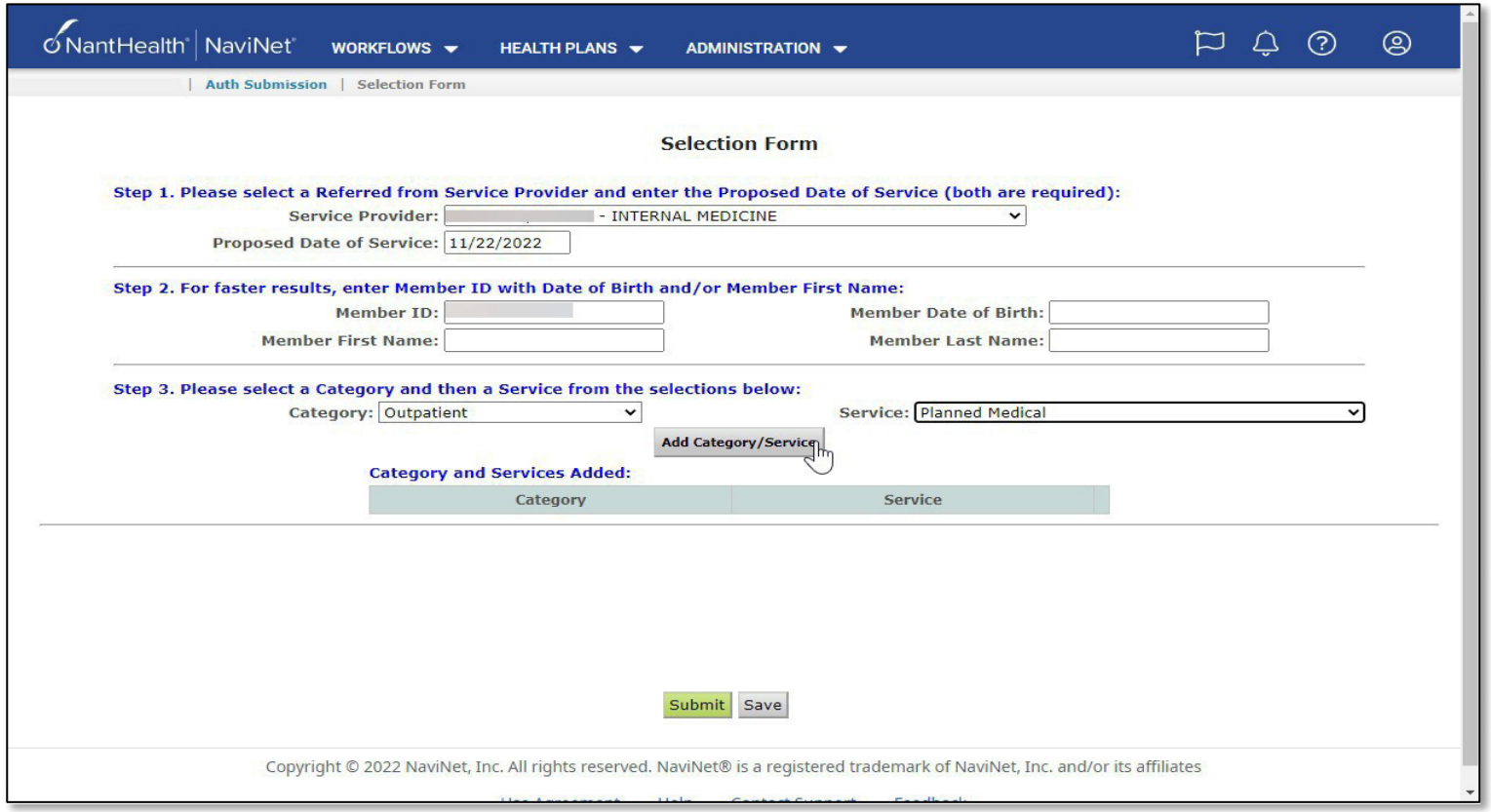
NaviNet® Provider Portal Outpatient Authorization Submission

Youwill see the changes to the OutpatientAuthorization Workflow when completing the following:

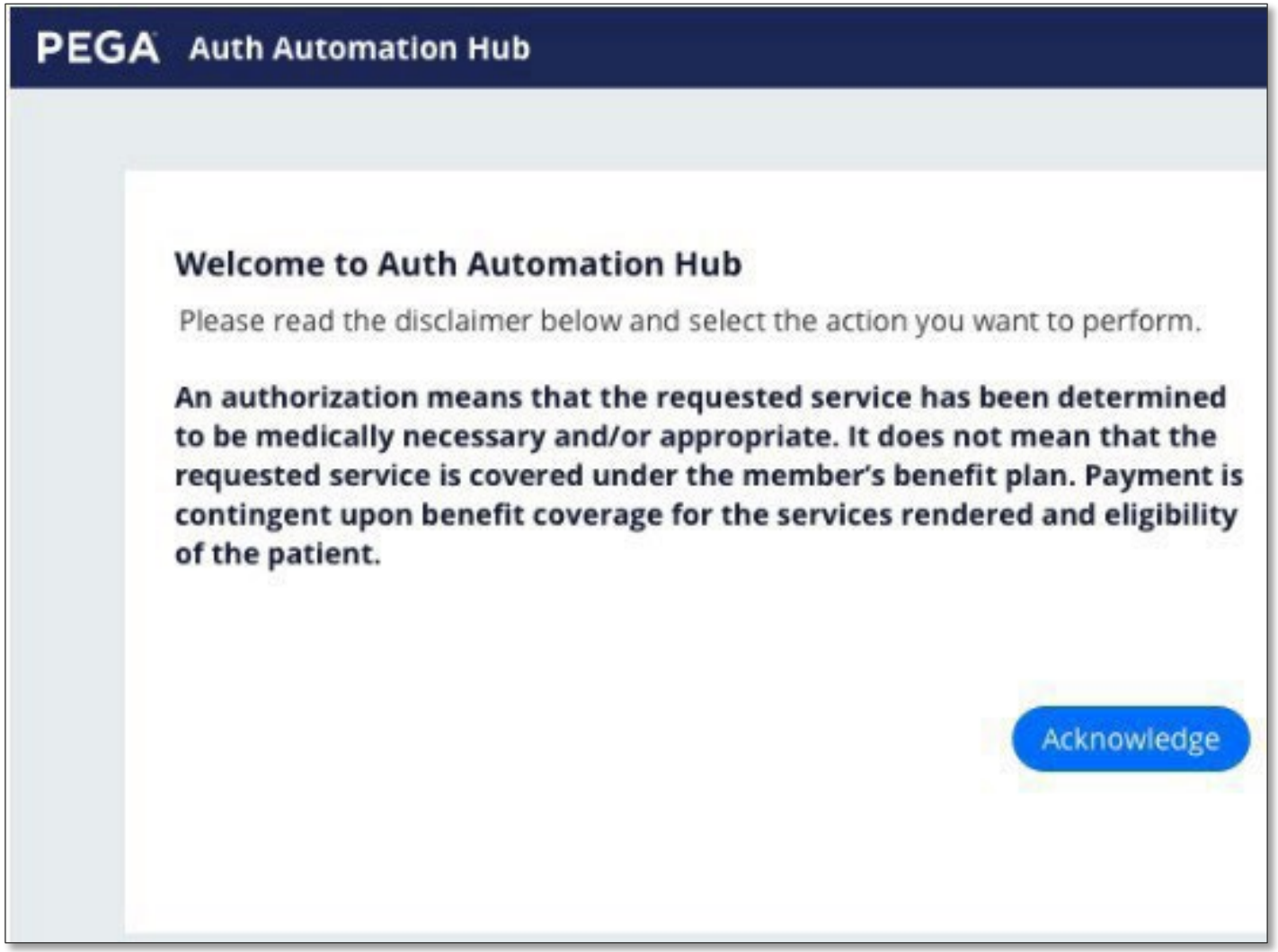
- Outpatient – Planned Medical
- Outpatient – Planned Surgical
- Outpatient – Speech Therapy
- Outpatient – CORF – PhysicalTherapy
- Outpatient – CORF – OccupationalTherapy
- Home Health Care
- Hospice
- Outpatient – Large Joint Procedures
- Outpatient – Spine Surgery Procedures
- Outpatient – Pain Management Procedures
- Lab Management – Genetic Testing
- Advanced and Cardiac Imaging – Request
- Radiation Therapy – All Services
- Outpatient – Medical Drug and Chemotherapy
- Pharmacy



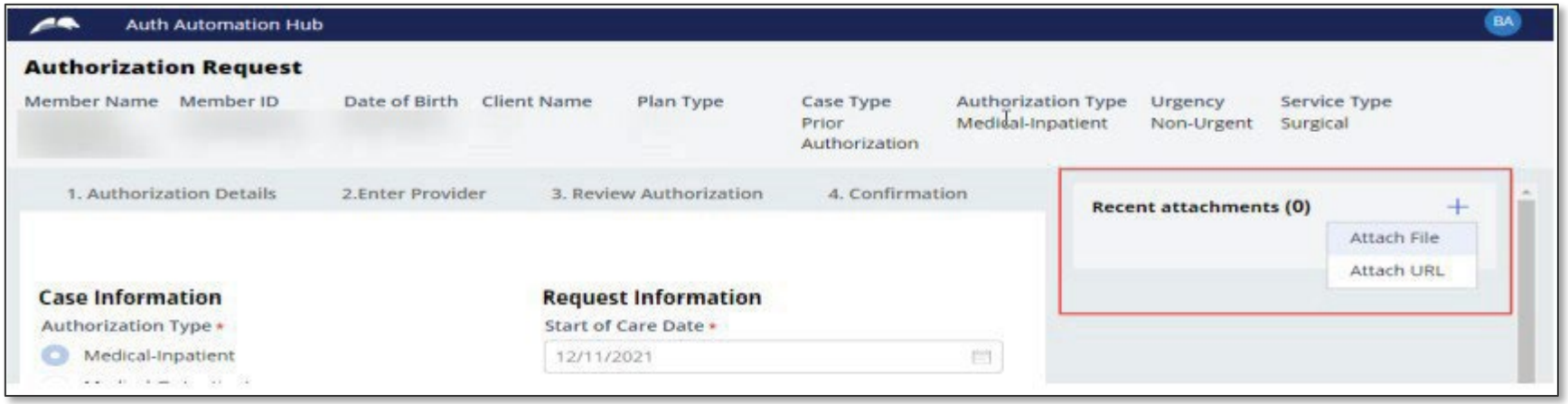
For Medical Drug requests, you no longer must select the site of care in the Service Field. It will default to “Request”

For Outpatient Chemotherapy requests, select Category: Outpatient, and Service: Chemotherapy
Previously you were instructed to build these under the Medical Care service.

