



**California  
Counties/ValueOptions®  
Presents:  
Electronic Authorization  
Letters & ProviderConnect  
Demo**

2010 Webinar Series



# Objectives

- Welcome and Introductions
- Overview of ValueOptions® Green<sup>SM</sup> Program
- Frequently Asked Questions
- Electronic Authorization Letters Overview
- ProviderConnect Registration and Demo



# Introductions

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# ValueOptions<sup>®</sup> Green<sup>SM</sup> Program Overview

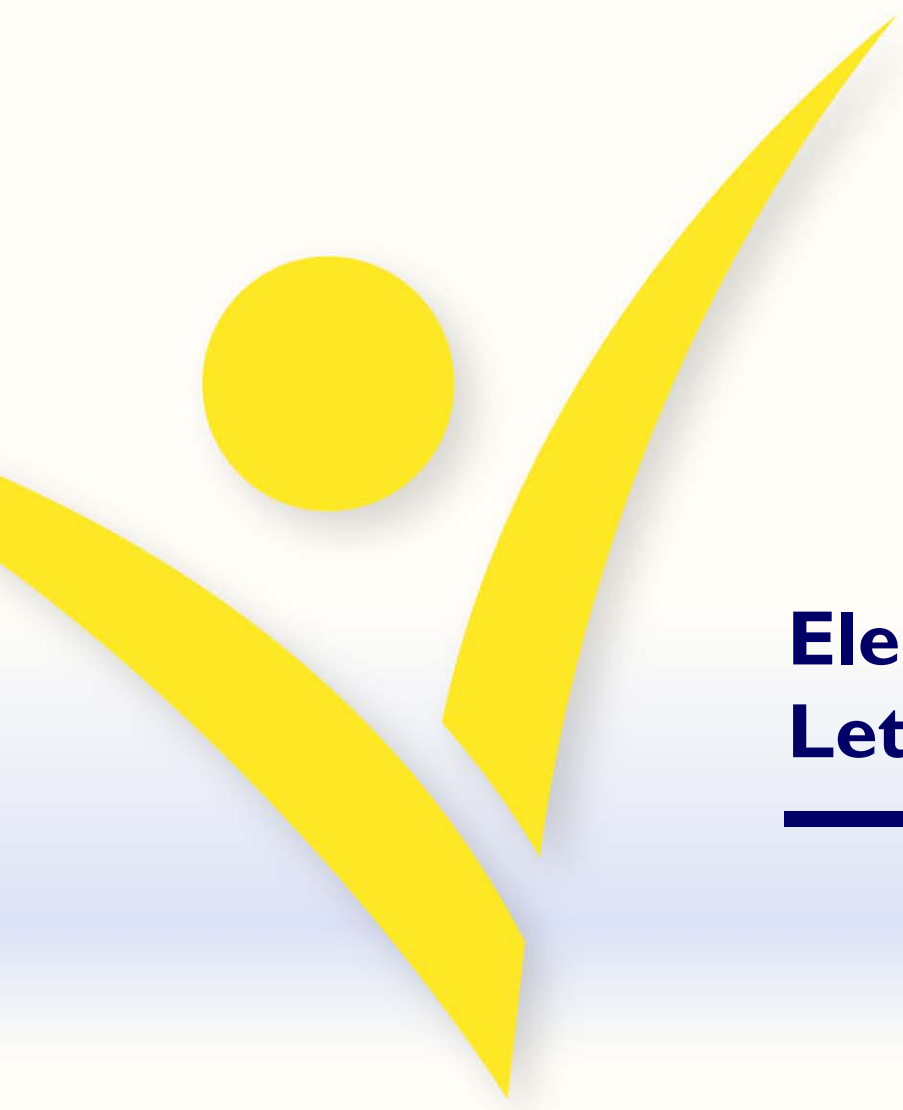
- ValueOptions<sup>®</sup> is making a long-term investment in the health and well-being of generations to follow
- Eliminating paper can save providers time and money
- We are training providers on Green<sup>SM</sup> business tools, including online authorization letter access



# ValueOptions® Green<sup>SM</sup> Program Overview

- Effective July 1, 2010, ValueOptions® will no longer be mailing authorization letters
- Our Webinars introduce providers to ValueOptions® self-service option, ProviderConnect
- We urge providers to sign up in order to access authorization letters electronically





# Electronic Authorization Letters Overview

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# Benefits of Electronic Authorization Letters

- Accessible 24/7
- Authorization letters will not get lost in the mail or in large organizations
- More convenient and easier administrative processes
- Less clutter and dependence on paper copies
- Faster service: receive authorization letter within 24-48 hours of approval instead of waiting 1 week or more

# Frequently Asked Questions

- Q1: If the letters are no longer mailed, how will I know whether or not I received any new authorization letters on ProviderConnect?
  - On the ProviderConnect home page, an icon will indicate when new authorization letters are available
- Q2: Will all of my review determination notifications also be electronic?
  - Only approval letters are electronic, while adverse determination letters and return of incomplete requests will continue to be sent through the mail

