

Managed Care Systems (MCS) Essette Provider Portal User Training Guide – Updated April 2025

Prior Authorization Requests

Prior Authorization	720-612-6600, option 1	For questions or assistance with the authorization process. Monday – Friday, 8:30 – 4:30 pm MT
Prior Authorization Fax	303-605-1545	
Care Coordination	720-612-6600, choose option 1 and then option 2	For questions or assistance with care coordination for ALL PHPprime contacts.
Care Coordination Fax	303-256-1721	
Portal Support	Portal@phpmcs.com 720-612-6600, choose option 1 , and then option 6	For questions or assistance regarding portal access or technical support.

90 Day MCS Prior Authorization Portal Timeout

Please be aware that if you have not logged into your MCS Prior Authorization Portal account in the last 90 days, you will automatically be locked out of the account. This is a standard policy that enhances the security of the information contained within the portal. To avoid this "lock," please be sure to log into your account at least every 90 days. If you find that your account has been locked, please fill out the form located [here](#) to start the re-activation process.

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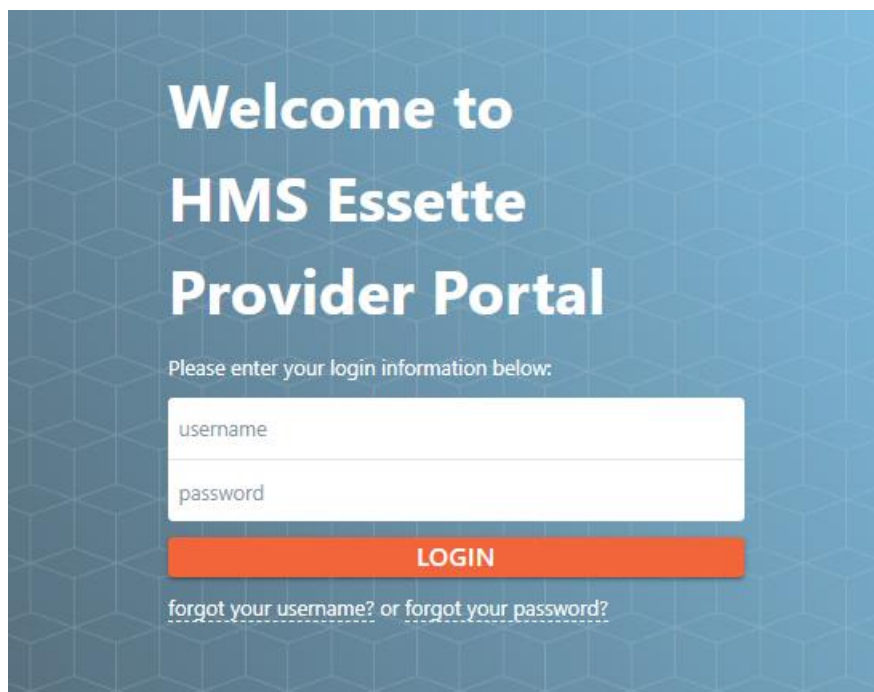
Creating a New Request in the Essette MCS Authorization Portal

Portal login:

Please note this is a new login screen based on the upgraded version.

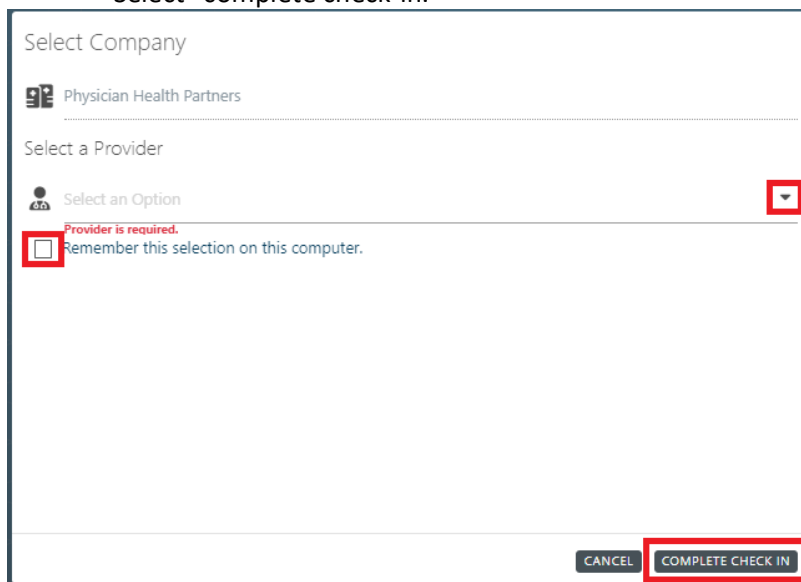
To log into the [Essette Provider Portal](#):

- Enter your username and password.
- Click **login**.



