

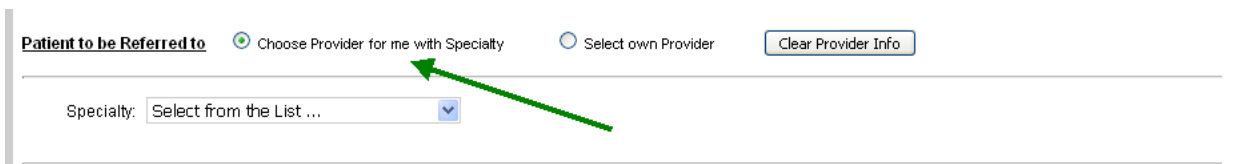
## **PROVIDER BULLETIN**

### **ON-LINE REFERRAL AUTHORIZATION SYSTEM SCHEDULED UPDATE – ~ REFERRED TO PROVIDER SELECTION CHANGES ~ ~ EFFECTIVE JUNE 13, 2016 ~**


We are implementing a system enhancement to improve the specialist request process, simply sign on as usual to see these changes on June 13, 2016. These changes are designed to be as user friendly as possible, this bulletin describes the new options and process in detail for your reference.

#### **Now you may opt to have a provider selected for you:**

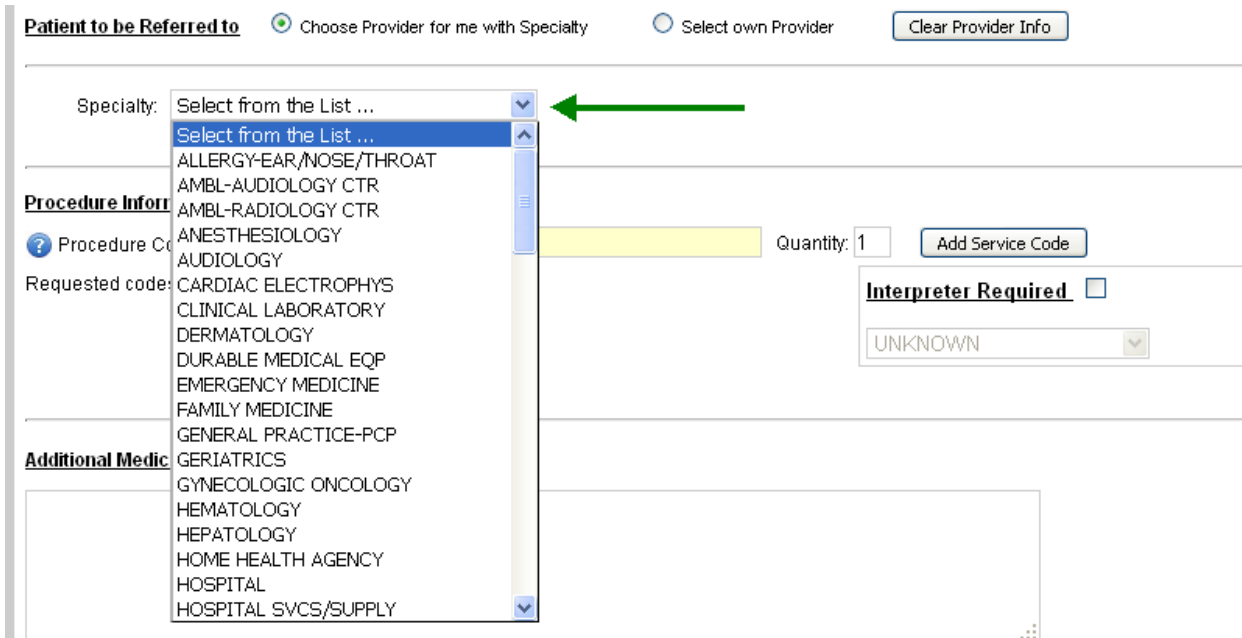
When entering an Authorization Request you will now have the option to select a specific “Referred To” Provider or you may choose the required “Specialty” and we will choose the provider for you. The selection will default to “Choose Provider for me by Specialty” as indicated by the arrow on the Screen below:




**Patient to be Referred to**  Choose Provider for me with Specialty  Select own Provider

Specialty: Select from the List ... 

