



# He@lthLINK

HOPKINS

## QUICK REFERENCE GUIDE

### File Transfer Agent (FTA)

The FTA allows secure transfer of report files with Johns Hopkins HealthCare.

- **Inbox** tab displays new files needing to be downloaded.
- **Downloaded** tab displays all files that have been downloaded, the date, the sender, file type and file size.
- **Deleted** tab files display file sender, type and uploaded time and date.

### ADMINISTRATION

#### User Preferences

- **User Information** allows a provider or administrators within a practice to input contact information, address, phone numbers and email.
- **Change Password** allows a user to change their HealthLINK@Hopkins password. Passwords must be changed every 90 days.

#### System Admin

**User Maintenance** allows for providers and office personnel within a practice to be listed and new personnel to be added. Once a provider is added, **User Preferences** need to be completed.

#### Clear Claim

**Clear Claim Connection** is an auditing reference tool designed to mirror how code auditing products evaluate code combinations. Information such as codes can be viewed prior to submitting a claim within HealthLINK@Hopkins.

**Note:** A user must agree to the terms and conditions each time prior to viewing the information.

### OTHER SERVICES

#### Search Help Files

This allows a key term to be searched when a feature needs clarification. For example: if the word *Claims* is entered in the field, by pressing the **Go** button a listing of topics pertaining to claims within the provider portal are displayed for review.

**Note:** If at anytime you have additional questions that Searching the Help Files can't provide, please contact Provider Relations at 1-888-895-4998.

#### Message Center

**To send a secure message:**

Click on **Message Center** in the top-right corner of the screen then on **New** and a new message box will open. Click on the **Directory Link** for a list of possible recipient mailboxes. Type the mailbox name of the person or department in the "Search for" field. Type in your message and push **send**. The number of unread messages will appear in the inbox next to the envelope symbol in the top right corner. Mail can be viewed by clicking **Message Center** and selecting the appropriate tab.

#### Personal Health Record (PHR)

Patients may grant their provider(s) permission to view some or all of their PHR. This will include information entered by them as well as their plan, including but not limited to:

- Past medical appointments
- Conditions
- Medications \*
- Allergies
- Family history

This permission can be revoked at any time by the member.

\*Allows a provider to view and enter medications for a patient.

**Note:** When patients grant permission all providers within a practice will have access to their Personal Health Information.

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at 1-888-895-4998

### INTRODUCTION

HealthLINK@Hopkins is a secure, online web portal for Johns Hopkins Employer Health Programs, Johns Hopkins US Family Health Plan (USFHP) and Priority Partners MCO members and their in-network providers. As a provider, you can check patient eligibility, claims status, submit and check the status of referrals and authorizations, run patient reports, send secure messages to Customer Service, and more.

\*\* To register for a HealthLINK@Hopkins account, visit [www.jhhc.com](http://www.jhhc.com) or contact your Network Manager.

### PATIENT MANAGEMENT

The **Patient Management** menu allows access to patient information.

#### Current Patient List

The **Current Patient List** allows for quick and easy access to the last 50 patient profiles that were recently viewed. Patient profiles include demographic and PCP information.

#### Search for a Patient

**To search for a patient:**

- Click **Search Patients** link (below **Current Patient** window).
- Click an option button and type in either the member's complete last name, Medicaid or Member ID number. No partial searches will be accepted.
- In the search filters, the member's date of birth needs to be inserted in the field.
- The "As of" field is the date on which a patient became a member.
- Phone number, age and gender fields are not required to complete a search however, they can narrow down a search for a particular member.

**Note:** To change the default setting from **Name** to **Member ID** click the appropriate option button. The new default setting remains in effect until a different option button is selected.



**Watch a video demonstration of HealthLINK@Hopkins:**

Click on HealthLINK@Hopkins Demo, located near the sign-on boxes on [www.jhhc.com](http://www.jhhc.com).

