

How to search for a Member eligibility and existing Referral/Preauthorization in web

To check for member benefits/Eligibility

Provider logs into the web portal.

On Left navigational pane- Select Benefits/Eligibility

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**GHI PPO members (other than City of New York) are being migrated to our new claims platform. Members will be transitioned when their plan renews. Please ask your patients for their current member ID card at each appointment. Please submit pre-authorization requests and claims using the applicable member ID that is in effect on the date of service. The following changes apply once members are on the new system:**

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- [Radiation therapy & cardiology imaging programs](#)
- [HIP radiology self-referral payment policy will apply to migrated GHI PPO members](#)
- [Anesthesia claims](#)

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GHI PPO members (other than City of New York) are being issued new ID Cards with new member IDs upon plan renewal. We expect this process will be complete by the end of 2020. You will know a member has been migrated when you see an 11-digit alphanumeric member ID. The IDs will start with the letter "K" followed by a unique 8-digit number. The final two digits distinguishes the subscriber from each dependent (01, 02, 03, etc.). The old IDs were all numeric and 11 digits long and didn't start with the letter "K". The radiation therapy & cardiology imaging programs, as well as the HIP radiology self-referral payment policy, will apply to migrated commercial GHI PPO members. Members who access the Medicare Choice PPO Network and have been issued new IDs will not participate in these eviCore programs .

### Eligibility and Benefits Search

#### Patient ID Number Search

Enter multiple patient ID numbers separated by commas.

#### Patient Name Search

Last Name:\*

Date of Birth:\*

OR

#### Choose Eligibility as of Date (HIP only)

Today

Previous Date:  

\*Required Fields

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Click on a covered individual to view benefit information.

**HMO Medical Eligibility (as of 03/17/2020)**

Please note: Previous Date searches apply to HIP member searches only.

	Name		ID #	Date of Birth	Primary/Secondary	Effective Date	Status	PCP	Plan
	[Redacted]	<a href="#">Details</a> <a href="#">Benefits</a>	[Redacted]	[Redacted]	Unknown	[Redacted]	[Redacted]	[Redacted]	HIP

[Check Hospital Eligibility](#)

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How to search for a Member eligibility and existing Referral/Preauthorization in web

How to search for the status of the Preauthorization

Provider logs into the web portal.

On Left navigational pane- Select Pre-Certifications/Prior Approvals

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How to search for a Member eligibility and existing Referral/Priorauthorization in web

An admin page is displayed. Screen will look different for a provider. Search can be done in 2 ways:

- Search for Referral or Prior Approval
- Search by Trace #/Auth#

The screenshot shows the EmblemHealth web interface. On the left, there is a sidebar with the EmblemHealth logo and a menu under "Providers" with "myEmblemHealth" selected. The menu items are: Referrals, Prior Approvals, Search Referrals and Prior Approvals (highlighted), Request ER Notification, Search ER Notification, and Check if pre-auth is required. The main content area has a navigation bar with four tabs: Administrator, Search for Referral or Prior Approval, Search by Trace #/Auth # (highlighted), and Search by Role/Override. Below the tabs, there is a form with a "My Location:" dropdown menu set to "Entity: H/CAREMGR/". Below this, it says "Enter either your Trace # or the HIP Authorization #:". There are two radio button options: "My Trace #:" with an empty text input field, and "HIP Authorization #:" with a blacked-out text input field. A "Search" button is located at the bottom right of the form area.

This screenshot is identical to the one above, showing the same web interface with the "Search by Trace #/Auth #" tab highlighted. The form fields and navigation elements are the same as in the previous image.

## How to search for a Member eligibility and existing Referral/Prior authorization in web

Enter the details to search for the Referral or Prior authorization with details if the HIP Auth # and or Trace number is not available.



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**Providers**

- myEmblemHealth
  - Referrals
  - Prior Approvals
  - Search Referrals and Prior Approvals**
  - Request ER Notification
  - Search ER Notification
  - Check if pre-auth is required

Administrator | **Search for Referral or Prior Approval** | Search by Trace #/Auth # | Search by Role/Override

**My Location:** <SELECT>

**Review Type:** <All>

Referred by you    Referred to you

**Service Type:** <All>

Service Date: 03/03/2020 Through 03/18/2020 (mm/dd/yyyy)

**Member ID:**   Search

**Review Status:**

Approved    Pending    Rejected

Incomplete    Void    Denied

Suspended

**Mental Health:**    Mental Health    Non Mental Health

**Search**

We are upgrading our technology to better serve our members. As part of this process, members in HIP plans will be given new member ID numbers on their renewal date. Please ask your patients for their new member ID card, and use the new numbers going forward to avoid denial of claims. New member ID numbers will change to an 11-digit alpha-numeric format.

