L.A. Care Provider Portal Member 360 Reference Guide



HEALTH PLAN®

For All of L.A.

Member 360 Quick Reference Guide

The *Provider Portal Member 360 Reference Guide* is a tool to assist in the daily navigation of the frequently performed tasks on the Member 360 page (also known as the Member Profile) of the Provider Portal, including coverage, benefits, authorizations, and other valuable information.

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Navigating to the Member 360 (Member Profile) Page

Follow the below steps to navigate to the Member 360 (Member Profile) page. Note that user views will vary based on each user's access.

Step 1: From your home page, you can conduct a Member Search either by navigating to the Search Members Tile or by selecting Search Members from the Quick Actions menu.

<u>Note</u>: If the **Quick Actions** tab is not present, then the Search Members option will be available under the **More** tab.



Step 2: On the Member Search page, enter either Member ID; Last Name AND Date Of Birth; or Phone Number. Click Search.

<u>Note</u>: The use of Phone Number as a search criteria is only recommended in instances where Member ID or Date of Birth are unknown. Also, if any one set of fields is entered, the remaining fields will become non-editable.

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A My Profile Interactions	Secure Messages Authorizations	Attestations Remediations	Resources	Quick Actions \checkmark	More 🗸
Member Search					
Member Search					
Member ID					
M123456					
-OR-					
Last Name		Date of Birth			
Enter a value		Choose a date			
-OR-					
Phone Number					
Enter a value					
					Reset Search
					2
	Privacy Policy Terms & Conditions	Contact Us 1-888-4LA-Care (1-888-4	152-2273)		

Step 3: Upon clicking Search, the **Search Results** will be displayed. Please note the search result is sorted based on Status (active/inactive member) by default.

Select the member from the list and click on **Open** to open the Member 360 (Member Profile) page.

Member Searc	:h																	
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Q Membe	er Searc	h																
dember ID																		
incinition no																		
OR-																		
ast Name										D	ate of B	irth	into					-
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OR-																		
'hone Number																		
Enter a value																		
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Results																		
															Primary			
Full Name 🗸	Birth	~	Number	~	Member ID	~	Address	~	Zip ∨	LOB		~	Network V	PCP V	Plan V Product	Date (Primary)	Status	`
									91307	MCLA			HEALTH CARE L	Admin Provide	LA Care Medica	Aug 01, 2024	Active	
									91307	MCLA			HEALTH CARE L			Jul 01, 2016	Active	-
									91307	MCLA			HEALTH CARE L		LA Care Medica	Jul 01, 2016	Active	
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Member 360: Member Not Assigned View (All Users)

Within the Provider Portal, members may be assigned to a provider or an entity. If a member is assigned to the user, they will be able to view additional details. However, even if a member is not assigned, providers will be able to look up the member and view general information on that member and the member's plan and coverage.

Below is an example of the general view that all users will be able to see for all members.

		* (3
My Profile Interactions Secure Mess	sages Authorizations Resources Claims	Users Reports Quick Actions 🗸
=		_
2 Member Information	F1 Person Account	
0	Primary Phone Resident Address	
Birth Date Gender	Detail Coverage	4
Plan Card	V Profile	Dessaure
Plan Name	Preferred / Nickhame	He/Him
Relationship to Subscriber Member ID	Language (State)	Spoken Language
PCP/Clinic Name CAP Hospital Name		Abkhaz;Adyghe;English
MSO Name Auth Fax	Written Language	Gender Identity
Claims Address Rx BIN	English	Male
Rx PCN Rx Group	Sex at Birth	Member Race (Collected)
Medi-Cal Eligibility Type Dual Eligibility	Male	American Indian or Alaska Native;Asian-Other;Asian Indian;Ci
	Nace	Hispanic or Latino: Mexican: Guatemalan
3	Ethnicity	Sexual Orientation
		Bisexual
	TribeCode	Alternate format Preferences
	Juaneno	Large Print
	Rx Adherence Rating	
	✓ Other Coverage & Insurance (COB / MSP)	4

- 1. Member Highlights Panel
- 2. Member Info Card
- 3. Member Plan Card
- 4. Member 360 Tabs
 - Detail Tab
 - Coverage Tab
 - Coverage / Benefits Information

Member 360: Member Assigned View (All Users)

Within the Provider Portal, members may be assigned to a provider or an entity. If a member is assigned to the user, they will be able to view additional details.

