

# Altura MSO Connect: Altura's secure referral portal

IPA USER GUIDE



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CONNECT is Altura MSO's secure, HIPAA compliant web portal for electronic transactions. You can use it to verify member eligibility, submit authorizations, check claims, and view capitation reports.

In order to use Altura MSO CONNECT, your computer must be set up properly. You will need:

- JavaScript and pop-ups enabled on your browser
- Internet Explorer 11 or higher, Firefox 46 or higher, or Chrome 50 or higher
- Adobe Reader v. 9 or higher

## To register as a new provider:

You must be a registered user in order to access Altura MSO CONNECT.

- 1. Click **Register** on the Home page and select **PROVIDER**.
- 2. Complete all of the required fields on the Registration Form.
- 3. Read and accept the HIPAA regulations and User Access Agreement at the bottom of the form.
- 4. Click the **Submit** button at the bottom of the form to complete the registration process.
- 5. On the next screen, click the button to print the form. Sign the form and FAX it to the number listed on the page. Altura's Web Portal team will contact you within 48 hours.

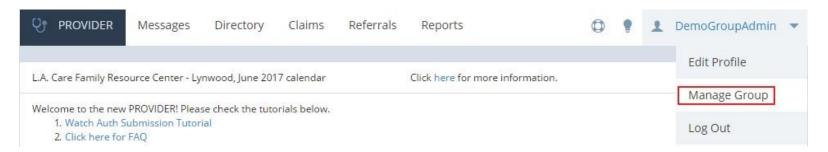
## To log into your PROVIDER account:

- 1. Go to https://connect.alturamso.com
- 2. On top page, click **Login** and select **PROVIDER**.
- 3. Enter your username and password.
- 4. Enter the CAPTCHA verification.
- 5. Click **Login**.

As a registered user, you can change personal information such as your email, password and other information associated with the account.

Creating a New User Account - as a Group Administrator:

1. Click on username on top right and select Manage Group.



- Click + ADD NEW USER
- 3. Enter User Profile First and last name, username, password, etc.
- 4. Select User Roles
  - **Eligibility** Allows a user to check member eligibility.
  - Authorization & Consult Submission Allows user to submit new authorizations or consults.
  - Authorization & Consult Search Allows user to search for authorizations or consults.
  - Claims Allows user to search for claims.
  - Capitation Reports Allows user to access capitation reports.
  - Admin Gives administrator privileges to a user.
- 5. Assign Provider
  - Click + to assign a provider.
  - Click \_\_AII+\_ to assign all providers.
  - Click 💌 to unassign provider from a user.
- 6. Click CREATE USER

#### Editing a User as an Administrator:

- 1. Click on username on top right and select **Manage Group**.
- 2. Under Group Users, select the user you want to edit.
- 3. Edit user profile, role, or assigned providers.
- 4. To inactivate a user, uncheck the Active checkbox.
- 5. Click **SAVE CHANGES**.

#### Editing a User as an Administrator:

- 1. Click on username on top right and select **Edit Profile**.
- 2. Edit user profile, role, or assigned providers.
- 3. Click **SAVE CHANGES**.

#### Editing a User as an Administrator:

- 1. Click on username on top right and select **Edit Profile**.
- 2. Edit user profile. Regular user cannot modify role or assigned providers.
- 3. Click **SAVE CHANGES**.

**NOTE**: A user's password or security answer and question cannot be edited by an admin. An administrator can initiate the reset password process for a user, however, by clicking Reset Password.

#### **Dashboard**

The Dashboard will be the first screen a user sees once they login. It will display the following types of messages:

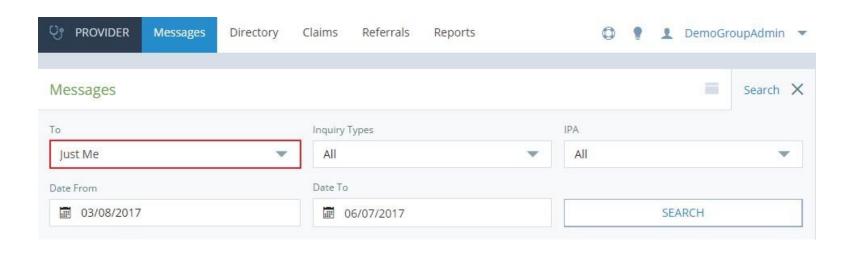
- Maintenance System outages due to maintenance or emergency fixes will always be displayed on top.
- Announcements will be displayed beneath maintenance messages.
- Action items Displays attestations, unfinished auths/consults, and unread inquiries.

