

# ***Web Review Request Advanced Diagnostic Imaging User Guide***

## **Overview:**

- ❑ eQHealth Solutions (eQHealth) developed a proprietary web-based electronic review request submission system for Advanced Diagnostic Imaging providers.
- ❑ The system allows providers to submit the following review types: admission and retrospective reviews.
- ❑ Providers can also electronically submit additional information for previously submitted reviews and respond to adverse determinations.
- ❑ Additionally, the system includes a reporting module that can be accessed to obtain real time status of reviews requests and PA #s, and print a paper copy of electronic reviews submitted to eQHealth via the reporting module.
- ❑ The system also maintains copies of notification letters related to reviews. These letters can easily be read or downloaded by any provider staff with access to the system.

## **Key Features:**

- ❑ One of the key features of the system is the ability to check the data upon entry directly against eQHealth's live database. This immediately prevents excluded cases and duplicate records from entering the database.
- ❑ The user can partially save data, as it is entered, if the user is interrupted during entry or in case the internet connection is lost.
- ❑ If additional information is requested by eQHealth, it can be submitted electronically by the provider and the request is automatically "reactivated" for review completion.
- ❑ The key contact person, a User Administrator, at the provider level will assign or revoke privileges for new users or existing users of the system as personnel changes take place. Software or data file maintenance is not required by the provider – all data is keyed directly into eQHealth's data system.
- ❑ Secure transmission protocols including the encryption of all data going over the Internet ensure that eQHealth is keeping current with required HIPAA security regulations.
- ❑ The provider can access the reporting module at any time to print a paper copy of electronic reviews submitted to eQHealth and obtain answers to the following types of questions:
  - What is the current status of a particular review at eQHealth?
  - What is the history of previous Advanced Diagnostic Imaging reviews for a recipient?
  - What is the Prior Authorization Number (PA #) and/or last date certified for a case(s)?  
OR
  - Obtain a list of all current in-process reviews for my organization

- Obtain a list of all authorizations for an admission date range.
- Obtain a list of the detailed review outcomes for a date range.
- Obtain a printout of a specific request for a recipient.

### **Benefits for the Provider:**

- ❑ The online entry screens provide an efficient transfer of information.
- ❑ There will be less paper handling on both ends, enabling a speedier review process.
- ❑ The system is directly connected to eQHealth's eligibility files for immediate verification of eligibility.
- ❑ Multiple requestors and simultaneous transmission from multiple PCs within a facility are allowed (each will be tracked via a separate login).
- ❑ The reporting module will provide real-time status of reviews.

### **What You Need To Use the System:**

- ❑ A provider will need Internet access for the personnel who will be submitting certification requests and accessing the reporting module.
- ❑ Our eQSuite system is a secure HIPAA compliant browser based Microsoft ASP.NET application which will be accessed over the Internet at "<http://fl.eqhs.org/>". To access the eQSuite system, the following minimum hardware and software requirements must be met:

#### Minimal Computer System Requirements:

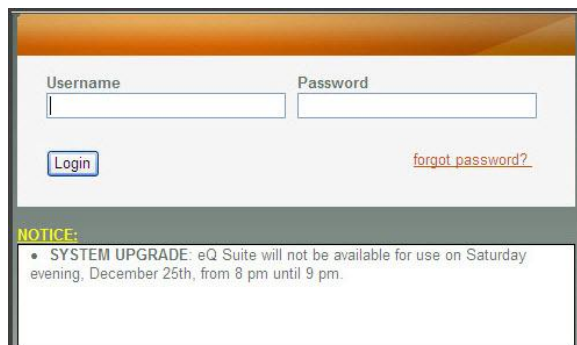
- Any of the two most recent versions of:
  - Internet Explorer
  - Google Chrome
  - Mozilla Firefox
  - Safari
- Broadband internet connection

## **Accessing the System**

eQHealth's Web based entry and inquiry system is accessed from our Web site home page.

- ⇒ Access the Internet with your web browser and go to <http://fl.eqhs.org/>. From here you can follow the link to the eQSuite login.

The user must login to access the Review Request data entry system. This is an example of the login screen. Enter your User Id and Password here. The password must be entered for confidentiality, security and tracking purposes. Each user is responsible for maintaining the confidentiality of their individual logins and passwords. If you believe the security of your login or password has been compromised, change your password. You may adjust many other personal account settings from the **Update My Profile** menu option.



The screenshot shows a web-based login interface. At the top, there is a header bar. Below it, the login form consists of two input fields labeled 'Username' and 'Password', followed by a 'Login' button and a 'forgot password?' link. Below the login form, there is a 'NOTICE' section with a yellow background. The notice contains a bullet point stating: 'SYSTEM UPGRADE: eQ Suite will not be available for use on Saturday evening, December 25th, from 8 pm until 9 pm.'

Your User Administrator must also create all new accounts. The User Administrator has access to many account maintenance options on the **User Administration** menu option.

For security reasons, users can not stay logged on if they are not submitting reviews or running reports. The entry system is directly tied to eQHealth's database, and the system will not maintain an idle connection for more than 20 minutes. The user does not need to exit their Internet browser window or eQHealth Web home page. Simply log back on to the system with the secure password to enter another review request.

The login screen also displays system notices about events that may impact use of the eQSuite. These messages are displayed in a notice box immediately below the login box. For example, the date and time span for system upgrades, that may make the website temporarily unavailable while the work is being done, are posted in advance.

## Menu Options in the System

After successfully logging onto the system, the user will be presented with the screen shown below. There are two locations for the menu items. They are shown across the top of the screen as well as being present on the menu tab to the left. From this initial screen the following menu options are available. Your User Administrator will determine which options are available to you.

**Create New Review   Respond to Add'l Info   Online Helpline   Utilities   Reports   Search   Attachments   Letters   Respond to Denial**

**Provider Reports**

**Menu**  
Errors

**Provider: 010087101 - TEST HOSPITAL**

Select	ID	Description
Select	I1	Inpatient Review Status for a Given Recipient or Case ID
Select	I10	Detailed List of Admissions (at the Case ID Level)
Select	I2	Inpatient Status of All In-Process Certification Reviews (including reconsiderations)
Select	I3	Inpatient Admissions with Completed Reviews
Select	I4	Daily List for Discharge Date
Select	I5	List of Baby Admission
Select	I7	Med/Surg Web Review Request Printout
Select	I8	Detailed List of Admissions (at the Case ID Level)

1. MCG 17th (Milliman) edition, Ambulatory Guidelines in Therapy, 2013.
2. The Guide for Physical Therapy Practice, 2008.
3. The Reference Manual of the Official Documents of the American Occupational Therapy Association, Inc., 16th Edition by AOTA PRESS, 2011.
4. Speech-Language Pathology Medical Review Guidelines from the American Speech-Language-Hearing Association, 2011.
5. Preferred Practice Patterns for the Profession of Speech-Language Pathology, 2004.

### 1. Create New Review

### 2. Respond to Additional Info

### 3. Online Helpline

- ➔ Create a New Helpline Request
- ➔ View Response to Previous Request

### 4. Utilities

- ➔ Update Baby Info (when the baby's Medicaid number is assigned)
- ➔ Enter Discharge Dates (Not applicable to ADI providers)
- ➔ A date calculator (to assist in determining request time spans)
- ➔ Cancel Case (to void a PA# assignment if the item is not provided)
- ➔ Resend Case (to resend the PA# to the fiscal intermediary when there is a change)

### 5. Reports (shown as default screen on main Menu)

- ➔ Outpatient Review Status for a Given Recipient
- ➔ Status of All In-Process Certification Reviews
- ➔ Outpatient Assigned PA #'s
- ➔ Advanced Diagnostic Imaging Web Review Request Printout

### 6. Search

- ➔ View Partial Records
- ➔ Search By PA#
- ➔ Search By Date
- ➔ Search By Recipient
- ➔ View Cases Needing Additional Info
- ➔ Search By Review ID
- ➔ Search By eQHealth Case ID

**7. Attachments**

**8. Letters**

- ➔ Completed
- ➔ In Process
- ➔ Reconsiderations

**9. Respond to Denial**

**10. Update My Profile**

**11. User Administrator** (only the designated User Administrator can view this option, otherwise it's hidden from view)

**12. Logoff** (exit the system)

## I. Create New Review

- Select **Create New Review** from the Menu list.
- The following screen will be displayed and Provider ID and Provider number will be filled in based on the user logon. Proceed with entry.

