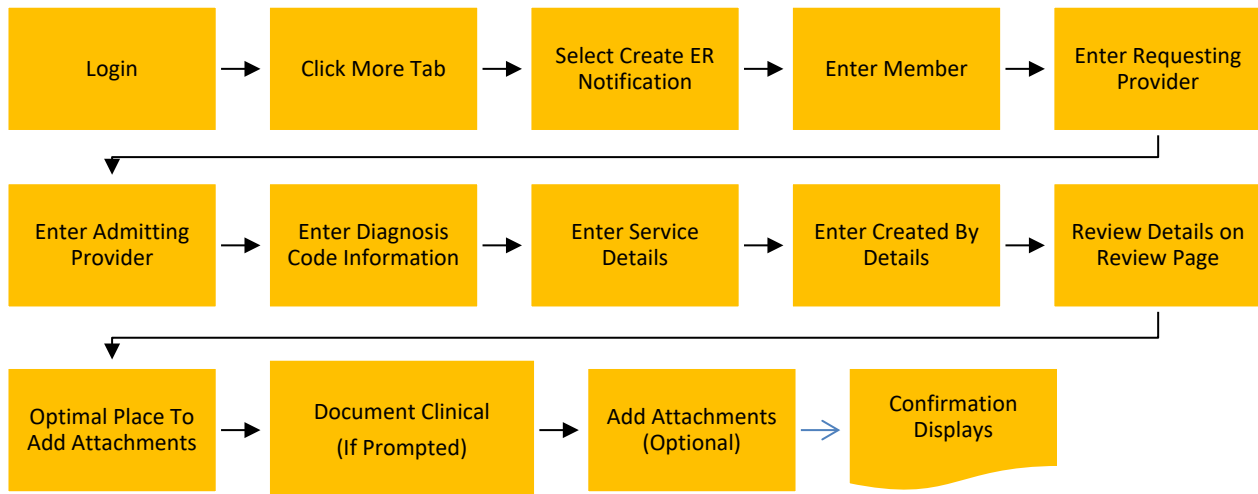# Provider Portal – Emergent Inpatient Admission Notifications

Quick Reference Guide (QRG)

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This Quick Reference Guide (QRG) will provide an overview of the Provider Portal – Emergent Inpatient Admission Notifications (Notifications).

Login	→	Click More Tab	→	Select Create ER Notification	→	Enter Member	→	Enter Requesting Provider

Enter Admitting Provider	→	Enter Diagnosis Code Information	→	Enter Service Details	→	Enter Created By Details	→	Review Details on Review Page

Optimal Place To Add Attachments	→	Document Clinical (If Prompted)	→	Add Attachments (Optional)	→	Confirmation Displays

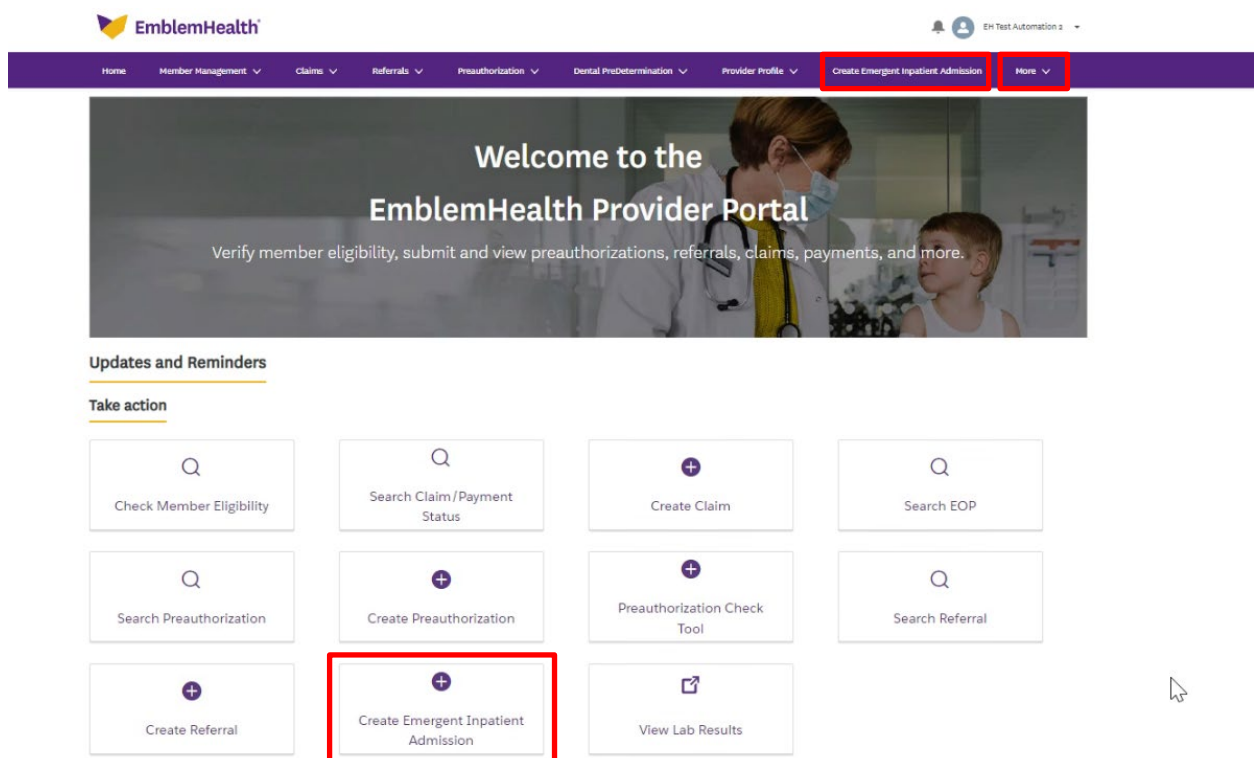## 1. Purpose: To Create a Notification.

