eQSuite® System Overview

Provider Portal- Part 1 Course 121



Agenda

Unit 1 Course Introduction

Unit 2 Provider Portal Overview

Unit 3 Entering a New Request

Unit 1

Course Introduction



Introductions and Logistics

- Class Roster
- Facility Layout
- Parking Lot
- Mobile phones / multi-tasking
- After class survey

Course Description

This course is designed to provide an overview of the request for authorizations/authorization extensions process within the eQSuite® Provider Portal.

- ➤ This course addresses the core activities of requesting precertification from the provider portal for inpatient and outpatient requests for service
- Services may be requested by the ordering provider or the servicing provider



Key Terms

Term	Definition
Action Required	A tab on the provider homepage which displays those cases requiring additional action on the part of the provider in order for the authorizations team to process a request for service
Completed	A tab on the provider homepage which displays those cases for which a determination of medical necessity has been completed
Submitted	A tab on the provider homepage which displays those cases where a pre-cert has been requested and no determination has yet been made
Draft	A pre-certification request that has been started by the user but has not yet been submitted for medical necessity review
Ordering Provider	The prescribing physician
Servicing Provider	The provider who will be providing the requested services/products (could be a physician, facility, home health provider, DME provider, etc.)



Unit 2

Provider Portal Overview



Unit Learning Objectives

In this unit, you will learn how to:

- Navigate the Homepage of the Provider Portal
- How to use Filter Options
- How to view an existing case

Provider Portal Authorizations Homepage

Search Portal

by different

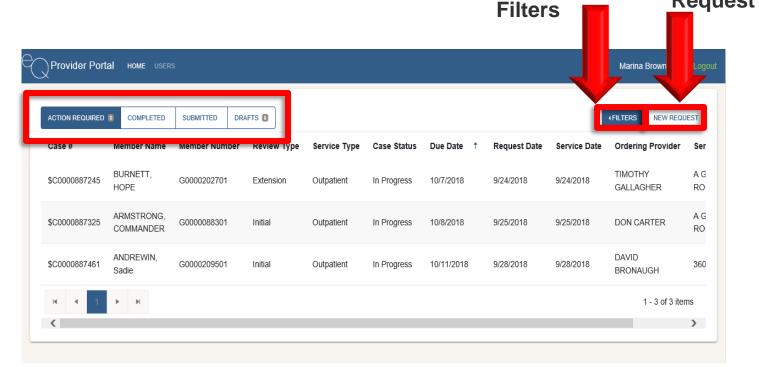
Add New

Request

Divided into tabs to easily find what you need

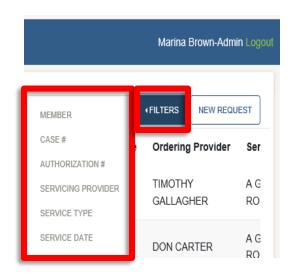
Ability to review existing cases that have, at a minimum been saved to draft form

