

Carelon Behavioral Health

myCarelon User Guide

Member Portal

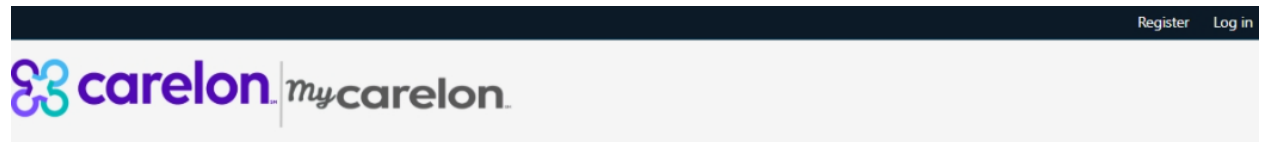
Table of Contents

myCarelon User Guide	2
Landing Page:.....	2
Registration:.....	3
Login	4
Verify Account (Multi Factor Authentication)	5
Attestation after login:	8
Home	9
Claim Submission	10
Submitted Claims	11
Benefits.....	12
Out of Pocket	13
Co-pay Information	13
Cost Sharing	14

myCarelon User Guide

Landing Page:

The Landing Page <https://mycarelon.carelonbehavioralhealth.com> is the first screen you see when accessing the myCarelon platform. It provides an entry point and general overview of the services available. From here, users can navigate to the registration or login pages, and it offers quick access to important information and features.



Log In

Email

Password

Remember me?

[Forgot Password?](#)
[Register](#) if you don't have an account.


This site is optimized for Internet Explorer (IE9) and higher; it requires JavaScript to be enabled.
Copyright © Carelon Health, 2024. All rights reserved. [Terms and Conditions of Use & Disclaimer](#).

Registration:

To fully access the myCarelon platform and its services, users must create an account. Follow the steps below to register:

1. **Navigate to Registration Page:** Click on the registration link on the landing page.
2. **Enter Personal Information:** Fill in the required fields, including your name, email, and desired password. Ensure the information is accurate to avoid any future issues.
3. **Member Information:** Input your plan details from your insurance card. This includes your member ID, first name, last name, date of birth and Health Plan.
4. **Verify Account:** Follow the on-screen instructions to verify your email and complete the registration process.

[Register](#) [Log in](#)



Register

Why do we require registration?

Many of our interactive programs and online tools allow you to save your progress and return at a later time. By requiring you to login when you return to these programs, we are protecting your privacy and safeguarding your personal information. If you have finished your registration previously, please login above. If you have any questions about how we protect your privacy, please check out our [Privacy Policy](#).

All fields are required.

Email (this will be your username):	<input type="text"/>
Password:	<input type="password"/>
Confirm Password:	<input type="password"/>
Member:	<p>Please select a member in the following manner:</p> <ul style="list-style-type: none"> Please select the member's health plan. Please enter the complete and exact member ID, which may be found on the member's insurance card. Please enter the member's first name. Please enter the member's last name. Please enter or select the member's date of birth.
	<p>Health Plan: State: <input type="text" value="Please select"/></p>
	Member ID: <input type="text"/>
	First name: <input type="text"/>
	Last name: <input type="text"/>
	Date of Birth: <input type="text" value="mm/dd/yyyy"/>
Phone:	<input type="text"/>
Security question 1:	<input type="text"/>
Security answer 1:	<input type="text"/>
Security question 2:	<input type="text"/>
Security answer 2:	<input type="text"/>
Security question 3:	<input type="text"/>
Security answer 3:	<input type="text"/>

By clicking "Register" below you are certifying that the information provided above is your personal information or the information of a person for whom you are the legal guardian. Furthermore, it is your responsibility to review our [Terms and Conditions](#) and [Privacy Policy](#).

If you do not agree with the information stated in these disclaimers, please close this window now.

Register

This site is optimized for Internet Explorer (IE9) and higher; it requires JavaScript to be enabled.
 Copyright © Carelon Health, 2024. All rights reserved. [Terms and Conditions of Use & Disclaimer](#)

Login

To log into the myCarelon platform:

1. **Access Login Page:** Click on the login button on the landing page.
2. **Enter Credentials:** Input your username and password in the given fields. Double-check your credentials to ensure they are correct.
3. **Submit:** Click the “Login” button to access your account. If you have forgotten your password, there is an option to reset it on this page.



Log In

Email

Password

Remember me?

