

WellFirst Health

Provider Portal Registration User Guide

December 2020

WellFirst Health Provider Portal

The secure WellFirst Health Provider Portal allows users 24/7 access to resources and self-service applications to simplify everyday tasks, promote efficiencies in business, and streamline electronic transactions.

Individuals need to register in order to create a Provider Portal account. Once a Portal account is created and verified, users can access information and perform tasks specific to their assigned Portal role(s). This Provider Portal Registration User Guide details the registration process to create individual and organization Provider Portal accounts.

Google Chrome is recommended for optimum performance when using the Provider Portal.

Table of Contents

I. Access the Provider Portal	2
II. Create An Account	2
III. Organization Registration	3
IV. Individual Registration	6

All WellFirst Health products and services are provided by subsidiaries of SSM Health Care Corporation, including, but not limited to, SSM Health Insurance Company and SSM Health Plan. Provider resources and communications are branded as WellFirst Health.



I. Access the Provider Portal

Access the WellFirst Health Provider Portal directly at <https://providerauth.wellfirstbenefits.com/SignIn>.

Note: At no point during the registration process can you go back to a previous screen. If information needs to be corrected, you will be required to restart the registration process. Please verify all information is correct before continuing to the next screen.

II. Create An Account

To begin registration, click **Sign up** at the bottom of the *Log In* page.

The image displays two screenshots of the WellFirst Health Provider Portal registration process. The left screenshot shows the 'Log In' page with a 'Sign up' link at the bottom. A green arrow points from the 'Sign up' link to the right screenshot. The right screenshot shows the 'Please select your account type' page with options for 'Individual' and 'Organization' accounts, along with NPI and TIN input fields.

There are two types of Portal accounts:

- **Individual** – for new individual users registering to have access to an existing Provider Portal account for an organization.
- **Organization** – for an organization registering to create a new Provider Portal account.

Tip

An Organization account must be registered before Individual users can register.

All individual users registering to gain access to an existing Organization account must register with the same Tax ID and NPI that was used when the Organization account was created. If either the Tax ID or NPI do not match, a new account will be created for the organization.

III. Organization Registration

To register as an organization, select **Organization** as your account type and enter the most commonly billed National Provider Identifier (NPI) and Tax Identification Number (TIN) that your Organization uses when conducting business. (All Organization registration should be completed using an Organizational NPI rather than a professional NPI.) Then, click **Continue**.

If you are registering as a new user under an existing Organization account, refer to the **Individual Registration** section of this user guide (page 6).

Please select your account type

Individual Select to register a new individual user under an existing Organization account on the Provider Portal

Organization Select to register your Organization for the first time

NPI TIN

1234567890 00-1234567

To safeguard access to data, registration will be finalized at the health plan. Expect to receive a communication regarding your access within two business days of this request.

CONTINUE

Already have an account? [Log in](#) instead.
Google Chrome is recommended for optimum performance.

Tip

If an Organization account has already been registered with the NPI and TIN entered, the following error message will appear:

17712 : An existing Organization was matched for the given NPI and TIN. Please select Individual to continue to register as a Individual with this Organization.

Please verify the NPI and TIN are correct. If so, please register as an Individual. If not, correct the information and proceed.

Complete the brief *Questionnaire* for your Organization and click **Continue**. The selected information will be used to populate the Organization information on the next screen. If any of the information does not appear correct, select the most appropriate as it can be changed on the next screen.

Questionnaire

Please select your most recent address:

- 123 SAMPLE LANE
- 999 PROVIDER DR
- 456 DOCTOR AVE
- 321 PHYSICIAN BLVD

Please select your name:

- DOCTORS OFFICE INC
- HELP HOSPITAL INC
- HELPFUL PHYSICIANS LLC
- HEAD SHOULDERS KNEES TOES CLINIC

Please select your primary taxonomy:

- 123456789X DOCTORS OFFICE
- 111X222333 PROFESSIONAL SERVICES
- 999Q12345X MEDICAL PROFESSIONAL
- 987654XX01 HEALTH SERVICES

Please select Doing Business As:

- PROFESSIONAL DOCTOR OFFICE
- HELPFUL HOSPITAL
- HELPFUL PHYSICIAN NETWORK
- HSKT CLINIC

CONTINUE

Already have an account? [Log in](#) instead.
Google Chrome is recommended for optimum performance.