The login screen has a blue background with a hexagonal pattern. It features the title 'Welcome to HMS Essette Provider Portal' in large white text. Below the title, it says 'Please enter your login information below:'. There are two input fields: 'username' and 'password'. Below these fields is an orange 'LOGIN' button. At the bottom, there is a link that says 'forgot your username? or forgot your password?'.

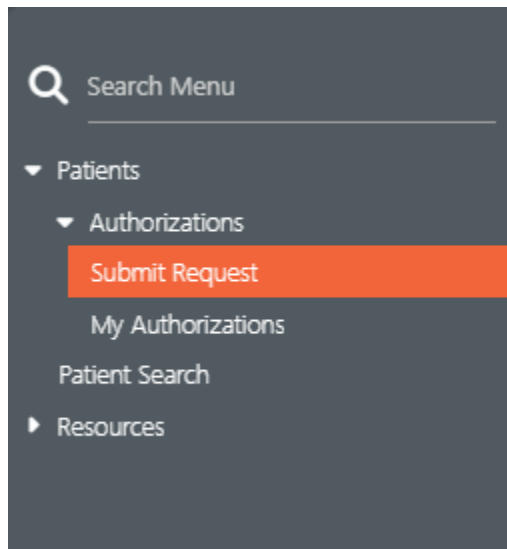
- A pop-up window will appear. Select your provider name from the drop-down. To save time in the future check the box next to “Remember this selection on this computer.”
- Select “complete check-in.”



The pop-up window is titled 'Select Company' and 'Select a Provider'. It shows a list of providers with 'Physician Health Partners' selected. Below the list, there is a checkbox labeled 'Remember this selection on this computer.' and a red box around it. At the bottom right, there are two buttons: 'CANCEL' and 'COMPLETE CHECK IN', with the latter highlighted by a red box.

Navigating the portal

The left-side navigation bar will assist you in moving throughout the portal. Select carrots to expand the list of menu options. An orange highlight indicates the page that you are currently viewing.



- Under **Authorizations**, you can:
 - “Submit Request”: Go here to enter new requests.
 - “My Authorizations”: Go here to view your previous requests and their status.
- Under **Patient Search**, you can
 - Search for a patient
- Under **Resources**, you can find links to:
 - American Psychiatric Association
 - Mosby's Nursing Consult
 - Multicultural patient education resources
 - WEB MD

Submitting a new request

There are three sections in the submission process:

Section 1: Selecting a member and authorization classification

To submit a new request, select “Submit Request” from the left-side navigation panel.

- Enter the patient ID number and select “Search.” (Please note the patient ID below is not for a real patient).

- If the search returns a member highlighted in yellow, this indicates the member does not have an active plan with us.

▼ Create Authorization

Selected Patient:

⚠️ AMBER TEST (P180897) ✎

- If the search returns no results, you will need to fax your request to the Prior Auth department.
- The search will return a list of past requests by the provider for the member under “Open Existing Auths.”
- When you select a carrot in the menu next to an existing auth, a drop-down menu will appear with the authorization details (see screenshot below).

▼ Create Authorization

Auth #	Type	Class	Sub Class	Request Date	Servicing Provider ID	Servicing Provider Name
X240405001	Pre-Service	Outpatient	PET	4/5/2024 10:58:29 AM	1265498364	ALICIA SMITH

Diagnoses

Primary Dx	Diagnosis Code	Diagnosis Description	Flags
	C00	MALIGNANT NEOPLASM OF LIP	

Services

Primary Svc.	Determination	Service Code	Service Description	Requested Charges	Approved Charges	Flags
		78813	PET IMAGING WHOLE BODY			

Medications

Determination	Medication Code	Medication Name/Label
There are no rows to display.		

- You can collapse these sections by selecting the carrot. After selecting your patient, fill in the drop-down selections (required by the red asterisk) and then select “Create Auth.”
- The Location drop-down will only contain locations attributed to your account.
- The Auth class will dictate different options for the subclass.
- **For “Inpatient” requests, the only subclass portal users should select is “Precert.”**

Submit Request

▼ Create Authorization

Selected Patient: Mickey Mouse (T484848)

> Open Existing Auths

Location ▼ Auth Class ▼ Auth Sub Class ▼

Select Location Select Auth Sub Class

Location is required. Initial Service Date is required.

