

alphaMCS

Provider Portal  
Handbook

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## WELCOME!

Welcome to AlphaMCS, a next generation Managed Care System designed specifically to meet the needs of Managed Care Organizations and the behavioral healthcare providers they support. This handbook will walk you through the following aspects of the provider portal:

[The Basics](#)

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[Searching for a Patient](#)

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## BASIC FUNCTIONALITY

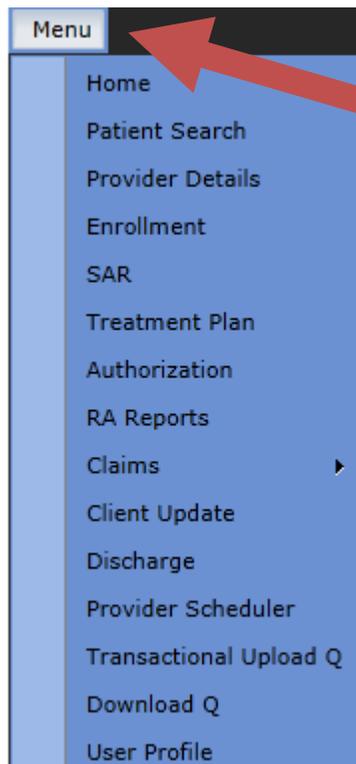
This section will give you an understanding of the basic functionality of the system: how to navigate through the database, how to view information and how to input information.

### First things first...

If you use IE8, you'll want to upgrade to IE9 for better functionality in the system. If you have Windows XP, you won't be allowed to upgrade to IE9—that's fine, just use Firefox or Chrome.

The best screen resolution is 1360 x 765. This will allow you to see all the tiles and navigate more easily. You can also zoom in and out using the zoom function in your browser or by holding down the **Ctrl** button on your keyboard and moving the wheel on your mouse forward (to zoom in) and backwards (to zoom out).

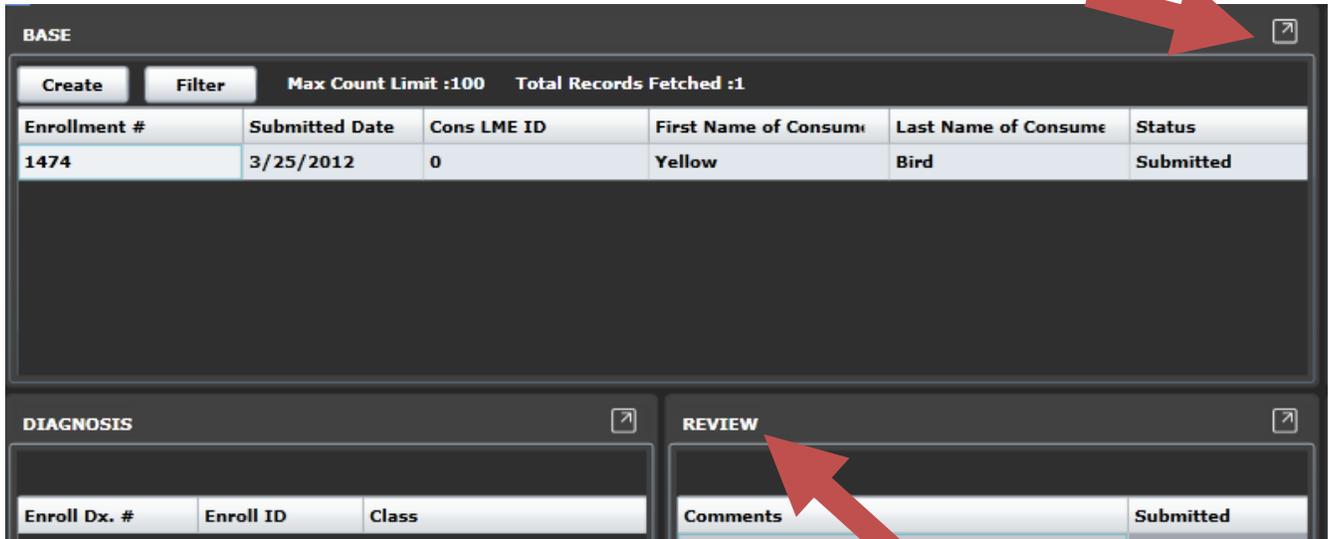
### Navigation



Users will navigate the system by first clicking on **Menu** in the upper left hand corner of the screen. This will take you to the main menu dropdown. At this point, select the module you would like to view.

Once you've selected a module, you will be presented multiple "tiles". There will be one prominent tile that is larger than the others and is located on the upper left hand side. To enlarge this tile, click

on arrow in the upper right hand corner of it.



The screenshot shows a dashboard with several tiles. The 'BASE' tile is the largest and contains a table with the following data:

Enrollment #	Submitted Date	Cons LME ID	First Name of Consum	Last Name of Consume	Status
1474	3/25/2012	0	Yellow	Bird	Submitted

Below the 'BASE' tile are two smaller tiles: 'DIAGNOSIS' and 'REVIEW'. The 'REVIEW' tile has a table with the following data:

Enroll Dx. #	Enroll ID	Class	Comments	Submitted

To make another tile the prominent tile, click on its title and drag into the main area.

Notice at the very top of this page is a bar explaining where you are in the system. If you click on the **User visit History** dropdown, it will tell you where you have been during the session and allow you to go back there in a single click.



Some pages will have tabs on the side. This allows multiple tiles on more than one page. The white tab is the current tab you're viewing. Simply click on another tab to see another set of tiles.

## Viewing Information

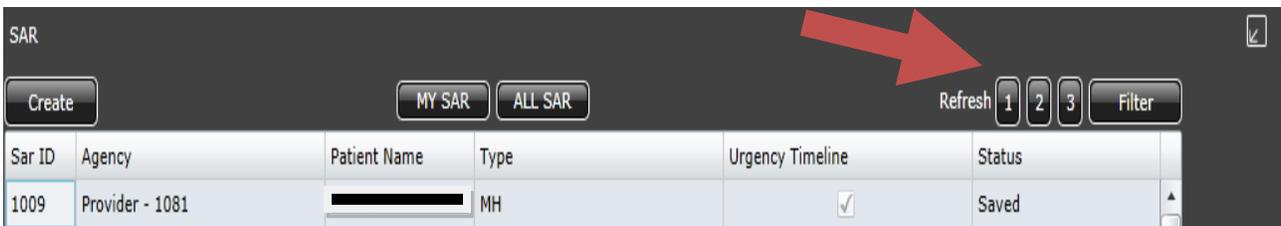
When looking at the tiles on a page, the prominent tile will automatically have the first selection highlighted. Whenever a row is highlighted, all surrounding tiles will display information

corresponding to that row. For instance, if the prominent tile has a list of patients and the surrounding tiles show various pieces of patient information, that information will all be for the highlighted patient in the main tile.

Sar ID	Agency	Patient Name	Type	Urgency Timeline	Status
1009	Provider - 1081	██████████	MH	<input checked="" type="checkbox"/>	Saved
52	Provider - 1008	██████████	MH	<input type="checkbox"/>	Saved
51	Provider - 1008	██████████	MH	<input type="checkbox"/>	Saved
50	Provider - 1008	██████████	MH	<input type="checkbox"/>	Saved

Click on a different row and that new patient's information will then be shown in the surrounding tiles.

For some tiles, there will be numbers towards the top of the tile. Clicking on these numbers allows you to view more information immediately on the list.



The screenshot shows a table with columns: Sar ID, Agency, Patient Name, Type, Urgency Timeline, and Status. The first row is highlighted. Above the table are buttons for 'Create', 'MY SAR', 'ALL SAR', 'Refresh', '1', '2', '3', and 'Filter'. A red arrow points to the 'Refresh' and number buttons.

The higher the number, the more additional rows of information will be shown.

When you choose a higher number, a plus (+) and minus (-) sign will appear next to the numbers.



Clicking on the minus will allow you to view the top level of information ONLY for the selected record. The plus sign will cause the top level of information to show on ALL records.

Many tiles may also have a  button, which will allow you to modify the information you're looking at in the rows. For instance, if you're looking at a list of patients and only want to see 'John Doe', you would click the Filter button and put in relevant information, such as 'Doe' in the **Last Name** field. That way, only people with that last name will appear on the list.



If you begin creating a record in any screen, make sure it's either saved or cancelled before trying to go to another module or you won't be able to.

## Putting in Information

If your company works with multiple MCO's, you will have the ability to toggle between which MCO you are submitting information to, or viewing information from.

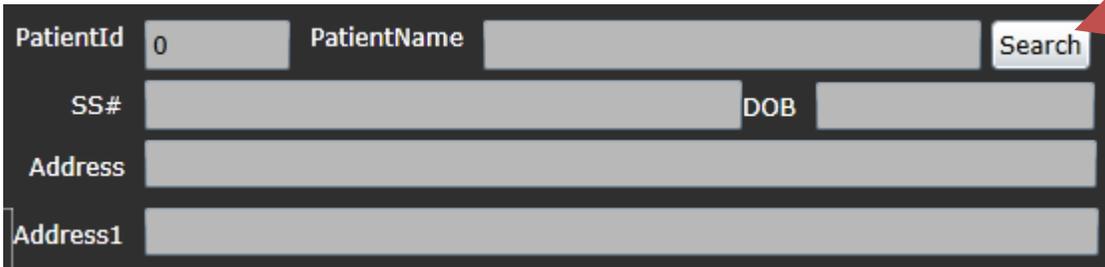
**READ THIS!!!!**

You can choose the MCO by looking in the User Visit History bar and clicking on the MCO dropdown.

