

WebConsult User Guide



Contact Us

For Assistance with WebConsult contact Program Support

Email: RCSupport@HealthHelp.com

Phone: (800) 546-7092

Fax: (888) 209-5960



Login

Just go to <https://portal.HealthHelp.com/WebConsult> to access WebConsult. You will be prompted to login. Remember, your user ID and password are case-sensitive. Contact our support team above if you need assistance.

WebConsult is an easy way to request your procedure and print your authorization online. It will be helpful to have your patient's records in front of you to complete the 7 easy screens. This guide provides an overview of each screen and the features of WebConsult.

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WebConsult Home Screen

The home screen is where you will start any new authorization request and access a variety of tools and resources.

1. *On the upper right-hand part of your screen you will always find our toll free number so you can call us with any questions. There is also an online tutorial right below our phone number*
2. *The panel on the right side has a variety of resources including a downloadable user guide*
3. *To start a new request all you need to do is enter the Member ID in the box at the top and press the START button*
 - *Just follow the prompts on each screen and click on the help icons if you need more information*
 - *Since this is your first time using WebConsult, we suggest that you press the Guide Me link on each screen after the home screen for specific instructions*
4. *We provide you with data on your home screen to let you know your typical ordering habits*
5. **Physicians** –
 - *For users with 12 or less physicians in their profile: Your physicians are listed on the home screen as well. Use the Add Physician link if additional doctors are needed or if you need to include your doctors for additional payors*
 - *For users with over 12 physicians in their profile: Use the Add Physician link if additional doctors are needed or if you need to include your doctors for additional payors*

6. *Your WebConsult requests made in the last 14 days will be displayed in the center of your home screen. Here you will see the status of each request, you can print your authorization when completed, request an edit or cancel the request. Also, if your request is in clinical review you will see an upload link so you can easily deliver documentation directly to our clinical review team*
7. *At the very top is a **REQUEST STATUS** link where you can view status of authorization request submitted up to 90 days past. Your logout button is also on the top right of your screen.*
8. **Important updates** –
 - *Any new updates to WebConsult or your authorization process will be displayed at the top of your screen*


CONSULT WELCOME AARON PHOENIX

HOME REQUEST STATUS LOGOUT

Welcome to WebConsult

START YOUR PROCEDURE REQUEST

Instructions: To start your procedure request, you will need the member's ID number. Please be sure to type the member ID exactly as it is displayed on the member's insurance card, including any spaces or dashes. For assistance in obtaining the member ID, please call our Program Support desk at **800-546-7092**.

1 MEMBER

2 PROVIDER

3 PROCEDURE

4 ASSESSMENT

5 FACILITY

6 CONFIRMATION

7 AUTHORIZATION

3 MEMBER
Enter Member ID

START

For assistance in obtaining the member ID, please call our Program Support desk at 800-546-7092.

4

Procedure Requests



128
Total Requests
[View](#)

104
Authorized Requests
[View](#)

8
Not Performed
[View](#)

16
Ready to Send
[View](#)

5 REQUESTS IN THE LAST 14 DAYS

OLDER THAN 14 DAYS

Tracking #	Reference #	Member	Proc	Created By	Date	Status	Request Actions	Upload Clinical Documents
10447098		REECIE ELSASSER	UAED006415	Phoenix	5/9/2018	Procedure Not Performed	Withdrawn by Aaron Phoenix	
10447097		REECIE ELSASSER	CFO65	Phoenix	5/9/2018	Procedure Not Performed	Withdrawn by Aaron Phoenix	
10447096		REECIE ELSASSER	CA654	Phoenix	5/9/2018	Procedure Not Performed	Withdrawn by Aaron Phoenix	
10447147		KIMBERLY CHANEY	70553	Phoenix	5/8/2018	Waiting for Clinical Review	Cancel or Change	Upload
10447146		DAVID BIDMAN	70450	Phoenix	5/8/2018	Waiting for Clinical Review	Cancel or Change	Upload

MY PHYSICIANS

ADD PHYSICIAN

[You have 33 Ordering Providers]

HELPFUL TIPS NEWS 2

Helpful Tips for Getting Started:

- Gather all pertinent information before getting started. You will need the Member ID, ordering Physician, procedure to be requested, clinical information, imaging facility and appointment information.
- You will find convenient instructions throughout the program. Additional help is available by clicking on any help icon.
- Click [HERE](#) for an online tutorial. (a new window will open.) Turn on your sound and we will take you through the this easy authorization request process!
- Read the [latest update](#).
- View [Medical Oncology Regimens](#).

Call Program Support at 1-800-546-7092 and an experienced agent will be happy to help you get started.

[Quick Reference](#) [User Guide](#)

Read the [latest update](#).

NOTE REGARDING PENDED CASES:
If you have pended cases requiring additional clinical information, please provide them at the earliest. If the additional clinical information needed is not received within the review determination timeframe, the request will be referred to the health plan for final determination. This may result in a denial of the request and an unnecessary delay in the member receiving this service.

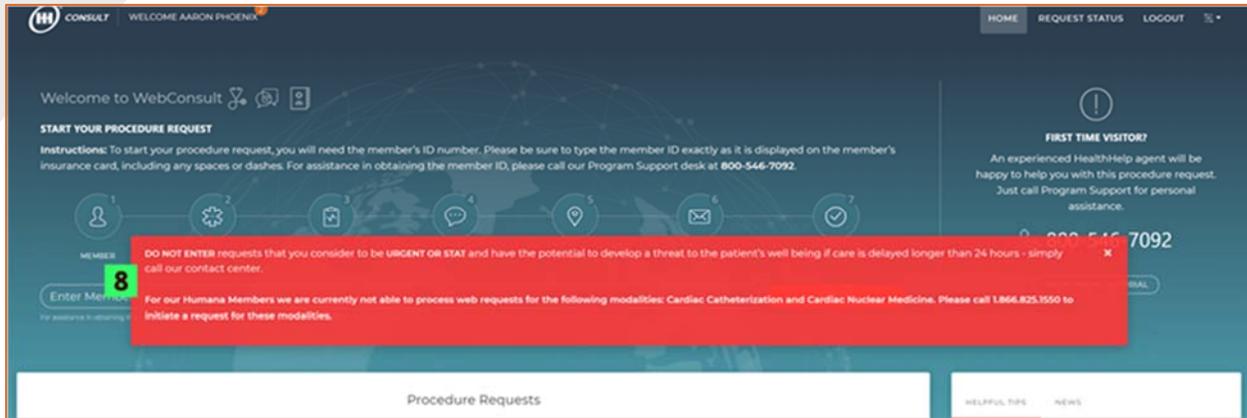
If the clinical status of the member has changed and the service is no longer needed, please consider cancelling the pended request by clicking the "Cancel or Change Request" link from the list of most recent requests.

View [Medical Oncology Regimens](#)

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Phone: (281) 447-7000 | Toll-Free: (800) 405-4877 | Sales: (877) 795-0373 | TTY: (877) 952-6796

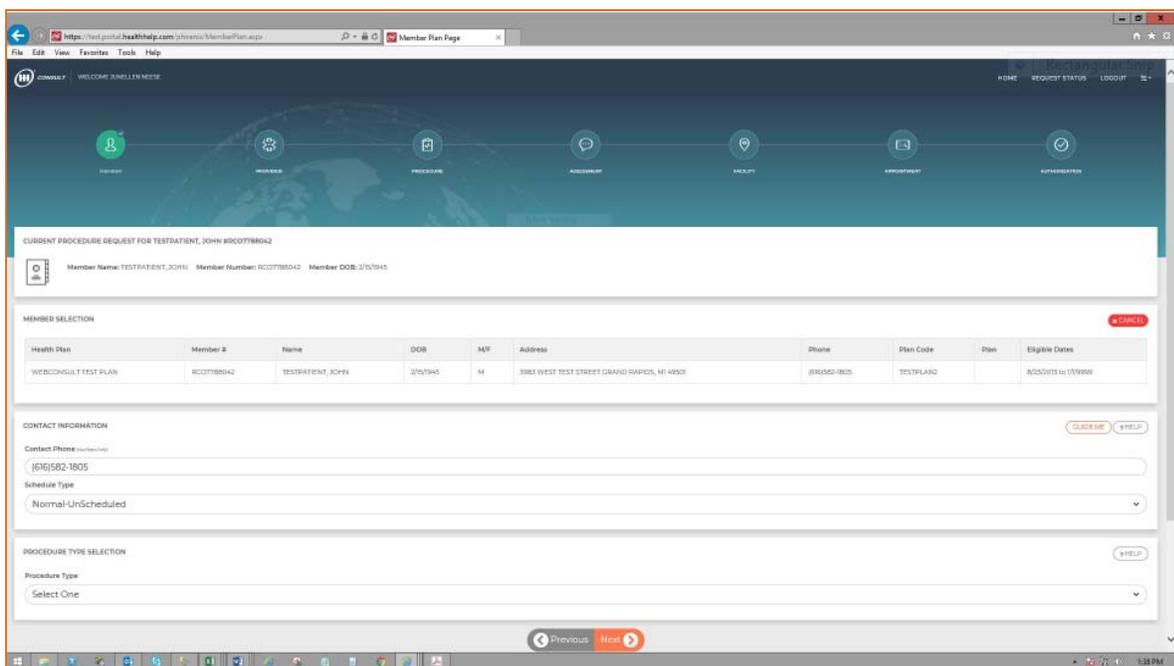






MEMBER SCREEN

The member entered will be displayed for your confirmation. Please verify the member name and date of birth with your records. The member plan will also be displayed. If the member has more than one plan select the plan to be applied to this procedure.



