



**Hewlett Packard
Enterprise**

RI Medicaid Healthcare Portal

Using the Healthcare Portal

Hewlett Packard Enterprise

November 2015

PR0054 V1.2 11.1.2015



What is the Healthcare Portal?

- Trading Partners access business actions through the Healthcare Portal
- All Trading Partners must complete the registration process in the Portal to gain access (This process has been explained in other trainings, and instructions are posted on the [Healthcare Portal](#) page of the EOHHS website).



Enter your user ID here and click Log In

Login ?

*User ID

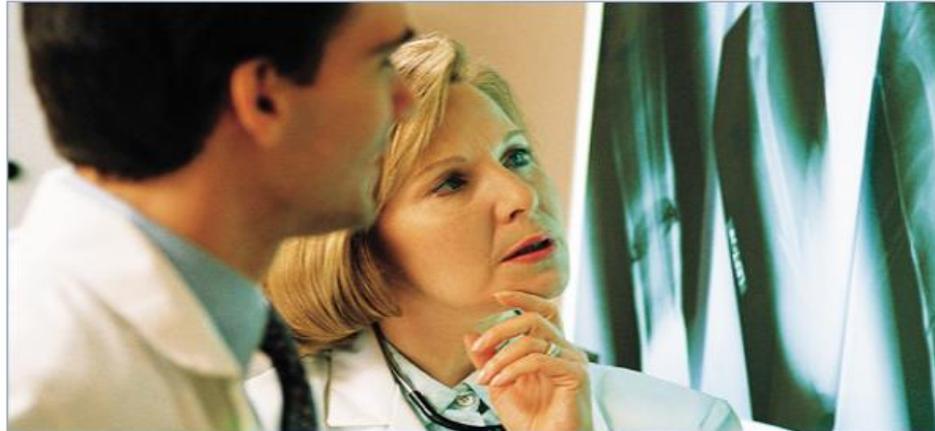
Log In

[Forgot User ID?](#)
[Register Now](#)
[Where do I enter my password?](#)

What can you do in the RI Medicaid Health Care Portal

Through this secure and easy to use internet portal:

- Healthcare providers and Billing Agents can **enroll as a Trading Partner** with RI Medicaid.
- Trading Partners can access eligibility, claim status, file exchange and other Interactive Web Services including the Electronic Health Record (EHR) Incentive Program - **MAPIR** - utilizing their Trading Partner ID as their User ID.



[FAQs](#)

[Trading Partner Agreement](#)

[Trading Partner Enrollment User Guide](#)

[Website Requirements](#)

[Rhode Island Medicaid Providers](#)

If you have not registered your computer, you will need to answer a challenge question

The screenshot shows the Rhode Island Executive Office of Health and Human Services Medicaid portal. The header includes the state seal and the text "Rhode Island Executive Office of Health and Human Services Medicaid". A navigation bar contains a "Home" link. Below the header, the breadcrumb "Home > Challenge Question" is visible, along with the date and time "Friday 06/13/2014 12:20 PM EST".

The main content area is titled "Answer the challenge question to verify your identity." It features a "Challenge Question" section with the question "What is your favorite sports team?". Below this is a text input field for the answer, labeled "*Your Answer". A link "Forgot answer to challenge question?" is provided below the input field.

There is a "Select" section with two radio button options:

- This is a personal computer. Register it now.
- This is a public computer. Do not register it.

A blue "Continue" button is located at the bottom of the form.

On the left side of the page, there is a sidebar with a "Computer and Challenge Question" section. It contains a "Site Key" field and a paragraph of text explaining the challenge question process: "When you use a site key, you are asked to respond to your Challenge question the first time you use a personal computer, or every time you use a public computer. When you type the correct answer to the Challenge question, your site key token displays which ensures that you have been correctly identified. Similarly, by displaying your personalized site key token, you can be sure that this is the actual HealthCare Portal and not an unauthorized site." Below this text are two instructions: "If this is your personal computer, you can register it now by selecting: **This is a personal computer. Register it now.**" and "If this is not your personal computer, such as a public computer, select: **This is a public computer. Do not register it.**"



Confirm Site Key Token and Passphrase

Confirm that your site key token and passphrase are correct.

If you recognize your site key token and passphrase, you can be more comfortable that you are at the valid HealthCare Portal site and therefore is to enter your password.

Make sure your site key token and passphrase are correct.

If the site key token and passphrase are correct, type your password and click **Sign In**.

If this is not your site key token or passphrase, do not type your password. Call the [customer help desk](#) to report the incident.

