



# **Montana Medicaid:**

## **Provider Portal Training**

## **Physician Administered Drugs**

July 2020

# Agenda

- Qualitrac
- Provider Portal
- Submit a Review Request
- View Request Status and Outcomes
- Authorized Official training



**Mountain-Pacific**  
*Quality Health*

# QUALITRAC

# Our System: Qualitrac

Web-based health management system, built and maintained by our team of clinical and technical experts featuring:

- 24/7 Provider Access
- Streamlined review process with all necessary information contained on one-page
- Secure electronic upload of clinical documentation
- Provider ability to track progress of submitted requests



## Utilization Mgmt

*Evaluate services for necessity, appropriateness & efficiency*

## Population Health Analytics

*Aggregate & analyze patient data sets to improve health outcomes*

## Performance Mgmt

*Improve compliance with evidence-based guidelines*

## Case Mgmt

*Improving outcomes & lowering costs for high-risk participants*



**Mountain-Pacific**  
*Quality Health*

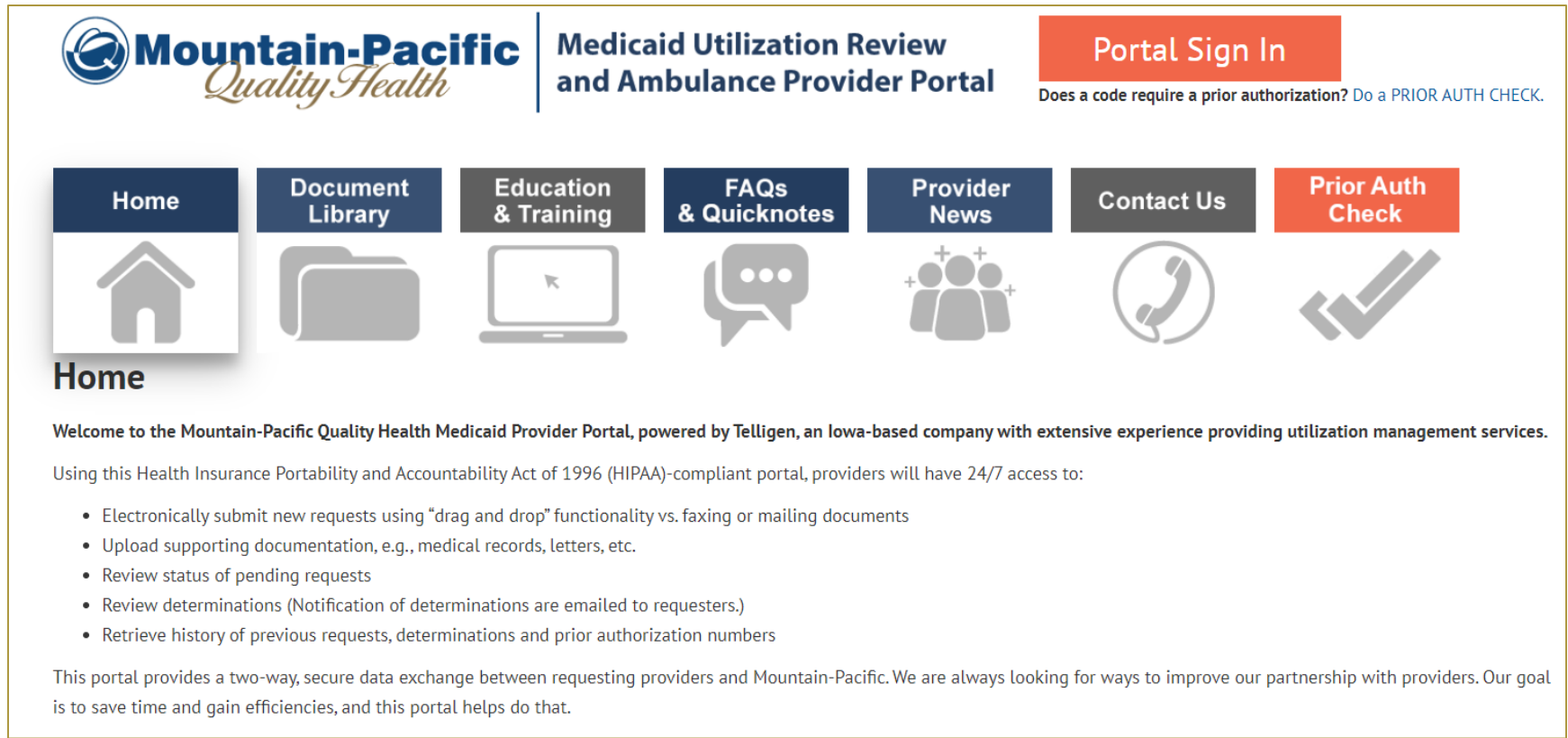
# PROVIDER PORTAL

# Provider Portal

- Beginning **Monday, August 10, 2020**, users who have completed an Authorized Official Packet and have received their credentials will login to the system to begin submitting review requests for Physician Administered Drugs.
- Providers will access the Qualitrac system via the Provider Portal
- Please bookmark  
<http://www.mpqhf.org/corporate/medicaid-portal-home>
- Use the log-in link on the top right-hand corner of the website.
- Monitor this website for ongoing information pertaining to the Provider Portal and the review process.

Please bookmark this site:

<http://www.mpqhf.org/corporate/medicaid-portal-home/>



The screenshot shows the homepage of the Mountain-Pacific Quality Health Medicaid Utilization Review and Ambulance Provider Portal. At the top left is the logo for Mountain-Pacific Quality Health. To the right of the logo is the text "Medicaid Utilization Review and Ambulance Provider Portal". Further right is a red button labeled "Portal Sign In" with the text "Does a code require a prior authorization? Do a PRIOR AUTH CHECK." below it. Below these elements is a navigation bar with seven items: Home (with a house icon), Document Library (with a folder icon), Education & Training (with a laptop icon), FAQs & Quicknotes (with a speech bubble icon), Provider News (with a group of people icon), Contact Us (with a telephone icon), and Prior Auth Check (with a checkmark icon). The "Home" item is highlighted. Below the navigation bar is the heading "Home" and a paragraph of text: "Welcome to the Mountain-Pacific Quality Health Medicaid Provider Portal, powered by Telligen, an Iowa-based company with extensive experience providing utilization management services. Using this Health Insurance Portability and Accountability Act of 1996 (HIPAA)-compliant portal, providers will have 24/7 access to:" followed by a bulleted list of features: "Electronically submit new requests using 'drag and drop' functionality vs. faxing or mailing documents", "Upload supporting documentation, e.g., medical records, letters, etc.", "Review status of pending requests", "Review determinations (Notification of determinations are emailed to requesters.)", and "Retrieve history of previous requests, determinations and prior authorization numbers". At the bottom of the page is another paragraph: "This portal provides a two-way, secure data exchange between requesting providers and Mountain-Pacific. We are always looking for ways to improve our partnership with providers. Our goal is to save time and gain efficiencies, and this portal helps do that."

# Provider Portal Access

- The Provider Portal utilizes a delegated security model.
  - A delegated security model requires an organizational executive (Provider Executive) to “delegate” administrative rights to one or more individuals within their organization (Authorized Official).
- Each facility is required to have at least one Authorized Official.
- The Authorized Official will:
  - Be the point of contact for the organization
  - Add, remove or edit Provider Users accounts

***PLEASE NOTE - HIPAA and DHMH compliance rules require all staff entering reviews or accessing the portal MUST have their own log-in and password. Do not create generic log-ins.***



# Provider Portal

- Your Authorized Official will create your user profile in the Qualitrac system
- You will receive an email with your username and a temporary link to the portal.
- Click on the link within the email to be directed to the reset password modal. There you will enter your username and establish your password using the password criteria shown on the page.
- NOTE: If you do not receive the email, please check your junk email box and/or contact your organization's IT department to ensure the email is not being blocked by your own security regulations.
- You must establish your password within 24 hours of receipt of the email. For security reasons, the link will expire after 24 hours.

# **SUBMITTING A REVIEW REQUEST**

# Provider Portal

- To get started, navigate to the website:  
<http://www.mpqhf.org/corporate/medicaid-portal-home/>
- Click on **Portal Sign In** at the top right-hand corner to log in to the portal.



**Mountain-Pacific**  
*Quality Health*

Medicaid Utilization Review  
and Ambulance Provider Portal

**Portal Sign In**  
Does a code require a prior authorization? Do a [PRIOR AUTH CHECK](#).

Home Document Library Education & Training FAQs & Quicknotes Provider News Contact Us Prior Auth Check

**Home**

Welcome to the Mountain-Pacific Quality Health Medicaid Provider Portal, powered by Telligen, an Iowa-based company with extensive experience providing utilization management services.

Using this Health Insurance Portability and Accountability Act of 1996 (HIPAA)-compliant portal, providers will have 24/7 access to:

- Electronically submit new requests using “drag and drop” functionality vs. faxing or mailing documents
- Upload supporting documentation, e.g., medical records, letters, etc.
- Review status of pending requests
- Review determinations (Notification of determinations are emailed to requesters.)
- Retrieve history of previous requests, determinations and prior authorization numbers

This portal provides a two-way, secure data exchange between requesting providers and Mountain-Pacific. We are always looking for ways to improve our partnership with providers. Our goal is to save time and gain efficiencies, and this portal helps do that.

