West Virginia Trading Partner Account

Electronic Health Record Provider User Guide

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\(^1\) 45 CFR Parts 160 and 164, Standards for Privacy of Individually Identifiable Health Information; Final Rule
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# Revision History

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1. Introduction

The West Virginia Trading Partner Account Electronic Health Record Provider User Guide provides detailed instructions on how authorized healthcare providers can utilize the Health PAS-OnLine portal to access and view a consolidated record of member clinical information. This user guide is provided for all trading partners with access to Electronic Health Record, who uses the West Virginia (WV) Healthcare Payer Administration Solution (Health PAS)-OnLine web portal.

2. Electronic Health Record

The West Virginia Trading Partner Account Electronic Health Record Provider User Guide describes how to search for a user via the Electronic Health Record tab within Health PAS-OnLine. The Electronic Health Record (EHR) allows provider and authorized users access to the clinical profile functionality, a consolidated record of member clinical information.

Providers that are enrolled with the correct provider type and specialty can access the Electronic Health Record clinical profile functionality.

Please contact your trading partner account administrator for questions regarding your provider type and specialty.

The Electronic Health Record is accessible from the Electronic Health Record and the View Patient Roster icons located under the Form Entry tab on the blue navigational toolbar. Refer to Figure 2-1.

To access Electronic Health Record, users must sign into their Trading Partner Account on the Health PAS-OnLine web portal. Contact your manager or supervisor if you do not have an active user name or password.

User access to the Electronic Health Record is based on security rights. Contact your manager or supervisor if you do not have access to the tabs.
2.1 Access via Electronic Health Record Icon

To access the Electronic Health Record tool from the Electronic Health Record icon, follow these steps:

1. Click the Electronic Health Record icon. Refer to Figure 2-2.

2. The Electronic Health Record Search window appears.

3. From the Select Billing Provider drop-down list, select the billing provider. Refer to Figure 2-3.

4. Search for a member using at least three of the following search criteria:
   - Member ID
   - Member Name (Last Name and First Name = one criterion)
   - Date of Birth
   - Social Security Number

5. Click SUBMIT. Refer to Figure 2-4.
If the member is not found, a message displays stating no member results were found for the search criteria. Verify the member information and complete the search steps again.

6. The **Electronic Health Record** displays in a new window. *Refer to Figure 2-5*

**Figure 2-5: Electronic Health Record**

> User access to the Electronic Health Record is based on security rights.
2.2 Access via View Patient Roster

To access the Electronic Health Record tool from the View Patient Roster icon, follow these steps:

1. Click the View Patient Roster icon. Refer to Figure 2-6.

2. The Patient Roster List window appears.

3. From the Select Billing Provider drop-down list, select the billing provider.

4. Click the radio button next to the name of the member whose clinical profile needs to be viewed. The Electronic Health Record tab below the Patient Roster List becomes active.

5. Click the Electronic Health Record tab. Refer to Figure 2-7.

6. The Electronic Health Record displays in a new window. Refer to Figure 2-8.
3. Member Electronic Health Record

The Member Electronic Health Record (MEHR) is viewed utilizing the clinical profile functionalities. The clinical profile function allows authorized users access to a member’s medical history, including case management, diagnosis, and authorization information. Member claims and clinical data is grouped into relative types (office visits, service history, diagnosis, hospital, transportation, etc.). The data is summarized with a clinical focus, with each tab representing an individual focus.

Access is restricted by the trading partner account administrator. Contact the TPA administrator for questions or issues regarding access.

3.1 Navigating MEHR

On the MEHR window, there is information pertinent to the member that will assist authorized users in providing additional care by verifying information. Refer to Table 3-1: Member Electronic Health Record Information.
for a detailed description of the available information.

