Self-Service Quick Reference Guide

Online Tools for WellCare Providers

Participating Providers
Table of Contents

Secure Web Portal ................................................................. 4
Online Provider Resources .................................................... 8
PaySpan® .............................................................................. 10
Chat (Real-Time Support) .................................................... 14
Interactive Voice Response (IVR) .......................................... 16
Contacting Customer Service ............................................. 18
Tools For A Better Provider Experience

This Self-Service Resource Guide helps providers do business with WellCare. We want your interactions with us to be as easy, convenient and efficient as possible. Giving providers and their staff self-service tools and access is a way for us to accomplish this goal. We hope this guide will help you get to know the online resources at your fingertips.
Register for the Secure Web Portal

Registering for the secure Web Portal gives providers and their staff access to improved search tools, claims and authorization status, member information, and convenient ways to connect with us.

Below are some of the helpful functions available through the Provider Portal:

- **Eligibility and Benefits** – Providers can submit and view authorization requests, claims and eligibility.

- **View Member Information** – Patient profiles give providers access to medical records, demographic information, care gaps, health care conditions, pharmacy utilization and benefits.

- **Contact Us** – Resolve issues quickly by communicating with customer service agents through secure messages and online chat.

- **Access Useful Guides** – View guides, FAQs, educational newsletters and provider manuals.

- **Download Key Forms** – Forms for authorizations, behavioral health, pharmacy, grievance, and more.

- **Claims Status and Submissions** – Providers can submit claims online and review the status of previously submitted claims.

- **Chat** – Providers can get real-time claim adjustments and more without having to wait on hold.

- **Claims Appeals, Claims Disputes and Corrected Claims** – Can also be processed and performed on-line as well. Claims tips and resources can help providers accurately submit their requests for quicker processing.
How to Register

1 **Step One:** Visit the account registration page to get a username and password:

https://provider.wellcare.com/Provider/Accounts/Registration

This page is also accessible from the login page.

2 **Step Two:** Complete the registration form. Select three different security questions and answers, and agree to the Terms and Conditions.

3 **Step Three:** After completing Steps 1 and 2, you will receive a verification email. Click the link in this email to activate the account and set a password.

4 **Step Four:** After setting and submitting your password, you will be routed to the Request Affiliation screen. There is the option to request affiliation to an account at the Contract or Sub-Group level. Providers can locate the desired Contract or Sub-Group and submit the request. Then it is sent to the Administrator (Admin) of that account to approve or deny. Please note there is no access to tools in the portal until the Admin has approved the request.

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**Important Notes:**

- This is the information attached to the provider's web registration. It is not recorded in other WellCare systems.
- Providers can update email addresses in this step. This email address will be tied to the account and used to retrieve the provider's username or password if either are forgotten.
Secure Web Portal Training Materials

Portal Training Materials – For more information concerning our secure portal and to view our portal training materials, go to the appropriate link below and select Available Training, under Highlights of the New Portal.

- WellCare of California Medicare
  https://provider.wellcare.com/california

- Missouri Medicaid
  https://provider.wellcare.com/missouricare

- Hawaii Medicare and Medicaid
  https://provider.wellcare.com/ohanacare

- All other states
  https://provider.wellcare.com/
Provider Login

Username*

Password*

Login

Welcome to the new Provider Portal

You asked for a simple and efficient way to interact with us. We delivered. The provider portal is packed with features to help you care for your patients – our members – to ensure they have a positive health care experience.

The portal features improved member search tools, a more holistic view of member information and tools that offer more convenient ways for you to connect with us.

Not registered? Register an account

Forgot Password?

Forgot Username?
Online Provider Resources

We want to ensure providers have ample resources to pull from when running their business. Our resource guides, educational newsletters, and provider manuals can offer valuable information that will benefit your patients and your practice.

Provider Manuals
Essential information about our policies and procedures for claims, quality improvement, appeals, behavioral health, and more.

