

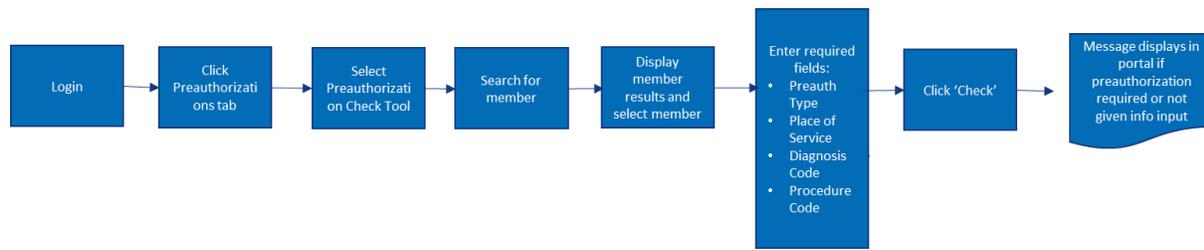
# Preauthorization Check Tool

Quick Reference Guide (QRG)



ConnectiCare

This Quick Reference Guide (QRG) will provide an overview of the Preauthorization Check Tool on the Provider Portal.



A Preauthorization Check will tell you if the member requires a preauthorization for the selected Diagnosis Code and Procedure Code BEFORE creating a preauthorization.

Let us look at the steps in detail for the Preauthorization Check Tool process.

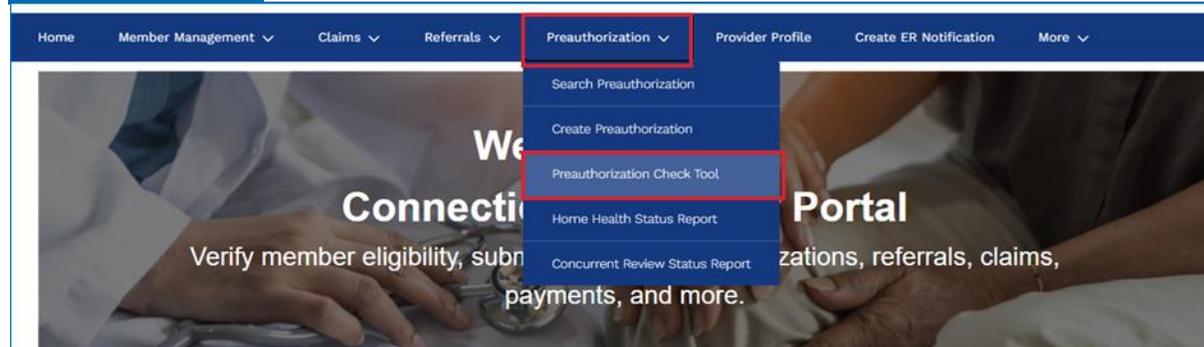
**Purpose: Check if a Preauthorization is required for a member for the selected Diagnosis and Procedure Code.**



**Step 1:**

1. From the **ConnectiCare Home** screen, select the **Preauthorization** tab.
2. From the **Preauthorization** drop-down menu, select **Preauthorization Check Tool**.

**Note:** You can also access the Preauthorization Check Tool from the **Search Preauthorization page**.





**Step 2:**

The Preauthorization Check Tool screen displays.

1. In the **Search By** field, select Member Name or Member ID from the drop-down menu.

**Note:** For this example, we will use **Member ID**.

**Preauthorization Check Tool**

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.

Emergency services do not require a preauthorization.

Search By \*  
Member ID

Member Name

Member ID



**Step 3:**

1. Select **Member ID** from the drop-down menu in the **Search By** field.
2. Enter the **Member ID**.
3. Click **Search**.

**Preauthorization Check Tool**

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.

Emergency services do not require a preauthorization.

Search By \*  
Member ID

Member ID \*



### Step 4:

- The search results display. Select the required member.  
**Note:** You can use **Filter By** to narrow down the search results.

Filter By

| Member ID                                    | Member Name | Coverage Start Date | Coverage End Date | Status   | Date of Birth | Gender | Coverage Type | Product Type |
|--|-------------|---------------------|-------------------|----------|---------------|--------|---------------|--------------|
| <input checked="" type="radio"/> K1000124801 | Davis, John | 11/01/2020          | 12/31/9999        | Active   | 02/07/1987    | Female | Medical       | HMO          |
| <input type="radio"/> K1000124801            | Davis, John | 11/01/2019          | 10/31/2020        | Inactive | 02/07/1987    | Female | Medical       | HMO          |

Total Records: 2 < Showing 1 - 2 >

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Preauthorization Type \*  Place of Service \*

Q Diagnosis Code

Q Procedure Code \*



### Step 5:

- From the Preauthorization Type drop-down menu, select **Inpatient** or **Outpatient**.

