

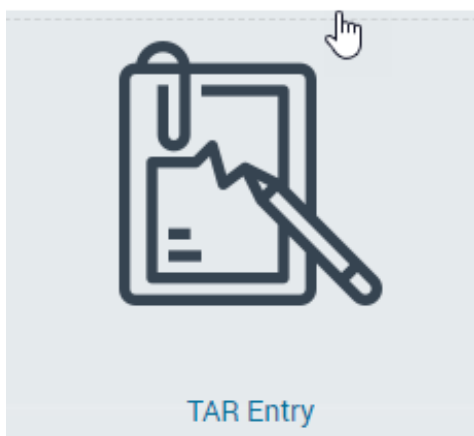
Enhanced Care Management and Community Supports eTAR Tips

The following is an eTAR example walk through for Enhanced Care Management (ECM) and Community Supports (CS):

1. From the home screen, select “Authorization (RAFTs & TARs).”



2. Next, select “TAR Entry.”



Enhanced Care Management and Community Supports eTAR Tips

- Next, search for member using the search bar. Please note that you can also search using last name and date of birth if you do not have the CIN number.

Member Search

Date of service will be the start date of the TAR (1)

Date of Service: 6/14/2023

Enter Member CIN # (2)

Social Security Number: [Empty]

CIN #: 999444555D6

Last Name: [Empty]

First Name: [Empty]

Date of Birth: [Empty]

Click Search (3) Search Member Clear

Member Identifier/ CIN	Last Name	First Name	Gender	Date of Birth	Program	Actions
999444555D6	DOE	John	male	08/10/1962	Medi-Cal	Select

- Verify eligibility details prior to selecting the TAR type (ECM or CS). ECM and CS TARs will always be Outpatient TAR types.

Member Demographics

Member Name: [Empty] Member ID: [Empty]

Gender: [Empty] Phone: [Empty]

Date of Birth: [Empty] Address: [Empty]

Eligibility Details:

Verify Eligibility

Member Eligible: Yes

Program: Medi-Cal

AID Code: 60 [AID TO THE ELIGIBLE (FFP)]

COUNTY: SISKIYOU

CCS Eligible: No

American Indian: No

Date of Eligibility Notification: 6/01/2023

SOC: No

Other Insurance: NO MEDICARE/ NO OTHER REPORTED COVERAGE

Other Health Insurance (OHI) information displayed here is reported to PHC by the state Medi-Cal system. Member's actual OHI status may change.

Primary Language: ENGLISH

Verify Program

Primary Care Physician Details/ Medical Home/ Additional Services

PCP Name: [Empty] PCP Phone: [Empty]

PCP Address: [Empty] PCP Fax: [Empty]

Additional Services

Service Type	Service Provider	Phone #
VISION	VISION SERVICE PLAN /Medi-Cal	(800) 615-1883
Mental Health	Carelon Behavioral Health	(855) 765-9703
Substance Use Services	PHC/Carelon	(855) 765-9703

Is Eligible: Yes

Reference No. 5C13AAB0-6C5C-4

Program: Medi-Cal

Date of Service: 6/14/2023

PCP Messages: None

Special Messages: Substance Use Services administered by PHC. See State System for additional benefit information.

Other Health Insurance: [Empty]

