

# Provider Web Portal

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## User Guide

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# ODADAS/ODMH PROVIDER WEB PORTAL

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## USER DOCUMENTATION

### What is the ODADAS/ODMH Provider Web Portal?

The ODADAS/ODMH Provider<sup>1</sup> Web Portal allows provider staff to access “real time” data to determine the allocated benefit limits, benefit usage and remaining benefits for a client. “Real time” data refers to services that have already been billed to MACSIS, and does not represent services that have been provided but not billed.

**“Remaining units” does not guarantee payment.**

All units have been converted to hourly units (except for day services) and the allocated benefit amount, benefit usage and remaining benefit displayed in the web portal will be displayed as hourly units, except for services that are billed by the day.

### Requirements

This application is to be used by authorized persons who will be designated as either a Primary User or Secondary User and requires the use of either IE 8 (or higher), or Firefox.

### How do I access the ODADAS/ODMH Provider Web Portal?

The ODADAS/ODMH Provider Web Portal can be accessed via your internet browser at: <https://bhbenefits.ohio.gov/BBJ/signIn.jsp>

### How are Username(s) and initial passwords assigned?

Each Medicaid provider will have a **Primary Username** that will be the same as their ODJFS Medicaid 7-digit ID number. Dual MH/AoD providers are assigned separate Medicaid provider numbers by ODJFS. Dual providers will have an AoD **Primary Username** and a MH **Primary Username**.

Each **Primary Username** will be assigned an initial password. The initial password will be **A0000xxxx**; where **xxxx** = the last four digits of the provider’s Federal tax ID number. It will be the responsibility of the primary user, similar as with the ODJFS provider portal, to assign additional (secondary) users. There can be up to 99 secondary users.

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<sup>1</sup> Provider refers to the agency; not the individual clinician.

The **Secondary Username(s)** will be the ODJFS Medicaid 7-digit ID number followed by a sequence number starting with “-1”. Example: 1234567-1, 1234567-2, etc. The initial password for the **Secondary Username(s)** will be **S0000xxxx**, where **xxxx** = last four digits of the Federal Tax ID number.

All current Medicaid providers have been pre-loaded and the Primary User for each has been setup. Each Primary User can verify the information that was pre-loaded.

When a new Medicaid provider submits a **MACSIS Provider Request/Modification Form**, and that provider has been setup in MACSIS, their Primary User will automatically be created for access to the ODADAS/ODMH Provider Web Portal.

## Logging into the web portal for the first time.

### Web portal login page.

Ohio | Department of Alcohol & Drug Addiction Services

Ohio | Department of Mental Health

Sign in

Username:

Password:

Type the characters you see in the picture below and then select the Login button

1hjn f

If the image is illegible, refresh the browser to get a new one

Quick Link to

ODMH and ODADAS Medicaid Provider Portal

Account information

Login

[I can't access my account](#)

**DISCLAIMER:** This ODMH and ODADAS Medicaid provider web portal is solely intended for benefit look-up and can NOT be used as a Medicaid eligibility verification tool. Medicaid eligibility verification can be done by accessing the ODJFS Medicaid Provider Web-Portal at <https://portal.ohmits.com/public/Providers/tabid/43/Default.aspx>

### Instructions for first time users:

- Enter your **Username** and **Password**.
- Type the characters that appear in the highlighted box in the space provided.
- The ODMH and ODADAS Medicaid Provider Portal radio button is checked by default.
- Click the **Login** button.
- After the initial login, users will be taken to the **Change your ODMH and ODADAS Medicaid Provider Portal Password** to change their password.

**Passwords must be reset every 60 days.**

**The portal will allow six failed password attempts before the user is locked out of the system.**

## Returning Users

### Web portal login page.

Ohio | Department of Alcohol & Drug Addiction Services

Ohio | Department of Mental Health

Sign in

Username:

Password:

Type the characters you see in the picture below and then select the Login button

1hjn f

If the image is illegible, refresh the browser to get a new one

Quick Link to

ODMH and ODADAS Medicaid Provider Portal

Account information

Login

[I can't access my account](#)

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- Enter your **Username** and **Password**.
- Type the characters that appear in the highlighted box in the space provided.
  - The ODMH and ODADAS Medicaid Provider Portal option is checked by default.
- Click the **Login** button.

## How do I access client eligibility and benefit information?

The **Client Eligibility and Benefit Information** screen is where a provider views a client's allocated benefit, usage and remaining allocation (in hours).

Provider staff can look up a client's benefit information using a primary or secondary search.