You will also be prompted to select the *Schedule Type* on this screen. Most procedures will be *Normal-unscheduled* because the authorization should be secured before making the appointment.

In the event that you need to schedule a STAT case a prompt will display the definition of STAT or urgent and you must check that you agree with these conditions in order to proceed with a STAT request.

STAT - EXPEDITED CARE ATTESTATION

Per CMS, Medicare Managed Care Manual, a physician can indicate that applying the standard time for making a determination could seriously jeopardize the life or health of the enrollee or the enrollee's ability to regain maximum function. In order to expedite this review, please follow the instructions below.

1. Please confirm the following statements apply in this situation:

- Applying standard time for making a determination can seriously jeopardize the life and health of this member or the enrollee's ability to regain maximum function.
- The member's medical record has this documentation by the physician/provider note (even if not captured in the same language).
- The case is not being marked as expedited to accommodate scheduling or convenience.
- The member's medical record is available for audit, if requested at a later date for substantiating this information.

I confirm the above statements apply.

2. In case a peer-to-peer discussion is needed to finalize this request, please provide the following information:

Name of the physician/assignee:

Phone number:

(This information is being collected to avoid any delay in completing the expedited review in a timely fashion and not cause any delay in the member's care.)

Finally, select the *Procedure Type* using the drop list. The procedure types listed will vary depending upon the Member's health plan.

PROCEDURE TYPE SELECTION

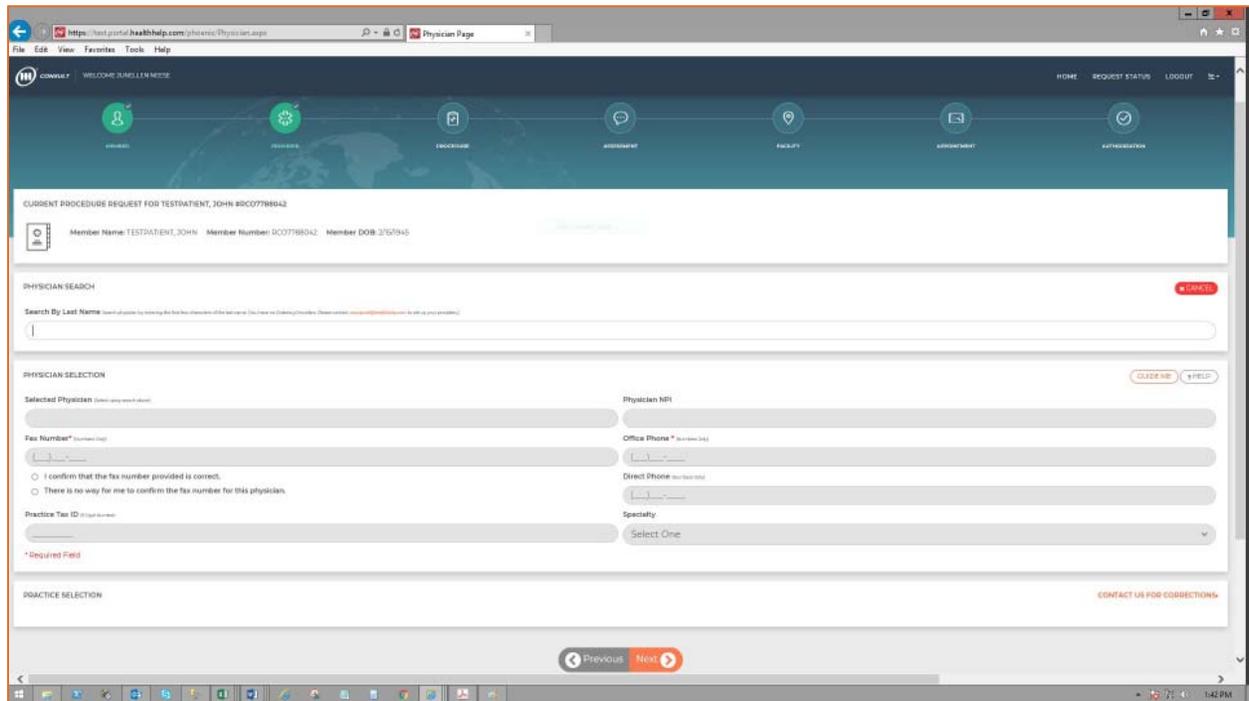
Procedure Type

Select One

- Cardiac Cath
- Cardiac Implantable and Wearable Devices
- Diagnostic Imaging
- Echocardiography
- Interventional Cardiology
- Medical Oncology
- Musculoskeletal (MSK)
- Oncology Biopsy and Surgery
- Percutaneous Coronary Intervention (PCI)
- Radiation Therapy
- Sleep
- Transplant

PROVIDER SCREEN

On the provider screen you can select the ordering physician and practice.



Just place your cursor in the *Physician Search* box and doctors in your profile will appear for you to select. If you have a large number of doctors just start typing the last name and your physician will appear.

NOTE – Physicians can be added to your profile using the Add Physician form on your WebConsult Home Screen or by contacting Program Support

PHYSICIAN SEARCH

Search By Last Name Search physician by entering the first few characters of the last name. [You have no Ordering Providers. Please contact rcsupport@healthhelp.com to set up your providers.]

|

- ADAM W. BAKER, 1192587
- ROGER ESPINOSA, 350338
- LARRY FIORENTINO, 854374
- DANIEL W. KARAKLA, 869765
- RONALD C. SEGURA, 1301507
- Paula L. Springer, 757297
- RONALD M. TADDEO, 916455
- LAVANYA TESTDOCTOR, 1027798

I confirm that the fax number provided is correct.

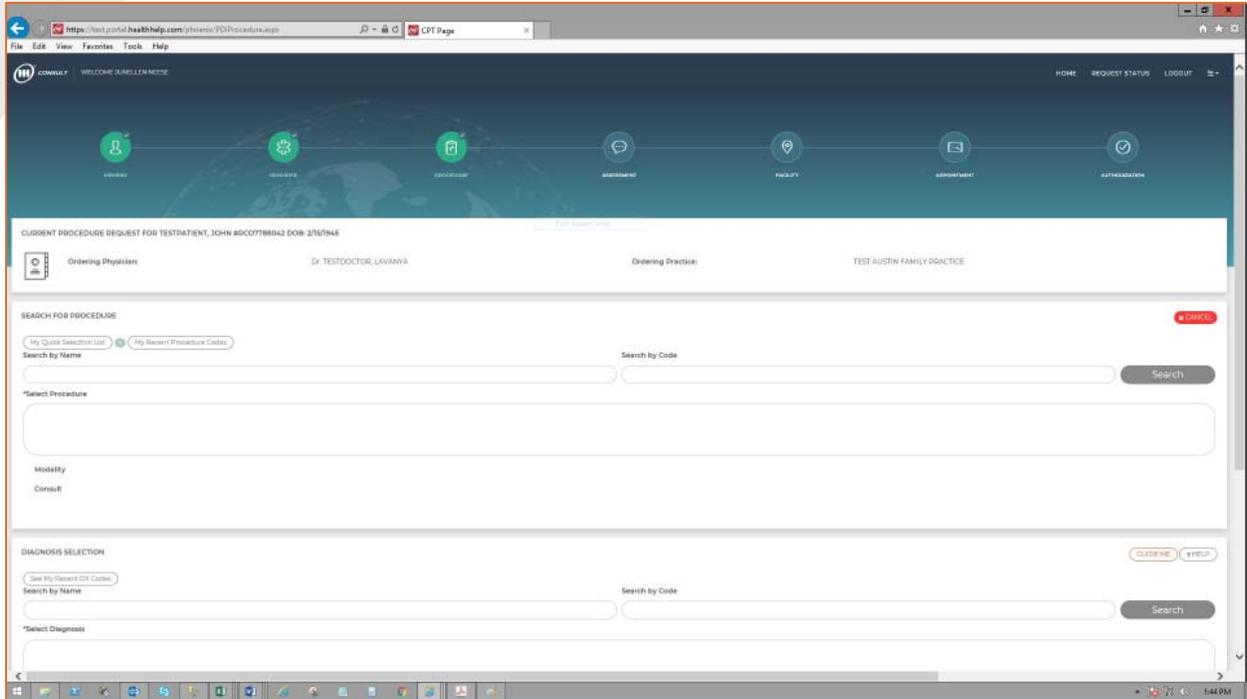
There is no way for me to confirm the fax number for this physician.