Case Management: None

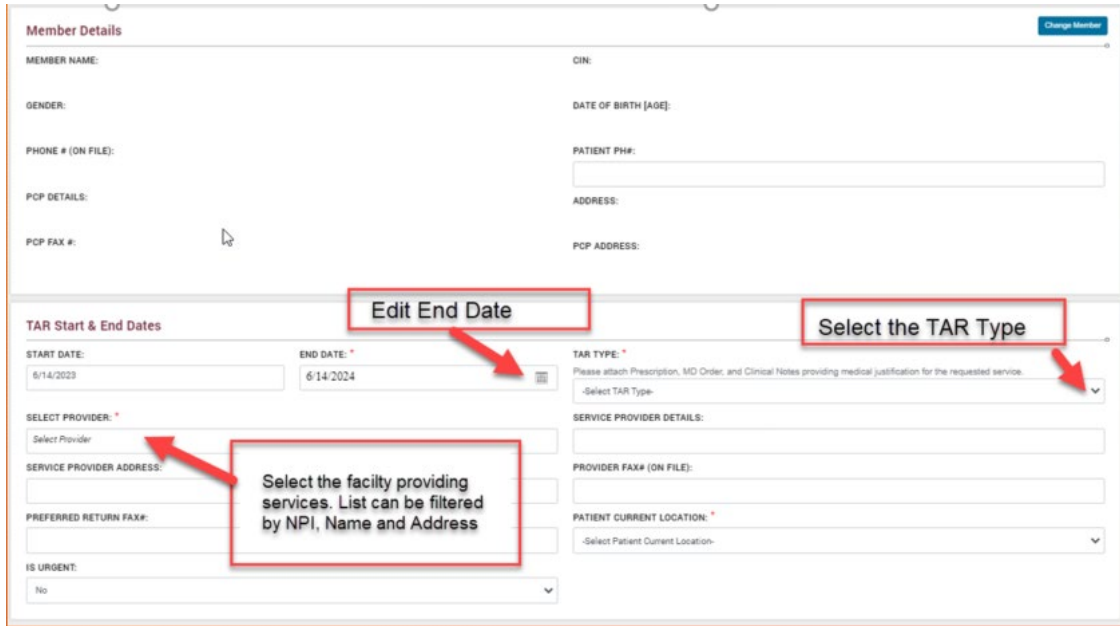
Select the TAR Type

Enter a new eTAR - Outpatient

Enter a new eTAR - Inpatient

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- Verify Member and enter TAR details prior to completing the TAR. The TAR end date will auto-populate one year out from the start date. If you click on select provider, your facility/facilities will be available to select.



Member Details

MEMBER NAME: _____ CIN: _____

GENDER: _____ DATE OF BIRTH (AGE): _____

PHONE # (ON FILE): _____ PATIENT PH#: _____

PCP DETAILS: _____ ADDRESS: _____

PCP FAX #: _____ PCP ADDRESS: _____

TAR Start & End Dates

START DATE: 6/14/2023 END DATE: 6/14/2024 **Edit End Date**

TAR TYPE: * **Select the TAR Type**

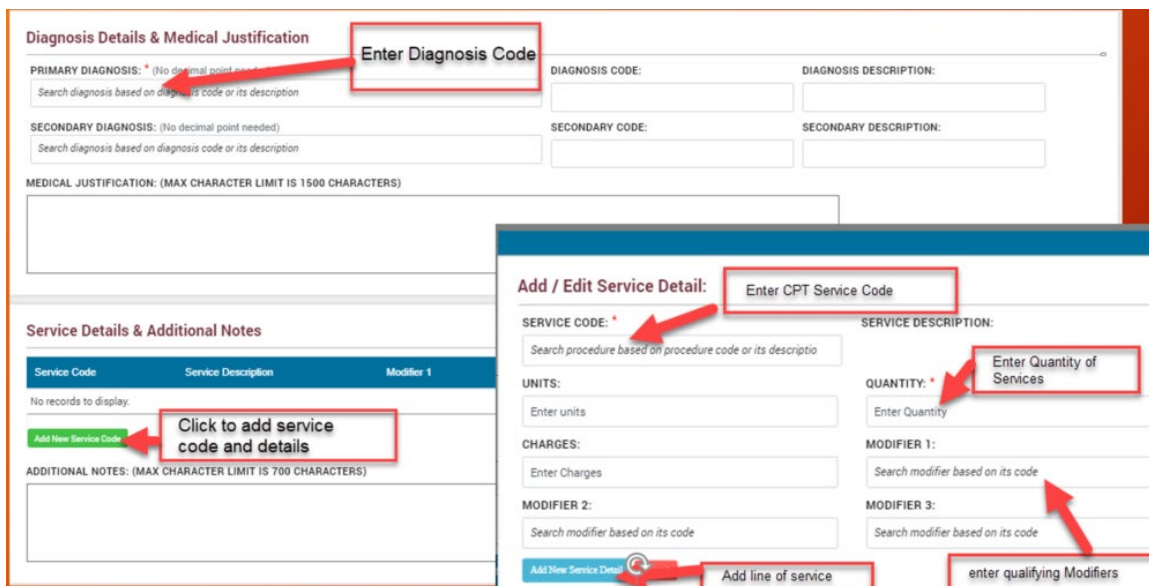
SELECT PROVIDER: * **Select the facility providing services. List can be filtered by NPI, Name and Address**

SERVICE PROVIDER ADDRESS: _____

PREFERRED RETURN FAX#: _____

IS URGENT: No

- Enter the diagnosis code and add services provided. Be sure to use the ICD-10 for the diagnosis codes. If you are familiar with the codes, you may look it up by the description. Service codes are CPT Codes for services being provided by the requesting facility.



