

Welcome

Subcontractor & SaaS User Guide 2024

A step-by-step guide to assist you with processing member DMEPOS orders received from Synapse Health.



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Logging into Fulfill – Welcome Email

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12/7/2023

Welcome Email



Fulfill Notifications <noreply@synapsehealth.com>
To Angela Murrell

(i) Click here to download pictures. To help protect your privacy, Outlook prevented automatic download of some pictures in this message.

Hi Angela Murrell,

Welcome to the Synapse Health Portal!

Here is the information you'll need in order to login for the first time:

- 1. Click here to access the portal
- 2. Your username is: angela.supplier
- On the login page, you'll click the link that says Reset My Password and a password reset link will be sent to the email address we have on file.
- 4. Our support team is here for you during the business hours of Monday through Friday 8:30am to 5pm CST. If you have any issues logging in or need further assistance, please contact our <u>help desk</u> and a team member will respond to you shortly. If you are emailing us after business hours, someone will respond to you on the next business day.

Let's get you logged in! In your welcome email, click on the link labeled "Click here." User will navigate to log-in page via <u>fulfill.synapsehealth.com</u> to begin the login flow.

For assistance, send an email to: dmeprovidersupport@synapsehealth.com

Logging into Fulfill First-Time User Reset Password

Log in	Forgot Password	Forgot Password
Vsername Forgot password Password	Enter your username to be sent instructions to reset your password. Username	Where would you like to receive your security code? Send me a code at saXX.sXXXX@sXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Sign In	← Back to log-in Submit →	<- Previous Next →
Forgot Password	Log in Forgot Password Enter your new password below.	Log in
Enter your security code Please check your email or mobile device for your security code and enter it bellow. Code	New Password Re-Enter Password Restore	Forgot Password
Click to resend code ← Previous Next →	Password Requirements: Minimum 8 characters Must contain at least one uppercase character Must contain at least one number Must nor repeat three characters next to one another Must contain at least one special character, such as ! @ \$ % 7.	Return to login

- 1. User navigates to log-in page via URL above.
- 2. User selects "Forgot Password."
- 3. User inputs username.
- 4. User is asked how they would like to receive security code.
 Options given are email or mobile device.
- 5. User collects security code from selected source.
- 6. User inputs security code.
- 7. User inputs new password.
- 8. User returns to log-in page to complete log-in with newly created password.

Logging into Fulfill Multi-Factor Authentication (MFA)



fulfill.synapsehealth.com

These are the steps of optimal log-in flow with multi-factor authentication (MFA) once the user has created their password.

Email Order Notification

Click Here to view additional order details.

DELIVERY #SO-

92AB613E

Patient

Demographic Information

FACILITY:

ZIP CODE: 21085

REQDATE: 1/30/2024

REQTIME:

Clinical Information

THIS PATIENT HAS BEEN DIAGNOSED WITH AN INFECTIOUS DISEASE: NO

When an order has been sent to your organization, be on the look out for a "Requires Acceptance" email to accept or reject an order. Ideally your team will be able to accept all orders received from Synapse Health & fulfill for the member/s.

Options to view order:

- 1. Click on the "Click Here" link in the email.
- 2. Log-in to Fulfill to view your order in "Pending Acceptance" order state.

Did You Know? By design, email notifications have limited information regarding the order. You can also see the products request beyond what's shown here.

View Your Orders

Priority =	ID	Ŧ	Patient Name	Ŧ	Туре	Ŧ	Referral	Ŧ	Status	Ŧ	Schedule Date	Ŧ	City =	= 8	State -	Ŧ	Zip Code	Ŧ
Urgent	SO-073167B0		Sato Alina		B				Pending Acceptance				Los Angeles	(CA		90001	
Normal	SO-2C33464F		Test Test		50				Pending Acceptance		03/28/2024		Brooklyn	ı	١Y		11201	
Urgent	SO-B97F7426		Sato Alina		5 0				Pending Acceptance		04/01/2024		Los Angeles	(CA		90001	
Normal	SO-567CFEE5		Islam Mamaev		*				Pending Acceptance		04/12/2024		Achilles	١	/A		23001	
Low	SO-5892DF32		Sato Alina		(1)				Pending Acceptance		04/17/2024		Los Angeles	(CA		90001	

Congrats on getting your account set up. View all orders that have been sent to you from Synapse Health on the main Order screen.

Tip: Call our DME Provider Line for Order Assistance at 888.801.9449.

View Order Details

Pending Acceptance	×
Access Code: Order ID: SO-D3A142EF	
✓ Accept	X Reject
Patient Information	
Jane Tester	Height:
DOB: 02/01/1960	Weight:
Delivery Address	
Street Address: 100 Locust St	State: IL
City: Evanston	Zip Code: 60201
Documents	

Quick Access! When you log into Fulfill to view your order, *click directly on the order ID* and it will populate the order. Review details & determine if you can adhere to the request.



