539 478"> </div> <table border="1" data-bbox="256 525 1539 1585"> <thead> <tr> <th data-bbox="256 525 495 567">Field</th> <th data-bbox="495 525 1539 567">Function</th> </tr> </thead> <tbody> <tr> <td data-bbox="256 567 495 630"> </td> <td data-bbox="495 567 1539 630">Allows the user to continue working on the request</td> </tr> <tr> <td data-bbox="256 630 495 976"> </td> <td data-bbox="495 630 1539 976"> Allows the user to delete the request </td> </tr> <tr> <td data-bbox="256 976 495 1302"> </td> <td data-bbox="495 976 1539 1302"> Allows the user to create a new authorization for the member </td> </tr> <tr> <td data-bbox="256 1302 495 1585"> </td> <td data-bbox="495 1302 1539 1585"> Provides detailed history of the request </td> </tr> </tbody> </table> | Field | Function | | Allows the user to continue working on the request | | Allows the user to delete the request | | Allows the user to create a new authorization for the member | | Provides detailed history of the request |
| Field | Function | | | | | | | | | | |
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| | Provides detailed history of the request | | | | | | | | | | |



7 REQUEST FOR MORE INFORMATION (RFMI)

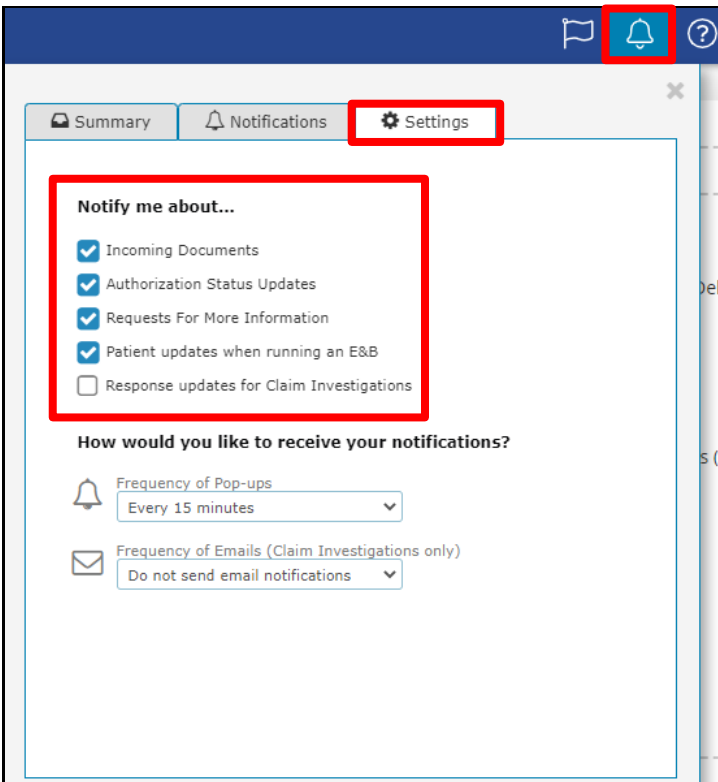
Request for More Information (RFMI)

Request for More Information (RFMI) is a feature in NaviNet that allows the health plan to request specific additional information to the provider if needed. Providers will only be able to have the RFMI ability for authorization requests that are pended or approved that are created in the NaviNet Provider Portal. Providers will be able to add notes and/or upload the documents in NaviNet Provider Portal for the pended authorization requests via the 'more information required' screen.

