HCHB Utilization Review Information: Adding Pending Authorization or Verification On Call/After Hours

Home Health Foundation

The Leaders in Home Health and Hospice Care

Order vs Authorization Driven Payers

Tips for Scheduling Issues

Order-Driven vs Authorization-Driven Payors

Order-driven payors (e.g., Medicare) in order to schedule visits, the physician's orders must have adequate visits to fulfill the schedule.

- Scheduling warning: "**insufficient authorization – review orders**".

Verify that there are sufficient number of **orders** for the visits requested.

A new calendar order may need to be entered by the scheduler/on call clinician.

Authorization-driven payors require authorization for scheduling. When scheduling, you may receive an "insufficient authorization – **add visits**" warning if the authorization needs to be adjusted. Most common issues can be solved with dummy auths (see later slides).

- **Example 1: PRN Visit Scheduling for a Payor that Requires Authorization:**

Authorizations are attached to scheduled visits - it may be necessary to unassign a scheduled future visit to enable PRN scheduling.

Once PRN is scheduled, UR will receive a workflow to obtain an additional authorization for the visit that was unassigned.

- **Example 2: Changing Service Codes:**

Non-billable phone visits cannot be changed to a billable visit without entering a calendar order for the change.

Completing Insurance Verification and/or Adding Pending Authorizations for After Hours, Weekends, and Evenings

- The Revenue Cycle Eligibility team is now working (on call) 7 days per week. There still may be a need to push workflow for Insurance Verification and Authorization in order to schedule a visit – this is called On Call.
  - Always **access the tasks** from the **On Call** workflow tasks. This is essential, as **it drives follow up workflow to the authorization/verification teams**.
- Do not bypass authorization or eligibility workflows during hours of coverage without first contacting the UR/Eligibility Team for assistance in completing outstanding workflows. You can utilize the on call bypass after hours.
  - Weekdays 7:30AM-5:00PM
  - Weekends: 7:00AM-7:00PM
  - Eligibility Phone #: 978-258-8400 with ext. 5165
- If the authorization/verification team is not available and there is an urgent need to schedule a visit, use the following instructions to verify insurance and/or add a pending authorization.

On-Call (after hours & Weekends) – Completing Insurance Verification & Adding Dummy Auths (p. 5-23)

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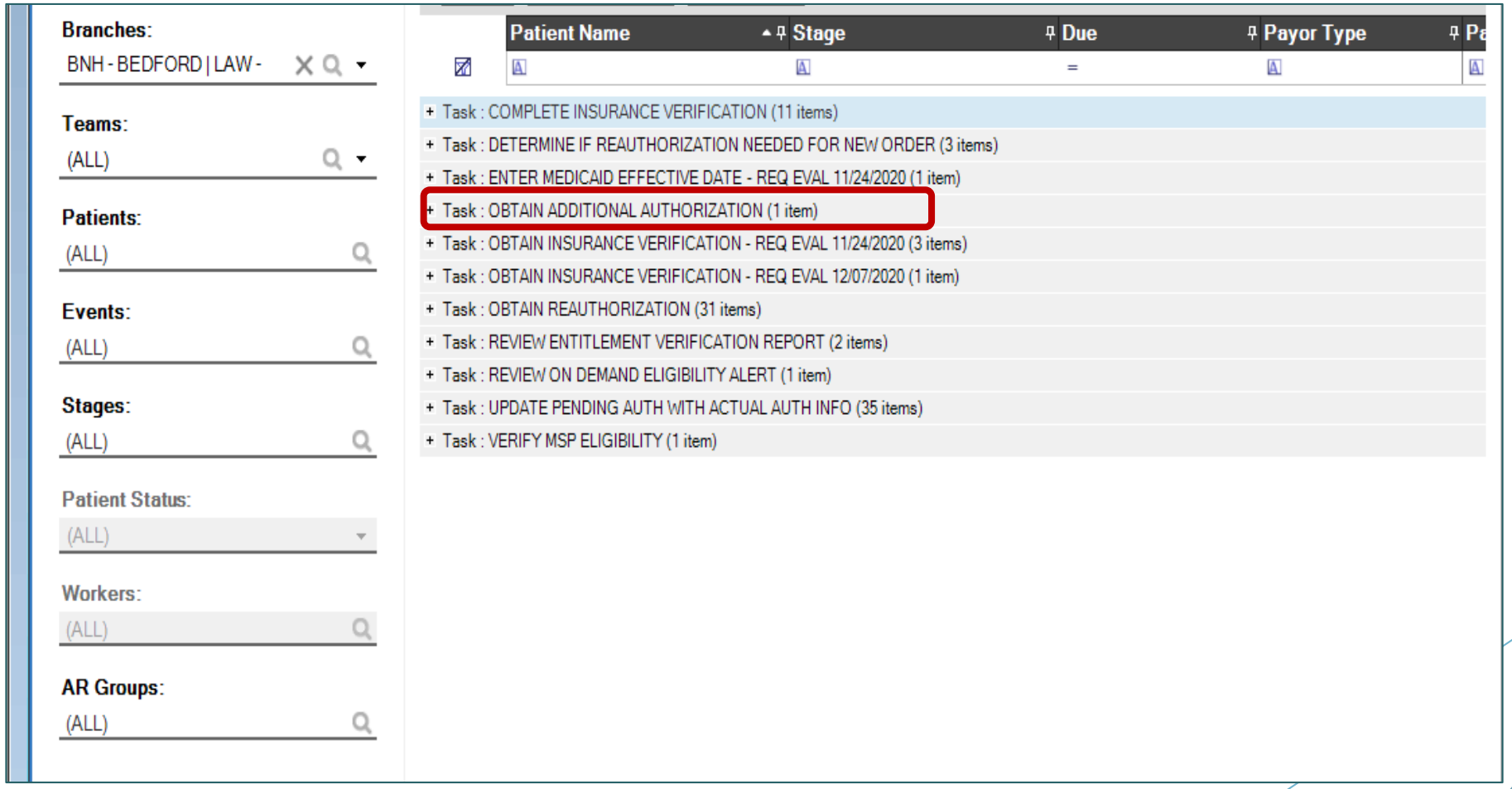
Please note that not all of the above will be applicable to every scenario. Patients can be in any workflow stage or require a new auth at any time. If encountering a scheduling error, refer to the workflow first to ensure the patient is not held up there, and add a dummy auth if applicable through the workflow or through the patient chart if no workflow is applicable.

Instructions: On-Call Task “Obtain Additional Authorization”

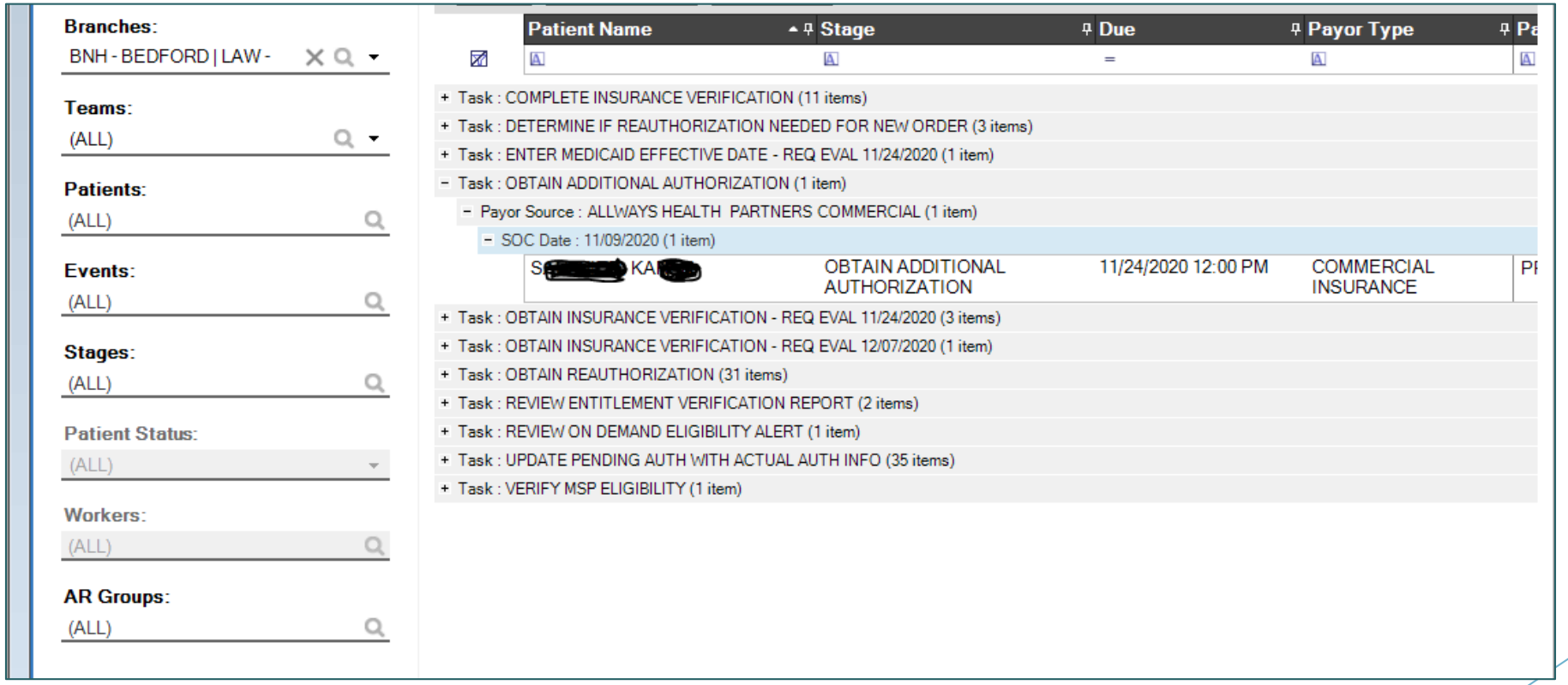
Note: **If this task is not cleared, scheduling will not be enabled!**

