

CalOptima Health Provider Portal Reference Guide

CalOptima Health's Provider Portal Reference Guide will help providers and their staff navigate the Provider Portal when completing daily tasks as they serve our members. The portal is accessed from caloptima.org or providers.caloptima.org.

I. Creating a New User Account

All CalOptima Health-contracted providers and their staff are required to create a user account in order to have access to the Provider Portal.

There are two types of user accounts: Staff and Local Office Administrator (LOA). The following five steps are required to create a new user account:

Note: Your provider office must complete and return the CalOptima Health Provider Portal Access Agreement before your account can be approved.

1. On the home screen, click **Register New User** (Figure I.a.). Provide the following required information (Figure I.b.):

- Full name of person who needs access
- Provider's full address
- Mobile number
- Email address
- Position

Click **Next**.

2. A passcode verifying your identity will be sent to the email address or phone number you provided. Enter the passcode in the **Verify Your Identity** field and click **Next** (Figure I.c.).

Please note: Your code will expire in 15 minutes. Click **Didn't receive Code? Resend it** to get a new one. If you do not receive it, check your spam folder.

Figure I.a.

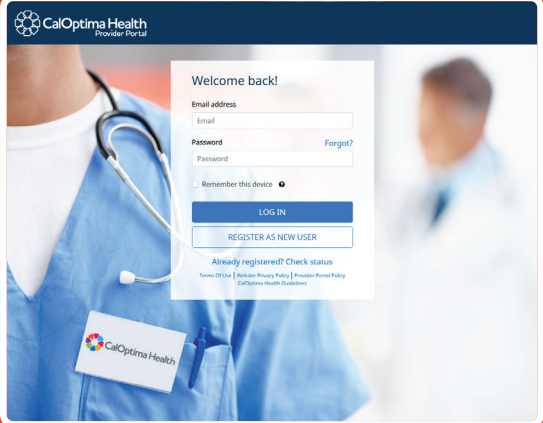
The screenshot shows the CalOptima Health Provider Portal login interface. It features a 'Welcome back!' message and a login form with fields for 'Email address' and 'Password'. There is a 'Forgot?' link next to the password field and a 'Remember this device' checkbox. Below the login fields are buttons for 'LOG IN' and 'REGISTER AS NEW USER'. At the bottom, there is a link for 'Already registered? Check status' and a footer with links for 'Terms Of Use', 'Privacy Policy', 'Provider Portal Policy', and 'CalOptima Health Guidelines'.

Figure I.b.

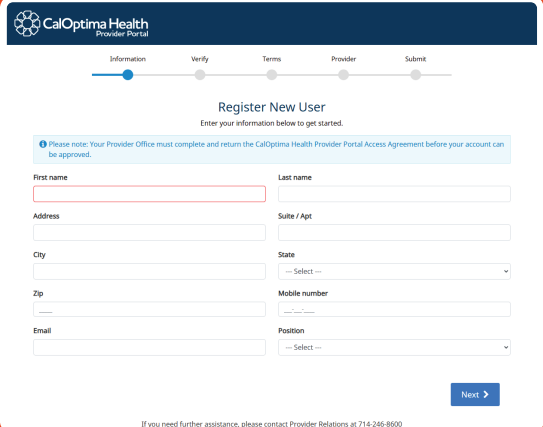
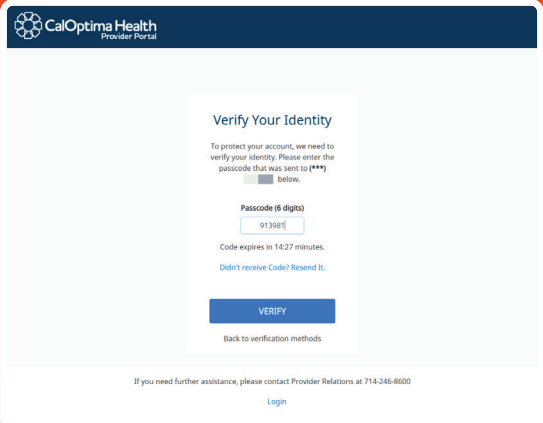
The screenshot displays the 'Register New User' form in the CalOptima Health Provider Portal. At the top, there is a progress bar with steps: Information, Verify, Terms, Provider, and Submit. The 'Information' step is currently active. Below the progress bar, there is a note: 'Please note: Your Provider Office must complete and return the CalOptima Health Provider Portal Access Agreement before your account can be approved.' The form contains several input fields: 'First name', 'Last name', 'Address', 'Suite / Apt', 'City', 'State' (a dropdown menu), 'Zip', 'Mobile number', 'Email', and 'Position' (a dropdown menu). A 'Next >' button is located at the bottom right. At the very bottom, there is a footer with the text: 'If you need further assistance, please contact Provider Relations at 714-246-8600'.

Figure I.c.

The screenshot shows the 'Verify Your Identity' page in the CalOptima Health Provider Portal. It includes a heading 'Verify Your Identity' and a message: 'To protect your account, we need to verify your identity. Please enter the passcode that was sent to (***).'. Below this is a 'Passcode (6 digits)' input field with the value '91398'. A message states 'Code expires in 14:27 minutes.' and there is a link 'Didn't receive Code? Resend it.'. At the bottom is a 'VERIFY' button and a link 'Back to verification methods'. The footer contains the text: 'If you need further assistance, please contact Provider Relations at 714-246-8600' and a 'Login' link.

3. You must read and accept the Terms and Conditions (Figure I.d.). Once you have reviewed it, click **Accept**.

Once the Terms and Conditions has been accepted, click **Next**.

Figure I.d.

The screenshot shows the 'Terms & Conditions' page of the CalOptima Health Provider Portal. At the top, a progress bar indicates the steps: Information, Verify, Terms (current), Provider, and Submit. The main heading is 'Terms & Conditions' with a subtext: 'Please read the agreement below before clicking the "Accept" button.' Below this is a scrollable box containing the terms. Section I, 'Purpose', lists the portal's functions: verifying eligibility, viewing health-related information, viewing referral status, submitting referrals, viewing member profiles, and viewing check payments. Section II, 'Agreement', states that using the portal constitutes an agreement with CalOptima Health's policies. At the bottom, there are 'Decline' and 'Accept' buttons, and 'Back' and 'Next' navigation buttons.

4. As a new user, you must identify the provider you work for or are associated with. Choose the tab for:

- Practitioner Search, then enter the provider's first and last name or Tax Identification Number (TIN) (Figure I.e.). Click **Search**.
- Group/Facility Search, then enter the provider group/facility name or TIN (Figure I.f.). Click **Search**.
- In the search results, select your provider. Click **Next**.

Figure I.e.

The screenshot shows the 'Provider Search' page with the 'Practitioner Search' tab selected. A message states: 'CalOptima Health will select your provider once we review and finalize your registration.' Below this are two tabs: 'Practitioner Search' (selected) and 'Group / Facility Search'. Under 'Practitioner Search', there are radio buttons for 'Full Name' (selected) and 'Tax Identification Number'. Input fields for 'First name' and 'Last name' are provided, along with 'Search' and 'Clear' buttons. A 'Back' button and a 'Next' button with a right arrow are at the bottom. A footer note provides contact information for Provider Relations at 714-245-8800 and a 'Login' link.

Figure I.f.

The screenshot shows the 'Provider Search' page with the 'Group / Facility Search' tab selected. A message states: 'CalOptima Health will select your provider once we review and finalize your registration.' Below this are two tabs: 'Practitioner Search' and 'Group / Facility Search' (selected). Under 'Group / Facility Search', there are radio buttons for 'Group / Facility Name' (selected) and 'Tax Identification Number'. An input field for 'Group / Facility Name' is provided, along with 'Search' and 'Clear' buttons. A 'Back' button and a 'Next' button with a right arrow are at the bottom. A footer note provides contact information for Provider Relations at 714-245-8800 and a 'Login' link.

5. Click **Submit** (Figure I.g.) to complete request. A thank you screen confirms your submission and the page will route you back to the login page.

Please allow five to 10 business days for CalOptima Health to confirm your request with your provider's LOA. CalOptima Health will send an email when your new user account request has been reviewed. It will advise you of the results and next steps.

You should receive an email letting you know when you have been approved.

II. Already registered? Check Status

A passcode verifying your identity will be sent to the email address you provided (Figure II.a.).

- In the Verify Your Identity section, enter the passcode. Click **Verify** (Figure II.b.).

Please note: Your code will expire in 15 minutes. Click **Didn't receive Code? Resend it** to get a new one. If you do not receive it, check your spam folder.

