



# Introduction to the Provider Portal Process Aid

## Key Points

- Access the TRICARE West Payer Space to use TriWest provider tools, view helpful provider resources, and access the TriWest Learning Center.
- Ensure you log in frequently to check for recent updates or system changes that may affect your work.



## Contents

Introduction .....	3
Accessing the Provider Portal .....	3
Navigating the Provider Portal .....	5
Updating Provider and Office Information .....	10
Submitting Claims .....	12
Tracking Claims .....	16
Using the Provider Portal Effectively: Tips and Tricks.....	18

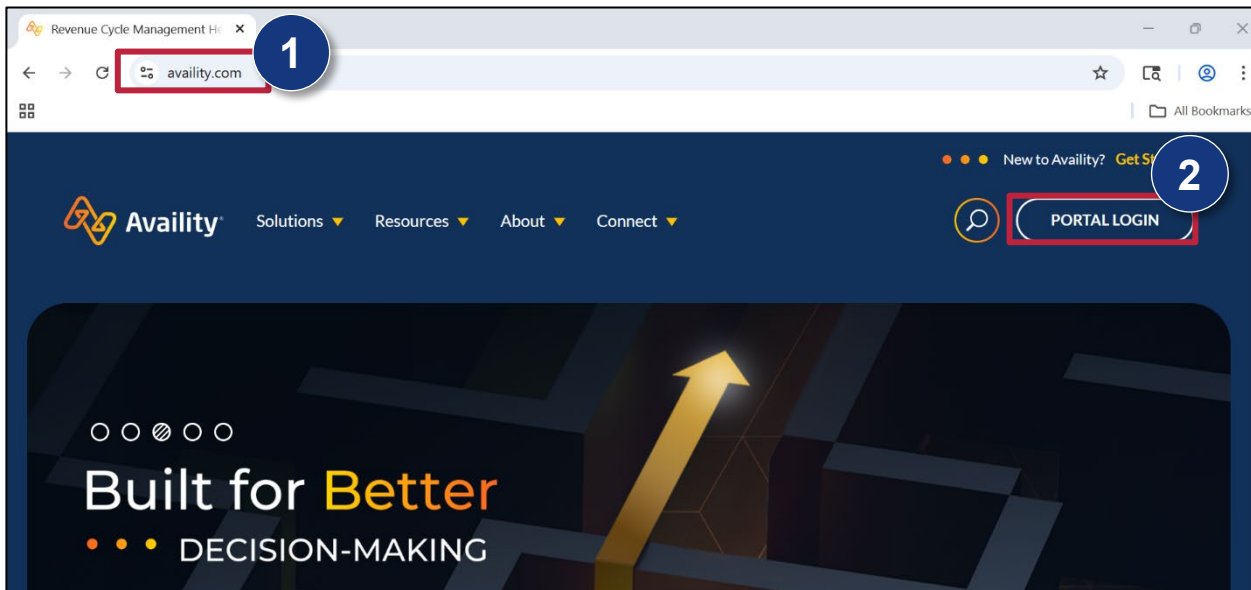


## Introduction

The Availity provider portal helps you manage resources, TriWest communications, claims, and more. This guide will help you navigate the provider portal, update your provider and office information, submit claims, track your claim status, and use the portal effectively.

