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Guide to submitting Inpatient authorizations

The comprehensive Authorization workflow tasks:

1. Start an authorization.
2. Complete the IP Admission Prescreen.
3. Complete the Authorization Details.
4. Complete Procedure Prescreen (if needed or click Next to go to Review).
5. Complete Procedure Details (if procedure prescreen was completed).
6. Review Inpatient admission and Inpatient procedure(s) and modify them as needed, then submit the authorization.

Capital

LOGIN: You must be a registered Availity user to access and utilize Authorizations. If you are not yet registered with Availity, complete the guided online registration at Availity.

Remember to check eligibility and benefits online first to determine if the member policy requires prior authorization for the service and/or procedure code(s).

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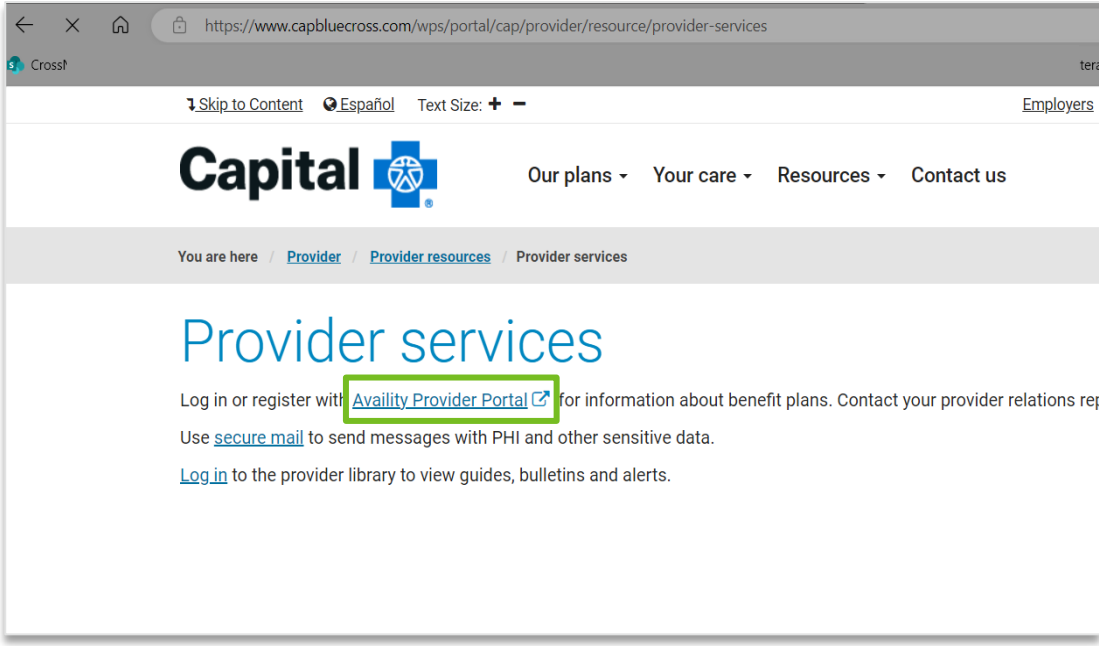
Access and login

1. From the Capital Blue Cross provider services page.
2. Locate the link for Availity, and click to open the Availity login page.



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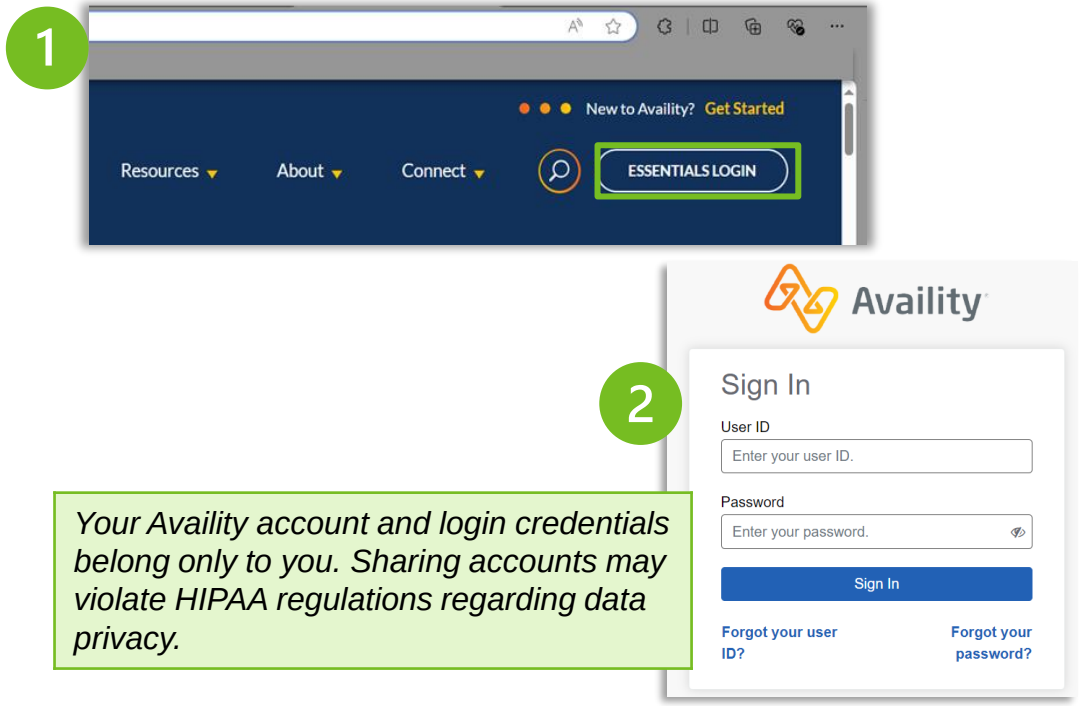
Logging in

1. Click **Essentials Login**, to open the sign in pop up window.
2. Enter your Availity username and password, and click the **Sign In** button to access your account.



Your Availity account and login credentials belong only to you. Sharing accounts may violate HIPAA regulations regarding data privacy.

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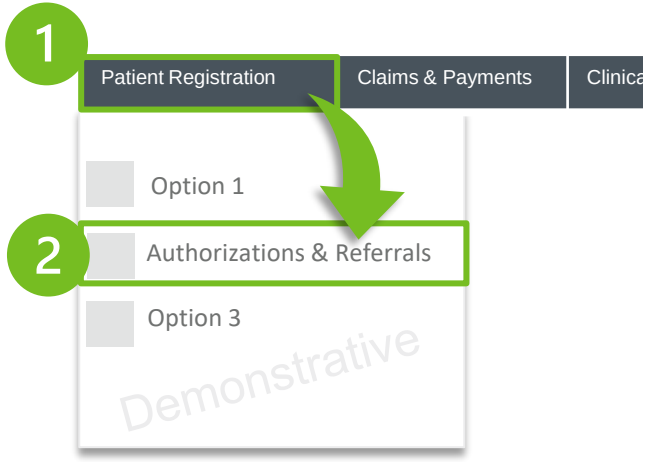
Selecting Authorizations & Referrals

Access Authorization & Referrals from the navigation menu.

1. Click **Patient Registration** from the navigation menu.
2. Select **Authorizations & Referrals** from the dropdown menu.



