



## Accessing Quality Data via the Secure Provider Portal

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# Provider Portal Registration & Login

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# 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

English ▼

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

# Portal Banner

The screenshot shows the top banner of a patient portal. It features a dark blue header with a blurred logo on the left and navigation icons on the right. Below the header is a section for selecting the dashboard view, with dropdown menus for TIN and Plan Type, and a GO button. Red dashed lines and labels identify the following components:

- Health Plan / Product Logo**: Points to the blurred logo on the top left.
- Portal Functionalities**: A bracket pointing to the navigation icons: Eligibility, Patients, Authorizations, Claims, and Messaging.
- Secure Messaging**: Points to the Messaging icon.
- User's Name / Menu Options**: Points to the blurred user profile area on the top right.
- TIN(s) Listing**: Points to the TIN dropdown menu.
- Plan Type Option(s)**: Points to the Plan Type dropdown menu.



## Tips

- Portal functionality / access is based on the user's permissions
- **Plan Type** drop-down options are automatically assigned based on how the TIN is set-up in our systems, and the products offered by the Health Plan

# Portal Home Page – Verified Portal Account

Portal Banner

Eligibility

Patients

Authorizations

Claims

Messaging

Help

Viewing Dashboard For : 

TIN

Plan Type

Medicaid

GO

Quick Eligibility Check

Quick Eligibility Check for Medicaid

Member ID or Last Name

Birthdate

123456789 or Smith

mm/dd/yyyy

Check Eligibility

Last Five Received Claims

Recent Claims

STATUS	RECEIVED DATE	MEMBER NAME	CLAIM NO.
\$	05/15/2020		T136
\$	05/18/2020		T139
\$	05/18/2020		T139
\$	04/23/2020		T114
\$	04/21/2020		T112

Welcome Center

Welcome

Add a TIN to My ACCOUNT

Manage Accounts

Reports

Patient Analytics

Provider Analytics

Care and Risk Gaps - Daily View

Recent Activity

Date

Activity

Quick Links

# Portal Registration & Login Tips

- Registration is required for access to the portal
- Portal accounts cannot be shared
  - Each person within a provider organization who needs access to the portal, must complete the portal registration
- For a portal user to register, their TIN must be loaded in our systems
  - Allow at least two business days for portal to reflect updates in back-end systems
- There is no limit on the number of TINs a portal user can add to their portal account
- Portal users must log into the portal every 90 days to prevent their account from being locked due to inactivity
- The Forgot Password / Unlock Account link on the Secure Provider Portal login page, cannot be used to unlock a portal account, that is locked due to inactivity

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# Portal Functionality: Provider Analytics

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# Provider Analytics

To view Provider Analytics

1. Click **Provider Analytics**
2. **Agree to HIPAA terms**

The screenshot displays the Carolina Complete Health provider dashboard. At the top, there is a navigation bar with icons for Eligibility, Patients, Authorizations, Claims, and Messaging. Below this, a header section allows users to view the dashboard for a specific TIN and Plan Type, with a 'GO' button. The main content area includes a 'Welcome' message, a 'Revised Medical Claims Payment Schedule' announcement, a link to 'What you need to know about COVID-19', and a 'Quick Eligibility Check for Carolina Complete Health' section with input fields for Member ID or Last Name and Birthdate, and a 'Check Eligibility' button. A 'Recent Claims' section is also visible. On the right side, a 'Recent Activity' sidebar lists various actions: 'Add a TIN to My ACCOUNT', 'Manage Accounts', 'Reports', 'Patient Analytics', and 'Provider Analytics'. A red circle with the number '1' highlights the 'Provider Analytics' link. Below the main content area, a modal dialog box titled 'Quick Eligibility Check for Carolina Complete Health' is shown, containing a HIPAA privacy notice and two buttons: 'Agree to Terms' (highlighted with a red circle and the number '2') and 'Cancel'.



# Supplemental Reports

Provider Analytics

Resources

Case Study Support Resource

FAQ

Tool Navigation Guide

Supplemental Reports

COVID-19 Detail12-06-2021

Daily IP & DischargeNo Report...

Weekly Med Claims12-05-2021...

