



# Authorization Request and Follow Up

Including MCG Auto Authorizations

*For Molina Healthcare Michigan Providers*

# In today's session, we'll cover...



## Throughout this presentation...



Tips and tricks will display with a star.



Notes and reminders will display with a lightbulb.

## Looking for more training?

Availity offers free on-demand and live training in the Availity Learning Center (ALC). Log in and click **Help & Training | Get Trained** to search the ALC catalog.



# Roles and permissions for authorization tools

Some roles come default to a user's account, including:

- My Account Dashboard
- Help & Training
- Payer Spaces

Your organization's Availity Admin(s) can assign additional roles to users.

**Reminder:** Options vary by payer, plan, product, member, organization type, additional enrollments, region, and user permissions.



Here are some additional roles that are needed:

To do this...	...you'll need this role.
Authorization Request	Authorization and Referral Request
Authorization Inquiry	Authorization and Referral Inquiry



# Submit an Authorization

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Walk through an authorization submission and understand the differences between inpatient and outpatient.



First, select **Patient Registration** and then select **Authorizations & Referrals**.

The screenshot shows a web application interface with a dark top navigation bar and a light main content area. The top navigation bar includes links for 'essentials', 'Home', 'Notifications' (with a '2' badge), 'My Favorites', 'State', 'Help & Training', 'Kelsey's Account', and 'Logout'. Below this is a secondary navigation bar with dropdown menus for 'Patient Registration', 'Claims & Payments', 'My Providers', 'Reporting', 'Payer Spaces', and 'More'. A 'Keyword Search' box is on the right. The main content area features a list of items: 'Eligibility and Benefits Inquiry' (EB), 'Authorizations & Referrals' (A&R), and 'Patient Care Summary Inquiry' (PCS). The 'A&R' item is highlighted with an orange box. Below this is a feedback section with three smiley face icons. At the bottom, there are four large buttons: 'Eligibility and Benefits Inquiry', 'Authorizations & Referrals', 'Enrollments Center' (EC), and 'Maintain User'. On the right side, there are three panels: 'Messaging' with 'Unread', 'Pending', and 'Recently Resolved' counts; 'My Account Dashboard' with a list of account management links and a profile for Brooke Baklava; and 'News and Announcements' with a 'NEW ALERT' badge.

1

essentials Home Notifications 2 My Favorites State Help & Training Kelsey's Account Logout

Patient Registration Claims & Payments My Providers Reporting Payer Spaces More

Keyword Search

EB Eligibility and Benefits Inquiry

A&R Authorizations & Referrals

PCS Patient Care Summary Inquiry

Verify and submit your provider directory 6/25/2021 10:35 am

Take Action

Tell us what you think.

Eligibility and Benefits Inquiry

Authorizations & Referrals

EC Enrollments Center

Maintain User

Messaging

Unread Pending Recently Resolved

My Account Dashboard

My Account My Administrators Maintain User Add User Manage My Organization 'How To' Guide for Dental Providers Enrollments Center FTP and EDI Connection Services EDI Companion Guide

Brooke Baklava Brooke.Baklava@email.com Practice Manager/Office Manager

News and Announcements **NEW ALERT**

Then, select **Authorizations**.

Home > Authorizations & Referrals

## A&R Authorizations & Referrals

### Multi-Payer Authorizations and Referrals

2

- AR** Auth/Referral Inquiry View Payers
- A** Authorization Request View Payers
- R** Referral Request View Payers
- AR** Auth/Referral Dashboard
- P** Drug Prior Authorization View Payers

### Additional Authorizations and Referrals

Confirm your organization and select a Template if you would like to apply one to this authorization.

## A Authorizations

Give Feedback

Go to Dashboard

New Request +

SELECT A PAYER

3

Organization \*

TEST - Demo Org - Provider

Template(s) optional [Manage Templates](#)

No template selected

Select a template from the list or continue with Payer and Request Type fields.

Payer \* [?](#)

Select a Payer

Request Type \* [?](#)

Select Authorization Type

Then, select the payer and select either **Inpatient Authorization** or **Outpatient Authorization** to load the appropriate form.

TEST - Demo Org - Provider

Template(s) optional Manage Templates

No template selected

Select a template from the list or continue with Payer and Request Type fields.

4

Payer

MOLINA HEALTHCARE MICHIGAN

Request Type

- Select Authorization Type
- Inpatient Authorization**
- Outpatient Authorization

Next

# Confirm that an authorization is needed using the prior authorization **Look-up Tool**

Home > Authorizations & Referrals > Authorizations

Need help? [Watch a demo](#) about Authorizations and Referrals.

## A Authorizations

[Give Feedback](#) [Go to Dashboard](#) [New Request](#)

**i** Molina Healthcare Michigan has a prior authorization **Look-up Tool** to quickly display what services require a prior authorization. Please utilize this tool prior to submitting an Outpatient transaction through the Availity Portal to confirm an authorization is needed.

<b>Transaction Type</b> Outpatient Authorization	<b>Organization</b> Availity Test Org	<b>Payer</b> MOLINA HEALTHCARE MICHIGAN	
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PRIOR AUTHORIZATION LOOKUP TOOL

THIS TOOL IS NOT TO BE UTILIZED TO MAKE BENEFIT COVERAGE DETERMINATIONS.

**FOR ANY PA CHANGES DUE TO REGULATORY GUIDANCE RELATED TO COVID 19 – PLEASE SEE PROVIDER NOTIFICATIONS AND MOST CURRENT INFORMATION ON THE PROVIDER PORTAL.**

We attempt to provide the most current and accurate information on this PA Look-Up Tool. Note, prior authorization requirements change

# Select the Line of Business

This Lookup tool is for Outpatient services. All Elective Inpatient Admissions to Acute Hospitals, Skilled Nursing Facilities (SNF), Rehabilitation Facilities (AIR), or Long Term Acute Care Hospitals (LTACH) require Prior Authorization except as excluded by law. All Medicaid LTSS services require prior authorization regardless of code.

No PA is required for office visits at Participating (PAR) Network Providers. All NON-PAR Providers require authorization regardless of services provided or codes submitted, except for Emergency Services and Evaluation & Management Codes during non-elective observation/inpatient admissions or as required by law.

Molina Pharmacy Services completes Utilization Management for Healthcare Administered Drugs.

Obtaining authorization does not guarantee payment. The plan retains the right to review benefit limitations and exclusions, beneficiary eligibility on the date of the service, correct coding, billing practices and whether the service was provided in the most appropriate and cost-effective setting of care.

## Line of Business \*

- Medicare
- Medicaid
- Marketplace

+ Add another procedure code

# Select the CPT/HCPCS Code

\$2,150 (combined benefit). **Medicaid:** No PA required for eval + 36 visits per calendar year per discipline. **Market Place:** No PA required for eval + 12 visits per calendar year.

**Non-Par Providers/Facilities:** PA is required for all Non-Participating Providers/Facilities except for: Emergency Department Services; Professional fees associated with ER visit and approved Ambulatory Surgery Center (ASC) or inpatient stay; Professional component services or services billed with Modifier 26 in ANY setting; Local Health Department (LHD) Services; Women's Health, Family Planning and Obstetrical Services; Federally Qualified Health Center (FQHC), Rural Health Center (RHC) or Tribal Health Center (THC) Services.

Search input field with a magnifying glass icon.

- A4719 "y set" tubing
- 4559F 1 BODYTEMP >=35.5CW/IN 30MIN
- G9773 1 bod temp >=35.5
- A4206 1 cc sterile syringe & needle
- G9873 1 em core session
- G9247 1 med visit in 24mo
- G9354 1 or no ct sinus w/in 90d dx
- A5057 1 cc sterile syringe with needle

<https://www.michiganhealthcare.com/providers/mi/medicaid/forms/pages/fuf.aspx>

66-290-1309 • Medicaid & Marketplace 888-373-3059

+ Add another procedure code

# Select Next

Professional fees associated with ER visit and approved Ambulatory Surgery Center (ASC) or inpatient stay; Professional component services or services billed with Modifier 26 in ANY setting; Local Health Department (LHD) Services; Women's Health, Family Planning and Obstetrical Services; Federally Qualified Health Center (FQHC), Rural Health Center (RHC) or Tribal Health Center (THC) Services.

