

TruCare ProAuth Dashboard

The Dashboard provides the user with a quick view of authorizations linked to their account. Users can filter, sort and view information on all current, closed and "requested by me" authorizations.

- 1. Navigation Pane: A designated space for for demographic information on a member.
- 2. Provider Filter: A tool for searching and filtering requesting providers associated with your user account.
- 3. References: Name of user signed in and "Help" link to download the User Guide.
- 4. Create IP/SP Auth: Access to creating an IP or SP authorization request.
- 5. **Filter By**: A tool that controls what displays on the Authorization Summaries.
- 6. Inpatient Authorizations Summary: A table of inpatient authorizations for providers associated with your user account.
- 7. Extend: Extend an open IP Authorization request.
- 8. View Auth Details: A read-only summary of Authorization Details and member demographics.
- Page Controls: Controls for moving to 9. first, previous, next, or last page. Also for setting the number of table rows to view on each page (10, 20, 50, 100).
- 10. Service/Procedure Authorizations **Summary:** A table of service/procedure authorizations for providers associated with your user account.
- 11. Add/Extend Service: Add or extend a service to an existing SP authorization request.
- 12. Line Item: By member, each distinct service request that is submitted for an authorization.

Tip: For information on Service requests please see page 10 of this Quick Reference Guide.

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Filtering Requested Authorization

FILTER BY: A tool that controls what displays in the IP/SP Authorization dashboard summary tables. When the User first signs into TruCare ProAuth they may wish to view previously entered Authorizations (1 instance or multiple Authorizations). In order to see results in the IP/SP Auth Summary section of the dashboard the User will need to perform one of the following functions:

- 1. Enter the Member ID (Auth/s entered for 1 member)
- 2. Enter the Authorization number (Single auth request)
- 3. Select All Providers from the Provider Filter (to view Multiple Authorizations)

Requesting Provider Filter

PROVIDER FILTER (Grey): Indicates no requesting providers have been selected. Users can only search with Member ID's or Authorization numbers when Grey.

PROVIDER FILTER (Green): To view multiple completed Authorization request status', Users must first select the providers that is associated with the completed Authorization.

- 1. Click Provider Filter in the upper right
- 2. **The filter slider opens.** By default, all providers associated with your user account are deselected. There are multiple ways to filter your provider list:
 - a. **Select:** check any provider you want to include in the filter **OR** select the entire list.
 - b. Advanced Search: Click Advanced Search then fill in one or more of the fields. (You must enter at least two (2) characters for the provider name, provider ID, or city. Select the state from the drop-down list.) Click Search.
 - c. **Search by NPI:** Type the 10-digit ID number of the provider in the Search box. (You must enter at least two (2) characters.) Select the provider and click **Enter**.
 - 3. Click Apply Filter

Tip: Click anywhere else on the page to close the slider. Results will yield on the Authorization Summary Dashboard.

Select at least one provider from the provider filter to view	w authorizations
- Filter By	
Member ID	Authorization Number
Date of Service From Date	Date of Service To Date
09/10/2018	MM/DD/YY

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Shephard, Christian Location Name: Centre Hosp	italier Universitaire de Québec		-
Provider ID 100113	Tax ID	NPI 1234567893	
Specialty General Practice	Servicing address Centre Hospitalier Universita Québec Édifice Iberville IV Ville de Québec, QC, G1V 472 Canada		
Shephard, Jack Location Name: St. Sebastier	n Hospital		
Provider ID 100111	Tax ID	NPI 1234567893	
Specialty General Practice	Servicing address St. Sebastien Hospital 2602 N Main St. Los Angeles, CA, 90031, USA	A	
UMS Medical Location Name: UMS Medica	l East		

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Authorizations Summary

An Authorization Summary is read-only. You can use the summary to view information on all the authorizations linked to your user account for all members you have access to.

For more detail about a specific authorization the user has two options:

Click on the **Authorization** in the table

a. Click to the **expand the arrow** (as shown) for a quick view of the line item details

- OR -

b. Click View Auth Detail button for additional details (example: Requesting Provider information.)

