



Carelon Provider Portal

Patrius Radiology Solution Provider Portal Training

March 2023

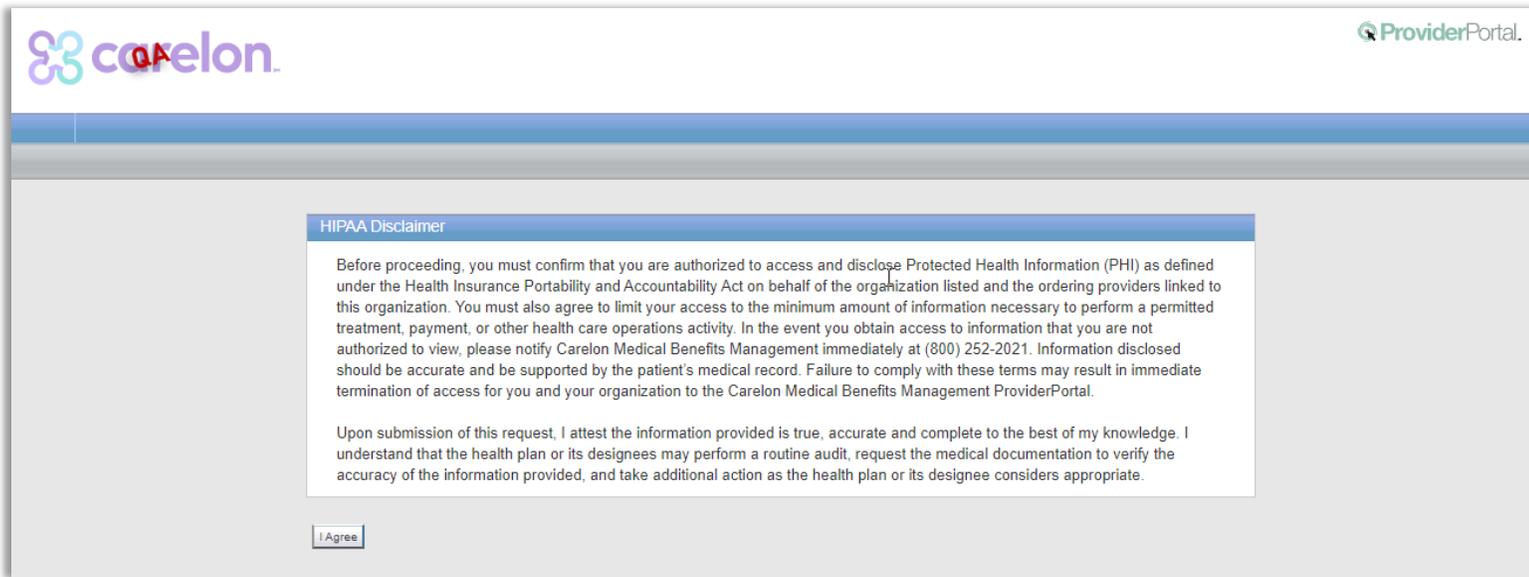


Carelon Provider Portal Radiology Solution Workflow

Note: Carelon maintains the confidentiality of all protected health information. All data displayed is fictional and any resemblance to real persons is purely coincidental.



Provider Portal



After clicking “Go,” a new window opens in the Carelon Provider Portal.

Click “I Agree” to accept the HIPAA Disclaimer.

Carelon Medical Benefits Management, an independent company, is contracted to provide precertification services for PatriusHealth, an independent licensee of the Blue Cross and Blue Shield Association.



Provider Portal

The screenshot shows the Caelon Provider Portal interface. At the top left is the Caelon logo, and at the top right is the ProviderPortal logo. Below the header, there is a blue bar with 'Medicare AUC' on the right. A message states: 'The following information was received from the Health Plan. If any information is incorrect, contact ProviderPortal Support at (800)252-2021'. The form is divided into three sections: 'Member Information', 'Ordering Provider', and 'Date of Service'. The 'Date of Service' section is highlighted with a red box and contains a text input field with '03/01/2023' and a calendar icon. Below this section are 'Cancel Request' and 'Next' buttons, with a red arrow pointing to the 'Next' button.

