

## Exchanging Provider Roster (SPI) and Batch Registration Files in ProviderConnect

**Purpose**: This document outlines the processes for LEA's who will be using ProviderConnect to exchange CYBHI files with Carelon. All files containing live data must be submitted using the following process.

## A. Submitting Files in ProviderConnect:

- Access the ProviderConnect login page at: https://providerconnect.carelonbehavioralhealth.com/pc/eProvider/providerLogin.do
- 2. Enter in the User ID and Password provided by Carelon and then click the Log In button.

low.
e-Support Help Line.

3. On the next screen, click on the *Yes* button to initiate the process of setting up your multifactor authentication (MFA).



<u>Please Note</u>: If you do not have access to a mobile device or computer that can be used for authentication purposes, click on *No* and a security code may be emailed to the email address on file for the ProviderConnec account being used. If you have the code emailed to you, skip to Step 7 below.



4. Follow the directions for Step 1, which will help you download the authentication application.



5. After downloading the authentication application, open it up and scan the QR code displayed in the instructions for Step 2. Once your authentication app displays your code, click on the *Next* button.

## Step 2





6. You will receive a popup window. Click *OK* to indicate you have followed the instructions for MFA setup Steps 1 and 2 above.



7. On the following page, enter in the code from your authentication app or email and then click on the *Verify OTP* button.

S COLEION Behavioral Health	Carelon Behavioral Health Home	Provider Home	Contact Us	Log In
One-Time Password (OTP) - Mu	ltifactor Authentication			
Your Submitter ID: CYBHIABCD Multifactor authentication is required for Pr	oviderConnect acces			
Please start your mobile device's or computer's . Enter OTP received from Authenticator app: 12	Authenticator app and enter the ProviderConnect OTP co	de displayed into th	ne field below.	
			121 100 1210 1000 1000	2011 (1947)
PLEASE NOTE: If you are using Authy Desktop recommend you switch to using Authy Mobile Ap information.	App for multi-Factor authentication, the product will rea p or Google Authenticator. Should you have questions, o	ch End-of-Life effect call eSupport at 888	tive March 19, 202 8-247-9311 to rese	4. We t your MFA

<u>Please Note</u>: If you have any questions or concerns about setting up your MFA, please contact our e-Support Help Line at 888-247-9311 during business hours Monday through Friday 8AM - 6PM ET or you can email an Applications Support Specialist at <u>e-supportservices@carelon.com</u>.

8. After verifying your authentication code, you will be directed to the ProviderConnect user agreement page. After reviewing the user agreement, scroll to the bottom of the page and click *I agree*.





9. A popup window will appear. Click OK to proceed to the next page.



10. On your first login, you may be directed to the *Modify Profile* page screen. Review the details entered into the form and make updates to any required fields (marked by \*). Once updates are completed, click on the *Update Profile* button.

Required fields are denoted by an asterisk ( * ) adjacent	, to the label.
Ins page contains your information. To protect your priv browser.	acy, do not walk away from your computer while this information is being displayed. We recommend you close your web browser when you a
Provider ID	CYBHIABCD
Provider Name	ABCD County of Education
Tax ID	
The following form is pre-filled with your Profile informa Editable Profile Details	ition. You can modify any of this information by simply entering new information and pressing the Update Profile button. When you press this
Lutable i fonte betalls	
*ProviderConnect E-Mail Address	jsmith@abcdcoe.org
*Verify ProviderConnect E-Mail Address	jsmith@abcdcoe.org
Secondary ProviderConnect E-Mail Address	
*Phone No (1)	7603125819 Ext 4072
Fax Number	
*Password	•••••
*Confirm New Password	
*Security Question	What is your zip code?
*Answer to Security Question	90001
Password must be between 8 and 20 characters lo is case-sensitive.	ng, must contain at least one number (0-9), one upper case letter (A-Z), one lower case letter (a-z), one of these special characters ( ! # \$ -
Would you like to request additional services? Foll Claims Inquiry Claims Submission Email Notification Click to receive Email Notific: *Use ProviderConnect Message Center to communicat	owing are the services available with indication of the services you are currently registered for. To request additional items, check the approp ations from Carelon Behavioral Health e with members? O Yes INO
*Use ProviderConnect Message Center to communicat	e with members? O Yes () No



11. Along the lefthand column, click on the *EDI Homepage* hyperlink.



12. On the EDI Homepage, click on the *Submit Batch File* button or click the matching link in the lefthand column.



- 13. On the Submit Batch File Step 1 of 4 page, in the *Form Type* field, select:
  - a. PROVUPD if you are submitting a provider roster (SPI) file.
  - b. BATCHREG if you are submitting a batch registration file.

