



## Jiva Provider Portal Participant Guide

Corporate Clinical Systems Training Department

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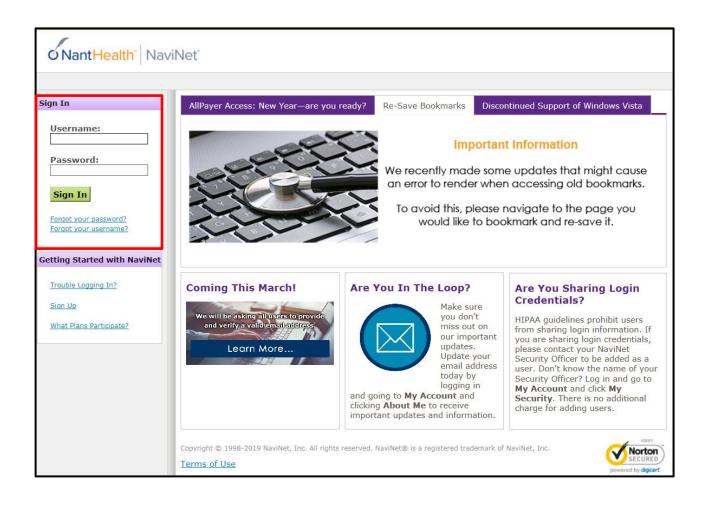
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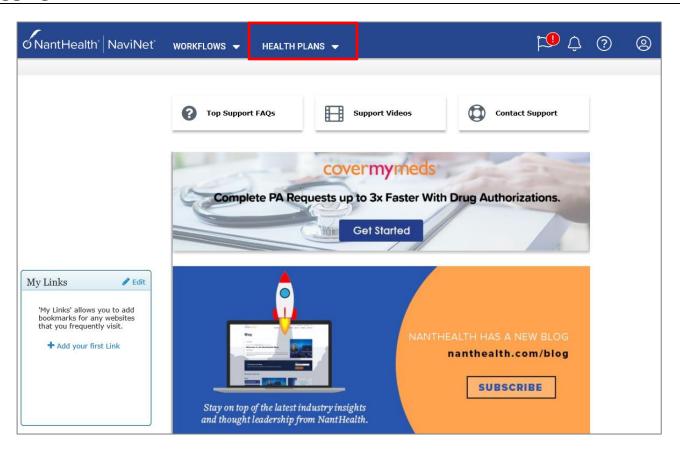
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# 1 LOGGING IN TO THE JIVA PROVIDER PORTAL



Step	Action
1.	Access NaviNet using the following address: <a href="https://navinet.navimedix.com">https://navinet.navimedix.com</a>
2.	Enter your <b>Username</b>
3.	Enter your Password
4.	Click the <b>Sign In</b> button <b>Result</b> : The NaviNet Home screen will be displayed

#### Logging in to Jiva Provider Portal



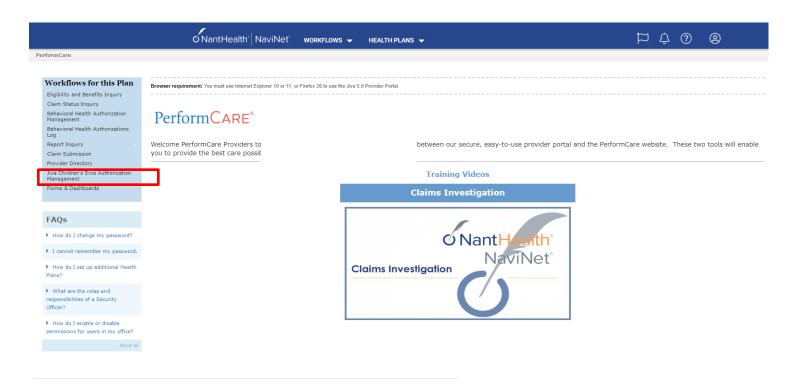
The NaviNet Home Page is not Health Plan-specific.

To locate your Health Plan:

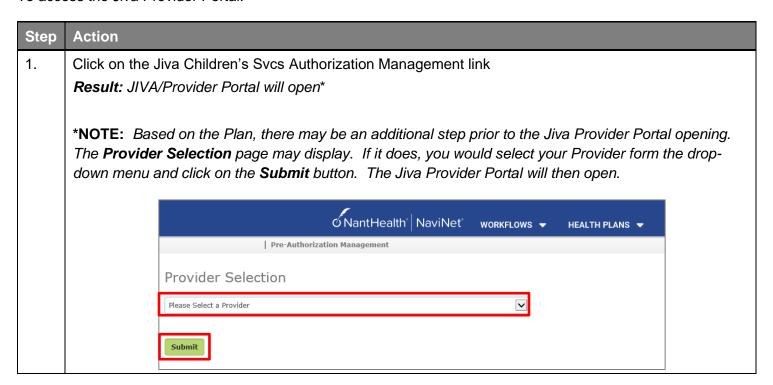
Step	Action
1.	Click on <b>HEALTHPLANS</b> in the top menu
2.	Select the appropriate <b>health plan</b> from the drop down list
	Result: The Health Plan-specific Home page will display

#### Logging in to Jiva Provider Portal

The general layout of the Health Plan Home page will be similar across all Health Plans. However, each Health Plan may have customized items on their home page, such as links available in the **Workflows for the Plan** section.



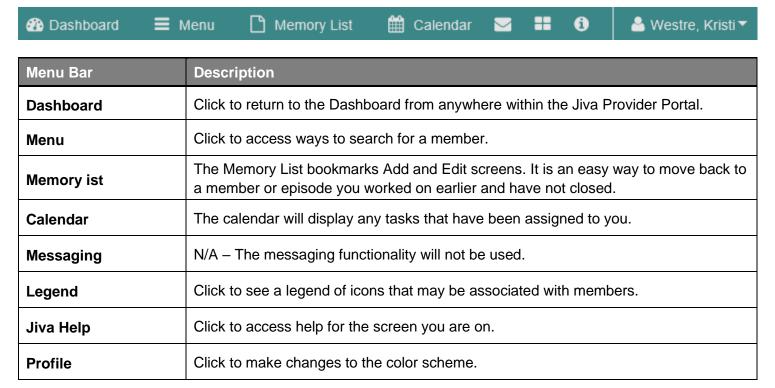
#### To access the Jiva Provider Portal:



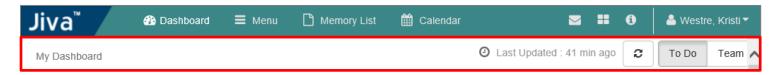
#### **Overview of the Dashboard**

The dashboard consists of widgets (or panels) that help you to access the tasks that are assigned to you. It also provides high-level information about the episodes and activities assigned to you.

#### **Application Banner**



#### My Dashboard Banner



Item	Description
Last Updated	Displays the last time the Dashboard was updated
Refresh	Click the Refresh icon to update the Dashboard to view the most current information.
To Do	Displays the widgets containing information regarding episodes associated with you.
Team	Displays the widgets containing information regarding episodes associated with your team.

#### Overview of the Dashboard: To-Do View

These widgets contain information regarding the episodes associated with you.

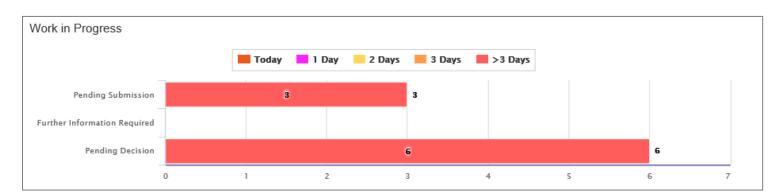
#### **Information Widget**



Item	Description								
Alerts	Displays the number of notifications or reminders of an action performed, or to be performed. Click on the hyperlink to view the alerts.								
Messages	N/A – This functionality will not be used.								
My Requests	Displays the number of episodes that have been submitted. Click the hyperlink to view the list of requests.    My Requests								
Gaps in Care	Displays any Gaps in Care for the members associated with you.								

#### **Work in Progress Widget**

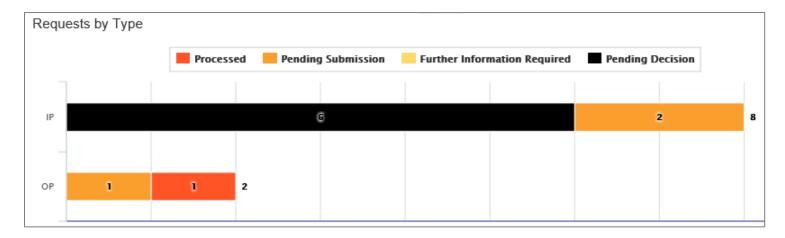
You can view the request statistics by status in the Work in Progress widget. It displays the number of requests created and their statuses in a graphical representation. It also displays the number of days that a request is in the same status (color coded). Clicking on a bar in the graph will display those given episodes.



#### Overview of the Dashboard: To-Do View, continued

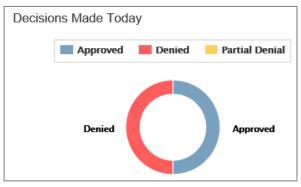
#### Requests by Type Widget

The Requests by Type widget displays the number of requests that are processed, pending for submission, pending for decision, and awaiting further information based on the episode types.



#### **Decisions Made Today Widget**

The Decisions Made Today widget displays the statistics of stay and service requests that are approved, denied, or partially denied pertaining to the requests made by you. Click on a status in the graph to view the associated episode(s).



#### **My Activities Widget**

The My Activities widget displays the list of activities assigned to you that are schedule to be performed on the current date, by default.

#### Overview of the Dashboard: Team View

The Team view will display information regarding your team.

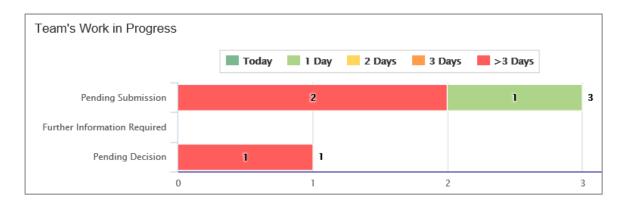
#### **Team Members Widget**

The Team Members widget displays the number of team members along with their names. You can access episodes associated with your team members by clicking on their names. This will take you to their Dashboard.



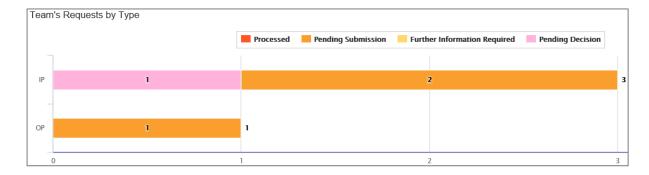
#### **Team's Work in Progress Widget**

The Team's Work in Progress widget displays the number of episodes created by your team and is displayed based on the timeline.



#### **Team's Requests by Type Widget**

The Team's Request by Type widget displays the number of requests that are processed, pending for submission, pending for decision, and awaiting further information depending on the episode types. You may click on a bar in the graph to access the specific information.



## **2 SEARCHING FOR A MEMBER**

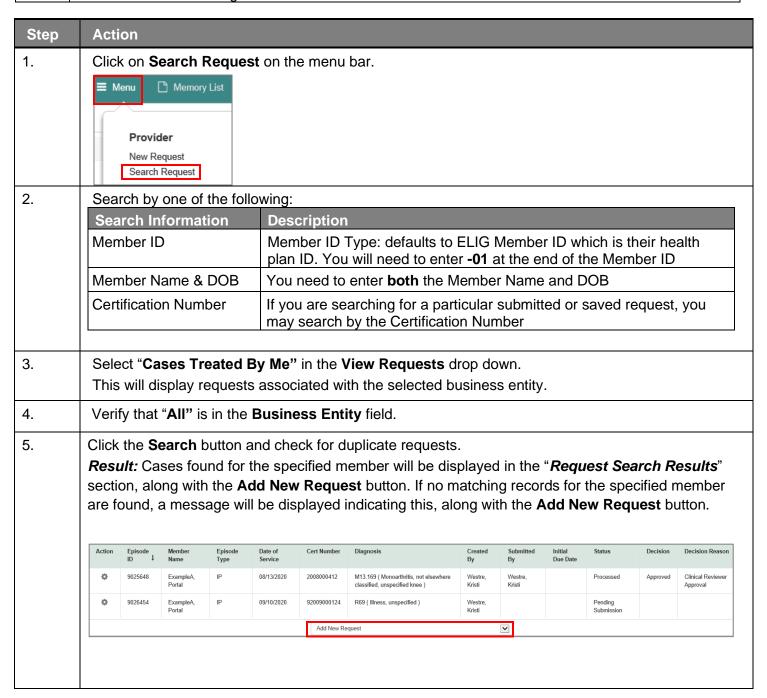
#### Searching for a Member - Search Request Tab

It is recommended that you search for a possible duplication before entering a request. Conducting the search using **Search Request** allows you to view existing requests for a member.



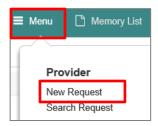
#### **Duplicate Case Check and Alert**

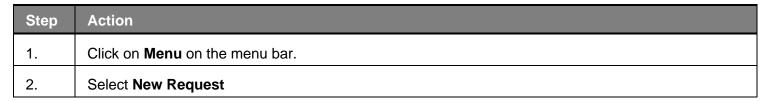
- Jiva will compare dates of service, treating provider and procedure request to other cases for the member. You will receive a warning message if a possible duplicate exists.
- Jiva will not auto approve any case that is a possible duplicate. The request will be evaluated by the Utilization Management team.

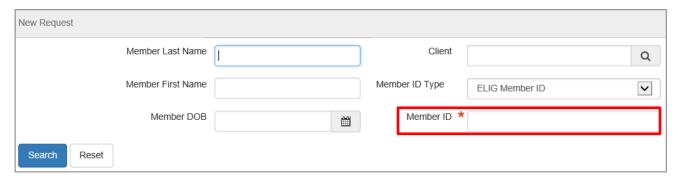


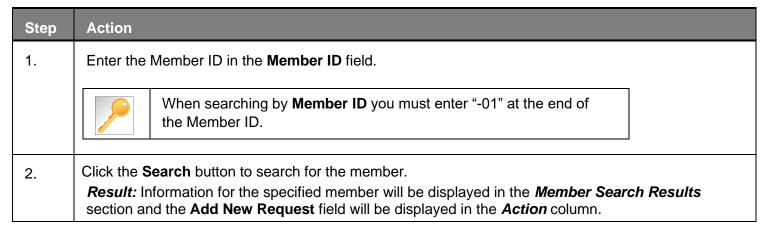
#### **Searching for a Member – New Request Tab**

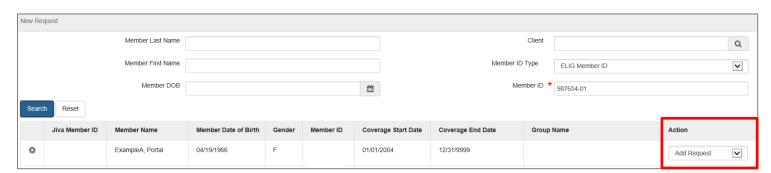
If the **Add New Request** button is not displayed after searching for a member using the **Search Request** tab, you can search for a member and add a new request using the **New Request** tab.











