

Provider Portal Member Eligibility

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INTRODUCTION

Welcome to the CenCal Health Website www.cencalhealth.org . The Website contains many interactive capabilities such as checking member eligibility, request pre-authorizations, claims billing and report capabilities.

This document contains step-by-step instructions on how to access CenCal Health's interactive portal for Providers, Administrators and Staff. Websites are not static documents they are updated and changed constantly to meet the needs of users, to improve functionality, and to meet nationally recognized standards and regulations in healthcare.

MEMBER ELIGIBILITY & IDENTIFICATION

CenCal Health does NOT determine eligibility and a member's eligibility with CenCal Health can change. Medi-Cal members receive a permanent plastic identification card called a Benefits Identification Card or "BIC" and a CenCal Health Insurance card.

GROUP PLAN IDENTIFICATION KEY 110 Santa Barbara Health Initiative (SBHI) Medi-Cal 1120 San Luis Obispo Health Initiative (SLOHI) Medi-Cal



These card must be used for identification purposes but does not provide proof of eligibility. These cards are issued only once and reissued only when information on the card has changed.



FOR PROVIDERS

There are many ways to access our Provider Portal once you select 'Providers' icon.

Explore CenCal Health	Members	Providers	Community	Health & Wellness	Contact Us	Enter Keyword(s)
Providers	Wo	Boliova	Provic	ors are Da	rtnors	
In This Section	VVC	Delleve	FIOVIC	iers are rai	thers	Provider Login
Providers	CenCal H	EALTH'S SUCCESS	is a direct reflect	ion on the efforts of local	health care	Eligibility
	providers	. Every one of c	ur partnerships i twell being of the	s essential. Together, we	share the goal of	Authorizations
Join Our Network	improving	s ule fiediul diu	a well-being of the	e people on the central o	udst.	Formulary & Pharmac
Welcome to the Network	CenCal He	ealth is focused	on making it eas	ier for local providers to s	erve our members	Provider Basics
	and delive	er the highest o	uality of care. We	are publicly governed, no	on-profit and	Claims
Provider Profile/Practice Changes	direcuy al	countable to tr	te communities v	ve serve.		
	CenCal H	ealth is proud to	o prov <mark>ide</mark> health i	care access to members o	four community	
Search Provider Network	who woul	d otherwise go	without coverage	by contracting with a str	ong network. In	Provider Servic
Provider Portal	fact, 94%	of local provide	ers are contracted	I with us.		Contact U
Eligibility			CenCal He	alth's Provide	r Manual	(805) 562-167 Mon-Fri, 8am-5p

POVIDER PORTAL (RESTRICTED)

New User Account Access

This area is "restricted" to authorized users only. New In-Network contracted providers will receive a username and password after they have contacted CenCal Health. For questions on this portal or account access, contact the Web Master at <u>webmaster@cencalhealth.org</u>.

Please appoint a 'Physician/Administrator' for your office as this staff member will manage all user access to the portal and will be responsible for setting your office staff accounts through this portal.

CenCal Health encourages all individual user accounts to be secure and not used by multiple users. CenCal Health will not be held responsible for any erroneous use of a provider user account.

User Account Information Requirements:

- Provider/Organizations Name
- Tax Identification Number
- National Provider Identifier (NPI)
- Physician/Administrator E-mail address (preferred, organizational email address)

icon,

Point of Contact

Portal Log In

Provider Login

Once you click on the you will see the following screen:

First Time Login:

All individual accounts are created by your 'Physician/Administrator' User within your practice. After your account is created, the individual User will login with their email address as their Username, and a temporary password will be provided. The system will prompt the user to create their own individual password.

