## ARMedicaid HEALTHCARE PORTAL

## **Provider Portal: Updating PCP Caseload**

Contact Us | Login Español | Other



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.







For more information call 1-800-457-4454

# **CARMedicaid HEALTHCARE PORTAL**

Home		
Provider Name	Role IDs	
user Details	Welcome Health Care Professional!	Contact Us
Welcome		Concerning and the second
My Profile		Secure Correspondence
Manage Accounts		Secure correspondence
Provider		All Claim Inquiries should be submitte
Name		to the following Address:
And the second sec		
Provider ID		
<u>Charagenistics</u>	We are committed to make it easier for physicians and other providers to perform	
	their business. In addition to providing the ability to verify member eligibility and submit claims, our secure site provides access to benefits, answers to frequently	
Provider Services	asked questions, and the ability to search for providers.	
Search Payment History		
MAPIR	Help us provide better service to you! Click here to give us your feedback	

2. From the Health Care Professional Home page, select the Provider Functions tab







For more information call 1-800-457-4454

**CARMedicaid HEALTHCARE PORTAL** 

<b>AR</b> Medica	id		<u>Contact Us</u>
Home Eligibility Claims Care I	lanagement Provider Functions	Files Exchange Resources	
PCP Information   Provider LTC Census   S	earch Update Requests   Submit an Upd	ate Request	
Provider Functions			Tuesday 01/12/2021 01:50
Provider Name PCP PROVIDER	Role IDs Provider - In Network -	• 1111111112 (NP 🗸	
Provider Functions      PCP Information      Provider LTC Census      Search Update Requests      Submit an Update Request			

3. Click PCP Information







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### **ARMedicaid** HEALTHCARE PORTAL

ovider Functions > PCP Information
Provider Name Role IDs
PCP Information
To increase PCP Caseload maximum over 2500, a written request is required. Please submit the request with the original signature indicating the reason for this increa Additionally you may upload your written request hare.
Autoritariany you may oppoint your written request none.
Mail to:
4
Indicates a required field.
Max Caseload
Update the number of Medicaid patients you are willing to accept for primary care services between 1 and 2500.
Max Caseload
Age Restriction
Please indicate the age range of the Medicaid recipients you are willing to accept for primary care services. If no age range is indicated, the default age of 0-99 indicated in the default age of
age restrictions exists and recipients of all ages will be accepted.
*From Age 0 *To Age 99

- 4. Scroll down to the Max Caseload panel
- Update the number of Medicaid patients you are willing to accept between 1 and 2,500. **Current Caseload** will tell you how many Medicaid patients you are currently treating.

**NOTE:** If the PCP wants to increase the number of Medicaid patients they are willing to accept above 2,500, a written request must be provided. The written request can be uploaded. (See section under **PCP Information** indicated in **GREEN** on the image shown above.)

5. Edit Age Restrictions, if any (all fields that have a red asterisk are required)





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**7**Inwell

Current Benefic	Max Caseload iaries Assigned	-			urrent Caseloa		
Age Restriction							
	Please indicate the age range of the Medicaid recipients you are willing to accept for primary care services. If no age range is indicated, the default age of age restrictions exists and recipients of all ages will be accepted.						
	*From Age	0			*To Ag	<b>e</b> 99	
Counties							
Local and Out of Sta		FAULKNER	JACKSON	MARION	POINSETT	SHARP	STATEWIDE
ARKANSAS		FAULKNER		MARION	POINSETT	SHARP	I OUISIANA
I ASHLEY		FULTON	JEFFERSON JOHNSON	MILLER	POLK	ST. FRANCIS	MISSOURI
BAYTER					- FOFE	STONE	
BAXTER BENTON	CONWAY	GARLAND	LAFAYETTE	MONROE	PRAIRIE	UNION	MISSISSIPPI
	CONWAY		DUNCENE	MONROE MONTGOMERY		UNION	MISSISSIPPI
BENTON		GRANT	LAWRENCE		PULASKI		OKLAHOMA
BENTON BOONE BRADLEY	CRAIGHEAD	GRANT		MONTGOMERY	PULASKI	VANBUREN	OKLAHOMA
BENTON BOONE BRADLEY CALHOUN	CRAIGHEAD	GRANT		MONTGOMERY	PULASKI	VANBUREN	OKLAHOMA
BENTON BOONE BRADLEY CALHOUN	CRAIGHEAD	GRANT	LEE LINCOLN	MONTGOMERY	PULASKI RANDOLPH SALINE	VANBUREN WASHINGTON WHITE	OKLAHOMA TENNESSEE TEXAS OTHER STATE
BENTON BOONE BRADLEY CALHOUN CARROLL	CRAIGHEAD	GRANT GREENE HEMPSTEAD HOT SPRING	LEE LINCOLN LITTLE RIVER	MONTGOMERY NEVADA NEWTON OUACHITA	PULASKI RANDOLPH SALINE SCOTT SEARCY	VANBUREN WASHINGTON WHITE WOODRUFF	OKLAHOMA OKLAHOMA TENNESSEE TEXAS OTHER STATES OTHER BORDE

6. Counties where the provider currently provides primary care services will be displayed here.

Note: Counties cannot be edited via portal. To update, contact Gainwell Technologies Services, Provider Enrollment unit: In-State Toll free (800) 457-4454. Local and Out of State (501) 376-2211.

#### 7. Click Submit.

**8.** You will receive a confirmation at the top of the page indicating that your PCP information was successfully submitted.

8	Informational The changes to your PCP Information have been successfully submitted.
	PCP Information
	To increase PCP Caseload maximum over 2500, a written request is required. Please submit the Additionally you may upload your written request here.







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