

Procedure Code Groups

For your convenience, UHA has combined certain procedure code into code groups. This means you only need to enter one of these codes and the total quantity of visits instead of entering each code and quantity individually. For example, we have combined Chiropractic codes 98940, 98941, 97110, 97140, 97124 into a code group. If you are requesting 98940 x 4, 98941 x 4, 97110 x 4, 97140 x 4, 97124 x 4 you will enter 98940 and select the Chiropractic Code group radio button on the right. Enter the max quantity of 4. You will have then requested all codes within the group, for 4 visits each.

CIM Submissions Using a Code Group

Initial Request

1. From the member search option, enter the member's ID and select search.
2. Verify member eligibility.
3. Select "Submit Pre-Auth" in the top right corner. From the new Assign a Type of Care page, select "Pre-Authorization" and then the appropriate type of care, either Behavioral Health or Medical.

Member Search

Last Name SSN/MBI Carrier All Carriers
First Name DOB mm/dd/yyyy Member ID UHA12345 Eligibility Date mm/dd/yyyy

Search Results / Test, 1

Member Notes Auth History Current Auths Claims Copy Info Disclosure Extra Info Flags

1 Test
MEMBER ID: UHA12345

Address: No Address on file
Primary Contact: No Primary Contact on file
SSN: No SSN on File
DOB: 01/01/1900 (Age 120 years)
Language: No Language on file
Gender:

Plan Information [COB Records Exists](#)

Umpqua Health Alliance Termed
Benefit Plan: Umpqua Health Allii

[Show More Contac](#)

Member's Care
No pcp defined for t

Care Sub-Type & Dates
Narrow down your options

Care Details
Providers, types & more

Services & Limits
Setup services & limits

Select an Auth Type
Chiropractic

Urgency
Standard

Referring Provider
Hoyme, James, DO (NPI: 1831250133) - Umpqua Health Newton Creek LLC
Minimum 2 characters to trigger autocomplete [Advanced Search](#)

Delivering Provider
Rohm, JD, DC (NPI: 1356504443-1366741860) - Tri-City Walk In Chiropractic
Minimum 2 characters to trigger autocomplete [Advanced Search](#)

Facility
Type to search facilities
Minimum 2 characters to trigger autocomplete [Advanced Search](#)

4. Next, enter the applicable auth type from the drop down.
5. Select appropriate urgency status. This will default to Standard. If you are requesting expedited status, please indicate how the request, if following the standard timeframe, could seriously jeopardize the member's life or health or ability to attain, maintain, or regain maximum function.
6. Enter the referring and delivering provider by entering the provider name or NPI number in the text field.

7. Select CONTINUE in the bottom left corner.
8. Enter the diagnosis code, procedure code, date range and max units.
 - a. To select or view the availability of a code group, enter the procedure code and select it from the autocompleted hyperlink. Then select the drop down menu labeled "Procedure Code Group".
 - i. If the only option is "Default (Use specific codes)" then there is not a code group available.
 - ii. If there is a code group available, it will appear in this list above the default option.
 - b. Then select ADD.

Submit Care Type

Care Details Providers, types & more | Services & Limits Setup services & limits | 5 Additional Information Comments, documents, etc.

Diagnosis Codes (Allows multiple entries)
Type to search diagnosis codes
Minimum 2 characters to trigger autocomplete

Services & Limits

Add Service

Procedure Code: 99215 - Office o/p est hi 40-54 min


From Date: 01/28/2021 | To Date: 01/28/2022 | Max Dollars | Max Units: 1


Procedure Code Group: Default (Use specific codes)
E&M: Office/Outpt. Services
Default (Use specific codes)

Services

<input type="checkbox"/>	Code Group	Procedure Code	Service Dates	Limits
No data available				

CONTINUE | BACK

9. Select continue in the bottom left corner.
10. Attach supporting documentation by selecting the "+" sign in the Attach Documents header. Browse for the documents, then select OPEN.
11. If needed, you can leave a comment in the Comments box.
12. Do not make changes to the Options box, Received Date/Time nor Submitting Office.
13. Select CONTINUE in the bottom left corner.
14. Review your submitted authorization. Then select FINISH.
15. Your request has been successfully submitted when you're the final status is Received. To open the submission, select REVIEW REFERRAL/AUTH.
16. To view the codes in each code group, select the  in the procedure line under the "Services" section in the column labeled "Code Groups". A new window will appear with the codes requested within the code group. In the example below, the first line request codes 97110, 97124, 97140, 98940, 98941 with a quantity of 4 units for each code.

Received 

Reference ID: 3312251

Authorization #: None

Final Status: Received

Notify me of Auth status changes



REVIEW REFERRAL/AUTH

PRINT THIS RECEIPT

CLOSE

Services

Showing 1 to 2 of 2 entries

Service Id	Code Groups	Service Dates	Procedure Codes	Status	Limits
3311661-1	Chiropractic 	01/28/2021 - 04/28/2021	98940: Chiropract manj 1-2 regions	[None] Use Authorization Status 	Cost to Date \$0.00 Max Visits/Units 4
3311661-2	Default (Use specific codes)	01/28/2021 - 04/28/2021	99203: Office o/p new low 30-44 min		

Show 10 entries

Procedure Code

Procedure Code Range

Date of Service

Procedure Code Range	Effective Date	Term Date
97110	03/01/2019	08/01/2019
97110	12/01/2020	[None]
97124	03/01/2019	08/01/2019
97124	12/01/2020	[None]
97140	03/01/2019	08/01/2019
97140	12/01/2020	[None]
98940	03/01/2019	08/01/2019
98940	12/01/2020	[None]
98941	03/01/2019	08/01/2019
98941	12/01/2020	[None]

Show 10 entries

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