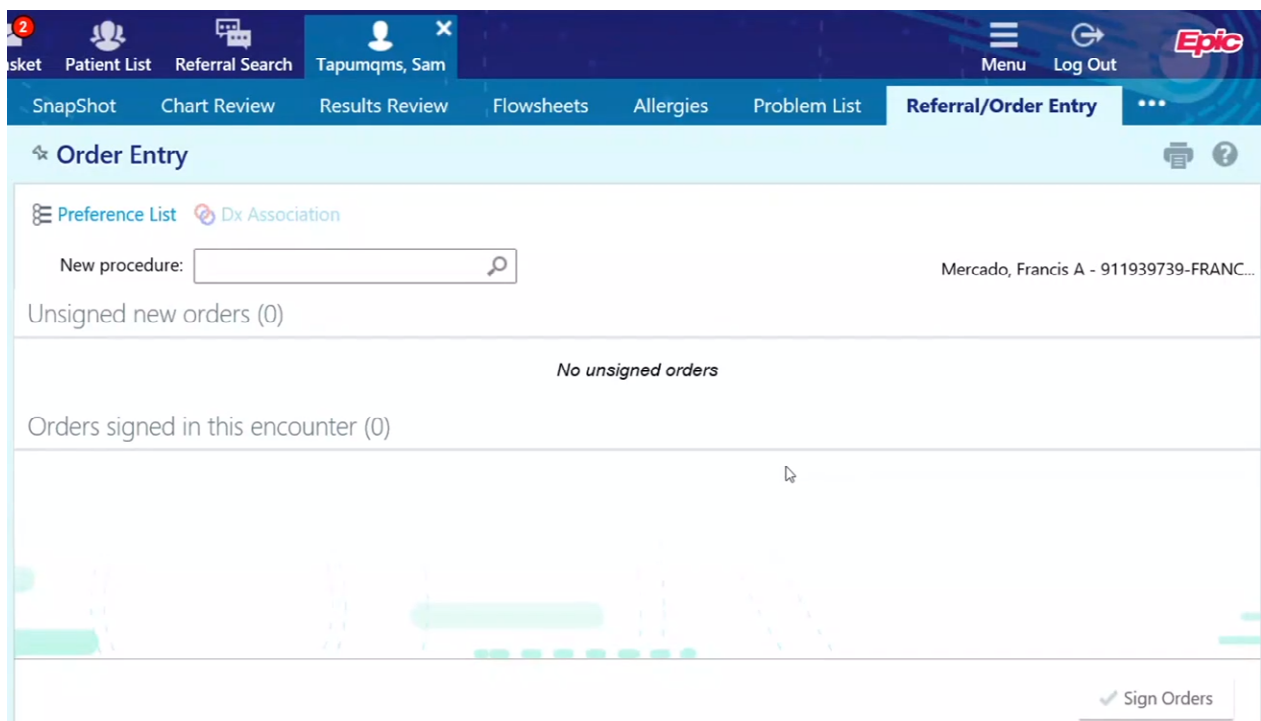


JOB AID: Procedure Notification

***Please note** - Before you start your Referral/Order and select your procedure, please look at our Authorization Code Ranges page on our provider website to find the code ranges for the procedure. Just click on the desired specialty on that page to view the codes. You can use CTRL-F to search within the document as well.

1. Enter the service/specialty being requested by name, e.g., Cardiology or Gastroenterology, and select the magnifying glass to search. Specialty names and their synonyms will return results.



The screenshot shows the Epic Referral/Order Entry interface. At the top, there is a navigation bar with tabs for Snapshot, Chart Review, Results Review, Flowsheets, Allergies, Problem List, and Referral/Order Entry. The Referral/Order Entry tab is active. Below the navigation bar, the page title is "Order Entry". There are links for "Preference List" and "Dx Association". A search box labeled "New procedure:" is present, with a magnifying glass icon. To the right of the search box, the text "Mercado, Francis A - 911939739-FRANC..." is visible. Below the search box, there are two sections: "Unsigned new orders (0)" and "Orders signed in this encounter (0)". The "Unsigned new orders" section contains the text "No unsigned orders". At the bottom right of the interface, there is a button labeled "Sign Orders" with a checkmark icon.

