



Your Extended Family.

Web Portal Module Overview

Provider Registration

Estimated Duration- 30 minutes



Welcome

Welcome to Web Portal Training! The goal of the presentation is to provide you with the fundamental Web Portal knowledge you need to assist Molina Providers. It is important to note that some of the functionality demonstrated will only work for our providers and cannot be performed in the Support User environment.

If you have any feedback or questions, please direct these to the Stakeholder Experience Department by emailing us at:
WebPortal@Molinahealthcare.com.

Thank you,

Web Portal Team

Training Module 1 (Provider)

- Logging In 5 minutes
- New Provider Registration 10 minutes
 - Facility / Group Registration
 - Individual Practitioner Registration
 - Obtaining a Provider ID
- Admin Functions 10 minutes
 - View Profile
 - Manage Office Users
 - Register an Additional Pay-To
 - Delete Account
- Web Portal Home Page 5 minutes
- NPI Registration 5 minutes

Web Portal Functions

Provider-related

The revised Web Portal has been optimized for Molina Providers. The list on the right identifies all the functions available to Providers using the Molina Web Portal. Each of these will be discussed in detail during this training.

- Register & Setup Profile
- Create & Manage Office User Accounts
- Check Member Eligibility
- Submit Professional Claim
- Search for Claims
- Submit Service Request
- Search for Service Requests
- Search for Providers
- Save/Open Partial Claim or Service Request
- Download Patient Eligibility List (Excel & PDF)
- Download Provider Affiliation List (Excel & PDF)
- Export & Download Claim Files (Excel & PDF)
- Download Nurse Advice Reports
- View FAQ's
- Contact Molina

Objectives

Upon successful completion of the course, participants will be able to:

- Create an Web Portal Provider Self Services account
- Log into Provider Self Services
- Add additional pay-to entities to an Web Portal account
- Add additional users to an Web Portal account
- Perform account administration for their organization
- Complete NPI registration

Accessing Molina's Web Portal

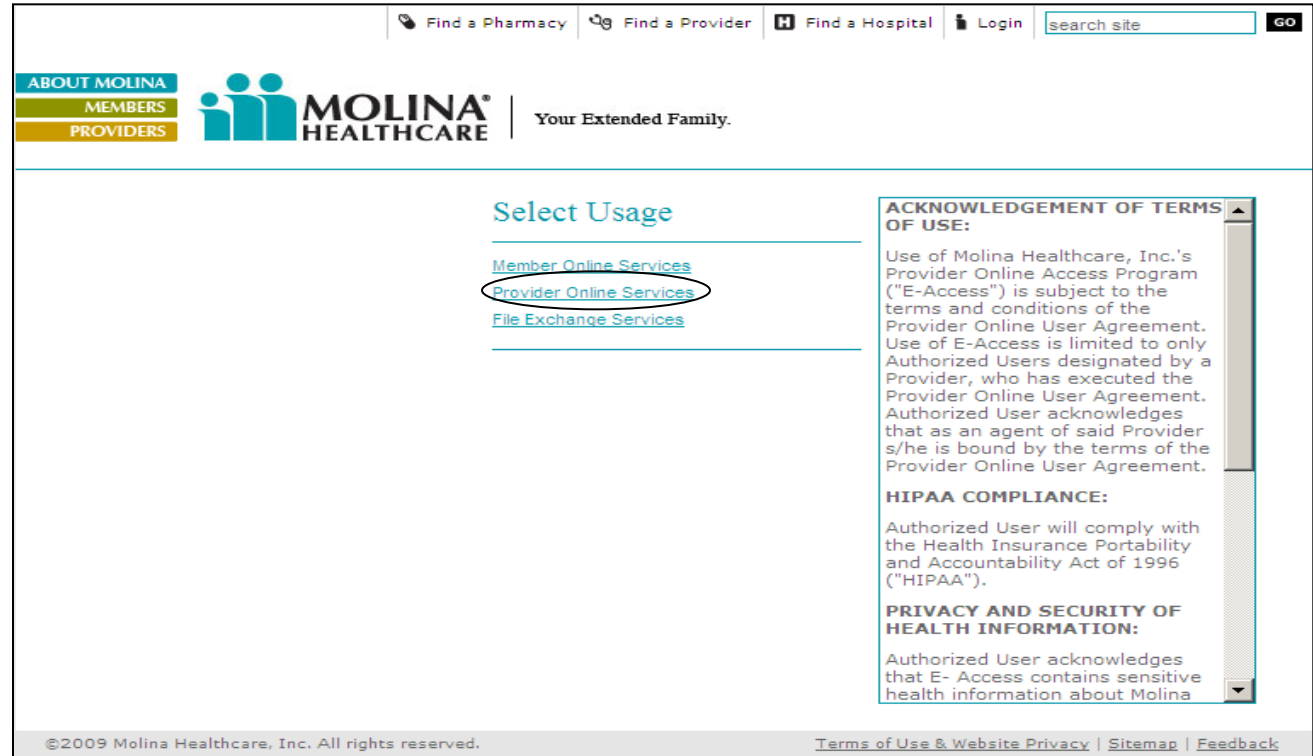
Upon reaching the Molina website (www.molinahealthcare.com), you will see several options. To access Molina's Web Portal, first **click Login**.