## **3 ENTER AN IP CLINICAL REQUEST**

#### **How to Enter an Inpatient Clinical Request**

When entering a request you have 2 options:

- 1) Enter a clinical request which includes all clinical information.
- 2) Enter a nonclinical request where the clinical information can be added at a later time.

The steps in this chapter outline how to enter an IP clinical request. Reference chapter 4 "How to Enter an IP Non-clinical Request" and Chapter 5 "How to Add Clinical Information to an Existing IP Non-clinical Request" for more information.

When entering a **clinical** request, you **must provide** the following information:

- Episode Details
- Diagnosis- primary a must, secondary is optional
- Treating Provider
- Attending Physician
- Add stay request
- Add Assessment (if triggered)
- All clinical information

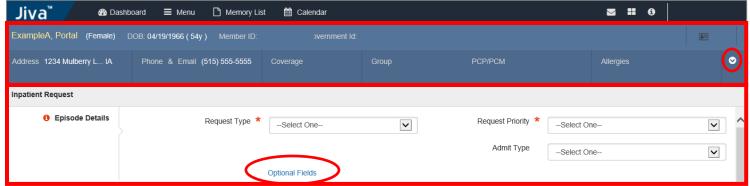


Requests where the clinical information is entered may auto approve based on what is requested and the information provided in the Assessment.

#### Adding a New IP Clinical Request - Adding Episode Details

After locating the member (following the steps outlined in Chapter 2), click on **Add New Request** and select **Inpatient** from the drop-down list.

The Member Demographics are at the top of the page. You may click the drop-down caret on the right to expand the demographics window.



Follow these steps to complete the **Episode Details** section:

Step	Action
1.	Select the appropriate <b>Request Type</b> from the drop down
2.	Select the appropriate Request Priority from the drop down
3.	Select the appropriate <b>Admit Type</b> from the drop down

If you click the **Optional Fields** hyperlink, additional fields will be displayed.



- Time Request: This field will auto-populated based on the Request Priority.
- Reason for Request: Select the appropriate reason from the drop down.

#### Adding a New IP Clinical Request - Adding Diagnosis

You can add multiple diagnoses from this screen or you can utilize the **Favorite Diagnosis** hyperlink to save time and keystrokes. The **Favorite Diagnosis** function will allow you to create and manage a list of frequently used diagnoses. The list is unique to the provider's account. Reference Chapter 9 "Favorite Diagnosis List – How to Create a Favorites List."



Step	Action					
1.	Code Type will default to ICD10. You may select a different code type if applicable.					
2.	Type the diagnosis or code in the <b>Diagnosis</b> field. You may also use the <b>Advanced Search</b> function, if needed.					
3.	Once you select	the diagnos	s, it will display on the screen	and be attached to	o the episode	
	Primary Dx Code Ty		Diagnosis	Actions		
	*	ICD10	I50.9Heart failure, unspecified			
	*	ICD10	R69Illness, unspecified	•		
	If you want to add add		Then Repeat steps 2 and 3.			
		itional F		osis unless there is selected nary Dx column if y	s more	

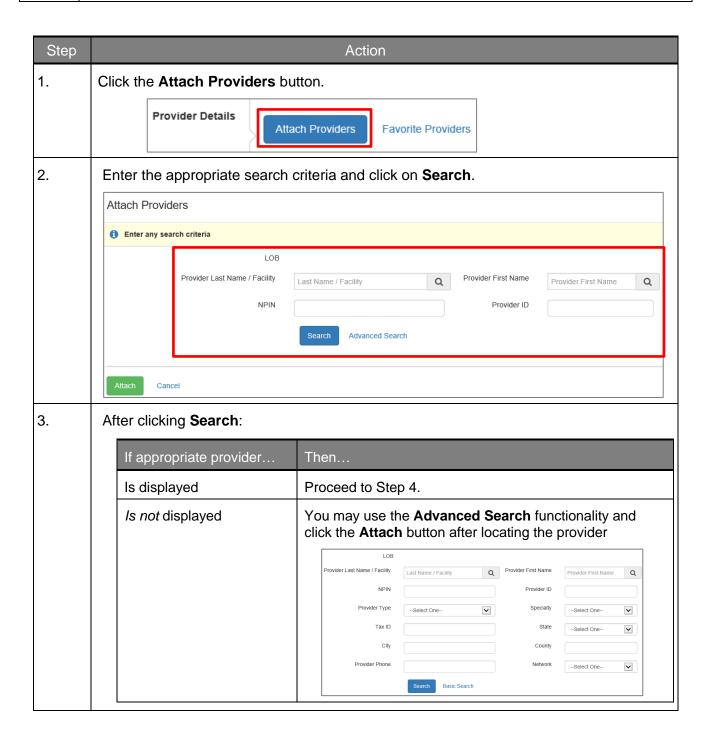
#### Adding a New IP Clinical Request – Adding Providers

All Inpatient requests require a **Treating** provider (Facility) and an **Attending** physician.

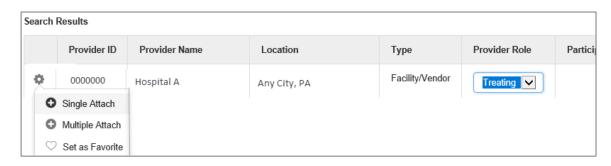
The steps below outline the processes for adding providers to the request.



**Favorite Providers** - You can utilize the Favorite Providers hyperlink to save time and keystrokes. The **Favorite Providers** list will allow you to create and manage a list of frequently used providers. Reference Chapter 9 "Favorite Provider List—How to Create a Favorites List."



#### Adding a New IP Clinical Request - Adding Providers (cont.)



Step		Action
4.	•	Search for the facility.
	•	Once you have located the facility, select " <b>Treating</b> " from the drop-down list in the <b>Provider Role</b> column, click the icon next to the provider row and select Single Attach to attach the provider to the episode.
		Result: The Provider will be attached and listed in the Providers section of the episode.
5.	•	Search for the attending physician.
	•	Once you have located the physician, select "Attending" from the drop-down list in the <i>Provider</i> **Role* column, click the icon next to the provider row and select Single Attach to attach the provider to the episode.
		Result: The Provider will be attached and listed in the Providers section of the episode.



If you want to	Then				
Attach multiple	Follow the steps outlined below:				
providers to an episode at the	Search for the desired providers				
same time	In the row of each desired provider in the search results screen, select the appropriate Provider Role from the drop-down list, click the				
	icon next to the row and select the Multiple Attach option				
	<ul> <li>As each provider is selected, they will be added to the "Selected Providers List" at the bottom of the screen</li> </ul>				
	When all providers have been added, verify the selected Provider				
	Role and click the Attach button to add them to the episode.				

Provider Details	ID	Name	Location	Role	Network	Phone	Action
		Hospital A		Treating			0
		Provider A		Attending			0

#### **NOTE:**

If the incorrect provider is attached, click the **Deactivate** icon to deactivate the facility. The facility will be removed from the episode.

#### Adding a New IP Clinical Request - Adding Stay Request

You can add a Stay Request (length of stay/days in hospital) without adding a Service Request. The Service Request is used to request a surgical procedure. The following steps outline how to add the Stay Request.



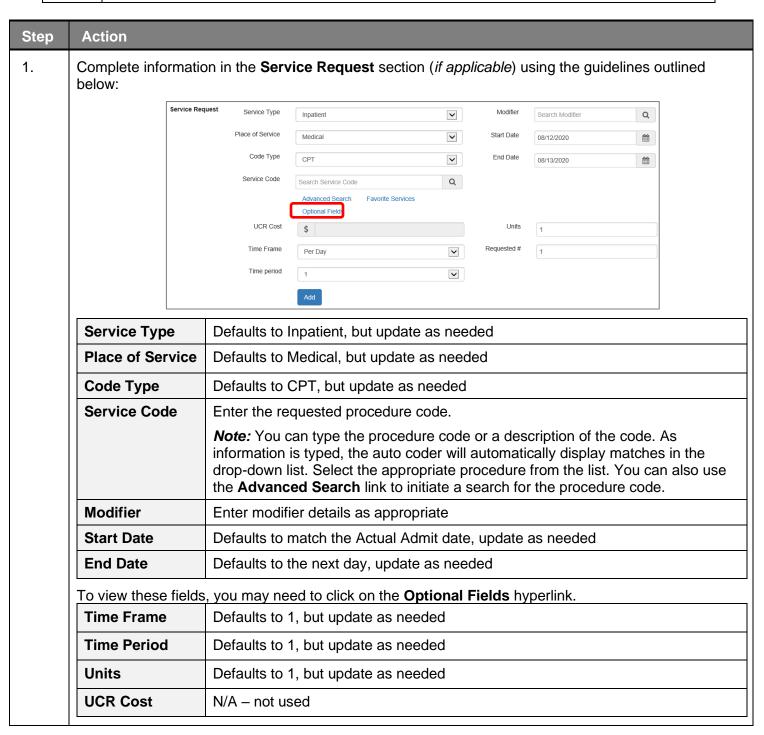
Step	Action
1.	Select the most appropriate choice in the <b>Service Type</b> drop down.
2.	Select the most appropriate choice in the Place of Service drop down.
	<u>Note</u> - If you are uncertain, select " <b>Medical</b> ."
3.	Select the most appropriate "type of bed or unit" in which the member was admitted in the Requested Level of Care drop down.
4.	Enter the "date of admission" in the <b>Admit Date</b> field.
5.	Enter "1" in the LOS Requested # field.

#### Adding a New IP Clinical Request – Adding Service Request (if applicable)

When adding a procedure to an Inpatient request, you will need to complete the **Service Request** section.



**Favorite Services** - You can utilize the Favorite Services hyperlink to save time and keystrokes. The **Favorite Services** functionality will allow you to create and manage a list of frequently used services. Reference Chapter 9 "*Favorite Services List–How to Create a Favorites List.*"



#### Adding a New IP Clinical Request – Adding Service Request (if applicable), cont.

Step	Action								
2.	Click the Add button  Result: The Service Request line will now be populated (appears below the Service Request fields)  Service Request								
	Action		Service Code	Requested#	Start Date	End Date	Service Type	Place of Service	Review Status
	•		93352(CPT)	1	08/12/2020	08/13/2020	Inpatient	Medical	
	<b>Note:</b> If a Service Request was added in error or with incorrect information, you may click the icon in the <b>Action</b> column to remove the given line.								
3.	Repeat Step	ps 1 ar	nd 2 to add a	dditional se	ervices, if a	ppropriate			

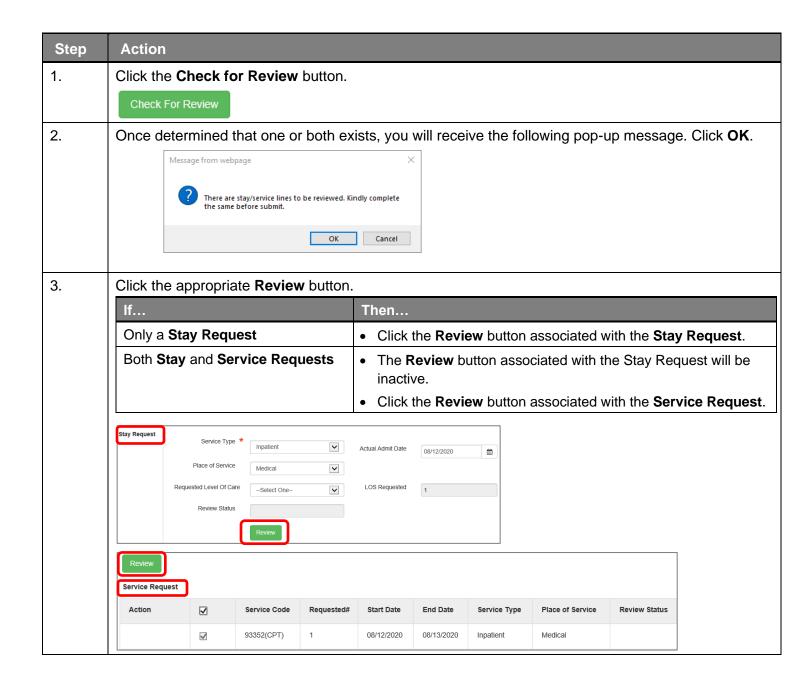
#### Adding a New IP Clinical Request - InterQual

Access and complete InterQual Connect Clinical Criteria

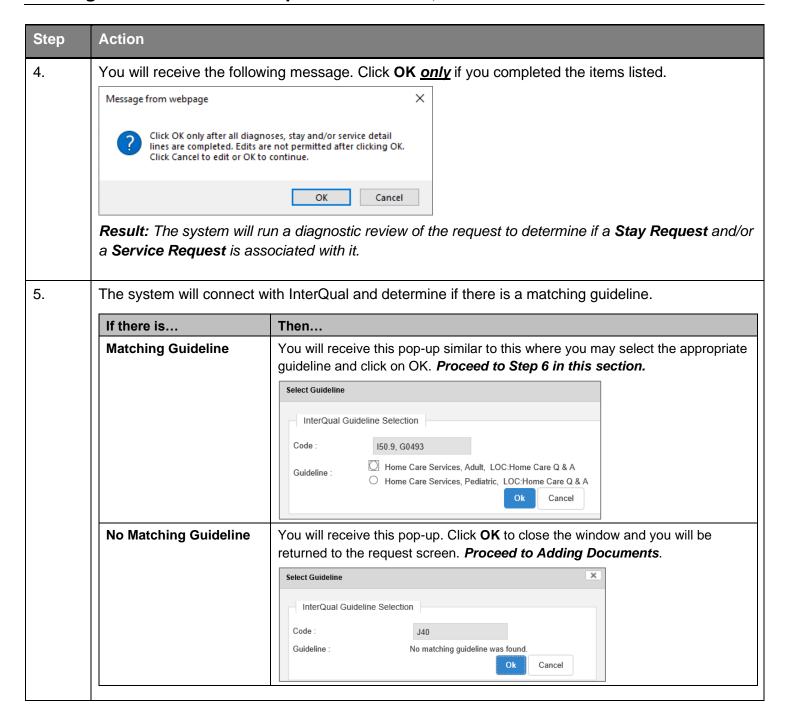


If you need training or have questions regarding the use of InterQual Connect criteria, please contact your facility InterQual trainer or contact your Change HealthCare account representative.

The health plan is certified to conduct training for internal associates only.



