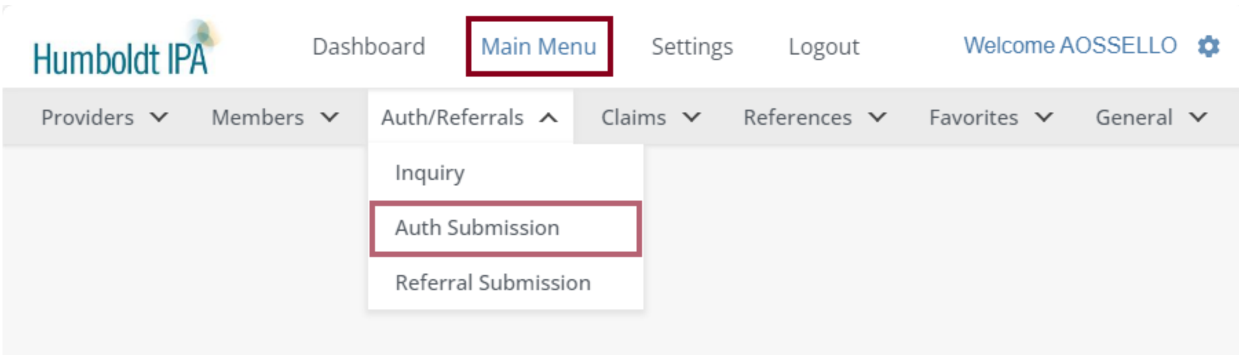
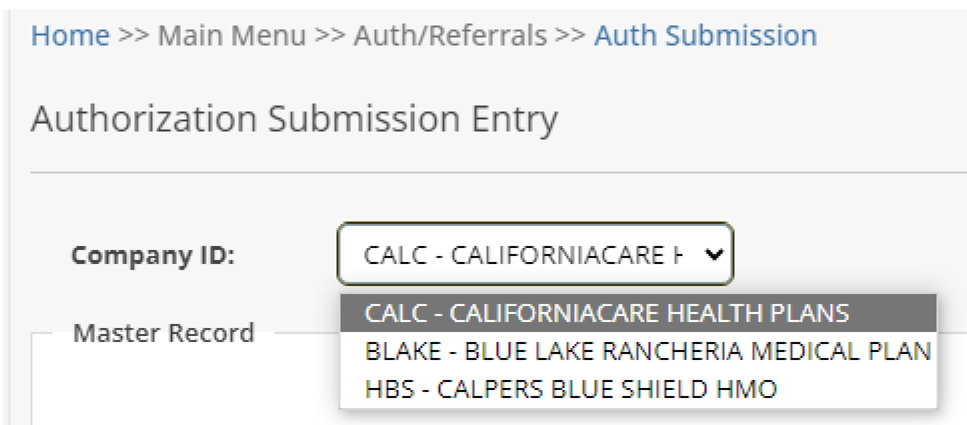
EZ-NET Authorization Submission Guide

1. Click on the Main Menu tab to show the drop-down menus for authorization, claims, and EOB history searches. Under the **Auth/Referrals** drop-down menu, select **Auth Submission**.