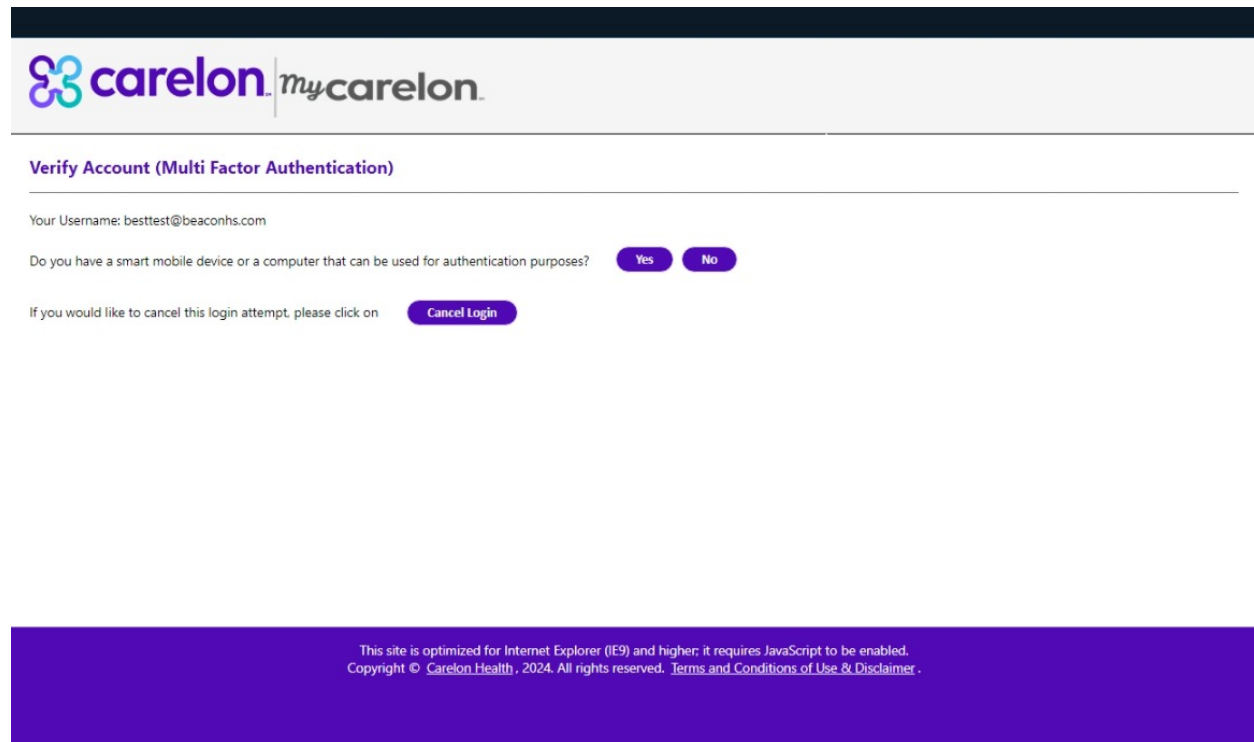
[Log in](#)

[Forgot Password?](#)
[Register](#) if you don't have an account.

This site is optimized for Internet Explorer (IE9) and higher; it requires JavaScript to be enabled.
Copyright © Carelon Health, 2024. All rights reserved. [Terms and Conditions of Use & Disclaimer](#).

Verify Account (Multi Factor Authentication)

To enhance the security of your account, myCarelton employs Multi-Factor Authentication (MFA). This is an additional step to ensure that it is really you accessing your account. You will need to verify your identity using one of two available methods: Smart Device (Yes) or Smart Device (No). Below are detailed instructions on how to complete this process.



carelon | myCarelton

Verify Account (Multi Factor Authentication)

Your Username: besttest@beaconhs.com

Do you have a smart mobile device or a computer that can be used for authentication purposes?