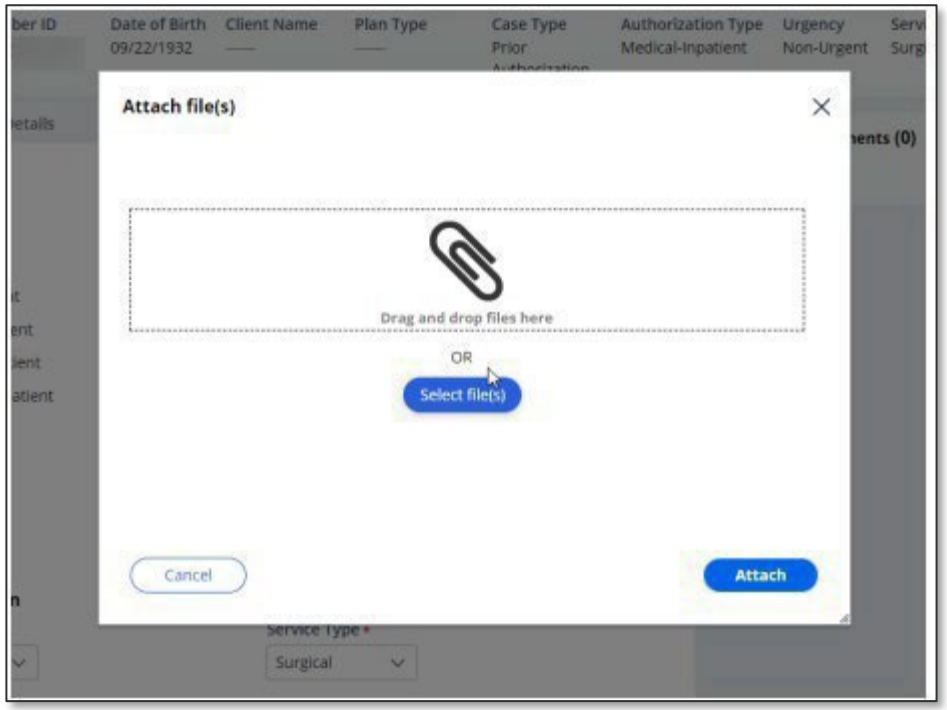
Youwill be taken to the welcome page of the Auth Automation Hub. Please review and click the Acknowledge button to continue.

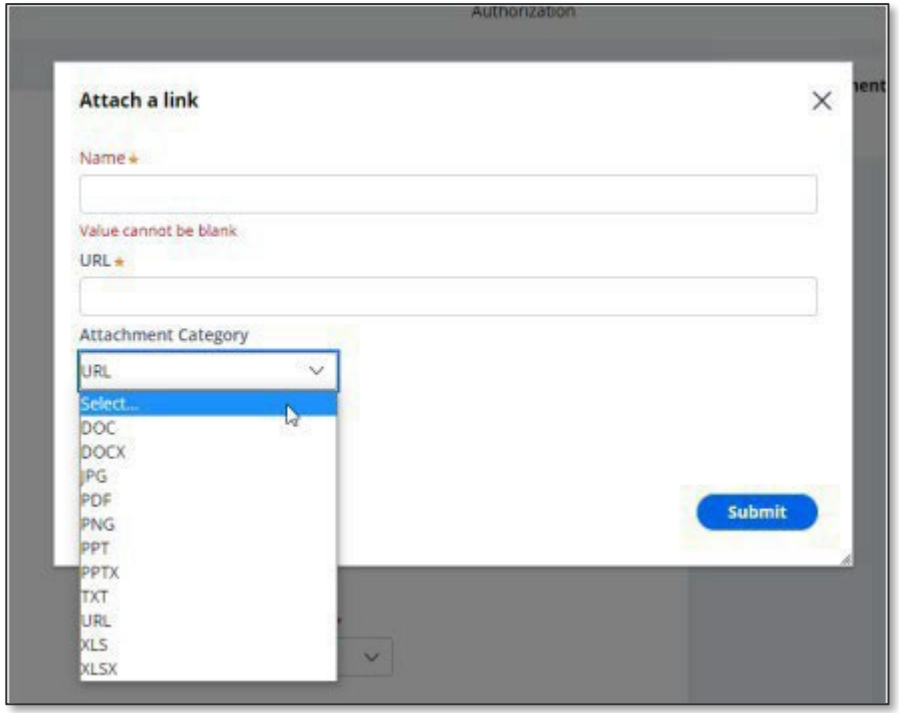


The **Recent Attachments** section will allow you to send attachments with an authorization by clicking on the **+icon**

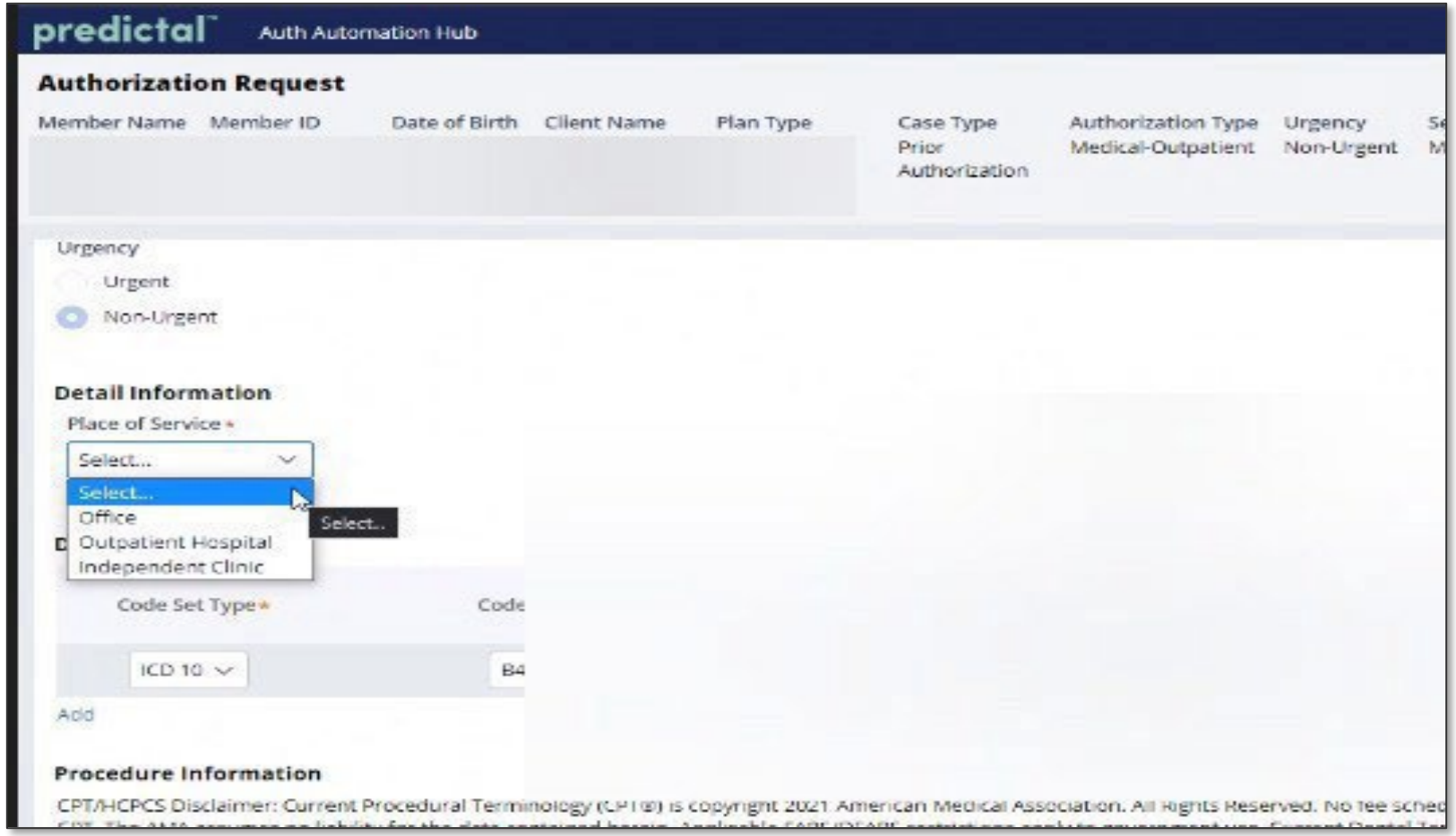


Youcan also attach a file or a URL in the **Recent Attachments** section.

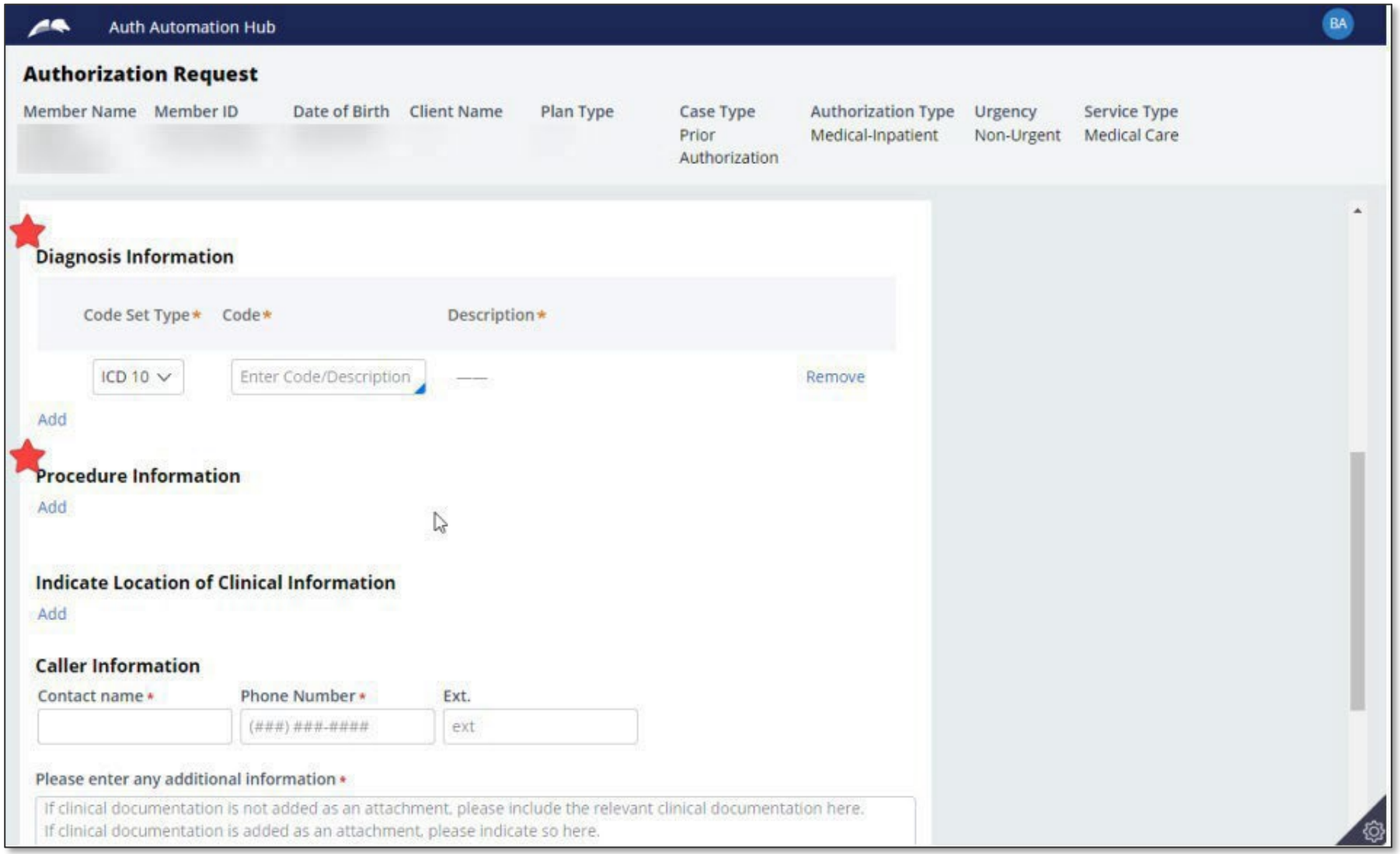




New to the outpatient workflow is the **Place of Service** field. Youwill need to select the correct place of service from the dropdown.

