



PSYCH CONTINUED STAY REVIEW REQUEST eQSuite™ User Guide

Introduction

This user guide is intended to provide guidance for submitting PSYCH continued stay review requests through our Web-based system, eQSuite™.

The following will be explained in detail :

- ▶ **Review Submission Timeframe**
- ▶ **Getting Started**
- ▶ **User Log In**
- ▶ **eQSuite Homepage**
- ▶ **Start Tab**
- ▶ **Physician Contact Information**
- ▶ **DX Codes/Proc Items Tab**
- ▶ **Search Function (DX Codes /Proc Items Tab)**
- ▶ **Vitals/Labs Tab**
- ▶ **D/C Plan**
- ▶ **Symptoms Tab**
- ▶ **Meds Tab**
- ▶ **Summary Tab**
- ▶ **Respond to Additional Information Tab**
- ▶ **Online Helpline Tab**
- ▶ **Search Tab**
- ▶ **Utility Tab**
- ▶ **Letters Tab**
- ▶ **Provider Reports Module**

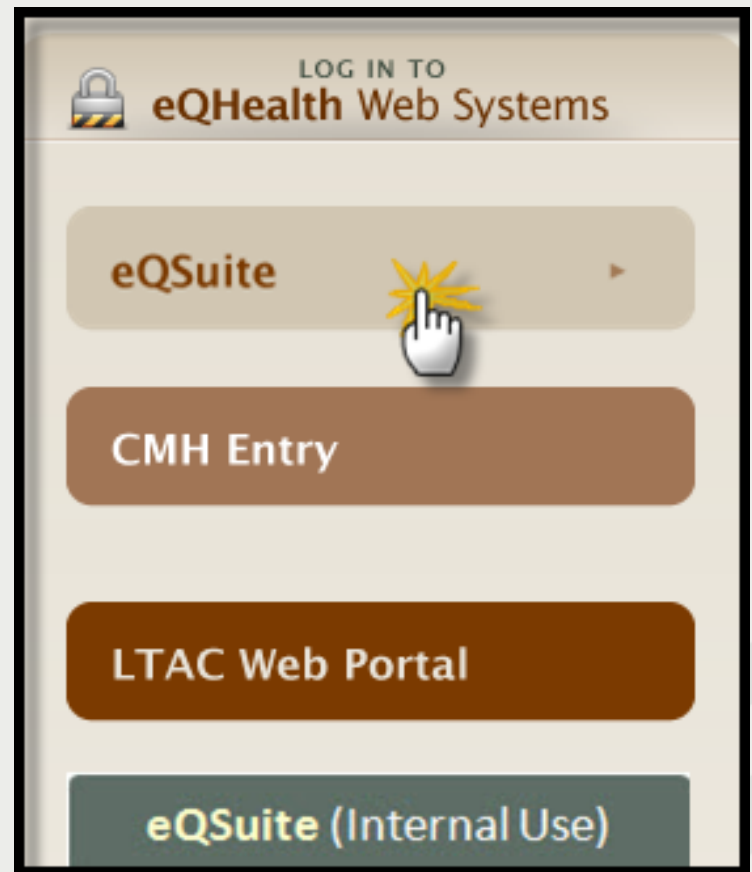
Review Submission Timeframe

- » A review request for a continued length of stay for Per Diem reimbursed hospitalizations should be submitted the **day prior to the last day certified.**
- » For Per Diem hospitalizations on a continued stay review, each day of care is evaluated based on the clinical information provided by the hospital.

Getting Started

Access to eQSuite™

- » eQSuite is accessed through our website: <http://il.eqhs.org>
- » From the homepage, scroll down to the bottom right side of screen.
- » Click on the first eQSuite link located under eQHealth Web Systems (as shown).



User Log In

Enter the assigned eQHealth username and password and click login.

Username

Password

Login

[forgot password?](#)

Message Board:

Keep Providers Alert

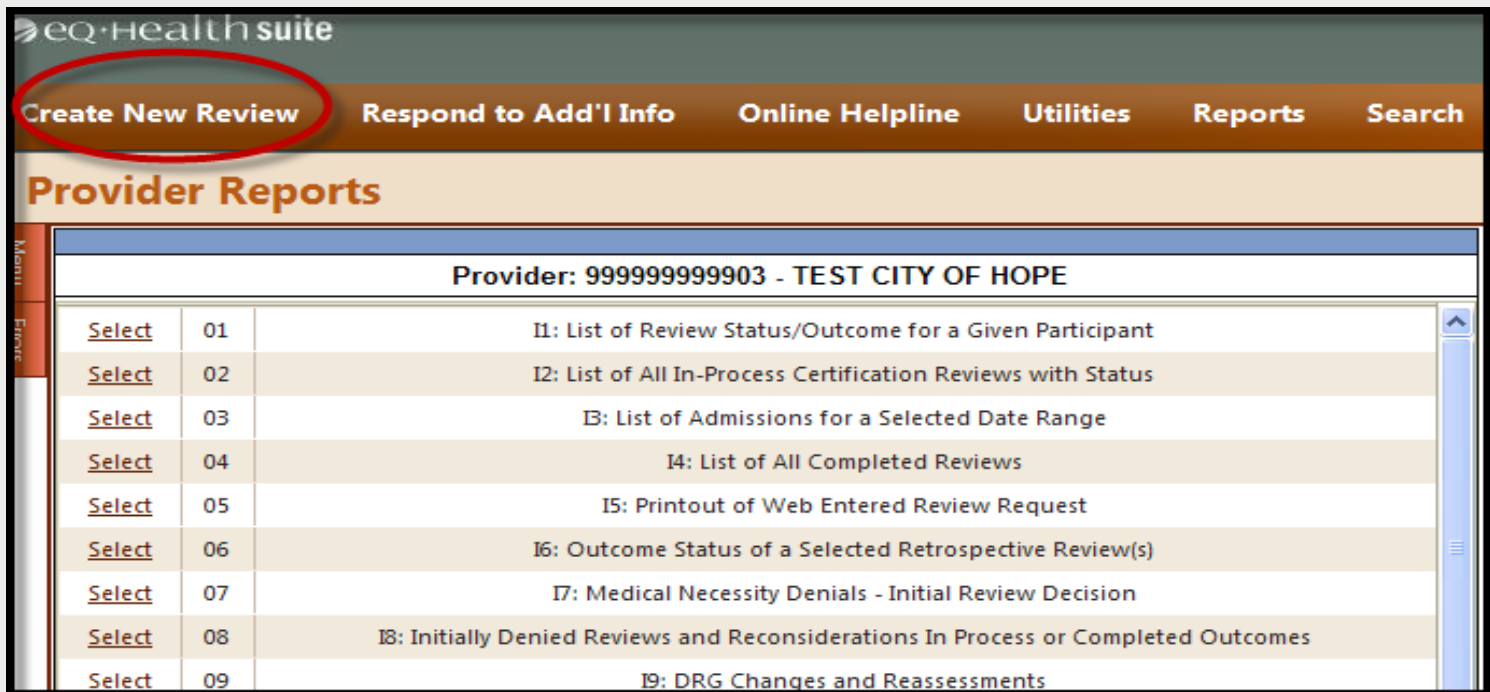
Forgot Password?

- Click on **forgot password**- you will be instructed to enter your username to receive a temporary password.
- Once logged in, copy new password and follow directions to reset.

Message Board- check on the logon screen for important messages regarding the Web.

eQSuite™ Homepage

- » Once the system has been accessed, the Provider Reports menu will appear first on your screen.
- » To begin the review, click **Create New Review** from the menu bar.



The screenshot displays the eQSuite homepage. At the top left, the logo 'eQ·Health suite' is visible. Below it is a navigation menu bar with the following items: 'Create New Review' (circled in red), 'Respond to Add'l Info', 'Online Helpline', 'Utilities', 'Reports', and 'Search'. Below the menu bar is a section titled 'Provider Reports'. Under this section, there is a header for 'Provider: 999999999903 - TEST CITY OF HOPE'. Below the header is a table with 9 rows, each containing a 'Select' link, a number (01-09), and a description of the report.

Provider: 999999999903 - TEST CITY OF HOPE		
Select	01	I1: List of Review Status/Outcome for a Given Participant
Select	02	I2: List of All In-Process Certification Reviews with Status
Select	03	I3: List of Admissions for a Selected Date Range
Select	04	I4: List of All Completed Reviews
Select	05	I5: Printout of Web Entered Review Request
Select	06	I6: Outcome Status of a Selected Retrospective Review(s)
Select	07	I7: Medical Necessity Denials - Initial Review Decision
Select	08	I8: Initially Denied Reviews and Reconsiderations In Process or Completed Outcomes
Select	09	I9: DRG Changes and Reassessments

Start Tab (continue)

Begin Review:

1. Provider ID and Name automatically populates according to the username entered.
2. Select setting: PSYCH
3. Review Type: Select Cont Stay from the drop-down menu
4. Enter TAN
5. Click **Retrieve Data** to proceed with the review request

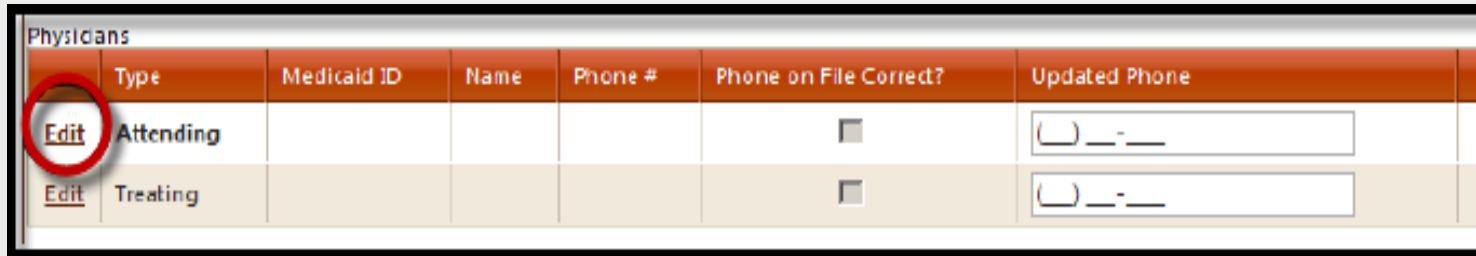
The screenshot displays the 'Start' tab interface, specifically the 'Review Type and Settings' section. The form contains the following elements:

- Provider ID:** 12 Digit ID
- Provider Name:** ABC Hospital
- Choose Setting:** Med/Surg (radio button)
- Review Type:** Admission (dropdown menu)
- TAN:** (empty text input field)
- RETRIEVE DATA:** (button, circled in black with a red arrow pointing to it)

Start Tab (continue)

Physician Contact Information

1. Click **edit** to enter the attending physician's Medicaid #.



The screenshot shows a table titled "Physicians" with the following columns: Type, Medicaid ID, Name, Phone #, Phone on File Correct?, and Updated Phone. The first row is "Attending" and the second is "Treating". The "Edit" button in the first row is circled in red.

