CorrectCare – Integrated Health

Information Technology Department

V2Benefits Web Portal

IN THIS DOCUMENT

SUMMARY

The purpose of this document is to provide users information about the CorrectCare Integrated Health (CCIH) V2 Benefits Web Portal (aka "Provider Portal"). The Provider Portal is an invaluable tool for healthcare providers and their associates to check status of medical claims. In particular, it informs users how to create an account as well as how to access, navigate, and use the web site.

Every taxpayer identification number (TIN) that an organization submits claims under will require a separate account. All user accounts are administered by CCIH.

CCIH will endeavor to maintain the maximum extent of availability for all users to the content and functionality of the Provider Portal (i.e. 24 hours a day, every day). Technical support for the portal will be available business days from 8 AM to 5 PM Eastern Standard Time, (859) 225-7999.

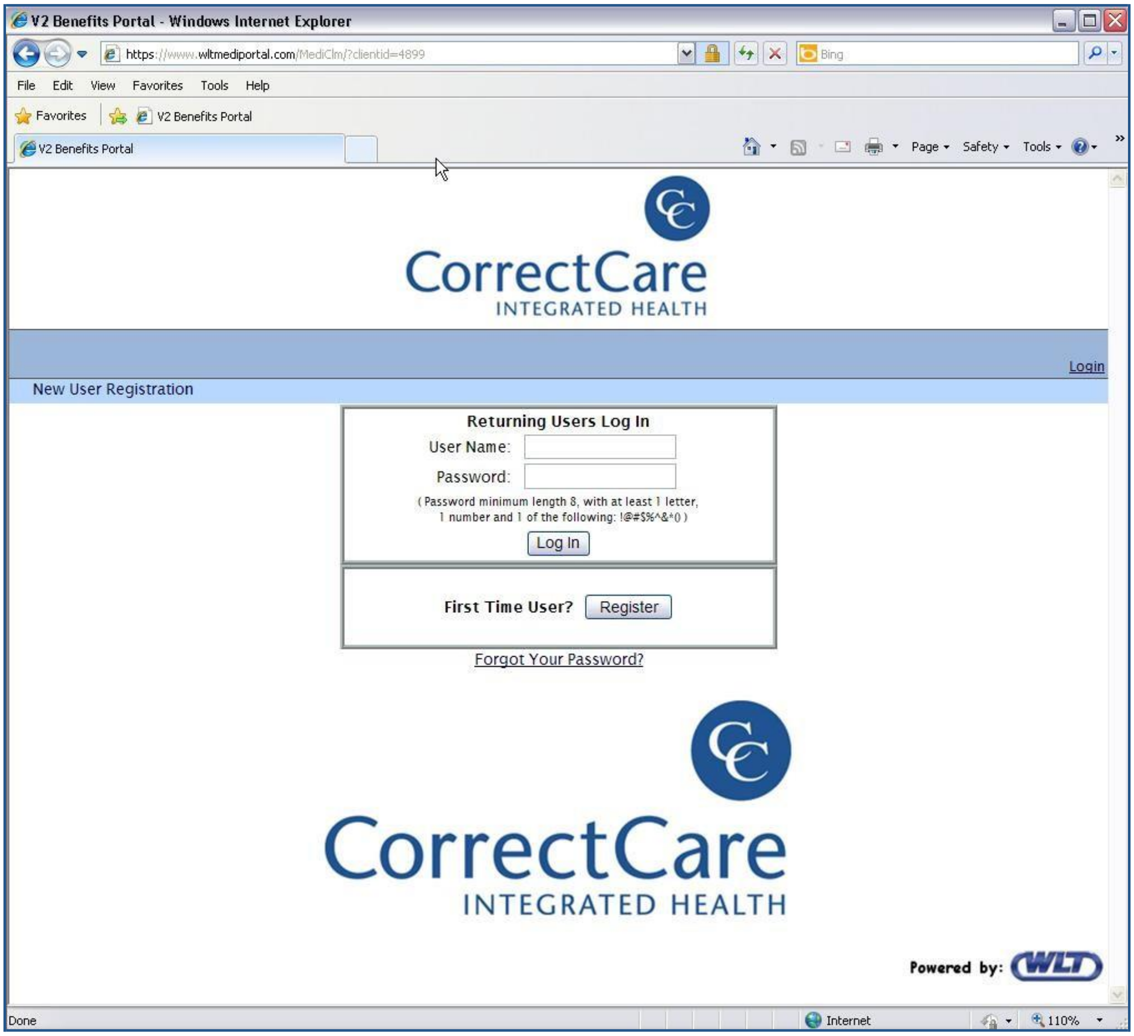
NOTE: All the step-by-step instructions included in this document were developed by using the Start menu that appears by default on Windows XP and Internet Explorer 8. If you have modified your Start menu or Internet Explorer layout, the appearance and steps might differ slightly.

