Provider Portal
El Paso Health
Training Guide

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Revision History

Name	Date	Reason for Changes	Version
Campbell A. Tole	8/14/2024	Document creation	V 1.0

Approvals

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Table of Contents

The following processes in this training guide are to be followed by El Paso Health Plan Providers. This training guide details how to access and navigate the EPH Provider Portal and view EPH member information as needed.

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Section 1: How to create your El Paso Health Provider Portal Account

In order to create a user account to access the portal each provider must successfully complete the following steps of the sign-up process:

- Review and agree the website License Agreement
- Choose their role
- Enter provider information
- Create user account and password
- Select and answer user/password security questions
- Verify provider information
- Complete sign-up

To begin the sign-up process, the provider clicks on **_Proceed to our sign up process_** from the login page.

Step 1 - License Agreement

The Provider must first review the License Agreement. To continue, click on **Agree**. If the provider clicks **Disagree**, he/she will be returned to the login page.

Step 2 – Select Provider Type

Choose the appropriate option from the drop down list.
Admin Role- The same access as a standard user with the addition of reviewing provider specific reporting such as claim remittance advice.
Standard User- Access to look up member eligibility, look up and submit authorizations, and review provider claims.
**STAR+PLUS or Medicare AdvantageUser**- Access to look up member eligibility, look up and submit authorizations, Service Coordination, and review provider claims.

Step 3 – Verify Provider

At the verify step, the provider completes the fields that are displayed. After entering the appropriate information, the provider clicks on Add TIN/NPI button.

After clicking on **Add TIN/NPI,** the provider will then be prompted to provide their **TIN** and **NPI**. When complete, click **Add**. One TIN and NPI are required to create an account.

After a successful **TIN** and **NPI** entry, the provider will select **Next.**
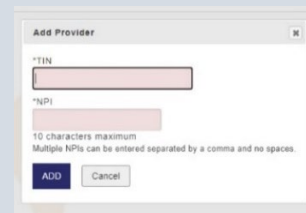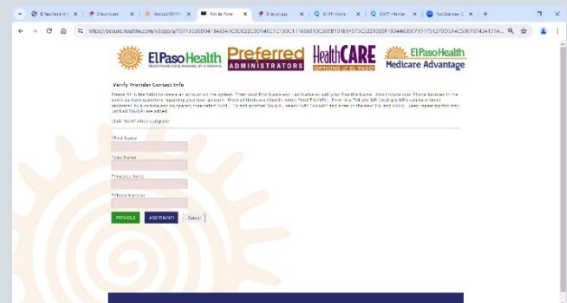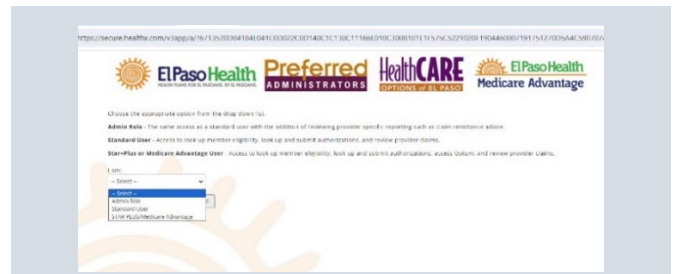
Step 4 - Create Login Information

Next the provider types in their email address for his/her user account which will be also used for their username. The password must have at least eight characters up to 30 characters, and can contain letters, numbers, and any of these special characters: _.!#$%&*@~^\?/+. Password must contain one number and one letter.

In case the provider forgets his/her password for the user account, the provider selects the three security questions and enters a unique answer to each question. These questions must be successfully answered in order to retrieve his/her password in the future.

To complete the sign-up process, click on *Next*. The provider will then have the opportunity to confirm his/her personal information and user account. If the provider clicks on *Cancel*, he/she will be returned to the login page. If the provider clicks on *Previous*, he/she will be returned to the Verify Step.

Step 5 - Registration Complete

After the username and password are created, confirmation that registration was completed is displayed. Before the provider can continue, he/she is prompted to review the information displayed. If correct, the provider clicks on Finish.