Step 1: Click on “+” to the left of “Obtain Additional Authorization”



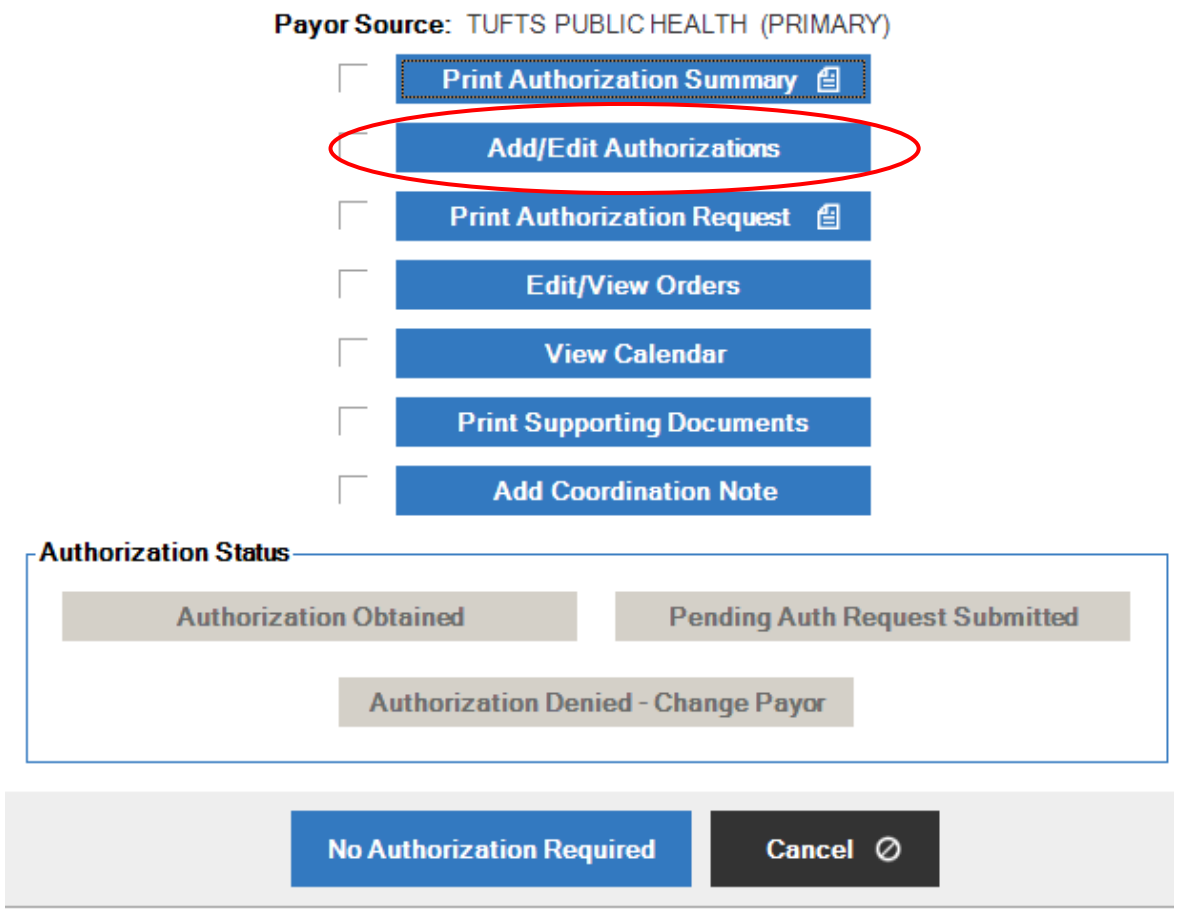
Instructions: On-Call Task “Obtain Additional Authorization”

Step 2: Double click on the patient’s name.



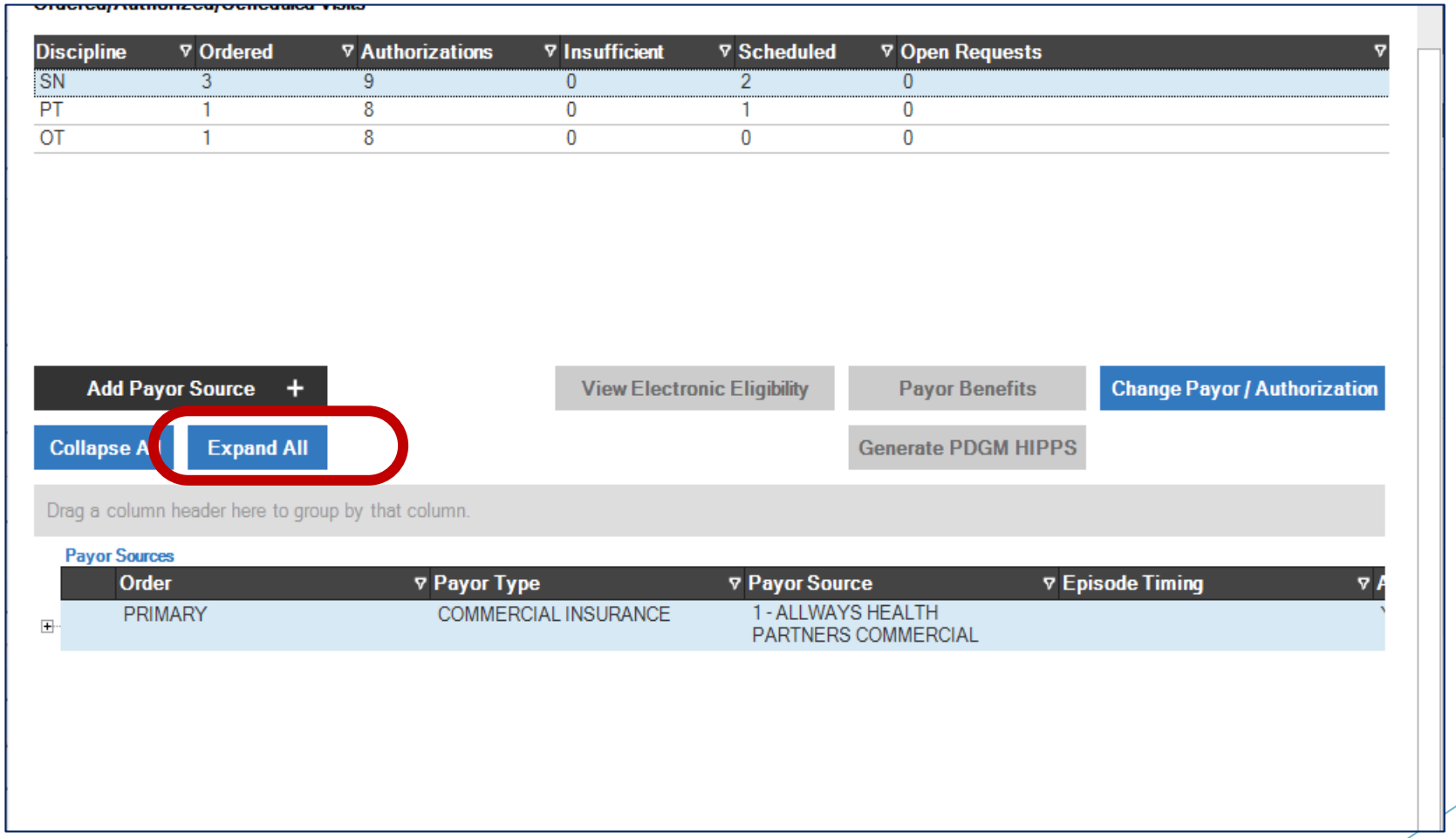
Instructions: On-Call Task “Obtain Additional Authorization”

Step 3: Click on the blue area in “Add/Edit Authorizations”