# Frequently Asked Questions, cont.

- Q3: What format will my authorization letter be in when retrieved on ProviderConnect?
  - In PDF format, making it easy to download or print
- Q4: I use a billing service. Will they be able to access my information through ProviderConnect?
  - ProviderConnect allows additional users, but you will need to give them permission to access your account
- Q5: I don't have a computer, can I still receive paper authorization letters?
  - Obtain a faxed copy of your authorization letters by dialing our automated faxback service: 1-866-409-5958
  - Authorization letters will no longer be mailed, and are only available online or via faxback





**Creating new choices for  
our providers to Go Green<sup>SM</sup>  
today and tomorrow**

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# ProviderConnect Overview

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# ProviderConnect (Provider Online Services)

- What is ProviderConnect?
- An online tool where providers can:
  - View authorizations
  - Submit claims and view status
  - Access Provider Summary Voucher
  - Submit customer service inquiries
  - Submit updates to provider demographic information
  - Access and print forms like electronic authorization letters
- Increased convenience, decreased administrative burden

***Disclaimer:*** Please note that ProviderConnect may look different and have different functionalities based on individual contract needs, therefore some functions may not be available or may look different for your specific contract.

# ProviderConnect Benefits

- What are the benefits of ProviderConnect?
  - Free and secure online application
  - Access routine information 24 hours a day, 7 days a week
  - Complete multiple transactions in single sitting
  - View and print information
  - Reduce calls for routine information

# How to Access ProviderConnect?

- Go to [www.ValueOptions.com](http://www.ValueOptions.com), choose “Providers”
- All in-network providers can obtain one online registration per provider ID number
- If additional log ons for ProviderConnect are desired, please contact the ValueOptions® EDI Helpdesk at 1-888-247-9311, press option 3 (Monday to Friday, 8:00 a.m. - 6:00 p.m. EST)
  - Additional log on turnaround time is 48 hours
  - If provider has both a commercial and network-specific contract with ValueOptions®, an ID is required for each individual contract



# Provider ID's

- Providers have various ID's related to ValueOptions®
  - Provider ID: Six-digit ValueOptions® assigned identifier
  - ProviderConnect ID: (also known as USER ID or Submitter ID)
    - This is the ID used to log-in to the ProviderConnect site
    - There may be multiple ProviderConnect IDs assigned to each provider ID, depending on how you choose to set up the accounts
    - ProviderConnect ID's may or may not be identical to your Provider ID
  - MediCal ID: assigned by State
  - NPI: 10 digit National Provider ID



# ProviderConnect Demo

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# ProviderConnect Login Screen

## Please Log In

Required fields are denoted by an asterisk ( \* ) adjacent to the label.

Please log in by entering your User ID and password below.

\*User ID

If you do not remember your User ID, please contact our e-Support Help Line.

\*Password

[Forgot Your Password?](#)

The information and resources provided through the ValueOptions site are provided for informational purposes only. Behavioral health providers utilizing the ValueOptions site ("Providers") are solely responsible for determining the appropriateness and manner of utilizing ValueOptions information and resources in providing services to their patients. No information or resource provided through the ValueOptions site is intended to substitute for the professional judgment of a behavioral health professional. Providers are solely responsible for determining whether use of a resource provided through ValueOptions is consistent with their scope of licensure under applicable laws and ethical standards.

***It is recommended that you use Internet Explorer when using ProviderConnect. Other internet browsers may not be compatible and may result in formatting or other visible differences.***

## New User?

Please register for access.

For assistance with any technical problems (such as connecting to or accessing the site) please call our e-Support Help Line at 888-247-9311 during business hours Monday through Friday 8AM - 6PM ET or you can email an Applications Support Specialist at [e-SupportServices@valueoptions.com](mailto:e-SupportServices@valueoptions.com)

# User Agreement

- Home
- EDI Homepage
- Specific Member Search
- Register Member
- Authorization Listing
- Enter an Authorization Listing
- Claim Listing and Submission
- My Online Profile
- View Practice Profile
- Provider Data Sheet
- Compliance
- Handbooks
- Forms
- Network Specific Information
- Education Center
- ValueSelect Designation
- Contact Us

## User Agreement

The health information contained herein is provided by ValueOptions solely for informational purposes. ValueOptions assumes no responsibility or liability for any circumstances arising out of the use, misuse, interpretation or application of any information supplied on this system. Please consult with ValueOptions if you have any questions or concerns about the accessed information.