# Provider Portal

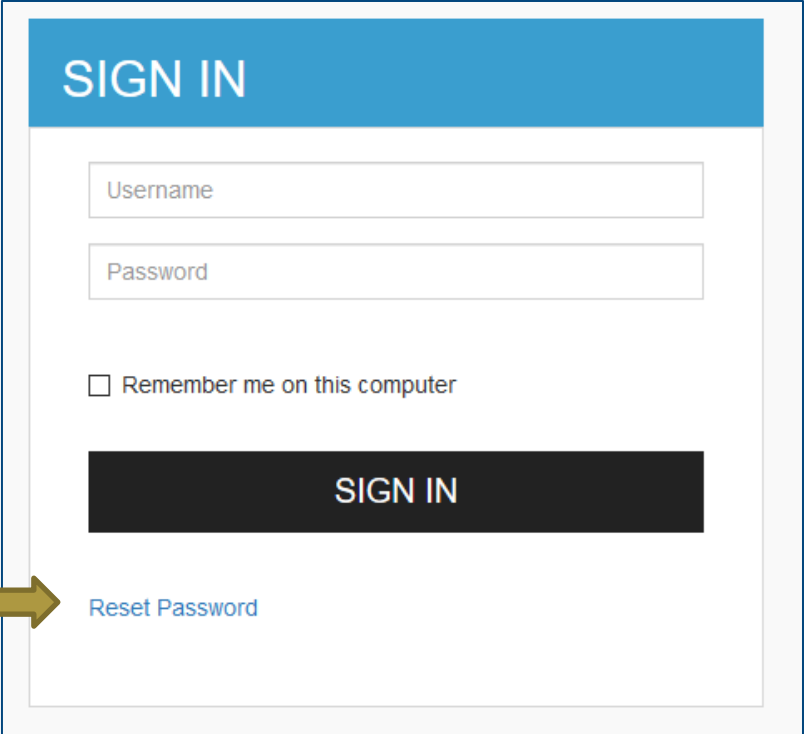
On the sign-in page:

1. Enter the username you were assigned.
2. Use the password you established.
3. Click **SIGN IN** to access the system.

A screenshot of the sign-in page for the Provider Portal. The page has a blue header with the text "SIGN IN" in white. Below the header, there are two input fields: "Username" and "Password". Below the "Password" field, there is a checkbox labeled "Remember me on this computer". Below the checkbox, there is a large black button with the text "SIGN IN" in white. At the bottom of the form, there is a link labeled "Reset Password" in blue text.

# Provider Portal

- There is a blue “Reset Password” link below the sign-in button. This can be used to change/reset your password whenever needed, including IF your initial temporary link expired.
- Do not bookmark this page. The security around the log-in page will cause issues the next time you log in.



**SIGN IN**

Username

Password

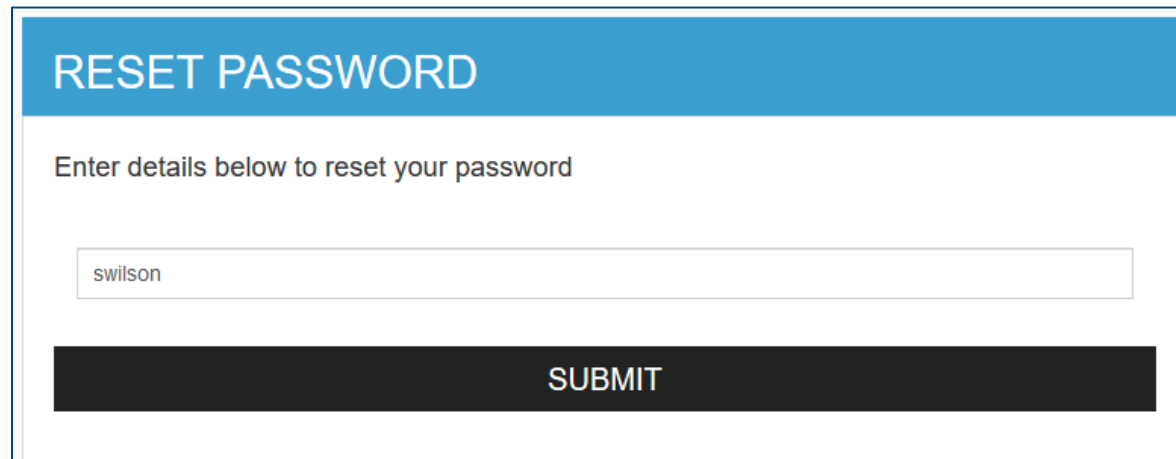
Remember me on this computer

**SIGN IN**

[Reset Password](#)

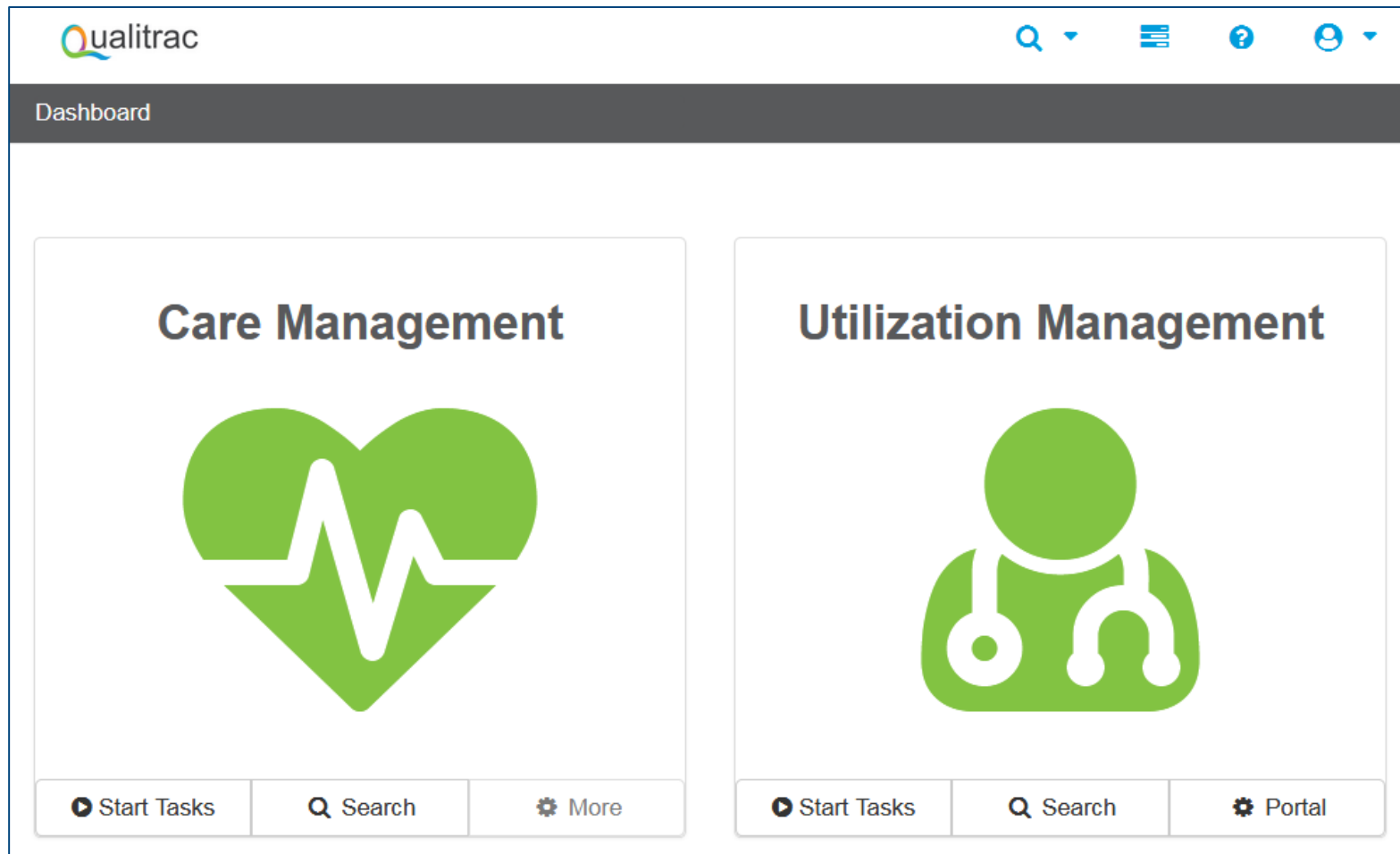
# Provider Portal

- The Reset Password modal will open. It will ask you to enter your username. Please enter the username you utilize to log in to the system. Do not enter your email address.
- The system will recognize your user id, find the email associated to your account and send you an email with a link to reset your password.



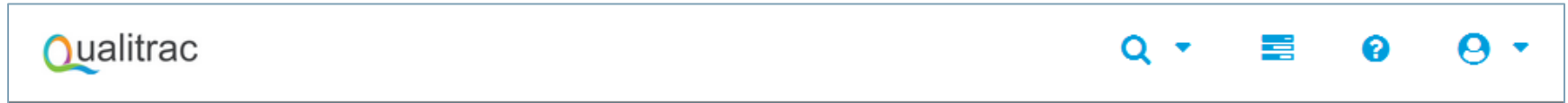
The image shows a screenshot of a 'RESET PASSWORD' modal form. The form has a blue header with the text 'RESET PASSWORD' in white. Below the header, there is a text prompt: 'Enter details below to reset your password'. Underneath this prompt is a text input field containing the username 'swilson'. At the bottom of the form is a black button with the text 'SUBMIT' in white.

# Qualitrac Landing Page



The image shows a screenshot of the Qualitrac dashboard. At the top left is the Qualitrac logo. The top right contains navigation icons: a search icon, a menu icon, a help icon, and a user profile icon. Below the navigation bar is a dark grey header with the word "Dashboard". The main content area features two large white cards. The left card is titled "Care Management" and features a green heart icon with a white ECG line. Below the card are three buttons: "Start Tasks", "Search", and "More". The right card is titled "Utilization Management" and features a green icon of a person with a stethoscope. Below this card are three buttons: "Start Tasks", "Search", and "Portal".

# Navigational Tools



This is the Provider Portal Menu Bar. This will remain available to you wherever you are in the system.