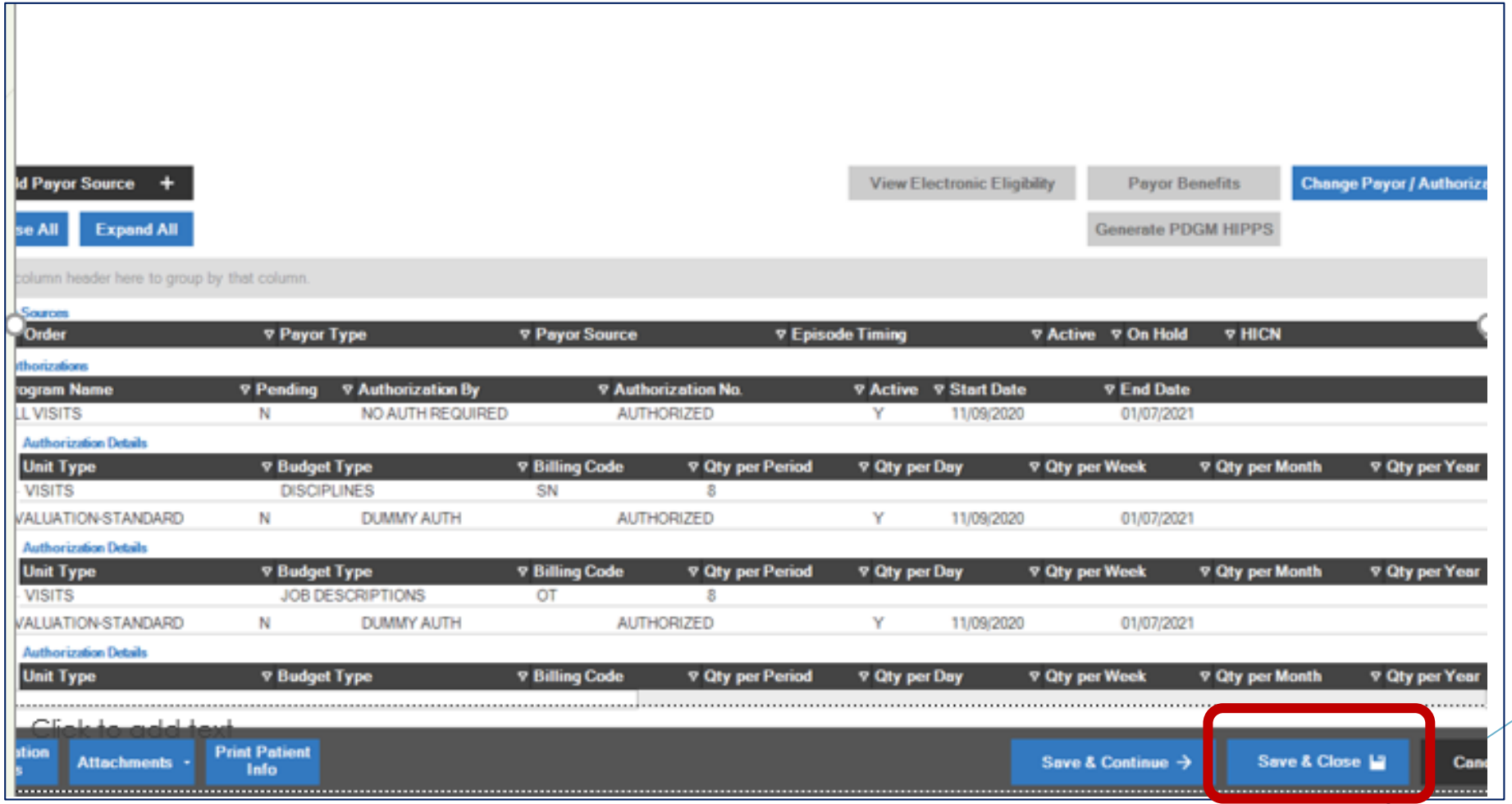
Instructions: On-Call Task “Obtain Additional Authorization”

Step 4: Click on “Expand All”



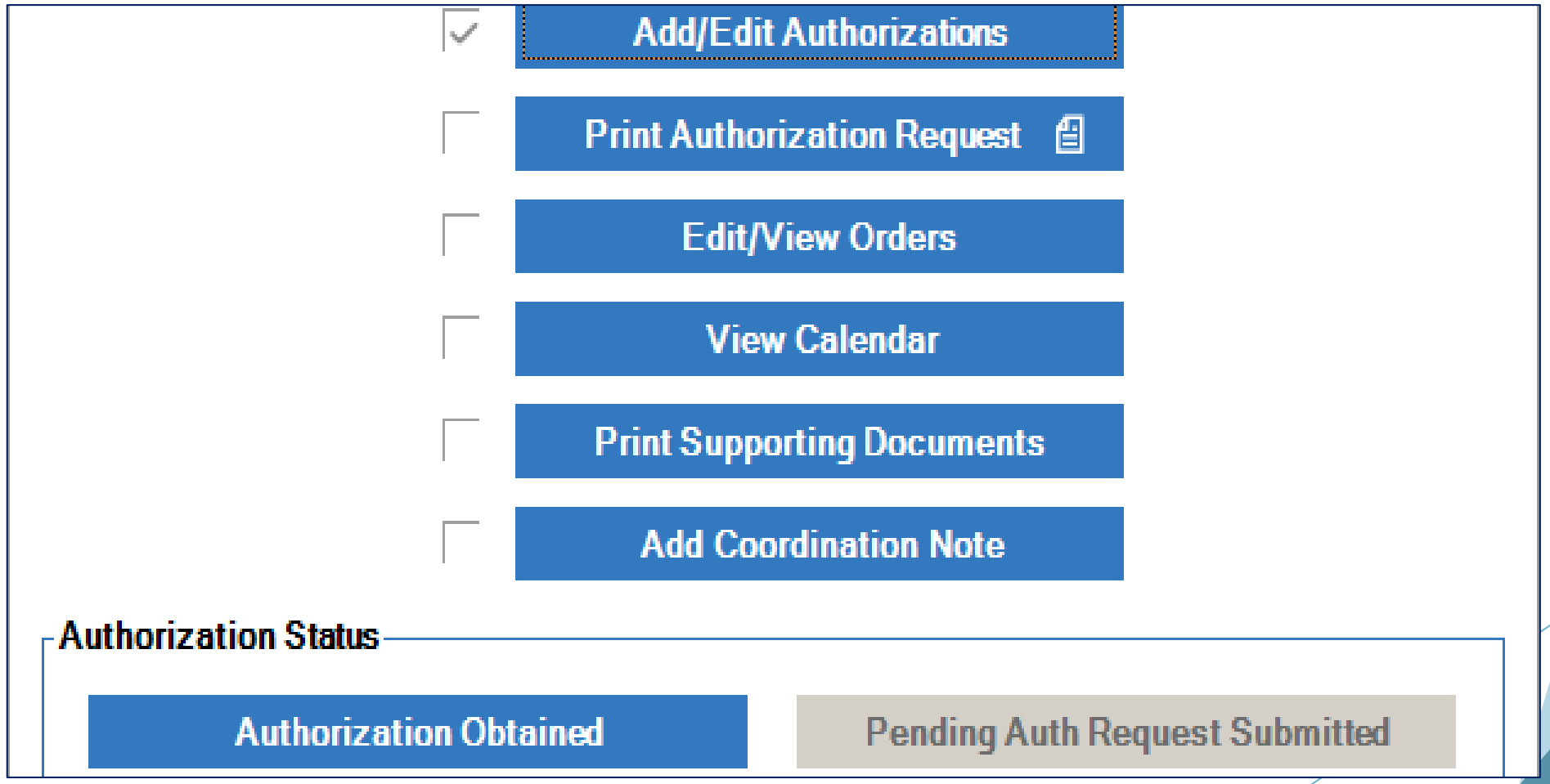
Instructions: On-Call Task “Obtain Additional Authorization”

Step 5: Click on “Save & Close” in the right-hand corner.