**Please affirm that you are authorized to access, receive, and use the information provided by responding "Yes" or "No" now.**

**123456789**

**TUMNUS, PETER**

**14 BEAVER TRAIL**

**NARNIA, VA 12345**

For assistance with any technical problems (such as connecting to or accessing the site) please call our e-Support Help Line at 888-247-9311 during business hours Monday through Friday 8AM - 6PM ET or you can email an Applications Support Specialist at [e-SupportServices@valueoptions.com](mailto:e-SupportServices@valueoptions.com)

# Review an Authorization

- Home
- Specific Member Search
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- Authorization Listing
- Enter an Authorization Request
- View Saved Clinical Request Drafts
- Enter a Care Plan
- Enter a Special Program Application
- Claim Listing and Submission
- Enter a Referral
- 
- EDI Homepage
- 
- OnTrack Outcomes Reports
- 
- My Online Profile
- My Practice Information
- Provider Data Sheet
- Compliance
- Handbooks
- Forms
- 
- Network Specific Information
- Education Center
- 
- ValueSelect Designation
- 
- Contact Us

## Welcome

## Thank you for using ValueOptions ProviderConnect.

**YOUR MESSAGE CENTER** (1 **NEW** Message)



Recent Inquiries Responded to by ValueOptions

DATE RECEIVED	SUBJECT	MEMBER NAME	STATUS
▶ <a href="#">02-20-07</a>	<a href="#">VERIFY MEM ENROLL</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ <a href="#">02-09-07</a>	<a href="#">AUTHORIZATION STATUS</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ <a href="#">02-05-07</a>	<a href="#">CLAIMS STATUS</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ <a href="#">02-05-07</a>	<a href="#">CLAIMS STATUS</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ <a href="#">02-04-07</a>	<a href="#">VERIFY MEM ENROLL</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>

### WHAT DO YOU WANT TO DO TODAY?

- ▼ [Eligibility and Benefits](#)
  - [Find a Specific Member](#)
  - [Register a Member](#)
  - ▼ [Enter or Review Authorization Requests](#)
    - [Enter an Authorization Request](#)
    - [Enter a Care Plan](#)
    - [Enter a Special Programs Application](#)
    - [Review Authorizations](#)
    - [View Saved Clinical Request Drafts](#)
- ▼ [Enter or Review Claims](#)
  - [Enter a Claim](#)
  - [Review Claims](#)
  - [View My Recent Provider Summary Vouchers](#)
- ▼ [Enter or View Referrals](#)
  - [Enter a Referral](#)
  - [View Referrals](#)
- ▶ [View My Recent Authorization Letters](#)
- ▶ [Complete New Mexico Forms](#)

### CLINICAL SUPPORT TOOLS

- ▶ [View My Outcomes with On Track](#)

### YOUR NEWS & ALERTS

- ▶ [IMPORTANT! VERIFY YOUR CONTACT INFORMATION](#)
- ▶ [NEW TO DIRECT CLAIM SUBMISSION?](#)
- ▶ [AUTHORIZATION SUBMISSION GUIDE](#)

ValueOptions is continually striving to increase the ease in which you can interact with us by developing online communications solutions. Using ProviderConnect allows you to accomplish an array of daily transactions through a secure, password-protected portal. By using ProviderConnect, you agree to abide by all privacy, HIPAA, and other governing laws.

# Search Authorizations & Run Spreadsheet

ProviderConnect - Providers - Auth Search - Windows Internet Explorer

http://valueoptions.com/PMC\_prototype/ProviderConnect/pvd\_srch\_auths.html

ProviderConnect - Providers - Auth Search

ValueOptions Home Provider Home Contact Us Log Out

## PROVIDERCONNECT

VALUEOPTIONS

- Home
- EDI Homepage
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- Enter an Authorization Request
- Claim Listing and Submission
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- Performance Report
- Essential Learning
- Compliance
- Handbooks
- Forms
- Network Specific Information
- Education Center
- ValueSelect Designation
- Contact Us

### Search Authorizations

Required fields are denoted by an asterisk ( \* ) adjacent to the label.  
Please select a Provider ID below, to perform any one of the Authorization Search transactions below.

Provider ID

Vendor ID

Member ID

Authorization #  -  -  (No spaces or dashes)

Client Authorization #

Effective Date  (MMDDYYYY)

Expiration Date  (MMDDYYYY)

Activity Date span cannot exceed seven (7) days.  
Activity Date Range can only be entered without a value in the Effective or Expiration Date fields above (or vice-versa).

Activity Date From  (MMDDYYYY)

Activity Date To  (MMDDYYYY)

Delimiter Type  Comma ','  Pipe '|'

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# Authorization Search Results

- Home
- EDI Homepage
- Specific Member Search
- Register Member
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- Enter an Authorization
- Claim Listing and Submission
- My Online Profile
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- Network Specific Information
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- ValueSelect Designation
- Contact Us

## Authorization Search Results

The information displayed indicates the most current information we have on file. It may not reflect claims or other information that has not been received by ValueOptions.