Verify Login Information
Please review to confirm the login information is correct. Click "Finish" to complete your registration.

Username: test.elpaso.provider5

First Name: Joe
Last Name: Provider
E-Mail Address: abaird@healthx.com

Practice Name: Children's Hospital
TIN: 123456789
NPI(s): 1234567890

PREVIOUS   FINISH   Cancel

Create Login Information
Enter a valid e-mail address. Your email address will be your username.
Password: At least 8 characters/Alpha-numeric and special characters -_.!#$%&*@~^\?/+
Click 'Next' at the bottom of the page when complete.

Username

Email Address

Confirm Email Address

Password

Confirm Password

Security Question 1
-- Select Question --

Security Question 2
-- Select Question --

Security Question 3
-- Select Question --

PREVIOUS   NEXT   Cancel

Step 6 – Provider Receives Email

The provider receives an email confirming the account creation.

Home Page

Once the provider account has been created and/or the provider has securely logged into the portal.

The following features can be accessed from the home page:

- The provider's name and phone that is logged in will display under the welcome message
- Quick Links to other online resources:
  - Submit a claim
  - Submit claim attachments
  - Provider Appeals/Recoupments
  - Amend Authorizations
  - Credentialing Process
  - EFT Form
  - Texas Medicaid Provider Enrollment Management System (PEMS)
  - Electronic Visit Verification (EVV)
  - Provider Demographic Form
- Navigation links to:
  - Eligibility and Benefits Look Up
  - Claims and Payment Look Up
  - Authorization Look Up and Submissions
  - Reports (Administrative User only)
  - Quality Reports (Administrative User Only)

QI Correspondence (Administrative User Only)

Section 2: How to Log in to El Paso Health's Provider Portal

Scenario: You want to access El Paso Health's Provider Portal from the internet.

Application(s): Internet browser to EPH Provider Portal web page

Role: Provider User

Start: Begin to access the portal from the EPH website

1. Go to: https://www.elpasohealth.com/

2. Click on **Provider Login** located at the top your screen

3. Click **Continue** on the pop-up notification
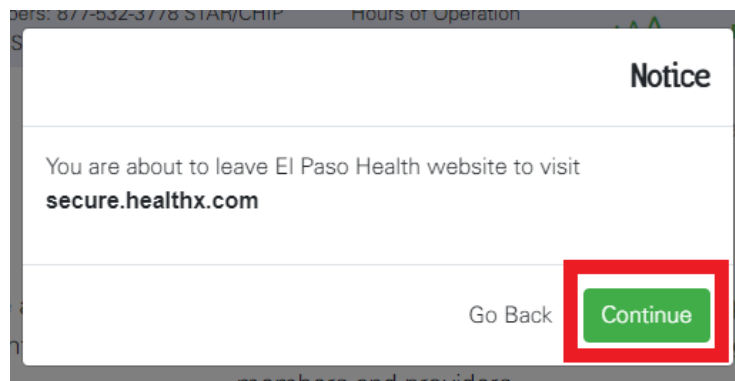
4. Enter your **Username** and **Password**
5. Click **Submit**

El Paso Health
HEALTH PLANS FOR EL PASOANS. BY EL PASOANS.

Preferred
ADMINISTRATORS

HealthCARE
OPTIONS of EL PASO

El Paso Health
Medicare Advantage

Welcome to the El Paso Health provider portal!

Log in to:

- View patient's eligibility status and benefit information
- Verify patient claims
- Download reports
- Request prior authorizations
- And more!

Login

Username

Password

SUBMIT

Forgot your username or password?

Need a username and password?
Proceed to our sign up process.

Contact Us

If you have questions or need assistance, contact the Provider Relations Department at:

915-532-3778
Toll-Free: 1-877-532-3778

Our customer service hours are Monday through Friday between 8:00 am and 5:00 pm MST.

