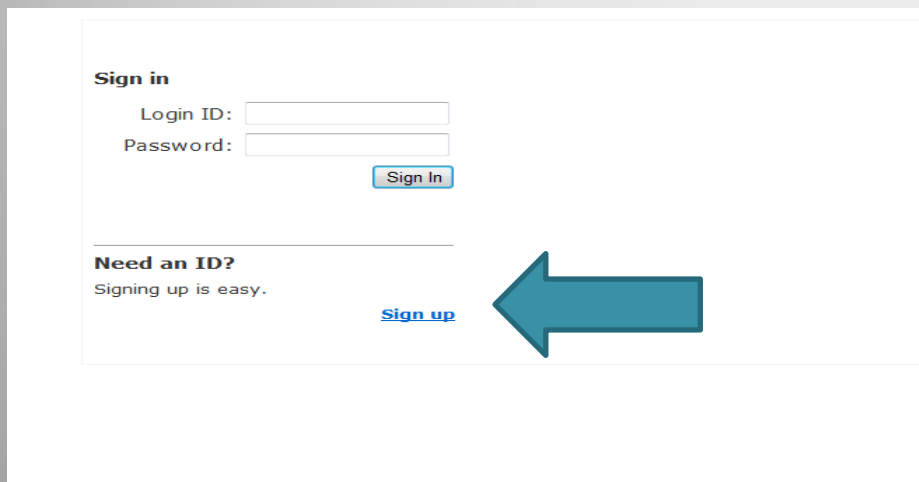




Online Access Provider Portal to EOPs and Authorizations

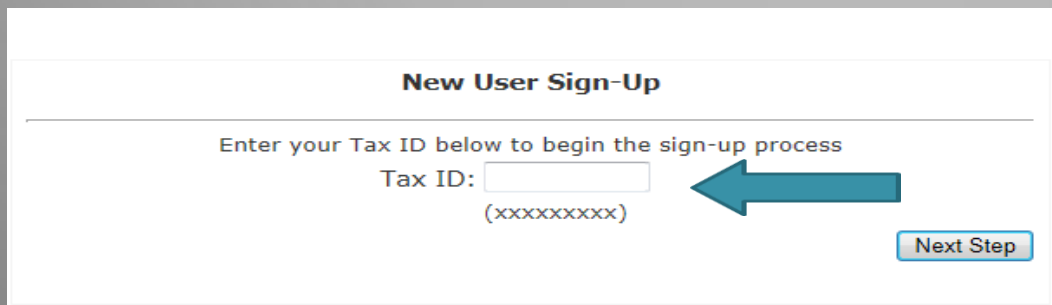
Online Access Portal Logon Screen

1. Type in the following URL in the address line of your browser:
<https://sendero.valencehealth.com/Login.aspx>
2. Select the “**Sign Up**” link

A screenshot of the online access portal's logon screen. It features a "Sign in" section with two input fields: "Login ID:" and "Password:", followed by a "Sign In" button. Below this is a "Need an ID?" section with the text "Signing up is easy." and a blue "Sign up" link. A large teal arrow points from the "Sign up" link towards the right.

3. Enter your **TAX ID**

*Please note that you must be a participating provider in order to create a username and password.

A screenshot of the "New User Sign-Up" section of the portal. It has a title "New User Sign-Up" and a sub-instruction "Enter your Tax ID below to begin the sign-up process". Below this is a "Tax ID:" label followed by an input field and the text "(xxxxxxxx)". A large teal arrow points from the input field towards the left. To the right of the input field is a "Next Step" button.



Online Access Portal Logon Screen

1. Follow the step-by-step instructions to obtain your logon information.

New User Sign-Up

Login ID:

Password:

Confirm Password:

First Name:

Last Name:

Company:

Phone:

Email:

Provider will arrive at the Online Access Home page

Available functions include:

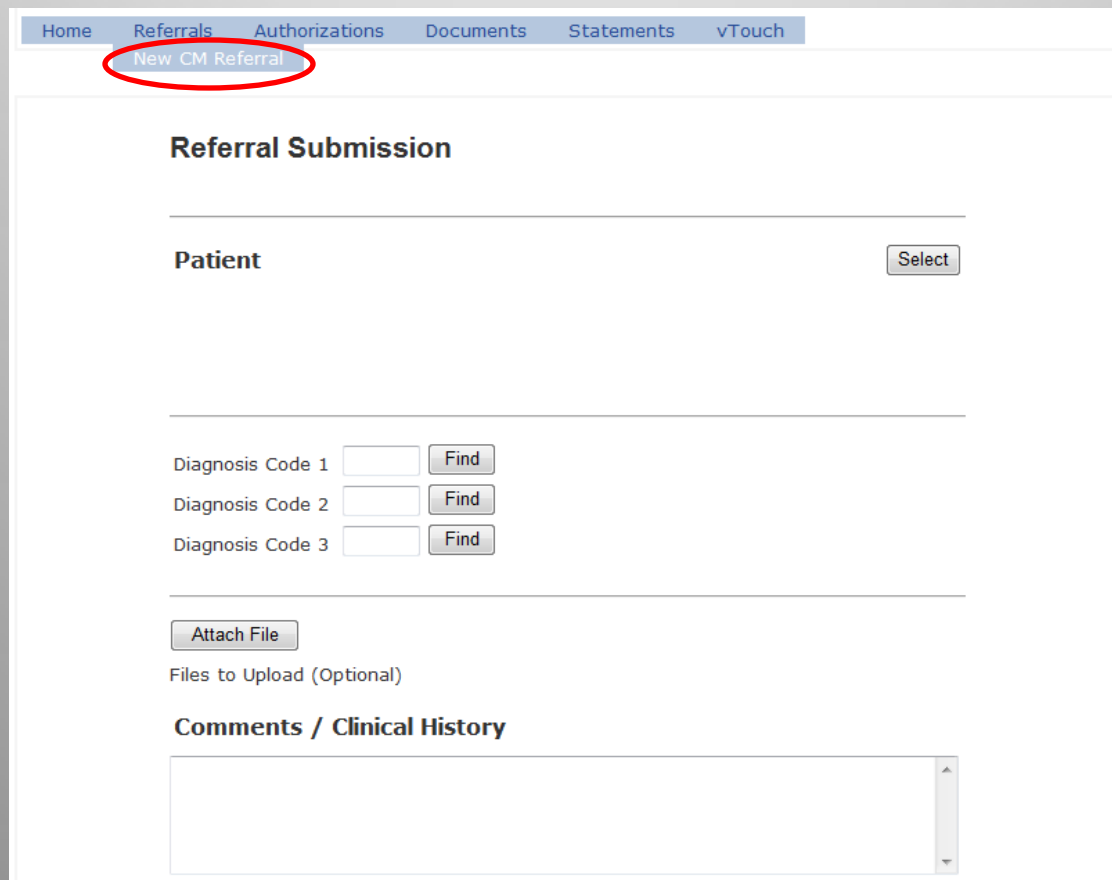
1. Submit referrals
2. Submit and search authorization requests
3. Access resource documents
4. View statements (EOPs and Panel Rosters)



Submitting Referral Requests

Entering a Referral:

Under “Referrals”, click on “New CM Referral” to select the patient, enter diagnosis codes, attach files and add comments/clinical history.

The screenshot shows a web application interface for entering a referral. At the top, a navigation bar contains links for Home, Referrals, Authorizations, Documents, Statements, and vTouch. The 'Referrals' link is highlighted in blue, and a sub-link 'New CM Referral' is circled in red. Below the navigation bar, the main content area is titled 'Referral Submission'. It features a 'Patient' label with a 'Select' button to its right. Below this, there are three rows for 'Diagnosis Code 1', 'Diagnosis Code 2', and 'Diagnosis Code 3', each with a text input field and a 'Find' button. Further down is an 'Attach File' button and the text 'Files to Upload (Optional)'. At the bottom, there is a section for 'Comments / Clinical History' with a large, empty text area and a vertical scrollbar on the right side.

Entering a Referral continued...

Contact Information must be included in the referral:

1. Name
2. Email
3. Phone

Contact Information (change if appropriate)

Name:

Email:

Phone:

Entering a Referral continued...

To submit the referral to the Care Management Team, click "Submit Referral Request"

Contact Information (change if appropriate)

Name:

Email:

