Pre-Service Directory Provider User Guide *One*HealthPort

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1 Introduction

Table of Contents

1	Intro	oduction	1
	1.1	Scope and Purpose	2
2	Ove	rview	2
3	Dire	ctory Workflow	2
	3.1	Accessing the Pre-Service Directory and Viewing Data	2
	3.2	Populating Your Standard Work Tools with Directory Data	6
	3.3	Weekly Change Reports	7
	3.4	Reporting Inaccurate or Suggested Data	9
4	Арр	endix: Information available in the Directory	10

1.1 Scope and Purpose

The Pre-Service Directory is a "one stop shop" that directs Providers to pre-service/pre-authorization information and capabilities that are on Health Plan websites. The information and capabilities remain on the Health Plan websites, the directory just points out where the information can be found on those sites.

The directory gives Providers a common, standard interface for finding information across Payer websites. Using this directory, Providers won't need to keep track of where each different Payer stores information on their websites.

See the appendix for the full list of directory information and where it can be found. Note that some health plans may have more information in the directory than others.

The purpose of this Provider User Guide is to help the Provider navigate the Pre-Service Directory.

2 Overview

This directory contains pre-service related links/instructions pertaining to:

- 1. Coverage Plan(s) information for each Payer
- Pre-authorization and medical necessity review processing requirements for different types of services for each Coverage Plan. This includes information about 3rd party vendors who do the Utilization Management for a specific service type (i.e. carve outs)
- 3. Admission notification requirements for each Coverage Plan

3 Directory Workflow

3.1 Accessing the Pre-Service Directory and Viewing Data

To access the Pre-Service Directory, go to <u>http://www.onehealthport.com/psd-home</u> or access it by selecting Pre-Service Directory from the AdminSimp tab on the OneHealthPort Home Page.



Some Payer data is secure and will be behind their firewall. For the best experience using the directory, start by signing in with your Single Sign-On (SSO) account. Some Payers allow you to go through their firewall with an open SSO session, however others may still require you to login to their site before viewing certain secure data.

To view a Payer's pre-service data, select that Payer from the dropdown list on the Pre-Service Directory home page. Payers that have not yet verified their data will be noted with "Data Verification Pending" next to the Payer's name in the dropdown.

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	HOME	SINGLE SIGN-ON	HIE	CDR	CREDENTIALING	ADMINSIMP	ABOUT US			
	<i>One</i> Hea	lthPort								
Pre-Service Directory										
		ow to see all their plan inform not reviewed nor confirmed cribed below.				5				
	that you feel is no	the accuracy of the data in the ot correct, and make suggestic corrections. This form will be	ons for data you wou	uld like added to the	directory. OneHealthPort wil	and the second	and the second se			
	Select A Payer Asuris Northwest Health - Data Verification Pending									
	View Payer Information									
	© 2018 OneHealthPort Seattle, WA, USA. All rights reserved.									
	Contact Us Priva	icy Policy								

When you have selected a Payer and clicked the button "View Payer Information", you will see a dashboard containing an index of all information in the directory for that Payer. Information is organized by coverage plan, and within each coverage plan you will find information for Admit Notification and the five main service categories: Advanced Imaging Services, General Pharmacy Services, Mental/Behavioral Health, Provider Administered Medications, and Visits/Procedures/Services. If a service within a category is carved out to a third party vendor, that specific service will be called out as "Carved Out". Some plans may also have carved out all services within a main category to a third party utilization management vendor. This service category will also be noted as "Carved Out".

D Home > Premera Blue Cross	Report Inaccurate or Suggested Data
Premera Blue Cross	Weekly Change Reports
All Commercial Coverage Plans Admit Notification	Export Data Set
Advanced Imaging Services (Carved Out)	
General Pharmacy Services (Carved Out)	
Provider Administered Medications	
- Radiation Oncology (Carved Out)	
Visits/Procedures/Services	
- Outpatient Rehabilitation (Carved Out)	
- Sleep Management (Carved Out)	

Click on any line item in the index to see the detailed data that is associated with it.

