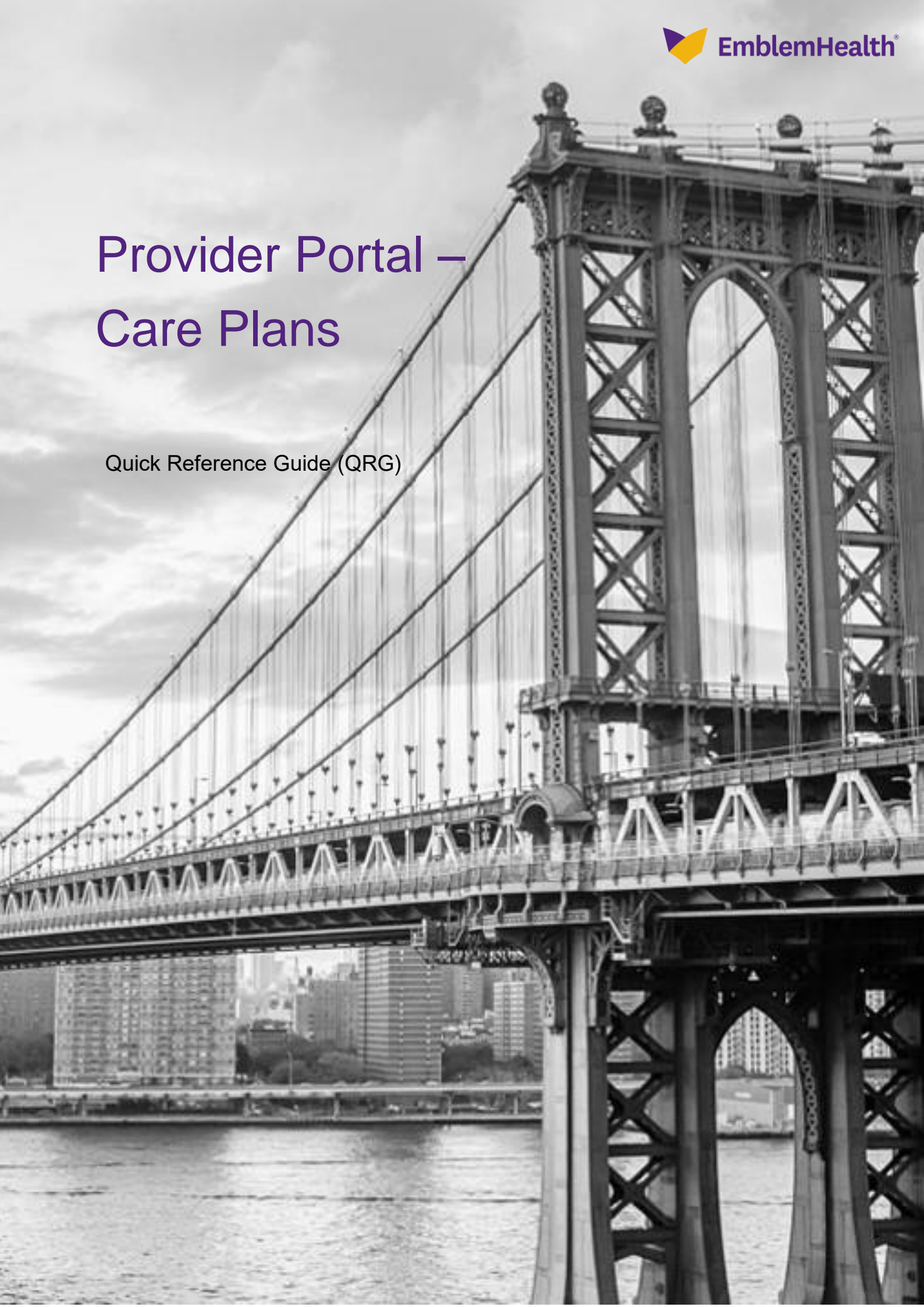


Provider Portal – Care Plans

Quick Reference Guide (QRG)



This Quick Reference Guide (QRG) will show you how to view a Care Plan, send a message to the Care Team, and print or save a copy of the Care Plan to your computer.

Purpose: To view and use Care Plans.