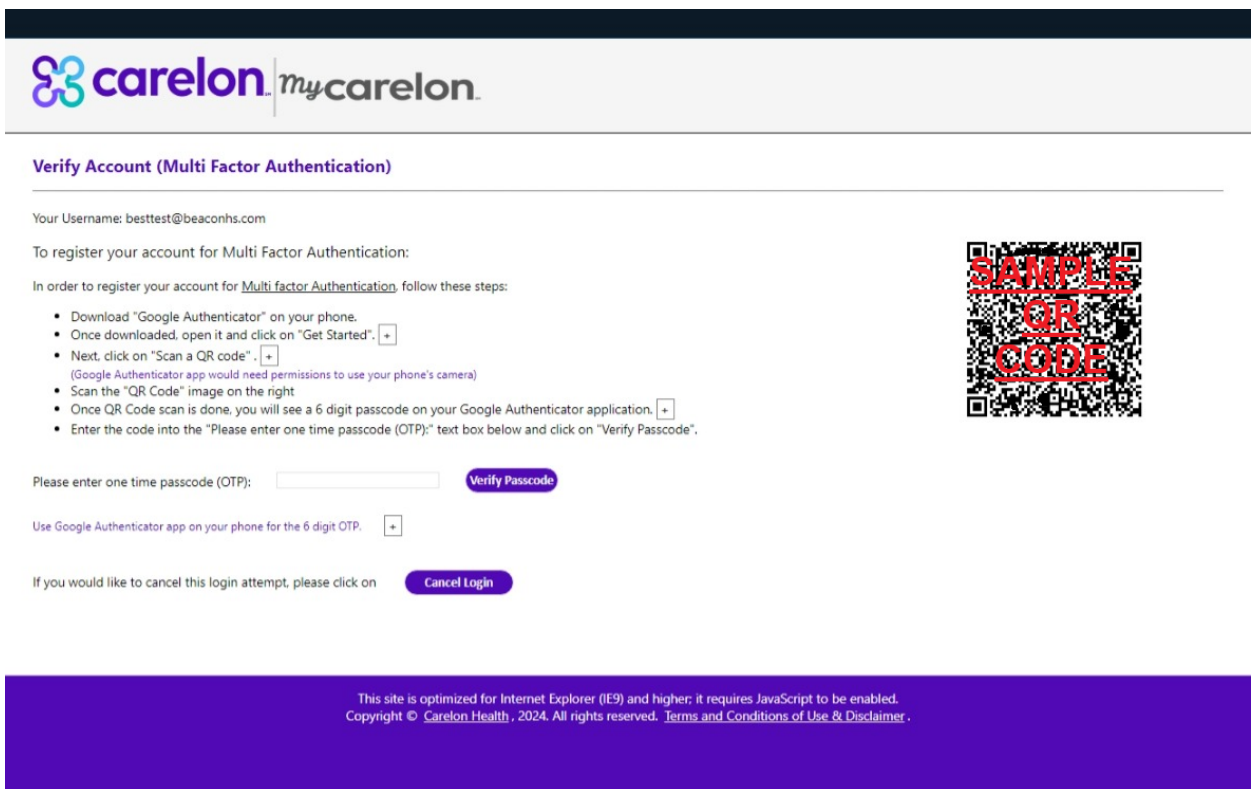
If you would like to cancel this login attempt, please click on

This site is optimized for Internet Explorer (IE9) and higher; it requires JavaScript to be enabled.
Copyright © Carelon Health, 2024. All rights reserved. [Terms and Conditions of Use & Disclaimer](#)

MFA Choice Selection

1. **Smart Device Yes:** If you select this option, a QR Code will display for registering your account for MFA. Follow the on-screen steps to complete the registration.
 - **Step 1:** Select the "Yes" option on the screen when prompted whether you have a smart device.
 - **Step 2:** A QR Code will appear on your screen.
 - **Step 3:** Open a QR code scanner on your smart device. Most smartphones have this feature built-in within the camera app or through a dedicated app.
 - **Step 4:** Scan the QR Code using your smart device. This code contains the necessary information to link your myCarelton account with your MFA method.

- **Step 5:** Download and open an authenticator app such as Google Authenticator, Microsoft Authenticator, or Authy if you haven't done so already.
- **Step 6:** In the authenticator app, add a new account and scan the QR code. This will link your myCarelon account to the authenticator app.
- **Step 7:** The authenticator app will now generate a time-based one-time passcode (TOTP) for your account.
- **Step 8:** Enter the verification code generated by your authenticator app into the myCarelon portal to verify your account.