#### Messages

Click Messages to view correspondence sent by you or any user in your group.

To search for a message:

- 1. Click the **Messages** tab on the top of the page
- 2. Click Search
- 3. Filter your search by inquiry type, IPA, and date. The inquiry types are Auth, Claim, Member, Provider, and General. Change from Just Me to My Group to display inquiries from other users in your group.



#### **Directory**

The directory will allow you to verify a member's eligibility, search for providers, search for ICD/CPTs, and view your most recent Member and Provider Not Found submitted inquiries.

To verify a member's eligibility:

- 1. Click the **Directory** tab on the top of the page.
- 2. Under Member Eligibility Search, search by the member's name, ID, or DOB.
- 3. Click **SEARCH** to display the results.
- 4. Click on the Action items on the right **→** to start a new authorization or ♠ ♠ to search for an authorization/claim.

To search for a provider:

- 1. Click the **Directory** tab on the top of the page.
- 2. Under Provider Lookup, search by the provider's name, ID, City, or Specialty.
- 3. Click **SEARCH** to display the results.

To lookup an ICD or CPT:

- 1. Click the **Directory** tab on the top of the page.
- 2. Under ICD/CPT Reference, select the ICD or CPT radio button.
- 3. Enter the code or description.
- 4. Click **SEARCH** to display the results.

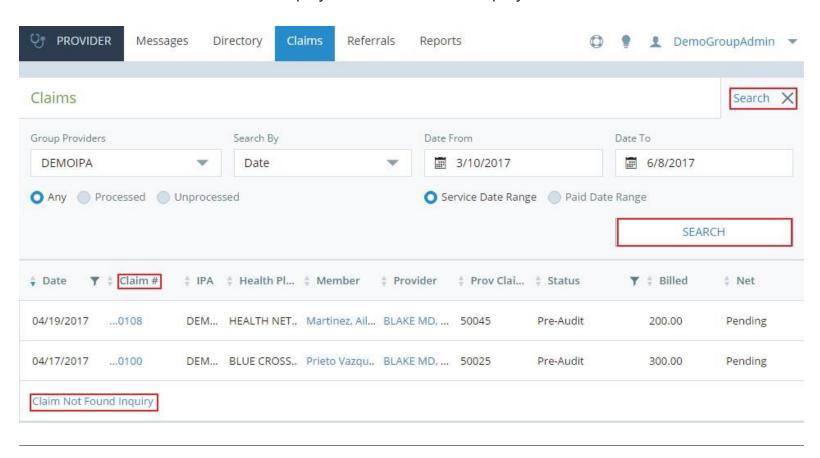
To view your Recently Submitted Provider or Member Not Found Inquiries:

- 1. Click the **Directory** tab on the top of the page.
- 2. Under Recently Submitted Inquiries, select the message you want to view.

#### **Claims**

To search for a claim:

- 1. Click **Claims** tab on the top of the page.
- 2. Click the **Search** on the right side of the page to start a search.
- 3. Enter your search parameters and click **SEARCH**.
- 4. Click on the claim number to display details or send an inquiry about the claim.



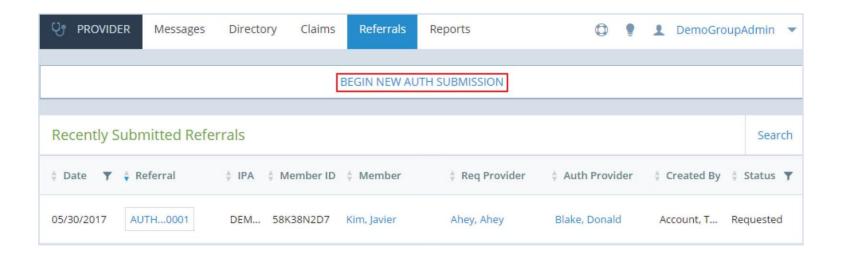
**NOTE:** Click Claim Not Found Inquiry to send an inquiry about a missing claim.

