

# **ProviderConnect NX End User Manual for Intensive Home-Based Services and Therapeutic Behavioral Services Process**



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# Introduction to Avatar NX for Intensive Home-Based Services and Therapeutic Behavioral Service Providers

The Avatar NX is the Electronic Health Record System (EHRS) implemented by the Los Angeles County Department of Mental Health (LACDMH). ProviderConnect NX is a web-based interface that communicates with Avatar NX. It is a standard browser-based application that can be launched from any web browser, including Microsoft Edge, Google Chrome, or Mozilla Firefox. ProviderConnect NX offers real-time communication with Avatar NX, ensuring that any information submitted is directly entered and updated in Avatar NX immediately.

**Intensive Home-Based Services (IHBS)** and **Therapeutic Behavioral Service (TBS)** providers will use **ProviderConnect NX** for the following functions:

1. Search for Clients.
2. View Clients' Demographics
3. Submit Authorization requests for Avatar NX Services.
4. Upload the Client document(s) as an Attachment to Client cases.
  - Documents to upload:
  - IHBS /TBS Assessment
5. Review the status of the authorization.

# Provider Authorizations vs. Member-Based Authorizations

**Provider Authorizations** are set at the funding source level for a given fiscal year for each provider. Each provider authorization (P-Auth) has a specific dollar amount allocated according to the contract or amendment. When claiming a service, the provider uses a P-Auth, and claiming can continue until the funds are exhausted. Depending on the client's Financial Eligibility and the type of service being claimed, the provider utilizes a P-Auth that is linked to either a Medi-Cal Funding Plan or a non-Medi-Cal funding Plan.

**Member-Based Authorizations** are child records of P-AUTHs that are assigned to a specific member for a particular service. When requesting a member-based authorization, the provider should use an appropriate funding source that covers the requested service. The authorization must be based on the client's Financial Eligibility and utilize either a Medi-Cal or a non-Medi-Cal funding Source. Additionally, 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

- 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 and Financial Eligibility in Avatar NX with the Legal Entity seeking an authorization request for the client that has been submitted through the Provider Electronic Health Record (EHR) via Web Services. This must be done before the Provider can create an authorization in **ProviderConnect NX**.
- To access **ProviderConnect NX**, a web address Uniform Resource Locator (URL) is used to launch the browser-based application.
- Once an authorization request is submitted via **ProviderConnect NX**, Users will only be allowed to make changes to the request while the status is still at "Pending".
- If changes to the authorization in **ProviderConnect NX** are required, users should contact the Authorizations Unit at [ChildWelfareAuth@dmh.lacounty.gov](mailto:ChildWelfareAuth@dmh.lacounty.gov) for further direction.
- Users must complete a HEAT ticket if they are having **ProviderConnect NX** functionality issues.

## Links and Numbers

Help Desk – (213)351-1335

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

Authorizations Unit - [ChildWelfareAuth@dmh.lacounty.gov](mailto:ChildWelfareAuth@dmh.lacounty.gov)

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 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](mailto:SystemsAccessUnit@dmh.lacounty.gov) with the 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](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](http://file.lacounty.gov/SDSInter/dmh/1055863_Individuals_Authorized_to_Sign_Access_Forms.pdf)

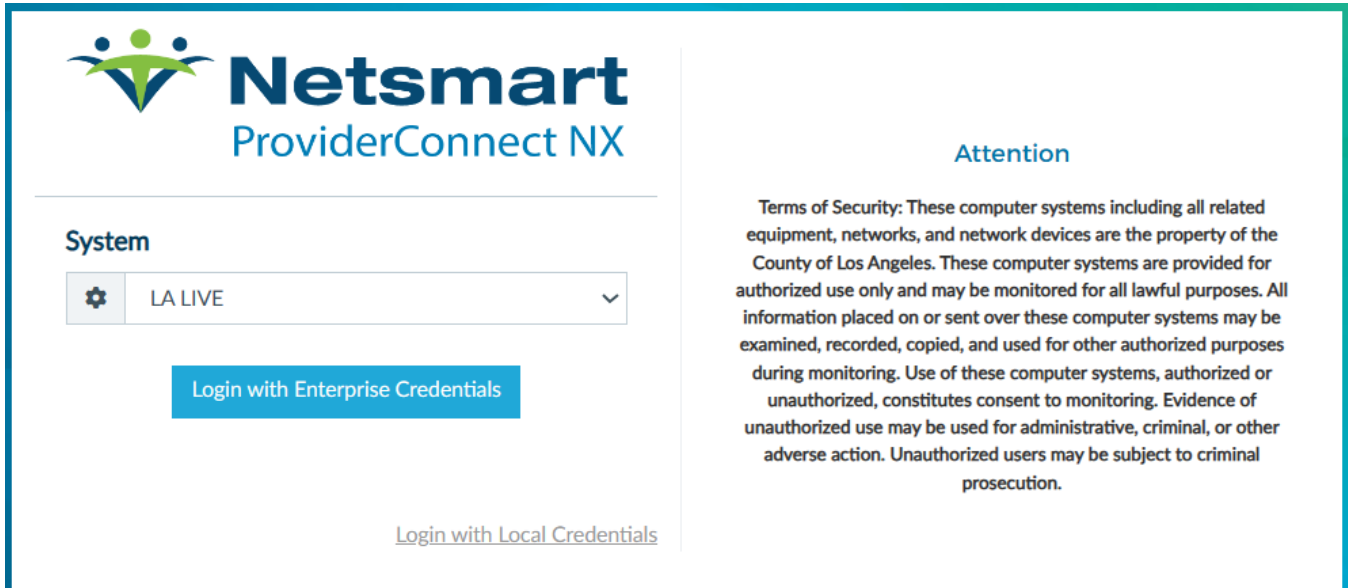
**\*NOTE\*** Please make sure that the forms are filled out or typed in the PDF form. All scanned documents should be legible, and all parties must either use a wet or digital signature. Requests with typed signatures, incomplete forms, or signature dates older than 60 days will **NOT** be processed.

Should you have any questions or if you require additional assistance, please contact the DMH Systems Access Unit at [SystemsAccessUnit@dmh.lacounty.gov](mailto: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 link in your browser: <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