Resource Guides
These guides assist with routine tasks related to:

- Secure Provider Portal
- Verifying Member Eligibility
- Claims
- Quick Reference Guide
- Prior Authorizations
- Appeals
- Appeals

Access these resources by visiting www.wellcare.com, selecting your state, then clicking Provider and Resources – or on the secure Provider portal under Other Resources.
Newsletters & Bulletins

Our newsletters and bulletins give providers important information regarding updating provider information, rights and responsibilities, our Healthy Rewards Program, formulary changes, PaySpan® and more. You can also find updates on changes that affect you – such as updated clinical guidelines, new and updated policies, authorization changes and company news and initiatives.

Access our newsletters by visiting www.wellcare.com, selecting their state, hovering over the Provider tab, and then clicking Newsletters under News and Education.
Introducing PaySpan®

Electronic Funds Transfer (EFT) and Electronic Remittance Advice (ERA)

We are pleased to offer electronic funds transfer (EFT) and electronic remittance advice (ERA) services through PaySpan® at no charge. These tools give you a secure, quick way to electronically settle claims.

Using this no-cost service, providers can settle claims without investing in expensive EDI software. After completing a simple online enrollment, you can receive ERAs and import the information directly into their practice management or patient accounting system.

Using PaySpan®, EFTs are routed to the bank account(s) you choose. Providers can manage multiple payers, choose from among common and proprietary formats for ERAs, easily reconcile payments with claims, and take advantage of claim and remittance retrieval and reporting.

PaySpan® can be reached via email at providersupport@payspanhealth.com, by phone at 1-877-331-7154, option 1, Monday through Friday, 8 a.m. to 8 p.m., Eastern, or on the web at www.payspanhealth.com.
Benefits for providers:

- Faster deposits to provider bank accounts improve cash flow. It also reduces paper handling, which means reduced accounting expenses, and there is no longer a need to rekey, which eliminates the possibility of errors.

- PaySpan makes tracking and reconciling payments quick and easy with flexible payment reports. Providers can design their own reports and run them at any time. PaySpan’s report capability takes the mystery out of matching claims to payments.

- Providers have a number of options for viewing and receiving remittance details. PaySpan will match the provider’s preference for remittance information, including options for a HIPAA-compliant data file that can be downloaded directly to a practice management or patient accounting system.

- ERAs can be presented online and printed at the provider’s convenience. Providers can associate payments with ERAs quickly and easily. This allows providers to keep total control over the destination of claim payment funds. Multiple practices and accounts are supported.

- Further, providers can reuse enrollment information to connect with multiple payers. Different payers can be assigned to different bank accounts.

Questions about the registration process? Contact PaySpan Health at 1-877-331-7154 or send an email to providersupport@payspanhealth.com
Registering for PaySpan Health

Registering for PaySpan Health is a quick and easy that only takes about 10 minutes. During this process, you will set up a brief profile of your practice, specify bank accounts (multiple accounts if needed) and indicate other preferences for management of checks, EFTs, ERAs or online presentment of claim payment information.

1 Go to payspanhealth.com and click the Register Now button. If you don’t have a Registration Code, simply enter your NPI, TIN and Billing ZIP and click Submit. If you do have a Registration Code, enter it on the box on the right and click Submit. Providers who register with a Registration Code will also need to enter their PIN and TIN, then click Start Registration.

2 Personal Info – Enter personal contact information and designate a user name and password.

3 Account Set-up – Designate the bank account to have funds deposited to and click the Next button to continue.

4 Verify Your Info – Review the information entered, and if correct, check the box to agree to the Services Agreement, Business Associate Agreement and click Confirm.

Providers who register for electronic payments will:
- Receive a deposit of less than one dollar from PaySpan within a few business days.
- Contact their financial institution to obtain the amount.
- Login in to PaySpan.
- Click Your Payments.
- Click the Account Verification link to activate the account.
- The deposit doesn't need to be returned to PaySpan.
Get to Know the Benefits of Chat

Faster than email and easier than phone calls, Chat is a convenient way to ask simple questions and receive real-time support. Providers now have the ability to use our Chat application instead of calling and speaking with agents. Here are some ways our Chat support can help you and your staff:

- Multi-session functionality
- Web support assistance
- Real-time claim adjustments

Explore the benefits you can will experience by using live Chat!

