

Secure Client Portal Instructional Guide



Introduction

The Secure Client Portal is a secure website developed to allow Vendors across Centene health plans to perform a variety of functions from their office. By having an account created and registering the account, a Vendor employee can easily check patient eligibility. Vendors can view authorizations, care plans, health record information--Visits, Medications, Immunizations, Labs, and Allergies through the website. Vendors can view and submit Assessments and have the ability to upload and view uploaded documents for the member. A secure messaging feature allows a Vendor employee to communicate with the health plan without having to pick up the telephone.

How to Use the Manual

This manual is intended to be a quick reference for using a tool or function offered on the website when a Vendor employee needs assistance. The manual also explains many ways to use the site in order to get the most out of the resource.

System Requirements

Access the Secure Vendor website using Internet Explorer 10.0 or higher, Firefox and/or Google Chrome. Each browser should be updated to the most recent version available optimal performance.

Google Chrome is the preferred browser to be used for the Client Portal.

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Create an account/Register new user:

The screen below appears:

Enter your User Name and Password


Secure <https://client.envolvehealth.com/sso/login>


isted Sites Imported From IE Superior HealthPlan Settings New Tab Log In - Confluence

envolve⁷

The Tools You Need Now!

Our site has been designed to help you get your job done.
Manage all products with ease in one location.

 **Check Eligibility**
Find out if a member is eligible for service.

 **Authorization Lookup**
View and verify Member Authorizations.

Login

User Name (*Email*)

Password

[Login](#)

[Forgot Password / Unlock Account](#)

Landing page allows administrators to:

- Invite and manage users' accounts
- View Recent Activity

The screenshot shows the administrator dashboard for the Peach State Health Plan. At the top left is the logo for Peach State Health Plan. To the right are navigation links for Eligibility, Authorizations, and Messaging (with a notification badge for 194). Below the navigation is a filter bar showing 'Viewing Dashboard For : EXCEADMIN860' and 'Medicaid', with a green 'GO' button. The main content area is titled 'Welcome' and contains two expandable menu items: 'Invite User' and 'Manage Accounts'. Below these is a 'Recent Activity' section with a table showing one activity: '04/24/2017 You submitted an assessment.' At the bottom of the page are links for 'Terms and Conditions', 'Privacy Policy', and 'Copyright © 2017, Centene Corporation'.

peach state health plan.

Eligibility Authorizations Messaging 194

Viewing Dashboard For : EXCEADMIN860 Medicaid GO

Welcome

Invite User >

Manage Accounts >

Recent Activity

Date	Activity
04/24/2017	You submitted an assessment.

[Terms and Conditions](#) [Privacy Policy](#) Copyright © 2017, Centene Corporation

To create a new account, click on Invite User.

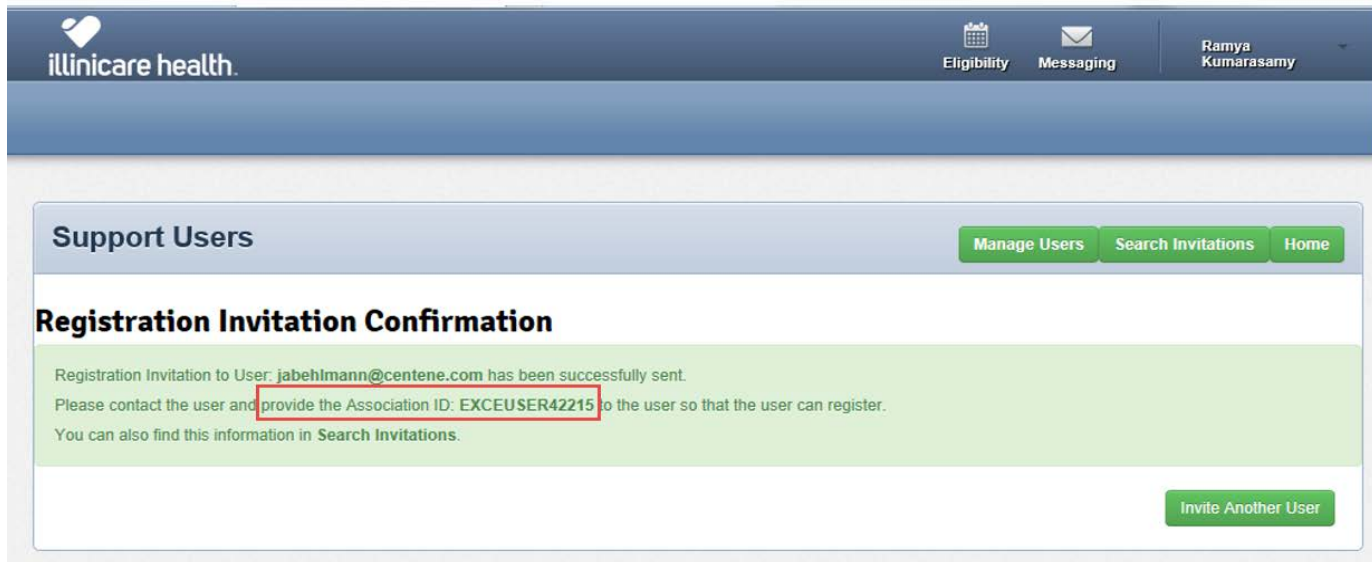
- Complete the invitation
 - Ensure that you do not enter any spaces before or after the end of your text, additional spaces can prevent the user from accessing the website

Click on “Invite User”

The screenshot shows the 'Invite a User' interface. At the top, there is a dark blue navigation bar with the 'envolve' logo on the left and 'Support', 'Messaging' (with a red notification badge showing '112'), and 'Log Out' on the right. Below the navigation bar is a light blue header for the 'Invite a User' form, which includes two orange buttons: 'Search Invitations' and 'Manage Users'. The form itself is white and contains several input fields: 'First Name' with 'Janet', 'Last Name' with 'Behlmann', 'Email' with 'JaBehlmann@centene.com' and a help icon, 'Re-enter Email' with 'JaBehlmann@centene.com', and 'Telephone Number' with '111-222-1111' and a help icon. Below these fields is a 'Can Access' section with a checked checkbox and the text 'Admins [General Access, Eligibility, User Role Admin, Assessments, Care Plan]'. At the bottom of the form, a green 'Invite User' button is highlighted with a red rectangular box.

When the invitation is submitted, the Registration Invitation Confirmation will open—this will generate an email from noreply@envolvehealth.com.

The Association ID number will be required to complete the user's access.



Support Users Manage Users Search Invitations Home

Registration Invitation Confirmation

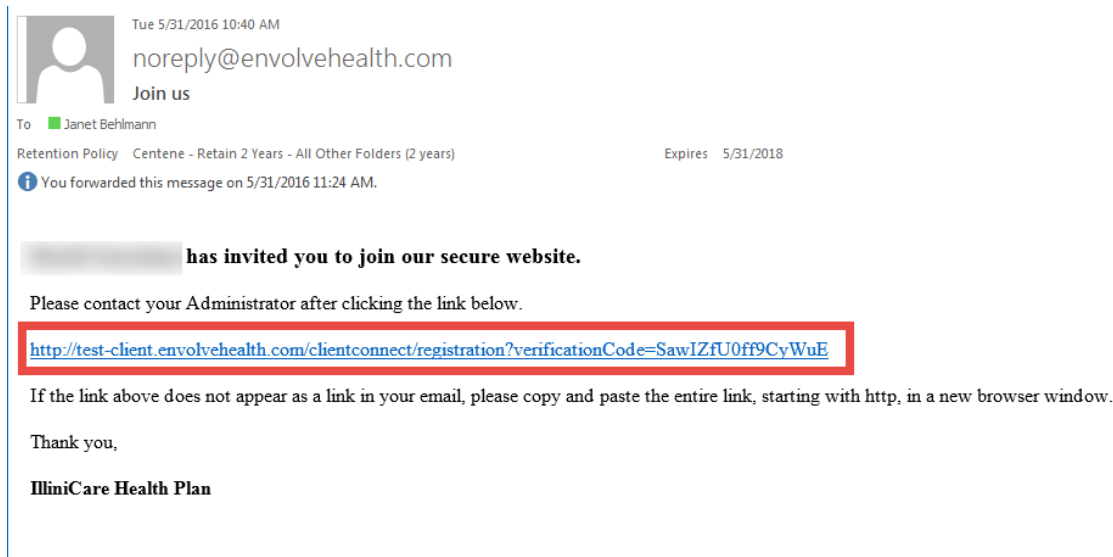
Registration Invitation to User: jabehlmann@centene.com has been successfully sent.

Please contact the user and provide the Association ID: **EXCEUSER42215** to the user so that the user can register.

You can also find this information in [Search Invitations](#).

Invite Another User

The user should click on the hyperlink inside of the email.



Tue 5/31/2016 10:40 AM
noreply@envolvehealth.com
Join us

To: Janet Behlmann

Retention Policy: Centene - Retain 2 Years - All Other Folders (2 years) Expires: 5/31/2018

You forwarded this message on 5/31/2016 11:24 AM.

has invited you to join our secure website.

Please contact your Administrator after clicking the link below.

<http://test-client.envolvehealth.com/clientconnect/registration?verificationCode=SawIZfU0ff9CyWuE>

If the link above does not appear as a link in your email, please copy and paste the entire link, starting with http, in a new browser window.

Thank you,
IlliniCare Health Plan

The hyperlink will open the “Register Provider” form.

- All information enter must match exactly what was entered on the invitation.
 - Please complete the secret questions and answers.
 - The telephone number is required. The fax number is not required.
- Click “Submit”

envolve

Register Provider

Your Progress

Cancel

Your Details

Association Id ?

First Name

Last Name

Email ?

Re-enter Email

Password ?

Retype Password

Enter your secret questions and contact information below, and then click "Submit" to complete your registration.
Please do not close this window or your changes will be lost.

Secret Questions

Question 1 ▾
Answer

Question 2 ▾
Answer

Question 3 ▾
Answer

Contact Information

Telephone Number ?

Fax Number ?

Submit →

To verify and complete registration, the client portal administrator will log into the website using their user name and password.


