CareAffiliate® Quick Guide

FOLLOW THESE STEPS TO ENTER AN AUTHORIZATION REQUEST:

- Log in using compatible browser (Google Chrome recommended).
- Authorizations View previous authorizations submitted for this member by clicking the one you need.
- Click on the Look Up button.
- Enter Name and Date of Birth <u>OR</u> Identifier and Date of Birth. Then click Search.
- Click on displayed record.
- Click on Clear to clear member search results.
- Click on New link to start a new authorization request.
- Under Request Type, begin typing to search favorites. If you
 click on the Magnifying Glass icon, a subsequent Search box
 appears. Choose from the available options.

NOTE: Be sure to select the appropriate request type as the assessment or survey questions are related (reference the current <u>Care Affiliate Request Type List</u>).

- Enter the Contact Phone number.
- Under Requesting Provider/Facility, enter the provider's name to search favorites, or click on the Magnifying Glass icon to enter NPI OR Name.
- Click on Use for all Requested Services if the Requesting Provider is also the Service Provider.
- Under **Diagnosis**, enter correct ICD-10 code(s) <u>OR</u> use the **Magnifying Glass** icon to search for the necessary code.

The table below highlights steps for entering a request for one versus two service lines. **NOTE:** All steps are the same for either scenario except for step 2.

Steps	For 1 Service Line	For 2 Service Lines
1	Click on Service 1.	
	Enter Service From and To dates.	
2	Provider: Begin typing to search favorites, or click on the Magnifying Glass icon to enter NPI or name; Resility: Begin typing to search favorites or click on the Magnifying Glass icon to enter NPI or name (If both the Provider and Facility fields display, only populate one of them).	Facility: Begin typing to search favorites, or click on the Magnifying Glass icon to enter NPI or name.
		Procedure: If Site displays under Type, check to see if a value in the quantity field needs to be entered.
		Click on Service 2.
		Enter Service From and To dates.
		Provider: Begin typing to search favorites, or click on the Magnifying Glass icon to enter NPI or name.
	Procedure: If Site displays under Type, check to see if a value in the quantity field needs to be entered.	
3	— Click on Edit .	
	— Leave the check in the Primary box.	
	Procedure: Enter code or description.	
	Modifiers: Enter information in this field, if applicable	
	 Quantity: Enter or change information in this field as needed. The Qualifier field defaults to Units and can be changed if needed. 	
	— Click OK .	
	— Click on arrow to view or Edit to change above information.	
4	• Click on Copy Service Line on the last service line to add more service lines for additional procedure codes. Fields display information from previous service line, so click on Edit to delete and enter desired information.	
5	• Click on X to delete an unneeded service line. After 4 procedure codes are entered, the service lines move to another page. Click on the buttons to move between pages.	



CareAffiliate® Quick Guide, Continued

To finish a request submission, click on the following (items in bold type):

- **Notes** to enter any additional information. This is not a substitute for submitting clinical information, but this field can be used to notify us of a potential date of service, facility changes, hardware details, or assistant surgeon and NPI#.
- Either Survey and Launch Survey OR Assessment and Launch Assessment. There is a question where you can indicate if a request is urgent/expedited. Other questions (if displayed) are specific to the requested service and must be completed to process the review. Click Complete or Done.
- Attachments to attach any clinical information needed for the review. Then, click on Add File, label the file in the Description field if needed, and then click on Upload Files. (NOTE: Clinical information is required to complete the review.)
- Submit.
- Refresh icon to update and review the summary screen.
- Print (if desired).

FOLLOW THESE STEPS TO CHECK THE STATUS OF A SUBMITTED AUTHORIZATION REQUEST:

- Click on Authorizations.
- Enter desired search parameter information.
- Click on Search Existing Records.

Most common search parameters include:

- Reference #
- Member and Date of Birth
- Requesting Provider plus either Service Dates
 Range or Submission Dates Range

Once you have search results, there are two ways that you can access authorization details and status (**see table below** for details of what each status means):

- Click on the ▶ by the Reference # link to open an overview of authorization information (e.g., service line, requesting provider, codes, status, etc.).
- Click on the Reference # link itself to view the original screens for submitted information and request status. In this view, you also have the option of printing these screens by clicking on the Print button in the upper right-hand corner of the screen.

Part of the requested service approved and part denied. Further review needed as service is still in place. No notification letter sent.

Part of the requested service approved and part denied. Further review needed as service is still in place. Notification letter sent.

