



# Secure Provider Portal Overview for HOP Human Service Organizations

December 2023

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# Provider Portal Registration & Login

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# Identify Portal Account Manager

1. Identify the Portal Account Manager within your practice/department/team
2. Create a new account [provider.carolinacompletehealth.com](https://provider.carolinacompletehealth.com)

# Portal Registration: [provider.carolinacompletehealth.com](https://provider.carolinacompletehealth.com)

Tip: add [no-reply@mail.entrykeyid.com](mailto:no-reply@mail.entrykeyid.com) to your email contacts

## Log In

Username (Email)

LOG IN

Create New Account



[Help](#) [Privacy Policy](#) [Terms of Use](#) © 2021 Centene



## Create Your Account

Let's get started - creating an account is quick and easy.

Email

First Name

Last Name

Language Preference

Password

Passwords must be at least 8 characters and include three of the four items below:

- One uppercase letter
- One lowercase letter
- One number
- One special character (For example: &, \$, !, \*)

CREATE ACCOUNT

CANCEL

# Verify Email

- Receive the email from EntryKeyID
- Verify your email address
- Once this step is complete, email Jane Kinlaw, Provider Engagement Supervisor ([jkinlaw@cch-network.com](mailto:jkinlaw@cch-network.com)) to establish the first account manager for your TIN by requesting portal validation and Account Manager status.

# Portal Login

## Log In

Username (Email)

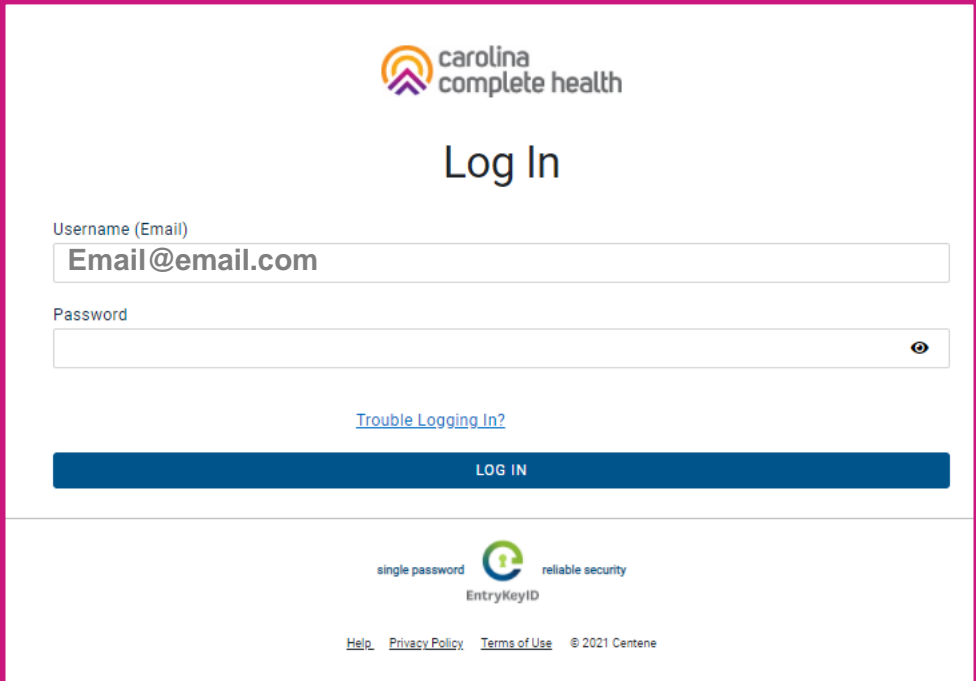
Email@email.com

LOG IN

[Create New Account](#)

single password  reliable security  
EntryKeyID

[Help](#) [Privacy Policy](#) [Terms of Use](#) © 2021 Centene



The detailed view of the login page shows the following elements:

- Carolina Complete Health logo at the top right.
- Large "Log In" heading in the center.
- Username (Email) field containing "Email@email.com".
- Password field with a toggle icon on the right.
- [Trouble Logging In?](#) link below the password field.
- Dark blue "LOG IN" button.
- Footer containing "single password", "EntryKeyID" logo, and "reliable security".
- Bottom footer with links: [Help](#), [Privacy Policy](#), [Terms of Use](#), and © 2021 Centene.