Log in.	
SECURITY UP To enhance t address.	DATE is source of this portal, CenCall Health has made changes to the user Authentication process. You are now available to login with a valid email
Initial Log in All portal us password wi organization enter the Ta	is and we required to enter an email address in the UserName field as well as their existing password. A prempt to create a new person areas and the strain of the portal. If you receive a notice that the user account email is lowalid; the user will need to contact your system antimistrator to request access. Users with access to multiple organizations with separate Tax ID numbers, will be require to number from accessionalizations at a rises in table.
Previous po	ca names in our operations a constant or operation of the Provider Partal.
Previous por	Comments on the optimization of a close is the Provider Portal. Italiaghs using We will no longer provide access to the Provider Portal. Italia to log in.
Previous por Enter crede UserName	cal inglies using WE will no lenger provide access to the Previder Pertal.
Previous por Enter crede UserName Pesoword	cal inglies using WP will no langer provide access to the Provider Partal.



Password Change Policy:

The system will prompt each User to change their password after 180 days of entry.

Password Entry Error or Password Assistance:

If you enter your information after (3) three invalid attempts, the system will lock your account. Your 'Physician/Administrator' can also 'Unlock' your account or provide assistance on creating new accounts.

Forgot your Password?

All Users can reset their password through the 'Forgot your password?' function and the system auto assign a temporary password for access.

Automatic Deactivation Policy:

CenCal Health will automatically deactivate all User accounts if no activity of the portal is utilized after 90days. It is still the responsibility of the Administrative User to deactivate accounts if staff no longer work for your practice.

User Screen Role Access:

All interactive features are listed along the left column of the page and are specific to each 'User Role' (i.e. if you submit claims you should see the 'Claims Entry'). Please contact your 'Physician/Administrator' within your organization if you need access to specific roles so you can have them added to your interactive tab.

Multi-User Access:

Users could have 'multi-user' access for more than one group (i.e. third party billers that have access to more than one IRS#). In this instance, the User will be able to toggle to each specific IRS# they are assigned to by clicking the IRS drop down box.



DATA FORMS OVERVIEW HOME PAGE

The screen above indicates all active forms available on the portal. Please contact your Physician/Administrator should you need access to any of the above screens. The details provided below contain step-by-step instructions on how to access CenCal Health's interactive portal.

Provider - PCP	Data Forms Overview
> Home	
	Security
Claims Entry	Centel Health's Website employs Service Societ Layer (SSL) technology to ensure that all information transmitted between CenCel Health and your off
Eligibility	is encrypted and secure. This security, however, is not as strong any or organization's username and password. Within your organization, only share account on a need-to-know basis with staff who must access the CenCal Health web site to perform their jobs. Protect persitive patient information. Le the CenCal Health webmaster innow interver a privileged embasite leaves your organization, on bat the compact can be changed.
Transaction Services	CenCal Health webmaster can be contacted at webmaster@cencalhealth.org .
Authorization	Forms & Reports
Reports	Electronic Funde Transfor
Coordination Of Care	Electionic Funds Transfer
Procedure Pricer	Effective Jenuary 1, 2014, Electronic Fund Transfers (UFS) are available through CanGal Health for various payment types. In order to receive EFTs, providers must enroll for the option to receive their payments electronically.
SMART Programs	Claim Forms
Downloads	Five claim form types are supported: OMS-1900, Medical Supplies, UB-04 and LTC. Click on the claim form type on the left to view the form. Upon the instance of the data set of the data set of the data set.
PCP Reassignment	suomission or the form you will receive a calim control number (LLN) for that claim.
Pharmacy Forms	Eligibility
RBM Forms	Cencal Health has updated its eligibility form and created a batch eligibility form for providers who consistently check eligibility on groups of members. We hope that you find these forms accessible and beneficial.

ELIGIBILITY



Check Eligibility

This system only looks within CenCal Health's member/subscriber database for the eligibility. CenCal Health does NOT determine eligibility and a member's eligibility with CenCal Health can change.