- The primary search requires either a client's UCI number or their Medicaid ID.
- The secondary search can be used when the UCI number or Medicaid ID is not available. A secondary search must include either the client's first name or last name and must include both the client's date-of-birth and social security number.

## Client Eligibility and Benefit Information screen.

Client Eligibility and Benefit Information x

**File**

**Selection Criteria**

Client UCI # or Medicaid ID:  As of Date:  Logout

-- OR -- Last Name or First Name and DOB and SSN

Last Name  First Name  DOB  SSN  New Search

I have a current and legally compliant authorization for the release of information for this individual that authorizes me to access State of Ohio, ODMH and ODADAS information or I am an ODJFS employee or contractor who is accessing this information for Medicaid program operations. I further affirm that I will access and use only the minimum information necessary to determine this individual's benefit accumulators. (Y/N):

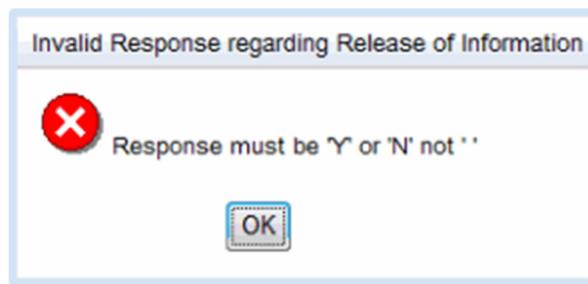
I have a 42 C.F.R. Part 2 Release of Information that authorizes me to access State of Ohio and/or ODADAS information or I am an ODJFS employee or contractor who is accessing this information for Medicaid program operations. (Y/N):

**Benefit Allocation and Usage**

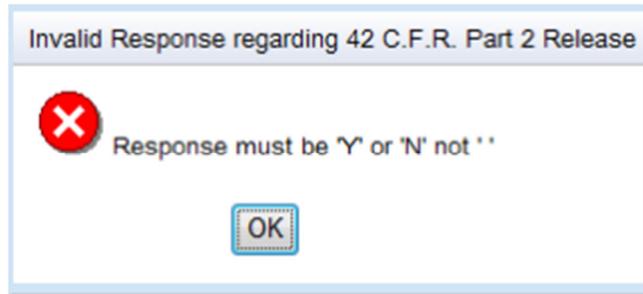
Description of Benefits (All units are hourly including Used & Remaining except day services)	Allocated	Used	Remaining

### Primary Search

- Enter the client's **UCI** or **Medicaid ID** in the first box.
- The **As of Date** will default to today's date; this can be changed by manually entering the desired date
- Enter a **Y** or **N** in response to the whether you have a current and legally compliant authorization for the release of information.
  - If you leave this blank, you will receive the error message below.



- If you enter an **N**, you will not be able to view any client information.
- Enter a **Y** or **N** in response to the 42 C.F.R. disclaimer.
  - To view Mental Health only benefit information, enter **N**. To view both Mental Health and Drug and Alcohol benefit information enter a **Y** (provided you have a release form).
  - If you do not enter an **N** or **Y**, you will receive the error message below.



- Click the **Submit** button.
  - The benefit, allocation and usage will be populated for the member.
  - If there is no client with the UCI number or Medicaid ID entered, you will receive the error message below.



### Secondary Search

- Enter the either the client's **Last Name** or **First Name** in the appropriate box.
- Enter the client's **DOB** (date-of-birth).
- Enter the client's **SSN** (social security number).
- The **As of Date** will default to today's date; this can be changed by manually entering the desired date.
- Click on the **Find Client** button.

**Client Eligibility and Benefit Information** x

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File

Selection Criteria

Client UCI # or Medicaid ID:  As of Date:

-- OR -- Last Name or First Name and DOB and SSN

Last Name  First Name  DOB  SSN

I have a current and legally compliant authorization for the release of information for this individual that authorizes me to access State of Ohio, ODMH and ODADAS information or I am an ODJFS employee or contractor who is accessing this information for Medicaid program operations. I further affirm that I will access and use only the minimum information necessary to determine this individual's benefit accumulators. (Y/N):

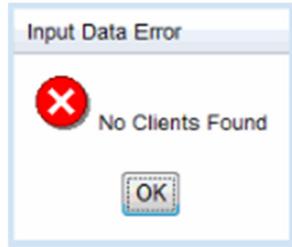
I have a 42 C.F.R. Part 2 Release of Information that authorizes me to access State of Ohio and/or ODADAS information or I am an ODJFS employee or contractor who is accessing this information for Medicaid program operations. (Y/N):

