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
ACCESSING PROVIDER PORTAL

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
LOGGING IN

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

Welcome Health Care Professional!

We are committed to making 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.
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Click on Resources
SEARCH FEE SCHEDULE

Click Search Fee Schedule
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.
Once you have clicked the search button, the following coverage information will populate.

<table>
<thead>
<tr>
<th>Pricing and Limitations:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allowed Amount: $111.57</td>
</tr>
<tr>
<td>PA Required</td>
</tr>
<tr>
<td>Maximum Units: 1</td>
</tr>
<tr>
<td>Age Restriction: 0 - 20</td>
</tr>
<tr>
<td>Gender: Both</td>
</tr>
<tr>
<td>Attachment is Not Required</td>
</tr>
<tr>
<td>Not a Lifetime Procedure</td>
</tr>
<tr>
<td>Not restricted to any Diagnosis</td>
</tr>
<tr>
<td>Not restricted to any Specialty</td>
</tr>
<tr>
<td>Ambulatory Surgical Facility Fee: $0.00</td>
</tr>
<tr>
<td>Ambulatory Payment Classification Fee: $0.00</td>
</tr>
<tr>
<td>Discounted: NA</td>
</tr>
</tbody>
</table>
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

Hover over Prior Authorization, then click on Create Authorization
CREATING AN AUTHORIZATION

Complete PA Form
Pharmacy requests must be submitted to the College of Pharmacy and not through the Provider Portal.
**CREATING AN AUTHORIZATION**

Requesting Provider Information

<table>
<thead>
<tr>
<th>Provider ID</th>
<th>ID Type</th>
<th>Zip Code</th>
<th>Contract Code</th>
<th>Taxonomy</th>
<th>Name</th>
<th>SC Provider Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NPI</td>
<td>73080</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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: No favorite providers available.

Provider ID: [blank]
ID Type: [blank]
Name: [blank]
Add to Favorites: [blank]

Zip Code: [blank]
Contract Code: [blank]
Taxonomy: [blank]
SC Provider Number: [blank]
CREATING AN AUTHORIZATION

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.

Select the correct Assignment Code from the drop down box.

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

Enter the date range for the service you are providing. For Surgeries give yourself a 3-month timespan.

Leave Code Type as Procedure Code. Enter Code you will be providing.
CREATING AN AUTHORIZATION

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

Enter units for timespan requested.
CREATING AN AUTHORIZATION

Leave Payment Method blank.

Click on + sign to designate how documentation will be submitted.
Choose from the drop down either BM – By Mail, EL – Electronic Only or FX – By fax.
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.
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.
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

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

**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.

**Actions**

- Attachment Coversheet
- Print Preview
- Copy
- New

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**Attachment Coversheet button** will only show if you have selected under attachment BM - By Mail or FX – By Fax.
You can now click on Print Preview, which will populate another screen that will allow you to print a copy of your submission.
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.
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.
To view authorization status hover over Prior Authorizations and click on View Authorization Status.
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.
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.
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.
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.
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.
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.
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.