Tip

This information is pulled directly from the National Provider Registry. If none of the options are accurate, please select whichever is most appropriate. This information can be updated on the next screen and will not impact portal functionality.

Organization Enrollment

The Organization Name, Doing Business As, and all address fields on the *Organization Enrollment* screen will be prepopulated from the Questionnaire above. Update these fields as desired, enter a Business Phone number and Email, and click **Continue**.

Organization Enrollment

Organization Name <input style="width: 95%; border: 1px solid #ccc;" type="text" value="SAMPLE PROVIDER INC"/>	Doing Business As <input style="width: 95%; border: 1px solid #ccc;" type="text" value="SAMPLE PROVIDER GROUP"/>	
Address Line One <input style="width: 95%; border: 1px solid #ccc;" type="text" value="123 SAMPLE ST"/>	Address Line Two <input style="width: 95%; border: 1px solid #ccc;" type="text" value="STE, Floor, Apt"/>	
City <input style="width: 95%; border: 1px solid #ccc;" type="text" value="EXAMPLE"/>	State <input style="width: 45%; border: 1px solid #ccc;" type="text" value="EX"/>	Zip <input style="width: 45%; border: 1px solid #ccc;" type="text" value="12345"/>
Business Phone <input style="width: 25%; border: 1px solid #ccc;" type="text" value="123"/> <input style="width: 25%; border: 1px solid #ccc;" type="text" value="456"/> <input style="width: 25%; border: 1px solid #ccc;" type="text" value="7890"/>		
Email <input style="width: 95%; border: 1px solid #ccc;" type="text" value="portaluser@email.com"/>	Primary NPI <input style="width: 95%; border: 1px solid #ccc;" type="text" value="1013338425"/>	Primary TIN <input style="width: 95%; border: 1px solid #ccc;" type="text" value="963963963"/>

CONTINUE

Already have an account? [Log in](#) instead.
 Google Chrome is recommended for optimum performance.

Clicking **Continue** will complete the Organization registration. You will then be directed to complete the Individual registration. The Individual registration portion must be completed in order to setup your user access.

Note: The Organization registration information is not saved until the Individual registration is completed. If the web browser is closed or you encounter an error prior to completing Individual registration, you will need to re-register beginning with the Organization registration.

Tip

The information in any of these fields (except for NPI and TIN) can be manually changed if it does not match how you want it to be displayed in the Provider Portal.

IV. Individual Registration

For registrants continuing the registration process from the Organization Registration, the primary NPI and TIN will be prepopulated on the *Individual Enrollment* screen.

All other registrants will register as an Individual (see page 3). Select **Individual** as your account type and enter the NPI and TIN that were registered for the Organization. Then, click **Continue** to move to the *Individual Enrollment* screen.

Individual Enrollment

First Name <input style="width: 95%;" type="text" value="Sample"/>	Last Name <input style="width: 95%;" type="text" value="Provider"/>
Phone <input style="width: 20%; text-align: center;" type="text" value="123"/> <input style="width: 20%; text-align: center;" type="text" value="456"/> <input style="width: 20%; text-align: center;" type="text" value="7890"/> <input style="width: 20%; text-align: center;" type="text" value="XXXX"/>	
Email Address - Login ID <input style="width: 95%;" type="text" value="portaluser@email.com"/>	Job Title <input style="width: 95%;" type="text" value="Provider"/>

You must verify your email address

Send Code

Verify

- 1) Click the send code button.
- 2) Then retrieve the code sent to the email address above.
- 3) Enter the code before pressing verify button.