Step 1:

To find a Care Plan:

1. Select **Eligibility** from the drop-down list under **Member Management**.

EmblemHealth®

Home Member Management ▾ Claims ▾ Referrals ▾ Preauthorization ▾ Dental PreDetermination ▾ Provider Profile ▾ Create ER Notification More ▾

Eligibility

Bulk Eligibility Check

PCP Member Panel Report

Provider Network Status

Welcome to the EmblemHealth Provider Portal

Verify member eligibility, submit and view preauthorizations, referrals, claims, payments, and more.

Updates and Reminders

New Post-Acute Care Process Dec. 1, 2022 [Read More](#)

See What's New for 2023 [Read More](#)

Take the Provider Portal Survey by Nov. 30 [Read More](#)



Step 2:

The **Member Management – Eligibility** screen displays.

1. Click the **Search By** field and select **Member ID** or **Member Name**.
Note: In this example, we will select Member ID. If Member Name is selected, Member First Name, Last Name, and Date of Birth are required.

Member Management - Eligibility

Search By*
Member ID
Member ID
Member Name

[Reset Search](#) [Search](#)



Step 3:

1. Enter the **Member ID**.
2. Click **Search**.

Member Management - Eligibility

Search By*
Member ID

Member ID*

Reset Search Search



Step 4:

1. Click the applicable Member ID shown in the search results.

Member Management - Eligibility

Search By*
Member ID

Member ID*
K8000680701

Reset Search Search

Filter By

Member ID	Member Name	Coverage Start Date	Coverage End Date	Coverage Type	Status	Date of Birth	Gender	Product Type
K8000680701	WI, VI	09/01/2019	12/31/2199	Medical	Active	08/23/1968	Male	Commercial HMO

Total Records: 1 < Showing 1 - 1 >



Step 5:

The **Member Details** page displays.
1. Click **View Care Plan**.

Member Details

Status Active	Member ID K8000680701	Member Name WI, VI	Date of Birth 08/23/1968
Gender Male	Member Email	PCP Name Chin, Harold	Plan Name EMBLEMHEALTH GOLD PLUS
Product Type Commercial HMO	Coverage Start Date 09/01/2019	Coverage End Date 12/31/9999	Recertification Date ⓘ
Line of Business Commercial	Underwriting Company HIP		

Buttons: Back to Search, Create Claim, Create Referral, Create Preauthorization, Preauthorization Check Tool, Ask a Question, Check Provider Network Status, **View Care Plan**, Summary of Benefits and Coverage, Benefits Summary



Step 6:

An **Alert** will display. To proceed, you must attest that you are authorized to view the member's Care Plan.
1. Review the **Alert**.
2. Click **Yes** to attest.
Note: Each time a user views a Care Plan, a record will be created recording the user's name and the date the plan is opened for internal audit purposes only.

Alert

By selecting "Yes", you attest that you are a health care provider (or the authorized employee or business associate of a health care provider) that has or had a treatment relationship, with the EmblemHealth member whose Care Plan you are seeking to view, and that you are accessing the Care Plan solely for the purpose of such health care provider's treatment of and/or care coordination for the EmblemHealth member.

Buttons: **Yes**, No



Step 7:

The **Care Plan Details** display.

1. The header at the top left of the screen shows when the Care Plan was last updated.
2. Click an “>” to expand a specific part of the Care Plan.
3. Review the Care Plan’s details including the problem, person assigned, goals, and milestones.

Note: If a Care Plan contains some sensitive information, those parts of the Care Plan will not be shown in the portal. If the entire Care Plan is sensitive, the Care Plan will not be shown in the portal and an Alert will display, as shown in the next step.

Note: Once a Care Plan is completed, it will only be available on the portal for 30 more days.

Care Plan Details

Member Name	Member ID	Date of Birth	PCP Name	PCP Phone Number	PCP Location
VI WI	K8000680701	08/23/1968	Chin, Harold	(212) 746-2942	505 E 70th St, Apt H2A, New York, NY, 100214872

This Care Plan was last updated on 06/02/2022

[Back](#) [Send a Comment or Question](#) [Print or Download Care Plan](#)

> Problem : toc

> Problem : Cultural/Religious Preference Barriers

▼ Problem : Transition from home to a formal healthcare setting

Assigned To : care team

Goal : Care Manager will receive notice of admission to healthcare setting

Name	Type	Due Date
Care Manager to access healthcare setting admission data as available, including medication reconciliation between previous medication regimen at home and those ordered as part of this admission	Intervention	12/29/2021
Member placement in alternate care setting will be appropriate for care needs and reflect member preferences as much as possible	Outcome	12/29/2021

