ForwardHealth Provider Portal Account User Guide

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1 Introduction

Both public and secure information is accessible through the ForwardHealth Provider Portal. Public information is accessible to all users; however, to gain access to secure information and to conduct business with ForwardHealth, providers are required to establish a secure account within the Portal.

The Portal allows providers to conduct business through a secure entry point 24 hours a day, seven days a week. After creating a secure Provider Portal account, providers can perform various functions including verifying member enrollment; submitting electronic claims, adjustments, and prior authorization requests; and viewing other reports and data.

2 Request Portal Access

To establish a Provider Portal account, providers will need a **Personal Identification Number (PIN)** number. Providers can establish as many Provider Portal accounts as needed for their business.

1. To request a PIN, access the ForwardHealth Portal at <u>https://www.forwardhealth.wi.gov/</u>.



ForwardHealth Portal Page

2. Click Providers.

The public Provider page of the ForwardHealth Portal will be displayed.



Public Provider Page

 In the Quick Links box on the right of the page, click Request Portal Access. The Request Portal Access page will be displayed.

Request Portal Access	3
Required fields are indicated with an asterisk(*).	
 Please complete the fields below to request your secure provider portal we You must complete either the NPI Information or Provider Number Informati For the NPI Information section: Enter your NPI and press the search button. Select the appropriate ForwardHealth certification. Enter your SSN/TIN. 	b access. on section.
NPI Information	
NPI Number Search Clear	
ForwardHealth Certifications for Requested NPI Enter your NPI and press search.	
⊂ Selected NPI *	
NPI Number	
Name	
Address Line 1	
City	
ZIP -	
Taxonomy	
Financial Payer	
SSN or TIN	
OR	
⊂ Provider Number Information *	
Drovider TD	
SSN or TIN	
	<u>S</u> ubmit <u>C</u> ancel

Request Portal Access Page

4. In the **NPI Information** section, enter the provider's National Provider Identifier (NPI) in the **NPI Number** field if you are a health care provider.

If you are not a health care provider (e.g., a personal care only provider, a specialized medical vehicle provider, or a blood bank), proceed to <u>Step 9</u>.

5. Click Search.

The **ForwardHealth Certifications for Requested NPI** section will auto-populate with the provider's information that ForwardHealth has on file.

If the NPI is not found, the page will refresh; however, the ForwardHealth Certification for Requested NPI section will not be populated with the provider's information.

ForwardHealth Provider Portal Account User Guide

Request Portal Access		3
Required fields are indicated with an asterisk(*).		
 Please complete the fields below to reque You must complete either the NPI Information 	st your secure provider portal we ation or Provider Number Informati	b access.
For the NPI Information section:		on seedon.
 Enter your NPI and press the search 	h button.	
 Select the appropriate ForwardHeal Enter your SSN/TIN 	th certification.	
o Enter your obly rint.		
NPI Information		
NPI Number 1234567890 Search	Clear	
ForwardHealth Certifications for Requeste	d NPI	
GENERAL CLINIC 92 E 88TH ST STE 300 MAD	ISON 53703 Medicaid	100RC0000X Internal Medicine - Cardiovascular Disease
C Selected NPI *		
NPI Number		
Name		
Address Line 1		
City		
ZIP -		
Taxonomy		
Financial Payer		
SSN or TIN		
OR		
Provider Number Information *		
Provider ID		
Financial Payer 🗸		
SSN or TIN		
		<u>Submit</u> <u>Cancel</u>

Request Portal Access Page

6. Click the appropriate row from the ForwardHealth Certifications for Requested NPI section.

The **Selected NPI** section will auto-populate with the selected information.

PI Number 123	34567890 Search	Clear			
orwardHealt	th Certifications for Requested NPI				
Name GENERAL CLINI	Street Ci 92 E 88TH ST STE 300 M.	ADISON 537	Code Financial 03 Medicaid	Payer Taxonomy 100RC0000X	Description Internal Medicine - Cardiovascular Diseas
elected NPI *					
VPI Number	1234567890				
Name	GENERAL CLINIC				
Address Line 1	92 E 88TH ST STE 300				
Dity	MADISON				
ZIP	53703 -				
faxonomy	100RC0000X				
inancial Payer	Medicaid				

Selected NPI Section with Auto-populated Information

7. Enter the Social Security Number (SSN) or Tax Identification Number (TIN) in the **SSN or TIN** field in the Selected NPI section.

- 8. Skip to <u>Step 12</u>.
- If the provider is not a health care provider and therefore does not have an NPI, enter the provider's Medicaid Provider ID in the **Provider Number Information** section.
- 10. From the **Financial Payer** drop-down menu, select the financial payer certification for which the provider is requesting a Provider Portal account.
- 11. Enter the Social Security Number (SSN) or Tax Identification Number (TIN) in the **SSN or TIN** field.



Provider Number Information Section

- 12. Click Submit.
 - If the request is successful, a confirmation page will be displayed.

wisconsin.gov home	state agencies	subject directory	department of health services	
Forward	Health consin serving yo	1		Search Welcome » August 22, 2011 9:40 AM Login
Your Request for Provi	der Secure Site a	ccess has complete	ed successfully!	Quick Links
 You will be receivi create your secur For more information 	ng a PIN letter witi	nin three to five busi	ness days. Use this letter to ck <u>here</u>	Register for E-mail Subscription Request Portal Access Online Handbooks ForwardHealth Updates Provider Relations Representatives Provider Relations Representatives Provider Specific Resources Fee Schedules Forms Become a Provider Certification Tracking Search MAC SISS User Guide Student Roster File Format Provider Recertification Wisconsin Well Woman Program Policy and Procedure

Confirmation Page

• If the request is not successful, an error message indicating why the information could not be submitted will be displayed at the top of the page.



Example Error Message

A request could be denied for the some of the following reasons:

- **No provider agreement on file**. Call Provider Services at 1-800-947-9627 for the agreement.
- **SSN or TIN number is incorrect**. Check the number and enter the correct number.
- **PIN already requested**. Check within your organization to find out if someone has already received the PIN and set up an account(s).

If you have questions, call the Portal Help Desk (toll-free) at 1-866-908-1363 Monday through Friday between 8:30 AM and 4:30 PM.

After a provider has successfully requested Portal access, a letter containing a PIN will be mailed to the provider. Access to the Portal is **not** possible without a PIN. The letter also includes a Login ID, which is a health care provider's NPI or a non-health care provider's Medicaid Provider ID. For security purposes, the Login ID contains only digits 3, 4, 5, and 6 of the NPI or Provider ID.

