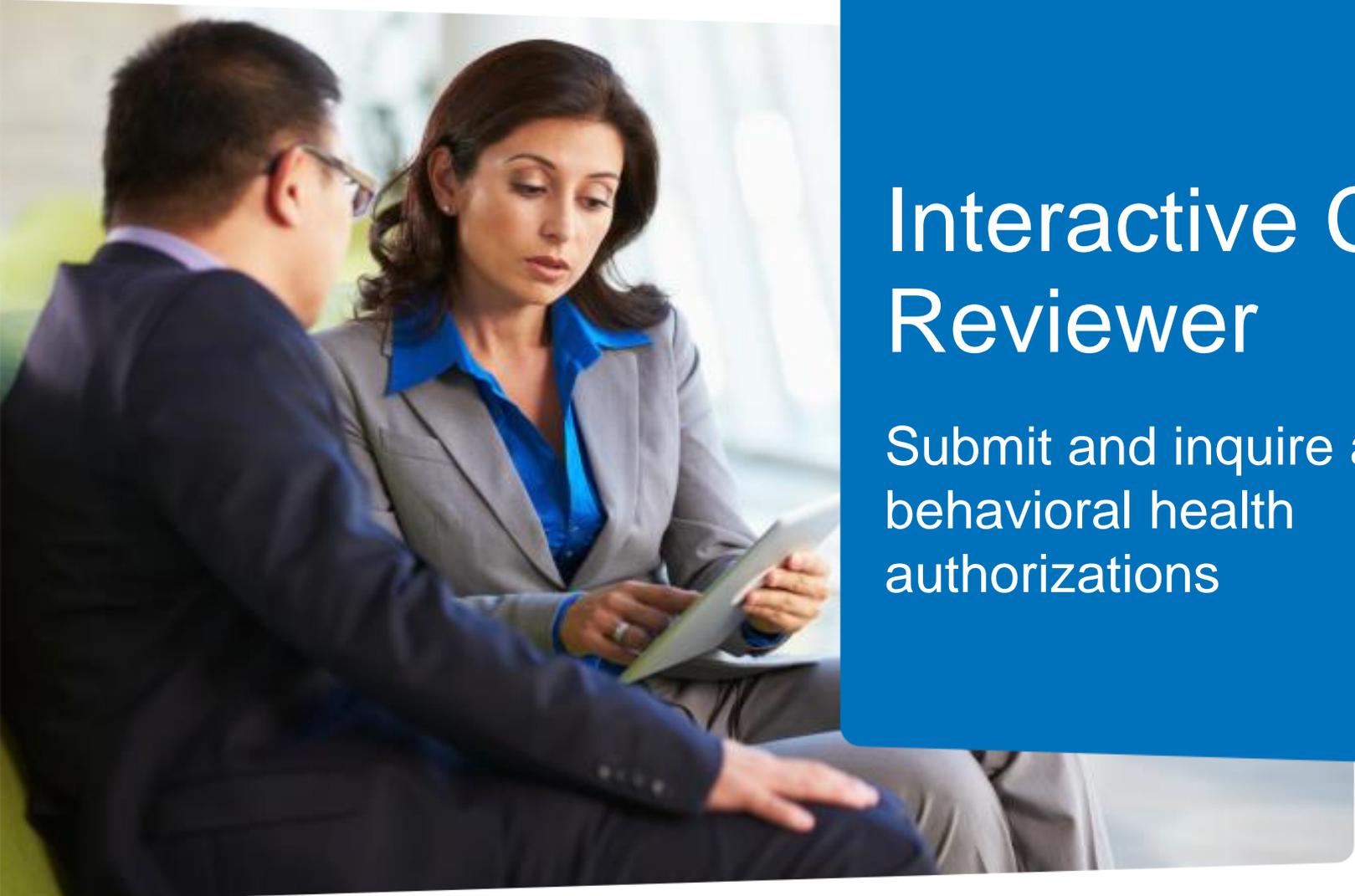




Anthem Blue Cross and Blue Shield Healthcare Solutions
Medicaid Managed Care



Interactive Care Reviewer

Submit and inquire about
behavioral health
authorizations

Course objectives

After completing this course, participants will be able to:

- List the benefits of using the Interactive Care Reviewer (ICR).
- Identify the products and services available on the ICR for authorizations.
- Access ICR through the Availity Portal.
- Create an authorization.
- Inquire about a previously submitted authorization.

Agenda

Agenda for this course:

- To review the benefits of using the ICR for member authorizations
- To create and submit inpatient/outpatient requests
- To inquire about an existing request

ICR details

The ICR brings improved efficiency to the precertification process:

- Physicians and facilities can submit authorization requests for behavioral health services, including acute inpatient stays, residential and rehabilitation stays, intensive outpatient and partial hospital programs, electroconvulsive therapy, and psychiatric testing.
- Ordering and servicing physicians and facilities can use the inquiry feature to find information on any authorization with which their tax ID/organization is affiliated.

Advantages of using the ICR

You'll see great advantages in using the ICR. The ICR improves the efficiency of the authorization process:

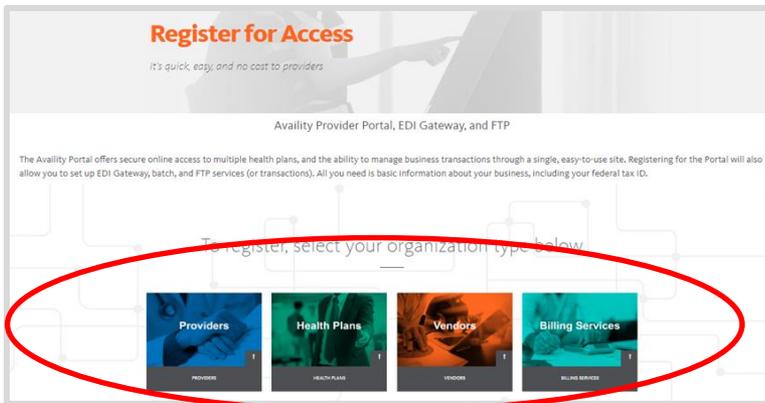
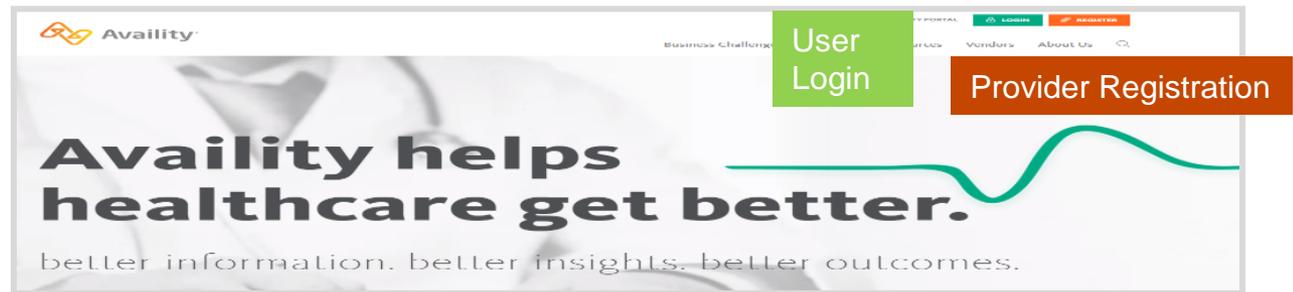
- Authorizations are in one place and are accessible at any time by any staff member.
- This means there's no need to fax! Reduced paperwork!
- You can quickly check authorization status online and update requests.
- You have the ability to sign up for email updates
- You can attach and submit clinical notes and supporting images.
- You have the ability to inquire on authorization requests submitted via phone, fax, ICR or other online tool.