Secure <https://client.envolvehealth.com/sso/login>


Imported From IE Superior HealthPlan Settings New Tab Log In - Confluence

envolve™

The Tools You Need Now!

Our site has been designed to help you get your job done.
Manage all products with ease in one location.

 **Check Eligibility**
Find out if a member is eligible for service.

 **Authorization Lookup**
View and verify Member Authorizations.

Login

User Name (*Email*)

Password

[Login](#)

[Forgot Password / Unlock Account](#)

On the manage accounts page, once the invited user has completed their registration form, an orange button will instruct the administrator to verify account and update user. Click on "Verify Account/Update User."

The screenshot shows the 'envolvè' user management interface. At the top, there are navigation links for 'Support', 'Messaging', and 'Log Out'. Below the header is a 'Search for User' section with buttons for 'Invite User', 'Search Invitations', and 'Filter'. The main content is a table with columns: Email, Last Name, First Name, Association Id, Telephone Number, Requested Role Type, Status, and Create Date. The table contains four rows of user data. The third row, for user 'Kompalli Srinivas' with email '@centene.com', has an orange button labeled 'Verify Account / Update User' highlighted with a red border. The other rows have blue buttons for 'Begin Support' and 'Update User'.

Email ↓	Last Name ↓	First Name ↓	Association Id ↓	Telephone Number ↓	Requested Role Type ↓	Status ↓	Create Date ↓	
[redacted]@hotmail.com	Guccione	David	EXCEADMIN	[redacted]	ACCOUNT_MANAGER	Active	05/31/2016	Begin Support Update User
[redacted]@att.net	Rosenthal	Francoise	EXCEADMIN	[redacted]	ACCOUNT_MANAGER	Active	05/28/2016	Begin Support Update User
[redacted]@centene.com	Kompalli	Srinivas	EXCEADMIN	[redacted]	ACCOUNT_MANAGER	Active	05/28/2016	Verify Account / Update User
[redacted]@centene.com	Kompalli	Srinivas	EXCEADMIN!	[redacted]	ACCOUNT_MANAGER	Active	05/28/2016	Begin Support Update User

To verify the account, review the user information and what the user will be able to access. In comments, enter the date the account was verified and any additional information required per health plan protocol. Click "Update User."

Update User status and permissions for [REDACTED]

User Information

Email: [REDACTED]@centene.com	Status: Active
Name: [REDACTED]	Last Login Time:
Telephone Number: (800) [REDACTED]	

Can Access Admins[General Access,Eligibility,User Role Admin,Assessments,Care Plan]

Profile Information

Association Id: EXCEADMIN [REDACTED]	Verified: No
--------------------------------------	--------------

Verify Account Verify Account

Update Status: Disable user

Comments: 170 characters left

Comments History:

When the account is successfully updated, a green banner will appear stating the account is activated. An email will automatically be generated to the new user.

Update User status and permissions for [redacted]

Success! User is Activated now ×

User Information

Email: [redacted]@centene.com	Status: Active
Name: [redacted]	Last Login Time:
Telephone Number: (800) [redacted]	

Can Access Admins[General Access,Eligibility,User Role Admin,Assessments,Care Plan]

Profile Information

Association Id: EXCEADMIN [redacted]	Verified: Yes
--------------------------------------	---------------

Update Status: Disable user

Comments: 200 characters left


Comments History:

Verify User jabeHmann 05/31/2016 Account verified and activated

The user will receive an email from noreply@envolvehealth.com that their account has been activated. The enclosed hyperlink in the email should be saved to enter the website.

The image shows an email and a web browser. The email is from noreply@envolvehealth.com, dated Tue 5/31/2016 11:40 AM, with the subject 'Profile Activation'. It is addressed to Janet Behlmann. The email body contains the following text:

"



Your profile has been activated on your IlliniCare Health Plan account.

Please use the link below to login and enjoy all the features provided by your newly-activated profile.

<http://test-client.envolvehealth.com/clientconnect//>

If the link above does not appear as a link in your email, please copy and paste the entire link that starts with http in a new browser window.

Thank you,

IlliniCare Health Plan

"

The browser screenshot shows the URL <https://client.envolvehealth.com/sso/login>. The page features the Envolve logo and the heading 'The Tools You Need Now!'. Below this, there are two main sections: 'Check Eligibility' (with a thumbs-up icon) and 'Authorization Lookup' (with a checkmark icon). A 'Login' form is overlaid on the right side of the page, containing fields for 'User Name (Email)' (with 'name@domain.com' entered) and 'Password', a green 'Login' button, and a link for 'Forgot Password / Unlock Account'.

Depending on the users' access in the Client Portal you will have different views of items in the Client Portal.

Admin View

Admin view—the Admin view gives you the ability to invite users to the Client Portal

The screenshot shows the Admin View dashboard. At the top, there is a navigation bar with icons for Eligibility, Authorizations, Reports, and Messaging. Below this, a header bar indicates the user is viewing the dashboard for 'EXCEADMIN440'. The main content area is titled 'Welcome' and contains two buttons: 'Invite User' and 'Manage Accounts', both with right-pointing chevrons. Below these buttons is a 'Recent Activity' section with a table. The table has two columns: 'Date' and 'Activity'. One entry is visible: '06/19/2017' with the activity 'You registered for an account.' At the bottom of the page, there are links for 'Instruction Manual (PDF)', 'Terms and Conditions', 'Privacy Policy', and 'Copyright © 2017, Centene Corporation'.

Viewing Dashboard For : EXCEADMIN440

Welcome

Invite User >

Manage Accounts >

Recent Activity

Date	Activity
06/19/2017	You registered for an account.

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Medical Management view

The screenshot shows the Medical Management view dashboard. At the top, there is a navigation bar with icons for Eligibility, Authorizations, Reports, and Messaging. Below this, a header bar indicates the user is viewing the dashboard for 'EXCEUSER98800'. The main content area is titled 'Welcome' and contains a 'Recent Activity' section with a table. The table has two columns: 'Date' and 'Activity'. One entry is visible: '06/14/2017' with the activity 'You registered for an account.' At the bottom of the page, there are links for 'Instruction Manual (PDF)', 'Terms and Conditions', 'Privacy Policy', and 'Copyright © 2017, Centene Corporation'.

Viewing Dashboard For : EXCEUSER98800

Welcome

Recent Activity

Date	Activity
06/14/2017	You registered for an account.

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Coordination of Benefits view

The screenshot shows a user dashboard with a dark blue header. On the right side of the header, there are icons for 'Eligibility' (calendar) and 'Messaging' (envelope). Below the header, the text 'Viewing Dashboard For : EXCEUSER14797' is displayed next to a dropdown menu. The main content area has a light blue 'Welcome' banner. Below this is a 'Recent Activity' section with a table listing user actions.

Date	Activity
04/21/2017	You changed your password.
04/20/2017	You registered for an account.

To check for a member:

You MUST have two identifying pieces of member information to find the member.

- Enter the member's last name or Member ID
- Enter the member's Date of Birth
- Click Check Eligibility or Enter

The screenshot shows the 'Eligibility Check' page. At the top, there are navigation tabs for 'Eligibility' and 'Messaging'. Below that, a search bar contains 'Viewing Eligibility For : EXCEADMIN308' and 'IlliniCare Health Plan' with a green 'GO' button. The main form has three input fields: 'Date of Service' with '04/24/2017', 'Member ID or Last Name' with '123456789 or Smith', and 'DOB' with 'mm/dd/yyyy'. A green 'Check Eligibility' button and a 'Print' button are to the right. Below the form is a table with columns: ELIGIBLE, DATE OF SERVICE, PATIENT NAME, DATE CHECKED, and CARE GAPS. At the bottom, there are links for 'Instruction Manual (PDF)', 'Terms and Conditions', 'Privacy Policy', and 'Copyright © 2017, Centene Corporation'. Three red arrows point from the search bar to the input fields.

You will see on the Eligibility Check Page

- A Green Thumbs Up means the member is eligible. Risk Categories can provide information about risk for disease management or missing preventative care components.
- Click on the member's name to open the health record

The screenshot shows the 'Eligibility Check' page with a search result. The search bar contains 'Viewing Eligibility For : EXCEUSER92350'. The form has 'Date of Service' as '04/21/2017', 'Member ID or Last Name' as '123456789 or Smith', and 'DOB' as 'mm/dd/yyyy'. A green 'Check Eligibility' button and a 'Print' button are to the right. Below the form is a table with columns: ELIGIBLE, DATE OF SERVICE, PATIENT NAME, DATE CHECKED, and CARE GAPS. The first row shows a green thumbs up icon in the 'ELIGIBLE' column, '04/21/2017' in 'DATE OF SERVICE', a blurred name in 'PATIENT NAME', and '04/21/2017' in 'DATE CHECKED'. A 'Remove' button is at the bottom right. Three callout boxes with red borders and white text provide instructions: 'Green Thumbs Up means the member is eligible.', 'Click on the member's name to open the health record', and 'Risk Categories/Care Gaps can provide information about risk for disease management or missing preventative care'.

- An Orange Thumbs Down means the member is Not Eligible

Viewing Eligibility For : EXCEADMIN884

Eligibility Check

Date of Service: [] ID or Last Name: 123456789 or Smith DOB: mm/dd/yyyy [Check Eligibility](#) [Print](#)

An Orange Thumbs Down means the member is not found or not eligible

ELIGIBLE	DATE CHECKED	PATIENT NAME	CARE GAPS
Ineligible	04/21/2017	[REDACTED]	04/21/2017

[Remove](#)

This is the member Overview Page. This is limited information regarding the member.

Viewing Eligibility For : EXCEUSER92350

[Back to Eligibility Check](#)

Overview

Coordination of Benefits

👍 This patient is eligible as of today, Apr 21, 2017.

Patient Information

Name [REDACTED]
 Gender [REDACTED]
 Birthdate [REDACTED]
 Age [REDACTED]
 Member # [REDACTED]
 Address [REDACTED]

Eligibility History

Start Date	End Date	Product Name
Dec 2, 2016	Ongoing	[REDACTED]
Nov 1, 2016	Dec 1, 2016	[REDACTED]

[more](#)

Click on the Coordination of Benefits tab.