Authorization		Member ID	Member Name	Member DOB	Provider ID	Alt. Provider ID
View Letter	Auth #					
	<a href="#">01-123101-00001-00001</a>	<a href="#">987654321</a>	ASLAN, SUSAN	12/02/1979	123456789	
	<a href="#">01-123101-00001-00002</a>	<a href="#">987654321</a>	ASLAN, SUSAN	12/02/1979	123456789	

# Authorization Summary

The screenshot displays the PROVIDERCONNECT VALUEOPTIONS website interface. The top navigation bar includes links for ValueOptions Home, Provider Home, Contact Us, and Log Out. A left sidebar lists various services such as Home, EDI Homepage, and Member Search. The main content area is titled 'Auth Summary' and contains a disclaimer, an 'Authorization Header' table, and several action buttons.

**PROVIDERCONNECT**  
VALUEOPTIONS

ValueOptions Home   Provider Home   Contact Us   Log Out

Home  
EDI Homepage  
Specific Member Search  
Register Member  
Authorization Listing  
Enter an Authorization Request  
Claim Listing and Submission  
Enter a Referral  
Referral Listing  
Reports  
My Online Profile  
My Practice Information  
Provider Data Sheet  
Performance Report  
Essential Learning  
Compliance  
Handbooks  
Forms  
Network Specific Information  
Education Center  
ValueSelect Designation  
Contact Us

**Auth Summary**   Auth Details   Associated Claims

The information displayed indicates the most current information we have on file. It may not reflect claims or other information that has not been received by ValueOptions.

**Authorization Header**   [Return to search results](#)

Member ID	<a href="#">987654321</a>
Member Name	<b>ASLAN, SUSAN</b>
Authorization #	<b>01-123101-1-1</b>
Client Auth # <sup>?</sup>	<b>N/A</b>
Authorization Status	<b>O - Open</b>
From Provider	<b>TUMNUS, PETER</b>
Admit Date	<b>03/18/2009</b>
Discharge Date	<b>05/12/2009</b>

[Send Inquiry](#)   [Complete Discharge Review](#)  
Member Discharged on 05/12/2009

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# Authorization Details

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- [Enter a Special Program Application](#)
- [EDI Homepage](#)
- [Enter a Referral](#)
- [Referral Listing](#)
- [On Track Outcomes](#)
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- [NEW Performance Report](#)
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- [Compliance](#)
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- [Forms](#)
- [Network Specific Information](#)
- [Education Center](#)
- [ValueSelect Designation](#)
- [Contact Us](#)

[Auth Summary](#)

**[Auth Details](#)**

[Associated Claims](#)

The information displayed indicates the most current information we have on file. It may not reflect claims or other information that has not been received by ValueOptions.

### Authorization Header


Member ID [987654321](#)

Member Name **SUSAN ASLAN**

Authorization # **01-120109-1-10**

Client Auth # [?](#) **N/A**

Authorization Status **O - Open**

Authorization Letter(s)  [\(click to view\)](#)

[Return to search results](#)

[Complete Discharge Review](#)

### Service Lines

Line #	Submission Date	Service Code	Modifier Code	Service Class Descrp.	Dates of Service	Visits Requested/ Approved	Visits Actually Used (As of Today)	Status	Reason
1	12/01/2009	N/A		N/A	12/01/2009-12/31/2009	0/0	0	O - Open	N/A

# Authorization File Download

- Home
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- Claim Listing and Submission
- Enter a Care Plan
- Enter a Referral
- Referral Listing
- EDI Homepage
- On Track Outcomes
- Reports
- My Online Profile
- My Practice Information
- Provider Data Sheet
- NEW** Performance Report
- Essential Learning
- Compliance
- Handbooks
- Forms
- Network Specific Information
- Education Center
- ValueSelect Designation
- Contact Us

## Search Authorizations

Required fields are denoted by an asterisk ( \* ) adjacent to the label.  
Please select a Provider ID below, to perform any one of the Authorization Search transactions below.

Provider ID

Vendor ID

Member ID

Authorization #  -  -  *(No spaces or dashes)*

Client Authorization #

Effective Date   (MMDDYYYY)

Expiration Date   (MMDDYYYY)