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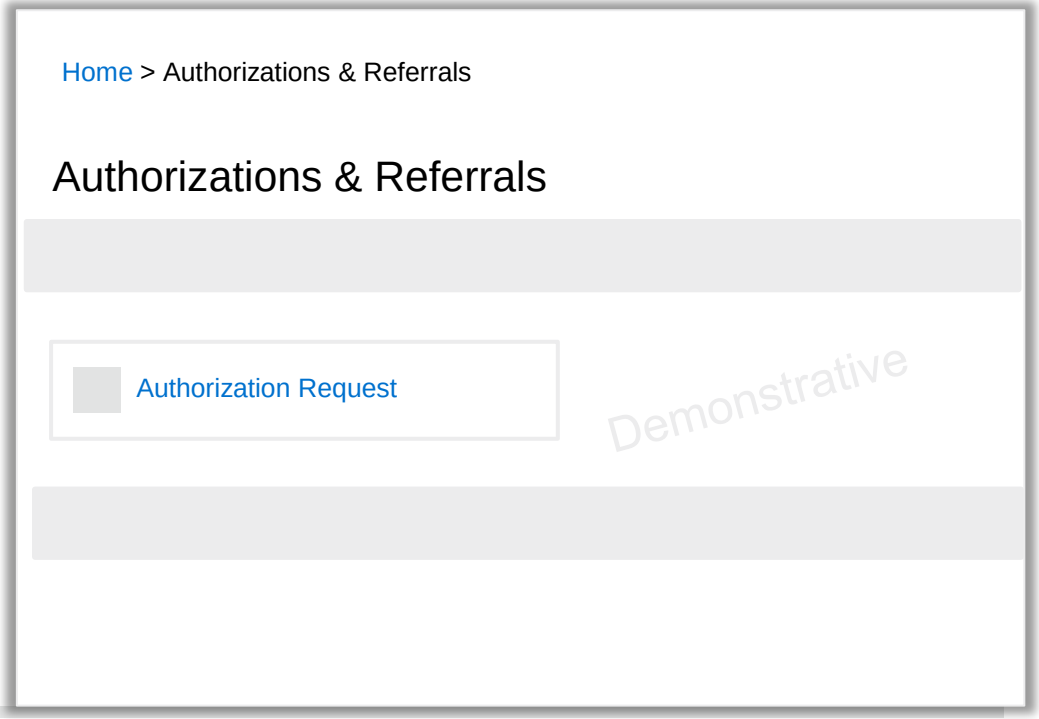
Next, Select **Capital Blue Cross** as payer from the payer options displayed in the navigation menu and click **NEXT**.



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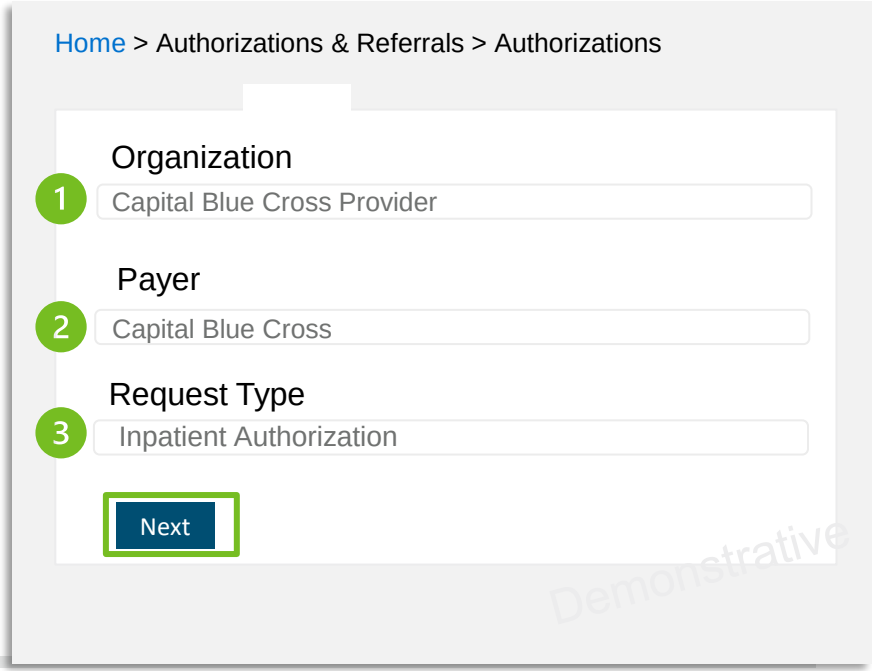
Capital

Select the appropriate information from the dropdown menus, then click **Next.**

1. Organization = **Capital Blue Cross Provider**.
2. Payer = **Capital Blue Cross**.
3. Request Type = **Inpatient Authorization.**
4. Click **NEXT**.



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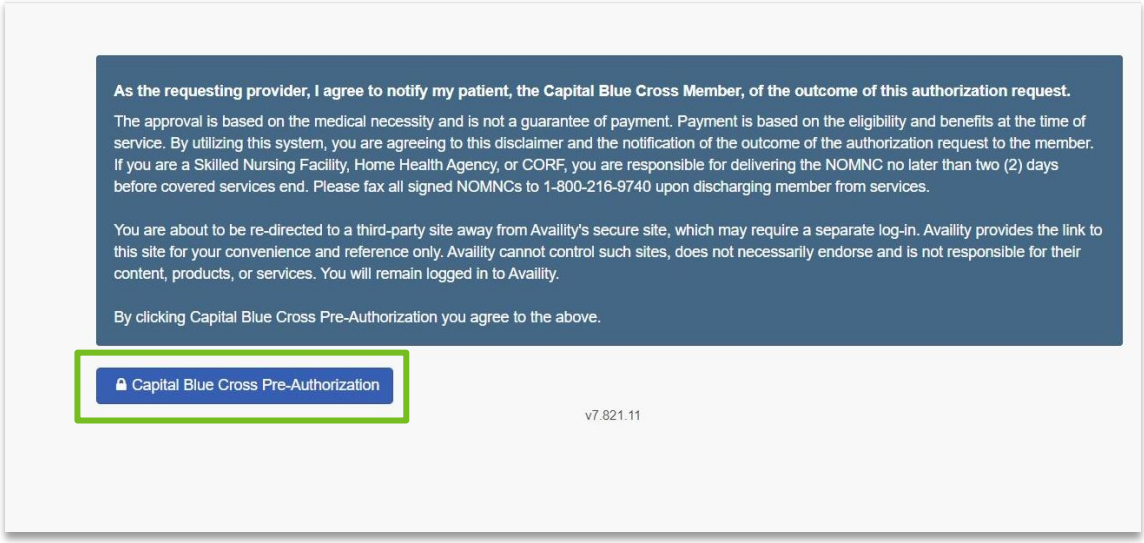
Capital

Accessing Capital Blue Cross

At the Authorizations disclaimer screen, click **Capital Blue Cross Pre-Authorization** to open the TruCare dashboard.



If TruCare does not open, try enabling your browser pop-ups.

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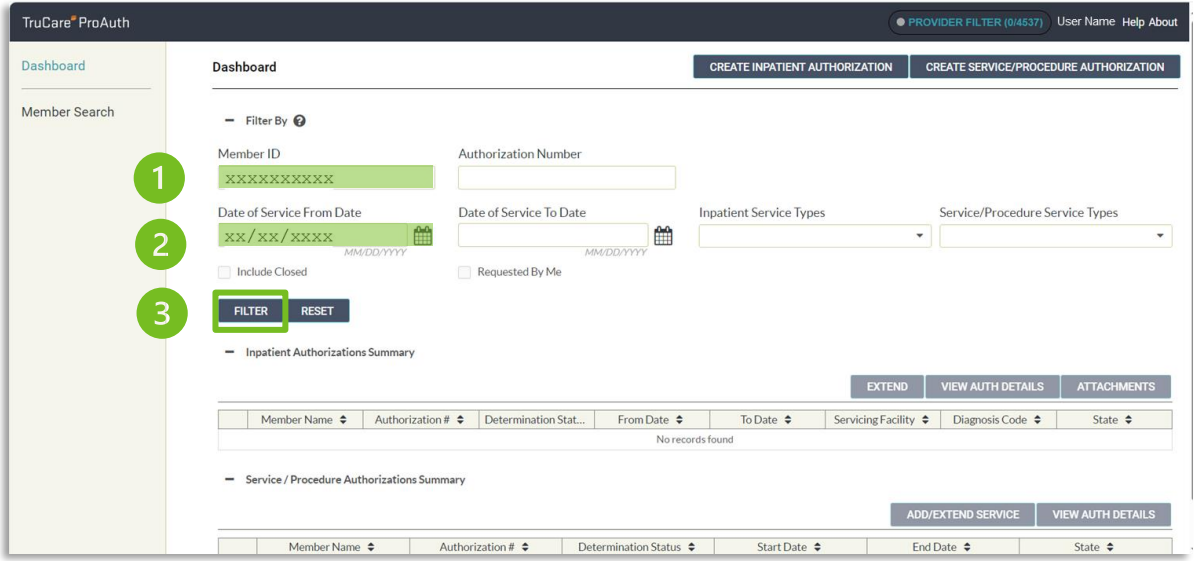
Capital

Member search

In the TruCare dashboard, you can view authorizations linked to your user account in summary tables on the dashboard. In the summary tables, you can view information on all the authorizations linked to your user account for any or all members. You can search for a member to work on member-specific tasks, such as viewing member authorization requests or creating a new authorization request for a member.