When viewing detailed data, you can always navigate back to the main display page by either clicking the button "Back to Payer" or by clicking the Payer name in the breadcrumb trail at the top of the page. Also, clicking on PSD home in the breadcrumb trail will take you to the main dropdown menu where you can select a different Payer. If you want to download a record of the detailed data, use the "Download CSV" button as shown below.



3.2 Populating Your Standard Work Tools with Directory Data

Some providers have standard work tools that keep track of Payer Information. These tools can be populated from the directory by copying and pasting data from the Pre-Service Directory into them. This can be done by highlighting the data in the directory using the ctrl c and copying it into your standard work tools using ctrl v shortcuts. NOTE: Some links in the directory may be very long and will not show up in full in the viewer. To make sure that you copy links correctly and fully, please right click on the link you wish to copy and click "copy link address" or "copy link" (verbiage may vary depending on browser) and paste into your tool.

PSD Home > Premera Blue Cross > All Commercial Coverage Plans > Advanced Imaging Servic	Report Inaccurate or Suggested	
Advanced Imaging Services (Carved	Back to Paver	
Coverage Plan All Commercial Coverage Plans	Download CSV	>
UMO AIM Specialty Health		
Category Advanced Imaging Services Pre-Service Review Phone Number		
866-666-0776 Customer Service Phone Number		
800-252-2021 Provider Web Page		
https://providerportal.com/ Pre-Service Process Overview - URL https://providerportal.com/		

For those who want to automatically populate their Standard Work tools, the "Export Data Set" button will download a set of .csv files that contain all of the Payer's information. If you wish to use the .csv to automatically populate your own tool, call OneHealthPort for more specific information.

If you want to keep a record of specific information like the "Advanced Imaging Services (Carved Out)" shown above, click the "Download CSV" button on the right hand side. Clicking this button will download a .csv file for just that specific information.

SD Home > Premera Blue Cross	Report Inaccurate or Suggested
Premera Blue Cross	Data
	Weekly Change Reports
All Commercial Coverage Plans Admit Notification	Export Data Set 🔹 🔻
Advanced Imaging Services (Carved Out)	
General Pharmacy Services (Carved Out)	
Provider Administered Medications	
- Radiation Oncology (Carved Out)	
Visits/Procedures/Services	
- Outpatient Rehabilitation (Carved Out)	
- Sleep Management (Carved Out)	

3.3 Weekly Change Reports

Pre-Service information will change over time and Payers are encouraged to continuously keep their data in the directory up to date. Providers who put directory information into their own standard work tools can use these change reports to update their tools with the most current information.

To help Providers keep track of information as it changes, the Pre-Service Directory offers weekly change reports for each Payer.

Providers will have access to the last four weeks of change reports. Each one can be downloaded directly from the directory by clicking the "Weekly Change Reports" button on the right hand side of the Payer data dashboard. If there are no changes for a specific week within the last month, the week will be called out and marked as "No Changes".

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<i>One</i> Heal	lthPort						
PSD Home > Premer	a Blue Cross	S			Report Inaccural Data Weekly Change I		
All Commerc	ial Coverage Plans				Export Data Set	V	
Advanced Imag	ging Services (Carved Out)						

Providers are also able to subscribe to Weekly Change Reports by clicking the link in the "Weekly Change Reports" dropdown. Providers that subscribe to the weekly change reports will receive weekly reports, via email, for all Payers.

HOME	SINGLE SIGN-ON	HIE	CDR	CREDENTIALING	ADMINSIMP	ABOUT US
<i>One</i> Heal	lthPort					
PSD Home > Premer	a Blue Cross	S			Report Inaccura Data	
All Commerce	ial Coverage Plans			(Weekly Change Click to subscribe change report September 27, 2	e to the weekly
Advanced Imag	ging Services (Carved Out)				Sample-week report.docx	ly-change-
General Pharm	acy Services (Carved Out)				Export Data Set	•

Below is an example of what a Weekly Change Report looks like.