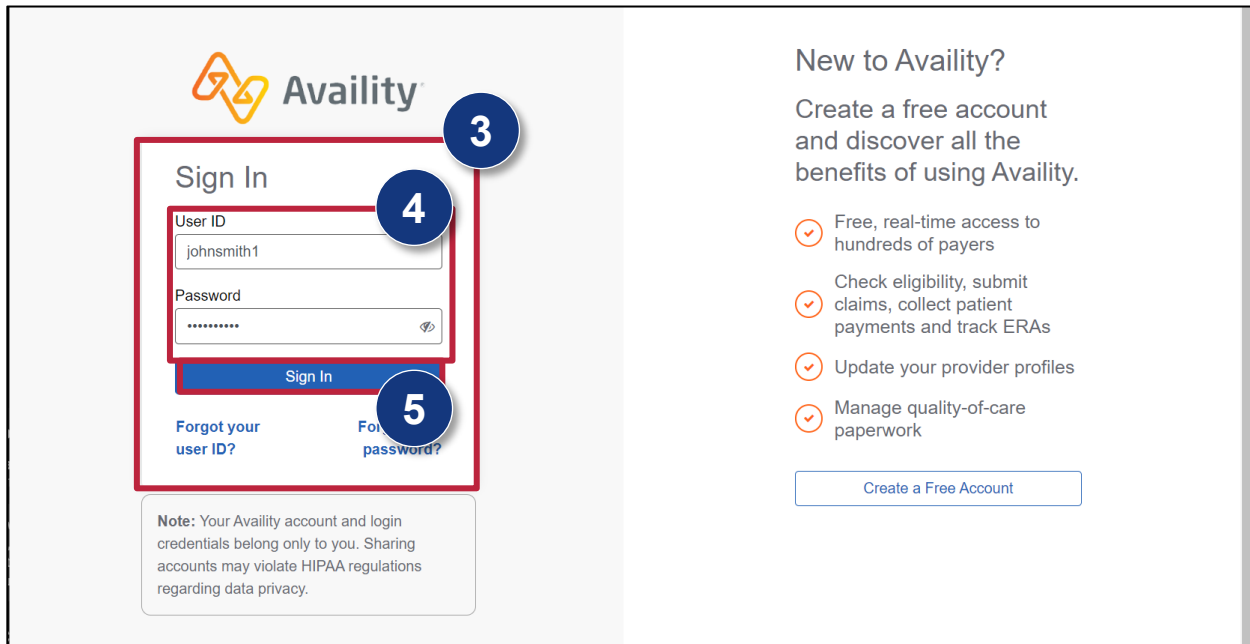
## Accessing the Provider Portal

1. Navigate to the Availity home page.
2. Select **Portal Login**.

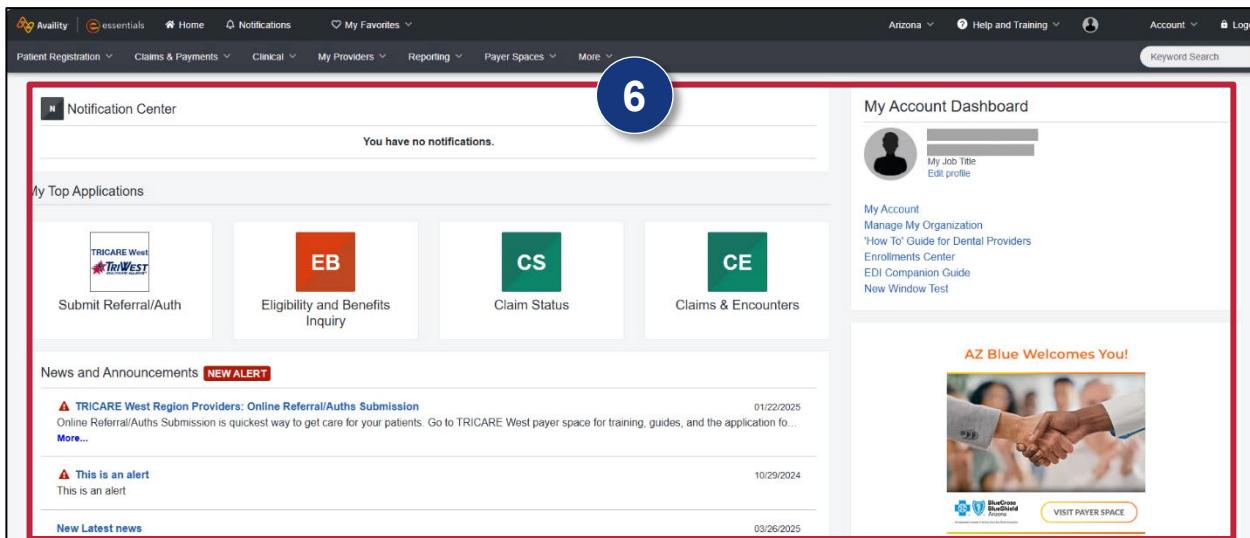




3. This will open the login page.
4. Enter your login credentials into the **User ID** and **Password** fields.
5. Select **Sign In**.