Practice Tax ID [3 Digit Number]

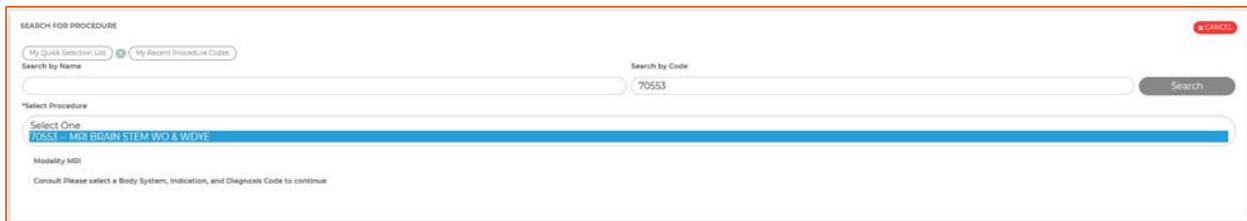
Be sure to verify the phone, fax number and tax ID. Select the physician practice where the member is being seen before you continue to the next screen.

PROCEDURE SCREEN

On this screen we will gather the details for your request. Just work from top to bottom starting with the procedure code, then the body system, diagnosis code and finally the indication.



For the Procedure Code use the *Search By Code* or the *Search by Procedure* to locate the code you need.



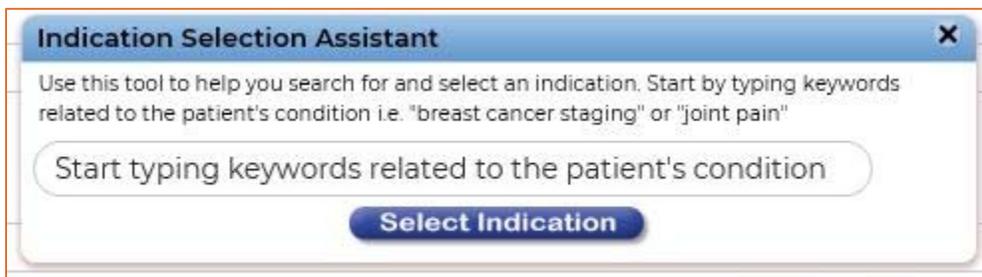
Your *Diagnosis Code* can also be located by searching by name or code



We will need the *Indication* which you can choose from the drop list on this screen. Choose the *procedure modifier* as needed for procedures related to the extremities such as knee, foot, hip, etc.



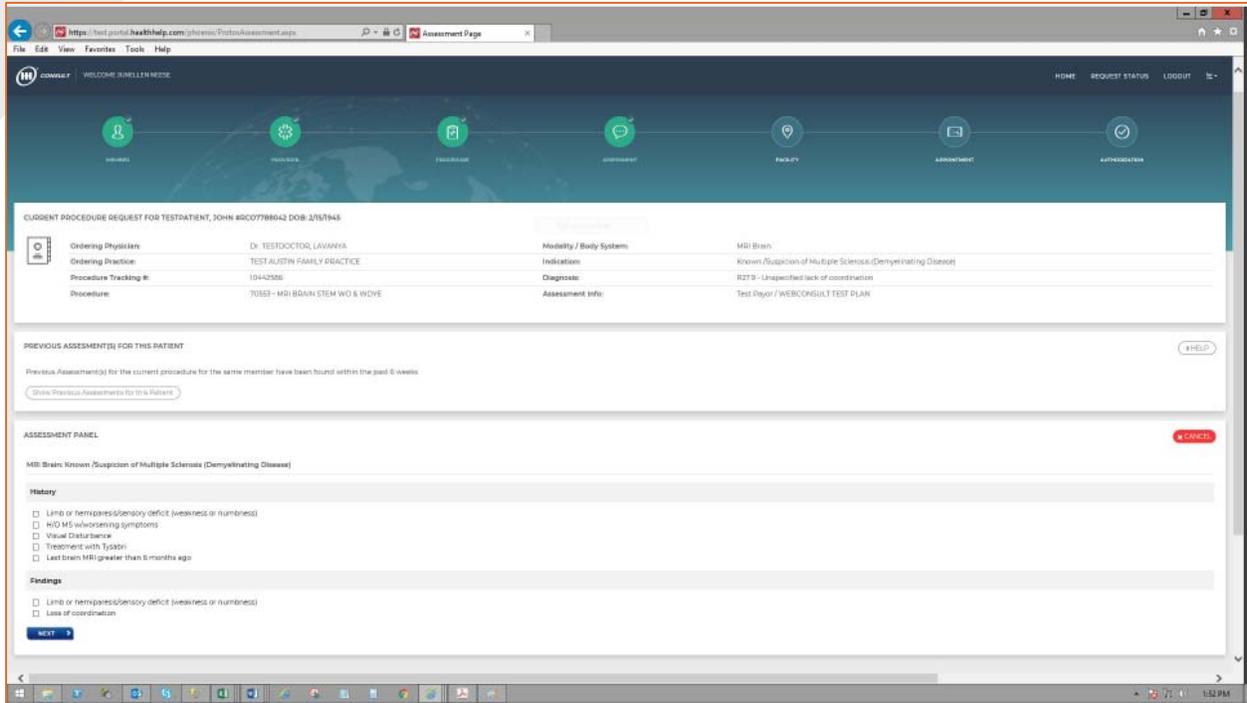
You can get help locating the indication by clicking the *Help me choose an indication* link



NOTE: It is important that you provide HealthHelp with the appropriate and most relevant indication. Choose the primary reason why the doctor is ordering this service. An indication choice of "Other" or an irrelevant indication will likely require clinical review.

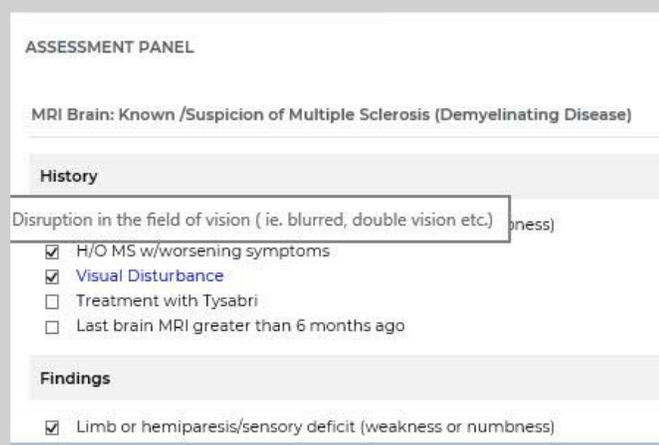
ASSESSMENT

On the assessment screen you will be presented with a list of questions. These questions are related to the procedure requested and the indication you choose on the *Procedure Screen*. We have arranged the questions in categories you will find in the patient's chart to help you locate this information.



Review the questions carefully and check those that apply to your patient. A checked question means “yes” and an unchecked question means “no” or “unknown”.

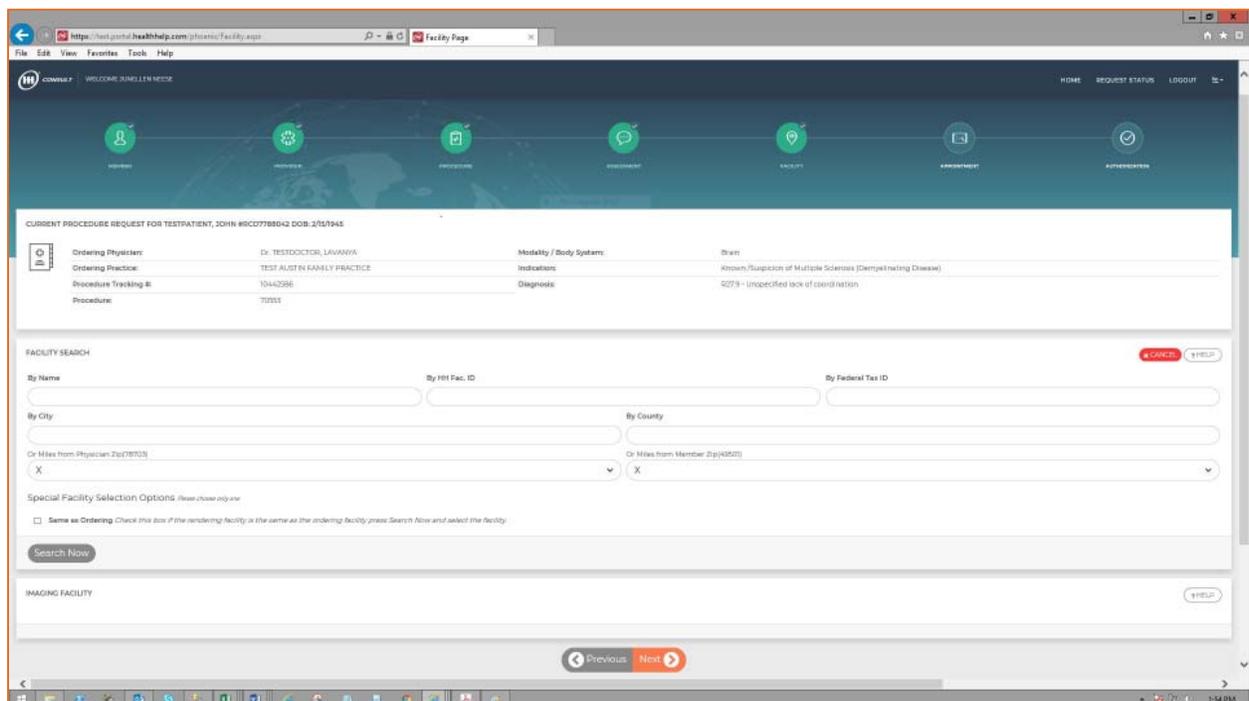
As you hover over a question you will notice additional guidance that may help you.