1. Once you've received the approval confirmation email from CalOptima Health, go to the login page and click on **"Already registered? Check status"**
2. Enter the email address you provided during registration. Click **"Check Status"**
3. Verify Your Identity screen
A passcode verifying your identity will be sent to the email address or phone number you provided. Enter the passcode in the Verify Your Identity field and click **Next** (Figure I.c.)

4. Click on **Set Up Account**

5. Verify Your Identity screen again
A passcode verifying your identity will be sent to the email address or phone number you provided. Enter the passcode in the Verify Your Identity field and click **Next** (Figure I.c.).

Figure I.g.

The screenshot shows the 'Almost Done' screen of the CalOptima Health Provider Portal. At the top, a progress bar indicates the steps: Information, Verify, Terms, Provider, and Submit. The 'Submit' step is currently active. The main heading is 'Almost Done', followed by the text: 'This is all the information we need to get started. Click "Submit" to send your information for review.' Below this is a large blue button labeled 'SUBMIT'. Underneath the button is a 'Back' button and a link for 'Login'. At the bottom, there is a note: 'If you need further assistance, please contact Provider Relations at 714-246-8000'.

Figure II.a

The screenshot shows the 'Already Registered?' screen of the CalOptima Health Provider Portal. The heading is 'Already Registered?'. Below it, the text says: 'Enter email address below to see what's happening with your account'. There is an input field for 'Email Address'. Below the input field is a grey button labeled 'CHECK STATUS' and a link for 'Back to Login'. At the bottom, there is a note: 'If you need further assistance, please contact Provider Relations at 714-246-8000'.

Figure II.b.

The screenshot shows the 'Verify Your Identity' screen of the CalOptima Health Provider Portal. The heading is 'Verify Your Identity'. Below it, the text says: 'To protect your account, we need to verify your identity. Please enter the passcode that was sent to [redacted] below.' There is an input field for 'Passcode (6 digits)' with the value '821694'. Below the input field, it says: 'Code expires in 14:52 minutes. Didn't receive Code? Resend It.' Below this is a blue button labeled 'VERIFY' and a link for 'Back to verification methods'. At the bottom, there is a note: 'If you need further assistance, please contact Provider Relations at 714-246-8000'.

Figure I.c.

The screenshot shows the 'Verify Your Identity' screen of the CalOptima Health Provider Portal, continuing from the previous figure. The heading is 'Verify Your Identity'. Below it, the text says: 'To protect your account, we need to verify your identity. Please enter the passcode that was sent to [redacted] below.' There is an input field for 'Passcode (6 digits)' with the value '478010'. Below the input field, it says: 'Code expires in 14:49 minutes. Didn't receive Code? Resend It.' Below this are two buttons: 'Back' and 'Next >'. At the bottom, there is a note: 'If you need further assistance, please contact Provider Relations at 714-246-8000'.

1. Create a password to access the Provider Portal. Your password must be at least eight characters and
 - Must contain at least one number (0–9)
 - Must include at least one symbol (!, @, #, \$, %, *, etc.)
 - Must include at least one uppercase English letter (A–Z)
 - Must include at least one lowercase English letter (a–z)
 - Must not contain spaces

2. Enter your new password, and confirm your password. Click **Next** (Figure II.c.).

All users are required to change their password every 60 days.

3. You will need to set up two security questions. Select your desired questions from the lists then enter each secret answer.
 - Click **Submit** (Figure II.d.) when finished.

After setting up the security questions and answers, you will be taken back to the login page.

III. User Training

All users must complete a training module based on their role, before they can access the Provider Portal. There are two types of training:

1. Staff
2. Local Office Administrator

All users are required to complete the training module annually (Figure III.a.).

Figure II.c.

The screenshot shows the 'Setup Password' screen of the CalOptima Health Provider Portal. It has a title 'Setup Password' and a subtitle 'Enter a password below.' There are two input fields: 'Password' and 'Confirm Password'. Below these fields is a 'Hide Password' checkbox. A list of password requirements is shown: 'Your password must be at least eight (8) characters and must contain all of the following:' followed by a bulleted list: 'Number (0-9)', 'Symbol (!, @, #, \$, %, *, etc.)', 'Uppercase English letter (A-Z)', 'Lowercase English letter (a-z)', 'Does not contain space', and 'Password minimum length (8)'. At the bottom is a blue 'Next' button.

Figure II.d.

The screenshot shows the 'Security Questions' screen of the CalOptima Health Provider Portal. It has a title 'Security Questions' and a subtitle 'Answer the security questions below.' There are two questions: 'Question 1' with a dropdown menu 'What city were you born in?' and an 'Answer 1' input field; and 'Question 2' with a dropdown menu 'What was your favorite childhood game?' and an 'Answer 2' input field. Below the answers is a 'Hide Answers' checkbox. At the bottom are 'Submit' and 'Back' buttons.

Figure III.a.

The screenshot shows the CalOptima Health Provider Portal with a 'Training' modal open. The modal has a title 'Welcome to Provider Portal User Training' and a subtitle 'You must complete a short training program before accessing the portal.' There is a blue 'START' button. The background shows the portal's main interface with a sidebar menu, a top navigation bar, and a main content area with a 'Referral' section and a 'User Requests' section showing '5 PENDING'.

IV. Updating My Profile

To view and access your profile, click your name and select My Profile (Figure IV.a.). From here you can update:

- Demographic information
- Security questions
- Password
- Provider collections

Your name, email address and phone number will be displayed and cannot be edited.

1. Edit your demographic information (Figure IV.b.)

- Click **Edit Info**
- Click **Save**

A message will indicate that your demographic information it has been updated.

2. Change your password.

- Click **Change Password**.
- After selecting the option to change your password, an email, phone call or text message will be sent to you with a verification code (Figure IV.c.).
- Enter that code on the Verify Your Identity window. Click **Verify**.

Once you've received the approval confirmation email from CalOptima Health, go to the login page and click on "Already registered? Check status"

Enter your new password.

- Click **Save**.

A message will be displayed that your password has been updated (Figure IV.d.).

Figure IV.a.

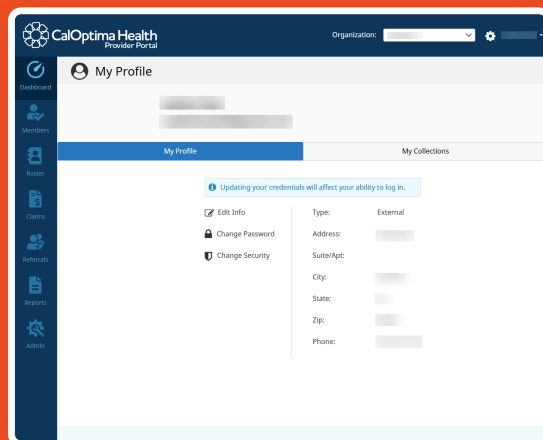


Figure IV.b.

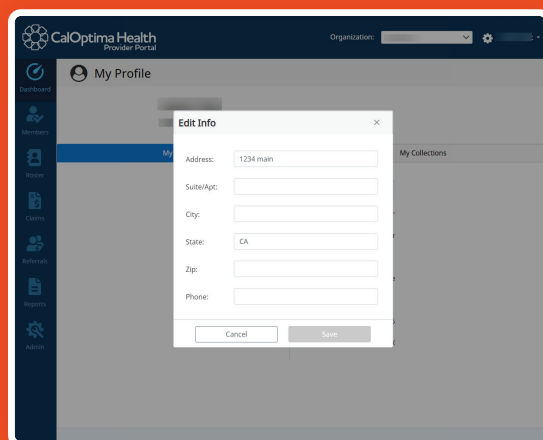


Figure IV.c.

