

Provider Portal: Trading Partner ID Enrollment

If you are a provider or trading partner submitting electronic transactions to Medicaid, you will need to enroll for a **trading partner ID**. Trading partner IDs will replace the submitter ID (formerly known as the MC ID). Users in the following groups must enroll:

- Third-party vendors (clearing houses, billing companies, vendors who perform X12 transaction sets, etc.)
- Medicaid providers who:
 - Utilize EDI direct submit
 - Will upload information into the new portal
- Providers who receive capitated fee information (formerly managed care fees) related to the following programs:
 - Independent Choices
 - PACE (Programs for All-Inclusive Care for the Elderly)
 - CPC (Comprehensive Primary Care)
 - Private Option or Arkansas Works
 - Long-Term Care adjusted service fee claims
 - NET service fee claims
 - Assisted living
 - PCMH (Patient-Centered Medical Home)
 - All PCPs must enroll as a trading partner to see the details of their capitated fees.
 - **NOTE:** Before go-live, this information was sent on your remittance advice. After go-live, this information has been replaced with a summary line that outlines the dollar amount of the capitated fees. You must enroll for a trading partner ID to receive this information.

To enroll for a trading partner ID, follow the steps beginning on the next page.



1. Go to the portal landing page. On the left side, you will see the question “Would you like to enroll as a Provider or a Trading Partner?” Click **Trading Partner**.

The screenshot shows the ARMedicaid Healthcare Portal landing page. At the top, the ARMedicaid logo is on the left, and links for 'Contact Us', 'Login', 'Español', and 'Other' are on the right. Below the logo is a 'Home' button. The main content area has a 'Home' header and a date/time stamp: 'Thursday 10/19/2017 08:35 AM CST'. On the left side, there is a 'Login' section with a 'User ID' input field, a 'Log In' button, and links for 'Forgot User ID?', 'Register Now', and 'Where do I enter my password?'. Below this is a 'Protect Your Privacy!' section with text about logging off. The main content area features a large image of a doctor and a patient, with a text box titled 'What can you do in the Provider Portal' describing the portal's capabilities. Below the image are three buttons: 'FAQs', 'Links and Tools', and 'Learn More About'. At the bottom, there are links for 'Help us provide better service to you!', 'Website Requirements', 'Provider Manual', 'DOWNLOAD PES (Full Version)', 'DOWNLOAD PES Upgrade (from version 2.24 to 2.25)', and 'Fill out Medical Eligibility Application'. A 'Privacy Notice' link is at the very bottom.

1

Would you like to enroll as a Provider or a Trading Partner?

[Provider](#)

[Trading Partner](#)

2. Click **Enrollment Application**.



Home

Home > Trading Partner Enrollment

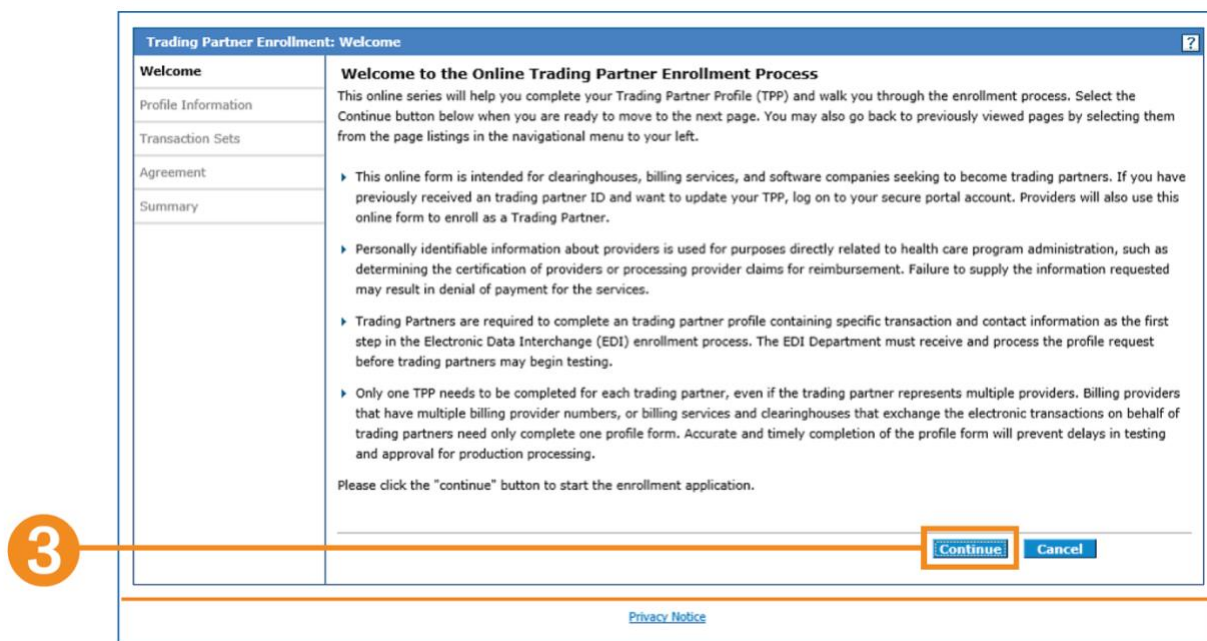
Trading Partner Enrollment ?

