



End User Manual for the DTI Authorizations Process

ProviderConnect NX

APR 2024 v3.5

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Introduction to Avatar NX for Authorizations Providers

The Avatar NX is the Electronic Health Record System (EHRS) that the Los Angeles County Department of Mental Health (LACDMH) implemented. **ProviderConnect NX** is a web-based interface that communicates with Avatar NX. **ProviderConnect NX** is a standard browser-based application that can be launched from any web browsing application such as Edge, Chrome, or Firefox. **ProviderConnect NX** has real-time communication with Avatar NX, hence any information submitted is directly entered or updated into Avatar NX immediately.

Provider Authorizations vs. Member Based Authorizations

Provider Authorizations are at funding source level for a given fiscal year for a provider. Each provider authorization (P-Auth) is assigned with a specific dollar amount allocated as per the contract/amendment. When claiming for a service, the provider uses a P-Auth and claiming can continue until the dollar is exhausted. Based on clients Financial Eligibility and the type of service claimed, the provider uses a P-Auth that is linked to a Medi-Cal Funding Plan or a Non-Medi-Cal Funding Plan.

Member Based Authorizations are child records of P-Auth's that are assigned to a specific member for a specific service. When requesting a member-based authorization for, the provider should use an appropriate funding source that covers the requested service. The authorization must be based on the client's Financial Eligibility, use a Medi-Cal or a Non-Medi-Cal Funding Source. Also, note that for each claim submitted with a member-based authorization, the dollar amount will be deducted from the parent P-Auth.

Access and Limitations

- To access the system, a web address (URL - Uniform Resource Locator) is used to launch the browser-based application.
- Once your request is approved, a user ID and system generated password will be issued to designated users by LACDMH. This initial password must be changed upon the first login to the application.
- The client must have an open admission (Open Episode) and their Financial Eligibility setup in Avatar NX with the Legal Entity seeking an authorization request for the client that has been submitted through Client Web Service. This is prior to the provider creating a Member Authorization in **ProviderConnect NX**.
- Once an authorization request is submitted via **ProviderConnect NX**, designated users will not be able to make any changes to the submitted request.
- If the User is having **ProviderConnect NX** functionality issues Users will need to complete a **HEAT ticket** to have the issue investigated and resolved.

Links and Numbers

Help Desk – (213)351-1335

HEAT ticket System - <https://lacdmhheat.saasit.com>

User Manuals and Videos - <https://dmh.lacounty.gov/pc/cp/provider-connect/>

Forms and Instructions for the process to apply for access to ProviderConnect NX

Request Forms for Provider Connect NX Access:

- APPLICATION ACCESS FORM (AAF)
- CONFIDENTIALITY OATH
- COUNTY OF LOS ANGELES AGREEMENT FOR ACCEPTABLE USE AND CONFIDENTIALITY OF COUNTY INFORMATION ASSETS (AUA)
- ELECTRONIC SIGNATURE AGREEMENT
- SECURITY AGREEMENT NON-LACDMH USER

****Below is an example of the email an Onboarding Provider will receive****

This is a reminder for Legal Entity (LE) Providers that they required to Onboard a designated a Legal Entity Representative (liaison). The LE liaison will be the point of contact for any LE staff requesting access to Department of Mental Health (DMH) resources/applications. To facilitate staff requests, the DMH Provider Advocacy Office (PAO) has developed the online **Systems Access Request (SAR)** portal. The SAR portal will enable liaisons with a quick, reliable, and more accountable way to request access to existing and future DMH applications.

*****IMPORTANT***** Mailed access request forms and/or emailed access request forms will **NO longer** be processed. Any requests for application access or New C-Number/C-Number business agreement renewals **MUST** be created in the SAR portal by the LE liaison.

The SAR portal is only accessible to LE liaisons. To request SAR portal access for an LE liaison, please complete and email the “**Individuals Authorized to Sign Application Access Forms**” in addition to the “**Contractor Number Request Packet**” to the DMH Systems Access Unit at SystemsAccessUnit@dmh.lacounty.gov with subject line “**ONBOARDING SAR PORTAL LIAISON ACCESS.**” For your convenience, we have provided the direct link to the above-mentioned forms below:

Contractor Number Request Packet:

http://file.lacounty.gov/SDSInter/dmh/1076333_CNumberRequestPacket.pdf

Individuals Authorized to Sign Application Access Forms:

http://file.lacounty.gov/SDSInter/dmh/1055863_Individuals_Authorized_to_Sign_Access_Forms.pdf

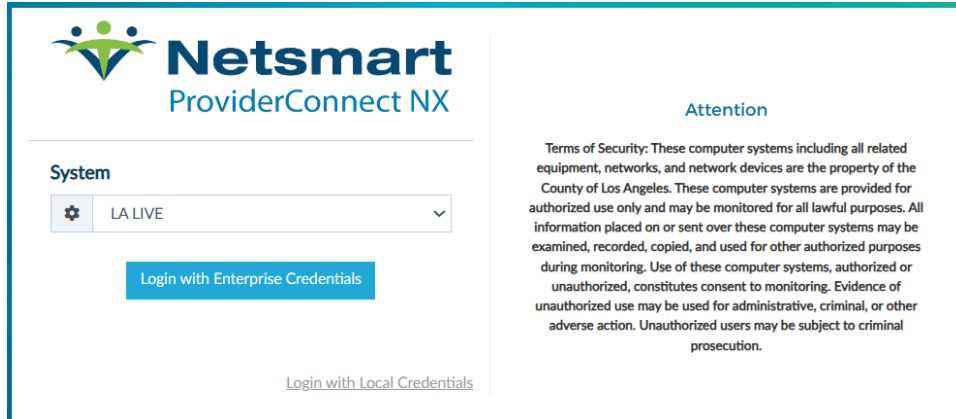
NOTE Please make sure that the forms are filled out or typed in the PDF form. All scanned documents should be legible, and all parties must either use a wet or digital signature. Requests with typed signatures, incomplete forms, or signature dates older than 60 days will **NOT** be processed.

Should you have any questions or if you require additional assistance, please contact the DMH Systems Access Unit at SystemsAccessUnit@dmh.lacounty.gov and we will gladly assist you. We sincerely thank you for all your time and cooperation.

Provider Connect NX: Login with Enterprise Credentials

Start the web browser (Edge, Chrome, or Firefox) on your computer. Type or cut and paste the following web address in the address line <https://lapcnx.netsmartcloud.com/#/home> to access the link for **ProviderConnect NX**. We also suggest that User save this link to their Favorites Bar for ease of access.

Select the “**Login with Enterprise Credentials**” button. This will navigate the User to the Microsoft MFA login screen.



Netsmart
ProviderConnect NX

System
LA LIVE

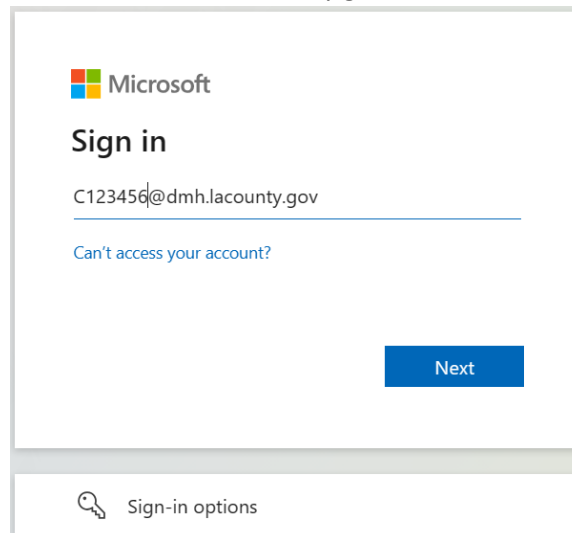
Login with Enterprise Credentials

[Login with Local Credentials](#)

Attention

Terms of Security: These computer systems including all related equipment, networks, and network devices are the property of the County of Los Angeles. These computer systems are provided for authorized use only and may be monitored for all lawful purposes. All information placed on or sent over these computer systems may be examined, recorded, copied, and used for other authorized purposes during monitoring. Use of these computer systems, authorized or unauthorized, constitutes consent to monitoring. Evidence of unauthorized use may be used for administrative, criminal, or other adverse action. Unauthorized users may be subject to criminal prosecution.

Users will either enter in their “C” number with @dmh.lacounty.gov email address and click the “**Next**” button or



Microsoft

Sign in

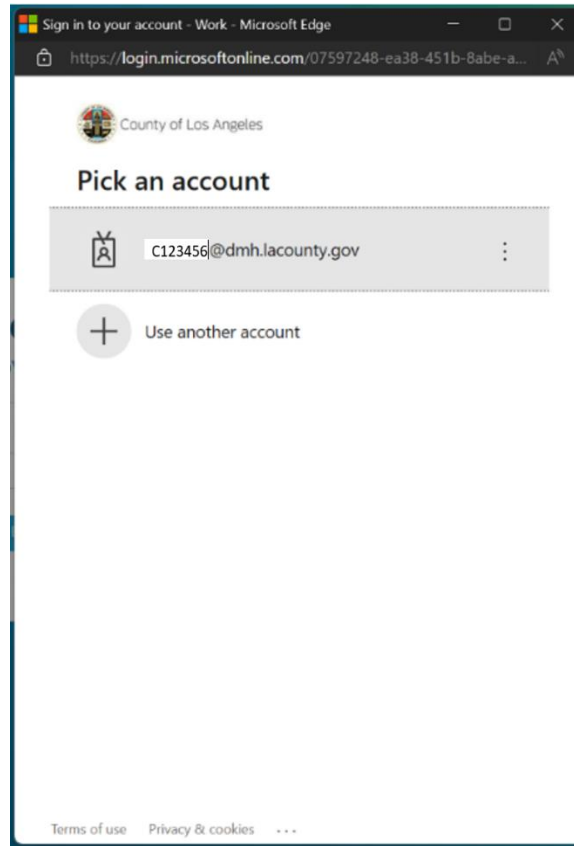
C123456@dmh.lacounty.gov

[Can't access your account?](#)