Member Eligibility

Member ID or Last 4 of SSN	Date of Birth		First Name	Last Name	Date of Service (DOS)			
Member ID / Last 4 of SSI	DOB (mm/dd/yyyy)		First Name	Last Name		⊠	C	
* Member ID, DOS and either DO	DB or First/Last Name are	require	d					

Required Filters

- 1. Enter the Member's nine (9) digit ID Number or Last four (4) numbers of Member's social security number (SSN)
- 2. Enter Date of Birth or Member's First Name/ Last Name
- 3. Enter Date of Service (DOS) current or past date in the format mm/dd/yyyy
- 4. Click ^C 'Check Eligibility' icon
 - Tip: Click the 'reset' con to refresh your search

This is a screen example of a member that is eligible with CenCal Health with the 'Y' indicator within the Date range. The screen will also identify Other Carriers and Medicare Parts ABCD as their primary health carrier (Medi-Cal is always second payer if they have a primary insurance plan), and identify if the member has a Share of Cost associated to their Medi-Cal benefit.

Member Info: As Of 08/02/	2019				Inquiry D	ate: 8/5/2019 1:19:47 PM - Confirmation: 89550
Member ID Medicare Parts - A,B,D	Name HIC#		DOB	Sex M	Special Case None Other Carriers HUMANA INSURANCE COM	PANY (800) 281-691
Eligibility History: Last 12 M	Months As Of 08/02/2	019				
✓ PCP Name (Phone) CenCal Health 8778141861			Plan Date range SBHI 08/01/2019 - 08/31.	2019 Y	SOC Benefits S999.00 Full	Other Insurance (COB) D - Medicare Part D Prescription Drug Coverage
Services: As Of 08/02/2019	9					
Medi-Services (MTD)	Allowed 2	Used 0	Remaining 2	Click to submi	t Medi-Reservation	
PT Visits (YTD)	18	0	18			
Case Management: Last 1	2 Months As Of 08/0	2/2019				
Program	Reason		There are no Case Mana	Case Manage gers during the date rate	er nge provided	Date Range
* Specialized Programs: CM = CenCal Health Case Mana PHD-CM = Public Health Depart TCRC = Tri Counties Regional C	igement Iment Case Manageme Center	nt		* Restricted Service Restricted to LTC & Restricted to Brea	 Noted by Eligible Aid Code: and Related Services (53) st and Cervical Cancer Treatmen 	ts (OR, OU, OT)

Primary Care Provider (PCP) Name (Phone) drop down indicates last (12) twelve months of eligibility as of the date of service entry.

PCP Name (Phone)	Plan	Date range	Eligible	800	Popofite	Other Insurance (COB)
= FOF Name (Fnome)	Fian	Date range	Engine	300	Deficitus	otiler insurance (COB)
CenCal Health 8778141861	SBHI	08/01/2019 - 08/31/2019	Y	\$999.00	Full	D - Medicare Part D Prescription Drug Coverage
CenCal Health 8778141861	SBHI	07/01/2019 - 07/31/2019	Y	\$999.00	Full	D - Medicare Part D Prescription Drug Coverage
CenCal Health 8778141861	SBHI	06/01/2019 - 06/30/2019	Y	\$999.00	Full	D - Medicare Part D Prescription Drug Coverage
CenCal Health 8778141861	SBHI	05/01/2019 - 05/31/2019	Y	\$864.00	Full	D - Medicare Part D Prescription Drug Coverage
CenCal Health 8778141861	SBHI	04/01/2019 - 04/30/2019	Y	\$864.00	Full	D - Medicare Part D Prescription Drug Coverage
CenCal Health 8778141861	SBHI	03/01/2019 - 03/31/2019	N	\$864.00	Full	D - Medicare Part D Prescription Drug Coverage
CenCal Health 8778141861	SBHI	01/01/2019 - 02/28/2019	Y	\$864.00	Full	D - Medicare Part D Prescription Drug Coverage
CenCal Health 8778141861	SBHI	12/01/2018 - 12/31/2018	Y	\$864.00	Full	D - Medicare Part D Prescription Drug Coverage
CenCal Health 8778141861	SBHI	11/01/2018 - 11/30/2018	Y	\$999.00	Full	D - Medicare Part D Prescription Drug Coverage
CenCal Health 8778141861	SBHI	05/01/2018 - 10/31/2018	Y	\$999.00	Full	D - Medicare Part D Prescription Drug Coverage

If you have a non eligible member, you will see a red 'N' listed under 'Eligibility' and you can 'Check with DHS' directly by clicking on the orange box above.



