

# Kaiser Foundation Health Plan of Washington

**Affiliate Link** 

**User Guide** 

Rev. October 17, 2023

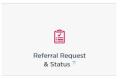
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Feedback about this document may be sent to: <u>KPWA.provider-services@kp.org</u>

## Introduction

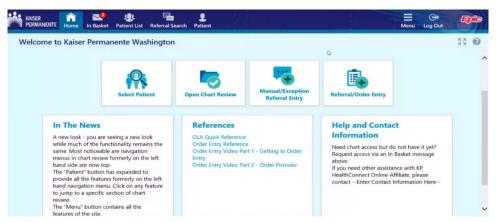
Affiliate Link is accessed by selecting *Referral Request and Status* from the Kaiser Permanente Washington Secure Provider Portal.



The Secure Provider Portal is accessed by selecting Kaiser Permanente Washington from the OneHealthPort home page. If you do not have a OneHealthPort account, please visit OneHealthPort at <a href="https://www.onehealthport.com/">https://www.onehealthport.com/</a>.

Upon selection of Referral Request and Status, users will be directed to the Affiliate Link home page.

The Affiliate Link home page is organized based on security permissions. User views may vary. If advanced security has not been granted to view patient charts, the tile labeled *Open Chart Review* will not display.

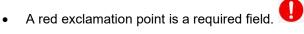


### **IMPORTANT:**

Regardless of whether the provider is the Referring or Referred to provider:

- a) Providers with an Affiliate Link account (anyone accessing the Kaiser Permanente Washington Secure Provider Portal through OneHealthPort) will receive referral and coverage determinations via the Affiliate Link *In Basket*.
  - Provider offices without a referring or referred to clinician will follow rules b) and c) below.
- b) If provider has no Affiliate Link account and Kaiser Permanente has a fax number on file, the provider will receive referral and coverage determinations via fax.
- c) If none of the above is set up, the provider will receive a hard copy referral and coverage determination notice via USPS mail.

# Tips & Tricks





A yellow yield sign is a recommended field.



Selecting the magnifying glass will bring up a table of options from which to select



If you are referring to an owned and operated Kaiser Permanente clinic, choose the To Kaiser option. If you are referring to a provider outside of a Kaiser Permanente owned and operated clinic, choose the standard order.



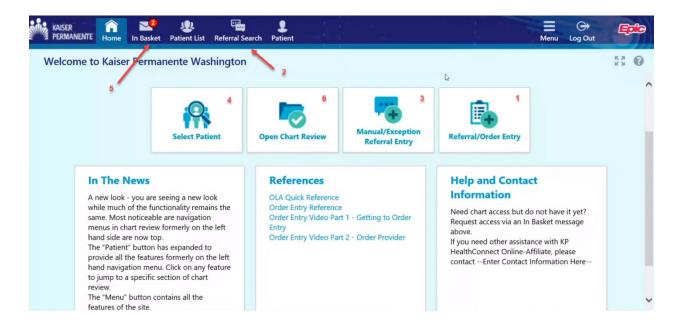
In some cases, the option to refer to either a Kaiser Permanente provider or an external provider is on the same order. If you are referring to an owned and operated Kaiser Permanente clinic, choose "Internal" if both Internal and External options are displayed. If you are referring to a provider outside of an owned and operated Kaiser Permanente clinic, choose "External."



- Select the calendar icon to quickly enter a date , or
- Enter T for today's date
- Enter T+ number for today plus x days in the future e.g. T+2 will be two days from now
- Enter T- number for today back x days in the past e.g. T-1 will is yesterday
- Enter mb for the first day of the month (month beginning)
- me for the last day of the month (month end) Enter
- Gray fields cannot be edited.
- "Information Only" referrals are no longer being issued. These will now display as Closed. The status reason will identify the Closed reason, such as:
  - Coordination of Benefits
  - Visiting member
  - No further review
- Incoming Provider office is the referred-to provider
- Outgoing Provider office is the referring provider

## **Affiliate Link Home Page**

- Select Referral/Order Entry to request an authorization and/or submit a procedure request. <u>Most contracted</u> providers will use this option unless otherwise instructed.
- 2. Select **Referral Search** to view the status of a requested authorization.
- 3. Select Manual/Exception Referral Entry when the clinic name does not display under Select Ordering Clinic/Tax ID or when the practitioner name does not display under Select Authorizing Provider on the Referral/Order Entry option. Most non-contracted providers will use this option. Some contracted providers may use this option only if instructed to do so.
- 4. **Select Patient** to search by member name or medical record number.
- 5. Select In Basket to:
  - a. Request chart access if appropriate to the office needs.
  - b. View messages pertaining to authorization requests along with approval and denial notices.
- 6. Select **Open Chart Review** to view a patient's chart if the office has access. If access is needed, select In Basket and view instructions under <u>Requesting Chart Access</u>.