Tip: Click on the member name to highlight the entire authorization line item row.

The Authorization Summary Screen displays the following read-only information.

- 1. Member Demographics, Authorization Details (including Requesting Provider Details)
- 2. Line Item Details
- 3. Print option or go Back to Dashboard

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	Authorization	n Details													
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Creating IP Authorization

Best Practices is to always begin the workflow by searching for a member before you click **Create an Inpatient Authorization** request.

- 1. Search for the Member
 - a. Full Member ID -OR-
 - b. Subscriber ID AND member DOB
- 3. Click Search

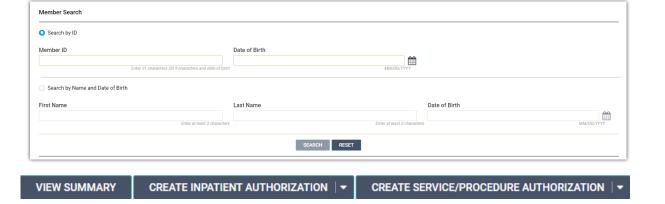
Click the **Create Inpatient Authorization Button** to open the Authorization form and begin the workflow. (Medical and Behavioral Health dropdown will be provided be sure to click the proper form)

Prescreen

Prescreen is the initial step in the workflow where you can learn the classification of an authorization request immediately. If authorization is required, you will proceed through the workflow. If authorization is not required, a message may inform you of the next steps to take.

- 1. Admission Date
- 2. **Member's Applied Eligibility** auto populates if the member's eligibility is on file.
- Servicing Facility by typing at least 2 characters, and then Search. For best results use precise criteria.
 - a. Search by Provider Name or
 - b. Search by Provider NPI
- 4. **Primary Diagnosis Field** by typing at least 2 characters and then **Search**. For best results use precise criteria.
 - a. Search by Diagnosis Name or
 - b. Search by ICD9 or ICD10 Code
- 5. Complete the mandatory dropdown Stay Level
- 6. Complete the **Requested Days** and **Service type** (if configured)
- 7. Click **Next** for results message.

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Admission Date	 Member's Application 	pplied Eligibility	
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Servicing Facility	MM/DD/YYYY		
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		(OR) Search by Code	 SEARCH
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		(OR) Search by Code	 SEARCH
	Search by Procedure name	(un) dearan by code	
Stay Level			
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Prescreen Messages

Possible Prescreen messages upon Submit:

Authorization – Not Required

This Authorization does not require an authorization.

Authorization – Duplicate Request

Authorization is a Duplicate Request please contact the Payer.

Eligibility – Member Ineligible

Member is not eligible. Please contact the payer for further assistance.

Admission/Start Date beyond the Limit

Your requested service dates are beyond the allowable limit. Please contact the payer for further Assistance.

Servicing Facility – Out of Network

An OON facility is selected. (NOTE: You can continue with the authorization request.)

Attachment Upload Failed

A problem occurred with the file upload. Please make sure your attachment name meets these requirements.

- Filename must be alphanumeric.
- Filename can include a dash or underscore.
- Filename cannot contain spaces.

Retrospective Authorizations

Contact the Payer/UM Department for retrospective consideration.

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mber Search			⊙			
tram,	Prescreen		Authorization Detail	в	Authorization Con	firmation
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of Birth (Age)	04/14/2017	WI_TANF		•		
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luct	Primary Procedure					
TANF	INFUSION OF IMMUNOSUPPRESSIV	/E ANTIBODY T 00.18		ICD9	- CLEAR	
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424243	* Stay Level					
bility Effective Dates	Medical	× -				
172003-12/17/2023						
		Contact the Payer/UN	A Department for retros	pective consideration	1.	



Tip: After any change made in the workflow, Prescreen will run again to determine whether an Authorization is required.



Authorization Details

Once the prescreen determines that you should continue with the Authorization, complete the required fields on the Authorization Details Page.