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# Portal Account Manager

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# Portal Account Manager

- A Portal Account Manager is a role assigned to a primary contact within a provider organization
- **The Account Manager is responsible for the day-to-day support of all Secure Provider Portal user accounts that are registered under the same TIN**
- HOP HSOs may email Jane Kinlaw, Provider Engagement Supervisor ([jkinlaw@cch-network.com](mailto:jkinlaw@cch-network.com)) to establish the first account manager.



# Portal User Management: User Access

## Admin Settings

Add and manage user access and information.

+ 👤  
**Add User**

✎  
**Edit User Access**

👥  
**Add a TIN**

### Search for User

Email:  Last Name:  Status:

Verification Pending

**Go!** **Clear**

### Invite a User

Email Address:

**Send Invitation**

[Account Manager User Guide](#)

					Active	Account Manager Access	
					PasswordExpired		
					Active	Account Manager Access	
					PasswordExpired		
					Active		

24 items found, displaying 1 to 10. Page 1/3 [1,2,3](#) [Next](#) [Last](#)

# Portal Account Manager Tips

- Each TIN should have at least two Account Managers
  - For large organizations, it is recommended to have at least two Account Managers per department.
  - There is no limit on the number of Account Managers allowed under a TIN
- Account Managers should *regularly* log into the portal to:
  - Verify new portal registrations
  - Send password reset email to users whose portal account is locked due to inactivity
  - Disable / Enable a user's portal access
  - Modify portal permissions based on the user's role within your organization
- Account Managers **cannot** manage their own portal account



**Tip:** Always disable portal users, who no longer need portal access, especially when they leave your company.

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# Portal Functionality: Search for Members


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# Quick Eligibility Check

## Quick Actions

Do a quick eligibility check, find patient benefits information, create a new claim or recurring claim or an authorization.

**1** Member ID or Last Name \*

**2** Member Date of Birth    
MM/DD/YYYY

**3** Select Action Type \*

**SUBMIT**

- View Eligibility & Patient Information
- Create New Claim
- Create Recurring Claim
- Create Authorization

## Claims Overview

Shows claims for the last 30 days from today's date.

REJECTED	DENIED	PENDING
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# Portal Functionality: Claims

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# Claims

Providers are able to use the portal to:

- Access up to 24 months of claims-related history

# Patient Overview – Claims

Back to Eligibility Check

Overview

Cost Sharing

Assessments

Health Record

Care Plan

Authorizations

Referrals

Coordination of Benefits

**Claims**

Document Resource Center

Notes

### Claims: Recent

The last one month of claims for this member are displayed below. To view more claims for this member, [visit the Claims page](#).

Show claims for    [View most recent month](#)

CLAIM NO. ↑	REF/ACCT NO. ↑	DOS RANGE ↑	PAYMENT DATE ↑	RECEIVED DATE ↑	BILLED/PAID ↑	STATUS ↑
<a href="#">T148</a>		05/22/2020 - 05/22/2020	06/04/2020	05/27/2020	\$643.00 / \$1	PAID
<a href="#">T150</a>		05/22/2020 - 05/22/2020	06/04/2020	05/29/2020	\$75.00 / \$2	PAID
<a href="#">T153</a>		05/22/2020 - 05/22/2020		06/01/2020	\$145.00 / \$9	PAID

3 items found, displaying all items. Page 1/1 1

Click **Claim Number**, to view the claims details

Not applicable for HOP claims

# Accessing Claims

To access all claim-related information, click **Claims** in the portal toolbar.

Under Claims Overview, to access claims in the associated status count, click **View All**.

The screenshot displays the Claims portal interface. At the top, a navigation bar includes links for Manage Practice, Eligibility, Patients, Authorizations, **Claims** (highlighted with a red box), Messaging, and Help. Below the navigation bar, there are dropdown menus for TIN and Plan Type (Medicaid) with a GO button. The main content area features two announcement boxes: 'Explanation of Payments Issues' and 'Integration of InterQual Connect'. A 'Welcome, [redacted]!' message is followed by a link to claim summaries. The 'Admin Settings' section includes buttons for 'Add User', 'Edit User Access', and 'Add a TIN'. The 'Quick Actions' section contains a form with fields for Member ID or Last Name, Member Date of Birth (MM/DD/YYYY), and a dropdown for Select Action Type, with a SUBMIT button. The 'Claims Overview' section shows three status counts: REJECTED (0), DENIED (3), and PENDING (11). Each count has a 'View All' button highlighted with a red box.