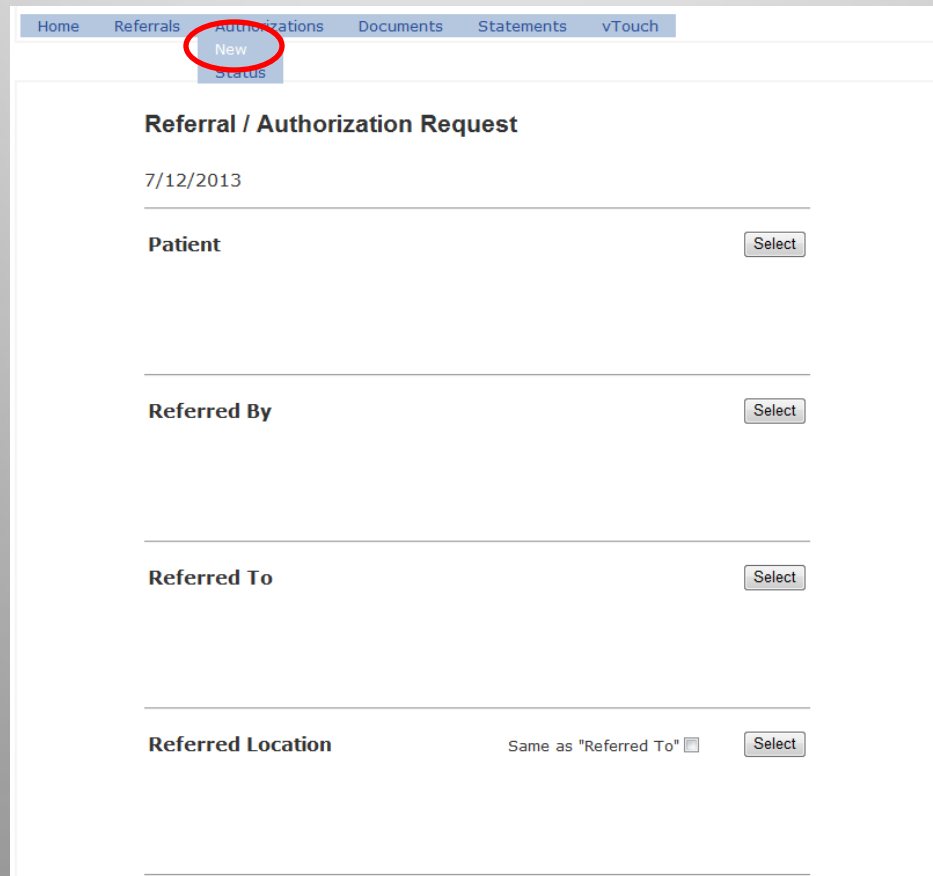
Phone:

Submit Referral Request

Submitting Authorization Requests

Entering a New Authorization Request:

Under “Authorizations”, click on “New” to select the patient, referring provider, to whom patient is referred, and referral location

The screenshot shows a web application interface with a navigation bar at the top containing links for Home, Referrals, Authorizations, Documents, Statements, and vTouch. The 'Authorizations' link is highlighted in blue and has a red circle around it. Below the navigation bar, the page title is 'Referral / Authorization Request'. The date '7/12/2013' is displayed. The form contains several fields: 'Patient' with a 'Select' button, 'Referred By' with a 'Select' button, 'Referred To' with a 'Select' button, and 'Referred Location' with a 'Select' button and a checkbox labeled 'Same as "Referred To"'.

Home Referrals **Authorizations** Documents Statements vTouch

New
Status

Referral / Authorization Request

7/12/2013

Patient

Referred By

Referred To


Referred Location Same as "Referred To"

Entering a New Authorization Request continued...

Additional authorization information may be entered in the fields below

Procedure Details


Type of service

Date of service 

Diagnosis Code 1

Diagnosis Code 2

Diagnosis Code 3

	Procedure	Description	Amount (# of days, visits, etc.)	
	<input type="text"/>		<input type="text"/>	<input type="button" value="Add"/>

Files to Upload (Optional)

Comments / Clinical History

DISCLAIMER: This authorization is subject to member eligibility on the date services are rendered.

I Agree


Entering a New Authorization Request continued...

Additional authorization data includes:

1. Type of Service
2. Date of Service
3. Diagnosis code(s): up to 3 valid ICD diagnosis codes may be entered per authorization
4. Procedure code(s) and amount requested per procedure code (procedure codes may be CPT or HCPCS codes)

Procedure Details


Type of service

Date of service 

Diagnosis Code 1 Athetoid cerebral palsy

Diagnosis Code 2 Epilepsy NOS w intr epil

Diagnosis Code 3

	Procedure	Description	Amount (# of days, visits, etc.)	
	E0255	Hospital bed var ht w/ mattr	1	<input type="button" value="X"/>
	B9002	Enteral infusion pump w/ ala	1	<input type="button" value="X"/>
	E1390	Oxygen concentrator	1	<input type="button" value="X"/>
	<input type="text"/>		<input type="text"/>	<input type="button" value="Add"/>

Entering a New Authorization Request continued...

Additional authorization data includes:

1. Attachment of relevant clinical information
2. Comments/Clinical History

Files to Upload (Optional)

Comments / Clinical History

Entering a New Authorization Request continued...

To submit the authorization request to the Medical Management Team:

1. Click the check box next to "I Agree" to accept the disclaimer
2. Click "Submit Referral Request"

DISCLAIMER: This authorization is subject to member eligibility on the date services are rendered.