The screenshot shows the Molina Healthcare website homepage. At the top, the Molina Healthcare logo is displayed next to the tagline "Your Extended Family." Below this is a large image of a smiling man in a light blue shirt, with a tree in the background. Several small circular portraits of healthcare providers are arranged in a cluster over the tree. Below the image is a navigation bar with three main sections: "PROVIDERS" (yellow background), "ABOUT MOLINA" (teal background), and "MEMBERS" (green background). Under "PROVIDERS" are links for "Find a Pharmacy", "Find a Provider", and "Find a Hospital". Under "ABOUT MOLINA" is a "Login" link, which is circled in red. To the right of the "Login" link is a search bar with the text "search site" and a "GO" button. Below the navigation bar, there are three main content areas. The left area features a photo of an elderly couple and the text "Medicare Now Available! Are you eligible?" followed by a link to "Medicare plans" and a brief description. The middle area features a gold starburst graphic with the text "US News & World Report's Best Health Plans 2008-09 NCQA". The right area features the text "Molina Healthcare of Utah Medicaid plan ranked among 'America's Best'" and links to "Press Release" and "U.S. News & World Report". At the bottom of the page, there is a footer with copyright information: "©2009 Molina Healthcare, Inc. All rights reserved." and a link to "Terms of Use & Website Privacy | Sitemap | Feedback". The date "last updated: 11/03/2008" is also displayed.

Provider Online Services

Web Portal has three categories of user services. This training focuses on only the Provider category. To begin the Provider login process, *click* **Provider Online Services**.

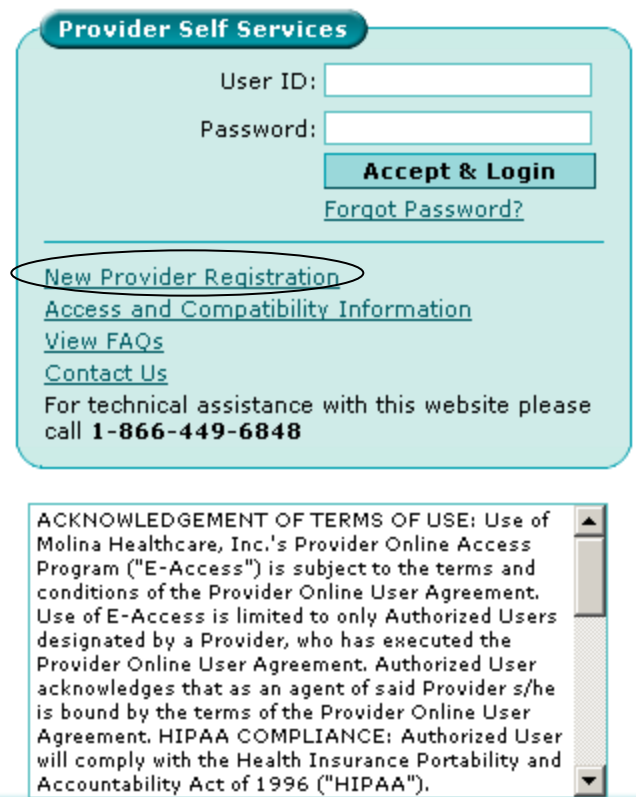


The screenshot shows the Molina Healthcare web portal. At the top, there are navigation links: "Find a Pharmacy", "Find a Provider", "Find a Hospital", "Login", and a search bar with a "GO" button. Below the navigation bar, there is a sidebar with "ABOUT MOLINA", "MEMBERS", and "PROVIDERS". The "PROVIDERS" link is highlighted. The main content area features the Molina Healthcare logo and the text "Your Extended Family." Below this, there is a "Select Usage" section with three links: "Member Online Services", "Provider Online Services" (which is circled in red), and "File Exchange Services". To the right of the "Select Usage" section, there is a "ACKNOWLEDGEMENT OF TERMS OF USE:" section with a scroll bar. The text in this section states: "Use of Molina Healthcare, Inc.'s Provider Online Access Program ('E-Access') is subject to the terms and conditions of the Provider Online User Agreement. Use of E-Access is limited to only Authorized Users designated by a Provider, who has executed the Provider Online User Agreement. Authorized User acknowledges that as an agent of said Provider s/he is bound by the terms of the Provider Online User Agreement." Below this, there is a "HIPAA COMPLIANCE:" section with the text: "Authorized User will comply with the Health Insurance Portability and Accountability Act of 1996 ('HIPAA')." Finally, there is a "PRIVACY AND SECURITY OF HEALTH INFORMATION:" section with the text: "Authorized User acknowledges that E- Access contains sensitive health information about Molina". At the bottom of the page, there is a footer with the copyright notice "©2009 Molina Healthcare, Inc. All rights reserved." and links to "Terms of Use & Website Privacy", "Sitemap", and "Feedback".

Provider Self Services - Web Portal Login

Registered providers can enter their user name and password here. If you have not yet registered, *click* **New Provider Registration**.

From this screen you can also reset your password, view the system requirements and other access and compatibility information, visit the Frequently Asked Questions section of the Web Portal, and find a list of Molina contact names and phone numbers.



The screenshot shows the 'Provider Self Services' login page. It features a light blue background with a white box containing the login fields. The 'User ID' and 'Password' fields are white with black text. Below them is a blue 'Accept & Login' button and a blue link for 'Forgot Password?'. A red circle highlights the 'New Provider Registration' link. Below this are links for 'Access and Compatibility Information', 'View FAQs', and 'Contact Us'. At the bottom, there is a section for 'ACKNOWLEDGEMENT OF TERMS OF USE' with a scroll bar.

Provider Self Services

User ID:

Password:

Accept & Login

[Forgot Password?](#)

[New Provider Registration](#)

[Access and Compatibility Information](#)

[View FAQs](#)

[Contact Us](#)

For technical assistance with this website please call **1-866-449-6848**

ACKNOWLEDGEMENT OF TERMS OF USE: Use of Molina Healthcare, Inc.'s Provider Online Access Program ("E-Access") is subject to the terms and conditions of the Provider Online User Agreement. Use of E-Access is limited to only Authorized Users designated by a Provider, who has executed the Provider Online User Agreement. Authorized User acknowledges that as an agent of said Provider s/he is bound by the terms of the Provider Online User Agreement. HIPAA COMPLIANCE: Authorized User will comply with the Health Insurance Portability and Accountability Act of 1996 ("HIPAA").