Yes: Click "Accept" to accept the order. No: Reject the order by clicking "Reject," and add a reason why you do not want to accept the order.

> Tip: Ideally you will Accept or Reject the Order within 2 Hours of Receiving. For STAT orders, please accept within 1 hour.

Reject an Order

When selecting "Reject Order", you will be asked to verify you want to reject the order.

If yes, then please provide a note for why you are unable to fill the order. Then click "+Add."

The order status will update to show "DME rejected." Synapse Health will review the order & take next steps.

Tip: Rejecting an order means you cannot meet part, or all the requirements needed to fill an order (time constraint, type of item needed, back order). Reach out to the Synapse Health Fulfill Team for help by calling the DME Provider Line at 888.801.9449

Pending Acceptance		×
rder ID: SO-D3A142EF		
✓ Accept	X Reject	
Patient Information		
Jane Tester	Height:	
DOB: 02/01/1960	Weight:	
Delivery Address		
Street Address: 100 Locust St	State: IL	
City: Evanston	Zip Code: 60201	

Reject Reason	×
Туре here	
	+ Add Note

Add a Note

To add a note, scroll to the bottom of the order page:

- 1. Click on the "Add Note" button
- 2. In the pop up, enter note text
- 3. Click "Send Note"

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Tip: You can add notes to all order statuses and a chat with be sent to our Fulfill Team. Synapse Health will be able to communicate back to your order note.

Notes:

Sara Sortal (Admin) (10/31/2023 03:17 PM) GENERAL COMMENT Put in set-up link to zoom and time and date here - Synapse

Technician User (Technician)(10/31/2023 09:59 AM)Confirm facemask XYZ 123TECHNICIAN NOTE

 System User
 (System)
 (10/31/2023 08:20 AM)
 PRODUCT NOTE

 CPAP Device
 (E0601): Pressure cm/H20: 13
 PRODUCT NOTE

Delivery & Referral Packet Documents

- 1. Navigate to order
- 2. Scroll down to documents section
- 3. Upload by choosing "Upload file"
- 4. Download documents (if applicable) by clicking far right document....
- 5. Referral packets will appear with the order for review (immediately)
- 6. Delivery Packets will appear automatically in this section once the order is confirmed via the Delivery Portal.

Pending Order	✓ Mark Complete X
Access Code: FRTPDT Drder ID: SO-9D1D8A82	Schedule Date: 02/07/2024
Patient Information	
Jane Tester	Height: 0
DOB: 01/01/2000	Weight: 0
Delivery Address	
Street Address: 22 Test Way	State: IL
City: Glenview	Zip Code: 60025
Documents	
Supported for	坐 Upload file mats: .txt, .pdf, .jpeg, .jpg, .tiff, .tif

There are no documents attached to this order.

Product Information

Product	HCPCS	Qty	Units	Notes
Full Face Mask Cushion - 1 per mo	A7031	1	ea	P
Water Chamber - 1 per 6 mo	A7046	1	ea	P
Headgear - 1 per 6 mo	A7035	1	ea	P

Tracking Information/Shipments Only

For these orders that you will be mailing, your organization will need to add tracking information to the Fulfill order for SUBCONTRACTED ORDERS ONLY:

- Login and view the order details.
- Add a note that includes the carrier and tracking information provided once the order is "accepted" & has been shipped.

Pending Order Access Code: GUBYEA Order ID: SO-9DD5F3DF Patient Information Complete Order

Are you sure you want to mark this order complete? Please upload needed documentation at this time.



Proof of Delivery & Shipping Confirmations

For all subcontracted and SaaS orders, your organization will need to confirm shipment completion by marking the order complete directly on the Fulfill portal. Our Delivery Portal is only for the completion orders delivered via walk in, in person delivery or shipment/virtual set-up.

- Login to the Fulfill Portal and view the order details.
- Add a note to relay order details to Synapse Health. Once the order is "accepted" & has been completed with the member, you will mark Complete on the order.

Tip: Once you have proof of delivery, scroll down to "Documents" section to upload your document or picture. If Synapse Health has any questions regarding the order, they'll contact you.

Pending Order	Mark Complete
Access Code: GUBYEA	Schedule Date: 02/07/2024
Order ID: SO-9DD5F3DF	
Patient Information	
Jane Tester	Height: 0
DOB: 01/01/2000	Weight: 0
Delivery Address	
Street Address: 22 Test Way	State: IL
City: Glenview	Zip Code: 60025
Documents	
	🛃 Upload file
Supported for	mats: .bxtpdfjpegjpgtifftif

There are no documents attached to this order.

