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Jiva Provider Portal
Providers use CHPW’s Care Management portal Jiva to submit authorization requests online 24/7, check eligibility and authorization status, and print approval letters.

For registration issues or technical assistance contact Portal Support at portal.support@chpw.org.

Jiva Provider Portal URL:

https://jiva.chpw.org/cms/ProviderPortal/Controller/providerLogin

The Dashboard

Widgets
A widget is a “sneak peek” into a larger set of information. Jiva’s widgets track work and facilitate communication between CHPW and providers.
The widgets on the Dashboard will not update unless the “Refresh” button is clicked. Jiva displays the time since the last refresh next to the “Refresh” button.

**Personal Productivity**

- **My Requests Widget** links to a list of all open requests for the user. Changes can be made to requests in this view. See “Providing Additional Information.”

- **Work in Progress Widget** graphically represents the status of requests in real time. Click on any bar in the graph to view the request(s).
• **Requests by Type Widget** Graphically displays the status of each open request by request type (Outpatient, Inpatient, Behavioral Health-Outpatient and Behavioral Health-Inpatient). Click on any bar in the graph to view the request(s).

• **Decisions Made Today Widget** graphically represents CHPW’s authorization decisions in real time. Click on any bar to view the request(s).
**Team Productivity**

Note: CHPW must add this for your facility or office. If you want this configuration, please submit a request to Portal.Support@chpw.org.

- **Team Members**
  - Displays all users configured to the selected team and shows their availability on a given day

- **Team’s Work in Progress**
  - Graphically represents the requests created by the team that are being reviewed by CHPW staff and reflects the status in real time
  - See “Tracking a Request”

- **Team’s Requests by Type**
  - Graphically displays the status of each open request created by team members by request type (outpatient or inpatient)
Menu

1. My Members

- A search of all members for whom the logged in user has submitted a request
- You may need to change your selection in the “View Cases” dropdown

2. New Request

- The screen from which you can create a request
- If the signed-in user has not submitted a request in the past for the patient, they will be required to search by the Member Identification Number for the initial request. This is intended to protect patient confidentiality and accidental disclosure of PHI.
- See “Submitting a Request”

3. Search Request

- Search for a previously submitted request by various criteria
Memory List

The Memory List is intended to aid in navigation of the provider portal and to save steps for users submitting requests.

The Memory List holds the last 10 records left open. “Records” include pages such as the request initiation screen, searches, and patient panel.

Requests “held” in a user’s memory list cannot be accessed to edit by other users. This ensures that duplicate work does not take place. Consequently, it is important to release an episode from your memory list once you are done making changes.

Open the “Memory List” by clicking “Memory List” on Jiva’s top menu bar.

In the resulting drop-down list, click the “x” on the far-right side of the line you wish to remove, or click “Close All” to close all.
The calendar function allows a user to track their work and schedule tasks. The calendar can be “blocked” in order to reflect team availability in the Team tab of the dashboard.

**HOW TO BLOCK CALENDAR**

1. Select “More” from the top right corner of the calendar

2. Select “Block Calendar”

3. Complete fields as appropriate
Help Function

The “Help” button guides users to information that applies to the page from which it is launched. For example, if “Help” is clicked while in the calendar screen, Jiva displays information specific to the Calendar.

How to Find Out if Authorization is Required

CHPW.org has several resources to assist in finding out if auth is required. Go to CHPW.org, click “Provider Center” and then click “Prior Authorization” from the resulting drop-down menu.

From this webpage, you will find links to summaries of whether auth is needed. These include Medical & Surgical Services, Behavioral Health Services, and Professionally Administered Medications. For a short video demonstration of how to find these resources, click here.

This same page also contains a link to CHPW’s Procedure Code Lookup Tool, which
provides more details about specific codes, including if prior authorization is required and any documentation required for review. For a short video demonstration on how to use the Procedure Code Lookup Tool, click here.

## Working in Jiva Provider Portal

### Submitting a Request

First, in order to create a request, select “New Request” from the menu

Enter the member ID #

*Note: If the signed-in user has not submitted a request in the past for the patient, search for the Member Identification Number for the initial request. This is intended to protect patient confidentiality and accidental disclosure of PHI.*

*The member ID# is a 10-digit number ending in 01. Example: 1234567801*

*All 10 digits must be included. No other search fields are required when performing a search by member ID#.*

Cascade Select members will be effective January 1, 2021. Their member ID#s start with an alpha prefix of “BT.” Example: BT1234567801
Click the blue “Search” button

Jiva drops down the search results

Select the type of request from the drop-down on the right side of the screen

Note: Outpatient requests are typically submitted via “Prior Authorization.” You may, depending on your practice and the situation, submit the other types of requests such as “Behavioral Health Inpatient,” “Behavioral Health Outpatient,” and “Inpatient Services.” You will never submit “Case Management” or “Disease Management” requests, though, so these are lined out in the screenshot below.

Jiva displays the “Prior Authorization Request” screen

Complete all required fields in the Episode Details section using the dropdown menus.
Complete all required fields in the Diagnosis section using the drop-down menus.

Notice you can free-text search for a diagnosis in addition to simply entering the actual diagnosis code.

Complete the “Provider Details” section by clicking the blue “Attach Providers” button.

Jiva displays the “Attach Providers” screen.

Upon entering your search criteria, Jiva displays a drop-down of possible options, with one option highlighted in blue.
Click away so that this sub-menu disappears and then click the blue “Search” button.

Jiva displays a list of Providers that match your search criteria.
After finding the provider you wish to attach, select the appropriate role from the “Provider Role” dropdown. For example, inpatient episodes require the Provider Role to be “Admitting Facility,” and outpatient auth requests require the Provider Role to be “Treating Provider.” If the matching Provider Roles are not indicated, Jiva will display a message once you click “Submit” letting you know that the Provider Type needs to be changed.