Accessing the ICR

Access the ICR via the Availity Portal (www.Availity.com).

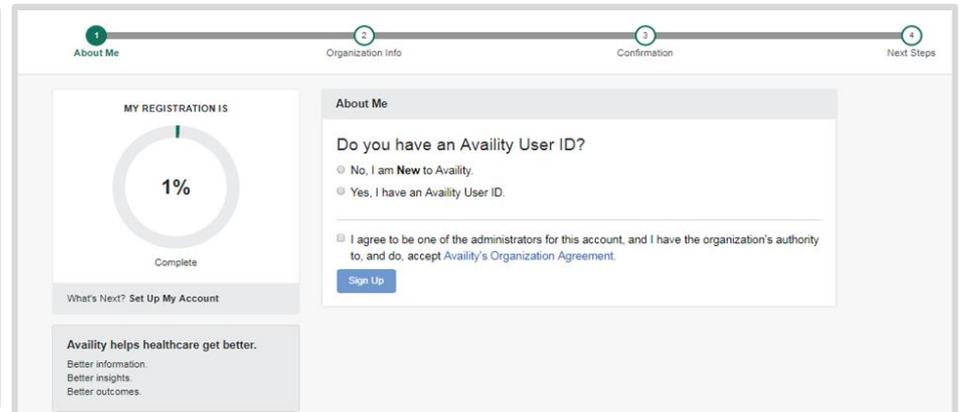
1

Select the REGISTER link to be redirected to the *Registration details* landing page.



2

Select the appropriate organization type link and you will be redirected to the *Registration Form*.



3

The person starting the registration process agrees to be the administrator for the organization and can now register for the Availity Portal.

Availity administrator: Granting access on the Availity Portal

Patient Registration ▾ Claims & Payments ▾ My Providers ▾ Reporting Payer Spaces ▾ More ▾ Keyword Search 🔍

N Notification Center

1/29/2018 2:07 am
Take Action

1/28/2018 10:38 pm
Take Action

My Account Dashboard

My Account
My Administrators
Maintain User
Add User
Maintain Organization
'How To' Guide for Dental Providers
Enrollments Center

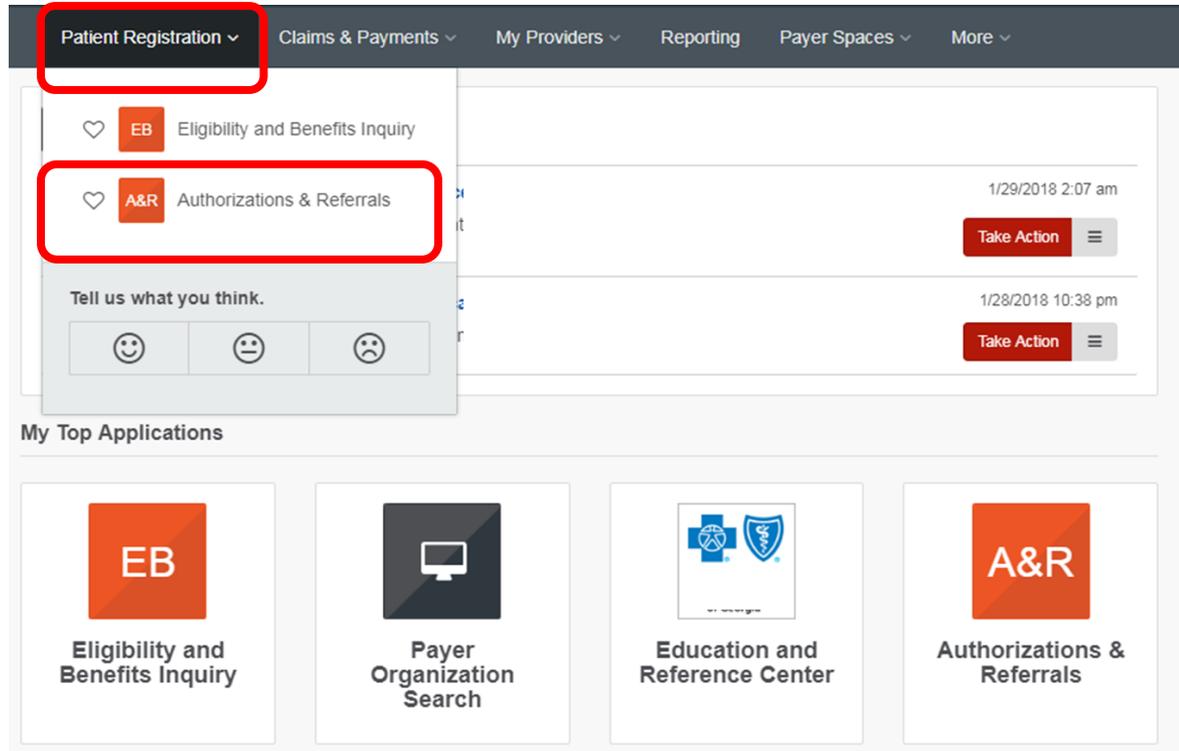
Your organization's Availity Portal administrator can select **Maintain User** from their *Account Dashboard* located on the upper-right corner of the home page to add functionality to an existing user. To create a new access, the administrator selects **Add User**.

Availity administrator: Granting access on the Availity Portal (cont.)

<input type="checkbox"/>	Role(s)
User Roles	
<input checked="" type="checkbox"/>	Base Role
<input checked="" type="checkbox"/>	Authorization and Referral Inquiry
<input checked="" type="checkbox"/>	Authorization and Referral Request
<input checked="" type="checkbox"/>	Claim Status
<input checked="" type="checkbox"/>	Claims Management

Assign users the roles of **Authorization and Referral Inquiry** and **Authorization and Referral Request**.

Accessing the ICR



To access the ICR from the Availity Portal, choose **Authorizations & Referrals** under the *Patient Registration* link on the top navigational bar.

Accessing the ICR (cont.)

Home > Authorizations & Referrals

A&R Authorizations & Referrals

Multi-Payer Authorizations & Referrals

 **Auth/Referral Inquiry**   **Authorizations** 

[View Payers](#) [View Payers](#)

You don't have this permission. The good news is your admin can give you access. [I Need Access](#)

Additional Authorizations & Referrals

-  [AIM Specialty Health \(Anthem\)](#)
-  [Clinical Auth Management](#)
-  [Online Batch Management](#)

Note: For users with only *Authorization/Referral Inquiry* access, go to slide 45 for instructions on inquiry functions.

ICR Terms of Use and Disclaimers



Interactive Care Reviewer Terms of Use and Disclaimers

Together with IBM we have developed this online system using IBM's Watson technology to allow providers to request utilization management determinations, to assist in assembling required information, and to view an advance determination with information regarding review of coverage for a requested service.

All treatment decisions, and the consequences and outcomes thereof, are the responsibility of the health care provider and the patient, not the Plan. In general:

- Plan deductibles and co-payments apply before final payment can be made.
- Plan maximums and limitations will apply before payment can be made.
- Plan benefits may change upon renewal.

Health care providers will continue to receive a formal written notice of the Plan determinations, which will include specific additional information regarding the administration of benefits for the requested service.

The data provided by this system is protected health information ("PHI") and must be treated with the same care as other PHI that is exchanged during the normal course of business. PHI shall only be used as necessary for patients currently receiving treatment. Health care providers using this system must ensure that use of PHI is subject to the provider's own policies and procedures, in compliance with applicable law. Such use shall further be subject to the terms and conditions of the Provider's agreement with the Plan.