Admin User Responsibility

After clicking New Provider Registration, the Provider Online User Agreement will display. Please review the agreement, and *click I Accept* at the bottom of the page to proceed with registration. It is important to note that the first account created is automatically the Admin User (administrator) account. The Admin User account provides access to all Web Portal functionality and is responsible for management of all other users under the account.

To continue with the registration process, *click the **here** link.*

You also have the option of exiting the Web Portal if you do not wish to be the administrator.

Admin User Responsibility

Before creating your account, please note that you will be responsible for the following:

- Managing all additional users added to the account which includes:
 - Creating New Users
 - Assigning User Roles
 - Deleting Users
 - Unlocking Users Accounts as needed
- Perform mandatory periodic reviews validating the list of Users remains accurate

To continue with registration, click [here](#)

To exit click [here](#)

For more information about Molina's Provider Self-Services ePortal, visit the [FAQs](#) section

New Provider Registration

The screen below appears upon selecting New Provider Registration. Provide as much of the requested information as possible.

Welcome to the Provider Registration Page

If you have any questions about the registration process, Please visit our How To Register(FAQ)

[FAQ](#)

Provider Information

Are you registering for: * ☒ Medicaid ☐ Medicare Select State ?

Provider Type: *

☐ Individual Physician

☐ Billing Organization

☒ Facility / Group

If you are a Hospital, Clinic, IPA/Group, or Agency staff, this request option allows you to submit claims, view status of claims and other functionalities as well. Please enter your Tax ID and Provider ID. If Provider ID is unknown, please enter NPI, State License, Medicaid Number and Medicare Number. First user registered will be the primary administrator on the account. The primary or their assigned administrator can invite other users to assist in the workings of the account, such as submission of claims, service requests/authorizations, viewing status etc. The administrator will have access to all the functionalities. The linked users will have access as per the access levels granted by the primary administrator.

* Tax Identification Number: ?

* Provider ID: ?

Enter any 3 of the below if you don't know your Provider Id

NPI: ?

State License Number: ?

Medicaid Number: ?

Medicare Number: ?

DEA Number: ?

[Next](#) [Cancel](#)

1. Select the between *Medicaid* or *Medicare*. If you selected Medicaid, please select State from dropdown menu.
2. Select a *Provider Type* (Individual Physician, Billing Organization or Facility/Group) A description for each Provider Type will appear depending on which one is selected.

New Provider Registration (cont.)

Enter Tax ID Number and Provider ID number.

If you do not Provider ID, enter 3 out of 5 of other validating information

NPI

State License Number

Medicaid Number

Medicare Number

DEA Number

Click Next and the page will load an additional section for Authentication Details.

* Tax Identification Number: ?

* Provider ID: ?

Enter any 3 of the below if you don't know your Provider Id

NPI: ?

State License Number: ?

Medicaid Number: ?

Medicare Number: ?

DEA Number: ?

Authentication Details

The Authentication Details section appears after inputting the appropriate information for the Provider Information. All fields in the Authentication Details sections are *required*.

Welcome to the Provider Registration Page

If you have any questions about the registration process, Please visit our [How To Register\(FAQ\)](#)

[FAQ](#)

For more information please call our Provider Services Help Desk 1 (888) 665-4621

Provider Information

Are you registering for: ☒ Medicaid ☐ Medicare Select State ?

Provider Type: *

☒ Individual Physician
 ☐ Billing Organization
 ☐ Facility / Group

The Individual Physician role allows you to create and manage individual user Accounts. If you are an Individual Physician who also does billing use Facility/Group to create an account, once your account has been setup, you will be able to create Individual User Accounts. Individual User Accounts can verify eligibility, check claims status only, and other features based on you. A Provider ID is required. If you do not know your ID, enter your NPI, State License, Medicaid Number and Medicare Number, DEA (3/5 options).

Note: Please register as a "Facility/Group" if you submit claims on your behalf and receive payments and you have a valid TIN number.

* Tax Identification Number: ?

* Provider ID: QMP000003573307 ?

Enter any 3 of the below if you don't know your Provider ID

NPI: ?

State License Number: ?

Medicaid Number: ?

Medicare Number: ?

DEA Number: ?

Authentication Details

First Name:

Last Name:

* Email:

* Confirm Email:

* Security Questions:

Select

Select

Select

* Enter the code shown in the Text box: dZfQ5g Refresh ?

This input is to verify whether you are a human visitor and to prevent automated spam submissions

* User ID: ?

[Check Availability](#)

* Password: ?

* Confirm Password:

Enter answers in the corresponding fields:

☐ I accept [Provider Online User Agreement](#) ?

Register
Reset
Cancel

Authentication Details (cont.)

