

Outpatient IVIG Services Transaction – Quick Reference Guide

Prior to Submitting an Outpatient Transaction

1. Check member eligibility.
2. When you are sure that you have the correct member, click on "Select" to add the member to the patient list.
3. Check to see if an outpatient IVIG services authorization is already in place. (See "To search for Outpatient IVIG Services Transactions" below).
4. Have your NPI and the NPI of the attending physician, which you can find via the Office Management/Provider Directory.
5. Have the diagnosis code(s) and the IVIG procedure code(s), which you can pre-select from the Office Management/Code Lookup. These are required for all outpatient IVIG services transactions.

To Submit an Outpatient IVIG Services Transaction

1. Select "Outpatient" from the New Request drop down list.
2. Complete the required fields indicated with a red asterisk *.
3. Complete contact name, info and complete any additional optional fields. and select "Pharmacy" as the requested service.
4. When you click on "Submit," the response will be returned to you directly and display the status, "Pended."
5. To print a copy or the response for your records, use the Print link.

To Search for Outpatient IVIG Services Transactions

1. In Patient Management, select the member from the patient list.
2. Click on the "Authorizations & Notifications" link to access the Search Requests screen that displays a list of the member's referrals, authorizations & notifications.
3. Click on the "View" link to access the detail of an existing record.
4. If no record exists for the IVIG services for the patient, click on "New Request" to enter a new transaction.

Helpful Hints

1. To advance from field to field, use the TAB key instead of using your mouse.
2. To move the cursor back a field, use the SHIFT + TAB keys together.
3. For IVIG services, enter only IVIG procedure codes. Do not enter any other procedure codes.
4. Approved outpatient transactions will display start date and end date and the # of units approved.

Troubleshooting Problems

1. If you receive an error message and need to correct data in one or more fields, click the back arrows to correct the mistake(s) and resubmit the request.
2. If you receive the message, "Your request has not been returned from the server. You will receive a communiqué shortly," click the back button to resubmit the request.
3. If you have not used HPHConnect for 15 minutes, you will need to log in again before you can create a new admission transaction.



Patient — search by member name or ID — as you type the patient’s name, a list of options will auto populate

Diagnosis — You may enter up to 12 search terms. Be sure to include the decimal point if the code requires one. If you do not know the correct codes you can search for it.

Requesting & Servicing Providers — Requesting and servicing providers on the “Pharmacy” — outpatient transactions must be one of the following specialties: dermatology, hematology, hospital inpatient, hospital outpatient, internal medicine, medical oncology, neurology, oncology/ hematology, or pediatrics.

Service — Pharmacy

Service Units — The number of day(s), month(s), unit(s) or visit(s) requested.

Start date and end date of service

Procedure Code — At least one is required for outpatient IVIG services. Enter only IVIG procedure codes for IVIG services. If you need to search for the correct codes*.

Release of Information — Signed Statement/claims

Remarks — (optional). Enter text only; do not use punctuation marks or other keyboard characters.

Clinical Documentation — Clinical notes/reports can be attached here if you have them (optional). File size cannot exceed 45 MB.

Click on “Submit” to send the request.

[Referral & Authorizations / Search Requests](#)

Outpatient Submission

Patient

* Search Current Patients

Select a patient

Diagnosis

* Search and select a diagnosis

Requesting Provider

* Requesting Provider Contact Name Contact Info

Servicing Providers

* Servicing Providers Contact Name Contact Info

Service Details

* Service Location

* Service Units * Start Date * End Date

Requested Procedures

Procedure Code

Additional Information

* Release of Information Remarks

Characters remaining: 225 / 225

Clinical Documentation