Provider Healthcare Portal Registration FAQs

These are some of the questions the Indiana Health Coverage Programs (IHCP) is asked most frequently about registering for the new Provider Healthcare Portal (Portal). For detailed information on registering for the Portal, see IHCP *Core*MMIS *Bulletin* <u>BT201661</u>. Visit the <u>Provider Healthcare Portal Training</u> page at indianamedicaid.com for training on the Portal registration process.

What is the timeline for Portal registration?

The Portal became available for provider registration on October 11, 2016, and will remain open moving forward. Providers are encouraged to register on the Portal before *Core*MMIS implementation to avoid interruptions in business transactions.

Do all users need to register and, if so, can we upload our user information from Web interChange? Can we still use the paper request forms?

All users must register for the Portal online; no paper registration process is available. Online registration offers security advantages over a paper process. Users cannot upload registration information from Web interChange; the two systems do not interface.

How can we get a list of all our users on Web interChange?

Your Web interChange Administrator can view the Group Report on Web interChange to see a list of current users.

Can more than one person sign up delegates for a service location?

No, each service location has only one provider account representative. That representative registers a *Provider* account for the service location and designates the delegates that can work on behalf of that service location as well as their functions. After they have been authorized, delegates register their own accounts on the Portal for that service location.

Our registered delegates don't see the options to search for eligibility, claims, and so on, on the top toolbar. Why not?

These functions will not be available until the implementation of the new *Core*MMIS. Until then, users can log into the Portal but will only have access to My Profile.

Are the last four digits of my driver's license number validated in any way?

No, we do not validate or check the last four digits of the driver's license number. This number is used as a unique identifier for each user. Delegates must remember the identifier they enter in this field.

When a provider account representative authorizes a delegate, does the delegate receive an email with his or her username? Do I then provide the delegate with the delegate code?

The provider account representative receives the delegate code at the time the delegate is authorized in the *Provider* account. The representative must give the delegate code to the user for his or her use in registering a *Delegate* account.

How do we remove delegates if they leave our organization?

Delegates are not actually removed; they are marked inactive. If a delegate leaves an organization, it is the responsibility of the provider account representative to make that delegate inactive in each *Provider* account where he or she is no longer an authorized user. Delegates can be marked inactive on the *Manage Accounts* page. Select the individual delegate and change the delegate's status from Active to Inactive.

If I'm a provider who does my own billing, do I need to create a delegate?

Providers who do all of their own billing and file maintenance work do not have to create delegates.

Will my account be locked if I enter the wrong password?

If you type your password incorrectly five times, you will be locked out of your Portal account for 60 minutes. After 60 minutes, you can log in by entering the correct password. If you do not remember the correct password, you can click the Forgot Password link and you will be prompted to change your password.

Can I use previous passwords when choosing a new password?

You will not be able to reuse any of your most recent 24 passwords.

What is the timeout period for inactivity on the Portal?

Your user session will time out after 30 minutes of inactivity. You will get five minutes of warning before your session times out. The warning message dialog box allows you to extend your session.

I'm entering the federal taxpayer identification number (TIN) and Provider ID, but I'm getting an error saying that the data does not match. What should I do?

Ensure that you are entering your Provider ID (previously called a Legacy ID or LPI), which is nine digits with an alpha character location code. The location code must be uppercase. A National Provider Identifier (NPI) is not the same as a Provider ID.

I'm getting an error message stating that the federal TIN or Provider ID I entered is incorrect. What should I do?

If the federal TIN in *Core*MMIS is different from what you are entering, check with your credentialing personnel to confirm which TIN is correct. If the TIN truly is different from what is currently on file with the IHCP, send a completed *IHCP Provider Taxpayer Identification Number Maintenance Form* to the IHCP so we can update our records. The form is available at indianamedicaid.com on the *Update Your Provider Profile* web page.

What should I do if I've entered a wrong email address and cannot get the email containing the link to verify registration?

Contact the Electronic Solutions Help Desk at 877-877-5182, option 2. The help desk can resend the registration verification email to an alternate email address. When you log in, you can update your email address.

What should I do if I've entered a user ID, entered an answer to the challenge question, and gotten a message that the answer to the challenge question is incorrect?

Go back to the log-in screen and verify that you are entering the correct user ID.