1. Enter the **MEMBER ID**.
2. Enter the start date for the search or use the date picker, and click **FILTER**.



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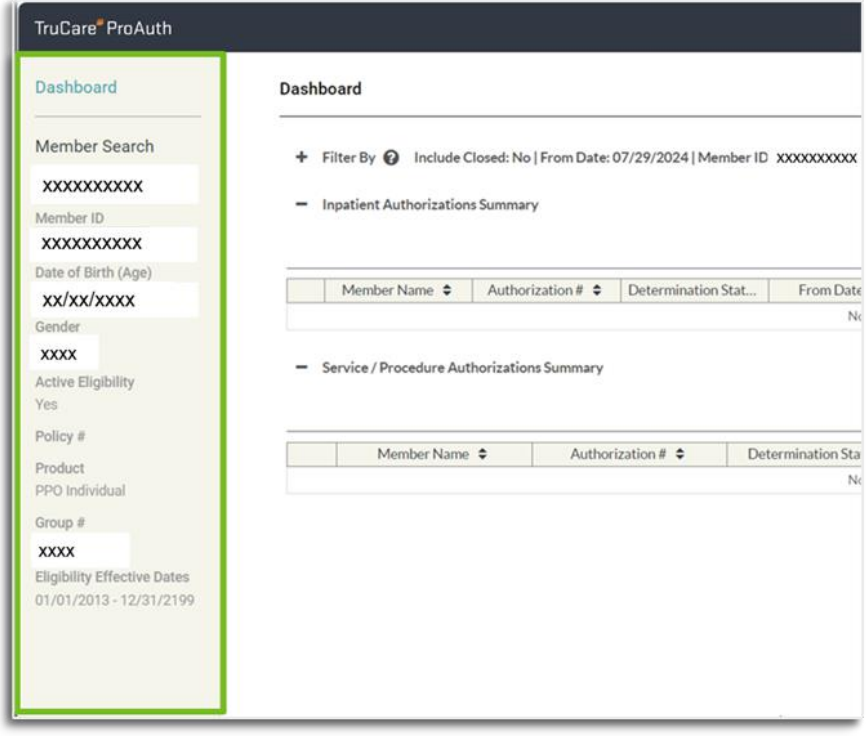
Member details

The member information will populate on the left side of the ProAuth dashboard.



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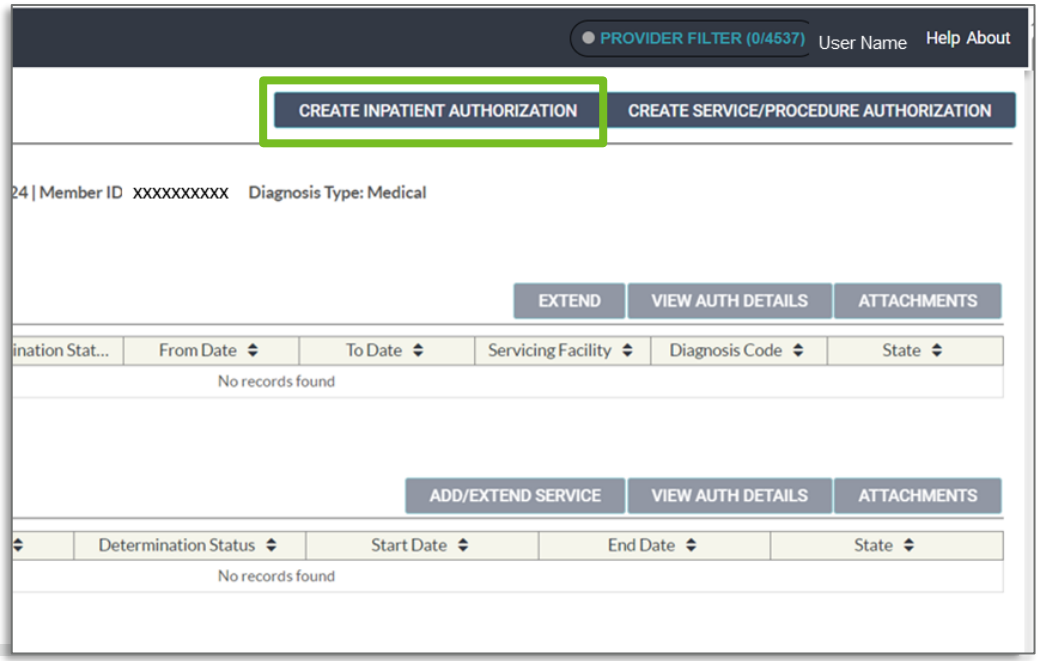
Create inpatient authorization

- Click **CREATE INPATIENT AUTHORIZATION.**

The process begins at **Prescreen details**, where you can begin adding Now you can add information to identify if an authorization is required.



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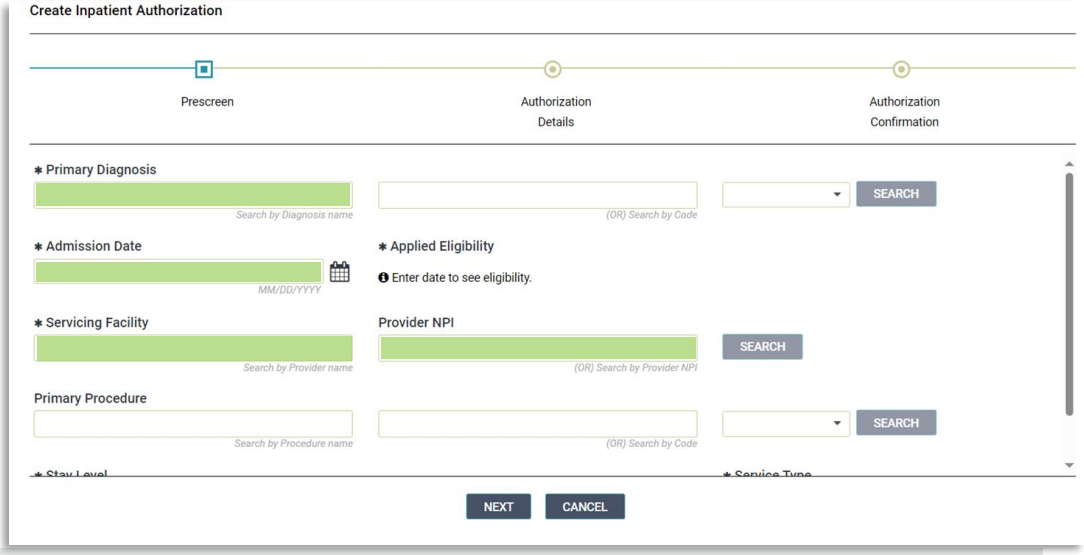
Capital

Prescreen details

Completing this prescreen page will identify the classification of an IP authorization request immediately. *In the first part of the authorization request process, you provide prescreen information.*

1. Provide the required prescreen information on this page denoted by asterisks (*), then click **NEXT**.
   - Primary Diagnosis.*
   - Admission Date.
   - Servicing Facility.



Note that the diagnosis, can be searched by name or code.