Let us look at the steps in detail to create a Notification.

Step 1:	From **Provider Portal Home** screen, select **Create Emergent Inpatient Admission** from the top menu or the **Take action** box. **Note:** Click **More** to view **Create Emergent Inpatient Admission**, if it is not seen on the menu tab.

Step 2:	1. If you are searching by **Member ID**, enter the Member ID in the relevant field. **Note:** You can also search using the member's name by using the down arrow to switch the **Search By** method. 2. Click **Search** to view the member details.

CREATE EMERGENT INPATIENT ADMISSION

Member Information

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Search By
Member ID

Member ID *

Reset Search   Search

Step 3:	The member's details, including plan and coverage type, display. If the member's coverage is inactive, a warning message will display. Click **Next** to proceed.

You have selected an inactive member. If you wish to continue, click on Next.

	Member ID	Member Name	Coverage Start Date	Coverage End Date	Status	Date of Birth	Gender	Coverage Type	Plan Type
○	K1000124801	Davis, John	11/01/2020	12/31/9999	Active	02/07/1987	Female	Medical	HMO
◉	K1000124801	Davis, John	11/01/2019	10/31/2020	Inactive	02/07/1987	Female	Medical	HMO

Total Records: 2   ‹ Showing 1 - 2 ›

Next

Cancel

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2. Requesting Provider

Step 4:

1. The **Requesting Provider** screen displays. Enter **Provider Name, Specialty, City, State,** and **ZIP Code.** The **Requesting Provider** should be the inpatient facility where the member is being admitted.

   Note: The fields **Specialty, City, State,** and **ZIP Code** are optional. You can enter the details in these fields if you want the search result to be more accurate.

2. Click **Search**.

   Note: In the **Provider Name** field, you can search by entering at least two characters of the first or last name. In the **Specialty** field, you can do a partial search by entering four letters.

CREATE EMERGENT INPATIENT ADMISSION

Requesting Provider

Complete the details below and click Next to continue. All fields with an asterisk * are required.

To refine your search, enter specialty, zip code or city and state.

Before you begin, please be sure that the service you are requesting is not managed by one of our partners. Check the Provider Manual for the most up to date information.

Search By*
Provider Name

Provider Name*

Required

Specialty

City

State

Zip Code

Reset Search   Search

Step 5:

1. The provider's details for the search displays.
2. You can use **Filter By** to target the required provider from the search results.

Filter By 🛈

Name	Address	Tax ID	NPI	Type	Specialty	In-Network
New York Regional Medical Center	730 Victoria Dr., Brooklyn, NY, 11213	120000897832	1234446986	Hospital	Hospital	No
Orange Hospital Medical Cente	23 South Lane, New York, NY, 10128	120000897832	1234446986	Hospital	Hospital	Yes

Total Records: 2   ‹ Showing 1 - 2 ›

Previous   Next

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Step 6: Select the applicable inpatient facility from the search results table and click **Next.**

Filter By ℹ

Name	Address	Tax ID	NPI	Type	Specialty	In-Network
⦿ New York Regional Medical Center	730 Victoria Dr., Brooklyn, NY, 11213	120000897832	1234446986	Hospital	Hospital	No
○ Orange Hospital Medical Cente	23 South Lane, New York, NY, 10128	120000897832	1234446986	Hospital	Hospital	Yes

Total Records: 2   ‹ Showing 1 - 2 ›

Previous   Next

Cancel

Step 7:
1. The **Alert** dialog box appears if you select out-of-network provider.
2. Click **Next** to continue with the selected out-of-network provider or **Cancel** to go back.