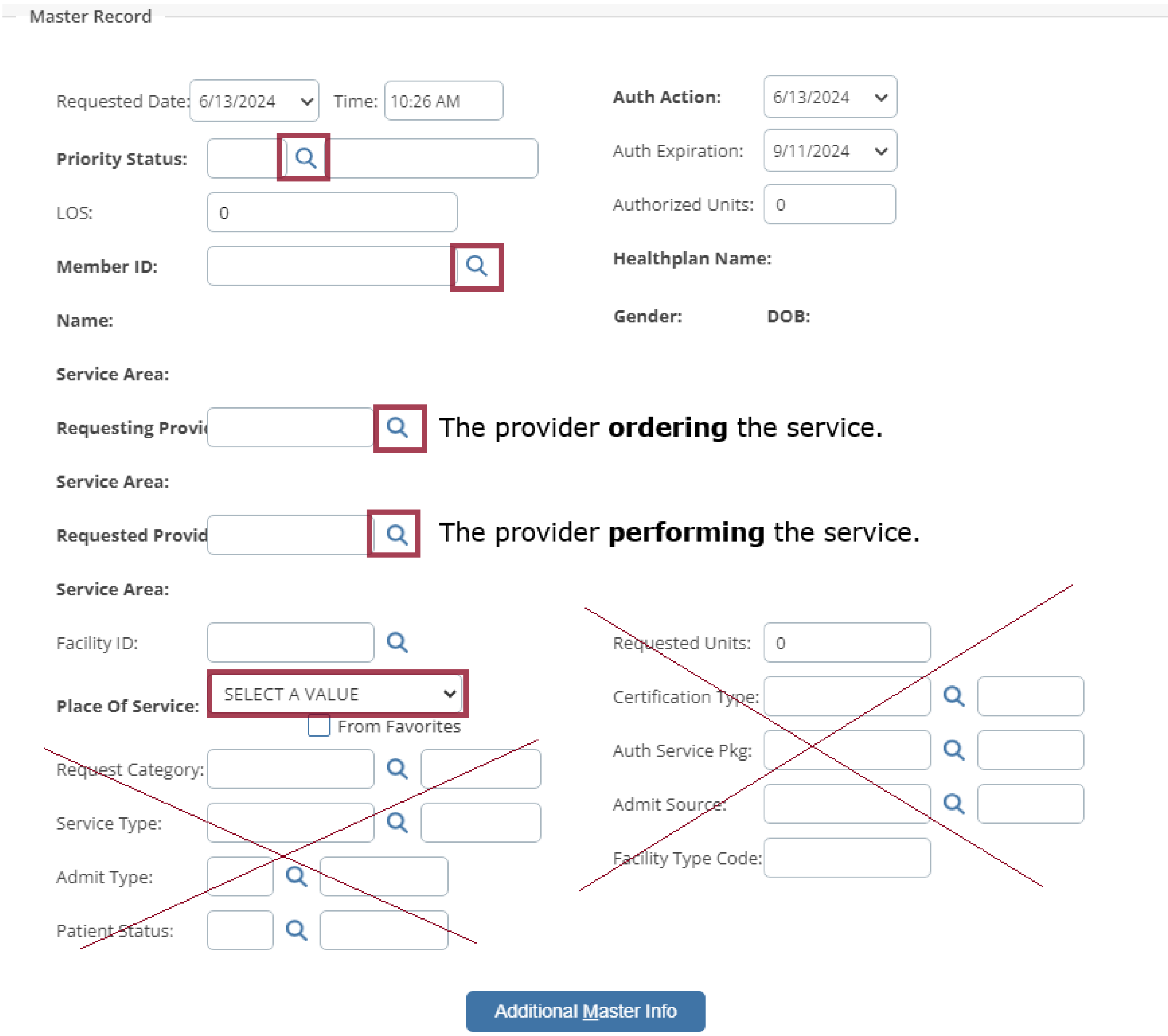


2. Select the member's health plan first, changing this later will reset the page. CaliforniaCare is Anthem Blue Cross.

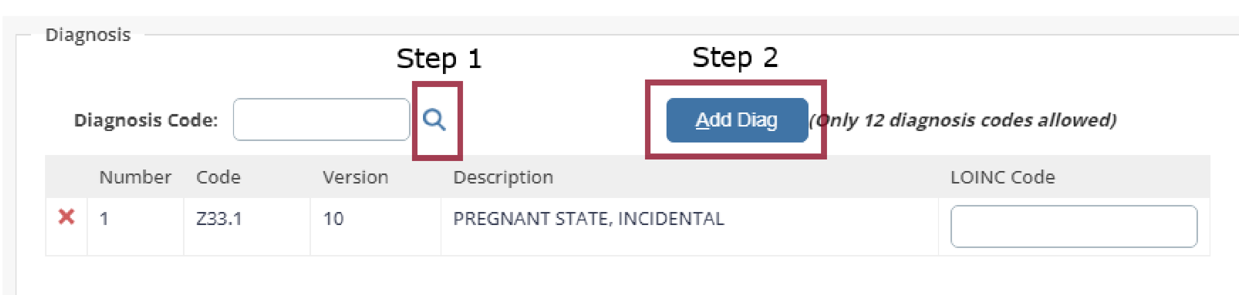


3. Moving from the top of the page to the bottom, only enter the **BOLDED** fields. Use the magnifying glass next to data fields to search for members and providers by name and/or date of birth. It is best to **only** enter the date of birth and first three letters of the last name.