**Plan has developed own Matrix, click below:** <http://www.molinahealthcare.com/providers/mi/medicaid/forms/pages/fuf.aspx>

**Healthcare Administered Drug Requests faxed to:** •Medicare 866-290-1309 •Medicaid & Marketplace 888-373-3059

Line of Business \*

Medicare

CPT/HCPCS Code \* ⓘ

A4719 - "y set" tubing

+ Add another procedure code

Review the information to see if an authorization is required. In this example, no authorization is required.

### Authorization/Referral Not Required

#### Line of Business

Medicare

#### PA Status

**NO ACTION REQUIRED**

#### PA Status Description

Prior Authorization Not Required  
\*Exclusions Apply

#### Procedure Code 1

A4719 - "y set" tubing

#### Procedure Code Description

Y SET TUBING FOR PERITONEAL DIALYSIS

#### PA Disclaimer

\*Exclusions:

- Non-Participating Provider Requests
- Non-Covered State Codes
- Request for Elective Inpatient Admissions to Acute Hospitals, Skilled Nursing Facilities (SNF), Rehabilitation Facilities (AIR), or Long-Term Acute Care Hospitals (LTACH)
- Generic, Miscellaneous or Not Otherwise Specified (NOS) Codes

\*The presence of a code on this tool should

If an authorization is required, select Next Steps to continue.

and Obstetrical Services; Federally Qualified Health Center (FQHC), Rural Health Center (RHC) or Tribal Health Center (THC) Services.

**Plan has developed own Matrix, click below:** <http://www.molinahealthcare.com/providers/mi/medicaid/forms/pages/fuf.aspx>

**Healthcare Administered Drug Requests faxed to:** •Medicare 866-290-1309 •Medicaid & Marketplace 888-373-3059

### Authorization/Referral Required

#### Line of Business

Medicare

#### PA Status

**AUTH REQUIRED**

#### PA Status Description

Required

#### Procedure Code 1

J0699 - Inj cefiderocol 10 mg

#### Procedure Code Description

INJECTION, CEFIDEROCOL, 10 MG

Back

Print

**Next Steps**

Scroll down to complete **Step 1 – Start an Authorization.**

Home > Authorizations & Referrals > Authorizations

Need help? Watch a demo about Authorizations and Referrals.

## A Authorizations

Give Feedback

Go to Dashboard

New Request

1 Start an Authorization

2 Add Service Information

3 Rendering Provider/Facility

4 Add Attachments

5 Review and Submit

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<b>Transaction Type</b> Outpatient Authorization	<b>Organization</b> Availity Test Org	<b>Payer</b> MOLINA HEALTHCARE MICHIGAN	
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PATIENT INFORMATION  SHOW OPTIONAL FIELDS

Select a Patient

Use the **Select a Patient** field to choose a patient from your organization's eligibility and benefit inquiry list. Or, manually enter the required information before continuing.

Transaction Type: Outpatient Authorization  
Organization: Availity Test

 The patient search results will show patients whom eligibility and benefits inquiries have been processed through Availity's network for 18 months.

5

PATIENT INFORMATION

SHOW OPTIONAL FIELDS

Select a Patient 

Search by any combination of patient name (first and last), DOB, or Member ID.

Member ID 

Relationship to Subscriber 

Self  

Patient Date of Birth 



REQUESTING PROVIDER

SHOW OPTIONAL FIELDS

Then, enter requesting provider information.

6

REQUESTING PROVIDER

SHOW OPTIONAL FIELDS

NPI optional ⓘ

Tax ID ⓘ

Select Tax ID ▼

Retrieve Provider Info Enter Manually

YOUR CONTACT INFORMATION

First Name optional

Brooke

Last Name optional

Brownie

Phone optional

Extension optional

If searching for a provider, select a Tax ID from the list to retrieve provider info (NPI is optional, but Tax ID is required for provider search).

REQUESTING PROVIDER  SHOW OPTIONAL FIELDS

NPI optional

Tax ID

- 121121212
- 121121212
- 111999888

Last Name optional

Extension optional

Phone optional

 Tax IDs listed here are associated with your organization.

Select the **Retrieve Provider Info** button.

REQUESTING PROVIDER  SHOW OPTIONAL FIELDS

NPI optional ⓘ

Tax ID ⓘ

 x ▾

**Retrieve Provider Info** Enter Manually

YOUR CONTACT INFORMATION

First Name optional Last Name optional

Phone optional Extension optional

If the provider is found, select the provider to apply their information to this section.

REQUESTING PROVIDER  SHOW OPTIONAL FIELDS

Can't find who you are searching for? [Search Again](#) [Back to Results](#)

Provider Selected		
<b>Name</b> PROVIDER, PAUL	<b>NPI</b> 1234567893	<b>Tax Id</b> 121121212
<b>PAPI</b> ABC123456789	<b>Address</b> 123 PROVIDER PLACE, ANYCITY, MI 12345-5555	

YOUR CONTACT INFORMATION

<b>First Name</b> optional <input type="text" value="Brooke"/>	<b>Last Name</b> optional <input type="text" value="Brownie"/>
<b>Phone</b> optional <input type="text"/>	<b>Extension</b> optional <input type="text"/>

If the provider is not found, search again or enter their information manually.

REQUESTING PROVIDER

SHOW OPTIONAL FIELDS

Can't find who you are searching for? [Search Again](#)

NPI optional ⓘ

Tax ID ⓘ

 ✕ ▼

Retrieve Provider Info

Enter Manually

PROVIDER SEARCH RESULTS

We are not able to locate registered provider record based on the information provided. Please submit your Authorization request via fax.

For manual entry, use the **Select a Provider** field to choose a provider from your organization's list. Or, manually enter an NPI / Tax ID (at least one of these is required for manual entry).

REQUESTING PROVIDER  SHOW OPTIONAL FIELDS

Can't find who you are searching for? [Search Again](#)

Select a Provider optional ⓘ

Select Provider ...

NPI ⓘ Tax ID ⓘ

**ⓘ A Provider NPI or Tax ID is required.**

YOUR CONTACT INFORMATION

First Name optional Last Name optional

Brooke Brownie

Select a provider from the list.

REQUESTING PROVIDER

Can't find who you are searching for?



Add providers to your account by going to Manage My Organization | Add Provider(s).

SHOW OPTIONAL FIELDS

Select a Provider optional

Select Provider ...

Allergy, Betty • 1112223334 • 10752 Deerwood Park Blvd, Jacksonville, FL 32256

Dentist, Mary • 3156870131 • 897 Smile Place, Jacksonville, FL 32256

Family, Robert • 2234567891 • 10752 Deerwood Park Blvd, Jacksonville, FL 32256

Joe, Atypical • 123 Healthy Ave, Jacksonville, FL 12345

Maternity, James • 1234567893 • 10752 Deerwood Park Blvd, Jacksonville, FL 32256

YOUR CONTACT INFORMATION

First Name optional

Brooke

Last Name optional

Brownie

Scroll down.

REQUESTING PROVIDER  SHOW OPTIONAL FIELDS

Can't find who you are searching for? [Search Again](#)

Select a Provider optional ⓘ

Provider, Betty

NPI ⓘ 1112223334 Tax ID ⓘ 123123123

**ⓘ A Provider NPI or Tax ID is required.**

YOUR CONTACT INFORMATION

First Name optional Brooke Last Name optional Brownie

Confirm contact information.  
Then, select **Next**.