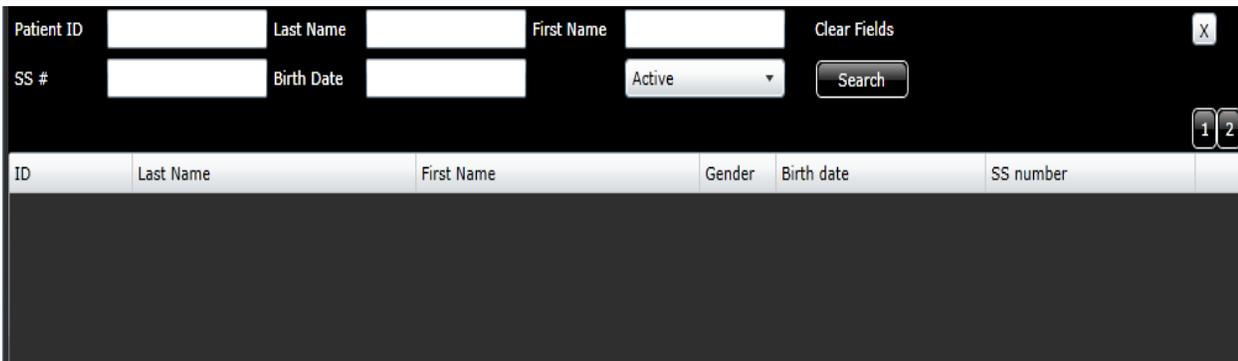


Once you have chosen the correct MCO, you can move forward.

In most cases, inputting data into fields is as simple as typing into them. However, there are a few cases in which you will need to either search for the info to go into the field. When this is the case, you will see a Search button.



This will open a subscreen, allowing you to search through records to find the one you want to input.



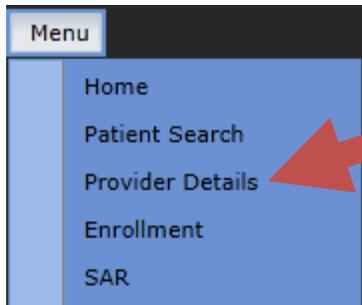
ID	Last Name	First Name	Gender	Birth date	SS number

AXIS I	De	
AXIS II	290.0	-Senile Dementia, Uncomplicated
AXIS III	290.0	-Dementia Senile NOS
AXIS IV	290.0	-Pri Degenerative Demntia Alzheimer/
dation	290.1	-Presenile Dementia
	290.10	-Presenile Dementia, Uncomplicated
	290.10	-Presenile Dementia NOS
	290.10	-Pri Degenerative Demntia Alzheimer/i
	290.10	-Dementia due to Pick's Disease

At other times, the system may want to fill in text as you're writing something into a field. This will usually appear as a dropdown under the text box. You can then scroll down to the selection you want and click on it. This will fill in the text box with the info exactly as it is in the dropdown.

There are tables in the system with buttons to the side: **Add**, **Modify**, **Remove**. To edit or delete a field, click on the field itself, then **Modify** or **Remove**. Clicking **Add** will add a new field regardless of what is currently highlighted.

## PROVIDER DETAILS



This module allows you to view the information that the MCO has on file for your company. There are tabs in this module: **Base**, **Site**, **Site Mapping**, and **Contract**, each with multiple tiles.

On the **Base** tab, you will see your company's name, as well as its sites, the counties it serves and the clinicians link to it.

PROVIDER						SITES
Max Count Limit : 50 Total Records Fetched : 1						Refresh
Provider ID	Provider Name	Status	Recredential Due	Contract Type	Organization	Site ID
2084	Big Dawg Therapy	Contracted		MOA	Agency	641

SERVING COUNTIES				CLINICIANS		
Provider SA ID	Provider	County Name	Active	ID	Clinician	Provider
75	Big Dawg Therapy	New Hanover		135	Duke, Kevin	Big Dawg
76	Big Dawg Therapy	Brunswick		136	Carter, Linda	Big Dawg

As you go through the other tabs on the side of the screen, you will see more in-depth information. Note that when you click on the **Site** tab, you can choose a site and the surrounding tiles will show information for that site.

SITES							SPECIALITIES
Site ID	Provider	Status	Site Name	Is Main	Active		Site ID
641	Big Dawg Therapy	Contracted	The Dawg Pound	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		641
642	Big Dawg Therapy	Contracted	The Kennel	<input type="checkbox"/>	<input checked="" type="checkbox"/>		641

ADDRESSES					SITE CONTACTS		
Site ID	Address Type	State	City	Zip	Site ID	Contact Type	Last Name

Once you've chosen a site on the **Site** tab, you can then go to the **Site Mapping** tab and it will show more information for *only that site*. In case you forget which site viewing information on, you can find this in the company information bar at the top of the screen.

NUMBERS						TARGET POPS	
Number ID	Medicaid #/Attending Provider :	NPI #	Effective Date	End Date		Site TP ID	Site
18	9684654	6584651681	3/1/2012			19	641
19	3813841	3684138413	3/1/2012			20	641

BILL TYPE SPECIALITIES				TAXONOMY	

Finally, the **Contracts** tab will allow you to see all contracts for your company, including information on what services require authorizations, if they are subcapitated and if they are patient specific. To search for a service rate, you can enter the all or part of the service code in the **Contract Rates** tile and it will pull up all corresponding services with their rate.

CONTRACT RATES 🔍

Service Code:

Contract ID	Site	Proc Code	POS Desc	License Group Desc	Rate	Active
72	The Dawg Pound	0801 Clinical Evaluation/Inta	ALL	ALL	174.13	<input checked="" type="checkbox"/>
72	The Dawg Pound	0801 Clinical Evaluation/Inta	ALL	ALL	174.13	<input checked="" type="checkbox"/>

CONTRACTS

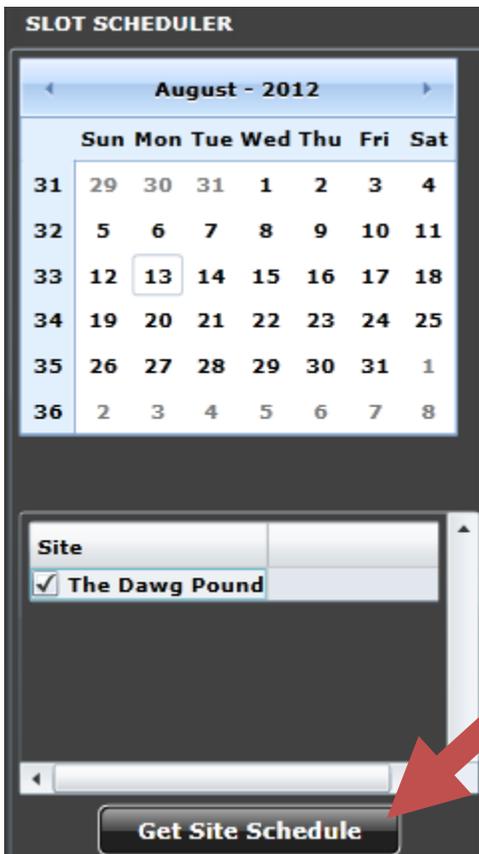
Contract ID
72
73

PATIENT SPECIFIC CONTRACT 🔍 | CONTRACT DETAILS

Base  
Site  
Site Mapping

## PROVIDER SCHEDULER

When an MCO wants to refer a client to you, they will do so by looking at a master schedule of all the providers in their catchment area. Many companies have regularly scheduled times that they can handle referrals. You are able to set these up in the **Provider Scheduler** so that the MCO knows your availability and can schedule appropriately. This schedule should be updated on your end by going to **Menu, Provider Scheduler**.



**SLOT SCHEDULER**

August - 2012

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
31	29	30	31	1	2	3	4
32	5	6	7	8	9	10	11
33	12	13	14	15	16	17	18
34	19	20	21	22	23	24	25
35	26	27	28	29	30	31	1
36	2	3	4	5	6	7	8

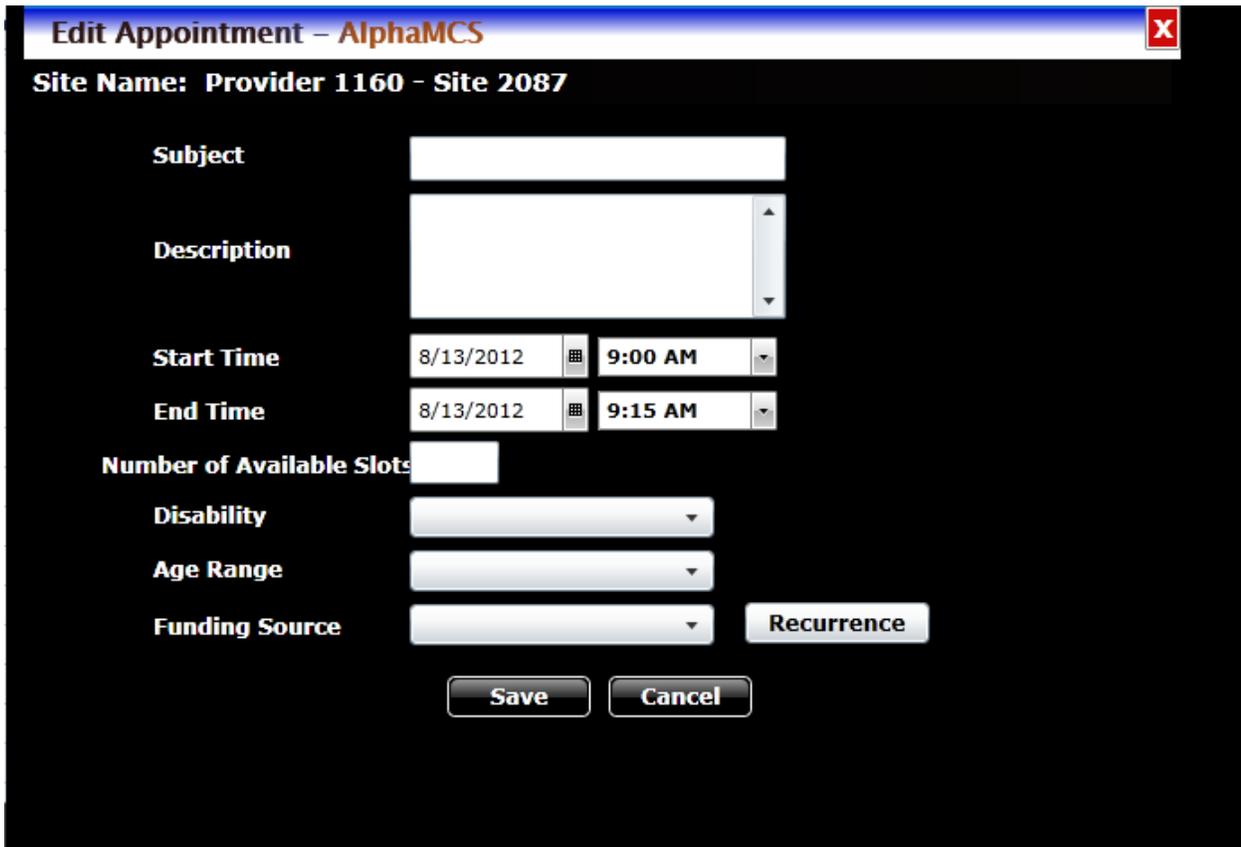
Site

The Dawg Pound

Get Site Schedule

Your company's sites will automatically appear in the **Site** list. Choose the one you want, in this case, there is only one, and click **Get Site Schedule**. This will show you the calendar for that site for the day you have selected.