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRINT MEMBER SUMMARY</td>
<td>Prints a consolidated summary of the member’s information that has been populated on the window.</td>
</tr>
<tr>
<td>Member ID</td>
<td>Displays member details including demographic, enrollment, and other insurance information.</td>
</tr>
<tr>
<td>Known Chronic Diseases</td>
<td>Displays chronic diseases for the member if applicable.</td>
</tr>
<tr>
<td>Current Enrollment in Case/Case Management</td>
<td>Displays current enrollment information.</td>
</tr>
<tr>
<td>EPSDT</td>
<td>Early and Periodic Screening, Diagnostic and Treatment information.</td>
</tr>
<tr>
<td>Dental</td>
<td>Claim information related to dental procedures.</td>
</tr>
<tr>
<td>Preventative Health</td>
<td>Claim information related to preventative health.</td>
</tr>
<tr>
<td>Waiver</td>
<td>Claim information related to waiver.</td>
</tr>
<tr>
<td>Timeline</td>
<td>Displays a timeline of claims and encounter data categorized by Diagnoses, Services, Medications and Providers.</td>
</tr>
<tr>
<td>Diagnosis History</td>
<td>User can view the member’s diagnostic history (the system defaults to two years).</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>Provides a list of Emergency Room visits.</td>
</tr>
<tr>
<td>Service History</td>
<td>Displays the member’s service history from claims (Current Procedural Terminology [CPT], Healthcare Common Procedure Coding System [HCPCS]).</td>
</tr>
<tr>
<td>Hospital Visits</td>
<td>A view of member history related to inpatient hospital visits.</td>
</tr>
<tr>
<td>Office Visits</td>
<td>Displays a list of physician office visits and details.</td>
</tr>
<tr>
<td>Medications</td>
<td>Medications are listed according to their National Drug Code (NDC) and include the drug description and the last time the medication was picked up. Clicking the arrow beside the NDC will show details around each time the medication was picked up including the prescriber, quantity, days’ supply, and refills remaining for the medication.</td>
</tr>
<tr>
<td>Vaccination</td>
<td>Displays the member’s known vaccination history. The top portion of the window will display all vaccines reported on claims received by the State Medicaid system. The lower portion of the window shows all known vaccines as data entered directly by a provider or received by Medicaid from the State immunization registry. This section may not contain the member’s full vaccination history.</td>
</tr>
<tr>
<td>Term</td>
<td>Description</td>
</tr>
<tr>
<td>--------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Vitals</td>
<td>Displays a list of vitals date entered for authorized users including blood pressure, height and weight.</td>
</tr>
<tr>
<td>Labs/Rad/Screen</td>
<td>The first section of the lab/screening claims screen will display all known Medicaid claims for the member that are screenings or laboratory services. The lower section shows any laboratory order and results that were received by Medicaid from a clinical system or direct data entered by the provider or a member. The data source column specifies where the information originates. Provides a list of all laboratory claims and history as well as received clinical results (e.g., lead screenings).</td>
</tr>
<tr>
<td>Equipment</td>
<td>Displays a list of Durable Medical Equipment (DME) claims history.</td>
</tr>
<tr>
<td>Care Notification</td>
<td>System generated care alerts for missed services or opportunities based on service care information.</td>
</tr>
<tr>
<td>Authorizations</td>
<td>Displays a list of medical and dental Prior/Service Authorizations (pharmacy authorizations are located under the Medications tab).</td>
</tr>
<tr>
<td>Transportation Service</td>
<td>Displays a list of claims related to Non-Emergency Transportation (NET).</td>
</tr>
</tbody>
</table>

Table 3-1: Member Electronic Health Record Information

### 3.2 MEHR Disclaimer

When the MEHR initially displays, there is a disclaimer at the top of the window that will disappear automatically. This disclaimer advises of the delay of claims data from the actual visit with the provider. Refer to Figure 3-1.

![Figure 3-1: Claims Disclaimer Information](image-url)
3.3 **MEHR Member Header**

The Member Header is located at the top of the Clinical Profile window. This header remains active throughout the MEHR process. The available information includes the member’s last and first name, age, gender, date of birth, the member ID, known chronic diseases and if the member is enrolled in Care/Case Management including the program, case open date and case ID. Refer to **Figure 3-2**.

