Aetna®

# **Provider Web Portal Instructions**

This web-based portal is designed to aid the providers in managing their member base, reviewing claims, verifying eligibility and reviewing and submitting authorizations.

> December 2015 Version 3

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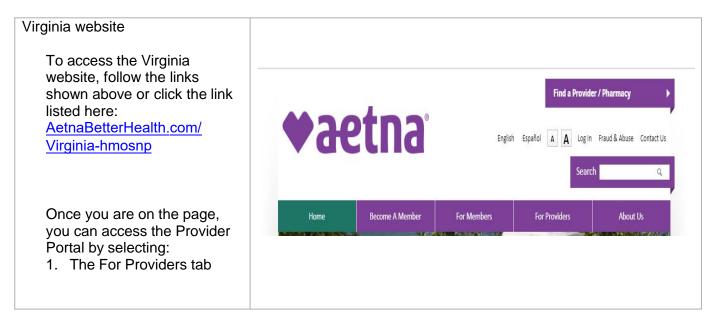
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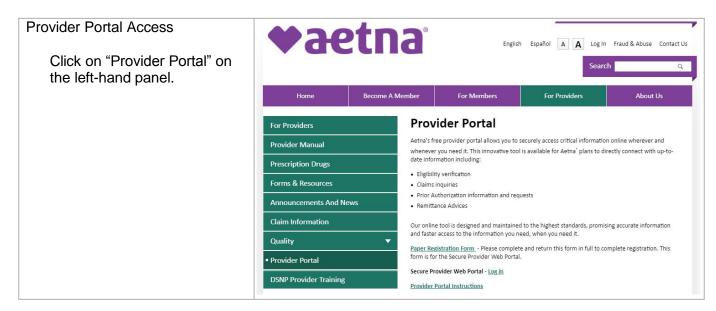
#### **General Information**

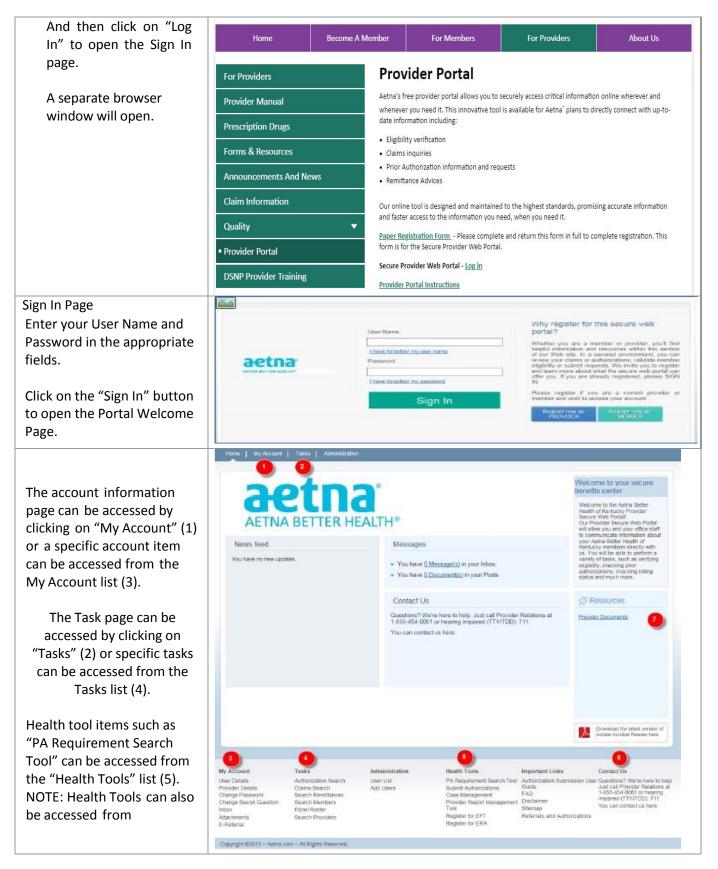
#### Virginia Website

NOTE: You must have access to the AetnaBetterHealth.com/Virginia-hmosnp



### **Provider Portal Access**





Aetna<sup>®</sup> Provider Web Portal Instructions

(2).Health Plan Contact info is listed here (6).						
Resources are listed here (7).						
Tasks Landing Page Click	Home   My Account   Tasks	a Administration				- 22
on "Tasks" tab.	201	tna	8		Welcome to your sec benefits center	cure
					Welcome to the Aetha Bet Health of Kentucky Provid	etter der
	AETNA BE	TTER HEAL	TH®		Secure Web Portal Our Provider Secure Web will allow you and your offi	o Porta fice sta
	News feed		Messages		to communicate informatic your Aetna Better Health o Kentucky members direct	of By with
	You have no new updates.		<ul> <li>You have <u>0 Message(s)</u> in your life</li> <li>You have <u>0 Document(s)</u> in your</li> </ul>		us. You will be able to per- variely of tasks, such as w eligibility, checking prior authorizations, checking b status and much more.	verifyin
			Contact Us		Ø Resources	
			Questions? We're here to help. Jus 1-855-454-0061 or hearing impaired	t call Provider Relations at d (TTY/TDD): 711.	Provider Documents	
The default selection is	Hame   My Account   Tasks					
The default selection is "Authorization Search."	Hame   My Account   Tasks	Administration Hame   Tasks   Aut	orazilan Search			
	Hame My Account Tasks	Hame + Tasks + Auff About Authorizati		ilision to perform. And you can	see if they've been approved.	
	aetna	Home + Tasks + Aut About Authorizati You can see which se	ion Search ervices your provider(s) have asked us perm	ilission to perform. And you can i	aee if they've been approved.	
	aetna	Hame    Taska    Aut About Authorizati You can see which se Search Authoriza	ion Search ervices your provider(s) have asked us perm tions	nission to perform. And you can s	see if they've been approved.	
	аетла Астила БЕТТЕЯ НЕАДТИ	Home Tasks Autorizati About Authorizati You can see which se Search Authoriza Note: Please select a Pro	ion Scarch ervices your provider(s) have asked us perm tions vider Aume		see if they've been approved.	
	aetna астия веттея нелати: Tasks	Hame    Taska    Aut About Authorizati You can see which se Search Authoriza	ion Scarch ervices your provider(s) have asked us perm tions vider Aume	ission to perform. And you can i Authorization Information	see if they've been approved.	
	ACTIVA BETTER HEALTH* Tasks Authorization Search	Home Tasks Autorizati About Authorizati You can see which se Search Authoriza Note: Please select a Pro	ion Scarch ervices your provider(s) have asked us perm tions vider Aume		see if they've been approved.	
	Activa agence HEALTH*	Hame Tasks Auth About Authorizati You can see which so Search Authoriza Note: Please soled a Pro Member/Provider Info	ion Search ervices your provider(s) have asked us perm tions witer Name ermation	Authorization Information	Authorization ID	Y
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	Active agence HEALTH* Tasks Authorization Search Claims Search Search Remittances Search Members Panel Roster	Hame    Taska    Auff About Authorizati You can see which se Search Authoriza Netic Please select a Pro Member/Provider Infi Member Last Name	ion Search ervices your provider(s) have asked us perm tions w/der Hame ermaßen Member Last Name	Authorization Information Authorization ID Authorization Status Authorization Date Range	Authorization ID Authorization Status	
	Tasks         Authorization Search         Clarms Search         Search Remittances         Scarch Members         Panel Roster         Search Piroviders	Hame    Taska    Auff About Authorizati You can see which se Search Authoriza Netic Please select a Pro Member/Provider Infi Member Last Name	ion Search ervices your provider(s) have asked us perm tions w/der Hame ermaßen Member Last Name	Authorization Information Authorization ID Authorization Status Authorization Date Range Date From (mm/dd/yyyy)	Authorization ID Authorization Status	
	Tasks         Authorization Search         Clams Search         Search Remittances         Scarch Members         Panel Roster         Search Providers         Health Tools	Hame    Taska    Auff About Authorizati You can see which se Search Authoriza Netic Please select a Pro Member/Provider Infi Member Last Name	ion Search ervices your provider(s) have asked us perm tions w/der Hame ermaßen Member Last Name	Authorization Information Authorization ID Authorization Status Authorization Date Range Date From (mm/dd/yyyy)	Authorization ID Authorization Status	v Cance
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	Tasks         Authorization Search         Authorization Search         Clarms Search         Search Remultances         Search Members         Panel Roster         Search Providers         Health Tools         PA Regularment Search Tool         Submit Authorizations	Hame    Taska    Auff About Authorizati You can see which se Search Authoriza Netic Please select a Pro Member/Provider Infi Member Last Name	ion Search ervices your provider(s) have asked us perm tions w/der Hame ermaßen Member Last Name	Authorization Information Authorization ID Authorization Status Authorization Date Range Date From (mm/dd/yyyy)	Authorization ID Authorization Status	
	Tasks         Authorization Search         Authorization Search         Clams Search         Search Remittances         Search Remittances         Search Members         Panel Roster         Search Providers         Health Tools         PA Reguirement Search Tool         Submit Authorizations         Case Management         Provider Report Management	Hame   Tasks   Auff About Authorizati You can see which so Search Authoriza Nete: Please select a Pro Member:Provider Infi Member:Last Name Provider Name'	ion Search ervices your provider(s) have asked us perm tions w/der Hame ermaßen Member Last Name	Authorization Information Authorization ID Authorization Status Authorization Date Range Date From (mm/dd/yyyy)	Authorization ID Authorization Status	

# **Member Eligibility**

The *Search Members* feature enables the user to search for members across the entire Virginia member base, and view specific information about the member.

