



# AUTHORIZATION PORTAL FOR PROVIDERS

MDwise, Inc

# MDwise Authorization Portal Instructions Documentation

## Table of Contents

Introduction to the Authorization Portal.....	2
Account Setup and Registration .....	2
Initiating a “New” Outpatient Prior Authorization .....	3
Initiating a “New” Inpatient Prior Authorization Request.....	10
Requesting Concurrent Review or an extension for a Prior Authorization .....	16
Reviewing the Prior Authorization Dashboard .....	21

# MDwise Authorization Portal Instructions Documentation

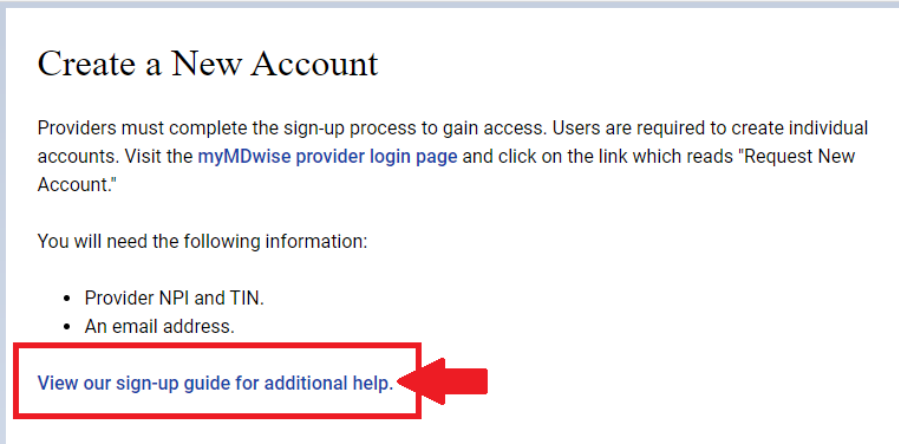
## Introduction to the Authorization Portal

MDwise currently offers different ways to submit a prior authorization including fax, email, and telephonically. We are now offering online submission through our Authorization Portal located in our Provider Portal.

Phone	Phone Call 1-800-356-1204, request to set up a prior authorization over the phone.
Fax	HHW EXCEL- 1-888-465-5581 HIP EXCEL-1-866-613-1642
Email	<a href="mailto:padept@mdwise.org">padept@mdwise.org</a>
Portal	<a href="#">myMDwise Provider Portal</a>

This guide will allow you to set up your account to submit your prior authorization as well as track those authorizations you submitted on the portal. If you are unable to locate your member by Member ID, please contact MDwise at 1-800-356-1204.

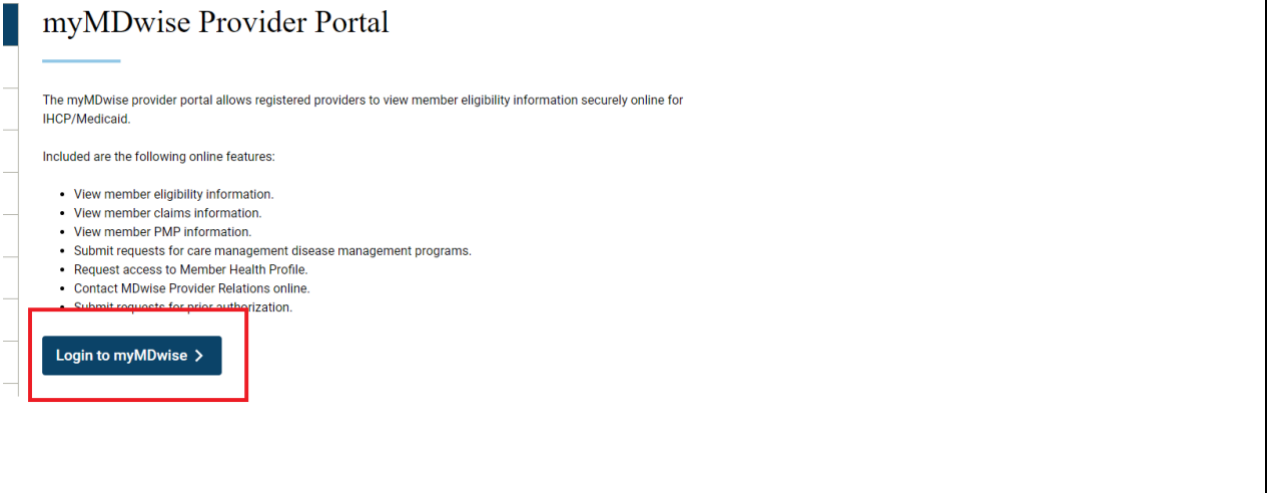
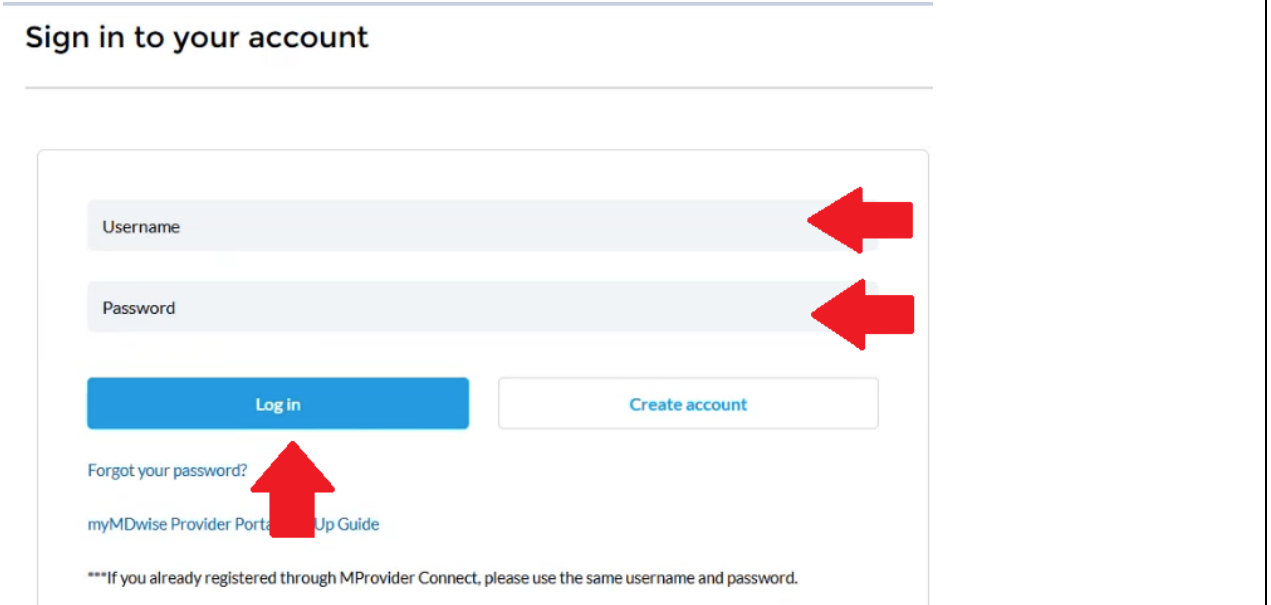
## Account Setup and Registration

Step	Action
1	Locate the MDwise Provider Portal through the following link: <a href="#">myMDwise Provider Portal</a> .
2	Locate and click the hyperlink "View our sign-up guide for additional help" at the bottom of the page and follow the instructions for account set up and registration. 
3	<ul style="list-style-type: none"><li>For troubleshooting issues with creating Provider Portal account, please email <a href="mailto:providerservices@mdwise.org">providerservices@mdwise.org</a>.</li><li>If you are unable to locate your member by Member ID, please contact MDwise at 1-800-356-1204.</li></ul>