Revised: 2/29/2012

GETTING TO THE SITE

Internet Explorer versions 7 and higher are supported on this web site. Other browsers (such as Mozilla's Firefox) may also work but are not supported.

The Provider Portal is accessible at the following web link:
https://www.wltmediportal.com/MediClm/?clientid=4899



Users are advised to bookmark the Provider Portal link in their browsers (some may also create desktop shortcuts to the Provider Portal).

REGISTRATION

All users are required to create an account and be authorized access to Provider information. There are THREE phases to this process: (1) creating a user account, (2) verification, validation, and activation; and (3) notification.

PROCEDURE

Creating a User Account

1. On the web **Log In** page, locate the "First Time User?" section and click the **Register** button. The next page prompts the user to sign up for a new account
2. On the Sign Up for Your New Account page, select **Provider** option in the **I am a/an** dropdown list and click **Next**. (See below)

3. The **Personal Information** page, requests the user to enter person information. Enter in the information requested.

All fields must be filled in.

a. Click **Previous** to return to the prior page displayed (Step 2), or
b. Click **Next** to proceed to Step 4.

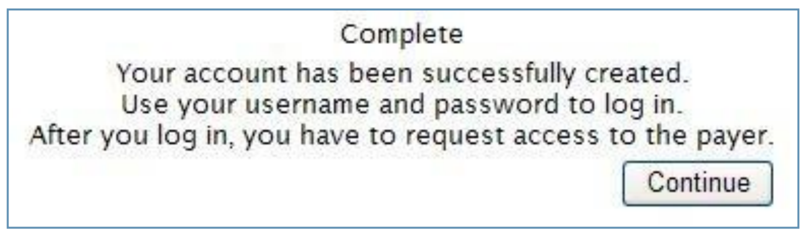
4. On the **Sign Up** page, the user must provide a User Name and secure Log On credentials.

All fields must be filled in.

c. Click **Previous** to return to the prior page displayed (Step 3), or

d. Click **Create User** to proceed.

5. The web page will display a message indicating that the account has been created. Click **Continue**.



6. This will return the user to the web **Login** page.

7. Following successful creation the user will be logged into the portal where contact information should be verified. (Refer to the **Portal Navigation** section of this document.)

8. The user must also request access to the appropriate payer. (See below)
    a. Click on the **Payer Access** tab.
    b. Select **CorrectCare Integrated Health, Inc**. on the **Choose a Payer** dropdown list.
    c. Click the **Submit Request** button. This action causes a table to appear with information regarding the request. The status of the request will be "Pending". (See below).

The "Payer" institution will receive notification of the Payer Access request. Upon review, the Payer institution will either approve or deny the request. They may notify the user via email about the decision.

The user can log in to the web portal any time to view the status of the request by navigating back to the **Payer Access** tab and viewing the **Request Status**.

(See "Initial Setup- Requesting Payer Access" under the later in this document

Verification, Validation, and Activation

New users do not have to do anything during this phase. The information in this subsection is purely informational.

All new users will be screened by CCIH to verify the information the user provided is accurate and the user has been authenticated.

If the user is properly verified and approved, the new user's account will be given access to the Provider's claim information. However, if the user is not approved, the account will still exist, but it will not have access to any Provider claim information.