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Section 3: Eligibility Look up Information

Providers can inquire on members' eligibility information. Select "Eligibility and Benefits" from the top navigation, the following searches can be accomplished:

- Search on, by entering a Member ID
- Search on, by entering a Last Name AND Date of Birth
- Search on, by entering multiple Member IDs and selecting Enter after each ID

Select a name from the results to open the eligibility view.

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Section 4: Claims and Payment

Providers may submit a claim thru the portal which will require a separate account with Availity.

Providers may also search status of a claim by selecting their NPI and entering one of the following:

- Claim Number
- Member ID and Date of Birth or
- Begin and End Dates

Select a claim number to view payment details.

Section 5: Authorizations

Providers can submit authorizations, amend authorizations and inquire on members' authorization status.

Providers also have access to utilize our Medicaid/CHIP Prior Authorization Tool.

Section 6: Prior Authorization Tool

Selecting the Medicaid/CHIP Prior Authorization Tool will prompt you to answer the following questions in the chart shown.

If No is selected for all of the questions, you will be asked to enter CPT codes to verify if an authorization is needed.

Once the CPT code is entered, you will receive one of the following responses, No authorization is required, Authorization required, or no authorization is required unless the following condition is met

Section 7: Reports

In the Reports tab, Providers will be able to view RA's, Rosters, ER Utilization, THSteps, and PPV Reports.

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Section 8: Quality Reports

In the Quality Reports tab, Providers will be able to view their quality measures and metrics.

Section 9: QI Correspondence

Providers will be able to view medical records request from El Paso Health's Quality Improvement Department.

Section 10: How to Navigate the Portal Dashboard for Service Coordination Information

Scenario: Upon logging in to the Provider Portal you are presented with numerous options and would like to navigate to the portals service coordination information.

Application(s): EPH Provider Portal

Role: Provider User

START: From El Paso Health Provider Portal Login

1. Click on the **Service Coordination** tab

You will find yourself in the Portal Dashboard. From here, you can navigate to member information needed.

The Dashboard will display three Dashboard Tiles. Each tile is configured to show the following information for a 30-day period. They include the following:

- Care Plan
- My Members
Assessments
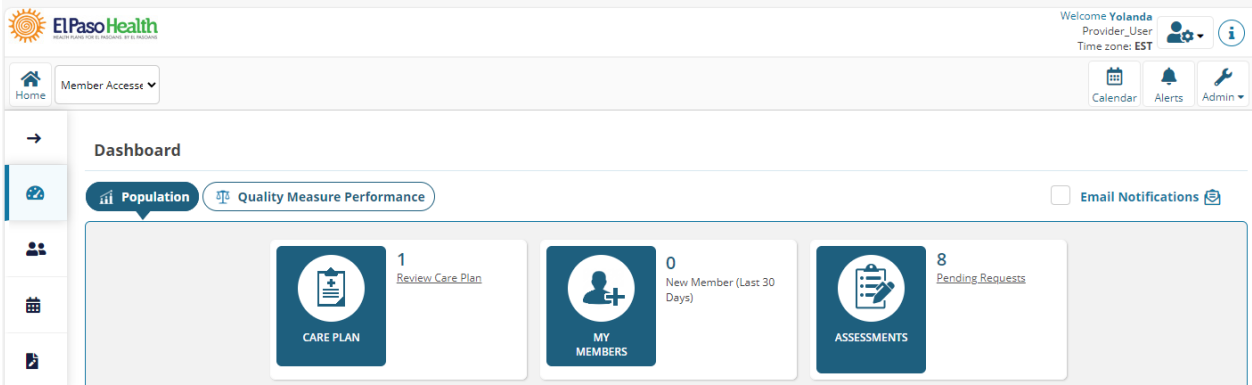
To the left of the Dashboard is the Navigation Menu.