#### Adding a New IP Clinical Request – InterQual, cont.

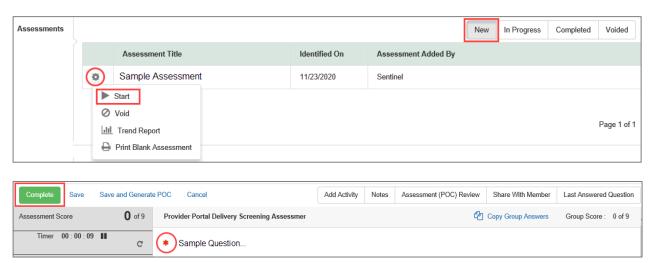


#### Adding a New IP Clinical Request – InterQual, cont.

Step	Action				
6.	After answering Criteria Not Me	g the review questions, the Recommendations page will display either <b>Criteria Met</b> or <b>et.</b>			
7.	From the <b>Recommendations</b> page:				
	If you click	Then			
	Save	The review will be saved and can be updated, if needed, prior to submitting the request.			
	Complete	The review will be saved and closed. It cannot be updated even if you have not yet submitted the request.			
8.	Close the Inter	Qual tab to return to the Jiva Provider Portal			
9.	The request lin	e will now display a status in the <b>Decision</b> column.			

#### Adding a New IP Clinical Request - Adding Assessments

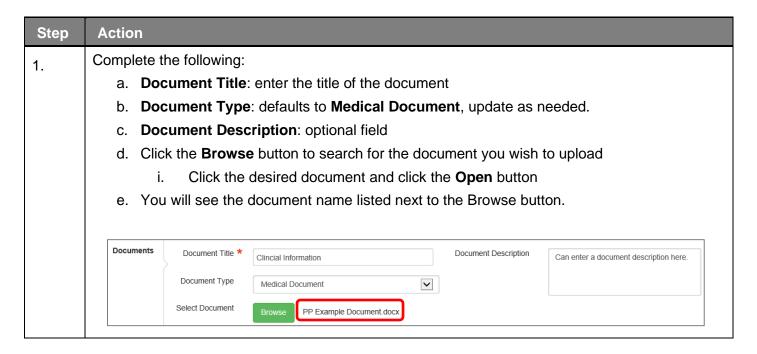
If an assessment is associated with the request, an **Assessment** section will be displayed where you may access and complete the associated assessment.



Step	Action
1.	In the <b>New</b> Tab of the Assessment section, click on the gear icon to the left of the Assessment and click on <b>Start</b> .
2.	Answer the questions.  Note - Questions in red are mandatory.
3.	Click the <b>Complete</b> button to complete the assessment. <b>Note</b> - This will trigger any auto approval rules (if configured.) The <b>Save</b> button will <b>not</b>
	trigger the auto approval rules.

#### Adding a New IP Clinical Request - Adding Documents

When submitting an **IP Clinical Request**, you must attach the clinical information. Follow these instructions to add a **Documents**.



#### Adding a New IP Clinical Request – Adding Notes



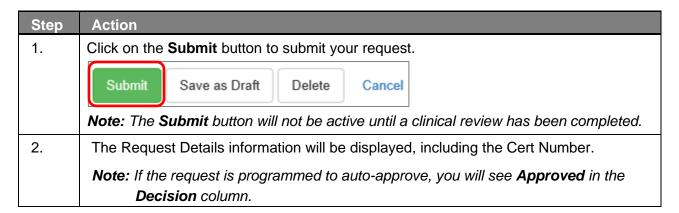
Step	Action
1.	Select the appropriate <b>Note Type</b> from the drop-down menu.
2.	Enter the appropriate notes in the notes section. Be sure to include your <b>name</b> and <b>contact information</b> in the event the Plan needs to contact you.

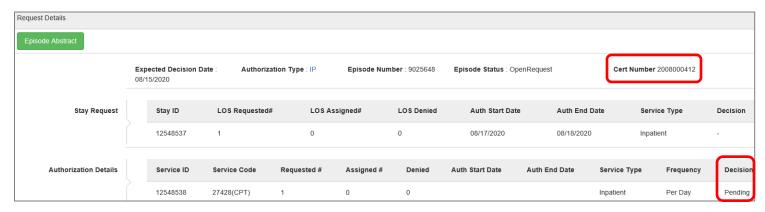


This is a shared note field. Notes can be viewed and entered by both you and the plan.

#### Adding a New IP Clinical Request - Submitting the Request

Once all required sections are completed, you are ready to submit the request.





## **4 ENTER AN IP NON-CLINICAL REQUEST**

#### **How to Enter an Inpatient Non-Clinical Request**

A non-clinical request can be started by non-clinical staff or anyone who does not have clinical information available at the time of entry.

The non-clinical request can be saved and is available to access at a later time in order to add clinical data.

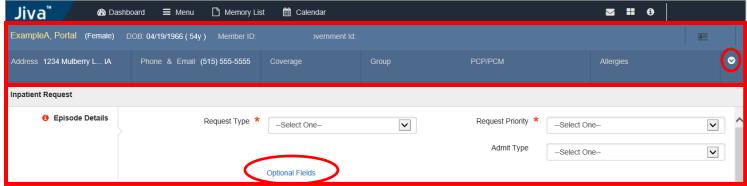
When entering a **non-clinical** request, you **must provide** the following information:

- Episode Details
- Diagnosis- primary a must, secondary is optional
- Treating Provider
- Attending Physician
- Add stay request

#### Adding a New IP Non-Clinical Request – Adding Episode Details

After locating the member (following the steps outlined in Chapter 2), click on **Add New Request** and select **Inpatient** from the drop-down list.

The Member Demographics are at the top of the page. You may click the drop-down caret on the right to expand the demographics window.



Follow these steps to complete the **Episode Details** section:

Step	Action
1.	Select the appropriate <b>Request Type</b> from the drop down
2.	Select the appropriate Request Priority from the drop down
3.	Select the appropriate <b>Admit Type</b> from the drop down

If you click the **Optional Fields** hyperlink, additional fields will be displayed.



- Time Request: This field will auto-populated based on the Request Priority.
- Reason for Request: Select the appropriate reason from the drop down.

#### Adding a New IP Non-Clinical Request – Adding Diagnosis

You can add multiple diagnoses from this screen or you can utilize the **Favorite Diagnosis** hyperlink to save time and keystrokes. The **Favorite Diagnosis** function will allow you to create and manage a list of frequently used diagnoses. The list is unique to the provider's account. Reference Chapter 9 "*Favorite Diagnosis List – How to Create a Favorites List*."



Step	Action				
1.	Code Type will default to ICD10. You may select a different code type if applicable.				
2.	Type the diagnosis or code in the <b>Diagnosis</b> field. You may also use the <b>Advanced Search</b> function, if needed.				
3.	Once you select	the diagnosi	s, it will display on the screen	and be attached t	o the episod
	Primary Dx Code Typ		Diagnosis	Actions	
	*	ICD10	I50.9Heart failure, unspecified		
	*	ICD10	R69Illness, unspecified	0	
	want to add add	itional F	Repeat steps 2 and 3.		
	want to add add diagnoses	<u>•</u>	Repeat steps 2 and 3.  Note: Click the remove icon to the request.  You cannot remove a diagnothan one diagnosis already start in the Prime to designate a different diagnosis.	osis unless there is selected nary Dx column if	s more

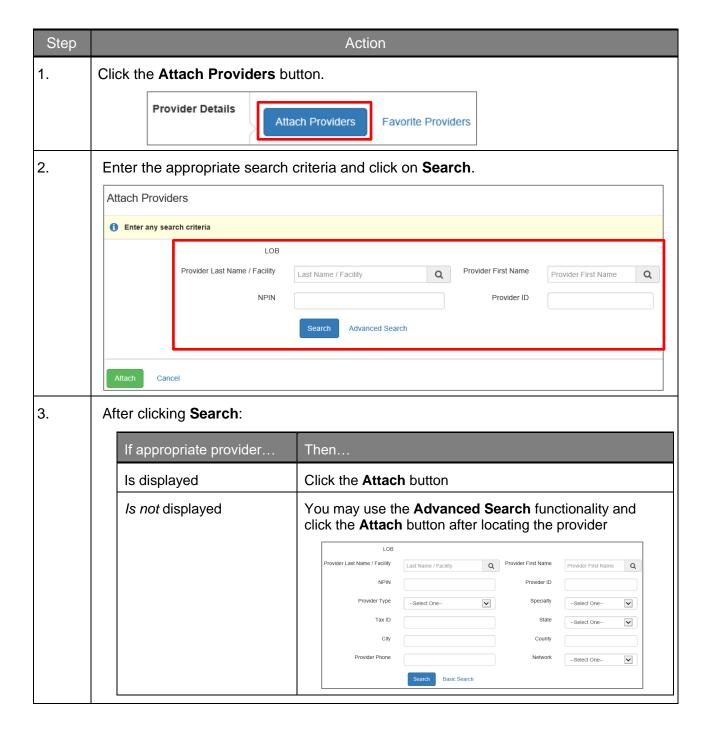
#### Adding a New IP Non-Clinical Request – Adding Providers

All Inpatient requests require a **Treating** provider (Facility) and an **Attending** physician.

The steps below outline the processes for adding providers to the request.



**Favorite Providers** - You can utilize the Favorite Providers hyperlink to save time and keystrokes. The **Favorite Providers** list will allow you to create and manage a list of frequently used providers. Reference Chapter 9 "*Favorite Providers List—How to Create a Favorites List.*"



# Adding a New IP Non-Clinical Request – Adding Providers (cont.)



Step		Action
4.	•	Search for the facility.
	•	Once you have located the facility, select " <b>Treating</b> " from the drop-down list in the <b>Provider Role</b> column, click the icon next to the provider row and select Single Attach to attach the provider to the episode.
		Result: The Provider will be attached and listed in the Providers section of the episode.
5.	•	Search for the attending physician.
	•	Once you have located the physician, select "Attending" from the drop-down list in the <i>Provider</i> **Role* column, click the icon next to the provider row and select Single Attach to attach the provider to the episode.
		Result: The Provider will be attached and listed in the Providers section of the episode.



If you want to	Then
Attach multiple	Follow the steps outlined below:
providers to an episode at the	Search for the desired providers
same time	In the row of each desired provider in the search results screen, select the appropriate Provider Role from the drop-down list, click the
	icon next to the row and select the Multiple Attach option
	<ul> <li>As each provider is selected, they will be added to the "Selected Providers List" at the bottom of the screen</li> </ul>
	When all providers have been added, verify the selected Provider
	Role and click the Attach button to add them to the episode.

Provider Details	ID	Name	Location	Role	Network	Phone	Action
		Hospital A		Treating			0
		Provider A		Attending			0

### **NOTE:**

If the incorrect provider is attached, click the **Deactivate** icon to deactivate the facility. The facility will be removed from the episode.

# Adding a New IP Non-Clinical Request – Stay Request

You can add a Stay Request (length of stay/days in hospital) without adding a Service Request. The Service Request is used to request a surgical procedure. The following steps outline how to add the Stay Request.



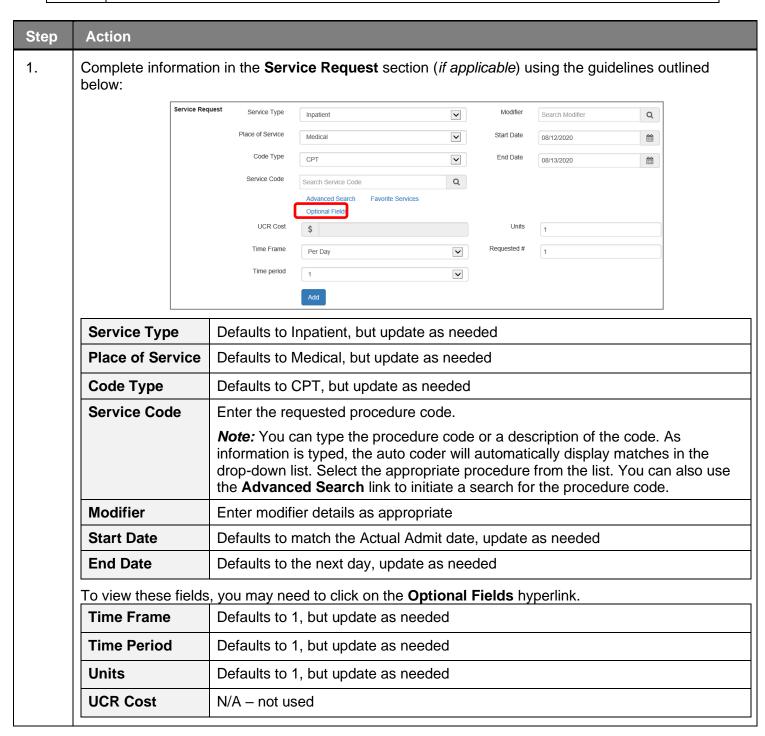
Step	Action
1.	Select the most appropriate choice in the <b>Service Type</b> drop down.
2.	Select the most appropriate choice in the Place of Service drop down.
	<u>Note</u> - If you are uncertain, select " <b>Medical</b> ."
3.	Select the most appropriate "type of bed or unit" in which the member was admitted in the Requested Level of Care drop down.
4.	Enter the "date of admission" in the <b>Admit Date</b> field.
5.	Enter "1" in the LOS Requested # field.

# Adding a New IP Non-Clinical Request – Adding Service Request (if applicable)

When adding a procedure to an Inpatient request, you will need to complete the **Service Request** section.



**Favorite Services** - You can utilize the Favorite Services hyperlink to save time and keystrokes. The **Favorite Services** list will allow you to create and manage a list of frequently used services. Reference Chapter 9 "*Favorite Services List—How to Create a Favorites List.*"



# Adding a New IP Non-Clinical Request-Adding Service Request (if appl), cont.

Step	Action								
2.	Click the <b>Add</b> button  Result: The Service Request line will now be populated (appears below the Service Request fields)  Service Request								
	Action		Service Code	Requested#	Start Date	End Date	Service Type	Place of Service	Review Status
	•		93352(CPT)	1	08/12/2020	08/13/2020	Inpatient	Medical	
	Note: If a Se in the Action		•			incorrect	information,	you may click	the cicon
3.	Repeat Steps 1 and 2 to add additional services, if appropriate								

# Adding a New IP Non-Clinical Request – Adding Documents Follow these instructions to add a Documents.

Step	Action							
1.	Complete the following:							
	a. <b>Do</b> o	cument Title: enter the title of the document						
	b. <b>Do</b> o	cument Type: defaults to Medical Document, update as needed.						
	c. <b>Do</b> o	cument Description: optional field						
	d. Clic	k the <b>Browse</b> button to search for the document you wish to upload						
	ii.	ii. Click the desired document and click the <b>Open</b> button						
	e. You	e. You will see the document name listed next to the Browse button.						
	Documents Document Title * Clincial Information Document Description Can enter a document description here.							
		Document Type Medical Document						
		Select Document  Browse  PP Example Document.docx						

# Adding a New IP Non-Clinical Request – Adding Notes



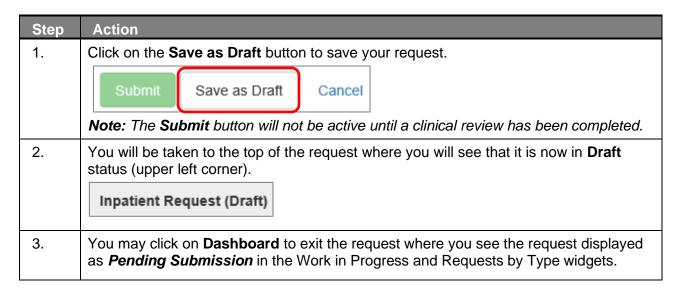
Step	Action
1.	Select the appropriate <b>Note Type</b> from the drop-down menu.
2.	Enter the appropriate notes in the notes section. Be sure to include your <b>name</b> and <b>contact information</b> in the event the Plan needs to contact you.