- Coordination of Benefits will display on the member

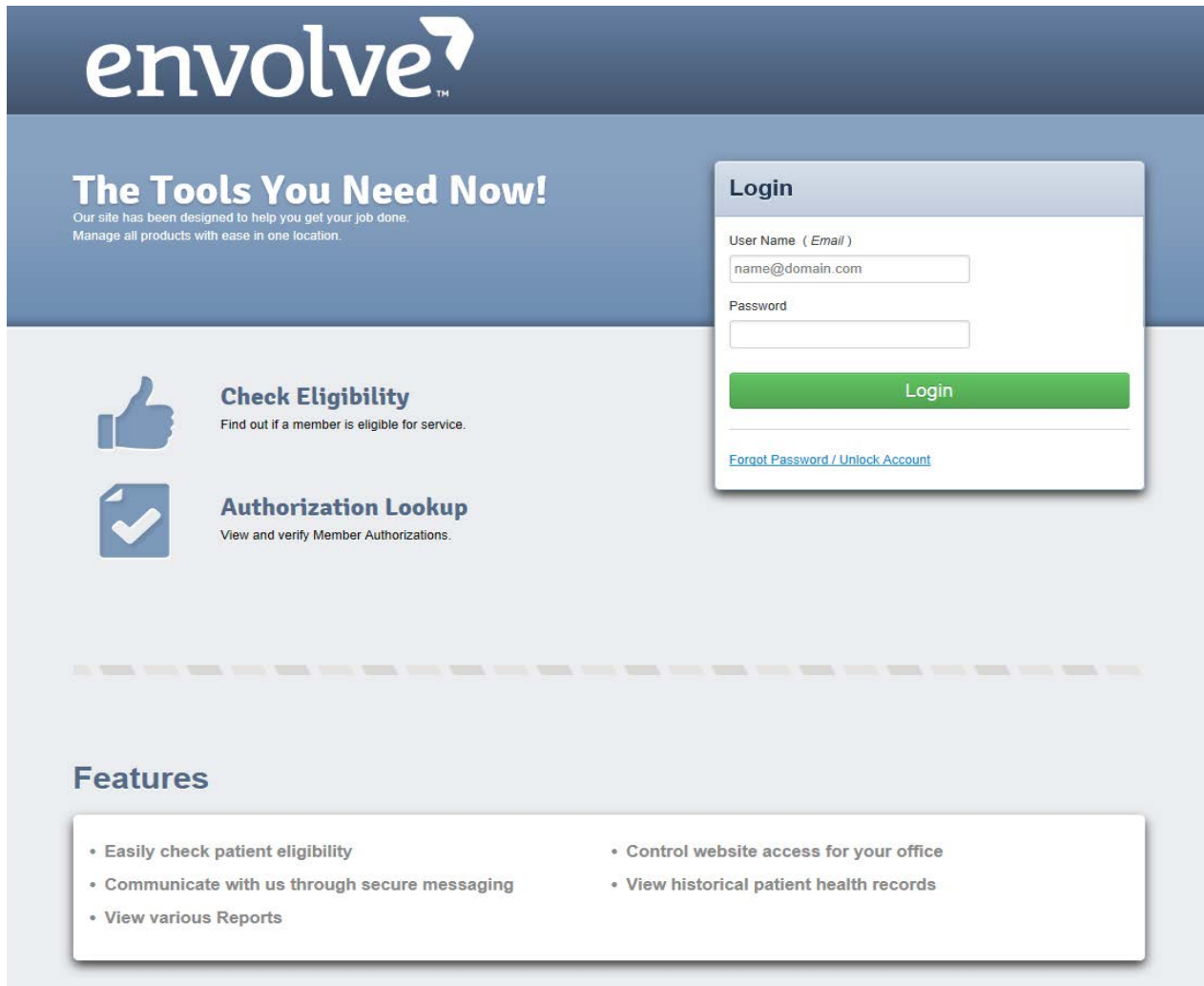
Viewing Eligibility For : EXCEADMIN884

Back to Eligibility Check

Effective Date	Term Date	Policy Number	Group Number	Carrier Name	Coverage
				UNITED HEALTHCARE	MEDICAL AND HOSPITAL COMMERCIAL COVERAGE LOUISIANA PLAN ONLY

Client Portal for Case Management:

Log into the Client Portal using your email and password



The screenshot shows the Envolve Client Portal interface. At the top, the Envolve logo is displayed in white on a dark blue background. Below the logo, a light blue banner contains the text "The Tools You Need Now!" followed by a sub-header and a brief description. To the right of this banner is a login form with fields for "User Name (Email)" and "Password", a green "Login" button, and a link for "Forgot Password / Unlock Account". Below the banner, two feature cards are shown: "Check Eligibility" with a thumbs-up icon and "Authorization Lookup" with a document icon. A dashed line separates this section from the "Features" section below. The "Features" section is enclosed in a white box with a shadow and lists four bullet points: "Easily check patient eligibility", "Communicate with us through secure messaging", "View various Reports", "Control website access for your office", and "View historical patient health records".

envolve™

The Tools You Need Now!

Our site has been designed to help you get your job done.
Manage all products with ease in one location.


Login


User Name (*Email*)

Password

[Login](#)

[Forgot Password / Unlock Account](#)

 **Check Eligibility**
Find out if a member is eligible for service.

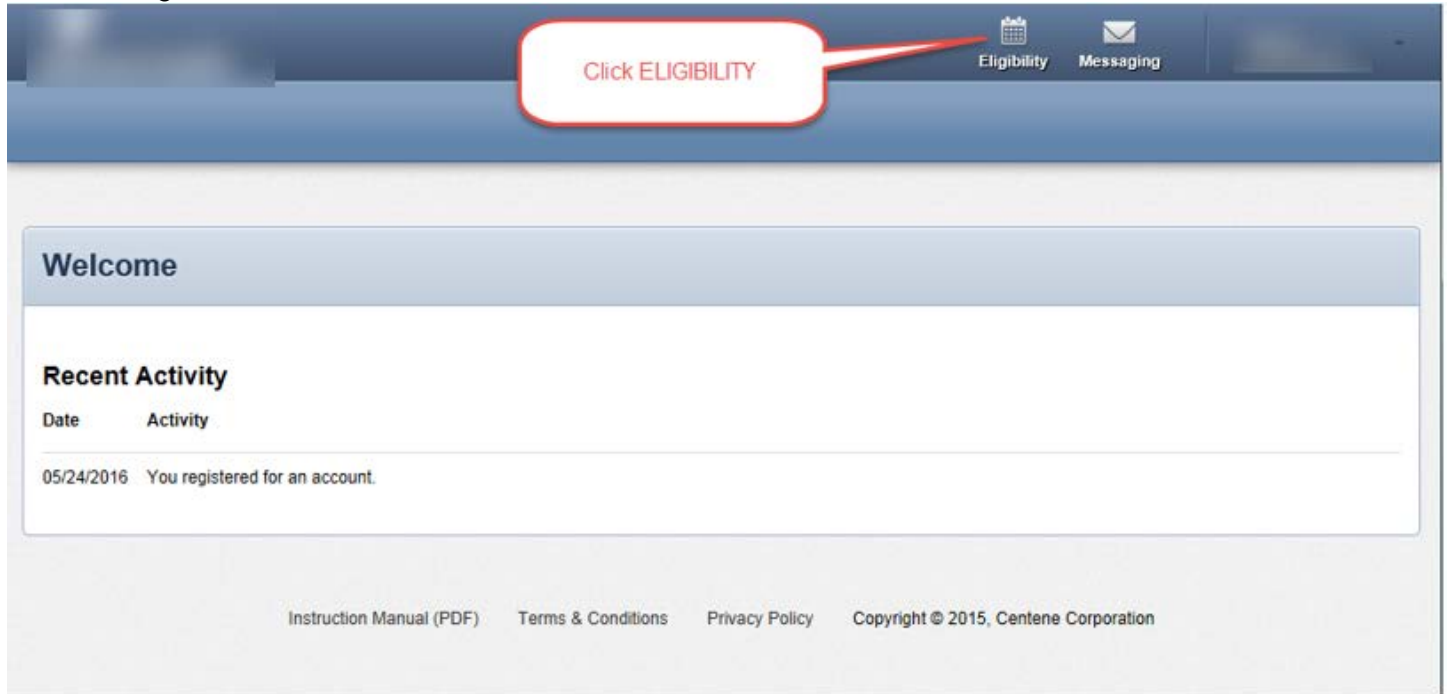
 **Authorization Lookup**
View and verify Member Authorizations.