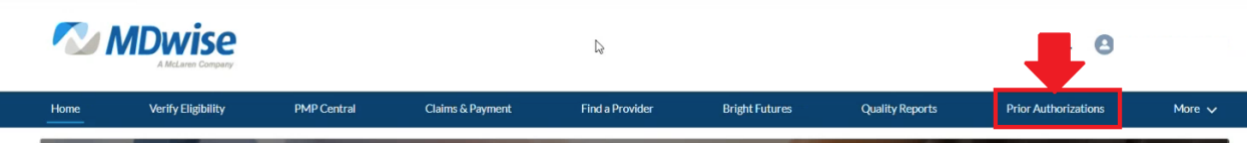
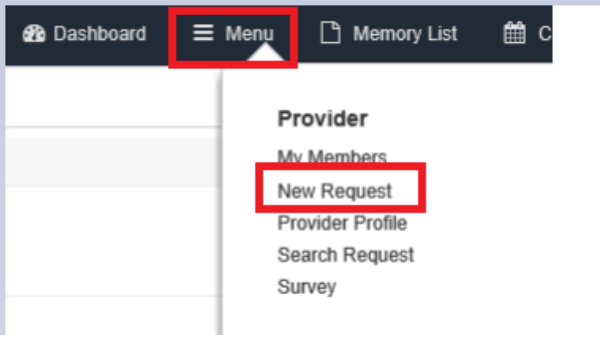
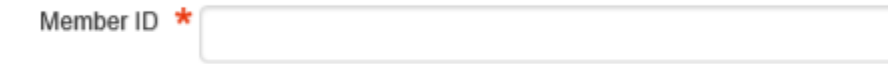
# MDwise Authorization Portal Instructions Documentation

## Initiating a “New” Outpatient Prior Authorization

- For troubleshooting issues with setting up a prior authorization, please email: [padept@mdwise.org](mailto:padept@mdwise.org).

Step	Action
1	Enter the Authorization Portal from the MDwise Provider Portal following the MDwise Provider Portal link: <a href="#">myMDwise Provider Portal</a>
2	Click the blue “Login to myMDwise” button. 
3	If a login account has already been created, sign into your account by inputting your Username and Password. Click the blue “Log In” button.  <b>Important Note:</b> If a login account has not been created, the sign-up process must be completed. See <a href="#">Account Setup and Registration</a> section.


## MDwise Authorization Portal Instructions Documentation

4	<p>Once logged in, locate and click on the “Prior Authorizations” tab in the navy-blue banner near the top of the page.</p> 
5	<p>The webpage will automatically redirect into the Authorization Portal (Jiva) to the “My Dashboard” screen.</p> 
6	<p>Click on “Menu”; Choose “New Request” from the dropdown.</p> 
7	<p>Enter the Member ID. Click the blue “Search” button.</p> 

## MDwise Authorization Portal Instructions Documentation

8	<p>The member will appear. Locate the “Action” column on the far right of screen. Click on the “Add Request” dropdown and choose the appropriate type of request (Outpatient or Behavioral Health Outpatient).</p> <div style="border: 1px solid gray; padding: 5px; margin: 10px 0;"> <div style="background-color: #f0f0f0; padding: 2px 5px; border: 1px solid gray;">Action</div> <div style="border: 1px solid gray; padding: 5px; margin-top: 5px;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px;">Add Request</div> <div style="padding: 2px 5px;">Behavioral Health Inpatient</div> <div style="padding: 2px 5px;">Behavioral Health Outpatient</div> <div style="padding: 2px 5px;">Inpatient</div> <div style="padding: 2px 5px;">Outpatient</div> </div> </div> <p>own.</p>								
9	<p>Complete the “Episode Details” section:</p> <p>Click on the “Request Type” dropdown and choose the appropriate request type.</p> <div style="margin: 10px 0;"> <span style="margin-right: 10px;">Request Type *</span> <div style="border: 1px solid gray; padding: 2px;"> <div style="background-color: #f0f0f0; padding: 2px 5px;">--Select One--</div> <div style="border: 1px solid gray; padding: 2px;"> <div style="background-color: #808080; color: white; padding: 2px 5px;">--Select One--</div> <div style="padding: 2px 5px;">concurrent</div> <div style="padding: 2px 5px;">Preservice</div> <div style="padding: 2px 5px;">Retrospective</div> </div> </div> </div> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr style="background-color: #4f81bd; color: white;"> <th style="width: 40%;">Request Type</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>Preservice</td> <td> <ul style="list-style-type: none"> <li>Initial medical and behavioral health outpatient services.</li> <li>Concurrent medical outpatient services.</li> <li>Concurrent IOP, ABA, Psych testing, and Neuropsych testing services.</li> </ul> </td> </tr> <tr> <td>Concurrent</td> <td>Continuation of a SUDRT/PHP service already submitted.</td> </tr> <tr> <td>Retrospective</td> <td>“Retro” use only after services have been rendered completely</td> </tr> </tbody> </table>	Request Type	Description	Preservice	<ul style="list-style-type: none"> <li>Initial medical and behavioral health outpatient services.</li> <li>Concurrent medical outpatient services.</li> <li>Concurrent IOP, ABA, Psych testing, and Neuropsych testing services.</li> </ul>	Concurrent	Continuation of a SUDRT/PHP service already submitted.	Retrospective	“Retro” use only after services have been rendered completely
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	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;">Initial and Concurrent Medical Preservice</td> <td style="width: 50%; padding: 5px;">Standard 5 BD (Business Days)</td> </tr> <tr> <td style="padding: 5px;">Initial and Concurrent Intensive Outpatient (IOP), Applied Behavioral Analysis, and Psych/Neuro testing</td> <td style="padding: 5px;">Standard 5 BD (Business Days)</td> </tr> <tr> <td style="padding: 5px;">Initial and Concurrent PHP/SUDRT/Urgent Medical OP Preservice</td> <td style="padding: 5px;">Urgent 48 hours</td> </tr> <tr> <td style="padding: 5px;">Retrospective</td> <td style="padding: 5px;">Standard 30 CD (Calendar Days) use only after services have been rendered completely.</td> </tr> </table> <p style="margin-top: 10px;"><b>Important to Note:</b> Priority may be changed by MDwise if the request does not meet the definition of Urgent.</p>	Initial and Concurrent Medical Preservice	Standard 5 BD (Business Days)	Initial and Concurrent Intensive Outpatient (IOP), Applied Behavioral Analysis, and Psych/Neuro testing	Standard 5 BD (Business Days)	Initial and Concurrent PHP/SUDRT/Urgent Medical OP Preservice	Urgent 48 hours	Retrospective	Standard 30 CD (Calendar Days) use only after services have been rendered completely.	
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11	<p>Complete the “Diagnosis” section:</p> <p>Type in the Diagnosis code. Wait for Jiva to populate the code with description. Click on the code/description that appears.</p> <div style="text-align: center; margin-top: 10px;">  </div>									
12	<p>Complete the “Providers” section:</p> <p>Click the blue “Attach Providers” button.</p> <div style="margin-top: 10px;"> <p>▼ Providers</p> <div style="border: 1px solid #ccc; padding: 5px; width: fit-content; margin: 10px auto; background-color: #4a86e8; color: white; border-radius: 5px;">Attach Providers</div> </div>									
13	<p>Enter in the NPI and Tax ID for the facility only. Click the blue “Search” button. Search Results will appear to the right.</p>									

## MDwise Authorization Portal Instructions Documentation

Provider Last Name

Provider First Name

NPIN

Provider ID

Tax ID

Group \*

Search

[Advanced Search](#)

**Search Results**

	Provider ID	Provider Name
⚙	200365010A1538195169352144671	CENTER FOR SPECIAL SURGERY LLCnull
⚙	200365010A200365010A	CENTER FOR SPECIAL SURGERY

**Important to Note:** If you have an out of network (OON) provider/facility, enter in the OON. If both provider and facility are OON, enter in the OON facility.

**14** Find the provider with the correct Name and location.

- Verify you are choosing the provider with the MDW prefix in the Provider ID column.

