Provider Healthcare Portal Registration FAQs

These are some of the questions the Indiana Health Coverage Programs (IHCP) is asked most frequently about the Provider Healthcare Portal (Portal). For detailed information about registering for and using the Portal, see the *Provider Healthcare Portal* provider reference module and the *Provider Healthcare Portal Training* page at in.gov/medicaid/providers.

Can more than one person sign up delegates for a service location?

Yes, each service location has one provider account representative. However, that account representative can assign Manage Delegate Accounts functionality so that, if the provider account representative is not available, another co-representative can also manage delegate accounts, such as adding a delegate or inactivating a delegate for that service location.

For the Portal Registration process, are the last four digits of my driver's license number validated in any way?

No, we do not validate or check the last four digits of the driver's license number. This number is used as a unique identifier for each user. Delegates must remember the identifier they enter in this field.

When a provider account representative authorizes a delegate, does the delegate receive an email with his or her username? Do I then provide the delegate with the delegate code?

The provider account representative receives the delegate code at the time the delegate is authorized in the *Provider* account. The representative must give the delegate code to the user for his or her use in registering a *Delegate* account.

How do we remove delegates if they leave our organization?

Delegates are not actually removed; they are marked inactive. If a delegate leaves an organization, it is the responsibility of the provider account representative to make that delegate inactive in each *Provider* account where he or she is no longer an authorized user. Delegates can be marked inactive on the *Manage Accounts* page. Select the individual delegate and change the delegate's status from Active to Inactive.

If I'm a provider that does my own billing, do I need to create a delegate?

Providers that do all of their own billing and file maintenance work do not have to create delegates.

Will my account be locked if I enter the wrong password?

If you type your password incorrectly five times, you will be locked out of your Portal account for 60 minutes. After 60 minutes, you can log in by entering the correct password. If you do not remember the correct password, click the Forgot Password link and you will be prompted to change your password.

Can I use previous passwords when choosing a new password?
You will not be able to reuse any of your most recent 24 passwords.

What is the timeout period for inactivity on the Portal?

Your user session will time out after 30 minutes of inactivity. You will get a 5-minute warning before your session times out. The warning message dialog box allows you to extend your session.

I'm entering the federal taxpayer identification number (TIN) and Provider ID, but I'm getting an error saying that the data does not match. What should I do?

Ensure that you are entering your IHCP Provider ID (previously called a Legacy Provider Identifier or LPI). If your Provider ID contains an alpha character, the alpha character must be uppercase. A National Provider Identifier (NPI) is not the same as a Provider ID.

I'm getting an error message stating that the federal TIN or Provider ID I entered is incorrect. What should I do?

If the federal TIN in *Core*MMIS is different from what you are entering, check with your credentialing personnel to confirm which TIN is correct. If the TIN truly is different from what is currently on file with the IHCP, send a completed *IHCP Provider Taxpayer Identification Number Maintenance Form* to the IHCP so we can update our records. The form is available on the *Update Your Provider Profile* web page at in.gov/medicaid/providers.

What should I do if I've entered a wrong email address and cannot get the email containing the link to verify registration?

Contact the electronic data interchange (EDI) technical assistance line at 1-800-457-4584. To reach the Portal help desk, choose option 3 and then option 3. The Portal help desk representative can resend the registration verification email to an alternate email address. When you log in, you can update your email address.

What should I do if I've entered a user ID, entered an answer to the challenge question, and received a message that the answer to the challenge question is incorrect?

Go back to the login screen and verify that you are entering the correct user ID.

Rendering providers do not have federal employer identification numbers. What do we use as an identifier when registering on the Portal?

Rendering providers should use their Social Security numbers.

When I created delegates as part of Portal registration, I was asked to assign functions to each of my delegates. How do I know which functions to assign to my delegates? Where can delegates go to get training?

The Portal includes a list of checkboxes of delegate functions. You should select as many functions as you want that delegate to be authorized to perform. (You must select at least one.) The following table describes what each of the listed functions enables delegates to do. For information on these delegate functions, see the *Provider Healthcare Portal* provider reference module. For training or further reference, see the *Provider Healthcare Portal Overview for Provider Delegates* presentation as well as other applicable presentations or quick reference guides on the *Provider Healthcare Portal Training* page at in.gov/medicaid/providers.

Table 1 – Delegate Functions Available through the Portal

Delegate Function	Description
Care Management – Submit Resubmit Authorization	Ability to submit and resubmit a provider's prior authorization (PA) requests
Care Management – View Authorization	Ability to view a provider's submitted PA requests
Claim – Inquiry	Ability to search for a provider's submitted claims
Claim – Submit and Resubmit	Ability to submit and resubmit a provider's claims
Disenroll	Ability to remove rendering providers from a group service location or voluntarily disenroll a provider from the IHCP
Manage Delegate Accounts	Ability to manage the delegate assignments
MAPIR	Ability to view the provider's identification information, view general electronic health record (EHR) information, and launch the Medical Assistance Provider Incentive Repository (MAPIR) application
Member Focus Viewing	Ability to view eligibility data, recent claims, and prior authorizations for a specified member; information that can be viewed is dependent on the other authorized functions of the delegate
Notification of Pregnancy Inquiry	Ability to search for and view a Notification of Pregnancy (NOP) submitted on a member's behalf
Payment History – Inquiry	Ability to search for and view payments and RAs
Provider Maintenance	Ability to update provider information, including but not limited to taxpayer identification number (TIN), contact information, address, specialty, electronic funds transfer (EFT) information, languages, the provider's legal name, taxonomy, and licenses. Ability to sign up for electronic Remittance Advices (ERAs)
Provider Profile Inquiry	Ability to view provider profile information
Revalidation	Ability to submit revalidation information for a provider's enrollment
Secure Correspondence	Ability to use the secure correspondence messaging function to quickly communicate with Gainwell instead of using unsecure email
Submit RCP Referral to Lock-In List	Ability to submit RCP referrals to add a provider to a member's lock-in list
Verify Eligibility	Ability to verify a member's enrollment status and benefit plan assignment, as well as related member information, for a specific date or date range Ability to submit an NOP on behalf of a member (*applies only to delegates of certain provider types*) Ability to submit Presumptive Eligibility (PE) applications (*applies only to delegates of PE qualified providers*)