Type	Medicaid ID	Name	Phone #	Phone on File Correct?	Updated Phone
Attending				<input type="checkbox"/>	() _ - _
Treating				<input type="checkbox"/>	() _ - _

2. Enter the Physician's 9-digit Medicaid # and hit **tab** to auto-populate name and phone number **OR** click **search** to look up physician.



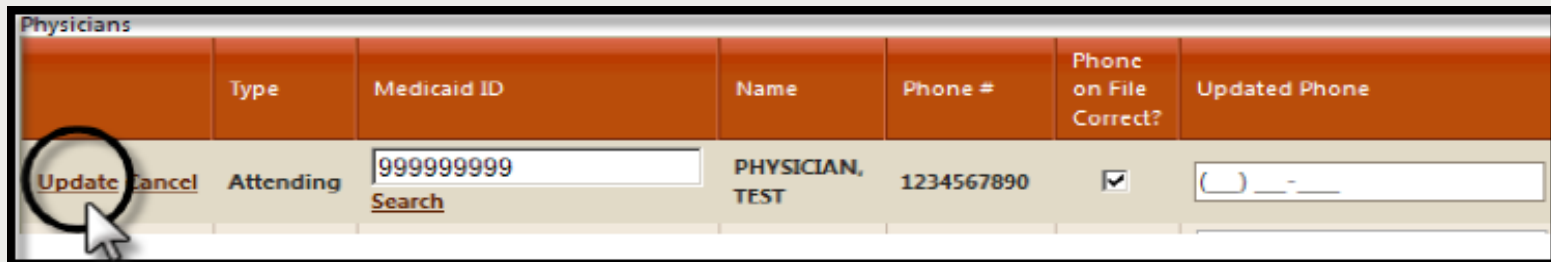
The screenshot shows the "Physicians" table with the "Medicaid ID" field highlighted. A black arrow points from the "Search" button to the "Medicaid ID" field. The "Search" button is circled in red.

Type	Medicaid ID	Name	Phone #	Phone on File Correct?	Updated Phone
Attending	<input type="text"/>			<input type="checkbox"/>	() _ - _

NOTE: *If the physician is not listed, cancel the review and call our Helpline to request a temporary physician ID. Once you receive the TPxxxx number, you may use it as the Medicaid ID to submit Web review.*

Start Tab (continue)

- Use your mouse to **either** check the **Phone on File Correct ?** box **or** fill in the ***Update Phone*** field with current number.



The screenshot shows a table titled "Physicians" with the following columns: Type, Medicaid ID, Name, Phone #, Phone on File Correct?, and Updated Phone. The first row contains the following data: Type: Attending, Medicaid ID: 999999999, Name: PHYSICIAN, TEST, Phone #: 1234567890, Phone on File Correct?: , Updated Phone: () _-_. The "Update" button is circled in black, and a mouse cursor is pointing to it.

Type	Medicaid ID	Name	Phone #	Phone on File Correct?	Updated Phone
Attending	999999999	PHYSICIAN, TEST	1234567890	<input checked="" type="checkbox"/>	() _-__

- Click ***Update*** on left to store the attending physician's contact information into the grid.

IMPORTANT: If there is a different physician covering the attending at the time you are submitting review, add their contact information as well. This is important for peer-to-peer conversation.

Start Tab (continue)

START Tab

- » **Proposed Discharge Date-** If the actual discharge date is unknown at the time of the review request, the proposed date will be recorded here.
- » Enter the **# of Days Requested**

DX CODES/ITEMS

» Click “Add” to submit any additional diagnoses or procedures since the last review point.

➡ If there are NO additional codes, move to the next tab.

Start	DX/PROCS	VITALS/LABS	DC PLAN	SYMPTOMS	MEDS	SUMMARY
-------	-----------------	-------------	---------	----------	------	---------

Add		Search		Refresh	
DX Code	Description	Code Identified Date	Principal		
311	DEPRESSIVE DISORDER NEC	09/17/2014	Y		

Add		Search		Refresh	
Proc Code	Description	Procedure Date			
No records to display.					

DX CODES/ITEMS (continue)

The Code Add/Edit Page will appear.

- ▶ Type in the ICD-9-CM code and hit *tab*
- ▶ Type in the *date identified*
- ▶ Click on **Add** to insert code in the grid.



The screenshot shows a web browser window titled "Code Add/Edit Page". The page contains the following fields and text:

- Code:
- ALCOHOL ABUSE-UNSPEC
- Date Identified:
- [Add](#) [Close](#)

The browser's address bar at the bottom shows the URL: <https://ilwebapps.eqhs.org:443/iltrainportal/PopupPages/DxCodeEditPage.a...>

Vitals/Labs Tab

Add any lab results from the last review point.