A Provider NPI or Tax ID is required.

7

YOUR CONTACT INFORMATION

First Name optional

Last Name optional

Phone optional

Extension optional

Email optional

 This is the person in your office who should be contacted with any questions about this authorization request.

8

Back Next

Scroll down to complete **Step 2 – Add Service Information.**

Home > Authorizations & Referrals > Authorizations

Need help? Watch a demo about Authorizations and Referrals.

## A Authorizations

Give Feedback

Go to Dashboard

New Request

- 1 Start an Authorization
- 2 Add Service Information**
- 3 Rendering Provider/Facility
- 4 Add Attachments
- 5 Review and Submit

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<b>PATIENT, POLLY</b> Patient			
<b>Member ID</b> ABC123456789	<b>Date of Birth</b> 1980-01-01	<b>Gender</b> NA	
<b>Transaction Type</b> Outpatient Authorization	<b>Organization</b> Availity Test Org	<b>Payer</b> MOLINA HEALTHCARE MICHIGAN	

Select a service type from the list.

9

SERVICE INFORMATION  SHOW OPTIONAL FIELDS

Service Type ⓘ  
Physician Visit - Office: Well x ▾

From Date ⓘ  
\_ / \_ / \_ 

Level Of Service  
▾

DIAGNOSIS CODE(S)  SHOW OPTIONAL FIELDS

Diagnosis Code ⓘ  
▾

[Add another diagnosis code](#)

Choose or enter a service from date.

SERVICE INFORMATION

SHOW OPTIONAL FIELDS

Service Type ⓘ

Physician Visit - Office: Well

From Date ⓘ

08/19/2021

Level Of Service

DIAGNOSIS CODE(S)

SHOW OPTIONAL FIELDS

Diagnosis Code ⓘ

10

Form fields for Service Type, From Date, Level Of Service, and Diagnosis Code, highlighted with an orange border.

[Add another diagnosis code](#)

For outpatient requests, choose a level of service.

For inpatient requests, choose or enter an admission type and date.

The screenshot displays the Availity web application interface. The top navigation bar includes the Availity logo, 'essentials', 'Home', 'Notifications 2', 'My Favorites', 'State', and 'Help & T'. Below this is a secondary navigation bar with 'Patient Registration', 'Claims & Payments', 'My Providers', 'Reporting', 'Payer Spaces', and 'More'. The main content area is divided into two panels. The left panel, titled 'SERVICE INFORMATION', shows a 'Service Type' dropdown set to 'Physician Visit - Office: Well', a 'From Date' field with '08/19/2021', and a 'Level Of Service' dropdown set to 'Elective'. The right panel, also titled 'SERVICE INFORMATION', shows a 'Service Type' dropdown, an 'Admission Date' field, and an 'Admission Type' dropdown menu that is open, listing 'Elective', 'Emergency', and 'Urgent'. A blue callout box with a lightbulb icon is positioned over the right panel, containing text about inpatient requests. A red circle with the number '11' is placed next to the 'Level Of Service' dropdown in the left panel.

Availity | essentials | Home | Notifications 2 | My Favorites | State | Help & T

Patient Registration | Claims & Payments | My Providers | Reporting | Payer Spaces | More

**11**

**SERVICE INFORMATION**

Service Type ⓘ

Physician Visit - Office: Well x ▾

From Date ⓘ

08/19/2021 📅

Level Of Service

Elective x ▾

**SERVICE INFORMATION ⓘ**

Service Type ⓘ

Admission Date

\_\_\_/\_\_\_/\_\_\_ 📅

Admission Type

- Elective
- Emergency
- Urgent

For inpatient requests, some options will differ. For example, enter **Admission Date** and **Admission Type**.

DIAGNOSIS CODE(S)

Diagnosis Code ⓘ

Add another diagnosis code

Then, enter diagnosis codes. Molina accepts up to 5 diagnosis codes per authorization submission.

Availity | essentials Home Notifications 2 My Favorites State Help & Training Kelsey's Account Logout

Patient Registration Claims & Payments My Providers Reporting Payer Spaces More Keyword Search

Elective

**12**

DIAGNOSIS CODE(S)  SHOW OPTIONAL FIELDS

Diagnosis Code ⓘ

M160 - Bilateral primary osteoarthritis of hip

+ Add another diagnosis code

PROCEDURE CODE(S)  SHOW OPTIONAL FIELDS

CPT/HCPCS Code ⓘ Type

CPT/HCPCS

+ Add another procedure code

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Enter procedure codes. Molina accepts up to 5 procedure codes per authorization submission.  
Change the code type, if needed.

13

DIAGNOSIS CODE(S)  SHOW OPTIONAL FIELDS

Diagnosis Code ⓘ

M160 - Bilateral primary osteoarthritis of hip

+ Add another diagnosis code

---

PROCEDURE CODE(S)  SHOW OPTIONAL FIELDS

CPT/HCPCS Code ⓘ

29305 - APPLICATION OF HIP CAST

+ Add another procedure code

Type

NDC

★ Need to enter an NDC (National Drug Code)? Enter the applicable code and then select NDC as the type.

Show optional fields to enter additional information, if needed. Then, select **Next**.

PROCEDURE CODE(S)

CPT/HCPCS Code 

29305 - APPLICATION OF HIP CAST

From Date optional 

\_\_\_/\_\_\_/\_\_\_

Procedure Quantity optional 

1

[+ Add another procedure code](#)

Type

CPT/HCPCS

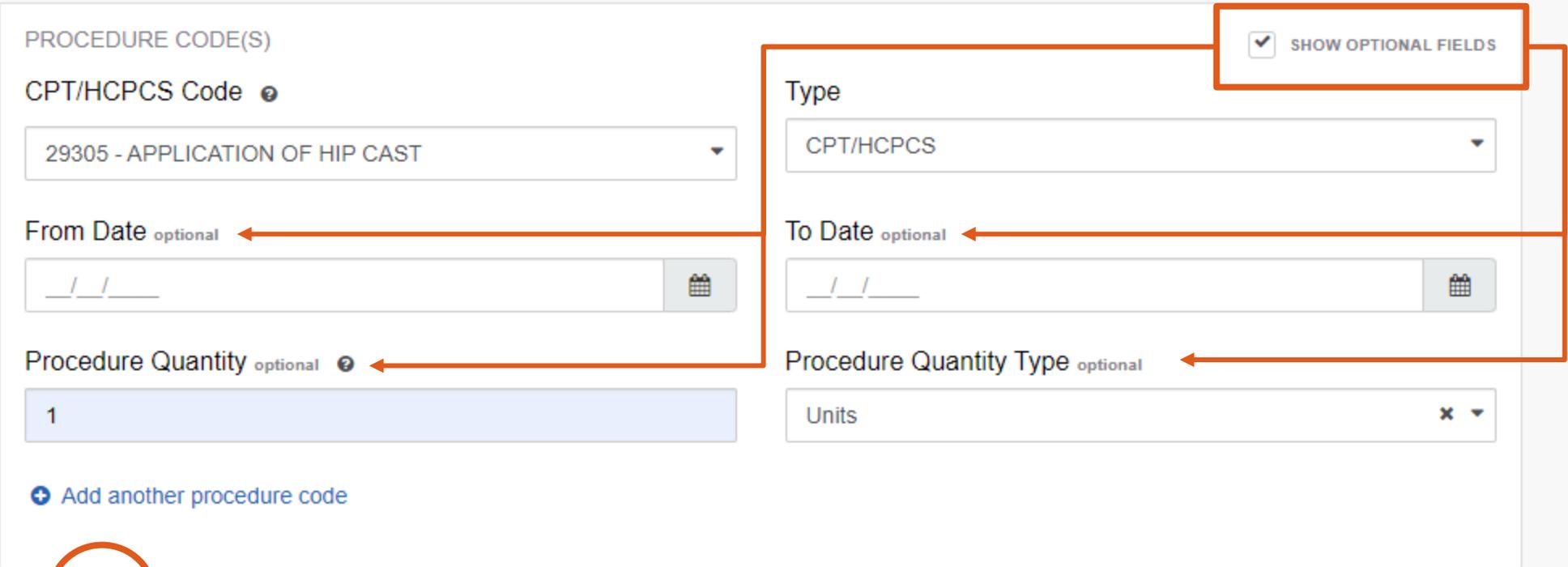
To Date optional 

\_\_\_/\_\_\_/\_\_\_

Procedure Quantity Type optional

Units 

SHOW OPTIONAL FIELDS



14

Back Next

Enter service provider information.

