

# Provider Portal User Guide

Last Updated: September 2023

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## LOG IN PROCESS

Providers will receive the email below on steps regarding the provider portal log in process.

- **Note: Emails might go to the Spam or Junk folders based on the settings – It is suggested that providers check their spam and junk folders.**

From: [no-reply@rxadvance.com](mailto:no-reply@rxadvance.com)

Subject: <Health Plan> Provider Portal Access

Hi <Provider Name>,

This e-mail includes important information you will need to access <Health Plan> Provider Portal.

**You will be receiving a separate email from [nirvanahca.microsoft.com](mailto:nirvanahca@microsoft.com) with an invitation link, once you accept the invitation on that email you will be able to access your provider portal.**

**Please use <provider email> as the sign in email once you have accepted the invitation.**

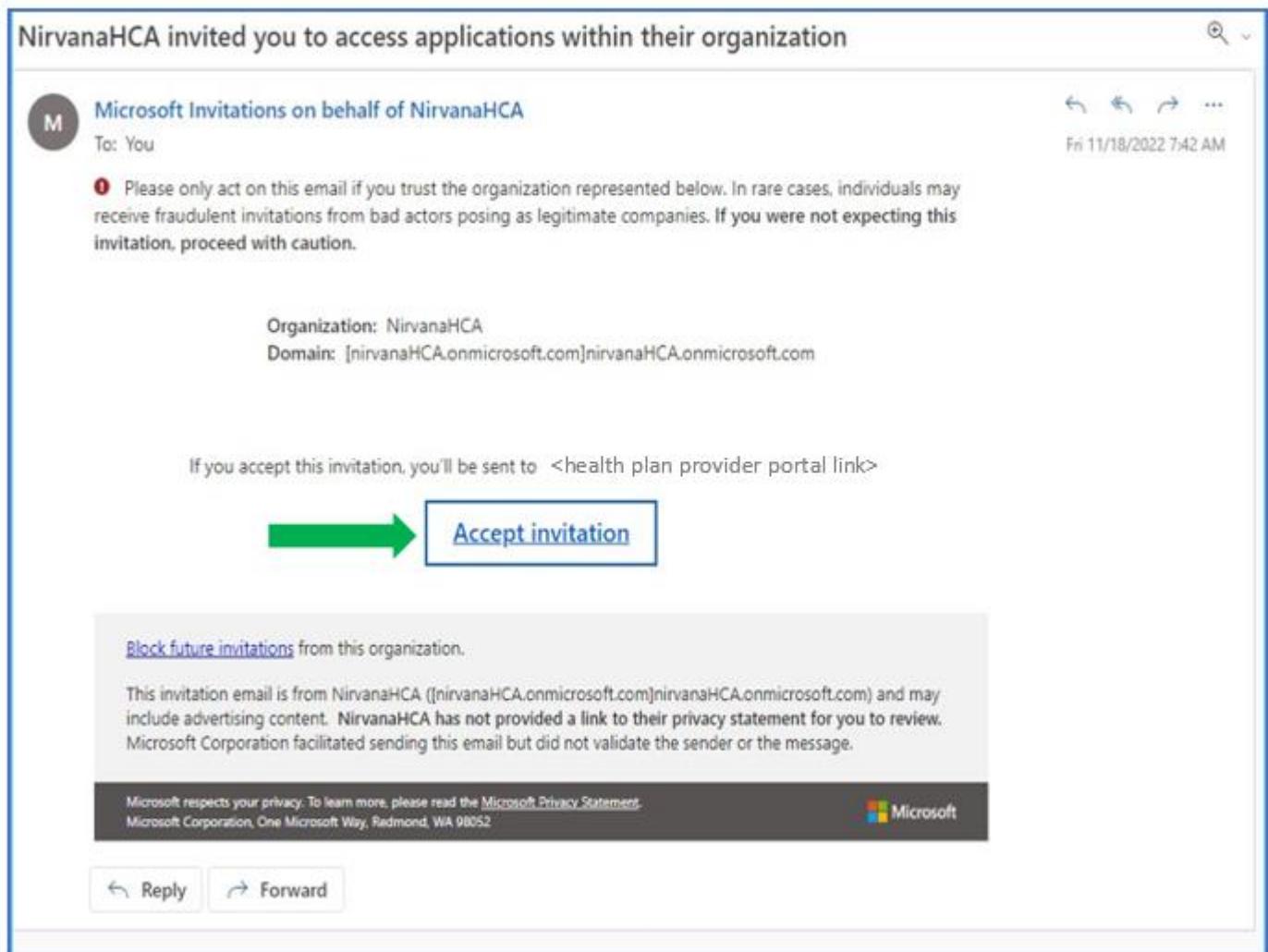
If you have any concerns or problems accessing your account, please contact provider support at <provider services phone number>.