6. The provider portal dashboard will open.





## Navigating the Provider Portal

1. The dashboard provides various panels to help you navigate the portal quickly and efficiently.
  - A. Check the **Notification Center** for messages in your inbox.
  - B. Select a card in **My Top Applications** to open an application.
  - C. Check **News and Announcements** for a global list of recent updates and announcements.

The screenshot shows a dashboard with three main sections. The top section, labeled 'A', is the 'Notification Center' and contains two messages. The middle section, labeled 'B', is 'My Top Applications' and features four cards: 'EB Eligibility and Benefits Inquiry', 'CS Claim Status', 'A&R Authorizations & Referrals', and 'CE Claims & Encounters'. The bottom section, labeled 'C', is 'News and Announcements' and displays a news item about risk adjustment requests.

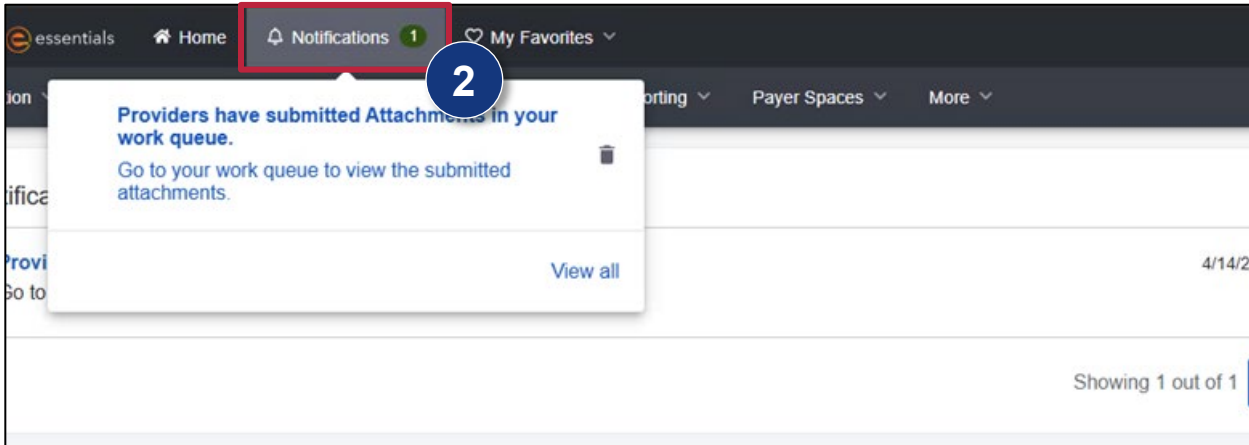