Site Key:



Passphrase Pool

*Password

Sign In

[Forgot Password?](#)

Confirm that your Site Key and Passphrase are correct. If they are, then enter your Password.

User's Homepage

EXECUTIVE OFFICE OF HEALTH & HUMAN SERVICES

Rhode Island Executive Office of Health and Human Services
Medicaid

My Home Eligibility Claims Files Exchange

My Home Friday 07/25/2014 10:14 AM EST

User Details
Welcome [redacted]

- My Profile
- Manage Accounts

Provider

Name [redacted] NC
Provider ID [redacted] 17 (NPI)
Location ID [redacted] MBIA

- Enrollment

Trading Partner

Name [redacted] C
Trading Partner ID [redacted]

- Trading Partner Profile

Welcome Health Care Professional!

We are committed to make it easier for physicians and other providers to perform their business. Our secure site provides the ability to verify member eligibility, search for claims, and conduct electronic file exchanges (upload/download).

[Help us provide better service to you! Click here to give us your feedback](#)

Interactive Web Services

- Approve Eligibility/TPL
- Check Dental/Vision Limits
- Enter Eligibility
- Enter TPL (Third Party Liability)
- Message Center
- View Remittance Advice

Broadcast Messages

R4.2 © 2014 Hewlett-Packard Development Company, L.P. All rights reserved. | [Privacy Notice](#)

You are brought to the User Homepage

From this page, you will select the business action. Some business actions will be on the list on the left, and some are across the top of the screen.

Verify Eligibility



To verify eligibility, select this tab

Eligibility Tab

This page will allow you to verify eligibility.

The user will select NPI/Provider Type/ and Taxonomy.

The user then selects the Billing Provider from a prepopulated list.

Provider ID section is only for providers who do not qualify for an NPI.

Eligibility Verification Request

* Indicates a required field.

Please select or enter valid Provider information. Either a Billing Provider or Rendering Provider can be specified. Status indicated for the Billing Provider is based upon the current state.

NPI Provider Type Taxonomy

Billing Provider

Rendering Provider

The Provider ID will only be used for atypical providers

Provider ID

Please enter in Recipient ID. For CNOM Providers only: If the Recipient ID is not known, please enter the Recipient's Last Name, First Name, Middle Initial (if known), Birth Date, Effective From Date, and Payer.

Recipient ID

Last Name First Name MI Birth Date

Payer

Date range may be 12 months prior to today through the end of the current date, with a maximum 3-month date span.

*Effective From Date Effective To Date

Service Type Code

Service Type Code #1 <input type="text"/>	Service Type Code #2 <input type="text"/>
Service Type Code #3 <input type="text"/>	Service Type Code #4 <input type="text"/>
Service Type Code #5 <input type="text"/>	Service Type Code #6 <input type="text"/>

[Show More Service Type Codes](#)

Verify Eligibility *continued*

Eligibility

Thursday 08/14/2014 10:36 AM EST

Eligibility Verification Request ?

* Indicates a required field.

Please select or enter valid Provider information. Either a Billing Provider or Rendering Provider can be specified. Status indicated for the Billing Provider is based upon the current state.

NPI Provider Type Taxonomy

Billing Provider

Rendering Provider

The Provider ID will only be used for atypical providers who do not qualify for an NPI and Taxonomy.

Provider ID

Please enter in Recipient ID. For CNOM Providers only: If the Recipient ID is not known, please enter the Recipient's Last Name, First Name, Middle Initial (if known), Birth Date, Effective From Date, and Payer.

Recipient ID

Last Name First Name

Payer

Date range may be 12 months prior to today through the end of the current date, with a maximum 3-month date span.

*Effective From Date Effective To Date

Service Type Code

Service Type Code #1 <input type="text"/>	Service Type Code #2 <input type="text"/>
Service Type Code #3 <input type="text"/>	Service Type Code #4 <input type="text"/>
Service Type Code #5 <input type="text"/>	Service Type Code #6 <input type="text"/>

[Show More Service Type Codes](#)

User then enters Recipient ID, and From and To dates of service. Then click Submit

Please note: Date range may be 12 months prior to today's date, with a maximum 3 month date span.

CNOM provider instructions are on screen

Eligibility Response

Eligibility > Eligibility Verification Response Friday 06/07/2013 04:18AM EST

Eligibility Verification Response [Back to Eligibility Verification Request](#) ?