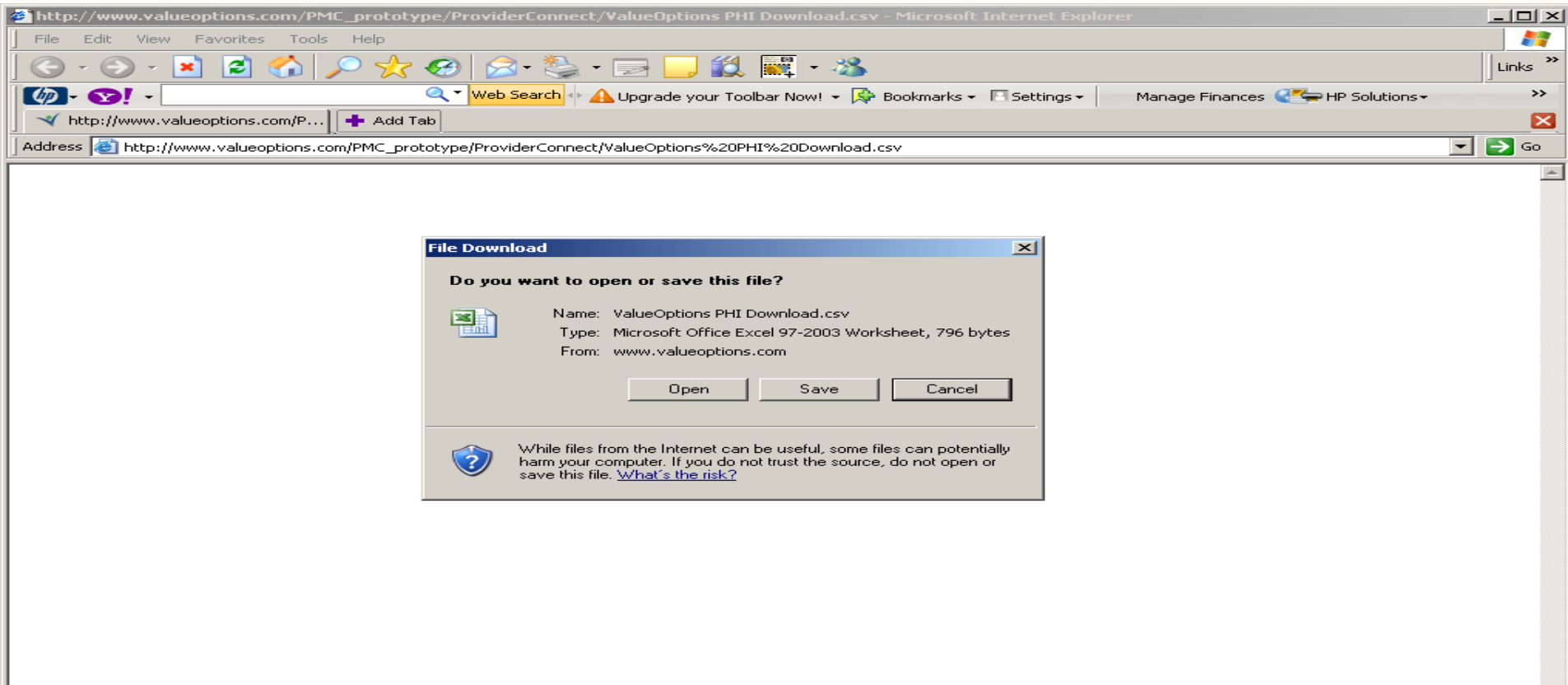
Activity Date span cannot exceed seven (7) days.  
Activity Date Range can only be entered without a value in the Effective or Expiration Date fields above (or vice-versa).

Activity Date From   (MMDDYYYY)

Activity Date To   (MMDDYYYY)

Delimiter Type  Comma ','  Pipe '|'

# Authorization File Download



# Authorization File Download

ValueOptions%20PHI%20Download[1].csv - Microsoft Excel

Home Insert Page Layout Formulas Data Review View Acrobat

Normal Page Layout Custom Views Full Screen Workbook Views

Ruler Formula Bar Gridlines Headings Message Bar Show/Hide

Zoom 100% Zoom to Selection

New Window Split Arrange All Hide Freeze Panes Unhide Save Workspace Switch Windows

Macros

K1 Consumer ID

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
1	Notificati	APS ID	Auth Type	Submitted	Request A	Notificati	Provider I	Consumer	Consumer	Consumer	Consumer	Svc Code	Add Code	Auth Start	Auth End
2	1.23E+08		OUTPATIE	#####	1.23E+08	PETER TUM	1.23E+08	SUSAN	ASLAN	9.88E+08	9.88E+08			#####	#####
3	1.23E+08		OUTPATIE	#####	1.23E+08	PETER TUM	1.23E+08	SUSAN	ASLAN	9.88E+08	9.88E+08			#####	#####
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24															
25															
26															
27															

ValueOptions%20PHI%20Download(1) Average: 987654321 Count: 3 Sum: 1975308642 100%



# My Practice Information

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- ValueSelect Designation
- Contact Us

**Welcome**

**Thank you for using ValueOptions ProviderConnect.**

**YOUR MESSAGE CENTER** (1 **NEW** Message)



Recent Inquiries Responded to by ValueOptions

DATE RECEIVED	SUBJECT	MEMBER NAME	STATUS
▶ 02-20-07	<a href="#">VERIFY MEM ENROLL</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ 02-09-07	<a href="#">AUTHORIZATION STATUS</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ 02-05-07	<a href="#">CLAIMS STATUS</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ 02-05-07	<a href="#">CLAIMS STATUS</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ 02-04-07	<a href="#">VERIFY MEM ENROLL</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>