Enrollment Application

[Trading Partner Enrollment Status](#)

[Trading Partner Information](#)

3. Carefully read all the information regarding the online trading partner enrollment process. When you are finished, click **Continue**.



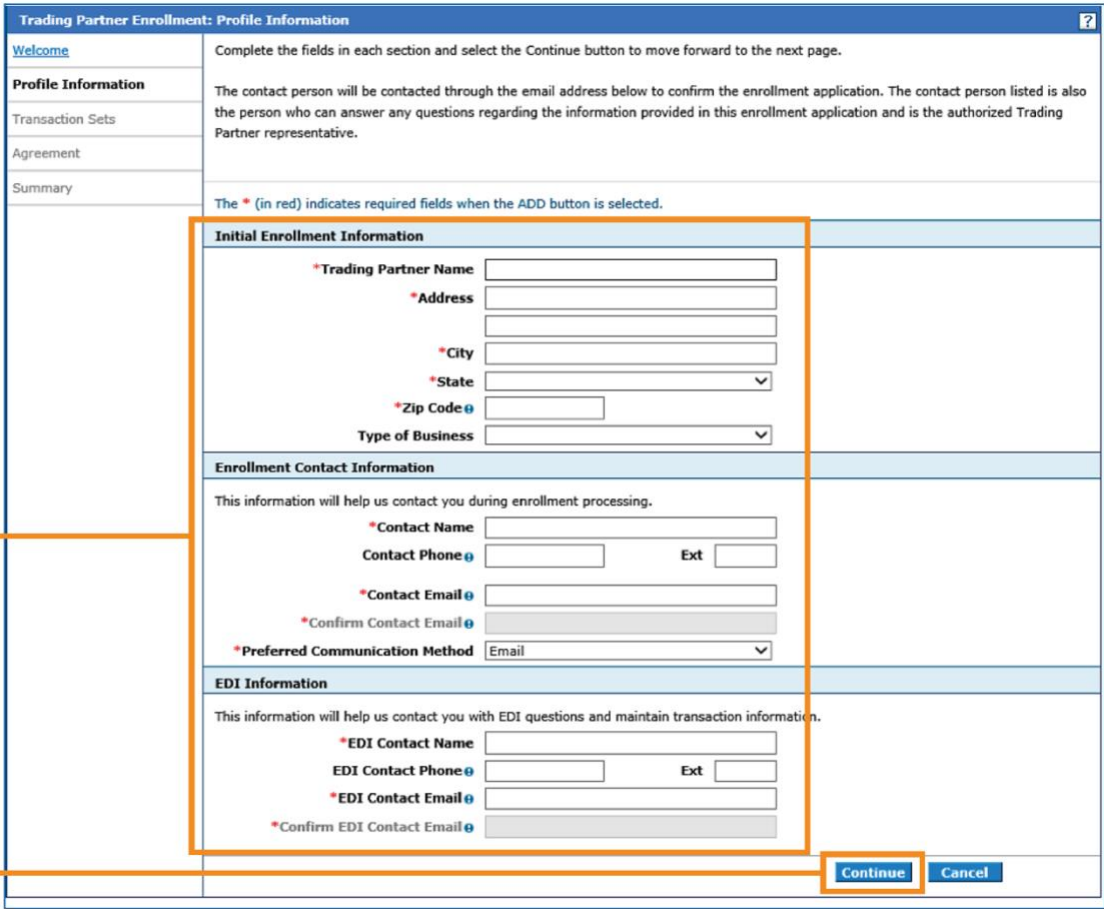
Trading Partner Enrollment: Welcome ?

