iEXCHANGE® USER MANUAL

Table of Contents

iEXCHANGE® Features..... 3
Logging In..... 5
Inpatient Request Entry..... 8
Inpatient Request Preview..... 19
Inpatient Request Confirmation..... 21
Outpatient (Other) Request Entry..... 22
Outpatient (Other) Request Preview..... 31
Outpatient (Other) Request Confirmation..... 33
Treatment Updates..... 34
Treatment Update Search..... 40
Treatment Searches..... 46
Editing Cases..... 53
Extension Requests..... 59
iEXCHANGE® Administrator..... 72

If you have questions or comments about this guide or experience problems using iEXCHANGE, please contact:
iEXCHANGE Help Desk at AmeriHealth Administrators
1-888-444-4617

iEXCHANGE® Features

Improve communication and collaboration.

As a network provider with AmeriHealth Administrators and Independence Administrators, you can streamline the precertification process and effectively communicate online by using iEXCHANGE®, a HIPAA-compliant online solution offered by MEDecision, Inc.

With iEXCHANGE® you can:

Request inpatient and outpatient certification & extensions;
Receive treatment updates;
Perform searches for members, providers, and treatments.

Delegated security model

Allows iEXCHANGE® system administrator to create and maintain user ids for the group and customize the drop down lists:

- Frequently used diagnosis list
- Frequently used procedure list
- Frequently used provider list

iEXCHANGE® Features

iEXCHANGE® benefits:

Reduced time and expense associated with paper, telephone, and fax processes;
Real-time responses for initial requests and extensions;
Treatment updates when a request has been modified or status changed;
Convenient access hours (6am-11pm EST);
No cost to providers.

iEXCHANGE® security:

Please be aware that if there is no activity for 30 minutes during your iEXCHANGE® web session, you will be "timed out" of the product; that is your session will terminate automatically. You will receive the following message:

"Your session has expired. Please login again."

You will be presented with a link that reads "Back to login".

Logging In

You can access iEXCHANGE from the below websites:

For AmeriHealth Administrators members:

- Go to http://www.amerihealth-tpa.com/providers and click on iEXCHANGE® Login

For Independence Administrators members:

- Go to http://www.ibxtpa.com/providers and click on iEXCHANGE® Login

Please note, AmeriHealth Administrators provides health utilization management, case management, and other administrative services for Independence Administrators.

Registered NaviNet users for AmeriHealth Administrators and Independence Administrators can access iEXCHANGE through a link added within NaviNet at https://navinet.navimedix.com

Logging In

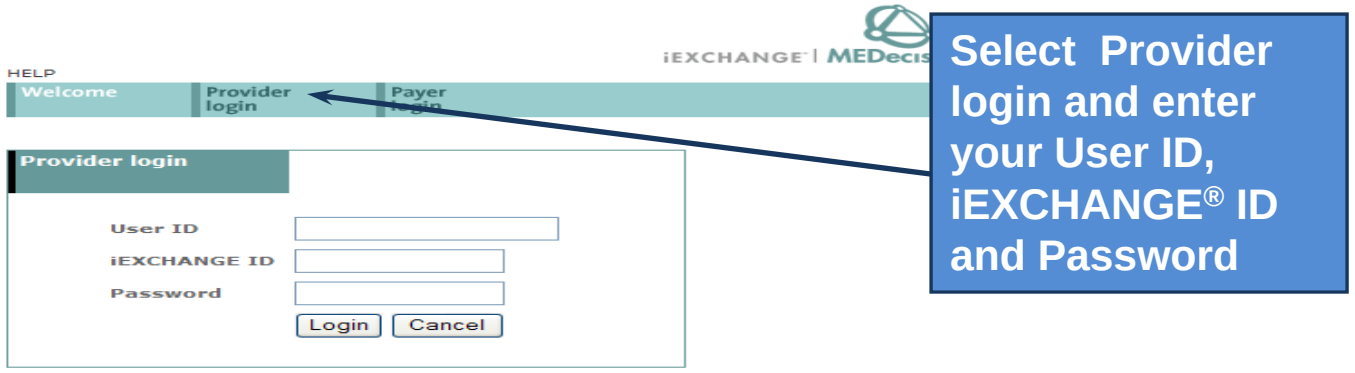
A Username, iEXCHANGE® ID, and password will need to be created for each user.

iEXCHANGE® ID is a unique account number assigned for your provider and will stay the same for all payers.

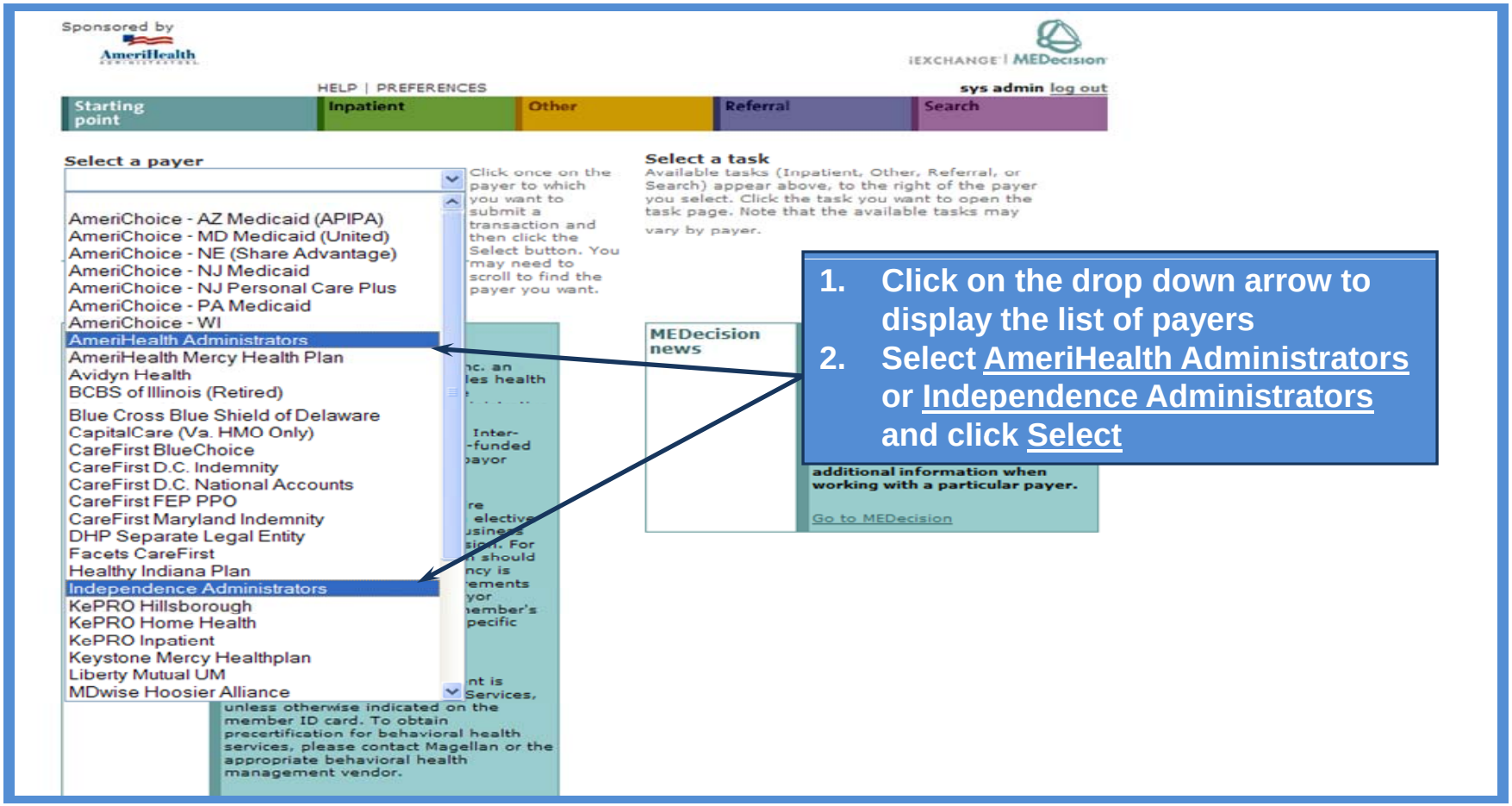
Passwords must be reset by the user every 30 days.

Click the Cancel button if you incorrectly enter any of the information, or you simply want to start again.

If you are unsure of how to proceed click HELP at the top of the page to open the iEXCHANGE® Web Help.



Logging In – Select a payer



Inpatient Request

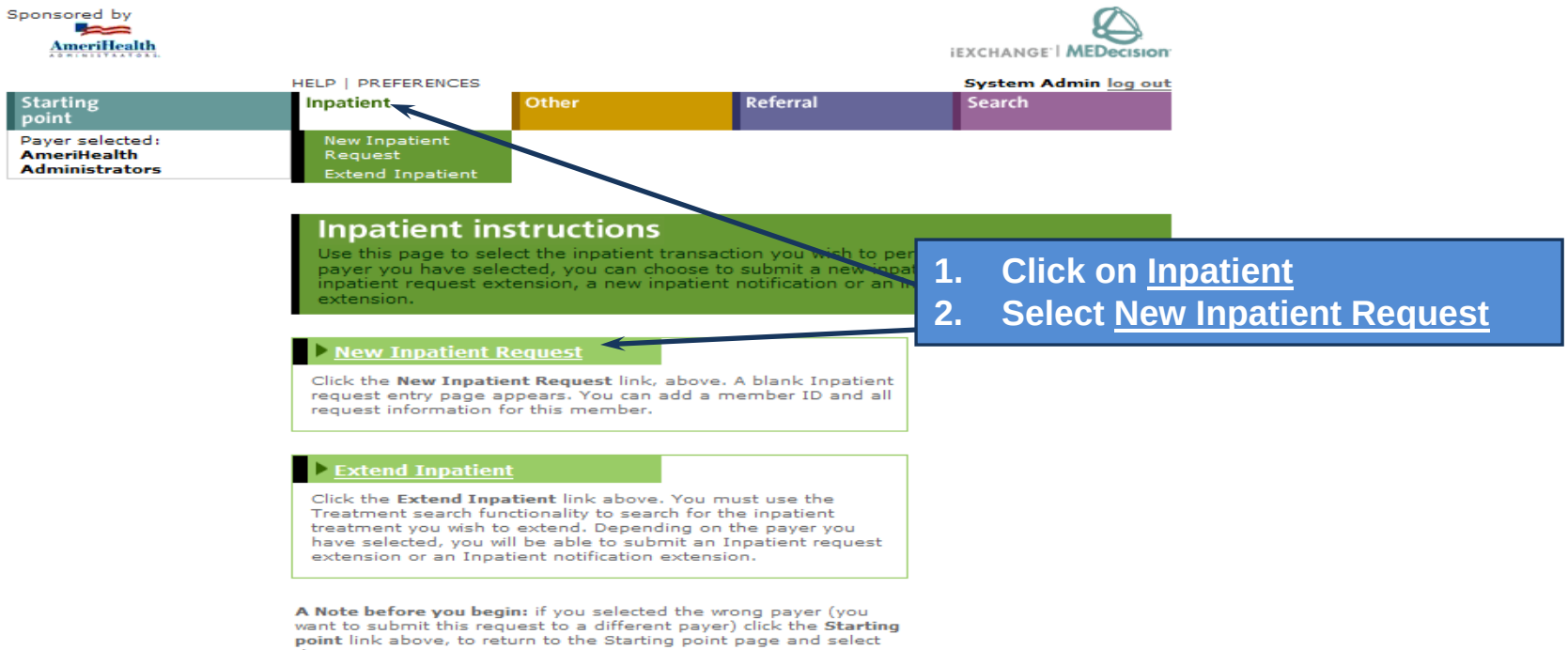
1. **Inpatient Request Entry** - all fields must be completed unless marked as "Optional". Certain optional fields may be required by the payer, such as service procedures for surgical and maternity admissions, and contact information in the Additional Comments fields.

   Additional comments can be provided or cut/copied and pasted using the free text boxes at the bottom of the **Inpatient Request Entry** page. Please do not use the following characters: **| ^ ~ [ ] { }** in the fields. Additionally, please do not use non-English language characters in iEXCHANGE Notes or any other iEXCHANGE field. Use of characters such as Ñ will result in delayed processing of your request.

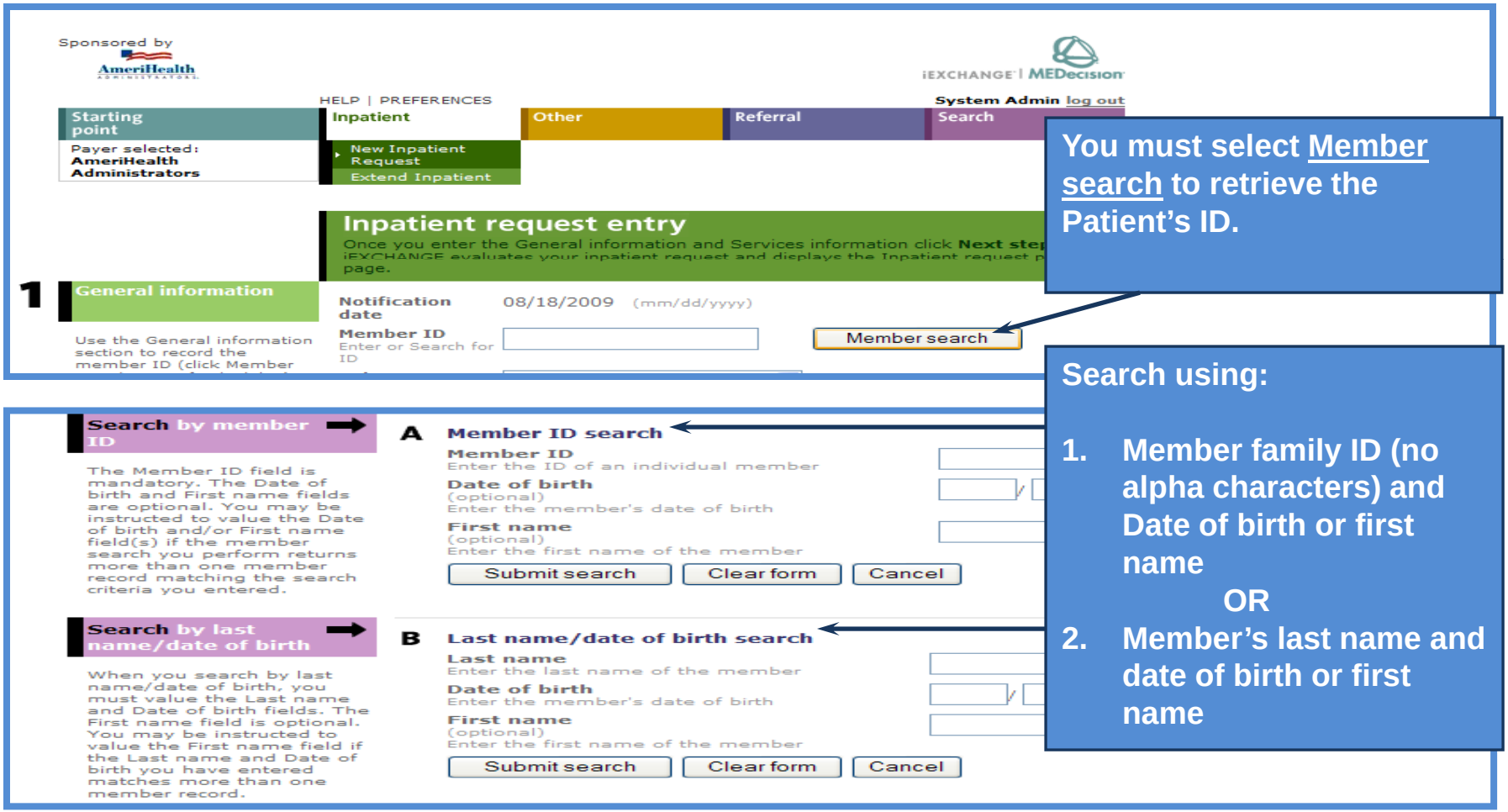
2. **Inpatient Request Preview** – evaluates the information entered and provides the expected status of the case and provides the opportunity to add or edit information prior to submission.

3. **Inpatient Request Confirmation** – provides the overall case status, including the Case ID, along with the status of each individual requested service and LOS.

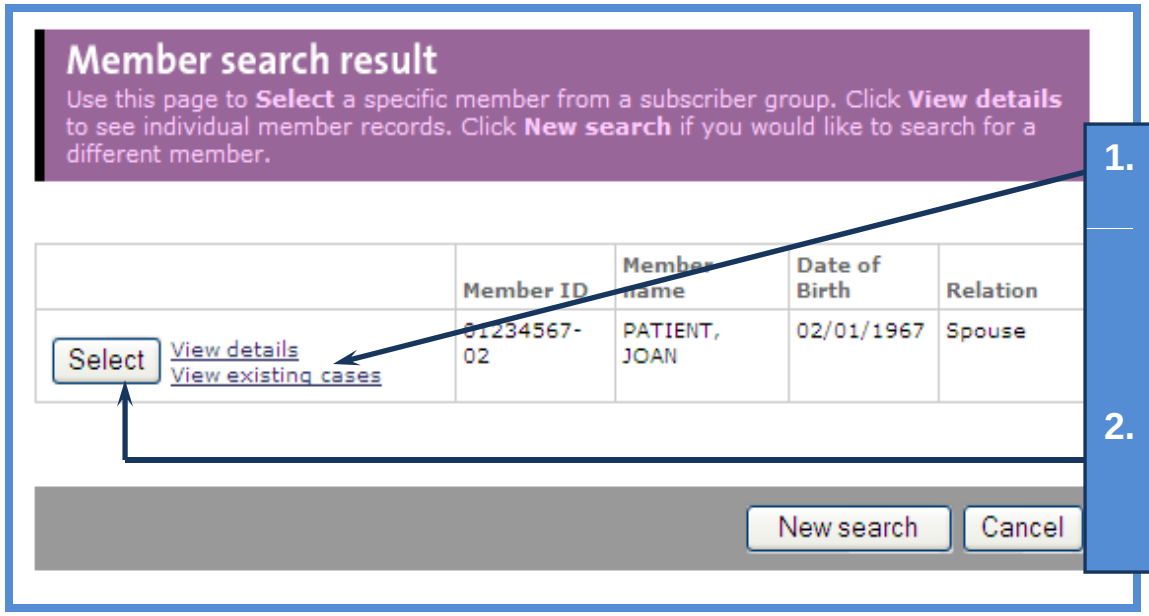
Inpatient Request Entry – Starting Point



Inpatient Request Entry – Member ID



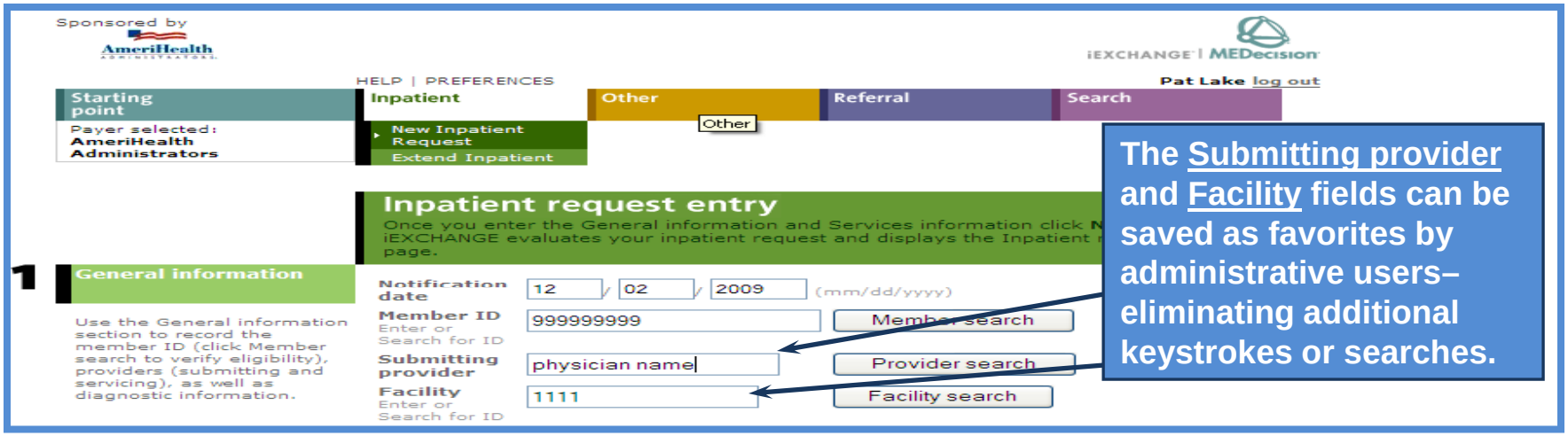
Inpatient Request Entry – Member ID (cont.)

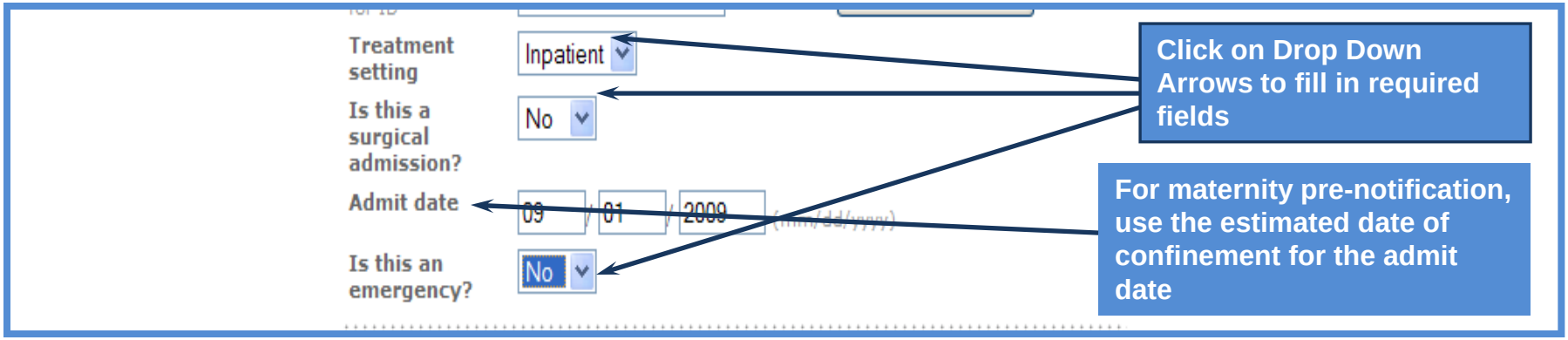


1. Click on View existing cases to review previously submitted requests and avoid potential duplicates

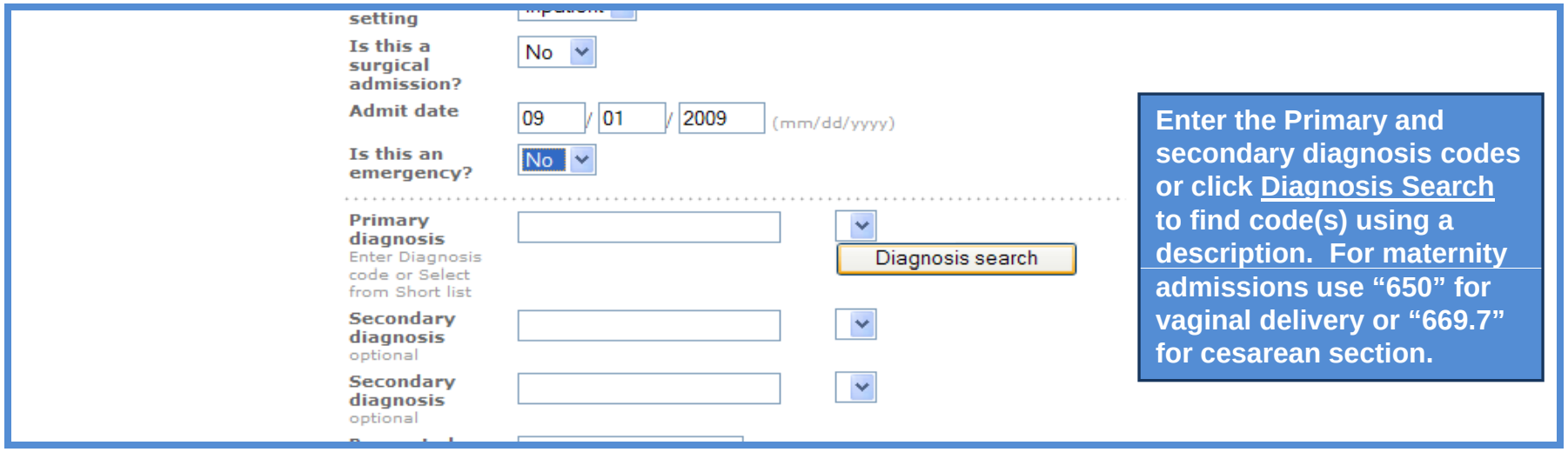
2. Click on Select to return to the Request Entry screen

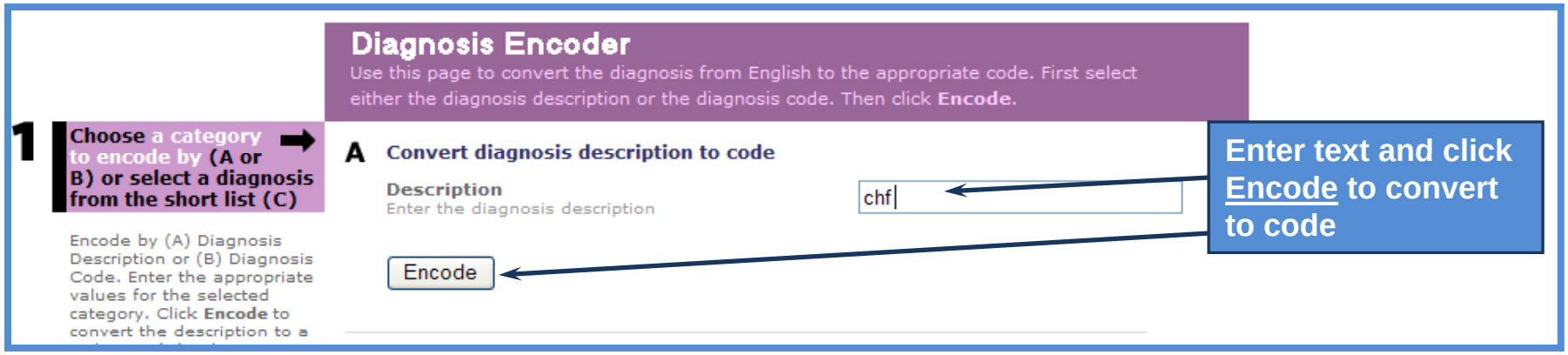
Inpatient Request Entry – Submitting and Facility Provider ID



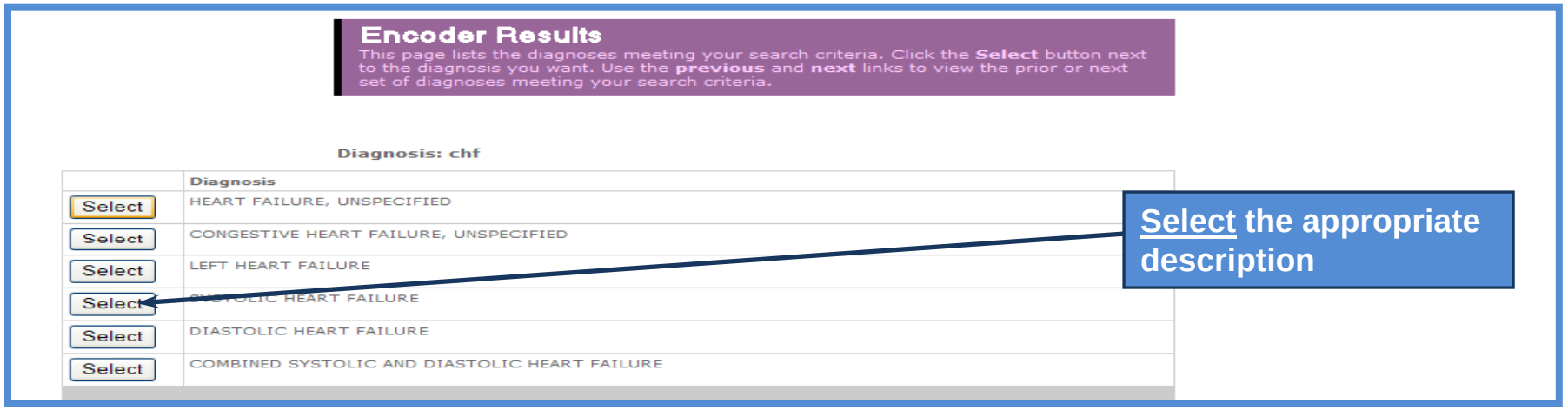


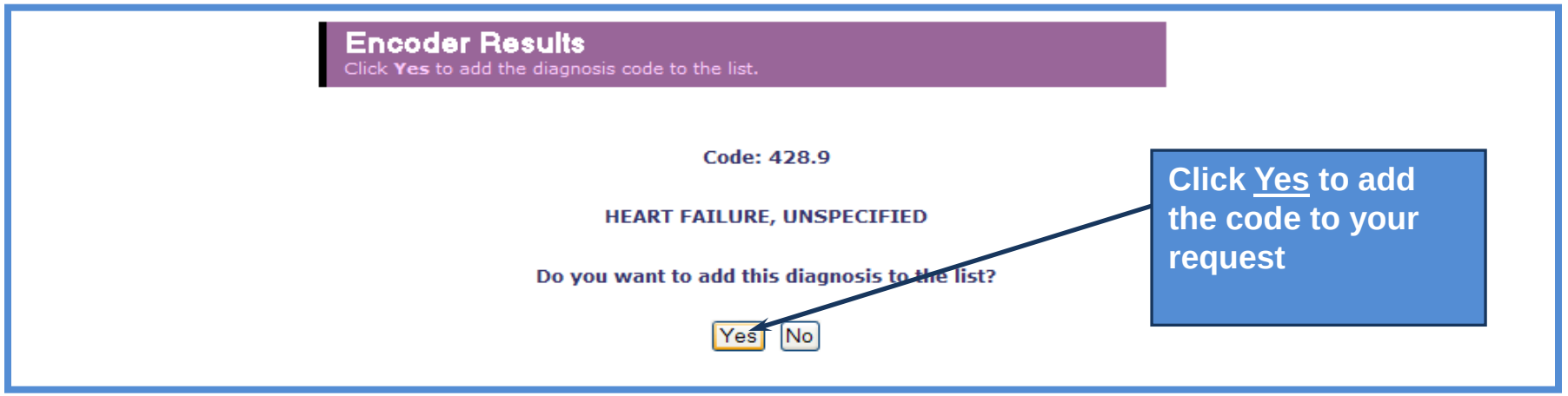
Inpatient Request Entry – Diagnosis Code



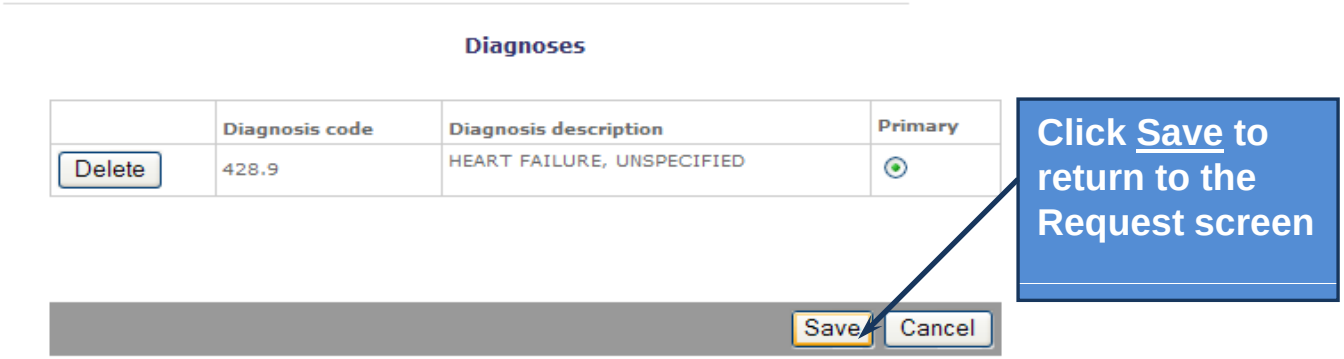


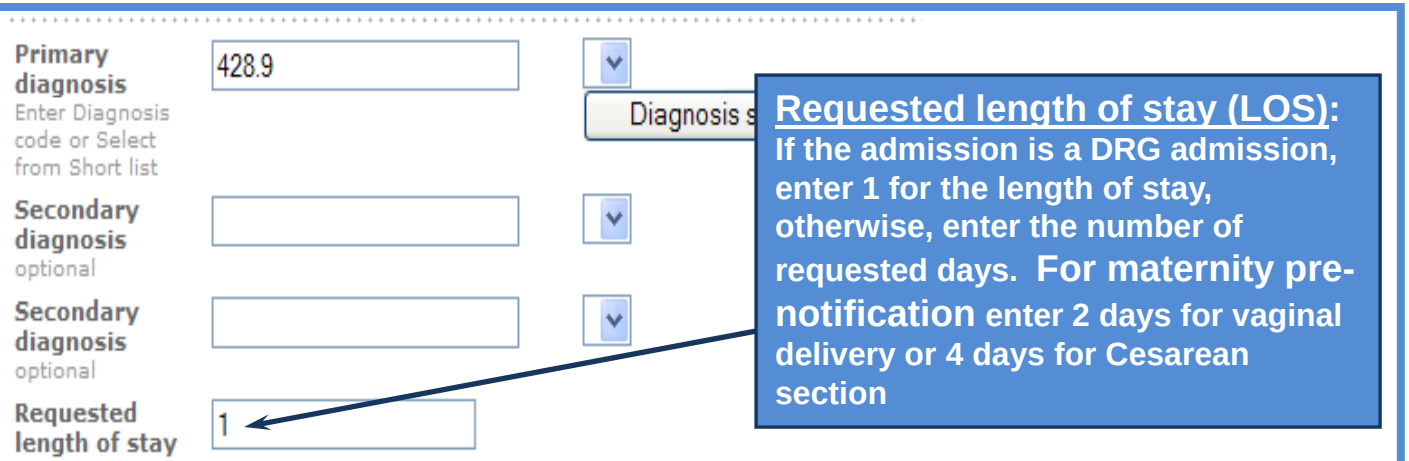
Inpatient Request Entry – Diagnosis code (cont.)