[Expand All](#) | [Collapse All](#)

Verification Number 2013099012345

Recipient Information -

Recipient ID [REDACTED] Recipient Name John Doe
Birth Date 08/21/1986 Gender Male
Date of Death -

Benefit Plan Details -

Plan Name	Effective From Date	Effective To Date	Base Deductible	Message
Categorical and Fee for Service	08/15/2012	08/15/2012	\$0.00	Message Text

Service Type Code Details - Covered +

Service Type Code Details - Not Covered +

Managed Care Details +

Managed Care Service Type Code Details - Covered +

Lock-in Details +

Medicare Details +

TPL Details +

Premium Payment Details +

Long Term Care Details +

After clicking submit, this eligibility response will be returned.

For more details, click "expand all" or click the plus sign next to the specific information you require.

My Home Eligibility Claims File Exchange

Eligibility > Eligibility Verification Response Friday 08/07/2013 04:18AM EST

Wire frame continued from previous page.

Service Type Code Details - Covered

Service Type Code	Description	Effective From Date	Effective To Date	Copay	Coinsurance
1	Medical Care	08/15/2012	11/01/2012	\$0.00	0%
36	Dental Care	08/15/2012	11/01/2012	\$0.00	0%
47	Hospital	08/15/2012	11/01/2012	\$0.00	0%
AL	Vision (Optometry)	08/15/2012	11/01/2012	\$0.00	0%

Service Type Code Details - Not Covered

Service Type Code	Description	Effective From Date	Effective To Date	Copay	Coinsurance
33	Chiropractic	08/15/2012	11/01/2012	\$0.00	0%

Managed Care Details

Plan Name	Phone	Effective From Date	Effective To Date
United Health Plan	866 573-2451	08/15/2012	09/30/2012
Neighborhood Health Plan	866 222-3333	10/01/2012	11/01/2012

Managed Care Service Type Code Details - Covered

Service Type Code	Description	Effective From Date	Effective To Date
1	Medical Care	08/15/2012	09/30/2012
1	Medical Care	10/01/2012	11/01/2012
47	Hospital	08/15/2012	09/30/2012
47	Hospital	10/01/2012	11/01/2012
88	Pharmacy	08/15/2012	09/30/2012
88	Pharmacy	10/01/2012	11/01/2012

Wire frame continued on next page...

© 2013 Hewlett-Packard Development Company, L.P. All rights reserved. | [Privacy Notice](#)

This screen shows the expanded version of the first 4 details.

Note: Dental and Vision coverage limits should always be verified. Return to the User homepage and select dental/vision limits from the IWS links.

My Home | Eligibility | Claims | File Exchange

Eligibility > Eligibility Verification Response Friday 08/07/2013 04:18AM EST

Wire frame continued from previous page.

Managed Care Service Type Code Details - Covered +

Lock-In Details -

Lock-In Type	Effective From Date	Effective To Date	Lock-In Provider	Lock-In Provider Phone
Pharmacy	08/15/2012	11/01/2012	Walgreens	555-549-2222
Physician	08/15/2012	11/01/2012	Dr John Doe MD	333-444-5555

Medicare Details -

Carrier Name	Policy Number	Coverage	Effective From Date	Effective To Date
Medicare Claims Dept.	123456789A	MedicareA	08/01/2012	11/01/2012
Medicare Claims Dept.	123456789A	MedicareB	08/01/2012	11/01/2012
Blue Cross & Blue Shield of Rhode Island	123456789A	MedicareB	08/01/2012	11/01/2012

TPL Details -

Carrier Name	Policy Number	Coverage	Effective From Date	Effective To Date
Healthmate Claims Dept.		RiteShare Basic	08/01/2012	11/01/2012
Harvard Community Health Plan	89384	HMO/Dental/Drug	08/01/2012	11/01/2012

Premium Payment Details -

Carrier Name	Effective From Date	Effective To Date
Connect Care Choice	08/01/2012	11/01/2012

Long Term Care Details -

Plan Name	Effective To Date	Effective To Date
Nursing Facility Per Diem	08/01/2012	11/01/2012

This screen shows expanded versions of the remaining details.

Eligibility > Eligibility Verification Response Friday 08/07/2013 04:18AM EST

Eligibility Verification Response [Back to Eligibility Verification Request](#) ?

Verification Number 2013099012345
 Response Text The recipient is not eligible.