Ability to Add a New Request

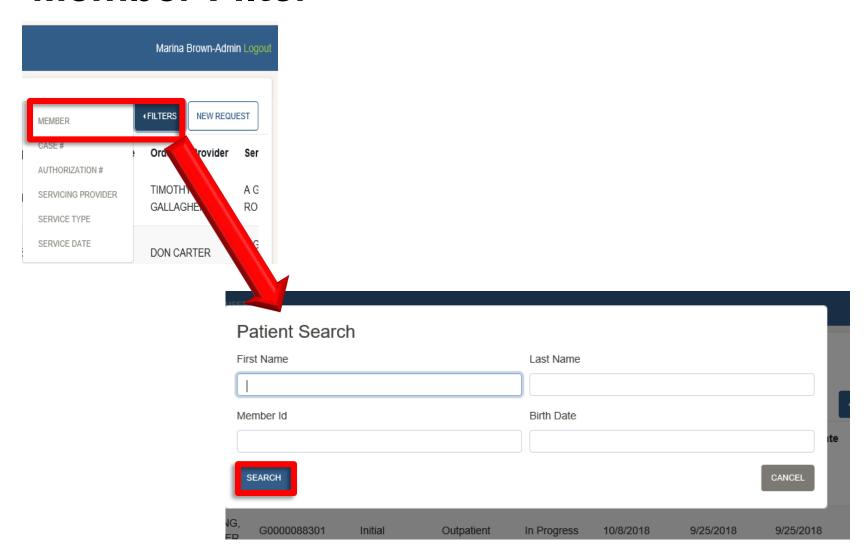


Filters

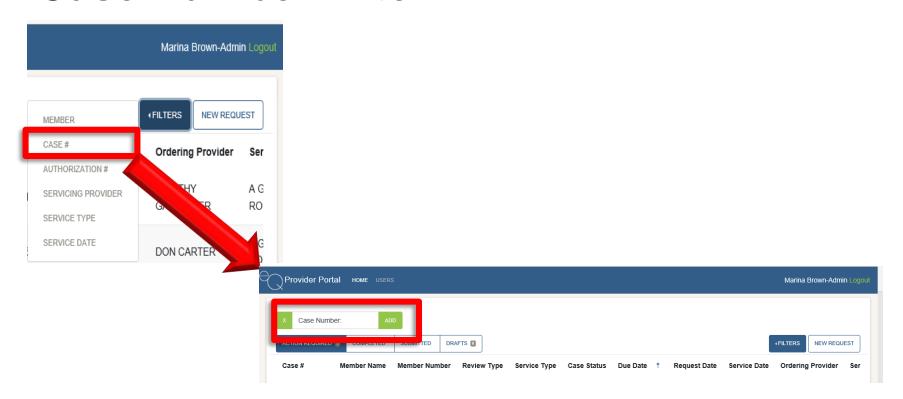
- ➤ Allows you to search for a case based on several different parameters
- >Filters include:
 - Member
 - Case Number
 - Authorization Number
 - Servicing Provider
 - Service Type
 - Service Date
- ➤ Click the appropriate filter from the dropdown
- ➤ May select multiple filters