To set your availability, double click on the calendar at the time you're availability starts. For instance, if I'm available from 9am-12pm, I would double click on the calendar at the 9am time.



**Edit Appointment – AlphaMCS**

Site Name: Provider 1160 - Site 2087

**Subject**

**Description**

**Start Time** 8/13/2012 9:00 AM

**End Time** 8/13/2012 9:15 AM

**Number of Available Slots**

**Disability**

**Age Range**

**Funding Source**  **Recurrence**

**Save** **Cancel**

You can now enter the appointment information. Enter a subject, as well as an optional description. Next adjust the start and end times of the block, then enter the number of slots.

Next, enter the information that narrows down what type of client can be seen by disability, age range and funding source. Finally, if this is a recurring appointment, click **Recurrence**. This will open up a second appointment screen.

**Edit Appointment – AlphaMCS** X

**Site Name: Provider 1160 – Site 2087**

**Recurrence Pattern**

Sunday     
  Monday     
  Tuesday     
  Wednesday  
 Thursday     
  Friday     
  Saturday

**Range of Recurrence**

**Start**

**End After**

**End by**

Fill in the necessary information and click the **Save** button. This will take you back to the first appointment screen. If everything look correct, hit the **Save** button. Once you do this, rows will appear underneath the Save button.

Appt ID		Patient Name	Start Time	End Time	Status	Acknowledgeme
927	<input type="checkbox"/>		09:00AM ▾	09:15AM ▾	▾	<input type="checkbox"/>
932	<input type="checkbox"/>		09:00AM ▾	09:15AM ▾	▾	<input type="checkbox"/>
937	<input type="checkbox"/>		09:00AM ▾	09:15AM ▾	▾	<input type="checkbox"/>

Once slots begin being scheuled by the MCO, you will be notified by e-mail. You can go to the appointment and double click on it to check the **Acknowledgement** checkbox so the MCO knows you're aware of the appointment. Once the appointment has/not happened, you can go back into the appointment and enter a **Status**. Again, this information appears on the MCO side once saved.

Appt ID		Patient Name	Start Time	End Time	Status	Acknowledgeme
845	<input checked="" type="checkbox"/>	James Angley	09:00AM	12:00PM		<input checked="" type="checkbox"/>

**Appointment Not Documented**

**Attended**

**Consumer Cancelled (Not Rescheduled)**

**Consumer Cancelled (Rescheduled)**

**No Show**

Note also that the block changes colors as the MCO begins to reserve slots:

- If a block is **GREEN**, that means all the slots in it are still available. For example, if a you have three slots and all three are still available, the block will be green.
- If a block is **YELLOW**, some of the slots have been reserved but not all. If you have one or two of their three slots still available, the block will be yellow.
- If a block is **RED**, all the slots have been reserved. All three slots have been reserved and nothing else can be scheduled here.

## PATIENT SEARCH

When you are first approached by a patient and need to find out what benefit plan(s) they are a part of, you will want to go to **Patient Search** module. You will do this by clicking on **Menu**, then **Patient Search**.

PATIENT						
Last Name	<input type="text"/>	Birth Date	<input type="text"/>	Insurance #	<input type="text"/>	<input type="button" value="Search"/>
First Name	<input type="text"/>	SS #	<input type="text"/>	Active	<input type="button" value="Clear Fields"/>	

Search for clients in the **Patient** tile to see if they have Medicaid or a state benefit plan by entering the information you have for them and clicking the  button.



To search for a client, you must provide a combo of: 1) Last Name & DOB  
2) Last Name & SSN OR 3) Last Name & Insurance ID

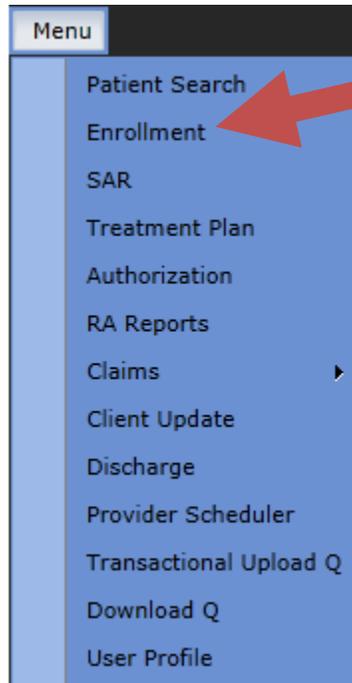
This will pull patients who match whatever data you entered. The patient's information will populate in the surrounding tiles and tabs. You can view their insurance by maximizing the **Insurance** tile.

INSURANCE					
Insurance Benefit Pl:	Ins. Number 1	Ins. Number 2	Effective Dat	End Date	Alias Tracking
State	2253		6/5/2012		<input type="checkbox"/>
Medicaid C	2253		1/1/2007	6/1/2014	<input type="checkbox"/>

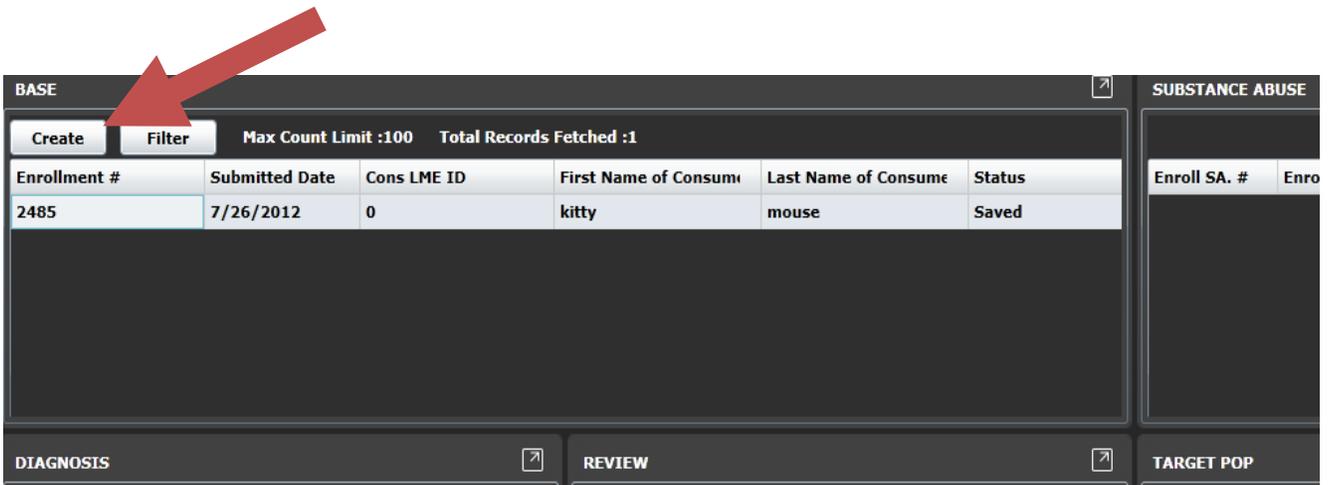
If no patients appear when you search, you may want to try again with other pieces of data, or ask the patient if they might have any other name on file. If after trying several attempts at find the patient you're still unable to find them, you will want to enroll them in a benefit plan.

## PATIENT ENROLLMENT

To enroll a patient, click on **Menu** in the upper left hand corner of the screen, then **Enrollment**.



This will open the **Enrollment** module. Any enrollments that you have either not yet submitted, or not yet heard back from the MCO on, will appear here on this list. You can filter for other enrollments by using the **Filter** button on the **Base** tile. The surrounding tiles will be populated with the information corresponding to the highlighted enrollment. To create a new enrollment, click on the **Create** button on the **Base** tile.