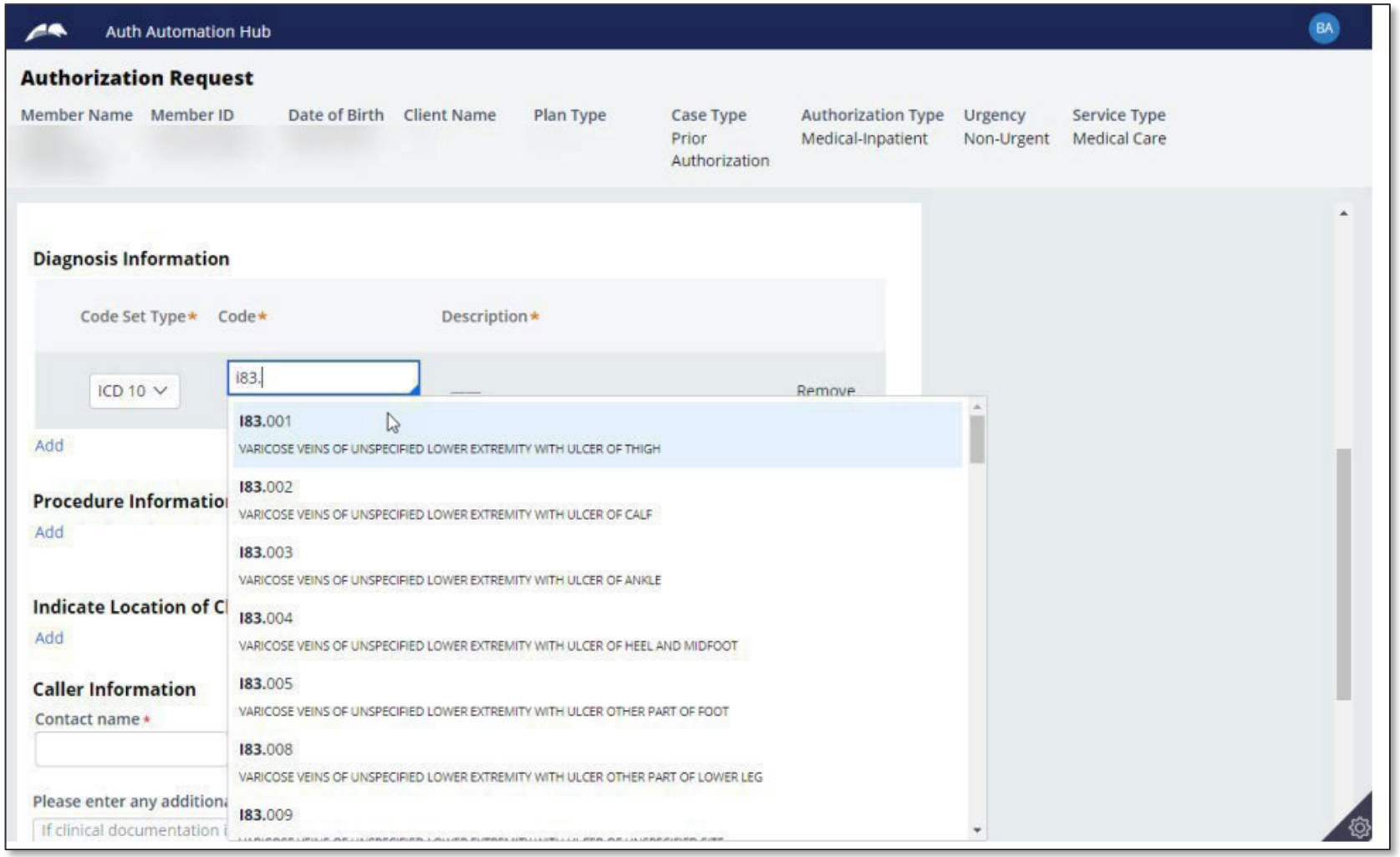


As you scroll down on the page, you will complete the **Diagnosis** and **Procedure** information.



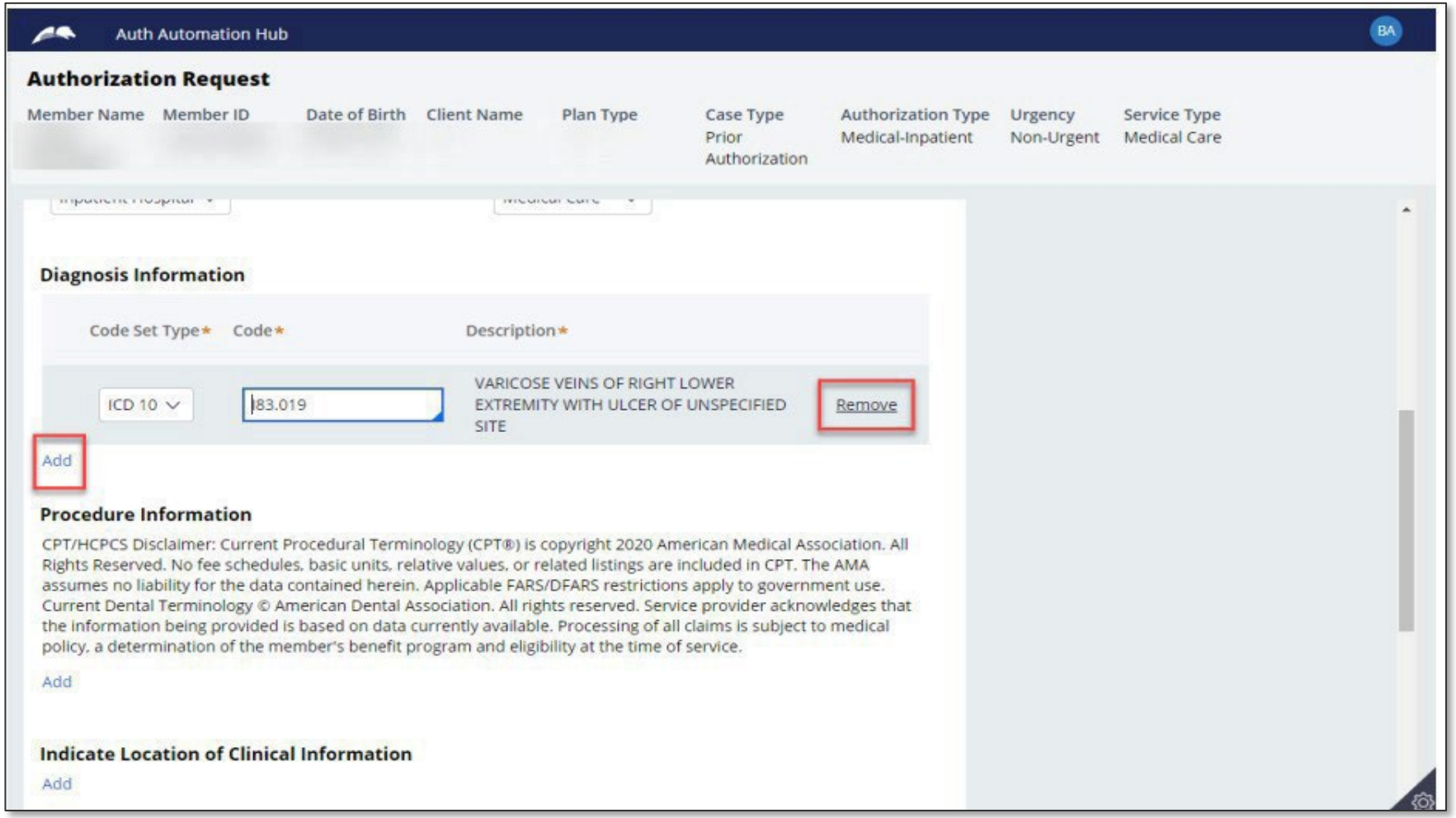
In the **Diagnosis Information** section – entering a partial diagnosis code or description will populate a list of codes for you to select from.

You must include the **decimal point** when entering your **diagnosis** code.



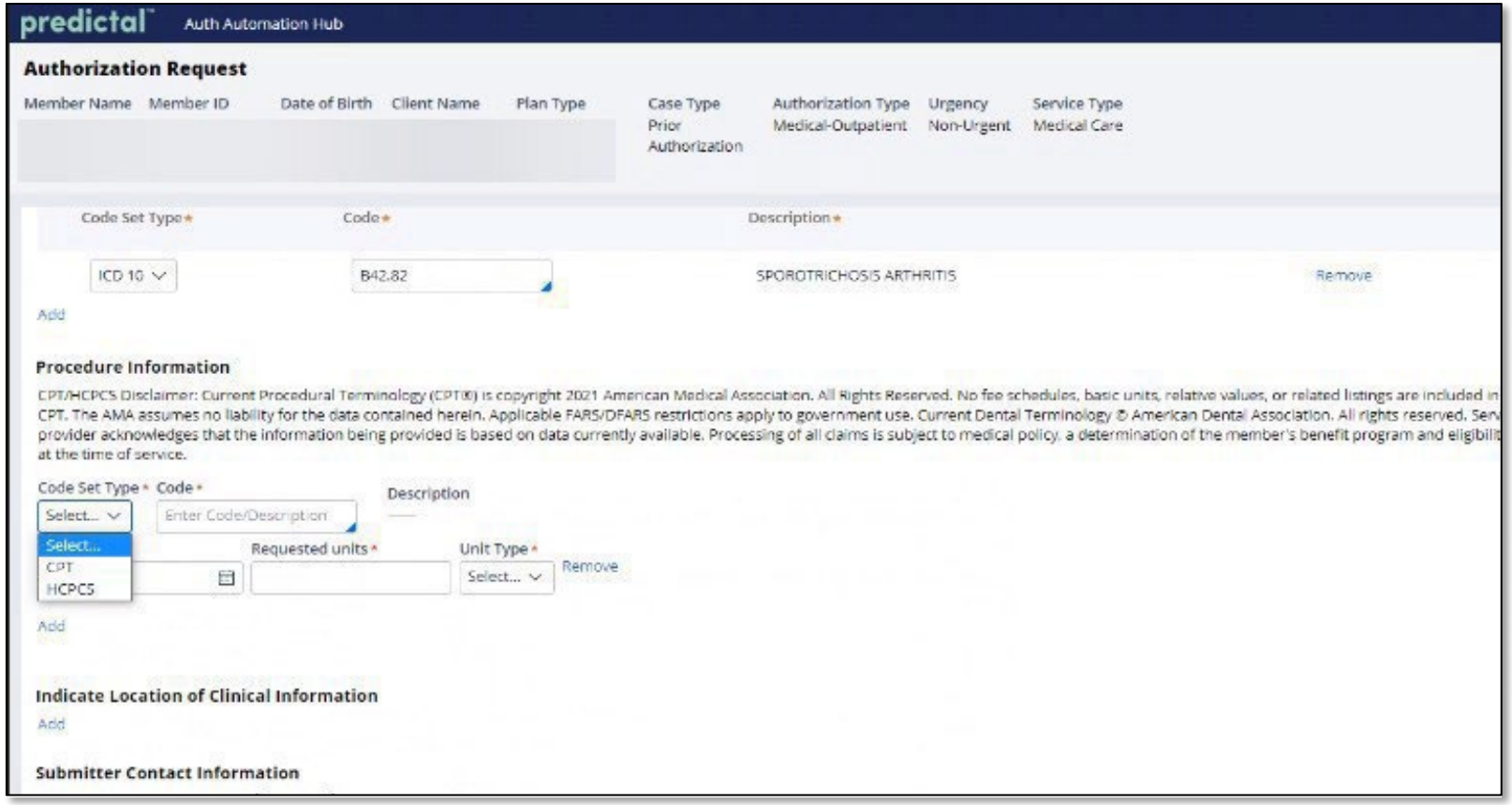
If you have entered an incorrect code, you can click the **Remove** link to delete that diagnosis from the request. Select the **Add** link to add additional diagnosiscodes.

NOTE: eviCore managed authorizations will only allow one diagnosis code to be added.



When entering the **Procedure** information, you **must** select the appropriate **Code Set Type**. If this is not selected, your procedure code will not befound.

NOTE: When entering an eviCore, or Helion managed authorization, you will not be asked for the procedure code until later in the workflow.

