

Patient360

How to navigate to Patient360 through the Availity Portal*

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Patient360 overview

- Patient360 is an interactive dashboard that gives instant access to detailed member information.
 - Demographic information, care summaries, claims details, authorization details, pharmacy information and care management-related activities.
 - Medical providers have the option to include feedback for each gap in care that is listed on the patient's active alerts that are posted on the application's member summary.
- Availity role assignment: clinical role > Patient360
- How to access Patient360 through Availity:
 - Availity Portal > Payer Spaces > Applications tab
 - or**
 - Eligibility and Benefits

Availity role assignment

Required Availity role assignment:
Patient360/Patient Health History

Availity administrator will locate within the Clinical Roles section.

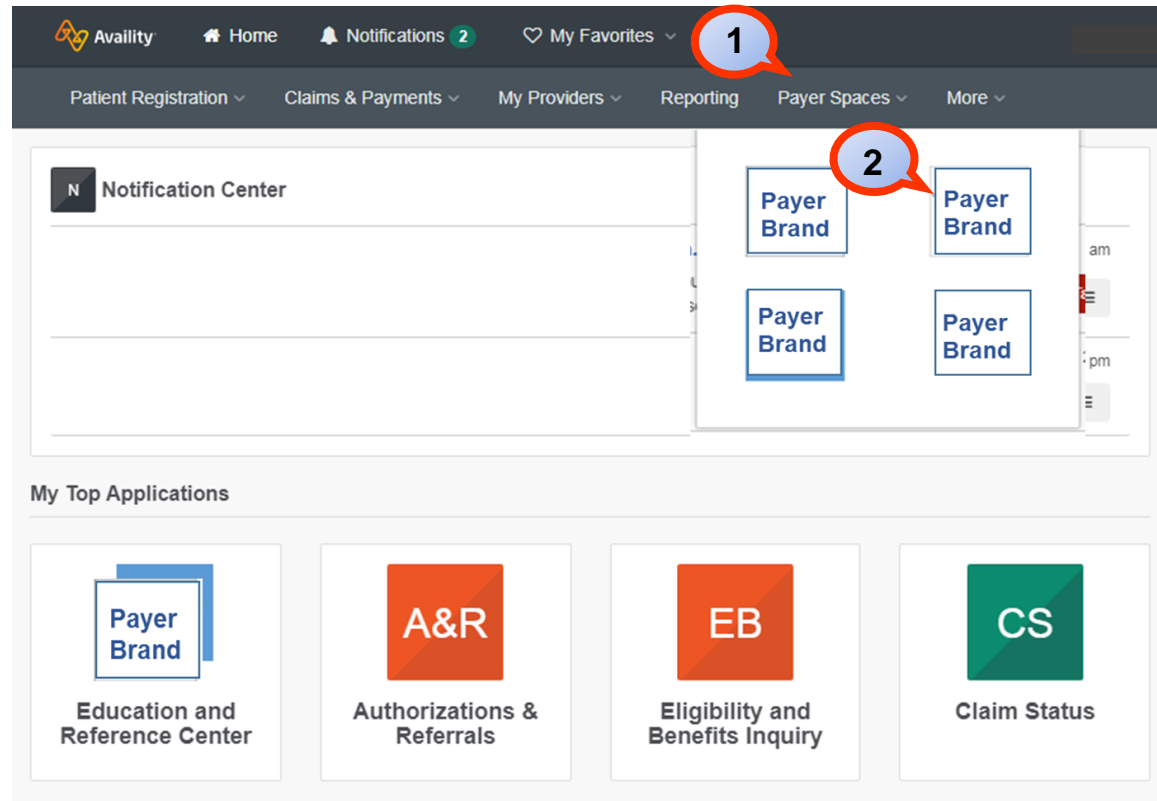
	<input type="checkbox"/>	Role(s)	Permissions What is this?
User Roles			
	<input checked="" type="checkbox"/>	Base Role	More Info
		Clinical Roles	
	<input type="checkbox"/>	Medicaid Member Clinical Reports	More Info
	<input type="checkbox"/>	Medical Attachments	More Info
	<input type="checkbox"/>	Patient Care Summary	More Info
	<input checked="" type="checkbox"/>	Patient360 / Patient Health History	More Info