- 1. Complete Authorization Details
 - a. Admission Type
 - b. Admission Source
 - Place of Service c.
 - Target Discharge Date d.
 - Service Type e.
 - Level of Urgency f.
 - Out of Network Reason (if g. applicable)
 - h. **Requesting Provider**
 - i. Provider Name Field - Enter a minimum of 2 characters to begin your search

- OR -

- Provider NPI Field Enter the j. full provider NPI
- **Requesting Provider Contact** k. Name
- **Requesting Provider Contact** 1. Number
- Requesting Provider Fax Number m.
- Primary Procedure Name or Code n.
- ο. Secondary Diagnosis
- Add Note (if required) 2.
- Add Attachment (if required) 3.
- Submit 4.

Once you click **Submit**, you are able to:

- **Return to Member Search** a.
- b. **Return to Dashboard**
- **Print** the successfully submitted c. message

Tip: If you need to edit any information you entered o the Prescreen, just click the "Back to Prescreen" butte prior to submission.

TruCare [®] ProAuth				• PROVIDER FILTER (78/78)	Portal Writer Help
Dashboard	Create Inpatient Authorization			* ADD NOTE * ADD ATT	ACHMENT (0)
Member Search Contreras, Member ID Date of Birth (Age)	Prescreen Admission Date 04/17/2017	Member's Applied Eligibility TX_TANF	Authorization Details Stay Level Medical	Authorization Confirmation Requested Days 3	
07/02/1995 (21 years) Gender Female Active Eligibility Yes Policy #	Primary Diagnosis CORONARY ATHEROSCLEROSIS I CORONARY ARTERY (414.01)	Primary Procedure	Servicing Facility Saint Vincent Medical Cente		
Product TX_TANF Group # 75424243 Eligibility Effective Dates 11/01/2005 - 12/17/2025	Admission Type Service Type Requesting Provider Requesting Provider Contact Na Service Type Requesting Provider Contact Na		equesting Provider Fax Number	Target Discharge Date	D.7777Y
ed on button	Member Search Contreras, Member ID Date of Birth (Age) 07/02/1995 (21 years) Gender Fernale	Authorization Number Authorization 0000000343 PEND Primary Dia correct Medical Center CORONARY CORONARY	04/17/2017	te Requested Days 3	

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Adding a Note	
If configured, a note may be added or required.	
1. Click Add a Note in the upper right.	ADD NOTE ADD ATTACHMENT (0)
2. Enter the content in the *Note text box.	
3. Click Save when finished.	PROVIDER FILTER (78/78) Portal Writer Help
A Note and an Attachment are required ADD NOTE ADD ATTACHMENT (0)	Add Note * Note
Tip : Fields marked with an * are mandatory, click Save after entering note detail.	Special dietary requirements specified by PCP
Adding an Attachment	3 SAVE CANCEL
If configured, an attachment may be added or required.	
1. Click Add Attachment in the upper right.	
 Select * Document Type. The document type that you choose is displayed on the line item after the file is attached. 	ADD NOTE ADD ATTACHMENT (0)
 Enter a comment if necessary. 	Diagnosis details from PCP must be submitted
 Click Browse to navigate to the file location, select the file, and then click O 	pen. Othorsen
5. Click Add . The file is listed in the Attached Files section.	
To discard the file, select the line item and click Remove.	Comment
6. Click Close when finished.	
The count (in parenthesis) indicates the number of attachments.	* File Name BROWSE
ADD NOTE ADD ATTACHMENT (1)	ADD REMOVE
	Document Type File Comment Medical Records M1000590000_recor Image: Second Se

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Creating an SP Authorization Request

Creating a Service and Procedure Authorization is primarily the same workflow as an Inpatient Authorization form.

The following outlines the difference as it pertains to **editing**, **adding** and **removing services** <u>prior to submission</u>.

Add or Edit a Service

Once you have added the initial service, you have the option to add additional services or edit services. Adding or editing a service returns you to **Prescreen** to begin the workflow for the added service.

