

How to request TPA's community health services for patients



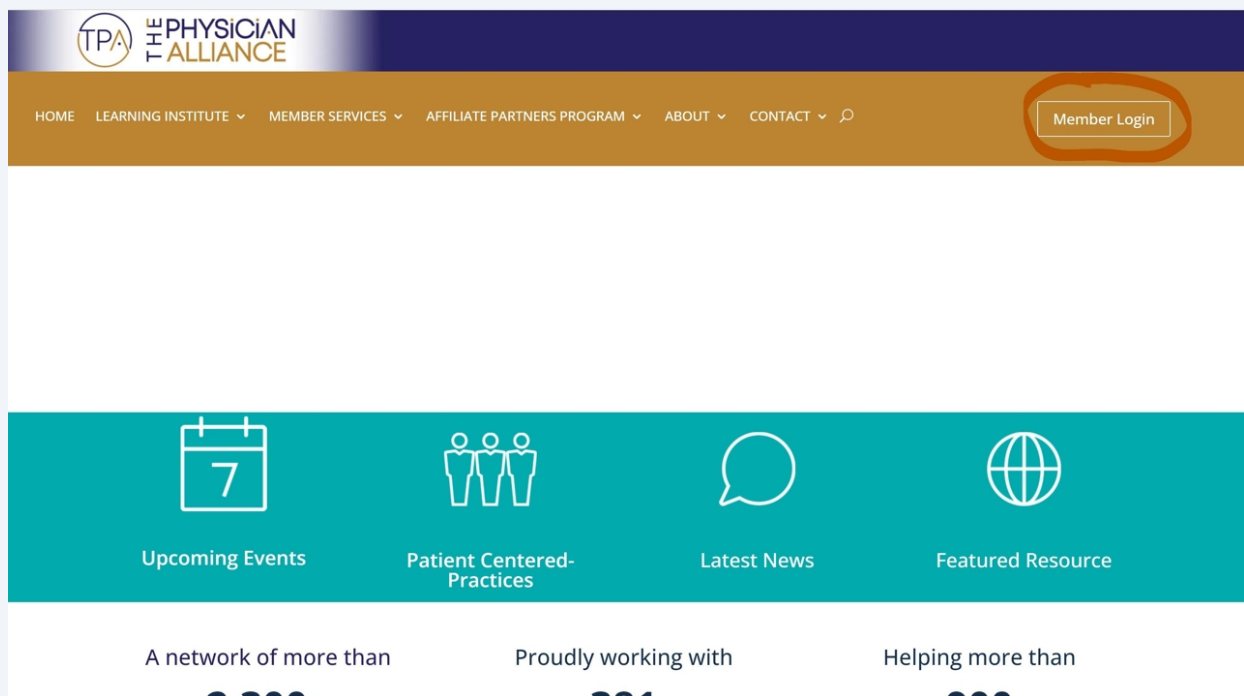
1

The Physician Alliance offers member practices the opportunity to provide support to patients who may benefit from community health services. Members can submit referral requests and TPA's community health worker will contact patients directly to try to help with their non-medical needs.

TPA members **MUST** be logged into the secure member portal to submit patient health information in the referral form.

2

Visit The Physician Alliance's website at TPAdocs.com. From any webpage, click the "Member Login" button to be directed to the secure member portal.



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Log into TPA's secure member portal. (Click "Forgot Username/Password" if you don't know your login information.)

TPA THE PHYSICIAN ALLIANCE

Welcome

Username *

Password

☐ Remember Username [Forgot Username/Password?](#)

By clicking login, you agree to our [Terms of Use Agreement](#) and [Privacy Policy](#). Please contact your practice resource team if you need to register to this portal.

Login

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The community health/SDOH referral form can be accessed from the portal homepage by clicking on the "Community Health Referrals" tile. (NOTE: Homepage content may vary based on practice level access.)