Access, use, or disclosure of information related to certain sensitive medical services is strictly limited by federal and state laws. Sensitive medical services may include, but are not limited to, treatment for: substance use disorders, sexually transmitted illnesses or mental conditions. Such information may only be accessed, used, or disclosed with the authorization of the patient or for treatment purposes. Accessing sensitive service information outside of these requirements is prohibited.

Drug and alcohol abuse treatment records may only be accessed, used, or disclosed with the consent of the patient or to the extent necessary to respond to a bona fide medical emergency.

By selecting 'Accept', you acknowledge that you have read and you agree to these Terms of Use/Disclaimer.

ACCEPT

Read and accept the disclaimer.
Be sure to enable pop-ups!

[Terms of Use & Privacy Disclaimer](#)

The ICR landing page/dashboard

Interactive Care Reviewer Welcome Name Logout Contact Us Quick Links

[My Organization's Requests](#) [Create New Request](#) [Search Submitted Requests](#) [Check Case Status](#)

Page 1 of 27 | View Results 20 | 533 Requests found Displaying 1 to 20

Request Tracking ID	Reference Number	Status	Patient Name	Service Date Range	Request Type	Requesting Provider NPI	Submit Date	Created By	Updated Date	Updated By
		Review In Progress		10/09/2015 - 10/09/2015	Outpatient	1073549929	2015-10-08 12:22:54 PM		2015-10-08 12:23:52 PM	System
		See Details		10/09/2015 - 10/10/2015	Inpatient	1912007543	2015-10-07 10:41:44 AM		2015-10-07 10:54:43 AM	System
		See Details		10/09/2015 - 10/10/2015	Inpatient	1912007543	2015-10-07 10:30:37 AM		2015-10-07 10:35:34 AM	System
		See Details		10/09/2015 - 10/10/2015	Inpatient	1912007543	2015-10-07 10:06:40 AM		2015-10-07 10:17:39 AM	System
		Review In Progress		09/30/2015 - 09/30/2015	Inpatient	1922098342	2015-10-01 11:54:06 AM		2015-10-06 11:07:34 AM	System
		Review In Progress		09/28/2015 - 10/12/2015	Inpatient	1396714663	2015-10-06 09:53:39 AM		2015-10-06 09:54:29 AM	System
		Approved		10/06/2015 - 10/06/2015	Outpatient	1922098342	2015-10-05 12:19:36 PM		2015-10-05 12:24:42 PM	System

The dashboard displays recent ICR requests: submitted, requests not yet submitted, cases requiring additional information and cases where a decision has been rendered.

The ICR landing page/dashboard (cont.)

The screenshot displays the 'Interactive Care Reviewer' dashboard. At the top, there is a navigation bar with 'Welcome, Carol Butz', 'Logout', 'Contact Us', and 'Quick Links'. Below this is a search bar labeled 'Check Case Status'. The main content area features a table with columns: 'Request Tracking ID', 'Reference Number', 'Status', 'Patient Name', 'Submit Date', 'Created By', 'Updated Date', and 'Updated By'. A dropdown menu is open over the 'Status' column, showing options like 'Additional Information Needed', 'Approved', 'Bariatric Request Received', etc. A red circle highlights a filter icon in the top right corner of the table area. Green arrows point to the 'Status' dropdown and the 'See Details' link in the table.

Request Tracking ID	Reference Number	Status	Patient Name	Submit Date	Created By	Updated Date	Updated By
		See Details		2015-09-12 09:50:48 AM		2015-09-14 12:45:01 PM	System
		See Details		2015-09-12 09:13:54 AM		2015-09-14 07:50:47 AM	System
		Cancelled - Request Withdrawn by Provider	Doe, Judy	2015-09-12 10:20:04 AM		2015-09-12 01:46:02 PM	System
		See Details	TEST, MARY	2015-08-15 06:00:11 PM		2015-09-12 01:04:43 PM	System
		See Details	Doe, Joe	2015-09-12 09:03:19 AM		2015-09-12 12:56:45 PM	System
		See Details	Doe, Jacob	2015-08-15 05:55:06 PM		2015-09-12 12:53:45 PM	System
		See Details	TEST, BETTY	2015-09-12 09:25:33 AM		2015-09-12 12:51:38 PM	System

All columns have up and down arrows for quick sorting. Some also have a filter option (shown here). To clear filter, select the icon circled in red.

ICR dashboard tabs



My Organization's Requests



Create New Request



Search Submitted Requests



Check Case Status

Tabs across the top of the dashboard:

- ***My Organization's Requests*** is the home page of the application and displays the dashboard.
- ***Create New Request*** is used to start a new inpatient or outpatient request.
- ***Search Organization Requests*** allows for the ability to search for any ICR case requested by your organization or any request with which your organization is associated.

ICR dashboard tabs (cont.)



My Organization's Requests



Create New Request



Search Submitted Requests



Check Case Status

- **Check Case Status** allows for the ability to view any cases submitted associated with the tax ID(s) on the request. This includes submissions by phone, fax, etc.

Note: In order to view the authorization/referral, the case must be associated with the tax ID listed under the organization you selected in the Availity Portal.

- **Check Appeal Status** allows for the ability to check the status of an appeal by entering the appeal number and member ID.

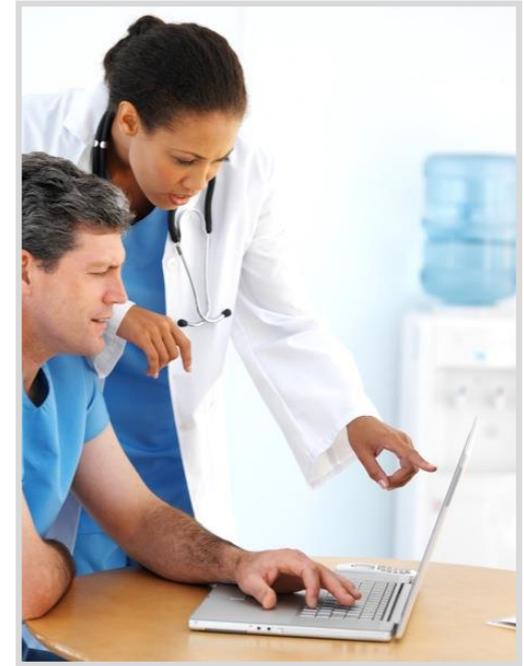
Creating a new request

Creating a new request

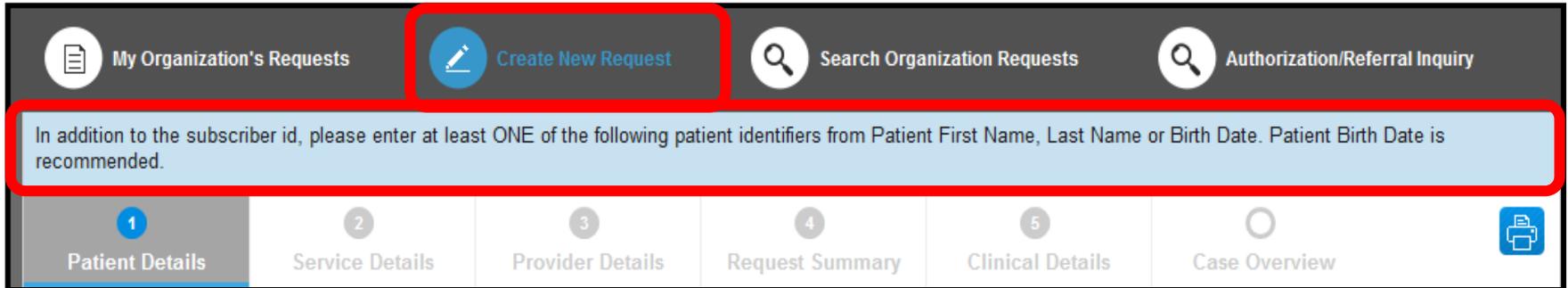
Do you want to verify if an authorization is required? The ICR gives you quick access to that information in most cases. Enter:

- Patient information.
- Diagnosis and procedure information.
- Provider details.