Member ID or Last 4 of	SSN	Date of Birth	Ħ	First Nar First Nar	me me	Last Name Last Name		Date of Service (DO 03/13/2019)	
Member is not engine	le on oar	13/2019								DHS Check SOC Hairs
Member Info: As Of 03	3/13/2019							Inquiry Date:	3/5/2019 1	1:44:28 PM - Confirmation: 89554
Member ID Medicare Parts - A,B,D		Name HIC#		DOB		Sex M	Special Case None Other Carrier	5		
Eligibility History: Last	12 Month	is As Of 03/13/2019								
PCP Name (Phor CenCal Health 8778141	ne) 1861			Plan SBHI	Date range 03/01/2019 - 03/31/2019	Eligible	SOC \$864.00	Benefits C Full D	ther Insu - Medicare	rance (COB) Part D Prescription Drug Coverage
Case Management: La	ast 12 Mo	nths As Of 03/13/20	19			$\overline{}$				
Program		Reason		There	e are no Case Managers d	Case Manage luring the date ran	ge provided			Date Range
Specialized Programs: CM = CenCal Health Case I PHD-CM = Public Health D TCRC = Tri Counties Regio	Manageme epartment onal Cente	nt Case Management			* F R R	Restricted Service: Restricted to LTC a Restricted to Breas	s - Noted by Eligi and Related Servi st and Cervical Ca	ble Aid Code: ces (53) incer Treatments (OF	8, OU, OT)	

Share of Cost (Soc)



A Share of Cost also known as SOC is a monthly dollar amount which a patient is required to pay before they become eligible with Medi-Cal and CenCal Health. We are not involved with determining this dollar amount, it is based on criteria supplied by the member to their Eligibility Worker at Department of Social Services. SOC patients are considered 'cash pay' patients until the SOC is met

every month and members will need to pay prior to becoming eligible for benefits. If a provider collects a payment prior to rendering service, it is their responsibility to clear the members share of cost (SOC) directly with DHCS.



It is very important to clear the SOC as soon as they are seen. In some circumstances, members will see other specialists in the same day or try and pick up their prescriptions, please print this receipt for the member for proof of payment.

A red 'Member is not eligibility' indicator will appear if a member is not eligible. The User can then check eligibility with 'DHC Check' DHS Check and/or clear the members share of cost through the 'SOC Trans' SOC Trans icon which is a direct link to DHCS login page to clear a members SOC.

Batch Eligibility



Batch Eligibility is used to verify eligibility for several Members. All provider types have access to this function and is not limited to Primary Care Physicians (PCP). The purpose of this screen is to allow providers to create files of members that are seen in their office on a regular basis, and view their eligibility within one file (i.e.CCS Members, Other Health Coverage Members, etc.)

To create a new batch, click the 'New Batch' ⁺ icon, and create your file name.



Batch Member Eligibility		
Batch:	Create a new batch file	+

To review an 'Existing Batch' click on the drop down box to locate the file.

	Batch Member Eligibility
Batch:	Existing Batch Files +

To add a member, click the green '+' 💼 icon, and an additional row will be added.

Enter the Member ID, Name (Last, First), Date of Birth (DOB), and click the save ricon. You will then see the eligibility status of the member you manually enter, and/or add from the eligibility screen.

			Batch M	lember Eliç	gibility				
Batch: CCS Members	•	Date:	08/23/2019		UPDATE DO	5			
Members Id	Name (Last, First)	Plan	DOB	Sex	DOS	Elig	COB/MCare	SOC	PCP
× 91	_	SBHI		F	08/23/2019	Y		\$0	Childrens Medical
× 91		SLOHI		F	08/23/2019	Y		\$1848	CenCal Health
90		SBHI		М	08/21/2019	Y		\$999	CenCal Health

The member will then be added to the list and list their eligibility status.