Summary details are displayed.

Please confirm the date when this service was completed or will be completed.

Click “Next.”



Provider Portal

The screenshot shows the Provider Portal interface. At the top right, the logo "ProviderPortal." is visible. Below it, the text "Medicare AUC" is displayed. A progress indicator shows five steps, with the third step (3) highlighted. A "Hide Details" button is located on the right side. Below this, the "Date of Service" is set to 7/17/2023 and the "Health Plan" is PATRIUS. A "Print" icon is on the right. A modal window titled "Ordering Provider Fax Number" is open in the foreground. It contains the text "Please enter or confirm the physician's fax number below". Below this is a "FAX Number" label and a text input field containing "(999)999-9999". A link "[Why do you need this?](#)" is positioned below the input field. At the bottom of the modal, there are two buttons: "Save" (highlighted with a red box) and "Fax Unavailable".

Enter the fax number to be used when communicating with the ordering provider the outcome of an adverse determination (denial) case.

OR

If a fax number was previously entered for the provider, confirm the number is correct.

Press the "Save" button.



Provider Portal

The screenshot shows a web interface for an 'Order Request' portal. At the top, it says 'Step 1' of a 5-step process. Below that, a message asks the user to verify the list of order requests to avoid duplicates. A form displays member information: Member #, Date of Birth, Date of Service (11/20/2022), and Health Plan (PATRIUS). Below the form is a 'Member History' table with columns for Order ID, Order Status, Date of Service, Exam Description, Ordering Provider, Outcome, Reason, and Summary. The table contains three rows of authorized requests for 'Abdomen - CT' exams. At the bottom right, there is a warning icon and the text 'Multiple Decisions Rendered'.

Order ID	Order Status	Date of Service	Exam Description	Ordering Provider	Outcome	Reason	Summary
[Redacted]	Authorized	11/20/2022	Abdomen - CT	[Redacted]	Authorized	Criteria Met	View
[Redacted]	Authorized	11/18/2022	Abdomen - CT	[Redacted]	Authorized	Criteria Met	View
[Redacted]	Authorized	11/15/2022	Abdomen - CT	[Redacted]	Authorized	Criteria Met	View

If the patient selected has any precertification request history, the initial screen you land on will display a list of the precertification history.

From this list, you can view details of any precertification request submitted by any ordering physician.



Provider Portal

The screenshot shows the 'Order Request' form in the Provider Portal. At the top, there is a 'Member Details' section with fields for Member ID, Date of Birth, Date of Service, Health Plan, and Ordering Provider. Below this is the 'ENTER EXAMS' section, which includes a 'CPT CODE' search field, a dropdown menu for 'EXAM', and a dropdown menu for 'DESCRIPTION'. An 'Add Exam' button is located at the bottom of this section. To the right, the 'EXAMS REQUESTED' section displays a list of exams, with one exam selected: 'Brain (Includes IACs, Pituitary) - MRI with contrast'. This exam has a 'Withdraw Request' button and a 'Next' button. A 'Delete Exam' link is also visible next to the exam name.

You can search for an exam or procedure by CPT code.

If you prefer, you may select the exam name and description from the drop-down menu.

Choose “Add Exam” to begin the review process.



Provider Portal

Order Request

Member ID: [Redacted] Date of Birth: [Redacted] Date of Service: [Redacted] Health Plan: [Redacted] Ordering Provider: SHARPE, BRYAN

ENTER EXAMS

CPT CODE
Enter here

EXAM
Select

DESCRIPTION
Select

Add Exam Clear

EXAMS REQUESTED

Multiple exams can be entered at this time. Once you finished entering your exams, click Add to enter crucial information.

Brain (Includes IACs, Pituitary) - MRI with contrast [Delete Exam](#)

Angiography,Head - MRA with contrast [Delete Exam](#)

Post

If necessary, you can add other exams for review.

