Interactive Care Reviewer

Submit and inquire about behavioral health prior authorizations

Course objectives

After completing this course, participants will be able to:

- List the benefits of using the Interactive Care Reviewer (ICR).
- Identify the products and services available on the ICR for authorizations.
- Access ICR through the Availity* Portal.
- Create an authorization.
- Inquire about a previously submitted prior authorization (PA) request.

Agenda

Agenda for this course:

- Review the benefits of using the ICR for PA.
- Create and submit inpatient/outpatient requests.
- Inquire about an existing request.

ICR details

ICR brings improved efficiency to the PA process:

- Physicians and facilities can submit PA requests for behavioral health (BH) services, including acute inpatient stays, residential and rehabilitation stays, intensive outpatient and partial hospital programs, electroconvulsive therapy, transcranial magnetic stimulation, and psychiatric testing.

- Ordering and servicing physicians and facilities can use the inquiry feature to find information on any PA with which their tax ID/organization is affiliated.

Advantages of using the ICR

There are many advantages in using the ICR. The ICR improves the efficiency of the PA process:

- PAs are in one place and are accessible at any time by any staff member.

- No need to fax — reduced paperwork!

- Users can quickly check PA status online and update requests.

- Proactive communication is conducted via email updates.

- Users can attach and submit clinical notes and supporting images.

- The ICR provides the ability to inquire on PA requests submitted via phone, fax, ICR or other online tool.

Accessing the ICR

Access the ICR via the Availity Portal (https://www.availity.com).

1 Select the REGISTER link to be redirected to the *Registration details* landing page.

User Login

Provider Registration
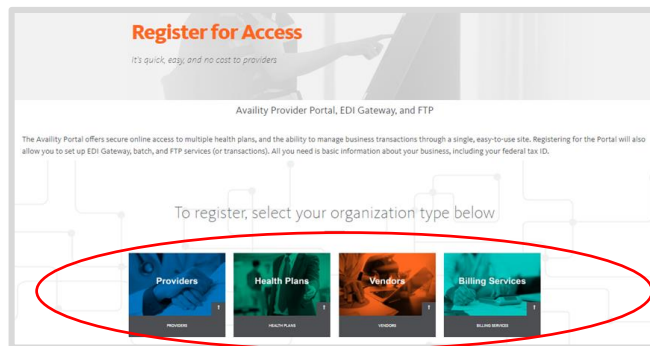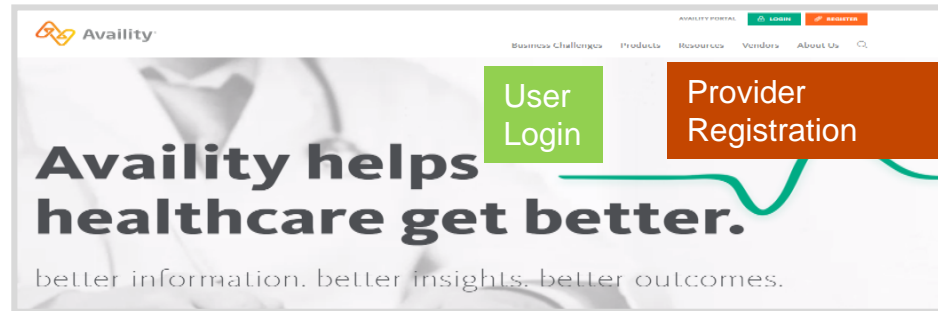
2 Select the appropriate organization type link, and you will be redirected to the *Registration Form*.
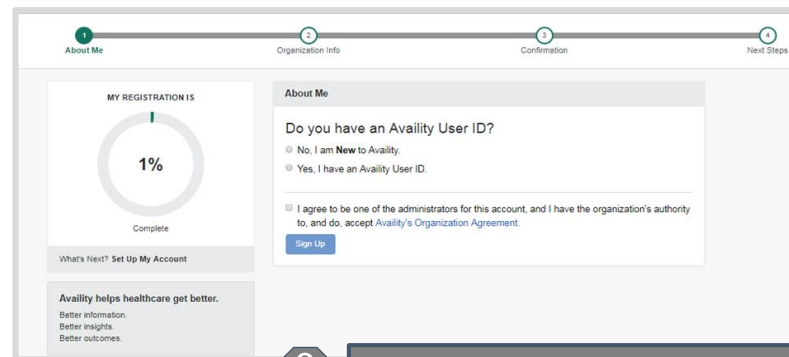
3 The person starting the registration process agrees to be the administrator for the organization and can now register for the Availity Portal.