Parent	Content Title	Field	Old Value	New Value	URL	Type of Change
Ambetter	 General Pharmacy Services (Carved Out) 	Services Requiring Pre-Authorization - URL		https://ambetter.coordinat edcarehealth.com/provider- resources/pharmacy.html	http://www.onehealt hport.com/node/4946	Edited
Washingt on Apple Health - Medicaid	 General Pharmacy Services (Carved Out) 	Services Requiring Pre-Authorization - URL		https://www.coordinatedca rehealth.com/providers/ph armacy.html	http://www.onehealt hport.com/node/7126	Edited
Medicare Advantag e	 General Pharmacy Services (Carved Out) 	Services Requiring Pre-Authorization - URL		https://allwell.coordinatedc arehealth.com/content/da m/centene/Medicare%20Bl ueprint%20Documents/201 8_formulary_MA_en.pdf	http://www.onehealt hport.com/node/7506	Edited
"Integrate d Managed Care (Chelan, Douglas & Grant)"	 General Pharmacy Services (Carved Out) 	Services Requiring Pre-Authorization - URL		https://www.coordinatedca rehealth.com/providers/ph armacy.html	http://www.onehealt hport.com/node/7516	Edited

3.4 Reporting Inaccurate or Suggested Data

OneHealthPort appreciates your help in keeping the directory as accurate and useful to you as possible so we are interested in your feedback. If you see data in the directory that is inaccurate, please use the "Report Inaccurate or Suggested Data" button to let us know and we will work with the Payer to get the data updated.

Additionally, if there is any information not available in the directory that you would like added, please use the same button to offer any suggestions. OneHealthPort will continue to update the directory based on feedback from the community.

4 Appendix: Information available in the Directory

Notes:

- a. Eligibility and Benefits information as well as information about appealing a pre-auth denial are found in the Coverage Plan information and not in the Pre-Service Request information.
- b. Some of this information may not be on the Payer's website or the Payer has chosen not to load it into the directory.

		Coverage	Pre-Service	Admit
Directory Fields	Explanatory Notes	Plan	Requests	Notification
Payer	Payer Name	х		
Coverage Plan Name	Coverage Plan Name	х	х	x
	Primary coverage area for the plan;			
Coverage Area	Washington, Oregon, Both	х		
	The responsibility for doing			
	Utilization Management (UM) on a			
	pre-service request is sometimes			
	carved out to a 3rd party. This field			
	identifies whether the Payer (not			
	carved out) or a 3rd Party UMO			
UMO	(carved out) is responsible		х	х
Service Type Category	Name of Service Type		х	
	Allows Payer to indicate any			
	qualifications about the service			
	type that would be relevant to			
Service Type Qualifier	Providers		х	
Admission Notification	Link to the policy for when/how to			
Policy - URL	notify about an inpatient admission			x
	Associated instructions for finding			
Admission Notification	when/how to notify about an			
Policy - Instructions	inpatient admission			х
	Contact for questions about pre-			
Pre-Service Review Phone	authorization and other pre-service			
Number	functions	х	х	
Customer Service Phone	Contact for questions about using			
Number	the web site	х	x	
Provider Web Page	Main web page for Providers	х	х	
	Link to verify eligibility, benefits,			
Eligibility & Benefits - URL	and member exclusions	х		
	Associated instructions for			
Eligibility & Benefits -	finding/verifying eligibility,			
Instructions	benefits, and member exclusions	х		

