

Accessing and Utilizing the Provider Portal

Medical Authorization Unit



AGENDA

- Accessing SoonerCare Provider Portal
- Welcome screen
- Search fee schedule
- Create An Authorization
- View Authorization Status
- Authorization Notice
- HCA-13A
- HCA-12A
- MAU Web Page

ACCESSING PROVIDER PORTAL

1. www.okhca.org
2. Provider
3. Secure Sites

The screenshot displays the Oklahoma HealthCare Authority website. At the top, the logo "Oklahoma HealthCare Authority" is visible, along with navigation links: "about us | individuals | providers | research | contact us | search". A large banner features a child's face and the text "Protect Them... Immunize Today!". Below the banner are social media icons for Facebook, Twitter, YouTube, Pinterest, and LinkedIn. The main content area is divided into two columns: "individuals" and "providers". The "providers" column contains a list of links: "Claim Tools | Types", "Enrollment | EHR Incentive", "Policy | Proposed Changes", "Secure Sites | Provider Training", "Provider Letters | Updates", "Patient-Centered Medical Home", and "Medical Organization Unit". A large grey arrow points to the "providers" section. At the bottom, there are sections for "research and statistics" and "about us".

ACCESSING PROVIDER PORTAL

The screenshot displays the Oklahoma HealthCare Authority website. At the top left is the logo with the text "Oklahoma HealthCare Authority". To the right of the logo is a navigation menu with links: "about us | individuals | providers | research | contact us | search". Below the logo is a "Providers" sidebar menu with a list of items: "Types", "Claim Tools", "Enrollment", "Forms", "Secure Sites", "Policies & Rules", "Training", "Updates", and "Help". The main content area is titled "OHCA Secure Web Sites" and contains a paragraph of text explaining the login process for the New SoonerCare provider portal. Below the text is a link "SoonerCare Provider Portal" with a large grey arrow pointing to it from the right. At the bottom of the page, there is a footer with links: "Accessibility Policy | Privacy Policy | Terms of Use | Site Map | Employee E-Mail Access" and the text "Oklahoma's Medicaid Agency".

Oklahoma HealthCare Authority

about us | individuals | providers | research | contact us | search

Home > Providers

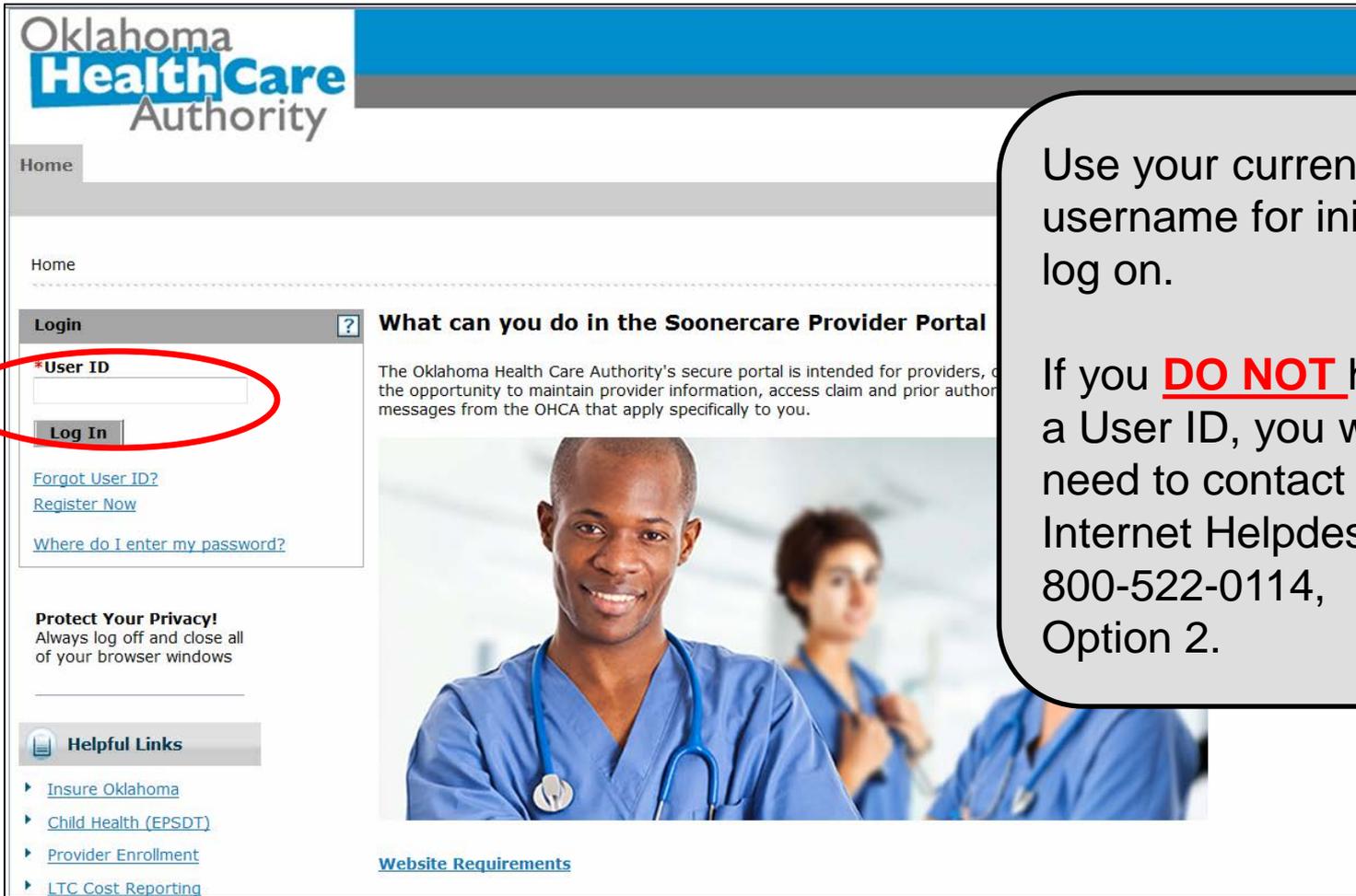
OHCA Secure Web Sites

If you are signing on to the New SoonerCare provider portal for the first time with your existing ID you should be presented with the opportunity to enter your password. If you are presented with a challenge question before you have the opportunity to enter your password, verify you entered your ID correctly. If you still are presented with the challenge question you need to ensure your provider has added you, then obtain from them your clerk code, and the date of birth and driver's license number under which you were registered. Then click on the "Register Now" link to complete your registration.

