GLOBALHEALTH HOLDINGS, LLC
GlobalLink Training Manual

Version 5.1
Table of Contents

GlobalLink™ Overview ........................................................................................................... 3
Accessing GlobalLink™ on GlobalHealth website ................................................................ 4
GlobalLink™ Access Request ................................................................................................ 4
GlobalLink™ Training ............................................................................................................ 4
GlobalLink™ Support ........................................................................................................... 5
Home Page Navigation .......................................................................................................... 5

Patient Lookup ...................................................................................................................... 6

Coverage and Benefits .......................................................................................................... 7
Benefits ................................................................................................................................ 8
Eligibility ............................................................................................................................... 9

Generating New Prior Authorization/Referral Request .......................................................... 10
Referral Type ......................................................................................................................... 10
General Information Tab ..................................................................................................... 11
Selecting Authorization Priority .......................................................................................... 11
Prior Authorization Start Date .............................................................................................. 12
Expiration Date .................................................................................................................... 12
Referral By .......................................................................................................................... 12
Referral To ............................................................................................................................ 12
Provider Specialty ............................................................................................................... 12
Vendor/Facility ..................................................................................................................... 12
Location/POS (Place of Service) Type ................................................................................ 12
Diagnosis/Services Tab ....................................................................................................... 13
Diagnoses ............................................................................................................................ 13
Services ................................................................................................................................ 13
Notes ................................................................................................................................... 13

Viewing Prior Authorization Summary ................................................................................ 14
Viewing Prior Authorizations ............................................................................................... 15
Sample Authorization .......................................................................................................... 15
Automatic Prior Authorizations .......................................................................................... 16

Referral Messages, Notes, Attachments .............................................................................. 16
Referral Messages ................................................................................................................ 16
Notes, Attachments .............................................................................................................. 16

Checking Claims Status ....................................................................................................... 17
Checking Claims by Member ............................................................................................... 17
Checking Remittance Advices ............................................................................................. 18

Manage My Clinic ................................................................................................................ 19

Securing Your Session ......................................................................................................... 19

Non-Contracted Providers .................................................................................................. 19

FAQ .................................................................................................................................... 20
GlobalLink™ Overview

GlobalLink™ is an online tool available to all Contracted Providers. GlobalLink™ is provided to allow Contracted Providers to:

- Verify eligibility
- Review member demographics
- View benefit information
- Create Prior authorizations/referrals
- Check Prior Authorizations/referrals review status
- Check claim status
- Communicate with GlobalHealth

**GlobalLink™ is available 24 hours a day, 7 days a week.**

For purposes of this GlobalLink™ training the term Prior Authorizations and referrals are used interchangeably and is defined as the process whereby a provider receives prior written authorization from GlobalHealth to treat the GlobalHealth member. Prior Authorization of services is not a guarantee of payment.
Accessing GlobalLink™ on GlobalHealth website
You may access information about GlobalLink™ on our website at:
www.globalhealth.com/providers/globallink/

GlobalLink™ Access Request
Submit a GlobalLink™ Access Request form for each user.
Each user must have their own GlobalLink™ unique user name and password.

Request access at www.globalhealth.com/providers/globallink-access-request/

Alternatively, you may contact the GlobalHealth GlobalLink™ Team (globallink.access@globalhealth.com) to request a Bulk User Access Request Form. Access is granted within 7 (seven) business days.

GlobalLink™ Training
Training sessions are available the first and third Tuesday each month. Register online at www.globalhealth.com/providers/globallink-provider-training/. This is a live webinar training with Questions and Answer time.

Using your unique login credentials, enter your User ID and Password and click Log In.
GlobalLink™ Support
For user access questions and/or technical issues with GlobalLink™, such as forgotten passwords or error messages, please contact the GlobalHealth GlobalLink™ Team at globallink.access@globalhealth.com

Home Page Navigation
The screenshot below depicts the GlobalLink™ home page. You may navigate by selecting the appropriate option.
Patient Lookup

There are three ways to locate a patient: Select Patient, Custom Search, Recent Patients. From these pages users can access the patients they are authorized to view.