This is a shared note field. Notes can be viewed and entered by both you and the Plan.

# Adding a New IP Non-Clinical Request - Save as Draft

The **Non-clinical** request must be saved so it is available to access at a later time in order to add clinical data.





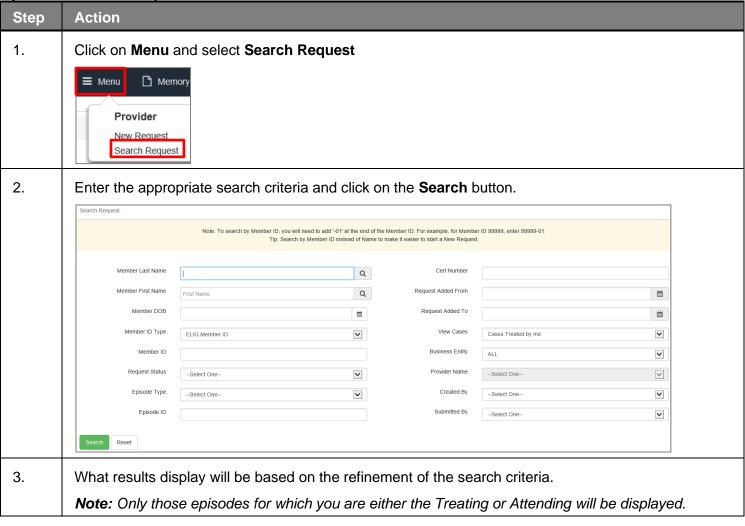
# 

# 5 ADD CLINICAL TO AN EXISTING IP NON-CLINICAL REQUEST

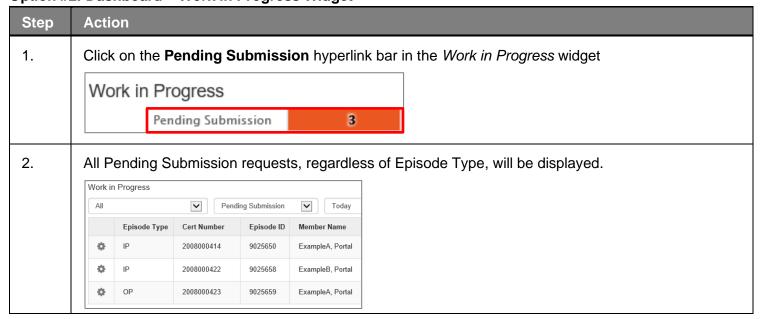
# How to Add Clinical Information to Existing IP Non-Clinical Request

There are three options for accessing the non-clinical request.

Option #1: Search Request

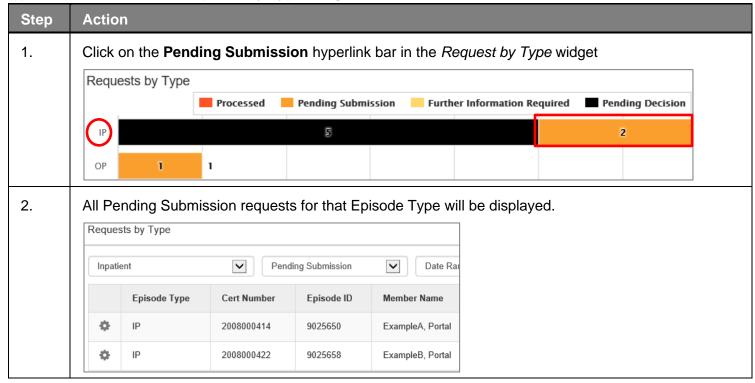


### Option #2: Dashboard - Work in Progress Widget



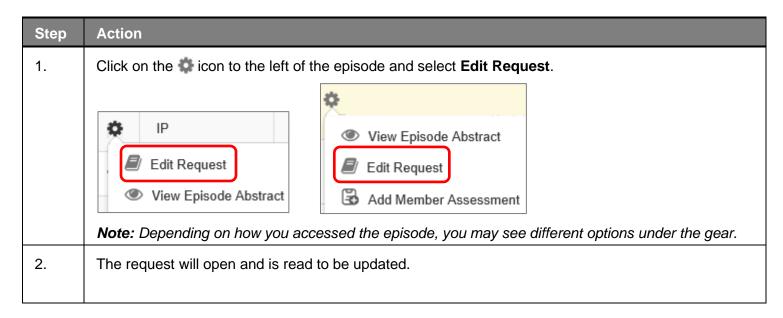
# How to Add Clinical Information to Existing IP Non-Clinical Request

### Option #3: Dashboard - Requests by Type Widget



# Adding Clinical Information to Existing IP Non-Clinical Request – Edit Request

Follow these steps to open the request for editing.

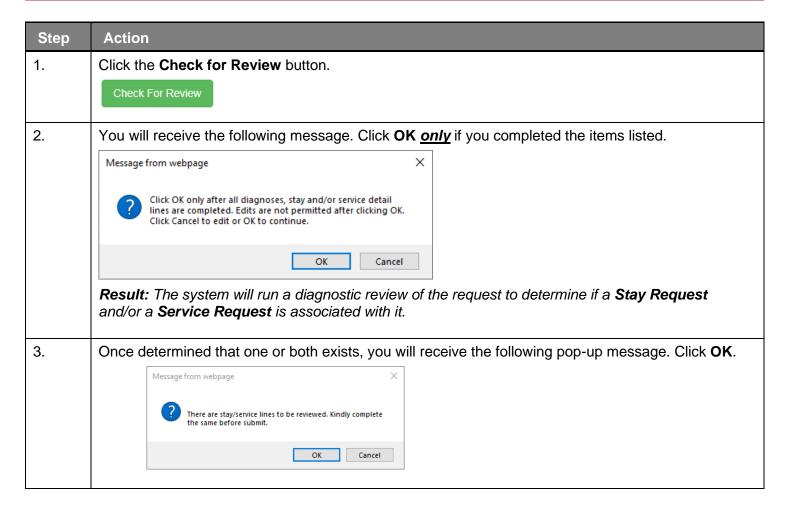


# Adding Clinical Information to Existing IP Non-Clinical Request – InterQual

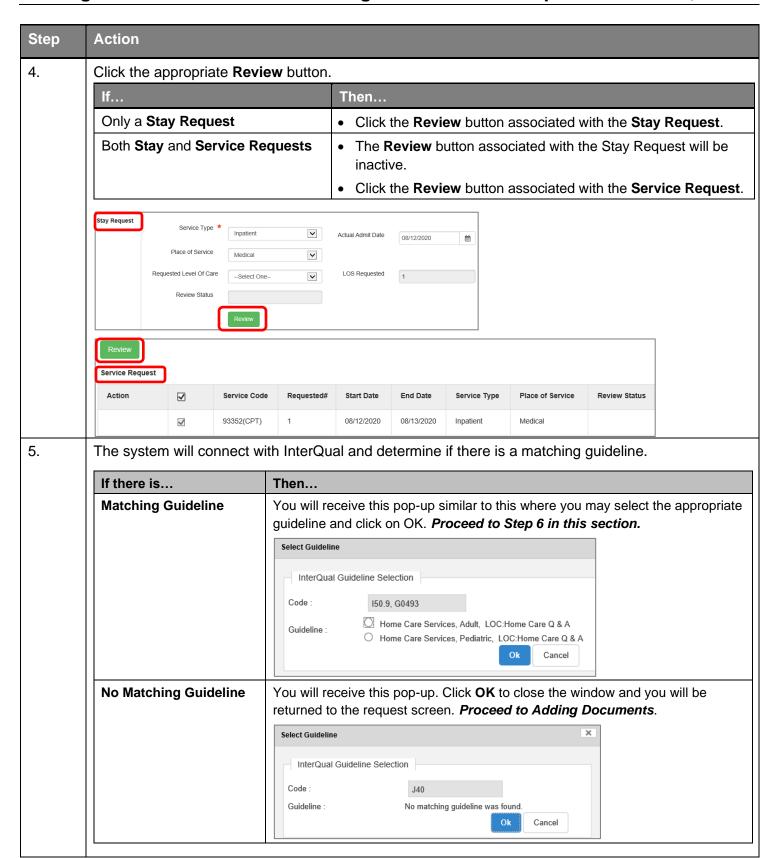


If you need training or have questions regarding the use of InterQual Connect criteria, please contact your facility InterQual trainer or contact your Change HealthCare account representative.

The health plan is certified to conduct training for internal associates only.



# Adding Clinical Information to Existing IP Non-Clinical Request – InterQual, cont.

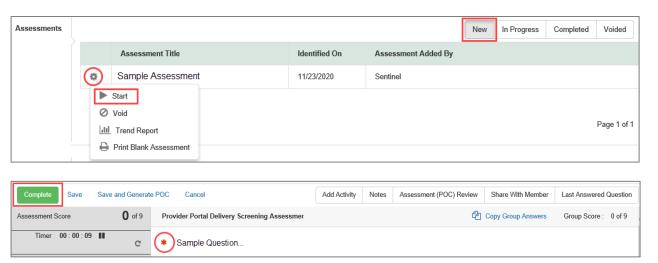


# Adding Clinical Information to Existing IP Non-Clinical Request – InterQual, cont.

Step	Action					
6.	,	After answering the review questions, the Recommendations page will display either <b>Criteria Met</b> or <b>Criteria Not Met.</b>				
7.	From the <b>Recommendations</b> page:					
	If you click	Then				
	Save The review will be saved and can be updated, if needed, prior to subm					
	The review will be saved and closed. It cannot be updated even if you have not yet submitted the request.					
8.	Close the InterQual tab to return to the Jiva Provider Portal					
9.	The request line will now display a status in the <b>Decision</b> column.					

# Adding Clinical Information to Existing IP Non-Clinical Request – Assessments

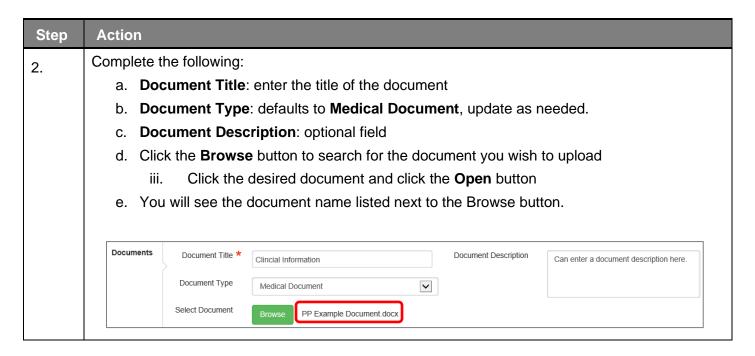
If an assessment is associated with the request, an **Assessment** section will be displayed where you may access and complete the associated assessment.



Step	Action
1.	In the <b>New</b> Tab of the Assessment section, click on the gear icon to the left of the Assessment and click on <b>Start</b> .
2.	Answer the questions.  Note - Questions in red are mandatory.
3.	Click the <b>Complete</b> button to complete the assessment. <b>Note</b> - This will trigger any auto approval rules (if configured.) The <b>Save</b> button will <u>not</u> trigger the auto approval rules.

# Adding Clinical Information to Existing IP Non-Clinical Request – Adding Documents

When submitting an **IP Clinical Request**, you must attach the clinical information. Follow these instructions to add a **Documents**.



# Adding Clinical Information to Existing IP Non-Clinical Request – Adding Notes



Step	Action
3.	Select the appropriate <b>Note Type</b> from the drop-down menu.
4.	Enter the appropriate notes in the notes section. Be sure to include your <b>name</b> and <b>contact information</b> in the event the Plan needs to contact you.

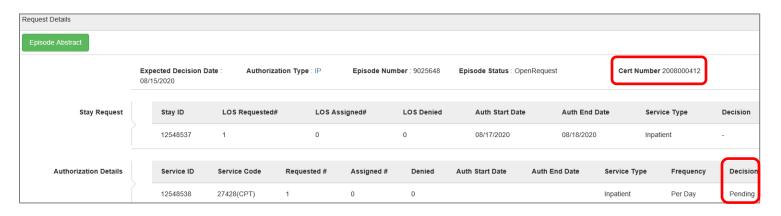


This is a shared note field. Notes can be viewed and entered by both you and the Plan.

# Adding Clinical Information to Existing IP Non-Clinical Request – Submitting the Request

Once all required sections are completed, you are ready to submit the request.

Step	Action					
1.	Click on the <b>Submit</b> button to submit your request.					
	Submit Save as Draft Delete Cancel					
	Note: The Submit button will not be active until a clinical review has been completed.					
2.	The Request Details information will be displayed, including the Cert Number.					
	<b>Note:</b> If the request is programmed to auto-approve, you will see <b>Approved</b> in the <b>Decision</b> column.					



# 

# **6 ENTER AN OP CLINICAL REQUEST**

# **How to Enter an Outpatient Clinical Request**

When entering a request you have 2 options:

- 1) Enter a clinical request which includes all clinical information.
- 2) Enter a non-clinical request where the clinical information can be added at a later time

The steps in this chapter outline how to enter an OP clinical request. Reference chapter 7 "How to Enter an OP Non-clinical Request" and Chapter 8 "How to Add Clinical Information to an Existing OP Non-clinical Request" for more information.

When entering a **clinical** request, you **must provide** the following information:

- Episode Details
- Diagnosis- primary a must, secondary is optional
- Treating Provider
- Referring Provider
- Add service request
- Add Assessments (if triggered)
- Clinical Information

# Adding a New OP Clinical Request - Adding Episode Details

After locating the member *(following the steps outlined in Chapter 2)*, click on **Add New Request** and select **Outpatient** from the drop-down list.