#### Access the Member Search Function

Select "Search Members" from the left- hand panel under the Tasks heading.		
	Tasks	
	Authorization Search	
	Claims Search	
	Search Remittances	
	Search Members	
	Panel Roster	
	Search Providers	

Search Members Landing Page	Home   My Account   Tasks	Administration
There are two methods for searching:	aetna: Athabetterkality	Hone IF Tasks IF Member Eligibility About Member Eligibility Search This page allows you to search for a member. You may search Last Name and Date of Birth or by Member ID. If searching by Member ID you may search for up to (5) members at a time.
1. Date of Birth & Last Name	Tasks Authorization Search Claims Search	Search Members         A           Note: Date of Both and Member Neme are memberly fields.         Note: Meximum of five member of on the elded           Search by Last Neme, First Neme for Seat records.         Search by Member ID
<ul><li>2. Member ID</li><li>• Up to 5</li></ul>	Search Remitances Search Members Panel Roster	Search by Date of Birth and Member Name Date of Birth Date of Birth Index Name Member Name Member Name Keancel Cancel
members may be included in each search.	Search Providers Health Tools PA Requirement Search Tool	Search Results
	Submit Authorizations Case Management	Search Tips

# Search by Date of Birth and Last Name

A date of birth and a last	Search Members			
name must be entered.	Note: Date of Birth and Member Name are mandatory fields. Search by Last Name, First Name for best results.			
	Search by Date of Birth and Member Name			
Then, click the Search	Date of Birth Date of Birth (mm/dd/yyyy)			
button	Member Name * Member Name			
	Search Cancel			

If either or both fields are left blank, error messages such as these will appear.	Message from webpage     Image: Constraint of Birth       Please enter Member's Last Name and Date of Birth       OK
Partial last names are permitted.	Search Members       Mit: Martie Last Name Is renation field       Search by Date of Birth       Oate of Birth       00/22/1987       Member Last Name       Search is Canced
la this evenue as member	Search Members
In this example, no member	Search Results(0)
was found meeting the search criteria.	Active Members (0) InActive Members (0)
cincila.	Member ID DOB Member Name Cligibility Benefits Provider Name Provider Effective Dates
Notice that the Search	No results found
Members window has	Search Tips 🗶
collapsed and hides the	
search criteria used.	

Click on the pointer to expand the window.	Search Members Note: Date of Birth and Membe	r Last Name are mandator	r fields		Note: Maximum of	f five member Id ca	n be added	
	Search by Date of Bir	th and Last Name 06/25/1987			Search by M Member ID			Add Another
	Member Last Name	AAA Search Ca	ncel			Search	Cancel	
	Search Results(0)	Active Membe	rs (0)				InActive Members (0)	•
	Member ID	DOB	Member Name	Eligibi	llity ive Dates	Benefits	Provider Name	Provider Effective Date
					ults found			
	Search Tips							•



Here is an example of a Search Results(1) successful search. Active Members (1) Member ID Member Na Benefits Provider Nan Eligib der tive Dat Notice that there is an "active" 01/01/2014 12/21/2078 T J HEALTH PARTNERS LLC 12/29/1942 DAVIS, DEONTE 74018 - Copay tab (1) and an "inactive" tab (2). Our member is on the 1 1 of 1 results B

active tab.	
Our member's eligibility (A), Benefits (B) and Provider Assignment (C) are also shown.	
To view additional member details, click on the hyperlinked member ID (3).	

Member Details Screen	Member Details					
	Demographic Details	1				
1. Member demographic info	Member ID	0017040	NUMPE.	Member Name	COENTE	LT, ANDELIGUE K
2. Eligibility and Plan info	DOB	01/11/2	011	Gender	F	
3. HEDIS information	Age	3		Address	62389 F	77,010,000 7,010,000,000,000,000,000
4. PCP Details	Work Phone	887-688	1734	Home Phone		
	Eligibility Information	2				
	Benefit	Member ID	Rate Code	Plan ID	Effective Date	Term Date
	Aetna Better Health Of Nebraska	8070+200000		CHICSPOID3	07/01/2012	09/30/2012
	Aetna Better Health Of Nebraska	00704280808		CHCSP0003	10/01/2012	02/28/2014
	Aetna Better Health Of Nebraska	8070+280808		GH05970003	03/01/2014	12/31/2078
	HEDIS Information	3				
	Intervention Code	-	Intervention Meas	ure	Intervention Steps	1
			No	Data Found		
	Primary Care Physic	ian (PCP) Details 🤇				
	PCP Name	Provider Type	Coverage Type	Network	Effective Date	Term Date
	Spailtman, John G	PCP	Medical	Aetna Better Health Of Nebraska	07/01/2012	09/30/2012
	Spellman, John G	PCP	Medical	Aetna Better Health Of Nebraska	10/01/2012	02/28/2014
	Speitman, John G	PCP	Medical	Aetna Better Health	03/01/2014	12/31/2078



#### Search by Member ID - Single

A member ID must be entered or an error will be received.	Note: Maximum of five member id can be added Search by Member ID Member ID 1 * Add Another Search Cancel
	Message from webpage

Enter a valid ID – results are the same as the search by date of birth and last name.
---

Search Results	Search Result	ts(1)	1			2	-	
Notice that there is an "active"		Active Mem	bers (1)	_	InActive Members (0)			
tab (1) and an "inactive" tab	Member ID	DOB	Member Name	Eligibility Effective Dates	Benefits	Provider Name	Provider Effective Date	
(2). Our member is on the	00179009641	12/29/1942	DAVIS, DEONTE T	01/01/2014 - 12/21/2078	74018 - Copay	T J HEALTH PARTNERS LLC	01/01/2014	
active tab.	Sh 3 1 - 1 0	of 1 results		À	в	0	1	
Our member's eligibility (A), Benefits (B) and Provider Assignment (C) are also shown.								
To view additional member details, click on the hyperlinked member ID (3).								

# Search by Member ID - Multiple

The advantage of the Search by Member ID

The advantage of the Search by Member ID over the search by name/DOB is that	Note: Maximun Search by M	n of five member id can be added ember ID	
this feature allows the user to search for as many as five (5)	Member ID	A###########1	Add Another
members at the same time.	Member ID	Member ID	
Click the "Add Another" hyperlink to add additional fields.		Search Cancel	*

Here, three (3) Member IDs have been entered.	Note: Maximum of five member id can be added Search by Member ID
Click the "Search" button to	Member ID A########1 * Add Another
begin the search.	Member ID A########2
	Member ID A########3
	Search Cancel

Here are the search results.

All three (3) members are eligible and active as shown by the "Active" tab (1). Notice the number in parenthesis. The eligibility effective dates are also shown (2).

To view additional member details, click on the hyperlinked member ID (3).

