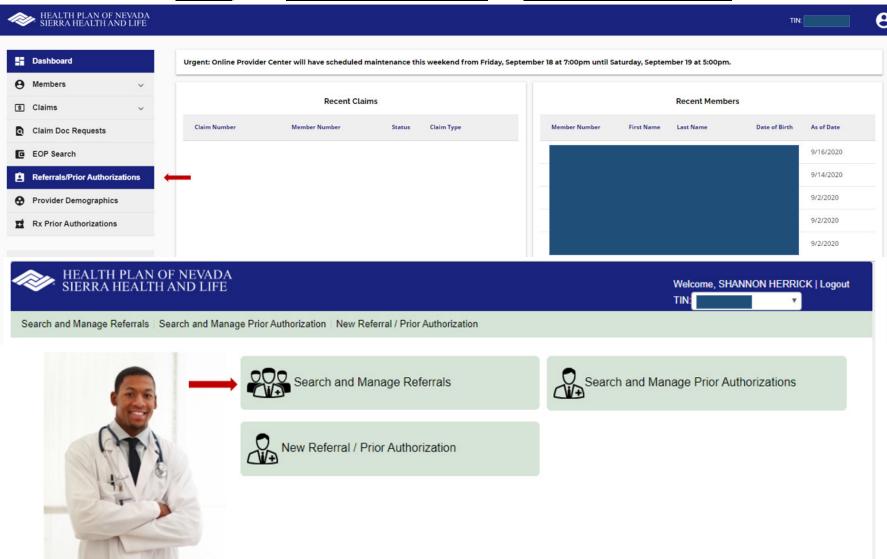




Online Provider Center Tutorial Search and Manage Referrals

Search and Manage Referrals:

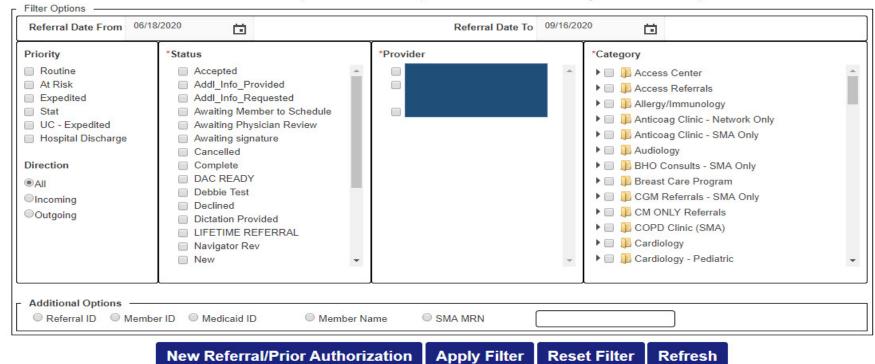
To review and work a **Referral**, select **Referral/Prior Authorization** and **Search and Manage Referrals**.



Search and Manage Referrals Continued:

Search and Manage Referrals

Please select desired filter options. At least one filter option must be selected. The date range cannot exceed 90 days.



Filter Options

The Filter Options on the **Search and Manage Referrals** screen will be used to filter the types of referrals the user wants to view or manage. These filters can be used separately or together to define the view the user is seeking.

The user will be able to filter their views by various selections:

Priority, **Direction**, **Status**, **Provider**, **Category**, or **Additional Option features** which are subject to the 90 day timeframe with the exception of **Referral ID**, **Member ID**, or **Medicaid ID**.

<u>Search and Manage Referrals - Filters Continued:</u>

•	<u>Priority:</u> The Priority is the urgency of the referral. Only one Priority at a time can be selecte as a filter. Priorities of a referral are defined as Expedited (3 days), At Risk (14 days), or Routin (30 days). Subject to the 90 day timeframe.				
	Priority				
	Routine				
	☐ At Risk				
	☐ Expedited				
•	<u>Direction</u> : The Direction of the referral indicates whether the referral is being sent <i>from</i> or to that specialty. Only one Direction at a time can be selected as a filter. Subject to the 90 day timeframe.				
	Direction				
	●AII				
	Olncoming				
	Outgoing				

<u>Search and Manage Referrals - Filters Continued:</u>

<u>Status</u>: The **Status** is the description of the stage or status of the referral such as, New, Declined, or Scheduled. Subject to the 90 day timeframe.