The screenshot displays the 'eQHealth suite' interface. At the top, a navigation bar includes links such as 'Create New Review', 'Respond to Add'l Info', 'Online Helpline', 'Utilities', 'Reports', 'Search', 'Attachments', 'Letters', 'Respond to Denial', 'Update My Profile', and 'User A'. The 'Review Entry' section is highlighted. It features a 'Review Header Information' box with 'Provider #: 010087101' and 'Provider Name: TEST HOSPITAL'. Below this is a 'Review Type and Settings' box containing fields for 'Provider ID' (010087101), 'Provider Name' (TEST HOSPITAL), 'Choose Setting' (radio buttons for Med/Surg, Rehab, Outpt Therapy, Psych, and selected Outpt Diagnostic Imaging), 'Review Type' (dropdown menu set to Admission), 'eQHealth Case #', 'PA#', and a 'RETRIEVE DATA' button. A 'CANCEL' button is located at the bottom left of the screen.

- Select the appropriate type of setting: Please note that some providers, based on their provider type, may have more than one option. For ADI, choose Outpt Diagnostic Imaging
- Select the appropriate type of review:  
If this is a new, or first time request, select “Admission” and click **Retrieve Data**. This will open the rest of the tab.  
  
If the service was provided prior to the recipient receiving retroactive Medicaid eligibility that covers the date the item was provided, select “Retrospective” and click **Retrieve Data**. This will open the rest of the tab.

<b>Field</b>	<b>Description</b>
<b>Provider ID and Name</b>	The ADI provider requesting the authorization. This is a “view only” field – not a user entry field. The system will automatically fill in the Medicaid provider number and provider name based on the user login

The screenshot shows a web interface with a 'Start' button at the top. Below it is a section titled 'Review Type and Settings'. Inside this section, there are two input fields: 'Provider ID:' with the value '010087101' and 'Provider Name:' with the value 'TEST HOSPITAL'.

### **Review Type**

A Request Type must be selected first so the system will know how to edit the information. Choose between the following:

Admission: The initial request for a purchase or rental item.

Retrospective: The service was provided without prior authorization from eQHealth and the recipient subsequently receives retroactive Medicaid eligibility.

This screenshot shows the 'Review Type and Settings' form with additional fields. The 'Provider ID' is '010087101' and 'Provider Name' is 'TEST HOSPITAL'. Under 'Choose Setting:', there are radio buttons for 'Med/Surg', 'Rehab', 'Outpt Therapy', 'Psych', and 'Outpt Diagnostic Imaging' (which is selected). The 'Review Type:' dropdown menu is open, showing three options: 'Admission' (highlighted in yellow), 'Not Selected', and 'Retrospective'. To the right of the dropdown are fields for 'eQHealth Case #:' and 'PA#:', both currently blank. A 'RETRIEVE DATA' button is located below the dropdown menu.

### **Recipient ID**

Enter the recipient’s number that appears on the Medicaid ID card.

If a recipient has been assigned multiple numbers and the number entered by the provider is not a current number, then the system will check the cross reference table and supply the new recipient number to be used along with an explanatory message.

The recipient must have Medicaid eligibility on file for the dates of service.

If the patient is a baby and:

- Has a personal Medicaid number, then enter this number in the Recipient ID box above and leave the Baby Name and Birth date blank.
- Otherwise, click the [Create Temp Baby ID] button to create a temporary Medicaid number.

<i><b>Field</b></i>	<i><b>Description</b></i>
<b>Recipient Name</b>	Based on the recipient number, the system will display the recipient's name. This is a "view only" field – not a user entry field.
<b>DOB</b>	Based on the recipient number, the system will display the recipient's date of birth. This is a "view only" field – not a user entry field.
<b>Sex</b>	Based on the recipient number, the system will display the recipient's gender. This is a "view only" field – not a user entry field. If the request is for a Baby and the mother's recipient number is entered, an edit error will occur if the corresponding sex on eQHealth's recipient table is not "female".

<b>Baby Name</b>	The baby's first and last name must be entered if this is the first review request for a Baby admission. See the Recipient ID section for more details.
<b>Physician and other Healthcare practitioners</b>	The Florida Medicaid number of the provider rendering/requesting the service (ADI provider). This can be the license number, the NPI number or the Florida Medicaid provider number.

To enter the number into the grid, you must select the [Edit](#) link. If the number is unknown, press [Search](#) to find a valid Physician or Clinician Number.



**Field****Description**

Physicians and Healthcare Practitioners							
	Type	Medicaid #	NPI #	License #	Name	Phone #	
<a href="#">Edit</a>	Ordering Physician/ARNP/PA						
Medicaid #:	<input type="text" value="854072"/>						
	<a href="#">Search</a>						
Type:	<input type="text" value="Ordering Physician/ARNP/PA"/>						
Name:	<input type="text" value="TEST, PHYSICIAN C"/>						
Please update any incorrect information below:							
Phone #:	<input type="text" value="(111) 111-1111"/>						
Fax #:	<input type="text" value="(333) 333-3333"/>						
Address 1:	<input type="text" value="14526 PHYSICIAN DRIVE"/>						
Address 2:	<input type="text"/>						
City:	<input type="text" value="TAMPA"/>						
State:	<input type="text" value="FL"/>						
Zip Code:	<input type="text" value="33570-___"/>						
I have verified the above contact information is correct: <input type="checkbox"/>							
<input type="button" value="Cancel"/>							
<a href="#">Edit</a>	Reading Radiologist						

You will get the following screen for search criteria to be entered. You may enter a full name or just an initial of the last name then press Enter. The list will show on the screen (e.g. Clark). Click on **Select** on the record for the desired physician. The provider number, name and demographic information will be filled in based on physician number. If you have more current information, the demographic information can be updated by the user.

## Field

## Description

If the user is unsure of the provider's Medicaid number, they can click [Search](#) under the entry box and search the eQHealth provider table by provider last name, License number, or NPI number.

Physician Search Page

Search:

Last Name:

First Name:

Middle Init:

Search

Clear

Close

	Physician Id	Physician Name	Phone	Address	City	State	Spec Code
<a href="#">Select</a>	03624392	SMITH JR, GEORGE	3342862842	P O BOX 11047	BIRMINGHAM	AL	
<a href="#">Select</a>	07805302	SMITH JR, JAMES W	7068463151	P O BOX 3188	MANCHESTER	GA	Family F
<a href="#">Select</a>	00119255	SMITH III, CECIL B	6012643937	1420 SOUTH 28TH AVENUE	HATTIESBURG	MS	Ophtha
<a href="#">Select</a>	03282589	SMITH IV, HENRY S	2259282555	P O BOX 62600 DEPT. 3003	NEW ORLEANS	LA	Neonati Medicin
<a href="#">Select</a>	09701719	SMITH JR, GEORGE C	3342778330	400 TAYLOR ROAD	MONTGOMERY	AL	
<a href="#">Select</a>	01459203	SMITH JR, STOVER L	6628462281	PO BOX 1380	CLEVELAND	MS	Radiolo
<a href="#">Select</a>	06122826	SMITH JR, WILLIAM A	9012912400	P O BOX 342409	MEMPHIS	TN	General
<a href="#">Select</a>	00124448	SMITH, ADAM B	6623283407	425 HOSPITAL DRIVE STE 6	COLUMBUS	MS	Internis