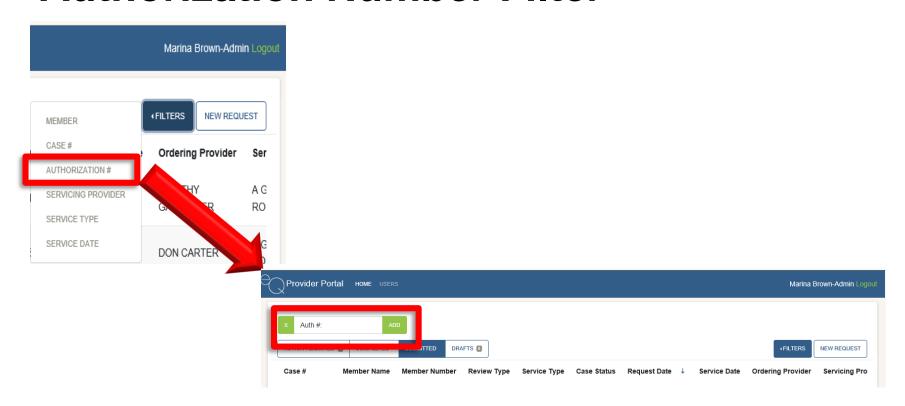
Member Filter



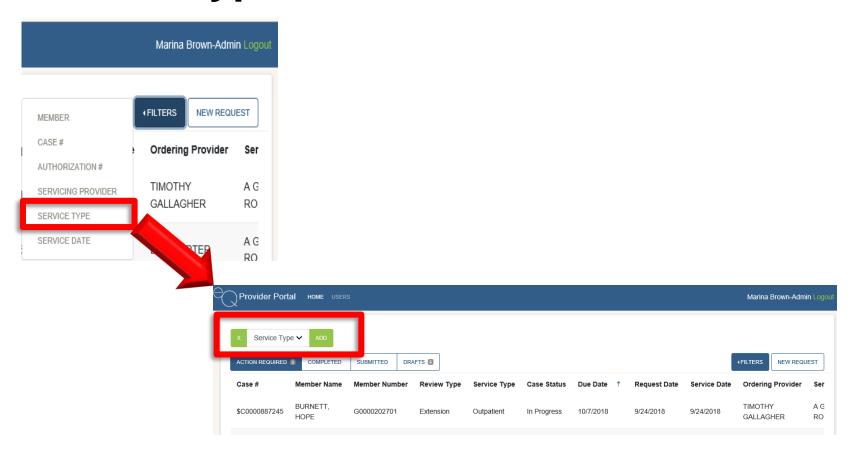
Case Number Filter



Authorization Number Filter

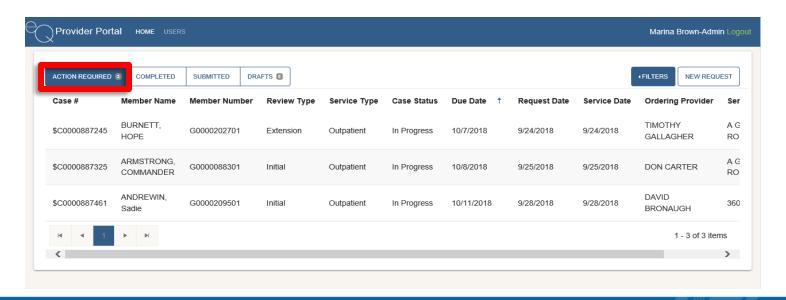


Service Type Filter



Action Required Tab

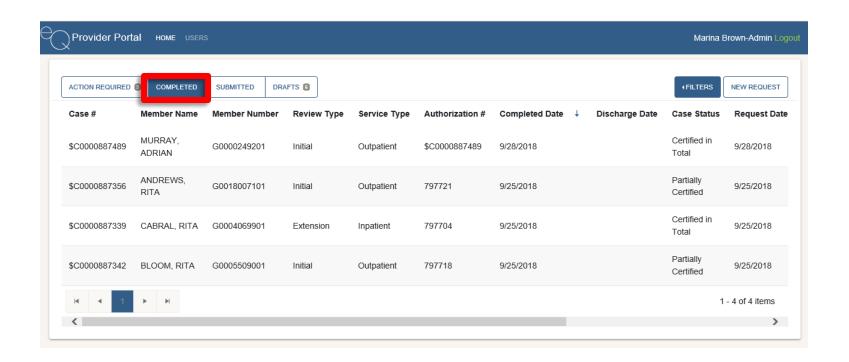
- Default tab to display
- Lists those cases where additional information is needed from the Plan to process the case
- Number next to the "Action Required" label denotes how many cases need additional information to process
- Click the line with member information to access case





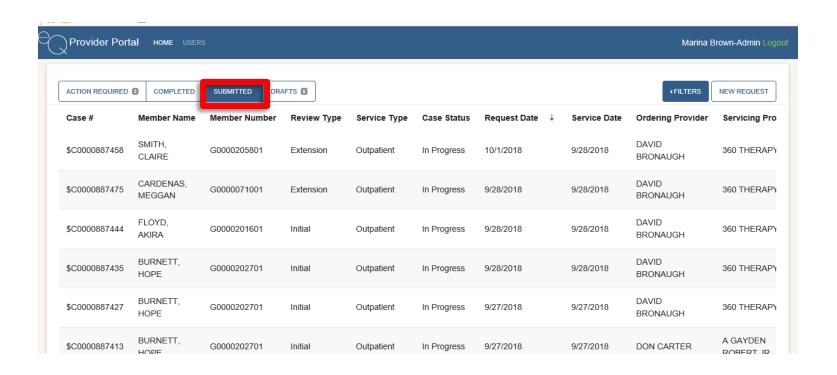
Completed Tab

- Lists those cases where a final determination has been made
- Click member line to view determination.



