

How Do I Get Authorizations for Outpatient Services?

For Additional Questions and Answers, visit our FAQ section

STEPS:

- 1. To access, click *Request Member Care* on the left- hand side menu on the *MyPractice* page.
- 2. Select the appropriate MIS/TIN and Service Location.
- 3. On the *Prior Requests* Screen (if available), you can search for a previous request, view a recent request, or start a new request by clicking *Start New Request*.
- 4. On the *Eligibility Search* screen, you must enter Member's First Name, Last Name, Date of Birth and State, and click **Search**. Alternately, you can use Member ID and State. The search will only return one result.
- 5. On the *Member Details* screen, a summary of the member's information and plan will display. To proceed, click *Select this Member*.
- 6. On the *Begin* screen, select the service type for the request, then click *Continue*.
- 7. The next page will give a summary of authorization requirements for the member's plan. Click *Continue*.
- 8. On the *Initiate Authorization Request* screen, if available, review the administrative information listed and select the appropriate *Service Type*. Click *Continue*.
- 9. On the Enter Clinical Information screen:
 - Enter the **Requested Start Date**. Please use the mm/dd/yyyy format.
 - Select **Primary Diagnosis** and **Secondary Diagnosis** (if applicable). If you are unsure of the diagnosis code, use the magnifying glass icon to search for the appropriate diagnosis code by description or partial number.
 - Select the box next to the appropriate Requested Services (CPT4).
- 10. Click *Continue*.
- 11. On the *Preview* screen, confirm the information and either click *Revise* to make edits or *Submit* to send the request.
- 12. When you submit the request, it will be reviewed immediately by our systems. If there are sufficient benefits in place and you are in the member's network, you will receive your authorization information on the *Submission Complete* screen. If the request could not be authorized, you will be informed why, and you will need to call the customer service number on the member's benefit identification card to obtain authorization.

TIPS:

- Currently only required for select member accounts.
- This application is HIPAA-compliant.

• For further assistance, use the *FAQs* link to access *Contact Us*.