The Qualitrac logo will take you back to the landing page from wherever you are currently working in the system.



The “magnifying glass” will open search options for you to search for a specific case or a specific member.



This icon indicates the task queue. This is where you will go to complete any assigned tasks such as Requests for Information.



This icon will take you to the Knowledge Center. The Knowledge Center provides user guides, FAQs and Tip Sheets.

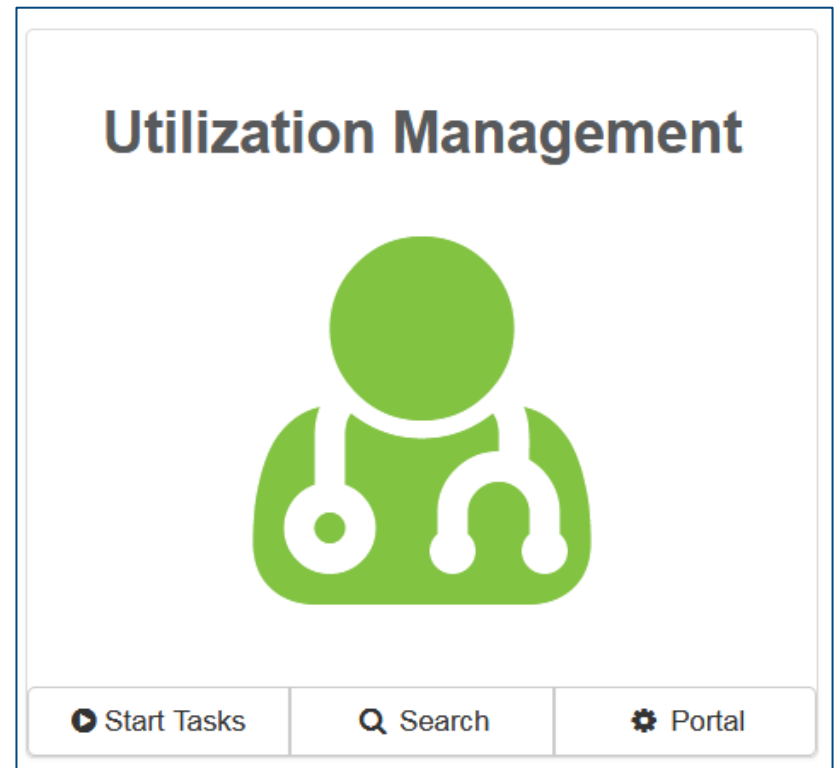


Selecting this icon will allow you to view and manage your profile. Here you can make changes to your phone number, email address, etc.



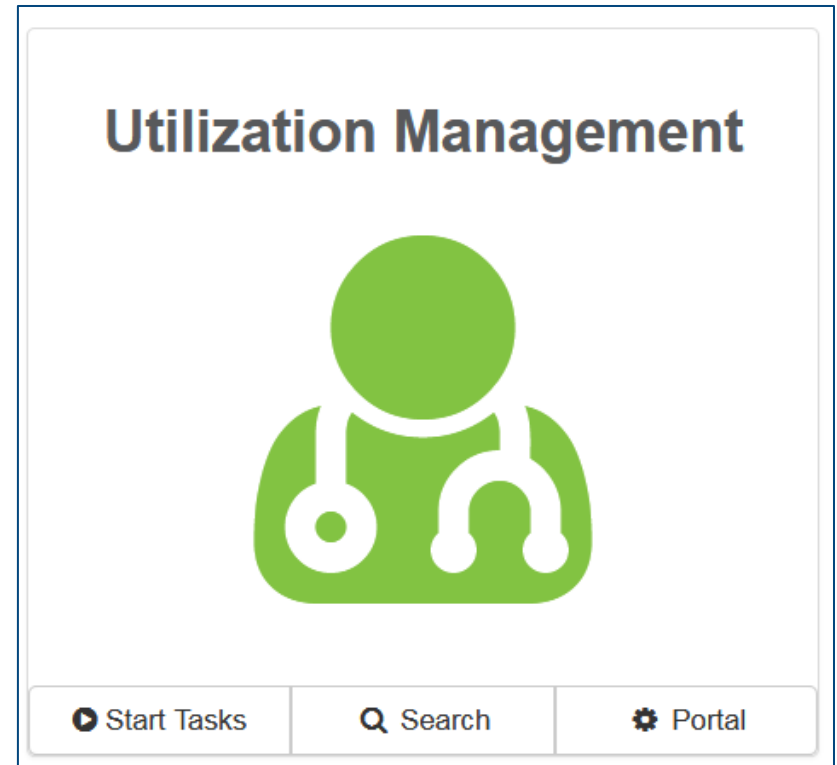
# Utilization Management Module

- **Start Tasks** will take you to the task queue to view tasks that have been assigned to you, such as requests for additional information.
- **Search** will allow you to search for a member or a case, just like the magnifying glass at the top of the page.



# Find a member

Click on **Search** to find a member and start your review request.



# Find a member

Enter the **Member ID** and **Date Of Birth** to start the search. The Member ID and the Date of Birth must match the member data in our system. If it does not match, please confirm the member information and try again.

Dashboard / Task Queue

Scheduled Tasks Member Search Cases Case/Request/Claim Search

Member ID *	Last Name	First Name	Middle Name	Date Of Birth *	Gender
<input type="text" value="423076646"/>				<input type="text" value="07/17/1991"/>	

# Find a member


Click on any of the data fields in blue to access the member information or to start a new review for the member.

Dashboard / Task Queue

Scheduled Tasks **Member Search** Cases Case/Request/Claim Search

Member ID *	Last Name	First Name	Middle Name	Date Of Birth *	Gender
<input type="text" value="423076646"/>				<input type="text" value="07/17/1991"/>	
423076646	Smith	Alex		07/17/1991	Female

Show  entries Showing 1 to 2 of 2 entries Previous  Next



# Member Hub

Clicking on the member link will bring you to the Member Hub. The Member Hub organizes the request workflow and the member information into several panels. Here you will be able to view information related to this member including his/her contact info and any review requests that have been previously submitted.

The screenshot shows the Member Hub interface for Alex Smith. At the top, there is a breadcrumb trail: Dashboard / Task Queue / Member Hub. On the right, the user is identified as Alex Smith - 423076646 - 07/17/1991. Below this, a profile card for Alex Smith includes a 'View Member Details' button. A summary row displays Member ID: 423076646, Date of Birth: 07/17/1991, Phone Number, and Client: Montana - Mountain Pacific. The main section is titled 'Utilization Management' and features a 'View Cases' button and a '+ Add' button. A message states 'Hiding original requests for adjustments.' with a 'Show' button. Below this, there is a 'Show 10 entries' dropdown and a search box. A table lists review requests with columns for Status, Case ID, Request ID, Review Type, Timing, Treating Prov./Phys., Treating Facility, Req. Start, Req. End, Outcome, and Action. One entry is shown: Not Submitted, Case ID 3543, Request ID 3555, Review Type Physician Administrative Drug, and Timing Retrospective. At the bottom, it shows 'Showing 1 to 1 of 1 entries' and navigation buttons for Previous, 1, and Next.

Dashboard / Task Queue / Member Hub Alex Smith - 423076646 - 07/17/1991

**Alex Smith** View Member Details

Member ID: 423076646 Date of Birth: 07/17/1991 Phone Number: Client: Montana - Mountain Pacific

**Utilization Management** View Cases + Add

Hiding original requests for adjustments. Show

Show 10 entries Search:

Status	Case ID	Request ID	Review Type	Timing	Treating Prov./Phys.	Treating Facility	Req. Start	Req. End	Outcome	Action
Not Submitted	3543	3555	Physician Administrative Drug	Retrospective						...

Showing 1 to 1 of 1 entries Previous 1 Next

# View Member Details

Clicking on the **View Member Details** box opens the window to provide more information regarding the member.

Oliva Barth				Hide Member Details
Member ID: 30412332000	Date of Birth: 05/19/1947	Phone Number:	Client: MARYLAND	
<b>Phone</b> <u>Home:</u> (371) 303-1134 <u>Cell:</u> <u>Work:</u> <u>Other:</u>	<b>Mailing Address</b> 6684 Spruce Lane , 21231	<b>Preferred Contact Information</b>		
<b>Email</b> <u>Home:</u> <u>Work:</u>	<b>Physical Address</b> ,	<b>Method</b>	<b>Language</b> Not Supplied	
		<b>Notes</b>		
View Even More Member Details				



**Hide Member Details** will minimize the panel.

**View Even More Member Details** will provide additional info such as member eligibility information.

# Utilization Management Panel

The Utilization Management Panel will display information related to any UM review requests previously submitted for the member.

Use the **Add** button to start a new request.



## Utilization Management

View Cases + Add

Hiding original requests for adjustments. Show

Show  entries Search:

Status	Case ID	Request ID	Review Type	Timing	Treating Prov./Phys.	Treating Facility	Req. Start	Req. End	Outcome	Action
Not Submitted	3543	3555	Physician Administrative Drug	Retrospective						...

Showing 1 to 1 of 1 entries Previous 1 Next


# Add New Review Request

To begin a new request, you will first fill in the Authorization Request panel. The date and time of your request is completed for you.