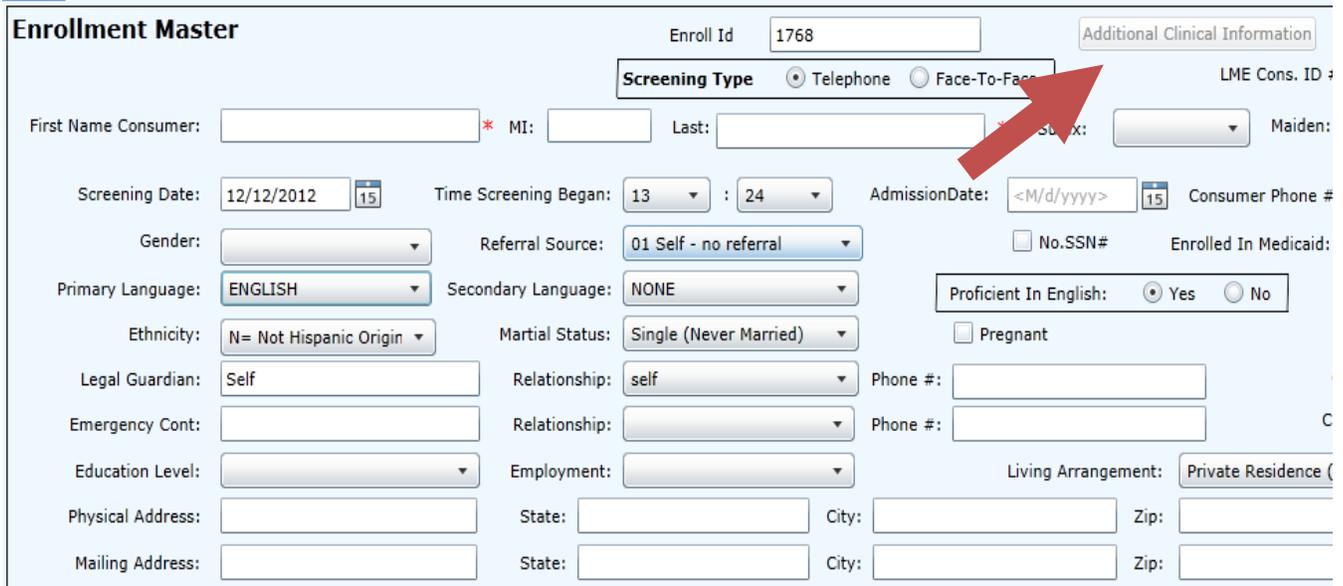


A screenshot of the 'BASE' tile in the provider portal. The tile has a 'Create' button and a 'Filter' button. Below the buttons is a table with the following data:

Enrollment #	Submitted Date	Cons LME ID	First Name of Consum	Last Name of Consum	Status
2485	7/26/2012	0	kitty	mouse	Saved

Other tiles visible include 'SUBSTANCE ABUSE', 'DIAGNOSIS', 'REVIEW', and 'TARGET POP'. A red arrow points to the 'Filter' button.

The **Enrollment Master** allows providers to enter all necessary information to enroll a client. Note that after you've entered the information into fields with the red asterisks next to them, you are able to save the enrollment at the bottom of the page. At this point, the **Additional Clinical Information** button at the top will enable, which allows you to put in target pops, diagnoses, medications, etc.



**Enrollment Master**

Enroll Id: 1768 Additional Clinical Information

Screening Type:  Telephone  Face-To-Face LME Cons. ID #

First Name Consumer:  \* MI:  Last:  \* Sex:  Maiden:

Screening Date: 12/12/2012  15 Time Screening Began: 13 : 24 AdmissionDate: <M/d/yyyy>  15 Consumer Phone #

Gender:  Referral Source: 01 Self - no referral   No.SSN# Enrolled In Medicaid:

Primary Language: ENGLISH  Secondary Language: NONE  Proficient In English:  Yes  No

Ethnicity: N= Not Hispanic Origin  Martial Status: Single (Never Married)   Pregnant

Legal Guardian: Self  Relationship: self  Phone #:

Emergency Cont:  Relationship:  Phone #:

Education Level:  Employment:  Living Arrangement: Private Residence (

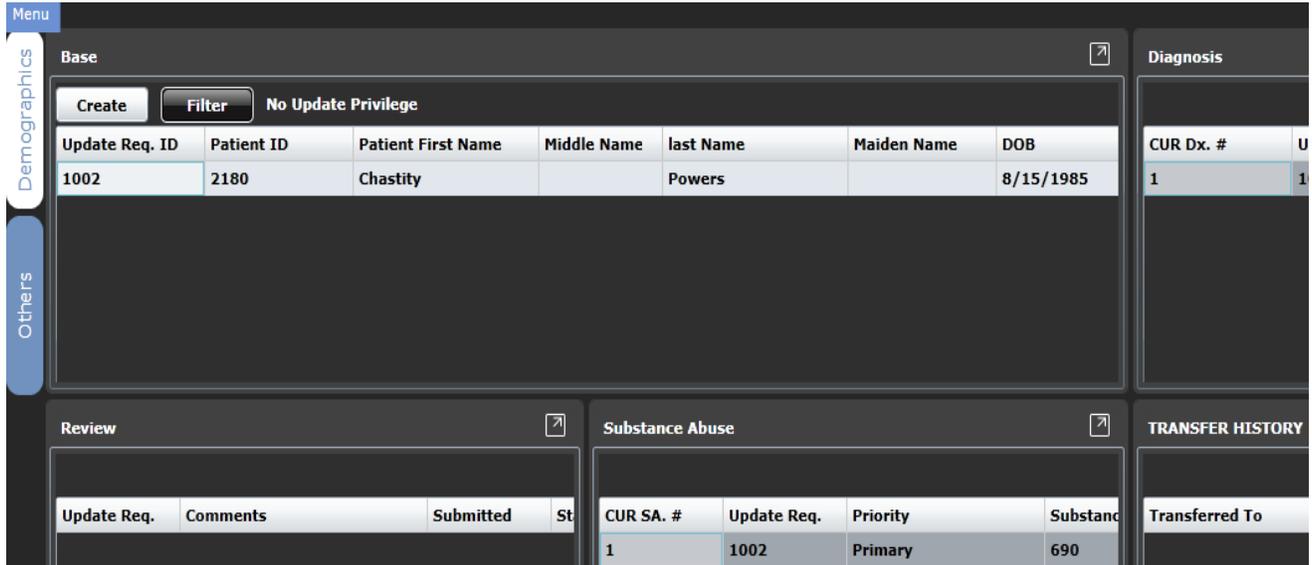
Physical Address:  State:  City:  Zip:

Mailing Address:  State:  City:  Zip:

At the bottom of the page, you are able to either save or submit the document. Until the document is submitted, it will remain on your queue on the **Base** tile. Pressing the  button sends the form to the correct MCO for processing. You will find the results of your enrollment application on the **Review** tile when a decision has been made.

## CLINICAL UPDATES

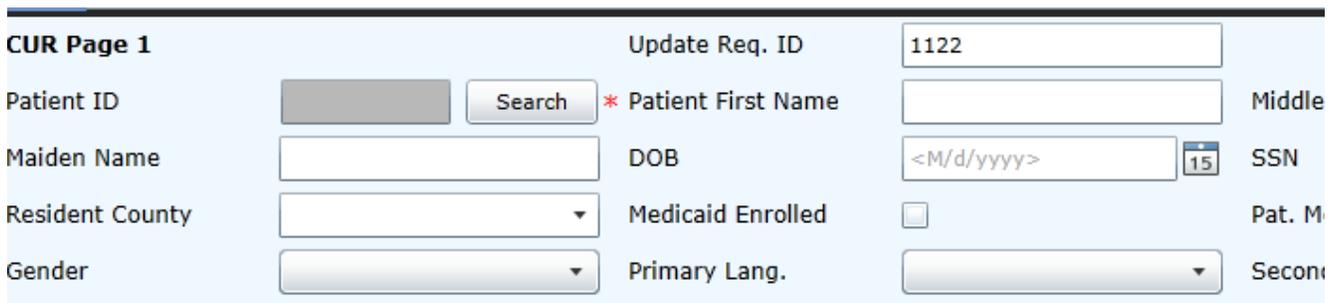
This module allows you to request updates to patient information. To reach this screen, go to **Menu, Clinical Updates**.



The screenshot shows the 'Clinical Updates' interface. It features a 'Menu' bar at the top left, a 'Demographics' sidebar, and a 'Base' tile containing a table of update requests. The table has columns for Update Req. ID, Patient ID, Patient First Name, Middle Name, Last Name, Maiden Name, and DOB. A single row is visible with the following data: Update Req. ID: 1002, Patient ID: 2180, Patient First Name: Chastity, Middle Name: (blank), Last Name: Powers, Maiden Name: (blank), DOB: 8/15/1985. Other tiles include 'Diagnosis', 'Review', 'Substance Abuse', and 'TRANSFER HISTORY'.

Any saved client update requests (CUR's), or ones that have been submitted and are awaiting a decision by the MCO, will appear here. To search for other CUR's, click the **Filter** button on the **Base** tile. To create a new CUR, click the create button.

This will take you to a form identical to the enrollment form.



The screenshot shows the 'CUR Page 1' form. It includes the following fields and controls:

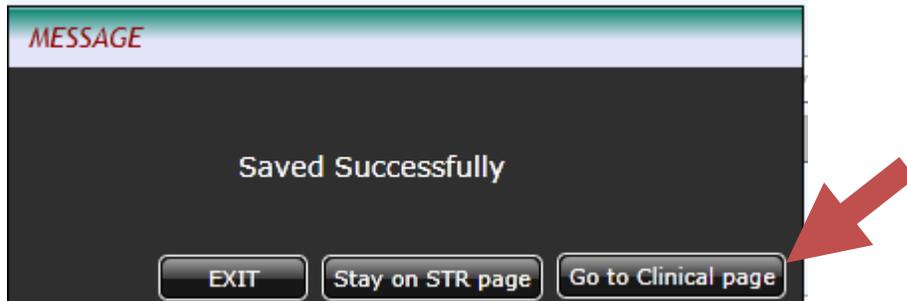
- Update Req. ID:** Text input field containing '1122'.
- Patient ID:** Text input field with a 'Search' button next to it.
- \* Patient First Name:** Text input field.
- Middle:** Text input field.
- Maiden Name:** Text input field.
- DOB:** Date picker field showing '<M/d/yyyy>' and '15'.
- SSN:** Text input field.
- Resident County:** Dropdown menu.
- Medicaid Enrolled:** Checkmark input field.
- Pat. M:** Text input field.
- Gender:** Dropdown menu.
- Primary Lang.:** Dropdown menu.
- Second:** Text input field.