Requesting Provider

Alert

⚠ You have selected an out-of-network provider. If you wish to continue, click on Next

Cancel   Next

3. Admitting Provider

Step 8:	1. If you are searching by **Provider Name**, fill in the relevant details in the fields **Provider Name, Specialty, City, State,** and **ZIP Code.** The **Admitting Provider** is the doctor or practitioner who is responsible for the member's care. **Note:** The fields **Specialty, City, State,** and **ZIP Code** are optional. You can enter the details in these fields if you want the search result to be more accurate. 2. Click **Search**. **Note:** In the **Provider Name** field, you can search by entering at least two characters of the first or last name. In the **Specialty** field, you can do a partial search by entering four letters.

CREATE EMERGENT INPATIENT ADMISSION

Admitting Provider

Complete the details below and click Next to continue. All fields with an asterisk * are required.

When searching providers by full name, use this format: Last Name, First Name. You can further refine your search by including a specialty, zip code, or city and state.

Search By
Provider Name

Provider Name *   Specialty

ZIP Code   State

City

Reset Search   Search

Step 9:	Providers matching your search criteria will display. If the results do not show expected results, click **Cancel** to return to the **Admitting Provider** search screen.

Filter By

	Name	Address	Tax ID	NPI	Type	Specialty	In-Network
○	Carter, John	730 Victoria Dr., Brooklyn, NY, 11213	120000897832	1234446986	Allopathic Physician	General Surgery	No
◉	Carter, John	23 South Lane, New York, NY, 10128	120000897832	1234446986	Allopathic Physician	General Surgery	Yes

Total Records: 2   ‹ Showing 1 - 2 ›

Previous   Next

Cancel

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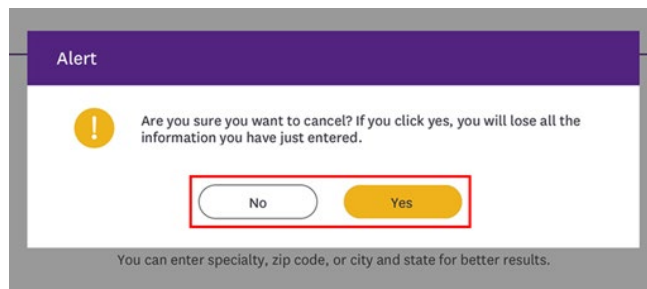
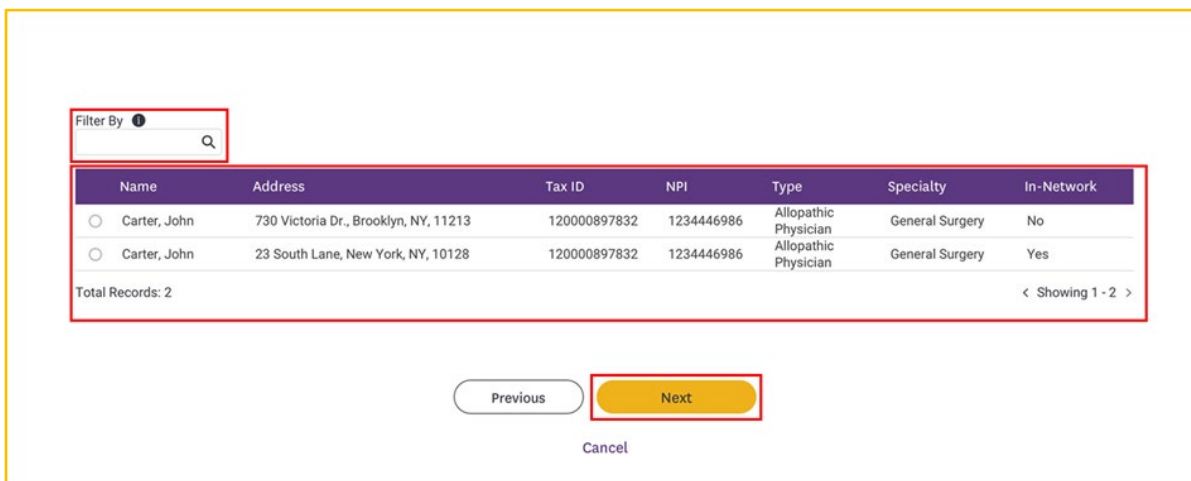| Step 10:	The **Alert** dialog box displays. If you click **Yes**, you will lose all the information you have entered.