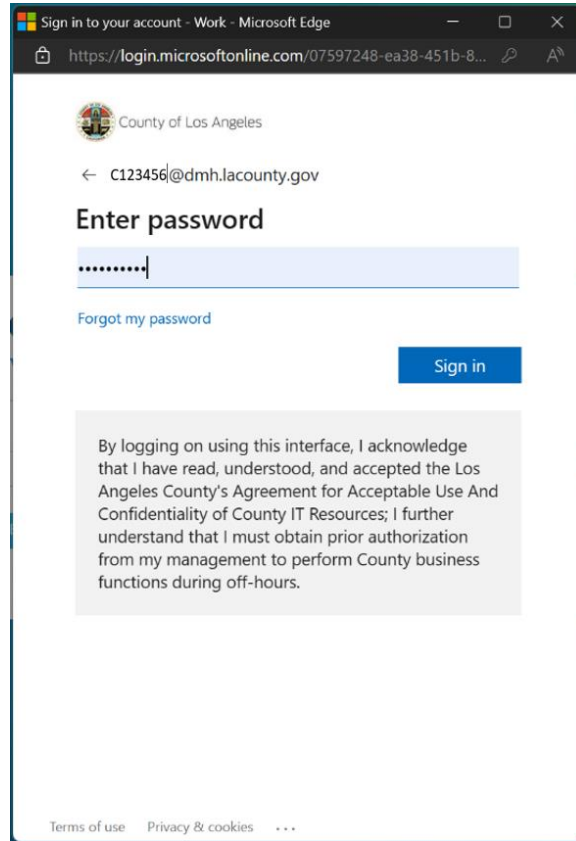
Next

Sign-in options

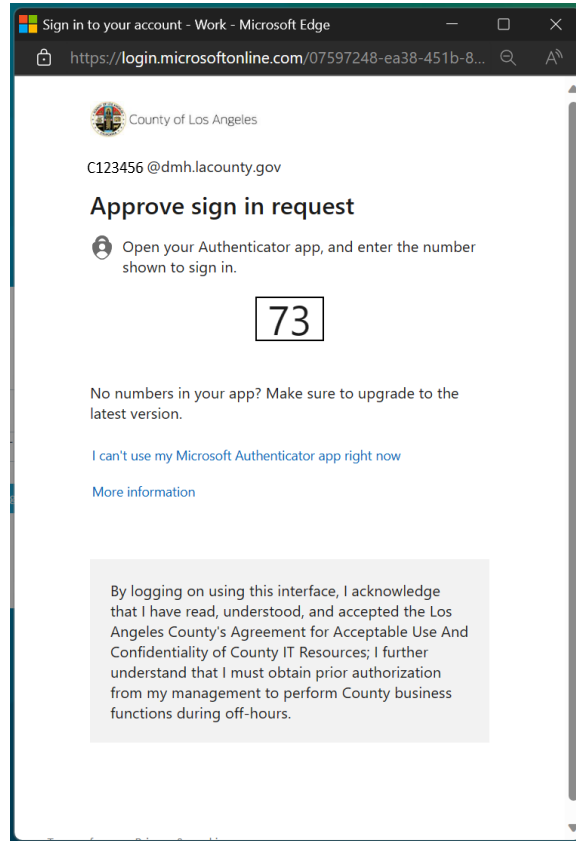
on the **“Pick an account”** popup screen User will either select the **“C”** number DMH email address or if the User does not see their **“C”** number DMH email the User can click the **“+”** to use another account. This will navigate the User back to the **“Sign in”** to where the User can enter their **“C”** number DMH email address and click the **“Next”** button.



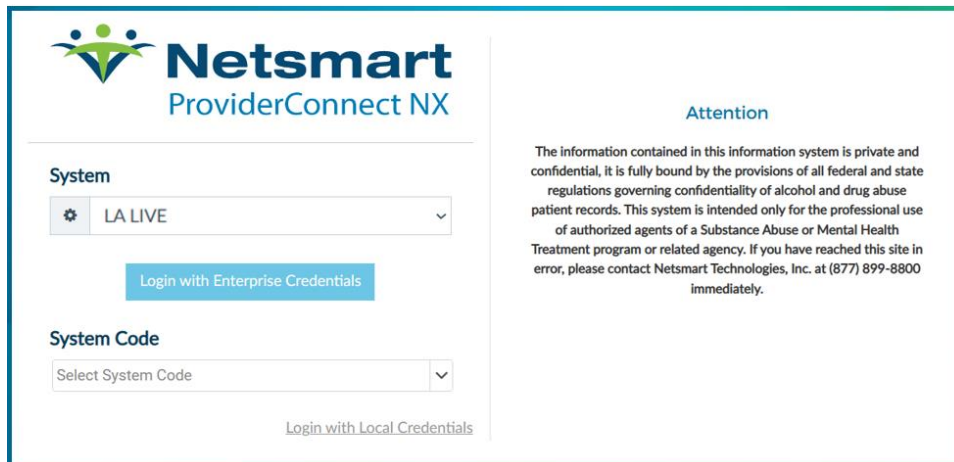
The User will enter their password and click the “**Sign in**” button. This will navigate the User to the Netsmart **ProviderConnect NX** login.



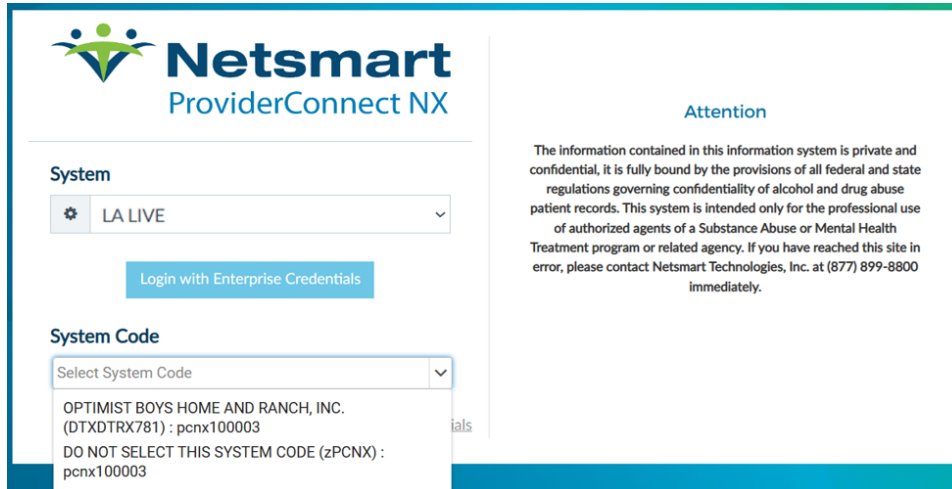
User will receive the number to be entered into the “**Authenticator App**”. The User will enter the number in the app and click the checkmark. This will navigate the User back to the Netsmart **ProviderConnect NX** login screen.



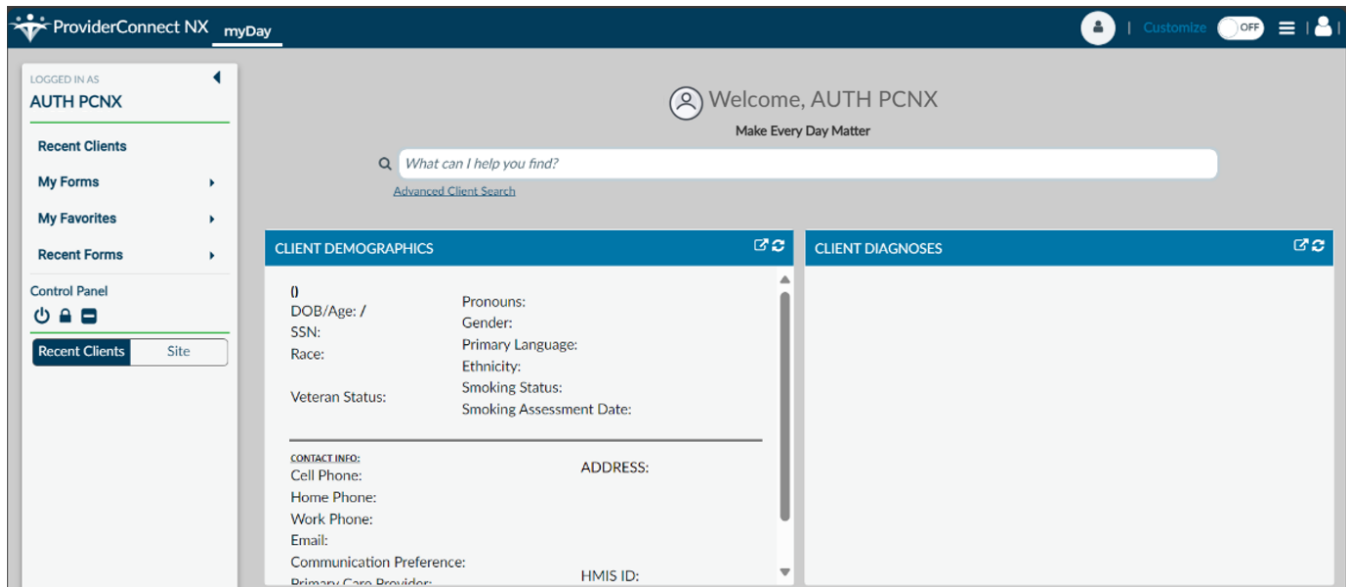
Using the “**System Code**” dropdown select the code for the Users agency. The User will only see the system code (they are authorized to see to access **ProviderConnect NX**).



Click the arrow to open the dropdown menu for "System Code".

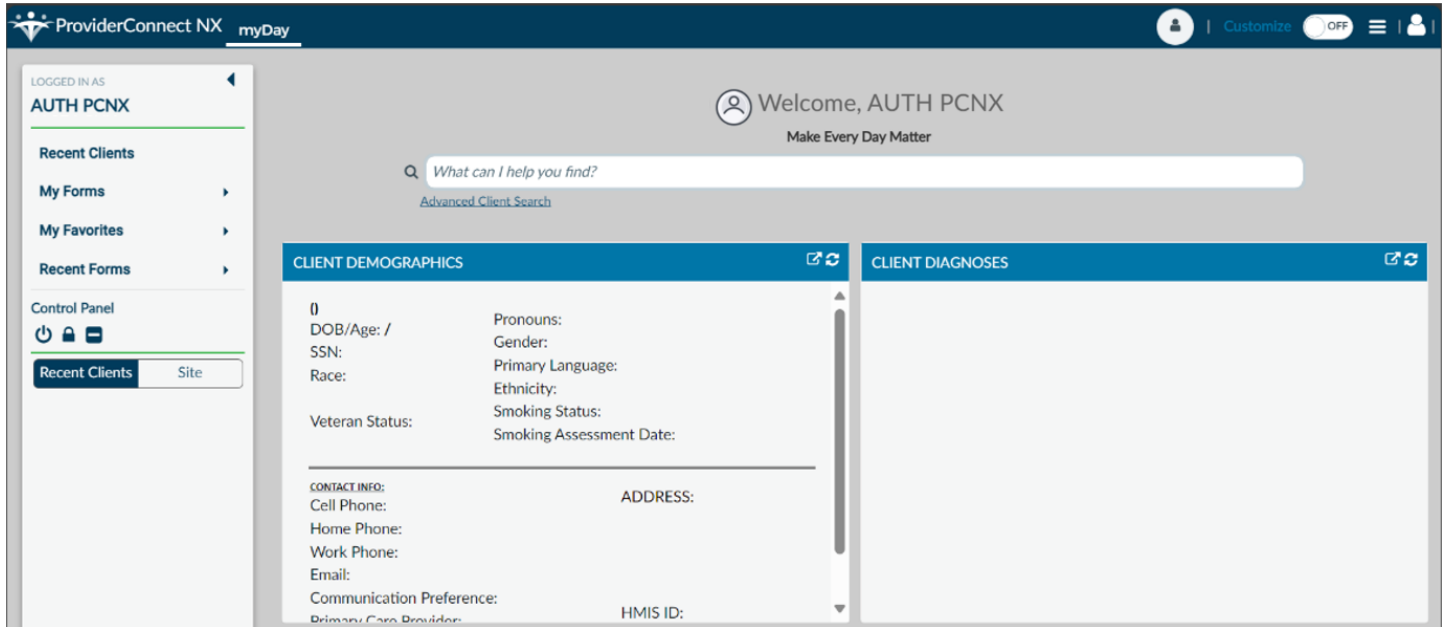


Once selected, this will navigate the User to the **ProviderConnect NX Home Page**.

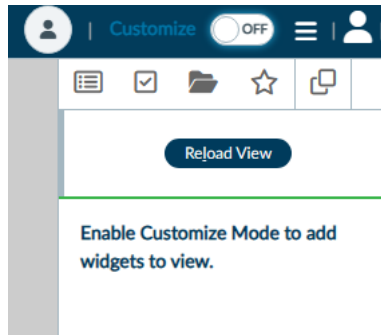


Provider Connect NX: How Add a Widget

From the **ProviderConnect NX** “Home screen”.