Product Information

Product	HCPCS	Qty	Units	Notes
Full Face Mask Cushion - 1 per mo	A7031	1	ea	P
Water Chamber - 1 per 6 mo	A7046	1	ea	P
Headgear - 1 per 6 mo	A7035	1	ea	0

Product Returns Process

- Returns occur within 14 days of delivery to the member
- Synapse Health will issue authorization & a pickup ticket (order) to you as the subcontractor through the Fulfill Portal
- Once product/s are received, within 5 business days you will notify Synapse Health of receipt & status on the condition of the product/s received.
 - Unused & in the Original Packaging (resale condition)

If product dispensed to a Patient is **returned to you** as the Subcontracted DME Provider for any reason, you will promptly inform Synapse Health of the return and provide any information you may have related to the return to assist Synapse Health in processing the rejection or return. The returned products will be credited pursuant to the expected division of reimbursement set forth in Exhibit C within your executed contract.

Product Returns Process

- Returned products due to your error, shall be returned to you at your expense. You will not receive any restocking or other charges from Synapse Health. Errors you organization is directly responsible for shall be limited in definition to:
 - The Merchandise delivered was defective.
 - Incorrect order quantity (over-shipment)
 - Unapproved substitution based on Supplier order record sent.
 - Duplicate order sent with no underlying duplicate Supplier order.
 - Product delivery date was delayed over five (5) business days from contiguous forty-eight (48) states, ten (10) business days outside contiguous forty-eight (48) states, and due to circumstances within your control.





Delivery Portal Workflow

The delivery portal is only utilized by organizations delivering DMEPOS on behalf of Synapse Health as a subcontracted partner.

- 1. In-Person Delivery
- 2. Member Walk-In
- 3. Virtual Set-Up for Sleep Program Members

Delivery Portal

For a seamless delivery or walk in experience, you can complete your order electronically while onsite with the patient for your subcontracted orders. In the Delivery Portal, enter the order Access Code and Patient Last Name. This information is inside the "View Order" page on the Fulfill Portal.

Share this link with your delivery and/or storefront personnel & bookmark it on your smart devices: <u>https://deliver.synapsehealth.com</u> Access Code

Patient Last Nar

Tester

	Pending Order Access Code: FRTPDT			Schedule	Complete	×
	Order ID: SO-9D1D8A82					
	Patient Information					
	Jane Tester	H	eight: 0			
	DOB: 01/01/2000	W	/eight: 0			
	Delivery Address					
	Street Address: 22 Test Way	St	tate: IL			
	City: Glenview	Zi	ip Code: 6	0025		
	Documents					
Synapse	Suppor	Uploa Uploa	id file Ifjpegjpg	.tiff, .tif		
Delivery Portal	There are no documents attach	ied to this orde	er.			
	Product Information					
	Product	HCPCS	Qty U	Jnits	N	otes
	Full Face Mask Cushion - 1 per mo	A7031	1 e	a		P
	Water Chamber - 1 per 6 mo	A7046	1 e	a		P
me	Headgear - 1 per 6 mo	A7035	1 е	a		P
Start						
otart						

Delivery Portal

You will see the items the patient will need to receive along with the ability to access the order notes containing any additional order information.

You will want to be sure to capture the serial # of any device applicable and review notes for not only the information you'll need but for documenting information for Synapse Health such as a patient Pin #, Device Manufacturer and/or Model information.

Tip: Notes could include Mask details, settings and other valuable information for the member.

): (synapse			3) @	888) 801-9449 Leave Order ⊋
Order Deta	ls	2 Document Preview —	3 Sign Document	Review
Order Details				
Order Details Order Number: SO-9D1D8A Patient: Tester, Jane Address: 22 Test Way, Glenvi Contact: Jane Tester (333) 333-3333	32 ew, IL 60025			☐ Notes
Order Products				
CPAP Device (E0601)	Serial/Lot No.	Manufacturer	ModelNo. PIN	No. Qty: 1 📮
Heated Humidifier - 1 per 5 yrs	Serial/Lot No.	Manufacturer	Model No.	Qty: 1 🕞
Full Face Mask Cushion - 1 per mo				Qty: 1 🕞

Water Chamber - 1 per 6 mo

Qty: 1 🕞

Notes



Tip: You will want to be sure to capture the serial #, manufacturer, model # and patient pin # during order completion in the designated product level fields where applicable. Order notes for products will also be found at the line-item level.



