



Secure Provider Portal Overview for HOP Human Service Organizations

December 2023

Provider Portal Registration & Login

Identify Portal Account Manager

1. Identify the Portal Account Manager within your practice/department/team
2. Create a new account provider.carolinacompletehealth.com

Portal Registration: provider.carolinacompletehealth.com

Tip: add no-reply@mail.entrykeyid.com to your email contacts

Log In

Username (Email)

LOG IN

Create New Account



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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) to establish the first account manager for your TIN by requesting portal validation and Account Manager status.

Portal Login

Log In

Username (Email)

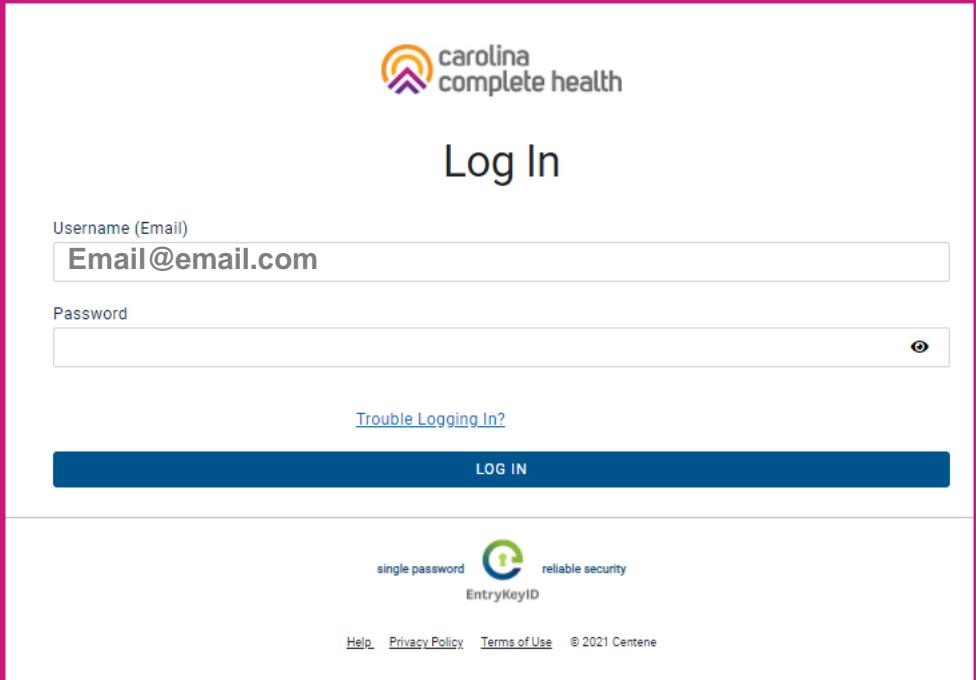
Email@email.com

LOG IN

[Create New Account](#)

single password  reliable security
EntryKeyID

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The screenshot shows the Carolina Complete Health login interface. At the top right is the logo for Carolina Complete Health. Below it is the heading "Log In". There are two input fields: "Username (Email)" containing "Email@email.com" and "Password" which is currently empty. To the right of the password field is an eye icon for toggling visibility. Below the password field is a blue link that says "Trouble Logging In?". At the bottom of the form is a blue "LOG IN" button. Below the form, there is a section for "single password" and "reliable security" with the "EntryKeyID" logo. At the very bottom, there are links for "Help", "Privacy Policy", and "Terms of Use", followed by the copyright notice "© 2021 Centene".

Portal Account Manager

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) 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.