After you have reviewed and answered the questions press next to finalize your request.

FACILITY SCREEN

The Facility Screen allows you to search for the rendering facility where the services will be performed.



You may find the *Miles from Member Zip* to be a convenient way to locate a facility near the member. You can also search by *facility name*. Please remember that the location may have a dba. *Tax ID* search will list all facilities in the tax ID. You can also narrow your search using the *City* and *County* search fields. Contact Program Support if you are unable to locate your facility.

As you use WebConsult the program will remember you and your *recently selected facilities*. Use this feature to easily locate facilities you have recently scheduled to.

NOTE: Some health plan markets or member plans may have special guidelines for scheduling. Follow the prompts on your screen for specific instructions.

Once you locate and select the rendering facility press next

FACILITY SEARCH + CARES HELP

By Name: By HHI Fac. ID: By Federal Tax ID:

By City: By County:

Or Miles from Physician Zip(76708): Or Miles from Member Zip(49502):

X 30

Special Facility Selection Options [View choices online](#)

Same as Ordering Check this box if the rendering facility is the same as the ordering facility press Search Now and select the facility.

Search Now

IMAGING FACILITY + HELP

Select	Facility	Address	Scheduling #
<input checked="" type="radio"/>	ADVANCED OUTPATIENT IMAGING 188963	1840 WEALTHY GRAND RAPIDS, MI 49546-2779(Health)	(818)774-7838
<input type="radio"/>	ADVANCED RADIOLOGY SERVICES 459371	1900 WEALTHY ST SE STE 300 GRAND RAPIDS, MI 49506(Health)	(866)369-9290
<input type="radio"/>	ADVANCED RADIOLOGY SERVICES (NP#1740385334) 179082	3264 N EVERGREEN DR NE GRAND RAPIDS, MI 49525(Health)	(818)363-7272
<input type="radio"/>	ADVANCED UROLOGY (NP#1078336772) 453228	4070 LAKE DR SE STE 101L GRAND RAPIDS, MI 49546-8294(Health)	(818)439-4771

Previous Next

APPOINTMENT SCREEN

The last information we need is the appointment. If the appointment date is unknown you may select today's date. The appointment time is not required.

https://testportal.healthhelp.com/ohs/nc/ Appointment Page

WELCOME JONELLEN MEDIC

HOME REQUEST STATUS LOGOUT

[HOME](#)
[REQUEST STATUS](#)
[LOGOUT](#)

[PERSONAL](#)
[SCHEDULE](#)
[REQUEST](#)
[APPOINTMENT](#)
[FACILITY](#)
[ADDRESS](#)
[SCHEDULING](#)

CURRENT PROCEDURE REQUEST FOR TESTPATIENT, JOHN 85027788042 DOB: 3/5/1945

Ordering Physician: DR. TESTDOCTOR, LAVANYA **Modality / Body System:** Brain **Imaging Facility:** ADVANCED OUTPATIENT IMAGING 188963
Ordering Practice: TEST PATIENT FAMILY PRACTICE **Indications:** Known / Suspicion of Multiple Sclerosis (Demyelinating Disease) **Address:** 1840 WEALTHY GRAND RAPIDS, MI 49546-2779(Health)
Procedure Tracking #: 984208 **Diagnosis:** R27.9 - Unspecified lack of coordination **Scheduling Phone:** (818)774-7838
Procedure: 70853

APPOINTMENT + HELP + CARES

Choose Date:

Appointment Time:

Appointment Time Unknown

Is this the last procedure for this member?
 Yes

Previous Next

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Use the calendar to select the appointment date

APPOINTMENT

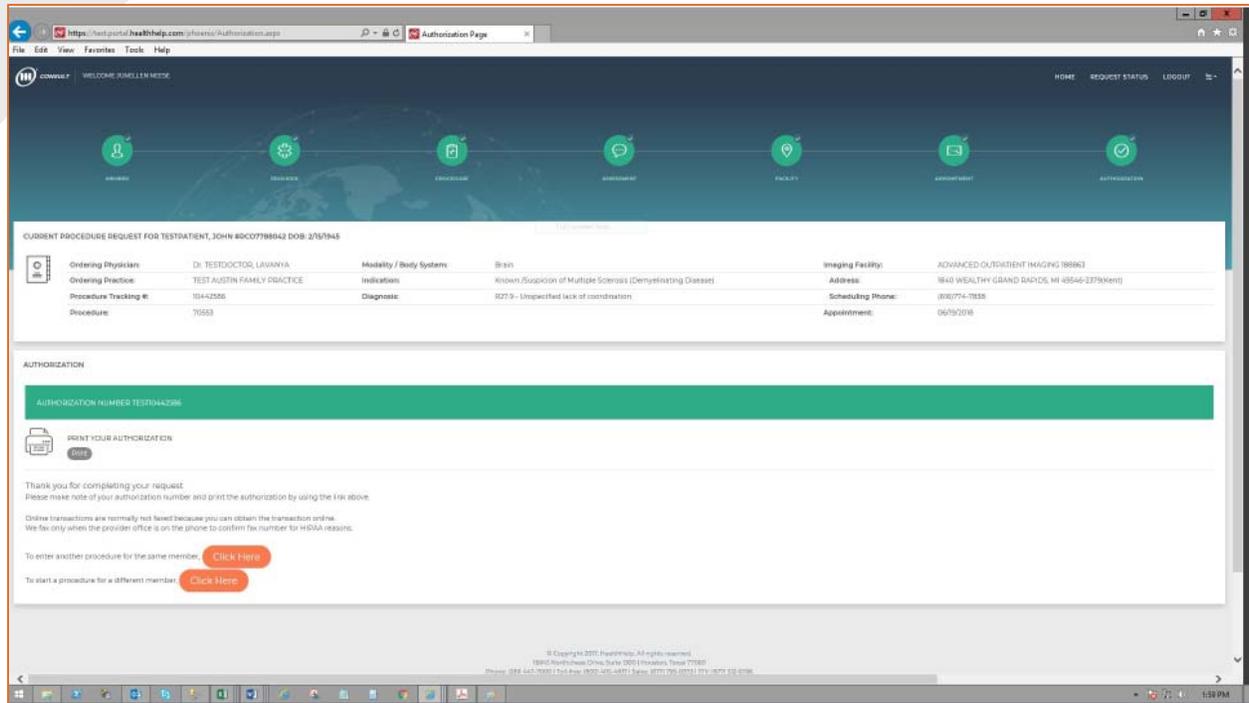
Choose Date

MM/DD/YY

June 2018						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
27	28	29	30	31	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
1	2	3	4	5	6	7

AUTHORIZATION SCREEN

Your final screen will provide the results of your request. The example below is an authorized procedure request. Use the print link to print or save your authorization. You may also print the authorization from the home screen.



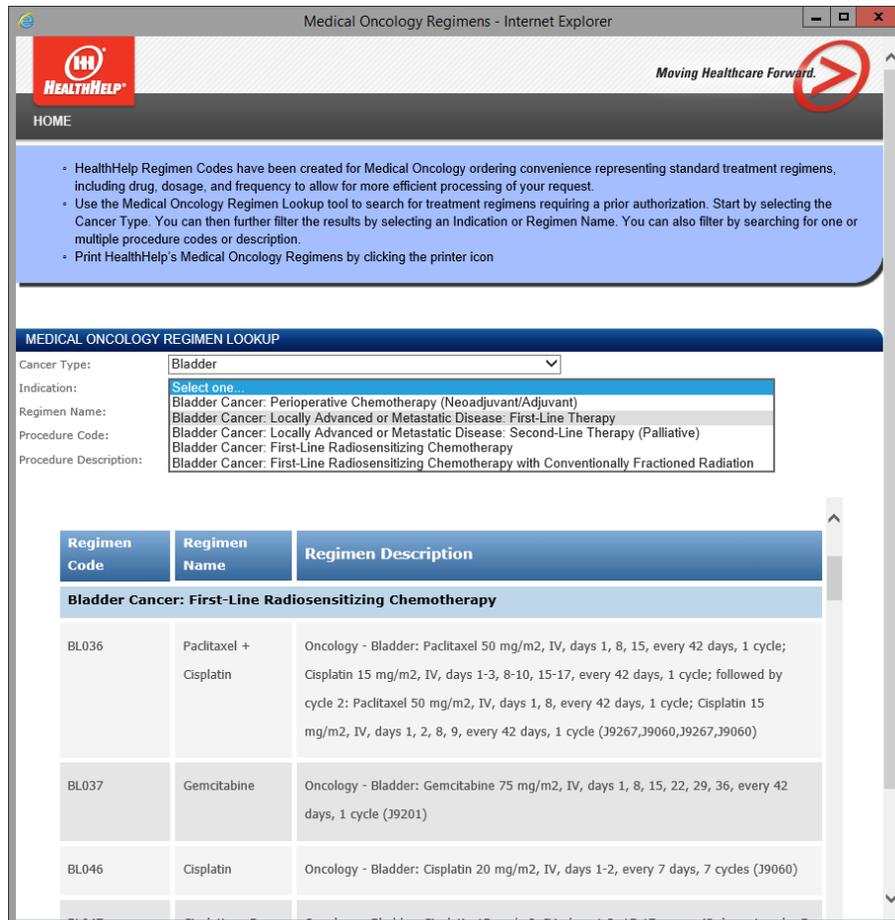
SPECIAL PROGRAMS

The Medical Oncology and Orthopedics (Musculoskeletal) programs have a slightly different workflow we will describe for you here. Your initial member, physician/practice and procedure type entry is exactly the same for these programs.

