

ProviderOne provider user manual

Viewing managed care roster and RA information

2022



Disclaimer

A contract known as the Core Provider Agreement (CPA), governs the relationship between HCA and Washington Apple Health providers. The CPA terms and conditions incorporate federal laws, rules and regulations, state law, HCA rules and regulations, and HCA program policies and billing instructions, including this user manual.

Providers must submit a claim in accordance with the HCA rules, policies, and billing instructions in effect at the time they provided the service. Every effort has been made to ensure this manual's accuracy. However, in the unlikely event of an actual or apparent conflict between this document and a department rule, the department rule controls.



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Viewing the enrollment roster and RA information

Contracted managed care plans can access enrollment rosters and client details, capitation reports and payment information, and download an RA (remittance advice and encounter transaction results report) from the ProviderOne portal.

The following ProviderOne topics and tasks are covered in this manual:

- Viewing the enrollment roster and transaction details
- Viewing the managed care capitation report and payment details
- Downloading an RA

Viewing the enrollment roster and client enrollment details

Accessing the 834 transaction list (enrollment roster)

Using the EXT Provider Managed Care Only profile:

• Click the **View Enrollment Roster** link under the Managed Care area on the provider portal.

Managed Care	*
View Enrollment Roster	
View ETRR	

- ProviderOne displays the 834 Transaction List.
- In the Filter By dropdown, choose **Report Start Date** and enter the span of dates for the timeframe you want to view.
- Click Go.

00	lose							
ш	834 Transaction	List						
Filt	er By : Report Start D	ate 💙 03/01/2021	03/31/2021	And	•	And Action	✓ And Quarter	♥ ⊙ Go

- Only transactions for clients enrolled in your organization can be viewed in the transaction list.
- Use list filters and sort icons to narrow results.

Viewing the 834 transaction details

From the 834 transaction list page:

• Click the arrow hyperlink in the first column for the transaction you wish to view.

III 834 Transaction List												
Filter By	Report Start Date	• 03/01/2021	03/31/2021	And	And	Action	← And Quarter	♥ (O Go				Save Filter Y My Filters
	Transaction Set ID	Transaction #	Payer ID	Payer Name	Health Plan ID	Action	File Effective Date	Report Start Date	Report End Date	Member ID	Maintenance Type Code	Maintenance Reason Code
► 0.		0.	9	Community Health Plan of Washington	1	VERIFY	03/01/2021	03/01/2021	03/31/2021		030-Audit	XN-Notification Only
▶ 0 ¹		D	9	Community Health Plan of Washington	1	VERIFY	03/01/2021	03/01/2021	03/31/2021	D. San St.	030-Audit	XN-Notification Only
• 0.		D	9	Community Health Plan of Washington	1	VERIFY	03/01/2021	03/01/2021	03/31/2021	1.10.10	030-Audit	XN-Notification Only
. 0.		D	9	Community Health Plan of Washington	1	VERIFY	03/01/2021	03/01/2021	03/31/2021	IN BOOK	030-Audit	XN-Notification Only
۰ 0.	533365	0	9	Community Health Plan of Washington	12000201	VERIFY	03/01/2021	03/01/2021	03/31/2021	1200020	030-Audit	XN-Notification Only
• 0	105255	D	9	Community Health Plan of Washington	10.052.00	VERIFY	03/01/2021	03/01/2021	03/31/2021	0.65836	030-Audit	XN-Notification Only
• 0	18375	D	9	Community Health Plan of Washington	15783757	VERIFY	03/01/2021	03/01/2021	03/31/2021	1674579	030-Audit	XN-Notification Only
► 0.	2628	D	9	Community Health Plan of Washington	11 263231	VERIFY	03/01/2021	03/01/2021	03/31/2021	1/26234	030-Audit	XN-Notification Only
• 0.	2500	0	9	Community Health Plan of Washington	1	VERIFY	03/01/2021	03/01/2021	03/31/2021	14029.00	030-Audit	XN-Notification Only
. 0.	1	0	9	Community Health Plan of Washington		VERIFY	03/01/2021	03/01/2021	03/31/2021	0.0.72.20	030-Audit	XN-Notification Only



• ProviderOne displays the 843 Transaction Detail page.

