

**SEARCH REQUEST      QUALIS HEALTH WILL SUPPLY WEEKLY LIST OF REFERRALS W/INFO**

Client + Insurance ID + EPISODE TYPE + Qualis Health Provider Portal (QHPP) EPISODE NUMBER

1. Episode Type = LEVEL OF CARE
2. EPISODE NUMBER = SUPPLIED BY QUALIS HEALTH
3. CLIENT = NEW MEXICO HUMAN SERVICES DEPARTMENT
4. INSURANCE ID = SUPPLIED BY QUALIS HEALTH

**CONFIRM SELECT CORRECT EPISODE**

1. CLICK ON EPISODE ID TO SELECT EPISODE
2. WHEN CONFIRMED CORRECT EPISODE EXIT THE ABSTRACT
3. THEN CLICK ON THE **EPISODE TYPE** [LOC] ASSOCIATED WITH THE EPISODE ID

**NOTES      MANDATORY FOR IHA SUBMISSION TO QUALIS HEALTH**

1. IHA SUBMITTED
2. NAME
3. OTHER PERTINENT INFORMATION

**ADD DOCUMENTS**

**CLINICAL DOCUMENTS**  
**ADD IHA – MAKE SURE IT IS SIGNED**  
**PDF PREFERRED**

1. DOCUMENT TITLE: = IHA
2. DOCUMENT TYPE: LOC
3. SELECT DOCUMENT: BROWSE & SELECT
4. UPLOAD DOCUMENT