A message will appear indicating whether or not an authorization is required for most requests. This information can be printed or saved to a PDF and is available later via an ICR search.

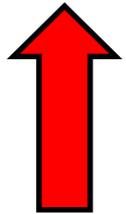


Starting a new request on the ICR



The screenshot shows the ICR dashboard with the following elements:

- Navigation bar: My Organization's Requests, **Create New Request** (highlighted with a red box), Search Organization Requests, Authorization/Referral Inquiry.
- Message bar: A blue bar with the text: "In addition to the subscriber id, please enter at least ONE of the following patient identifiers from Patient First Name, Last Name or Birth Date. Patient Birth Date is recommended." (highlighted with a red border).
- Progress bar: Patient Details (1), Service Details (2), Provider Details (3), Request Summary (4), Clinical Details (5), Case Overview.
- Print icon: A blue print icon in the bottom right corner.



- Select **Create New Request** from the ICR dashboard tab.
- Watch the blue bar for messaging. Errors turn the box red.
- Menu bar shows where you are.

Patient details

1 Patient Details 2 Service Details 3 Provider Details 4 Request Summary 5 Clinical Details Case Overview

In addition to the subscriber ID, please enter at least ONE of the following patient identifiers from patients First Name, Last Name or Birth Date. Patient Birth Date is recommended.

Required Fields *

 Profiles ▶

Request Type *
Inpatient
Select One
Inpatient
Lab Only-Outpatient
Outpatient
Referral

Case Type *
Psychiatric
Select One
Maternity
Medical
Medical Injectable
Neonatal
OB/Global
Psychiatric
Rehabilitation
Substance Abuse
Surgical

Admission Date *
MM/DD/YYYY

Patient Last Name **Patient First Name**

FIND PATIENT

Select from the *Request Type* and *Case Type* menus or save steps by selecting **Profiles**. For Behavioral Health requests, choose either *Psychiatric* or *Substance Abuse* as the case type.

Patient details (cont.)

1 Patient Details 2 Service Details 3 Provider Details 4 Request Summary 5 Clinical Details Case Overview

In addition to the subscriber ID, please enter at least ONE of the following patient identifiers from patients First Name, Last Name or Birth Date. Patient Birth Date is recommended.

Required Fields *

 Profiles ▶

Request Type *

Inpatient ▼

Case Type *

Psychiatric ▼

Admit Date *

07/02/2018 

Subscriber ID *

Patient Date of Birth

MM/DD/YYYY

Patient Last Name

Patient First Name

ID must be entered exactly as it appears on the members ID card.

FIND PATIENT

Complete all required fields, then select **Find Patient**. It is recommended to use the *Patient Date of Birth* in addition to the Subscriber ID.

Profile templates

Select the dot to view the *Standard Profile*.

Standard Profile	(Inpatient, Outpatient, Lab Only, Office, DME, BH) Profile Type	Procedure Code	View	Select
BH INP Detox	Inpatient		⋮	✓
BH INP Psych	Inpatient		⋮	✓
BH INP Residential Detox	Inpatient		⋮	✓
BH INP Residential Psych	Inpatient		⋮	✓
BH OP IOP	Outpatient		⋮	✓
BH OP PHP	Outpatient		⋮	✓
BH OP PHSA	Outpatient		⋮	✓

You will be able to see what will be populated on the *Patient Details* screen and on the *Service Details* screen.

Profile Details

[Back to Profiles](#)

Profile Name
BH INP Psych

Request Type	Case Type	Place of Service	Type of Service	Level of Service	Select
Inpatient	Psychiatric	Inpatient Hospital	Psychiatric	Emergency	✓

Profile templates (cont.)

Standard Profile	Profile Type <small>(Inpatient, Outpatient, Lab Only, Office, DME, BH)</small>	View / Select
IP Medical-Emergency	Inpatient	<input checked="" type="checkbox"/>
IP Surgical	Inpatient	<input checked="" type="checkbox"/>
OP Surgery	Outpatient	<input checked="" type="checkbox"/>
ASC Surgery	Outpatient	<input checked="" type="checkbox"/>
OP Diagnostic	Outpatient	<input checked="" type="checkbox"/>
OP Medical Care	Outpatient	<input checked="" type="checkbox"/>
OP Hosp Diagnostic X-ray	Outpatient	<input checked="" type="checkbox"/>
Lab Diagnostic	Lab Only	<input checked="" type="checkbox"/>
Office Surgery	Office	<input checked="" type="checkbox"/>

Select the check mark to select a standard profile. This action will populate the mandatory *Request Type* and *Case Type* fields on the *Patient Details* screen and *Place of Service*, *Type of Service* and *Level of Service* on the *Service Details* screen.

Patient details: Date of service (inpatient — admit date)

The screenshot shows a web form with a navigation bar at the top containing tabs: 1 Patient Details (active), 2 Service Details, 3 Provider Details, 4 Request Summary, 5 Clinical Details, and Case Overview. Below the navigation bar is a light blue instruction box: "In addition to the subscriber ID, please enter at least ONE of the following patient identifiers from patients First Name, Last Name or Birth Date. Patient Birth Date is recommended." Below this is a red "Required Fields" warning. The form contains several input fields: "Request Type" (dropdown menu with "Inpatient" selected), "Case Type" (dropdown menu with "Psychiatric" selected), "Admit Date" (text input with "11/29/2016" and a calendar icon), "Subscriber ID" (text input), "Patient Date of Birth" (text input with "MM/DD/YYYY" placeholder), and "Patient First Name" (text input). A "FIND PATIENT" button is located to the right of the "Patient First Name" field. A calendar widget is open over the "Admit Date" field, showing "November 2016". The calendar grid has days of the week (S, M, T, W, T, F, S) and dates. The date "10" is highlighted with a red box, and "29" is highlighted with a blue box. A "Today" button is at the bottom of the calendar.

The admit date **cannot** be changed once the case is submitted!

Patient details

A message in the blue bar will indicate if the member's preauthorization cannot be completed using the ICR.

1	2	3	4	5	
Patient Details	Service Details	Provider Details	Request Summary	Clinical Details	Case Overview
					
Subscriber ID	Name	Patient Date of Birth	Gender		
VZT12345678	Doe, Joe	12/12/1966	Male		
Eligibility Coverage	Coverage Period	Interchange Control No.	Relationship		
Active Coverage	06/01/2006 - 12/31/9999	12345678	Self		
Group Number	Group Name	Request Type	Case Type		
12345678	Kristen's Boutique	Outpatient	Medical		
Service Date From	Service Date To				
11/08/2016	11/08/2016				
			BACK TO FIND PATIENT	CONFIRM PATIENT	

Service details (outpatient examples)

1 Patient Details 2 **Service Details** 3 Provider Details 4 Request Summary 5 Clinical Details 6 Case Overview

Diagnosis Services

* Required Fields More Information

Request Type: Outpatient
Case Type: Psychiatric
Service Date: 06/13/2018 - 06/15/2018

Place of Service *: On Campus Outpatient Hospital
Type of Service *: Intensive Outpatient
Level of Service *: Elective

Source of Admission *: Direct Admit

Diagnosis Code(s) * Description Primary

F32.1 - ICD10 Major depressive disorder, single episode, moderate

Next

1

Complete diagnosis fields.