Instructions: On-Call Task “Obtain Additional Authorization”

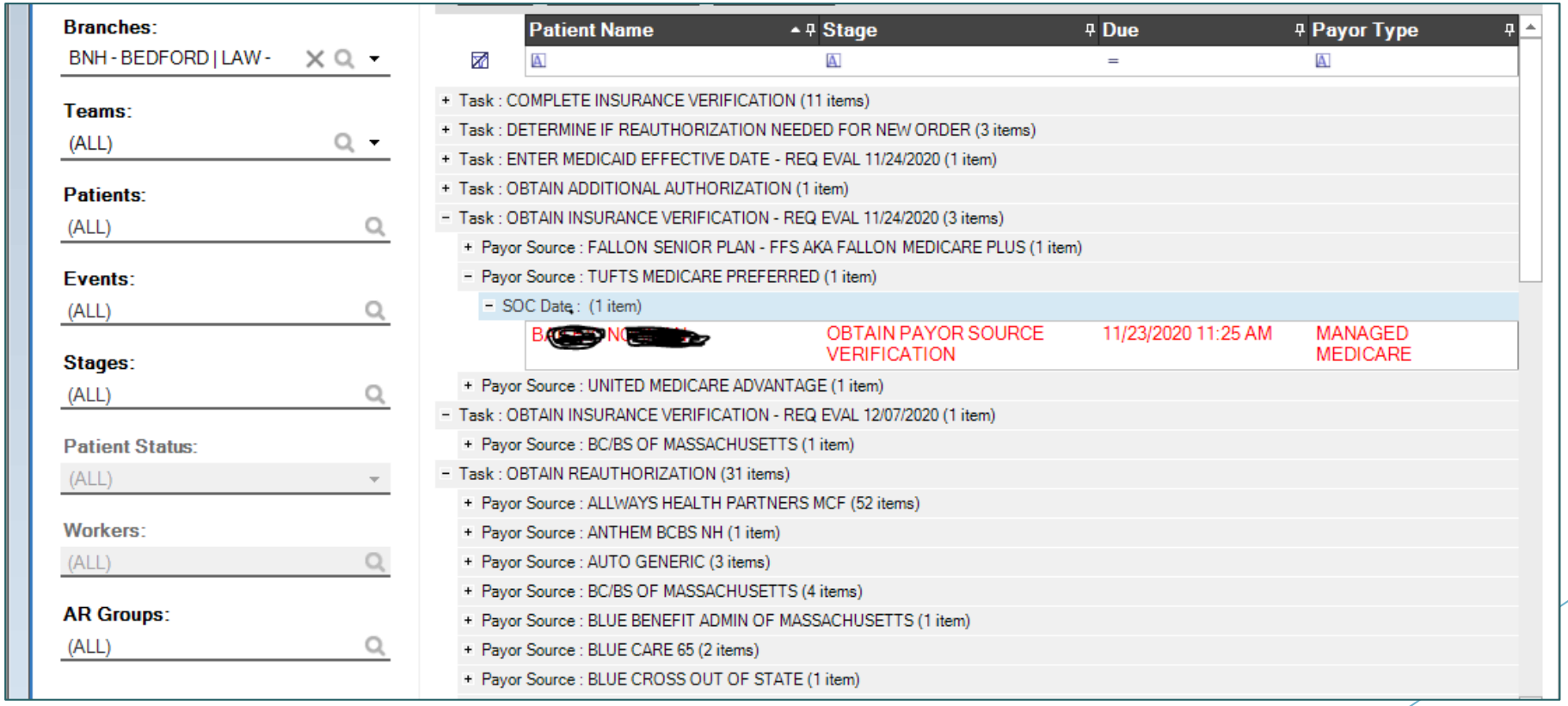
Step 6 - Final: you will return to this pop-up window. The “Authorization Status” section should now have one blue option to click: “Authorization Obtained” or “Pending Auth Request Submitted”. Click the blue area in either of these fields: this will process the workflow.



Instructions: “Obtain Insurance Verification”

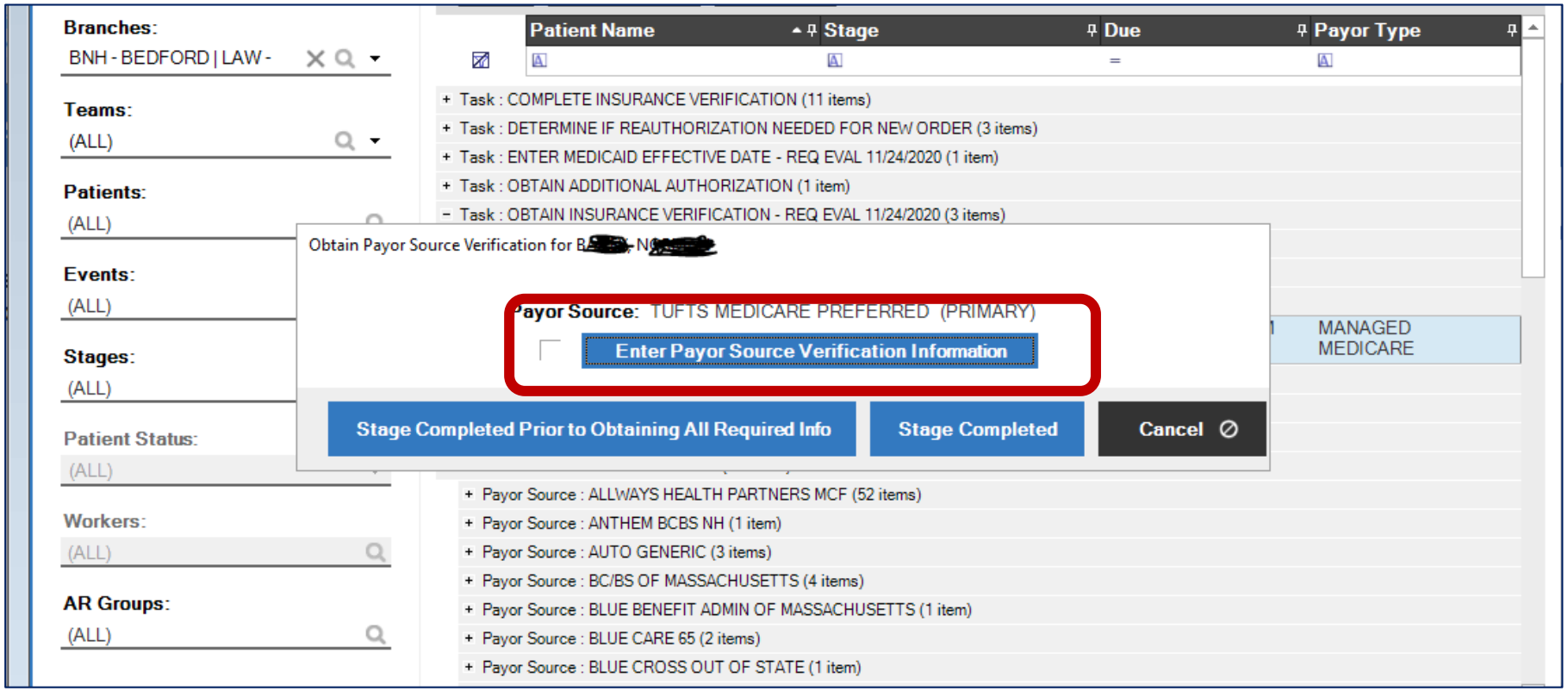
Please note that if a discipline is added immediately after this step is complete, no workflow will appear anywhere. If you are aware of an additional discipline, please add it via a “Dummy Auth” (p. 18).

Step 1: Click on “+” to the left of “Obtain Insurance Verification” to expand the list until you can see patient names. Once you see the patient that needs a visit, double click on the patient name.



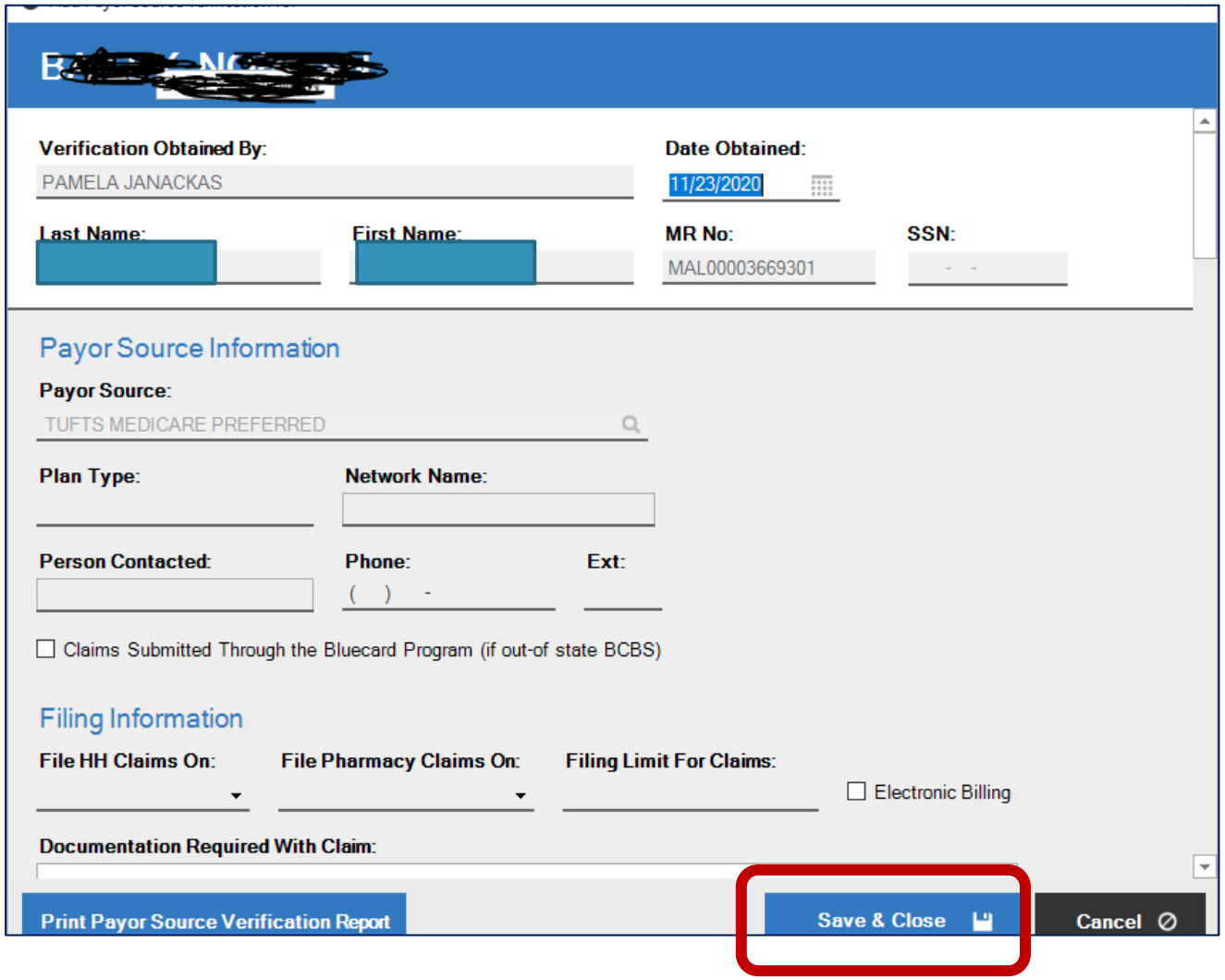
Instructions: “Obtain Insurance Verification”