#### **Referrals**

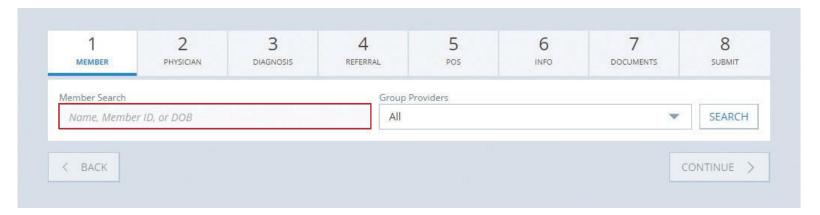
The Referrals tab on the AltaMed CONNECT dashboard enables you to manage data and information related to authorizations. You can submit new authorizations and search for existing authorizations.

To verify a member's eligibility:

- 1. Click the **Referrals** tab on the top of the page.
- 2. Click the **BEGIN NEW AUTH SUBMISSION** to begin the Authorization wizard.



- 1. Search for the member's information by entering Last Name or Full Name, Member ID, or DOB.
- 2. Click the **SEARCH** button. The system displays a list of members matching your search. If a red dot appears next to member, it indicates that the member is not currently enrolled.

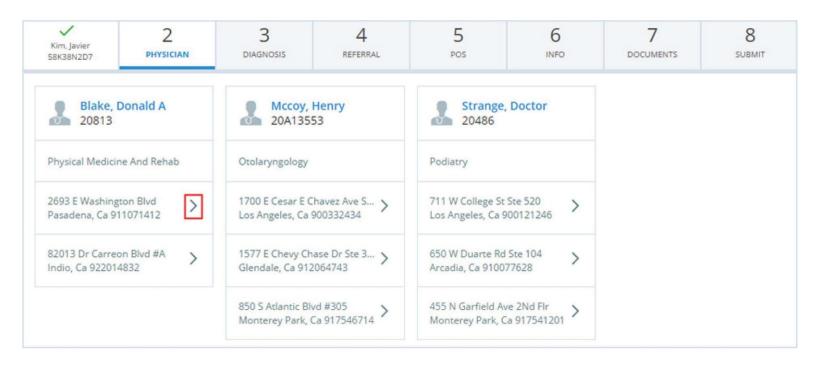


3. Click the arrow to select a member. The system will proceed to the next step.



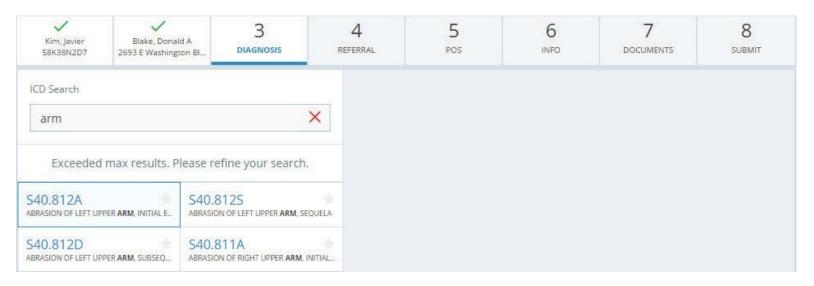
**NOTE**: If you are unable to locate a member, click the **Submit a member not found inquiry** hyperlink. Complete the form and an inquiry will be sent to the eligibility team to update the member status.

1. Select the referring physician from the list by clicking the green arrow beside their name.



**NOTE**: The wizard will usually skip this step and automatically choose the member's assigned Primary Care Physician (PCP). If the provider is not automatically selected, please follow the instructions and choose the appropriate provider.

