Request New Account for AltaMed Link

This tip sheet is to guide AltaMed's contracted provider groups through the process of requesting a new account and new users for a limited access to AltaMed's EHR.

NOTE: Send your Business Associate Agreement first.

Before following steps below to set up an account, AltaMed HIM Department needs to receive the Business Associate Agreement (BAA) that accompanied your contract with AltaMed. A BAA is your organization's commitment to safeguard Protected Health Information (PHI) and is usually an addendum to the main contract document. This is typically kept on file by your legal or business affairs department. Please email the BAA to **AltaMedprivacyoffice@AltaMed.org**. You will be notified by email when your BAA has been approved.

If the purpose for your request is to view claims/eligibility for AltaMed members please begin the registration process for our provider portal called CONNECT at the following website: https://connect.alturamso.com/Login.aspx_and https://connect.alturamso.com/Web/Pub/Registration/RegForm.aspx.

If a provider doesn't know if they are registered or not, they can always email or call AltaMed MSO at the following contact information below: shareconnectsupport@altamed.org or call the MSO support line (855) 848-5252, option 1, option 6, option 1

How to Request AltaMed Link Access for Your Organization

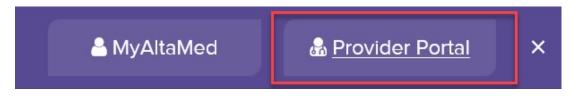
Once your BAA has been received and verified by AltaMed, the next step is to submit a request to register your organization or site with AltaMed.

NOTE: Your site request should be completed by a Clinic Administrator/Manager. This person will manage the account as the AltaMed Link Site Administrator. The administrator will be responsible for:

- Enrolling users at your organization
- Resetting passwords
- Updating user accounts
- Inactivating accounts for personnel no longer working at your organization
- 1. Go to AltaMed.org and click on menu button
 - If you cannot access this link, ask your IT Security Department to whitelist AltaMed.org



2. Click the **Provider Portal** option



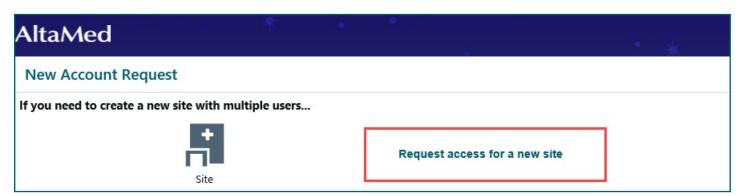
3. Select the Visit hyperlink under AltaMed Link section for our contracted provider groups



4. Click the Request New Account option

powered by Epic AltaMedLink
Password
LOG IN Forgot password?
Request New Account

5. Click Request access for a new site



- 6. Proceed to fill out with as much information as possible to ensure a faster verification process
 - a. 🚯 need to be filled out fields
 - Site name: must be the company name on the BAA
 - b. 🔺 highly recommended field
 - Site type: select the option that best describes your organization
 - c. In the **Comments** box, add the reason why you are requesting access to AltaMed Link.
 - Please be specific with the reason why and include the name of the person at AltaMed who referred you to enroll in AltaMed Link

Site Information	1
Site name:	
🔥 Site type:	v
Phone:	🔥 Fax:
Site NPI #:	
Address	
Address:	\sim
City:	
State:	ZIP:
County:	
Country:	
Other	
Comments:	Reason why site is being requested here

7. Click Next once the form is filled out

How to Add Users to Your Site

When requesting access for a new site, you have the opportunity to add users (Provider, Clinical Staff, Non-Clinician, etc.) who will have access to AltaMed Link.

NOTE: At least one user needs to be added when requesting a new site. This user will be the Site Administrator for the AltaMed Link account. If not able to add all users at this time, the opportunity to add other users will be available once access for a new site request has been verified and approved.

1. Click appropriate user access option from list



- 2. Proceed to fill out the User Information
 - a. 🚯 need to be filled out fields
 - Name: must be in Last Name, First Name format.
 - Work Email: must be the provider's company email address
 - NPI: must be the provider's NPI number
 - License #: provider's medical license or professional registration number
 - License State: U.S. state where License # was issued
 - b. 1 highly recommended fields
 - Specialty: select the specialty that best describes the provider specialty
 - c. **DO NOT** check the "This Provider doesn't need to log into this application. Add the provider to this site, but don't create a login account" box
 - d. Check the Make this user a site administrator box for users that will be managing the account

3. Click Accept

Name [Last,First]:	User Information					
This provider doesn't need to log into this application. Add the provider to this site, but don't create a login account. ● Work e-mail: User Fax: User Fax: City: State: County: County:<	🚯 Name [Last,First]:					
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Address City: State: County:	User Fax:					
State:	User Address:	Address:				
County:		City:				
redentials Non-U.S. credentials NPI #: License #: License state: Clinician title: Specialty: ssociated Providers: List the providers this user works with Provider name: Add there Comments: Site Administrator A site administrator is the person responsible for maintaining a site's records. These responsibilities include verifying that user accounts are current, deactivating the accounts of users who are no longer active at the site, and submitting requests to activate new user accounts. Every site must have at least one administrator. Make this user a site administrator		State:		✓ ZIP:		
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Non-U.S. credentials Image: Non-U.S. credentials Image: Non-U.S. credentials Image: License state: Image: L		Country:		~		
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Make this user a site administrator	user accounts are curr	ent, deactivating	the accounts of use	rs who are no longer active	e at the site, and sub	
✓ Accept X Cancel						X Cancel

4. Click Add to add more users as needed

AltaMed					
New Account Request > S	ite 🕨 Users				
			1. Site Informat	tion 2. Users	3. Verification
Users ➡ Add ,					
Name	User Type	NPI	E-mail		
O test, test	Non-Clinician		arasco	n@altamed.c	rg

5. Click the Verification button when done adding users

	 Site Information 	→ Verification	X Cancel Request
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- 6. Read through Terms and Conditions
 - Check the I agree to the Terms and Conditions above. box
- 7. Check the **I'm not a robot** box
- 8. Enter your name in the Requested by field
- 9. Click Submit Request

Users Verification		ē
Verification	1. Site Information 2. Users 3. Verification	
Ferms and Conditions:	AltaMed – ALTAMED LINK AltaMed is committed to protecting the privacy and security of its patients' medical records and other health information. AltaMed grants limited permission to physicians	
• Verification:	I agree to the Terms and Conditions above. I'm not a robot Conditions Conditity Conditions Conditions Conditions Conditions Condi	
Requested by:		
	🔶 Previous 🗸	Submit Request X Cancel Request