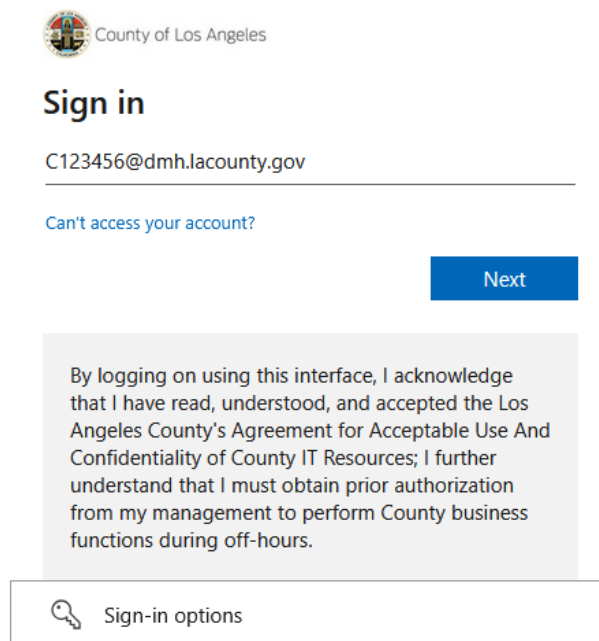
Login with Enterprise Credentials

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



County of Los Angeles

**Sign in**

C123456@dmh.lacounty.gov

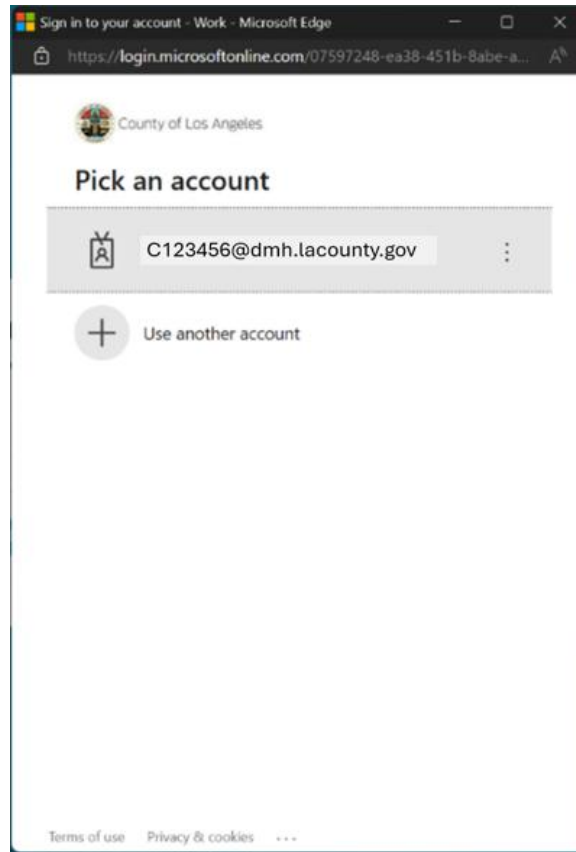
[Can't access your account?](#)

Next

By logging on using this interface, I acknowledge that I have read, understood, and accepted the Los Angeles County's Agreement for Acceptable Use And Confidentiality of County IT Resources; I further understand that I must obtain prior authorization from my management to perform County business functions during off-hours.

Sign-in options

on the “**Pick an account**” pop-up 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**” page, 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.

Sign in to your account - Work - Microsoft Edge

https://login.microsoftonline.com/07597248-aa38-451b-8...

County of Los Angeles

← C123456@dmh.lacounty.gov

### Enter password

.....|

[Forgot my password](#)

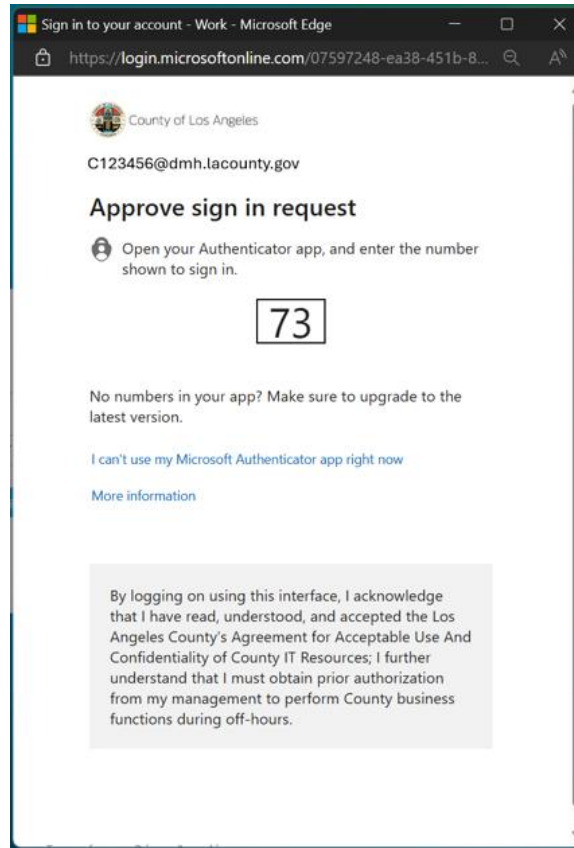
[Sign in](#)

By logging on using this interface, I acknowledge that I have read, understood, and accepted the Los Angeles County's Agreement for Acceptable Use And Confidentiality of County IT Resources; I further understand that I must obtain prior authorization from my management to perform County business functions during off-hours.

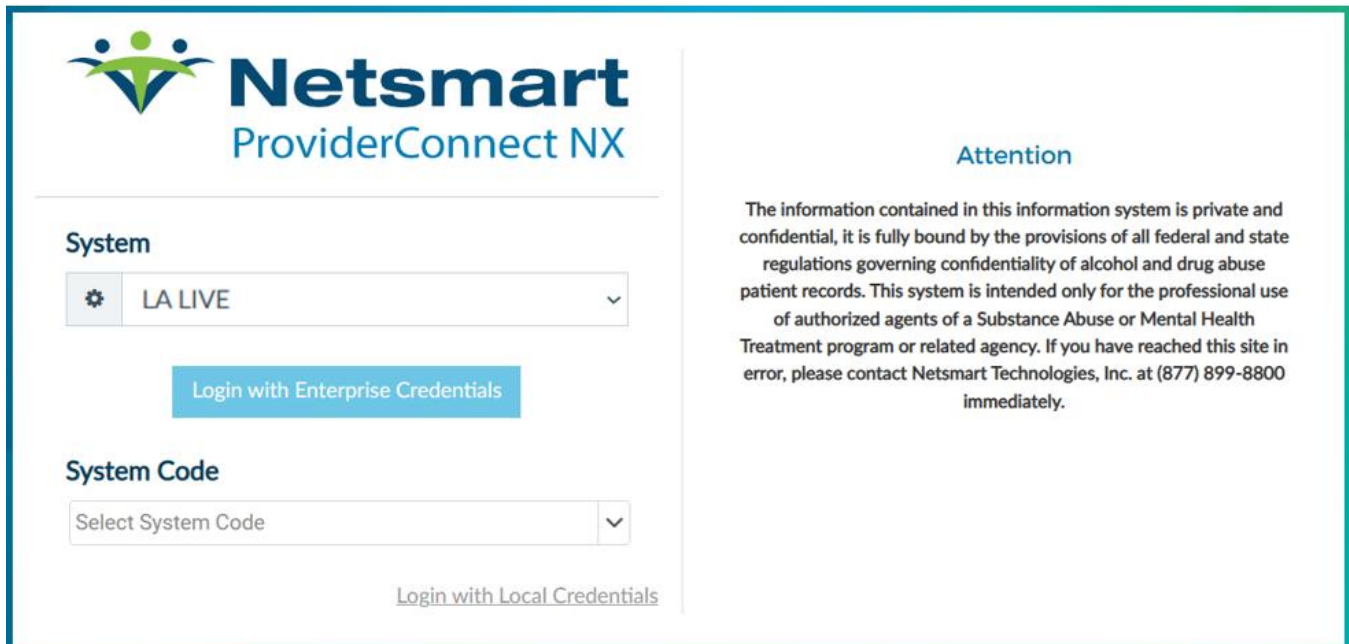
[Terms of use](#) [Privacy & cookies](#) ...