Step 2: Click in the blue area of “Enter Payor Source Verification Information”



Instructions: “Obtain Insurance Verification”

Step 3: click on “Save & Close”

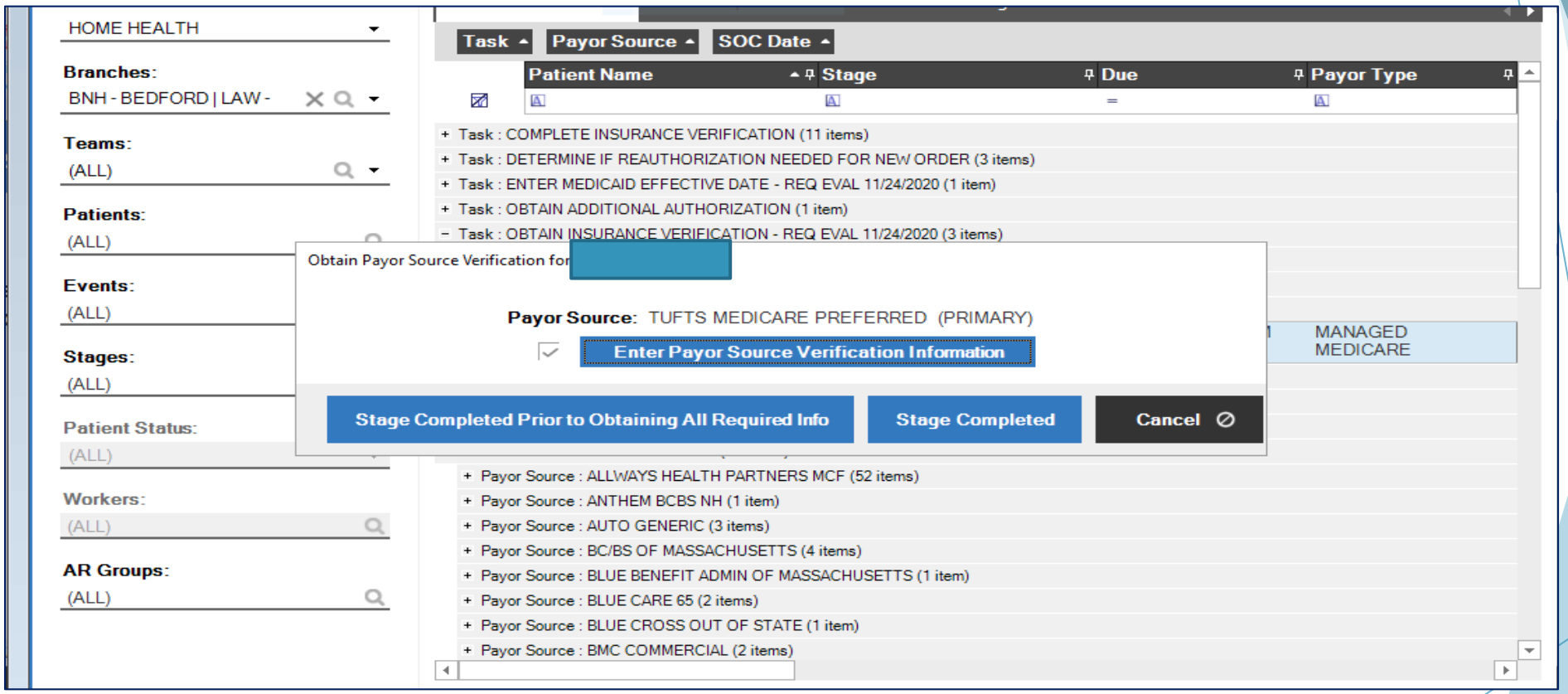


Instructions: “Obtain Insurance Verification”

Step 4 – click “Stage Completed Prior to Obtaining all Required Info”

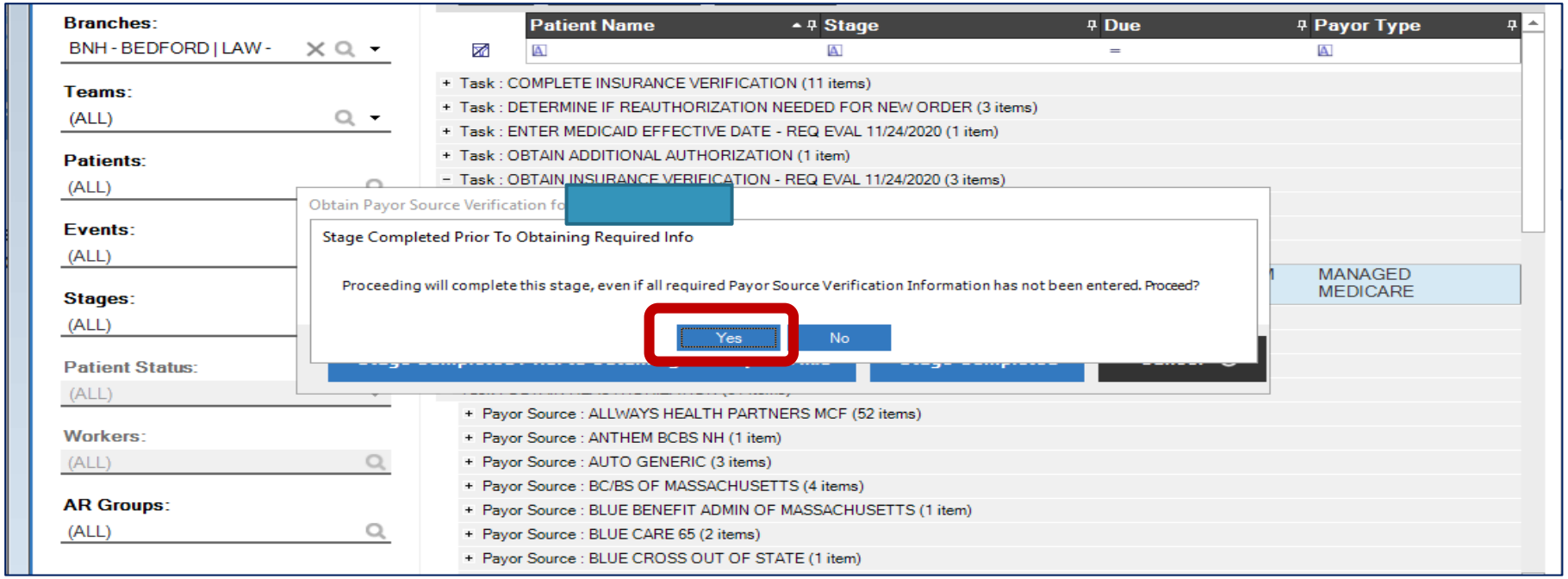
This allows you to schedule a dummy auth without verifying the insurance

DO NOT CLICK ON STAGE COMPLETED AS THAT WILL IMPACT FUTURE WORKFLOWS



Instructions: “Obtain Insurance Verification”