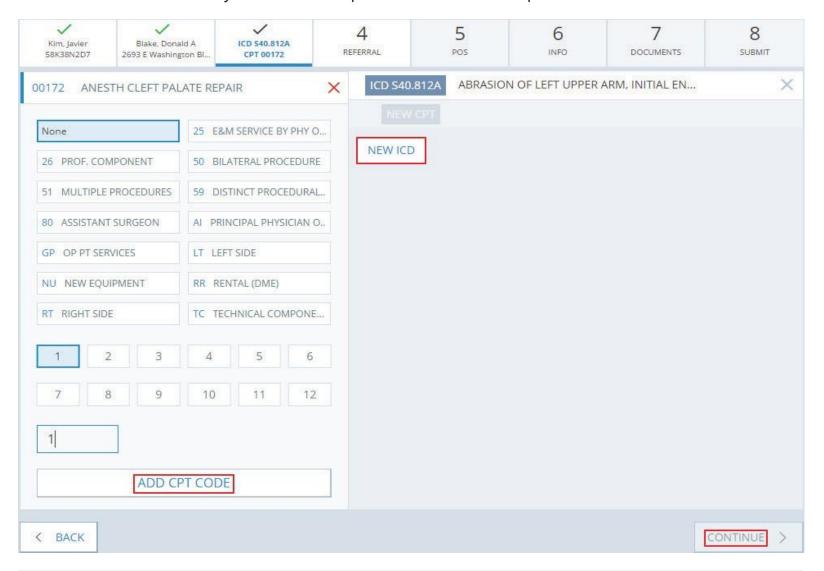
1. Search for an ICD by code or description, then select the appropriate code.



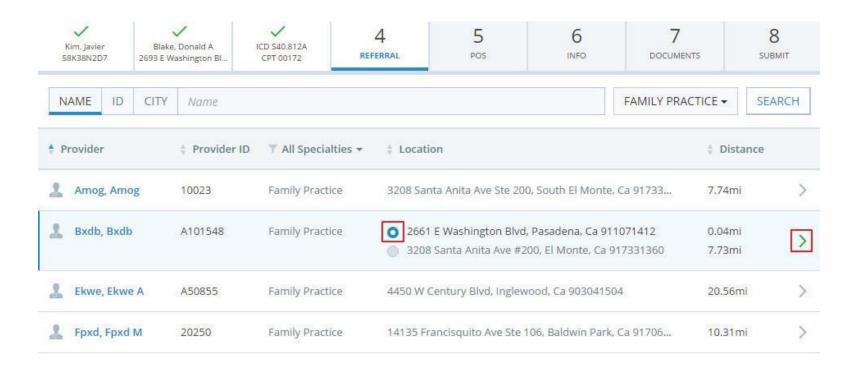
2. Search for the CPT by code or description.



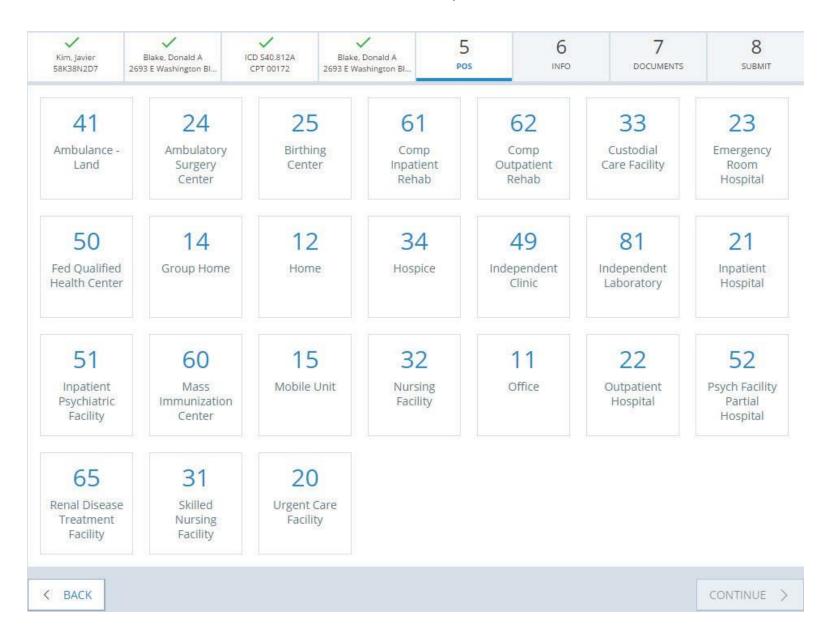
- 3. Select the modifier and quantity.
- 4. Click ADD CPT CODE.
- 5. Continue to add CPTs to your current ICD or add a new ICD by clicking **NEW ICD**.
- 6. Click **CONTINUE** once you are done to proceed to the next step.