2. Hover over navigation **menu icons** for each tab name and information access point.
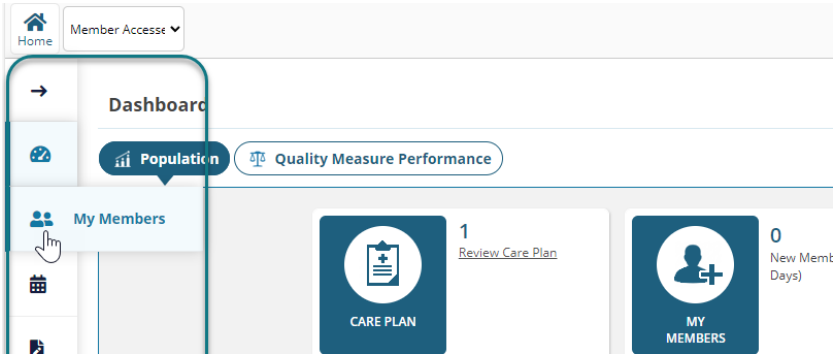
Or

2. Click on the top **arrow** to expand the navigation menu to view all of the names at once.

3. Click the **arrow** again to collapse the menu.

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Section 11: How to View New Members Assigned to You

Scenario: You will receive notification when new members have been assigned to you.

Application(s): EPH Provider Portal
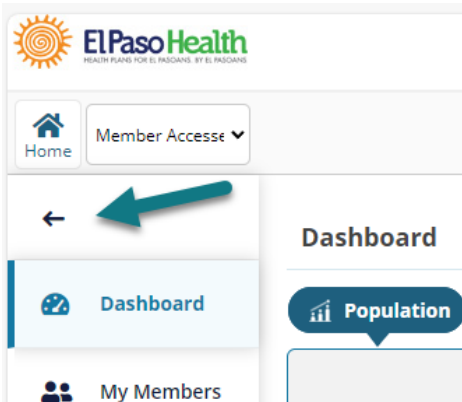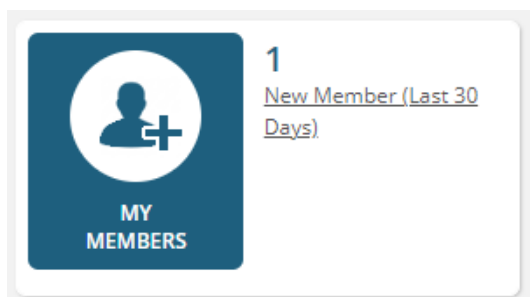
Role: Provider User

START: Dashboard Tiles

The **My Members** tile displays the number of new members that have been assigned to the Provider User **within the past 30 days.**

1. Click the **New Member hyperlink** in the **My Members** tile to display new members assigned

Section 12: How to View All Members Assigned to You

Scenario: You may want to view all members under your care in the Provider Portal.

Application(s): EPH Provider Portal

Role: Provider User

START: My Members

To view all members assigned to the Provider,

1. Click **My Members** from the side navigation menu

Scenario: You may want to know who the Primary Service Coordinator (also known as Primary Care Manager in OICS) for a member is so that you may contact them for information.

Application(s): EPH Provider Portal

Role: Provider User

START: My Members

By default, the **My Members** display list does **not** show the **Primary Care Manager** column. To include the Primary Care Manager column,

1. Click on the **Select** dropdown menu,
2. Select "**Primary Care Manager**" from the list
3. Next click on the "**Show**" button

Section 13: How to View and Acknowledge a New Member Care Plan Pending Your Review

Scenario: When a new or updated Care Plan for a member was made available for you to review and acknowledge.

Application(s): EPH Provider Portal

Role: Provider User

START: Dashboard Tiles

The Care Plan tile displays an alert that a care plan has been sent to the Provider to review and acknowledge.
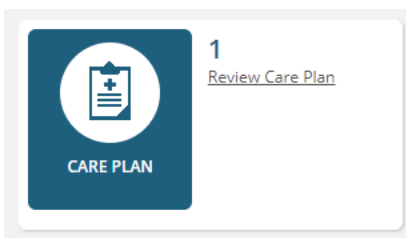
- If a care plan is pending review, a number will display above "Review Care Plan."

- A zero will display if there are no plans pending review or that have been sent in the past 30 days.