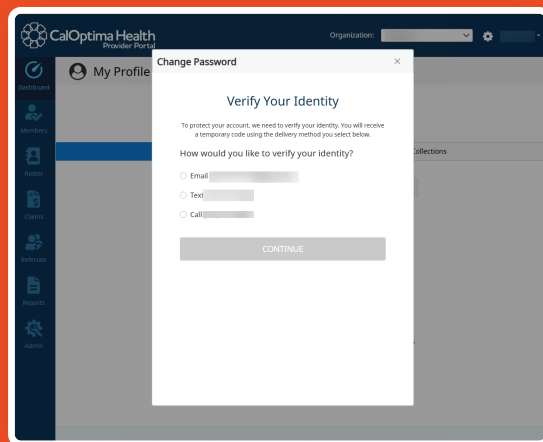
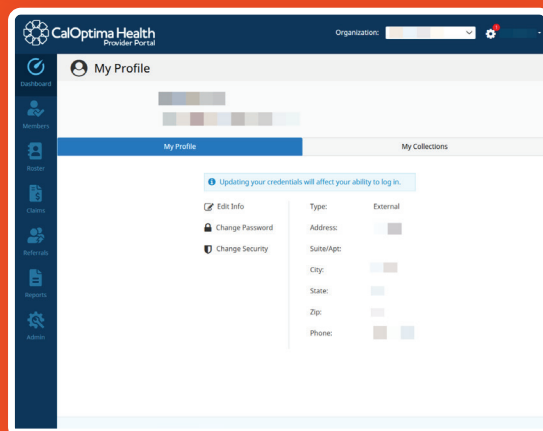


Figure IV.d.



3. Change your security questions and/or answers.

- Click **Change Security**.
- After selecting the option to change your security questions, an email, phone call or text message will be sent to you with a verification code.
- Enter that code on the Verify Your Identity (Figure IV.e.) window. Click **Verify** (Figure IV.f.).
- Select the desired security questions, enter the answers. Click **Save** (Figure IV.g.).

A message will indicate that your security questions and/or answers have been updated.

Figure IV.e.

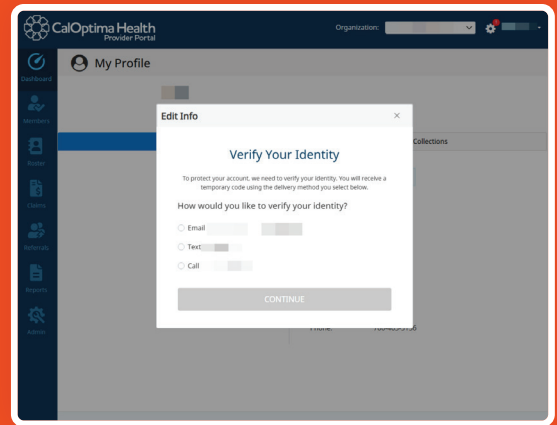


Figure IV.f.

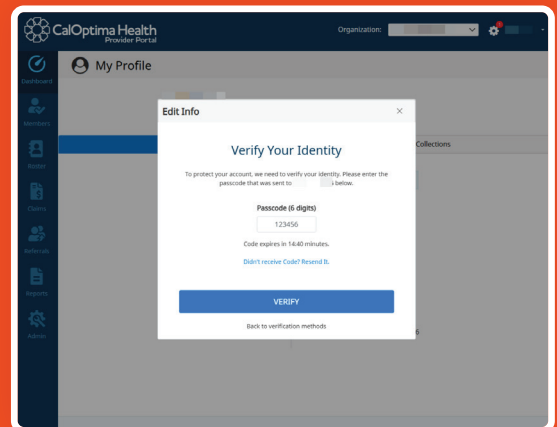
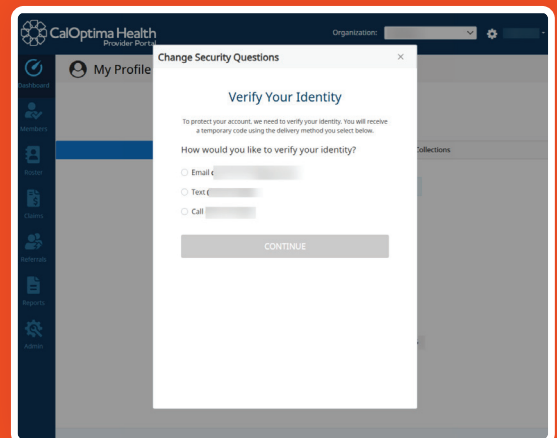


Figure IV.g.



4. Add additional providers and select your default collection.

- Click on the My Collections tab.
- Click **Add New Provider** (Figure IV.h.). The Provider Search will be displayed to allow you to search for the provider. You can search for an individual provider or a group/facility.
- Select the desired provider from the list. Click **Send Request** (Figure IV.i.). The provider/group will be displayed with a Pending status until it has been approved.

Once your request for access has been approved, it will show up as active and you can select it as your default.

V. Member Information Search

On the left navigation panel, click **Members**. To search for member information, use either the member identification number (member ID) or the member name. (Please note that the member ID is also referred to as the client index number [CIN]).

To begin your search using the member ID:

1. Click **Member ID** in the upper left of the screen.
 - Enter the CIN, MEDS ID or MBI number.
 - After you enter the member ID, click **Search** (Figure V.a.).

To begin your search using the member name:

2. Click on **Name**.
 - Enter member's first and last name along with their date of birth and city, click **Search** (Figure V.b.).

Member's address, email and contact number

To view the member's facesheet:

3. Select **View Facesheet** button

In addition, based on your security setting, you may have the ability to view (Figure V.c.):

- Eligibility
- Condition history
- Claims history
- Referrals
- Labs
- Medications

Figure IV.h.

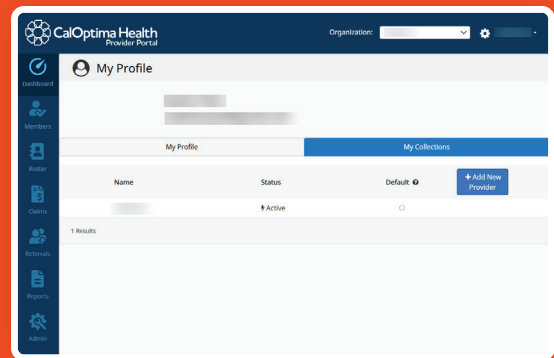


Figure IV.i.

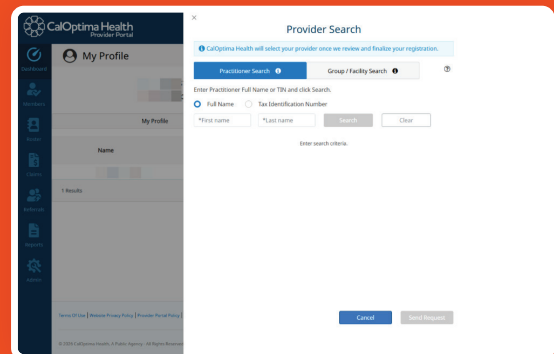


Figure V.a.

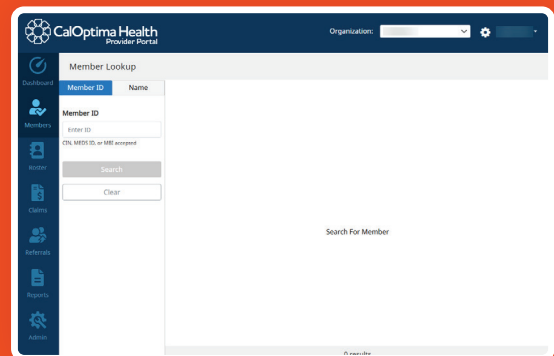


Figure V.b.

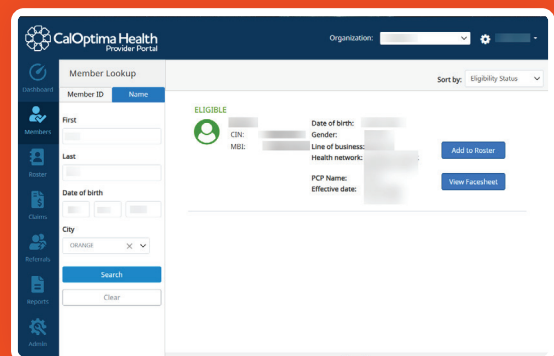
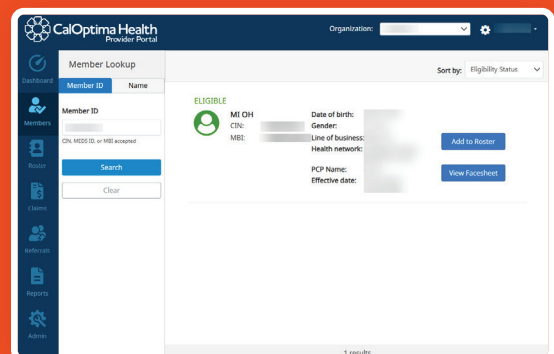


Figure V.c.



VI. Behavioral Health Member Roster

The Member Roster is intended to provide behavioral health providers with a centralized listing of CalOptima Health members.