Below is an example of the assigned view that users will be able to see for members assigned to them.

	▲ (2)
♠ My Profile Interactions Secure Me	ssages Authorizations Resources Claims Users Reports Quick Actions \checkmark
_	
2 Member Information	Person Account Primary Phone (555) 555-5555 Resident Address
Plan Card Plan Name LA Care Medicare PLUS Relationship to Subscriber Member ID	Detail Member Plan Coverage Claims Authorizations Documents > Alerts and Triggers .
PCP/Clinic Name CAP Hospital Name MSO Name Auth Fax Claims Address Rx BIN Rx PCN Rx Group NVTD LDSNP	Other Coverage & Insurance (COB / MSP) External Coverage Name Effective Date Termination Date Policy Number NO RECORDS TO DISPLAY
Medi-Cal Eligibility Type Dual Eligibility	Policy Terms & Conditions Contact Us 1-888-4LA-Care (1-888-452-2273)

- 1. Member Highlights Panel
- 2. Member Info Card
- 3. Member Plan Card
- 4. Member 360 Tabs
 - Detail Tab
 - Member Plan Tab
 - Coverage Tab
 - o Coverage / Benefits Information
 - Claims Tab
 - Authorizations Tab
 - Documents Tab

Search Coverage & Benefits for Assigned and Unassigned Members

Coverage information includes all the plan details such as **name of plan, amount** deductible, out of pocket and benefit information, effective dates, and the distribution of benefit coverage between family and individual.

Step 1: To view coverage information, navigate to the **Coverage Tab** on the Member 360 page (Member Profile). There you will find the coverage benefits applicable to the member based on the selected date of service. Both Internal & External plan details are shown.

Step 2: Select the Select Plan checkbox for the required plan.

<u>Note</u>: If the Plan Source is external (where the responsible party is not L.A. Care), when you select that plan, the **External Plan Details** page will be displayed, where you will find all the details of the chosen plan. Once you click finish, a case will be created.

Detail N	1ember Plan Coverage Cl	aims Authorizations Documents	
Please	select a date of service a -	nd plan	Steps Plan Selection
	Member has more than one active pla	an potentially in error	
Date of Se	rvice		
10/22/2	2024 🛱		
	LA Care Medicare PLUS	L.A. CARE MEDICARE	
	Select Plan	Select Plan	
	Member ID	Member ID	
	Effective From 1/1/2019	Effective From 1/1/2023	
	Plan Type / LOB MCLA	Plan Type / LOB L.A. CARE Medicare	
	Termination Date 06/30/2034	Termination Date 12/31/2036	
	PCP / Clinic Name	PCP / Clinic Name	
	Network	Network	
		CAP Hospital	
	CAP Hospital	Provider ID (Site ID)	
	Provider ID (Site ID)	Relationship to Subscriber	
		Plan Source	

Step 3: When you check Select Plan, you will be taken to the **Plan Level Details** page. Click **Next** to proceed and **Previous** button to navigate back.

😰 Plan Card		Detail Member Plan Coverage	
Plan Name		Plan Level Details	Steps
LA Care Medicare PLUS			Plan Selection
Relationship to Subscriber	Member ID	V Deductible	View Plan Detail
PCP/Clinic Name	CAP Hospital Name	In-Network Deductible	View Benefits And
MSO Name	Auth Fax	\$2,000 of \$6,000 applied	Access Rules
Claims Address	Rx BIN	\$4,000 remaining FAMILY	
Rx PCN NVTD	Rx Group LDSNP	3.000 of \$8.000 applied	
Medi-Cal Eligibility Type	Dual Eligibility	\$5,000 remaining	
		✓ Out-Of-Pocket	
		INDIVIDUAL	
		In-Network Out-Of-Pocket	
		\$7,000 of \$10,000 applied	
		\$3,000 remaining	
		FAMILY	
		In-Network Out-Of-Pocket	
		\$1,800 of \$3,000 applied	
		\$1,200 remaining	
		✓ Additional Benefit Details	
		Disclaimer :	
		Cancel Previous Next	3
		✓ Other Coverage & Insurance (COB / MSP)	
		External Coverage Name Effective Date Termination Date	Policy Number

Step 4: Select the relevant **Benefit Category** and **Benefit Details** from the drop-down items. Click **Select** to view details in Benefits Details section.