**PATIENT, POLLY** Patient

<b>Member ID</b> ABC123456789	<b>Date of Birth</b> 1980-01-01	<b>Gender</b> NA
<b>Transaction Type</b> Outpatient Authorization	<b>Organization</b> Availity Test Org	<b>Payer</b> MOLINA HEALTHCARE MICHIGAN



15

SERVICE PROVIDER

NPI optional ⓘ

Tax ID ⓘ

Select Tax ID ▾

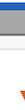
[Retrieve Provider Info](#) [Enter Manually](#)

SHOW OPTIONAL FIELDS

If the provider is found during search, select the provider to apply their information to this section. Or, use the **Enter Manually** option to enter the service provider's information manually.



**Reminder:** With manual entry, you can enter an NPI or Tax ID (at least one is required) or you can select a provider/facility from your organization's provider list by using the select a provider field.



SERVICE PROVIDER

SHOW OPTIONAL FIELDS

Can't find who you are searching for? [Search Again](#)

Select a Provider optional ⓘ

Select Provider ...

NPI ⓘ

Tax ID ⓘ

ⓘ A Provider NPI or Tax ID is required.

Depending on the criteria entered, an authorization might require additional clinical questions to be answered with MCG Care.

The screenshot shows the Availity web application interface. At the top, there is a navigation bar with logos for Availity, essentials, Home, Notifications (4), My Favorites, Michigan, Help & Training, Kelsey's Account, and Logout. Below this is a secondary navigation bar with links for Patient Registration, Claims & Payments, My Providers, Reporting, Payer Spaces, and More, along with a Keyword Search box. The main content area shows a breadcrumb trail: Home > Authorizations & Referrals > Authorizations. A modal window titled "Next Steps: MCG Care Guidelines" is centered on the screen. The modal contains the following text: "This request requires you to answer additional clinical questions with the insurance company's utilization management partner, **MCG Care**." "Click 'Take me to MCG Care' to create a secure connection in a new browser tab." "Note: To avoid delays in authorization decisions, please attach clinical documentation that supports the clinical indications selected in the next step." To the right of the text is the MCG logo and the text "Secure connection to:". At the bottom of the modal is a blue button with a lock icon and the text "Take me to MCG Care". Below the modal, a patient information table is partially visible. In the bottom right corner, there is a blue callout box with a lightbulb icon and the text: "Reminder: MCG Auto Authorization will only display for outpatient requests that meet the criteria."

Availity | essentials | Home | Notifications 4 | My Favorites | Michigan | Help & Training | Kelsey's Account | Logout

Patient Registration | Claims & Payments | My Providers | Reporting | Payer Spaces | More | Keyword Search

Home > Authorizations & Referrals > Authorizations

Need help? Watch a demo about Authorizations and Referrals.

### Next Steps: MCG Care Guidelines

This request requires you to answer additional clinical questions with the insurance company's utilization management partner, **MCG Care**.

Click "Take me to MCG Care" to create a secure connection in a new browser tab.

Note: To avoid delays in authorization decisions, please attach clinical documentation that supports the clinical indications selected in the next step.

Secure connection to:



[Take me to MCG Care](#)

Member ID	Date of Birth	Gender
Active Coverage	Group Number	Female
Transaction Type	Organization	Plan / Coverage Date
Outpatient Authorization	Availity Test Org	Payer
		MOLINA HEALTHCARE MICHIGAN

**Reminder:** MCG Auto Authorization will only display for outpatient requests that meet the criteria.

Complete the required information on the MCG site. When complete, select **Submit Request** to be routed back to Availity Essentials to complete the authorization.

## Authorization Request



Request Form



Document Clinical



Submit Request



**Patient** :ABC123456789 **Name** :Patient, Sample **DOB** :07/01/1996 **Gender** : Female

▼ show more

**Authorization** : AVL-123456789 **Type** : Procedure Pre-authorization **Status** : NoDecisionYet

▼ show more

**Diagnosis Codes** : I10(ICD-10 Diagnosis) *primary* **Procedure Codes** : 70336(CPT/HCPCS) *primary*

**Geographic Regions**

All

Clear

**Procedure Code:** 70336 (CPT/HCPCS)

**Requested Units:** 1

**Description** : MAGNETIC IMAGE JAW JOINT

Document Clinical

Submit Request

Cancel Request

Back

After completing the MCG Health Clinical Questionnaire, select **Next** to continue.

- 1 Start an Authorization
- 2 Add Service Information
- 3 Rendering Provider/Facility
- 4 Clinical Documentation**
- 5 Add Attachments
- 6 Review and Submit

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<b>Sample, Patient</b> <sup>Patient</sup>			
<b>Member ID</b> 123456789	<b>Date of Birth</b> 1996-07-01	<b>Gender</b> Female	
<b>Eligibility Status</b> Active Coverage	<b>Group Number</b> NA	<b>Plan / Coverage Date</b> 2009-06-02 - 2022-12-31	
<b>Transaction Type</b> Outpatient Authorization	<b>Organization</b> Availity Test Org	<b>Payer</b> MOLINA HEALTHCARE MICHIGAN	

**MCG Health Clinical Questionnaire completed!**

Thanks for completing the additional clinical documentation questionnaire.

Please click "Next" to continue the authorization process.

Scroll down to complete **Step 5 – Add Attachments\***.

*\*This step is optional but recommended.*

Home > Authorizations & Referrals > Authorizations

Need help? Watch a demo about Authorizations and Referrals.

## A Authorizations

Give Feedback Go to Dashboard New Request

- 1 Start an Authorization
- 2 Add Service Information
- 3 Rendering Provider/Facility
- 4 Clinical Documentation
- 5 **Add Attachments**
- 6 Review and Submit

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<b>PATIENT, POLLY</b> Patient			
<b>Member ID</b> ABC123456789	<b>Date of Birth</b> 1980-01-01	<b>Gender</b> NA	
<b>Transaction Type</b> Outpatient Authorization	<b>Organization</b> Availity Test Org	<b>Payer</b> MOLINA HEALTHCARE MICHIGAN	



Once the files are uploaded, select the appropriate file type. Add additional attachments, if needed. Then, select **Next**.

Availity | essentials Home Notifications 2 My Favorites State Help & Training Kelsey's Account Logout

Patient Registration Claims & Payments My Providers Reporting Payer Spaces More Keyword Search

Transaction Type	Organization	Payer
Outpatient Authorization	Availity Test Org	MOLINA HEALTHCARE MICHIGAN

ADD ATTACHMENT(S)

Sample File.pdf   Medical Record Attachment x

+ Add Another File Attachment

17

- Back and Next buttons will be disabled when upload(s) are in progress.
- The file size can not exceed the maximum allowed file size of 128mb or combined total size of 100mb.
- Files must be in jpg, tiff, gif, png, or pdf format, no more than 10 files may be added.
- File names can only contain letters, numbers, spaces, and special characters allowed: - \_

18

Back Next

Scroll down to complete **Step 6 – Review and Submit.**

Home > Authorizations & Referrals > Authorizations

Need help? Watch a demo about Authorizations and Referrals.

