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Medical eTAR Entry System

The eTAR entry system was developed by the Partnership HealthPlan of California eCommerce Team for their participating providers. The system allows users to enter Authorization Request Forms via the Internet at the PHC secured website. The following instructions explain how to use the eTAR entry system, but do not have specifics about TAR policies, procedures or submission requirements.

The direct access to the main logon screen is https://secure.partnership.org

You may also access it by going to http://partnershiphp.org and clicking the Online Services button.

Once you log in, the Main Menu displays only the menu selections to which you have rights.

To access the eTAR system, select eTAR on the Main Menu. The eTAR menu will appear and list the types of eTARs to which you have rights.

On the eTAR menu, the system will only display the TAR type that you have the rights to use. Click on MED then go to Medical Entry Instructions on page 2.

Note: Medi-Cal/PHC code changes effective 9/22/03 for Orthotic, Prosthetic and Immunization can be found on the PHC website at http://www.partnershiphp.org/Provider/notice.asp.
Medical eTAR Entry Screen

The Medical eTAR Entry screen is divided into 5 sections.

1. **Patient Details**
2. **Request Type**
3. **Diagnosis/Provider**
4. **Service Details**
5. **Attachment Note(s) / Submit / Cancel**

Out-of-area TARs must be submitted on paper. The required Medical TAR attachments are listed at the top of the screen.
1. Patient Details

1.1 Enter the Start and End Dates of the Medical TAR. The system automatically defaults the service "from" date using the current date. Change the date if necessary.

1.2 Enter the Patient’s Social Security Number (SSN), Client Identification Number (CIN) or Last Name and click Search. If you entered the SSN or CIN, the name will appear on an additional dialog box to verify and select. If you entered the name or part of the name (minimum of 3 characters), the additional dialog box will appear with a list of names to choose from. If there are many matches, the alphabet appears at the bottom of the screen to allow you to narrow the search using the first name of the patient. You may click the double right or left arrows to go forward or backward through the list a page at a time.

Search by SSN

This member has 2 different CINs. The member has dual eligibility (Healthy Kids and Medi-Cal). Click in either button and click Submit. The eTAR system will select the appropriate program for the specified service date spans.

Search by CIN

On this example, even though the member has dual eligibility, it only shows the Healthy Kids information since the Healthy Kids CIN was used to search for the member.
Search by Last Name

Select the name, click Submit and the Patient's Details are displayed in the TAR screen.

If an affiliation button appears in the Patient's Details portion of the screen after you have selected the patient, it is important that you choose which affiliation you want this eTAR billed to.

Patient's Details screen

If the Eligibility = Yes, member is eligible. After the eligibility code, the member program at the time of service follows: It may display "Medi-Cal" or another line of business.

Click the Edit button if you need to change the member. The system will also "open" the Service Date fields for editing.

If the member was not eligible at the time of the TAR, the following screen appears. You cannot submit electronic requests for ineligible members.

Member is not eligible. Please call PROVIDER RELATIONS for further clarifications @ (707) 863-4100.
2. Request Type.

You must select the Request Type and Patient Status

<table>
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<th>Request Type</th>
<th>Patient Status</th>
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</thead>
<tbody>
<tr>
<td>Retroactive?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Home</td>
</tr>
</tbody>
</table>

2.1 At the “Retroactive?” button, click Yes or No.
2.2 Click Home, SNF/ICF, Board & Care or Acute Hospital to choose the appropriate Patient Status.

3. Diagnosis Detail

3.1 Enter the Diagnosis Code or Description (minimum of 4 characters) in the box provided and click the Search button. Do not use the decimal point (.) on the diagnosis code: enter V220, not V22.0; or 4019, not 401.9

While the Primary Diagnosis is mandatory, a secondary diagnosis is optional. If you enter a diagnosis code, that code and any other code combinations containing that number will appear in a separate dialog box (i.e. 0021 brought up 0021, 20021, 30021 and 80021).

Diagnosis Code Screen
If you type the diagnosis description, an additional dialog box appears with related diagnoses. If your selection brings up many possibilities, a forward arrow and alphabet will appear to help you narrow your search. Select the correct Diagnosis from the list and click Submit.

Diagnosis Description Search

3.2 Enter the Medical Justification notes on the box provided. This field is mandatory.

3.3 Enter the provider’s NPI. This is a mandatory field.

3.4 Enter the member’s current or new phone number on the space provided if available. This is an optional field.
4. **Service Details**

Under Service Details, you must add a service description. You may enter a maximum of 25 additional lines.

4.1 To add a description, click **Add** on the top right of the screen.

Once clicked, the Procedure Entry Wizard appears.

4.2 Enter the Procedure Code or Procedure Description. If you enter the procedure code, a dialog box will appear for you to verify and pick the procedure. Click on the procedure, then **submit** to select. Once the procedure is selected, the system automatically populates the service description.

4.3 Enter the Units of Service. This field is mandatory.

4.4 Enter the Modifier. You can put up to 4 modifiers if necessary.
4.5 Enter the Quantity. This field is mandatory.

4.6 Enter the Charges (up to 9 characters). This field is optional.

4.7 Click <Add> to continue adding Service Descriptions or <Done> when you have completed the Service Details. You have the opportunity to delete a line entry under Service Details if any information needs to be removed.

