Utilizing the Provider Portal Search Tool

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HIGHMARK. WHOLECARE.

Accessing the Search Tool

- Utilize the link below for direct access to the Portal Search Tool:
  - https://HighmarkWholecare.com/Authorization/ProcedureCodeLookup

- Enter your username and password when directed
  - This is your assigned Navinet ID and Password
  - If you do not have a Navinet ID and Password, have your group
    - administrator contact Navinet to request
  - Please note you must be a PAR provider to utilize Navinet

Medicaid Disclaimers

- At the top of the page, you will notice all Medicaid disclaimers are listed for review

For PA Medicaid

The following items always require an authorization:

Inpatient Services

- Hospital inpatient admissions
- All other inpatient admissions (e.g. acute, skilled nursing facility, and rehabilitation)
- Services rendered at or provided by a non-par provider
- Covered services that do not have a fee attached

Outpatient Services

- Potentially experimental, investigational or cosmetic services
- Home Health Care
- Prosthetics
- Power Wheelchairs
- Hospice Services
- Radiology Management
  - Link to NIA
- Sterilization/Abortion Services
  - Please contact Adagio
- Services rendered at or provided by a non-par provider
- Covered services that do not have a fee attached

Medicare Disclaimers

- Below the Medicaid disclaimers, you will notice all Medicare disclaimers are listed for review

For PA Medicare

The following items always require an authorization:

Inpatient Services

- Hospital inpatient admissions
- All other inpatient admissions (e.g. acute, skilled nursing facility, and rehabilitation)
- Services rendered at or provided by a non-par provider
- Covered services that do not have a fee attached

Outpatient Services

- Potentially experimental, investigational or cosmetic services
- Home Health Care
- Prosthetics
- Power Wheelchairs
- Partial Hospitalizations for Behavioral Health
- Radiology Management
  - Link to NIA
- Services rendered at or provided by a non-par provider
- Covered services that do not have a fee attached

Medicare Disclaimers

- Below the Medicaid and Medicare disclaimers, you will notice all general disclaimers are listed for review

Attention:

Non covered benefits will not be paid unless special circumstances exists. Always review member benefits to determine covered & non-covered services.

Authorization does not guarantee payment of claims. A service or supply will be reimbursed by Highmark Wholecare only if it is medically necessary, a covered service, and provided to an eligible member

The authorization process continues to be subject to the maximum unit and program exception policies

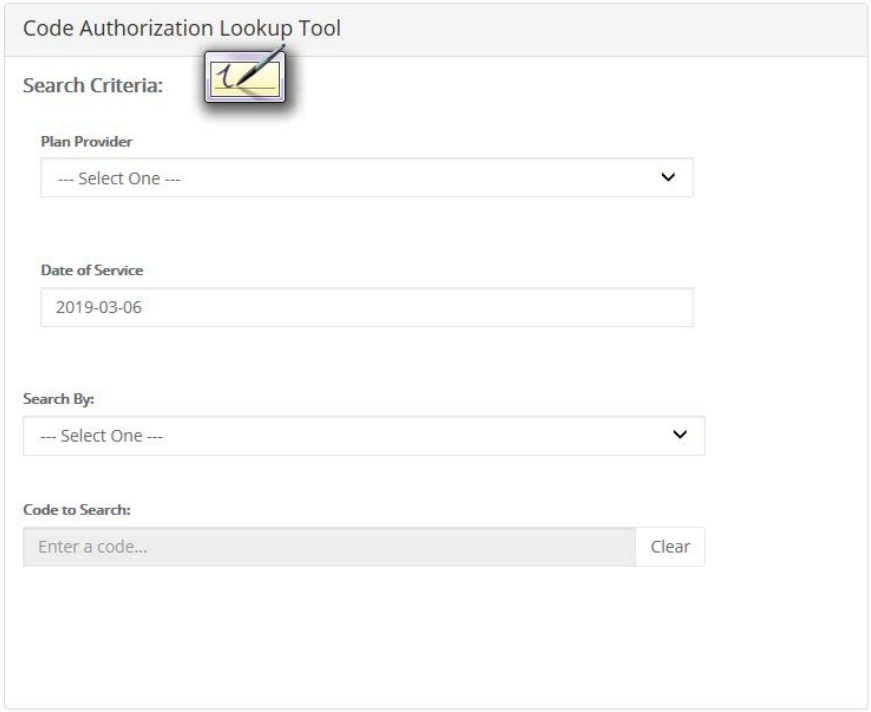
Last Updated is a new feature to the search tool effective 9/1/18. All codes will default to a date through 9/25/2018 in this field until any future changes are made. Any changes after 9/26/18 will be reflected in this field. The date is used to reference the date of service. Authorizations are required or not required for that date of service. For example, if the Last Update field states 12/1/18 then the stated authorization requirement would be in effect for date of service on or after that date.

