Arkansas Foundation for Medical Care

Other (Outpatient Transaction) Tip Sheet

Proprietary and Confidential
Getting Started

» Login information is case sensitive
  » User ID, iEXCHANGE ID and Password are required
  » Users will be prompted to change passwords every 30 days

» System time out
  » If there is no activity for a period of 60 minutes, users will be “timed out” of iEXCHANGE and you will received the below message:
    » "Your session has expired. Please, login again."

» Do not use the “Back” button to navigate in iExchange
  » At the bottom of most pages you will see buttons (such as “Cancel”, “Back”, or “New Search”) that allow you to return to previous pages
  » You can click the “Starting point” block in the upper left hand corner at anytime to return to the main page
Arkansas Foundation for Medical Care

iExchange Training – New Other (Outpatient) request
Request Submission

» Each request has three stages

1. Request Entry
   » All fields should be completed unless marked as *(optional)*
   » System administrators can add frequently used providers, diagnoses and procedures to facilitate data entry
   » Additional Notes (iExchange Clinical Information) text box at the bottom of the page should be used to indicate if documents will be attached to the request
   » Users will click [Next step] at the bottom of the screen to proceed to the Preview page

2. Request Preview
   » Allows user to review request information a final time before submitting
   » Displays Outcome Status of the request if it is submitted as is
   » Allows user to return to entry page and edit if necessary – click [Edit] at the bottom of the screen
   » Users can add additional services by clicking [Submit and add services] at the bottom of the screen or if no additional services are required users will click [Submit]

3. Request Confirmation
   » Displays the Outcome Status and request ID
   » Displays same information as Preview page
   » User able to open print friendly version of this page – click [Print friendly version]
   » User can click [Attach file] to the right of the Request ID if a document needs to be attached to the request
Other instructions
Use this page to select the other transaction you wish to perform. Depending on the payer you have selected, you can choose to submit a new other request, other request extension, other clinical review, new other behavioral health request, other behavioral health request extension, or prior auth request.

New other request
Click the New other request link, above. A blank Other request entry page appears. You can add a member ID and all request information for this member.

Add other services
Click the Add other services link, above. You will first search for the other treatment you wish to add services to.

New prior auth request
Click the New prior auth request link, above. A blank Prior auth request entry page appears. You can add a member ID and all request information for this member.

A Note before you begin: if you selected the wrong payer (you want to submit this request to a different payer) click the Select a different payer link above, to return to the Starting point page and select the correct payer.
<Insert instructions about member search>

1. **General information**

   - **Notification date**: 04/08/2015 (mm/dd/yyyy)
   - **Member ID**: T1
   - **Submitting provider**: [Redacted]
   - **Facility** (optional)
   - **Servicing provider** (optional)
   - **Treatment setting**: AR CHMS (New)
   - **Primary diagnosis**: 47410
   - **Secondary diagnosis** (optional)
   - **Submitter Name** (required): Test
   - **Submitter Phone Number** (required): 610-665-1212

<Insert instructions about Treatment setting>
**Services Information**

Enter or select procedure codes and modifiers, each one with requested units/visits as well as start date and end date. You must have at least one procedure. You may have as many procedures as there are areas to enter them.

### Service 1

<table>
<thead>
<tr>
<th>Procedure Code</th>
<th>42820</th>
<th>Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procedure</td>
<td>Enter Procedure code or Select from Short list</td>
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</tr>
<tr>
<td>Procedure modifiers</td>
<td>(optional)</td>
<td>Modifiers must be entered in sequential order</td>
</tr>
<tr>
<td>Example: M1, M2, M3, M4</td>
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<tr>
<td>Unit(s)</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Place of service</td>
<td>(optional)</td>
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<tr>
<td>Start date</td>
<td>04/15/2015</td>
<td></td>
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<tr>
<td>End date</td>
<td>04/15/2015</td>
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### Service 2 (optional)

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<tr>
<td>Place of service</td>
<td>(optional)</td>
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**Additional notes (optional)**

iExchange Clinical Information
Other request preview
Review your other request information here. If everything is correct, click the Submit button to save your request and open the Other request confirmation page. If you need to make any changes, scroll down to the bottom of the page and click Edit to make the necessary modifications.

The status of this other request was current when you clicked Next step. However, the status may change when you click Submit if eligibility or other data changed in the interim. The request reference number will be assigned when you click Submit.

If supported by the payer, you have an option to select to add additional services to the request. Click the Submit and add services button to save your request with the services already entered and open the Additional other services entry page.

<Preview page – includes projected status of the request and allows the user to verify the accuracy of the information prior to final submission>

$request can be edited, submitted, or cancelled>
<Confirmation page includes the Request ID and allows the user to attach additional required information to support the request>
Request Attachments

» Users can attach documents to any existing authorization request in iExchange

» Follow the below steps to add attachments

1. User can click Attach file to the right of the Request ID if a document needs to be attached to the request
2. Enter a title for the document to be attached
3. Click Browse to select locate the file to be attached
4. Click Attach to add the document
5. Click OK in the popup window to continue or cancel if the attachment was selected in error

6. Information message will appear at the top of the page to indicate that the file has been successfully attached
Request Attachments – Confirmation page

1. **Other request confirmation**
   - This page contains other request information including the request ID and status (authorized or pending), the member's name and ID, as well as service information. Additional provider information also appears. When you click the Submit button, iEXCHANGE re-evaluates the data that appeared in the Preview. The other request status may have changed if eligibility or other data changed in the interim.

   **Payer Notice**
   - IMPORTANT MESSAGE
     - When attaching a medical record, requesting reconsideration, or attaching any other document to iEXCHANGE you must put a note in the iEXCHANGE Clinical Information Notes field. If a note is not entered, AFM ...
     - more information

   **Request ID:** A150980002

   **Summary**
   - Service Code: 42820
   - Start/End Date: 04/15/2015 - 04/15/2015
   - UnPaid Status: 

2 and 3. **Request Attachments**
   - **Attach new file**
     - **Allowable file type(s):** PDF, 7z
     - **Title:** Patient Medical Record
     - **Attachment:**
     - **Browse...**
     - **Attach**

   **Enter a document title and select**
   - **Browse to select a document**

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Request Attachments – Confirmation page

4

Click Attach

5

Click OK to attach the document to the request
Request Attachments – Confirmation page

**Message at the top will confirm the attachment as been sent or is in progress**