

End User Manual for Creating an Admission Process (FFS1)

ProviderConnect NX



Los Angeles County
Department of Mental Health
JAN 2026 v5.0

Table of Contents

Forms and Instructions for the process to apply for access to ProviderConnect NX	2
Introduction to Avatar NX for Service Providers	3
Access and Limitations	3
Links and Numbers	3
Provider Connect NX: Login using Enterprise Credentials	4
Provider Connect NX: How to Add a Widget	9
Provider Connect NX: How to Create Admissions	12
ProviderConnect NX: Diagnosis	22
ProviderConnect NX: How to Add an Attachment File.....	30
ProviderConnect NX: How to View, Print, or Save uploaded files	35
ProviderConnect NX: How to Add a Discharge.....	41

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 are required to onboard a designated 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.

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

Introduction to Avatar NX for Service Providers

Avatar NX is an Electronic Health Record System (EHRS) that the Los Angeles County Department of Mental Health (LACDMH) has 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.

Access and Limitations

In this manual, Users will be shown how to search for clients associated with **ProviderConnect NX**, enter clients that have not been associated with **ProviderConnect NX**, create an Admission for clients, and set up Financial Eligibility for clients.

- Once your request for access to **ProviderConnect NX** is approved, a User ID and system-generated password will be issued to the designated users by LACDMH. This initial password must be changed upon the first login to the application.
- **ProviderConnect NX** is a browser-based application that can be accessed using a web address Uniform Resource Locator (URL) <https://lapcnx.netsmartcloud.com/#/home>.
- New and current Users will use DMH Multi Factor Authentication (MFA) login to access **ProviderConnect NX**.
- Once an Admission is submitted via **ProviderConnect NX**, designated users will not be able to make any changes in the submitted admission.

If changes or updates are required, Users will need to complete a HEAT ticket to have changes or updates completed in **ProviderConnect NX**. If Users do not have access to HEAT, Users can call the Help Desk. The Help Desk can assist Users in creating a Heat ticket or gain access to HEAT. So, they can create tickets on their own.

Links and Numbers

Help Desk – (213)351-1335

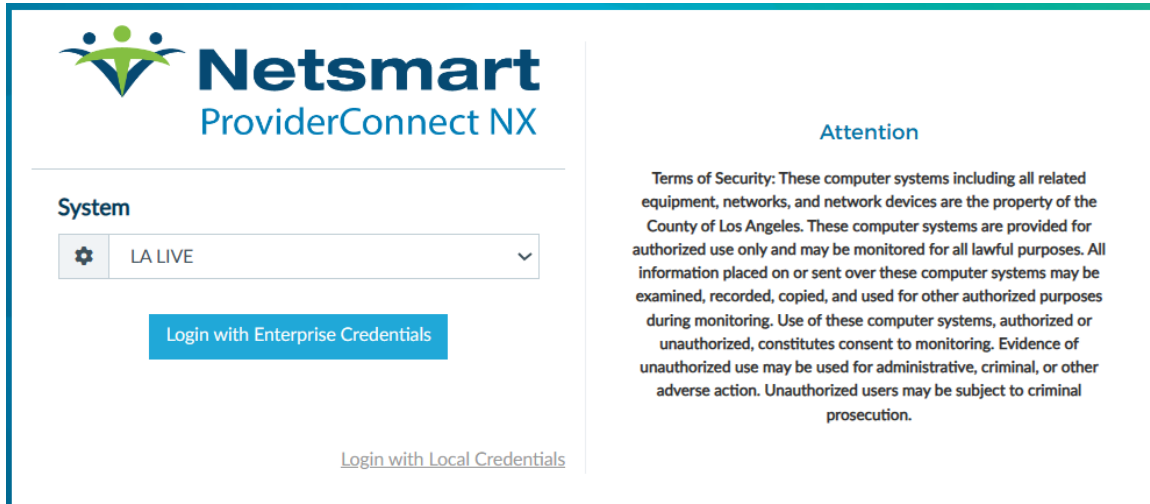
HEAT ticket System - <https://lacdmhheat.saasit.com>

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

Provider Connect NX: Login using 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 Users 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

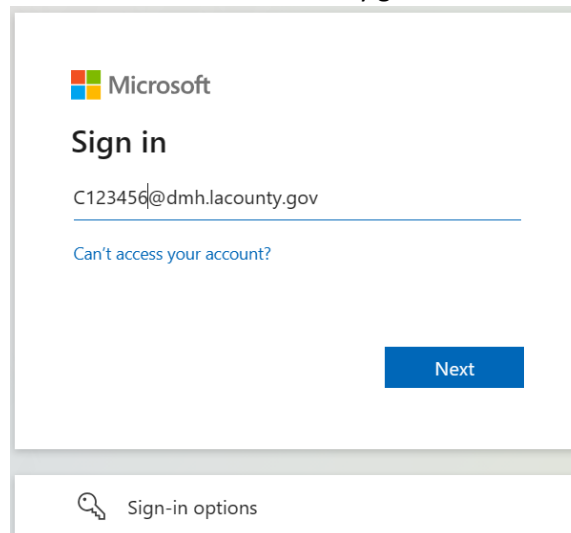
Login with Enterprise Credentials

[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 their “**C**” number with their @dmh.lacounty.gov email address and click the “**Next**” button, or