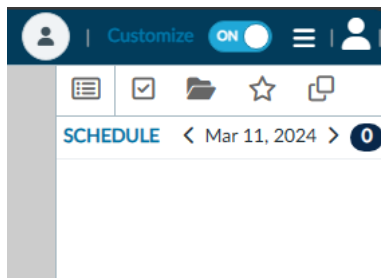
In the upper right corner of the screen Users will see a “**Customize**” selector.



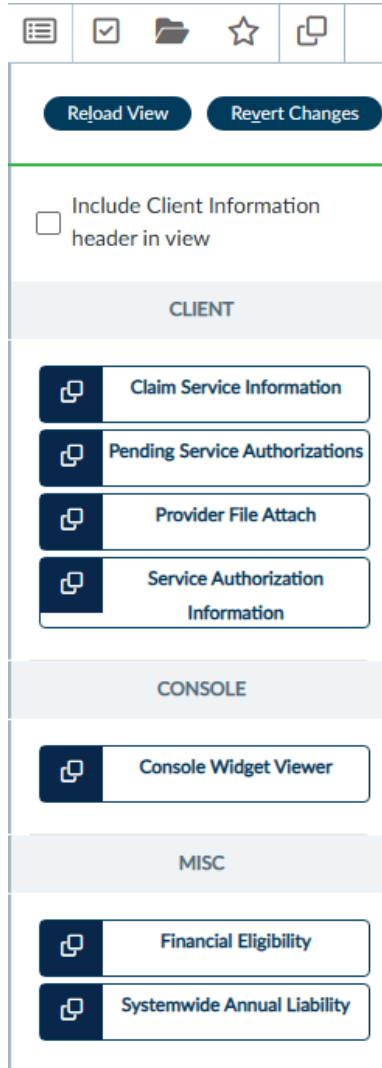
Turn the “**Customize**” selector from the “**OFF**” selection to the “**ON**” selection.



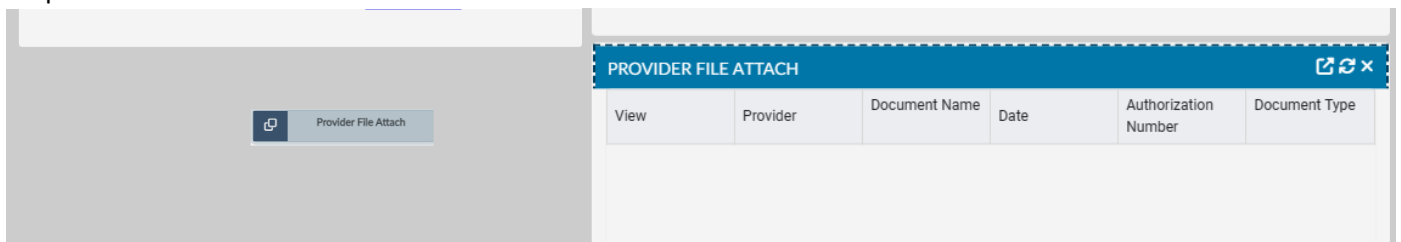
Select the icon  to open the widget options.



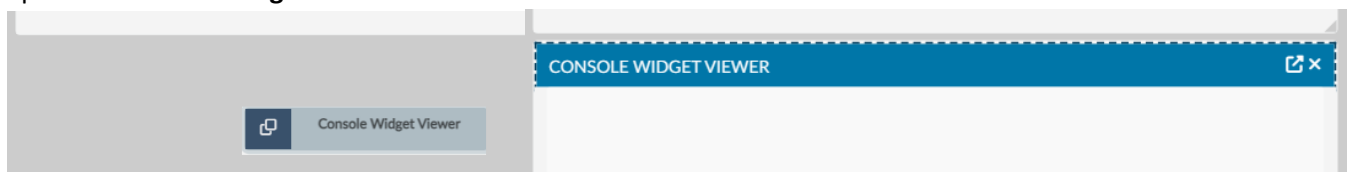
In the widget options select, drag and drop the “**Provider File Attach**” and “**Consoel Widget Viewer**” widget to the “**Home Screen**”.



Example for “**Provider File Attach**”.



Example for “**Console Widget Viewer**”.



Once completed turn the “Customize” selection from the “ON” selection to the “OFF” selection.



Select the icon  to close the side bar.

Users will now be able to view the Client file attachments from the “Home Screen”.

ProviderConnect NX myDay

LOGGED IN AS
AUTH PCNX

Recent Clients
My Forms
My Favorites
Recent Forms

Control Panel
Recent Clients Site

Welcome, AUTH PCNX
Make Every Day Matter

What can I help you find?
Advanced Client Search

CLIENT DEMOGRAPHICS

DOB/Age: /
SSN:
Race:
Veteran Status:

Pronouns:
Gender:
Primary Language:
Ethnicity:
Smoking Status:
Smoking Assessment Date:

CONTACT INFO: ADDRESS:
Cell Phone:
Home Phone:
Work Phone:
Email:
Communication Preference:
Primary Care Provider:
PCP Phone:

HMIS ID:
Magellan ID:
[LAUNCH Client Chart](#)

CLIENT DIAGNOSES

PROVIDER FILE ATTACH

View	Provider	Document Name	Date	Authorization Number	Document Type
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CONSOLE WIDGET VIEWER

Open Record Close All Print

ProviderConnect NX: How to create an Authorization

From the “Home” screen

The screenshot displays the 'myDay' interface for 'AUTH PCNX'. The top navigation bar includes the logo, 'ProviderConnect NX myDay', a user profile icon, 'Customize', and a 'OFF' toggle. The main content area features a search bar with the placeholder 'What can I help you find?' and a link to 'Advanced Client Search'. Below the search bar are four widget panels: 'CLIENT DEMOGRAPHICS', 'CLIENT DIAGNOSES', 'PROVIDER FILE ATTACH', and 'CONSOLE WIDGET VIEWER'. The 'CLIENT DEMOGRAPHICS' panel contains fields for ID, DOB/Age, SSN, Race, Veteran Status, Pronouns, Gender, Primary Language, Ethnicity, Smoking Status, and Smoking Assessment Date. It also includes sections for 'CONTACT INFO' (Cell, Home, Work Phone, Email) and 'ADDRESS'. The 'PROVIDER FILE ATTACH' panel shows a table with columns for View, Provider, Document Name, Date, Authorization Number, and Document Type. The 'CONSOLE WIDGET VIEWER' panel is currently empty. At the bottom right, there are buttons for 'Open Record', 'Close All', and 'Print'.

LOGGED IN AS
AUTH PCNX

Recent Clients
My Forms
My Favorites
Recent Forms

Control Panel
Recent Clients Site

Welcome, AUTH PCNX
Make Every Day Matter

What can I help you find?
[Advanced Client Search](#)

CLIENT DEMOGRAPHICS

ID:
DOB/Age: /
SSN:
Race:
Veteran Status:

Pronouns:
Gender:
Primary Language:
Ethnicity:
Smoking Status:
Smoking Assessment Date:

CONTACT INFO:
Cell Phone:
Home Phone:
Work Phone:
Email:
Communication Preference:
Primary Care Provider:
PCP Phone:

ADDRESS:

HMIS ID:
Magellan ID:
[LAUNCH Client Chart](#)

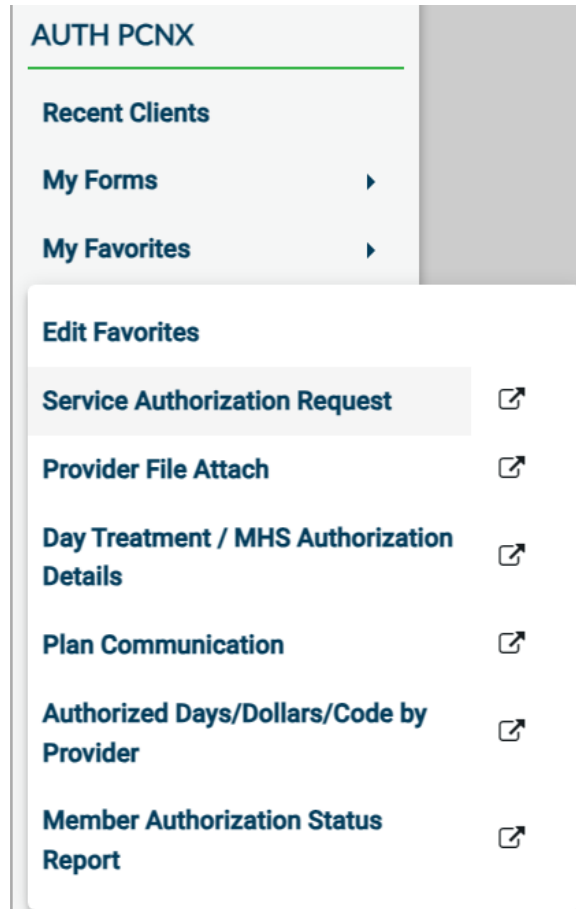
PROVIDER FILE ATTACH

View	Provider	Document Name	Date	Authorization Number	Document Type
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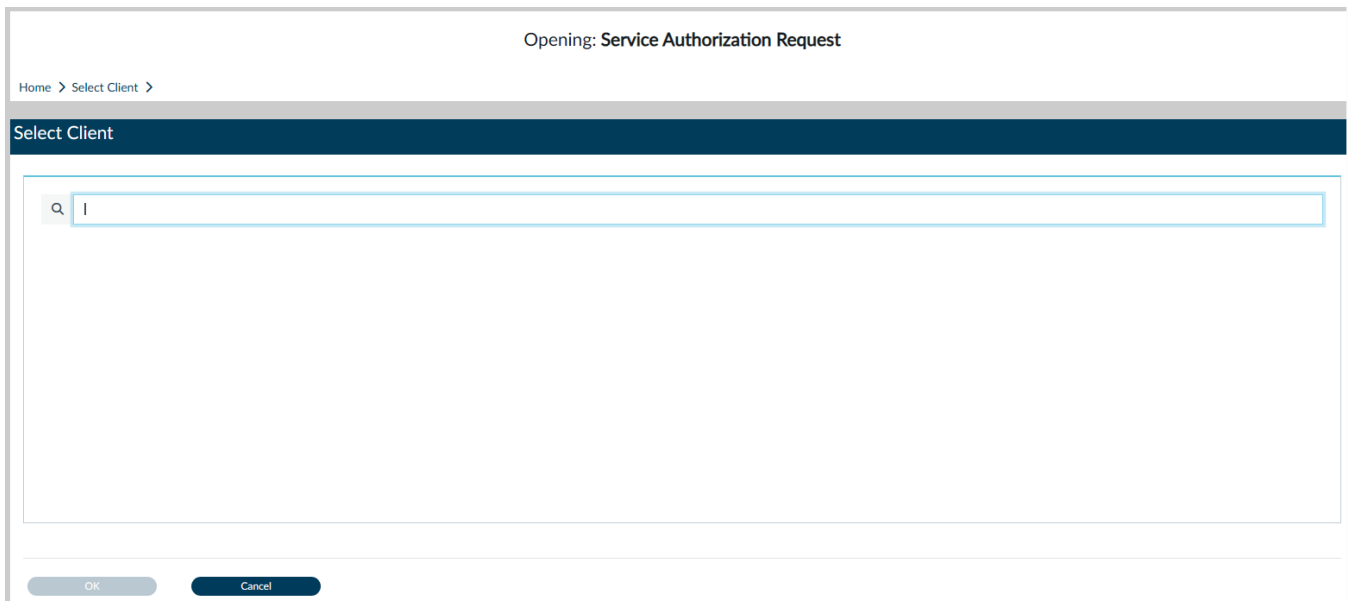
CONSOLE WIDGET VIEWER

Open Record Close All Print

The User can go to their “My Favorites” in the TASK Navigation and select “Service Entry Submission” from the dropdown menu.



