

# How to Submit Medical Authorizations Online with AuthAccel



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Promise Health Plan

# Agenda



1. AuthAccel overview for medical requests
2. AuthAccel demonstration: Submitting a medical request
3. View authorization status: How to search for an open or closed request
4. Search for a requesting provider when you have 20+ Blue Shield Provider IDs attached to your Tax ID
5. Summary and resources
6. Q&A

# AuthAccel overview

## Request Medical Prior Authorizations

Member Eligible 12-31-2199

	<b>Name:</b> ALBERT MEMBERN	<b>Member ID:</b> 123456842	<b>Plan Type/Group ID#:</b> Full PPO SAV_ED 5500 Jan20/W0001074
	<b>Date Of Birth:</b> 03-16-1959	<b>Benefit String:</b> M0019670	<b>LOB:</b> DMHC.PPO
	<b>Address:</b>	<b>IPA/MG:</b>	
	<b>Phone:</b>	<b>Effective:</b> 01-01-2020	<b>Term:</b> 12-31-2199
	<b>Special Programs:</b>		

Select Authorization Urgency

Standard  Expedited

**AuthAccel is Blue Shield of California's medical and pharmacy online authorization system available 24/7 from our Provider Connection website.**

AuthAccel can now consume over 2,000 Blue Shield Provider IDs (PINs) at any one launch. The previous PIN limitation has been removed.

**Providers of any size can now use AuthAccel to submit and view medical authorizations.**

# Submitting and viewing authorizations in AuthAccel

- Medical requests that you currently submit to Blue Shield Promise Health Plan can be submitted online in AuthAccel – but not Rx.
  - AuthAccel will except both medical and Rx requests for Blue Shield of California members
- You can also view the authorization status of medical and Rx requests submitted for Blue Shield and Blue Shield Promise members, including those submitted via fax, phone, etc.

	Blue Shield Promise Medi-Cal & Cal MediConnect	Blue Shield Medicare	Blue Shield Commercial/FEP
Submit medical	Y	Y	Y
View medical	Y	Y	Y
Submit pharmacy	N	Y	Y
View pharmacy	Y	Y	Y

- **Note**, AuthAccel functionality will differ by play type. Today's training focuses on functionality related to submitting and viewing medical authorizations for Medicare, Medi-Cal and Cal MediConnect members.

# **AuthAccel demonstration**

# Resources to help you work in AuthAccel

Click to the Medicare, Medi-Cal, Cal MediConnect instructions.

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How to submit a medical authorization in AuthAccel (updated 5/2021)

There are three types of medical authorizations that can be submitted in AuthAccel: 1) Inpatient, 2) Service Request (Prior Auth), and 3) Medication. A medication request is for drugs injected or infused in a medical setting. A pharmacy request is for medication that is prescribed to and self-administered by the patient.

**Guidelines for working in AuthAccel**

- AuthAccel currently performs best for providers with fewer than 2,000 Provider IDs attached to their Tax ID.
- Google Chrome is the preferred browser.
- Do not use browser navigation when working in AuthAccel.
- Work will not be saved if the system is exited prior to submitting a request.
- AuthAccel times out after 30 minutes of inactivity and will not save unsubmitted entries.
- Mandatory fields in AuthAccel are indicated with an asterisk (\*).
- Many drop-down lists offer predictive search. Click in the open field and begin typing to display a list of options that best match your entry.

**Access AuthAccel from Provider Connection**

1. Click **Authorizations** at the top of the homepage.
2. Click **Medical Authorization** from the blue navigation banner.
3. Select the appropriate Tax ID from the drop-down list.
4. Click **Go**.
5. AuthAccel opens in a new window.
  - To submit under a different Tax ID, close AuthAccel, return to the *Medical Authorizations* page in Provider Connection, and select the new Tax ID.

AuthAccel works differently by plan type. **Click the link below to view instructions for the appropriate plan type.**

- [Commercial and FFP plans](#)
- [Medicare, Medi-Cal, and Cal Medi-Connect plans](#)

Blue Shield of California is an independent member of the Blue Shield Association. A8642018 (9/20)

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How to view medical authorization status in AuthAccel (updated 3/2021)

AuthAccel will display all open authorizations and all authorizations closed within the last 30 days. Closed authorizations older than the 30-day window are retrievable using the **Show More Search Options** button. When searching for older closed requests by date, use the decision date vs. the date when the authorization was submitted.