Microsoft

Sign in

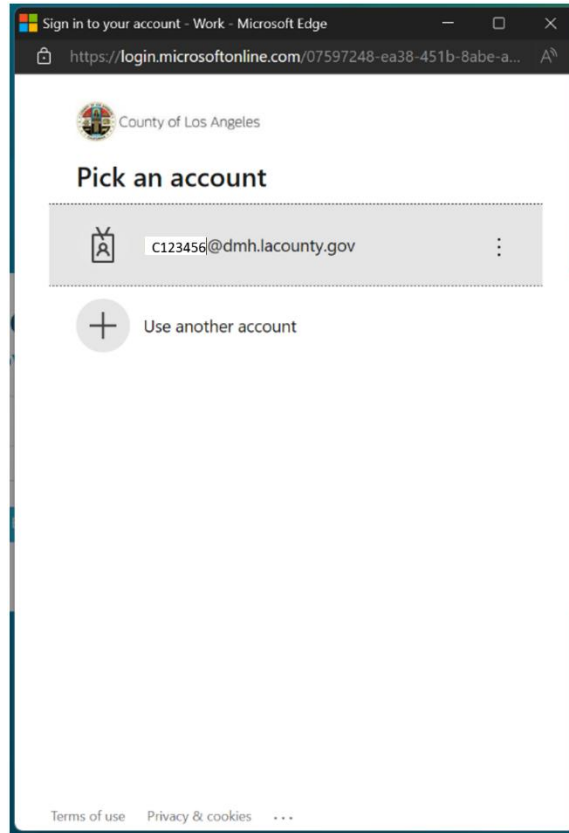
C123456@dmh.lacounty.gov

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

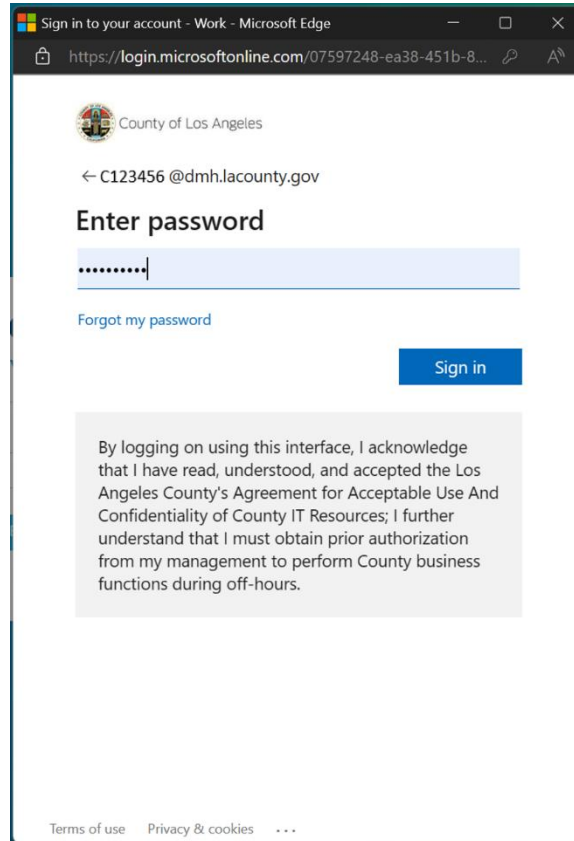
Next

Sign-in options

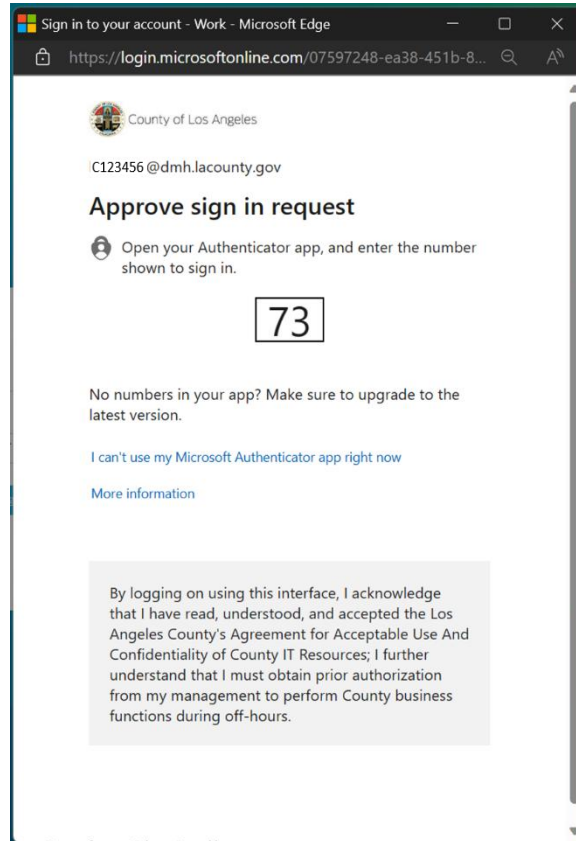
select the LA County email address on the "Pick an account" pop-up screen. This will navigate the User to the "Enter Password" pop-up screen.



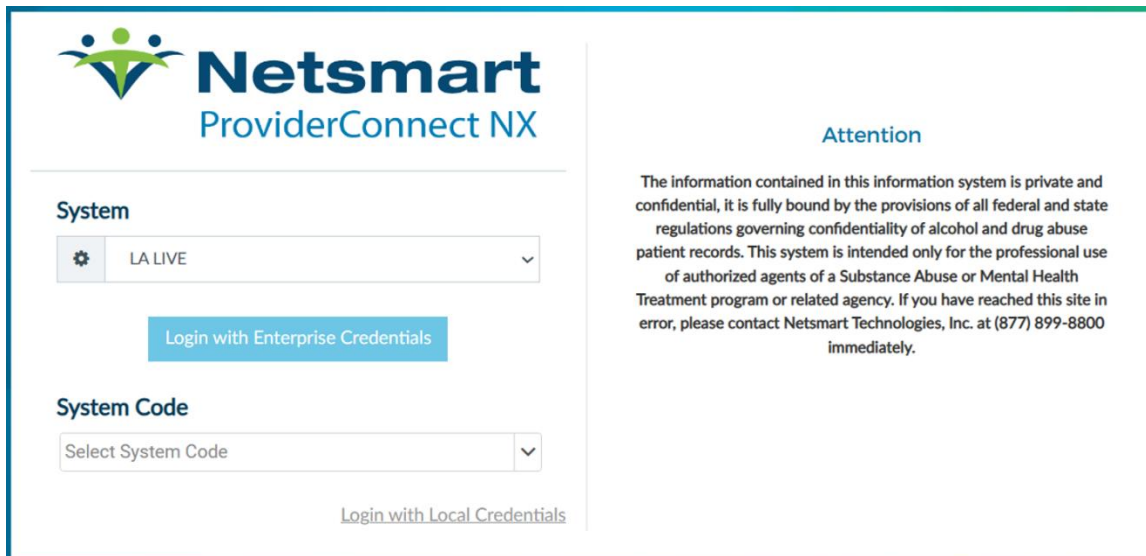
The User will enter their password and click the **“Sign in”** button. This will navigate the User to the Netsmart **ProviderConnect NX** login.



The 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.

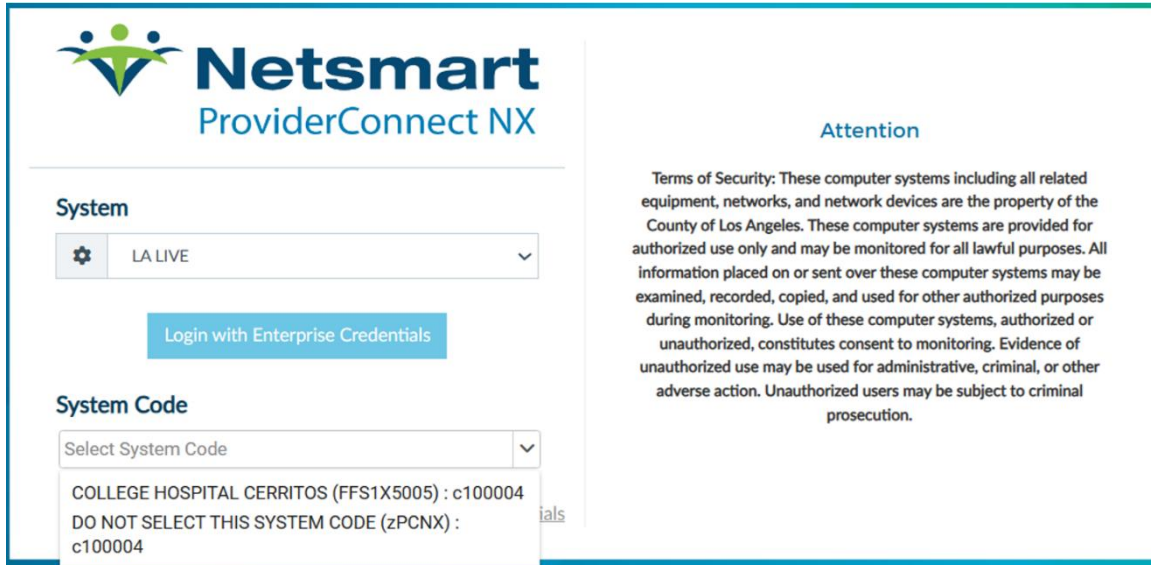


Using the “**System Code**” dropdown, select the code for the Users agency. The User will only see the system codes they are authorized to view to access **ProviderConnect NX**.

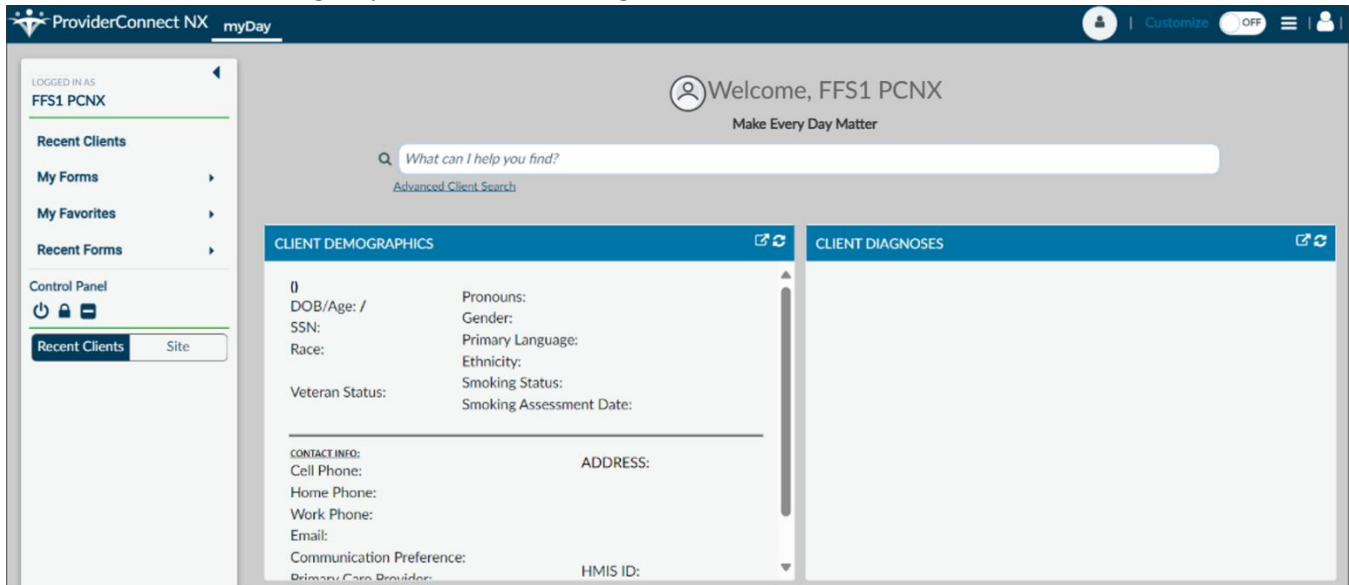


Click the arrow to open the dropdown menu for “System Code”. The User must select their Agency name from the dropdown.

