

RELEASE NOTES v1.21.1

DASHBOARD UPDATES

Preauthorization Processing Icons Updated

- A newly revised library of processing icons has been updated in the AuthNet processing portal for 2021 to streamline iconography for user experience and incorporate visual messaging on orders being processed with any automated connections via Auggie.
- A copy of the updated [Icon Legend](#) can be found in the Knowledge Center.

Submission Guidelines & Earliest Schedule Date

- This inclusion is an effort to make clients aware at the earliest possible juncture if a procedure meets AuthNet's submission guidelines based on a specific schedule date.
- Published to the top right border of the Dashboard display, the ticker will show the Earliest Possible Schedule Date for a NEW/MODIFIED/UPDATED order that meets submission guidelines for AuthNet to pick up, based on today's date.
- The ticker will also roll over at 3 PM EST each day, regardless of user's timezone, based on AuthNet submission guidelines

ICD10 & CPT Visibility in Dashboard View

- CPT Codes associated with specific orders now viewable from the Dashboard via hover/mouseover on the AuthNet ID.

ICD10 & CPT Visibility in Dashboard Export Report

- ICD10 & CPT Codes associated with specific orders now included in the Dashboard Export report.

AuthNet Support Ticketing Modification

- A fix has been applied to the ticket module to default "Authorization Inquiry" as the pre-selected option.
- The portal will automatically pull in an AuthNet ID if you submit a ticket from within an authorization or if you have an auth checked in the Dashboard. Users also have the ability to enter the AuthNet ID themselves in the Notes/Details field if needed.



AuthNet Knowledge Center Direct Link is Live

- Seated next to the Support Button at the top of the Dashboard, the [AuthNet Knowledge Center](#) button is a direct hyperlink to the company's client education portal, hosted on the AuthNet website.
 - Grants users immediate access to user manuals and training materials, how-to's, portal release notes, important organizations documents and more.
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PATIENT RECORD UPDATES

Insurance Member ID Now Required Field

- Member ID is now a required field for all payer entries to a patient's record in order to allow for enhanced processing automation.
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AUTHORIZATION SCREEN & PROCESSING UPDATES

Authorization Status Updates for 2021

- A copy of the [Authorization Processing Status Glossary](#) can be found in the Knowledge Center. Additional information is below.

Client Action Required (CAR) Statuses

- All statuses indicating some measure of client action needs to be taken have been assigned a "CAR" prefix to make them more readily identifiable to clients by topic, and to aid in the ongoing implementation of automation capabilities for processing.

NOTE: Clients MUST move authorizations to CLIENT ACTION COMPLETED or UPDATED status when needed action has been finished in order for AuthNet to resume processing

- CAR: Clinical Survey Available
- CAR: Medical Records Needed
- CAR: Peer To Peer Needed
- CAR: Response Needed

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Optional Client-Use Statuses (Post-Authnet Processing)

- In an effort to streamline the selection and utilization of post-processing communication inside the portal all statuses available to be selected by clients for INTERNAL-ONLY communication, AFTER AUTHNET HAS ALREADY COMPLETED THE ORDER, have been assigned a “PPS” prefix to denote them as “post-processing” and “for client use only”
- Clients may use these statuses as needed: to communicate internally/amongst their own staff, if any post-processing action needs to be taken by the users in the portal, for scheduling or patient communication purposes

NOTE: These are Non-AuthNet statuses that are NOT monitored, reported or used by AuthNet

- **PPS: Action Required** *(used to request action/response from internal staff on an order, post-AuthNet processing -- this should be used in place of Client Action Required by Users, which has been disabled for user selection in the auth screen moving ahead)*
- **PPS: Cancelled** *(cancels an order/date of service after post-AuthNet processing if needed)*
- **PPS: Completed** *(indicates that a patient is scheduled/confirmed or any internal post-processing work is done)*
- **PPS: Not Scheduled** *(indicates that a patient has declined to schedule after AuthNet has already processed)*
- **PPS: Patient Call Req** *(indicates a patient call is needed for scheduling or info update)*
- **PPS: Send to Scheduling** *(used to close/satisfy a PPS: Action Required and send back to scheduling/creator)*

Location Display & Selection Updates

- Previously, Location was a simple selection tool by Location Name via dropdown. This has been upgraded to show a list of all available locations by Name, Address, Associated NPI and other criteria, for more accurate information from which to choose.
 - For users with Admin privileges only, these locations can be opened and edited on the fly from within the authorization screen, and will reflect the update database-wide.

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Rework Authorizations

- The Covid10 pandemic has resulted in large volumes of authorization orders over the last year either being greatly delayed or ultimately rescheduled.
- Orders with an original Date of Service older than 90 days past require that a New order be entered to the portal for rework. In an effort to streamline this process, AuthNet is introducing the Rework functionality, where original can essentially be duplicated or cloned, to create a New request for current processing.
 - Users with Admin privileges now have the rights to create Rework orders in the Client Processing Portal, by clicking in the small checkbox to the left of the Auth ID in the portal dashboard, and then clicking on the Green Clone button that will appear in the top left corner of the Dashboard list.
 - When creating a Rework Order, the new order will automatically be submitted for eligibility & benefit reverification.

Medicare Exceptional Cases for Prior Authorization

- To help ensure accuracy on these cases as required by Medicare, AuthNet has updated rules in our processing portal for about 40 CPT/HCPCS codes in HOPD settings, to require Prior Authorization if the request includes one of these procedures. Medicare only requires Prior Authorization for these services if it is performed in **Hospital Outpatient Department**.

