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MedPOINT strives for Member and Provider satisfaction.  
Email: mpmweb@medpointmanagement.com  
Phone: (818) 702-0100 ext. 299
Chapter 1 Web Portal Summary

MedPOINT Management’s Provider Web Portal is a secure centralized location which allows Providers to accomplish a number of tasks 24 hours a day, including:

✓ Check Eligibility status
✓ Submit and check the status of your claim
✓ Submit and check the status of Authorization requests
✓ Upload attached documents for submitted Claims or Auths
✓ Access to Eligibility Reports
✓ Ability to inquire and communicate directly with Managed Care staff regarding Claims or Auths
✓ Ability to see Alerts provided by the Managed Care Organization

The web portal has several great features to ease your daily task by eliminating paper work and telephone calls to your Managed Care Organization.

A.) Getting Started – Accessing the Web Portal
The Provider web portal is located directly on the MedPOINT Management website in the following location, click the Provider Portal Login button:
If you do not have a user account, request a login account by clicking the Online Form button:

You will be directed to this page to select the appropriate IPA; MedPOINT Management or Accountable IPA:
After selecting the appropriate IPA, you will be taken to this page. Click on the “Don’t have an account? Sign up here” URL.

If you were previously given a username and password and are currently encountering problems logging on, please send an e-mail to mpmweb@medpointmanagement.com with your contact information and a representative will contact you to resolve your issues.

The next page will direct you to the Provider Portal User Request Form. Fill out the form to request access to the web portal. You must request access to at least 1 Provider record.
B.) System Login
Once you have obtained a web portal login account, you can login to the web portal in this location:

If you forgot your login username and password, please send an email to mpmweb@medpointmanagement.com or call (818) 702-0100 ext. 299 to speak to someone who can assist you.

Please note: In an effort to enhance user security, MedPOINT is requiring all users to change their passwords every 90 days. Passwords must be a minimum of 8 characters in length and must include at least two numbers.
Chapter 2 Navigating the Web Portal

After successful login to the web portal, you will see the following webpage. When initially logging in, the system will take you to the web portal landing page. MPM news, alerts and responses to inquiries will be displayed on this landing page. More info regarding the inquiries and response can be found in the Auth section of this user guide.

The description of each section is explained below:

A) Main Menu
This area is where you can access the following main features within the web portal:

1. Providers – ability to search Providers or Specialists within your network
2. Auth Request – submit Authorization requests
3. Auth Search – perform an Authorization search for your previously submitted Auths
4. My Auth – displays three types of Auth requests for your Members; Hospital Admin, eConsults, and PharmQuest Referrals
5. Claim Request – submit Claim requests
6. Claim Search – ability to search previously submitted Claims and view its status
7. Upload Claim File – you can upload an image of the claim file in .pdf or .tif format
8. Eligibility – ability to view the status of your Members
9. My Members – access to two different reports regarding your Members; Members approaching 65yrs old and My Hospitalized Members
10. Reference – ability to search Procedure, Diagnosis, Place of Service and CPT modifier codes available in the system
11. Forms & Manuals – this is the location where documents are shared by MPM. Please check here for pertinent documents.
12. My Documents – you can view a variety of reports in this location, such as, Capitation Reports, Claim EOB and Eligibility Reports.

B) Alerts and Inquiries
Alerts are displayed on the user's web portal landing page. You can expand to view the list of alerts you have. Click on the expand checkbox. Click on 'Mark as Read' if you have read the alert and do not wish to see it on the landing page.

C) IPA Company Selection
IPA Selection – this section will list the available IPA groups that you have access to. The system will prompt you to first select an appropriate IPA before performing any other functions.

D) Messages
Messages Regarding Claims or Auths – this section will display alert messages regarding your existing Auth or Claims.

E) User Guide
User Guide – click on this link to access and view the Web Portal User Guide
Chapter 3 Providers

The Providers section allows you to search for existing Providers or Specialists in your network.

Click on the Providers link on the Main Menu.

A) Provider Search
When performing any search in the web portal, always enter the first four characters for the first and last name, this will narrow down the data returned by the search.

When the system finds the records, it will be displayed in the search grid, click on the appropriate record you would like to view.
After selecting the Provider record, you can view the Provider details page. From this page, you can request an Authorization by clicking on the ‘Request Authorization’ hyperlink – this link will take you to the Auth Request page.