▸ [SoonerCare Provider Portal](#)

Accessibility Policy | Privacy Policy | Terms of Use | Site Map | Employee E-Mail Access
Oklahoma's Medicaid Agency

LOGGING IN



Oklahoma HealthCare Authority

Home

Home

Login ? **What can you do in the Soonercare Provider Portal**

*User ID

Log In

[Forgot User ID?](#)

[Register Now](#)

[Where do I enter my password?](#)

Protect Your Privacy!
Always log off and close all of your browser windows

Helpful Links

- [Insure Oklahoma](#)
- [Child Health \(EPSDT\)](#)
- [Provider Enrollment](#)
- [LTC Cost Reporting](#)

[Website Requirements](#)

The Oklahoma Health Care Authority's secure portal is intended for providers, and provides the opportunity to maintain provider information, access claim and prior authorization messages from the OHCA that apply specifically to you.



Use your current username for initial log on.

If you **DO NOT** have a User ID, you will need to contact the Internet Helpdesk at 800-522-0114, Option 2.

WELCOME SCREEN

Oklahoma HealthCare Authority

My Home | [Eligibility](#) | [Claims](#) | [Prior Authorizations](#) | [Referrals](#) | [Files Exchange](#) | [Resources](#) | [LTC](#) | [HCP Provider Portal](#)

[Contact Us](#) | [Logout](#)

My Home Wednesday 07/09/2014 11:36 AM CST

User Details

Welcome

- [My Profile](#)
- [Manage Accounts](#)

Provider

Name

Provider ID

Taxonomy

SC Provider Number

Provider Services

- [Member Focused Viewing](#)
- [Search Payment History](#)

Welcome Health Care Professional!



We are committed to make it easier for physicians and other providers to perform their business. In addition to providing the ability to verify member eligibility and submit claims, our secure site provides access to payment history and the ability to search for helpful information under the Resources menu.

[Contact Us](#)

[Secure Correspondence](#)

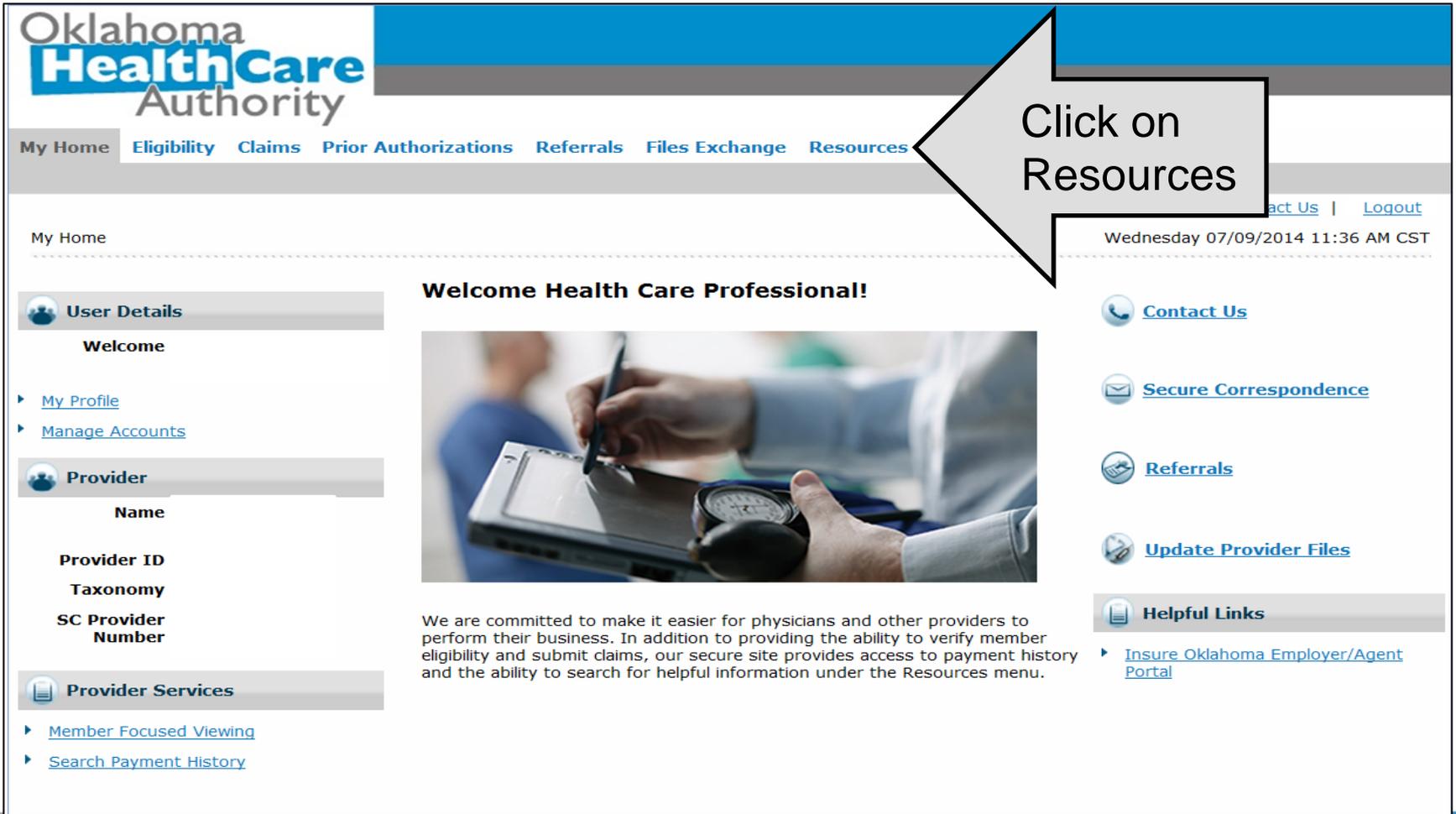
[Referrals](#)

[Update Provider Files](#)

Helpful Links

- [Insure Oklahoma Employer/Agent Portal](#)

SEARCH FEE SCHEDULE



Oklahoma HealthCare Authority

My Home Eligibility Claims Prior Authorizations Referrals Files Exchange Resources

My Home

Wednesday 07/09/2014 11:36 AM CST

Welcome Health Care Professional!

User Details

Welcome

- My Profile
- Manage Accounts

Provider

Name

Provider ID

Taxonomy

SC Provider Number

Provider Services

- Member Focused Viewing
- Search Payment History

Helpful Links

- Contact Us
- Secure Correspondence
- Referrals
- Update Provider Files
- Insure Oklahoma Employer/Agent Portal

We are committed to make it easier for physicians and other providers to perform their business. In addition to providing the ability to verify member eligibility and submit claims, our secure site provides access to payment history and the ability to search for helpful information under the Resources menu.