Status	Count	Action
REJECTED	0	<a href="#">View All</a>
DENIED	3	<a href="#">View All</a>
PENDING	11	<a href="#">View All</a>



# Claims Dashboard

The screenshot displays the Claims Dashboard interface. At the top, there is a navigation bar with icons for Eligibility, Patients, Authorizations, Claims, Messaging, and Help. Below this, a filter section shows 'Viewing Claims For: TIN' and 'Plan Type: Medicaid' with a 'GO' button. The main content area is titled 'Claims' and includes a date range selector (From: 01/19/2023, To: 02/18/2023) and a 'CHANGE DATES' button. Three summary tiles are shown: REJECTED (0), DENIED (125), and PENDING (656), each with a 'View All' link. Below these is a 'Search for Claims' section with an 'ADVANCED SEARCH' link and a note about data availability. It features two search options: 'Check Status by Claim Number' and 'Search by Member Info'. The 'Create Claims' section offers options to 'Start a CMS 1500 / Professional or CMS UB-04 / Institutional Claim' and 'Upload EDI / Batch', along with a 'DRAFT CLAIMS' tile (0). The 'Manage Finances' section includes an 'Explanation of Payment (EOP)' link, 'Reports & Tools' (Batch Claims Report, Claim Audit Tool), and a 'PAID CLAIMS' tile (672). The 'Resources' section lists links for 'Updated Instruction Manual (PDF)', 'EDI Guide (PDF)', 'CMS-1500 Claim Form (PDF)', and 'CMS-UB-04 Claim Form'. A footer contains links for 'Instruction Manual (PDF)', 'Terms and Conditions', 'Privacy Policy', and 'Copyright © 2023, Centene Corporation'.

- The new Claims Dashboard provides an easy view and access to claims / claims-related information:
  - Claims Tiles by status
  - Claim Search options
  - Claim Submission Methods
  - Managing Finances (i.e., EOPs, Paid Claims, etc.)
  - Claim Audit Tool, *where available*
  - Resources

# Claims Dashboard – Change Dates Calendar Options

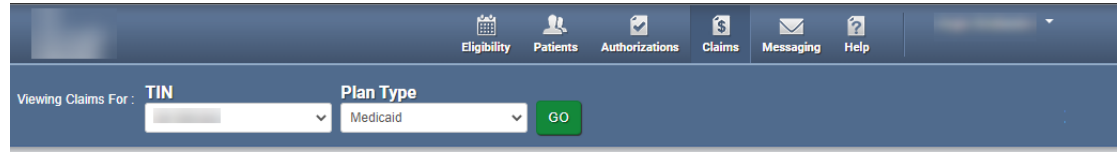
There are two ways to change the date range.

## Manually

1. Type desired date range in **From** and **To** fields.
2. Click **CHANGE DATES**. The page will refresh to display Rejected, Denied, and Pending counts for the new date range.

## Calendar Pop-Up

1. Click Calendar icon. The calendar pop-up displays.
2. Use the arrows to view and select desired date in **From** and **To** fields.
3. Click **CHANGE DATES**. The page will refresh to display Rejected, Denied, and Pending counts for the new date range.



## Claims

From: 10/09/2022  To: 11/08/2022  [CHANGE DATES](#)

MM/DD/YYYY MM/DD/YYYY

October 2022

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

DENIED 44

[View All](#)

2012	2013	2014	2015
2016	2017	2018	2019
2020	2021	2022	2023
2024	2025	2026	2027
2028	2029	2030	2031



## Tips:

- Portal users can access up to 24 months of claim history. The key is the first DOS in the claim must be within the last 24 months from the current date.
- Date Range is limited to a 30-day span at a time.

