

Pre-Authorization & Pre-Determination

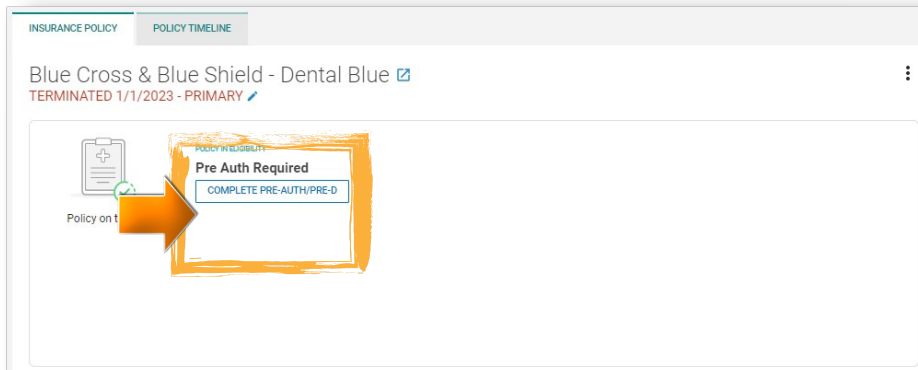
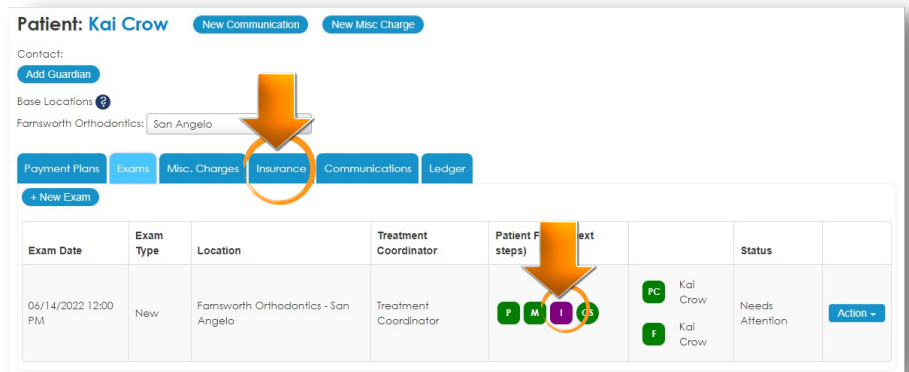
A guide for when OrthoFi's Insurance Specialists attempt to verify insurance benefits and are informed that a Pre-Authorization is Required OR that a Pre-Determination is Recommended.

***If you do NOT want to file a Pre-Determination, you still need to complete the actions below.**

Pre-Authorization Required or Pre-Determination Recommended Process:

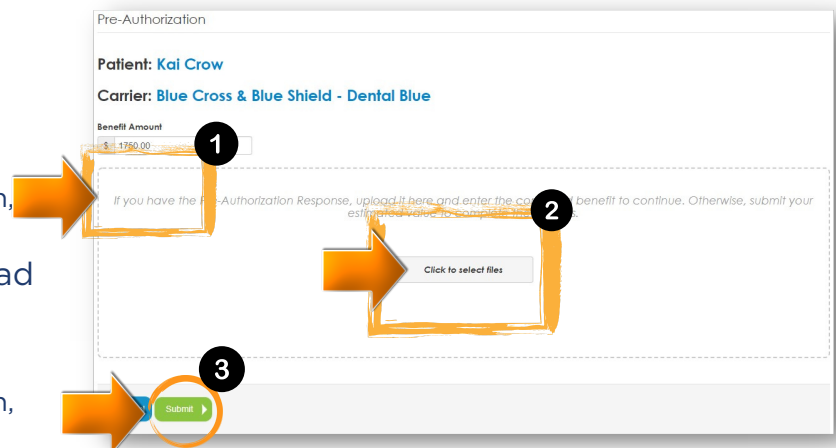
- Patient Detail Page > "I" Icon or Insurance Tab > "Complete Pre-Auth/Pre-D" > Benefit Amount \$ > Upload file > Submit

'Click' on the Insurance tab or the Purple 'I' icon to navigate to the Insurance Summary Page (ISP)



'Click' on the 'Complete Pre-Auth/Pre-D' button

1. Enter the 'Benefit Amount'
 - a. If you choose to not file a Pre-Determination, please enter '0' for the benefit amount
2. 'Click' on 'Click to select files' and upload the Pre-Authorization or Pre-Determination document
 - a. If you choose to not file a Pre-Determination, please upload a blank document
3. 'Submit'



Pre-Authorization Required:

- When Pre-Authorization is required, recommended treatment must be approved by Insurance, before the treatment is rendered for the Insurance plan to pay benefits.
- OrthoFi's Insurance Specialists will leave detailed notes on what is required for the Pre-Authorization (medical necessity, scoring index, x-rays, etc.) this can be seen on the Insurance Summary Page (ISP).
- **Estimated benefits will NOT populate if Pre-Authorization is Required.**

Pre-Determination Recommended:

- When a Pre-Determination is recommended prior to providing services, it is used to determine the exact benefit and patient responsibility.
- **This is NOT required. Benefits may still be allowed if a Pre-Determination is not filed.**
- Practices will submit Pre-Determination forms to carriers directly.
- OrthoFi's Insurance Specialists will leave detailed notes on what should be included in the Pre-Determination form, which can be viewed on the Insurance Summary Page (ISP).
- Once the practice is informed of the results of the Pre-Determination from the carrier, navigate to the Insurance Summary Page (ISP). From here, the Insurance icon will now turn green.
- **Estimated benefits WILL populate, and are always set at the Maximum amount.**

NOTE

- Always submit your Pre-Authorizations and Pre-Determinations with the same procedure codes and fees that you will submit on the insurance claim, and build your Treatment Plan in OrthoFi accordingly.
- Once received, **ALWAYS** scan and upload your Pre-Authorization and Pre-Determination form to the Insurance Summary Page (ISP) for OrthoFi's Claims Team to have as a reference.
- Practices may submit a Pre-Determination for any patient, regardless of OrthoFi's recommendation.