Welcome	<p>Welcome to the Online Trading Partner Enrollment Process</p> <p>This online series will help you complete your Trading Partner Profile (TPP) and walk you through the enrollment process. Select the Continue button below when you are ready to move to the next page. You may also go back to previously viewed pages by selecting them from the page listings in the navigational menu to your left.</p> <ul style="list-style-type: none"> ▶ This online form is intended for clearinghouses, billing services, and software companies seeking to become trading partners. If you have previously received a trading partner ID and want to update your TPP, log on to your secure portal account. Providers will also use this online form to enroll as a Trading Partner. ▶ Personally identifiable information about providers is used for purposes directly related to health care program administration, such as determining the certification of providers or processing provider claims for reimbursement. Failure to supply the information requested may result in denial of payment for the services. ▶ Trading Partners are required to complete a trading partner profile containing specific transaction and contact information as the first step in the Electronic Data Interchange (EDI) enrollment process. The EDI Department must receive and process the profile request before trading partners may begin testing. ▶ Only one TPP needs to be completed for each trading partner, even if the trading partner represents multiple providers. Billing providers that have multiple billing provider numbers, or billing services and clearinghouses that exchange the electronic transactions on behalf of trading partners need only complete one profile form. Accurate and timely completion of the profile form will prevent delays in testing and approval for production processing. <p>Please click the "continue" button to start the enrollment application.</p>
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[Continue](#) [Cancel](#)

[Privacy Notice](#)

4. Fill out all required fields (denoted with a red asterisk) and any additional information you wish to submit.
5. When you have finished, click **Continue**.



Trading Partner Enrollment: Profile Information

[Welcome](#)

Profile Information

Transaction Sets

Agreement

Summary

Complete the fields in each section and select the Continue button to move forward to the next page.

The contact person will be contacted through the email address below to confirm the enrollment application. The contact person listed is also the person who can answer any questions regarding the information provided in this enrollment application and is the authorized Trading Partner representative.

The * (in red) indicates required fields when the ADD button is selected.

Initial Enrollment Information

*Trading Partner Name

*Address

*City

*State

*Zip Code

Type of Business

Enrollment Contact Information

This information will help us contact you during enrollment processing.

*Contact Name

Contact Phone Ext

*Contact Email

*Confirm Contact Email

*Preferred Communication Method

EDI Information

This information will help us contact you with EDI questions and maintain transaction information.