View additional information by selecting the tiles for *In The News*, *References*, and *Help and Contact Information*.



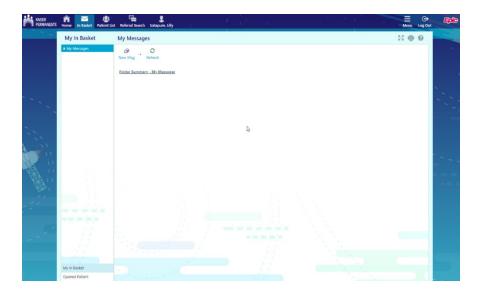
# **Requesting Chart Access**

Chart access allows providers to view the medical record of a patient with a Kaiser Permanente primary care physician.

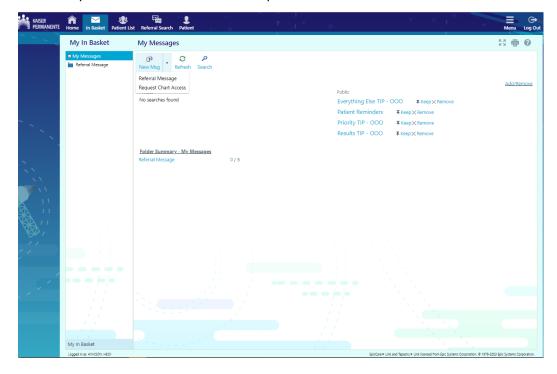
Patients located in Kaiser Permanente regions outside of Washington cannot be accessed through this feature. Users must access the patient's Kaiser Permanente home region portal.

1. To request chart access, on the Affiliate Link home page, select In Basket.



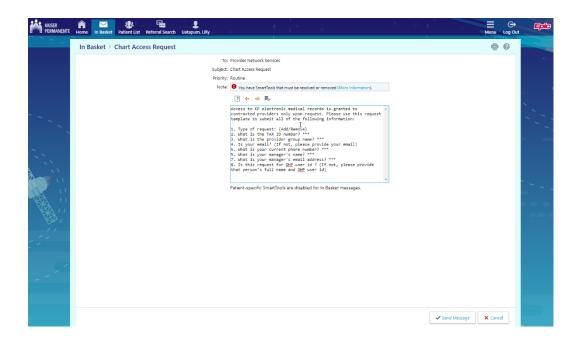


- 2. Select New Msg.
- 3. Select Request Chart Access from the drop down menu.



4. Answer the displayed questions, replacing the asterisk \*\*\* with answers to the questions, and select Send Message. Answering all questions will be necessary in order to expedite the request.

Tip: Select F2 to move to the next set of asterisks.

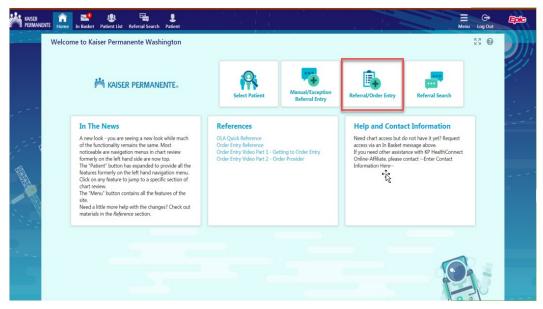


Once access has been granted, a message will be sent to the provider's In Basket and the *Open Chart* Review tile will display on the Affiliate Link home page upon next log in.



# Referral/Order Entry

Most contracted providers will use this option unless otherwise instructed. Most services will not be autoauthorized unless the referral/order is requested through this option.



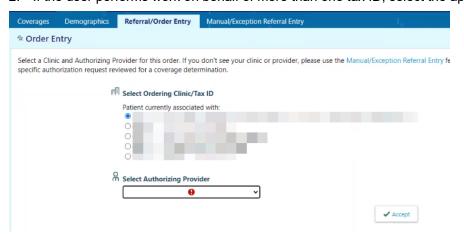
1. Select Referral/Order Entry.

#### A Note About Search My Patients

The patients that display on the *My Patients* list are (1) patients the logged-in user has access to through any of the provider groups they are authorized for, and (2) there is a relationship established between the provider group and Kaiser Permanente (e.g., there is an existing referral for the patient).

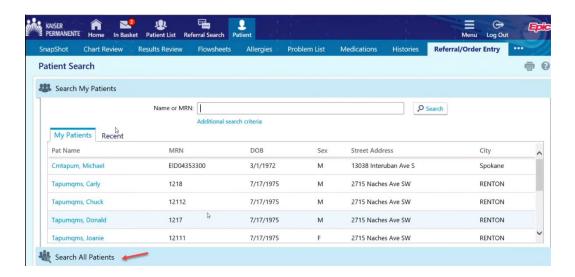
If the member is not on this list, select Search All Patients.