**WHAT DO YOU WANT TO DO TODAY?**

- ▶ [Eligibility and Benefits](#)
    - [Find a Specific Member](#)
    - [Register a Member](#)
  - ▶ [Enter or Review Authorization Requests](#)
    - [Enter an Authorization Request](#)
    - [Enter a Care Plan](#)
    - [Enter a Special Programs Application](#)
    - [Review Authorizations](#)
    - [View Saved Clinical Request Drafts](#)
- ▶ [Enter or Review Claims](#)
    - [Enter a Claim](#)
    - [Review Claims](#)
    - [View My Recent Provider Summary Vouchers](#)
  - ▶ [Enter or View Referrals](#)
    - [Enter a Referral](#)
    - [View Referrals](#)
  - ▶ [View My Recent Authorization Letters](#)
  - ▶ [Complete New Mexico Forms](#)

**CLINICAL SUPPORT TOOLS**

- ▶ [View My Outcomes with On Track](#)

**YOUR NEWS & ALERTS**

- ▶ [IMPORTANT! VERIFY YOUR CONTACT INFORMATION](#)
- ▶ [NEW TO DIRECT CLAIM SUBMISSION?](#)
- ▶ [AUTHORIZATION SUBMISSION GUIDE](#)

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# View Provider Practice Information

- Home
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- Contact Us

## View Provider Contact Info

*Last Name	First Name	State
<input type="text" value="Tumnus"/>	<input type="text" value="Peter"/>	<input type="text" value="VA - VIRGINIA"/>

# Provider Search Results

- Home
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- Contact Us

## Provider Search Results

Click on Last Name for more details.

Last Name	First Name	Provider ID	Vendor ID	Provider Description	Address/ Phone
<a href="#">TUMNUS</a>	PETER	123456789	00003	Counselor, Masters Level	14 BEAVER TRAIL NARNIA VA 12345 <b>(111) 111-1111 X 12345678</b>

# Provider Practice Details

- Home
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## Provider Details

Last Name	First Name
<b>TUMNUS</b>	<b>PETER</b>
Address	Phone
<b>14 BEAVER TRAIL, NARNIA, VA 12345</b>	<b>(111) 111-1111 X 12345678</b>
Specialities	Languages
<b>BRIEF THERAPY COGNITIVE THERAPY FAMILY THERAPY PLAY THERAPY SOLUTION FOCUSED THERAPY AFFECTIVE DISORDER AFFECTIVE DISORDERS ANXIETY DISORDERS PANIC/PHOBIA SEXUAL ABUSE WOMEN'S ISSUES WOMENS ISSUES</b>	
Ages	Gender
<b>Adolescent (13 - 17) Adult (16 - 64) Children (6 - 12) Geriatric (65+)</b>	<b>F</b>
Licensure	
<b>LCPC</b>	

[Send Inquiry](#)

# Updating Provider Practice Information

- Home
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- Register Member
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## Provider Networks Inquiry

Required fields are denoted by an asterisk ( \* ) adjacent to the label.

Provider information has been captured for this inquiry. Please provide information that you are requesting to be changed, prior to submitting the inquiry.

**Please note, inquiries are responded to within 5 business days. The response from ValueOptions will appear in your Inbox in ProviderConnect.**

## Provider

Provider ID **123456789**  
First Name **PETER**  
Last Name **TUMNUS**

## Contact Details

Provider ID **682435719**  
Provider Name **John Doe**  
Contact Name (if other than provider)

\*State your reason for the inquiry.

Maximum characters: 1500  
You have  characters left.

[Attach a Document](#)

*Click here to attach a document*

# Inquiry Tracking Number

- Home
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- ValueSelect Designation
- Contact Us

## Customer Service Inquiry

**Thank you for your inquiry.** Your request is important to us and will be investigated by a customer service professional. Once our investigation is complete, you will receive a response in your Message Center Inbox within 5 business days.

Your Inquiry Number is: **3072007-2064467-20000**

Your Email Notification setting is **'OFF'**. Click [here](#) to update.

# My Online Registration Profile

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## Modify Profile

Required fields are denoted by an asterisk ( \* ) adjacent to the label.

This page contains your information. To protect your privacy, do not walk away from your computer while this information is being displayed. We recommend you close your web browser when you are finished with this session, because your personal information will remain in your web browser's memory until you close the browser.

Provider ID	<input type="text" value="123456789"/>	
Provider Name	<input type="text" value="PETER"/>	<input type="text" value="TUMNUS"/>
Tax ID	<input type="text"/>	

The following form is pre-filled with your Profile information. You can modify any of this information by simply entering new information and pressing the Update Profile button. When you press this button, this page will be redisplayed showing the changes you have made.