Step 5: Click Finish to create a case. The case will consist of a timestamped benefit quote. You will be directed next to the **Case Detail** page. Use the **Previous** button to navigate back as needed.

Benefit Selection	Steps
Information for Providers: To ensure payment, Providers are required to confirm membr providing services as payment is made <i>only</i> if the member is e service. Please note that authorization for services is not a guarantee of submitted for services are subject to claims payment and Paym. Please contact the L.A. Care Provider Call Center at 1-877-431-2 questions.	er eligibility prior to igible at the time of payment. All claims ent Integrity policies. 273 If you have any
*Benefit Category	
Inpatient Benefits & Services	•
*Benefit Detail	
Inpatient Hospital Stays (Elective Admission)	•
Select Select Select Description Elective Admission - Inpatient hospital services LA. Care covers me inpatient hospital care when you are admitted to the hospital.	dically necessary
Allowed Limit Benefit Year Requires Prior Authoriza	tion Membe
2024 Y	\$0
	•
Cancel	Previous Finish 5

The **Case Details** page displays the Case Number, Member ID, Plan Name, Last Name, Line of Business, Case Record Type, Status, Plan Selected, Details, and more.

Your benefit quote will be visible in the **Related Benefit Quotes** section where you will find the Case Number, Status, Date Opened, Benefit Category, and Benefit Details.

Step 6: Click the **Case Number** to view the Benefit Quoting Details page.

_{Type} Plan Inquiry (Internal)	Status Completed	Sub Status	
Detail			
✓ Case Overview			
Case Number 00035027			Member ID
First Name			Last Name
Line of Business MCLA			Type Plan Inquiry (Internal)
Status Completed		1	Date/Time Opened 9/23/2024, 12:49 AM
Plan Selected MCLA Medi-Cal Benefit Plan			Subject Plan Inquiry (Internal)
Details called on 9/23 following : Disclaimer :	/24 for MCLA Medi-Cal Benefit	Plan, and was informed of the	
Description			
∽ Internal Use Only			
Contact Name Admin ACR Provider Portal			Case Origin Provider Portal
Priority Medium			
✓ Related Benefit Que	otes		

On the Benefit Quotes Case Details page, you will find the details such as:

- Case Number
- Member ID
- Line of Business
- Case Record Type,
- Status
- Details
- Benefit Attribute Details
- Access Rules Details

ype Status Sub Status		
enefit Quoting Completed Completed		
etall		
✓ Case Overview		
Case Number 00035028		Member ID
First Name		Last Name
Line of Business MCLA		Type Benefit Ouoting
Status	/	Date/Time Opened 9/23/2024 12:50 AM
Plan Selected		Parent Case
Details		Subject
Called on 9/23/24 for MCLA Medi-Cal Benefit Plan, and was informed of the following: • Benefit Description : Elective Admission - Inpatient hospital services LA. Care covers medically necessary inpatient hospital care when you are admitted to the hospital.		Benefit Quoting
Calified on \$2/324 for MCL Medical Benefit Fan, and was informed of the following: Calified on \$2/324 for MCL Medical Benefit Fan, and was informed of the following the second		Benefit Quoting
Called on 92/32/4 to WCL Med-Call Bennt Files, and was informed of the forlowing: Each Advancement of the MCL Med-Call Bennt Files, and was informed of the medically necessary inpatient hospital care when you are admitted to the hospital. Emmit Annoua Oussi Emmit Annoua Oussi Encorporational (Beche Admission - inpatient hospital services LA. Care ourse medically recessary inpatient hospital care when you are admitted to the hospital. excerning information: Beche Admission - inpatient hospital services LA. Care ourse medically recessary inpatient hospital care when you are admitted to the leopold. * Advanced to mit: * Advanced to mit * Ad		Benefit Quoting
Called on 92/32/4 for MCL Medical Bennth Fan, and was informed of the forming called on 92/32/4 for MCL Medical Bennth Fan, and was informed of the forming the second		Benefit Quoting
Called on \$2/23 44 or MCLA Med-Call Benefit Flass, and was informed of the metrical flast on \$2/23 44 or MCLA Med-Call Benefit Flass, and was informed of the metrical flast on Advisoration of the metrical flast on the metrical fl		Benefit Quoting
Called on \$2/23 44 for MCL Medical Benefit Face, and was informed of the Environment of the MCL Medical Benefit Face, and was informed of the Benefit Face and Provide the State of States and States and American States and States an		Benefit Quoting
Calibia on \$2/32 AF WCL MacLic all Benthal Faux, and was informed of the Environment of the Second		Benefit Quoting
Califie on \$2023 40 km XLCL Med-Califier Take, and was informed of the Formation of the Second Seco	Case 0	Benefit Quoting