	Provider ID
⚙	201081570200999060B
⚙	<span style="background-color: yellow;">MDW</span> _843937974-1790044055
⚙	<span style="background-color: yellow;">MDW</span> _932648762-1790044055

- Verify "Servicing", under the Provider Role Column, is selected.

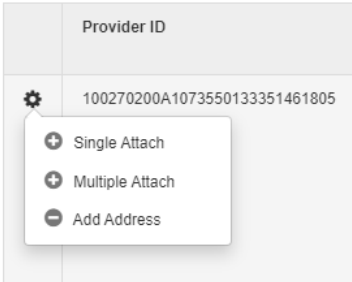
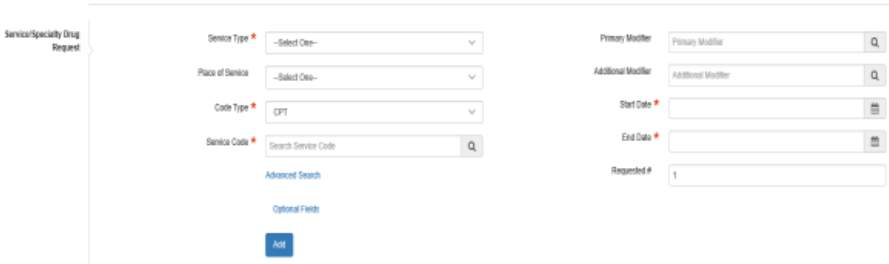
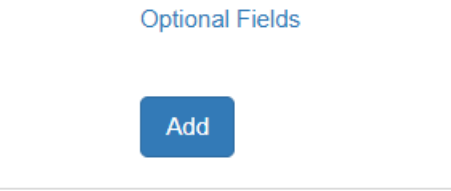
**Provider Role**

Servicing ▾

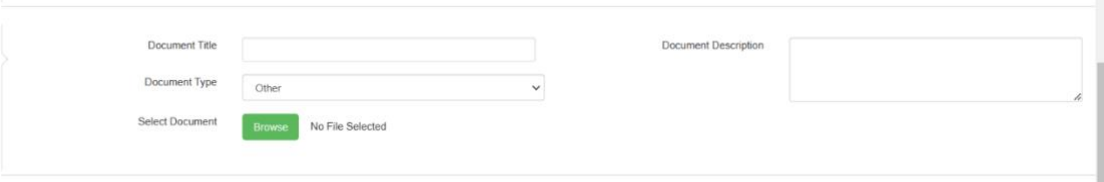
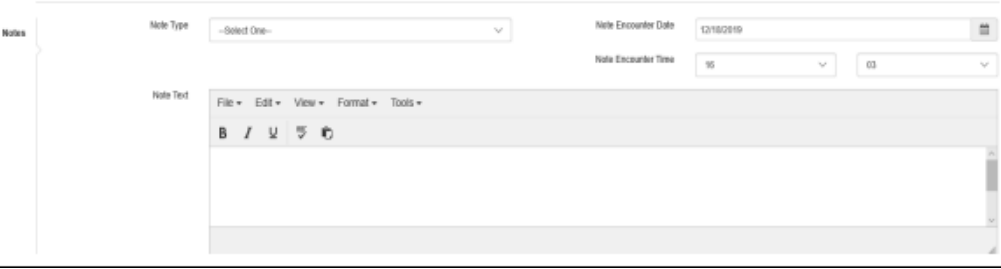

- Admitting
- Attending
- PCP
- Referring
- Servicing
- Treating



## MDwise Authorization Portal Instructions Documentation

15	<p>Click the cogwheel next to the provider ID of the facility you have chosen. Click “Single Attach”. You will be redirected back to the previous screen.</p>  <p>The screenshot shows a table with a header row containing 'Provider ID'. Below it, a row contains the provider ID '100270200A1073550133351461805'. To the left of this row is a cogwheel icon. A dropdown menu is open, showing three options: 'Single Attach', 'Multiple Attach', and 'Add Address', each with a plus or minus icon.</p>
16	<p>Complete the “Service Request” section:</p> <p>Choose the most appropriate options depending on the type of outpatient case, for the following dropdowns:</p> <ul style="list-style-type: none"><li>• Service Type</li><li>• Code Type (SPC-See Appendix A: SPC-Code Sets)</li><li>• Service Code</li><li>• Start Date</li><li>• End Date</li><li>• Requested #</li></ul>  <p>The screenshot shows a form titled 'Service/Specality Drug Request'. It contains several fields: 'Service Type' (dropdown), 'Place of Service' (dropdown), 'Code Type' (dropdown with 'CPT' selected), 'Service Code' (text input with search icon), 'Primary Modifier' (text input with search icon), 'Additional Modifier' (text input with search icon), 'Start Date' (text input with calendar icon), 'End Date' (text input with calendar icon), and 'Requested #' (text input with '1' entered). There are also links for 'Advanced Search', 'Optional Fields', and an 'Add' button.</p> <p><b>Important to Note:</b> SPC Code sets help streamline the process of prior authorization requests. If multiple codes are requested on the same prior authorization and the codes all appear in the same code set, only 1 code set needs to be added. SPC Code sets should not be used as billing guidance by providers.</p>
17	<p>Click the blue “Add” button.</p>  <p>The screenshot shows the text 'Optional Fields' in blue. Below it is a blue button with the word 'Add' in white.</p>
18	<p>Complete the “Documents” section: Type in the document’s title in the “Document Title” box.</p>

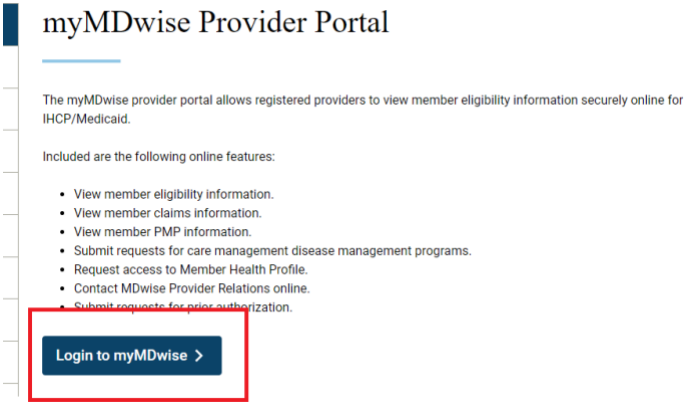
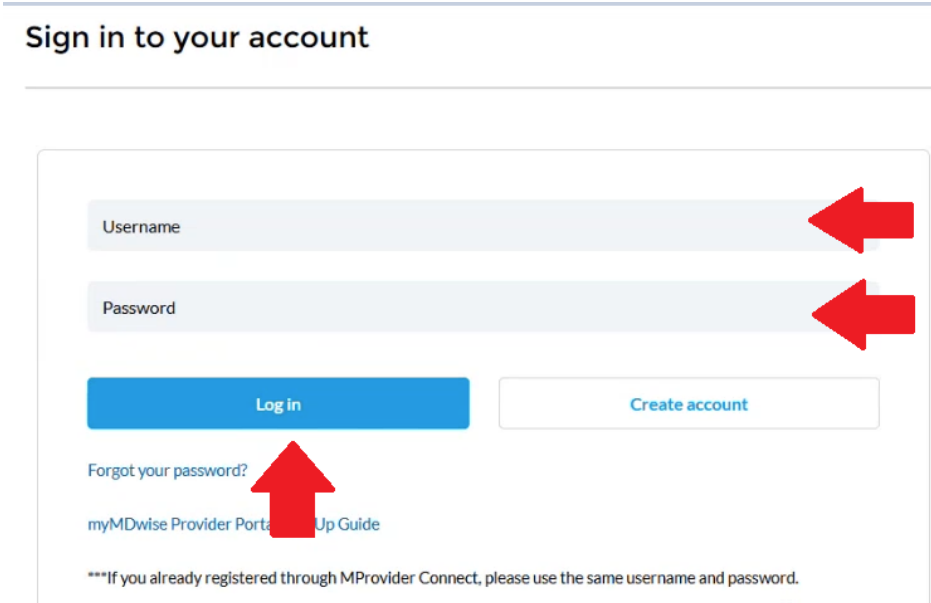
## MDwise Authorization Portal Instructions Documentation