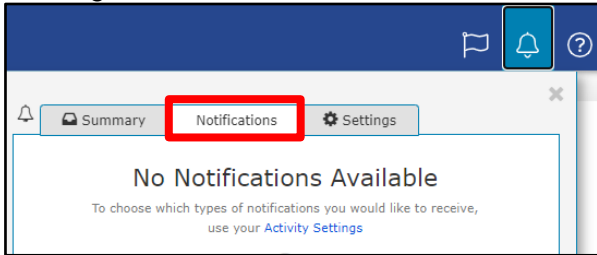
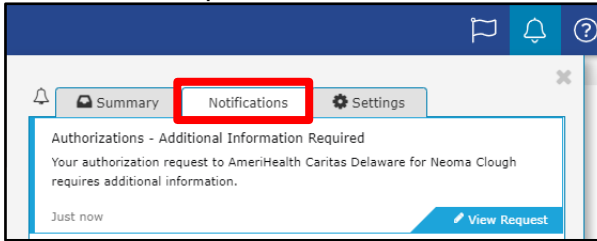
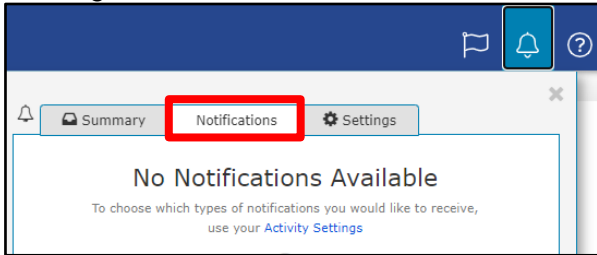
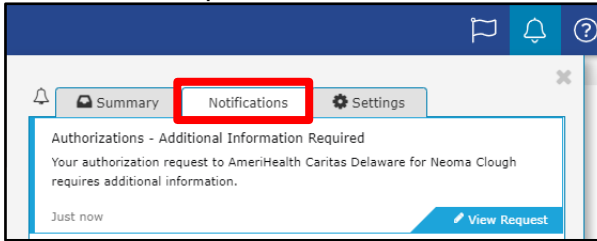
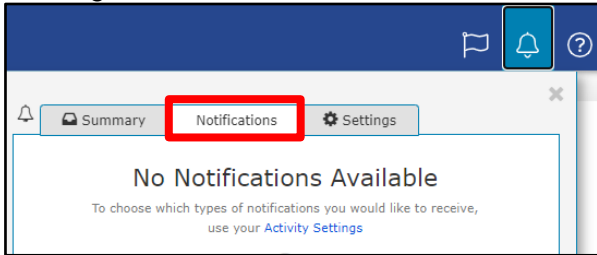
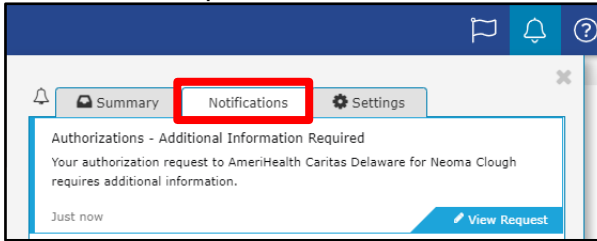
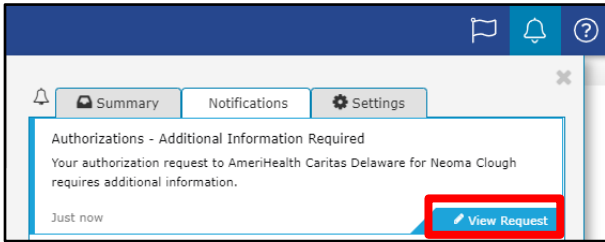
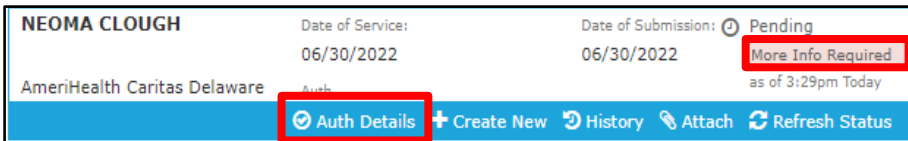


Notifications are an important part of the communication process between the health plan and the provider. Users can opt to receive notifications whenever a request is sent from the health plan to the provider. Notifications can be managed from the bell icon in the top right banner on the home page. It is important to note that notifications related to RFMI is not an immediate process. There is a slight delay as information travels from system to system.


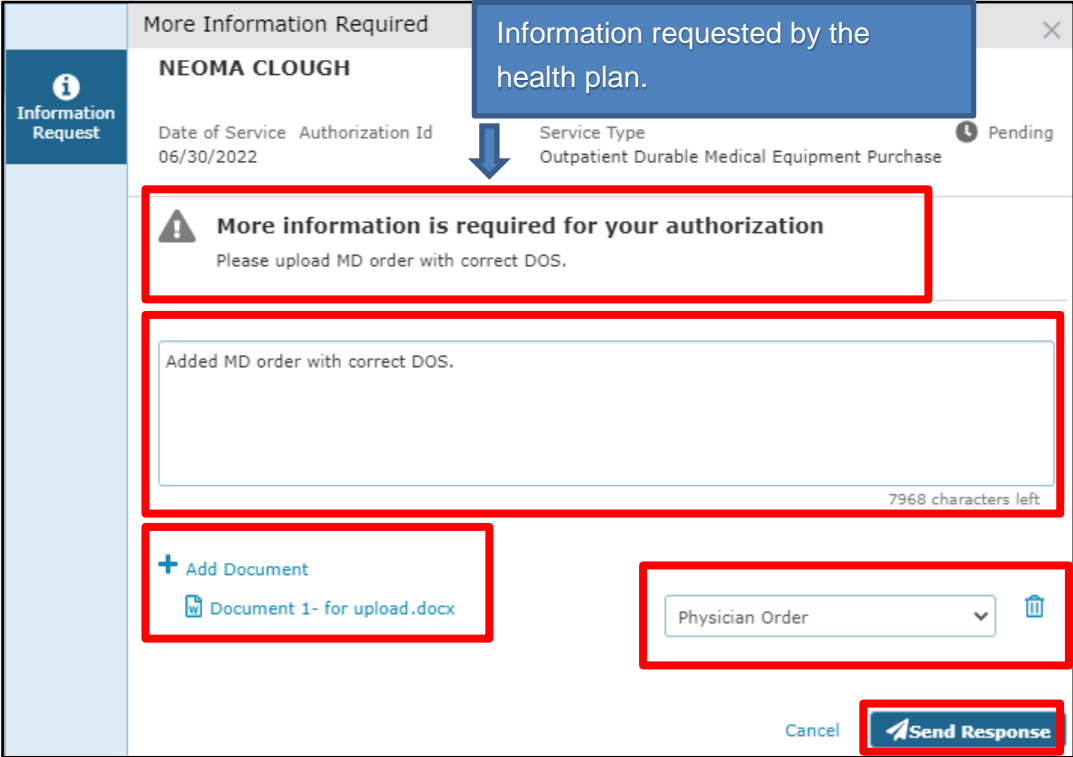
In NaviNet, users can opt to receive notifications whenever a request for additional information is sent to them from the health plan. Notifications can be managed under settings which is found when the bell icon is selected.