Simply search again by CPT code or select the exam name and description from the drop-down menu.

Choose “Add Exam.”



Provider Portal

SERVICING PROVIDER FACILITY INFORMATION

*To ensure the application of the correct coverage criteria, please select the state **where the service will be performed.***

STATE

Select ▼

- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi**
- Missouri
- Nevada

Next

You must select the state where the service will be performed.

Click “Next” to continue.



Provider Portal

Order Request

Member ID: [Redacted] Date of Service: [Redacted]
Date of Birth: [Redacted] Health Plan: [Redacted]
Ordering Provider: [Redacted]

EXAMS REQUESTED (2)

Brain (Includes IACs, Pituitary) - MRI

Angiography/Head - MRA

ENTER DIAGNOSIS

Please provide the diagnosis code or description that justifies the request for this exam.

head

- R51.9 Headache, unspecified (Headache)
- G44.1 Vascular headache, not elsewhere classified (Headaches)
- O97.1 Other reaction to spinal and lumbar puncture (Headache after LP)
- G43.909 Migraine, unspecified, not intractable, without status migrainosus (Sick headache)
- F43.41 Pain disorder exclusively related to psychological factors (Stress headache)
- G43.80 Ophthalmoplegic migraine, not intractable (Ocular headache)
- G44.30 Other headache syndrome (Allergic headache)
- R51.0 Headache with orthostatic component, not elsewhere classified (Postural headache)
- G44.009 Cluster headache syndrome, unspecified, not intractable (Cluster headache)
- G44.209 Tension-type headache, unspecified, not intractable (Tension headache)

Withdraw Exam

Choose the exam you wish to submit for review by clicking on it.

Search for the patient's diagnosis by either entering the description (at least three characters) or diagnostic (ICD) code.

Make your selection.



Provider Portal

EXAMS REQUESTED (2)

Brain (Includes IACs, Pituitary) - MRI
ICD Code / Description: R51.9 Headache, unspecified (Headache)
Angiography,Head - MRA

ENTER MEMBER'S CLINICAL INFORMATION
Please answer the following questions to provide as much information as possible for clinical review.

CLINICAL SCENARIO
Headache

CLINICAL DETAILS

*Which types of headache patterns are consistent with this patient's symptoms?

- Migraine
- Tension-type headache
- Chronic daily headache
- Medication overuse headache
- Unspecified or undifferentiated
- None of these apply
- Unknown

*Which of the following best describes the time frame of the headache?

- New or acute headache
- Recurrent, persistent, or chronic headache
- Unknown

*Select all that apply. (Select all that apply)

- Headache is brought on by exertion or Valsalva
- Headache is associated with intracranial infection
- Headache is associated with acute trauma
- Positional or postural headache (includes morning headache)
- Established personal history of cancer or immunodeficiency
- Abnormal neurologic exam in between or during headache episodes

EDIT CLINICAL DETAILS
Please answer the following questions to provide as much information as possible for clinical review.

CLINICAL SCENARIO
Headache

*Which of the following best describes the time frame of the headache?

- New or acute headache
- Recurrent, persistent, or chronic headache
- Unknown

*Select all that apply. (Select all that apply)

- Headache is brought on by exertion or Valsalva
- Headache is associated with intracranial infection
- Headache is associated with acute trauma
- Positional or postural headache (includes morning headache)
- Established personal history of cancer or immunodeficiency
- Abnormal neurologic exam in between or during headache episodes

ADDITIONAL INFORMATION

*FIRST NAME: TESTING
*LAST NAME: TE
*PHONE NUMBER: [REDACTED] EXT: [REDACTED]
*FAX NUMBER: [REDACTED]

If you have entered "other", "unknown", or "none of these apply" to any of the clinical questions, provide the additional clinical details supporting this request below. Also, provide any additional pertinent information to support a review of this exam. (optional)

Add clinical info can be entered here

(Maximum 600 characters) 561 characters left

Continue

Once the diagnosis code has been entered, the user will be prompted to enter the member's clinical information through a series of questions.