Alex Smith Member ID: 423076646 DOB: 07/17/1991

Phone Number: Client: Montana - Mountain Pacific

### Authorization Request

**Date Request Received \*** 06/12/2020 03:01 pm  **Review Type \***  **Place of Service \***  **Type of Service \***

**Timing \***



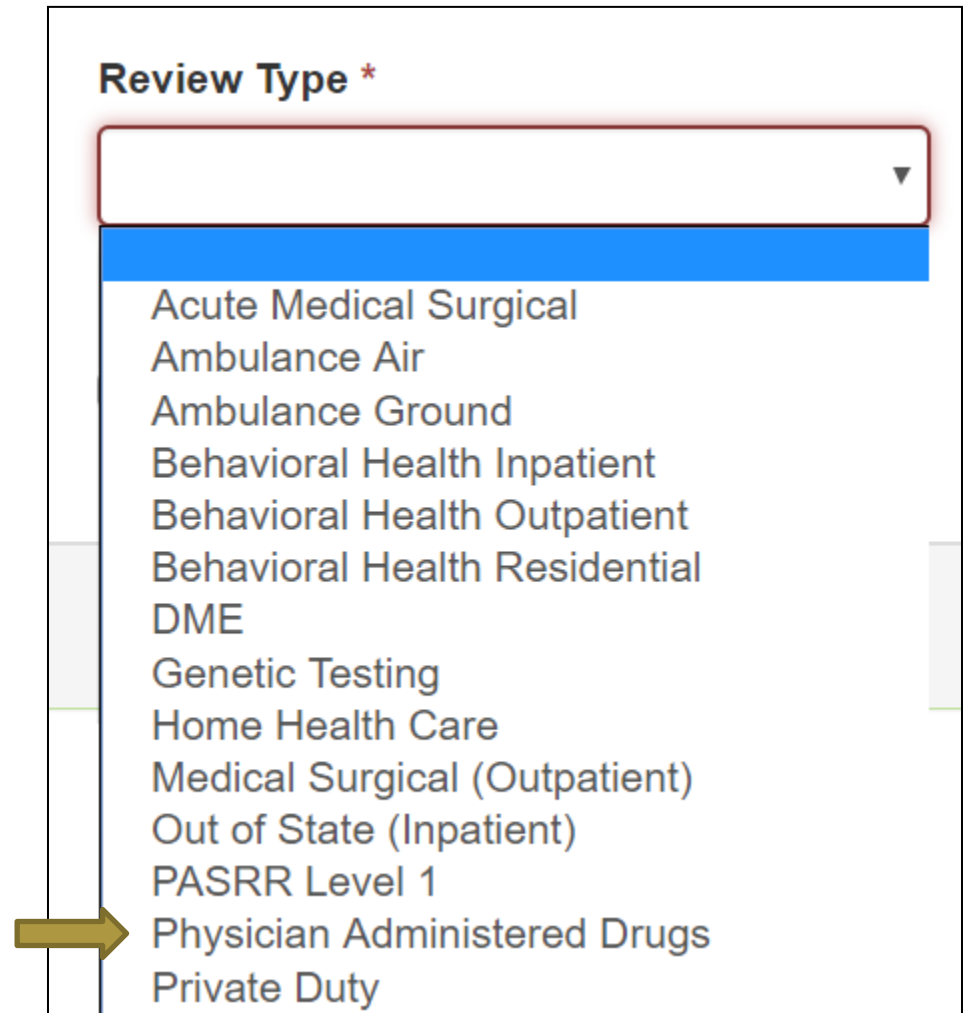


# Review Type

- **Review Type:** Select the type of review you are requesting.
- Select Physician Administered Drugs

Review Type \*

- Acute Medical Surgical
- Ambulance Air
- Ambulance Ground
- Behavioral Health Inpatient
- Behavioral Health Outpatient
- Behavioral Health Residential
- DME
- Genetic Testing
- Home Health Care
- Medical Surgical (Outpatient)
- Out of State (Inpatient)
- PASRR Level 1
- Physician Administered Drugs
- Private Duty



# Place of Service

- **Place of Service** is where the care is provided. Please select from the drop-down options.

**Place of Service \***

Office ▼

Office

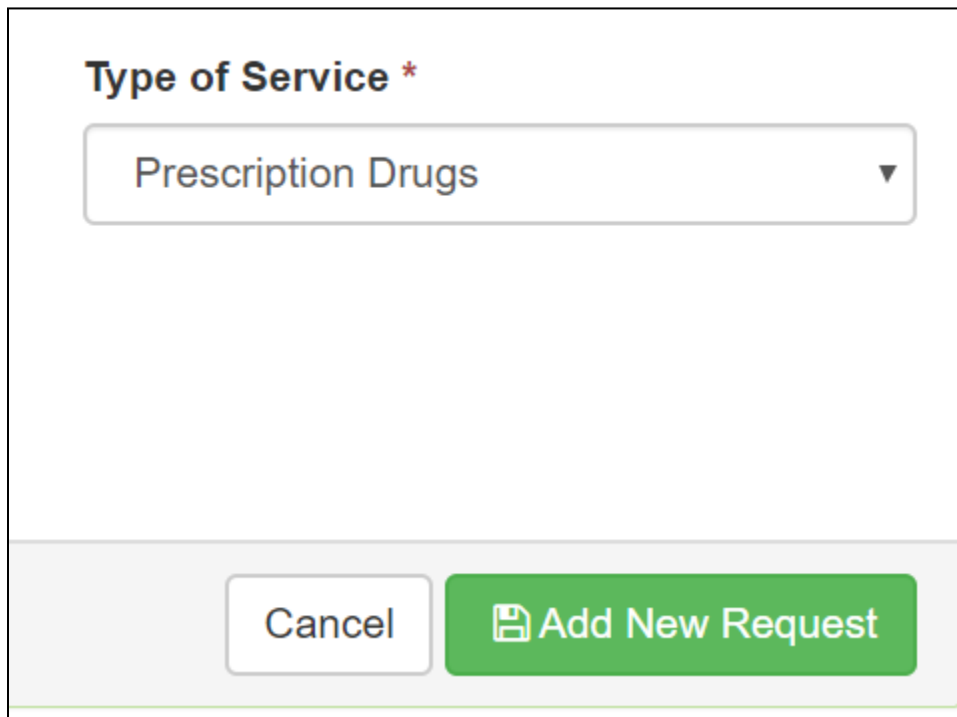
Outpatient Hospital

Ambulatory Surgical Center

Other Place of Service

# Type of Service

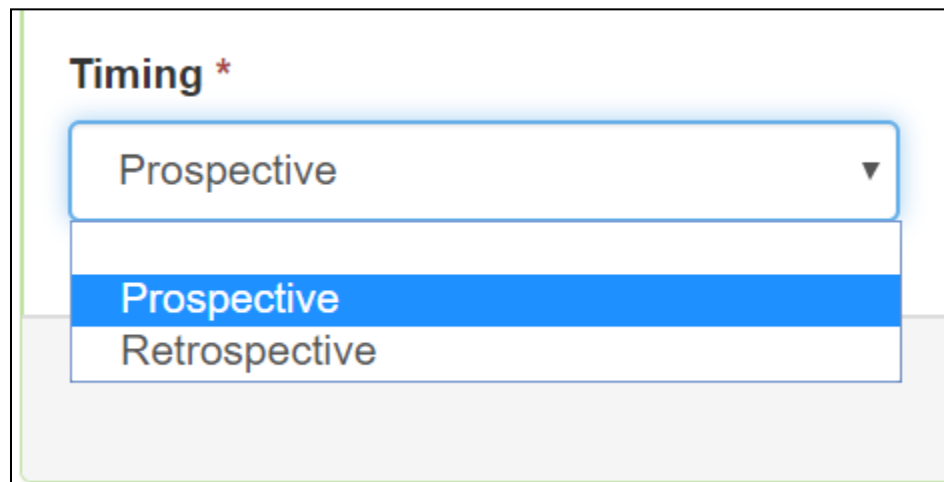
- **Type of Service** is what type of care is being provided. Here you will select Prescription Drugs.



The image shows a screenshot of a web form. At the top, the text "Type of Service \*" is displayed in a bold, dark font. Below this is a dropdown menu with a light gray border and rounded corners. The text "Prescription Drugs" is visible inside the dropdown, and a small downward-pointing triangle is on the right side. At the bottom of the form, there are two buttons: a white button with a gray border labeled "Cancel" and a green button with a white border labeled "Add New Request". The green button also features a white document icon to the left of the text.

# Timing

- **Timing** indicates when you are notifying us of the request.
  - For Physician Administered Drugs you will select either Prospective or Retrospective
  - Prospective - A review request submitted prior to starting services
  - Retrospective - A review request submitted after all services have been provided



The image shows a screenshot of a web form. At the top left of the form area, the text "Timing \*" is displayed in a bold, dark font. Below this text is a dropdown menu. The menu is currently open, showing three options: "Prospective", "Prospective", and "Retrospective". The first "Prospective" option is highlighted with a blue background, indicating it is the selected value. The second "Prospective" option is also visible, and the "Retrospective" option is at the bottom of the list. A small downward-pointing triangle is visible on the right side of the dropdown box.


# Authorization Request Panel

- When all the selections are complete, you will select **Add New Request**.
- You can select **Cancel** if you've made the request in error.

Alex Smith Member ID: 423076646 DOB: 07/17/1991

Phone Number: Client: Montana - Mountain Pacific

### Authorization Request

**Date Request Received \***  

**Review Type \***

**Place of Service \***



**Type of Service \***

**Timing \***



# Dates of Service

- Next, you will indicate the Service Start Date and the Service End Date

Alex Smith		Member ID: 423076646	DOB: 07/17/1991		
Phone Number:	Client: Montana - Mountain Pacific				
<b>Authorization Request</b> <span style="float: right;">Actions ▾</span>					
<b>Case Id</b> 3545	<b>Request ID</b> 3557	<b>Date Request Received</b> 06/12/2020 03:04 pm	<b>Review Type</b> Physician Administrative Drug	<b>Place of Service</b> Office	<b>Type of Service</b> Prescription Drug
<b>Timing</b> Prospective					
<b>Dates of Service</b>					
<b>Service Start Date *</b>		<b>Service End Date *</b>			
<input type="text" value="MM/DD/YYYY"/> 		<input type="text" value="MM/DD/YYYY"/> 			



# Coverage Panel

- The Coverage Panel will display information about the member's coverage and eligibility.
- The Medicare Indicator, Third-Party Liability and EPSDT Indicator will default to No/Not Supplied unless there is information in our system from the State eligibility file.