NOTE: DO NOT SELECT THE “DO NOT SELECT THIS SYSTEM CODE”



When the User selects their Agency name, this will navigate the User to the ProviderConnect NX “Home Screen”.

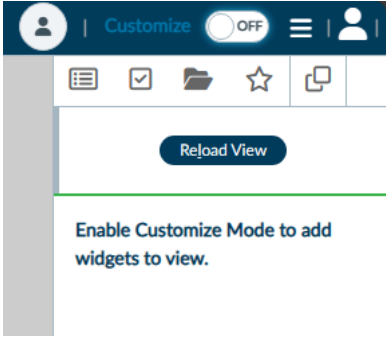


Provider Connect NX: How to Add a Widget

From the ProviderConnect NX “Home Screen”.




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

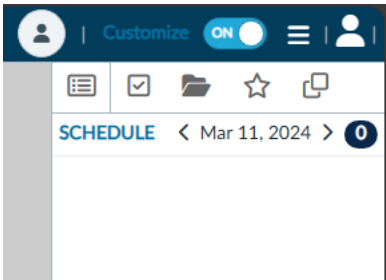


Turn the “Customize” selector from the “OFF” selection to the “ON” selection.



Select the icon  to open the side bar.

Select the icon  to open the widget options.



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

The screenshot shows a widget options menu with a top navigation bar containing icons for a list, a checkmark, a folder, a star, and a refresh icon. Below the navigation bar are two buttons: "Reload View" and "Revert Changes". A checkbox labeled "Include Client Information header in view" is present. The menu is organized into three sections: "CLIENT", "CONSOLE", and "MISC". Under "CLIENT", there are four widgets: "Claim Service Information", "Pending Service Authorizations", "Provider File Attach", and "Service Authorization Information". Under "CONSOLE", there is one widget: "Console Widget Viewer". Under "MISC", there are two widgets: "Financial Eligibility" and "Systemwide Annual Liability". Each widget has a small square icon with a refresh symbol on its left side.

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

The screenshot shows a home screen on the left with a "Provider File Attach" widget. On the right, a larger view of the widget is shown, featuring a blue header with the text "PROVIDER FILE ATTACH" and a refresh icon. Below the header is a table with the following columns: View, Provider, Document Name, Date, Authorization Number, and Document Type.

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

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

The screenshot shows a home screen on the left with a "Console Widget Viewer" widget. On the right, a larger view of the widget is shown, featuring a blue header with the text "CONSOLE WIDGET VIEWER" and a refresh icon. Below the header is a table with the following columns: View, Provider, Document Name, Date, Authorization Number, and Document Type.

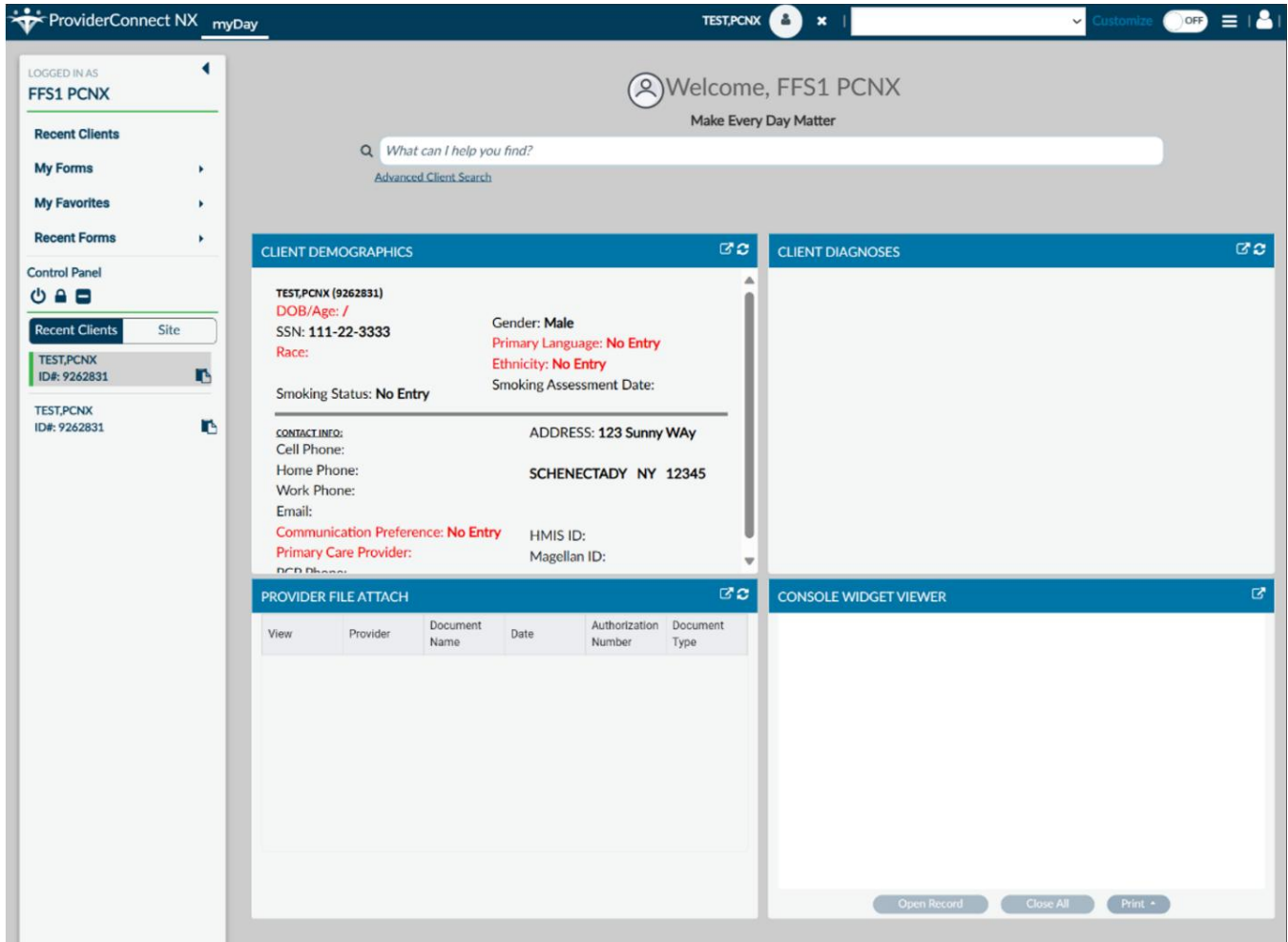
View	Provider	Document Name	Date	Authorization Number	Document Type
------	----------	---------------	------	----------------------	---------------

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



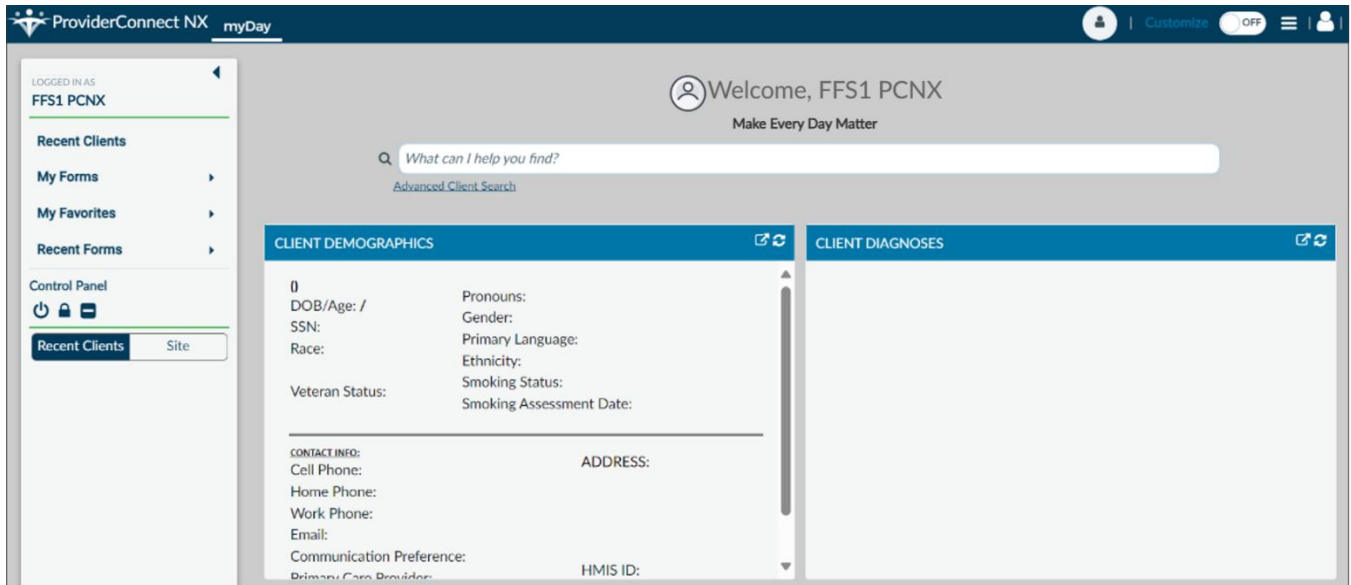
Select the icon  to close the sidebar.