If the “Choose Provider for me by Specialty” option is selected, only Provider Specialties will appear on the drop down list as indicated by the arrow on the Screen below:



**Patient to be Referred to**  Choose Provider for me with Specialty  Select own Provider

Specialty: Select from the List ... 

- Select from the List ...
- ALLERGY-EAR/NOSE/THROAT
- AMBL-AUDIOLOGY CTR
- AMBL-RADIOLOGY CTR
- ANESTHESIOLOGY
- AUDIOLOGY
- CARDIAC ELECTROPHYS
- CLINICAL LABORATORY
- DERMATOLOGY
- DURABLE MEDICAL EQP
- EMERGENCY MEDICINE
- FAMILY MEDICINE
- GENERAL PRACTICE-PCP
- GERIATRICS
- GYNECOLOGIC ONCOLOGY
- HEMATOLOGY
- HEPATOLOGY
- HOME HEALTH AGENCY
- HOSPITAL
- HOSPITAL SVCS/SUPPLY

**Procedure Information**

Procedure Code

Requested code:   Quantity:

**Interpreter Required**

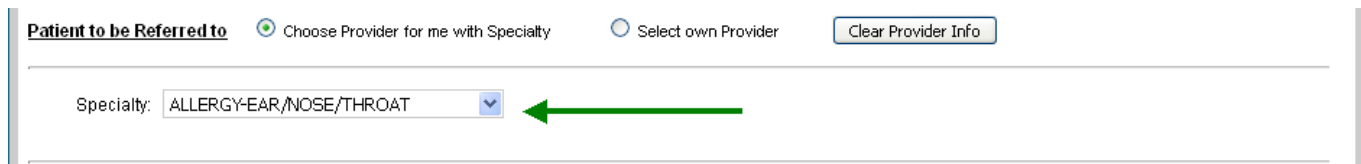
UNKNOWN

**Additional Medication**

## **PROVIDER BULLETIN**

### **ON-LINE REFERRAL AUTHORIZATION SYSTEM SCHEDULED UPDATE – ~ REFERRED TO PROVIDER SELECTION CHANGES ~ ~ EFFECTIVE JUNE 13, 2016 ~**

Select the desired Provider Specialty from the drop down list. Your selection will appear in the “Specialty” Field as indicated by the arrow on the Screen below:



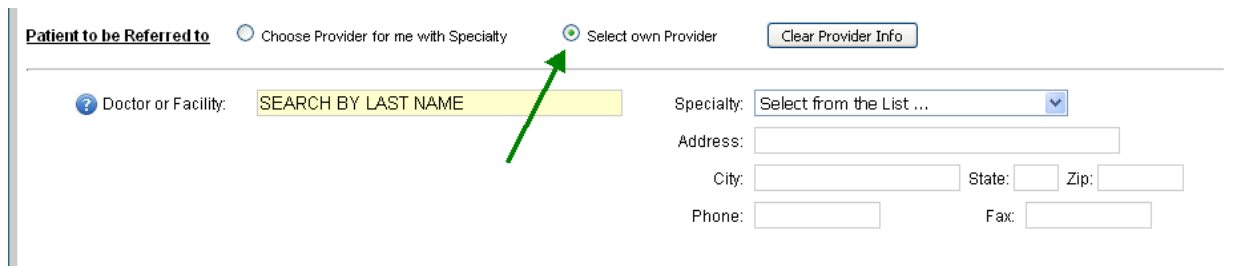
**Patient to be Referred to**  Choose Provider for me with Specialty  Select own Provider

Specialty: ALLERGY-EAR/NOSE/THROAT

If this option is selected, the “Referred To” Provider will be selected for you by the Utilization Management Department based upon member affiliated health plan and hospital contracts.