Click the **Search** button next to the Patient ID to search for the client. When you select the client, their information will populate in all the fields.



If the client doesn't appear after you've enter their last name, as well as their DOB, SSN or Insurance #, you may need to enroll them. Do this in the **Enrollment** module.

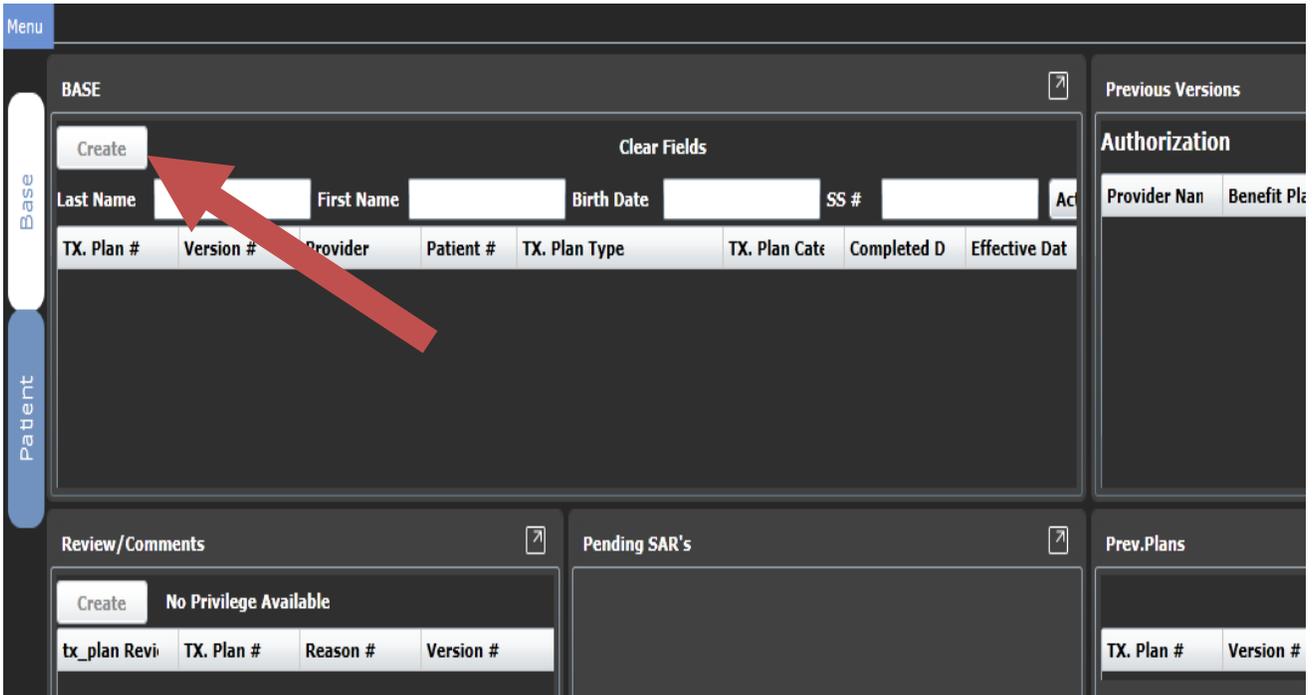
Make the necessary changes to the form. If you want to change clinical information for the client (e.g. target pop, diagnosis, substance abuse information, etc.), click the **Save** button at the bottom of the page. A message will appear asking you want to go to clinical section of the form. Click on this option.



When you've made any changes you want on either page, let the MCO know what changes you're requesting by entering the information into the **Comments** section at the bottom of the first page before hitting **Submit**. This CUR will now show on your queue, awaiting a decision by the MCO.

## TREATMENT PLANS

To enter treatment plans in the system, go to **Menu, Treatment Plan**.



The screenshot displays the 'BASE' tile in the Provider Portal. A red arrow points to the 'Create' button. The tile contains a form with fields for 'Last Name', 'First Name', 'Birth Date', and 'SS #'. Below the form is a table with columns: 'TX. Plan #', 'Version #', 'Provider', 'Patient #', 'TX. Plan Type', 'TX. Plan Cat', 'Completed D', and 'Effective Dat'. To the right of the 'BASE' tile is an 'Authorization' section with 'Provider Nan' and 'Benefit Pla' fields. Below the 'BASE' tile are three other tiles: 'Review/Comments' with a 'Create' button and 'No Privilege Available' message, 'Pending SAR's', and 'Prev.Plans' with 'TX. Plan #' and 'Version #' columns.

The **Base** tile will show any plans that have been saved, or that have been submitted and are awaiting a response from the MCO. To search for other treatment plans, click the **Filter** button on the **Base** tile. Click on the **Create** button to upload a new treatment plan.

Note the surrounding tiles will have information related to the patient you have uploaded the treatment plan for. You will receive a response from the MCO under the **Review/Comments** tile.

The **Patient** tab will show you information on the highlighted patient.

### Tx.Plan

TX. Plan #	<input type="text" value="1744"/>	Completed Date	<input type="text" value="&lt;M/d/yyyy&gt;"/>
Version #	<input type="text" value="1"/>	Meeting Date	<input type="text" value="&lt;M/d/yyyy&gt;"/>
Provider	<input type="text" value="2084"/>	Effective Date	<input type="text" value="&lt;M/d/yyyy&gt;"/>
TX. Plan Type	<input type="text" value=""/>	End Date	<input type="text" value="&lt;M/d/yyyy&gt;"/>
Reason	<input type="text" value=""/>	Patient #	<input type="text" value=""/>

Clinical Home

Submitted Date

[Clinical Document](#)

Document Type  File Upload

Clinical Doc Type	Doc Name	Doc Extn	Remove

Fill in the appropriate fields and upload any supporting documents in the **Clinical Documents** section.

**Status**

Created
  Approved
  Not Approved

**TX. Plan Category**

New
  Amendment

**Comments**

When you're finished, click **Save** if you plan on making further changes. The treatment plan will show on your **Base** tile and you will be able to edit it. If you're done, click **Submit** to send it in for review. The plan will also show on your **Base** tile but this will be for tracking purposes—you'll be able to see where the treatment plan is in the MCO review process but will not be able to edit it.

## AUTHORIZATIONS

After creating a treatment plan, you're ready to get authorized for services. You can do this by filling out a Services Authorization Request, or SAR.

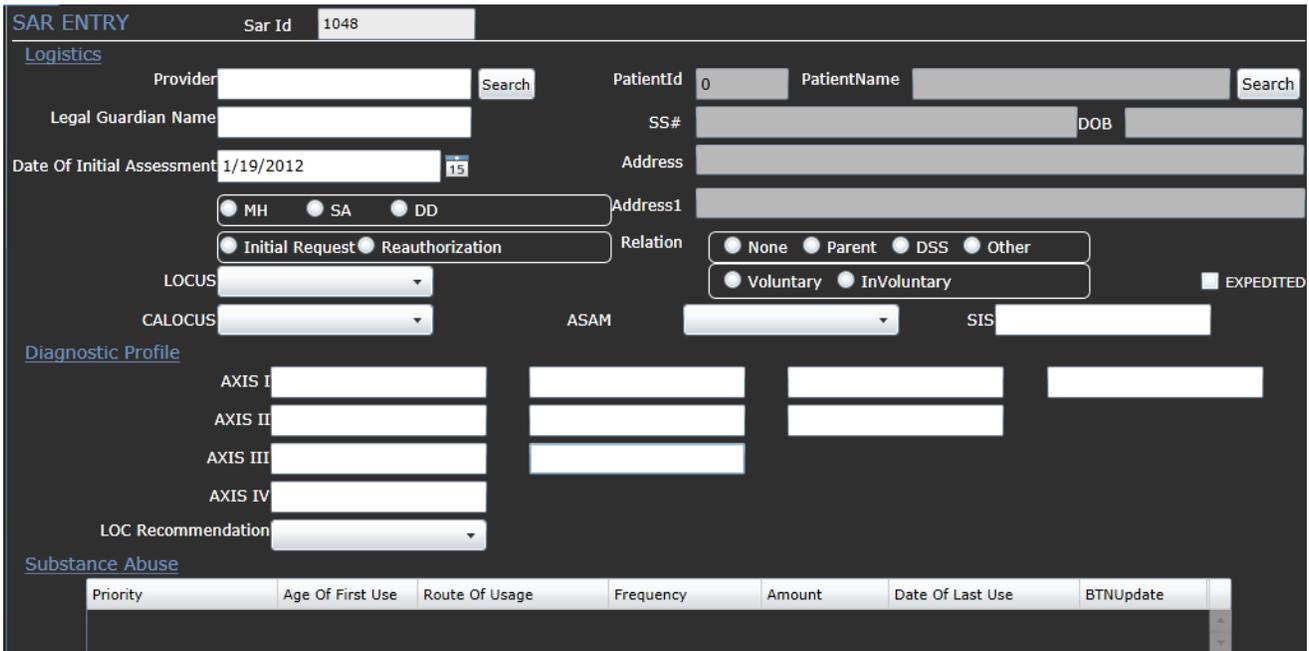
### Completing the SAR

You can get to this module by going to **Menu, SAR**. This will open a screen with multiple tiles and tabs. Whichever line is highlighted on the **SAR** tile is going to populate the surrounding tiles with information relating to that SAR. This is also true when you click on other tabs—the information in those tiles will still correspond to whichever SAR is highlighted in that **SAR** tile.