Medical Oncology

Medical Oncology is ordered as a regimen which typically includes a group of drugs and sometimes growth support or antiemetic. The best way to prepare your Medical Oncology request is to first use the Medical Oncology Regimen Search tool located on the home screen before you start. Locate the regimen that covers the drugs, cycles and doses you need and make a note of the regimen ID.

The Medical Oncology Regimen search tool allows you to search our database of regimens by cancer type, indication or use keywords from your regimen such as a drug name or procedure code. You can download the listing as a reference tool.



Medical Oncology Regimens - Internet Explorer

HEALTHHELP Moving Healthcare Forward.

HOME

- HealthHelp Regimen Codes have been created for Medical Oncology ordering convenience representing standard treatment regimens, including drug, dosage, and frequency to allow for more efficient processing of your request.
- Use the Medical Oncology Regimen Lookup tool to search for treatment regimens requiring a prior authorization. Start by selecting the Cancer Type. You can then further filter the results by selecting an Indication or Regimen Name. You can also filter by searching for one or multiple procedure codes or description.
- Print HealthHelp's Medical Oncology Regimens by clicking the printer icon

MEDICAL ONCOLOGY REGIMEN LOOKUP

Cancer Type:

Indication:

Regimen Name:

Procedure Code:

Procedure Description:

Regimen Code	Regimen Name	Regimen Description
Bladder Cancer: First-Line Radiosensitizing Chemotherapy		
BL036	Paclitaxel + Cisplatin	Oncology - Bladder: Paclitaxel 50 mg/m2, IV, days 1, 8, 15, every 42 days, 1 cycle; Cisplatin 15 mg/m2, IV, days 1-3, 8-10, 15-17, every 42 days, 1 cycle; followed by cycle 2: Paclitaxel 50 mg/m2, IV, days 1, 8, every 42 days, 1 cycle; Cisplatin 15 mg/m2, IV, days 1, 2, 8, 9, every 42 days, 1 cycle (J9267,J9060,J9267,J9060)
BL037	Gemcitabine	Oncology - Bladder: Gemcitabine 75 mg/m2, IV, days 1, 8, 15, 22, 29, 36, every 42 days, 1 cycle (J9201)
BL046	Cisplatin	Oncology - Bladder: Cisplatin 20 mg/m2, IV, days 1-2, every 7 days, 7 cycles (J9060)

Keep the regimen code handy and begin your authorization request starting with the Member ID on the home page and select Medical Oncology on the Member screen.

PROCEDURE TYPE SELECTION

Procedure Type

Select One
Cardiac Cath
Cardiac Implantable and Wearable Devices
Diagnostic Imaging
EC <small>Select proper Procedure Type</small>
Interventional Cardiology
Medical Oncology
Musculoskeletal (MSK)
Oncology Biopsy and Surgery
Percutaneous Coronary Intervention (PCI)
Radiation Therapy
Sleep
Transplant

Select your Physician and Practice and proceed to the Procedure Screen.

BODY SURFACE AREA

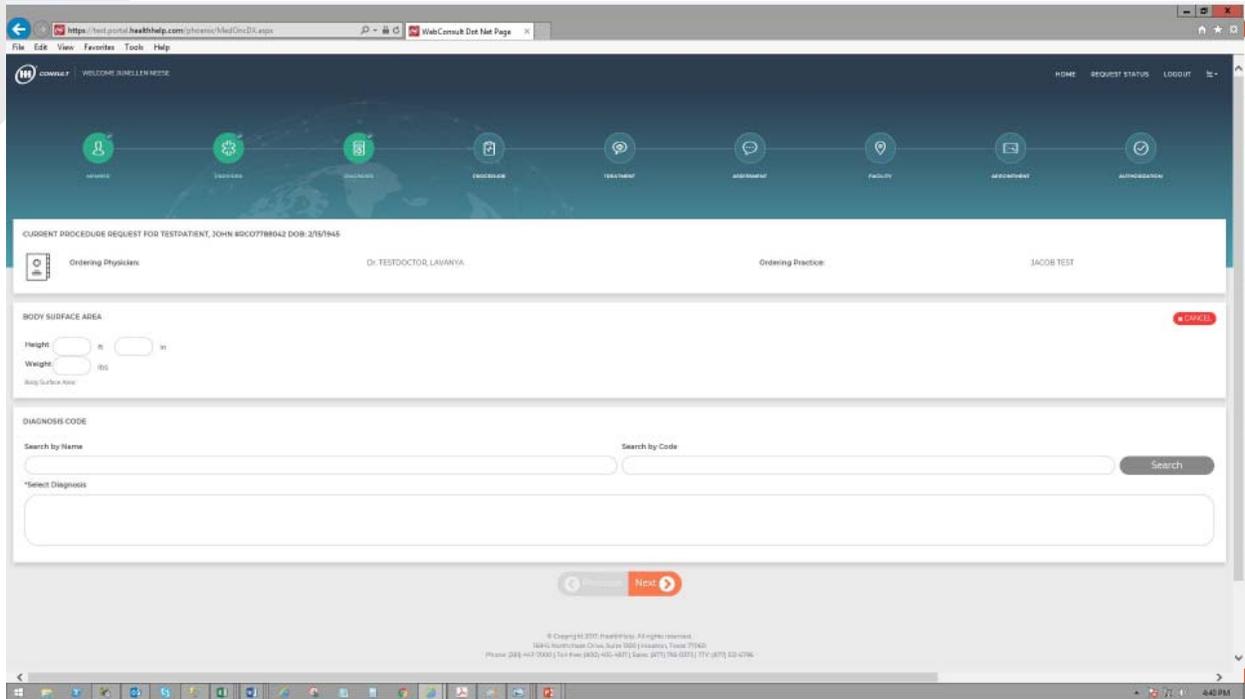
Height ft in

Weight lbs

Body Surface Area: 2.32 m²

Enter the patient's height in feet and inches and the weight and the body surface area will be calculated for you.

Next provide the Diagnosis code using the Search by Code or Search by Name and choose the cancer type from the drop list.



Press next to continue. On the Medical Oncology Treatment Information screen we will collect the information about the treatment. If you already have your Regimen ID you can simply enter it in the search box and select the regimen. Otherwise, scroll through the options listed to select or narrow your search using the options on the screen

If requested, select a Growth Factor code from the list or use the search to locate the Growth Factor. Check the box *No Growth Factor Support Requested at this time* if none is requested.

GROWTH FACTOR SELECTION

Search: **SEARCH**

	Growth Factor Code	Growth Factor Description
Select	GF017	Oncology - Growth Factors: Darbepeotin Alfa (Aranesp) 10-100 mcg, SQ, QW, every 28 days, 6 cycles (J0881)
Select	GF018	Oncology - Growth Factors: Darbepeotin Alfa (Aranesp) 150-300 mcg, SQ, QW, every 28 days, 6 cycles (J0881)
Select	GF066	Oncology - Growth Factors: Darbepeotin Alfa (Aranesp) 200-300 mcg, SQ, day 1, every 14 days, 12 cycles (J0881)
Select	GF065	Oncology - Growth Factors: Darbepeotin Alfa (Aranesp) 200-300 mcg, SQ, day 1, every 14 days, 6 cycles (J0881)
Select	GF019	Oncology - Growth Factors: Darbepeotin Alfa (Aranesp) 500 mcg, SQ, day 1, every 21 days, 8 cycles (J0881)
Select	GF068	Oncology - Growth Factors: Darbepeotin Alfa (Aranesp) 600 mcg, SQ, QW, every 28 days, 4 cycles (J0881)
Select	GF069	Oncology - Growth Factors: Eltrombopag Olamine (Promacta) 100 mg, PO, QD, every 28 days, 2 cycles (J8499)
Select	GF070	Oncology - Growth Factors: Eltrombopag Olamine (Promacta) 150 mg, PO, QD, every 28 days, 2 cycles (J8499)

No Growth Factor Support requested at this time

Next select an Antiemetic Code from this list or use the search to locate it. Check *No Antiemetic Drug requested at this time* if none is required.