After selecting the correct role, press the gear symbol on the left side of the line item and select either “Single Attach” or “Multiple Attach” as appropriate.

Note: “Single Attach” is appropriate if you intend to attach only one provider. “Multiple Attach” is appropriate for requests in which there are multiple
providers involved. Each Provider chosen in a “Multiple Attach” appears at the bottom of the screen while you to continue searching.

Search Results

<table>
<thead>
<tr>
<th>Provider ID</th>
<th>Provider Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>99777</td>
<td>THOMAS, RICHARD, J</td>
</tr>
</tbody>
</table>

Review all providers attached at the bottom of the page (if attaching multiple; if attaching a single provider, skip this step). Modify roles if necessary.

Once you are satisfied with the providers selected, click the green “Attach” button.

The Prior Authorization Request screen displays. Notice that the Providers chosen now appear in the Provider Details section.
Complete the Service/Specialty Drug Request sections as appropriate. Click the blue “Add” button to complete the addition.

Note: In the “Service Type” drop-down menu, note that the acronym “LE” appears. (See screenshot below) It stands for “Limited Extension.” Use the “LE” Service Type when requesting an extension of the amount, frequency, or duration of certain covered benefits (WAC 182-543-7200).

LE is only available to Apple Health members. A request for LE must be made before the extended service is rendered. If the service has already occurred, LE will not be approved. Providers must include a reason for requesting above the HCA limit to help justify the excess amount.
Click the blue “Add” button.

Jiva displays the Service in a bar right below the “Add” button. In this way, add as many Service Lines as are needed for your request.

Complete the Documents section. Attach a document with relevant clinical information supporting the request being made on behalf of the member. Add a descriptive title, select the document type, and press “Browse” to upload the desired document. Word documents, PDF, and JPEG are acceptable.
Complete the Provider Contact Info. Faxback # is a required field.

Complete the Notes section. Provide the CHPW reviewer any additional applicable information. **Include the fax number to which you wish to have correspondence sent regarding this request.**

Click the green “Submit” button.
Jiva displays the Request Details page.

<table>
<thead>
<tr>
<th>Authorization Details</th>
<th>Episode Details</th>
</tr>
</thead>
</table>

**Automatic Review of Requests**

Jiva will automatically review some requests. This streamlines commonly approved authorization requests and will improve the speed in which your requests are completed.

Consequently,

- Jiva will automatically approve and close some requests upon submission
- Additional service codes may be automatically added to your request upon submission
- Your “Auth End Date” and “Requested #” may be updated with the standard approval dates and units upon submission.
- No information can be changed in the request once it is auto approved and closed
  - If a change is required, submit a new request and reference the cert # or Episode # of the previous request so that it can be easily found and voided

For a demonstration of what the auto-approval process looks like in Jiva, [click here](#).

If your request is auto approved, the Request Details screen will show the Decision as “Approved” and the Episode Status is “Closed.”
Tracking a Request

Jiva provides real-time request status.

Dashboard Widgets
For an overview, see the appropriate widget on the Jiva Dashboard.

Finding a List of all your Requests
The My Requests widget will reflect the total number of open requests submitted by the user. Clicking on the blue text will open the complete listing of open requests submitted by the user.

After opening My Requests, open the gear menu at the left of the desired line item and select either “Open” to access the whole request, or “View Episode Abstract” to view a summary.

The Search Request function allows a search for submitted requests.
Enter a search term and click the green “Search” button.

**Viewing Work Submitted By Others**

A user can view authorizations submitted by someone else in their practice. However, in order to facilitate this, each account must be tied to the same **Requesting Provider**. Requesting Provider is the criterion by which Jiva determines shared access.

**Providing Additional Information**

After being notified that CHPW reviewers need additional documentation for your request, you can quickly provide it by adding it to the existing request.

Requests that require more information for a determination to be made will appear as a bar in the “Work in Progress” widget of the Dashboard. Click on the bar to open a list of all requests that need more information.
Jiva displays the Work in Progress screen. To open the desired Episode, click the Gear icon and then Open from the resulting drop-down menu.

### Work in Progress

- **Pending Submission**: 1
- **Further Information Required**: 1
- **Pending Decision**: 1

### Further Information Required

- **Today**: 1
- **Total**: 1

Jiva displays the Request Overview screen. Look at the Notes section for the UM Reviewer’s documentation of what information is needed.
In this same screen, follow the color coding to find the link needed in order to add the needed information to the request.

Letters
Providers can view letters added to their authorization requests. For a short video demonstration on how to view letters, click here.

View letters
In the Request Overview screen
1. Click the “Hamburger” button on the upper right side of the screen. This button is so named because its 3 lines look like 2 sides of a bun with a hamburger in the middle.
2. In the resulting drop-down menu, click “Correspondence” under the “Episode View” column.

Jiva displays the “Letters” screen. All letters added to the request are listed.

Only active letters with a Printed or Faxed timestamp should be viewed (Deactivated letters are grayed out). Printed and Faxed timestamps appear in their columns.
### See to whom the letter was Printed or Faxsed

1. Click the box next to the letter to select it
2. Scroll down to view

### View the letter

1. Click the “Gear” icon to the left of the letter
2. Click “View PDF Preview” from the resulting drop-down menu
For additional support refer to the Provider Portal Frequently Asked Questions document or e-mail portal.support@chpw.org.

Appendix 1 – How-to Videos

How to find if Prior Authorization is required

Procedure Code Lookup Tool

Jiva Auto Approval example

How to view letters