➡ *The vital signs are not required on continued stay reviews. SKIP to next tab.*

CHEMISTRIES


BAC/BAL: mg/dL %

CIWA: UDS: If positive, name: Amphetamines
 Barbiturates
 Marijuana

PHYSICAL

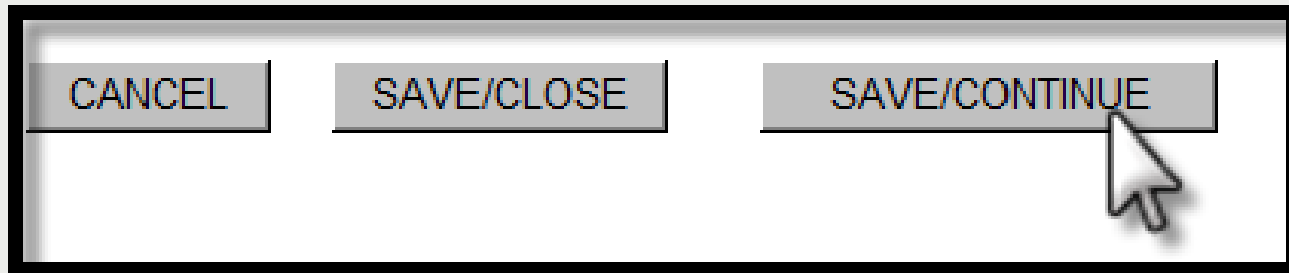
Temperature: °F Method:

Blood Pressure: /

HCG/UCG: LMP: 

BMI: (if eating disorder)

Vitals/Labs Tab (continue)



IMPORTANT: The **save/continue** button is used to save your work and to continue with the Web review. Click the save/continue button on the bottom of each screen.

► If you want to partial save, click the **save/close** button to close the review and store it in your partial saved records.

*Your review will be stored under the **Search** tab on the menu bar until the review is retrieved and submitted.*

DC Plan Tab

DISCHARGE PLAN:

Anticipated Discharge to and/or discharge reason: (Select one) None

Current DC Plan and progress toward discharge:

NOTICE: Include only brief discharge plan for each review point. Add clinical summary on Summary tab.

Home with phys follow up

- » Select from drop-down *anticipated discharge to or discharge reason*.
- » Type in *Current DC Plan*.
- » Click **Save/Continue**.

Symptoms TAB

The questions on the symptoms tab are required. The questions on the symptoms tab are required for continued stay requests. They pertain to conduct, activities and treatment while hospitalized

Start	DX CODES/ITEMS	VITALS/LABS	DC PLAN	SYMPTOMS	
				Yes	No
Did the patient elope during this hospitalization?				<input type="checkbox"/>	<input type="checkbox"/>
Did the patient have sexual contact during this hospitalization?				<input type="checkbox"/>	<input type="checkbox"/>
Has contraband been discovered in the patient's possession during this hospitalization?				<input type="checkbox"/>	<input type="checkbox"/>
Has any medication errors occur during this hospitalization?				<input type="checkbox"/>	<input type="checkbox"/>
Is the patient on q15 minutes or higher level precautions?				<input type="checkbox"/>	<input type="checkbox"/>

Note: If you answer **YES** to any of the questions on the symptoms tab **you must provide supporting clinical on the Summary tab.**

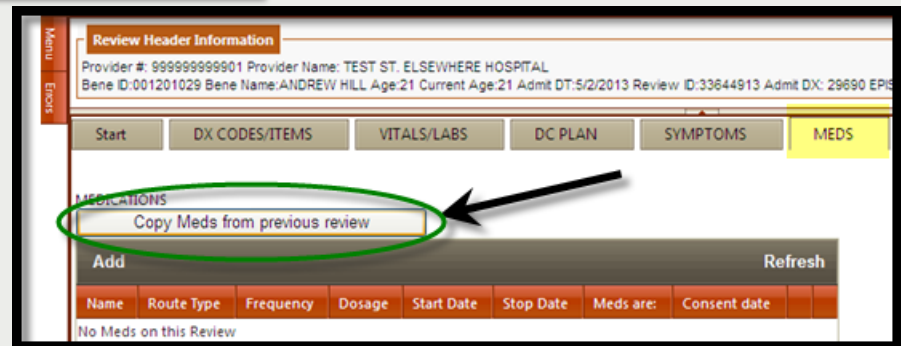
MEDS Tab

» The medication entered on the admission review may be copied by clicking **copy meds from previous review**.



The screenshot shows a web form titled "Code Add/Edit Page". It contains several input fields: "Med Name:" (text box), "Route:" (dropdown menu with "Select Route" selected), "Frequency:" (text box), "Dosage:" (text box), "Start Date:" (text box with a calendar icon), "Stop Date:" (text box with a calendar icon), and "Meds Are:" (dropdown menu with "(None)" selected). At the bottom right, there are two blue links: "Add" and "Close". A red arrow points from the "Add" link to the "Meds Are:" dropdown.

eqhealthsolutions.org



The screenshot shows a web interface with a "Review Header Information" section at the top, including fields for "Provider #", "Provider Name", "Bene ID", "Bene Name", "Age", "Current Age", "Admit DT", and "Review ID". Below this is a navigation bar with tabs: "Start", "DX CODES/ITEMS", "VITALS/LABS", "DC PLAN", "SYMPTOMS", and "MEDS" (which is highlighted in yellow). Under the "MEDS" tab, there is a "MEDICATIONS" section with a button labeled "Copy Meds from previous review" circled in green. A black arrow points to this button. Below the button is an "Add" button and a "Refresh" button. At the bottom, there is a table header with columns: "Name", "Route Type", "Frequency", "Dosage", "Start Date", "Stop Date", "Meds are:", and "Consent date". The table content shows "No Meds on this Review".