Status Name	Definition			
Awaiting Signature	Referral not viewable by Specialist until electronically			
	signed by the Physician.			
New	Initial referral sent to Specialist. All New referrals			
	require review.			
Addl Info Provided	When referring (requesting) provider returns			
	additional information as requested.			
Addl Info Requested	A request sent back to referring provider for			
	additional information required to process referral.			
Cancelled	When patient refuses the referral at time of			
	submission or cancels the scheduled appointment.			
Declined	Specialist (or receiving team) declines acceptance of			
	the referral based on specific reasons listed for users			
	to select from.			
Awaiting Member to	When referral is awaiting member to call to schedule			
Schedule	appointment.			
	Attempting to Schedule Member No. Decreases from Members			
	No Response from Member			
Scheduled	Patient appointment has been made & appointment date indicated.			
Rescheduled	Appointment date is rescheduled based on specific			
	reason listed below required for Providers to enter.			
	 Member requested to reschedule 			
	 Provider requested to reschedule 			
Outsource	Sending to an outside Contracted Specialist for			
	services not offered by SMA. This status is only			
	accessible by a SMA provider.			
Overflow	Sending to an outside Contracted Specialist because			
L	unable to meet access guidelines.			
No Show	The patient did not arrive or keep their appointment.			
Awaiting Physician	Specialist is reviewing Referral information for a			
Review	decision.			

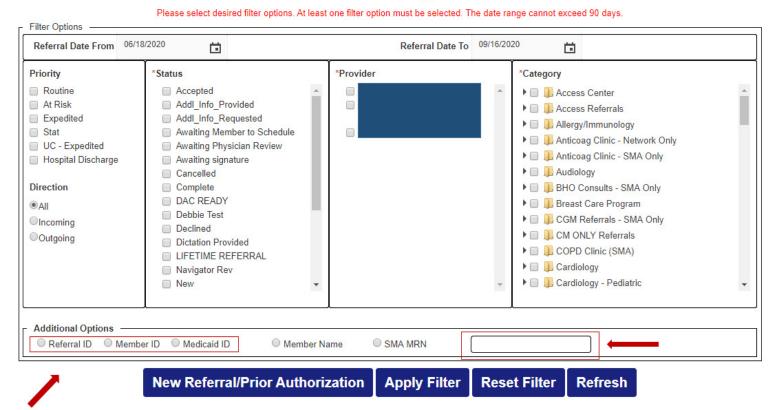
• <u>Category</u>: The Category is defined as the type of specialty or department that would provide the referral services or procedures (the referred to department). Subject to the 90 day timeframe.

Category							
	\Box	~					
Þ		Dermatology					
Þ		Dermatology (No NV)					
Þ		Endocrinology					
١		Endocrinology - Pediatric					

Search and Manage Referrals - Filters Continued:

Additional Options: Allows a search from one of the options displayed in the drop-down.

Search and Manage Referrals

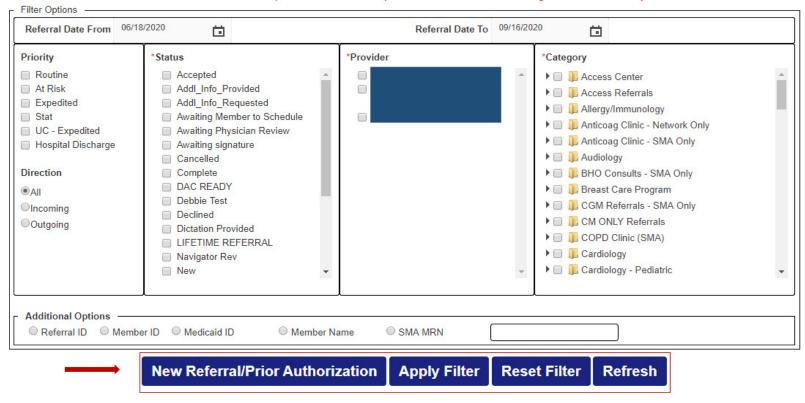


Once an option is selected the user then places the value for this option in the **Criteria** box provided under the **Additional Options** drop-down box. Only the **Referral ID**, **Member ID** and **Medicaid ID** will override the 90 day calendar date range.

Search and Manage Referrals - Filters Continued:

Search and Manage Referrals

Please select desired filter options. At least one filter option must be selected. The date range cannot exceed 90 days.



Once all the **Filter Options** are selected, select the **Apply Filter** button and the screen produces new results.

- The **New Referral/Prior Auth** button will launch the screen to create a new referral or a new prior auth.
- The **Reset Filter** button resets the filters back to the default values and refreshes the screen showing all referrals (for the user's default view or login).
- The **Refresh** button will refresh the screen with the latest referral information without changing the filters.

After the filters are applied, the **Referral(s)** count will appear right above the list of referrals.

Display of Referrals:



Referrals are displayed in order by Priority; Expedited, At Risk then Routine.