- Results matching the searched criteria will be displayed. Type in the service/specialty and click Search.

Please make a selection

Procedure:

My Preference List Matches:

Name	Px Code	Type	Priority	Status	Pref List
REF MESSAGE THERAPY	99201.221	Referral			KPWA AL REFERRAL PROCEDURES
REF MATERNAL AND FETAL	99201.205	Referral			KPWA AL REFERRAL PROCEDURES
REF MENTAL HEALTH	90806.100	Referral			KPWA AL REFERRAL PROCEDURES
REF MENTAL (FOR MH PROVIDERS ONLY)	99201.427	Referral			KPWA AL REFERRAL PROCEDURES
REF NATUROPATHY	99201.405	Referral			KPWA AL REFERRAL PROCEDURES
REF NEONATOLOGY	99201.404	Referral			KPWA AL REFERRAL PROCEDURES
REF NEPHROLOGY	99201.122	Referral			KPWA AL REFERRAL PROCEDURES
REF NEUROLOGY	99201.123	Referral			KPWA AL REFERRAL PROCEDURES

100 records loaded, [load more.](#)

- Choose the appropriate template from the displayed results.

Please make a selection

Procedure:

My Preference List Matches:

Name	Px Code	Type	Priority	Status	Pref List
REF GASTROENTEROLOGY	99201.114	Referral			KPWA AL REFERRAL PROCEDURES

1 record loaded.

4. The Referral/Order edit screen displays. Fill out the Referral/Order fields according to the examples shown below.

REF GASTROENTEROLOGY

Class:

Process instructions:
 If additional services are entered in the comment box, they will not be reviewed for coverage and will not be included in the final coverage determination.
 If you are referring to a Kaiser physician, choose "Internal". If you are referring to any other physician, choose "External".
 If you choose "Other" in the Referral Reason box, your request WILL NOT auto-adjudicate and a coverage determination may be delayed.

Referral:
 Priority:
 To prov spec:
 To provider:
 Address:
 To loc/pos:

Questions:
 1. Select the correct questions.
 Reason For Referral?
 Requested Place Of Service?
 Facility For Procedure (If facility is not in list add in comments below)
 Ok to substitute an in network provider if the chosen referred to provider is not in the member's network?
 Does patient have any functional status or cognitive limitations?
 Is this a retrospective request? (In the past)
 Contact Name:

- Organization/Tax ID Level that patient is being referred to
- Organization Address
- Location/Place of Service
- Facility where procedure will be performed, if not the office setting/same location as to loc/pos field (used by specialists to indicate where a procedure will be done). Add facility details in the comments if no return match

Change Requested Place of Service depending on where services/procedure is being done. (Example below procedure being done at Ambulatory Surgery Center instead of Office)

Questions:

1. Select the correct questions.

Reason For Referral?

Requested Place Of Service?

Please make a selection

Search Matches:

Title	Number
Ambulatory Surgical Center	24
Inpatient Hospital	21
Office	11
On Campus - Outpatient Hospital	22

4 categories loaded.

Answer

External Questions

Sigmoidoscopy

PROVIDENCE ST MAR

Yes No

Yes No

Yes No

REF GASTROENTEROLOGY

Class: External [1007] Internal External

Process instructions: If additional services are entered in the comment box, they will not be reviewed for coverage and will not be included in the final coverage determination. If you are referring to a Kaiser physician, choose "Internal". If you are referring to any other physician, choose "External". If you choose "Other" in the Referral Reason box, your request WILL NOT auto-adjudicate and a coverage determination may be delayed.

Referral: Priority: Routine [1] Routine Urgent

To prov spec: Gastroenterology [9]

To provider: TRI-CITIES DIGESTIVE HEALTH CT

To loc/pos: TRI-CITIES DIGESTIVE HEALTH CE

Questions:

1. Select the correct questions.

Reason For Referral?

Requested Place Of Service?

Facility For Procedure (If facility is not in list add in comments below)

Ok to substitute an in network provider if the chosen referred to provider is not in the member's network?

Does patient have any functional status or cognitive limitations?

Is this a retrospective request? (In the past)

Contact Name:

Contact Phone/Ext:

Answer

External Questions

Colonoscopy

Ambulatory Surgical

TRI-CITIES ENDOSCO

Yes No

Yes No

Yes No