Weekly Rx Claims12-05-2021...

P4P and Quality Reporting

Quality

2021 NC Med (Adults)

2021 NC Medicaid (Peds)

Dashboards

No data returned for this view. This might be because the applied filter excludes all data.

Reference Materials

[Data Dictionary](#)

# P4P and Quality Reporting

The screenshot shows the 'Provider Analytics' dashboard. At the top right is a notification bell icon. Below the header, there are three main sections: 'Supplemental Reports', 'P4P and Quality Reporting', and 'Dashboards'. The 'P4P and Quality Reporting' section is highlighted with a red box and contains links for 'Quality', '2021 NC Med (Adults)', and '2021 NC Medicaid (Peds)'. The 'Dashboards' section shows a message: 'No data returned for this view. This might be because the applied filter excludes all data.' Annotations with red lines point from the text on the right to the 'Quality' link and the 'Dashboards' section.

**Provider Analytics**

**Resources**

- 1 Case Study Support Resource
- 2 FAQ
- 1 Tool Navigation Guide

**Supplemental Reports**

COVID-19 Detail	12-06-2021
Daily IP & Discharge	No Report ...
Weekly Med Claims	12-05-2021 ...
Weekly Rx Claims	12-05-2021 ...

**P4P and Quality Reporting**

- Quality
- 2021 NC Med (Adults)
- 2021 NC Medicaid (Peds)

**Dashboards**

No data returned for this view. This might be because the applied filter excludes all data.

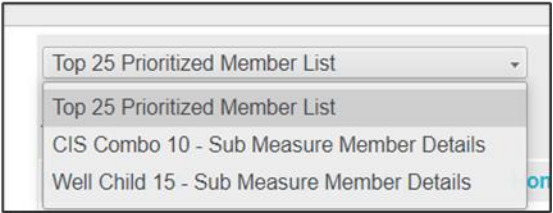
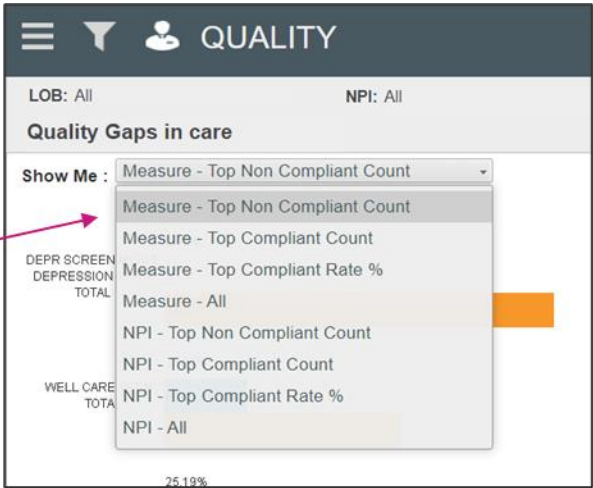
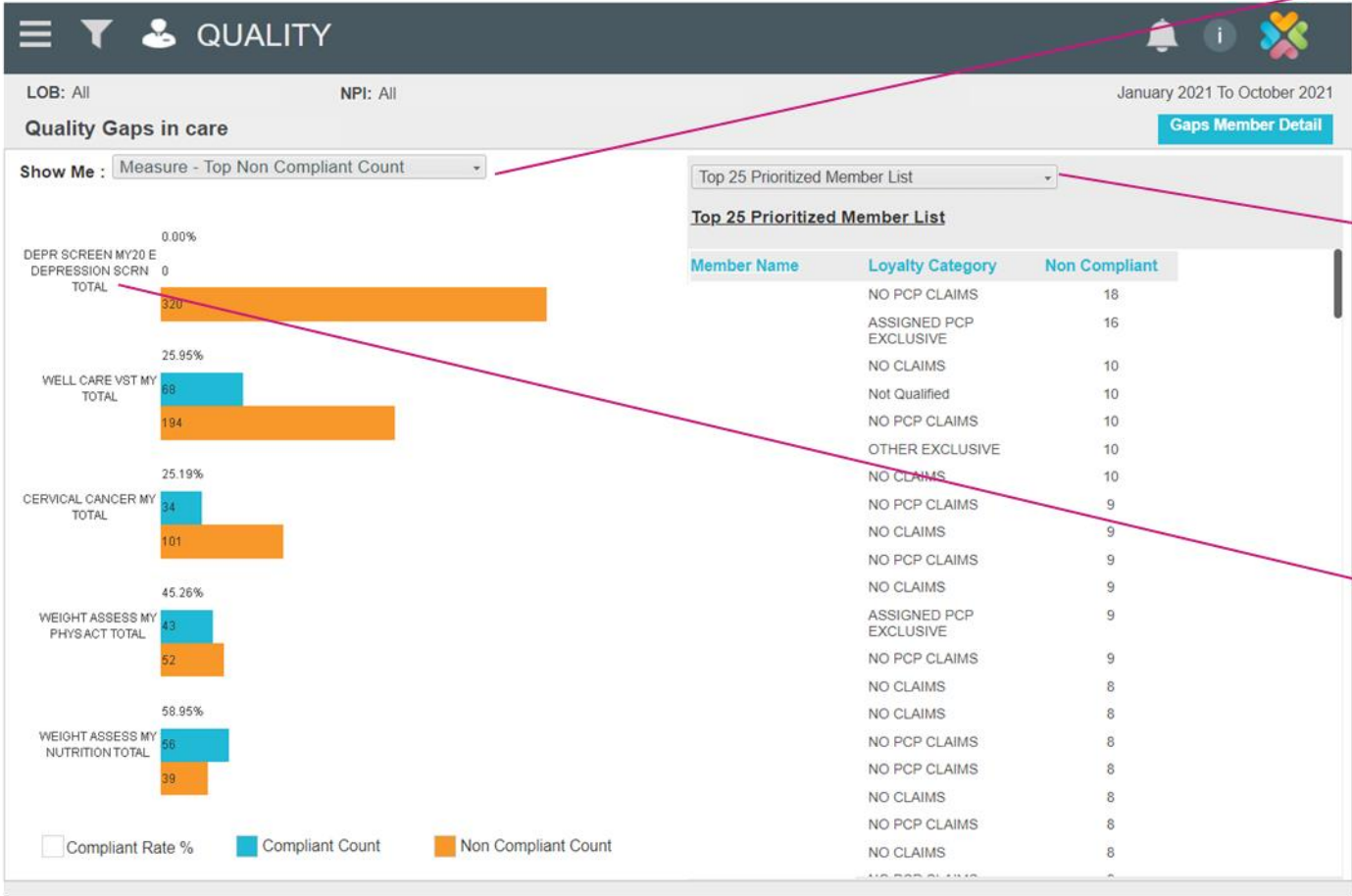
**Reference Materials**