Inpatient Inpatient

End Service Date

Inpatient - Acute Inpatient - LTAC Inpatient - Rehab Inpatient - Skilled Observation Precert

> Authorization Details

- **For “Outpatient” requests, portal users can select any subclass except “No PA Required- FOR PHP USE ONLY” and “ED visit.”**
 - The Initial Service Date will dictate the default auth type. The auth type can be changed in the drop-down.
- **Choosing the same day the request is being entered will default to “Concurrent.”**
 - Please note that no portal submissions should have “Concurrent” in this field.
 - If you are submitting a same-day request, please be sure to change the type to “preservice”
- Choosing a date in the past will default to “post service.”
- Choosing a date in the future will default to “preservice.”

Auth Sub Class *

▼ Ambulatory Surgery ▼

Type *

Select Type Pre-Service Concurrent Review Post-Service

- After making drop-down selections, select “Create Auth.” (see below).

Submit Request

Create Authorization

Selected Patient:

Mickey Mouse (T484848)

> Open Existing Auths

Location *	Auth Class *	Auth Sub Class *
ROCKY MOUNTAIN CANCER CENTERS, LLP - THORNTON	▼ Outpatient	▼ DME - Rental
Initial Service Date *	End Service Date	Type *
4/6/2024	X	Pre-Service

CLEAR

CREATE AUTH

> Authorization Details

> Attach Supporting Documentation

> Authorization Confirmation

Section 2: Fill in authorization details

- 1) Select the level of priority of your request, either Routine or Urgent (see below).
 - Urgent referrals are reserved for those requests that are medically urgent. Please submit all other requests as "Routine."
 - Urgent referral/prior authorization request: A situation that could seriously jeopardize the life or health of the patient. The patient requires urgent medical services in a shorter timeframe than the routine request timeframes. Therefore, urgent requests will only have an authorization period of 10 days from date of submission. To help avoid delays, please be sure to submit all necessary documentation with your request.
 - If the request needs to be expedited, call Prior Authorization at 720-612-6700 option 1, and request the referral be expedited.

Submit Request

> Authorization: X240409007


< Authorization Details

Priority *

Select Priority

Routine

Urgent

- 2) Search for a servicing provider by entering their name or NPI number and selecting 
- This will prompt a pop-up if there are multiple search results.
- If your search returns too many results, you can enter more search filters in the “search for providers” pop-up.

▼ Search for Providers

✓ Only Contracted Providers

Provider Identifier	NPI #
Provider First Name	Provider Last Name
Specialty	Select Gender ▼
Provider Facility	Provider Group
Facility Address	
Street	
City	Select State ▼ Zip Code

Q SEARCH X CLEAR

- To select a provider from the returned search result list, select the fast-forward icon: »

3) Search for a diagnosis code

- You can search by code or description and select from the drop-down list.

Diagnoses

Search Diagnoses

R55

R55 - SYNCOPE AND COLLAPSE

- To delete a diagnosis code or service code, select the Trash icon: 🗑

4) Search for a Service code

- You can search by code or description, select from the drop-down list.

70553 - **MR** BRAIN BRAIN STEM W/O W/CONTRAST MATERIAL

70554 - **MR** BRAIN FUNCTIONAL W/O PHYSICIAN ADMINISTRATION

MR|

- If a service code has a triangle error code next to it after selection indicating it is not valid, please delete invalid service code and select a valid service code before saving authorization: ⚠

Warning:

- service.\$ is not valid for the selected dates.

- To edit the quantity of a service, select the pencil icon:
- Input the quantity and then select “Save service.”

Edit Service : 78812: PET IMAGING SKULL BASE TO MID-THIGH
Valid Between 1/1/1900 and 12/31/9999

Quantity Requested *

3

CANCEL **SAVE SERVICE**

5) Add the office contact person’s information and any additional information related to your request.

Additional Info

Additional Info

SAVE ADDITIONAL INFO

6) After completing the required fields select the continue button.

CONTINUE

Submit Request

> Authorization: X240409001

✓ Authorization Details

Priority *

Routine

Primary Care Physician: ELAINE SHIRAR, ELANE SHIRAR MD INC - NORTHGLENN
Search Providers

Requesting Provider: ROCKY MOUNTAIN CANCER CENTERS, LLP - THORNTON ✓

Servicing Provider: **SEARCH**

Servicing Provider is required.