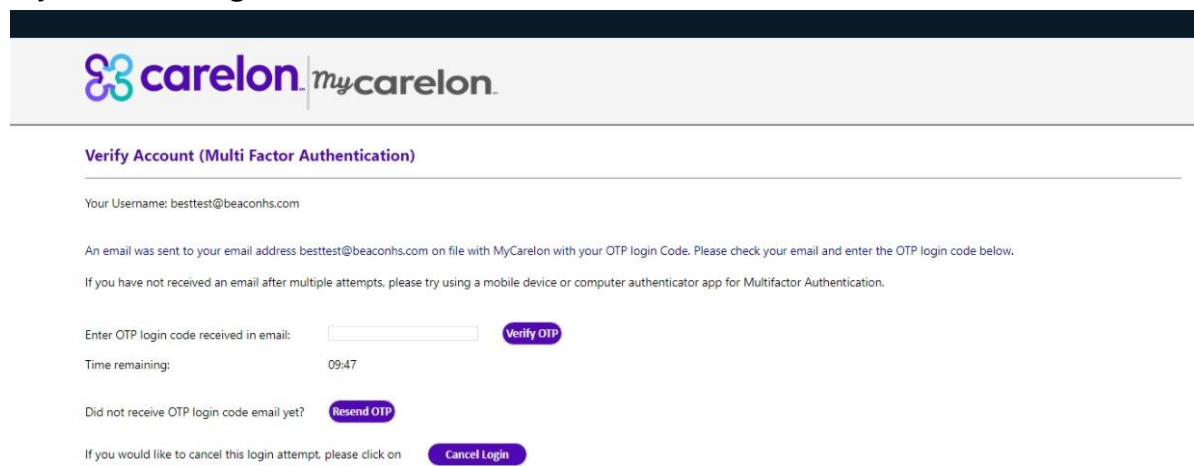


2. Smart Device No:

- **Step 1:** Select the "No" option on the screen if you do not have a smart device.
- **Step 2:** An email containing a One-Time Passcode (OTP) will be sent to your registered email address.

- **Step 3:** Check your email inbox for the OTP. If you do not receive the OTP within a few minutes, check your spam/junk folder. If it is not there, click on the "Resend OTP" button on the portal page.
- **Step 4:** Enter the OTP code from the email into the designated field on the myCarelon portal.
- **Step 5:** Click the "Verify Account" button to complete your account verification.

If you enter the OTP incorrectly five times in a row, your account will be temporarily locked for security reasons. You will need to follow the procedure outlined by myCarelon to regain access.

A screenshot of the myCarelon "Verify Account (Multi Factor Authentication)" page. The page has a dark blue header with the Carelon logo and "mycarelon." text. Below the header, the title "Verify Account (Multi Factor Authentication)" is displayed. The page shows a user's username as "besttest@beaconhs.com". A message states: "An email was sent to your email address besttest@beaconhs.com on file with MyCarelon with your OTP login Code. Please check your email and enter the OTP login code below. If you have not received an email after multiple attempts, please try using a mobile device or computer authenticator app for Multifactor Authentication." There is a text input field for the OTP code, a "Verify OTP" button, and a "Time remaining: 09:47" indicator. Below this, there is a "Resend OTP" button and a "Cancel Login" button.


Important Notes

- **Account Security:** MFA is a critical step in securing your account. It significantly reduces the risk of unauthorized access.
- **Resend OTP Option:** If the OTP email is not received promptly, utilize the "Resend OTP" option to receive a new code.
- **Authenticator App:** Ensure you download a trusted authenticator app such as Google Authenticator, Microsoft Authenticator, or Authy.
- **Locked Account:** In the case of multiple incorrect OTP entries, follow the on-screen instructions or contact myCarelon support for assistance in unlocking your account.

Attestation after login:

After successfully verifying your account with MFA, you will be prompted to complete an attestation step. This is essential for confirming your identity or agreeing to the platform's terms and conditions. Carefully read and complete this step to proceed.

You are logged in as : [besttest@beaconhs.com!](#) [Log off](#)

Home [Your MyCarelon Account](#)

Attestation

Carelon is committed to maintaining the privacy of your protected health information according to the standards established under federal and state law.

Federal law (42 C.F.R. Part 2) imposes criminal penalties for improper use or disclosure of alcohol and substance use disorder information. This law seeks to protect all persons who have received treatment for alcohol or substance use disorders. As a result, you can access treatment and payment information about alcohol or substance use disorders only if you are also the patient.

This means that you should not access alcohol or substance use disorder information about another person without their written consent, even if that other person is your spouse or child (including minor children, which usually means below the age of 18). Or even if you maintain health insurance for that other person or already know that the other person is receiving treatment for alcohol or substance use disorders.

The health information made available here is provided by Carelon solely for your information. Please consult with Carelon or your health care provider if you have questions or concerns about the information you access on this site.

Carelon assumes no responsibility or liability for any circumstances arising out of the use, misuse, interpretation or application of any information supplied on this system.

I attest, under the applicable state and federal law, that the information that I provide below is true and correct.

By clicking "Yes" below, I confirm that I am authorized to access, receive and use the information provided and that I understand that I must not access information about alcohol or substance use disorders of people other than myself (including spouses and minor children).


Yes No

This site is optimized for Internet Explorer (IE9) and higher; it requires JavaScript to be enabled.
Copyright © Carelon Health, 2024. All rights reserved. [Terms and Conditions of Use & Disclaimer](#).

Home

The Home Page serves as your main dashboard once you are logged in. It provides a central point for navigation within the platform and displays key information and quick links to other major sections such as claims, benefits, and personal account details.