Coverage				
Group	Section	Plan	Start Date	End Date
Montana		Full Medicaid	09/01/2010	06/30/2020
Montana		Managed Care	10/01/2018	06/30/2020
Montana		Healthy Kids	05/01/2020	06/30/2020

Medicare Indicator \*

Third Party Liability \*

EPSDT Indicator \*  Yes  No

# Coverage Panel

If the information we have in the system indicates the member does not have eligibility coverage, you will be alerted that the member is not eligible AND you will be required to provide a reason for continuing with your review request.

### Coverage

**⚠ Member Not Eligible** ←

The member does not meet eligibility requirements. Please provide a reason to explain why you are continuing with this authorization request.

Show  entries Search:

Group	Section	Plan	Start Date	End Date
No data available in table				

Showing 0 to 0 of 0 entries Previous Next

Medicare Indicator \*  Third Party Liability \*

Eligibility Comment \* ←



# Entering Provider Information

The next sections ask for information related to the Treating Provider and the Ordering Provider. You will click the **Add** button on each line to provide the necessary information.

Providers *								
Type	Name	NPI	Address	Phone	Primary Taxonomy	PPO Redirect Reason	Comments	Action
Treating Provider *					Not Supplied			+ Add
Ordering Provider *					Not Supplied			+ Add



# Entering Provider Information

- Clicking **Add** will open a search box. You can search for providers by entering an NPI or by filling in any of the information boxes provided.
- When you have entered the necessary information, click **Search** to locate the physician or facility.





The screenshot shows a search form with the following fields and controls:

- NPI Number**: Text input field.
- Other ID Number**: Text input field.
- Last / Organization Name**: Text input field containing "wilson".
- First Name**: Text input field containing "doug".
- City**: Text input field.
- State**: Dropdown menu showing "Maryland".
- Zip Code**: Text input field.
- Taxonomy**: Dropdown menu.
- Search using NPES**: A green toggle switch labeled "ON".
- Search**: A blue button with a magnifying glass icon and the text "Search".



# Entering Provider Information

- Clicking **Search** will return any results that meet the criteria you entered.
- Use the green plus box to the left of the name to select the provider/facility you need for the review.




	Name	Network	NPI	Other ID	Type	Primary Practice Address	Phone	Primary Taxonomy	Source
	WILSON & CHIZMAR PHYSICAL THERAPY ASSOCIATES PA		1396870283			8114 Sandpiper Cir Suite #106 Nottingham, MD, 212364934	(410) 933-3737	Physical Therapist	NPPES
	WILSON MD, DOUGLAS	A-NO PAY,RENDERING ONLY	1679797260	215410200		Clinic #: 00 Addr: 9901 Medical Center Drive Rockville, MD, 20850	(240) 826-7550		Provider File




# Entering Provider Information


- If the Ordering Provider and the Treating Provider are the same, you can select **Copy Treating Provider to Ordering Provider** and the system will prepopulate the information for you.

Providers \*

Type	Name	NPI	Address	Phone	Primary Taxonomy	PPO Redirect Reason	Comments	Action
Treating Provider	 WILSON & CHIZMAR PHYSICAL THERAPY ASSOCIATES PA	1396870283	8114 Sandpiper Cir Suite #106 Nottingham, MD, 21236	(410) 933- 3737	Physical Therapist			
Ordering Provider *			Not Supplied					





Provider Organization Visibility ?

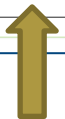
- + Add New
-  Copy Treating Provider to Ordering Provider



# Entering Provider Information

- You will now see the Treating Provider and the Ordering Provider information populated in the Providers panel.
- You can select **Remove** if you've made a selection in error.

Providers								
Type	Name	NPI	Address	Phone	Primary Taxonomy	PPO Redirect Reason	Comments	Action
Treating Provider	 WILSON & CHIZMAR PHYSICAL THERAPY ASSOCIATES PA	1396870283	8114 Sandpiper Cir Suite #106 Nottingham, MD, 21236	(410) 933- 3737	Physical Therapist			
Ordering Provider	 WILSON, DOUGLAS	1679797260	54 Hospital Dr Osage Beach, MO, 65065	(573) 348- 8000	Emergency Medicine			



# Provider Organization Visibility

To ensure all applicable end users have access to the review in the Qualitrac system, please select the organization or facility in the Provider Organization Visibility panel.

**Provider Organization Visibility** ⓘ

Wilson, Stephanie, User

ST LUKE'S REGIONAL MEDICAL CENTER

# Diagnosis

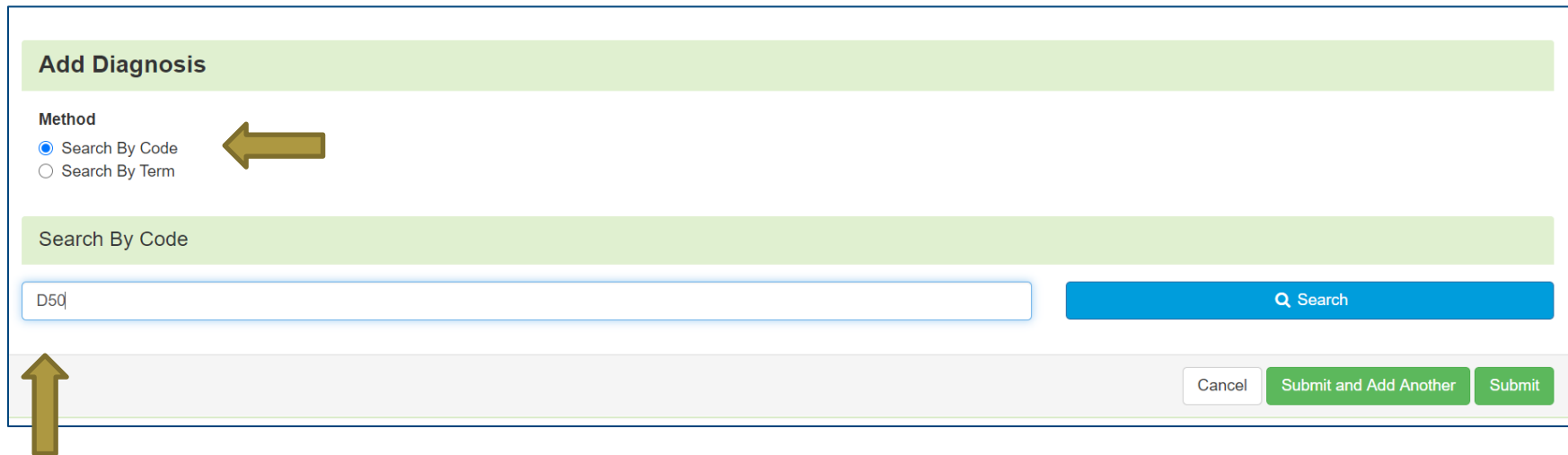
- The Diagnosis panel is where you enter the diagnosis information related to this review.
- Use the **Add** button to add a new diagnosis to the panel.



Diagnosis								+ Add
Seq.	Code	Description	Final Dx	POA	NOS	Action		
No Diagnoses Supplied								

# Diagnosis

- You can search by Code or by Term. Searching by code will let you enter a code directly and search for it as shown in the example below.



**Add Diagnosis**

**Method**

Search By Code ←

Search By Term

**Search By Code**

D50

Search

Cancel Submit and Add Another Submit

↑



# Diagnosis

The system will then provide a list of results to select from. Select the one you want added to the review by clicking on the radio button to the left of the code.

Anemia Search

Show 10 entries Search:

Code	Description
<input type="radio"/> D46.0	REFRACTORY ANEMIA W/O SIDEROBLASTS SO STATED
<input type="radio"/> D46.1	REFRACTORY ANEMIA WITH RINGED SIDEROBLASTS
<input type="radio"/> D46.2	REFRACTORY ANEMIA WITH EXCESS OF BLASTS [RAEB]
<input type="radio"/> D46.20	REFRACTORY ANEMIA WITH EXCESS BLASTS UNSPECIFIED
<input type="radio"/> D46.21	REFRACTORY ANEMIA WITH EXCESS BLASTS 1
<input type="radio"/> D46.22	REFRACTORY ANEMIA WITH EXCESS BLASTS 2
<input type="radio"/> D46.4	REFRACTORY ANEMIA UNSPECIFIED
<input checked="" type="radio"/> D50	IRON DEFICIENCY ANEMIA
<input type="radio"/> D50.0	IRON DEFICIENCY ANEMIA SEC TO BLOOD LOSS CHRONIC
<input type="radio"/> D50.8	OTHER IRON DEFICIENCY ANEMIAS

Showing 1 to 11 of 114 entries Previous 1 2 3 4 5 ... 12 Next

# Diagnosis



- After selecting the diagnosis you want added to the review, you can select **Submit** or **Submit and Add Another**.
  - **Submit** will add the diagnosis to the review.
  - **Submit and Add Another** will allow you to submit the diagnosis to the review and re-open the window where you can repeat the process and search for another diagnosis.

The screenshot shows a web interface for adding a diagnosis. At the top, there is a header 'Add Diagnosis'. Below it, the 'Method' section has two radio buttons: 'Search By Code' (selected) and 'Search By Term'. A search bar contains 'D50' and a blue 'Search' button. Below the search bar, there is a 'Show 10 entries' dropdown and a 'Search:' input field. A table displays the search results with columns 'Code' and 'Description'. The table has one row with 'D50' and 'IRON DEFICIENCY ANEMIA', which is selected with a radio button. Below the table, it says 'Showing 1 to 1 of 1 entries'. At the bottom right, there are three buttons: 'Cancel', 'Submit and Add Another', and 'Submit'. A yellow arrow points to the 'Submit and Add Another' button.