Please reference the resources listed on the below sites for any authorization status information for dates of service prior to 9/26/2018

Medical Provider Updates
Medicare Provider Updates

Portal Search Tool

- The Portal Search Tool (Code Authorization Lookup Tool) is located below all of the disclaimers

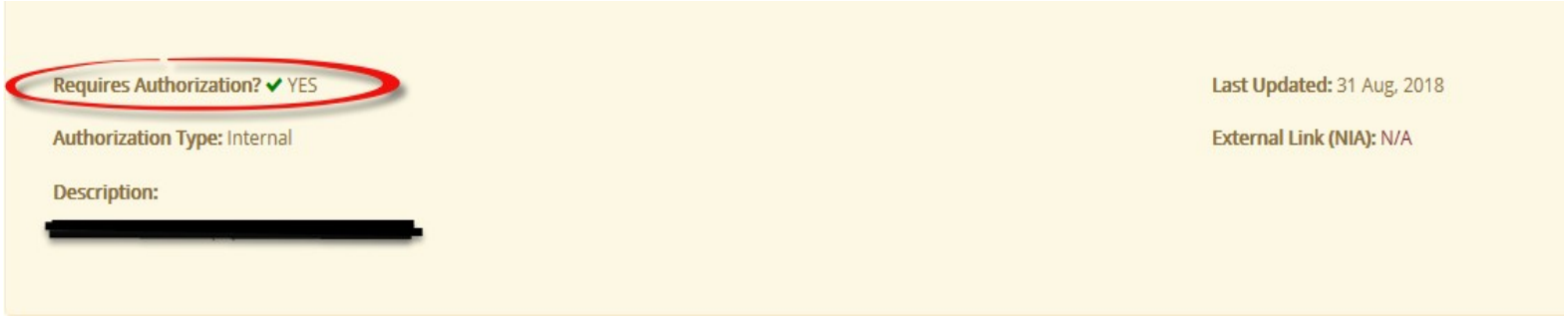


Utilizing the Portal Search Tool

- In order to use the search tool, all sections of the search criteria must be filled out
  - Plan Provider
    - PA Medicaid or PA Medicare
  - Date of Service
    - Must be a date after 9/26/2018
  - Search By
    - CPT, HCPCS, or ICD10 Code
  - Code to Search
    - Enter the code in which you wish to search here
- Once all criteria sections are filled out and a code has been selected, the authorization requirements will appear for that specific code

Authorization Required

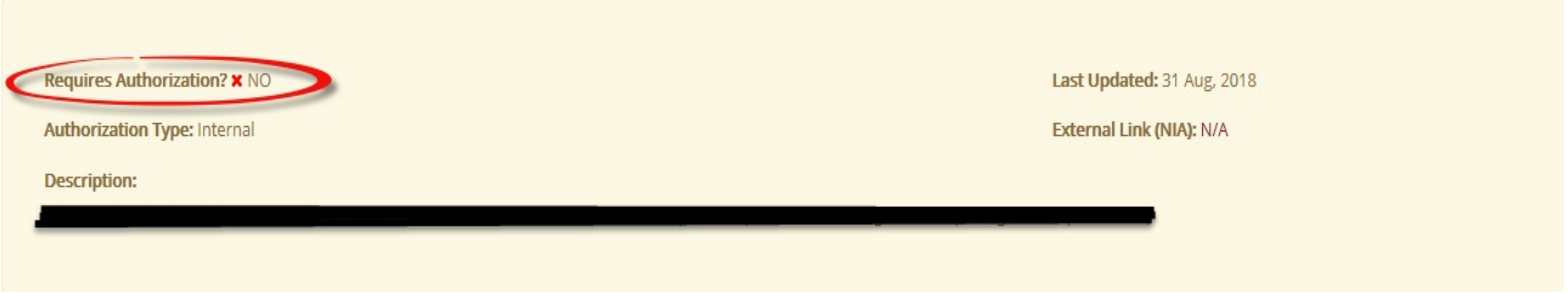
- Codes that require an authorization will state an authorization is required
- Any code requiring an authorization will say YES next to the box “Requires Authorization?”