Goal : Member's care will be coordinated between Care Manager, healthcare facility Care Manager and primary healthcare provider, including verification of status of DNR orders and/or living will

Name	Type	Due Date
Care Manager to keep updated regarding the coordination of care across interdisciplinary team during transition and length of stay	Intervention	12/29/2021



Step 8:

1. If a member does not have a Care Plan, or due to sensitive information the plan cannot be shown in the portal, the following **Alert** will display.
Note: If you need a plan that you expected to find, but do not see, please call the Care Team at the number shown in the Alert to request a copy.

Alert

This member currently does not have an existing care plan. If you feel this is in error or would like to refer this member to care management please call 1-800-447-0768 available 9 a.m. - 5 p.m. Monday to Friday.

Date of Birth
12/07/1986

Plan Name
MDCC NON-SSI NYC NORMAL

Line of Business
Medicaid

[Ok](#)

[Back to Search](#)
[Create Claim](#)
[Create Referral](#)
[Create Preauthorization](#)
[Preauthorization Check Tool](#)
[Ask a Question](#)



Step 9:

If you would like to send a comment or ask a question of the Care Team:
1. Click **Send a Comment or Question**.

Care Plan Details

Member Name	Member ID	Date of Birth	PCP Name	PCP Phone Number	PCP Location
VI WI	K8000680701	08/23/1968	Chin, Harold	(212) 746-2942	505 E 70th St, Apt Ht4, New York, NY, 100214872

[Back](#) [Send a Comment or Question](#) [Print or Download Care Plan](#)

- > Problem : toc
- > Problem : Cultural/Religious Preference Barriers
- > Problem : Transition from home to a formal healthcare setting



Step 10:

An **Alert** will display stating that this message form is only for care plan updates and questions.
2. Review the Alert.
3. Click **Dismiss**.

Provider Information

Alert

This message form is only for care plan updates and questions.
- Our Care Management Team can only address care plan related issues.
- Use our [Message Center](#) for everything else

[Dismiss](#)

Search By



Step 11:

The **CREATE MESSAGE Provider Information** screen displays.

Note: You will need to select a provider to be the sender of the message. Many users are able to conduct business on behalf of multiple providers. That is why we need you to tell us which provider is trying to reach us.

1. Click the **Search By** field and select **Provider Name** or **Provider NPI** of the provider sending the message.

Note: In this example, we will select Provider Name.

2. Enter the **Provider Name**.

3. Click **Search**.

Provider Information

CREATE MESSAGE

Provider Information

Complete the details below and click on Next to continue.

i To refine your search , enter specialty, zip code or city and state.

Search By
Provider Name

Provider Name Specialty

City State

ZIP Code

Reset Search Search



Step 12:

The **Provider Information** search results display.

1. Click the corresponding radio button to select the provider.
2. Click **Next**.

Filter By ●

Name	Address	Tax ID	NPI	Type	Specialty	In-Network
<input type="radio"/> Aaron, Andrea M	400 E Main St, Mount Kisco, NY, 10549	131740118	1427103555	Physician Assistant		No
<input checked="" type="radio"/> Aaron, Andrea M	400 E Main St, Fl 1, Mount Kisco, NY, 10549	131740118	1427103555	Physician Assistant		Yes
<input type="radio"/> Aaron, Andrea M	400 E Main St, Mount Kisco, NY, 10549	453033234	1427103555	Physician Assistant		Yes
<input type="radio"/> Aaron, Andrea M	300 Community Dr, Manhasset, NY, 11030	453033234	1427103555	Physician Assistant		Yes
<input type="radio"/> Aaron, Andrea M	701 N Broadway, Sleepy Hollow, NY, 10591	453033234	1427103555	Physician Assistant		Yes

Total Records: 5 < Showing 1 - 5 >

Next



Step 13:

The **CREATE MESSAGE Send a Comment or Question** screen displays. The Category “Care Management” will auto-populate.

1. Click the **Subcategory** field and select **Provider Portal Care Plan Question** to provide a comment, request information, or ask a question about the Care Plan.

Note: Select **Provider Portal Care Plan Resources for Members** to inquire about general resources for members.