			Batch M	lember Eliç	jibility				
Batch: CCS Members	-								+ 3 1 >
+ Add Member		Date:	08/23/2019		UPDATE DOS	5			2
Members Id	Name (Last, First)	Plan	DOB	Sex	DOS	Elig	COB/MCare	SOC	PCP
× 91		SBHI		F	08/23/2019	Y		\$0	Childrens Medical
× 91		SLOHI		F	08/23/2019	Y		\$1848	CenCal Health
		CDUI		b.d.	09/21/2010	V		0009	ConCal Health

To delete a member from the list, click on the red box 🔼 icon, and then click save Ħ Batch Member Eligibility Batch: CCS Members * Date: 08/23/2019 UPDATE DOS Add Membe SBHI 08/23/2019 \$0 Childrens Medica SLOHI 08/23/2019 \$1848 CenCal Health SBHI М 08/21/2019 \$999 CenCal Health



				Batch M	lember Eligi	ibility				
atch:	CCS Members	•	Date:	08/23/2019		UPDATE DOS	3			+ <mark></mark> +
0	Members Id	Name (Last, First)	Plan	DOB	Sex	DOS	Elig	COB/MCare	SOC	PCP
×	91		SBHI		F	08/23/2019	Y		\$0	Childrens Medical
×	91		SLOHI		F	08/23/2019	Y		\$1848	CenCal Health
-	04		ODUI		and the second s	00/04/0040	V		0000	Can Cal Health



Create a new Batch copy an existing Batch File

Delete Batch File

Export to CSV File

If you make changes to this screen, the Warning box will appear.

- Save Changes
- Do not save changes, or cancel request
- Cancel request



Adding Member to Batch File from Individual Eligibility Screen

After viewing a members individual eligibility, you may add the member to a Batch File via the

icon. The member information will then auto populate to the file you want them added to

by clicking the

Add Member icon.

Member Eligibility

Member ID or Last 4 of SSN	Date of Birth	First Na First Na	me L	.ast Name _ast Name		Date of Service	2 (DOS)	ਤ + ≥	e C
* Member ID, DOS and either D	OB or First/Last Name are required	ł							
Member Info: As Of 03/28/2022						Inquiry Da	te:	T	
Member ID	Name			Sex M	Special Case None				BIC Date
Medicare Parts -	HIC#	DOB			Other Carrier	s			
Eligibility History: Last 12 Months	s As Of 03/28/2022								
▼ PCP Name (Phone)		Plan	Date range	Eligible	SOC	Benefits	Other Insurance	e (COB)	
Sansum Clinic - Pueblo Multi-	Specialty Clinic 8056817500	SBHI	03/01/2022 - 03/31/2022	Y Y		Full	N - None		
he user will then	have to determ	ine	what Batch	Add Mer	nbei 1	to Batch: 09/15/	2020	~	×

The user will then have to determine what Batch File you would like to add it to, or create a new Batch file and click 'Add Member'

						_
Add Member	to Batch:	09/15/2020	~			¢
New Batch:	Enter New Batch					
				Close	Add Member	



CONTACT US

If you need to give access to a separate user that have multiple accounts with other provider groups (e.i. Billers that bill for multiple providers), have questions or would like additional training please reference our website at www.cencalhealth.org/providers/providers/provider-portal/ or email CenCal Health's Web Master at www.cencalhealth.org/providers/providers/providers/providers/providers/providers/provider-portal/ or email CenCal

Behavioral Health Department (805) 562-1600

- Behavioral Health Treatment (ABA) & Mental Health Treatment Inquiries
- Member Case Management

Claims Department (805) 562-1083

- Claims Customer Service Support
- Claims & Billing Training
- Claims Grievances and Appeals

Provider Services Department (805) 562-1676

- Provider Portal Technical Issues
- Provider Practice Changes
- Contract & Credentialing Inquiries
- New Provider Orientation & Portal Demonstrations
- Provider Training

Pharmacy Services (805) 562-1080

- Medi-Cal Rx Transition
- Medical Pharmacy Management
- Drug Utilization Review
- Pain Management Resources

Medical Management (805) 562-1082

- Radiology Benefit Manager (Care to Care) Inquiries
- Adult & Pediatric Authorization Questions
- Authorization Questions

Member Services (877) 814-1861

• Member related inquiries