To add a member to the roster

1. From the primary navigation, select Members and search for a member using a known member ID. (Figure XIII.a.)
2. In the search results, find the desired member and select the **Add** button. (Figure XIII.b.)
3. A modal is displayed with a provider search function. Search and select the desired providers to add the member to their roster. (Figure XIII.c.)

To view member roster

1. From the primary navigation, select Roster, and a list of your providers will be visible in the grid. You will then have the option to filter for a provider using a known provider name, member ID or TIN. (Figure XIV.a.)
2. In the search results, find the desired member and select the **Add** button. (Figure XIII.b.)
3. A modal is displayed with a provider search function. Search and select the desired providers to add the member to their roster. (Figure XIII.c.)

Figure XIII.a.

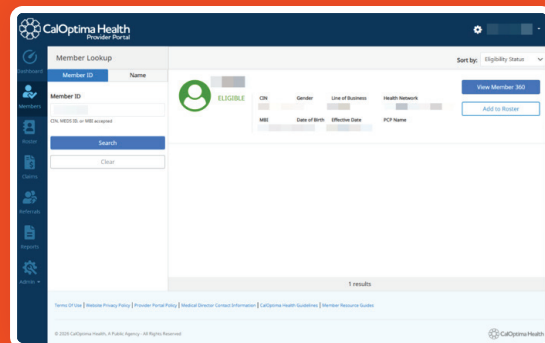


Figure XIII.b.

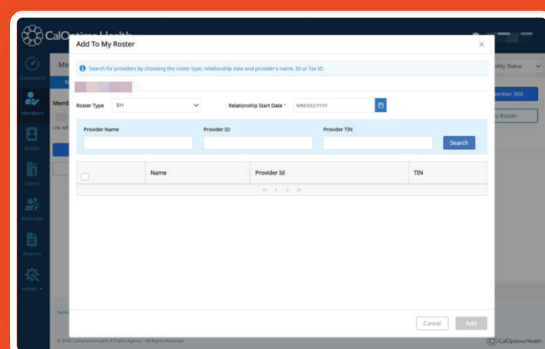


Figure XIII.c.

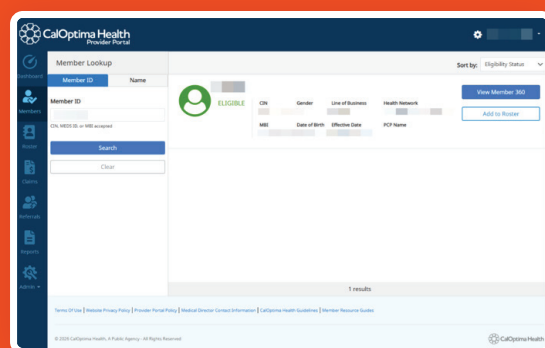
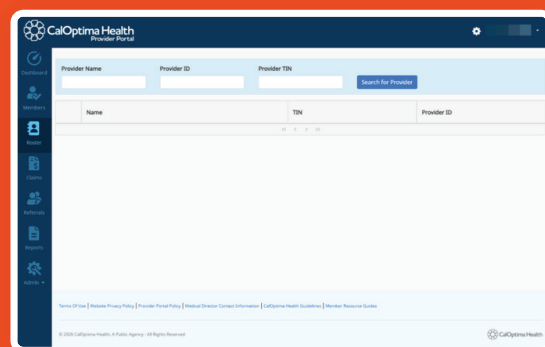


Figure XIV.a.



To view member roster

1. From the primary navigation, select Roster, and a list of your providers will be visible in the grid. You will then have the option to filter for a provider using a known provider name, member ID or TIN. (Figure XIV.a.)
2. From the search results, select the provider to view their member roster. You can narrow your search by using the **Roster Type** select menu and/or the Member ID search function, both at the top of the page. (Figure XIV.b.)
3. To modify the member in the roster list, select the ellipsis under the **Action** column. There you can view the member's details or remove the member from the provider's member roster. (Figure XIV.c.)

Upload attachments to a referral in pending status

1. Select the referral to add attachments. Once the referral is loaded, select the attachment tab on the far right of the referral screen. (Figure X.p)
2. Select **Upload More**, and then use the interface to choose files to upload. (Figure X.r)

Territory provider indicator (Figure X.i.a.)

Warnings for This Provider

Provider is far away. Look for a provider within 15 miles or 30 minutes to the member.

CONTINUE

SELECT NEW PROVIDER

Figure XIV.a.

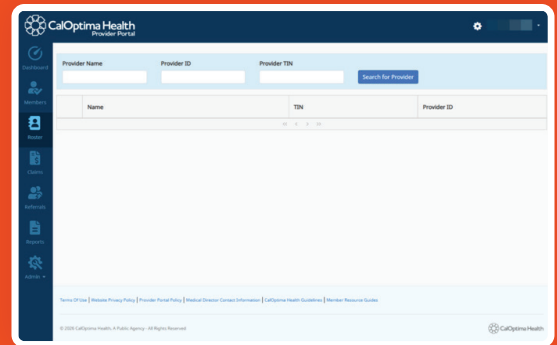


Figure XIV.b.

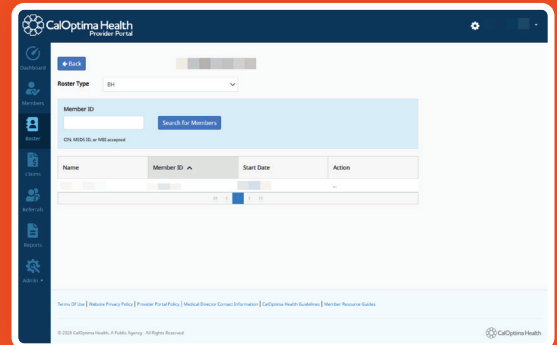


Figure XIV.c.

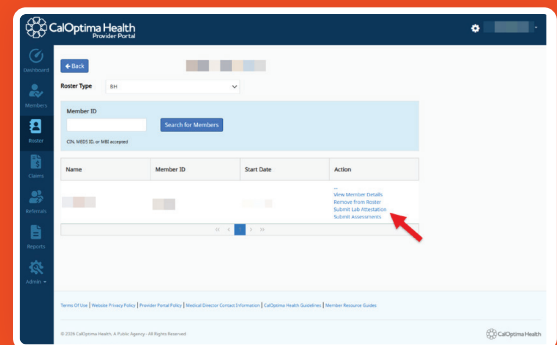


Figure X.p

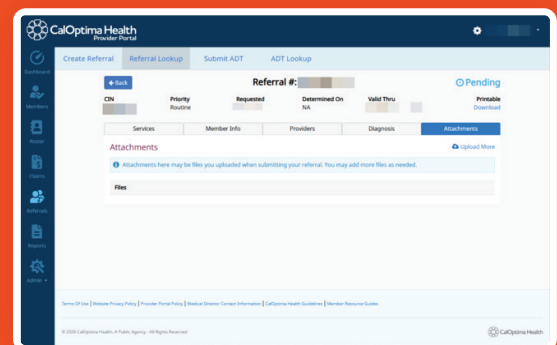
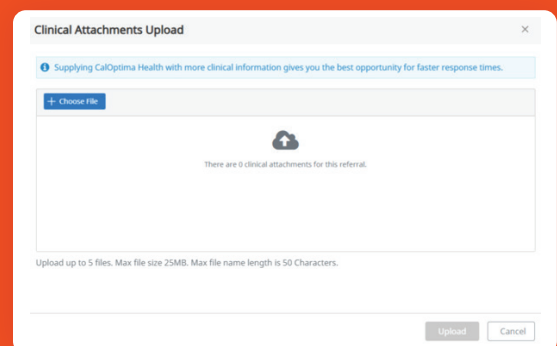


Figure X.r



VII. Provider Roster

On the left navigation panel, click **Roster**.

1. Search by provider name, provider ID or provider TIN. Click **Search for Provider**.
2. Select **Provider** in the table.
3. Enter Member ID. Select **Search for Members**.
4. Select **View Member Details** button to view the member's information.
5. Select **Remove from Roster** button to remove member from roster.

VII. Claims Information Search

On the left navigation panel, click **Claims**. You will have three options to select from, Claims Lookup, Claims Reconciliation and Dispute Lookup.

Claims Lookup

Select the **Claims Lookup** button to view claims.

To search by Date:

1. Click **Date** (Figure VI.a.).
2. Pick the Date Range.
3. Select the Type of Date as either Date of Service or Paid Date.
4. Next select the Status:
 - All Statuses (4)
 - In Progress
 - Check Pending
 - Finalized
 - Original Claim
5. To limit the claims to a specific member, enter their CIN (optional). Click **Find Claims**.

