# Entering an Outpatient Auth

Hill inSite eAuth Submission

This quick reference guide describes how to enter an Outpatient authorization. The first step is to look up the member.

Look up Member

1. From the Access Express Main Menu, click **Inquiry > Eligibility**.

2. Enter any known member information such as member ID or name.

3. Enter the member's DOB (date of birth).

4. Click **Search**.

5. From the **Select Member** search results, click on desired member link.

6. The **Selected Member** page appears. Verify that the member's plan is still effective.
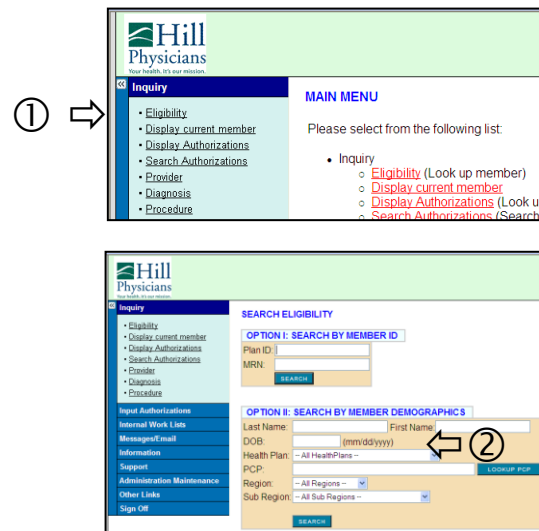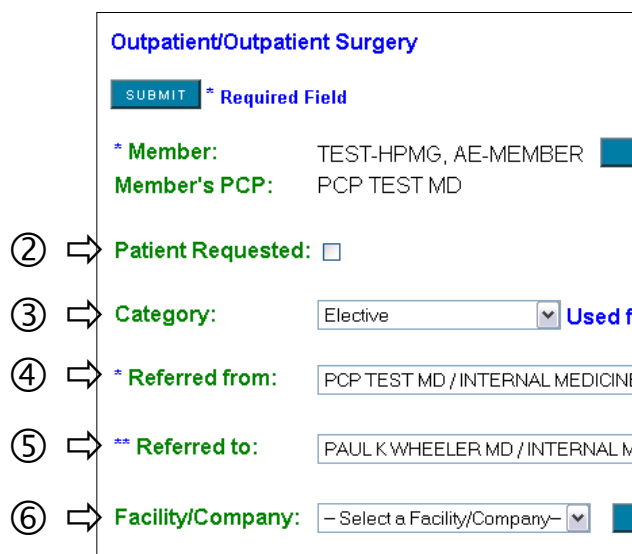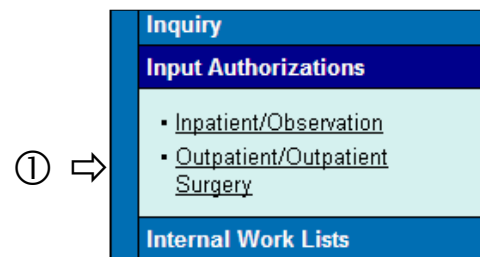

Enter the Authorization

1. From the Input Authorizations menu, click **Outpatient/Outpatient Surgery**.

2. If the request is driven by the patient, check **Patient Requested**.

3. Under **Category**, select the appropriate category.

4. Select the **Referred from** physician from the drop-down.

   Note: An (*****) asterisk to the left of a field name denotes a required field.

5. If there is a **Referred to** physician, enter the name. Otherwise leave blank.

   Note: Two (******) asterisks to the left of a field name indicate that field, or the one directly below it, is required.

6. Under **Facility/Company**, enter the facility if applicable.

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7. Under **Place of Service**, select the appropriate POS.

⑦ ⇨ *** Place of Service:** [11 - Office ▾]

8. Enter the **Estimated Date of Service**.

⑧ ⇨ *** Estimated Date of Service:** [4/18/2014] (If range, list first date in mm/dd/yy

9. Under **Diagnosis**, enter the first diagnosis code (you can enter up to 6 diagnoses). After you enter a diagnosis, the system displays an additional diagnosis field.

* Received Date: [4/18/2014 4:50:29 PM]

⑨ ⇨ *** Diagnosis 1:** [486 - PNEUMONIA, ORGANISM NOS - 486 ▾] SE

Diagnosis 2: [-- Select a Diagnosis -- ▾] SELECT DIAGNOSIS 2

10. Under **Procedure**, enter the first procedure (you can enter up to 14). After you enter the first procedure, the system displays additional procedure fields.

⑩ ⇨ *** Procedure 1:** [87278 - INFECTIOUS AGENT ANTIGEN DETECTION; LEG

Modifier 1: [-- No Modifier -- ▾] OTHER MODIFIER

Requested Units 1: [1]

Procedure 2: [-- Select a Procedure -- ▾] SELECT PROCEDURE 2

Modifier 2: [-- No Modifier -- ▾] OTHER MODIFIER

Requested Units 2: [1]

11. Complete the **Reason for Request**.

Auth Type: [-- No Value -- ▾]

12. Under **Notes,** enter a public note if needed.

* Reason for Request: (Please explain reason for authorization reque

[   ]

13. Review all information for accuracy and click **Submit**.

(Max length: 255; Remaining: 0)

14. The auth will appear in Summary View.

- Note the Auth number in bold at the top of the page.

- Note the auth status in bold at the bottom of the page.

- If your auth is automatically approved, it would be reflected in the status.

Member / Current Address:	TEST-HPMG, AE-MEMBER
Plan / Current Health Plan ID:	**Blue Cross Commercial** / 15
Date of Birth:	12/3/1986
PCP:	ALVIN M SOCKOLOV MD / S Fax: 916-927-3244
Date / Number:	04/18/2014 / **11000403** ←
Expiration Date:	06/18/2014

...tes:	
Status: ←	**(E) Pend Mercy Cap**
Received Date:	04/18/2014 11:22:09 AM
Decision Date:	
Type:	Outpatient/Outpatient Surgery
Referral Type:	