Opt In/Out for Electronic Communications

Primary NPI 1013338425	Primary TIN 963963963
---------------------------	--------------------------

The first registered user under an organization will automatically be selected as the initial Site Administrator. By selecting this, you are agreeing that you will become this organization's initial Site Administrator.

CONTINUE

Already have an account? [Log In](#) instead.
Google Chrome is recommended for optimum performance.

Tip

If you are registering as an Individual under an Organization that has not yet registered, you will be directed to complete the Organization registration before you can register as an individual. If you believe there is already an account created for your Organization, please verify the TIN and NPI match those that were used for the registration of the account.

Enter **First Name**, **Last Name**, (work) **Phone**, (work) **Email Address**, and **Job Title**. The Primary NPI and Primary TIN will be prepopulated and cannot be changed.

The email address entered on the Individual Enrollment screen should be a work email address. It will be your provider portal username/login ID, and will need to be validated before proceeding.

Once the email address has been entered, click **Send Code**, which will send a six-digit code to the email address provided. A message will appear above this field once the code has been sent.

You must verify your email address

Email has been sent. Please check your inbox.

Send Code Enter email code here **Verify**

1) Click the send code button.
2) Then retrieve the code sent to the email address above.
3) Enter the code before pressing verify button.

Opt In/Out for Electronic Communications

Opt In

Primary NPI Primary TIN
1013338425 963963963

The first registered user under an organization will automatically be selected as the initial Site Administrator. By selecting this, you are agreeing that you will become this organization's initial Site Administrator.

CONTINUE

Already have an account? [Log in](#) instead.
Google Chrome is recommended for optimum performance.

Copy and enter the emailed code into the field next to the Send Code button and click **Verify**. Once verified, you will receive a green confirmation notice above this field.

Email Validated Successfully

Send Code 914651 **Verify**

1) Click the send code button.
2) Then retrieve the code sent to the email address above.
3) Enter the code before pressing verify button.

Opt In/Out for Electronic Communications

Opt In

Primary NPI Primary TIN
1013338425 963963963

The first registered user under an organization will automatically be selected as the initial Site Administrator. By selecting this, you are agreeing that you will become this organization's initial Site Administrator.

CONTINUE

Already have an account? [Log in](#) instead.
Google Chrome is recommended for optimum performance.

It may take a few moments for the code to be sent, so please only click **Send Code** once. If it is clicked multiple times, multiple codes will be sent and only the last code will be valid.

Opt In/Out for Electronic Communication

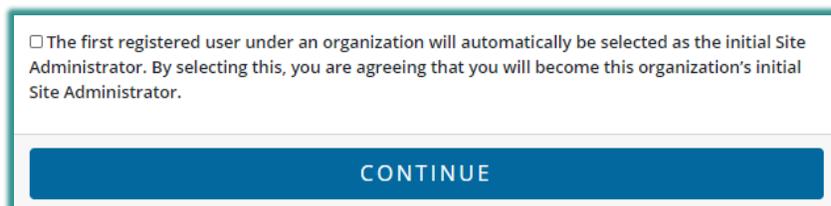
After validating the email address, select from the dropdown to either **Opt In** or **Opt Out** for electronic communications. Users who Opt In will receive certain communications electronically from the health plan.



A screenshot of a dropdown menu titled "Opt In/Out for Electronic Communications". The menu is open, showing "Opt In" as the selected option. A small downward arrow is visible on the right side of the dropdown box.

Site Administrator

The first Individual user to register for an organization will automatically become the organization's Site Administrator. You must check the checkbox agreeing to be the organization's initial Site Administrator in order to proceed. Site Administrators are responsible for managing their organization's portal users for tasks such as: approving new users and controlling access, managing individual user's access, and adding additional TINs or NPIs to the account.