I Agree

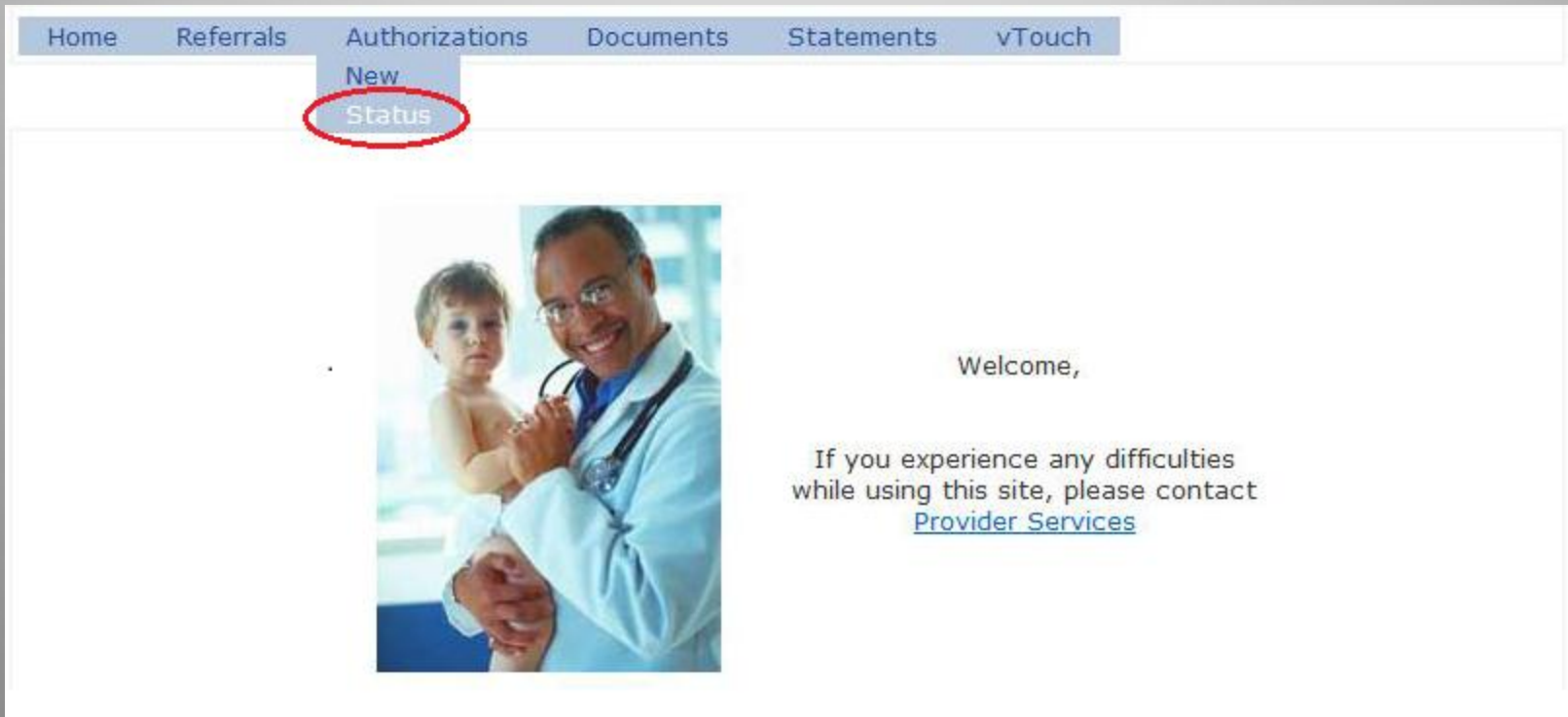
Submit Referral Request

Viewing Authorization Statuses

Selecting Status Authorizations within the same TAX ID structure to locate the existing authorization...

Under "Authorizations":

