CareAffiliate Quick Guide: How to Check Authorization Status

This guide will take you step by step through the process of checking the status of a preauthorization in CareAffiliate, including examples of different status types you might encounter.



- Request Type List: This list of request types guides you on selecting those that are specific to the service requested.
- **Quick Reference Guide**: This resource offers step-by-step instructions on how to enter a request.
- FAQs: This document addresses the questions we receive most frequently from users.

The balance of this Quick Guide covers how to search by either member ID or reference/authorization number as well as examples of the various authorization types and how the status view will appear for each.



How to Check Authorization Status, Continued

Checking Authorization Status

Once you select the "Authorizations" link, the search menu gives you a variety of options to look up authorization information. The most common search options are by Member ID or Reference # (which is the same as the Authorization #)

Search by Member ID

- Select the magnifying glass to the right of the Member ID field.
- 2. Enter information in the Member Search screen that opens. (CareAffiliate requires a minimum of two identifiers not exclusive to last name; the date of birth is always required).
- 3. After entering the identifiers, click "Search."

The returned record will appear at the bottom of the Member Search screen. Select this record for authorization details.

See **page 4** for common samples of authorization detail views.



orizations				Search Existi	ing Records	New Authorization	Cle
Search Criteria 🔨							
Member ID		Q	Reference #				
Name							
Requesting Provider ID		Q	Diagnosis Procedure		otion Q	Q	
	Format: Last, First M.I.		Place of Service		~	~	
Servicing Provider ID Name	Format: Last, First M.I.	Q	Service	~			
Servicing Facility ID	r onnut. Eact, r not min	Q	Service Dates From	То			
Name		Su	bmission Dates From				
			Status	(4.00)			
			Status	(Any)		~	
Reference # Member ere are no records to displa		<u>Member Name</u>	Member DOB	Requesting Provider			
	ıy.	Member Name					
ere are no records to displa	Search						ghts reser
ere are no records to displa	Search Last Name						ghts reser
ere are no records to displa	Search Last Name First Name	xztest					ghts reser
ere are no records to displa	Search Last Name First Name Date of Birth*	xztest 01/01/1999	Copy				ghts reser
ere are no records to displa	Search Last Name First Name Date of Birth*	xztest 01/01/1999	Copy				ghts reser
ere are no records to displa	Search Last Name First Name Date of Birth*	xztest 01/01/1999 (None)	Copy	right © 2024 ExIService			ghts reser
ere are no records to displa	Search Last Name First Name Date of Birth*	xztest 01/01/1999 (None) Search	Copy	right © 2024 ExIService	Technology Soli		ghts reser

How to Check Authorization Status, Continued

4. You will again see the Authorizations Search Criteria Screen, but now the returned record will appear at the bottom of the screen. Click on the black arrow to view authorization details rather than selecting the authorization number.

Select CareAffiliat	te [®] UAT02-4.5.1.0_01		Home Authorizations
			l <u>Log Out</u>
Authorizations		Search Existing Records	New Authorization Clear
Search Criteria 🔨			
<u>Member ID</u> Name	0123456789 Q XZTEST, POWERTRAILOI	Reference #	
Requesting Provider ID Name Servicing Provider ID	Format: Last, First M.I.	Diagnosis Code Description Q Procedure Place of Service (Any)	
Name Servicing Facility ID Name	Format: Last, First M.I.	Service Service To	
Reference # Member	ID Policy.ID Member Name	Status (Any) Member DOB Requesting Provider Status Diagnosis	
240125893 01234567	789 100000000-00 XZTEST, POWERTRAILON	NE D 01/01/1999 JONES, HENRY Certified in Total Z01.89 : Encntr pr	eprocedural examinations

Search by Reference/Authorization Number

1. Enter reference/authorization number in the Reference # field.

 Click on the black arrow to view 		UAT02-4.5.1.0_ + 5789 Q. 1, POWERTRAILOI	Search Exis Reference # 240125893 Diagnosis Code Description Q	Home Authorizations I Log Out sting Records New Authorization Clear	2. Click on Search Existing Records to get results.
authorization details rather than the authorization number.	Servicing Provider ID	Last, First M.I. Last, First M.I.	Procedure Place of Service (Any) Service Service Dates From To	Q	
			Status (Any) mber DOB Requesting Provider Status Diagr I/01/1999 JONES, HENRY Certified in Total Z01.8	oosis 9 . Encntr preprocedural examinations	



Understanding Typical Authorization Detail Views

Based on the authorization type, the authorization detail view you see will differ. Below and on the following pages are six common views you may encounter. **Note that authorization views for other services will be very similar to the examples below.**

1. **Pended**—This indicates that the authorization is pending review. The status for the complete authorization is the one found on the member stripe.