If the diagnosis code is not known, select the magnifying glass to search.

2

Complete services fields.

Diagnosis Services

* Required Fields More Information

Place of Service: On Campus Outpatient Hospital
Type of Service: Intensive Outpatient

Service From * Service To * Quantity *

Requested 06/13/2018 06/15/2018 Visit(s)

Add Service +

Previous Next

Service details (outpatient examples)

The screenshot displays a web-based interface for managing medical services. At the top, there are navigation tabs: Patient Details (1), Service Details (2), Provider Details (3), Request Summary (4), Clinical Details (5), and Case Overview (6). The 'Service Details' tab is active. Below the tabs, there are sections for 'Diagnosis' and 'Services'. The 'Services' section is highlighted with a red circle. A table below shows a list of services. The first row is highlighted with a red box and contains the following information:

Place of Service	Type of Service	Procedure Code(s)	Description
Office	Professional	90867 CPT	Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; initial, including cortical mapping, motor threshold determination, delivery and management

Below the table, there is a 'Requested' section with a red box around the input fields:

Service From	Service To	Quantity	Per Every	Duration	Total
01/19/2017	01/25/2017	1	Visit(s)		1 Visit(s)

At the bottom of the interface, there is a summary row with a red box around the input fields:

Service From *	Service To *	Quantity *	Per Every	Duration	Total			
10/01/2018	01/01/2019	2	Unit(s)	1	Week(s)	12	Week(s)	24 Unit(s)

A blue arrow points to a plus sign (+) in the bottom right corner of the table area, which is also circled in red.

In this example, the request is for 2 units, every week, for 12 weeks, which equals 24 units. Select the plus sign again to enter that procedure on the request before selecting the **Next** button.

Service details: Diagnosis (inpatient)

1 Patient Details 2 **Service Details** 3 Provider Details 4 Request Summary 5 Clinical Details

Diagnosis Length of Stay

* Required Fields [More Information](#)

Request Type
Inpatient

Case Type
Psychiatric

Service Date
07/02/2018

Place of Service *
Inpatient Hospital

Type of Service *
Psychiatric

Level of Service *
Urgent

Source of Admission *
ER Admit

Diagnosis Code(s) * Description Primary

+

Next

If level of service is urgent:
1. Select **Level of Service**.
2. Select **Source of Admission**.
3. Type diagnosis code(s).
4. Select **+**.

Urgent level of service is only an option for a future admission. If the date of admission is the current date (or in the past), options are elective and emergency.

Service details: Length of stay (inpatient)

The screenshot shows a multi-step form with five tabs: 1. Patient Details, 2. Service Details (highlighted with a red circle), 3. Provider Details, 4. Request Summary, and 5. Clinical Details. Below the tabs is a horizontal bar with two sections: 'Diagnosis' and 'Length of Stay' (highlighted with a red circle). Below this bar are labels for 'From', 'Through', 'Days *', and 'Level Of Care *'. The 'From' field contains '06/29/2018', the 'Days' field contains '2', and the 'Level Of Care' dropdown is set to 'Acute'. A blue '+' button is on the right. At the bottom right, there are 'Previous' and 'Next' buttons, with the 'Next' button highlighted by a green box.

From	Through	Days *	Level Of Care *
06/29/2018		2	Acute

Buttons: Previous, Next

Length of stay:

1. Type number of days.
2. Choose level of care.
3. Select **+**.
4. Then **Next**.

Provider details

1	2	3	4	5	
Patient Details	Service Details	Provider Details	Request Summary	Clinical Details	Case Overview

* Required Fields [More Information](#)    

Add from Favorites or Search for Provider

Add Requesting Provider	 
Add Servicing Provider	<input checked="" type="checkbox"/> Same as Requesting Provider  

Complete required fields for all sections.

Search all or select from favorites.

Next

Ordering provider

1 Patient Details	2 Service Details	3 Provider Details	4 Request Summary	5 Clinical Details	Case Overview
-------------------	-------------------	---------------------------	-------------------	--------------------	---------------

* Required Fields [i More Information](#)    

Add from Favorites or Search for Provider

Add Requesting Provider	<input type="checkbox"/> Same as Requesting Provider	 
Add Servicing Provider	<input type="checkbox"/> Same as Requesting Provider	 
Add Ordering Physician	<input checked="" type="checkbox"/> Same as Servicing Provider <input checked="" type="checkbox"/> Same as Requesting Provider	 

[Next](#)

The *Ordering Provider Information* section appears for some specific outpatient requests. Examples include: *Place of Service — Home*

Favorites

To select from favorites, select the star button

Add from Favorites or Search for Provider

<i>Add Requesting Provider</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Add Servicing Provider</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Add Ordering Physician</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Select Favorite Close X

Name	NPI	Medicare ID	Specialty	Address		
Doe, Delores	1234567890		Cardiovascular Disease	123 Main ST, GREENFIELD, OH, United States, 12345	X	+
Doe, Delores	1234567890		Cardiovascular Disease	456 Sunset Ave, Niceville, OH, United States, 12345	X	+

To select a favorite, select the plus button.

Provider details: Contact information

The screenshot shows a web interface for provider details. The 'Provider Details' tab is active. The form displays information for a 'Requesting Provider' named 'Doe, Delores', a 'Practitioner' with NPI '1234567890', and address '123 Main St, Greenfield, OH 45215 1448, United States'. Below this, there are input fields for 'Contact Last Name *', 'Contact First Name *', 'Contact Telephone *', 'Ext', and 'Fax Number'. The 'Fax Number' field has a placeholder '(NNN) NNN-NNNN' and a warning: 'By inputting a fax number above, you agree to accept Personal Health Information (PHI) at this number. Please insure fax machine is secure to receive PHI'. Below these fields is an 'Email Address' field with the text 'Please add your e-mail address if you want to receive e-mail notification.' and an 'Add Email' button. At the bottom, there is a checkbox for 'Same as Requesting Provider' and a 'Next' button.

- Enter *Contact Last Name*, *Contact First Name* and if necessary, the *Contact Phone Number*. This should be the clinical person that UM can contact for questions.
- The fax number is optional.
- The email address is optional; but recommended if you would like to receive emails regarding updates to the case.

Request summary

1 Patient Details	2 Service Details	3 Provider Details	4 Request Summary	5 Clinical Details	○ Case Overview	
Review required for this request ←						
						  
<h3>Length of Stay Requested</h3>						
From	Through	Days	Level of Care			
06/29/2018	07/01/2018	3	Acute			
<h3>Services</h3>						
Place of Service	Type of Service					
Inpatient Hospital	Psychiatric					
						NEXT

The *Request Summary* page is where you will be able to verify whether the services require prior authorization. If the services do not require precertification, you can note the tracking ID and close out the request.

Clinical details: Provider form

Example of a template in ICR – for Inpatient requests, the Facility Based Clinical Assessment Template will display.

The screenshot shows a web-based form with a navigation bar at the top containing tabs: 1 Patient Details, 2 Service Details, 3 Provider Details, 4 Request Summary, 5 Clinical Details (highlighted with a blue box), and 6 Case Overview. Below the navigation bar, there are icons for Required Fields, Information Tool Tip, and document actions. A blue box highlights the title "Facility Based Clinical Assessment Template" and a reminder: "Reminder: Do not enter/upload session notes for Behavioral Health Treatment". The form contains several input fields: Member Telephone Number, Member Alternate/Cell Phone Number, Treating/Attending Provider, Treating/Attending Provider Address, Treating/Attending Provider Phone Number (pre-filled with (404) 834-1513), Caller (SUTTER MEDICAL CENTER SACRAMENTO), Continued Stay Reviewer, Reviewer Phone Number, Reviewer Fax Number, and DSM-5 Diagnosis/Subtype/Specifier. Asterisks indicate required fields.