You are logged in as: [besttest@beaconhs.com!](#) [Log off](#)

 [Home](#) [Your MyCarelon Account](#)

Welcome to Claim Submission Process

If you or your covered dependents have received behavioral health services from a clinician who is not part of the Carelon network, you can submit a claim for payment here.

Submitting claims online is easy. To begin, you will be asked to provide the following information:

- Who? (Patient, Insured, Clinician)
- What? (Service or Procedure Code)
- Why? (Diagnosis Code)
- When? (Date of Service)
- Where? (Location of Service)
- How much? (Billed Charge)

All of this information should be on the bill. If any of the information is missing, you can get it from the clinician before submitting an online claim. The system will not accept incomplete claims.

Available Members

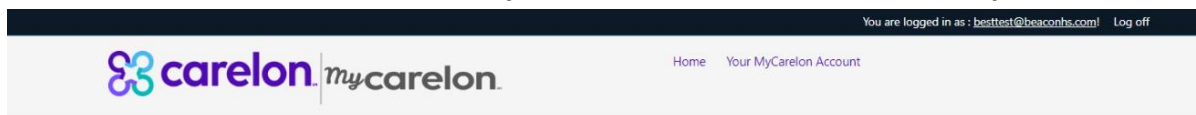
Member	DOB	Relationship	Claims	Benefit Info
MEMBER, DEMO (MA1849952839)	12/20/1955	Self	Submit Claims Submitted Claims	Benefits Co-Pay Information Out-Of-Pocket

This site is optimized for Internet Explorer (IE9) and higher; it requires JavaScript to be enabled.
Copyright © Carelon Health, 2024. All rights reserved. [Terms and Conditions of Use & Disclaimer](#).

Claim Submission

To submit a claim through the myCarelon platform:

1. **Navigate to Claim Submission:** Click on the 'Claim Submission' link/tab.
2. **Enter Claim Details:** Fill in the necessary information about the claim, including dates, services received, and costs.
3. **Attach Documents:** Upload any necessary documents to support your claim, such as receipts or bills. Ensure the documents are clear and legible.
4. **Submit Claim:** Click the 'Submit' button to finalize the claim submission process. You will receive a confirmation once your claim is submitted successfully.



Claim

Important Information Regarding Claims Submission for Dates of Service on or After October 1, 2015

The federal government requires that all health care providers, health plans and employers begin using new diagnosis code sets for health care transactions, such as submission of health care claims, starting on October 1, 2015. To date, these providers, health plans and employers have been using the International Classification of Diseases, version 9 (ICD-9) for claims but will now be required to use the International Classification of Diseases, version 10 (ICD-10) for claims for all dates of service on or after October 1, 2015.

What This Means for You

For those of you who are using the Carelon Behavioral Health web portal (MyCarelon) to submit claims, you will need to contact your health care provider and ask for a new ICD-10 diagnosis code to replace the ICD-9 code you have been using. This code will be required for all claims submitted where the **date of service** is on or after October 1, 2015. ICD-9 codes are required for all dates of service before October 1, 2015.

To ensure compliance with this federal requirement, MyCarelon has been programmed to allow claims that are entered for services that occur prior to October 1, 2015 to select ICD-9 codes only OR claims submitted for services that occur on or after October 1, 2015 to select ICD-10 codes only. Please note, claims for outpatient services cannot include both ICD-9 and ICD-10 diagnosis codes, these must be entered as separate claims.

Due to this change you will also notice slight changes in the screens you use to submit claims.

If you have questions regarding this change, please call our offices at (800) 555-5556 or email member.services@Carelonhs.com.

- Submit claims for dates of service BEFORE 10/1/2015
- Submit claims for dates of service ON OR AFTER 10/1/2015

Submit

This site is optimized for Internet Explorer (IE9) and higher; it requires JavaScript to be enabled.
Copyright © Carelon Health, 2024. All rights reserved. [Terms and Conditions of Use & Disclaimer](#).

Submitted Claims

To view your previously submitted claims:

1. **Navigate to Submitted Claims:** Click on the 'Submitted Claims' link/tab.
2. **View Claims:** A list of all submitted claims will be displayed, including details such as claim status, submission dates, and the services provided.
 - a. Click on the "Detail" button to see more in-depth information about each claim.