Thank you!

<Health Plan>

The next email will be an invite from Microsoft on behalf of Nirvana HCA. Providers will then click the **'Accept Invitation'** button.

- **Note: Emails might go to the Spam or Junk folders based on the settings – It is suggested that providers check their spam and junk folders.**



# Provider Users: Experience Options

## User Experience 1

If a provider's registered email address is not a Microsoft (office365.com, outlook.com, live.com or hotmail.com) email or they don't have an Azure account associated with it, they will receive an OTP (one time password) code on their registered email which they will have to enter to access their Provider Portal Account. After the provider logs out, they will have to repeat the process with a new OTP code sent to their registered email each time.

## User Experience 2

If a provider's registered email address is a Microsoft (office365.com, outlook.com, live.com or hotmail.com) email or they have an Azure account associated it with, they will have to enter the password associated with their registered account or they can choose to receive an OTP on their registered email to access the Provider Portal Account. Every time the provider wants to login, they will have to use their Microsoft or Azure email address and password, or a new OTP code will be sent to their registered email on the Provider Portal URL.

## HOME PAGE

Upon logging on to the provider portal, users will be able to view all facilities associated with the account.



## MY INFORMATION

Users can view your provider information on the “My Information” tab.

- **Provider Details**
  - NPI
  - Entity Type (Individual or Organization)
  - Type (Hospital, Skilled Nursing, etc)
  - Status (Active, Inactive, In Review)
  - Professional Title
  - Entity Name
  - Languages

Provider Portal

Home My Info Prior Authorization Claims & Payments Administration Documents

DETAIL SPECIALTY & TAXONOMY ID(s) PRECLUSIONS ADDRESSES NETWORK PLANS DOCUMENTS

NPI: 1538144910 Entity Type: Organization Type: --Select--

Status: Active Professional Title: --Select-- Entity Name: LABCORP BURLINGTON - YORK COURT

Prefix: F - Otherfacilities Custom Provider ID: 0029931 DBA: LABCORP BURLINGTON - YORK COURT Languages:

- **Taxonomy Information**
  - Taxonomy Code
  - Description (i.e. what provider office)

Provider Portal

Home My Info Prior Authorization Claims & Payments Administration Documents

DETAIL SPECIALTY & TAXONOMY ID(s) PRECLUSIONS ADDRESSES NETWORK PLANS DOCUMENTS

Action	Specialty Code	Specialty Description	Specialty Sub Code	Specialty Sub Description
No items to display				

15 Items per page

- **Provider IDs (e.g. TIN etc.)**

Provider Portal

Home My Info Prior Authorization Claims & Payments Administration Documents

DETAIL SPECIALTY & TAXONOMY ID(s) PRECLUSIONS ADDRESSES NETWORK PLANS DOCUMENTS

ID Type	ID
TIN	133757370

1 - 1 of 1 items

- **Preclusions**

Home	My Info	Prior Authorization	Claims & Payments	Administration	Documents
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DETAIL	SPECIALTY & TAXONOMY	ID(s)	PRECLUSIONS	ADDRESSES	NETWORK	PLANS	DOCUMENTS
--------	----------------------	-------	-------------	-----------	---------	-------	-----------

Preclusion Type	Start Date	End Date
No items to display		

- **Provider Addresses** (e.g. billing, mailing etc.)