A number will display. This number must 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.

**NOTE:** If Users do not have the Authenticator App, Users **MUST** contact the Help Desk.

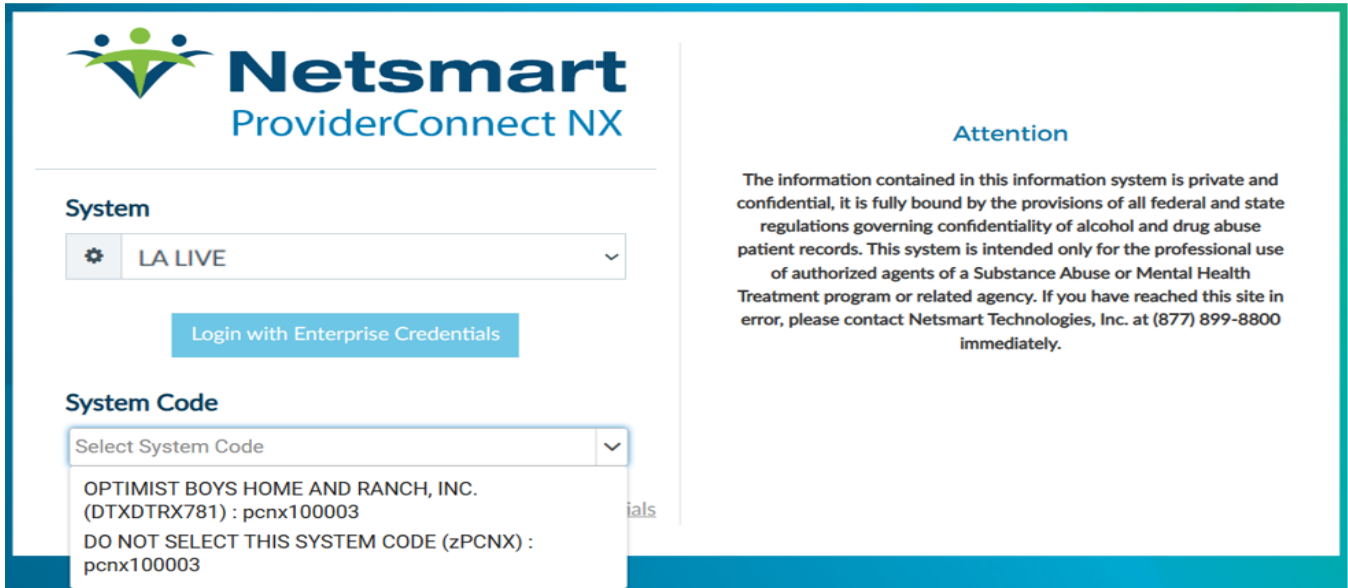


Using the “**System Code**” dropdown, select the code for the User's agency. The User will only see the system code they are authorized to see to access **ProviderConnect NX**.

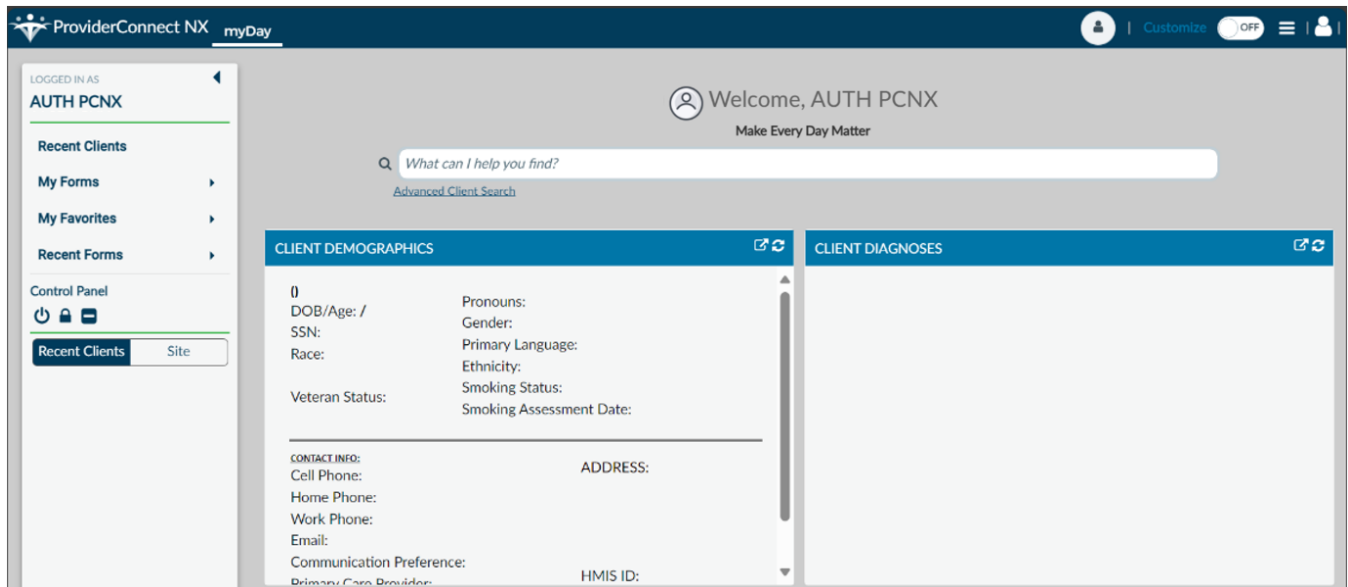


Click the arrow to open the dropdown menu for “System Code”. The User must select their Agency name from the dropdown.