Availity administrator: granting access on the Availity Portal
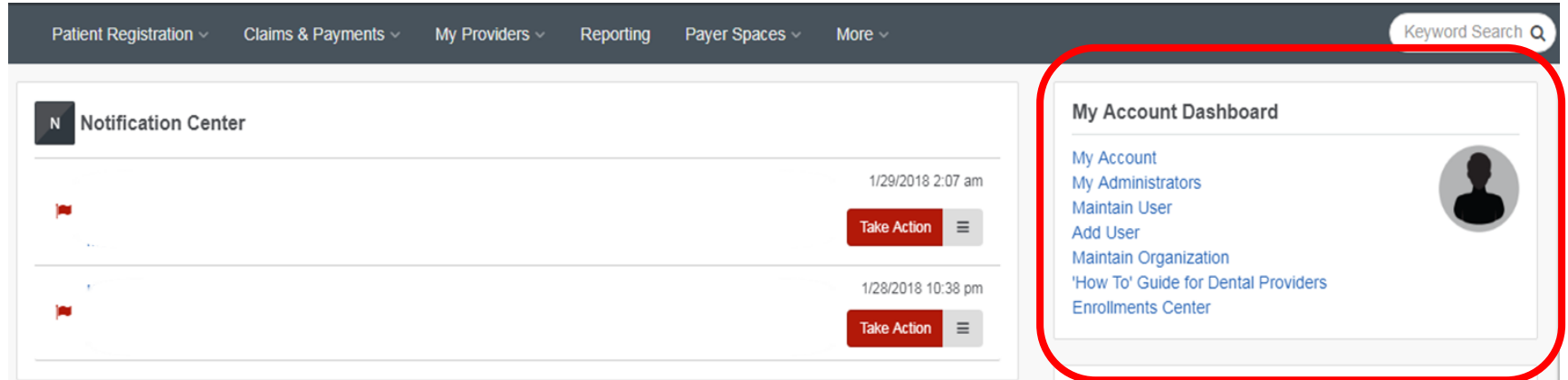
Your organization's Availity Portal administrator can select **Maintain User** from their *Account Dashboard* located on the upper-right corner of the home page to add functionality to an existing user. To create a new access, the administrator selects **Add User**.

Availity administrator: granting access on the Availity Portal (cont.)

☐	Role(s)
User Roles	
☑	Base Role
☑	<mark>Authorization and Referral Inquiry</mark>
☑	<mark>Authorization and Referral Request</mark>
☑	Claim Status
☑	Claims Management

Assign users the roles of **Authorization and Referral Inquiry** and **Authorization and Referral Request**.

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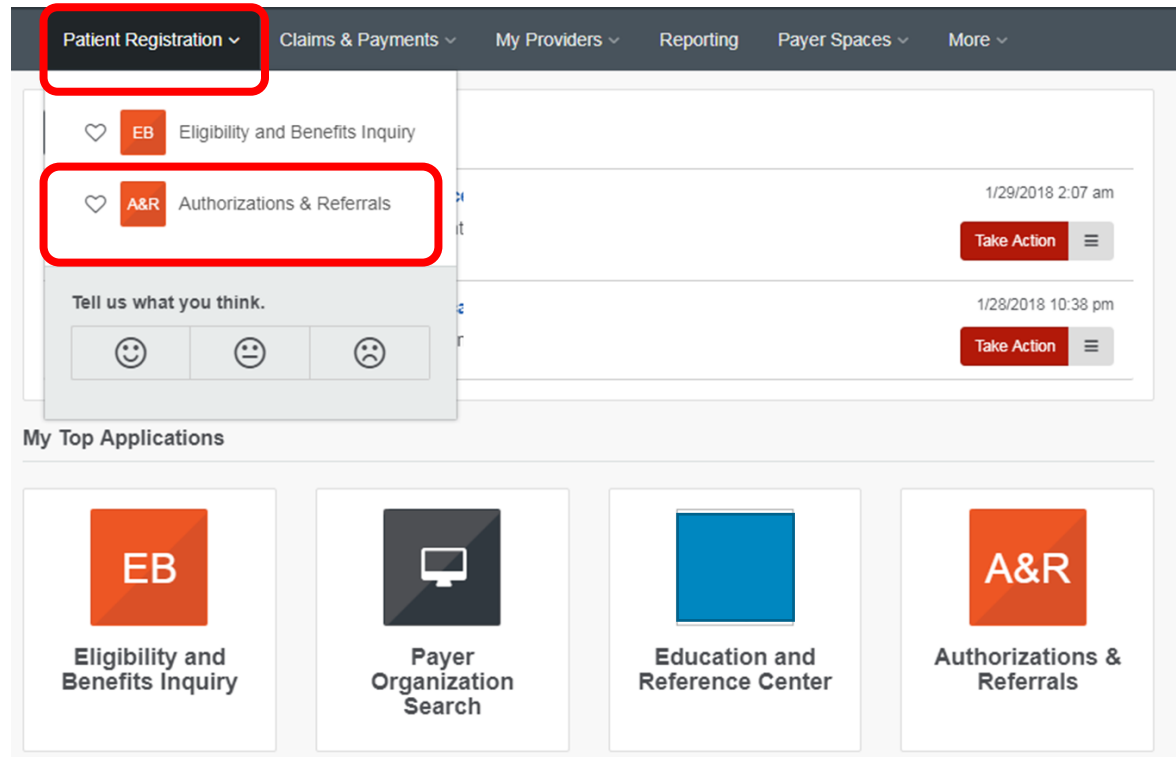
Accessing the ICR

To access the ICR from the Availity Portal, choose **Authorizations & Referrals** under the *Patient Registration* link on the top navigational bar.