#### **Or you may opt to select a provider:**

You may also change the default selection by clicking on the “Choose my own Provider” Radio Button as in indicated by the arrow on the Screen below:



**Patient to be Referred to**  Choose Provider for me with Specialty  Select own Provider

Doctor or Facility: SEARCH BY LAST NAME

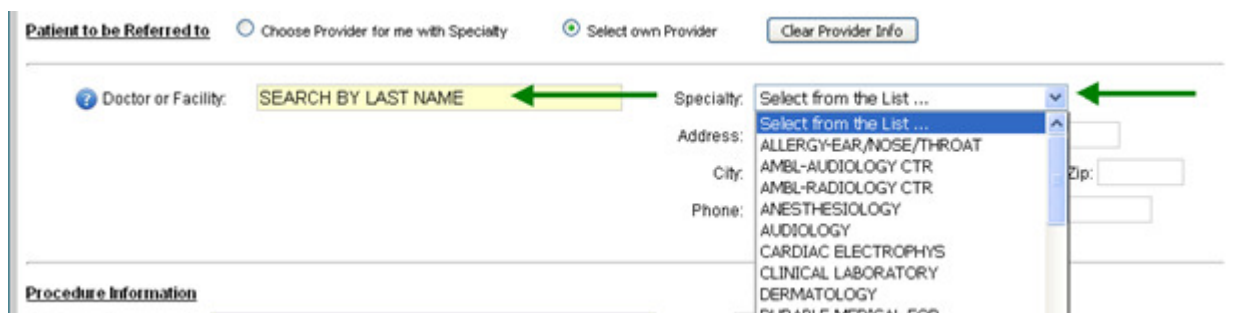
Specialty: Select from the List ...

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

If you choose to select your own “Referred To” Provider you may search for the desired Provider by the Provider’s Last Name **or** by Provider Specialty as indicated by the arrows on the Screen below:



**Patient to be Referred to**  Choose Provider for me with Specialty  Select own Provider

Doctor or Facility: SEARCH BY LAST NAME

Specialty: Select from the List ...

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Procedure Information**

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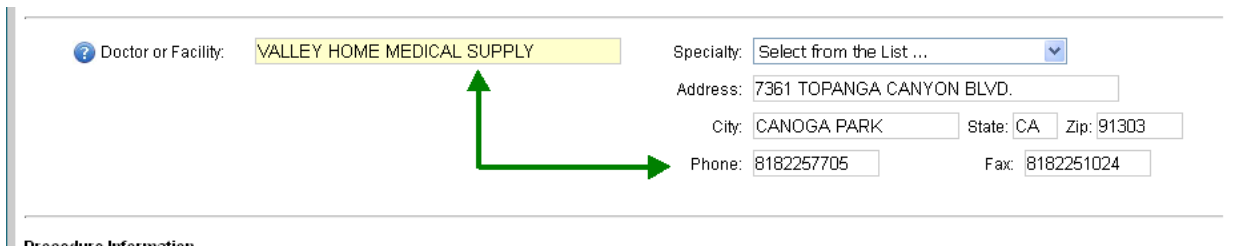
## ***PROVIDER BULLETIN***

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**ON-LINE REFERRAL AUTHORIZATION SYSTEM SCHEDULED UPDATE –  
~ REFERRED TO PROVIDER SELECTION CHANGES ~  
~ EFFECTIVE JUNE 13, 2016 ~**

The “Referred To” Provider information will auto populate after the desired “Referred To” Provider is selected as indicated by the arrows on the Screen below:



Doctor or Facility: VALLEY HOME MEDICAL SUPPLY      Specialty: Select from the List ...  
Address: 7361 TOPANGA CANYON BLVD.  
City: CANOGA PARK      State: CA      Zip: 91303  
Phone: 8182257705      Fax: 8182251024

Upon submission your request is submitted to the Utilization Management Department for review and decision.

The Utilization Management Department reviews each referral request to ensure the provider selection submitted is appropriate based upon the patient’s clinical specialty needs, service area, age, contracted health plan, contracted hospital, CCS status, specialist appointment availability and other factors to ensure patient is directed to an appropriate specialist. When choosing to select your own specialist by name, the provider agrees that the UM department may change specialists as necessary to meet these criteria.

Please retain this bulletin for future reference, it is also available on the Referral Authorization portal for your convenience.

If you have any questions about these changes, please call Provider Relations at 818-265-0800.

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### **Medical Management Department Contact Numbers:**

**Phone: (800) 874-2091**

**Fax: (800) 874-2093**