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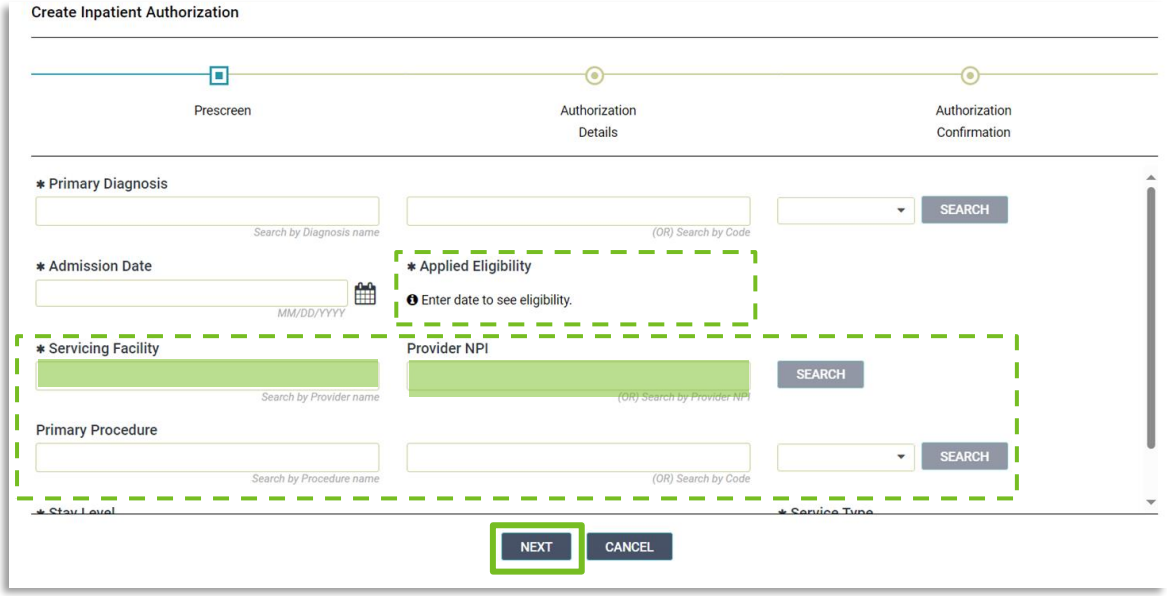
Capital

Provider name and NPI

3. Select from the **Applied Eligibility** menu. *This field auto-completes when the member's eligibility is on record. There is only one active eligibility for the date of service*.
4. Enter a **Servicing Facility** by **name** or **Provider NPI**.
5. Click **NEXT**.



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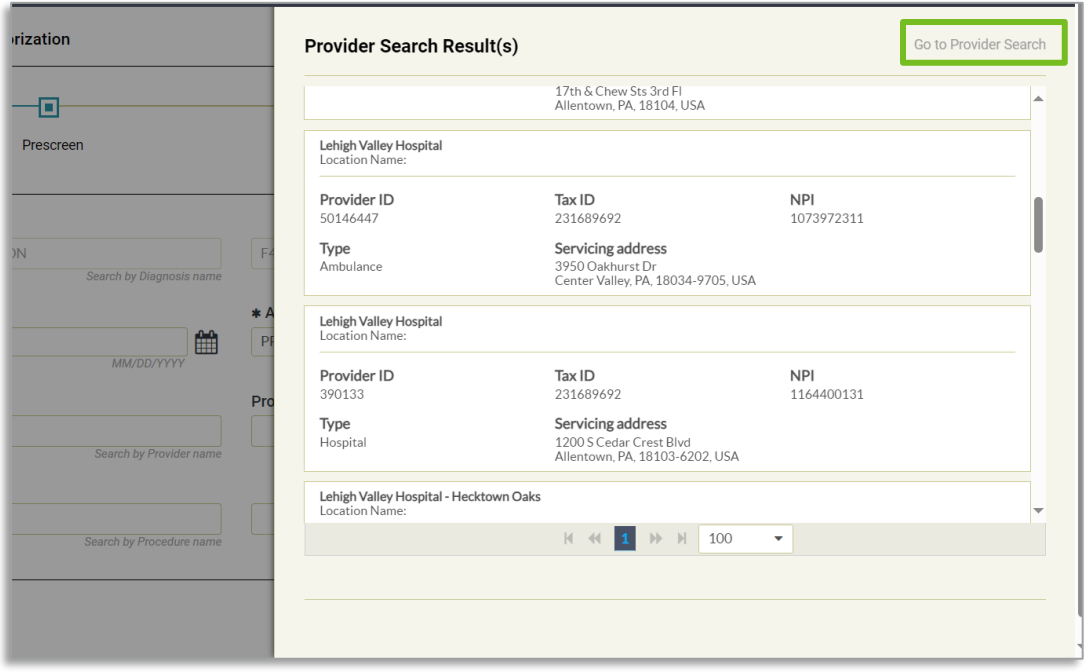
Capital

Specify the servicing provider

To search by provider number, click **Go to Provider Search** above the entry fields, on the right corner and an entry window will be spotlighted.



Searching by provider by name returns a list of providers.

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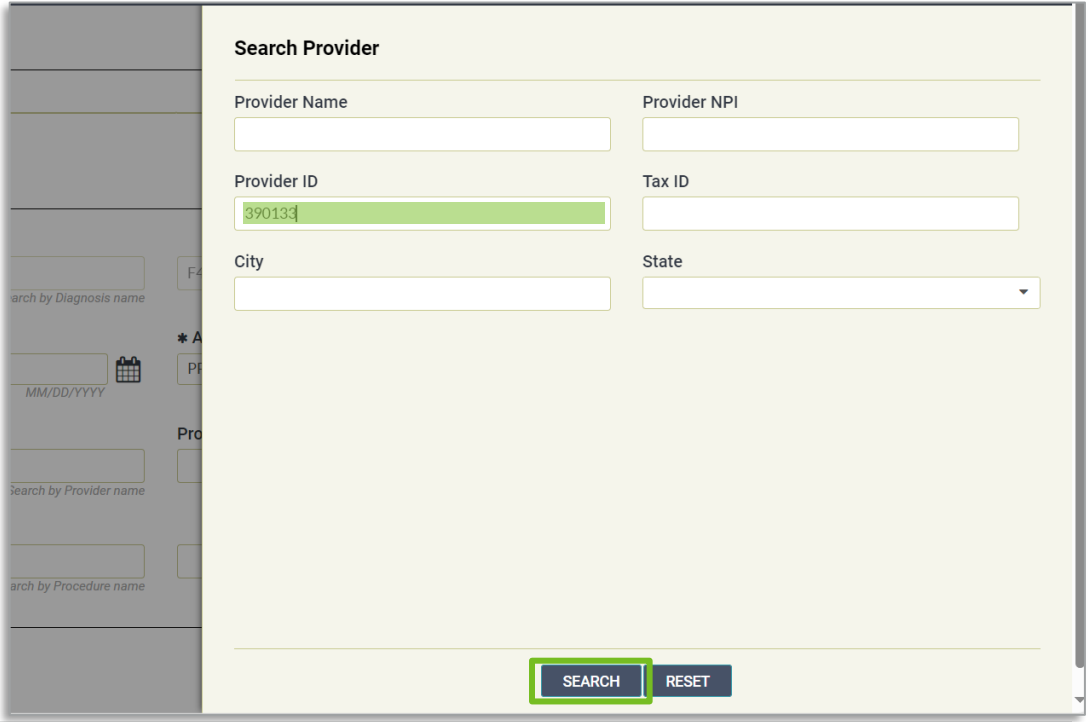
Search Provider by ID

Enter the **Provider ID** number and click **SEARCH.**



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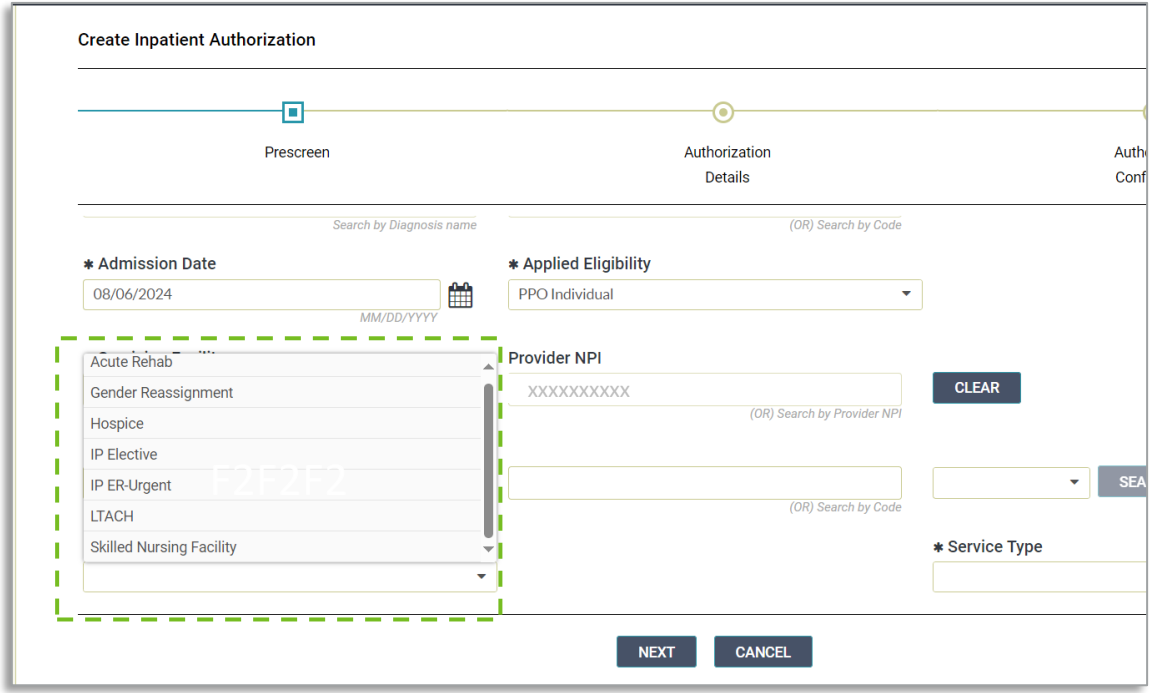
Capital

Admission type

Select the **Admission Type** from the drop-down menu.