SAR #	SAR Service #	Agency	Patient Name	Type	Expedited	Remaining D	Status
1068	74	Provider - 1088	DEBORAH KUNKLE-COOK	MH	<input type="checkbox"/>	-313	Under R
1068	79	Provider - 1088	DEBORAH KUNKLE-COOK	MH	<input type="checkbox"/>	-313	Under R
1085	90	Provider - 1088	CHRISTOPHER JOHNSON	MH	<input type="checkbox"/>	-310	Under R
1190	120	Provider - 1088	Clark Kent	SA	<input type="checkbox"/>	-273	Peer Re
1424	156	Appalachian Communit	James Angley	MH	<input type="checkbox"/>	-252	Peer Re
1406	155	Luthor Services, Inc.	WILLIE ANGLE	MH	<input type="checkbox"/>	-238	Under R
1663	225	Big Down Therapy	William Brown	DD	<input type="checkbox"/>	-140	Submi

SAR's that have been saved, or have been submitted but are awaiting a decision by the MCO will appear in the queue. To search for other SAR's click the **Filter** button on the **SAR** tile. To enter a new SAR, hit the **Create** button. This will take you to the **SAR Entry** page.

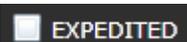


Enter the necessary information. Note that in certain fields, it will not let you enter text. In these cases, there will be either a  or a  button, which will allow you to search for and/or enter data into those fields.



Throughout the system, when you begin to type into certain text boxes, autofill options may appear. Simply click on the correct option and it will populate the field.

Click the  button to upload as much documentation as you feel is needed to support your case for authorizing the services you're requesting.

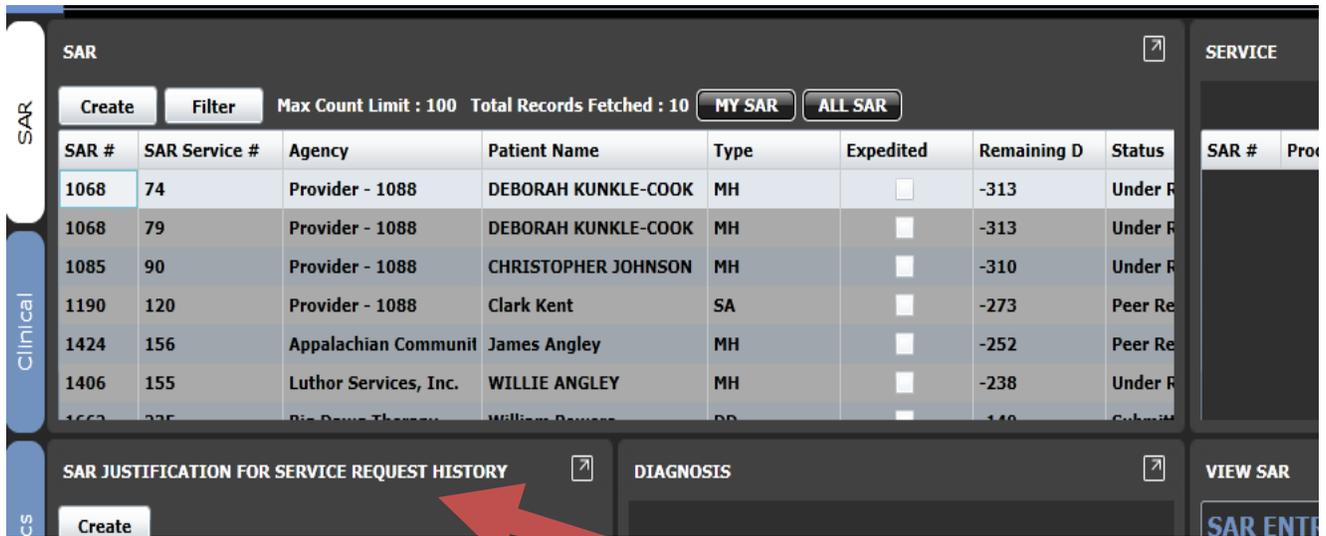
If you check the  checkbox, this will mark the request as high urgency for the reviewer. Do this ONLY if the patient's life is in danger.



To submit the SAR for review, click the **Submit** button. If you plan on working on it further, click **Save**.

## SAR Approval & Denial

Once a SAR has been created, you will see its corresponding information populate the tiles around it as you click through the tabs. MCO staff may contact you to ask questions about your SAR or request that additional information be uploaded to support the request. These comments from the MCO will appear in the **SAR Comments History** tile.



The screenshot shows the SAR module interface. At the top, there are buttons for 'Create' and 'Filter', along with 'Max Count Limit : 100' and 'Total Records Fetched : 10'. There are also buttons for 'MY SAR' and 'ALL SAR'. Below this is a table with the following data:

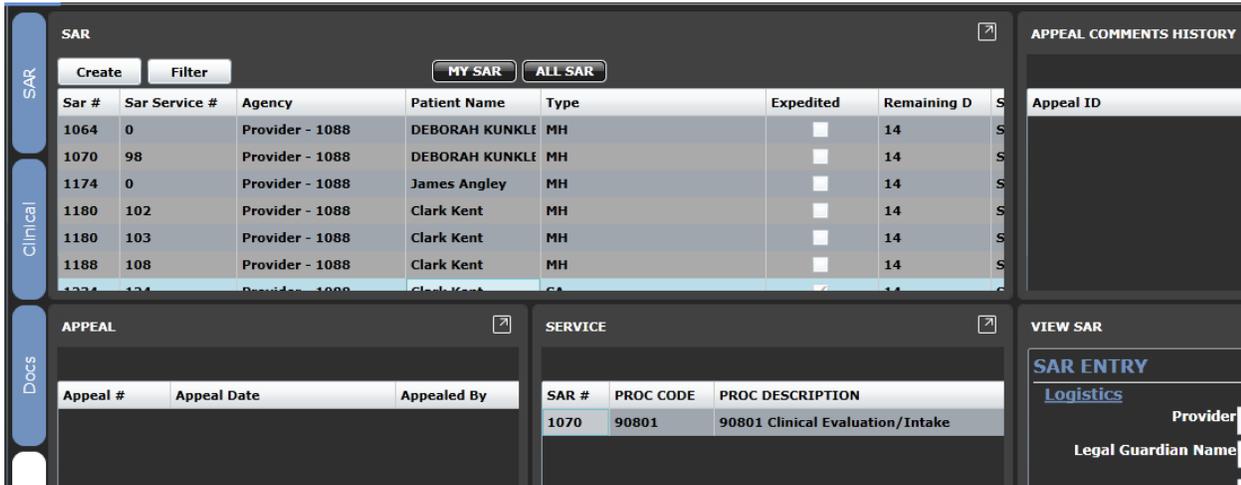
SAR #	SAR Service #	Agency	Patient Name	Type	Expedited	Remaining D	Status
1068	74	Provider - 1088	DEBORAH KUNKLE-COOK	MH	<input type="checkbox"/>	-313	Under R
1068	79	Provider - 1088	DEBORAH KUNKLE-COOK	MH	<input type="checkbox"/>	-313	Under R
1085	90	Provider - 1088	CHRISTOPHER JOHNSON	MH	<input type="checkbox"/>	-310	Under R
1190	120	Provider - 1088	Clark Kent	SA	<input type="checkbox"/>	-273	Peer Re
1424	156	Appalachian Communit	James Angley	MH	<input type="checkbox"/>	-252	Peer Re
1406	155	Luthor Services, Inc.	WILLIE ANGLE	MH	<input type="checkbox"/>	-238	Under R
1663	225	Bio-Dyne Therapy	William Dewey	DD	<input type="checkbox"/>	-140	Submit

Below the table, there are several navigation options: 'SAR JUSTIFICATION FOR SERVICE REQUEST HISTORY' (with a red arrow pointing to it), 'DIAGNOSIS', 'VIEW SAR', and 'SAR ENT'. There is also a 'Create' button on the left side.

Once a decision has been made, you will find it under the **SAR** tab, in the **Services** tile. This will show you the MCO's decision, service by service, on if they have approved or denied your request.

## Appeals

If a decision is appealed, you can go to the **Appeal** tile under the **Appeal** tab in the **SAR** module to see how it is progressing.



Sar #	Sar Service #	Agency	Patient Name	Type	Expedited	Remaining D
1064	0	Provider - 1088	DEBORAH KUNKLE	MH	<input type="checkbox"/>	14
1070	98	Provider - 1088	DEBORAH KUNKLE	MH	<input type="checkbox"/>	14
1174	0	Provider - 1088	James Angley	MH	<input type="checkbox"/>	14
1180	102	Provider - 1088	Clark Kent	MH	<input type="checkbox"/>	14
1180	103	Provider - 1088	Clark Kent	MH	<input type="checkbox"/>	14
1188	108	Provider - 1088	Clark Kent	MH	<input type="checkbox"/>	14

APPEAL #	Appeal Date	Appealed By

SAR #	PROC CODE	PROC DESCRIPTION
1070	90801	90801 Clinical Evaluation/Intake

## Printing the Authorization

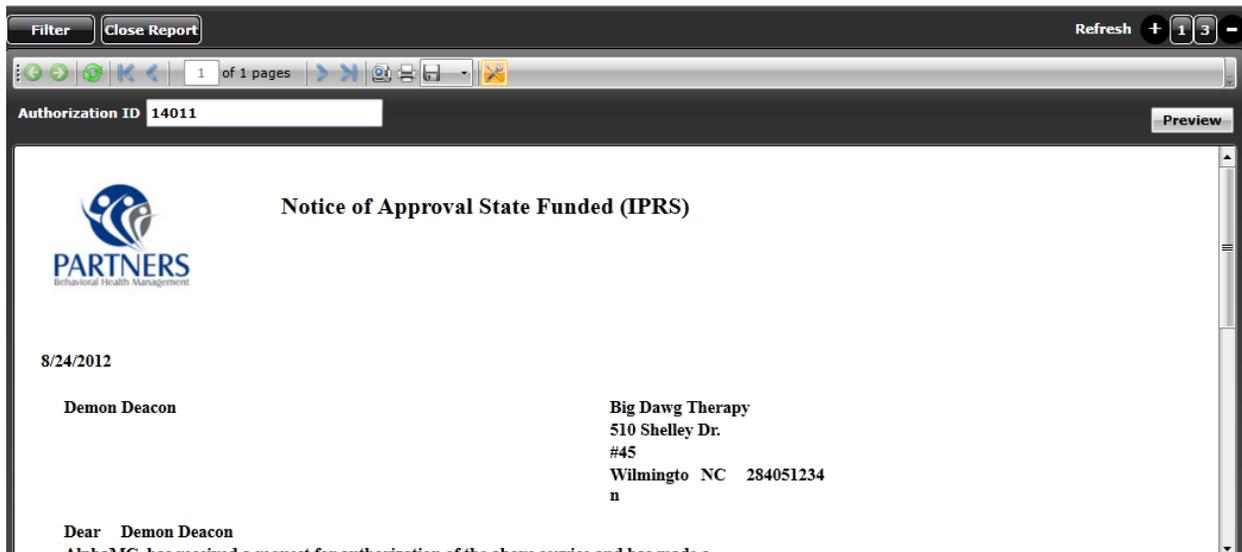
Once a service on a SAR is approved, you're able to print the authorization by going to **Menu, Authorizations**. Filter for the patient.