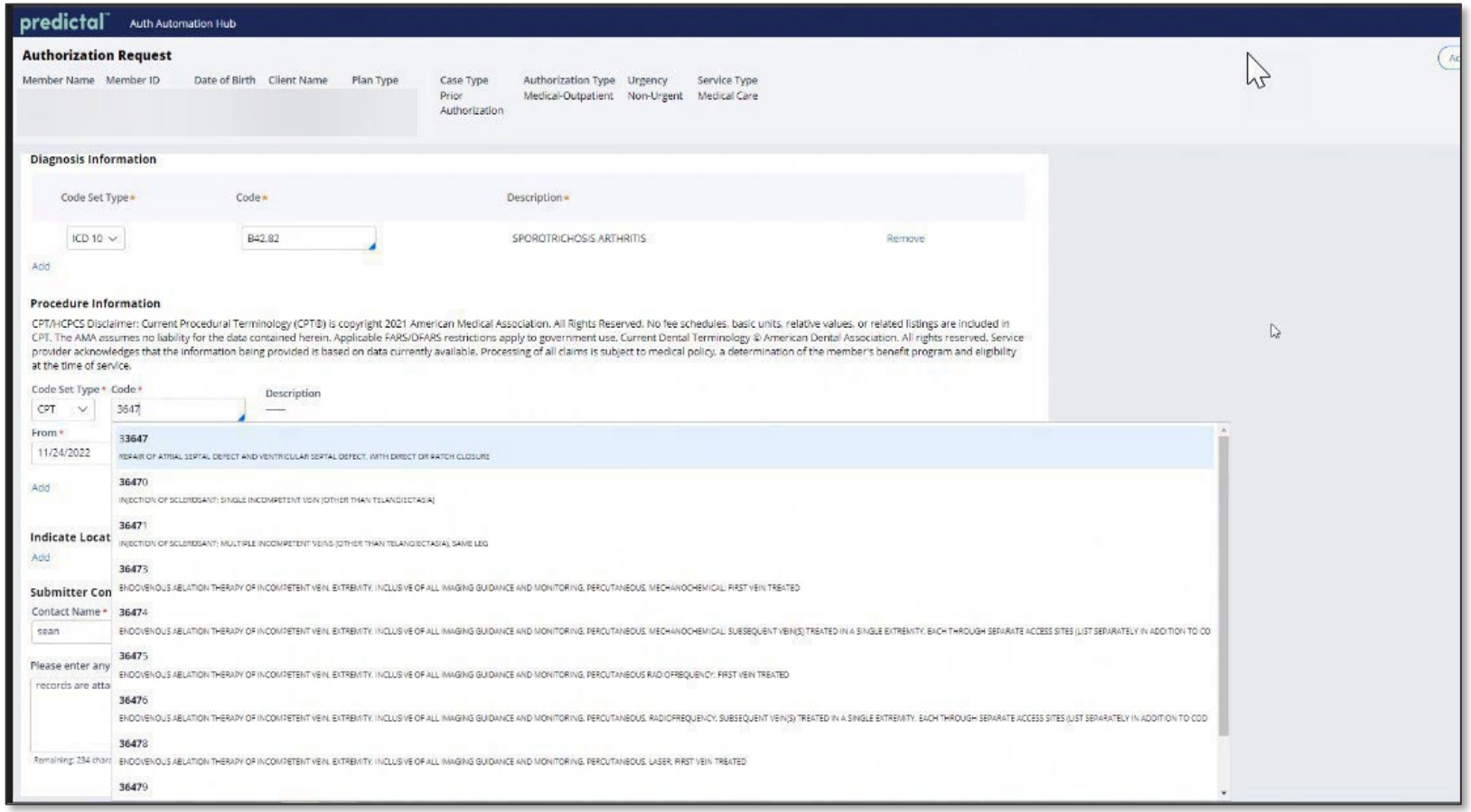


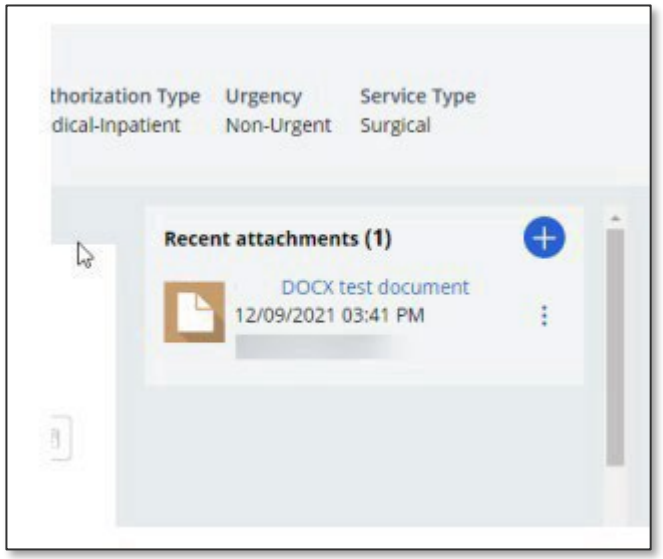
Once you have selected the **Code Set Type**, enter a partial procedure code or description to see a list of codes you can select.

Next, complete the **From** date, as well as the **Requested Units** and **Unit Type** fields.

Like the **Diagnosis** section, you can select **Remove** if you have entered something incorrectly. Click **Add** if you need to authorize more than one procedurecode.

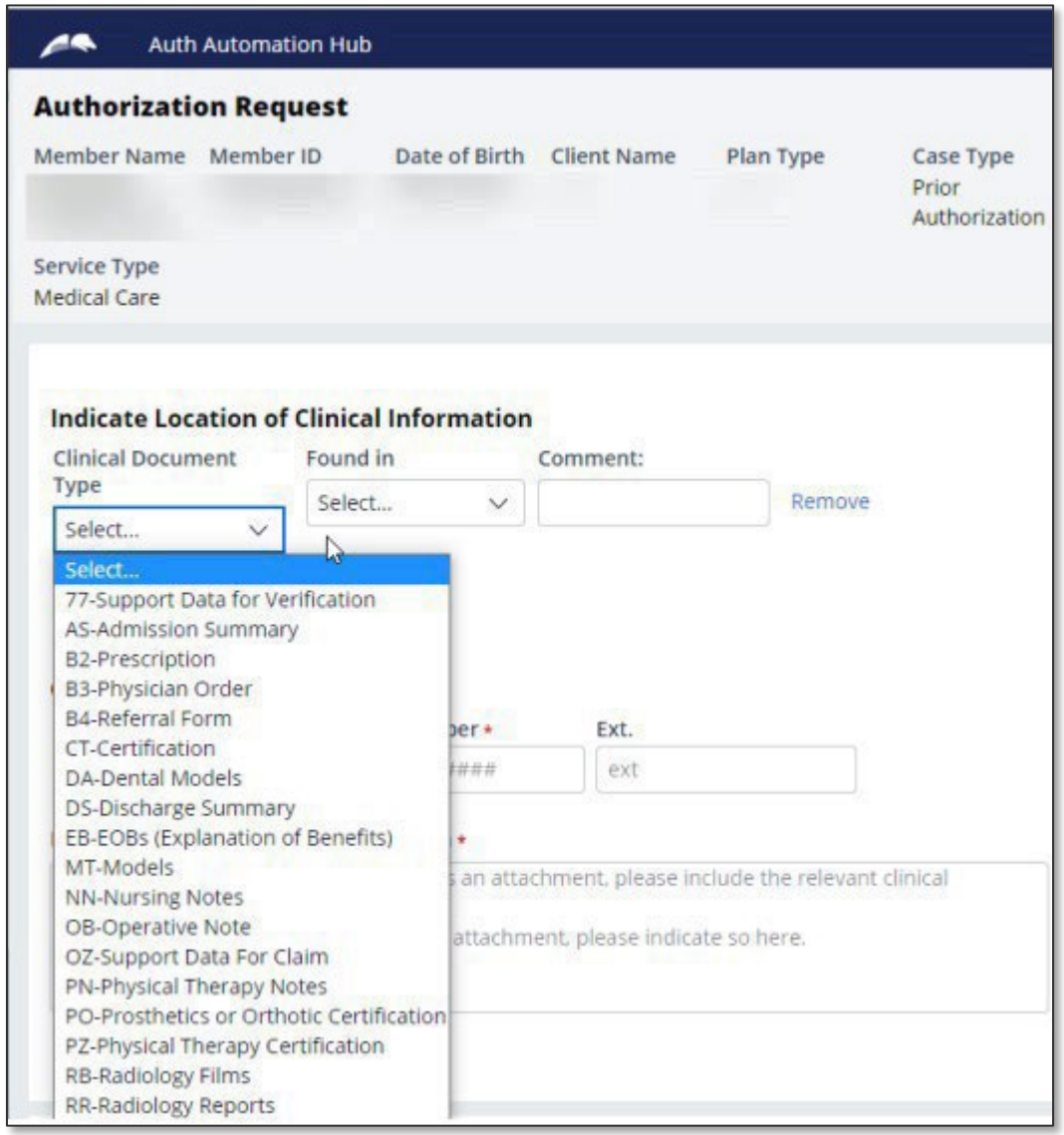
NOTE: There is no limit the number of procedure codes that can be added.





When a document has been attached in the **Recent Attachments** section, you should complete the **Indicate Locations of Clinical Information** section to provide additional information about the attachment such as:

- The type of attachment
- Select the attachment beingreferenced
- Enter any comments that will assist those reviewing the attachment in finding necessary information (For example – Clinical notes found on page 3 of attachment)



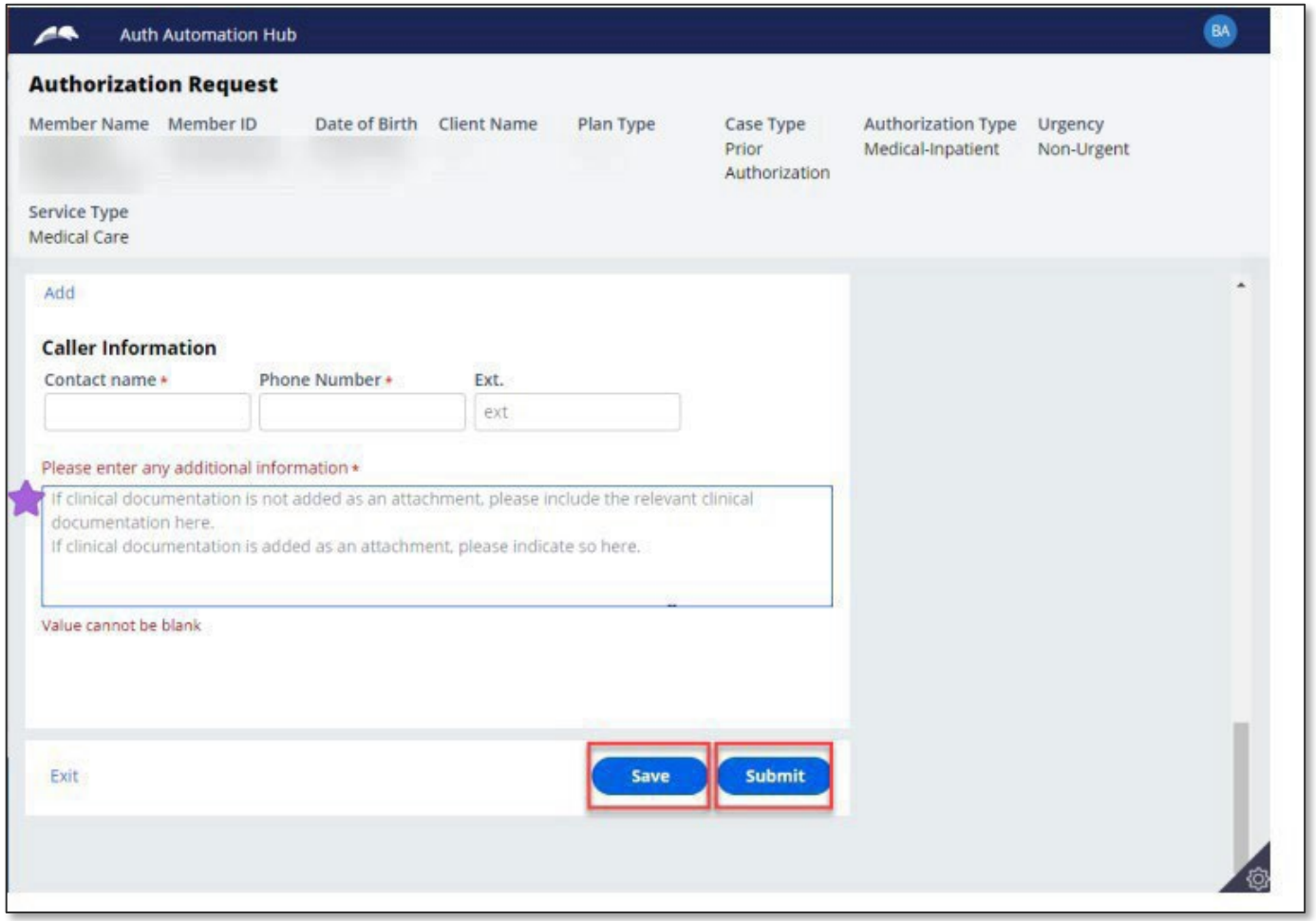
Completing the **Caller Information** sectionby:

- Noting any additional clinical information (there is a 255 character limit)
- If information isn't added in an attachment, include the necessary clinical information here
- If the clinical information is added as an attachment, please note that here (this is a mandatory field)

NOTE: The phone number field format is (XXX)XXX-XXXX. However, if you enter only the numeric portion, it will automatically format.