		FORWARDHEALTI
	h di	ELECTRONIC DATA INTERCHANGE DEP 6406 BRIDGE ROAI MADISON WI 53784-000
Scott Walker		Telephone: 866-416-497
Governor	State of Wisconsin	FAX: 608-221-088
Dennis G. Smith	Dependence of Maconain	111. 711 01 000-947-332
August 22, 2011	Department of Health Services	dhs.wisconsin.gov/ForwardHealt
2113758		
GENERAL CLINIC		
92 E 88TH ST STE 300		
JOHN SMITH MADISON WI 53703-0	0000	
WEADISON, WI 33703-0		
Dear Provider:		
Forward Health has re-size	ad your manaet to actablish a second Devi	al account A summary of the
information you provided	is included below, along with a Login II	and Personal Identification
Number (PIN) you will ne	ed in order to set up your secure provide	r account on the Forward
Health Portal.		
NPI or Provider ID:	xx3456xxx	x
Provider Type/Speciality:	Physician/	Internal Medicine
Taxonomy:	100RC000	0X
Zip Code:	53703-000	00
Financial Payer:	Medicaid	
Please note that for securit shown.	ty purposes only digits 3, 4, 5 and 6 of ye	our NPI or Provider ID are
To create your secure Prov	vider account:	
1. Go to the Forward	Health Portal at www.forwardhealth.wi.	ov/.
2. Select the "Provide	ers" button.	
3. Select the Logging	in for the first time? link under "Login t	o Secure Site".
4. Enter your Login I Looin ID xx3456	5xxxx	
PIN: 6iWoal	PmhE	
Detailed instructions and 1	-leful hinte en actine un com	
in the Account User's Guid	de. This guide can be found by selecting	the "Account" menu located
at the top of your screen o	nce you have successfully logged in.	and recount menu focuted
Please contact the EDI Ua	In Desk at (866)416-4070 or through the	Contact name on the
ForwardHealth Portal at w	ww.forwardhealth.wi.gov if you have an	y additional questions or need
further assistance.	· · ·	
E 13512 (08/08)		
1-15512 (00/00)		

PIN Letter

3 Set Up An Account

After receiving a PIN letter, users may set up an account on the ForwardHealth Provider Portal. Users will use the Login ID and PIN from the PIN letter to create a user name and password as well as to enter contact and security information.

To add a new organization to a current account, see <u>Section 7 Add Organization</u> for more information.

3.1 Account Types

Three different account types are available through the Portal. Access to certain features or functions on the Portal is determined by the account type assigned to the user. Through these different account types, a high level of security and accountability is maintained.

Administrative accounts – The user who establishes the Portal account with the Login ID and PIN (from the PIN letter) is considered the account administrator and is responsible for managing the Portal account. Administrative accounts are granted complete access to all functions and applications within the Provider section of the Portal and have the ability to add, remove, and manage other account types and their access.

Each service location (certification/provider file) can only have one user designated as an account administrator. However, multiple service locations can be attached to the same account administrator.

- Clerk accounts Administrative accounts can set up clerk accounts with access to any or all of the roles available to the administrative account. If a new role becomes available, that role may be assigned to a clerk account. A clerk account can be added to multiple organizations to allow one clerk access to multiple organizations.
- Clerk administrative accounts Clerk accounts may be granted clerk administrative rights. A clerk administrative account can create new clerk accounts with access to any or all of the roles the clerk administrative account has access to and can delete and manage clerk accounts under their purview.

3.2 Logging in for First Time

1. Once you receive the PIN letter, access the ForwardHealth Portal at <u>https://www.forwardhealth.wi.gov/</u>.



ForwardHealth Portal Page

2. Click Login.

The ForwardHealth Portal Login box will be displayed.

ForwardHealth Portal Login:	
Username Password]
Go!	
 Logging in for the first time? Forgot your password? Account Users Guide 	

ForwardHealth Portal Login

3. Click Logging in for the first time?

The Account Setup page will be displayed.

Account Setup	9
Required fields are indicated with an asterisk(*).	
Instructions:	
If you have received your Personal Identification Number Letter, please enter your Login ID and Personal Identification Number (PIN as they are listed and click on the Setup Account button.)
Once your Login ID and PIN have been validated, you will then need to setup your user account.	
If you don't know your Login ID or PIN, please contact the helpdesk at 1-866-416-4979 to have a new PIN re-issued.	
Please note that Login ID and PIN are case sensitive.	
Login ID*	
Personal Identification Number*	
Setup Account	

Account Setup Page

4. Enter the Login ID and Personal Identification Number listed in your PIN letter.

For security purposes, the PIN letter will contain only 4 digits of the NPI or Medicaid Provider ID reported; however, users should **enter the entire** NPI or Medicaid Provider ID in the Login ID field.

The PIN in the PIN letter can only be used once. After the account has been established, the PIN cannot be used again.

5. Click **Setup Account**.

The **Account Setup** user profile page will be displayed.

 Required fields are indicated with an asterisk (*). Password must contain one uppercase letter, one number and at least 8 characters.
• Password must contain one uppercase letter, one number and at least 8 characters.
User Name*
Password*
Confirm Password*
Contact First Name*
Contact Last Name*
Telephone Number*
E-Mail*
Confirm E-Mail*
First Security Question*
First Answer*
Second Security Question*
Second Answer*
Security and Confidentiality
The User understands that the Portal Access User Account Agreement (hereinafter "Agreement"), effective today, is made by and between the State of Wisconsin Department of Health Services ("DHS") and users who sign up for an account on this website (hereinafter "User").
Please check the box if you have read and agreed to Wisconsin's User Security Agreement.
Submit Cancel M

Account Setup User Profile Page

- 6. Enter information in the fields. It is necessary to **complete all the fields** on this page.
 - The **User Name** must be between 6-20 characters and can only contain letters and numbers. The User Name is not case-sensitive.

Note: The User Name cannot be changed without deactivating the account.

- The **Password** must be between 8-15 characters and must contain three different types of characters such as upper-case letters, lower-case letters, special characters, or numbers. The Password must be unique and cannot contain information from the User Name, Contact First Name, Contact Last Name, or the security answers.
- The **Telephone Number** must include the area code. The number will be autoformatted.
- The security questions must have at least 8 characters and cannot contain special characters (except for spaces).
- The security answers must have at least 3 characters and cannot contain special characters (except for spaces). The security answers allow you to validate your identity and reset your password if necessary. Security answers are case-sensitive.
- 7. Read the **Security and Confidentiality** agreement.
- 8. Click the agreement checkbox.
- 9. Click Submit.

Your secure Provider page will be displayed.



Secure Provider Page

If you receive an error message, correct the error(s) and click **Submit** again.

3.3 Reset Password

- 1. Access the ForwardHealth Portal at <u>https://www.forwardhealth.wi.gov/</u>.
- 2. Click Login.

The ForwardHealth Portal Login box will be displayed.

ForwardHealth Portal Login:	
Username Password	
Go!	
Logging in for the first time?Forgot your password?Account Users Guide	

ForwardHealth Portal Login

3. Click Forgot your password?

The **Reset Password** page will be displayed.

Reset Password	8
Required fields are indicated with an asterisk (*).	
Please enter your user name and click the "Next" button. The security questions	
that you were asked to create on your inital secure visit will appear.	
User Name*	
	<u>N</u> ext

Reset Password Page

- 4. Enter the account **User Name**.
- 5. Click **Next**.

The **Reset Password** page with the security questions created when the account was set up will be displayed.

Reset Password		?
Required fields are indica	ated with an asterisk (*).	
User Name	ADMINISTRATOR01	
Enter your cocurity answ	are in the field provided and click the "Next" butten	
Enter your security answ		
First Security Question	model of first car	
First Answer*		_
Second Security Question	mother's maiden name	
Second Answer*		
	F	
		Next

Reset Password Page with Security Questions

- 6. Enter the answers to the security questions. The answers are case-sensitive.
- 7. Click Next.

The **Reset Password** page with new password fields will be displayed.

