

UCSF Authorization Representative Situation Response Guidelines (SRGs)

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UCSF Authorization Representative Situation Response Guidelines (SRGs)**Situation #1: Account requires authorization or referral****Response:**

- Locate the account on your ONTRAC Authorization worklist and click on the “Auth” box to access the Detail page.
- Read any comments that may be in the “Notes” field on the Detail page of your Authorization worklist.
- If the visit requires a referral, check MCA to see if an appropriate referral has already been entered.
 - If there is an appropriate referral in MCA, link it to the account and code the account as “3 – Authorization/Referral Obtained.”
 - If there is not an appropriate referral or authorization in MCA, check the “Visit Reason” and “Sched Comment” fields on the Detail page of your Authorization worklist.
 - If there is a note that the patient has promised to bring in the referral on the date of service, code the worklist with a “4 – Pt. to bring in referral”
 - Enter the visit date in the “Tickle Date” field
 - If there are no notes in the Visit Reason or Sched Comment fields, contact either the primary care physician or the patient to obtain a referral
- If the visit requires an authorization, call the number provided on the “Payer Matrix” or the Authorization phone number noted in the “Insurance Information” section on the Detail page of your ONTRAC worklist.
 - Obtain the authorization information and enter it into the MCA screens in IDX.
 - Link the authorization to the visit
 - Code your ONTRAC worklist with “3 – Authorization/Referral Obtained”
- If insurance company/review group requests more clinical information:
 - Code your ONTRAC worklist with “2 – Pending Clinical” until clinical information has been provided to the insurance company/review group.
 - Obtain necessary clinical information and fax to insurance company. Document in “Visit Notes A (Ins. Verification Notes)” the information that was sent to the payer, as well as the contact name, contact phone number, and tracking/reference number (if provided).
 - Code your worklist with “1 – Pending Authorization” after requested clinical information has been sent to the insurance company.
- If insurance company/review group requests time to review the account:
 - Code your ONTRAC worklist with “1 – Pending Authorization.”
 - Continue to follow-up with the insurance company/review group until an outcome has been reached (authorization obtained or authorization denied).
 - Document your actions in the IDX “Visit Notes A (Ins. Verification Notes).”

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UCSF Authorization Representative Situation Response Guidelines (SRGs)**Situation #2: Authorization is denied****Response:**

- Document the reason for the denial in the IDX “Visit Notes A (Ins. Verification Notes),” including any clinical reasons that may be available.
- Code your Authorization worklist with “-1 - Authorization Denied.”
- This account will appear on the At-Risk worklist and the Appointment Rescheduling (AptR) worklist for review by the practice supervisor and physician.

Situation #3: Authorization is still pending one day prior to the date of service (DOS)**Response:**

- Continue to work proactively to obtain the authorization until 10am on the day before the date of service.
- If you are successful in obtaining the authorization, the account status will be updated on the At-Risk worklist and the Appointment Rescheduling (AptR) worklist as soon as you code your ONTRAC Authorization worklist.
 - Enter the authorization information into the MCA screens
 - Link the authorization to the visit in IDX.
 - Code your Authorization worklist with “3 – Authorization/Referral Obtained.”
- If the authorization is denied:
 - Document the reason for denial in the IDX “Visit Notes A (Ins. Verification Notes).”
 - Code your Authorization worklist with “-1 – Authorization Denied.”
- If the authorization is still pending:
 - Document your actions in the IDX “Visit Notes A (Ins. Verification Notes).”
 - Code your Authorization worklist with a “1 – Pending Authorization” if the payer or review organization is reviewing the authorization request, or with a “2 – Pending Clinical” if the payer has requested additional clinical information and you are not able to provide it immediately.

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UCSF Authorization Representative Situation Response Guidelines (SRGs)**Situation #4: Non-acute walk-in patient presents at Front Desk****Response:**

- Front desk representative will provide you with a copy of the patient's insurance card for you to perform insurance verification and obtain an authorization if required.
- Call the insurance company to verify eligibility and benefits.
 - Document eligibility and benefits information in IDX (see Documentation Standards)
- Inquire as to whether an authorization is required.
 - If authorization is required, refer to "Situation #1: Account requires authorization."
 - Use "Add Account" function in ONTRAC to reflect the work you have completed on this account. For "Add Account" instructions, refer to "Situation #10: You work an account that is not on your ONTRAC worklist".
 - If authorization is not required, code your Authorization worklist with a "5 – Not Required."
- Inform patient of the outcome of the eligibility/authorization check.
 - If the patient is ineligible for the visit, ask if he/she is willing to pay the required deposit.
 - If the patient is unwilling to pay and is adamant about being seen, refer him/her to the Practice Supervisor.
 - If the authorization could not be obtained, work with the patient to reschedule the appointment to allow more time to obtain the authorization.

