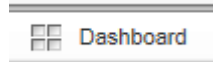


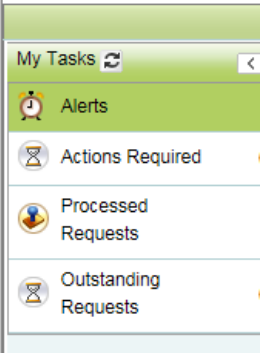
Qualis Health Provider Portal (QHPP)

MAIN VIEW

= **DASHBOARD** *For new request or search or worklist tabs*



WORKLIST TABS – left hand navigation

	<p><u>ALERTS</u> are sent when an RFI is sent regarding the episode, when an episode is decided, and when any documents are added to an episode.</p> <p><u>ACTIONS REQUIRED</u> are episodes which have been started but never were submitted via the QHPP to Qualis Health. There is an error in the submission process which needs to be corrected.</p> <p><u>PROCESSED REQUESTS</u> are QHPP submitted episodes decided by Qualis Health.</p> <p><u>OUTSTANDING REQUESTS</u> are QHPP submitted episodes not yet decided by Qualis Health.</p>
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INSURANCE ID CONFIGURATION

4 LEADING ZERO'S + MEDICAID ID NUMBER

NEW REQUEST

For new QHPP submissions
 Client + Insurance ID

SEARCH REQUEST

For existing or decided episodes
 Client + Insurance ID + Episode Type **or** Episode Number

STEP 1: EDIT REQUEST

SET UP (TAB 1)

- | | |
|--------------------|--------------------------------|
| 1. Episode Type: | LEVEL OF CARE |
| 2. Episode Class: | LOC WITHOUT IN-HOME ASSESSMENT |
| 3. Urgency: | Non-Urgent |
| 4. Treatment Type: | ICF/IID |
| 5. Diagnosis: | Actual admitting diagnosis |
| 6. SAVE | |

STEP 2: ADD PROVIDERS

ALWAYS NEED 3 PROVIDERS (TAB 2)

- | | | |
|----------------|-------------------|----------------|
| 1. Requesting: | = ORGANIZATION | = ICF FACILITY |
| 2. Admitting: | = FACILITY/VENDOR | = ICF FACILITY |
| 3. Treating: | = FACILITY/VENDOR | = ICF FACILITY |

QUALIS HEALTH PROVIDER PORTAL

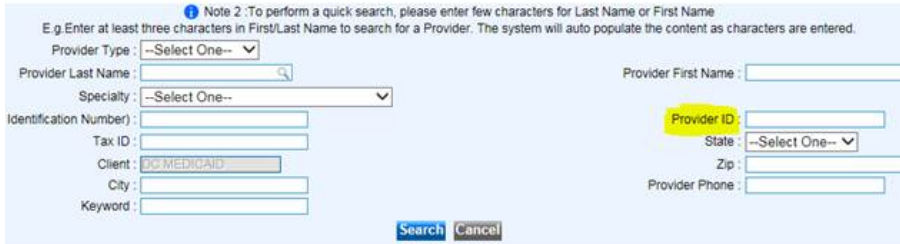
QUICK START GUIDE – New Mexico Medicaid

SUBMITTING ICF-IID REQUESTS

TO LOCATE THE PROVIDER ID:

- Admitting/Treating = Enter HSD/DDSD approved provider ID numbers
- Requesting = Enter QH number as supplied by Qualis Health

Enter number into Provider ID field and click 'Search'



Note 2: To perform a quick search, please enter few characters for Last Name or First Name
E.g. Enter at least three characters in First/Last Name to search for a Provider. The system will auto populate the content as characters are entered.

Provider Type: --Select One--
 Provider Last Name:
 Specialty: --Select One--
 Identification Number:
 Tax ID:
 Client: NM MEDICAID
 City:
 Keyword:

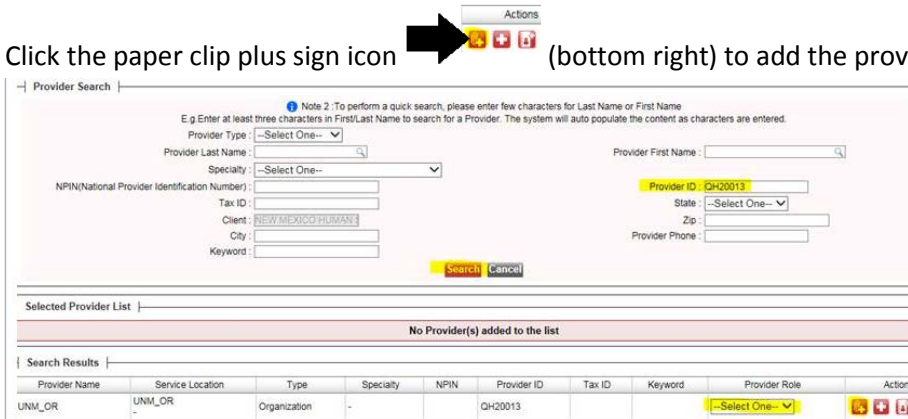
Provider First Name:
 Provider ID:
 State: --Select One--
 Zip:
 Provider Phone:

Search Cancel

After you click 'Search', a provider list will appear below, at this point:

a. Select the provider role from the drop down

b. Click the paper clip plus sign icon  (bottom right) to add the provider to the episode



Selected Provider List

No Provider(s) added to the list

Provider Name	Service Location	Type	Specialty	NPIN	Provider ID	Tax ID	Keyword	Provider Role	Actions
UNM_OR	UNM_OR	Organization	-		QH20013			--Select One--	

CORRECT PROVIDER CONFIGURATION

Name	Service Location	Provider Type	Provider Role	Provider ID
UNM CASE MANAGEMENT GROUP	UNM CASE MANAGEMENT GROUP 100 ANYSTREET ANYTOWN, NM - 99999 USA	Facility/Vendor	Admitting	987357
UNM CASE MANAGEMENT GROUP	UNM CASE MANAGEMENT GROUP 100 ANYSTREET ANYTOWN, NM - 99999 USA	Facility/Vendor	Treating	987357
UNM_OR	UNM_OR	Organization	Requesting	QH20013
UNM CASE MANAGEMENT GROUP	UNM CASE MANAGEMENT GROUP 100 ANYSTREET ANYTOWN, NM - 99999 USA	Organization	Requesting	QH10333

Attach New

STEP 3: ADD DIAGNOSIS ONLY NEED 1 DIAGNOSIS (TAB 3)

1. Actual Diagnosis

STEP 4: UM SERVICES LOC SPAN YEAR (TAB 4)

1. ADD STAY LINE ONLY
2. DATE OF ADMISSION = START DATE OF LOC
3. NUMBER OF DAYS = the number of days being requested; i.e. 365/366
4. ACTUAL ADMIT DAY = START DATE OF LOC
5. SAVE

STEP 5: ADD ASSESSMENTS NO ASSESSMENTS - SKIP (TAB 5)

STEP 6: ADD CONTACT INFO NEED ONLY: NAME/PHONE/EMAIL

STEP 7: ADD NOTES ONLY WEB NOTES (TAB 6)

NOTE TEMPLATE FOR LOC SUBMISSION TO QUALIS HEALTH (TAB 6)

- | | | |
|-------------------|--------------------|---------------------|
| 1. LOC TYPE: | 3. CONTACT PERSON: | 5. ADDITIONAL INFO: |
| 2. LOC DATE SPAN: | 4. CONTACT PHONE: | |

STEP 8: ADD DOCUMENTS ADD REQUIRED, COMPLETE PAPERWORK (TAB 10)

ATTACHING DOCUMENTS (TAB 10)

1. DOCUMENT TITLE: Enter description
2. DOCUMENT TYPE: LOC
3. SELECT DOCUMENT: BROWSE & SELECT
4. UPLOAD DOCUMENT

STEP 9: SUBMIT REQUEST REVIEW AND HIT SUBMIT REQUEST – it will ask you to confirm

- *Option at this step to print or save abstract for the episode
- *May save abstract as PDF or print the abstract

Look for Printer icon at right

Always make note of the QHPP episode number or reference number for easier reference in the future to locate the episodes!!!

QHPP TECHNICAL ASSISTANCE: 1-866-962-2180

QHPP RESOURCES AND LOG-ON LINK:

<http://www.qualishealth.org/healthcare-professionals/new-mexico-medicaid/provider-resources>
(scroll down to "Qualis Health Provider Portal" section)