Users will see the “Select Client”.



Users can enter the **Client ID** or the Client name and select the client.

Opening: Service Authorization Request

Home > Select Client >

Select Client

Q 9358744

Name	Date Of Birth	Client's Address - Street
PCNX ADMISSIONS (009358744)	01/12/2000	550 N Vermont Ave

OK Cancel

Users will be navigated to the pre-display for “**Service Authorization Request**”. When Users will see past Authorization Request. Users must select the “**Add**” button to create a new Authorization Request.

Opening: Service Authorization Request

Home > Select Client >

✓ Selected Client : PCNX ADMISSIONS (009358744)

Select Record

Funding Source ↕	Provider ↕	Auth # ↕	Begin Date ↕	End Date ↕	Code Authorized (1) ↕	Authorization Status ↕
102-DMH Mental Health Services (CGF) MC	781-OPTIMIST BOYS HOME AND RANCH, INC.	360499	06/25/2023	06/30/2023	TBS (H2019)	Pending

Add Edit Delete Cancel

From the pre-display User will be navigated to the “Service Authorization Request” form. If the Client has no past Authorization Request Users will be navigated directly to the “Service Authorization Request” form without seeing the pre-display.

NOTE: All field names that are in **RED** with **RED Asterisk** are required fields and must be completed before claims can be submitted. There are other fields, that are not marked as “Required” but are needed to complete an “Authorization Request”.

Using the dropdown under the “Funding Source Authorization Is For” field select the Funding Source to be used for this request.

The image shows three sequential screenshots of a dropdown menu. The first screenshot shows the dropdown with the text 'Select' and a search icon. The second screenshot shows the dropdown expanded with a search bar and a list of funding source options: (1) Invalid P-Auth, (10) Juvenile Day Reporting Center Non-MC, (1001) FFS2 Outpt Svcs - Psychtest (CGF) MC, (1002) FFS2 Outpatient Services Non MD(CGF), (1003) FFS2 Outpatient Services MD(CGF), (1005) FFS2 TAR Prof Svc, (1006) IMD Exclusion- FFS2 TAR Prof Svc, (101) DMH Mental Health Services (CGF) Non-MC, and (1011) CGF IMD Step Down Non-MC. The third screenshot shows the dropdown with the option '(102) DMH Mental Health Services (CGF) MC' selected.

Using the dropdown under the “Benefit Plan” field select the corresponding Benefit Plan for the chosen Funding Source to be used for this request.

The image shows three sequential screenshots of a dropdown menu. The first screenshot shows the dropdown with the text 'Select' and a search icon. The second screenshot shows the dropdown expanded with a search bar and a list of benefit plan options: Invalid plan, DO NOT USE', PHF MC, Residential MC, TBS (MC), TBS Aftercare MC, and TBS STRTP MC. The third screenshot shows the dropdown with the option 'TBS (MC)' selected.

Using the dropdown under the “Contracting Provider Program” field select the program to be used for this request.

NOTE: Even though this field is not highlighted in **RED** it is still a required field.

The screenshot shows a form with three instances of a 'Contracting Provider Program' dropdown menu. The top instance is selected, showing a search bar and a list of options: 'All - 01/01/2003 - 1933A OPTIMIST EAGLE ROCK', 'All - 01/01/2003 - 1934A OPTIMIST CARSON', 'All - 01/01/2003 - 1936A OPTIMIST MISSION HILLS', 'All - 01/01/2003 - 1937A PACIFIC LODGE YOUTH SERVICES', 'All - 01/01/2003 - 1941A PACIFIC LODGE CAMPUS', and 'All - 01/01/2003 - 1946A OPTIMIST CAMPUS'. The middle instance is currently selected and shows 'All - 01/01/2003 - 1933A OPTIMIST EAGLE ROCK'. The bottom instance is also selected and shows the same option.

Using the dropdown under the “**Current Authorization Status Reason**” field select the Reason to be used for this request.

The screenshot shows a form with two instances of a 'Current Authorization Status Reason' dropdown menu. The top instance is selected, showing a search bar and a list of options: 'CAU - Pending Denial', 'CAU - Pending DMH Decision', 'CAU - Pending Modified Approval', 'CAU - Pending More Information', 'CWD - Modified Approval', and 'CWD - Pending DMH Decision'. The bottom instance is currently selected and shows 'CWD - Pending DMH Decision'.

NOTE: User must select “CWD Pending DMH Decision”

The screenshot shows a single instance of a 'Current Authorization Status Reason' dropdown menu. The dropdown is open, and the option 'CWD - Pending DMH Decision' is selected and highlighted.

Review the section to verify all fields that were reviewed have been completed.

Enter the “**Begin Date of Authorization**” and the “**Financial Authorization End Date**”.

NOTE: For Authorizations that span over into the next Fiscal Year the “**Financial Authorization End Date**” **MUST** be the last day of the Fiscal Year. (example - 06/30/2XXX)

NOTE: For Authorizations that span over into the next Fiscal Year the “**Financial Authorization End Date**” **MUST** be the last day of the Fiscal Year. (example - 06/30/2XXX) and date the User wants to enter will be entered into the “**Clinical Authorization Date**” field.

If the **“Financial Authorization Date”** spans into the next Fiscal Year the **“Account”** and the **“Clinical Authorization End Date”** field will show grayed and the User will not be allowed to continue.

The screenshot shows a form with two sections. The top section contains three date fields: 'Begin Date Of Authorization *' with the value '03/21/2024', 'Clinical Authorization End Date' which is currently empty, and 'Financial Authorization End Date *' with the value '10/30/2024'. The bottom section contains two dropdown menus: 'Account' and 'Contracting Provider Authorization', both of which are currently set to 'Select'.

The User **MUST** enter the last day of the current Fiscal Year into the **“Financial Authorization End Date”** field and then enter the end date they request in the **“Clinical Authorization End Date”** field before the **“Account”** and the **“Clinical Authorization End Date”** field will show grayed.

The screenshot shows the same form as above, but with updates. The 'Clinical Authorization End Date' field now contains the value '10/30/2024'. The 'Financial Authorization End Date *' field now contains the value '06/30/2024'. The 'Account' and 'Contracting Provider Authorization *' dropdown menus are now grayed out and have an 'x' icon next to the 'Select' text, indicating they are disabled.

NOTE: Once the Authorization is **“Approved”** the actual end date will show in the **“Clinical Authorization End Date”** field.

Review the section to verify all fields that were reviewed have been completed.

The screenshot shows the form with all fields completed. The 'Begin Date Of Authorization *' is '03/21/2024', the 'Clinical Authorization End Date' is '10/30/2024', and the 'Financial Authorization End Date *' is '06/30/2024'. The 'Account' and 'Contracting Provider Authorization *' dropdown menus are still grayed out.

Using the dropdown select the “Account” to be used for the authorization and the “Contracting Provider Authorization”.

The screenshot shows a multi-step process for selecting an account and a contracting provider authorization. It includes several dropdown menus and a search list.

- Account:** A dropdown menu with "Select" as the current value.
- Contracting Provider Authorization:** A dropdown menu with "Select" as the current value.
- Account:** A dropdown menu with "OPTIMIST BOYS' HOME + RANCH INC. 1) 07/01/2023 - 06/30/2024" selected.
- Contracting Provider Authorization:** A dropdown menu with "Select" as the current value.
- Account:** A dropdown menu with "OPTIMIST BOYS' HOME + RANCH INC. 1) 07/01/2023 - 06/30/2024 \$10447911.00 OPTII" selected.
- Contracting Provider Authorization:** A dropdown menu with "Select" as the current value.
- Search List:** A search bar with a magnifying glass icon. Below it is a list of search results for "Contracting Provider Authorization":
 - Auth: P33070 FS: DMH Mental Health Services (CGF) MC(102) Care Lvl: No Entry Dates: 07/01/2023-06/30/2024 Amt Remain: \$1948106.71 Amt Denied: \$0.00
 - Auth: P34019 FS: DMH Mental Health Services (CGF) MC(102) Care Lvl: No Entry Dates: 07/01/2023-06/30/2024 Amt Remain: \$193030.13 Amt Denied: \$0.00
 - Auth: P34020 FS: DMH Mental Health Services (CGF) MC(102) Care Lvl: No Entry Dates: 07/01/2023-06/30/2024 Amt Remain: \$698722.88 Amt Denied: \$0.00
 - Auth: P34021 FS: DMH Mental Health Services (CGF) MC(102) Care Lvl: No Entry Dates: 07/01/2023-06/30/2024 Amt Remain: \$107358.08 Amt Denied: \$0.00
- Contracting Provider Authorization:** A dropdown menu with "Auth: P33070 FS: DMH Mental Health Services (CGF) MC(102) Care Lvl: No Entry Dates:" selected.

Review the section to verify all fields that were reviewed have been completed.

The screenshot shows the final state of the form with the following selections:

- Account:** A dropdown menu with "OPTIMIST BOYS' HOME + RANCH INC. 1) 07/01/2023 - 06/30/2024 \$10447911.00 OPTII" selected.
- Contracting Provider Authorization:** A dropdown menu with "Auth: P33070 FS: DMH Mental Health Services (CGF) MC(102) Care Lvl: No Entry Dates:" selected.

In this section the fields are dynamic. Fields will be ungrayed once other field(s) have been completed with the correct information.

The screenshot shows a form with the following sections:

- Authorization Grouping Or Individual Authorizations ***: Radio buttons for **All**, **Grouping**, and **Individual**.
- Authorization Grouping**: A dropdown menu with "Select" and a "Display Authorization Grouping" button.
- Total Estimated Liability**: A grayed-out text input field.
- Letter Type**: A dropdown menu with "Select", a close button (x), and a dropdown arrow (v).
- Procedure Code Type (1)**: Radio buttons for **CPT® Codes** and **Revenue Code**.
- Procedure Code Type (2)**: Radio buttons for **CPT® Codes** and **Revenue Code**.
- Code Authorized (1)**: A grayed-out text input field with a search icon (magnifying glass).
- Code Authorized (2)**: A grayed-out text input field with a search icon (magnifying glass).
- Requested Units (1)**: A grayed-out text input field.
- Requested Units (2)**: A grayed-out text input field.
- Units Authorized (1)**: A grayed-out text input field.
- Units Authorized (2)**: A grayed-out text input field.
- Estimated Liability Code (1)**: A grayed-out text input field.
- Estimated Liability Code (2)**: A grayed-out text input field.

In the section select the “**Individual**” radio button.

Two side-by-side screenshots of the "Authorization Grouping Or Individual Authorizations *" section. The left screenshot shows the "All" radio button selected. The right screenshot shows the "Individual" radio button selected.

In the section select the “**CPT Codes**” radio button.

Two side-by-side screenshots of the "Procedure Code Type (1)" section. The left screenshot shows the "Revenue Code" radio button selected. The right screenshot shows the "CPT® Codes" radio button selected.

Using the dropdown for “Code Authorized” type in the code to activate the dropdown. Then select the full title for the code to be authorized. In this example we will be using “TBS(H2019)”.