AUTH HEADER BASE					
Auth. ID	Patient Last Name	Patient First Name	Provider Name	Benefit Plan	Active
14011	Deacon	Demon	Big Dawg Therapy	State	<input checked="" type="checkbox"/>

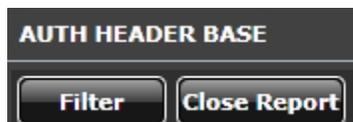
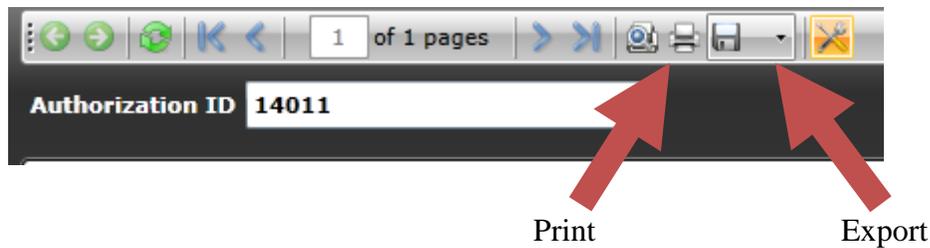
The patient may have multiple authorizations. Make sure you have the one highlighted that you want to print. Click on the **3** in the upper righthand corner of the tile to view more information and get to the action buttons.

AUTH HEADER BASE			
Auth. ID	Patient Last Name	Patient First Name	Provider
14011	Deacon	Demon	Big Dawg
Ref. Source	1		<input type="button" value="Print"/>
Reference #	251		
Auth. Number	20120300014011		
Last Update BY	train1, train		
Last Update Date	3/26/2012		

Click on the **Print** button to view the authorization.



To print the letter, click the printer icon OR you can export the letter to a Word or PDF document to print.



To get out of this screen, click the **Close Report** button at the top of the tile.



At the bottom of the form, you will be presented with three options:



- **Submit** will send the claim off to be processed.
- **Save** will keep the claim on your queue for 30 days.
- **Cancel** will cause you to leave the screen without saving.

If you ever want to see if a specific claim has been paid or denied, you can go to the **Base** tile and search for it using the  button.



If you are entering a claim that is almost identical to one you have already entered, filter for the original claim, then hit the **Copy** button. It will copy the claim's info into a new form, where you can make any changes you want.

## Replacing and Reversing Claims

You're able to do this in the system by first filtering for the processed claim you would like to replace or reverse. Once you've found the claim, click the **Copy** button.



	Patient ID	Name	Active
ic. Sylva	3000	Kent, Clark	<input checked="" type="checkbox"/>
9802		Update	
Lex		Copy	View
012			

This will display the claim in an editable format. This is also the process for submitting claims similar to past claims, since all you would have to do is make a few minor changes and hit **Submit**. In fact, the only difference is that if you want to replace/reverse a claim, you would simply go to #22 and enter the action you're taking.

20. OUTSITE LAB		CHARGE	
<input type="radio"/> Yes	<input type="radio"/> no	<input type="radio"/> Unknown	0
22.MEDICAID RESUBMISSION Code		Original REF.NO	
<input type="text" value="10 - Replacement"/>		<input type="text" value=""/>	
<input type="text" value="20 - Reversal"/>		<input type="text" value=""/>	
le	COB Payment	COB Reason	Rendering NPI
	0		1234567890

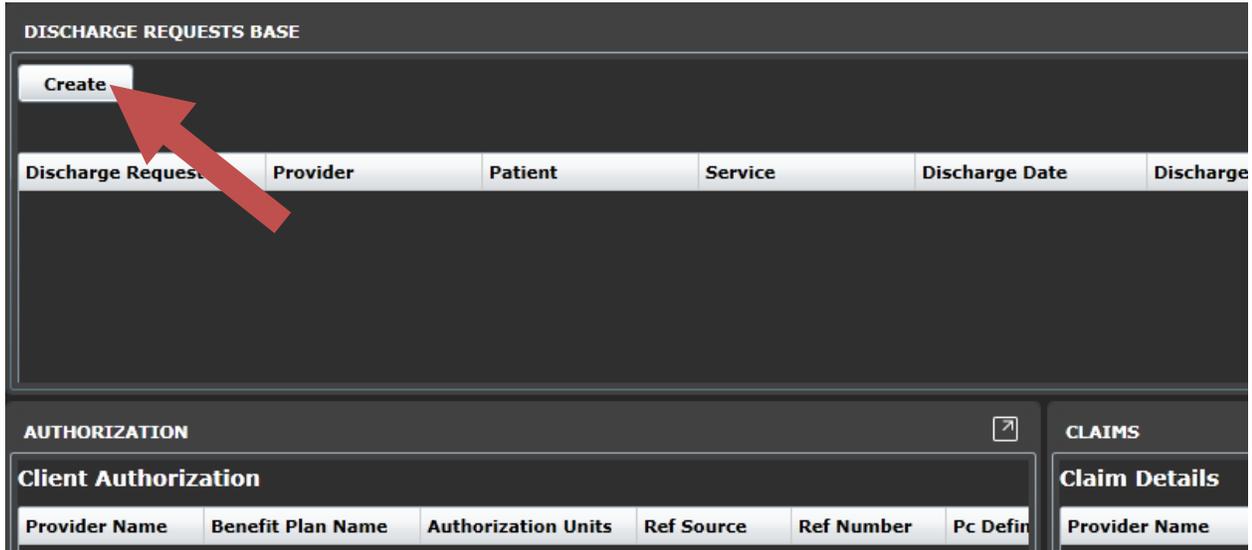
After you choose **Replacement** or **Reversal**, enter the original claim number in the Original REF. NO field. This will tell the MCO which claim you're replacing or reversing. The original claim number can be found in the **Claim #** column on your RA, or the **Claim Header ID** column on your daily claims dump.

- **Replacement:** Replacing a claim tells the MCO that the information you sent in the first time was incorrect and that this new claim has the correct info. If it paid the first time, that money will be recouped by the MCO and you will be asking for it again in this claim. If it didn't pay, you are essentially just resubmitting the claim for MCO approval.
- **Reversal:** Reversing a claim tells the MCO you entered the wrong info in the original claim and you want them to recoup the money paid, and that you're not sending any other claim to try to recollect that money.

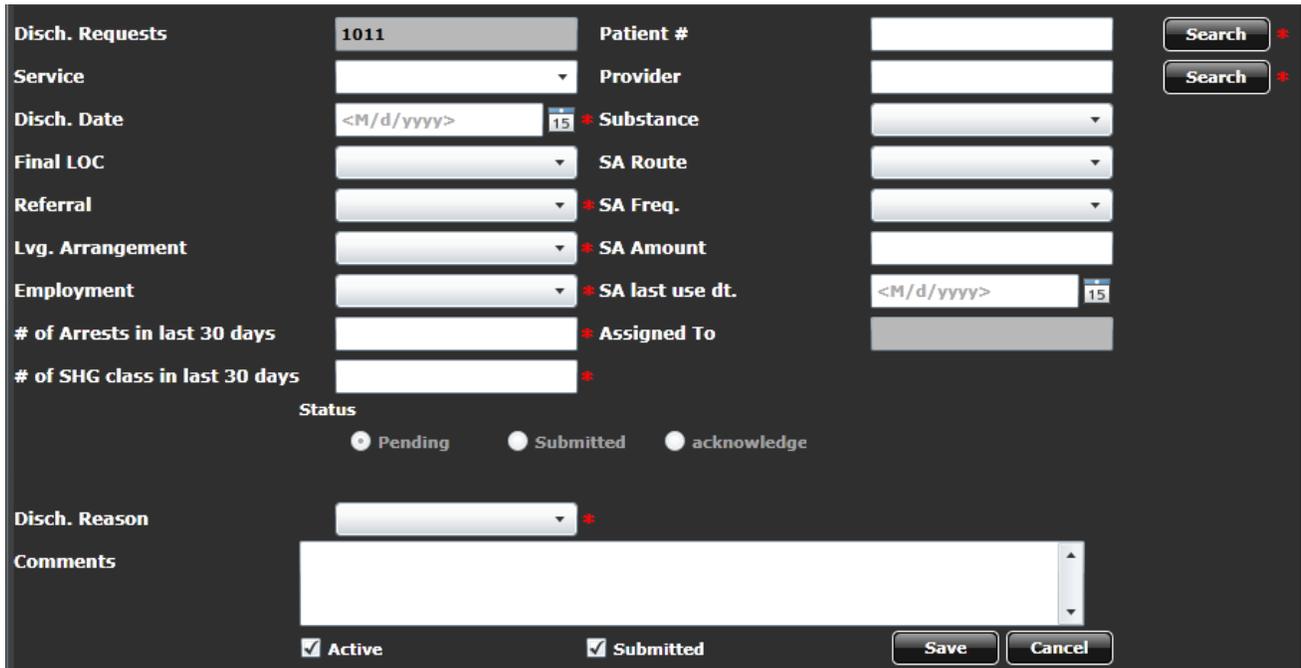
In the case of a replacement, make any necessary changes. Finally, click **Submit**.