You are logged in as: besttest@bsaconhs.com! [Log off](#)

Home [Your MyCarelon Account](#)

Submitted Claims

Rendering Clinician	Status of Claim	Service Date	Date Submitted	Date Paid	Payment	Costs	Cost to Member	Record ID
Demo Clinician	In-Process (68)	7/31/2024	9/8/2024					269341538 (Detail)
Demo Clinician	In-Process (68)	7/28/2024	9/7/2024					269319874 (Detail)
Demo Clinician	In-Process (68)	8/1/2024	8/23/2024					268794473 (Detail)
Demo Clinician	In-Process (68)	8/1/2024	8/17/2024					268522080 (Detail)
Demo Clinician	In-Process (68)	8/1/2024	8/9/2024					268220875 (Detail)
Demo Clinician	In-Process (68), (145)	8/1/2024	8/9/2024					268208134 (Detail)
Demo Clinician	In-Process (68), (145)	8/1/2024	8/9/2024					268206844 (Detail)
Demo Clinician	In-Process (68), (145)	8/1/2024	8/7/2024					268087632 (Detail)
Demo Clinician	In-Process (68), (145)	8/1/2024	8/7/2024					268087631 (Detail)
Demo Clinician	In-Process (68), (145)	8/1/2024	8/7/2024					268087614 (Detail)
Demo Clinician	In-Process (68)	5/29/2024	6/20/2024					266209502 (Detail)
Demo Clinician	In-Process (53), (68), (254)	8/2/2023	10/19/2023					255012348 (Detail)
Demo Clinician	In-Process (53), (68), (254)	8/2/2023	10/13/2023					254769511 (Detail)
Demo Clinician	In-Process (68), (147), (254)	9/6/2023	9/26/2023					254024988 (Detail)
Demo Clinician	In-Process (68), (71), (111), (254)	8/2/2023	8/25/2023					252577259 (Detail)

Displaying page 1 of 44.
[First](#) [Previous](#) [Next](#) [Last](#)

Definitions of claim statuses:


- 16 Duplicate claim. Claim has previously been paid to your facility.
- 19 This claim is missing a valid procedure code. This code tells us what service you received and is needed to decide if a claim is covered. As a result, no benefits are payable at this time.
- 24 Patient name/d.o.b. does not match Member ID. Resubmit with correct patient name and date of birth.
- 21 This claim is missing a billed amount. This amount is needed to decide the reimbursement rate. As a result, no benefits are payable at this time.
- 24 A claim must be sent in after the date of service. This ensures that services were actually received. Because this claim was submitted in advance of the service date, no benefits are payable. If services were received, then a new claim can be submitted.
- 35 This service requires authorization based on medical necessity. Because no authorization was obtained, no benefits are payable.
- 37 The behavioral health part of your plan does not provide benefits for the treatment submitted on this claim (see boxes labelled "Treatment Code" and "Description of Service" above). As a result, no benefits are payable.
- 52 This claim is missing a valid diagnosis code. This code is needed to decide if the service was medically necessary and otherwise covered by your plan. As a result, no benefits are payable at this time.
- 53 Because this claim was not received within the appropriate time period, no benefits are payable.
- 55 Units billed exceeds the limit of units allowed per day.
- 60 This claim is missing a date of service. A date is needed to decide if a claim is covered. As a result, no benefits are payable at this time.
- 67 Resubmitted claims require the invoice number of the original claim. This is to determine if the resubmission is timely. This claim is missing a valid invoice number. As a result, no benefits are payable at this time.
- 68 You are not in a plan for which we administer behavioral health benefits. Please contact BEST if you have questions.
- 71 This resubmitted claim was received after the time allowed beyond the date on the initial notice of benefit determination. Because of this no benefits are payable.
- 77 Adjustment to claim that paid the incorrect amount.
- 78 Paid incorrect rate.
- 83 Adjustment to previously paid claim.
- 92 Your Plan requires prior authorization for this level of care when the provider is not in-network. Because your provider is not in-network and the service is not authorized, no benefits are payable.
- 100 Specific Modifier rate not found.
- 104 You plan limits the number of outpatient visits per year. No benefits are payable for visits that exceed this limit.
- 111 Each date of service must be billed as a separate line item. This allows us to decide whether services are covered by your plan. Because this claim did not separate out services by date, no benefits are payable at this time.
- 125 Your provider is not contacted/ registered to perform the services on this claim. Please contact Carelon's Member Services at <800-xxx-xxxx> for more information. No benefits are payable at this time.
- 140 Your primary diagnosis is not a behavioral health condition. As a result, no behavior health benefits are payable. If the medical diagnosis code is correct, then send this claim to the address for medical/surgical claims.
- 141 This claim is missing a valid diagnosis code. This code is needed to decide if the service was medically necessary and otherwise covered by your plan. As a result, no benefits are payable at this time.
- 142 This claim is missing a valid diagnosis code. This code is needed to decide if the service was medically necessary and otherwise covered by your plan. As a result, no benefits are payable at this time.
- 143 This claim is missing a valid behavior health diagnosis code. This code is needed to decide if the service was medically necessary and otherwise covered by your plan. As a result, no benefits are payable at this time.