Click **Add** in the Medication Table. This will open a **Code Add/Edit Page**.

- If the meds have not changed at all in dosage, frequency or route select **same**.
- If the meds have stopped enter a **stop date**.
- If the meds have changed in dosage or frequency include start date and select **new**.
- Any new medication that has been given since the last review point will be a **new entry**.
- Click **SAVE**

Summary Tab

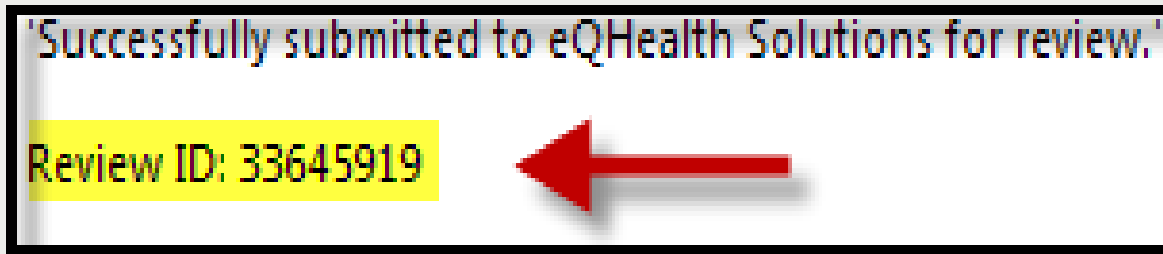
- **A short clinical summary is *required on each Continued Stay*** review to support the inpatient medical necessity for this patient's hospitalization. Include progression/regression, response to meds and services to support medical necessity of each day of care.
- » You must click **Submit for Review** at the bottom of the screen to submit review.



The screenshot shows a web interface for a medical review. At the top, there is a horizontal navigation bar with several tabs: 'Start', 'DX/PROCS', 'VITALS/LABS', 'FINDINGS', 'DC PLAN', 'MEDS', and 'SUMMARY'. The 'SUMMARY' tab is highlighted in yellow. Below the navigation bar, there is a text area for entering information. The text reads: 'Please enter any additional information you feel is needed to complete utilization review here. Note: It is NOT necessary to repeat any information that was already indicated on previous tabs. NOTICE: Include only short clinical summary/progress/history pertinent to this review point (200 word limit)'. Below the text area, there are three buttons: 'CANCEL', 'SAVE/CLOSE', and 'SUBMIT FOR REVIEW'. A mouse cursor is pointing at the 'SUBMIT FOR REVIEW' button, which has a yellow starburst effect around it.

Completed Review

» The following message will appear once the review has been submitted:



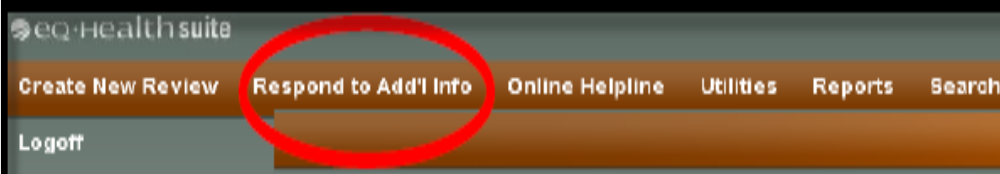
» A review ID number will be given; this is the same as the tracking number . **Record the number for tracking purposes.**

eQSuite™ MENU BAR

Respond To Request for Additional Information

- » An eQHealth nurse may pend the request seeking additional information in order to proceed with the review process. The information must be submitted to eQHealth within *1 business day from the date of notice*.
- » To respond to a pending review, click **Respond to Add'l Info** tab on the menu bar.

Check this tab daily!



The screenshot shows the eQHealth suite interface. The menu bar includes the following items: Create New Review, Respond to Add'l Info (highlighted with a red circle), Online Helpline, Utilities, Reports, Search, and Logoff. Below the menu bar, there is a table with 7 rows of options, each with a 'Select' link, a number, and a description.

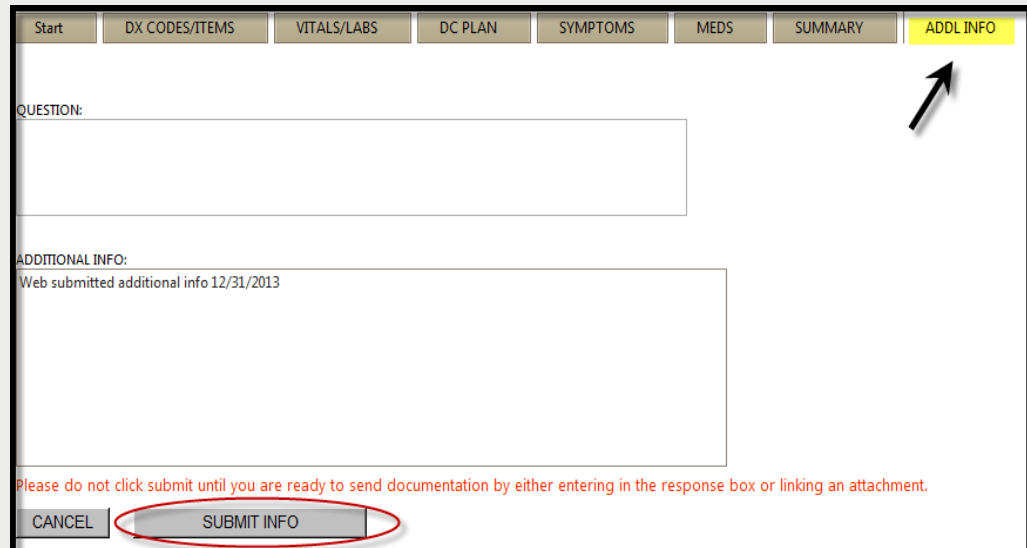
Provider: sus id=... ..		
Select	01	1: List of Review Status/Outcome for a Given Participant
Select	02	12: List of All In-Process Certification Reviews with Status
Select	03	13: List of Admissions for a Selected Date Range
Select	04	14: List of All Completed Reviews
Select	05	15: Printout of Web Entered Review Request
Select	06	16: Outcome Status of a Selected Retrospective Review(s)
Select	07	17: Medical Necessity Denials - Initial Review Decision