1

2

3

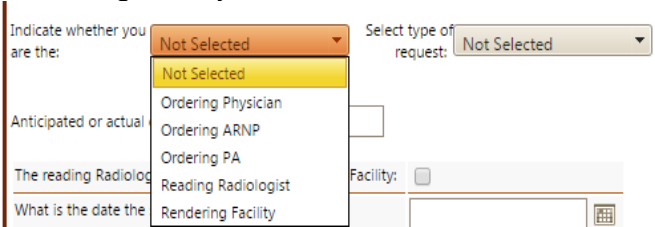
4

5

6

7

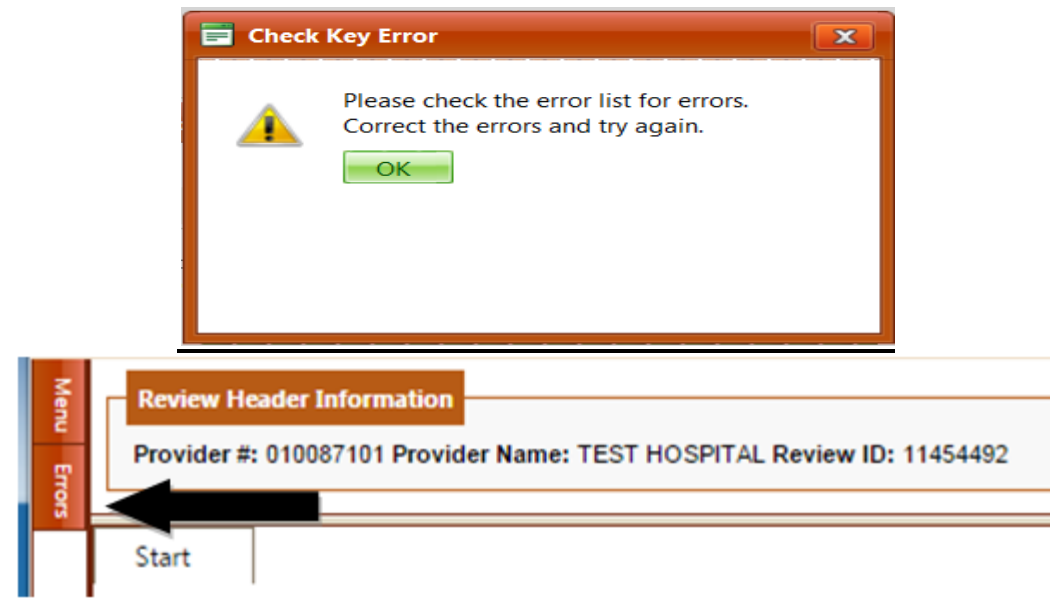
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<b>Field</b>	<b>Description</b>
<b>Indicate whether you are the:</b>	<p>Select One: Ordering Physician, Ordering ARNP, Ordering PA, Reading Radiologist, Rendering Facility</p> 
<b>Select Type of Request:</b>	<p>Select One: Urgent, Non-urgent, Retrospective(post study)</p>
<b>Anticipated or actual date of study:</b>	<p>Enter the proposed date of study preauthorization requests.</p> <p>Anticipated or actual date of study: <input type="text"/></p>
<b>The reading Radiologist will bill separately from the Facility:</b>	<p>Check the box if the reading radiologist will bill separately from the facility</p> <p>The reading Radiologist will bill separately from the Facility: <input type="checkbox"/></p>
<b>What is the date the study was ordered?</b>	<p>Enter in the date the study was ordered</p> <p>What is the date the study was ordered? <input type="text"/></p>

## BUTTONS AT THE BOTTOM OF THE TABS

### Check Key

- On the **Start Tab**, the user continues the review request process by hitting the Check Key button. This will cause the system to run several checks on what has been entered then progress to the next tab.



- When the user clicks Check Key, the system checks recipient and provider eligibility, duplicate reviews, and AHCA review policy. If errors occur, a popup will appear on the screen that says:
- Press the OK to continue. Click on the Errors Tab to review any errors. Make the appropriate changes to the review and press Check Key again until all errors have been resolved. If you need further explanation of the types of errors that can occur during the check key process, go to the **Error Correction** section in this document.
- If no errors are detected, the next available tab appears at the top and the user is allowed to proceed with entry.
- The systems will confirm the recipient's Medicare eligibility. If there seems to be a mismatch between the system's records and the review request, the system gives the user the option of overriding the system. This is presented through the following popup window.



A dialog box titled "Select an Option about Medicare Benefits" with a red header bar. It contains three radio button options and an "OK" button at the bottom.

☐ Cancel request - patient has Medicare benefits for this period that have not exhausted

☐ Continue request - patient does not have Medicare coverage for this period

☐ Continue request - Requested care is not covered by Medicare or Medicare benefits are exhausted

OK

- It will also prompt you to confirm the recipient's address and phone. Once you confirm the address and the phone number are correct, check the address/phone verified box. This popup prompt will look like this:



A dialog box titled "Verify Recipient Address / Phone" with a red header bar. It contains a form with various fields for recipient information, a checkbox for "Address/Phone Verified", and an "OK" button. A black arrow points to the checkbox.

Recipient ID: 123

Name:

Address Line 1:

Address Line 2:

City:

State:  Zip Code:

Phone:

Other Phone:

☐ Address/Phone Verified

Legal Guardian name:

OK

<https://flwebapps.eqhs.org:443/fltrainportalnew/PopupPages/BeneAddressPage.aspx>

- Press the OK to continue.

### Save/Close

- The user can save a record intermittently during entry. As you are entering data, you can hit the Save/Close at the bottom of each screen. This will save the data you have entered. This will prevent loss of data in case of a lost Internet connection or in case the user is interrupted during entry.

### Save/Continue

- After the **Start Tab**, the user continues to progress through the review process with the Save/Continue at the bottom of each screen. This will save the data you have entered and progress on to the next tab and reset the “clock” for an additional 20 minutes.

The screenshot shows a web application interface for 'DX CODES/ITEMS'. At the top, there are tabs for 'Start' and 'DX CODES/ITEMS'. Below the tabs, there are two sections, each with an 'Add' button and a search bar. The first section is for ICD codes, with columns for 'P', 'ICD Code', and 'Description'. The second section is for CPT codes, with columns for 'CPT Code' and 'Description'. Both sections currently show 'No records to display.' At the bottom of the screen, there are three buttons: 'CANCEL', 'SAVE/CLOSE', and 'SAVE/CONTINUE'. A large black arrow points to the 'SAVE/CONTINUE' button.

### Submit for Review

- Once the user has entered all relevant information necessary to determine medical necessity; you can hit the Submit for Review at the bottom of the screen on the Summary tab. This will save the data you have entered and initiate the review process.

### Cancel Review Requests

- The user can cancel a record by clicking Cancel at the bottom of each screen. The user will be asked, “Do you want to partially save the record”? If the user does not choose to partially save, all information entered will be lost.

The screenshot shows a 'Cancel Alert!' dialog box. The dialog box has a title bar with a green icon and the text 'Cancel Alert!'. The main text inside the dialog box asks 'Do you want to partially save the record?'. Below the text are two buttons: 'Yes' and 'No'.

## DX CODES/ITEMS Tab

- This screen captures all data regarding the diagnosis (reason for the need for the item) and item(s) being requested.

**Review Header Information**

Provider #: 010087101 Provider Name: TEST HOSPITAL  
Recipient ID: 456 Recipient Name: JANE DOE Admit Age: Current Age: 0 Review ID: 11454475

Start | DX CODES/ITEMS

**Add** Search

P	ICD Code
No records to display.	

**Add**

CPT <sup>[R]</sup> Code	Description
No records to display.	

- Click **Add** to enter diagnosis following box will appear.

Code Add/Edit Page

Code:

Date Identified:

[Add](#) [Close](#)

https://flwebapps.eqhs.org:443/fltrainportalnew/PopupPages/DxCodeEditPa...

- ❖ The date identified will default to the date the item was ordered.
- ❖ Click **Add** to close the window and the diagnosis/procedure codes will be displayed on the screen.
- ❖ Click **Close** to close the window without adding any diagnosis codes.
- ❖ To find a specific diagnosis code, click **Search** and enter the first 3-5 letters of the diagnosis. Click **Select** to highlight each desired DX code from the resulting list. When all the DX codes you need are highlighted click **Add Selected** to add these DX codes to the review request.

The screenshot shows a web application window titled "Code Text Search Page". It features a search interface with a text input field containing "cardi", and buttons for "Search", "Clear", "Close", and "Add Selected". Below the search bar, a table displays search results for cardiac-related diagnosis codes. Each row includes a "Select" link, a "Deselect" link, the code number, the description, and a "Subdivided" column. The results are paginated, showing page 1 of 5 with 20 items per page.

