



Job Aid

Provider Portal Processes

This set of job aids covers the following processes:

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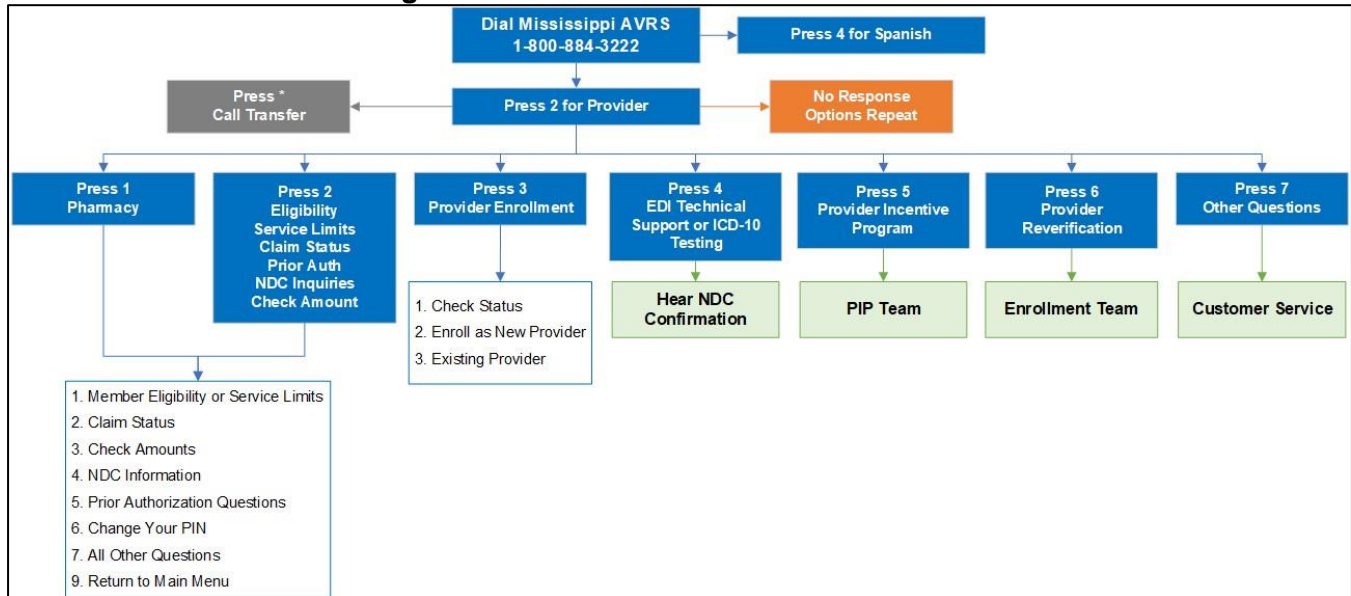
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Note: All screenshots in this document were taken with deidentified data.

Accessing Provider Services in the AVRS

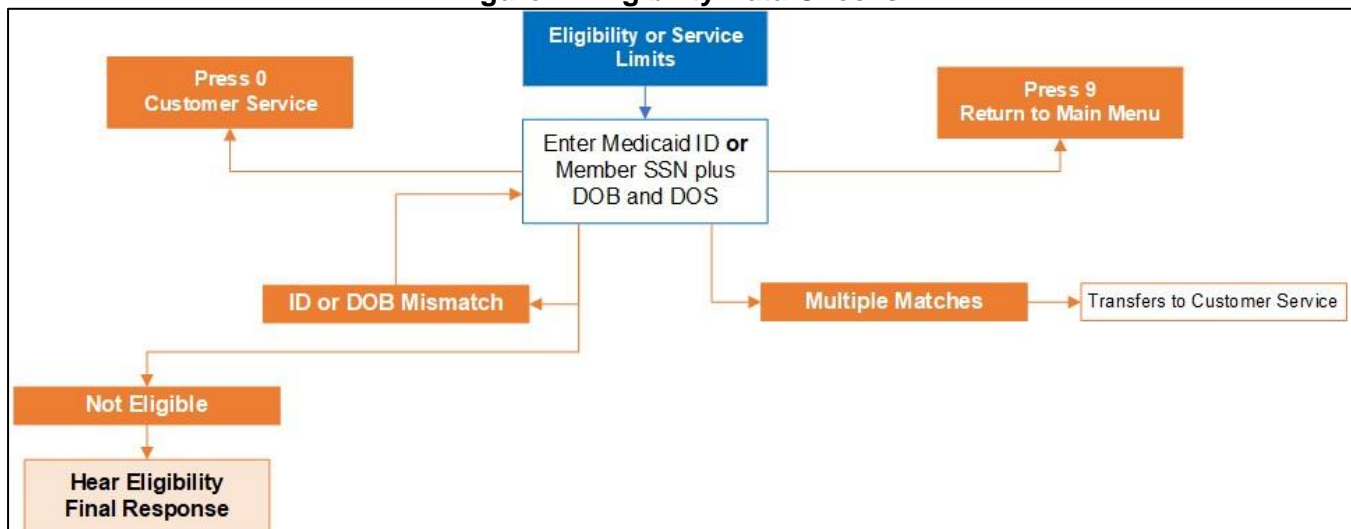
The following figure offers a basic visualization of the Medicaid Enterprise System Assistance (MESA) Automated Voice Response System (AVRS) call flow for providers.

Figure 1: AVRS Quick Reference – Provider



Where applicable, the AVRS system verifies information entered by the caller, as shown in Figure 2: Eligibility Data Checks. The eligibility call flow includes opportunities to hear other associated information (lock-in, third party liability, etc.) and gives callers the opportunity to repeat the information or hear eligibility for a different Date of Service (DOS).

Figure 2: Eligibility Data Checks



Working with Delegate Accounts

This process describes how to create a delegate account on the provider portal. As discussed in PRP100 Provider Portal Overview, providers often use delegates to manage their claims on the portal. A delegate can serve several provider accounts even if the delegate has only one provider, since providers can have multiple contracts. Delegates who service multiple provider accounts will be presented with a selection of providers to choose from when they log in, as shown in Figure 3: Switch Provider Panel. Once they select a provider, they will see the tabs available to them for that account.

Note: If you have multiple Medicaid IDs and/or locations, you can change the Display Name on each account to reflect the taxonomy-location for that Medicaid ID.

Figure 3: Switch Provider Panel

Switch Provider

Switch Provider

Enter at least one selection criteria below and click **Search** to retrieve information.

Display Name

Email

Search **Reset**

Available Providers

Select a Provider that you wish to switch to, then click **Submit** button.