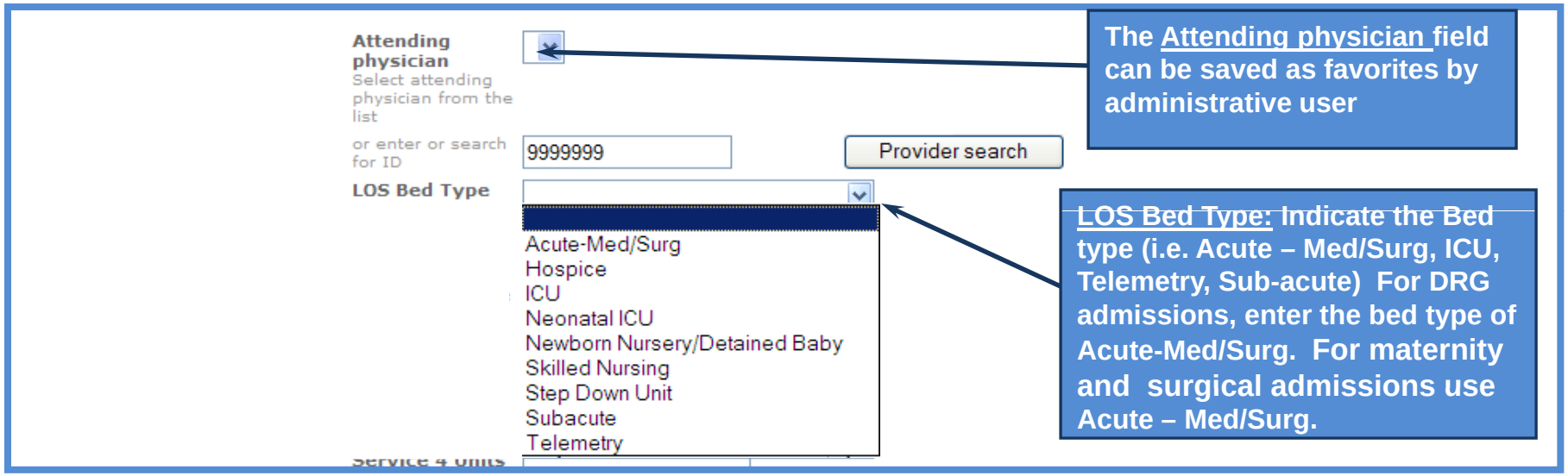


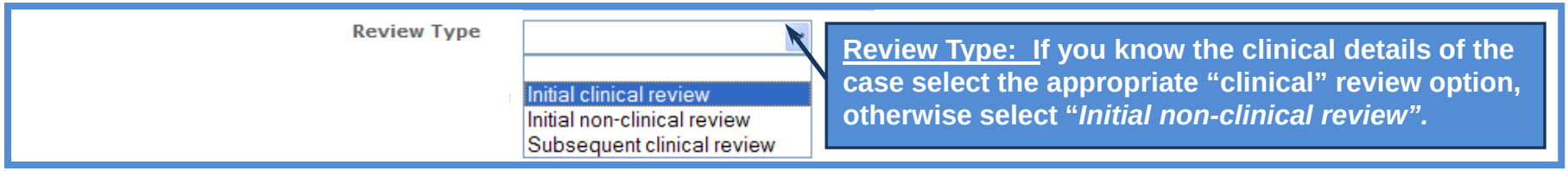
Inpatient Request Entry – Requested length of stay



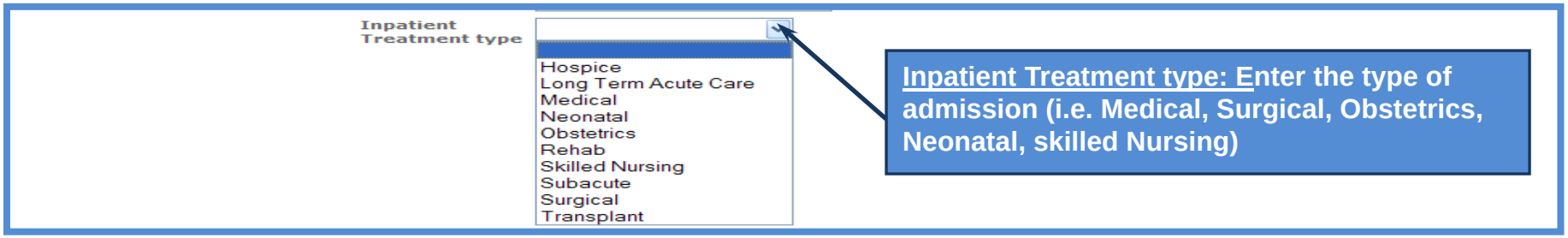


Inpatient Request Entry – LOS Bed Type and Review Type

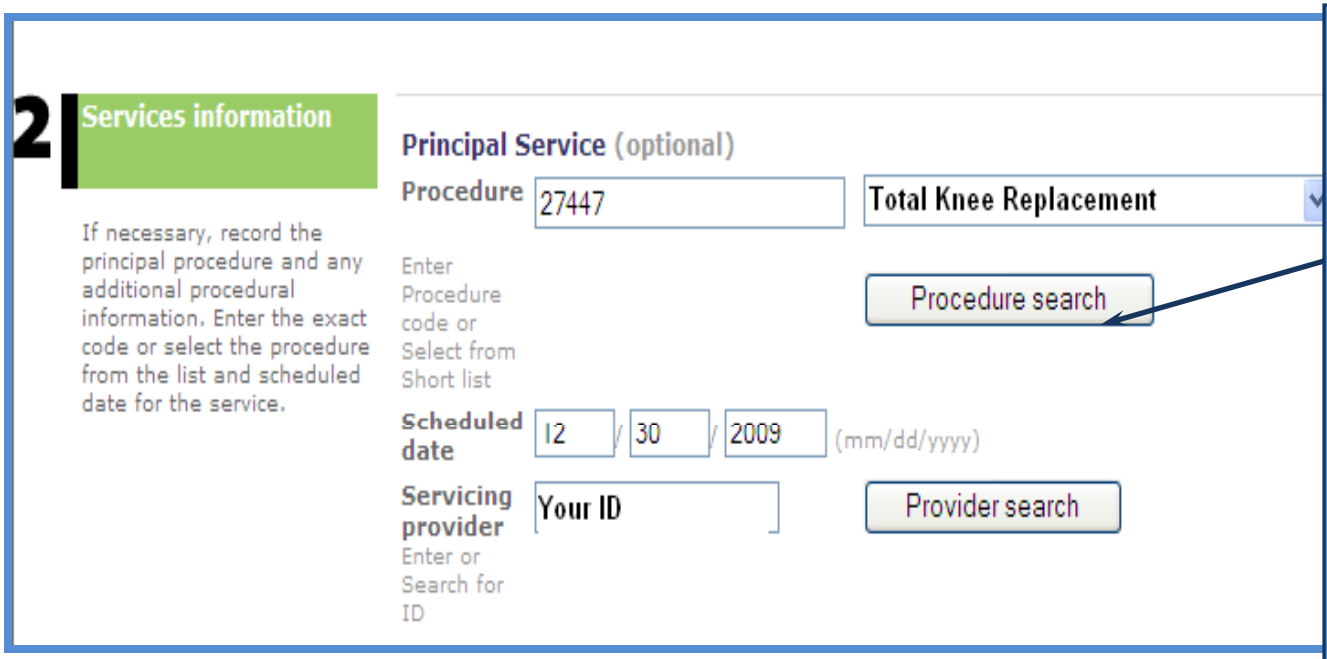




Inpatient Request Entry – Inpatient Treatment Type and Procedure Code



Inpatient Treatment type: Enter the type of admission (i.e. Medical, Surgical, Obstetrics, Neonatal, skilled Nursing)

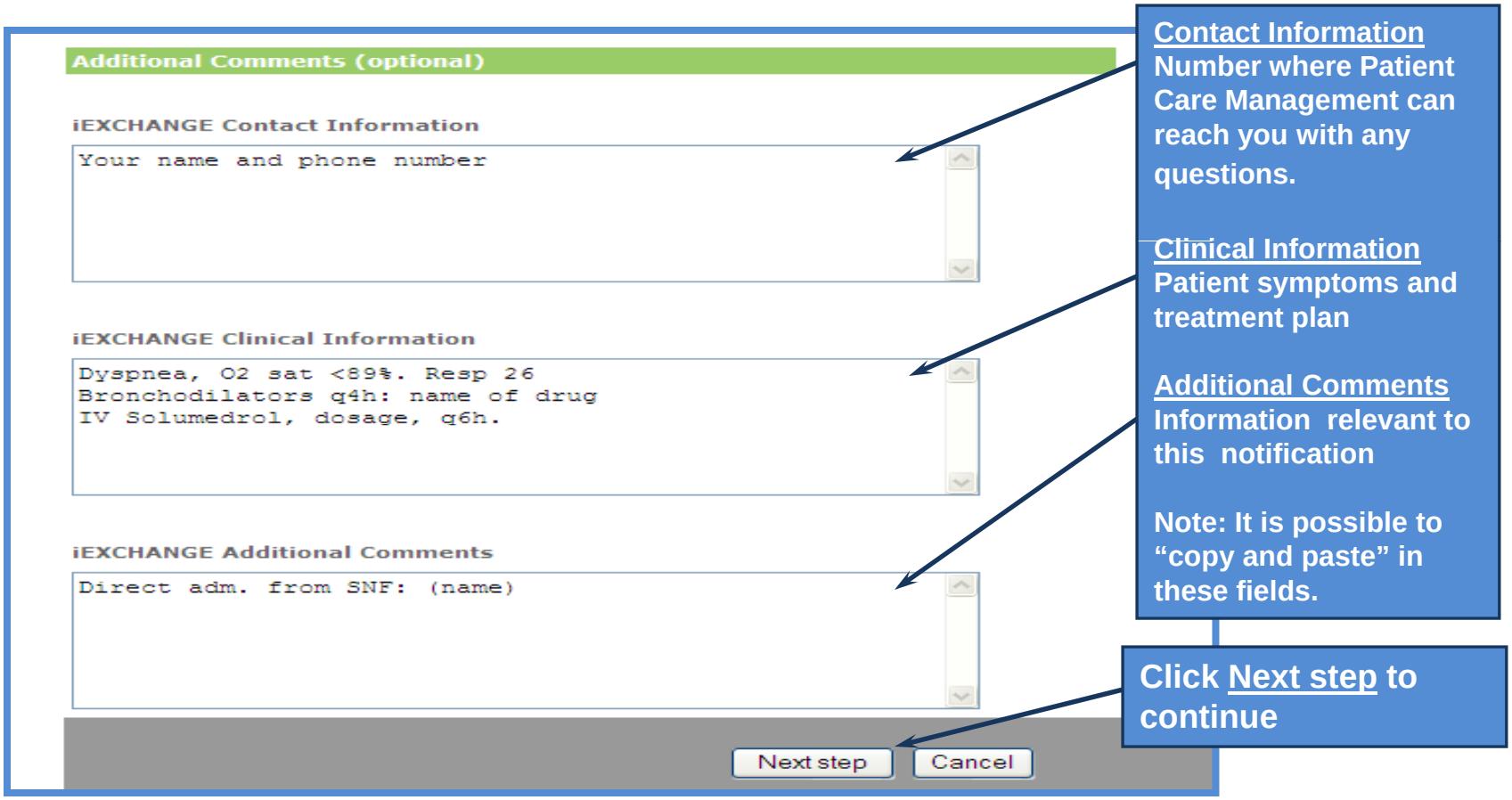


For maternity and surgical admissions always provide the procedure(s). Up to 5 procedure codes can be added by entering the codes, using a drop down list OR search by description by clicking Procedure search .

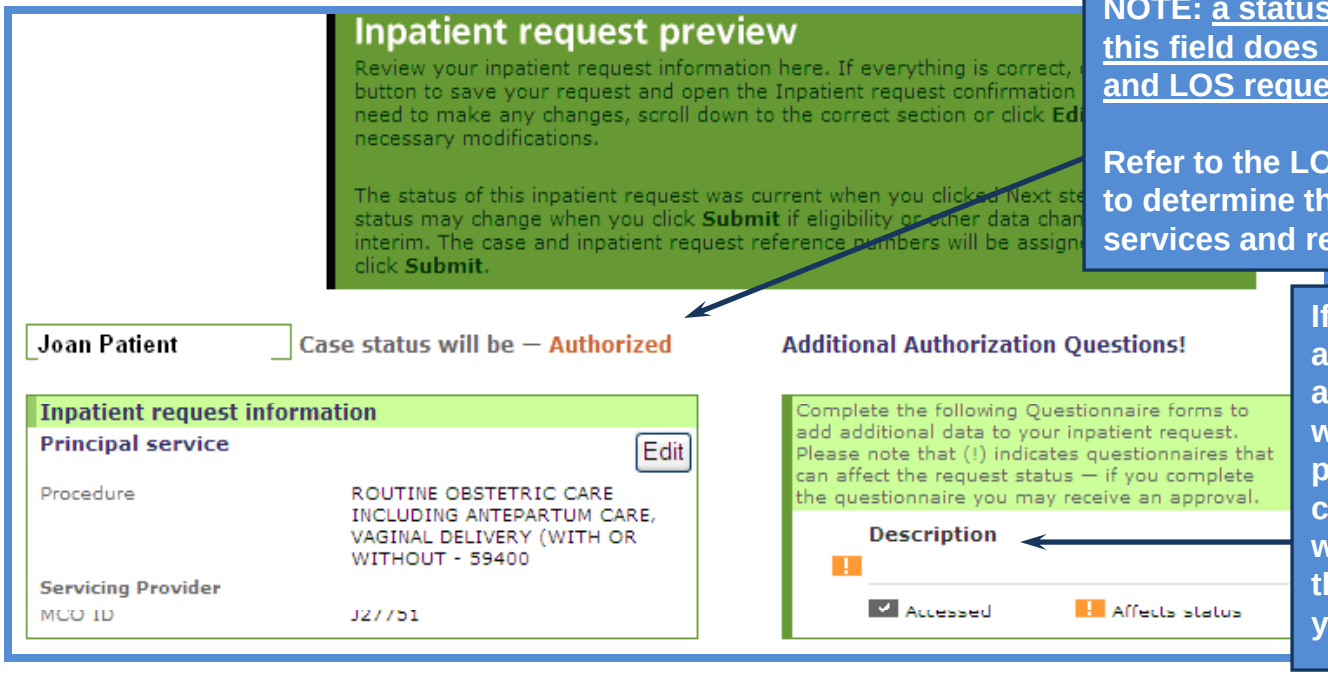
For maternity delivery, use "59400" for vaginal delivery and "59510" for cesarean section.

NOTE: when requesting multiple units for a procedure the procedure code, scheduled date and servicing provider must be entered separately for each unit

Inpatient Request Entry – Additional Comments



Inpatient Request Preview – Expected Status and questionnaires

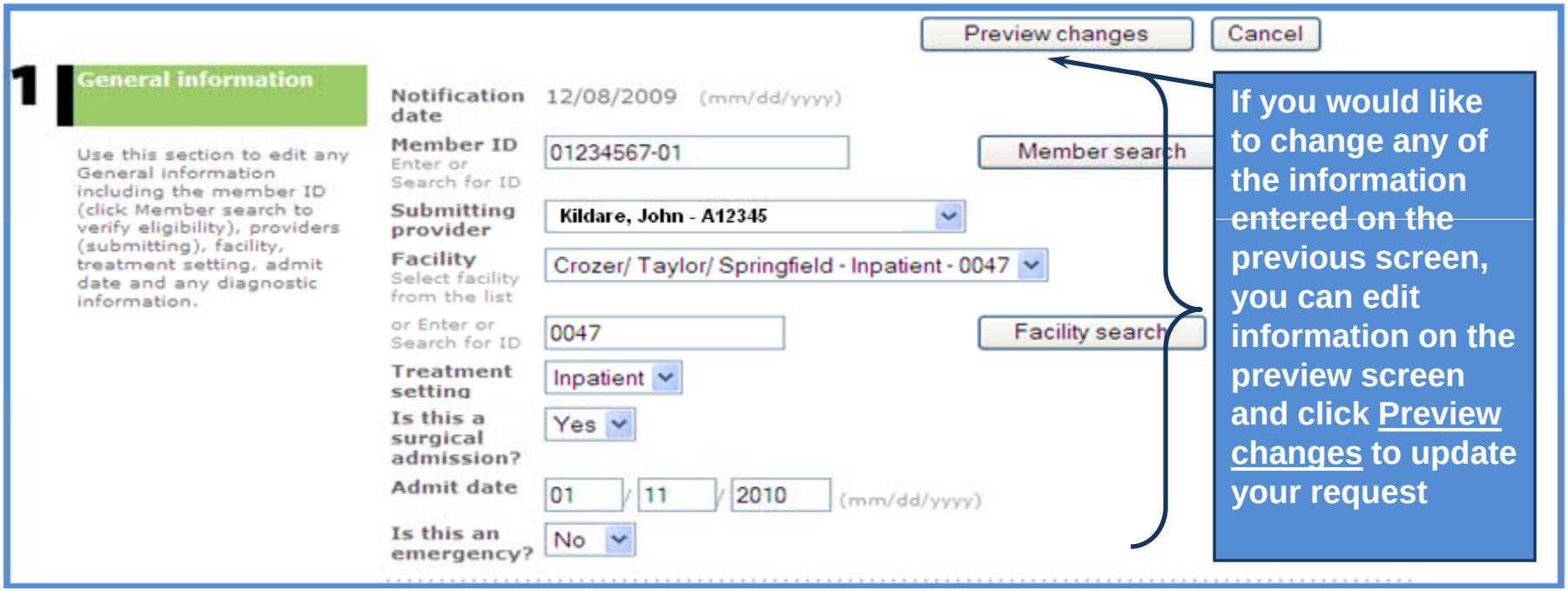


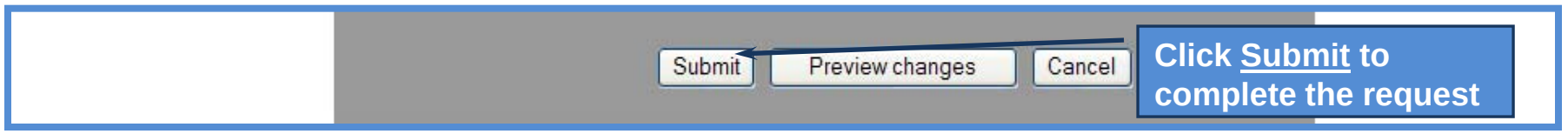
Preview Page will display the expected status of the case.
NOTE: a status of "Authorized" in this field does not mean all services and LOS requested are approved.

Refer to the LOS and Service status to determine the individual status of services and requested LOS.

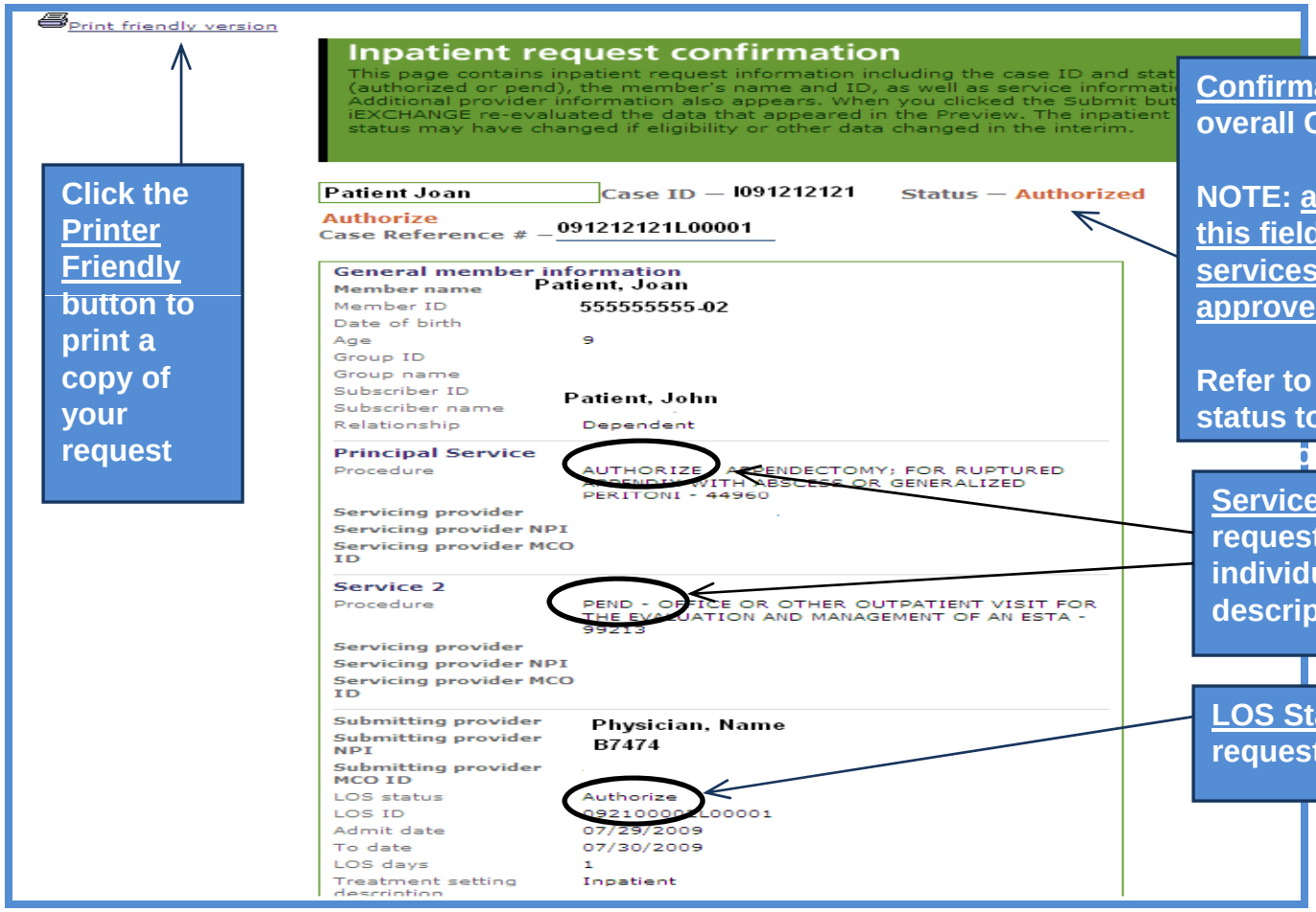
If questionnaires are available, links will be available in this box which will allow you to provide additional clinical information which could change the expected status of your case to Approved

Inpatient Request Preview – Submit request





Inpatient Request Confirmation



Click the Printer Friendly button to print a copy of your request

Confirmation screen provides the overall Case status.

NOTE: a status of "Authorized" in this field does not mean all services and LOS requested are approved.

Refer to the LOS and Service status to determine the individual

Service(s) Status: Status of requested services are listed individually with the service description

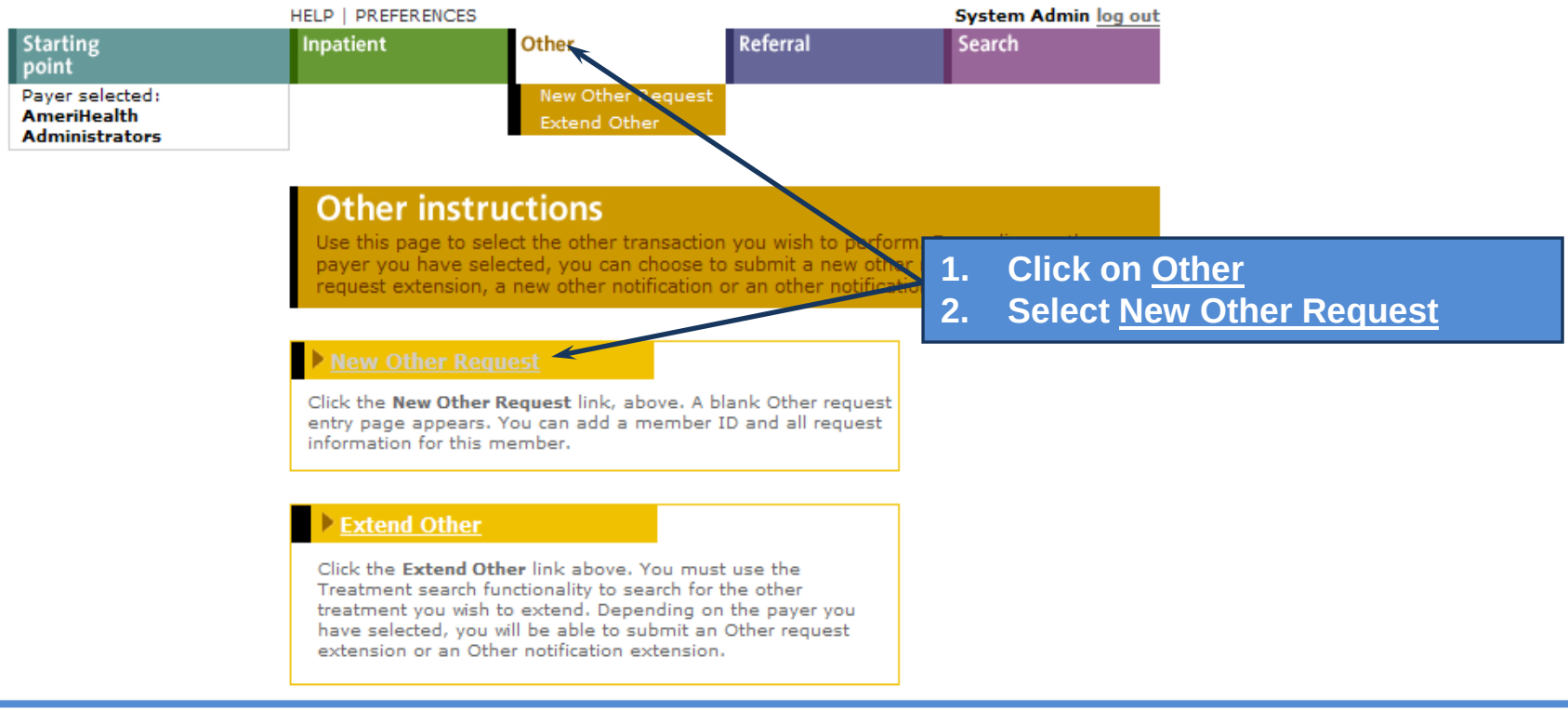
LOS Status: Status of requested LOS

Outpatient (Other) Request

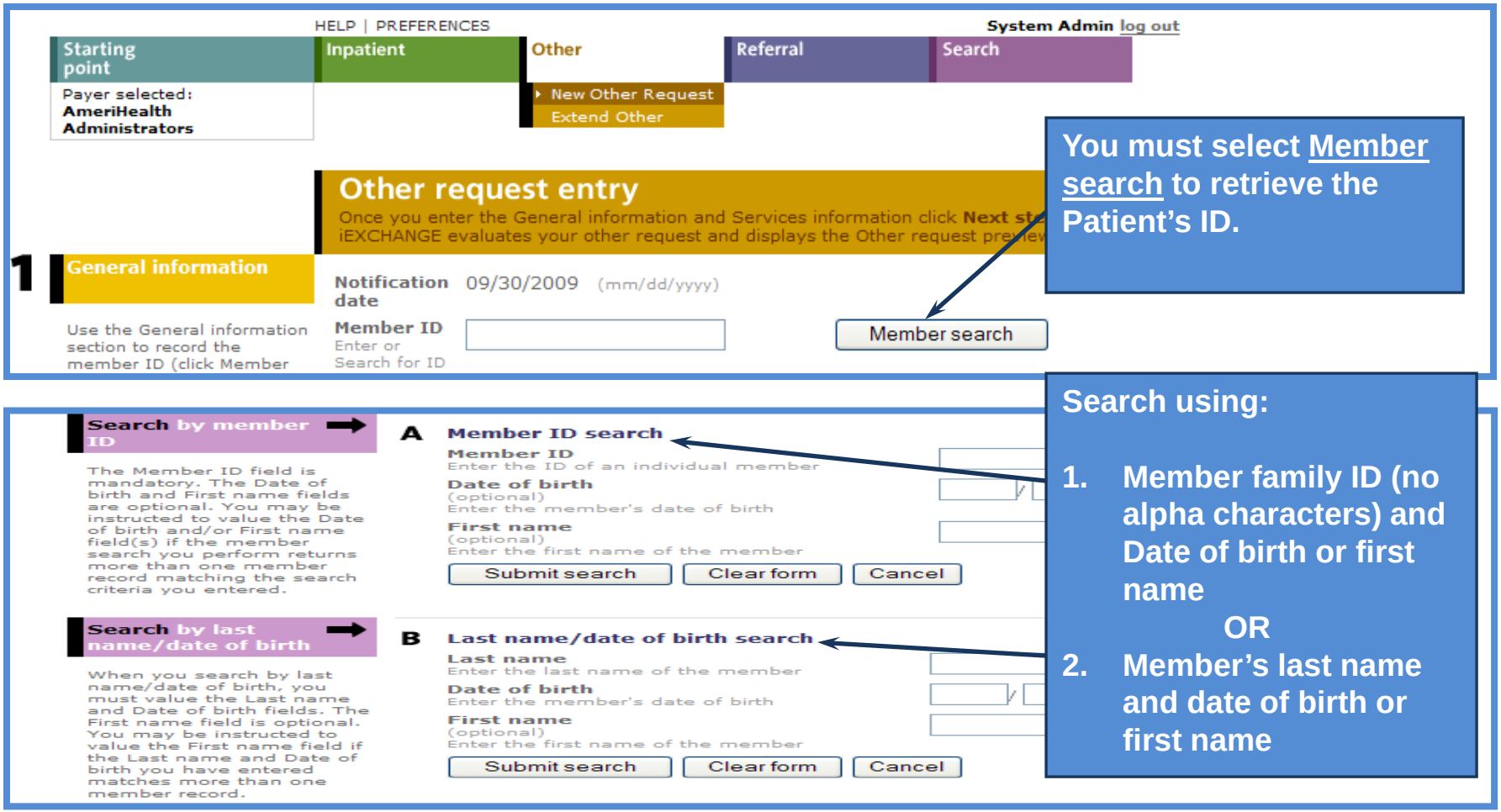
1. **Outpatient Request Entry** - all fields must be completed unless marked as “Optional” Certain optional fields may be required by the payer, such as contact information in the Additional Comments fields.

   Additional comments can be provided or cut/copied and pasted using the free text boxes at the bottom of the **Inpatient Request Entry** page. Please do not use the following characters: **| ^ ~ [ ] { }** in the fields. Additionally, please do not use non-English language characters in iEXCHANGE Notes or any other iEXCHANGE field. Use of characters such as Ñ will result in delayed processing of your request.
2. **Outpatient Request Preview** – evaluates the information entered and provides the expected status of the case and provides the opportunity to add or edit information prior to submission
3. **Outpatient Request Confirmation** – provides the overall case status, including the Case ID, along with the status of each individual requested service and LOS

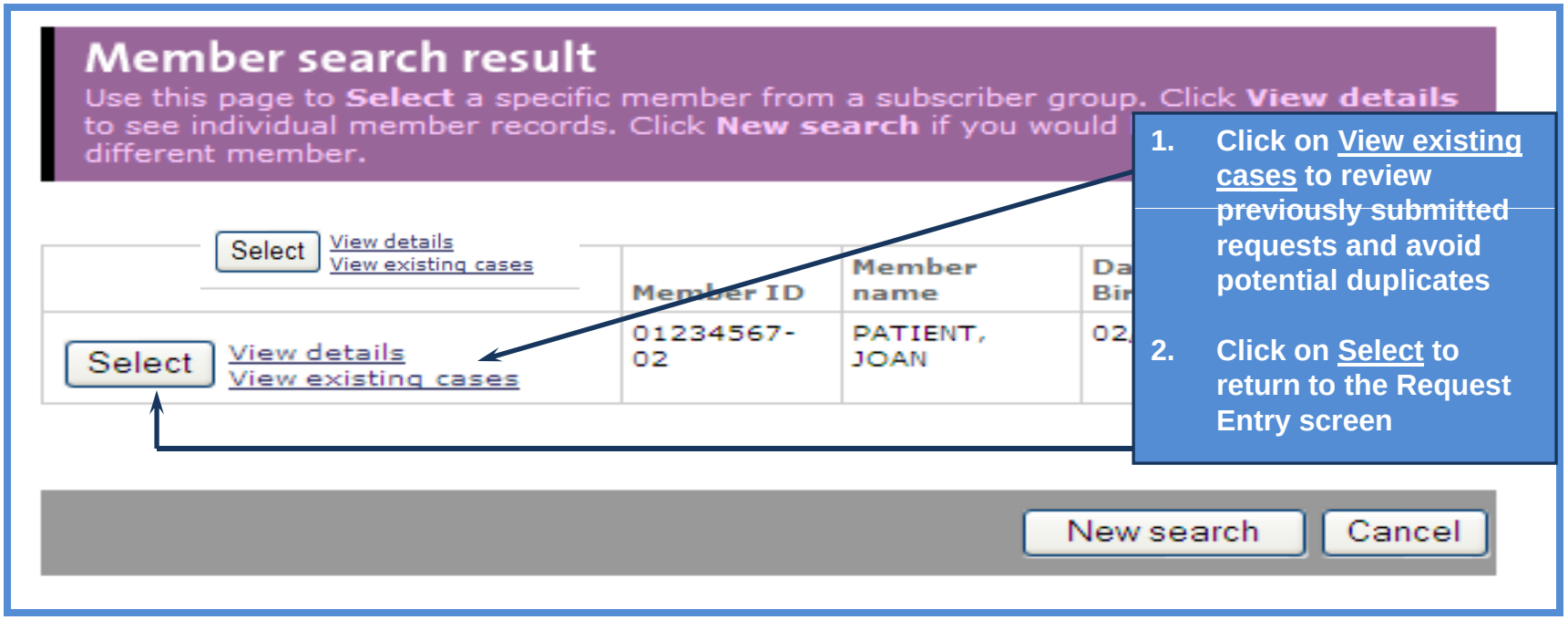
Outpatient (Other) Request Entry



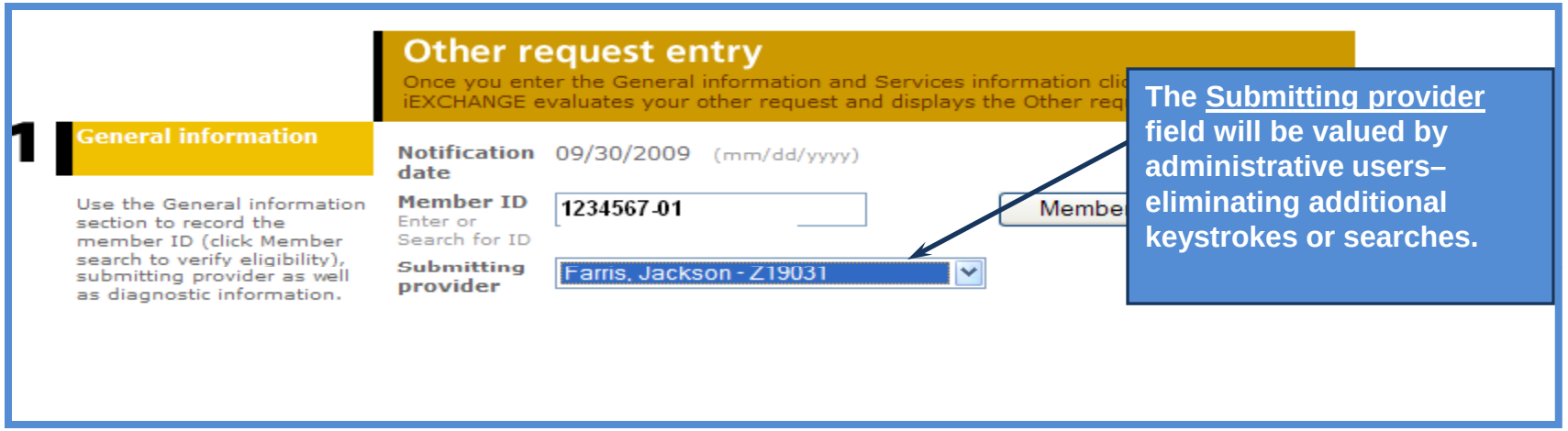
Outpatient (Other) Request Entry – Member ID

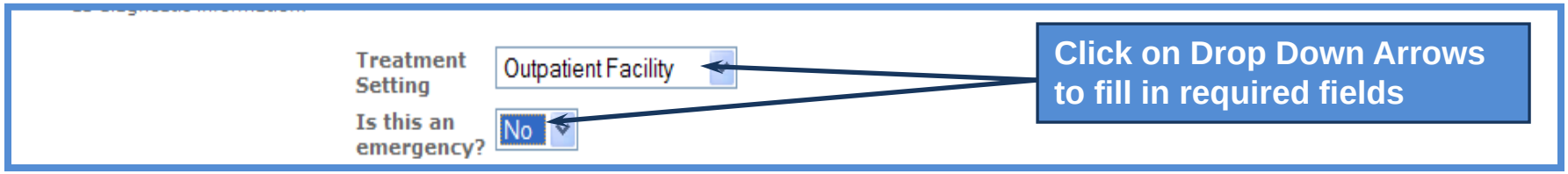


Outpatient (Other) Request Entry – Member ID (cont.)