Provider
Effective Date
01/01/2014
06/01/2014
1 😱 🖨

lember Details Screen	Member Benefit	5					
	Overview						
1. Member demographic info	Member ID	10	1721134040	Nan	ne	BROMAK, B	RICHA CL
2. Eligibility and Plan info	Birth date	10/	07/2002	Gen	der	F	
3. HEDIS information	Age	13		Add	ress	60437 BAN CIRCLE ,A	UD SHLAND ,KN/,411101
4. PCP Details	Work Phone			Hon	ne Phone	383-675-34	70
	Eligibility Information	tion 2					
	Benefit	Member ID	Rate Code	Plan ID	Effective Date (MM/DD/YYY)	e Term Date Y) (MM/DD/YYYY)	СОВ
	74020 / 74021 - No Copay	1000721100000	ZC103010	QN/25PP00H5	06/01/2014	12/31/2078	
	MEDICARE PLAN B	A36302055	MED_B	BP0003	06/01/2014	12/31/2016	
	74020 / 74021 - No Copay	1131372-113431345	ZC103010	GN/259P004(5	05/01/2014	05/31/2014	
	74020 / 74021 - No Copay	1031072-113401345	ZC103010	GW259P0046	03/01/2014	04/30/2014	
	74020 / 74021 - No Copay	10337211340345	ZC103010	GW25P0045	01/01/2014	02/28/2014	
	74006 / 74010 / 74012 - No Copay	10072190046	ZC103010	GN/259P0056	06/01/2013	12/31/2013	
	74006 / 74010 / 74012 - No Copay	10072194046	ZC103119	GN/258P0056	03/01/2013	05/31/2013	
	74006 / 74010 / 74012 - No Copay	10107211340345	ZC103119	GW258P0056	01/01/2013	02/28/2013	
	HEDIS Information	3					
	Intervention Code		Interven	tion Measure No Data Fo		Intervention Steps	
				no bala ro			
	Primary Care Phys PCP Name	sician (PCP) Deta Provider Typ		e Type Net		Effective Date (MM/DD/YYYY)	Term Date (MM/DD/YYYY)
	Conrolto, Steven A	PCP	Medical	740 Coj		06/01/2014	12/31/2078
	Conrolto, Steven A	PCP	Medical	740 Coj		05/01/2014	05/31/2014
	Conrolto, Steven A	PCP	Medical	740 Coj		03/01/2014	04/30/2014

At the bottom of the page, click:

- 1) Done: to begin another search.
- 2) Go Back to Member Eligibility: to return to the previous screen.

Copay Amount	Copay Description	
	No Data Found	
View Claim Status	-	Done
Go back to Member Eligibility results	<b>—</b>	-

# Search Providers

The *Search Providers* feature enables the user to search for providers by provider information such as name, specialty, type, location or provider ID.

#### Access the Provider Search Function

Search Providers Landing Page	Home   My Account   Tasks	Administration			
There are two methods for searching for providers:	aetna: AETNA BETTER HEADY	Home > Tasks > Provide About Provider Sea This page allows you to ZIP Code or by Provide	roh search for a provider based upon various	criteria. You may search by Name, f	Arovider Type, Provider Speciality, City,
<ol> <li>By Provider Information (Name, Type, Specialty,</li> </ol>	Tasks Authorization Search Claims Search	Search Providers	e entered for this search.	Note: You must enter a provider /D Provider Information	*
or Location)	Search Remittances Search Members Panel Roster	Provider Last Name Provider Type Specialty	Provider Last Name Provider Type V Specially V	Provider ID	Provider ID
2. By Provider ID	Bearch Providers   Health Tools  PA Requirement Search Tool	Provider Location City ZIP	Giy		
	Submit Authorizations Case Management Provider Report Management Tool	24	ZIP Search Cancel		Search Cascel
	Register for EFT Register for ERA	Search Results			*
		Search Tips			·

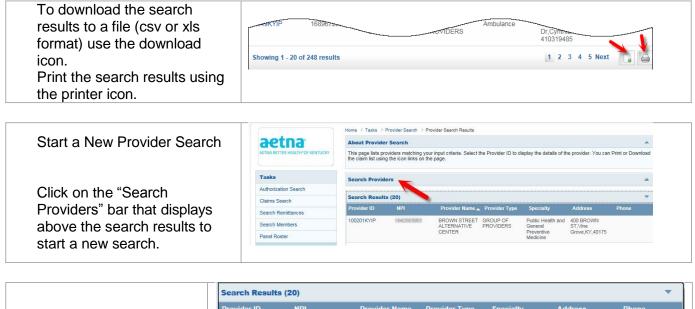
# Search by Provider Information or Location

Searching by Provider	Search Providers			
Information	Note: At least 1 field mus	t be entered for this search.		
	Provider Information			Message from webpage
Search by any combination of	Provider Last Name	Provider Last Name		
Last Name, Provider Type,	Provider Type	Provider Type	•	At least 1 field must be entered for this search
Specialty or Location.	Specialty	Speciality	V	-
	Provider Location			
Enter the search criteria and	City	City		ОК
click the "Search" button. At	Zip	Zip		
least one criterion must be		Search Cancel		
entered or an error message				
is displayed.				
The "Cancel" button will clear				
the criteria fields for a fresh				
search.				

Searching by Provider Last Name	
The Provider Last Name field	Provider Last Name Hans
can be used to search by a	
provider last name or a partial last name.	
For example, a search on	
"Hans" would return a list of providers with last names of	
both Hansen and Hanson.	Provider Last Name Banner
The Provider Last Name field	
can also be used to search for a facility or organization	
name.	
For example, a search on	
"Banner" would return a list of	
providers that included the various locations for Banner	
Health.	

# Search by Provider ID

Sample Provider Search	Search Result	s (20)					•
Results	Provider ID	NPI	Provider Name 🔺	Provider Type	Specialty	Address	Phone
Nesuis	100201KYIP	1940/583083	BROWN STREET ALTERNATIVE CENTER	GROUP OF PROVIDERS	Public Health and General Preventive Medicine	400 BROWN ST,Vine Grove,KY,40175	
	78986KYIP	1780767575	BROWN PURYEAR ,LATO NYA	PHYSICIAN	Pulmonary Disease	4900 Houston Rd,Florence,KY,4 10424824	858-212-5288
	333357KYIP	1000001010002	BROWN NEWTON , KILEY Y	PHYSICIAN	Certified Nurse Practitioner	1700 OLD BLUEGRASS AVE STE 200,Louisville,KY, 402151174	
	138899KYIP		BROWN MD,SETH A	SERVICE LOCATION		4910 CHAMBERLAIN LN,Louisville,KY,4 02411110	502-446-5300
	303595KYIP		BROWN MD,ERIC C	SERVICE LOCATION		131 HOSPITAL DB_Salem,KY,420	275-868-7258
If the search returns more	JAKYIP	16896720			Ambulance		
results than will fit on a page,				VIDERS		Dr,Cyntme 41031949	
use the page numbers on the	Showing 1 - 20 o	f 248 results				1 2 3 4 5	Next 😱 🖨
bottom right to navigate to additional results.							



	Search Results (	20)					
	Provider ID	NPI	Provider Name 🔺	Provider Type	Specialty	Address	Phone
wing Provider Detail	100201KYIP	1940/583083	BROWN STREET ALTERNATIVE CENTER	GROUP OF PROVIDERS	Public Health and General Preventive Medicine	400 BROWN ST,Vine Grove,KY,40175	
0	78986KYIP	1790767515	BROWN PURYEAR ,LATO NYA	PHYSICIAN	Pulmonary Disease	4900 Houston Rd,Florence,KY,4 10424824	858-212-5200
w additional of a provider click Provider ID in the	333357KYIP	10010302	BROWN NEWTON ,KILEY Y	PHYSICIAN	Certified Nurse Practitioner	1700 OLD BLUEGRASS AVE STE 200,Louisville,KY, 402151174	
sults.	138899KYIP		BROWN MD,SETH A	SERVICE LOCATION		4910 CHAMBERLAIN LN,Louisville,KY,4 02411110	502-446-5300
	303595KYIP		BROWN MD,ERIC C	SERVICE LOCATION		131 HOSPITAL DR.Salem,KY,420	279-866-7256

	_							
Comunic Duravidou Datail	Provider Details							
Sample Provider Detail	General Information							
	Provider Full Name	JOHNSON CITY EYE SURGE CENTER	RY Gender	Gender				
	Provider Address 1	110 MED TECH PKWY STE 2	Provider Address 2					
	City	Johnson City	State	TN				
	ZIP	37604-2256	NPI	172	96×275×			
	Provider Type	GROUP OF PROVIDERS	DOB					
	Provider ID	14810BKONP	Phone					
	Federal Tax ID	3078114030846	Home Phone					
The detail page shows a	Specialty	Ambulatory Surgical Center (A	SC) Language					
	Degree		Fax					
variety of information about	Email							
the provider including their								
	Specialties & Certifica	tions						
NPI number, address, phone	Specialty	Specialty Type	Certification Statu	s Ce	rtification Date			
and affiliations.	Ambulatory Surgical Ce (ASC)	nter PRIMARY		11/	/01/2011			
and anniations.								
	Provider Network Affil	iations						
	Network			Aff	filiation Type			
		N	o Data Found					
Click the "Done" button to								
start a new search.	Affiliated Providers							
Start a new Search.	Provider Name	Provider ID Affiliati	on Type Effec	tive Date	Expiration Date			
	JOHNSON CITY EYE S RGERY CENTER	U 148108KYIP DIREC	r 11/01	/2011	12/31/2078			
Return to the search results	NOENT OENTER							
	Provider Affiliations							
using the "Go back to	Affiliation Name	Provider Name Provider ID			Expiration Date			
Provider Search Results" link.		JOHNSON CITY EYE 148108KYIP	110 MED TECH	11/01/2011	12/31/2078			
	E SURGERY CENTE R	SURGERY CENTER	PKWY STE 2,Johnson City,TN,376042256					
Print the details using the					Done Done			
printer icon.								
	Go back to Provider	Search Results						