Code Authorized (1)

Code Authorized (1)

2019

Results

- FFPSA TBS (H2019:HE:HV)
- FFPSA TBS DUP59 (H2019:HE:HV:59)
- FFPSA TBS DUP76 (H2019:HE:HV:76)
- FFPSA TBS PHONE (H2019:SC:HV)
- FFPSA TBS PHONE DUP59 (H2019:SC:HV:59)
- FFPSA TBS PHONE DUP76 (H2019:SC:HV:76)
- FFPSA TBS TELEPSYCH (H2019:HV:GT)
- FFPSA TBS TELEPSYCH DUP59 (H2019:HV:GT:59)
- FFPSA TBS TELEPSYCH DUP76 (H2019:HV:GT:76)
- TBS (H2019)

Code Authorized (1)

TBS (H2019)

NOTE: The Procedure Code must be selected according to the type of services being provided and requiring authorization, see list below.

Enter the unit requested.

Requested Units (1)	Requested Units (1)
	1000

Review the section to verify all fields that were reviewed have been completed.

SERVICE AUTHORIZATION REQUEST

Submit

Discard

Add to Favorites

- Member Service Authorization
- Member Service Authorization 21-40
- Care Manager
- Diagnosis
- Comments
- Provider Search
- Online Documentation

Brief Member Review

Type Of Authorization: Select

Funding Source Authorization Is For: (102) DMH Mental Health Services (CGF) MC

Provider To Be Authorized: OPTIMIST BOYS HOME AND RANCH, INC. (781)

Contracting Provider Program: All - 01/01/2003 - 1933A OPTIMIST EAGLE ROCK

Planned Admit Date: [Calendar Icon] [T] [Y]

Authorized Level of Care: Select

Current Authorization Status: Approved Denied Pending

Member Authorization History

Authorization Number: 360519

Benefit Plan: TBS (MC)

Performing Provider: Select

Performing Provider Type: Select

Current Authorization Status Reason: CWD - Pending DMH Decision

Initial Or Continuing Authorization: Initial Continuing Copy

Begin Date Of Authorization: 03/21/2024 [Calendar Icon] [T] [Y]

Clinical Authorization End Date: [Calendar Icon] [T] [Y]

Financial Authorization End Date: 06/30/2024 [Calendar Icon] [T] [Y]

Account: OPTIMIST BOYS' HOME + RANCH INC. 1) 07/01/2023 - 06/30/2024

Contracting Provider Authorization: Auth: P33070 FS: DMH Mental Health Services (CGF) MC(102) Car# L

Authorization Grouping Or Individual Authorizations: All Grouping Individual

Authorization Grouping: Select

Total Estimated Liability: 0.00

Letter Type: Select

Procedure Code Type (1): CPT® Codes Revenue Code

Procedure Code Type (2): CPT® Codes Revenue Code

Code Authorized (1): TBS (H2019)

Code Authorized (2): [Search Icon]

Requested Units (1): 1000

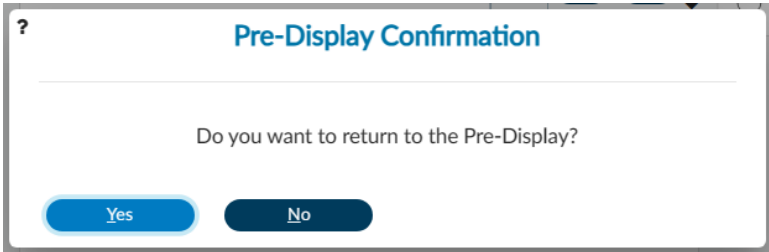
Requested Units (2): [Search Icon]

Scroll to the top of the form and select the “Submit” button.

SERVICE AUTHORIZATION REQUEST

Submit Discard Add to Favorites

The User will receive a message. Selecting “NO” will navigate the User back to the “Home” screen. Selecting “YES” navigates the User to the Authorization pre-display screen where the User will see all past and current authorizations that have been requested for this Client, this includes the authorization that was just created.



Note: For this example, we will select “YES” to navigate to the Authorization pre-display screen.

At this point the User has successfully created an Authorization Request for this client.

Selected Client : ADMISSIONS, PCNX (009358744)

Select Record

Funding Source	Provider	Auth #	Begin Date	End Date	Code Authorized (1)	Authorization Status
102-DMH Mental Health Services (CGF) MC	781-OPTIMIST BOYS HOME AND RANCH, INC.	360499	06/25/2023	06/30/2023	TBS (H2019)	Pending
102-DMH Mental Health Services (CGF) MC	781-OPTIMIST BOYS HOME AND RANCH, INC.	360501	03/21/2024	06/30/2024	TBS (H2019)	Pending

Add Edit Delete Cancel

Users can select the “Add” button to add another Authorization Request or they can select the “Cancel” button to return to the “Home Screen”.

ProviderConnect NX: How to Add an Attachment File

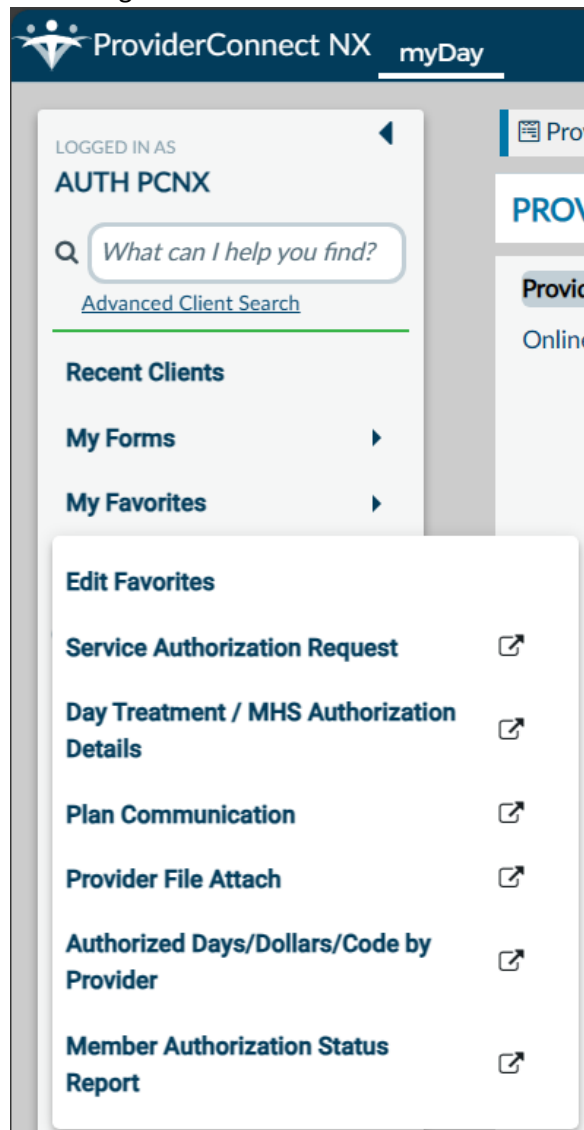
From the “Home” screen

The screenshot displays the ProviderConnect NX Home screen. At the top, the user is logged in as AUTH PCNX. The main header includes a search bar with the placeholder text "What can I help you find?" and a link to "Advanced Client Search". Below the header, the screen is divided into several sections:

- CLIENT DEMOGRAPHICS:** A section containing fields for personal and contact information.
 - DOB/Age: /
 - SSN:
 - Race:
 - Veteran Status:
 - Pronouns:
 - Gender:
 - Primary Language:
 - Ethnicity:
 - Smoking Status:
 - Smoking Assessment Date:
 - CONTACT INFO: Cell Phone, Home Phone, Work Phone, Email
 - ADDRESS:
 - Communication Preference:
 - Primary Care Provider:
 - PCP Phone:
 - HMIS ID:
 - Magellan ID:
 - [LAUNCH Client Chart](#)
- PROVIDER FILE ATTACH:** A table with columns for View, Provider, Document Name, Date, Authorization Number, and Document Type.
- CLIENT DIAGNOSES:** A section for viewing client diagnoses.
- CONSOLE WIDGET VIEWER:** A section for viewing console widgets.

At the bottom of the screen, there are three buttons: "Open Record", "Close All", and "Print".

Using the “My Favorites” tab in the TASK navigation select “Provider File Attach” to navigate to that form.



Once on the “**Provider File Attach**” form enter the “**Member ID**”, “**Provider**”, and “**File Type**” to upload an attachment (File). In this section the fields are dynamic. Fields will be ungrayed once other field(s) have been completed with the correct information.

NOTE: The fields highlighted in **RED** and/or with asterisks are required fields. They represent the minimum information required to submit the form.

The screenshot displays the 'Provider File Attach' form within the ProviderConnect NX interface. The form is titled 'PROVIDER FILE ATTACH' and includes a search bar at the top right with 'Submit', 'Discard', and 'Add to Favorites' buttons. The form is divided into several sections:

- Member ID ***: A text input field with a search icon.
- Provider ***: A text input field with a search icon.
- File Type ***: A dropdown menu with 'Select' and a search icon.
- Authorization**: A dropdown menu with 'Select'.
- Document Type**: A dropdown menu with 'Select' and a search icon.
- File Name**: A text input field.
- Comments**: A large text area with a search icon and a document icon.
- Existing Files**: A dropdown menu with 'Select' and a search icon.
- Comment History**: A large text area with a search icon and a document icon.

Buttons for 'Upload File', 'Store File', 'Update Comments', and 'Delete File' are located at the bottom of the form. The 'Member ID', 'Provider', and 'File Type' fields are highlighted in red, indicating they are required.

To Upload an Attachment (File)

Enter “Member ID”

Member ID *

Member ID *

Name	Date Of Birth	Client's Address - Street
GANT,REJOUNAE D (8451084)	09/16/2008	4741 W Ave J-3

Member ID *

Enter the “Provider ID”

Provider *

Provider *

Results
INC. OPTIMIST BOYS HOME AND RANCH (781)

Provider *

From the “File Type” dropdown select “Authorizations”

File Type *

File Type *

Authorization
Other
Provider

File Type *

From the “Authorization” dropdown select the desired authorization number

Authorization *

Select x v

Authorization *

Select x v

Store File

Authorization #247103 Start Date: 07/05/2022 End Date: 01/04/2023

Authorization #266445 Start Date: 07/01/2022 End Date: 07/04/2022

Authorization #266465 Start Date: 07/01/2022 End Date: 07/04/2022

Authorization #280134 Start Date: 07/05/2022 End Date: 01/04/2023

Authorization #299641 Start Date: 01/05/2023 End Date: 06/30/2023

Authorization #306172 Start Date: 01/05/2023 End Date: 06/30/2023

Authorization #306172 Start Date: 01/05/2023 End Date: 06/30/2023

Authorization #306172 Start Date: 01/05/2023 End Date: 06/30/2023

Select the “Upload File” button. Two windows will open. One for where the User must select the file to upload from their computer and the other is where the User can drag and drop the file to upload.

NOTE: MAX file size is 100MB, only accepted file type .PDF.