There are three types of medical prior authorizations viewable in AuthAccel: 1) Inpatient, 2) Service Request (Prior Auth), and 3) Medication. A medication request is for drugs injected or infused in a medical setting (such as a doctor's office or outpatient hospital facility). Medication authorizations fall under the medical benefit. A pharmacy request is for medication that is prescribed to and self-administered by the patient.

Below are step-by-step instructions for how to view a medical prior authorization request in AuthAccel. You can: 1) move through each section sequentially or 2) **CTRL + click** on a specific topic in the table of contents below.

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**Guidelines for working in AuthAccel**

- Google Chrome is the preferred browser.
- Do not use browser navigation when working in AuthAccel.
- AuthAccel times out after 30 minutes of inactivity.
- A link is provided from AuthAccel to Blue Shield of California's clinical policies and guidelines. For Blue Shield Promise Health Plan clinical policies, [click here](#).

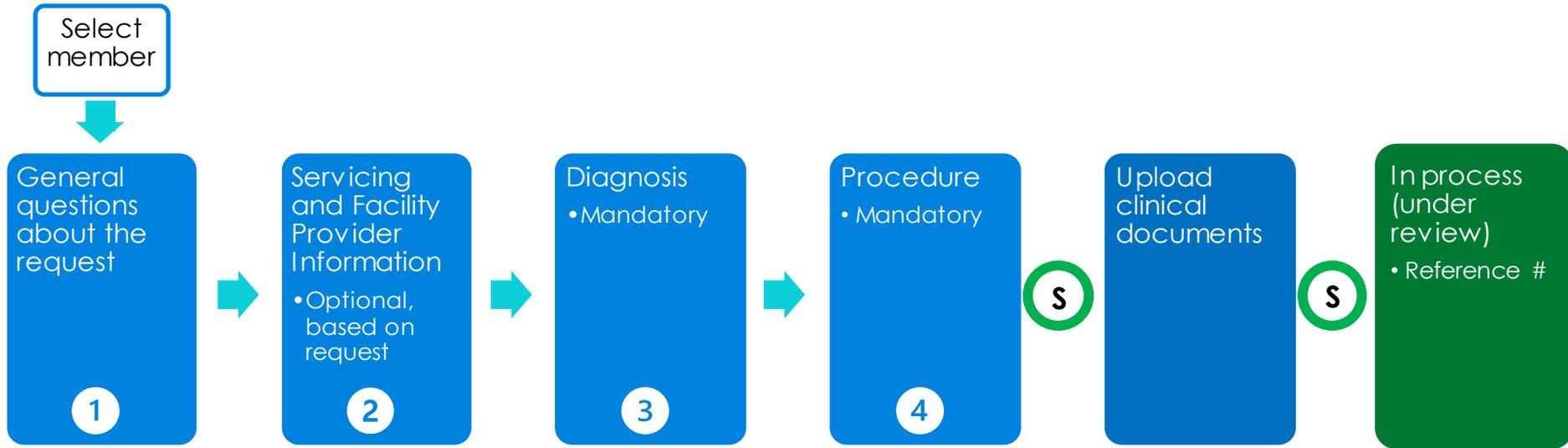
## Step-by-step instructional PDFs for medical authorization submissions and status checks are linked here on Provider Connection:

- In the [Authorizations](#) section under [Authorization tools](#).
- In the [News & Education](#) section under [AuthAccel online authorization training](#).
- Plus, an [AuthAccel Authorization System FAQ](#) located here.

# AuthAccel tips

- Google Chrome is the preferred browser.
- Use AuthAccel navigation, not your browser navigation, when working in the system.
- AuthAccel times out after 30 minutes of inactivity and will not save unsubmitted entries.
- Mandatory fields have an asterisk (\*) and must be completed to submit.
- Grayed out fields are populated by the system and cannot be edited.