## Editable Profile Details

*E-Mail Address	<input type="text" value="myemail@valueoptions.com"/>
*Verify E-Mail Address	<input type="text" value="myemail@valueoptions.com"/>
Secondary E-Mail Address	<input type="text"/>
*Phone No (1)	<input type="text" value="7031234567"/> Ext <input type="text" value="12345678"/>
Fax Number	<input type="text"/>
Password	<input type="password" value="••••••••"/>
Confirm New Password	<input type="password"/>
*Password-reminder Hint	<input type="text" value="Password Hint"/>
*Password-reminder answer	<input type="text" value="Password Reminder"/>

**Would you like to request additional services?** Following are the services available with indication of the services you are currently registered for. To request additional items, check the appropriate box.

- Claims Inquiry
- Claims Submission
- Email Notification

**Click to receive Email Notifications from ValueOptions**

# Updating My Online Profile

Your profile has been successfully updated!

- Home
- EDI Homepage
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- Register Member
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- Claim Listing and Submission
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- Compliance
- Handbooks
- Forms
- Network Specific Information
- Education Center
- ValueSelect Designation
- Contact Us

## Modify Profile

Required fields are denoted by an asterisk ( \* ) adjacent to the label.

This page contains your information. To protect your privacy, do not walk away from your computer while this information is being displayed. We recommend you close your web browser when you are finished with this session, because your personal information will remain in your web browser's memory until you close the browser.

Provider ID	<input type="text" value="123456789"/>	
Provider Name	<input type="text" value="PETER"/>	<input type="text" value="TUMNUS"/>
Tax ID	<input type="text"/>	

The following form is pre-filled with your Profile information. You can modify any of this information by simply entering new information and pressing the Update Profile button. When you press this button, this page will be redisplayed showing the changes you have made.

## Editable Profile Details

*E-Mail Address	<input type="text" value="myemail@valueoptions.com"/>
*Verify E-Mail Address	<input type="text" value="myemail@valueoptions.com"/>
Secondary E-Mail Address	<input type="text"/>
*Phone No (1)	<input type="text" value="7031234567"/> Ext <input type="text" value="12345678"/>
Fax Number	<input type="text"/>
Password	<input type="password" value="••••••••"/>



# ProviderConnect Message Center (Personalized!)

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- Enter an Authorization Request
- View Saved Clinical Request Drafts
- Enter a Care Plan
- Enter a Special Program Application
- Claim Listing and Submission
- Enter a Referral
- EDI Homepage
- OnTrack Outcomes Reports
- My Online Profile
- My Practice Information
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Welcome

Thank you for using ValueOptions ProviderConnect.

**YOUR MESSAGE CENTER** (1 NEW Message)



Recent Inquiries Responded to by ValueOptions

DATE RECEIVED	SUBJECT	MEMBER NAME	STATUS
▶ <a href="#">02-20-07</a>	<a href="#">VERIFY MEM ENROLL</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ <a href="#">02-09-07</a>	<a href="#">AUTHORIZATION STATUS</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ <a href="#">02-05-07</a>	<a href="#">CLAIMS STATUS</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ <a href="#">02-05-07</a>	<a href="#">CLAIMS STATUS</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>
▶ <a href="#">02-04-07</a>	<a href="#">VERIFY MEM ENROLL</a>	<a href="#">SUSAN ASLAN</a>	<a href="#">COMPLETED</a>

WHAT DO YOU WANT TO DO TODAY?

- ▶ [Eligibility and Benefits](#)
    - [Find a Specific Member](#)
    - [Register a Member](#)
  - ▶ [Enter or Review Authorization Requests](#)
    - [Enter an Authorization Request](#)
    - [Enter a Care Plan](#)
    - [Enter a Special Programs Application](#)
    - [Review Authorizations](#)
    - [View Saved Clinical Request Drafts](#)
- ▶ [Enter or Review Claims](#)
    - [Enter a Claim](#)
    - [Review Claims](#)
    - [View My Recent Provider Summary Vouchers](#)
  - ▶ [Enter or View Referrals](#)
    - [Enter a Referral](#)
    - [View Referrals](#)
  - ▶ [View My Recent Authorization Letters](#)
  - ▶ [Complete New Mexico Forms](#)

CLINICAL SUPPORT TOOLS

- ▶ [View My Outcomes with On Track](#)

YOUR NEWS & ALERTS

- ▶ [IMPORTANT! VERIFY YOUR CONTACT INFORMATION](#)
- ▶ [NEW TO DIRECT CLAIM SUBMISSION?](#)
- ▶ [AUTHORIZATION SUBMISSION GUIDE](#)

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# Inquiry Details

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## Message Center - Inquiry Details

Your Inquiry Details

<b>Date Received:</b>	02-09-07	<b>From:</b>	CUSTOMER SERVICE
<b>Inquiry #:</b>	092007-2063195-30000	<b>Subject:</b>	AUTHORIZATION STATUS
<b>Member Name:</b>	LAURA VAUGHN		

### Inquiry Message:

PETER TUMNUS - 02072007 - 15:59:42 ET-----  
Member Name: LAURA VAUGHN  
Provider ID: 123456789  
Auth #: 01-041301-9-4224  
Please Verify this authorization information.  
Thanks

CUSTOMER SERVICE - 02092007 - 16:07:33 ET-----  
Member Name: LAURA VAUGHN  
Provider ID: 123456789  
Auth #: 01-041301-9-4224  
This is the correct Authorization number.