IMPORTANT

Until a user's account is 'activated' ALL web portal functions and access to data is disabled. Provider Portal functionality will be enabled when your account is activated (following the approval of your account by CCIH) you will receive account activation or denial notification via email.

Notification

Authorized users will be notified by email (usually within 2-3 business days of submission) whether the account has been approved or denied.

PROVIDER PORTAL LOGIN

Web Login

The following set of instructions is for logging into the web portal.

1. If web browser is not running, launch Internet Explorer.
2. Browse to https://www.wltmediportal.com

(or the direct link: https://www.wltmediportal.com/MediClm/?clientid=4899)

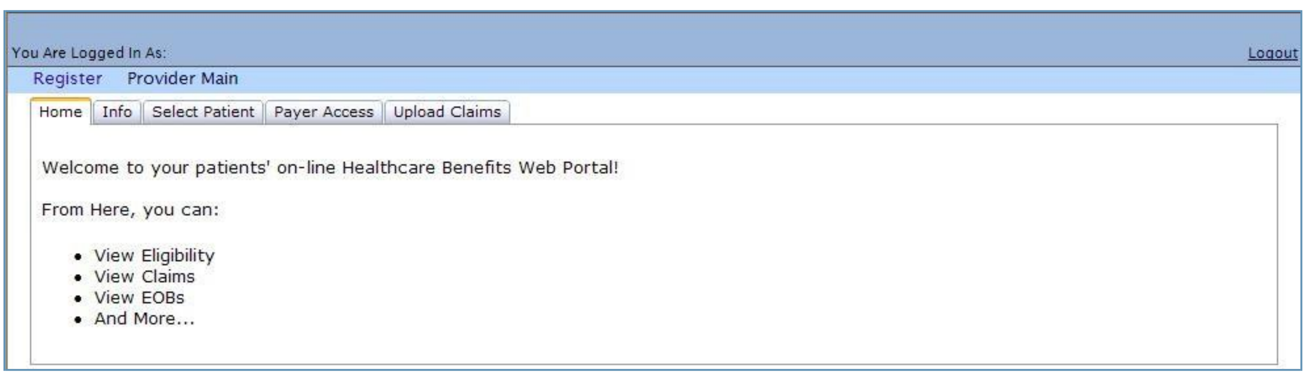
3. On the **Log In** page enter a valid User Name and Password, then click the **Log In** button.

PORTAL NAVIGATION

In general, the organization of the content is presented in the style of a file folder system (folder tabs). The links and tabs permit the user to easily navigate through the portal.

Initial Login Page

A user with "Provider-level" who logs into the portal is immediately presented with the default web page displaying the **Home** tab.



Upon logging into the portal, this web page displays the following content by default:

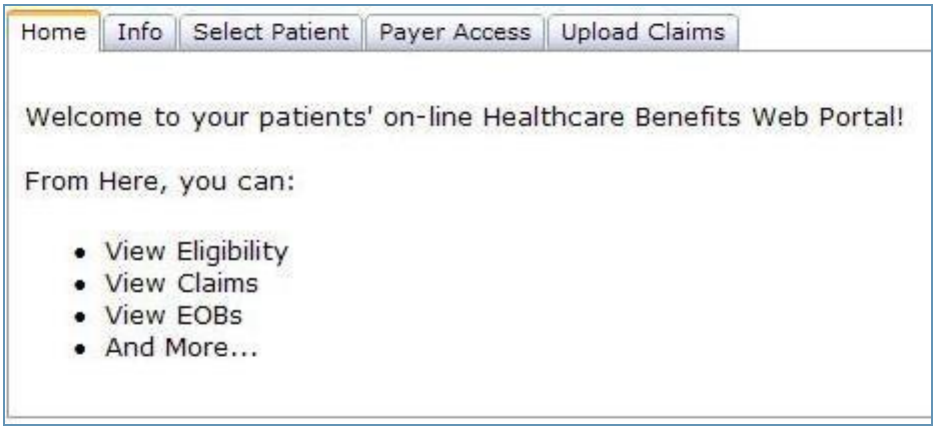
- A message showing the user logged in: **You Are Logged In As:**
- A **Logout** link
- A **Register** link
- A **Provider Main** link
- The **Home** tab

The links mentioned above are available at all times the user is logged into the web portal.