Total Records: 2

#	Display Name ▲	Email Address
1	<input type="radio"/> BillyBob	slawrence@gainwelltechnologies.com
2	<input type="radio"/> Debrita	dschiller@gainwelltechnologies.com

Submit **Close**

Registering a Delegate Account

Note: To register as a delegate, you'll need all the information the provider used to create your account. Additional providers assigning you to their locations must have your MESA Delegate Code, so keep it on hand.

Complete the following steps to create a delegate account:

1. Access the provider portal at the URL that was given to you.
2. At the Home page, click the **Register Now** link.

Figure 4: Provider Portal Home Page

Login

*User ID

Log In

[Forgot User ID?](#)

Register Now

MESA
MEDICAID ENTERPRISE SYSTEM ASSISTANCE

What you can do in the Medicaid Portal for Providers

Through this secure and easy to use internet portal, health care providers can submit claims and inquire on the status of their claims, inquire on a patient's eligibility, upload files, and search for other providers. In addition, health care providers can use this site to locate claim forms, provider participation materials and other Medicaid information and resources.

- The system opens the Registration Selector page. Click the Delegate option.

Figure 5: Registration Selector Page

- At the Registration panel, enter your name, birth date, and the last four digits of your driver's license number as they were entered by the provider. Enter the delegate code from the record the provider created and click **Continue**.

Figure 6: Registration Step 1

The rest of the registration steps are the same as described in PRP-100 Provider Portal Overview. An email with a link confirms your account. You must confirm your account or you can't log in.

Logging In as a Delegate

When you log into your delegate account, the system opens the Home page if you serve only one provider account. If you are a delegate for multiple provider accounts, the system opens the Switch Provider panel so you can select an account, as shown in Figure 3: Switch Provider Panel on page 3. At any time, you can return to this panel and switch to a different provider to continue your work.

Once you select the provider, you will see the provider portal as the provider sees it, with the exception of pages and panels that you are not authorized to access.

Checking Member Eligibility

This section provides the process for reviewing member eligibility, service limits, EPSDT visits, and other insurance.

Complete the following steps to verify member eligibility:

1. From the Provider Portal Home page, click the **Eligibility** tab.

Figure 7: Provider Portal Home Page

The screenshot displays the Provider Portal Home Page. At the top left is the Mississippi Division of Medicaid logo. A search bar is located at the top right. Below the search bar is a navigation menu with tabs: Home, Eligibility (highlighted with a red box), Claims, Care Management, Patient Health History, Files Exchange, and Resources. The main content area shows provider information: Provider Name (CLINIC PHARMACY), Location (004474771 - CLINIC PHARMACY), Role IDs (1912381609 (NPI)), and Taxonomy (333600000X-Pharmacy). A central banner for MESA (MEDICAID ENTERPRISE SYSTEM ASSISTANCE) features a 'Welcome Health Care Professional!' message. On the left, there are sections for User Details (Welcome Bulldog), My Profile, Manage Accounts, Provider information (Name: ABCDentist, Provider ID: 1000000001 (NPI), Location ID: 004444033), and Upcoming Actions (Revalidation dates: 11/25/2023 and 01/24/2024). On the right, there are links for Sign Up to Receive News, Secure Correspondence, and Latest News (Late Breaking News, Provider Bulletins, UM/QIO, Report Fraud).

2. On the **Eligibility** landing page, you can choose Eligibility Verification or Treatment History.
3. Click the **Eligibility Verification** link.

Figure 8: Eligibility Landing Page

4. Enter the Member ID, or if you don't have it, enter two of the following:
 - Social Security Number (SSN)
 - Birth date
 - Member's full name

Note: If you don't receive the expected results with a Member ID search, try searching with two of the other fields.

5. You do not need to enter dates unless you are searching for a specific time-period. The End date defaults to the current date if you leave it blank.

Note: You can search for eligibility history up to three years in the past and four months into the future.

Figure 11: Submit Eligibility Verification Request

6. The system returns the eligibility verification for the member, confirming the current assigned coverages. Remember, coverage is not a guarantee since a member can lose eligibility for a variety of reasons. All coverage details are displayed for the member.

Figure 12: Eligibility Verification

[Print Preview](#)

Coverage Details for Member ID 688026127 – ZACHARY JR., MABEL M from 1/2/2024 to 1/2/2024
?

Member ID 688026127 **Birth Date** 08/04/2017 **Gender** Female
Verification Response ID 2400200004
 [Expand All](#) | [Collapse All](#)

Demographic Details
-

Street Address 3725 BRYN MAWR DR
City JACKSON **State** Mississippi **Zip Code** 39204-4412

Benefit Details
-

Coverage	Effective Date	End Date	Add Date	Last Update Date
Children age 6-19 with income at/below the MAGI	09/01/2023	12/31/9999	08/16/2022	09/30/2022

[Other Insurance Detail Information](#)

Medicare Coverage Detail
-

Coverage	Effective Date	End Date	Last Update Date
None			

Managed Care Assignment Details
-

Managed Care Plan	Managed Care Plan Phone	Primary Care Provider	Provider Phone	Benefit Plan	Effective Date	End Date
MOLINA HEALTHCARE OF MISSISSIPPI IN	1-844-809-8438			MississippiCAN	6/1/2023	12/31/9999

Lock-In Details
-

Lock-in Provider	Lock-in Provider Phone	Benefit Plan	Effective Date	End Date
None				

Living Arrangement Details
-

Level of Care Plan	Provider NPI	Provider Name	Effective Date	End Date
None				

9. Scroll down to view all the coverage limits section.

Note: Limit Details are only available after supplying a service date (as shown below). Additional service details are available on the Treatment History tab.