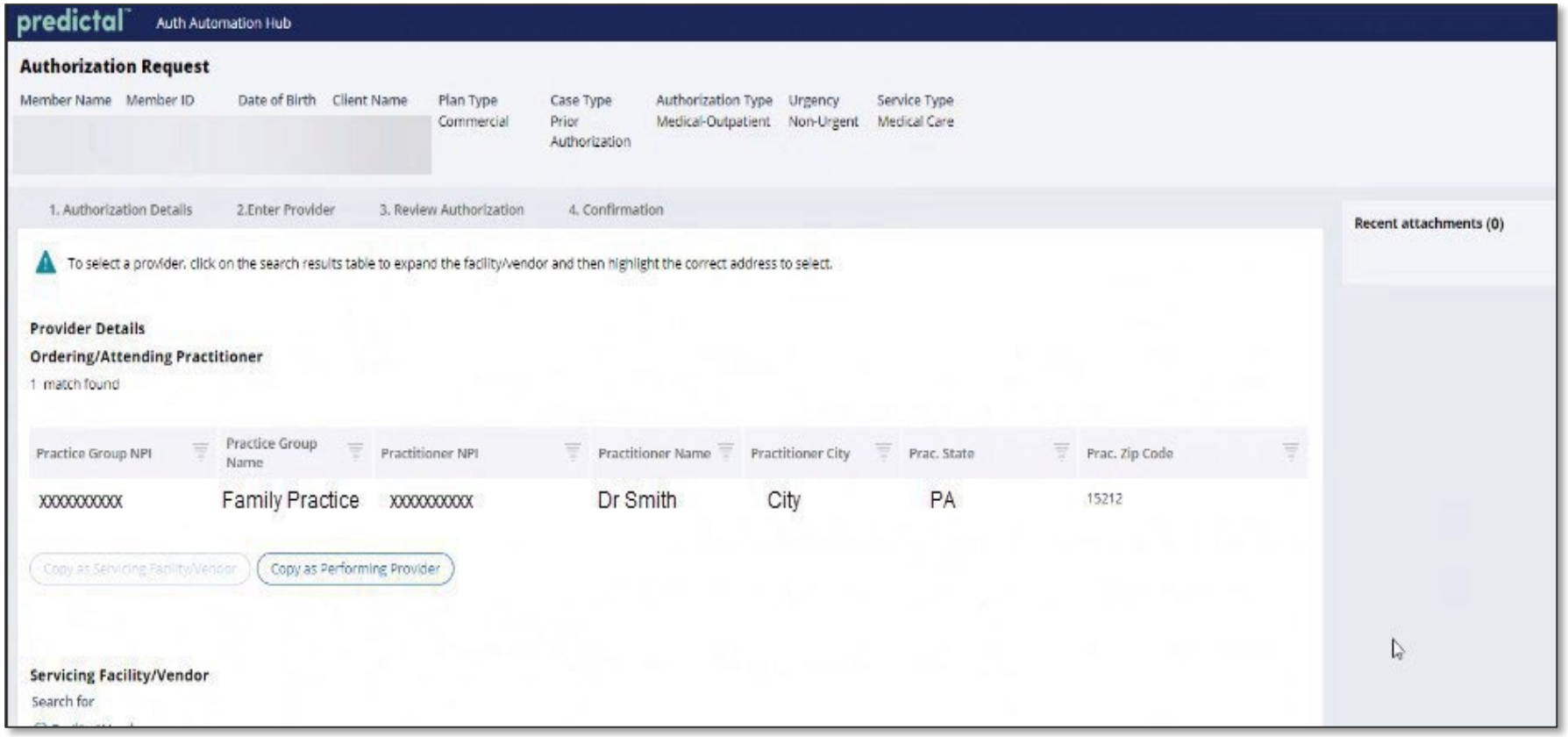
Click on **Save** if you are unable to complete the request.You will find the saved auth in the **Auth Log.**

When all fields arecomplete, click **Submit.**



The **Provider Details** page will automatically populate with the Ordering/Attending Practitioner that was entered in NaviNet.®

Here you will find the **Copy As Servicing Facility/Vendor** / **Copy As Performing Provider** link that will allow you to copy the **Ordering/Attending Practitioner** information into the **Servicing Facility/Vendor** or **Performing Provider Info.**

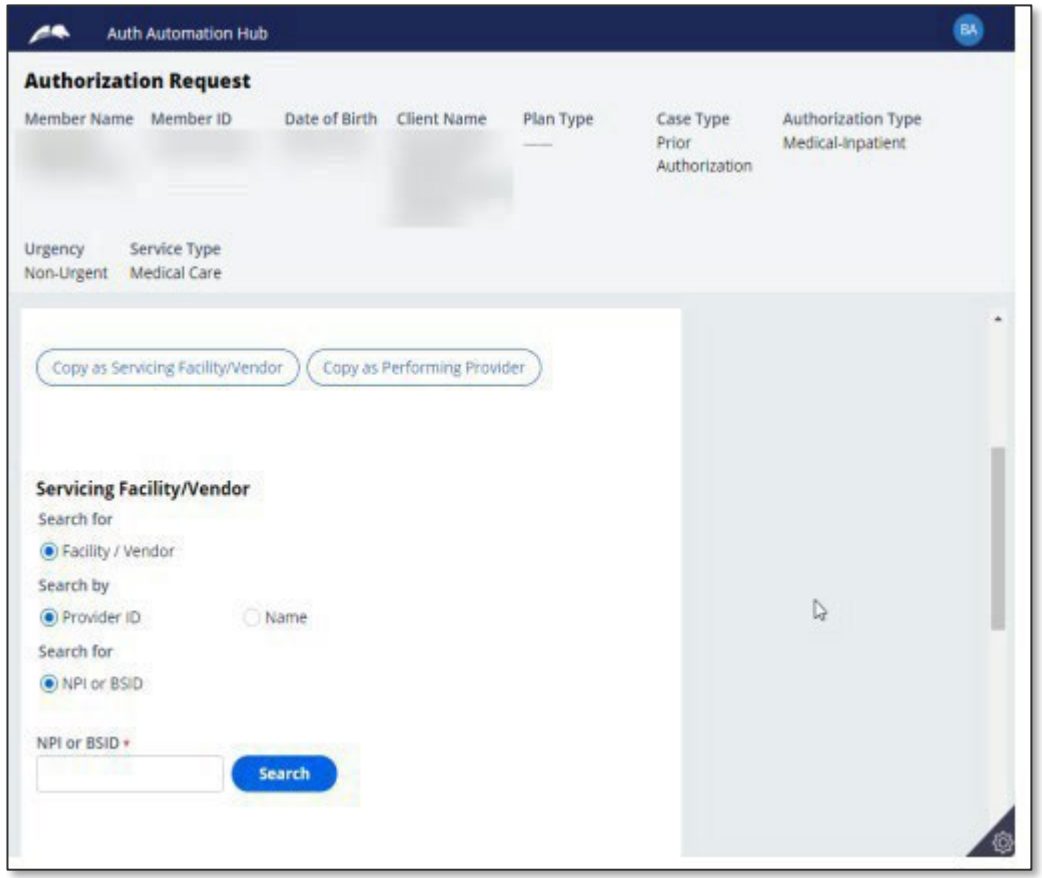


If you do not use the copy links, you can:

Search for the Servicing Facility/Vendorby:

- Provider ID (using NPI or BlueShieldID)
- Name

This is a mandatoryfield.



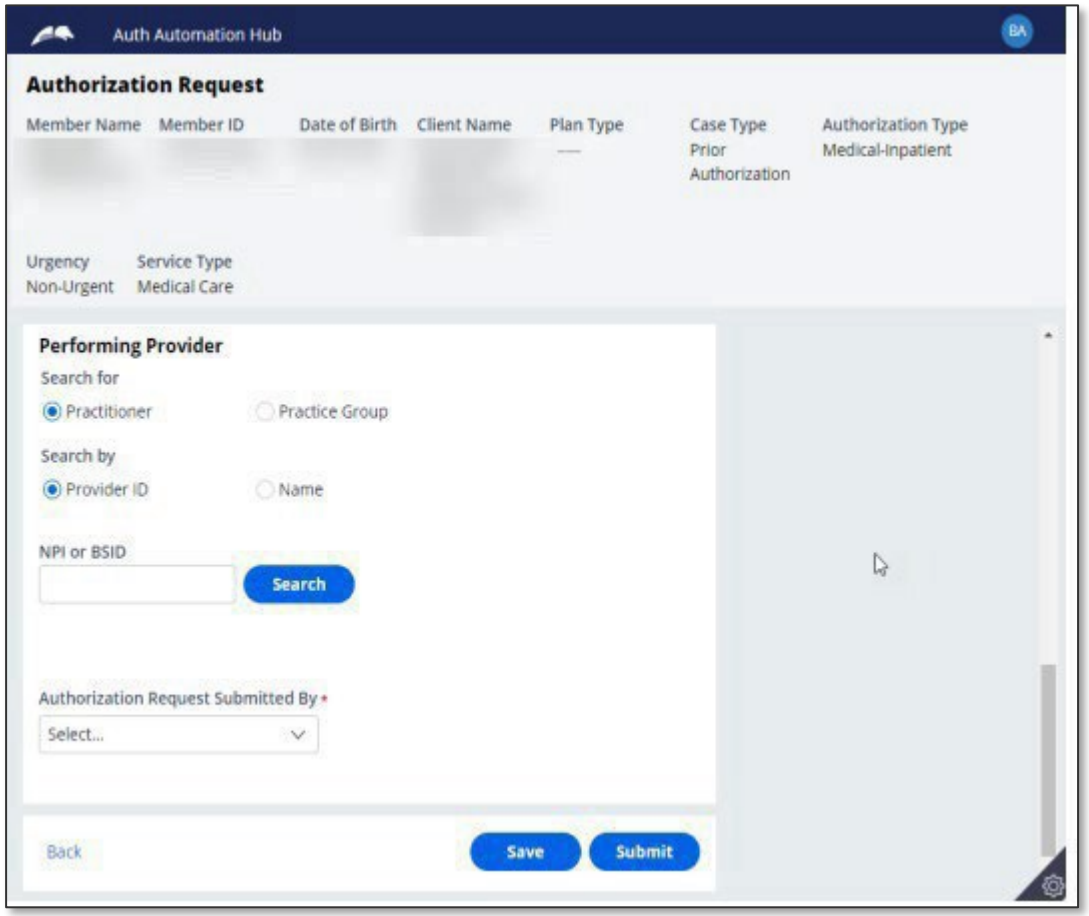
Search for the Performing Providerby:
Practitioner using:

- Provider ID (using NPI or BlueShieldID)
- Name

Practice Groupusing:

- Provider ID (using NPI, BlueShield ID or TaxID)
- Name

This field is **not** mandatory.