The Member Demographics are at the top of the page. You may click the drop-down caret on the right to expand the demographics window.



Follow these steps to complete the **Episode Details** section:

Step	Action
1.	Request Type: defaults to Expected, update if appropriate
2.	Request Priority: defaults to Standard 24, update if appropriate

If you click the **Optional Fields** hyperlink, additional fields will be displayed.



- Time Request: This field will auto-populated based on the Request Priority.
- Reason for Request: Select the appropriate reason from the drop down.

# Adding a New OP Clinical Request - Adding Diagnosis

You can add multiple diagnoses from this screen or you can utilize the **Favorite Diagnosis** hyperlink to save time and keystrokes. The **Favorite Diagnosis** function will allow you to create and manage a list of frequently used diagnoses. The list is unique to the provider's account. Reference Chapter 9 "Favorite Diagnosis List – How to Create a Favorites List."



Step	Action				
1.	Code Type will default to ICD10. You may select a different code type if applicable.				
2.	Type the diagnosis or code in the <b>Diagnosis</b> field. You may also use the <b>Advanced Search</b> function, if needed.				
3.	Once you select	the diagnos	s, it will display on the screen	and be attached t	o the episod
	Primary Dx Code 1		Diagnosis	Actions	
	*	ICD10	I50.9Heart failure, unspecified		
	*	ICD10	R69Illness, unspecified	•	
	want to add add	itional F	Then Repeat steps 2 and 3.		
	want to add add diagnoses	<u>!</u> -		osis unless there is selected nary Dx column if y	s more

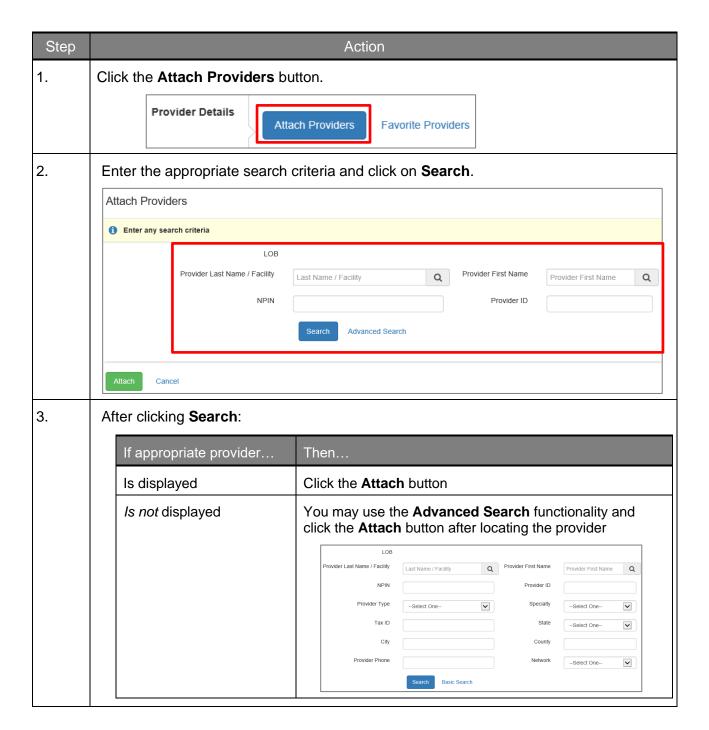
# Adding a New OP Clinical Request – Adding Providers

All Outpatient requests should contain a **Treating** provider (Facility or Agency providing the service) and a **Referring** provider (physician or group referring the member for services).

The steps below outline the processes for adding providers to the request.



**Favorite Providers** - You can utilize the Favorite Providers hyperlink to save time and keystrokes. The **Favorite Providers** list will allow you to create and manage a list of frequently used providers. Reference Chapter 9 "*Favorite Providers List—How to Create a Favorites List.*"



# Adding a New OP Clinical Request - Adding Providers (cont.)



Step		Action
4.	•	Search for the facility.
	•	Once you have located the facility, select " <b>Treating</b> " from the drop-down list in the <b>Provider Role</b> column, click the icon next to the provider row and select Single Attach to attach the provider to the episode.
		Result: The Provider will be attached and listed in the Providers section of the episode.
5.	•	Search for the attending physician.
	•	Once you have located the physician, select " <b>Referring</b> " from the drop-down list in the <b>Provider Role</b> column, click the icon next to the provider row and select Single Attach to attach the provider to the episode.
		Result: The Provider will be attached and listed in the Providers section of the episode.



If you want to	Then		
Attach multiple	Follow the steps outlined below:		
providers to an episode at the	Search for the desired providers		
same time	In the row of each desired provider in the search results screen, select the appropriate Provider Role from the drop-down list, click the		
	icon next to the row and select the Multiple Attach option		
	<ul> <li>As each provider is selected, they will be added to the "Selected Providers List" at the bottom of the screen</li> </ul>		
	When all providers have been added, verify the selected Provider		
	Role and click the Attach button to add them to the episode.		

Provider Details	ID	Name	Location	Role	Network	Phone	Action
		Provider A		Referring			0
		Provider B		Treating			0

### NOTE:

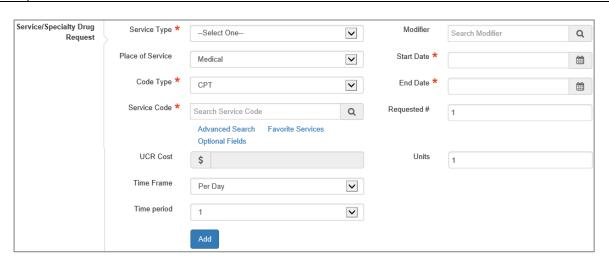
If the incorrect provider is attached, click the **Deactivate** icon to deactivate the facility. The facility will be removed from the episode.

# Adding a New OP Clinical Request – Adding Service Request

You will need to complete the Service/Specialty Drug Request section.



**Favorite Services** - You can utilize the Favorite Services hyperlink to save time and keystrokes. The **Favorite Services** list will allow you to create and manage a list of frequently used services. Reference Chapter 9 "Favorite Services List—How to Create a Favorites List."



step	Action			
	Complete information below:	on in the <b>Service Request</b> section (if applicable) using the guidelines outlined		
	Service Type	Choose the appropriate selection from the drop-down list.		
	Place of Service	Choose the appropriate selection from the drop-down list.		
	Code Type	Auto-populated to CPT, update if necessary.		
	Service Code	Enter the requested service code.  Note: You can type the service code or a description of the code. As information is typed, the auto coder will automatically display matches in the drop-down list. Select the appropriate service from the list. You can also use the Advanced Search link to initiate a search for the service code.		
	Modifier	Enter modifier details as appropriate		
	Start Date	Enter the date of the requested service		
	End Date	Enter the end date of the service		
	Requested #	Enter the appropriate units/visits		
	To view these fields	s, you may need to click on the <b>Optional Fields</b> hyperlink.		
	Time Frame	Defaults to Per Day.		
	Time Period	Defaults to 1.		
	Units/Visits	Defaults to 1. Enter the appropriate units/visits.		

# Adding a New OP Clinical Request – Adding Service Request, cont.

Step	Action							
2.	Click the <b>Add</b> button.							
	Result: The Service Request line will now be populated (appears below the Service Request fields)  Service Request							
	Action	Service Code	Requested#	Start Date	End Date	Service Type	Place of Service	
	•	G0493(HCPC)	5	08/17/2020	09/01/2020	Home	Medical	
	•	S9131(HCPC)	14	08/19/2020	09/02/2020	Home	Medical	
	<b>Note:</b> If a Service Request was added in error or with incorrect information, you may click the icon in the <b>Action</b> column to remove the given line.							
3.	Repeat Steps	2 & 3 if addition	al service req	uests need to	be added			

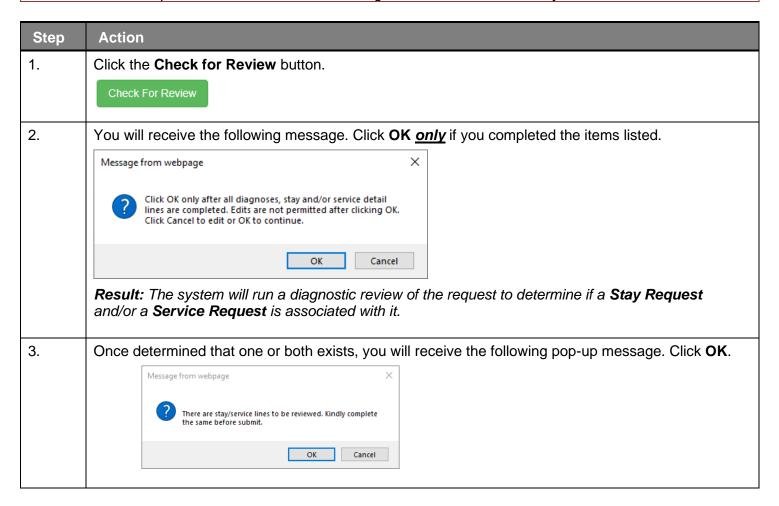
# Adding a New OP Clinical Request - InterQual

Access and complete InterQual Connect Clinical Criteria

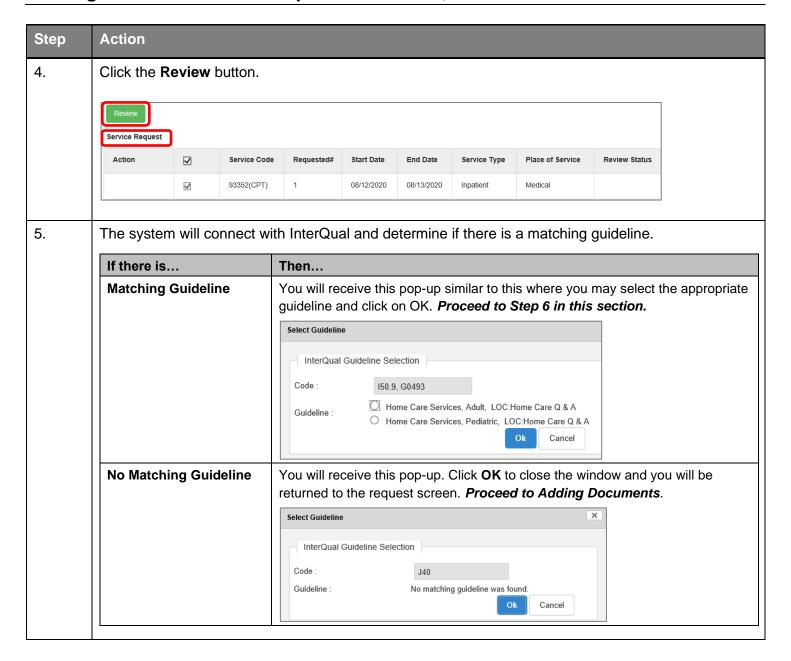


If you need training or have questions regarding the use of InterQual Connect criteria, please contact your facility InterQual trainer or contact your Change HealthCare account representative.

The health plan is certified to conduct training for internal associates only.



# Adding a New OP Clinical Request - InterQual, cont.

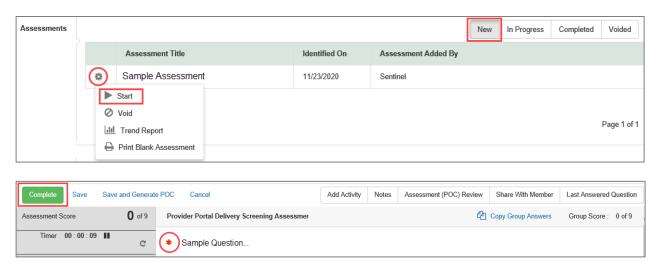


# Adding a New OP Clinical Request – InterQual, cont.

Step	Action			
6.	After answering the review questions, the Recommendations page will display either <b>Criteria Met</b> or <b>Criteria Not Met.</b>			
7.	From the <b>Recommendations</b> page:			
	If you click Then			
	Save The review will be saved and can be updated, if needed, prior to submitting the reques			
	Complete	The review will be saved and closed. It cannot be updated even if you have not yet submitted the request.		
8.	Olean the InterOverland to return to the Prop Provides Destal			
0.	Close the InterQual tab to return to the Jiva Provider Portal			
9.	The request line will now display a status in the <b>Decision</b> column.			

# Adding a New OP Clinical Request - Adding Assessments

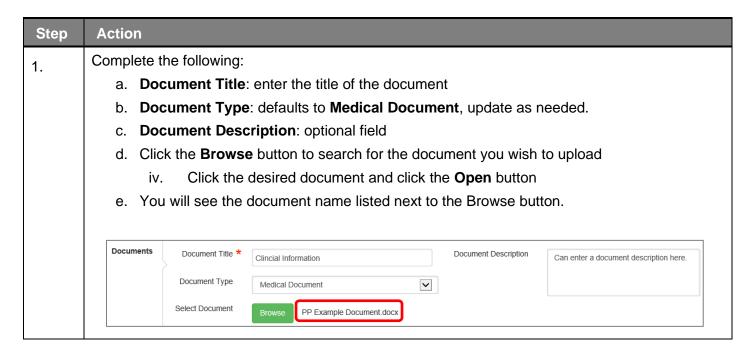
If an assessment is associated with the request, an **Assessment** section will be displayed where you may access and complete the associated assessment.



Step	Action
1.	In the <b>New</b> Tab of the Assessment section, click on the gear icon to the left of the Assessment and click on <b>Start</b> .
2.	Answer the questions.  Note - Questions in red are mandatory.
3.	Click the <b>Complete</b> button to complete the assessment. <b>Note-</b> This will trigger any auto approval rules (if configured.) The <b>Save</b> button will <b>not</b> trigger the auto approval rules.

# Adding a New OP Clinical Request - Adding Documents

When submitting an **OP Clinical Request**, you must attach the clinical information. Follow these instructions to add a **Documents**.



# Adding a New OP Clinical Request – Adding Notes



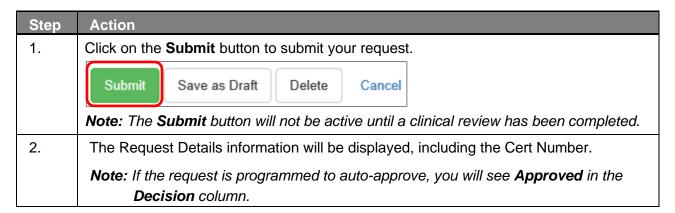
Step	Action
1.	Select the appropriate <b>Note Type</b> from the drop-down menu.
2.	Enter the appropriate notes in the notes section. Be sure to include your <b>name</b> and <b>contact information</b> in the event the Plan needs to contact you.



This is a shared note field. Notes can be viewed and entered by both you and the Plan.

# Adding a New OP Clinical Request - Submitting the Request

Once all required sections are completed, you are ready to submit the request.