Benefits

The Benefits section provides comprehensive information on your plan benefits. Accessing it requires the following steps:

- 1. Access Benefits:** Click on the 'Benefits' link/tab.
- 2. View Information:** Your plan benefits will be displayed, detailing your coverage, included services, and any coverage limits. This section helps you understand what your insurance plan offers and how to make the most of it.

You are logged in as: [besttest@beaconhs.com!](#) [Log off](#)


Home [Your MyCarelon Account](#)

Benefits

The following information is for this member:

DEMO MEMBER - 12/20/1955
BEST - MA1849952839

Benefit Level	Medicaid
MH IP	Prior authorization required, number of days is based on medical necessity.
MH OP	12 initial encounters per member per calendar year before authorization is needed; visits beyond 12 are based on medical necessity. (Please note this is not a health plan benefit design, this is how Carelon administers the outpatient behavioral health benefit and is subject to change).
SA IP	Detox is a post-admit review, number of days is based on medical necessity.
SA OP	12 initial encounters per member per calendar year before authorization is needed; visits beyond 12 are based on medical necessity. (Please note this is not a health plan benefit design, this is how Carelon administers the outpatient behavioral health benefit and is subject to change).
Other	Methadone maintenance is a covered benefit; no authorization required. No authorization required for the following services: medication management (90862), group therapy (90853), crisis intervention services (S9494 - on-site; H2011 P15 - mobile), case consult (90882) or family consult (90887). (Please note this is not a health plan benefit design, this is how Carelon administers the outpatient behavioral health benefit and is subject to change).
Funding	Medicaid
Update Date	06/08/2009

[Back](#)


This site is optimized for Internet Explorer (IE9) and higher; it requires JavaScript to be enabled.
Copyright © Carelon Health, 2024. All rights reserved. [Terms and Conditions of Use & Disclaimer](#).

Out of Pocket

This section provides a detailed breakdown of your out-of-pocket costs, which is essential for budgeting and financial planning.

1. **Access Out of Pocket Section:** Click on the 'Out of Pocket' link/tab.
2. **View Details:** Your current out-of-pocket expenses and any anticipated costs will be shown. This includes deductibles, co-pays, and any other out-of-pocket expenses that you may incur.

You are logged in as : besttest@beaconhs.com! [Log off](#)



[Home](#) [Your MyCarelon Account](#)

Out of Pocket

The following information is for this member:

DEMO MEMBER - 12/20/1955
BEST - MA1849952839

Limit Type	Bucket	Value	Date From	Date To
OOP Individual \$	In-Network Benefit	\$3,400.00	1/1/2017	12/31/2029

[Back](#)

Co-pay Information

To view co-pay details:

1. **Access Co-pay Information:** Click on the 'Co-pay Information' link/tab.
2. **View Co-pays:** Detailed information on required co-pays for different types of services under your plan will be displayed. This helps you understand the immediate costs associated with different healthcare services.

You are logged in as : besttest@beaconhs.com! [Log off](#)



[Home](#) [Your MyCarelon Account](#)

Co-Pay Information

The following information is for this member:

DEMO MEMBER - 12/20/1955
BEST - MA1849952839

Copay Type	Copay Range	Copay Value	Network	Exclude From OOP	Post Deductible	Date From	Date To
SA OP Default	Per Visit/Stay	0 (Dollars)				10/22/1999	12/31/2029


[Back](#)

Cost Sharing

For commercial members, understanding cost-sharing arrangements is crucial. The Unified Cost Share Interface provides comprehensive details on this topic.

1. **Access Cost Sharing:** If applicable, click on the 'Cost Sharing' link/tab.
2. **View Details:** The interface will present detailed information on how costs are shared between you and your insurance company, including coverage percentages, amounts owed, and expenses that apply to your deductible or out-of-pocket maximum.

You are logged in as: [besttest@beaconhs.com!](#) [Log off](#)

 [Home](#) [Your MyCarelon Account](#)

Welcome to Claim Submission Process

If you or your covered dependents have received behavioral health services from a clinician who is not part of the Carelon network, you can submit a claim for payment here.

Submitting claims online is easy. To begin, you will be asked to provide the following information:

- Who? (Patient, Insured, Clinician)
- What? (Service or Procedure Code)
- Why? (Diagnosis Code)
- When? (Date of Service)
- Where? (Location of Service)
- How much? (Billed Charge)

All of this information should be on the bill. If any of the information is missing, you can get it from the clinician before submitting an online claim. The system will not accept incomplete claims.