Diagnosis Details & Medical Justification

PRIMARY DIAGNOSIS: * **Enter Diagnosis Code**

DIAGNOSIS CODE: _____ DIAGNOSIS DESCRIPTION: _____

SECONDARY DIAGNOSIS: (No decimal point needed)

SECONDARY CODE: _____ SECONDARY DESCRIPTION: _____

MEDICAL JUSTIFICATION: (MAX CHARACTER LIMIT IS 1500 CHARACTERS)

Service Details & Additional Notes

Service Code	Service Description	Modifier 1
No records to display.		
Click to add service code and details		

ADDITIONAL NOTES: (MAX CHARACTER LIMIT IS 700 CHARACTERS)

Add / Edit Service Detail:

SERVICE CODE: * **Enter CPT Service Code**

SERVICE DESCRIPTION: _____

UNITS: _____

QUANTITY: * **Enter Quantity of Services**

CHARGES: _____

MODIFIER 1: _____

MODIFIER 2: _____

MODIFIER 3: _____

Add line of service **enter qualifying Modifiers**

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7. ECM codes should be submitted as follows:

- For one-time successful engagement – Service Code: G9012, Modifier 1: (leave blank), Quantity: 1
- For ECM provider by non-billable staff without an NPI - Service Code: G9012, Modifier 1: U2, Quantity: 999 (this is the maximum number of units you can select and gives you the most flexibility)
- For ECM provided by a billable provider with an NPI - Service Code: G9008, Modifier 1: U1, Quantity: 999 (this is the maximum number of units you can select and gives you the most flexibility)

Add / Edit Service Detail: Enter CPT Service Code

SERVICE CODE: * Enter CPT Service Code

SERVICE DESCRIPTION: Search procedure based on procedure code or its description

UNITS: Enter units

QUANTITY: * Enter Quantity of Services

CHARGES: Enter Charges

MODIFIER 1: Search modifier based on its code

MODIFIER 2: Search modifier based on its code

MODIFIER 3: Search modifier based on its code

Buttons: Add New Service Code, Add line of service, enter qualifying Modifiers

Text: Click to add service code and details

8. Finally, add attachments and submit eTAR.

Attachments: Attachments: 0 Click to Add Attachments

Disclaimer: Authorization does not guarantee payment. Payment is subject to patient eligibility at the time service is rendered.

Note: Clicking Submit TAR is equivalent to signature.

Submit eTAR Click to submit eTAR

eTAR Attachments

1 Click here to access files for attachments. Files must be in a PDF format

2 Please name all files being saved to the TAR

3 Upload File

4 Once Uploaded Close Window

Attachment Type	Attachment Name	Date Added	Upload Notes	Size	Download	Delete
No records to display.						

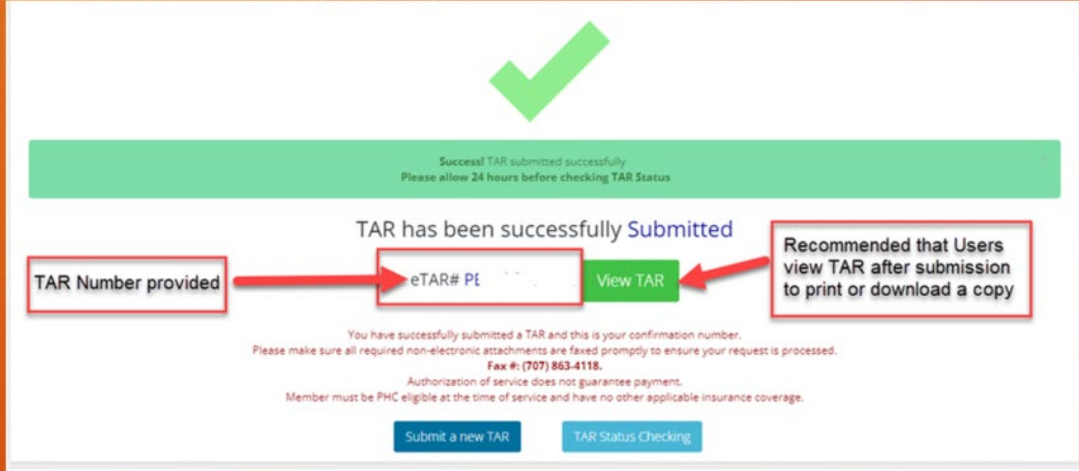
Close

- Attached files must be in the PDF Format
- All files must be named
- Once files have been attached, submit eTAR

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9. Once you have submitted the eTAR, you will then be taken to the Confirmation Page notifying you that the eTAR has been submitted.

- Confirmation eTAR number provided
- Option to view TAR with option to print for user record (recommended)



- Submitted TARs will take 24 hours to view in eTAR Status Checking

For more details on specific codes, see the below resources:

- [ECM Billing Codes and Rates](#)
- [CS Service Codes](#)