CREATE MESSAGE

Send a Comment or Question

Please do not send preauthorizations, benefits or claims related questions as part of a care plan message. If you would like to ask a question related to preauthorizations, benefits or claims, please select the appropriate message center category. If you would like to submit a preauthorization please [click here](#).

Choose a category and subcategory for your message. If you need help choosing an option, visit our [help section](#).

<p>Category *</p> <p>Care Management</p> <hr/> <p>Member Name</p> <p>WI, VI</p> <hr/> <p>Priority *</p> <p>▼</p> <hr/> <p>Message Content *</p> <hr/>	<p>Subcategory *</p> <div style="border: 1px solid red; padding: 5px;"> <p>▼</p> <p>Provider Portal Care Plan Question</p> <p>Provider Portal Care Plan Resources for Members</p> <p>Aaron, Andrea M</p> </div>
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Step 14:

1. Click the priority field and select **Urgent, High, Medium, or Low.**

Note: The turnaround times to receive a response from the day of submission are:

- Urgent: 1 business day
- High: 2 business days
- Medium: 4 business days
- Low: 7 business days

Responses to inquiries will be made via phone, fax, or email, not the Provider Portal. Requests to update the Care Plan with information provided will result in the revised Care Plan being posted.

CREATE MESSAGE

Send a Comment or Question

Please do not send preauthorizations, benefits or claims related questions as part of a care plan message. If you would like to ask a question related to preauthorizations, benefits or claims, please select the appropriate message center category. If you would like to submit a preauthorization please [click here](#).

Choose a category and subcategory for your message. If you need help choosing an option, visit our [help section](#). [↗](#)

<p>Category * Care Management</p>	<p>Subcategory * ▼</p>
<p>Member Name WI, VI</p>	<p>Provider Name Aaron, Andrea M</p>
<p>Priority * ▼ Urgent High Medium Low</p>	<p>Contact Phone * (134) 544-9900</p>
<p>Contact Name * test eh automation</p>	



Step 15:

1. Click the **Message Content** field and enter your message.
2. Review your **Contact Name** and **Contact Phone** and updated if needed.
3. Click **Submit**.

Choose a category and subcategory for your message. If you need help choosing an option, visit our [help section](#). [↗](#)

<p>Category * Care Management</p>	<p>Subcategory * Provider Portal Care Plan Question</p>
<p>Member Name WI, VI</p>	<p>Provider Name Aaron, Andrea M</p>
<p>Priority * Medium</p>	
<p>Message Content *</p>	
<p>Contact Name * test eh automation</p>	<p>Contact Phone * (134) 544-9900</p>

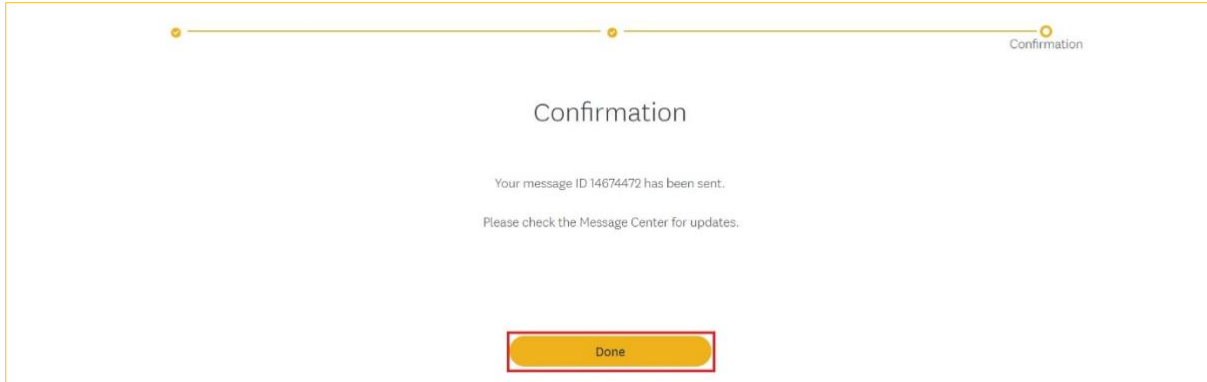
Previous
Submit



Step 16:

The **Confirmation** page displays.