Code	Description
<input checked="" type="radio"/> D50	IRON DEFICIENCY ANEMIA

# Diagnosis

- If more than one diagnosis is entered, you do have the ability to drag and drop to reorder them.
- You can use the trash can icon to the right of the diagnosis to delete anything entered incorrectly in this panel.

Diagnosis <span style="float: right;">+ Add</span>							
Seq.	Code	Description	Final Dx	POA	NOS	Action	
1	D50	IRON DEFICIENCY ANEMIA	<input type="radio"/>	<input type="checkbox"/>			
2	D75.82	HEPARIN INDUCED THROMBOCYTOPENIA HIT	<input type="radio"/>	<input type="checkbox"/>			



# Procedure/HCPCS Codes

- The Procedures panel is where you will enter the HCPCS Code information related to this review.
- Use the **Add** button to add a new code to the panel.
- You can search by Code or by Term. Searching by code will let you enter a code directly and search for it, as shown in the example below.

The screenshot shows a web interface for managing procedures. At the top right is an orange '+ Add' button. Below it is a table with columns: Seq., Code, Description, NOS, Mod. 1, Mod. 2, Qty., Frequency, Cost, and Action. The table is currently empty, displaying 'No Procedures Supplied'. Below the table is a light green 'Add Procedure' section. Underneath, the 'Method:' section has two radio buttons: 'Search by Code' (selected) and 'Search by Term'. Below this is a light green 'Search By Code' section containing a search input field with the text '96372' and a blue 'Search' button with a magnifying glass icon. Three brown arrows point to the '+ Add' button, the search input field, and the 'Search' button.

Seq.	Code	Description	NOS	Mod. 1	Mod. 2	Qty.	Frequency	Cost	Action
No Procedures Supplied									

Method:

Search by Code  
 Search by Term

Search By Code

96372

Search

# Procedure/HCPCS Codes


- This process works the same as in the Diagnosis panel.
- After entering a code or term to search by and clicking search, the system will provide you a list of results to select from. Select the one you want added to the review by clicking on the radio button to the left of the code.

**Procedures** + Add

Seq.	Code	Description	NOS	Mod. 1	Mod. 2	Qty.	Frequency	Cost	Action
No Procedures Supplied									

**Add Procedure**

**Method:**

Search by Code 

Search by Term


**Search By Code**

96372 Q Search

Show **10** entries Search:

Code	Description
<input checked="" type="radio"/> 96372	THERAPEUTIC PROPHYLACTIC/DX INJECTION SUBQ/IM

Showing 1 to 1 of 1 entries Previous **1** Next



# Procedure/HCPCS Codes

- Indicate modifiers if applicable – (this is not a required field)
- Indicate the number of units you are requesting.
- Select **Submit** or **Submit and Add Another**

The screenshot shows a form with the following sections and fields:

- Modifiers**: A green header bar with a left-pointing arrow pointing to the **Modifier 1** text label.
- Modifier 1**: A text input field.
- Procedure Details**: A green header bar.
- Units \***: A text input field containing the value "1", with a left-pointing arrow pointing to it.
- Units Qualifier \***: A dropdown menu showing "unit(s)".
- Frequency**: A text input field.
- Frequency Qualifier**: A dropdown menu.
- Total Cost**: A text input field with a "\$" symbol on the left.
- Buttons**: Three buttons at the bottom right: "Cancel", "Submit and Add Another", and "Submit". An upward-pointing arrow points to the "Submit and Add Another" button.

# Documentation

The next panel is the Documentation panel. This is where you will upload any related clinical documentation necessary for the review to be processed. To submit documentation, click **Add**.



### Documentation

+ Add  

Name	Category	Topic	Date Added	Uploaded By	Action
No data available in table					

Show 10 entries      Showing 0 to 0 of 0 entries      Previous      Next

# Documentation

This will open a modal where you can drag and drop files or select **Click here** to open a Windows directory and find the necessary files on your system.

File Upload

**File Upload Restrictions**

- Extensions: .pdf, .doc, and .docx
- Size: Less than or equal to 300 MB

Drop a file here or [Click here](#) to Upload

File Name	Size	Remove
No Files selected for upload		

Name \*

Category \*

Close Submit



# Documentation Panel

## Please note:

- Documents must be in PDF or Word format.
- The file name cannot contain spaces or special characters.
- The name of the document can be edited in the Name box as applicable.

The screenshot shows a 'File Upload' dialog box with the following elements:

- File Upload Restrictions:** A light blue box containing an information icon and the text 'File Upload Restrictions'. Below it are two bullet points: 'Extensions: .pdf, .doc, and .docx' and 'Size: Less than or equal to 300 MB'.
- Drop Zone:** A dashed border area with the text 'Drop a file here or [Click here](#) to Upload'.
- Table:** A table with three columns: 'File Name', 'Size', and 'Remove'. The table body contains the text 'No Files selected for upload'.
- Form Fields:** Two input fields labeled 'Name \*' and 'Category \*'. The 'Name' field is a text input, and the 'Category' field is a dropdown menu.
- Buttons:** 'Close' and 'Submit' buttons at the bottom right.

# Documentation Panel

- **Category** allows you to select the type of document you are attaching. This will most always be clinical.
- **Topic** further defines the type of clinical information you are attaching.
- Click **Upload** to attach the information to the review.
- This can be repeated as many times as necessary to attach all relevant documentation to your request.

**i File Upload Restrictions**

- Extensions: pdf, gif, jpg, jpeg, png, bmp, rtf, doc, docx, xls, xlsx, txt, xps, csv
- Size: Less than or equal to 300 Mb

Drop a file here or [Click here](#) to Upload

File Name	Size	Remove
History and Physical.docx	12 KB	

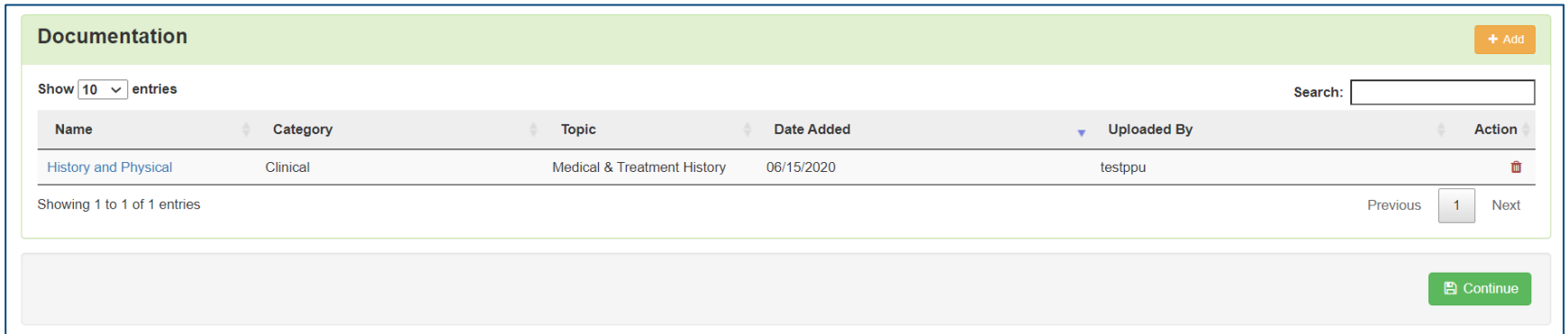
**Name \***

**Category \***

**Topic \***

# Documentation Panel

When all the request steps have been completed, click **Continue** in the bottom right corner of the page.



The screenshot displays a 'Documentation' panel with a light green header. In the top right corner of the header is an orange '+ Add' button. Below the header, there is a search bar on the right and a 'Show 10 entries' dropdown on the left. A table with the following columns is shown: Name, Category, Topic, Date Added, Uploaded By, and Action. The table contains one entry: 'History and Physical' (Name), 'Clinical' (Category), 'Medical & Treatment History' (Topic), '06/15/2020' (Date Added), and 'testppu' (Uploaded By). Below the table, it says 'Showing 1 to 1 of 1 entries'. At the bottom right of the panel, there is a green 'Continue' button with a document icon. A yellow arrow points to this button from below.

Name	Category	Topic	Date Added	Uploaded By	Action
History and Physical	Clinical	Medical & Treatment History	06/15/2020	testppu	

# MCG

- When you have entered all the requested information and click **Continue**, the system will next take you to the MCG tool (formerly known as Milliman Care Guidelines).
- MCG Guidelines do not apply to Physician Administered Drug requests.
- Click **Submit Request** to close this section.

**Authorization Request**

**Patient :** 112345678 **Name :** Kraft, Kevin **DOB :** 02/21/1973 **Gender :** Male [show more](#)

**Authorization :** EP5-00000094 **Type :** Procedure Pre-authorization **Status :** NoDecisionYet [show more](#)  
**Diagnosis Codes :** G80(ICD-10 Diagnosis)<sup>primary</sup> **Procedure Codes :** J0202(CPT/HCPCS)<sup>primary</sup>

**Procedure Code:** J0202 (CPT/HCPCS) MCG Guideline Documentation Not Required  
**Requested Units:** 1  
**Description :** INJECTION ALEMTUZUMAB 1 MG

[Submit Request](#) [Back](#)

*This system provides access to MCG evidence-based guidelines; however the determinations made using this system are directed by the health plan, based on a number of factors.*



# Attestation


The last step in the submission process is to certify that all information is accurate and complete. After reading the certification statement, you will enter your username in the Acknowledging User section and click the **Submit** button to send the review to Mountain-Pacific.