\*HealthLINK@Hopkins currently supports Internet Explorer 6 & 7

## OFFICE MANAGEMENT

### Eligibility

Eligible patients display Start and End Dates in BLACK text. RED text indicates that eligibility is not available.

#### To view patient eligibility:

- Under **Office Management**, click the **Eligibility** link.
- Click an option button and enter the patient's last name, Medicaid or Member ID number, and the patient's date of birth
- Click **Search**
- On the **Eligibility Detail** screen, select the patients name

**Note:** Clicking Select will take you to that patient's profile which includes demographic and PCP information. It will also add that patient to your Current Patient List for easy access.

#### To view eligibility history:

- Click the **View History** link which is located at the upper right side of the **Eligibility Detail** screen.
- The **View History** link allows all available eligibility spans.

### Claims

#### To search for a claim:

- Under **Office Management**, click on **Claims**.
- In the **Claim Status Search** screen, use any combination of search criteria.
- In the **Status** field, un-check any unwanted statuses.
- Click the **Search** button.
- Claim **Search** Results:

When a claim is denied, the record displays in RED text.

To view a claim in detail: Click the **hyperlinked claim number**.

**Note:** The date of service Start and End filters are ignored during claim number searches. The default option buttons in the Patient and Provider fields can be changed by selecting a different option button. New defaults remain in effect until a different option button is selected.

#### To add a new claim:

- Click the **Add Claim** tab.
- In the Patient Search, search by either Last Name or Member ID and click the **Search** button.
- Click the **Select** button on the row of the patient who received services.

**Note:** By selecting the patient the claim form will be displayed and populated with the patient's demographic information and allow the addition of claim information.

#### To complete the claim form:

- All fields that are marked with a BLUE dot are required.
- Fields with Search buttons allow a search within the system for Rendering and Billing Providers, Referral/Authorizations, and Diagnosis Codes.
- When you have filled in all required information, click the **Add Services** button to add procedures.

#### To add services:

- Click the **Add Services** button at the bottom of the main claim form to be taken to the **Add Services** screen.
- When adding services, search for and select appropriate procedure code(s).
- When selecting a procedure code, select up to four modifiers.
- After filling in all required fields, check the box next to the diagnosis code that applies to the selected procedure code, and click the **Add** button.
- The form is reset to allow additional procedures to be added. After all procedures have been added, click the **Finished** button.

#### To link documents:

- Click the **Link Documents** tab in the Additional Information section of the **Claim Summary** screen.
- In the file field, use the **Browse** button to select a file.
- Click the **Submit** button to link the document and return to the **Claim Summary** screen.

**Note:** All documents linked to a claim are displayed in the Additional Information section of the Claim Summary screen. To remove a document, click **Remove Link**.

#### To search for remittances:

- Specify the search criteria.
- Select an option button in the category in you wish to search.
- Type as much specific information as you know into the field.
- Click the **Search** button.

**Note:** The Remittance Advice Search Results will be displayed. If you don't find the remittance advice you are looking for, or if too many records were found, you may need to adjust your search criteria.

### Referrals and Authorizations

#### To search for a referral/authorization:

- Select the **Status** tab located at the top of the screen.
- To complete the search, one of the top three boxes (Member ID, Last Name of Member, Requesting or Servicing provider) and a date must be completed. Requested Service is not required but the search results can be narrowed by selecting any of the boxes.
- After all information is inserted in to the fields, click the **Submit** button.

#### To add a new referral:

- Select one of the **Specialist** tabs located at the top of the screen: Specialist, Outpatient, Admission, Transportation, or Home Care.
- Complete the information in all required fields denoted by a BLUE dot.
- Press the **Search** button to auto-populate information.
- From the search results, locate the desired patient and click the **Select** button.
- After completing all required fields, click the **Submit** button.

#### To link documents to a referral:

- At the bottom of the **Detail** screen, click **Edit** below Authorization Information.
- Click on the drop-down menu under **Transmission**.
- Select **Electronic Only**.
- Click the **Add** button.
- A hyperlink displays at the bottom of the screen: click on this to open the **Add Linked Document** screen.
- Click **Browse** to select a document to upload from files then click the **Submit** button.
- Click **Continue** to return to the detailscreen.