An Additional Information free-text box may appear.

Click "Next" to continue.



Provider Portal

EXAM SUMMARY

! Your request for Brain (Includes IACs, Pituitary) - MRI does not meet medical necessity criteria based on the information provided. Please review the Clinical Criteria information specific to this exam below.

Step 1 Exam
Brain (Includes IACs, Pituitary) - MRI

CLINICAL CRITERIA

The criteria below may help you determine if this exam is clinically appropriate.

Advanced imaging for evaluation of headache is indicated in certain clinical scenarios.

Please confirm your information is accurate:

Step 2 Clinical Scenario
Headache Edit
ICD Code / Description
R69 Illness, unspecified

CLINICAL DETAILS Edit

Which types of headache patterns are consistent with this patient's symptoms? Unknown

ADDITIONAL INFORMATION

ADDL CLINICAL ENTERED HERE

If you have answered "other" or "unknown" or "none of these apply" to any question and did not enter additional clinical information, it may affect the outcome of this case.
You have the following options:

Step 3

- Review the outcome of this request with the ordering provider to obtain further information/guidance.
- If you need to review additional information with the ordering provider you can save by exiting this request. It can be accessed in View Order History.
- Edit Clinical Criteria information to ensure required responses are accurate and complete.
- The ordering provider can call 866-789-6254 for a peer-to-peer discussion with a Carelon physician reviewer.
- Withdraw this Request.

Withdraw Exam Withdraw Request Continue

If the exam doesn't meet medical necessity, the user will be presented with this information on the Exam Summary screen for each exam submitted.

The user will be given options to "Edit," "Withdraw Exam" or "Withdraw Request." The user can select "Continue" to complete the submittal process.

The ordering provider can call Carelon for a peer-to-peer discussion once the request has been submitted for review.



Provider Portal

The screenshot displays the 'Order Request' form in the Provider Portal. At the top, there is a 'Step' indicator with five numbered circles, where the fourth circle is highlighted. Below this, a 'Hide Details' link is visible. The patient information section includes fields for Member ID, Date of Birth, Date of Service, Health Plan, and Ordering Provider (with 'DN' entered). The 'EXAM INFORMATION' section lists two exams: 'Brain (Includes IACs, Pituitary) - MRI with contrast' and 'Angiography,Head - MRA with contrast'. Each exam entry has 'Review Exam' and 'Withdraw Exam' links. At the bottom left is a 'Withdraw Request' button, and at the bottom right is a 'Next' button. A small note at the bottom center reads: 'If you've added all desired exams, click Next to Continue.'

After all exams have been reviewed, the Exam Information section allows the user to view the list of requested exams.

The user will be given an option to “Withdraw Exam,” “Withdraw Request” or “Add Exam.”

Select “Next” to continue.



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Order Request Medicare AUC

Submit This Request Withdraw Request Save as PDF

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Order Request Preview

Request Status: **Has Not Been Submitted** Health Plan: Scheduled Date of Service: 03/01/2023

Member Information: Ordering Provider: Servicing Provider:

Phone:
Fax:
NPI:
TIN: A12345214

The information below was obtained from the Ordering Provider and has not been independently verified by Carelon Medical Benefits Management. Carelon assumes no responsibility for the accuracy of this information or for its consistency with the patient's medical record.
Please call 866-789-6254 for all Urgent Requests.

REQUESTED EXAMS

EXAM	REQUEST STATUS	REASON	ACTION
Brain (Includes IACs, Pituitary) - MRI Unknown			Review Exam Withdraw Exam

The Order Request Preview section allows users to confirm the requested items prior to submission.

Select the “Submit This Request” button to submit the order request for Carelon’s review.



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Order Request Preview Medicare AUC

! If the ordering provider would like to discuss this case with a Carelon Medical Benefits Management physician reviewer, contact Carelon.

Withdraw Request Return to Search Results Save as PDF Print

This case has at least one exam with Carelon Feedback. You may come back later to View Order History and edit any exam(s) that remain open in a case.