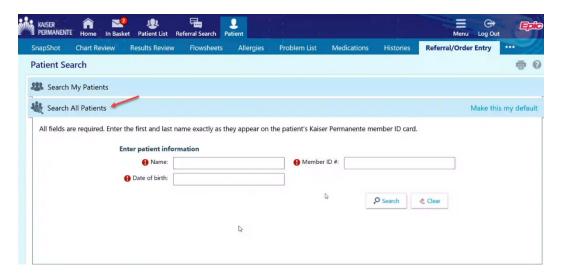
2. If the user performs work on behalf of more than one tax ID, select the appropriate TIN from the list.





- 3. Enter the member name or medical record number and select Search.
- 4. Select the member.





5. Confirm the correct member is displayed or select *Change patient* from the bottom of the screen to perform another search.

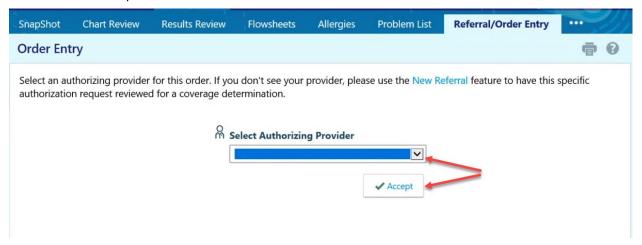
If the following message\*\* is received, return to the home screen by selecting the *Home* button and select *Manual/Exception Referral Entry*.

We don't have your user record associated with a clinic or authorizing provider yet. Please use the Manual/Exception Referral Entry feature to have this specific authorization request reviewed for a coverage determination.

\*\*Typically, this message appears because the Tax ID, Clinic or authorizing provider is not included within the selection options.

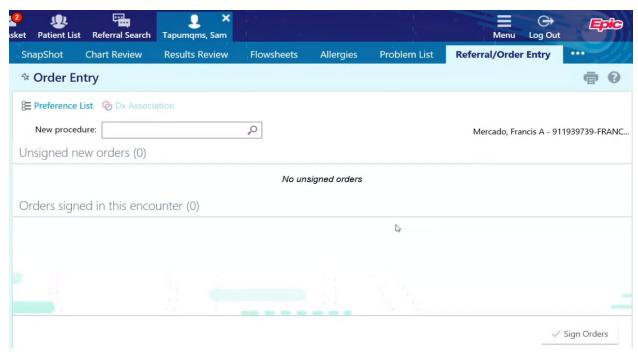


6. After confirming the member, select the provider requesting the service from the drop down menu and select *Accept*.



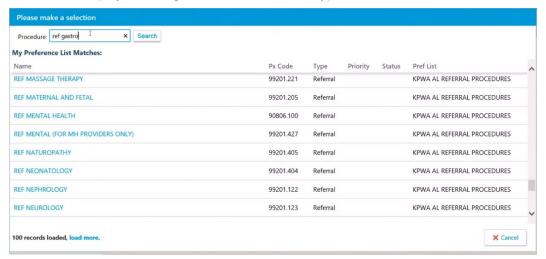
If the expected provider is not displaying in the drop down menu, please select *Home* and use the *Manual/Exception Referral Entry* option.

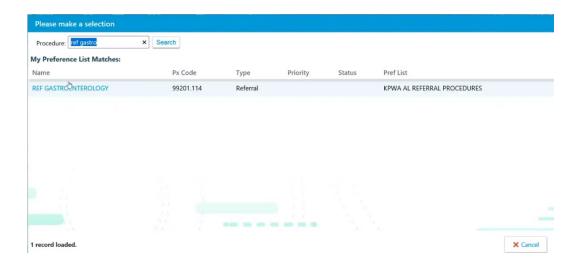
7. Enter service\* being requested by name, e.g., Cardiology or Colonoscopy, or select the magnifying glass to search. Specialty names and their synonyms will return results.



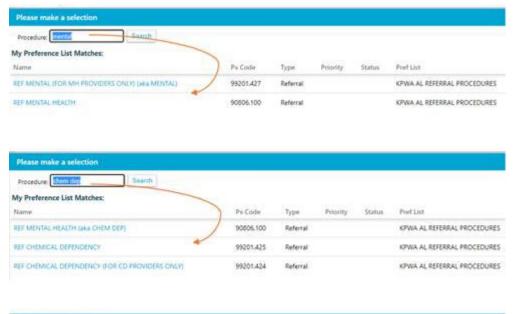
\*Note – Search for the specialty first; using procedure codes will not yield a result. Specific procedures for your request will be found in the individual specialty order form.