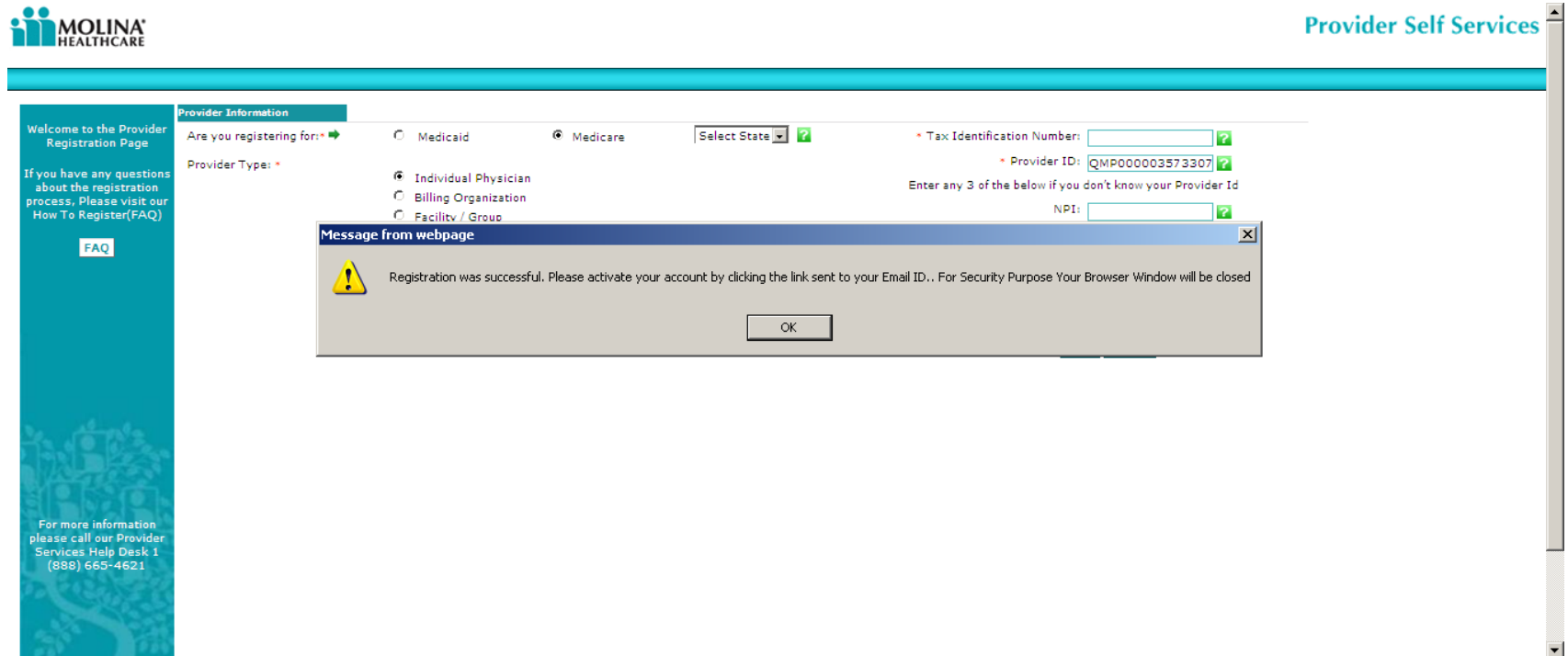


The screenshot shows a web form titled "Authentication Details". It contains several input fields and buttons. On the left, there are fields for "First Name" (John), "Last Name" (Smith), "Email" (john.smith@gmail.com), and "Confirm Email" (john.smith@gmail.com). Below these are three "Security Questions" with dropdown menus: "What is your mother's maiden name?", "In which city you were born?", and "What was your childhood nickname?". To the right of these questions is a text box for a CAPTCHA code, showing "dZfQ5g", with a "Refresh" button and a question mark icon. Below the CAPTCHA is a checkbox labeled "I accept Provider Online User Agreement". On the right side of the form, there is a section for "User ID" (JSmith_1) and "Password" (masked with dots), with a "Check Availability" link. Below the password field are three text boxes labeled "Test1", "Test2", and "Test3". At the bottom right, there are three buttons: "Register", "Reset", and "Cancel", followed by a small icon of three people.

- *Enter First Name then Last Name.*
- *Enter email address in E-mail and Confirm E-mail field.*
- *Enter User ID and Password then confirm password. (User ID and Password need to be formatted within specified conditions.)*
- *Select and enter responses to the security questions.*
- *Enter Captcha Code and Accept Provider Online User Agreement.*
- *Click **Register** to continue.*

Account Activation

If your registration was successful, you will see the message at the top of the following screen.



The screenshot displays the Molina Healthcare Provider Self Services registration page. On the left, a teal sidebar contains the Molina Healthcare logo, a welcome message, a link to the FAQ, and contact information for the Provider Services Help Desk. The main content area is titled 'Provider Information' and includes fields for 'Are you registering for?' (Medicaid, Medicare), 'Select State', 'Tax Identification Number', 'Provider ID', and 'NPI'. A modal window titled 'Message from webpage' is open, displaying a yellow warning icon and the text: 'Registration was successful. Please activate your account by clicking the link sent to your Email ID.. For Security Purpose Your Browser Window will be closed'. An 'OK' button is at the bottom of the modal.

- After registration is done, an activation link will be sent to your account and this page will appear. Click *OK*. Go to your e-mail to activate account and you will be sent to the *Provider Services Login Page*

Forgot Password

If you are unable to remember your password at any time, you can select a new one at the login page. This function is available to Admin Users only.

- **Click Forgot Password.**
- **Enter the three answers you provided at registration.**
- **Click Submit.**
- **Enter New Password.**
- **Enter Confirm Password.**
- **Click Submit.**

Provider Self Services

User ID:

Password:

Accept & Login

Forgot Password

[New Provider Registration](#)
[Access and Compatibility Information](#)
[View FAQs](#)
[Contact Us](#)
For technical assistance with this website please call **1-866-449-6848**

Forgot Password

User ID:

Questions	Answers
Secret Question	
In which city you were born?	<input type="text"/>
What is your month of birth?	<input type="text"/>
What is your Favorite sport team?	<input type="text"/>

Submit **Reset** **Cancel**

Change Password

User ID:


New Password: [Password Rules](#)

Confirm Password:

Submit **Reset** **Cancel**

Facility/Group – Home Page

If you registered multiple pay-to entities, the drop-down list at the top of the page will allow you to toggle to each. This list will not appear for Individual Practitioners or Facility/Groups who have registered only one pay-to.