Home	My Info	Prior Authorization	Claims & Payments	Administration	Documents
------	---------	---------------------	-------------------	----------------	-----------

DETAIL	SPECIALTY & TAXONOMY	ID(s)	PRECLUSIONS	ADDRESSES	NETWORK	PLANS	DOCUMENTS
--------	----------------------	-------	-------------	-----------	---------	-------	-----------

Address Type	Address Line 1	Address Line 2	City	State	Zip	Country	County
Mailing			Burlington	NC	27215	USA	Alamance
Billing			Burlington	NC	27216	USA	

- **Network Information**
  - Network Name
  - Network Code
  - Start Date
  - End Date

Home	My Info	Prior Authorization	Claims & Payments	Administration	Documents
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DETAIL	SPECIALTY & TAXONOMY	ID(s)	PRECLUSIONS	ADDRESSES	NETWORK	PLANS	DOCUMENTS
--------	----------------------	-------	-------------	-----------	---------	-------	-----------

Network Name	Network Code	Start Date	End Date
HTA PAR Network	HTA_PAR	04/30/2016	12/30/2099

- **Plans**
  - Plan Names



- Plan Codes

Plan Name	Plan Code
HealthTeam Advantage Diabetes & Heart Care (HMO C-SNP)	
HealthTeam Advantage Plan II (PPO)	
HealthTeam Advantage Plan II (PPO)	
HealthTeam Advantage Diabetes & Heart Care (HMO C-SNP)	
HealthTeam Advantage Plan II (PPO)	
HealthTeam Advantage Plan II (PPO)	

## CLAIMS & PAYMENTS

User can view their claims submission history on the “Claims & Payments”. This includes Claim ID, Claim Source, Claim Type, Subscriber ID, Stage of the Claim (e.g. submitted, draft), Total Payment, and Member Payment.

Claim ID	Process Claim	Summary	Claim Source	Claim Type	Stage	Status	Adjusted/Reversed	MCP Member ID	Name	Subscriber ID
202209200000155	Show Summary			Professional	Processing Complete			200085		MB112345
202209180000150	Show Summary			Professional	Processing Complete	PAID		200087	Demo - Test	MB112345
202209180000153	Show Summary			Professional	Processing					MB112345
202209180000152	Show Summary			Professional	Processing					MB112345
202209180000151	Show Summary			Professional	Processing					MB112345
202209180000150	Show Summary			Professional	Ready For Processing					MB112345
202209180000149	Show Summary			Professional	Processing					MB112345
202209180000148	Show Summary			Professional	Ready For Processing					MB112345
202209180000147	Show Summary			Professional	Ready For Processing					MB112345
202209180000146	Show Summary			Professional	Ready For Processing					MB112345
202209180000144	Show Summary			Professional	SUSPEND	SUSPEND		200078		MB112345
202209180000143	Show Summary			Professional	Ready For Processing					MB112345
202209180000142	Show Summary			Professional	Processing Complete	PAID				MB112345
202209180000139	Show Summary			Professional	Processing Complete	PAID		200078		MB112345

- Claims Information

After users click on the button under “Action”, they are able to view all the information that has been submitted for that claim.

Business : eternal Health Service Dates: 2/2/2021 - 3/3/2021

Claim Id: 2022092000006155  
Submitted Date: 09/29/2022

**PROCESSING COMPLETE**

Receipt Date: 09/29/2022

[Expand All](#) [Notes](#)

**Billing Provider**

Entity Type: 1 - Person  
Org Name/ Last Name: LODI PHARMACY  
First Name:   
Middle Name:   
Suffix:   
NPI:   
Taxonomy: 332B00000X  
Currency Code:

Address  
Address1:   
Address2:   
City: SOUTHBOROUGH  
State: Massachusetts  
Zip Code: 01772

Contact Details  
Contact Name:   
Email:   
Telephone:   
Telephone Ext:   
Fax:   
URL:

Supplement ID:   
Supplemental Type:   
Supplemental Value:

When clicking the “Show Summary” button, users are able to view each claim at a detailed level.

Home My Provider Benefits and Eligibility Prior Authorization Claims & Payments Documents

**Claims**

Claim ID:

Last Paged:

eternal Health

CLAIMS DENTAL VISION HISTORY

Claim ID	Process Claim	Summary	Claim Source	Claim Type	Stage	Status	Adjusted/Reversed	MCP Member ID	Name	Subscriber ID
2022092000006155	Show Summary	Professional	Processing Complete					200008	Demo - Test	MB112345
2022091800006150	Show Summary	Professional	Processing Complete			PAID		200009		MB112345
2022091800006153	Show Summary	Professional	Processing							MB112345
2022091800006152	Show Summary	Professional	Processing							MB112345
2022091800006151	Show Summary	Professional	Processing							MB112345
2022091800006150	Show Summary	Professional	Ready For Processing							MB112345
2022091800006149	Show Summary	Professional	Processing							MB112345
2022091800006148	Show Summary	Professional	Ready For Processing							MB112345
2022091800006147	Show Summary	Professional	Ready For Processing							MB112345
2022091800006146	Show Summary	Professional	Ready For Processing							MB112345
2022091800006144	Show Summary	Professional	SUSPEND		SUSPEND			200007		MB112345
2022091800006143	Show Summary	Professional	Ready For Processing							MB112345
2022091800006142	Show Summary	Professional	Processing Complete			PAID				MB112345
2022091800006139	Show Summary	Professional	Processing Complete			PAID		200007		MB112345