1. Click the **Review Care Plan hyperlink** in the tile to view a care plan pending review

The **Requests Received widget** will open and display care plans pending review

Click on the **Care Plan Review hyperlink** to display the member's care plan

View Care Plan

The Care Plan includes the following information:

- Member Primary Information
- Medical Conditions
- Medications
- Care Team, including the name and phone number of the Primary Care Manager
- Targeted Interventions
- Clinical Interventions

2. Once review of the care plan is complete, the user can optionally **Acknowledge** their review of the care plan
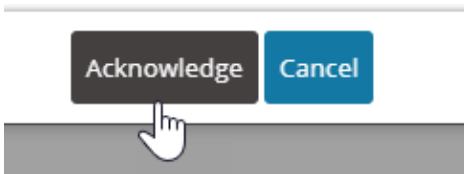
3. Add **Notes** on the review

Acknowledge Review Care Plan

Primary Care Manager : Sara (

Request From : Sara (

Care Member : Olivia Bosa

Notes :

I concur with this care plan.

[Send] [Close]

4. Click **Send** to complete the review process

Request Received

Care Plan Review ▾ | Member Name | Referred/Acknowledged Date: Referred Date ▾ | From Date 📅 | To Date 📅 | All ▾ | 🔍 🔄 📄 Export to PDF ⬗ Export full Care Plan

	Member Name	Care Plan Review	Referred Date ↓	Referred By	Acknowledged By	Acknowledged Date	Last Updated Date	Status	View Notes
⋮ ☐		Care Plan Review	07/02/2024		Yolanda Lagunas	07/02/2024	07/02/2024 07:24 PM	Acknowledged	👁
⋮ ☐		Care Plan Review	06/27/2024		N/A	N/A	N/A	Pending	N/A
⋮ ☐		Care Plan Review	04/15/2024		N/A	N/A	N/A	Pending	N/A

Once a care plan has been reviewed, the Care Plan dashboard will update to reflect the number of care plans remaining to be reviewed.

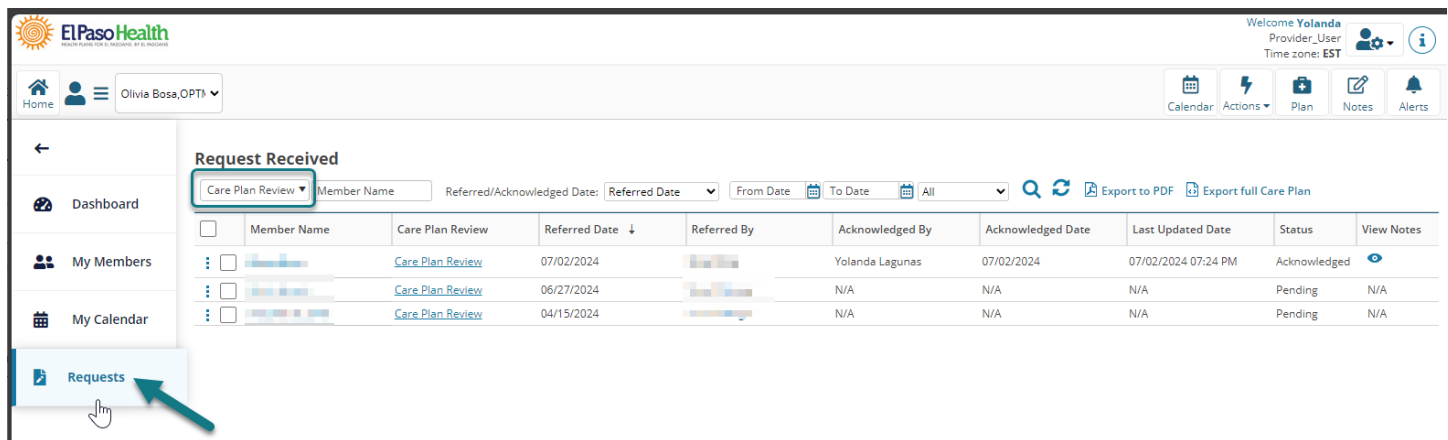## Section 14: How to View a Previously Reviewed Care Plan

Scenario: If you want to go back and look at a previously reviewed Care Plan again, you can.