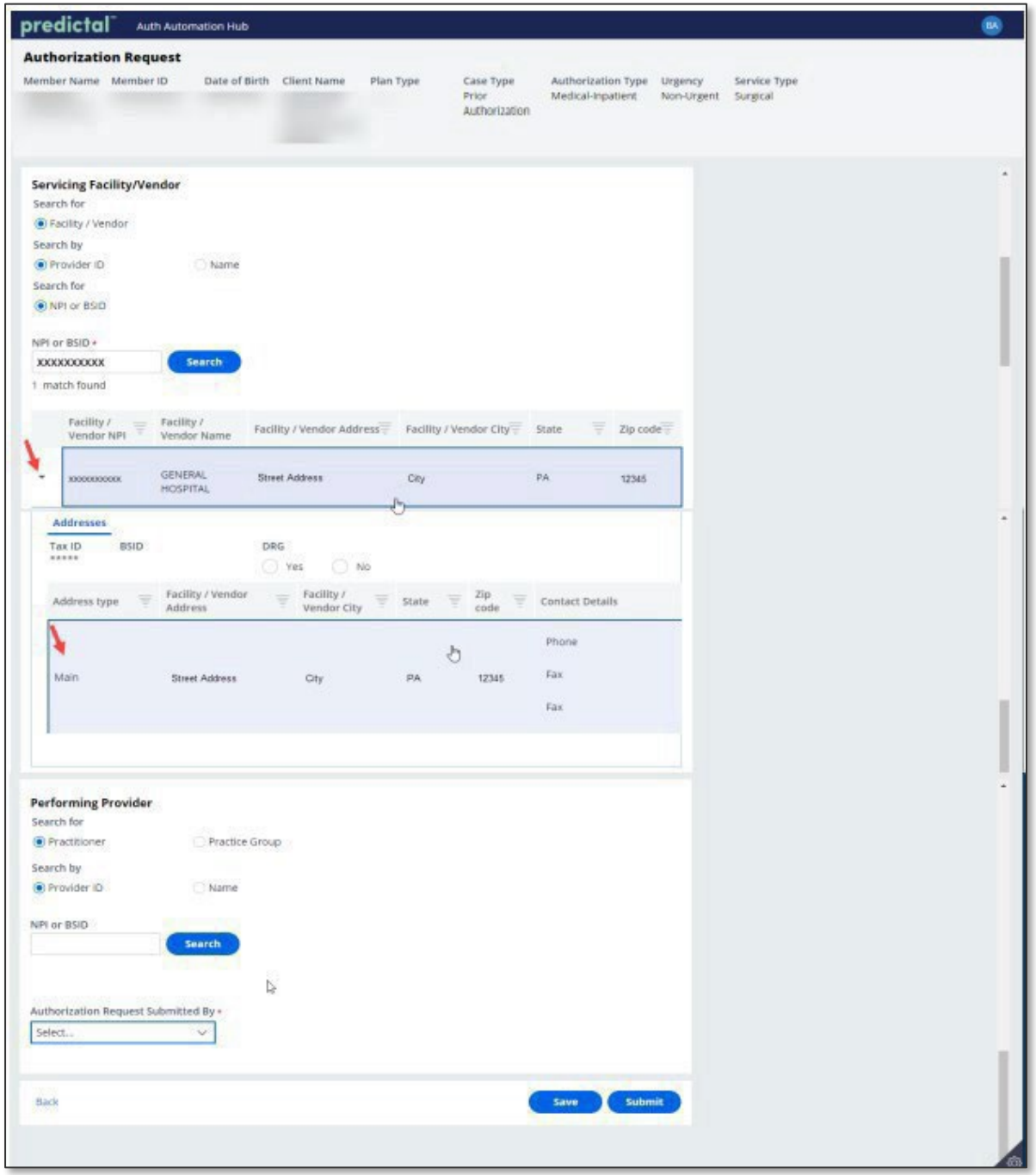
When results return, to select the appropriate facility/vendor, you will need to complete the following steps to select the specificfacility/vendor.

- Click on the **widget** to highlight the **facility/vendor** and open the **additional information** about the facility/vendor.

- Click on the **address line** to highlight the address.

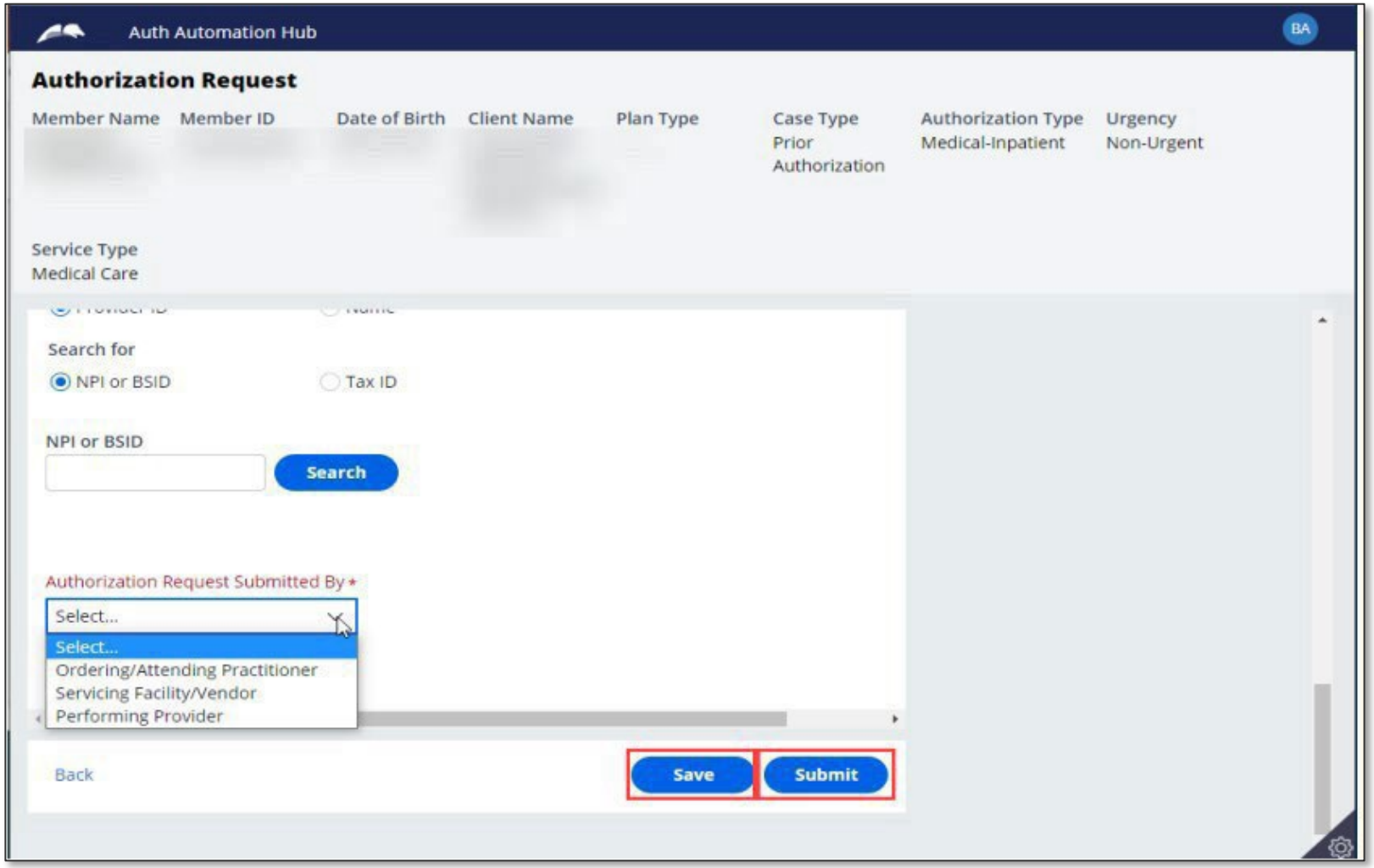
Doing this will select the facility/vendor that will be submitted with the authrequest.

Youcan then move on to the next field.



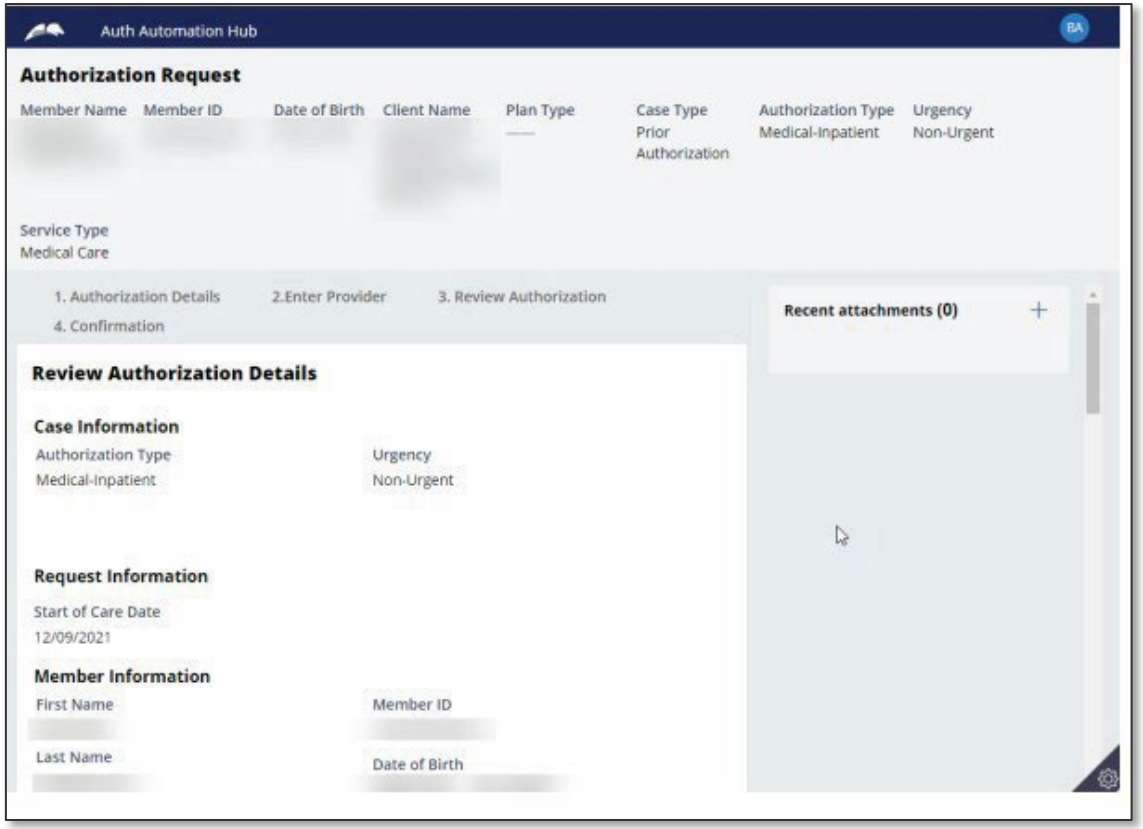
The **Authorization Request Submitted By** field is a new required field.