12345678 - xxx3551 - HIGHLINE FOOT & ANKLE CLINIC
12345678 - xxx3551 - HIGHLINE FOOT & ANKLE CLINIC
12345678 - xxx4294 - DUPONT MEDICAL CLINIC
12345678 - xxx5438 - WENDY A WEEKS, MD
12345678 - xxx7079 - ST ANTHONY FAMILY MEDICINE
12345678 - xxx8367 - NW SURGICAL ASSOCS TACOMA
12345678 - xxx4579 - LAKES ANESTHESIA

Home
MemberEligibility

EligibilityListing
Download
Logout

Medicare is available for Medicare Members. Please click [Contact Molina](#) to locate the Molina Medicare Member Services telephone numbers.

Newsletter

Newsletters

Recent Service Requests *

[Show Recent Service Requests](#)
* Displays the last 30 days' most recent 5 Service Requests based on Date of Service

Recent Claims *

[Show Recent Claims](#)
* Displays the last 30 days' most recent 5 Claims based on Date of Service.
Information on claims accepted into the adjudication system is current as of 3/4/2009 12:29:00 AM

Recent Claim Files

You have no claim files in last 30 days.
[View more Claim files](#)

Nurse Advice Reports

You have no Nurse Advice Reports in last 30 days.
Nurse Advice Reports are current as of 3/4/2009 12:29:00 AM
[View more Nurse Advice Reports](#)

Provider Self Services

Welcome
HIGHLINE FOOT & ANKLE CLINIC_FMG

[Change Password](#)
[View / Update Profile](#)
[Manage Office Users](#)
[Manage Providers](#) new
[Edit Questionnaire](#)
[Contact Molina](#)
[View FAQs](#)
[NPI Submission](#)
[What's New](#) new

Find A Provider

Zip Code:
Specialty:
[Quick Search](#)

Forms

[Prior Authorization Guide](#) new

Admin Functions

Admin users will have additional selections available in the Welcome menu (below) that do not appear for other users. These links are used to create and manage additional user accounts, manage the pay-to entities that will be accessed by all users. These Admin-related functions include:

- View / Update Profile
- Manage Office Users
- Delete Account
- Manage Providers

Welcome

Provider Name

- [Change Password](#)
- [View / Update Profile](#)
- [Manage Office Users](#)
- [Delete Account](#) **new**
- [Manage Providers](#) **new**
- [Contact Molina](#)
- [View FAQs](#)
- [NPI Submission](#)
- [What's New](#) **new**

View / Update Profile

View / Update Profile displays the following page. You can update any of the information in the Contact and Account Self Services section.

Click **Edit** to begin. The Save and Cancel buttons will display. Update your profile information.

Click **Save**.

Click **Cancel** to return to the previous page.

[NPI Submission](#)

My Profile

General Information			
Name:	John P. Garrett,	Title:	
Status:	Active	Credential Status:	
Provider Type:	Individual Practitioner	Federal Tax ID:	10987654321
License Number:		License Effective Date:	
License Termination Date:		Ethnicity:	NO ETHNICITY
Date Of Birth:		Gender:	

Specialty	
Specialty Type	Specialty
Primary Care	

Languages	
Language Code	Description
English	

Contact Information			
Mailing Address			
Address 1:	PO Box 100	Address 2:	
State:	FL	City:	MIAMI
County:	MIAMI-DADE	Zip:	33126
Email:	pgarrent.droffice.com		
Physical Address			
Address 1:	4750 NW 7TH ST	Address 2:	STE #1
State:	FL	City:	MIAMI
County:	MIAMI-DADE	Zip:	33126
Phone Numbers			
Primary Phone Number:	- -	Mobile Number:	- -
Secondary Phone Number:	- -		
Account Self Services			
Secret Questions		Answers	
In which city you were born?		city	
What is your favorite color?		color	
What is your mother's maiden name?		mom	

Edit

Manage Users

The Manage Users link displays the following page. Here you can create invite users, as well as lock, unlock, remove access and update user roles.

[Home](#)
[MemberEligibility](#)
[Claims](#)
[CHDP/GUHF](#)
[Service Request/Authorization](#)
[ProviderSearch](#)
[EligibilityListing](#)
[Download](#)
[Miscellaneous](#)
[Logout](#)

Welcome to
Provider Services
Manage Users

Filter Users

☐ Administrator(0)
☐ Locked(0)
☒ Active(17)

Go

Host Admin(s)
abateman

For more information
please call our
Provider Services Help
Desk 1 (888)
665-4621

Manage Users

This page allow you to lock/unlock, remove access, invite users and update user roles

Click to invite users to join your group [Invite Users](#)

User ID:
 Email ID:
 Date Created:

(mm/dd/yyyy)

Manage Users List

Select	User ID	SSO User ID	Email ID	Date Created	Status
<input type="checkbox"/>	amrodriguez		Pandurengan.GaneshSaravanan@MolinaHealthCare.Com	05/05/2009	Active
<input type="checkbox"/>	auroracastro		Pandurengan.GaneshSaravanan@MolinaHealthCare.Com	08/06/2009	Active
<input type="checkbox"/>	cordin924		Pandurengan.GaneshSaravanan@MolinaHealthCare.Com	04/07/2009	Active
<input type="checkbox"/>	edamian		Pandurengan.GaneshSaravanan@MolinaHealthCare.Com	04/06/2009	Active
<input type="checkbox"/>	front2_0		Pandurengan.GaneshSaravanan@MolinaHealthCare.Com	06/15/2010	Active
<input type="checkbox"/>	gflores		Pandurengan.GaneshSaravanan@MolinaHealthCare.Com	10/05/2006	Active
<input type="checkbox"/>	gsardina		Pandurengan.GaneshSaravanan@MolinaHealthCare.Com	06/24/2010	Active
<input type="checkbox"/>	ibaletto		Pandurengan.GaneshSaravanan@MolinaHealthCare.Com	10/05/2006	Active
<input type="checkbox"/>	jvadakkumcherry		Pandurengan.GaneshSaravanan@MolinaHealthCare.Com	09/28/2009	Active
<input type="checkbox"/>	kpadilla		Pandurengan.GaneshSaravanan@MolinaHealthCare.Com	07/05/2010	Active

