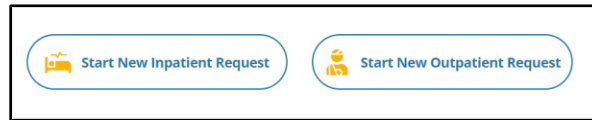


Outpatient Authorization

Initiation of an Outpatient Authorization

1. From the Home screen, click **Start New Outpatient Request**



2. Search for a member

- a. Enter First Name, Last Name, and Date of Birth (DOB)

OR

- b. Enter Member ID, including the alpha prefix

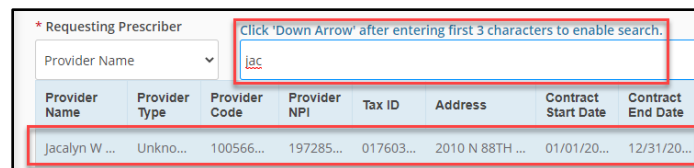
3. Click the member in the demographic ribbon to select

Member ID	Card ID : EHN100032899 , Patient ID : EHN10003289900	First Name	Mallary	Last Name	OCASKBPCBENLONIUM	Date of Birth	04/12/1985
Phone Number	N/A	Primary Insurance	BCBSNE	Secondary Insurance	N/A	Address PO Box 11 361 Deming St, Campbell, NE, 689320011	

4. Select **Eligibility**
5. Select **Authorization Type** from the drop-down list
6. Select the **Auth Priority** from the drop down list
7. Enter Requesting Provider information

Note: Do not use Provider Code. Select **Provider Name, NPI, or TIN**

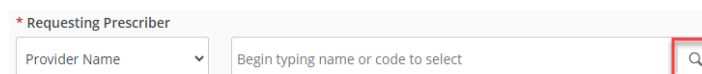
- a. Information can be entered using Quick Search by entering the first three letters of the provider's last name and clicking the down arrow
- b. Click on the correct provider



The image shows a dropdown menu for 'Requesting Prescriber'. The search input field contains 'iac' and a red box highlights the text 'Click "Down Arrow" after entering first 3 characters to enable search.' Below the dropdown is a table of providers.

Provider Name	Provider Type	Provider Code	Provider NPI	Tax ID	Address	Contract Start Date	Contract End Date
Jacalyn W ...	Unkno...	100566...	197285...	017603...	2010 N 88TH ...	01/01/20...	12/31/20...

- c. If the correct provider does not display, click the magnifying glass to conduct an Advanced Search



The image shows the 'Requesting Prescriber' dropdown menu with a magnifying glass icon in a red box next to the search input field. The input field contains the text 'Begin typing name or code to select'.

8. Enter the **Anticipated Date of Service** using the calendar icon OR type in the letter t, a **plus sign**, and the number of days from today the service is anticipated to occur (e.g., **t+21**). Select the Place of Service from the drop-down list

9. Enter the **Diagnosis Code(s)**
 - a. If additional diagnosis codes need to be entered, click the + to add another diagnosis code. Indicate the **Primary Diagnosis** by clicking the radio button.

10. Enter the **Procedure Code(s)** and associated information, From Date, Unit Type, Requested Units, and Policy Code.

- a. Select the Policy Code by clicking on the **Policy Code** link and choosing from the list of policies associated with the procedure code entered.
- b. Enter **From Date**, Select **Frequency** from the drop-down list, and enter number of **Requested Units**.
 - i. If there is an applicable modifier, enter this in the modifier field

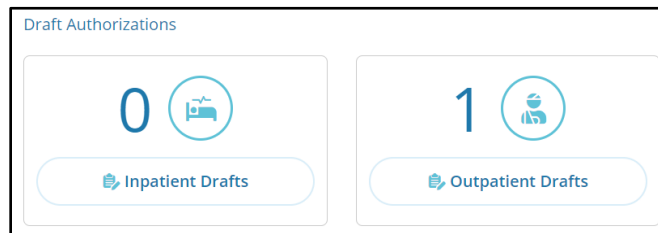
- c. If additional Procedure Codes need to be entered, click the + to add another procedure code.
 - i. Indicate Primary Procedure by clicking the radio button.

11. If the user is not ready to submit or needs to have another user enter InterQual information, select **Save as Draft**

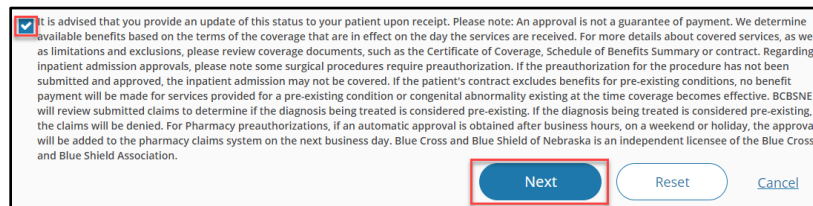


- a. On the ribbon at the top of the authorization, select **Yes, save as draft** or **No, stay on screen**

- i. Clicking Yes will allow the user to save a draft of the authorization for up to seven days.
 - 1. Please note, drafts are not visible to Blue Cross and Blue Shield of Nebraska (BCBSNE).
 - ii. Clicking No, will allow the user to go back and complete the authorization.
- b. These draft authorizations can be accessed from the Home screen under **Draft Authorizations**
- i. Click **Outpatient Drafts**, then select the auth by clicking **Draft** under the Status column



12. If the user is ready to submit and enter InterQual information, acknowledge the disclaimer and click **Next**



13. Click **Launch Clinical Decision Support/Guidelines Criteria**



14. Once the InterQual review is completed, the request will either be approved (if criteria are met) or it will be pended for review by BCBSNE.
- a. If approved, the authorization summary will appear
 - b. If the review is pended, an additional screen will appear to add notes and attach additional information
 - i. Include contact information (name, phone/fax number)
 - c. Click **Submit**

15. The authorization summary screen will display the authorization status, member information, and authorization information entered.
- a. Authorization information can also be viewed by clicking on the Authorization List from the Home screen.