Convenience – Live Chat offers the convenience of getting help and answers without having to have a phone call.

No Waiting On Hold – No one wants to spend their lunch break on hold. With live Chat support, you can carry on with their daily errands while waiting for an agent to reply.

Documentation of Interaction – Chat logs provide transparency and proof of contact. When customers engage with customer support via phone, they don’t typically receive a recording of the verbal conversation. Live Chat software gives you the option of receiving a transcription of the conversation afterward.
Providers can access Chat through the portal.

The *Chat Support* Icon is located on our secure provider portal. From there:

1. Log on to the provider portal at the appropriate link below.
2. Access the “Help” section.
3. Submit a chat inquiry. The receiving chat agent can assist with numerous complex issues.
4. If the chat agent is unable to resolve the issue, the issue will be routed to the right team for further assistance.

Links to Secure Provider Portal:

- WellCare of California Medicare
  [https://provider.wellcare.com/california](https://provider.wellcare.com/california)
- Missouri Medicaid
  [https://provider.wellcare.com/missouricare](https://provider.wellcare.com/missouricare)
- Hawaii Medicare and Medicaid
  [https://provider.wellcare.com/ohanacare](https://provider.wellcare.com/ohanacare)
- All other states
  [https://provider.wellcare.com/](https://provider.wellcare.com/)
The Benefits of Interactive Voice Response (IVR)

Our Interactive Voice Response (IVR) assists providers with self-service functionality. You can bypass speaking with an associate to check eligibility, claim status or authorization status. You can use the IVR by calling the toll-free Provider Services telephone number provided in your Quick Reference Guide. The Quick Reference Guide is located on our website at www.wellcare.com.

Provider-friendly functionality:
- Expedites provider verification and authentication
- Provider/Member account information is sent directly to the agent desktop so providers don’t have to re-enter information if they choose to use Chat or speak to a customer service agent
- Providers can speak information or use their touch-tone key-pad

Convenience for providers available any time of day!
- Member co-pay and benefit information
- Member eligibility information
- Authorization status & request for authorization forms
- Pharmacy status information and requesting forms
- Unlimited claims status information on full or partial payments
- Multiples lines of claims details for denials
- Rejected claims information is also available through self-service system
- Claim numbers are available
- Ticket number is provided as record of interaction
Tips for Providers using our IVR:

Providers should have the following information available with each call:

- WellCare provider ID number
- NPI or Tax ID number for validation (if you do not have your WellCare provider ID)
- For claims inquiries: the member’s ID number, date of birth, date of service and dollar amount
- For authorization and eligibility inquiries: the member’s ID number and date of birth
### Which channel is best?

<table>
<thead>
<tr>
<th>Service</th>
<th>Web Portal</th>
<th>Chat</th>
<th>IVR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appeal Requests / Status (Rx)</td>
<td>✔ Fastest Results</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appeals &amp; Disputes</td>
<td>✔ Fastest Results</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Authorization Requests</td>
<td>✔ Fastest Results</td>
<td>✔</td>
<td></td>
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<td>Authorization Requirements</td>
<td>✔ Fastest Results</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>Authorization Status</td>
<td>✔ Fastest Results</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Benefits &amp; Eligibility</td>
<td>✔ Fastest Results</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Claim Status</td>
<td>✔ Fastest Results</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Claim Submission (and Corrections)</td>
<td>✔ Fastest Results</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Co-payment Information</td>
<td>✔ Fastest Results</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Coverage Determination Requests/Status (Rx)</td>
<td>✔ Fastest Results</td>
<td></td>
<td>✔</td>
</tr>
<tr>
<td>Form Requests</td>
<td>✔ Fastest Results</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>Provider Resources</td>
<td>✔ Fastest Results</td>
<td></td>
<td></td>
</tr>
</tbody>
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**Note:** For contract related questions, providers should continue to contact their Provider Relations representative.