Reset Password		3
Required fields are indic	ated with an asterisk (*).	
User Name	ADMINISTRATOR01	
First County Oursting		
First Security Question	model of first car	
First Answer		
Second Security Question	mother's maiden name	
Second Answer		
Enter your password in t	the fields and click the "Submit" button	
December of the sector		
Password must contain	one uppercase letter, one number and at least 8 characters.	
New Decoword*		
New Password		
Confirm Password*		
	<u>S</u> ubmit	ancel

Reset Password Page with New Password Fields

- 8. Enter a **New Password** (twice for confirmation).
- 9. Click Submit.

Your secure Provider page will be displayed.

4 Maintenance

Users may change account information such as contact name, telephone number, or e-mail address through the Maintenance link on the Account Home page.

4.1 Change Account Information

- 1. Access the ForwardHealth Portal at <u>https://www.forwardhealth.wi.gov/</u>.
- 2. Click Login.

The **ForwardHealth Portal Login** box will be displayed.

- 3. Enter your **Username**.
- 4. Enter your **Password**.

Your password is case sensitive. Make certain to enter it exactly.

5. Click **Go!**

The secure Provider page will be displayed.

wisconsin.gov home	state agencies	subject directory	department of	health services			
Forward	Health sconsin serving yo	interCha Provider	ange	-	Welcome	e » August 22, 2	011 1:19 PM <u>Logout</u>
Home Search Provide Max Fee Home Account	ers Enrollment	ciaims Prior Author tion Online Handbo	ization Remi oks Site Map	ttance Advices Certification	Trade File	5 HealthCheck	
You are logged in with NF Financial Payer: Medicaid	PI: 1234567890, Ta: 	xonomy Number: 100	RC0000X, Zip	Code: 53703,			Search
What's New?					Но	me Page	
Providers real-time tracking d access to access to	can improve efficie applications availab of claims and prior a premittance informa o the most current f	ency while reducing o ole on the new Forwa authorization request ation, 835 trading pa ForwardHealth inform	verhead and p ardHealth Porta s and amendm rtner designati ation is now a	aperwork by usi al. Submission ar ents, on-deman ion, and instant vailable.	ing nd id	Update User Accou Customize Home F Demographic Main Electronic Funds Tr	nt ² age tenance ansfer
NEW HIDAA Vorsi	on 5010 and NCPD	P Version D 0 Ungr	ado Informat	ion	Ou	ick Links	
NEW HIPAA Versior NEW HIPAA Versior NEW Register for E New Rate Ref Incentive Pay ForwardHealt	n 5010 Companion G 5010 Testing Pack mail Subscription. form Part 3 Ideas/Re ments Are you h System Generated	Suides and NCPDP Ve cets. ecommendations Req Eligible? d Claim Adjustments	uested.	r Sheet.		Register for E-mail Subscription Provider-specific R. Designate 835 Rec Online Handbooks ForwardHealth Upd Fee Schedules Forms	esources :eiver ates
Messages					2	Become a Provider	- Court
~~~~~ Mapony found ***	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	nun in	Certification Tracki	ng Search

#### Secure Provider Page

6. Click **Account** on the main menu at the top of the page.

The **Account Home** page will be displayed.

#### Account Home

From this page, authorized users can manage their user account(s) for the ForwardHealth Portal. Users may setup, update, and maintain account login credentials, change/reset passwords, assign roles for authorized employees, and read and manage messages pertaining to their account. Click on the link from those provided below to select the action you wish to perform. Consult the Account User Guide for specific instructions on each task.

#### What would you like to do?

- Maintenance
- Messages
- <u>Change Password</u>
- <u>Clerk Maintenance</u>
- Switch Organization
- <u>Add Organization</u>
- <u>Account Users Guide (PDF)</u>

#### Account Home Page

Various account management functions can be performed using the links on the Account Home page.

#### 7. Click Maintenance.

The **Account Maintenance** page will be displayed.

Account Maintenance		?
Required fields are indicate	ed with an asterisk (*).	
User Profile		
User Name	ADMINISTRATOR01	
Contact First Name*	Henry	
Contact Last Name*	Provider	
Telephone Number*	(345)123-6789	
E-Mail*	h.provider@xyz.com	
Confirm E-Mail	h.provider@xyz.com	
First Security Question*	model of first car	
First Answer		
Second Security Question*	mother's maiden name	
Second Answer		
	Submit Cancel Change Passwo	rd

### Account Maintenance Page

If not already created, you will need to create two security questions and corresponding answers prior to submitting your changes. If you forget or lose your password, the security questions will be used to validate your identity and allow you

to reset your password. Be sure to create questions which you will readily know the answer to, but which are not common knowledge.

The security questions must have at least 8 characters and cannot contain special characters (except for spaces).

The security answers must have at least 3 characters and cannot contain special characters (except for spaces). Security answers are case-sensitive.

- 8. Make your desired changes.
- 9. Click **Submit**.

A confirmation message will be displayed.

The following messages were generated: Save was Successful

Confirmation Message

If you receive an error message, correct the error(s) and click **Submit** again.

# 5 Change Password

Users will be prompted to change their Portal account passwords every 60 days; however, through the Change Password function, users can change their password at any time.

**Note:** The Change Password link on the Account Home page serves the same purpose as the Change Password button on the Account Maintenance page.

1. On the Account Home page, click **Change Password**.

The **Change Password** page will be displayed.

Change Password		0
Required fields are indica	ated with an asterisk (*).	
User Name	ADMINISTRATOR01	
Current Password*		
New Password*		
Confirm New Password*		
	Submit	Cancel

Change Password Page

- 2. Enter your **Current Password**.
- 3. Enter your **New Password** (twice for confirmation).

The password must be between 8-15 characters and must contain three different types of characters such as upper-case letters, lower-case letters, special characters, or numbers. The password must be unique and cannot contain information from the user name, contact first name, contact last name, or the security answers.

**Note:** The new password cannot match any of the last 8 passwords.

4. Click **Submit**.