\Rightarrow	Provider Portal > 834 Transaction List > 834 Transaction Detail	
Trans Healt	actionSet ID : h Plan ID/Name : // Community Health Plan of Washington	Transaction #: Member Id Name:
00	ose	Show -
	834 Transaction Detail	^
	Maintenance Type: 030-Audit	Maintenance Reason: XN-Notification Only
	Maintenance Effective Date: 03/01/2021	
	Health Coverage Start Date: 01/01/2019	Health Coverage End Date:
	Medicaid Eligibility Begin Date:	Medicaid Eligibility End Date:
	Premium Rate Amount: \$616.56	Insurance Line: HMO
	Plan Coverage Description	*
	Rate Cohort Combination: 20775	
	Premium Determinant RAC: 1201-Alternative Benefit Plan MAGI adult medicaid; income =<1339	6 Medicare Status: 0-Not Dual, Not a Medicare Beneficiary
	Living Arrangement:	Institutional Status:
	Pregnancy Due Date[Enrollment Form]:	Self Assesment:
	Special Needs Indicator:	Surgery Date:
	Recertification Date: 12/31/2021	PRR Indicator: NO
	Client Exception Indicator:	Expected Delivery Date[ACES]:
	Transaction Reason: IT - Internal Transfer	
=	Member Other Demographics	*
	SSN:	Gender: M-Male
	Race or Ethinicity:	Citizen Status:
	Language:	Head of Household Name:
	Birth Date:	Insured Individual Death Date:
	Confidentiality Code: U-Unrestricted Access	Health Home: N-No

• The header area identifies the current transaction being viewed.



From the 834 Transaction Detail page:

• Use the Show menu to view the following detail pages:



• When finished viewing the detail pages, return to the 834 Transaction List by clicking the 834 Transaction List hyperlink located in the path in the header area.

A > Provider Portal > 834 Transaction List > 834 Transaction Detail	
Transaction Set ID :	Transaction #:
Health Plan ID/Name : Community Health Plan of Washington	Member Id/Name:



Viewing 834 member identification number

• Click the **834 Member Identification Number** option from the Show menu dropdown:



• ProviderOne displays the 834 Member Identification Number page.

ansaction Set ID : / Community Health Plan of Washington	Transaction #: Member Id/Name:
Close	Show
III Member Identification Number	*
Reference Id Qualifier	Reference Id Qualification
A 7	A 7
23-Client Number	
3H-Case Number	
DX-Department/Agency Number	
ZZ-Mutually Defined	2.2.2.2.2.2.2.0

• To return to the 834 Transaction List, click the 834 Transaction List hyperlink located in the path in the header area.



• To close the 834 Member Identification Number page, and return to the previous page in the path, click the **Close** button.

1	Close	۱

• To view additional transaction detail pages, open the Show menu dropdown and select from the available options.





Viewing 834 transaction address communication detail

• Click the **834 Transaction Address Communication Detail** option from the Show menu dropdown:



ProviderOne displays the 834 Transaction Address Communication details page:

ansa Palth	ctionSet ID :	Transaction #: Member Id/Name	
) Clos	se		Sho
	Residential Address		
	Address Line 1:	Address Line 2:	
	City Name:	State or Provience Code: WA-Washington	
	Postal Code:	Country Code: US-United States	
	Mailing Address		
	Address Line 1:	Address Line 2:	
	City Name:	State or Provience Code: WA-Washington	
	Postal Code:	Country Code: US-United States	
	Communication		
	Communication Qualifier: TF-Telephone	Communication Number:	



• To return to the 834 Transaction List, click the 834 Transaction List hyperlink located in the path in the header area.

- ∰ > Provider Portal > 834 Transaction List > 834 Transaction Detail > 834 Address a	and Communication
Transaction Set ID :	Transaction #:
Health Plan ID/Name : O Community Health Plan of Washington	Member Id/Name:

• To close the 834 Address and Communication page, and return to the previous page in the path, click the **Close** button.