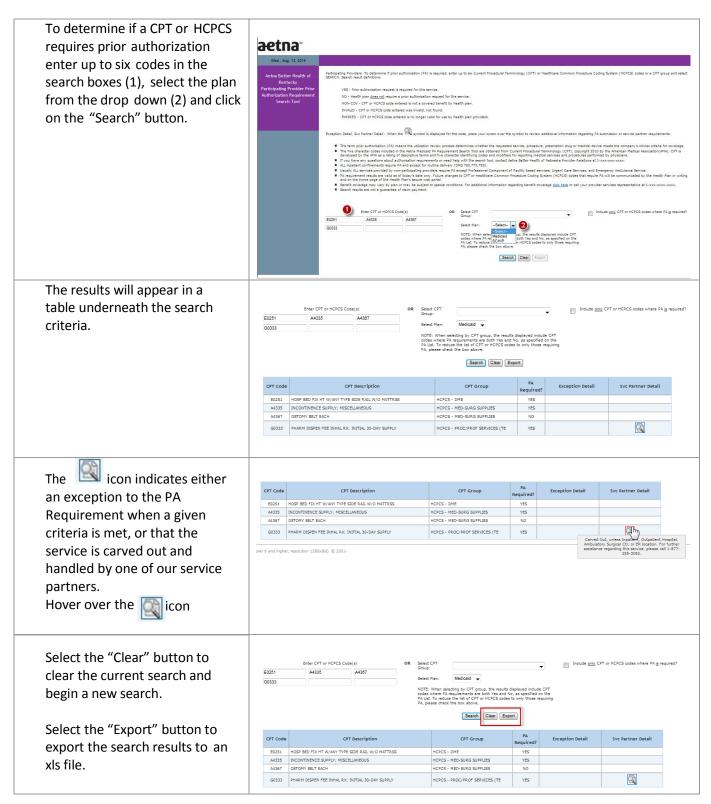
#### PA Requirements Search Tool

This feature enables the user to determine if prior authorization (PA) is required by entering up to six Current Procedural Terminology (CPT) or Healthcare Common Procedure Coding System (HCPCS) codes.

#### Access the Search Tool

Access the PA Requirement	thame   My Account   Tasks	Amanatolian			
Search Tool		Home   Tasks   Authorization Search			
Search root	aetna	About Authorization Search			
	ATTALACTION HEALTH		permasion to perform. And you can see if they've been approved.		
1. Select "PA Requirement					
Search Tool" from the	Taska	Search Authorizations Non-Plans saler's Provide Name	÷		
	Autorization Search >	MemberProvider information	Authorization Information		
left-hand panel under	Claims Sasith		Q. Authorization ID Authorization ID		
the Health Tools heading	Search Remittances Search Members				
or	Panel Roster	Provider Name* Previder Name 💌	Authorization Status Authorization Status		
•••	Search Providers		Authoritation Date Range Date From (remittid/yyp) Date From (remittid/ypy) Date From (remittid/ypy)		
2. From the "PA	Henith Tasis				
Requirement Search	PA Requenent Search Tool	Date To (mm/bd/yyyy) Dear To (mm/bd/yyyy)			
	Submit Authorizations		Search Carrow		
Tool" link under the	Case Management				
Health Tools heading at	Provider Report Management Tool	Search Results	÷		
the bottom of the portal	Register for BFT				
· · ·	Register for ERA	Search Tipe	· · · · · · · · · · · · · · · · · · ·		
page.					
	Provider Details Claims S	leanth Add Users Submit , trimitinances Case M Aembers Provider Sater Tool	element Seach Tool Autonocases Subarisacin User Question? Were new to help, Unfortuition, Report Management PAQ - Late call Provider Relations at Inspannent PAQ - Late-454-0001 or hearing Report Management Distillerer Stormal Sec.EFT Reference and Autonocasions.		
A new web page will launch with the PA Requirements Search Tool.	Sectors Ver. De: 30.201 Artis Batter Heath Particystem Pool Particystem Pool Pa	deni To determine il prize astherization (PA) ja required, enter spi to six Current a CPT provo and select SRACH-Search result definitions: authorization request is required for this service. - Of or HCRCS dee entered in no los a covered levelit by health plan. CPT or HCRCS dee entered in no longer valid for use by health plan. CPT or HCRCS dee entered in no longer valid for use by health plan provides. To re HCRCS dee entered in no longer valid for use by health plan provides. To re HCRCS dee entered in no longer valid for use by health plan provides.	<form></form>		

# Search for Prior Authorization Requirement



# Submit an Authorization Request

This feature enables the user to submit a request for prior authorization of services to the Aetna<sup>®</sup> Utilization Management department.

#### Access Site to Authorizations

Submit Authorization	Homa   My Account   Taska	Administration						j
Requests								
	e anna	Home   Taska   Auto	rization Search					
Select the "Submit	aetna	About Authorizatio	en Search					*
Authorizations" link in the	ACTINA RETTER HEALTH?	You can see which see	vices your providen(s) have asked u	s permis	sion to perform. And you can t	see if they've been approve	od.	
left-hand panel under the Health Tools heading.	<u> </u>	Search Authorizat	-					
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A new web page will launch with the Auto Authorization Queue. Select the "Auth Request" button.	User: Narong2 Logout Auth Queue Auth Request Authorization Queue Authorization Meson Filter By: NotFiltered And: NotFiltered Submission Status: Draft	> > >						

This will take you to the Authorization Request Form which consists of	Auth Queue Auth Request Authorization Request - Request Form Authorization Request
nine numbered sets of questions.	Who is the provider requesting pre-authorization?     Provider:     Address:
Fields marked with a red asterisk (*) are required fields.	2 . What is the Request Type? * Request Type: Procedure Pre-authorization ✓ 3 . Who is the patient requiring the pre-authorization?
	* Patient:     >     Name:       Date Of Birth:     Eligibility:     Address:       Benefit Plan:
	4. What is the patient's diagnosis?         Code       Code Type         ICD-10 Diagnosis       Add         Primary       Code       Type         Description       Add

# Submit an Authorization Request

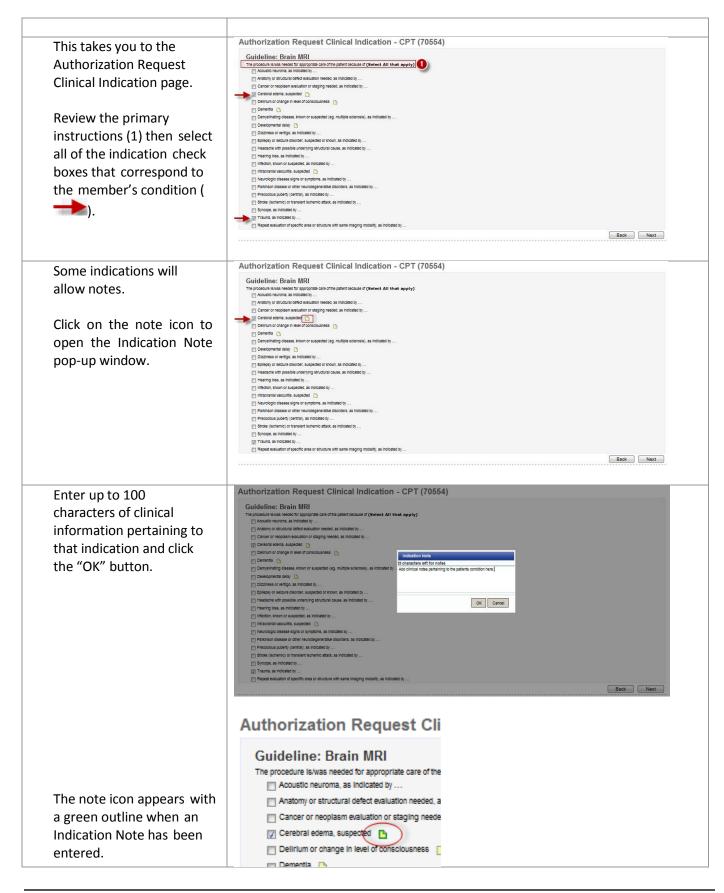
Enter the provider's name that is requesting the pre-authorization. Example; Lastname, Firstname Example; Mercy General Hospital You can enter a partial name and then select the search icon for a list of names to choose from. Once you select a provider the name and address fields will auto- populate.	1. Who is the provider requesting pre-authorization?         * Provider:         Address:	
Select a request type from the dropdown. The options are: • Outpatient Procedure • Inpatient Surgical – Use for pre- authorization of IP Surgery. • Inpatient Medical – Use for all IP	2. What is the Request Type? *Request Type: Outpatient Procedure	