Navigating to Patient360 through Availity: Payer Spaces

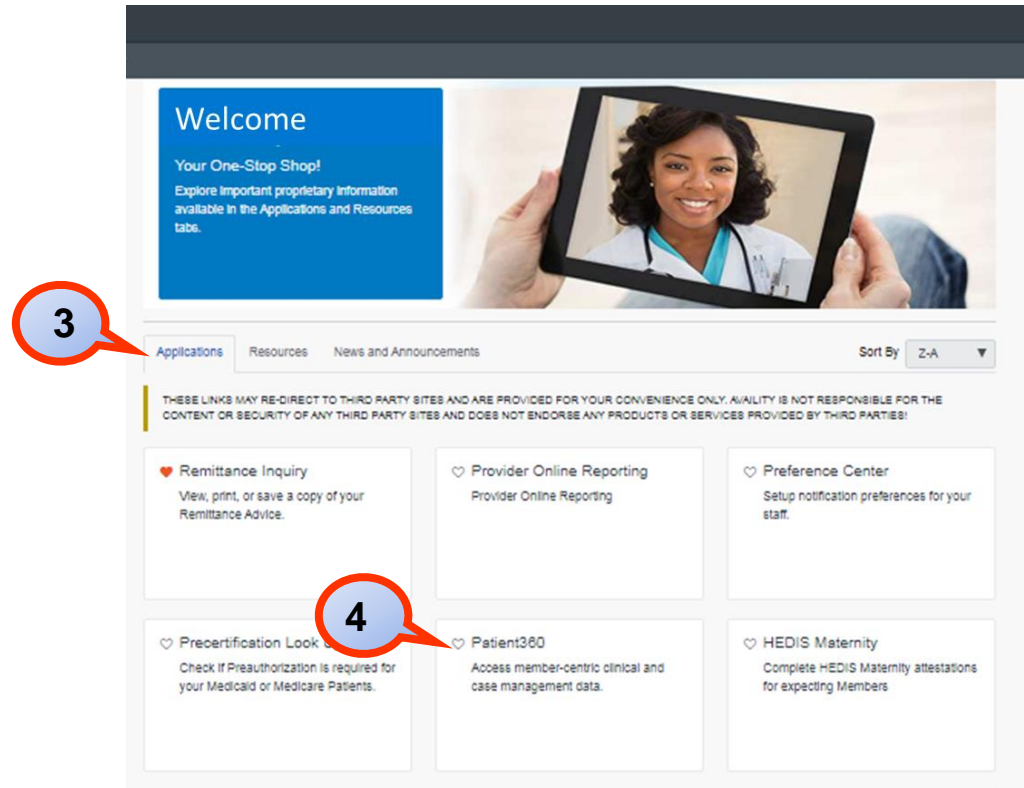
Steps to access Patient360 through Availity Payer Spaces

1. Select **Payer Spaces**
2. Choose the payer brand



Steps to access Patient360 through Availity Payer Spaces (cont.)

3. Select **Applications**
4. Select **Patient360**



Steps to access Patient360 through Availity Payer Spaces (cont.)


5. Complete the fields on the Patient360 application:


- Organization
- Tax ID
- NPI
- Patient ID


Tip:
Type the NPI in the field if it is not loaded in Express Entry.


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Patient360

Organization 
Select an Organization

Tax ID 
Select a Tax ID

Express Entry 
Search for a Provider

NPI 

Patient ID 
Type ID exactly as it appears on member ID card

Patient First Name

Patient Date Of Birth

6. Scroll down the page and choose the appropriate Patient360 Sensitive Services Terms and Conditions (*with or without sensitive information*)

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Patient360 Disclaimer

Access, use, or disclosure of information related to certain sensitive medical services is strictly limited by federal and state laws. Such information may only be accessed, used, or disclosed by Patient360 users with the authorization of the patient or for treatment purposes.

Patient360 does support "Other Blue Plan Members", however, limited information will be available for non-Anthem members.

Patient360 Sensitive Services Terms and Conditions

By choosing to continue with sensitive information, you are certifying that you are accessing sensitive service information with the express written authorization of the patient, or his/her parent or guardian, or that in your professional judgment such information is needed for treatment purposes. Please note certain information, such as substance abuse disorder information is not available within Patient360.

☒ I wish to continue without Sensitive Information.

☐ I agree to the Sensitive Services Terms and Conditions and wish to continue with Sensitive Information.

Cancel Continue

[Terms Of Use](#)



Navigating to Patient360 through Availity: Eligibility and Benefits

Steps to access Patient360 through Eligibility and Benefits

1. Select **Patient Registration**
2. Select **Eligibility and Benefits Inquiry**
3. Complete all the required fields on the Eligibility and Benefits screen

The screenshot shows the Patient360 interface. At the top, there is a navigation bar with 'Availity', 'Home', 'Notifications', and 'My Favorites'. Below this is a secondary navigation bar with 'Patient Registration', 'Claims & Payments', 'My Providers', 'Reporting', and 'Payer Spaces'. The 'Patient Registration' dropdown is highlighted with a red circle and the number 1. Below this, the 'Eligibility and Benefits Inquiry' option is highlighted with a red circle and the number 2. At the bottom, there are three large buttons: 'Payer Brand', 'A&R', and 'EB'. The 'EB' button is highlighted with a red circle and the number 3. A red line connects the 'EB' button to the 'Eligibility and Benefits Inquiry' form on the right.