## A Authorizations

Give Feedback Go to Dashboard New Request

- 1 Start an Authorization
- 2 Add Service Information
- 3 Rendering Provider/Facility
- 4 Clinical Documentation
- 5 Add Attachments
- 6 **Review and Submit**

**i** Molina Healthcare Michigan has a prior authorization **Look-up Tool** to quickly display what services require a prior authorization. Please utilize this tool prior to submitting an Outpatient transaction through the Availity Portal to confirm an authorization is needed.

<b>PATIENT, POLLY</b> Patient			
<b>Member ID</b> ABC123456789	<b>Date of Birth</b> 1980-01-01	<b>Gender</b> NA	
<b>Transaction Type</b> Outpatient Authorization	<b>Organization</b> Availity Test Org	<b>Payer</b> MOLINA HEALTHCARE MICHIGAN	

Confirm all information entered is accurate. Edit or correct anything, if needed. Scroll down.

19

**Member Information** [Back to Step 1](#)

<b>Patient Name</b> PATIENT, POLLY	<b>Patient Date of Birth</b> 1980-01-01	
<b>Member ID</b> ABC123456789	<b>Relationship to Subscriber</b> Self	<b>Subscriber Name</b> NA

**Requesting Provider** [Back to Step 1](#)

<b>Name</b> ALLERGY, BETTY	<b>NPI</b> 111222333
<b>Address</b> 123 Provider Rd. Ste 456, Anycity MI 12345-5555	

★ Use **Back to Step** links to jump back to any step and make edits/changes. You won't lose your work by going back.

**Service Information** [Back to Step 2](#)

<b>Service Type</b> BZ - Physician Visit - Office: Well	<b>Service From - To Date</b> 2021-08-19
<b>Level of Service</b> Elective	

Select Submit.

**Procedure Code 1 (CPT/HCPCS)**  
29305 - APPLICATION OF HIP CAST

**Rendering Provider/Facility** [Back to Step 3](#)

Name	NPI	Tax Id
Family, Robert	1234567893	987456321
<b>Address</b> 555 Main Payer St. Anycity, MI 12345-5555		

**Attachment(s)** [Back to Step 4](#)

Attachment 1	Document Id
<b>File Name</b> Sample File.pdf	2B5F1938C2274E04A0085B53BB3B9287

20

Back Submit

The authorization is submitted!

Home > Authorizations & Referrals > Authorization Response

## A Authorization Response

Give Feedback

Go to Dashboard

New Request

Transaction ID: 12776641

Customer ID: 1194

Transaction Date: 2019-12-03

**PATIENT, POLLY** Patient

**Member ID**  
ABC123456789

**Date of Birth**  
1980-01-01

**Gender**  
NA



**Transaction Type**  
Outpatient Authorization

**Organization**  
Availity Test Org

**Payer**  
MOLINA HEALTHCARE  
MICHIGAN

Print

Save New Template

### Certificate Information

**Reference Number**  
10539

**Status**  
PENDING

### Message

This request is pending for medical review



If the authorization meets the criteria for MCG Auto Authorization, and it is auto-approved, the status will say approved.

# Save New Template

## A Authorization Response

Transaction ID: 12776641

**PATIENT, POLLY** Patient  
**Member ID**  
ABC123456789  
**Transaction Type**  
Outpatient Authorization

Print | Save New Template

### Certificate Information

**Reference Number**  
10539  
**Status**  
PENDING

**Message**  
This request is pending for medical review

Feedback | Go to Dashboard | New Request

Authorization Date: 2019-12-03



### Save Template

Template Name: \*

Save the following data from this request to my template:

- Member
- Requesting Provider
- Service Information
- Diagnosis and Procedure Codes
- Rendering Provider(s)

Save Template | Cancel

# Follow Up on Authorizations

---

Use two tools – **Auth/Referral Dashboard** and **Auth/Referral Inquiry** – to check the status and follow up on authorization requests.





## AUTH/REFERRAL INQUIRY

Use to find an individual authorization submitted through alternate means (phone, fax, by another org, etc.).

*Tip: Pin these results to your dashboard so you don't have to keep looking them up.*

## AUTH/REFERRAL DASHBOARD

Use to review all your authorization requests\* in one place.

*\*Auth/Referral Dashboard only displays requests that were:*

- *submitted electronically through Availity Essentials by members in your org, or*
- *pinned to the dashboard from an inquiry result.*

1. First select **Patient Registration** and then select **Authorizations & Referrals**.

The screenshot shows a web application interface with a top navigation bar and a sidebar. The top navigation bar includes links for 'essentials', 'Home', 'Notifications', 'My Favorites', 'State', 'Help & Training', 'Kelsey's Account', and 'Logout'. The sidebar contains a 'Keyword Search' box and a list of menu items: 'Patient Registration', 'Claims & Payments', 'My Providers', 'Reporting', 'Payer Spaces', and 'More'. A red box highlights the 'Patient Registration' menu and its sub-item 'Authorizations & Referrals'. A red circle with the number '1' is around the 'Patient Registration' menu. A red box with the number '2' is around the 'Notifications' icon in the top navigation bar. The main content area shows a notification about 'verify and submit your provider directory' with a 'Take Action' button. Below this is a feedback section with three smiley face icons. The sidebar also includes sections for 'Messaging' (Unread, Pending, Recently Resolved) and 'My Account Dashboard' (My Account, My Administrators, Maintain User, Add User, Manage My Organization, 'How To' Guide for Dental Providers, Enrollments Center, FTP and EDI Connection Services, EDI Companion Guide). The user's name 'Brooke Baklava' and email 'Brooke.Baklava@email.com' are listed as 'Practice Manager/Office Manager'. At the bottom, there is a 'News and Announcements' section with a 'NEW ALERT' badge.

2. Then, select **Auth/Referral Inquiry**.

Home > Authorizations & Referrals

## A&R Authorizations & Referrals

### Multi-Payer Authorizations and Referrals

2

**AR** Auth/Referral Inquiry   
 View Payers

**A** Authorization Request   
 View Payers

**R** Referral Request   
 View Payers

**AR** Auth/Referral Dashboard 

**P** Drug Prior Authorization   
 View Payers

### Additional Authorizations and Referrals

3. Confirm your organization and select **MOLINA HEALTHCARE MICHIGAN** as the payer. Select either **Inpatient Authorization** or **Outpatient Authorization** as a request type.

## Authorization/Referral Inquiry

Give Feedback

Go to Dashboard

New Request +

3

SELECT A PAYER

Organization

Availity Test Org

Payer ⓘ

MOLINA HEALTHCARE MICHIGAN

Request Type ⓘ

Select Authorization Type

Inpatient Authorization

Outpatient Authorization

Scroll down.

SELECT A PAYER

Organization

Availity Test Org

Payer ⓘ

MOLINA HEALTHCARE MICHIGAN

Request Type ⓘ

Outpatient Authorization

PATIENT INFORMATION  SHOW OPTIONAL FIELDS

Select a Patient ⓘ

Q Select... |

Search by any combination of patient name (first and last), DOB, or Member ID.

4. Enter patient information. Use the **Select a Patient** field to choose a patient from your organization's eligibility and benefit inquiry list. Or, manually enter the required information.

4

PATIENT INFORMATION  SHOW OPTIONAL FIELDS

Select a Patient ?

Q Select... | v

Search by any combination of patient name (first and last), DOB, or Member ID.

Member ID ?

ABC123456789

Patient Date of Birth

01/01/1980 [calendar icon]

REQUESTING PROVIDER  SHOW OPTIONAL FIELDS

NPI optional ?

[empty text box]

Tax ID ?