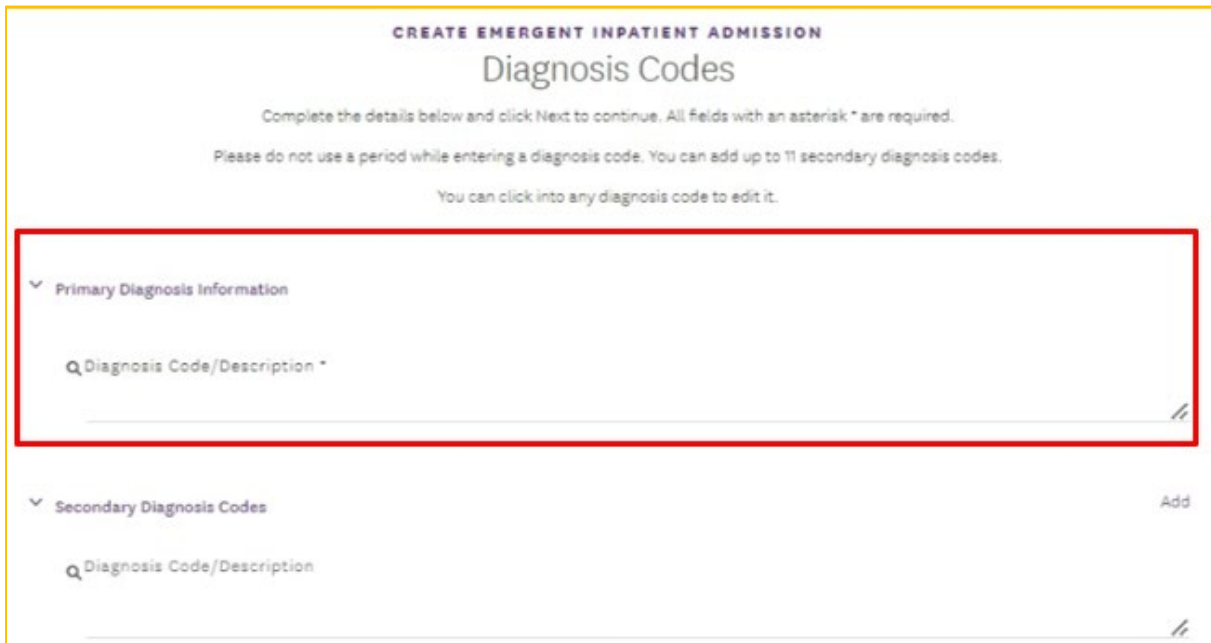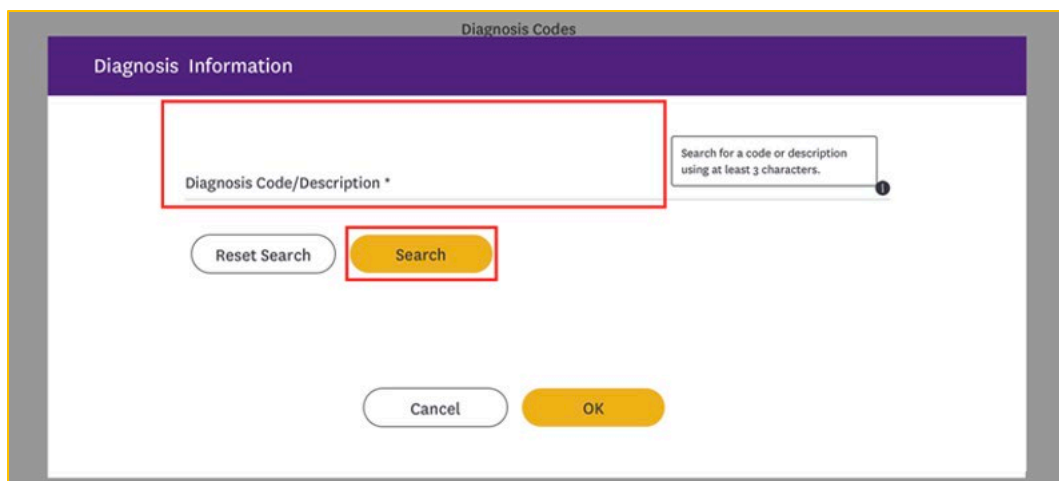| Step 11:	1. Providers matching your search criteria will display. Select the applicable provider from the search results table.
	2. You can use **Filter By** to target the required provider from the search results.
	3. Click **Next.**

Filter By

	Name	Address	Tax ID	NPI	Type	Specialty	In-Network
○	Carter, John	730 Victoria Dr., Brooklyn, NY, 11213	120000897832	1234446986	Allopathic Physician	General Surgery	No
○	Carter, John	23 South Lane, New York, NY, 10128	120000897832	1234446986	Allopathic Physician	General Surgery	Yes

Total Records: 2   < Showing 1 - 2 >

Previous   Next

Cancel

4. Diagnosis Codes

Step 12:	In the **Primary Diagnosis Information** section**,** Click **Diagnosis Code/Description**.