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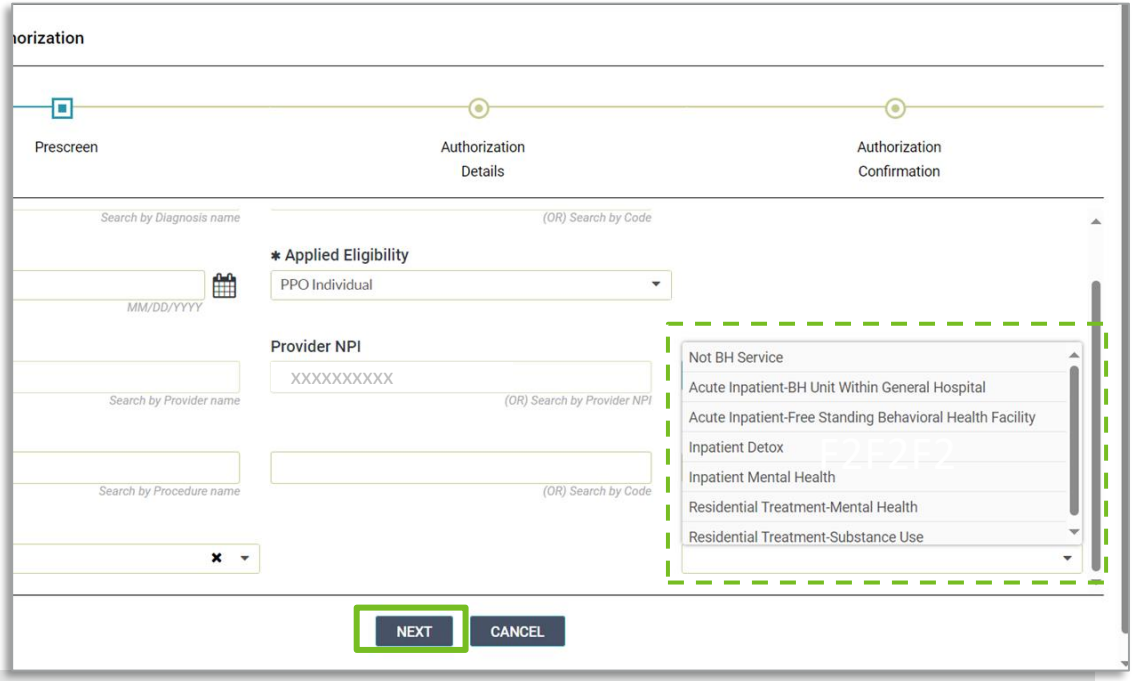
Service type

- Select the **service type** from the drop-down menu, and click **NEXT**.



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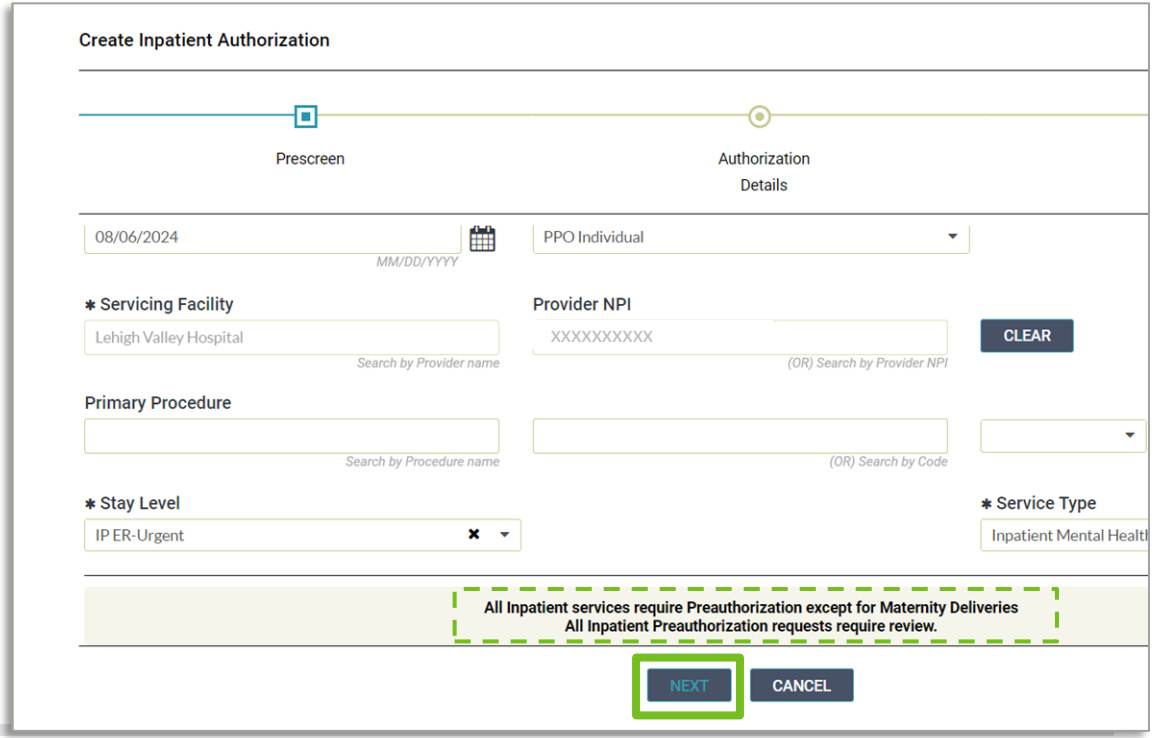
- The system process and generate a confirmation if an authorization is required.
- If an authorization is required, click **NEXT**.
- After completing the prescreen evaluation you will advance to the **Authorization Details** section.



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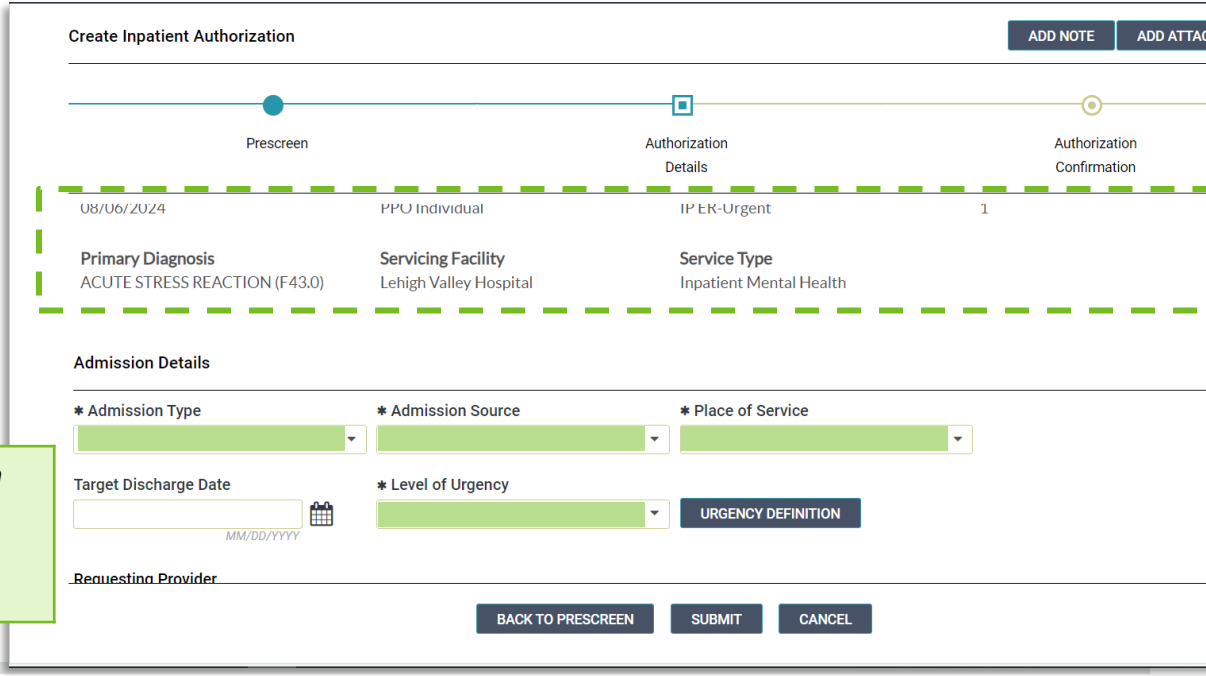
Capital

Authorization Details

When the Authorization Details page opens, the prescreen entries are displayed as view-only near the top.

