South Dakota Provider

Medicaid Portal

User Guide

DECEMBER 2017

VERSION 5.1

DSS
Strong Families - South Dakota's Foundation and Our Future

Contents

Overview 3
Medicaid Portal Functionality 3
Provider Collaboration & Feedback 3
DSS Medicaid Portal Webpage & Additional Resources 3
User Roles & Accounts 4
Provider Admin Role 4
Provider User Role 4
New Registration 5
Login 8
State Password Requirements & Security Standards 9
User Role & Profile 10
My Profile 10
Change Password 11
Logout 11
Forgot Password 11
Medicaid Portal Logo & Footer Hyperlinks 12
Medicaid Portal Menus 13
Administration 13
Provider Admin User Type 13
User Maintenance 14
Add Users 15
Add Provider Admin User 16
Add Provider User 18
Work Queue 20
Accept/Reject Provider Admin Registration Request 21
Update Provider Admin 22
Update Provider User 24
Inactivating a User Account & Resetting User Password 26
Reports 27
Medicaid Remittance Advice 27
Health Home Reports 29
Health Home Remittance Advice 29
Health Home Caseload 30
Health Home Claims Paid 33

Health Home Core Services 33
Primary Care Provider (PCP) Reports 33
PCP Remittance Advice 34
PCP Caseload 35
PCP Claims Paid 37
Census Status Report 38
Adjudicated Claims Listing Report 39
Eligibility Inquiry 40
Choose Billing NPI 40
Search Options 40
Search multiple recipients 42
View Recipient's Eligibility Response File 42
Questions 44

Overview

The South Dakota Provider Medicaid Portal (Portal) has been a collaborative effort with providers to ensure an end result that will be fully utilized by and directly beneficial to, SD Medicaid Providers. The Portal was designed to increase a provider's ability to view, download, and save digital copies of their SD Medicaid Remittance Advices, or Remits (RAs), in concert with payments. The scope of functionality within the Portal is planned to expand to include Eligibility Status Inquiry and access to additional reports: Adult Services and Aging and Cost Settlement Reports.

Medicaid Portal Functionality

The Medicaid Portal Functionality has three main components: 1) registering your account and logging into the system, 2) administrative functions to add, update and manage your organization's Portal user accounts as needed, and 3) retrieve, view, print and save Reports electronically. Each of these components, as well as further instruction, is outlined below.

Provider Collaboration & Feedback

The DSS Medicaid Portal Team would like to thank our providers for their integral role in ensuring that the Portal delivers features and benefits, which improve and expedite access to SD Medicaid reports and data. We appreciate the time you have taken to collaborate, test and send feedback on this new application. We will continue to welcome provider participation and feedback as additional functionality and features are developed in the Medicaid Portal. We encourage all users to send us feedback throughout the implementation of new design and functionality as well as continued feedback regarding improvements which will aide in our ability to improve and support the needs of our providers. Please communicate any comments, feedback, concerns or issues to our Medicaid Portal Team's email address: DSSOnlinePortal@state.sd.us.

DSS Medicaid Portal Webpage & Additional Resources

The DSS Medicaid Portal webpage can be accessed via the following URL: https://dss.sd.gov/medicaid/portal.aspx. The Medicaid Portal logo serves as the point of access for the Portal's Login page. All Portal screens will display the same logo for user's to click and be re-directed to the DSS Medicaid Portal webpage. This page will be updated periodically with User Documents, FAQs and Portal related announcements from the Medicaid Portal Team.

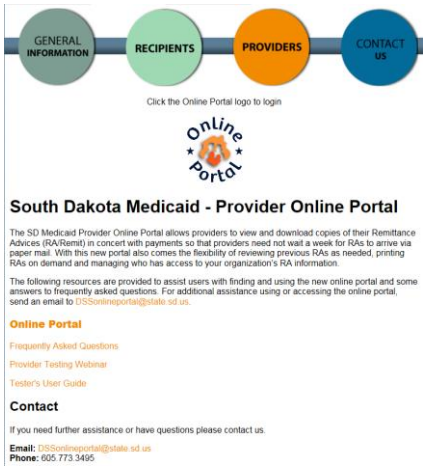


Figure 1: DSS Medicaid Portal Webpage – Portal Access Point & Reference Documents

User Roles & Accounts

The Medicaid Portal allows SD Medicaid Providers account oversite through the creation of two types of User Roles. The initial registration for a Provider Admin account should be submitted by the designated Point of Contact (POC) and should include each Billing NPI for which they need to oversee. This contact will assume the Provider Admin role, capable of setting up their own user account structure within the Portal for administration and access to the Portal's functionality. Only Provider Admin Roles have the ability to add a Provider User within their organization's Portal user account structure. The Medicaid Portal application supports two types of Provider account roles.

Provider Admin Role

Provider Admin accounts will be responsible for Medicaid Portal oversight and management of, all User Administrative functions within the Portal, for their Billing NPI(s) including: Adding, Updating and Approving/Rejecting users.

The Provider Admin will be granted all available Permissions by default, including Administration which includes the ability to:

- Add Users – Create additional Provider Admin and Provider User accounts for All, or any Combination of, Billing NPI(s) managed by that Admin
- Work Queue - Approve/Reject Registration requests in their "Work Queue" for User Registrations within their Billing NPI(s)
- Update – Admins can modify the other Provider Admin and Provider User accounts and available permissions, including: Add/Remove access to a user's assigned Billing NPI(s), Permissions Available, change user's status to Inactive or reactivate a user, Reset a user's password and also update a user's account Contact information details
- Users – View a list of the Active and Inactive, Provider Admin and Provider User accounts which they have created and/or approved within their Portal account

A Provider Admin will only have administrative oversight of an organization's users within the list of Billing NPIs their Portal account controls. Even if a Billing NPI falls under a Tax ID for a Provider, they will not have the ability to administer Portal accounts for that Billing NPI, unless it has been included in their Registration request. It is essential that Registration requests includes ***each*** Billing NPI for which they need administrative oversight of within the Portal. Once a registration has been approved by the Medicaid Portal Team, the Provider Admin user will ONLY have the ability to administer account permissions for their assigned Billing NPI(s). If additional Billing NPI(s) access is required after being approved, the user must submit a request via email to the Medicaid Portal Team at DSSOnlinePortal@state.sd.us, for approval.

Provider User Role

Provider Users have "read only" ability within the Portal and can only be added by their Provider Admin contact. The intention of this architecture is to leave Portal account user access at the discretion of the Providers. This ensures users are being granted account permissions by the users best suited to make those determinations within their organization.

The Provider User account structure and setup is differentiated by Permissions Available and by access limitations to the Servicing NPI level. A Provider User account can be restricted by Billing NPI and Servicing NPI. If a User should be able to view and print Remittance Advices for their Servicing NPI,

which provided those services under two of the organization's Billing NPIs, the Provider Admin can limit that User's account to both Billing NPIs for the one Servicing NPI. Provider User roles can access, view, save and print reports for whichever combination of Billing and Servicing NPIs that User's account profile has permissions to.

- Provider User accounts can only be created and updated by the Provider Admin
- Administration – No Administration abilities to view, add, update or modify other user accounts
- Reports – Can generate, retrieve, view, print and save Remittance Advice reports, but are limited by the combination of Billing NPI and Servicing NPI remits for which they have the ability to access.
    - Requests for access to additional Billing/Servicing NPI combinations must be directed to and approved by, their Admin.
    - Requests for additional Portal permissions must be directed to and approved by their Provider Admin.

New Registration

The Medicaid Portal registration process accepts registration requests for one or multiple Billing NPI(s) and is not limited to the number of Billing NPIs which can be requested at one time. The organization's account administrator will assume responsibility for the oversight and administration of all additional Portal user accounts within their Billing NPIs they control. Administration includes adding users within their Billing NPI(s) and receiving requests for Portal accounts from users within their Billing NPIs. They can delegate oversight to additional Provider Admins for one or more of their Billing NPIs to help establish the appropriate levels of hierarchical access and permissions to their organization's users.

In order to submit a New Registration form, users must complete all required fields, add at least one Billing NPI as "requested" and check the important message acknowledgment regarding paper remittance advices. A valid combination of the following three data elements are required in order for a Billing NPI to be requested. The unique combination of these three values is verified against our database for accuracy, before users can "ADD" a requested Billing NPI:

- The seven (7) digit SD MEDX ID – SD MEDX is the SD Medicaid Provider Enrollment system, for which your organization's Provider Enrollment Credentialing Specialist has login credentials.
    - If you do not know the SD MEDX ID for your Billing NPI(S), please contact your organization's Provider Enrollment Credentialing Specialist to request this information.
    - The enrollment specialist will be able to search for one or more of your organization's Tax ID's and provide you with a list of each unique SDMEDX ID & Billing NPI combination.
    - If the SDMEDX ID & Billing NPI combination is NOT entered correctly for each Billing NPI, the user will receive an error that "This combination is not valid."
- Nine (9) digit Tax ID - Federal Employer Tax ID number (FEIN or TIN) for which an organization is enrolled with SD Medicaid.
    - If you do not have an FEIN, you may be enrolled with SD Medicaid as a sole ownership. In such instances, your FEIN may be your Social Security Number (SSN).
- Ten (10) digit Billing NPI – Billing National Provider Identification number(s) enrolled with SD Medicaid.

- If enrolled with SD Medicaid as a sole ownership, your "Billing" NPI may be your Type 1, Servicing NPI.

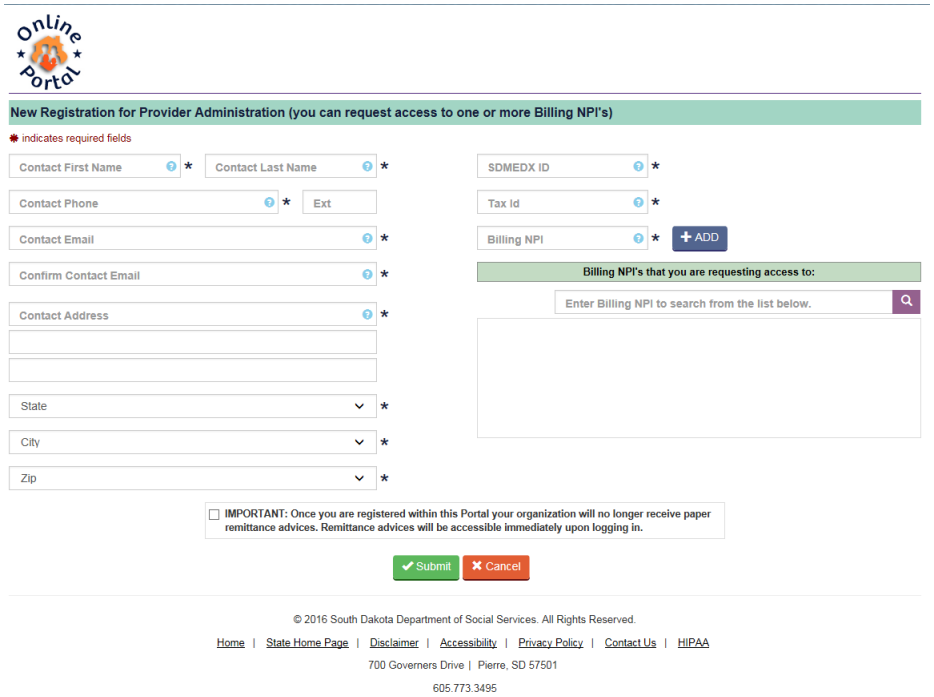


Figure 2: Medicaid Portal New Registration Form

New Registration Contact form field information should be populated with the Requestor's business contact information. The New Registration form Contact Email address entered will become the Requestor's Username. If the system identifies that an account has already been requested, or approved for an email address, the Requestor will receive an error that the email already exists and will not be able to submit the New Registration form. If the Requestor does not receive a submission confirmation email at the Contact Email address listed in their registration form, they may have typed their email incorrectly. If this occurs, please send an email to DSSOnlinePortal@state.sd.us regarding the email address being entered incorrectly on the pending registration request.

The Contact form fields do have some built-in functionality in place that is important to note:

- Help Text - When populating the Contact details, users can hover their mouse pointer over the "?" icon to display help text. Help Text defines the expected value or input, for that field.
- Asterisk (*) – Each required field is indicated with an asterisk (*) symbol. Screens containing required input fields will also display an information message that "* indicates required fields"
- Contact Phone – This field is formatted to only accept numeric values and also to automatically populate () and – as the user types. Users will not be able to delete or modify the format in place for this field.
- Ext. – The extension field allows up to seven (7) numeric-only values. This is not a required field.
- Contact Email – The email address can only be validated for format accuracy. If users do not type in their email address correctly (i.e. misspell a word) in both email fields, they will only be aware of the error, if they do not receive an email confirmation at the expected email address they entered, within a short timeframe of submitting their request.

- State, City & Zip – These fields are dynamic fields and require users to select them in the order which they are displayed on screen. Once user selects State, the City dropdown allows users to select the list of cities specific to that State. After selecting the appropriate City, the user can select the appropriate Zip code value. If the City/Zip dropdowns do not automatically populate after State is selected, the Portal may be querying the address database. Please wait a few additional seconds and try again if this occurs.
- SDMEDX ID, Tax ID & Billing NPI – These fields will only accept numeric values. If any combination of the three cannot be validated against the database and are incorrect, the user will receive "This combination is not valid" error, when attempting to click "ADD" button.
- Important Message Checkbox – This acknowledgment must be checked in order to submit a New Registration request. If the user clicks "Submit" before checking the acknowledgment box, they will receive an error and their form will not be submitted.

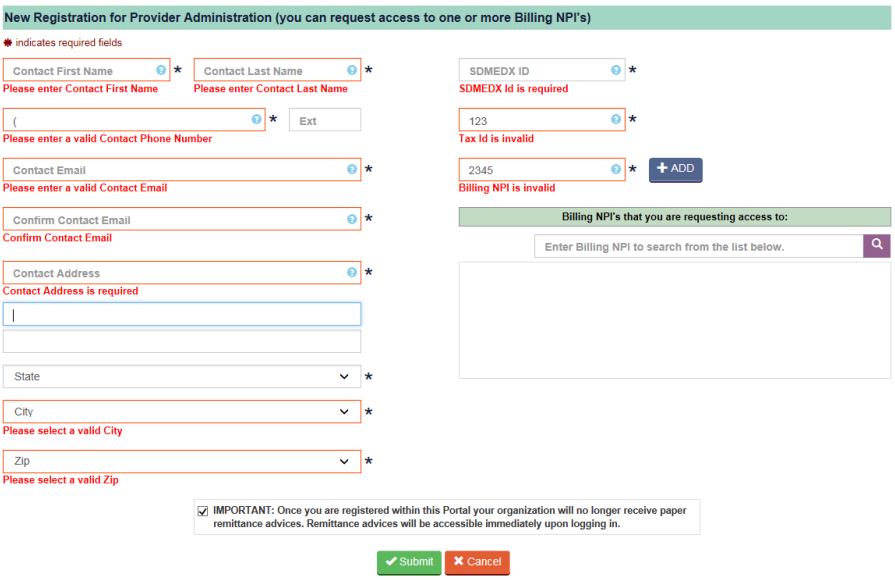


Figure 3: New Registration Screen Error Messages

After submitting a New Registration request, the Requestor will be directed back to the Login screen and receive a "Success" message notifying them that their request was submitted for approval. User will also receive a confirmation email at the email address listed in their New Registration form that their request was submitted for approval.

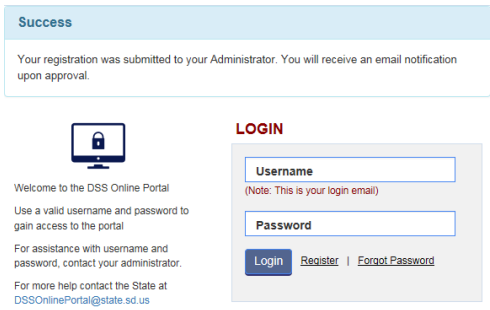


Figure 4: New Registration "Success" Message upon Submission

New Registration requests will be received by the Administrator in their "Work Queue" and will remain pending until Approved/Rejected. If there are any questions concerning the Registration request, the Requestor may be contacted directly by the Reviewer via phone or email. Incomplete or invalid registration forms will not be submitted for review. If the Reviewer cannot validate the form or confirm details in question, the Requestor will receive an email notification that their registration request has been Rejected.

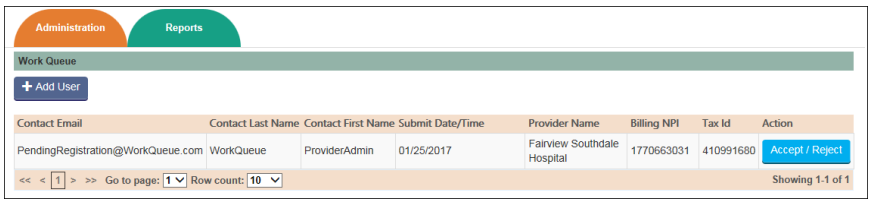


Figure 5: Provider Admin Work Queue with Pending Registration Request

Once approved, the Requestor will receive an approval email confirmation with temporary login credentials and details. The initial login process must be completed within 3 days (72 hours) or the password will expire. If the request is rejected, the Requestor will receive a rejection email notification.

Login

The first time a user logs into the Medicaid Portal, they will need to login using the Temporary Password, they received in their Portal account approval email notification. The Username for Login will always be the user's email address, for which they registered their Portal account. Temporary Passwords are only valid for 3 days (72 hours) after receipt of the approval confirmation email notification. If a user forgets or loses their password, they can select "Forgot Password" to complete the steps as outlined in the Forgot Password section.

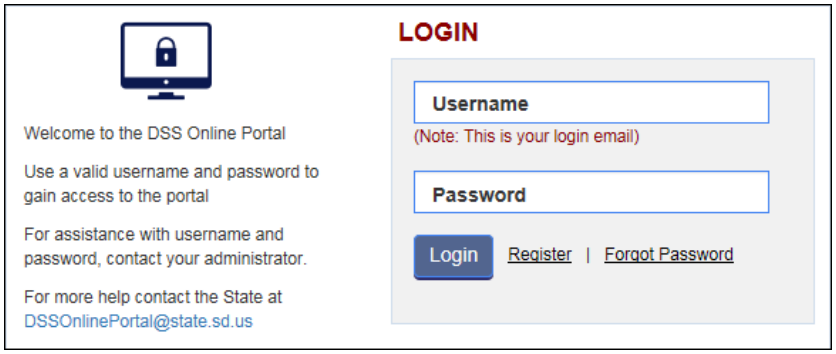


Figure 6: Medicaid Portal Login Screen

When logging in for the first time, users will be prompted to enter their Login Username and temporary password. After successful login, users will be directed to the Change Password form where they will need to complete the following:

- Re-enter Temporary Password - The password received via email.
- Type in a New Password - Please note the State Password Security Standards, below.
- Retype New Password - The New Password entered and the Retype New Password to confirm. If the new password and re-typed password do not match, the user will receive an error.

- Select three Security Questions and Reponses - These Security Questions and Responses will be used for “Forgot Password” functionality.
- Username - The Username field is grayed out on the “Change Password” form. The Contact Email Address submitted on the Registration form or when the user account was added, becomes the unique account Username.
    - Email addresses cannot be duplicated and users will not be able to have two Active accounts for the same Username.
    - If a User’s email address changes, their Portal Provider Admin will need to Update the user’s account to “Inactive” status and create a new Account for them under their new email address.

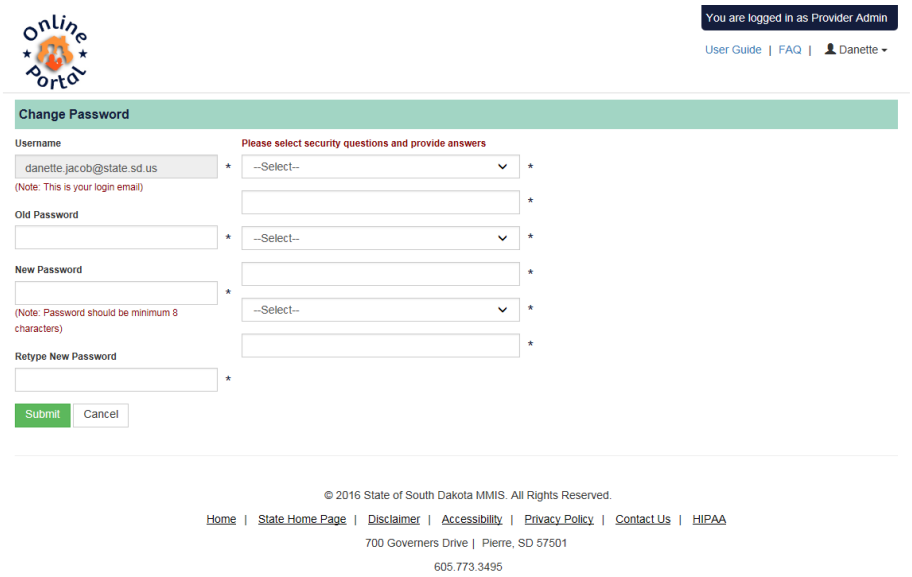


Figure 7: Change Password Screen

State Password Requirements & Security Standards

The following are State Standards for Passwords, including those used in the Portal. When considering your Portal password, please review and apply these standards to ensure compliance with State Security Standards:

- Must be changed every ninety days;
- Must be at least eight characters;
- Must contain at least three of the following four character groups:
    - English uppercase characters (A through Z);
    - English lowercase characters (a through z);
    - Numerals (0 through 9);
    - Non-alphabetic characters (!, $, #, %)
- Must not be one of the six most recent passwords;
- Must not have been changed within the last seven days;
- Does not contain your account or full name that exceeds two consecutive characters.

User Role & Profile

Upon Login, users are directed to the Dashboard or "Welcome" page. Regardless of user role or type, the following User Role & Profile information can be found in the upper right-hand corner of the page:

1. User Role – "You are logged in as…" message will be displayed with Role that user's account was created for. Providers will either be assigned a "Provider Admin" or "Provider User" Role.
2. User Guide & FAQs Links – These are linked user reference documents which are opened in a new browser tab, when clicked
3. User Profile Icon & First Name – These populate in the upper right hand corner next to a dropdown arrow, indicating a sub-menu. When users click the dropdown arrow, the sub-menu will expand to display additional actions available to their Portal account information and/or actions
    a. My Profile – This is a sub-menu where users can review their contact details and available permissions
    b. Change Password – This sub-menu allows users to change their passwords, if necessary
    c. Logout – Will log the user out of the Medicaid Portal and direct them back to the Login page

Figure 8: User Role & Account Profile View

My Profile

When a user selects the My Profile option from their Account Profile sub-menu, they will be directed to their Portal account profile. This page displays their account contact information, Billing NPIs for which they have access to and their current Permissions Selected. The example below is the My Profile view for a Provider Admin User. Any fields which are greyed out cannot be updated. Provider Admins will have all available Permissions Selected, by default. Provider Users will not have the ability to see or to have, Administration permissions, added to their Profile.

If any of the profile information which is locked from editing needs to be updated. The Administrator for that user's account will need to be notified of the requested changes. If the Provider Admin "master" account, which originally submitted the New Registration form for an organization's Billing NPIs, requires updates, the State Super Admin user will need to be notified of the requested changes. If you do not know who the Medicaid Portal account administrator is for your organization, please contact your supervisor or email DSSOnlinePortal@state.sd.us.

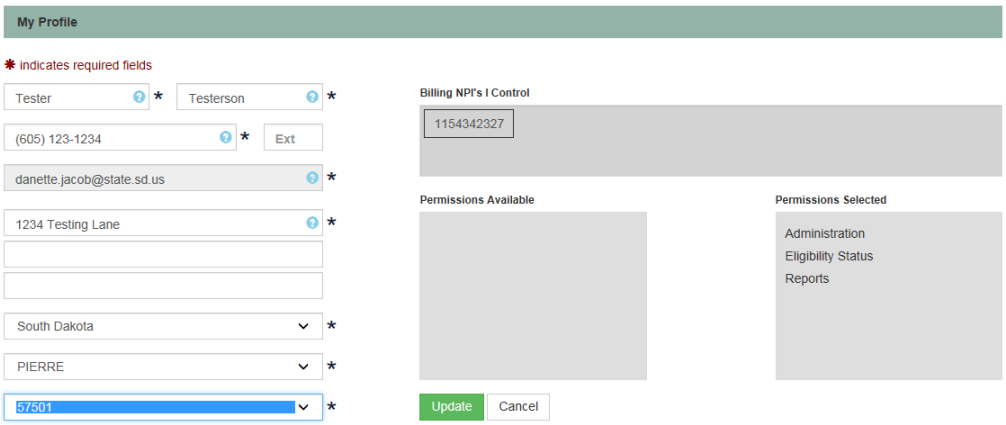


Figure 9: Provider Admin - My Profile screen

Change Password

Users can also select "Change Password" from their Profile sub-menu options. This will allow users to update their Portal login password. In this screen users will enter their current password, type in a new password, and then retype the new password for confirmation. The New Password and Retype New Password values must match. After completing the Change Password form and clicking "Submit" the user will receive an email notification concerning changes made to their account.

Logout

Users can select "Logout" from their Profile sub-menu options. When users select "Logout" from the sub-menu, they will be logged out of the Medicaid Portal and directed back to the Login screen.

Forgot Password

If a user loses or forgets their Portal login password, they can request a temporary login password and create a new password, using the Forgot Password functionality. The Portal will generate a temporary password and send it to the user's account email address. Once the user receives the email containing their temporary password, they simply have to login using their same username and the temporary password they received via email. This Temporary Password will only remain active for three days (72 hours). Upon logging in, they will be directed to the Change Password screen. The Temporary Password should be entered as their "Old Password." The new password selected by the user must adhere to the State Password Requirements, defined above.

The **Forgot Password** process flow is as follows:

1. Click "Forgot Password" on Login screen (*Figure 6*)
2. Enter your Username then Click "Submit"
3. Enter Responses to the Security Questions selected when completing first time Login process
4. Click "Submit"
5. A new Temporary Password will be sent to the user's account email address

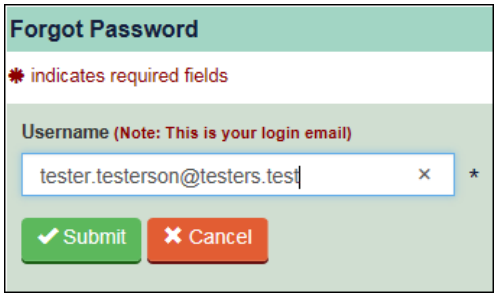


Figure 10: Forgot Password Username

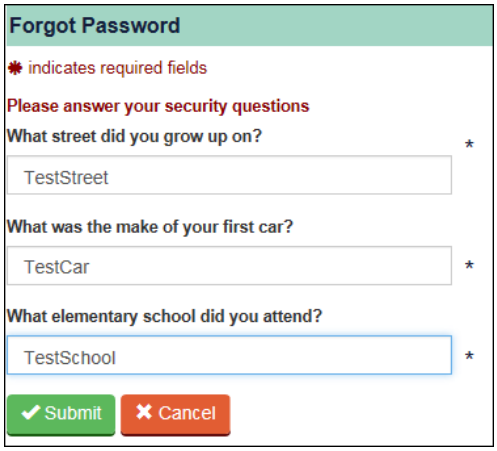


Figure 11: Forgot Password Security Question Responses

Medicaid Portal Logo & Footer Hyperlinks

Each screen of the Portal will display the Medicaid Portal logo in the upper right-hand corner of the screen. This logo is hyperlinked to the DSS Medicaid Portal Webpage. Each Portal page will also include the following hyperlinks to direct users to informational pages, when necessary. When these links are directed outside of the Portal application, users will see the external information opened in a browser window tab. This will allow users to easily navigate back to the Portal application from the external information content. The hyperlinks are directed as follows:

1. Medicaid Portal Logo – DSS Medicaid Portal webpage
2. Home – This link has two functionalities, depending upon the user's Login status
    a. If the user is not logged in, the "Home" link on the Login page will remain at Portal Login page
    b. If the user is logged in, the "Home" link will direct users back to the Portal Dashboard page
3. State Home Page – The Official South Dakota State Government website
4. Disclaimer – South Dakota Medicaid Disclaimer and Limitation of Liability web address
5. Accessibility – South Dakota Medicaid Accessibility Policy web address
6. Privacy Policy – South Dakota Medicaid Privacy Policy
7. Contact Us – Opens blank email, addressed to the Medicaid Portal general email address
8. HIPAA – DSS Health Insurance Portability and Accountability Act

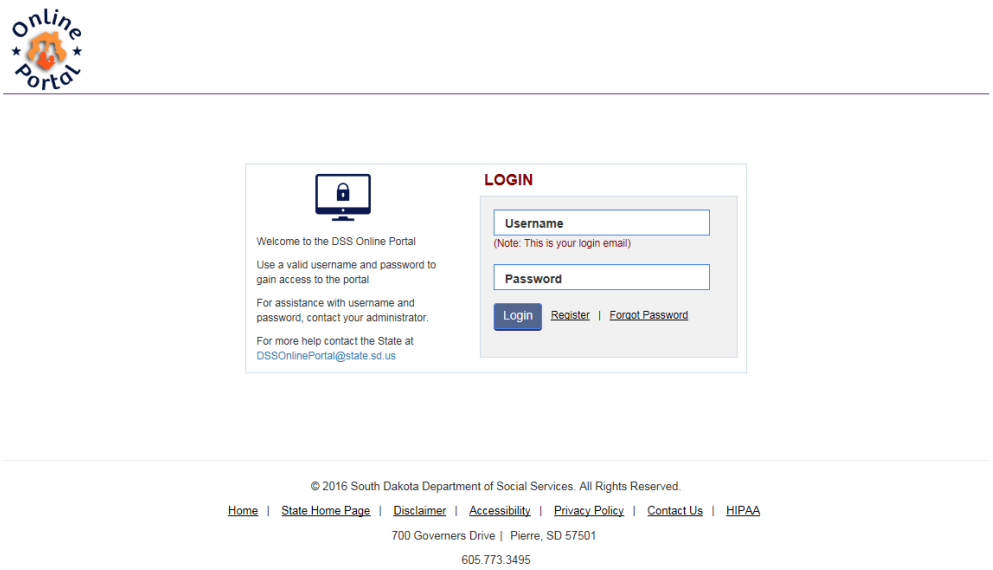


Figure 12: Medicaid Portal Logo and Footer Hyperlinks are Displayed on each Portal Screen

Medicaid Portal Menus

The Portal currently has two Permissions Available options that users can be granted access to view and navigate. These Permissions will display as half-moon Menus along the top of a user's Portal account screen. Depending upon the User Role assigned when an account is created, the Menus available to an individual user account can vary. By default, the Provider Admin role has all available Permissions as demonstrated in Figure 4, below. These defaulted Permissions can only be modified or updated by the user approving the user's registration request, or creating the Provider Admin's account. The available Menus are: Administration and Reports. The Provider User role can only be given Permissions for Reports. A Provider User role's Permissions will be determined by their Provider Admin when creating or updating that user's account.

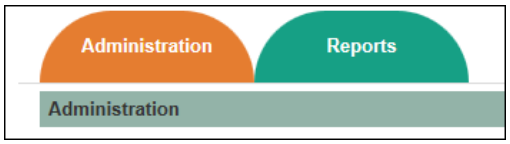


Figure 13: Portal Permissions Available are Displayed as Half-Moon Menus

Administration

The Medicaid Portal **Administration** Permissions are only available to Provider Admin User Roles. The Administration Menu includes a subset menu for performing additional administrative functions. The available sub-menu options are: User Maintenance, Work Queue and Message Log. The Provider Admin role will have the ability to perform all Administration functionality by default. The Provider User role cannot be assigned Administration functionality.

Provider Admin User Type

The **Administration** Permission is granted to a Provider Admin user by default. Only the administrator which approved or created that Provider Admin's account can update or modify the Permissions

Available to that Provider Admin user. Provider Admins are able to perform all administrative functions within the Portal and to navigate all Portal pages, menus and screens. After logging into the Portal, a Provider Admin will be at their Dashboard or "Welcome" page.

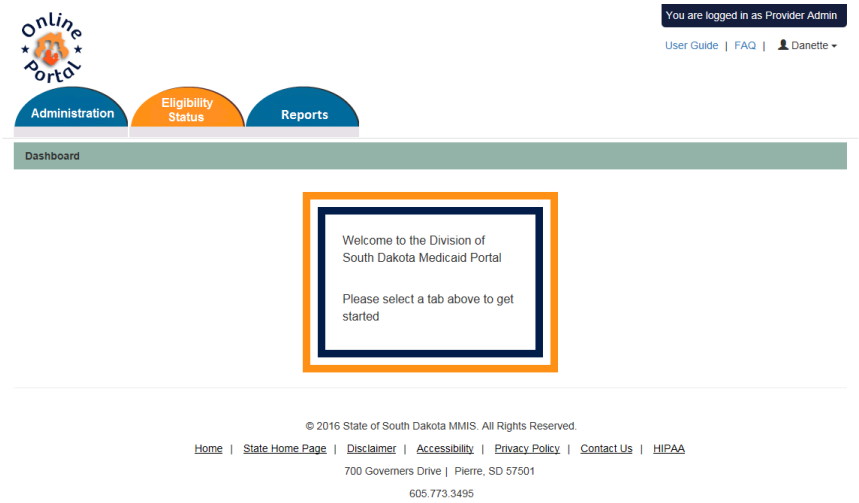


Figure 14: Provider Admin Dashboard or "Welcome" Page

User Maintenance

The User Maintenance menu is located in the **Administration** sub-menu. By navigating to Administration and clicking **User Maintenance**, the Provider Admin will be able to: Add User, view user list, search, filter, reset user list to default view and export their list of users. From this menu, the Provider Admin can also **Update** a user account by selecting "Update" in the **Action** column for that user. The default view for Users will populate with **Active** user accounts although the admin can select to view "All" or "Inactive" status users, from the **Status** dropdown filter, then click "Search" to view all active and inactive users. The **Export Users** functionality allows Provider Admins to export their user list to Excel. This export functionality will automatically export and open a list of users in Excel, for the admin to perform any additional user maintenance or necessary filtering.

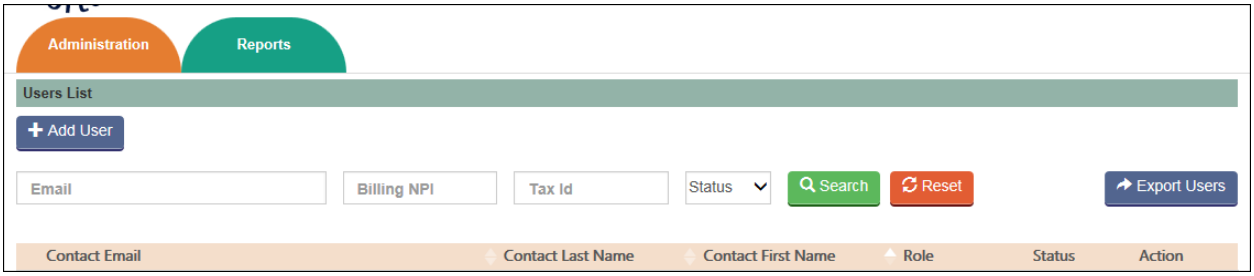


Figure 15: Users List Default View

The **Users** list will be displayed in a collapsed view, by default. When collapsed, the user list displays each user's Contact Email, Contact Last Name, Contact First Name, Role, Status and Update information in the collapsed view. When a user's account detail is expanded, the Provider Admin can also see the individual user's account access, including: Billing Provider Name, Billing NPI, Tax ID, Servicing Provider Name and Service NPI. To expand or collapse a user's account, click the '+' sign located to the left of the

user's Contact Email. When expanded, the '+' sign becomes a '-' sign which can be clicked to collapse the user's account details.

In the expanded user detail view, the admin will be able to see the user's name and access details, differentiated by a different color scheme to indicate which specific user and access, the admin is viewing. If the admin wishes to update that user's access, they can click **Update** for the individual user's account, whether expanded or collapsed.

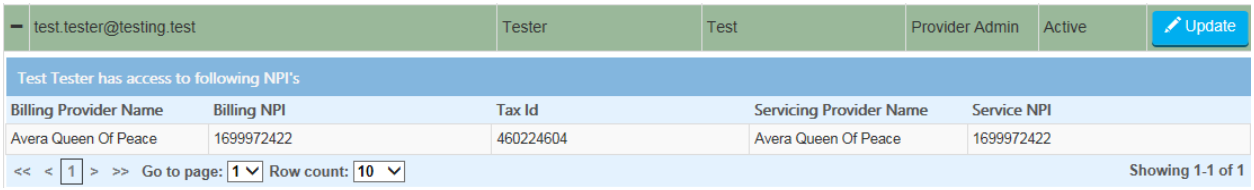


Figure 15: Users List Displayed with Two Collapsed Users View (+) and One Expanded User View (-)

Add Users

Provider Admin users have the ability to add additional Provider Admin and Provider User types within their Medicaid Portal account structure for the appropriate access. It is recommended that the primary Provider Admin user create an additional Provider Admin user to assist with registration requests and Medicaid Portal account maintenance for their organization, in the event of their absence. The eventual additional of new functionality, addition of reports and other abilities, may also mean that the creation of admin users within various business lines of an organization (i.e. Managed Care, Health Home, Medicaid, etc.) to facilitate the appropriate addition of users which will require access and permissions for their relevant reports and information.

Provider Admins are able to "Add User" accounts for any of the Billing NPIs that their Portal account controls. To review a list of NPI's which a user controls or has access to; users can navigate to their "My Profile" screen. This option is available within all account types and can be located by, navigating to your Account Profile, clicking the down arrow, and then selecting My Profile from the sub-menu. The My Profile screen will display a listbox populated with the Billing NPIs available to a Provider Admin account profile. The Billing NPIs listed for a Provider Admin account are those that Admin user account has permissions to add, update and approve/reject, Provider Admin or Provider User accounts for.

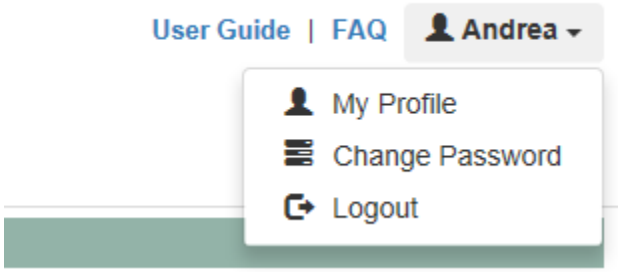


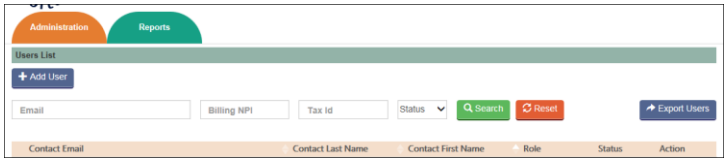
Figure 17: My Profile – Provider Admin's Billing NPI's I Control List View

Add Provider Admin User

The Provider Admin can create accounts for multiple Provider Admins to aide in establishing and delegating the desired account hierarchy within an organization. These additional Admin users will have the ability to create and update and manage users within the Billing NPI(s) assigned to their account. These additional administrative users will also receive email notifications, generated as a result of New Registration requests from additional Provider Admin users within their Billing NPIs for review and approval/rejection.

The following process flow is for a Provider Admin to Add a Provider Admin user account:

1. Hover the mouse over **Administration**
2. Select **User Maintenance** from the sub-menu
3. Select the **Add User** button



4. Select "Provider Admin" from the **User Type** dropdown list
5. Enter Contact information into required Add Provider Admin contact information fields

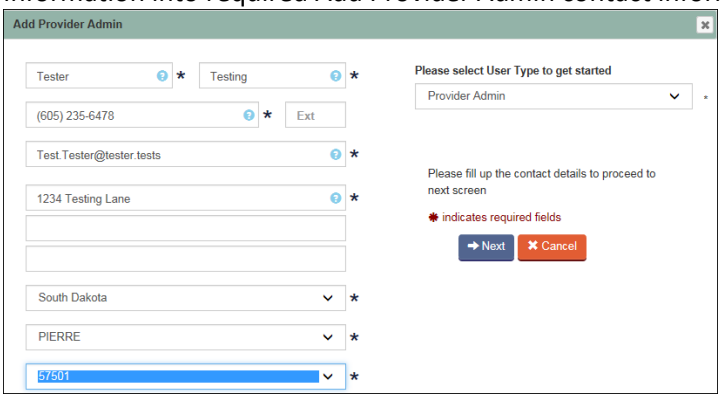


Figure 18: Completed Add Provider Admin Screen 1

6. Click **Next** to proceed to the second **Add Provider Admin** screen
7. Provider Admin accounts must have at least one Billing NPI populated in the **Billing NPI's that you are granting access to** listbox *(Figure 19)*:
    a. Select the Billing NPI value, or list of Billing NPI values for the user's account access, displayed in the Billing NPI list
        1. Users can select Billing NPIs one at a time by checking individual Billing NPI boxes
        2. Select multiple Billing NPIs by checking **Select All** checkbox above the **Billing NPI** list
        3. Search for a Billing NPI by entering it into the search box and clicking the search icon to search for and locate an individual NPI in a list *(Figure 19)*
    b. Click **Add** to populate Billing NPI(s) in the **Billing NPI's that you are granting access to** listbox
        1. Add one Billing NPI at a time, or select multiple Billing NPIs to add at once
        2. The **Add** button will only populate a Billing NPI into the user's BNPI access list, if the Billing NPI value has ***not*** already been added.

i. If the user selects a Billing NPI and clicks **Add**, the Billing NPI will only be added into the access requested listbox, if it has not already been added. This is to prevent duplicates
ii. If a Billing NPI is added in error, the user can click the red 'x' next to that Billing NPI in the **Billing NPI's that you are granting access to** listbox to remove it
iii. Users will be able to populate a value into the "Enter Billing NPI to search from the list below" search box, to locate a Billing NPI from a large list of assigned Billing NPIs
iv. When located, the Billing NPI value will be displayed in red

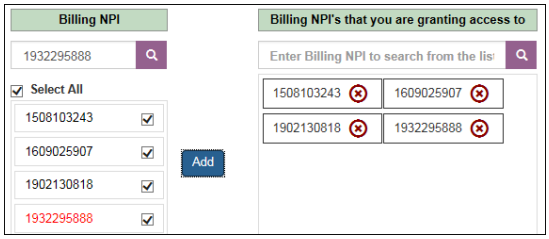


Figure 19: Add User Screen 2 – Search Results are Indicated in Red

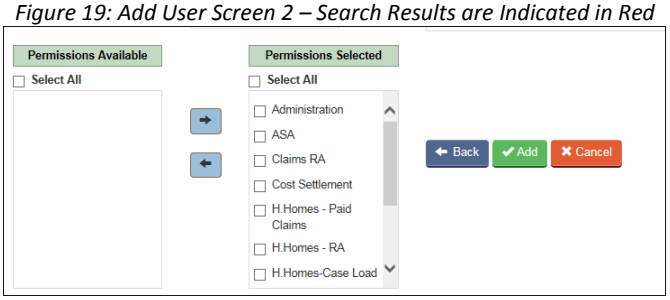


Figure 20: Default Permissions Selected list for a Provider Admin

8. The user will receive confirmation that the Billing NPI has been added successfully. Click "OK" to proceed
9. After selecting the desired Billing NPI(s) for that user's account Billing NPI access, the final step is to review the user's **Permissions Selected**
    a. Provider Admin users will be assigned all available **Permissions Selected**, by default.
        1. To modify a user's **Permissions Selected** options, click on the Permission name
            i. If selected, a Permission will be highlighted in orange for the user
        2. To remove the selected Permission, click the left arrow
        3. The **Permission Available** box will contain the removed Permission

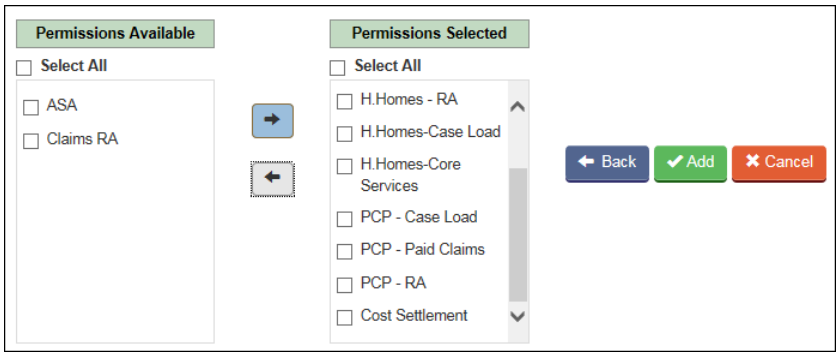


Figure 21: Add Provider Admin User Screen 2 – Defaulted Permissions

10. Click green **Add** button between the "Back" and "Cancel" buttons
    a. User will receive a popup window notification, prompting them to confirm they wish to proceed
    b. By clicking "Ok" the Add User form will be submitted
    c. By clicking "Cancel" the Add User form will not be submitted, allowing the user to make changes prior to submitting the form
11. The newly added Provider Admin user account will now populate into the **Users** list

Add Provider User

The Provider Admin user type is the only user type which can create a Provider User account. The main differentiation between adding a Provider User and Provider Admin is the functionality to assign user access and permissions, at the Servicing NPI level. The Provider User's access can be restricted by the Servicing NPI(s) associated with a single Billing NPI that they have the ability to access. A Provider Admin user has all Servicing NPI(s) associated with all Billing NPI(s) they control, by default. The Provider User account permissions will not contain Administration. This user type will not have the ability to perform user maintenance or other administrative functions, in the Portal. This user type should be considered "read only" although they will have access to generate, view, save and print Reports as well as the future capabilities of Eligibility Status Inquiries, if granted by their Provider Admin.

The following process flow is for a Provider Admin to **Add Provider User** account:

1. Click **Administration**
2. Select **Add User** sub-menu option
3. Select "Provider User" from the **User Type** dropdown list
4. Enter Contact information into required Add Provider User contact information fields

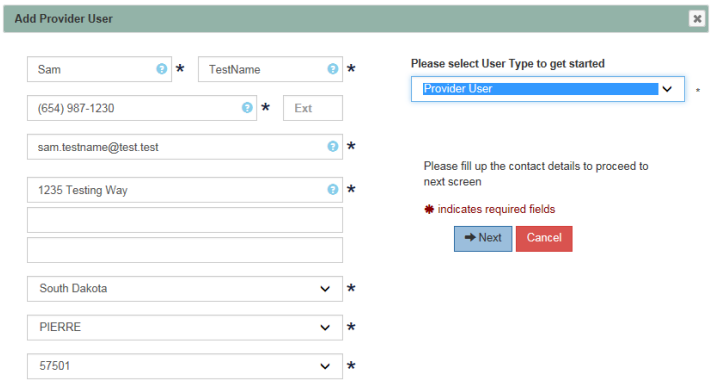


Figure 22: Add Provider User Screen 1 – User's Contact Information

5. Click **Next** to proceed to the second **Add Provider User** screen
6. Provider User accounts must have at least one **Billing NPI-Servicing NPI** combination populated in the **Billing NPI's that you are granting access to** listbox *(Figure 23)*:
    a. Select the Billing NPI value, or list of Billing NPI values for the user's account access, displayed in the Billing NPI list
        1. Users can select Billing NPIs one at a time by checking individual Billing NPI boxes
        2. Select multiple Billing NPIs by checking **Select All** checkbox above the **Billing NPI** list

i. If multiple Billing NPI values are selected, the Billing NPI – Servicing NPI listbox will display ALL combinations of Servicing NPI(s) associated with EACH Billing NPI selected

3. Search for a Billing NPI by entering it into the search box and clicking the search icon to search for and locate an individual NPI in a list *(Figure 23)*

b. After selecting the Billing NPI value, the **Billing NPI – Servicing NPI** box will update with all possible combinations of Servicing NPI(s) associated with the selected Billing NPI(s)

1. Select one **Billing NPI – Servicing NPI** combination checkbox to add one at a time
2. Select multiple **Billing NPI – Servicing NPI** checkboxes or **Select All** checkbox above
3. Search for a particular Servicing NPI by entering it into the search box and clicking the search icon to locate all occurrences of that Servicing NPI in the populated list (*Figure 23*)

c. Click **Add** to populate Billing NPI(s) in the **Billing NPI's that you are granting access to** listbox

1. Add one Billing NPI at a time, or select multiple Billing NPIs to add at once
2. The **Add** button will only populate a Billing NPI into the user's BNPI access list, if the Billing NPI value has ***not*** already been added.

i. If the user selects a Billing NPI and clicks **Add**, the Billing NPI will only be added into the access requested listbox, if it has not already been added. This is to prevent duplicates

ii. If a Billing NPI is added in error, the user can click the red 'x' next to that Billing NPI in the **Billing NPI's that you are granting access to** listbox to remove it

iii. Users will be able to populate a value into the "Enter Billing NPI to search from the list below" search box, to locate a Billing NPI from a large list of assigned Billing NPIs

iv. When located, a Billing NPI, Billing NPI – Servicing NPI, Billing NPI access value will be displayed in red

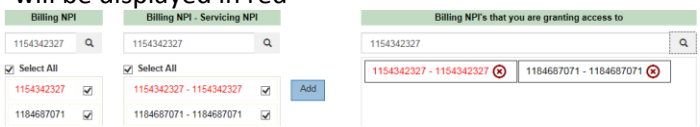


Figure 23: Billing NPI, Billing NPI – Servicing NPI, Billing/Servicing Access Search Results

7. The user will receive confirmation that the Billing NPI has been added successfully. Click "OK" to proceed

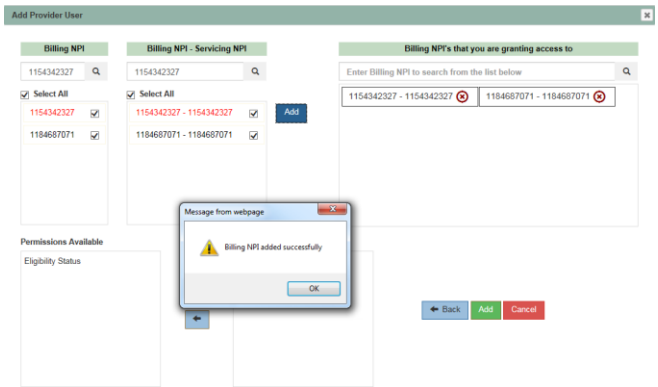


Figure 24: Adding a Billing NPI – Servicing NPI to Access List for Provider User

8. After selecting and adding all required **Billing NPI(s) – Servicing NPI(s)** for that user's account access, the final step is to review the user's **Permissions Selected**
    a. Provider Users can only be assigned **Reports** options in the **Permissions Selected** list
    b. To remove a **Permission Selected** or add a **Permission Available**
        1. Click on the Permission name to select it
            i. A "selected" permission will be highlighted to indicated it has been selected
        2. Click the left arrow button to move a selected Permission into the **Permissions Available** list
        3. Click the right arrow to move a selected Permission into the **Permissions Selected** list
        4. Users can select multiple checkboxes to move multiple Permissions, simultaneously

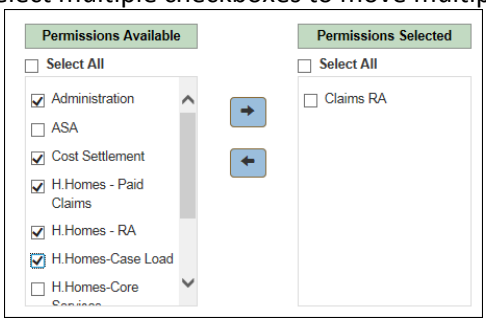


Figure 25.1: Selecting Multiple Permissions Checkboxes

9. Click green **Add** button between the "Back" and "Cancel" buttons
    a. User will receive a popup window notification, prompting them to confirm they wish to proceed
    b. By clicking "Ok" the Add User form will be submitted
    c. By clicking "Cancel" the Add User form will not be submitted, allowing the user to make changes prior to submitting the form
10. The newly added Provider User account will now populate into the **Users** list

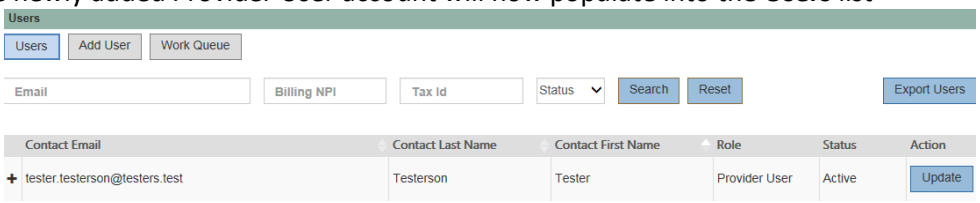


Figure 27: Added Provider User Account Displays in Users List

Work Queue

Provider Admin users must check their Work Queue regularly for pending Registration requests. If a Provider Admin has a pending request in their Work Queue that has not been approved or rejected within three days of the user submitting their Registration form, the Provider Admin user will receive an email notification regarding the awaiting request. Provider Admin users will only receive a Registration Request in their Work Queue when the Requestor has included the Billing NPI(s) which are administered and controlled by their Provider Admin account access. If the Requestor submits a request that includes more Billing NPIs or a combination of Billing NPIs for which the Provider Admin does not already administer access to, the Registration Request will not go into that Provider Admin's Work Queue. If the Requestor submits a request for access to one or more of the Billing NPIs that the Provider Admin currently administers access to, that request will be sent to the Provider Admin's Work Queue.

Accept/Reject Provider Admin Registration Request

New Registration requests are submitted to the Provider Admin user's **Work Queue** for review. This Provider Admin user and any additional Provider Admin users, for the requested Billing NPI access, will be able to approve or reject the request. Only a Provider Admin can submit a New Registration request. If a user submits a registration request to the Provider Admin, the admin will not have the ability to change the user type in the submitted request, to **Provider User**. If the user should not be granted administrative permissions, the Provider Admin should Reject the registration request and add the user account, manually.

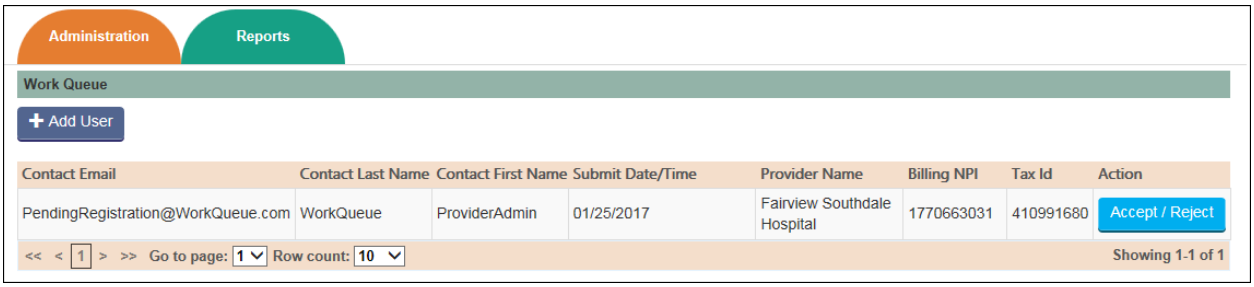


Figure 28: Work Queue with Pending Registration Request for Review

Provider Admins will receive all registration requests for any Billing NPIs they control, in their **Work Queue**. The admin must click **Accept/Reject** in the **Action** column to open that user's registration request. The **Accept/Reject** registration request window will then open and display the user's contact information in the first Accept/Reject screen.

To **Accept/Reject** a User's Registration Request:

1. In the **Work Queue**, click "Accept/Reject" from the **Action** column
2. The Accept/Reject Provider Admin screen will open to the user's Contact form details
    a. The Provider Admin will not be able to update or modify the contact details within a registration request
        1. Once submitted, the Contact form field details cannot be modified
        2. If the user did not complete the form appropriately, the Admin should reject the request.

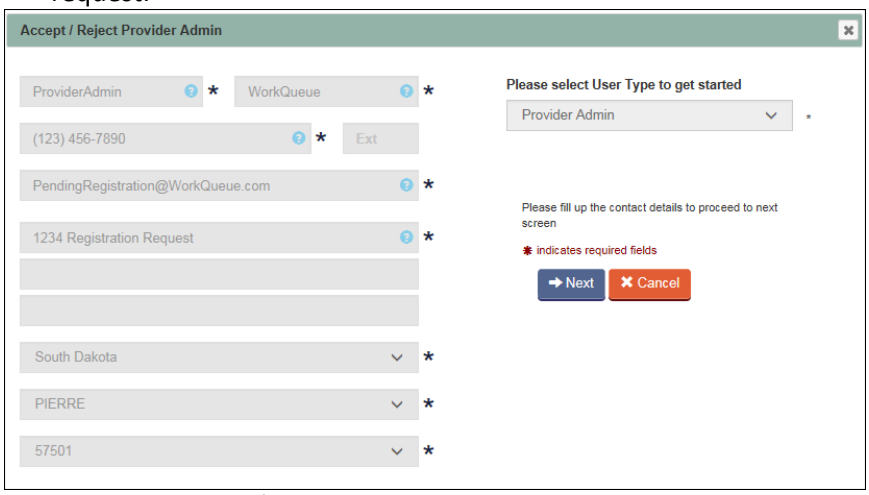


Figure 29: Accept/Reject Provider Admin Screen 1 – User Contact Details

3. Click **Next** to proceed to the second **Accept/Reject Provider Admin** screen
4. The Provider Admin should review the user's requested Billing NPI access
    a. The Provider Admin should confirm that the Billing NPIs being granted to that user are legitimate and that there are no obvious Billing NPIs omitted from their request, in error
5. Confirm that the user should have all listed Permissions Selected values and remove any unnecessary Permissions (if any)
    a. To remove a permission, click on a Permission to select it
    b. Click the left arrow to move it into the **Permissions Available** list
6. Click **Accept** to Approve the user's registration request or
7. Click **Reject** to Deny the user's registration request.
8. User must click "OK" or "Cancel" on the confirmation to proceed message window
    a. Clicking "Cancel" will return the user back to the Accept/Reject screen to make additional changes if necessary
    b. Clicking "OK" will proceed with the approval or rejection email generation process
9. Approved users will be added into the Provider Admin's **Users** list

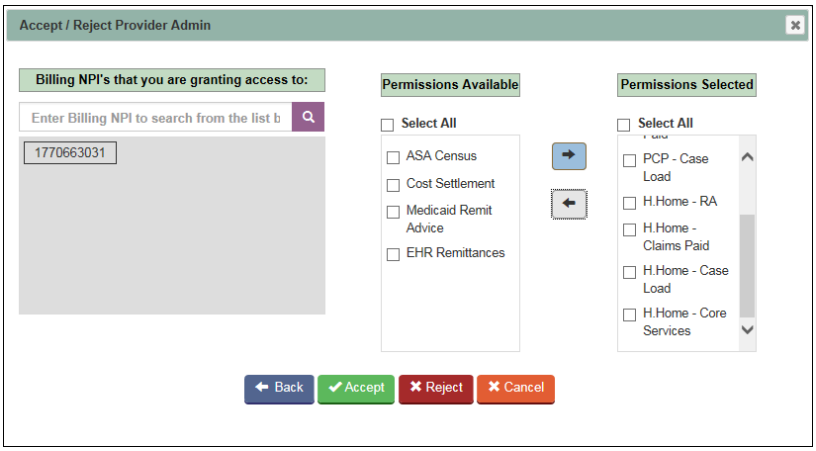


Figure 30: Accept/Reject Provider Admin Screen 2 – User's Request Access Details & Permissions

Update Provider Admin

An organization's Provider Admin users have the ability to update User profile information, including changing a user's contact information, resetting their password, inactivating a user, adding/removing Billing NPI access and adding/removing Permissions. To perform an Update, the administrator must navigate to their Users list. Within the list of Users, the administrator will then need to select Update from the Action column to make the necessary modifications to the user's existing account profile.

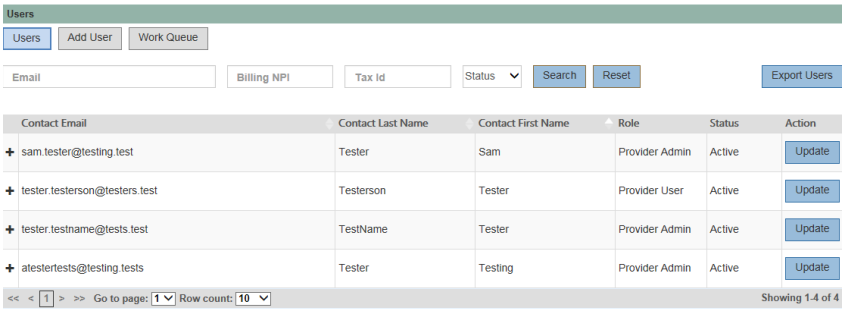


Figure 31: Users List with Available Update Action Button

To **Update Provider Admin** user account details:

1. Click **Update** from the **Action** column, for the user which is being modified
2. The first **Update Provider Admin** screen will be displayed, allowing the administrator to make necessary changes to the user's contact information
    a. The user's Email field cannot be updated. If a user's email address changes, the administrator must first Inactivate that user's account and create a new account
    b. If the user is being made "InActive" the administrator must click the "InActive" checkbox and click Next
        1. Click **Update** button in second Update Provider Admin screen
        2. Click "OK" on the prompt to proceed with update to submit the changes
        3. Click "Cancel" on the prompt to proceed with update to cancel the changes and return to the Update Provider Admin screen
    c. To perform a "Reset Password" the administrator must click "RESET PASSWORD" then
        1. Click "OK" to confirm the process to reset the user's password
        2. Click "Cancel" to return to **Update Provider Admin** screen, cancelling the password reset

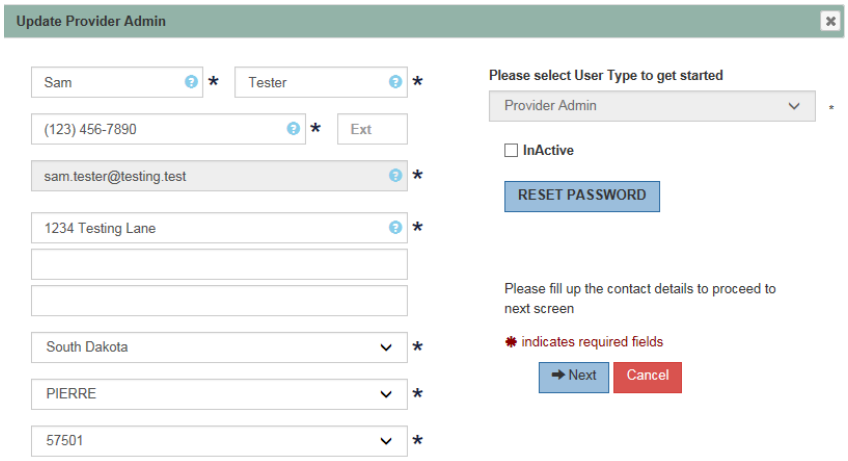


Figure 32: Update Provider Admin Screen 1 – Contact Information, InActive Checkbox, Reset Password Button

3. Click **Next** to proceed to the second Update Provider Admin screen
4. Perform any necessary updates to the user's Billing NPI access
    a. To remove a Billing NPI, click the red 'x' for the Billing NPI populated in the Billing NPI granted access list
    b. To add a Billing NPI to the user's existing permissions, perform the Add Billing NPI steps as defined in the Add Provider Admin screen 2 steps.
5. Perform any necessary updates to the user's Permissions by selecting and moving the desired permissions into the appropriate list
    a. Permissions *NOT* assigned to a user profile will be displayed in the **Permissions Available** list
    b. Permissions currently assigned to a user profile will be displayed in the **Permissions Selected** list
6. Click the **Update** button to complete and save the changes
    a. Click "OK" to confirm you wish to proceed with making the updates to this user's account

b. Click "Cancel" to return back to the Update Provider Admin screen and made additional changes

7. After performing updates to a user's account, the changes to their account will be available for review in the user's account details in their **My Profile** sub-menu

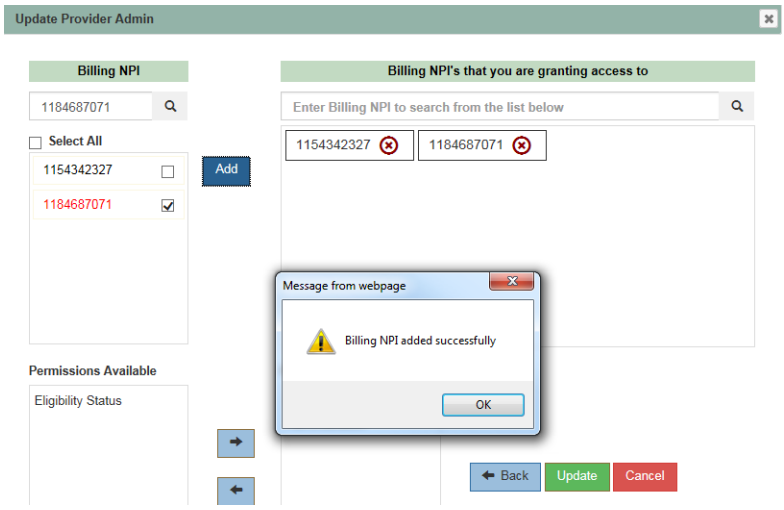


Figure 33: Updating Provider Admin – Added a Billing NPI to User's Billing NPI Access

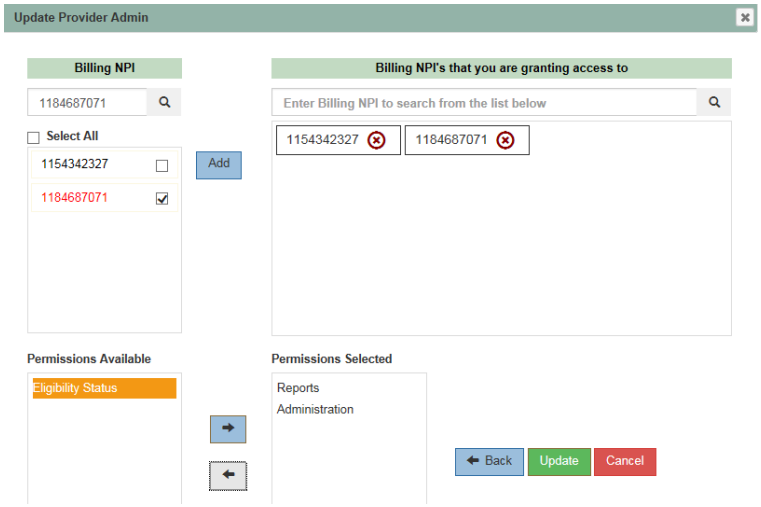


Figure 34: Updating Provider Admin – Removed Eligibility Status from User's Permissions

Update Provider User

The process to update a Provider User account will be similar to the Update Provider Admin process, with the exception of choosing to modify that user's Billing NPI – Servicing NPI account access and the inability to add administrative Permissions to their account. In the Update Provider User screen one, the administrator will be able to perform the same updates to a Provider User's contact details, inactivate their account and reset their password as described in the Update Provider Admin process above.

To **Update Provider User** account details:

1. Locate the user's account in your **Users** list and click **Update**
2. Perform all necessary updates to the user's contact information

a. Click **InActive** checkbox to inactivate the user's account, then click Next to complete the process of inactivating a user
b. Click **RESET PASSWORD** button to create a new system generated, temporary password to be sent to the user's email address

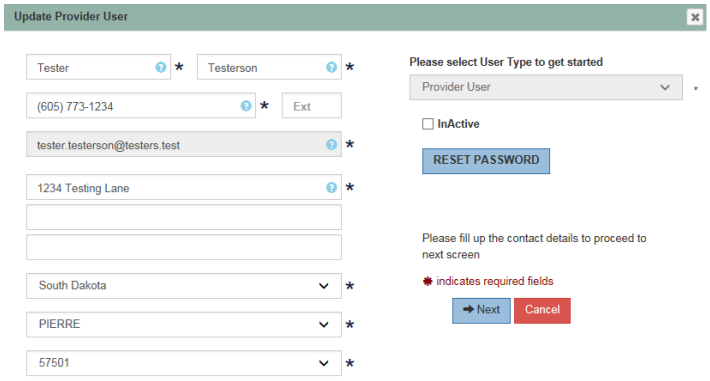


Figure 35: Update Provider User Screen 1 – Matches Update Provider Admin Screen 1 Functionality

3. Click **Next** to proceed to second Update Provider User screen
4. Perform any necessary updates to the user's **Billing NPI – Servicing NPI** access
   a. To remove a Billing NPI – Servicing NPI combination, click the red 'x' next to that value in the Billing NPI granted access to list
   b. To add a Billing NPI – Servicing NPI combination to the user's existing access, perform the Add Billing NPI – Servicing NPI steps as defined in the **Add Provider User** screen 2 steps.
5. Perform any necessary updates to the user's Permissions by selecting and moving the desired permissions into the appropriate list
   a. Permissions *NOT* assigned to a user profile will be displayed in the **Permissions Available** list
   b. Permissions currently assigned to a user profile will be displayed in the **Permissions Selected** list
6. Click the **Update** button to complete and save the changes
   a. Click "OK" to confirm you wish to proceed with making the updates to this user's account
   b. Click "Cancel" to return back to the Update Provider Admin screen and made additional changes
7. After performing updates to a user's account, the changes to their account will be available for review in the user's account details in their **My Profile** sub-menu

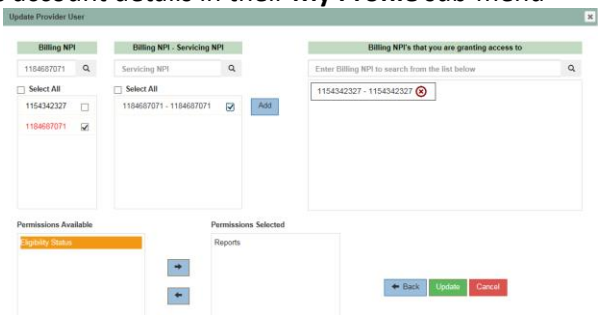


Figure 36: Update Provider User Screen 2 – Before Updating User's Account Access & Permissions

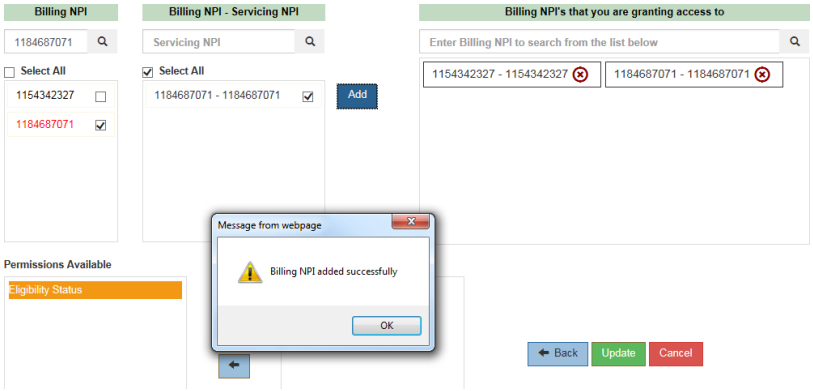


Figure 37: Update Provider User – Added a BNPI/SNPI to User's BNPI/SNPI Access

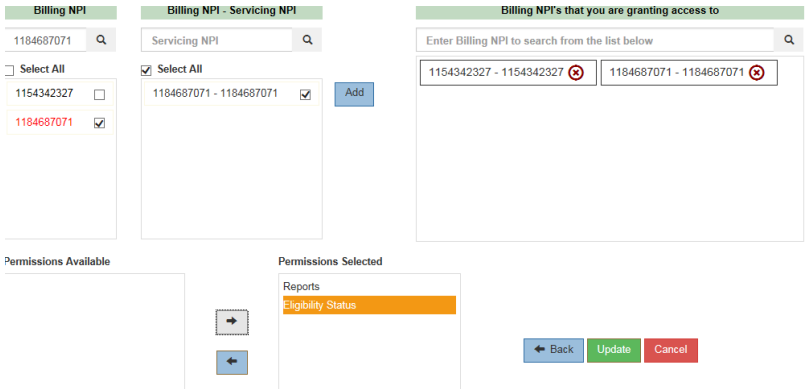


Figure 38: Update Provider User – Added Eligibility Status to User's Permissions Selected

Inactivating a User Account & Resetting User Password

If an Admin or User loses their password, the **Forgot Password** link on the **Login** page can help the user to obtain a new temporary password via email. If the user cannot remember their security question responses, has not logged into their Portal account for more than 90 days, or for some other reason is unable to complete the **Forgot Password** process, their Portal administrator can log into the Portal and reset the user's password, as noted in the above **Update Provider Admin** and **Update Provider User** processes.

After the Portal administrator has completed the **Reset Password** process, the user will be sent a new Temporary Password via the designated email address which is also their Portal Username for login. This Temporary Password will expire 3 days (72 hours) after receipt of the email. The user must login and complete the process to select a new password, prior to the temporary password expiration timeframe. If the user does not complete this login process to select a new password, they must have their password reset again by their Portal administrator.

Once a user's account is made Inactive, that user will be unable to login and access the Portal. Only a Provider Admin can log into the Portal and update the user's account as Active. This process can be done in the Update process.

Reports

The Medicaid Portal was designed to allow SD Medicaid Providers access to their reports at their discretion, electronically. This feature also allows them to determine the access needed by their billing and other facility staff to reports by type of report and to the specificity of individual providers to which those users require access. This creates a layer of security in protecting PHI in adherence with HIPAA by giving our providers the autonomy to determine what access is needed, by whom, which adheres to their internal organization's business structure and operational policy.

Medicaid Remittance Advice

The Medicaid Portal allows South Dakota Medicaid Providers the ability to retrieve up to 52 weeks of remittance advices, electronically. The ability to view, save and print remittance advices for a particular Billing NPI or Billing/Servicing NPI combination is determined by the user's Portal account profile and available access. If a user does not have the ability to retrieve remittance advice reports for a specific Billing/Servicing NPI combination, they must send a request to their Portal administrator to have that Billing/Servicing NPI combination added into their account access.

There are two options for how to view your remittance advices in the **Reports** menu:

1. Login to the Portal and click on Medicaid Remittance Advice from the **Reports** sub-menu
2. Select the **From** and **To** date span for which you'd like to view Remittance Advices for
    a. The date span cannot exceed 90 days
    b. The remittance advices will only be available for the most current 52 weeks prior to today's date
        1. The full 52 week history of Medicaid Remittance Advice reports will be available
        2. Only 90 days of Remittance Advices can be viewed at one time
        3. If the user attempts to enter an invalid date range, they will receive and error
3. There are two radio buttons for you to choose between, which will determine the Medicaid Remittance Advice report format:
    a. **<u>Combined Remittance by BNPI</u>** – This option will generate one ***combined*** remittance advice for a Billing NPI and all Servicing NPIs associated with that Billing NPI, into one report for a remittance date
        1. To generate **Combined Remittances by Billing NPI** for a date span, the user must start by entering the **From** and **To** dates being searched
        2. Enter a Billing NPI number into the **Billing NPI** field
        3. Click **Create Report** button
        4. The screen will refresh and display a single Remittance Advice for that Billing NPI, that was created within your **From** and **To** date span
        5. Click **View** hyperlink for the remittance date you wish to view
            i. A new browser window should open and the Remittance Advice for that date will be displayed in PDF format.
            ii. On the report browser window users can View, Save, and Print the Remittance Advice report at their discretion
            iii. Users can click on multiple View links to open multiple Remittance Advice reports in their own windows
            iv. Users can close out of the Remittance Advice report windows without closing out of the Portal because it will be in its own browser window

b. **<u>Separate Remittances by BNPI/SNPI</u>** – This option allows you to select Remittance Advice reports you wish to view from a list of Servicing NPIs associated with a Billing NPI, during the selected **From** and **To** date span. In this option, the Remit generated will only include a ***single*** Servicing NPI for a remittance date

1. If you select this option, enter the Billing NPI value into the **Billing NPI** field
2. The **Servicing NPI** listbox will now appear with all Servicing NPIs associated to the Billing NPI
3. Select the complete list by checking "Select All"; or check individual SNPI boxes to view specific SNPIs (In the example below, only a few SNPIs were selected)
4. Click **Create Report** button
5. The screen will refresh and display individual Remittance Advices for a Billing/Servicing NPI, created within the selected **From** and **To** date span.
6. Click **View** hyperlink for a remittance date and Servicing NPI you wish to review
   i. A new browser window should open and the Remittance Advice for that date and Servicing NPI will be displayed in PDF format
   ii. On the report browser window users can View, Save, and Print the Remittance Advice
   iii. Users can click on multiple View links to open multiple Remittance Advice reports in their own windows
   iv. Users can close out of the Remittance Advice report windows without closing out of the Portal because it will be in its own browser window

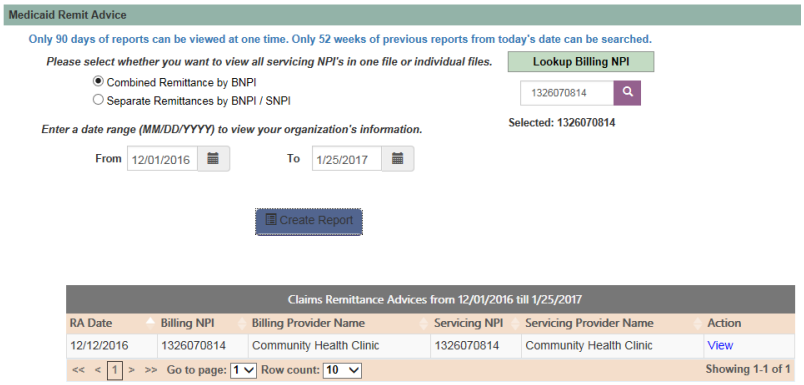


Figure 43: Combined Remittance by Billing NPI Report View

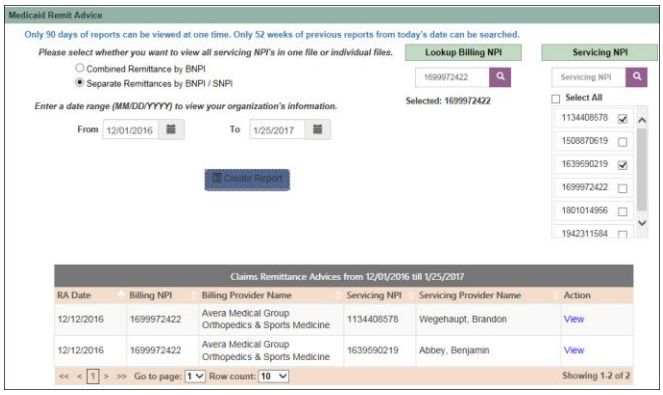


Figure 44: Separate Remittances by Billing NPI/Servicing NPI Report View

Health Home Reports

The Medicaid Portal allows Health Home providers and their facility staff access to several reports. The Health Home Reports can be found in the **Reports** sub-menu by hovering over Health Home to view the options. The user will be directed to the desired report after clicking on the Health Home sub-menu option.

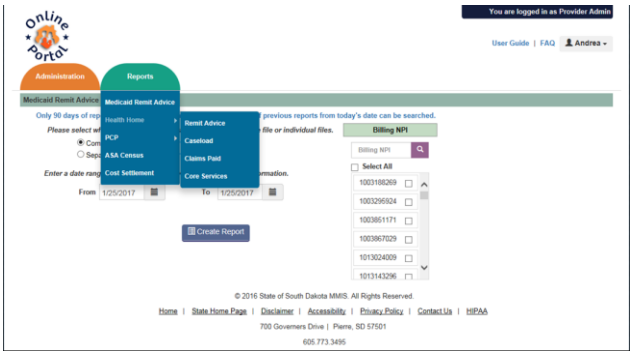


Figure 45: Health Home Reports Sub-Menu Selections

Health Home Remittance Advice

Health Home providers and their staff have the ability to view Health Home Remittance Advice reports via the Online Portal. Similar to the Medicaid Remittance Advice reports, users have the ability to generate Remittance Advice reports within a 90 day date span by Combined Billing/Servicing NPI or Separated by Billing/Servicing NPI.

In the Combined report view, the user can select a Billing NPI and the report view populates with remittances for all dates where that Billing NPI received a remittance advice. In the remittance advice view, the PDF report will combine all the Servicing NPIs which received remittance advice on that report date.

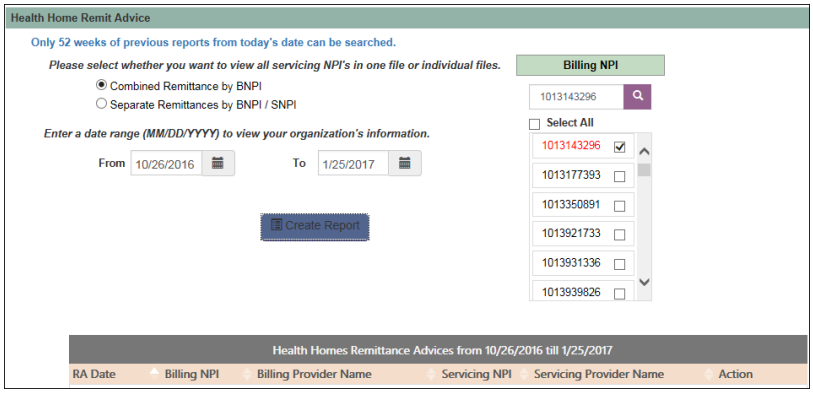


Figure 46: Health Home Remittance Advice - Combined Remittance by BNPI Screen

In the Separate by Billing/Servicing NPI report view, the user can select one or more Servicing NPIs associated with a Billing NPI to view remittance advice reports for. In the remittance advice view, the PDF report will only display the Servicing NPIs which received remittance advice on the date viewed, based upon their selection criteria of Servicing NPI(s).

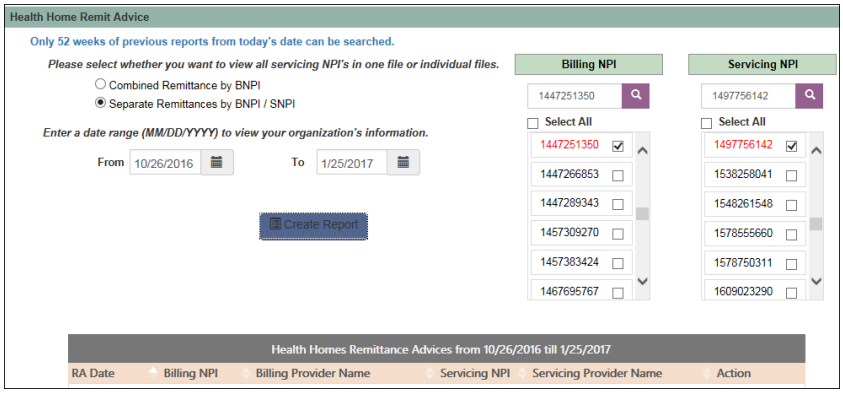


Figure 47: Health Home Remittance Advice - Separate Remittance by BNPI/SNPI Screen

Health Home Caseload

Health Home providers and their staff may view and export their current Health Home Caseload reports each month in the Medicaid Portal. The Health Home Caseload report view includes two options for Caseload reports. By selecting the Recipient & Family Information radio button, users will generate their monthly Caseload report to view in the Portal or to Export to Excel. By selecting the Export to HIE radio button, users will generate a Health Home Caseload report in the required format for being uploaded to HIE. This new functionality replaces the previous means by which providers manually tracked the required information to upload.

Steps To generate a Health Home Caseload Report:

1. Under the Reports menu, hover the mouse over Health Home to display the sub-menu options
2. Click on Caseload
3. Select year from the Report Year dropdown
4. Select month from the Report Month dropdown
5. Select Recipient & Family Information to view the Caseload report
6. Select the Billing NPI(s) for this report
    a. If generating a report for multiple Billing NPIs, users can select each Billing NPI by checking the individual checkboxes or by clicking the Select All checkbox to generate one report for all available Billing NPIs
    b. Users can search for a Billing NPI by entering the Billing NPI being searched in the text box below the green Billing NPI header, next to the purple magnifying glass icon and then clicking the magnifying glass icon to perform the search. The Billing NPI will be highlighted in red for easier identification. If Billing NPI is not found, user will receive a notification that no results were returned for the Billing NPI search

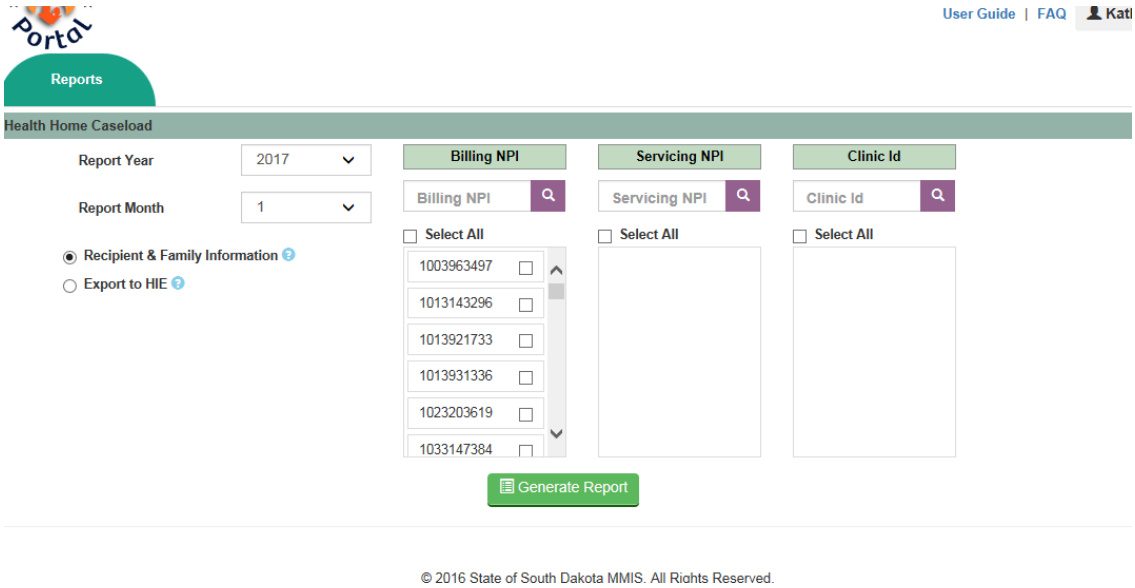


Figure 48: Health Home Caseload Report Screen Billing NPI List

7. The Servicing NPI list will populate based upon the selected Billing NPI to only populate those which are associated with the selected Billing NPI(s)
   a. Provider Admins will have the ability to generate Caseload reports for all Servicing NPIs associated with their Billing NPI(s), by default.
      a. Since Provider User access is limited by Billing/Servicing NPI combination, it is up to the Provider Admin to update the existing Provider User accounts with the appropriate Servicing NPI access and permissions required to view their reports.
         1. Provider Admins are also responsible for adding newly approved providers to their existing user accounts, when that user requires access to reports for the Servicing NPI.
   b. If you are a Provider User, your Servicing NPI list will only populate with the Servicing NPIs that your Provider Admin has given you permission to view reports for.
      a. If there is a Servicing NPI missing in your list, please contact your Provider Admin user to request that they add the Billing/Servicing NPI combination into your account access.
      b. Newly approved Servicing NPIs which have completed the SD Medicaid Provider Enrollment or Revalidation process will be available to Provider Admins once the Portal is synced with the SD MEDX Provider Enrollment system. This process is scheduled weekly.
         1. If the Servicing NPI is not listed although it is active in SD MEDX and has a Caseload, please contact the DSS Medicaid Portal staff.
         2. If the Servicing NPI is not approved or has not completed the Enrollment or Revalidation process, their records will not be available in the Portal until SD MEDX has been updated to reflect their Enrollment status.

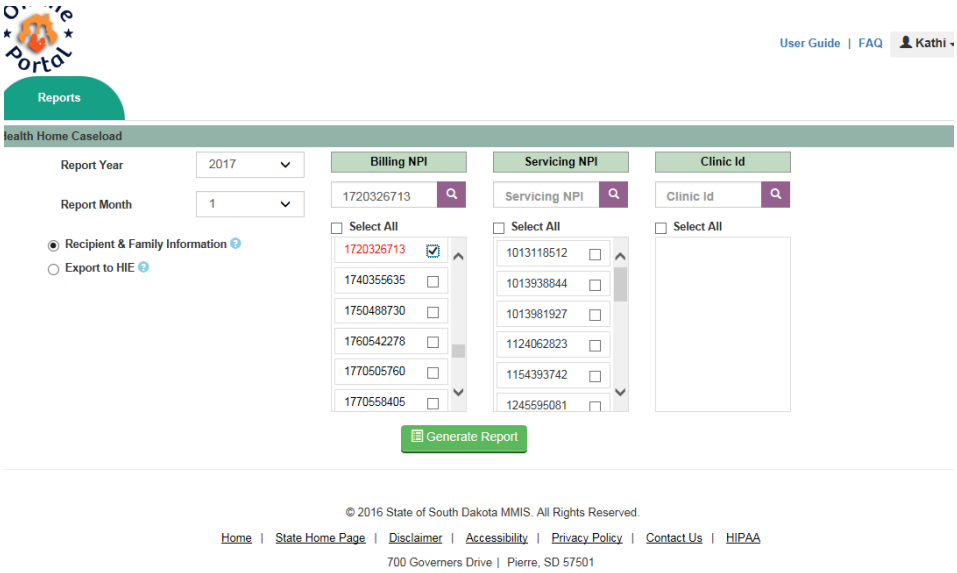
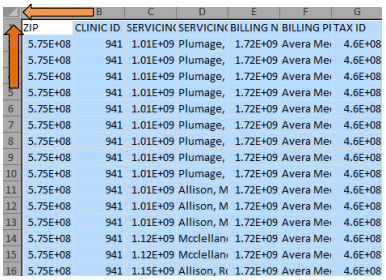


Figure 49: Health Home Caseload Report Screen Servicing NPI List

8. Click Generate Report button
   a. The screen will refresh to display the Caseload report. Users can expand and collapse individual Servicing NPIs by clicking the "+" sign to view the provider's Caseload records.
9. Click Export to Excel button to download and open the Caseload report in Excel format
   a. After clicking Export to Excel, user will see a flashing yellow notification bar along the bottom of their screen asking to Open, Save, or Cancel the report export.
   b. Click 'Open' to download and open the report in Excel
   c. The report will be displayed in default column width view, and needs to be expanded to auto-fit the column contents for easier review
      a. To expand and auto-fit the contents, click on the downward facing arrow in the upper right hand column of the Excel document between column "A" and row 1. This will select or highlight the entire worksheet.
      b. After highlighting the worksheet, hover mouse over the line between columns "B" and "C" which will turn the pointer to a line with arrows on the left and right side then double click.
         1. If the mouse isn't in the right location, the sheet will be deselected and user must reselect and try again.
         2. Users can also auto-fit one column at a time by double clicking the line between columns for each which does not display properly.



	B	C	D	E	F	G
ZIP	CLINIC ID	SERVICING	SERVICING	BILLING N	BILLING PI	TAX ID
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Allison, M	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Allison, M	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Allison, M	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.12E+09	Mcclellan	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.12E+09	Mcclellan	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.15E+09	Allison, R	1.72E+09	Avera Me	4.6E+08

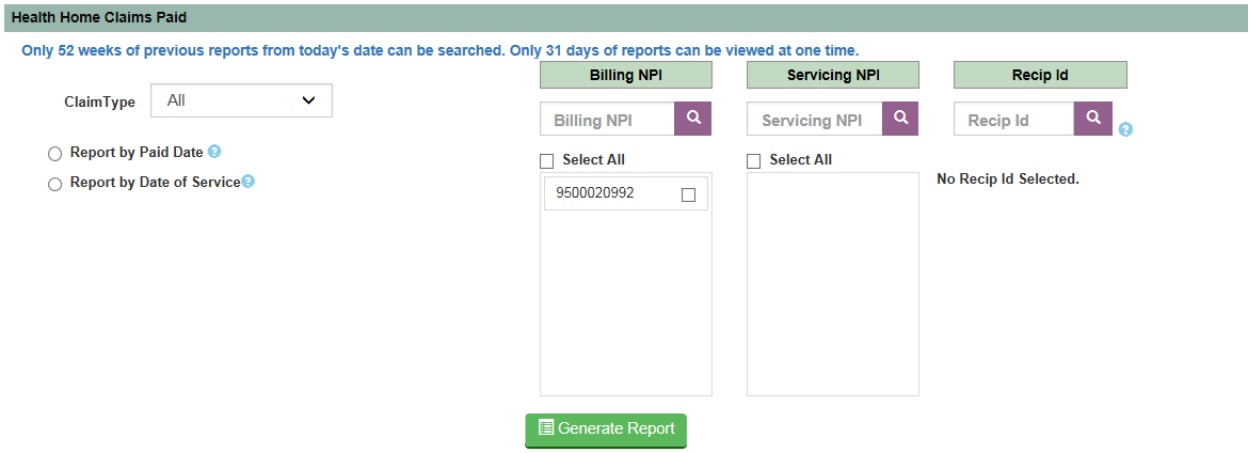
Figure 50: Health Home Caseload Report Export to Excel Default View

Health Home Claims Paid

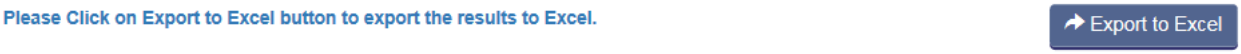
The Health Home Claims Paid reports are now available.

Steps To generate a Health Homes Claims Paid Report:

1. Under the Reports menu, hover the mouse over Health Home to display the sub-menu options
2. Click on Claims Paid
3. Select claim type from the Claim Type dropdown
4. Choose Report by Paid Date or Date of Service
5. Select your Billing NPI
6. Select your Servicing NPI

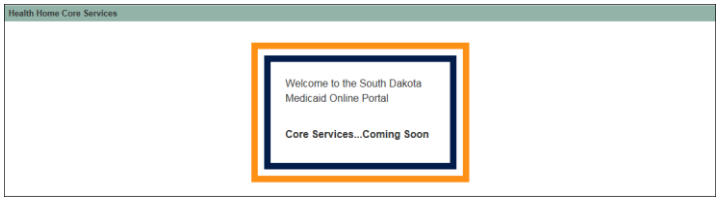


7. Enter the Recipient Medicaid ID (Optional)
8. Click the Generate Report button
9. Click to Export your report to Excel



Health Home Core Services

The Health Home Core Services reports will be coming soon to the Medicaid Portal.



Primary Care Provider (PCP) Reports

The Medicaid Portal allows Primary Care Providers (PCPs) access to several reports.

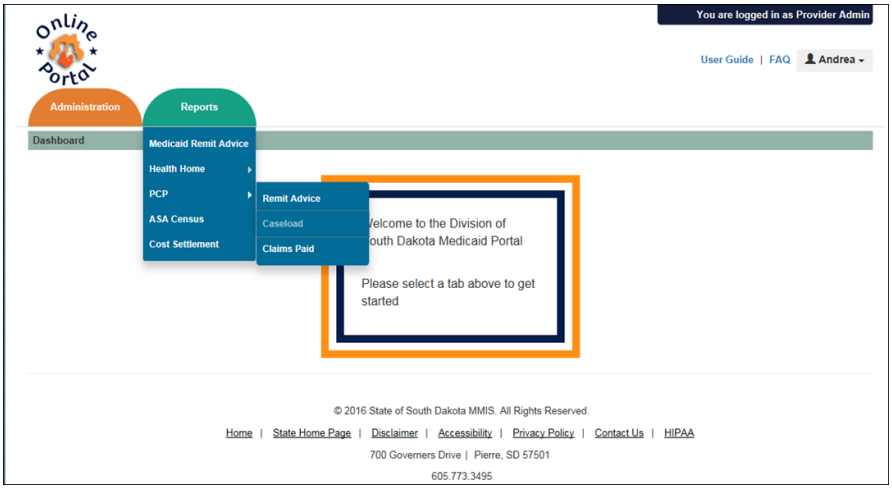


Figure 51: Primary Care Provider (PCP) Report Sub-Menu Selections

PCP Remittance Advice

PCPs and their staff have the ability to view PCP Remittance Advice reports via the Online Portal. Similar to the Medicaid Remittance Advice and Health Home Remittance Advice reports, users have the ability to generate Remittance Advice reports within a 90 day date span by Combined Billing/Servicing NPI or Separated by Billing/Servicing NPI.

In the Combined report view, the user can select a Billing NPI and the report view populates with remittances for all dates where that Billing NPI received a remittance advice. In the remittance advice view, the PDF report will combine all the Servicing NPIs which received remittance advice on that report date.

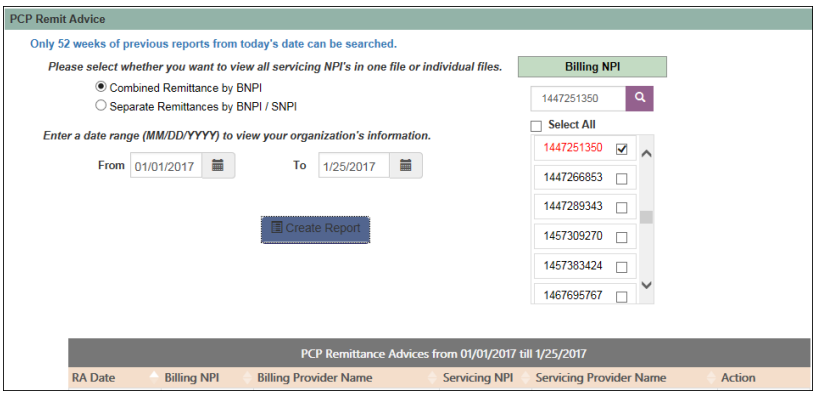


Figure 52: PCP Remittance Advice - Combined Remittance by BNPI Screen

In the Separate by Billing/Servicing NPI report view, the user can select one or more Servicing NPIs associated with a Billing NPI to view remittance advice reports for. In the remittance advice view, the PDF report will only display the Servicing NPIs which received remittance advice on the date viewed, based upon their selection criteria of Servicing NPI(s).

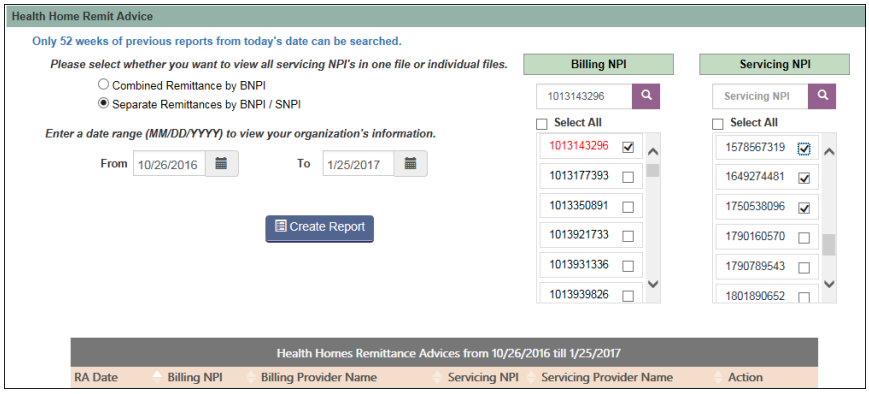


Figure 53: PCP Remittance Advice - Separate Remittance by BNPI/SNPI Screen

PCP Caseload

Primary Care Providers (PCPs) and their staff may view and export their current PCP Caseload reports each month in the Medicaid Portal. By selecting the Recipient & Family Information radio button, users will generate their monthly Caseload report to view in the Portal or to Export to Excel.

Steps To generate a PCP Caseload Report:

1. Under the Reports menu, hover the mouse over PCP to display the sub-menu options
2. Click on Caseload
3. Select year from the Report Year dropdown
4. Select month from the Report Month dropdown
5. Select Recipient & Family Information to view the Caseload report
6. Select the Billing NPI(s) for this report
   a. If generating a report for multiple Billing NPIs, users can select each Billing NPI by checking the individual checkboxes or by clicking the Select All checkbox to generate one report for all available Billing NPIs
   b. Users can search for a Billing NPI by entering the Billing NPI being searched in the text box below the green Billing NPI header, next to the purple magnifying glass icon and then clicking the magnifying glass icon to perform the search. The Billing NPI will be highlighted in red for easier identification. If Billing NPI is not found, user will receive a notification that no results were returned for the Billing NPI search.

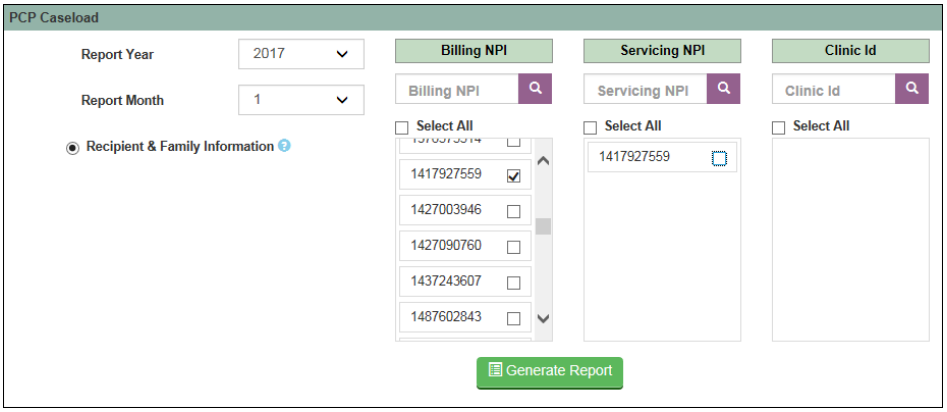


Figure 54: PCP Caseload Report Screen Billing NPI List

7. The Servicing NPI list will populate based upon the selected Billing NPI to only populate those which are associated with the selected Billing NPI(s)
   a. Provider Admins will have the ability to generate Caseload reports for all Servicing NPIs associated with their Billing NPI(s), by default.
      a. Since Provider User access is limited by Billing/Servicing NPI combination, it is up to the Provider Admin to update the existing Provider User accounts with the appropriate Servicing NPI access and permissions required to view their reports.
         1. Provider Admins are also responsible for adding newly approved providers to their existing user accounts, when that user requires access to reports for the Servicing NPI.
   b. If you are a Provider User, your Servicing NPI list will only populate with the Servicing NPIs that your Provider Admin has given you permission to view reports for.
      a. If there is a Servicing NPI missing in your list, please contact your Provider Admin user to request that they add the Billing/Servicing NPI combination into your account access.
      b. Newly approved Servicing NPIs which have completed the SD Medicaid Provider Enrollment or Revalidation process will be available to Provider Admins once the Portal is synced with the SD MEDX Provider Enrollment system. This process is scheduled nightly.
         1. If the Servicing NPI is not listed although it is active in SD MEDX and has a Caseload, please contact the DSS Medicaid Portal staff.
         2. If the Servicing NPI is not approved or has not completed the Enrollment or Revalidation process, their records will not be available in the Portal until SD MEDX has been updated to reflect their Enrollment status.

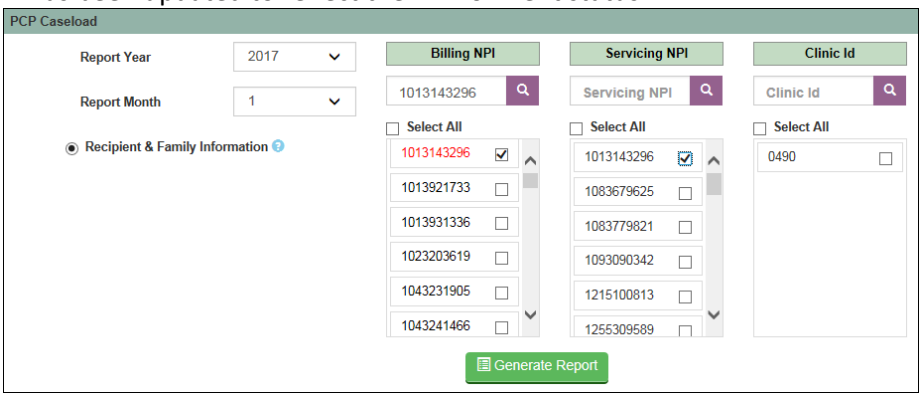
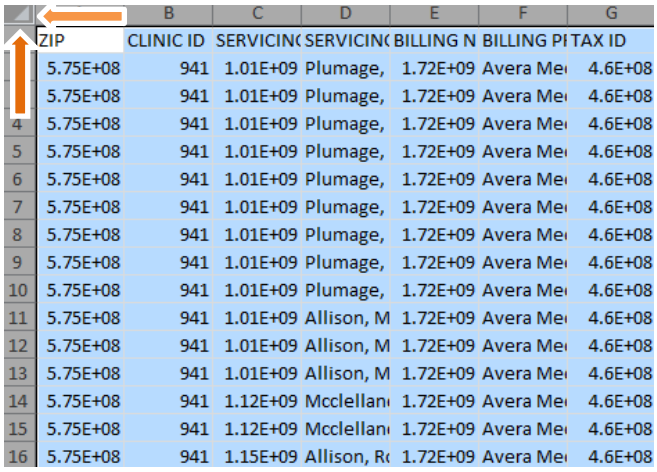


Figure 55: PCP Caseload Report Screen Servicing NPI List

8. Click Generate Report button
   a. The screen will refresh to display the Caseload report. Users can expand and collapse individual Servicing NPIs by clicking the "+" sign to view the provider's Caseload records.
9. Click Export to Excel button to download and open the Caseload report in Excel format
   a. After clicking Export to Excel, user will see a flashing yellow notification bar along the bottom of their screen asking to Open, Save, or Cancel the report export.
   b. Click 'Open' to download and open the report in Excel
   c. The report will be displayed in default column width view, and needs to be expanded to auto-fit the column contents for easier review

a. To expand and auto-fit the contents, click on the downward facing arrow in the upper right hand column of the Excel document between column "A" and row 1. This will select or highlight the entire worksheet.
b. After highlighting the worksheet, hover mouse over the line between columns "B" and "C" which will turn the pointer to a line with arrows on the left and right side then double click.
    1. If the mouse isn't in the right location, the sheet will be deselected and user must reselect and try again.
    2. Users can also auto-fit one column at a time by double clicking the line between columns for each which does not display properly.



	B	C	D	E	F	G
ZIP	CLINIC ID	SERVICIN(	SERVICIN(	BILLING N	BILLING PI	TAX ID
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Plumage,	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Allison, M	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Allison, M	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.01E+09	Allison, M	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.12E+09	Mcclellan	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.12E+09	Mcclellan	1.72E+09	Avera Me	4.6E+08
5.75E+08	941	1.15E+09	Allison, R	1.72E+09	Avera Me	4.6E+08

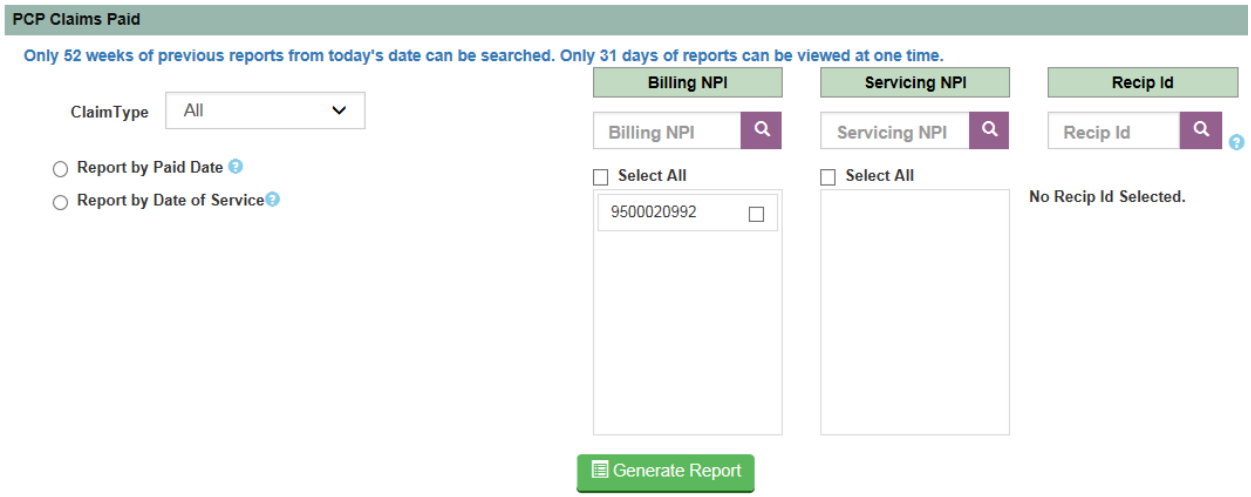
Figure 56: PCP Caseload Report Export to Excel Default View

PCP Claims Paid

The PCP Claims Paid reports are now available.

Steps To generate a PCP Claims Paid Report:

1. Under the Reports menu, hover the mouse over PCP to display the sub-menu options
2. Click on Claims Paid



3. Select claim type from the Claim Type dropdown
4. Choose Report by Paid Date or Date of Service
5. Select your Billing NPI
6. Select your Servicing NPI
7. Enter the Recipient Medicaid ID (Optional)
8. Click the Generate Report button
9. Click to Export your report to Exce

Please Click on Export to Excel button to export the results to Excel.

Census Status Report

The Census Status Report is now available through the Medicaid Portal.

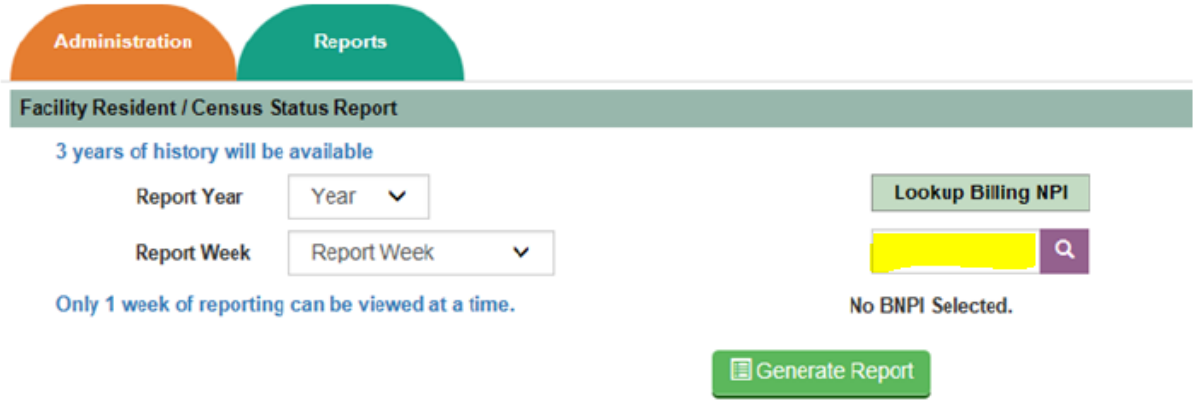
Steps To generate a Census Status Report:

1. Hover the mouse over the Reports menu
2. Click on Census Status Report
3. Select year from the Report Year dropdown
4. Select week from the Report Week dropdown
5. Select the Billing NPI(s) for this report
   a. This Billing NPI, which is the same as the Service NPI for nursing facility providers, is found on the upper left corner of the current Census Status Report

```
080000 SS03JS62 SS036050   SOUTH DAKOTA STATE DEPARTMENT OF SOCIAL SERVICES -
05/03/2017 22.08.37  2017123  OFFICE OF PROGRAM MANAGEMENT - ADULT SERVICES AN
FILE=                                                  MDS+ CASE MIX

                                          FACILITY RESIDENT CENSUS/STATUS REPORT
SERVICE NPI: 1295174332                                      05/03/2017
```

   b. Users can search for a Billing NPI by entering the Billing NPI being searched in the text box below the green Billing NPI header, next to the purple magnifying glass icon and then clicking the magnifying glass icon to perform the search. The Billing NPI will be highlighted in red for easier identification. If Billing NPI is not found, user will receive a notification that no results were returned for the Billing NPI search



c. If generating a report for multiple Billing NPIs, users can select each Billing NPI by checking the individual checkboxes or by clicking the Select All checkbox to generate one report for all available Billing NPIs

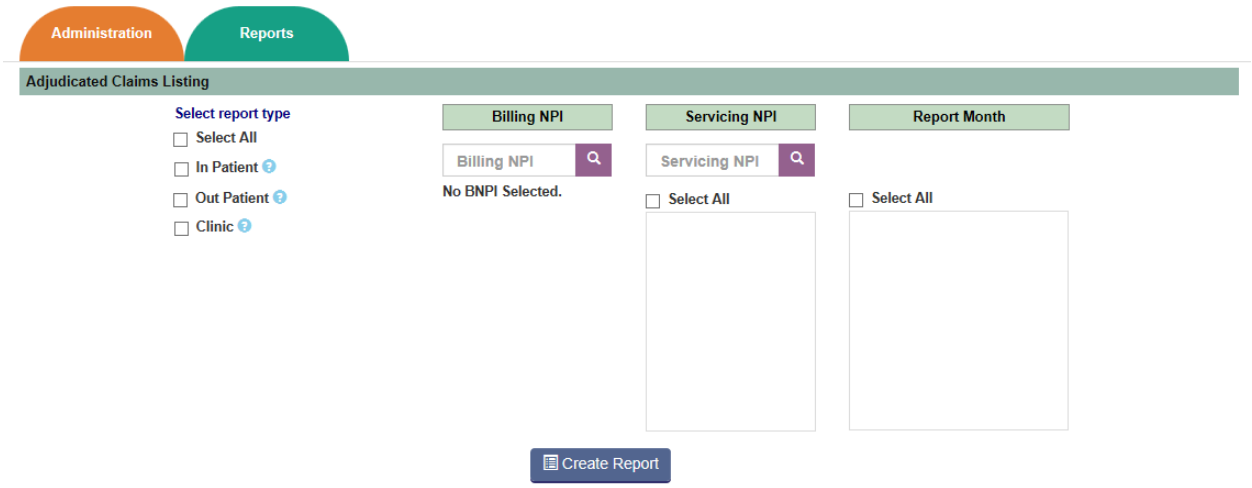
6. Click the Generate Report button
7. Choose either the PDF version or the Excel version to open your report

Adjudicated Claims Listing Report

The viewing of provider Adjudicated Claims Listing Report (Cost Settlement) is now available through the Medicaid Portal. Fiscal reports are available at the end of the month following the end of your fiscal year. This is the same cycle as your previous paper reports. Special requests are still available and any report received since 3/22/2017 is accessible.

Steps To generate an Adjudicated Claims Listing Report:

1. Hover the mouse over the Reports tab to see the drop-down menu
2. Click on Adjudicated Claims Listing
3. Choose Type of report – Inpatient, Outpatient, or Clinic
4. Choose Billing NPI and click on the purple search button
5. Select Report Month
6. Click the Generate Report button
7. Click View to see the PDF



Eligibility Inquiry

The Medicaid Online Portal allows SD Medicaid providers to check recipient records online for SD Medicaid eligibility. **Eligibility** can be found as half-moon Menu on the top of a user's Portal account screen. This feature allows them to check the eligibility up to five unique recipients with required dates of services or up to five different dates of services for a single recipient. Searches can be for one month or up to a six month date span.

Figure 1: Portal Permissions available are displayed as Half-Moon Menus

Choose Servicing NPI

Providers have option to search and choose the **Servicing NPI** to view the recipient eligibility and copay information.

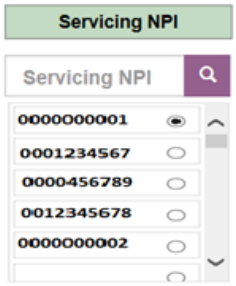


Figure 2: Choosing Servicing NPI

Search Options

Eligibility inquiry screen have two search options, Providers can search with recipient ID or recipient information like **First Name**, **Last Name**, etc.

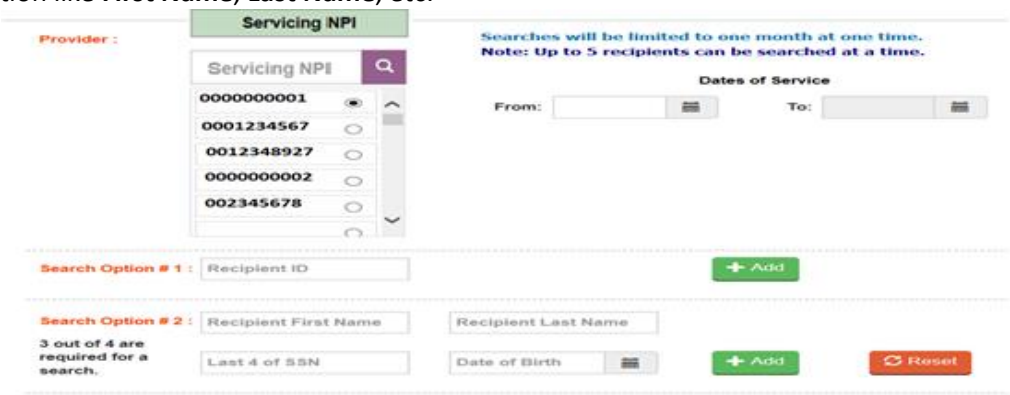


Figure 3: Recipient search Options screen

a. **<u>Search by Recipient ID</u>** – Providers can search with recipient id to check the recipient records online.

1. Select **From** date -**To** date will populate to **end** of Month.
2. Enter the **Recipient Id.**
3. Click **Add.**
4. The screen will display the **AID**, **Recipient ID**, **First Name**, **Last Name**, **SSN**, **Birth Date**, **From Date**, **To Date, Action columns**, **Trashcan** and **Check Eligibility** buttons.

4a. Click on **Trashcan** to delete the recipient record from list.

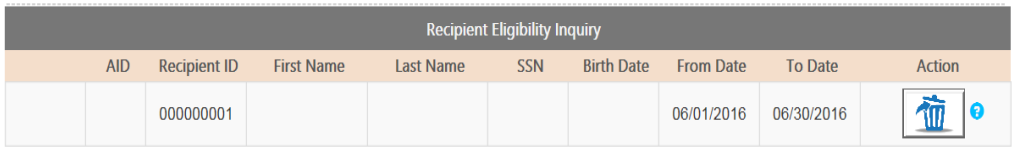


Figure 4: Delete the recipient record from list.

5. Click **Check Eligibility** button.
6. The screen will refresh and display the recipient data and **View** button will appears.
7. Click **View** button in the **Action** column to check the recipient eligibility.
   User will have option to **open** or **save** PDF file to check the recipient eligibility.

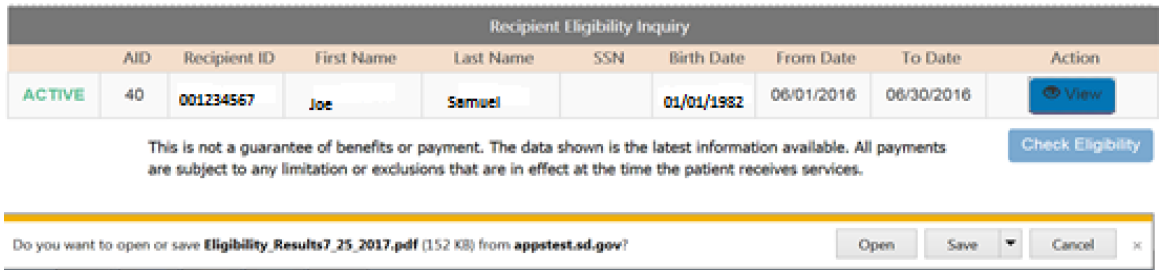


Figure 5: Eligibility inquiry search by recipient ID

b. <u>Search by Name, SSN, Date of Birth</u>-

Provider will have option to search for recipients using three out of four required information fields from **First Name, Last Name, Last four digits of SSN and Date of Birth**.

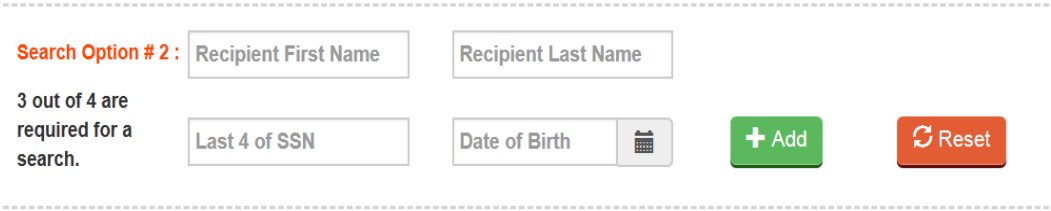
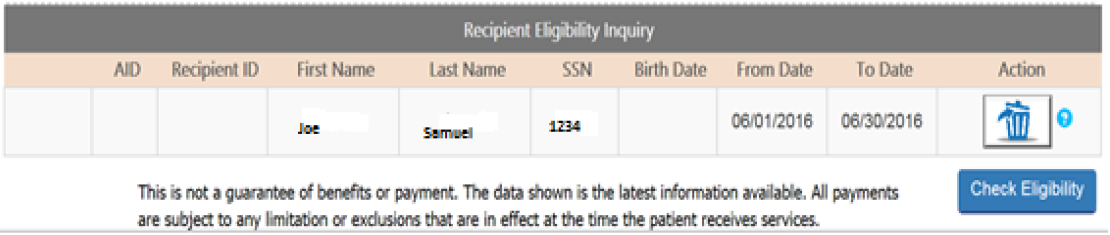


Figure 6: Eligibility inquiry search with Name, SSN and Date of Birth.

1. Select **From** date -**To** date will populate to **end** of Month.
2. Enter complete 3 data fields out of 4 from **First Name, Last Name, Last 4 digits of SSN and Date of Birth.**
3. Click **Add**.
4. The screen will display the **AID**, **Recipient ID**, **First Name**, **Last Name**, **SSN**, **Birth Date**, **From Date**, **To Date, Action columns**, **Trashcan** and **Check Eligibility** button.
5. Click **Check Eligibility**.

6. The screen will refresh and display the recipient data and **View** button will appears.
7. Click **View** button in the **Action** column to check the recipient eligibility.
   User will have option to **save** or **open** the PDF file to check the recipient eligibility.



Recipient Eligibility Inquiry

	AID	Recipient ID	First Name	Last Name	SSN	Birth Date	From Date	To Date	Action
			Joe	Samuel	1234		06/01/2016	06/30/2016	

This is not a guarantee of benefits or payment. The data shown is the latest information available. All payments are subject to any limitation or exclusions that are in effect at the time the patient receives services.

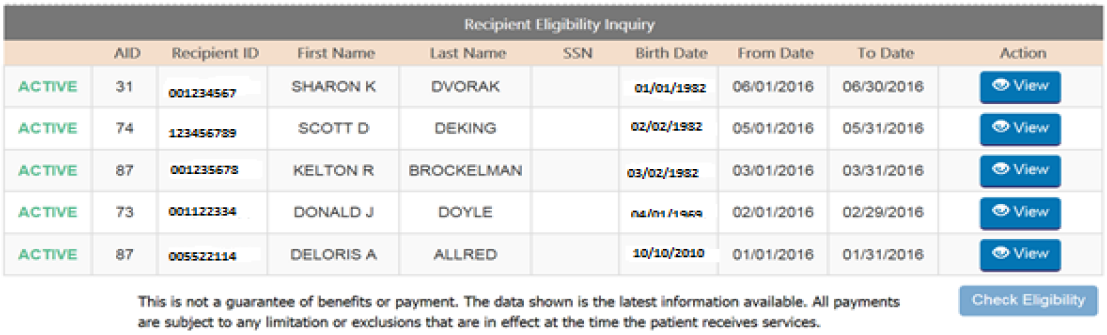
Check Eligibility

Figure 7: Eligibility inquiry search results by Name, SSN, and DOB

Search multiple recipients

Provider can search by recipient Id up to 5 recipients and search will be limited to one month at one time.

1. Repeat the steps from **1** to **3** for each recipient.
2. After adding multiple recipients then repeat steps 5 & 7
3. Click **View** button in the **Action** column to check the recipient eligibility for individuals.
   User will have option to **save** or **open** the PDF file to check the recipient eligibility.



Recipient Eligibility Inquiry

	AID	Recipient ID	First Name	Last Name	SSN	Birth Date	From Date	To Date	Action
ACTIVE	31	001234567	SHARON K	DVORAK		01/01/1982	06/01/2016	06/30/2016	View
ACTIVE	74	123456789	SCOTT D	DEKING		02/02/1982	05/01/2016	05/31/2016	View
ACTIVE	87	001235678	KELTON R	BROCKELMAN		03/02/1982	03/01/2016	03/31/2016	View
ACTIVE	73	001122334	DONALD J	DOYLE		04/01/1969	02/01/2016	02/29/2016	View
ACTIVE	87	005522114	DELORIS A	ALLRED		10/10/2010	01/01/2016	01/31/2016	View

This is not a guarantee of benefits or payment. The data shown is the latest information available. All payments are subject to any limitation or exclusions that are in effect at the time the patient receives services.

Check Eligibility

Figure 8: Eligibility inquiry screen for multiple recipients

View Recipient's Eligibility Response File

Providers will have ability to check recipient eligibility dates of service with copay information.

08/02/2017 Recipient Eligibility Inquiry South Dakota Medicaid Online Portal

Submitter Page 1 of 1

Name : **Hospital** NPI : **0000000001**

Inquiry Date From: 07/01/2017 Inquiry Date To: 07/31/2017

Transaction ID : **123456-1**

Insured Information

Recipient ID: **001234567** Recipient Name: **Joe Samuel**

Gender: **M** Date of Birth: **01/01/1982**

Eligibility **Dates are valid for current query.**

31-Active Coverage: Medicaid - Full Coverage

Eligibility : 7/1/2017 - 7/31/2017

Co-Payment Required

Amount : $50.00

Coordination of benefits

MEDICARE-A Eligibility : 7/1/2017 - 7/31/2017

Policy : **000001234C1**

Figure 9: Eligibility response file

List of Eligibility Aid Categories: The Medicaid Online Portal will display recipient's current eligibility aid category.

AID CATEGORY	DESCRIPTION
10	Aged Person - Title XIX - With a Medicaid Income Trust (Grandfather Clause)
11	Aged Person - Title XIX - Eligible through SSI eligibility
12	Aged Person - Title XIX - SSI Related Groups
13	Aged Person - Title XIX - 300% special income group
15	Aged Person - Title XIX - Waivered SSI
16	Aged Person -Title XIX - Waivered Non-SSI
20	Blind Person - Title XIX - With a Medicaid Income Trust (Grandfather Clause)
21	Blind Person - Title XIX - Eligible through SSI eligibility
22	Blind Person - Title XIX - SSI Related Groups
23	Blind Person - Title XIX - 300% special income group
30	Disabled Person - Title XIX - With a Medicaid Income Trust
31	Disabled Person - Title XIX - Eligible through SSI eligibility
32	Disabled Person - Title XIX - SSI Related Groups
33	Disabled Person - title XIX - 300% special income group
35	Home and Community Based Services - Title XIX - Child, SSI
36	Home and Community Based Services - Title XIX - Adult, SSI
37	Home and Community Based Services - Title XIX - Child, Other
38	Home and Community Based Services - Title XIX - Adult, Other
40	Parent and Caretaker Relatives - Title XIX
41	Transitional Medicaid Benefits - Title XIX - Medical only due to Increased Earnings
43	Breast and Cervical Cancer (BCC) - Title XIX-

45	Title XIX - Automatic Newborns
46	Title XIX for Pregnant Women
47	Title XIX for pregnancy related postpartum care
53	Foster Care - DSS Custody Not IVE (XIX)
54	Former Foster Care (XIX)
57	Foster Care - IVE only (XIX)
65	State Funded Adoption
67	Subsidized Adoption - Title XIX
71	Qualified Medicare Beneficiary (QMB) - Aged XIX (Medicare Premium, Co-Pay)
72	Special Low-Income Medicare Beneficiary - Aged XIX (Part B Premium Only)
73	Qualified Medicare Beneficiary (QMB) - Disabled XIX (Medicare Premium, Co-Pay)
74	Special Low-Income Medicare Beneficiary - Disabled XIX (Part B Premium Only)
75	Medicaid Children
76	Medicaid Expansion - XXI
77	Expanded XIX - Pregnant Woman - Pregnancy Related Coverage Only
78	Children's Health Insurance Program (CHIP) XXI - Uninsured children
80	Chronic Renal eligible - State Funded
86	Qualified Individual (1) - Aged XIX (Part B Premium Only)
87	Qualified Individual (1) - Disabled XIX (Part B Premium Only)
90	Refugee Resettlement Program - Medical only XIX

Questions

This document and related Medicaid Portal documentation will be updated as regularly as possible to ensure users have access to the latest reference material for the Medicaid Portal functionality and use. If you have questions that have not been addressed in this documentation, please send an email to DSSOnlinePortal@state.sd.us for the most efficient assistance. Due to the high volume of Portal emails, please allow up to three business days for response.