Clinical information is generally mandatory for **all** authorization requests. There are a few state exceptions.

Complete all required fields * on the template.

Clinical details: Provider form (cont.)

The screenshot shows a web form with a navigation bar at the top containing tabs: Patient Details (1), Service Details (2), Provider Details (3), Request Summary (4), Clinical Details (5), Case Overview, and an unlabeled tab. Below the navigation bar is a light blue instruction bar: "Please enter either Clinical Notes and/or upload attachments/images/photos in order to submit the request".

The main form area is divided into two sections:

- Attachments, Images and Photos:** This section includes a "Choose File" button (highlighted with a red box), a "Description" text input field, and an "Upload" button (with a red arrow pointing to it). A red box also highlights the "Choose File" button. Below the input field, there is a note: "Max file size: 10MB Allowed file types: jpeg/jpg, bmp, tiff, pdf, gif, doc, docx, xls, xlsx, txt".
- Clinical Notes:** This section contains a large text area for notes. A red arrow points from the "Add Note" button at the bottom right to this section.

At the bottom of the form, there is a warning: "Please verify you have added clinical information for the correct patient before clicking on 'Add Note'." Below this warning are two buttons: "Add Note" and "Next".

Annotations include:

- A red box around the "Choose File" button.
- A red arrow pointing from the "Upload" button to the "Attachments, Images and Photos" section.
- A red arrow pointing from the "Add Note" button to the "Clinical Notes" section.

Required Fields * Information Tool Tip

Attachments, Images and Photos

Please attach only documentation that contains the minimum necessary personal health information (PHI) to support the review for this request. Please verify you are attaching image(s) for the correct patient before clicking upload.

Choose File

Max file size: 10MB Allowed file types: jpeg/jpg, bmp, tiff, pdf, gif, doc, docx, xls, xlsx, txt

Description

Upload

Clinical Notes

If you completed a template, this section is optional unless otherwise directed.

Option to upload attachments, images and photos to support notes.

Select **Add Note** after manually typing information in the field.

Please verify you have added clinical information for the correct patient before clicking on 'Add Note'.

Add Note

Next

Case overview

1	2	3	4	5	6	
Patient Details	Service Details	Provider Details	Request Summary	Clinical Details	Case Overview	
<div style="display: flex; justify-content: space-between;">Expand All🔍 Hx 🖨️</div> <ul style="list-style-type: none">▶ Patient Details▶ Service Details▶ Provider Details▶ Clinical Details <div style="text-align: right;">Submit</div>						

View all the details of the request you entered for a final time before it is submitted.

Case overview (cont.)

1 Patient Details 2 Service Details 3 Provider Details 4 Request Summary 5 Clinical Details 6 Case Overview

Expand All   

▶ Patient Details

▼ Service Details

Request Type Inpatient	Case Type Psychiatric	Service Date 08/29/2018 - 07/01/2018
Place of Service Inpatient Hospital	Type of Service Psychiatric	Level of Service Urgent
Source of Admission Observation to Inpatient		

Diagnosis

Dx Code(s)	Description	Primary
------------	-------------	---------

Length of Stay

From	Through	Days	Level of Care	Decision
08/29/2018	07/01/2018	3	Acute	Initial Request

Select **Expand All** to review all sections.

Select the arrow to expand one section.

To modify information, select the title of the page to go back and edit fields. Select **Submit** to do the final submit for your request.

Submitted request in ICR

Thank you for submitting the request. Please note the Request Tracking ID 280648

Page 1 of 21 | View Results 20 | Displaying 1 to 20 of 419 Requests Found

Request Tracking ID	Reference Number	Status	Patient Name	Service Date Range	Request Type	Requesting Provider NPI	Submit Date	Created By	Updated Date	Updated By
280648	UM304634	Review In Progress	Esser, Joe	11/08/2016 - 11/08/2016	Outpatient	1922098342	2016-11-28 09:35:58 AM	Butz, Carol	2016-11-28 09:36:20 AM	Butz, Carol

Once a request has been submitted, the dashboard will appear and the new request will be viewable at the top (usually with a *Review In Progress* status). Confirmation that it was submitted, and the tracking ID will be viewable in the blue bar.

Viewing a decision — inpatient or outpatient

Request Tracking ID	Reference Number	Status	Patient Name	Service Date Range	Request Type	Requesting Provider NPI	Submit Date	Created By	Updated Date	Updated By
280772	UM304398	Approved	Mouse, Mick	11/14/2016 - 11/14/2016	Outpatient	1982718490	2016-11-14 03:31:46 PM	Jackson, Jill	2016-11-14 03:31:51 PM	Jackson, Jill
280771	UM304397	Approved	Sick, Patience	11/14/2016 - 11/14/2016	Outpatient	1225158454	2016-11-14 03:19:04 PM	Nurse, Jane	2016-11-14 03:19:09 PM	System
280765	UM304391	Review In Progress	Doe, John	11/11/2016 - 11/11/2016	Outpatient	1922098342	2016-11-11 06:13:24 PM	Jackson, Jill	2016-11-11 06:13:29 PM	Jackson, Jill
280764	UM304390	Partial Decision	Duck, Donald	11/11/2016 - 11/11/2016	Outpatient	1871558510	2016-11-11 06:02:15 PM	Smith, Sally	2016-11-11 06:02:21 PM	Smith, Sally
280468		Not Submitted	Test, Mary	10/19/2016 - 10/21/2016	Inpatient	1487776985		Nurse, Jane	2016-11-11 05:48:21 PM	Nurse, Jane
280680		Not Submitted	Frozen, Elsa	11/29/2016 - 11/30/2016	Inpatient			Smith, Sally	2016-11-11 05:46:14 PM	Smith, Sally

Look for cases that are last updated by system and where status is no longer *Review In Progress*. Those cases with updates or a decision can be viewed by selecting **Request Tracking ID**.

Viewing a decision

Case has been updated, please expand Service Details section to view details.

1 Patient Details 2 Service Details 3 Provider Details 4 Request Summary 5 Clinical Details Case Overview

Reference Number: UM304372 Subscriber ID: Status: Approved Created By: Request Tracking ID: 280724

Case Overview Transaction History

Expand All ←

- Letters Summary
- Patient Details
- Service Details
- Provider Details
- Clinical Details

REMOVE FROM DASHBOARD

To view status details, select the tracking number from the dashboard and then select **Expand All** to allow the case information to be viewable. View decision letters associated with your requests.

Provider letters

Case has been updated, please expand Service Details section to view details.

1	2	3	4	5		
Patient Details	Service Details	Provider Details	Request Summary	Clinical Details	Case Overview	
Patient Name	Reference Number UM304372	Subscriber ID YRP824M55529	Status Approved	Created By	Request Tracking ID 280724	

Case Overview Transaction History

Expand All

▼ **Letters Summary**

Letter - #UM304372- Requesting Provider - 11/10/2016

- ▶ Patient Details
- ▶ Service Details
- ▶ Provider Details
- ▶ Clinical Details

[REMOVE FROM DASHBOARD](#)

Provider letters associated with the request are viewable by expanding the **Letters Summary** section.