stays other than IP Surgery. Inpatient Behavioral Health – Use for IP BH stays. This is a required field.		
· ·		
Enter the member's name or health plan ID. Example; Lastname, Firstname	3 . Who is the patient requiring the pre-authorization?         • Patient         Name:           • Patient:	
You can enter a partial name and then select the search icon for a list of names to choose from.		
Once you select a name the additional fields will auto-populate.		
Enter the patient's primary diagnosis first then add any secondary diagnoses. Enter the ICD-10 code in the code field and when you click enter it will either populate the description field or give you a pop-up window with a list to select from. Once you have a description loaded click on the "add" button to add the diagnosis code to the list below.	4. What is the patient's diagnosis?         Code       Code Type         ICD-10 Diagnosis         Primary       Code         Type       Description	
primary diagnosis first then add any secondary diagnoses. Enter the ICD-10 code in the code field and when you click enter it will either populate the description field or give you a pop-up window with a list to select from. Once you have a description loaded click on the "add" button to add the diagnosis code to the	Code Type Description ICD-10 Diagnosis  Add	

Enter the patient's primary procedure and then any secondary procedures.	5 - What procedure(s) are requested in this Authorization? Code Code Type Description CPT/HCPCS Primary Code Type Description Description Code Type Description Description Code Type Description Code Type Type Description Code Type Type Type Type Type Type Type Typ
Enter the procedure code (CPT/HCPCS) in the code field and when you click enter it will either populate the description field or give you a pop-up window with a list to select from. Once you have a description loaded click on the "add" button to add the procedure code to the list below.	
This is a required field for outpatient and inpatient surgical requests but not for inpatient medical or inpatient behavioral health requests	
If there is a separate facility involved in the service or procedure enter the name of the facility here. If the facility is unknown use Unknown Provider. If there	6 . At which facility does the service need to be performed?
is no facility involved then enter N/A (not applicable) as this is a required field.	
Enter the Date of Service being requested. If not requesting a specific day then enter the date you are submitting the request. This is a required field.	
Select the Requested Level of Care from the drop down menu. The options are: Inpatient Outpatient	

Select the Requested Length of Stay for inpatient requests. Check the Mark as Urgent box for urgent requests.	
Enter the name of the servicing provider. This could be the same as the requesting provider listed in step 1 or it could be the same as the facility listed in step 6.	7 . Who is the Servicing (or Facility) provider for the service?  Provider:  Name:  Address:
Example; Lastname, Firstname Example; Mercy General Hospital	
You can enter a partial name and then select the search icon for a list of names to choose from.	
Once you select a name the additional fields will auto-populate.	
Enter any additional details or clinical applicable to the request that will help with the decision. Enter up to 2500 characters.	8 . Are there any other details?  2500 Characters Left for Notes  Note History  Note  By Date
Enter the additional information for the request. Select the Acuity from the drop down menu. The options are:	9 . Please provide the following additional information         *Aculty:         *Authorization Start Date:         M/d/yyyy         *Authorization End Date:         M/d/yyyy         *Request Entered By:         *         * Required Fields         Cancel
<ul> <li>Elective</li> <li>Urgent</li> <li>Emergency</li> <li>Enter the requested</li> </ul>	

timeframe for the authorization by entering a start date and end date for the authorization. Select "Provider" from the "Request Entered By" drop down menu. These are all required	
Review the information you have entered for accuracy and then click the "Next" button.	9 . Please provide the following additional information *Acuity: Elective  *Authorization Start Date: 2/5/2016 m/d/yyyy *Authorization End Date: 3/5/2016 m/d/yyyy *Required Fields Cancel Next
Number of Units Requested If the request includes CPT/HCPCS codes you will need to enter the number of units requested for each CPT/HCPCS code. Enter the number of units requested and click on the	Authorization Code Detail Detail for: CPT/KCPCS 70554 Code Attributes Requested Units: 1 Back Next NCG <sup>m</sup> Copyright © 2014 NCG Weathy, LLC All Rights Reserved. CPT Copyright © 2012 American Medical Association. All rights reserved.
Document Clinical Indications This takes you to the Authorization Request Review. Select the "Document" button for each procedure code to access interactive Milliman clinical guidelines and document the member's clinical indications.	Auto-Authorization Request Review         Auto-Authorization I: EPS00001012       Request Type : Outpatient Procedure       Request Status : MoDecisionYt         Image: Status : 2227       Ameri: 1629, Jone Control Tame C
Select the appropriate guideline code by clicking on the "Select" link in the right-hand column.	Authorization Guideline Search - CPT (70554)         Result for "0054"         70554 Magnetic resonance imaging, brain, Anctional MRI, including lest selection and administration of repetitive body part movement and previous stimulation, not requiring containing containing of the containing of the containing con



Indications that are followed by "" indicate additional questions will be asked once you select the "Next" button to continue.	Stroke (Ischemic) or transient ischemic attack, as indicated by . Syncope, as indicated by Trauma, as indicated by Repeat evaluation of specific area or structure with same imagin
Review the primary instructions then select all of the indication check boxes that correspond to the member's condition and click the "Next" button.	Authorization Request Clinical Indication - CPT (70554)  Guideline: Brain MRI  Tarrowski bias receive to appropriate and the apply Cando or ventorial and y deseador. Subject Teaching of the apply Cando or ventorial and y deseador. Subject Teaching of the apply of t
This takes you back to the	Authorization Request Review Auto-Authorization : EPS00001012 Request Type : Outpatient Procedure Request Status : NoDecisionYet
Authorization Request Review and you will now	B         Patenti 2227         None, FAdrav, No.         Date of Sinth : 2/37/1927           Genore: Hair Marka Better Heath         Experts 123 Heath International 12/34         Date of Sinth : 2/37/1927           Beneti Tean / Antine Better Heath         BigBin(h); 2/10/2011 - 12/34/2018         Date of Sinth : 2/37/1927           Depress Code: Itcs4 Diagnosis (BC13)         BigBin(h); 2/10/2011 - 12/34/2018         Date of Sinth : 2/37/1927           B         Auto-Antonization : Emposition 12/34/2018         Date of Sinth : 2/37/1927
see the clinical indications noted in the Procedure Code box.	Acustraliantiacianti resultantiacianti     Acustraliantiacianti     Acustraliantiacianti     Acustraliantiacianti     Acustraliantiacianti     Acustraliantiacianti     Acustraliantiaciantiata Second Desi: 7/1/2014     Acustraliantiaciantiata Second Desi: 7/1/2014     Acustraliantiaciantiata Second Desi: 7/1/2014     Acustraliantiaciantiata Second Desi: 7/1/2014     Acustraliantiata Second Desi: 7/1/2014
Click the "Re-document" button to make any changes to the clinical	B         Servicing (Or Facility ) INF3254312         Name : 2007 Emergency Care, .           Provider :         Provider :         Address : 123 Notestial Way New York 10001           Provider :         Servicing (Or Facility )         New York 10001           B         Provider :         Provider :         Provider :           Pace of Service :         0000         Name : na - not applicable         Detertification : 7/1/2014           Provide :         Provide :         Provider :         Provider :         Provider :
indications.	Procedure Code: 1 Tops: 4*****     Code Top: CPT/NEPCIS     Reconstruction: 1 Reconstruction: Reconstruction: 1 Reconstruction: Reconstruction: 1 Recon
Select the "Remove	This system provides access to MCG evidence-based guidelines; however the determinations made using this system are directed by the health plan, based on a number of factors. Accorptie
Document" button to remove all previously entered clinical indications for a	Addres Description Date Harry Description Date Cancel Register Back Burnt
Attach a file	Authorization Request Review Auto-Authorization : EPS0001012 Request Type : Outpatient Procedure Request Status : NoDecisionYet
Prior to submitting the authorization request you are able to attach any clinical documentation applicable to the member. Select the "Attach File"	B     Requesting Provider 11 Mr 19754432     Name: 2407 Emrigency Care, .       B     Secondry For Secondry Care, Access: 123 Access for Second 11 Month Mark 10001       B     Requesting Provider 11 Mr 1400 Kangency Care, .       B     Secondry For Secondry Care, Access: 123 Access for Second 11 Month Mark 10001       B     Secondry For Secondry Care, Access: 123 Access for Second 11 Month Mark 10001       B     Secondry For Secondry Care, Access: 123 Access for Second 11 Month Mark 10001       B     Secondry For Secondry For Secondry For Secondry For Second 11 Month Mark 10001       B     Secondry For S
button.	Incometry a solary     Reconstruction       Procession     Procession       Procession     Costs Trees - CPT/MEPCS       Reconstruction     Reconstruction       Costs Decorrison     Reconstruction       Winner Reconstruction     Reconstruction       Winner Reconstruction     Reconstruction       Reconstr