# Claims Dashboard – Search for Claims

The screenshot displays the Claims Dashboard interface. At the top, there are navigation tabs for Eligibility, Patients, Authorizations, Claims, Messaging, and Help. Below this, a header section shows 'Viewing Claims For: TIN' and 'Plan Type: Medicaid'. The main content area is titled 'Claims' and includes a date range selector (From: 01/19/2023, To: 02/18/2023) and a 'CHANGE DATES' button. Three summary cards are shown: REJECTED (0), DENIED (125), and PENDING (656), each with a 'View All' link. A red box highlights the 'Search for Claims' section, which includes an 'ADVANCED SEARCH' link and a note about search limitations. Below this, there are two search options: 'Check Status by Claim Number' with a 'CHECK' button, and 'Search by Member Info' with fields for 'Enter Last Name or Member ID' and 'Date of Birth' (mm/dd/yyyy) and a 'SEARCH' button. The dashboard also features sections for 'Create Claims' (with links for CMS forms and EDI/Batch upload, and a 'DRAFT CLAIMS' card showing 0), 'Manage Finances' (with links for EOP, Reports & Tools, and a 'PAID CLAIMS' card showing 672), and 'Resources' (with links to various PDF guides and forms). The footer contains links for the Instruction Manual, Terms and Conditions, Privacy Policy, and Copyright information for Centene Corporation.

- Claims search options from the claims dashboard.
- Portal users can search up to 10 claims at once, by adding a comma, after each Claim Number, but no space following the comma(s).
- Search button, replaced with a hyperlink, and renamed Advanced Search.

# Claims Dashboard – Claims Search Options

In the portal, there are three ways to search for claims:

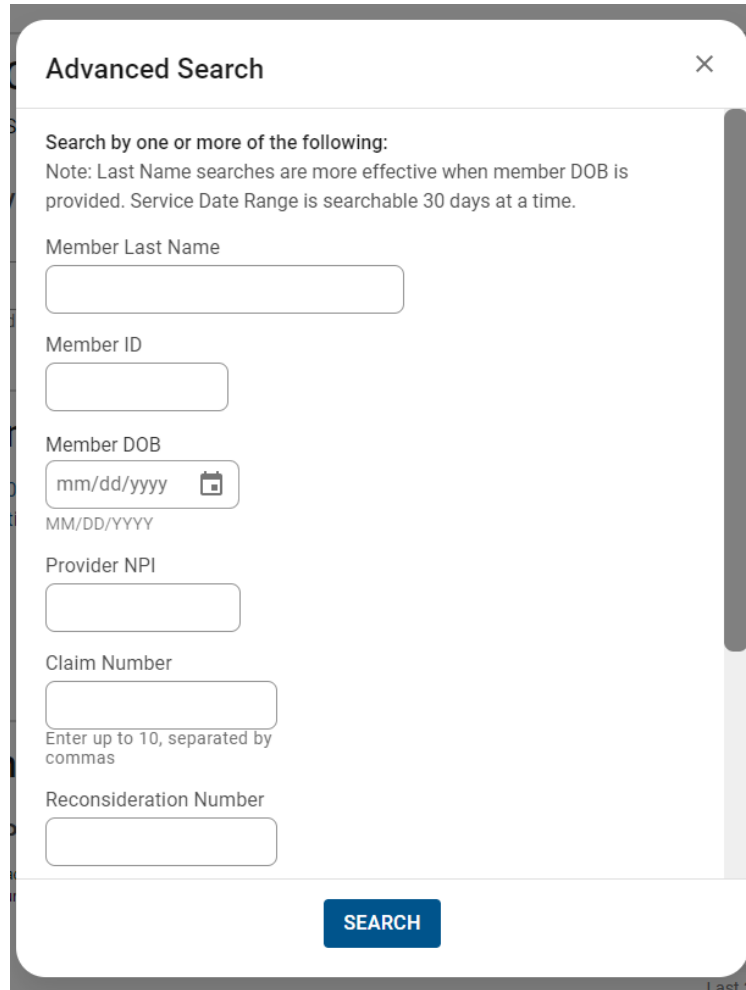
1. Complete the **Check Status by Claim Number**
2. Complete the **Search by Member Info**, or
3. Use the **Advanced Search**

The screenshot displays the Claims Dashboard interface. At the top, there is a navigation bar with icons for Eligibility, Patients, Authorizations, Claims, Messaging, and Help, along with a user profile for Bruce Provider. Below the navigation bar, there are filters for 'Viewing Claims For:' with a TIN dropdown set to '12345678' and a Plan Type dropdown set to 'Iowa Total Care', followed by a green 'GO' button. The main section is titled 'Claims' and shows date filters for 'From' (03/29/2022) and 'To' (04/28/2022) with a 'CHANGE DATES' button. Below this, three summary cards are shown: 'REJECTED' with 08 claims, 'DENIED' with 23 claims, and 'PENDING' with 58 claims, each with a 'View All' link. At the bottom, there are three search options: 'Search for Claims' (highlighted with a red box) which includes a 'Check Status by Claim Number' section with an input field and a 'CHECK' button; 'Search by Member Info' (highlighted with a red box) which includes input fields for 'Last Name or Member ID' and 'Date of Birth' with a 'SEARCH' button; and 'ADVANCED SEARCH' (highlighted with a red box).