Upload File

File Name

File Upload

click here or drop file

Cancel

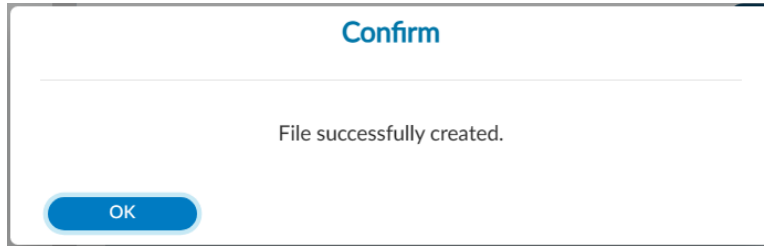
Name	Status	Date modified
This is a Test attachment 2	✓	12/12/2023 1:50
This is a Test attachment 3	✓	3/7/2024 9:54 A
This is a Test attachment 22222	✓	3/7/2024 9:56 A
This is a Test attachment	✓	12/12/2023 1:50

Upload File

File Name

This is a Test attachment 2.docx

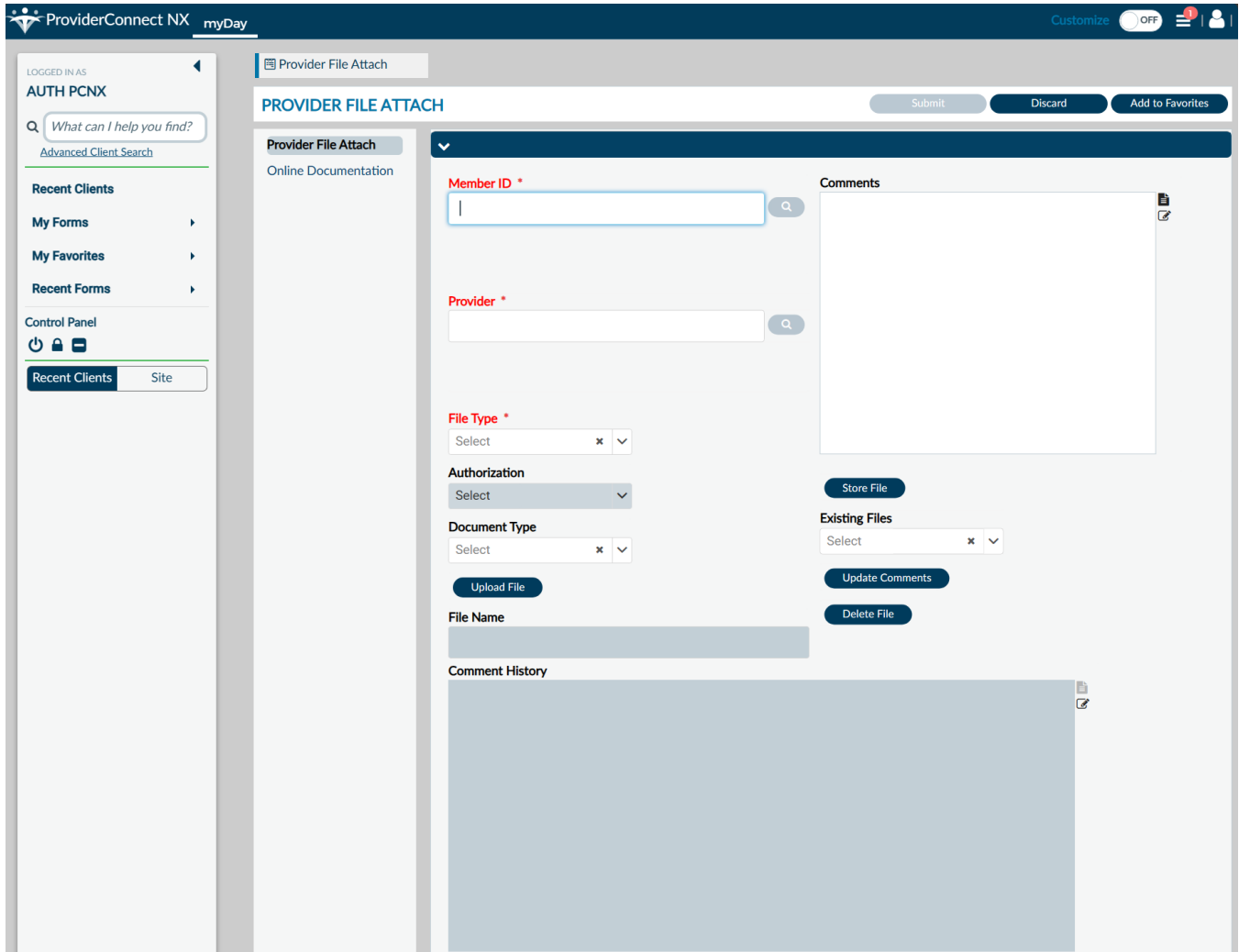
Click the “**Store File**” button to complete the file upload. User will receive a pop-up message to confirm the file was successfully uploaded. Select the “**OK**” button to close the pop-up message.



ProviderConnect NX: How to View, Print or Save Uploaded files

To View Uploaded Attachments (Files)

Using the “Provider File Attach” form



Enter "Member ID"

Member ID *

Member ID *

Name	Date Of Birth	Client's Address - Street
GANT,REJOUNAE D (8451084)	09/16/2008	4741 W Ave J-3

Member ID *

Enter the "Provider ID"

Provider *

Provider *

Results

INC. OPTIMIST BOYS HOME AND RANCH (781)

Provider *

From the "File Type" dropdown select "Authorizations"

File Type *

File Type *

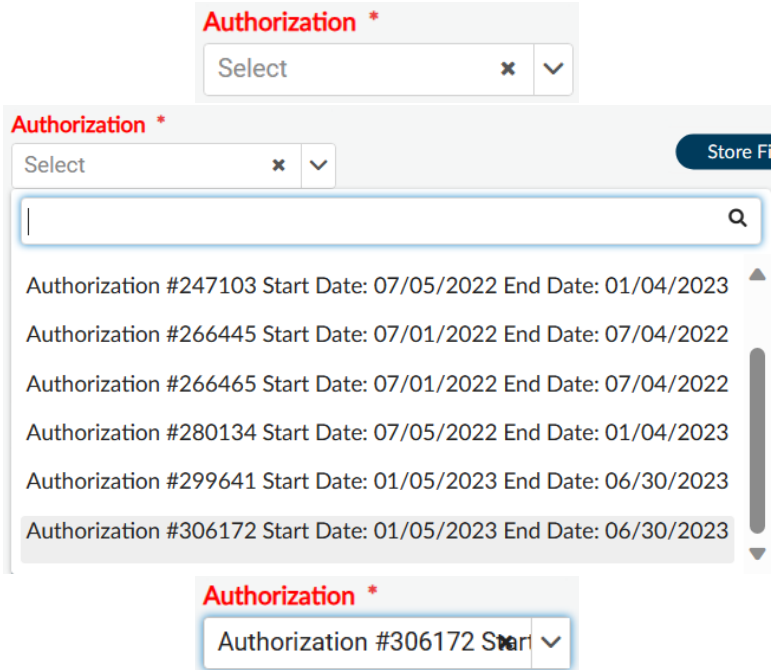
Authorization

Other

Provider

File Type *

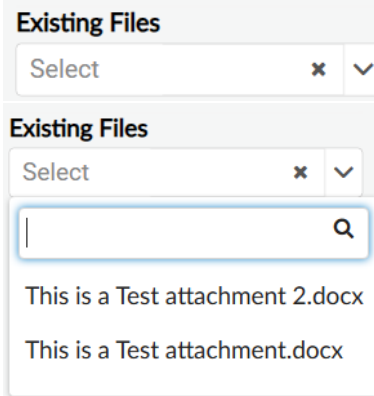
From the “Authorization” dropdown select the desired authorization number



The image shows three instances of the 'Authorization' dropdown menu. The top one is closed, showing 'Select'. The middle one is open, displaying a search bar and a list of six authorization entries with their respective start and end dates. The bottom one is closed, showing 'Authorization #306172 Start'.

Authorization #	Start Date	End Date
247103	07/05/2022	01/04/2023
266445	07/01/2022	07/04/2022
266465	07/01/2022	07/04/2022
280134	07/05/2022	01/04/2023
299641	01/05/2023	06/30/2023
306172	01/05/2023	06/30/2023

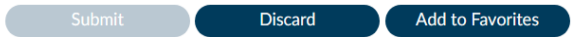
Using the “Existing Files” dropdown Users will see the uploaded file for the selected Authorization.



The image shows two instances of the 'Existing Files' dropdown menu. The top one is closed, showing 'Select'. The bottom one is open, displaying a search bar and a list of two files: 'This is a Test attachment 2.docx' and 'This is a Test attachment.docx'.

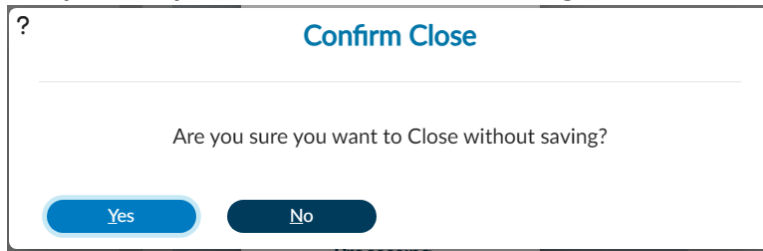
The User must select the “Discard” button at the top of the form.

PROVIDER FILE ATTACH



The image shows three buttons: 'Submit', 'Discard', and 'Add to Favorites'. The 'Discard' button is highlighted in dark blue.

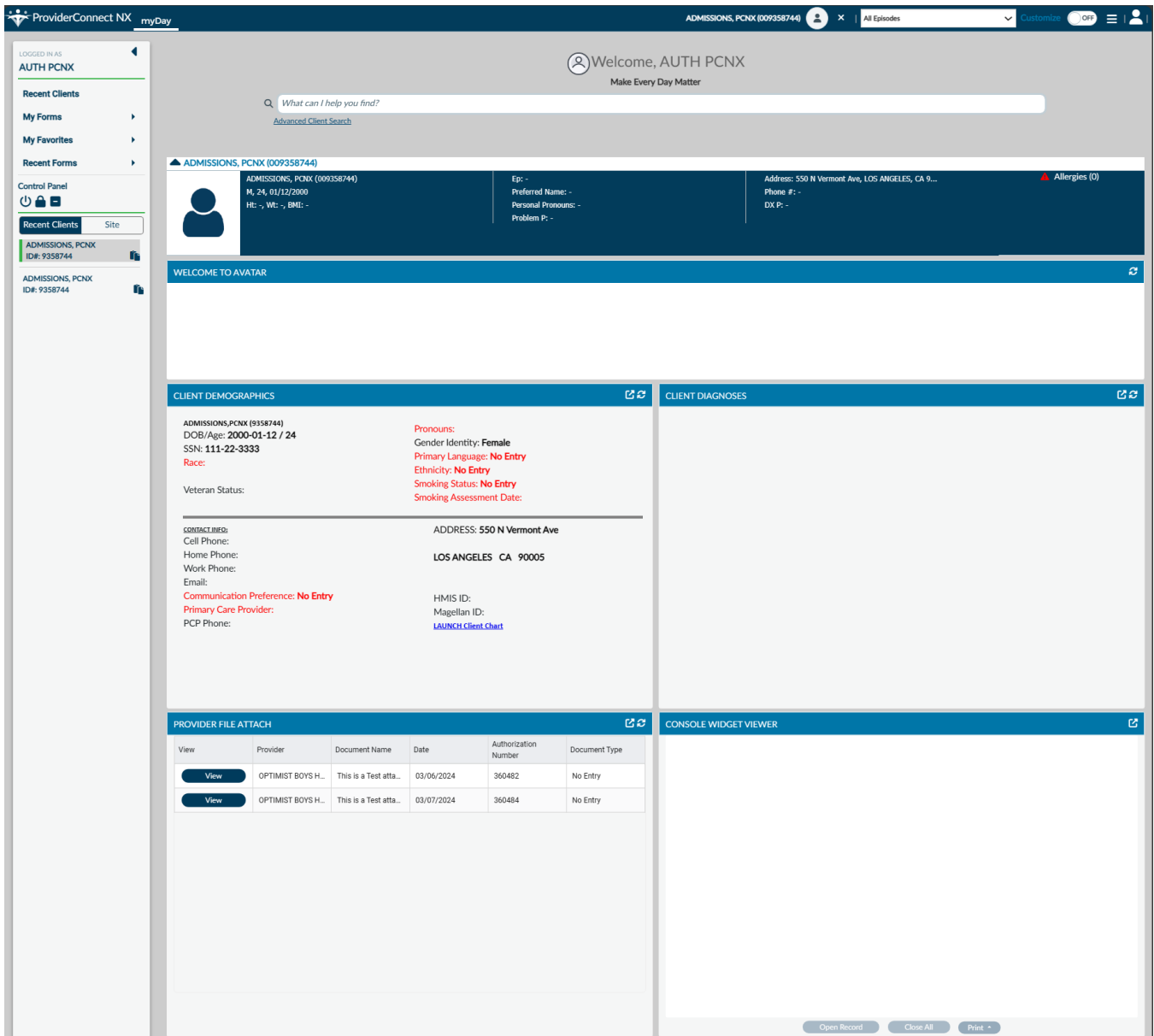
The system will ask the User “Are you sure you want to Close without saving?”. The User will select the “Yes” button.