• To view additional transaction detail pages, open the Show menu dropdown and select from the available options.



Viewing 834 transaction cob list

• Click the **834 Transaction COB List** option from the Show menu dropdown:





• ProviderOne displays the 834 Transaction COB List:

ırer Identifi	Identifier P	Policy #	Account Suffix	Group #	Benefits Start Dat
irer Identifi	ldentifier		Policy #	Policy # Account Suffix	Policy # Account Suffix Group #

• To return to the 834 Transaction List, click the 834 Transaction List hyperlink located in the path in the header area.



• To close the 834 Transaction COB List and return to the previous page in the path, click the close button.



 To view additional transaction detail pages, open the Show menu dropdown and select from the available options.





Viewing 834 transaction incorrect information list

 Click the 834 Transaction Incorrect Information option from the Show menu dropdown:



• ProviderOne displays the 834 Transaction Incorrect Information page:

$ \gg 1 $	Provider Portal > 834 Transaction List > 8	834 Transaction Detail > 834 Address and Communic	cation > 834 Transaction COB List > Transaction Incorrect Information	
Trans Health	action Set ID :	r Health Plan of Washington N	ransaction #: lember Id/Name: :	
C C Id	ose			Show -
	Incorrect Name			^
	First Name:	Middle Name:	Last Name:	
	Prefix:	Suffix:	SSN:	
	Incorrect Demographics			^
	Date of Birth:	Gender:		

• To return to the 834 Transaction List, click the 834 Transaction List hyperlink located in the path in the header area.

A > Provider Portal > 834 Transaction List > 834 Transaction Detail > 834 Address a	nd Communication > 834 Transaction COB List > Transaction Incorrect Information
Transaction Set ID : 200 Call State	Transaction #:
Health Plan ID/Name : 10 / Community Health Plan of Washington	Member Id/Name:

• To close the 834 Transaction Incorrect Information page and return to the previous page in the path, click the **Close** button.



• To view additional transaction detail pages, open the Show menu dropdown and select from the available options.



ĺ	MC 834 Member Identification Number
	MC 834Transaction Address Communication Detail
	MC 834Transaction COB List
	MC 834Transaction Incorrect Information
	MC 834Transaction Provider Information

Viewing 834 Transaction Provider Information

• Click the **834 Transaction Provider Information** option from the Show menu dropdown:



• ProviderOne displays the 834 Provider Identification Number:

Transaction Set ID :		Transaction #:	
Health Plan ID/Name : / Com	munity Health Plan of Washington	Member Id/Name:	SAT NEW YORK
Close			Show -
Provider Identification Nu	nber		^
Assigned #	Provider Identifer Code	Provider Name	Provider Telephone
△▼	A 7	A 7	A V
	N	D Records Found !	

• To return to the 834 Transaction List, click the 834 Transaction List hyperlink located in the path in the header area.

👫 > Provider Portal > 834 Transaction List > 834 Transaction Detail > 834 Address a	and Communication $>$ 834 Transaction COB List $>$ Transaction Incorrect Information $>$ 834 Provider Information
Transaction Set ID :	Transaction #:
Health Plan ID/Name : / Community Health Plan of Washington	Member Id/Name:

• To close the 834 Provider Information page and return to the previous page in the path, click the **Close** button.





• To view additional transaction detail pages, open the Show menu dropdown and select from the available options.



For more detail on 834 transaction information, visit the 834 Companion Guide on HCA's HIPAA webpage.



Viewing the Managed Care capitation

report

The capitation report is used by managed care organizations to view managed care payment summary information. ProviderOne displays the capitation report using the Payment Summary list and Payment Summary Detail pages.

Accessing the payment summary list

• Using the EXT Provider Managed Care Only user profile, from the provider portal, click the View Capitation Payment link.

Payments
View Payment
View Capitation Payment

• ProviderOne displays the Payment Summary List.