| Step | Action |
|------|--|
| 1. | <p>Select the bell icon in the top right corner in NaviNet, then specify what notifications you would like to receive under settings.</p>  |


Request for More Information (RFMI) (cont'd)

| Step | Action | | | | | | |
|-----------------------------|--|-------|---------|------------------------|---|-----------------------------|---|
| 2. | <p>To view notifications, select Notifications</p> <table border="1" data-bbox="240 300 1312 968"> <thead> <tr> <th data-bbox="240 300 618 331">If...</th> <th data-bbox="618 300 1312 331">Then...</th> </tr> </thead> <tbody> <tr> <td data-bbox="240 331 618 659">No notifications exist</td> <td data-bbox="618 331 1312 659"> <p>The user will see No Notifications Available message.</p>  </td> </tr> <tr> <td data-bbox="240 659 618 968">Notifications are available</td> <td data-bbox="618 659 1312 968"> <p>The user will see Authorizations – Additional Information Required.</p>  </td> </tr> </tbody> </table> | If... | Then... | No notifications exist | <p>The user will see No Notifications Available message.</p>  | Notifications are available | <p>The user will see Authorizations – Additional Information Required.</p>  |
| If... | Then... | | | | | | |
| No notifications exist | <p>The user will see No Notifications Available message.</p>  | | | | | | |
| Notifications are available | <p>The user will see Authorizations – Additional Information Required.</p>  | | | | | | |
| 3. | <p>There are 3 ways for the user to see RFMI from the health plan.</p> <ol style="list-style-type: none"> From Notifications the user will select View Request which activates the More Information Required area.  <ol style="list-style-type: none"> From the Medical Auth Log if More Info Required is listed the user will select Auth Details then select More Information Required to activate the More Information Required area.  | | | | | | |

Request for More Information (RFMI) (cont'd)

| Step | Action |
|--------------------|---|
| <p>3. (cont'd)</p> | <p>4. From Auth Inquiry if More Information Required is listed, click on it to activate the the More Information Required area.</p>  <p>The screenshot shows the 'Authorization Details' for NEOMA CLOUGH. At the top right is the AmeriHealth Caritas Delaware logo. Below the name are links for '+ Create New', 'History', 'Attach', 'Authorization Search', and 'View/Print as PDF'. A 'Pending' status is shown with a clock icon. A red box highlights the 'More Information Required >' link. At the bottom, the authorization number is 92206016951, effective date is 06/30/2022, and expires on 09/02/2022.</p> |
| <p>4.</p> | <p>Complete the more information required information request. The requested information will be listed under More information is required for your authorization. You may add notes (up to 8000 characters) and upload documents. If a document is uploaded, the document type will need to be specified from the drop down list (supported document types: pdf, docx, xml, csv, png, gif). To send the response back to the health plan select Send Response.</p>  <p>The screenshot shows the 'More Information Required' form for NEOMA CLOUGH. At the top, it says 'Information requested by the health plan.' Below this, there is a message: 'More information is required for your authorization. Please upload MD order with correct DOS.' A text area contains the note 'Added MD order with correct DOS.' with '7968 characters left' remaining. There is an 'Add Document' button with a file named 'Document 1- for upload.docx'. A dropdown menu is set to 'Physician Order'. The 'Send Response' button is highlighted with a red box.</p> |

Request for More Information (RFMI) (cont'd)

| Step | Action |
|------|--|
| 5. | <p>To see that the requested information has been sent back to the health plan, select History.</p>  <p>The screenshot displays the 'Authorization Details' for NEOMA CLOUGH. The status is 'Pending'. The 'History' button is highlighted with a red box. The history dropdown menu is open, showing a list of events:</p> <ul style="list-style-type: none">Attached Physician Order by Jessica Williams 07/27/2022 7:35pmResponse Sent by Jessica Williams 07/27/2022 7:35pmMore Information Required from Health Plan 07/27/2022 3:16pmPending from Health Plan 06/30/2022 9:10am <p>The 'Response Sent' event is highlighted in blue.</p> |