![Figure 3-2: Member Header Information](image)

The **Known Chronic Diseases** list is generated using the member’s data and determines if the member’s information matches an approved list of chronic conditions. Each chronic condition that matches this list is displayed under the Chronic Disease Diagnosis column header. Refer to **Figure 3-3**.

![Figure 3-3: Known Chronic Diseases](image)

Member information is separated into different categories. To access information that only applies specifically to **EPSDT**, **Dental**, **Preventive Health**, or **Waivers**, click the respective tab across the top of the grid. To view all information for the member, click the **All** tab. Refer to **Figure 3-4**.

![Figure 3-4: All, EPSDT, Dental, Preventative Health, and Waiver tabs](image)
3.4 Calendar Date Search

The information displayed defaults to two years of information. The user can change this information by clicking on the drop-down list next to the calendar or by manually entering the information in the date and to fields. Refer to Figure 3-5 and Figure 3-6.

![Figure 3-5: Date Search](image)

Once the dates of the search have been changed (if applicable), click SEARCH to conduct a search or click RESET to return the calendar to the two year default dates. Refer to Figure.

![Figure 3-6: Calendar Search](image)

![Figure 3-7: SEARCH and RESET buttons](image)

The system will retain the selected Date of Service range selected by the users throughout the various tabs until the date range is changed by the user.
3.5 Member Electronic Health Record Tabs

The Member Electronic Health Record (MEHR) clinical information has the member’s information in a graphic format. The member’s information is grouped into different sections by episodic treatment groups (ETGs) and providers seen. MEHR indicates where the service occurred, such as inpatient, emergency room (ER) visit, or outpatient. It also groups the pharmacy claims history in a graphic format.

3.5.1 Timeline

The Timeline tab will display services in a graphical format. Claim and encounter data is categorized by Diagnoses, Services, Medications and Providers. Refer to Figure.

![Timeline](image)

This window will display by default when MEHR is opened.

Figure 3-8: Calendar Timeline and Data Categories

The time period defaults to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.

Services are indicated on the timeline by unique icons for Hospital (H), Emergency Room (ER), Office (O), and Medication Claim (Rx). The timeline calendar is color coded according to the type of visit. Hospital is green, Emergency Room is yellow, Office is black and Medication is red. Refer to Figure.

![Timeline Color Coded Visits](image)

Figure 3-9: Timeline Color Coded Visits
Users may ‘focus’ on a particular time period by moving ‘sliders’ on either end of the timeline. As the sliders are moved a calendar will display the date range being selected. Refer to Figure and Figure .

![Figure 3-10: Timeline Sliders](image)

![Figure 3-11: Timeline Slider Date Range](image)

Moving the sliders does not change the Date of Service displayed in the primary calendar. It only affects the data displayed on the Timeline.

### 3.5.1.1 Diagnoses

The **Diagnoses** section will display an alphabetical list of diagnosed medical conditions indicating the reason for the patient visit. A service icon is displayed on the timeline indicating the date and the type of location the service was rendered. Hovering the mouse over the icon will provide additional information on the service provided at that particular visit. The claim number, start date, end date, service facility, rendering provider, diagnoses, services rendered, and the claim payment status is displayed in the pop-up box. Refer to Figure .
3.5.1.2 Services

The *Services* section will display an alphabetical list of services rendered to the member. A service icon is displayed on the timeline indicating the date and type of location where the service was rendered. Hovering the mouse over the icon will provide additional information on the service provided at that particular visit. The claim number, start date, end date, service facility, rendering provider, diagnoses, services code, and claim payment status is displayed in the pop-up box. *Refer to Figure*. 

