Florida Health Plan Portal
User Manual
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Florida Medicaid Management Information System/
Decision Support System/
Fiscal Agent Operations

Agency for Health Care Administration
2562 Executive Center Circle E., Suite 100
Tallahassee, FL 32301

DXC Technology
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## Document Information Page

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<th>Definition</th>
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<td>Approved by:</td>
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<td>Approval Date:</td>
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Note: Once approved, the controlled master of this document will be available online via iTRACE.
## Version History

Summary of Change

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1 Introduction to the Florida Health Plan Portal

The Florida Health Plan Portal provides access to notifications and alerts, reports, provider tools, and resources specific to the health plans. The portal helps health plans manage health plan information, look up provider information, perform newborn activations, determine encounter status, process claims, and submit attestation.

This document is designed to explore each web page and cover information necessary to perform tasks associated with the functional areas.

This manual covers the following topics:

- Portal navigation;
- Portal page layouts and panels; and
- Portal functionality and description.

Note: Screen images are included to provide users a visual and to better assist the user with the following procedures in this manual.
2 Accessing the Florida Health Plan Portal

Providers can access the Florida Health Plan Portal by signing into the Florida Medicaid Secure Web Portal.

After signing in, under Applications, select **Florida Web Portal**.

The user must complete the User Access Confirmation by typing the characters shown in the captcha into the Response field before clicking submit.

*Note: For information on portal security, account creation, and user roles, refer to the Florida Medicaid Secure Web Portal User Manual. Access to menus and information may vary depending on the user role.*
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3 Page Properties and Functionalities

3.1 Common Page Properties

The Florida Health Plan Portal page contains the following properties:

- **Header** – The header contains the logos for the Agency for Health Care Administration (Agency), DXC Technology, and the portal name.
- **Welcome Bar** – The welcome bar displays several pieces of information such as the Health Plan Name, User Name, Session Expiration Time, Refresh Session, and Close (window).
- **Page Title and Menu** – Each page will have a title and navigation menu. Clicking on each menu will direct the user to the related page.
- **Content** – Content may include, but is not limited to, panels, reports, tip sheets, and information.
- **Footer** – The footer contains links to the accessibility, privacy, and copyright information pages.

*Note: These properties are common to all pages.*

3.2 Display and Hide Messages

Notification and alert messages can be displayed by clicking the plus sign, or hidden from view by clicking the minus sign.
3.3 Sorting Table Contents

The table contents can be sorted by clicking on the heading column.

- **Category** – To sort by category, select the arrow next to “Category”. Clicking the arrow once will list the category name alphabetically from A-Z. Clicking the arrow again will display the category from Z-A.
- **Date** – To sort by date, select the arrow next to “Date”. Clicking the arrow once will list the most recent date at the top. Clicking the arrow again will display the oldest date at the top.

3.4 Panel Buttons

The following buttons may display on a panel:

- **Help** – Help is shown with a question mark icon. Clicking this button will display a pop-up window that contains contextual help for each field listed in the panel.
- **Minimize** – Minimize is shown with two up arrows. Clicking this button will hide the panel and only display the panel title bar (refer to Figure 2). The minimize button will then be replaced with a maximize button (refer to Figure 2).
- **Maximize** – Maximize is shown with two down arrows. Clicking this button will display the panel (refer to Figure 1). The maximize button will then be replaced with a minimize button (refer to Figure 1).
- **Search** – Search is shown in panels that allow the user to enter text in a field or select from a list of choices, as seen in the Notification & Alerts Archive panel. Clicking this button will initiate a search.
- **Clear** – Clear is shown in panels that allow the user to enter text in a field or select from a list of choices, as seen in the Notifications panel. Clicking this button will clear the fields and clear the selections.
3.5 Pagination

Some panels, such as the Provider Lookup Search Results panel, may display pagination at the bottom if the number of records to display has been exceeded. In this example, the number of provider records to display per page shows as “20”. Since the search returned more than twenty records, pagination is displayed at the bottom of the Search Results panel.