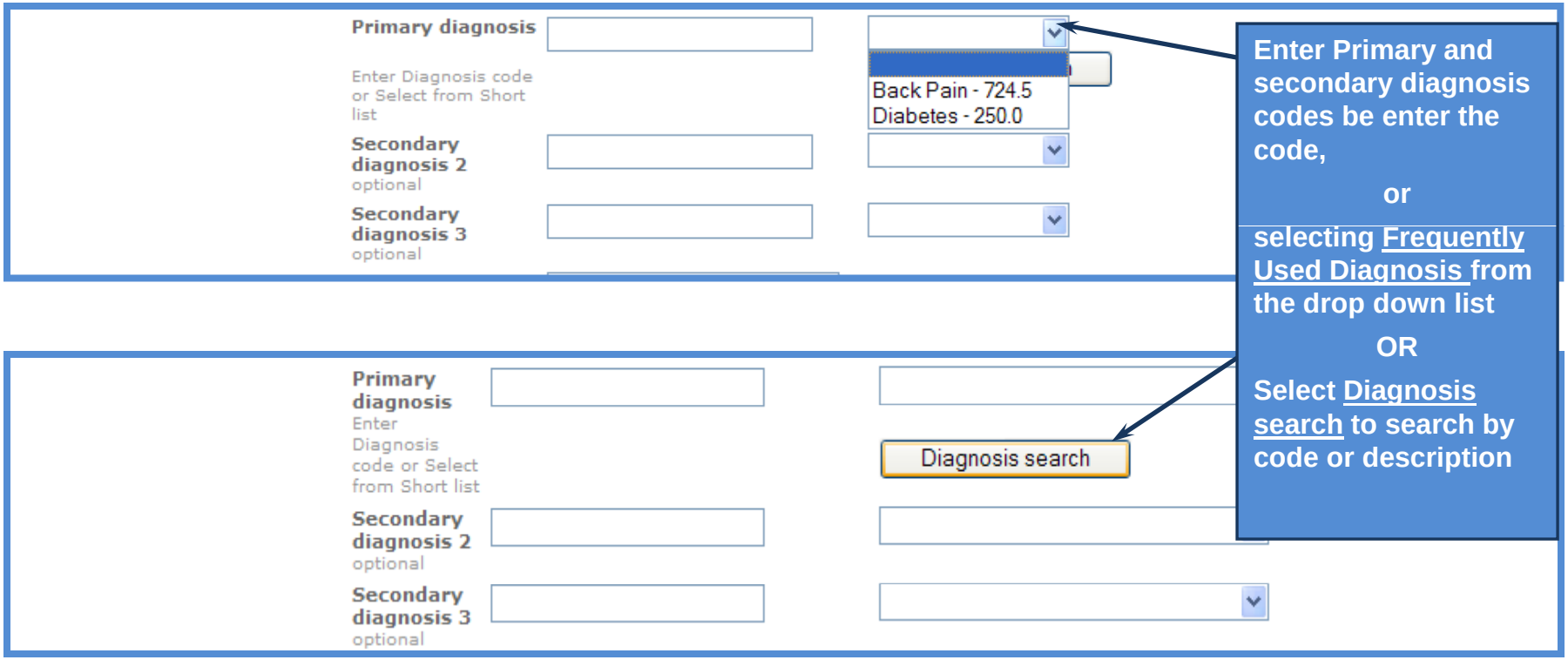


Outpatient (Other) Request Entry – Submitting Provider & Treatment Setting

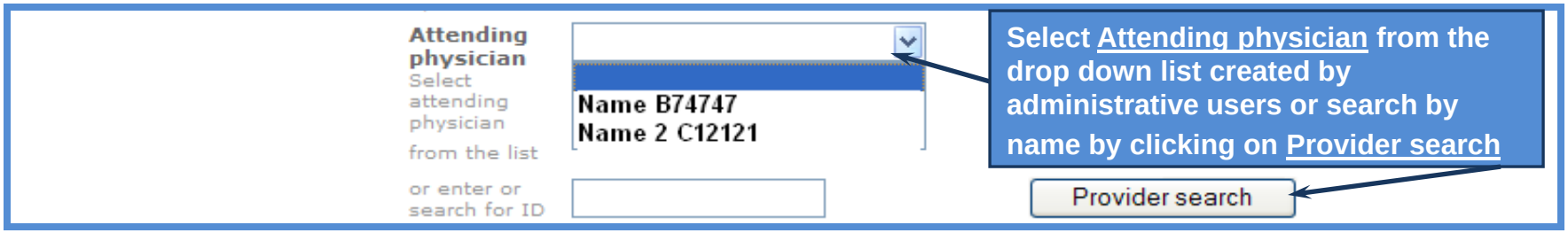


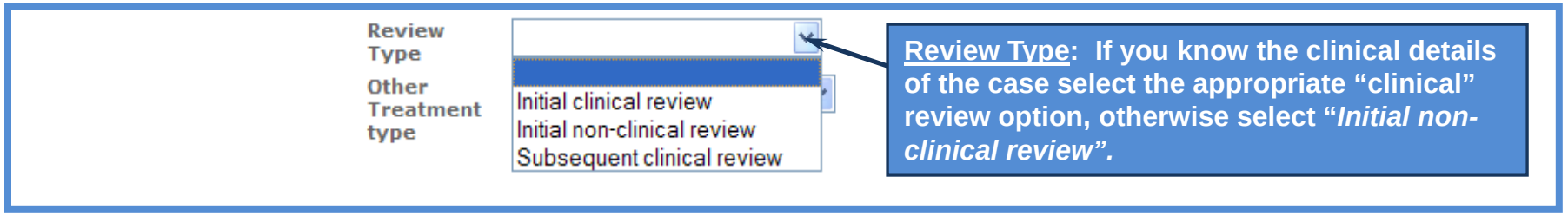


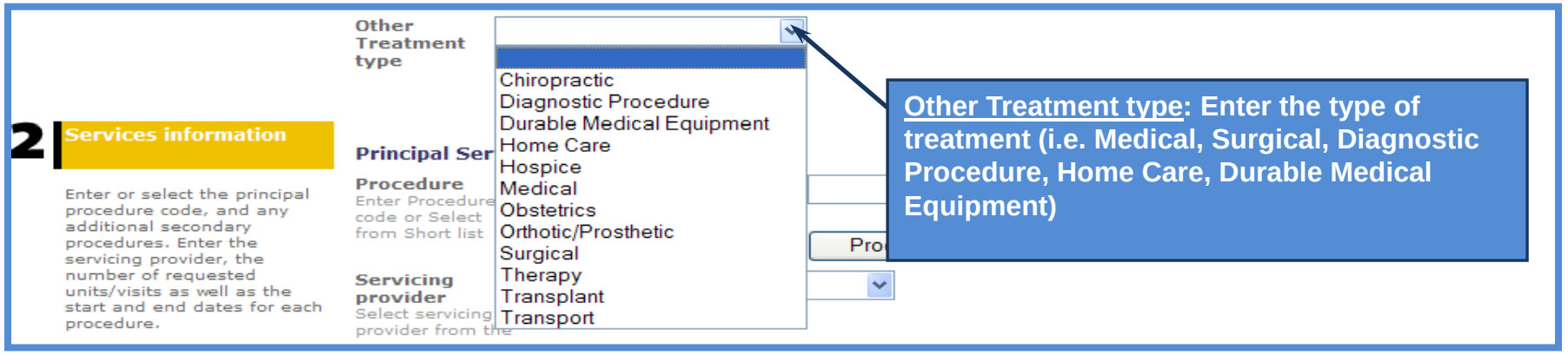
Outpatient (Other) Request Entry – Diagnosis code



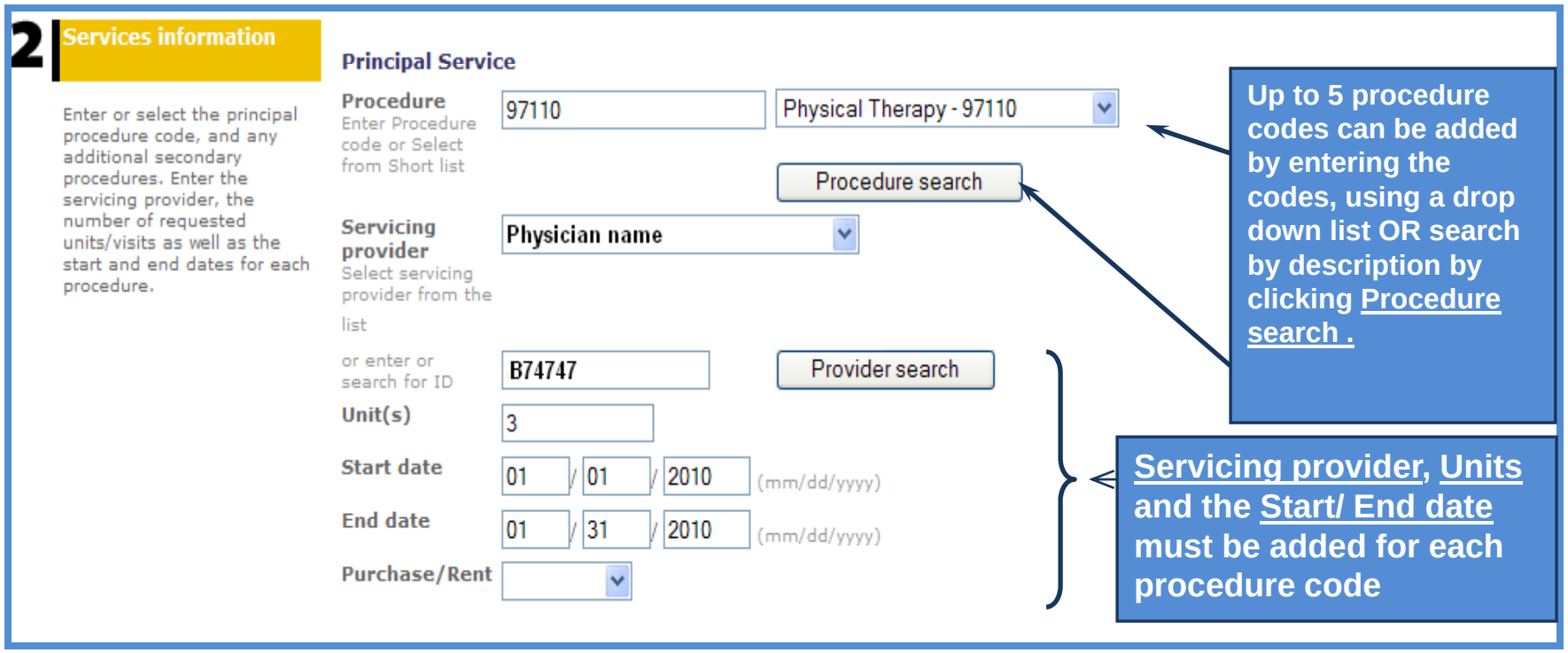
Outpatient (Other) Request Entry – Attending physician & Review Type



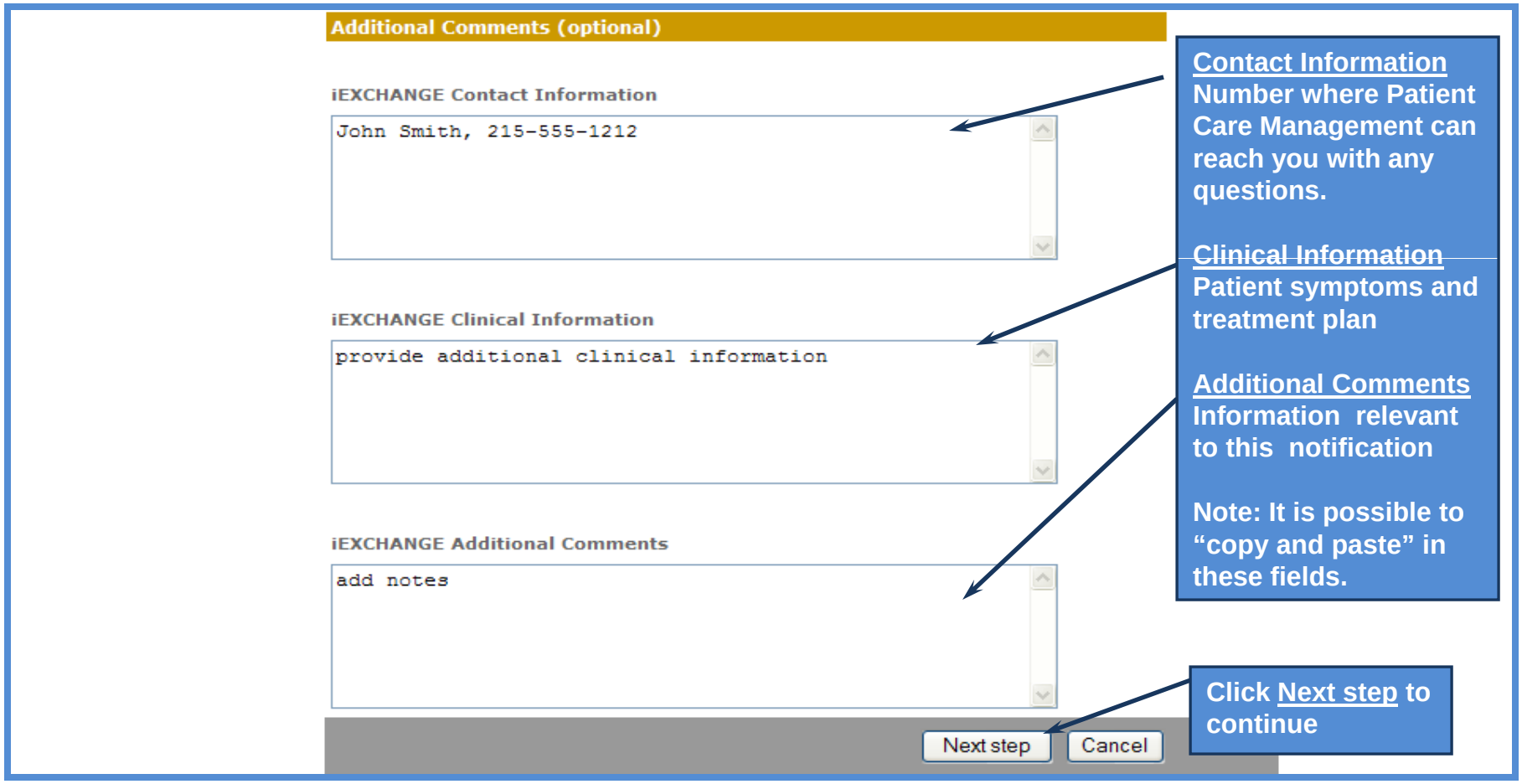




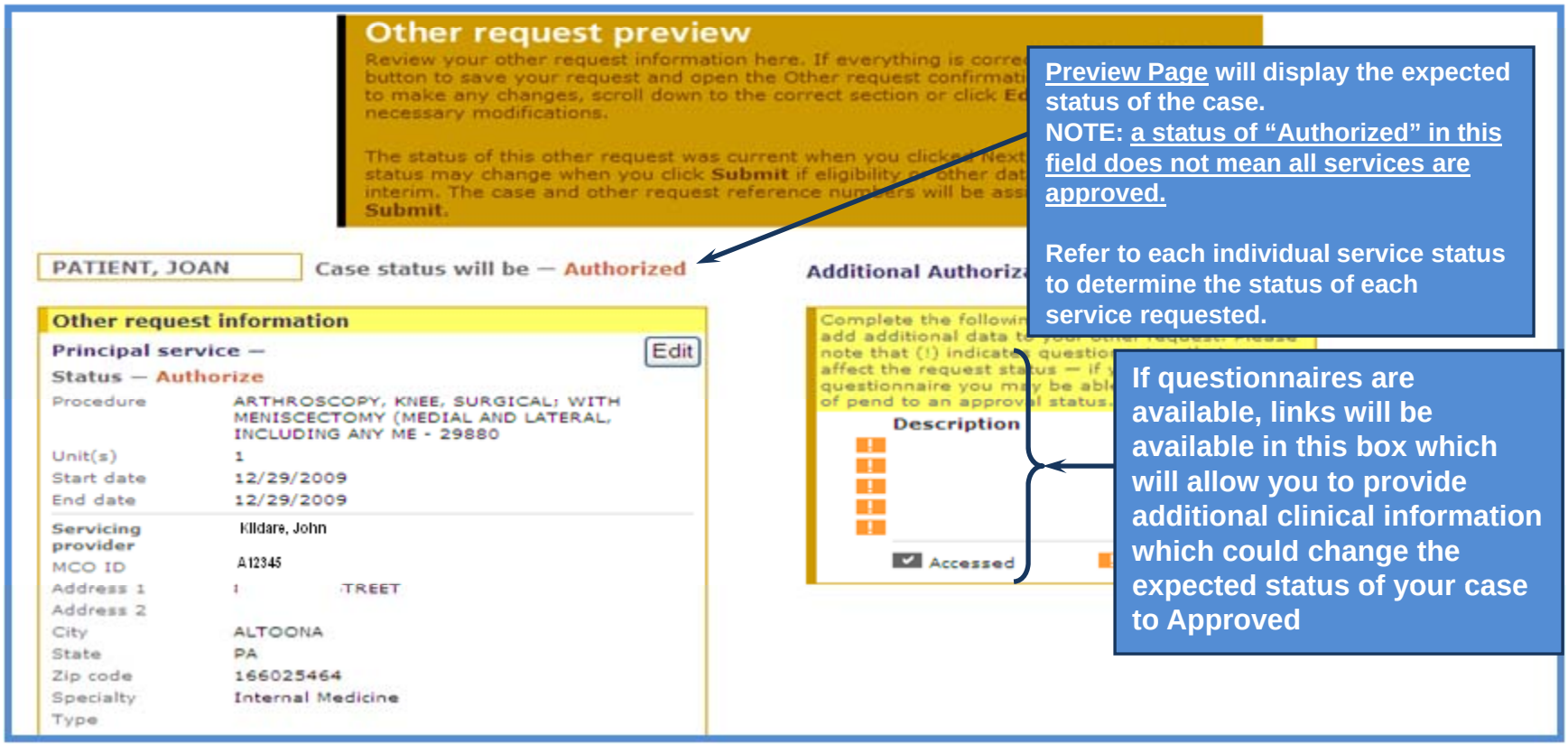
Outpatient (Other) Request Entry – Procedure Code



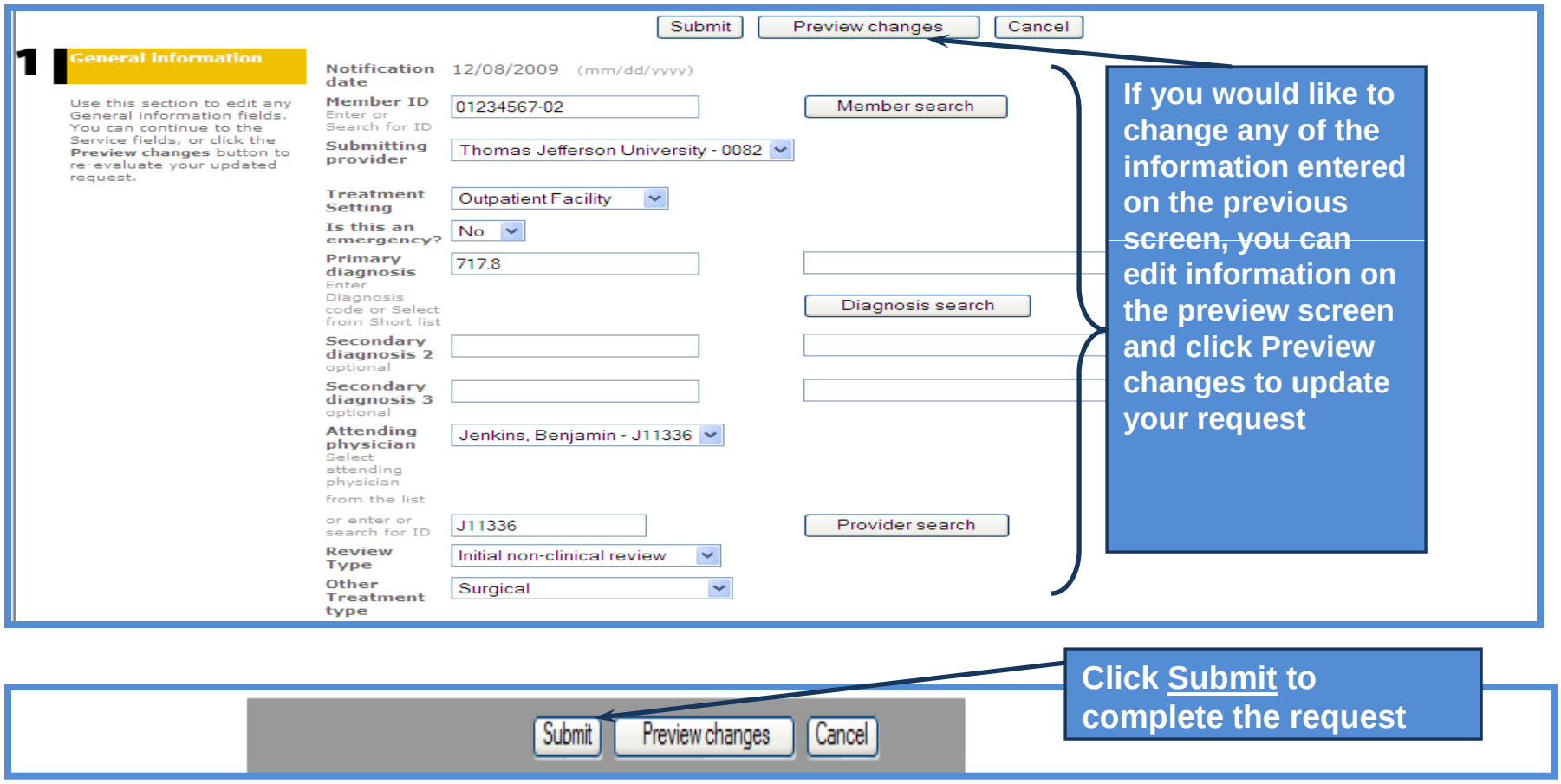
Outpatient (Other) Request Entry – Additional Comments



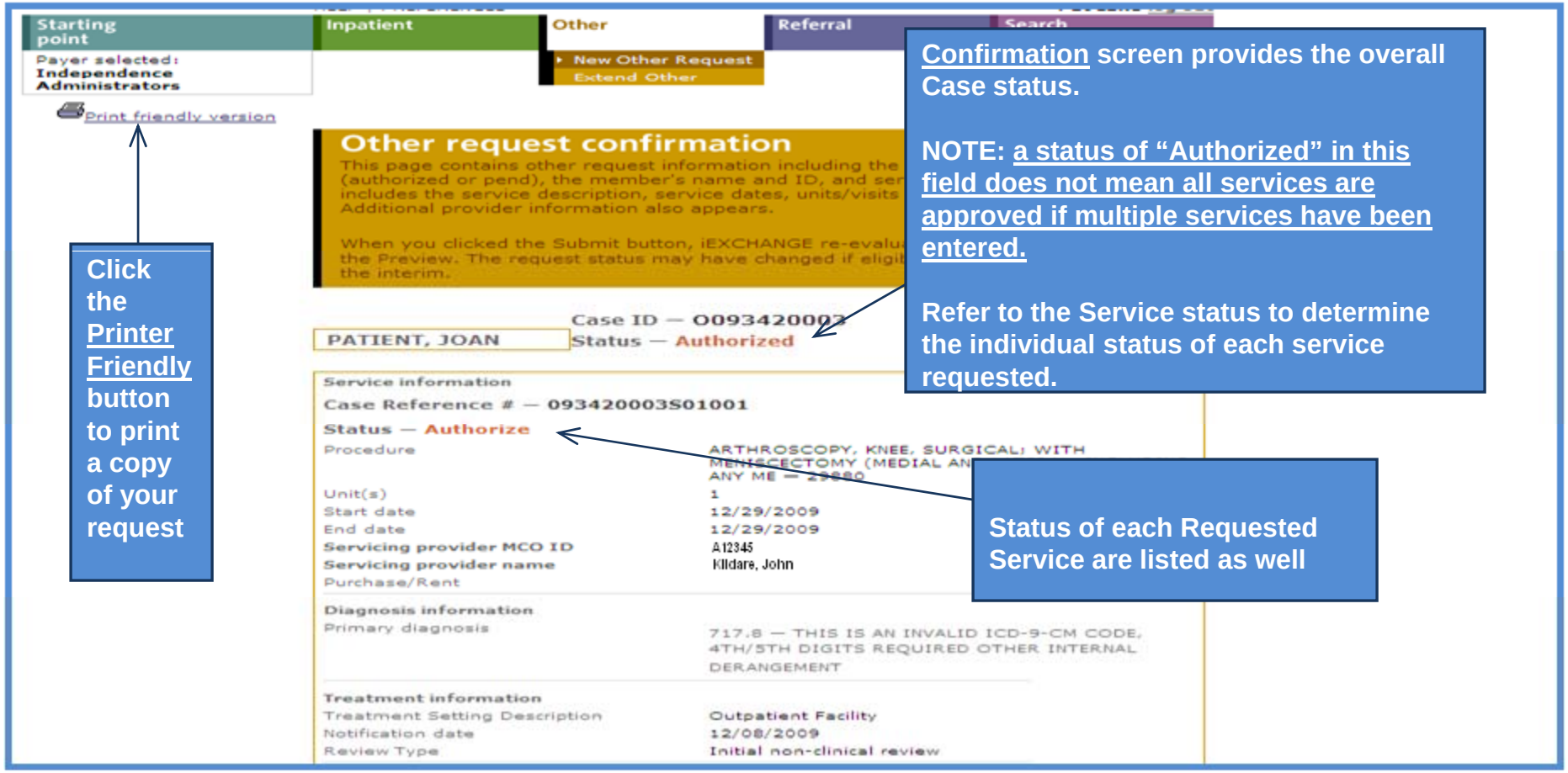
Outpatient (Other) Request Preview – Expected Status and questionnaires



Outpatient (Other) Request Preview – Submit Request



Outpatient (Other) Request Confirmation



Treatment Updates

Treatment Update functionality notifies you when AmeriHealth Administrators (AHA) or another provider has created or modified a Request. Categories of Treatment Updates include:

Updates from MCO:

Informs you of changes made by AHA to requests submitted by a provider in your group. You can receive Updates from MCO when:

- AHA has modified the status of a treatment from Pend to Approved, Pend to Denied, Approved to Pend or Approved to Denied.
- AHA has added comments to a Request or Notification submitted by a provider in your group.

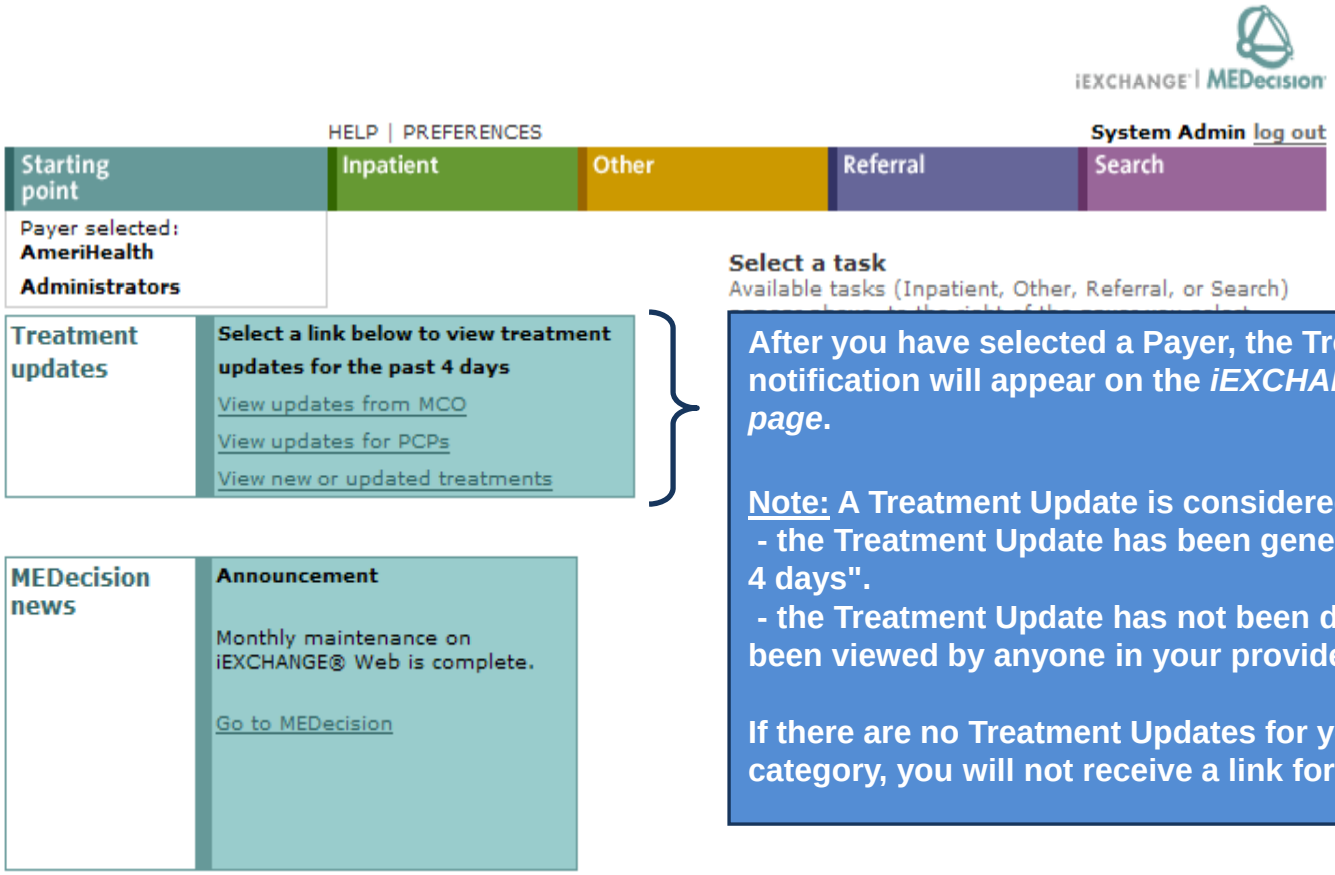
Updates for PCPs (Primary Care Physicians):

Generated for Primary Care Physicians in your group when treatments have been added or extended for their patients. Updates for PCPs are designed to keep Primary Care Physicians informed of treatments initiated by other providers on behalf of the PCPs patients.

New or Updated Treatments:

Informs you of new or extended treatments added by a specialist or AHA with which your Facility, or a Provider in your group, is directly involved. For example, when a treatment is added and your Facility or a Provider in your group is listed as the facility, attending physician, or servicing provider, you will receive a Treatment Update.

Treatment Updates

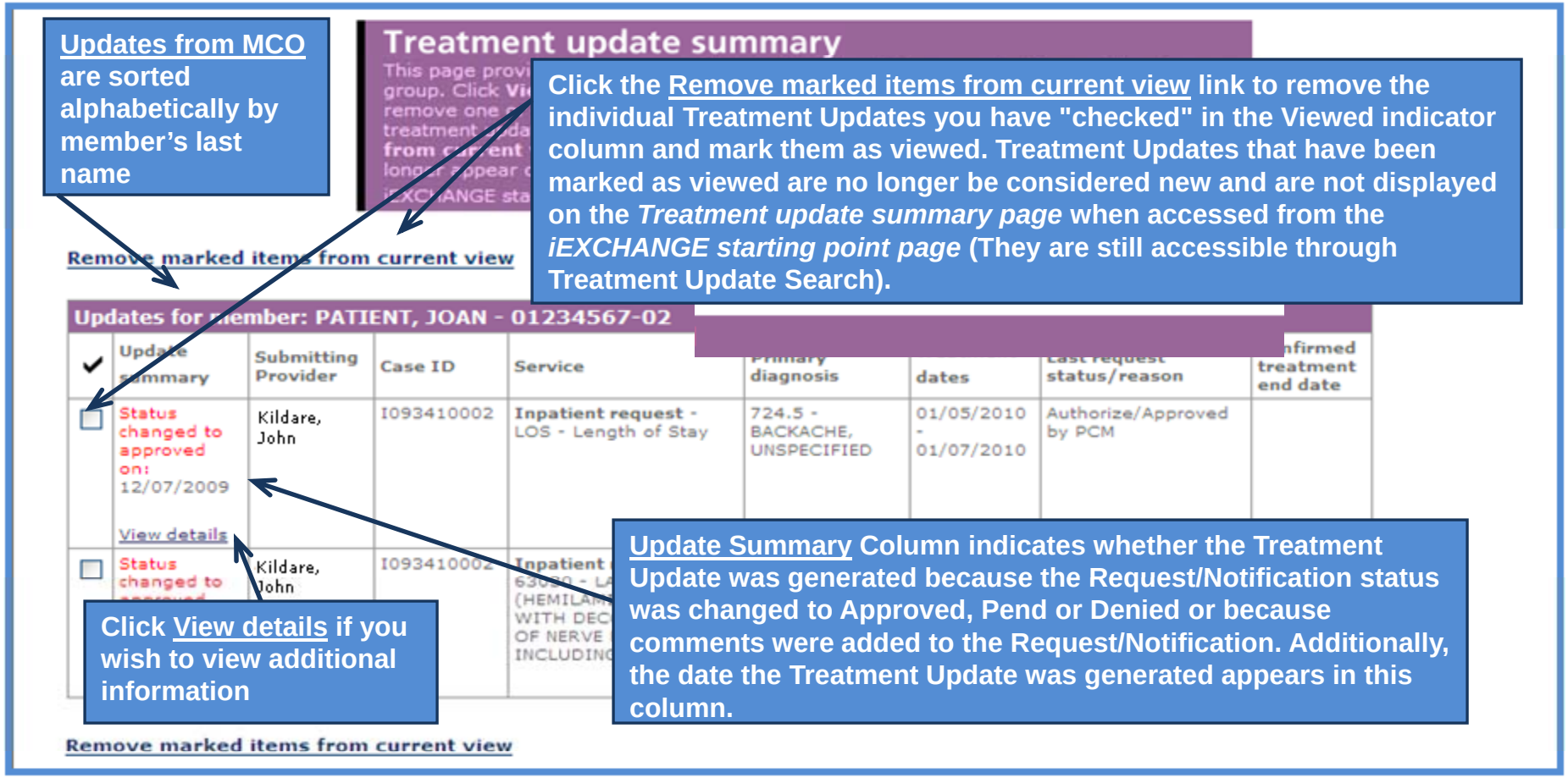


After you have selected a Payer, the Treatment updates notification will appear on the *iEXCHANGE starting point page*.

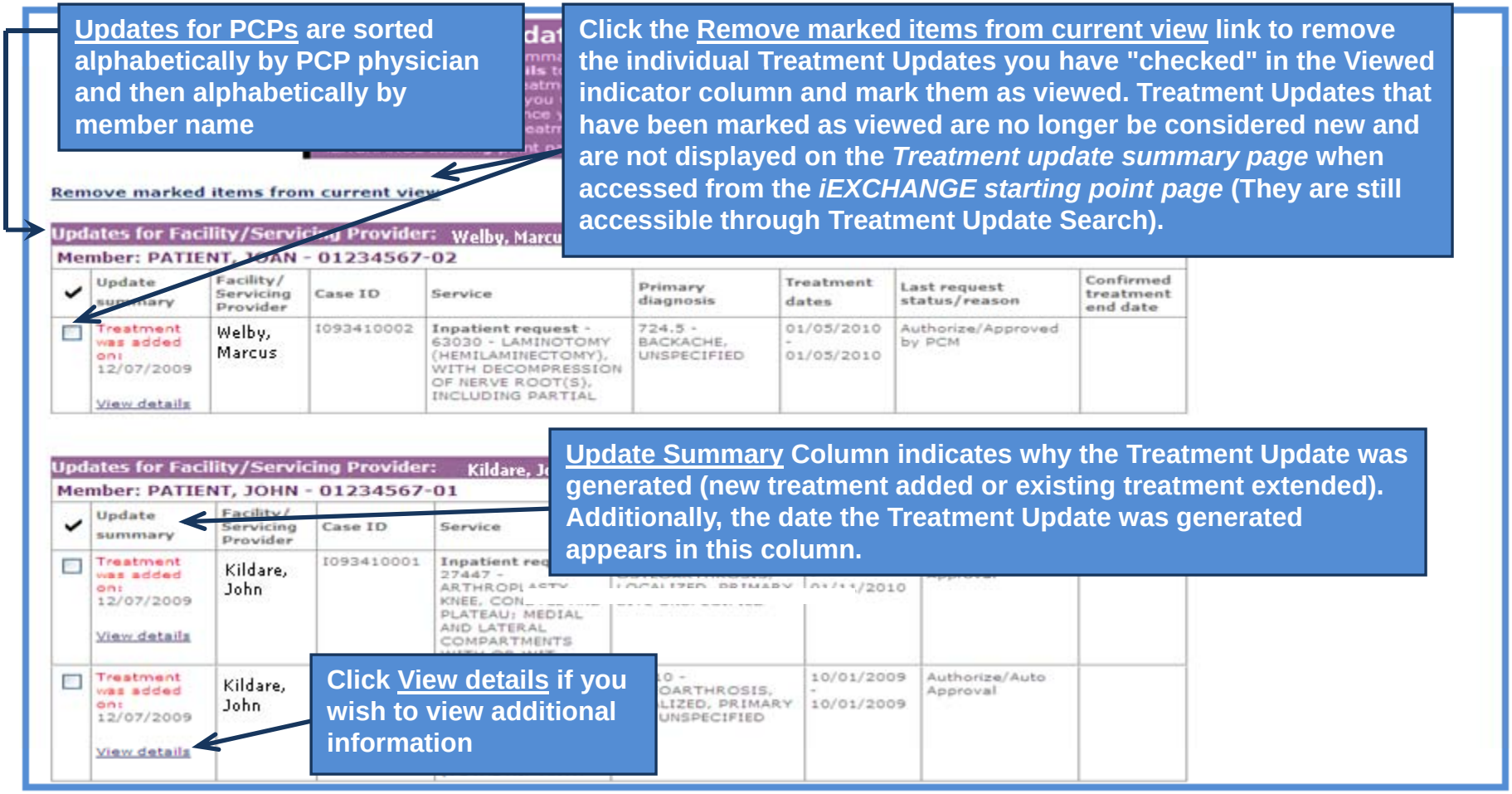
Note: A Treatment Update is considered "new" when:
- the Treatment Update has been generated within the "past 4 days".
- the Treatment Update has not been designated as having been viewed by anyone in your provider group.