		Code	Description	Subdivided
Select	Deselect	03282	DIPHTherITIC MYOCARDITIS	
Select	Deselect	03640	MENINGOCOCC CARDITIS NOS	
Select	Deselect	03641	MENINGOCOCC PERICARDITIS	
Select	Deselect	03642	MENINGOCOCC ENDOCARDITIS	
Select	Deselect	03643	MENINGOCOCC MYOCARDITIS	
Select	Deselect	07420	COXSACKIE CARDITIS NOS	
Select	Deselect	07421	COXSACKIE PERICARDITIS	
Select	Deselect	07422	COXSACKIE ENDOCARDITIS	
Select	Deselect	07423	COXSACKIE MYOCARDITIS	
Select	Deselect	09320	SYPH ENDOCARDITIS NOS	
Select	Deselect	09381	SYPHILITIC PERICARDITIS	
Select	Deselect	09382	SYPHILITIC MYOCARDITIS	
Select	Deselect	09389	OTH CARDIOVASCULAR SYPH	
Select	Deselect	0939	CARDIOVASCULAR SYPH NOS	
Select	Deselect	09883	GONOCOCCAL PERICARDITIS	

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https://flwebapps.eqhs.org:443/fltrainportalnew/PopupPages/DxCodeSearchPage.aspx?Axis=1

- ❖ A diagnosis code may be edited or deleted by selecting the appropriate option at the end of the row.



- ❖ Click **Add** to enter ADI codes and the following box will appear.

***Diagnosis Codes***

The ICD-9-CM code(s) for the primary diagnosis and secondary.  
The system will display the corresponding description for each code entered and will check for illogical codes based on gender, age and, coding rules.

***Date Identified***

The date defaults to the date the order was written, but can be changed.

***CPT Codes***

Enter in the CPT Code(s) for ADI Authorization.

Enter in the number of units for each CPT Code requested

## Clinical Tab

This screen captures the clinical information needed for the authorization determination, and appears with every authorization request.

Question	Yes/No/NA	Check all that apply
CPT Codes (ALL)		
Is this test being requested to rule out cancer? Please describe which type in the summary tab	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> N/A	
Has the patient ever been diagnosed with cancer? If yes list type and date of onset in summary tab.	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> N/A	
Has the patient had any imaging studies in the last 6 months. Please list studies in summary tab with date test performed and results.	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> N/A	
Does the patient have any contraindications to contrast or has the patient had a reaction to dyes?	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> N/A	
Has the patient had surgery in the last year? Describe surgery.	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> N/A	
Has pregnancy been ruled out?	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> N/A	

Additional questions appear based on the item requested: check all that apply:

Please indicate the type of imaging being requested.		
CT		<input type="checkbox"/>
Myelogram		<input type="checkbox"/>
Discogram		<input type="checkbox"/>
MRI		<input type="checkbox"/>
PET		<input type="checkbox"/>
CT-A		<input type="checkbox"/>
D-dimer		<input type="checkbox"/>
MRI low field		<input type="checkbox"/>
Other		<input type="checkbox"/>
CPT Codes( 70450 )		
Has there been a concern or diagnosis of Hemiplegia?	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> N/A	
Has there been concern or diagnosis of Dementia, Alzheimer's or Parkinson's disease? Please describe in the summary tab.	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> N/A	
Does the patient suffer from new onset seizures?	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> N/A	

## Summary Tab

Enter any additional information relevant to the request but not captured on the previous screens.

Start	DX CODES/ITEMS	CLINICAL INFO	SUMMARY
<p>Please summarize the recipient's history related to the diagnosis for which the study is requested, including previous studies, treatments, and interventions.</p> <div></div>			

### **Imaging History Add Page**

Please enter any recent advanced diagnostic imaging studies performed for the current diagnosis.

The screenshot shows a web application interface with a tabbed menu at the top. The tabs are 'Start', 'DX CODES/ITEMS', 'CLINICAL INFO', and 'SUMMARY'. The 'SUMMARY' tab is selected. Below the tabs, there is a text area with the instruction: 'Please summarize the recipient's history related to the diagnosis for which the study is requested, including previous studies, treatments, and interventions.' Below this text area is a large empty rectangular box. At the bottom of the page, there is a dark grey bar with the text 'Please enter any recent advanced diagnostic imaging studies performed for the current diagnosis.' Below this bar is a table with a header row containing 'Date', 'Type of Study', and 'Results'. The table body contains the text 'No records to display.' A large black arrow points to the 'Add' button located above the table header.

Date	Type of Study	Results
No records to display.		

The screenshot shows a web application window titled 'Imaging History Add Page'. The window contains a form with three input fields: 'Date:' with a calendar icon, 'Type of Study:', and 'Results:'. Below the form are two buttons: 'Add' and 'Close'. The URL bar at the bottom of the window shows the address: 'https://flwebapps.eqhs.org:443/fltrainportalnew/PopupPages/ImagingHistoryPage.aspx'.

Date:

Type of Study:

Results:

[Add](#) [Close](#)

https://flwebapps.eqhs.org:443/fltrainportalnew/PopupPages/ImagingHistoryPage.aspx

Click "Submit" to complete the review request. By clicking "Submit" you are acknowledging the disclaimer and attesting to the accuracy of the information entered in the review request.

Start

DX CODES/ITEMS

CLINICAL INFO

SUMMARY

Please summarize the recipient's history related to the diagnosis for which the study is requested, including previous studies, treatments, and interventions.

Please enter any recent advanced diagnostic imaging studies performed for the current diagnosis.

Add

Refresh

Date	Type of Study	Results
No records to display.		

[Florida Agency for Health Care Administration Disclaimer Statement](#)

eQHealth Solutions certification determination does not guarantee Medicaid payment for services. Eligibility for and payment of Medicaid services are subject to all terms and conditions and limitations of the Medicaid Program.

[PROVIDER ATTESTATION STATEMENT](#)

I hereby attest that an order for diagnostic imaging services has been received for the recipient. A diagnostic imaging provider who knowingly or willfully makes, or causes to be made any false statement or representation of a material fact in any application for Medicaid benefits or Medicaid payments, may be subject to the application of sanctions, which include, but are not limited to, fines, suspension and termination. In addition, the provider may be prosecuted under federal and/or state criminal laws and may be subject to civil monetary penalties and/or fines.

**By clicking [Submit for Review] you are attesting to the above.**

CANCEL

SAVE/CLOSE

SUBMIT FOR REVIEW

## II. Respond to Additional Information

If a provider receives a request for additional information from eQHealth regarding a review request, then you will need to click on this menu to respond.

- The system grid will display all records in process and currently awaiting requested additional information.
- The user clicks "Open" for the appropriate review and the system will display the additional information request.

Additional Information													
Main Error	Cases Needing Add'l Info.												
	ReviewID	Request Date	Requestor Name	RecipientID	First Name	Last Name	Request Type	Setting	PA #	eQH/Health Case ID	Admit Date	Provider ID	Provider Name
	Open	60516295	03/14/2011	Inpt Trainer	999999999	BENE	TEST	Admission	Acute IP Med/Surg		1000109335	03/11/2011	00020149

- The user clicks "Open" for the appropriate review and the system will display the additional information request.

Menu

Errors

Review Header Information

Provider #: 000171400 Provider Name: DME Provider  
Recipient ID: 123 Recipient Name: JOHN DOE Admit Age: 18 Current Age: 18 Admit DT: 12/1/2012 Review ID: 11450204

Start

DX CODES/ITEMS

CLINICAL INFO

SUMMARY

ADDL INFO

Question	Pended date	Response
<div> <div>▼</div> Please provide an updated M.D Order . </div>	9/4/2012	<div>Response</div> <div> <div>Update</div> <div>Cancel</div> </div>

Please do not click submit until you are ready to send documentation by either entering in the response box or linking an attachment.

CANCEL

SUBMIT INFO

- The first box shows the question from eQHealth and is view only.
- You will respond to the question in one of three ways. You may type additional information into the text box labeled “Response”, or you may link a document to the review, or you may do both. To do so, see the section entitled “Linking an attachment to the review”.
- After the additional information has been entered, click Submit Info button. The system will prompt you to link attachments and resubmit the review for processing.
- If during entry, you do not want to save the entry, click Cancel.
- You can select the other tabs to view previously submitted information.