- [Data Dictionary](#)

**Quality:** All AMHs have Quality care gap and measure report available that includes all priority measures.

**P4P:** All AMHs have a standard P4P available except those within practice entities that are involved in a broad value-based payment arrangement.

# Quality Measures



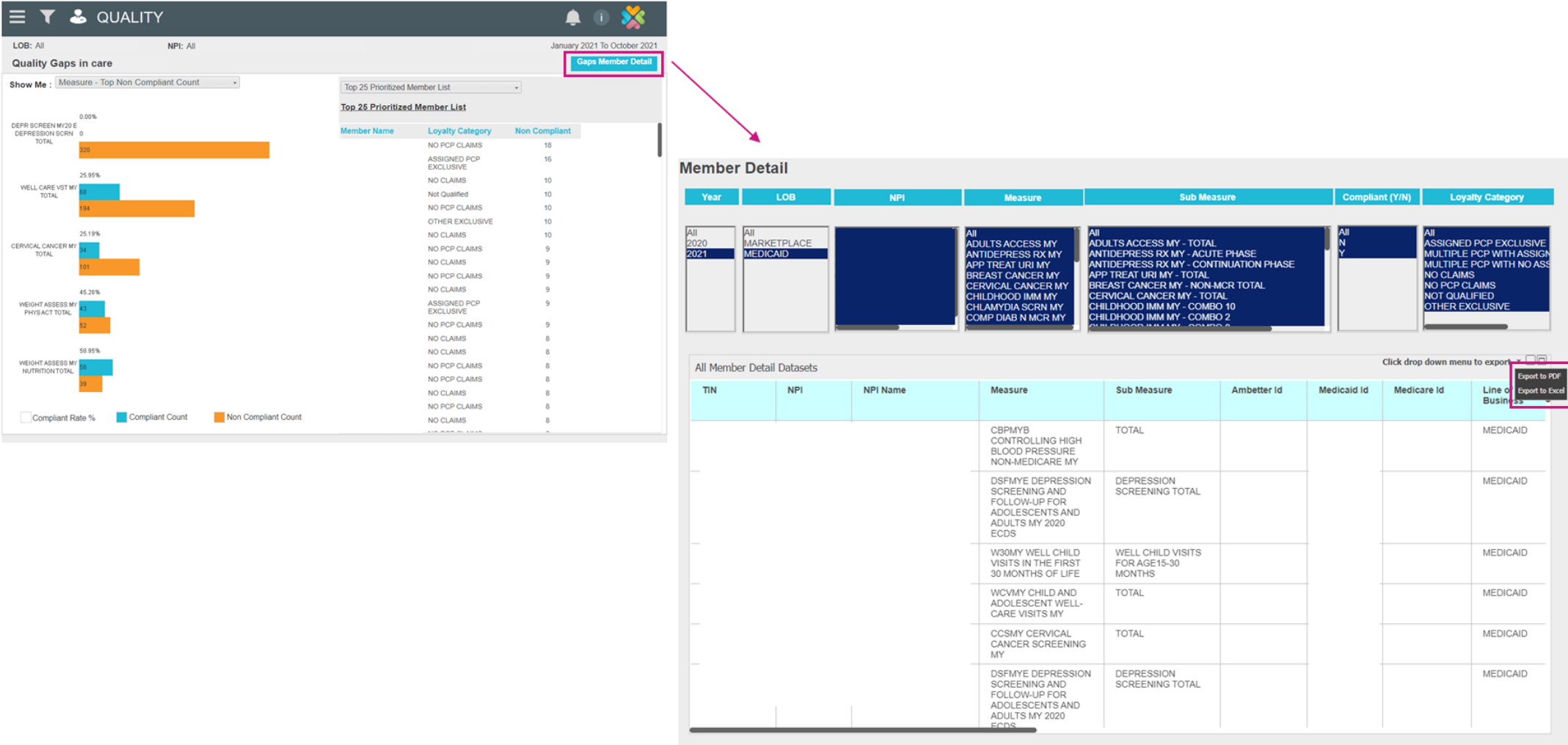
**NPI by Measure Report**

Measure : CHILD AND ADOLESCENT WELL-CARE VISITS MY Total Qualified Members : 262

Sub Measure : TOTAL

NPI	Qualified Count	Compliant Count	Non Compliant Count	Compliant Rate %
	35	8	27	22.86%
	116	36	80	31.03%
	50	15	35	30.00%
	12	3	9	25.00%
	8	0	8	0.00%
	19	3	16	15.79%
	6	0	6	0.00%
	9	2	7	22.22%
	7	1	6	14.29%

# Quality Gaps- Member Detail



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# Portal Functionality: Pay-for-Performance Scorecards

