

## Provider Portal Member Eligibility

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## INTRODUCTION

Welcome to the CenCal Health Website [www.cencalhealth.org](http://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.



## 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 [webmaster@cencalhealth.org](mailto:webmaster@cencalhealth.org).

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:

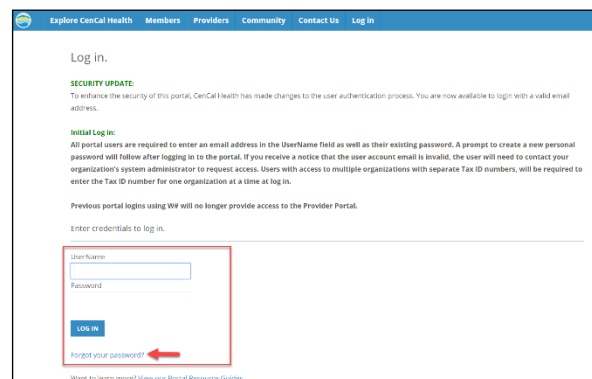
- Provider/Organizations Name
- Tax Identification Number
- National Provider Identifier (NPI)
- Physician/Administrator E-mail address (preferred, organizational email address)
- Point of Contact

### Portal Log In

Once you click on the  icon, 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.



### 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:

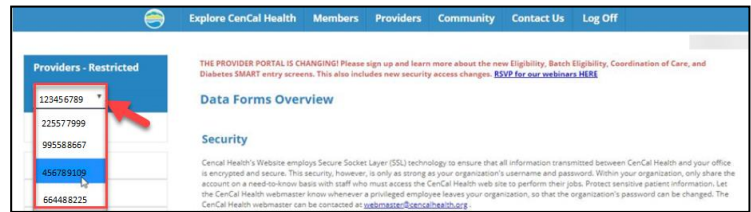
CenCal Health will automatically deactivate all User accounts if no activity of the portal is utilized after 90days. It is still the responsibility of the Administrative User to deactivate accounts if staff no longer work for your practice.

### 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.

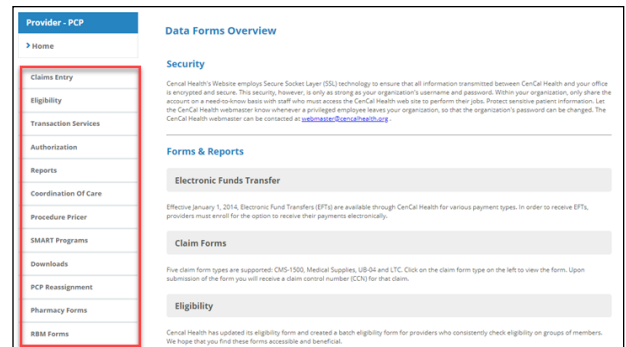
### Multi-User Access:

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.

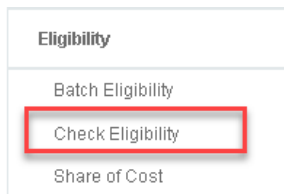


### DATA FORMS OVERVIEW HOME PAGE

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.





### 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 Member ID / Last 4 of SSN	Date of Birth DOB (mm/dd/yyyy)	First Name First Name	Last Name Last Name	Date of Service (DOS)		
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\* Member ID, DOS and either DOB or First/Last Name are required

### 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  'Check Eligibility' icon
  - ❖ Tip: Click the 'reset'  icon 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 Date: 8/5/2019 1:19:47 PM - Confirmation: 89550

Member ID	Name	Sex	Special Case
Medicare Parts - A,B,D	HIC#	DOB	None
			Other Carriers HUMANA INSURANCE COMPANY (800) 281-691

Eligibility History: Last 12 Months As Of 08/02/2019

PCP Name (Phone)	Plan	Date range	Eligible	SOC	Benefits	Other Insurance (COB)
CenCal Health 8778141861	SBHI	08/01/2019 - 08/31/2019	Y	\$999.00	Full	D - Medicare Part D Prescription Drug Coverage

Services: As Of 08/02/2019

	Allowed	Used	Remaining	
Medi-Services (MTD)	2	0	2	 <a href="#">Click to submit Medi-Reservation</a>
PT Visits (YTD)	18	0	18	

Case Management: Last 12 Months As Of 08/02/2019

Program	Reason	Case Manager	Date Range
There are no Case Managers during the date range provided			

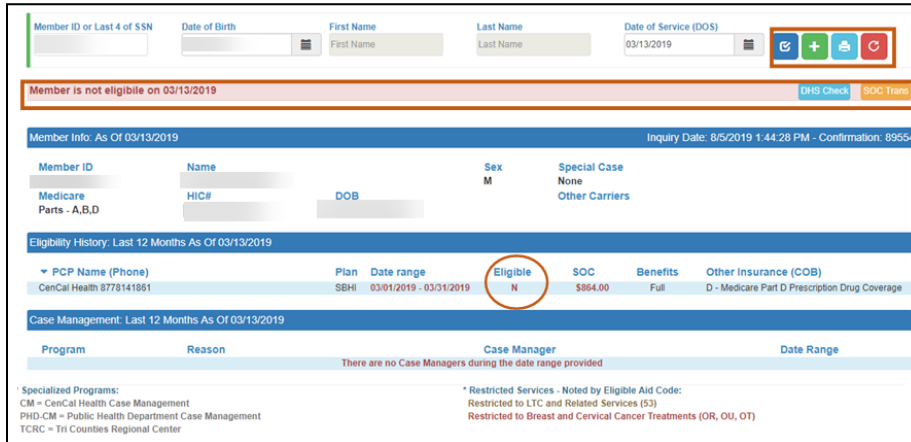
\* Specialized Programs:  
 CM = CenCal Health Case Management  
 PHD-CM = Public Health Department Case Management  
 TCRC = Tri Counties Regional Center