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

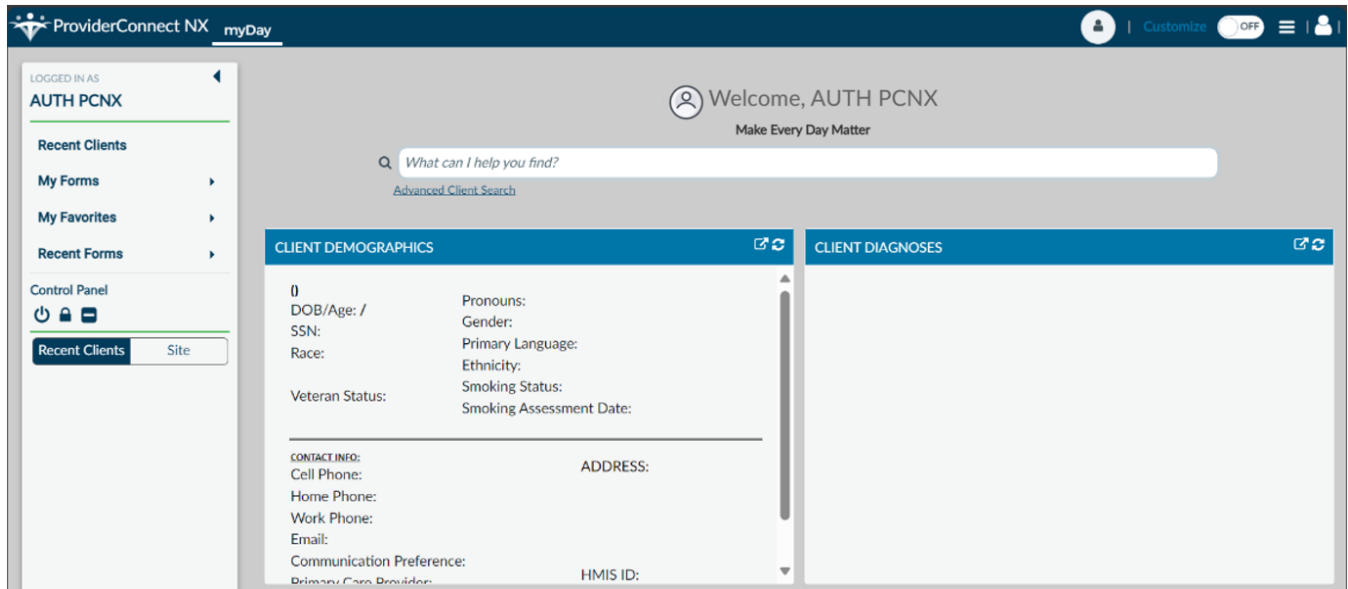


Once selected, this will navigate the User to the ProviderConnect NX “Home Screen”.

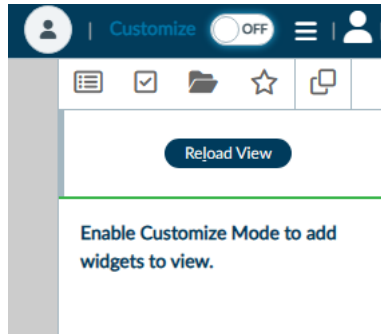


# Provider Connect NX: How to Add a Widget

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




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

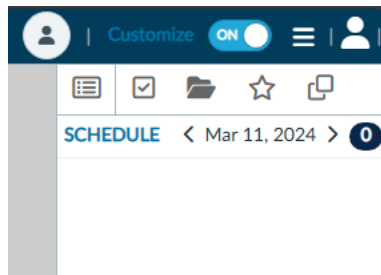


Turn the “**Customize**” selector from “**OFF**” to “**ON**”.



Select the icon  to open the sidebar.

Select the icon  to open the widget options.



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

The screenshot shows a sidebar menu with the following structure:

- Top navigation: List, Check, Folder, Star, Copy icons.
- Buttons: **Reload View**, **Revert Changes**
- Checkbox:  Include Client Information header in view
- Section: **CLIENT**
  - Claim Service Information
  - Pending Service Authorizations
  - Provider File Attach**
  - Service Authorization Information
- Section: **CONSOLE**
  - Console Widget Viewer**
- Section: **MISC**
  - Financial Eligibility
  - Systemwide Annual Liability

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

The example shows a home screen with a widget titled "Provider File Attach". To the right, a preview of the widget's content is shown:

PROVIDER FILE ATTACH					
View	Provider	Document Name	Date	Authorization Number	Document Type

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

The example shows a home screen with a widget titled "Console Widget Viewer". To the right, a preview of the widget's content is shown:

CONSOLE WIDGET VIEWER

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



Select the icon  to close the sidebar.

Users can now 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**

ID: / Pronouns:  
DOB/Age: / Gender:  
SSN: Primary Language:  
Race: Ethnicity:  
Veteran Status: Smoking Status:  
Smoking Assessment Date:

CONTACT INFO: ADDRESS:  
Cell Phone:  
Home Phone:  
Work Phone:  
Email:  
Communication Preference: HMIS ID:  
Primary Care Provider: Magellan ID:  
PCP Phone: [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

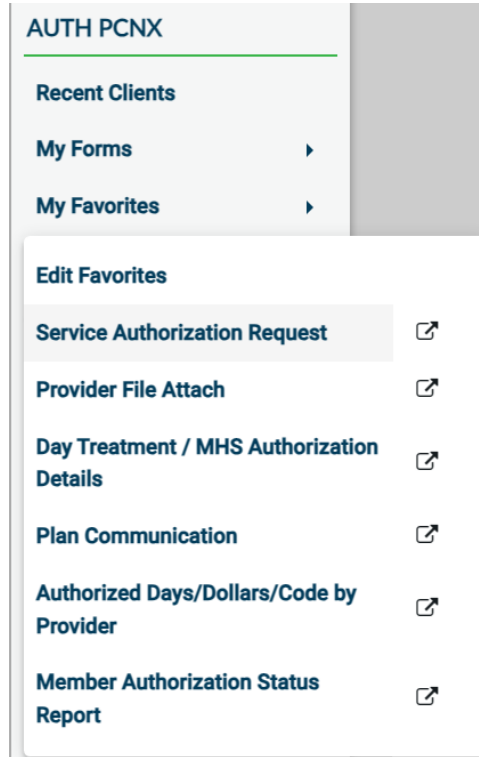
From the “Home” screen

The screenshot displays the 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:** Contains fields for DOB/Age, SSN, Race, Veteran Status, Pronouns, Gender, Primary Language, Ethnicity, Smoking Status, and Smoking Assessment Date.
- CLIENT DIAGNOSES:** A section for client diagnoses, currently empty.
- PROVIDER FILE ATTACH:** A table with columns for View, Provider, Document Name, Date, Authorization Number, and Document Type.
- CONSOLE WIDGET VIEWER:** A section for console widget viewers, currently empty.

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

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



**Note:** To access clients in ProviderConnect NX, a User must verify that the client has an open Admission and completed Financial Eligibility under the User's Legal Entity through the Legal Entity's EHR. The client must have an open Admission through their Legal Entity EHR before the User can submit an Authorization Request for the client in ProviderConnect NX.

Enter the Client ID into the Search field.

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

Opening: Service Authorization Request

Home > Select Client >

Select Client

Q I

OK Cancel

**Note:** If a User search returns no results, the client inputted by the User has not been associated with the User's Legal Entity. This association must be done through the Legal Entities EHR. Only after the client has been associated with their Legal Entity via the Legal Entities EHR can the User create an Authorization Request in ProviderConnect NX. What does this mean? Before a User can access their client in ProviderConnect NX and request authorization, the client must have an open Admission under the User's Legal Entity, created directly from the User's EHR system. The client must have an open admission for the Legal Entity requesting authorization using the User's EHR system.

**Below is an example of what the User will see when the User has a client that does not have an active admission/episode created by the User's Legal Entity**

Opening: Service Authorization Request

Home > Select Client >

Select Client

Q PCNX ADMISSIONS

OK Cancel

Select the Client name and Client ID.

### 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

**NOTE:** The Client **MUST** have an open Admission through their Legal Entities EHR before the User to request an Authorization using **ProviderConnect NX**.

If the Client has a pre-existing Authorization, the User will be able to view the submission here on the Service Authorization Request pre-display. The User must click the **“Add”** button to create a new authorization request. The User will be navigated to the **“Service Authorization Request”** form.