Viewing a decision

The screenshot displays a 'Case Overview' interface. At the top, there is a 'Transaction History' button. Below it, an 'Expand All' button is visible. The main content is organized into sections: 'Letters Summary', 'Patient Details', and 'Service Details'. The 'Service Details' section is expanded, showing a summary of the request: Request Type (Outpatient), Case Type (Medical), Service Date (12/01/2016 To 12/31/2016), and Level of Service (Elective). Below this, the 'Diagnosis Code(s)' section shows a table with one entry: M54.5 - ICD10 (Low back pain) marked as Primary. The 'Services' section contains a table with one entry: Durable Medical Equipment Rental (E0748 - HCPCS) for Osteogenesis stimulator, electrical, noninvasive, spinal applications, with a decision of 'Request approved'.

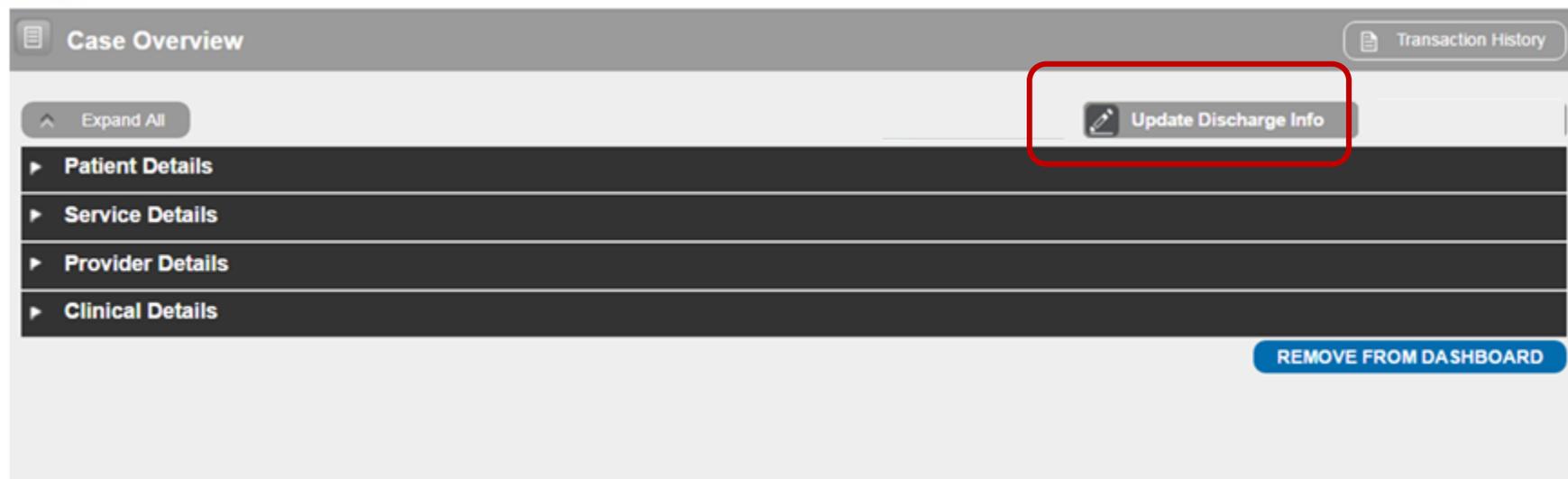
Request Type	Case Type	Service Date	Level of Service
Outpatient	Medical	12/01/2016 To 12/31/2016	Elective

Diagnosis Codes	Description	Primary
M54.5 - ICD10	Low back pain	<input checked="" type="radio"/>

Type of Service	Procedure Code	Service Description	Decision
Durable Medical Equipment Rental	E0748 - HCPCS	Osteogenesis stimulator, electrical, noninvasive, spinal applications	Request approved

Look at the *Procedure Code* section to view the decision, to see if additional information is needed or to see if the case is pending for other reasons.

Discharge notes



You will have an option available to select **Update Discharge Info** if it applies to the case.

Inquiry features on the ICR

Reminder:

Search Organization Requests allows for the ability to search for any **ICR** case requested by your organization or any request with which your organization is associated. This includes requests with a status of *review not required*.

Check Case Status allows for the ability to view **any** cases submitted associated with the tax ID(s) on the request. This includes submissions by phone, fax, etc.

Search using Check Case Status

Interactive Care Reviewer

Welcome, test test Logout Contact Us Quick Links

My Organization's Requests Create New Request Search Submitted Requests **Check Case Status** Check Appeal Status

Choose one of the search options below. Use the criteria in the selected option to narrow your search. Then click on the corresponding Search button. All search options on this page allow you to inquire on and view Authorizations and Referrals submitted via phone, fax or portal.

Search By Member Search By Reference/Authorization Request Number Search By Date Range

*Required Fields **
Search up to 12 months in the future or past. Date range searches are limited to a 30 day span per inquiry.