Accessing the ICR (cont.)

This is the initial landing page for setting up an authorization. If the user has not registered, they will need to select **I Need Access** to obtain the correct login information.
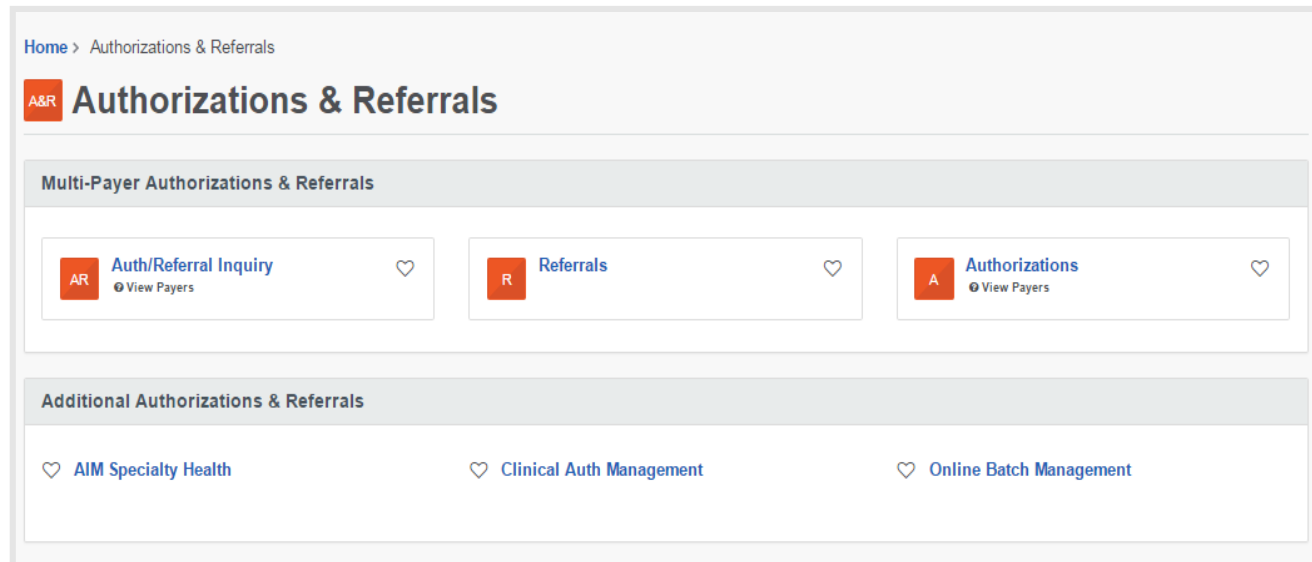
ICR *Terms of Use and Disclaimers*

Interactive Care Reviewer Terms of Use and Disclaimers

Together with IBM we have developed this online system using IBM's Watson technology to allow providers to request utilization management determinations, to assist in assembling required information, and to view an advance determination with information regarding review of coverage for a requested service.

All treatment decisions, and the consequences and outcomes thereof, are the responsibility of the health care provider and the patient, not the Plan. In general:

- Plan deductibles and co-payments apply before final payment can be made.
- Plan maximums and limitations will apply before payment can be made.
- Plan benefits may change upon renewal.

Health care providers will continue to receive a formal written notice of the Plan determinations, which will include specific additional information regarding the administration of benefits for the requested service.

The data provided by this system is protected health information ("PHI") and must be treated with the same care as other PHI that is exchanged during the normal course of business. PHI shall only be used as necessary for patients currently receiving treatment. Health care providers using this system must ensure that use of PHI is subject to the provider's own policies and procedures, in compliance with applicable law. Such use shall further be subject to the terms and conditions of the Provider's agreement with the Plan.

Access, use, or disclosure of information related to certain sensitive medical services is strictly limited by federal and state laws. Sensitive medical services may include, but are not limited to, treatment for: substance use disorders, sexually transmitted illnesses or mental conditions. Such information may only be accessed, used, or disclosed with the authorization of the patient or for treatment purposes. Accessing sensitive service information outside of these requirements is prohibited.

Drug and alcohol abuse treatment records may only be accessed, used, or disclosed with the consent of the patient or to the extent necessary to respond to a bona fide medical emergency.