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

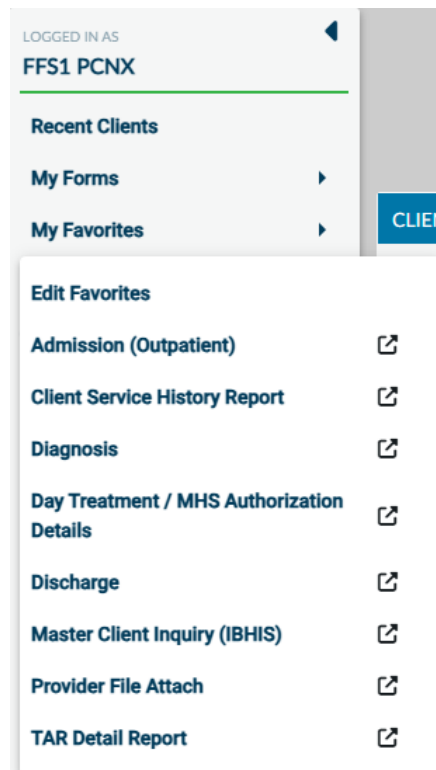


Provider Connect NX: How to Create Admissions

On the Admission form, Users will create a new or ongoing client admission for their clients in **ProviderConnect NX**. From the **“Home Screen”**.



The User can go to their favorites in the TASK Navigation and select **“Admission (Outpatient)”** from the dropdown menu.



The “Client Search” allows the User to add new client admissions or search clients who may have an existing admission within the system from other providers.

Opening: Admission (Outpatient)

Home > Select Client >

Client Search

Last Name First Name Sex

Social Security Number Date of Birth

DMH Client ID Alias Subscriber Client Index Number Alias (Additional Text)

Alias (Additional Text)

Info	Score	Name	ID	Date Of Birth	Client's Address - City	Client's Address - Zipcode	Alias	Admitting Practitioner
------	-------	------	----	---------------	-------------------------	----------------------------	-------	------------------------

Enter the client data in the “Client Search” section.

Client Search

Last Name First Name Sex

Social Security Number Date of Birth

DMH Client ID Alias Subscriber Client Index Number Alias (Additional Text)

Alias (Additional Text)

NOTE: Entering more information on a client greatly narrows the search results.

Client Search

Last Name: First Name: Sex: x v

Social Security Number: Date of Birth:

DMH Client ID: Alias: Subscriber Client Index Number: Alias (Additional Text):

Alias (Additional Text):

Click the **“Search”** button to see search results.

Info	Score	Name	ID	Date Of Birth	Client's Address - City	Client's Address - Zipcode	Alias	Admitting Practitioner
Info	115	DEVITO,ANGELO	2346274	06/15/1966	MONTEREY PARK	91755		
Info	100	FUNES,LIDIA	4006319	06/07/2001	SUN VALLEY	91352-0000		159771
Info	76	TEST,PLAN	3139103	01/01/1975	LOS ANGELES	90005	TESTYYY	001149

If the search results are **“No matches found,”** then click the **“New Client”** button.

A pop-up box will appear asking if the User wants to **“Auto Assign ID Number”** for the new client. The User will always select the **“Yes”** button.

? **Client**

Auto Assign Next ID Number?

The User will be navigated to the “Admission (Outpatient)” form.

NEW Client(1 Form)

NEW Client

(003334802)
-
Ht: -, Wt: -, BMI: -

Ep: 1 :
Preferred Name: -
Personal Pronouns: -
Problem P: -

Address: -
Phone #: -
DX P: -

Allergies (0)

ADMISSION (OUTPATIENT)

Submit Discard Add to Favorites

Admission

- Identification and Treatment Information
- Treatment Information
- Other Client Information
- Compliance Indicators

Demographics

- Client Demographics
- Alias

Other Client Data

- Update Client Data
- Online Documentation

Identification and Treatment Information

Episode Number: 1

Admission Date * [] [T] [Y] [] Current Time

Admission Time * [] Current Time

Client Name * [ADMISSIONS.PCN]

Program Of Admission * [Select]

Type Of Admission * [Select]

Source Of Admission [Select]

Admitting Practitioner * [] [Q]

Practitioner Type [Select]

Sex *
 Female
 Male
 Unknown

Date Of Birth [01/12] [T] [Y] [] Age [23]

Social Security Number [] Alternate Social Security Number []

Other Client Information

Client's Living Arrangements (CSI) [Select]

Compliance Indicators

Received Copy Of Client Rights
 Yes No

Admission Note [] [Q]

NOTE: All field names in **RED** with **RED Asterisk** are required fields and must be completed before the admission can be submitted. Other fields are not marked as “Required”. They are needed to complete the admission.

Enter the “Admission Date” and the “Admission Time”

Admission Date * [01/05/2024] [T] [Y] [] Current Time

Admission Time * [03:43 PM] Current Time

Using the dropdown menu, select the **“Program of Admission”**.

The image shows three sequential screenshots of a 'Program Of Admission' dropdown menu. The first screenshot shows the menu with the 'Select' option highlighted. The second screenshot shows the search bar with the text 'LE00502 Harborucla' entered. The third screenshot shows the menu with 'LE00502 Harborucla' selected.

Using the dropdown menu, select the **“Type of Admission”**.

The image shows three sequential screenshots of a 'Type Of Admission' dropdown menu. The first screenshot shows the menu with the 'Select' option highlighted. The second screenshot shows the search bar with the text 'First Admission' entered. The third screenshot shows the menu with 'First Admission' selected.

In the "Admitting Practitioner" field, enter either the Practitioner's Name or the Practitioner's Number.

Admitting Practitioner *

Admitting Practitioner *

Practitioner Type

Practitioner	NPI Number	Taxonomy Code	Program Association
			5000I+5002I
			+5005I+5006
			I+5007I+500
			7K+5009I+50
			11I+5012I+5
			014I+5019I+
			5020I+5022I
			+5024I+5026
			I+5029I+503
			1I+5035I+50
			38I+5039I+5
			041I+5042I+
			5043I+5044I
			+5046I+5047
			I+5048I+504
FFS			9I+5050I+55
MEDICAL_DO			14I+5532I+5
CTOR			547I+5551I+
(001149)			5552I+5553I
			+5554I+5555
			I+5558I+556
			0I+5563I+55
			65I+5566I+5
			567I+5568I+
			5569I+5570I
			+5599I+5801
			I+5802I+580
			4I+5805I+58
			08I+5810I+5
			811I+5812I+
			5815I+5817I
			+5818I+5819
			I

Admitting Practitioner *

Once client data has been entered, the User should review the form to verify that all required fields have been completed and are correct.

NEW Client

(003334802)
Ht: -, Wt: -, BMI: -

Ep: 1:
Preferred Name: -
Personal Pronouns: -
Problem P: -

Address: -
Phone #: -
DX P: -

Allergies (0)

ADMISSION (OUTPATIENT) Submit Discard Add to Favorites

Admission

- Identification and Treatment Information
- Other Client Information
- Compliance Indicators

Demographics

- Client Demographics
- Alias

Other Client Data

- Update Client Data
- Online Documentation

Identification and Treatment Information

Episode Number: 1

Client Name: ADMISSIONS,PCNX

Sex: Female Male Unknown

Date Of Birth: 01/12/2000 Age: 23

Admission Date: 01/05/2024 Admission Time: 03:43 PM Current Time

Program Of Admission: LE00502 Harborucla

Type Of Admission: First Admission

Source Of Admission: Select

Admitting Practitioner: FFS MEDICAL_DOCTOR (001149)

Practitioner Type: Select

Social Security Number: Alternate Social Security Number:

Other Client Information

Client's Living Arrangements (CSI): Select

Compliance Indicators

Received Copy Of Client Rights: Yes No

Admission Note:

In the TASK Navigation on the left, select the "Demographics" tab.