Click 'Yes' to Reply to the Customer Service response, or 'No' to create a new Inquiry

Yes  No

# View Provider Summary Voucher

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- Compliance
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## Search Provider Summary Voucher

Provider ID

Check #  *(No spaces or alpha characters)*

Paid Date Range From  Through  *(MMDDYYYY)*

## Provider Summary Voucher Search Results

Click on View to see the Provider Summary Voucher.

Select	Vender Name	Vender Number	Paid Date	Check Number	Check Amount
--------	-------------	---------------	-----------	--------------	--------------

# Provider Summary Voucher Results

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## Search Provider Summary Voucher

Provider ID

Check #  (No spaces or alpha characters)

Paid Date Range From  Through  (MMDDYYYY)

## Provider Summary Voucher Search Results

Click on View to see the Provider Summary Voucher.

Select	Vender Name	Vender Number	Paid Date	Check Number	Check Amount
<a href="#">View</a>	PETER TUMNUS	A00003	01/23/09	0000011111	120.00

# Sample Provider Summary Voucher

Document Viewer - Windows Internet Explorer provided by Payformance Corporation

File Edit View Favorites Tools Help

Address  Go Links

View Printable View

Go To: 1 of 2 Find:

GOOD HEALTHCARE, INC  
EXPLANATION OF PAYMENT

**Run Date:** 12/28/05

**Alphabet Hospital** **ID#:** H71234 **IRS#:** 123456789  
 123 Road Street  
 Anytown, NJ 12345

**Patient Name:** FROG KERMIT **ABC Member ID:** 1234567891 **Acct:** 1AB12345A1B **Auth#:**  
**Claim Number:** XXXXXXXXXX/ **Servicing Provider:** **DRG#:**  
**State Member ID:** **TOB:**

Serv	Dates	LC	Diag #	Rev	Proc/Mod	Day/Cnt	Charge	Allowed	Disallowed	Co-Pay	TPP	Payment	Explain Codes
					RT			\$140.31			\$0.00	\$140.31	
					RT						\$0.00	\$51.52	
<b>Service Line(s) Sub-Total(s):</b>								\$140.31			\$0.00	\$191.83	
<b>Service Line(s) Sub-Total-Interest:</b>											\$0.00		
<b>Service Line(s) Sub-Total-Prompt Pay Discount:</b>													
<b>Claim Sub-Total:</b>													

Sample

Done Internet



# **ProviderConnect Authorization Enhancement Demo**

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# ProviderConnect Enhancements

- New Authorization letter notification link:

Welcome

Thank you for using ValueOptions ProviderConnect.

YOUR MESSAGES (1 message)



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Authorization Letter Notification link.

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# Authorization Letter Sample



PO Box 12438  
RTP, NC 27709-2438



12/6/2004

Auth Letter 1 Sample

[REDACTED]  
7149 JALDWE RD  
[REDACTED], VA 23225

Employee/Enrollee: [REDACTED]  
Employee ID#: Not Available  
Patient: [REDACTED]  
Patient Date of Birth: [REDACTED]

Dear MR. [REDACTED]

ValueOptions has been selected by The Local Choice Health Benefits Program to review the proposed treatment referenced above for behavioral health and/or substance abuse to determine if it is medically necessary, which is a requirement for coverage under the Plan. Based upon all of the information received by ValueOptions, a determination has been made that the following proposed treatment is certified:

- o 1 UNIT(S) INITIAL EVALUATION FROM 12/6/2004 TO 12/6/2005

This certification is valid for this level of care only. ValueOptions retains the right to rescind or modify this certification if the clinical condition changes during the certification period and a determination is made that another level of care is medically necessary and appropriate. In the event of such a reduction or termination of the certification period, you will receive a notification regarding your right to appeal that reduction or termination.

# Contacts

- Who do I Contact?
  - If you do not have a computer you can access the authorization letter faxback feature at: **(866) 409-5958**
  - ProviderConnect additional logons: EDI help Desk **(888) 247-9311**
  - All other providers can call our provider line with questions at: **(800) 397-1630**
- **Please Bear With Us During ProviderConnect Maintenance**
  - During ProviderConnect maintenance in the month of July you may not initially find all of your authorization letters when using ProviderConnect
  - If you are unable to view a specific letter after July 1, 2010 you can:
    - Retrieve your letter via the fax back option, or
    - Call the toll-free number on the back of the member's insurance card
  - All maintenance will be completed by July 29, 2010.





**Thank You!**

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