If there are no Treatment Updates for your group in a category, you will not receive a link for that category

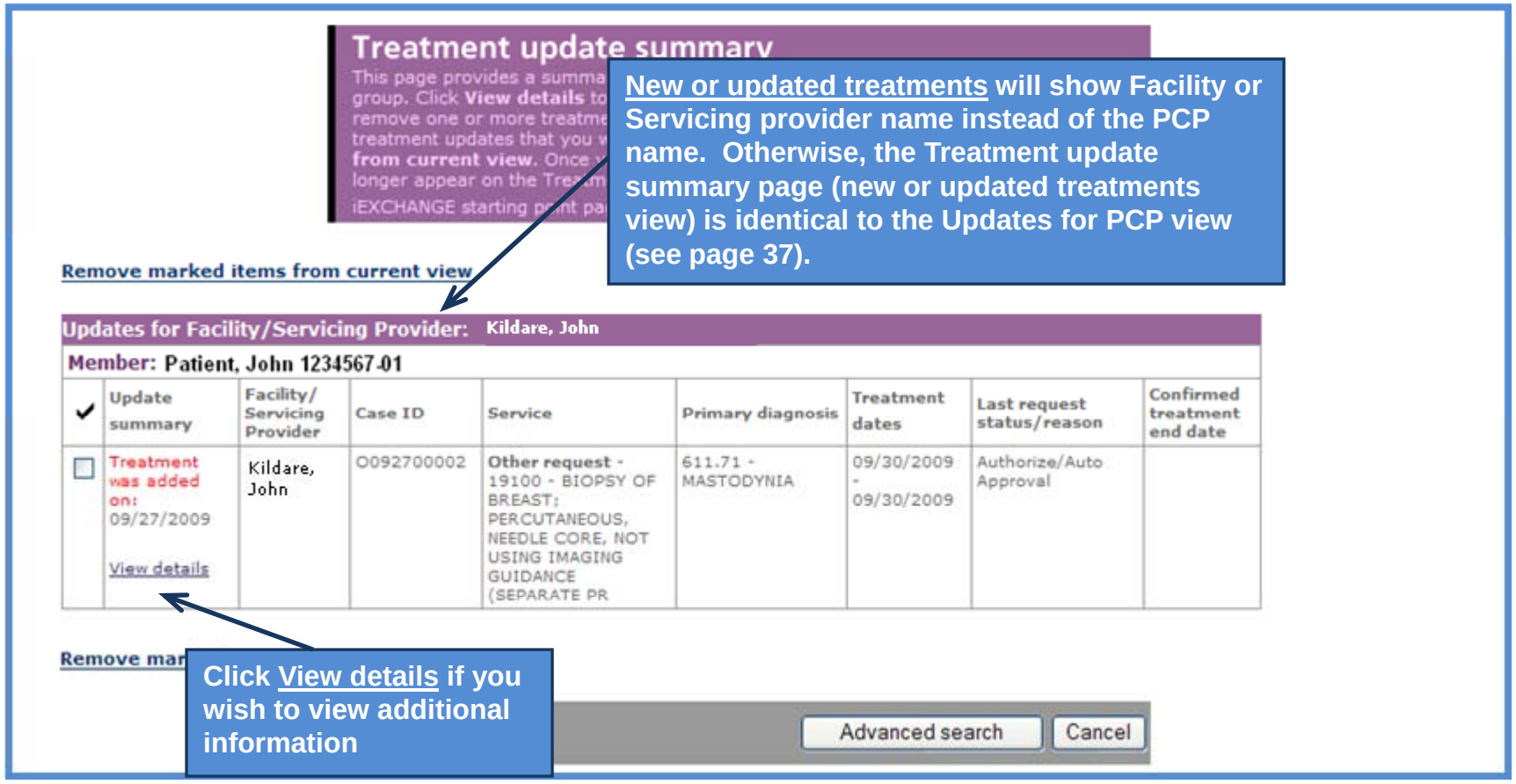
Treatment Updates – View updates from MCO



Treatment Updates – View updates for PCPs



Treatment Updates – View new or updated treatments



Treatment Updates – View details

The *Treatment update details page* displays a listing of all Treatment Updates that have been generated for the case at the top of the page. The rest of the information presented on the page provides you with a complete view of all case activity.

Selecting a Treatment Update link will scroll the page to the appropriate section where you can view the updated treatment information.

Treatment update search

Use the Treatment Update Search functionality to search for and display Treatment Updates for your group. The Treatment Update Search will return all Treatment Updates matching the search criteria you specify including those that have been marked as viewed.

When you perform a Treatment Update Search and access the *Treatment update summary* or *Treatment update details page*, you will not have the ability to mark the Treatment Updates as viewed (remove Treatment Updates from the current view). As a result of this, the following differences should be noted:

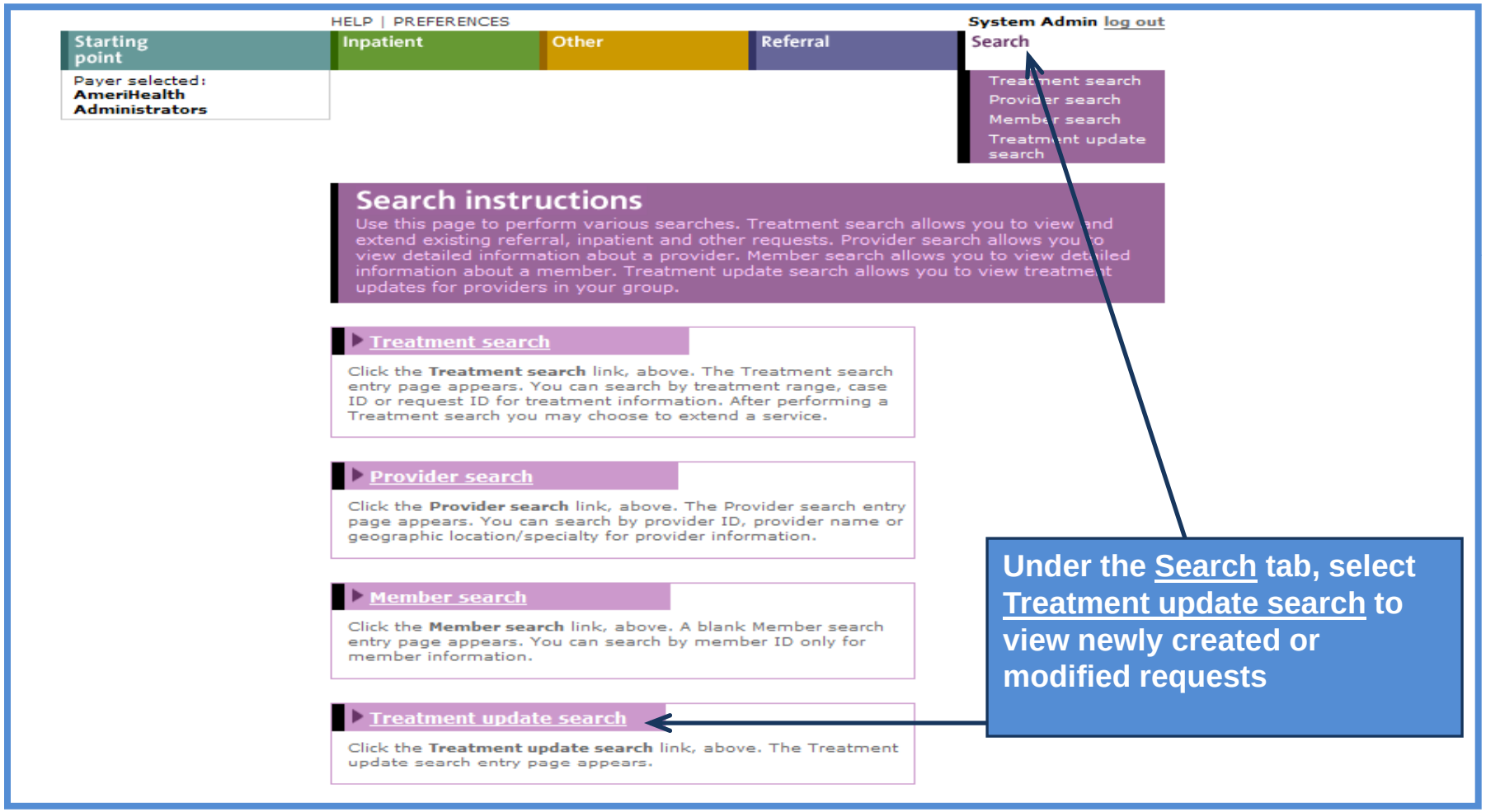
Treatment Update Summary Page

The Viewed indicator column and the “Remove marked items from current view” link do not appear when the *Treatment update summary page* is accessed through Treatment Update Search.

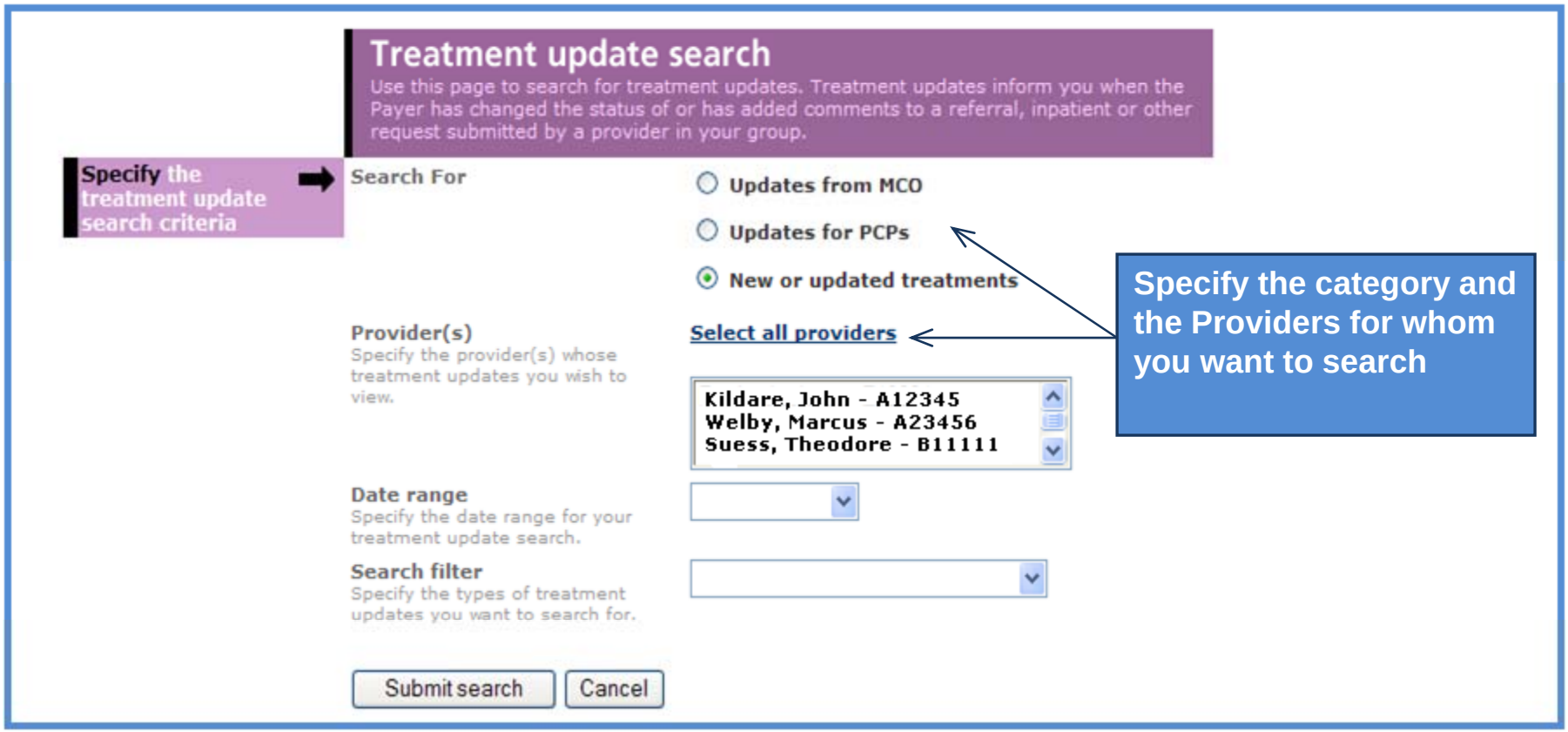
Treatment Update Details Page

The Remove all treatment updates from current view link does not appear when the *Treatment update details page* is accessed through Treatment Update Search.

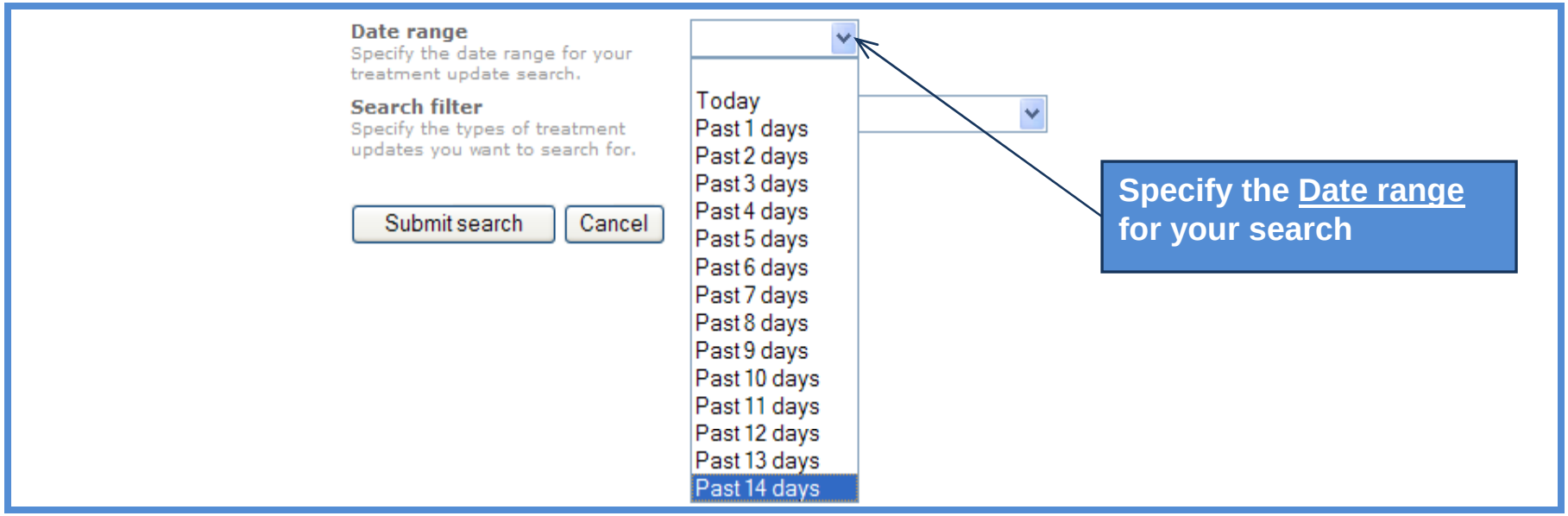
Treatment update search

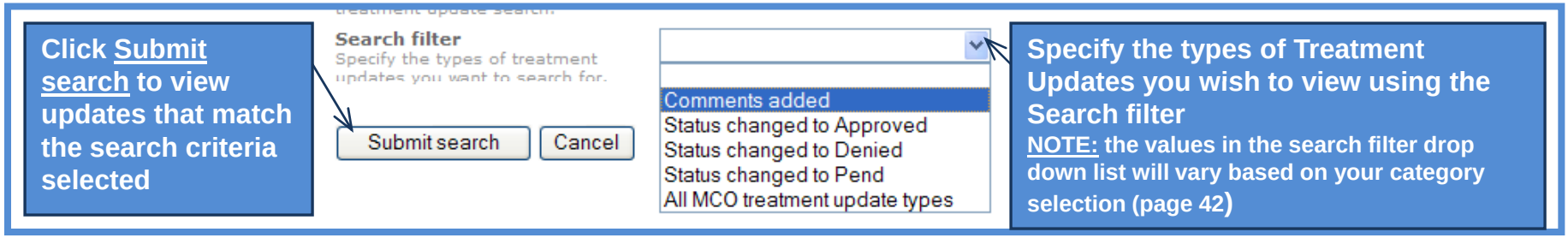


Treatment update search

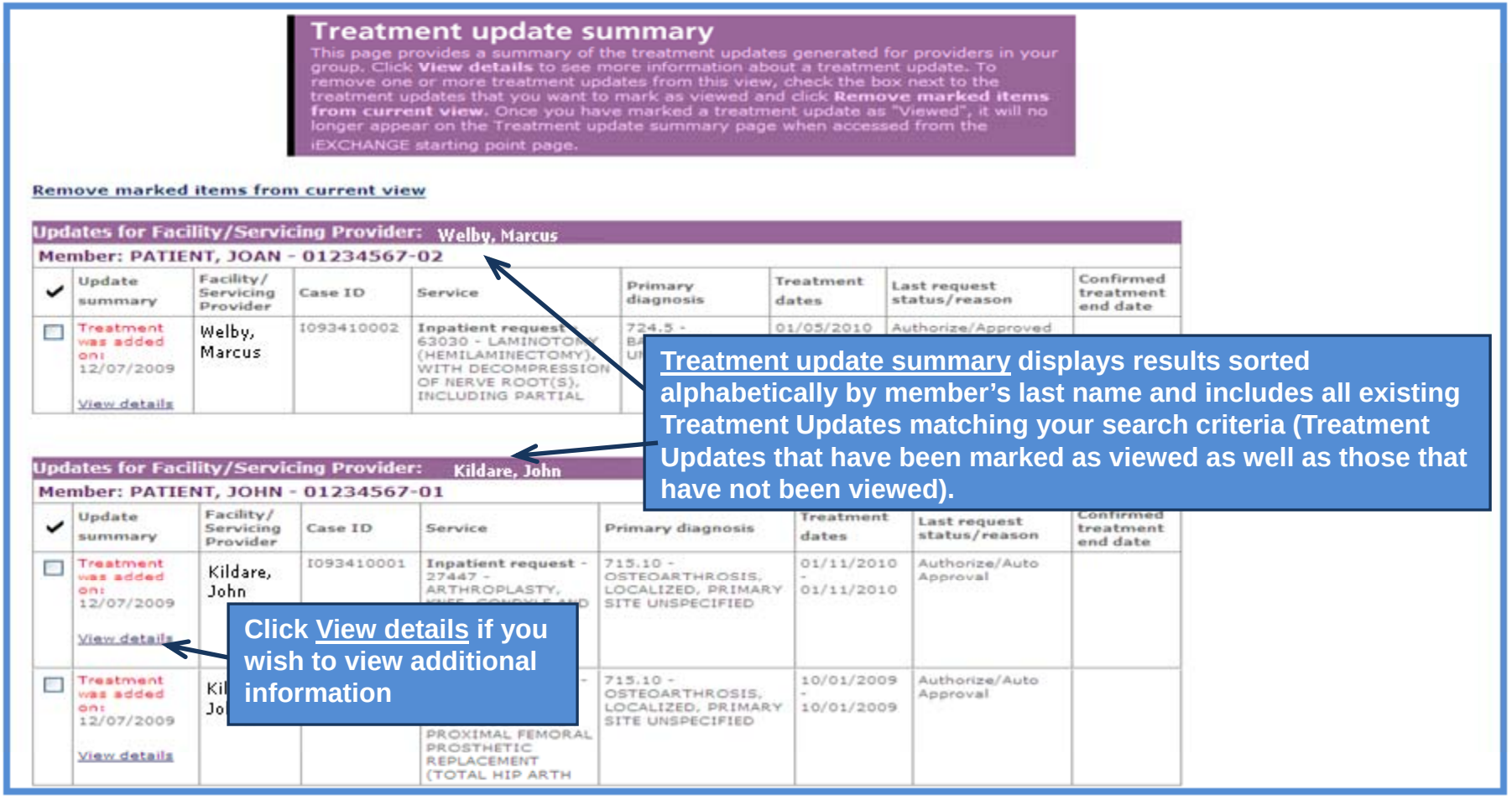


Treatment update search

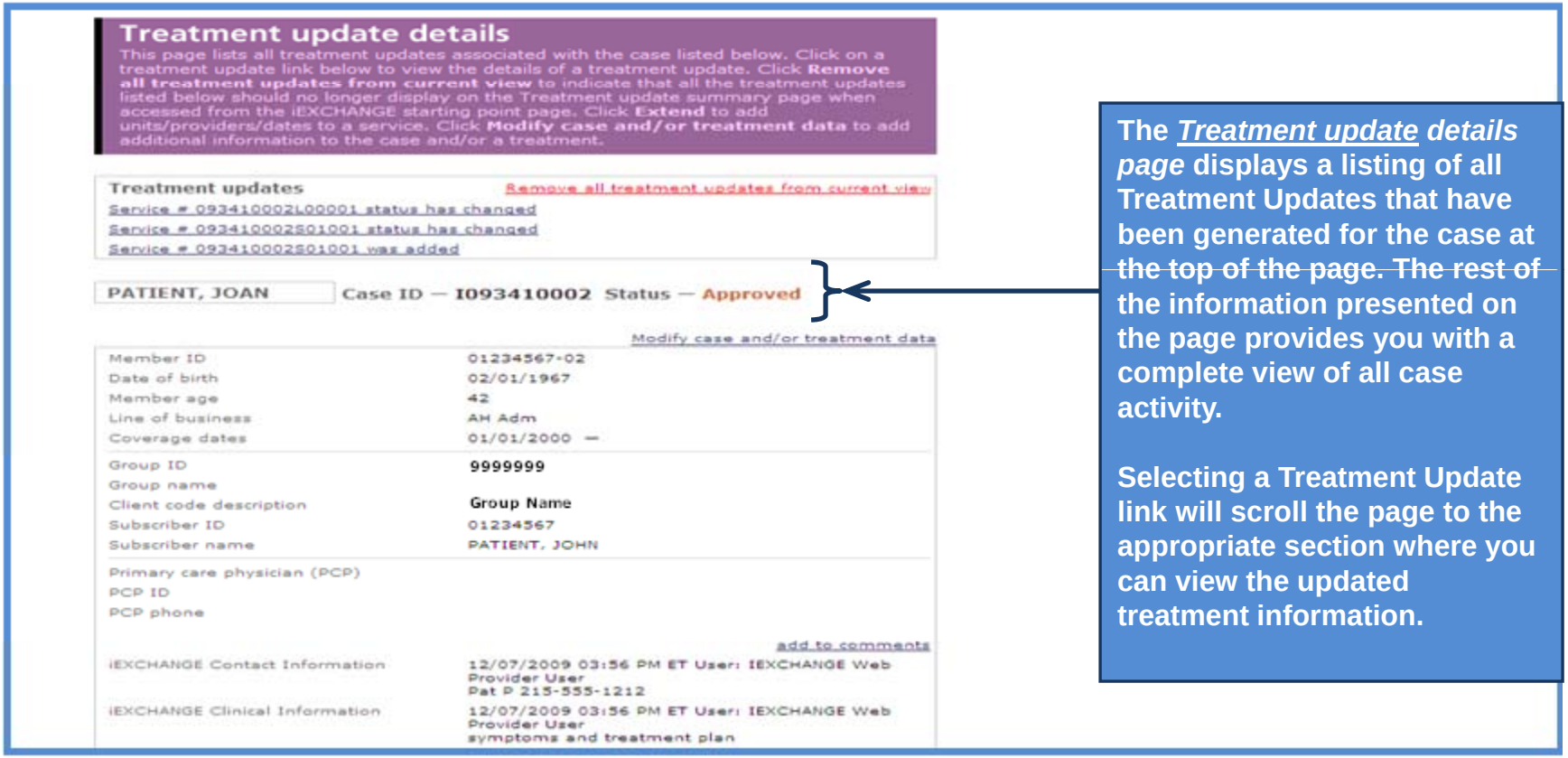




Treatment update search



Treatment update search



The *Treatment update details page* displays a listing of all Treatment Updates that have been generated for the case at the top of the page. The rest of the information presented on the page provides you with a complete view of all case activity.

Selecting a Treatment Update link will scroll the page to the appropriate section where you can view the updated treatment information.

Treatment search

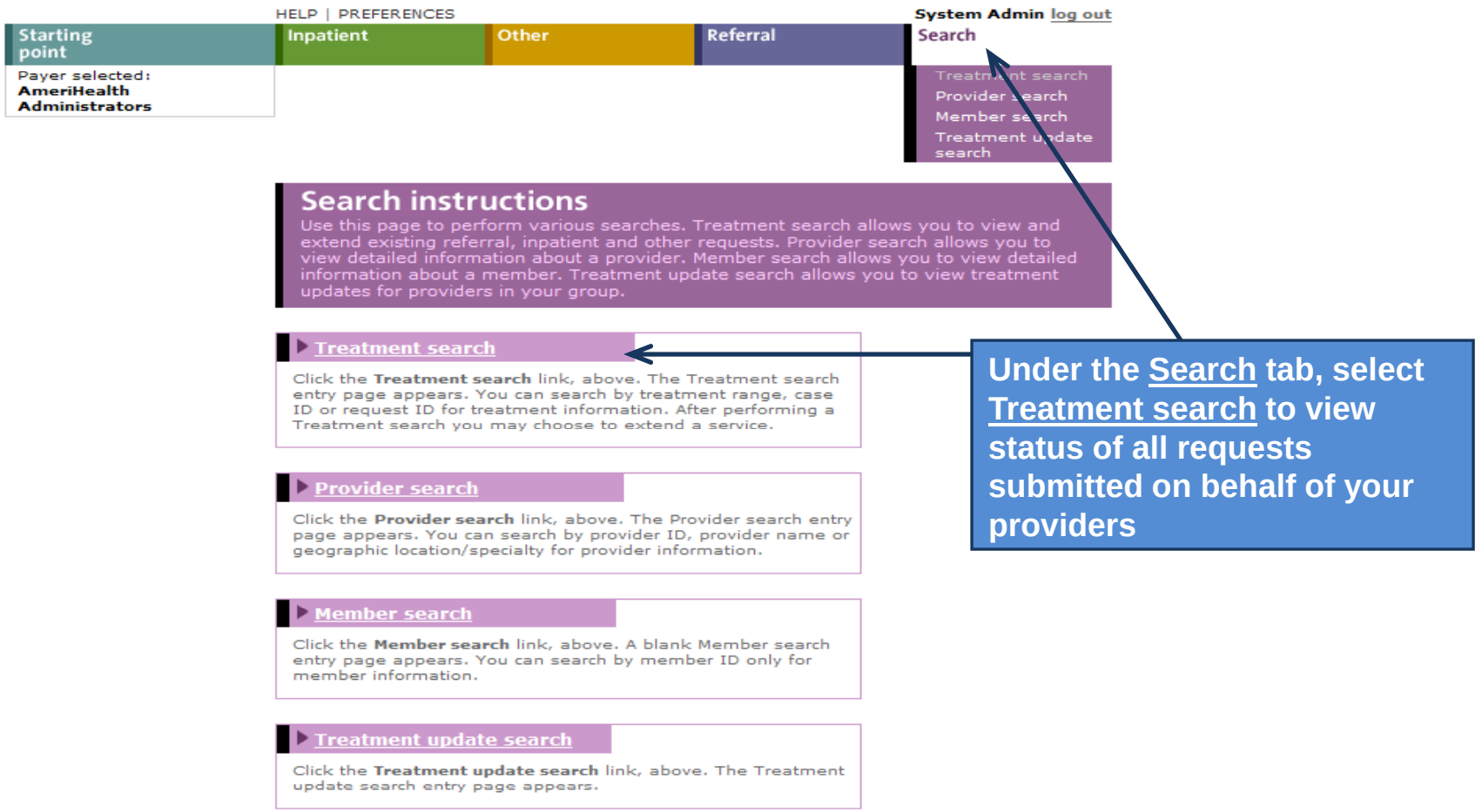
Allows you to search and view all requests submitted:

Date range
For a specific member
For a specific case or service: Case ID or Case Reference # search

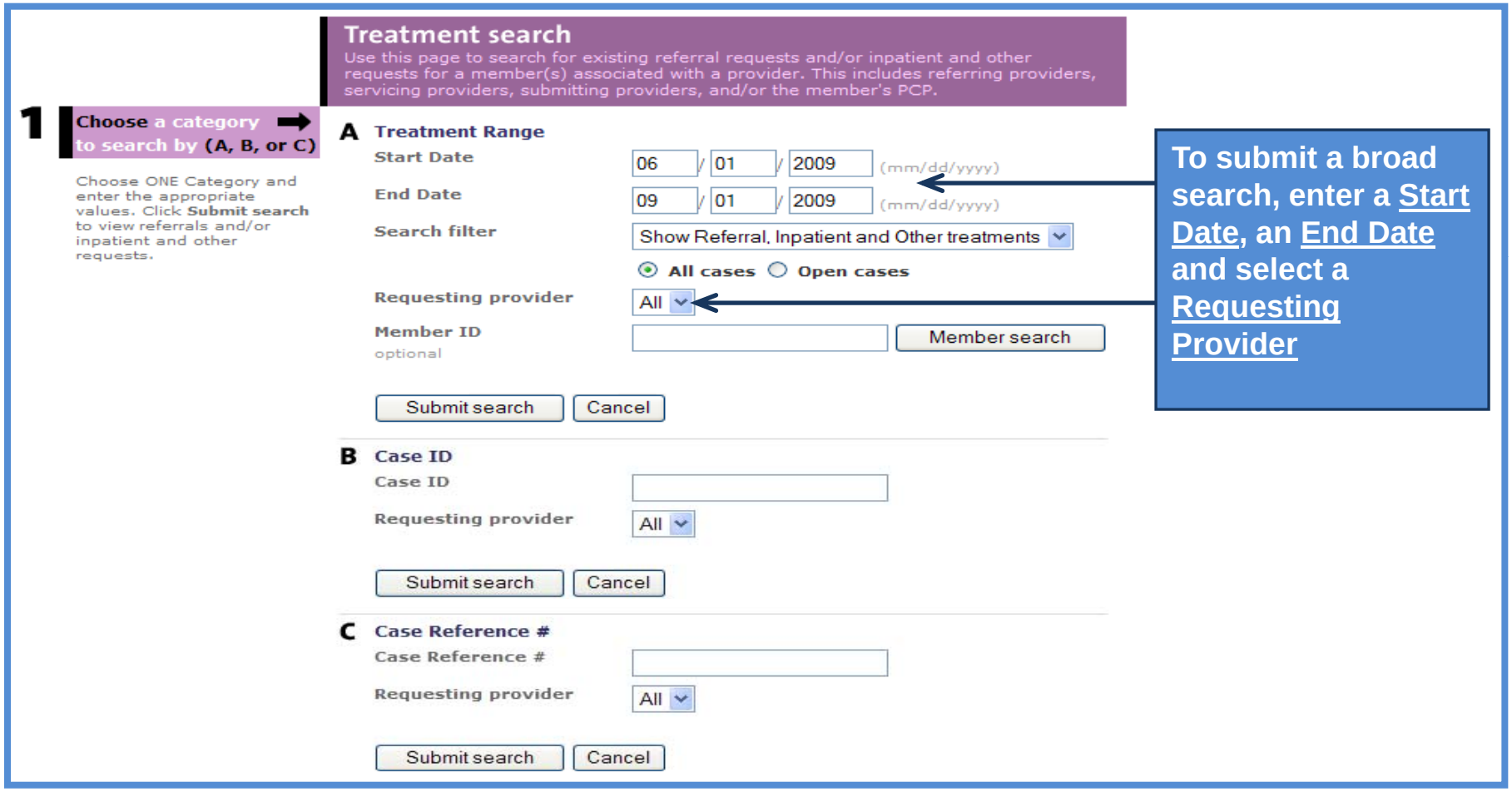
Use this to view an updated status, comments from AHA and respond to the AHA's comments

Displays all Inpatient and/or Outpatient (Other) treatments for a member associated with a provider. This includes Referring Providers, Servicing Providers, Submitting Providers, and/or the member's PCP.

