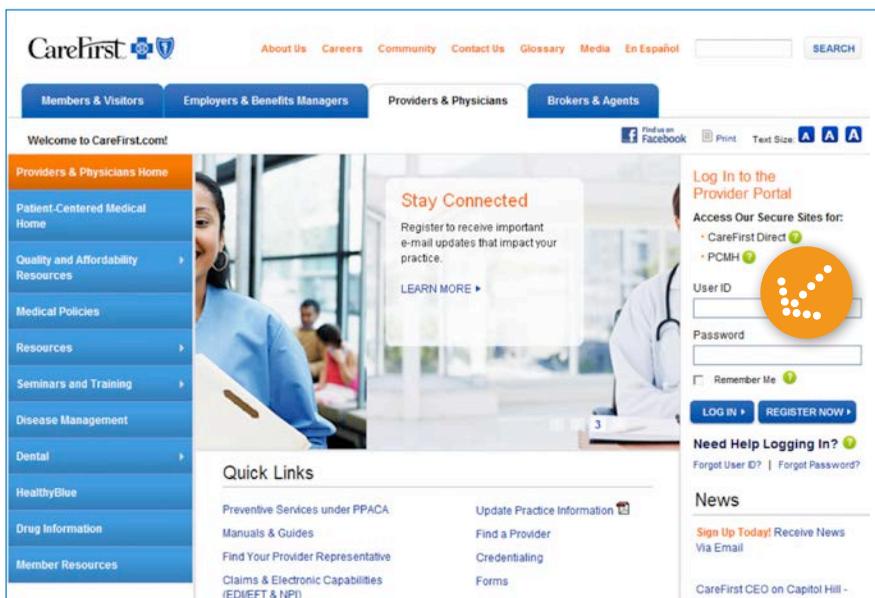


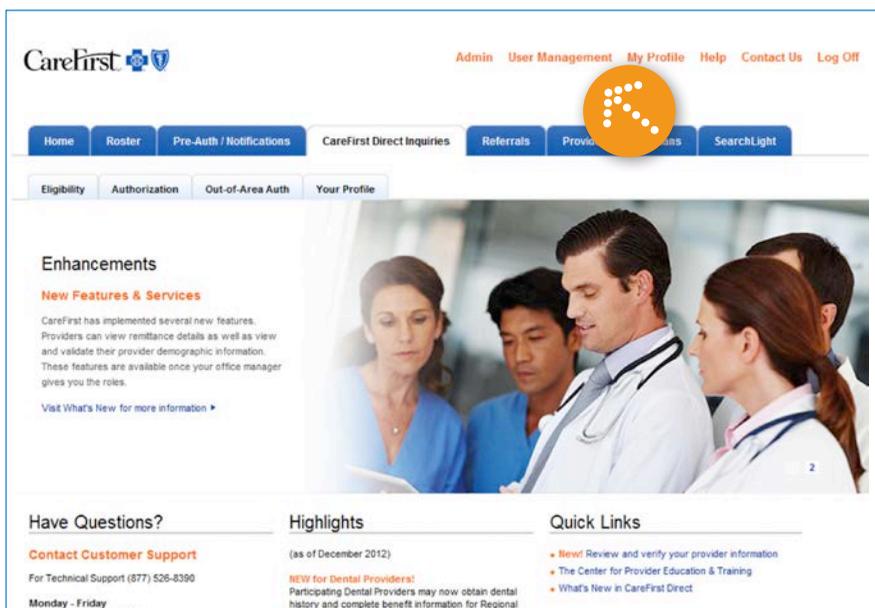
Provider Portal User's Guide

CREATING A PCMH USER

The following steps are to be used by your office's Portal Administrator to create new users in the CareFirst Patient-Centered Medical Home (PCMH) Provider Portal.



Log in to the Provider Portal.



Click on 'User Management'.

CareFirst  User Management My Profile Help 

Home Roster Referrals CareFirst Direct Providers & Physicians

User Management

Add New

Create User Create new users, assign user IDs and grant access to CareFirst Direct and the Provider Portal.

User Search

Select at least one search criteria. Wild cards(*) are allowed.

User ID: First Name:

Access Status: Last Name:

Click on 'Create User'.

CareFirst  User Management My Profile Help 

Home Roster Referrals CareFirst Direct Providers & Physicians

Create User

*Indicates required field

User ID * rtared	Start Date * 03/20/2012
First Name * rta	End Date * 03 / 20 / 2037
Middle Initial 	Phone 4105551212
Last Name * red	Ext
Full Name rta red	Fax
Tax ID 511111111	Pager
E-mail * rta.red@domain.com	
Who is the user * Select One	
PCMH access needed * <input type="radio"/> Yes <input checked="" type="radio"/> No	

Complete all of the required fields. Note—the user id must be unique. No other user in our systems can have the same user id.

Create User

*Indicates required field

User ID *
rtared

First Name *
rta

Middle Initial

Last Name *
red

Full Name
rta red

Tax ID
511111111

E-mail *
rta.red@domain.com

Who is the user *
Select One
 Select One
 Office Manager
 Office Staff
 Nurse Practitioner
 PCP
 Provider Billing Agent

Start Date *
05/29/2013

End Date *
05 / 29 / 2038

Phone

Ext

Fax

Pager

Make sure to indicate the appropriate user type.