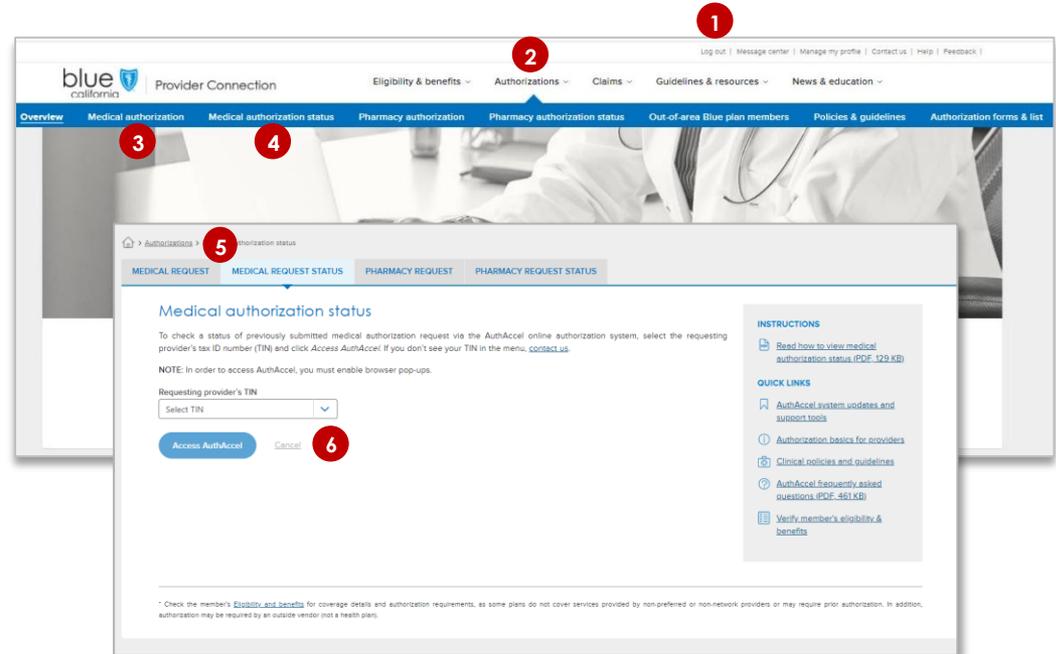
# High level process map for Medicare, Medi-Cal and Cal MediConnect medical requests\*



\* The process is different for Commercial and FEP authorizations.

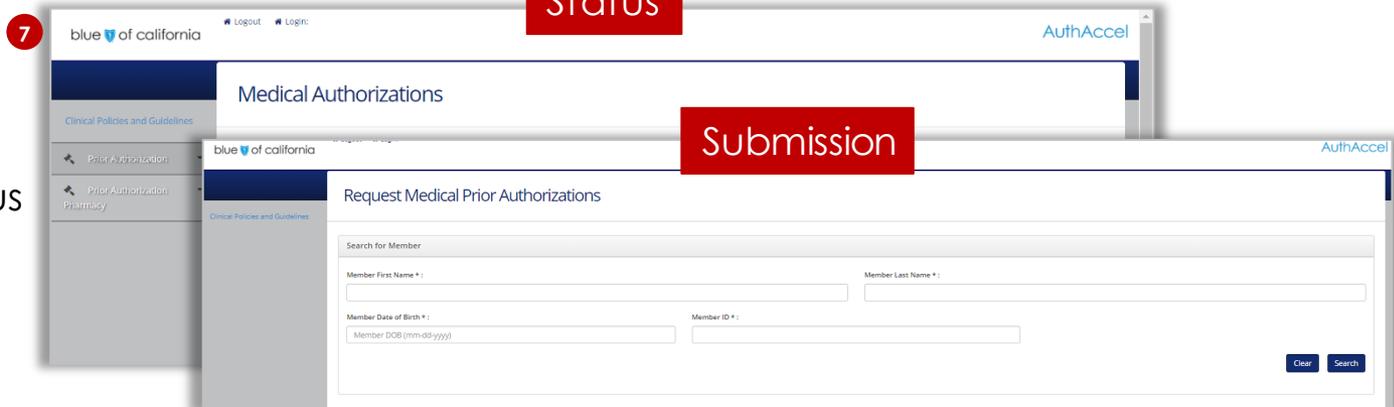
# Access AuthAccel from Provider Connection to submit or view medical requests

1. Log into Provider Connection at [blueshieldca.com/provider](https://blueshieldca.com/provider).
2. Click the [Authorizations](#) section link or use the authorization links on the homepage.
3. Click either [Request a medical authorization](#) or
4. [View medical auth status](#).
5. The corresponding AuthAccel launch page will display.
6. Select the appropriate Tax ID from the drop-down list and click *Access AuthAccel*.