Features

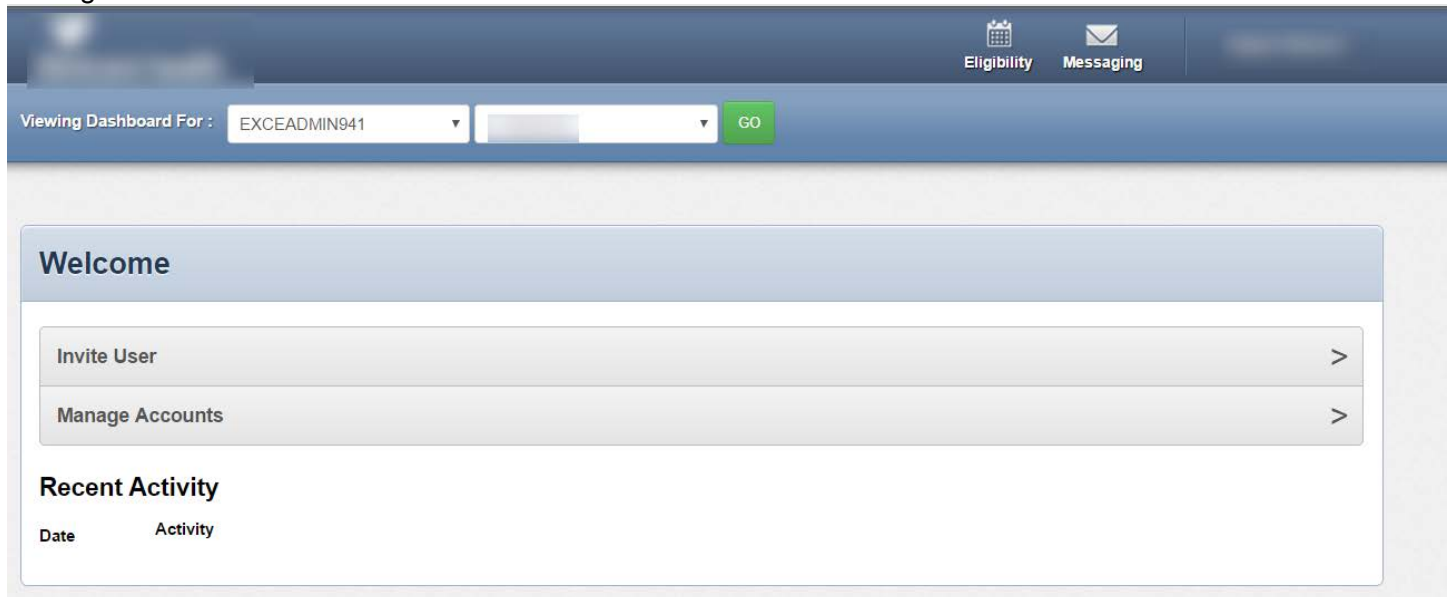
- Easily check patient eligibility
- Communicate with us through secure messaging
- View various Reports
- Control website access for your office
- View historical patient health records

Depending on your account you will see of the screens below when you login.

Case Management view



Admin view—the Admin view gives you the ability to invite users to the Client Portal with Medical Management access.



To check for a member:

You MUST have two identifying pieces of member information to find the member.

- Enter the member's last name or Member ID
- Enter the member's Date of Birth
- Click Check Eligibility or Enter

Viewing Eligibility For : EXCEEDADMIN308 IlliniCare Health Plan GO

Eligibility Check

Date of Service 04/24/2017 Member ID or Last Name 123456789 or Smith DOB mm/dd/yyyy [Check Eligibility](#) [Print](#)

ELIGIBLE	DATE OF SERVICE	PATIENT NAME	DATE CHECKED	CARE GAPS
----------	-----------------	--------------	--------------	-----------

[Instruction Manual \(PDF\)](#) [Terms and Conditions](#) [Privacy Policy](#) Copyright © 2017, Centene Corporation

You will see on the Eligibility Check Page

- A Green Thumbs Up means the member is eligible. Risk Categories can provide information about risk for disease management or missing preventative care components.
- The Orange Emergency Room Visit tab will send a notification to TruCare that the member has been seen in the Emergency Room.
- Click on the member's name to open the health record

Eligibility Check

Date of Service: 05/30/2016 Member ID or Last Name: [] [Check Eligibility]

ELIGIBLE	DATE OF SERVICE	PATIENT NAME	DATE CHECKED	CARE GAPS
	05/30/2016	Test Member	05/30/2016	Risk Category Alerts: COPD/Asthma Non-compliant for EPSDT annual well visit.

Callouts:

- Click on the member's name to open the health record
- Risk categories can provide information about risk for disease management or missing preventative care components
- The Emergency Room Visit send a notification to TruCare that the member has been seen in the Emergency
- Green Thumbs Up means the member is eligible. Orange Thumbs Down means the member is not found or not eligible.

Emergency Room Visit? [+] Remove [X]

Conditions Privacy Policy Copyright © 2015, Centene Corporation

- An Orange Thumbs Down means the member is Not Eligible

Eligibility Check

Viewing Eligibility For: EXCEADMIN884 []

Date of Service: [] Member ID or Last Name: 123456789 or Smith DOB: mm/dd/yyyy [Check Eligibility] [Print]

ELIGIBLE	DATE OF SERVICE	PATIENT NAME	DATE CHECKED	CARE GAPS
	04/21/2017	[]	04/21/2017	

Callout:

- An Orange Thumbs Down means the member is not found or not eligible

Remove [X]


This is the member Overview Page. This is limited information regarding the member.

Eligibility Authorizations Reports Messaging ¹⁷

Viewing Eligibility For : EXCEADMIN440 Maryland MSO

[Back to Eligibility Check](#)

- Overview**
- Authorizations
- Care Plan
- Assessments
- Health Record
- Document Upload
- Notes
- Coordination of Benefits
- Referrals
- Task Manager
- Special Needs

 This patient is eligible as of today, Jul 11, 2017.

Patient Information

Name
Gender
Birthdate
Age
Member #
Address

Eligibility History

Start Date	End Date	Product Name
Jul 1, 2017	Ongoing	
Jun 8, 2016	Jun 30, 2017	

[more](#)

When you click the Authorizations tab to open any previously submitted authorizations will be listed for the member—the authorization number will be a blue hyperlink. If you click the authorization number the authorization will open with the details of the authorization visible.

Viewing Eligibility For : EXCEADMIN792

Back to Eligibility Check

Overview	Authorizations						
Authorizations	STATUS	AUTH NBR	FROM DATE	TO DATE	DIAGNOSIS	AUTH TYPE	SERVICE
Care Plan	APPROVE	[blurred]	08/09/2016	08/13/2016	O80	INPATIENT	[blurred]
Assessments	APPROVE	[blurred]	05/16/2016	05/18/2016	O47.02	INPATIENT	[blurred]
Health Record							
Quality Management/Medical Necessity Upload							

When Care Plan tab is clicked any Care Plans that is currently open on the member will display.

Viewing Eligibility For : EXCEADMIN338

Eligibility Authorizations Messaging 87

Back to Eligibility Check

Overview

Authorizations

Care Plan

Assessments

Health Record

Quality Management/Medical Necessity Upload

Notes

This member's care plan to treat: **COPD**
07/26/2016 - OPEN

Case Worker
N/A N/A

Alteration in nutrition: Less than body requirements related to decreased intake secondary to fatigue

Goal: **Maintains adequate nutrition by 2016-07-29**

may be a barrier to success

What we're doing:
2016-07-29 Arrange dietary consultation for member

Activity intolerance related to inefficient breathing

Goal: **Demonstrates ways to decrease dyspnea by 2016-07-29**

What we're doing:
2016-07-29 Educate member on importance of pacing activity level to conserve energy

- Member facing Care Plans will **always** have “Self Management” in the title
- Members cannot view barriers. Members can only view “Goals” and “What we’re doing”.

Back to Eligibility Check

Overview	This participant's care plan to treat:	Service Coordinator
Authorizations	Care Coordination	N/A N/A
Care Plan	07/17/2017 - OPEN	
Assessments	Member has gaps in care	
Health Record	Goal: All member care gaps have been addressed with the member and/or provider by 2017-07-31	
Document Upload	MEMBER SHOULD NOT SEE FREE TEXT may be a barrier to success	
Notes	What we're doing:	
Coordination of Benefits	2017-07-31 Assist member with scheduling appointments for needed	Member facing Care Plans will always have "Self Management" in the title.
Referrals	This participant's care plan to treat:	
Task Manager	Asthma Self Management Care Plan 4.4	N/A N/A
Special Needs	07/17/2017 - OPEN	
	Lack of Exercise	
	Goal: Tolerate routine exercise without occurrence of asthma attack by 2017-07-31	
	MEMBER SHOULD NOT SEE FREE TEXT may be a barrier to success	
	What we're doing:	
	2017-07-31 Drink plenty of liquid while exercising	Members cannot view barriers. Members can only view "Goals" and "What we're doing".

To complete the assessment click [Fill Out Now!](#)—the assessment will open. Any previously completed assessments will display with a blue hyperlink—you can click on the name of the assessment—which will be a blue hyperlink.

[Back to Eligibility Check](#)

<ul style="list-style-type: none"> Overview Authorizations Care Plan <li style="background-color: #4f81bd; color: white; padding: 5px;">Assessments Health Record Document Upload Notes Coordination of Benefits Referrals Task Manager Special Needs 	<p style="text-align: center;">Please tell us about your participant's health</p> <p>External DSNP Medicare Health Risk Assessment Please take a few minutes to fill out the form Fill Out Now!</p> <p>LOCK-In_Vendor Lock-In_Vendor Fill Out Now!</p> <p>LTSS Member Contact_VENDOR LTSS Member Contact_VENDOR Fill Out Now!</p> <p>LTSS Nursing Home Assessmentv2_VENDOR LTSS Nursing Home Assessmentv2_VENDOR Fill Out Now!</p> <p>Person Centered Service Plan (PCSP) VENDOR Please take a few minutes to fill out the form Fill Out Now!</p> <p>InterRAI MCO Home Care HRAV2_VENDOR InterRAI MCO Home Care HRAV2_VENDOR Fill Out Now!</p>	<p style="text-align: center;">Previous Assessments</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Assessment Name</th> <th style="text-align: left;">Submit Date</th> </tr> </thead> <tbody> <tr><td>Lock-In All</td><td>11/12/2017</td></tr> <tr><td>Lock-In_Vendor</td><td>11/03/2017</td></tr> <tr><td>External DSNP Medicare Health Risk Assessment</td><td>10/06/2017</td></tr> <tr><td>InterRAI MCO Home Care HRA_V2</td><td>10/06/2017</td></tr> <tr><td>Back-up and Emergency Plans</td><td>10/06/2017</td></tr> <tr><td>Lock-In All</td><td>10/06/2017</td></tr> <tr><td>Lock-In All</td><td>10/04/2017</td></tr> <tr><td>External DSNP Medicare Health Risk Assessment</td><td>10/03/2017</td></tr> <tr><td>InterRAI MCO Home Care HRA_V2</td><td>10/03/2017</td></tr> <tr><td>Back-up and Emergency Plans</td><td>10/03/2017</td></tr> <tr><td>Lock-In All</td><td>10/03/2017</td></tr> </tbody> </table>	Assessment Name	Submit Date	Lock-In All	11/12/2017	Lock-In_Vendor	11/03/2017	External DSNP Medicare Health Risk Assessment	10/06/2017	InterRAI MCO Home Care HRA_V2	10/06/2017	Back-up and Emergency Plans	10/06/2017	Lock-In All	10/06/2017	Lock-In All	10/04/2017	External DSNP Medicare Health Risk Assessment	10/03/2017	InterRAI MCO Home Care HRA_V2	10/03/2017	Back-up and Emergency Plans	10/03/2017	Lock-In All	10/03/2017
Assessment Name	Submit Date																									
Lock-In All	11/12/2017																									
Lock-In_Vendor	11/03/2017																									
External DSNP Medicare Health Risk Assessment	10/06/2017																									
InterRAI MCO Home Care HRA_V2	10/06/2017																									
Back-up and Emergency Plans	10/06/2017																									
Lock-In All	10/06/2017																									
Lock-In All	10/04/2017																									
External DSNP Medicare Health Risk Assessment	10/03/2017																									
InterRAI MCO Home Care HRA_V2	10/03/2017																									
Back-up and Emergency Plans	10/03/2017																									
Lock-In All	10/03/2017																									

Complete the assessment questions.