Close										
Payment Summar	y List									
itter By:	•		And	(O Go					1	Save Filter
Consolidated Invoice #	Premium Rec	ceiver Id	Premium Receiver Name	Payment Method	Check/EFT Trace #	Check/EFT Date	Total Premium Amount	Coverage Start Date	Coverage End Date	Payment Process Date
139221	13	COM	IMUNITY HEALTH PLAN OF WASHINGTON	ACH-Automated Clearing House (ACH)	17 50 1	02/06/2014	\$2,876,885.37	03/01/2009	02/28/2014	02/06/2014
139238	10.0000	COM	MUNITY HEALTH PLAN OF WASHINGTON	ACH-Automated Clearing House (ACH)	1.000 350.00	02/05/2014	\$0.00	02/01/2013	09/01/2013	02/05/2014
139260	1. Carlos A.	COM	MUNITY HEALTH PLAN OF WASHINGTON	ACH-Automated Clearing House (ACH)	19822030000	02/06/2014	\$622,190.51	01/01/2013	02/28/2014	02/06/2014
146166	LTR-SAV	COM	MUNITY HEALTH PLAN OF WASHINGTON	ACH-Automated Clearing House (ACH)	A PARAMON	04/03/2014	\$554,280.82	05/01/2012	04/30/2014	04/03/2014
146961	1000000	COM	MUNITY HEALTH PLAN OF WASHINGTON	ACH-Automated Clearing House (ACH)	1999/101023	04/10/2014	\$2,372,995.06	12/01/2012	04/30/2014	04/10/2014
146996	22522220	COM	MUNITY HEALTH PLAN OF WASHINGTON	ACH-Automated Clearing House (ACH)	024522/03623	04/09/2014	\$0.00	02/01/2013	12/01/2013	04/09/2014
147049	152437707	COM	MUNITY HEALTH PLAN OF WASHINGTON	ACH-Automated Clearing House (ACH)	State State	04/10/2014	\$551,759.41	01/01/2013	04/30/2014	04/10/2014
150231	1.167317	COM	MUNITY HEALTH PLAN OF WASHINGTON	ACH-Automated Clearing House (ACH)	10-60-61 222	05/08/2014	\$37,335,915.10	10/01/2013	05/31/2014	05/08/2014
150282	PRODUCT	COM	IMUNITY HEALTH PLAN OF WASHINGTON	ACH-Automated Clearing House (ACH)	101255182,4043	05/08/2014	\$1,246,338.42	04/01/2014	05/31/2014	05/08/2014
150324		COM	MUNITY HEALTH PLAN OF WASHINGTON	ACH-Automated Clearing House (ACH)	3117725-AV44	05/08/2014	\$33,554,674.48	04/01/2014	05/31/2014	05/08/2014

- Use the filter and sort features to narrow the list of records.
- Only records pertaining to your MCO or practice appear in this list.





Viewing payment summary details

• From the Payment Summary List, click the hyperlink located in the Consolidated Invoice # column.

> Provider Portal > Payment	Summary List			
Close				
Bayment Summary I	List			
Filter By:	¥	And	¥]	@ Go
Consolidated Invoice #	Premium Receiver Id	Premium Re	eceiver Name	Payment Method
△ ▼	A ¥		A W	× ¥
1139221	8 28 8	COMMUNITY HEALTH PLAN	N OF WASHINGTON	ACH-Automated Clearing House (ACH
1139238	7.0357594CL	COMMUNITY HEALTH PLAN	N OF WASHINGTON	ACH-Automated Clearing House (ACH

ProviderOne displays the Payment Summary Detail page for the selected record.