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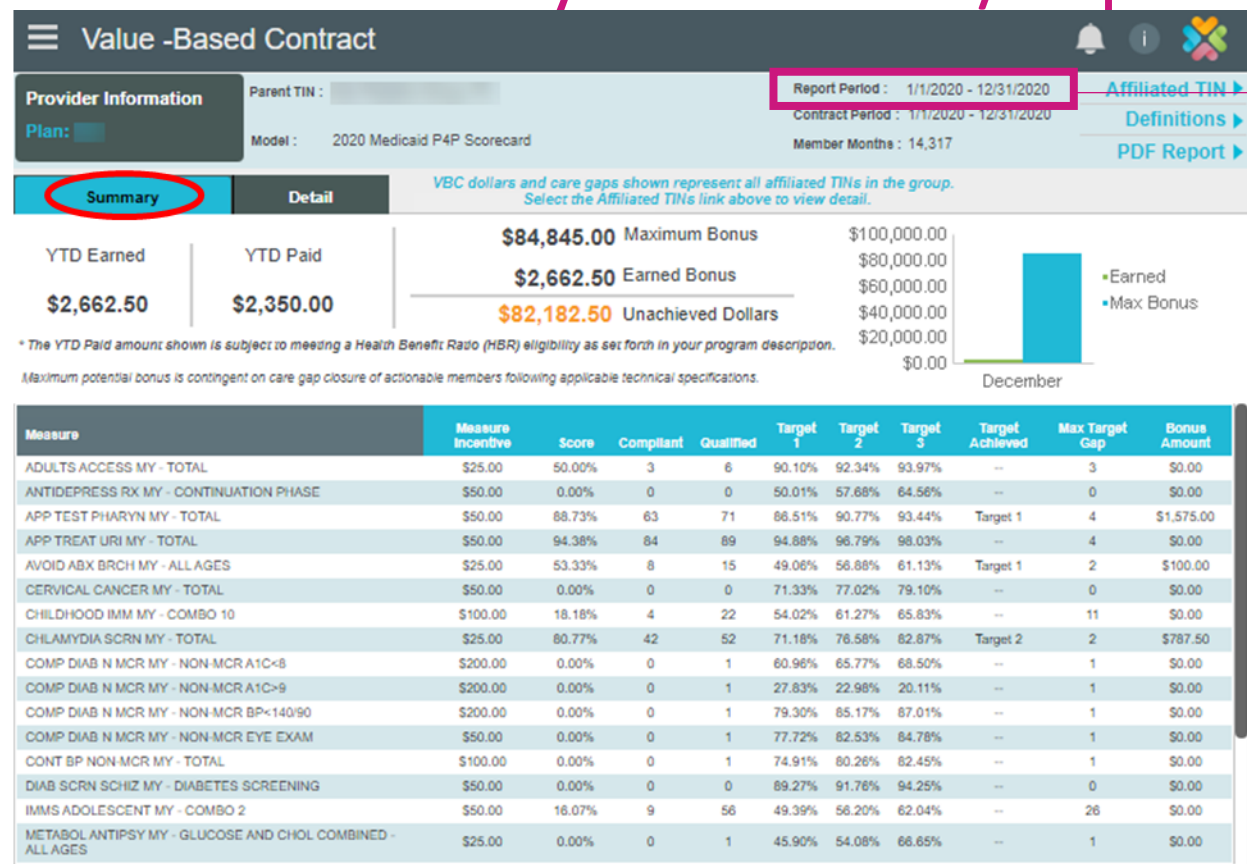
# Value-Based Contract – Summary Scorecards/Reports

P4P and Quality Reporting

Quality

2021 NC Med (Adults)

2021 NC Medicaid (Peds)



The data reflected in the scorecard is based on the reporting period shown in the dashboard. All claims received through the end of that date range are included. However, please note that there is typically an 8-week lag between the time a claim is submitted and when a gap closure is reflected in the Provider portal, due to standard data processing timelines

- Sub Measure = HEDIS measures in P4P
- Maximum Incentive = Payout for each compliant event
- Score = Compliant/Qualified (also known as rate)
- Targets = set by plan to earn payout
- Target Achieved = current performance
- Max Target Gap = # of additional compliant events needed to get to the highest target (max payout)
- Bonus Amount = earned through report date

**NOTE:** This is a summary report you can scroll through the measures and sort the columns but there is no drill down capabilities. For a hard copy to go the "PDF Report". For drill down capabilities go to the "Detail" tab



# P4P Scorecard

Value -Based Contract

Provider Selection

Plan: NO

Parent TIN :

Model : 2021 NC Med (Adults)

Report Period : 1/1/2021 - 10/31/2021

Contract Period : 1/1/2021 - 12/31/2021

Member Months :

Affiliated TIN ▶

Definitions ▶

PDF Report ▶

Summary

Detail

VBC dollars and care gaps shown represent all affiliated TINs in the group.

Select the Affiliated TINs link above to view detail.