[Back to Eligibility Check](#)

<ul style="list-style-type: none"> Overview Authorizations Care Plan <li style="background-color: #4f81bd; color: white; padding: 5px;">Assessments Health Record Document Upload Notes Coordination of Benefits Referrals Task Manager Special Needs 	<h2 style="text-align: center;">External DSNP Medicare Health Risk Assessment</h2> <p style="text-align: center;">Please take a few minutes to fill out the form below.</p> <h3>GENERAL INFORMATION</h3> <p>On what date are these questions being answered? <input type="text" value="mm/dd/yyyy"/></p> <p>Name of person answering questions? <input type="text"/></p> <p>Relationship to member <input type="text" value="Select"/></p> <p>Member Cell Phone Number <input type="text" value="() - -"/></p> <p>Member Email Address <input type="text"/></p> <h3>GLOBAL HEALTH/SAFETY</h3> <p>In general, how would you rate your health? <input type="text" value="Select"/> <i>(Required)</i></p> <p>Do you have a doctor or health care provider? <input type="text" value="Select"/></p> <p>Do you ever have any problems with transportation to your medical appointments? <input type="text" value="Select"/></p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Mandatory fields require the user to complete those questions.

[Back to Eligibility Check](#)

External DSNP Medicare Health Risk Assessment

Please take a few minutes to fill out the form below.

GENERAL INFORMATION

On what date are these questions being answered?

Name of person answering questions?

Relationship to member

Member Cell Phone Number

Member Email Address

GLOBAL HEALTH/SAFETY

In general, how would you rate your health? *(Required)*

Do you have a doctor or health care provider?

Do you ever have any problems with transportation to your medical appointments?

Mandatory field require the user to complete before the assessment can be submitted.

Alerts will appear for mandatory fields that must be completed to be able to submit the assessment. The missed questions will be highlighted by a red box.

[Back to Eligibility Check](#)

External DSNP Medicare Health Risk Assessment

Please complete the required questions to submit the form.

- [In general, how would you rate your health?](#) -- Required Field
- [How many times have you been in the hospital in the last 3 months?](#) -- Required Field
- [How many times have you been in the Emergency Department in the last 3 months?](#) -- Required Field
- [Do you always have enough money to buy your food?](#) -- Required Field
- [In the past two months have you been living in stable housing that you own, rent or stay in as part of a household*?](#) -- Required Field
- [Do you always feel safe in your home and around all the people in your life?](#) -- Required Field
- [Have you ever been told by a doctor or health care provider that you have any of these conditions? \(check all that apply\)](#) -- Required Field
- [In general, how satisfied are you with your life?](#) -- Required Field
- [Feeling lonely](#) -- Required Field
- [Little interest or pleasure in doing things.](#) -- Required Field
- [Feeling down, depressed or hopeless.](#) -- Required Field
- [Do you feel that stress in your life is affecting your health?](#) -- Required Field
- [During the last month, have you had pain that interfered with completion of housework or your ability to work outside the home?](#) -- Required Field

Please take a few minutes to fill out the form below.

GENERAL INFORMATION

On what date are these questions being answered?

Name of person answering questions?

Relationship to member

Member Cell Phone Number

Member Email Address

GLOBAL HEALTH/SAFETY

In general, how would you rate your health? Required Field
(Required)

Assessments

Overview

Authorizations

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Health Record

Document Upload

Notes

Coordination of Benefits

Referrals

Task Manager

Special Needs

Alerts will appear for mandatory fields that must be completed prior to submitting the assessment

If a mandatory field is missed the question and response options will be highlighted with a red box.

The previously completed assessment will open with the answers—you will now be able to edit or update the assessment.

Back to Eligibility Check

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Notes

Coordination of Benefits

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Task Manager

Special Needs

Lock-In_Vendor - 11/03/2017

Update or Change Back

Name of Agency Completing Assessment
Disney Rehab

Name of employee completing assessment
Minnie Mosue

Credentials of employee completing assessment
R.N.

Date assessment completed:
11/03/2017

Member identified for Lock-in
Yes

Date entered into Medical Pharmacy Lock-in
11/03/2017

Date entered into Hospital Lock-in
11/03/2017

Lock-in Type
Medical Pharmacy AND Hospital Lock-in

Next Medical Pharmacy Lock-in review date
11/03/2017

Next Hospital Lock-in review date
11/03/2017

PCP name and address
Dr Tom Jones

PCP's Phone Number
8555551212

Controlled Substance Prescriber name and address
Dr Sam Sneed

Controlled Substance Prescriber phone
855555656

Pharmacy name and address
Walgreens

Back to Eligibility Check

Overview

Authorizations

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Assessments

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Coordination of Benefits

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Special Needs

LOCK-In_Vendor

Please take a few minutes to fill out the form below

Vendor and Credentials

Name of Agency Completing Assessment (Required)

Name of employee completing assessment (Required)

Credentials of employee completing assessment (Required)

Date assessment completed: (Required)

Lock-in

Member identified for Lock-in (Required) Yes No

Date entered into Medical Pharmacy Lock-in

Date entered into Hospital Lock-in

Green banner appears with the message stating the assessment was successfully submitted.

The screenshot shows a web application interface for a 'Test Member'. At the top right, there are navigation icons for 'Eligibility' and 'Messaging'. Below the header, there is a 'Back to Eligibility Check' button and the text 'Test Member'. A green banner message is displayed, stating: 'Thank you for submitting Case Management Vendor Assessment. It will display in 24 hours.' A red callout bubble points to this message with the text: 'Green message appears stating the assessment was successfully transmitted'. Below the banner, there is a section titled 'Please tell us about your patient's health' with a sub-section for 'Case Management Vendor Assessment'. A 'Fill Out Now!' button is visible next to the sub-section. At the bottom of the page, there are links for 'Instruction Manual (PDF)', 'Terms & Conditions', 'Privacy Policy', and 'Copyright © 2015, Centene Corporation'.

In approximately 24 hours, the previous assessment will be available to view on the Client Portal. The member's responses will be visible by clicking on the blue hyperlink assessment name under Previous Assessments.

[Back](#)

Member's name
[Redacted]

Name of Person Answering Questions:
Member

Relationship to Member of Person Answering the Questions or Completing the Form:
Self

Member's Height (feet and inches):
5'11"

Do you know who your PCP (doctor) is?
Yes

If Yes PCP Name
[Redacted]

PCP's Phone Number
no answer

When did you last see your PCP?
Less than three months ago.

Do you have an appointment scheduled with your PCP?
No

If Yes, when?
no answer

Are you seeing a behavioral health provider?
No

The Health Record tab will have Visits, Medications, Immunizations, Labs, and Allergies.

- The Visits tab will display Primary Diagnosis, Date, Visit Type, Claim Type, and Facility/Provider

The screenshot shows a web interface for a health record. At the top left, there is a button labeled "Back to Eligibility Check". Below this is a navigation menu with several options: Overview, Authorizations, Care Plan, Assessments, Health Record (which is highlighted in blue), Document Upload, Notes, Coordination of Benefits, Referrals, Task Manager, and Special Needs. To the right of the navigation menu, there are five tabs: Visits (highlighted in blue), Medications, Immunizations, Labs, and Allergies. Below the tabs, a yellow banner contains the text: "Information displaying on the participants health record is based on submitted claims". Below the banner is a table with the following columns: Primary Diagnosis, Date, Visit Type, Claim Type, and Facility/Provider. The table contains one row of data: Primary Diagnosis is blank, Date is "10/01/2017 - 10/01/2017", Visit Type is "Home", Claim Type is "Medical", and Facility/Provider is a blurred grey box.

Primary Diagnosis	Date	Visit Type	Claim Type	Facility/Provider
	10/01/2017 - 10/01/2017	Home	Medical	

- The Medications tab will display the Fill Date, Drug Name, Dose, Quantity, and Dispensing Pharmacy.

Viewing Eligibility For :

[Back to Eligibility Check](#)

[Medications](#)
[Immunizations](#)
[Labs](#)
[Allergies](#)

Information displaying on the members health record is based on submitted claims.

Fill Date	Drug Name	Dose	Quantity	Dispensing Pharmacy
08/30/2016		0 MG/0.3ML	2	
08/30/2016		0 MG/0.3ML	2	
08/29/2016		N/A	45	
08/28/2016		0 MG	30	
07/29/2016		0 MG	30	
07/29/2016		5 MG	50	
07/29/2016		N/A	45	
07/27/2016		10 MG	10	
07/27/2016		500 MG	60	
07/17/2016		25 MG	30	
07/17/2016		25 MG	30	
07/01/2016		N/A	20	

When the Immunizations tab is clicked Code, Description, Facility/Provider and Date will display.

The screenshot shows a web application interface for viewing a member's health record. At the top, there are navigation icons for 'Eligibility' and 'Messaging'. Below this is a search bar with the text 'Viewing Eligibility For : EXCEADMIN210' and a 'GO' button. A 'Back to Eligibility Check' button is located on the left side of the main content area. The main content area has a sidebar on the left with menu items: 'Overview', 'Care Plan', 'Assessments', and 'Health Record'. The 'Health Record' item is selected and highlighted. In the main content area, there are tabs for 'Visits', 'Medications', 'Immunizations', 'Labs', and 'Allergies'. The 'Immunizations' tab is selected. Below the tabs, there is a yellow warning message: 'Information displaying on the members health record is based on submitted claims.' Below the warning is a table with the following columns: 'Code', 'Description', 'Facility/Provider', and 'Date'. The table contains several rows of data, but the text is blurred.