Showing 1-10 of 17 per page

[Export](#)
[Lock](#)
[Unlock](#)
[Remove Access](#)
[Promote as Admin](#)
[Revoke Admin](#)

Click on the user id to modify level of access for the user.

Manage Users (cont.)

Each user will need to be given a role before they can access e-Portal functions. To assign user roles, click the User ID and the Manage User Screen page will appear.

Manage User Screen

User Details
User Id:

Functionality Access [Role Details](#)

Provider	Role
SAN DIEGO FAMILY CARE - 952700856 - xxx0773	<input type="text" value="Clinical"/>

- Select a **role** from the drop-down (Clinical, Non-Clinical, Biller, Reporting, Pharmacy, All Access, Administrator and No Access).

ROLE

- Select—
- Clinical
- Non-Clinical
- Biller
- Reporting
- Pharmacy
- All Access
- Administrator
- No Access

Invite Users

Account Administrators can invite users to be have access to the same account with either the same or different access levels.

Home MemberEligibility Claims CHDP/GUHF Service Request/Authorization ProviderSearch EligibilityListing Download Miscellaneous Logout

Welcome to
Provider Services
Manage Users

Filter Users
☐ Administrator(0)
☐ Locked(0)
☒ Active(17)
 Go
 Host Admin(s)
 abateman

For more information
please call our
Provider Services Help
Desk 1 (888)
665-4621

Manage Users
This page allow you to lock/unlock, remove access, invite users and update user roles

Click to invite users to join your group [Invite Users](#)

User ID:

Search Clear

Manage Users List

Select	User ID	
<input type="checkbox"/>	amrodriquez	
<input type="checkbox"/>	auroracastro	
<input type="checkbox"/>	crondin924	
<input type="checkbox"/>	edamian_	
<input type="checkbox"/>	front2_0	
<input type="checkbox"/>	gflores_	
<input type="checkbox"/>	gsardina	
<input type="checkbox"/>	jbaletto	Pandurengan, GaneshSaravanan@molinahealthcare.com
<input type="checkbox"/>	jvadakkumcherry	Pandurengan, GaneshSaravanan@MolinaHealthCare.Com
<input type="checkbox"/>	kpadilla	Pandurengan, GaneshSaravanan@MolinaHealthCare.Com

Showing 1-10 of 17 per page

Click on the user id to modify level of access for the user

Export Lock Unlock Remove Access Promote as Admin Revoke Admin

Invite Users

Grant Access

Enter Email ID

Enter Email ID

Enter Email ID

Enter Email ID

Role Type

--Select--

--Select--

--Select--

--Select--

If a role type is not selected, it will be defaulted to basic access

Invite

Invite

Invite

Invite

Add More

Remove

Invite All

Date Created	Status
05/05/2009	Active
08/06/2009	Active
04/07/2009	Active
04/06/2009	Active
06/15/2010	Active
10/05/2006	Active
06/24/2010	Active
10/05/2006	Active
09/28/2009	Active
07/05/2010	Active

Page 1 of 2

- To invite a new user, click *Invite Users* link and window will appear. Enter e-mail, select role type and click invite. You can also add more users to invite multiple users at one time.

Delete Account

If you are not the correct Admin User for an account you have registered, you may delete the account using the Delete Account option.

- Log in under the account to be deleted and *click Delete Account* on the Welcome menu.
- *Click Delete Account.*
- *Click OK* to continue.
- Each Office User will receive a secure email notification that the account has been deleted.
- *Click Cancel* to return to the previous page.

Delete Provider Self Services Account

Warning: If you delete this Provider Self Services account, all associated Office Users will also be removed. The current account will no longer be accessible and the Provider ID(s) currently registered under this account will be available for registration under new Admin User accounts or existing Admin User accounts.

To keep this account active and remove one or more provider IDs from this account, please select [Manage Providers](#).

To keep this account active and delete one or more Office Users from this account, please select [Manage Office Users](#).

To continue with account deletion, click the button below.

Delete Account

Cancel

Windows Internet Explorer



You are about to delete your account! Your session will be terminated and you will be redirected to the login page!. Press OK to continue.

OK

Cancel

Manage Providers – Group/Facility

As the administrator, you may add as many additional pay-to entities as needed.

1. Click **Add** to add providers.
2. Click **Submit** to complete the registration.

Registered Providers

Tax ID	Provider ID	Provider Name	Molina Status	
1234567890	QMP0000012341	HIGHLINE FOOT & ANKLE CLINIC	Active	Delete
1234567890	QMP0000012342	DUPONT MEDICAL CLINIC	Active	Delete
1234567890	QMP0000012343	WENDY A WEEKS, MD	Active	Delete
1234567890	QMP0000012344	ST ANTHONY FAMILY MEDICINE	Active	Delete
1234567890	QMP0000012355	NW SURGICAL ASSOCS TACOMA	Active	Delete
1234567890	QMP0000012330	LAKES ANESTHESIA	Active	Delete
<input type="text"/>	<input type="text"/>			Add

Submit

Note: If the TIN and the Provider ID are validated against Molina's database, the Provider Name will display in the list, as shown above.