Directory Fields	Explanatory Notes	Coverage Plan	Pre-Service Requests	Admit Notification
Directory Fields	Link to a high level overview of	FIGII	Requests	Notification
Pre-Service Process	how to do pre-authorizations and			
Overview - URL	other pre-service functions	v	Y	
Overview - ORL		Х	X	
Dro Comico Drococo	Associated instructions for finding			
Pre-Service Process	an overview of pre-authorizations			
Overview - Instructions	and other pre-service functions	Х	x	
Pre-Service Review Web-				
Site Training - URL	Link to on line training resources	Х		
Pre-Service Review Web-	Associated instructions for finding			
Site Training - Instructions	on line training resources	х		
	Link to which services are excluded			
Excluded and Non-Covered	and non-covered (these are not			
Services - URL	member benefit exclusions)	х		
	Associated instructions for finding			
	out which services are excluded			
Excluded and Non-Covered	and non-covered (these are not			
Services - Instructions	member benefit exclusions)	х		
Services Requiring a Pre-	Link to which covered services			
Authorization - URL	require a pre-authorization	х	x	
	Associated instructions for finding			
Services Requiring a Pre-	out which covered services require			
Authorization - Instructions	a pre-authorization	х	x	
	Link to what covered services			
	require a medical necessity review			
Medical Necessity Review	(but do not require a pre-			
Requirements - URL	authorization)	х		
	Associated instructions for finding	~		
	out what covered services require			
Madical Nacassity Roview				
Medical Necessity Review	a medical necessity review (but do			
Requirement - Instructions	not require a pre-authorization)	Х		
Medical Policies / Clinical	Link to the medical policies/clinical			
Guidelines - URL	criteria	х	x	
Medical Policies / Clinical	Associated instructions for finding			
Guidelines - Instructions	medical policy/clinical criteria	Х	x	
Handling Unlisted	Link to requirements for processing			
Procedures - URL	unlisted procedures	Х		
	Associated instructions for finding			
Handling Unlisted	requirements for processing			
Procedures - Instructions	unlisted procedures	х		
Pre-Service Request On-line	Link to submitting an online pre-			
Submission - URL	service review request	х	х	
	Associated instructions for			
Pre-Service Request On-line	submitting an online pre-service			
Submission-Instructions	review request	х	x	

		Coverage	Pre-Service	Admit
Directory Fields	Explanatory Notes	Plan	Requests	Notification
Pre-Service Review Request				
Fax/Mail Submission Forms	Link to process/form for faxing a			
- URL	pre-service review request	Х	X	
Pre-Service Review				
Fax/Mail Submission Forms	Associated instructions for faxing a			
- Instructions	pre-service review request	Х	Х	
	Number to be used when faxing			
UM Fax Number	UM related information	х	х	х
Supporting Documentation	Link to supporting documentation			
Requirements - URL	requirements	х	х	
Supporting Documentation	Associated instructions for finding			
Requirements -	supporting documentations			
Instructions	requirements	х	х	
Pre-Service Request Status	Link to finding status of a pre-			
Inquiry - URL	service review request	х	х	
. ,	Associated instructions for finding			
Pre-Service Request Status	the status of a pre-service review			
Inquiry - Instructions	request	х	х	
Retrospective	Link to the policy for retrospective			
Authorization Policy - URL	authorizations	х		
Retrospective				
Authorization Policy -	Associated instructions for finding			
Instructions	retrospective authorization policy	х		
	Link to historical changes to	X		
Changes to Medical and/or	medical policies and or payment			
Payment Policies URL	policies	х		
Changes to Medical and/or	Associated Instructions for finding	^		
Payment Policies -	-			
Instructions	historical changes to medical	X		
	policies and or payment policies	Х		
Appealing Pre-Auth Denials	Link to process/form for appealing			
- Process & Forms - URL	pre-authorization denials	Х		
	Associated instructions for finding			
Appealing Pre-Auth Denials	the process and forms to use for			
- Process & Forms -	appealing pre-authorizations			
Instructions	denials	х		
Confirmation of Docs	Link to confirm submitted			
Received / Info Provided -	documents and/or information			
URL	that was received	х	х	x
	Associated instructions for finding			
Confirmation of Docs	confirmation that submitted			
Received / Info Provided -	documents and/or information was			
Instructions	received	х	х	х

		Coverage	Pre-Service	Admit
Directory Fields	Explanatory Notes	Plan	Requests	Notification
	Link to the policy for circumstances			
Extenuating Circumstance	under which a pre-authorization			
Policy - URL	may not be required for a service	х		
	Associated instructions to find the			
	policy for circumstances under			
Extenuating Circumstance	which a pre-authorization may not			
Policy - Instructions	be required for a service	х		