### User Attestation

**⚠ I certify...**

- that the submitted information is true, accurate and complete to the best of my knowledge.
- that the submitted information is supported within the patient's medical record.
- that I understand that any deliberate misrepresentation of any information in this medical review may subject me to liability under civil and criminal laws.
- that I understand an approval of a medical authorization request by Telligen does not guarantee payment for services.
- I agree to notify all involved parties of the outcome of this authorization request.

**Acknowledging User \***



# Comments

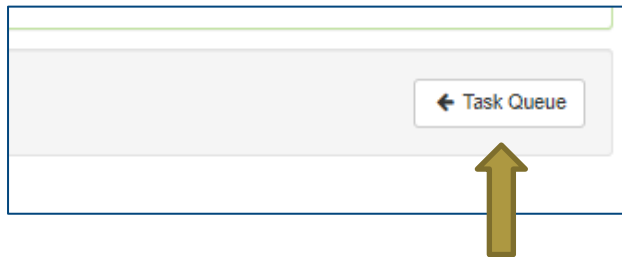
- After completing the attestation, users have the option to add a comment to the request if applicable.
- A comments modal will open, and the user can enter additional information related to the review.
- This is optional and not required to complete the review.
- Click **Submit**.



The image shows a screenshot of a 'Submit Review' modal window. The modal has a title bar with 'Submit Review' and a close button (X). Below the title bar, there is a section labeled 'Comments' with a large text input area. At the bottom of the modal, there are two buttons: 'Cancel' and 'Submit'. A yellow arrow points to the 'Submit' button.

# Summary

- After submitting your review request, you will be routed back to the Summary page. Here you can review all the details regarding the request as you submitted it.



- Select **Task Queue** at the bottom of the page to begin a new search and submit other reviews.

- Or you can use the links or icons at the top of the page to navigate through the Qualitrac system.





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# **VIEW REQUEST STATUS AND OUTCOMES**

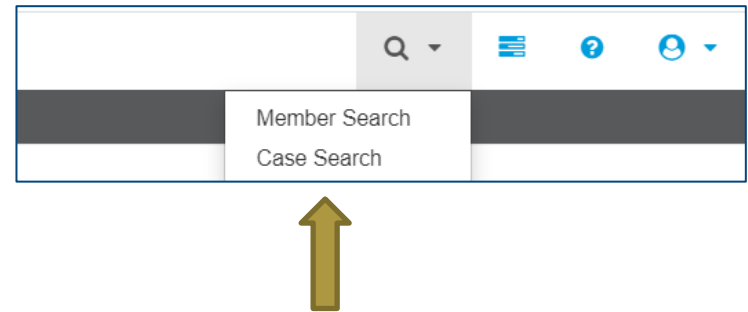


# Email Notifications

- Users will receive email notifications when:
  - Review Requests are received from the portal
  - You have started a review request but did not yet submit it
  - Additional information is requested
  - A review outcome is rendered

# View Status and Outcomes

- After a review has been submitted, you can find the review by clicking on the magnifying glass and completing either a Member Search or a Case Search.



# View Status and Outcomes

## Case Search

- If you are searching by Case ID, simply enter the Case ID in the box and click **Search**.
- Click on the blue link to be directed to that specific review.

Client: Montana - Mou

Method:  
 Search By Case ID  
 Search By Authorization ID  
 Search By Claim Number  
 Search By Request ID

Case ID: 3543

Search

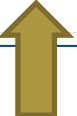
Show 10 entries

Search:

Case ID	Request ID	Review Type	Timing	Case Status	Date Request Received
3543	3555	Physician Administrative Drug	Retrospective	Case Creation	06/15/2020 09:04 am

Showing 1 to 1 of 1 entries

Previous 1 Next



# View Status and Outcomes

## Member Search


- If searching by using the Member Search function, you will be directed to the Member Hub.
- Click on the ... ellipsis to the right of the review you are searching for.
- Click on **View Request** to see the status and details of that review.
- If the request has not yet been reviewed by our clinical team, users also have the option to delete the request.

Show  entries Search:

Status	Case ID	Request ID	Review Type	Timing	Treating Prov./Phys.	Treating Facility	Req. Start	Req. End	Outcome	Action
Request Has Been Submitted	3543	3555	Physician Administrative Drug	Retrospective	WILSON & CHIZMAR PHYSICAL THERAPY ASSOCIATES PA		05/01/2020	05/31/2020		...

Showing 1 to 1 of 1 entries

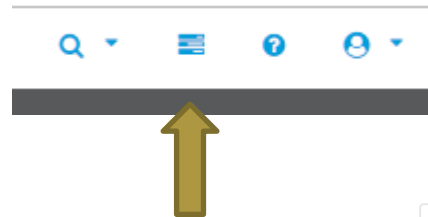
View Request  
Delete



# Request for Information

- If our clinical team determines additional information is needed before proceeding with the review, the Provider will receive an email and a Request for Information task in the Scheduled Task queue.
- Users can access the Scheduled Task Queue two ways.

From the top navigation bar



Or from Start Tasks button on the landing page



# Request for Information

- At the scheduled task queue, you will see all tasks currently assigned to you.
- HELPFUL TIP: If you click on the blue comment bubble to the left of the Request for Information task, a modal will open with a note from the reviewer indicating what information they are requesting.
- Click on the ellipsis to the left of the page, to start the task

Qualitrac 🔍 ☰ ⓘ 🗨️


Dashboard / Task Queue

Scheduled Tasks | Member Search | Cases | Case/Request/Claim Search

📅 View Calendar 9 Columns Selected

Task Type	Task Status	Member ID	Last Name	First Name	DOB	Review Type	Assignee	Task Scheduled Date
Request For Information	New	423076646	Smith	Alex	07/17/1991	Physician Administrative Drug	testppu	06/18/2020 09:43 am

Show 10 entries Showing 1 to 1 of 1 entries Previous 1 Next






# Request for Information

- Scroll to the Correspondence Panel to view the Request for Information letter.
- Click on the blue letter link to open it and see what information is being requested.

Correspondence + Add

Search:

Letter	Addressee	Date Sent
<a href="#">Telligen Request for Information</a>   	Ordering Provider	06/12/2020 16:22:37

Show  entries Showing 1 to 1 of 1 entries Previous  Next



# Request for Information

- To attach additional information to the request, scroll to the Documentation panel.
- Click on the **Add** button, as was demonstrated earlier in the presentation, to attach the additional clinical documentation.



### Documentation

+ Add

Show 10 entries Search:

Name	Category	Topic	Date Added	Uploaded By	Action
History and Physical	Clinical	Medical & Treatment History	06/15/2020	testppu	

Showing 1 to 1 of 1 entries Previous 1 Next



# Request for Information

- When you have added the necessary information, scroll to the bottom of the page and click the **Done** button. This will finalize the request and send it back to the clinical team to finish the review.
- When you click **Done**, the system will return you to the Scheduled tasks queue, and the task will no longer be visible.
- **Please do NOT start a new review request** when asked for additional clinical information. This will create a duplicate request and will delay the review process.

# View Outcome


- To view the outcome or determination of your request, go the Member Hub, find the review in the Utilization Management panel, click on the ellipsis to the right and select **View Request**.

Show  entries Search:

Status	Case ID	Request ID	Review Type	Timing	Treating Prov./Phys.	Treating Facility	Req. Start	Req. End	Outcome	Action
Request Has Been Submitted	3543	3555	Physician Administrative Drug	Retrospective	WILSON & CHIZMAR PHYSICAL THERAPY ASSOCIATES PA		05/01/2020	05/31/2020		...

Showing 1 to 1 of 1 entries

View Request  
Delete



# View Outcome

- Scroll down the page to the Outcomes panel.
- The determination will be displayed on the right.
- Click on the dark brown section of the panel to expand and view the details.

Outcomes	Review Outcome: Approved
(HCPCS) 96372 - THERAPEUTIC PROPHYLACTIC/DX INJECTION SUBQ/IM	Outcome: Approved




# View Outcome

Outcomes		Review Outcome: Approved
(HCPCS) 96372 - THERAPEUTIC PROPHYLACTIC/DX INJECTION SUBQ/IM		Outcome: Approved
Requested		Final Recommendation
Outcome		Outcome Approved
Authorization Number		123456789
Start Date	05/01/2020	Start Date 05/01/2020
End Date	05/31/2020	End Date 05/31/2020
Modifier 1		Modifier 1
Modifier 2		Modifier 2
Units	1 unit(s)	Approved 1 unit(s)
Frequency		Frequency
Total Cost		Total Cost
		Letter Rationale: Medical criteria has been met

The Requested tab will display what was requested in the review.

# View Outcome

Outcomes		Review Outcome: Approved
(HCPCS) 96372 - THERAPEUTIC PROPHYLACTIC/DX INJECTION SUBQ/IM		Outcome: Approved
Requested	Final Recommendation	
Outcome	Outcome  Approved	
Authorization Number	Authorization Number 123456789	
Start Date 05/01/2020	Start Date 05/01/2020	
End Date 05/31/2020	End Date 05/31/2020	
Modifier 1	Modifier 1	
Modifier 2	Modifier 2	
Units 1 unit(s)	Approved 1 unit(s)	
Frequency	Frequency	
Total Cost	Total Cost	
	Letter Rationale: Medical criteria has been met	

The Final Recommendation tab will display the determination and the authorization number.



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# **AUTHORIZED OFFICIAL TRAINING**

# Roles

- There are three roles required within an organization in order to access and utilize the provider portal.
  - **Provider Executive**
  - **Authorized Official**
  - **Provider Users**

# Provider Executive

- **The Provider Executive** is the duly authorized representative of your organization permitted to bind your organization to the terms and conditions of Provider Portal Agreement.
- **The Provider Executive** must designate, in writing, one or more Authorized Officials for the organization.
- **The Provider Executive** cannot be an Authorized Official



# Authorized Official

- Each facility is required to have at least one Authorized Official.
- **The Authorized Official(s)** will serve as point of contact for the organization and be responsible for managing Provider User Accounts.
- **The Authorized Official** will be responsible for adding or removing Provider Users as required to support the organization.
- **The Authorized Official** must complete the Authorized Official Agreement and the Authorized Official Registration Form.