Select Patient: Entering the full member ID number will bring an exact member match. Entering other fields will garner results to make further selections. Most member ID numbers are 11 digits. Be sure to include all digits to ensure an accurate search. The member name will appear in a blue hyperlink. Selecting the member's name will open their record.

Custom Search: You can select the "Use Sounds-Like" box when you are unsure of the member’s name or ID number.

Recent Patients: This selection will show the members name that have been recently viewed.
Coverage and Benefits

From the screen below, you will see the selected patient's information. Select the desired time frame in the View available coverages as of field.
Benefits
Click the Benefits Summary tab for a benefit overview.

Select the Back tab to return to the previous menu.
Eligibility

Click on the Coverage Detail Report tab for eligibility information.

Select the Back tab to return to the previous menu.
Generating New Prior Authorization/Referral Request

Refer to the Provider Manual for details on which services need Prior Authorization. There are some direct access services that do not require Prior Authorizations. The Provider Manual can be found at [www.globalhealth.com/media/3976/2019_providermanual_final.pdf](http://www.globalhealth.com/media/3976/2019_providermanual_final.pdf)

To generate a new Prior Authorization request, click on the New Referral Tab from the menu.

### Referral Type

Select the **Referral Type** Tab

Click on the Search icon to select the appropriate Referral Type.

Double click to select the desired service. The selection will return to the Referral Type screen. Select **Next** when ready to proceed to the next screen.
General Information Tab
Selecting Authorization Priority
Select the appropriate Priority: "Routine" or "Urgent". Prior Authorization requests should be performed 5 (five) days prior to the anticipated service.

An urgent status should only be used if the patient has a potentially life-threatening condition. Failure to timely request a Prior Authorization request does not constitute an urgent status.

Prior Authorization Start Date
GlobalHealth does not issue retroactive Prior Authorizations. The Start Date is automatically populated as the date of the request.

Expiration Date
Prior Authorization requests are granted for a 90-day period. An extended Expiration Date can be requested for chronic illnesses.

Referral By
Click on the Search icon to select the name of the Referring By provider. If known, the GlobalHealth provider identification number can be entered directly into the field instead of using the search option.

Referral To
Click on the Search icon to select the name of the Referring To provider. If known, the GlobalHealth provider identification number can be entered directly into the field instead of using the search option.

Provider Specialty
Select the Referral To provider’s specialty.

Vendor/Facility
Click on the Search icon to select the name of the Facility (Vendor) where services will be performed. If known, the GlobalHealth Facility (Vendor) identification number can be entered directly into the field instead of using the search option.

Location/POS (Place of Service) Type
Future enhancement to appropriately identify the Place of Service. Select Next when ready to proceed to the next screen.
Diagnosis/Services Tab

Diagnoses
Click on the Search icon to select the accurate Diagnoses codes or type the codes directly into the field.
Click on the Green Cross  Add  to add additional codes.

Services
Click on the Search icon to select the accurate procedure codes or type the codes directly into the field.
Click on the Green Cross  Add  to add additional codes.

Notes
Add any notes or attachments that are pertinent to the Prior Authorization request.
Select Back to make any changes; Select Request Referral to send the request to GlobalHealth; Select Cancel Request to cancel the Prior Authorization request.
Viewing Prior Authorization Summary

Select the Referral by Member Tab to see the Prior Authorization requests for this member.

Select Show Active Referrals or Show all Referrals.

Click on the blue Authorization number to open the record.

Data may be sorted by clicking the column headings.
Viewing Prior Authorizations
Review each field to ensure the accurate provider/facility-vendor/procedure has been requested.

PAY SPECIAL ATTENTION TO:

**Referral Status**
This field must be populated as Approved for the Prior Authorization to be valid.

**Start Date; Expiration Date**
This is the Prior Authorization period.

**Procedure Information Requested; Approved**
View this field to determine the requested and approved services. The system automatically enters the approved quantity prior to the Prior Authorization being approved. A valid authorization MUST have an APPROVED status.