Available Members

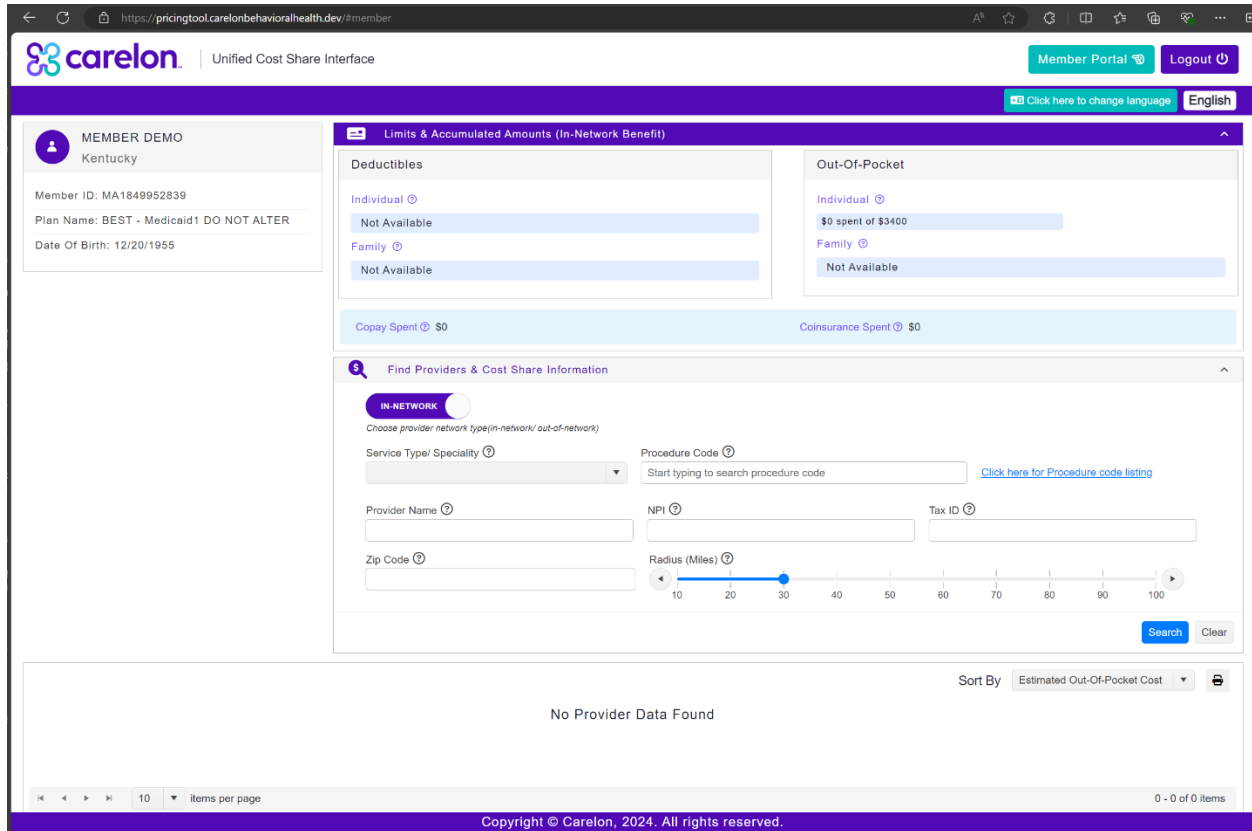
Member	DOB	Relationship	Claims	Benefit Info
MEMBER, DEMO (MA1849952839)	12/20/1955	Self	Submit Claims Submitted Claims	Benefits Co-Pay Information Out-Of-Pocket

[Cost Sharing](#)

You might like to explore our new [Cost Sharing](#) tool.

Unified Cost Share Interface

The Unified Cost Share Interface offers an integrated view of all cost-sharing details. This tool helps you understand the financial aspects of your healthcare plan in a clear and cohesive manner.



MEMBER DEMO
Kentucky

Member ID: MA1849952839
Plan Name: BEST - Medicaid1 DO NOT ALTER
Date Of Birth: 12/20/1955

Limits & Accumulated Amounts (In-Network Benefit)

Deductibles

Individual Not Available
Family Not Available

Out-Of-Pocket

Individual \$0 spent of \$3400
Family Not Available

Copay Spent \$0 Coinsurance Spent \$0

Find Providers & Cost Share Information

IN-NETWORK

Choose provider network type (in-network/out-of-network)

Service Type/ Speciality Procedure Code [Click here for Procedure code listing](#)

Provider Name NPI Tax ID

Zip Code Radius (Miles)

Sort By: Estimated Out-Of-Pocket Cost

No Provider Data Found

10 Items per page 0 - 0 of 0 items

Copyright © Carelon, 2024. All rights reserved.