To navigate between pages of records, the user can click the following:

- **Previous** – Previous will display only when the user has clicked on any page numbers other than page one. Clicking this button will display the previous page. In this example, if the previous button is clicked, the display will change to page three.

- **Page Number** – Page numbers (1, 2, 3...) will display if the number of records exceeds the number shown in the Records drop-down. Clicking on a page number will display the records for the selected page number.

- **Next** – Next will display if there are more than ten (10) pages of records. Clicking this button will display the next page. In this example, if Next is clicked, the display will change to page five.
3.6 Hover Effect

There are two hover effects that have been incorporated to make viewing of information easier for the user.

- **Table Row** – When the mouse cursor hovers over table rows, the row which the cursor is currently on will display in a purple background and the text will show in white.

<table>
<thead>
<tr>
<th>Search Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Provider ID</td>
</tr>
<tr>
<td>---------------------</td>
</tr>
<tr>
<td>10010001058</td>
</tr>
<tr>
<td>10010000110</td>
</tr>
<tr>
<td>10010009293</td>
</tr>
<tr>
<td>10010009833</td>
</tr>
<tr>
<td>10010009804</td>
</tr>
<tr>
<td>10010007934</td>
</tr>
<tr>
<td>10010007981</td>
</tr>
<tr>
<td>0177043238</td>
</tr>
<tr>
<td>10010008029</td>
</tr>
</tbody>
</table>

- **Text Link** – When the mouse cursor hovers between a list of text links, the text link which the cursor is currently on will display in bold and in a larger text font.

**Recent Updates**
- Durable Medical Equipment (DME) Encounter Tip Sheet
- Managed Medical Assistance Kick Payments Tip Sheet
- Newborn Activation Spreadsheet
- Completion Tip Sheet
- Encounter Known Issues
4 Florida Health Plan Portal Pages

The Florida Health Plan Portal is comprised of the following pages:

- Landing;
- Home;
- Notifications & Alerts;
- Dashboard;
- Provider Tools;
- Provider Lookup;
- Resources; and
- Contact Us.

When the session expires, the user will receive an expired message and will have an option to “Refresh Session”. Refreshing the session will display the page that was last viewed by the user. If the user clicks “Close”, the Florida Health Plan Portal will close and the user will be directed to the secure Web Portal sign-in page. Once the user signs in again, the user will be presented with the Landing page.

4.1 Landing

The Landing page is displayed after the user has successfully signed into the secure Web Portal.

The page will display an image slider containing several images (see Appendix A). The slider will play continuously in a loop. The current displayed image will change once the set view time has been exceeded. The user can move between images by clicking the left button to view the previous image or clicking the right button to view the next image. Clicking on the green button will direct the user to the related Florida Health Plan Portal page.
4.2 Home

The homepage offers a quick summary of information that a user may find useful, and allows the user to perform basic actions.

The information is displayed in two (2) sections:

**Left Section**

The left section of the homepage contains the following:

- **Health Plan Information** – This information includes Name, Provider ID, Medicare, Provider Screening Category, and Contract.

- **Notifications** – The Notifications table lists the recent notifications sent to health plans in the last thirty (30) days.

- **Alerts** – The Alerts table lists the recent alerts sent to all providers in the last thirty (30) days.

**Right Section**

The right section of the Home page contains the following:

- **Quick Links** – There are two (2) links listed under Quick Links. To view and print the enrollment verification letter, click **Print Enrollment Verification Letter**. To learn more information on renewing an application, click **View Renewal Application**.

- **Visit Summaries** – The Visit Summaries table lists the most recent twelve (12) reports. To view a report, click on the desired date.