*EDI Contact Name

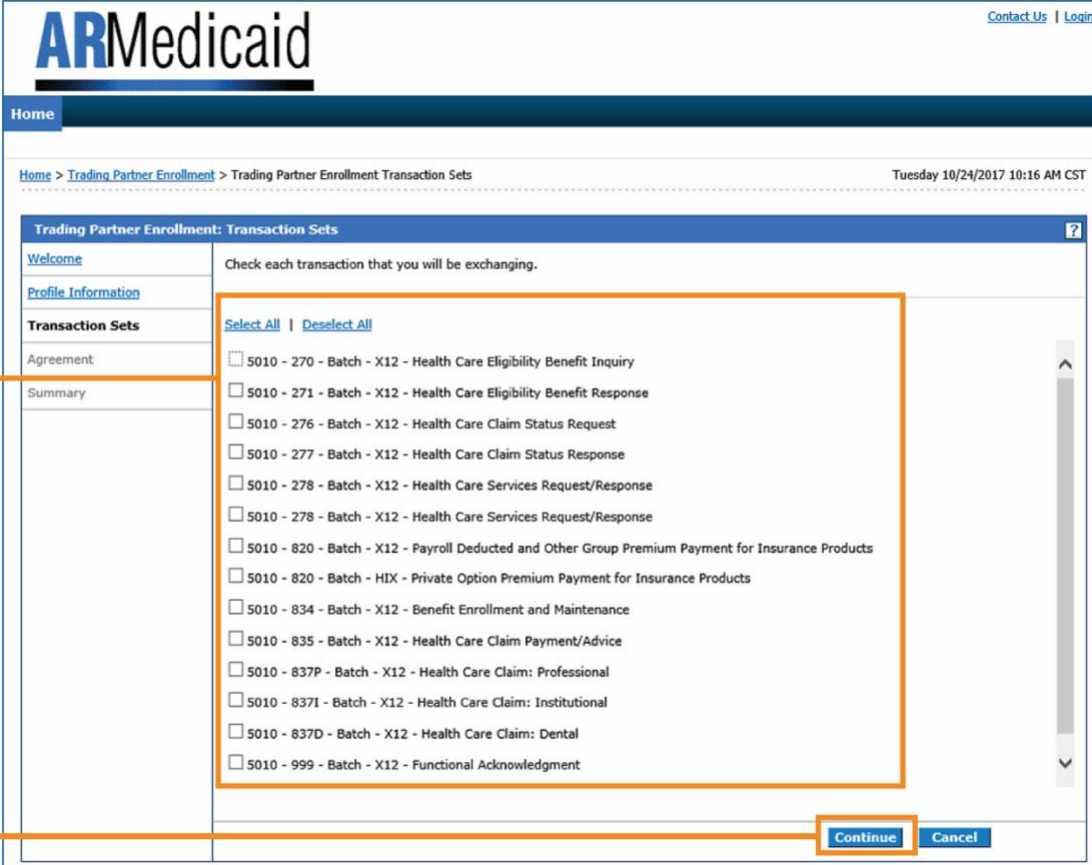
EDI Contact Phone Ext

*EDI Contact Email

*Confirm EDI Contact Email

Continue **Cancel**

6. Check the box for each transaction set that you will be exchanging. Please note that transaction set 820 (Payroll Deducted and Other Group Premium Payment for Insurance Products) will include detailed information on capitated fees and all managed care fees.
7. Once you have chosen your transaction sets, click **Continue**.



ARMedicaid [Contact Us](#) [Login](#)

[Home](#)

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Trading Partner Enrollment: Transaction Sets

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Check each transaction that you will be exchanging.

[Select All](#) | [Deselect All](#)

- ☐ 5010 - 270 - Batch - X12 - Health Care Eligibility Benefit Inquiry
- ☐ 5010 - 271 - Batch - X12 - Health Care Eligibility Benefit Response
- ☐ 5010 - 276 - Batch - X12 - Health Care Claim Status Request
- ☐ 5010 - 277 - Batch - X12 - Health Care Claim Status Response
- ☐ 5010 - 278 - Batch - X12 - Health Care Services Request/Response
- ☐ 5010 - 278 - Batch - X12 - Health Care Services Request/Response
- ☐ 5010 - 820 - Batch - X12 - Payroll Deducted and Other Group Premium Payment for Insurance Products
- ☐ 5010 - 820 - Batch - HIX - Private Option Premium Payment for Insurance Products
- ☐ 5010 - 834 - Batch - X12 - Benefit Enrollment and Maintenance
- ☐ 5010 - 835 - Batch - X12 - Health Care Claim Payment/Advice
- ☐ 5010 - 837P - Batch - X12 - Health Care Claim: Professional
- ☐ 5010 - 837I - Batch - X12 - Health Care Claim: Institutional
- ☐ 5010 - 837D - Batch - X12 - Health Care Claim: Dental
- ☐ 5010 - 999 - Batch - X12 - Functional Acknowledgment

[Continue](#) [Cancel](#)



8. Check the box beside “**I Accept**” to acknowledge that your electronic signature is equivalent to your written signature. Enter your name in the “**Your Signature**” field.
9. When you are finished, click **Submit**.

ARMedicaid

Home

Home > Trading Partner Enrollment > Trading Partner Enrollment Agreement

Tuesday 10/24/2017 10:17 AM CST

Trading Partner Enrollment: Agreement

Welcome

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Agreement

Summary

Please review the following Trading Partner Agreement (TPA).

Trading Partner Agreement

Electronic Signature Agreement

You will be submitting the Trading Partner Enrollment application electronically. Therefore your signature on this application will be electronic. By submitting this application electronically, you acknowledge that your electronic signature is binding to the same extent as your written signature.

☒ I accept ☐ I understand that my electronic signature is equivalent to my written signature.

***Your Signature**

(Entering your name in the box to the right will constitute your electronic signature.)

Signed Date: 10/24/2017

Submit Cancel



10. The summary page shows you all the information you've entered in the previous steps. If you want to make any changes, click on the category link on the left side of the page.
11. If all information is correct, click **Confirm**.