The Physician Alliance

Announcement

Education Events
Don't Miss These Education Events!
The fall is full of member only virtual events that help improve coding and protect your practice! Register today!
Viewed 2024
Click Here

Practice Resource
Community Health Services Flyer
Learn more about support for community health services provided to TPA members.
Viewed 2024
Click Here

Patient Resource
Community Health Referrals
Need help providing community resources to patients? Click below for the referral form.
Viewed 2024
Click Here

Newsletters
Newsletters & Information
Stay up to date on important program updates (reimbursement, coding, etc.), events, industry news and more.
Viewed 2024
Click Here

Marketing/Education

Coding Education
Coding Tip Sheets
Coding tip sheets, coding and...

Education
Upcoming Education Events
Upcoming education events listed...

Patient Care Resources
Social Media Graphics
Graphics for social media, websites and...

Patient Care Resources
Gaps In Care Toolkit
Resources help practice resources...

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OR the community health/SDOH referral form can be accessed from the portal homepage by clicking the "SDOH Referral" tab on the left side menu. (NOTE: Homepage content may vary based on practice level access.)

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Marketing/Education

Coding Education

Education

Patient Care Resources

Patient Care Resources

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Complete the required fields in the referral form. (NOTE: Please enter as much detail as possible for the referral reason (bottom of the form). This is very helpful in ensuring appropriate resources are referred to the patient.)

TPA THE PHYSICIAN ALLIANCE

Community health assistance referral form

To receive community health assistance for a patient, please complete this form with as much information as possible. Referral processing will take 2-3 business days. The Physician Alliance will follow up with your practice on the status of your referral after contact is attempted with the patient. Please note that TPA's community health assistance is available to TPA practices participating in BCBSM's Physician Group Incentive Program (PGIP).

Referring practice

Referral date:*

Practice name:*

Phone number:*

Name of referring person:*

Email address:*

Patient information

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When the form is completed, click "Save" to submit the form.

Once a referral form is submitted, TPA's community health worker will contact the patient regarding their need(s) within 2–3 business days. TPA will alert the practice via secure email about the patient contact and community resource provided. TPA will follow up with the patient one week after the initial contact to ensure they have been helped.

The screenshot shows a web application interface for 'The Physician Alliance'. On the left is a dark blue sidebar with a user profile icon at the top and a list of navigation links: Home, Reports, Request Update, Webinars, SDOH Referral (highlighted with an orange bar), GapPatients, Marketing, and Logs. The main content area has a white background. At the top, it says 'The Physician Alliance' with a hamburger menu icon. Below this is a form titled 'SDOH Referral'. The form contains several fields: a question 'Is patient receiving support from another organization?' with radio buttons for 'Yes' and 'No'; a dropdown menu for 'Patient's preferred contact method.'; another question 'Is patient veteran?' with radio buttons for 'Yes' and 'No' (where 'No' is selected); a section header 'Referral reason (select all that apply and explain reason for selection)' in an orange box; a list of checkboxes for 'Support with social determinants of health:' including Housing assistance, Food insecurity, Transportation, Community-based resources, Phone service, Employment | education, Caregiver support, Financial assistance, and Other assistance; a text area for 'Please briefly describe the reasons for the above selection(s)'; and a 'Save' button at the bottom right. A disclaimer is visible at the bottom of the form area.

The Physician Alliance

Is patient receiving support from another organization?* ☐ Yes ☐ No

Patient's preferred contact method. *

Is patient veteran?* ☐ Yes ☒ No

Referral reason (select all that apply and explain reason for selection)

Support with social determinants of health:*

☐ Housing assistance ☐ Food insecurity ☐ Transportation ☐ Community-based resources ☐ Phone service
☐ Employment | education ☐ Caregiver support ☐ Financial assistance ☐ Other assistance

Please briefly describe the reasons for the above selection(s):

Please briefly describe the reasons for the above selection(s)

Disclaimer:

I acknowledge that the distribution of this patient information is an extension of The Physician Alliance's (TPA) web-based services, and as such I agree to be bound by TPA's digital Terms of Use, accessible at <https://secure.tpareporting.org/terms-of-use> and incorporated by reference herein. I understand that TPA cannot ensure or guarantee confidentiality or security of any information transmitted electronically. I acknowledge that TPA shall not be held liable for any disclosure of confidential information or violation of HIPAA resulting from the use of the data on the portal.

Save