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UCSF Authorization Representative Situation Response Guidelines (SRGs)**Situation #5: Acute walk-in patient presents at Front Desk****Response:**

- Front desk representative will make a copy of the insurance card and fax it to the Access Unit at 353-3960 for insurance verification. The Access Unit representative will verify eligibility and benefits as soon as they receive the fax.
- Front desk representative will provide you with a copy of the insurance card to obtain the authorization.
- Obtain any required clinical information to obtain authorization. Keep physician informed of the authorization status.
- Call the insurance company to obtain an authorization while physician is seeing the patient.
- Inquire as to whether an authorization is required.
 - If authorization is required, refer to “Situation #1: Account requires authorization.”
 - Use “Add Account” function in ONTRAC to reflect the work you have completed on this account. For “Add Account” instructions, refer to “Situation #10: You work an account that is not on your ONTRAC worklist”.
 - If authorization is not required, code your Authorization worklist with a “5 – Not Required.”
 - Code your Authorization worklist appropriately to reflect the work you have completed on the account. Document your actions in the IDX “Visit Notes A (Ins. Verification Notes).”

Situation #6: Access Unit discovers that insurance is not valid**Response:**

- The “IV Status” of the account in the “Sponsorship Information” section of the Detail page of the account on the Authorization worklist will read “Ineligible” or “Seeking Alternative Coverage.”
- Code your Authorization worklist with a “Complete” value of “1 – Out of Scope” to indicate that no further work is required on this account.
- If the Access Unit is able to find another insurance for this patient, this account will reappear on your worklist with an “IC” exception code.
- The account will appear on the At-Risk worklist and the Appointment Rescheduling (AptR) worklist the following day.

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UCSF Authorization Representative Situation Response Guidelines (SRGs)**Situation #7: Auth Rep discovers insurance is invalid for Scheduled Appointment****Response:**

- Insurance company/review group representative says the patient is not eligible for services (i.e., insurance has terminated, benefits are exhausted, etc.)
- Document the reason for denial (coverage has terminated) and the name and phone number of the person you spoke with in IDX “Visit Notes A (Ins. Verification Notes).”
- Insert Self Pay (ZP4) as the primary plan code, delete the original / termed plan code.
- Code your ONTRAC worklist with an “Authorization” status of “-2 – Insurance Not Valid” and code with a “Complete” status of “1 – Out of Scope” to indicate that no further work is required.
- Enter a brief note in the ONTRAC “Notes” field to communicate the status of the account to the Access Unit.
- The account will appear on the Access Unit worklist the following day with an “IC” exception code. The account may also appear on the At-Risk worklist and Appointment Rescheduling (AptR) worklist based on the work done by the Access Unit.

Situation #8: Account appears on your worklist with an “IC” exception code**Response:**

- The account will appear on your Authorization worklist with an “IC” (Insurance Change) exception code and the new insurance information.
- Check the new insurance to see if authorization / referral is required.
 - If authorization is required, refer to “Situation #1: Account requires authorization or referral.”
 - If authorization is not required, code the account as “5 – Not Required.”

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UCSF Authorization Representative Situation Response Guidelines (SRGs)**Situation #9: Account appears on your worklist with an “RP” exception code****Response:**

- Look in IDX to determine if procedure was rescheduled (RP Exception) with a new visit number
- Look for a rescheduled visit in IDX with the same patient name and SSN.
- If the procedure was rescheduled, find the new account on your ONTRAC worklist.
 - If authorization or referral was obtained for the original DOS:
 - Check to see if the new date of service is covered
 - If yes, code all work that has been completed to date. Transfer any relevant account notes from cancelled or bumped visit to the rescheduled visit in IDX.
 - If no, rework account as required
- If the rescheduled account does not yet appear on your worklist, use “Add Account” function in ONTRAC to reflect the work you have completed on this account.
 - For “Add Account” instructions, refer to “Situation #10: You work an account that is not on your ONTRAC worklist.”

Situation #10: You work an account that is not on your ONTRAC worklist**Response:**

- Click on the *Add New Account* link in ONTRAC
- Enter the visit number, visit date, and visit time in the appropriate fields and click the “Search” button to search for the account in ONTRAC.
 - If the account exists in ONTRAC, the page will display codes to indicate the work that has already been completed on the account on other worklists.
 - If the account does not exist in ONTRAC, all activities will indicate that no work has been completed yet.
- From the pull-down menus, select the appropriate codes to reflect the work you have completed on the account, then click the “Submit” button.
- Update MCA and IDX with any authorization information.
- Activity will be recorded in ONTRAC and the account will appear on the appropriate ONTRAC worklist(s) the following day reflecting the work you completed on the account.

Situation #11: ONTRAC worklist is not available

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UCSF Authorization Representative Situation Response Guidelines (SRGs)

Response:

- Print out the “Provider Schedule” for upcoming days from SCHED.
- Proactively work to obtain authorizations for the upcoming appointments.
- Update MCA and IDX with any authorization information.
- Record the work you have completed on the paper copies of the “Add Account” forms.
- When the ONTRAC worklists are available, code your ONTRAC worklist appropriately to reflect the work you have completed.

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