<u>Note</u>: Providers can **revisit benefit quotes** they created through Benefit Selection while selecting coverage details. To revisit the benefit quotes case page, navigate to the **Interactions** tab on the homepage, click the drop-down under **Cases** and select **Recently Viewed Cases**.

	ŧ	My Profile	Interactions	Secure Messages	Authorizations	Resources	Claims	Users Repo	rts Quick Ad	ctions 🗸		
	^{Cases} Recentl	y Viewed 👻									Crea	te Interaction
100+ ite	0.9	wareh Easte										* *
	RECENT	LIST VIEWS					∨ St	V Date/Time O	pened v	Case Owner 🗸		
1	App	oroval Pending -	Network Adjustme	nt			Com.	. 10/2/2024, 11	36 PM	aprov	¥	
2	Cas	es Created by M	le				Com.	10/2/2024, 11	28 PM	aprov	¥	
3	Cha	inge Of Owners	hip - Approval Peno	Sing			Com.	10/2/2024, 11	35 PM	aprov	۳	
4	Inte	raction Request	count Manager ts - All				Com.	. 10/2/2024, 11	35 PM	aprov	•	
5	Inte	raction Request	ts - Completed				Com.	10/2/2024, 11	28 PM	aprov	۳	
6	Inte	eraction Request	ts - Pending				Pendi	10/1/2024, 6:1	3 AM	aprov	¥	
7	My	Case					Pendi	10/1/2024, 4:0	n am	aprov	¥	
8	✓ Rec	ently Viewed					Pendi	10/1/2024, 1:4	I6 AM	aprov	¥	
9	Rec	ently Viewed Ca	ses			-	Open	7/15/2024, 11	16 PM	PDU Queue	¥	
	111.071	ICD LICTC				_					-	

3	ases Recently Viewed						Create Interac
2+ item	:	0					*
	Case Num 🗸	Subject	~	St V	Date/Time Opened V	Case Owner ∨	
1	00037059	Inpatient Hospitals - (Elective Admission) - Authorization Request		Com	9/30/2024, 6:57 AM	aprov	w
2	00037668	Benefit Quoting		Com	10/2/2024, 11:36 PM	aprov	w
3	00037663	Plan Inquiry (Internal)		Com	10/2/2024, 11:28 PM	aprov	w
4	00037667	Benefit Quoting		Com	10/2/2024, 11:35 PM	aprov	w
5	00037666	Benefit Quoting		Com	10/2/2024, 11:35 PM	aprov	¥

Search Authorizations

When a member is assigned to a provider or entity, **all** Provider Portal Users (regardless of role) may view the status of current and past Service Authorization Requests (SARs) on the Member 360 page (member profile).

<u>Note</u>: This feature is only available if the member is assigned to the user's logged in Account.

Step 1: To view existing SARs, navigate to the Authorizations tab in the Member 360 page.

Step 2: Enter the desired date range to search authorization results. For specific results, you may choose to select a **Type** from drop down or enter an **Authorization Number**. Click **Search** to view search results. Use **Reset** button to reset the search criteria.

<u>Note</u>: The maximum date range duration possible for the search is a one-year period; any duration over one year will result in an error.

Authorization Filter Authorization Search Criteria Authorization Number Enter a Value	quest New thorization
Authorization Search Criteria *Received From Date *Received From Date O9/04/2023 O9/04/2024 O9/04/2024 Control Co	
Authorization Number Enter a Value	•
Res	t Search
Type Category Authorization Number Requested By	R