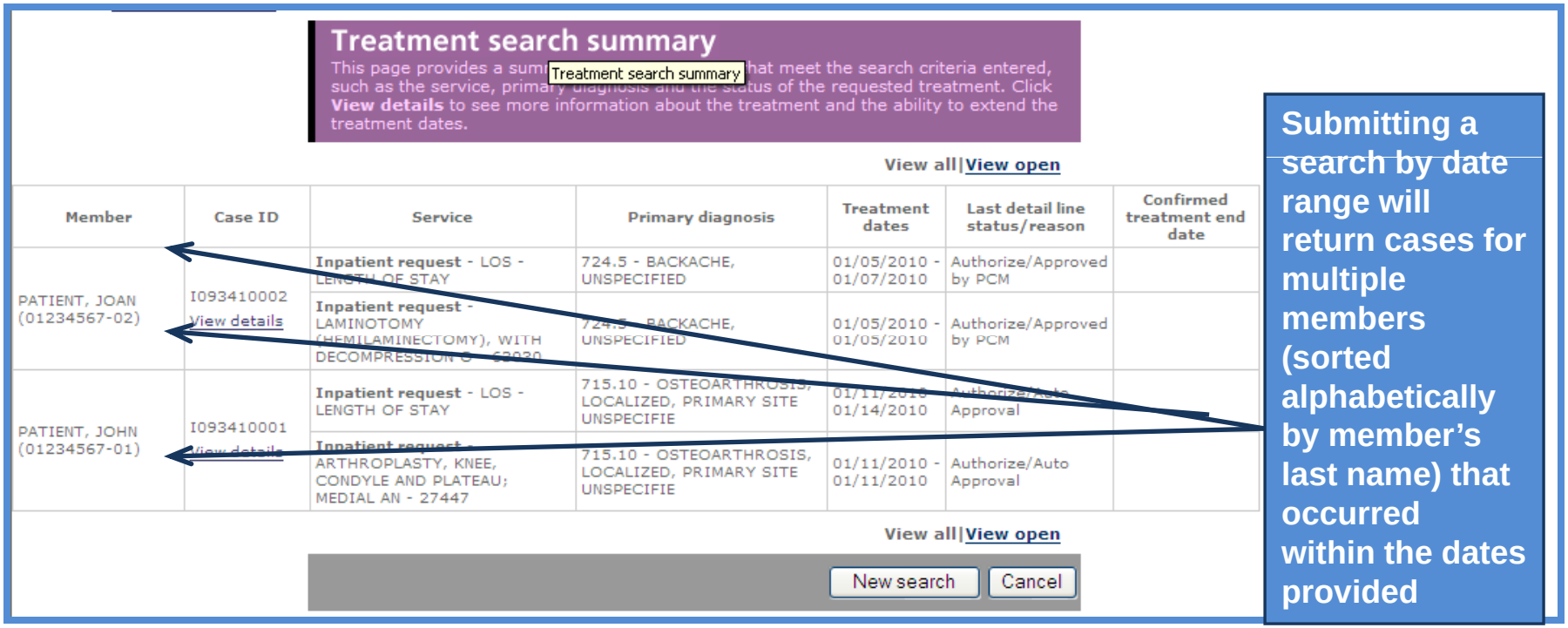
Treatment search



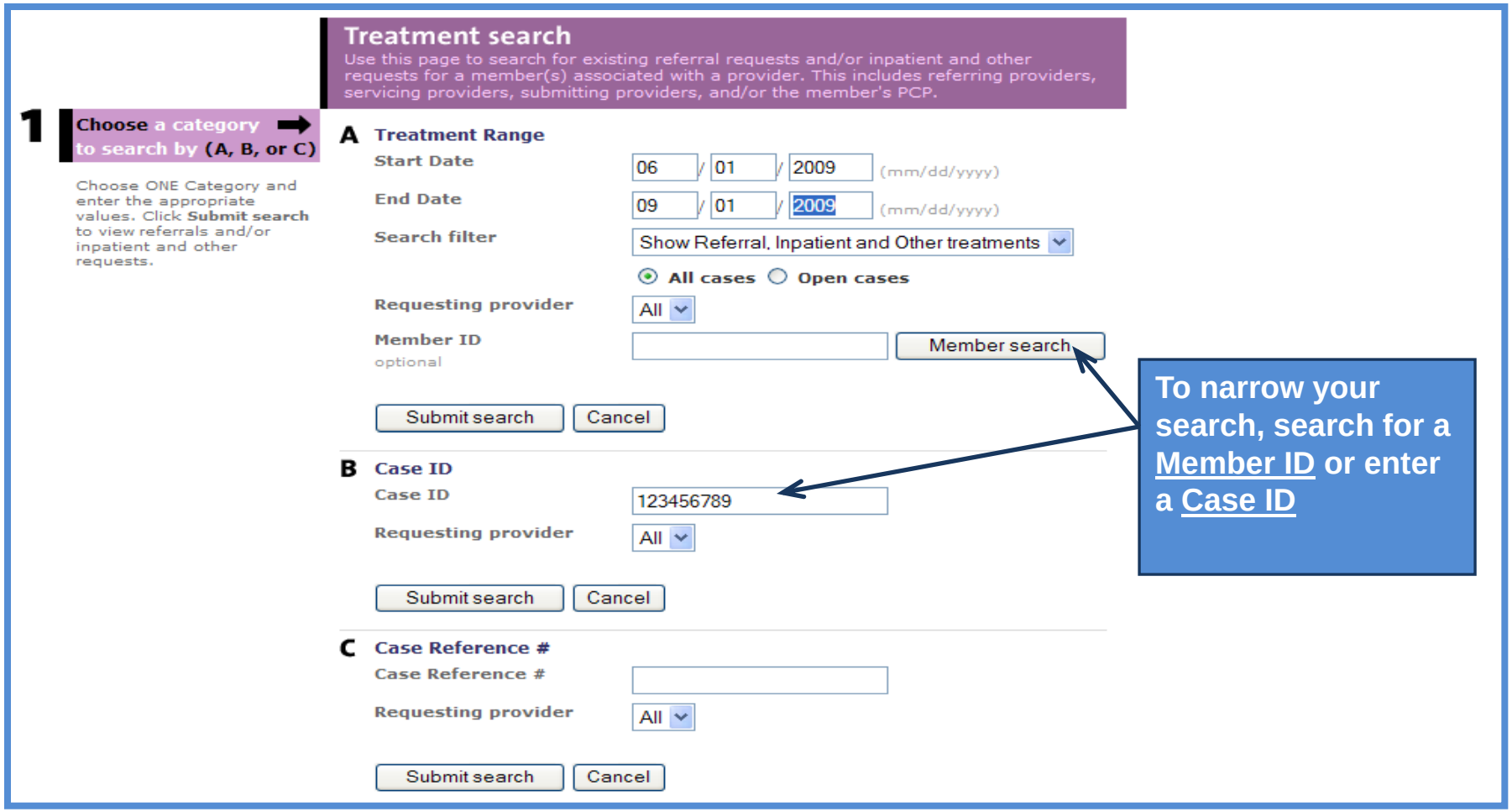
Treatment search – Treatment Range



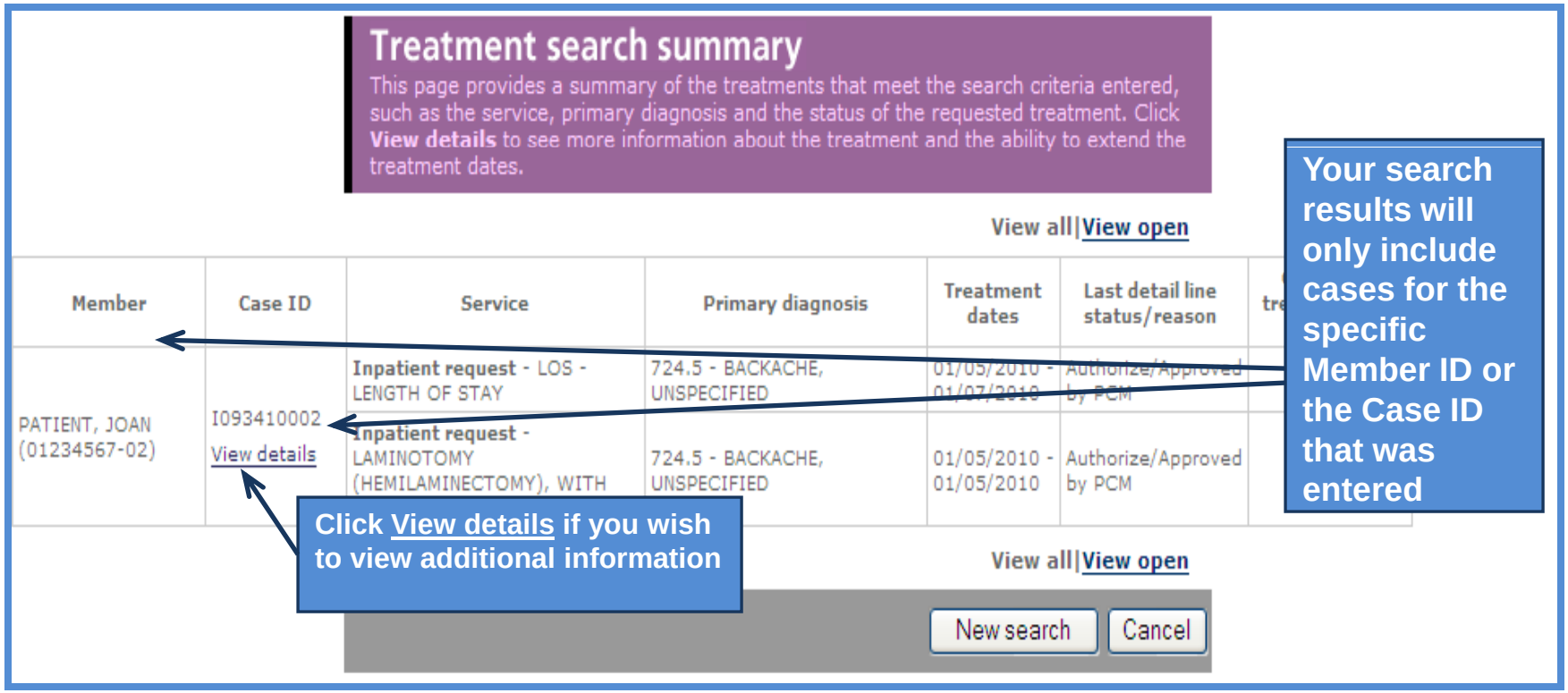
Treatment search – Treatment Range



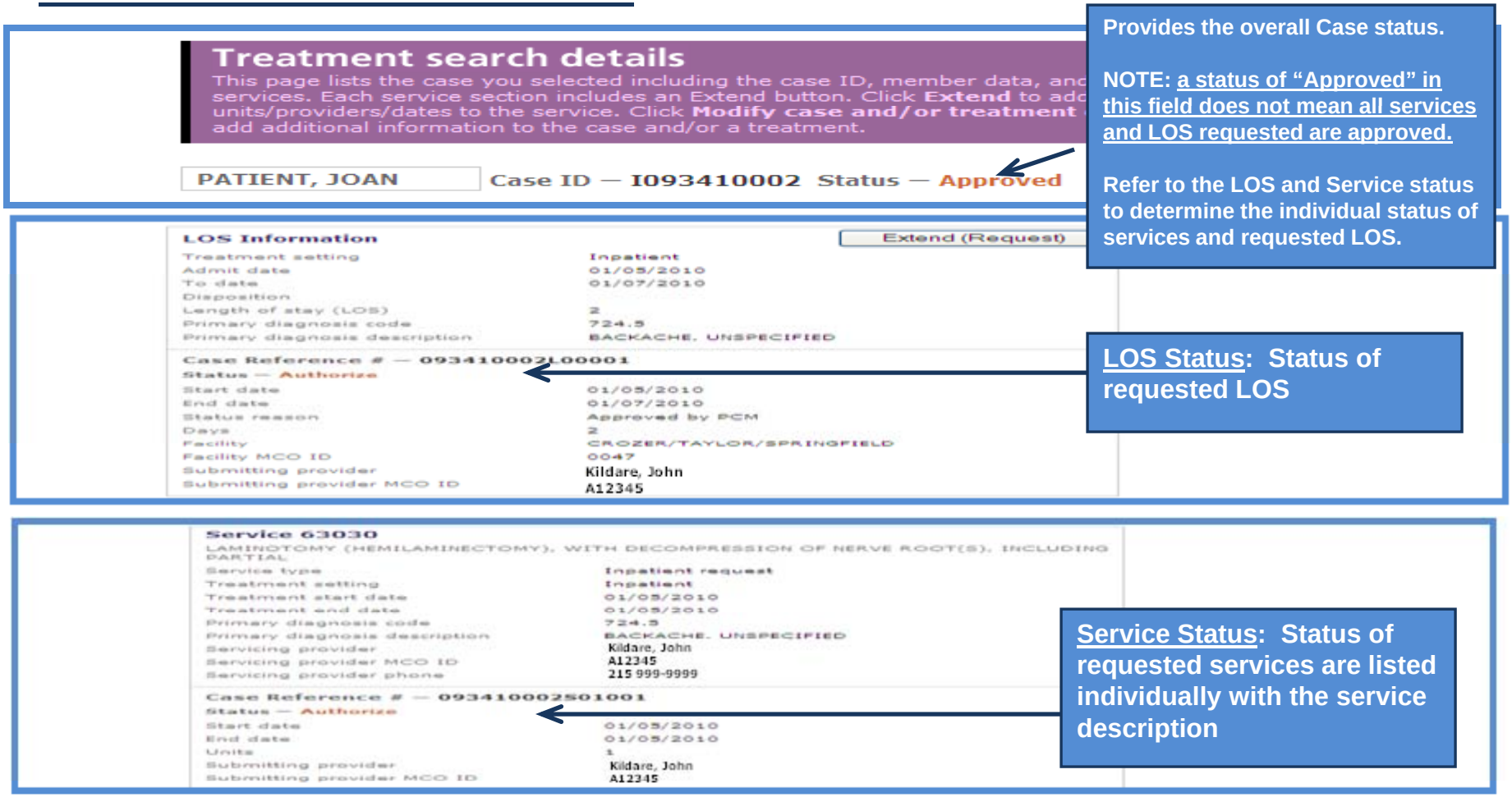
Treatment search – Member ID or Case ID



Treatment search – Member ID or Case ID



Treatment search – View details



Edit Case

Allows you to add additional information to an existing case.

By clicking on **Modify case and/or treatment data** or **Add to comments** from the Treatment Update Details page or the Treatment Search Details page, you may be prompted to enter either Admission or Discharge information or respond to requests from AHA by entering additional comments.

Admission information - You can inform AHA that a patient has been admitted and specify the Admit Date.

Discharge information - You can inform AHA that a patient has been discharged, specify the Discharge Date as well as specify the after-care program / discharge plan for the patient.

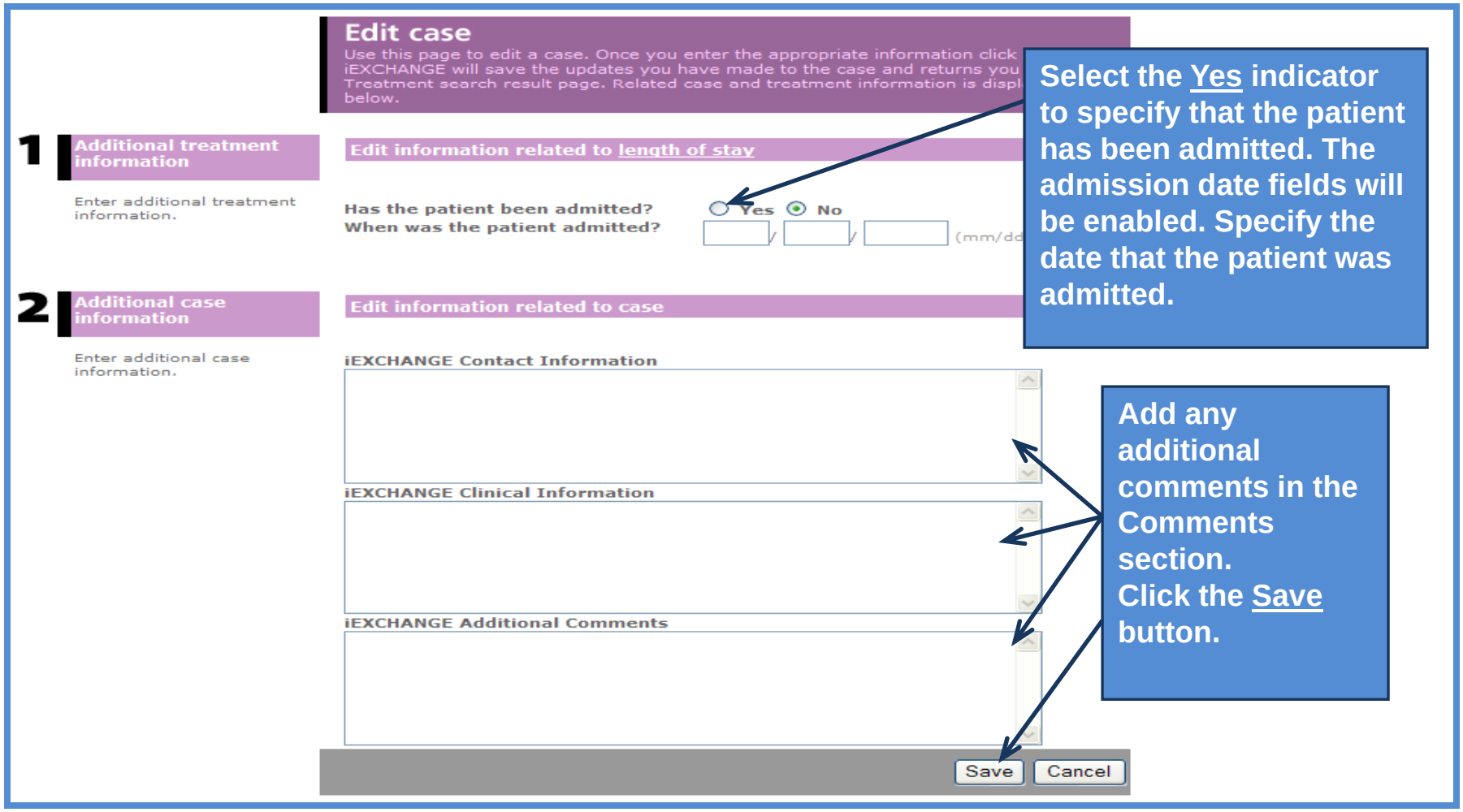
Entering Additional Comments - You can add additional free text comments to an existing case.

Edit Case

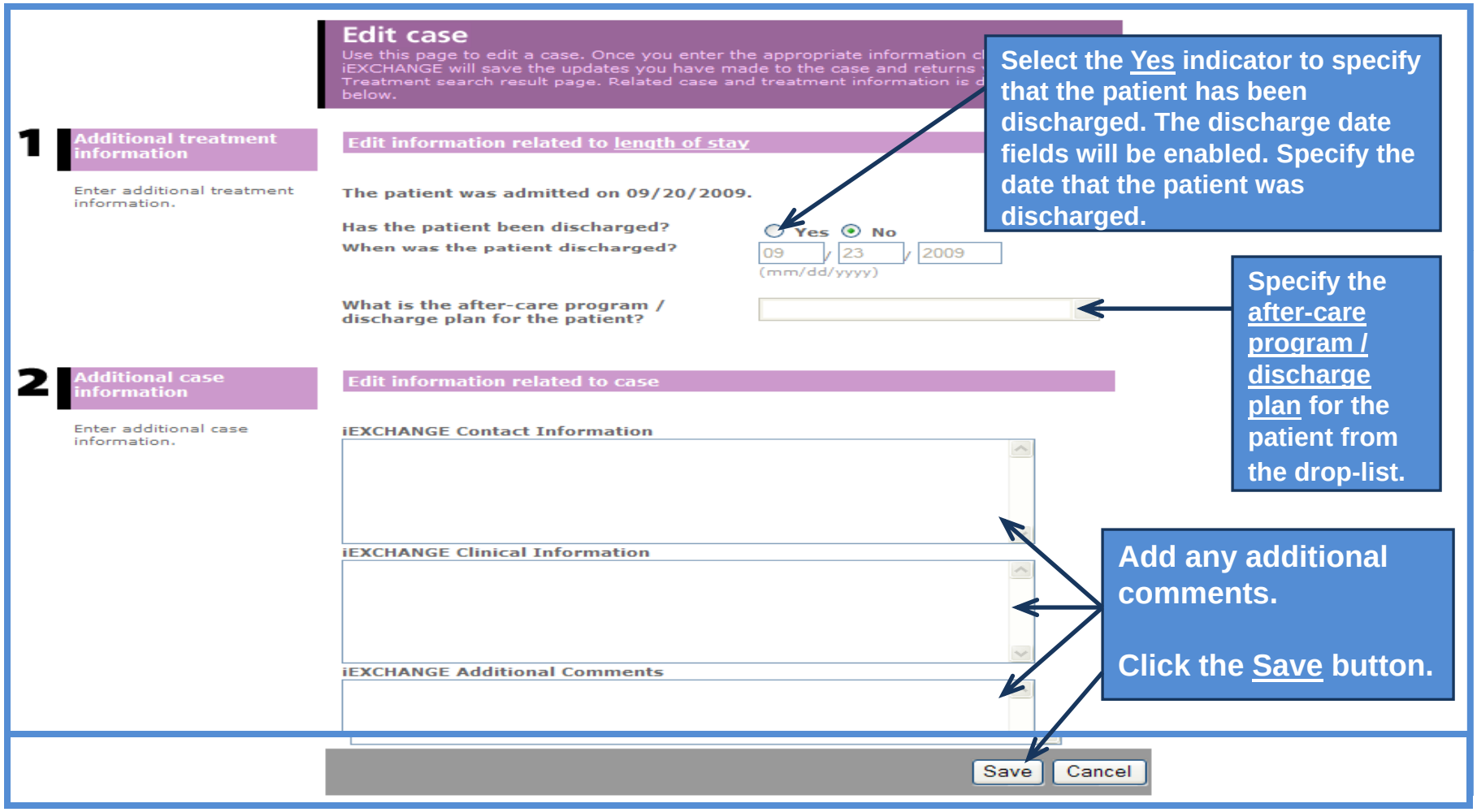
From the Treatment search details or Treatment update details page, select either Modify case and/or treatment data or add to comments to display the Edit Case page

NOTE: These links will not display if: The case you are attempting to edit has been "closed" by AHA.

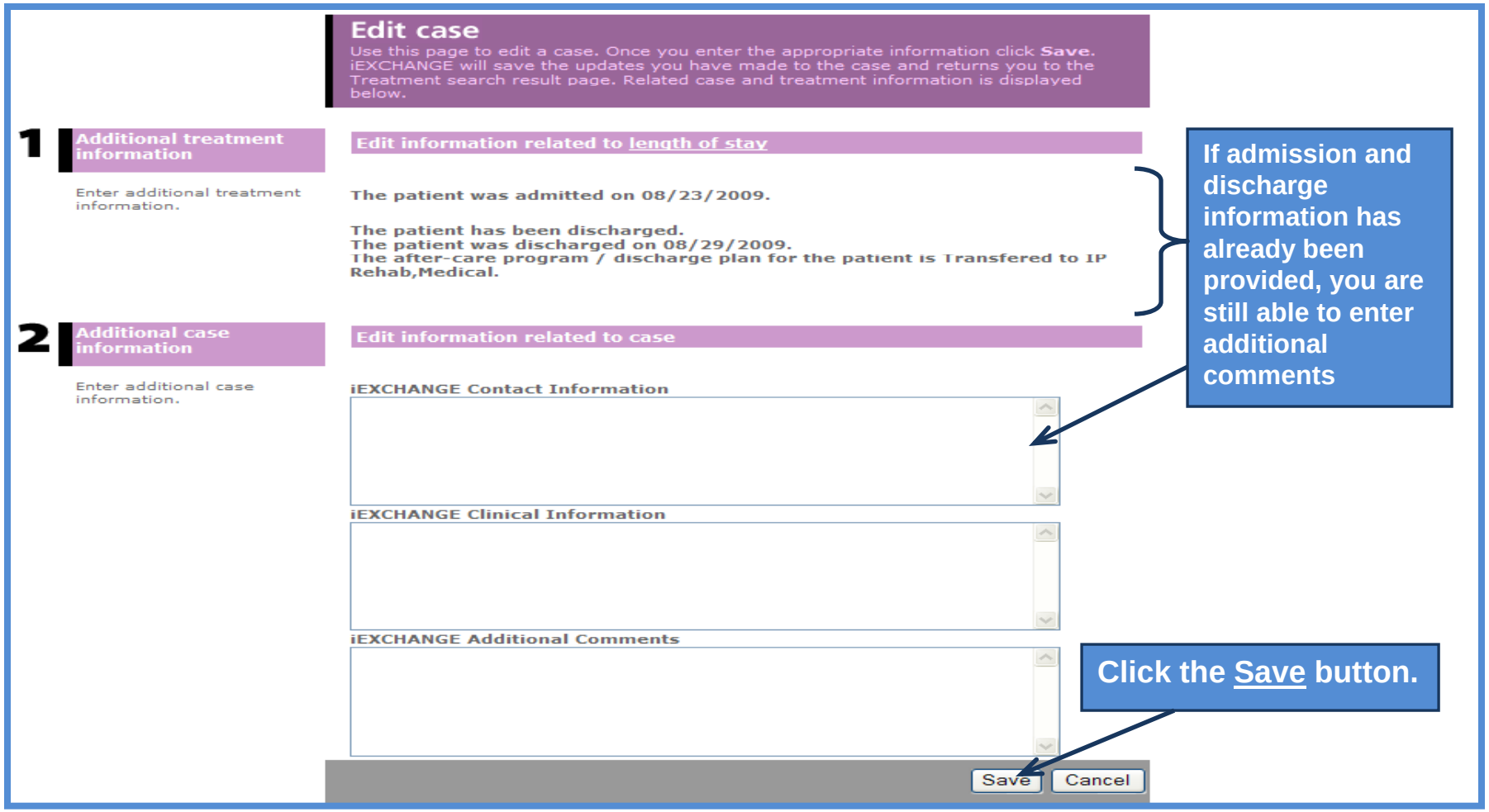
Edit Case – Admission information



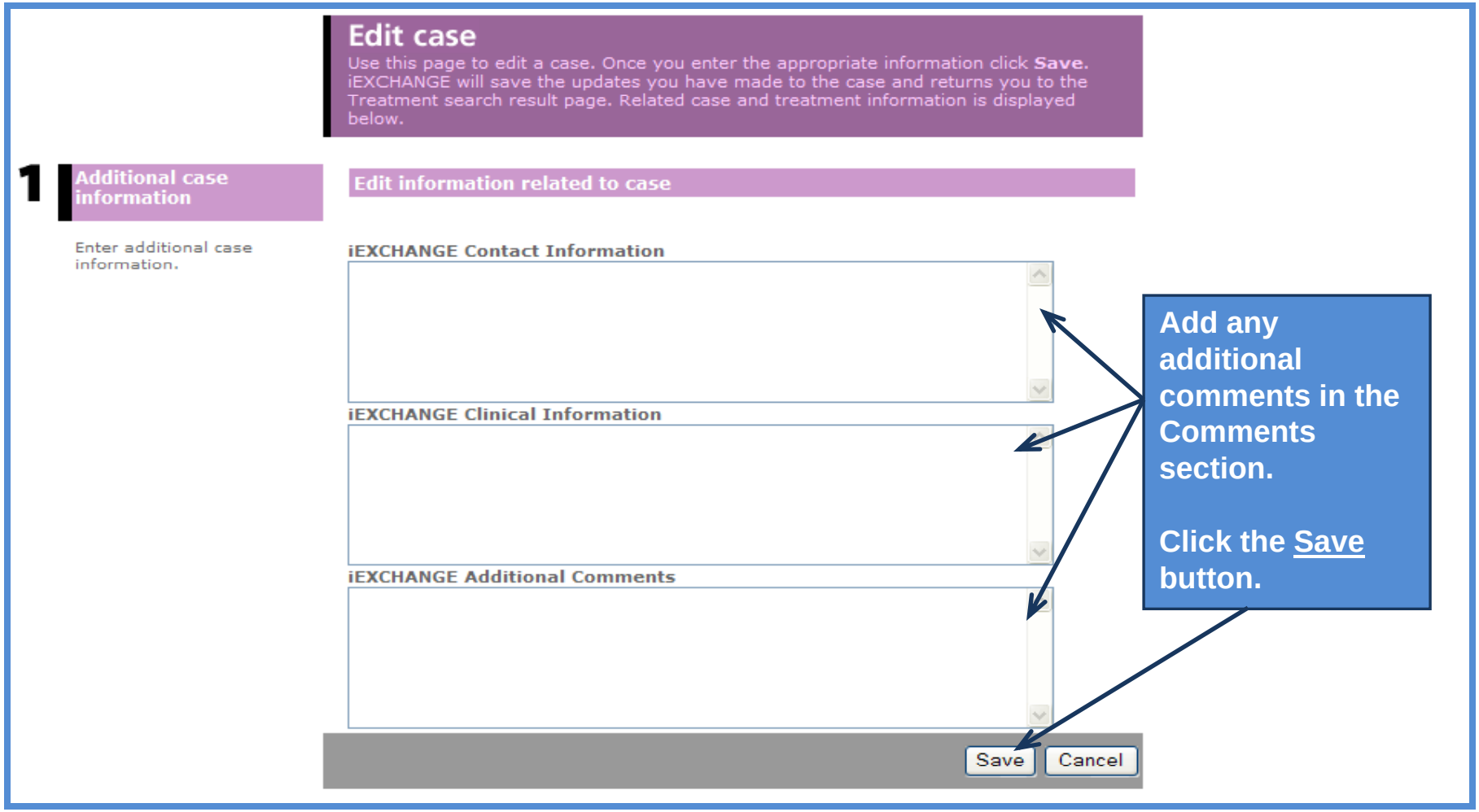
Edit Case – Discharge information



Edit Case – Admission and Discharge already provided



Edit Case – Outpatient (Other) Request



Extension Requests

Allows you to request additional days or services for an existing certification

Extend Inpatient

On the Inpatient Request Entry page, you will be prompted to enter the below information:

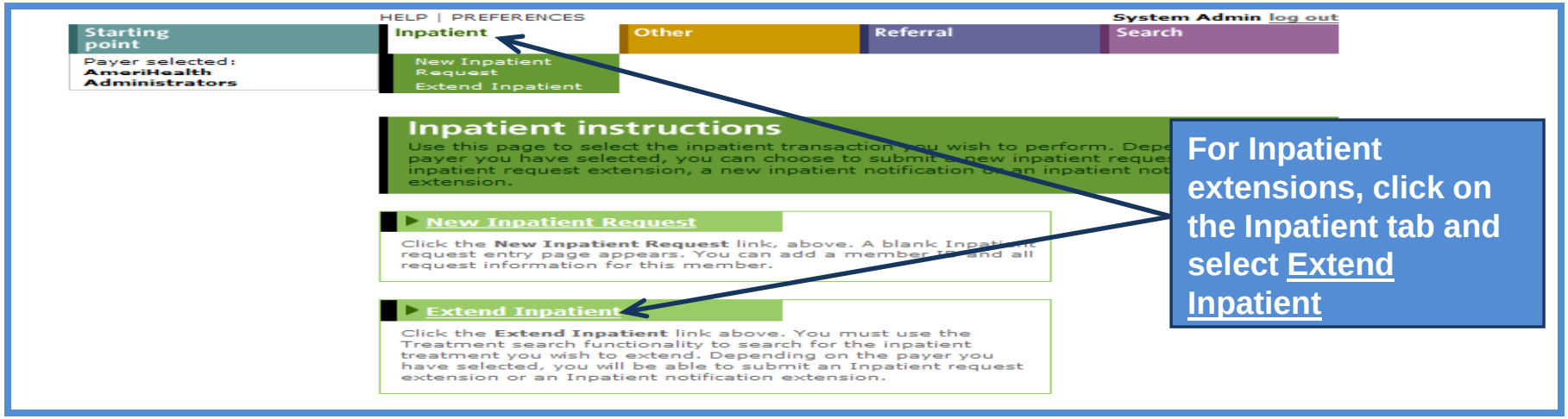
- **Submitting provider**
- **Extension primary diagnosis**
- **Attending physician**
- **Additional requested LOS units**
- **Procedure (Optional)**
- **Scheduled date (Optional)**
- **Comments**

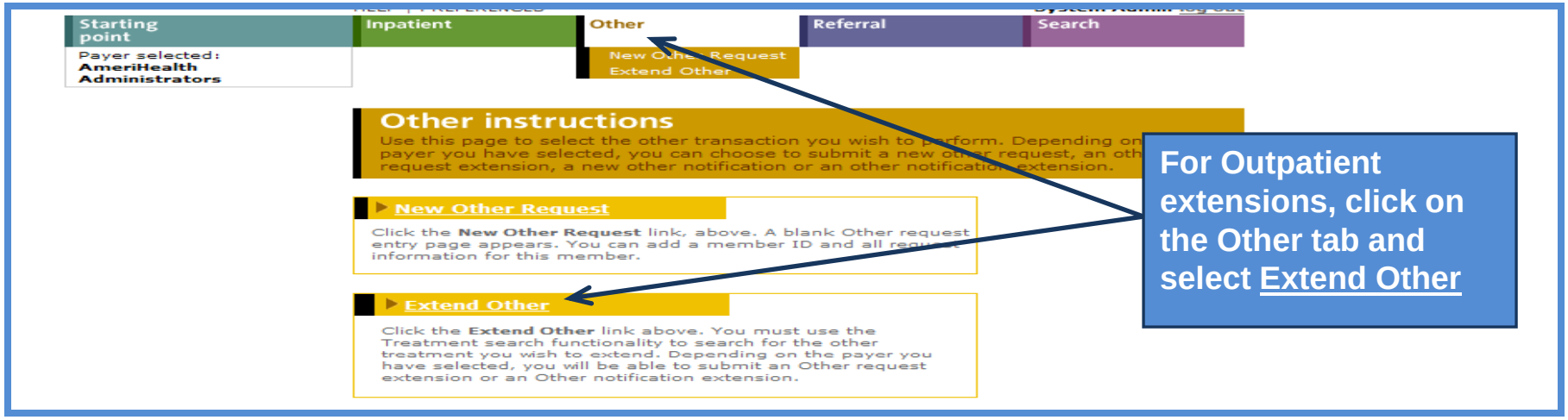
Extend Other (Outpatient)

On the Other Request Entry page, you will be prompted to enter the below information:

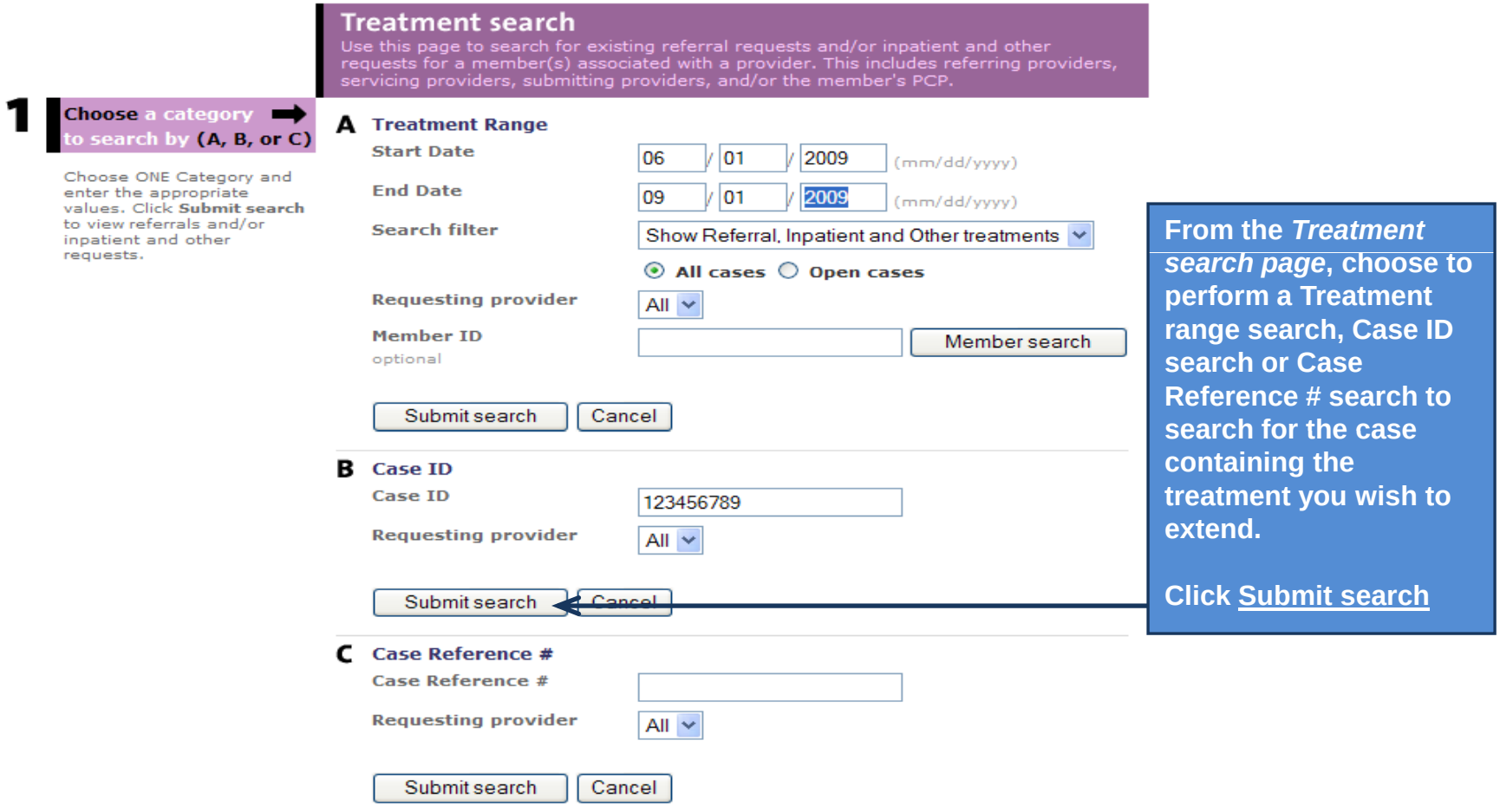
- **Submitting provider**
- **Extension primary diagnosis**
- **Additional requested units**
- **Extension start date**
- **Extension end date**
- **Comments**