| Member ID                                    | Member Name | Coverage Start Date | Coverage End Date | Status   | Date of Birth | Gender | Coverage Type | Product Type |
|--|-------------|---------------------|-------------------|----------|---------------|--------|---------------|--------------|
| <input checked="" type="radio"/> K1000124801 | Davis, John | 11/01/2020          | 12/31/9999        | Active   | 02/07/1987    | Female | Medical       | HMO          |
| <input type="radio"/> K1000124801            | Davis, John | 11/01/2019          | 10/31/2020        | Inactive | 02/07/1987    | Female | Medical       | HMO          |

Total Records: 2 < Showing 1 - 2 >

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Preauthorization Type \*  Place of Service \*

Q Procedure Code \*



### Step 6:

1. Select the appropriate option from the **Place of Service** drop-down.  
**Note:** The options will vary depending on whether you have selected Inpatient or Outpatient in the **Preauthorization Type** drop-down.

| Member ID                                    | Member Name | Coverage Start Date | Coverage End Date | Status   | Date of Birth | Gender | Coverage Type | Product Type |
|--|-------------|---------------------|-------------------|----------|---------------|--------|---------------|--------------|
| <input checked="" type="radio"/> K1000124801 | Davis, John | 11/01/2020          | 12/31/9999        | Active   | 02/07/1987    | Female | Medical       | HMO          |
| <input type="radio"/> K1000124801            | Davis, John | 11/01/2019          | 10/31/2020        | Inactive | 02/07/1987    | Female | Medical       | HMO          |

Total Records: 2 < Showing 1 - 2 >

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Preauthorization Type \*  
 Inpatient v

Place of Service \* v

21 - Inpatient Hospital

31 - Skilled Nursing Facility

34 - Hospice

61 - Comprehensive Inpatient Rehabilitation Facility

Q Diagnosis Code \*

Q Procedure Code \*



### Step 7:

1. Click **Diagnosis Code**.  
**Note:** Diagnosis Code is optional.

| Member ID                                    | Member Name | Coverage Start Date | Coverage End Date | Status   | Date of Birth | Gender | Coverage Type | Product Type |
|--|-------------|---------------------|-------------------|----------|---------------|--------|---------------|--------------|
| <input checked="" type="radio"/> K1000124801 | Davis, John | 11/01/2020          | 12/31/9999        | Active   | 02/07/1987    | Female | Medical       | HMO          |
| <input type="radio"/> K1000124801            | Davis, John | 11/01/2019          | 10/31/2020        | Inactive | 02/07/1987    | Female | Medical       | HMO          |

Total Records: 2 < Showing 1 - 2 >

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Preauthorization Type \*  
 Inpatient v

Place of Service \*  
 21 - Inpatient Hospital v

Q Diagnosis Code

Q Procedure Code \*



### Step 8:

The **Diagnosis Information** dialog box displays.

1. In the **Diagnosis Code/Description** field, enter a few characters of the required Diagnosis Code or Description.
2. Click **Search**.  
**Note:** You can use **Filter By** to narrow down the search results.
3. Select the applicable Diagnosis Code from the search results.
4. Click **OK**.

**Preauthorization Check Tool**

**Diagnosis Information**

Diagnosis Code/Description \*  
 A04

Reset Search
Search

Filter By

| Diagnosis Code                       | Code Description                             |
|--------------------------------------|--|
| <input checked="" type="radio"/> A04 | Other bacterial intestinal infections        |
| <input type="radio"/> A040           | Enteropathogenic Escherichia coli infection  |
| <input type="radio"/> A041           | Enterotoxigenic Escherichia coli infection   |
| <input type="radio"/> A042           | Enteroinvasive Escherichia coli infection    |
| <input type="radio"/> A043           | Enterohemorrhagic Escherichia coli infection |



### Step 9:

1. Click **Procedure Code**.  
**Note:** Procedure Code is required.

Filter By

| Member ID                                    | Member Name | Coverage Start Date | Coverage End Date | Status   | Date of Birth | Gender | Coverage Type | Product Type |
|--|-------------|---------------------|-------------------|----------|---------------|--------|---------------|--------------|
| <input checked="" type="radio"/> K1000124801 | Davis, John | 11/01/2020          | 12/31/9999        | Active   | 02/07/1987    | Female | Medical       | HMO          |
| <input type="radio"/> K1000124801            | Davis, John | 11/01/2019          | 10/31/2020        | Inactive | 02/07/1987    | Female | Medical       | HMO          |

Total Records: 2 < Showing 1 - 2 >

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Preauthorization Type \*  
 Inpatient ▼

Place of Service \*  
 21 - Inpatient Hospital ▼

Q Diagnosis Code \*  
 A04 Other bacterial intestinal infections

Q Procedure Code \*

Reset
Check



**Step 10:**

The **Procedure Code Information** dialog box displays.

1. In the **Procedure Code/Description** field, enter a few characters of the required Procedure Code or Description.
2. Click **Search**.
3. The search results for the Procedure Code display.  
**Note:** You can use **Filter By** to narrow down the search results.
4. Select the applicable Procedure Code from the search results.
5. Click **Ok**.