Portal Functionality: Search for Members


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



3 Select Action Type *

Select

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

SUBMIT

Claims Overview

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

REJECTED	DENIED	PENDING
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Portal Functionality: Claims

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 2020 June GO [View most recent month](#)

CLAIM NO. ↑	REF/ACCT NO. ↑	DOS RANGE ↑	PAYMENT DATE ↑	RECEIVED DATE ↑	BILLED/PAID ↑	STATUS ↑
T148		05/22/2020 - 05/22/2020	06/04/2020	05/27/2020	\$643.00 / \$1	PAID
T150		05/22/2020 - 05/22/2020	06/04/2020	05/29/2020	\$75.00 / \$2	PAID
T153		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 'Viewing Dashboard For' (TIN) and 'Plan Type' (Medicaid), followed by a 'GO' button. The main content area features two announcement boxes: 'Explanation of Payments Issues' (orange) and 'Integration of InterQual Connect' (blue). 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' (with a calendar icon), and 'Select Action Type', along with a 'SUBMIT' button. The 'Claims Overview' section shows a table with three columns: 'REJECTED' (0), 'DENIED' (3), and 'PENDING' (11). Each cell in the table has a 'View All' button below the count, with these buttons highlighted by red boxes.

REJECTED	DENIED	PENDING
0	3	11
View All	View All	View All

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 0' tile. The 'Manage Finances' section includes an 'Explanation of Payment (EOP)' link, 'Reports & Tools' (Batch Claims Report, Claim Audit Tool), and a 'PAID CLAIMS 672' tile. Finally, 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

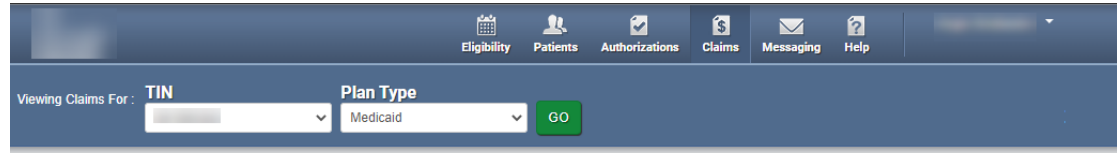
There are two ways to change the date range.

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 shows 'Viewing Claims For: TIN' and 'Plan Type: Medicaid'. The main section 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 show claim counts: REJECTED (0), DENIED (125), and PENDING (656), each with a 'View All' link. Below this is a red-bordered box containing the 'Search for Claims' section. It includes an 'ADVANCED SEARCH' link and a note: 'The data available for Search by Member Info is limited to the last 30 days. For specific date range search, please use the advanced search.' There are two search options: 'Check Status by Claim Number' with an input field and a 'CHECK' button, and 'Search by Member Info' with input fields for 'Enter Last Name or Member ID' and 'Date of Birth' (mm/dd/yyyy), and a 'SEARCH' button. Below the search section are three more summary cards: 'Create Claims' (0), 'Manage Finances' (0), and 'PAID CLAIMS' (672), each with a 'View All' link. The 'Create Claims' section includes links for 'Start a CMS 1500 / Professional or CMS UB-04 / Institutional Claim' and 'Upload EDI / Batch'. The 'Manage Finances' section includes links for 'View all EOP', 'Batch Claims Report', and 'Claim Audit Tool'. The 'Resources' section includes links for 'Updated Instruction Manual (PDF)', 'CMS-1500 Claim Form (PDF)', 'CMS-UB-04 Claim Form', and 'EDI Guide (PDF)'. At the bottom, there are links for 'Instruction Manual (PDF)', 'Terms and Conditions', 'Privacy Policy', and 'Copyright © 2023, 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:

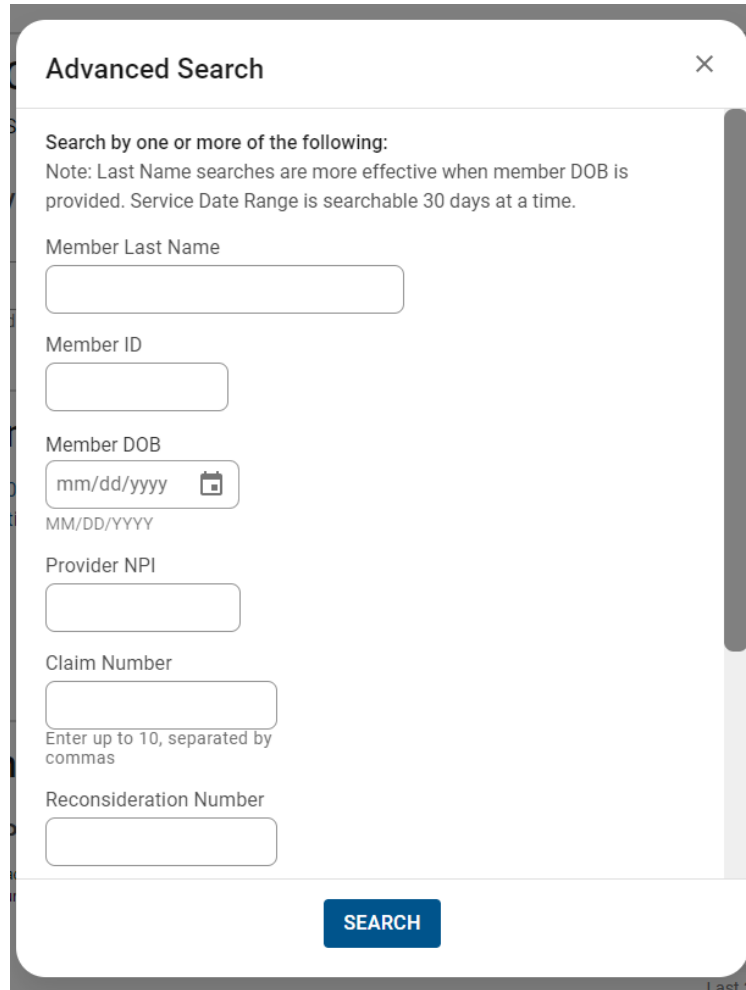
1. Complete the **Check Status by Claim Number**
2. Complete the **Search by Member Info**, or
3. Use the **Advanced Search**

The screenshot displays the Claims Dashboard interface. At the top, there are navigation tabs for Eligibility, Patients, Authorizations, Claims, Messaging, and Help, along with a user profile for Bruce Provider. Below this, a header section allows filtering by TIN (12345678) and Plan Type (Iowa Total Care), with a GO button. The main section is titled 'Claims' and shows filters for 'From' (03/29/2022) and 'To' (04/28/2022) dates, with a CHANGE DATES button. Three summary cards are shown: REJECTED (08), DENIED (23), and PENDING (58), each with a View All link. Below these cards, a note states 'Shows claims for the last 30 days, from today's date.' At the bottom, there are three search options: 'Search for Claims' (with a sub-section 'Check Status by Claim Number' containing an input field and a CHECK button), 'Search by Member Info' (with input fields for Last Name or Member ID and Date of Birth, and a SEARCH button), and 'ADVANCED SEARCH' (highlighted in 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.

Portal Functionality: View EOP

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 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 for searching claims, including an 'ADVANCED SEARCH' link. It provides instructions on data availability and offers two search methods: 'Check Status by Claim Number' and 'Search by Member Info'.
- Create Claims:** A section for creating new claims, with options for 'Start a CMS 1500 / Professional or CMS UB-04 / Institutional Claim' and 'Upload EDI / Batch'. It also shows a 'DRAFT CLAIMS' count of 0.
- Manage Finances:** A section highlighted with a red border, containing 'Explanation of Payment (EOP)', 'Reports & Tools' (with links for Batch Claims Report and Claim Audit Tool), and 'PAID CLAIMS' (672).
- Resources:** A section with links to various documents, including the Updated Instruction Manual (PDF), CMS-1500 Claim Form (PDF), and CMS-UB-04 Claim Form.

At the bottom of the page, there is a footer with links to the Instruction Manual (PDF), Terms and Conditions, Privacy Policy, and Copyright information for 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 ↓
09/06/2023 (PDF)				
09/19/2023 (PDF)				
10/03/2023 (PDF)				

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