Aetna <sup>®</sup>
<b>Provider Web Portal Instructions</b>

Select the "Browse" button	Authorization Request Review Auto-Authorization : EPS00001012 Request Type : Outpatient Procedure Request Status : NoDecisionYet
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Attachment pop- up	Bendt Rein Aetma Better Kealth Einpurty: 2/19/2011 Diagnosis Cole: 12D-9 Diagnosis (1550-11) <sup>Money</sup> File Itame (pps-4/02/Pio/Rein 354 Brokes. Upload
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, upload and select the file.	Proce:         925-555-9876         Far:           B         Place of Service : 0000         Name : na-inet app         Eate of Service : 7/1/3014
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.doc, .docx, .xls, .xlsx,	Guidente : Bante MRE(AC) Clinical Indicatori : The strocebore laylives readers for appropriate care of the patient because of : I Clinical Indicatori : Support Actional Support :
.ppt, .pdf, .jpg, .gif, .bmp,	V Trauma, as indicated by
.tiff, .tif, .jpeg.	This system provides access to MCG evidence-based guidelines; however the determinations made using this system are directed by the health plan; based on a number of factors. Atom File
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	Authorization Request Review
Click on the "Close"	Auto-Auto-Autorization : EPS0001012 Request Type : Outpatient Procedure Request Status : NoDecisionYet           8         Patient: 2227         Name : Priday, Joe         Date of Strin: 2/27/1927
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This takes you back to the	Authorization Request Review Auto-Authorization : EPS00001012 Request Type : Ou	tpatient Procedure Requ	est Status : NoDecisionYet
Authorization Request	Patient: 2227 Name: Friday, Joe     Gerder: Male Address: 123 Home Lane     Center CIP, Artona 12345		Date of Birth : 2/27/1927
Review window.	Benefit Plan : Aetna Better Health Bigblifty : 2/10/2011-12/31/2078 Diagnosis Code : ICD-9 Diagnosis (850.11) Anary		
	Auto-Authorization : EPS00001012     Requested Level of Care : Outpatient		
You can now see that	Notes : 8/19/2014 6:40 AM MST by Sheldon, Kimberly - Notes           B         Requesting Provider : NY-8765432         Name : 24X7 Emergency Care, .		
there is a file attached to	Speciality: Emergency Care Address : 123 Hospital Way Facility New York, New York, New York, New York, 10003 Phone : 929-555-9876 Fax:		
be submitted with the	Servicing (DP Facility), NY-3765432, Name : 24X7 Emergency Care, .     Provider :     Speciality : Emergency Care Address : 123 Hospital Way     New York, New York : 1000     New York, New York : 1000		
request.	Phone : 929-555-9876 Fax :		Date of Service : 7/1/2014
request.	Place of Service : 0000 Name : na-not applicable     Pacity Type : Hospital & Address :     Recovery Facility     Phone : Fax :		Late driservice : 7/1/2014
Select the "Open" link to	Procedure Code : 70554 <sup>Mary</sup> Code Type : CPT/HCPCS     Code Description : Magnetic resonance imaging, brain, functional MRI; including test     administration	Requested Units : 1 selection and administration of repetitive body part movement and /or	Re-Document Remove Document
view the document.	administration Guideline : Brain MRI (AC) Clinical Indication : The procedure is/was needed for appropriate care of the patient because of		
view the document.	Cerebral edema, suspected 验 양 Trauma, as indicated by 양 Minor or subsocute closed head injury with cognitive or neuro	logic deficit, and CT scan contraindicated or not available, or results indeterminate	
Select the "Remove" link	This system provides access to MCG evidence-based quidelines; however Assch File	the determinations made using this system are directed by the heal	h plan, based on a number of factors.
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Once you have completed	Requested Level of ce Outpatient Notes : 8/19/2014 6:40 AM MST by Sheldon, Kimberly - Notes		
the request, selected a	Requesting Provider : NY-8765432     Name : 24X7 Emergency Care, .     Speciality : Emergency Care     Address : 123 Hospital Way     New York, New York 10001		
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indications, and uploaded	Provider: Specially: Emergency Care Actress: 123 Hospital Way Facility New York, New York, New York, 10001 Phone: 929-955-9876 Pax:		
any clinical documentation,	Place of Service : 0000 Name : na- not applicable     Facility Type : Hospital & Address :		Date of Service : 7/1/2014
review the request for	Recovery Facility           Phone :         Pax :           III         Procedure Code : 70554 (****)         Coce Type : CPT/HCPCS	Recuested Units : 1	Re-Document Remove Document
accuracy and then click the	Cost Description Magnetic resonance imaging, brain, functional MRI; including test : administration Guideline: Brain MRI(AC)	election and administration of repetitive body part movement and/or vis	ual stimulation, not requiring physician or psychologist
"Submit" button to submit	Guideline : eraan matukki) Clinical Indication : The procedure laywas needed for appropriate care of the patient because of : ♥ Central adams, suspected >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>		
the request.		gic deficit, and CT scan contraindicated or not available, or results indeterminate the determinations made using this system are directed by the health (	lian, based on a number of factore
-	Name Description	Date	
	000429.07 Clinicals	8/19/2014 8:02 AM Can	MST <u>Open Remove</u> cei Request Back Submit
This brings you to the	Auto Authorization Response	uset Turss 1 Outerstiant Descad	2 Request Status : Pended
Auto Authorization	Auto-Authorization : EPS00000051  Patient : 0019157371- CV930372905506 Name : JONES, HOPE	est Type : Outpatient Procedure	Date of Birth : 3/29
Response page.	Gender : Female Address : 32943 EAST 138TH AVE PARIS, Kentucky 40361		
	Benefit Plan : 74020 / 74021 - Eligibility : 8/1/2014 - 12/31/207 No Copay Diagnosis Code : 1(CD-9 Diagnosis (314.00)		
Here you will see your	Auto-Authorization : EPS00000051     Requested Level of Care : Outpatient		
Authorization ID (1)	Approved Level of Care : Acuity : Elective		tart Date : 12/30/2015
	Authorization End Date : 12/31/2015  Requesting Provider : 73828KYIP Name : BIG SANDY HEALTH CAI		ntered By : Health Plan Staff
Make sure to write down	Speciality : General Practice Address : 1709 KY ROUTE 321 ST Prestonsburg, Kentucky Phone : 6068868546 Fax :	3 416539097	
the authorization ID as	Servicing (Or Facility) 80318KYIP Provider: Name : Marcum, Krissy Provider:		
	Speciality :         Nurse Midwife         Address :         23 Willow Dr           Auxier, Kentucky 41607         Auxier, Kentucky 41607         Fax: 6066886548         Fax: 6068865548         Fax: 6068865748         Fax: 6068865748	9259	
this will make it easier to	Place of Service : 80518KYIP Name : Marcum		Date of Service : 12/3
search for the	Facility Type : Hospital & Address : 23 Willow Dr Recovery Facility Auxier, Kentucky 41602 Phone : 6068868546 Fax : 6068868548	9259	
authorization request	Procedure Code : 23044 Prosey     Code Type : CPT/HCPCS	Requested Units : 1	Status : Pended
later.	Code Description : Arthrotomy, acromioclavicular, sternoclavicular joint, includi Guideline : No Documentation Required Clinical Indication :	y exploración, drainage, or removal of foreign body	

#### **Search Authorizations**

This feature enables the user to search existing authorizations and submitted authorization requests. The two most common ways to search are by member name or by authorization ID.