After making your selection, click the Next button.

To submit a cla	ims batch file, begin with step 1 below.
Required fields	are denoted by an asterisk ( * ) adjacent to the label.
* Form Type	
Next	Carrel



14. On the Submit Batch File – Step 2 of 4 page, there are no questions to answer so click on Next.



15. On the Submit Batch File – Step 3 of 4 page, click the *Choose File* button and navigate to where your file is located on your computer to select your file. After your file is successfully attached, click *Submit*.

Submit Batch H	ile - Step 3 of 4
Enter the batch file to This file should be for	o upload or click Browse to search your local hard drive. Click Upload to begin batch file transfer. matted in the <u>pre-defined</u> format.
Required fields are der	noted by an asterisk ( * ) adjacent to the label.
* Upload file	Choose File ABCDtoCarelon Provider 20240701.TXT
(Select a file from ye	our local hard drive)
Submit	Cancel

16. On the Submit Batch File – Step 4 of 4 page, you will receive confirmation that the file was submitted successfully. Click on the *EDI Home* page button to return to the EDI homepage.



17. On the EDI homepage, under the *Previous Batch File Submissions* heading, you will find a list of all files that you have previously submitted through ProviderConnect. In this section, you will see the Submission #, Result, Date Received, and Form #.

Previous Batch File Submissions			
Submission #	Result	Date Received	Form #
0245028050	Passed Validation	Wed May 08 09:46:22 EDT 2024	PROVUPD

<u>Please Note</u>: You may have to return to the ProviderConnect homepage and then visit the EDI homepage in order to see your recently submitted files.



## B. Downloading Response Files in ProviderConnect:

- 1. When your response files are ready for downloading, log back into ProviderConnect and return to the EDI homepage, using the instructions detailed in Section A above.
- 2. On the EDI homepage, under the *Incoming Files* heading, you will see a list of all response files available for you to download. In this section, you will find details for File Name, Date Posted, and File Size.

File Name	Date Posted	File Size
CarelontoBRUH Provider RespAckn Test 20240508.csv	Wed May 08 12:35:19 EDT 2024	899
CarelontoBRUH Provider RespErr Test 20240508.csv	Wed May 08 12:35:07 EDT 2024	6856
0245028050RA.050224.09.58.49.txt	Thu May 02 09:59:12 EDT 2024	6914
0245028050RR.050224.09.58.49.bxt	Thu May 02 09:59:09 EDT 2024	16485

3. Click on the link for the file you would like to download to be directed to the *View Incoming Files* page. Click on the link for the file name that you would like to download. The file will be available for you to access based on your browser's settings (i.e. your Downloads folder).

o download a file: Click on the file name, the download will automatically ben and you will prompted as to whether you received your file or not. Each file will remain o			
delete a file: Click the box next Select Files	to the file name, and then click the Delete" link found at the bottom o	of the page. To delete all files, click the top bo Date Posted	k and then click the Size
	CarelontoBRon Provider RespAckn Test 20240508.csv	05/08/2024 12:35:19 PM	899
	CarelontoBRUH Provider RespErr Test 20240508.csv	05/08/2024 12:35:07 PM	6856
	0245028050RA.050224.09.58.49.bd	05/02/2024 09:59:12 AM	6914
	0245028050RR.050224.09.58.49.bxt	05/02/2024 09:59:09 AM	16485

<u>Please Note</u>: As you accumulate incoming files, you can delete older files by clicking on the checkbox next to the filename(s) that you'd like to delete and then clicking on the Delete button.

ownload a file: Click on the file name, the download will automatically begin and you will prompted as to whether you received your file or not. Each file will remain on				
delete a file: Click the box next to see file name, and then click the "Delete" link found at the bottom of the page. To delete all files, click the top box and then click the "				
Select Files	File Name	Date Posted	Size	
	CarelontoBRUH Provider RespAckn Test 20240508.csv	05/08/2024 12:35:19 PM	899	
	CarelontoBRUH Provider RespErr Test 20240508.csv	05/08/2024 12:35:07 PM	6856	
	0245028050RA.050224.09.58.49.bct	05/02/2024 09:59:12 AM	6914	
	0245028050RR.050224.09.58.49.bd	05/02/2024 09:59:09 AM	16485	