When Labs tab is clicked the Date of Service, Procedure, and Ordering Provider is displayed.

Viewing Eligibility For : EXCEADMIN792

Back to Eligibility Check

Medications Immunizations **Labs** Allergies

Information displaying on the members health record is based on submitted claims.

Date Of Service	Procedure	Ordering Provider
Jul 28, 2016		
Jul 28, 2016		
Jan 27, 2016		
Jan 27, 2016		
Jan 27, 2016		
Jan 27, 2016		
Jan 27, 2016		
May 21, 2013		
May 21, 2013		
May 21, 2013		
Dec 1, 2012		

If you click on the Procedure the Procedure, Ordering Provider, and Date of Service will display. Component, You Value, Standard Range, and Units values will display.

[Eligibility](#)
[Authorizations](#)
[Messaging](#)

Viewing Eligibility For :

[Back to Eligibility Check](#)

[Medications](#)
[Immunizations](#)
[Labs](#)
[Allergies](#)

Information displaying on the members health record is based on submitted claims.

COMPONENT RESULTS FOR

Procedure

 Ordering Provider

 Date of Service

Component	Your Value	Standard Range	Units
PROTEIN	2+	NEGATIVE	

When Allergies tab is Clicked, Substance, Reaction, Severity, Source, Allergy Details, Active, and Date Identified will display

Viewing Eligibility For : EXCEADMIN922

Back to Eligibility Check

Overview
Authorizations
Care Plan
Assessments
Health Record

Visits Medications Immunizations Labs Allergies

Information displaying on the members health record is based on submitted claims.

Substance	Reaction	Severity	Source	Allergy Details	Active	Date Identified
Other (Morphine)	Trouble Breathing	Moderate	Member/Self-Reported	None Reported	Yes	Nov 4, 2013
Other (Pyridium)	Trouble Breathing	Moderate	Member/Self-Reported	None Reported	Yes	Nov 4, 2013

Document Upload gives the user the ability to upload additional Medical Necessity, Long Term Services and Support, Quality Management, or Behavioral Health information on the member.

The screenshot shows a web portal interface for document upload. On the left is a vertical navigation menu with the following items: Overview, Authorizations, Care Plan, Assessments, Health Record, Document Upload (highlighted in blue), Notes, Coordination of Benefits, Referrals, Task Manager, and Special Needs. At the top left of the main content area is a button labeled "Back to Eligibility Check". The main content area is divided into two tabs: "Document Upload" (active) and "Document Review". The "Document Upload" tab contains a form with four numbered steps: 1. "Document Category:" with a dropdown menu showing "Select a Document Category." and a list of options: "Medical Necessity", "Long Term Services And Support", "Quality Management", and "Behavioral Health". 2. "Document Type:" with a text input field. 3. "Upload File:" with a "Choose File" button and the text "No file chosen". 4. A green "Submit" button.

Document formats accepted for uploading from the web portal are as follows:

- BMP
- DOC
- DOCX
- GIF
- JPG
- LIC
- PDF
- PNG
- PPT
- PPTX
- RTF
- TIF
- TXT
- XLS
- XLSX

In Document Category select Medical Necessity then select the Document Type selections are Emergency Notes, Inpatient Notes, InterQual Smart Sheets, and Other are displayed.

[Back to Eligibility Check](#)

Document Upload | **Document Review**

1. Document Category:
2. Document Type:
3. Upload File:
4.

Choose the Document Type and click Choose File—make the selection of the file you wish to upload. You **MUST** click Submit to Upload the document.

Eligibility Authorizations Reports Messaging 17

Viewing Eligibility For : EXCEADMIN440

Back to Eligibility Check

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Document Upload **Document Review**

1. Document Category: Medical Necessity

2. Document Type: Emergency Notes

3. Upload File: Choose File Biofinity pic.JPG

4. Submit

Accepted will display once the upload is successful.

Eligibility Authorizations Reports Messaging ¹⁷

Viewing Eligibility For : EXCEADMIN440

[Back to Eligibility Check](#)

- Overview
- Authorizations
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- Document Upload**
- Notes
- Coordination of Benefits
- Referrals
- Task Manager
- Special Needs

Document Upload

Document Review

- Document Category: Medical Necessity
- Document Type: Emergency Notes
- Upload File: No file chosen
-

ACCEPTED ←

You have the ability to view documents that have been uploaded from the Client Portal. Select Document Review then make a selection in Document Category of Medical Necessity and enter a Date Range into the Start Date and End Date—please note **Date span is limited to a 3 month period.**

Viewing Eligibility For : EXCEADMIN440

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Document Upload | **Document Review**

1. Document Category: Medical Necessity

2. Date Range: Start Date: 07/09/2017 End Date: 07/12/2017
Date span limited to a 3-month period.

3. Search Documents

When Search Documents is selected a document list will be displayed of documents that have been uploaded

Eligibility Authorizations Reports Messaging ¹⁷

Viewing Eligibility For : EXCEADMIN440 Maryland MSO

Back to Eligibility Check

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Document Upload **Document Review**

1. Document Category: Medical Necessity

2. Date Range: Start Date: End Date:
MM/DD/YYYY MM/DD/YYYY
Date span limited to a 3-month period.

3. [Search Documents](#)

SUBMITTED DATE	TYPE	FILE NAME
07/11/2017	Emergency Notes	Emergency Notes_Biofinity pic.JPG

In Document Category select Long Term Services and Support then select the Document Type. Selections are Integrated Service Plan, Emergency Back Up Plan, Appointed Designated Representative Form, Statement to Self-Direct Health Maintenance, and HCBS Provider Choice Form are displayed.

Viewing Eligibility For : EXCEADMIN440

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Document Upload **Document Review**

1. Document Category: Long Term Services And Support

2. Document Type: Integrated Service Plan
Integrated Service Plan
Emergency Back Up Plan
Appointed Designated Representative Form
Statement to Self-Direct Health Maintenance
HCBS Provider Choice Form

3. Upload File:

4. Submit

Choose the Document Type and click Choose File—make the selection of the file you wish to upload. You **MUST** click Submit to Upload the document.

Eligibility Authorizations Reports Messaging 17

Viewing Eligibility For : EXCEADMIN440

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Document Upload **Document Review**

1. Document Category: Long Term Services And Support

2. Document Type: Appointed Designated Representati

3. Upload File: Choose File Asthma Self ... an 4.4.docx

4. **Submit**

Accepted will display once the upload is successful.

Eligibility Authorizations Reports Messaging 17

Viewing Eligibility For : EXCEADMIN440

Back to Eligibility Check

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Document Upload **Document Review**

1. Document Category: Long Term Services And Support
2. Document Type: Integrated Service Plan
3. Upload File: Choose File No file chosen
4. Submit

ACCEPTED

You have the ability to view documents that have been uploaded from the Client Portal. Select Document Review then make a selection in Document Category of Long Term Services and Support and enter a Date Range into the Start Date and End Date—please note **Date span is limited to a 3 month period.**

The screenshot shows a web application interface. At the top, there is a navigation bar with icons for Eligibility, Authorizations, Reports, and Messaging (with a notification badge of 17). Below this, a header section displays 'Viewing Eligibility For:' with two dropdown menus: 'EXCEADMIN440' and 'Maryland MSO'. A 'Back to Eligibility Check' button is located on the left. A vertical sidebar on the left contains menu items: Overview, Authorizations, Care Plan, Assessments, Health Record, Document Upload (highlighted in blue), Notes, Coordination of Benefits, Referrals, Task Manager, and Special Needs. The main content area features two tabs: 'Document Upload' and 'Document Review' (selected). Under the 'Document Review' tab, there are three numbered steps: 1. 'Document Category:' with a dropdown menu set to 'Long Term Services And Support'. 2. 'Date Range:' with 'Start Date:' and 'End Date:' fields containing '07/09/2017' and '07/12/2017' respectively, and a note 'Date span limited to a 3-month period.' 3. A green 'Search Documents' button.

When Search Documents is selected a document list will be displayed of documents that have been uploaded

Eligibility Authorizations Reports Messaging 17

Viewing Eligibility For : EXCEADMIN440

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Overview
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 Task Manager
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Document Upload **Document Review**

1. Document Category: Long Term Services And Support

2. Date Range: Start Date: End Date:
 MM/DD/YYYY MM/DD/YYYY
 Date span limited to a 3-month period.

3. [Search Documents](#)

SUBMITTED DATE	TYPE	FILE NAME
07/11/2017	Appointed Designated Representative Form	Appointed Designated Representative Form_Asthma Self Management Care Plan 4.4.docx

When the Notes tab is selected—Write Note must be clicked.

Back to Eligibility Check

Overview

Authorizations

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Health Record

Quality Management/Medical Necessity Upload

Notes

Notes

Create a New Note

General Note

Write Note

General Notes will open and you must select an Option from the drop down box.

Back to Eligibility Check

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Quality Management/Medical Necessity Upload

Notes

General Notes

Note Category:

Select an Option

Select an Option

Admin Note

Inbound Call Note

Outbound Call Note

Note:

Admin Notes selection will display the following: Encounter Date and Note. You must complete Encounter Date and Note area—there is a 9,500 character limit inside the Note area.

The screenshot shows a web application interface with a top navigation bar containing a "Back to Eligibility Check" button. On the left is a vertical sidebar menu with options: Overview, Authorizations, Care Plan, Assessments, Health Record, Quality Management/Medical Necessity Upload, and Notes. The "Notes" option is highlighted with a red arrow pointing to the right. The main content area is titled "General Notes" and contains the following fields: "Note Category:" with a dropdown menu set to "Admin Note"; "Encounter Date:" with a text input field containing "mm/dd/yy" and a red arrow pointing to the field from the right; and "Note:" with a large, empty text area.