#### Access the Authorization Search Function

Access Authorization Search	Harre   My Alcount   Toxis	Administration					
Fields	( Second Second	Horse   Teste   Auto	orbation Search				
	aetna	About Authorization	an Search				
1. The authorization search	ATTIA ATTITISAATIYI	You can aw which as	rvices your provider(s) he	eve asked us permit	salot to perform. And you can	see if they've been approv	vet.
is the default when	Taska	Search Authorizat					
clicking on the "Task" link	Authoritation Search	Note: Places seller! # Prov	idar Neme				
0	Clains Search	Member/Provider Info	metion		Authorization Information		
on the web portal menu	Search Remittances	Mentor Last Name	Member Last Norm	9	Authorization ID	Authorization (D	
(1).	Search Members	Provider Name*	Provider Name		Authorization Status	Authorization Status	1961
	Panel Roster				Authorization Date Range		
2. Or select the "Search	Search Providers				Date From (mm/dd/yyyr)	Oute From (mm/dd/ysys)	100
	Health Tools				Date To (nm/00/revy)	Date To (renticity you)	100
Authorizations" link in the	PA Requirement Search Tool						
left-hand panel under the	Submit Authorizations					Search	Cancel
•	Case Managament					1.0	-0
Tasks heading (2) to	Provider Report Management Tool	Search Results					
access.	Register for EFT	Search Tips					
	Register for ERA	select Tips					

# Search by Member Name

Search by Member Name	Search Authorizations						
-	Note: Please select a Prov	vider Name	1				
Enter the member's last name	Member/Provider Info	ormation		Authorization Information			
	Member Last Name	JONES, HOPE D	Q	Authorization ID	Authorization ID		
and click on the 🎽 icon (1).	Provider Name*	Provider Name	~	Authorization Status	Authorization Status		
				Authorization Date Range			
				Date From (mm/dd/yyyy)	Date From (mm/dd/yyyy)		
				Date To (mm/dd/yyyy)	Date To (mm/dd/yyyy)	(111)	
					Search Can	cel	
Select the appropriate member from the pop-up							
window and click on the							
"Done" button.							

	Aetna :: Search results for Member(s) - Internet Explorer					
	Search Results(4 - Active members)					
	Member Name	DOB	Address		City	Sta
	JONES, HOPE D	03/29/2000	32943 EAST 138T	HAVE	PARIS	KY
	O JONES, HOPE D	11/04/2010	32943 EAST 138T Highway B	H AVE 18801	INEZ	KY
	O JONES, HOPE D	08/28/1998	32943 EAST 138T	H AVE	COVINGTON	KY
	O JONES, HOPE D	04/27/1999	32943 EAST 138T	H AVE	LOUISVILLE	KY
	Showing 1 - 6 of 6 results			1	Search Again	Done
you have your member	Search Authorizations					
fied, select the provider's	Note: Please select a Provider Name					
•	Member/Provider Information	Author	ization Information			
from the drop down		Aution				
ı (1) and click on the	Member Last Name JONES, HOPE D Q	Author	ization ID	Authorization ID		
ch" button (2).	Provider Name* Marcum, Krissy L	Author	ization Status	Authorization St	tatus 🔽	
i button (2).						
		Author	ization Date Range			
		Date F	rom (mm/dd/yyyy)	Date From (mm/	/dd/yyyy)	
		Date T	o (mm/dd/yyyy)	Date To (mm/dd	μλλλλλ)	
					Search Car	icel
				2		_
	Search Results					*

# Search by Authorization ID

Search by Authorization ID						
	Search Authorizat	tions				
Enter the authorization ID (1). Select the providers name from the drop down menu (2). Click on the "Search" button (3).	Note: Please select a Prov Member/Provider Info Member Last Name Provider Name*	mation Member Last Name	<b>ि २</b>	Authorization Information Authorization ID Authorization Status Authorization Date Range Date From (mm/dd/yyyy) Date To (mm/dd/yyyy)	EPS0000048	1 
	Search Results					
	Search Tips					*

Reading the Search Results	Home   My Account   Tasks	Administration				
The search results give you a	antaa	About Authorization Search	asters   Autoriation Results			
one line summary of the	aetna"		coros matching your input ontertal select the A light the loan links on the page.	whoreaton IC to display the d		
authorization. This is great	Taaka	search outbonzations				*
when you only need to see the	Search Authorizations   Search Claims	Search Results (1)				*
status of the authorization to determine if it has been	Search Resiltances		torization Authorization Member Na Ser Sizilua Type NOVED Constant YARP SUN	me & Requesting & Provider Name &	Servicing Provider Name + Submission D	bato
	Search Members	Displaying 1 - 1 of 1 results	NOVED OUISSINN YAPP, SUN	NY 3 Teach, Alexandro	ZMEJKO, JOHN J 06/11/2014	
approved.	Panel Rosler Search Providers	Search Tips				×
	Hearth Tools	and the		N		-
	Submit Authorizations			5		
	Case Management					
	PA Requirement Search Tool					
	Provider Report Management Tool					
	Register for EPT					
	Register for ERA					
Authorization Details						
	Search Results (1)					r -
To see all of the authorization		thorization Authorizati				ate
details click on the		ader Status Type PROVED Outpatient			er Name 🍸	
Authorization ID link (1) to be	<b>(</b> ]	PROVED Outpatient	TAPP, SUNNY 3 TESU	, Alessandro Ziviicak		
	Displa) - 1 results				1	-
taken to the authorization						
details.	Search Tips				3	
	Home   My Account   Tasks	Administration				
		Home   Tasks   Search Autor	orizations   Authorization Results   Autho	rization Details		
	aetna	About Authorization Det	taits			
	ACTINA DETTER HEALTH"	This page displays details of	a single authorization.			
		Authorization Details				*
	Taska Authorization Search	Authorization Information				
	Claims Search	Authorization ID	EPS0000051	Authorization Submission		
	Search Remittances	Authorization Status	MEDREVIEW	Submitted By	0	
	Search Members	Authorization Type	Outpatient			
	Panel Roster	Member Information				
	Search Providers	Member Name Date of Birth (MM/DD/YYYY)	JONES, HOPE D 03/29/2000	Member ID Member Policy Benefit	74020 / 74021 - No Cope	
	Health Tools	Gender	F	Eligibility Effective Date	D3/D1/2014	-
	PA Requirement Search Tool			Eligibility Termination Date	e 12/31/2078	
	Submit Authorizations	Requesting Provider		Servicing Provider		
	Case Management	Name	BIG SANDY HEALTH CARE INC	Name	Marcum, Krissy L	
	Provider Report Management Tool	Provider NPI	1326050110	Provider NPI	1922282078	
	Register for EFT	Provider ID	73828KYIP	Provider ID	80518KYIP	
	Register for ERA	Medical Indications				
		Diagnosis Code		Diagnosis Description		
		314.00		ADD CHILDHOOD WITH	OUT MENTION HYPERACTIVITY	
		Service Line Information				
		Service Service S			CPT Description Rev Code	Units
		No.	2/30/2015 12/31/2015 12/30/2015 P		STANDARD -	0
					Surgery Musculoskeletal	
	1				System implants w/o	
				,	PA	
				,	PA	Done
		4 Go back to Authorization	n Search Results		PA	Done

#### **Search Claims**

This feature enables the user to search existing claims. The most common reason would be to check on the status of a claim for a particular member.