### III. Online Helpline

You can create a new request or view responses to previous requests from Online Helpline tool by selecting **Online Helpline** from the menu list.

- Create a New Helpline Request
  - You may enter Review ID, PA #, Recipient #, or Admission date, along with your question. If you enter a Review ID, or a PA #, the remaining fields will be filled in by the system.
  - Type your question or comment in the textbox and click Submit Question.

➤ A message stating that the response has been submitted will appear and a ticket number will be assigned.

➤ You will be e-mailed a link to return back to the Online Helpline when the ticket has been processed by the eQHealth staff and a response is available.

➔ View Response to Previous Request

➤ To view the response to a previous ticket, scroll down and view the History in list below.

➤ All responses for the last 30 days will be displayed. Responses will be displayed in ticket number order; the most recent being displayed first.

➤ The responses will include the receipt date and time of the request, the response date and time, PA # (if applicable), the question and the answer.

The screenshot displays the 'Online Helpline' interface. At the top, there is a header bar with the text 'Online Helpline'. Below this, a sidebar on the left contains a 'Menu' button and an 'Errors' button. The main content area has a light blue background and contains the following elements:

- A text box for entering a new question, with instructions: 'To enter a new question, type your question in the box below, then click the **Submit Question** link below. You will be e-mailed with a link to return here when this ticket has been processed. To view the response to a previous ticket, scroll down and view the **History** in list below.'
- A 'Review ID:' label followed by a text input field and the instruction 'Do NOT enter other values if Review ID is entered.'
- A 'Recipient #:' label followed by a text input field.
- An 'Admit Date:' label followed by a date input field.
- A large, empty text area for the question, with a vertical scrollbar on the right.
- A blue button labeled 'Submit Question'.
- A section titled 'Q&A History (Last 30 Days)' with a table header 'Question/Response'.

#### IV. Utilities

☐ Update Baby Info

- ☐ Enter Discharge Dates
- ☐ Cancel Case
- ☐ Resend Case
- ☐ Date Calculations

### Update Baby Info

When an Identification Number is assigned by Medicaid, retrieve the data field for entering the Baby Recipient Identification Number: Select **Update Baby Info**.

Baby Update Utility

Menu  
Errors

#### Baby Number Conversion

eQHealth Case ID:

Recipient:

Admit Date:

Baby Name:

---

Enter Baby's  
Recipient ID:

DOB:

Name:

Address:

Under “Original Info,” enter the eQHealth Case ID. The other data fields in this section will be filled in by the system.

Under “Baby’s Info,” enter the Baby’s Recipient Number. The date of birth (DOB), name, and address fields will be filled in by the system.

Verify that the information is correct before clicking the “Convert” button.

Once “Convert” has been clicked, the changes will be complete and the review is transmitted to the fiscal agent to receive the PA#.

## Enter Discharge Dates

To retrieve the data field for Discharge Date, select Enter Discharge Dates.

Make your selection by indicating the last-date-certified range, the admission date range, recipient number, or PA # and then click search.

Menu  
Errors



Enter Discharge Dates

Search By Last Day Certified

Search By Admit Date

Search By RecipientID

Search By PA#

Last Certified Date Range:     (120 day limit)

Search

Clear

Click Edit on each row of the grid that you wish to enter the discharge date and then click Update when you verified this information is correct.



## Cancel Case

Choose the Case(s) to be cancelled, using one of the search options, and follow the prompts to cancel the case.

Cancel Case Utility - Windows Internet Explorer

https://flwebapps.eqhs.org/fltrainportalnew/Pages/CancelCase.aspx

Cancel Case Utility

eqHealthsuite

DME Trainer Log Off  
Timeout in: 19:39 mins

Create New Review Respond to Add'l Info Online Helpline Utilities Reports Search Attachments Letters Respond to Denial

### Cancel Case Utility

This Utility is to be used only for requests in which the patient was not admitted. Selecting cancel on a case will void the PA# at the fiscal agent. Cases that meet the criteria for provider cancellation are listed below. A case may not be cancelled if you have billed the PA#.

Search By eQHealth Case ID Search By PA# Search By Review ID Search By RecipientID

Enter up to 8 Encounter IDs, then click Search.

Search Clear

## Resend Case

Choose the Case(s) to be resent, using one of the search options, and follow the prompts to cancel the case.

### Resend Case

This utility is to be used by the provider to resend a case to the fiscal agent to receive or update a PA# when there has been a change in the status of a case such as an update to recipient eligibility or resolution of an overlapping PA#. The utility can only be used by the provider to update or obtain PA#s on cases they have submitted.

You will not be able to retransmit a case if one of the following applies:

- The last review completed for the case is more than 30 days ago.
- The case is for a recipient with a Temporary number.
- The case has been voided.

Search By eQHealth Case ID Search By PA# Search By Review ID

Enter up to 8 eQHealth Case IDs, then click Search.

Search Clear Entry

## Date Calculations

Use this utility as an aid to calculate the time span for authorization requests.

The screenshot shows a web application window with a title bar and standard window controls. The main content area contains two sections for date calculations.

1. Calculate Number of Days between Dates  
☐ Include end date in calculation (1 day is added)  
Start Date:  End Date:   Total Days:

2. Calculate End Date as Number of Days from Start Date  
Start Date:  Number of Days:   End Date:

The address bar at the bottom of the window displays the URL: <https://flwebapps.eqhs.org:443/fltrainportalnew/Pages/Utilities.aspx>

## V. Reports

- Click **Reports** on the menu list.

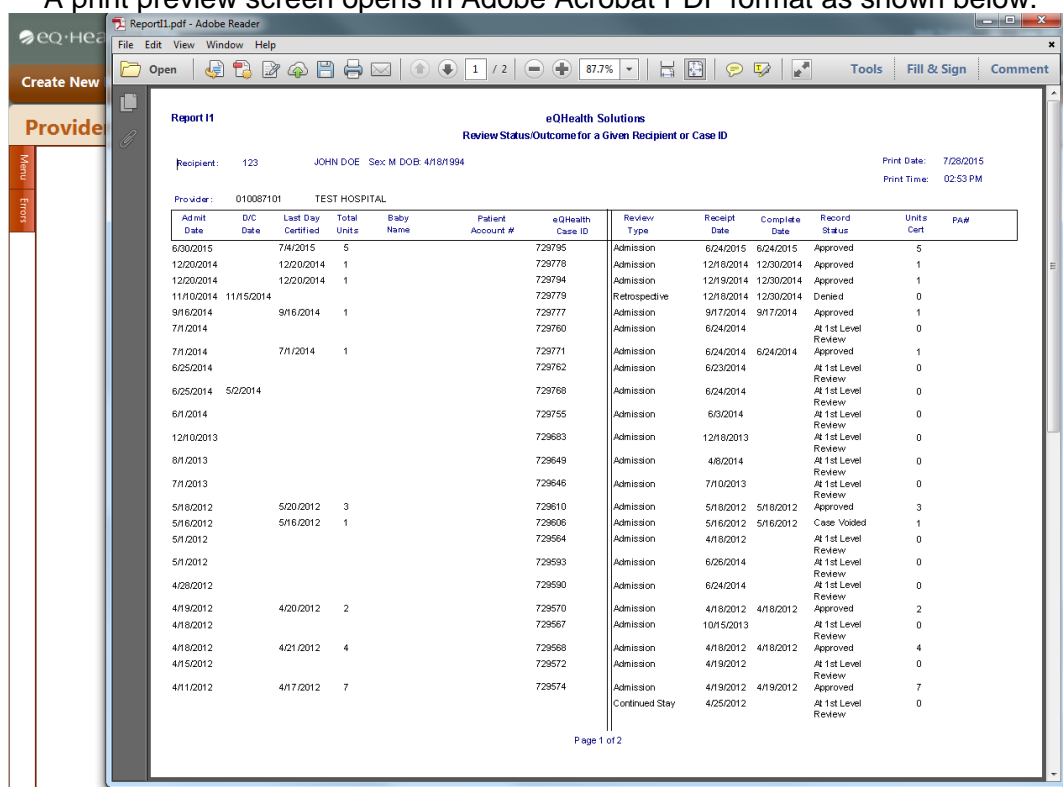
Provider Reports		
Menu	Errors	
	Provider: 010087101 - TEST HOSPITAL	
<a href="#">Select</a>	I1	Inpatient Review Status for a Given Recipient or Case ID
<a href="#">Select</a>	I10	Detailed List of Admissions (at the Case ID Level)
<a href="#">Select</a>	I2	Inpatient Status of All In-Process Certification Reviews (including reconsiderations)
<a href="#">Select</a>	I3	Inpatient Admissions with Completed Reviews
<a href="#">Select</a>	I4	Daily List for Discharge Date
<a href="#">Select</a>	I5	List of Baby Admission
<a href="#">Select</a>	I7	Med/Surg Web Review Request Printout
<a href="#">Select</a>	I8	Detailed List of Admissions (at the Case ID Level)
<a href="#">Select</a>	I9	Detailed List of Review Requests (at the individual Review_Id Level)
<a href="#">Select</a>	N10	Administrative Approvals
<a href="#">Select</a>	O1	Outpatient Review Status for a Given Recipient
<a href="#">Select</a>	O2	Status of All In-Process Certification Reviews
<a href="#">Select</a>	O3	Outpatient Assigned PA#s
<a href="#">Select</a>	O4	Outpatient - Daily List for Discharge Date
<a href="#">Select</a>	O5	Outpatient - List of Baby Admission
<a href="#">Select</a>	R7	Rehab Web Review Request Printout