8. Results display matching the searched criteria. Type in the service or double click to select the line.





## Mental Health examples:

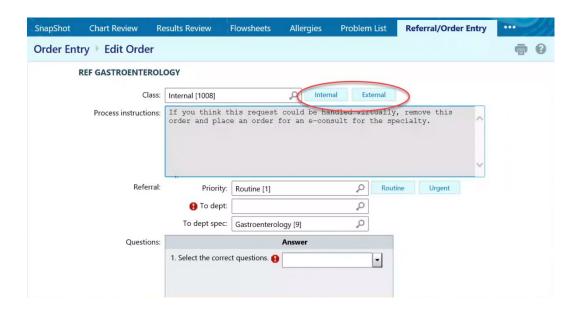


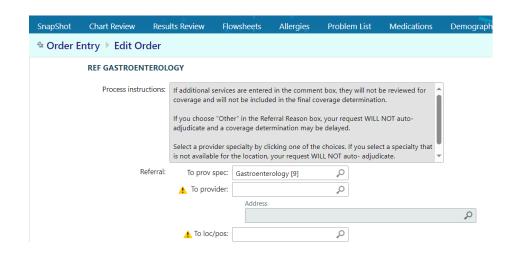


9. Select the line to confirm the procedure.

The edit screen displays.

10. If prompted, select either *Internal* to refer to a Kaiser Permanente provider or *External* to refer to a non-Kaiser Permanente provider.



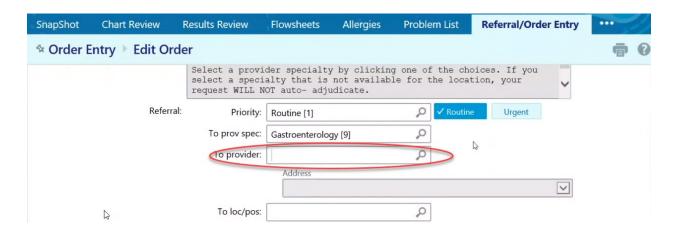


- 11. Process Instructions: These are very important to read, as they have specific information depending on the request.
  - a. If additional services are entered in the comment box, they will <u>not</u> be reviewed for coverage and will not be included in the final coverage determination.
- 12. The To provider specialty will default. If this is incorrect, select the magnifying glass to change it.

• If you are choosing a specialty that does not match the initial search in step 7, please cancel and start the search anew.



- 13. To locate a referred *To provider*, either:
  - a. Enter the provider name in the To provider field and press enter, or
    - i. If this option is chosen and a provider autopopulates to the field, there was only one provider option meeting the search criteria available.
  - b. Use the magnifying glass to perform a search.



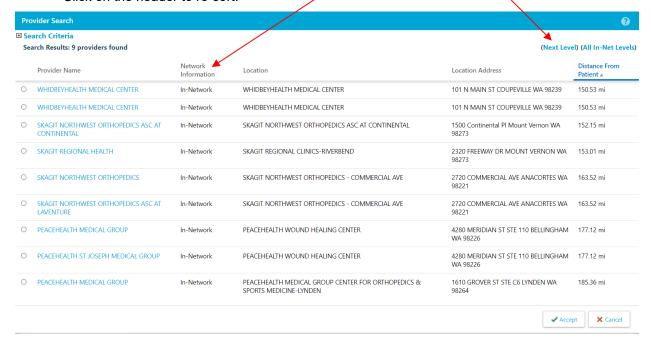
The Provider Search screen will appear.

- 14. Complete fields and select Search. Filling in more fields will narrow the search results.
- 15. To search for all providers that offer the specialty, leave all fields except *Specialty* blank and select the *Search* button.



Providers meeting the search criteria will display based on proximity to the patient's home address. If an expected provider did not display, select either *Next Level* or *All In-Net Levels* to view all providers within the Kaiser Permanente network meeting the search criteria.

- Utilize the scroll bar on the right hand side of the screen to view additional providers.
- Additional providers may display. Note the network level with Kaiser Permanente.
- Click on the header to re-sort.



If the provider being sought is not displaying, leave the *To Provider* field blank and enter comments with the *Referred To* provider contact information.

### Without the required information, Kaiser Permanente cannot process the request.

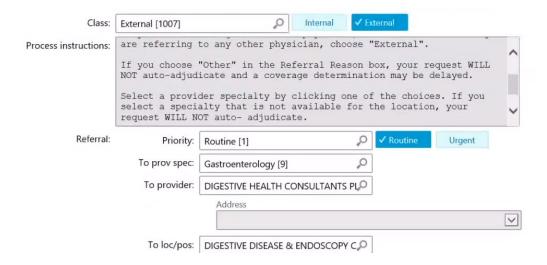
#### Required information:

- Provider/clinic name
- Full clinic address
- Phone number of the clinic
- If known, include the TIN or NPI

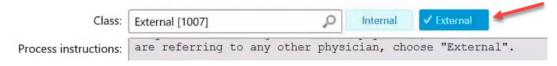
16. To select a provider, click the radio button next to the provider's record and click Accept.