By selecting 'Accept', you acknowledge that you have read and you agree to these Terms of Use/Disclaimer.

ACCEPT

Terms of Use & Privacy Disclaimer

Read and accept the disclaimer.
Be sure to enable pop-ups!

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The ICR landing page/dashboard

The dashboard displays requests submitted, requests not yet submitted, cases requiring additional information and cases in which a decision has been rendered.

The ICR landing page/dashboard (cont.)

All columns have up and down arrows for quick sorting. Some also have a filter option (shown here).

ICR dashboard tabs

Tabs across the top of the dashboard:

- **My Organization's Requests** is the home page of the application and displays the dashboard.
- **Create New Request** is used to start a new inpatient or outpatient request.
- **Search Organization Requests** allows for the ability to search for any ICR case requested by your organization or any request with which your organization is associated. This includes requests with a status of *review not required*.

ICR dashboard tabs (cont.)

Check Case Status allows for the ability to view any cases submitted associated with the tax ID(s) on the request. This includes submissions by phone, fax, etc.

Note: In order to view the authorization/referral, the case must be associated with the tax ID listed under the organization you selected in the Availity Portal.

Note: In order to view the PA/referral, the case must be associated with the tax ID listed under the organization you selected in the Availity Portal.

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Creating a new request

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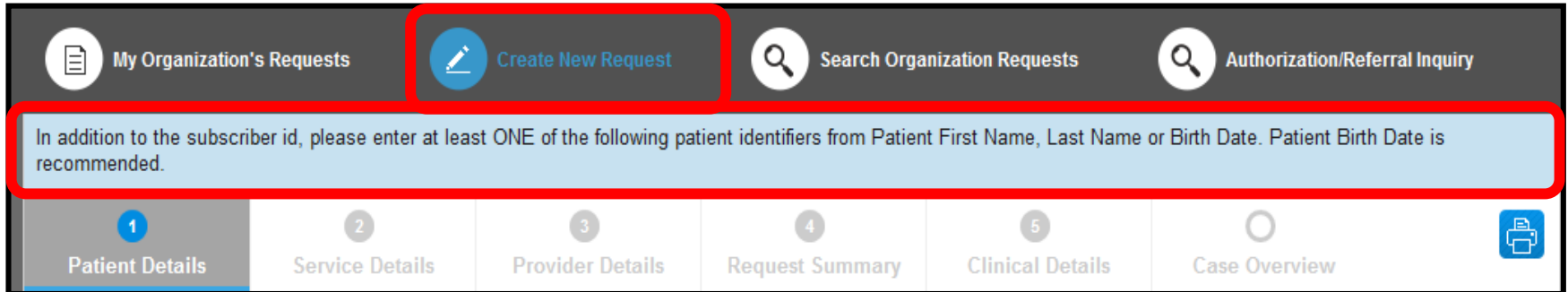
Creating a new request

Do you want to verify if PA is required? The ICR gives you quick access to that information in most cases. Enter:

- Patient information.

- Diagnosis and procedure information.

- Provider details.

A message will appear indicating whether or not PA is required for most requests. This information can be printed or saved to a PDF and is available later via an ICR search.

Starting a new request on the ICR
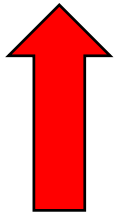
- Select **Create New Request** from the ICR dashboard tab.
- Watch the blue bar for messaging. Errors turn the box red.
- Menu bar shows where you are.

Patient details

Select from the *Request Type* and *Case Type* menus or save steps by selecting **Profiles**.

Patient details (cont.)

Complete all required fields, then select **Find Patient**.

Profile templates

Click on the dot to view the *Standard Profile*.

You will be able to see what will be populated on the *Patient Details* screen and on the *Service Details* screen.

Profile templates (cont.)

Select the check mark to select a standard profile. This action will populate the mandatory *Request Type* and *Case Type* fields on the *Patient Details* screen and *Place of Service*, *Type of Service,* and *Level of Service* on the *Service Details* screen.

Patient details: date of service (inpatient — admit date)

The admit date **cannot** be changed once the case is submitted.

Patient details

A message in the blue bar will indicate if the member's PA cannot be completed using the ICR.

Service details — outpatient examples

1 Complete diagnosis fields.

2 Complete services fields.

Service details — outpatient examples (cont.)

Select plus sign again to enter that procedure to case before selecting the **Next** button.

Service details: diagnosis (inpatient)

If level of service is urgent:
1. Select **Level of Service**.
2. Select **Source of Admission**.
3. Type diagnosis code(s).
4. Select ➕ .

Urgent level of service is only an option for a future admission. If the date of admission is the current date (or in the past), options are elective and emergency.

Service details: length of stay (inpatient)

Length of stay:
1. Type number of days.
2. Select level of care.
3. Select ➕.

Provider details

Complete required fields for all sections.

Search all or select from favorites.