Respond To Request for Additional Information

- » The system will display all records in process in which eQHealth has requested additional information.
- » Choose the correct record by clicking **open**.

	ReviewID	Request Date	Requestor Name	Bene ID	First Name	Last Name	Request Type	Admit Date	Provider ID	Provider Name
Open	31629906	08/26/2010	Valencia Alexander	001200286	CHRISTIAN	BRADLEY	Admission	08/25/2010	999999999901	TEST ST. ELSEWHERE HOSPITAL

- » A tab 'Add'l Info' will open showing the question(s).
- » Please reply inside the text box labeled Additional Info.
- » Click **Submit Info** button.



Start DX CODES/ITEMS VITALS/LABS DC PLAN SYMPTOMS MEDS SUMMARY **ADDL INFO**

QUESTION:

ADDITIONAL INFO:
Web submitted additional info 12/31/2013

Please do not click submit until you are ready to send documentation by either entering in the response box or linking an attachment.

CANCEL **SUBMIT INFO**

Respond To Request for Additional Information

Link Attachment

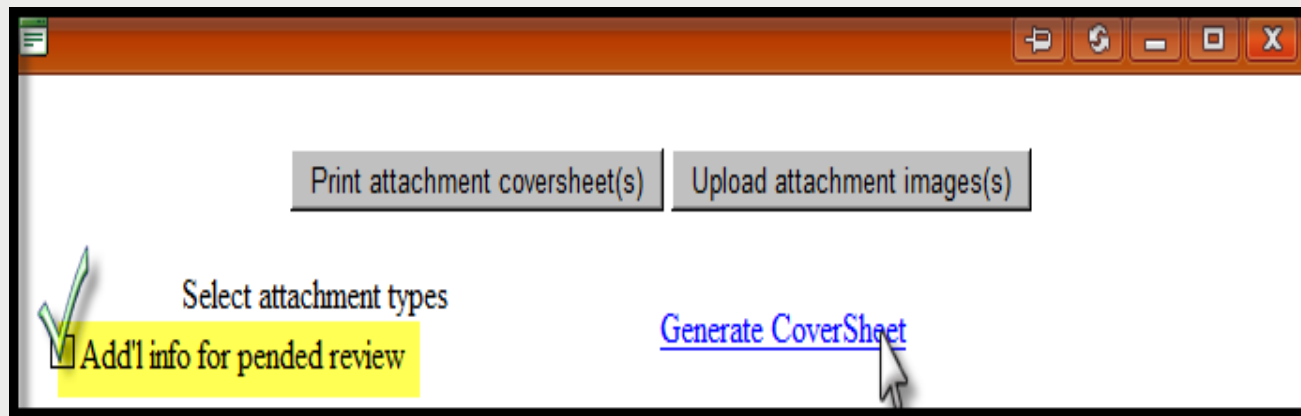
- » Additional information requested by a nurse may also be linked to a review by clicking on the **Attachments tab**.
- » The system will display a list of reviews in which additional information is needed.
- » Additional information may be linked to a review in on of two ways:
 - Print attachment coversheet(s) or Upload attachment image(s)

1. Print attachment coversheet



Respond To Request for Additional Information


- » Upon clicking the **Print attachment coversheet(s)** button, the system will prompt the user to select attachment type.
- » Click **Generate CoverSheet**



Respond To Request for Additional Information

- » The system will create the following fax coversheet.
- » Print coversheet and fax both the *cover sheet* and the *additional information* to eQHealth in order for the review to be completed.

eQHealth Solutions
Fax Cover Page



R-33645936 I-50

Provider ID: 999999999903
Provider Name: TEST CITY OF HOPE
TAN:
Bene ID: 001201136
Bene Name: BIANCA REESE
Admit Date: 10/01/2013
Review ID: 33645936