Diagnoses
Search Diagnoses

SELECT COMMON DIAGNOSIS

Primary Dx	Diagnosis Code	Diagnosis Description	Flags
There are no rows to display.			

Diagnosis is required.

Services
Search Services

SELECT COMMON SERVICE

Primary Svc.	Qty Req'd	Service Code	Service Description	Flags
There are no rows to display.				

Service is required.

Additional Info
Additional Info

SAVE ADDITIONAL INFO

6/2000

3 Missing Fields

CANCEL REQUEST **CONTINUE**

Section 3: Attach supporting documentation

1) Select which type of file you would like to upload:

- To submit paper documentation, fax to the prior authorization department, using the fax number listed on the front page of this guide.


The screenshot shows the 'Submit Request' form. The 'Attach Supporting Documentation' section is expanded, showing the question 'Do you have supporting documentation to accompany this request?'. The 'Paper Documents' radio button is selected. Below this, there is a section for 'Fax Paper Documentation' with a 'PRINT COVER SHEET' button. The 'Authorization Confirmation' section is partially visible at the bottom. At the bottom right, there are 'CANCEL REQUEST' and 'CONTINUE' buttons.

- For electronic uploads, select “add document.”

The screenshot shows the 'Submit Request' form. The 'Attach Supporting Documentation' section is expanded, showing the question 'Do you have supporting documentation to accompany this request?'. The 'Electronic Files' radio button is selected. Below this, there is a section for 'Upload Electronic Documentation' with an 'ADD DOCUMENT' button. A table with columns 'Title', 'Attached', 'By', 'Category', and 'Source' is shown, with a message 'There are no rows to display.' At the bottom right, there are 'CANCEL REQUEST' and 'CONTINUE' buttons.

- This will prompt a pop-up where you can select your file, add a title, and input a summary. Select “save” once you have completed the information.

Upload/Attach Document



 File is limited to 40 MB

Category * Title

Supporting Documentation

Summary




0 / 500

- To remove an uploaded file, select the remove icon: 

2) After adding your files select the continue button. 

You will then get a confirmation, and from here you can submit another request, or open an auth summary.

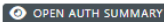
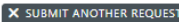
Submit Request   

- > Authorization: X240409001
- > Authorization Details
- > Attach Supporting Documentation
- ✓ Authorization Confirmation

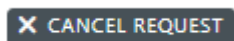
Thank you for submitting your Outpatient request. It has been assigned Reference #X240409001 with a status of "In Process (Current)."

Reimbursement for services rendered is subject to:

- Member eligibility must be verified for date(s) of service
- Service(s) rendered is a covered benefit
- Member is not eligible for other health care coverage
- Service(s) rendered do not require authorization
- Service(s) rendered are performed within effective date range of referral

- You can cancel your request before submitting it by selecting:



Checking the status of your requests

To check the status of your submitted requests, go to “My Authorizations” on the Left side navigation panel. From here you can see a list of your submitted requests and their status. You can also search for requests with various member details.

esette™ My Authorizations

Search Menu

Patients

Authorizations

Submit Request

My Authorizations

Patient Search

Resources

Search for Auths

Auth Information

☐ Only Open Auths ☐ Only Closed Auths

Auth Number

Sub Class

Request Date Range

3/26/2024 to 4/9/2024

Class

Select Class

Status

Select Status

Portal Submission Completion

Select Completion

SEARCH CLEAR

Current Search Criteria

Auth #	Patient Name (ID)	Class	Sub Class	Type	Status	Request Date
X240409001	Mouse, Mickey (T484848)	Outpatient	PET	Pre-Service	In Process (Current)	4/9/2024 12:01:23 PM

- If additional information is needed, you will see “Pending for additional information” in the “Status” column.

Auth #	Patient Name (ID)	Class	Sub Class	Type	Status	Request Date
X240409001	Mouse, Mickey (T484848)	Outpatient	PET	Pre-Service	Pending for Additional Information	4/9/2024 12:01:23 PM

- To see more details on what information is needed, select the authorization number hyperlink to open the authorization summary.

Auth #	Patient Name (ID)	Class	Sub Class	Type	Status	Request Date
X240409001	Mouse, Mickey (T484848)	Outpatient	PET	Pre-Service	Pending for Additional Information	4/9/2024 12:01:23 PM

- Once the authorization summary pops up, scroll down to the Notes section to see what the Prior Auth department is needing for review.