Ordering provider

The *Ordering Provider Information* section appears for some specific outpatient requests. Examples include: *Place of Service — Home* or *Type of Service — Diagnostic Lab, Dialysis, Durable Medical Equipment, Home Health Care, Physical Therapy, Radiation Therapy*.

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Provider details

Search

○ Practitioner

* Complete all required fields.

Select the appropriate provider type.

Last Name *	First Name *	City	State *	Zip Code
			OH	
		full city name has to be exact match		5 digits only

or search by NPI

NPI

Clear   **Search**

Select **Search**.

| ◄◄ ◄ | Page | 1 | of 1 | ► ►►| | View Results | 25 ▼ | Displaying 1 to 20 of 20 Requests Found |

Name	NPI	Specialty	Address	Telephone	
Doe, Delores	1234567890	Cardiovascular Disease	123 Main ST, GREENFIELD, OH, United States, 12345	(555) 555-5555	★ +
Doe, Delores	1234567890	Cardiovascular Disease	456 Sunset Ave, Niceville, OH, United States, 12345	(999) 999-9999	★ +

If you are unable to locate your provider, please *click here* to manually enter your information

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Favorites

You can save up to 25 favorites for:

- Requesting providers.
- Servicing providers.
- Facility durable medical equipment providers.
- Refer to providers.

Provider details: contact information

Request summary

The *Request Summary* page is where you will be able to verify whether the services require prior authorization. If the services do not require PA, you can note the tracking ID and close out the request. If you need to search for it later, you can locate the request by the tracking ID or patient information.

Clinical details: provider form

Clinical details: provider form (cont.)

Complete the *Clinical Notes* section if the form is not available or if you choose to skip the form.

Option to upload attachments, images and photos to support notes.

Select **Add Note** after manually typing information in the field.

Case overview

View all the details of the request you entered for a final time before submitting.

Case overview (cont.)

Select **Expand All** to review all sections.

Select the arrow to expand one section.

To modify information, select the title of the page to go back and edit fields.
Select **Submit** to do the final submit for your request.

Submitted request in ICR

Once a request has been submitted, the dashboard will appear and the new request will be viewable at the top with a *Review In Progress* status. Confirmation that it was submitted and the tracking ID will be viewable in the blue bar.

Viewing a decision — inpatient or outpatient

Submitted requests will have a *Review in Progress* status. If a user has entered an email address on the *Provider Details* page, they will receive emails when there is activity on a case. Look for cases that are last updated by system and where status is no longer *Review In Progress.* Those cases with updates or a decision can be viewed by selecting **Request Tracking ID**.

Viewing a decision/request for additional information

To view status details, select the tracking number from the dashboard and then select **Expand All** to allow the case information to be viewable. View decision letters associated with your requests.

Provider letters

Provider letters associated with the request are viewable by expanding the **Letters Summary** section.

Viewing a decision

Look at the *Procedure Code* section to view the decision, to see if additional information is needed or to see if the case is pending for other reasons.

Discharge notes
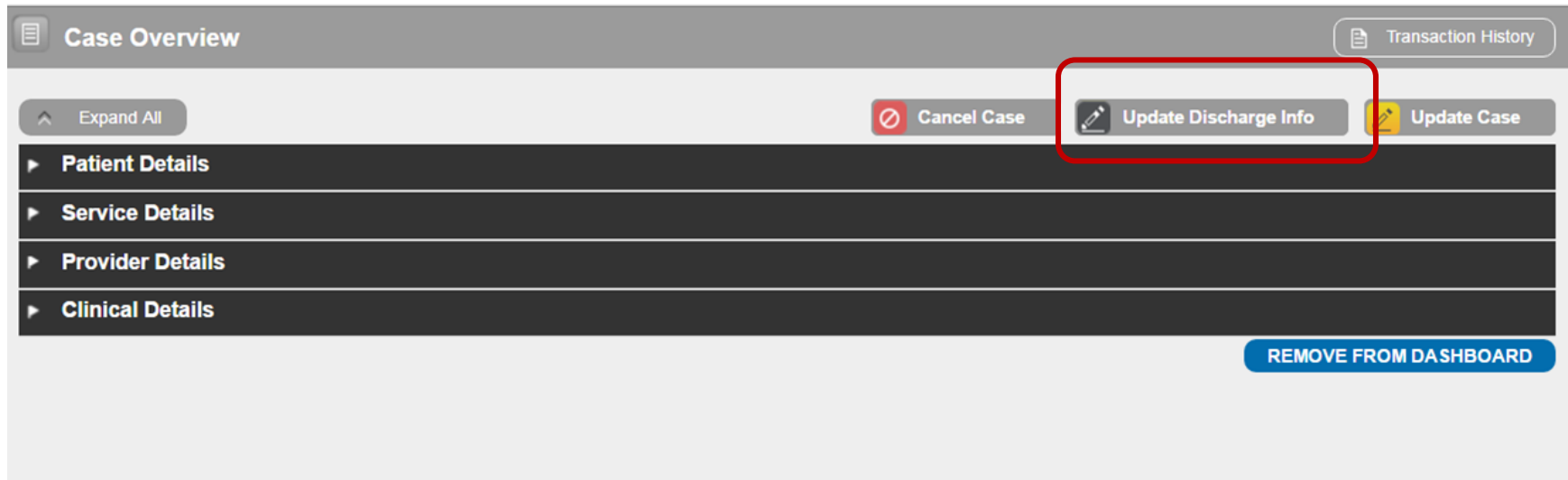
You will have an option available to select **Update Discharge Info** if it applies to the case — This is also available for cases submitted by phone/fax.