	<p>Click the green “Browse” button to add documents.</p>  <p><b>Important to note: Documents need to include clinicals and PA form.</b></p>
19	<p>Complete the “Notes” section.</p> <p>In the “Note Text” box include:</p> <p>Requestor Name:</p> <p>Requestor Phone Number:</p> <p>Requestor Fax Number:</p> <p>Additional/relevant information needed to process the request (reason for expedited).</p> 
20	<p>Click the green “Submit” button to complete the request.</p>  <p><b>Important to Note:</b> It must be submitted for MDwise to process the request.</p>

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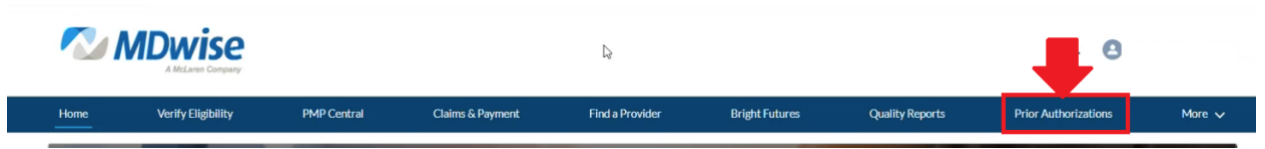
## Initiating a “New” Inpatient Prior Authorization Request

- For troubleshooting issues with setting up a prior authorization, please email: [padept@mdwise.org](mailto:padept@mdwise.org).

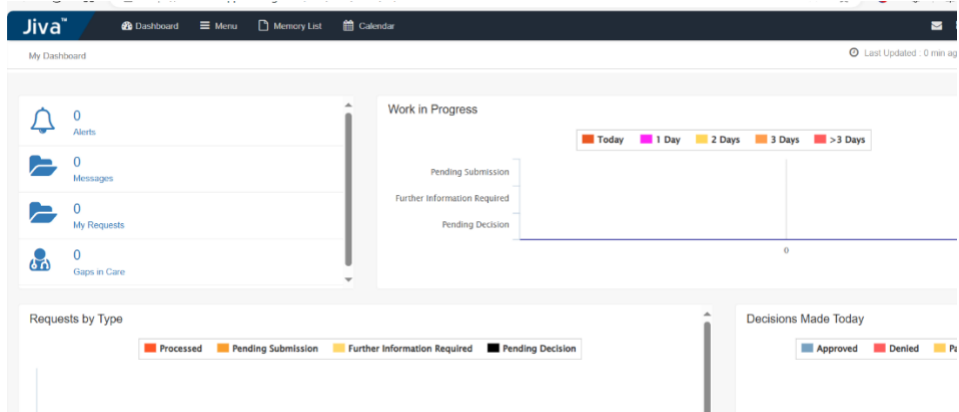
Step	Action
1	Enter the Authorization Portal from the MDwise Provider Portal following the MDwise Provider Portal link: <a href="#">myMDwise Provider Portal</a>
2	<p>Click the blue “Login to myMDwise” button.</p> 
3	<p>If a login account has already been created, sign into your account by inputting your Username and Password. Click the blue “Log in” button.</p>  <p><b>Important to Note:</b> If a login account has not been created, the sign-up process must be completed. See <a href="#">Account Setup and Registration</a> section.</p>

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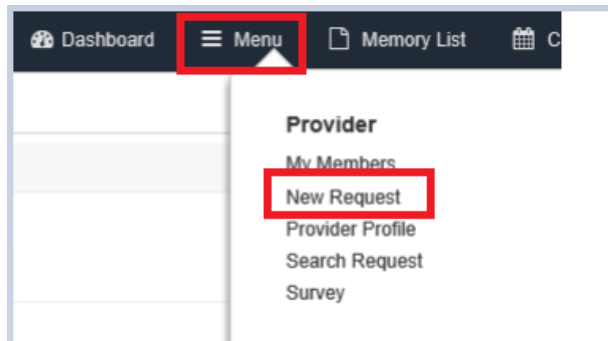
4 Once logged in, locate and click on the “Prior Authorizations” tab in the navy-blue banner near the top of the page.



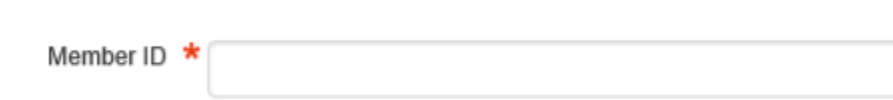
5 The webpage will automatically redirect into the Authorization Portal (Jiva) to the “My Dashboard” screen.



6 Click on “Menu”; Choose “New Request” from the dropdown.



7 Enter the Member ID. Click the blue “Search” button.


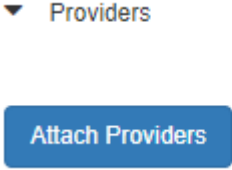
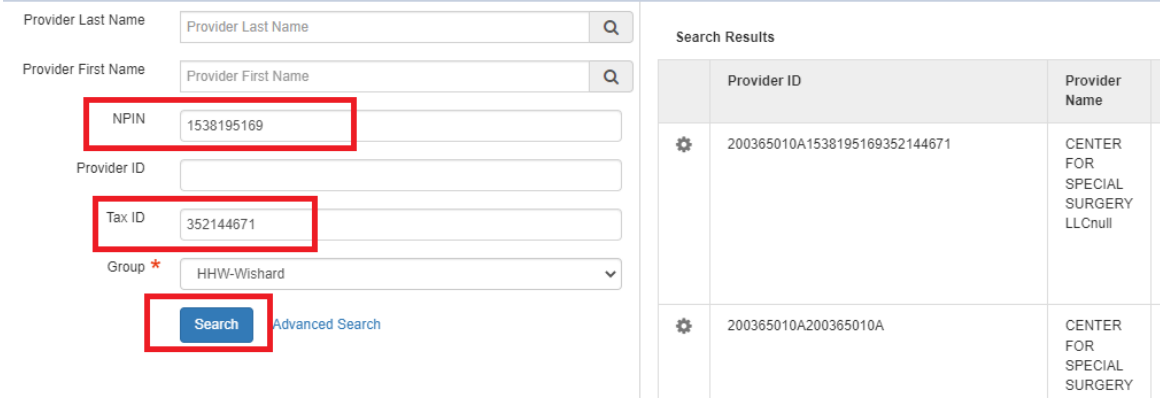


8 The member will appear. Locate the “Action” column, on the far right of screen. Click on the “Add Request” dropdown and choose the appropriate type of request (Inpatient or Behavioral Health Inpatient).