### 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

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

The screenshot shows the 'SERVICE AUTHORIZATION REQUEST' form in the ProviderConnect NX system. The form is titled 'Member Service Authorization' and contains various fields for authorization details. Fields marked with a red asterisk are required. The form includes sections for 'Brief Member Review', 'Member Authorization History', and 'Initial Or Continuing Authorization'.

**Required Fields (Red Asterisk):**

- Type Of Authorization
- Funding Source Authorization Is For \*
- Contracting Provider Program
- Current Authorization Status \*
- Begin Date Of Authorization \*
- Financial Authorization End Date \*

**Other Fields:**

- Authorization Number: 360652
- Benefit Plan
- Performing Provider
- Performing Provider Type
- Current Authorization Status Reason
- Initial Or Continuing Authorization:  Initial  Continuing  Copy
- Authorized Level of Care
- Clinical Authorization End Date

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

Funding Source Authorization Is For \*

Select

Funding Source Authorization Is For \*

Select

(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

(1011) CGF IMD Step Down Non-MC

Funding Source Authorization Is For \*

(102) DMH Mental Health Services (CGF) MC

Using the dropdown under the “Benefit Plan” field, select the corresponding benefit plan for the chosen Funding Source for this request.

Benefit Plan \*

Select

Benefit Plan \*

Select

Invalid plan, DO NOT USE

PHF MC

Residential MC

TBS (MC)

TBS Aftercare MC

TBS STRTP MC

Benefit Plan \*

TBS (MC)

**NOTE:** The “Current Authorization Status Reason” field is auto-populated when the “Code Authorized (1)” is completed. **DO NOT MAKE A SELECTION FOR THIS FIELD.**

Current Authorization Status Reason

Select

Using the dropdown under the “Contracting Provider Program” field, select the location where the services were provided.

The screenshot shows a dropdown menu titled "Contracting Provider Program" with a search bar and a list of options. The options are:

- 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
- All - 01/01/2003 - 1946A OPTIMIST CAMPUS
- All - 01/01/2003 - 1948A OPTIMIST VAN ALLEN

Below the list, the selected option "All - 01/01/2003 - 1933A OPTIMIST EAGLE ROCK" is shown in a separate dropdown box.

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

The screenshot shows a "Brief Member Review" form with the following fields:

- Member Authorization History**
  - Authorization Number: 360653
  - Benefit Plan: TBS (MC)
  - Performing Provider: Select
  - Performing Provider Type: Select
  - Current Authorization Status Reason: Select
  - Initial Or Continuing Authorization:  Initial  Continuing  Copy
- 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

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)

Begin Date Of Authorization \*

Financial Authorization End Date \*

Begin Date Of Authorization \*

03/01/2024

Financial Authorization End Date \*

06/30/2024

**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). Users **MUST NOT** enter a date into the “Clinical Authorization Date” field. DMH Staff will enter the “Clinical Authorization Date.”

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

Begin Date Of Authorization \*

03/01/2024

Clinical Authorization End Date

Financial Authorization End Date \*

10/30/2024

Account

Select

Contracting Provider Authorization

Select

The User **MUST** enter the last day of the current Fiscal Year into the **“Financial Authorization End Date”** before the **“Account,”** and the **“Contracting Provider Authorization”** field will show ungrayed.

The screenshot shows a form with several fields. At the top, there is a section with a blue header. Below it, there are two date pickers: "Begin Date Of Authorization" with the value "03/01/2024" and "Financial Authorization End Date" with the value "06/30/2024". To the right, there is a "Clinical Authorization End Date" field which is currently empty. Below these, there are two dropdown menus: "Account" with the value "Select" and "Contracting Provider Authorization" with the value "Select".

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

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


This screenshot is identical to the one above, showing the same form fields and values: "Begin Date Of Authorization" (03/01/2024), "Financial Authorization End Date" (06/30/2024), "Clinical Authorization End Date" (empty), "Account" (Select), and "Contracting Provider Authorization" (Select).

Using the **“Contracting Provider Authorization”** dropdown, select the P-Auth for this authorization request. This selection will automatically populate the **“Account”** field.

The screenshot shows the "Contracting Provider Authorization" dropdown menu open. The dropdown list contains several options, each with a search icon on the right. The selected option is "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". The "Account" field is now populated with "OPTIMIST BOYS' HOME + RANCHO".

Review the section to verify all fields that were completed with the correct information.

Account: OPTIMIST BOYS' HOME + RANCH INC. 1) 07/01/2023 - 06/30/2024 \$10447911.00 OPTIMIST BOYS' HOME + RANCH I

Contracting Provider Authorization \*  Auth: P34021 FS: DMH Mental Health Services (CGF) MC(102) Care Lvl: No Entry Dates: 07/01/2023-06/30/2024 Amt

The fields in this section are dynamic. Once the correct information has been entered into the other field(s), the fields will be ungrayed.

Authorization Grouping Or Individual Authorizations \*

All  Grouping  Individual

Authorization Grouping: Select

Display Authorization Grouping

Total Estimated Liability

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

Letter Type: Select

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

Code Authorized (1) [Search]

Code Authorized (2) [Search]

Requested Units (1)

Requested Units (2)

Units Authorized (1)

Units Authorized (2)

Estimated Liability Code (1)

Estimated Liability Code (2)

For “Authorization Grouping OR Individual Authorization”, select the “Individual” radio button.

Authorization Grouping Or Individual Authorizations \*

All  Grouping  Individual

Authorization Grouping Or Individual Authorizations \*

All  Grouping  Individual

For “Procedure Code Type (1)”, select the “CPT Codes” radio button.

Procedure Code Type (1)

CPT® Codes  Revenue Code

Procedure Code Type (1)

CPT® Codes  Revenue Code

Using the dropdown for “Code Authorized (1)”, type in the code and press Enter to activate the dropdown. Then select the full code to be authorized. In this example, we will be using “H2017:HK”.

**Code Authorized (1)**

**Code Authorized (1)**

**Results**

Rehabilitation HK (H2017:HK)
Rehabilitation HK Aud (H2017:HK:SC)
Rehabilitation HK Aud St LVN (H2017:HK:SC:TE)
Rehabilitation HK Aud St RN (H2017:HK:SC:TD)
Rehabilitation HK HV (H2017:HK:HV)
Rehabilitation HK HV Aud (H2017:HK:HV:SC)
Rehabilitation HK HV Aud St LVN (H2017:HK:HV:SC:TE)
Rehabilitation HK HV Aud St RN (H2017:HK:HV:SC:TD)
Rehabilitation HK HV St LVN (H2017:HK:HV:TE)
Rehabilitation HK HV St RN (H2017:HK:HV:TD)

**Code Authorized (1)**

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

- \*For IHBS Medi-Cal services, select the Procedure Code H2017:HK
- \*For IHBS Non Medi-Cal services, select the Procedure Code H2017:HK: HX
- \*For TBS Medi-Cal services, select Procedure Code H2019
- \*For TBS Non Medi-Cal services, select the Procedure Code H2019:HX

Enter the unit requested.