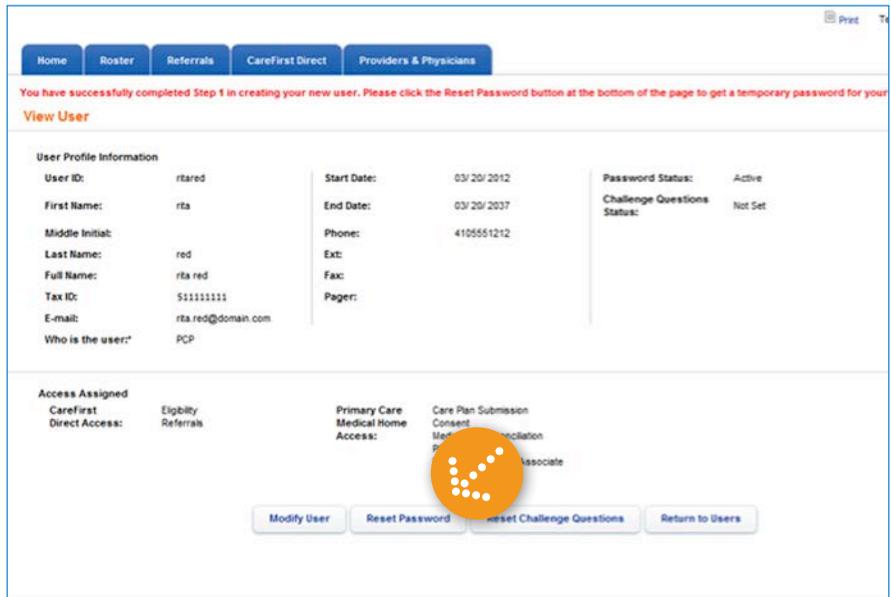
Who is the user *
PCP

PCMH access needed
 Yes No

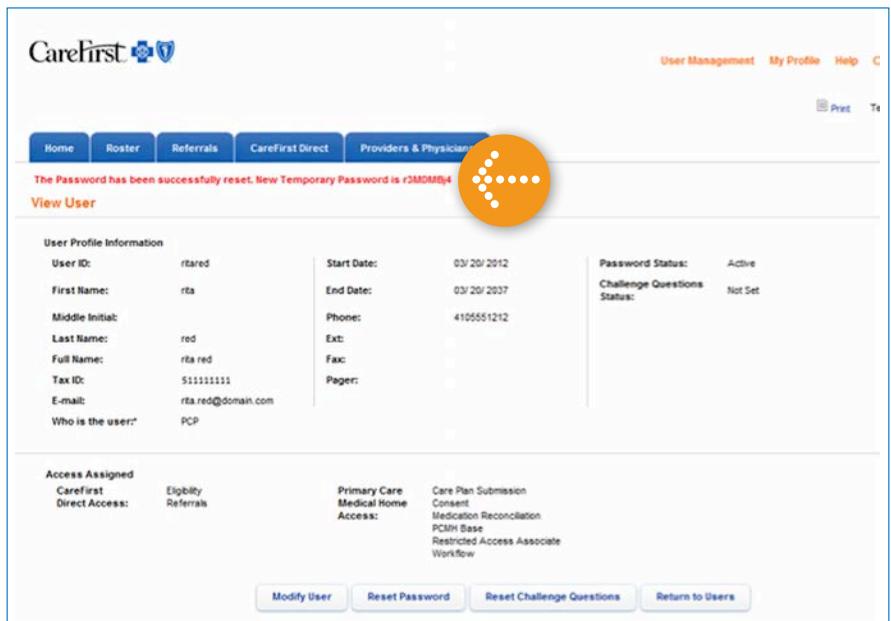
#	Permission for Carefirst Direct	Assigned
1	Admin for Office Managers Only	<input type="checkbox"/>
2	Appeals	<input type="checkbox"/>
3	Claims	<input type="checkbox"/>
4	Eligibility	<input checked="" type="checkbox"/>
5	Referrals	<input checked="" type="checkbox"/>
#	Permission for PCMH Applications	Assigned
6	Admin	<input type="checkbox"/>
7	Consent	<input checked="" type="checkbox"/>
8	PCMH Base	<input checked="" type="checkbox"/>
9	Restricted Access Associate	<input checked="" type="checkbox"/>
10	Workflow	<input checked="" type="checkbox"/>
#	Permission for PCPNurse Practitioner	Assigned
11	Care Plan Submission	<input checked="" type="checkbox"/>
12	Medication Reconciliation	<input checked="" type="checkbox"/>

Reset Cancel Submit

Be sure to indicate that PCMH access is required. Then, click the 'Submit' button.



Click 'Reset Password'.



Give the user the temporary password exactly as it appears on the screen. It is case sensitive.

Want to Learn More?

We offer a variety of webinars and seminars for your PCMH. To register, visit www.carefirst.com/providers > Seminars & Training or call our enrollment hotline at 877-269-2219.