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9	<p>Complete the “Episode Details” section:</p> <p>Click on the “Request Type” dropdown and choose the appropriate request type.</p> <div style="margin-top: 10px;"> <p>Request Type *</p> <div style="border: 1px solid gray; padding: 5px; display: inline-block;"> <p style="text-align: center;">--Select One--</p> <div style="border: 1px solid gray; padding: 2px; background-color: #f0f0f0; margin-top: 2px;"> <p style="background-color: #0070c0; color: white; padding: 2px;">--Select One--</p> <p style="padding: 2px;">concurrent</p> <p style="padding: 2px;">Preservice</p> <p style="padding: 2px;">Retrospective</p> </div> </div> </div> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr style="background-color: #0070c0; color: white;"> <th style="width: 40%;">Request Type</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>Preservice</td> <td>Initial medical and behavioral health inpatient services (unscheduled and scheduled admits)</td> </tr> <tr> <td>Concurrent</td> <td>Continuation of a medical or behavioral health service already submitted.</td> </tr> <tr> <td>Retrospective</td> <td>“Retro” use only after the member has been discharged.</td> </tr> </tbody> </table>	Request Type	Description	Preservice	Initial medical and behavioral health inpatient services (unscheduled and scheduled admits)	Concurrent	Continuation of a medical or behavioral health service already submitted.	Retrospective	“Retro” use only after the member has been discharged.
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## MDwise Authorization Portal Instructions Documentation

<p>11</p>	<p>Complete the “Diagnosis” section:</p> <p>Type in the Diagnosis code. Wait for Jiva to populate the code with description. Click on code/description that appears.</p> 												
<p>12</p>	<p>Diagnosis codes will appear below. Continue to add each diagnosis code on the Prior Authorization (PA) form. Keep the primary code (<i>shown with orange star next to it</i>) as the code in DX1 box on PA form.</p> <table border="1" data-bbox="293 617 1539 806"> <thead> <tr> <th></th> <th>Code Type</th> <th>Diagnosis</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">★</td> <td>ICD10</td> <td>N49.0--Inflammatory disorders of seminal vesicle</td> </tr> <tr> <td style="text-align: center;">★</td> <td>ICD10</td> <td>N25.0--Renal osteodystrophy</td> </tr> </tbody> </table>		Code Type	Diagnosis	★	ICD10	N49.0--Inflammatory disorders of seminal vesicle	★	ICD10	N25.0--Renal osteodystrophy			
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<p>14</p>	<p>Enter in the NPI and Tax ID for the facility only. Click the blue “Search” button. Search Results will appear to the right.</p>  <table border="1" data-bbox="943 1331 1446 1667"> <thead> <tr> <th colspan="3">Search Results</th> </tr> <tr> <th></th> <th>Provider ID</th> <th>Provider Name</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">⚙</td> <td>200365010A1538195169352144671</td> <td>CENTER FOR SPECIAL SURGERY LLCnull</td> </tr> <tr> <td style="text-align: center;">⚙</td> <td>200365010A200365010A</td> <td>CENTER FOR SPECIAL SURGERY</td> </tr> </tbody> </table> <p><b>Important to Note:</b> If you have an out of network (OON) provider/facility, enter in the OON. If both provider and facility are OON, enter in the OON facility.</p>	Search Results				Provider ID	Provider Name	⚙	200365010A1538195169352144671	CENTER FOR SPECIAL SURGERY LLCnull	⚙	200365010A200365010A	CENTER FOR SPECIAL SURGERY
Search Results													
	Provider ID	Provider Name											
⚙	200365010A1538195169352144671	CENTER FOR SPECIAL SURGERY LLCnull											
⚙	200365010A200365010A	CENTER FOR SPECIAL SURGERY											
<p>15</p>	<p>Find the provider with the correct name and location.</p>												

## MDwise Authorization Portal Instructions Documentation

- Verify you are choosing the provider with the MDW prefix in the Provider ID column.

Provider ID	
	201081570200999060B
	MDW_843937974-1790044055
	MDW_932648762-1790044055

- Verify “Servicing”, under the Provider Role column, is selected.

Provider Role


Servicing ▾




- Admitting
- Attending
- PCP
- Referring
- Servicing**
- Treating

16

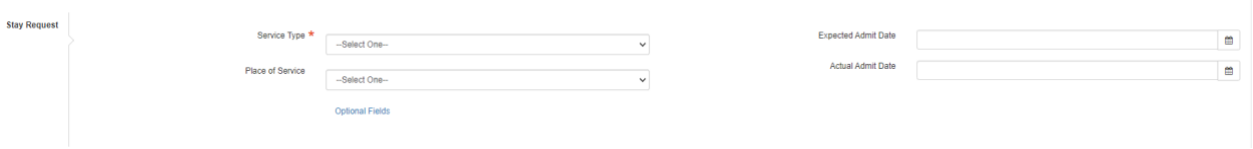



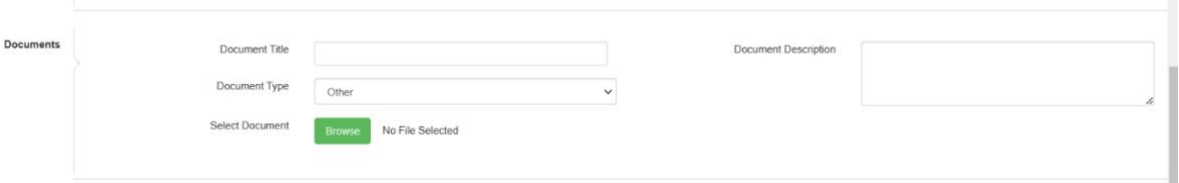
Click the cogwheel next to the provider ID of the facility you have chosen. Click “Single Attach”. You will be redirected back to the previous screen.

Search results

Provider ID	
	100270200A1073550133351461805

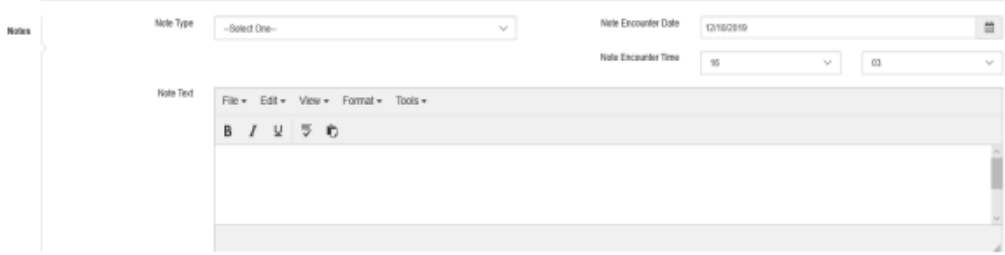

-  Single Attach
-  Multiple Attach
-  Add Address

## MDwise Authorization Portal Instructions Documentation

17	<p>Complete the "Stay Request" section:</p> <p>Choose the most appropriate options depending on the type of inpatient case for the following dropdowns:</p> <ul style="list-style-type: none"><li>• Service Type</li><li>• Actual Admit Date</li></ul> 
18	<p>Click on the blue "Optional Fields" link.</p> 
19	<p>Click on the "Requested Level of Care" dropdown and choose the most appropriate depending on if request is Behavioral Health or Medical.</p> 
20	<p>Type in LOS (Length of Stay) Requested.</p> 
21	<p>Complete the "Documents" section:</p> <p>Type in Document Title.</p> <p>Click the green Browse button to add documents.</p>  <p><b>Important to note:</b> Documents need to include clinicals and PA form.</p>