Inquiry features on the ICR

User access to the ICR — inquiry

To inquire on any authorization submitted by phone, fax, ICR or other online tool, choose **Auth/Referral Inquiry** under the *Authorizations & Referrals* link. Then choose the payer and organization.

Search using Check Case Status

The first search option is *Search By Member*.
Enter data in required fields.

Ordering and servicing physicians and facilities can make an inquiry to view the details for the services using the **Check Case Status** option.

Search by reference/authorization request number

To search by reference/authorization request number, enter the complete reference/authorization request number, then select the provider tax ID from the drop-down box.

Search by date range

To search by date range, enter a 30-day or less date span, then choose the provider tax ID from the drop-down box and identifier type.

Search organization requests

You will have the option to select **Only display cases submitted by organization** or **Display all cases associated with my organization** and complete one or more of the fields.

What functions are available from the *Search Submitted Requests* tab?
- Locate a request that has a status of *Review Not Required*.
- Locate a request that is not submitted.
- Locate a request that has been archived.
- Update a request.

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Search results

Behavioral health PA submission capabilities

- Submit PA requests for BH services including acute inpatient stays, residential and rehabilitation stays, intensive outpatient and partial hospital programs, electroconvulsive therapy, transcranial magnetic stimulation, applied behavioral analysis therapy, and psychiatric testing.
- Templates allow providers to enter clinical details previously provided via phone.
- Update cases or request an extension within the ICR tool.

Adding clinical information to a BH inpatient continued stay request

Applicable to BH inpatient requests

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Qualifications for adding clinical to an ICR request

- The ICR request must be:
  - A psychiatric or substance abuse inpatient case.
  - In an approved or pending status.
  - An ICR-created request (in other words, not phone or fax).
- When clinical is able to be added to a request in ICR, this button will appear in the top right of the ICR screen if the request is opened from the dashboard or via *search submitted requests*.

How to add clinical to the request

- After selecting the **Update Clinical** button, this message will be displayed to the user:

  You are getting ready to update the case, would you like to proceed?

  [Yes] [No]
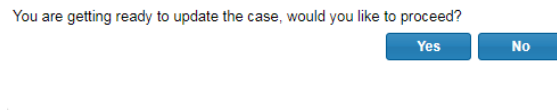
- User should select **Yes,** and then they will be directed to the *Clinical Details Page*.

  o User can attach a file(s) or add clinical notes into the **Clinical Notes** text box.

  o User must provide their phone number and extension (if applicable).

  o Select **Next** at the bottom of the screen when clinical has been added/attached.

Screen shot of Clinical Details page

Attachments, Images and Photos

Please attach only documentation that contains the minimum necessary personal health information (PHI) to support the review for this request. Please verify you are attaching image(s) for the correct patient before clicking upload.

Choose File   No file chosen

Max file size: 10MB. Allowed file types: jpeg/jpg, bmp, tiff, pdf, gif, doc, docx, xls, xlsx, txt

Description

Upload

Clinical Notes

In order to submit a request, clinical information must be entered. Only pertinent clinical information for the request should be included in the clinical note.

Please verify you have added clinical information for the correct patient before clicking on 'Add Note'.

Add Note

Updated By

User Name	Contact Telephone *	Ext
dsf, sdf	(555) 555-5555	123

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How to add clinical to the request

- After selecting **Next**, the user is presented with the *Case Overview Page*.

    o Scroll to the bottom of the *Case Overview Page* and select the **Submit Update** button.

    o The user will then be directed back to the dashboard. The additional clinical will be sent to Utilization Management for evaluation.

ICR enhancements for BH

ICR enhancements for BH

UM Algorithm Initial Psych Review:

- Fill out the seven questions.

- Select the **parent** checkbox on the left of the screen before filling out the remaining questions.

- Agree to the *Disclaimer*.

ICR enhancements for BH (cont.)