**Tip:** In the Check Status by Claim Number, enter up to 10 Claim Numbers separated by commas, but no spaces. For example, you would enter V290XXP00010,V300XXE07468,V305XXE01234 (no space after the comma and upper-case letters).

# Claims Dashboard – Advanced Search




**Advanced Search** ×

Search by one or more of the following:  
Note: Last Name searches are more effective when member DOB is provided. Service Date Range is searchable 30 days at a time.

Member Last Name

Member ID

Member DOB  
   
MM/DD/YYYY

Provider NPI

Claim Number  
  
Enter up to 10, separated by commas

Reconsideration Number

**SEARCH**

- Search pop-up renamed “Advanced Search”.
- Right scrollbar added, to view available options.
- Can search up to 10 Claim Numbers by separating them by a comma, but no spaces.
- Portal users can search by Total Charged Amount.
- Field errors provide data and/or format guidance.

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# Portal Functionality: View EOP

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# Claims Dashboard – Manage Finances

The screenshot displays the Claims Dashboard interface. At the top, there is a navigation bar with icons for Eligibility, Patients, Authorizations, Claims, Messaging, and Help. Below this, a header section allows filtering claims by TIN and Plan Type (Medicaid). The main content area is divided into several sections:

- Claims:** A summary section showing the number of claims in different statuses: REJECTED (0), DENIED (125), and PENDING (656). Each status has a 'View All' link. A note indicates that this view shows claims for the last 30 days.
- Search for Claims:** A section with an 'ADVANCED SEARCH' link. It includes a 'Check Status by Claim Number' field and a 'Search by Member Info' field with sub-fields for 'Enter Last Name or Member ID' and 'Date of Birth'. A 'CHECK' button is next to the claim number field, and a 'SEARCH' button is next to the member info fields.
- Create Claims:** A section with links for 'Start a CMS 1500 / Professional or CMS UB-04 / Institutional Claim' and 'Upload EDI / Batch'. It also shows 'DRAFT CLAIMS' (0) with a 'View All' link.
- Manage Finances:** A section highlighted with a red border. It includes 'Explanation of Payment (EOP)' with a 'View all EOP' link, 'Reports & Tools' with links for 'Batch Claims Report' and 'Claim Audit Tool', and 'PAID CLAIMS' (672) with a 'View All' link. A note indicates that this view shows claims for the last 30 days.
- Resources:** A section with links to 'Updated Instruction Manual (PDF)', 'EDI Guide (PDF)', 'CMS-1500 Claim Form (PDF)', and 'CMS-UB-04 Claim Form'.

At the bottom of the page, there is a footer with links for 'Instruction Manual (PDF)', 'Terms and Conditions', 'Privacy Policy', and 'Copyright © 2023, Centene Corporation'.

- Click Claims at the top of the page
- From Claims Dashboard, scroll to 'Manage Finances'
- "View all EOPs" links to existing Payment History tab and information
- Batch Claims Reports link provides quick access to EDI Response Report (i.e., 999, TA1, etc.).
- Claim Audit Tool (*where available*) changed from a tab to a link.

# Claims Dashboard – Manage Finances

**Claims** ☰ Individual Saved Submitted Batch Recurring **Payment History** Claims Audit Tool 🔍 Filter

## Transactions

All activity posted to your account between 09/03/2023 and 10/03/2023 .

**i** **Instructions:** Click a Check Date link to view the payment details from your payment provider. Only available electronic files are linked. The PDF opens in a new window. You can save or print the document. If there are any discrepancies about your payment details, contact Provider Services.

CHECK DATE ↑	CHECK NUMBER ↓	CHECK CLEAR DATE ↓	MAILING ADDRESS ↓	PAYMENT AMOUNT ↓
<a href="#">09/06/2023</a> (PDF)				
<a href="#">09/19/2023</a> (PDF)				
<a href="#">10/03/2023</a> (PDF)				

3 items found, displaying all items. Page 1/1 1