ADMISSION (OUTPATIENT) Submit Discard Add to Favorites

Admission
Identification and Treatment Information
Other Client Information
Compliance Indicators
Demographics
Client Demographics
Alias
Other Client Data
Online Documentation

Client Demographics

Client Last Name: ADMISSIONS
Client First Name: PCNX
Client Middle Name:
Suffix:
 Sr Jr III IV V VI
Prefix:
Gender Identity:
 Male-to-Female (MTF)/Transgender Female/Trans Woman
 Female-to-Male (FTM)/Transgender Male/Trans Man
 Genderqueer, neither exclusively male nor female
 Female
 Male
 Chose not to disclose
 Additional gender category or other, please specify
Gender Identity (Please Describe):
Personal Pronouns (will show on the banner):
Sexual Orientation:
 Straight or heterosexual
 Lesbian, gay or homosexual
 Bisexual
 Chose Not To Disclose
 Something else, please describe
 Do Not Know
Sexual Orientation (Please Describe):
Address Where Client Lives/Stays (Enter "Homelessness" if applicable):
Address - Street:
Address - Street 2:
Address - Zipcode:
Address - State:
Residential Address Start Date:
Address - City:
Address - County:
Address - Zipcode:
Address - State:
Address - County:
Preferred Name:
Maiden Name:
Marital Status:
Religion:
Primary Language:
Client Race(s):
Ethnic Origin:
Client Declined To Provide Information On The Following:
Tribal Affiliation(s):
If Other (Unlisted), indicate Tribal Type:
If Other (Unlisted), type in Tribe Name:
Place Of Birth:
Education:
Employment Status:
Smoker:
Smoking Status Assessment Date:
Mother's Maiden Name:
(If applicable) Primary Language of Primary Caregiver:
Name of Primary Caregiver:

Add or update the client's demographics.

ADMISSION (OUTPATIENT) Submit Discard Add to Favorites

Admission

- Identification and Treatment Information
- Other Client Information
- Compliance Indicators
- Demographics**
- Client Demographics
- Alias
- Other Client Data
- Online Documentation

Client Demographics

Client Last Name: ADMISSIONS

Client First Name: PCNX

Client Middle Name: [Empty]

Suffix: Sr Jr III IV V VI

Prefix: Select

Gender Identity: Male-to-Female (MTF)/Transgender Female/Trans Woman Female-to-Male (FTM)/Transgender Male/Trans Man Female Male Chose not to disclose Additional gender category or other, please specify

Gender Identity (Please Describe): [Empty]

Personal Pronouns (will show on the banner): [Empty]

Sexual Orientation: Straight or heterosexual Lesbian, gay or homosexual Bisexual Chose Not To Disclose Something else, please describe Do Not Know

Sexual Orientation (Please Describe): [Empty]

Address Where Client Lives/Stays (Enter "Homelessness" if applicable): [Empty]

Address - Street: 550 N Vermont Ave

Address - Street 2: [Empty]

Address - Zipcode: 90005

Address - City: LOS ANGELES

Address - State: California

Address - County: Los Angeles

Residential Address Start Date: [Empty]

Preferred Name: [Empty]

Maiden Name: [Empty]

Marital Status: Select

Religion: Select

Primary Language: Select

Client Race(s): All | Clear Search Alaskan Native American Indian

Ethnic Origin: Select

Client Declined To Provide Information On The Following: Ethnic Origin Race Language

Tribal Affiliation(s): All | Clear Search Absentee-Shawnee Afognak

If Other (Unlisted), indicate Tribal Type: Select

If Other (Unlisted), type in Tribe Name: [Empty]

Place Of Birth: [Empty]

Education: Select

Employment Status: Select

Smoker: Select

Smoking Status Assessment Date: [Empty]

Mother's Maiden Name: [Empty]

(If applicable) Primary Language of Primary Caregiver: Select

Name of Primary Caregiver: [Empty]

Once all data has been verified, Users must scroll to the top of the form and select the "Submit" button.

ADMISSION (OUTPATIENT) Submit Discard Add to Favorites

This will navigate the User back to the "Home Screen".

The screenshot shows the ProviderConnect NX interface. At the top, the user is logged in as FFS1 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, there are two main sections: "CLIENT DEMOGRAPHICS" and "CLIENT DIAGNOSES".

CLIENT DEMOGRAPHICS

ADMISSIONS, PCNX (3334802)
DOB/Age: 2000-01-12 / 24
SSN: 123-45-6789
Race:
Pronouns:
Gender: **No Entry**
Primary Language: **No Entry**
Ethnicity: **No Entry**
Smoking Status: **No Entry**
Smoking Assessment Date:

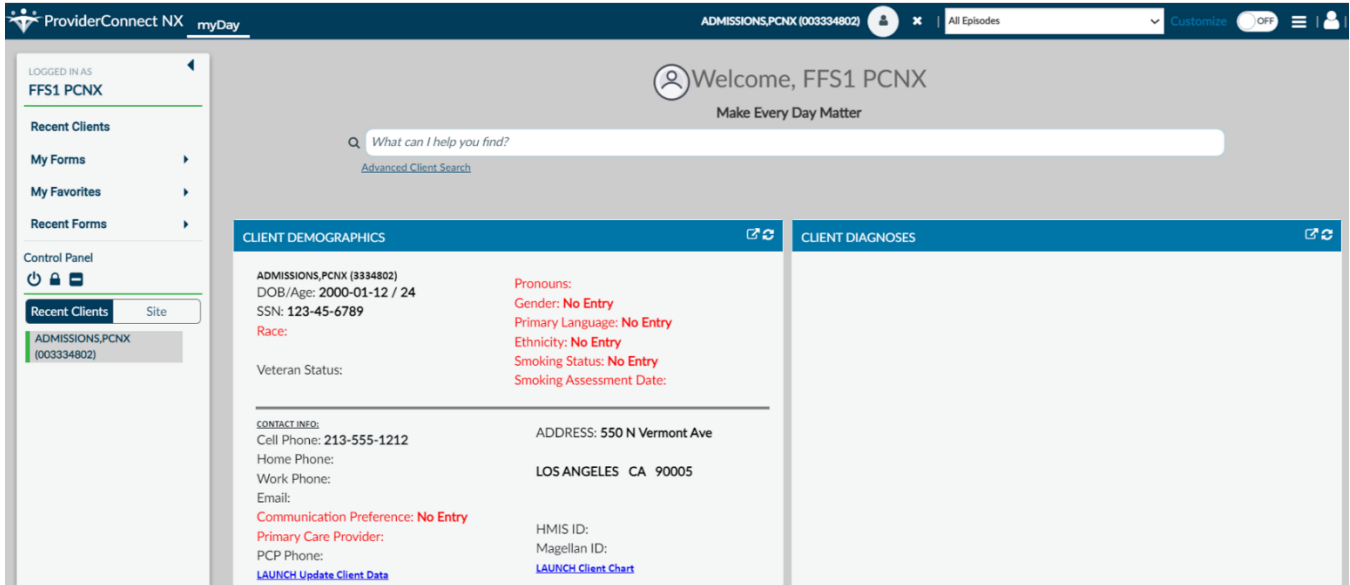
Veteran Status:

CONTACT INFO:
Cell Phone: 213-555-1212
Home Phone:
Work Phone: 550 N Vermont Ave
Email:
Communication Preference: **No Entry**
Primary Care Provider:
PCP Phone: LOS ANGELES CA 90005
HMIS ID:
Magellan ID:
[LAUNCH Update Client Data](#) [LAUNCH Client Chart](#)

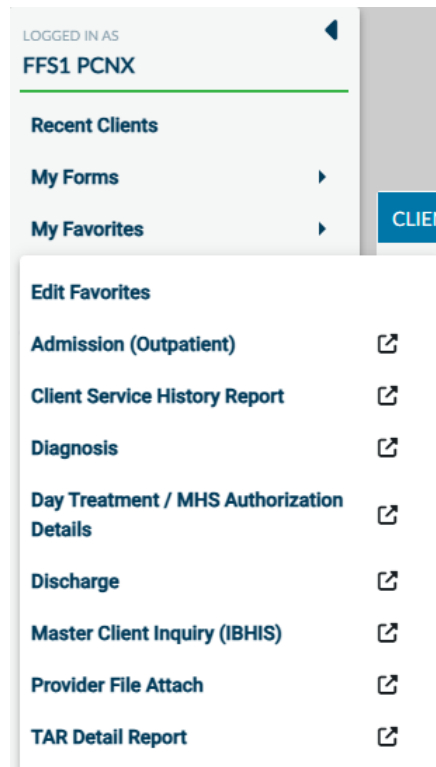
CLIENT DIAGNOSES

ProviderConnect NX: Diagnosis

From the “Home Screen” form, Users can navigate to the “Diagnosis” form.



Users MUST go to their **My Favorites** in the TASK Navigation and select “Diagnosis” from the dropdown menu.



On the “**Diagnosis**” search, the User must enter the **Client ID** in the “**Select Client**” field.

Opening: **Diagnosis**

Home > Select Client >

Select Client

Q |

OK Cancel

The User will select the Client's name in the results.

