

Sterilization Consent Forms

Process for submitting and viewing status

September 2023

Confidential and Proprietary Information

Secure Portal Submission Process for Sterilization Consent Forms

- Carolina Complete Health Providers can now submit Sterilization Consent Forms (SCFs) through the secure portal in advance of the claim submission.
- CCH providers can also view the status of SCF, both portal submitted and mail submitted, in the portal.
- Please refer to <u>Medicaid Clinical Coverage Policy 1E-3</u> for additional details and guidance around Sterilization Procedures and Consent Forms.

Step 1: Login

Portal Login: provider.carolinacompletehealth.com

Log In



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Step 2: Check Member Eligibility and View Health Record

From the Home Screen: Quick Actions, View Eligibility & Patient Information



With two data points: 1. Member ID / Last Name 2. Date of Birth

Providers are able to view eligibility and patient information

l	Select
	View Eligibility & Patient Information
	Create New Claim
	Create Recurring Claim
	Create Authorization

Eligibility Tips

- When checking eligibility, if the member does not pull up, verify data entered
- If Member ID + DOB does not pull up the member, try Member Last Name + DOB
- As best practice, always check member eligibility before creating a web authorization or web claim





Step 3: Document Resource Center: Document Upload

Document Resource Center

• Viewing the member's Health Record, click Document Resource Center on the left side menu.



Document Resource Center: Upload

- Under Document Resource Center, under Document upload. Must have to choose Document Category as "Consent Forms" and Document Type as "Correspondence" and choose file within the size limit.
 - Tip: Prior to uploading, save the file to your computer with 'Consent-Form' in the naming convention.



Document Resource Center

 After the file is successfully uploaded, you will see the message indicating 'Document Upload Accepted.'

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Back to Patient List						
Overview	Doc	ument Reso	ource Cent	er		
Cost Sharing		Desument	Inload	Deeu	mont Doviou	
Assessments		Document	Jpioad	Docu	ment Review	
Growth Chart	1.	Document Category *	Please Select a category	×		
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NC Kids InCK Program	2.	Document Type *	Please Select one	~		
ADT	3.	Upload File *	Choose File No file cho	sen		
Care Plan						
Authorizations	4.		Submit			
Referrals						
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Step 4: Document Resource Center: Document Review

Document Review

- To view the uploaded documents, select Document Review
- Select Document Category "consent Forms" and Date Range "Start Date" & "End Date"
- This will display the files from the search criteria
- The File Name is listed as "Correspondence_{FileName}" with status indicated

Tip: The Document Review tab will also show the status of mailed Consent Forms

Overview	Document Resource Center							
Cost Sharing								
Assessments		Document	Jpload	Document Review				
Growth Chart	1.	Document Category [*]	Consent Forms	~				
Health Record	2	Data Danga t	Start Data:	End Data:	<u> </u>			
NC Kids InCK Program	2.	Date Range	08/07/2023	08/14/2023				
ADT			MM/DD/YYYY	MM/DD/YYYY				
Care Plan			Date span limited to a 3	3-month period.				
Authorizations	3.		Search Documents					
Referrals								
Coordination of Benefits	Please	note: There may be a delay wi	nen downloading large file	S.				
Claims								

Questions?

Contact your Provider Engagement Administrator for support!

 PE Team Page: <u>https://network.carolinacompletehealth.com/engagement</u>

Call Provider Services at 1-833-552-3876