\* Restricted Services - Noted by Eligible Aid Code:  
 Restricted to LTC and Related Services (53)  
 Restricted to Breast and Cervical Cancer Treatments (OR, OU, OT)

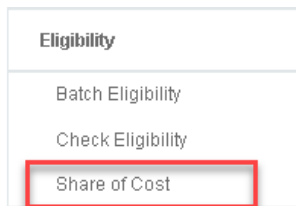
Primary Care Provider (PCP) Name (Phone) drop down indicates last (12) twelve months of eligibility as of the date of service entry.

PCP Name (Phone)	Plan	Date range	Eligible	SOC	Benefits	Other 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.

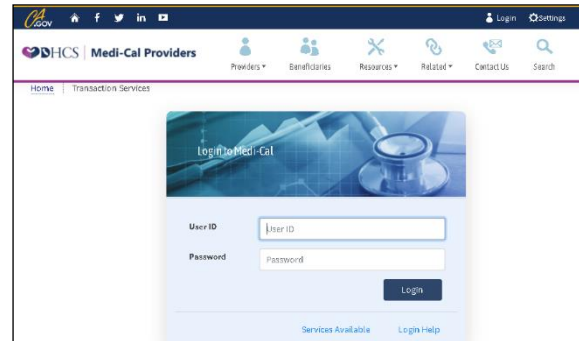


### Share of Cost (Soc)



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

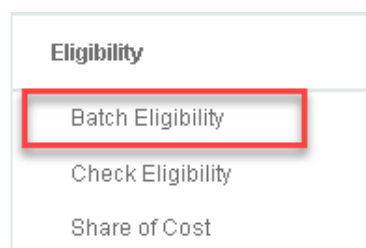
every month and members will need to pay prior to becoming eligible for benefits. If a provider collects a payment prior to rendering service, it is their responsibility to clear the members share of cost (SOC) directly with DHCS.




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 icon. You will then see the eligibility status of the member you manually enter, and/or add from the eligibility screen.

**Batch Member Eligibility**

Batch:

**Add Member** Date:  [UPDATE DOS](#)

Members Id	Name (Last, First)	Plan	DOB	Sex	DOS	Elg	COB/MCare	SOC	PCP
91		SBHI		F	08/23/2019	Y		\$0	Childrens Medical
91		SLOHI		F	08/23/2019	Y		\$1848	CenCal Health
9C		SBHI		M	08/21/2019	Y		\$999	CenCal Health

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

**Batch Member Eligibility**

Batch:

**Add Member** Date:  [UPDATE DOS](#)

Members Id	Name (Last, First)	Plan	DOB	Sex	DOS	Elg	COB/MCare	SOC	PCP
91		SBHI		F	08/23/2019	Y		\$0	Childrens Medical
91		SLOHI		F	08/23/2019	Y		\$1848	CenCal Health
9C		SBHI		M	08/21/2019	Y		\$999	CenCal Health

To delete a member from the list, click on the red box icon, and then click save .

**Batch Member Eligibility**

Batch:

**Add Member** Date:  [UPDATE DOS](#)

Members Id	Name (Last, First)	Plan	DOB	Sex	DOS	Elg	COB/MCare	SOC	PCP
91		SBHI		F	08/23/2019	Y		\$0	Childrens Medical
91		SLOHI		F	08/23/2019	Y		\$1848	CenCal Health
9C		SBHI		M	08/21/2019	Y		\$999	CenCal Health



**Batch Member Eligibility**

Batch:

Date:

	Members Id	Name (Last, First)	Plan	DOB	Sex	DOS	Elig	COB/MCare	SOC	PCP
<input type="button" value="✖"/>	91		SBHI		F	08/23/2019	Y		\$0	Childrens Medical
<input type="button" value="✖"/>	91		SLOHI		F	08/23/2019	Y		\$1848	CenCal Health
<input type="button" value="✖"/>	90		SBHI		M	08/21/2019	Y		\$999	CenCal Health

- Create a new Batch
- 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

**Warning** ✖

Would you like to save your changes?

### 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  icon.

### Member Eligibility

Member ID or Last 4 of SSN  Date of Birth  First Name  Last Name  Date of Service (DOS)

\* Member ID, DDS and either DOB or First/Last Name are required

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Member Info: As Of 03/28/2022 Inquiry Date:

Member ID	Name	Sex	Special Case	BIC Date
		M	None	

Medicare HIC#  DOB  Other Carriers

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Eligibility History: Last 12 Months As Of 03/28/2022

PCP Name (Phone)	Plan	Date range	Eligible	SOC	Benefits	Other Insurance (COB)
Sansum Clinic - Pueblo Multi-Specialty Clinic 8056817500	SBHI	03/01/2022 - 03/31/2022	Y		Full	N - None

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:

New Batch:



## 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/provider-portal/](http://www.cencalhealth.org/providers/provider-portal/) or email CenCal Health's Web Master at [webmaster@cencalhealth.org](mailto:webmaster@cencalhealth.org)

### **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