A confirmation message will be displayed.

The following messages were generated:	
Change Password - Save was Successful	

Confirmation Message

If you receive an error message, correct the error(s) and click **Submit** again.

# **6** Clerk Maintenance

If more than one person will be working on the account, you must set up clerk accounts and assign clerks roles for the various functions the clerks will be performing.

1. On the Account Home page, click **Clerk Maintenance**.

The **Clerk Maintenance** page will be displayed.

Clerk Maintenanc	e					?
Required fields are	indicated with an	asterisk (*).				
User Name	Contact First Name	Contact Last Name				
A2CLERK	a2	clerk				
ABCDEEGH001	Abe	Johnson				
ABCDEECH002	Bill	Johnson				
ABCDEFGH002	DIII	Jonnson				
ABCDEFGH003	Carl	Johnson				
ABCDEFGH004	Dick	Johnson				
ABCDEFGH005	Eric	Johnson				
ABCDEEGH006	Fred	Johnson				
ABCDEECH007	Crog	Johnson				
ABCDEFGH007	Greg	Johnson				
ABCDEFGH008	Harv	Johnson				
ABCDEFGH009	Ira	Johnson				
	123	45678910 Nex	t >			
S	Select row above	to update -or- click Ad	ld button below.			
User Name		[ Search	1			
Contact First Name						
Contact Last Name						
Telephone Number						
E-Mail						
Confirm E-Mail						
Password						
Confirm Password						
Password must cont	tain one uppercas	e letter, one number a	nd at least 8 chara	cters.		
					_	
Av	ailable Roles		As	signed Roles		
Prior Authorizatio	n	A				
Eligibility		<				
Trade Clas						
I rade Files						
Claim Submission		>				
835 Designation			1			
655 Designation		>>				
Demographic Mai	nt	T				
Clerk Administ	rator					
			Demonstration of the			L Deserver L M
			Kemove Cjerk	Add Clerk G	Rese	et Password <u>N</u>
					<u>S</u> ubmit	<u>C</u> ancel
5 m						

Clerk Maintenance Page

Through the Clerk Maintenance page, users with administrative and clerk administrative accounts can add or remove clerks, assign clerk roles, and reset a clerk's password. **Note:** Users with clerk administrative accounts may not administer their own accounts or other administrative or clerk administrative accounts.

### 6.1 Add a Clerk

1. Click **Add Clerk** located at the bottom of the page.

A new row serving as a placeholder for the new entry and marked with an A will be displayed, and the new record fields will become active.

Clerk Maintenance	2		3
Required fields are in	ndicated with an a	asterisk (*).	
<u>User Name</u>	Contact First Name	Contact Last Name	
А			
A2CLERK	a2	clerk	
ABCDEFGH001	Abe	Johnson	
ABCDEFGH002	Bill	Johnson	
ABCDEFGH003	Carl	Johnson	
ABCDEFGH004	Dick	Johnson	
ABCDEFGH005	Eric	Johnson	
ABCDEFGH006	Fred	Johnson	
ABCDEFGH007	Greg	Johnson	
ABCDEFGH008	Harv 1004		
	1234	5 6 7 8 9 10 Next >	
	Type dat	ta below for new record.	
User Name*		[ Search ]	
Contact First Name*			
Contact Last Name*			
Telephone Number*			
E-Mail*			
Confirm E-Mail*			
Password*			
Confirm Password*			
Password must cont	ain one uppercase	e letter, one number and at least 8 characters.	~~

Clerk Maintenance Page with Added Row

- If you are adding a new clerk account, complete the following steps:
  - a. Enter a **User Name**.

The User Name must be between 6-20 characters and can only contain letters and numbers. The User Name is not case-sensitive.

- b. Enter the new clerk's name in the **Contact First Name** and **Contact Last Name** fields.
- c. Enter the new clerk's **Telephone Number** (and extension, if applicable).
- d. Enter the new clerk's E-Mail (twice for confirmation).
- e. Enter an initial **Password** for the new clerk (twice for confirmation).

The Password must be between 8-15 characters and must contain three different types of characters such as upper-case letters, lower-case letters, special characters, or numbers. The Password must be unique and cannot

contain information from the user name, contact first name, contact last name, or the security answers.

**Note:** Clerks must change the password set up by the administrative account the first time they log in.

- If you are adding a clerk account that has already been created but needs to be added to a new organization, complete the following steps:
  - a. Click **Search** to the right of the User Name field.

The **User Name Search** box will be displayed.

User Name			[ Close ]
Search			0
Username	First Name	Last Name	
S			search <u>*</u> clea <u>r</u>

User Name Search Box

- b. Enter the clerk account's Username, First Name, or Last Name.
- c. Click Search.

The **Search Results** section will be displayed.

User Name						[Close]
Search						3
Username		First Name	Last Name	SMITH	search <u>*</u>	clea <u>r</u>
Search Res	Sults First Name	Last Name	-			
SHAWN99	Shawn	Smith				

Search Results Section

d. Click the row of the desired clerk account.

The User Name Search box will close and the clerk account information will be auto-populated on the Clerk Maintenance page.

	ر _{و م} ر من	
User Name	SHAWN99 [Search]	2
Contact First Name	Shawn	2
Contact Last Name	Smith	S.
Telephone Number	(123)456-7890	ł
E-Mail	ssmith@mailbox.org	ł
- da mine, son a minera -	المحافظ ومرجع والمحارب والمحافظ	3

Clerk Account Information Auto-populated on Clerk Maintenance Page

2. Add roles to the clerk account.

## 6.2 Add a Role to a Clerk

A role may be added to either a new or existing clerk.

> For a new clerk:

- Click Add Clerk.
- The fields on the page will activate.
- Enter account information in the appropriate fields.
- > For an existing clerk:
  - From the list at the top of the page, click the name of the clerk to whom you wish to assign a new role.
  - The fields on the page will auto-populate with the clerk's information.
- 1. In the **Clerk Roles** section, select a role(s) from the **Available Roles** listed.

To select more than one row, hold down the **Ctrl** key and click all the roles you want to select.

Available Roles	As	signed Roles
835 Designation Demographic Maint HealthCheck Hospice NH Rate Commun EHR Incentive	<ul> <li>Claim Submission</li> <li>EFT</li> <li>Remittance Advice</li> </ul>	ce
	Remove Clerk Add	d Clerk Q Reset Password

Clerk Roles Section with Available Roles

- 2. Click >.
  - To add all Available Roles to the clerk, click >>.

The selected role(s) will be added to the **Assigned Roles** box.

Available Roles	Assigned Roles
Prior Authorization Eligibility Frade Files 335 Designation Demographic Maint HealthCheck	<ul> <li>Claim Submission</li> <li>EFT</li> <li>EHR Incentive</li> <li>Hospice</li> <li>NH Rate Commun</li> <li>Remittance Advice</li> </ul>