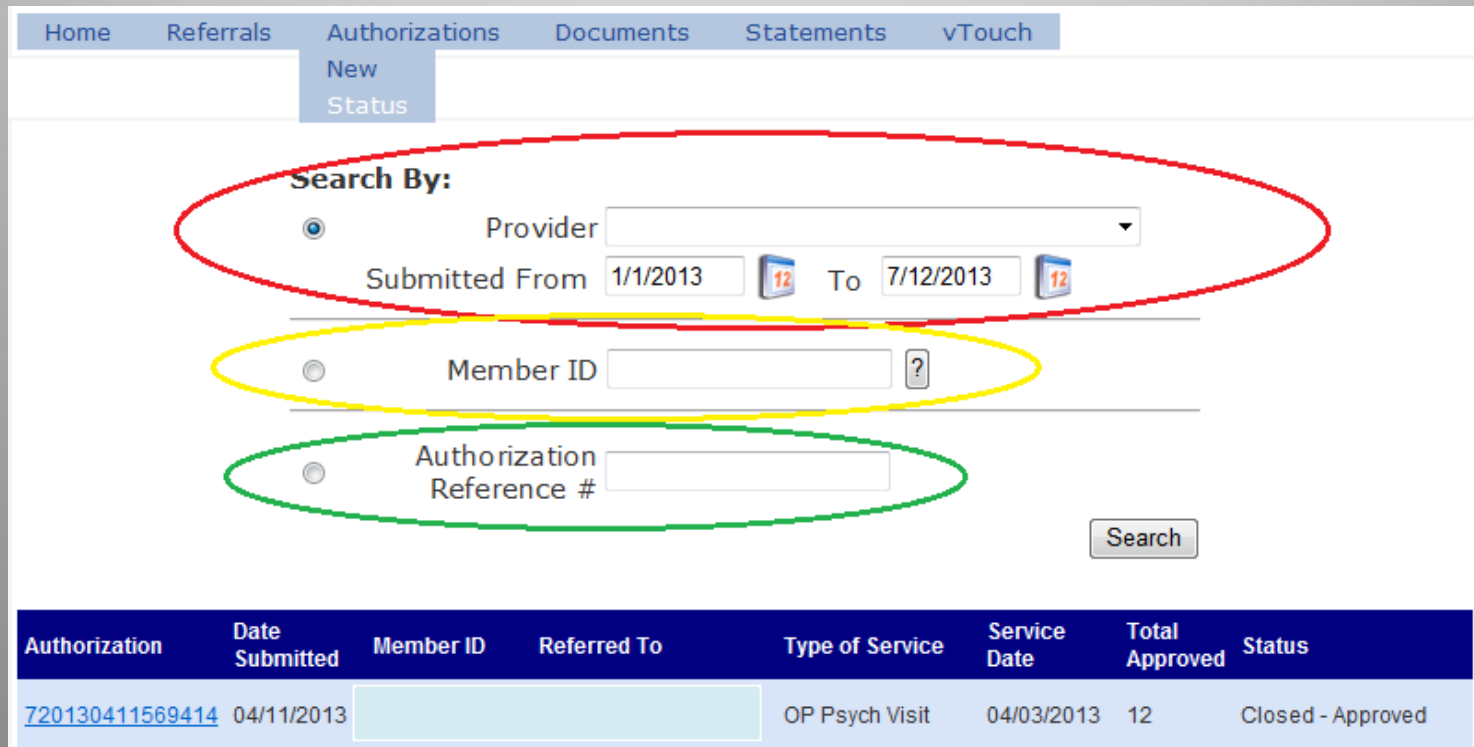
1. Click on "Status" to search authorization requests that have been submitted



Selecting Status Authorizations within same TAX ID structure to locate existing authorization

Search by:

1. Provider and date range
2. Member ID
3. Authorization Reference Number



Home Referrals Authorizations Documents Statements vTouch

New Status

Search By:

Provider

Submitted From To

Member ID

Authorization Reference #

Search

Authorization	Date Submitted	Member ID	Referred To	Type of Service	Service Date	Total Approved	Status
720130411569414	04/11/2013			OP Psych Visit	04/03/2013	12	Closed - Approved

Locating Provider Materials

Locating Provider Reference Materials...under “Documents”

1. Quick Reference Guides and other helpful forms are available through this link



Home Referrals Authorizations **Documents** Statements vTouch

- CHIP Perinatal Program Provider Reference Guide
- MAP Quick Reference Guide
- MAP Sendero Authorization Request Form
- Pregnancy Notification Form
- Sendero Universal Referral Form
- Sendero Universal WPHS Referral Form
- STAR CHIP Quick Reference Guide