The screenshot shows the 'Eligibility and Benefits Inquiry' form. The form has several sections: 'Payer' (with a dropdown menu showing 'BLUECROSS BLUESHIELD OF GEORGIA'), 'Provider Information' (with a search bar), 'Express Entry' (with a search bar), 'NPI' (with a text field containing '1234567890'), 'Patient Information' (with fields for 'As of Date', 'Benefit / Service Type', 'Patient Search Option', 'Patient ID', 'Date of Birth', and 'Patient Relationship to Subscriber'). A blue tip box on the right says: 'Tip: Type the NPI in the field if it is not loaded in Express Entry.' A red arrow points from the tip box to the NPI field. At the bottom, there is a 'Submit' button.

Steps to access Patient360 through Eligibility and Benefits (cont.)

4. Select the **Patient360** tab from the member's eligibility and benefits screen
5. Choose the appropriate Patient360 Sensitive Services Terms and Conditions (*with or without sensitive information*)

The screenshot displays the Patient360 web application interface. The top navigation bar includes links for Patient Registration, Claims & Payments, My Providers, Reporting, Payer Spaces, and More. A search bar and a 'My Patients Only' dropdown are visible. The main content area shows a patient's details, including a 'Patient Name' field, 'Date of Service: Jul 13, 2017', 'Member ID', 'DOB', and 'Gender'. A red circle with the number 4 highlights the 'Patient360' button. Below the patient details, there are tabs for 'Patient Information' and 'Coverage and Benefits'. A modal window titled 'Patient360 Disclaimer' is open, displaying text about sensitive medical services and a section for 'Patient360 Sensitive Services Terms and Conditions'. A red circle with the number 5 highlights the radio button for 'I agree to the Sensitive Services Terms and Conditions and wish to continue with Sensitive Information'. The modal also includes 'Cancel' and 'Continue' buttons, and a link to 'Terms Of Use'.



Overview: Patient360 tool navigation

Patient360 landing page — member summary

The patient banner displays all of the demographic information on file for the member.

The screenshot displays the Patient360 landing page. At the top, the 'Patient Name' dropdown is visible. Below it, the banner shows demographic information: Risk Score, Address, City / State, Zip, Age / Gender, DOB, Home Phone, Work Phone, Member ID, Medicaid ID, Medicare ID, Ethnicity, PCP, Primary Case Mgr, Secondary Case Mgr, Eligibility Status, Eligibility End Date, and Plan Product. A red box highlights the navigation tabs: Member Care Summary, Claims, Utilization, Pharmacy, Labs, Care Management, and Lab Reports. Below the tabs, the page is divided into several sections: Active Alerts (with a table of alerts), Immunizations and Preventive Health, Lab Results, Inpatient, Emergency Department, Pharmacy, Authorizations, and Office Visits. Each section has a table with columns for Date, Service, Facility Name, Primary Diagnosis, Medication/Strength, and Prescriber. The 'Active Alerts' table shows alerts for Claims as of May, Claims suggest th..., Controlling High B..., and Controlling Blood... The 'Immunizations and Preventive Health' table shows no data found. The 'Lab Results' table shows no lab results found. The 'Inpatient' table shows no inpatient data found. The 'Emergency Department' table shows no data found. The 'Pharmacy' table shows no data found. The 'Authorizations' table shows no data found. The 'Office Visits' table shows no data found.

The **Claims** tab contains the member's claims history, including claim status, provider name, diagnoses and services rendered.

The **Utilization** tab provides details about active and inactive authorizations on file for the member.

The **Pharmacy** tab includes all the pharmacy information from our third-party pharmacies.

The **Lab** and **Lab Reports** tabs include results from our lab vendors. You can also track and trend specific lab results along with identifying labs that fall outside of the normal ranges.

The **Care Management** tab provides a graphical representation of patient/care manager assessments, patient's enrollment into a CMDM program, care plan details.

Patient banner details

The patient banner includes a traffic light indicating the patient's Enrollment status, Gap in care alerts and if there is Other health insurance (OHI) (secondary insurance).