Application(s): EPH Provider Portal

Role: Provider User

START: Dashboard Tiles

1. To view previously reviewed care plans, click **Requests** on the Navigation menu

2. Set the filter to **Care Plan Review**

3. Choose the desired **hyperlink** to review

Section 15: How to View the Full Care Plan for Any of your EPH Members

Scenario: You may choose to view Care Plan information available for any of your EPH members.

Application(s): EPH Provider Portal

Role: Provider User

To view Care Plans for all members,

1. Click **My Members** from the navigation menu

2. Click on the member's **Last Name hyperlink** to open the member record.

3. Click on the "hamburger" ☰ **icon** in the top left of your screen to open the navigation menu
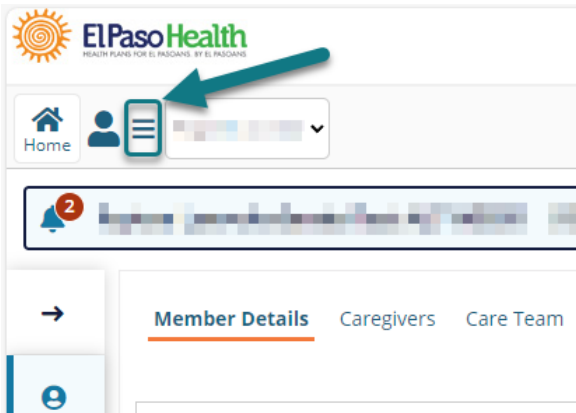
4. Select "Team Care Plan"

5. Select "**Full Care Plan**" from the options in the section

6. The Full Care Plan will display with Clinical Interventions

7. Scroll further below to also view:

- Approved Service Opportunities
- Barriers
- Strengths
- Care Team
- Signature Log

Full Care Plan   ✕

|◄ ◄ **1** ► ►| 10 ▾ items per page   1 - 1 of 1 items

Approved Service Opportunities

	Approved Date	Service Description	Co...	From Date	To Date	Provider	Approved Units	Unit Type	Frequency	Total Units	Status	Benefit Limit
❯	05/10/2024	PAS Protective Supervision (SRO)	i	05/01/2024	03/31/2025		956	Units	Weekly		Approved	
❯	04/26/2024	(StatePlan) PAS (SRO) (CFC)	i	04/22/2024	03/23/2025		2688	15 Minutes	Daily		Approved	
❯	04/26/2024	SPW Home Delivered Meals	i	04/22/2024	03/21/2025		334	Service	Daily		Approved	

Section 16: How to View and Acknowledge Newly Completed Member Assessments

Scenario: A new or updated Care Plan for a member was made available for you to review.

Application(s): EPH Provider Portal

Role: Provider User

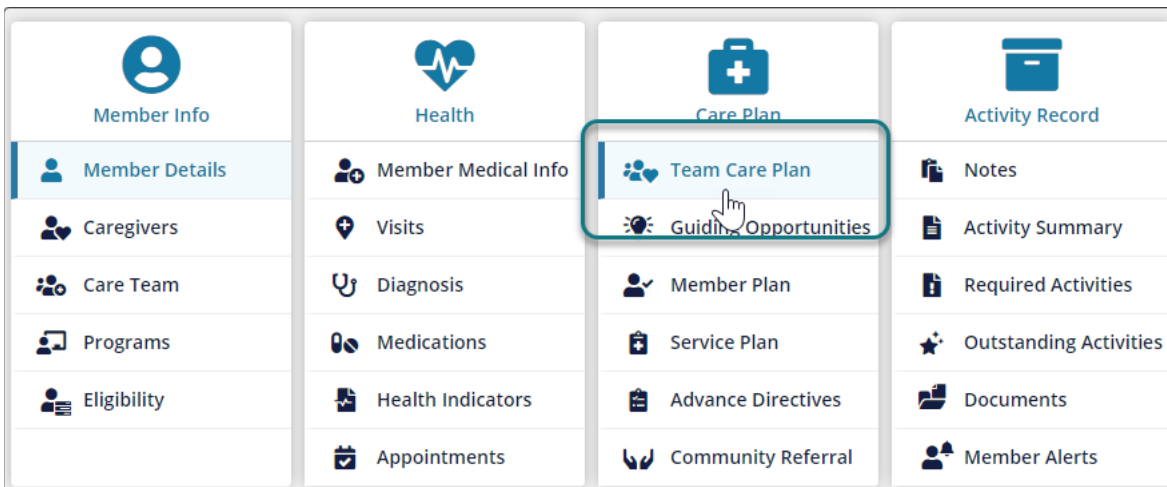**START:** The **Assessments tile** displays completed assessments that have been sent to the Provider to review and acknowledge