To search using the claim number:

Enter the member's claim number.
Click **Find Claims** (Figure VI.b.).

Then select the claim from the list on the Claim Search Results screen. It lists:

- Status
- Claim number
- Member name
- CIN
- Date of service (DOS)
- Service provider
- Billed/payable
- Check (Remittance Advice or RA)

For more details about the Remittance Advice, click on the green **RA** button (Figure VI.c.) in the far right column for Check.

Figure VI.a.

The screenshot shows the 'Claims Lookup' form in the CalOptima Health Provider Portal. The form has two tabs: 'Date' (selected) and 'Claim #'. Under the 'Date' tab, there are fields for 'Date Range' (set to '3 Months'), 'Type of Date' (set to 'Date of Service'), 'Status' (set to 'All Statuses (4)'), and 'CIN'. There are 'Clear' and 'Find Claims' buttons at the bottom of the form. The left sidebar shows navigation options: Dashboard, Members, Roster, Claims, Referrals, Reports, and Admin.

Figure VI.b.

The screenshot shows the 'Claims and Claims Reconciliation' screen in the CalOptima Health Provider Portal. The screen has a header with 'Claims Lookup', 'Claims Reconciliation', and 'Dispute Lookup' tabs. Below the header is a large blue icon with a dollar sign and the text 'Claims and Claims reconciliation'. A note below the icon says 'Using the menu above, you can review claims and claims reconciliation.' The left sidebar shows navigation options: Dashboard, Members, Roster, Claims, Referrals, Reports, and Admin.

Figure VI.c.

The screenshot shows the 'Claim Search Results' screen in the CalOptima Health Provider Portal. The screen has a header with 'Claims Lookup', 'Claims Reconciliation', and 'Dispute Lookup' tabs. Below the header is a message: 'The payable amount may not reflect the final claims payment. Please review the Remittance Advice (RA) for final claims detail.' There is a 'Search for New Claim' button and a 'Download' button. Below these is a table with columns: Status, Claim Number, Member Name, CIN, DOS, LOB, and Check. The table shows one result with a status of 'Finalized' and a 'Check' button. The left sidebar shows navigation options: Dashboard, Members, Roster, Claims, Referrals, Reports, and Admin.

Please note: When doing searching claims, only claims relating to your provider or group will display.

To view the details of a claim, click on the **Claims Lookup** button (Figure VII.a.).

- CIN
- Date of service
- Date received
- Date paid
- Check number

To see services on a member claim, select the Services tab on the Claims Detail (Figure VII.b.) screen:

- Start Date
- End Date
- Code
- Modifiers
- Billed Quantity
- Billed Amount
- Payable
- Dispute

Select the **Member Info** (Figure VII.c.) tab to see:

- Name
- Gender
- Member ID
- Date of birth
- Language
- Patient account number

- Health network
- Line of business
- Primary care provider (PCP)

- Address
- Phone
- Email

[illegible]



 Home
  Account
  Billing
  Claims
  Reports
  Admin

 Claims
  Reports

 Claims

Organization: ▼
⚙️
🔒
✖️

Claims Lookup

Claims Reconciliation

Dispute Lookup


 The payable amount may not reflect the final claims payment. Please review the Remittance Advice (835) for final claims detail.

Claim Search Results

Download

Status	Claim Number	Member Name	CIN	DOS	Service Provider	Billed/Payable	LOB	Check
Finalized							Medi-Cal	SALF

1 results

[Terms Of Use](#)
[Website Privacy Policy](#)
[Provider Portal Policy](#)
[Medical Director Contact Information](#)
[CalOptima Health Guidelines](#)
[Member Resource Guide](#)

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Home
 Account
 Reports
 Admin

[Claims Lookup](#)
[Claims Reconciliation](#)
[Dispute Lookup](#)

[Back](#)

Claim #:

Finalized

CIN

Check #

Service

Received

Paid

[Dispute](#)
[Download Claim Printout](#)

Services	Member Info	Providers	Diagnosis	EOB		
The payable amount may not reflect the final claims payment. Please review the Remittance Advice (834) for final claims detail.						
Start Date	End Date	Code	Modifiers	Billed Qty	Billed Amount	Payable
TOTAL:						

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 [Member Resource Guides](#)

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CalOptima Health

Organization:

Dashboard
 Account
 Reports
 Claims
 Referrals
 History
 Reports
 Admin

Claims Lookup
Claims Reconciliation
Dispute Lookup

Claim #:

☒ Finalized

☐ CN
☐ Check #
☐ Service Date
☐ Received
☐ Paid

[Dispute](#)
[Download](#)
[Claim Printable](#)

Services
Member Info
Providers
Diagnosis
EOB

Member Info

Member ID:

Date of birth:

Language:

Health Network

Health Network: CalOptima Community Network
Line of business: Medi-Cal
PCP:

Contact Information

Address:
Phone:
Email:

Patient Account #: CC03019C

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[Provider Portal Policy](#)
[Medical Director Contact Information](#)
[CalOptima Health Guidelines](#)
[Member Resource Guides](#)

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Providers

To see the payment provider or service provider, select the Provider (Figure VII.d.) tab to see:

Payment Provider

- Provider name
- Provider ID
- Address
- Phone
- Fax

Service Provider

- Provider name
- Provider ID
- Address
- Phone
- Fax

Diagnosis

To see a member's diagnosis from a claim, select the **Diagnosis** (Figure VII.e.) tab to see:

- Codes
- Description

EOB

To see the Explanation of Benefits (EOB) for a claim, select the **EOB** tab to see:

- Service code
- Quantity
- Service date
- EOB code
- Billed date
- Allowed
- Disallowed
- Coinsurance
- Copay
- Deductible
- Paid
- Interest paid

Please note: ONLY users associated with the member at the PCP or group level can view member information. If the selected member is not associated at the PCP or group level, it cannot be viewed. User may be able to view the dispute and download a printable version.

Claims Reconciliation

To view claims reconciliation:

1. Click on **Claims Reconciliation**.
2. Select the Start Date and End Date.
3. Enter in the TIN.
4. Click on **Search**.
5. Check off the boxes for the applicable provider names.
6. Select **Download**.
7. Open and view the report.

Figure VII.d.

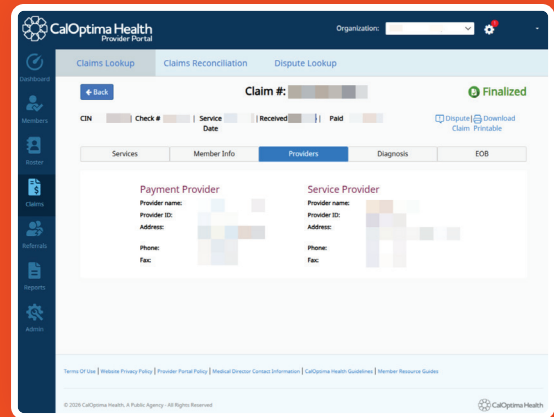
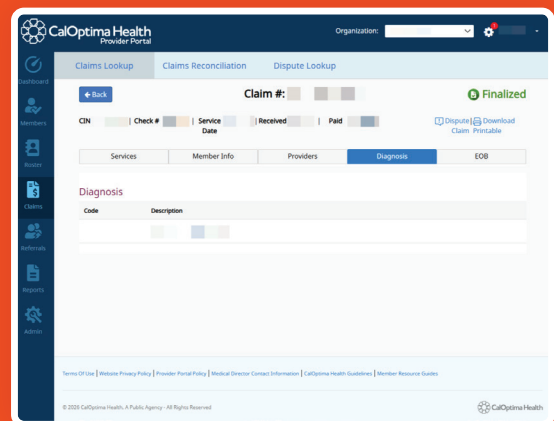


Figure VII.e.



IX. Dispute Lookup

To search claim disputes:

1. Click on [Dispute Lookup](#).
2. Select the Date Range and Status.
3. Enter in the TIN.
4. Click on [Find Disputes](#).

If you select the claims number, you can view the following:

- Services
- Diagnosis
- Member information
- EOB
- Providers

If you select the dispute number, you can review the following:

- Dispute details
- Correspondence
- Attachments

IX. View Referral

On the left navigation panel, click [Referrals](#). There are two ways to search for a member's referral: by date or referral code.

To search by date (Figure VIII.a.):

1. Click on [Date](#)
2. Pick the Date Range.
3. Select the Type of Date as either Date of Service or Request Date.
4. Next select one of the following in the Status field:
 - Closed
 - Pending
 - Void
5. Enter the member's CIN. Click [Find Referrals](#) (without the CIN, all the referrals for the provider's office will display).