![Figure 3-12: Diagnoses Timeline Display](image)

![Figure 3-13: Services Timeline Display](image)
3.5.1.3 Mediations

The **Medications** section will display an alphabetical list of medications prescribed to the member. A service icon is displayed on the timeline indicating the date the prescription was processed. Hovering the mouse over the icon will provide additional information on the prescription. The claim number, start date, end date, pharmacy that filled the prescription, the prescribing provider, diagnoses, medication description, NDC #, quantity, days, refills available, and claim payment status is displayed in the pop-up box. *Refer to Figure.*

![Medications Timeline Display](image-url)

*Figure 3-14: Medications Timeline Display*
3.5.1.4 Providers

The Providers section will display a list of facilities, group by the provider type, where services where rendering. A service icon is displayed on the timeline indicating the date and type of service rendered. Hovering the mouse over an icon will provide addition information on the services rendered during that particular visit. Refer to Figure.

![Figure 3-15: Providers Timeline Display](image-url)
3.5.2 Diagnosis History Tab

In the Diagnosis History tab, the user can view the member’s diagnostic history.

The time period will display according to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.

Results may be sorted in ascending or descending order by clicking any column header.

To view the specific encounters that reported the diagnosis, complete the following steps:

1. Click the **Diagnosis History** tab. The **Diagnosis History** window will display. The entries display the associated diagnosis from that encounter period. **Refer to Figure**.

![Figure 3-16: Diagnosis History Tab](image)

2. Click the arrow next to the diagnosis to view claim details on the specific encounter that reported the diagnosis. The additional information available to view includes the provider, facility/pay to, and date(s) of service. **Refer to Figure**.
3. The + Show Details icon will open all diagnosis arrows displaying information for all diagnosis codes.

4. Clicking the – Hide Details will close all open arrows. Refer to Figure.

Figure 3-17: Diagnosis History Additional Information

Figure 3-18: Show All Diagnosis Details
3.5.3 Emergency Room Tab

The Emergency Room tab provides a list of the member’s emergency room visits.

The time period will display according to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.

The results may be sorted in ascending or descending order by clicking any column header.

To view emergency room visit information in detail, complete the following steps:

1. Click the Emergency Room tab. The Emergency Room Visit window will display. The entries will display of where the member was treated and the associated diagnosis from that encounter period. Refer to Figure.

![Figure 3-19: Emergency Room Tab](image)

2. Click the Start Date hyperlink to view information regarding a specific emergency room visit. The additional information available to view includes the associated diagnosis and the associated services. Refer to Figure.
Figure 3-20: Emergency Room Visit Additional Information

### 3.5.4 Service History Tab

The Service History tab will display the member’s service history from claims (CPTs, HCPCS).

The time period will display according to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.

The results may be sorted in ascending or descending order by clicking any column header.
To view the service history information in detail, complete the following steps:

1. Click the Service History tab. The Service History window will display. The history of any service of the member displays. Information available includes the service description and last service date. Refer to Figure.

![Figure 3-21: Service History](image)

2. Click the arrow next to the service code to view additional details regarding the service history. The additional information available to view includes the provider, facility/pay to and date(s) of service. Refer to Figure.

![Figure 3-22: Service History Additional Information](image)
3.5.5 Hospital Visits Tab

The **Hospital Visits** tab will display a list of all overnight hospital stays for the member.

The time period will display according to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.

The results may be sorted in ascending or descending order by clicking any column header.

To view all hospital visits, complete the following steps:

1. Click the **Hospital Visits** tab. The **Hospital Visits** window will display. The entries display the admission date, discharge date, where the member was treated and the primary diagnosis. *Refer to Figure*.

   ![Hospital Visits Tab](image)

   **Figure 3-23: Hospital Visits Tab**

2. Click the **Admit Date** hyperlink to view additional information regarding the hospital visit. The additional information available to view includes the associated diagnosis and the associated services. *Refer to Figure*. 

   ![Hospital Visits Window](image)
3.5.6 Office Visits Tab

The **Office Visits** tab will display a list of all of the member’s physician’s office visits.

