

# **HPHConnect for Providers User Guide**

## **Skilled Nursing Facility Inpatient Authorization Requests**

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## Skilled Nursing Facility Authorization Requests Overview

### Introduction

To submit transactions online, the provider must be contracted with Harvard Pilgrim and have a status of “participating” for the member’s product. The user’s access list determines which referral/authorization (RA) transactions can be viewed. Access to RA transactions is limited to those for providers on the user’s access list who are the requesting provider, servicing provider or the patient’s PCP.

### When to Use *HPHConnect*

*HPHConnect* for Providers users can submit RA transactions and access two years of RA transaction history for Harvard Pilgrim HMO, POS, and PPO members online. You can also submit RA transactions and view RA transaction history for Harvard Pilgrim Choice Plus and Harvard Pilgrim Options members.

### When Not to Use *HPHConnect*

*HPHConnect* for Providers is not used for transactions for members with the Choice or Choice Plus products offered through Passport Connect<sup>SM</sup> or for Healthplans Inc. For UnitedHealthcare’s related policies/procedures, please go to [www.harvardpilgrim.org](http://www.harvardpilgrim.org) or call 800-708-4414, option 2. Transactions for behavioral health services should also not be submitted through *HPHConnect*.

### Notification/Authorization Requirements

Prior authorization is required for inpatient admissions to skilled nursing facilities (SNFs).

Authorization should be requested prior to the date of admission (**at least one week prior in advance when possible**) to allow Harvard Pilgrim time to evaluate member eligibility, level of benefits and medical necessity.

Submit the authorization request:

- As soon as you are **certain** that the patient will be coming to your facility
- No later than one business day after the admission takes place

**Reminder:** Failure to comply with Harvard Pilgrim Health Care authorization requirements will result in an administrative denial of the claim payment. Members cannot be held liable for claims denied for failure to meet these requirements.

### Submission Process

Go to [www.harvardpilgrim.org/providers](http://www.harvardpilgrim.org/providers). Click on “log into *HPHConnect*” and sign in.

1. Verify patient eligibility. Is the patient “active” with Harvard Pilgrim? If no, contact the patient for information.
2. Check Authorizations & Notifications status to see if a transaction is already in the system. If yes, review the service record detail to determine if a new request is really needed.
3. If the patient is eligible and no transaction exists, enter the Admission request.

### Requesting Provider

The facility, the member’s PCP or the specialist can submit the authorization request.

### Servicing Provider

Two servicing providers are required on the admission transaction. The provider’s name or NPI is required. Enter the providers in the following order:

- First – the facility
- Second – the clinician, either a primary care or specialist provider

The provider’s name, NPI, or Harvard Pilgrim ID # can be used to search for them.

Note: If the servicing provider is not contracted with Harvard Pilgrim, the transaction pends for review.

## Submitting the Initial Transaction

### Admission Services Form

Referral & Authorizations / Search Requests

### Admission Submission

**Patient**  
\* Search Current Patients

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**Diagnosis**  
\* Search and select a diagnosis

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**Requesting Provider**  
\* Requesting Provider      Contact Name      Contact Info

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**Servicing Providers**  
\* Servicing Providers      Contact Name      Contact Info

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**Service Details**

\* Service      \* Level of Service

Nsg Home Residential Status      Admission Source      Patient Status

\* Service Units      \* Start Date      End Date

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**Requested Procedures**  
Procedure Code

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**Additional Information**  
\* Release of Information      Remarks

Characters remaining: 225 / 225

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**Clinical Upload (Attachment)**

Description

\* Attachment Type      \* Transmission Method

File

No attachment added.

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## Submission Fields

All required fields display a red asterisk \* and must be completed in order to process the request. In addition to the standard required fields, the requesting provider can supply contact information, if desired. All other fields not marked are optional.