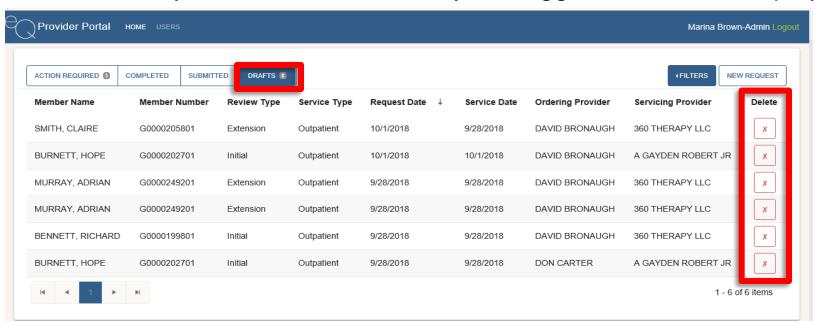
Submitted Tab

- Lists those cases that have been submitted by the provider for review and a medical necessity determination has not been made
- Click member line to view determination



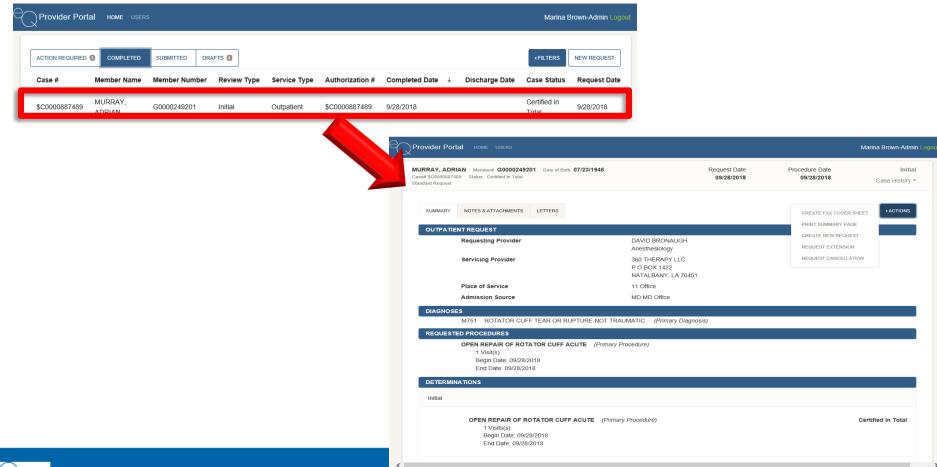
Draft Tab

- Lists those cases that have been started from the provider but have not yet been submitted for medical necessity review
- Click member line to view determination
- May delete a draft from this page
- *Note: Only those drafts entered by the logged in user are displayed