1. Click the **Pending Requests hyperlink** in the **Assessments** tile

2. Click the **hyperlink** under the **Review Assessments** column to view the selected assessment that was sent to the Provider user

Form H2060
November 2014-E

TEXAS
Health and Human
Services

Needs Assessment Questionnaire and Task/Hour Guide

Applicant/Member Name	Medicaid ID No.	Assessment Date	Impairment
	N/A	05/20/2024	0=None
			1=Mild
Companion Case Name	Companion No.	Respondent	2=Severe
			3=Total

Service Arrangement
C=Caregiver   P=Purchased   N/A=Not Applicable
PA=Purchased/Agency PC=Purchased/Caregiver
PS = Purchased/Self   S=Self   A=Other Agency

Support Score (PAS) 1=Good thru 4=Very Poor

Part B – Task/Hour Guide

Part A -Functional Assessment (Boxes related to priority factors are in **bold**.)

			↓	↓	↓	Minutes Per Day	X	Days Per Week	=	Total Minutes Per Week
1. Do you have any problems taking a bath or shower? ...Bathing			1	C ⌄		(Max =45) 15	x	3	=	45
2. Can you dress yourself? ...Dressing			1	C ⌄		(Max =30) 15	x		=	
3. ...Exercise (walking only)				C ⌄		(Max =30) 15	x		=	
4. Can you feed yourself? (0-3) [1] Enter score of 3 if individual requires total assistance (If tube fed/gastrostomy feeding, Do not purchase.)...Feeding, Eating				C ⌄	3	(Max =30/meal) 30	x	(Meals/Week) 21	=	630
5. Can you shave yourself, brush your teeth, shampoo and comb your hair? ...Grooming			1							
Enter the higher score of 5a or 5b. 5a...Shaving, Oral Care, Nail Care				C ⌄		(Max =30) 15	x	1	=	15
5b...Routine Hair and Skin Care				C ⌄		(Max =45) 15	x	1	=	15
6. Do you have any problems getting to the bathroom and using the toilet? ...Toileting			1	C ⌄	2	(Max =30) 30	x	7	=	210
7. Do you have trouble cleaning yourself after using the bathroom? ...Hygiene in Toileting			1							
8. Can you get in and out of your bed or chair? ...Transfer			1	C ⌄	2	15	x	7	=	105
9. Are you able to walk without help? ...Walking			1	C ⌄		15	x	7	=	105

[Acknowledge] [Close]

3. The user has the option to verify review of the assessment by clicking **Acknowledge** button

4. Type in **Comments** as needed.

5. Click in the **Signature** box to enter an **electronic signature.**

6. Click **Send** to save.

Acknowledge Accessment

Primary Care Manager	:	Eric_MobileC Mobile Tester Schroeder
Request From	:	John Ernste
Care Member	:	F_NAME51 ISABELLA L_NAME51
Comments	:	H6516 reviewed
Signature	:	

Send   **Close**

The **Requests Received** widget will update with the Acknowledgement information, including:

- Acknowledged By
- Acknowledged Date
- Last Updated Date
- Status
- View Acknowledgement