## 5. Enter requesting provider information.

*\*If you're inquiring on an authorization that was submitted by another organization, use the **Enter Manually** option.*

The screenshot shows the Availity web application interface. The top navigation bar includes the Availity logo, 'essentials', 'Home', 'Notifications 2', 'My Favorites', 'State', 'Help & Training', 'Kelsey's Account', and 'Logout'. Below the navigation bar is a dark grey menu with 'Patient Registration', 'Claims & Payments', 'My Providers', 'Reporting', 'Payer Spaces', and 'More'. A 'Keyword Search' box is on the right. The main content area shows a form for 'REQUESTING PROVIDER'. A red circle with the number '5' highlights this section. The form includes a date field for 'Patient Date of Birth' with the value '01/01/1980'. Below this are the 'REQUESTING PROVIDER' fields: 'NPI optional' (with a help icon) and 'Tax ID' (with a help icon). The 'Tax ID' field is a dropdown menu with the text 'Select Tax ID'. At the bottom of the form are two buttons: 'Retrieve Provider Info' (blue) and 'Enter Manually' (grey). To the right of the form is a checkbox labeled 'SHOW OPTIONAL FIELDS'. Below the form is a section for 'SERVICE INFORMATION' with a help icon and another 'SHOW OPTIONAL FIELDS' checkbox.

6. When all information is entered, select **Submit**.

REQUESTING PROVIDER  SHOW OPTIONAL FIELDS

Can't find who you are searching for? [Search Again](#) [Back to Results](#)

Provider Selected		
<b>Name</b> PROVIDER, PAUL	<b>NPI</b> 1234567893	<b>Tax Id</b> 121121212
<b>PAPI</b> ABC123456789	<b>Address</b> 123 PROVIDER PLACE, ANYCITY, MI 12345-5555	

SERVICE INFORMATION ⓘ  SHOW OPTIONAL FIELDS

6

Clear Submit

Review the authorization inquiry response.  
Select **Pin to Dashboard** to add this result to your Auth/Referral Dashboard.

## Authorization/Referral Inquiry Results

Give Feedback Go to Dashboard New Request

Transaction ID: 25499324391 Customer ID: 394657 Transaction Date: 2021-03-03

<b>AVAILITY, SOFIA</b> Patient			
<b>Member ID</b> ABC123456789	<b>Date of Birth</b> 1990-02-02	<b>Gender</b> NA	
<b>Transaction Type</b> Outpatient Authorization	<b>Organization</b> TEST - Demo Org - Provider	<b>Payer</b> MOLINA HEALTHCARE MICHIGAN	

- Back to Results
- Print
- Edit Inquiry
- Pin to Dashboard**

### Certificate Information

<b>Certification Number</b> 123456789	<b>Status</b> PENDED
<b>Review Reason 1</b> Requires Medical Review	

1. First select **Patient Registration** and then select **Authorizations & Referrals**.

The screenshot displays a web application interface with a dark top navigation bar. The 'Patient Registration' menu is expanded, showing three sub-items: 'Eligibility and Benefits Inquiry', 'Authorizations & Referrals', and 'Patient Care Summary Inquiry'. The 'Authorizations & Referrals' item is highlighted with a red box. A red circle with the number '1' is positioned in the top left corner. The sidebar on the right contains sections for 'Messaging', 'My Account Dashboard', and 'News and Announcements'. The 'My Account Dashboard' section includes a list of links and a user profile for Brooke Baklava.

1

essentials Home Notifications 2 My Favorites State Help & Training Kelsey's Account Logout

Patient Registration Claims & Payments My Providers Reporting Payer Spaces More

Keyword Search

EB Eligibility and Benefits Inquiry

A&R Authorizations & Referrals

PCS Patient Care Summary Inquiry

Verify and submit your provider directory 6/25/2021 10:35 am

Take Action

Tell us what you think.

Eligibility and Benefits Inquiry

Authorizations & Referrals

EC Enrollments Center

Maintain User

Messaging

Unread Pending Recently Resolved

My Account Dashboard

My Account My Administrators Maintain User Add User Manage My Organization 'How To' Guide for Dental Providers Enrollments Center FTP and EDI Connection Services EDI Companion Guide

Brooke Baklava Brooke.Baklava@email.com Practice Manager/Office Manager

News and Announcements **NEW ALERT**

2. Then, select **Auth/Referral Dashboard**.

Home > Authorizations & Referrals

# A&R Authorizations & Referrals

## Multi-Payer Authorizations and Referrals

2

AR Auth/Referral Inquiry View Payers

A Authorization Request View Payers

R Referral Request View Payers

AR Auth/Referral Dashboard

P Drug Prior Authorization View Payers

## Additional Authorizations and Referrals

Search and filter to find the request you are looking for.

Search Search Filter List Last Updated

Home > Authorizations & Referrals > Auth/Referral Dashboard

Need help? Watch a demo about the Auth/Referral Dashboard.

# AR Authorization/Referral Dashboard

Give Feedback New Request

All Items Followed Items Drafts Trash 25 Results < Prev 1 2 3 ... 200 Next >

Status / Last Updated	Certificate Number	Patient	Payer	Type	Submitted	Actions
<b>Pending Review</b> 8 minutes ago	 123456789	<b>PATIENTONE, SAMPLE</b> ABC123456789 DOB: 01/01/1940	<b>HEALTH PLAN</b> 	<b>Authorization</b> Inpatient	04/10/2023	 
<b>Pending Review</b> 9 minutes ago	 123456789	<b>PATIENTTWO, SAMPLE</b> XYZ987654321 DOB: 01/01/1940	<b>HEALTH PLAN</b> 	<b>Authorization</b> Outpatient	04/10/2023	 

# Create and save custom filters

## AR Authorization/Referr

All Items ★ Followed Items 📄 Drafts

Status / Last Updated	Certificate Number	PAT
<span>Pending Review</span> 8 minutes ago	<span>📄</span> 123456789	PAT
<span>Pending Review</span> 10 minutes ago	<span>📄</span> 123456789	PAT

### Filter

Status  
Select... | v

Transaction Type  
Referral x Outpatient x Inpatient x | v

Organization  
| v

Payer  
| v

Preset Date Range  Custom Date Range

Date Range  
Select... | v

Submitted	Actions
04/10/2023	<span>☰</span> <span>★</span>
04/10/2023	<span>☰</span> <span>★</span>

View Auto Auth Transactions

# Create and save custom filters

Home > Authorizations & Referrals > Auth/Referral Dashboard

## AR Authorization/Referral

All Items Followed Items Drafts

Status / Last Updated Certificate Number

Pending Review 8 minutes ago 123456789 PAT

Pending Review 10 minutes ago 123456789 PAT

Pending Review 14 minutes ago 123456789 PAT

Organization

Payer

Preset Date Range  Custom Date Range

Date Range

View Auto Auth Transactions

Search

Save Apply Saved Reset Filter Cancel

help? Watch a demo about the Auth/Referral Dashboard.

Give Feedback New Request

next >

Submitted Actions

04/10/2023

04/10/2023

04/10/2023

Sort by...

Search Search Filter List

Last Updated

- ✓ Last Updated
- Admission Date
- Discharge Date
- Facility
- Patient Class
- Patient Name
- Ascending
- ✓ Descending

Home > Authorizations & Referrals > Auth/Referral Dashboard

# AR Authorization/Referral Dashboard

Give Feedback New Request

All Items Followed Items Drafts Trash 25 Results < Prev 1 Next >

Status / Last Updated	Certificate Number	Patient	Payer		Submitted	Actions
<b>Pending Review</b> 9 minutes ago	123456789	<b>PATIENTONE, SAMPLE</b> ABC123456789 DOB: 01/01/1940	<b>HEALTH PLAN</b> Example Health Plan	<b>Authorization</b> Inpatient	04/10/2023	☰ ☆
<b>Pending Review</b> 10 minutes ago	123456789	<b>PATIENTTWO, SAMPLE</b> XYZ987654321 DOB: 01/01/1940	<b>HEALTH PLAN</b> Example Health Plan	<b>Authorization</b> Outpatient	04/10/2023	☰ ☆

Switch between different tabs to view requests.

