

Provider Portal Reports

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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.



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)
- Point of Contact



Portal Log In

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.

Explore CenCal Health	Members	Providers	Community	Contact Us	
Log in.					
SECURITY UPDATE:					
To enhance the secur address,	ity of this port.	el, CenCal Healt	th has made chan	ges to the user a	uthentication process. You are now available to login with a valid email
belief to a fee					
All portal users are i password will follow organization's syste enter the Tax ID nur	required to en v after logging m administra mber for one o	iter an email a in to the port tor to request organization a	iddress in the Us al. If you receive access. Users wi t a time at log in	erName field as a notice that th th access to mu	well as their existing password. A prompt to create a new personal e user account email is invalid, the user will need to contact your tiple organizations with separate Tax ID numbers, will be required to
Previous portal logi	ns using W# w	ill no longer p	rovide access to	the Provider Po	rtal.
Enter credentials to	o log in.				
UserName					
Password					
LOS IN					
Forgot your password	n 🔶				
Want to learn more?	View our Porta	Resource Guit	ses.		

Password Change Policy:

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

icon,

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.

ovider - PCP	Data Forms Overview
Home	
	Security
Claims Entry	Cencal Health's Website employs Secure Socket Layer (SSL) technology to ensure that all information transmitted between CenCal Health and your offic
Eligibility	is encrypted and secure. This security, however, is only as strong as your organization's username and password. Within your organization, only share to account on a need-to-know basis with saff who must access the CarCal Health web site to perform their jobs. Protects ensolve parient information, Let the CercCal Health vebmisser know whenever a privileged employee leaves your organization, to shart the organization's parient information. Let
Transaction Services	CenCal Health webmaster can be contacted at webmaster@cencalhealth.org.
Authorization	Forms & Reports
Reports	Electronic Funds Transfer
Coordination Of Care	
Procedure Pricer	Effective January 1, 2014, Electronic Fund Transfers (EFIs) are available through CenCal 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: CMS-1500, Medical Supplies, UB-04 and LTC. Click on the claim form type on the left to view the form. Upon
PCP Reassignment	submission of the form you will receive a claim control number (CCN) for that claim.
Pharmacy Forms	Eligibility
R8M Forms	Cencial 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.

REPORTS

Reports

- Capitation
- Claim Report
- Claim Status
- Daily Claims
- ER Report
- Explain Codes
- Patient Profile
- Payment History
- PCP 834 Download Submitter Report

<u>Capitation</u> - 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.

<u>Claim Report</u> – 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 - 58H1 Provider - From 01/01/2022 Through 03/28/2022													
CCN	Lin	e# Eff	Date	End Date	Proc/Drug	Diagnosis		Quantity	Billed Amt	Paid Amt	Paid	Check#	EOP Date	Ex Codes
	Member -													
202202	010	0 202	220125		99213	R102,Z113	3	1.0	\$249.00	\$154.14	рγ		20220211	10,GC,G9
	020	0 202	220125		3079F	R102		1.0	\$0.00	20.00	pγ		20220211	EL
	030	0 202	220125		3075F	R102		1.0	20.00	20.00	pγ		20220211	EL
202202	010	0 202	220131		99213	M79675		1.0	\$249.00	\$44.00	pγ		20220211	11,G9
	020	0 202	220131		3079F	M79675		1.0	\$0.00	\$0.00	pγ		20220211	EL
	030	0 202	220131		3074F	M79675		1.0	20.00	20.00	pγ		20220211	EL
202202	010	0 202	220131		73620	M79672		1.0	\$67.00	\$36.31	pγ		20220211	10,GC
202202	010	0 202	220208		99214	M329,1730	D.D.	1.0	\$353.00	\$217.30	pγ		20220218	10,GC,G9
202202	010	0 202	220208		76830	R102		1.0	\$320.00	\$156.85	pγ		20220225	10,GC
	020	0 202	220208		76856	R102		1.0	\$317.00	\$138.06	pγ		20220225	10,GC
202203	010	0 202	220203		99214	R197		1.0	\$353.00	\$217.30	pγ		20220311	10,GC,G9
	020	0 202	220203		3080F	R197		1.0	\$0.00	\$0.00	pγ		20220311	EL
	030	0 202	220203		3077F	R197		1.0	\$0.00	\$0.00	pγ		20220311	EL
202203	010	0 202	220315		99203	G5762,M7	9672	1.0	\$292.00	\$178.26	pγ		20220325	10,60,69
		14						14.0	\$2,200.00	\$1,142.22				

<u>Claim Status</u> – 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.