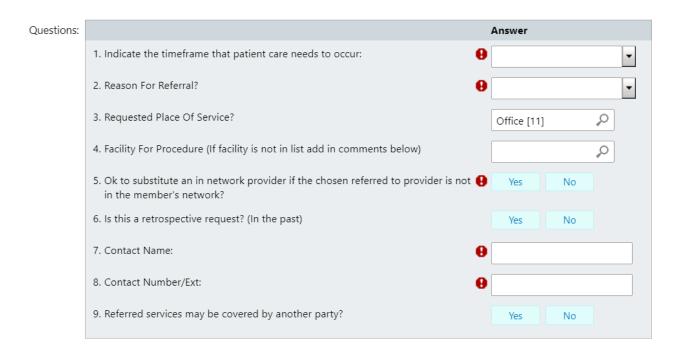
The edit screen re-displays and the provider has populated the *To provider* field. The address may display as a P.O. Box. This is the address Kaiser Permanente has on record for the provider organization. The referred to provider office should confirm their clinic location with the patient when scheduling an appointment.



17. If prompted, select the correct questions pertaining to the request from the drop down – *Internal* if referring into a Kaiser Permanente provider or clinic, *External* if referring to a non-Kaiser Permanente provider or contracted network provider.



18. Answer questions by selecting from the drop down or by using the magnifying glass to search for options. Questions vary depending on values selected.



**ALERT:** Ok to substitute an in-network provider if the chosen referred to provider is not in the member's network?

- If you answer **yes**, this allows the Kaiser Permanente referral team to update the authorization to an in-network provider.
- If you answer no, the request will follow Kaiser Permanente's current process of clinical review. To indicate the reason for selection of "No," enter a comment in the Comment field. This is not required.

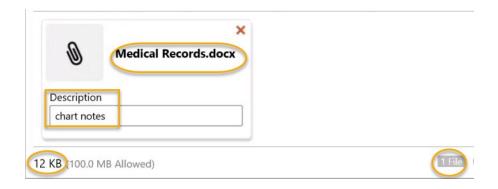
Does patient have any functional status or cognitive limitations?	No	
ls this a retrospective request? (In the past)	Yes	•
Was the earliest visit more than 7 days ago?	Yes	•
Number of visits missing authorization?	1	
List date(s) missing authorization?	2/3	
Is the REASON the authorization was not requested timely due to extenuating circumstances?	Yes	*
Select the appropriate reason(s):	Unable to know	the pat × ▼
	0	
Contact Phone/Ext:	0	

## REMINDER: Entering Comments will not stop the referral from processing as it has historically.

- 19. *Dx association*: Enter as many diagnoses as appropriate. Select the magnifying glass to search.
- 20. If you are providing supplemental material such as chart notes, select Add files.
- 21. Browse for the file.
- 22. Attach.

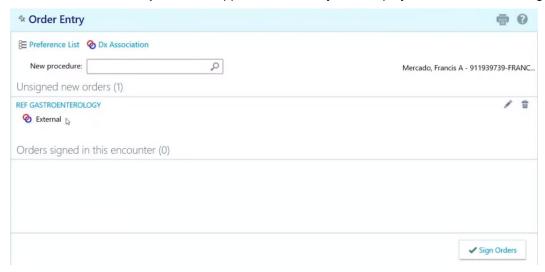


- 23. Confirm the file is attached.
  - a. File name will display.
  - b. File size will display.
  - c. Screen will indicate number of files attached.
- 24. Enter (optional) description.
- 25. Attach additional files if appropriate.



### 26. Select Accept.

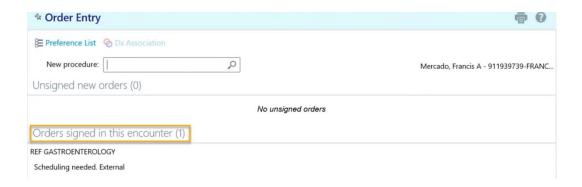
The Referral/Order Entry screen reappears, and the system displays that there is an Unsigned new order.



- 27. Review the request for accuracy.
- 28. If necessary, select the pencil icon to edit,
- 29. If additional orders/referrals are needed for this patient, you can continue to add orders. Once ready to sign and submit, they can be submitted at the same time.



- 30. Select *Sign Orders* in the lower right corner of the screen. Only those who are authorized to do so should Sign Orders and are representing the provider and provider office when doing so.
- 31. The Confirmation screen will appear that the order has been signed.



## Manual/Exception Referral Entry

Select *Manual/Exception Referral Entry* when the clinic name is not under the *Ordering Clinic/Tax ID* on the *Referral/Order Entry* option. Most non-contracted providers will use this option. Some contracted providers may use this tool only if instructed by Kaiser Permanente.