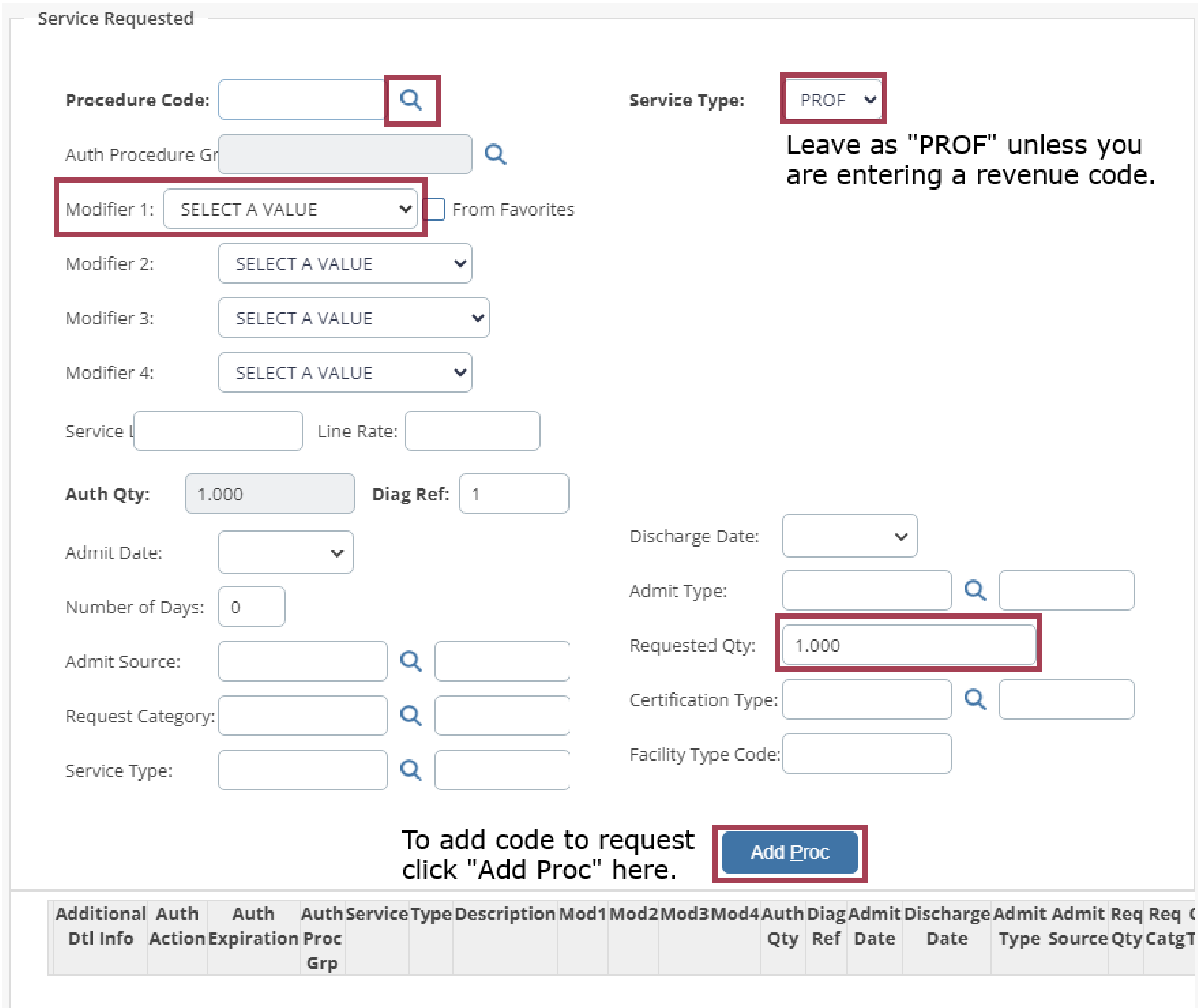
   For some facilities if you are unable to find the provider you may search for the facility in the "Last Name" field instead. For example, you can type "UCSF" in the last name field to select UCSF Medical Center as the requested provider. Open Door providers are entered as the overseeing physician. If you are unable to find a provider you may enter "1820" as the ID. If you use 1820, list the name and contact information of the provider in the notes at the bottom of the request.



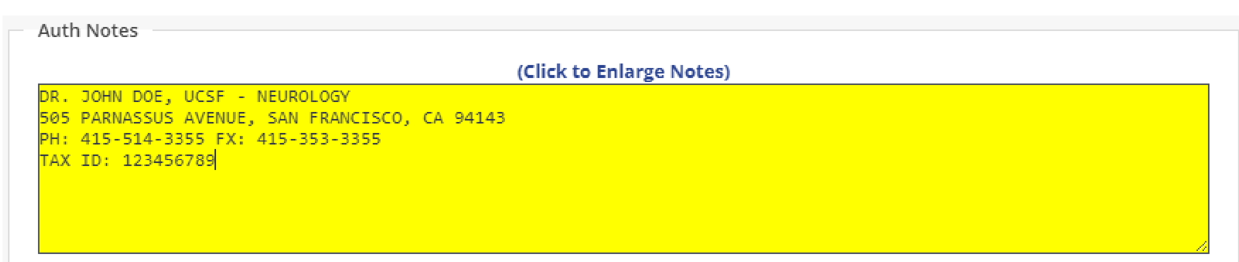
4. Enter the **Diagnosis Codes** by clicking the magnifying glass next to the empty field. Click "Add Diag" to add the entered code to the request.



