# How to Access the Member Clinical Summary

The Member Clinical Summary is available through NaviNet, our secure provider portal. Your NaviNet Security Officer must first enable access to these reports for your office and then grant security access to individual users. If you do not know who your office's NaviNet Security Officer is, you can find out by signing in to NaviNet and clicking Welcome at the top right of the screen. Next, click My Account, and then select My Security. The name of the NaviNet Security Officer for your office will be displayed. Ask your Security Officer to enable your access to this valuable report.

Once you have been granted access, you can retrieve the Member Clinical Summary report from the Eligibility and Benefits Inquiry Details screen, the Referral Inquiry Details screen, or by selecting Report Inquiry > Member Clinical Summary Reports from Plan Central.

Security Officers can grant access to the Member Clinical Summary by following the steps below.

1. On the NaviNet toolbar, select Administration and then click Manage Office Permissions.

2. Click the Enable button to the right of Member Clinical Summary Reports to enable office access to this report.

3. Once office access is enabled, you can manage individual user access. On the NaviNet toolbar, select Administration and then click Manage User Permissions.

4. On the User Search screen, select the user whose permissions you would like to change and click Edit Access.

5. On the Transaction Management for User screen, click Enable next to Member Clinical Summary Reports to enable the user to access the report.

If you have questions about this communication, please contact your Provider Account Executive, or the Provider Services department of AmeriHealth Caritas Pennsylvania at **1-800-521-6007** or of AmeriHealth Caritas Northeast at **1-888-208-7370**.

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Pennsylvania

**AmeriHealth** *Caritas*
Northeast

www.amerihealthcaritaspa.com
www.amerihealthcaritasnortheast.com

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EWM-16219

# Attention: Clinicians
## What if you could see all of the following, for each of your patients, in one report?

- Demographic information (member and PCP).
- Medications.
- Office visits.
- Chronic conditions.
- ER visits.
- Observation stays.
- Inpatient admissions.
- Imaging services received.
- Available lab data.
- EPSDT and immunization services.
- Patient-specific critical screening services (based on diagnosis compared to clinical recommendations).
- Plan Care Manager name and contact number (when applicable).
- Member restriction information (if member is "locked-in" to a PCP or pharmacy).

## How much time could this save you?

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One participating provider says that these reports "help us be proactive with our care management and services… They have added value in terms of managing and having a more holistic understanding of our patients."

## It's All in the Member Clinical Summary

The Member Clinical Summary is a virtual snapshot of a patient's clinical data and demographic information in a user-friendly format. Practitioners, hospitals, and ancillary providers can view and print relevant facts about an AmeriHealth Caritas Pennsylvania or AmeriHealth Caritas Northeast member's health care in a single report—one that is timely, easy-to-access, accurate, and complete. Having this valuable information at hand presents a tremendous opportunity for improving both quality and continuity of care.

The Member Clinical Summary Report is readily available through NaviNet as a printable PDF and as a downloadable CCD formatted file.

If you are not registered with NaviNet, visit navinet.secure.force.com and follow the simple steps to enroll.

**Note:** State and federal health privacy laws preclude the inclusion of information related to any behavioral health, HIV-related, and/or drug and alcohol addiction medications and treatments in this clinical summary.

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Health Plan

**Member Information**

| | |
|---|---|
| **Name :** | JANE DOE |
| **Address1 :** | 123 E FIRST STREET |
| **Address2 :** | |
| **City/St/Zip :** | ANYTOWN, US 55555 |
| **Phone :** | |
| **Gender :** | F |
| **DOB :** | MM/DD/YEAR |
| **Member ID :** | 000000000 |

**Member Restriction Information**

| | |
|---|---|
| **Restriction Effective Date :** | MM/DD/YR |
| **Restriction Description :** | PCP, Pharmacy |

**PCP Information**

| | |
|---|---|
| **Provider Name :** | JOHN JONES |
| **Address1 :** | 456 W SECOND ST |
| **Address2 :** | |
| **City/St/Zip :** | ANYTOWN, US 55555 |
| **Phone :** | |

**Care Manager Information**

Please contact (Phone Number) for assistance

**Medications (within past 06 months)**

| Fill Date | Name & Strength | Days Supply | Prescriber Name | Pharmacy Name |
|---|---|---|---|---|
| MM/DD/YEAR | PREDNISONE 20 MG TABLET | 30 | Prescriber Name | LOCAL PHARMACY |
| MM/DD/YEAR | XARELTO 20 MG TABLET | 30 | Prescriber Name | LOCAL PHARMACY |
| MM/DD/YEAR | IBUPROFEN 600 MG TABLET | 7 | Prescriber Name | LOCAL PHARMACY |

**Chronic Conditions (within past 06 months)**

There are no data records available for this section

**Gaps in Care (within past 06 months)**

| Condition | Service | Status | Last Service | Next Service | Rule |
|---|---|---|---|---|---|
| Preventive Health Screens | Adults Access to Care | Up-to-date | MM/DD/YEAR | MM/DD/YEAR | At least once per year |
| Preventive Health Screens | Cervical Cancer Screen | Up-to-date | MM/DD/YEAR | MM/DD/YEAR | Once every 3 to 5 years test dependent |

**ER Visits (within past 06 months)**

| Date | Facility | Reason |
|---|---|---|
| MM/DD/YEAR | LOCAL HOSPITAL | Raynauds syndrome without gangrene - Emergency Dept Visit3 Key Components:Expand Prob Focus Hx;Expand Prob Focus Exam;Med Dec Mod Complx |

**Inpatient Admissions (within past 06 months)**

| From Date | To Date | Facility | Reason |
|---|---|---|---|
| MM/DD/YEAR | MM/DD/YEAR | LOCAL HOSPITAL | Other pulmonary embolism without acute cor pulmonale - Not Assigned |

**Observations (within past 06 months)**

| From Date | To Date | Facility | Reason |
|---|---|---|---|
| MM/DD/YEAR | MM/DD/YEAR | LOCAL HOSPITAL | Chest pain unspecified |

**Office Visits (within past 06 months)**

| Date | Provider Name | Specialty | Reason |
|---|---|---|---|
| MM/DD/YEAR | PROVIDER NAME | Internal Medicine | Other pulmonary embolism without acute cor pulmonale - Blood Count; Complete Cbc Automated Hgb Hct Rbc Wbc Platelet Automated Differential Wbc |

**Imaging (within past 06 months)**

| Date | Facility | Reason |
|---|---|---|
| MM/DD/YEAR | LOCAL MEDICAL CENTER | 71020 - Radiologic Exam Chest 2 Views Frontal Lateral |
| MM/DD/YEAR | LOCAL MEDICAL CENTER | 71275 - Ct Angiography Chest W/O Contrast MatlS Followed By Contrast MatlS W/ Image Post-Processing |
| MM/DD/YEAR | LOCAL FACILITY | 7102026 - Radiologic Exam Chest 2 Views Frontal Lateral |
| MM/DD/YEAR | LOCAL PROVIDER | 7127526 - Computed tomographic angiography chest without contrast materials followed by contrast materials and further sect |

**Lab Data (within past 06 months)**

| Date | Laboratory | Test | Result | Abnormal | Status |
|---|---|---|---|---|---|

There are no data records available for this section