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[Print Preview](#)

Trading Partner Enrollment: Summary	
Welcome	Please review and make revisions to previous pages as needed. Once you have reviewed all data, print a copy and then select the Confirm button. Once you have selected the Confirm button no more changes will be allowed.
Profile Information	
Transaction Sets	
Agreement	
Summary	
	Profile Information
	Trading Partner Name
	Address
	City
	State
	Zip Code
	Type of Business
	Enrollment Contact Information
	Contact Name
	Contact Email
	Preferred Communication Method
	EDI Information
	EDI Contact Name
	EDI Contact Email
	Transaction Sets
	5010 - 270 - Batch - X12 - Health Care Eligibility Benefit Inquiry
	5010 - 271 - Batch - X12 - Health Care Eligibility Benefit Response
	5010 - 276 - Batch - X12 - Health Care Claim Status Request
	Instructions for Summary Page
	If changes are required when viewing the Summary page, please select the appropriate link in the Table of Contents panel, navigate back to that page, and make changes. Once the terms and conditions are accepted in the Agreement page, the contents of this page must be accepted by selecting "Confirm" below. Please print a copy of this summary for your records.
	Confirm Cancel

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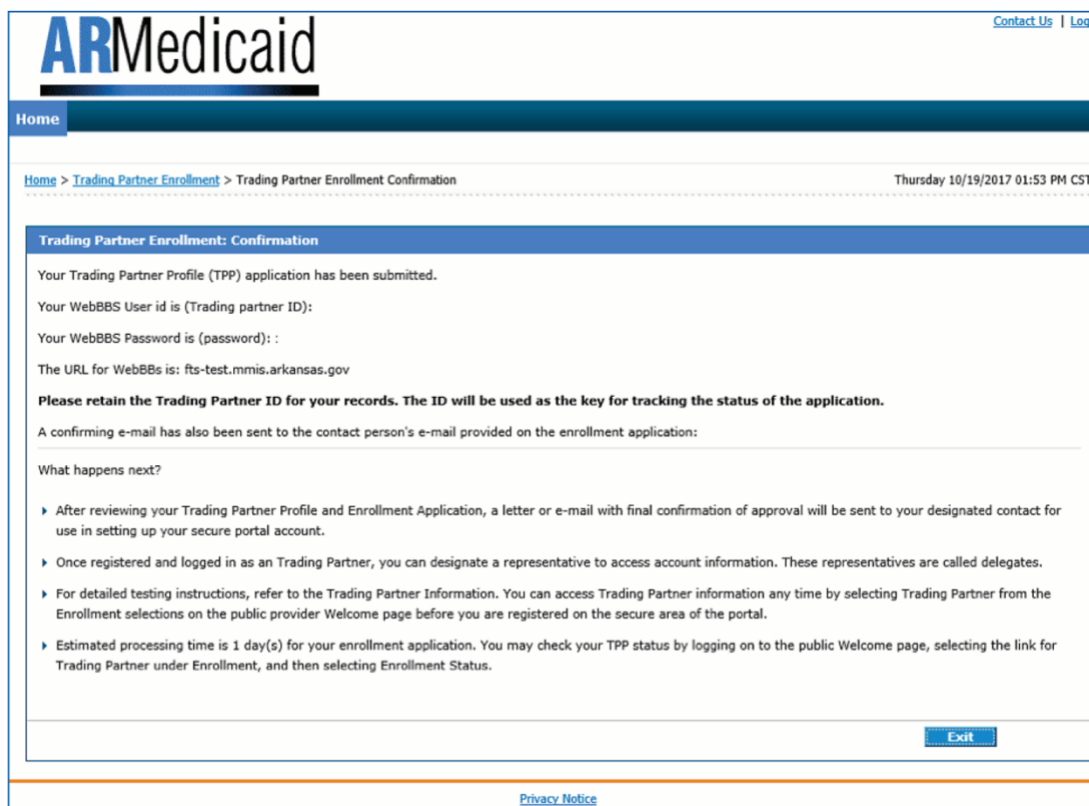
12. You will receive an email with your new trading partner ID number. Click the link at the end of the email to complete the enrollment process.

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13. Clicking the link in your email will take you to the confirmation page with information about your trading partner ID and details on upcoming steps. After reading, click **Exit**.

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



Please refer to the [Registering on the Portal – Provider Job Aid](#) for more detailed information on how to register for the portal.

https://humanservices.arkansas.gov/wp-content/uploads/MMIS_JobAid_ProvPortalReg.pdf

Additionally, if you upload or download files as a billing company, vendor or clearing house, you will need to register on the portal as a trading partner. For detailed instructions on how to complete this process, please see the [Registering on the Portal – Trading Partner Job Aid](#).

https://humanservices.arkansas.gov/wp-content/uploads/MMIS_JobAid_TradingPartnerPortalReg.pdf