Available Antiemetic Codes

	Antiemetic Code	Antiemetic Drug
Select	AE017	Oncology - Antiemetic: Aprepitant up to 125 mg, PO, up to 3 days (J8501)
Select	AE043	Oncology - Antiemetic: Aprepitant up to 125 mg, PO, up to 9 days (J8501)
Select	AE045	Oncology - Antiemetic: Dexamethasone Acetate up to 20 mg, IV, up to 12 days (J1094)
Select	AE033	Oncology - Antiemetic: Dexamethasone Acetate up to 20 mg, IV, up to 4 days (J1094)
Select	AE046	Oncology - Antiemetic: Dexamethasone Sodium Phosphate up to 20 mg, IV, up to 12 days (J1100)
Select	AE034	Oncology - Antiemetic: Dexamethasone Sodium Phosphate up to 20 mg, IV, up to 4 days (J1100)
Select	AE044	Oncology - Antiemetic: Dexamethasone up to 20 mg, PO, up to 12 days (J8540)
Select	AE035	Oncology - Antiemetic: Dexamethasone up to 20 mg, PO, up to 4 days (J8540)

Selected Antiemetic Codes

	Antiemetic Code	Antiemetic Drug
No Antiemetic codes have been selected		

No Antiemetic Drug requested at this time

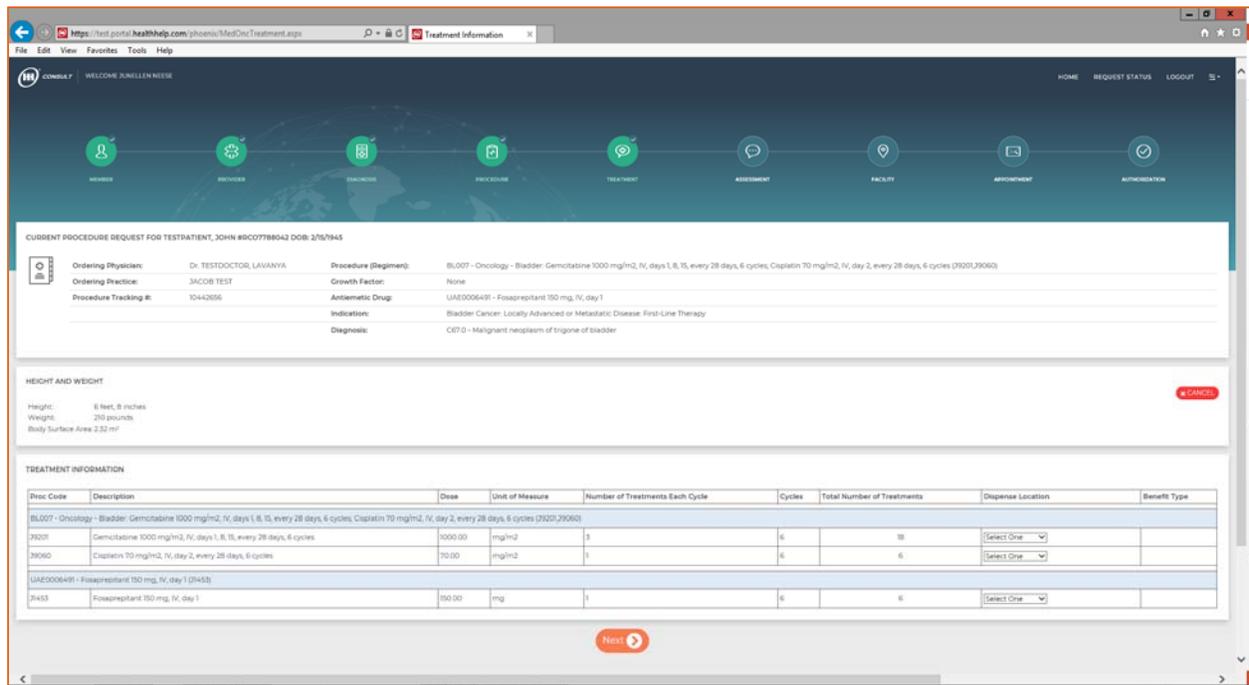
After the growth factor and antiemetic selections please choose the treatment site for this member.

Treatment Location

Location Type:

- Select One
- Freestanding Facility
- Hospital Inpatient
- Hospital Outpatient
- Physician Office

You will next see an overview of your selected regimen and support on the Treatment Screen



The screenshot shows the 'Treatment Information' screen for a patient named JOHN #BC0778042. The page includes a navigation bar with icons for Member, Provider, Diagnosis, Procedure, Treatment, Assessment, Facility, Appointment, and Authorization. The main content area displays the following information:

CURRENT PROCEDURE REQUEST FOR TREATMENT, JOHN #BC0778042 DOB: 2/15/1945

Ordering Physician:	DR. TESTDOCTOR, LAUNYIA	Procedure (Regimen):	BL007 - Oncology - Bladder: Gemcitabine 1000 mg/m ² , IV, days 1, 8, 15, every 28 days, 6 cycles; Cisplatin 70 mg/m ² , IV, day 2, every 28 days, 6 cycles (3920;3906)
Ordering Practice:	JACOB TEST	Growth Factor:	None
Procedure Tracking #: 10142056		Antiemetic Drug:	UA2006481 - Fosoprepitant 150 mg, IV, day 1
		Indication:	Bladder Cancer: Locally Advanced or Metastatic Disease: First-Line Therapy
		Diagnosis:	C67.0 - Malignant neoplasm of trigone of bladder

HEIGHT AND WEIGHT

Height: 6 feet, 8 inches
 Weight: 290 pounds
 Body Surface Area: 2.32 m²

TREATMENT INFORMATION

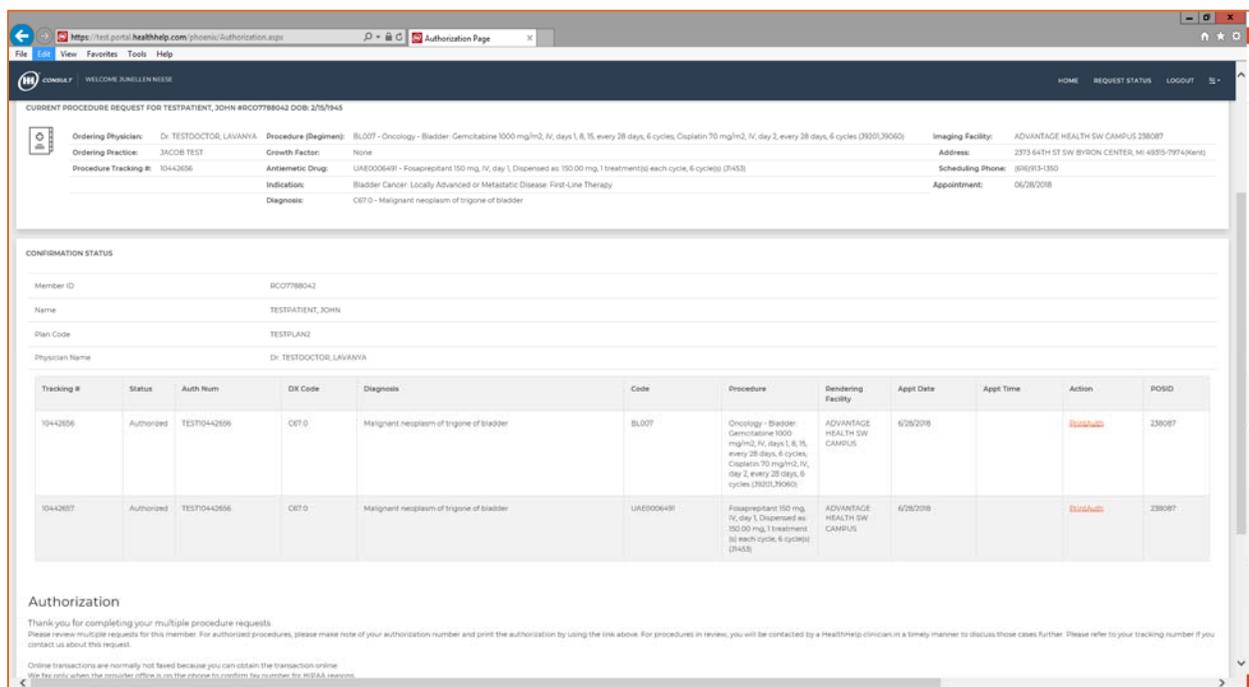
Drug Code	Description	Dose	Unit of Measure	Number of Treatments Each Cycle	Cycles	Total Number of Treatments	Dispense Location	Benefit Type
BL007	Oncology - Bladder: Gemcitabine 1000 mg/m ² , IV, days 1, 8, 15, every 28 days, 6 cycles; Cisplatin 70 mg/m ² , IV, day 2, every 28 days, 6 cycles (3920;3906)							
3920	Gemcitabine 1000 mg/m ² , IV, days 1, 8, 15, every 28 days, 6 cycles	1000.00	mg/m ²	6	6	36	Select One	
3906	Cisplatin 70 mg/m ² , IV, day 2, every 28 days, 6 cycles	70.00	mg/m ²	1	6	6	Select One	
UA2006481	Fosoprepitant 150 mg, IV, day 1 (3945)							
3945	Fosoprepitant 150 mg, IV, day 1	150.00	mg	1	6	6	Select One	

Next

You will see that the entire treatment plan is summarized including the number of cycles, doses and treatments per cycle. This is the advantage of using a regimen ID as all these details

are entered for you. Just select the dispense location Treatment Site or Pharmacy for each item.