- 1. Complete the fields. If an authorization is required, advance to the **Authorization Details** page, via the **Next** button.
- 2. Click Add Service,
- 3. If changes are necessary, Edit (prior to submission).

Note: You can edit all fields in Prescreen except Primary Diagnosis.

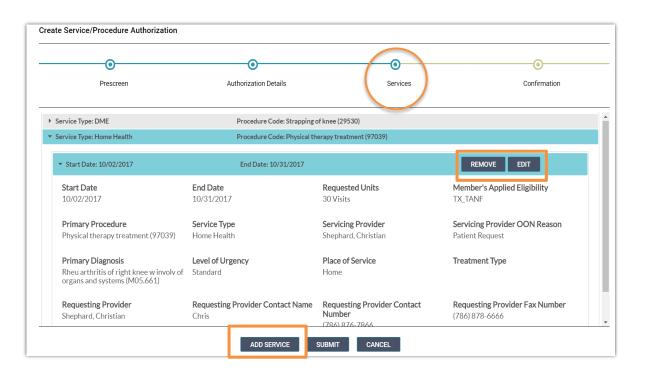
Remove a Service Request

Prior to Submitting an Authorization, users can discard any newly added service/procedure. Select the **Remove** button to delete the unwanted service.

- a. Click **Yes** to remove the Service
- b. Click No to leave the Service as is



PROVIDER FILTER (0/10) TCAdmin TCAdministrator Help About
CREATE INPATIENT AUTHORIZATION |
 CREATE SERVICE/PROCEDURE AUTHORIZATION |



Tip: Make sure that your entries are accurate. You cannot edit an authorization request after you submit it. If necessary, return to Prescreen to correct any entries made in error.

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Add to an Existing Service Authorization

You can add a service to an existing open SP Authorization request. This workflow offers convenience and work/time efficiencies.

To access the **Add/Extend Service** option:

- 1. Go to the SP Authorization Summary from the Dashboard.
- 2. Click to highlight the Authorization to which you are adding/extending.
- 3. Click Add/Extend Service button.
- 4. From the **Services** page, click **Add Service** button.
- 5. **Submit** button to complete the workflow.

								3	ADD/EXTEND SERVICE	VIEW AUTH DETAILS
2 mber Name	\$	Authorizatio	on# 🗢	Start	Date 🖨	E	nd Date 🗢	Det	ermination Status 🗢	State 🗢
Bob, Gregory V		OP0000016598		06/04/2017		06/04/20)17	Pend	ing	Open
Line Item		Start Date	Enc	l Date	Servicing Pr	ovider	Procedure Code an	d N	Service Type	Status
L	06/04/	2017	06/04/201	7	LAC+USC Medi	cal Cent	99.21 INJECTION C	F A	Hospital - Outpatient	No Decision
	1		1	K ((1 →)	10	v			

Tip: When selecting "Add/Extend Service" to an Authorization, some fields will automatically prepopulate for ease of data entry and consistency.

NOTES:

- Complete the fields and if an authorization is required, advance to the Authorization Details page, via the Next button.
- Complete the Authorization Details and continue to the Services page via the Next button.
- From the Services page, review your entries to ensure that you are submitting accurate information.
 If the entries are correct, click
 Submit to receive confirmation.
- d. Otherwise, click **Edit** to return to **Prescreen** and enter correct values.

TruCare [#] ProAuth										Portal Writer Help
Dashboard	Extend Service/	Procedure Aut	horization							
Member Search Bob, Member ID		Prescreen		Autho	• rization Details		Service	s	Confirmat	ion
Date of Birth (Age) 05/02/1954 (63 years)	▼ Service Type:	Hospital - Outpa	tient	P	rocedure Code:	INJECTION OF	ANTIBIOTIC (99.21)			EXTEND
Gender Male	Line Item	Start Date	End Date	Requested Units	Status	Determined Units	Applied Eligibility	Servicing Provider name	Servicing Provider NPI	Place Of S
Active Eligibility Yes	1	06/04/2017	06/04/2017	1 Visits	Pending	0 Visits	WI_SNIP	LAC+USC Medical Center	1234567893	Office
Policy # Product WL_SNIP Group # 674324243 Eligibility Effective Dates 11/01/2005 - 12/17/2025					4 ADD SERVICE	5	r CANCEL			

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Dashboard with Service Request Authorization Summary

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- 12. Line Item: By member, each distinct service request that is submitted for an authorization.
- 13. Service Request: Your organization controls the display of this table.