To search by referral code (Figure VIII.b.):

Enter the member's referral code.
Click [Find Referrals](#).

Select the referral to review from the Referral Search Results screen. It briefly lists:

- Status
- LOB
- Referral code
- Referred provider
- Member name
- Requested date

Please note: When doing referral searches, only referrals relating to your provider organization will display.

Figure VIII.a.

The screenshot shows the 'Referral Lookup' form in the CalOptima Health Provider Portal. The 'Date' tab is selected. The form includes a 'Date Range' dropdown set to '3 Months', a 'Type of Date' dropdown set to 'Request Date', a 'Status' dropdown set to 'All Statuses (2)', and a 'CIN' input field. There are 'Clear' and 'Find Referrals' buttons. A note at the bottom states: 'Please allow 5 days for CalOptima Health to review your request.'

Figure VIII.b.

The screenshot shows the 'Referral Lookup' form in the CalOptima Health Provider Portal. The 'Referral Code' tab is selected. The form includes a 'Referral Code' input field, a 'Clear' button, and a 'Find Referrals' button. A note at the bottom states: 'Please allow 5 days for CalOptima Health to review your request.'

X. Referral Detail

To review referral details, enter the referral code.
Or click the blue **Search** icon  on Referral Search Results (Figure IX.a.).

Services

On the Referral details screen, select the **Services** (Figure IX.b.) tab to see:

1. Place of service
2. Decision
3. Duration
4. Decision code
5. Decision description

Member Information

Select the **Member Info** (Figure IX.c.) tab to see:

Member Information	Health Network	Contact Information
--------------------	----------------	---------------------

- | | | |
|-----------------|--------------------|-----------|
| • Name | • Health network | • Address |
| • Gender | • Line of business | • Phone |
| • Member ID | • PCP | • Email |
| • Date of birth | | |
| • Language | | |

Providers

Select the **Provider** tab to see the referring provider or referred to provider (Figure IX.d.):

Referring Provider	Referred To Provider
--------------------	----------------------

- | | |
|-----------------|-----------------|
| • Provider name | • Provider name |
| • Provider ID | • Provider ID |
| • Address | • Address |
| • Phone | • Phone |
| • Fax | • Fax |

Figure IX.a.

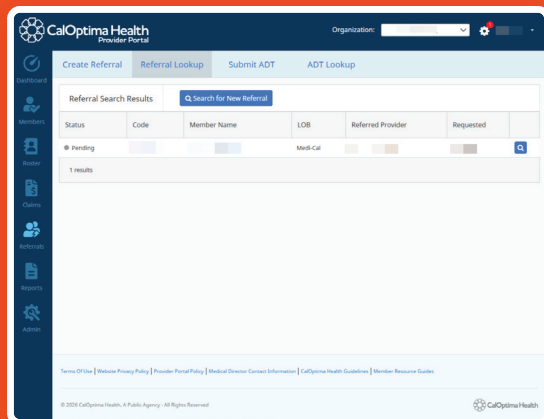


Figure IX.b.

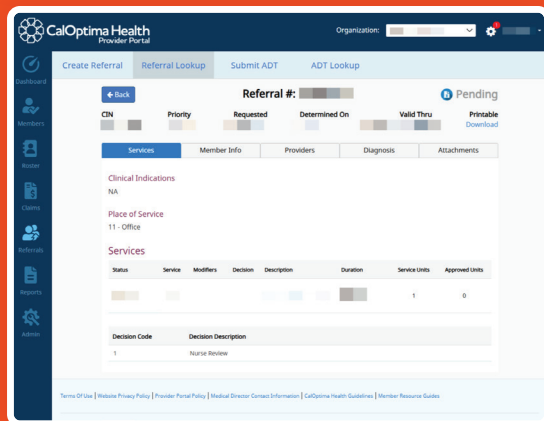


Figure IX.c.

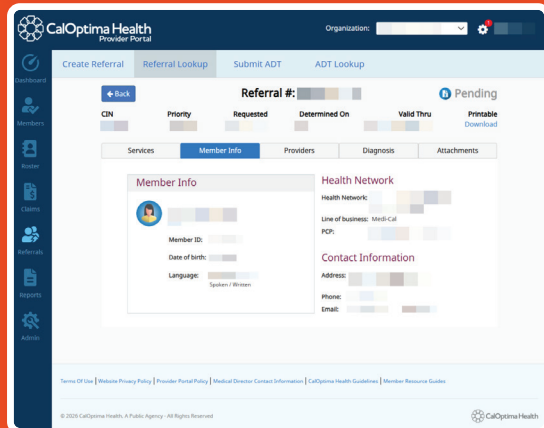
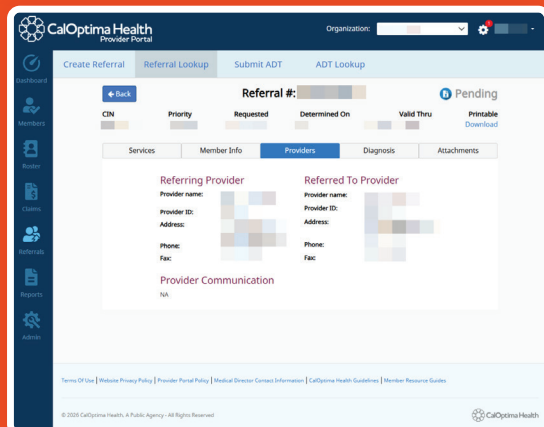


Figure IX.d.



Diagnosis

To see a member’s diagnosis from a referral, click on the **Diagnosis** (Figure IX.e.) tab to see:

- Code
- Description

Attachments

Select the **Attachments** (Figure IX.f.) tab to see the attachments from a referral. Attachments can be downloaded.

Upload attachment to referral in pending status

Select referral to add attachments. Once referral is loaded, select the **Attachments** tab on the far right of referral screen (Figure X.p). Select **Upload More** and then using the interface choose files to upload (Figure X.r).

Please note: ONLY users associated with the member at the PCP or group level can view member information. If the selected member is not associated at the PCP or group level, it cannot be viewed.

Figure IX.e.

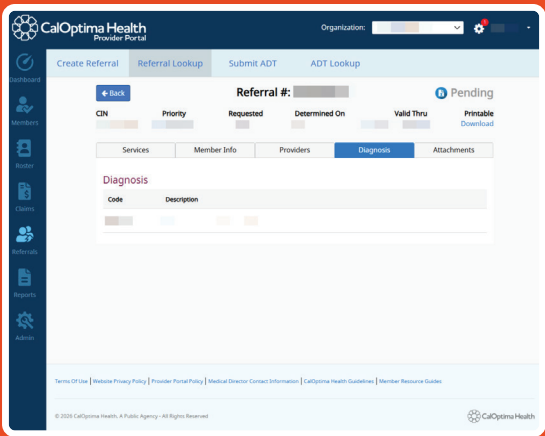


Figure IX.f.

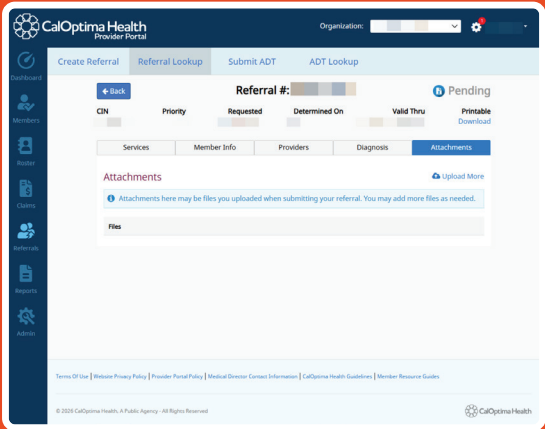


Figure X.p

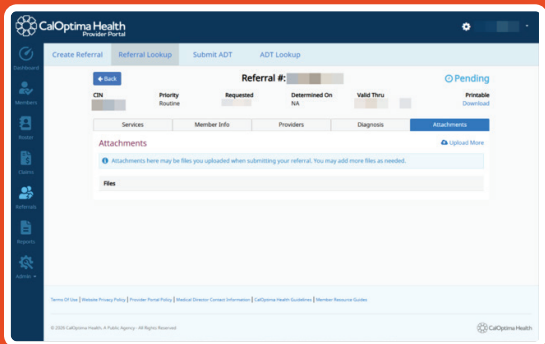
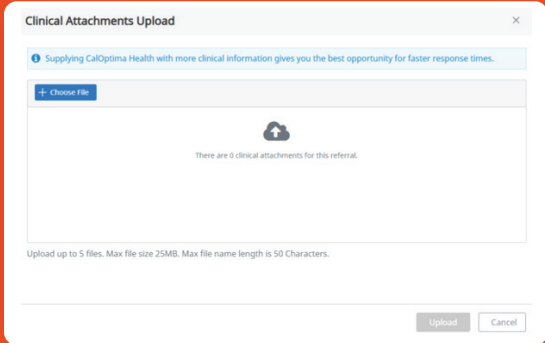


Figure X.r



X. Submit a Referral

There are six sections to fill out in order to **Submit a Referral** (Figure X.a.).