Search Search Filter List Last Updated

Home > Authorizations & Referrals > Auth/Referral Dashboard

Need help? Watch a demo about the Auth/Referral Dashboard.

# AR Authorization/Referral Dashboard

Give Feedback New Request

All Items Followed Items Drafts Trash 25 Results < Prev 1 2 3 ... 200 Next >

Status / Last Updated	Certificate Number	Patient	Payer	Type	Submitted	Actions
<span>Pending Review</span> 8 minutes ago	123456789	<b>PATIENTONE, SAMPLE</b> ABC123456789 DOB: 01/01/1940	<b>HEALTH PLAN</b> 	<b>Authorization</b> Inpatient	04/10/2023	
<span>Pending Review</span> 9 minutes ago	123456789	<b>PATIENTTWO, SAMPLE</b> XYZ987654321 DOB: 01/01/1940	<b>HEALTH PLAN</b> 	<b>Authorization</b> Outpatient	04/10/2023	

Use the action menu to view details, follow a request, move a request to trash, or click to copy.

The screenshot shows the Availity Authorization/Referral Dashboard. At the top, there is a navigation bar with the Availity logo, 'essentials', 'Home', 'Notifications 15', 'My Favorites', 'State', 'Help & Training', 'Kelsey's Account', and 'Logout'. Below this is a secondary navigation bar with 'Patient Registration', 'Claims & Payments', 'My Providers', 'Reporting', 'Payer Spaces', and 'More'. A search bar and filters for 'Filter List' and 'Last Updated' are also present.

The main content area is titled 'Authorization/Referral Dashboard' and includes a 'New Request' button. Below the title, there are tabs for 'All Items', 'Followed Items', 'Drafts', and 'Trash', with '25 Results' displayed. A table lists authorization items with columns for 'Status / Last Updated', 'Certificate Number', 'Patient', 'Payer', 'Type', 'Submitted', and 'Actions'.

Two callouts provide additional information:

- A callout with a lightbulb icon states: "Molina does not automatically push status notifications. Click a card in the list to update the status and review the details."
- A callout with a lightbulb icon states: "Save completed authorizations as templates for future use and reference using the Click to Copy feature."

The 'Actions' column for the first row shows a menu with options: 'View Details', 'Unfollow', 'Move to Trash', and 'Click To Copy'.

Status / Last Updated	Certificate Number	Patient	Payer	Type	Submitted	Actions
Approved 5 months ago	123456789	P			04/10/2023	View Details Unfollow Move to Trash Click To Copy
Approved 5 months ago	123456789	PATIENTTWO,	HEALTH PLAN	Authorization	04/10/2023	

This is an example of an item open in detail view.

Availity | essentials | Home | Notifications 15 | My Favorites | State | Help & Training | Kelsey's Account | Logout

Patient Registration | Claims & Payments | My Providers | Reporting | Payer Spaces | More | Keyword Search

Search | Search | Filter List | Last Updated

All Items | Followed Items | Drafts | Trash | 25 Results | < Prev 1 2 3 ... 200 Next >

**PATIENTONE, SAMPLE**  
DOB: 01/01/1940  
★  
**HEALTH PLAN**  
ABC123456789 **Pending Review**  
**Authorization**  
Inpatient **Last updated**  
11 minutes ago  
**Submitted**  
04/10/2023  
**Certificate Number**  
123456789  

 Print  Follow  Move to Trash  Return to List

Transaction ID: 123456789 Customer ID: 0000 Transaction Date: 2023-04-10

**PATIENTONE, SAMPLE** Patient

<b>Member ID</b> 123456789	<b>Date of Birth</b> 1945-11-11	<b>Gender</b> NA
<b>Authorization Type</b> Authorization	<b>Organization</b> Availity Test Org	<b>Payer</b> HEALTH PLAN



**Update** **Add Attachments** **Void**

**Certificate Information**

<b>Certification Number</b> 123456789	<b>Status</b> <b>PENDED</b>
--	--------------------------------

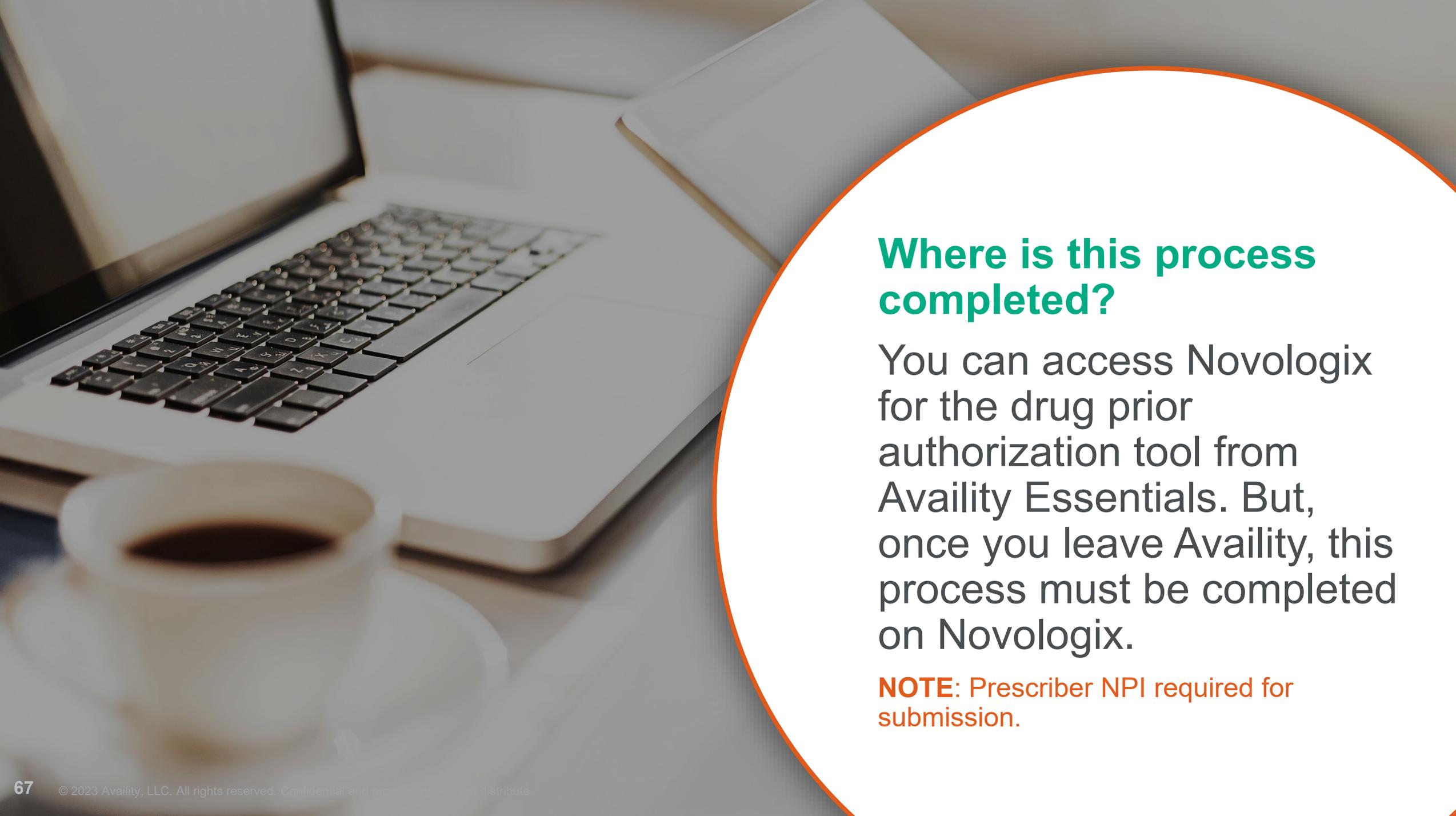
**PATIENTTWO, SAMPLE**  
DOB: 01/01/1940

# Access Drug Prior Authorization

---

Learn how to access the tool on Availity and where it links for you to complete.





