The Provider Portal Reference Guide is a unique tool created to assist in the daily navigation of the frequently performed tasks on the Provider Portal, including checking member eligibility, claim(s) status, member reporting and other valuable information to help you serve the L.A. Care Community.

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*Click ➤ to navigate to a specific page.*
Getting Started

Registering a New User

A. All contracted **Physicians** and **Specialists** may self-register at http://www.lacare.org/providers/provider-sign-in/provider-registration.

All information marked with an asterisk is required for the request to be processed, see Figure 1.

Figure 1

B. All other **Medical** and **Administrative** staff must submit a request for access to the Provider Portal via email at Providerrelations@lacare.org or by phone at 213.694.1250 x 4719. All of the required information that needs to be specified in the email is listed below.

- Name of organization – as listed in the contract
- Tax ID
- Organization address
- Full name of person(s) that need access
- Job title
- Phone number
- Email address
- Purpose/reason why access is needed
C. Please note all Provider Portal registration requests will be processed within 3-5 business days.

D. Once access has been granted to the Provider Portal, an email notification will be sent to the new user. In this email, a confirmation link will be provided to confirm registration. The activation link is valid for 72 hours.

*If the new user does not confirm their access within the timeframe allowed, the registration process will have to be repeated. Please contact Provider Relations via email at Providerrelations@lacare.org or by phone at 213.694.1250 x 4719 to re-submit a request for Provider Portal Access.
Add, Change, or Delete a Provider (ACD Workflow)

*This function is only available to Participating Provider Groups. Please contact your Participating Provider Group for all PCP or Specialist change requests.

A. To add, change or delete a provider within your network, log on to the Provider Portal at http://www.lacare.org/ and select at the top of the page “Provider Sign-In.”

B. Next, select “ADD CHANGE DELETE” from the tabbed options on the left side. A list of providers will be displayed. See Figure 2 and Figure 3.
Managing Your Provider Portal Access

C. Select “Request” at the top of the page and choose the desired option to Add, Delete, or Change a provider. Each selection will have submenus to help with navigating through the rest of the process. For a detailed overview of this process, please contact your Account Specialist to receive a full detail copy of the instructions for this function on the Provider Portal. See Figure 4.
Checking Member Eligibility

A. Log on to the Provider Portal and select “Member Eligibility Verification.”

B. Please fill out all required fields marked with an asterisk and add any additional information that is available. Select submit when finished. See Figure 5.

Figure 5
Claim(s) Search
A. Log on to the Provider Portal and look for tabbed options on the left identified as “Search a Claim” or “Search All Claims.” With a single claim number and patient account number, details of claim can be viewed under the “search a claim” tab. If the claim number is not known, select the option to “search all claims” to locate a list of claims. See Figure 6 and Figure 7.

Figure 6 - If you have the claim number available
Figure 7 - If you do not have a claim number available
Searching for a Physician

*This function is only available to Participating Provider Groups. Please contact your Participating Provider Group for inquiries related to physicians registered to your medical group.

**Step 1:** Log on to the Provider Portal and select “Search Physician” from the tabbed options on the left. Complete the form displayed below. See Figure 8.

If you are having difficulties and are unable to locate a Physician, please contact Provider Relations via email at Providerrelations@lacare.org or by phone at 213.694.1250 x 4719.

**Figure 8**
Forms

To view the various forms available for Providers, log on to the Provider Portal and select the left tabbed option “FORMS.” See Figure 9.

Each form listed is available for immediate download and viewing. If you have any questions or are unable to find a specific form, please contact Provider Relations via email at Providerrelations@lacare.org or by phone at 213.694.1250 x4719.

Figure 9
Incentive Programs

L.A. Care offers various incentive programs for Providers. Figure 10 is a snapshot of a few of the programs offered by L.A. Care. Be sure to check with your Account Specialist for the most current programs offered.

To view these programs, log on to the Provider Portal and select “Incentive Programs.” A list of programs will be displayed. If no programs display, please contact Provider Relations via email at Providerrelations@lacare.org or by phone at 213.694.1250 x 4719.