The authorization expires when the quantity is used, OR the Expiration Date occurs, whichever occurs first.

Sample Authorization

[Image of Prior Authorization Form]

**Referral Information**
- Referral #: 123
- Creation Date: 06/01/2020
- Referral Status: Pending Review
- Status History: 06/03/2020
- Referral Type: Abu
- Referral Reasons: None
- Referral Class: Outgoing
- To Provider: John Doe
- To Location/Place of Service: E124
- To Department: Radiology
- To Vendor: None
- To Department: None
- Referral Date: 06/02/2020
- Expired Date: 06/01/2020
- Referral Entered By: John Doe

**Procedure Information**
- Procedure: COLONOSCOPY W/BIOPSY
- Revenue Code: 01224
- Provider: John Doe
- Requested: 1
- Approved: 1

**Diagnosis Information**
- Diagnosis Code: R80.2
- Diagnosis: Benign neoplasm of male breast

**Referred To Vendor**
- Vendor: MERCY CURMC OKLAHOMA COMMUNITIES INC
- Vendor Phone: 405-750-8190
- Referred To Provider’s Phone: 405-749-4237

[Image of Global Health Logo]
Automatic Prior Authorizations
GlobalHealth is developing a process that would allow some services to be automatically processed in GlobalLink. As a result, the request can be checked upon entry to determine approval status.

Referral Messages, Notes, Attachments

Referral Messages
Within the Authorization, Select the Referral Message option to request changes to the existing Authorization. In the “To” field, type UM, select Kelly Butler and Julie Jakowski. Complete the remaining fields with the information regarding the requested changes. Click Send Message when complete.

Notes, Attachments
Within the Authorization, Select the Add Note/Attachment option. Attach the desired file and include pertinent notes. Click Add Note when complete.
Checking Claims Status

Checking Claims by Member
This feature allows providers to view the claims for specific patients. Providers can view claim number, service date, date that the claim was received, status of the claim, and a detailed report concerning the claim. Select **Claims / Claims Search** to view claims.
Checking Remittance Advices

This feature allows providers to view the Remittance Advice for specific patients. Select **Claims / Remittance Advice Search** to view details.

Clicking on the blue hyperlink will provide detailed information.
Manage My Clinic
This will be a future enhancement.

Securing Your Session
It is important to remember to log out of GlobalLink™ when your work is complete rather than simply closing your web browser. You may logout of GlobalLink™ at any time by clicking the Log Out button in the top right corner of the GlobalLink™ toolbar. For security reasons, you will be automatically logged out of GlobalLink™ after a period of inactivity.

Non-Contracted Providers
Non-contracted providers can view limited claims status when specific claim details are known. From the GlobalLink™ sign in screen, select the Check Claim Status option.
FAQ
This frequently asked questions (FAQ) section outlines common questions.

<table>
<thead>
<tr>
<th>Issue/Question</th>
<th>Answer/Resolution</th>
</tr>
</thead>
<tbody>
<tr>
<td>What if I have forgotten my password?</td>
<td>Send an email to <a href="mailto:Globallink.access@GlobalHealth.com">Globallink.access@GlobalHealth.com</a> giving your user ID, tax identification number and group NPI.</td>
</tr>
<tr>
<td>Can our organization use a shared ID?</td>
<td>No. HIPAA Access Control §164.312(a)(1) prevents shared user IDs.</td>
</tr>
<tr>
<td>Can our organization use the user name and password of a former employee?</td>
<td>No. GlobalHealth should be notified when an employee terminates so their access can be terminated.</td>
</tr>
<tr>
<td>Are there situations where a user’s account is closed?</td>
<td>Yes. Accounts with 90 days of inactivity are permanently closed. The user must submit a GlobalLink™ Access Form to establish a new account.</td>
</tr>
</tbody>
</table>