

Provider Portal

Registration and Login

Provider Portal Login



Hawki

To access the Portal



Go to: www.iowatotalcare.com

FOR MEMBERS	FOR PROVIDERS	ABOUT US	CONTACT US
ogin	Login		
Login	Become a Provider		
Create your own online accou	Prior Authorization Check		
lowa Total Care offers you ma	Pharmacy	assist you. To enter our Secure	Provider Web Portal,
Creating an account is free an	Provider Resources		
By creating an lowa Total Care	Quality Improvement Program		
 Verify member eligibility View member health red 	Provider News		
 View the PCP Pariet (Pariet (Pariet) (Pariet) (Pariet) Verify Claim Status Verify Proper Coding GL View Payment History View and Submit Prior A Check Prior Authorization Verify Prior Authorization View Gaps in Member C Contact Us Securely and Add/Remove Account U Determine Payment/Chee Add/Remove TINS from View And Print Explanation 	and Adjustments aidelines Authorizations on Requirements on Status Care d Confidentially sers seck Clear Dates a User Account tive Report ion of Payment (EOP)		
	Login/Reg	ister 🚽	

To Register and/or Login

- Click on:
 - Providers
 - Login
 - Login/Register

The Portal provides 24/7 self-service convenience

Creating a Portal Account

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Click on "Create An Account"

The Tools You Need Now!

Our site has been designed to help you get your job done. Manage all products with ease in one location



Check Eligibility Find out if a member is eligible for service.



Authorize Services See if the service you provide is reimbursable.



Manage Claims

Submit or track your claims an



Need To Create An Account?

Registration is fast and simple, give it a try.



Our registration process is quick and simple. Please click the button to learn how to register.

Provider Registration Video

Provider Registration PDF

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Enter the following information

- Enter Tax ID
- Name
- E-mail address
- Create a password

Note: Passwords must be at least 6 characters in length, with at least one uppercase letter, and at least 1 number or symbol (@#\$%&*)

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	ne. -			CREATE ACCOUNT
	iki			
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Register P	rovider	Vour		Cancel
Register i i	ovidei	Progress		
Your Details				
Tax ID		?		
First Name	First			
Last Name	Last			
Email	name@domain.com	?		
Re-enter Email	name@domain.com			
Password	Password	?		
Retype Password	Password			
				Next →

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Creating a Portal Account

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Verification Code 📃 Inbox x A confirmation email will be sent noreply@a to me to the email address provided Hi during registration To register for your Provider Portal account, please enter the following code: 6844 Please check Junk or Spam Thank you, email folder if you don't see it Antipality (April) CONFIDENTIALITY NOTICE: This communication contains information intended for the use of the individuals to whom it is a in your inbox privileged, confidential or exempt from other disclosure under applicable law. If you are not the intended recipient, you are not distribution or use of the contents is prohibited. If you have received this in error, please notify the sender immediately by telep permanently delete the communication from your system. Thank you.

Enter the verification code received in the confirmation email

Register Provider	Your Progress
Registe	aring Provider. at superuser@gmail.com
Confirm Email	
We've sent you an email with a 4-digit code to validate your email	address.
If you didn't receive it, please check your Spam or Junk folder.	
1000 4	Confirm
	Still didn't receive an email from us?

Creating a Portal Account





Complete your secret questions then Click on Submit

Register P	rovider	Your Progress	Cano
	Registering	novider 582129065 at anearly@centene.com	
Account Setu	p		
nter your secret questions a	and contact information below, and then clic	"Submit" to complete your registration.	
ease do not close this wi	ndow of your changes will be lost.		
ecret Questions			
Question 1	What city were you born in?		
	Claster		
Answer			
Answer		677	
Answer Question 2	What is your favorile pet's name?	V	
Antwer Guestion 2 Antwer	What is your favorile pet's name? Clayton	Y	
Answer Question 2 Answer Question 3	What is your favorile pet's name? Clayton What is your mother's maiden name?	V	
Answer Question 2 Answer Question 3 Answer	What is your fevorile pet's name? Cluyton What is your mother's maiden name? Cluyton	Y	
Answer Question 2 Answer Question 3 Answer Contact Information	What is your fevorite pet's name? Clayfon What is your mother's maiden name? Clayfon	Y	
Answer Question 2 Answer Question 3 Answer Contact Information	What is your fevorile pet's name? Cluyton What is your mother's maiden name? Cluyton		

Registration Complete!	Your Progress
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The following screen will appear

Note: It can take up to 48 hours for the account to be verified

Provider Portal Login

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Once an account is created, Login to the Portal by entering:

- User Name
- Password
- Click Login



Provider Registration PDF

Eligibility Verification

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Once logged into the Portal, the initial landing page will display:

- Select the TIN for viewing the desired records
- A search can be performed using a member ID or last name and date of birth
- Click Check Eligibility

C health	Hawki	_	_		Eligib	ility	A Patients
Viewing Das	shboard For :	850267212	V Iowa	Total Care		GO	
		1					
Quick	Eligibility	y Check					
Member ID o	or Last Name	Birthdate					
123456789	or Smith	mm/dd/yyyy	Check Eligibi	ility			
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Eligibility Verification

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The eligibility screen will display the member status

- Green thumbs up reflects active Medicaid member
- Red thumbs down means the member is not eligible under Iowa Total Care

Viewing Eligibility For: 850267212 Iowa Total Care GO Eligibility Check Date of Service 06/06/2019 Member ID or Last Name 123456789 or Smith DOB Date of Service 06/06/2019 Member ID or Last Name 123456789 or Smith DOB ELIGIBLE DATE OF SERVICE PATIENT NAME DATE CHECKED CARE GAPS Image: Construct of Construction 06/06/2019 06/06/2019	y -	Jeffrey John	Messaging	S Claims	izations	Author	<u>)</u> Patients	iigibility					otal care. Hawki	viowato iowato iowato
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