Complete the required fields marked with an asterisk (*), then click **Submit.**

- **Admission Type.**
- **Admission Source.**
- **Place of Service.**
- **Level of Urgency.**



*To edit Prescreen fields, return to the Prescreen page. Click **Back to Prescreen**. The prescreen will run again to assess if authorization is required.*

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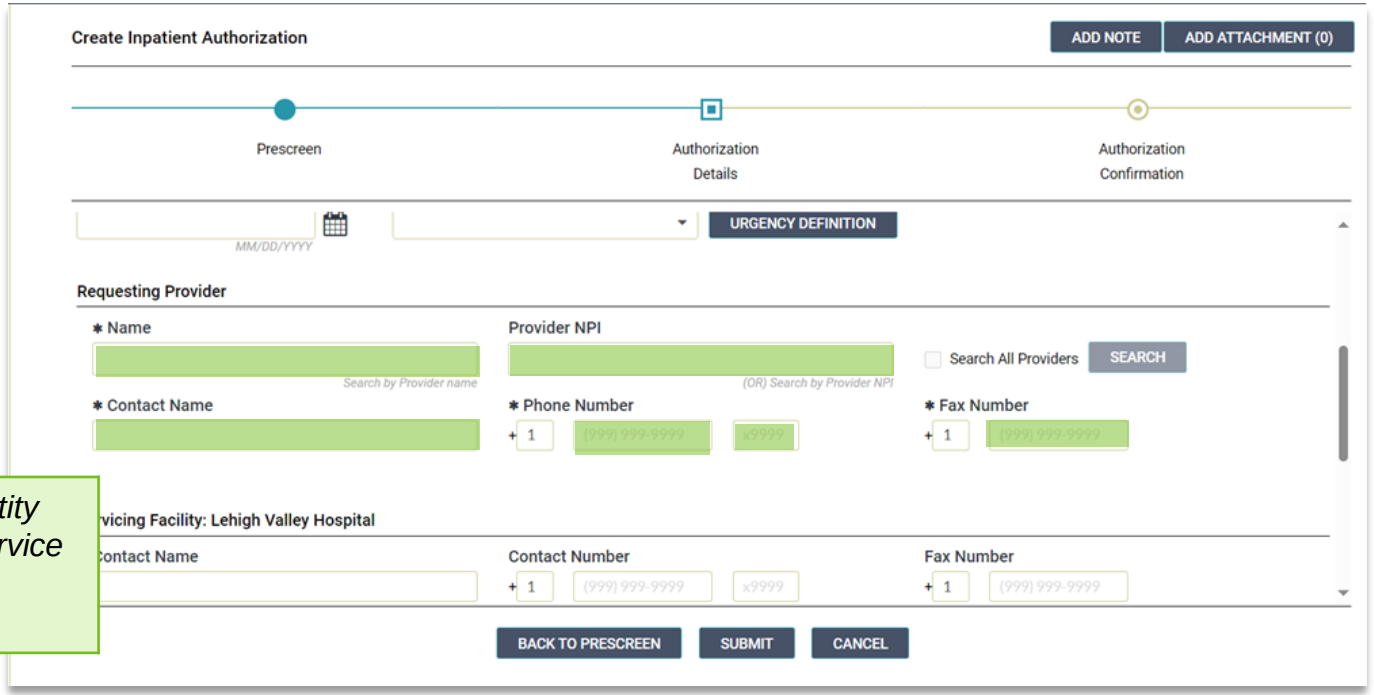
Capital

Requesting provider

Enter requesting provider information, then click **Submit**.

- **Name.**
- **Provider NPI.**
- **Contact name.**
- **Phone number.**
- **Fax number.**



The requesting provider is the entity that is requesting/ordering the service or admission for a member.

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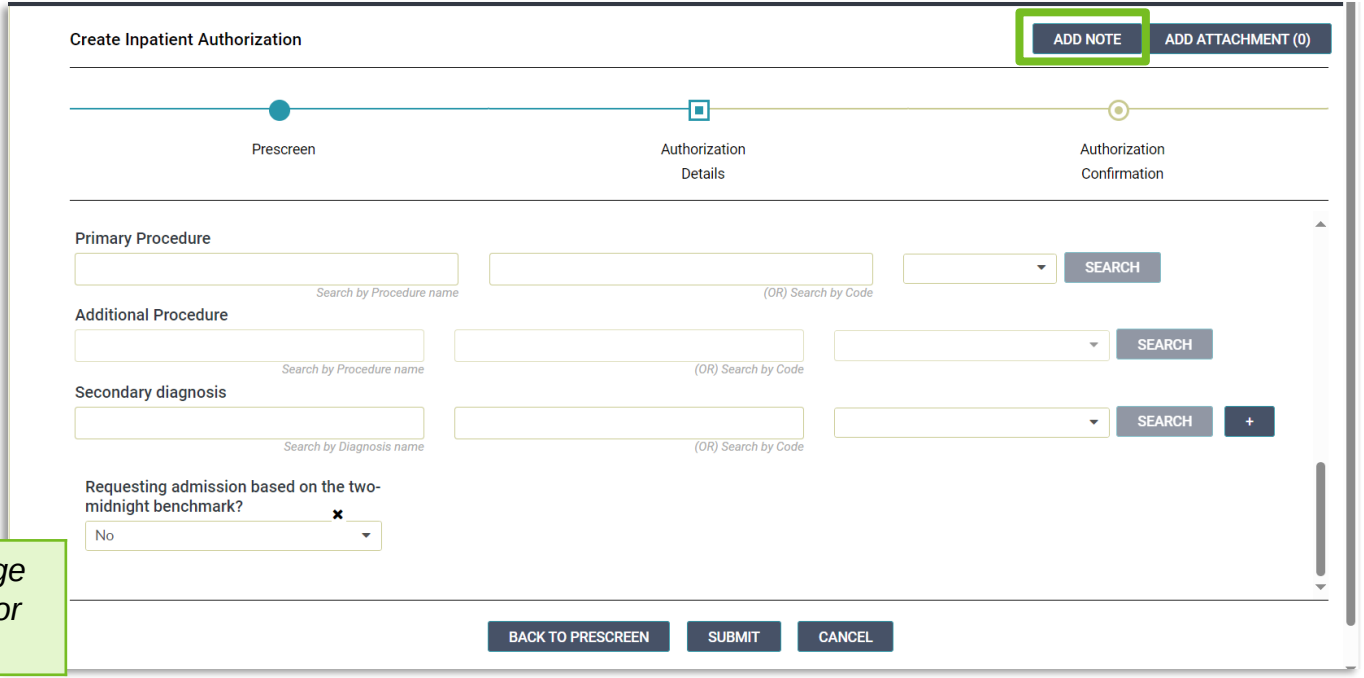
- Answer the **two-midnight benchmark** question.
- Then click Add Note to open the dialogue box.

All behavioral health services require a note with a submission.

You cannot advance to the next page if you do not add the required note or attachment.