Figure 10
Reporting
Various types of reporting are available for download and review on the Provider Portal. Depending on the type of user access granted, the new user role will determine the type of reporting available to view.

Figures 11, 12, and 13 are examples of what reports are available for Participating Provider Groups to view. If a report is not listed under your account log in, please contact your site Administrator for further assistance.

A. To view reporting, simply log on to the Provider Portal. Once logged on, select the tabbed options on the left labeled “Reports.”

Figure 11
B. Next, select the reporting year related to your inquiry.
C. A list of reports will be displayed. Select the report you would like to view.

Figure 12
D. Once the desired report is identified, select the line of business that is related to your search, for example Cal-Medi Connect (CMC) or Healthy Kids (HKID). See Figure 13.

If the user is having problems downloading or viewing reports, please contact Provider Relations via email at Providerrelations@lacare.org or by phone at 213.694.1250 x 4719.

Figure 13
We hope that you find this reference guide to be useful and informative to perform the most common activities performed on the L.A. Care Provider Portal. Additional helpful contact information regarding L.A. Care Services is listed below.

<table>
<thead>
<tr>
<th>RESOURCE</th>
<th>CONTACT INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provider Line</td>
<td>Phone: 866.522.2736</td>
</tr>
<tr>
<td>Member Services Line</td>
<td>Phone: 888.839.9909</td>
</tr>
<tr>
<td>Utilization Management</td>
<td>Provider Authorization Referral Form: <a href="http://www.lacare.org/sites/default/files/PL0022c_Updated_Auth_Req_Form_10%2001%202015_FINAL.pdf">http://www.lacare.org/sites/default/files/PL0022c_Updated_Auth_Req_Form_10%2001%202015_FINAL.pdf</a>  Phone: 877.431.2273  Fax: 213.438.5085</td>
</tr>
</tbody>
</table>
| Specialty Services            | Logisticare Transportation  
  English: 866.529.2141  
  Spanish: 866.529.2142  
  Vision Service Plan (VSP)  
  Phone: 800.877.7195  
  TTY/TDD: 800.428.4833  
  Navitus Pharmacy  
  Phone: 844.268.9786  
  Managed Long Term Services & Supports  
  E-mail: MLTSS@lacare.org  
  Phone: 855.427.1223  
  Fax: 213.438.4877  
  Nurse Advice Line (24/7)  
  Phone: 800.249-3619  
  TTY: 866.735.2929  
  Speech to Speech: 800.854.7754  
  Denti-Cal  
  Phone: 800.322.6384  
  Non-Specialty Services  
  Beacon Health Options  
  Phone: 877.344.2858  
  L.A. Care Behavioral Health Services  
  Phone: 844.858.9940  
  Email: behavioralhealth@lacare.org  
  Specialty Mental Health Services  
  Department of Mental Health  
  Phone: 855.854.7771  
  Specialty Substance Use Disorder  
  Department of Public Health  
  Phone: 800.564.6600  
  Member Programs               | Disease Management  
  Asthma: 888.200.3094  
  Diabetes: 877.796.5878  
  Heart: 855.707.7852  
  Health Education  
  Phone: 888.839.9909  
  Phone: 213.694.1250  
  ext. 4408  
  Interpreting Services  
  In-Person: 888.839.9909  
  Telephonic: 888.930.3031  
  California Relay Svcs: 711  
  Claims Department             | Claims Forms: http://www.lacare.org/providers/claims-and-icd-10/submitting-claim  
  • Fee-For-Service PCP and Specialists – CMS 1500 Form Required  
  • CHDP Services – PM160 Form Required  
  • Provider Disputes Resolution (PDR)  
  Electronic Payment: https://payspanhealth.com/ProviderPortal/Registration  
  Claims Submission  
  Mailing Address:  
  L.A. Care Claims Department  
  PO Box 811580  
  Los Angeles, CA 90081  
  Provider Disputes Resolution  
  Mailing Address:  
  L.A. Care Claims Department  
  Attn: Appeals and PDR Unit  
  PO Box 811610  
  Los Angeles, CA 90081  
  Fax: 213.438.5793 |