- A menu of currently available reports will be listed for the user to choose from.

- Select a report. Report results may/may not be displayed on the screen based on selection criteria. All data listed on all reports are provider specific. All data transmitted via the Internet are encrypted for security compliance. A sample report result screen is shown below with no selection criteria. Press the **Run Report**.



A print preview screen opens in Adobe Acrobat PDF format as shown below.

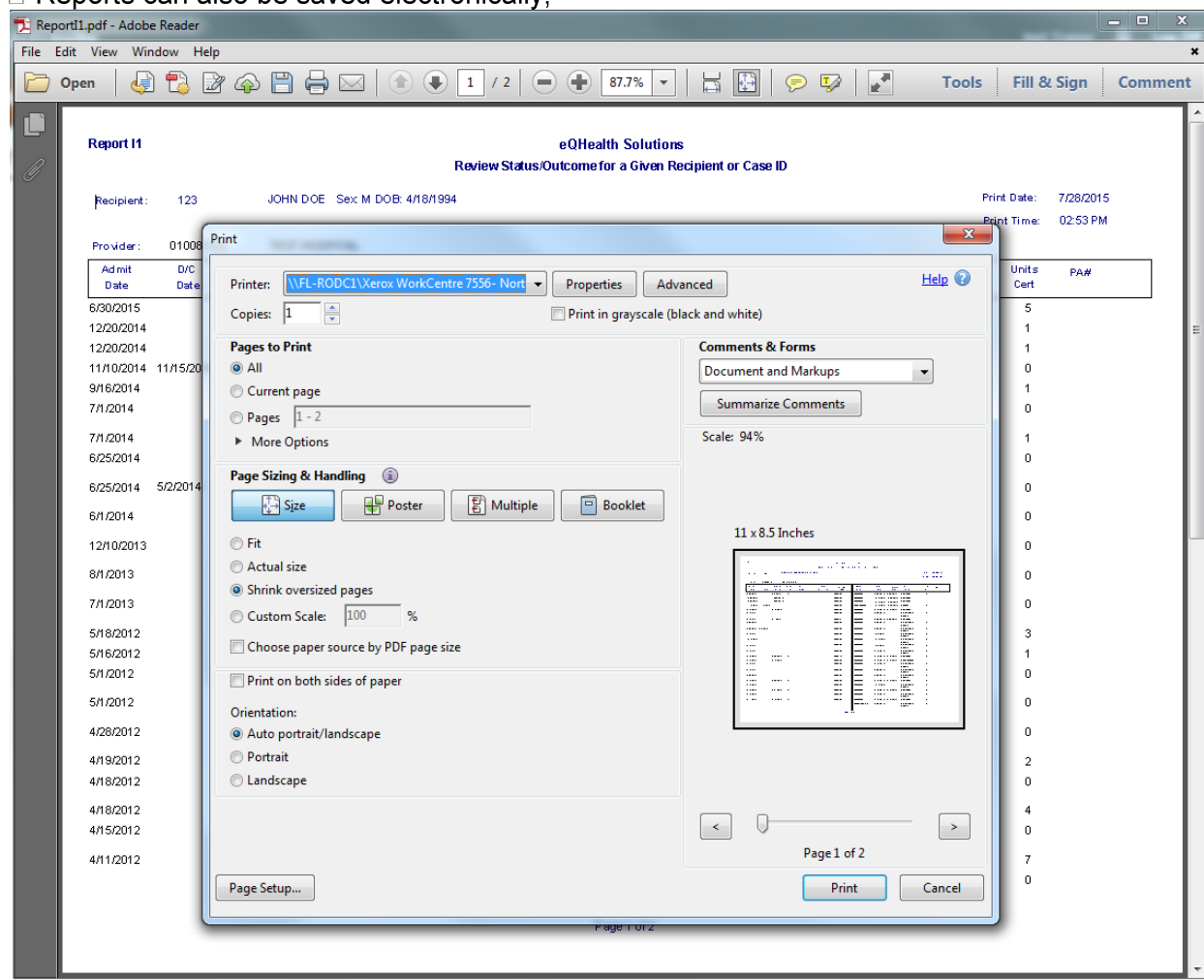


Admit Date	Dis Date	Last Day Certified	Total Units	Baby Name	Patient Account #	eQHealth Case ID	Review Type	Receipt Date	Complete Date	Record Status	Units Cert	PA#
6/30/2015		7/4/2015	5			729795	Admission	6/24/2015	6/24/2015	Approved	5	
12/20/2014		12/20/2014	1			729778	Admission	12/18/2014	12/20/2014	Approved	1	
12/20/2014		12/20/2014	1			729794	Admission	12/18/2014	12/20/2014	Approved	1	
11/16/2014		11/15/2014				729779	Retrospective	12/18/2014	12/20/2014	Denied	0	
9/16/2014		9/16/2014	1			729777	Admission	9/17/2014	9/17/2014	Approved	1	
7/1/2014						729760	Admission	6/24/2014		At 1st Level Review	0	
7/1/2014		7/1/2014	1			729771	Admission	6/24/2014	6/24/2014	Approved	1	
6/25/2014						729762	Admission	6/23/2014		At 1st Level Review	0	
6/25/2014		5/2/2014				729768	Admission	6/24/2014		At 1st Level Review	0	
6/1/2014						729755	Admission	6/3/2014		At 1st Level Review	0	
12/10/2013						729683	Admission	12/18/2013		At 1st Level Review	0	
8/1/2013						729649	Admission	4/8/2014		At 1st Level Review	0	
7/1/2013						729646	Admission	7/10/2013		At 1st Level Review	0	
5/18/2012		5/20/2012	3			729610	Admission	5/18/2012	5/18/2012	Approved	3	
5/16/2012		5/16/2012	1			729606	Admission	5/16/2012	5/16/2012	Case Voided	1	
5/1/2012						729564	Admission	4/18/2012		At 1st Level Review	0	
5/1/2012						729593	Admission	6/26/2014		At 1st Level Review	0	
4/28/2012						729590	Admission	6/24/2014		At 1st Level Review	0	
4/19/2012		4/20/2012	2			729570	Admission	4/18/2012	4/18/2012	Approved	2	
4/18/2012						729567	Admission	10/15/2013		At 1st Level Review	0	
4/18/2012						729568	Admission	4/18/2012	4/18/2012	Approved	4	
4/15/2012		4/21/2012	4			729572	Admission	4/19/2012		At 1st Level Review	0	
4/11/2012		4/17/2012	7			729574	Admission	4/19/2012	4/19/2012	Approved	7	
							Continued Stay	4/25/2012		At 1st Level Review	0	

- ❑ To print the report, the user should click the printer button on the task bar. The Print property box opens.

