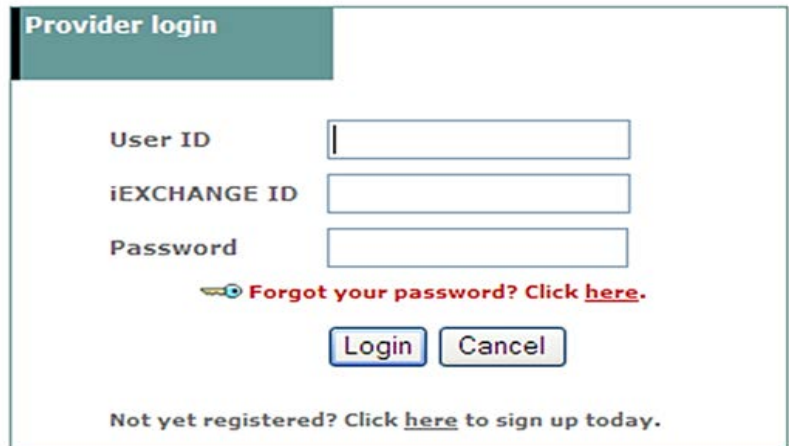


# Extending an Outpatient Preauthorization Request

The iEXCHANGE Web tool supports direct submissions and provides online approval of benefits for preauthorization requests. Listed below are the steps for requesting an extension on an outpatient request to Blue Cross and Blue Shield of New Mexico (BCBSNM). Extension requests should be requested prior to the expiration of the original request. iEXCHANGE is available 24 hours a day, 7 days a week -- with the exception of every third Sunday of the month when the system will be unavailable from 10 a.m. to 2 p.m. (MT). If you are an out-of-area provider, please go to step 2. For assistance with iEXCHANGE access, please reference the Pre-Service Review tip sheet for BCBSNM Members.

## Direct Access (Available to BCBSNM contracted providers only)

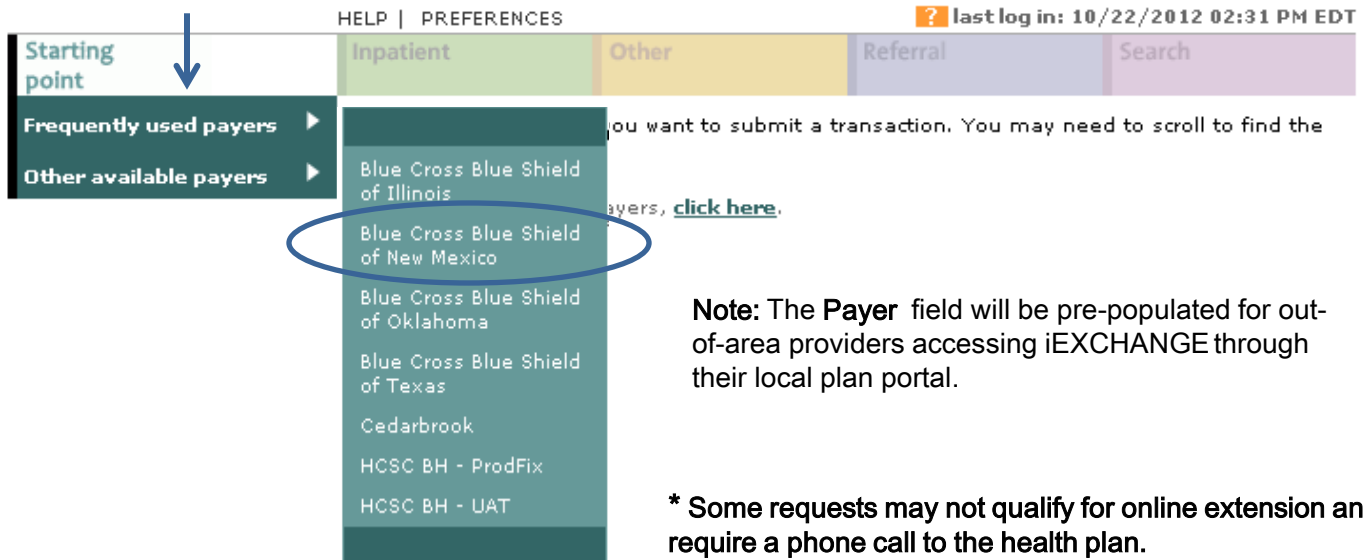
- **User ID** – Each user will be assigned a unique User ID by their organization’s iEXCHANGE Administrator.
- **iEXCHANGE ID** – A unique number BCBSNM assigns to provider organizations registered with iEXCHANGE.
- **Password** – New users are supplied a temporary password by their iEXCHANGE Administrator.