## Where is this process completed?

You can access Novologix for the drug prior authorization tool from Availity Essentials. But, once you leave Availity, this process must be completed on Novologix.

**NOTE:** Prescriber NPI required for submission.

1. First select **Patient Registration** and then select **Authorizations & Referrals**.

The screenshot shows a web application interface with a dark top navigation bar. The 'Patient Registration' menu is expanded, and the 'Authorizations & Referrals' option is highlighted with a red box. A red circle with the number '1' is positioned in the top left corner. The sidebar on the right contains sections for 'Messaging', 'My Account Dashboard', and 'News and Announcements'. The 'My Account Dashboard' section includes a list of links and a user profile for Brooke Baklava.

**Navigation Bar:** Patient Registration (1), Claims & Payments, My Providers, Reporting, Payer Spaces, More, State, Help & Training, Kelsey's Account, Logout

**Keyword Search:** Keyword Search

**Eligibility and Benefits Inquiry:** EB Eligibility and Benefits Inquiry

**Authorizations & Referrals:** A&R Authorizations & Referrals

**Patient Care Summary Inquiry:** PCS Patient Care Summary Inquiry

**Messaging:** Unread, Pending, Recently Resolved

**My Account Dashboard:** My Account, My Administrators, Maintain User, Add User, Manage My Organization, 'How To' Guide for Dental Providers, Enrollments Center, FTP and EDI Connection Services, EDI Companion Guide

**User Profile:** Brooke Baklava, Brooke.Baklava@email.com, Practice Manager/Office Manager

**News and Announcements:** NEW ALERT

2. Then, select **Drug Prior Authorization**.

Home > Authorizations & Referrals

## A&R Authorizations & Referrals

### Multi-Payer Authorizations and Referrals

 Auth/Referral Inquiry View Payers	 Authorization Request View Payers	 Referral Request View Payers
 Auth/Referral Dashboard	 Drug Prior Authorization View Payers	

2

### Additional Authorizations and Referrals

3. Confirm your organization and select **MOLINA HEALTHCARE MICHIGAN** as the payer.

Home > Authorizations & Referrals > Medical Specialty Drug

Need help? Watch a demo about Authorizations and Referrals.

## P Medical Specialty Drug

Give Feedback

Go to Dashboard

New Request +

3

SELECT A PAYER

Organization

Availity Test Org

Payer ⓘ

MOLINA HEALTHCARE MICHIGAN

Next

4. Read the notice to ensure you're in the right place based on the type of member. If you are and you're ready to go to the form, select **Continue**.

Home > Authorizations & Referrals > Medical Specialty Drug

Need help? Watch a demo about Authorizations and Referrals.

## P Medical Specialty Drug

Give Feedback

Go to Dashboard

New Request +

4

### Medicaid or Marketplace Drug Prior Authorization Requests

\*Prescriber NPI required for submission\*

If you are seeking authorization of a Retail or Medical (HCPCS/Jcode) drug for a **Michigan or Illinois** Medicaid or Marketplace member, please submit your request via Novologix. Requests may also be submitted for National Comprehensive Cancer Network (NCCN) regimens.

For Medicaid or Marketplace drug requests **in other states**, please submit your request via fax at the appropriate fax number. Authorization forms may be found for each state at the below link:

<https://www.molinahealthcare.com/>

Continue

Back

5. Search for and select a requesting provider by choosing a tax ID and entering an NPI (if applicable).

Home > Authorizations & Referrals > Medical Specialty Drug

Need help? Watch a demo about Authorizations and Referrals.

## P Medical Specialty Drug

Give Feedback

Go to Dashboard

New Request

5

REQUESTING PROVIDER

SHOW OPTIONAL FIELDS

Can't find who you are searching for? [Search Again](#) [Back to Results](#)

### Provider Selected

Name	NPI	Tax Id
PROVIDER, PAUL	1234567893	121121212

Back

Next

## 6. Review the notice and then select **Proceed to Novologix**.

The screenshot shows the Availity user interface. At the top, there is a navigation bar with the Availity logo, 'essentials', 'Home', 'Notifications 2', 'My Favorites', 'State', 'Help & Training', 'Kelsey's Account', and 'Logout'. Below this is a secondary navigation bar with 'Patient Registration', 'Claims & Payments', 'My Providers', 'Reporting', 'Payer Spaces', and 'More'. A search bar labeled 'Keyword Search' is on the right. The main content area has a breadcrumb trail: 'Home > Authorizations & Referrals > Medical Specialty Drug'. To the right of the breadcrumb is a link: 'Need help? Watch a demo about Authorizations and Referrals.' Below the breadcrumb is a red square with a white 'P' icon, followed by the title 'Medical Specialty Drug'. To the right of the title are three buttons: 'Give Feedback', 'Go to Dashboard', and 'New Request' with a plus icon. A large blue box with a white border and a red circle containing the number '6' highlights the following text:

**As the requesting provider, I agree to notify my patient, the Molina Member, of the outcome of the request.**

You are about to be re-directed to a third-party site away from Availity's secure site, which may require a separate log-in. Availity provides the link to this site for your convenience and reference only. Availity cannot control such sites, does not necessarily endorse and is not responsible for their content, products, or services. You will remain logged in to Availity.

By clicking Proceed to Novologix you agree to the above.

At the bottom of the blue box is a blue button with a white lock icon and the text 'Proceed to Novologix'.

Complete the rest of the drug prior authorization process on Novologix.



**Reminder:** Availity cannot train on how to use systems outside of Availity.



Authorizations ▾

Reports & Tools ▾



WELCOME [NAME] [TITLE]  
CLOSE WINDOW

WorkBox Items

Find Authorization

Quick Search

Create Authorization



There are currently no items in the workbox.

There are no work items in your queue.

# Training Resources

---



# Manage My Organization | Add Providers

The screenshot shows the Availity Learning interface. At the top, the navigation bar includes 'Availity', 'essentials', 'My Favorites', 'Florida', and 'Help & Training'. A dropdown menu for 'Help & Training' is open, showing 'Find Help' and 'Get Trained'. The 'Get Trained' option is highlighted with a red circle '2'. Below the navigation bar, the breadcrumb trail shows 'Catalog - Courses | Availity Learn'. The main content area has a search bar with 'Search catalog' and a user profile 'JP'. The 'Catalog' tab is selected, and the 'Courses' sub-tab is active. A search filter 'manage my organization' is applied, resulting in one course being displayed: '- Manage My Organization - Add Provider - Training Demo'. This course has a 5-star rating, 'Difficulty Basic', and a 'Length 15 Mins'. The course title is highlighted with a red circle '4'. The course details include '1 Module', '73 Reviews', and a 'Certificate' option. An 'Enroll' button is visible at the bottom right of the course card.

Check out this great free resource!

1. Select **Help & Training**
2. Select **Get Trained**.
3. Search **Manage My Organization**.
4. Select **Manage My Organization – Add Provider – Training Demo**.





**?** Help & Training ▾

- Find Help
- Get Trained
- Availity Support
- View Network Outages

- Use **Find Help** to launch the Provider Help Center and access training documentation plus payer-specifics.
- Use **Get Trained** to launch Availity Learning Center (ALC) to enroll in on-demand and live training options.
- Use **Availity Support** to submit a support ticket online to Availity Client Services (ACS).
- Use **View Network Outages** to review current outages and scheduled maintenance.

# Thank you!

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For Availity Client Services, contact 1.800.282.4548, or select **Help & Training | Availity Support**.

For more training, select **Help & Training | Get Trained**. The Availity Learning Center (ALC) opens in a new browser tab.