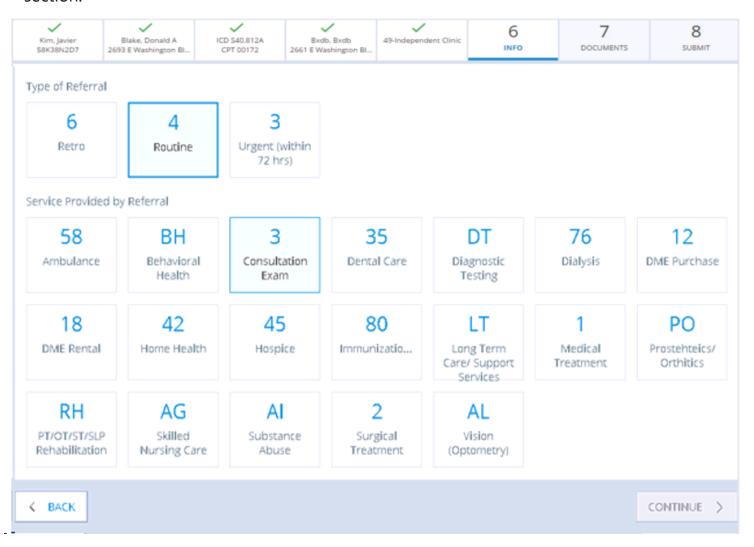
1. Select the provider/facility you are referring the patient to. You can search by name, Provider ID, city or specialty. If provider has more than one location select the circle in front of the address and then click the arrow to complete provider selection.



1. Select the Place Of Service or location where the requested service will be rendered.

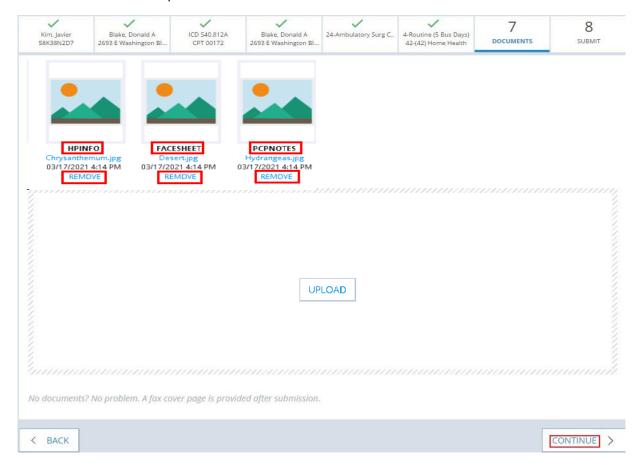


1. Select the type of referral and the type of services requested. Please include notes in the Notes section.



- 1. Ensure to upload additional documentation for your authorization request. This is crucial for the timely process of the authorization. This may be done by selecting UPLOAD, select document type and then locate necessary documents. Compatible document formats include doc, docx, pdf, jpg, gif, bmp and tiff.

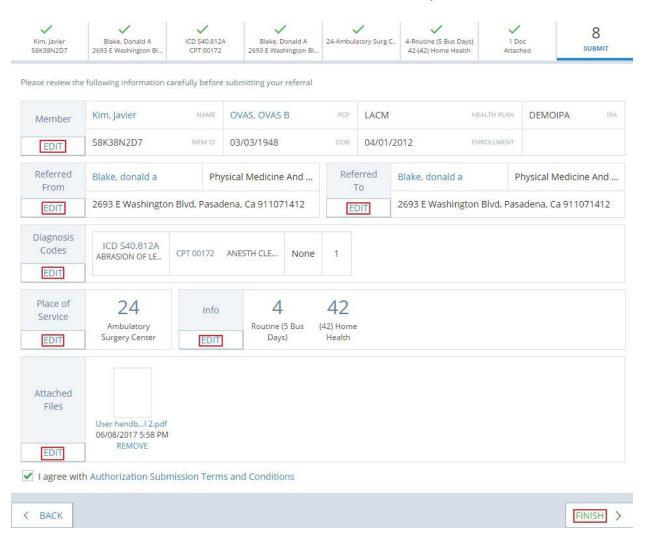
  Once document is uploaded, you will see **Doc type**, file name and option to **REMOVE** file if needed.
- 2. Documents may also be faxed to support your authorization request. A fax cover sheet will be provided after you submit the authorization.
- 3. Once all documents have been uploaded, click CONTINUE.