![Office Visits Tab Diagram]

*Figure 3-24: Hospital Visits Additional Information*

To view the office visit information, complete the following steps:

1. **Click the Office Visits tab.** The **Physician Office Visits** window will display. The information available on this tab includes the date of service, provider, and primary diagnosis. **Refer to Figure**.
2. Click the **Date of Service** hyperlink of the visit date to view additional information regarding the office visit. The additional information available to view includes the associated services and the associated diagnosis. Refer to Figure.

![Figure 3-25: Office Visits Tab](image)

![Figure 3-26: Office Visits Additional Information](image)
3.5.7 Medications Tab (Pharmacy)

The **Medications** tab provides a list of medications from claims history and pharmacy authorization information; grouped by major therapeutic classes for drugs.

- The time period will display according to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.
- The results may be sorted in ascending or descending order by clicking any column header.

3.5.7.1 View Rx Claims History

The **View Rx Claims History** tab provides a list of medications from claims history; grouped by major therapeutic classes for drugs including the NDC, where the prescription and the medication history.

To view the medication claim history information, complete the following steps:

1. Click the **Medications** tab. The **Pharmacy** window will display. A list of the medications associated with the member will display. Medication history is grouped by major therapeutic classes for drugs. **Refer to Figure.**

![Figure 3-27: Medications Tab Claim History](image)

2. Click the arrow beside the therapeutic class to see a member’s known medication history details for that therapeutic class. A list of medication for that therapeutic class associated
to the member will display. Medications are listed according to their National Drug Code (NDC) and include the drug description and the last time the medication was picked up. *Refer to Figure*.

![Figure 3-28: Claim History Therapeutic Class](image)

> To collapse the information click the arrow again.

3. Click the arrow beside the NDC to view additional information regarding the medication. The additional information available to view includes the location where the prescription was filled, the prescriber, quantity, days supplied, refills received and the date the medication was picked up. *Refer to Figure*.

![Figure 3-29: Claim History Additional Information](image)

4. The + *Show Details* icon will open all therapeutic class arrows displaying all available information for all medications located under the Therapeutic Class table.
5. Click the – Hide Details to close all open arrows. Refer to Figure.

![Image of the Pharmacy window with the View Rx Authorizations tab selected. The window displays a list of medications with details such as NDC, Drug Description, Prescriber, Qty, Days, Refills Received, and Service Date.]

**Figure 3-30: Show All Medications Details**

### 3.5.7.2 View Rx Authorizations

The View Rx Authorizations tab provides a list of medications from claims history; grouped by major therapeutic classes for drugs including the NDC, the prescribing provider and the status of the authorization.

To view the pharmacy authorization information, complete the following steps:

1. Click the Medications tab. The Pharmacy window will display. Select the View Rx Authorizations radio button. A list of the medications associated with the member will display. Rx authorization history is grouped by major therapeutic classes for drugs. Refer to Figure.

The screen will default to the View Rx Claims History option.
2. Click the arrow beside the therapeutic class to see a member’s known authorization history details for that therapeutic class. The medication information will display. Medications are listed according to the NDC and include the drug description. Refer to Figure 3-31.

3. Click the arrow beside the NDC to view additional information regarding the authorization. The additional information available regarding the authorization includes...
the authorization number, effective date, term date, prescriber, total units approved, units used and status of the authorization. Refer to Figure.

![Figure 3-33: Rx Authorizations Additional Information](image)

### 3.5.8 Vaccination Tab

The **Vaccination** tab will display the member’s known vaccination history.

1. **Click the Vaccination tab.** The Vaccination Claims window will display. Information available includes the date of service, service description, the provider, and office/pay to provider. Refer to Figure.
The **Vaccination Claims** section displays all vaccines reported on claims received by the state Medicaid system. Information available includes the date of service, the vaccine provided, the provider and office/pay to provider.

The **Vaccinations Clinical Results/Data Entry** section shows all known vaccines as data entered directly by a provider or received by Medicaid from the State immunization registry. Information available includes the date of service, the vaccine provided, manufacturer, any known reactions, the provider and data source (where the information originates).