Pages (Including this one) _____

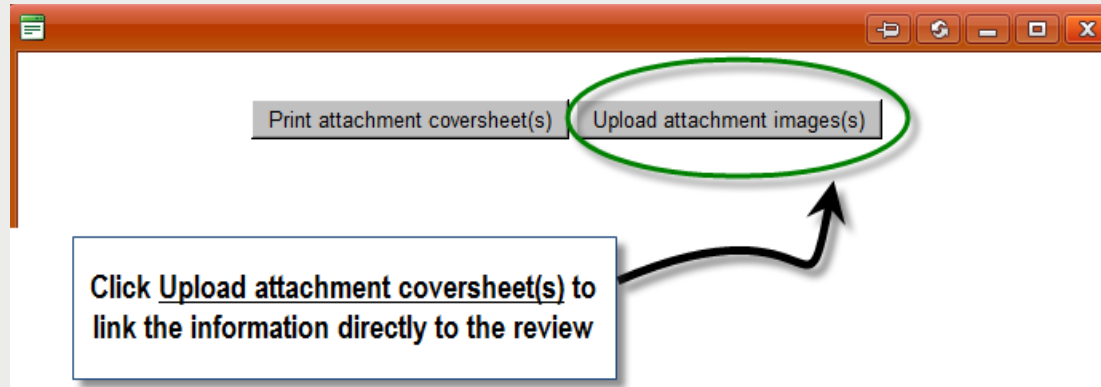
Important

Only use coversheet once.
Please do not modify or duplicate bar code or cover sheet in any way

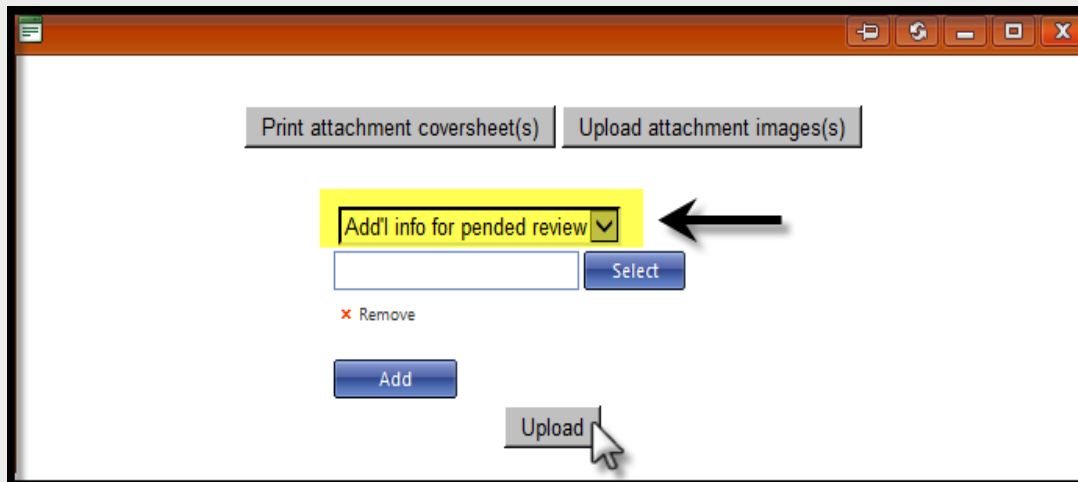
ADDITIONAL INFORMATION REQUESTED BY eQHealth Solutions

Respond To Request for Additional Information

2. Upload attachment image(s)



» The attachment type will be preselected.



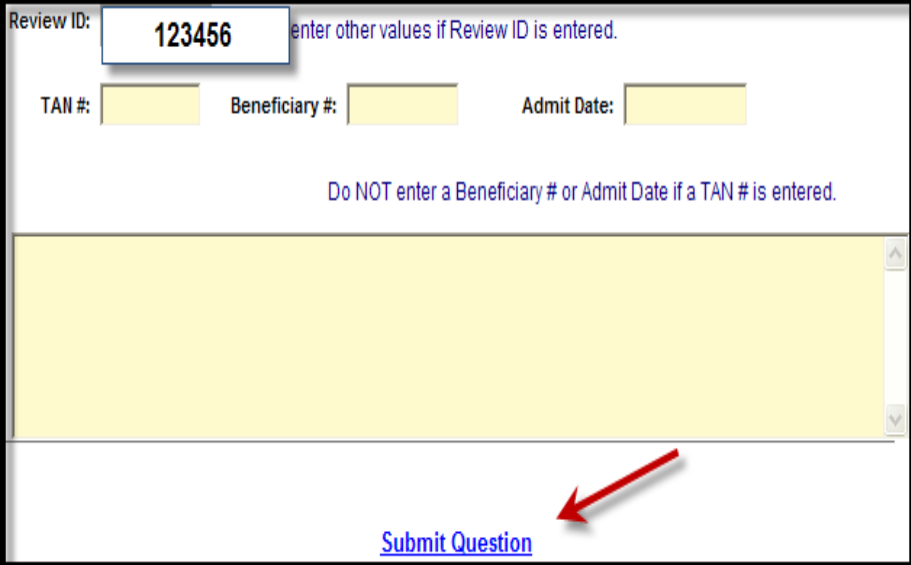
» Click **select** to search the user's local drive for the additional information document.

» Click **upload**

- A message will display to confirm the information has been successfully linked to the review.

Online Helpline

- » Inquires may be submitted online by clicking the **Online Helpline** tab on the menu bar.
- » Type the question in the text box and click **Submit Question**.
- » A message will appear stating that the response has been submitted and a ticket number will be assigned .



Review ID: enter other values if Review ID is entered.

TAN #: Beneficiary #: Admit Date:

Do NOT enter a Beneficiary # or Admit Date if a TAN # is entered.