If the following message is displayed, return to the the home screen by selecting the *Home* button and select *Referral/Order Entry*.

Do you see your Clinic and/or Authorizing Provider in the Order Entry feature? If so, using this feature will cause a delay in your request. Please use Referral/Order Entry (tab above). If your Ordering Clinic or Authorizing Provider is not displayed on the Order Entry screen, please continue.



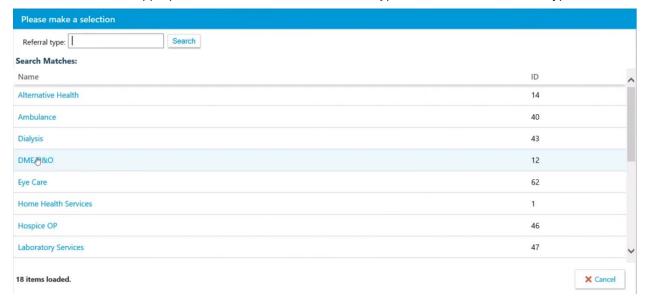
If the Ordering Clinic or Authorizing Provider is not displayed on the Order Entry screen, please continue.

- 1. Select Manual/Exception Referral Entry.
- 2. Enter member name or medical record number and select Search.
- Select member.

- 4. Confirm the correct member is displaying or select *Change patient* from the bottom left side of the screen to search again.
- 5. Use the magnifying glass to search for *Referral type*.



- 6. Select Referral type.
- 7. Scroll to the appropriate selection or use the *Referral type* search bar to locate the type.



Upon selection, the *New Referral* tab and the selected referral type will display. The most common use is Outpatient Services.

#### 8. Select Next.

The *General Information* tab will display. Content may vary based on the selection made in the prior screen.

9. View *Priority*; update if appropriate.





Referral Type selected in the prior screen displays. If the referral type needs to be changed, select the Back button from the bottom right of the screen and re-select.

10. Select the *Reason* for the referral.



11. View Number of visits (or duration). Service will determine if this is number of visits or number of months. Update if appropriate. These will be reviewed by the referral team and final determination will be made on the number of visits.



- 12. Select *Start* date. We recommend using the calendar to make your selection or use the shortcut noted in <u>Tips & Tricks</u>.
  - a. A retro referral may be requested up to 6 months in the past.
  - b. A future referral may be requested up to 30 days in the future.
- 13. Select *Referral By Provider* by selecting the magnifying glass to search. If the table displays blank upon searching, this field may be left blank.
- 14. View Location/POS; update the location or place of service if appropriate.

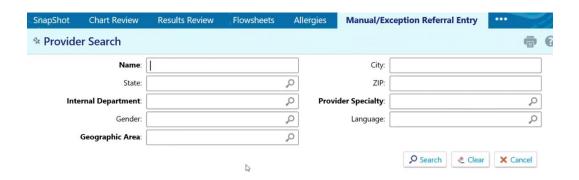


#### Referral To Provider

Providers are a provider place of service, not a practitioner (physician, ARNP, etc)



- 15. *Provider specialty* is a required field. We recommend completing this field first.
- 16. Select the magnifying glass under the *Provider* field to begin the search.



17. If specialty was not entered on the prior screen, enter specialty or select the magnifying glass to search for and select the specialty.



- 18. Enter search criteria, e.g. provider name
- 19. Select Search.
  - If no search criteria is entered and *Search* is selected, the provider list displays with contracted (Preferred) providers offering the specialty listed.

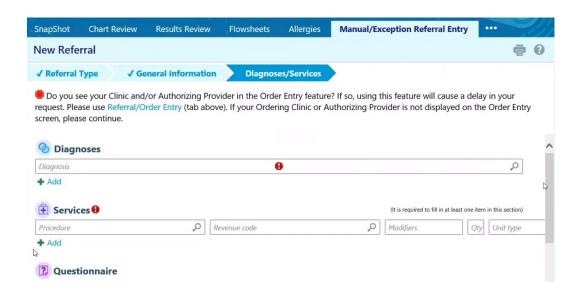


- 20. Select provider. Use the right hand scroll bar to view additional provider offices meeting the specialty criteria entered.
- 21. Click on the radio button and select the *Accept* button from the bottom right of the screen.

The General Information Referral To provider screen will populate based on the selection.

- 22. Confirm information displaying is what was expected or select *Back* button in the bottom right of the screen to perform the search again.
- 23. Select Next.

The Diagnoses/Services tab displays. Content may vary based on the selection made in the prior screen.



24. Search for and enter Diagnosis by code or name.



- 25. The tool may provide guidance if the diagnosis isn't specific enough.
- 26. Select Add to enter additional Diagnoses.



27. Search for and enter *Services* by either Procedure code or Revenue code – words or numbers, or use the magnifying glass to select.



- 28. Select Add to enter additional codes.
- 29. Answer Questionnaire Content may vary.