SEARCH FEE SCHEDULE

Oklahoma
HealthCare
Authority

[My Home](#) [Eligibility](#) [Claims](#) [Prior Authorizations](#) [Referrals](#) [Files Exchange](#) **Resources** [LTC](#)

[Search Providers](#) | [Search Fee Schedule](#) | [Search HIPAA Error Codes](#)

Resources

 **Resources**

- ▶ [Search Providers](#)
- ▶ [Search Fee Schedule](#)
- ▶ [Search HIPAA Error Codes](#)

Click Search Fee Schedule

SEARCH FEE SCHEDULE

The screenshot shows the Oklahoma HealthCare Authority website's Search Fee Schedule page. The page has a blue header with the logo and navigation links: My Home, Eligibility, Claims, Prior Authorizations, Referrals, Files Exchange, and Resources. Below the header, there are links for Search Providers, Search Fee Schedule, and Search HIPAA Error Codes. The main content area is titled "Search Fee Schedule" and includes tabs for Procedure, NDC, and DRG. A note states: "* Indicates a required field. Pricing and eligibility listed does not guarantee payment of a claim. Please refer to Provider." The form fields are: Benefit Package (Title 19), Code Type (Procedure Code), Procedure Code (E0445), Date of Service (07/09/2014), Age (36), and Modifiers. Search and Reset buttons are at the bottom.

Select the correct benefit package for the member you are servicing. Then, enter the procedure code you will be providing, date of service and age of the member. Be sure to include any modifier you will be using. When the information is complete, click the search button.

SEARCH FEE SCHEDULE

Search Results
Pricing and Limitations:
Allowed Amount: \$111.57
PA Required
Maximum Units: 1
Age Restriction: 0 - 20
Gender: Both
Attachment is Not Required
Not a Lifetime Procedure
Not restricted to any Diagnosis
Not restricted to any Specialty
Ambulatory Surgical Facility Fee: \$0.00
Ambulatory Payment Classification Fee: \$0.00
Discounted: NA

Once you have clicked the search button, the following coverage information will populate.

PRIOR AUTHORIZATIONS

Utilizing the Provider Portal to submit a prior authorization (PA) request is a great tool for providers to be able to get an immediate tracking number to keep tabs on the progress of their request. ALL PA requests, no matter how they are submitted, require the submitting provider to send in supporting medical documentation and necessary forms. This allows the Medical Authorization Unit (MAU) to perform a comprehensive review to determine the medical necessity of the service being requested.

PRIOR AUTHORIZATIONS

Submitting a request through the Provider Portal allows the provider to choose how to submit the necessary medical documentation and forms via three different methods.

1. Through Provider Portal – Upload JPEG, PDF and TIFF ONLY (limit of 10MB)
2. Fax documentation – 866-574-4991
3. Mail documentation – HP

Attn: Prior Authorization

2401 NW 23rd, Suite 11

Oklahoma City, OK 73107

HOW TO CREATE PRIOR AUTHORIZATIONS

The screenshot shows the Oklahoma HealthCare Authority website interface. The navigation menu includes: [My Home](#), [Eligibility](#), [Claims](#), [Prior Authorizations](#), [Referrals](#), [Files Exchange](#), [Resources](#), and [LTC](#). Below the navigation menu, there are links for [Create Authorization](#), [View Authorization](#), [Status](#), and [Maintain Favorite Providers](#). A callout box with a black border and rounded corners contains the text: "Hover over Prior Authorization, then click on Create Authorization". Two red arrows point from the callout box to the "Prior Authorizations" menu item and the "Create Authorization" link. The website header includes the Oklahoma HealthCare Authority logo, a "My Home" link, and a "Welcome Health Care Professional!" message. The right sidebar contains links for [Contact Us](#), [Secure Correspondence](#), [Referrals](#), [Update Provider Files](#), and [Helpful Links](#). The footer includes a "Provider Services" section with links for [Member Focused Viewing](#) and [Search Payment History](#).

CREATING AN AUTHORIZATION

Complete
PA Form

Create Authorization

* Indicates a required field.

General Provider Header Instructions

Medical Dental

Requesting Provider Information

Provider ID Contract Code ID Type Taxonomy Name SC Provider Number

Member Information

General Member Instructions

* Member ID Last Name Birth Date First Name Middle

Service Provider Information

General Service Provider Header Instructions

Service Provider same as Requesting Provider Select from Favorites

No favorite providers available.

Provider ID ID Type Name Add to Favorites

Zip Code Contract Code Taxonomy SC Provider Number

Other Information

General Other Information Instructions

* Assignment Code Managed Care Fund Letter?

Diagnosis Information

Insert diagnosis as needed. Click the Remove link to remove the entire row.

ICD Version	Diagnostic Code	Action
<input type="text"/>	<input type="text"/>	<input type="text"/>

Service Details

Click to view or update the details of a row. Click to collapse the row. Click Copy to copy or Remove to remove the entire row.

From Date	To Date	Code	Modifier	Units	Action
<input type="text"/>					

Medical Justification

Attachments

Add Service Cancel Service

Submit Cancel

CREATING AN AUTHORIZATION

Oklahoma HealthCare Authority

[My Home](#) [Eligibility](#) [Claims](#) [Prior Authorizations](#) [Referrals](#) [Files Exchange](#) [Resources](#) [LTC](#)

[Create Authorization](#) | [View Authorization Status](#) | [Maintain Favorite Providers](#)

[Contact Us](#) | [Logout](#)

[Prior Authorizations](#) > [Create Authorization](#) Wednesday 07/09/2014 02:56 PM CST

Create Authorization ?

* Indicates a required field.

Medical Dental

[Expand All](#) | [Collapse All](#)

Click on Medical

Pharmacy requests must be submitted to the College of Pharmacy and not through the Provider Portal

CREATING AN AUTHORIZATION

Requesting Provider Information

This panel contains provider information.

Provider ID	_	ID Type	NPI	Name
Zip Code	73080	Contract Code	_	Taxonomy
				SC Provider Number

This information will auto populate based on how you are logged into the system.

CREATING AN AUTHORIZATION

Member Information

Enter the Member ID. If Member ID is valid, the rest of the member information will populate.