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

ľ		5										
ſ	CenCal Health ER Report											
	Provider Billing# -											
	Facility Name	Service Date	Visit Time	Diag DX	Diag1	Diag2	Admit	Med Dispense	Days Supply	Language	онс	File Date
	Copyright 2022 Ce	nCal Health. All	rights reserv	ved.								



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

		CenCal Health Explain Code Listing			
		Paid Flags RE - Raw Electronic - The claim has been entered but not processed. PY - Paid - The claim has been paid. DY - Denied - The claim has been denied. DN - Deniable - The claim is pendid for more with the paid. DN - Deniable - The claim with be paid. NN - Deniable - The claim with be denied. NN - Pended - The claim with be denied. NR - Internal Pend - The claim with claim with a speak on an ECB without review.			
Code	Туре	Description	CARC	RARC	
02	Pay	SERVICE IS COVERED UNDER CAPITATION AGREEMENT	24		
03	Pay	SERVICE/ITEM LINE FINALIZED	96	N10	
04	04 Pay SERVICE PAID PER MEMBERS CCS ELIGIBILITY STATUS				
05	Pay	PAID PER POE ATTACHED TO CLAIM	96	N10	
06	Pay	CLAIM PAID AT HOSPITAL PER DIEM RATE	96	N442	
07	Pay	HOSPITAL ANCILLARY CHARGES INCLUDED IN DAILY PER DIEM RATE	97	N70	
80	Pay	PAID AT PERCENTAGE OF BILLED CHARGES	96	N442	

<u>Patient Profile</u> - 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.

				Cen	Cal Health P	atient Pro	ofile					
					Plan - S	BHI						
				Prov	ider -							
				Membe	t -							
				From 6	4/01/2017 The	ouch 64/30	/2017					
				(1418)		course o our						
CCN	Line#	Eff Date	End Date	Proc/Drug	Diagnosis	Quantity	Billed Amt	Paid Amt	Paid	Check#	EOB date	Ex Codes
201704;	0100	20170401	20170402	99213	M722.M3500	1.0	\$150.00	\$8.00	PN			11
201704	0200	20170405	20170405	99213	M722.M3500	1.0	\$1,050.00	\$0.00	PN			11
201704;	0100	20170425	20170425	99213	M722,M3500	1.0	\$150.00	\$0.00	PN			11
201704:	0100	20170415	20170415	90715	M722.M3500	3.0	\$1,900.00	\$11.07	PN			1L.10
201704.	0100	20170407	20170407	43249	M722	1.0	\$4,900.00	\$0.00	DN			K6
0	5					7.0	\$8,150.00	\$11.07				

Continue

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<u>Payment History</u> - 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.

					Paymo	ent History				
Provider		▼ Type ▼ Method ▼	Pmt ID	PmtAm	TRN		From Date	to Date	1	Q 🗷
Туре	NPI	Payee Name	Method	Pmt Id	Date	Amount	Account Type	TRN	Account Number	Payee Address
EOP			EFT				CHECKING			
IHA			EFT				CHECKING			
HRP			EFT				CHECKING			
EOP			EFT				CHECKING			
EOP			EFT				CHECKING			

<u>PCP 834 Download</u> -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 '<u>Download the SBRHA 834</u> <u>Companion Guide'</u> for more information.



<u>Submitter Report</u> – 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.

Reset Form	CenCal Health Submitter Report
Enter Either I	SA 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 www.cencalhealth.org/providers/provider-portal/

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