View an Existing Case

- Available from any of the Homepage tabs
- Click the row to view the case



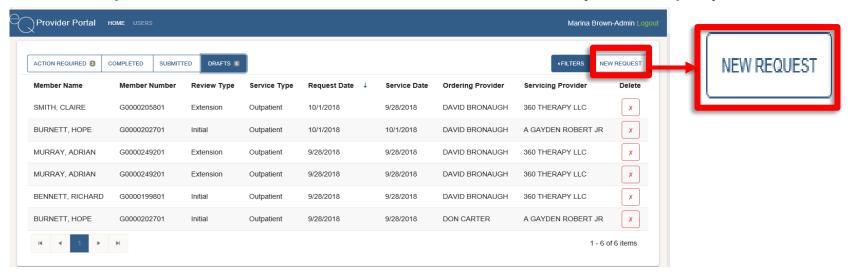
Unit 3

Entering a New Request



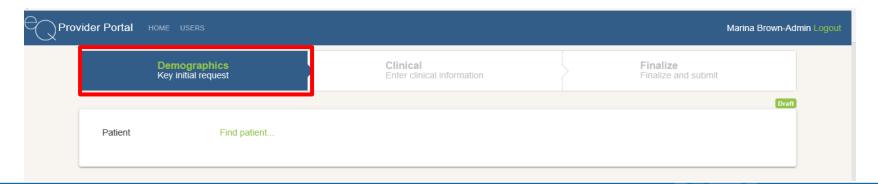
New Request for Authorization

- From the Homepage click "New Request"
- Complete data fields by following system props
- 3 tabs:
 - Demographics
 - Clinical
 - Finalize
 - *Optional 4th tab for clinical information may be displayed

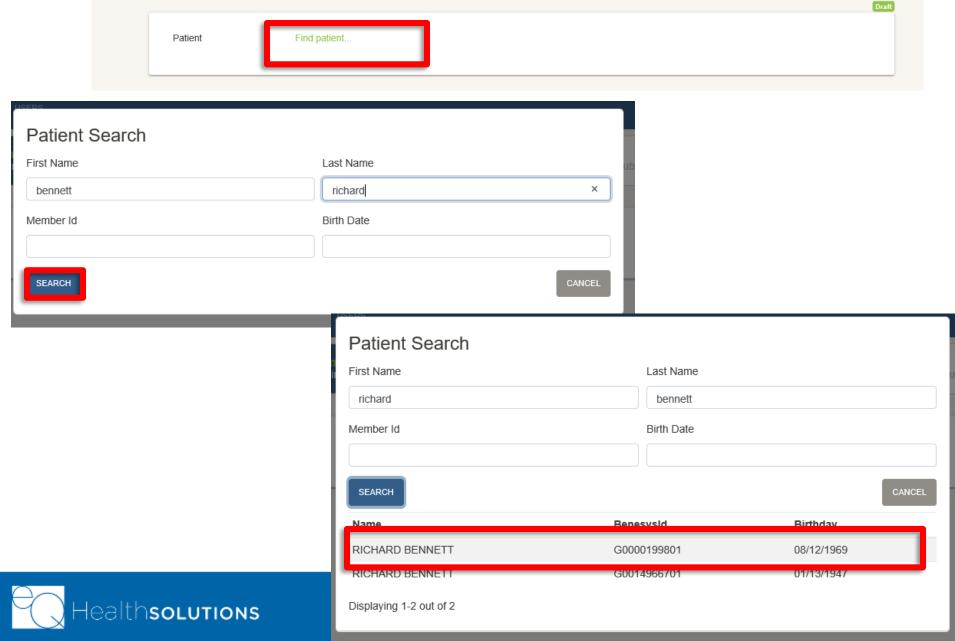


Demographics

- Complete basic information:
 - > Member
 - > Type of Service
 - Service Date
 - Ordering Provider
 - Servicing Provider
 - Place of Service
 - > Admission Source
 - > Request Severity

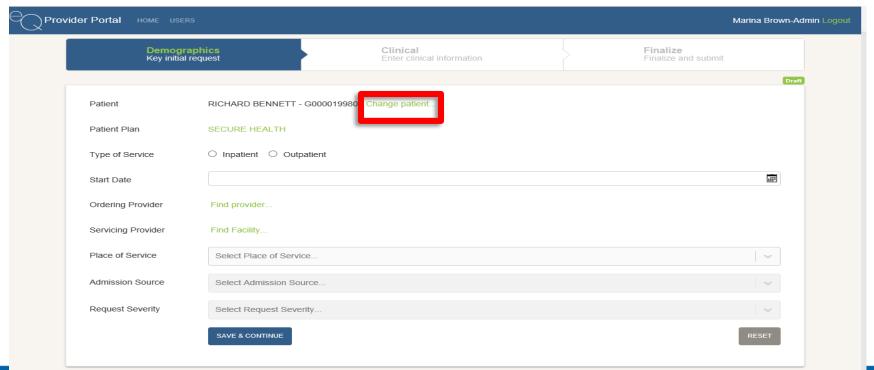


Demographics- Patient Search



Demographics-Patient Information

- Click in Patient Field to access Search Feature
- Enter search data
- Click the appropriate patient name to populate
- Member plan information will populate as well as the member name
- Ability to change patient by clicking "Change Patient" after patient name