Tabs Overview

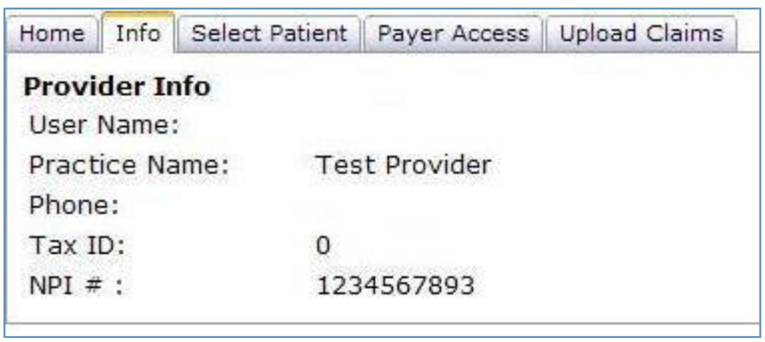
Home Tab

The **Home** tab introduces the web portal. It is for informational purposes only.



Info Tab

The **Info** tab displays the user's information as it was entered during registration. It is for informational purposes only.



Select Patient Tab
From this tab, users are able to lookup patient information based on search criteria.

Payer Access Tab
On this tab, the user applies for access permission from one or more of the listed providers.

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Upload Claims Tab
This tab is not to be used

HOW TO USE THE PORTAL

In general, the organization of the content is presented in the style of a file folder system (folder tabs). The links and tabs permit the user to easily navigate through the portal.

Searching Patient Information
A user can search for patient information in several ways. The following section provides instruction on how to search patient records.

1. Login to the web portal.
2. Click on the **Select Patient** tab. The search criteria fields will be disabled, until a Payer is selected.

3. Select the corresponding Payer institution on the **Choose a Payer** dropdown box. This action will enable the search criteria fields on the tab.

4. Once the fields are enabled, the user should select / enter the criteria by which to search for patient records.
5. Depending on the method the user selects to search patient on, appropriate style fields will appear. (The following series of images show how the tab updates depending on the search criteria. Below each image is an explanation.)
6. All search fields are required. That is:
    a. For Member ID, the **Member ID** (from ID Card) and **Date of Birth** fields must contain values. If searching by the Offender ID add LA in front of the 8 digit Offender ID.
    b. For **Social Security #**, the Card Holder's SSN and Date of Birth fields must contain values.
    c. For **Name**, the First Name, Last Name, and Date of Birth fields must contain values.

7. Click the **Select** button to start the search.

Patient information can be looked up based on whether the patient is the insured individual or is a dependent of the insured individual. **The Insured** is the default selection in the **Patient is:** dropdown list.

Next the user must select the method of how to identify the patient. That is either by: (1) member ID, (2) Social Security Number, or (3) name. **Member ID** is the default selection.

NOTE: **all active search fields must be filled in**. This requirement forces the user to enter search criteria that will uniquely identify a patient.

8. Once the fields are enabled, the user should select / enter the criteria by which to search for patient records. The following series of images show how the tab updates depending on the search criteria. Below each image is an explanation.

The figure above shows the search fields displayed when the user selects **Member ID** from the **I want to look up patient by:** dropdown list.

The figure above shows the search fields displayed when the user selects **Social Security #** from the **I want to look up patient by:** dropdown list.

The figure above shows the search fields displayed when the user selects **Name** from the **I want to look up patient by:** dropdown list.

Patient Search Results

The following describes the Patient Selection search results. The inquiry is returned in a folder (tab) format.