	Remove Clerk Add Clerk Q Reset Passwor

Clerk Roles Section with Assigned Roles

3. Click **Submit**.

A confirmation message will be displayed at the top of the page.

The following messages were generated: Clerk Maintenance - Save was Successful

Save was Successful Message

If you receive an error message, correct the error(s) and click **Submit** again.

# 6.3 Remove a Role from a Clerk

1. At the top of the **Clerk Maintenance** page, locate the clerk's **User Name**.

Cle	erk Maintenanc	e		3		
Rec	Required fields are indicated with an asterisk (*).					
	User Name	Contact First Name	Contact Last Name			
	A2CLERK	a2	clerk			
	ABCDEFGH001	Abe	Johnson			
	ABCDEFGH002	Bill	Johnson			
	ABCDEFGH003	Carl	Johnson			
	ABCDEFGH004	Dick	Johnson			
	ABCDEFGH005	Eric	Johnson			
	ABCDEFGH006	Fred	Johnson			
	ABCDEFGH007	Greg	Johnson			
	ABCDEFGH008	Harv	Johnson			
	ABCDEFGH009	Ira	Johnson			
		12345	678910 Next >			
			-			
m~		mm		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		

### Clerk Maintenance Page

2. Click the row containing the desired clerk.

The fields on the page will auto-populate with the clerk's information.

Clerk Maintenan	ce				?
Required fields are	indicated with an	asterisk (*)			
User Name A2CLERK ABCDEFGH003 ABCDEFGH003 ABCDEFGH006 ABCDEFGH006 ABCDEFGH006 ABCDEFGH006 ABCDEFGH005	Contact First Name a2 Abe 2 Bill 3 Carl 4 Dick 5 Eric 5 Fred 7 Greg 3 Harv 9 Ira 1 2 3 4 5	Contact Last clerk Johnson Johnson Johnson Johnson Johnson Johnson Johnson Johnson G 7 8 9 10 .	Name Next >		
User Name	A2CLERK		[ Search	1	
Contact First Name	a2				
Contact Last Name	clerk				
Telephone Number	(111)111-1111				
E-Mail	a@eds.com				
Clerk Roles					
A	vailable Roles			Assigned	d Roles
			< << >	Hospice Eligibility Remittance Advice HealthCheck Trade Files NH Rate Commun	× HI
Clerk Adminis	strator				
			Remove (	Clerk Add Clerk	Q Reset Password N
					Submit Cancel

Clerk Maintenance Page

3. In the **Clerk Roles** section, select a role(s) from the **Assigned Roles** listed.

To select more than one row, hold down the **Ctrl** key and click all the roles you want to remove.

Available Roles	Assigned Roles	
Clad. Administrator	Image: Constraint of the system     Hospice       Hospice     Eligibility       Remittance Advice       HealthCheck       Trade Files       NH Rate Commun	× E
Clerk Administrator		
	Remove Clerk Add Clerk Q	eset Password <u>N</u>

Clerk Roles Section with Assigned Roles

- 4. Click **<**.
  - To remove all of a clerk's assigned roles, click <<.

The selected role(s) will be transferred to the **Available Roles** box.

Available Roles	Assigned Roles
ealthCheck emittance Advice	Hospice       Eligibility       <       Trade Files       >       NH Rate Commun       Express Enrollment       Demographic Maint
Clerk Administrator	

### Clerk Roles Section

5. Click Submit.

A confirmation message will displayed at the top of the page.

The following messages were generated:	
Clerk Maintenance - Save was Successful	

### Confirmation Message

If you receive an error message, correct the error(s) and click **Submit** again.

# 6.4 Assign a Clerk Administrator

A clerk with clerk administrative rights can create accounts for and manage clerks assigned to them.

- 1. Select an existing clerk or create a new clerk account.
- 2. Add the role(s) you want the clerk administrator to manage by clicking the role(s) in the **Available Roles** box.
- 3. Click the **Clerk Administrator** box.

Available Roles		Assigned Roles	
Jemographic Maint HealthCheck Jospice EFT Express Enrollment VH Rate Commun		Remittance Advice Claim Submission Eligibility Prior Authorization Trade Files 835 Designation	
	-		



- 4. Click >.
  - To assign management of all clerk roles to the clerk, click >>.

The selected roles will be added to the clerk administrator's **Assigned Roles**.

5. Click Submit.

A confirmation message will be displayed at the top of the page.



Confirmation Message

# 6.5 Reset a Clerk's Password

1. At the top of the Clerk Maintenance page, click the row containing the clerk's name.

Cle	Clerk Maintenance 0					
Rec	quired fields are i	indicated with an	asterisk (*).			
	User Name	Contact First Name	Contact Last Name			
	A2CLERK	a2	clerk			
	ABC001	Ginny	Johnson			
	ABCDEFGH001	Abe	Johnson			
	ABCDEFGH002	Bill	Johnson			
	ABCDEFGH003	Carl	Johnson			
	ABCDEFGH004	Dick	Johnson			
	ABCDEFGH005	Eric	Johnson			
	ABCDEFGH006	Fred	Johnson			
	ABCDEFGH007	Greg	Johnson			
	ABCDEFGH008	Harv	Johnson			
		12345	678910 Next >			
<u> </u>	man	man	una man man man man man man man man man m	~~~~~		

### Clerk Maintenance Page

The fields on the page will auto-populate with the clerk's information.

Clerk Maintenan	ce						?
Required fields are	indicated with an	asterisk (*).					
User Name A2CLERK ABC001 ABCDEFGH001 ABCDEFGH002 ABCDEFGH004 ABCDEFGH004 ABCDEFGH006 ABCDEFGH007 ABCDEFGH008	Contact First Name a2 Ginny Abe Bill Carl Dick Eric Fred Greg Harv 1 2 3 4 5	Contact Last N clerk Johnson Johnson Johnson Johnson Johnson Johnson Johnson G 7 8 9 10	ame				
	Тур	e changes bel	low.				
User Name	ABC001		[Search]				
Contact First Name	Ginny						
Contact Last Name	Johnson						
Telephone Number	(111)222-3333						
E-Mail	g.johnson@abc.co	om					
Clerk Roles							
A	vailable Roles				Assigned F	Roles	
Eligibility Trade Files Demographic Ma HealthCheck Hospice EFT	int		< << > >>	Claim Submis Prior Authori: 835 Designat	sion zation cion		
Clerk Adminis	strator						
			Remove C	lerk	Add Clerk Q	Rese	et Password <u>N</u>
						<u>S</u> ubmit	Cancel

Clerk Maintenance Page with Auto-populated Information

2. Click Reset Password.

The **Reset Password** page will be displayed.

Reset Password		9
User Name	ABC001	
New Password*		Password must contain one uppercase letter and one number.
Confirm Password*		
		Cancel Reset Password N



3. Enter the **New Password** (twice for confirmation).

The password must be between 8-15 characters and must contain three different types of characters such as upper-case letters, lower-case letters, special characters, or numbers. The password must be unique and cannot contain information from the user name, contact first name, contact last name, or the security answers.

4. Click **Reset Password**.

A confirmation message will be displayed at the top of the page.

