

Introduction

Clinical Integration Manager (CIM) is a PH Tech application that has many uses for the general management of Plan member clinical workflow. Health Share utilizes CIM as a provider portal for member eligibility confirmation only.

Accessing CIM

The web address for CIM is: <https://CIM6.phtech.com>

Registration

To access CIM, the user must be registered.

A currently registered user with the proper user permissions registers a new user using the CIM User Registration page.

NOTE: If there is no user available to do the setup, copy the following information and email CIM Support at support@phtech.com

#CIM Access Form#
PH Tech Member Search

Last Name:

First Name:

Office:

Address:

City:

State: County: Zip:

Office Phone: Ext.

Fax:

E-Mail:

Job Title:

Requesting access to? Eligibility Authorizations Claims

Requesting for which CIM? PCS MVP MHO Legacy FamilyCare

Tax ID:

Please call me to arrange for CIM training for me and/or my office.

Once one user is registered and activated in your practice office, the user can register additional users as needed. The on-line form is accessed from the Main Menu.

Click on the "Register User" selection in the menu.

CIM - Clinical Integration Manager Referral Reports Go!

Performance Health Technology
3993 Fairview Industrial Dr.
Salem, OR 97302
Phone: (503)362-2818, Fax: (503)566-9801

Current User:
• [Levy Hundley \(hundley\) \[profile\]](#)
Login Time:
• 8:08 AM, 07-17-2012 [[Logout](#)]

System Messages:

- [Referral Reports](#) Create referral reports.
- [Member Search](#) Check eligibility and send referrals.
- [Demographics](#) Search for people, providers, and offices.
- [Claims Upload](#) Upload claim files.
- [DMAP Line Search](#) Search the OMAP priority line for covered benefits.
- [Claims Search](#) Search for information on claims.
- [Code Search](#) Search for ICD-9 and CPT Codes.
- [Register User](#) Register a new user.
- [Browser Settings](#) Change your browser settings.
- [Provider Services](#) Provider services and links.
- [Member Mailings](#) Manages mailing requests to members.
- [Imported Claim Files](#) View uploaded and imported claim files.
- [Claim Manager](#) Manage and enter claims.
- [Referral Manager](#) Manage and Review referrals.
- [Contract Manager](#) Manage contracts, fee schedules and related info.
- [Accounting Manager](#) Manage accounting runs.
- [Demographics Manager](#) Manage providers, members, offices, etc.

Copyright ©2012 Performance Health Technology. All rights reserved.
Version: [3.9.2.1](#) Deployed on 2012-07-16 16:16:52 910
This page last modified: 02/02/2012 02:20:03 PM
Email the [Administrator](#) with comments.

Warning: The browser you are using is not officially supported. Supported browsers include Internet Explorer 7 and 8.

The "User Registration" form is displayed.

How to Register

Fill in form to the right to register. In the box labeled "Username," you will need to type a name without spaces which will be unique to you. Common usernames use a person's last name and the first letter of their first name, such as 'doe' (John Doe). Persons who have common last names such as 'Smith' might try something like 'smithj' or 'joesmith' (Joe Smith). **(use lower case)**.

Upon registering, the CIM Administrator will be notified and sent the information you have entered.

NOTE: All new accounts will be disabled until the information has been verified by the Administrator.

Password Rules:

1. Must be at least 6 characters long
2. Cannot contain any part of your name or CIM user name
3. Must contain characters from at least 3 of the 4 following categories:
 - o Uppercase letters (A-Z)
 - o Lowercase letters (a-z)
 - o Numbers (0-9)
 - o Non-alpha characters (! # \$ % & , etc.)
4. Will expire in 90 days (you will be prompted to change your password before it expires)

User Registration

* Denotes Required Fields.

*Last: _____ *First: _____ Middle: _____

Name Prefix: _____ Name Suffix: _____

*Office: PHTECH - Performance Health Technology

*Address: _____

*City: _____

*State: _____ County: _____ *ZIP: _____

*Office Phone: _____ Ext.: _____

Fax: _____ Ext.: _____

*Email: _____

Select Carrier

- FAMILYCARE CCO EO
- FAMILYCARE CCO METRO
- FCT - FamilyCare Inc
- FHP - FamilyCare Health
- MHO - FamilyCare MH

*Carrier: _____

*Access Type: Select Access Type

*Job Type: Select Job Type

*Pref. Corresp.: Select Preferred Correspondence

*Username: _____ (Write this down!)

*Password: _____ (Minimum of 6 chars)

Your password cannot contain any part of your name or CIM user name, and it must contain characters from at least 3 of the 4 following categories:

- Uppercase letters (A-Z)
- Lowercase letters (a-z)
- Numbers (0-9)
- Non-alpha characters (! # \$ % & , etc.)

OK

Copyright ©2012 Performance Health Technology. All rights reserved.
Version: 3.9.2.1 Deployed on 2012-07-16 16:16:52 910
This page last modified: 09/22/2009 11:22:21 AM
Email the Administrator with comments.

Warning: The browser you are using is not officially supported. Supported browsers include Internet Explorer 7 and 8.