# > Provider Portal > Payment Summar	ry List > Payment Sum	mary Detail								
Consolidated Invoice #: 1150231										
O Close										
III Payment Summary										^
l Check Issu Pa	Premium Receiver Id: Master Account #: Ie/EFT Effective Date: Coverage Start Date: syment Process Date: Check/EFT Trace #:	Federal Taxpayers 05/08/2014 10/01/2013 05/08/2014 018705!			Premium Receir Master Total Premium Payr Coverage Clin	ver Name: CO r Policy #: ment Amt: \$37 End Date: 05/3 ent count: 604	MMUNITY HEALTH PLAN OF W 335,915.10 31/2014 3	ASHINGTON		
Individual Level Remittance	e List									^
Filter By:	¥	And	v		O Go					🗎 Save Filter 🔍 My Filters 🕶
Transaction Assigned #	Health P	Ian/Policy Reference	834 Ref#/Patient A/C#	ProviderOne	Client Id	Client Name	Coverage Start Date	Coverage End Date	Premium Payment Amount	Premium Billed Amount
					No Record	ds Found !				
III Organization Level Remitt	ance List									^
Filter By:	•	O Go								🗎 Save Filter 🔻 My Filters 🕶
Transaction Assigned #	Health	Plan/Policy Reference	Transaction Typ	e	Transaction	Reason	Coverage Start Date	Coverage End Date	Premium Payment Amount	Premium Billed Amount
 1 	0.00		20-Organization Level Adjustments		OT-Other Adjustmen	t	04/01/2014	04/01/2014	\$37,543,958.76	\$0.00
View Page: 1 O Go	Page Count Save	ToXLS		View	ving Page: 1				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	First Y Prev > Next > Last

- Contents of the Individual Level Remittance List and the Organizational Remittance List depend on the type of payment record selected.
- To close the Payment Summary page and return to the Payment Summary List, click the close button.





Viewing the individual level remittance detail page

• From the Payment Summary Detail page, all the details of a specific transaction are displayed in the Individual Level Remittance List columns.

itter By:	 ✓ And 	*	Q 00					🗎 Save Filter 🛛 🕈 My Filters -
Transaction Assigned ₽ △ ♥	Health Plan/Policy Reference	834 Ref#/Patient A/C#	ProviderOne Client Id	Client Name	Coverage Start Date	Coverage End Date	Premium Payment Amount	Premium Billed Amount
1	105010110	13. 19		2.000	02/01/2022	02/25/2022	\$64.77	50.00
2	105010110	12.532.352)2538)	7.53576534	03/01/2022	03/31/2022	\$64.77	50.00
3	105010110	67762726 AC1	100.02	0002k08968	03/01/2022	03/31/2022	\$28.31	\$9.00
4	105010110	115-30XW	12-64	1-16653388	03/01/2022	03/31/2022	514.49	50.00
5	105010110	103332208	1666.27	E13320023	03/01/2022	03/31/2022	\$37.58	50.00
6	105010110	04535008	1983S	SKEENER	02/01/2022	02/28/2022	\$184.39	\$0.00
7	105010110	122.007.002	122,897	2344702255	02/01/2022	92/28/2922	\$342.21	50.00
8	105010110	0.5656720	0.525	25256/202	03/01/2022	03/31/2022	\$64.77	\$9.00
9	105010110	14(27Q)(89)(4)	11/201	1.501-1.05	03/01/2022	03/31/2022	564.24	50.00
10	105010110	1.0.000.000	1.	10.000 0.24 0.000	03/01/2022	03/31/2022	\$73.09	50.00

• To return to the Payment Summary Detail page, click the close button.



• Use the path to navigate to the provider portal, the Payment Summary List, or other pages shown in the path.

```
Provider Portal > Payment Summary List > Payment Summary Detail
Consolidated Invoice # : 500433616
```

Viewing the organization level remittance detail page

 From the Payment Summary Detail page, all the details of a specific transaction are displayed in the Organization Level Remittance list columns.

Filter By:	v 00						Save Filter TMy Filters •
Transaction Assigned #	Health Plan Policy Reference	Transaction Type	Transaction Reason	Coverage Start Date	Coverage End Date	Premium Payment Amount	Premium Billed Amount
• 1	105010101	20-Organization Level Adjustments	OT-Other Adjustment	04/01/2014	04/01/2014	\$37,543,958,76	50.00

• To return to the Payment Summary Detail page, click the close button.