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Order Request Summary

Health Plan: [Redacted] Scheduled Date of Service: 3/1/2023

Order ID: [Redacted] **!** In Progress

Anticipated Determination Date: 02/28/2023

This order is not a guarantee of payment except when required by applicable law. When applicable law allows, payment is subject to the member's active enrollment, benefit limitation and other terms of the member's contract at the time of services provided.

If the request requires additional review, the status will indicate “In Progress.”

The ordering provider can call Carelon for a peer-to-peer discussion.



Provider Portal

Order Request Summary

Health Plan: [Redacted] Scheduled Date of Service: 3/1/2023

Order ID: [Redacted] **Non-Authorized**

Member Information: [Redacted] Ordering Provider: [Redacted] Servicing Provider: [Redacted]

Phone: [Redacted]
Fax: [Redacted]
NPI: [Redacted]
TIN: A12345214

The information below was obtained from the Ordering Provider and has not been independently verified by Carelon Medical Benefits Management. Carelon assumes no responsibility for the accuracy of this information or for its consistency with the patient's medical record.

Please call 866-789-6254 for all Urgent Requests.

REQUESTED EXAMS

EXAM	REQUEST STATUS	REASON	ACTION
Brain (Includes IACs, Pituitary) - MRI Unknown	Non-Authorized	Criteria Not Met	Review Exam Withdraw Exam

If the request does not meet medical necessity after additional review, the status will indicate “Non-Authorized.”

Denial letters will be sent to the member and ordering physician.



Provider Portal

The screenshot displays the 'Order Request Summary' page in the Caredon Provider Portal. At the top, there is a navigation bar with 'Order Request' and 'Medicare AUG'. A progress indicator shows 'Step 1' of 5. A yellow banner contains a message: 'If the ordering provider would like to discuss this case with a Caredon Medical Benefits Management physician reviewer, contact Caredon.' Below this are buttons for 'Withdraw Request', 'Return to Search Results', 'Save as PDF', and 'Print'. The main content area features the Caredon logo and 'ProviderPortal.' branding. A green box highlights the 'Order ID' (blurred) and 'Approval Valid Through: 02/24/2023 - 04/24/2023' with a green checkmark and the word 'Authorized'. Below this, there are fields for 'Health Plan', 'Scheduled Date of Service: 3/1/2023', 'Member Information', 'Ordering Provider', and 'Servicing Provider', all of which are blurred. A disclaimer states: 'This order is not a guarantee of payment except when required by applicable law. When applicable law allows, payment is subject to the member's active enrollment, benefit limitation and other terms of the member's contract at the time of services provided.' A note at the bottom of the main content area says: 'The information below was obtained from the Ordering Provider and has not been independently verified by Caredon Medical Benefits Management. Caredon assumes no responsibility for the accuracy of this information or for its consistency with the patient's medical record. Please call 866-789-6254 for all Urgent Requests.' Below the main content is a table titled 'REQUESTED EXAMS' with columns for EXAM, REQUEST STATUS, REASON, and ACTION. The table contains one row: 'Brain (Includes IACs, Pituitary) - MRI' with status 'Authorized' and reason 'Criteria Met'. Below the table is a pop-up window titled 'CPT GROUP DETAILS' showing a table with columns 'CPT GROUP', 'CPT DESCRIPTION', and 'CPT GROUP DESCRIPTION'. It lists three CPT codes: 70551 (MRI of brain), 70552 (Contrast MRI of brain), and 70553 (MRI of brain and further sequences), all with the description 'Brain (Includes IACs, Pituitary) - MRI'. The pop-up also indicates 'Total Records Found : 3' and a small disclaimer at the bottom: 'The issuance of an Order ID is not a guarantee of benefit; payment is subject to the member's eligibility and plan provisions in effect at the time of service.'

If the request meets medical necessity at intake or after additional review, the status will indicate “Authorized” with the valid timeframe.

Approval letters will be sent to the member and ordering physician.

The applicable CPT codes are listed below the requested exams.