Opening: **Diagnosis**

Home > Select Client >

Select Client

Q 9358751

Name	Date Of Birth	Client's Address - Street
ADMISSIONS,PCNX (009358751)	12/12/1999	510 S Vermont Ave

OK Cancel

On the “**Diagnosis**” pre-display screen, select the **Episode** to add the client's diagnosis. This will open the diagnosis form.

Opening: **Diagnosis**

Home > Select Client > Select Episode >

✓ Selected Client : ADMISSIONS,PCNX (003334802)

Select Episode

Name: PCNX ADMISSIONS
ID: 3334802
Sex: Female
Date of Birth: 01/12/2000

Episode ↕	Program ↕	Start ↕	End ↕
2	x FFS2LE Fee For Service 2 Admission	02/09/2024	

OK Cancel

NOTE: All field names in **RED** with **RED Asterisk** are required fields and must be completed before the diagnosis can be submitted.

DIAGNOSIS

Submit Discard Add to Favorites

Diagnosis
Additional Diagnosis Information
Online Documentation

Type Of Diagnosis *
 Admission Discharge Update

Date Of Diagnosis *
02/09/2024

Time Of Diagnosis *
Current Time H M AM/PM

Diagnoses

Index	Ranking	Description	Status	Estimated Onset Date	Classification	Resolved Date	Bill Order	ICD-9 Code
-------	---------	-------------	--------	----------------------	----------------	---------------	------------	------------

New Row Delete Row

Void All

Show Active Only
 Yes No

Diagnosis Search

Code Crossmapping

Status
 Active Working Rule-out Void

Add To Problem List
 Yes No

Ranking
 Primary Secondary Tertiary

Bill Order

Diagnosing Practitioner

Remarks

In Outpatient context, please only select Admission or Update

Using the radio button, select the “**Type of Diagnosis**”.

Type Of Diagnosis *
 Admission Discharge Update

Type Of Diagnosis *
 Admission Discharge Update

Note: The diagnosis date auto-populates with the date the diagnosis is created. The date of the diagnosis can be changed to another date if necessary.

Date Of Diagnosis *
02/09/2024

Enter the time in the “Time of Diagnosis” field.

Time Of Diagnosis *

01:46 PM Current Time H M AM/PM

Here, the User will add a row to add the diagnosis.

Diagnoses

Index	Ranking	Description	Status	Estimated Onset Date	Classification	Resolved Date	Bill Order	ICD-9 Code
1	Primary (1)		Active (1)				1	

New Row Delete Row

Diagnoses

Index	Ranking	Description	Status	Estimated Onset Date	Classification	Resolved Date	Bill Order	ICD-9 Code
1	Primary (1)		Active (1)				1	

New Row Delete Row

NOTE: Once a “New Row” has been added to the “Diagnosis Search”, “Status”, “Diagnosis Practitioner”, and “Bill Order” become required fields.

Enter the diagnosis in the “Diagnosis Search” field by typing the name of the diagnosis.

Diagnosis Search *

Diagnosis Search *

Mental Health

Diagnosis	ICD-9	ICD-10	DSM-5
Mental health assessment declined	V64.2	Z53.20	undefined
Mental health-related complaint	V65.5	Z71.1	undefined
Mental health provider, perpetrator of maltreatment and neglect	E967.8	Y07.521	undefined
Active mental health advance directive	V49.89	Z78.9	undefined

Diagnosis Search *

Encounter for mental health services for victim of other abuse

The “Status” auto-populates with the “Active” radio button selected. Users can change to the desired status, if necessary.

NOTE: DO NOT change the “Status” selection.

Status *

Active Working Rule-out Void

Enter the “Diagnosing Practitioner” name or number in this field.

Diagnosing Practitioner *

Diagnosing Practitioner *

Practitioner	NPI Number	Taxonomy Code	Program Association
PETER AMPUDIA (048067)	1700858214	2084P0800X	00G720210

Diagnosing Practitioner *

Note: The “Bill Order” field auto-populates with the order number.

NOTE: DO NOT change the “Bill Order” entry.

Bill Order *

After the User has completed the form, they should review the form, verifying that all the entered data is correct.

DIAGNOSIS Submit Discard Add to Favorites

Diagnosis
Additional Diagnosis Information
Online Documentation

Type Of Diagnosis *
 Admission Discharge Update

Date Of Diagnosis *
02/09/2024

Time Of Diagnosis *
01:46 PM Current Time H M AM/PM

Index	Ranking	Description	Status	Estimated Onset Date	Classification	Resolved Date	Bill Order	ICD-9 Code
1		Encounter for mental health ...	Active (1)					V65.49

New Row Delete Row Void All Show Active Only
 Yes No

Diagnosis Search *
Encounter for mental health services for victim of other abuse

Code Crossmapping
ICD-9 ICD-10 DSM-IV SNOMED
V65.49 Z69.81 305058001

Status *
 Active Working Rule-out Void

Add To Problem List
 Yes No

Diagnosing Practitioner *
PETER AMPUDIA (048067)

Ranking
 Primary Secondary Tertiary

Remarks

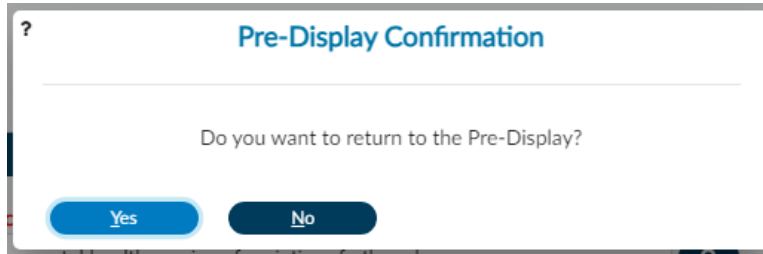
Bill Order *
1

In Outpatient context, please only select Admission or Update

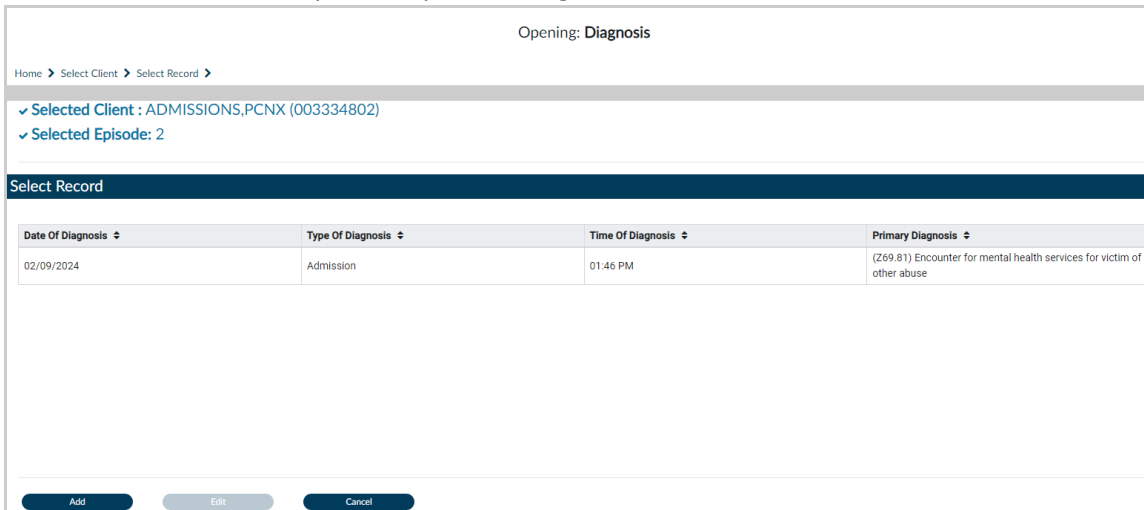
The User must select the **“Submit”** button at the top of the form.