\* For Single Sign-On (SSO) access for local contracted providers, please reference the Pre-Service Review tip sheet for Out-of-area Members.

## Submitting an Extension Request

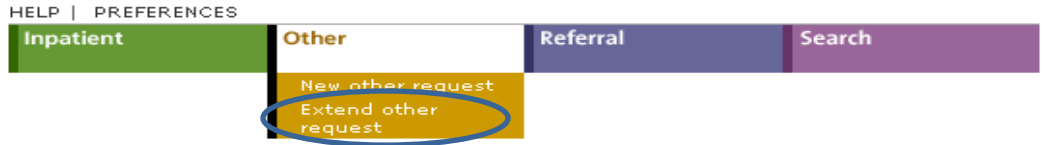
1. After logging into iEXCHANGE, users can access *Frequently used payers* from the **Starting point** menu. From the payer list, select Blue Cross Blue Shield of New Mexico. This will activate the iEXCHANGE toolbar.



**Note:** The **Payer** field will be pre-populated for out-of-area providers accessing iEXCHANGE through their local plan portal.

\* Some requests may not qualify for online extension and require a phone call to the health plan.

- After clicking the *Other* tab, select *Extend other request* to begin your request.



**Other instructions**  
 Use this page to select the other transaction you wish to perform. Depending on the payer you have selected, you can choose to submit a new other request, other request extension, other clinical review, new other behavioral health request, other behavioral health request extension, or prior auth request.

**New other request**  
 Click the **New other request** link, above. A blank Other request entry page appears. You can add a member ID and all request information for this member.

**Extend other request**  
 Click the **Extend other request** link, above. You will first search for the other treatment you wish to extend.

- Out-of-area providers only** – If multiple providers have been identified, you will be prompted to select the submitting provider in order to initiate your extension request. If not, go to step 4.

**Provider Selection**  
 Multiple providers have been identified. In order to enter or search for a treatment request, the submitting provider must be identified. Please select a provider from the list below. If you are unable to find the provider in the list, please indicate as directed below and contact the member's home plan for further assistance.

**Note:** The MCO ID selected for the initial request must be retained for extension and search requests.

	Name	MCO ID	NPI	Address	Specialty	Phone
<input type="button" value="Select"/>	Providence St Mary Medical Center	X430000000074966401	1386895886	401 W Poplar St Walla Walla WA 99362-2846	General Acute Care Hospital	(509) 525-3320
<input type="button" value="Select"/>	Providence St Mary Medical Ctr	X93200006714804201	1386895886	401 W Poplar St Walla Walla WA 99362-2846	General Acute Care Hospital	(509) 525-3320
<input type="button" value="Select"/>	Providence St Mary Medical Ctr	X93200006714804101	1386895886	401 W Poplar St Walla Walla WA 99362-2846	General Acute Care Hospital	(509) 525-3320

4. From the **Treatment search** screen, select **Request ID** as the **Search type**.

Enter the Request ID for the request you want to extend. Choose **All providers** from the **Authorized provider(s)** drop-down list and click **Submit search**.

### Treatment search

Use this page to search for existing inpatient requests, other requests and/or referral requests for a member(s) associated with an authorized provider in your group. This association may include submitting providers, servicing providers, facility providers, attending providers and/or the member's PCP.