# 7 ENTER AN OP NON-CLINICAL REQUEST

# **How to Enter an Outpatient Non-Clinical Request**

A non-clinical request can be started by non-clinical staff or anyone who does not have clinical information available at the time of entry.

The non-clinical request can be saved and is available to access at a later time in order to add clinical data.

When entering a **non-clinical** request, you **must provide** the following information:

- Episode Details
- Diagnosis- primary a must, secondary is optional
- Treating Provider
- Referring Provider
- Add service request

# Adding a New OP Non-Clinical Request – Adding Episode Details

After locating the member *(following the steps outlined in Chapter 2)*, click on **Add New Request** and select **Outpatient** from the drop-down list.

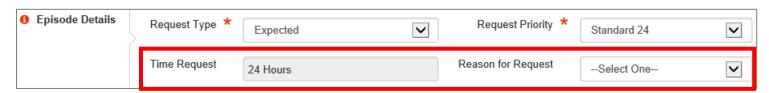
The Member Demographics are at the top of the page. You may click the drop-down caret on the right to expand the demographics window.



Follow these steps to complete the **Episode Details** section:

Step	Action
1.	Request Type: defaults to Expected, update if appropriate
2.	Request Priority: defaults to Standard 24, update if appropriate

If you click the **Optional Fields** hyperlink, additional fields will be displayed.

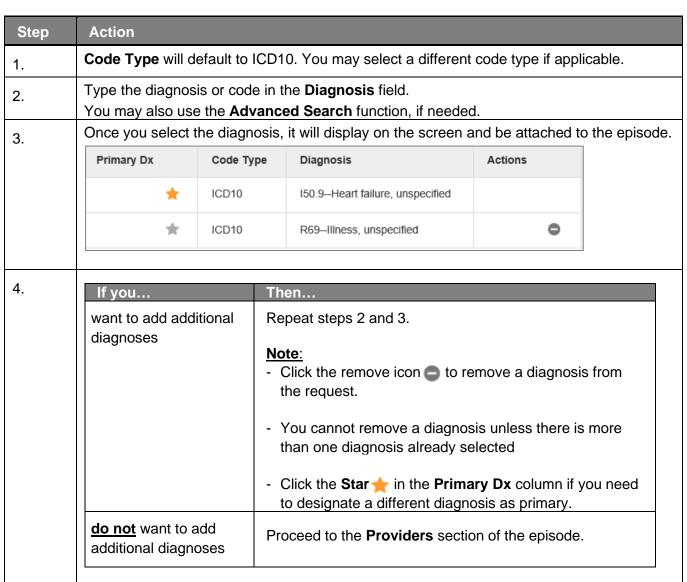


- Time Request: This field will auto-populated based on the Request Priority.
- **Reason for Request:** Select the appropriate reason from the drop down.

# Adding a New OP Non-Clinical Request – Adding Diagnosis

You can add multiple diagnoses from this screen or you can utilize the **Favorite Diagnosis** hyperlink to save time and keystrokes. The **Favorite Diagnosis** function will allow you to create and manage a list of frequently used diagnoses. The list is unique to the provider's account. Reference Chapter 9 "*Favorite Diagnosis List – How to Create a Favorites List.*"





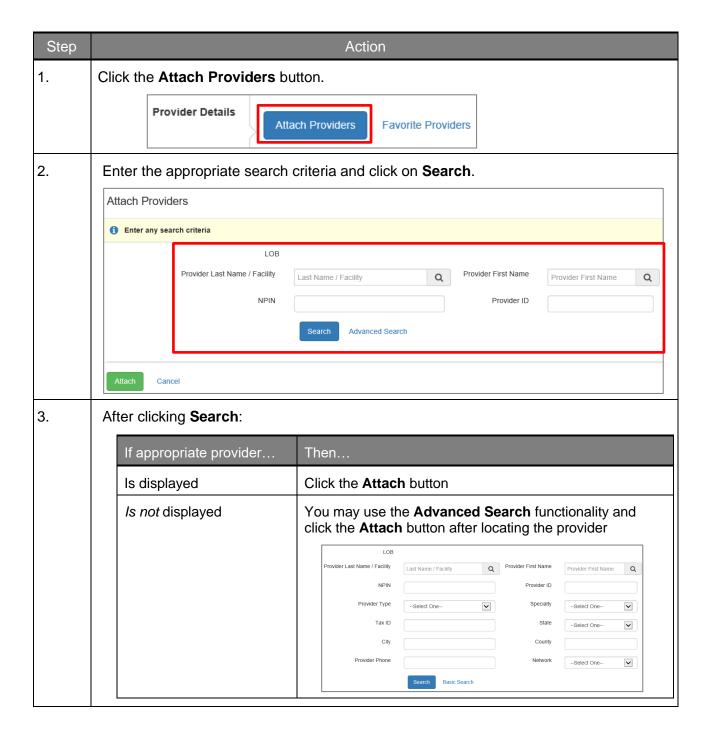
# Adding a New OP Non-Clinical Request – Adding Providers

All Outpatient requests should contain a **Treating** provider (Facility or Agency providing the service) and a **Referring** provider (physician or group referring the member for services).

The steps below outline the processes for adding providers to the request.



**Favorite Providers** - You can utilize the Favorite Providers hyperlink to save time and keystrokes. The **Favorite Providers** list will allow you to create and manage a list of frequently used providers. Reference Chapter 9 "*Favorite Providers List—How to Create a Favorites List.*"



# Adding a New OP Non-Clinical Request – Adding Providers (cont.)



Step		Action
4.	•	Search for the facility.
	•	Once you have located the facility, select " <b>Treating</b> " from the drop-down list in the <b>Provider Role</b> column, click the connext to the provider row and select Single Attach to attach the provider to the episode.
		Result: The Provider will be attached and listed in the Providers section of the episode.
5.	•	Search for the attending physician.
	•	Once you have located the physician, select " <b>Referring</b> " from the drop-down list in the <b>Provider Role</b> column, click the icon next to the provider row and select Single Attach to attach the provider to the episode.
		Result: The Provider will be attached and listed in the Providers section of the episode.



If you want to	Then
Attach multiple	Follow the steps outlined below:
providers to an episode at the	Search for the desired providers
same time	In the row of each desired provider in the search results screen, select the appropriate Provider Role from the drop-down list, click the
	icon next to the row and select the Multiple Attach option
	<ul> <li>As each provider is selected, they will be added to the "Selected Providers List" at the bottom of the screen</li> </ul>
	When all providers have been added, verify the selected Provider
	Role and click the Attach button to add them to the episode.

Provider Details	ID	Name	Location	Role	Network	Phone	Action
		Provider A		Referring			0
		Provider B		Treating			0

#### NOTE:

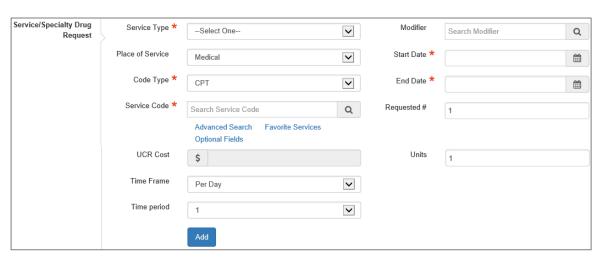
If the incorrect provider is attached, click the **Deactivate** icon to deactivate the facility. The facility will be removed from the episode.

# Adding a New OP Non-Clinical Request – Adding Service Request

You will need to complete the Service/Specialty Drug Request section.



**Favorite Services** - You can utilize the Favorite Services hyperlink to save time and keystrokes. The **Favorite Services** list will allow you to create and manage a list of frequently used services. Reference Chapter 9 "Favorite Services List—How to Create a Favorites List."



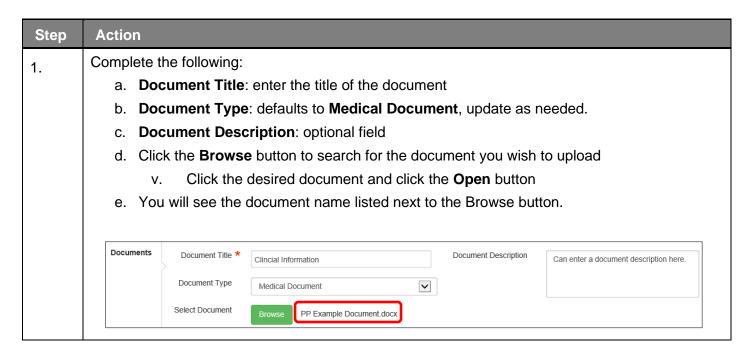
ер	Action				
	Complete information below:	on in the <b>Service Request</b> section ( <i>if applicable</i> ) using the guidelines outlined			
	Service Type	Choose the appropriate selection from the drop-down list.			
	Place of Service	Choose the appropriate selection from the drop-down list.			
	Code Type	Auto-populated to CPT, update if necessary.			
	Service Code	Enter the requested service code.  Note: You can type the service code or a description of the code. As information is typed, the auto coder will automatically display matches in the drop-down list. Select the appropriate service from the list. You can also use the Advanced Search link to initiate a search for the service code.			
	Modifier	Enter modifier details as appropriate			
	Start Date	Enter the date of the requested service			
	End Date	Enter the end date of the service			
	Requested #	Enter the appropriate units/visits			
	To view these fields	, you may need to click on the <b>Optional Fields</b> hyperlink.			
	Time Frame	Defaults to Per Day.			
	Time Period	Defaults to 1.			
	Units/Visits	Defaults to 1. Enter the appropriate units/visits.			

# Adding a New OP Non-Clinical Request – Adding Service Request, cont.

Step	Action								
2.	Click the Add button.  Result: The Service Request line will now be populated (appears below the Service Request fields)  Service Request								
	Action	Service Code	Requested#	Start Date	End Date	Service Type	Place of Service		
	•	G0493(HCPC)	5	08/17/2020	09/01/2020	Home	Medical		
	•	S9131(HCPC)	14	08/19/2020	09/02/2020	Home	Medical		
	<b>Note:</b> If a Service Request was added in error or with incorrect information, you may click the icon in the <b>Action</b> column to remove the given line.								
3.	Repeat Steps 2 & 3 if additional service requests need to be added								

# Adding a New OP Non-Clinical Request – Adding Documents

Follow these instructions to add a **Documents**.



# Adding a New OP Non-Clinical Request – Adding Notes



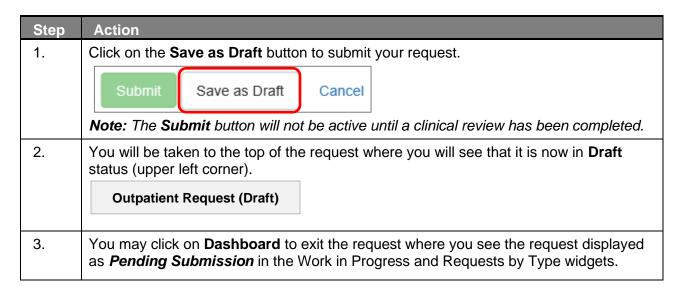
Step	Action
1.	Select the appropriate <b>Note Type</b> from the drop-down menu.
2.	Enter the appropriate notes in the notes section. Be sure to include your <b>name</b> and <b>contact information</b> in the event the Plan needs to contact you.

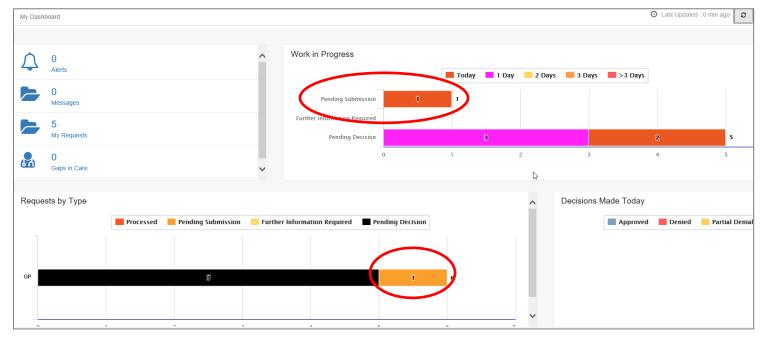


This is a shared note field. Notes can be viewed and entered by both you and the Plan.

# Adding a New OP Non-Clinical Request - Saving as Draft

The Non-clinical request must be saved so it is available to access at a later time in order to add clinical data.



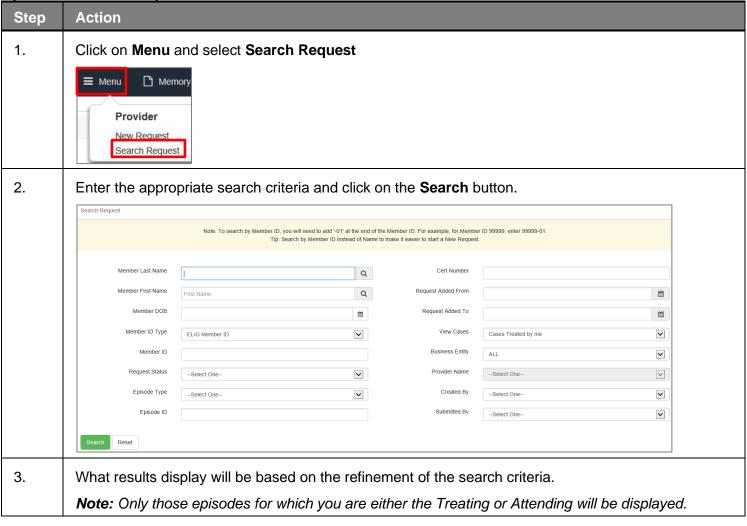


# 8 ADD CLINICAL TO AN EXISTING OP NON-CLINICAL REQUEST

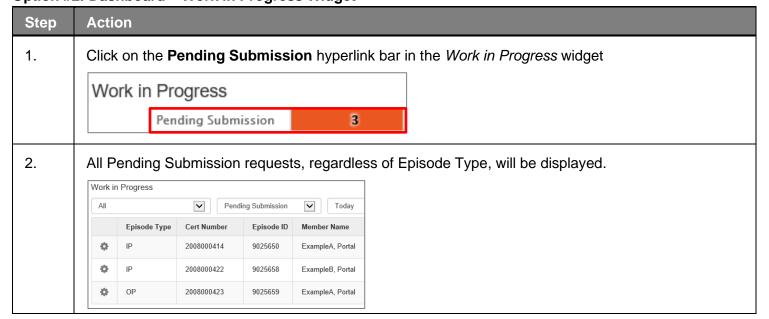
## Adding Clinical Information to an Existing OP Non-clinical Request

There are three options for accessing the non-clinical request.