BH Initial Review

☑ Risk of Harm To Self Risk Rating(Check all that apply)

  ☐ Not present

  ☑ Ideation

  ☐ Plan

  ☐ Means

  ☐ Prior Attempt

☑ Risk of Harm To Others Risk Rating(Check all that apply)

  ☑ Not present

  ☐ Ideation

  ☐ Plan

  ☐ Means

  ☐ Prior Attempt

☑ Psychosis Risk Rating: (0=None; 1= Mild or Mildly Incapacitating; 2= Moderate or Moderately Incapacitating; 3= Severe or Severely Incapacitating; N/A=Not Assessed)

  ☐ 0

  ☑ 1

  ☐ 2

  ☐ 3

  ☐ N/A

☑ Substance Use (Risk Rating: (0=None; 1= Mild or Mildly Incapacitating; 2= Moderate or Moderately Incapacitating; 3= Severe or Severely Incapacitating; N/A=Not Assessed)

  ☑ 0

  ☐ 1

  ☐ 2

  ☐ 3

  ☐ N/A

Disclaimer

☑ I confirm that the information entered on this form is accurate and complete based on the records available at the time of this request. I understand the health plan or its designees may request medical documentation to verify the accuracy of the information reported on this form.

By submitting this request you are confirming that the information you have provided on this form is accurate and complete based on your clinical assessment of the patient and the records available to you as of the date of this request

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ICR enhancements for BH (cont.)

ICR enhancements for BH (cont.)

Psychosis Risk Rating: (0=None; 1= Mild or Mildly Incapacitating; 2= Moderate or Moderately Incapacitating; 3= Severe or Severely Incapacitating; N/A=Not Assessed)

☑ 0
☐ 1
☐ 2
☐ 3
☐ N/A

Substance Use (Risk Rating: (0=None; 1= Mild or Mildly Incapacitating; 2= Moderate or Moderately Incapacitating; 3= Severe or Severely Incapacitating; N/A=Not Assessed)

☐ 0
☐ 1
☑ 2
☐ 3
☐ N/A

Substance Use Screening (Check if applicable and give score)

☐ CIWA:

☑ COWS:

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For substance use disorders, please complete the following additional information:
Current assessment of American Society of Addiction Medicine (ASAM) criteria
☑ Dimension 1 (acute intoxication) and/or withdrawal potential) Risk Rating

☐ Minimal/none-not under influence, minimal withdrawal potential
☑ Mild-recent use but minimal withdrawal potential
☐ Moderate-recent use, needs 24 hour monitoring
☐ Significant-potential for or history of severe withdrawal, history of withdrawal seizures
☐ Severe-presents with severe withdrawal, current withdrawal seizures

ICR enhancements for BH (cont.)

☑ Dimension 2 (biomedical conditions and complications) Risk Rating

   ☐ Minimal/none-none or insignificant medical problems

   ☑ Mild-mild medical problems that do not require special monitoring

   ☐ Moderate-medical condition requires monitoring but not intensive treatment

   ☐ Significant-medical condition has a significant impact on treatment and requires 24 hour monitoring

   ☐ Severe-medical condition requires intensive 24 hour medical management

☑ Dimension 3 (emotional, behavioral or cognitive complications) Risk Rating

   ☐ Minimal/none-none or insignificant psychiatric or behavioral symptoms

   ☑ Mild-psychiatric or behavioral symptoms have minimal impact on treatment

   ☐ Moderate-Impaired mental status; passive suicidal/homicidal ideations; impaired ability to complete ADL's

   ☐ Significant-suicidal/homicidal ideations, behavioral or cognitive problems or psychotic symptoms require 24 hour monitoring

   ☐ Severe-active suicidal/homicidal ideations and plans, acute psychosis, severe emotional lability or delusions. Unable to attend to ADL's. psychiatric and/or behavioral symptoms require 24 hour medical management

☑ Dimension 4 (readiness to change) Risk Rating

   ☐ Maintenance-engaged in treatment

   ☑ Action-committed to treatment and modifying behavior and surroundings

   ☐ Preparation-planning to take action and is making adjustments to change behavior. Has not resolved ambivalence

   ☐ Contemplative-ambivalent, acknowledges having a problem and beginning to think about it, has indefinite plan to change

   ☐ Pre-Contemplative-in treatment due to external pressure, resistant to change

☑ Dimension 5 (relapse, continued use or continued problem potential) Risk Rating

   ☐ Minimal/none-little likelihood of relapse

   ☑ Mild-recognizes triggers, uses coping skills

   ☐ Moderate-aware of potential triggers for MH/SA issues but requires close monitoring

   ☐ Significant-not aware of potential triggers for MH/SA issues, continues to use/relapse despite treatment

   ☐ Severe-unable to control use without 24 hour monitoring, unable to recognize potential triggers for MH/SA despite consequences

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ICR enhancements for BH (cont.)

ICR enhancements for BH (cont.)