Extension Requests – Starting Point

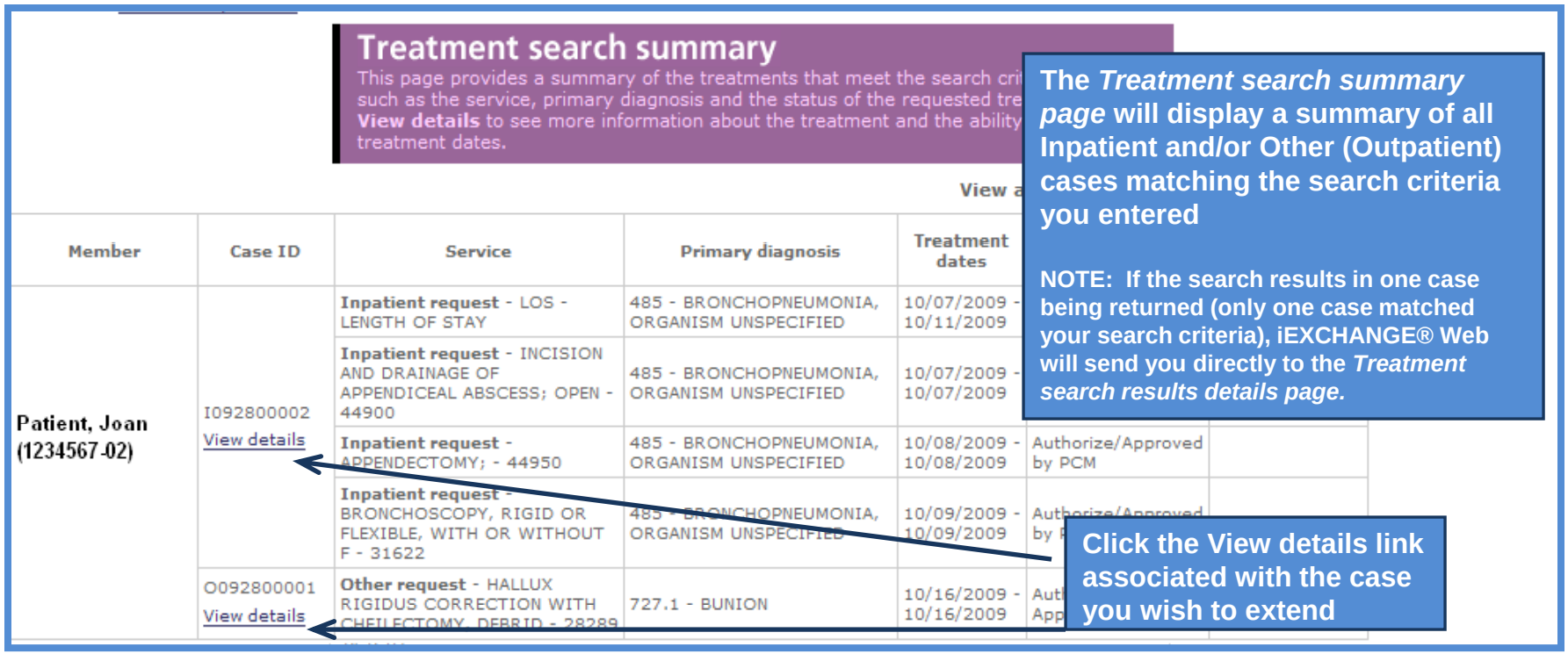




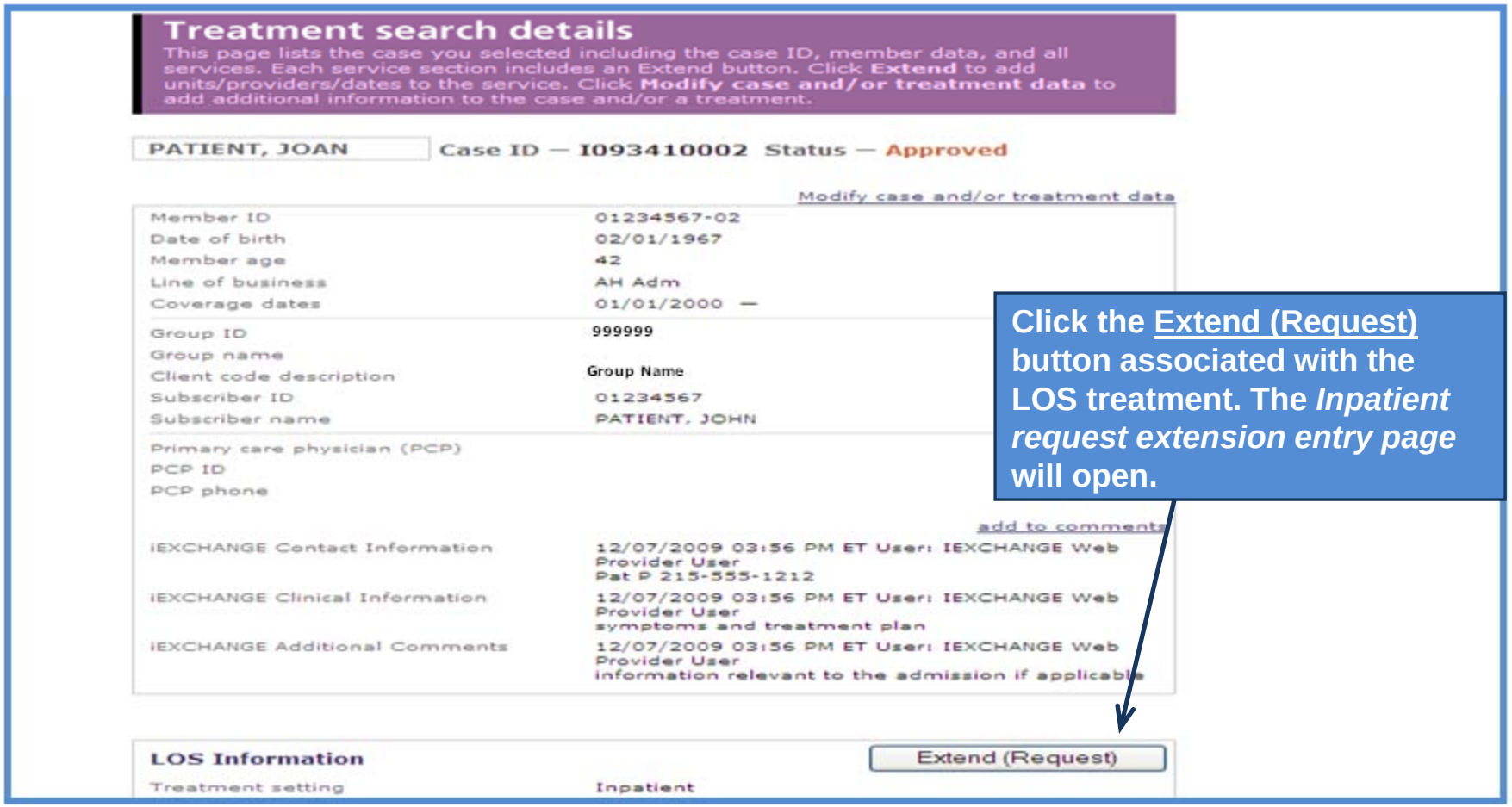
Extension Requests



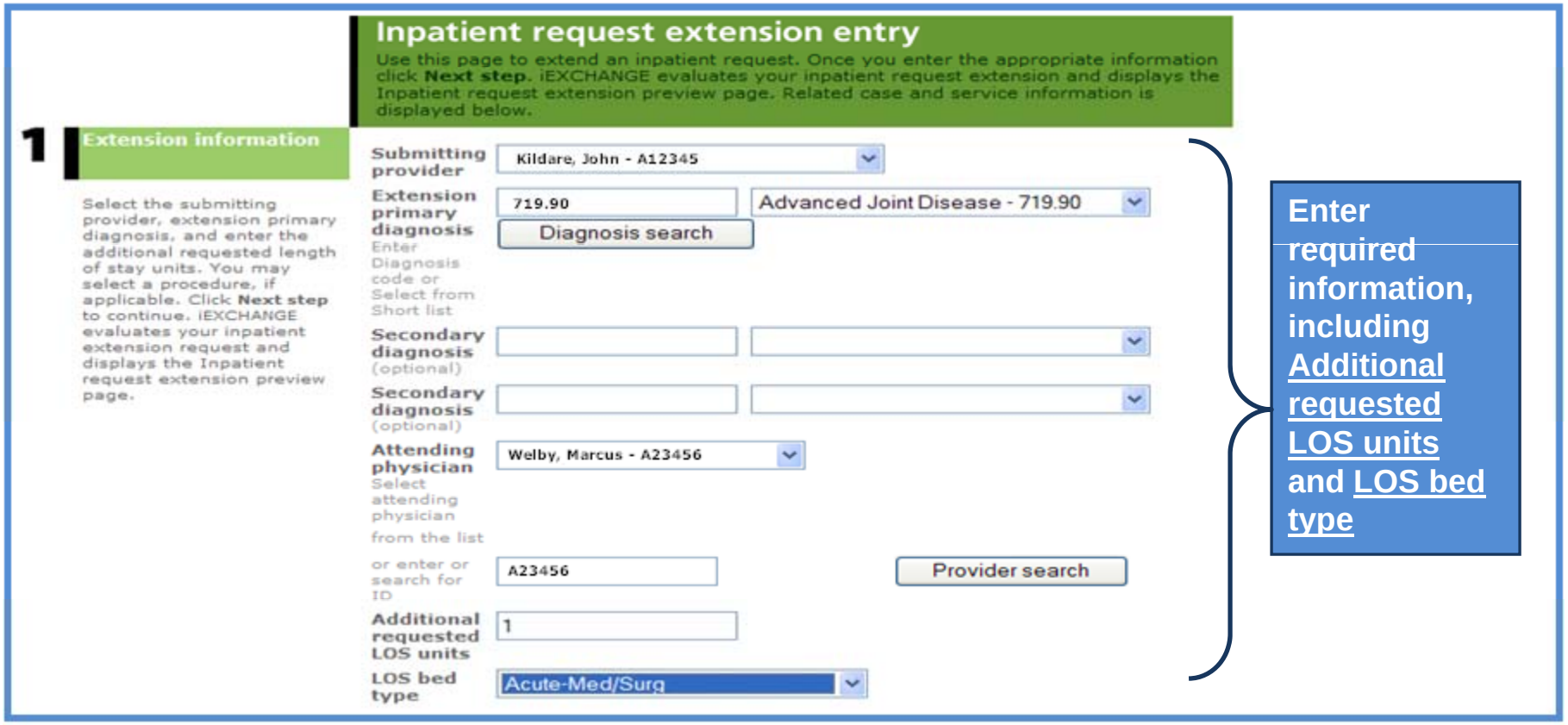
Extension Requests



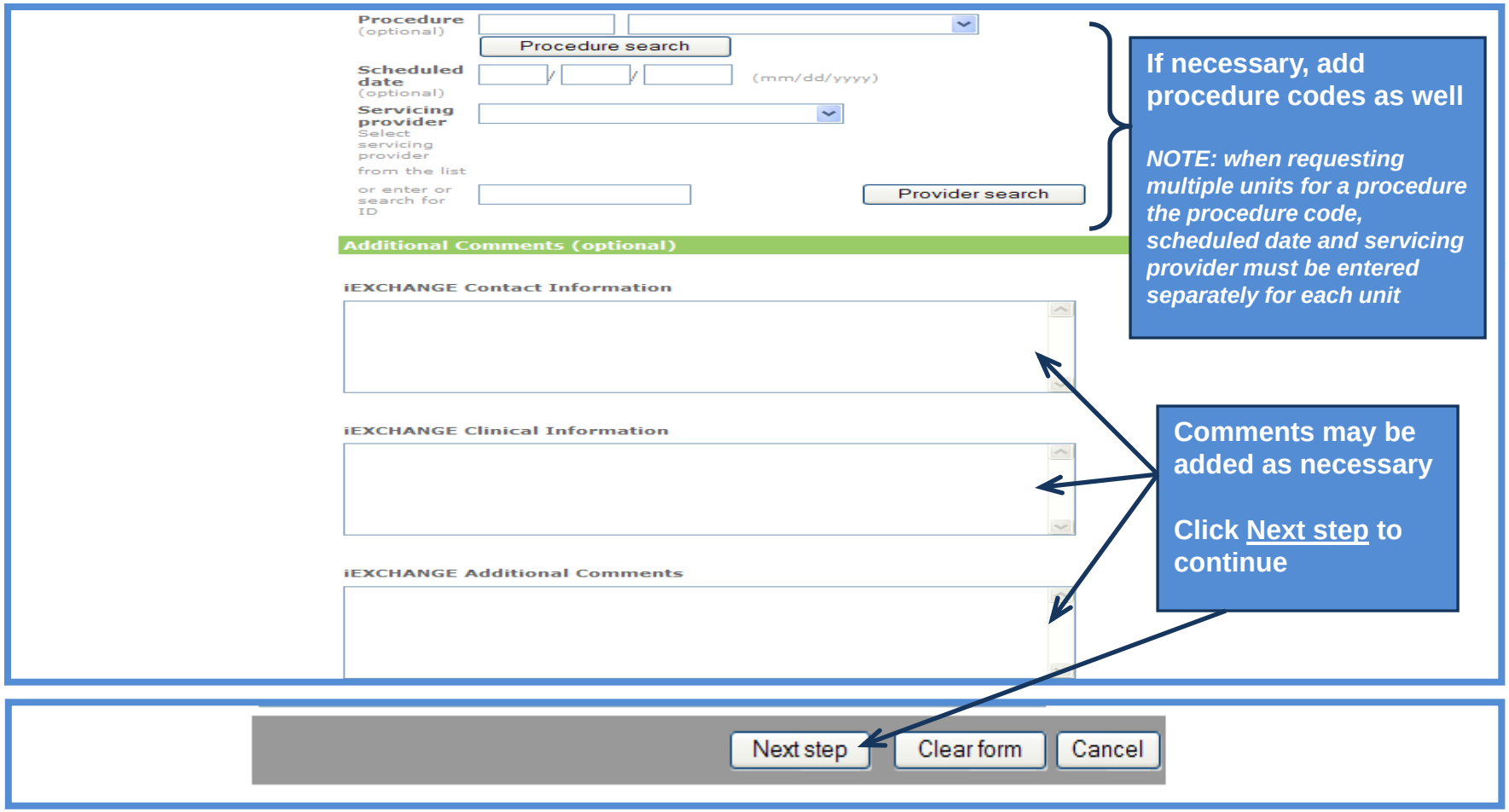
Extension Requests – Extend Inpatient



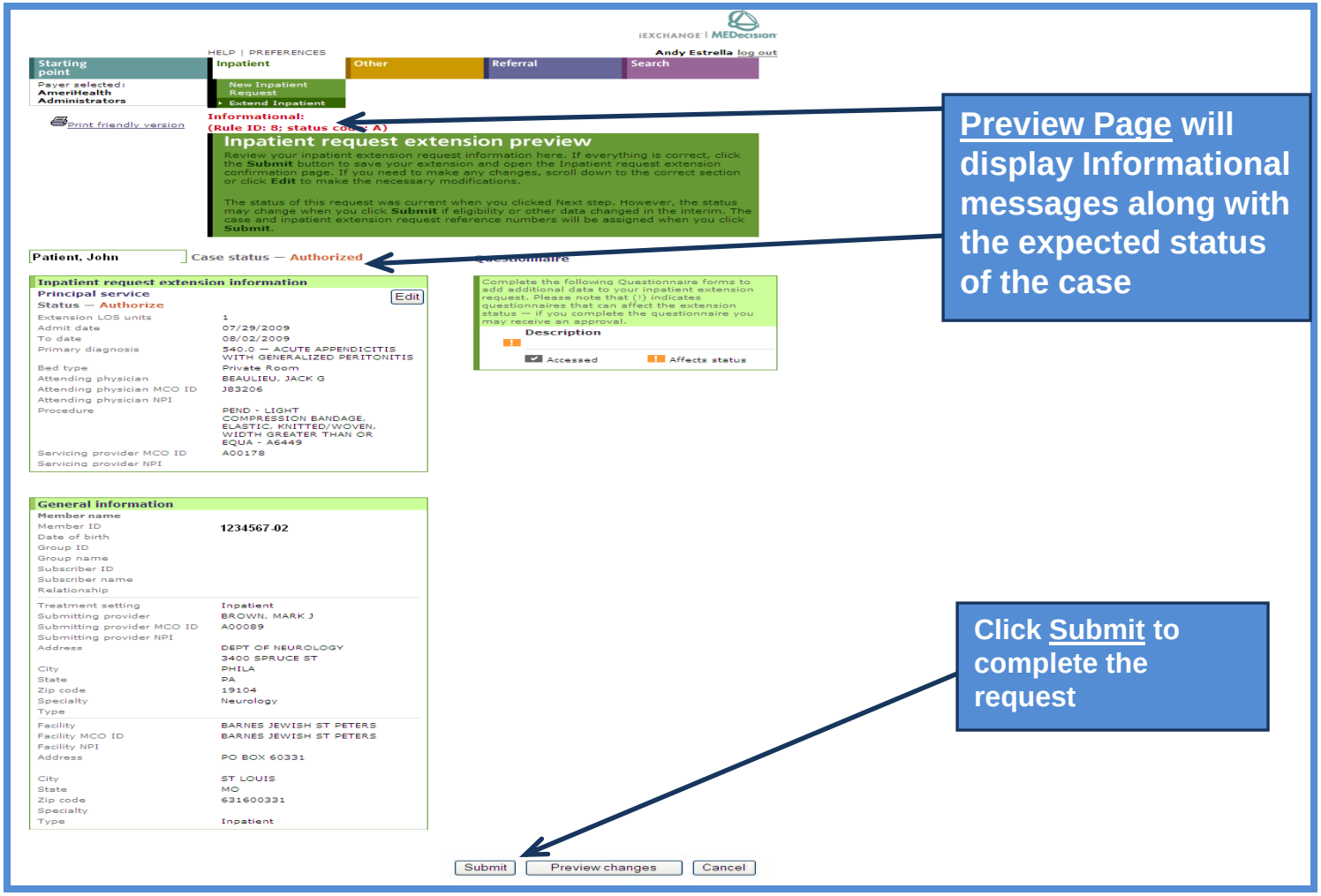
Extension Requests – Extend Inpatient



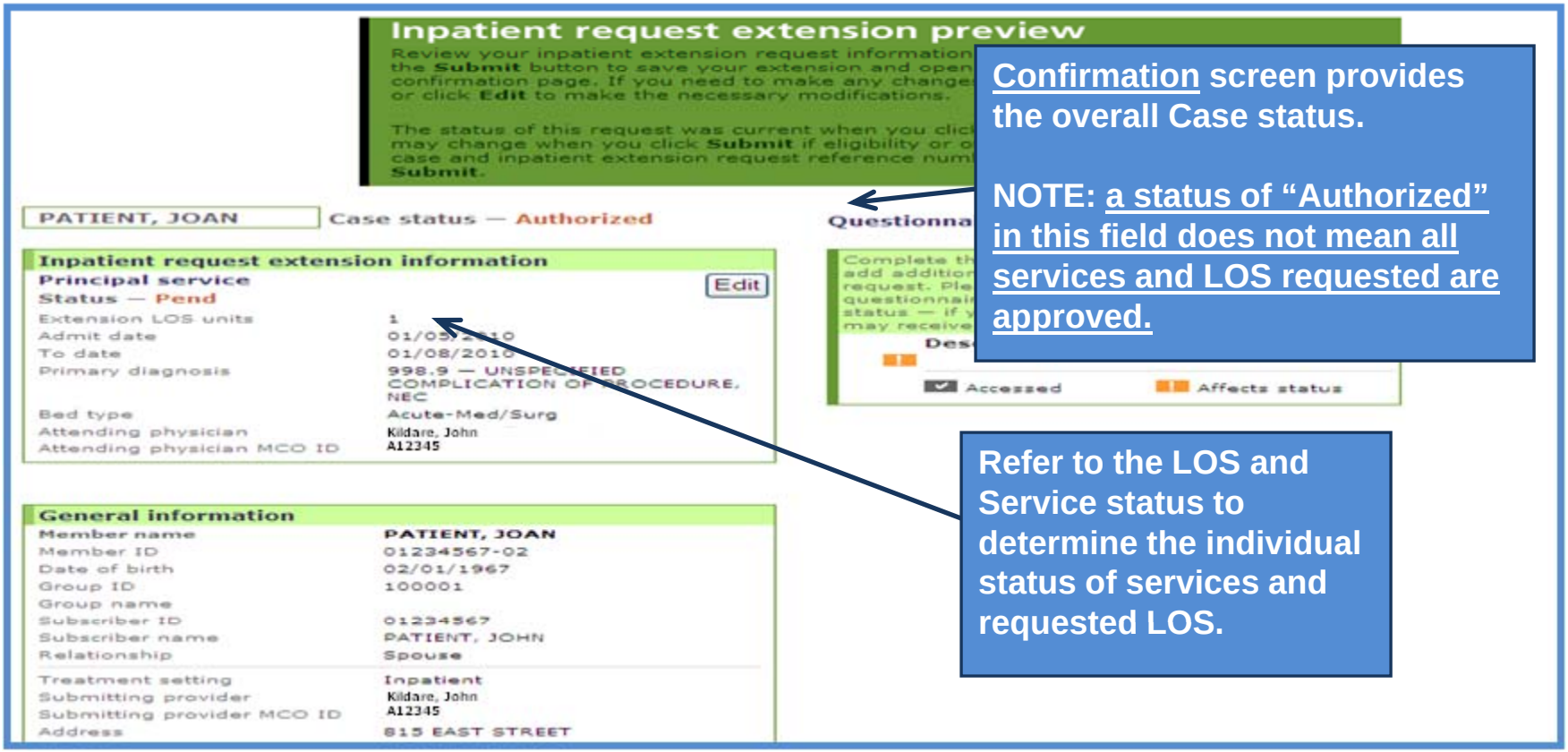
Extension Requests – Extend Inpatient



Extension Requests – Extend Inpatient

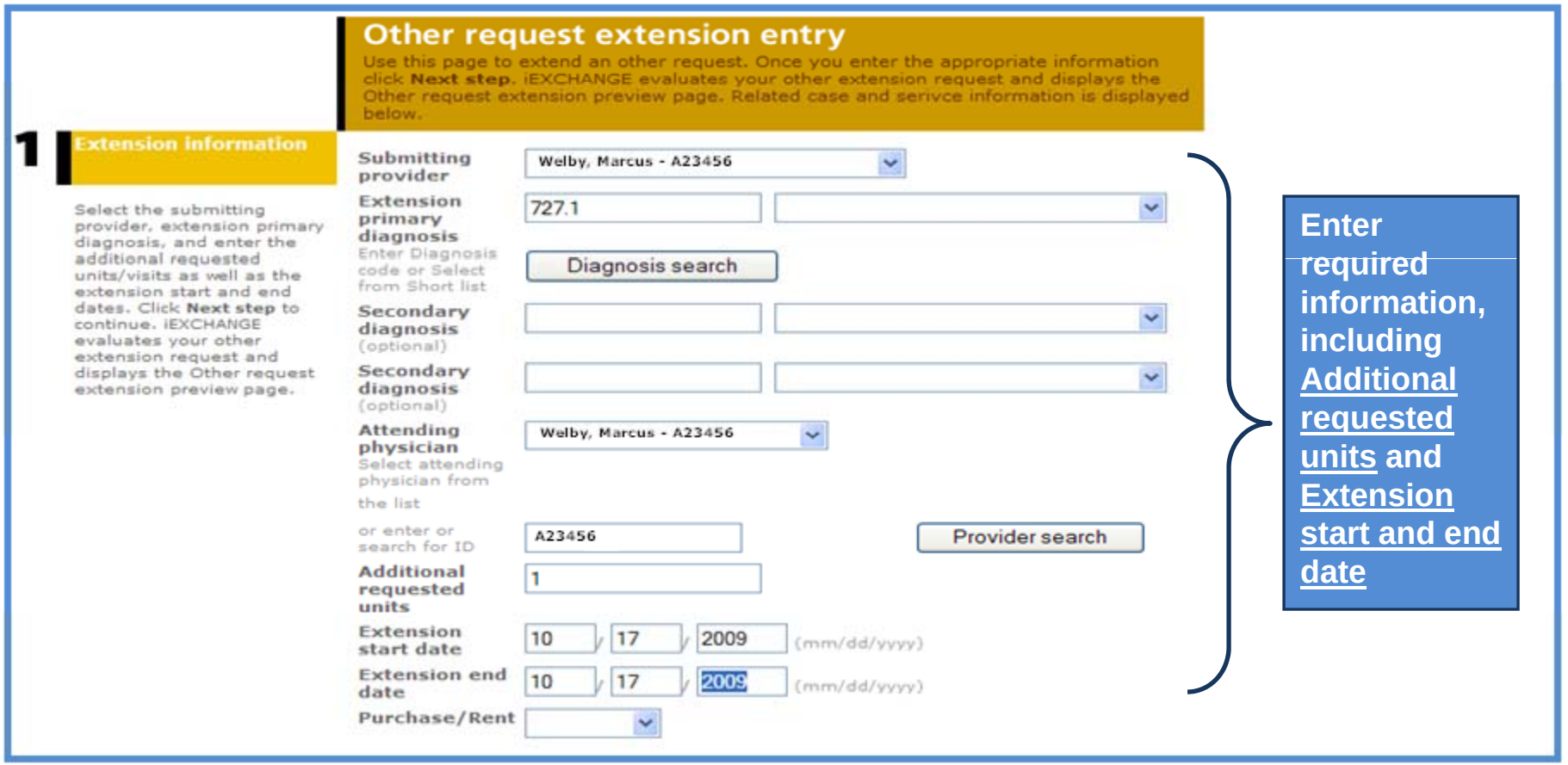


Extension Requests – Extend Inpatient

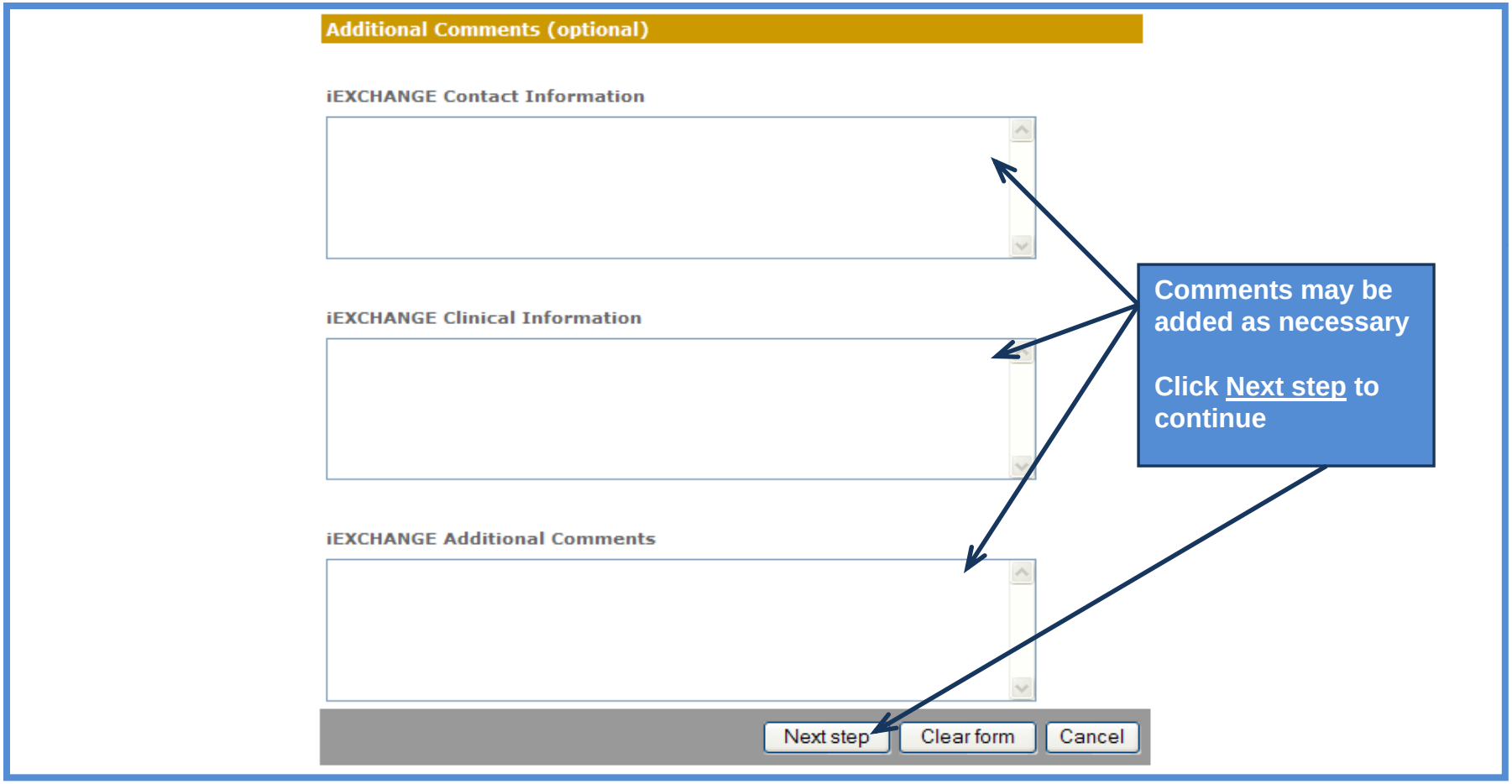


Extension Requests – Extend Other (Outpatient)

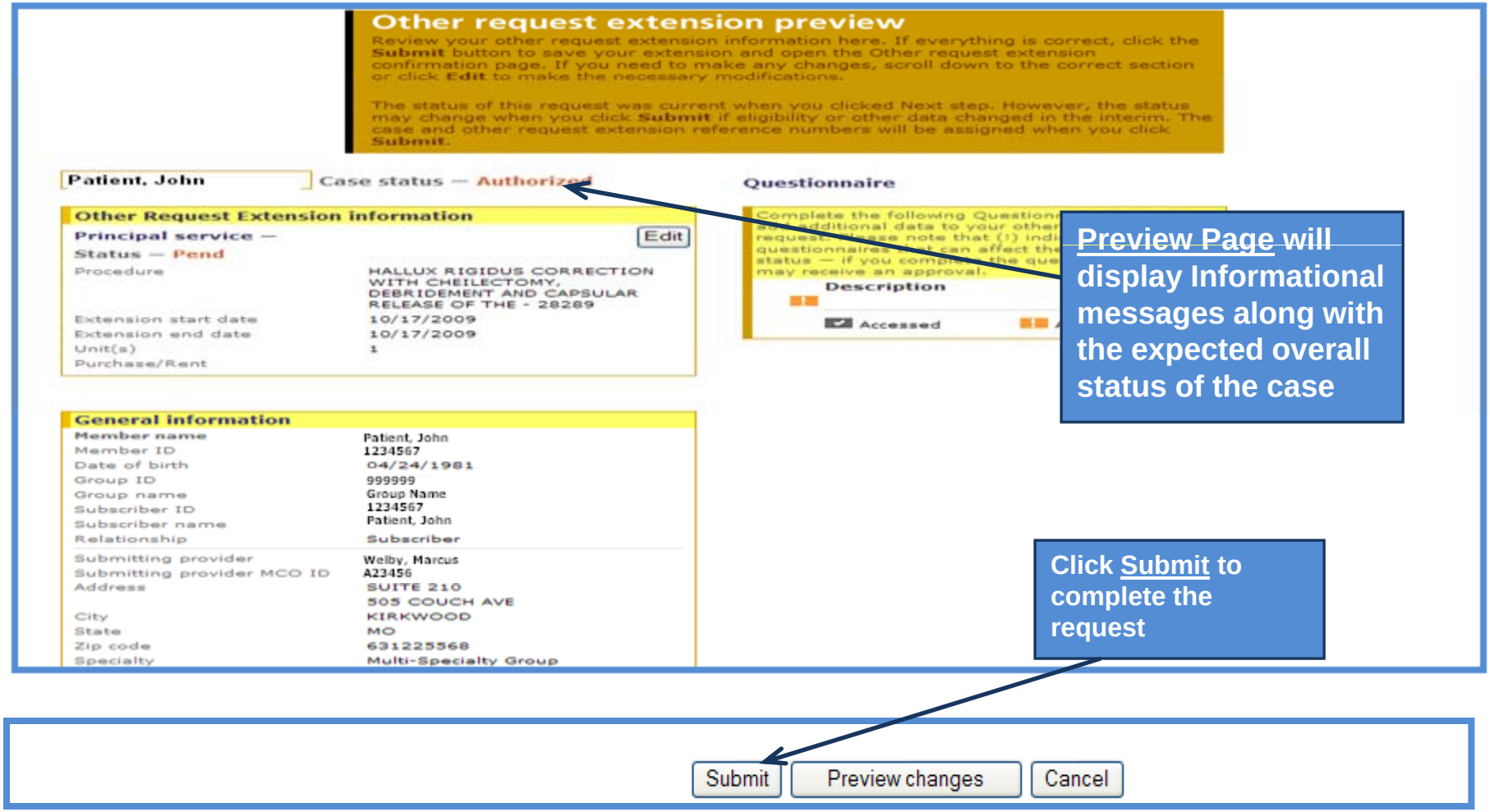
Extension Requests – Extend Other (Outpatient)



Extension Requests – Extend Other (Outpatient)



Extension Requests – Extend Other (Outpatient)



iEXCHANGE Administrator

Administrative users for iEXCHANGE can perform the below functions:

Group administration - Allows provider to add/ edit information about their group

Account administration - Allows providers to add/ edit account information (users) associated with their group

* **Submitting providers -** Add, edit or delete submitting provider numbers

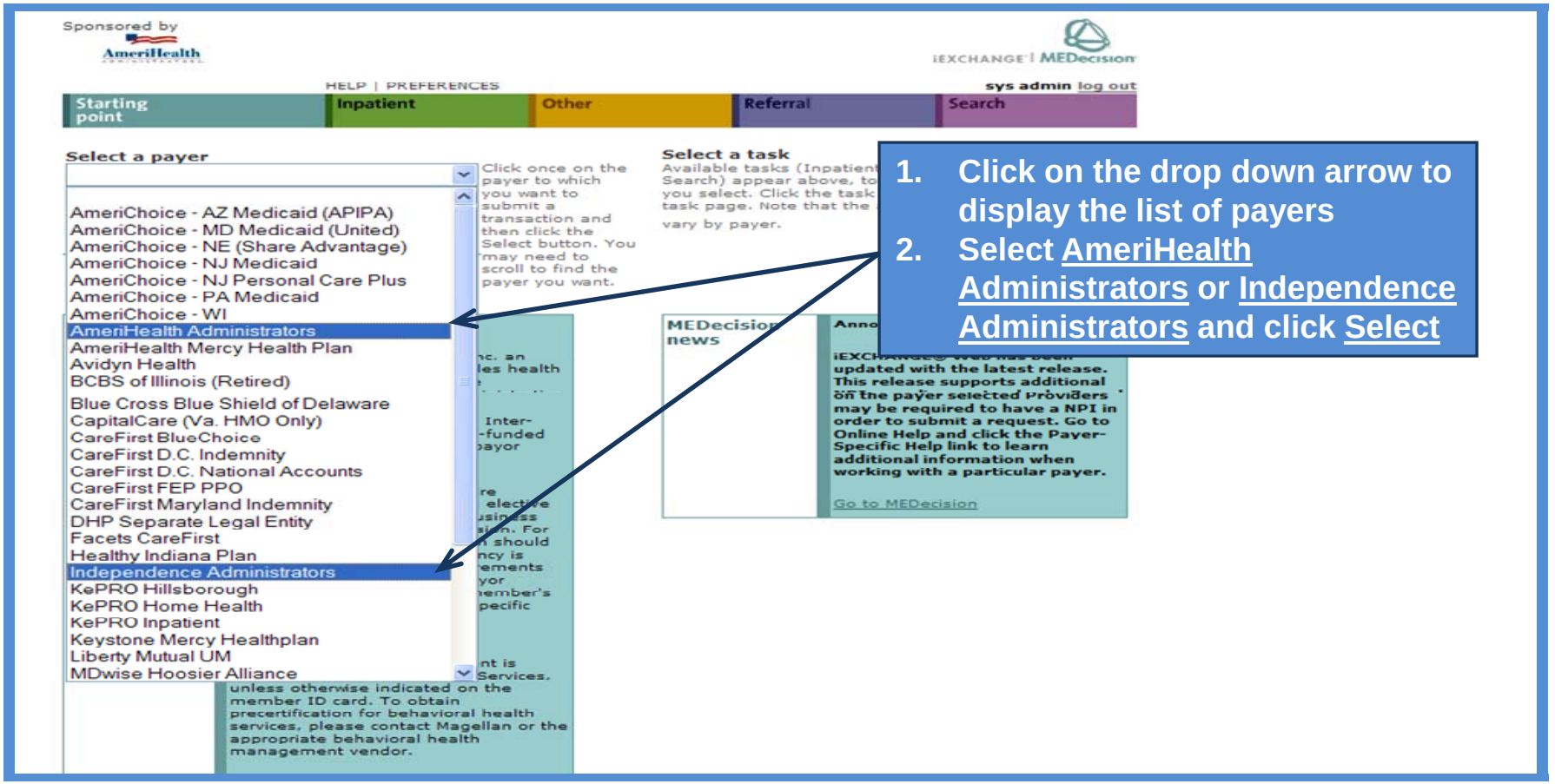
* **Frequent providers -** Add, edit or delete servicing, facility, or attending provider numbers

Frequent procedures - Add, edit or delete frequently used procedure codes

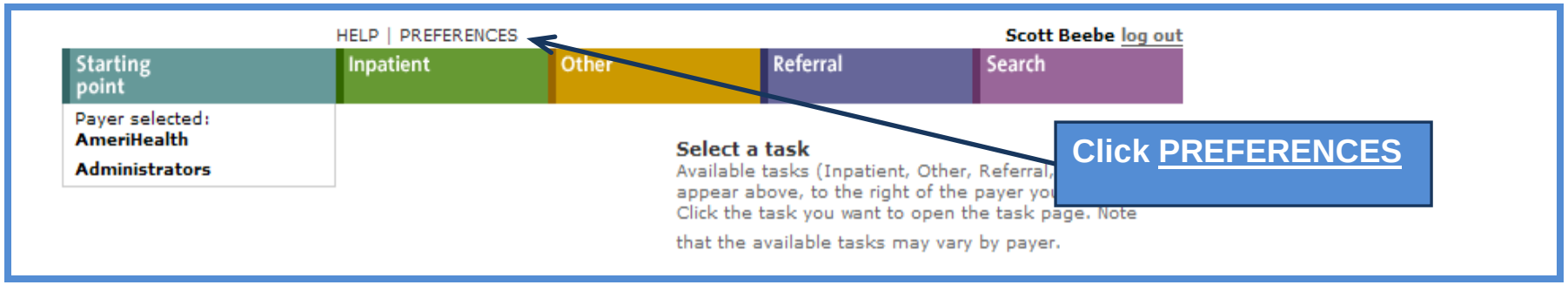
Frequent diagnoses - Add, edit or delete frequently used diagnosis codes