Search type:

---

Request ID:

Authorized provider(s):

Select one, multiple, or all authorized providers in the list. The providers in the list are providers in your group who have been approved by the payer you have selected for use in treatment search.

Name	MCO ID	NPI ID	Additional info	Remove
All providers				X

5. From the **Treatment search details** screen, click the **Extend** link to begin your extension request.

### Treatment search details

This page lists the treatment you selected including the request ID, member data, and all services. When applicable and if supported by the payer, additional functionality is available under Request actions and within the Summary table. Click **Request actions** to access the following: **View patient clinical summary**, **View clinical documents**, **View or add to notes**, **Attach new file**, **Enter discharge date and disposition** for inpatient request, **Edit admit date** for inpatient request, or **Add services** to other request. Links available in the Summary table are: **Extend**, **Clinical review**, and **Questionnaire**. Click the **New search** button, to search for treatments using different search criteria.

Request ID - **12172AAAAT** Request actions ▼

#### Summary

LOS start/end date	Days	Status	Extend
06/20/2012 - 06/23/2012	3	APPROVED	Extend

#### Inpatient request information

Member: **Doe, Jane**

6. Scroll down on the **Other request extension entry** screen to view the information entered on the original preauthorization request.

### Other request extension entry

Use this page to extend an other request. Once you enter the appropriate information click **Next step**. iEXCHANGE evaluates your other request extension and displays the Other request extension preview page.

#### Service being extended

Member	Jane Doe	Member ID	AAA009999997
Procedure	S9451		
Start date	06/20/2012	End date	07/30/2012
Place of service			

[View request details](#)

7. Enter the requested information in the required fields:  
*Extension primary diagnosis, Additional requested units, Extension start date and Extension end date.*

**Submitting provider**

[Submitting provider summary](#)

**Extension primary diagnosis**

Enter Diagnosis code or select one from the list

**Secondary diagnosis (optional)**

**Secondary diagnosis (optional)**

**Additional requested units**

**Extension start date**  /  /  (mm/dd/yyyy)

**Extension end date**  /  /  (mm/dd/yyyy)

#### Additional notes (optional)

iEXCHANGE Notes **Note:** Contact Name, Phone and Email will pre-populate for an out-of-area provider

8. Users also have the option to add additional service lines and notes to their extension request. Once all necessary fields have been completed, select **Next step** to move to the **Other request preview** screen.

9. Scroll down on the **Other request extension preview** screen to review the entered information for accuracy. If the information is correct, click **Submit**.

### Other request extension preview

Review your other request extension information here. If everything is correct, click the **Submit** button to save your extension and open the Other request extension confirmation page. If you need to make any changes, scroll down to the bottom of the page and click **Edit** to make the necessary modifications.

The status of this request was current when you clicked **Next step**. However, the status may change when you click **Submit** if eligibility or other data changed in the interim. The request status will be assigned when you click **Submit**.

#### Summary

Service	Code	Start/end date	Units	Projected status
1	S9451	06/30/2012 - 07/30/2012	8	Approved
		07/30/2012 - 08/30/2012	4	Approved

**Note:** This shows a *projected status* for this request upon submission.

10. The **Other request extension confirmation** page will display the assigned **Request ID** and the status of your request.

### Other request extension confirmation

This page contains other request extension information including the request ID and status (authorized or pend), the member's name and ID, and the extended procedures. The procedure information includes the procedure description, units, and the status of the other request extension.

When you clicked the **Submit** button, iEXCHANGE re-evaluated the data that appeared in the Preview. The other request extension status may have changed if eligibility or other data changed in the interim.

Request ID: **12171AAAAW**

#### Summary

Service	Code	Start/end date	Units	Status
1	S9451	06/30/2012 - 07/30/2012	8	Approved
		07/30/2012 - 08/30/2012	4	Approved

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Please note that verification of eligibility and benefits information, and/or the fact that any pre-service review has been conducted, is not a guarantee of payment. Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility and the terms of the member's certificate of coverage applicable on the date services were rendered.