Field	Requirement
Patient*	Name (pre-filled when the transaction is entered via Patient Management).
Diagnosis*	At least one diagnosis code is required. Up to 12 can be submitted. Enter all that are indicated on the physician's orders.
Requesting Provider*	Select Requesting Provider, if it is not pre-filled. When a search is needed, enter the provider's name, provider ID, or NPI. Or use advanced search options for more.
Contact Name/ Contact Info	This is helpful for the Harvard Pilgrim Case Manager when additional information is needed.
Servicing Provider(s)*	There should be two. Enter the Facility first and physician second. Use Name, NPI, or Provider ID to search or open Advanced Search if needed.
Service*	Select "Skilled Nsg Care Inpt"
Level of Service*	Elective, Emergency, or Urgent
Nsg Home Residential Status	Select the appropriate status code. This field is required for Skilled Nsg Care Inpt admission transactions.
Admission Source	Select Admission Source from the dropdown, if desired
Patient Status	Select the Patient Status from the dropdown, if desired
Service Units*	Enter the number of days requested.
Start Date*	Date of admission.
End Date	Expected discharge date.
Procedure Code	Search for and enter any applicable procedure codes, if known.
Release of Information*	This field will default to "Signed statement/claims" and does not need to be changed.
Remarks	Free text field for entering any remarks the user wants to send to HPHC
Clinical Upload (Attachment)	Attachment Type and Transmission Method are required fields only when paperwork is added (Paperwork is not required for initial submission),

Note: When entering text in the "Remarks" field, enter letters and/or numbers only; **do not** use punctuation marks or other keyboard characters.

# The Transaction Response

## Key Information

In the Request Detail, you will find the:

- Status of the transaction — approved, pending or denied, or no action required
- Patient's name and Member ID#
- Request Number, e.g., HPA12346
- Submitted on Date
- Diagnosis Code(s)

The requesting provider's and servicing provider's National Provider Identifier (NPI) display on both the transaction detail screen and the print referral.

On approved SNF and rehabilitation facility admission transactions, the end date, # of units approved, and remarks indicating the "level of care" authorized will display.

The "Edit" button only displays on approved transactions.

The "Cancel" button displays on pending and approved transactions.

The "Additional Remarks" field displays a summary explanation of the status of the transaction or shows reasons for a rejection or denial.

## Pending for Review

All skilled nursing facility admission transactions pending for review, both initial requests and revision requests.

When a transaction pending for review, the Harvard Pilgrim reviewer updates the Admission record to reflect the final status, Approved or Denied, within two (2) business days of receiving all information needed to complete the review. The Clinical Upload (Attachment) section should be used to include any relevant clinical documentation during the initial submission to expedite the review process.

The requesting provider, the servicing provider and the member's PCP will receive notification of the changed status of the transaction via the Activity Summary, if enabled.

## Finalized Admission Transaction

To print a copy of the response for your records, use the "Print" button. This will bring up the printer options available to you on your computer.

### Request Detail [View Audit](#) [Print](#) [EDIT](#) [CANCEL](#)

#### Admission Request

Approved

<b>Patient</b> <a href="#">DOE, JANE</a>	<b>Member ID</b> HPP12345600	<b>Request Number</b> HPA101145858	<b>Submitted On</b> 11/25/2019
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#### Diagnosis

**Diagnosis Codes**  
 M54.10 RADICULOPATHY SITE UNSPECIFIED  
 M41.9 SCOLIOSIS UNSPECIFIED  
 R26.89 OTHER ABNORMALITIES GAIT & MOBILITY

#### Requesting Provider

<b>Provider</b> <a href="#">Geriatric Authority of Milford</a>	<b>Provider NPI</b> 1346236908	
<b>Contact Name</b> LEE, MARY	<b>Contact Medium</b> Phone	<b>Contact Info</b> 508-902-7469

#### Servicing Providers

[Geriatric Authority of Milford](#) See More ▾

[Aoude, Fouad](#) See More ▾

Contact Name	Contact Medium	Contact Info
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#### Requested Service

<b>Service</b> Skilled Nsg Care Inpt	<b>Level of Service</b> Elective (E)
<b>Requested Units</b> 7 (Day(s))	<b>Approved Units</b> 10 (Day(s))

**Source**

<b>Start Date</b> 11/15/2019	<b>End Date</b> 11/25/2019
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#### Requested Procedures

No records available.

#### Additional Information

<b>Release of Information</b> Signed statement/Claims (Y)	<b>Additional Remarks</b> Transaction approved, Level Of Service: SKILLED NURSING INPATIENT FACILITY - LEVEL I.
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#### Clinical Upload (Attachment)

No records available.