This will be the header when the recipient is not eligible for the dates of service

Claims Search

Click on the Claims Tab for a Claims Search



Claims Search

The screenshot shows a web application interface for searching claims. At the top, there is a navigation bar with links for 'My Home', 'Eligibility', 'Claims', and 'Files Exchange'. The 'Claims' link is highlighted. Below the navigation bar, the page title is 'Claims' and the date/time is 'Friday 07/25/2014 11:01 AM EST'. The main content area is titled 'Search Claims' and contains several sections:

- Covered Provider Information:** This section contains a dropdown menu for 'All Claims' and a text prompt: 'Please select or enter valid Provider information. Status indicated for the Billing Provider is based upon the current state...'. It includes three dropdown menus: 'NPI', 'Provider Type', and 'Taxonomy'. Below these is a 'Billing Provider' dropdown menu.
- Claim Information:** This section contains a text prompt: 'ICN will override other search parameters' and an 'ICN' input field.
- Recipient and Service Information:** This section contains a text prompt: 'Recipient ID and Service From and To dates are required fields for the search when... is not entered.' It includes input fields for 'Recipient ID', 'Service From', 'To', 'Original Billed Amount', and 'RX Number'. There are also 'Search' and 'Reset' buttons at the bottom of the form.

To begin a search, the user must enter the NPI/Provider Type/Taxonomy submitted on the claim.

The Billing Provider must be selected from the prepopulated drop down.

User then enters either the ICN, or the Recipient Information: Recipient ID, and Service From and To dates

Claims Search Response

Search Claims ?

All Claims

Covered Provider Information

Please select or enter valid Provider information. Status indicated for the Billing Provider is based upon the current state.

NPI: 16 Provider Type: S Taxonomy: 261QM2800X

Billing Provider:

The Provider ID will only be used for atypical providers who do not qualify for an NPI and Taxonomy.

Provider ID:

Claim Information

ICN will override other search parameters:

ICN:

Recipient and Service Information

Recipient ID and Service From and To dates are required fields for the search when ICN information is not entered.

Recipient ID: 03

Service From: 11/03/2013

To: 11/09/2013

Original Billed Amount:

RX Number:

Search Results

To see the Claim Detail and Claim Line Item Details, click on the '+' next to the ICN.

Total Records: 1

	ICN	HIPAA Status Category	HIPAA Status Code	HIPAA Entity Code	Service Date	Total Charges	Paid Amount
<input type="button" value="+"/>	4 <input type="text"/>	F1-Finalized Payment			11/03/2013 - 11/09/2013	\$70.00	\$70.00

This screen shows a sample claims search response. Clicking the plus sign (+) next to the claim, will expand that line for more details.

Claims Search Response

	ICN	HIPAA Status Category	HIPAA Status Code	HIPAA Entity Code	Service Date	Total Charges	Paid Amount
-	4 [REDACTED]	F1-Finalized Payment			11/03/2013 - 11/09/2013	\$70.00	\$70.00

Claim Detail	
MMIS EOB/ESC Code	-
HIPAA Status Category	F1-Finalized Payment
HIPAA Status Code	-
HIPAA Entity Code	-
ICN	4 [REDACTED]
Recipient ID	0 [REDACTED]
Recipient Name	[REDACTED]
Payer Control Number	[REDACTED]
Bill Type	-
Dates of Service	11/03/2013 - 11/09/2013
RX Number	-
Total Charge Amount	\$70.00
Total Paid Amount	\$70.00
Check Number	-
Remittance Date	11/29/2013

Claim Line Item Detail				
Line Item	MMIS EOB/ESC Code	HIPAA Status Category	HIPAA Status Code	HIPAA Entity Code
1		F1-Finalized Payment		

Line Item Control			
Procedure Qual/Ident	[REDACTED]	-	Procedure Mods
Dates of Service	11/03/2013 - 11/09/2013	1.000	Units of Service
Claim Amount	\$70.00	\$70.00	Paid Amount
Revenue Code	-	11/29/2013	Status Date

This screen shows a sample of the claim detail when expanded

Upload/Download



To upload/download files, the user clicks the File Exchange tab on their home page. This brings a choice of upload or download

Upload Files

Files Exchange > Upload Files

Thursday 08/14/2014 10:51 AM EST

File Upload ?

* Indicates a required field.

Transactions uploaded here must be in a HIPAA format -- Health Insurance Portability and Accountability Act.

HIPAA is the United States Health Insurance Portability and Accountability Act of 1996. There are two sections to the Act. HIPAA Title I deals with protecting health insurance coverage for people who lose or change jobs. HIPAA Title II includes an administrative simplification section which deals with the standardization of healthcare-related information systems. In the information technology industries, this section is what most people mean when they refer to HIPAA.