**NOTE: Signature of this form must be witnessed by a notary public.**

# Provider Users

- **Provider Users** will access the Provider Portal to submit and view Clinical Review requests.
- **Provider User** access will be granted by the Authorized Official.
- **Provider Users** will be required to accept the Provider Portal Terms of Use prior to initial login.

# Registration Process

- The registration packet can be downloaded from the website at: <http://www.mpqhf.org/corporate/medicaid-portal-home/>
- All Registration Packets must contain the following:
  - Provider Executive Agreement
  - Authorized Official Agreement
  - Authorized Official Registration Form

# Submitting Registration Forms

- Mail forms via US Mail to:

**Telligen**

**Attn: Qualitrac Registration Team**

**1776 West Lakes Parkway**

**West Des Moines, IA 50266**

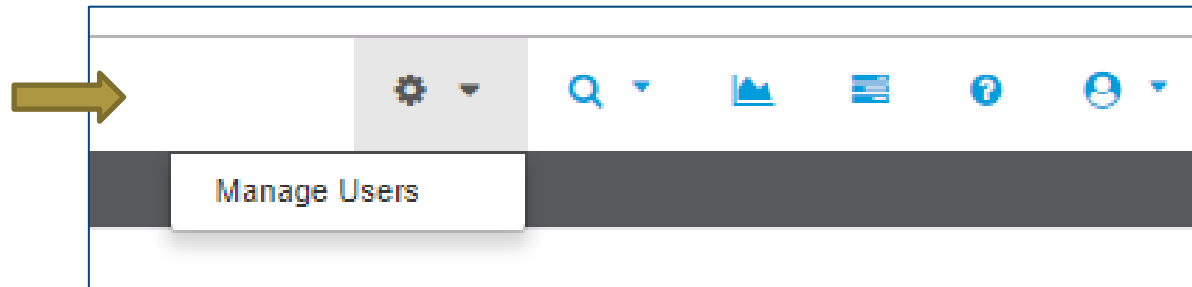
- Registrations will be processed within 5-7 business days from receipt.

# Authorized Official Training

- When we have received and processed your registration packet, the Authorized Official (AO) will receive two emails
  - 1) Email #1 will contain your username
  - 2) Email #2 will contain the link to the portal to establish your unique password.
- Click on the link within the email and you will be required to establish your password for the Qualitrac system.
- You must establish your password within 24 hours of receipt of the email. For security reasons, the link will expire after 24 hours.
- NOTE: If you do not receive the email, please check your junk email box and/or contact your organization's IT department to ensure the email is not being blocked by your own security regulations.

# Authorized Official Training

- Authorized Officials will see an additional icon in the top menu



- Click on the tool icon and select **Manage Users**

# Authorized Official Training

- The Authorized Official will be able to see all users associated with any organizations/providers that the AO is associated to.
- The AO can click on any of the blue links to access the details for that individual user.

[Add User](#)

Client	User Name	First Name	Last Name	Email Address	Phone Number
<input type="text" value="Client Name"/>	<input type="text" value="User Name"/>	<input type="text" value="First Name"/>	<input type="text" value="Last Name"/>	<input type="text" value="Email Address"/>	<input type="text" value="Phone Number"/>
MARYLAND	swilsonMD	Stephanie	Wilson	swilson@telligen.com	(515) 555-5555
MARYLAND	swilsonAO	Stephanie	Wilson	swilson@telligen.com	(515) 555-5555

Show  entries

Showing 1 to 2 of 2 entries

Previous  Next

# Authorized Official Training

- The AO can now view all contact information regarding the selected user

Dashboard / Manage User / Edit User

Qualtrac Account

Client \*  
Test Client 1 -

Organization \*  
WALMART INC. -

First Name \*  
Kerry

Middle Name

Last Name \*  
Gillman

Display Name \*  
KGPRV

Username \*  
KGPRV

Email \*  
kgillman@telligen.com

Address Line 1 \*  
43088 170th Ave

Address Line 2

City \*  
Chariton

State \*  
Iowa

Zip \*  
50049

Phone Number \*  
(544) 564-5645

Ext

Phone Type \*  
Work

Preferred Contact Method \*  
 Phone  
 Email

Cancel Save



# Authorized Official Training

- The Authorized User can edit all user information (address, phone, last name, etc.) except for the username field.
- Once a username is created, it cannot be changed. The username would need to be deactivated and a new one established for that user.
- All usernames must be unique within the system. If the username is not unique, the system will alert the AO and an alternate username will need to be established.

# Create a New User

- To create a new user, click the **Add User** button the top right corner of the Manage User page.



Client	User Name	First Name	Last Name	Email Address	Phone Number
MARYLAND	swilsonMD	Stephanie	Wilson	swilson@telligen.com	(515) 555-5555
MARYLAND	swilsonAO	Stephanie	Wilson	swilson@telligen.com	(515) 555-5555

Show  entries      Showing 1 to 2 of 2 entries      Previous  Next

# Create a New User

- All fields with a red asterisk, \*, are required fields.
- The Organization's drop-down will allow the AO to associate users to the organization(s)/physician group(s) that are available to the AO to select from. Check the box next to each one to select it.
- When all required information has been entered, click Save to continue.

The screenshot shows a user creation form with two main sections. The left section contains fields for Client, First Name, Middle Name, Last Name, Display Name, Username, and Email. The right section contains Organization, Address Line 1, Address Line 2, City, State, Zip, Phone Number, Ext, Phone Type, and Preferred Contact Method. A red asterisk indicates required fields. A gold arrow points to the Address Line 1 field, and another gold arrow points to the Save button.

**Client \***  
Montana - Mountain Pacific ▾

**First Name \***  
[Text Field]

**Middle Name**  
[Text Field]

**Last Name \***  
[Text Field]

**Display Name \***  
[Text Field]

**Username \***  
[Text Field]

**Email \***  
username@example.com

**Organization \*** Organization is a required field  
None selected ▾  
 ABUNDANT LIFE VEIN CENTERS LLC  
 ST LUKE'S REGIONAL MEDICAL CENTER

**Address Line 1 \***  
[Text Field]

**Address Line 2**  
[Text Field]

**City \*** [Text Field] **State \*** [Dropdown] **Zip \*** ##### [Text Field]

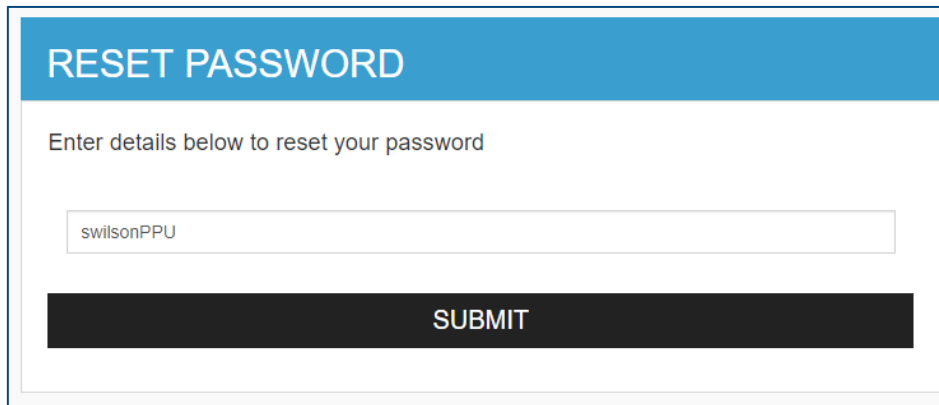
**Phone Number \*** (999) 999-9999 [Text Field] **Ext** [Text Field] **Phone Type \*** [Dropdown]

**Preferred Contact Method \***  
 Phone  
 Email

Cancel Save

# Create a New User

- After clicking **Save**, the system will direct the AO to the Reset Password page.
- The username field will pre-populate. Click **Submit**.
- The system will send a link to the email address associated to that user so they can establish their unique password.



RESET PASSWORD

Enter details below to reset your password

swilsonPPU

SUBMIT

# Create a New User

- The email link will direct the user to the reset password page.
- The user will then create their password using the criteria listed and click **Submit**.

## RESET PASSWORD

**Enter New Password \***

**Confirm Password \***

**SUBMIT**

- Password length should be six (6) to twelve (12) characters in length.
- Password should contain a digit [0-9].
- Password should contain a lower case letter [a-z].
- Password should contain an upper case letter [A-Z].
- Password should contain one of !@#%&\* characters.

# Deactivate users

- To deactivate a user, simply go to the Manage Users tab, find the username you need to access and click **Deactivate User**.

Qualtrac Account Client Specific Contact Information

Client * MARYLAND -	Role * Operations Manager -		
First Name * Stephanie	Address Line 1 * 1778 West Lakes Parkway		
Middle Name	Address Line 2		
Last Name * Wilson	City * West Des Moines	State * Iowa	Zip * 50266
Display Name * swilsonMD	Phone Number * (515) 655-5555	Ext	Phone Type * Work
Username * swilsonMD	Preferred Contact Method * <input type="radio"/> Phone <input checked="" type="radio"/> Email		
Email * swilson@ielligen.com			

[Deactivate User](#) [Send Password Reset](#) [Cancel](#) [Save](#)



# Important Information



Website:

<http://www.mpqhf.org/corporate/medicaid-portal-home/>



Call us:

Portal technical assistance: 1-800-433-4020 (option 2)

Physician Administered Drugs:

406-443-4020 or toll free 1-800-497-8232



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**THE END**