5. Enter the **Procedure Code** by clicking the magnifying glass next to the empty field.



6. Add any additional notes to the request. Any fax numbers you would like updates sent to should be included here. If you entered 1820 on the request, here is where you must enter the provider's name, practice name, address, phone and fax numbers, and TAX ID.



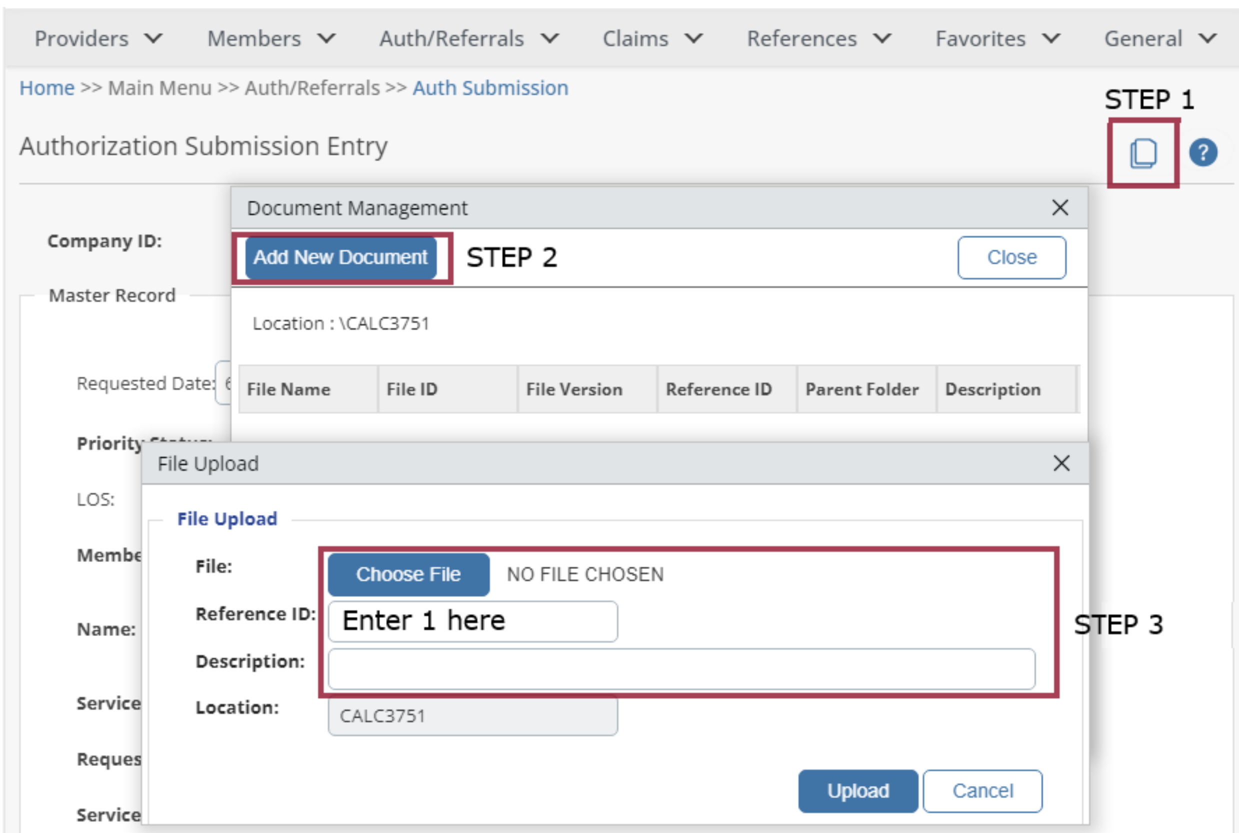
7. Every authorization must have documentation supporting the request included with it. If you plan to fax this information instead of uploading it, you must upload something indicating documentation will be faxed. To avoid having your request cancelled, ensure this information is sent within the day the authorization was submitted. Please only attach the documentation minimally necessary to support the request.

CLINCIALS MUST BE UPLOADED IN THE ORIGINAL EMR FORMAT.

To upload documentation to your request, scroll to the top of the page and select the button.

This will bring up the Document Management window. Select “Add New Document” to bring up the File Upload window.

Click “Choose File” to select a document from your device. Enter “1” in the Reference ID field, then add a short description of the content of the document. Finally click “Upload”.



8. Finally, click “Submit Request” at the bottom of the form to submit the authorization request. You will be taken to a screen that shows the tracking number for your authorization. Make note of this number so you may refer to it later.