5. Attachment Note(s) / Submit / Cancel

5.1 If you wish to add attachment note(s), do so now. Click Attachment Note(s) button to display the Attachment Note(s) screen

Click OK to save Attachment Note(s). Click Cancel to close without saving.

5.2 Review your entries and edit/delete if necessary. Click Submit to submit the electronic Medical TAR request to PHC. Clicking the Submit button is equivalent to a physician’s signature. Click Cancel to close this TAR without submitting it to PHC. Your work is not saved.
Once the **Submit** button is clicked, you cannot undo the TAR. The system will transmit it to PHC. Below is a completed Medical eTAR ready for submission:

- Displays “YES” if the member is eligible. Also displays member program.
- Note the message at the bottom of the screen which states: “Clicking on Submit is equivalent to Physician’s signature”
Example of final Medical eTAR transmitted to PHC. Don’t forget to support medical necessity by submitting TAR attachments. Attachments can be faxed to PHC. The fax number is displayed on the screen. Documents can also be electronically attached to the TAR; see next page.

Click Print to print a copy of the TAR for your records. PHC encourages saving electronic copies of online transactions. Click +TAR to enter another Medical TAR request.

Click My Home to go back to eTAR Main menu. Or Log Out to Exit.
Submission of Electronic Attachments

The PHC eTAR system allows you to electronically attach the following file types to your TAR: .tiff, .jpeg, .gif, .pdf or .doc. After submitting the TAR, the screen below appears:

Click the Submit TAR Attachments button to add electronic attachments and the screen below appears.
Click the Browse... button to locate files on your network or computer. Once located, click Open to attach. Type Attachment notes, a description of the documents (mandatory field) and then click Attach file to TAR. The screen appears as seen below.

![Image of the TAR Attachments screen]

You may attach additional files or remove unwanted files on the above screen. Add any number of attachments by clicking the Browse... button each time. Once finished, click Close. Your attachments are automatically linked to your submitted TAR.
eTAR Correction

The eTAR Correction system was developed by Partnership HealthPlan of California (PHC) to allow providers to submit corrections to approved TARs online. It is accessed via the Internet at the PHC Website: www.partnershiphp.org. Providers who need access to PHC online services should contact PHC Provider Relations Department at (707) 863-4100.

The following instructions explain how to use the eTAR Correction system. They do not address TAR policies, procedures or submission requirements. Policy and procedure information can be obtained from the PHC Provider Manual, available on the PHC website, indicated above.

The eTAR Correction system can be used for TARs that were submitted electronically, as well as those that were submitted on paper.

TARs from the following provider types can be corrected electronically:

- Physicians
- Outpatient Facilities
- Ancillary Providers

The following elements can be corrected electronically:

- NPI
- CPT/HCPCS Code
- Modifier
- Count
- Date Span (in certain circumstances – see page 4-5)

Denied TARs cannot be corrected via eTAR Correction.

A TAR cannot be corrected via eTAR Correction if claims have been applied.

eTAR Correction is not available for Inpatient and long term care services at this time.
TAR Search

After logging into PHC Online Services, the Main Menu displays items appropriate to each user’s job function.

Select **TAR Status Checking** on the Main Menu.

The search screen below is displayed. Primary Search fields are by TAR # or Member ID#. Search results can be filtered by date span and/or specific facility.

If valid search criteria have been entered, the following message is displayed:

**Searching the database. Please wait.....**
Search Results are then displayed:

A TAR or list of TARs appears on the screen, as seen above. To view the TAR, click the View link under the “View TAR” column and your screen appears as shown below.
TAR Correction Request

Click **Submit TAR Correction** to start the TAR Correction. An image of the first section of the screen is seen below:

The TAR Correction Number is a tracking number assigned to the existing TAR. The original TAR will be updated to include the changes submitted here. Fields highlighted in green are the fields that can be updated. Leave the field blank if there are no changes to be made.

**TAR Header Information (Start/End Date):**

Enter the correct start and end date to update the dates of service for all service lines. The start date can be changed to include a retroactive date of service. The end date can be changed to include a future date. Both dates must be entered.

**Diagnosis Details:**

A corrected diagnosis can be entered here. Do not insert decimal point.

**Service Provider Details:**

A corrected NPI can be entered here.
An image of the bottom portion of the screen is displayed here:

Fields highlighted in green are the fields that can be updated. Leave these fields blank if there are no changes to be made.

If claims have been processed against the TAR, the fields will not be open for correction.

**Count Authorized:**

Enter the correct total count requested. Include the number of units that were originally approved.

**Start Date/End Date:**

Enter the correct start and end date to change the date of one service one line at a time. The start date can be changed to include a retroactive date of service. The end date can be changed to include a future date. Both dates must be entered.

**Other correction, please explain:**

This free text field is used to request a correction to the CPT/HCPCs code, add, change or delete a modifier, or add a service line if multiple modifiers are required. Enter a brief description of the changes being requested.
After the data entry is complete, click **Submit TAR Correction Request to PHC**. The following is displayed:

![TAR Correction Request successfully submitted](image)

Provider has one opportunity to correct a TAR via eTAR Correction. If a previous TAR correction was submitted, the image below is displayed:

![TAR Correction Request](image)

We already received a TAR Correction request for this TAR and the request is not yet processed. Please wait for the completion of the TAR correction before you submit a new request.

eTAR Correction is not available until the original TAR has been processed. At this time, routine TARs are processed within 5 business days of receipt. Once the correction has been submitted, changes will not be visible for at least one business day.