CREATE EMERGENT INPATIENT ADMISSION

Diagnosis Codes

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Please do not use a period while entering a diagnosis code. You can add up to 11 secondary diagnosis codes.

You can click into any diagnosis code to edit it.

⌄ Primary Diagnosis Information

🔍 Diagnosis Code/Description *

⌄ Secondary Diagnosis Codes   Add

🔍 Diagnosis Code/Description

Step 13:	**The Diagnosis Information dialog box displays. Enter the Diagnosis Code/Description and click Search.** **Note: In the Diagnosis code/ Description field, you may search by using at least three characters.**

Diagnosis Codes

Diagnosis Information

Diagnosis Code/Description *   Search for a code or description using at least 3 characters.

Reset Search   Search

Cancel   OK

Step 14:	1. **Diagnosis Codes** and **Code Descriptions** matching the search criteria will display. Select the applicable diagnosis code from the search results. **Note:** You can use **Filter By** to target the required code from the search results. 2. Click **Ok.**

Diagnosis Code/Description

m54

Reset Search   Search

Filter By ⓘ

Diagnosis Code	Code Description
○ M54	Dorsalgia
○ M540	Panniculitis affecting regions of neck and back
○ M5400	Panniculitis affecting regions of neck and back, site unspecified
○ M5401	Panniculitis affecting regions of neck and back, occipito-atlanto-axial region
○ M5402	Panniculitis affecting regions of neck and back, cervical region
○ M5403	Panniculitis affecting regions of neck and back, cervicothoracic region
○ M5404	Panniculitis affecting regions of neck and back, thoracic region
○ M5405	Panniculitis affecting regions of neck and back, thoracolumbar region
○ M5406	Panniculitis affecting regions of neck and back, lumbar region
○ M5407	Panniculitis affecting regions of neck and back, lumbosacral region

Total Records: 37   < Showing 1-10 >

Cancel   OK

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Step 15:	If there are no secondary diagnoses, click **Next**. Use the **Secondary Diagnosis Codes** section following the same steps shown above to search for and add secondary diagnoses. 1. Between diagnoses, click **Add** to enter the next code. **Note:** You can add up to 11 secondary diagnosis codes. 2. Click **Next** to proceed once you add the primary and secondary diagnosis codes. **Note:** Primary diagnosis code is mandatory while secondary diagnosis codes are optional.

CREATE EMERGENT INPATIENT ADMISSION

Diagnosis Codes

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Please do not use a period while entering a diagnosis code. You can add up to 11 secondary diagnosis codes.

You can click into any diagnosis code to edit it.

⌄ Primary Diagnosis Information

🔍 Diagnosis Code/Description *

⌄ Secondary Diagnosis Codes   Add

🔍 Diagnosis Code/Description

[Previous]   [Next]

Step 16:

Click **Delete** to delete the **Secondary Diagnosis Code** if wrong item selected.

Diagnosis Codes

Complete the details below and click Next to continue. All fields with an asterisk * are required.

You can click in to any diagnosis code to edit it. You can add up to 11 secondary diagnosis codes.

∨ **Primary Diagnosis Information**

Q Diagnosis Code/Description *

M54 Dorsalgia

∨ **Secondary Diagnosis Codes 1**   Add | **Delete**

Q Diagnosis Code/Description *

M540 Panniculitis affecting regions of neck and back

∨ **Secondary Diagnosis Codes 2**   Add | **Delete**

5. Service Details

Step 17:	The **Service Details** screen displays. Enter the **Service Type**, **Admission Date**, and **Time**. **Note:** The fields **Place of Service** and **Type of Care** are prepopulated and non-editable.

CREATE EMERGENT INPATIENT ADMISSION

Service Details

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Place of Service
21 – Inpatient Hospital

Service Type *

Type of Care
2 - Emergency

Admission Date *

Time *

☐ Has the member been discharged?