Option #1: Search Request

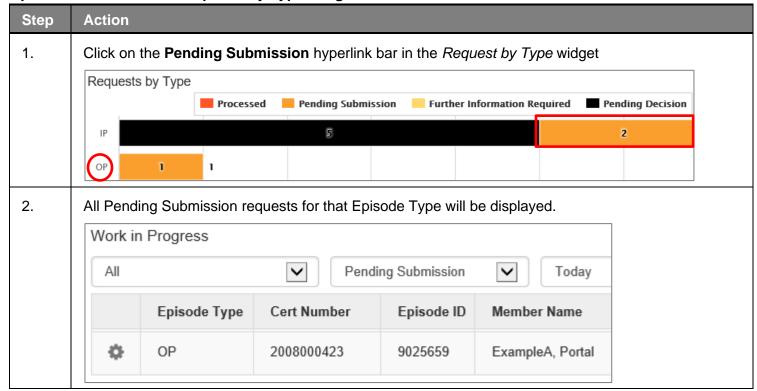


#### Option #2: Dashboard - Work in Progress Widget



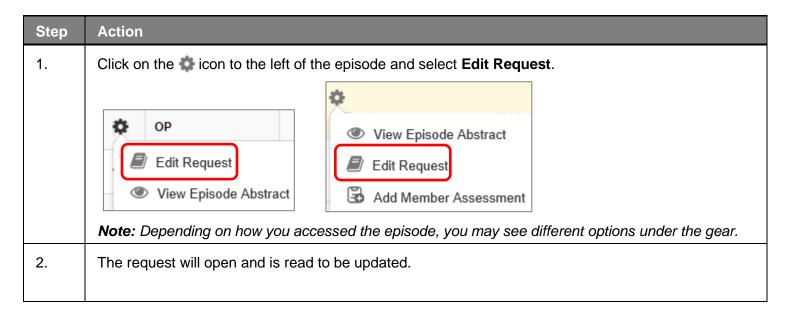
# Adding Clinical Information to Existing OP Non-Clinical Request, continued

#### Option #3: Dashboard – Requests by Type Widget



# Adding Clinical Information to Existing OP Non-Clinical Request – Edit Request

Follow these steps to open the request for editing.



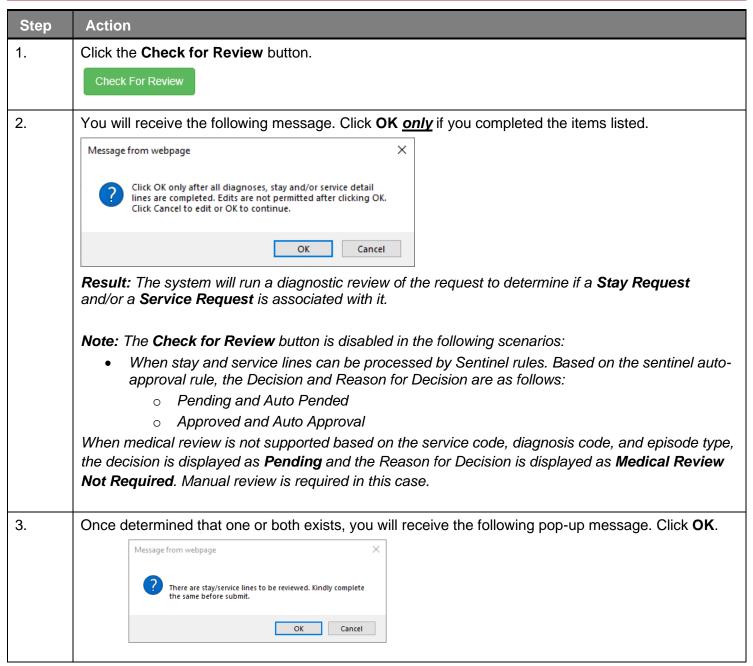
# Adding Clinical Information to Existing OP Non-Clinical Request – InterQual

Access and complete InterQual Connect Clinical Criteria

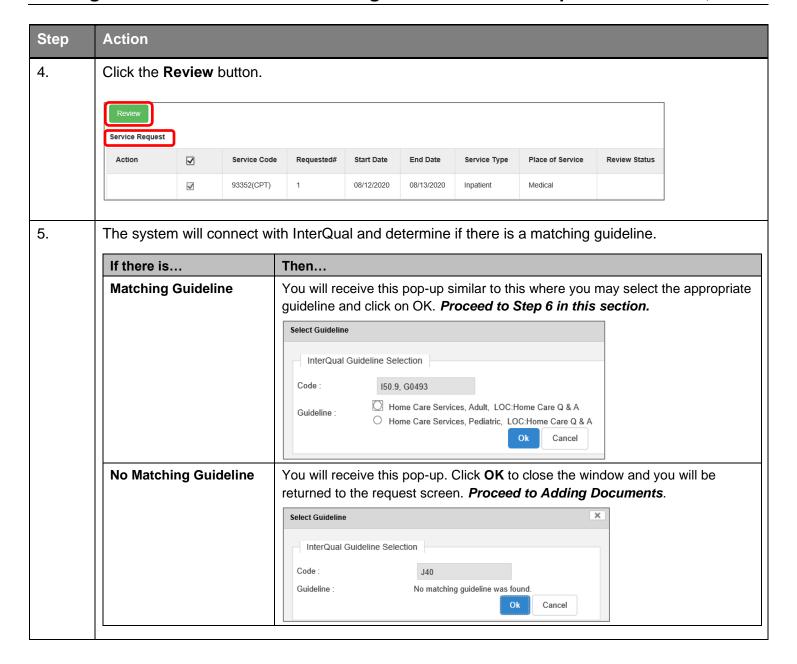


If you need training or have questions regarding the use of InterQual Connect criteria, please contact your facility InterQual trainer or contact your Change HealthCare account representative.

The health plan is certified to conduct training for internal associates only.



# Adding Clinical Information to Existing OP Non-clinical Request – InterQual, cont.

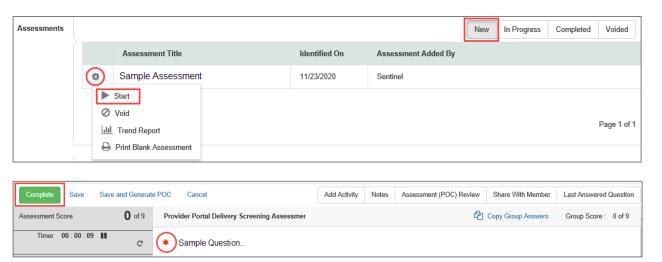


# Adding Clinical Information to Existing OP Non-clinical Request – InterQual, cont.

Step	Action					
6.	,	After answering the review questions, the Recommendations page will display either <b>Criteria Met</b> or <b>Criteria Not Met</b> .				
7.	From the Reco	mmendations page:				
	If you click	Then				
	Save	The review will be saved and can be updated, if needed, prior to submitting the request.				
	Complete The review will be saved and closed. It cannot be updated even if you have not yet submitted the request.					
0						
8.	Close the InterQual tab to return to the Jiva Provider Portal					
9.	The request line will now display a status in the <b>Decision</b> column.					

# Adding Clinical Information to Existing OP Non-Clinical Request – Assessments

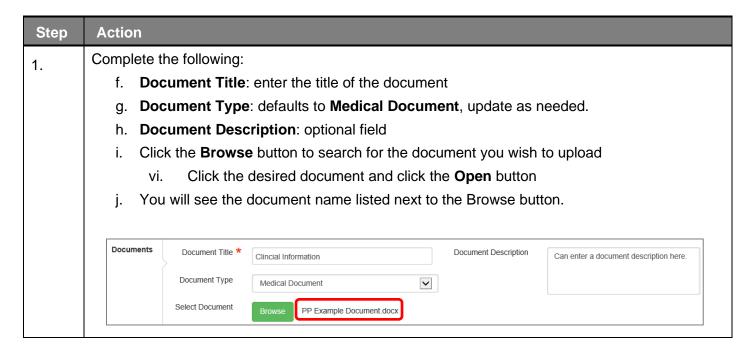
If an assessment is associated with the request, an **Assessment** section will be displayed where you may access and complete the associated assessment.



Step	Action
1.	In the <b>New</b> Tab of the Assessment section, click on the gear icon to the left of the Assessment and click on <b>Start</b> .
2.	Answer the questions.  Note - Questions in red are mandatory.
3.	Click the <b>Complete</b> button to complete the assessment. <b>Note-</b> This will trigger any auto approval rules (if configured.) The <b>Save</b> button will <b>not</b> trigger the auto approval rules.

# Adding Clinical Information to Existing OP Non-Clinical Request – Adding Documents

When submitting an **OP Clinical Request**, you must attach the clinical information. Follow these instructions to add a **Documents**.



# Adding Clinical Information to Existing OP Non-Clinical Request – Adding Notes



Step	Action
1.	Select the appropriate <b>Note Type</b> from the drop-down menu.
2.	Enter the appropriate notes in the notes section. Be sure to include your <b>name</b> and <b>contact information</b> in the event the Plan needs to contact you.



This is a shared note field. Notes can be viewed and entered by both you and the Plan.

# Adding Clinical Information to Existing OP Non-Clinical Request – Submitting Request

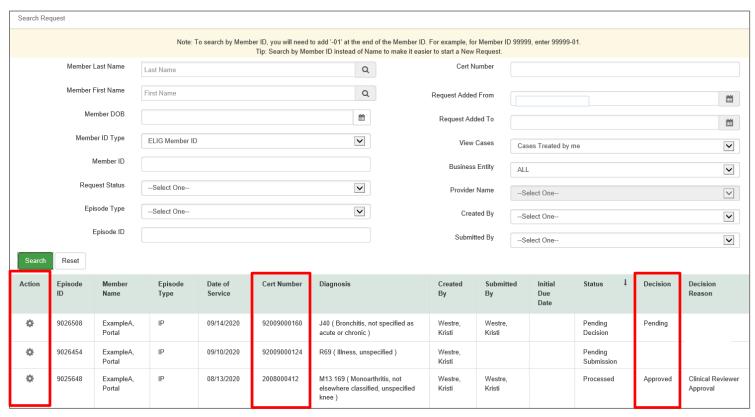
Once all required sections are completed, you are ready to submit the request.

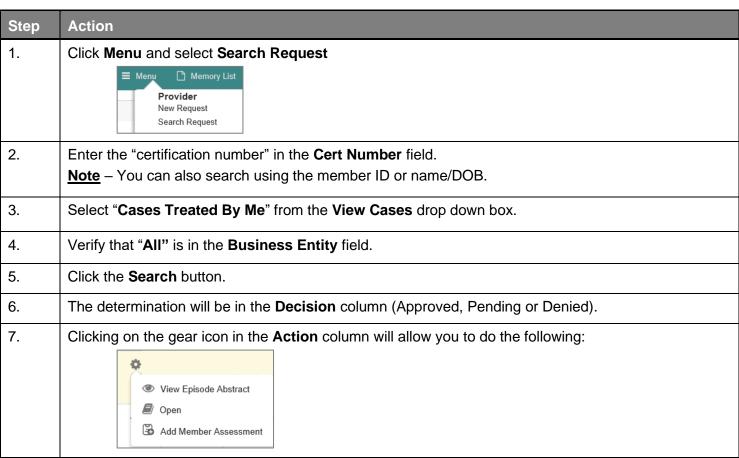
Step	Action				
1.	Click on the <b>Submit</b> button to submit your request.				
	Submit Save as Draft Delete Cancel				
	Note: The Submit button will not be active until a clinical review has been completed.				
2.	The Request Details information will be displayed, including the Cert Number.				
	<b>Note:</b> If the request is programmed to auto-approve, you will see <b>Approved</b> in the <b>Decision</b> column.				



# 9 ADDITIONAL PROCESSES

#### **Search for Determination**

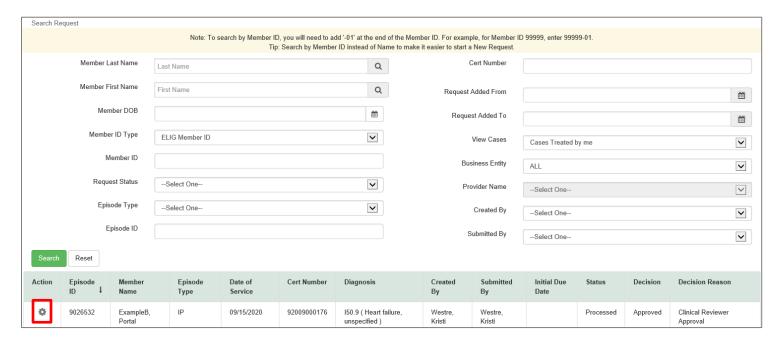


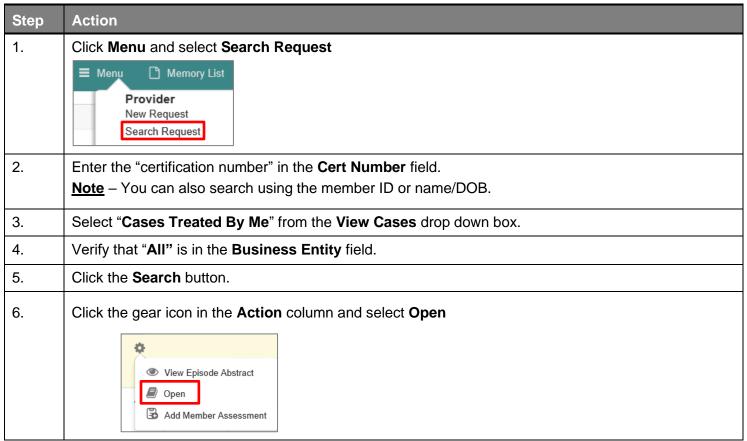


## **Extending an Existing Request**

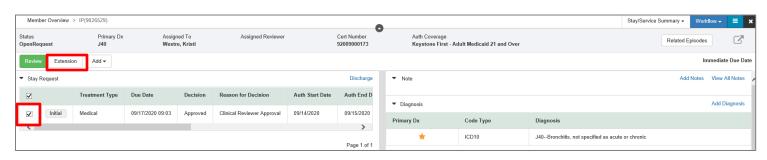
Closed Episodes will be accessible in a 'view only' format. If you would like to extend the request or add notes to a closed case, you will need to contact the Utilization Management Department to request to have the case reopened.