How to search for a Member eligibility and existing Referral/Preauthorization in web

To search when Hip Auth and or Trace number is available.

Select radio button and enter the Trace # or HIP Authorization number and click on Search.

The screenshot shows the EmblemHealth web interface. At the top left is the EmblemHealth logo. On the right, there is a "Close Window" link. Below the logo is a navigation menu with "Providers" and "myEmblemHealth". Under "myEmblemHealth", there are several links: "Referrals", "Prior Approvals", "Search Referrals and Prior Approvals" (highlighted in yellow), "Request ER Notification", "Search ER Notification", and "Check if pre-auth is required".

The main content area features a search form with the following elements:
 

- Administrators: Search for Referral or Prior Approval, **Search by Trace #/Auth #** (highlighted in yellow), Search by Role/Override
- My Location: Entity: H/CAREMGR/ (dropdown menu)
- Enter either your Trace # or the HIP Authorization #:
- Radio buttons for "My Trace #:" (unselected) and "HIP Authorization #:" (selected and highlighted in yellow).
- A "Search" button.

Below the search form, there are instructions: "Click on Trace # to show Review detail." and "\* Asterisk indicates that this is the New Member ID". To the right, it says "1 results" and "Click on Column header to Sort."

The results table has the following columns: Trace #, Review Type, Service Type, Member, Svc/Admit Date, Requesting Provider, Servicing Provider, Facility, HIP Auth. #, Review Status, API Gateway, Source, Created, Created By, and Received Via. The table contains one row of data with several cells redacted with black boxes. The "Review Status" is "Approved" and the "Created" date is "03/17/202".

Trace #	Review Type	Service Type	Member	Svc/Admit Date	Requesting Provider	Servicing Provider	Facility	HIP Auth. #	Review Status	API Gateway	Source	Created	Created By	Received Via
[Redacted]	Outpatient Facility	Medical Care	[Redacted]	[Redacted]	[Redacted]	[Redacted]	(F0504)	[Redacted]	Approved	[Redacted]	Web	03/17/202	[Redacted]	[Redacted]

1

The full case is displayed.



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➤ **myEmblemHealth**

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- [Search Referrals and Prior Approvals](#)
- [Request ER Notification](#)
- [Search ER Notification](#)
- [Check if pre-auth is required](#)

**Review entered via Web on 03/17/2020 10:14:23 AM**

Your trace number is 37371657. This trace number is provided for your use in corresponding with the HIP Care Management Department in identifying this prior approval request. This Prior Approval does not guarantee payment to the servicing provider/vendor. Payment is contingent on the member's continued eligibility and contractual benefit limits.

<b>Review Type:</b>	(O) Outpatient Facility	<b>My Trace #:</b>	[REDACTED]
<b>Category:</b>	(HS) Health Services Review	<b>HIP Authorization#:</b>	[REDACTED]
<b>Certification:</b>	(I) Initial	<b>Review Status:</b>	[REDACTED]

<b>Member ID:</b>	[REDACTED]	<b>Member Plan:</b>	[REDACTED]
<b>Member Name:</b>	[REDACTED]	<b>Member PCP:</b>	[REDACTED]
<b>Member Sex:</b>	[REDACTED]	<b>Member PCP Phone:</b>	[REDACTED]
<b>Member DOB:</b>	[REDACTED]	<b>Member Eligibility Date:</b>	[REDACTED]
		<b>Managing Entity:</b>	[REDACTED]

<b>Requesting Provider:</b>	[REDACTED]	<b>Facility:</b>	[REDACTED]
-----------------------------	------------	------------------	------------

<b>Contact Name:</b>	[REDACTED]
<b>Contact Phone:</b>	[REDACTED]
<b>Contact Fax:</b>	[REDACTED]

<b>Service Type:</b>	(1) Medical Care	<b>Facility Code:</b>	(22) On Campus - Outpatient Hospital
<b>Service Level:</b>	(01) Elective	<b>Release Of Info:</b>	(Y) Yes, Provider has a Signed Statement
<b>Service Date:</b>	03/17/2020		
<b>Notify Date:</b>	//	<b>Received Via:</b>	

**Diagnosis:**

Code	Description
R31.29	OTHER MICROSCOPIC HEMATURIA

**Procedures:**

Code	Description	Modifier	Date	Requested Units	Approved Units
52000	CYSTOSCOPY	--	03/17/2020	1	1

**52000**