Figure 13: Coverage Detail

EPSDT Well Child Service Details					
Service	Last Exam	Next Exam			
EPSDT- Medical	06/13/2022	06/13/2023			
EPSDT- Dental					
EPSDT- Hearing					
EPSDT- Vision	06/13/2022				
EPSDT- Other					

Limit Details					
* Only Service limits that have paid claims will be displayed					
Note: Dollar Limits and Service Limits information may not reflect recent claims and is subject to change daily as available benefits are used and the information provided is not a guarantee for payment.					
Service Date	<input type="text" value="05/11/2023"/>	Search Limits			
		Limit	Used	Remaining	Last Service Date
Individual	5501 Dental max dollar amount \$2500 exceeded	\$2,500.00	\$264.80	\$2,235.20	8/9/2022
		Limit	Used	Remaining	Last Service Date
Individual	5510 Dental oral evaluation Limit exceeded	4	2	2	8/9/2022
	5520 Physician Office Visit Service Limit Exceeded	16	1	15	8/23/2022

Dates Of Service			
From date Of Service	To date Of Service	Qty Allowed	Amt Allowed
07/11/2022	07/11/2022	1	-
08/09/2022	08/09/2022	1	-

10. To view or add other insurance for a member, click **Other Insurance Detail Information**.

Figure 14: Access Other Insurance

Benefit Details				
Coverage	Effective Date	End Date	Add Date	Last Update Date
Children age 1-5	08/01/2022	08/31/2023	08/16/2022	09/30/2022
Children age 6-19 with income at/below the MAGI	09/01/2023	12/31/9999	08/16/2022	09/30/2022
Other Insurance Detail Information				

11. The portal displays any other insurance policies for the member. If the member does not have TPL coverage, the Other Insurance Panel will display 'None'. To view details for any record in this list, click the plus sign on the left.
12. To add other insurance, enter the carrier and policy holder information, then click **Add**. The system creates the record and stores it in the Other Insurance list; however, it will not appear when you come back to this list until it is validated.

Figure 15: Other Insurance Information

Other Insurance Information for Member ID 349983687 - HERMAN A SULLIVAN from 8/30/2023 to 8/30/2023 Back to Eligibility Verification ?

* Indicates a required field.

Click '+' to view details in a row. Click '-' to collapse the row.

There is no Third-Party Liability (TPL) Insurance Information available on records. Click on the Add button to add TPL information. It will be reviewed and added to the member profile after validation.

	Carrier Name	Policy #	Group #	Policy Holder	Policy Type	Effective From	Effective To
+	CAREMARK/CVS	F020659745954	RX5449	HERMAN A SULLIVAN	OTHER INSURANCE	09/01/2017	09/30/2017
+	CAREMARK/CVS	V362354838474	RX5449	HERMAN A SULLIVAN	OTHER INSURANCE	02/01/2017	08/24/2017
+	HUMANA	O1656344012	R8579001	HERMAN A SULLIVAN	HEALTH INSURANCE	06/01/2015	12/31/2016
+	CEGNA	Q70579203	R8679001	HERMAN A SULLIVAN	OTHER INSURANCE	06/01/2015	12/31/2016

Other Insurance Carrier Information

*Carrier Name

*Policy #

Policy Type

*Effective From

*Group #

Other Policy Holder Information

*Subscriber Last Name

*Birth Date

*Social Security Number

*Confirm Social Security Number

*First Name MI

Add
Reset

Searching Payment History

This section provides the process for researching claim payments on the Provider Portal.

Complete the following steps to research claim payments:

1. Navigate to the Search Payment History page. You can do this by clicking the link at the bottom of the Home page as shown in Figure 16: Navigate to the Search Payment History Page, or you can select the **Claims** tab, then **Search Payment History** as shown in Figure 17: Search Payment History Page.

Figure 16: Navigate to the Search Payment History Page

The screenshot shows a provider profile page for 'CLINIC PHARMACY'. The 'Provider ID' is 1912381609 (NPI) and the 'Location ID' is 004474771. Under the 'Upcoming Actions' section, there are two revalidation dates: 04/24/2023 (Start Date) and 06/23/2023 (Due Date). In the 'Provider Services' section, the 'Search Payment History' link is highlighted with a red box. Other links include 'Member Focused Viewing', 'EHR Incentive Program', and '340B Program Information'. On the right side, there are links for 'Late Breaking News', 'Provider Bulletins', 'UM/QIO', and 'Report Fraud'.

2. The system defaults to searching for all payment methods and types, with a range of issue dates within the last 90 days. If you know the payment number, enter it in the **Payment ID** field.

Figure 17: Search Payment History Page

The screenshot shows the 'Search Payment History' page. The 'Claims' tab is selected in the top navigation bar. The 'Search Payment History' link is highlighted in the secondary navigation bar. The page displays provider information for 'CLINIC PHARMACY' with ID 1912381609 and location 004474771. The search criteria section includes:

- Payment Method:** All (dropdown menu)
- Payment Type:** All (dropdown menu)
- Payment ID:** (text input field)
- Issue Date:** From 07/13/2022 to To 10/11/2022 (date pickers)

 The 'Search' and 'Reset' buttons are at the bottom of the search form. A red box highlights the entire search criteria section.

- The system returns a list of payments matching the search criteria, which for this example is a range of issue dates. For any payment you can click the **RA Copy** link to view the related remittance advice.
- To view details for a payment, including a list of related claims, click the payment ID. **Figure 18:**

Payment Search Results

Issue Date	Payment Method	Payment Type	Payment ID	Total Paid Amount	RA Copy
10/08/2022	Check		000000000	\$0.00	RA Copy
10/07/2022	EFT		900003999	\$1,877.15	RA Copy
10/03/2022	EFT		900003950	\$12,377.19	RA Copy
09/26/2022	EFT		900003938	\$8,095.94	RA Copy
09/19/2022	EFT		900003896	\$11,713.48	RA Copy
09/12/2022	EFT		900003846	\$878.34	RA Copy
09/05/2022	EFT		900003791	\$8,306.47	RA Copy
08/29/2022	EFT		900003740	\$2,467.26	RA Copy
08/22/2022	EFT		900003687	\$6,602.60	RA Copy
08/15/2022	EFT		900003626	\$1,903.81	RA Copy

Total Records: 15

- From this point, you can click the related claim number for a payment to view claim information. The details page also offers a button to open the RA for the payment.

Figure 19: View Claim Payment Details

Claim ID	Member Name	Service Dates	Performing Provider	Total Charges	Allowed Amount	Member Responsibility	Payment Amount	Interest
222248000001	BLAKE D KONKEY	-	CLINIC PHARMACY	\$50.00	\$0.00	\$0.00	\$8.96	\$0.00
222248000002	BLAKE D KONKEY	-	CLINIC PHARMACY	\$50.00	\$0.00	\$0.00	\$14.97	\$0.00
222248000004	BLAKE D KONKEY	-	CLINIC PHARMACY	\$50.00	\$0.00	\$0.00	\$47.00	\$0.00
222248000009	TAQUITA	-	CLINIC PHARMACY	\$50.00	\$0.00	\$0.00	\$12.16	\$0.00

Verifying a Prior Authorization

This section provides steps to locate a previously submitted prior authorization (PA) on the Provider Portal.

Complete the following steps to view an existing PA:

1. In the Provider Portal, click the **Care Management** tab, then **View Authorization Status**.

Figure 20: View Authorization Status

The screenshot shows the 'View Authorization Status' page in the Provider Portal. The top navigation bar includes 'Home', 'Eligibility', 'Claims', 'Care Management' (highlighted in red), 'Patient Health History', 'Files Exchange', 'Resources', and 'Contact Us'. Below this, there are links for 'Create Authorization' and 'View Authorization Status'. The main content area shows 'Care Management' and the date 'Tuesday 10/11/2022 02:59 PM CST'. There are fields for 'Provider Name', 'Location', 'Role IDs', and 'Taxonomy'. Below these fields, there is a section titled 'Authorizations' with a 'View Status of Authorizations' link highlighted in a red box.

2. Your submitted authorizations are listed on the Prospective Authorizations tab, but you can also search for a specific PA. Click the **Search Options** tab.
3. In the Authorization Information panel, you can search by PA number, process type, or service code from a variety of code sets. You can also limit your search to a specific date or day range. You can also search by a member ID or provider ID and taxonomy.
4. When you're ready, click **Search**.

Figure 21: Search for Authorizations

The screenshot shows the 'View Authorization Status' search panel. The 'Search Options' tab is selected. The search form includes fields for 'Prior Authorization Number' (with value 5210150002), 'Process Type', 'Code Type', 'Service Code', 'Day Range' (with value Next 14 days), and 'Effective Date'. There are also fields for 'Member ID' and 'Provider ID'. Below these fields, there are radio buttons for 'This Provider is the' (Servicing Provider on the Authorization and Referring Provider on the Authorization). A 'Search' button is highlighted in a red box.

5. The system returns search results below the search panel. Click the PA number to open the details for the authorization.

Figure 22: Authorization Search Results

Search Results								
Prior Authorization Number	Authorization Service Date ▼	Member Name	Member ID	Process Type	Referring Provider	Referring Taxonomy	Servicing Provider	Servicing Taxonomy
5210150002		A, DANYELLE SMITH	760378034	DRUGS				

- The system opens the authorization response for the member. To view the status, click the + icon on the right of the **Service Details** panel.
- The system displays a row for each line of the PA. The status of the line appears on the right.

Figure 23: Authorization Status by Line

View Authorization Response for DANYELLE SMITH										Back to View Authorization Status ?
Authorization Tracking # 5210150002					Process Type DRUGS					
External Prior Authorization # _					Expand All Collapse All					
Requesting Provider Information										+
Member Information										+
Diagnosis Information										+
Service Details										-
If both authorized units and dollars are displayed, the dollar amount is a per unit rate.										
Line #	From Date	To Date	Units	Units Used	Frequency	Dollars	Dollars Used	Remaining Amount	Code	Status
001	01/15/2021	01/15/2021	0		-				CPT/HCPCS	Pending
Print Preview										

- To print a copy of the authorization, click **Print Preview**.

Send a Secure Correspondence

This section provides the steps for sending a secure email from the Provider Portal.

Complete the following steps to send a secure correspondence:

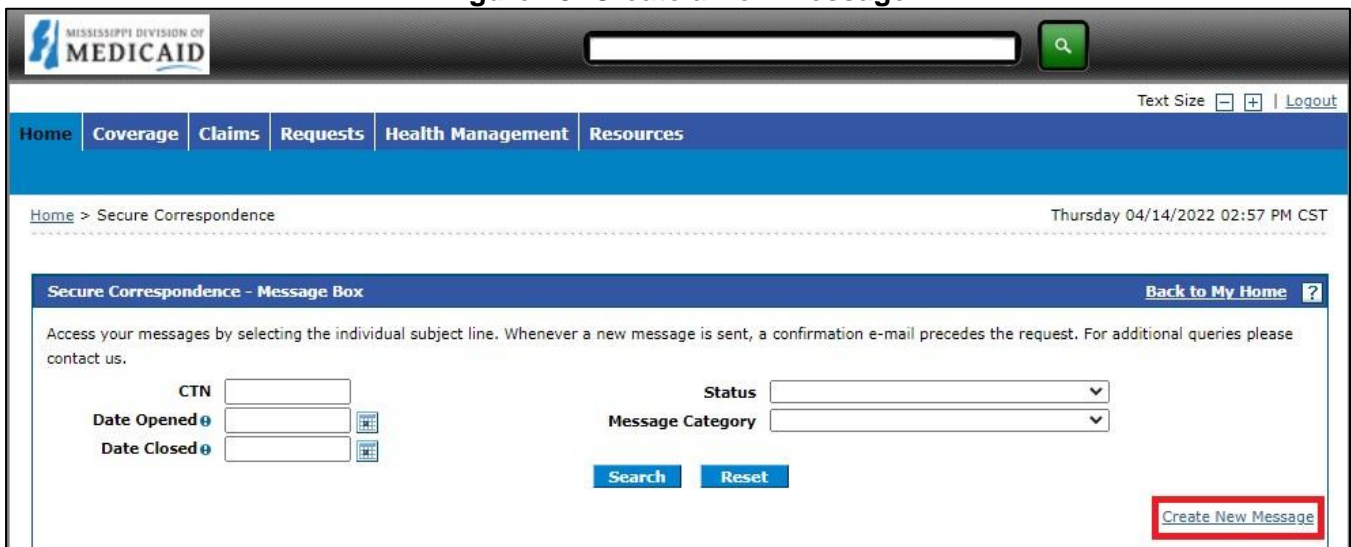
1. At the Provider Portal Home page, select **Secure Correspondence**. **Figure 24:**

Navigate to Secure Correspondence



2. The Secure Correspondence page displays search fields to search among the member's existing messages. Click the **Create New Message** link.

Figure 25: Create a New Message



3. At the Create Message panel, the **Subject** field is required.
4. Click the **Message Category** drop-down list and select the appropriate category for the message. This selection routes the message to the appropriate team.
5. The system populates your email address, but you must manually enter and confirm it in the **Confirm Email** field.
6. Add any other pertinent information in the remaining fields to facilitate your request. For example, if this is a question about a claim be sure to include the date of service and the amount paid and/or billed.

- You can explain more about your question in the **Message** field. Adding information here will make it easier to answer quickly, rather than having to ask for more details. **Figure 26: Create a Message**

Secure Correspondence - Create Message Back to Message Box ?

Enter your correspondence information below and click the **Send** button to send the correspondence or click **Cancel** to go back.

* Indicates a required field.

* **Subject** Partner Change

* **Message Category** Provider Maintenance Inquiry

* **Email** ABCdentist@gmail.com

* **Confirm Email** ABCdentist@gmail.com

Provider ID

Taxonomy

Provider Name

Provider/Facility

Member Name

Member ID

Claim Number

Date of Service

To

Paid Amount

Billed Amount

Pay/Deny Date

Rx #

NDC

Prior Authorization Number

* **Message** Our partner has changed her name. Do we need to update this information?

- To include an attachment, click **Choose File** to select and upload a document. If you attach a file you must indicate its type from the **Attachment Type** drop-down list. For this example, the attachment might be a signed request.

Note: You can upload up to 20MB of files per message.

Figure 27: Complete and Send Message

Attachments

Click the **Remove** link to remove the entire row.

#	Transmission Method	File	Control #	Attachment Type	Action
Click to collapse.					
	* Transmission Method	FT-File Transfer			
	* Upload File	Choose File	Updated SS Card.pdf		
	* Attachment Type	Copy of SSN Card			
	Description	Card shows partner's new name.			

Add **Cancel**

Send **Cancel**

- Click **Send** to submit your message.

10. The system confirms receipt with a Contact Tracking Number (CTN). Click **OK**. **Figure 28:**
Message Confirmation



11. At any time, you can search for this message by entering the CTN and clicking **Search** in the Secure Correspondence panel.

Note: If you call in regarding this message, be sure to give the agent the CTN so they can see your message and any attachments or information you have already provided.

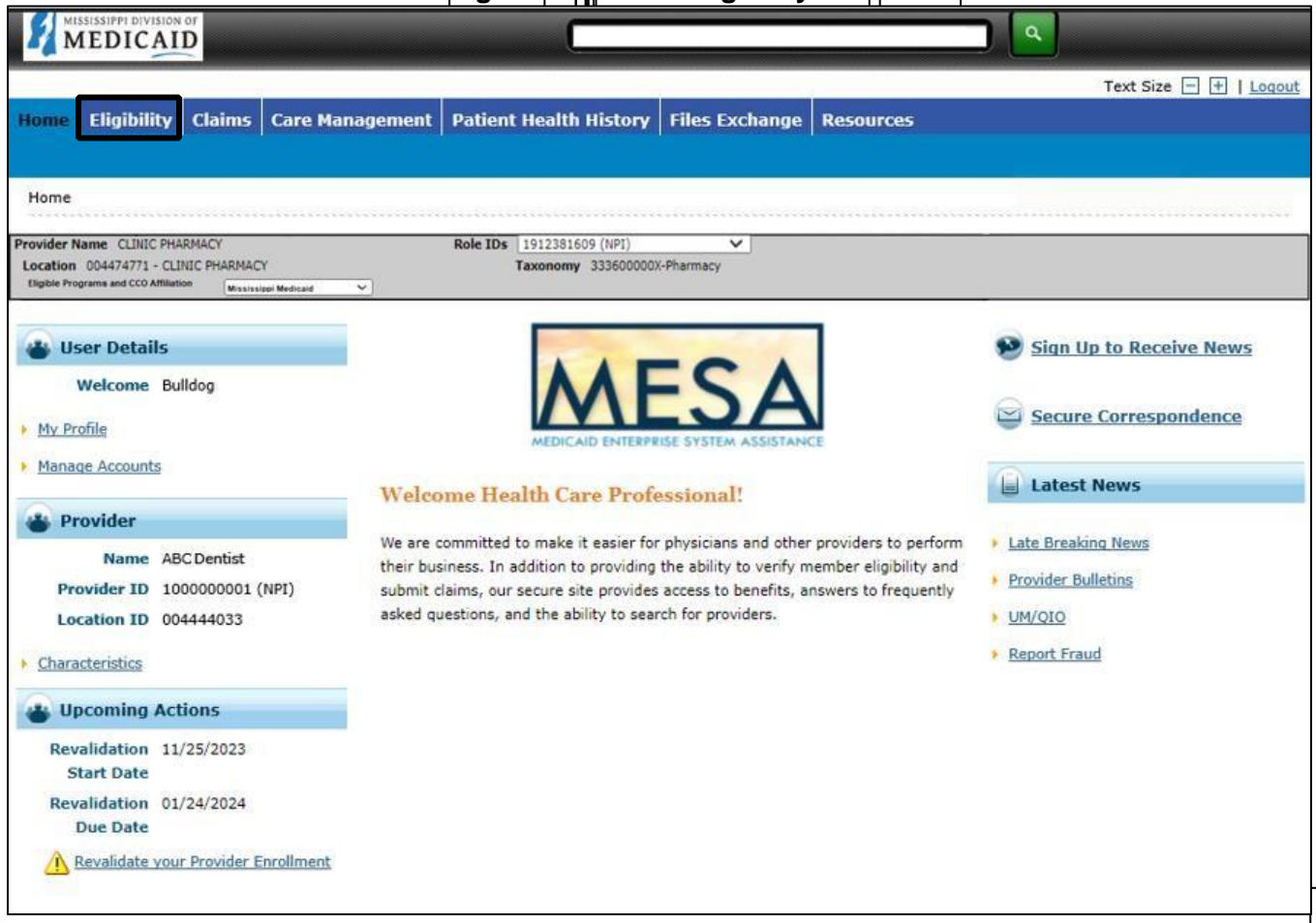
Submitting a Newborn Enrollment

This section covers the steps required to submit a newborn enrollment. Enrollment forms are converted to PDFs and uploaded via the Secure Correspondence page. To verify when a newborn enrollment was sent, you can locate it using the Secure Correspondence search panel. When the Medicaid ID is assigned, you will receive a fax of the completed and processed form containing the Medicaid ID.

Complete the following steps to create a newborn application:

1. Log into the portal and select the **Eligibility** tab.

Figure 29: Select Eligibility Tab



2. At the **Eligibility** page, click the **Newborn Enrollment** link. **Figure 30: Start Newborn Enrollment**

The screenshot shows the top navigation bar with links: Home, Eligibility, Claims, Care Management, Patient Health History, Files Exchange, Resources. Below this is a sub-navigation bar: Eligibility Verification | Treatment History | Newborn Enrollment. The main content area has a header 'Eligibility' and a timestamp 'Wednesday 05/11/2022 02:54 PM CST'. A grey box contains provider information: Provider Name, Location, Role IDs (1112211135 (NPI)), Taxonomy (363A00000X-Physician Assistant), and Eligible Programs and CCO Affiliation (Mississippi Medicaid). Below this is a blue 'Eligibility' button and a list of links: Eligibility Verification, Treatment History, and Newborn Enrollment (highlighted with a red box).

3. Select the **New Form** radio button to indicate this is a new enrollment.
4. Enter the mother's member ID in the **Member ID** field and tab to the next field. The system populates the member's information.

Figure 31: Enter the Mother's Information

The screenshot shows the 'Newborn Enrollment Form' page. The navigation bar includes: Home, Eligibility, Claims, Care Management, Patient Health History, Files Exchange, Resources, Contact Us. The sub-navigation bar shows: Eligibility Verification | Treatment History | Newborn Enrollment. The main content area has a breadcrumb 'Eligibility > Newborn Enrollment'. A blue header reads 'Newborn Enrollment Form' with a help icon. Below is a note: '* Indicates a required field.' The form title is 'Newborn Enrollment Form 12/01/2015'. A paragraph explains the form's purpose. A radio button selection shows '*Do you want to Submit' with 'New Form' selected. The 'Mother's Information' section contains the following fields: Member ID (375860620), First Name (GARFIELD), Last Name (HARRIS), SSN (427773950), Birth Date (05/27/1994), Address (5701 E 8TH AVE), Address Line 2 (APT D3), City (JACKSON), State (Mississippi), and Zip Code (39216-3971).

5. Enter the newborn's information along with father's name.

Figure 32: Enter Newborn Information

Newborn Information	
*First Name	<input type="text"/>
Middle Name	<input type="text"/>
*Last Name	<input type="text"/>
*Date of Birth	<input type="text"/>
Time of Birth	<input type="text"/>
*Gender	<input type="radio"/> Male <input type="radio"/> Female
Birth Order, if multiple	<input type="text"/>
Check if parental rights terminated	<input type="checkbox"/>
*Father's Name	<input type="text"/>

- Skip to the section below the red text that says, "CONTINUE ENTERING MOTHER/CHILD INFORMATION BELOW." Enter contact information for the hospital representative who can answer questions regarding this application.

Figure 33: Enter Hospital Contact Information

CONTINUE ENTERING MOTHER/CHILD INFORMATION BELOW

Hospital Name	UNIVERSITY OF MS MEDICAL CENTER GRE	Medicaid Provider ID	000020026
*Contact Name	<input type="text" value="Bob Smith"/>	*Email	<input type="text" value="bsmith@UMMC.org"/>
*Phone	<input type="text" value="6015556549"/>	Ext	<input type="text" value="123"/>
*Fax Number	<input type="text" value="6015556544"/>	Date	05/11/2022

- Enter all the data related to the infant, including the delivering physician's name and National Provider Identifier (NPI) or Tax Identification Number (TIN).
- When you're finished, click **Submit**.

Figure 34: Enter Delivery Data

*Mother's Date of Last Menstrual Period	<input type="text" value="12/15/2021"/>
*Delivery Type	<input type="text" value="Cesarean"/>
*Scheduled Delivery?	<input type="text" value="No"/>
*Gestational Age (Weeks)	<input type="text" value="42"/>
*Birth Weight (Lbs)	<input type="text" value="8.13"/>
*Apgar Score (1min)	<input type="text" value="2"/>
*Birth Status	<input type="text" value="Healthy/Adopted or Foster Care"/>
*Days	<input type="text" value="1"/>
*Grams	<input type="text" value="4000.00"/>
*5min	<input type="text" value="2"/>
Admission Date, If Applicable	<input type="text"/>
Discharge Date, If Applicable	<input type="text"/>
If transported to another facility, Facility Name	<input type="text"/>
*Delivering Physician's Name	<input type="text" value="Rachel Jones"/>
*Delivering Physician's NPI/TIN	<input type="text" value="1821032392"/>
Pediatrician Name	<input type="text"/>
Pediatrician NPI/TIN	<input type="text"/>

- The system closes all fields, and you can review the application before submitting it. If you see an error, click **Cancel** and start again. If everything is correct, click **Confirm**.

Note: Click once. If you click **Confirm** multiple times while it's processing, the system will create multiple applications.

Figure 35: Confirm Application

10. The system responds with a Contact Tracking Number (CTN) for future reference.

Figure 36: CTN Confirmation

Note: When the enrollment is completed, the Mississippi Division of Medicaid (DOM) will fax a copy of the application with the newly assigned Medicaid ID to the contact's fax number that was listed on the form.

11. To view details for a submitted application, return to the Home page of the portal and click the **Secure Correspondence** link.

Figure 37: Navigate to Secure Correspondence

12. In the **CTN** field, enter the CTN for the application and click **Search**.

13. The status of the request appears in the search results row. Click the CTN link to open the message contents.

Figure 38: View the CTN

Secure Correspondence - Message Box
[Back to My Home](#)

Access your messages by selecting the individual subject line. Click the **Search** button to look at your recent messages and/or use the fields below for a more specific search.

CTN

Date Opened

Date Closed

Status

Message Category

Search
Reset

[Create New Message](#)

					Total Records: 3
CTN	Status	Subject	Message Category	Date Opened ▼	Date Closed
100000041	Closed	Newborn Enrollment	Newborn	05/12/2022	05/17/2022

MessageSubject: Newborn Enrollment, MessageText:
 Provider ID: 000020026
 Member ID: 627206909
 Message: Newborn Enrollment

TPID Linking for Outside Service

This process is for providers who use an outside trading partner or clearinghouse to submit their X12 transactions. It describes how the delegated service's Trading Partner ID (TPID) is linked to the provider account within Provider Portal.

To assign the service as your trading partner delegate, complete the following steps:

1. Log into the **Provider Portal**.
2. At the Home page, click **My Profile** in the User Details section. **Figure 39: Access Manage**

Accounts

The screenshot shows the Provider Portal Home page. At the top left is the Mississippi Division of Medicaid logo. A search bar is at the top right. Below the logo is a navigation menu with links: Home, Eligibility, Claims, Care Management, Patient Health History, Files Exchange, and Resources. The main content area has a 'Home' breadcrumb. Below that is a header section with fields for Provider Name, Location, Role IDs, and Taxonomy. A 'User Details' section on the left contains 'Welcome Bulldog', 'My Profile', and 'Manage Accounts' (highlighted with a red box). On the right, there are links for 'Sign Up to Receive News' and 'Secure Correspondence'. A 'MESA' logo is also present.

3. In the Account Assignment section, click the **Trading Partner Xref** tab.

Figure 40: Add a Role

The screenshot shows the 'Account Assignment' section. At the top is a navigation menu with links: Home, Eligibility, Claims, Care Management, Patient Health History, Files Exchange, and Resources. Below the menu is a breadcrumb 'Home > Manage Accounts' and a timestamp 'Friday 01/08/2021 01:39 PM CST'. A header section contains fields for Provider Name, Location, Role IDs, and Taxonomy. The 'Account Assignment' section has a 'Back to My Home' link and a search bar. Below the search bar are four tabs: 'Search Delegates', 'Add New Delegate', 'Add Registered Delegate', and 'Trading Partner Xref' (highlighted with a red box). The 'Trading Partner Xref' tab contains several input fields: Last Name, First Name, Display Name, Last 4 of DLN, Delegate Code, Days since Last Login, Birth Date, Delegate Status, and Days in Pending Status. There are 'Search' and 'Reset' buttons at the bottom of the form.

4. Enter the TPID in the **Trading Partner ID** field and click **Add**.

The screenshot shows the 'Account Assignment' page with a 'Trading Partner Xref' tab selected. A text input field labeled '*Trading Partner ID' contains the value 'TP700100'. Below the field is a red 'Add' button. A message at the bottom of the form states 'No Trading Partners are assigned.'

5. The system adds a row to your trading partner list with information that was entered by the trading partner when they enrolled. Click **OK**.

The screenshot shows the 'Account Assignment' page with a confirmation dialog box titled 'Trading Partner Assignment' overlaid. The dialog box contains the message 'The trading partner has been added to your trading partner list.' and an 'OK' button. Below the dialog, a table titled 'Trading Partners' is visible, containing one row of data.

#	Trading Partner Name ▲	Phone Number	Action
1	Tp Test 1	1-719-111-2222 x33333	Remove

TPID Linking for Self-Service

This process is for providers who submit their own X12 transactions as a trading partner and did not register their Trading Partner ID (TPID) as a Trading Partner on the Registration page of the Provider Portal. Instead, providers can enter their TPID as a role in their Provider Portal – Provider account.

Note: To learn about obtaining a TPID, see PRP-103 Job Aid Trading Partner Enrollment.

Once you have a TPID, complete the following steps:

1. Log into the **Provider Portal**.
2. At the Home page, click **My Profile** in the User Details section.

Figure 41: Access My Profile

The screenshot shows the Provider Portal Home page. At the top, there is a navigation bar with links: Home, Eligibility, Claims, Care Management, Patient Health History, Files Exchange, and Resources. Below this is a header area with the text 'Home'. A grey box contains provider information: Provider Name (SERVICE ADDRESS), Location (200000047 - SERVICE ADDRESS), Eligible Programs and CCO Affiliation (Mississippi Medicaid), Role IDs (1112211135 (NPI)), and Taxonomy (363A00000X-Physician Assistant). The main content area features a 'User Details' section with a 'Welcome Bulldog' message. The 'My Profile' link is highlighted with a red box. Other links include 'Manage Accounts', 'Sign Up to Receive News', 'Secure Correspondence', and 'Latest News'. A 'Provider' section shows 'Name ABCDentist'. A 'Welcome Health Care Professional!' message is also present.

3. In the Roles section, click **Add Role**.

Figure 42: Add a Role

The screenshot shows the 'My Profile' page. The navigation bar is the same as in Figure 41. Below the header, there is a breadcrumb trail 'Home > My Profile'. The provider information box is identical. The 'My Profile' section is expanded, showing 'Application Contact Information' with fields for Display Name (Bulldog), Phone Number, and Current Email (ABCDENTIST@GMAIL.COM), and an 'Edit' button. Below this is the 'Roles' section, which shows 'Current Roles' as 'Providers' and an 'Add Role' button highlighted with a red box.

4. Select **Provider Trading Partner** from the Available Roles drop-down list.
5. Add your TPID and ZIP Code.
6. Click **Submit**.

Roles

* Indicates a required field.

Select the role you wish to add, fill out the role information then click the **Submit** button, or click **Cancel** to go back.

Current Roles Providers

* **Available Roles** ▾

* **Trading Partner ID**

* **5 Digit Zip Code**

Accessing Legacy RAs

This section provides the steps to access legacy remittance advice (RA) documents that are stored in the Legacy RA folder in the Electronic Document Management System (EDMS).

Complete the following steps to access legacy RAs from the Provider Portal:

1. Log into the Provider Portal. If you are a delegate, navigate to **Switch Provider** if necessary and select the provider for whom you want a legacy RA.

Figure 43: Select Provider if Applicable

Switch Provider

Switch Provider

Enter at least one selection criteria below and click **Search** to retrieve information.

Display Name

Email

Search **Reset**

Available Providers

Select a Provider that you wish to switch to, then click **Submit** button.

Total Records: 2

#	Display Name ▲	Email Address
1	<input type="radio"/> BillyBob	law@gain.com
2	<input type="radio"/> Debrita	chiller@gain.com

Submit **Close**

2. Click the **Resources** tab.

Figure 44: Select the Resources Tab

MISSISSIPPI DIVISION OF
MEDICAID

Search Medicaid:

Logout

Home Eligibility Claims Care Management Patient Health History Files Exchange **Resources** Contact Us

Home Wednesday 09/28/2022 11:45 AM CST

Provider Name SERVICE ADDRESS Location 200000047 - SERVICE ADDRESS Eligible Programs and CCO Affiliation Mississippi Medicaid

Role IDs 1112211135 (NPI) Taxonomy 363A00000X-Physician Assistant

User Details

Welcome UNIV of MS MC

My Profile

Manage Accounts

Provider

MESA
MEDICAID ENTERPRISE SYSTEM ASSISTANCE

Welcome Health Care Professional!

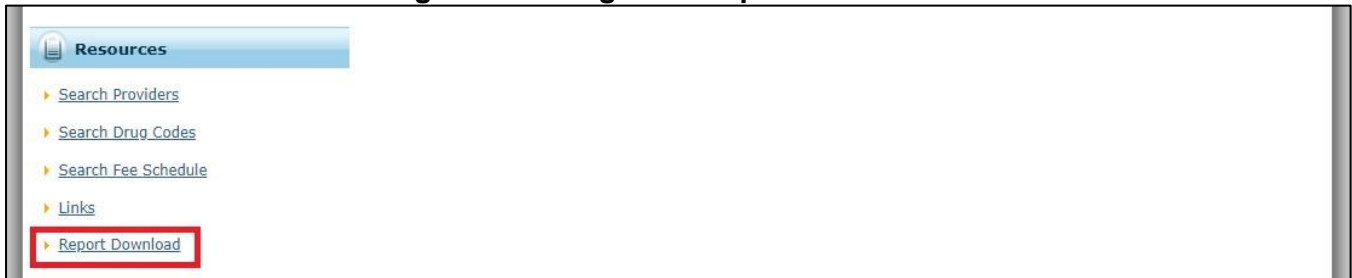
Sign Up to Receive News

Secure Correspondence

Latest News

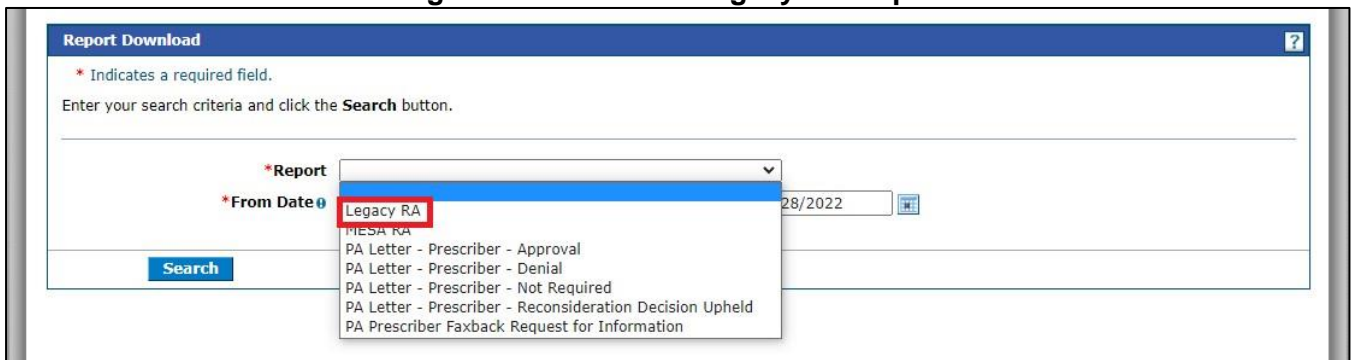
3. At the Resources page, select Report Download link.

Figure 45: Navigate to Report Downloads



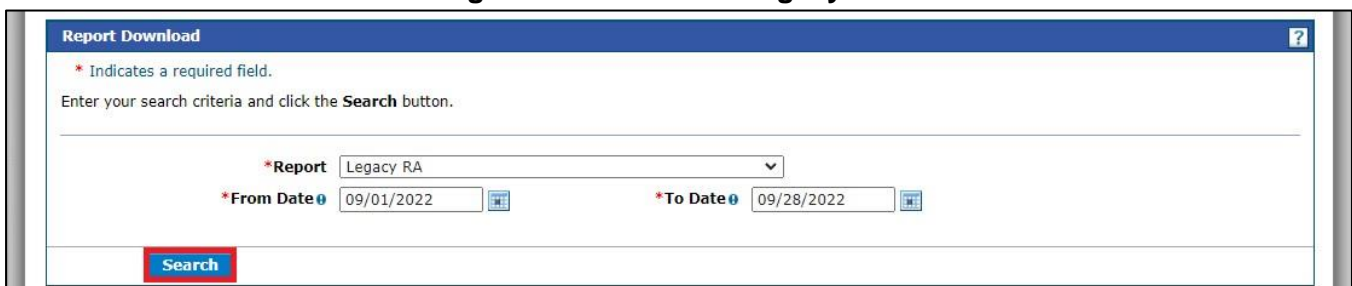
4. At the Report Download page, click the **Report** drop-down list and select **Legacy RA**.

Figure 46: Select the Legacy RA Report



5. Select the dates for the RA search.

Figure 47: Search for Legacy RAs



6. The portal returns the RAs related to the logged-in provider. Click a result to open it. The portal downloads the document. If you do not see a browser notification, check your Downloads folder.

Figure 48: Open an RA

Report Download

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

***Report** Legacy RA

***From Date** 09/01/2022 ***To Date** 09/28/2022

Search

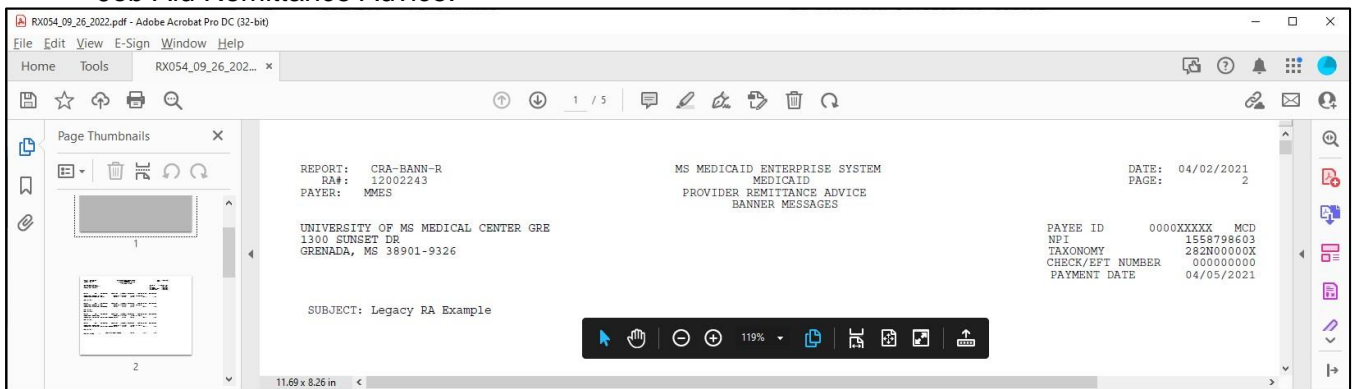
Reports Available to Download From 9/1/2022 12:00:00 AM To 9/28/2022 12:00:00 AM

To Download the report; click the Report Name

Report Name	Create Date
Legacy RA	09/26/2022 05:00

RX054_09_26_2022.pdf
Show all

7. Click the RA to view the document. For information about interpreting RA sections, see CLM203 Job Aid Remittance Advice.



Change History

The following change history log contains a record of changes made to this document:

Version #	Published/Revised	Author	Section/Nature of Change
1.0	10/17/2022	Gainwell	Initial publication
1.1	05/25/2023	Gainwell	Revised per CR1980 & CR1925
1.2	07/31/2023	Gainwell	Revised per CR1900
1.3	8/16/2023	Gainwell	Revised per CR1982
1.4	8/30/2023	Gainwell	Revised per CR1983
1.5	12/20/2023	Gainwell	Revised per CR2290
1.6	2/13/24	Gainwell	Revised per CR2004