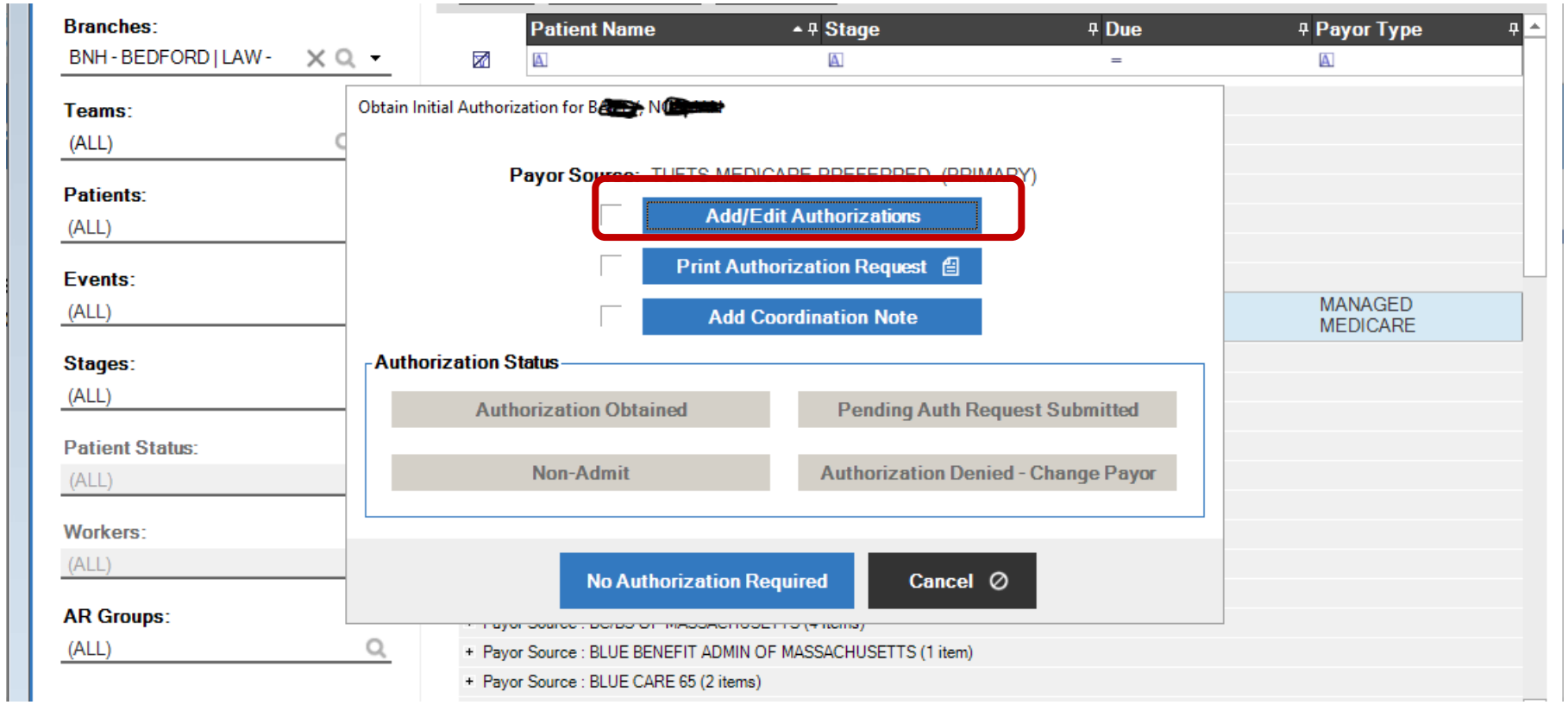
Step 5: Click “Yes”



Note: This warning states that authorization is being added **without** verifying the insurance eligibllity or coverage.

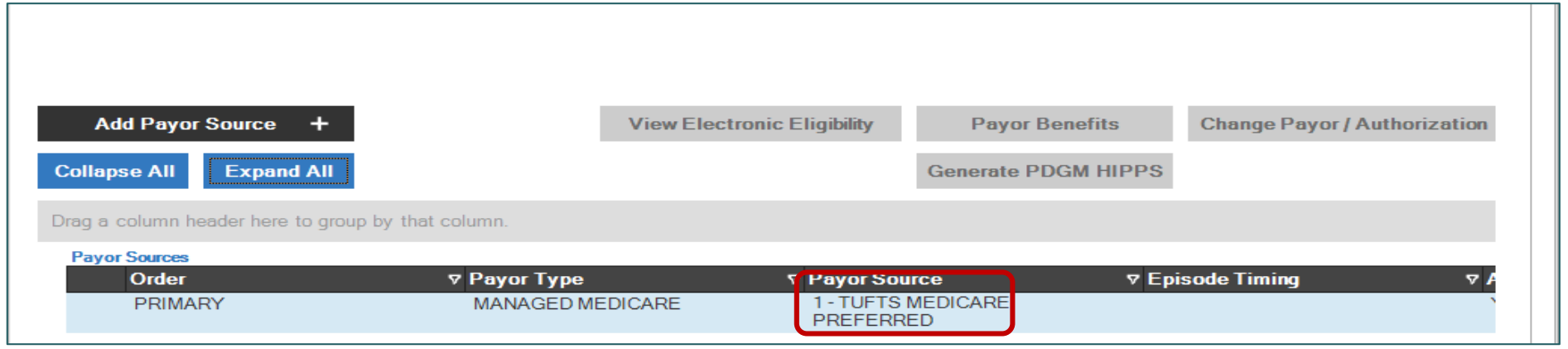
Instructions: “Obtain Insurance Verification”

Step 6: Click “Add/Edit Authorizations”

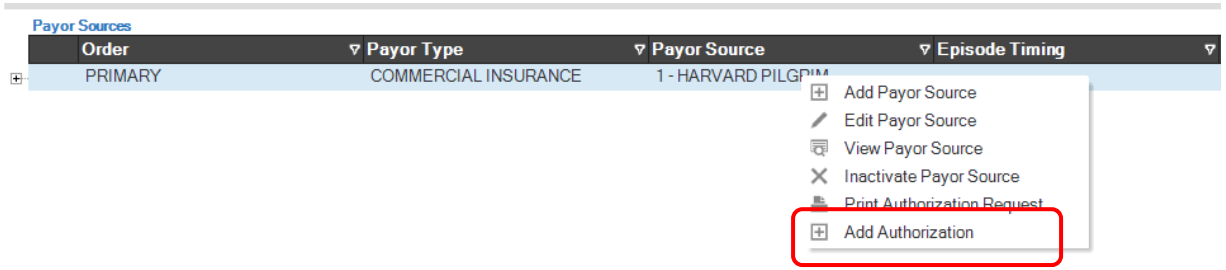


Instructions: “Obtain Insurance Verification”

Step 7: Right click on the name of the insurance (ex “Tufts Medicare Preferred” below). This is in the middle of the screen.



The below image will then pop up. Select “Add Authorization”