  *Note: If the needed report is not listed, send an email to healthplan.support@dxc.com.*

- **Schedule a Meeting** – To request a meeting with a local DXC Health Plan and Provider Field Services Representative, click **Request a meeting**. Clicking this button will open the user’s default email application, allowing the user to enter a message and schedule a meeting.
4.3 Notifications & Alerts

The Notifications & Alerts page allows the user to search for notifications that were sent to individual health plans, or alerts that were sent to all health plans.

The user can search by using one (1) or more criteria such as keyword, year, and/or category. The number of records to display per page can be restricted by selecting the desired amount from the Records drop-down menu. The search results are displayed in the Messages table. Each message will have a subject, a category (indicating if the message is a notification or an alert), and the sent date.
4.4 Dashboard

The Dashboard page contains reports available to all health plans and reports that are specific to each health plan. The reports are static and the views cannot be modified. The following reports will display: Encounter Timeliness, Encounter Accuracy, and Child Health Check-up.

4.4.1 All Plan View Reports

Encounter Timeliness

![Encounter Timeliness Chart](chart.png)
Encounter Accuracy

The Florida Health Plan Portal (FPP) Tableau Encounter Accuracy report is produced the first week of each month. The report includes data over the past three months and focuses on current month’s findings. The report displays the error reasons for each Sender ID grouped by Plan. This report includes plan paid encounters which are processed to a denied state. The report pulls the data for claims adjudicated between 1st and last day of previous month.
Child Health Check-up

Report Summary

The annual EPSDT report (form CMS-416) provides basic information on participation in the Medicaid child health program. The information is used to assess the effectiveness of some EPSDT programs in terms of the number of individuals under the age of 21 (by age group and basis of Medicaid eligibility) who are provided child health screening services, referred for corrective treatment, and receiving dental services.

Florida Medicaid: CMS-416 - Annual EPSDT Participation Report - All Health Plans

ALL HEALTH PLANS - Average for Eligible Enrollees Receiving a Preventive Dental Service - 2013 to 2017

ALL HEALTH PLANS - % Preventive Dental

% Preventive Dental

Gender

Ages Group

Race
4.4.2 Plan Specific Reports

**Encounter Timeliness**

**FLORIDA MEDICAID: ENCOUNTER TIMELINESS - PLAN SPECIFIC**

**Peer to Peer Group Comparison**

- **February 2018**
- **March 2018**
- **April 2018**
- **May 2018**
- **June 2018**
- **July 2018**

**Encounter Volume by Type**

- **Pharmacy**: 20.32%, 2,168,846
- **Medical**: 79.68%, 8,506,407

**Timeliness Summary**

<table>
<thead>
<tr>
<th>Month</th>
<th>Total Line Items</th>
<th>Line Items Submitted between 0-7 days</th>
<th>Percent Timely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb 2018</td>
<td>1,707,141</td>
<td>1,528,079</td>
<td>91.37%</td>
</tr>
<tr>
<td>Mar 2018</td>
<td>1,047,041</td>
<td>959,740</td>
<td>90.75%</td>
</tr>
<tr>
<td>Apr 2018</td>
<td>2,639,938</td>
<td>1,669,674</td>
<td>63.40%</td>
</tr>
<tr>
<td>May 2018</td>
<td>1,324,271</td>
<td>1,215,517</td>
<td>86.75%</td>
</tr>
<tr>
<td>Jun 2018</td>
<td>1,624,652</td>
<td>1,397,789</td>
<td>99.95%</td>
</tr>
<tr>
<td>Jul 2018</td>
<td>2,541,596</td>
<td>1,926,415</td>
<td>99.90%</td>
</tr>
</tbody>
</table>
Encounter Accuracy

Report Summary

The Florida Health Plan Portal (FHP) Tableau: Encounter Accuracy report is produced the first week of each month. The report includes data over the past three months and focuses on current month’s findings. The report displays the error reasons for each Sender ID grouped by Plan. This report includes plan paid encounters which are processed to a denied state. The report pulls the data for claims adjudicated between 1st and last day of previous month.