Reference #	Member ID	Policy ID	Member Name	Member DOB	Requesting Provider	<u>Status</u>	<u>Diagnosis</u>
<mark>□</mark> 240126122 0	0123456789	10000000-00	XZTEST, POWERTRAILONE D	01/01/1999	JONES, HENRY	Pended	Z01.89 : Encntr preprocedural examinations
Service Referen	ice #	Service Details					
0240126122-001		Service From/Te Place of Service Service: Service Status: Procedure: Servicing Facili Servicing Provi	On Campus - Outpatient Hos Surgical (g) Pend SU02: Surgical energy out ty: INTERMOUNTAIN MEDICA	patient	The overall	status	s of this request is Pended.
<u>0240126122-002</u>	1	Service From/To Place of Service Service: Service Status: Procedure: Total Qty: Servicing Facili Servicing Provi	 On Campus - Outpatient Hos Surgical (g) Pend 27130 : TOTAL HIP ARTHR(1.0 Units 		The overall	status	s of this request is rended.

2. Certified in Total—This indicates that the authorization has been approved.

Reference #	<u>Member ID</u>	Policy ID	<u>Member Name</u>	Member DOB	Requesting Provider	<u>Status</u>	<u>Diagnosis</u>
■ 240125893	0123456789	10000000-00	XZTEST, POWERTRAILONE D	01/01/1999	JONES, HENRY	Certified in Total	Z01.89 : Encntr preprocedural examinations
Service Refere	nce #	Service Details					
<u>0240125893-00</u>	<u>n</u>	Service From/To Place of Service Service: Service Status: Procedure: Total Qty: Servicing Facilit Servicing Provid	: Office Surgical (h) Approved (Complete) - W 15822 : REVISION OF UPPE 1.0 Units				



3. Not Certified—This indicates that the authorization has been denied.

Reference #	Member ID	Policy ID	<u>Member Name</u>	Member DOB	Requesting Provider	<u>Status</u>	Diagnosis
231060009	0123456789	100000000-00 XZTEST, POWERTRAILONE D		01/01/1999	JONES, HENRY	Not Certified	Z01.89 : Encntr preprocedural examinations
Service Reference # Service Details							
<u>0231060009-00</u>	<u>1</u>	Service From/To Place of Service Service: Service Status: Procedure: Total Qty: Servicing Facilit Servicing Provid	: Home Private Duty Nursing (j) Denied - With Letter PD01 : Private Duty Nurse 2050.0 Units y: ABC PEDIATRICS				

4. Modified—This indicates multiple determinations such as approved and denied services within the same request.

Reference #	Member ID	Policy ID	Member Name	Member DOB	Requesting Provider	<u>Status</u>	<u>Diagnosis</u>		
	0123456789	10000000-00	XZTEST, POWERTRAILON	E D 01/01/1999	JONES, HENRY	Modified	Z01.89 : Encntr	preprocedural examinations	
Service Refere	nce #	Service Details							
<u>0231119235-00</u>	<u>1</u>	Place of Service: Service Status: Procedure: Servicing Facility: Servicing Provide Inpatient Details:	Admit Date: (None) Disc	npatient harge Date: (None) L	OS: 0 4 Reason: SA - Out of Ser	vice Area (Advo	ocates)	This request shows status as not all s requested were a Viewing the deta	services approved.
<u>0231119235-00</u>	1	Place of Service: Service: Service Status: Procedure: Servicing Facility: Servicing Provide Inpatient Details:	Admit Date: (None) Disc	npatie the speci harge Date: (None) L	" status on a service fied procedure was a OS: 0 4 Reason: SA - Out of Ser	approved.		will show which s approved and wh	
<u>0231119235-00</u>	<u>1</u>	Place of Service: Service: Service Status: Procedure: Servicing Facility: Servicing Provide Inpatient Details:	SU01 : Surgical servic ABC PEDIATRICS tr: (None) Admit Date: (None) Discl	his procedure w harge Date: (None) L			ocates)		