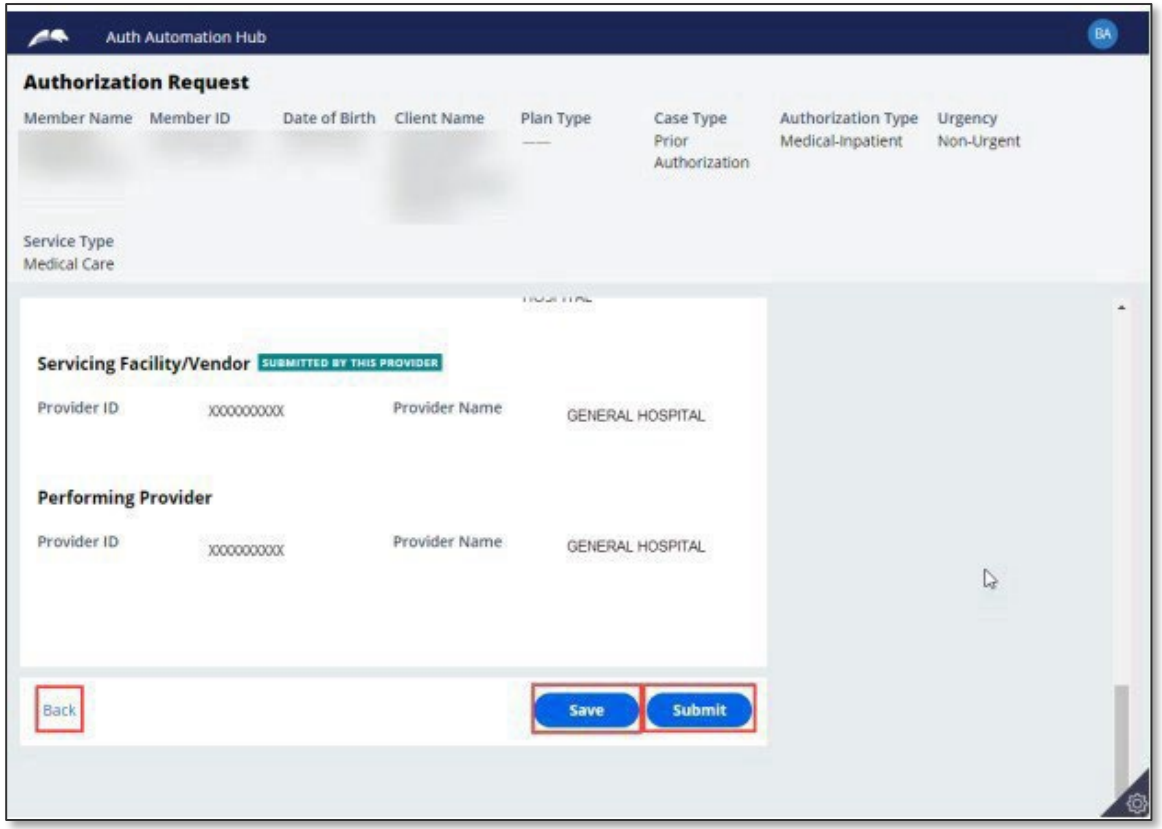
Users can **Save** if you're not ready to submit or click **Submit** when all information has been completed.



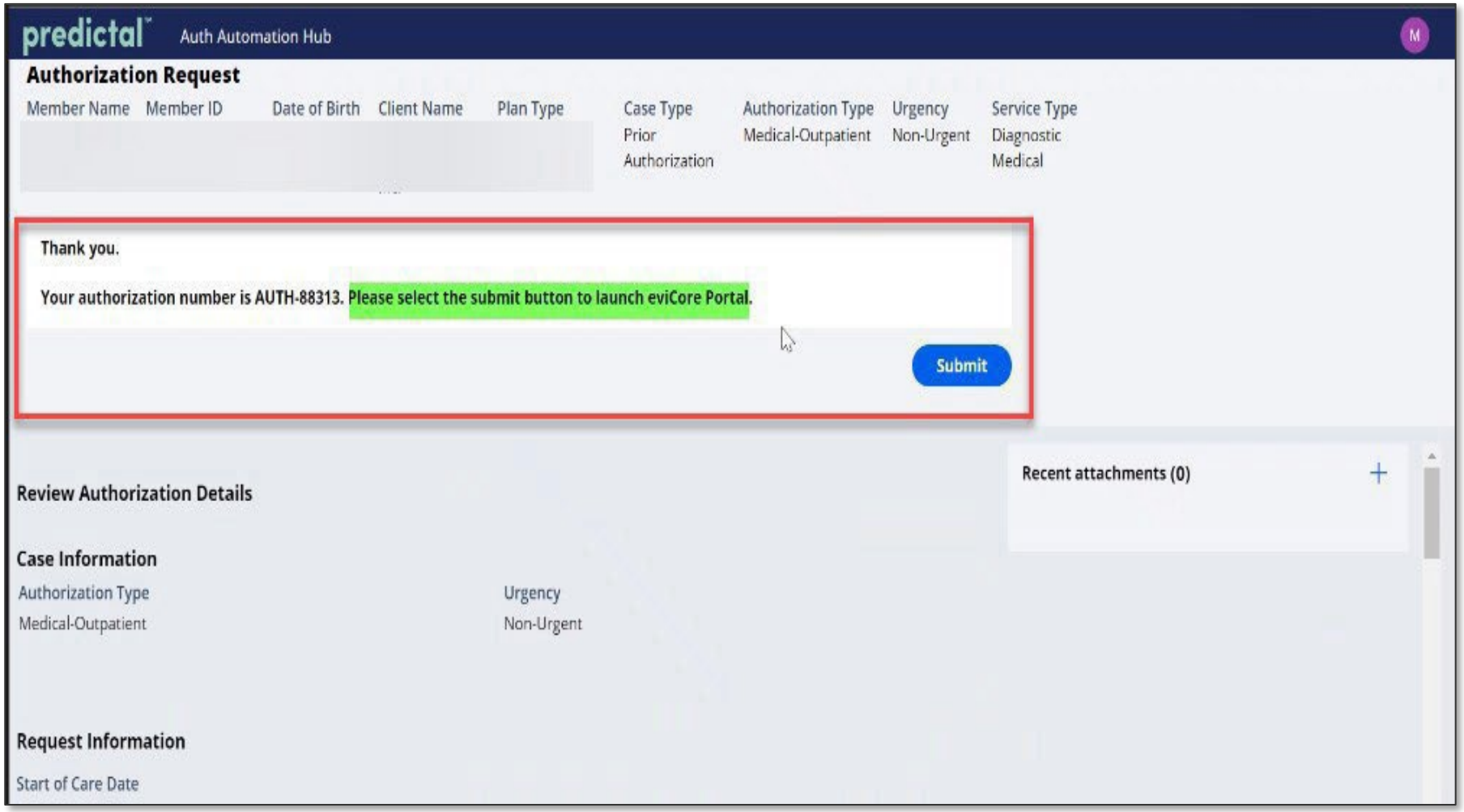
After submitting the **Provider Details**, users will be taken to the **Review Authorization Details** page to review all information submitted to this point.

Scrolling to the bottom will allow users to **Save or Submit**. There is also a **Back Button** that will allow users to go back and make any corrections to information that is incorrect.

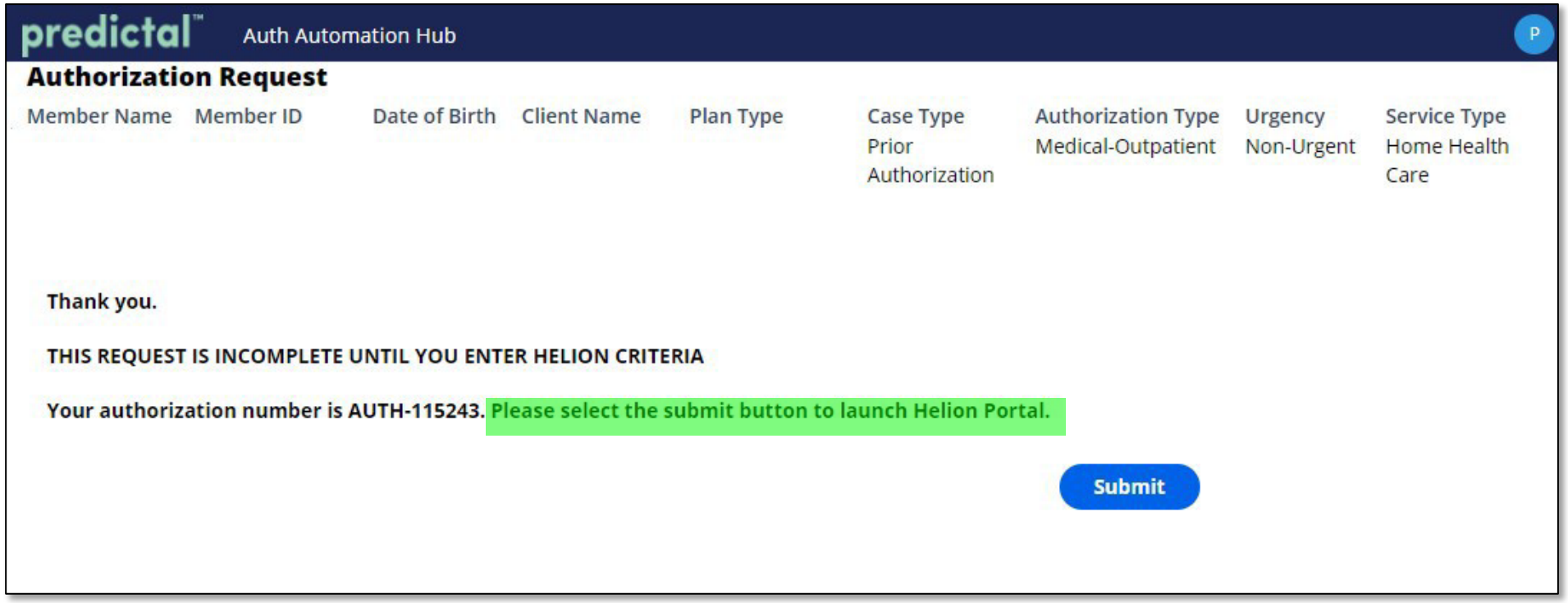




Please note: When submitting an **eviCore-Managed Authorization**, be sure to click **Submit** to launch to the eviCore portal.

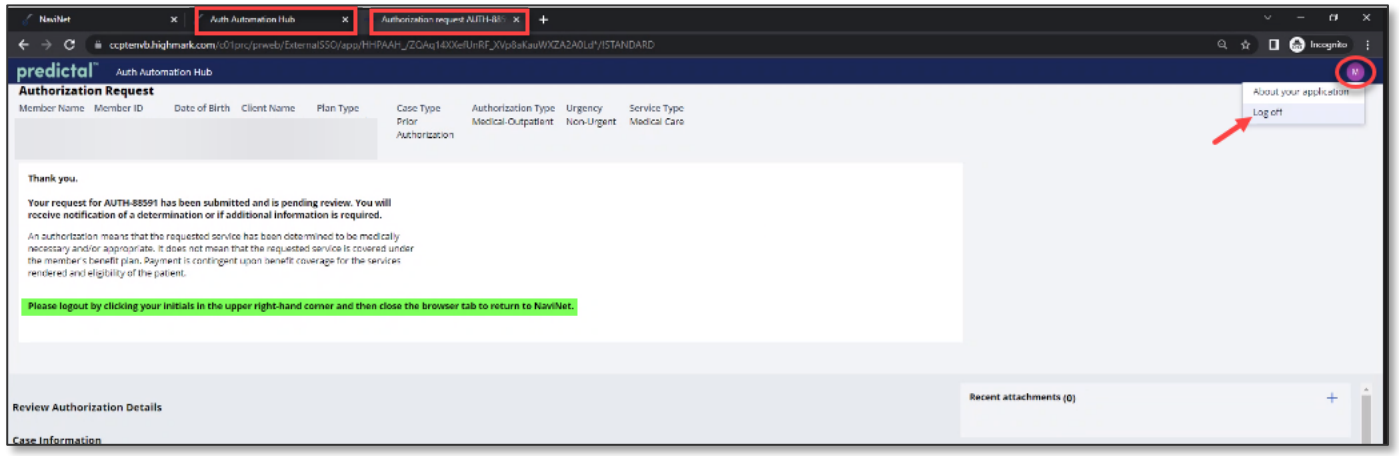


Please note: When submitting Home Health/Hospice, or certain outpatient therapy requests, be sure to click **Submit** to launch to the Helion Portal.