☐ Adobe Acrobat PDF will orient the report as needed. Click the **OK** button and retrieve the results from the printer.

☐ Reports can also be saved electronically,



☐ Adobe Acrobat PDF will orient the report as needed. Click the **OK** button and retrieve the results from the printer.

☐ Reports can also be saved electronically,

**VI. Search View Partial Records** To retrieve and complete entry of a partially saved review request, select **Search** from the menu list.

- The list of all partially saved requests will be displayed as illustrated below.

Search														
Menu Errors	<div> <div>List Partial Records</div> <div>Search By PA#</div> <div>Search By Date</div> <div>Search By Recipient</div> <div>Cases Needing Add'l Info.</div> <div>Search By KePro Case ID</div> <div>Search By eQHealth Case ID</div> <div>Search Voided/Canceled Cases</div> </div>													
	PA Numbers	ReviewID	Request Date	From Date	Thru Date	Requestor Name	Recipient ID	First Name	Last Name	Request Type	Setting	Therapy Type	Patient Type	eQ ID
<a href="#">Open</a>	Awaiting PA	11449824	05/02/2012			Inpt Trainer	456	JANE	DOE	Retrospective	Acute IP Rehab			72
<a href="#">Open</a>	Awaiting PA	11449886	05/08/2012			Inpt Trainer	456	JANE	DOE	Retrospective	Acute IP Med/Surg			72
<a href="#">Open</a>	Awaiting PA	11449890	05/08/2012			Inpt Trainer	456	JANE	DOE	Retrospective	Acute IP Med/Surg			72
<a href="#">Open</a>	Awaiting PA	11449909	05/08/2012			Inpt Trainer	456	JANE	DOE	Retrospective	Acute IP Med/Surg			72
<a href="#">Open</a>	Awaiting PA	11449991	05/16/2012			Inpt Trainer	123	JOHN	DOE	Admission	Acute IP Med/Surg			72

- When a partial record is processed, the system puts the user back into the entry screens.
- The user should then complete data entry process as discussed in Section I New Request.
- If it is determined that the partial request should be discarded instead of completed then the user clicks Delete on the row.

**Restrictions:**

- Partially saved records are not processed by eQHealth. The user is responsible for properly completing them and submitting them for review or deleting them as necessary.

## View Previously Submitted Review Requests

The user can view any previously submitted review requests. To retrieve a list of previously submitted requests, select **Search** from the menu list.

- The user may Search by PA#, Search by Admit Date, Search by Recipient ID, or Search by eQHealth Case ID.
- Review requests pending additional information can also be accessed from this tab.
- Key in the applicable request criteria.
- The system will display all electronically submitted requests that meet the criteria.
- To obtain a list of requests submitted by all users associated with the providers Medicaid number, click the box to clear the check mark.
- To view the data entered in a review request, click the **Open** next to the record needed. The completed entry screens will be displayed.

Below is an example of the data grid displayed for the View Previous Requests (Search by Recipient) option.

**Search**

Menu Errors

List Partial Records

Search By PA#

Search By Date

Search By Recipient

Cases Needing Add'l Info.

Search By KePro Case ID

Search By eQHealth Case ID

Search Voided/Canceled Cases

Enter a Recipient ID #, then click Search.

Recipient ID: 456

Search

	PA Numbers	ReviewID	Request Date	From Date	Thru Date	Requestor Name	Recipient ID	First Name	Last Name	Request Type	Setting	Therapy Type	Patient Type	eQHealth Case ID
Open	Awaiting PA	11449475	04/18/2012	04/18/2012	05/01/2012	Inpt Trainer	456	JANE	DOE	Admission	Acute IP Med/Surg			729565
Open	Awaiting PA	11449489	04/18/2012	04/18/2012	04/21/2012	Inpt Trainer	456	JANE	DOE	Admission	Acute IP Med/Surg			729566
Open	Awaiting PA	11449529	04/18/2012			Inpt Trainer	456	JANE	DOE	Retrospective	Acute IP Med/Surg			729569
Open	Awaiting PA	11449546	04/18/2012	04/20/2012	04/22/2012	Inpt Trainer	456	JANE	DOE	Admission	Acute IP Med/Surg			729571
Open	Awaiting PA	11449563	04/19/2012	03/01/2012	03/20/2012	Inpt Trainer	456	JANE	DOE	Retrospective	Acute IP Med/Surg			729573
Open	Awaiting PA	11449617	04/19/2012			Inpt Trainer	456	JANE	DOE	Admission	Acute IP Med/Surg			729576
	Awaiting PA										Acute IP			

## VII. Attachments

Supporting documentation requirements are dictated by AHCA policy.

Documents should be submitted at the time the authorization request is entered. However, for requests submitted without supporting documentation, the documents can be submitted after the request is submitted by accessing the review via the “Attachments” tab.

The documents may be linked to a review request in one of two ways:

a. You may link a pdf, jpeg, tif, or bmp document directly to the review

Attachments												
Menu Errors	In Process			Completed Inpatient			Completed Outpatient					
	ReviewID	Recipient ID	First Name	Last Name	eQHealth Case ID	Admit Date	KBaby Name	Account Number	Receipt Date	Record Status		
	11449135	123	JOHN	DOE	729554	10/25/2011			10/08/2013	At 1st Level Review	<a href="#">Open Review</a>	<a href="#">Link Attachment</a>
	11449387	123	JOHN	DOE	729561	01/06/2012		1/1/12	02/03/2012	At 1st Level Review	<a href="#">Open Review</a>	<a href="#">Link Attachment</a>
	11449461	123	JOHN	DOE	729564	05/01/2012			04/18/2012	At 1st Level Review	<a href="#">Open Review</a>	<a href="#">Link Attachment</a>
	11449501	123	JOHN	DOE	729567	04/18/2012			10/15/2013	At 1st Level Review	<a href="#">Open Review</a>	<a href="#">Link Attachment</a>
	11449550	123	JOHN	DOE	729572	04/15/2012			04/19/2012	At 1st Level Review	<a href="#">Open Review</a>	<a href="#">Link Attachment</a>

OR

b. You may create a bar-coded fax coversheet and fax the document.

To access either option, click the **Link Attachments** hyperlink at the end of the review request line you are interested.

Providers can also view previously submitted documents on this tab.

You will see the following options:

Close

Print attachment coversheet(s)

Upload attachment image(s)

**INSTRUCTIONS:**  
Only provide attachments if required or requested. The following attachments are required.

1. Order for study(s)

The following attachments are optional:

2. Results of previous recent scans, if applicable,
3. Test and Study results
4. Physician visit notes
5. Other documentation related to current diagnosis

Click Upload attachment image(s) to directly link a digital image to the review request. You will see a popup box with a list of all current available document options for the review.



Close

Print attachment coversheet(s)

Upload attachment image(s)

INSTRUCTIONS:

Only provide attachments if required or requested. The following attachments are required.

1. Order for study(s)

The following attachments are optional:

2. Results of previous recent scans, if applicable,
3. Test and Study results
4. Physician visit notes
5. Other documentation related to current diagnosis

Order for study(s)

Browse

✕ Remove

Add

Upload

<https://flwebapps.eqhs.org:443/fltrainportalnew/PopupPages/LinkImagePage.aspx?LPID=1&ReviewID=11454492>

**NOTE:** In order for your review to get to the nurse reviewer, you must label a fax cover sheet or label an upload "Order for Study(s)"

## Fax Cover Page

---

eQHealth Solutions  
Fax Cover Page  
eQHealth Solutions Fax Numbers:  
Home Health, Therapy and PCS: 855-321-3747  
Inpatient: 855-427-3747



R-11454492 I-131

Provider ID: 010087101  
Provider Name: TEST HOSPITAL  
PA #:  
Recipient ID: 456  
Recipient Name: JANE DOE  
Admit Date: 10/01/2015  
Review ID: 11454492  
# Pages (Including this one) \_\_\_\_\_

**Only use coversheet once.**  
**Please do not modify or duplicate bar code or cover sheet in any way.**

ATTACHMENT(S) FOR INITIAL REQUEST FOR REVIEW

Order for study(s)

Once you have selected all the coversheets you would like, click Generate Coversheet. The system will open a new web browser for each coversheet you selected and you can save or print by clicking the appropriate option at the top of the browser window.