Select the facility and appointment date on the next two screens. Your Authorization screen will provide the summary of your request. If approved, use the Print links to open the authorization or follow the instructions to upload your clinical documentation.



CURRENT PROCEDURE REQUEST FOR TESTPATIENT, JOHN #BC0778042 DOB: 276/7943

Ordering Physician: Dr. TESTDOCTOR, LAVANYA Procedure (Regimen): BL007 - Oncology - Bladder Chemotherapy 1000 mg/m², IV, days 1, 8, 15, every 28 days, 6 cycles; Cisplatin 70 mg/m², IV, day 2, every 28 days, 6 cycles (3900,3900) Imaging Facility: ADVANTAGE HEALTH SW CAMPUS 238087

Ordering Practice: JACOB TEST Growth Factor: None Address: 2373 64TH ST SW BYRON CENTER, MI 4835-7974 (MI) Scheduling Phone: (866)913-1350

Procedure Tracking #: 10442656 Antiemetic Drug: UAE0006491 - Fospoprantant 150 mg, IV, day 1, (Dispensed as 150.00 mg, 1 treatment) each cycle, 6 cycle(s) (3745) Appointment: 06/28/2018

Indication: Bladder Cancer: Locally Advanced or Metastatic Disease: First-Line Therapy

Diagnostic: C67.0 - Malignant neoplasm of trigone of bladder

CONFIGURATION STATUS

Member ID: BC0778042
Name: TESTPATIENT, JOHN
Plan Code: TESTPLANT
Physician Name: Dr. TESTDOCTOR, LAVANYA

Tracking #	Status	Auth Num	ICD Code	Diagnosis	Code	Procedure	Rendering Facility	Appt Date	Appt Time	Action	POSID
10442656	Authorized	TEST10442656	C67.0	Malignant neoplasm of trigone of bladder	BL007	Oncology - Bladder Chemotherapy 1000 mg/m ² , IV, days 1, 8, 15, every 28 days, 6 cycles; Cisplatin 70 mg/m ² , IV, day 2, every 28 days, 6 cycles (3900,3900)	ADVANTAGE HEALTH SW CAMPUS	6/28/2018		Print	238087
10442657	Authorized	TEST10442656	C67.0	Malignant neoplasm of trigone of bladder	UAE0006491	Fospoprantant 150 mg, IV, day 1, (Dispensed as 150.00 mg, 1 treatment) each cycle, 6 cycle(s) (3745)	ADVANTAGE HEALTH SW CAMPUS	6/28/2018		Print	238087

Authorization

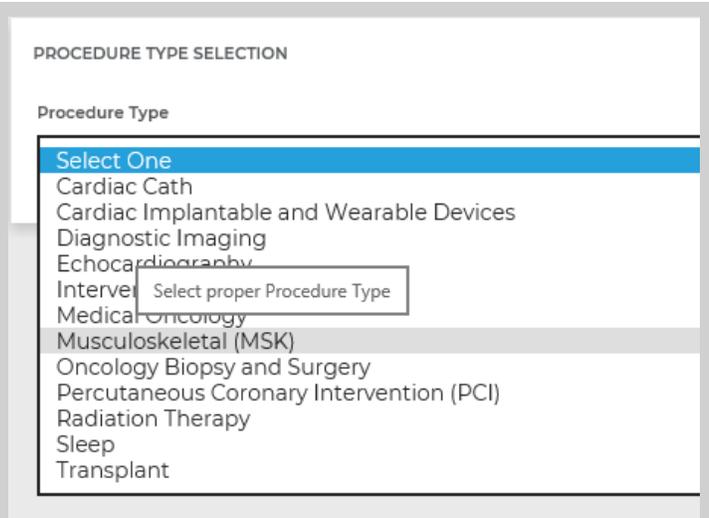
Thank you for completing your multiple procedure requests.
Please review multiple requests for this member. For authorized procedures, please make note of your authorization number and print the authorization by using the links above. For procedures in review, you will be contacted by a HealthHelp clinician in a timely manner to discuss those cases further. Please refer to your tracking number if you contact us about this request.

Online transactions are normally not taxed because you can obtain the transaction online. We fee only when the consider offer is on the phone to confirm the number by ADR/A session.

Orthopedics (Musculoskeletal)

Musculoskeletal procedures involve several codes to complete the required services. One authorization should be created for each body system to be treated on the same date of service at the same facility. For example, if a procedure is needed for the left knee and the right knee, these are considered separate. The only exception is the spine. Lumbar Spine, Cervical Spine and Thoracic spine should be submitted under one authorization.

Begin your authorization request starting with the Member ID on the home page and select Musculoskeletal (MSK) from the Procedure Type Selection on the Member Screen



PROCEDURE TYPE SELECTION

Procedure Type

- Select One
- Cardiac Cath
- Cardiac Implantable and Wearable Devices
- Diagnostic Imaging
- Echocardiography
- Interventional Radiology
- Medical Oncology
- Musculoskeletal (MSK)
- Oncology Biopsy and Surgery
- Percutaneous Coronary Intervention (PCI)
- Radiation Therapy
- Sleep
- Transplant

Continue your request by selecting the ordering physician and practice making sure all contact information is verified.

On the Procedure Screen you will first need to select the body system for this date of service.

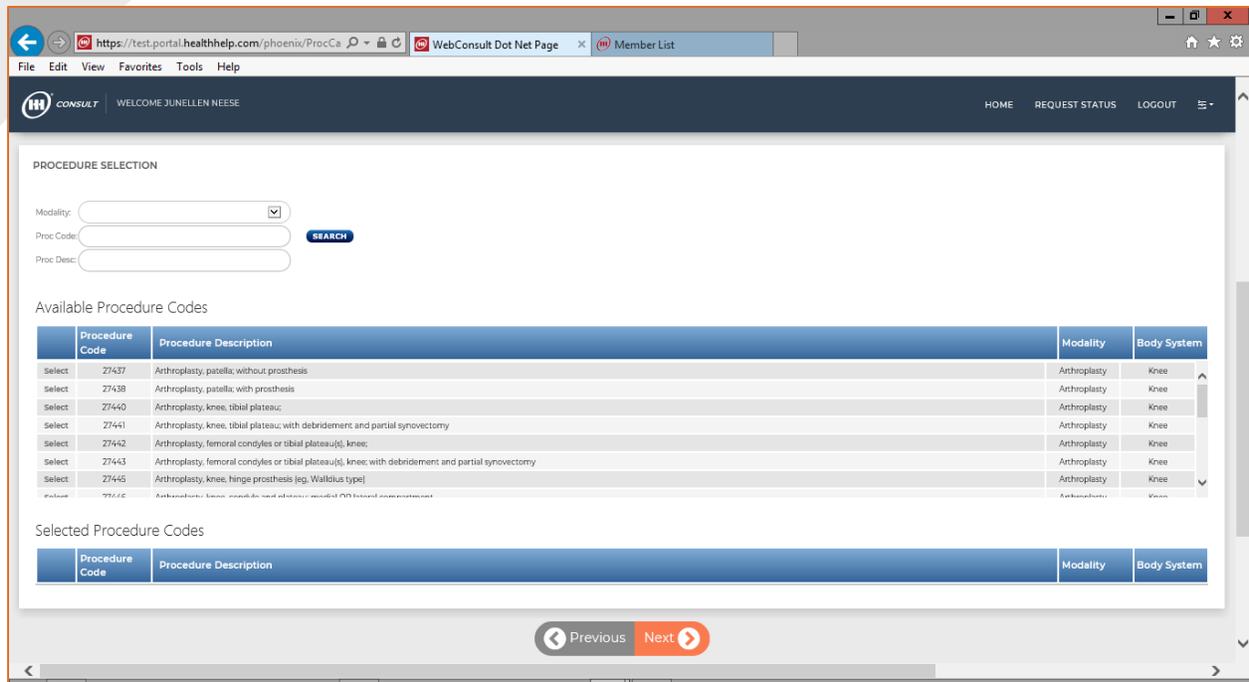


SELECT BODY SYSTEM

Knee

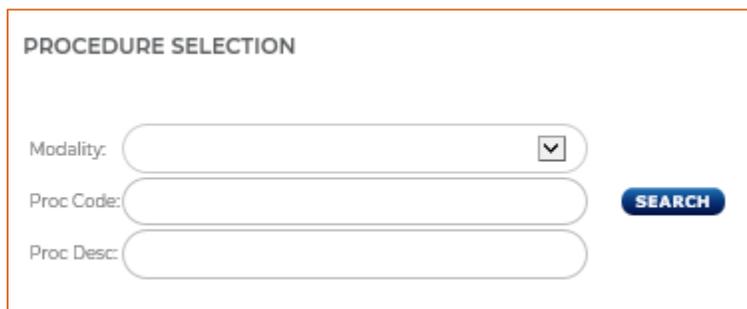
CANCEL

Once the body system has been selected you will be able to select your procedure codes. You will need to select all the codes to be performed for this patient on this body system and date of service.