## DISCHARGE REQUESTS

To request that a patient be listed as discharged from your company with the MCO, you will need to complete a discharge request. First, go to **Menu, Discharge**.



Note that any authorizations and claims will populate in the surrounding tiles if there is a pending discharge request. To create a request, click **Create**.



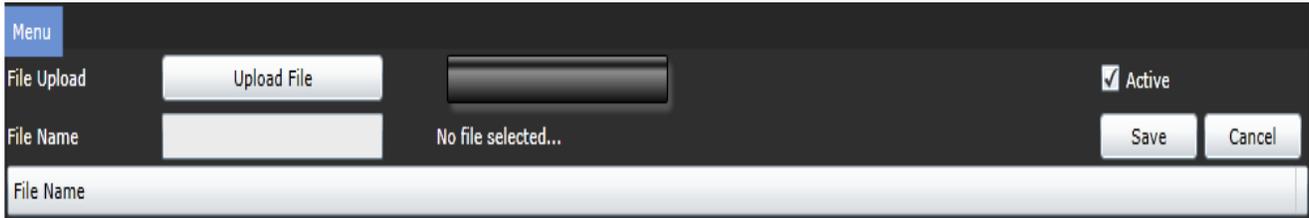
Enter the necessary information and any comments. To only save the request, uncheck the **Submitted**

checkbox, then click **Save**. If you want to go ahead and submit the request, you only need to click **Save**.

If you have a saved request that you want deleted, click on the , then click the **Update** button. Go to the bottom of the request and uncheck the **Active** checkbox, then click **Save**.

## TRANSACTIONAL UPLOAD & DOWNLOAD Q

The **Transaction Q** module allows you to upload files, such as 837 files which contain the claims you want the MCO to process, into their system.

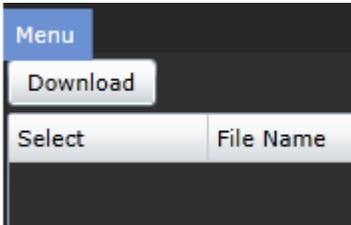


Click the **Upload File** button, choose the file from your local computer and click the **Save** button.

The **Download Q** module allows you to download files your MCO has waiting for you.

Files that will be available are:

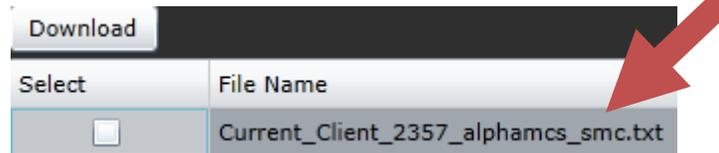
- Response files – 999’s, 824’s and 277’s
- 835’s
- Current Client Dumps (Current\_Client\_) – runs daily. This shows all clients for which the provider has submitted claims, has an authorization, has an enrollment, has an appointment, has a SAR, has a client update request, or is marked as the clinical home.
- Current Auth Dumps (Current\_Auths\_) – runs daily. This shows info for authorizations that have not ended within the last 90 days.
- Current Claims Dumps (Current\_Claims\_) – runs daily. This shows all claims inserted within the last year.




If 835’s aren’t showing on your **Download Q**, check your **Provider Details** module. On the Base tab, if your company doesn’t have **Certified for EDI** checked OR if that is checked but there’s a clearing house chosen, you will not receive 835’s from the system.

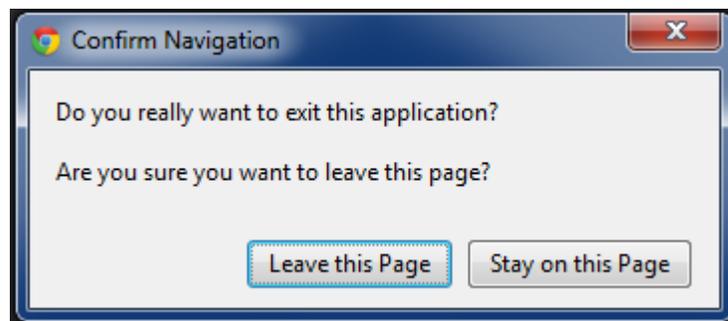
### Exporting from the Download Q

To export from the Download Q, click on the checkbox to the left of the doc you want to download, then click the **Download** button.



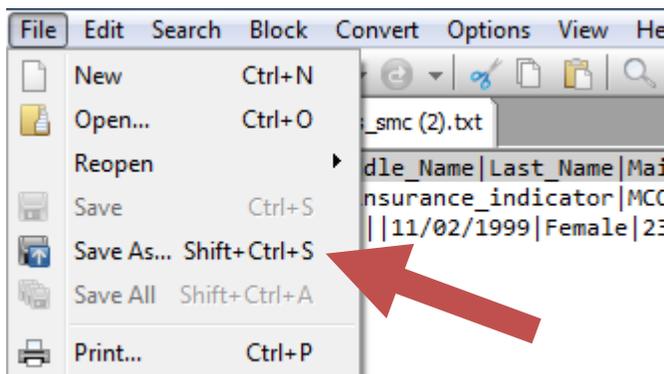
Note that the MCO the file is from is listed in the file name right before the '.txt'. If you are contracted with multiple MCO's you will receive the same file (in this case, the client dump) daily from each MCO.

When you click the **Download** button, it will may ask you if you want to leave the page or not. Click **Leave this Page**.



After the file has been downloaded, it will either show at the bottom of your screen or a pop-up will display asking if you want to open or save it. Click **Open**. If it asks what you want to open it in, choose Excel.

If you're not given the option, you can open the file in it's .txt version. When it's open, go to **File** on the menu bar and choose **Save As**.



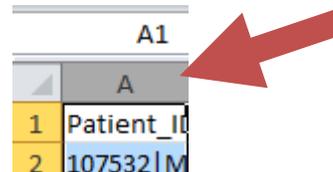
You'll want to resave the file name by taking out the .txt and putting in .xls instead. When you're done, click **Save**. Don't worry about the **Save as type** dropdown.

File name:

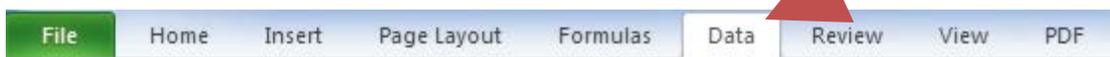
Save as type:

Make sure to save the file somewhere you'll remember, like your desktop.

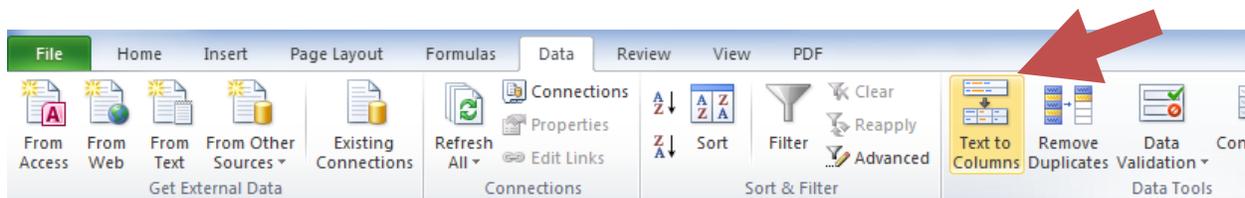
Go to where you saved the file and open it. Click on the **A** column,



then go to your Menu Bar and click **Data**.

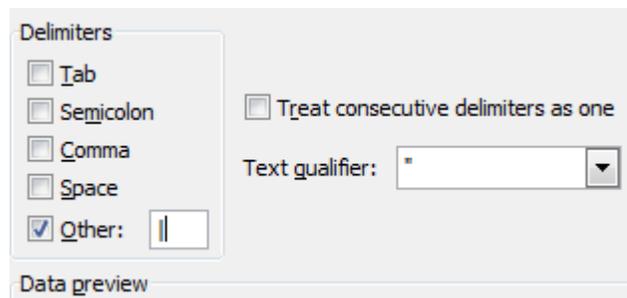


Next, click the **Text to Columns** button.



There will now be a series of pop-ups. Select **Delimited** from the screen and click **Next**.

In the following screen, uncheck **Tab** and check **Other**. Then enter a solid vertical line in the text box. This line can be found on your keyboard just above the **Enter** key. Click **Shift** and this key to enter the line into this text box, then click **Next**.



Delimiters

Tab

Semicolon

Comma

Space

Other: ||

Treat consecutive delimiters as one

Text qualifier: " " ▾

Data preview

On the next screen, select **General**, then click **Finish**. You will now see the report in a more easy to read format.

## RA REPORTS

This module allows users to view Remittance Advice reports from a certain time frame or by check number.



The screenshot shows the 'RA REPORTS' interface. At the top, there are search filters: 'Check #' with an input field, 'Check Date' (selected), 'Claim Processing', 'Start Date' with a date picker, and 'End Date' with a date picker. A 'Search' button is on the right. Below the filters, a red message reads: 'Please enter check number or date range to limit the search.' and a 'Clear Fields' link. Below this is a table header with the following columns: 'Check #', 'Claim Process Start Date', 'Claim Process End Date', 'Provider #', 'Provider', and 'RA Name'.

## USER PROFILE

This module allows users to reset their passwords, as well as identify when they want to be notified by e-mail in the event of the MCO taking action on something they have submitted.

**RESET PASSWORD**

Old Password   Check To Show Password

New Password

Confirm Password

**USER NOTIFICATIONS**

SEND NOTIFICATION	PORTAL USER NOTIFICATIONS DESC	NOTIFICATIONS ID