This section may not contain the member’s full vaccination history.

2. To add vaccination information, click the Add Vaccination tab. Refer to Figure.

Vaccination data may only be manually entered by an authorized individual.
3. The **Add Vaccination** window will display. Select the appropriate options from the drop-down fields. Enter all remaining information. Click **Save**. Refer to **Figure 3-36**.

> Fields with a red asterisk (*) are required. An error message will display if these values are left blank.
The vaccination data manually entered by an authorized individual populates under the Vaccinations Clinical Results/Data Entry section. The data source column specifies where the information originates. The individual that enters the information has access to edit or delete the information. Refer to Figure.

![Vaccination Data Added](image)

**Figure 3-37: Vaccination Data Added**

### 3.5.9 Vitals Tab

The Vitals tab allows authorized users to enter/select vitals and measurements including blood pressure, height, and weight.

- The time period will display according to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.
- The results may be sorted in ascending or descending order by clicking any column header.

To view the vitals history information, complete the following steps:

1. Click the Vitals tab. The Vitals and Measurements window will display. Information available includes the type of vital or measurement, the measurement, units, result comments, dates and data source. Refer to Figure.
2. To add vital information, click the Add Vital tab. Refer to Figure.

Vital data may only be manually entered by an authorized individual.

3. The Add Vital and Measurement window will display. Select the Type drop-down and select the appropriate option. Refer to Figure.
4. Add remaining information. Click **Save. Refer to Figure**.

![Add Vital and Measurement Data](image)

Fields with a red asterisk (*) are required. An error message will display if these values are left blank.

**Figure 3-41: Add Vital and Measurement Data**

The data manually entered populates under the **Vitals and Measurements** section. The data source column specifies where the information originates. The individual that enters the information has access to edit or delete the information. **Refer to Figure**.

![Vital Data Added](image)

**Figure 3-42: Vital Data Added**

### 3.5.10 Labs/Rad/Screen Tab

The **Lab/Rad/Screen** (Labs/Radiology/Screenings) tab will display all known Medicaid claims for the member that are screenings or laboratory services and received clinical results (e.g., lead screenings).
The time period will display according to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.

The results may be sorted in ascending or descending order by clicking any column header.

To view the screening or laboratory services information, complete the following steps:

1. Click the **Labs/Rad/Screen** tab. The Labs, Screenings & Radiology Services window will display. Information available includes the date, service, provider and office. **Refer to Figure**.

![Figure 3-43: Lab/Rad/Screen Tab](image)

The Labs, Screenings & Radiology Services section displays all known Medicaid claims for the member that are screenings or laboratory services. Information available includes the date of service, service description, provider and office.

The Lab/Screening Orders and Results section shows any laboratory order and results that were received by Medicaid from a clinical system or manually entered by an authorized individual. Additional information that may be added including the heart rate, body temperature and head circumference (infants). The Data Source column specifies where the information originates.

2. To add Lab information, click the **Add Labs** tab. **Refer to Figure**.
Lab data may only be manually entered by an authorized individual.

Figure 3-44: Add Labs

3. The Create Labs window will display. Begin typing in the Test field to populate search options. Refer to Figure.

Figure 3-45: Create Labs Test Search

4. Add remaining information. Click Save. Refer to Figure.

*Fields with a red asterisk (*) are required. An error message will display if these values are left blank.
The data manually entered by an authorized individual populates under the **Lab/Screening Orders and Results section**. The data source column specifies where the information originates. Refer to Figure.

![Figure 3-46: Save Create Labs](image)

![Figure 3-47: Lab/Screening Data Added](image)
3.5.11 Equipment Tab

The Equipment tab will display a list of Durable Medical Equipment (DME) claims history.

- The time period will display according to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.
- The results may be sorted in ascending or descending order by clicking any column header.

To view the DME claim information, complete the following steps:

1. Click the Equipment tab. The Medical Equipment window will display. Information available includes the date of service, the service description, and the last service date. Refer to Figure 3-48.

