

Navigating and Using the Driscoll Children's Health Plan Online Referral Link

Online Referrals



www.dchpkids.com

Driscoll Children's Health Plan (DCHP) offers Providers a way to submit and view referrals and authorizations through our Online Referral link, at www.dchpkids.com

Online Referrals

link, at www.dchpkids.com

Providers start here!

Click on the **RED** Web Portal link

Online Referrals

The screenshot shows the Driscoll Children's Health Plan website. At the top, there is a header with the logo and a family photo. Below the header, there are several navigation links: Home, Products, STAR, CHIP, and a red button for Online Referrals. A central section features a map of the Rio Grande Valley and information about STAR, CHIP, and CHIP Pennate programs. On the right, there are links for Online Access, Web Portal, Online Referrals (circled in red), and Claims Portal. Below this, there is a 'Provider Relations' section with contact information and a 'Physician Recruitment' section. At the bottom, there is a 'Provider Manual' and 'Claims Requirements and Companion Guides for Providers' section. A search form is visible on the left side of the page, with a red box around the 'PROVIDERS LOGIN HERE' link.





Driscoll Children's Health Plan

Provider Collaboration Portal

Userid:

Password:

Login

When exiting the application, please use the Logout button.

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Applicable FARS/DFARS Restrictions Apply to Government Use

[Forgot your password?](#)

PLEASE NOTE:

The UserID will always be the Tax ID Number (TIN) for your Group/Practice.

Enter your User ID and password which was provided to you by DCHP

Don't have one? Contact Provider Relations to get set-up

Nueces SDA- 1-877-324-3627

Hidalgo SDA- 1-855-425-3247



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The Current Request Page



www.dchpkids.com

AcuExchange - Windows Internet Explorer

https://provider.dchpkids.com/AcuExchange/Index.jsp?LoginId=AX-8-129827

File Edit View Favorites Tools Help

AcuExchange

Driscoll Children's Health Plan

DCHHPS19 Acuity_Prod

Account: 373368950

Current Requests New Inpatient Request New Outpatient Request New Referral Request Member Summary

Records Found: 50 Retrieve Limit: 100 Show Requests Clear All Filters

Request ID	Status	Member Name	Member ID	DOB	Request Date	POS	Service Type	Requesting Provider	Entered By	Facility	Transaction
1109010089	Approved	G									RY Authorization
1105160045	Approved	G									RY Authorization
1010110084	Closed	M									RY Authorization
1010060054	Closed	B									RY Authorization
1010060052	Approved	T									RY Authorization
1008310065	Approved	L									RY Authorization
1008260076	Approved	M									RY Authorization
1008110064	Approved	B									RY Authorization
1008100076	Approved	P									RY Authorization
1008060008	Approved	C									RY Authorization
1008060007	Approved	P									RY Authorization
1008060006	Approved	P									RY Authorization
1007210025	Approved	S									RY Authorization
1006300024	Approved	H									Authorization
1006300023	Approved	C									RY Authorization
1006300021	Approved	C									RY Authorization
1006300020	Approved	C									RY Authorization
1005070115	Approved	M									RY Authorization
1004190145	Approved	T									RY Authorization
1004190144	Approved	V									RY Authorization
1004190143	Approved	W									RY Authorization
1004130026	Approved	C									RY Authorization
1004080047	Approved	A									RY Authorization

Filter Options
Action
 All Requires Action

Done Internet 100%

1

2

3

Across the top of the page are four tabs:
Current Request
New Inpatient Request
New Outpatient Request
Member Summary (1).

Clicking on any of these will take you to that area of the website.

On the Current Request page , you will see a list of all authorizations corresponding to your TIN, that were submitted by or referred to your office. Your most recent request will always be listed first. If your office has a large number of request and you are looking for a specific one, use the Green Search Bar to filter your search results (2). If any request need attention, you will see a blinking dot on the left side (3).

Search Wizard - Windows Internet Explorer
https://provider.dchpkids.com/AcuExchange/SearchWizard.jsp?LoginId=AX-8-128338

Detail

Column: Member ID [Advanced Search]

Operator: Contains [NOT]

Value: []

OK Clear All Cancel

Children's Health Plan

DCHHP S19
Acuity_Prod



New Outpatient Request New Referral Request Member Summary

Limit: 5 Show Requests Clear All Filters

Service Type	Requesting Provider	Entered By	Facility	Transaction Type
				Authorization
				Authorization
				Authorization
				Authorization

- Enter the search criteria information in the “Value” field.
- If you do not see the search window, be sure to allow Pop-Ups from this website.
- Once you find your request, double-click on it to view the request detail



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Logout

Driscoll Children's Health Plan

DCHHP: Acuity_1

Current Requests | New Inpatient Request | New Outpatient Request | New Referral Request | Member Summary

Current Status | Outpatient Request

OUTPATIENT PROVIDER TASK for #1109010089, OP: Primary, Approved: STAR:

Request Date	Status	Requested Service	Units	Authorized Service	Units	St
09/01/2011	Approved	Office Visit	12	Office Visit	12	73

Member ID: _____

Authorization Information:
 Authorization ID: 1109010 | Close Date: 00/00/0000

Service Item:
 Services Requested: 12 | Status: **Approved** | Reason: Approved Web
 Services Approved: 12 | Start Date: 09/01/2011 | Service Requested: Office Visit
 Attachments: [icon] | End Date: 02/28/2012 | Service Approved: Office Visit
 Procedure Requested: D9430 | OFFICE VISIT DURING HOURS [i]
 Procedure Approved: D9430 | OFFICE VISIT DURING HOURS [i]

Authorization Totals:
 Services Requested: 24 | Status: **Approved** | Reason: Approved - We
 Services Approved: 12 | Start Date: 09/01/2011 | Next Review Date: 09/01/2011
 Services Not Approved: 12 | End Date: 02/28/2012 | Reference #: _____

Per Line: [New Message, Submit, Cancel]
 Per Request: [Notes, Assessments, Reports, Attachments]

When reviewing a detail, there are two screens to choose from: **Current Status** and....