Authorization #X240409001 • Summary

Chief Complaint

Diagnoses

Primary Dx	Diagnosis Code	Diagnosis Description	Flags
R55		SYNCOPE AND COLLAPSE	

Services

Primary Svc.	Qty Req'd	Determination	Qty Approved	Service Code	Service Description	Flags
3		Pending	0	78812	PET IMAGING SKULL BASE TO MID-THIGH	

Care Day Information

Days (Qty)	Actual LOC	Determination	Approved LOC
There are no rows to display.			

Notes

+ ADD NOTE

Created Date	Created By	Category (Sub Category)	Note
4/9/2024 12:08:14 PM	Cassie Phillips	Pend Information: Information Requested	Please submit additional information.

Documents

+ ADD DOCUMENT

Title	Attached	By	Category	Source
Test.pdf	4/9/2024 11:59:16 AM	Cassie Phillips	Supporting Documentation	

CLOSE

- From here you can add additional documentation by selecting **+ ADD DOCUMENT**
- After adding documentation select **X CLOSE**
- The Prior Auth department will get a notification any time additional documentation is attached to a request.
- Once a determination is made on your request, you will see this in the “Status” column.

My Authorizations						
Search for Auths Current Search Criteria X CLEAR						
Auth Request Date is between 2024-03-26 and 2024-04-09 Patient						
Auth #	Patient Name (ID)	Class	Sub Class	Type	Status	Request Date
X240409001	Mouse, Mickey (T484848)	Outpatient	PET	Pre-Service	Approved	4/9/2024 12:01:23 PM

- If you need to save a pdf or print the determination, select the authorization number hyperlink to open the authorization summary.
- Once the authorization summary pops up, you can select which parts of the summary you would like printed or saved by selecting the carrots next to the title of each section. In the below example, only the “auth information” section is selected.
- After making your selections, select the print icon in the top R corner. You can print the summary or save as a PDF.

Authorization #X240409001 • Summary



Auth Information

Auth

Auth Number: X240409001
Request Date: 4/9/2024 12:01:23 PM
Service Date Range: 4/12/2024 - 7/11/2024
Sub Class: PET
Status: Approved
Type: Pre-Service

Other Reference #:
Initial Service Date: 4/12/2024
Class: Outpatient
Priority: Routine
Line of Business: Medicare Advantage

Member

Member Name: Mickey Mouse
Date of Birth: 11/18/1928 (95)
Spoken Language:
Home Phone Number:
PCP Name: ELANE SHIRAR, ELANE SHIRAR MD INC - NORTHGLENN
Primary Plan: SECURE HORIZONS
test test:

Member ID: T484848
Gender: Male
Written Language:
Mailing Address:
PCP Phone Number: (303) 430-0240
Dual:

Providers

Requesting Provider: ROCKY MOUNTAIN CANCER CENTERS, LLP - THORNTON
Servicing Provider: LITTLETON ADVENTIST HOSPITAL - LITTLETON

Diags and Services

Care Day Information

Notes

Documents

X CLOSE

Auth class/Auth sub-class table for PHP

Auth Class	Auth Sub-Class	Description/Criteria
Inpatient	Precert	Surgery to be performed in an Inpatient setting, this is the only subclass that portal users should use for <u>inpatient</u> requests.
Outpatient	Ambulatory Surgery	Surgery to be performed in OP setting or ambulatory surgery center (ASC)
Outpatient	Cardiac Procedures	All cardiac procedures including stress echos, TEE and cardio SPECT
Outpatient	Chiropractor	Request for Medicare-covered chiropractic services (identified by an AT modifier)
Outpatient	DME - Purchase	Purchase of DME items
Outpatient	DME - Rental	Rental of DME items
Outpatient	DME - Repair	Repair of DME items
Outpatient	ED Visit	Not for use by portal users, PHP internal use only
Outpatient	Injectables - Chemo	Part B chemotherapy drugs
Outpatient	Injectables - Non Chemo	Part B non-chemotherapy drugs
Outpatient	No PA Required- FOR PHP USE ONLY	Not for use by portal users, PHP internal use only
Outpatient	Nuclear Medicine	Nuclear med studies except cardio SPECT
Outpatient	Office Visit- Non-Contracted	For office visits with providers that do not have a UHC contract
Outpatient	Outpatient labs	Outpatient labs
Outpatient	Outpatient Procedures	All other OP services not listed
Outpatient	PET	PET scans
Outpatient	Radiation Therapy	Radiation Therapy
Outpatient	Therapy – Outpatient Initial Certification	Initial request for outpatient therapy services
Outpatient	Therapy - Outpatient Recertification	Recertification of outpatient therapy for the next 90-day period