***Member ID**

Last Name	First Name	Middle
Birth Date		

Enter Member's ID and press tab. The Name and Birthdate will Auto Populate which allows you to verify you have entered the correct Member ID

CREATING AN AUTHORIZATION

Service Provider Information

Service Provider may be required depending on the type of Assignment Code selected. To use a new service provider, enter either a valid NPI or SoonerCare Provider Number. To use an existing Service Provider and have the fields auto-populate, either click the Service Provider same as Requesting Provider checkbox or select a provider previously saved to the favorites list using the Select from Favorites dropdown. To add a new provider to the favorites list, click the Add to Favorites checkbox.

Service Provider same as Requesting Provider

Select from Favorites

Provider ID **ID Type** **Name** **Add to Favorites**

Zip Code **Contract Code** **Taxonomy** **SC Provider Number**

CREATING AN AUTHORIZATION

Other Information

Assignment Code must be selected from the dropdown. The Assignment Code can be viewed in the Prospective Authorizations results panel and in the Search Results panel when using Search Authorizations.

*Assignment Code

Managed Care

Fund

Letter?

Select the correct Assignment Code from the drop down box.

Do not place anything in the Managed Care, Fund or Letter boxes

CREATING AN AUTHORIZATION

Diagnosis Information -

Click the **Remove** link to remove the entire row.

ICD Version	Diagnosis Code	Action
Click to collapse.		
*ICD Version <input type="text" value="ICD-9-CM"/>	*Diagnosis Code <input type="text"/>	

Select the correct ICD Version you are using, then enter the correct Diagnosis Code (no decimals). Once you have entered the diagnosis click the Add button to add the diagnosis to the PA.

CREATING AN AUTHORIZATION

Service Details

Click '+' to view or update the details of a row. Click '-' to collapse the row. Click **Copy** to copy or **Remove** to remove the entire row.

From Date	To Date	Code	Modifiers	Units	Action
Click to collapse.					
*From Date		To Date			
Modifiers					
*Units	0	Dollars		Payment Method	
Remarks (optional)					
Attachments					
Add Service Cancel Service					
Submit Cancel					

Use appropriate modifiers, if applicable. You can enter up to four.

Enter units for timespan requested.

CREATING AN AUTHORIZATION

Service Details

Click '+' to view or update the details of a row. Click '-' to collapse the row. Click **Copy** to copy or **Remove** to remove the entire row.

From Date	To Date	Code	Modifiers	Units	Action
Click to collapse.					
*From Date		To Date			
Modifiers					
*Units	0	Dollars		Payment Method	
Remarks (optional)					
Attache					

Submit Cancel

Leave Payment Method blank.

Click on + sign to designate how documentation will be submitted.

CREATING AUTHORIZATION

Transmission Method	File	Control #	Action
Click to collapse.			
*Transmission Method	EL-Electronic Only		
*Upload File	AA-Available on Request at Provider Site		
*Description	BM-By Mail		
	EL-Electronic Only		
	EM-E-Mail		
	FX-By Fax		

Choose from the drop down either BM – By Mail, EL – Electronic Only or FX – By fax.

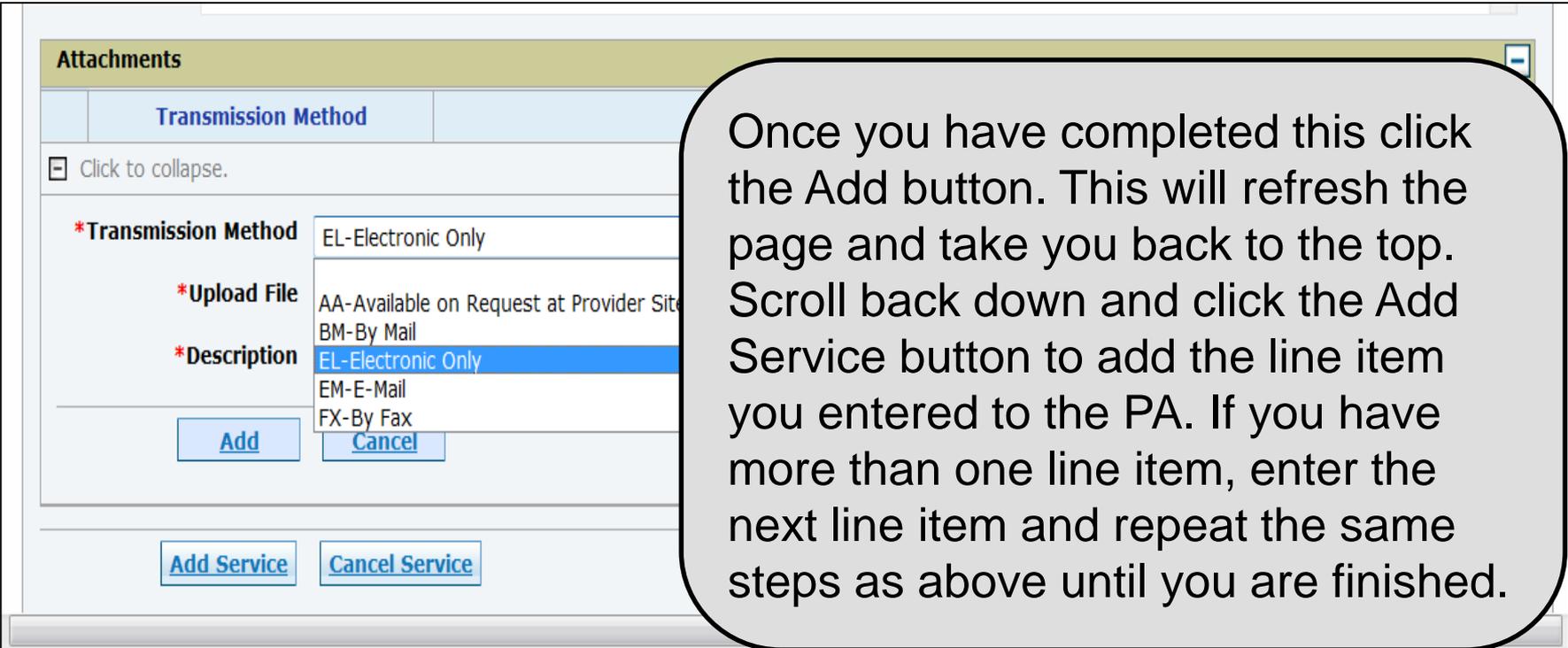
CREATING AN AUTHORIZATION

Attachments

Transmission Method
<input type="checkbox"/> Click to collapse.
*Transmission Method EL-Electronic Only
*Upload File AA-Available on Request at Provider Site BM-By Mail
*Description EL-Electronic Only EM-E-Mail FX-By Fax
<input type="button" value="Add"/> <input type="button" value="Cancel"/>
<input type="button" value="Add Service"/> <input type="button" value="Cancel Service"/>

If you have chosen EL – Electronic Only, you will then need to upload the file from your computer by clicking on the browse button (file types accepted are PDF, JPEG or TIFF and size limit of 10MB. You do not have to add documents with every line item; you can add all documents to one line item). You must include a description of the file.