Benefit Allocation and Usage

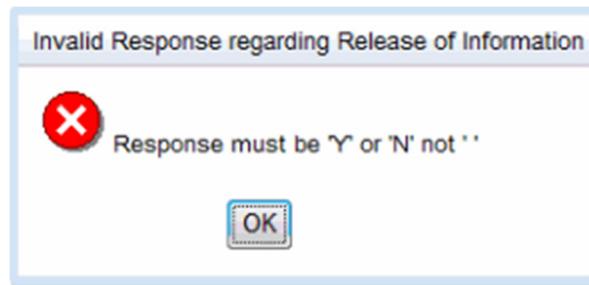
Description of Benefits (All units are hourly including Used & Remaining except day services)	Allocated	Used	Remaining

- Clients matching the search criteria will be displayed in the box to the right.

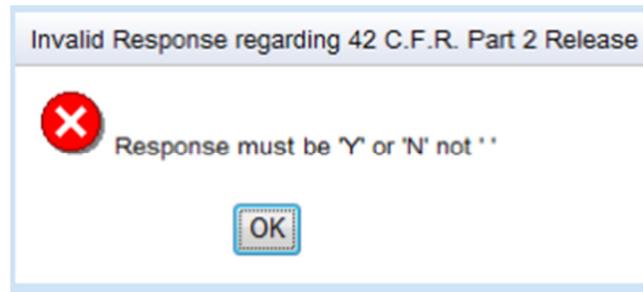
- If no clients were found that meets the input criteria you will receive the following error message.



- Select the client whose benefits you wish to display.
- Enter a **Y** or **N** in response to the whether you have a current and legally compliant authorization for the release of information.
  - If you leave this blank, you will receive the error message below.



- If you enter an **N**, you will not be able to view any client information.
- Enter a **Y** or **N** in response to the 42 C.F.R. disclaimer.
  - To view Mental Health only benefit information, enter **N**. To view both Mental Health and Drug and Alcohol benefit information enter a **Y** (provided you have a release form).
  - If you do not enter an **N** or **Y**, you will receive the error message below.



- Click the **Submit** button.
  - The benefit, allocation and usage will be populated for the member.

**This screen shot shows the page that provides benefit allocation, usage and remaining allocation information. Instructions for navigating through this screen are found below the image.**

**Client Eligibility and Benefit Information** X

File

**Selection Criteria**

Client UCI# or Medicaid ID:  **ADULT, TESTER** As of Date:

-- OR -- Last Name or First Name and DOB and SSN

Last Name  First Name  DOB  SSN

I have a current and legally compliant authorization for the release of information for this individual that authorizes me to access State of Ohio, ODMH and ODADAS information or I am an ODJFS employee or contractor who is accessing this information for Medicaid program operations. I further affirm that I will access and use only the minimum information necessary to determine this individual's benefit accumulators. (Y/N):

I have a 42 C.F.R. Part 2 Release of Information that authorizes me to access State of Ohio and/or ODADAS information or I am an ODJFS employee or contractor who is accessing this information for Medicaid program operations. (Y/N):

**Benefit Allocation and Usage**

Description of Benefits (All units are hourly including Used & Remaining except day services)	Allocated	Used	Remaining
COST AVOIDANCE FOR 24 HOURS IN A DAY OF MCD SERVICES	24.00	.00	24.00
LIMITS ADD CM/GC/IC/MS MCD SVCS TO 30 CUMULATIVE HRS/WEEK	30.00	.00	30.00
LIMIT MCD MH ASSMT BY NON-PHYS TO 4 HOURS (4 UNITS)PER FY	4.00	4.00	.00
LIMIT MCD MH ASSESSMENT BY PHYS TO 2 HOURS (2 UNITS) PER FY	2.00	2.00	.00
LIMIT MCD COUNSELING TO 52 HOURS (208 UNITS) PER FY	52.00	52.00	.00
LIMIT MCD MH CPST TO 104 HOURS (416 UNITS) PER FY	26.00	25.00	1.00
LIMIT MCD MH PARTIAL HOSP FOR ADULTS TO 60 DAYS	60.00	11.00	49.00
LIMIT MCD MH PARTIAL HOSP FOR KIDS TO 60 DAYS	60.00	.00	60.00

- Use the scroll bar on the right to view all of the benefits associated with the client.
- To search on another client, click the **New Search** button and enter the information as before.
- Once you are finished, click the **Logout** button and you will be taken back to the login screen.
- If the member does not have a current eligibility span, you will receive the following error message.