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uration	Member ID	Authorization Nu	mber			
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	12 Sector Ford, James	OP0001004181	Approved	06/19/2019	06/20/2019	Open
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	1 S5102 DAY CA		AY CARE SERVI 06/05/20			Approved visits
	Ford, James	SR000000431	Denied 05/1	7/2019 06/21/2019	Brooks, Douglas	OPEN
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SR000000267

Partial Approval

03/11/2019

▶ ▶ 10

03/22/2019

Ford James

OPEN

Brooks, Douglas

Acknowledging Service Requests

If configured, a provider may require you to acknowledge service requests in the Service Request Summary table.

You must acknowledge service requests in the following cases:

- > There is a new service request in TruCare ProAuth.
- A previously acknowledged service request is modified in TruCare, for example a new line item is added or an already acknowledged line item is changed.

To acknowledge service requests in the summary table:

- 1. Select the **Accept** check box for the service request.
- 2. Click Acknowledge.

If you want to acknowledge multiple service requests, select the **Accept** check box for all service requests you want to acknowledge. You can acknowledge up to 100 service requests at a time.

Acknowledged service requests display **Accepted** in the **Acknowledge** column. The **View Auth Details** button is enabled.

You must acknowled	lge unacknov	wledged service req	uests.									
			ACKNOWLEDGE								VIEW AUTH DETAIL	
Acknowledge	¢ M	ember Name 🗘	Authorization # 🗢	Determination Sta		Start Date 🗢		End Date 🗢		Provider 🖨	State 🖨	
Accept		Ford, James	SR000000632	Approved		06/28	/2019	0	07/26/2019	Brooks, Douglas	OPEN	
Acknowledge	Line Item	Service	Modifier	Service Offer S		rt Date End Dat		te Quantity		Status		
	1	S5102 DAY C	32 Mandated	DAY CARE SE	06/2	28/2019	07/26/20	019	212.67 visits	Appr	oved visits	
Accepted		Ford, James	SR000000431	Denied	Denied		05/17/2019		06/21/2019	Brooks, Douglas	OPEN	
Accepted		Ford, James	SR000000507	Approved		05/26/2019		05/31/2019		Brooks, Douglas	OPEN	
Accepted		Ford, James	SR000000370	Approved		05/08/2019		05/17/2019		Brooks, Douglas	OPEN	
Accepted		Ford, James	SR000000267	Partial Approval		03/11/2019		03/22/2019		Brooks, Douglas	OPEN	

TOU MUST ACKNOW	/ledge unac	knowle	edged service rec	quests.									
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Accept		F	Ford, James SR0000000632 Approved 06/28/2019 07/26/2		7/26/2019	Brooks, Dougla	s OPEN						
Accepted		Ford, James		SR000000507	Approved		05/26/2019		05/31/2019		Brooks, Dougla	s OPEN	
Acknowledge Line Ite		em Service		Modifier	Service Offer	vice Offer Sta		End Date		Quantity		Status	
Accepted	1		S5102 DAY C		DAY CARE SE	05	26/2019	05/31/20)19	408 visits	Aj	Approved visits	
Accepted		Ford, James		SR000000431	Denied		05/17/2019		06/21/2019		Brooks, Dougla	s OPEN	
Accepted		Ford, James		SR000000370	Approved		05/08/2019		05/17/2019		Brooks, Dougla	s OPEN	
Accepted		Ford, James		SR000000267	Partial Approval		03/11/2019		03/22/2019		Brooks, Dougla	s OPEN	