## MDwise Authorization Portal Instructions Documentation

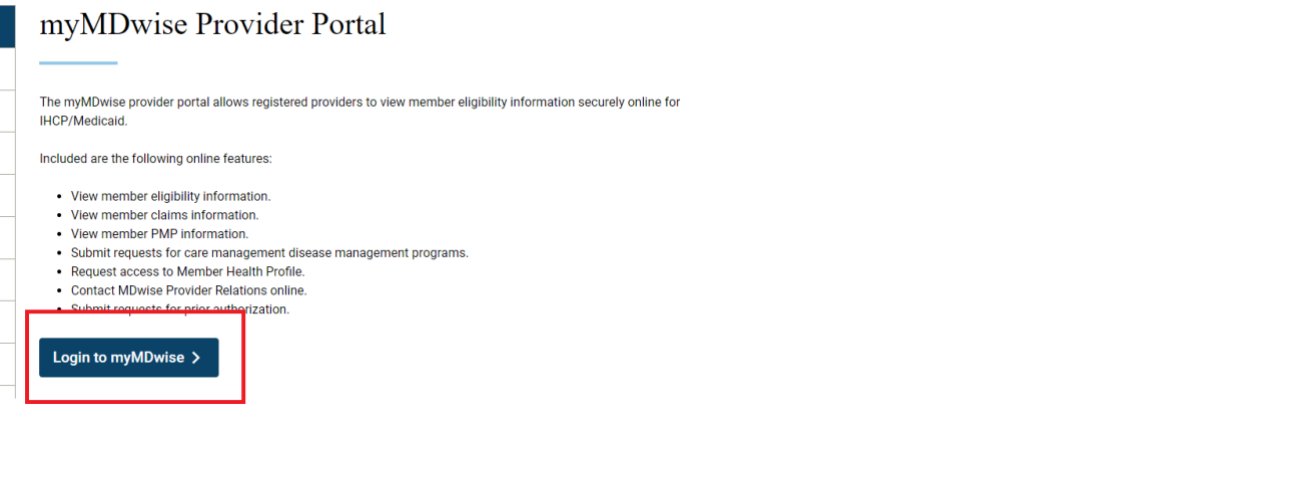
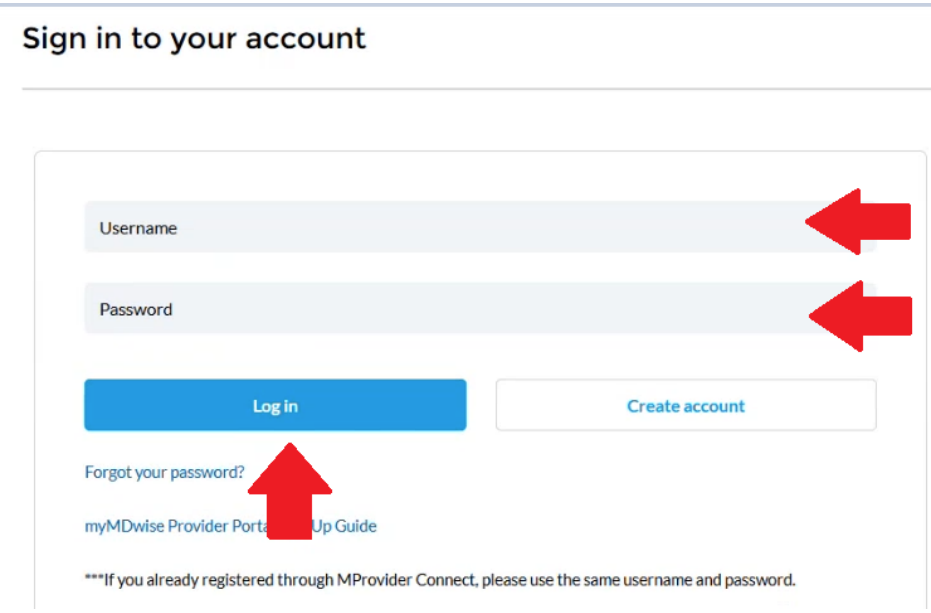



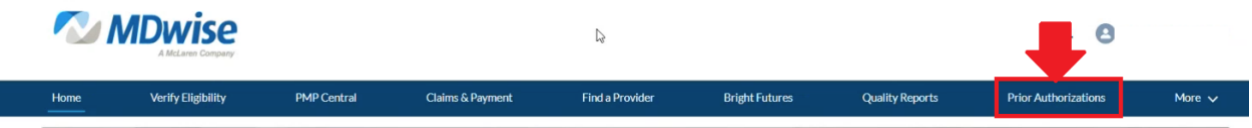

22	<p>Complete the “Notes” section. In the “Note Text” box include:</p> <p>Requestor Name:</p> <p>Requestor Phone Number:</p> <p>Requestor Fax Number:</p> <p>Additional/relevant information needed to process the request (reason for expedited).</p> <div style="border: 1px solid #ccc; padding: 10px; margin: 10px 0;">  </div>
23	<p>Click the green “Submit” button to complete the request.</p> <div style="text-align: center; margin: 10px 0;">  </div> <p><b>Important to Note:</b> It must be submitted for MDwise to process the request.</p>

### Requesting Concurrent Review or an extension for a Prior Authorization

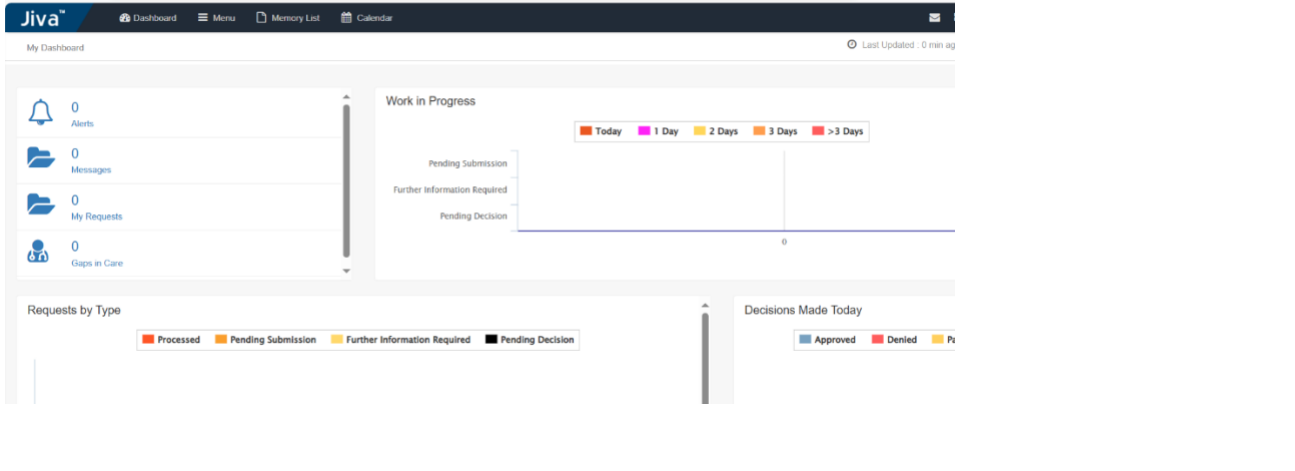

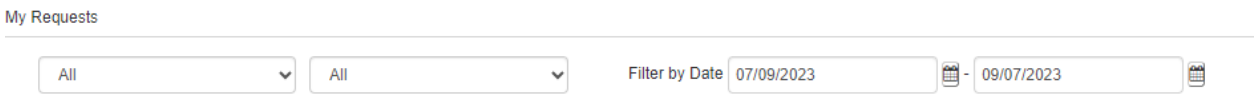
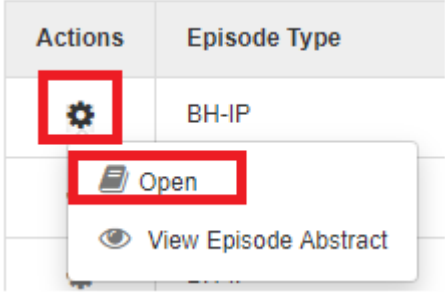
- For troubleshooting issues with setting up a prior authorization, please email: [padept@mdwise.org](mailto:padept@mdwise.org).