Order notes

Synapse Health: (11/08/2023 01:51 PM) https://viemed.zoom.us/j/863658? pwd=zWDyNZQan70JmDJoFm Passcode: 694013

Synapse Health: (11/08/2023 01:51 PM) Confirm facemask MODEL/SIZE

Synapse Health: (11/08/2023 01:51 PM) CPAP Device (E0601): Pressure cm/H20: 12

+ Add Note

X

Delivery Portal

During the delivery/setup process, view and sign the required documents. This process is to confirm that the patient has received the Durable Medical Equipment and/or supplies from your organization and the order is now completed with the patient. You will go page by page and answer any questions. Your setup personnel will sign the document with their information and the member/patient will also sign.

Click on "Next" to Proceed to the final confirmation page for the order.



Delivery Portal

After documentation has been completed and you click on Next, you will be taking to a final page to review the order Information.

You will want to be sure to capture the serial # at the product level and add the manufacturer, model # and patient pin # for each device in the notes during order completion. Where applicable.

If the information appears correctly, click on Submit to complete the delivery order.

Tip: Feel free to add any additional notes on the order before submitting. These notes can be viewed by Synapse Health.

•		-				
Order Details		Document Preview -	Sign Document		Review	
leview						
Order Details Order Number: SO-9DIDB/ Patient: Tester, Jane Address: 22 Test Way, Glenv Contact: Jane Tester	482 view, IL 60025	Notes	Signatures: Recipient	<	@	
(333) 333 - 3333 Order Products						
CPAP Device (ED601)	Serial/Lot No. 23444	Menufacturer Luna	Model No. G3	PINNa. 33	Qty: 1 📮	
Heated Humidifier - 1 per 5 yrs	Serial/Lot No. 23445	Henufactu Luna	ter	Model No. G3	Qty: 1 🗔	
Full Face Mask Cushion - 1 per mo	D				Qty: 1 🗔	
Water Chamber - 1 per 6 mo					Qty: 1 🗔	
Headgear - 1 per 6 mo					Qty: 1 🗔	
Disposable Filters - 2 per mo					Qty: 2 🕞	
Heated Tubing - 1 per 3 mo					Qty: 1 🗔	
Full Face - 1 every 3 mo					Qty: 1 🗔	
					8 of 8 products	

General Information

- Best Practices
- Have a Question?
- Partner Contact Grid

When in doubt, refer to your **DME Provider Handbook** for assistance.

Best Practices

As a Subcontracted & Referral SaaS DME provider, **best practices** are as follows:

- In the event your organization accepts an order and needs to cancel the order or make a request for a change, the vendor must immediately contact the DME Provider Line at 888.801.9449 to advise that the order number cannot be fulfilled. The Fulfill Team member will log the reason for the cancellation or assist with revision.
- Report emergency closures of a location immediately to 888.801.9449.
- Provide high quality, compassionate care to patients.
- Effectively and respectfully respond to member's/patients' linguistic, cultural, and other unique needs.
- Do not differentiate or discriminate in providing DME services because of race, ethnicity, color, national origin, age, religion, English proficiency, sex, including, sexual orientation & gender identity, health status, source of payment, cost of treatment, participation in a particular Health Plan customer's benefit agreement, mental or physical disability, or genetic information.
- Submit written notice to Synapse Health within thirty (30) calendar days of any changes in your organization.

Best Practices

As a Subcontracted & Referral SaaS DME vendor, **performance standards** for DME Orders & Delivery_are as follows:

- Order Notification Response Time: The vendor will identify and register the users that will access Fulfill during the Onboard Training process. These users will receive notification of orders, via email, when an order is available for review. Vendors are responsible for ensuring an adequate number of staff are available to monitor email boxes and Fulfill portal for order notifications.
- Standard Orders: Vendors are required to access Fulfill and respond by accepting or rejecting the order within two (2) hours of the email notification.

Member Complaints Feedback

If you receive any **member complaints**, please forward to Synapse Health Compliance Hotline within 24 hours of receipt.

Toll Free:

1.833.609.5224

To report a concern online:

www.synapsehealth.ethicspoint.com

Have a Question?

- Fulfill Order Related Fulfillment Issues or Questions: Call our DME Provider Line at 888.801.9449. This line routes directly to our Customer Connect Center and they will get you directly to the Fulfillment team during business hours 8am-8pm Eastern. After hours, this line will route initially to our answering service if selecting same day delivery. You will then be dispatched to an on-call employee. You can also add a Note to an order or send an Email to fulfill@synapsehealth.com.
- General Questions: Reference your DME Provider Handbook first, then email your account manager for assistance at <u>dmeprovidernetwork@synapsehealth.com</u> and our team will respond to your inquiry within 1 business day.
- User Access Assistance: Email <u>dmeprovidersupport@synapsehealth.com</u> and our team will respond to your inquiry within 1 business day.