Medical Services

Function	Provider Workflow	BPR-specified Capabilities	'MET', Scheduled Date, or 'NA'	Comment
Checking Eligibility and Benefits	 Commonly - Use 271 transaction to automatically retrieve eligibility information and store in EMR system. Benefits information not typically stored in EMR Infrequently - Check on Regence site 	Identify services that are benefit exclusions for the patient		
Determining whether Pre- Auth or Medical Necessity Review is required	 Made without accessing site based upon experience (Institutional Knowledge) Access Regence site using Pre-Auth link stored as a "favorite" Search generic pre-auth list for a CPT code Do not review associated medical policy 	 Provide up-to-date navigation information on One-Stop-Shop page Look up/Search for the care service by code, keyword or functional category Information is specific to a product/group or plan. Identify whether any entered service require a pre-authorization. This includes Unlisted Procedures. Explicitly indicate if service does not require a pre-authorization. Identify whether any entered service require a pre-authorization. Identify whether any entered service require a pre-authorization. Identify whether any entered service require a medical necessity review (separate from a pre-auth). This includes Unlisted Procedures. 	To-Be Confirmed MET	 Lookup is done via searching pre- auth list by CPT code Pre-Auth List is generic Information is not up-to-date/ accurate No specific statement about whether services that are not on Pre-Auth List will require a pre- auth. No specific information about Unlisted Procedures No specific statement about whether services that are not on Pre-Auth List will require a medical necessity review No specific information about Unlisted Procedures

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			Identify any professional restrictions related to delivering the service, e.g. type of provider, site of care, etc.		Site of care is a known professional restriction for a number of service, but it is not identified on the web site
			Identify if/what supporting documentation that needs to be sent with a review request		
			Identify clinical criteria or vendor information whose criteria is used	MET	Medical Policies are posted. Medical Staff reports that information is not always current and it is difficult to find the links to the information.
			Identify whether approval of this service is dependent upon previously trying other services.	???	May be in Medical Policy.
	•	Complete an EMR form, incorporate	Provide an online form/web page for requesting pre-service review	MET	
		appropriate clinical information, and send	On form/web page - Allow specification of the "urgency" of the request		
		electronically.Indicate the urgency	On form/web page - Allow specification of the services to be reviewed	MET	
		on their EMR formClinical information	Identify the timeframe under which the request will be reviewed		
Submitting Review Request		submitted is based upon institutional knowledge or an	On form/web page - Include questions about any relevant professional restrictions (as applicable)		Site of care restriction is not included on the Regence form for the related services
	•	provider- developed list of required documentation When changes to a previously submitted request need to be made, edit the	If form/web page asks for clinical information, either offer check list selection of appropriate clinical information or allow providers to submit ALL clinical information relevant to the specific request for services, and not restrict provider from sending this relevant information	NA	
		previously submitted request and resend. If	Allow for submission of form electronically or faxed with supporting documentation	MET	Supporting documentation must be faxed

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	edit is made several days after initial	Provide acknowledgement of receipt of the review request		
	submission, will call Regence to confirm receipt.	Able to print the completed request form and/or review on-line the information submitted on the request.	MET	
		Perform review for ALL submitted services that are valid per the BPR, not just those requiring a pre-authorization		Regence will not perform a review for Unlisted Procedures
		Perform review without a provider signature on the request		
		On web page, identify how changes are to be made to previous requests and how providers will be notified of decisions		
	Create a work queue item to contact Regence about	Provide status information on web site per the BPR		
Checking Status of Request	status in a specific period of time	Allow access to status information by the provider/organization that requested the services, the provider/organization that is doing the services and, as appropriate, the facility/organization where the services are to be done		