Previous   Next

Step 18:	Select the option from the **Service Type** drop-down.

CREATE EMERGENT INPATIENT ADMISSION

Service Details

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Place of Service
21 – Inpatient Hospital

Service Type *

Type of Care
2 - Emergency

1 - Medical Care
2 - Surgical
49 - Newborn Nursery (Well Baby)
52 - Maternity/Obstetrics
127 - Neonatal Intensive Care

☐ Has the member been discharged?

Previous   Next

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Step 19:

Check the box if the member has already been discharged and enter the other required details.

CREATE EMERGENT INPATIENT ADMISSION

Service Details

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Place of Service
21 – Inpatient Hospital

Service Type *
1 - Medical Care

Type of Care
2 - Emergency

Admission Date *
04/17/2023

Time *
16:04

☑ Has the member been discharged?

Discharge Date *

Time *

Discharge Disposition *

Previous   Next

Step 20:

1. Select the appropriate option from the **Discharge Disposition** drop-down.

☑ Has the member been discharged?

Discharge Date *

Time *

Discharge Disposition *

Discharged to Home, Self-Care
Discharged to Acute Care Hospital
Discharged to Skilled Nursing Facility
Discharged to LTAC
Discharged to Other Facility
Discharged to Home Health Service
Left Against Medical Advice
Not Yet Discharged
Unkown
Patient Deceased
Discharge to Rehab
Discharge to Behavior Health Care
Discharge to Custodial Facility
No three(3) day inpatient hospital stay, technical requirement not met

Previous

Cancel

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Step 21:

1. Click **Next** to proceed.

CREATE EMERGENT INPATIENT ADMISSION

Service Details

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Place of Service
21 – Inpatient Hospital

Service Type*
1 - Medical Care

Type of Care
2 - Emergency

Admission Date*
04/17/2023

Time*
16:04

☑ Has the member been discharged?

Discharge Date*

Time*

Discharge Disposition*

Previous | Next

6. Created By

Step 22:

1. The **Created By** screen displays. Enter the details in the **Name** and **Phone** fields**.**
2. Click **Next.**

CREATE EMERGENT INPATIENT ADMISSION

Created By

Complete the details below and click Next to continue. All fields with an asterisk * are required.

Name*
EH Test Automation 2

Phone*
(555) 444-4333

Previous   Next

7. Review Details

Step 23:

1. The **Review Details** screen displays. You can review the details of all the sections you have completed.
2. Click **Edit** if you need to change any information in the respective section.

CREATE EMERGENT INPATIENT ADMISSION

Review Details

Your Emergent Inpatient Admission is not complete until you click Submit. If you want to make any changes click edit next to the section you want to change.

⚠ **Warning**
If you update any section, you may have to re-enter some of the data that follows.

∨ Member Details   Edit

Member ID	Name	Date of Birth
K1008016301	EDWARDS , CHRISTINE C	03/21/1984

∨ Requesting Provider   Edit

Name	Address	Tax ID	NPI

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8. Add Supporting Documents

Step 24:	The **Add Supporting Documentation** screen displays. To optimize the automated processing of this request, we ask you to add medical records or other supporting documentation at this point in the transaction. 1. Click 🔗 and locate your file. 2. Once uploaded, you will see a "Congratulations!" message indicating the document has been added, and a prompt to add another document. 3. Once you have uploaded all supporting documents (up to five), click **Next**.

CREATE EMERGENT INPATIENT ADMISSION

Add Supporting Documentation

You can attach documents now, or later by going to the Search Preauthorizations section, and searching for the Emergent Inpatient Admission using the Reference ID.

Attach Documents

1. Allowed file types are doc, docx, pdf, xls, ppt, jpg, jpeg, png, bmp, gif, txt
2. File limit of 4 MB for each attachment
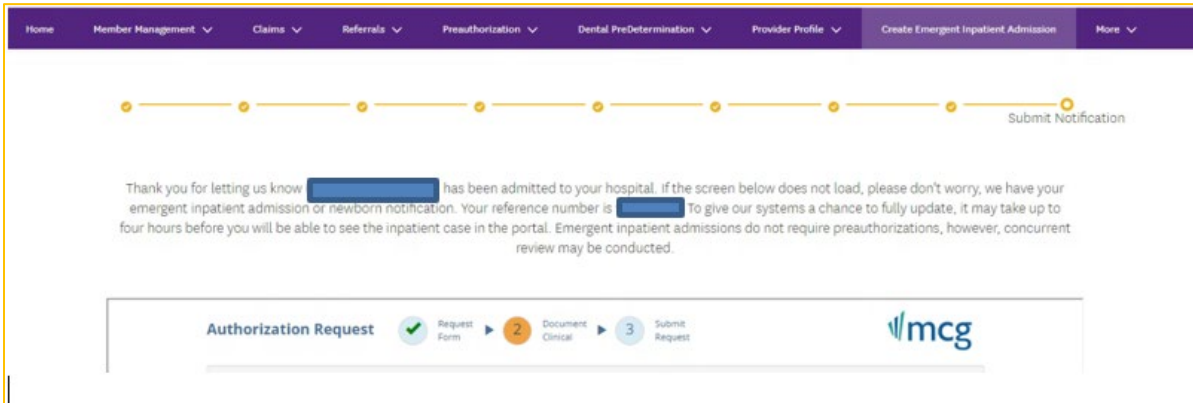3. Maximum 5 attachments

