

Provider Portal: Search Payment History

1. Go to the portal landing page and log in using your **User ID** and **Password**. If you do not have a User ID and Password, click **Register Now** or see the JOB+AID “**Registering on the Portal.**”

If you have already logged in, skip to step 2.

2. Click **Search Payment History** on the left side of the page or click the **Claims** tab at the top of the screen.

1

The screenshot shows the ARMedicaid Provider Portal landing page. At the top, there is a navigation bar with tabs: Home, Eligibility, Claims, Care Management, Provider Functions, Files Exchange, and Resources. The 'Home' tab is selected. Below the navigation bar, the page displays a welcome message for a PCP Provider. On the left side, there is a 'User Details' section with links for 'My Profile' and 'Manage Accounts'. Below that is a 'Provider' section with fields for Name, Provider ID, and Revalidation Date. On the right side, there is a 'Welcome Health Care Professional!' message with a photo of a doctor and a patient. Below the photo, there is a paragraph about the portal's commitment to making it easier for providers to perform their business. At the bottom left, there is a 'Provider Services' section with a red box highlighting the 'Search Payment History' link. Other links in this section include 'MAPIR'.

2

**ARMedicaid****HEALTHCARE PORTAL****JOB+AID**

- Fill in the appropriate search fields. Not all fields are required, including Payment Method, Payment Type or Payment ID. You must enter a **From** and a **To** to set the range for the **Issue Date**. The range cannot be greater than 90 days.

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Home | **Eligibility** | **Claims** | **Care Management** | **Provider Functions** | **Files Exchange** | **Resources**

[Search Claims](#) | [Submit Claim Dental](#) | [Submit Claim Inst](#) | [Submit Claim Prof](#) | [Search Payment History](#)

[Home](#) > [Search Payment History](#) Tuesday 01/24/2017 12:31 PM CST

Provider Name Role IDs

Search Payment History ?

Provider Information

Provider ID ID Type NPI Name

Location ID

* Indicates a required field.

Payment Method All Payment Type All Payment ID

Issue Date *From 10/26/2016 *To 01/24/2017

RS.0

- Click **Search**.

[Home](#) > [Search Payment History](#)

Provider Name Role IDs

Error
Issue From date and To must not exceed span of 90 days.

Search Payment History

Provider Information

Provider ID ID Type NPI Name

Location ID

* Indicates a required field.

Payment Method All Payment Type All Payment ID

Issue Date *From 09/04/2016 *To 01/24/2017

Issue From date and To must not exceed span of 90 days.

For more information call **1-800-457-4454**

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5. Your search results will appear in the **Search Results** window. You will see these details: **Issue Date, Payment Method, Payment Type, Payment ID, Total Paid Amount** and **RA Copy**. You can click on RA Copy and print a copy of the remittance advice.

Home | Eligibility | **Claims** | Care Management | Provider Functions | Files Exchange | Resources

Search Claims | Submit Claim Dental | Submit Claim Inst | Submit Claim Prof | **Search Payment History**

Home > Search Payment History Tuesday 01/24/2017 12:34 PM CST

Provider Name Role IDs

Search Payment History

Provider Information

Provider ID ID Type: NPI Name

Location ID

* Indicates a required field.

Payment Method: All Payment Type: All Payment ID:

Issue Date: *From: 05/01/2016 *To: 05/27/2016

Search Results

To see payment details, click on the payment ID link.
To access a copy of the Remittance Advice, select the "RA" icon. Access to the RA will require Adobe Acrobat Reader.

Total Records: 4

Issue Date	Payment Method	Payment Type	Payment ID	Total Paid Amount	RA Copy (PDF)
05/26/2016	EFT			\$7,191.03	
05/19/2016	EFT			\$8,146.05	
05/12/2016	EFT			\$9,005.90	

1 2

[Export results...](#)

PDF Files require [Adobe Acrobat Reader](#)

RS.0

6. Click on **Payment ID**.

Search Results

To see payment details, click on the payment ID link.
To access a copy of the Remittance Advice, select the "RA" icon. Access to the RA will require Adobe Acrobat Reader.

Total Records: 4

Issue Date	Payment Method	Payment Type	Payment ID	Total Paid Amount	RA Copy (PDF)
05/26/2016	EFT			\$7,191.03	
05/19/2016	EFT			\$8,146.05	
05/12/2016	EFT			\$9,005.90	

1 2



7. The **View Payment Details** screen will provide payment summary information.

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[Home](#) | [Eligibility](#) | [Claims](#) | [Care Management](#) | [Provider Functions](#) | [Files Exchange](#) | [Resources](#)

[Search Claims](#) | [Submit Claim Dental](#) | [Submit Claim Inst](#) | [Submit Claim Prof](#) | [Search Payment History](#)

[Claims](#) > [Search Payment History](#) > [View Payment Details](#) Wednesday 01/25/2017 11:42 AM CST

Provider Name Role IDs

View Payment Details [Back to Search Payment History](#) ?

Provider Information

Provider ID <input type="text"/>	ID Type <input type="text"/> NPI	Name <input type="text"/>
	Location ID <input type="text"/>	

Payment Summary for Payment ID issued on 1/1/0001.

Claim Payments	\$0.00	Total Paid Amount	\$0.00	RA Copy (PDF)
Additions	\$0.00			
Deductions	\$0.00			

There are no Payment Details based on the search criteria selected.



For more information call **1-800-457-4454**