This will navigate the User back to the “Home Screen”.

To View Uploaded Attachments (Files)

From the “HOME” screen




Users can view the uploaded documents using the **“Provider File Attach”** widget.

PROVIDER FILE ATTACH 					
View	Provider	Document Name	Date	Authorization Number	Document Type
View	OPTIMIST BOYS H...	This is a Test atta...	03/06/2024	360482	No Entry
View	OPTIMIST BOYS H...	This is a Test atta...	03/07/2024	360484	No Entry





In the **“Provider File Attach”** widget Users must click the **“View”** button next to the document to view.

View	OPTIMIST BOYS H...	This is a Test atta...	03/06/2024	360482	No Entry
View	OPTIMIST BOYS H...	This is a Test atta...	03/07/2024	360484	No Entry

Once selected the document will be viewed the **“Console Widget Viewer”** widget.

CONSOLE WIDGET VIEWER


This is a Test attachment 2.pdf
✕

1 of 1

This is a Test!

This is a Test!

This is a Test!

This is a Test!

This is a Test!

This is a Test!

This is a Test!

This is a Test!

This is a Test!

This is a Test!

This is a Test!

Open Record

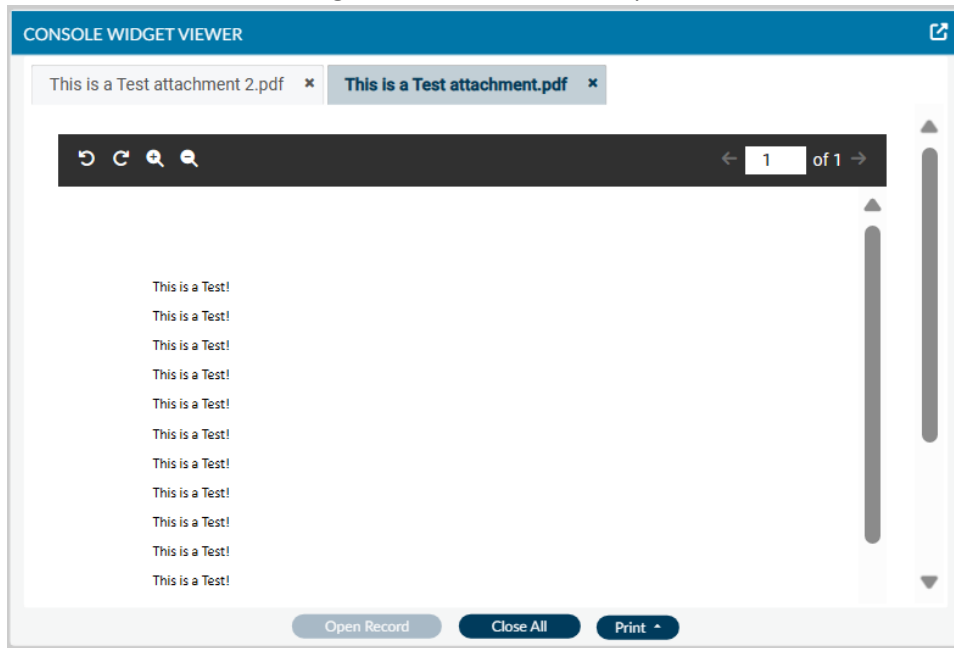
Close All

Print ^

Select another file to view in the **“Console Widget Viewer”**.

View	OPTIMIST BOYS H...	This is a Test atta...	03/06/2024	360482	No Entry
View	OPTIMIST BOYS H...	This is a Test atta...	03/07/2024	360484	No Entry

Users will see the fill name in the “**Console Widget Viewer**” across the top of the viewer.



ProviderConnect NX: Plan Communication

From the “Home” screen

The screenshot displays the 'myDay' interface for 'AUTH PCNX'. The top navigation bar includes the logo, 'myDay', and user controls like 'Customize' and 'OFF'. A search bar with the placeholder 'What can I help you find?' and a link to 'Advanced Client Search' is present. The main content area is divided into four panels: 'CLIENT DEMOGRAPHICS', 'CLIENT DIAGNOSES', 'PROVIDER FILE ATTACH', and 'CONSOLE WIDGET VIEWER'. The 'CLIENT DEMOGRAPHICS' panel contains fields for personal and contact information. The 'PROVIDER FILE ATTACH' panel features a table with columns for document details.

LOGGED IN AS
AUTH PCNX

Recent Clients
My Forms
My Favorites
Recent Forms

Control Panel
Recent Clients Site

Welcome, AUTH PCNX
Make Every Day Matter

What can I help you find?
[Advanced Client Search](#)

CLIENT DEMOGRAPHICS

ID:
DOB/Age: /
SSN:
Race:
Veteran Status:

Pronouns:
Gender:
Primary Language:
Ethnicity:
Smoking Status:
Smoking Assessment Date:

CONTACT INFO: ADDRESS:
Cell Phone:
Home Phone:
Work Phone:
Email:
Communication Preference:
Primary Care Provider:
PCP Phone:

HMIS ID:
Magellan ID:
[LAUNCH Client Chart](#)

PROVIDER FILE ATTACH

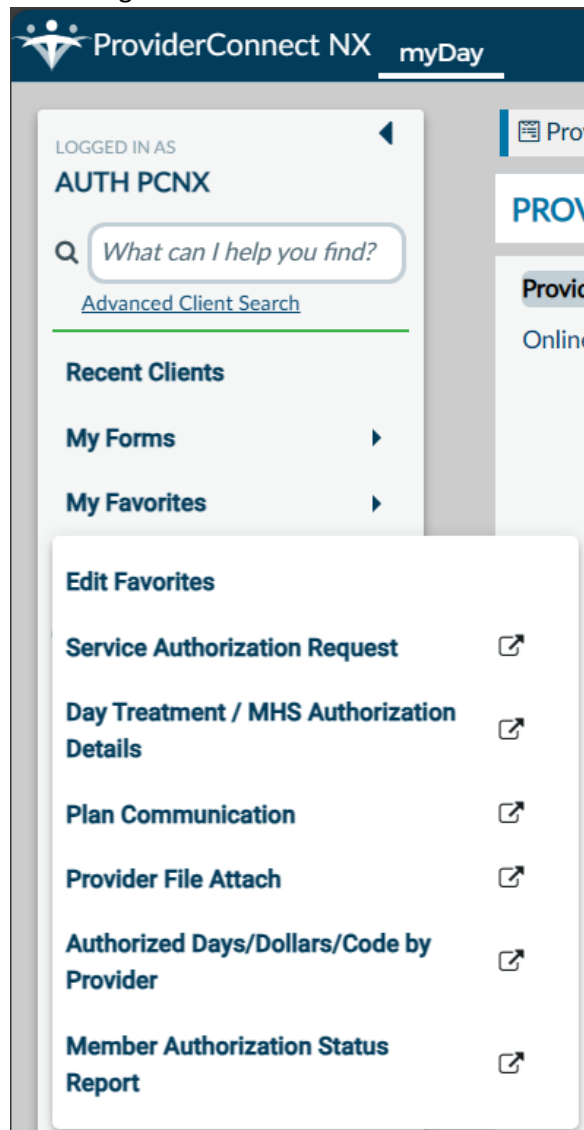
View	Provider	Document Name	Date	Authorization Number	Document Type
------	----------	---------------	------	----------------------	---------------

CLIENT DIAGNOSES

CONSOLE WIDGET VIEWER

Open Record Close All Print

Using the “My Favorites” tab in the TASK navigation select “Plan Communication” to navigate to that form.



The User will be navigated to the “Fast Service Entry Submission” form.

ProviderConnect NX myDay

LOGGED IN AS AUTH PCNX

PCNX TEST (1. Form)

PCNX TEST (003334798)

TEST.PCNX (003334798)
F: 24, 01/01/2000
Ht: -, Wt: -, BMI: -

Ep: -
Preferred Name: -
Personal Pronouns: -
Problem P: -

Address: 550 VERMONT AVE, LOS ANGELES, C...
Phone #: -
DX P: -

Allergies (0)

PLAN COMMUNICATION

Submit Discard Add to Favorites

Plan Communication

Authorization Number *

DMH/CAU Communication

Yes

Provider Communication

Yes

Initiator Name

Date *

Intended Recipient

Time

Current Time H M AM/PM

DMH/CAU Communication Type

- Request Updated Care Plan
- Request Updated SNA
- Final Disposition
- Request Supplemental Assessment Form
- Request ICC Eligibility Form
- Request Full Assessment/Recent Addendums
- Request CANS
- Other

Provider Communication Type

- New Submission
- Updated Care Plan
- Updated Service Necessity Assessment
- Discharge Notification
- Supplemental Assessment Form
- ICC Eligibility Form
- Full Assessment/Recent Addendum(s)
- CANS
- Other

Comment

NOTE: All field names that are in **RED** with **RED Asterisk** are required fields and must be completed before claims can be submitted. There are other fields, that are not marked as “Required” but are needed to complete an “Authorization Request”.

Enter the “Authorization Number”

Authorization Number *	Authorization Number *
<input type="text"/>	1318

Select “YES” box for Provider Communication

Provider Communication	Provider Communication
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes

Enter the “Initiator Name”. Users can enter either the name of the initiator or enter their ID number.

Initiator Name	<input type="text"/>	Q
Initiator Name	21180	Q
Results	ALYSSA BRAY (21180)	
Initiator Name	ALYSSA BRAY (21180)	Q

Enter the “Date” for the communication.

Date *	Date *
<input type="text"/>	01/04/2024

“Intended Recipient” must be filled out if this message is going to a specific person.

NOTE: If this person is unknown leave this field blank.

Intended Recipient	Intended Recipient
<input type="text"/>	Jane Doe

Enter the time by typing in the time or selecting the “Current Time” button.

Time	Time
<input type="text"/>	02:42 PM

Check the box under “Provider Communication” for the reason communication is being sent.

Provider Communication Type	Provider Communication Type
<input type="radio"/> New Submission	<input checked="" type="radio"/> New Submission
<input type="radio"/> Updated Care Plan	<input type="radio"/> Updated Care Plan
<input type="radio"/> Updated Service Necessity Assessment	<input type="radio"/> Updated Service Necessity Assessment
<input type="radio"/> Discharge Notification	<input type="radio"/> Discharge Notification
<input type="radio"/> Supplemental Assessment Form	<input type="radio"/> Supplemental Assessment Form
<input type="radio"/> ICC Eligibility Form	<input type="radio"/> ICC Eligibility Form
<input type="radio"/> Full Assessment/Recent Addendum(s)	<input type="radio"/> Full Assessment/Recent Addendum(s)
<input type="radio"/> CANS	<input type="radio"/> CANS
<input type="radio"/> Other	<input type="radio"/> Other

Enter the message to be sent in the “Comments” field.