Registration in CIM requires a unique username and password for each individual provider employee that requires access to the system. These are created during the registration process.

The required registration data is defined by the field labels (e.g. "First" is the employee's first name; "Last" is the employee's last name; etc.).

NOTE: Multiple Carrier selection is allowed and performed like file selections in most systems:

- To select a range of carriers,
 - o hold down the Shift key
 - o click on the first carrier in the range
 - o click on the last carrier in the range
 - o release the Shift key
- To select various carriers
 - o hold down the Ctrl key
 - o click on each carrier
 - o release the Ctrl key

Username and password creation have format rules that are detailed in the User Registration form.

When finished, the user clicks the OK button to end this phase of the process.

The information is sent to the PH Tech CIM Administrator, where the activation process is completed based on its position in the work queue of PH Tech's Provider Relations department. Activated users will be sent an email to notify the system is ready to be used.

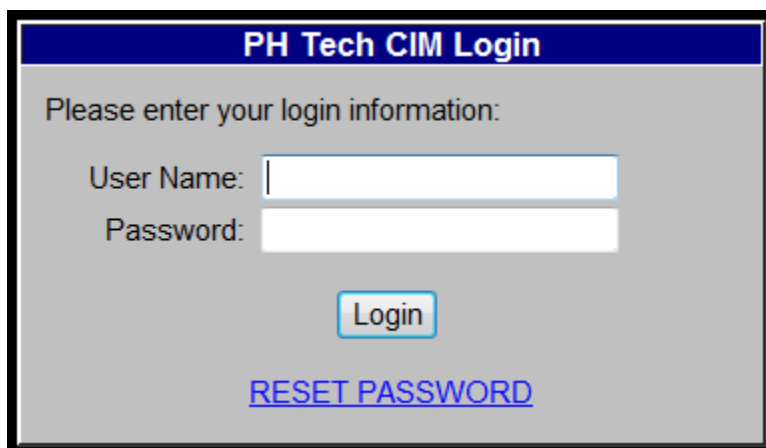
NOTE: When the new user logs in for the first time, there are three things that they must do before they can access the Main Menu:

- *Acknowledge the HIPAA confidentiality user agreement*
- *Answer the Secret Questions*
 - *Although requirement is not enforced, if the user's password has to be reset in the future, it is difficult to identify the user without these questions answered.*
- *Change the password to one known only to the new user*

If the new user is needed immediately, the registering user should call PH Tech provider services at 503.584.2169 option 2, to expedite the process.

Login

Browsing to the web site at <https://cim6.phtech.com>, the new user is directed to the Login entry form.



The screenshot shows a web form titled "PH Tech CIM Login" with a dark blue header. Below the header, the text "Please enter your login information:" is displayed. There are two input fields: "User Name:" followed by a white text box, and "Password:" followed by a white text box. Below the password field is a blue "Login" button. At the bottom of the form is a blue, underlined link that says "RESET PASSWORD".

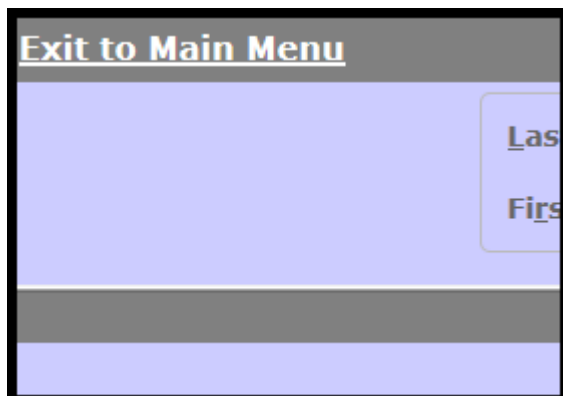
The user enters their username and password then clicks the “Login” button or hits the Enter key.

The first screen that displays after login is the CIM home page (CIM Main Menu).



There is information on the page that is important for the user to know, such as the System Messages on the right of the page. These should be reviewed each day after logging in.

This is the page where the user can always return to regain their place in CIM. There is a link on each CIM page that the user can click.



Eligibility

The determination of a member's Plan eligibility is one of the more important CIM processes.

The strict requirement of HIPAA concerning Electronic Health Information (EHI), dictate the steps implemented in CIM to determine member eligibility.

The overarching rule is the "minimum necessary use" standard in the HIPAA privacy rules. Eligibility searches are restricted to information specific to the member.

Determining Eligibility

Click on the "Member Search" link on the Main Menu

The Member Search page displays.

The screenshot shows the 'Member Search' interface. At the top, there are input fields for 'Last Name', 'First Name', 'SSN', 'DOB', 'Insurance Carrier' (a dropdown menu), 'Policy Number', and 'Eligibility Date'. A 'Search' button is located to the right of the 'Insurance Carrier' dropdown. Below the search fields is a section titled 'Search Criteria' which contains the following text: 'When searching for members, the following fields are required:' followed by a bulleted list: 'Member Policy Number ("Policy #")' and 'Two (2) of the following elements:'. Under the second bullet, there are three sub-points: '- Member First and Last full names (exact matches only):', '- Member Date of Birth ("DOB"):', and '- Member Social Security Number ("SSN"):'.