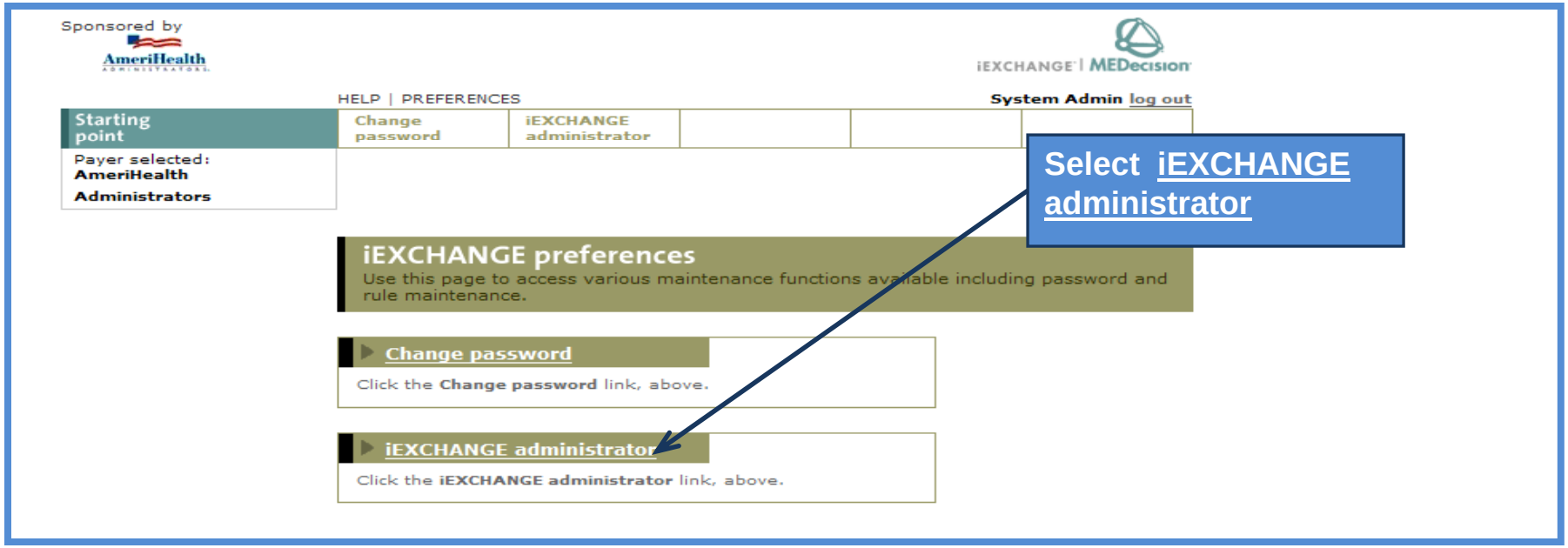
*** PLEASE NOTE: At this time, it is recommended that prior to adding new submitting or frequently used providers, you contact the iEXCHANGE Help Desk at AmeriHealth Administrators for assistance – 1-888-444-4617**

iEXCHANGE Administrator

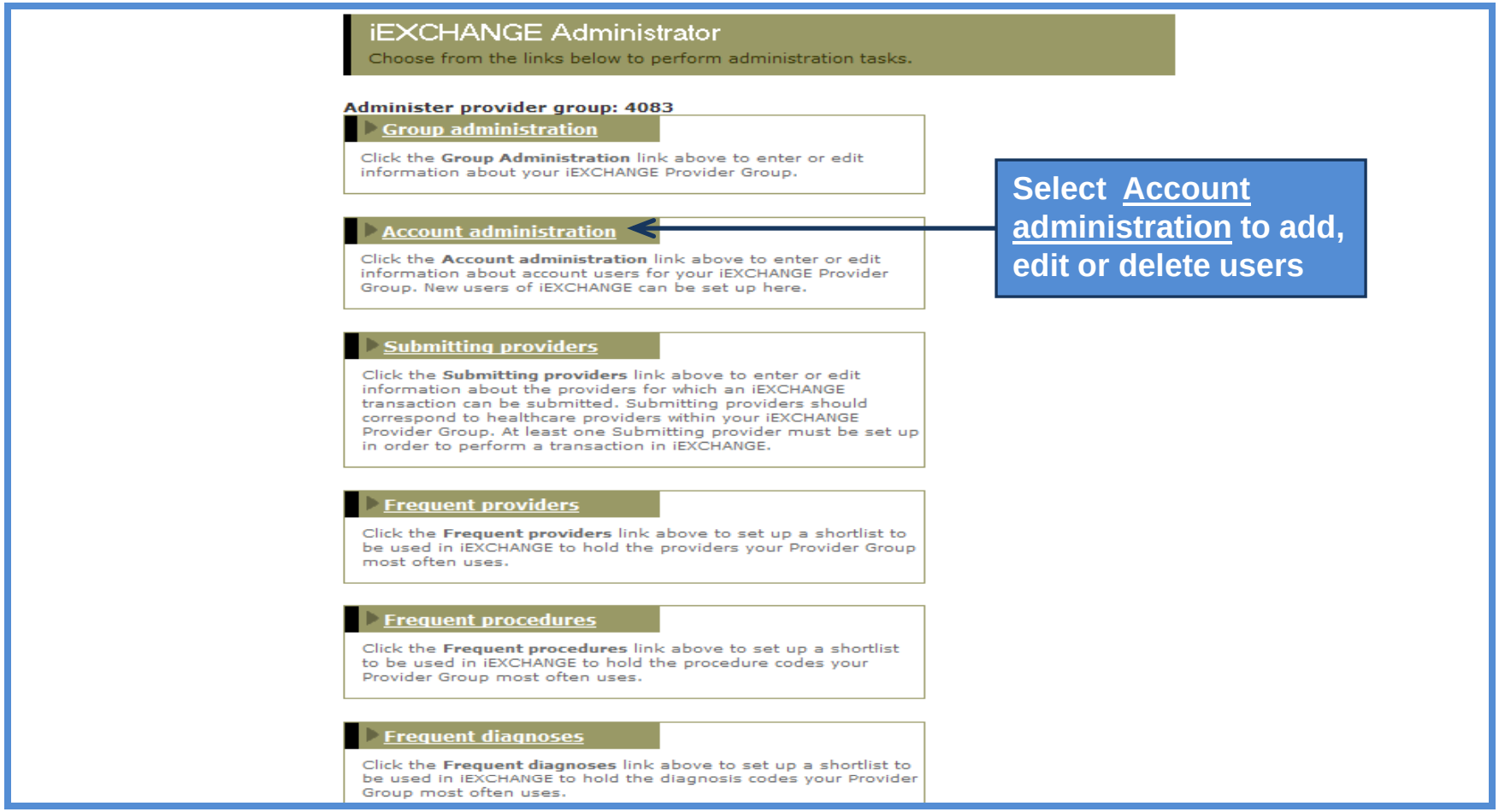


iEXCHANGE Administrator

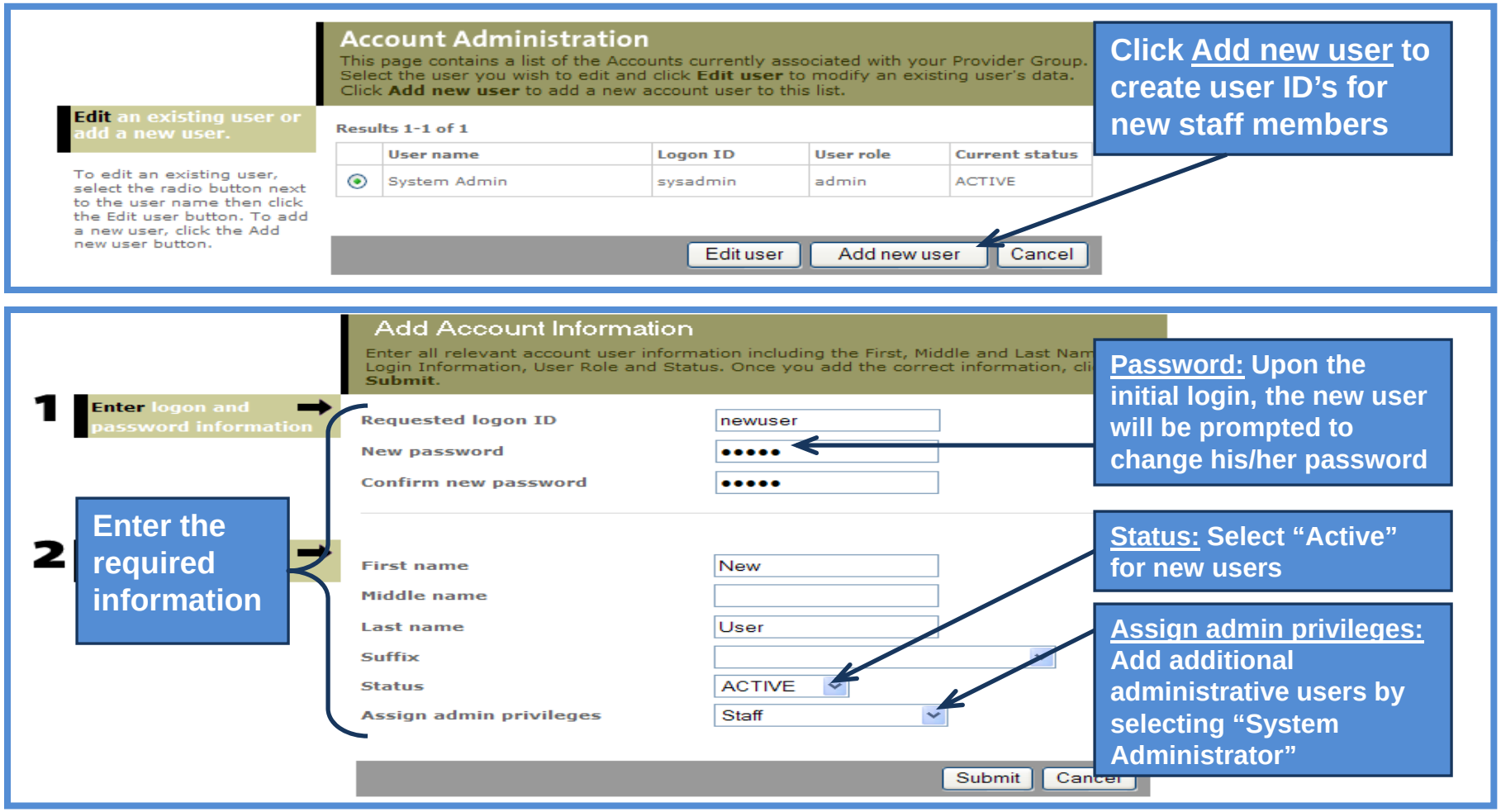




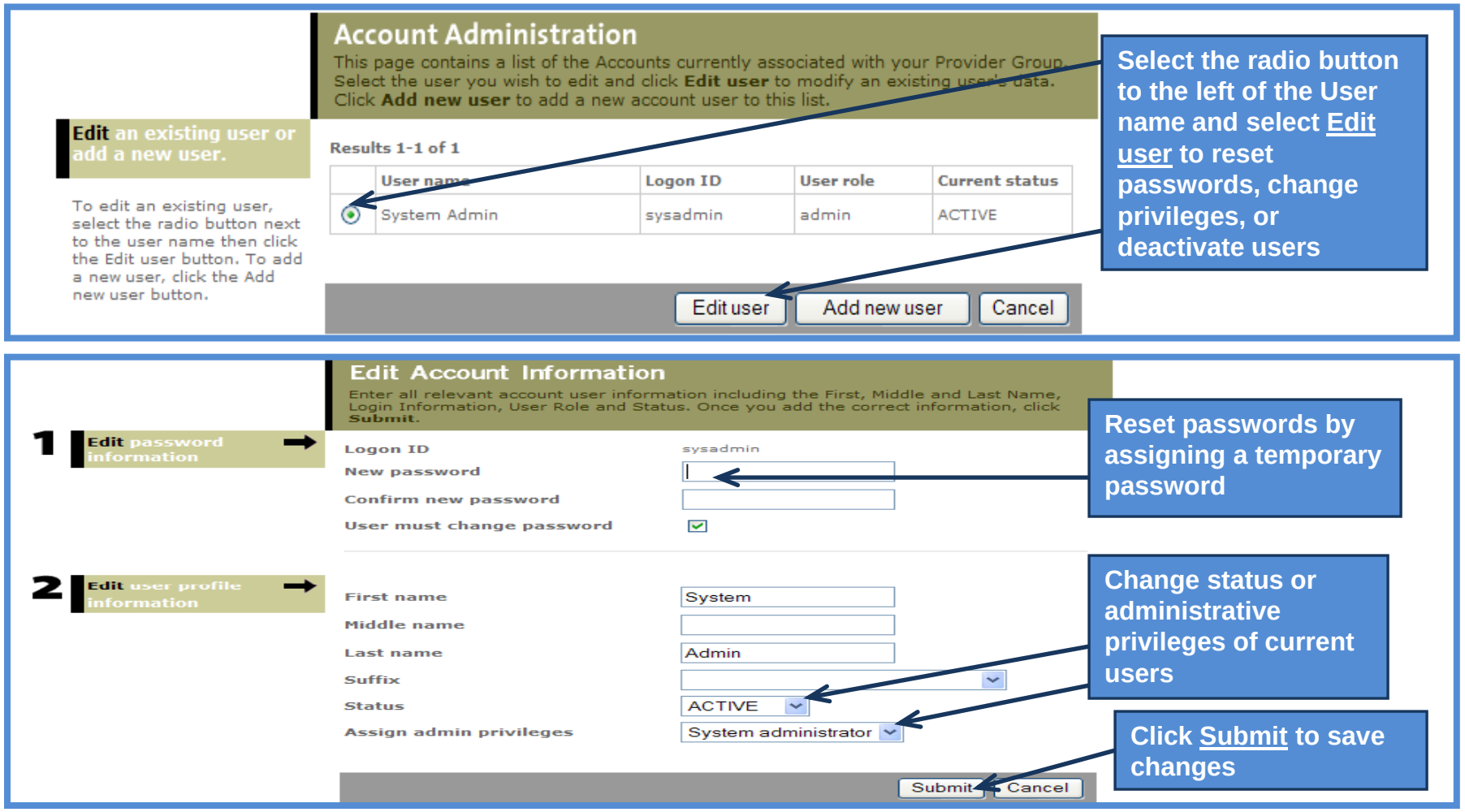
iEXCHANGE Administrator – Account Administration



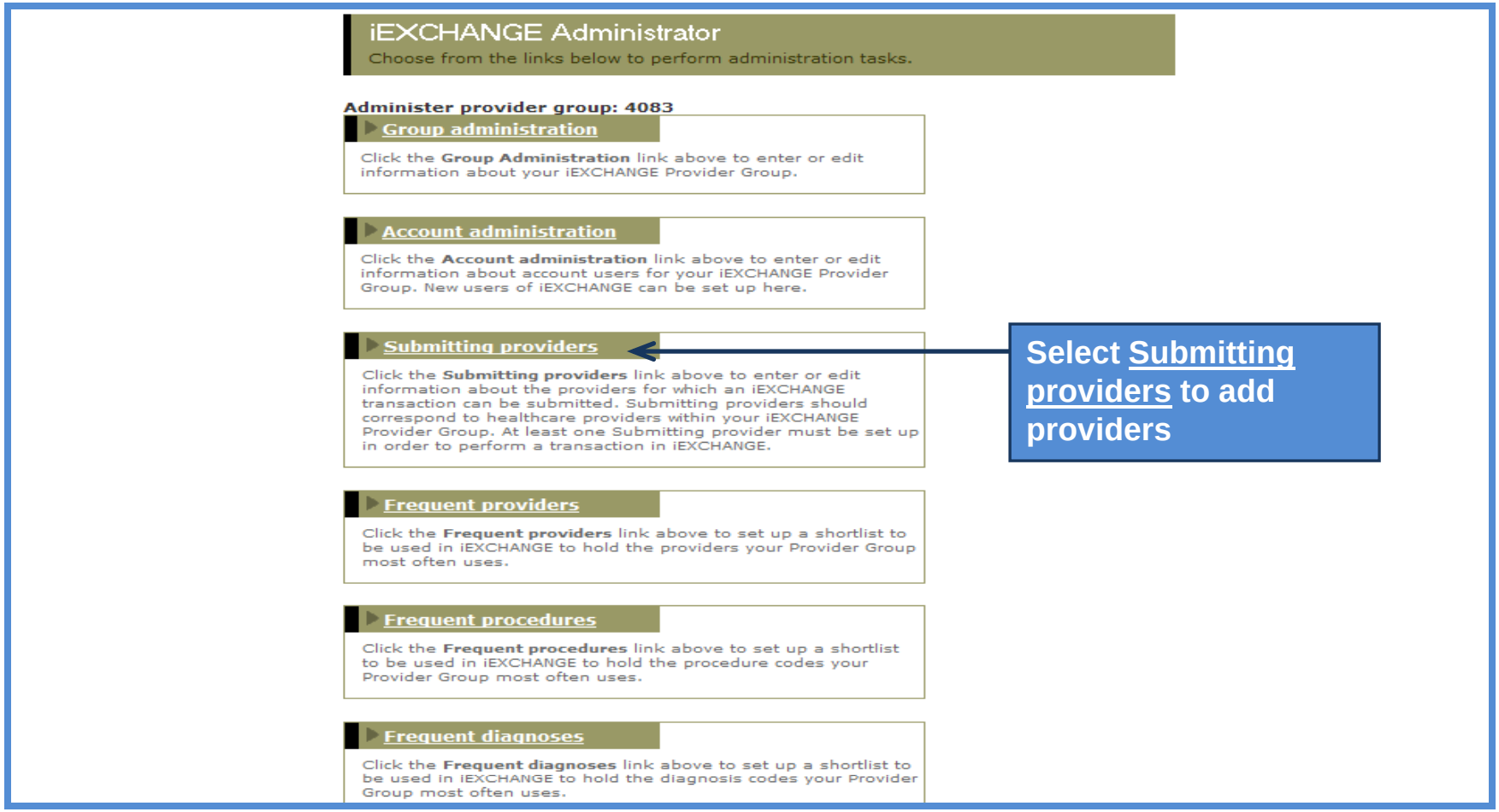
iEXCHANGE Administrator – Account Administration



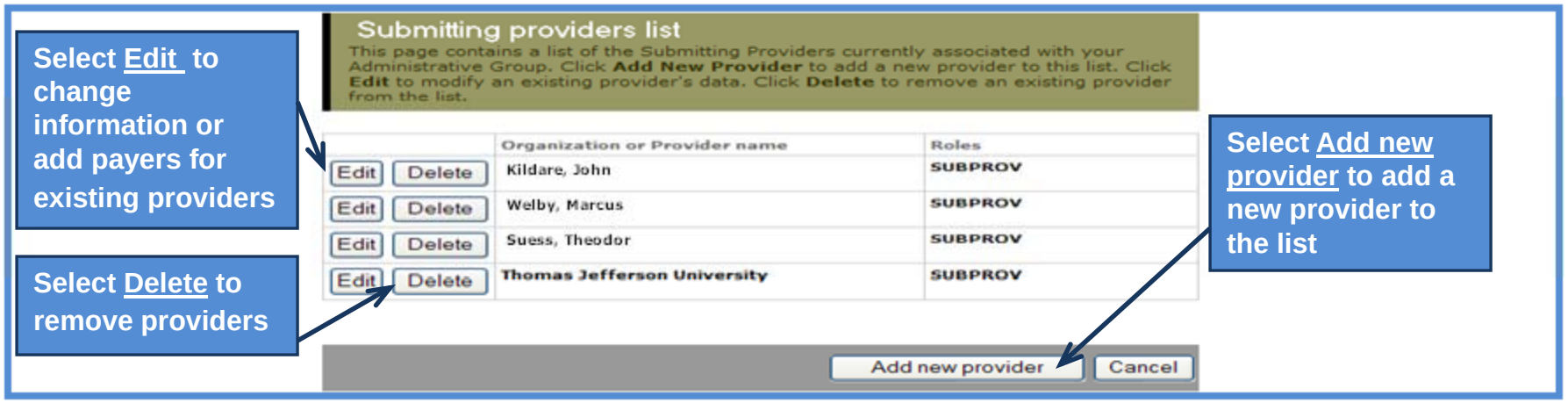
iEXCHANGE Administrator – Account Administration

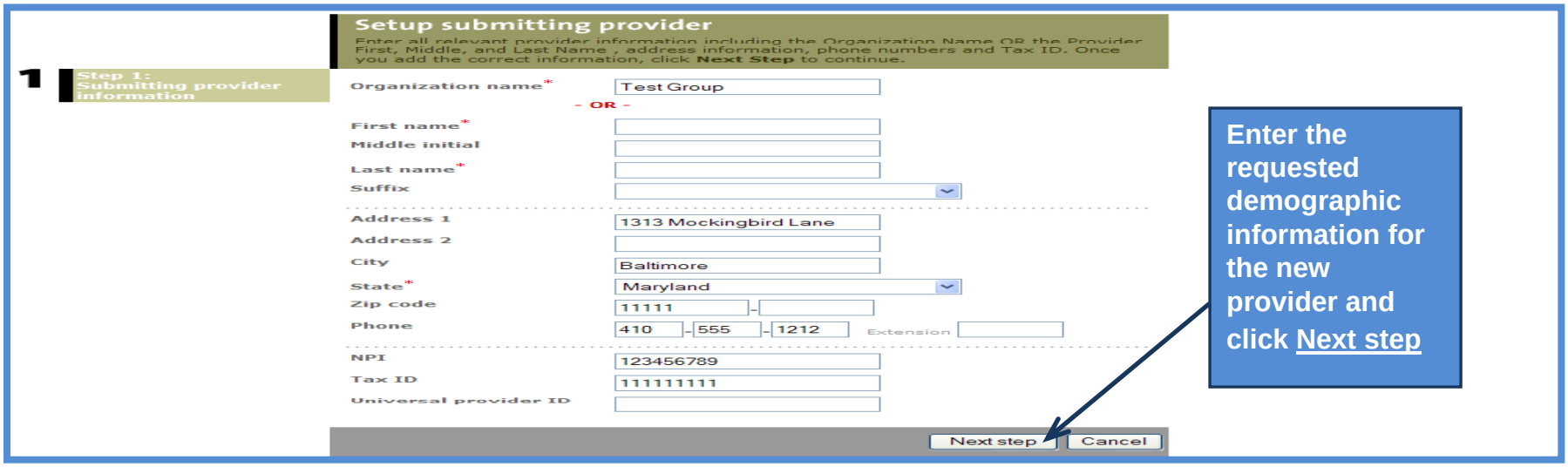


iEXCHANGE Administrator – Submitting Providers

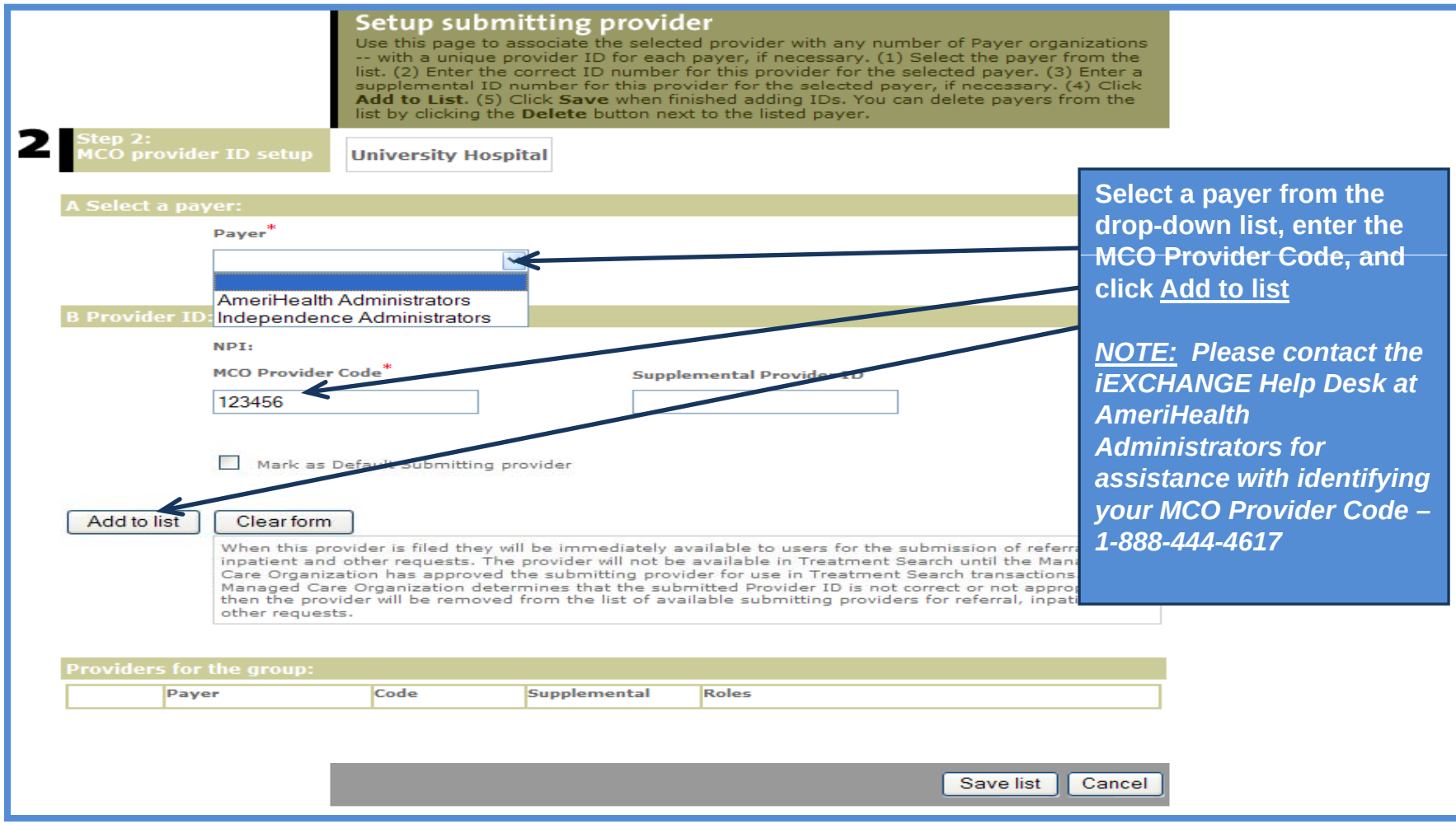


iEXCHANGE Administrator – Submitting Providers

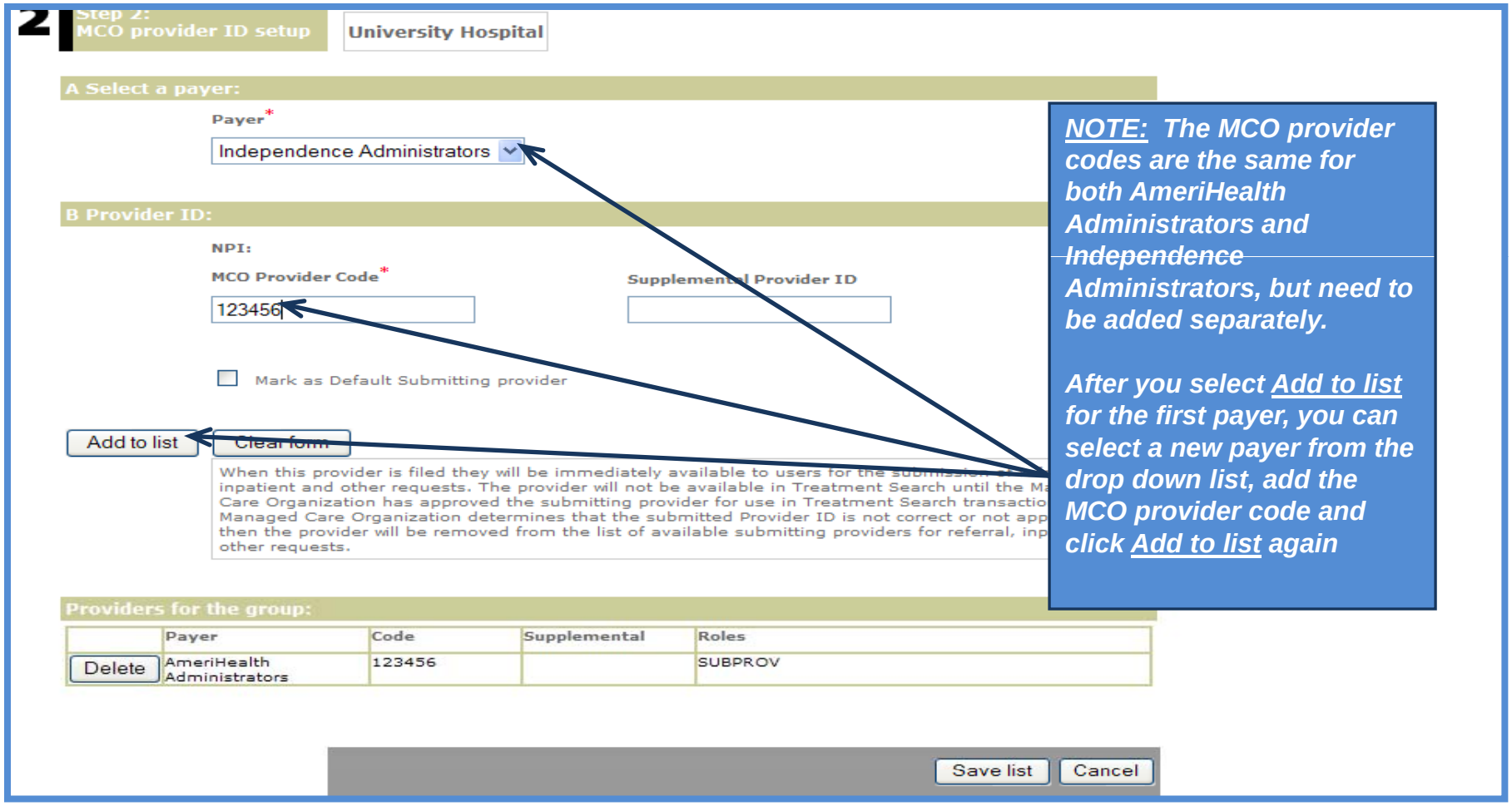




iEXCHANGE Administrator – Submitting Providers



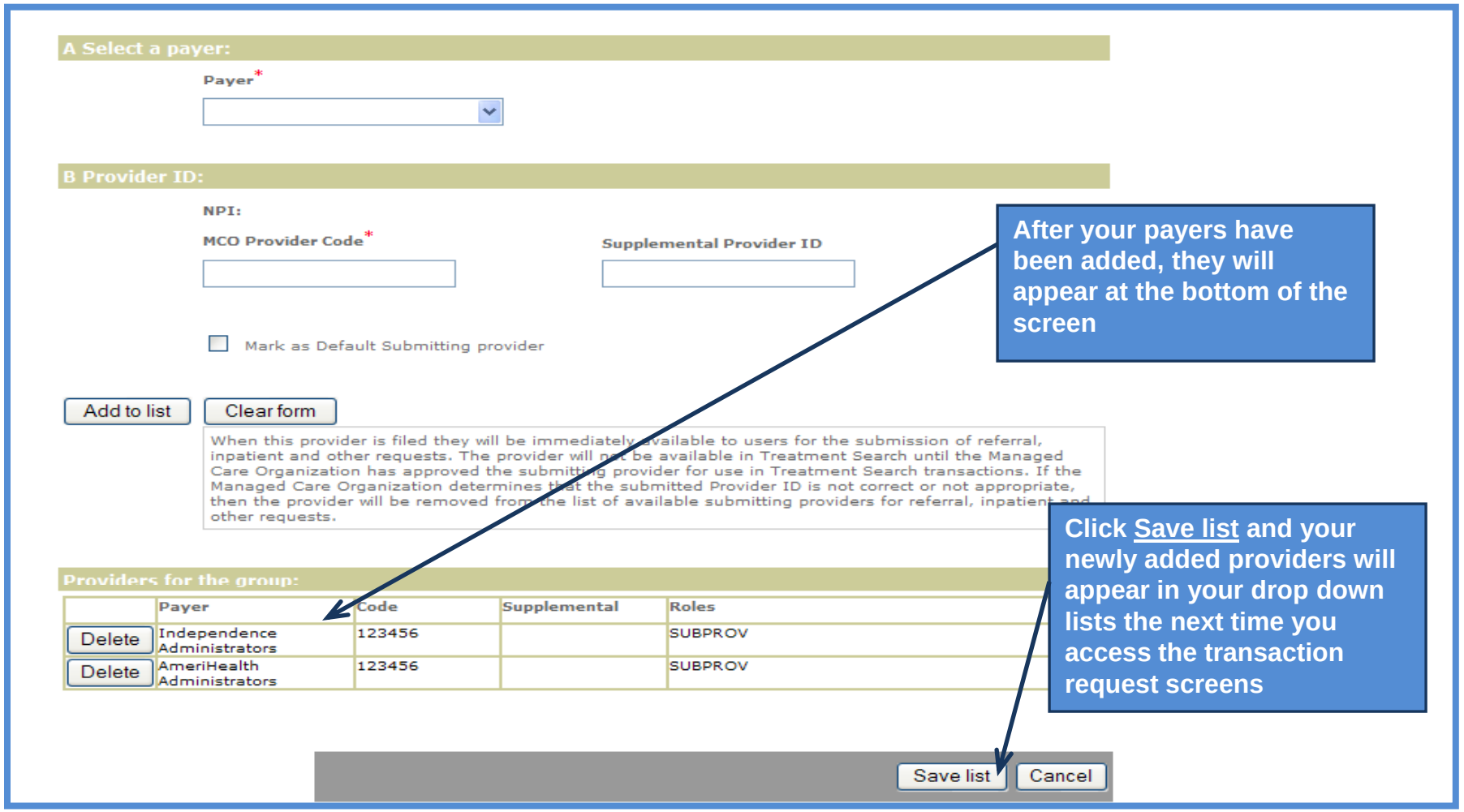
iEXCHANGE Administrator – Submitting Providers



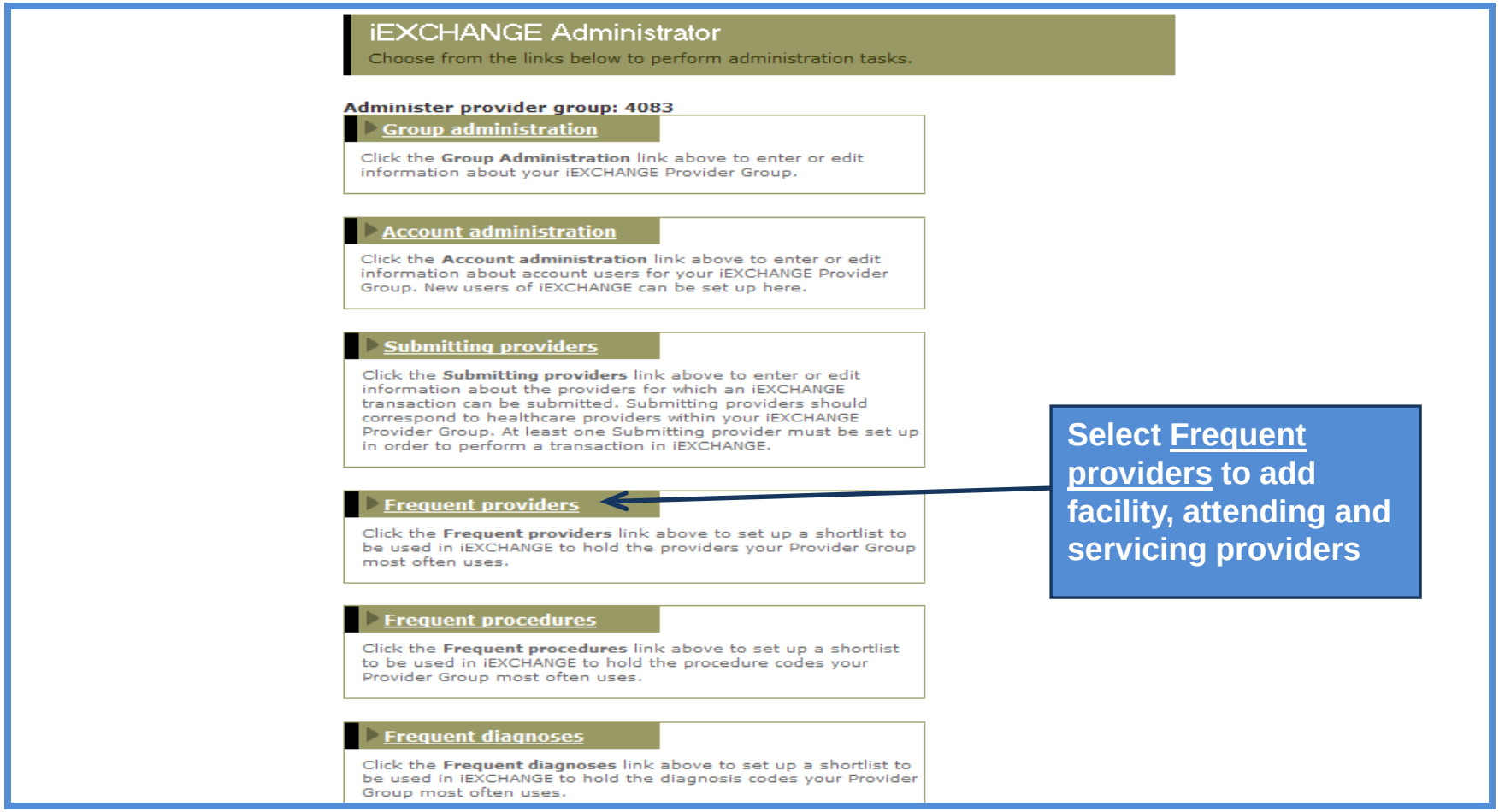
NOTE: ***The MCO provider codes are the same for both AmeriHealth Administrators and Independence Administrators, but need to be added separately.***

After you select Add to list for the first payer, you can select a new payer from the drop down list, add the MCO provider code and click Add to list again