Attachment 🔗   Upload

Next

9. Notification Confirmation

Step 25:	Your notification confirmation will appear at the top of the screen. You will see a reference number that you can use to look up the case in the future.

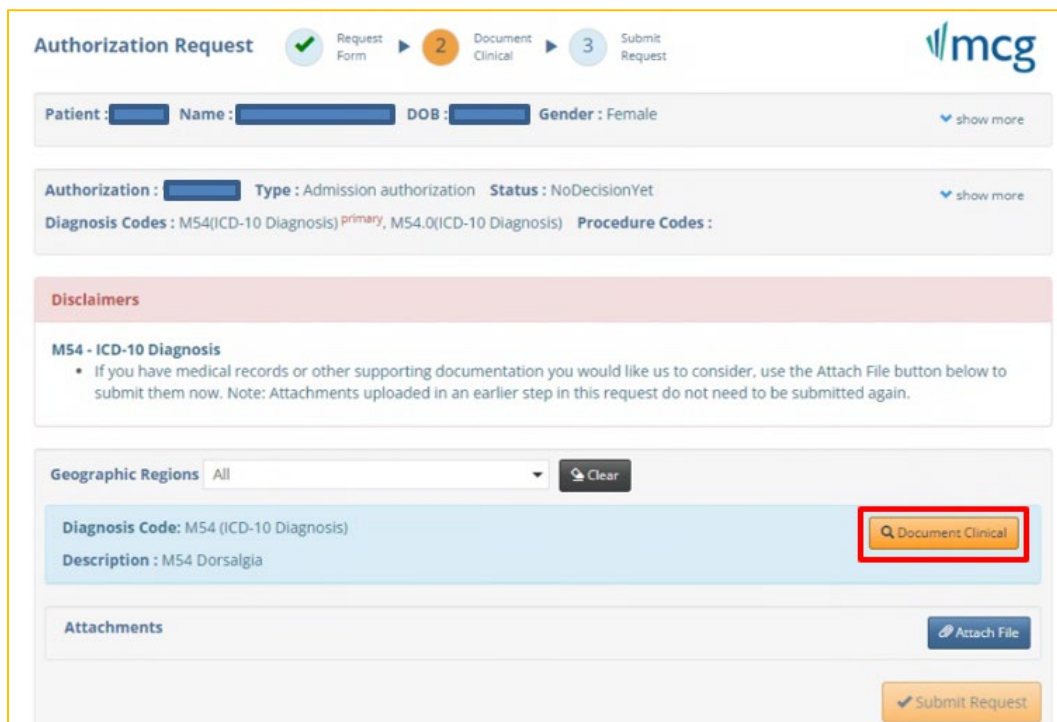## 10. Add Clinical Information For Concurrent Review

Step 26:	Click **Document Clinical**. **Note:** You can click the **show more** to see additional prepopulated information. **Note:** The diagnosis code you previously entered will prepopulate and will determine if additional clinical information is needed. If it is, you will see the **Document Clinical** button. Otherwise, the **Submit Request** button will be active. This example will show how to submit additional clinical information.

Step 27:	In this example, we will look at the diagnosis M54 Dorsalgia where the **Cervical Diskectomy or Microdiskectomy, Foraminotomy, Laminotomy** guideline applies. Click **add** in the **Action** column for the **Guideline Title** that applies. **Note:** If you don't see an applicable guideline or are unsure of which guideline to choose, click **add** in the **Action** column for "**No Guideline Applies**". This will display a notes screen similar to the one shown in **Step 29** below. Enter at least one character and click **Save**. This will then activate the **Submit Request** button.