FLORIDA MEDICAID: ENCOUNTER ERROR ANALYSIS - PLAN SPECIFIC

Error Volume by Type

Error Category by Encounter Form (Sep 2018)

FLORIDA MEDICAID: CMS-416 - ANNUAL EPSDT PARTICIPATION REPORT - PLAN SPECIFIC

Child Health Check-up

Report Summary

The annual EPSDT report (form CMS-416) provides basic information on participation in the Medicaid child health program. The information is used to assess the effectiveness of state EPSDT programs in terms of the number of individuals under the age of 21 by age group and basis of Medicaid eligibility who are provided child health screening services, referred for corrective treatment, and receiving dental services.

Child Health Check-up
Note: The following message will display if there are no reports available.

There are no reports available at this time.
4.5 Provider Tools

The Provider Tools page provides the user with access to all panels from a centralized location. From this page, the user can access the Attestation, Claims, Demographic Maintenance, Eligibility, Encounter Testing, Newborn Activation, Reports, and Trade Files panels.

To access each panel, the user must click a menu icon.

*Note: All menu options may not display depending on the user's role.*

Below lists the panels and action(s) that a health plan can perform.

- **Attestation** – The Attestation panel will mirror the attestation paper form and will allow health plans to attest and upload the attestation spreadsheet.
  *Note: Only Comma Separated Value (CSV) files will be accepted.*

- **Claims** – The Claims panel will allow health plans to submit kick payment-related claims and will allow health plans to select a location or region associated with the base Provider ID that is currently signed in to the Florida Health Plan Portal. Health plans will also be able to search for and view encounters.
Demographic Maintenance – The Demographic Maintenance panel will allow health plans to update their information.

Note: Only users with the update role will be allowed to modify the Demographic Maintenance panels.

Eligibility – The Eligibility panel will allow the health plans to search Medicaid files for eligible recipients by using information such as the Recipient ID, Birth Date, Card Control Number (CCN), Social Security Number (SSN), Recipient Name, and Date of Service (DOS).

Encounter Testing – The Encounter Testing panel will allow health plans to open the Managed Care X12 Testing page.
**Newborn Activation** — The Newborn Activation panel will allow health plans to submit newborn activation requests electronically and monitor the status of requests online.

*Note: To learn more on Newborn Activation, refer to the Newborn Activation Spreadsheet Completion Tip Sheet.*

**Reports** — The Reports panel will allow health plans to search for a specific report issued by Florida Medicaid using a date or report name.
Trade Files – The Trade Files panel will allow health plans to download the Attestation Response files. Health plans can also upload files, including file maintenance requests, and download X12 files.

*Note: To learn more, refer to the Attestation Tip Sheet and/or Provider File Maintenance Quick Reference Guide (QRG).*

4.6 Provider Lookup

The Provider Lookup page provides a convenient way to search for enrollment information for a Florida Medicaid provider.
The Provider Lookup page is divided into two (2) sections.

**Left Section**

The left section contains the following panels:

- **Provider Lookup** – The Provider Lookup panel allows health plans to search for provider information by selecting one (1) or more criteria. The search criteria include Provider ID/NPI, License, Business Name or Last Name, First Name, MI, Provider Type, Specialty, and Medicaid Status. The number of records to display can also be restricted by selecting the desired number from the Records list.

- **Search Results** – The Search Results panel lists all providers that match the criteria used to search for provider information. If the user did not select any criteria, then the panel will list all providers. If there are no providers that match the criteria, then “No rows found” will display. To view the information for a provider, click the row of the desired provider. Performing this action will display the Provider Lookup Information panel.
Provider Lookup Information – Information in the Provider Lookup Information panel are grouped by Provider Information and by NPI Crosswalk.