### Code Look Up

#### To search for a diagnosis code:

- In the Diagnosis section of the Claim Screen, type a partial code or diagnosis description and click the **Search** button.
- The Diagnosis Code Search screen opens. Select the appropriate code.

### Reports

Run reports of patients within a particular practice, or of providers by specialty, hospital affiliation, and more.

**Note:** There is no limit to the number of reports that can be created. Files can be downloaded in Microsoft Excel, Adobe PDF and Delimited formats.

#### To create a member roster report:

- In the **Selection Criteria** choose active members or all members and enter a date.
- **Column Search:** choose headers to appear in your report, organize headers by importance (examples: Member ID, Address, Phone, DOB, Line of Business, etc).
- **Report Criteria** allows different headers to be displayed on a particular report.
- The report will be sent to the **File Transfer Agent** for download.

#### To create a provider report:

- **Selection Criteria** allows a particular type of provider to be selected, for example, within a particular specialty, participation within a line of business, or hospital affiliation.
- **Column Selection** allows the report to be organized by a variety of headers. Choose which headers are important to be shown; (examples: Member ID, Address, Phone, DOB, Line of Business, etc). The headers can be added or deleted at any time and moved in order of importance.
- The **Report Criteria** displays the results of the report. Select a file format in which to receive report.
- The report can be downloaded via the **File Transfer Agent**.

### Questions?

For unanswered questions, please contact Provider Relations at 1-888-895-4998. After hours questions can be left on the voice mail or sent through a secure message. These questions will be answered the next business day.

**Note:** If you forget your password, you will be able to view your password clue. If you answer the clue correctly your account will be unlocked. If you don't answer your clue correctly and still can't remember your password, call Customer Service directly at 1-877-814-9909. For security purposes, JHHC out-sources this Customer Service function to another company, HealthTrio. You will be asked your security questions; if you do not answer correctly, you will be locked out of your account until JHHC is notified and can verify your membership. You will be contacted upon verification and you will be able to reset your password and access your HealthLINK@Hopkins account.

# HealthLINK@Hopkins: GETTING STARTED

It is easy to start with a HealthLINK@Hopkins account. If at any time you need assistance with registration, contact Provider Relations at 1-888-895-4998.

## Registration

First time users must register an account.

1. Go to [www.jhhc.com](http://www.jhhc.com).
2. Click: "Need to Register?" in the appropriate sign-on box.
3. Follow the on screen instructions to complete the registration process.

## User ID & Password

The user ID and password assigned at registration are required to access your account.

To maintain the confidentiality of the information accessed through HealthLINK@Hopkins, **do not share your password with others.**

### Criteria for password:

- User ID cannot be used as a password.
- Personal first or last name cannot be used as a password.
- All passwords are case sensitive.

### \* For maximum security please remember the following:

- Avoid using real words.
- Avoid using dates published in public records, such as birth or wedding dates.
- Use a combination of upper and lower case letters, numbers and special characters.
- The security question, and security answer are asked to verify your identity. No other individual should know any of this information.

**Note:** If you forget your password, you will be able to view your password clue. If you answer the clue correctly your account will be unlocked. If you don't answer your clue correctly and still can't remember your password, call Customer Service directly at **1-877-814-9909**. For security purposes, JHHC out-sources this Customer Service function to another company, HealthTrio. You will be asked your security questions; if you do not answer correctly, you will be locked out of your account until JHHC is notified and can verify your membership. You will be contacted upon verification and you will be able to reset your password and access your HealthLINK@Hopkins account.

## What is this header?

This header, found at the top-right corner of the screen, allows users to return to the home page, log out, view messages, role and Access List.

[Home](#) [Log Out](#)

Logged in: Doe, John

Message Center (0 New)

Role: Provider

Access List: Medical Group