Inbound Call Note will display the following: Encounter Date, Contact Name, Contact Reason, and Note area. You must complete Encounter Date, Contact Name, Contact Reason and Note area—there is a 9,500 character limit inside the Note area.

The screenshot shows a web application interface similar to the previous one. The top navigation bar has a "Back to Eligibility Check" button. The sidebar menu has "Notes" highlighted with a red arrow pointing to the right. The main content area is titled "General Notes" and contains the following fields: "Note Category:" with a dropdown menu set to "Inbound Call Note"; "Encounter Date:" with a text input field containing "mm/dd/yy" and a red arrow pointing to the field from the right; "Contact Name:" with a text input field and a red arrow pointing to the field from the right; "Contact Reason:" with a dropdown menu set to "Select an Option." and a red arrow pointing to the field from the right; and "Note:" with a large, empty text area.

Outbound Call Note will display the following: Encounter Date, Outcome, Contact Name, Contact Reason, and Note area. You must complete Encounter Date, Outcome, Contact Name, Contact Reason and Note area—there is a 9,500 character limit inside the Note area.

The screenshot shows a web interface for entering an 'Outbound Call Note'. On the left is a navigation menu with items: Overview, Authorizations, Care Plan, Assessments, Health Record, Quality Management/Medical Necessity Upload, and Notes. Red arrows point from the 'Quality Management/Medical Necessity Upload' and 'Notes' items to the main form area. The main form is titled 'General Notes' and contains the following fields:

- Note Category:** A dropdown menu with 'Outbound Call Note' selected.
- Encounter Date:** A text input field with the placeholder 'mm/dd/yy'.
- Outcome:** Three radio button options: 'Left Voicemail', 'Successful', and 'Unsuccessful'. A red arrow points to the 'Left Voicemail' option.
- Contact Name:** A text input field. A red arrow points to this field.
- Contact Reason:** A dropdown menu with 'Select an Option.' as the current selection. A red arrow points to this field.
- Note:** A large text area for entering the note content.

Click on the Coordination of Benefits tab.

- Coordination of Benefits will display on the member

The screenshot shows a web application interface. At the top, there is a navigation bar with icons and labels for 'Eligibility', 'Authorizations', 'Reports', and 'Messaging' (with a red notification badge showing '17'). Below this, a header bar indicates 'Viewing Eligibility For : EXCEADMIN440'. A 'Back to Eligibility Check' button is visible. On the left, a sidebar menu lists various options: Overview, Authorizations, Care Plan, Assessments, Health Record, Document Upload, Notes, Coordination of Benefits (highlighted in blue), Referrals, Task Manager, and Special Needs. The main content area displays a light blue message box stating 'We do not have any COB information.'

Select the Referrals tab—you will have the ability to create a Case Management Referral. When a referral is submit to TruCare, it will generate a task that can be found on the member's health record and in the specific queues

Viewing Eligibility For : EXCEADMIN440

Back to Eligibility Check

Referrals

*Source: Please select Source
Please select Source
Case Management

*Date: 07/11/2017 3 31 PM

Last Name, First Name: kumarasamy ramya

Phone Number, Extension: () - - - -

Provide Providers name, TIN, and Email Address with referrals

Submit

Complete applicable fields

[Back to Eligibility Check](#)

Referrals

*Source: Case Management

*Date: 07/11/2017 3:41 PM

Last Name, First Name: [] []

Phone Number, Extension: () - - [] []

Provide Providers name, TIN, and Email Address with referrals: []

Reason(s) for Referral (select all that apply):

- Behavioral Health Services
- Care Coordination
- Co-Morbid Medical and Behavioral
- Complex Medical Issues
- High Risk Member
- High Risk Pregnancy

[Submit](#)

When a referral is submit to TruCare, it will generate a task that can be found on the member's health record and in the specific queue.

The screenshot displays a web application interface for TruCare. At the top, there is a navigation bar with icons for 'Eligibility', 'Authorizations', 'Reports', and 'Messaging' (which has a red notification badge with the number '17'). Below the navigation bar, a header section shows 'Viewing Eligibility For : EXCEADMIN440' with a dropdown arrow. A 'Back to Eligibility Check' button is located on the left side of the main content area. The main content area is divided into a left sidebar and a main panel. The sidebar contains a list of menu items: Overview, Authorizations, Care Plan, Assessments, Health Record, Document Upload, Notes, Coordination of Benefits, Referrals (highlighted in blue), Task Manager, and Special Needs. The main panel displays the title 'Referrals' in a large, bold font, followed by the message 'Your request is submitted Successfully'.

When Task Manager is selected you will have the ability to create a task. This task will be visible on the member's record.

The screenshot shows a web application interface for a member's record. At the top, there is a navigation bar with icons for Eligibility, Authorizations, Reports, and Messaging (with a red notification badge showing '17'). Below this, a header bar indicates 'Viewing Eligibility For : EXCEADMIN440'. A sidebar on the left contains a list of menu items: Overview, Authorizations, Care Plan, Assessments, Health Record, Document Upload, Notes, Coordination of Benefits, Referrals, Task Manager (highlighted in blue), and Special Needs. The main content area is titled 'Task Manager' and contains a form for creating a task. The form includes a 'Task Category' dropdown menu with a blue highlight on the first option, 'Select a Task'. Below this, there are labels for 'Time:', 'Name:', and 'Other:' followed by a large text input area. A green 'Submit Task' button is located at the bottom of the form.

When Submit Task submission is successful you will receive the following:

[Back to Eligibility Check](#)

Task Manager

Task Category:

Time:

Name:

Other:

Success

- Overview
- Authorizations
- Care Plan
- Assessments
- Health Record
- Document Upload
- Notes
- Coordination of Benefits
- Referrals
- Task Manager**
- Special Needs

When you select Special Needs complete applicable fields.

Viewing Eligibility For : EXCEADMIN440

[Back to Eligibility Check](#)

- Overview
- Authorizations
- Care Plan
- Assessments
- Health Record
- Document Upload
- Notes
- Coordination of Benefits
- Referrals
- Task Manager
- Special Needs**

Special Needs

Name:

Phone:

Time:

Please tell us if your member has special needs that may require additional assistance from the health plan.

<input type="checkbox"/> Asthma	<input type="checkbox"/> Physical Disability	<input type="checkbox"/> Overnight Care
<input type="checkbox"/> Cancer	<input type="checkbox"/> Birth Defects	<input type="checkbox"/> Pregnancy
<input type="checkbox"/> Developmental Delay	<input type="checkbox"/> Cognitive Disability	<input type="checkbox"/> Sickle Cell Disease
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Developmentally Disabled	<input type="checkbox"/> Recent Surgery
<input type="checkbox"/> Evacuation Assistance Needed	<input type="checkbox"/> Drug/Alcohol Problem	<input type="checkbox"/> Special Needs Present-Information Unknown
<input type="checkbox"/> Heart Disease	<input type="checkbox"/> Hearing Impaired	<input type="checkbox"/> Speech Impaired
<input type="checkbox"/> HIV/AIDS	<input type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Substituted Care
<input type="checkbox"/> Kidney Problem	<input type="checkbox"/> Intellectual Disability	<input type="checkbox"/> Transportation Access Issue
<input type="checkbox"/> Mental Health Condition	<input type="checkbox"/> Medically Fragile	<input type="checkbox"/> Visually Impaired
<input type="checkbox"/> Other Chronic Illness	<input type="checkbox"/> Mentally Retarded	<input type="checkbox"/> Wheelchair Access Req

When Special Needs submission is successful you will receive the following:

[Back to Eligibility Check](#)

Special Needs

Name:

Phone:

Time:

Please tell us if your member has special needs that may require additional assistance from the health plan.

<input type="checkbox"/> Asthma	<input type="checkbox"/> Physical Disability	<input type="checkbox"/> Overnight Care
<input type="checkbox"/> Cancer	<input type="checkbox"/> Birth Defects	<input type="checkbox"/> Pregnancy
<input type="checkbox"/> Developmental Delay	<input type="checkbox"/> Cognitive Disability	<input type="checkbox"/> Sickle Cell Disease
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Developmentally Disabled	<input type="checkbox"/> Recent Surgery
<input type="checkbox"/> Evacuation Assistance Needed	<input type="checkbox"/> Drug/Alcohol Problem	<input type="checkbox"/> Special Needs Present- Information Unknown
<input type="checkbox"/> Heart Disease	<input type="checkbox"/> Hearing Impaired	<input type="checkbox"/> Speech Impaired
<input type="checkbox"/> HIV/AIDS	<input type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Substituted Care
<input type="checkbox"/> Kidney Problem	<input type="checkbox"/> Intellectual Disability	<input type="checkbox"/> Transportation Access Issue
<input type="checkbox"/> Mental Health Condition	<input type="checkbox"/> Medically Fragile	<input type="checkbox"/> Visually Impaired
<input type="checkbox"/> Other Chronic Illness	<input type="checkbox"/> Mentally Retarded	<input type="checkbox"/> Wheelchair Access Req

Success!

To send a Secure Message

- Click Messaging from the Dashboard
- The Secure Messaging Inbox appears displaying any messages for that user.

The screenshot displays a web application interface for Secure Messaging. At the top, there is a navigation bar with icons for Eligibility, Authorizations, and Messaging. Below this, a header area shows 'Viewing For: EXCEADMIN922' and a 'Create Message' button. The main content area is titled 'Secure Messaging' and features a sidebar with 'Inbox', 'Sent', and 'Trash' tabs. The inbox list shows several messages from 'Sunflower Health' with dates ranging from 4/19/2017 to 4/25/2017, all with the subject 'Appeal'. The selected message is expanded, showing the following details:

- From:** Sunflower Health
- Subject:** Appeal
- Date:** 4/25/2017 at 4:24 PM
- Tax ID:** EXCEADMIN922

The message body contains the following text:

Hello,

Thanks for contacting Managed Health Services. Your health and well-being is important to us. That is why we monitor this message center on a regular basis. We promise that you will receive a response to your message within 24-48 hours after you send it to us. If you send your message to us on a weekend or holiday, we will respond on the first business day after we receive it.