**A** Notification Center

**B** My Top Applications

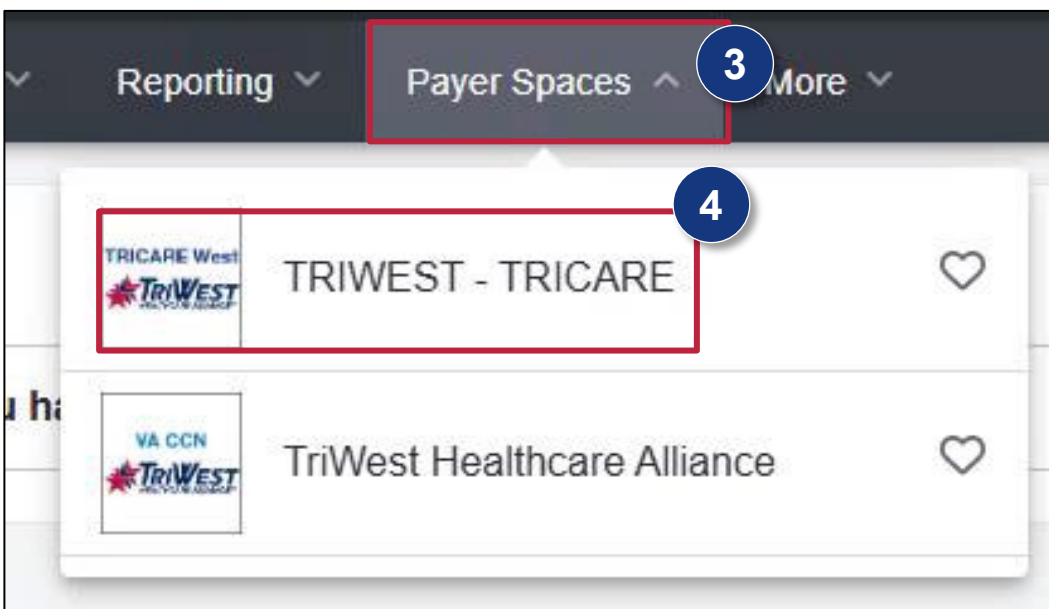
**C** News and Announcements



2. Select **Notifications** to check any messages in your inbox.  
**Note:** You can also view your notifications from your dashboard's Notification Center.

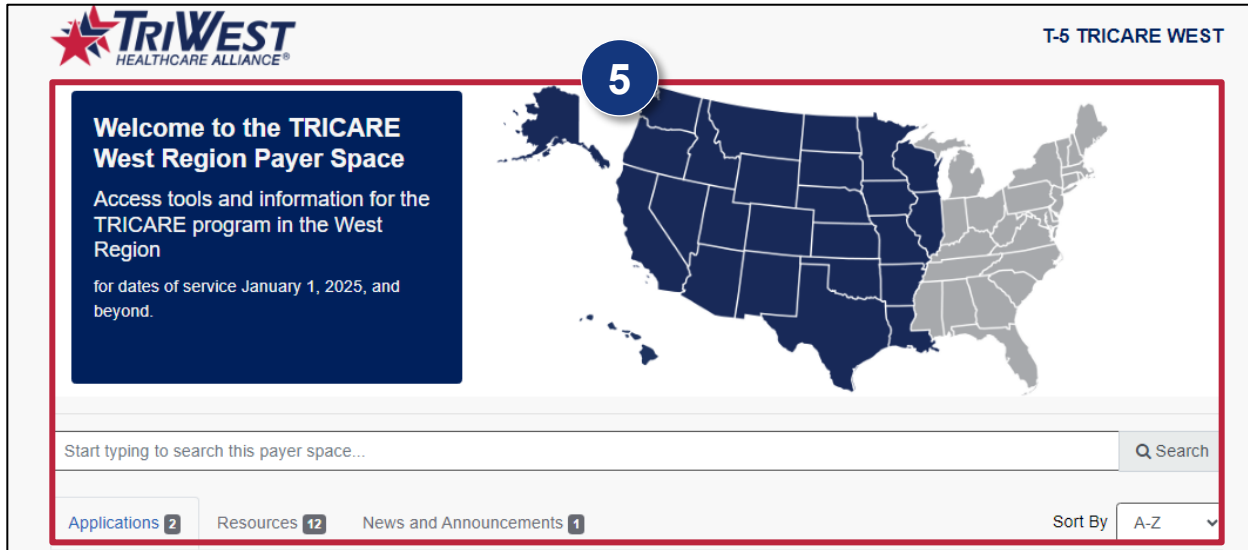


3. Select **Payer Spaces** to start interacting with payers. There are two spaces you can use.
  - A. The **Payer Space** lets you customize the portal view to focus on and interact with individual payers. This space provides access to payer-specific functions and information.
  - B. The **Multi-Payer Space** lets you access information from and submit claims to multiple payers simultaneously. This space houses broader payer-related activities and tools.  
**Note:** You can favorite certain Payer Spaces for quick access by selecting the heart icon next to the payer name.
4. Select the **TRICARE West Payer Space**.