**Preauthorization Check Tool**

**Procedure Code Information**

Procedure Code/Description  
S5170

Reset Search    Search

Filter By

| Diagnosis Code                         | Code Description                                      |
|--|---|
| <input checked="" type="radio"/> S5170 | Home delivered meals, including preparation; per meal |

Total Records: 1      < Showing 1-1 >

Filter By

Cancel    OK



**Step 11:**

1. Click **Check**.

| Member ID                                    | Member Name | Coverage Start Date | Coverage End Date | Status   | Date of Birth | Gender | Coverage Type | Product Type |
|--|-------------|---------------------|-------------------|----------|---------------|--------|---------------|--------------|
| <input checked="" type="radio"/> K1000124801 | Davis, John | 11/01/2020          | 12/31/9999        | Active   | 02/07/1987    | Female | Medical       | HMO          |
| <input type="radio"/> K1000124801            | Davis, John | 11/01/2019          | 10/31/2020        | Inactive | 02/07/1987    | Female | Medical       | HMO          |

Total Records: 2      < Showing 1 - 2 >

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Preauthorization Type \*  
Inpatient

Place of Service \*  
21 - Inpatient Hospital

Diagnosis Code  
A04 Other bacterial intestinal infections

Procedure Code \*  
S5170 Home delivered meals, including preparation; per meal

Reset    Check

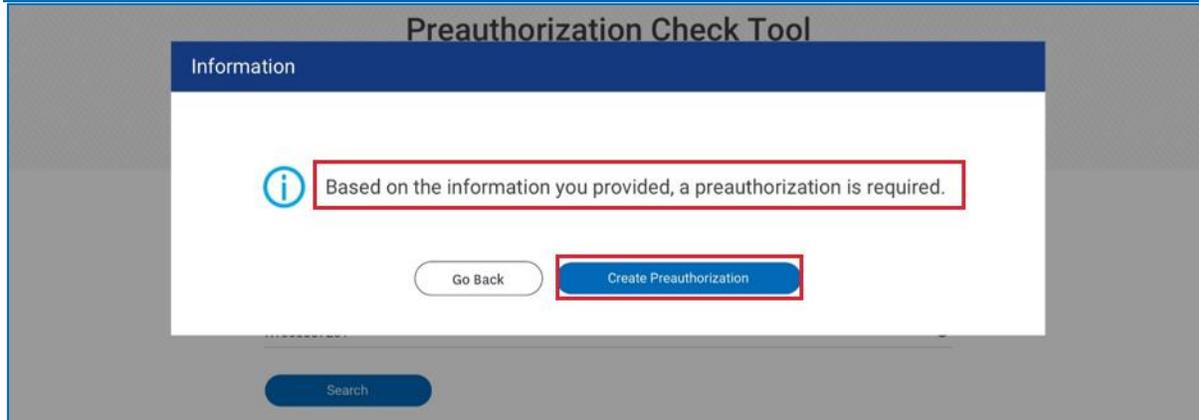
## Preauthorization Required



### Step 12:

If a preauthorization is required based on the Diagnosis and Procedure code you selected for the member, you will see the message: **“Based on the information you provided, a preauthorization is required.”**

1. Click **Create Preauthorization** to begin the Preauthorization process.



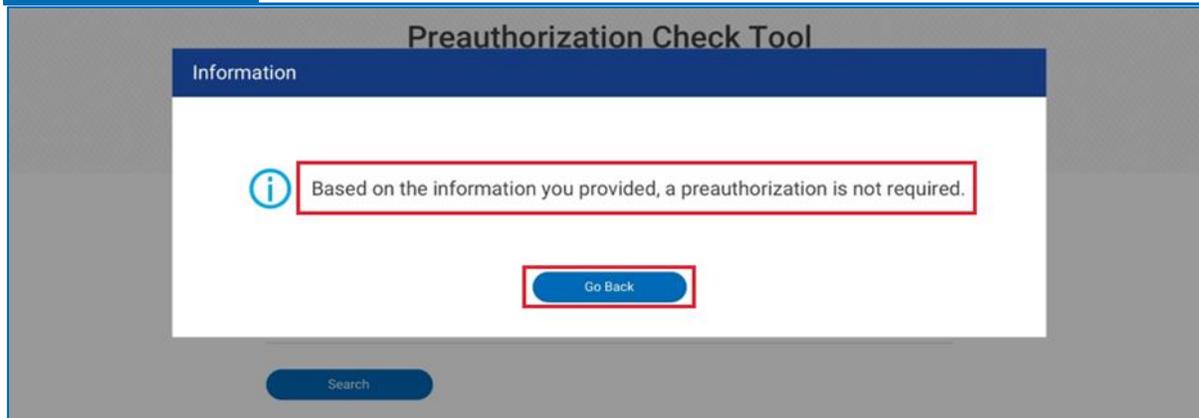
## Preauthorization Not Required



### Step 13:

If Preauthorization is not required, you will see the message: **“Based on the information you provided, a preauthorization is not required.”**

1. Click **Go back**.



Thank  
You