Comment

Comment

This is a Test! 123456 Test is complete.

Once all fields have been completed scroll to the top of the form and select the “Submit” button. This will navigate the User back to the “Home Screen”.

PLAN COMMUNICATION Submit Discard Add to Favorites

Users can view all “Plan Communications” in the pre-display by going back to the form.

Opening: Plan Communication

Home > Select Client >

✓ Selected Client : TEST,PCNX (003334798)

Select Record

Date ↕	Authorization Number ↕	Initiator Name ↕	Intended Recipient ↕	Time ↕
01/04/2024	1318			
01/04/2024	1318	BRAY, ALYSSA	Jane Doe	02:42 PM

Add Edit Delete Cancel

If the User needs to create another message click the “Add” button and repeat the process.

ProviderConnect NX: How to View Authorization Reports

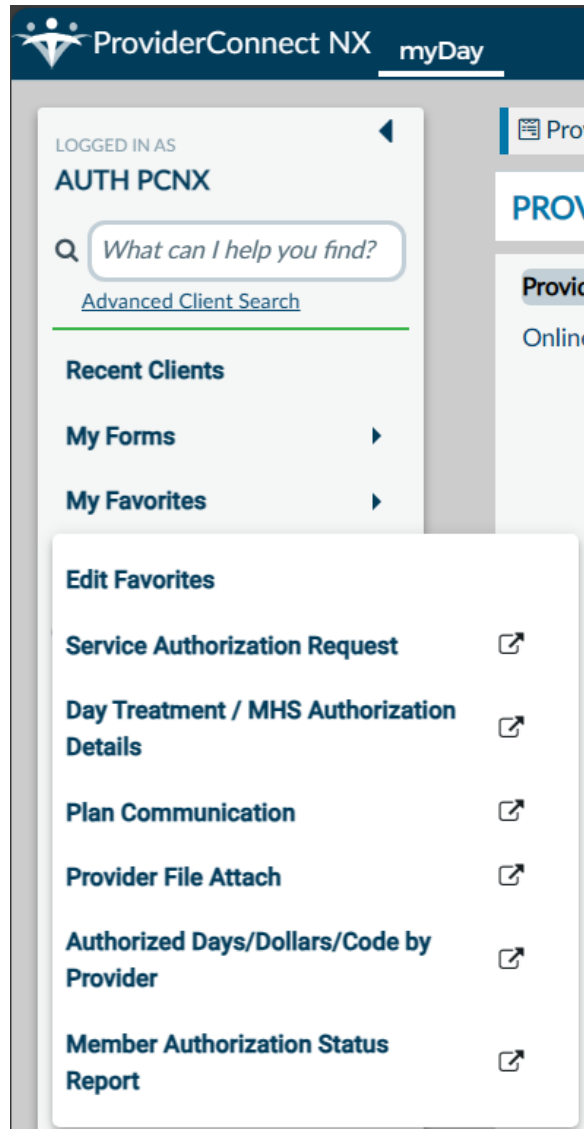
From the “Home” screen

The screenshot displays the ProviderConnect NX Home screen. The top navigation bar includes the logo, 'myDay', and user settings. The main content area is divided into several sections:

- CLIENT DEMOGRAPHICS:** Displays personal information such as DOB/Age, SSN, Race, Pronouns, Gender, Primary Language, Ethnicity, Veteran Status, and Smoking Assessment Date.
- CLIENT DIAGNOSES:** A section for viewing client diagnoses, currently empty.
- PROVIDER FILE ATTACH:** A table listing attachments with columns for View, Provider, Document Name, Date, Authorization Number, and Document Type.
- CONSOLE WIDGET VIEWER:** A section for viewing console widgets, currently empty.

At the bottom of the console widget viewer, there are buttons for 'Open Record', 'Close All', and 'Print'.

Using the “My Favorites” tab in the TASK navigation select “Member Authorization Status Report” to navigate to that form.



Complete all required fields in RED.

The image shows a screenshot of the 'MEMBER AUTHORIZATION STATUS REPORT' form. The form title is 'MEMBER AUTHORIZATION STATUS REPORT' and it has three buttons: 'Process', 'Discard', and 'Add to Favorites'. On the left, there is a sidebar with 'Member Authorization Status Report'. The main form area has a dropdown menu. Below the dropdown, there are three input fields: 'Select PROVID *' (a search box), 'Date Range Start Date *' (a date picker), and 'Date Range End Date *' (a date picker). Below these, there is a 'Member ID:' label and a search box. The asterisks and the word 'Required' are highlighted in red in the original image.

NOTE: All field names that are in RED with RED Asterisk are required fields and must be completed before the report can be processed. There are other fields, that are not marked as “Required” that can also be complete to narrow the data in the report.

Enter the Users Provider number or enter the Provider name in the “Select PROVID” field.

Select PROVID *

Select PROVID *

Results

OPTIMIST YOUTH HOMES DBA BOYS HOME (781)

Select PROVID *

Results

OPTIMIST YOUTH HOMES DBA BOYS HOME (781)

Select PROVID *

Enter the start and end date for the range of the report.

Date Range Start Date *

Date Range End Date *

Date Range Start Date *

Date Range End Date *

Scroll to the top of the form and select the “Process” button.

MEMBER AUTHORIZATION STATUS REPORT

Process Discard Add to Favorites

A pop-up window will open, and the report will appear.

[Print Report](#) [Export](#)

SAP CRYSTAL REPORTS®

Find... 1 of 1 100%

Main Report

Member Authorization Status Report

Run Date 1/4/2024

Member ID	Prov ID	Provider	Plan ID	Fund Src ID	Request Status	Begin Date	End Date	Auth No	Funding Source	Est Liability	Used Amount	Rem Liability
781		OPTIMIST YOUTH HOMES DBA BOYS HOME	45	131	Approved	7/1/2022	6/30/2023	P11339	Specialized Foster Care DCFS MAT Non-MC	115,500	0	115,500
781		OPTIMIST YOUTH HOMES DBA BOYS HOME	4801	133	Approved	7/1/2022	6/30/2023	P11340	Specialized Foster Care MAT MC	429,000	0	429,000
781		OPTIMIST YOUTH HOMES DBA BOYS HOME	5001	134	Approved	7/1/2022	6/30/2023	P11341	Specialized Foster Care Wraparound MC	944,000	0	944,000
781		OPTIMIST YOUTH HOMES DBA BOYS HOME	12	102	Approved	7/1/2022	6/30/2023	P11342	DMH Mental Health Services (CGF) MC	2,186,593	0	2,186,593
781		OPTIMIST YOUTH HOMES DBA BOYS HOME	19	111	Approved	7/1/2022	6/30/2023	P11343	MHSA FSP Non-MC	24,114	0	24,114
781		OPTIMIST YOUTH HOMES DBA BOYS HOME	25	112	Approved	7/1/2022	6/30/2023	P11344	MHSA FSP MC	865,488	0	865,488
781		OPTIMIST YOUTH HOMES DBA BOYS HOME	300	54	Approved	7/1/2022	6/30/2023	P11345	MHSA Outpatient Care Services MC	2,275,408	0	2,275,408
781		OPTIMIST YOUTH HOMES DBA BOYS HOME	41	115	Approved	7/1/2022	6/30/2023	P11346	MHSA PEI Non-MC	37,208	0	37,208
781		OPTIMIST YOUTH HOMES DBA BOYS HOME	42	116	Approved	7/1/2022	6/30/2023	P11347	MHSA PEI MC	1,281,027	0	1,281,027
2695977	781	OPTIMIST YOUTH HOMES DBA BOYS HOME	251	116	Pending	2/10/2023	2/15/2023	1316	MHSA PEI MC	0	0	0

Users can either print the report using the “**Print Report**” button or using the “**Export**” button. Users can export the report to their computer to open in an Excel document.

User can also run the report for just one client by entering the Client's first and last name or entering the **Client ID** number.

Member ID:

Using the client's name may display multiple results. To avoid this, it is best for Users to only use the **Member ID (Client ID)** to locate clients.

Member ID:

Using the **Member ID (Client ID)** will only result in one result.

NOTE: This is the suggested method to search for a client in **ProviderConnect NX**.


Member ID:

Name	Date Of Birth	Client's Address - Street
ADMISSIONS,PCNX (9358744)	01/12/2000	550 N Vermont Ave

◀ ◁ 1 ▷ ▶

Member ID:

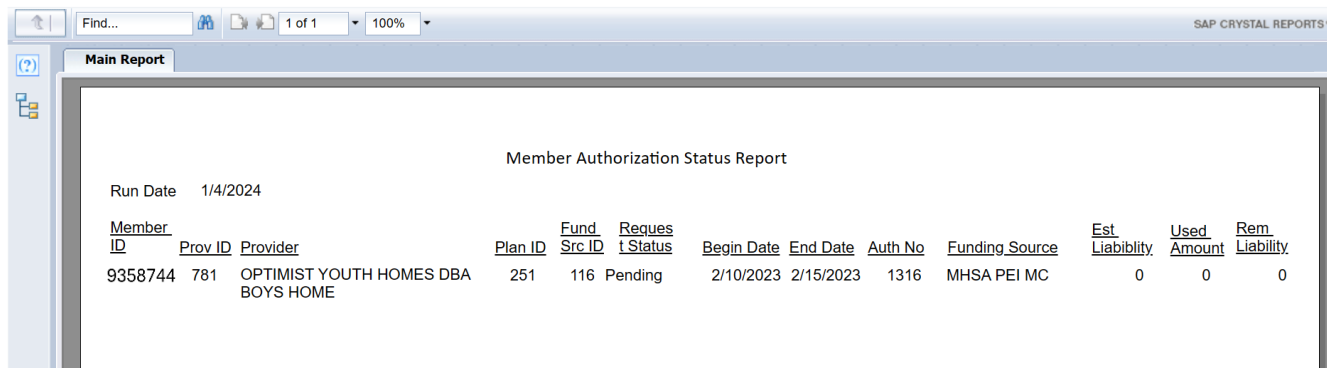
Scroll to the top of the form and select the **“Process”** button.

MEMBER AUTHORIZATION STATUS REPORT

[Process](#) [Discard](#) [Add to Favorites](#)

A pop-up window will open, and the report will appear.

[Print Report](#) [Export](#)



Member Authorization Status Report

Run Date 1/4/2024

<u>Member ID</u>	<u>Prov ID</u>	<u>Provider</u>	<u>Plan ID</u>	<u>Fund Src ID</u>	<u>Reques t Status</u>	<u>Begin Date</u>	<u>End Date</u>	<u>Auth No</u>	<u>Funding Source</u>	<u>Est Liability</u>	<u>Used Amount</u>	<u>Rem Liability</u>
9358744	781	OPTIMIST YOUTH HOMES DBA BOYS HOME	251	116	Pending	2/10/2023	2/15/2023	1316	MHSA PEI MC	0	0	0

When the User closes the report, the User will see a message asking to select **“Yes”** if the User wants to stay on the reports form or **“No”** to go back to the **“Home Screen”**.

? **Form Return**

Member Authorization Status Report has completed. Do you wish to return to form?

[Yes](#) [No](#)