```
The following messages were generated:
Password sucessfully reset. Click cancel button to return to Clerk Maintenance.
```

Confirmation Message

**Note:** Clerks must change the password set up by the administrative account the first time they log in.

If you receive an error message, correct the error(s) and click **Reset Password** again.

## 6.6 Delete a Clerk Account

1. At the top of the Clerk Maintenance page, click the row containing the clerk's name.

Clerk Mainten	ance			3
Required fields a	are indicated wit	h an asterisk (*).		
User Name	Contact Fi	st Name Contact Last	Name	
A1CLERKEX	AMPLE Abby G	Johnson 🚽		
A2CLERK	a2 (	clerk		
ABCDEFGH	001 Abe	Johnson		
ABCDEFGH	002 Bill	Johnson		
ABCDEFGH	003 Carl	Johnson		
ABCDEFGH	004 Dick	Johnson		
ABCDEFGH	005 Eric	Johnson		
ABCDEFGH	006 Fred	Johnson		
ABCDEFGH	007 Greg	Johnson		
ABCDEFGH	008 Harv	Johnson		
	13	2345678910	. Next >	
- Andrews	man	mmm	man and a second	

Clerk Maintenance Page

The fields on the page will auto-populate with the clerk's information.

Clerk Maintenan	ce		?
Required fields are	indicated with an ast	terisk (*).	
User Name A1CLERKEXAM A2CLERK ABCDEFGH001 ABCDEFGH002 ABCDEFGH003 ABCDEFGH005 ABCDEFGH006 ABCDEFGH007 ABCDEFGH008	Contact First Name PLE Abby G a2 Abe Bill Carl Dick Eric Fred Greg Harv 1 2 3	Contact Last Name Johnson clerk Johnson Johnson Johnson Johnson Johnson Johnson Johnson Johnson Johnson Johnson	
		Type changes below.	
User Name	A1CLERKEXAMPLE	[ Search ]	
Contact First Name	Abby G		
Contact Last Name	Johnson		
Telephone Number	(123)456-7890		
E-Mail	ajohnson@abc.com		
Clerk Roles			
A	vailable Roles	Assigned Roles	
HealthCheck Hospice NH Rate Commu	n	<     Eligibility       <     Remittance Advice        EHR Incentive       >     Trade Files       >>>     Express Enrollment       Demographic Maint     T	
Clerk Adminis	trator		
		Remove Clerk Add Clerk Q Reset Pass	vord <u>N</u>
			ncel

Clerk Maintenance Page with Auto-populated Information

2. Click **Remove Clerk** to initiate the record deletion.

A dialog box confirming the deletion will be displayed.

Windows I	nternet Explorer
?	Are you sure this is the row you want marked for deletion?
	OK Cancel

Dialog Box

3. Click **OK** to mark the row for deletion.

A *D* will be displayed at the beginning of the row marked for deletion.

	Clerk Maintenance			?
	Required fields are indic	cated with an aste	erisk (*).	
	Uses News	Contract First Name	Operate to Look Name	
	<u>User Name</u>	Contact First Name	Contact Last Name	
	D A1CLERKEXAMPLE	Abby G	Johnson	
	A2CLERK	a2	clerk	
	ABCDEFGH001	Abe	Johnson	
	ABCDEFGH002	Bill	Johnson	
	ABCDEFGH003	Carl	Johnson	
	ABCDEFGH004	Dick	Johnson	
	ABCDEFGH005	Eric	Johnson	
	ABCDEFGH006	Fred	Johnson	
	ABCDEFGH007	Grea	Johnson	
	ABCDEFGH008	Harv	Johnson	
		123	45678910 Next >	
~	······································	man	man	~~

Clerk Maintenance Page with Row Marked for Deletion

4. Click **Submit** to complete the clerk removal action. (The record is not deleted until Submit is clicked.)

A confirmation message will be displayed at the top of the page, and the record will no longer appear in the list of clerks.

The Cler	The following messages were generated: Clerk Maintenance - Save was Successful								
Cl	erk Maintenanc		2						
Re	quired fields are i	asterisk (*).							
_									
	User Name	Contact First Name	Contact Last Name						
	A2CLERK	a2	clerk						
	ABCDEFGH001	Abe	Johnson						
	ABCDEFGH002	Bill	Johnson						
	ABCDEFGH003	Carl	Johnson						
	ABCDEFGH004	Dick	Johnson						
	ABCDEFGH005	Eric	Johnson						
	ABCDEFGH006	Fred	Johnson						
	ABCDEFGH007	Greg	Johnson						
	ABCDEFGH008	Harv	Johnson						
	ABCDEFGH009	Ira	Johnson						
		12345	678910 Next >						
		Turk	s shanges helew						
		Type	e changes below.						

Clerk Maintenance Page with Confirmation Message

If you receive an error message, correct the error(s) and click **Submit** again.

# 7 Add Organization

The Add Organization function allows users with an administrative account to add multiple organizations to an existing Portal account. This feature offers the convenience of managing multiple organizations within one Provider Portal account as an alternative to creating separate Provider Portal accounts for each organization.

After adding an organization to an account, users with an administrative account are authorized to perform all tasks, as defined by the roles available for that organization.

In addition, account users granted the necessary permissions may move from one organization to another through the Switch Organization function without having to log out of the account.

To add an organization to an account:

- 1. Follow the steps in <u>Section 2 Request Portal Access</u> to request a PIN.
- 2. Once you have received the PIN letter, access the ForwardHealth Portal at <u>https://www.forwardhealth.wi.gov/</u>.
- 3. Log in to the account to which you wish to add the new organization.

Your secure Provider page will be displayed.

4. Click **Account** on the main menu at the top of the page.

The **Account Home** page will be displayed.

5. Click Add Organization.

The **Add Organization** page will be displayed.

Add Organization		?								
Required fields are indicated with an asterisk (*).										
Please complete the fields below to add an organization to your account.										
After adding the organization to your portal account, you have the authority to administer the portal activity for that organization.	After adding the organization to your portal account, you have the authority to administer the portal activity for that organization.									
Provider Information										
Personal Identification Number (PIN)*										
Provider ID*										
	<u>S</u> ubmit <u>C</u>	Cancel								

### Add Organization Page

6. Enter the **Personal Identification Number (PIN)** sent to the organization in the PIN letter.

**Note:** Each organization needs to request and receive a PIN in order to be added to an existing Portal account. After receiving a PIN, users should follow the steps for adding an organization to an existing account instead of the steps outlined in Section 3 Set Up An Account.

- 7. Enter the provider's NPI or the Medicaid Provider ID in the **Provider ID** field.
- 8. Click **Submit**.

A confirmation message will be displayed at the top of the page.

The following messages were generated:									
SUCCESS adding PIN 6iWoaPmhE for Provider 9999999999 to your account.									
Add Organization	3								
Required fields are indicated with an asterisk (*).									
Please complete the fields below to add an organization to your account. After adding the organization to your portal account, you have the authority to administer the portal activity for that organization.									
C Provider Information									
Personal Identification Number (PIN)* Provider ID*									
<u>Submit</u>	cel								

Add Organization Page with Confirmation Message

If you receive an error message, correct the error(s) and click **Submit** again.

Once the organization is added to the Portal account, the user will be able to return to the Account Home page to switch to and perform tasks for the new organization's account.

**Note:** If an administrative account has a new organization added to it, clerks set up under the initial organization are not automatically linked to the new organization. Clerk administrative and clerk accounts need to be added to the new organization via the Clerk Maintenance function. See <u>Section 6.1 Add a Clerk</u>.

9. Click **Account** on the main menu at the top of the page to return to the Account Home page.

A dialog box will be displayed.

Windows	Internet Explorer
4	Are you sure you want to navigate away from this page? Warning: Modified data has not been saved. Press OK to continue, or Cancel to stay on the current page.
	OK Cancel

Dialog Box

### 10. Click **OK**.

The **Account Home** page will be displayed.

11. See <u>Section 8 Switch Organization</u> for information about switching to the added organization.

# 8 Switch Organization

Under the Switch Organization function:

- Users with administrative and clerk administrative accounts may assign role(s) to a clerk for a different organization within the same account without logging off.
- Clerks may perform tasks on behalf of multiple organizations within the same account without logging off.
- > Users may change their default login organization.

### 8.1 Switch to Organization

1. On the Account Home page, click Switch Organization.

The **Switch Organization** page will be displayed.

You are logged in with NPI: 1234567890, Taxonomy Number: 100RC0000X, Zip Code: 53703, Financial Search										
Account » Switch Organization										
Switch Organization										
Required fields are indicated with an asterisk (*).										
NPI	Provider ID	Address	City	State	ZIP	<u>ZIP + 4</u>	Taxonomy	Provider Type	Payer	Default Provider ID
1234567890	01234567	92 E 88TH ST STE 300	MADISON	WI	53703		100RC0000X	Internal Medicine	Medicaid	1
0090970097	40046400	21 MAIN ST	LA CROSEE	WI	54601		000U00000X	Independent Lab	Medicaid	
1711711711	39003900	55 E OAK AVE	OSHKOSH	WI	54901		3000P1111X	Home Health/Personal Care Agency	Medicaid	
				Selec	t row a	bove to	update.			
Currently 5	Selected Pr	ovider								
currently c	ciccica i i i	JVIGCI								
Current Pro	vider									
- Newly Selec	cted Provid	ler								
NPI			Provider	ID						
Address			Taxonor	ay						
City			Provider Tyr	)e						
State			Defau		1					
710			Provider	or						
216	-		Pay	ar						
								Swit	ch To S	et As Default

Switch Organization Page

The NPI or Provider ID that you are currently logged in under will be displayed at the top of the page and a list of available organizations for that account will be displayed below.

2. To switch organizations, click on the row containing the desired organization.

The organization's information will auto-populate in the **Currently Selected Provider** and **Newly Selected Provider** sections.

Required fields are indicated with an asterisk (*).       Provider ID       Address       City       State       ZIP       ZIP + 4       Taxonomy       Provider Type       Payer       Default         12345677890       92 E 88TH ST STE 300       MADISON       WI       53703       100RC0000X       Internal Medicine       Medicaid       Image: Constraint of the constra	Switch Or	ganization									3
NPI       Provider ID       Address       City       State       2IP       2IP       4       Taxonomy       Provider Type       Payer       Perver	Required fie	ated with an asterisk (									
Initial and the provider in provider in the pro	NDT	Provider ID	Address	City	State	710	710 + 4	Тахолоту	Provider Type	Paver	Default Provider ID
0090970097       4046400       21 MAIN ST       LA CROSEE       WI       54601       00000000X       Independent Lab       Medicaid         1711711711       39003900       55 E OAK AVE       OSHKOSH       WI       54901       3000P1111X       Home Health/Personal Care Agency       Medicaid         Currently Selected Provider         Current Provider       00909070097         Newly Selected Provider       Frovider ID       40046400         Address       21 MAIN ST       Taxonomy       00000000X         City       LA CROSSE       Provider Type       Independent Lab         Provider ID       Default       Provider ID       Provider ID         ZIP       54601       -       Payer       Medicaid	123456789	01234567	92 E 88TH ST STE 300	MADISON	WI	53703	<u>218 1 1</u>	100RC0000X	Internal Medicine	Medicaid	
1711711711 39003900 55 E OAK AVE       OSHKOSH WI 54901       3000P1111X Home Health/Personal Care Agency Medicaid         Select or w above to update.         Currently Selected Provider         Current Provider 00909070097         Newly Selected Provider       Provider ID 40046400         Address 21 MAIN ST       Taxonemy 000U00000X         City LA CROSSE       Provider Type Independent Lab         Default       Provider ID         ZIP 54601       Payer Medicaid	0090970093	40046400	21 MAIN ST	LA CROSEE	wī	54601		000000000	Independent Lab	Medicaid	
Select row above to update.       Currently Selected Provider       Current Provider 00909070097       Newly Selected Provider       Address 21 MAIN ST       Taxonomy 000U0000X       City LA CROSSE       Provider TD       Default       Provider ID       State WI       ZIP 54601       Switch To       Set As Default	171171171	39003900	55 E OAK AVE	OSHKOSH	WI	54901		3000P1111X	Home Health/Personal Care Agency	Medicaid	
Select row above to update.         Currently Selected Provider         Current Provider 00909070097       Provider ID 40046400         Address 21 MAIN ST       Taxonomy 000U00000X         City LA CROSSE       Provider Type Independent Lab         Default       Default         ZIP 54601       Payer Medicaid		55005500	JUL CONCATE	OSINOSI	***	34501		50001 11111	fione ficanti, recommender en en geney	Pleareata	
Select row above to update.         Currently Selected Provider         Current Provider 00909070097         NPI 00909070097         Provider ID 40046400         Address 21 MAIN ST         Taxonomy 000U00000X         City LA CROSSE         Provider Type Independent Lab         State WI         Provider ID         ZIP 54601         Switch To         Set As Default											
Currently Selected Provider         Current Provider 00909070097         Newly Selected Provider         NPI 00909070097       Provider ID 40046400         Address 21 MAIN ST       Taxonomy 000U00000X         City LA CROSSE       Provider Type Independent Lab         State WI       Default         ZIP 54601       Payer Medicaid         switch To       Set As Default				9	Selec	t row ab	ove to	update.			
Current Provider 00909070097         Newly Selected Provider         NPI 00909070097       Provider ID 40046400         Address 21 MAIN ST       Taxonomy 000U00000X         City LA CROSSE       Provider Type Independent Lab         State WI       Default         Provider ID       Provider ID         ZIP 54601       Payer Medicaid	Currently	Selected Pr	ovider								
Newly Selected Provider         NPI 00909070097       Provider ID 40046400         Address 21 MAIN ST       Taxonomy 000U00000X         City LA CROSSE       Provider Type Independent Lab         State WI       Default         ZIP 54601       Payer Medicaid	Current P	rovider 009	00070007								
Newly Selected Provider         NPI 00909070097       Provider ID 40046400         Address 21 MAIN ST       Taxonomy 000U00000X         City LA CROSSE       Provider Type Independent Lab         State WI       Default         ZIP 54601       Payer Medicaid	Currence	TOvider 005.	19070057								
Newly Selected Provider         NPI       00909070097       Provider ID       40046400         Address       21 MAIN ST       Taxonomy       00000000X         City       LA CROSSE       Provider Type       Independent Lab         State       WI       Default       Provider ID         ZIP       54601       -       Payer       Medicaid											
NPI     00909070097     Provider ID     40046400       Address     21 MAIN ST     Taxonomy     00000000X       City     LA CROSSE     Provider Type     Independent Lab       State     WI     Provider ID     Image: Comparison of the state of th	Newly Sel	ected Provid	ler								
NPI     009090/009/     Provider ID     40040400       Address     21 MAIN ST     Taxonomy     00000000X       City     LA CROSSE     Provider Type     Independent Lab       State     WI     Default       ZIP     54601     -     Payer       Medicaid     Switch To     Set As Default	NDT	000007000	-	Dravidar I	- 40	046400					
Address     21 MAIN ST     Taxonomy     000U00000X       City     LA CROSSE     Provider Type     Independent Lab       State     WI     Default       ZIP     54601     Payer       Medicaid     Switch To     Set As Default	NP1	0090907009	/	Provider 1	J 40	040400					
City     LA CROSSE     Provider Type     Independent Lab       State     WI     Default Provider ID     Image: City of the state of t	Address	21 MAIN ST		Taxonom	y 00	00000000	0X				
State     WI     Default Provider ID       ZIP     54601     -       Payer     Medicaid   Switch To Set As Default	City	LA CROSSE		Provider Typ	e In	depende	ent Lab				
ZIP 54601 - Payer Medicaid	State	WI		Defaul Provider If	lt 🗆						