DIAGNOSIS Submit Discard Add to Favorites

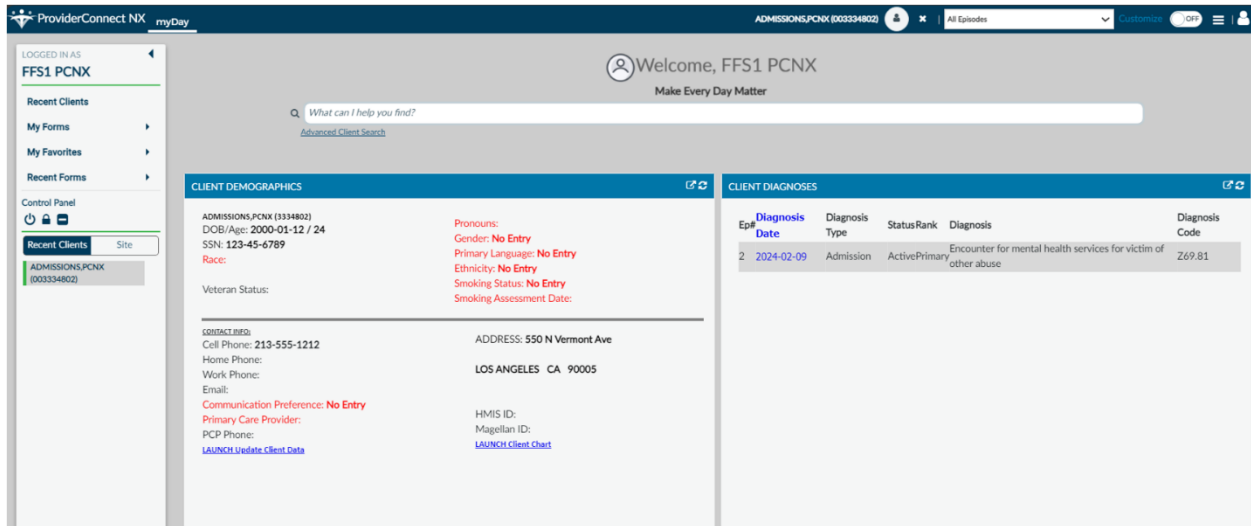
The User will receive a pop-up message. Clicking the “No” button will navigate the User back to the “Home Screen”. Clicking the “Yes” button will navigate the User to the pre-display screen, where the User can view the diagnosis summaries for this client. For this example, we will select the “Yes” button.



Here, the User can review this client's past and present diagnosis.



Clicking the “Cancel” button will navigate the User back to the “Home Screen”.



ProviderConnect NX: How to Add an Attachment File

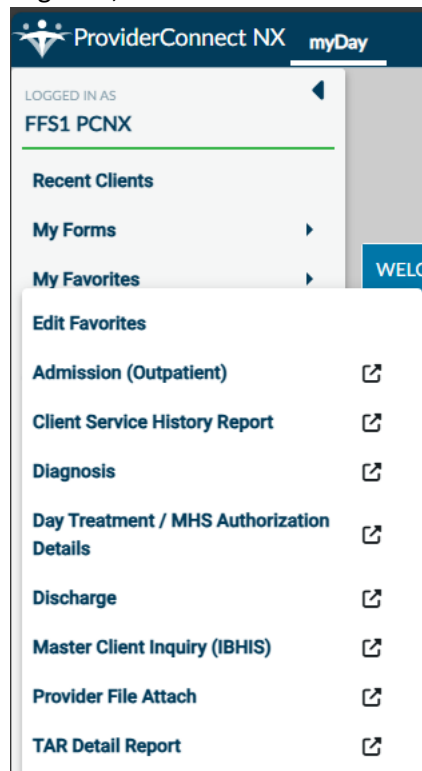
From the "Home Screen".

The screenshot displays the ProviderConnect NX Home Screen for user FFS1 PCNX. The interface includes a navigation sidebar on the left with options like 'Recent Clients', 'My Forms', and 'My Favorites'. The main content area is divided into several sections:

- CLIENT DEMOGRAPHICS:** Displays client information for TEST,PCNX (9262831), including DOB/Age, SSN, Gender (Male), Primary Language (No Entry), Race, Ethnicity (No Entry), and Smoking Status (No Entry).
- CLIENT DIAGNOSES:** A section for client diagnoses, currently empty.
- PROVIDER FILE ATTACH:** A table for managing attachments. The table has 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 main content area, there are buttons for 'Open Record', 'Close All', and 'Print'.

Using the “My Favorites” tab in the TASK navigation, select “Provider File Attach”.



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: All field names in **RED** with **RED Asterisk** are required fields and must be completed before the “**Provider File Attach**” file can be stored.

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 buttons for 'Submit', 'Discard', and 'Add to Favorites'. The form fields are as follows:

- 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 close button.
- Authorization**: A dropdown menu with 'Select'.
- Document Type**: A dropdown menu with 'Select' and a close button.
- Upload File**: A button.
- Comments**: A large text area with a search icon and a document icon.
- Existing Files**: A dropdown menu with 'Select' and a close button.
- Update Comments**: A button.
- Delete File**: A button.
- File Name**: A text input field.
- Comment History**: A large text area with a search icon and a document icon.

The left sidebar shows the user is logged in as 'FFS1 PCNX' and provides navigation options: 'Recent Clients', 'My Forms', 'My Favorites', 'Recent Forms', 'Control Panel', and 'Recent Clients' (with a 'Site' button).

To Upload an Attachment (File)

Enter “Member ID” and select the client’s name.

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” and select the provider.

Provider *

Provider *

Results
INC. OPTIMIST BOYS HOME AND RANCH (781)

Provider *

In the “File Type” dropdown, select “Provider.”

File Type *

File Type *

Authorization
Other
Provider

File Type *

Select the **“Upload File”** button. Upon selection, two windows will be displayed. One window enables the user to browse their computer and choose the file to be uploaded. The other window provides a designated area in where the User can drag and drop the file for upload.

NOTE: The **MAX** file size is 100MB; the only accepted file type is PDF.

The screenshot illustrates the file upload workflow. At the top, there is an 'Upload File' button. Below it is a 'File Name' input field. A 'File Upload' dialog box is shown, featuring a large dashed border area for dropping files and a 'Cancel' button. To the right, a table displays the list of uploaded files.

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

Below the table, the 'File Name' input field is populated with the text 'This is a Test attachment 2.docx'.

The User will receive a pop-up message to confirm the file was successfully uploaded. Select the **“OK”** button to close the pop-up message

NOTE: Users will **NEVER** use the **“SUBMIT”** button to upload files

The screenshot shows a 'Confirm' dialog box with a blue title bar. The main text reads 'File successfully created.' and there is a blue 'OK' button at the bottom.

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

To View Uploaded Attachments (Files)

Using the “**Provider File Attach**” form

The screenshot displays the 'Provider File Attach' form within the ProviderConnect NX application. The interface is organized into several sections:

- Header:** 'ProviderConnect NX myDay' with a search bar and user profile icons.
- Left Sidebar:** Navigation menu including 'Recent Clients', 'My Forms', 'My Favorites', 'Recent Forms', and 'Control Panel'.
- Main Content Area:**
 - PROVIDER FILE ATTACH:** Title bar with 'Submit', 'Discard', and 'Add to Favorites' buttons.
 - Form Fields:**
 - Member ID ***: Text input field with a search icon.
 - Provider ***: Text input field with a search icon.
 - File Type ***: Dropdown menu with 'Select' and a close button.
 - Authorization**: Dropdown menu with 'Select'.
 - Document Type**: Dropdown menu with 'Select' and a close button.
 - Buttons:** 'Upload File', 'Store File', 'Update Comments', and 'Delete File'.
 - Comments:** A large text area for entering comments, with a 'Comments' label and a search icon.
 - Existing Files:** A dropdown menu with 'Select' and a close button.
 - File Name:** A text input field.
 - Comment History:** A large text area for viewing previous comments, with a 'Comment History' label and a search icon.

Enter "Member ID" and select the client's name.

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 and select the provider.

Provider *

Provider *

Results

INC. OPTIMIST BOYS HOME AND RANCH (781)

Provider *

In the "File Type" dropdown, select "Provider."

File Type *

Select

File Type *

Select

Authorization

Other

Provider

File Type *

Provider

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

Existing Files

Select x v

Existing Files

Select x v

| Q

This is a Test attachment 2.docx

This is a Test attachment.docx

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

PROVIDER FILE ATTACH

Submit

Discard

Add to Favorites

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

?

Confirm Close

Are you sure you want to Close without saving?

Yes No

To View Uploaded Attachments (Files)

From the “HOME” screen

The screenshot shows the 'myDay' interface for user FFS1 PCNX. The main content area is divided into several widgets. The 'CLIENT DEMOGRAPHICS' widget displays the following information:

- ADMISSIONS, PCNX (9358744)
- DOB/Age: 2000-01-12 / 24
- SSN: 111-22-3333
- Race:
- Veteran Status:
- Gender Identity: **Female**
- Primary Language: **No Entry**
- Ethnicity: **No Entry**
- Smoking Status: **No Entry**
- Smoking Assessment Date:

The 'PROVIDER FILE ATTACH' widget contains a table with the following data:

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

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 in the “**Console Widget Viewer**” widget.