#### Access the Claims Search Function

Access Claim Search Fields	Home    Wy Account   Tesice	Administration								
	· · · · · · · · · · · · · · · · · · ·									
The claims search can be		Home () Tasks () Bearch Claims								
	aetna	About Claims Rearch								
accessed by clicking on the "Search Authorizations" link in	AETNA BETTER HEALTH	This page allows you to search for claims. You should refine your search by providing search orbinia such as Claim Status, Claim Type, Date Earge, St.								
the left-hand panel under the	Tasas	Search Dialms			<u>ـ</u>					
	Search Authorizations	Note: Discus salari e Drev	der News							
Tasks heading (1).	Search Olaima	Vember/Provider Info	mation	Claim Information						
		Member Last Name	ter Last Name Nember Last Name Q	Claim ID	Ciain ID					
	Search Nembers	Vember ID	Nember ID	claim type	Claim Type					
	Panel Ruster	Provider Name *	Provider Name	Claim Status	Craim Status					
	Search Providers	The second second		Claimbialus	Cidini Status					
	Health Tools			Bervice Date Mange						
				Date FIDM (mm/dd/yyy)	Date From (mmiddiyy)y	<b>6</b>				
	Submit Authorizations			Date To (mmiddlygg)	Data To (mm/dd/ggg)	63				
	Case Nanagement									
	PA Requirement Search Tool									
	Provider Report Management Tool	Search Cancel								
	Register for EFT									
	Register for ERA									
		Search Results								
		Search Flos				*				

#### Search by Member Name



	Aetna :: Search results for Mer	nher(s) - Internet Evoluter
Select the appropriate member	Search Results(3 - Active me	
from the pop-up window and click	Member Name	DOB Address City State
on the "Done" button.	O SOMAN, SHAWN L	10/11/1966 70864 INLET VISTA CI FORT THOMAS KY
	SOMAN, SHAWN L	01/29/2001 70864 INLET VISTA CI DAWSON KY SPRINGS
	O SOMAN, SHAWN L	09/18/1969 70864 INLET VISTA CI SOMERSET KY
	Showing 1 - 6 of 6 results	1 Search Again Done
	1	
Once you have your member	Home   My Account   Takes	Annehitate
identified, select the provider's		A. CONTRACTO
	Constant and	Home J. Taolo J. Cleme Sends
name from the drop down menu	aetna	About Claims Search
<ol><li>and click on the "Search"</li></ol>	WETTER BET TON HEADING	You can view your staints to see which services your providents) has billed and if they've been paid.
button (2).	Taska	Search Chama -
	Authorization Search	MemberProvider Information Claim Information
	Claims Search +	Member Last Name Soman Shawn U X Q, Claim ID 1522040016
	Search Reniltances	Menter ID Dem Type Dem Type
	Search Monthers	Provider Last Name Rock Gary L Q. Claim Status Carm Tiess
	Paral Rosar	Check Number Check Number
	Search Providers	Service Date Range
	Health Tools	Date From (mm/bit/yyp) Date From (mm/bit/yyp)
		Data To (mm/dd/yyyy) Eme To (mm/dd/yyy)
		2 Search Cancal
		Search Results *
		Bearch Tips
Reading the Search Results	Home   My Account   Tasks	Administration
Reading the search results	There by Account   There	
		Home  } Tasks  } Claims Search  } Claims Search Results
The search results give you a	aetna	About Claims Search
one line summary of the claim	ACTIVA BETTER HEALTHY	This page lists claim records matching your input criteria. Select the Claim Number to deploy the details of the claim. You can Print or Download the claim list using the icon links on the page.
information.		Lowindiado tras clasmi las luding tra ison limita on tra page.
	Tasks	Search Claims
	Authorization Search	
Here you can find helpful	Olaima Search	Search Results (1) Chain 10 Check No Chain Type Nember , Paid Date , Provider , Chain States Total Billed Total Paid
information such as the claim	Search Remittancers	Name & & Name & Amount
status, amount paid and the	Search Members	15335040016 10034 Professional SCMAN, 12/13/2016 Beck, Gary L PAID \$900.00 \$0.00 SHAWN L
	Panel Roster	Showing 1 - 1 of 1 results
paid date.	Search Providers	
	Health Tools	Search Tipa 👻

#### **Search Remittances**

This feature enables the user to search existing Remittance Advise Notices.

#### Access the Remittance Search Function

Access Remittance Search Fields	Home   My Account   Taske	Administration							
i leius	1000	Hume - Tasks. J. Rembance Advice Search							
The remittance search can	aetna	About Remittance Advi	ce Search						
be accessed by clicking on	ATTER DETTER HEALTH?	This page allows you to obta generate) a list of paid claim	in and display remittance advice deta s	il besed upon a peid cleim. Ti	his page allows you to search fi	or (and			
the "Search Remittances"	Taaka	Remittance Advice Search							
link in the left-hand panel	Authorization Search	Note: Please shoose any one provider name from Santoing Provider Name							
under the Tasks heading	Claims Search	Member/Provider informatio	a	Remittance/Disim Inform	ation				
(1).	Search Remittances 1	Member ID	Member ID	Citizim 1D	Claim ID	-			
	Search Members	Servising Provider Name 7	Servicing Provider Nerne 🔍	- Select Date Range					
	Panel Roster				O Claim Paid Date Range				
	Search Providers			Date From (mm)/d/house)	Data From (mm/dd/yyyy)	1 853			
	Health Tools				Contraction Contraction				
	PA Requirement Search Tool.			Date To (mm/dd/yyyy)	Date To (mm/bb/yyyy)				
	Submit Authorizationa								
	Case Management				Search	Cascal			
	Provider Report Management Tool								
	Register for CPT	Search Results							
	Register for ERA	Search Tips				-			
		and the state							

# Search by Member ID

Search by Member ID	Home   My Account   Tesks	Administration
Enter the member ID (1) and select the Servicing Provider's name from the drop down (2). Then click on the "Search" button (3).	Tanks         Authoncobion Search         Claime Search         Search Remittances         Search Members         Panel Rowter         Search Providera         Members         Panel Rowter         Search Providera         Database Providera         Panel Rowter         Search Tools         Sauch Tools         Database Authorizations	Horse + Tasks / Remittance Advice Search About Remittance Advice Search The page allows you to obtain and display remittance advice detail based upon a paid claim. This page allows you to search for (and generate) a list of paid o laims.  Remittance Advice Search Weit Phase closes end one plantate from Senotity Provider Name Member/Provider Information Detailer221 Claim ID Detailer221 Claim ID Dete Proom (mmittdlyyyy) Dete From (mmittdlyyyy)
	Case Management Provider Report Management Tool Register for EFT Register for ERA	Search Results * Search Tips *
The results show the Claim ID, Member Name, Check Number, Paid Date, and Total Paid. Click on the Claim ID to display the details	Remittance Advice Search Search Results(0) Claim ID \$ Member Search Tips	×

Remittance Advise.

# Search by Claim ID

Search by Claim ID	Home   My Account   Tasks	Administration
Enter the claim ID and select the		Home   Tanks   Remittance Advice Search
Servicing Provider's name from	aetna	About Remittance Advice Search
the drop down. Then click on	ALTINA DETTER HEALTHY	This page allow you to obtain and display remittance advice detail based upon a paid claim. This page allows you to search for (and generate) a fisk of paid claims.
the "Search" button.	Tasks	Remittance Advice Search
	Search Authorizations	Mile Presse croose any one privinger name from bervicing Privilizer name
	Search Claims	Member/Provider Information Remittance/Claim Information
	Search Remittances	Nember ID Claim ID Claim ID
	Search Members	
	Panel Roster	Servicing Provider Name * Servicing Provider
	Search Providers	Date From (mmiddlyyyy) Date From (mmiddlyyyy)
	Health Tools	Dete: To (mm/ddlyyy) Date To (mm/ddlyyyy)
	Submit Authorizations	
	Case Management	
	PA Requirement Search Tool	Search Cencel
	Provider Report Management Tool	
	Register for EFT	Search Results 👻
	Register for ERA	Search Tips 👻
The results show the Claim ID, Member Name, Check Number,	Remittance Advice Search	h 🔺
Paid Date, and Total Paid.	Search Results(0)	×
Click on the Claim ID to	Claim ID 🔶 Memb	ver Name Check Number 🔶 Paid Date 🔶 Total Paid
		No results found
display the details of the Remittance Advise.	Search Tips	•

# Search by Date Range

Search by Date Range		real factor				
	Remittance Advice Sea	rch				
You can search by either a date of service range or a claim paid date range. Select the radio button for the search option you would like then enter the To and From date range. Click on the "Search"	Note: Please choose any one provider name from Servicing Provider Name Member/Provider Information			Remittance/Claim Information		
	Member ID	Member ID	Claim ID		Claim ID	
	Servicing Provider Name *	Servicing Provider Name		Select Date Range	1	
				OOS Date Range	O Claim Paid Date Range	
			D	Date From (mm/dd/yyyy)	Date From (mm/dd/yyyy)	
			D	Date To (mm/dd/yyyy)	Date To (mm/dd/yyyy)	
button.					Search	Cancel
						cancer

The results show the Claim ID, Member Name, Check	Remittance Advice Search	-
Number, Paid Date, and Total Paid.	Search Results(0) Claim ID	-
Click on the Claim ID to	No results found	
display the details of the Remittance Advise.	Search Tips	•