A screenshot of a form section. It contains a checkbox with the following text: "The first registered user under an organization will automatically be selected as the initial Site Administrator. By selecting this, you are agreeing that you will become this organization's initial Site Administrator." Below the checkbox is a blue button labeled "CONTINUE".

Tip

There can be more than one Site Administrator for an organization. Additional Site Administrators can be added after they register, as detailed in the Provider Admin section of the [WellFirst Health™ Provider Portal User Guide](#).

If you are registering as an *Individual* user under an existing Organization account, you will **not** see the Site Administrator checkbox on the Individual Enrollment screen.

Once all the information has been entered on the *Individual Enrollment* screen, click **Continue** to proceed to setup your account security.

Access To Multiple Organization Accounts

Users now have the ability to obtain access to multiple Organization accounts with just one User ID. However, you need to register as an Individual under each Organization account separately. To do this, complete the Individual registration for the first account in its entirety. Then for all subsequent Organization accounts, register again as an Individual using the applicable TIN and NPI for that Organization account. Once the email address is verified on the *previous* screen, you will see the pop-up below to "merge accounts". Checking **YES** will allow you to access all your Organization accounts with one User ID (email address).

Once logged in, you can access each account individually from a dropdown, and quickly switch to the account you need to access without ever logging out. Click **Continue** on the bottom of the screen to complete the Individual registration for this Organization account.

Existing account found

An active account already exists with this email. Would you like to merge your current registration process to this existing account?

Yes

No

CONTINUE

Already have an account? [Log in](#) instead.
Google Chrome is recommended for optimum performance.

Tip

If you click **No** on the option to merge your accounts, you will be directed to enter a new email address which will create a separate login ID.

Password Setup

If this is the first time an email address (username) is being registered, you will be directed to setup your Password. Password requirements are visible on the screen and must be met in order to proceed.

Password Information

Password

..... 

Confirm Password

..... 

Password Complexity Requirements:

- Must be at least 8 characters
- Must contain at least one Lower case letter
- Must contain at least one Upper case letter
- Must contain at least one Number (0-9)
- Must contain at least one Symbol (e.g., !@#\#\$%()+_-=)

CONTINUE

Select the “eye” icon to view the entered password and verify it has been entered as intended. Once satisfied, click **Continue**.

Password Information

Password

Confirm Password

Password Complexity Requirements:

- Must be at least 8 characters
- Must contain at least one Lower case letter
- Must contain at least one Upper case letter
- Must contain at least one Number (0-9)
- Must contain at least one Symbol (e.g., !@\\#\$%()+_-=)

CONTINUE

Phone Verification

A valid phone number must be verified prior to completing registration. Check the preferred option to either receive a call or text verification.

Multi Factor Authentication Enrollment

In order to sign in to your account, we use multi-factor authentication, which requires you to provide a cell phone number and/or a number to be able to receive phone calls with a security code from our identity provider

Enroll SMS (Text) Verification

Enroll Voice (Call) Verification

CONTINUE

Once the verification option is selected, enter the phone number and click **Request Code**.

Multi Factor Authentication Enrollment

In order to sign in to your account, we use multi-factor authentication, which requires you to provide a cell phone number and/or a number to be able to receive phone calls with a security code from our identity provider

Enroll SMS (Text) Verification
 Enroll Voice (Call) Verification

Enroll In Text(SMS) Verification

<input type="text" value="Phone Number"/>	<input type="button" value="Request Code"/>
<input type="text" value="Verification Code"/>	<input type="button" value="Verify Code"/>

CONTINUE

Enter the code received into the blank field below the phone number and click **Verify Code**. You will receive a successful message when complete.

Please only click **Send Code** once. If it clicked multiple times, multiple codes will be sent and only the last code will be valid.