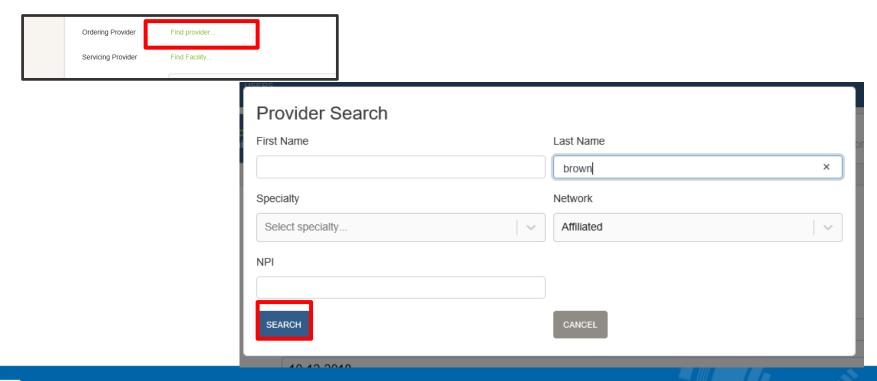


Demographics

- Type of Service: Inpatient or Outpatient
- Start Date: Begin date of the request (ex: Date of Service for a procedure, start date of services or an inpatient stay)
- Ordering Provider: Physician who is ordering the service
- Servicing Provider: Who will be providing the service (may be an individual physician, a facility or other servicing provider)
- Place of service is directly linked to service type. Standard CMS values
- Requested severity: Is this a routine or expedited/urgent request?

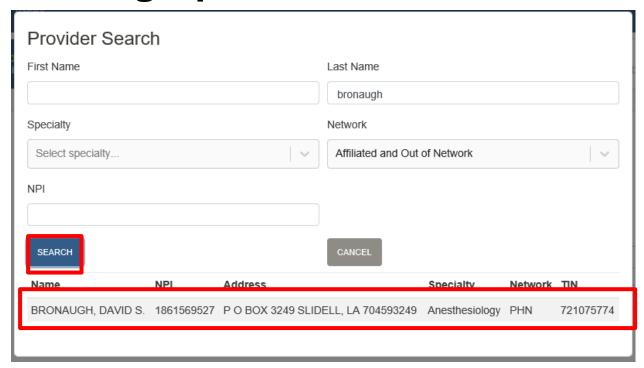
Demographics- Provider Search

- Functions same as patient search
- Only allowed to search for network provider
- ➤ If the servicing provider is not a network provider for the member, the provider will have to call in the request for services





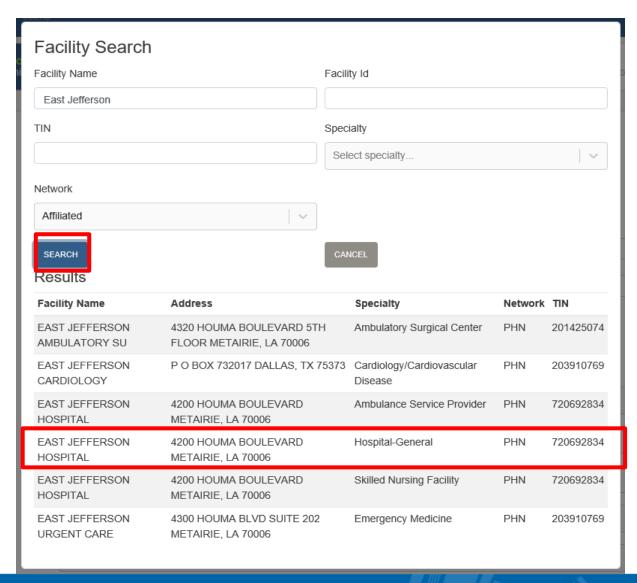
Demographics- Provider Search



- Click the "Ordering Provider" field
- Enter search criteria
- Click "Search"
- Click name of appropriate provider

