What You Should Know About iEXCHANGE®

- The iEXCHANGE® system includes instructions throughout the authorization process. If you need additional information, you may access the online help menu by clicking **Help**, just above the navigational menu.
- Do not use the browser's **Back** or **Forward** buttons to navigate within the application. You will risk losing data you have entered. When you want to exit a screen, use **Close** or **Cancel**. Before you **Cancel** from a screen, be sure you have submitted or saved your information.
- Do not "double click" while in the application.
- The system automatically logs out if no data is entered for 30 minutes. Be sure you have saved all information entered before leaving the computer or it may be lost.
- If you log in three times with an incorrect password the system will lock you out for 10 minutes. After 10 minutes, you may log on as usual.

ADDING/EDITING USERS IN THE SYSTEM

- Anyone who enters an authorization request into the system must be recognized as an active system user and must be logged into the system.
- Individuals may be changed from the status of active to inactive through the systems administrator.
- Only individuals with a user role of ***System Administrator*** may make changes under the Administrator section. *Administrator* abilities include:
  - Adding users;
  - Assigning logins and passwords;
  - Entering providers;
  - Entering procedure codes; and,
  - Entering diagnosis codes.
- Once a system user is assigned a password, he/she will be asked to enter a new, self-generated password the first time he/she logs on.

AUTHORIZATIONS

- There are three steps to completing an authorization:
  - Entry Request
  - Request Preview
  - Request Confirmation
- Unless all of these are completed you will **not** have a valid authorization. You must receive the final **confirmation** and **case number** to verify the information has been sent to the Plan.
- All fields with an asterisk(*) <u>must be completed</u>.
- When entering a member ID number you <u>must enter the hyphen</u> and the suffix -01.
- All mandatory fields of the questionnaire must be completed to receive an approved authorization. If information is left blank the authorization will pend until the information is obtained.
- The questionnaire must be completed in the Preview section of the authorization process. Once the request is submitted for the final confirmation, you may not go back to add or edit any information.
- You may receive messages once the original information is entered. If you receive an error message, it must be corrected before you continue.
- The system will assign a case number for pended and approved authorizations. Therefore, authorizations must be approved in order to be valid and allow the claim to process correctly.

ADDING SUBMITTING AND FREQUENTLY USED PROVIDERS

- To complete the add process click Add and verify the provider has been loaded before clicking Submit. If this step is skipped, the provider will not be added to your list.