Step	Action
1	<p>Enter the Authorization Portal from the MDwise Provider Portal following the MDwise Provider Portal link:</p> <p><a href="#">myMDwise Provider Portal</a></p>
2	<p>Click the blue “Login to myMDwise” button.</p>

# MDwise Authorization Portal Instructions Documentation

	 <p><b>myMDwise Provider Portal</b></p> <p>The myMDwise provider portal allows registered providers to view member eligibility information securely online for IHCP/Medicaid.</p> <p>Included are the following online features:</p> <ul style="list-style-type: none"><li>• View member eligibility information.</li><li>• View member claims information.</li><li>• View member PMP information.</li><li>• Submit requests for care management disease management programs.</li><li>• Request access to Member Health Profile.</li><li>• Contact MDwise Provider Relations online.</li><li>• <b>Submit requests for prior authorization.</b></li></ul> <p><b>Login to myMDwise &gt;</b></p>
3	<p>If a login account has already been created, sign into your account by inputting your Username and Password. Click the blue “Log in” button.</p>  <p><b>Sign in to your account</b></p> <p>Username </p> <p>Password </p> <p><b>Log in</b> <input type="button" value="Create account"/></p> <p><a href="#">Forgot your password?</a> </p> <p><a href="#">myMDwise Provider Portal Sign Up Guide</a></p> <p>***If you already registered through MProvider Connect, please use the same username and password.</p> <p><b>Important to Note:</b> If a login account has not been created, the sign-up process must be completed. See <a href="#">Account Setup and Registration</a> section.</p>
4	<p>Once logged in, locate and click on the “Prior Authorizations” tab in the navy-blue banner near the top of the page.</p>  <p><b>MDwise</b> A McLaren Company</p> <p>Home Verify Eligibility PMP Central Claims &amp; Payment Find a Provider Bright Futures Quality Reports <b>Prior Authorizations</b> More </p>
5	<p>The webpage will automatically redirect into the Authorization Portal (Jiva) to the “My Dashboard” screen.</p>

# MDwise Authorization Portal Instructions Documentation

	
6	<p>From the “Dashboard” screen, click on the blue “My Requests” link that is located in the top left widget.</p> 
7	<p>Locate the filters and filter, as needed, to locate the initial request that needs an extension/concurrent added.</p> 
8	<p>Once the member is located, click on the cogwheel in the “Actions” column of the member. Choose “Open”.</p>  <p><b>Important to Note:</b> There may be authorizations that are too old for an extension. The user will see a notification from the system that the episode is closed and can only be viewed. Please contact MDwise directly for these extensions.</p>
9	<p>Click the checkbox to the left of the “Initial” or the last “Extension” added for the desired line item(s).</p>

## MDwise Authorization Portal Instructions Documentation

▼ Stay Request

<input type="checkbox"/>		Service Type
<input type="checkbox"/>	Initial	Inpatient

10 Click the white “Extension” button that appears above the Stay/Service Request line.

Extension

▼ Stay Request

<input checked="" type="checkbox"/>		Service Type	L
<input checked="" type="checkbox"/>	Initial	Inpatient	

11 **For Medical IP and BHIP:** Enter in the required details (dropdowns with a red asterisk “\*”) for the extension request. *Then Skip to step #13.*

Requested Date \* 09/07/2023

Request Received Time \* 12  32

Request Type \* --Select One--

Request Priority \* --Select One--

Time Request

Due Date

LOS Requested # \* 0

Requested Level Of Care INPBH-Template-Inpatient Behavioral Health

Request Type	Description
Preservice	Initial medical and behavioral health inpatient services (unscheduled and scheduled admits)
Concurrent	Continuation of a medical or behavioral health service already submitted.
Retrospective	“Retro” use only after the member has been discharged.

Request Type	CHOOSE Priority:
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## MDwise Authorization Portal Instructions Documentation

Initial and concurrent Preservice ( <i>Acute Medical and Behavioral Health and Next Level of Care</i> )	Urgent -48 hours
Preservice- ( <i>Scheduled Admits</i> )	Standard- 5 BD (Business Days)
Retrospective- use only after the member has been discharged.	Standard -30 CD (Calendar Days)

12

**For Medical OP and BH OP:** Enter in the required details (dropdowns with a red asterisk “\*”) for the extension request.

The screenshot shows a form with the following fields:

- Requested Date: 01/28/2024
- Request Received Time: 18 (dropdown), 15 (dropdown)
- Request Type: --Select One-- (dropdown)
- Request Priority: --Select One-- (dropdown)
- Requested #: (empty field)
- Start Date: 02/05/2024
- End Date: (empty field)

Request Type	Description
Preservice	<ul style="list-style-type: none"> <li>Initial medical and behavioral health outpatient services.</li> <li>Concurrent medical outpatient services.</li> <li>Concurrent IOP, ABA, Psych testing, and Neuropsych testing services.</li> </ul>
Concurrent	Continuation of a SUDRT/PHP service already submitted.
Retrospective	“Retro” Use only after services have been rendered completely

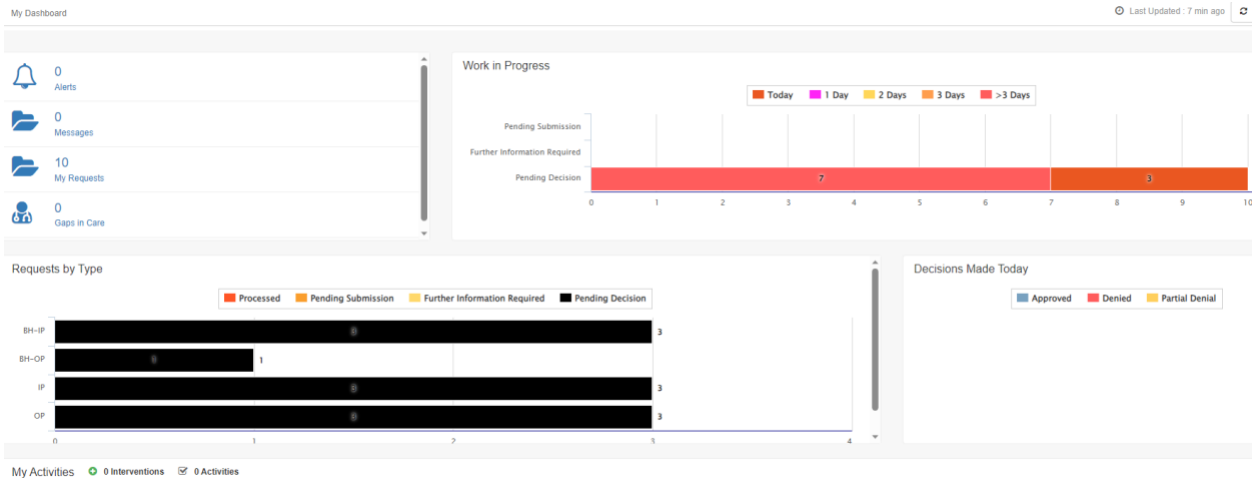
Request Type	CHOOSE:
Initial and Concurrent Medical Preservice	Standard 5 BD (Business Days)
Initial and Concurrent Intensive Outpatient (IOP), Applied Behavioral Analysis, and Psych/Neuro testing	Standard 5 BD (Business Days)
Initial and Concurrent PHP/SUDRT/Urgent Medical OP Preservice	Urgent 48 hours

## MDwise Authorization Portal Instructions Documentation

	Retrospective	Standard 30 CD (Calendar Days) Use only after services have been rendered completely.
<p><b>Important to Note:</b> Priority may be changed by MDwise if the request does not meet the definition of Urgent.</p>		
13	<p>Click the green “Save” button to complete the request.</p> <div style="text-align: center; border: 1px solid gray; padding: 10px; margin: 10px auto; width: fit-content;"> <span style="background-color: #4CAF50; color: white; padding: 5px 15px; border-radius: 5px; margin-right: 20px;">Save</span> <span style="color: #2196F3; text-decoration: underline; padding: 5px 15px; border-radius: 5px;">Cancel</span> </div>	

### Reviewing the Prior Authorization Dashboard

The dashboard in the Authorization Portal is comprised of several widgets that quickly display data related to the individual assigned provider.