Section 17: How to View a Member's Completed Forms & Assessments
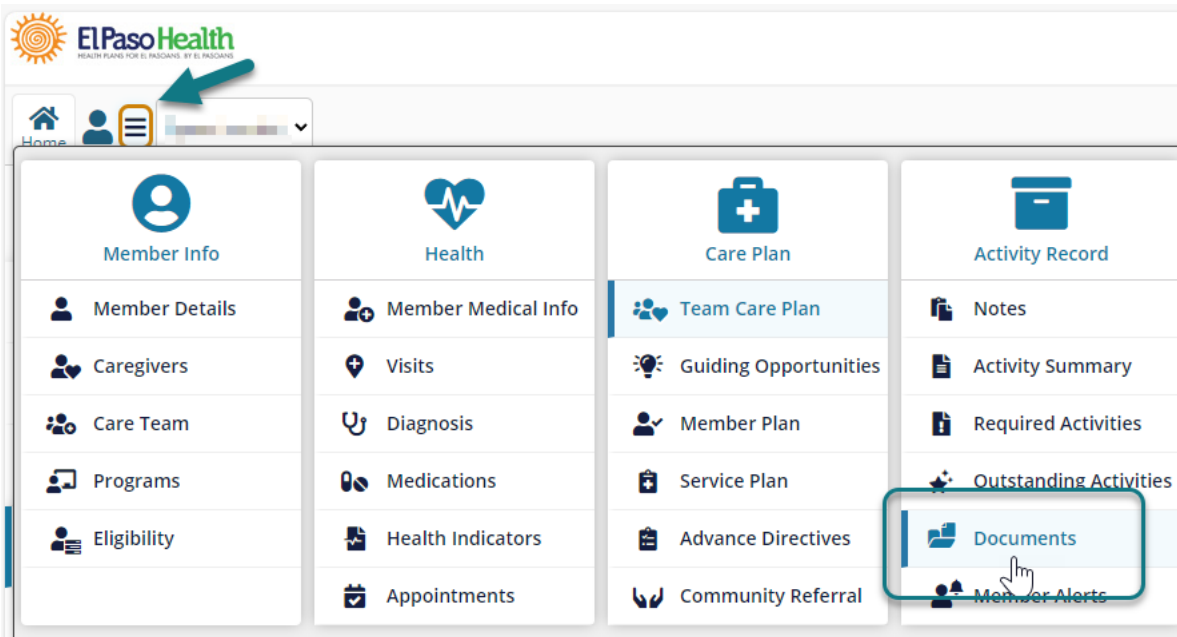
Scenario: You may want to review a member's forms or assessments, like an MNLOC.

Application(s): EPH Provider Portal

Role: Provider User

Start: From an accessed member

1. Click on the "hamburger" [☰] **icon** from the member record

2. Select Documents

3. Click the **eye icon** to view the form or assessment in a pop-up window

Example of an MNLOC view pictured below

Individual ▓▓▓▓▓▓▓▓▓

Medical Necessity and Level of Care Assessment -
Version 3.0

Section A	Identification Information

A0310. Type of Assessment

Enter
03
Code

A. Reason for Assessment
- ○ 01. Initial assessment
- ◉ 03. Annual assessment
- ○ 04. Significant change in status assessment

A0500. Legal Name of Individual

A. First name:
F▓▓▓

B. Middle initial:

C. Last name:
▓▓▓▓▓▓▓▓

D. Suffix:

A0600. Social Security and Medicare Numbers

A. Social Security Number:
12345678

B. Medicare number (or comparable railroad insurance number):
N/A

A0700. Medicaid Number – Enter "+" if pending, "N" if not a Medicaid recipient

345678456

A0800. Gender

Enter
1
Code

- ◉ 1. Male
- ○ 2. Female

A0900. Birth Date

▓▓▓▓▓

A1000. Race/Ethnicity

↓ Check all that apply

☐	A. American Indian or Alaska Native
☐	B. Asian

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