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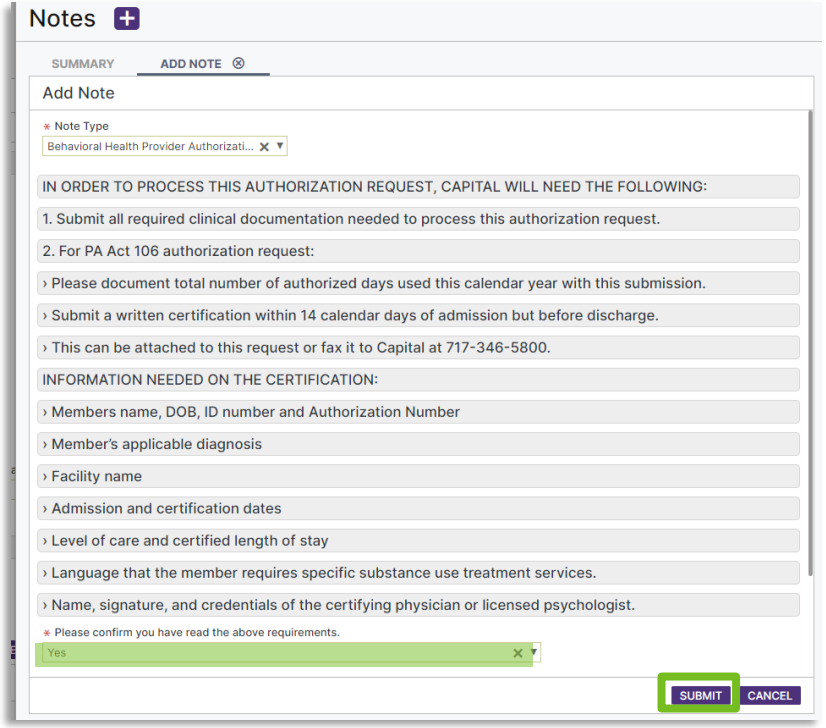
Adding a note

1. Select **Yes** confirming you have read the statement, and click **SUBMIT**.



Be sure to submit all required information in one of the following ways:

- **Attachment**: Directly attach the required documents to your submission.
- **Fax:** Fax the information to the designated number, and please add a note confirming that the fax was sent.

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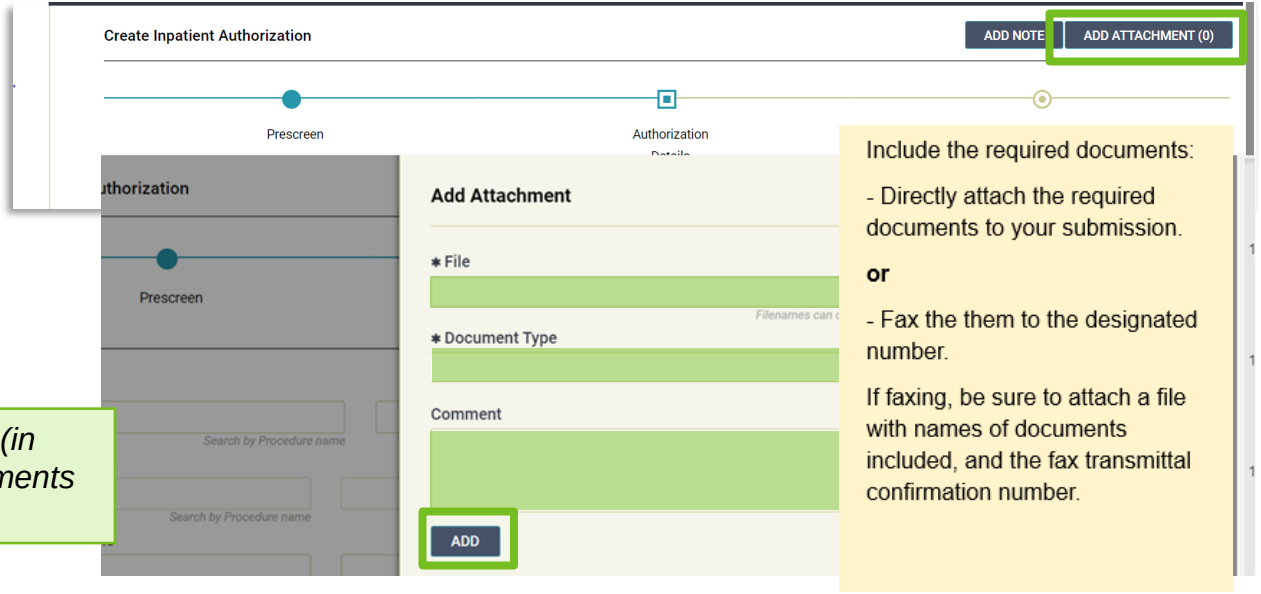
Adding an attachment

All requests require an attachment, add it on the Authorization Details page before submitting the request.

To add an attachment:

1. Select **Add Attachment** to open the Add Attachment slider.
2. Select a document type.
3. Enter a comment if needed.



*On the **Add Attachment** button, the count (in parenthesis) indicates the number of documents attached.*

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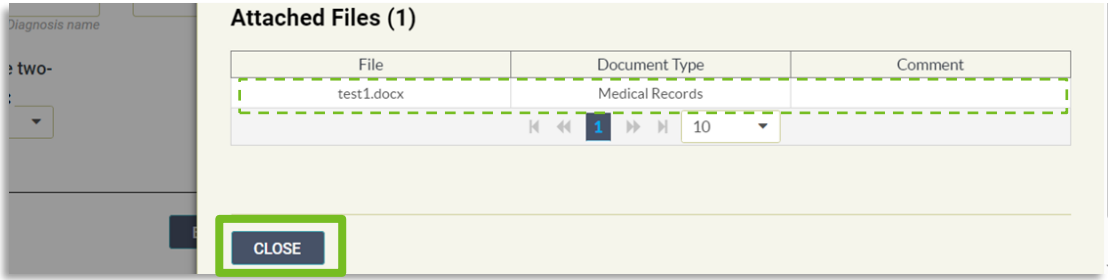
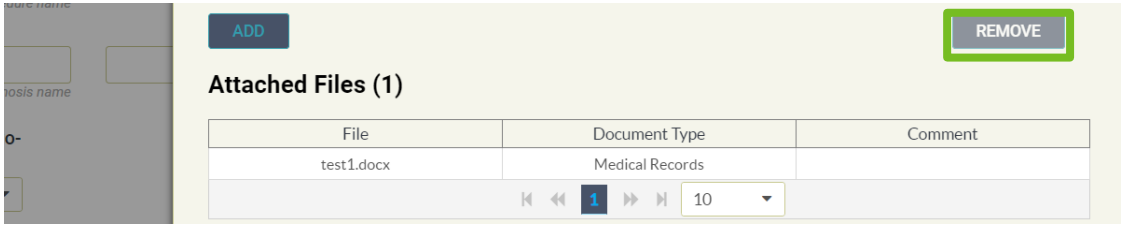
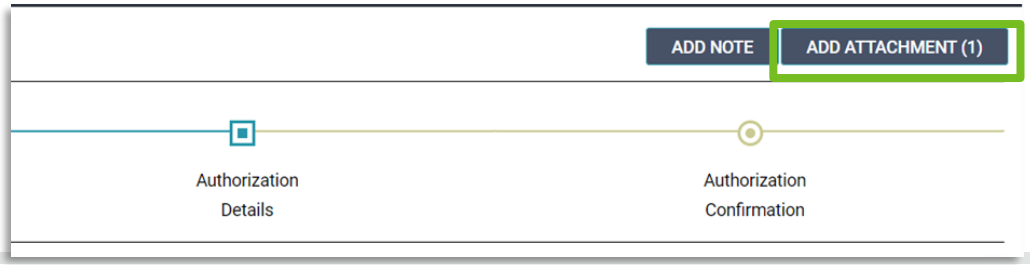
- The file will appear in the Attached Files section, and display the document type, as selected. When you are done, select **CLOSE**.



- To discard the document file, select the line item and select **REMOVE**



- In the Authorization page, the attachment will be reflected in parentheses in the ADD ATTACHMENT button.