Diagnosis Code: M54 (ICD-10 Diagnosis)

Description : M54 Dorsalgia

Guideline Title	Product	Code	Action
Musculoskeletal Disease GRG	GRG	MG-MD	add
Neurology GRG	GRG	MG-N	add
Rhizotomy, Percutaneous	ISC	S-1040	add
Back Pain	ISC	M-63	add
Back Pain: Observation Care	ISC	OC-006	add
Cervical Diskectomy or Microdiskectomy, Foraminotomy, Laminotomy	ISC	S-310	add
Cervical Fusion, Anterior	ISC	S-320	add
Cervical Fusion, Posterior	ISC	S-330	add
Cervical Laminectomy	ISC	S-340	add
Lumbar Diskectomy, Foraminotomy, or Laminotomy	ISC	S-810	add
Lumbar Fusion	ISC	S-820	add
Lumbar Laminectomy	ISC	S-830	add
Headaches	ISC	M-185	add
Headaches, Pediatric	ISC	P-185	add
Headaches: Observation Care	ISC	OC-023	add
No Guideline Applies			add

Step 28:	If a guideline is selected, you will be shown criteria that could apply. 1. Click all the boxes that apply to your patient. When selected, you will see a white check mark in a blue box as shown below. 2. If you see this **Add Notes** symbol , it means you can click it to see a pop-up screen where you can add notes. See **Step 32** below. 3. Once all criteria have been selected and notes entered, click the **Save** button.

Geographic Regions All   ◆ Clear

Diagnosis Code: M54 (ICD-10 Diagnosis)

Description : M54 Dorsalgia

S-310 - Cervical Diskectomy or Microdiskectomy, Foraminotomy, Laminotomy - (ISC)

The procedure is/was needed for appropriate care of the patient because of ...
- ☑ Cervical radiculopathy and ...
  - ☑ Patient has significant (eg, impacts activities or sleep) symptoms due to nerve root compression (eg, pain, weakness). ☑
  - ☐ MRI or other neuroimaging finding correlates with clinical signs and symptoms and demonstrates spinal stenosis or nerve root compression (eg, disk abnormality, facet joint hypertrophy). ☑
  - ☐ Surgery appropriate, as indicated by ...
- ☐ Cervical myelopathy and ...
- ☐ Need for procedure as part of decompression procedure for primary or metastatic cervical spine tumors ☑
- ☐ Need for procedure as part of decompression or debridement procedure for cervical spine infection ☑
- ☐ Need for procedure as part of treating cervical spine injury (eg, trauma), including ...

✔ Save   ✖ Cancel

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Step 29: If you have clicked the **Add Notes** symbol ✏, you will see a pop-up box where you can add your own notes. Once the notes are complete, click the **Add** button to attach them to the case.

Indication Note ×

Please provide indication notes ...

250 characters left for notes

[Add] [Cancel]

Step 30: Once the clinical information has been saved, you will return to this screen.

1. You will have the opportunity to attach additional medical records or supporting documentation using the **Attach File** button.

2. When you are done, click the **Submit Request** button.

   Note: Failure to click **Submit Request** will automatically cause the concurrent review to pend. Using the **Submit Request** button may result in completion of the initial concurrent review.

Authorization Request ✔ Request Form ▶ ✔ Document Clinical ▶ ③ Submit Request   ✔mcg

Patient : ▭   Name : ▭   DOB : ▭   Gender : Female   ⌄ show more

Authorization : ▭   Type : Admission authorization   Status : NoDecisionYet   ⌄ show more
Diagnosis Codes : M54(ICD-10 Diagnosis) primary, M54.0(ICD-10 Diagnosis)   Procedure Codes :

Disclaimers

M54 - ICD-10 Diagnosis
- If you have medical records or other supporting documentation you would like us to consider, use the Attach File button below to submit them now. Note: Attachments uploaded in an earlier step in this request do not need to be submitted again.

Geographic Regions All   ▾ 🗑 Clear

✔ **Diagnosis Code:** M54 (ICD-10 Diagnosis)   ⌄ show more
Description : M54 Dorsalgia

Attachments   🔗 Attach File

✔ Submit Request

11. Confirmation

Step 31:

1. The **Concurrent Review Status** screen displays. In some cases, the information submitted will be sufficient to meet the initial concurrent review. Additional information may be needed for extended stay requests and discharge planning. Other cases may pend for concurrent review.

2. To exit, click **Done.**

Concurrent Review Status

Your inpatient admission [____] has been pended for concurrent review. We may reach out to you for additional information. Payment is contingent on the member's continued eligibility and contractual benefit limits. To give our systems a chance to fully update, it may take up to four hours before you will be able to see the inpatient case in the portal.

Done

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