B) Specialist Primary and Secondary Specialties Viewable in Web Portal
You have the ability to view the Specialist’s primary and secondary specialties. Pull up a Specialty Provider record. When searching for the record, you have the ability to narrow the search by specialty.
Chapter 4 Authorizations

Providers have the ability to submit and search for previously submitted Authorizations in the web portal.

Click on the Auth Request link in the main menu to access the Auth Request page.

The Referral Request page will open, fill out all fields as necessary and click ‘Review’ button to review the Referral request.
- Request Type – Routine = Within 5 Working Days  
  Direct = Prior Auth is not needed  
  Urgent = Handled within 72 hours or less

- Request Option (Physician Requested, Patient Requested)

- Member – Search for and Attach a Member to this Auth request

- I Can’t Find The Member - Allows you to manually submit the member’s info when the member cannot be found:  
  *Click on “I Can’t Find The Member” - Fill in all fields  
  Note: Members and Providers can be searched by Member ID, First, Last Name, or Date of Birth.

- PCP/ Requesting Provider – select a PCP record from the drop-down list

- Place of Service – select POS from the drop down-list  
  *Place of Service is where the Service is to be performed

- Requested Provider Office Service Location  
  Note: If you have an ICD9 code and don’t know the ICD10 version, you can use the ICD9 to ICD10 converter.

- Diagnosis Code (up to 8 diagnosis)(Application supports ICD-10)

- Procedure Code (Up to 20 CPT codes)

- Referral Notes – enter notes that you would like to submit with this Auth request.  
  The notes will be posted in MPM’s database.

- Request goes into “My Auths”. Click “My Auth” to see your list  
  Note: Authorizations can take up to 15 minutes to post into MPM’s database. Once posted, an Auth # will be assigned in your “My Auth” screen
A.) Auth Request – 5 Clinical Questions
Certain consultation CPT codes require additional information. These codes are the following (99201-99205 or 99243-99245) will prompt you to answer 5 clinical questions.

You must answer these question in detail. This information is helpful for the Requested Provider when the Member comes to the office.

Your answers will print on the Authorization letter that is faxed to the Requested Provider.

B.) Authorization Search
You can search for Authorizations by the following fields:

- Authorization #
- Member Last Name
- Member First Name
- Status
- Member ID
If you would like more fields available to narrow down your search even further, click on the More Referral Search Option hyperlink. This will allow you to search by:

- Requested Date
- Authorization Date
- Expiration Date
- Referring Provider
- Requested Provider Last Name
- Requested Provider First Name
C.) Authorization Details

When you have successfully found your Authorization record from the search, you will see the following Authorization details page.

- **Copy to a New Referral** – this feature allows you to copy certain data elements to a new Auth request page. Clicking on this will automatically open the Auth request page.

- **Attach a Document to this Referral** – this feature allows you to attach documents with this referral submission. Documents in the format of word.doc, adobe.PDF, etc. can be attached.

- **Inquire about this Referral** – this feature sends an e-mail to the MPM UM staff about the Auth. This will require you to have an Outlook or other email client.

- **Print Friendly Version** – this feature allows you to print or re-print the Authorization Letter for this particular Auth.

- **Attachments** – this section will show you if there are any attached documents to this Auth.

- **Status Information** – this section will display the current status of the Auth; Auth#, status, units, POS, any memos associated to the Auth, Request and Auth Action dates and expiration date. The Member’s designated hospital is also located in this section.

- **Member Information** – this section will display information regarding the Member for this Auth. Information such as Member Name, DOB, Member ID, address, etc.

- **Referring Physician** – this section is in regards to the Referring Physician for the Authorization. This will displays the Provider’s Name, ID, address, etc.

- **Requested Physician** - this section is in regards to the Requested Physician for the Authorization. This will displays the Provider’s Name, ID, address, etc.

- **Notes** – this area will display any notes associated to this Authorization. You can view notes such as the reason for an Auth denial here.