- Internal authorizations are reviewed within Highmark Wholecare
- External authorizations are reviewed by an outside vendor (such as NIA or Adagio)

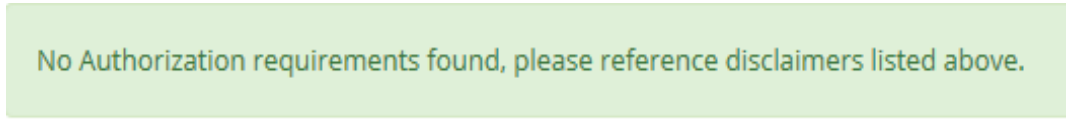
Authorization Not Required

- Codes that do not require an authorization will state an authorization is NOT required
- Any code not requiring an authorization will say NO next to the box “Requires Authorization?”



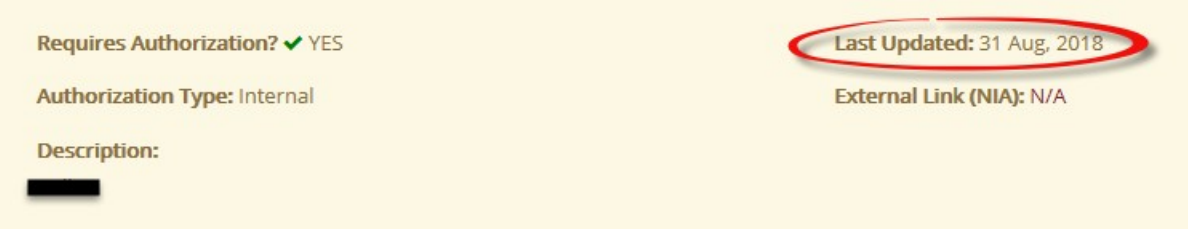
Reference Disclaimers

- If a code may fall under any of the disclaimers a default message will appear referring the provider and staff to review disclaimers



- If this message appears and the code falls under a disclaimer, then an authorization would be needed
- If this message appears and the code does not fall under a disclaimer, then an authorization would not be needed

New Feature: Last Updated



- Last Updated is a new feature to the search tool effective 9/1/18.
- All codes will be dated through 9/25/2018 because updates to the tool were made during this window
- Any changes after 09/26/2018 mean that the status of the code has changed.
- The date is used to reference the **date of service**.
- Example, if the Last Update field states 12/1/18 then the stated authorization requirement would be in effect for date of service on or after that date

New Feature: Last Updated Cont.

- *Please reference the resources listed on the below sites for any authorization status information for dates of service prior to 9/26/2018:*

Medicaid:

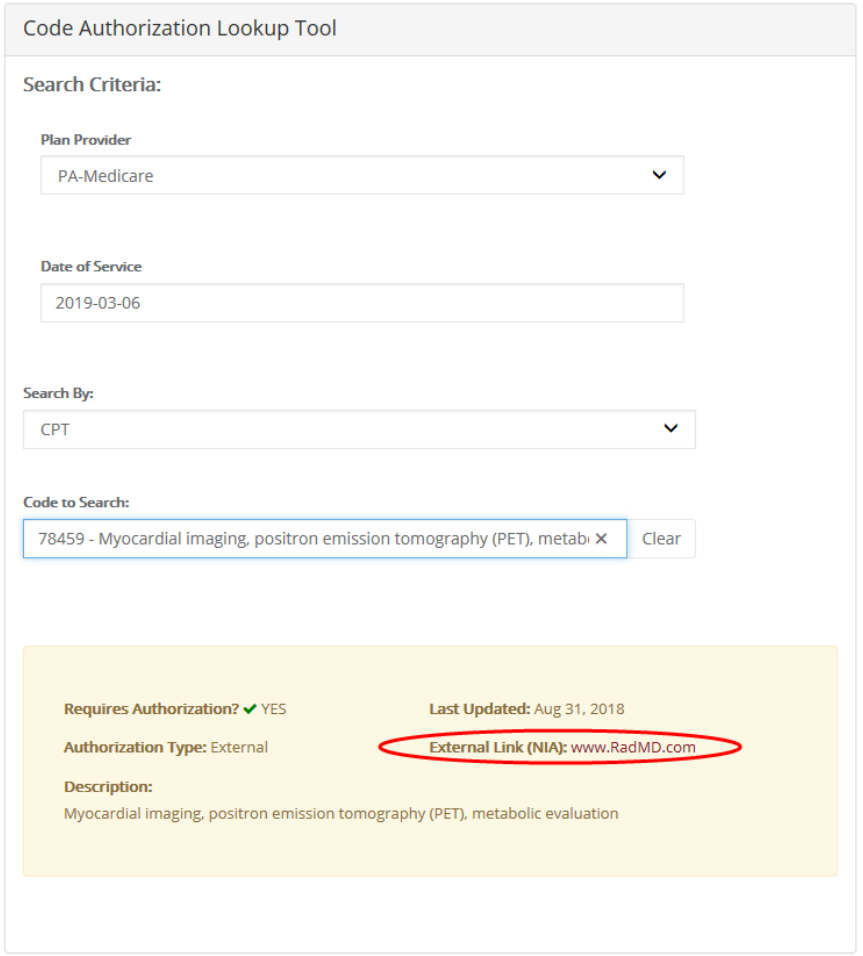
- https://www.HighmarkWholecare.com/provider/medicaid- resources/medicaid-provider-updates