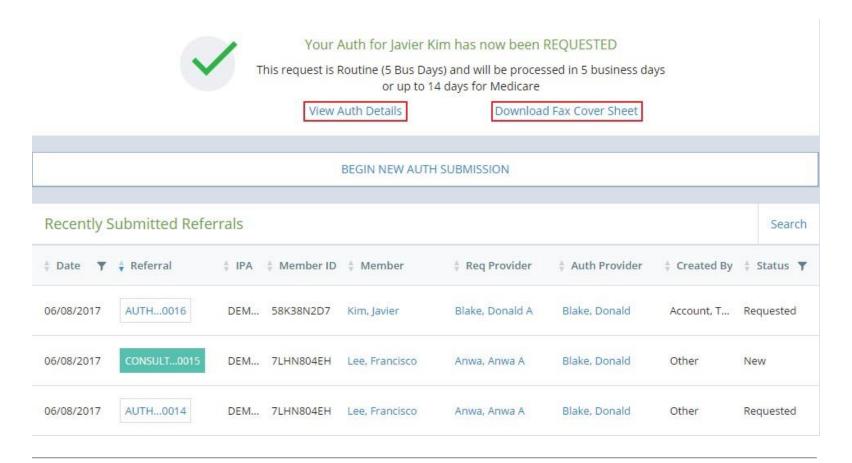
<u>NOTE</u>: If you choose to FAX the medical records, you must use the FAX cover page on the authorization details page by clicking the **Download Fax**Cover Sheet. This unique FAX cover page contains an important number linking the additional documents to the specific case. Do NOT substitute this unique cover page with another or your authorization may not be processed.

All information inputted in Steps 1-7 may be reviewed at this step.

- 1. Corrections may be made by clicking any of the **EDIT** buttons or the corresponding step on the navigation bar.
- 2. Once completed, click **CONTINUE** to return to Step 8.
- 3. When a review is completed, check the I agree with Authorization Submission Terms and Conditions box and click **FINISH** to submit the authorization request.



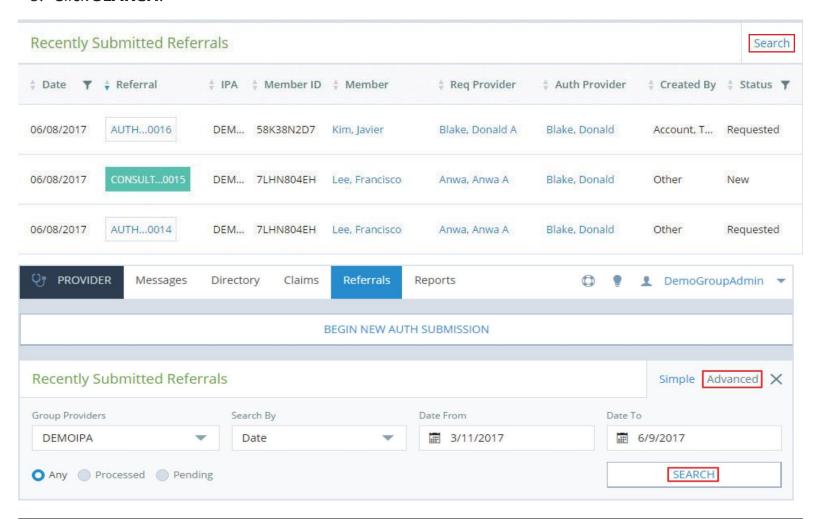
Upon submission, you will receive the following notification. Click **View Auth Details** to view the details of the authorization. Click **Download Fax Cover Sheet** to download a fax cover sheet if you choose to fax in medical records. You can also find a link to the fax cover sheet on the authorization details page. Your submitted authorization request will be displayed under Recently Submitted Referrals.