1. Click **Done**.

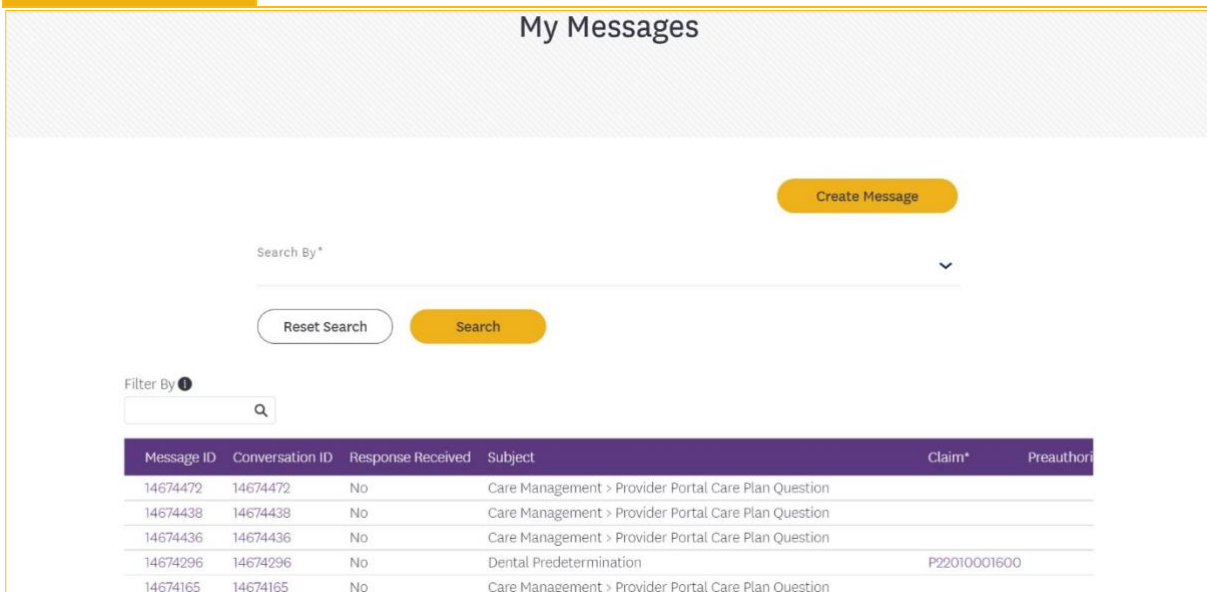


Step 17:

The **My Messages** page displays.

Note: The most recent message sent is listed at the top of the table.

1. Click the **Message ID** to review the details of the message you sent.





Step 18:

- To print or download the Care Plan:
1. Click **Print or Download Care Plan**.

Care Plan Details

Member Name	Member ID	Date of Birth	PCP Name	PCP Phone Number	PCP Location
VI WI	K8000680701	08/23/1968	Chin, Harold	(212) 746-2942	505 E 70th St, Apt Ht4, New York, NY, 100214872

This Care Plan was last updated on
06/02/2022

Back
Send a Comment or Question
Print or Download Care Plan

- > Problem : toc
- > Problem : Cultural/Religious Preference Barriers
- > Problem : Transition from home to a formal healthcare setting



Step 19:

- The print screen displays.
1. Click the **Destination** drop-down to select a printer or select **Print to PDF** to download a copy of the document.
Note: In this example, we will choose **Print to PDF**.
 2. Click **Print**.

Print

2 sheets of paper

Destination: Microsoft Print to PDF

Pages: All

Color: Color

More settings: ▼

Print Cancel



Step 20:

The **Save Print Output As** screen displays.

1. Choose the location on your computer where you want to save your file.
2. Enter a **File name**.
3. Click **Save**.

The screenshot shows the 'Care Plan Details' page with a 'Save Print Output As' dialog box overlaid. The dialog box is titled 'Save Print Output As' and shows the current location as 'This PC > Documents'. The file name is 'Care Plan' and the save as type is 'PDF Document (*.pdf)'. The 'Save' button is highlighted with a red box. The background page shows member information and PCP location details.

Care Plan Details

Member Name: VI WI
Member ID: K800

PCP Location: 505 E 70th St, Apt Ht4, New York, NY, 100214872

This Care Plan was last updated on 06/02/2022

[Back](#) [Send a Comment or Question](#) [Print or Download Care Plan](#)

Thank
You