CREATING AN AUTHORIZATION



Attachments

Transmission Method
EL-Electronic Only

Click to collapse.

*Transmission Method: EL-Electronic Only

*Upload File: AA-Available on Request at Provider Site, BM-By Mail

*Description: EL-Electronic Only, EM-E-Mail, FX-By Fax

Add Cancel

Add Service Cancel Service

Once you have completed this click the Add button. This will refresh the page and take you back to the top. Scroll back down and click the Add Service button to add the line item you entered to the PA. If you have more than one line item, enter the next line item and repeat the same steps as above until you are finished.

CREATING AUTHORIZATION



Remarks (optional) Line A code E1399-car seat cover.
Contact: Pat Smith 580-555-1234 x8888

Attachments

For items listed as a misc. code, such as E1399 or K0108, please use Remarks to enter the line item on which it appears along with a short description.

Also, if you are uploading documents through the Provider Portal, please enter a contact name and phone number in the Remarks section.

CREATING AN AUTHORIZATION

Service Details

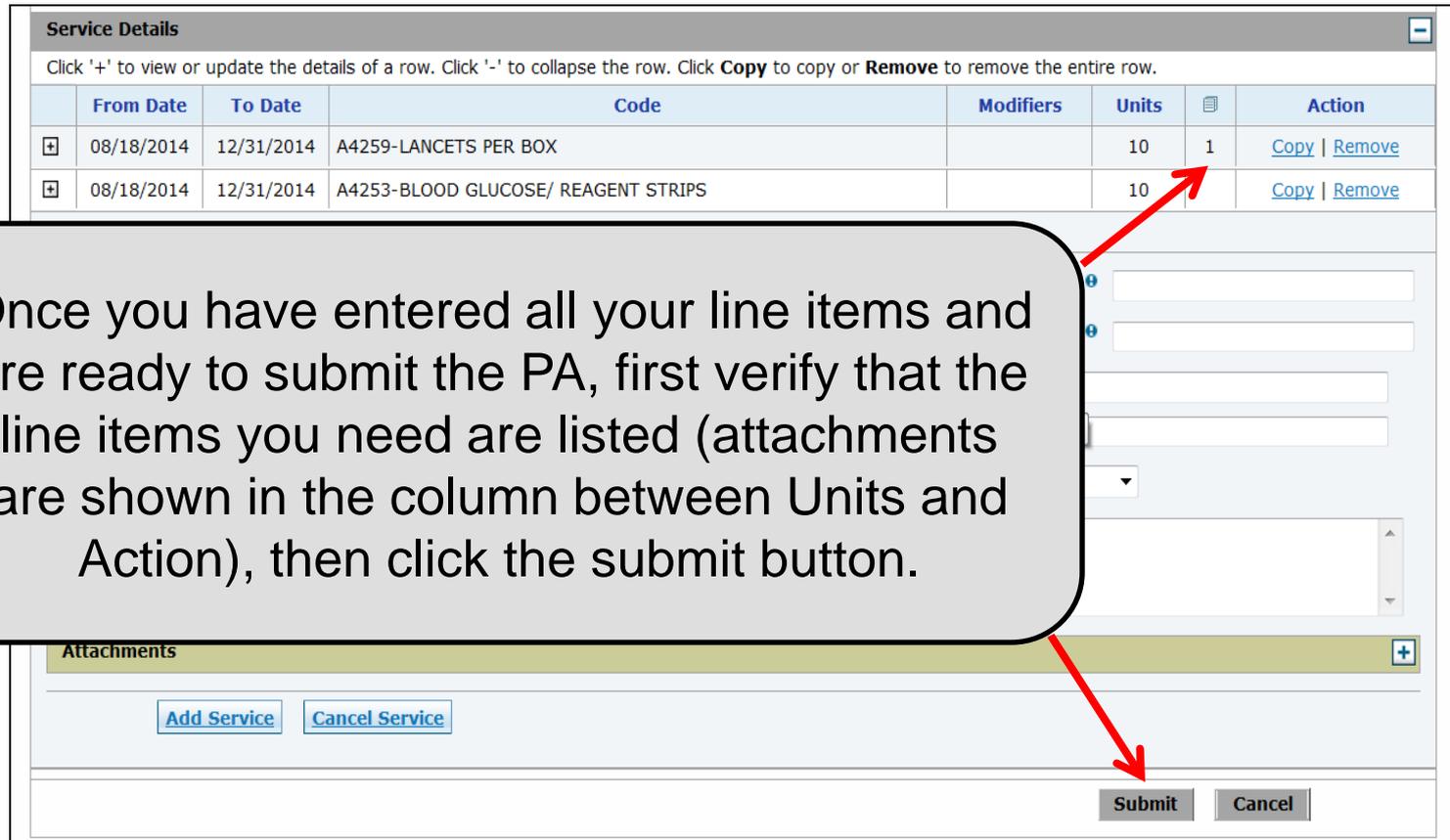
Click '+' to view or update the details of a row. Click '-' to collapse the row. Click **Copy** to copy or **Remove** to remove the entire row.

	From Date	To Date	Code	Modifiers	Units		Action
+	08/18/2014	12/31/2014	A4259-LANCETS PER BOX		10	1	Copy Remove
+	08/18/2014	12/31/2014	A4253-BLOOD GLUCOSE/ REAGENT STRIPS		10		Copy Remove

Attachments

[Add Service](#) [Cancel Service](#)

[Submit](#) [Cancel](#)

A screenshot of a web-based service authorization form. The form has a header 'Service Details' and a table with columns: From Date, To Date, Code, Modifiers, Units, and Action. Two rows are visible in the table. Below the table is an 'Attachments' section with a plus sign. At the bottom are buttons for 'Add Service', 'Cancel Service', 'Submit', and 'Cancel'. A grey callout box with rounded corners is overlaid on the left side of the form, containing text. Two red arrows point from the callout box: one to the 'Units' column of the second row in the table, and another to the 'Submit' button.