#### Attachments

**Download File**

[doe,jane.pdf](#)

## Revisions to an Admission Transaction

### Guidelines

- Only the Requestor can Edit or Cancel a transaction.
- Only approved transactions can be edited.
- Only approved or pended transactions can be canceled.
- No changes can be made to the:
  - Type of request (outpatient, admission, specialist, home care, or transportation)
  - Patient
  - Service requested

Note: if there is a change in the patient’s level of care, a new transaction must be submitted.

### Edit the Approved Transaction

<b>Before the Start Date</b>	Edits can be made to the following fields: <ul style="list-style-type: none"> <li>• Servicing provider</li> <li>• Diagnosis code (add or change)</li> <li>• Units</li> <li>• Nursing Home Residential Status code</li> <li>• Level of Service</li> <li>• Start date (not prior to “today’s” date)</li> <li>• End Date</li> </ul>
<b>After the Start Date but prior to the End Date</b>	Edits can be made to the following fields: <ul style="list-style-type: none"> <li>• Diagnosis code (add or change)</li> <li>• Units</li> <li>• End Date (not prior to “today’s” date and not more than a year from the “Start Date”)</li> </ul>
<b>After the End Date</b>	HPHConnect will not accept requests for edits after the end date of a record.



# Canceling a Transaction

## When to Cancel a Transaction

The requestor or the servicing provider can Cancel a pending or approved transaction at any time if:

- The record was entered for the wrong patient.
- The wrong service type was selected in the original request.
- The wrong type of request was submitted, (e.g., specialist or outpatient rather than admission).

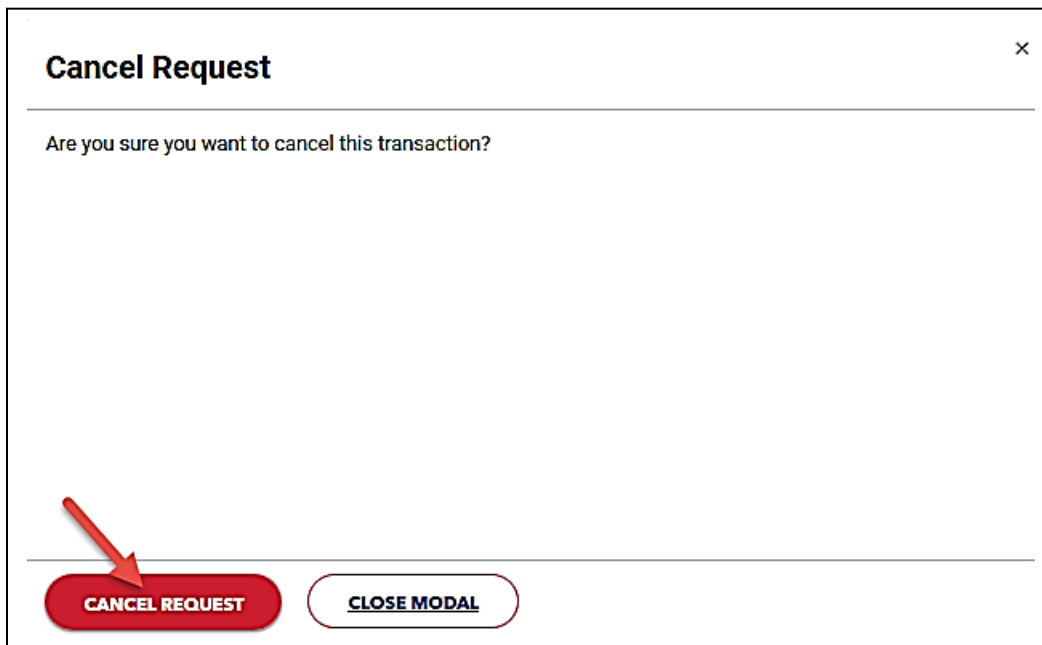
To correct any of these errors, it is necessary to cancel the original record and enter a new one with the appropriate detail.

## How to Cancel a Transaction

1. Click on the “Cancel” button at the top of the Request Detail screen.



2. When the Verification screen displays, click “Cancel Request” to continue with the cancellation request.



3. The transaction re-displays and the Status indicates “Approved (Canceled),” that is, the request to cancel the transaction was approved.