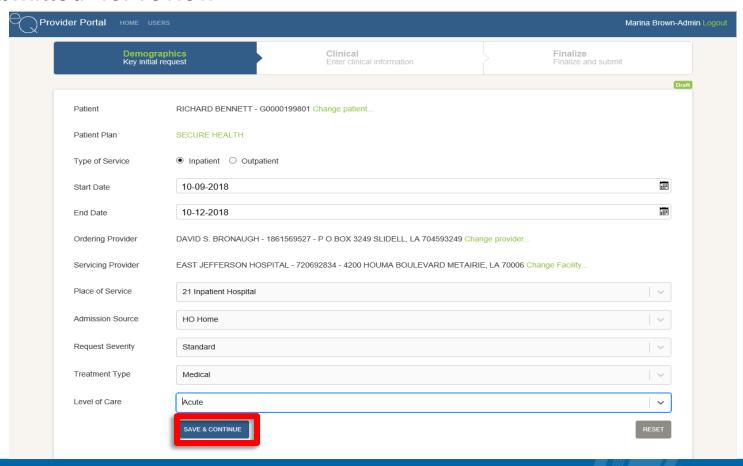
Demographics- Servicing Provider Search

- Click the "Servicing Provider" field
- Enter search criteria
- Click "Search"
- Click name of appropriate servicing provider



Demographics- Completed Tab

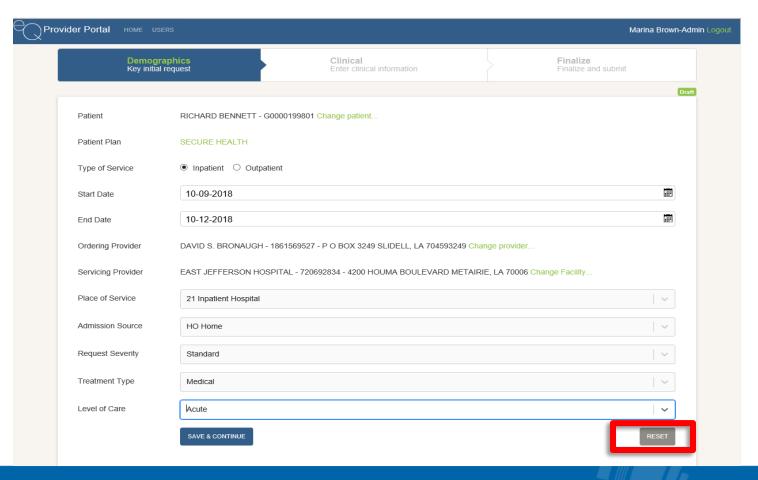
- Once all information completed, "Save and Continue"
- Can go back and change information at any point until case is actually "Submitted" for review





Demographics- Completed Tab

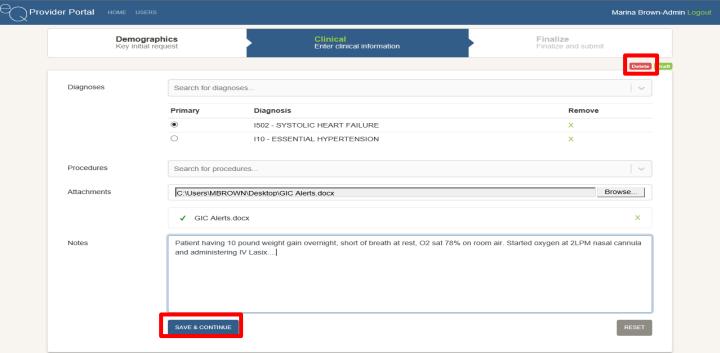
- Reset: Allows the user to clear the information entered on the page
- Receive a prompt "Are you sure you want to Reset?" when clicked