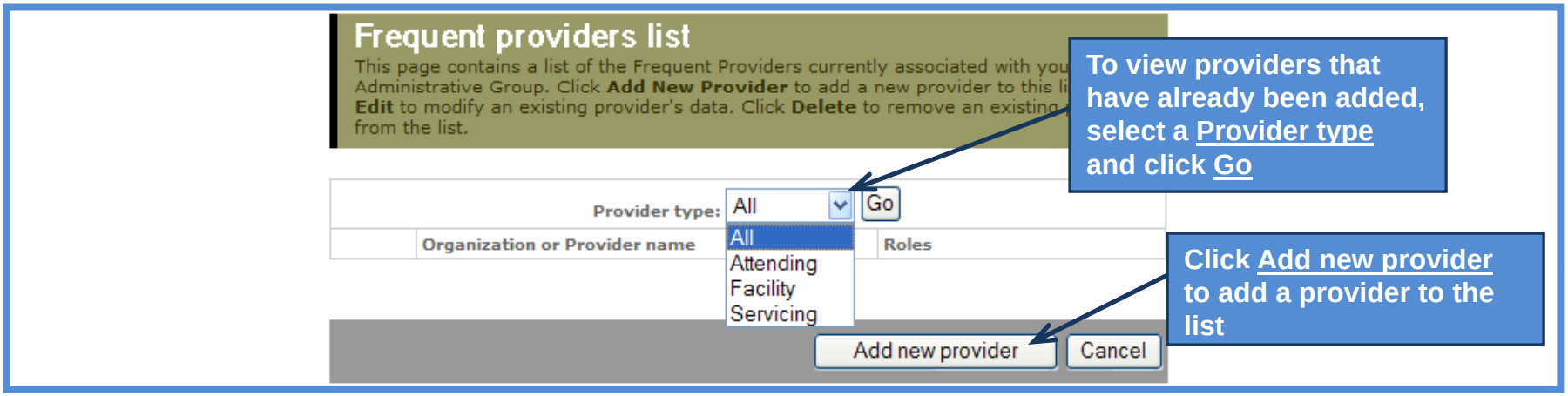
iEXCHANGE Administrator – Submitting Providers

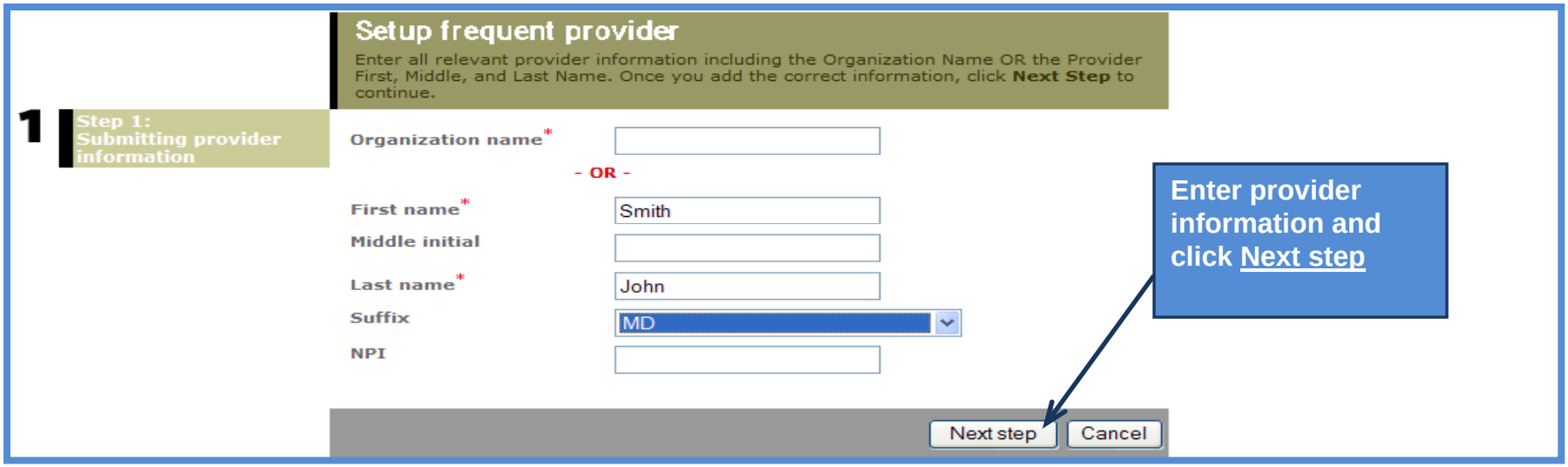


iEXCHANGE Administrator – Frequent Providers

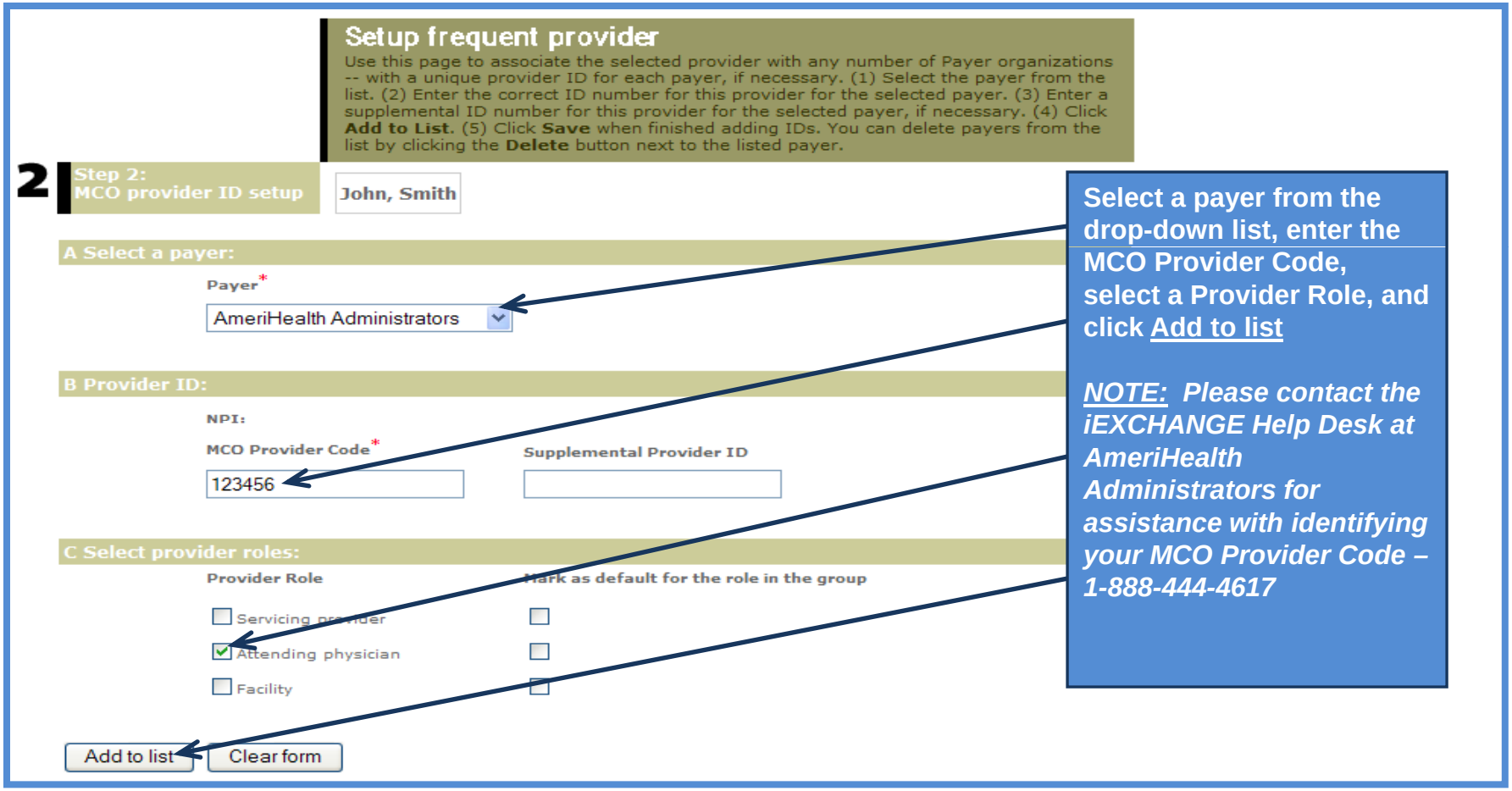


iEXCHANGE Administrator – Frequent Providers

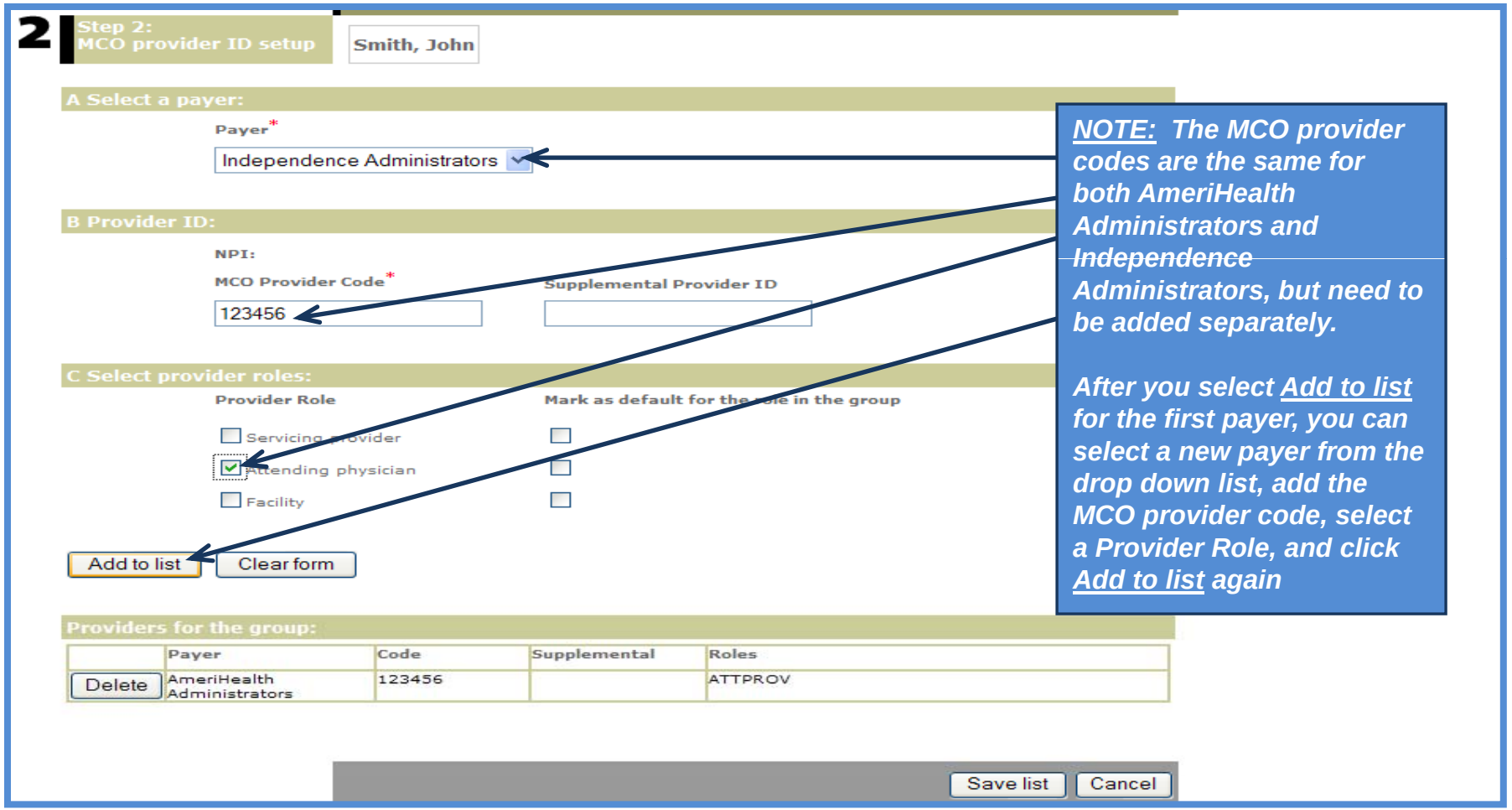




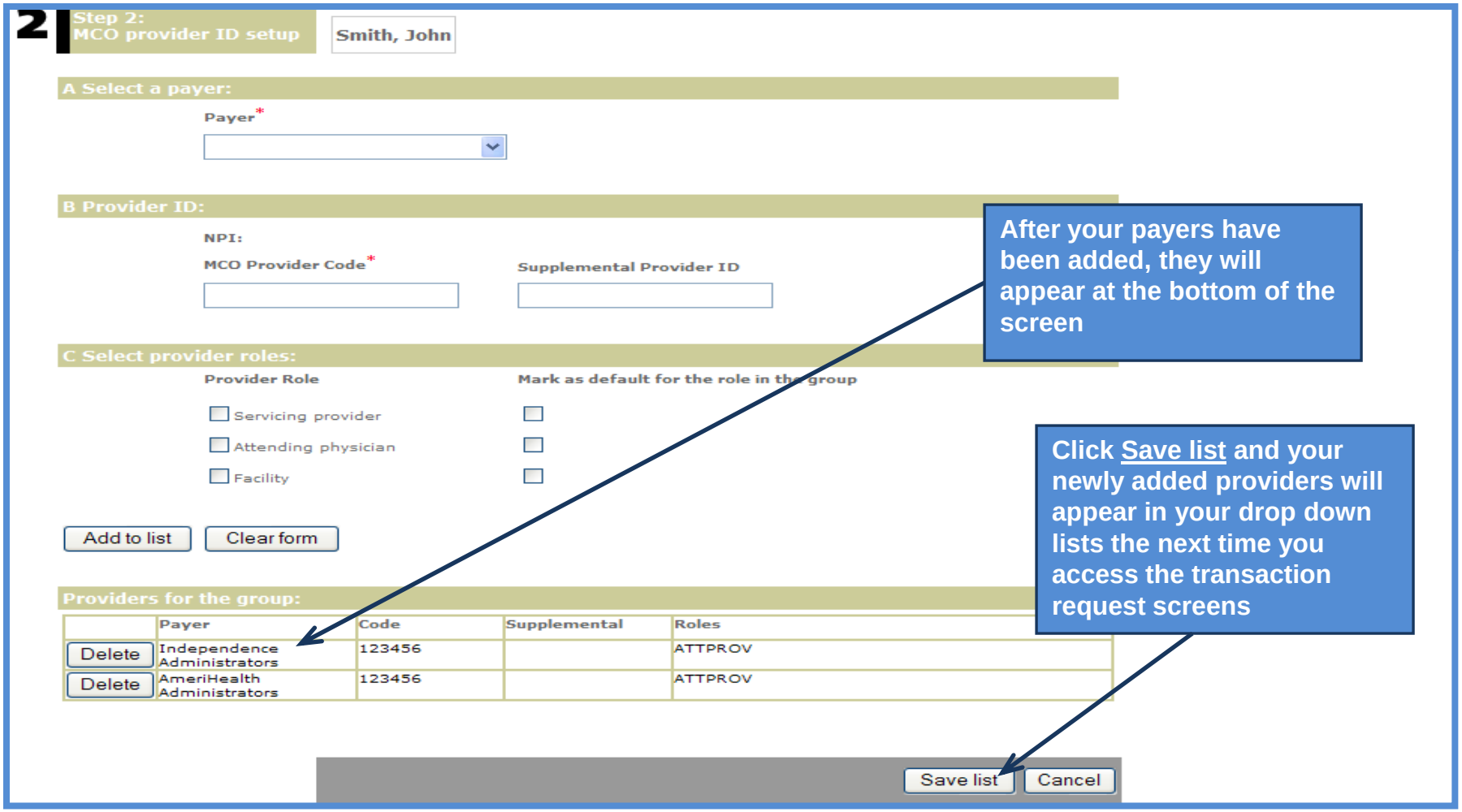
iEXCHANGE Administrator – Frequent Providers



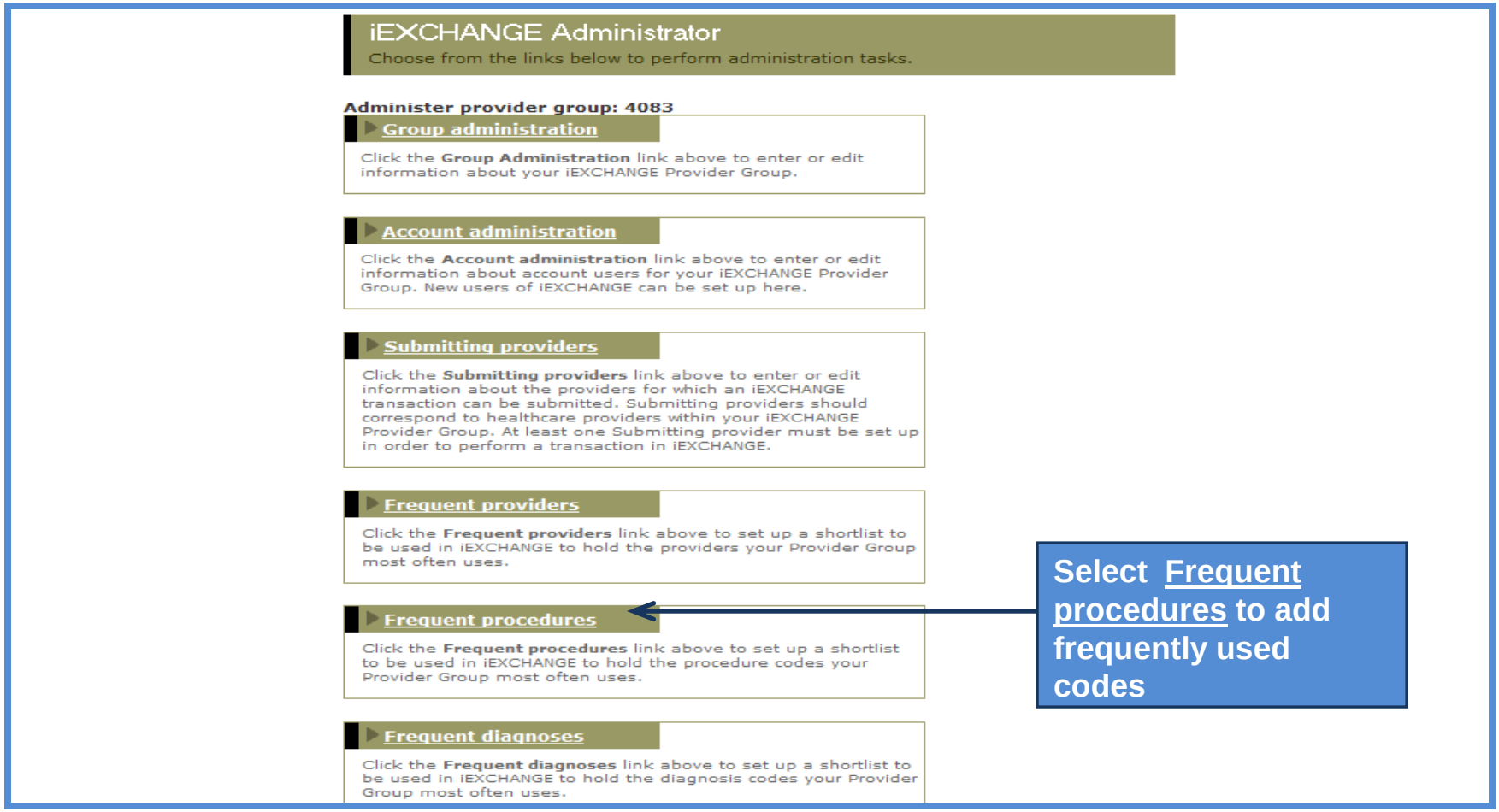
iEXCHANGE Administrator – Frequent Providers



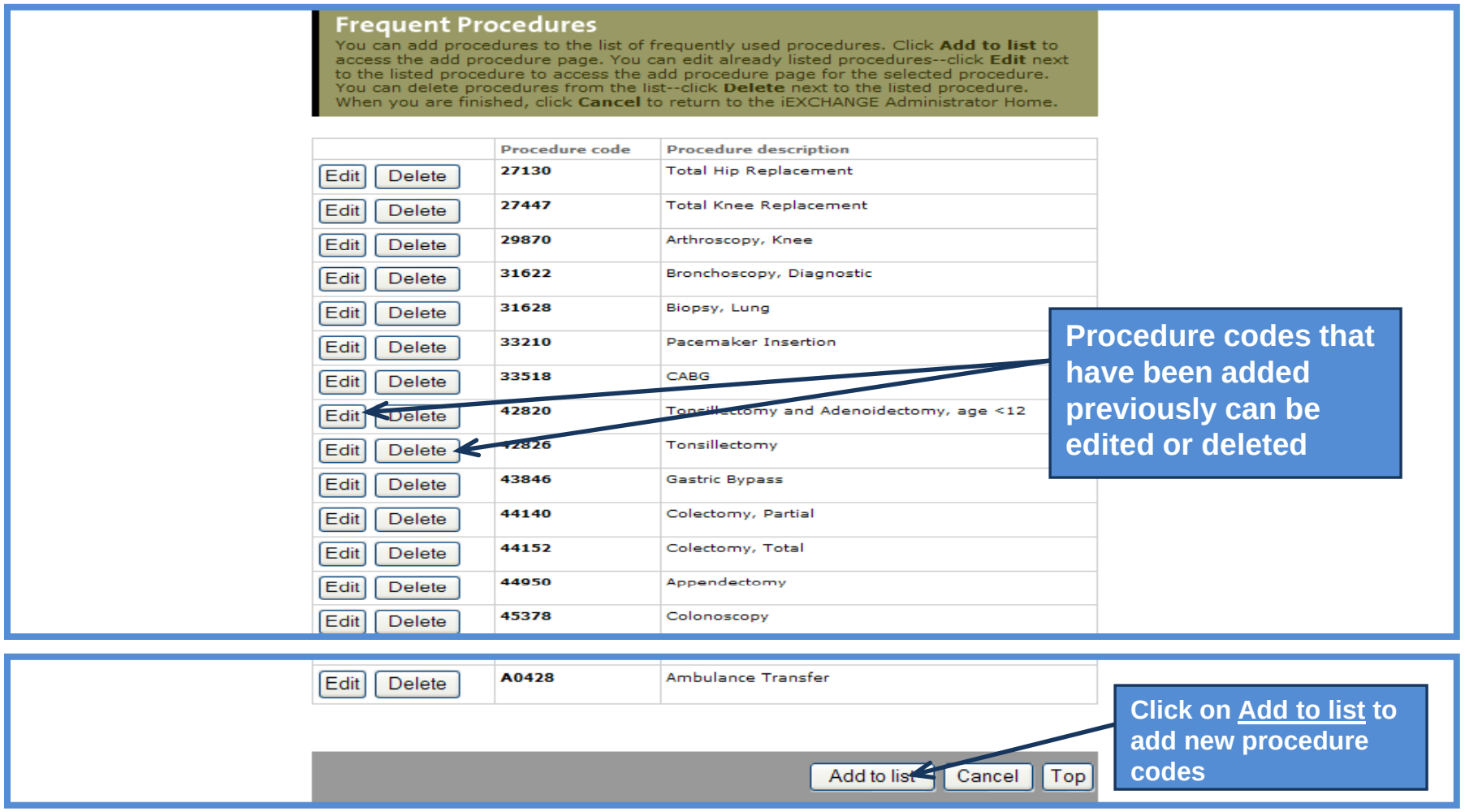
iEXCHANGE Administrator – Frequent Providers



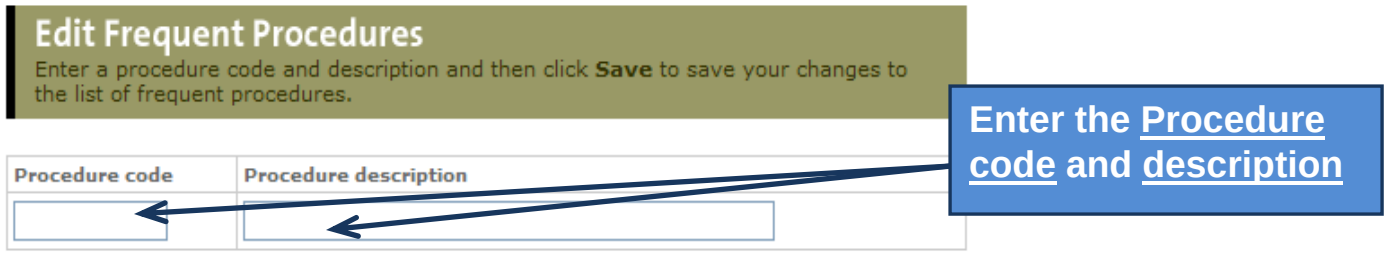
iEXCHANGE Administrator – Frequent Procedures

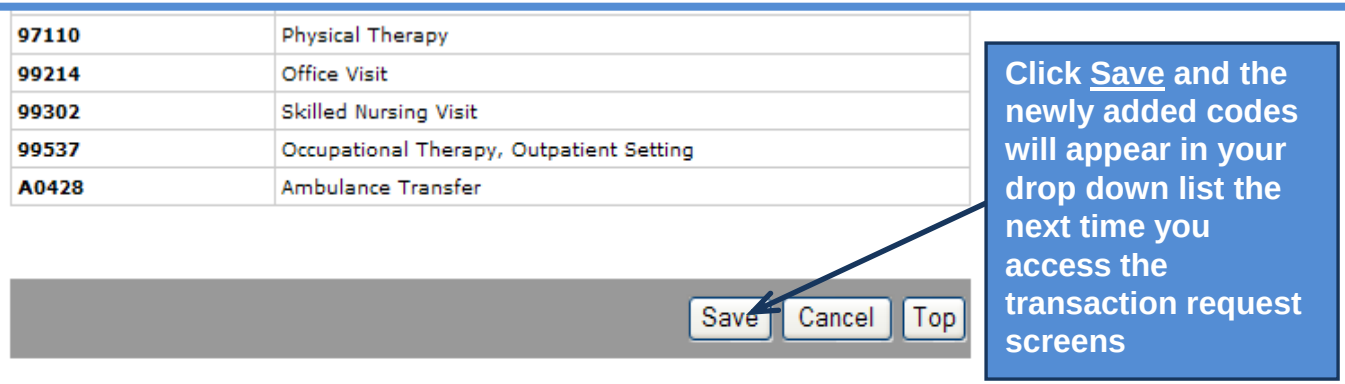


iEXCHANGE Administrator – Frequent Procedures

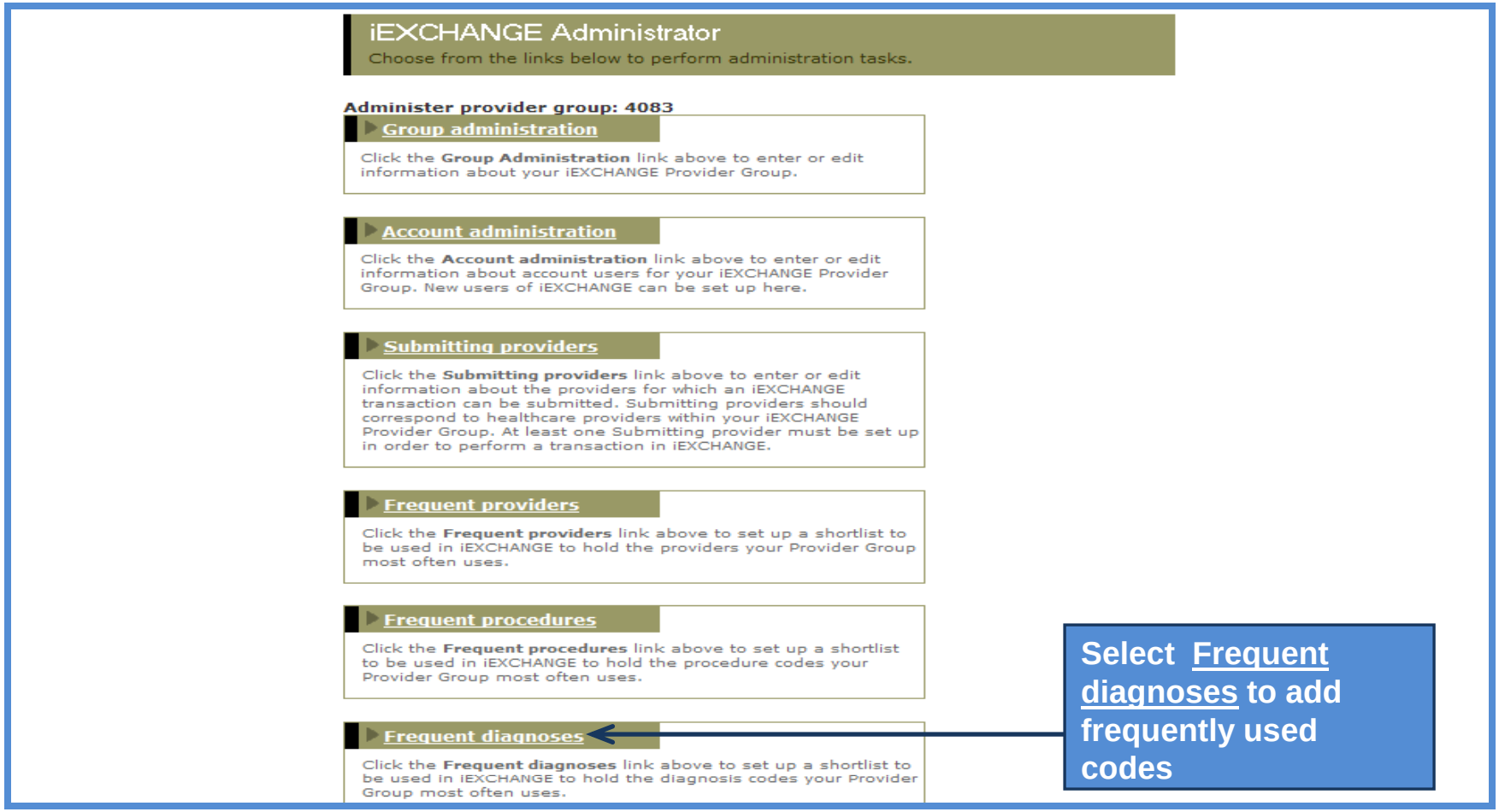


iEXCHANGE Administrator – Frequent Procedures

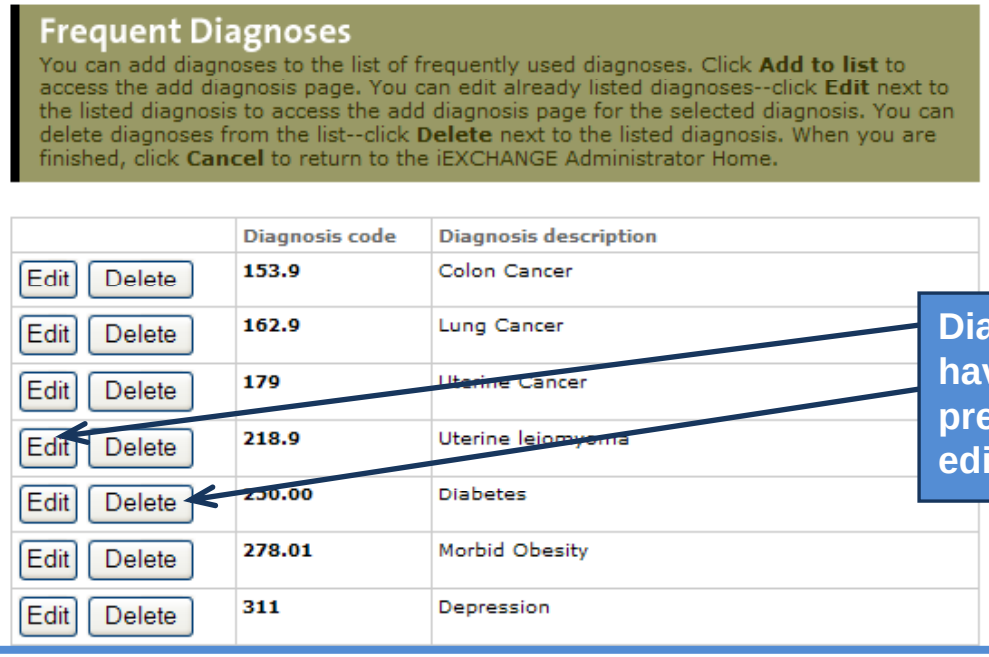


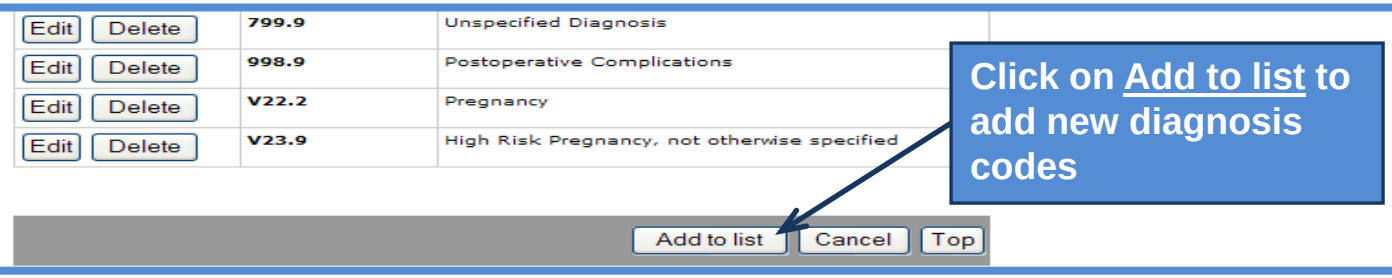


iEXCHANGE Administrator – Frequent Diagnoses

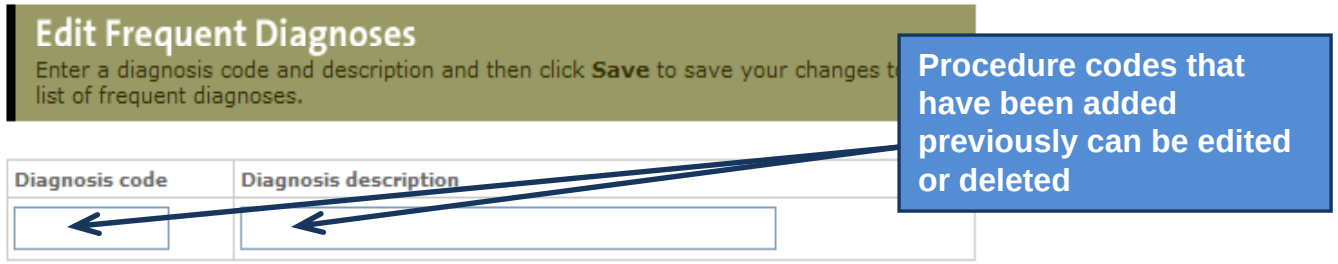


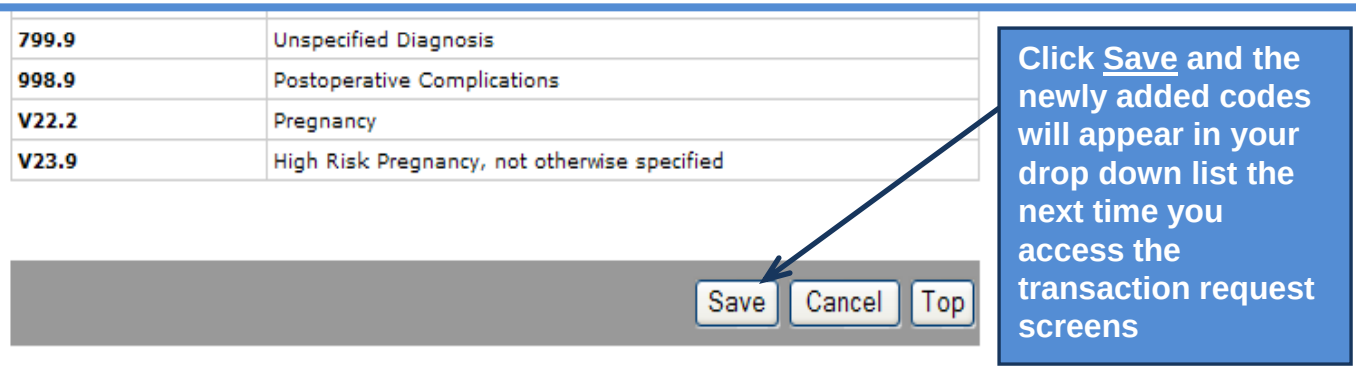
iEXCHANGE Administrator – Frequent Diagnoses





iEXCHANGE Administrator – Frequent Diagnoses





iEXCHANGE Frequently Asked Questions

What transactions are supported via iEXCHANGE®?
Inpatient and Outpatient Certification and Extensions
Treatment Search
Provider Search
Member Search
Treatment Update Search

If I receive a pended response via iEXCHANGE®, how will I be notified of a change in status?
After you logon to iEXCHANGE® and select AmeriHealth Administrators or Independence Administrators as a payer, you will receive a Treatment Updates message. Clicking on this option will notify you when AmeriHealth Administrators has updated the status for any requests previously submitted via iEXCHANGE®.

If the initial request was submitted manually, will I be able to view the case electronically by submitting a treatment search?
Yes, you will be able to search for the case within iEXCHANGE®. However, you will be able to view cases only if you are associated with the case (i.e. you are listed as the facility, attending, or servicing provider).

Can I submit inpatient requests on a Monday for patients that were admitted on Friday or over the weekend?
Yes.

Can information be printed from iEXCHANGE®?
You can print any of the Web page screens you view by clicking on the Print button on your browser. The printed pages can then be retained for your records.