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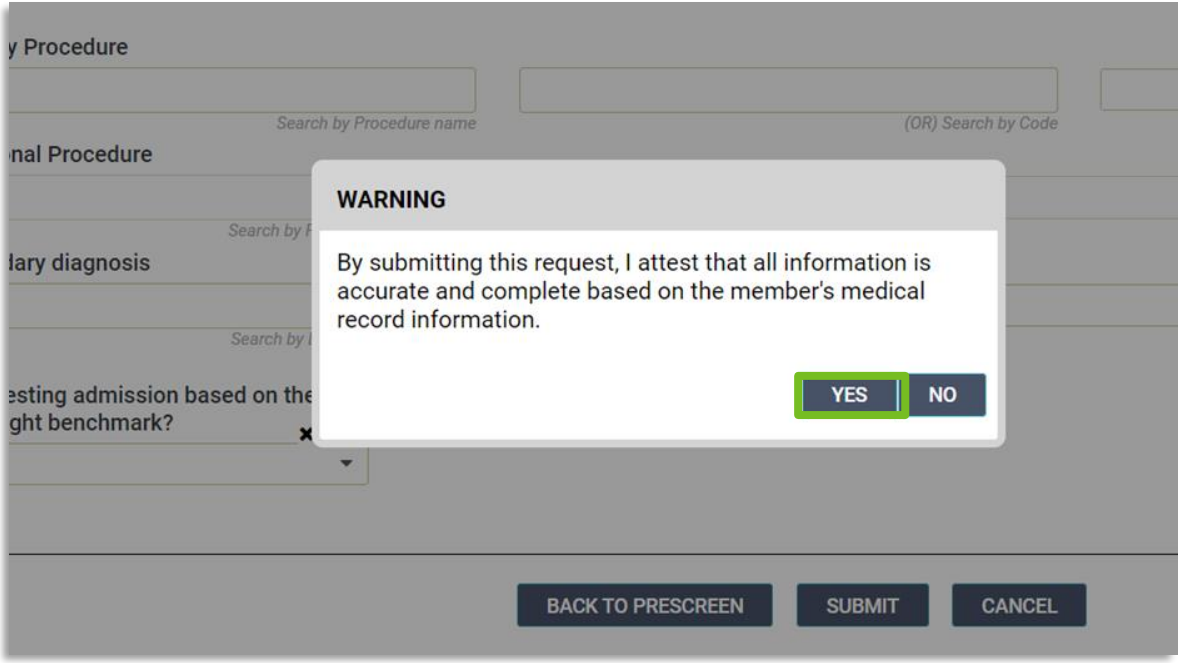
Click **YES** to confirm the attestation statement.



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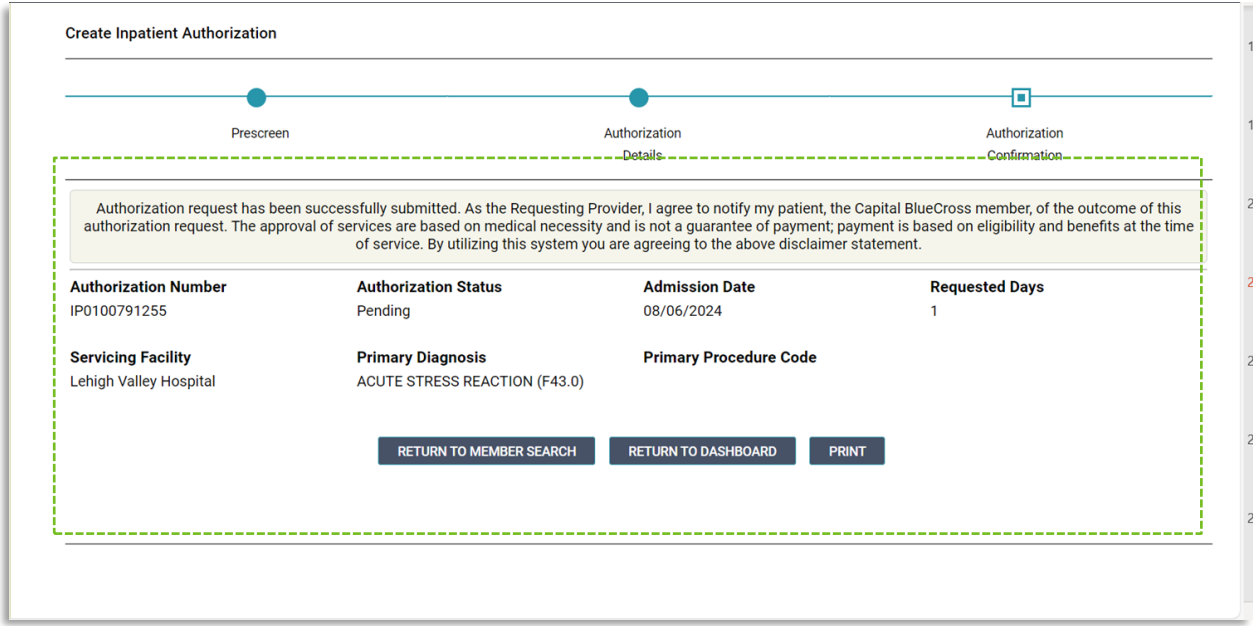
Authorization details

Upon submission, the system will generate a confirmation page displaying:

- **Authorization Number:** A unique identifier for your request.
- **Authorization Status:** The current approval status (e.g., pending, approved, denied). *If the status is "pending," the authorization is still under review.*



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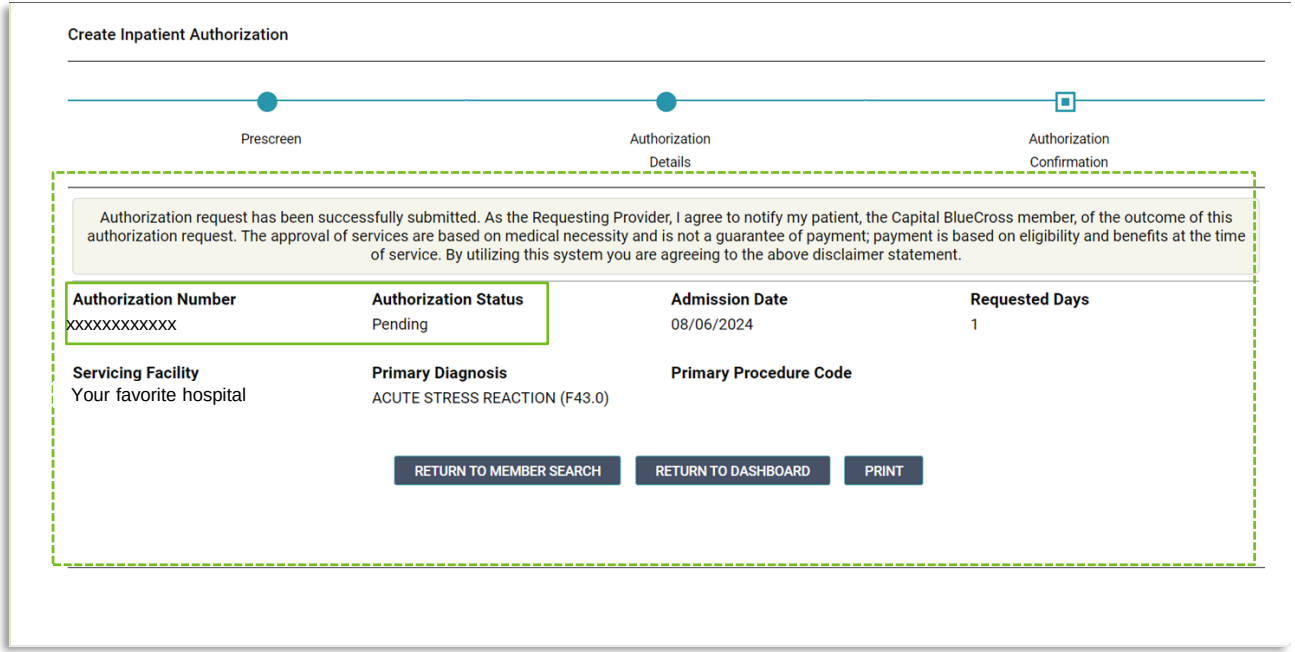
Next course of action

- To start another request by searching a member, click **RETURN TO MEMBER SEARCH**.
- To access the main authorization, click **RETURN TO DASHBOARD**.
- To save a physical copy, click **PRINT**.



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Guide to submitting authorizations

Summary table

You can view data for the parameters displayed in the columns of the summary table (as shown in the example in this topic). You can sort each column of data in alphabetical or numerical order. Each line (or row) of data applies to a specific member.

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Guide to submitting authorizations

Thank you

This completes this overview of how to submit an inpatient authorization request.

If you have any questions, please contact your administrator for assistance.