CIM provides a choice of two methods for eligibility search. They are listed in the body of the Member Search opening page.

The best method is to use the member's OHP number (Medicaid Recipient ID) only.

One important part that is not listed in the instructions is that the correct insurance carrier must be selected from the "Insurance Carrier" drop down list. Some Provider offices may have access to other carriers besides Health Share. To find Health Share of Oregon eligibility you must select it, even if it is the only carrier that you have access to search. If you need access to other carriers, please indicate on the registration form when you register new users.

This screenshot shows the 'Member Search' interface with the 'Insurance Carrier' dropdown menu open. The dropdown list contains the following options: 'Click to Select Carrier', 'All Carriers', 'FamilyCare Health Plans, Inc.', and 'Health Share of Oregon'. The 'Health Share of Oregon' option is highlighted in blue. A 'Search' button is visible to the right of the dropdown. Below the search fields is the 'Search Criteria' section, which is partially visible and shows the text 'When searching for members, the following fields are required:' followed by a bulleted list starting with 'Member Policy Number ("Policy #")'.

After the data is entered, click on the Search button to the right of the input fields or strike the Enter key.

The search results are displayed on the Member Search page.

If nothing is found, the display indicates this with the message “0 record(s) found matching that criteria”.

The screenshot shows the 'Member Search' interface. At the top, there is a header 'Member Search'. Below it, there are input fields for 'Last Name', 'SSN', 'Insurance Carrier' (set to 'Health Share of Oregon'), 'First Name', 'DOB', 'Policy Number' (set to 'HS12345'), and 'Eligibility Date'. A 'Search' button is located to the right of the 'Insurance Carrier' dropdown. Below the search fields, a section titled 'Search Results' displays the message: '0 record(s) found matching that criteria.' At the bottom of the page, there is a copyright notice: 'Copyright ©2013 Performance Health Technology. All rights reserved. Version: 5.3.4.4 Deployed on 2013-05-20 08:06:23.727 This page last modified: 05/16/2013 09:17:00 AM Email the Administrator with comments.'

Please note the following:

- The Policy number field is not case sensitive.
- Partial name searches are not permitted under HIPAA security rules.
- If you must attempt a search using the member’s name, please type the name as it appears in the state’s records (First name and middle name/initial and last name in the appropriate fields) with the member’s SSN or DOB (formatting provided). Failure to match exactly may result in a search that does not return the member’s valid current eligibility.





When multiple search results are found, they are displayed in a table.

The screenshot shows the 'Member Search' interface with search results. The search fields are filled with the same data as in the previous screenshot. The 'Search Results' section displays the message: '4 record(s) found matching that criteria.' Below this message is a table with the following data:

	Patient	DOB	Carrier	Policy #	Effective Date	Term Date
...	USER_TEST	01/01/2001	Health Share/CareOregon	HS123456	August 1, 2012	December 31, 2012
...	USER_TEST	01/01/2001	Health Share/Clackamas MH	HS123456	August 1, 2012	December 31, 2012
...	USER_TEST	01/01/2001	Health Share/Kaiser	HS123456	January 1, 2013	
...	USER_TEST	01/01/2001	Health Share/Clackamas MH	HS123456	January 1, 2013	

At the bottom of the page, there is a copyright notice: 'Copyright ©2013 Performance Health Technology. All rights reserved. Version: 5.3.4.3 Deployed on 2013-05-16 16:49:42.563 This page last modified: 05/16/2013 09:17:00 AM Email the Administrator with comments.'

Click on the Patient column link in the row for the eligibility.

	Patient	DOB	Carrier	Policy #	Effective Date	Term Date
	USER, TEST	01/01/2001	Health Share/Clackamas MH	HS123456	August 1, 2012	December 31, 2012
	USER, TEST	01/01/2001	Health Share/CareOregon	HS123456	August 1, 2012	December 31, 2012
	USER, TEST	01/01/2001	Health Share/Kaiser	HS123456	January 1, 2013	
	USER, TEST	01/01/2001	Health Share/Clackamas MH	HS123456	January 1, 2013	

You will see the specific information for the eligibility line that you chose. A member effective through today's date will show without a termination date. Eligibility is not guaranteed past today and is subject to change retroactively according to the state's eligibility determination process.

Address 1:	3993 FAIRVIEW INDUSTRIAL DR.	Carrier:	Health Share/Kaiser
Address 2:		Plan:	Health Share/Kaiser Limited
City/State:	Gladstone, OR 97306	Policy:	HS123456
Phone:	() -	Effective:	01/01/2013
SSN:	--	Termination:	
DOB:	01/01/2001	Coverage Code:	C
Language:		Flags:	No Current Flags
Gender:	M		
Condition:			print
Preg. Due Date:			
Patient PCP:	<i>No PCP Defined for this Patient.</i>		
(PCP History)			
Other Coverages:	None Available		

Member's medical health plan eligibility will reflect the Primary Care Provider of record with the Health Share partner health plan, including telephone number.