Provider Portal Reports

Quick Reference Guide Sections

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.

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.

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)
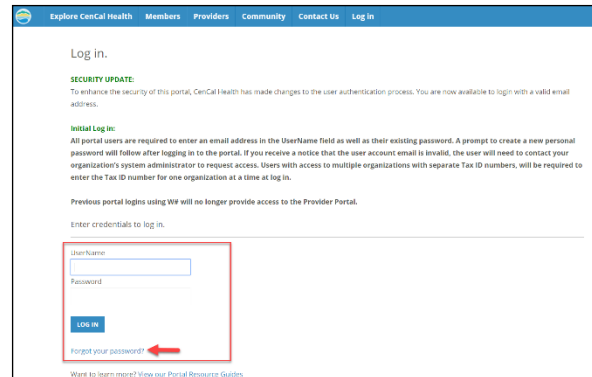- Point of Contact

Portal Log In

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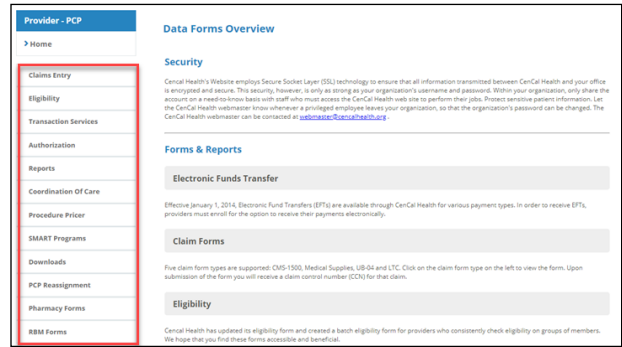
Multi-User Access:
Users could have 'multi-user' access for more than one group (i.e. third party billers that have access to more than one IRS#). In this instance, the User will be able to toggle to each specific IRS# they are assigned to by clicking the IRS drop down box.

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.

REPORTS

Capitation - This used by our contracted Primary Care Provider Groups and it is a monthly capitation report that shows their assigned member aid codes, ages, and guaranteed payment amount per member per month. Below will reflect payment of summary per PCP practice. This report can be downloaded or printed by clicking on the icon.

Claim Report – Allows a provider to review large volumes of claims at once. The maximum date span is 200 days. This report shows the same information as the Daily Claims Report but on a larger scale.

CenCal Health Claim Report
Plan - SBHI
Provider -
From 01/01/2022 Through 03/28/2022

CCN	Line#	Eff Date	End Date	Proc/Drug	Diagnosis	Quantity	Billed Amt	Paid Amt	Paid	Check#	EOP Date	Ex Codes
Member -												
202202	0100	20220125		99213	R102,Z113	1.0	$249.00	$154.14	PV		20220211	10,GC,G9
	0200	20220125		3079F	R102	1.0	$0.00	$0.00	PV		20220211	EL
	0300	20220125		3075F	R102	1.0	$0.00	$0.00	PV		20220211	EL
202202	0100	20220131		99213	M79675	1.0	$249.00	$44.00	PV		20220211	11,G9
	0200	20220131		3079F	M79675	1.0	$0.00	$0.00	PV		20220211	EL
	0300	20220131		3074F	M79675	1.0	$0.00	$0.00	PV		20220211	EL
202202	0100	20220131		73620	M79672	1.0	$67.00	$36.31	PV		20220211	10,GC
202202	0100	20220208		99214	M329,I7300,	1.0	$353.00	$217.30	PV		20220218	10,GC,G9
202202	0100	20220208		76830	R102	1.0	$320.00	$156.85	PV		20220225	10,GC
	0200	20220208		76856	R102	1.0	$317.00	$138.06	PV		20220225	10,GC
202203	0100	20220203		99214	R197	1.0	$353.00	$217.30	PV		20220311	10,GC,G9
	0200	20220203		3080F	R197	1.0	$0.00	$0.00	PV		20220311	EL
	0300	20220203		3077F	R197	1.0	$0.00	$0.00	PV		20220311	EL
202203	0100	20220315		99203	G5762,M79672	1.0	$292.00	$178.26	PV		20220325	10,GC,G9
	14					14.0	$2,200.00	$1,142.22				

Claim Status – Allows a provider to review all claims that have been submitted to date that are payable, deniable, or pending. You select which program you wish to run the report on and the provider number.

ER Report – This is an online tool for Primary Care Provider to assist in the care of their assigned members by monitoring ER usage.

Download to Excel

CenCal Health ER Report
Provider Billing# -

Facility Name	Service Date	Visit Time	Diag DX	Diag1	Diag2	Admit	Med Dispense	Days Supply	Language	OHC	File Date

Explain Codes – This is a list of the Explain Codes which appear on the Claims Editor, Daily Claims Report, Patient and Provider Profiles, and EOBs.

Patient Profile - This report shows all services performed for a particular member during a specified time period by the provider. Enter a valid member ID number, program, from/thru dates, then click on **Submit Form** for a member claim report which shows all claims you have submitted on behalf of that member. To do another report, simply click on the **Reset Form** button.

Payment History - Allows a provider to view their claims payment history and filter their payment types (ACA, CAP, EOP, EFT Verification, etc.) and view the payment method (EFT vs. Check) payment by CenCal Health, in addition to the from and to dates.
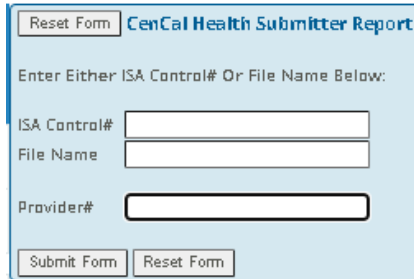

PCP 834 Download -This is a HIPAA compliant Case Management file which generates an online report. Benefit Enrollment and Maintenance documents objective is to clarify what segments CenCal Health's 834 will contain, along with clarifying the definition of "generic fields" (i.e., group policy number). Please click on the 'Download the SBRHA 834 Companion Guide' for more information.

[CenCal HEALTH® logo — Local. Quality. Healthcare.]

[Submitter Report](#) – Displays a report of claims submitted through a clearinghouse by a provider and gives the claim status w/ link to edit minimal service line data and ability to reedit.

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Reset Form  CenCal Health Submitter Report

Enter Either ISA Control# Or File Name Below:

ISA Control#  [                    ]
File Name     [                    ]

Provider#     [                    ]

Submit Form   Reset Form
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Note: HIPAA is clear that member information that is sent in a file to a payer or provider must be in HIPAA format

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/ or email CenCal Health's Web Master at 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