NOTE: Recently Submitted Referrals section displays the 20 most recent authorization requests sorted by date.

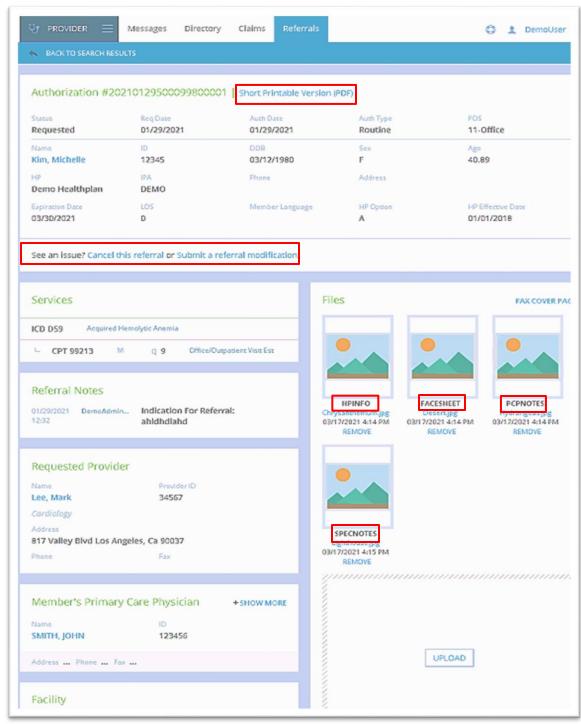
To search for an authorization:

- 1. Click the **Referrals** tab on the top of the page.
- 2. Enter your search parameters and select IPA/Region when applicable
- 3. Click **SEARCH**.



<u>NOTE</u>: Click **Auth Not Found Inquiry** at the bottom right to send an inquiry about a missing authorization. Repeat steps 1 and 2 and click **Advanced** to conduct an authorization search with additional parameters.

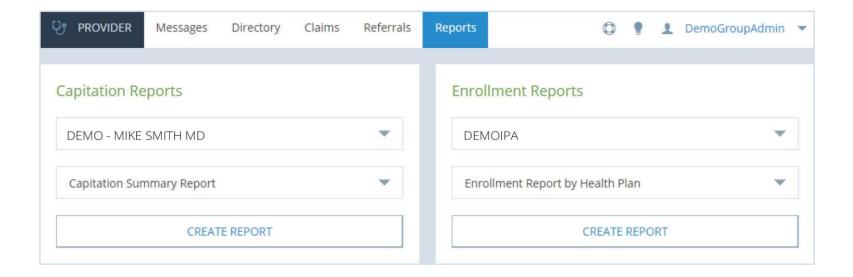
4. Click on the authorization number to display details or submit an inquiry about the authorization



- a) Click on **Short Printable Version** to print copy
- b) Options to cancel or submit referrals modifications are found in Auth Details screen.
- c) Uploaded documents can be found in Files section. **Document type** and file name are displayed.
- d) Upload additional documents if needed by clicking on **UPLOAD**
- e) **Submit inquiry** by entering Subject line, Message and click on SUBMIT. Manage all inquiries in Messages tab

To access your capitation and member enrollment reports:

- 1. Click on the **Reports** tab on the top of the page.
- 2. Select the IPA/provider you want the report to be run for.
- 3. Select the type of report.
- 4. Click **CREATE REPORT**.



- 1. Click to view Announcements, Contacts, Provider Resources, and Tutorials.
  - **ANNOUNCEMENTS** Click to view all announcements including items you've hidden on the dashboard.
  - **CONTACT US** Click to view phone numbers for various departments at AltaMed. You can also submit a general inquiry or an inquiry about a missing authorization, claim, member, or provider.
  - **PROVIDER RESOURCES** Click to view helpful guides and forms to help providers manage healthcare.
  - TUTORIALS Click to view tutorials on PROVIDER.