Rendering providers do not have federal identification numbers. What do we use as an identifier when registering on the Portal?

Rendering providers should use their Social Security numbers.

When I created delegates as part of Portal registration, I was asked to assign functions to each of my delegates. How do I know which functions to assign to my delegates? Where can delegates go to get training?

The Portal includes a list of checkboxes of delegate functions. You should select as many functions as you want that delegate to be authorized to perform. (You must select at least one.) The following table describes what each of the listed functions enables delegates to do. The recommended training presentations are on the <u>Provider Healthcare Portal Training</u> page at indianamedicaid.com.

Delegate Function	Description	Recommended Training
Care Management – Submit Resubmit Authorization	Ability to submit and resubmit a provider's prior authorization (PA) requests	 Provider Healthcare Portal Overview for Provider Delegates Provider Healthcare Portal: Prior Authorization
Care Management – View Authorization	Ability to view a provider's submitted PA requests	 Provider Healthcare Portal Overview for Provider Delegates Provider Healthcare Portal: Prior Authorization
Claim – Inquiry	Ability to search for a provider's submitted claims	 Provider Healthcare Portal Overview for Provider Delegates
		 Also, as appropriate: Provider Healthcare Portal: Dental Claims Provider Healthcare Portal: Professional Claims Provider Healthcare Portal: Institutional Claims
Claim – Submit and Resubmit	Ability to submit and resubmit a provider's claims	 Provider Healthcare Portal Overview for Provider Delegates Also, as appropriate: Provider Healthcare Portal:

Delegate Function	Description	Recommended Training
		 Provider Healthcare Portal: Professional Claims Provider Healthcare Portal: Institutional Claims
Disenroll	Ability to remove rendering providers from a group service location or voluntarily disenroll a provider from the IHCP	 Provider Healthcare Portal Overview for Provider Delegates Provider Healthcare Portal: Online Enrollment
MAPIR	Ability to view the provider's identification information, view general electronic health records (EHR) information, and launch the Medical Assistance Provider Incentive Repository (MAPIR) application	 Provider Healthcare Portal Overview for Provider Delegates
Member Focus Viewing	Ability to view eligibility data, recent claims, and prior authorizations for a specified member; information that can be viewed is dependent on the other authorized functions of the delegate	Provider Healthcare Portal Overview for Provider Delegates
Notification of Pregnancy Inquiry	Ability to search for and view a Notification of Pregnancy (NOP) submitted on a member's behalf	 Provider Healthcare Portal Overview for Provider Delegates Provider Healthcare Portal: Viewing Member Eligibility
Payment History – Inquiry	Ability to search for and view payments and RAs	 Provider Healthcare Portal Overview for Provider Delegates Provider Healthcare Portal: Payments and Remittance Advice (RA)

Delegate Function	Description	Recommended Training
Provider Maintenance	Ability to update provider information, including but not limited to taxpayer identification number (TIN), contact information, address, specialty, electronic funds transfer (EFT) information, languages, the provider's legal name, taxonomy, and licenses. Ability to sign up for electronic Remittance Advices (RAs)	 Provider Healthcare Portal Overview for Provider Delegates Provider Healthcare Portal: Online Enrollment
Revalidation	Ability to submit revalidation information for a provider's enrollment	 Provider Healthcare Portal Overview for Provider Delegates Provider Healthcare Portal: Online Enrollment
Secure Correspondence	Ability to use the secure correspondence messaging function to quickly communicate with HPE instead of using unsecure email	 Provider Healthcare Portal Overview for Provider Delegates Provider Healthcare Portal: Submitting Secure Correspondence
Submit RCP Referral to Lock-In List	Ability to submit RCP referrals to add a provider to a member's lock-in list	 Provider Healthcare Portal Overview for Provider Delegates Provider Healthcare Portal: Right Choices Program (RCP) Member Management for Health Plans
Verify Eligibility	Ability to verify a member's eligibility for service by a provider for a specific date or date range Ability to submit an NOP on behalf of a member (applies only to delegates of certain provider types) Ability to submit presumptive eligibility applications (applies only to delegates of PE Qualified Providers)	 Provider Healthcare Portal Overview for Provider Delegates Provider Healthcare Portal: Viewing Member Eligibility