30. Enter provider office information in the field notes. Replace asterisks \*\*\* with office information.

Answering the questions is a requirement in order to process the request. Without this information, Kaiser Permanente cannot associate the request with the requesting office, potentially impacting patient care.

Tip: Select F2 to move to the next set of asterisks.

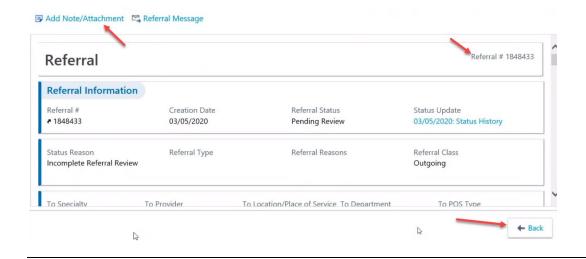
```
Referring Provider Name:***
Referring Clinic Name:***
Submitter Name:***
Submitter Phone Number:***
```

- 31. If you are providing supplemental material such as chart notes, select Add file.
- 32. Browse for the file please note there is a file size limit of 100 mp; files can be split up to be sent if they are larger than this size.
- 33. Attach file.
- Confirm the file has attached.
- 35. Select Request Referral.



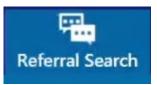
The Referral Details screen displays.

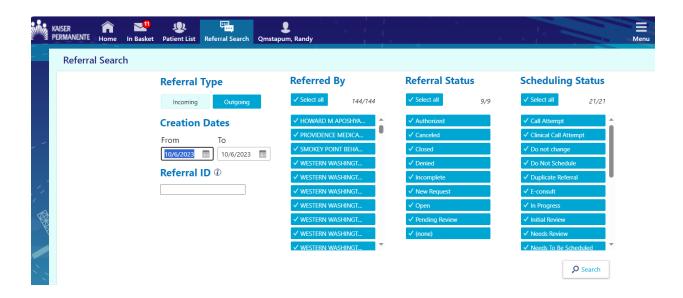
- 36. Review content.
  - c. Select the *Back* button to return to the prior screen to complete updates.
  - d. Select Add Note/Attachment if it was missed in the prior step.
  - e. Note Referral number.



# **Referral Status Lookup**

1. From the Affiliate Link home page or any Affiliate Link screen, select Referral Search

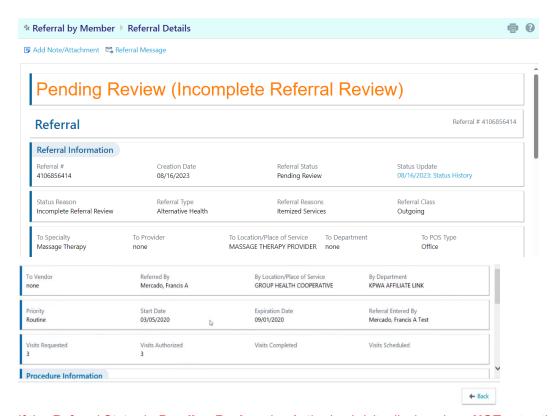




- 2. Select fields appropriate to the search.
  - a. Referral Type
    - i. *Incoming* if the referral is coming into the clinic.
    - ii. Outgoing if it is a referral entered by the referring clinic
  - b. Creation Date
  - c. Referred By provider (if you selected outgoing). The provider must be listed to perform a search using this feature.
  - d. Referred To provider (if you selected incoming)
  - e. Referral Status
  - f. Scheduling Status; not used by non-Kaiser Permanente providers
  - g. Referral ID; This field allows you to search for a specific referral if you already have the Referral ID number.
  - Filling in more fields further narrows the search results.



3. Click on *Referral ID* to open the referral.



If the *Referral Status* is *Pending Review*, the *Authorized* visits displayed are <u>NOT</u> yet authorized.

**By Location/Place of Service** displays as Group Health Cooperative as a result of legacy system updates that have not yet been completed.

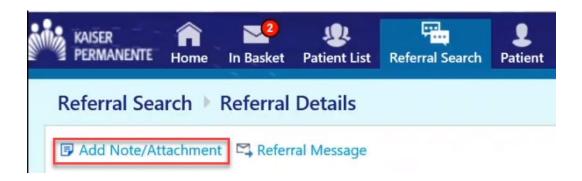


Procedure Information: For audit purposes, CPT codes that are changed, whether as a result of programming table updates or manually, are struck through and not changed. Both Requested and Approved visit counts will also display as 0. For audit purposes, this cannot be hidden from the screen. Please ignore any lines that are crossed out.



- If a document, such as chart notes or medical records, were attached to the original request, they may be accessed from *Referral Notes*.
- Documents sent to a provider office and/or member may display here.
- Once health plan determination letters have been sent, they will display here.

