COLORADO
Department of Health Care Policy & Financing

Provider Web Portal Quick Guide – Delegate Access Definitions

A reminder that users are only able to delegate the functions that they have. If you do not see one of the below functions in your list it is because you do not have access to that function.

Care Management – Submit Resubmit Authorization

Allows access to create an authorization and view, edit or add providers on the Maintain Favorite Providers page used by authorizations.

Care Management – View Authorization

Allows access to search for and view authorizations.

Claim – Inquiry

Allows access to search for and view Dental, Institutional and Professional claims.

Claim – Submit and Resubmit

Allows access to submit, resubmit, copy and void Dental, Institutional and Professional Claims.

EHR Incentive Payment Program

Allows access to the EHR Incentive Payment Program

Files Exchange (EDI)

Allows access to File Upload and Download pages where X12 files can be uploaded or downloaded.

Member Focus Viewing

Allows access to the Member Focus Viewing page. This page provides high level information about eligibility, claims and authorizations and should only be given to those delegates who also have access to eligibility, claims and authorizations.

Provider Maintenance

Allows access to the Provider Maintenance process where a user can access and update much of the data a provider submitted during enrollment.

Resources – Download Reports

Allows access to the Report Download page under the Resources tab. Here a user can download CTMS letters, RA pdf reports and other non-X12 letters and reports.

Resources – Search HIPAA Error Codes

Allows access to the Search HIPAA Error Codes page where a user can search for additional information on CARC and RARC codes.

Revalidation

Allows access to the Revalidation process that most providers will need to perform every 3-5 years as currently defined under ACA rules. (Note: The provider's link to Revalidation is only available to them during their Revalidation period and therefore, if delegated, would only be available to the delegate during the Revalidation period.)

Search Accounts Receivable

Allows access to the Search Accounts Receivable page where users can search for and pay ARs.

Search Alerts

Allows access to the Search Alerts page. The new interChange system will create various alerts for such things as Prior Authorizations and Claims. These alerts can be viewed on this page.

Search Payment History

Allows access to the Search Payment History page. Here a user can search for a payment, view the claims associated to that payment, download the PDF version of the Remittance Advice (RA) and also download a delimited version of the RA.

Secure Correspondence

Allows access to Secure Correspondence where a user can view, submit or reply to secure correspondence messages.

Verify Eligibility

Allows access to Verify Eligibility where a user can:

- Verify Coverage information for a member including copayment amounts.
- Verify Limit information for a member, both dollar and unit limits
- Verify Managed Care Assignment information for a member
- Verify Lock-In details for a member
- Verify Plan of Care details for a member, including patient liability
- Verify EPSDT details for a Member
- View Other Insurance Information, including Medicare A & B
- Add Other Insurance Information

Need More Help?

Please visit the Quick Guides and Webinars web page to find all the Provider Web Portal Quick Guides:

Aid Code and Benefit Plan Acronyms

Are You Billing from the Correct Account?

Copy, Adjust, or Void a Claim

Delegates

Delegate Access Definitions

Entering Third Party Liability

Provider Maintenance

Pulling your 835 - Linking to your own TPID

Pulling your Remittance Advice (RA)

Reading your Remittance Advice (RA)

- Internal Control Number (ICN) Information Sheet
- Region Code Information Sheet

Updating your EFT/ERA Information

Validating a Trading Partner ID (TPID)

Verifying Member Eligibility

- Managed Care Assignments
- Primary Care Provider
- Medicare Coverage
- Member Co-Pay Amounts

Viewing Prior Authorizations in the Portal

Web Portal Registration

Provider Web Portal – Frequently Asked Questions (FAQs)

Please visit the Provider FAQ Central web page and look under the Billing and Web Portal headings to see Provider Web Portal FAQs.

Provider Web Portal – Recorded Webinars

Click the links below to access the recorded webinars:

Session #1	Access the new Portal, Portal Registration, Log in, My Profile, Manage Accounts (including delegates)
Session #2	Provider Maintenance (including updates and affiliations), EFT/ERA Enrollment, Disenroll
Session #3	Member Information and Eligibility Verification
Session #4	Remittance Advice (RA), Search Payment History, Search for Accounts Receivable Records, Make a Payment
Session #5	Notify Me, Alerts, Secure Correspondence
Session #6	Files Exchange, Resources
Session #7	Search & Submit CMS 1500, UB-04, Emergency Dental Claims, Prior Authorizations (Nursing Facility PETI PARs only)
Bridge	Bridge training for Community Centered Boards (CCBs) only