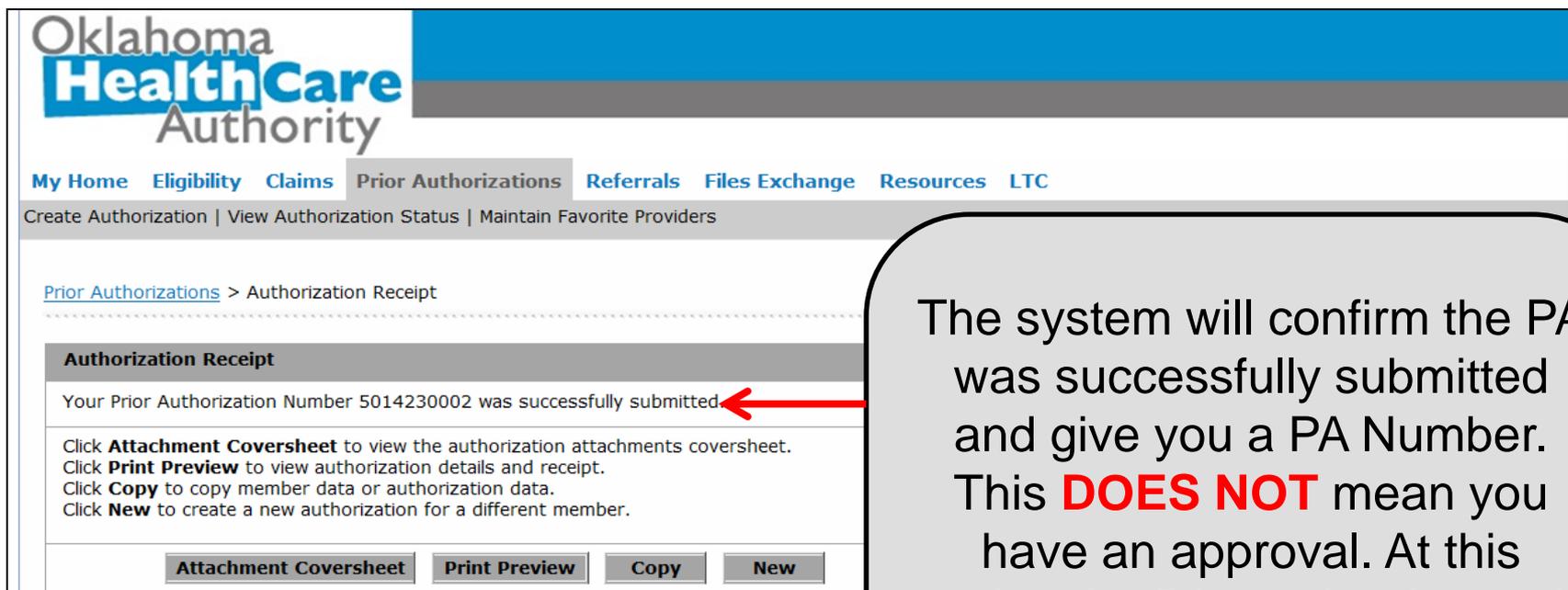
Once you have entered all your line items and are ready to submit the PA, first verify that the line items you need are listed (attachments are shown in the column between Units and Action), then click the submit button.

CREATING AN AUTHORIZATION

Service Details						
	From Date	To Date	Code	Modifiers	Units	
<input type="checkbox"/>	08/18/2014	12/31/2014	A4259-LANCETS PER BOX		10	1
<input type="checkbox"/>	08/18/2014	12/31/2014	A4253-BLOOD GLUCOSE/ REAGENT STRIPS		10	

The system will then ask you to confirm your entry. Review the information you have entered and then click the Confirm button

CREATING AN AUTHORIZATION



The screenshot displays the Oklahoma HealthCare Authority website interface. At the top left is the logo. A navigation bar includes links for My Home, Eligibility, Claims, Prior Authorizations (which is highlighted), Referrals, Files Exchange, Resources, and LTC. Below the navigation bar, there are links for 'Create Authorization', 'View Authorization Status', and 'Maintain Favorite Providers'. The main content area shows a breadcrumb trail: 'Prior Authorizations > Authorization Receipt'. A message box titled 'Authorization Receipt' contains the text: 'Your Prior Authorization Number 5014230002 was successfully submitted'. A red arrow points from this message to a callout box on the right. Below the message, there are instructions: 'Click Attachment Coversheet to view the authorization attachments coversheet.', 'Click Print Preview to view authorization details and receipt.', 'Click Copy to copy member data or authorization data.', and 'Click New to create a new authorization for a different member.'. At the bottom of the message box are four buttons: 'Attachment Coversheet', 'Print Preview', 'Copy', and 'New'.

The system will confirm the PA was successfully submitted and give you a PA Number. This **DOES NOT** mean you have an approval. At this point, the PA number is used strictly to track and review the status of the PA request.

CREATING AN AUTHORIZATION

Oklahoma HealthCare Authority

[My Home](#) [Eligibility](#) [Claims](#) [Prior Authorizations](#) [Referrals](#) [Files Exchange](#) [Resources](#) [LTC](#)

[Create Authorization](#) | [View Authorization Status](#) | [Maintain Favorite Providers](#)

[Contact Us](#) | [Logout](#)

[Prior Authorizations](#) > Authorization Receipt Monday 08/18/2014 11:23 AM CST

Authorization Receipt ?

Your Prior Authorization Number 5014230002 was successfully submitted.

Click **Attachment Coversheet** to view the authorization attachments coversheet.
Click **Print Preview** to view authorization details and receipt.
Click **Copy** to copy member data or authorization data.
Click **New** to create a new authorization for a different member.

[Attachment Coversheet](#) [Print Preview](#) [Copy](#) [New](#)

Attachment Coversheet button will only show if you have selected under attachment BM - By Mail or FX – By Fax.

CREATING AN AUTHORIZATION

Oklahoma HealthCare Authority

[My Home](#) [Eligibility](#) [Claims](#) [Prior Authorizations](#) [Referrals](#) [Files Exchange](#) [Resources](#) [LTC](#)

[Create Authorization](#) | [View Authorization Status](#) | [Maintain Favorite Providers](#)

[Contact Us](#) | [Logout](#)

[Prior Authorizations](#) > Authorization Receipt Monday 08/18/2014 11:23 AM CST

Authorization Receipt ?

Your Prior Authorization Number 5014230002 was successfully submitted.

Click **Attachment Coversheet** to view the authorization attachments coversheet.
Click **Print Preview** to view authorization details and receipt.
Click **Copy** to copy member data or authorization data.
Click **New** to create a new authorization for a different member.