Logout

Driscoll Children's Health Plan

DCHHP: Acuity_P

Current Requests | **New Inpatient Request** | New Outpatient Request | New Referral Request | Member Summary

Current Status | **Outpatient Request**

Reference #: 1109010089 | Requested By (First Name): _____
 Request Date: 09/01/2011 13:45 | Phone: (361) 526-5328

Member ID: _____ | Birth Date: 12/29/2000
 First Name: _____ | Last Name: _____
 Setting: Routine [i]

Providers
 Provider: _____ | Role: Requesting Pr [i]
 Provider: _____ | Role: Referred To Pr [i]

Diagnosis
 Diagnosis: 314.01 | ATTENTION DEFICIT DIS W/ [i] | Rank: Admitting diagnosis [i]

Outpatient Services
 # of Services: 12 | Service Type: Office Visit [i]
 Request Date: 09/01/2011 13:45 | Start Date: 09/01/2011 13:45 | End Date: 2012-02-28 13:45
 Procedure: D9430 | OFFICE VISIT DURING HOU [i] | Rank: [i]

of Services: 12 | Service Type: Office Visit [i]
 Request Date: 09/01/2011 13:45 | Start Date: 09/01/2011 13:45 | End Date: 2012-02-28 13:45

Submit Request | Cancel

Per Request: [Reports, Attachments]

Outpatient Request



Member Summary



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Account: 37336

Current Requests | New Inpatient Request | New Outpatient Request | New Referral Request | Member Summary

AcuExchange 6.00 - Build 27

Member ID: Birth Date:
First Name: Last Name:

Subscriber

Subscriber Name: Relationship: Subscriber ID:

Member Information

Name: Coverage Status: **Active** SSN:
Address: Home Phone: Gender:

Eligibility Information

Policy Benefit Name	Status	Coverage Type Code	Effective Date	Expiration Date
STAR	Active	STAR	02/01/2012	02/29/2012

Primary Care Physician

Provider Name	Network Name	Provider Effective Date
AMI	CHIP NETWORK	06/27/2008
AMI	STAR NETWORK	06/27/2008
AMI	CHIP NETWORK	06/27/2008
AMI	STAR NETWORK	06/27/2008

Requests

Request ID	Referred by Provider	Referred to Provider	Service Type	Start Date	End
1202140		AUDIA	Office Visit	02/14/2012	08/12
1201240			Office Visit	01/24/2012	07/22
1106290			Office Visit	06/29/2011	12/26

1

2

3

4

5

The Member Summary is a great tool for reviewing a member's information. To start, enter the Member's ID number and click on **Get Member Summary (1.)** and you will be able to view:

2. Member Information
3. Eligibility Information
4. PCP information and effective date
5. Member's Request history

Entering a New Request



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To submit a request, click on the **New Outpatient Request** or **New Inpatient Request** if you are submitting from a Hospital.

All of the fields in **RED** are required fields

New Outpatient Request

Reference #: Entered By (First Name):

Request Date: 02/13/2012 10:45 Phone:

Member ID: Birth Date: 00/00/0000

First Name: Last Name:

Setting: Routine

Providers

Provider: Role: Requesting Pr

Provider: Role: Referred To Pr

Provider: Role:

Diagnosis

Diagnosis: Rank: Admitting diagnosis

Outpatient Service

of Services: Service Type:

Request Date: 02/13/2012 10:45 Start Date: 02/13/2012 10:45 End Date: 08/11/2012 10:45

Procedure: Rank:

We will need:

1. The name of the person entering the request
2. The Member ID
3. The Requesting Provider name and the Provider being referred to.
4. The Diagnosis Code, Procedure Code, # of services, and the start date.
5. If more than one procedure code is going to be performed, click on "Add Another Service" to add.



Current Status | **New Outpatient Request**

Reference #: Entered By (First Name): **1**

Request Date: Phone:

Member ID: Birth Date:

First Name:

Providers

Provider:

Provider:

Provider:

Diagnosis

Diagnosis:

Outpatient Services

of Services:

Request Date: 02/13/20

Procedure: Rank:



When the request is complete, click the "Submit Request" button (1) and a Reference # will be provided (2)

Things To Remember:

- Once you have obtained a reference number, go back to your “Current Request” page to check status. The newest request will always be at the top of the page
- Many request will “Auto-Approve”, so there is no waiting. All others are reviewed within 48 hours.
- If you have a question about authorization requirements, refer to our Quick Reference Tool, found on our website or call our Health Services Dept. at 1-877-455-1053
- If you are having trouble with your UserID/Password, call Provider Relations at:
 - 1-855-425-3247 (Hidalgo SDA)
 - 1-877-324-3627 (Nueces SDA)