HIPAA establishes mandatory regulations that require extensive changes to the way that health providers conduct business. HIPAA seeks to establish standardized mechanisms for electronic data interchange (EDI), security, and confidentiality of all healthcare-related data. The Act mandates: standardized codes for all patient health, administrative, and financial data; unique identifiers (ID numbers) for each healthcare entity, including individuals, employers, health plans, and healthcare providers; and security mechanisms to ensure confidentiality and data integrity for any information that identifies an individual.

Authorized users can upload files containing HIPAA transactions in X12

Note that a tracking number will be displayed on the screen for each uploaded file.

Transaction Type 270 Healthcare Eligibility Benefit Inquiry
834 Healthcare Benefit Enrollment (for Health Plans only)
837D Healthcare Claim - Dental
837I Healthcare Claim - Institutional
837P Healthcare Claim - Professional

* Upload File #1

Upload File #2

Upload File #3

Upload File #4

Upload File #5

The transaction types the Trading Partner previously selected will be listed here.

The Trading Partner clicks browse on each line to select their files to upload and clicks the upload button – bottom left. Up to 5 files may be uploaded.

After file is uploaded, the user will get a tracking number in a pop up box.

Download Files

[Files Exchange](#) > Download Files

Thursday 08/14/2014 10:52 AM EST

File Download ?

* Indicates a required field.
Enter your search criteria and click the **Search** button.

*File Status *Max Files

*Category

The Trading Partner selects the status of the files they wish to download from the drop down box by clicking the arrow

Download Files

[Files Exchange](#) > Download Files

Thursday 08/14/2014 10:52 AM EST

File Download ?

* Indicates a required field.
Enter your search criteria and click the **Search** button.

*File Status

*Category

*Max Files
10
50
100
200
400

The number of files is then selected.

Download Files

[Files Exchange](#) > Download Files

Wednesday 08/27/2014 12:35 PM EST

File Download ?

* Indicates a required field.
Enter your search criteria and click the **Search** button.

*File Status *Max Files

*Category

- All
- 999 - X12-Func. Ack.
- ACK - REPT-Func. Ack.
- EXT - Data Extracts
- RPT - Reports
- SUB - REPT-Claim Accept/Reject
- TA1 - Interchange Acknowledgement
- 835 - X12-Remittance Advice
- 277 - X12-Unsolicited Claims
- 834 - X12-Benefit Enrollment
- 277 - X12-Claim Status
- 271 - X12-Eligibility
- 277 - X12-Claim Ack.-Health Plans ONLY

R4.2

Development Company, L.P. All rights reserved. | [Privacy Notice](#)

Finally, the type of file is selected,
then click the search button



Rhode Island Executive Office of Health and Human Services Medicaid

Contact Us | Logout

My Home Eligibility Claims Files Exchange

My Home

Friday 07/25/2014 10:14 AM EST

User Details

Welcome c [redacted]

My Profile

Manage Accounts

Provider

Name C [redacted]

Provider ID 1 [redacted]

Location ID 3 [redacted]

Enrollment

Trading Partner

Name CDRAC INC [redacted]

Trading Partner ID 6 [redacted]

Trading Partner Profile

Welcome Health Care Professional!



We are committed to make it easier for physicians and other providers to perform their business. Our secure site provides the ability to verify member eligibility, search for claims, and conduct electronic file exchanges (upload/download).

[Help us provide better service to you! Click here to give us your feedback](#)

Broadcast Messages

This is a test message with URL that should display on both the Welcome and My Home pages. [more...](#)

Contact Us

Interactive Web Services

- Approve Eligibility/TPL
- Check Dental/Vision Limits
- Enter Eligibility
- Enter TPL (Third Party Liability)
- Message Center
- View Remittance Advice

The functions at left will look the same as they have in the past.

R4.2

© 2014 Hewlett-Packard Development Company, L.P. All rights reserved. | [Privacy Notice](#)

If you use one of these functions, select close to return to the homepage.

Close



DENTAL/VISION CLAIMS SEARCH

Please enter the recipient's ID number.

Recipient's Identification Number:

Search

Clear

Questions?



For questions, contact the
Customer Service Help Desk

Available Monday – Friday 8:00 AM – 5:00 PM

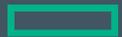
(401) 784-8100

For local and long distance calls

(800) 964-6211

For in-state toll calls

Or email: riediservices@hp.com



Hewlett Packard
Enterprise