[Attachment Coversheet](#) [Print Preview](#) [Copy](#) [New](#)

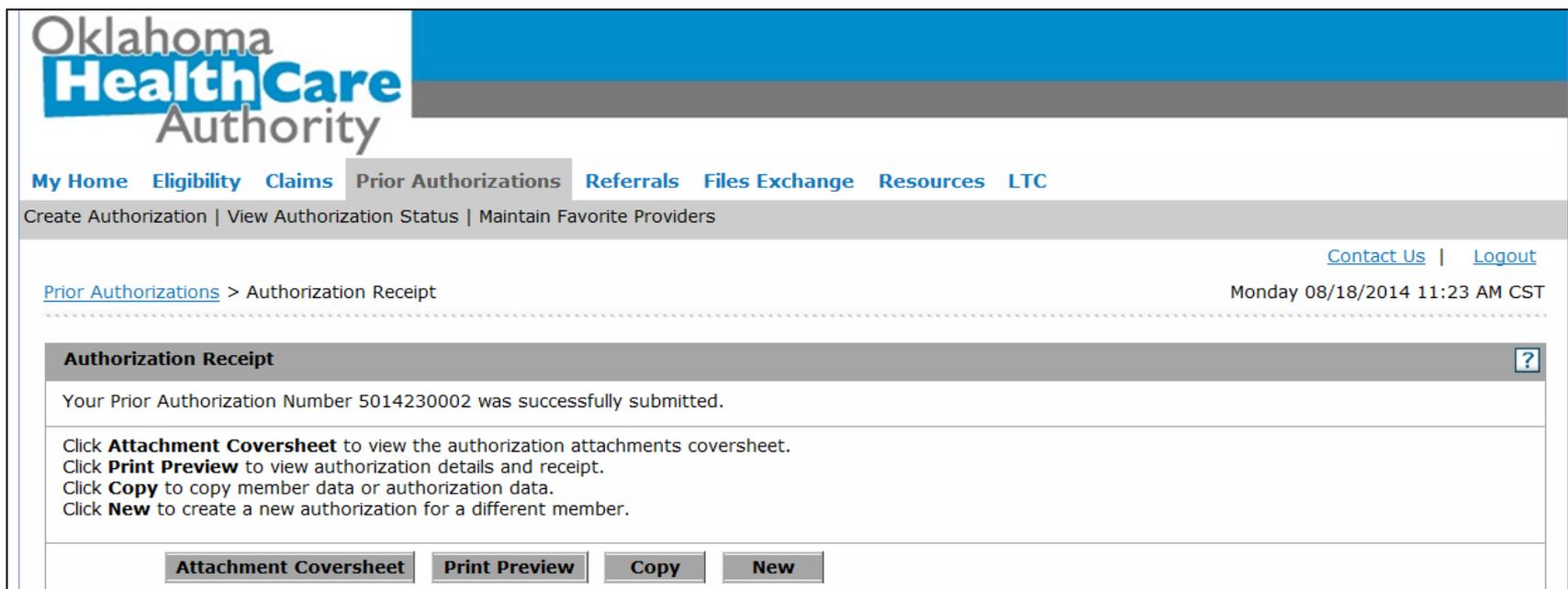
You can now click on Print Preview, which will populate another screen that will allow you to print a copy of your submission.

CREATING AN AUTHORIZATION

The screenshot displays the Oklahoma HealthCare Authority website interface. At the top left is the logo with 'Oklahoma HealthCare Authority' text. A navigation menu includes 'My Home', 'Eligibility', 'Claims', 'Prior Authorizations' (highlighted), 'Referrals', 'Files Exchange', 'Resources', and 'LTC'. Below the menu is a breadcrumb trail: 'Create Authorization | View Authorization Status | Maintain Favorite Providers'. On the right, there are links for 'Contact Us' and 'Logout', and a timestamp: 'Monday 08/18/2014 11:23 AM CST'. The main content area is titled 'Authorization Receipt' and contains the message: 'Your Prior Authorization Number 5014230002 was successfully submitted.' Below this message are instructions: 'Click **Attachment Coversheet** to view the authorization attachments coversheet.', 'Click **Print Preview** to view authorization details and receipt.', 'Click **Copy** to copy member data or authorization data.', and 'Click **New** to create a new authorization for a different member.' At the bottom of the content area are four buttons: 'Attachment Coversheet', 'Print Preview', 'Copy', and 'New'.

If you have chosen BM (By Mail) or FX (By Fax) as your submission method for documentation, click the Attachment Coversheet button. This will open up another screen with an auto-populated HCA-13A cover sheet.

CREATING AN AUTHORIZATION



The screenshot displays the Oklahoma HealthCare Authority website interface. At the top left is the logo with "Oklahoma HealthCare Authority" text. A navigation menu includes "My Home", "Eligibility", "Claims", "Prior Authorizations" (highlighted), "Referrals", "Files Exchange", "Resources", and "LTC". Below the menu is a secondary navigation bar with "Create Authorization | View Authorization Status | Maintain Favorite Providers". On the right side, there are links for "Contact Us" and "Logout", and a timestamp: "Monday 08/18/2014 11:23 AM CST". The main content area shows a breadcrumb trail: "Prior Authorizations > Authorization Receipt". A grey header bar contains the title "Authorization Receipt" and a help icon. The main text states: "Your Prior Authorization Number 5014230002 was successfully submitted." Below this, there are instructions: "Click **Attachment Coversheet** to view the authorization attachments coversheet.", "Click **Print Preview** to view authorization details and receipt.", "Click **Copy** to copy member data or authorization data.", and "Click **New** to create a new authorization for a different member." At the bottom of the content area, there are four buttons: "Attachment Coversheet", "Print Preview", "Copy", and "New".

You will need to place the HCA-13A cover sheet on top of the documents you are submitting. **DO NOT** place another cover sheet on top of the HCA-13A. The system will not accept documents being faxed or mailed if the HCA-13A is not the top sheet.

SEARCH AUTHORIZATIONS

Oklahoma HealthCare Authority

My Home Eligibility Claims **Prior Authorizations** Referrals Files Exchange

Create Authorization | View Authorization Status | Custom Events | Providers

Prior Authorizations > View Authorization Status

View Authorization Status

Prospective Authorizations Search Authorizations Authorization Notices

Enter at least one of the following fields to search for an authorization.

Authorization Information

Prior Authorization Number

Assignment Code

Code Type Code

Select a Day Range or specify a Service Date. The optional date criterion provides a search option based on the Authorized Effective and Authorized End Date of the Prior Authorization.