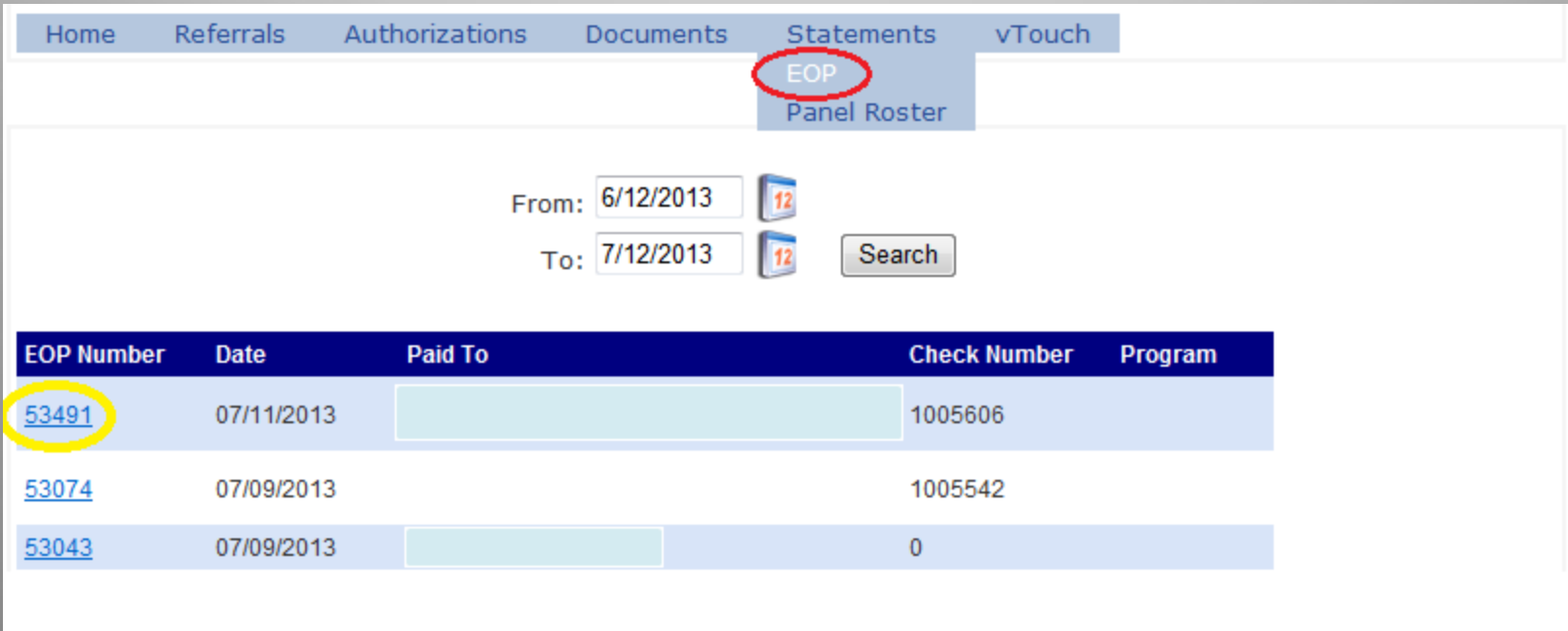
Welcome,

If you experience any difficulties while using this site, please contact [Provider Services](#)

Locating Provider Statements...click on “Statements” then “EOP”

Enter a “From” and “To” date, then click on “Search”
Available EOP information will be displayed including:

1. EOP number ([hyperlink](#))
2. Date
3. Paid To
4. Check Number
5. Program (if relevant)



The screenshot shows the SENDERO HEALTH PLANS web application interface. The navigation menu at the top includes Home, Referrals, Authorizations, Documents, Statements, and vTouch. The 'Statements' menu is expanded, showing 'EOP' (circled in red) and 'Panel Roster'. Below the navigation, there are search criteria: 'From: 6/12/2013' and 'To: 7/12/2013', both with calendar icons, and a 'Search' button. The search results are displayed in a table with the following columns: EOP Number, Date, Paid To, Check Number, and Program. The first row is highlighted with a yellow circle around the EOP number 53491.

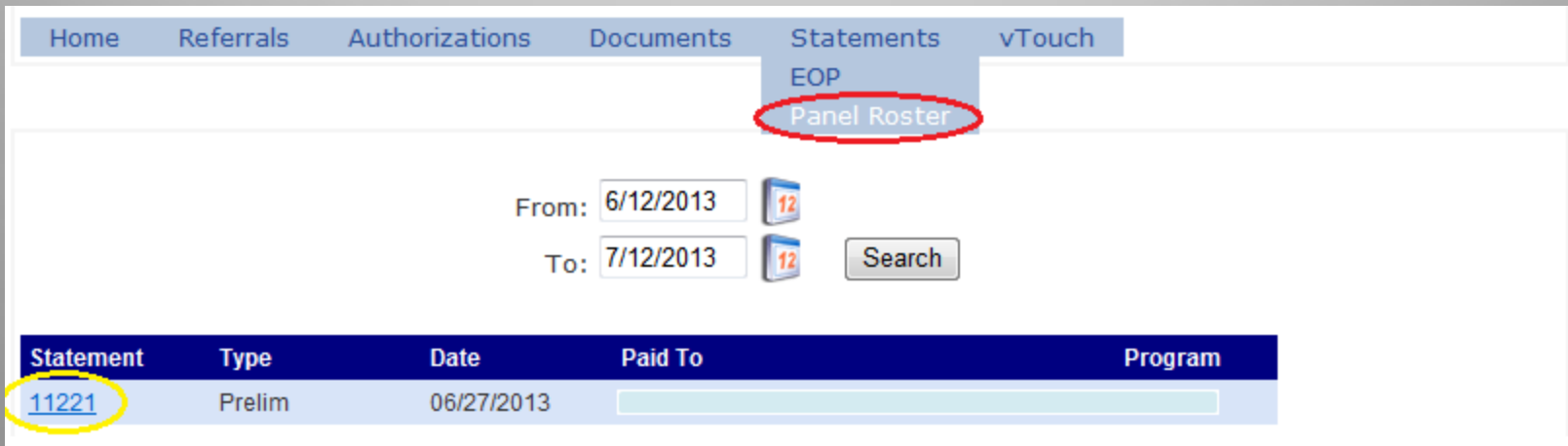
EOP Number	Date	Paid To	Check Number	Program
53491	07/11/2013		1005606	
53074	07/09/2013		1005542	
53043	07/09/2013		0	