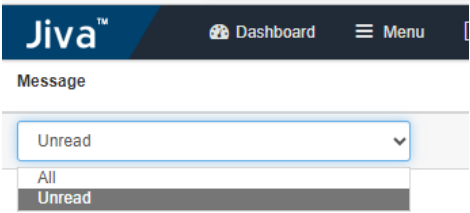

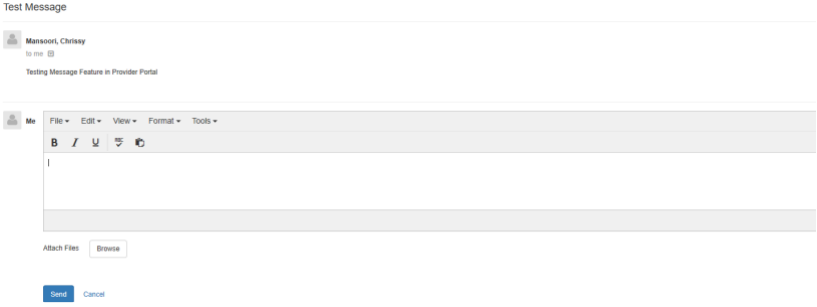

Alerts	Alerts are system generated messages to the assigned user that will present important information about specific requests. These messages will only pertain to requests by the assigned provider.
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# MDwise Authorization Portal Instructions Documentation

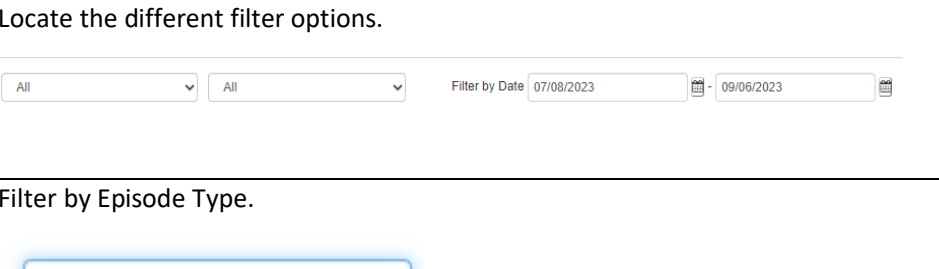
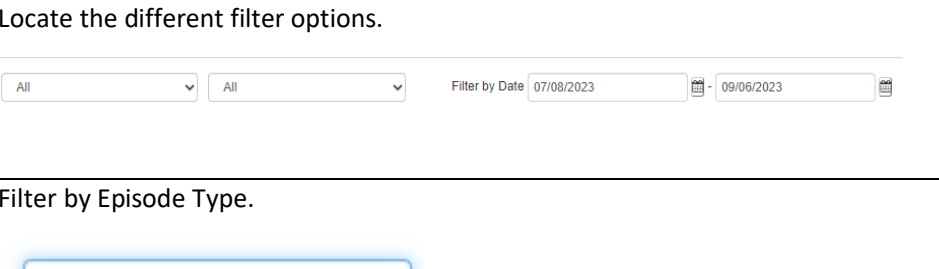
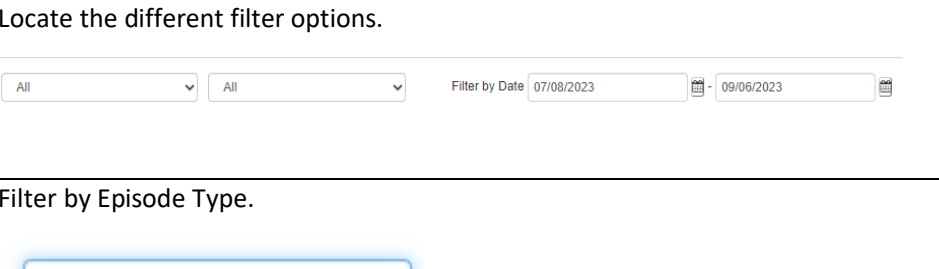
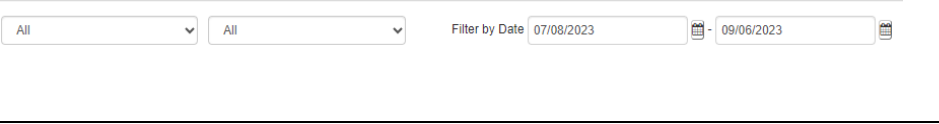
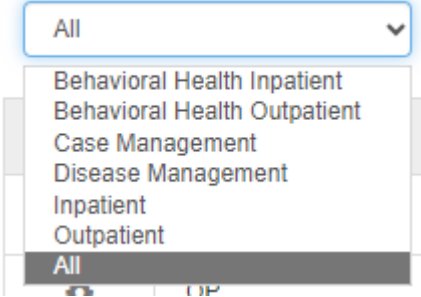
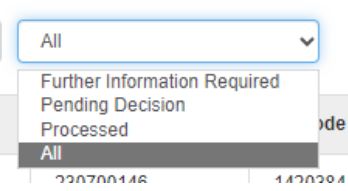
## Messages

Messages are sent via the Jiva application. The messages are notes that pertain to a request or a member that have been sent to individual assigned provider.

**NOTE:** Unlike in the “Alerts” link, messages here may pertain to requests made by anyone other than the assigned provider.
















Step	Action
1	<p>View message (Choose “All” or “Unread”).</p> 
2	<p>Choose any message to read.</p> 
3	<p>To respond to a message, type the response in the text field box.</p> 
4	<p>Click the “Send” button when complete.</p> 

## MDwise Authorization Portal Instructions Documentation

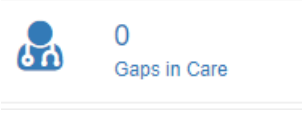


<p>My Requests</p>	<p>Any new requests created by a provider are grouped, and can be accessed, using this link</p>				
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #d9e1f2;"> <th style="width: 10%;">Step</th> <th>Action</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td> <p>Click the “My Requests” link.</p>  </td> </tr> </tbody> </table>	Step	Action	1	<p>Click the “My Requests” link.</p> 
	Step	Action			
	1	<p>Click the “My Requests” link.</p> 			
	<p>2</p> <p>Locate the different filter options.</p> 				
<p>3</p> <p>Filter by Episode Type.</p>  <p><b>Important to Note:</b> This is optional, as an individual request can be selected from the list.</p>					
<p>4</p> <p>Filter by status.</p> 					
<p>5</p> <p>Click the “cogwheel” in the “Actions” column to the left of the Episode Type for the desired request. Select the “Open” option.</p>					



## MDwise Authorization Portal Instructions Documentation

	<table border="1"><thead><tr><th data-bbox="479 186 609 241">Actions</th><th data-bbox="609 186 876 241">Episode Type</th></tr></thead><tbody><tr><td data-bbox="479 241 609 304"></td><td data-bbox="609 241 876 304">BH-IP</td></tr><tr><td colspan="2" data-bbox="527 304 836 420"><table border="1"><tr><td data-bbox="560 315 592 346"></td><td data-bbox="592 315 836 346">Open</td></tr><tr><td data-bbox="560 367 592 399"></td><td data-bbox="592 367 836 399">View Episode Abstract</td></tr></table></td></tr></tbody></table> <p data-bbox="479 430 1412 598"><b>Important to Note:</b> Episodes that have a 'Processed' status can be viewed, but not modified. The user will see a pop-up screen as a warning. Click the 'OK' button to continue.</p>	Actions	Episode Type		BH-IP	<table border="1"><tr><td data-bbox="560 315 592 346"></td><td data-bbox="592 315 836 346">Open</td></tr><tr><td data-bbox="560 367 592 399"></td><td data-bbox="592 367 836 399">View Episode Abstract</td></tr></table>			Open		View Episode Abstract	
Actions	Episode Type											
	BH-IP											
<table border="1"><tr><td data-bbox="560 315 592 346"></td><td data-bbox="592 315 836 346">Open</td></tr><tr><td data-bbox="560 367 592 399"></td><td data-bbox="592 367 836 399">View Episode Abstract</td></tr></table>			Open		View Episode Abstract							
	Open											
	View Episode Abstract											

## MDwise Authorization Portal Instructions Documentation

Gaps in Care	<p>Gaps in Care is a system-generated message designed to notify whether a member is following treatment guidelines that are appropriate to a specific condition or disease process.</p>		
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Step</th> <th>Action</th> </tr> </thead> </table>		Step	Action
Step	Action		
1	<p>Click the “Gaps in Care” link.</p> 		
2	<p>Filter by drop down options below:</p> 		
3	<p>Click the “cogwheel” to the left of the “Member Name” column.</p> 		
4	<p>Choose the desired option.</p> 