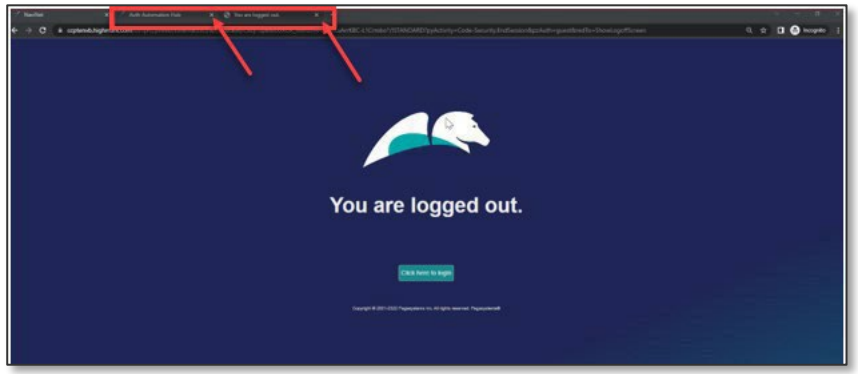
When the authorization is submitted, a confirmation will be displayed on the page with the **Authorization Number**.

Please note the message to log out to return to NaviNet. When submitting the authorization request, you may notice TWO tabs opened in your browser.

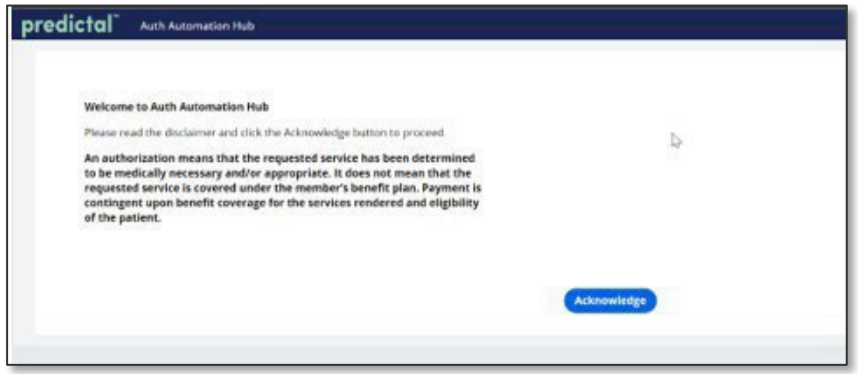


First, users should click on their initials in the upper right corner and select the Log off option.

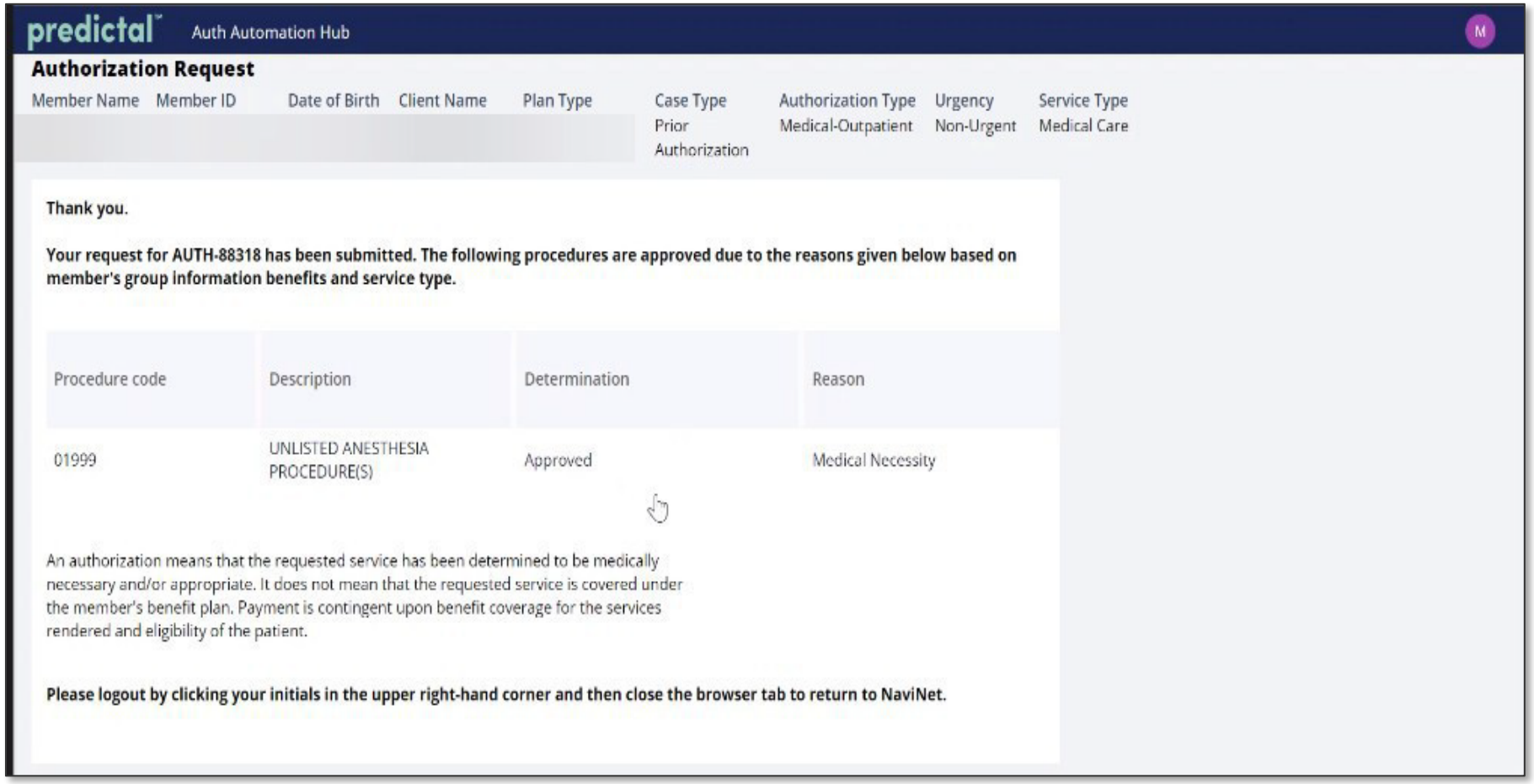
Second, close both tabs to return to NaviNet.



When starting a new authorization, theAcknowledgement screen should be displayed.



The screen below will be displayed when an authorization is auto-approved.

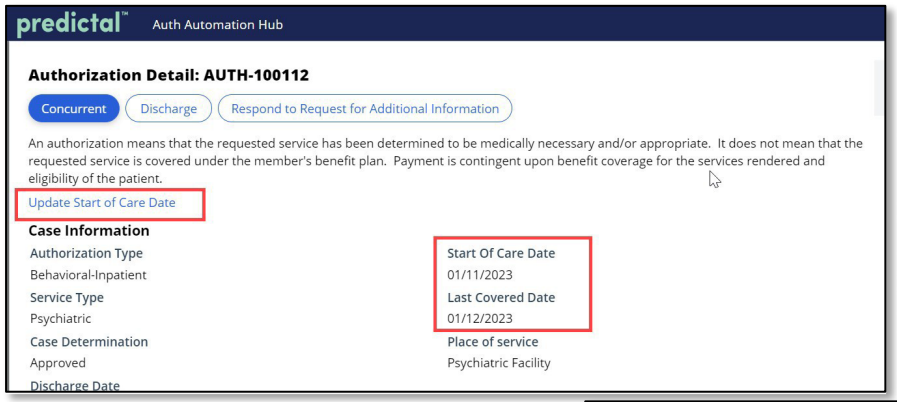


NaviNet® Provider Portal Authorization Inquiry

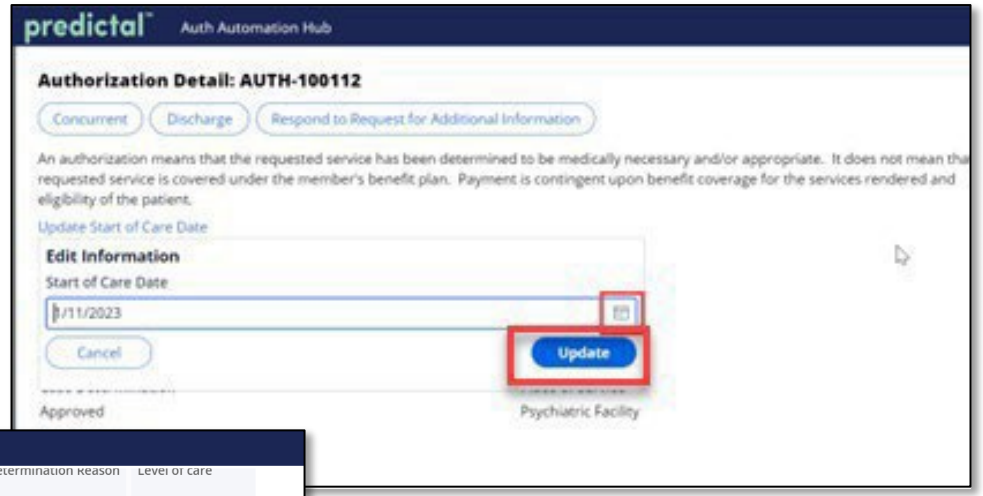
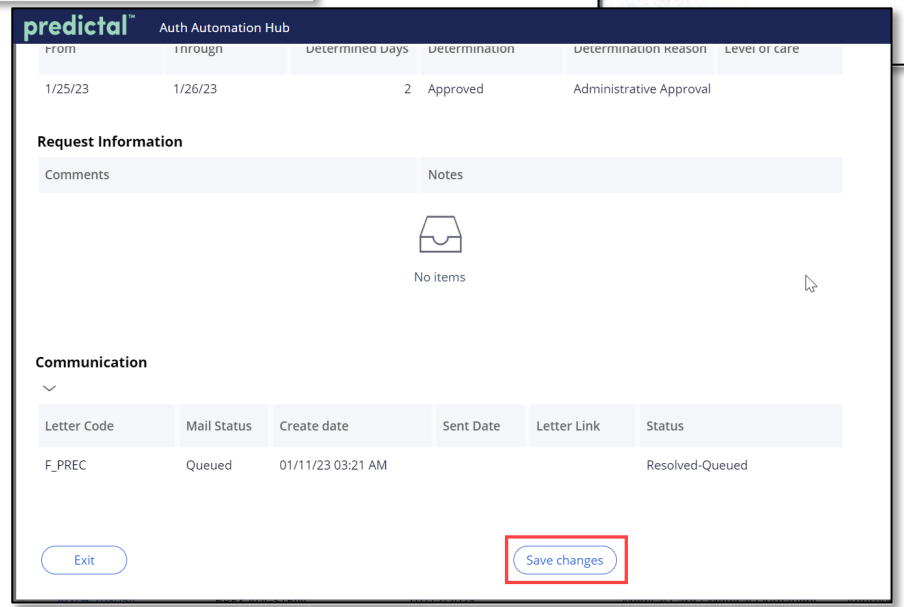
Toupdate the Start of Care Date after the authorization is submitted:

1. Go to **Auth Inquiry**
2. Click the **Update Start of Care Date** hyperlink.
3. Click the calendar in the **Edit Information** field, select the appropriate Start of Care Date, and click **UPDATE**.
   IMPORTANT: This date must be within 7 days prior to the original Start of Care Date that was selected or within 30 days in the future of the original Start of Care Date.
4. Save your changes.

Step 1



Step 2



Step 3