- **Services Requested** – this section displays the services requested for this Authorization.
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Phone: (818) 702-0100 ext. 299
D) My Auth
The My Auth section allows you to view all of your Authorizations submitted by you in the past 30 days. This allows you to gain the benefits of:

- Verify if the Auth submission was successful
- Ability to view the status of the Auth
- Provides a centralized location to view all of your Auths without having to search

To access the My Auth section, go to the Main Menu, click on the ‘My Auth’ menu item:

My Hospital Members – this will provide you a list of all of your Members who have been admitted to the hospital. The report can be exported in Excel format (.xls file)

E) Auth Inquiry and Response
The web portal not only allows you to submit or view an Auth request, it also allows you inquire about the Auth. You can submit an Auth inquiry which then is submitted to MPM’s UM staff. You will receive a response within 24 hours from a UM staff.

To access the Auth inquiry feature, search and retrieve an Auth record from the portal. Click the ‘Inquire about this Referral’ hyperlink.
The following referral inquiry screen will be displayed. Type in the message you would like to send to the UM staff. Click on Submit Inquiry.

The UM staff will respond within 24 hours of the inquiry submittal. Responses will display on your landing page. There will be a response to each individual inquiry. Click the hyperlink to see the message(s). Click the ‘Mark As Read’ button to mark the message as being read.

When the UM staff replies to your inquiries, the replies will be displayed on a new line within the same message. Click the inquiries hyperlink to view the message(s).
Chapter 5 Claims

Providers have the ability to submit a Claim request or view a previously submitted Claim through the MPM Web Portal.

A.) Claim Request
To access the Claim Request page, select the appropriate IPA Company, go to the Main Menu, and then click on the Claim Request menu.

<table>
<thead>
<tr>
<th>Home</th>
<th>Providers</th>
<th>Auth Request</th>
<th>Auth Search</th>
<th>My Auth</th>
<th>Claim Request</th>
<th>Claim Search</th>
<th>Upload Claim File</th>
<th>Eligibility</th>
<th>My Members</th>
<th>→ Reference</th>
<th>Forms &amp; Manuals</th>
<th>My Documents</th>
<th>Sign Out</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guide (PDF)</td>
<td>Current IPA:</td>
<td>(Switch)</td>
<td>Web Portal User</td>
<td></td>
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</tr>
</tbody>
</table>

Last Action @ 2/17/2016 2:17:00 PM
Logged in as:  

The following Claim Request page will open.
Claim Request – in this section, you will enter the Member ID that this claim request is for. If you do not know the Member ID, you can do a search for the Member by using the ‘I can’t find the Member’ feature. This section also houses the Provider, POS, Outcome Code, any attached Authorization. Provider#, Facility ID and eConsult ID.

Diagnosis Codes – this area is the place where you will enter the Member’s diagnosis for this claim request. You can enter up to a maximum of 8 diagnosis codes per claim. If you have an ICD9 code and don’t know the ICD10 version, you can use the ICD9 to ICD10 converter tool.

Procedures – this is where you will enter the procedure code(s) for this claim request. You can enter up to 20 procedure codes per claim request.

Additional Information – you can enter additional notes for this claim request. The notes will be posted in MPM’s database for this claim request.

Review – clicking on the review button allows you to view the claim request prior to submitting.

Clear & Start Over – this feature will clear out all the data you have entered in the fields and allows you to start over.

B.) Claim Search
You have the ability to search for previously submitted Claims in the web portal. To access the Claim Search, go to the Main Menu, click on the Claim Search menu:

You can search by Claim#, Member First and Last Name and Status
For best results, try searching for the first four letters of the Member’s First and Last name.
C) Claim Search Details
After finding the claim through the search, you can view the details of the claims by clicking on the Claim Number hyperlink. This page will be displayed:

- **Attach a Document to this Claim** – this hyperlink will bring up the ‘Attach a File’ webpage. This will allow you to attach a file to this Claim. The MPM staff will be notified and the file will be attached to the claim in MPMs database.
- **Print Friendly Version** – this will allow you to print the Claim or save it as a .pdf
- **Claims/Encounter Details** – this section will list the header information of the claim, such as IPA Name, Claim#, any attached Auth#, Date Received, etc.
- **Member Information** – this section will display the Member information on who this claim is in regards to. This also lists the diagnosis for the Member.
- **Provider Information** – this section will display information regarding the Provider for this claim.
- **Notes** – you can view relative notes for this claim in this section. The MPM staff normally puts notes when denying a claim. You can view that information here.
- Services – this area will list the services rendered for the claim.
- Inquire about this Claim – this feature sends an e-mail to the MPM UM staff about the Claim. This will require you to have an Outlook or other email client.