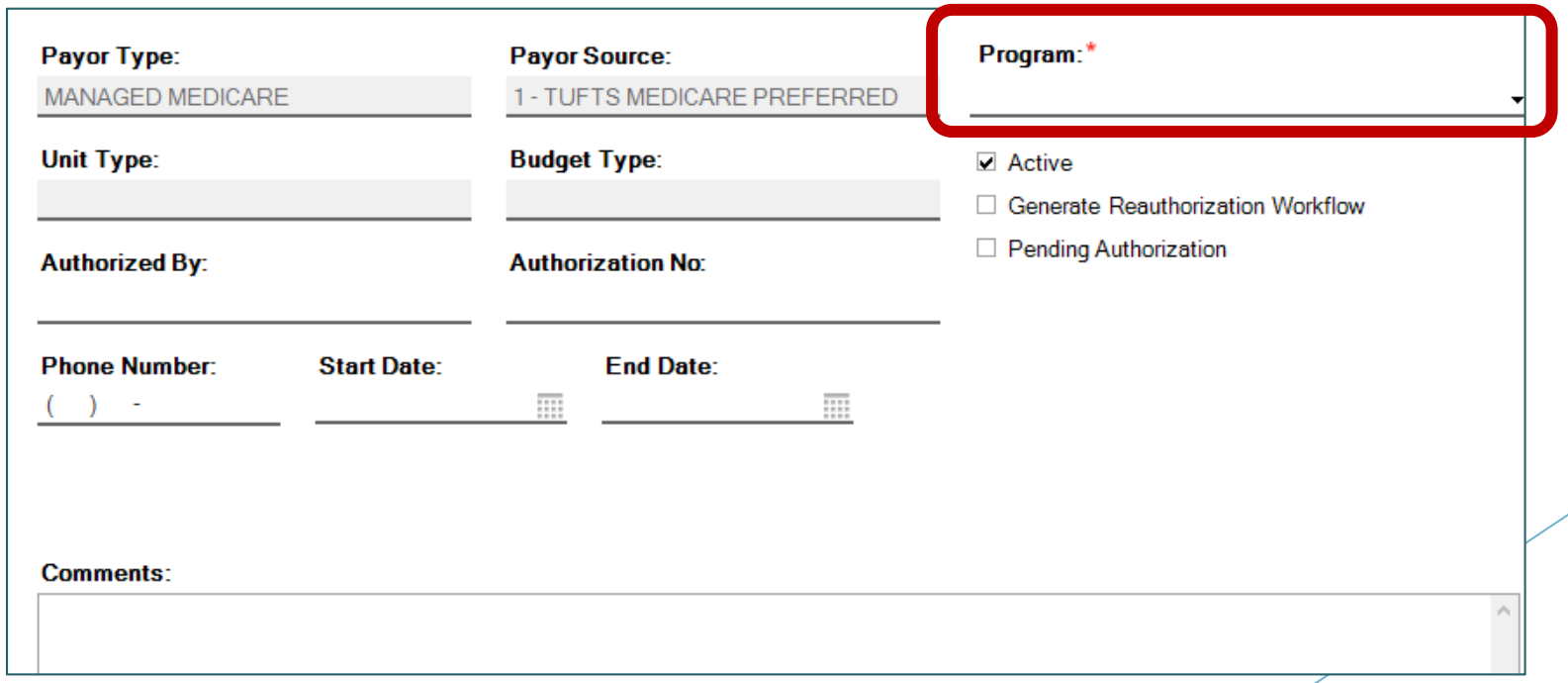


Adding a “Dummy Auth”

Step 1: Once here, you must choose the discipline you need to schedule.

Under “Program”, click the down arrow and select the program with the “All Visits…” prefix.

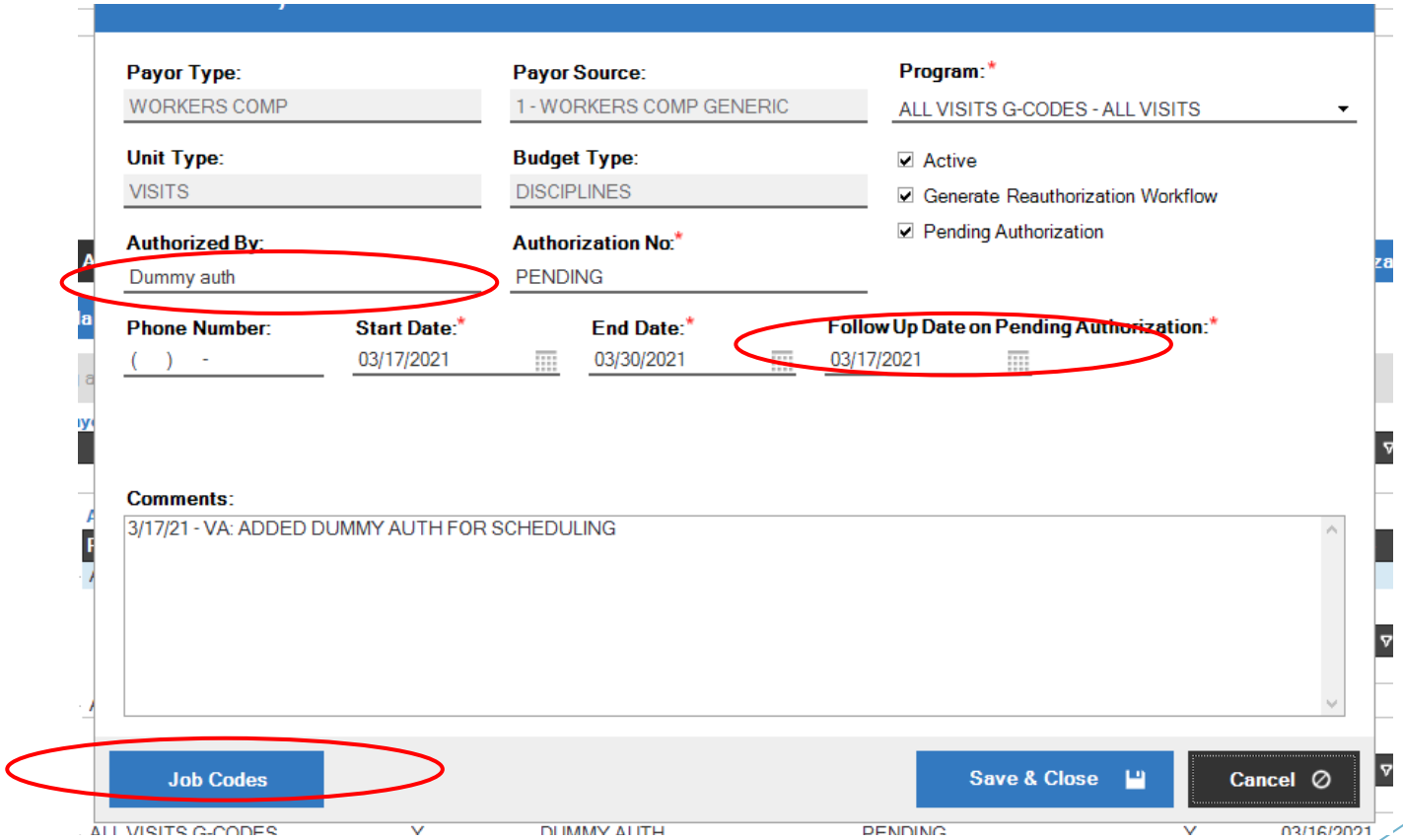
- Most common examples are “All Visits – All Visits” & “All Visits S (or G)-codes intermittent”
- You may also see “Eval, 31+, etc.” Please ONLY choose the “all visits” options.



Adding a “Dummy Auth”

Step 2:

- Write “dummy auth” in “Authorized By”. In comment section, put the date and your initials, as well as a note indicating that you put in a dummy to schedule.
- Then, put in **a follow-up date of today** (date entering the auth). **This is important, as this is the safety net in case this does not come to the workflow through clinical documentation completion.**
- Lastly, click on “Job Codes” located in the bottom left. See next slide for Job Code assignment.

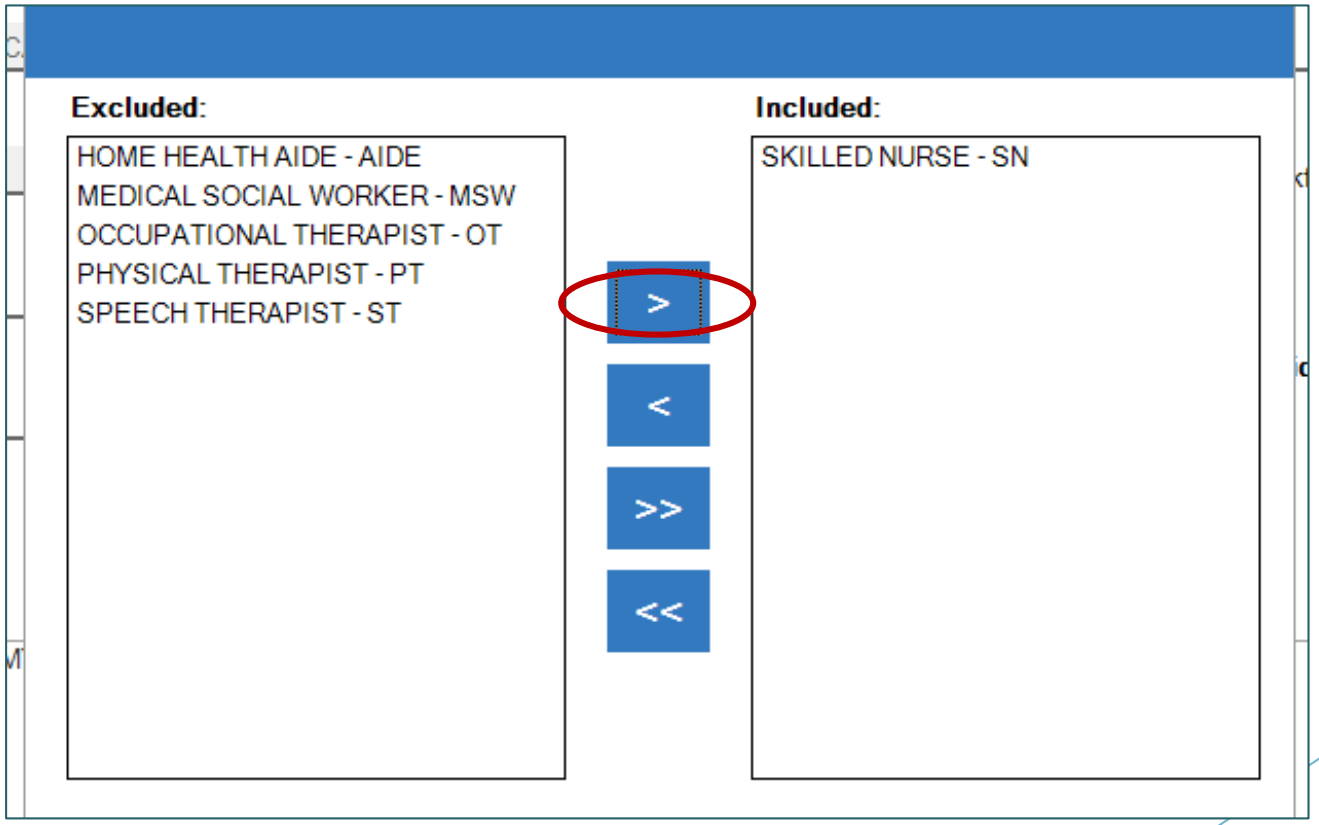


Adding a "Dummy Auth"

Step 3: This below image will appear after you hit "Job Code". You need to choose the discipline you want to schedule.