Subscriber ID * Patient Birth Date * Patient First Name

Request Type Service Start Date * Service End Date * Provider Tax ID *

Identifier Type * Provider ID * Provider Type *

This field is required

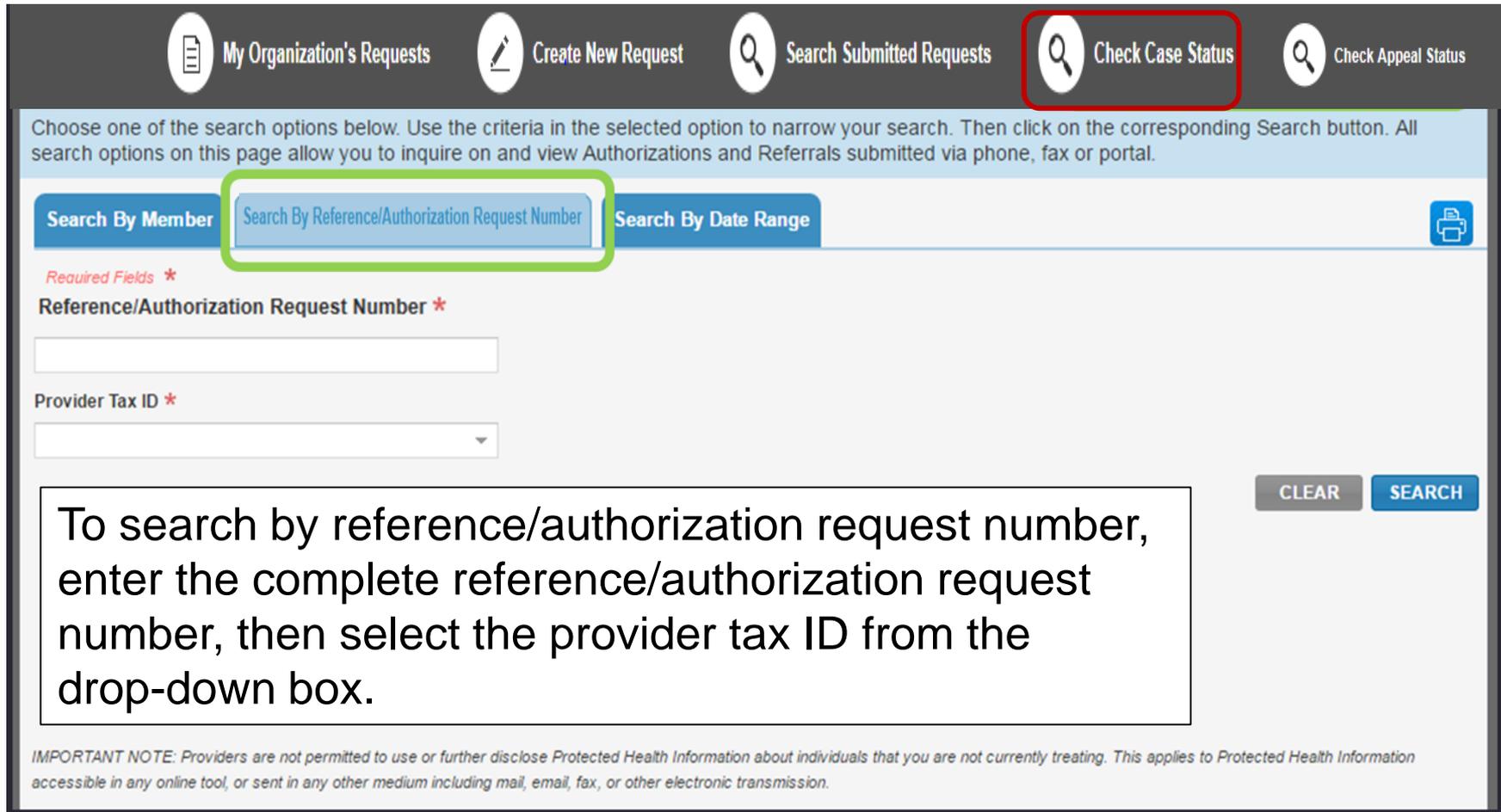
SEARCH

IMPORTANT NOTE: You are not permitted to use or disclose Protected Health Information about individuals that you are not currently treating. This applies Protected Health Information accessible in any Anthem online tool, or sent in any other medium including mail, email, fax, or other electronic transmission.

The first search option is *Search By Member*. Enter data in required fields.

Ordering and servicing physicians and facilities can make an inquiry to view the details for the services using the *Check Case Status* option.

Search by reference/authorization request number



The screenshot shows a web application interface for searching requests. At the top, there are five navigation buttons: 'My Organization's Requests', 'Create New Request', 'Search Submitted Requests', 'Check Case Status' (highlighted with a red box), and 'Check Appeal Status'. Below these is a light blue instruction bar. The main search area has three tabs: 'Search By Member', 'Search By Reference/Authorization Request Number' (highlighted with a green box), and 'Search By Date Range'. There is a printer icon on the right. Below the tabs, there are two required fields: 'Reference/Authorization Request Number' (a text input) and 'Provider Tax ID' (a dropdown menu). At the bottom right of the form are 'CLEAR' and 'SEARCH' buttons. A text box on the left contains instructions for using the selected search option. At the very bottom, there is an important note about Protected Health Information.

Choose one of the search options below. Use the criteria in the selected option to narrow your search. Then click on the corresponding Search button. All search options on this page allow you to inquire on and view Authorizations and Referrals submitted via phone, fax or portal.

Search By Member Search By Reference/Authorization Request Number Search By Date Range

Required Fields *

Reference/Authorization Request Number *

Provider Tax ID *

CLEAR SEARCH

To search by reference/authorization request number, enter the complete reference/authorization request number, then select the provider tax ID from the drop-down box.

IMPORTANT NOTE: Providers are not permitted to use or further disclose Protected Health Information about individuals that you are not currently treating. This applies to Protected Health Information accessible in any online tool, or sent in any other medium including mail, email, fax, or other electronic transmission.

Search by date range

 My Organization's Requests  Create New Request  Search Submitted Requests  Check Case Status

Choose one of the search options below. Use the criteria in the selected option to narrow your search. Then click on the corresponding Search button. All search options on this page allow you to inquire on and view Authorizations and Referrals submitted via phone, fax or portal.

Search By Member **Search By Reference/Referral Number** **Search By Date Range** 

*Required Fields **

Search up to 12 months in the future or past. Date range searches are limited to a 30 day span per inquiry.

Service Start Date * **Service End Date *** **Authorization Type** **Provider Tax ID ***

MM/DD/YYYY MM/DD/YYYY All

Identifier Type *

Select One

If no results are returned using Medicare id, please try selecting NPI

To search by date range, enter a 30-day or less date span, then choose the provider tax ID from the drop-down box and identifier type, and provider type

IMPORTANT NOTE: Providers are not permitted to use or further disclose Protected Health Information about individuals that you are not currently treating. This applies to Protected Health Information accessible in any online tool, or sent in any other medium including mail, email, fax, or other electronic transmission.

Search organization requests

My Organization's Requests Create New Request **Search Submitted Requests** Check Case Status

Search results will be limited to requests associated or submitted for your organization on Interactive Care Reviewer. For all other requests such as phone or fax, please use the Authorization/Referral Inquiry tab. Only requests submitted on Interactive Care Reviewer by your organization can be updated using this tool. For all other updates, please follow your normal process.

Only display cases submitted by organization Display all cases associated with my organization

Request Tracking ID Reference No Subscriber ID

Patient Last Name Patient First Name Patient Birth Date (MM/DD/YYYY)

Request Type: All Service Date From (MM/DD/YYYY) Service Date To (MM/DD/YYYY) Requesting or Servicing Provider / Facility NPI

CLEAR SEARCH

What functions are available from the *Search Submitted Requests* tab?

- Requests created via ICR (whether they are on the dashboard or not; whether they are submitted or not).

You will have the option to select ***Only display cases submitted by organization*** or ***Display all cases associated with my organization*** and complete one or more of the fields.

Search results

My Organization's Requests Create New Request Search Submitted Requests Check Case Status

Search results will be limited to requests associated or submitted for your organization on Interactive Care Reviewer. For all other requests such as phone or fax, please use the Authorization/Referral Inquiry tab. Only requests submitted on Interactive Care Reviewer by your organization can be updated using this tool. For all other updates, please follow your normal process.

Only display cases submitted by organization Display all cases associated with my organization

Request Tracking ID:

Reference No:

Subscriber ID:

Patient Last Name:

Patient First Name:

Patient Birth Date:

Request Type:

Service Date From:

Service Date To:

Requesting or Servicing Provider / Facility NPI:

Page 1 of 1 | View Results 20 | Displaying 1 to 1 of 1 Requests Found

Request Tracking ID	Reference No	Patient Name	Service Date Range	Request Submission Date	Requesting Provider NPI	Status
280667			11/08/2016 - 11/08/2016			Not Submitted

Results will display below the search criteria. Select Request Tracking ID hyperlink to view request.

Behavioral health authorization submission capabilities

- Submit authorization requests for behavioral health services including acute inpatient stays, residential and rehabilitation stays, intensive outpatient and partial hospital programs, electroconvulsive therapy, transcranial magnetic stimulation, applied behavioral analysis therapy, and psychiatric testing.
- Templates allow you to enter clinical details.

Wrapping up

Helpful tip:

- If you receive the *system temporarily unavailable* message on a consistent basis, your organization's firewall may be blocking the site. Please contact your IT department and ask them to review internet filters and add "anthem.com" as a trusted site to bypass the proxy.
- Clear your cache if there seem to be missing fields or if you continue to have errors.
- Remember — Admit date for inpatient requests cannot be changed once you submit.
- You can submit your requests from any computer with internet access. We recommend you use Internet Explorer 11, Chrome, Firefox or Safari for optimal viewing.
- ICR is not currently compatible with a touch screen. If you use a touch screen, disable your touch screen.

Wrapping up (cont.)

Now it's your turn!

- Use the ICR to determine whether an authorization is required, submit authorizations for many members covered by our plans and inquire to find details on submitted cases.

As a reminder:

- Access the ICR via the Availity Portal. If your practice does not have access, go to <http://www.availity.com> and select **Register**.
- Already use the Availity Portal? Your Availity administrator can grant you access to **Authorizations and Referral Request** and/or **Authorization and Referral Inquiry** and you can start using the ICR right away.

Contacts

For questions about the ICR, contact your local network representative.

For questions about Availity registration and access, contact Availity Client Services at: **1-800-AVAILITY (1-800-282-4548)**.

Thank you

<https://mediproviders.anthem.com/nv>

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