D) Claim Payment Adjustment Reason Displayed in Web Portal
The claim payment adjustment reason for each non-payable service line item is now viewable under the Notes section. This will provide detailed information as to why the service was not paid.
E) Upload a Claim File
This feature allows you to upload claim files through the MPM web portal. The preferred formats include .PDF or .TIF. Browse your PC and attach a file. Provide your email address to receive confirmation receipts.

![File Upload Interface](image)

**Attach File for: HCLA**

- **File From**: [Browse...
- **Filename**: No file selected.
- **Email Confirmation To**: TestEmail@notarealemailaddress.com

**Send File**  **Close Window**

**File Upload History for**

<table>
<thead>
<tr>
<th>File ID</th>
<th>Date</th>
<th>Status</th>
<th>File Name</th>
<th>Size</th>
<th>File For</th>
<th>Email Receipt To</th>
</tr>
</thead>
<tbody>
<tr>
<td>1252620</td>
<td>Success</td>
<td>TestUpload.tif</td>
<td>13k</td>
<td>CLAIM_FILE</td>
<td>HCLA</td>
<td><a href="mailto:TestEmail@notarealemailaddress.com">TestEmail@notarealemailaddress.com</a></td>
</tr>
</tbody>
</table>
Chapter 6 Eligibility

The web portal allows you to search for Eligibility record(s) in the system. The MPM Eligibility is updated on a monthly basis, some health plans bi-monthly. To obtain a more accurate eligibility information, check directly on the Health plan website.

To access the Eligibility search feature, go to the Main Menu, click the Eligibility menu:

A.) Eligibility Search
The following Member Search screen will come up. Search for the Member’s first and last name and DOB. As you can see from the red message, DOB is now a required field when searching for a Member through the web portal.

When the system returns the Member record, you will see this page – from here you have a clear visual indication whether the Member is Eligible, Possible Match or Ineligible. You can also submit an Auth request for this Member by clicking on the ‘Copy to Auth Request’ hyperlink.
When you find the Member record you are looking for, double click on the link to view the Member record in the web portal.

- From the Member Information screen you can click on the Request Authorization hyper link to submit an Auth for this Member.
- You can click on the Inquire about this Member hyperlink to request more information from the MPM staff. Clicking this link will open up the outlook page and send an email to webmembinquiry@medpointmanagement.com.
- You can view any attached documents to this member, on the left hand side of the screen.
B) My Members
This section allows you to view a list of Members who are currently assigned to you. To access the My Members page, go to the Main Menu, click on the My Members menu.

There are three types of reports available in this section:

- My Members Approaching 65yrs Old – this report lists your Members who are aging into Medicare.
- My Hospitalized Members (PCP) – this report lists your Members who are currently in a SNF, hospital or other facility.
- Members Without PCP Visits On File – this report lists Members who are currently assigned to your office/health center and do not have a PCP encounter on file yet.

C) Member Attachments
You now have the ability to view the Member notes and attachment from the web portal. This can be accessed through the Member Information screen. This is the area to view the member’s medical notes, patient visit results from specialists, discharge notes, and any other documents attached to the Member’s record.

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Chapter 7 Reference

This area of the web portal allows you to view the current Procedure Codes, Diagnosis, Place of Service and CPT Modifier codes that MPM uses for adjudication.

To access the Reference section, go to the Main Menu, click on the Reference menu.
Chapter 8 Forms & Manuals

In this section, you can find helpful information. MPM will upload imperative documents for you to view. You can also obtain MPM’s How-To User Guides for new features.

To access the Forms & Manuals section, go to the Main Menu, click on the Forms & Manuals menu.

As indicated in the highlighted print screen, the previous word document for Prescription Drug form has been updated to a ‘fillable’ PDF format.
Chapter 9 My Documents

The My Documents section consists of current monthly capitation and eligibility reports. Each report is identified by IPA which allows the ability for Providers to verify if they are affiliated with more than one IPA.

To access the My Documents section, go to the Main Menu, click on the My Documents menu.
Chapter 10 Signing Out of the Web Portal

For HIPAA Privacy reasons, we require that you Sign Out of the web session when no longer using the web portal. Signing out ensures the no one else has access to the data while you are away from your desk. Click the Sign Out icon on the Main Menu when logging out.