## Change your password.

### Change your ODMH and ODADAS Medicaid Provider Portal Password Screen.

The screenshot shows a web portal interface for changing a password. At the top, there are logos for the Ohio Department of Alcohol & Drug Addiction Services and the Ohio Department of Mental Health. The main heading is "Change your ODMH and ODADAS Medicaid Provider Portal Password". Below this, a blue bar contains the instruction: "Enter your current password and then choose your new password. Click Save when you're done." A yellow box contains a "Please Note" section with password requirements: "To better protect your account, make sure that your password is memorable for you but difficult for others to guess. Do not share your password with anyone, and never use the same password that you've used in the past. For security purposes, your new password must be a minimum of 9 and maximum of 15 characters long. The password should not start with uppercase A or S, the password must contain at least one uppercase letter and one number. Maximum number of times a specific character can be repeated sequentially is 4 (remember that your password is case sensitive)." Below the note are three input fields: "Enter your Current Password:", "Choose a New Password:", and "Confirm your New Password:". At the bottom right, there are "Save" and "Cancel" buttons.

### Change password:

- Enter your current/expired password.
- Choose a new password making sure it contains the minimum requirements and note that passwords are case sensitive.
  - Minimum of 9 characters.
  - Maximum of 15 characters.
  - The password should not start with an **A** or an **S** depending on whether you are a primary or secondary user.
  - Password must contain at least one uppercase letter.
  - Password must contain at least one number.
  - Maximum number of times a specific character can be repeated sequentially is four (4).
  - Password is case sensitive.
- Re-enter your new password in the **Confirm your new password** box.
- Click the **Save** button.
  - A confirmation message will appear indicating your new password has been saved and you will be returned to the login screen.

## I forgot my password or User ID.

If you have forgotten your password or User ID:

- Click **I can't access my account** link on the Login screen to be directed to the **Password/User ID Recovery Page**.

## Password Recovery Page.

Ohio | Department of Alcohol & Drug Addiction Services

Ohio | Department of Mental Health

What's the problem you are experiencing?

Email Address:

72pvu

If the image is illegible, refresh the browser to get a new one

Type the characters you see in the picture above and then select the Submit button

I forgot my password

I forgot my User ID

- Enter your e-mail address.
- Type the characters you see in the highlighted box in the space provided.
- Check the radio button next to **I forgot my password**, or **I forgot my User ID**.
- Click the **Submit** button.
- An e-mail will be sent to the user:
  - **I forgot my password** – the e-mail will contain a randomly generated password.
    - The user will be required to change their password once they login with the randomly generated password (see: [Change your password.](#)).
  - **I forgot my User ID** – the e-mail will contain the **User ID**. The user will be required to login with the default password.
    - The user will be required to change their password once they login with the default password (see: [Change your password.](#)).
    - **Primary User** default password is **A0000XXXX** where XXXX=last four digits of the provider's Federal Tax ID.
    - **Secondary User** default password is **S0000XXXX** where XXXX=last four digits of the provider's Federal Tax ID.

## I am locked out of the system.

A user will be locked out of the system after 6 (six) failed password attempts.

If you have been locked out of the system, follow the process as outlined in the section [I forgot my password or User ID](#).

## Account information screen.

The **Account Information** screen is used to update personal account information, change your password, and add/delete secondary users. Only a **Primary User** can add or delete a **Secondary User**.

To access the **Account Information** screen, complete the login information, click the radio button next to **Account Information** and then click the **Login** button.

The screen you see will depend on whether you are a **Primary User** or a **Secondary User**.

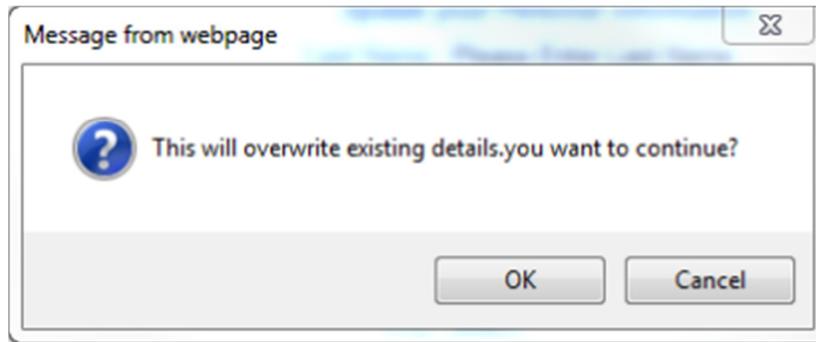
**Primary Users** will be directed to the **Administrator Account Information** screen.