The Procedure Screen provides you with four easy ways to locate your procedure codes:

- Scroll through the list provided to locate your codes
- Select the Modality to narrow the list of available codes
- Enter the procedure code in the Proc Code box (returns the specific code)
- Use the Proc Desc box to enter a keyword, such as patella or tibial to narrow your list



Click on Select to choose a procedure code and you will see it in your Selected Procedure Codes list. Continue to search and select until all the codes are in the Selected Procedure list.

Available Procedure Codes

	Procedure Code	Procedure Description	Modality	Body System
Select	27437	Arthroplasty, patella; without prosthesis	Arthroplasty	Knee
Select	27438	Arthroplasty, patella; with prosthesis	Arthroplasty	Knee
Select	27440	Arthroplasty, knee, tibial plateau;	Arthroplasty	Knee
Select	27441	Arthroplasty, knee, tibial plateau; with debridement and partial synovectomy	Arthroplasty	Knee
Select	27442	Arthroplasty, femoral condyles or tibial plateau(s), knee;	Arthroplasty	Knee
Select	27445	Arthroplasty, knee, hinge prosthesis (eg, Walkdus type)	Arthroplasty	Knee
Select	27446	Arthroplasty, knee, condyle and plateau, medial OR lateral compartment	Arthroplasty	Knee
Select	27480	Revision of total knee arthroplasty, with or without allarthro-1 component	Arthroplasty	Knee

Selected Procedure Codes

	Procedure Code	Procedure Description	Modality	Body System
Remove	27447	Arthroplasty, knee, condyle and plateau, medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty)	Arthroplasty	Knee
Remove	27443	Arthroplasty, femoral condyles or tibial plateau(s), knee; with debridement and partial synovectomy	Arthroplasty	Knee

Use the Remove link to take away any selected codes that are not needed. Make sure all the codes for the body system and date of service are selected before clicking next to continue. If additional body systems are to be requested a separate procedure request will be needed.

On the next screen select the indication from the drop list. Continue to the Diagnosis code. You may search by code or by description. Use the primary diagnosis code if there is more than one.

Procedure Description: Conversion of previous hip surgery to total hip arthroplasty, with or without autograft or allograft

Select Indication
Total Hip Arthroplasty: Initial Surgery

DIAGNOSIS SELECTION Rectangular Only

[See My Recent DX Codes](#)

Search by Name Search by Code

*Select Diagnosis
Select One
M16.11 -- Unilateral primary osteoarthritis, right hip

Procedure Modifier
Right

On the same screen use the drop list to select the *Requested Location Information*

REQUESTED LOCATION INFORMATION

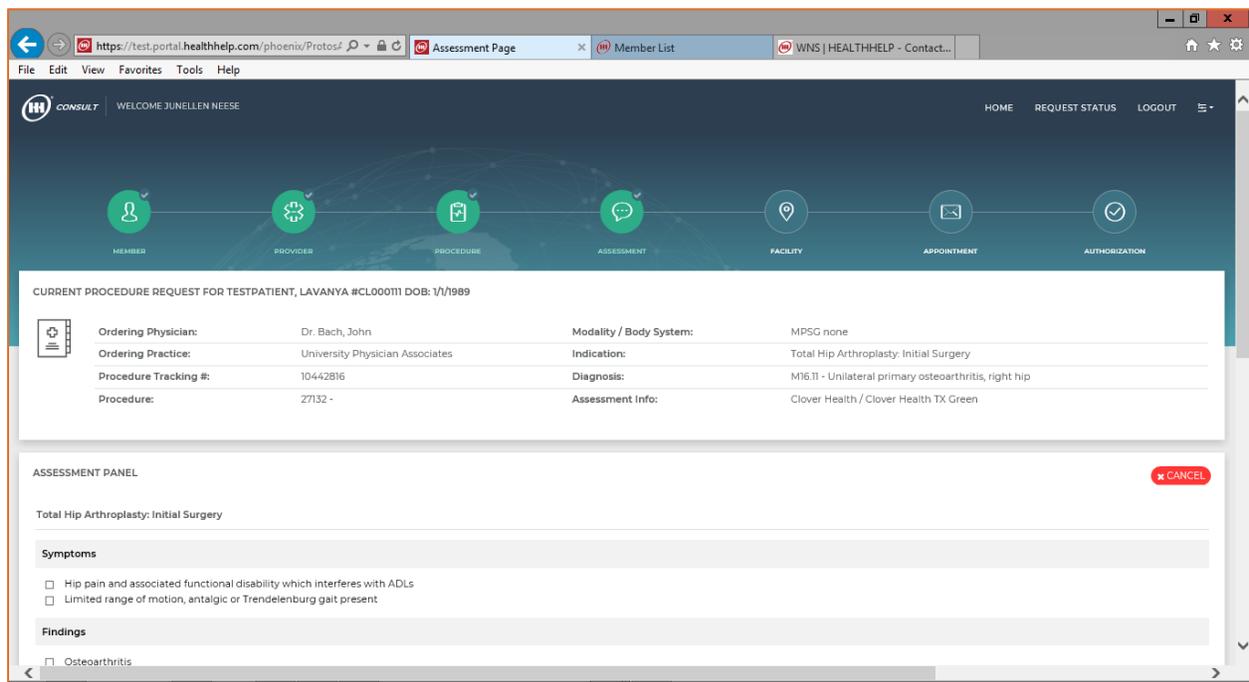
Requested Location 

Select One

- Freestanding Facility
- Hospital Inpatient
- Hospital Outpatient
- Physician Office

Press next to continue

On this screen please all the Assessment questions and check each question that applies to this patient. Checking the question indicates yes, leaving the question unchecked indicates no or unknown.



The screenshot shows a web browser window with the URL <https://test.portal.healthhelp.com/phoenix/Protosf>. The page title is "Assessment Page". The user is logged in as "WELCOME JUNELLEN NEESE". The navigation menu includes "HOME", "REQUEST STATUS", and "LOGOUT".

The main content area shows a progress bar with icons for MEMBER, PROVIDER, PROCEDURE, ASSESSMENT, FACILITY, APPOINTMENT, and AUTHORIZATION. The "ASSESSMENT" step is currently active.

CURRENT PROCEDURE REQUEST FOR TESTPATIENT, LAVANYA #CL000111 DOB: 1/1/1989

Ordering Physician:	Dr. Bach, John	Modality / Body System:	MPSG none
Ordering Practice:	University Physician Associates	Indication:	Total Hip Arthroplasty: Initial Surgery
Procedure Tracking #:	10442816	Diagnosis:	M16.11 - Unilateral primary osteoarthritis, right hip
Procedure:	27132 -	Assessment Info:	Clover Health / Clover Health TX Green

ASSESSMENT PANEL CANCEL

Total Hip Arthroplasty: Initial Surgery

Symptoms

- Hip pain and associated functional disability which interferes with ADLs
- Limited range of motion, antalgic or Trendelenburg gait present

Findings

- Osteoarthritis

Depending on the procedures and indications selected you may have additional questions. Please review and answer then press next to continue your MSK request with the Facility and Appointment screens.

You will return to the procedure page for the next code you selected. Select the Indication for this procedure code. You will notice that the remaining data is already completed for you so press next to move forward. Answer any clinical questions. The facility and appointment is already completed.

NOTE: If you change the facility and/or appointment date the new information applies to all selected procedures.

Once all procedure related data is completed your final screen will list a summary of all requested procedures. When all procedures meet criteria for an immediate authorization you will be able to print your authorization from this screen or from your WebConsult home screen.

If your case is in clinical review follow the Clinical Review guidelines found in this document.

CLINICAL REVIEW PROCESS

If we need additional information or the case is in clinical review use the Upload Documents link provided on the Authorization page or the link on your home screen.

Consultation Status

Thank you for completing your multiple procedure requests

One or more of your multiple procedure requests require clinical review. **To assist us with the review process, please fax at minimum the last two office visit notes (if available) and any previous laboratory or radiology test results to fax number: 800-627-9135.** If a patient is at a facility without prior authorization of services, please call our clinical review team now at (877) 883-5690. Please have your clinical information related to this request available at the time of your call in order for us to help you promptly.

For your convenience and to ensure proper routing, click [here](#) for a fax coversheet.

Please review multiple requests for this member. For approved procedures, please make note of your Reference Number and print the authorization by using the link above.

Please refer to your tracking number if you contact us about this request. For assistance with your online requests, you may contact Program Support at 1-800-546-7092. *Please note that the Program Support Team does not make any clinical determinations, however, they are happy to assist you with any corrections or updates as well as general assistance with other steps in processing your consultation.

To upload documents, please drag your files to the box below.

Drag and drop file(s) here...

Or

Online transactions are normally not faxed because you can obtain the transaction online. We fax only when the provider office is on the phone to confirm fax number for HIPAA reasons.

10441147		KIMBERLY CHANEY	70553	Phoenix	5/8/2018	Waiting for Clinical Review	Cancel or Change	Upload
10441146		DAVID RIDIMAN	70450	Phoenix	5/8/2018	Waiting for Clinical Review	Cancel or Change	Upload

By uploading your clinical information using these links your files will be delivered directly to our clinical team.

If you would like a copy of our Clinical Guidelines please contact us or ask your nurse reviewer.

STATUS

The authorization requests submitted under your login within the last 14 days are listed on your home screen. Additional status queries can be entered using the Request Status link