2. Click the arrow beside the service code to view additional information regarding the service code. The additional information available to view includes the provider, facility/pay to and date of service. Refer to Figure 3-48.
3.5.12 Care Notification Tab

The Care Notification tab will display any alerts and care management notifications for those alerts.

The time period will display according to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.

The results may be sorted in ascending or descending order by clicking any column header.

To view Care Notification details, complete the following steps:

1. Click the Care Notification tab. The Care Notification window will display. Information available includes the alert description and the date. Refer to Figure.
3.5.13 Authorizations Tab

The Authorizations tab allows the user to view medical and dental Prior Authorizations (PA) details.

![Diagram of Authorizations Tab]

The time period will display according to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.

The results may be sorted in ascending or descending order by clicking any column header.

To view authorization information, complete the following steps:

1. Click the Authorizations tab. The Medical/Dental Authorizations window will display. Information available includes the authorization number, effective date, termination date, requesting provider, authorization type, and the authorization status. Refer to Figure 1.
2. Click the **Auth #** hyperlink of the authorization number to view additional information regarding the authorization. The additional information available to view includes the authorization details including the requested date and denial reason as well as the diagnosis code(s), procedure codes, and services billed including the number of units used, the number of units approved, and date of services billed. Refer to Figure 3-51.

**Figure 3-51: Authorizations Tab**
Figure 3-52: Authorizations Additional Information

### 3.5.14 Transportation Service Tab

The **Transportation Service** tab will display claims related to non-emergency transportation (NET) service information.

- The time period will display according to the dates selected in the calendar, either the system default of two years or the dates of service selected by the user.
- The results may be sorted in ascending or descending order by clicking any column header.

To view the transportation claim information, complete the following steps:
1. Click the **Transportation Service** tab. The **Transportation Service** window will display. Information available includes the service code, service description and date of service. *Refer to Figure 3.*

![Figure 3-53: Transportation Service Tab](image)

2. Click the arrow next to the service code to view additional information regarding the transportation service claim. The additional information available to view includes the provider, facility/pay to, and date of service. *Refer to Figure 3.*

![Figure 3-54: Transportation Service Additional Information](image)
## Appendix A. Acronyms and Abbreviations

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPT</td>
<td>Current Procedural Terminology</td>
</tr>
<tr>
<td>DME</td>
<td>Durable Medical Equipment</td>
</tr>
<tr>
<td>EDI</td>
<td>Electronic Data Interchange</td>
</tr>
<tr>
<td>EHR</td>
<td>Electronic Health Record</td>
</tr>
<tr>
<td>EPSDT</td>
<td>Early and Periodic Screening, Diagnostic and Treatment</td>
</tr>
<tr>
<td>ER</td>
<td>Emergency Room</td>
</tr>
<tr>
<td>ET</td>
<td>Eastern Time</td>
</tr>
<tr>
<td>ETG</td>
<td>Episodic Treatment Groups</td>
</tr>
<tr>
<td>FFS</td>
<td>Fee-for-Service</td>
</tr>
<tr>
<td>HCBS</td>
<td>Home and Community Based Services</td>
</tr>
<tr>
<td>HCPCS</td>
<td>Healthcare Common Procedure Coding System</td>
</tr>
<tr>
<td>MCO</td>
<td>Managed Care Organization</td>
</tr>
<tr>
<td>MEHR</td>
<td>Member Electronic Health Record</td>
</tr>
<tr>
<td>NDC</td>
<td>National Drug Code</td>
</tr>
<tr>
<td>NET</td>
<td>Non-Emergency Transportation</td>
</tr>
<tr>
<td>PA</td>
<td>Prior Authorization</td>
</tr>
<tr>
<td>RA</td>
<td>Remittance Advice</td>
</tr>
<tr>
<td>TPA</td>
<td>Trading Partner Account</td>
</tr>
<tr>
<td>WV</td>
<td>West Virginia</td>
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