HEALTH PLAN OF NEVADA
A UnitedHealthcare Company

SIERRA HEALTH AND LIFE
A UnitedHealthcare Company

Online Provider Center Tutorial Search and Manage Prior Authorizations

Search and Manage Prior Authorizations

To review and communicate in a Prior Authorization, select **Referral/Prior Authorization and Search and Manage Prior Authorization.**

Search and Manage Prior Authorizations Continued:

The **Filter Options** on the **Search Prior Authorization** screen will be used to filter the types of authorizations you want to view or manage. These filters can be used separately or together to define the view you are seeking.

Providers: The **Provider/Group** is who originally requested the services *or* who is assigned to service the authorization. One or more providers can be selected as a filter for this screen.

Additional Options: The user can choose an additional filter of **Prior Authorization ID**, **Member ID**, **Medicaid ID**, **Member Name** (subject to 15-day timeframe) or **SMA MRN** (subject to 15-day timeframe).
Criteria: The user then places the value for this option in the box to the right provided.

Search and Manage Prior Authorizations Continued:

Once all the **Filter Options** are selected, select the **Apply Filter** button and the screen refreshes with new results.
- **Reset Filter** will clear out all selections so the user can select new **Filter Options**
- **Refresh** button will refresh the screen with the latest authorization information

Users can also select the **New Referral/Prior Auth** button will launch to create a new referral or prior auth.

Search and Manage Prior Authorizations Continued:

To view the **Prior Authorization Details**, select the hyperlink prior auth ID# (i.e. S12114728) and the **Search Prior Authorization** screen expands to display the details. **Web Notes** are what the user entered to communicate to the insurance prior auth team and the **RN Notes** are what the insurance prior auth team is communicating back to the Providers.

Routine	S12114728		Oct 16 2024 12:00:00 AM		Approved		MEDICAL
		MemberID:					

Diagnosis codes(s)/Active Problems	Valid Dates	Category	Subcategory
Code:A15 Description:Respiratory tuberculosis	See Procedure Valid Dates	Radiology	, CT Neck, Wgt > 349 lbs – Cat Scan (CT)

Procedure

Requesting Providers Name	Address		Phone	Fax

#	Procedure	Units	Status-Reason	Service Provider	Place Of Service	Valid Dates	Facility	Benefit Tier
0	A0010, Ambulance Service, Basic Life Support (Bls) Base Rate, Emergency Trans	1	Approved, Review approved		Office	10/16/24, 02/13/25		HMO

Notes

Date	Note

Web Note

RN Note

Search and Manage Prior Authorizations (end)

The definitions of the columns are:
Priority: Indicates the priority of the prior authorization selected by the requesting provider/group.
ID: The authorization ID number assigned when the prior authorization was created
Patient: Supplies the patient information.
Submitted: Date the authorization was submitted.
Requesting Providers: Requesting Provider name.
Status: The current status of the authorization, such as Approved, Pending, Voided or Disallowed.
Providers: Servicing group name.

Buttons:
Print icon: Selecting this icon provides the user the ability to print the authorization.
Fax icon: Selecting this icon provides the user the ability to print our special fax coversheet with bar code technology to attach records (when required by the UM PA team) for a **Pending** prior authorization case.
Comments icon: Allows a quick view of comments associated with the prior authorization.
Copy icon: Selecting this icon will allow a copy the prior authorization.