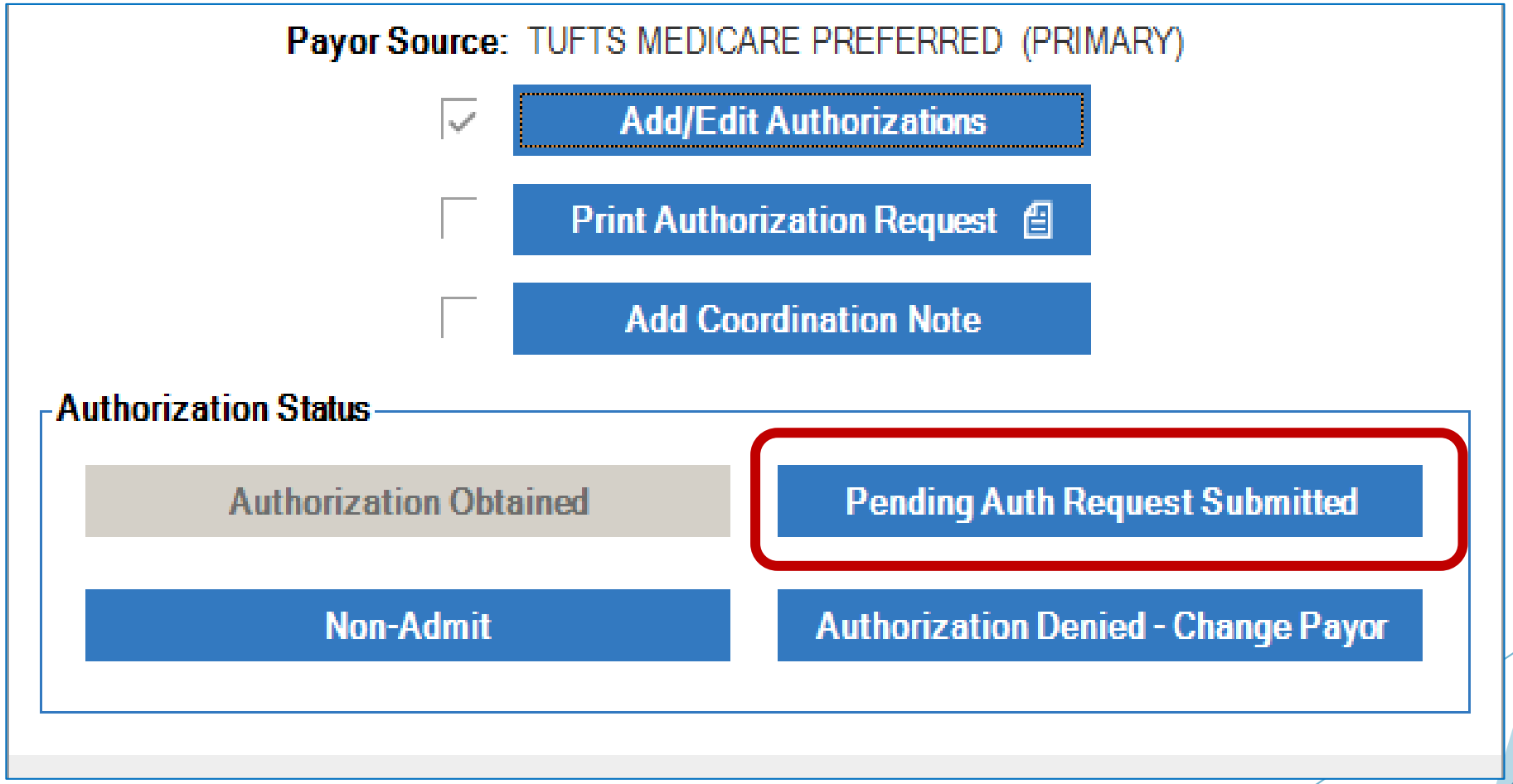
Each "Dummy Auth" must only contain one discipline, so please only select one discipline per authorization. Repeat the following process per discipline:

Click on the desired discipline, and then click the top arrow to move the discipline. This adds the discipline to the auth. Hit "Save & Close" here, and once again in the previous auth screen (you will return to that screen once the below is complete).



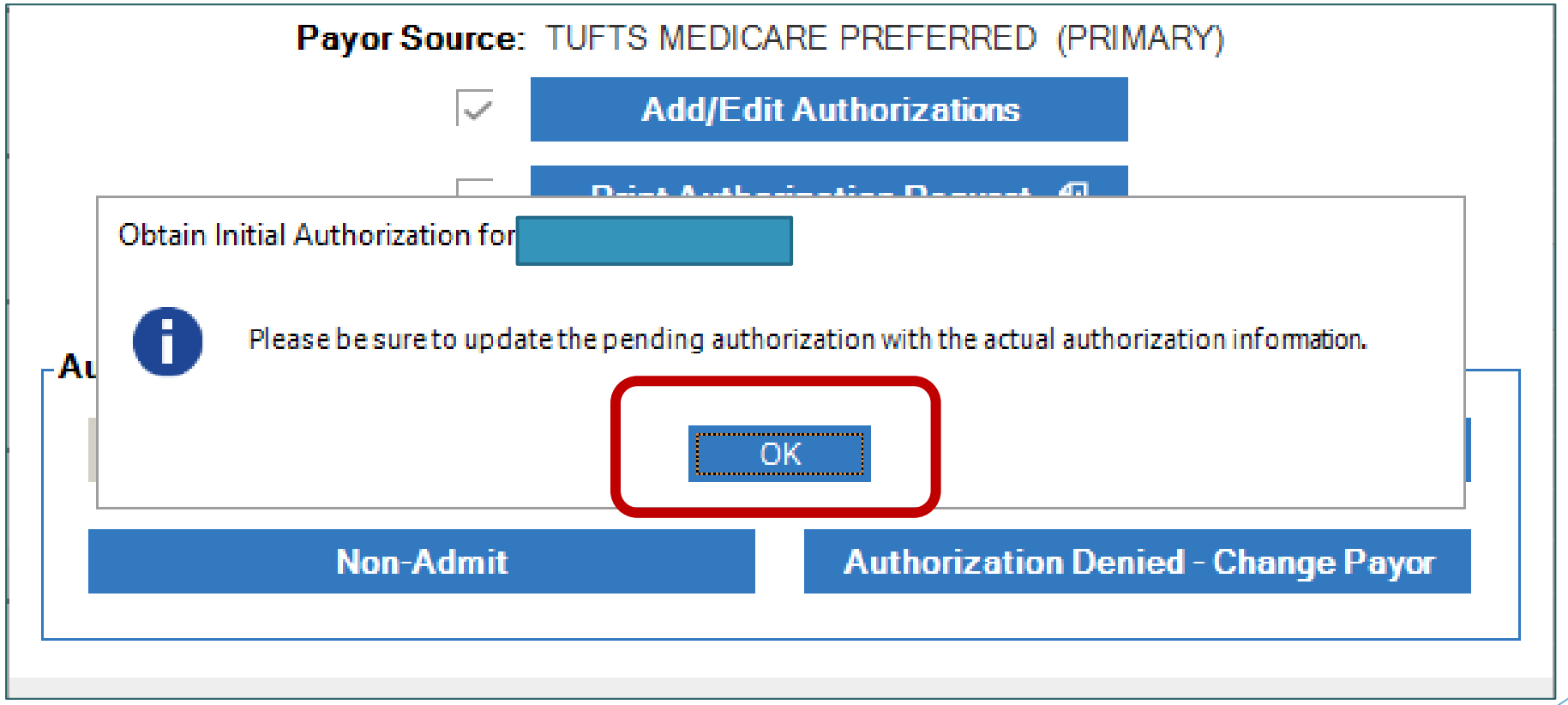
Adding a “Dummy Auth”

Step 4: This is the last screen for “Initial Auth Request”.
Click on “Pending Auth Request Submitted”.



Adding a “Dummy Auth”

Step 5: Click “OK” to process the workflow.



Instructions: “Obtain Insurance Verification”

Step 6: Add an “Incomplete Insurance Verification” coordination as follows: