

#### Provider Portal Admin Training Course



#### **Course Overview**



Welcome to the **Provider Portal** course.

This course will introduce you to L.A. Care's Provider Portal platform and provide a step-by-step guide for the **Provider Portal Admin User Role** function.

Audience	<ul> <li>Directly Contracted Providers (Provider Portal Admin User)</li> <li>Sub-Contracted Providers (Provider Portal Admin User)</li> <li>Authorized Representatives (Provider Portal Admin User)</li> </ul>
Prerequisites	• N/A
Course Duration	• 2 hours

#### **Course Agenda**



Let's look at the course agenda.

Module Name	Duration
Introduction	
Module 1: Introduction to Provider Portal	10 minutes
Module 2: Account Activation & Registration Process	15 minutes
Module 3: User Registration	20 minutes
LIVE DEMO	60 minutes
Course Summary/Questions	10 minutes

#### **Course Objectives**

After completing this course, you will be able to:

- Perform all the admin activities (login, security set-up, logout, and access homepage);
- Execute the Guided Registration process;
- Search for and access the Practitioner/Provider information;
- Add, Change, and/or Remove a User; and,
- General introduction to Provider Portal functions.





#### **Key Terms**



Below are some of the key terms to keep in mind:

Term	Description
Key Entity Contact	The <b>primary individual</b> responsible for managing and overseeing interactions and communications between the Provider/Provider Group and L.A. Care. Key Entity Contact ensures the organization's compliance with portal use protocols and acts as a liaison to streamline operations and resolve issues effectively.
User	An <b>individual who has been granted access</b> to the portal to perform specific tasks or functions based on their role within a provider entity or organization. Users can include healthcare providers, administrative staff, or other personnel involved in managing services and communication with L.A. Care.
Contact	An <b>individual designated by a provider entity or organization</b> who is responsible for specific roles or communications within the portal. Contacts are typically associated with tasks, such as managing service authorizations, submitting documentation, or responding to inquiries. Once a User has been added, they become a Contact.
Account	An "Account" represents a Provider Profile on the Provider Portal. Users can have access to multiple provider accounts based on their contract relationship/affiliation with L.A. Care
" <b>PPA</b> "	Provider Portal Admin





#### Provider Portal Roles – EXTERNAL- Updated March 2025

	PROVIDER PORTAL ADMIN USER	ENTITY KEY CONTACT & ATTESTATION USER	BILLING / MSO / CLAIM USER	GENERAL / AUTHORIZED USER
ROLE	Administers portal access and settings.	Administers portal access and compliance attestations.	Manages billing, MSO tasks, and claims.	Accesses the portal for authorized activities.
ADD'L FUNCTIONS CAN VIEW	Can view/access general eligibility for assigned and unassigned members. Can view assigned members: claims RA level, auth, plan, coverage and benefits details. Can view extensive detailed provider/practitioner/facility level information	Can view/access general eligibility for assigned and unassigned members. Can view assigned members: claims RA level, auth, plan, coverage and benefits details. Can view extensive detailed provider/practitioner/facility level information. Attestations and Remediations User Management User Registration	Can view/access general eligibility for assigned and unassigned members. Can view assigned members: claims RA level, auth, plan, coverage and benefits details. Can view extensive detailed provider/practitioner/facility level information.	Can view general eligibility for assigned and unassigned members. Can view members: plan, coverage and benefits details. <b>*Can only view claim</b> <b>header detail.</b> Can view extensive detailed provider/practitioner/facility level information.



#### Module 1: Introduction to Provider Portal

#### **Module Objectives**

After completing this module, you will be able to:

- Login to and Logout from Provider Portal.
- Access the Provider Portal Homepage.





#### **Provider Portal – Overview**



The Provider Portal is a comprehensive online platform designed to facilitate seamless interaction between healthcare providers and the L.A. Care administrative system.

It offers a range of features and tools to enhance operational efficiency, improve communication, and support data-driven decision-making.

By understanding the different user roles and access levels, providers can effectively utilize the portal to meet their specific needs.

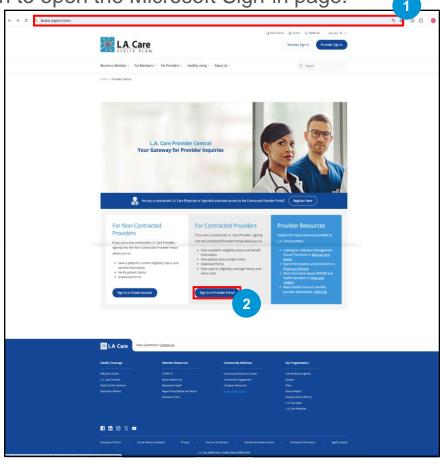
Let's get started with the Provider Portal login.

### **Login and Security**



The steps to login to the Provider Portal are outlined below:

- 1. Use <u>lacare.org/providers</u> URL to navigate to the Provider Portal.
- 2. Under the **For Contracted Providers** section, click the **Sign-in to Provider Portal** button to open the Microsoft Sign-in page.

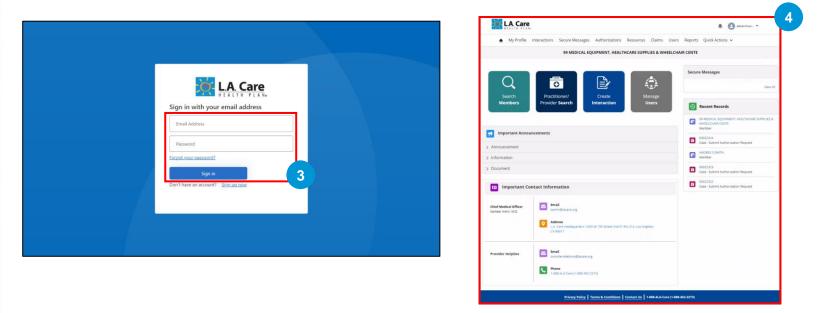


### Login and Security (Cont'd)



The steps to login to the Provider Portal are outlined below:

- 3. On the Microsoft Sign in page, enter your login credentials (**Username** and **Password**) and click **Sign in** to log into your account.
- 4. Upon successful login, you will land on the Provider Portal Homepage.



Next, let's see how you can log out of Provider Portal.





The steps to logout of Provider Portal are outlined below:

- 1. Click the User's name on the top right.
- 2. Select the **Log Out** option from the dropdown. You will be redirected to the LA Care website.

<ul> <li>My Profile</li> </ul>	Interactions Secure Messages	Authorizations Attestations	Remediations Reso	ources Clai Home	
	А	LTAMED HEALTH NETWORK INC	manualload	Log Out	
Q			Se	cure Messages	2 View
Search Members	Practitioner/ Provider <b>Search</b>	Create Interaction		3 Recent Records	
Important Announ	cements				
> Information					
> Document					
🖪 Important Con	tact Information				
Chief Medical Officer Sameer Amin, M.D.	Email samin@lacare.org				
	Address L.A. Care Headquarters, 105 90017	S W. 7th Street 2nd Fl. Rm 214, Los Angele	i, CA		
Provider Helpline	Email providerrelations@lacare.or	8			

Next, let's explore the Provider Portal Homepage.

#### Homepage – Overview



The Homepage of the Provider Portal is the main or introductory page of the Provider Portal. It serves as the starting point for navigation and provides an overview of what the Provider Portal offers.

The Homepage module will familiarize you with the navigational elements and standard features available on the Provider Portal Homepage. Access levels on the Provider Portal vary based on user type. In this module, we will explore:

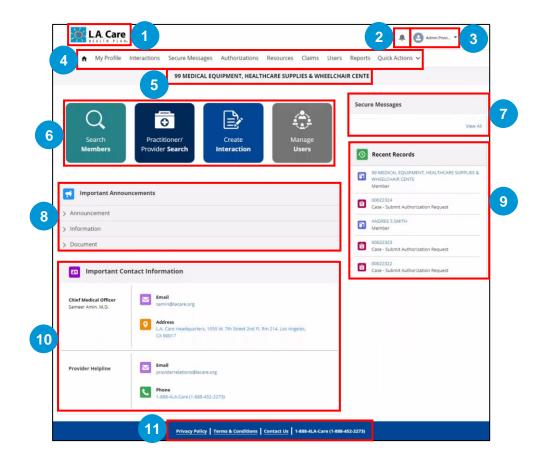
- Provider Portal Admin Homepage View
- General User Homepage View

Next, let's review the components of the Provider Portal Admin Homepage.

## Homepage – Provider Portal Admin 🧱

As a Provider Portal Admin, you can view the following key components on the Provider Portal Homepage:

- 1. L.A. Care Logo
- 2. Notifications Icon
- 3. User Icon
- 4. Menu Items
- 5. Account Details
- 6. Quick Action Tiles
- 7. Secure Messages Section
- 8. Important Announcements Section
- 9. Recent Records Section
- 10. Important Contact Information Section
- 11. Footer Section



Next, let's discuss each of these components in detail to ensure you can effectively utilize all the features available on the Provider Portal Homepage.

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#### **Module Summary**

Now that you have completed this module, here is the summary of what you have learnt, how to:

- Login to the Provider Portal using your login credentials.
- Logout from Provider Portal, navigate to the User Profile and click Logout.
- Access the Provider Portal Homepage.







# Module 2: Account Activation & Registration Process

#### **Account Activation Emails**



Once the user has been added to the account, they will automatically receive an account activation email at their registered email address.

For existing contacts (users), the email confirms that they have been added to the account. For new contacts, the email includes a link to follow the Microsoft Registration process and access the Provider Portal Homepage.

Next, let's review a sample email for both existing and new contacts.

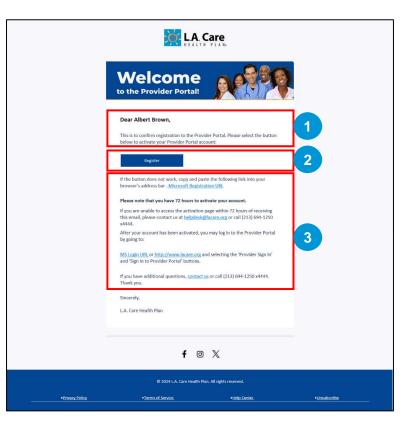


#### Account Activation Emails – New User

The subject line for the new user account activation email will be as follows: "Welcome to the L.A. Care Provider Portal: Verify your account"

The key information available in the account activation email for a new user will be:

- 1. Confirmation Section: In this section, you will get a confirmation that you have been registered to the Provider Portal.
- 2. Call to Action Section: In this section, you will find the Register button to activate your Provider Portal account.
- 3. Contact and Additional Details Section: In this section, you will find important instructions and the L.A. Care helpdesk contact information.



Next, let's see how the Provider Registration process is performed.

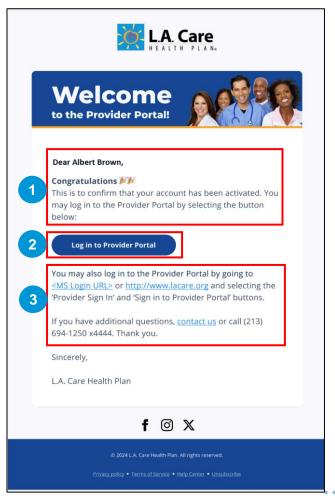


#### Account Activation Emails – Existing User

The subject line for the existing user account activation email will be as follows: "Welcome to the L.A. Care Provider Portal: You have been added to an account"

The key information available in the account activation email for an existing user will be:

- 1. **Confirmation Section**: In this section, you will get a confirmation that your account has been activated.
- 2. Call to Action Section: In this section, you will find the Log in to Provider Portal button and the MS Login links, which will direct you to the Provider Portal login page. Using your login credentials, you can access the Provider Portal and the account to which you have been added.
- 3. Contact details: In this section, you will find the contact information in case you have any questions.





#### **Provider Registration**

#### **Provider Registration - Overview**



To streamline the process for providers to register and manage their services on the Provider Portal, they must complete the Microsoft Registration process. This ensures a secure and efficient onboarding experience.

Upon receiving the account activation email, new users need to click the **Register** button or the **Microsoft Registration URL** link to access the L.A. Care login page and complete the Microsoft Registration process. Existing users can directly log in to the Provider Portal using their login credentials.

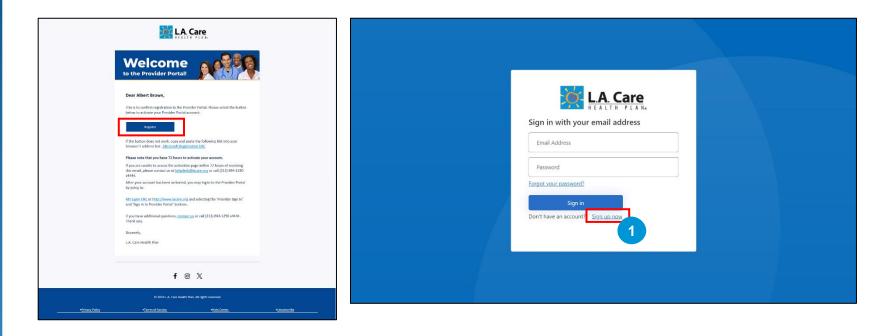
Next, let's see how a new user can perform Microsoft Registration and access Provider Portal.

#### **Provider Registration**



New users will need to perform the following steps to activate their Provider Portal account:

1. After clicking the **Register** button or the **Microsoft Registration URL** link, you will be directed to the **L.A. Care Login Page.** Click **Sign up now**.





New users will need to perform the following steps to activate their Provider Portal account:

- 2. After clicking **Sign up now**, you will be directed to the **Sign-up** page. In the **Email Address** field, enter the email address where you received the account activation email.
- 3. Next, click Send verification code.

<	Cancel L.A. Care	
	Verification is necessary. Please click Send button.	
	Email Address 2	
	Send verification code	
	New Password	
	Confirm New Password	
	Display Name	
	Given Name	
	Surname	
	Create	



New users will need to perform the following steps to activate their Provider Portal account:

- 4. In the **Verification code** field, enter the 6-digit numeric verification code that was sent to the email address you entered in the **Email address** field.
- 5. Click Verify code.

Cancel	
4 Verification code 5 Verify code Send new code	
New Password Confirm New Password	
Display Name	
Given Name	

<u>Note</u>: If you don't receive the code, you can click **Send new code** to request for a new code.



New users will need to perform the following steps to activate their Provider Portal account:

6. Next, enter the appropriate data in the New Password, Confirm New Password, Display Name, Given Name, and Surname fields. The New Password and Confirm New Password and fields are mandatory to proceed further, and the password entered in these two fields should match.

Cance LA.Carce H. L.I.T.H. P.L.A.N. E-mail address verified. You can now continue. Abertbrown@lacare.org	
Change e-mail	

#### 7. Click Create.

<u>Note</u>: The information provided during Microsoft registration will update the existing user and contact details in the system, except for the email address. If you will try to input a different email address, the registration will be rejected.

Next, let's review the possible errors you might encounter on this screen.

#### **Provider Registration – Errors**



The following errors might occur while performing the Microsoft Registration:

 If you click Create without entering a password in the New Password and Confirm Password fields, you will receive the error message: "A required field is missing. Please fill out all required fields and try again." Additionally, other error message(s): "The information is required." indicating the specific fields that are required will be displayed as highlighted below.

Cancel  Cancel	
Change e-mail This information is required. This information is required. Confirm New Password	
Display Name Given Name	
Surname	-

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#### **Provider Registration – Errors** (Cont'd)



The following errors might occur while performing the Microsoft Registration:

2. If the passwords in the **New Password** and **Confirm Password** fields do not match, you will receive the error message: "The password entry fields do not match. Please enter the same password in both fields and try again."

Cancel  Cancel  Concentration  Concentration  Concentration  Change e-mail  Change e-mail	
Display Name Given Name Surname	
Create	

#### **Provider Registration – Errors** (Cont'd)

The following errors might occur while performing the Microsoft Registration:

3. If the passwords in the **New Password** and **Confirm Password** field do not meet the required criteria, you will get the below highlighted error message.

Cancel Cancel Change e-mail Cancel Change e-mail	A
8-16 characters, containing 3 out of 4 of the following: Lowercase characters, uppercase characters, digits (0-9), and one or more of the following symbols: @ # \$ % ^ & * + = []()]\:',?/`~ "();.	
Confirm New Password	
Display Name	
Given Name	
Surname	•

#### **Provider Registration – Errors** (Cont'd)

The following errors might occur while performing the Microsoft Registration:

4. If you try to register an existing user, you will get the error message: "A user with the specified ID already exists. Please choose a different one."

different o E-mail add	the specified ID already exists. Please choose a new ress verified. You can now continue. rrown@lacare.org	
Albert	•	
Albert Brown		

Next, let's resume the Microsoft registration process.



New users will need to perform the following steps to activate their Provider Portal account:

- 8. In the **Country Code** field, enter the country/region code using the drop-down list and in the **Phone Number** field, enter your phone number.
- 9. After entering country code and phone number, the **Send Code** and **Call Me** buttons will be enabled. Based on your preference, click one of these buttons to proceed further:
- Send Code: The verification code will be sent to your phone number via text message.
- Call Me: You will receive a call with the verification code.

< Cancel	
Enter a number below that we can send a code via SMS or phone to authenticate you. Country Code	
Country/Region ~	
Phone number	
9 Send Code	
Call Me	



New users will need to perform the following steps to activate their Provider Portal account:

- 10. In the **Verification Code** field, enter the 6-digit numeric verification code which is sent to the phone number you entered in the previous step.
- 11. Click Verify code.



**Note:** The **Verify Code** button will enable after entering the verification code.

After entering the verification code, you will be directed to the Enter User Information page. Next, let's see what details are to be entered on the Enter User Information page.

#### **Enter User Information**



After completing the Microsoft Registration process, users must fill out the **Enter User Information** form to proceed further. This is a one-time process for the new users.

The Enter User Information form is divided into two sections:

- Personal Information: In this section, ensure that the personal details of the user in all the mandatory fields such as First Name, Last Name, etc. are accurately populated. The mandatory fields are marked with asterisk (\*).
- Contact Information: In this section, enter the contact details of the user in the Phone field, which is a mandatory field.

S	alesforce albert@lacvoicecrm.devpro Log Ou
nter User Informa → Personal Inform	
Salutation	* First Name
None	<b>↓</b> Albert
Middle Name	*Last Name
	Brown
Suffix	Primary Language
	None
Gender	Date of Birth
Gender	

* Phone	Fax
8168281682	
Mailing Street	Mailing State/Province
Mailing Zip/Postal Code	Mailing Country
Company Email	
pua@tte.com	
	Nex



The users will have to perform the following steps to fill in the **Enter User Information** form:

1. In the **Contact Information** section, enter your phone number in the **Phone** field. This will ensure that all the mandatory fields are complete.

	sales	force pert@lacvoicecrm.devp	ro Log Out	
	Jser Information		_	
✓ Per	rsonal Information			
Salutatio	on	* First Name		
Non	ne 🔹	Albert		
Middle I	Name	*Last Name		
		Brown		
Suffix		Primary Language		
		None	*	
Gender		Date of Birth		
Non	ne 🛔			
Seconda	ary Language			
Non	ne 🛔			
✓ Co	ontact Information			
* Phone	2	Fax		
1				

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The users will have to perform the following steps to fill in the **Enter User Information** form:

2. Scroll to the bottom of the page and click **Next** to proceed further.

Middle Name	* Last Name	
	Brown	
Suffix	Primary Language	
	English 🛟	
Gender	Date of Birth	
Male 🗘	Jul 12, 1997 🛗	
Secondary Language		
None		
✓ Contact Information		
* Phone	Fax	
81682/81682		
Mailing Street	Mailing State/Province	
Mailing Zip/Postal Code	Mailing Country	
Company Email		
pua@tte.com		
	2 Next	
© 2024 Sal-sform	nc. All rights reserved.	
© 2024 Salesforce, I	nc. Air ngrits reserved.	



The users will have to perform the following steps to fill in the **Enter User Information** form:

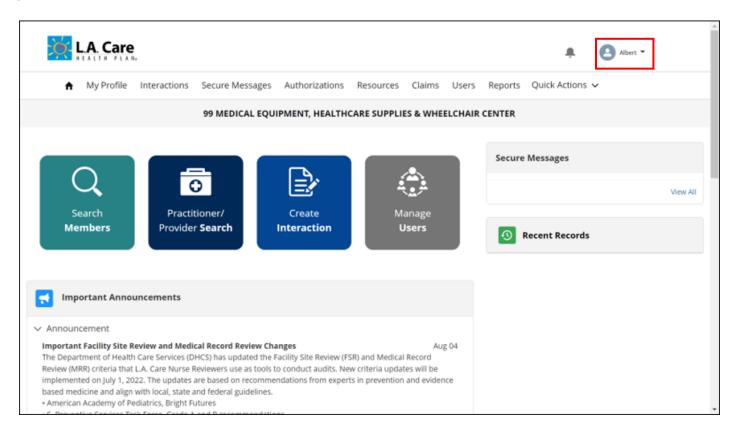
3. Review the entered details and click Login.

	albert@lacvoicecrm.devpro Log Out
Enter User Informat	
*Name Salutation Mr. Middle Name Suffix Gender Male Secondary Language	First Name Albert Last Name Brown Primary Language English Date of Birth July 12, 1997
✓ Contact Informa	ation
Phone 81682 81682 Company Email pua@tte.com	Address Fax
© 2024 Salesfi	Previous Login 3

<u>Note</u>: If you want to update the entered details, you can click **Previous**. You will be directed to the previous screen where you can edit the fields.



After clicking **Login**, the user is logged into Provider Portal for the first time. The Provider Portal Homepage displays. Here, you can check your username as highlighted below:



<u>Note</u>: The Provider Portal Homepage View will differ according to the user's assigned role. For example, if a user is assigned the Provider Portal Admin role, they will see the Provider Portal Admin Homepage view.

# **Module Summary**

Now that you have completed this module, here is the summary of what you have learnt, how to:

- Initiate Guided Registration on Provider Portal and IDT Console;
- Perform Microsoft Registration;
- Fill and submit the Enter User Information form; and,
- Switch Account.







### **Module 3: User Registration**

## **Module Objectives**

After completing this module, you will be able to:

- Perform Guided Registration on the Provider Portal.
  - Add, change, or remove a User.
  - Account Activation





# **Provider Information Overview**



Provider information on the provider portal is a critical component for effective healthcare management. It ensures that all stakeholders have access to essential details about healthcare providers, facilitating better communication, coordination, and quality of care.

In this module, the following topics will be covered:

- 1. Guided Registration
- 2. Account Activation Emails
- 3. Provider Registration
- 4. Enter User Information

Let's start with how the guided registration process can be performed.

# **Guided Registration**



**Guided Registration** on the Provider Portal is designed to make the onboarding process as smooth and efficient as possible.

By providing step-by-step instructions, validation checks, and helpful tooltips, it ensures that users can complete their registration accurately and with minimal hassle.

Upon receiving a request (via email or any other form of communication) from a prospective user indicating that they want to be added to an account, the **Provider Portal Admin** or **Account Manager** initiates the guided registration.

In this module, you will learn how the guided registration process is:

- Initiated by a Provider Portal Admin (PPA).
- Initiated by an Account Manager (AM) or Provider Network Manager (PNM).

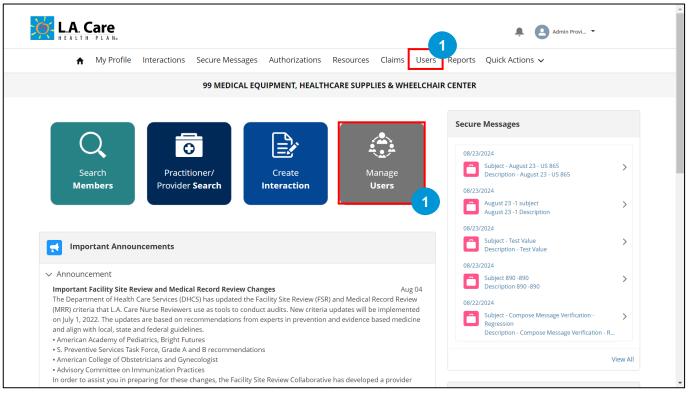
Let's start with the Guided Registration initiated by a Provider Portal Admin (PPA).



**Guided Registration** allows Provider Portal Admin to register/add new or an existing user to an account. Login to the Provider Portal using your login credentials to navigate to the Homepage of the Provider Portal.

Follow the below steps to complete the guided registration on Provider Portal:

1. Click the **Manage Users** button **OR** click the **Users** tab from the menu as shown below to navigate to the **Users** list view page.



**Note:** Users may also be called "contacts" within the system during the registration process.



Follow the below steps to complete the guided registration on Provider Portal:

2. On the **Users** list view page, click **Add User** button to register the user to an account. You will land on the Register User to Account page.

LA Care				Admin Provi	<b>*</b>
♠ My Profile	Interactions Secure Messag	es Authorizations Resources Claims Users I	Reports Quick Actions	5 <b>v</b>	
	99 MEDICAL	EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR	CENTER		
Users All Users				[	Add User
Name †	Account Contact Role	Account Name	Organization Name	Phone	Email
A D	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER	1	9731960039	votewad630@acpea
Admin Provider Portal	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER	t .	5555555555	adminuser@test.cos
Admin Provider Portal Test	Entity Key Contact & Attestation User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER	1	555555555	rorero4510@ploncy
Auth Admin Portal User	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER	1	7777777777	authadminuser@te
Auth General Portal User		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		2222222222	authgeneraluser@t
Benny SS	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		7306109332	jojil52646@hapied.
chinki	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER	1	9731960039	hofixa1463@biowe
DDTEST Test1234	General Authorized User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER			adminuser@test.co
dooby do	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	yibewo5985@bisco
Jack Jacky	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER	1	7306109332	locawag715@eixde
Jane Provider Portal		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		555555555	adminuser@test.co
John S		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER			authgeneraluser@t
jomr mr	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	rorero4510@ploncy
Louis White	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER	1		votewad630@acpea
Name1 TestPP1	Entity Key Contact & Attestation User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		23433333223	lefob60501@jofuso



Follow the below steps to complete the guided registration on Provider Portal:

3. On the **Register User to Account** page, in the **Role** field, select the role that you want to assign to the user from the drop-down list.

♠ My Profile Interactions Secu	ire Messages Authorizations Resources Claims User	s Reports Quick Actions 🗸
99	MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCH	AIR CENTER
egister User to Account		Steps
Register a User, please use the contact search t ntact.	o find an existing user. If no existing contact is found. You may register	a new O Register User to Account
count Name MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & W	HEELCHAIR CENTER	
tole	Department Name	
- Clear	Department Phone	
Provider Portal Admin User	<b></b>	
Billing / MSO / Claim User		
General Authorized User		
Entity Key Contact & Attestation User	<b>.</b>	



Follow the below steps to complete the guided registration on Provider Portal:

4. In the **Department Name, Department Email, Department Phone**, and **Responsible for** fields, you can add additional user details. These fields are optional (but recommended).

L.A. Care	🔔 🧕 Admin Provi 👻
♠ My Profile Interactions Secure Messages	Authorizations Resources Claims Users Reports Quick Actions $oldsymbol{ u}$
99 MEDICAL EQ	UIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER
Register User to Account	Steps
To Register a User, please use the contact search to find an existin contact.	g user. If no existing contact is found. You may register a new O Register User to Account
Account Name 99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENT	
* Role	Department Name
Provider Portal Admin User 🔹	Finance
Department Email	Department Phone
Finance@lacare.org	(555) 242-3343
Responsible For	
▼	
Clear	
834	
Attestation	Next
Contracting	
Compliance 4	ms & Conditions   Contact Us   1-888-4LA-Care (1-888-452-2273)
UM	



Follow the below steps to complete the guided registration on Provider Portal:

5. Next, In the **Contact to Register** field, you can select **New Contact** (if the user needs to be added to the new account) or **Existing Contact** (if the user needs to be added to the account is already an existing user).

	ecure Messages Authorizations Resources Claims Users Reports Quick Actions $\checkmark$
9	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER
Register User to Account	Steps
	th to find an existing user. If no existing contact is found. You may register a new O Register User to Account
To Register a User, please use the contact search contact.	h to find an existing user. If no existing contact is round, rou may register a new
Account Name 99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES &	3. WHEELCHAIR CENTER
* Role	Department Name
Provider Portal Admin User	▼ Finance
Department Email	Department Phone
Finance@lacare.org	(555) 242-3343
Responsible For	
Responsible For Compliance	<b>v</b>
Compliance *Contact to Register	v
Compliance	<b>v</b>

<u>Note</u>: The process flow from here will be slightly different for the **New Contact** and **Existing Contact**. First, let's see the steps for adding a user for a **New Contact**.

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#### **New Contact**

Follow the below steps to complete the guided registration on Provider Portal:

6. In the **Contact to Register** field, select the **New Contact** radio button. Click **Next**. You will be directed to the Enter User Information page.

**Note**: A new process flow will appear in the **Steps** sections as highlighted below.

My Profile Interactions Sec	ire Messages Authorizations Resourc	es Claims Users Repo	orts Quick Actions 🗸
99	MEDICAL EQUIPMENT, HEALTHCARE SU	PPLIES & WHEELCHAIR CENT	FER
Register User to Account To Register a User, please use the contact search contact. Account Name 99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & V		ound. You may register a new	Steps  Register User to Account  Enter User Information  Review & Submit
* Role	Department Name		
Provider Portal Admin User	Finance		
Department Email	Department Phone		
Finance@lacare.org	(555) 242-3343		
Responsible For			
Compliance	-		
*Contact to Register New Contact Existing Contact You will be pron	pted to Enter New User Information in following ste	p.	



#### **New Contact**

Follow the below steps to complete the guided registration on Provider Portal:

7. On the Enter User Information page, enter the user details such as the First Name, Last Name, Email, Phone, and Organization Name. The mandatory fields will be marked with asterisk (\*). Now, click Next to navigate to the Review & Submit page.

Note: The email input here will become that user's login ID.

Register User to Account
O Enter User Information
<ul> <li>Review &amp; Submit</li> </ul>

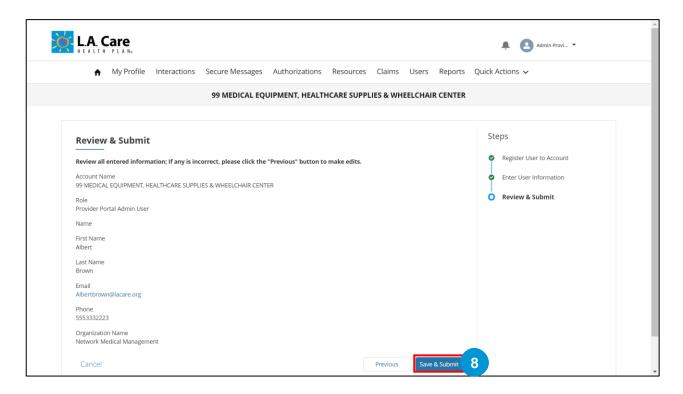


#### **New Contact**

Follow the below steps to complete the guided registration on Provider Portal:

8. On the **Review & Submit** page, review the user details and click **Save & Submit**.

If any correction is required for the contact details or contact role, use the **Previous** button to go back to the previous page and update the user details or role.





#### **New Contact**

Upon clicking Save & Submit, the Users List View will be displayed. An activation email is sent to the user's email address.

LA. Care				Admin Provi	<b>*</b>
<ul> <li>My Profile</li> </ul>	Interactions Secure Messag	es Authorizations Resources Claims Users F	Reports Quick Actions	· •	
	99 MEDICAL	EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR C	ENTER		
All Users					Add User
Name 🕇	Account Contact Role	Account Name	Organization Name	Phone	Email
A D	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	votewad630@acpea
Admin Provider Portal	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		5555555555	adminuser@test.co
Admin Provider Portal Test	Entity Key Contact & Attestation User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		5555555555	rorero4510@ploncy
Auth Admin Portal User	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		77777777777	authadminuser@te
Auth General Portal User		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		2222222222	authgeneraluser@t
Benny SS	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		7306109332	jojil52646@hapied.
chinki	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	hofixa1463@biowe
DDTEST Test1234	General Authorized User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER			adminuser@test.co
dooby do	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	yibewo5985@bisco
Jack Jacky	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		7306109332	locawag715@eixde
Jane Provider Portal		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		555555555	adminuser@test.co
John S		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER			authgeneraluser@t
jomr mr	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	rorero4510@ploncy
Louis White	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER			votewad630@acpea
Name1 TestPP1	Entity Key Contact & Attestation User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		234333333223	lefob60501@jofuso

We will discuss about the activation emails later in this module.

Now, let's see how to add an Existing Contact to an account next.



#### **Existing Contact**

Follow the below steps to complete the guided registration on Provider Portal:

6. In the **Contact to Register** field, select the **Existing Contact** radio button. Upon selecting Existing Contact, the **Contact** field appears. You can search and select the existing user contact to register to the account.

The **Contact** field is a search field, you can enter the name of the user to search.

**<u>Note</u>**: A new process flow will appear in the **Steps** sections as highlighted below.

Register User to Account		Steps
To Register a User, please use the contact searc contact.	h to find an existing user. If no existing contact is found. You may register a new	Register User to Account
Account Name 99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES 8	WHEELCHAIR CENTER	Review & Submit
*Role	Department Name	
Provider Portal Admin User	•	
Department Email	Department Phone	
Responsible For		
	•	
* Contact to Register O New Contact Existing Contact	6	
Contact		
Search Contacts	Q	
Please select a Contact to proceed		



#### **Existing Contact**

Follow the below steps to complete the guided registration on Provider Portal:

7. After entering the user's name in the Contact field, the contact details such as **Contact Name**, **Contact Email**, and **Contact Phone** will appear. Click **Next** to proceed to the Review and Submit page.

contact.	ct search to find an existing u	user. If no existing contact is found. You may register a new	Ī	ister User to Account
Account Name 99 MEDICAL EQUIPMENT, HEALTHCARE SU	PPLIES & WHEELCHAIR CENTER		Revi	ew & Submit
*Role	C	Department Name		
Provider Portal Admin User	•			
Department Email	C	Department Phone		
Responsible For				
	•			
* Contact to Register <ul> <li>New Contact</li> <li>Existing Contact</li> </ul>				
New Contact  Existing Contact Contact				
<ul> <li>New Contact          <ul> <li>Existing Contact</li> </ul> </li> </ul>	Q			
New Contact  Existing Contact Contact Albert Brown	٩			
New Contact  Existing Contact Contact Albert Brown Contact Name	٩			
New Contact  Existing Contact Contact Albert Brown	٩			
New Contact  Existing Contact Contact Contact Contact Name Albert Brown Contact Email	٩			
New Contact  Existing Contact Contact Contact Contact Name Albert Brown	Q			
New Contact  Existing Contact Contact Albert Brown Contact Name Albert Brown Contact Email albertbrown@lacare.org	Q			
New Contact  Existing Contact Contact Contact Contact Name Albert Brown Contact Email	Q			

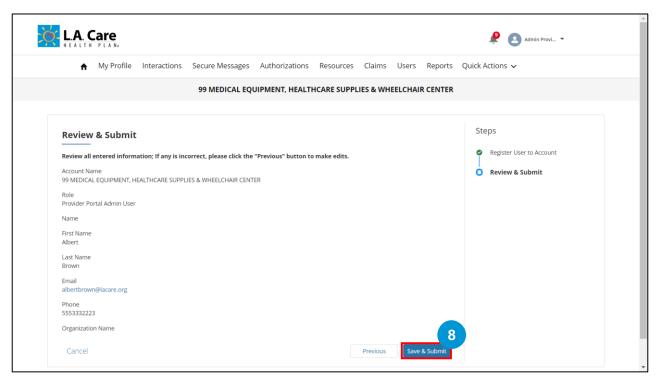


#### **Existing Contact**

Follow the below steps to complete the guided registration on Provider Portal:

8. On the **Review & Submit** page, review the user details and click **Save & Submit**.

If any correction is required for the user details or user role, use the **Previous** button to go back to the previous page and update the user details or role.





#### **Existing Contact**

Upon clicking Save & Submit, the Users List View will be displayed. An activation email is sent to the user's email address.

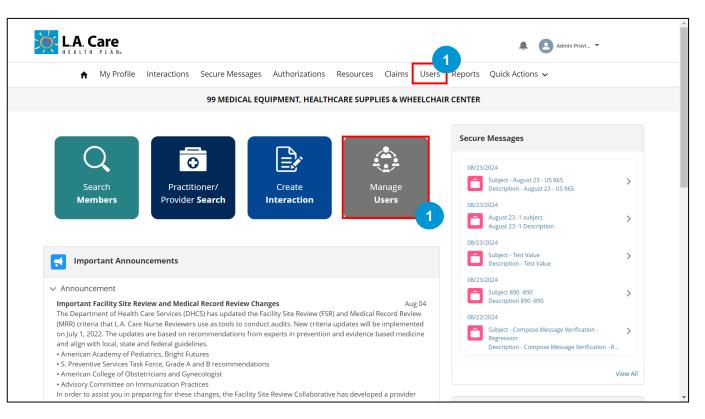
E.A. Care				Admin Prov	i •
♠ My Profile	Interactions Secure Message	es Authorizations Resources Claims Users	Reports Quick Actions	· •	
	99 MEDICAL	EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR	CENTER		
Licere					
All Users					Add User
Name 🕇	Account Contact Role	Account Name	Organization Name	Phone	Email
A D	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	9731960039	votewad630@acpea
Admin Provider Portal	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	5555555555	adminuser@test.co
Admin Provider Portal Test	Entity Key Contact & Attestation User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	555555555	rorero4510@ploncy
Auth Admin Portal User	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	77777777777	authadminuser@te
Auth General Portal User		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	2222222222	authgeneraluser@t
Benny SS	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	7306109332	jojil52646@hapied.
chinki	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	9731960039	hofixa1463@biowe
DDTEST Test1234	General Authorized User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R		adminuser@test.co
dooby do	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	9731960039	yibewo5985@bisco
Jack Jacky	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	7306109332	locawag715@eixde
Jane Provider Portal		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	555555555	adminuser@test.co
John S		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R		authgeneraluser@t
jomr mr	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	9731960039	rorero4510@ploncy
Louis White	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R		votewad630@acpea
Name1 TestPP1	Entity Key Contact & Attestation User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R	234333333223	lefob60501@jofuso

Next, let's see how you can change the Account Contact Role.



On the Provider Portal, the Provider Portal Admin can update only the role of a contact (user) associated with a specific account. To update the contact role, please log in to the Provider Portal and follow these steps:

1. Click the **Manage Users** button **OR** click the **Users** tab from the menu as shown below to navigate to the **Users** list view page.





Follow the below steps to update the contact role for an account on Provider Portal:

2. On the **Users** list view page, click the **Name** of the user/contact for which you want to change the role.

<mark>) (-</mark> –	A. Care				Admin Prov	i 🔻
	<ul> <li>My Profile</li> </ul>	Interactions Secure Message	es Authorizations Resources Claims Users F	Reports Quick Actions	5 🗸	
		99 MEDICAL	EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR C	ENTER		
	Users All Users					Add User
Name	†	Account Contact Role	Account Name	Organization Name	Phone	Email
A D		Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	votewad630@acpea
Admin	Provider Portal	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		5555555555	adminuser@test.coa
Admin	Provider Portal Test	Entity Key Contact & Attestation User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		555555555	rorero4510@ploncy
2 Auth A	dmin Portal User	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		77777777777	authadminuser@te
Auth C	ieneral Portal User		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		22222222222	authgeneraluser@t
Benny	SS	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		7306109332	jojil52646@hapied.
chinki		Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	hofixa1463@biowe
DOTES	T Test1234	General Authorized User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER			adminuser@test.co
dooby	do	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	yibewo5985@bisco
Jack Ja	cky	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		7306109332	locawag715@eixde
Jane P	rovider Portal		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		555555555	adminuser@test.co
John S			99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER			authgeneraluser@t
jomr n	nr	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	rorero4510@ploncy
Louis	White	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER			votewad630@acpea
Name	I TestPP1	Entity Key Contact & Attestation User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		234333333223	lefob60501@jofuso



Follow the below steps to update the contact role for an account on Provider Portal:

3. The page with all the user information appears. Click Edit.

HEALTH PLAN₀								🌲 🙆 Ar	dmin Provi 🔻
	Interactions	Secure Messages	Authorizations	Resources	Claims	Users	Reports	Quick Actions 🗸	
		99 MEDICAL EQU	JIPMENT, HEALTI	HCARE SUPPL	IES & WHE	ELCHAI	R CENTER		
User Auth Admin Port	al User								3 Edit
Account Contact Role Provider Portal Admin User	Phone 777777777777777777777777777777777777	Account N 99 MEDIC	lame CAL EQUIPMENT, HEAL	THCARE SUPPLIE	S & WHEELCH	IAIR CENT	ER	Active	
✓ Personal Information									
Name Auth Admin Portal User				Title Principal					
Auth Admin Portal User									
Account Name 99 MEDICAL EQUIPMENT, HEA	LTHCARE SUPPLIES	& WHEELCHAIR CENTER		Gender					
Account Name	LTHCARE SUPPLIES	& WHEELCHAIR CENTER		Gender Secondary I English	anguage				
Account Name 99 MEDICAL EQUIPMENT, HEA Primary Language	LTHCARE SUPPLIES	& WHEELCHAIR CENTER		Secondary l	anguage				
Account Name 99 MEDICAL EQUIPMENT, HEA Primary Language English	LTHCARE SUPPLIES	& WHEELCHAIR CENTER		Secondary l	anguage				



Follow the below steps to update the contact role for an account on Provider Portal:

 Upon clicking Edit, under the Account Information section, the Account Contact Role field will be editable. Select the role that you now want to assign to the user from the picklist.

User Auth Admin Portal	User			
Account Contact Role Provider Portal Admin User	Phone 7777777777	Account Name 99 MEDICAL EQUIPMENT,	HEALTHCARE SUPPLIES & WHEELCHAIR CENTER	Active
✓ Personal Information				
Name Auth Admin Portal User			Title Principal	
Account Name 99 MEDICAL EQUIPMENT, HEALTH	HCARE SUPPLIES & WHEEL	CHAIR CENTER	Gender	
Primary Language English			Secondary Language English	
✓ Account Information				
Account Contact Role Provider Portal Admin User		•	Active	
✓ Provider Portal Admin User			Department Email	
Billing / MSO / Claim User General Authorized User			Responsible For	
Entity Key Contact & Attestat	ion User	4		
Organization Name			Mailing Address	
Phone 7777777777			Mobile 5555555555	



Follow the below steps to update the contact role for an account on Provider Portal:

5. After updating the role in the **Account Contact Role** field, scroll down and click **Save**.

Primary Language English	Secondary Language English	
✓ Account Information		
Account Contact Role Entity Key Contact & Attestation User	✓ Active	
Department Name	Department Email	
Department Phone	Responsible For	
✓ Contact Information		
Organization Name	Mailing Address	
Phone 7777777777	Mobile 555555555	
Email authadminuser@test.com.invalid	Fax 111111111	
✓ For Internal Use Only		
Last Login May 10, 2024		
	Cancel Save 5	
Ē	vacy Policy   Terms & Conditions   Contact Us   1-888-4LA-Care (1-888-452-2273)	



After clicking Save, a success message will appear, confirming that the update was successful. The Account Contact Role will also be updated to reflect the role you selected in the previous step.

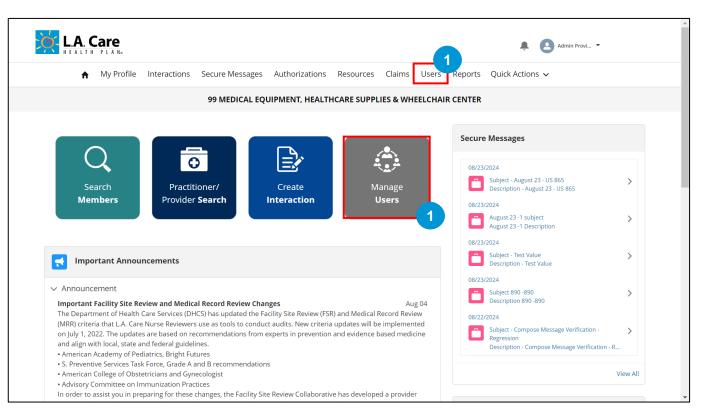
L.A. Care	Success Update Successfull	×	🔔 🛆 Admin Provi 🔻
	s Secure Messages Authorizations	Resources Claims Users Reports	Quick Actions $\checkmark$
	99 MEDICAL EQUIPMENT, HEALTH	CARE SUPPLIES & WHEELCHAIR CENTER	
User Auth Admin Portal User			Edit
Account Contact Role Entity Key Contact & Attestation User	Phone Account Name 7777777777 99 MEDICAL EQUIPME	NT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER	Active
arsigma Personal Information			
Name Auth Admin Portal User		Title Principal	
Account Name 99 MEDICAL EQUIPMENT, HEALTHCARE SUPPL	JES & WHEELCHAIR CENTER	Gender	
Primary Language English		Secondary Language English	
✓ Account Information			
Account Contact Role Entity Key Contact & Attestation User		Active	
Department Name		Department Email	

Next, let's see how you can remove a contact from an account.



On the Provider Portal, the Provider Portal Admin can remove a contact (user) from a specific account by marking the contact as Inactive. To remove a contact, please log in to the Provider Portal and follow these steps:

1. Click the **Manage Users** button **OR** click the **Users** tab from the menu as shown below to navigate to the **Users** list view page.





Follow the below steps to remove the contact from an account on Provider Portal:

2. On the **Users** list view page, click the **Name** of the user/contact which you want to remove from the account.

ò.	LA. Care			*	Admin Prov	i •
	<ul> <li>My Profile</li> </ul>	Interactions Secure Message	es Authorizations Resources Claims Users R	Reports Quick Actions	~	
		99 MEDICAL	EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR C	ENTER		
l	All Users					Add User
	Name †	Account Contact Role	Account Name	Organization Name	Phone	Email
/	A D	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	votewad630@acpea
1	Admin Provider Portal	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		5555555555	adminuser@test.co
	Admin Provider Portal Test	Entity Key Contact & Attestation User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		5555555555	rorero4510@ploncy
2	Auth Admin Portal User	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		7777777777	authadminuser@te
	Auth General Portal User		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		2222222222	authgeneraluser@t
1	Benny SS	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		7306109332	jojil52646@hapied.
0	chinki	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	hofixa1463@biowe
1	DDTEST Test1234	General Authorized User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER			adminuser@test.co
(	dooby do	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	yibewo5985@bisco
J	Jack Jacky	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		7306109332	locawag715@eixde
J	Jane Provider Portal		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		555555555	adminuser@test.co
I	John S		99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER			authgeneraluser@t
	jomr mr	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		9731960039	rorero4510@ploncy
1	Louis White	Provider Portal Admin User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER			votewad630@acpea
	Name1 TestPP1	Entity Key Contact & Attestation User	99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTER		23433333223	lefob60501@jofuso



Follow the below steps to remove the contact from an account on Provider Portal:

3. The page with all the user information appears. Click Edit.

L.A. Care								٠	Admin Provi	<b>•</b>
♠ My Profile	Interactions	Secure Messages	Authorizations	Resources	Claims	Users	Reports	Quick Action	s 🗸	
		99 MEDICAL EQ	UIPMENT, HEALTI	HCARE SUPPL	IES & WH	EELCHAI	R CENTER			
User Auth Admin Port	al User									3 Edit
Account Contact Role Provider Portal Admin User	Phone 777777777	Account N 7 99 MEDI	lame CAL EQUIPMENT, HEAI	LTHCARE SUPPLIE	ES & WHEEL	HAIR CENT	ĒR	Active		
✓ Personal Information										
Name				Title						
Name Auth Admin Portal User				Title Principal						
	ALTHCARE SUPPLIES	& WHEELCHAIR CENTER								
Auth Admin Portal User Account Name	ALTHCARE SUPPLIES	& WHEELCHAIR CENTER		Principal	Language					
Auth Admin Portal User Account Name 99 MEDICAL EQUIPMENT, HEA Primary Language	ALTHCARE SUPPLIES	& WHEELCHAIR CENTER		Principal Gender Secondary I	anguage					
Auth Admin Portal User Account Name 99 MEDICAL EQUIPMENT, HEA Primary Language English	ALTHCARE SUPPLIES	& WHEELCHAIR CENTER		Principal Gender Secondary I	anguage					



Follow the below steps to remove the contact from an account on Provider Portal:

4. Upon clicking Edit, the **Active** checkboxes on this page will be editable. Deselect either of the **Active** checkboxes.

L.A. Care								٠	Admin Provi 🔻
♠ My Profile	Interactions	Secure Messages	Authorizations	Resources	Claims	Users	Reports	Quick Actions	5 <b>v</b>
		99 MEDICAL EQ	UIPMENT, HEALTH	ICARE SUPPLI	ES & WHE	ELCHAII	R CENTER		
User Auth Admin Porta	al User							4	
Account Contact Role Entity Key Contact & Attestati			Account Name 99 MEDICAL EQUIPMI	ENT, HEALTHCARE	SUPPLIES &	WHEELCH	IAIR CENTER	Active	e
$\checkmark$ Personal Information									
Name Auth Admin Portal User				Title Principal					
	LTHCARE SUPPLIE	5 & WHEELCHAIR CENTER							
Auth Admin Portal User Account Name 99 MEDICAL EQUIPMENT, HEAL	THCARE SUPPLIE	5 & WHEELCHAIR CENTER		Principal	nguage				
Auth Admin Portal User Account Name 99 MEDICAL EQUIPMENT, HEAL Primary Language	THCARE SUPPLIE	S & WHEELCHAIR CENTER		Principal Gender Secondary La	nguage				
Auth Admin Portal User Account Name 99 MEDICAL EQUIPMENT, HEAL Primary Language English		5 & WHEELCHAIR CENTER		Principal Gender Secondary La English	nguage				



Follow the below steps to remove the contact from an account on Provider Portal:

4. After deselecting any of the **Active** checkboxes, the **Update Status** pop-up displays, asking for confirmation to change the contact status from Active to Inactive. Click **OK**.

My Profile Interactions Secure	Messages Authorizations Resource	s Claims Users Rep	oorts Quick Actions 🗸	
99 N	IEDICAL EQUIPMENT, HEALTHCARE SUF	PLIES & WHEELCHAIR CEI	NTER	
Luser Auth Admin Portal User				
Account Contact Role Entity Key Contact & Attestation User	Update Statu	IS	Active	
Are ye	ou sure you would like to change the status from A	ctive to Inactive?		
Personal Information	Cancel	4		
Name Auth Admin Portal User	itte Princip	al		
Account Name 99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEEL	Gender CHAIR CENTER			
Primary Language inglish	Second: English	iry Language		
Account Information				
	Act			



Follow the below steps to remove the contact from an account on Provider Portal:

#### 5. Scroll down and click **Save**.

99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES & WHEELCHAIR	CENTER	
Primary Language English	Secondary Language English	
✓ Account Information		
Account Contact Role Entity Key Contact & Attestation User	Active	
Department Name	Department Email	
Department Phone	Responsible For	
✓ Contact Information		
Organization Name	Mailing Address	
Phone 7777777777	Mobile 5555555555	
Email authadminuser@test.com.invalid	Fax 111111111	
✓ For Internal Use Only		
Last Login May 10, 2024		
	Cancel Save 5	
Privacy Po	olicy   <u>Terms &amp; Conditions</u>   <u>Contact Us</u>   1-888-4LA-Care (1-888-452-2273)	



Upon clicking Save, a success message will appear, confirming the update was successful. The **Active** checkbox will also be deselected, indicating that the contact status has now been changed to Inactive.

L.A. Care	Success Update Successfull	×	🌲 🙆 Admin Provi 👻
♠ My Profile Interactions	Secure Messages Authorizations	Resources Claims Users Reports	s Quick Actions 🗸
	99 MEDICAL EQUIPMENT, HEALTH	CARE SUPPLIES & WHEELCHAIR CENTEI	R
Luser Auth Admin Portal User			Edit
Account Contact Role Pho Entity Key Contact & Attestation User 777		NT, HEALTHCARE SUPPLIES & WHEELCHAIR CENTE	R Active
✓ Personal Information			
Name Auth Admin Portal User		Title Principal	
Account Name 99 MEDICAL EQUIPMENT, HEALTHCARE SUPPLIES &	WHEELCHAIR CENTER	Gender	
Primary Language English		Secondary Language English	
✓ Account Information			
Account Contact Role Entity Key Contact & Attestation User		Active	
Department Name		Department Email	

Next, let's see the guided registration initiated by an Account Manager (AM) or Provider Network Manager (PNM).

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# **Course Summary**

Now that you have completed the course, here is the summary of what you have learned, how to:

- Perform the admin activities on Provider Portal such as Login and Logout.
- Initiate and complete guided registration for users as Provider Portal Admin and Account Manager in Provider Portal.
- Search for and access the Practitioner/Provider information.





## **Resources and Support**



 Use the following resources and links below to obtain more information about the new Provider Portal





Provider Portal Inquiries | L.A. Care Health Plan







# Thank you for attending the Provider Portal Admin Training course.



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