BH Continued Stay Review

☑ Risk of Harm To Self Risk Rating(Check all that apply)

- ☐ Not present
- ☑ Ideation
- ☑ Plan
- ☐ Means
- ☐ Prior Attempt

☑ Risk of Harm To Others Risk Rating(Check all that apply)

- ☐ Not present
- ☑ Ideation
- ☑ Plan
- ☐ Means
- ☐ Prior Attempt

☑ Psychosis Risk Rating: (0=None; 1= Mild or Mildly Incapacitating; 2= Moderate or Moderately Incapacitating; 3= Severe or Severely Incapacitating; N/A=Not Assessed)

- ☐ 0
- ☐ 1
- ☑ 2
- ☐ 3
- ☐ N/A

☑ Substance Use (Risk Rating: (0=None; 1= Mild or Mildly Incapacitating; 2= Moderate or Moderately Incapacitating; 3= Severe or Severely Incapacitating; N/A=Not Assessed)

- ☐ 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ N/A

Substance Use Screening (Check if applicable and give score)

☐ Current treatment plan

- ☐ Medications
  - ☐ Have medications changed (type, dose/and/or frequency) since admission?
    - ☐ Yes
    - ☐ No
  - ☐ Have any prn medications been administered?
    - ☐ Yes

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ICR enhancements for BH (cont.)

ICR enhancements for BH (cont.)

Data Tool Questions: These will only be visible in the event the enhancement was unable to approve based on the information submitted.

ICR enhancements for BH (cont.)

ICR enhancements for BH (cont.)

ICR enhancements for BH (cont.)

☐ As needed Medications Administered (not just ordered):

☑ Other treatment and/or interventions planned (including when family therapy is planned):

grps

☐ Support system

☐ Include coordination activities with case managers, family, community agencies and so on. If case is open with another agency, name the agency, phone number and case number.

☐ Readmission within last 30 days?

☐ If yes and readmission was to the discharging facility, what part of the discharge plan did not work and why?

☐ Discharge planning

☐ Initial discharge plan

☐ List name and number of discharge planner and include whether the member can return to current residence.

☐ Planned discharge level of care:

☐ Describe any barriers to discharge:

☐ Expected discharge date:

By submitting this request you are confirming that the information you have provided on this form is accurate and complete based on your clinical assessment of the patient and the records available to you as of the date of this request

Next

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ICR enhancements for BH (cont.)

Additional clinical notes if available can now be attached.

ICR enhancements for BH (cont.)

Once the information has been entered and submit is selected, ICR will return the user to the dashboard.

ICR additional information

Ask your Availity administrator to grant you the appropriate role assignment, then follow these instructions to access ICR through the [Availity Portal](#):

Do you create and submit prior authorization requests?

Required role assignment: Authorization and Referral Request

Do you check the status of the case or results of the authorization request?

Required role assignment: Authorization and Referral Inquiry

Once you have the authorization role assignment, log onto Availity with your unique user ID and password, and follow these steps:

1. Select **Patient Registration** from Availity's homepage.
2. Select **Authorizations & Referrals**.
3. Select **Authorizations** (for requests) or select **Auth/Referral Inquiry** (for inquiries).

ICR additional information (cont.)

Training:

Follow these instructions to access ICR on-demand training through the Availity Custom Learning Center:

- From Availity's homepage, select Payer Spaces > Amerigroup Community Care tile > Applications > Custom Learning Center tile.

- From the *Courses* screen, use the filter catalog and **select Interactive Care Reviewer – Online Authorizations** from the menu. Then, select **Apply**.

- You will find two pages of online courses consisting of on-demand videos and reference documents illustrating navigation and features of ICR. Enroll for the course(s) you want to take immediately or save for later.

Wrapping up

Helpful tip:

- If you receive the *system temporarily unavailable* message on a consistent basis, your organization's firewall may be blocking the site. Please contact your IT department and ask them to review internet filters and add https://providers.amerigroup.com/GA as a trusted site to bypass the proxy.
- Clear your cache if there seems to be missing fields or if you continue to have errors.
- Remember — Admit date for inpatient requests cannot be changed once you submit.
- When you make a new member plan, make a new favorites list.
- You can submit your requests from any computer with internet access. We recommend you use Internet Explorer 11, Chrome, Firefox or Safari for optimal viewing.

Wrapping up (cont.)

Now it's your turn!

- Use the ICR to determine whether an authorization is required, submit authorizations for many members covered by our plans and inquire to find details on submitted cases.

As a reminder:

- Access the ICR via the Availity Portal. If your practice does not have access, go to http://www.availity.com and select **Register**.
- Already use the Availity Portal? Your Availity administrator can grant you access to **Authorizations and Referral Request** and/or **Authorization and Referral Inquiry,** and you can start using the ICR right away.

Contacts

For questions about the ICR, contact Provider Services at **1-800-454-3730**].

For questions about Availity registration and access, contact Availity Client Services at: **1-800-AVAILITY** (**1-800-282-4548**).

Thank you!

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