Section 1: About the Referral

Certain urgent referrals must be faxed to the Utilization Management team.

1a. Select the type of referral:

- Medical (for services NOT related to behavioral health)
- Behavioral Health
- Click **Next** (Figure X.b.).

1b. Who is this referral for?

- Find a member by using the Name or Member ID (CIN, MEDS ID or MBI accepted) buttons.
- Click **Next** (Figure X.c.).

Medical outpatient authorizations can be referred only to eligible members with CalOptima Health Direct (COD) or CalOptima Health Community Network (CHCN).

Behavioral health authorizations can be referred only to eligible members.

Please note: ONLY users associated with the member at the PCP or group level can view member information. If the selected member is not associated at the PCP or group level, it cannot be viewed (Figure X.d.).

Figure X.a.

The screenshot shows the 'Submit a Referral' process in the CalOptima Health Provider Portal. A progress bar at the top indicates six steps: 1. About, 2. Referring Provider, 3. Referred To Provider, 4. Medical Info, 5. Clinical Attachments, and 6. Review. Step 1 is currently active. The form asks '1a. What type of referral is this?' with three radio button options: 'Medical (For services NOT related to BH)', 'Behavioral Health', and 'PACE'. The 'Medical' option is selected. There are 'Cancel' and 'Next' buttons at the bottom.

Figure X.b.

This screenshot shows the same 'Submit a Referral' page as Figure X.a, but with a warning message displayed in a yellow box. The message states: 'At this time we are unable to accept certain urgent request via this portal. Please fax an Authorization Request Form (ARF) and pertinent clinical information to: For Urgent Transplant Request: 714-796-6616, For Behavioral Health Urgent Prior Authorization Request: 714-481-6453. All elective services at tertiary level of care centers require prior authorization.' The form below the warning is partially visible, showing the same radio button options as in Figure X.a.

Figure X.c.

The screenshot shows the 'Submit a Referral' page with the 'Find a Member' section expanded. It includes input fields for 'Member ID' and 'Name', and a 'Search for Member' button. Below these fields, it shows a search result for Member ID '123456789' with the note 'CIN, MEDS ID or MBI accepted'. The 'Medical' radio button is still selected from the previous step. 'Cancel' and 'Next' buttons are at the bottom.

Figure X.d.

This screenshot shows the 'Select a Member' section of the 'Find a Member' search results. It displays a list of members with a green 'Eligible' status. A note states: 'Note: Choosing the incorrect member will result in having to start the referral over.' Below the list, there are fields for 'CIN', 'DOB', 'LDB', and 'HIN'. A footnote at the bottom says '* The requested data is restricted to PCPs only.' 'Cancel' and 'Next' buttons are at the bottom.

Section 2: Referring Provider Info

- Select the referring provider
 - » Must be in your office (cannot be with a different office).
 - » Choose the group or the office you want to make the authorization (service address).
- Select the provider and click **Next** (Figure X.e.).

Figure X.e.

CalOptima Health Provider Portal

Organization: [dropdown]

Submit a Referral

1 About 2 REFERRING 3 Referred To Provider 4 Medical Info 5 Clinical Attachments 6 Review

2. Who is the referring provider?

Find a Provider

Enter one of the fields below to filter your search results.

Provider Name [text box] Provider ID [text box] Provider Specialty [dropdown: Choose a specialty] [button: Search for Provider]

Select a Provider

Note: Choosing the incorrect provider will result in having to start the referral over.

Sort by: Name

Name	Specialty	Address & Phone Number	City
Jane Smith	General Internal Medicine	1234 Main St	City

Section 3: Referred To Provider Info

- To find a provider, search using the provider's name, provider ID or provider specialty (e.g. cardiovascular disease).
- Click **Search for Provider** (Figure X.f.).
- Select from list displayed of contracted providers, who accept members based on their age and gender.
- Select the provider and click **Next**.

Figure X.f.

CalOptima Health Provider Portal

Organization: [dropdown]

Submit a Referral

1 About 2 Referring Provider 3 REFERRED TO 4 Medical Info 5 Clinical Attachments 6 Review

3. Who is the Referred To Provider?

Find a Provider

Must enter one of the fields below to search for a provider.

Provider Name [text box: Jane Smith] Provider ID [text box] Provider Specialty [dropdown: Choose a specialty] [button: Search for Provider]

Cancel Next

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Warnings may display for the selected provider (Figures X.g. and X.h.):

- Indicates the provider is far away.
- Indicates the provider is not accepting new patients.

Please note: Closed panel providers are also displayed. While closed panel providers do not accept new patients, they do accept current patients.

Figure X.g.

Warnings for This Provider

You have selected a tertiary provider. Request for tertiary care may require additional review. Allowing your member to be directed to a community provider will help the referral be processed faster and the member to be seen in a more timely manner.

[SELECT NEW PROVIDER](#)

[Continue](#)

Figure X.h.

Warnings for This Provider

This provider you have requested is currently not accepting new patients. Please document the existing relationship with this provider and the last appointment date with this provider in the next step under Clinical Indications.

[CONTINUE](#)

[SELECT NEW PROVIDER](#)

Section 4: Medical Info (See next page for behavioral health)

4a. The **Request Date** is preprogrammed and will always display the day you are filling out the referral. You may select the **Urgent Referral** box for urgent services. You may select the **Retro Referral** box for services previously provided. You will need to change the **Request Date** to a date prior to the current displayed date.

4b. Next, select a **Place of Service**, such as:

- Office
- At home
- On campus
- Etc.

4c. Choose services for medical (for services NOT related to BH) (Continue)

- Choose **Select a Service** and **Current Procedural Terminology (CPT)** code.
- Under **Select a Service**, referrals are not required for codes/descriptions in gray (Figure X.i.).
- Fill out **Units** (required).
- Fill out **Questionnaire** (if applicable).
- Click **+ Add Service** to repeat as needed.

4d. Fill out the International Classification of Disease (ICD) codes for the referral (Figure X.i.).

- Click on **+ Add ICD Code**. You can search through **Find an ICD Code**.
- Select **ICD Code**.
- Click **+ Add ICD Code** to repeat as needed.

4e. What are the clinical indications for this referral?

- Fill out text box.
- Click **Next**.

To choose services for behavioral health, follow directions 4a-e, above (Figure X.j.).

Figure X.i.

CalOptima Health Provider Portal

3. Who is the Referred To Provider?

Find a Provider

Must enter one of the fields below to search for a provider.

Provider Name Provider ID Provider Specialty

Choose a specialty

Search for Provider

3a. Select a Provider

Note: Choosing the incorrect provider will result in having to start the referral over.

Sort by: Name

Providers	Specialty	Address & Phone Number	City
☐	Podiatry		

1 results

Cancel Next

Figure X.j.

CalOptima Health Provider Portal

3a. Select a Provider

Note: Choosing the incorrect provider will result in having to start the referral over.

You have selected

Providers	Specialty	Address & Phone Number
☐	Podiatry	

1 results

3b. Allow the member to be redirected?

☒ Yes ☐ No

Enter explanation here:

Cancel Next

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Section 5: Clinical Attachments

Supplying CalOptima Health with more clinical information, gives you the best opportunity for faster response times. You can upload up to three files. Max file size is 25 MB.

- Click on + Choose Files.
- Repeat to add more files as needed.
- Click Next (Figure X.k.).

Note, the user will have the option to upload additional documents once the referral has been submitted and remains in Open status.

Section 6: Review

Review your referral before submitting (Figures X.l. and X.m.):

- Priority
- Referral type
- Member details
- Referring provider
- Referred to provider
- Medical information services
 - » Services
 - » Diagnosis
- Clinical attachments
- Files

Click Submit Referral (Figure X.m.).

Figure X.k.