[Submit Question](#)

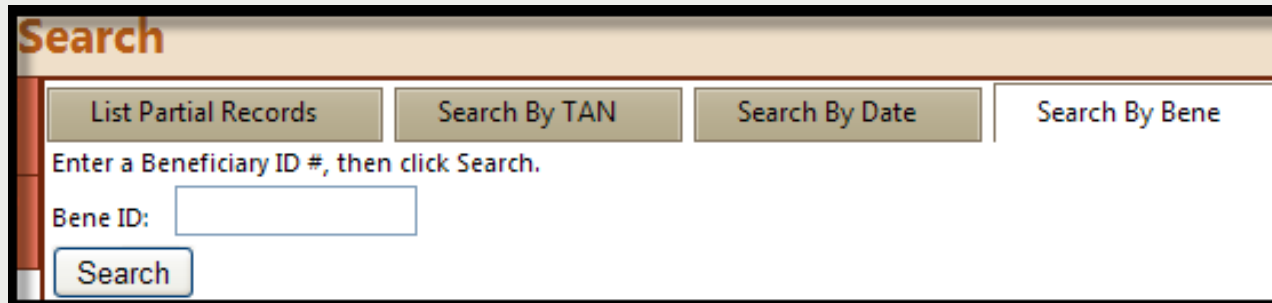
A red arrow points to the [Submit Question](#) button.

- » Once the ticket has been processed, a link will be emailed to return back to the Online Helpline.
- » To view the response to a previous ticket, scroll down and view the **history** section.

Search

View Previously Submitted Web Review Requests

- » Click **Search** on the menu bar.
- » Search by date or BENE (RIN).
- » A list will appear with all past Web reviews which have been submitted to eQHealth for review.
- » Click **open** to go into the Web review.



The screenshot shows a web interface titled "Search". At the top, there are four buttons: "List Partial Records", "Search By TAN", "Search By Date", and "Search By Bene". Below these buttons, there is a text prompt: "Enter a Beneficiary ID #, then click Search." Underneath the prompt is a text input field labeled "Bene ID:" and a "Search" button.

NOTE: You cannot change any fields; however, you will be able to see what information has been entered by the requestor.

Search

Search for Partially Saved Records

- » Click **Search** on the menu bar

	ReviewID	Request Date	Requestor Name	Bene ID	First Name	Last Name	Request Type	Admit Date	Provider ID	Provider Name
Open	33645397	06/17/2013	trainweb01 trainweb01	001201136	BIANCA	REESE	Admission	06/02/2013	999999999903	TEST CITY OF HOPE

- » The *list of partial records* tab of Web reviews will appear displaying reviews that have **not** yet been submitted to eQHealth.
 - Check daily to ensure reviews are submitted timely.
- » Click **open** to go back into the Web review to complete the review request.
- » Click **Submit for Review**.

Utility Tab

- » Enter discharge dates using the *discharge utility*



Last Name	First Name	Bene ID	Last Day Certified	Admit Date	Discharge Date
No records to display.					

- ➔ *Search by last day cert*
- ➔ *BENE*
- ➔ *TAN*

Discharge dates must be entered within **HFS' 180 day billing cycle**.

The following message will display on screen if a request is beyond the allowable time:

- ➔ **Error Message-** *Updating discharge date for review older than one year is not allowed*

View Letters Online

All written correspondence from eQHealth regarding review determinations can be accessed by clicking the **Letters** tab on the menu bar. Letters are grouped into three categories:

- » **Completed:** All review determinations for a hospitalization.
- » **In Process:** Review pended for additional information or review sent for Physician referral.
- » **Reconsiderations:** All letters pertaining to your request for a reconsideration of denial or reassessment of DRG change.

View Letters Online

Example: Search for a letter from a completed review.

1. Enter a date range in the *Admission Date* field and click **search**.
 - The system will display all reviews for the admit date range with a letter.
2. Click the **View Review Letter(s)** link to open letter.
3. Print or save letter(s) for your record.

Letters Search

Completed In Process Reconsiderations

Admit Date:

Start Date: 10/8/2013

End Date: 11/21/2013

Search

Admit Date	Recipient Last Name	Recipient First Name	Recipient ID	Review ID	eQHealth Case ID		
10/12/2013	ALLEN	GARY	7499889394	28078985	1684453	Open Review	View Review Letter(s)

Provider Reports

- » There are 25 unique reports available through eQSuite™.
- » All report data is facility specific. All data transmitted via the internet is encrypted for security compliance.
- » A Provider Reports Guide is available on our website under the *Provider Resources* tab.
- » The following reports are the most frequently run reports in eQSuite™:
 - ❖ **RPT1: Review Status /Outcome for Given Participant**
 - ❖ **RPT2: Status of All In-Process Certification Reviews**
 - ❖ **RPT3: Assigned TANs in Admission Date Range**
 - ❖ **RPT4: All Completed Reports**
 - ❖ **RPT8: Initially Denied Reviews and Reconsideration in Process**
 - ❖ **RPT 13: Reviews Pended for Additional Information**
 - ❖ **RPT15:Unreviewable Reviews Requests**
 - ❖ **RPT 17: Web Review Request Printout**
 - ❖ **RPT41:Retro Prepay Correspondence**
 - ❖ **RPT42: Retro Postpay Correspondence**

Provider Resources

eQHealth Provider Helpline

- Monday through Friday, 8:00 a.m. to 5:00 p.m.
- Submit online inquiries via the eQSuite™ helpline module.

Website <http://il.eqhs.org>

- The *eQSuite™ User Guide* (PowerPoint slides) can be found under the ProviderResources tab on our Website.

Web system – eQSuite™

- Our secure, HIPPA compliant, Web-system offers Providers 24/7 accessibility.