

## Quick Reference: Authorizations and Scheduling Appointments

### Managing Auto-Generated Authorizations

Authorizations are usually auto generated when the clinician generates orders. You must still manage authorizations **that require** a true payer authorization.

- If authorizations are auto generated by orders and a true insurance authorization is needed, authorizations push into a **Preliminary** status signifying someone will need to manage the authorization by obtaining an authorization number prior to billing (see next steps on how to manage the status).
- If authorization number is needed by the payer for billing, use the **Pending** status to signify you are awaiting an authorization number. Once an authorization number is obtained, change the status to **Completed**. The authorization number field is then required.
- If an authorization number is not needed, use the **Not Required** status to signify no authorization number is needed by the payer to bill.

### Creating an Authorization

Some services, such as **private pay/self-pay**, may require you to add an authorization.

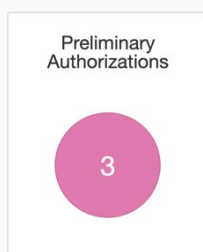
1. Navigate to the Client Record and select **Financial Record > Authorizations**. Click **Add**.
2. Set Start and End dates (if you utilize cert periods these **dates must match** your Cert period dates).
3. Set Status according to payer requirements. See above for statuses.
4. Click **Add** next to services and complete the **Add Services** field for each specialty that will be seeing the patient.

#### Tips:

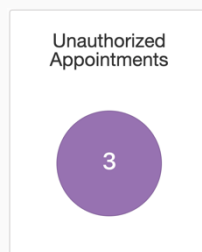
- Start and end dates can vary if service frequency changes based on time frames
  - Skip the total hours/units box and select **Visit or Hour** based on how your payer reimburses your agency
  - **Hourly** is used for payers that reimburse you by the hour/units
  - **Visit** is used for payers that reimburse you per visit no matter how long the visit takes it is one lump sum
    - a. Enter your Frequency with # of hours/visits per day/week/month/etc. Based off your above dates the system will calculate in Grey box the total
    - b. Enter the Total in the Grey box into the Total hours/units field
5. Continue adding services for each specialty the patient will need.

### Authorization Dashboard Tiles

Dashboards give you quick access to the information and tasks you need to complete your job. Check them often (at least on a daily basis).



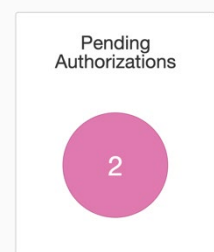
Lists authorizations that need follow up calls/contacts to insurance to obtain approval.



Lists appointments missing authorizations.



Lists authorizations that are ending soon.



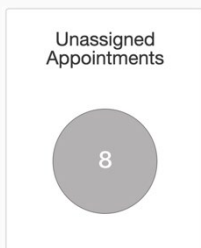
Lists authorizations that are awaiting an authorization number from a payer.

### Scheduling Appointments

1. You can schedule appointments from the following:
  - a. Master Schedule (see session guide for Master Schedule for more details on functionality)
  - b. Patient Chart
  - c. Employee Schedule
2. From any of the above locations, click **Add Appointment**.
3. On the **Service** tab, fill in drop downs. Be sure to enter information starting at top left and move left to right, top to bottom since one field determines the next field.
  - Select the correct case record, especially if the patient has multiple cases.
  - Enter the start and end date/time.
  - Select Discipline (this determines the next field of services this discipline is allowed to do)
  - Select Service (this determines what documentation the clinician receives when they start their appt in Care at Home app)
  - Select Authorization- this is a required field if the appointment is billable (if no authorization is available in drop down please see Authorization workflow above)
4. On the **Recurrence** tab, select specifics of how often you would like this appointment to recur.
  - Daily/weekly/monthly, etc.
  - Choose days of the week/month
  - Identify the end date of the recurrence
5. On the **Employee** tab, select from previous employees or search for employee.
6. **Accept** appointment.

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Shows appointments not assigned to an employee. Click to access appointments and assign an employee.



Shows appointments that have been completed via the Care at Home that are either held. Appointments can be held due to GPS location, time/date stamp issues, or a note from the physician. Select the tile, then select held appointments to determine the held reason. When the problem is resolved, change the status to Reviewed.



Shows a combination of EVV held appointments and appointments that remain in open status when the date is in the past and they should have already taken place. Select the tile and select appointments to determine why they were not reviewed. When the problem is resolved, change the status to Reviewed.