Status

7. AuthAccel for submission or status will open in a new window.



Submission

# AuthAccel demonstration

Request Medical Prior Authorizations

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	<b>Name:</b> ALBERT MEMBERN	<b>Member ID:</b> 123456842	<b>Plan Type/Group ID#:</b> Full PPO SAV_ED 5500 Jan20/W0001074
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	<b>Special Programs:</b>		

Select Authorization Urgency

Standard  Expedited

# Alternate Benefit Type field

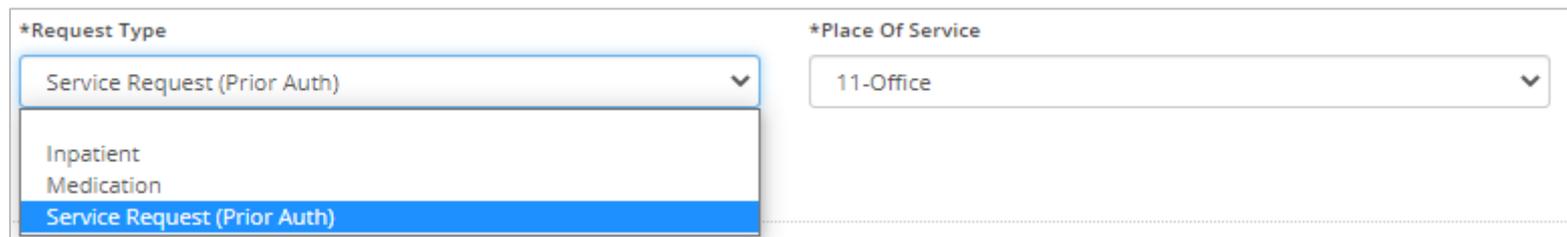
- The **Select below if the member is using their Alternate Benefit Type** field displays if the member has a Cal MediConnect or PPO/POS (point of service) plan.
- When you see this field, use the drop-down list to select the primary plan.
- If no selection is made for claims payment:
  - Members with a Cal MediConnect plan will default to Medicare.
  - Members with a PPO/POS plan will default to HMO.

The screenshot shows a form with the following elements:

- A radio button group for "Requesting Provider Same as Servicing Provider" with "NO" selected.
- A dropdown menu labeled "\*Request Type".
- A highlighted instruction: "Select below if the member is using their Alternative Benefit Type".
- A dropdown menu with the following options: "CAL MEDICONNECT", "Medi-Cal", "MediCare", "PPO", and "PPO/POS".

# Tips for Blue Shield Promise inpatient submissions

- All Promise Health Plan scheduled inpatient authorizations should be submitted as **\*Request Type Service Request (Prior Auth)**.
- **Reason:** All Blue Shield Promise authorizations are reviewed by the outpatient clinical review team.



The screenshot shows a form with two dropdown menus. The first dropdown, labeled '\*Request Type', has a list of options: 'Service Request (Prior Auth)', 'Inpatient', 'Medication', and 'Service Request (Prior Auth)'. The second dropdown, labeled '\*Place Of Service', has the option '11-Office'.

- The **\*Place of Service** will default to *Office*. **Change to:**
  - *22-On Campus-Outpatient Hospital* OR
  - *24-Ambulatory Surgical Center*
- Add facility and if appropriate, servicing provider.
- If approved, no further action is required from you. If the member is admitted to an inpatient hospital, the hospital will submit to Blue Shield Promise via a face sheet.

# Viewing authorization status

# Authorization request turnaround times

Turnaround times in AuthAccel match those of other authorization submission modalities like phone or fax.

Authorization request turnaround times		
Authorization type	Standard	Expedited
Service Request/Prior Auth (including DME)	5 business days	72 hours
FEDERAL Service Request/Prior Auth (including DME)	15 calendar days	72 hours
Medication	72 hours	24 hours
Inpatient (Initial)	24 hours	24 hours
Concurrent	72 hours	24 hours
Pharmacy	72 hours	24 hours

# Access AuthAccel from Provider Connection to view medical requests for all Blue Shield and Blue Shield Promise plan types

The first screenshot shows the 'blue of california Provider Connection' website. The 'Medical authorization status' link in the top navigation bar is highlighted with a red circle labeled '1'. The second screenshot shows the 'Medical authorization status' page with the 'MEDICAL REQUEST STATUS' tab selected, highlighted with a red circle labeled '2'. The 'Access AuthAccel' button is highlighted with a red circle labeled '3'. The third screenshot shows the AuthAccel 'Medical Authorizations' page, which includes a search filter for 'Prior Authorization Request Status' and a table of request entries.

DATE SUBMITTED	REFERENCE	ALTERNATE AUTH ID	MEMBER NAME	REQUEST TYPE	ADMISSION DATE	DISCHARGE DATE	REQUESTING PROVIDER	SERVICING PROVIDER	FACILITY PROVIDER	STATUS	DECISION	PAYE
----------------	-----------	-------------------	-------------	--------------	----------------	----------------	---------------------	--------------------	-------------------	--------	----------	------

## Two authorization status search types \*



### **Current search:**

Search for open authorizations or ones closed within the last 30 days



### **Historical search:**

Search for closed authorizations older than 30 days

\* Also applies to pharmacy authorization status searches.