1 2 3 4 5 ... 15 Items per page 1 - 15 of 80 items

After clicking show summary, the top of the page includes the billing and rendering provider details, as well as cost share information.

CLAIM#:


Claim Source: EDI| MHP: M  
Received Date: 06/16/2022 | Entry Date: 12/15/2022 | Processed Date: 12/15/2022


FREQUENCY CODE ⓘ  
1

CLAIM TYPE ⓘ  
PROFESSIONAL

CLAIM STAGE ⓘ  
PROCESSING COMPLETE

CLAIM STATUS ⓘ  
PAID  
EOP

PATIENT  
  
DOB: 08/14/1940  
Gender: F  
MCP Member Id:   
Group:   
Patient Account Number:

PROVIDER  
  
BILLING PROVIDER  
  
NPI:   
117 E KINGS HWY, EDEN NC  
272085201  
REFERRING PROVIDER:

SERVICE LOCATION/PROCESS CODES/DIAGNOSIS CODES  
SERVICING LOCATION:  
NPI:   
PROCESS CODES:  
1: VCE 55201 - Claim contains ICD-10 diagnosis code in...  
DIAGNOSIS CODES:

COST SHARE  
BILLED AMOUNT: \$294.00  
ALLOWED AMOUNT: \$97.45  
PLAN PAID: \$97.45  
MIPS AMOUNT: \$0.00  
SEQUESTRATION AMT: \$0.00  
OTHER PAYER PAID AMOUNT: \$0.00  
Member  
DEDUCTIBLE: \$0.00  
COPAY: \$0.00  
CONS: \$0.00  
MEMBER LIABILITY: \$0.00  
TOTAL PAID: \$0.00  
Payment  
PAYMENT DATE:   
PAYMENT NUMBER:   
CHECK CLEARING DATE:   
CHECK/ACH AMOUNT:

Service Lines (1)  
Claim Status:  Service Line:   
Search by CPT Code, Modifiers, Revenue Code, Plan Name, Service Category, Contract

SERVICE LINE : 1  
Status: PAID

CPT Code: 99221  
Modifiers: FS | AI  
Service From: 02/05/2022  
To: 02/05/2022  
Diagnosis Pointer: 1 | 2 | 3 | 4  
Auth1 # on Claim:  
Auth2 # on Claim:  
Place of Service: 21  
Rendering Provider  
Name:   
NPI:   
Taxonomy:

Cost Share  
Billed Units: 1  
Amount Billed: \$294.00  
Paid Units: 1  
Allowed Amount: \$97.45  
Amount Paid: \$97.45  
MIPS Amount: \$0.00  
Sequestration Amt: \$0.00  
Member Paid  
Deductible: \$0.00  
Copay: \$0.00  
Cons: \$0.00  
Total: \$0.00

## BENEFITS AND ELIGIBILITY

The benefits and eligibility tab is available so users can search specific member details.

Once a user has entered the member information, they can click the “View” button next to their member ID.

This will bring the user to a page where the member details, current coverage details, Accumulators and Plan Benefits are listed.

Member Details

The member details include the member ID, Medicare ID, Primary Language, Date of Birth, Age, Address etc. This will also include the member’s Primary Care Physician information.

Current Coverage Details

The current coverage details include the Plan name along with the start and end date.

Accumulators

The accumulators include the members out of pocket details, for both in network and out of network. It will also list how much the member has paid to reach their maximum out of pocket.

Plan Benefits

The plan benefits section has any information that has been saved from our Customer Service Representative module.