**Primary User Account Information** Screen.

The **Account Information** screen will open and the **Personal Information** fields will be populated with your information. Any Secondary User information will also be populated.

**Primary Users can:**

- **Update personal information.**
  - Make the appropriate changes in the fields provided and click the **Save** button.
  - The following popup appears:



- If the information is correct, click the **OK** button; if not click the **Cancel** button, make the appropriate changes, and follow the above procedure to save the change.
- You will receive a message that says the information was successfully updated.
- **Change password**
  - Click on the **change your password** link and you will be taken to the **Change your ODMH and ODADAS Medicaid Provider Portal Password** screen.
  - Follow the instructions outlined in the section [Change your password](#).
- **To add a secondary user:**
  - Enter the **User ID**
    - The User ID is the ODJFS Medicaid number followed by a hyphen and a sequence number (first secondary user will have a sequence number of 1) Example: 1234567-1
    - Deleted Secondary User ID's will be reused and automatically generated by the system.
  - Enter the initial **password**
    - The initial password will be S0000XXXX where XXXX is the last four digits of the provider's Federal Tax ID.
    - An e-mail will be generated and sent to the secondary user to notify them their account has been setup and to contact the Primary User for the User ID and initial password.
  - Enter the secondary user's e-mail address.
  - Enter the secondary user's **Last Name**.
    - **First Name, phone number, Street, City** and **zip code** are optional.
  - Click the **Save** button.
    - A message will appear that says, "user is successfully created".
    - Primary User will be responsible for sharing the User ID and initial password with the Secondary User.
    - The new user will need to change their password after the initial login.

- **To delete a secondary user:**
  - Check the box next to the Secondary User you want to delete
  - Click the Delete button
    - A message will appear that asks if you are sure you want to delete the user – click **Okay** to delete, or **Cancel** if you do not want to delete the user.
      - A message will appear that says, “user is successfully deleted”.

## Secondary Users will be directed to their Account Information screen.

### Secondary User Account Information Screen.

The **Account Information** screen will open and the **Personal Information** fields will be populated with your information.

Secondary Users can:

- **Update personal information**
  - Make the appropriate changes in the fields provided and click the **Save** button.
  - You will receive a message that says the information was successfully updated.
- **Change password**
  - Click on the **change your password** link and you will be taken to the **Change your ODMH and ODADAS Medicaid Provider Portal Password** screen.
  - Follow the instructions outlined in the section [Change your password](#).

## How do I access the ODJFS web portal?

To access the ODJFS Medicaid Provider Web Portal for Medicaid eligibility verification, click the <https://portal.ohmits.com/public/Providers/tabid/43/Default.aspx> link at the bottom of the login screen.

Ohio.gov | Department of Job and Family Services

Search

About JFS | Our Services | Info Center | News & Events

Friday 10/28/2011 7:17:43 AM

Home Consumers **Providers** Trading Partners Public Information Publications

enrollment enrollment tracking search provider links long-term care account setup

Job & Family Services Ohio Medicaid

### Provider Home

Using the Provider Enrollment wizard, applicants are guided through the necessary steps to complete and submit an enrollment application to become a Medicaid provider. After logging in to the Secured Site, providers can use self-service tools to manage their account, access their mailbox, update demographic information, exchange data files, request eligibility verification, and process claims, prior authorizations, and referrals.

#### Search Provider Directory

Allow a user to perform searches for providers and community resources by different search criteria such as county, city, state, or zip code.

#### Fee Schedules

View schedules based on provider types in PDF/HTML/CSV

#### Search Publications

Allow a user to perform a search for a publication and view the document.

#### Provider Services

The provider services page contains links to HP contacts, ODJFS contacts, schedules, and provider training.

#### Managed Care

Ohio Medicaid contracts with Managed Care Plans (MCPs) to provide quality health care to many Ohio Medicaid consumers.

#### Login to secure site

- Click Here to Login

#### Provider Setup

If you are a provider and have received your Welcome Letter

- Click here to setup your account

#### Agent Setup

If you are a provider employee or doing work on behalf of a provider

- Click here to setup your agent account

Note: Provider must approve.

#### Provider Enrollment

- Provider Enrollment
- Check Provider Enrollment Status

#### News

- Enroll as a HOME Choice provider
- Rate increase for home and community-based service providers outlined
- Response to Medicaid Performance Audit

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