Switch To Set As Default	ZIP	54601 -		Paye	ar Me	edicaid					
									Suitz	h To S	at As Default
											et As Delading

Switch Organization Page with Auto-populated Information

3. If you wish to switch to the selected organization's account, click **Switch To**.

A dialog box will appear to confirm your selection.

Windows Internet Explorer	
Would you like to switch t	o the Newly Selected Provider?
	OK Cancel



4. Click **OK**.

You will be returned to the secure Provider page. The NPI you switched to will be displayed at the top of the page.

You are logged in with NPI: 0090970097, Taxonomy Number: 000U00000X, Zip Code: 54601, Financial Payer: Medicaid

Log In Information

# 8.2 Set As Default Login Organization

1. To make an organization your default login user, on the Switch Organization page, click the row of the desired organization.

The organization's information will auto-populate in the **Currently Selected Provider** and **Newly Selected Provider** sections.

Switch Or	ganization										?
Required fie	elds are indic	ated with an aster	risk (*).								
NPI	Provider ID	Address	City	State	ZIP	<u>ZIP + 4</u>	Taxonomy	Provider Type	Payer	Default Provider ID	
139671396	7 38003800	1 SHARP RD	WATERFORD	WI	53185		20000000X	Physician Group	Medicaid	1	
160981609	3 24002400	24 PLINE RD	MADISON	WI	53719		200R00000X	Physician	Medicaid		
			5	Select	row abo	ove to u	ıpdate.				
⊂ Currently	Selected Pr	rovider									
Current	rovidor 160	0916009									
Current	Towner 100	9810098									
Newly Se	lected Provi	der									
NPI	1609816098	}	Provid	der ID	240024	100					
Address	24 PLINE RD		Taxo	nomy	200R00	0000X					
City	MADISON		Provider	Type	Physici	an					
State	State WI		D Provid	efault der ID							
ZIP	53719 -			Payer	Medica	id					
									s	Switch To Set As Def	ault

Switch Organization Page with Auto-populated Information

2. Click **Set As Default**.

The Switch Organization page will refresh and check marks will be displayed in the **Default Provider ID** boxes for the selected organization.

Switch Or	ganization										?
Required fie	elds are indic	ated with an ast	erisk (*).								
NPI	Provider ID	Address	City	State	ZIP	<u>ZIP + 4</u>	Taxonomy	Provider Type	<u>Payer</u>	Default Provider ID	
1609816098	24002400	24 PLINE RD	MADISON	WI	53185		200000000X	Physician Group Physician	Medicaid	<b>V</b>	
Select row above to update.											
Currently Selected Provider											
Current P	rovider 160	9816098									
- Newly Sel	lected Provid	der									
NPI	1609816098		Provi	der ID	240024	00					
Address	24 PLINE RD	)	Taxo	nomy	200R00	000X					
City	MADISON		Provider	Туре	Physici	an					
State	IW		D Provi	efault der ID							
ZIP	53719 -			Payer	Medica	id					
									S	witch To	Set As Default

### Switch Organization Page

The selected organization will automatically be the user each time you log into your account.

# 9 Messages

The **Messages** page acts as a one-way message center for providers to receive electronic notifications and provider publications from ForwardHealth. The most recent messages are also displayed on your secure Provider page.

Messages are sent to your account by ForwardHealth and are available from the date sent to the expiration date. A message is removed from the Messages page if the user manually removes it or if it is automatically removed on the expiration date set by ForwardHealth.

1. On the Account Home page, click **Messages.** 

Messages ? Date Sent Expiration Date Category Subject Remove Message Claims submitted to ForwardHealth for services identified by 10/06/2010 10/06/2011 Notification Test 2 services identified by unlisted (NOC) proc This is the message for testing test case 44614 to verify changes made to Alert This is for test cas secure This is for test case 12/29/2010 12/29/2011 Introduction Testing more web mes 44845 Testing web user name 12/29/2010 12/29/2011 Alert Another web message send to option You are receiving this message because you are listed as the Electronic Funds Tr Alert ForwardHealth Electr 08/04/2011 09/03/2011 You are receiving this message because you 08/10/2011 09/09/2011 Alert ForwardHealth Electr are listed as the Electronic Funds Tr You are receiving this message because you 08/10/2011 09/09/2011 Alert ForwardHealth Electr are listed as the Electronic Funds Tr <u>R</u>emove

The **Messages** page will be displayed.

### Messages Page

2. Click the desired message.

If there is only one message, the message and Message section will be displayed automatically.

The **Message** section will be displayed at the bottom of the page.

$\sim\sim\sim\sim\sim\sim\sim$	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Electronic Funds Tr	server se	-v~	m			
Alert Fo	orwardHealth Electr	You are receiving this message because you are listed as the Electronic Funds Tr	08/10/2011 09/09,	/2011 🔲				
						<u>R</u> emove		
·								
Message						3		
Category	Alert							
Subject	ForwardHealth Ele Changed	ctronic Funds Transfer:	Notice of EFT Acc	ount Infor	mation			
	You are receiving t Transfer (EFT) cor Provider:	this message because y stact and/or the Portal	ou are listed as the Administrator for th	e Electron 1e followin	ic Funds g ForwardHealth			
	Provider ID/NPI: Taxonomy Number Zip Code: Financial Payer: TX	1234567890 : 100RC0000X(if applic: 53703 (IX	able)					
	This message is to this Provider's EFT	inform you that key EF . EFT Account informati	T Account informa on may include:	tion has b	een changed for			
	<ul> <li>Financial Ins</li> <li>Account nur</li> <li>Account typ</li> <li>Account hol</li> </ul>	titution information nber e der name						
Message	To view the specif log on to your sect this provider. The they originated.	ic changes made to you ure ForwardHealth Porta EFT History will describe	Ir provider's EFT Ad Account and revi the change(s) th	ccount inf iew the EF at were m	ormation, please T History for ade and where			
	Some EFT Account directly from the b of these changes I authorized change change(s) made.	: information may be ch ank/financial institution yy your bank; however, s, please contact your	anged as a result o You should already if you have not be bank/financial insti	of informat y have be een made tution to v	tion received on made aware aware of bank- verify any			
	Some EFT Account information may be changed by Portal Administrators or Authorized Portal Users (Authorized PortalUsers are portal users who have been granted access to the "EFT role" by the Portal Administrator).Portal Administrators can control access to all EFT information by granting/restricting access to the "EFT role" on the Portal. If you believe the EFT Account information was incorrectly changed by a Portal user, please work with your Portal Administrator to correct the information and rectify any inappropriate access by users.							
	If you have any questions regarding this message, please contact Provider Services at (800) 947-9627.							
	Sincerely, ForwardHealth							
Date Sent	08/10/2011							
Expiration Date	09/09/2011							

### Message Section

- 3. To delete a message:
  - a. Click the **Remove** box next to the message.

Messages							?
Category	Subject	Message	<u>Date</u> <u>Sent</u>	Expiration Date	Remove		
Notification	Test 2	Claims submitted to ForwardHealth for services identified by unlisted (NOC) proc	10/06/2010	10/06/2011			
Alert	This is for test cas	This is the message for testing test case 44614 to verify changes made to secure	10/22/2010	10/22/2011			
Introduction	Testing more web mes	This is for test case 44845	12/29/2010	12/29/2011			
Alert	Another web message	Testing web user name send to option	12/29/2010	12/29/2011			
Alert	ForwardHealth Electr	You are receiving this message because you are listed as the Electronic Funds Tr	08/04/2011	09/03/2011			
Alert	ForwardHealth Electr	You are receiving this message because you are listed as the Electronic Funds Tr	08/10/2011	09/09/2011			
Alert	ForwardHealth Electr	You are receiving this message because you are listed as the Electronic Funds Tr	08/10/2011	09/09/2011			
						<u>R</u> emo	ve

Messages Page

b. Click **Remove**.

The message will be deleted from the Messages page.