The definitions of the columns in the display are:

<u>Priority</u>: The urgency of the referral, which is set at Expedited (3 days), At Risk (14 days) or Routine (30 days).

<u>ID</u>: The referral ID number assigned when the referral was created.

Patient: The patient's name, DOB and Member Number and Phone Number

<u>Status/Status Age</u>: The referrals age as of the screen refresh (or as of today) and the current Status of the referral, such as New, Scheduled, etc.

<u>Submitted</u>: The date and time the referral was submitted. The system will translate the date comparing it to today's date and display when the referral was submitted in either days or a descriptor of today or yesterday.

Category: The department or team to receive or service the referral.

<u>Direction</u>: They system will identify whether the referral is incoming or outgoing to the user's department.

<u>Provider</u>: The To/From provider or team will be displayed. The receiving provider's group will initially be displayed until the specialist/provider has been assigned to this referral.

<u>Comment</u> icon: Selecting this icon displays all the comments added for the referral with a date/time stamp for each addition.

<u>Copy</u> icon: Selecting this icon provides the user the ability to copy this referral and create a new one from the original information

Print icons: Selecting these icons provide the users the ability to print the referral.

Viewing an Existing Referral

The **Search and Manage Referrals** screen will display the summary information for each referral on the first row and will allow the **Servicing Team** to change the **Priority** &/or **Status** per medical need.

To view an existing referral, select the referral **ID** (i.e. 9173923) and the **Search and Manage Referrals** screen expands to display the **Referral Details**.

Referral Details Submitted Patient Status/Status Age Direction Sep 16, 2020 Orthopedic From: DIAGNOSTIC CENTER Scheduled OF MEDICINE To: NEVADA ORTHOPEDIC & 12:44:05 PM Surgery Scheduled for Date: Today 09/30/2020 SPINE CENTER Last Update Sep 16, 2020 Update 2:51:10 PM

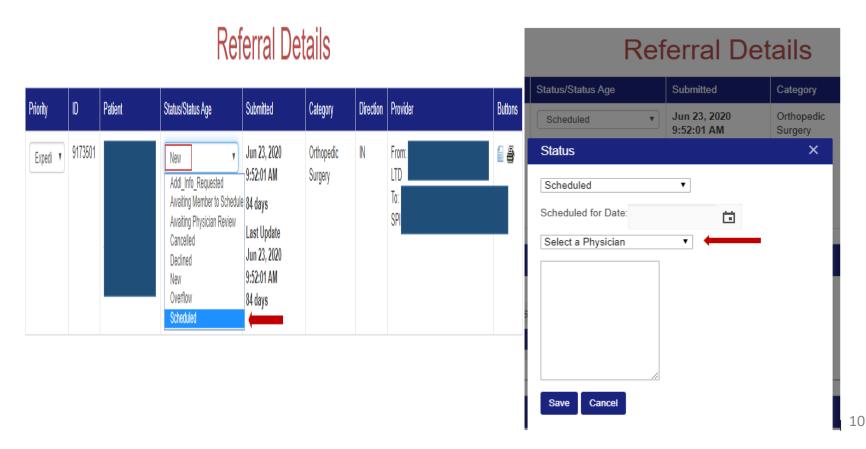
As the user scrolls through the **Referral Details**, all sections become viewable of **Diagnosis/Active Problems**, **Questionnaire**, **Health Information**, **Attachments** (optional), and **Assigned to Specialist** (optional), and **Comments** (provides the history of the referral).

Active Problems - Category							
Diagnosis codes(s)/Active Problems code Description R69 ILLNESS, UNSPECIFIED	Category Orthopedic Surgery	Subcategory Ankle/Foot					
Questionnaire							
Orthopedic Surgery 1. Was the patient seen in an Emergency Room or Urgent Care within 60 days of this referral? No Ankle/Foot 2. Pain location: Left							
Health Information							
Attachments							
Assign To Specialist							
Select One			•				
Comments							

Managing Referrals

After selecting the referral from the list of referrals as described in the previous section, the Servicing Team reviews the referral as submitted and determines what course of action is appropriate per the medical need.

Upon specific transitions, such as Scheduled, the user can **assign** the referral to a particular specialist within the group (if applicable). The user can also enter additional **comments** if needed. After the patient has completed their visit, transitioning the referral into the **Scheduled** status will update our claims system for payments (when required) and will assure all future care for the member is coordinated at the appropriate benefit level. **All referrals** should be transitioned into the **Scheduled** status if the patient was seen for care.



Managing Referrals (end)

If the referral is Declined, the status will need to be changed to **Declined**. The user must enter a status reason as to why the referral is being declined. The user may also enter additional comments.