Patient Name [dropdown]

Risk Score
Address
City / State
Zip
Spoken Language

DOB
Home Phone
Work Phone
Written Language

Member ID
Medicaid ID
Medicare ID
Ethnicity

PCP
Primary Case Mgr
Secondary Case Mgr
Eligibility Status
Eligibility End Date

Plan
Product

Member Care Summary | **Alerts** | Utilization | Pharmacy | Labs | Care Management | Lab Reports

Enrollment status



Gap in care alerts



Other health insurance (OHI)



Traffic light status key

- All clear; no concerns (Green)
- Caution; there may be a concern (Yellow)
- An immediate concern (Red)
- A dual member (Blue)

Locate care gap alerts within the Active Alerts section

Each **Clinical Rules Engine (CRE)** describes a gap in the patient's care based on claims data.

Hover over the CRE line item for a description.

To provide feedback, select the CRE line item.

The screenshot displays a patient care dashboard. At the top, there's a header with patient information: Patient Name, Risk Score, Address, City / State, Zip, Age / Gender, DOB, Home Phone, Work Phone, Written Language, Member ID, Medicaid ID, Medicare ID, Ethnicity, PCP, Primary Case Mgr, Secondary Case Mgr, Eligibility Status, Eligibility End Date, and Plan Product. Below this is a green bar with the text "Member Care Summary". Underneath the green bar is a date range selector set to "Jul 20, 2019 to Apr 20, 2020" and an "Update" button. The main content area is divided into several sections: "Active Alerts" (highlighted with a red box and a red arrow), "Immunizations and Preventive Health", "Lab Results", "Emergency Department", "Pharmacy", and "Office Visits". The "Active Alerts" section contains a table with columns: Source, Alert Description, Feedback, Rule#, Latest Feedback, and Physician. The table lists several alerts, including "Claims as of May ...", "Claims suggest th...", "Controlling High B...", and "Controlling Blood ...". The "Immunizations and Preventive Health" section shows a table with columns: Date, Service, and Provider. The "Lab Results" section shows a table with columns: Date, Type, Value, and Acuity. The "Emergency Department" section shows a table with columns: Date, Facility Name, and Primary Diagnosis. The "Pharmacy" section shows a table with columns: Date, Medication/Strength, and Prescriber. The "Office Visits" section shows a table with columns: Date, Provider, and Primary Diagnosis. The "Active Alerts" section also includes a pagination bar at the bottom: "Page 1 of 1" and "View 1 - 5 of 5".

Source	Alert Description	Feedback	Rule#	Latest Feedback	Physician
CRE	Claims as of May ...	N/A	24	N/A	N/A
CRE	Claims as of May ...	N/A	23	N/A	N/A
CRE	Claims suggest th...	N/A	19...	N/A	N/A
HEDIS	Controlling High B...	N/A	Alert	N/A	N/A
HEDIS	Controlling Blood ...	N/A	Alert	N/A	N/A

Care gap alert feedback

Choose the most appropriate feedback option from the menu.

Please note:
The feedback entry is only available for medical providers.

Care Gap Alert Feedback Entry

Rule #	Code	Latest Feedback
9	CHF med erratic refill 6 months	<div>My Patient is compliant with message suggestion (turns off message for 1 year) Matthew Aalsma on 1/8/2020</div>
12	CHF needs ACE or ARB	<div>Not my patient for this rule Matthew Aalsma on 1/8/2020</div>
13222	Prostate cancer needs bone test	<div>The message suggestion is not applicable to my patient for clinical or other reasons (turns off message) Matthew Aalsma on 1/8/2020</div>
17623	Diabetes sulfonylurea high dose MEDD	<div>My Patient is compliant with the message suggestion since receiving it (turns off message for 1 year) Matthew Aalsma on 1/8/2020</div>

Latest Feedback

My Patient is compliant with message suggestion (turns off message for 1 year)
Matthew Aalsma on 1/8/2020

Not my patient for this rule
Matthew Aalsma on 1/8/2020

The message suggestion is not applicable to my patient for clinical or other reasons (turns off message)
Matthew Aalsma on 1/8/2020

My Patient is compliant with the message suggestion since receiving it (turns off message for 1 year)
Matthew Aalsma on 1/8/2020

My Patient will not likely comply with this suggestion. (turns off message)
Matthew Aalsma on 1/8/2020

Not my patient for this rule
Matthew Aalsma on 1/8/2020

Reviewed with patient
The message suggestion is not applicable to my patient for clinical or other reasons (turns off message)
Matthew Aalsma on 1/8/2020



* Availity, LLC is an independent company providing administrative support services on behalf of Amerigroup.

<https://provider.amerigroup.com>