Requested Units (1)	Requested Units (1)
<input type="text"/>	<input type="text" value="1000"/>

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

**NOTE:** Confirm the “Current Authorization Status Reason” has been auto-populated with “CWD – New Submission”.

**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: Select

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

Authorized Level of Care: Select

Current Authorization Status \*:  Approved  Denied  Pending

**Member Authorization History**

Authorization Number: 360501

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] [T] [Y]

**Clinical Authorization End Date**: 10/30/2024 [Calendar] [T] [Y]

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

**Account**: OPTIMIST BOYS' HOME + RANCH INC. 1) 07/01/2023 - 06/30/2024 \$10447911.00 OPTII

**Contracting Provider Authorization \***: Auth: P33070 FS: DMH Mental Health Services (CGF) MC(102) Care Lvl: No Entry Dates: [Dropdown]

**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]

**Requested Units (1)**: 1000

**Requested Units (2)**: [Text Box]

**Units Authorized (1)**: [Text Box]

**Units Authorized (2)**: [Text Box]

**Estimated Liability Code (1)**: [Text Box]

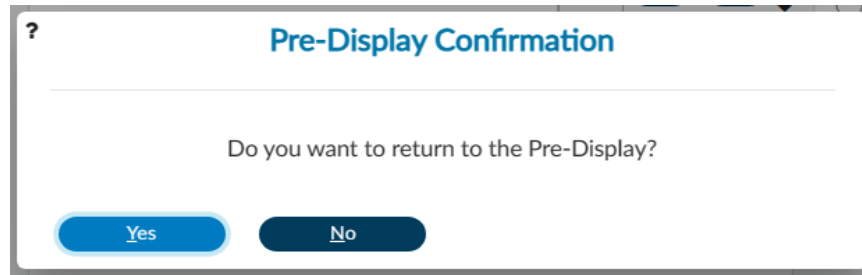
**Estimated Liability Code (2)**: [Text Box]

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 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 requested for this Client.



**Note:** For example, select “YES” to navigate back to the pre-display screen.

The User has successfully created an Authorization Request for this client. Users can select the “Add” button to add another Authorization Request, or they can choose the “Cancel” button to return to the “Home Screen”.

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

This will navigate the User back to 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 'LOG OFF' button. The main header area features a search bar with the placeholder text 'What can I help you find?' and a 'Welcome, AUTH PCNX' message with the tagline 'Make Every Day Matter'. Below the search bar is a link for 'Advanced Client Search'. The interface is divided into several sections: a left sidebar with navigation options like 'Recent Clients', 'My Forms', and 'My Favorites'; a central area with 'CLIENT DEMOGRAPHICS' and 'CLIENT DIAGNOSES' panels; and a bottom section with 'PROVIDER FILE ATTACH' and 'CONSOLE WIDGET VIEWER'. The 'CLIENT DEMOGRAPHICS' panel contains fields for personal and contact information, while the 'PROVIDER FILE ATTACH' panel shows a table of document attachments.

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

# ProviderConnect NX: How to Add an Attachment File

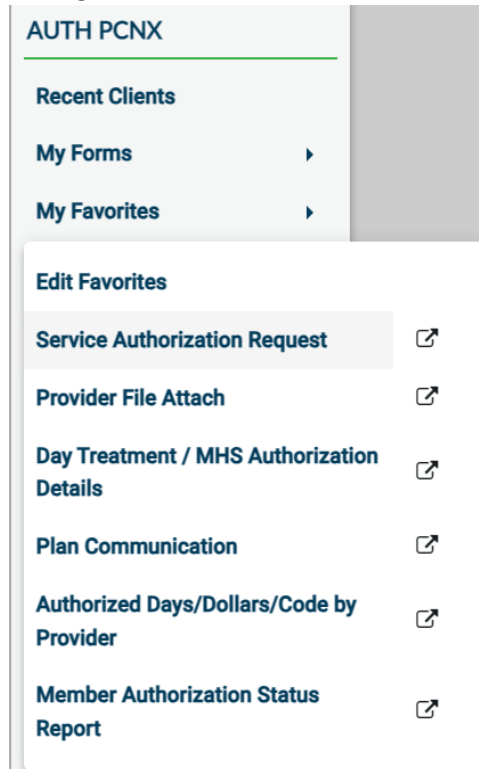
From the “Home” screen

The screenshot displays the ProviderConnect NX myDay interface. At the top, the user is logged in as AUTH PCNX. The main area is titled "Welcome, AUTH PCNX" with the slogan "Make Every Day Matter". A search bar is present with the placeholder text "What can I help you find?". Below the search bar, there are four main sections:

- CLIENT DEMOGRAPHICS:** Contains fields for ID, DOB/Age, SSN, Race, and Veteran Status. It also includes fields for Pronouns, Gender, Primary Language, Ethnicity, Smoking Status, and Smoking Assessment Date.
- CLIENT DIAGNOSES:** A section for client diagnoses, currently empty.
- PROVIDER FILE ATTACH:** A table for attaching files. The table has columns for View, Provider, Document Name, Date, Authorization Number, and Document Type. The table is currently empty.
- CONSOLE WIDGET VIEWER:** A section for viewing console widgets, currently empty.

At the bottom of the interface, 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 buttons for 'Submit', 'Discard', and 'Add to Favorites'. The form fields are as follows:


- Member ID \***: A text input field with a search icon, highlighted in red.
- Provider \***: A text input field with a search icon, highlighted in red.
- File Type \***: A dropdown menu with 'Select' and a close button, highlighted in red.
- Authorization**: A dropdown menu with 'Select'.
- Document Type**: A dropdown menu with 'Select' and a close button.
- File Name**: A text input field that is currently grayed out.
- Comments**: A large text area for entering comments.
- Existing Files**: A dropdown menu with 'Select' and a close button.
- Comment History**: A section for viewing previous comments, currently grayed out.

Buttons for 'Upload File', 'Store File', 'Update Comments', and 'Delete File' are located at the bottom of the form. The left sidebar shows navigation options like 'Recent Clients', 'My Forms', and 'My Favorites'.


**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


Navigation: [Home] [Left] [1] [Right] [End]

Member ID \*




Enter the "Provider ID"

Provider \*



Provider \*




Results

INC. OPTIMIST BOYS HOME AND RANCH (781)
---

Navigation: [Home] [Left] [1] [Right] [End]

Provider \*



From the “File Type” dropdown, select “Authorizations.”

File Type \*

Select x v

File Type \*

Select x v

| Q

Authorization

Other

Provider

File Type \*

Authorization x v

From the “Authorization” dropdown, select the desired authorization number

Authorization \*

Select x v

Store F

| Q

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 \*

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

Select the **“Upload File”** button. Two windows will open. One is 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.**

The screenshot illustrates the file upload process. At the top, there is a dark blue button labeled "Upload File". Below it is a light gray input field labeled "File Name". To the left, a white dialog box titled "File Upload" contains a large dashed border area with the text "click here or drop file" and a "Cancel" button at the bottom. To the right, a table displays a 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 "Upload File" button is shown again, followed by the "File Name" input field containing the text "This is a Test attachment 2.docx".

Click the **“Store File”** button to complete the file upload. 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.