The screenshot shows the 'Submit a Referral' form in the CalOptima Health Provider Portal. The form is at step 4, 'MEDICAL INFO'. It includes a progress bar at the top with steps: 1. About, 2. Referring Provider, 3. Referred to Provider, 4. Medical Info (current), 5. Clinical Attachments, and 6. Review. The form contains the following sections: 4a. When will this referral take place? with a 'Request Date' field set to 01/30/2025. 4b. What is the Place of Service? with radio buttons for Routine Referral (selected), Urgent Referral, and Retro Referral, and a 'Choose a Place of Service' dropdown menu. 4c. What service(s) does the member need? with a table for 'Choose services for Medical (For Services NOT related to BH)' with columns for Service Name, Units, and Questionnaire. The bottom of the form has a 'Submit Referral' button.

Figure X.l.

This screenshot shows the 'Submit a Referral' form at step 4, 'MEDICAL INFO'. The '4b. What is the Place of Service?' section is expanded, showing a dropdown menu with the following options: 11 - Office, 22 - On Campus-Outpatient Hospital, 12 - Home, 42 - Ambulance - Air or Water, and 41 - Ambulance - Land. The '4c. What service(s) does the member need?' section is also visible, showing a table for 'Choose services for Medical (For Services NOT related to BH)' with columns for Service Name, Units, and Questionnaire. The bottom of the form has a 'Submit Referral' button.

Figure X.m.

This screenshot shows the 'Submit a Referral' form at step 4, 'MEDICAL INFO'. The '4d. What are the ICD codes for this referral?' section is expanded, showing a table for 'Choose services for Medical (For Services NOT related to BH)' with columns for Service Name, Units, and Questionnaire. Below this, there is a section for '4d. What are the ICD codes for this referral?' with a table for 'ICD Code' and 'Description'. The bottom of the form has a 'Submit Referral' button.

To submit an ADT:

1. Select **Submit ADT**. (Figure X.V.)
2. Enter in member's CIN, MEDS ID or MBI into the Member ID field.
3. Click on **Search for Members** (Figure X.V.a.)
4. Select the applicable member.
5. Click **Next**.
6. Enter the facility name or facility ID in the Facility field. (Figure X.V.b.)
7. Pick the applicable facility name.
8. Click **Next**.
9. Fill out the submission information. (Figure X.V.c. and X.V.d.)

Figure X.V.

Figure X.V.a.

Figure X.V.b.

Figure X.V.c.

Figure X.V.d.

10. Attach supporting documents. (Figure X.V.f.)

11. Review ADT details. (Figure X.V.g.)

12. Click **Submit**. (Figure X.V.h.)

To look up ADTs:

1. Click on **ADT Lookup**.
2. Select the date range, search type, status and subtype.
3. Enter in the member's CIN and facility name or ID.
4. Click on **Find ADT**. (Figure X.V.i.)

Select the ADT ID, you can view the following:
(Figures X.V.i.a.)

- Member information
- Clinical indications
- Submission information
- Supporting documents
- Contact details

You have the option to print the ADT.

Please note: All referrals are subject to the member's eligibility and, if approved, providers will be granted 180 days to render services (Figure X.o.).

Figure X.o.

The screenshot shows the 'Referral Submitted Successfully' confirmation screen in the CalOptima Health Provider Portal. It displays the referral number, priority (Routine), date requested (03/24/2026), and valid through date (03/24/2026 - 09/20/2026). The current status is 'Closed'. Below this, there is a green success message: 'Referral Submitted Successfully. Referral Submitted Successfully. Your referral is Approved.' The 'Member Details' section includes fields for CIN, Date of Birth, Gender, Spoken Language, and Written Language. The 'Health Network Information' section includes fields for Health Network, Line of Business, PCP, and Eligibility Date. The 'Contact Information' section includes fields for Address, Phone, and Email.

Figure X.V.f.

The screenshot shows the 'DOCUMENTS' section of the CalOptima Health Provider Portal. It displays a list of supporting documents, including a file named 'clinicalnotes.pdf' (171 KB). A green success message at the top states: 'Success! Your Referral was submitted successfully.' The interface includes a sidebar with navigation options and a top navigation bar with tabs for Member, Facility, Submitter, Documents, and Review.

Figure X.V.g.

The screenshot shows the 'REVIEW' section of the CalOptima Health Provider Portal. It displays a summary of the member details, facility information, submitter information, and clinical indications. The 'Member Details' section includes fields for Member Name, Member ID, and Date of Birth. The 'Facility' section includes fields for Facility, Type of Notice (Admission), Admission Date, and Subtype (Long Term Care). The 'Submitter' section includes fields for First Name, Last Name, Email, Primary Phone, Alternate Phone, and Fax Number. The 'Clinical Indications' section includes a text field for Patient needs long term care. The 'Supporting Documents' section includes a link to view documents.

Figure X.V.h.

The screenshot shows the 'CONFIRMATION' section of the CalOptima Health Provider Portal. It displays a green success message: 'Success! Your Admission, Discharge, or Transfer (ADT) notification has been submitted. Please allow up to 5 business days for CalOptima Health to review your request. If you need further assistance, please call CalOptima Health at (714) 246-8400.' Below this, there is a section for 'ADT ID # ADT' with fields for Auth # (N/A), Date Requested, and Current Status (Received). The 'Member Details' section includes fields for Member Name, Member ID, and Date of Birth. The 'Facility' section includes fields for Facility, Type of Notice (Admission), Admission Date, and Subtype (Long Term Care).

Figure X.V.i.

The screenshot shows the 'ADT Search Results' section of the CalOptima Health Provider Portal. It displays a table with columns for Status, ADT ID, Member Name, CIN, Received, Facility Provider, and Type. The table shows one result with Status 'Received' and ADT ID 'ADT'. Below the table, there is a section for 'ADT Search Results' with a search bar and filters for Date Range, Search Type, Status, and Subtype. The 'Find ADT' button is at the bottom.

Figure X.V.i.a.

The screenshot shows the 'ADT Lookup' section of the CalOptima Health Provider Portal. It displays a form with fields for Date Range, Search Type, Status, Subtype, CIN, Facility, and Name or Facility ID. The 'Find ADT' button is at the bottom.

Reports

Please note: ONLY users associated with the member at the PCP or LOA can view the reports.

In addition, based on your security setting, you may have the ability to view the following reports: (Figure X.V.j)

- PCP Membership Roster
- Pay for Value
- Pay for Value - Manual
- Blood Lead Screening
- Primary Care Documentation Program
- BH ABA P4V
- Member Roster
- Medi-Cal Annual Wellness Visit
- Health Information Form
- Initial Health Appointment
- BHI Quality Measure
- Proportion of Days Covered (PDC)

To submit Attestations:

The following attestations can be filled out and submitted: (Figure X.V.k)

- Blood Lead Screening
- Provider Training Attestation
- BH ABA P4V Attestation

Figure X.V.j

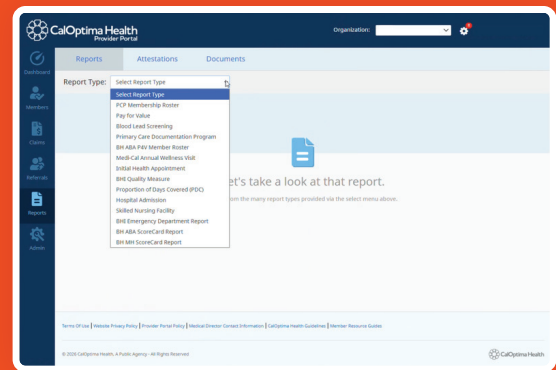
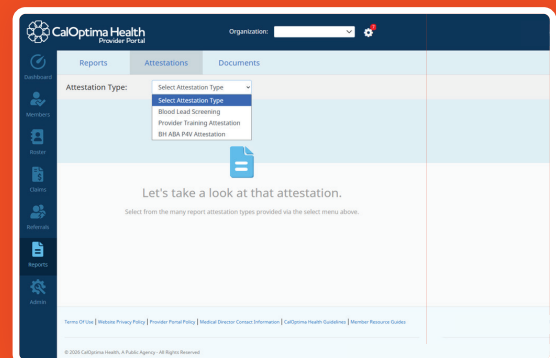


Figure X.V.k



Contact Us

For general questions about the portal or to change the LOA, please contact CalOptima Health Provider Relations:

714-246-8600 Option #2 888-587-8088 Option #2

To report suspect or potential security incidents or privacy breaches, please contact:

CalOptima Health's Privacy Officer at privacy@caloptima.org or CalOptima Compliance and Ethics Hotline at 855-507-1805