Qualifying Measures :

Measures Receiving Payment :

Minimum Qualified Measure :

PMPM Rate :

Member Months :

Paid Amount :

Earned Amount : \$0.00

Unearned Amount : \$

Maximum Bonus : \$

Maximum potential bonus is contingent on care gap closure of actionable members following applicable technical specifications.

Measure	Measure Incentive	Score	Compliant	Qualified	Min Member Threshold	Target 1	Target 2	Target Achieved
CERVICAL CANCER MY - TOTAL	\$0.40							
CHILDHOOD IMM MY - COMBO 10	\$0.40							
CHLAMYDIA SCR N MY - TOTAL	\$0.40							
COMP DIAB N MCR MY - NON-MCR A1C>9	\$0.40							
CONT BP NON-MCR MY - TOTAL	\$0.60							
IMMS ADOLESCENT MY - COMBO 2	\$0.40							
WELL CARE VST MY - TOTAL	\$0.60							
WELL CHILD 30 MY - WELL CHILD VISITS FOR AGE15-30 MONTHS	\$0.40							
WELL CHILD 30 MY - WELL CHILD VISITS IN THE FIRST 15 MONTHS	\$0.40							

Report Period : 1/1/2021 - 10/31/2021

Contract Period : 1/1/2021 - 12/31/2021

Affiliated TIN ▶

Definitions ▶

PDF Report ▶

PDF Report Export

Parent TIN :

Model : 2021 NC Med (Adults)

Report Year

2021

Member Detail Export

Report Period Date Range

2021-01-01 - 2021-10-31

2021-01-01 - 2021-09-30

The data reflected in the scorecard is based on the reporting period shown in the dashboard. All claims received through the end of that date range are included. However, please note that there is typically an 8-week lag between the time a claim is submitted and when a gap closure is reflected in the Provider portal, due to standard data processing timelines

October

Max Bonus

Max Target Gap	Bonus Amount
4	\$0.00
124	\$0.00
42	\$0.00

# P4P Gaps- Member Detail

Report Period : 1/1/2021 - 10/31/2021

PDF Report Export

Parent TIN :

Model : 2021 NC Med (Adults)

Report Year : 2021

Report Period Date Range : 2021-01-01 - 2021-10-31

Member Detail Export

Affiliated TIN

Definitions

PDF Report

October

Max Bonus

Max Target Gap

Bonus Amount

4

\$0.00

124

\$0.00

42

\$0.00

VBC Member Detail

LOB	NPI	Measure	Sub Measure	Compliant (Y/N)	Loyalty Category
All MEDICAID		All CERVICAL CANCER MY CHILDHOOD IMM MY CHLAMYDIA SCRNM MY COMP DIAB N MCR MY CONT BP NON-MCR MY IMMS ADOLESCENT MY WELL CARE VST MY WELL CHILD 30 MY	CHILDHOOD IMM MY - COMBO 10 CHLAMYDIA SCRNM MY - TOTAL COMP DIAB N MCR MY - NON-MCR A1C>9 CONT BP NON-MCR MY - TOTAL IMMS ADOLESCENT MY - COMBO 2 WELL CARE VST MY - TOTAL WELL CHILD 30 MY - WELL CHILD VISITS FOR AGE15- WELL CHILD 30 MY - WELL CHILD VISITS IN THE FIRS	All N Y	All ASSIGNED PCP EXCLUSIVE MULTIPLE PCP WITH ASSIG MULTIPLE PCP WITH NO AS NO CLAIMS NO PCP CLAIMS NOT QUALIFIED OTHER EXCLUSIVE

Member Detail

Parent TIN	TIN	NPI	NPI Name	Measure	Sub Measure	Ambetter Id	Medicaid Id
				W30MY WELL CHILD VISITS IN THE FIRST 30 MONTHS OF LIFE	WELL CHILD VISITS IN THE FIRST 15 MONTHS		
				W30MY WELL CHILD VISITS IN THE FIRST 30 MONTHS OF LIFE	WELL CHILD VISITS IN THE FIRST 15 MONTHS		
				W30MY WELL CHILD VISITS IN	WELL CHILD VISITS IN THE FIRST 15 MONTHS		

Click drop down menu to export

Export to PDF

Export to Excel



# Thank you!