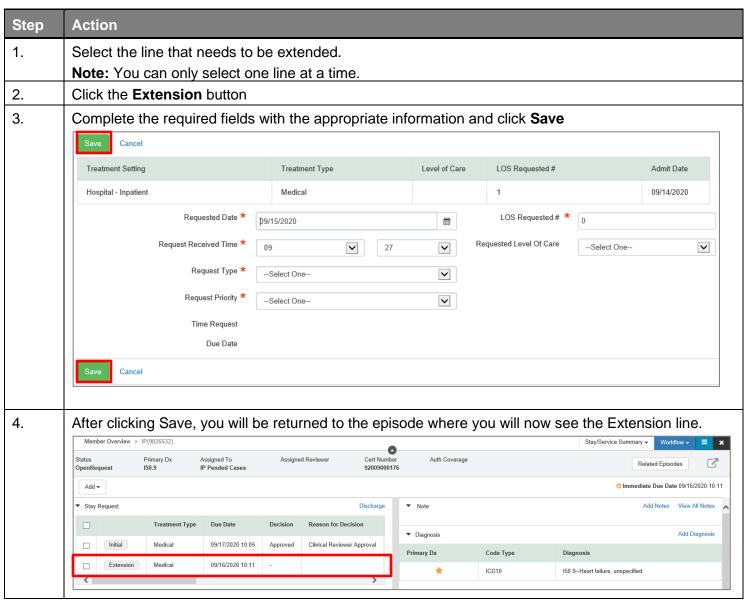
If the case is **Open**, you may follow the instructions below.





# **Extending an Existing Request, cont.**



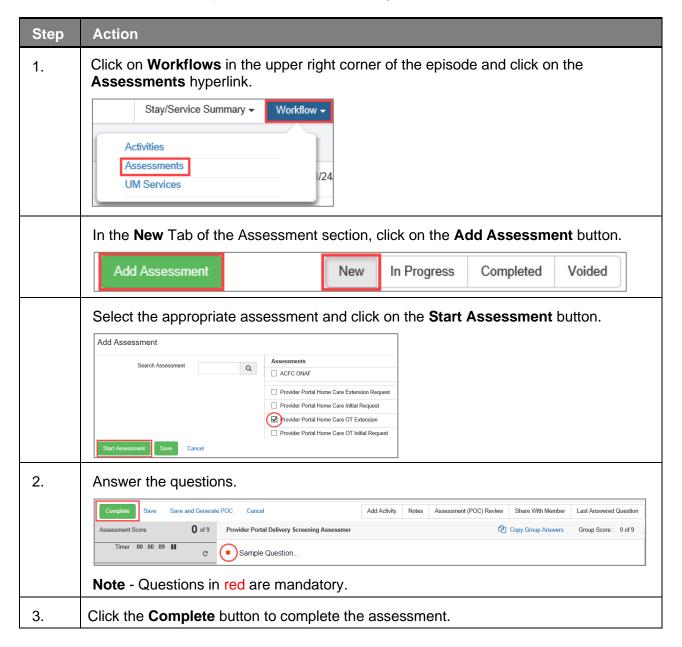




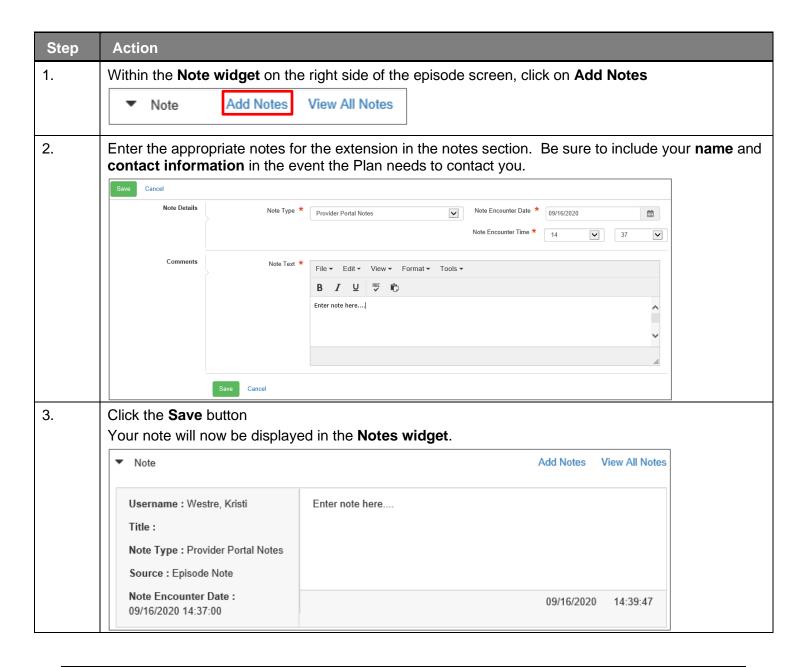
Clicking Save will submit your extension request. However, you must enter a note and attach any appropriate documentation to support the extension request.

## **Extending an Existing Request – Adding Assessments**

If an assessment is to be completed, you will need to follow the guidelines below.



## **Extending an Existing Request - Adding Notes**





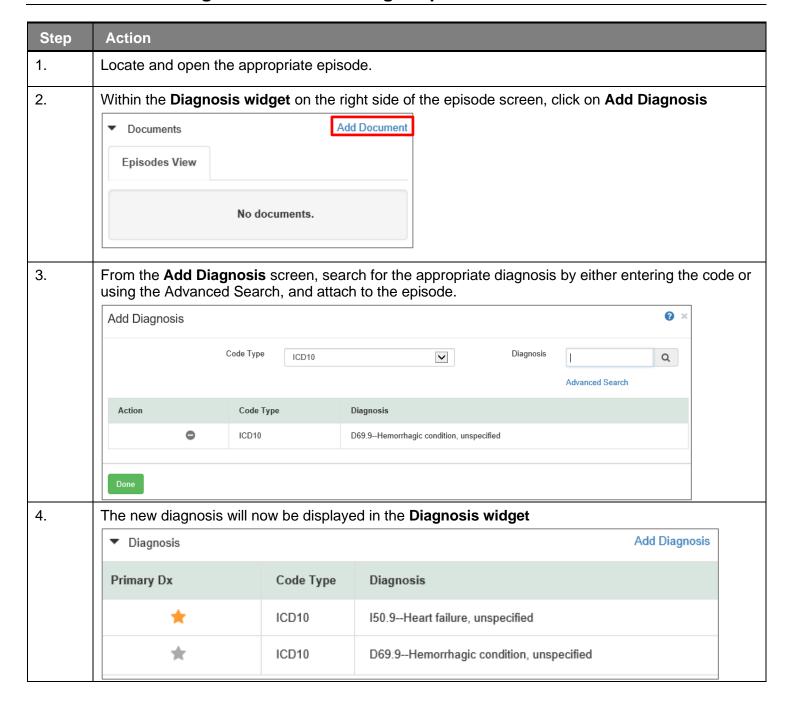
This is a shared note field. Notes can be viewed and entered by both you and the plan.

# **Extending an Existing Request – Adding Documents**

**IMPORTANT:** Be sure to attach any clinical documentation to support the request for extension

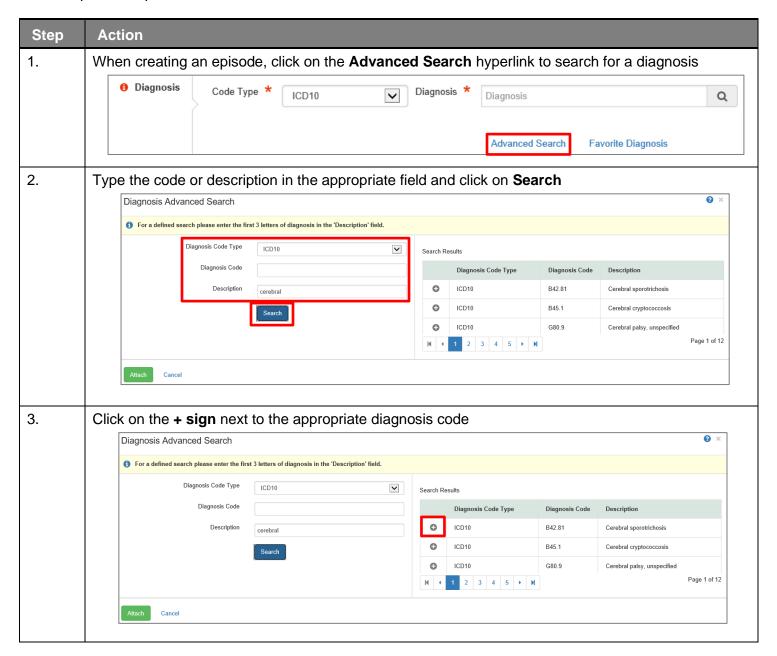


# **Add Additional Diagnoses to an Existing Request**



#### Favorite Diagnosis List - How to Create

The **Favorites Diagnosis** function will allow you to create and manage a list of frequently used diagnoses. The list is unique to the provider's account.

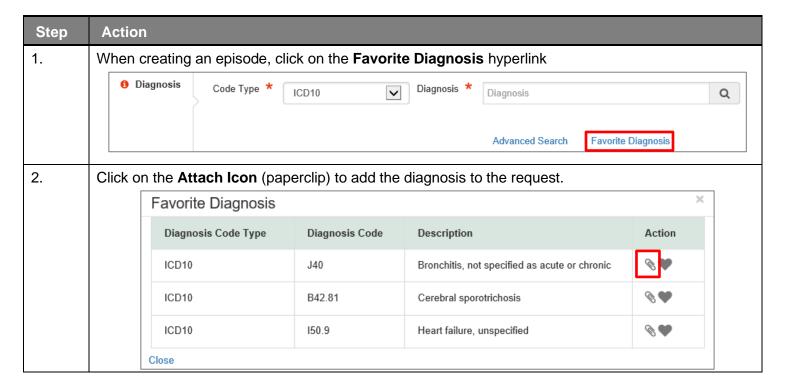


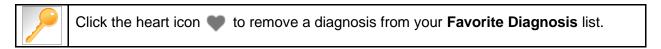
# Favorite Diagnosis List – How to Create (cont.)

Step	Action							
4.	The diagnosis will then appear in the <b>Selected Diagnosis List</b> at the bottom of the <b>Search</b> window.  Tip: You may need to enlarge the search window or scroll down to see the Selected Diagnosis List section.							
	Selected Diagnosis List 1							
		Diagnosis Code Type	Diagnosis Code	Description	Action			
	•	ICD10	B42.81	Cerebral sporotrichosis	•			
	Attach Cancel							
	If		Then	Then				
	You wish to add th	e diagnosis to your <b>is l</b> ist	Click on the <b>heart icon</b> in the <b>Action</b> column					
	You wish to add the diagnosis to the episode Click the <b>Attach</b> button							
5.	Repeat steps 1-4 as needed or desired							
	Note: You may add diagnoses to your Favorite Diagnosis list through this method even if you do not need to attach them to this given request.							

# **Favorite Diagnosis List – Utilizing the List**

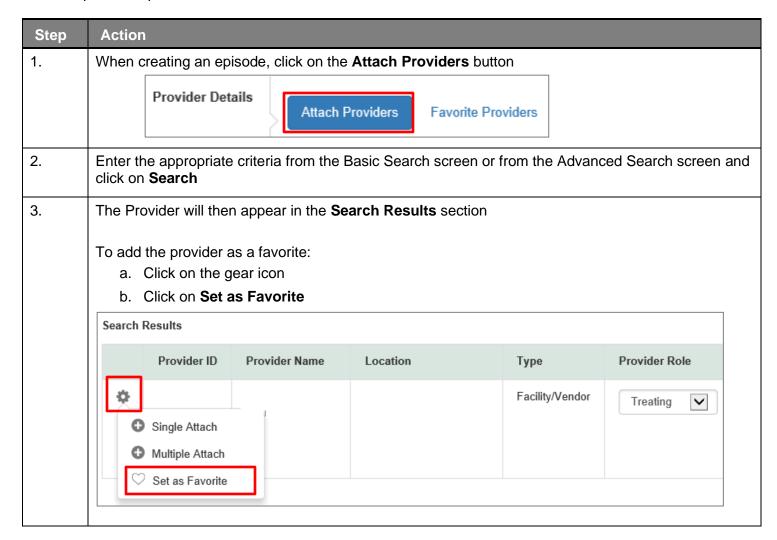
Once your **Favorite Diagnosis l**ist is set up, you do not need to search for these diagnoses in order to add them to the request.





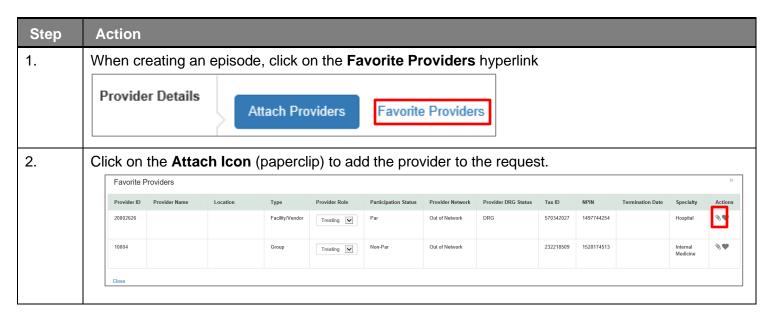
# **Favorite Providers List - How to Create**

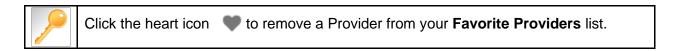
The **Favorite Provider** functionality will allow you to create and manage a list of frequently used providers. The list is unique to the provider's account.



# Favorite Providers List – Utilizing the List

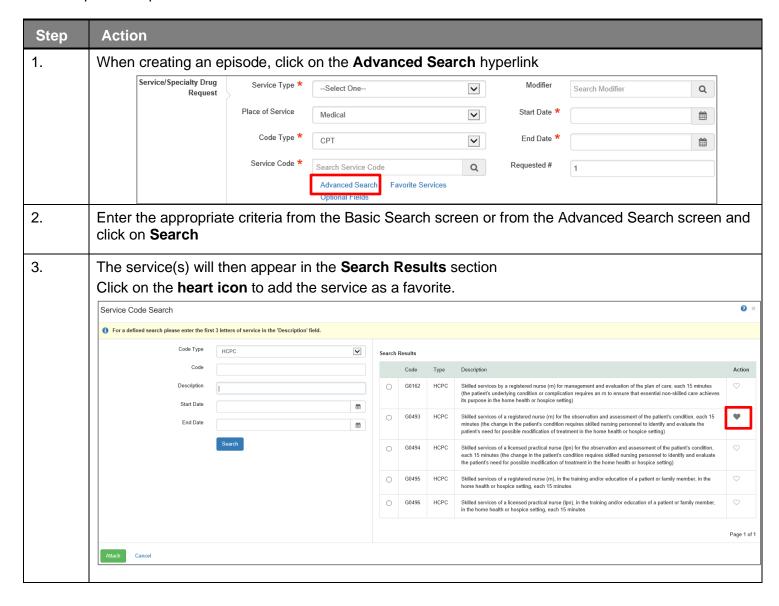
Once your **Favorites List** is set up, you do not need to search for those providers in order to add them to the request.





#### Favorite Services List - How to Create

The **Favorite Services** functionality will allow you to create and manage a list of frequently used services. The list is unique to the provider's account.



# Favorite Services List - Utilizing the List

Once your **Favorites List** is set up, you do not need to search for those services in order to add them to the request.