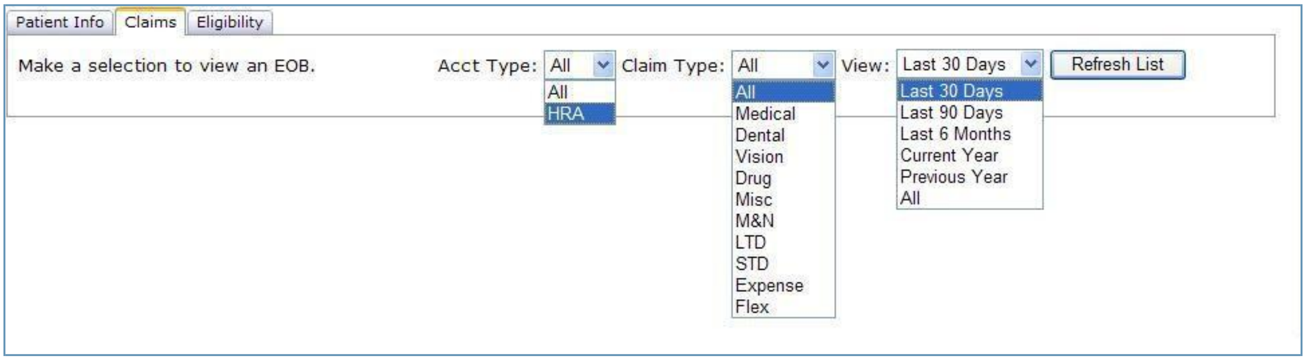
Patient Info Tab

This tab displays information relating to the patient.

NOTE: No test data was available to render figures depicting the resulting Claim or eligibility details.

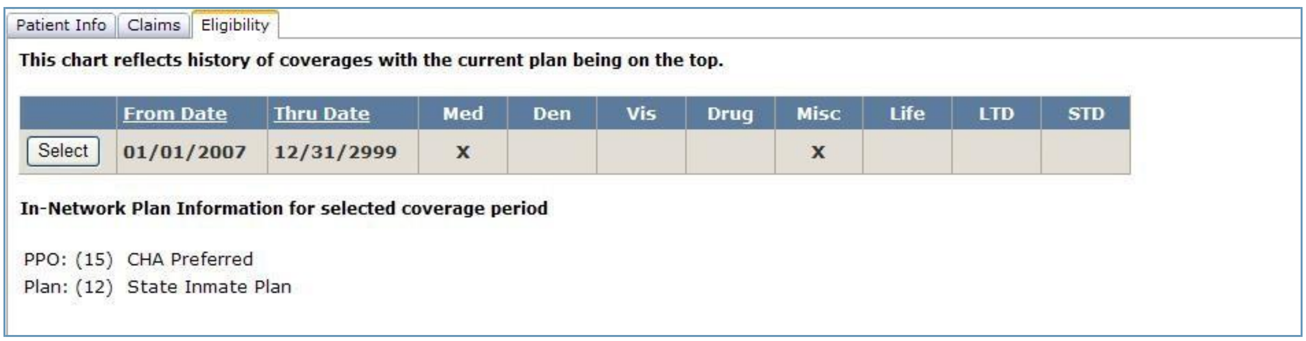
Claims Tab

This tab enables a user to select claim information to view. There are a couple of filters available to further refine the list of claims. Users can list claims by any combination of: (1) Account Type, (2) Claim Type, and (3) View (date).



Eligibility Tab

This tab lists the history of coverages for the patient in chronological order beginning with the most recent coverage. The user can view detail coverage information by clicking the **Select** button next in the corresponding row of interest.



Uploading Claims

To upload a claim file, the user must use the **Upload Claims** tab.

1. Log in to the web portal
2. Click on the **Upload Claims** tab.
3. Select a Payer institution from the **Choose a Payer** dropdown list

NOTE: Depending on the permissions associated with the selected Payer, the user may not be able to upload files.

4. If the user is permitted to upload claim files, the **Claim File to Upload** text box, **Browse** button, and **Send** button will become enabled.

5. The user must select the file to upload
    a. Either type the fully qualified path and file name into the text box, or
    b. Click the **Browse** button and locate the file
6. Click the **Send** button to upload the file

TROUBLESHOOTING

The following are some of the more common problems encountered with using the web portal and their associated workarounds.

Thus far, limited information is available on this content.

Symptom: Invalid User Name at Log In. “Invalid username. Please try again” message.

Resolution: Reenter a valid username.

Symptom: Invalid Password at Log In.

Resolution: Reenter a valid password associated with the given username.

REFERENCES

None