Harvard Pilgrim Health Care

a **Point32Health** company

Rehabilitation Admission Authorization Requests

Table of Contents

Rehabilitation Admission Authorization 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 Authorization transactions can be viewed. Access to Authorization 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 Authorization transactions and access two years of transaction history for Harvard Pilgrim HMO and POS and PPO members online. You can also submit Authorization transactions and view transaction history for Harvard Pilgrim Choice Plus and Harvard Pilgrim Options.

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℠. For UnitedHealthcare's related policies/procedures, please go to www. harvardpilgrim.org or call 800-708-4414 and press 2.

Authorization Requirements

Prior authorization is required for inpatient admission to rehabilitation facilities.

Request authorization at least one week prior to the date of service/admission to allow Harvard Pilgrim time to determine 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. Click on the "HPHConnect Login" button and sign in.

1. Verify patient eligibility. Is the patient active with Harvard Pilgrim? If not, contact the patient for current information.
2. Check Authorization status to see if a transaction is already in the system. If yes, review the "Request Record Detail."
3. If the patient is eligible and no transaction exists, enter the "Admission" request.

Requesting Provider

For a rehabilitation facility admission, the hospital, the member's PCP, or the specialist can submit the notification or authorization request.

Servicing Provider

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

1. The facility
2. The clinician — either a primary care or specialist provider

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

Submitting the Initial Transaction

Required 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 must supply contact information and automobile accident information, when applicable. All other fields are optional.

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 from the drop-down list, if not pre-filled step. When search is needed, enter the provider's name or NPI.

Servicing Provider * — Enter two: the rehabilitation facility 1st and the physician 2nd; or use the provider's name or NPI

Contact Name/Contact Info — This is helpful when additional information is needed.

Service * — Rehabilitation

Level of Service * — "Elective," "Emergency," or "Urgent"

Service Units * — The number of days requested.

Start Date * — Admission date

End Date — Expected discharge date

Release of Information * — Select "Signed statement/claims"

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

Admission Submission

Patient

* Search Current Patients

Select a patient 🔍

Diagnosis

* Search and select a diagnosis

🔍

Requesting Provider

* Requesting Provider | Contact Name | Contact Info

🔍 | | Phone ▾

Servicing Providers

* Servicing Providers | Contact Name | Contact Info

🔍 | | Phone ▾

Service Details

* Service

Med Related Transport ✕ ▾

* Service Units | * Start Date | * End Date

Units ▾ | 01/26/2026 📅 | 04/26/2026 📅

* Transport Code | * Transport Reason | Round Trip Purpose Description

Select... ▾ | Select... ▾ |

Characters remaining: 55 / 55

* Trip Origin Address | * Trip Destination Address

Characters remaining: 55 / 55 | Characters remaining: 55 / 55

Requested Procedures

* Procedure Code

🔍

Additional Information

* Release of Information | Remarks

Signed statement/claims ✕ ▾ |

Characters remaining: 225 / 225

Clinical Documentation

+ ADD ATTACHMENT

SUBMIT | LOAD | SAVE

Key Information

In the title bar, you will find the:

- Transaction request number, e.g., PHA12345
- Status of the transaction
  - Approved
  - Pended
  - Denied
  - Rejected
  - No Plan Action
- Member's name

The requesting provider and servicing provider's National Provider Identifiers (NPI) display on both the transaction Detail screen and the Print Referral.

On approved Rehabilitation Facility transactions, the following information will display:

- "End Date"
- "# of Units Approved"

In the "Remarks" field displays a message indicating the "Level of Care" authorized. The "Edit" button only displays on approved transactions.

The "Cancel" button displays on pended, approved transactions.

File size for upload of clinical attachments cannot exceed 45 MB.

The Initial Transaction Response

Pended Rehabilitation Admission Transaction

To print a copy of the response for your records, use the browser print option or the "Print Referral" link.

Print Referral Form

When you access this screen, your printer dialogue window displays automatically. Click on "Print" to print the form.

Pended for Review

All rehabilitation facility admission transactions pend for review, both initial requests and revision requests.

When a transaction pends for review, the Harvard Pilgrim reviewer updates the service request to reflect the final status, "Approved" or "Denied," within two business days of receiving all information needed to complete the review.

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.

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)
  - The patient
  - The service requested (Consult, Physician Visit–Office Sick, etc.)

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

Revisions to an Admission Transaction

Before the Start Date

Edits can be made to the following fields:

- Servicing Provider
- Diagnosis Code (add or change)
- Units (add or reduce)
- Level of Service
- Start Date (not prior to today's date)
- End Date (not prior to today's date and not more than one year from start date)

After the Start Date but prior to the End Date

Edits can be made to the following fields:

- Diagnosis code (add or change)
- Units (add or reduce)
- End date (not prior to today's date and not more than one year from start date)

After the End Date

HPHConnect will not accept requests for edits after the end date of a record.

Cancelling the Transaction

When to Cancel a Transaction

The requestor or the servicing provider can cancel a pended 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, e.g., consult vs. physician visit–office sick.
- The wrong type of request was submitted (e.g., outpatient or admission rather than specialist service, etc.)
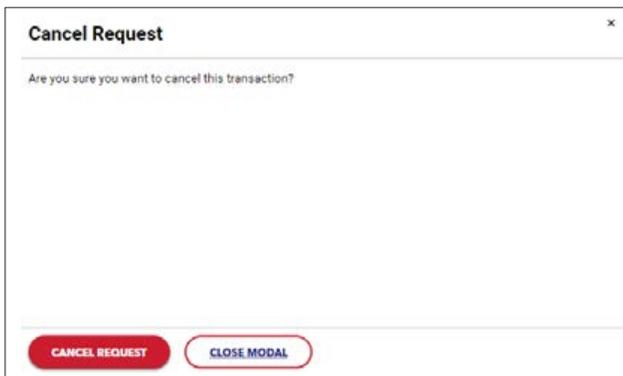
To correct any of these errors, it is necessary to cancel the original record and enter a new one for the appropriate service.

How to Cancel a Transaction

1. Click on the "Cancel" button at the top of the Detail screen.

2. When the Verification screen displays, click "Yes" to submit the cancellation request.

3. The transaction will re-display and the Status will indicate "Approved Canceled," meaning the request to cancel the transaction was approved.