Thank you,
Sunflower Health Plan.

From: [redacted]

To create a Secure Message

- Click Create Message
- In the New Message screen the To field is populated
- You are able to select a Subject from the drop down menu
- If this message is regarding a Member complete the Member ID and Date of Birth fields
- In the Your Message field you can type the message to the Health Plan staff.
- Click Send when complete.

The screenshot shows the 'New Message' interface. At the top, there are navigation tabs for 'Eligibility', 'Authorizations', and 'Messaging'. Below these is a 'Viewing For:' dropdown set to 'EXCEADMIN922' and a 'Create Message' button. The main form area is titled 'New Message' and contains the following elements:

- To:** A dropdown menu with 'Sunflower Health' selected. A red arrow points to this field.
- Subject:** A dropdown menu with 'Select a subject' selected. A red arrow points to this field.
- Member ID:** A text input field containing '123456789'. A red arrow points to this field.
- Date of Birth:** A text input field with a placeholder 'mm/dd/yyyy'. A red arrow points to this field.
- Your Message:** A large text area for composing the message.
- Buttons:** 'send' and 'cancel' buttons at the bottom left. A red arrow points to the 'send' button.

A note above the Member ID and Date of Birth fields reads: 'If your message is about a specific member, please include their ID and Date of Birth below.'

- A confirmation message appears that your message successfully sent.

The screenshot shows the top navigation bar with icons for Eligibility, Authorizations, and Messaging. Below the navigation bar, there is a 'Viewing For' dropdown menu set to 'EXCEADMIN922' and a 'Create Message' button. The main content area is titled 'Secure Messaging' and features a sidebar with 'Inbox', 'Sent', and 'Trash' tabs. The 'Inbox' tab is active, showing a list of messages: 'Sunflower Health 4/26/2017 Claim Payment', 'Sunflower Health 4/25/2017 Appeal', and 'Sunflower Health 4/25/2017 Appeal'. A green notification banner at the top of the message content area reads 'Success! Message sent.' Below this, the message details are displayed: 'From Sunflower Health', 'Subject Claim Payment', 'Date 4/26/2017 at 12:16 PM', and 'Tax ID EXCEADMIN922'. Action buttons for 'reply' and 'send to trash' are visible in the top right corner of the message content area.

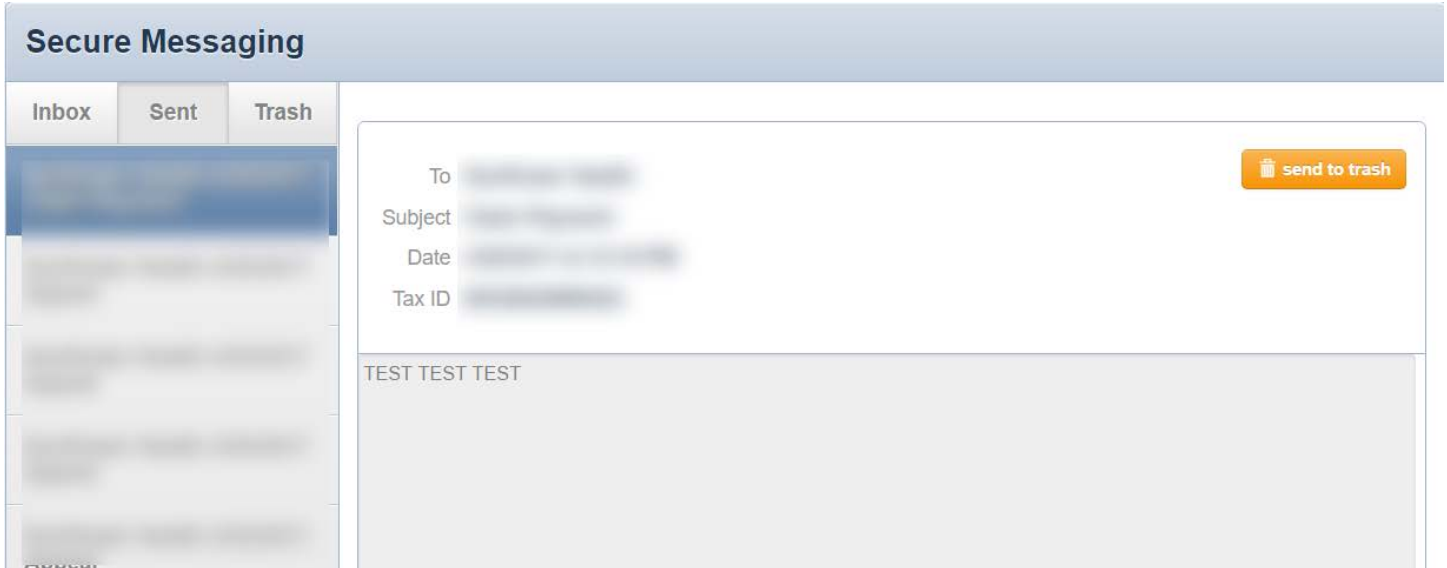
The Inbox will allow you to view received messages

- Click Inbox—your message will appear
- To send to Trash—click the Send to Trash button

The screenshot shows the 'Secure Messaging' interface with the 'Inbox' tab selected. The message list on the left includes 'Appeal'. The main content area displays the details of a received message: 'From [redacted]', 'Subject [redacted]', 'Date [redacted]', and 'Tax ID EXCEADMIN922'. Action buttons for 'reply' and 'send to trash' are visible. The message body contains the following text: 'Hello, Thanks for contacting Managed Health Services. Your health and well-being is important to us. That is why we monitor this message center on a regular basis. We promise that you will receive a response to your message within 24-48 hours after you send it to us. If you send your message to us on a weekend or holiday, we will respond on the first business day after we receive it. Thank you, [redacted]'. Below the message body, there is a section with 'Fron [redacted]', 'Date [redacted]', 'User [redacted]', and 'Tax ID [redacted]', followed by the text 'TEST TEST TEST'.

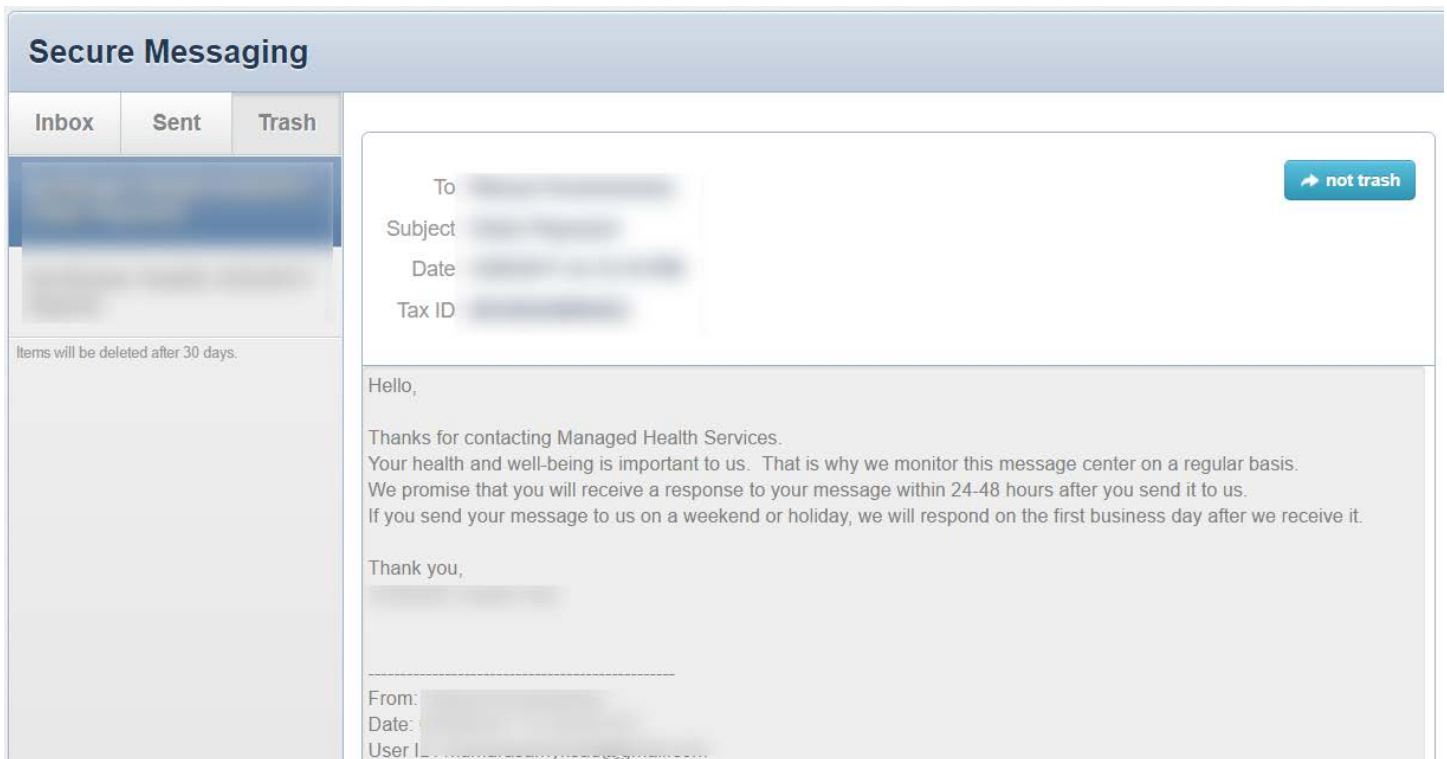
To view Sent messages

- Click Sent—your message will appear
- To send to Trash—click the Send to Trash button



To view message sent to Trash

- Click Trash—the messages sent to Trash appear
- **Note:** The message sent to Trash will be deleted after 30 days.
- If a message is not trash but is found under the Trash tab, you can reverse it by clicking the Not Trash button



Reports may be available based on the access that you have and the Health Plan requested reports. Click Reports on the top ribbon you may see reports:

Eligibility Authorizations Reports Messaging ¹⁷

Viewing For : EXCEADMIN440

- Case Management
- Network Management
- Pharmacy
- Provider Reporting
- Utilization Management

Date	Name	Type
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