Clinical Tab

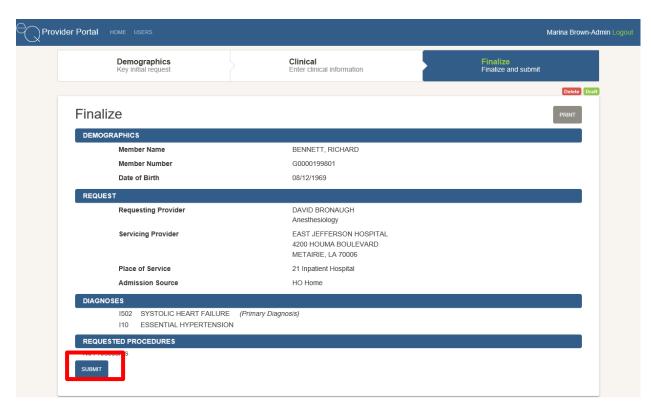
- Ability to add multiple diagnoses or procedures (by code or description)
- Must designate a primary diagnosis and/or procedure (first one defaults to primary)
- Click "Save and Continue" to save information
- Ability to delete a request by clicking "Delete" in top right corner





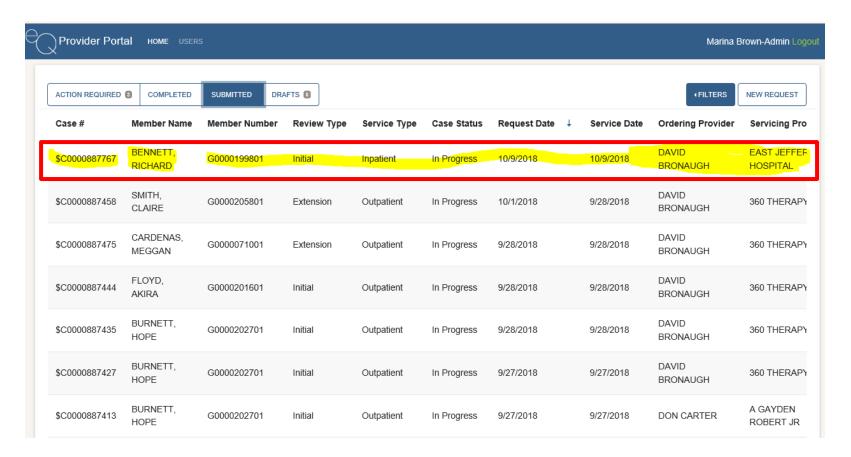
Finalize Tab

- Ability to review request information prior to submitting for medical necessity
- May go back and update information on any other tab
- Click "Submit" once you have verified the information on the request
- Must provide either clinical attachment or a note in order to submit the request



Submitted Requests

- Once a case is "Submitted" it will display on the "Submitted" tab
- Case has not yet been reviewed for medical necessity



QUESTIONS?



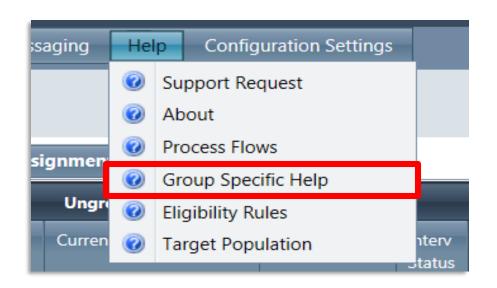




Additional Resources

You will be able to access training and support materials from within the production system:

- Go to the Help tab on the Menu bar
- Click Group Specific Help



Next Steps

- Use the ticketing process in the system to report any problems you encounter
 - Simplifies notification process
 - Allows for tracking and reporting on types of issues
 - Ensures that resolution will be assigned to the appropriate resource and quickly resolved
- ➤ Call the eQHealth® Help Desk