[BillingProvider](#)
[My Provider](#)
[Benefits and Eligibility](#)
[Prior Authorization](#)
[Claims & Payments](#)
[Administration](#)
[Documents](#)

Benefits and Eligibility

X Close

Name

Date of Birth

Member ID

DETAILS

CLAIMS

ENROLLMENT HISTORY

Name:

Member ID:

Medicare ID:

Primary Language:

Date Of Birth:

Age:

Phone:

Email:

Address:

PCP:

PCP Start Date:

PCP End Date:

Current Coverage Details

Plan Name:

PBP Number:

Start Date:

End Date:

Status:

Accumulators

In-network (Member)

Out of Pocket

Deductible

Out-network (Member)

Out of Pocket

Deductible

Plan Benefits

Health Team Advantage 2022 EOC

Health Team Advantage 2022 SBC

## Claims

When clicking the “claims” button, users can view the members claims for the active year.

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[My Provider](#)
[Benefits and Eligibility](#)
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[Documents](#)

Benefits and Eligibility

X Close

Name

Date of Birth

Member ID

DETAILS

CLAIMS

ENROLLMENT HISTORY

Claim Number	Status	Claim Type	Received On	Member	Billed Amount
	SUSPEND	U			\$19950
	SUSPEND	U	12/13/2022		\$10400
	DENY	U	12/14/2022		\$10400
	SUSPEND	U	12/14/2022		\$12000
	SUSPEND	U	12/14/2022		\$10400
	DENY	U	12/14/2022		\$10400
	PAID	U	12/19/2022		\$19950
	PAID	U	12/19/2022		\$15600
	SUSPEND	U	12/19/2022		\$15000
		U	12/19/2022		\$19950
	PAID	U	12/19/2022		\$10600

## Enrollment History

When clicking the “enrollment history” button, users can view all plans the searched member has been enrolled in.

**Benefits and Eligibility** Close

Name  Date of Birth  Member ID

DETAILS CLAIMS **ENROLLMENT HISTORY**

Plan Name	PBP Number	Start Date	End Date	Status
HealthTeam Advantage Plan II (PPO)	N/A	01/01/2022	12/31/2022	Active
HealthTeam Advantage Plan II (PPO)	N/A	01/01/2023	12/31/2023	Active

1 - 2 of 2 items

## ADMINISTRATION

The administration tab will only be visible to admin roles. Hover over the tab to see the two options of “Roles” and “Users”.

### Roles

Under the roles tab, admins will be able to view all roles that are currently available for that plan.

**Roles**

Search

Actions	Role name
<a href="#">Actions</a>	Claims User
<a href="#">Actions</a>	Non-PAR Admin
<a href="#">Actions</a>	PA User
<a href="#">Actions</a>	Portal_Role
<a href="#">Actions</a>	Provider Admin
<a href="#">Actions</a>	ProviderAdmin

Show  entries Showing 1 to 6 of 6 entries Previous 1 Next

### Users

Under the users tab, admins will be able to view all users currently registered on the portal under the same NPI.

Home
My Info
Prior Authorization
Claims & Payments
Administration
Documents

Users

Search

Actions

User name

Email address

Phone number

Show 10 entries

Showing 1 to 1 of 1 entries

Previous

1

Next

## DOCUMENTS

In the Documents tab, all documents that the health plan would like to display, along with their description and the date and time the documents were uploaded will display.

Home
My Info
Prior Authorization
Claims & Payments
Administration
Documents

Document Name

Description

Uploaded Date

2022-HTA-PPO-UM-Prior-Auth-Code-List.pdf

09/20/2022 10:35 AM

2022-HTA-CSNP-UM-Prior-Auth-Code-List.pdf

09/20/2022 10:35 AM

HTA-Provider-Manual.pdf

09/20/2022 10:35 AM

HTA-Prior-Authorization-Request-Form.pdf

09/20/2022 10:35 AM

HTA-Home-Health-Prior-Authorization-Form.pdf

09/20/2022 10:36 AM

HTA-DME-Prior-Authorization-Request.pdf

09/20/2022 10:36 AM

HTA-INPT-SNF-LTAC-Rehab-Request.pdf

09/20/2022 10:36 AM

HTA-Additional-Information-Form.pdf

09/20/2022 10:36 AM

HTA-NonEmergencyAmbulance-PAR.pdf

09/20/2022 10:36 AM

Custodial-Care-Benefit-Prior-Auth-Form-Final.pdf

09/20/2022 10:36 AM

HTA-Part-B-Drive-Prior-Authorization-Request-Form.docx

09/20/2022 10:36 AM

2021-Provider-Portal-User-Guide-HTA.pdf

This guide entails all information on the functionalities for this portal.

09/20/2022 10:36 AM