If chart notes or other clinical information were not attached to the original request, they may also be added through this feature.



## In Basket Messages

The *In Basket* will contain messages for all tax ID numbers the user is authorized to access via OneHealthPort, all in one in basket. Every Affiliate Link user accessing Kaiser Permanente's referral tools will have acces to the in basket. Kaiser Permanente recommends providers check their *In Basket* for new messages each time Affiliate Link is accessed.

If the provider office requested chart access, a message will appear in the *In Basket* once the request has been processed.

#### **IMPORTANT:**

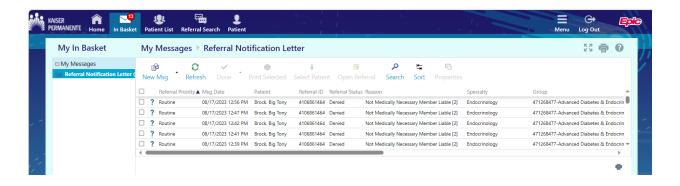
Regardless of whether the provider is the Referring or Referred to provider:

- d) Providers with an Affiliate Link account (anyone accessing the Kaiser Permanente Washington Secure Provider Portal through OneHealthPort) will receive referral and coverage determinations via the Affiliate Link *In Basket* 
  - o Provider offices without a referring or referred to clinician will follow rules b) and c) below.
- e) If the provider has no Affiliate Link account and Kaiser Permanente has a fax number on file, that provider will receive referral and coverage determinations via fax.
- f) If none of the above is set up, the provider will receive a hard copy referral and coverage determination notice via USPS mail.

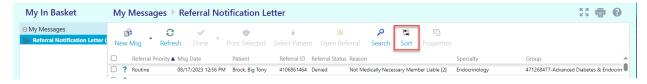
### To view messages:

- 1. Select In Basket
- 2. Select Referral Notification Letter





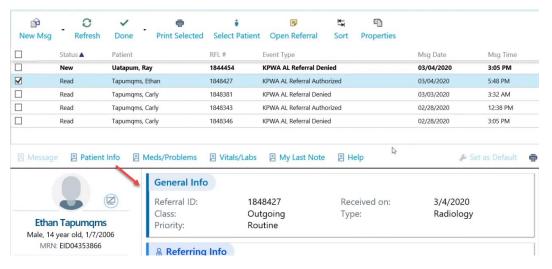
Leverage the Sort feature to sort through lengthy lists.



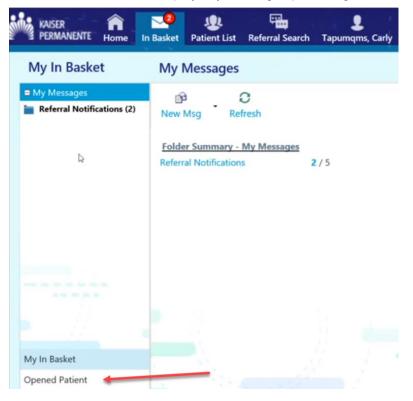
#### Sort By



3. Select the line with the referral to be viewed.



If a patient was being worked and the user moves to the *In Basket*, selecting *Opened Patient* from the bottom of the screen will display any messages pertaining to that member.

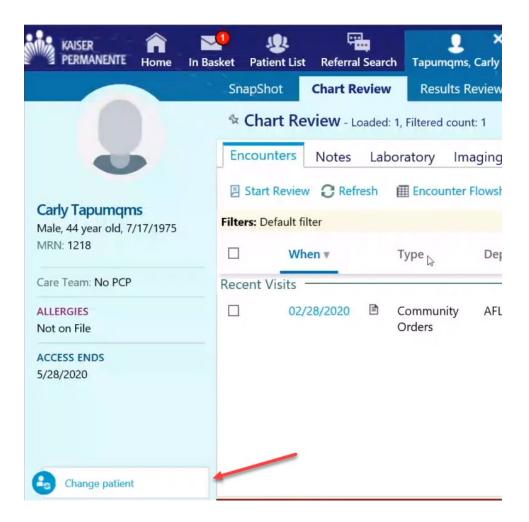




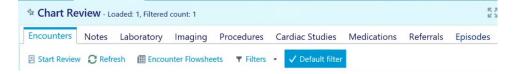
## **Patient Menu**

Select Open Chart Review. This button will not display if the user does not have chart access.
 To request chart access, see instructions at request chart access.

If the member record was previously open, selection of *Open Chart Review* will open that member's record. If a different patient is needed, select the *Change patient* button at bottom of screen.



2. Select tab(s) to view relevant information.



3. Select the patient name at the top of the screen to open *Referral/Order Entry* or *Manual/Exception Referral Entry* without having to return to the Affiliate Link home screen. You can also search all referrals for the patient. Only referrals where your organization is either the referring or referred to provider will display.



### End document ###