Medicare:

- https://www.HighmarkWholecare.com/provider/medicare- resources/medicare-provider-updates

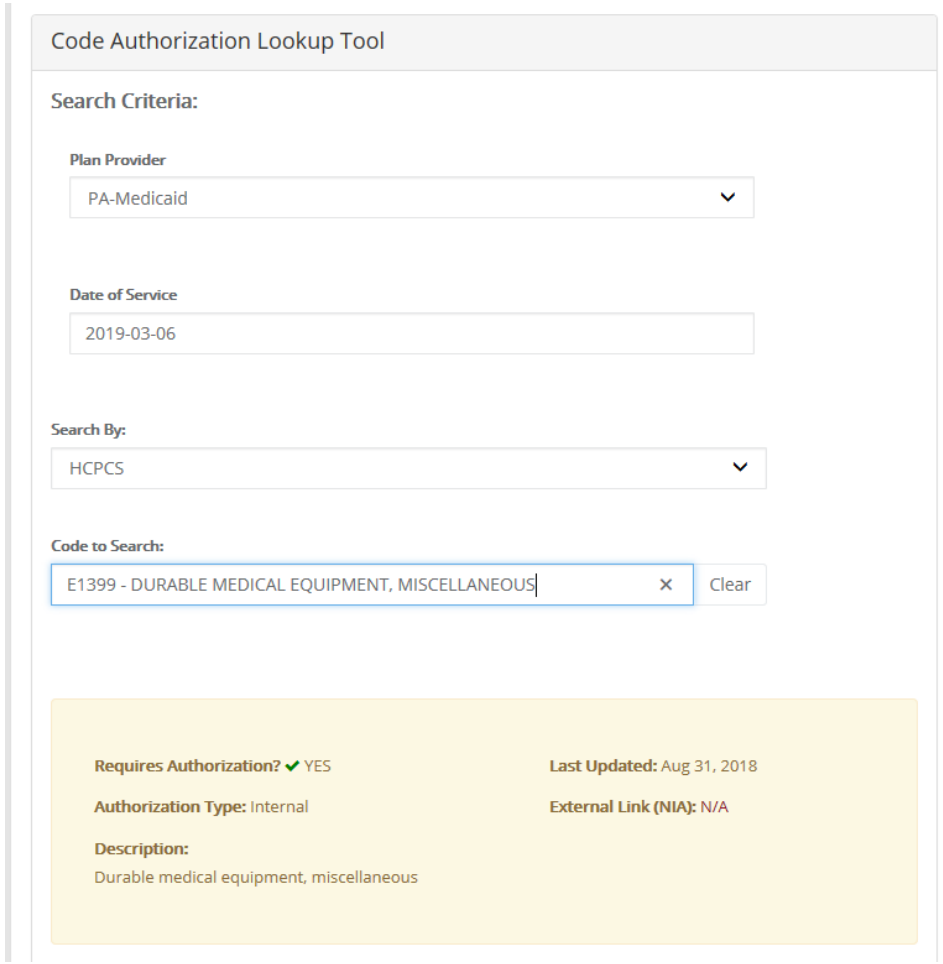
Extra Link

- *If the code is one that is reviewed by an outside vendor, the external link should be listed in the authorization requirements box when searched*