• Use the path to navigate to the provider portal, the Payment Summary List, or other pages shown in the path.

```
    Provider Portal > Payment Summary List > Payment Summary Detail
Consolidated Invoice #: 500433616
```

For more detail on 820 transaction information, visit the 820 Companion Guide on HCA's HIPAA webpage.



Downloading HIPAA 835 files

Accessing the HIPAA 835 file using the View ETRR link

Using the EXT Provider Managed Care Only user profile, from the provider portal, click the **View ETRR** link.

Managed Care	*
View Enrollment Roster	
View ETRR	

• ProviderOne displays the RA Payment List.

III RA/ETRR Payment Li	st								
filter By :	• [And	•	O Go					
RA/ETRR Number	Check Number	Check/ETRR Date	RA Date	Claim Count	Charges	Payment Amount	Adjusted Amount		Download
506359121		03/31/2022	03/31/2022	126	\$0.00	\$0.00	\$0.00 H	ipaa.	25.00
606357477		03/24/2022	03/24/2022	4	\$0.00	\$0.00	\$0.00 H	ipaa I	183 S
06357458		03/24/2022	03/24/2022	5	\$0.00	\$0.00	\$0.00 H	ipaa -	
506357446		03/24/2022	03/24/2022	3	\$0.00	\$0.00	\$0.00 H	ipaa.	
606357445		03/24/2022	03/24/2022	222	\$0.00	\$0.00	\$0.00 H	ipaa.	56262
506355427		03/18/2022	03/18/2022	2	\$0.00	\$0.00	\$0.00 H	(paa	
506355413		03/17/2022	03/17/2022	328	\$0.00	\$0.00	\$0.00 H	paa.	63.3
506353705		03/10/2022	03/10/2022	344	\$0.00	\$0.00	\$0.00 H	ipaa.	
506353699		03/10/2022	03/10/2022	1	\$0.00	\$0.00	\$0.00 H	ipaa.	16.23
506351976		03/03/2022	03/03/2022	85	\$0.00	\$0.00	\$0.00 H	ipaa.	

- The RA Payment List is used to download 835 HIPAA files.
- Only 835 HIPAA files for your managed care organization are viewable.
- Use the filter and sort features to refine your results.



Downloading and viewing the HIPAA 835 file

- Click the link in the Download column represented by the "HIPAA . . . " file name.
- Save the file to your local drive.

RA/ETRR Payment List								
RA/ETRR Number	Check Number	Check/ETRR Date	RA Date	Claim Count	Charges	Payment Amount	Adjusted Amount	Download
506359121		03/31/2022	03/31/2022	126	\$0.00	\$0.00	\$0.00 H	paa
06357477		03/24/2022	03/24/2022	4	\$0.00	\$0.00	\$0.00 H	paal
06357458		03/24/2022	03/24/2022	5	\$0.00	\$0.00	\$0.00 H	paa
506357446		03/24/2022	03/24/2022	3	\$0.00	\$0.00	\$0.00 H	paa
06357445		03/24/2022	03/24/2022	222	\$0.00	\$0.00	\$0.00 H	pan
06355427		03/18/2022	03/18/2022	2	\$0.00	\$0.00	\$0.00 H	paa
06355413		03/17/2022	03/17/2022	328	\$0.00	\$0.00	\$0.00 H	paa
06353705		03/10/2022	03/10/2022	344	\$0.00	\$0.00	\$0.00 H	paa
506353699		03/10/2022	03/10/2022	1	\$0.00	\$0.00	\$0.00 H	paa
506351976		03/03/2022	03/03/2022	85	\$0.00	\$0.00	\$0.00 H	paa

Please note. You must use the hyperlink in the Download column to access your 835 HIPAA files.

Viewing the HIPAA 835 file

• To view the downloaded file, you need to open it with Microsoft WordPad or a word processor with the ability to display documents formatted in Unicode UTF-8.



For more detail on 835 transaction information, visit the 835 Companion Guide on HCA's HIPAA webpage.