Manage Providers – Group/Facility

Each TIN/Provider ID can have only one Admin User. If an account has already been created, it must be deleted before you can complete the registration process.

- The error message below will alert you and provide further instructions if the account you are attempting to register is already registered.

Registered Providers

Tax ID Number	Provider ID	Provider Name	Molina Status	
383324611	PRO100611	ABC FAMILY HEALTH CENTER	Active	Delete
<input type="text" value="310283773"/>	<input type="text" value="qmp000003641363"/>			Add

The TIN and Provider ID entered is currently registered and cannot be added to this account. If you believe you should be the administrator of this Provider ID, please contact the current administrator and request that they delete their existing account. If you need assistance, please contact a Molina Help Desk Technician at 866-449-6848.

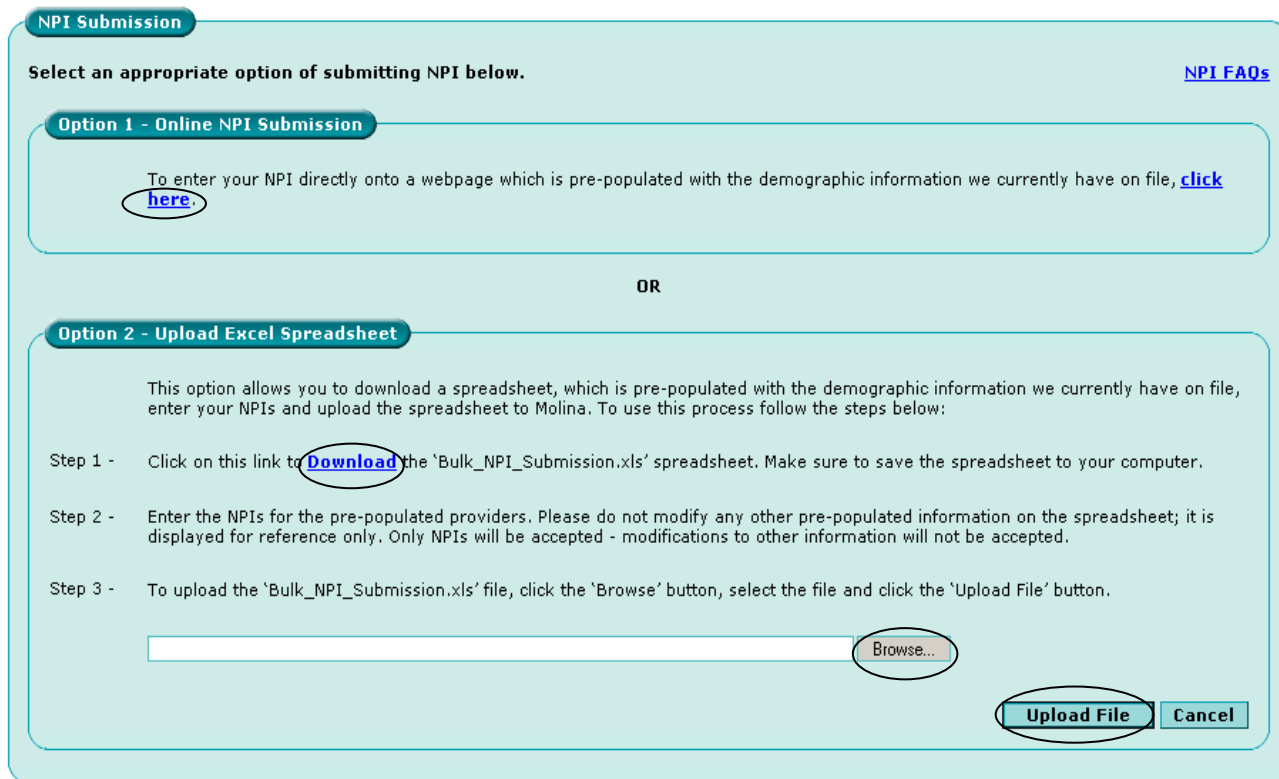
Submit

The TIN and Provider ID entered is currently registered and cannot be added to this account. If you believe you should be the administrator of this Provider ID, please contact the current administrator and request that they delete their existing account. If you need assistance, please contact a Molina Help Desk Technician at 866-449-6848.

NPI Submission

There are two ways to register Provider NPI numbers.

- Option 1 – *Click the first blue link* to manually register your Provider's NPI numbers.
- Option 2 - *Click Download* to access the Excel File template to submit Provider's NPIs by batch. After updating the file with the NPI numbers, save the file. *Click Browse* to locate the file, and then *click Upload File*.



NPI Submission

Select an appropriate option of submitting NPI below. [NPI FAQs](#)

Option 1 - Online NPI Submission

To enter your NPI directly onto a webpage which is pre-populated with the demographic information we currently have on file, [click here](#)

OR

Option 2 - Upload Excel Spreadsheet

This option allows you to download a spreadsheet, which is pre-populated with the demographic information we currently have on file, enter your NPIs and upload the spreadsheet to Molina. To use this process follow the steps below:

Step 1 - Click on this link to [Download](#) the 'Bulk_NPI_Submission.xls' spreadsheet. Make sure to save the spreadsheet to your computer.

Step 2 - Enter the NPIs for the pre-populated providers. Please do not modify any other pre-populated information on the spreadsheet; it is displayed for reference only. Only NPIs will be accepted - modifications to other information will not be accepted.

Step 3 - To upload the 'Bulk_NPI_Submission.xls' file, click the 'Browse' button, select the file and click the 'Upload File' button.

[Browse...](#)

[Upload File](#) [Cancel](#)

NPI Submission – Manual Entry

Users may enter NPIs for Pay-to, Rendering, and Sub-Part providers.