Locating Provider Panel Rosters...click on “Statements” then “Panel Roster”

Enter a “From” and “To” date, then click on “Search”

Available Statement information will be displayed including:

1. Statement number ([hyperlink](#))
2. Type
3. Date
4. Paid To
5. Program

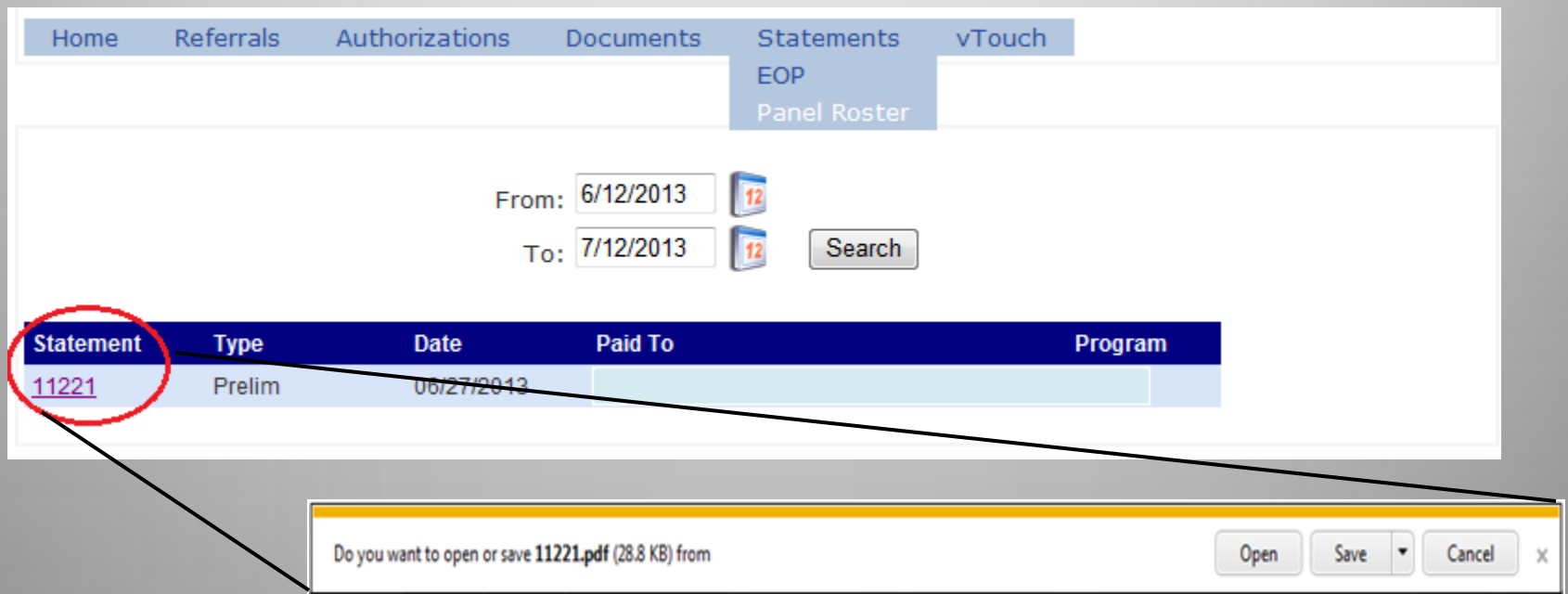


The screenshot shows the SENDERO HEALTH PLANS web application interface. The navigation menu at the top includes Home, Referrals, Authorizations, Documents, Statements, and vTouch. The 'Statements' menu is expanded, showing 'EOP' and 'Panel Roster', with 'Panel Roster' circled in red. Below the navigation menu, there are search criteria fields: 'From: 6/12/2013' and 'To: 7/12/2013', both with calendar icons, and a 'Search' button. The search results are displayed in a table with the following columns: Statement, Type, Date, Paid To, and Program. The first row of results shows the statement number '11221' circled in yellow, with a type of 'Prelim' and a date of '06/27/2013'.

Statement	Type	Date	Paid To	Program
11221	Prelim	06/27/2013		


Locating Provider Panel Rosters...click on “Statements” then “Panel Roster”


Click on Statement Number to Open the PDF to view eligible members.