CONSOLE WIDGET VIEWER

This is a Test attachment 2.pdf x

← 1 of 1 →

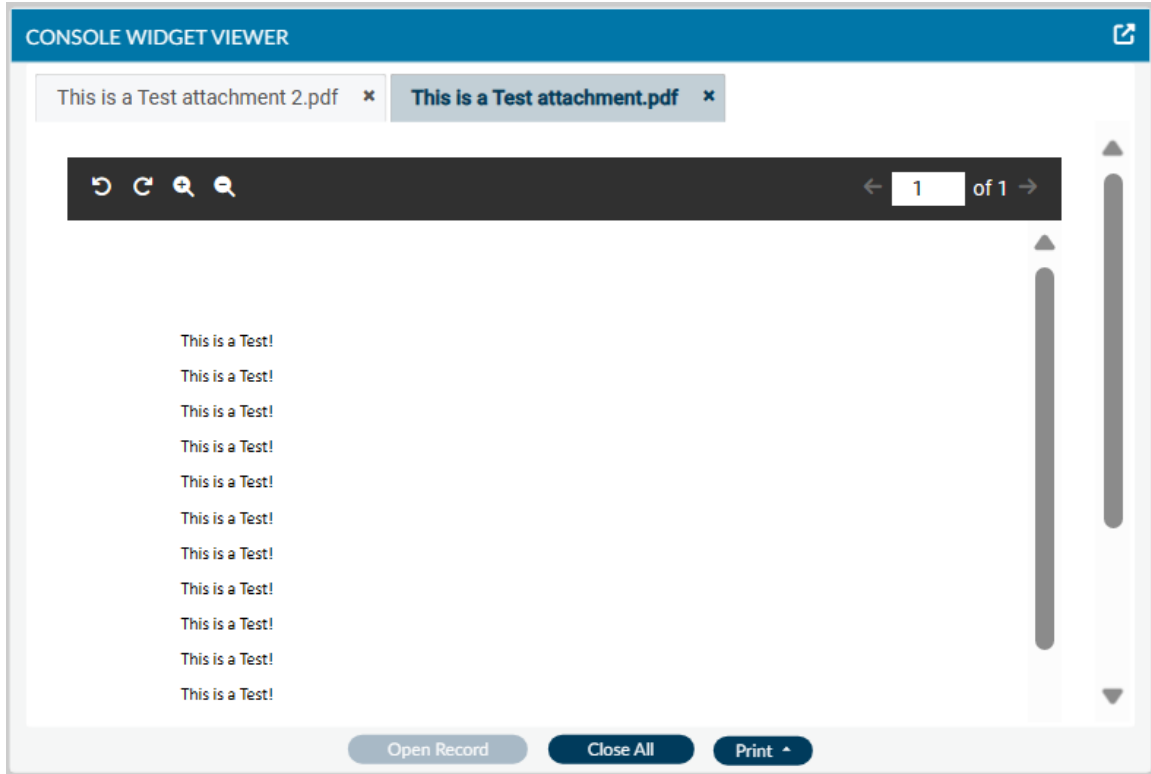
This is a Test!
This is a Test!
This is a Test!
This is a Test!
This is a Test!
This is a Test!
This is a Test!
This is a Test!
This is a Test!
This is a Test!
This is a Test!

Open Record Close All Print ^

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

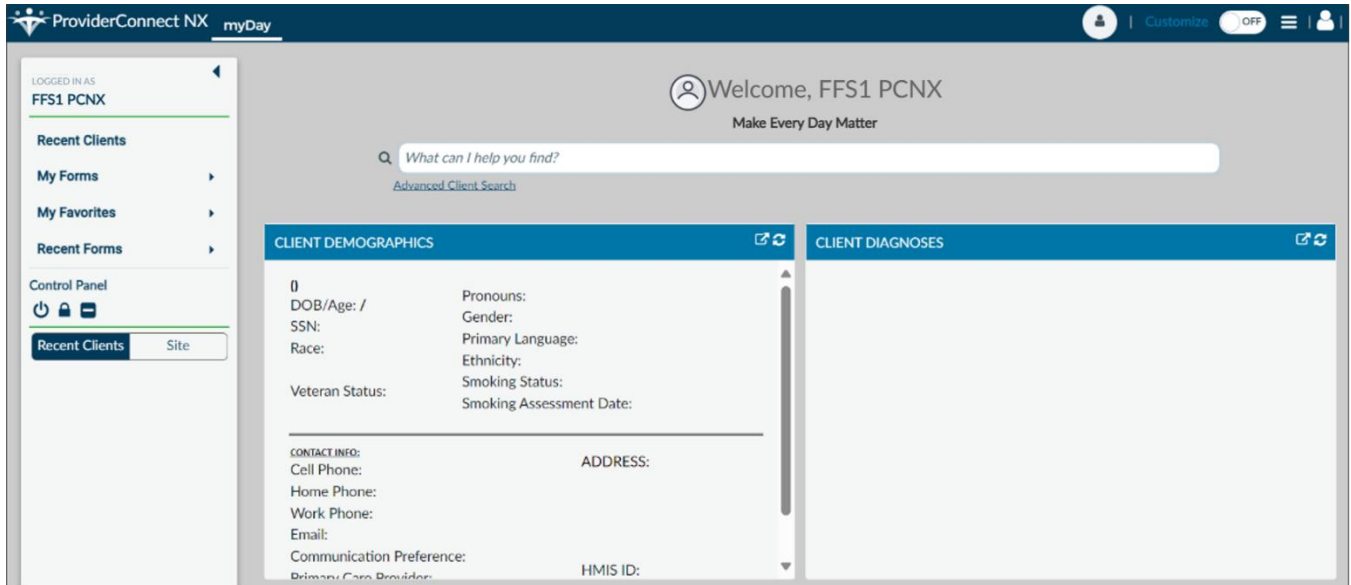
View	OPTIMIST BOYS H...	This is a Test atta...	03/06/2024	360482	No Entry
View	OPTIMIST BOYS H...	This is a Test atta...	03/07/2024	360484	No Entry

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

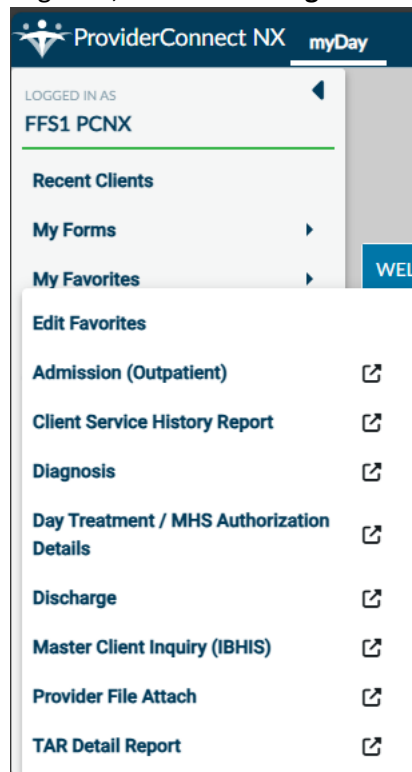


ProviderConnect NX: How to Add a Discharge

From the “Home” screen



Using the “My Favorites” tab in the TASK navigation, select “Discharge”.



Enter the **Client ID** in the search field.

Opening: Discharge

Home > Select Client >

Select Client

Q |

OK Cancel

Select the client's name.

Opening: Discharge

Home > Select Client >

Select Client

Q 935875Q

Name	Date Of Birth	Client's Address - Street
TEST.PCNX (009358750)	01/01/2000	550 N. Vermont Ave

OK Cancel

Select the **Episode** to discharge.

Opening: **Discharge**

Home > Select Client > Select Episode >

✓ Selected Client : TEST, PCNX (009358750)

Select Episode

Name: PCNX TEST
ID: 9358750
Sex: Female
Date of Birth: 01/01/2000

Episode ↕	Program ↕	Start ↕	End ↕
1	5005I COLLEGE HOSPITAL CERRITOS	03/01/2024	

OK Cancel

Enter the "Discharge Practitioner" name or number and select.

Discharge Practitioner *

Discharge Practitioner *

Practitioner	NPI Number	Taxonomy Code	Program Association
			5000I+5002I+5005I+5006I+5007I+5007K+5009I+5011I+5012I+5014I+5019I+5020I+5022I+5024I+5026I+5029I+5031I+5035I+5038I+5039I+5041I+5042I+5043I+5044I+5046I+5047I+5048I+5049I+5050I+5514I+5532I+5547I+5551I+5552I+5553I+5554I+5555I+5558I+5560I+5563I+5565I+5566I+5567I+5568I+5569I+5570I+5599I+5801I+5802I+5804I+5805I+5808I+5810I+5811I+5812I+5815I+5817I+5818I+5819I

Discharge Practitioner *

Once all data has been verified, the User must scroll to the top of the form and select the "Submit" button.

DISCHARGE

Submit Discard Add to Favorites

This will navigate the User back to the "Home Screen".