Multi Factor Authentication Enrollment

In order to sign in to your account, we use multi-factor authentication, which requires you to provide a cell phone number and/or a number to be able to receive phone calls with a security code from our identity provider

Enroll SMS (Text) Verification
 Enroll Voice (Call) Verification

Enroll In Text(SMS) Verification

<input type="text" value="123-456-7890"/>	<input type="button" value="Request Code"/>
<input type="text" value="441686"/>	<input type="button" value="Verify Code"/>

Text enrolled successfully.

CONTINUE

Terms & Conditions

After the phone validation, you will be taken to the last step which is the **Terms & Conditions**. These must be agreed to before registration can be completed. Read through the Terms & Conditions, scroll to the bottom of the page and click **Accept Terms & Conditions** to complete registration.

Single Sign-On and Provider Portal Terms and Conditions

This is a binding agreement ("Agreement") between SSM Health Plan, SSM Health Insurance Company, and Dean Health Service Company, LLC (together "We", "Us", or "Our") and you and your provider organization (individually and/or collectively "You" or "Your") which governs Your use of this Web Site ("Site") and all services ("Services") made available to You through this Web Site and Us and/or third parties. During registration on this Site, by clicking on the box that indicates your acceptance and references this Agreement, You agree to the terms of this Agreement. If you are entering into this Agreement on behalf of a company, legal entity, or individual provider, You represent that You have the authority to bind such person or entity and its Affiliates to this Agreement. If you do not have such authority, or if you do not agree with these terms and conditions, you must not accept this Agreement and may not use the Service. This Agreement is effective as of that date that you accept it.

1. Use. We hereby grant You a non-exclusive and non-transferable license for the term of this Agreement to use the Services. Your access to and use of the Services is subject to the terms and conditions of this Agreement and any other documentation necessary for Your use of the Services, and is permitted by Us solely for Your internal use and benefit; any other access or use is strictly prohibited. Access to certain Services may require You to provide Us or certain third parties with additional information.

2. User Access. The Site and Services will be accessible only to persons that have registered to use the Site and that You authorize to access the Site and receive the Services ("Users"). All User information provided to us, including without limitation enrollment information, must be current, accurate, and complete. By clicking on the box that indicates your acceptance and references this Agreement, you accept Our on-line user agreements ("User Agreements") for Our Site and Services. You are responsible for ensuring Users' compliance with the User Agreements, all acts or omissions by Users, and for any damages incurred as a result thereof. You may enable Users by submitting to Us a written request signed by Your authorized representative containing such User information as We may require and the desired access privileges for each User, or by such other means as We may approve in writing. You or any of Your authorized representatives may disable access to the Services for Users registered by and authorized by You. We will disable access to Users within one (1) business day of

ACCEPT TERMS & CONDITIONS

Registration Completion Confirmation

Once registration is completed a confirmation message will appear. A confirmation email will also be sent confirming successful registration. **Please be aware this is a confirmation of registration only, and not an approval of access.**

If both the Organization and Individual registration were just completed, the following confirmation will display:

Registration Completed

Your organization's registration is complete!

Please note: To safeguard access to your data, your registration will be finalized at the health plan. You will receive notification regarding your access within two business days of this request.

OK

The registration information provided will be reviewed by a Prevea360 Health Plan Administrator. Registrants will receive an email confirmation within two business days. If any further information is needed, the Prevea360 Health Plan Administrator will call to verify any details in question.

Non-Site Administrators who completed registration as Individuals under existing Organization accounts will need to be approved by the Administrator on the provider portal account. The registration information provided will be reviewed by the Organization's Site Administrator. Once the review is complete, a secure email will be sent to the email address that the registrant provided during registration.

Tip

If an email confirmation is not received within two business days, check to see if the email was delivered to your junk or spam email box.

- If approved, you will be granted access to the Provider Portal under the login created during registration.
- If access is denied, please contact the Organization Site Administrator with any questions. Individual users cannot be added without the approval of the Organization Site Administrator.

Thank you, and welcome to the WellFirst Health Provider Portal!