# Provider Search button

If your Tax ID has more than 20 Blue Shield Provider IDs connected to it, the two drop-down lists encircled in red will not pre-populate when you submit a medical or pharmacy authorization or conduct a historical authorization search. Instead, you will see a *Provider Search* button.

## Submission

### Select Authorization Urgency

Standard  Expedited

\*Requesting Provider

Provider Search

Alternative Auth ID

Speciality

Provider Status

Hospice Facility - Fac

*If any information below is incorrect, please call (800) 258-3091.*

First Name

Last Name

Organization

## Status – Historical Search

### Medical Authorizations

*Open authorizations and those closed within the last 30 days will display in the table below. For closed authorizations older than 30 days, populate the provider in the Closed Request Search field, then click Show More Search Options.*

\*Closed Request Search

Provider Search

*To search for closed requests older than 30 days, select the provider, then click Show More Search Options.*

Show More Search Options

⏪ Prior Authorization Request Status 1

# Provider Search button continued...

Clicking the *Provider Search* button will open the *Provider Search* window.

1. Enter data into one or more fields.
2. Click *Search* – results will display below
3. Click *Select* to populate the auth submission screen or the \*Closed Request Search field for a historical search

### Provider Search 1

Provider Id

NPI

Tax Id

First Name

Last Name

Facility/Organization

Zip Code

2

#### Provider Search Results

ACTION	PROVIDER ID	NPI	TAX ID	FIRST NAME	LAST NAME	FACILITY	ADDRESS
<span>3</span> <input type="button" value="Select"/>	FA0002521001	1932197258				COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA	23625 HOLMAN HWY, MONTEREY, CA, 939405902
<input type="button" value="Select"/>	PG0021309008	1932197258				COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA	2511 GARDEN RD, MONTEREY, CA, 939405330
<input type="button" value="Select"/>	PG0021309009	1932197258				COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA	23625 HOLMAN HWY, MONTEREY, CA, 939405902
<input type="button" value="Select"/>	PG0021309013	1932197258				COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA	576 HARTNELL ST, MONTEREY, CA, 939402833
<input type="button" value="Select"/>	PG0037252004	1932197258				COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA	23625 HOLMAN HWY, MONTEREY, CA, 939405902

# Summary and resources

# AuthAccel benefits round-up

**Providers of any size can now use AuthAccel to submit and view medical authorizations.**



Integrates member eligibility and provider status into the process.



Allows direct attachment of clinical documentation to the authorization.



Gathers all authorization information in one location.



Displays status and decisioning for all medical authorizations, regardless of how they are submitted.

# Resources

If you would like to...	Click or call...
<ul style="list-style-type: none"> <li>Register for or use Provider Connection</li> </ul>	<ul style="list-style-type: none"> <li><a href="#">Blue Shield Promise Provider Connection Reference Guide</a></li> <li><a href="#">Blue Shield Provider Connection Reference Guide</a></li> </ul>
<ul style="list-style-type: none"> <li>Visit Provider Connection</li> </ul>	<ul style="list-style-type: none"> <li><a href="#">Blue Shield Provider Connection home page</a></li> </ul>
<ul style="list-style-type: none"> <li>View Blue Shield Promise Health Plan clinical policies and procedures</li> </ul>	<ul style="list-style-type: none"> <li><a href="#">Medical policy list</a></li> <li><a href="#">Prior authorization list</a></li> </ul>
<ul style="list-style-type: none"> <li>Submit Blue Shield Promise medical authorizations online and/or check the status of your requests</li> </ul>	<ul style="list-style-type: none"> <li><a href="#">AuthAccel step-by-step instructions</a></li> <li><a href="#">Submit a medical authorization in AuthAccel</a> (log in required)</li> <li><a href="#">Check medical authorization status in AuthAccel</a> (log in required)</li> </ul>
<ul style="list-style-type: none"> <li>Get help with billing, eligibility, benefits, authorizations, claims, or the website</li> </ul>	<ul style="list-style-type: none"> <li>Blue Shield Promise Provider Services at <b>(800) 468-9935</b></li> <li>Blue Shield Provider Services at <b>(800) 541-6652</b></li> </ul>

# Thank you for attending

## Please complete the evaluation – your feedback is important to us!

Click **Continue** to access the survey – it takes approximately 3 minutes to complete.



Follow-up webinar materials will be emailed to you within five business days.