Authorized Day Range OR Authorized Service Date

Member Information

Member ID

Provider Information

Provider NPI

This Provider is the Servicing Provider on the Authorization Referring Provider on the Authorization

To view authorization status hover over Prior Authorizations and click on View Authorization Status.

SEARCH AUTHORIZATIONS

Oklahoma
HealthCare
Authority

[My Home](#) [Eligibility](#) [Claims](#) [Prior Authorizations](#) [Referrals](#) [Files E](#)

[Create Authorization](#) | [View Authorization Status](#) | [Maintain Favorite Providers](#)

[Prior Authorizations](#) > [View Authorization Status](#)

View Authorization Status

[Prospective Authorizations](#) [Search Authorizations](#) [Authorization Notices](#)

Enter at least one of the following fields to search for an authorization.

Authorization Information

Prior Authorization Number

Assignment Code

Code Type

Code

Select a Day Range or specify a Service Date. The optional date criterion provides a search option based on the Authorized Effective and Authorized End Date of the Prior Authorization.

Authorized Day Range OR Authorized Service Date

Member Information

Member ID

Provider Information

Provider NPI

This Provider is the Servicing Provider on the Authorization
 Referring Provider on the Authorization

Next, you will select a field to search for the PA. If searching by Assignment Code or Code, you must enter the Authorized Day Range or Authorized Service Date.

SEARCH AUTHORIZATIONS

View Authorization Status

Prospective Authorizations | **Search Authorizations** | Authorization Notices

Enter at least one of the following fields to search for an authorization.

Authorization Information

Prior Authorization Number

Assignment Code

Code Type Code

Select a Day Range or specify a Service Date. The optional date criterion provides a search option for the Authorized End Date of the Prior Authorization.

Authorized Day Range OR Authorized Service Date

Member Information

Member ID

Provider Information

Provider NPI

This Provider is the Servicing Provider on the Authorization Referring Provider on the Authorization

Search Results

The Search criteria selected in the Search Authorizations panel reflect the Search Results displayed.

Prior Authorization Number	Authorized Service Date	Member Name	Member ID	Assignment Code
5014230001				DME
5014230000				DME
5014217000				DME

[Export results ...](#)

This search example is by Member ID. It populated the PAs requested by the provider signed-in for this. Click on the Prior Authorization Number.

SEARCH AUTHORIZATIONS

View Authorization Response for GREGORY J HUMPHREY

Prior Authorization Number 5014230002
Submission Date 08/18/2014 Media T
Decision Date 08/18/2014 Update Rece

Requesting Provider Information

Member Information

Other Information

Diagnosis Information

Service Provider / Service Details Information

Provider ID _ ID Ty
Zip Code 73080 Contract Code _ Taxono

Line	Authorized From Date	Authorized To Date	Requested From Date	Requested To Date	Units	Unit Use
A	08/18/2014	12/31/2014	08/18/2014	12/31/2014	10	0

View Authorization Status ?
[Expand All](#) | [Collapse All](#)

014

+
+
+
+
-

E
A

Remarks	Status
Hide	Pending Documents

Once you have selected the Prior Authorization for which you are looking, you will get this screen. You may click the + signs in the grayed-out bars to access full details of what was entered for that section.

SEARCH AUTHORIZATIONS

Service Provider / Service Details Information
-

Provider ID _	ID Type NPI	Name	
Zip Code 73080	Contract Code _	Taxonomy	SC Provider Number

Line	Authorized From Date	Authorized To Date	Requested From Date	Requested To Date	Units	Units Used	Dollars	Dollars Used	Code	Remarks	Status
A	08/18/2014	12/31/2014	08/18/2014	12/31/2014	10	0	-	-	A4259-LANCETS PER BOX	Hide	Pending Documents

Payment Method 1-Pay System Calculated Price

Reason
068-Request pending for additional documentation.

Remarks
1 8/18/2014 8/18/2014: test external note for class. nc

View Original Request
Print Preview

Under Remarks it will state View. Click on that to pull up the comments. Remarks will give you information as to why a service was Denied, Cancelled or if and what additional documentation may be needed.

SEARCH AUTHORIZATIONS

Service Provider / Service Details Information -

Provider ID _ **ID Type** NPI **Name**
Zip Code 73080 **Contract Code** _ **Taxonomy** _____ **SC Provider Number** _____

Line	Authorized From Date	Authorized To Date	Requested From Date	Requested To Date	Units	Units Used	Dollars	Dollars Used	Code	Remarks	Status
A	08/18/2014	12/31/2014	08/18/2014	12/31/2014	10	0	-	-	A4259-LANCETS PER BOX	Hide	Pending Documents

Payment Method 1-Pay System Calculated Price

Reason
068-Request pending for additional documentation.

Remarks
1 8/18/2014 8/18/2014: test external note for class. nc

View Original Request
Print Preview

Status explains where the PA is in the review process. This particular PA is in Pending Documents status, which means OHCA needs additional information in order to complete review of the PA.

AUTHORIZATION NOTICES

View Authorization Status

Prospective Authorizations | Search Authorizations | **Authorization Notices**

Enter at least one of the following fields to search for an authorization.

Provider Information

SC Provider Number
Unread Notices 0

Search Criteria

Prior Authorization Number

Code Type

Member ID

Last Name First Name

Select a Day Range or Specify a Date Range

Day Range OR *From *To

Search Results

The Search criteria selected in the Authorization Notices panel reflect the Search Results displayed.

Prior Authorization Number	Date Sent ▼	Member	Requesting Provider	Status
5014217000	8/5/2014			

To view the Authorization Notice you will need to enter a search criteria. If you are searching by code you will need to enter a code type. Once you have entered your search criteria, click the search button. This will populate the search results. Notice that the Status is “Unread.” This indicates you have not viewed this PA notice.

AUTHORIZATION NOTICES

View Authorization Status

Prospective Authorizations | Search Authorizations | **Authorization Notices**

Enter at least one of the following fields to search for an authorization.

Provider Information

SC Provider Number
Unread Notices 0

Search Criteria

Prior Authorization Number

Code Type
Code

Member ID

Last Name
First Name

Select a Day Range or Specify a Date Range

Day Range OR *From *To

Search Results

The Search criteria selected in the Authorization Notices panel reflect the Search Results displayed.

Total Records: 1

Prior Authorization Number	Date Sent ▼	Member	Requesting Provider	Servicing Provider	Status
5014217000	8/5/2014				Unread

If you click on Prior Authorization Number to view the notice, the status will stay as "Unread." If you click on Date Sent, Status will show as "Read." This will give you the same view of the authorization as notated on slide 37.