Right Section

The right section contains the following:

- **Fee Schedule Lookup** – Clicking the Fee Schedule will direct the user to the Fee Schedule Lookup panel located on the public Web Portal Provider Fee Schedule page. The panel allows health plans to access the current rates and fee schedules. The user can search by Date of Service, Procedure Range, and Procedure Description.

  Note: To learn more, refer to the Fee Schedule Lookup Tool QRG.

- **Provider Master List (PML) and Pending Provider List (PPL) Files** – Health plans that want to continue to incorporate PML and PPL files in their systems may do so by clicking on the desired PML and PPL files download links.
4.7 Resources

The Resources page provides an array of information specific to health plans, such as, but not limited to, tip sheets, presentations, web-based training, and webinars.

The Resources page is divided into two (2) sections.

Left Section

The left section will contain recently updated publications. It will list the title, the date it was published, and several lines of content. To view the publication in its entirety, click Learn more. Clicking the Learn more will display the publication in a Portable Document Format (PDF).

Right Section

The right section allows health plans to quickly scan the list of recently updated publications. The Recent Updates section lists links to publications posted to the Resources page. Clicking a recently updated publication link will bring the user to the related publication within the Resources page. In addition, should the user wish to view other publications such as Tip Sheets, Training Presentations, and/or Web-Based Training, links to these publications are listed under Categories section.

Note: Selecting a Category will reveal a list of related publications. Clicking a publication link will open a new browser tab and display a PDF version of the selected publication.
4.8 Contact Us

The Contact Us page provides information on contacting support either by phone or by email. In addition, a “Health Plan Support Contact Sheet” is available for download. This time-saving document details each type of inquiry a health plan might have and lists the phone number and/or email address to contact for support.

<table>
<thead>
<tr>
<th>What do you need assistance with?</th>
</tr>
</thead>
<tbody>
<tr>
<td>For EDI Encounter Plan Support Questions and Training (non-EDI) including assistance with complex encounter denials and resubmissions, enrollment issues, and training assistance with Florida Medicaid billing requirements:</td>
</tr>
<tr>
<td>• Email: <a href="mailto:florida.encounter.support@dx.com">florida.encounter.support@dx.com</a></td>
</tr>
<tr>
<td>For inquiries including status of mail registration files and other electronic transactions, such as the XII 835, 837, and the 834 transactions:</td>
</tr>
<tr>
<td>• Email: <a href="mailto:healthplan.support@dx.com">healthplan.support@dx.com</a></td>
</tr>
<tr>
<td>• Phone: 1-866-506-0961</td>
</tr>
<tr>
<td>For Non-pharmacy attestation file are submitted to this mailbox, along with non-pharmacy attestation-related inquiries:</td>
</tr>
<tr>
<td>• Email: <a href="mailto:encounter.attestation@dx.com">encounter.attestation@dx.com</a></td>
</tr>
<tr>
<td>For Portal account assistance, along with general encounter claim status inquiries:</td>
</tr>
<tr>
<td>• Phone: 1-888-288-7799, Option 7</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DXC is here to help!</th>
</tr>
</thead>
<tbody>
<tr>
<td>Download the Encounter Support Sheet.</td>
</tr>
<tr>
<td>For information on Statewide Medicaid Managed Care (SMMK) Program, visit the Agency’s website.</td>
</tr>
<tr>
<td>For Information on Managed Care Plan, visit the Florida Medicaid Web Portal.</td>
</tr>
</tbody>
</table>
Appendix A

A.1 Landing Page Slider Images

- **Hi there**
  Welcome to the Florida Health Plan Portal.
  Let’s get started

- **Be informed**
  Visit Notifications & Alerts.
  View messages now

- **Information at your fingertips**
  Real-time reporting that delivers insights you need.
  View Dashboard
Get more done
Access various Florida Medicaid Secure Web Portal panels from one centralized location.

Know your providers
Verify a provider’s Medicaid enrollment status and/or NPI crosswalk information.

Stay informed
Access tip sheets, presentations, training, and webinars.
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