Home Referrals Authorizations Documents Statements vTouch

EOP
Panel Roster

From: 6/12/2013 

To: 7/12/2013  Search

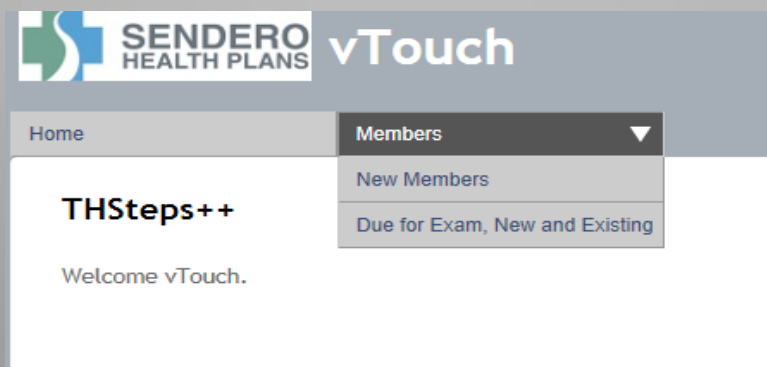
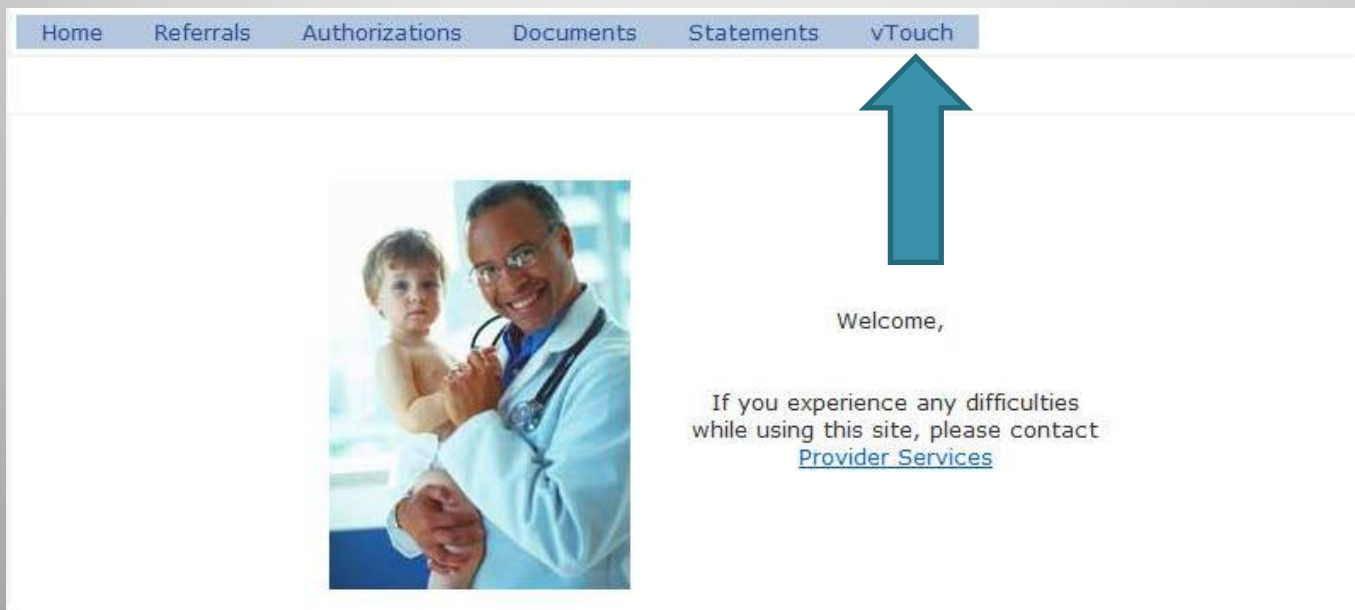
Statement	Type	Date	Paid To	Program
11221	Prelim	06/27/2013		

Do you want to open or save 11221.pdf (28.8 KB) from

Open Save Cancel x

View/Update THSteps Portal

Providers will have the ability to view/update New and Existing Member THSteps exams by clicking on “**vTouch**”. Please note this applies to STAR providers only.





View/Update New and Existing Members - THSteps Portal

Providers will have the ability to verify new and existing member visits in accordance to the Periodicity Schedule. All selections of members are at the PCP Select level.

Home | Members

New Members

Business Unit:

Pcp: Month: SDA: Products:

Edits can be made by clicking on a row. Press return on the keyboard to save your changes, to cancel press the ESC key

PCP	Member ID	Last Name	First Name	DOB	Phone	Status	Visit or Scheduled	Visit Type	Notes	Last Visit
No records to view										

Home | Members

Due for Exam, New and Existing

Business Unit: HasLogin: AgeGroup:

SDA: Products: Result: Window: All Time Periods:

PCP	Member ID	Name	DOB	Phone	Visit Reason	Window Start	Window End	Days To End	Visit Action	Visit or Scheduled
No records to view										