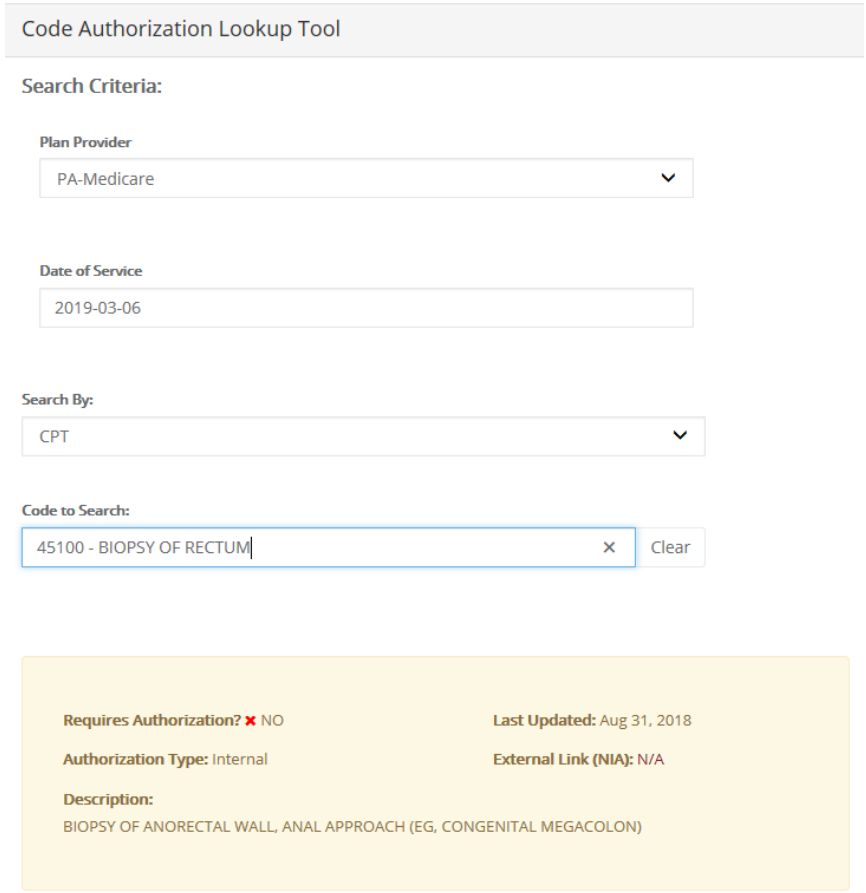
Authorization Example One

- Medicaid LOB
- Code E1399 (miscellaneous DME code)
- Authorization IS REQUIRED
- Internal Authorization

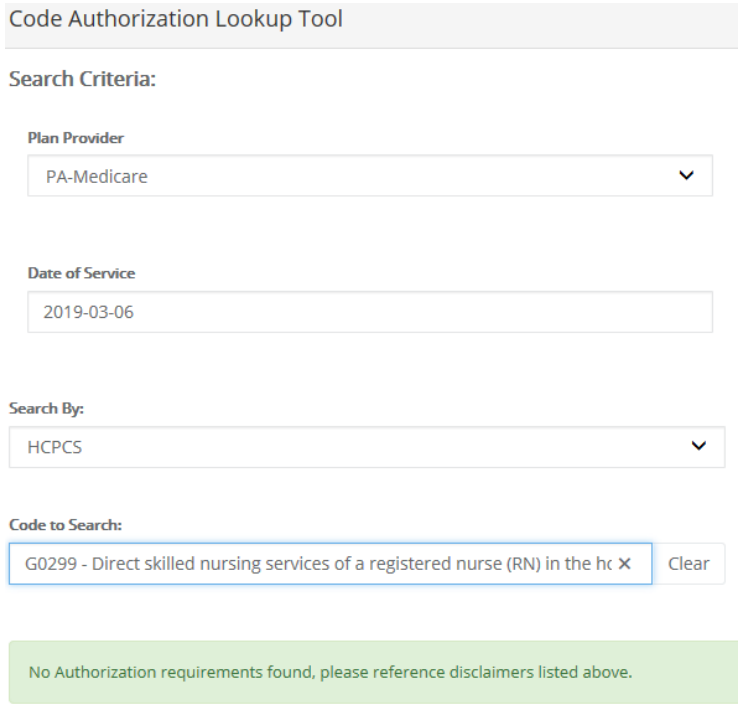


Authorization Example Two

- Medicare LOB
- Code 45100 (Biopsy of Rectum)
- Authorization IS NOT required



Authorization Example Three



- Medicare LOB
- Code G0299 (RN Home Health Visit)
- Authorization IS required as this code falls under a disclaimer

Questions or Concerns

- Should you have any questions or concerns regarding the Portal Search Tool, please contact Provider Services:
  - Medicaid: 1-800-392-1147
  - Medicare Assured: 1-800-685-5209

- Should you need assistance from your Provider Account Liaison, please reach out to your assigned Liaison directly

Health benefits or health benefit administration may be provided by or through Highmark Wholecare, coverage by Gateway Health Plan, an independent licensee of the Blue Cross Blue Shield Association (“Highmark Wholecare”).