The screenshot shows a white pop-up message box with a blue header labeled "Confirm". Below the header is a horizontal line, followed by the text "File successfully created." At the bottom of the box is a blue button labeled "OK".

# 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 in 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 (x).
- Authorization**: A dropdown menu with 'Select'.
- Document Type**: A dropdown menu with 'Select' and a close button (x).
- 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 close button (x).

Buttons for file management are located on the right side of the form: 'Upload File', 'Store File', 'Update Comments', and 'Delete File'. A 'Comment History' section is visible at the bottom of the form, showing a list of previous comments.

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 \*

Select x v

File Type \*

Select x v

| Q

Authorization

Other

Provider

File Type \*

Authorization x v

From the “Authorization” dropdown, select the desired authorization number.

Authorization \*

Select x v

Store F

| Q

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

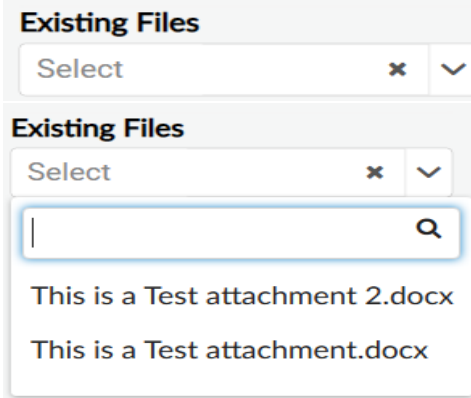
Authorization #299641 Start Date: 01/05/2023 End Date: 06/30/2023

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

Authorization \*

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

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.

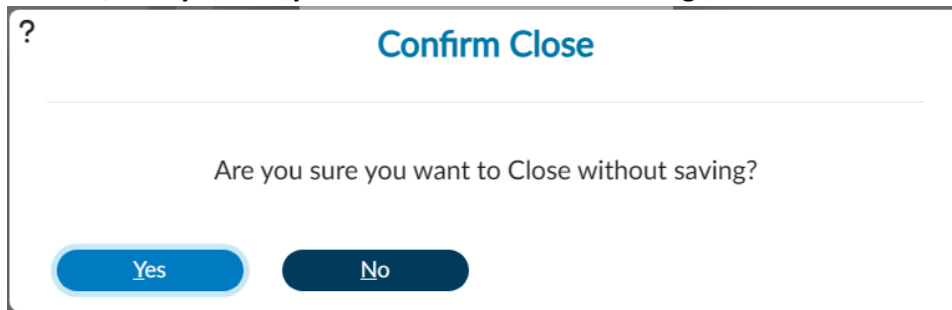
**PROVIDER FILE ATTACH**

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.



?

**Confirm Close**

Are you sure you want to Close without saving?

Yes No

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

## To View Uploaded Attachments (Files)

From the “HOME” screen

The screenshot shows the ProviderConnect NX interface. The top navigation bar includes the user name 'AUTH PCNX' and the client ID 'ADMISSIONS, PCNX (009358744)'. The main content area is divided into several sections:

- CLIENT DEMOGRAPHICS:** Displays personal information such as DOB (2000-01-12 / 24), SSN (111-22-3333), and gender identity (Female). It also lists communication preferences and primary care provider details.
- CLIENT DIAGNOSES:** A section for listing medical diagnoses.
- PROVIDER FILE ATTACH:** A table showing uploaded documents with columns for View, Provider, Document Name, Date, Authorization Number, and Document Type.
- CONSOLE WIDGET VIEWER:** A section for viewing additional widgets.

View	Provider	Document Name	Date	Authorization Number	Document Type
<a href="#">View</a>	OPTIMIST BOYS H...	This is a Test atta...	03/06/2024	360482	No Entry
<a href="#">View</a>	OPTIMIST BOYS H...	This is a Test atta...	03/07/2024	360484	No Entry

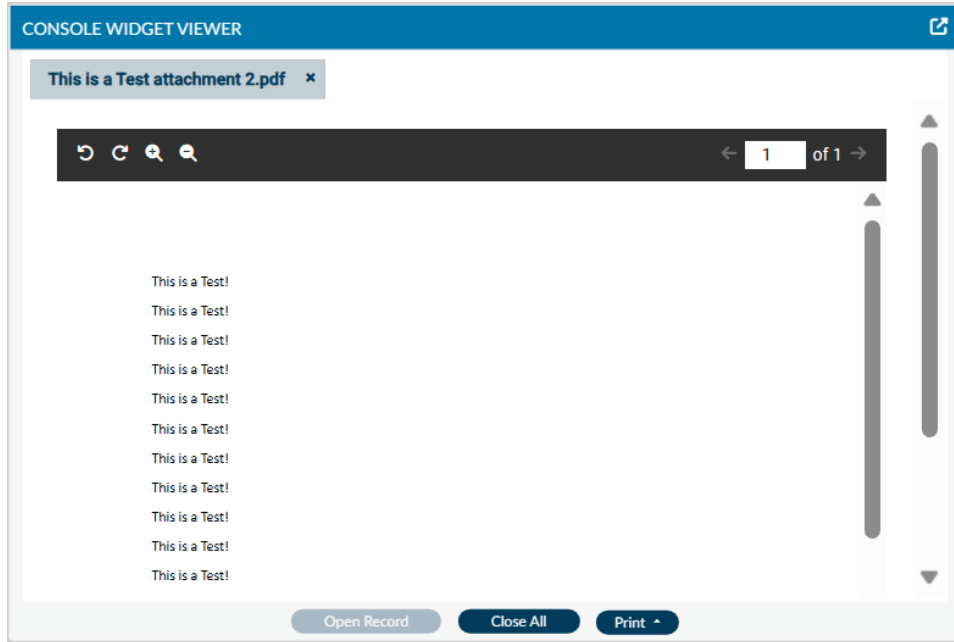
Users can view the uploaded documents using the “**Provider File Attach**” widget.

PROVIDER FILE ATTACH					
View	Provider	Document Name	Date	Authorization Number	Document Type
<a href="#">View</a>	OPTIMIST BOYS H...	This is a Test atta...	03/06/2024	360482	No Entry
<a href="#">View</a>	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.

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

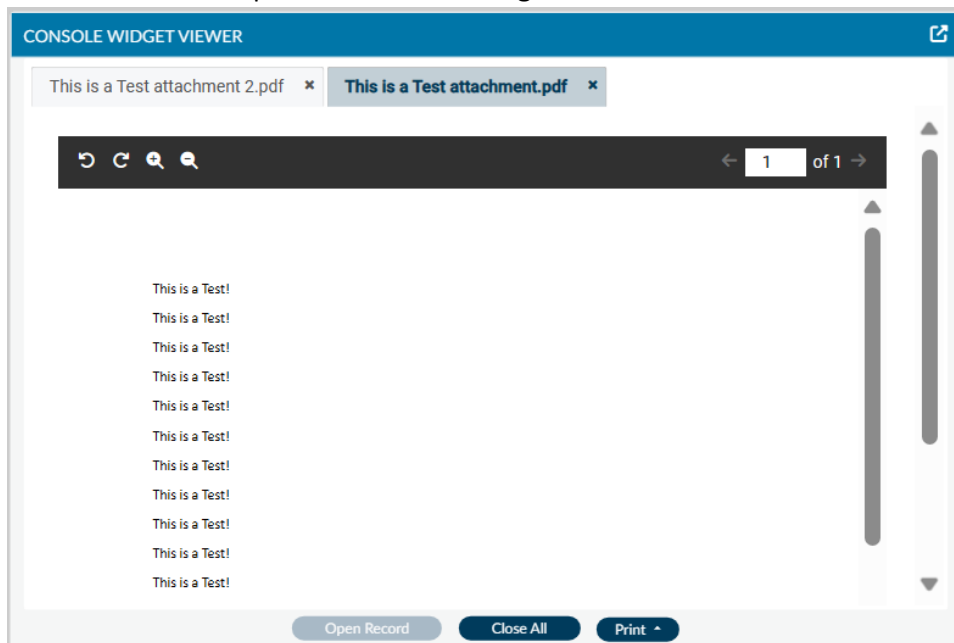
Once selected, the document will be viewed in the “**Console Widget Viewer**” widget.