*IMPORTANT NOTE: Do not reuse or modify the fax sheets. Like the barcodes on the cereal you buy at the grocery store, our system needs the correct barcode for each document*

## VIII. Letters

All written correspondence from eQHealth Solutions will be available via our web system by accessing the **Letters** menu option. Letters are grouped into 3 categories as follows:

- ☐ In Process – letters generated prior to completion of an initial review, including the pending and suspend letters.
- ☐ Completed – initial review determination letters.
- ☐ Reconsideration – reconsideration outcome letters.

Click the tab of your choice and enter the required information.

Letters Search

Menu

Errors

Completed

In Process

Reconsiderations

Please select the search criteria from the list below and click "Search"

Review ID

Search

The resulting list will display all the available letters. You may open the review or view all letters for a review by clicking the **View Letter** option  
To view the letter, click **View Letter**. This will result in a list of all letters pertaining to the review.

Select the letter you want to see by clicking **View**. You may print the letter or save it to your computer.

## IX. Respond to Denial

If there is an adverse determination for a review request, you have the option to request a Peer to Peer Reconsideration.

To do this, click **Respond to Denial** from the menu list. Select an option and enter the required information.

Respond to Denial

Menu

Errors

Please select the type of ID number you have and click "Search"

Review ID

Review ID

eQHealth Case ID

Kepto Case ID

- To request Reconsideration, click the **Link Recon Request**.
- You may either agree with eQHealth physician reviewer's decision, or request a reconsideration review and enter additional supporting information in the available textbox for our physician peer reviewer to use when reevaluating the case. You may also attach additional documents to the review request by clicking on the Link Attachment button and following the instructions to either directly upload the document or create a bar-coded fax coversheet. See the section titled Attachments for further details.
- If you intend to link supporting documentation, please check the checkbox under the large text box. This will let us know to wait until the documents are linked before sending the review to our physicians.

Start	DX CODES/ITEMS	DATES	HISTORY	DC PLAN	FUNCTIONING	GOALS	SOCIAL HISTORY	RECON
-------	----------------	-------	---------	---------	-------------	-------	----------------	-------

☐ I agree with eQHealth physician reviewer's adverse determination and waive reconsideration review rights  
☒ I do not agree with eQHealth physician reviewer's adverse determination and am requesting a reconsideration review

Enter any additional information to be considered with your request for reconsideration that justifies medical necessity of the previously denied or reduced level of services.

☐ Additional supporting documentation will be submitted via upload, or faxed using the barcoded coversheet

## X. Update My Profile

Click **Update My Profile** from the menu list.

**User Edit**

Menu  
Errors

UserID: 95736

User Name:

First Name:

Last Name:

Password:

Email:

InactiveDate:

Phone Number:

Extension:

Receive review recon emails: ☒

Allow to enter requests?: ☒

Allow to view provider letters?: ☒

Allow to view physician letters?: ☐

Receive review approval emails: ☒

Receive review pended emails: ☒

Receive review suspended emails: ☐

Receive review canceled emails: ☐

Receive review partially denied emails: ☒

Receive review recon complete emails: ☒

Receive review denied emails: ☐

[Save Changes](#)

- To save the login information, click the **Save Changes**.

**NOTE: All required data fields must be entered before the system will save the information.**

- The system will perform edit checks on the login information and display an error message above the save changes link.
- Correct edit errors, click the **Save Changes**.
- If the system does not detect any errors, the user will be given a message verifying that the user login information was successfully saved to eQHealth Solution's web login data table.

### **Field** **User Id**

### **Description**

Unique user identifier. All alpha characters must be in lowercase. Examples: user's first name; user's first initial then last name  
Login ID must be unique across all users of eQHealth Web based system. If you enter a Login ID and the system responds that this ID is already on file, then you must use a different ID. A common solution to this situation is to append a numeric digit at the end of the last name. For example, user "Jane Doe" would be jdoe1.

**Password** Must be between 6 and 10 characters. All alpha characters must be in lowercase. Each user is responsible for keeping this password confidential.

**Name** The user's name. This name will be automatically copied to every review request that is submitted to eQHealth by this user. It is maintained on the review record and is printed on the certification letters.

**Phone and Phone Extension** The user's phone number and phone extension. The phone and extension numbers will be automatically copied to every review request that is submitted to eQHealth by this user. It is maintained on the review record.

**Inactivate Date** Once users are added by the User Administrator they cannot be deleted without contact with eQHealth staff. This is for tracking and audit trail purposes. If a user is no longer with the facility or is no longer authorized to access the provider's confidential data, then the facility access User Administrator should immediately inactivate their login. Simply key a date into this field and the user login will be inactivated from the entered date forward.

**Field** Description

**Indicate if the user is granted access to view provider letters** The User Administrator determines which users can view provider letters, run reports and/or create review requests. The User Administrator can at any time change the setting of this field thereby opening or closing access to this module. The user cannot change the levels of access stated above, but can change demographic information and email notification options.

**Indicate if the user is granted access to view physician letters** Physician letters are not applicable to DME providers and cannot be selected.

## User Administration

Menu

Add New User

	UserID	User Name	Inactive DT	Phone	Extension	Added DT	Last Edit DT	Email	
Errors	<a href="#">Edit</a>	95736	InptTrainer		1234567899	1234	11/16/2009 1:53:20 PM	6/25/2014 4:04:18 PM	noreply@eqhs.org
	<a href="#">Edit</a>	95928	jcalvert		2222222222		6/20/2014 6:09:10 PM	6/24/2014 11:44:30 AM	jcalvert@eqhs.org
	<a href="#">Edit</a>	95929	jones1111		2222222022		6/24/2014 2:00:34 PM	6/24/2014 2:00:34 PM	ncalvert@eqhs.org

❑ Click on **Add New User** to enter login information for a **new** user. The following screen opens. Enter required information. When complete, press **Save Changes** to continue or press **Back to Users List** to return to the list of users.

**NOTE: Every user's Login ID and Password is tied to a "unique" Medicaid provider number.** Therefore, users at multiple practice locations CANNOT be added using the same login/password for a given provider. For example, a user at location B cannot have the same Login/Password at location A. These logins are assigned by the User Administrator and complies with the local area networks standards for user logins/passwords.

## User Edit

Menu			Allow to run reports?: <input type="checkbox"/>
			Allow to enter requests?: <input type="checkbox"/>
Errors	User Name:	<input type="text" value="At least 6 chars. lower case."/>	Allow to view provider letters?: <input type="checkbox"/>
	First Name:	<input type="text"/>	Allow to view physician letters?: <input type="checkbox"/>
	Last Name:	<input type="text"/>	Receive review approval emails: <input type="checkbox"/>
	Password:	<input type="password"/>	Receive review pended emails: <input type="checkbox"/>
	Email:	<input type="text"/>	Receive review suspended emails: <input type="checkbox"/>
	InactiveDate:	<input type="text"/>	Receive review canceled emails: <input type="checkbox"/>
	Phone Number:	<input type="text" value="( ) -"/>	Receive review partially denied emails: <input type="checkbox"/>
	Extension:	<input type="text"/>	Receive review recon complete emails: <input type="checkbox"/>
	Receive review recon emails: <input type="checkbox"/>		Receive review denied emails: <input type="checkbox"/>
	<a href="#">Save Changes</a>	<a href="#">Back to User List</a>	

- To **change** a user's login information, click **Edit** on the record needed.
- An edit screen opens with that user's current information.
- Type in correct information and press **Save Changes** or press **Back to Users List** to return to the list of users.

Menu

Errors

## User Edit

UserID: 95736

User Name:

First Name:

Last Name:

Password:

Email:

InactiveDate:

Phone Number:

Extension:

Allow to enter requests?: ☒

Allow to view provider letters?: ☒

Allow to view physician letters?: ☐

Receive review approval emails: ☒

Receive review pended emails: ☒

Receive review suspended emails: ☐

Receive review canceled emails: ☐

Receive review partially denied emails: ☒

Receive review recon complete emails: ☒

Receive review denied emails: ☐

Receive review recon emails: ☒

[Save Changes](#)