1. The Pay-To Information section will populate from Molina's database.
2. *Enter the NPI number.*
3. *Click Next* to register Rendering Providers.

NPI Submission

Pay-To NPI | [Rendering NPI](#) | [Subpart NPI](#) | [Summary](#) [Back to NPI Submission Options](#) | [NPI FAQs](#)

Enter your NPI and click the next button to go to the next page.

If you note any discrepancies in the demographic information listed please contact your Provider Service Representative.

Pay-To NPI Information

NPI:

Name:

Address 1:

Address 2:

City:

State:


92408

Zip Code:

Provider ID:

Next >>

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NPI Registration – Manual Entry (cont.)

Enter the Rendering Providers' NPI numbers.

NPI Submission

[Pay-To NPI](#) | [Rendering NPI](#) | [Subpart NPI](#) | [Summary](#)
[NPI FAQs](#)

Enter the NPIs for your rendering providers, if any, and click the next button to go to the next page.

Molina Healthcare shows these providers affiliated with your medical group. If you note any discrepancies please contact your Provider Service Representative.

Rendering NPI Information							
NPI	Name	Address 1	Address 2	City	State	Zip Code	Provider ID
0987654321	ABA, ALAN	3946 NORWOOD AVE		SACRAMENTO	CA	95838	QMS0000011
1234567890	BANYA, JOHN	3000 L ST	STE 114	SACRAMENTO	CA	95816	QMS000100
	LAMB, SAMUEL	887 E 2ND ST	STE A	POMONA	CA	91766	QMS000012
	MASTER, PAUL	954 SACRAMENTO AVE		WEST SACRAMENTO	CA	95605	QMS000005

<< Previous
Next >>

NPI Registration – Manual Entry (cont.)

- Click **Next** to enter the Subpart **NPI numbers**, if applicable.

NPI Submission

[Pay-To NPI](#) | [Rendering NPI](#) | [Subpart NPI](#) | [Summary](#)
[NPI FAQs](#)

Enter the NPIs for your subparts, if any, and click the next button to go to the next page.

Molina Healthcare shows these entities as subparts of your facility. If you note any discrepancies please contact your Provider Service Representative.

Subpart NPI Information							
NPI	Name	Address 1	Address 2	City	State	Zip Code	Provider ID
1000456789	McDougal Westland Inc.	3600 FORD ROAD		SACRAMENTO	CA	95838	QMS0000050

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Next >>

NPI Registration – Manual Entry (cont.)

Click the **check box** agreement.

Click **Submit** to complete the NPI registration.

NPI Submission

[Pay-To NPI](#) | [Rendering NPI](#) | [Subpart NPI](#) | [Summary](#)

[NPI FAQs](#)

Please review the summary below. If you need to make changes click the Previous button. If all information is accurate click the Submit button.

You will continue to receive the NPI registration message upon logging in until you have entered your NPI information for all affiliated providers and/or subparts.

If you note any discrepancies in the demographic information listed please contact your Provider Service Representative.

Pay-To NPI Information

NPI:	100456780						
Name:	John P. Garrett, MD, Inc.						
Address 1:	2260 E. Palmdale Blvd.			Address 2:	Suite J		
City:	Sacramento			State:	CA		
Zip Code:	92408			Provider ID:	PPT0000001234		

Rendering NPI Information

NPI	Name	Address 1	Address 2	City	State	Zip Code	Provider ID
0987654321	Aba, Alan	3946 Northwood Ave.		Sacramento	CA	95838	
1234567890	Banya, John	3000 L. Street		Sacramento	CA	95816	
0989898980	Lamb, Samuel	877 E. 2nd ST.		Pomona	CA	91786	
0076543210	Master, Paul	954 Sacramento Ave.		Sacramento	CA	95605	

Subpart NPI Information

NPI	Name	Address 1	Address 2	City	State	Zip Code	Provider ID
1000000789	McDougal Westland Inc.	3600 Ford Road		Sacramento	CA	95838	

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☐ I agree that the information I am submitting to Molina Healthcare is true and correct.

[<< Previous](#)

[Submit](#)

[Cancel](#)

National Provider Information FAQ

The NPI Frequently Asked Questions (FAQ) provides you with additional information.

- Click any blue underlined link to see its answer.

NPI FAQs

1. [What is a National Provider Identifier \(NPI\)?](#)
2. [How can I submit my NPI to Molina Healthcare?](#)
3. [What is a Pay-To provider?](#)
4. [I don't have internet access, how do I submit my NPI?](#)
5. [Can I make corrections to the demographic information displayed on the NPI collection screens or excel spreadsheet?](#)
6. [Can I enter the same NPI for multiple subparts?](#)
7. [If I have already submitted my NPI to Molina Healthcare do I need to resubmit it via the Provider Self Services Portal?](#)
8. [When will Molina Healthcare end its NPI Contingency Plan?](#)
9. [When will Molina Healthcare accept the revised CMS \(HCFA\) 1500 claim form?](#)
10. [When will Molina Healthcare accept the revised UB claim form?](#)
11. [When will Molina Healthcare accept the NPI in the 837 EDI format?](#)
12. [When will I be required to use the NPIs on my claims?](#)
13. [I submit paper claims only. Will I need an NPI?](#)
14. [Are all providers required to submit NPIs?](#)
15. [Will Molina Healthcare accept Medicaid ID numbers after May 23, 2008?](#)
16. [How many NPI numbers will be required on a claim?](#)
17. [Must I submit an NPI for each provider at the clinic?](#)
18. [Is Molina Healthcare collecting NPIs for non-contracted providers?](#)
19. [Does Molina Healthcare need my taxonomy code?](#)