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

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

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



# ProviderConnect NX: How to View Authorization Reports

From the “Home” screen

The screenshot displays the ProviderConnect NX Home screen for user AUTH PCNX. The interface includes a top navigation bar with the user's name and a 'myDay' tab. A search bar is present with the placeholder text 'What can I help you find?' and a link to 'Advanced Client Search'. The main content area is divided into four panels: 'CLIENT DEMOGRAPHICS', 'CLIENT DIAGNOSES', 'PROVIDER FILE ATTACH', and 'CONSOLE WIDGET VIEWER'. The 'CLIENT DEMOGRAPHICS' panel shows fields for ID, DOB/Age, SSN, Race, Veteran Status, Pronouns, Gender, Primary Language, Ethnicity, Smoking Status, and Smoking Assessment Date. The 'PROVIDER FILE ATTACH' panel contains a table with columns for View, Provider, Document Name, Date, Authorization Number, and Document Type. The 'CONSOLE WIDGET VIEWER' panel is currently empty. A 'Control Panel' on the left side offers options for 'Recent Clients' and 'Site'. 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:

**CLIENT DIAGNOSES**

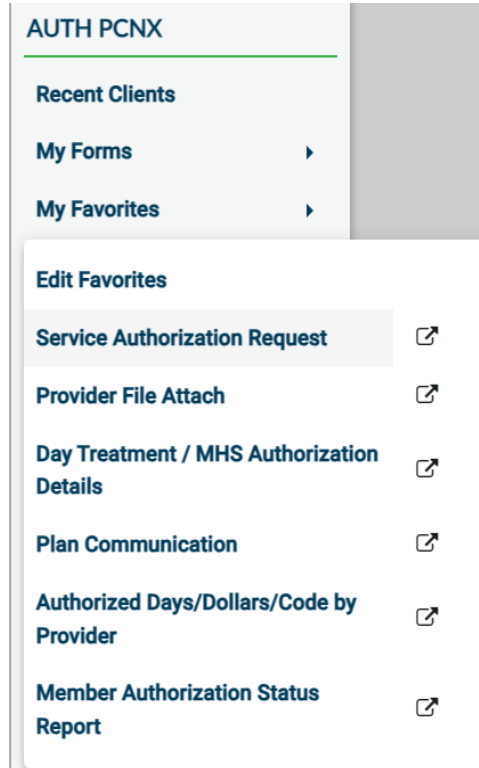
**PROVIDER FILE ATTACH**

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

**CONSOLE WIDGET VIEWER**

Open Record Close All 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**.

**NOTE:** All field names that are in **RED** or have a **RED Asterisk** are required fields and must be completed before the report can be processed. Other fields are not marked as “Required” and can also be completed to narrow the data in the report.

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

Select PROVID \*

Select PROVID \*

**Results**

OPTIMIST YOUTH HOMES DBA BOYS HOME (781)

« ‹ 1 › »

Select PROVID \*

**Results**

OPTIMIST YOUTH HOMES DBA BOYS HOME (781)

« ‹ 1 › »

Select PROVID \*

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

Date Range Start Date \*  [Calendar] [T] [Y] [Dropdown]

Date Range End Date \*  [Calendar] [T] [Y] [Dropdown]

Date Range Start Date \*  [Calendar] [T] [Y] [Dropdown]

Date Range End Date \*  [Calendar] [T] [Y] [Dropdown]

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**

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 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.

When the User closes the report, the User will see a message **“Member Authorization Status Report has completed. Do you wish to return to form?”** 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**

# ProviderConnect NX: Funding Source and Benefit Plan List

## IHBS Funding Sources and Benefit Plans

Funding Source ID	Funding Source Name	Benefit Plan ID	Benefit Plan Name
40	SFC Wraparound Non-MC	252	IHBS (Non-MC)
54	MHSA Outpatient Care Services MC	251	IHBS (MC)
102	DMH Mental Health Services (CGF) MC	251	IHBS (MC)
102	DMH Mental Health Services (CGF) MC	373	IHBS STRTP MC
102	DMH Mental Health Services (CGF) MC	374	IHBS Aftercare MC
102	DMH Mental Health Services (CGF) MC	377	IHBS TSCF MC
115	MHSA PEI Non-MC	252	IHBS (Non-MC)
116	MHSA PEI MC	251	IHBS (MC)
134	Specialized Foster Care Wraparound MC	251	IHBS (MC)
135	Specialized Foster Care TFC MC	251	IHBS (MC)
111	MHSA FSP Non-MC	252	IHBS (Non-MC)
112	MHSA FSP MC	251	IHBS (MC)
132	Specialized Foster Enhanced MHS (MC)	251	IHBS (MC)
55	MHSA Outpatient Care Services Non-MC	252	IHBS (Non-MC)
101	DMH Mental Health Services (CGF) Non-MC	252	IHBS (Non-MC)
141	Juvenile Justice Program (STOP) Non-MC	252	IHBS (Non-MC)
162	CalWORKs MHS Non-MC	252	IHBS (Non-MC)
46	Child Outreach & Triage Team COTT - MC	251	IHBS (MC)
142	Juvenile Justice Prog (JJCPA-MST) Non-MC	252	IHBS (Non-MC)

## TBS Funding Sources and Benefit Plans

Funding Source ID	Funding Source Name	Benefit Plan ID	Benefit Plan Name
54	MHSA Outpatient Care Services MC	254	TBS (MC)
101	DMH Mental Health Services (CGF) Non-MC	255	TBS (Non-MC)
102	DMH Mental Health Services (CGF) MC	254	TBS (MC)
102	DMH Mental Health Services (CGF) MC	375	TBS STRTP MC
102	DMH Mental Health Services (CGF) MC	376	TBS Aftercare MC
102	DMH Mental Health Services (CGF) MC	378	TBS TSCF MC
116	MHSA PEI MC	254	TBS (MC)
134	Specialized Foster Care Wraparound MC	254	TBS (MC)
135	Specialized Foster Care TFC MC	254	TBS (MC)
112	MHSA FSP MC	254	TBS (MC)
132	Specialized Foster Enhanced MHS (MC)	254	TBS (MC)