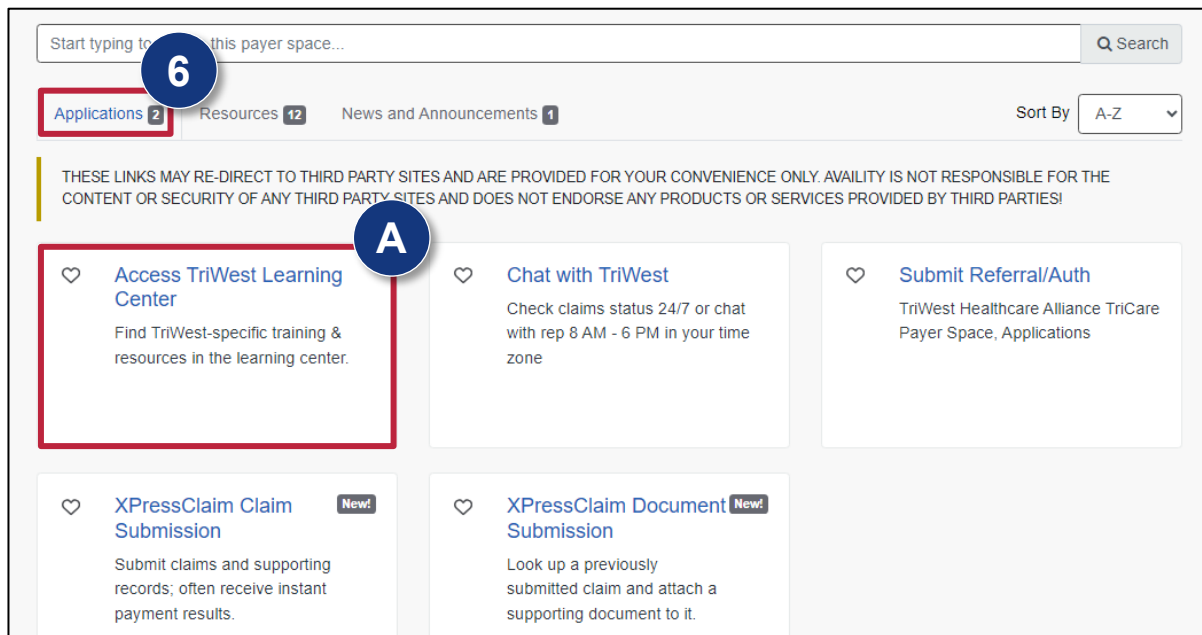




- 5. The TRICARE West Payer Space will open. This page provides various TRICARE resources, services, and support for the West Region.



- 6. The **Applications** tab lets you access applications to submit referral and authorization requests, speak with a TriWest representative, submit claims through XPressClaim, and more.
  - A. Select **Access TriWest Learning Center** to access TriWest-specific trainings and learning resources.





7. The **Resources** tab provides a list of internal and external resources for TRICARE providers, such as frequently asked questions or High Performing Provider (HPP) scorecard information.

Start typing to search this payer space... Q Search

Applications **2** **Resources 12** News and Announcements **1** Sort By A-Z

THESE LINKS MAY RE-DIRECT TO THIRD PARTY SITES AND ARE PROVIDED FOR YOUR CONVENIENCE ONLY. AVAILITY IS NOT RESPONSIBLE FOR THE CONTENT OR SECURITY OF ANY THIRD PARTY SITES AND DOES NOT ENDORSE ANY PRODUCTS OR SERVICES PROVIDED BY THIRD PARTIES!

- PGBA EFT/ERA Enrollment Package 02/02/2020
- Arista e-Consult **New!** 08/09/2024
- Autism Care **New!** 08/09/2024
- Electronic Reconsideration Requests **New!** 08/09/2024
- Frequently Asked Questions 07/01/2024
- HPP Scorecard Information **New!** 08/08/2024  
A document/link to an overview of TriWest's High Performing Provider program and information that will help a provider understand the program

8. The **News and Announcements** tab will display a list of TriWest-specific updates and announcements.

Start typing to search this payer space... Q Search

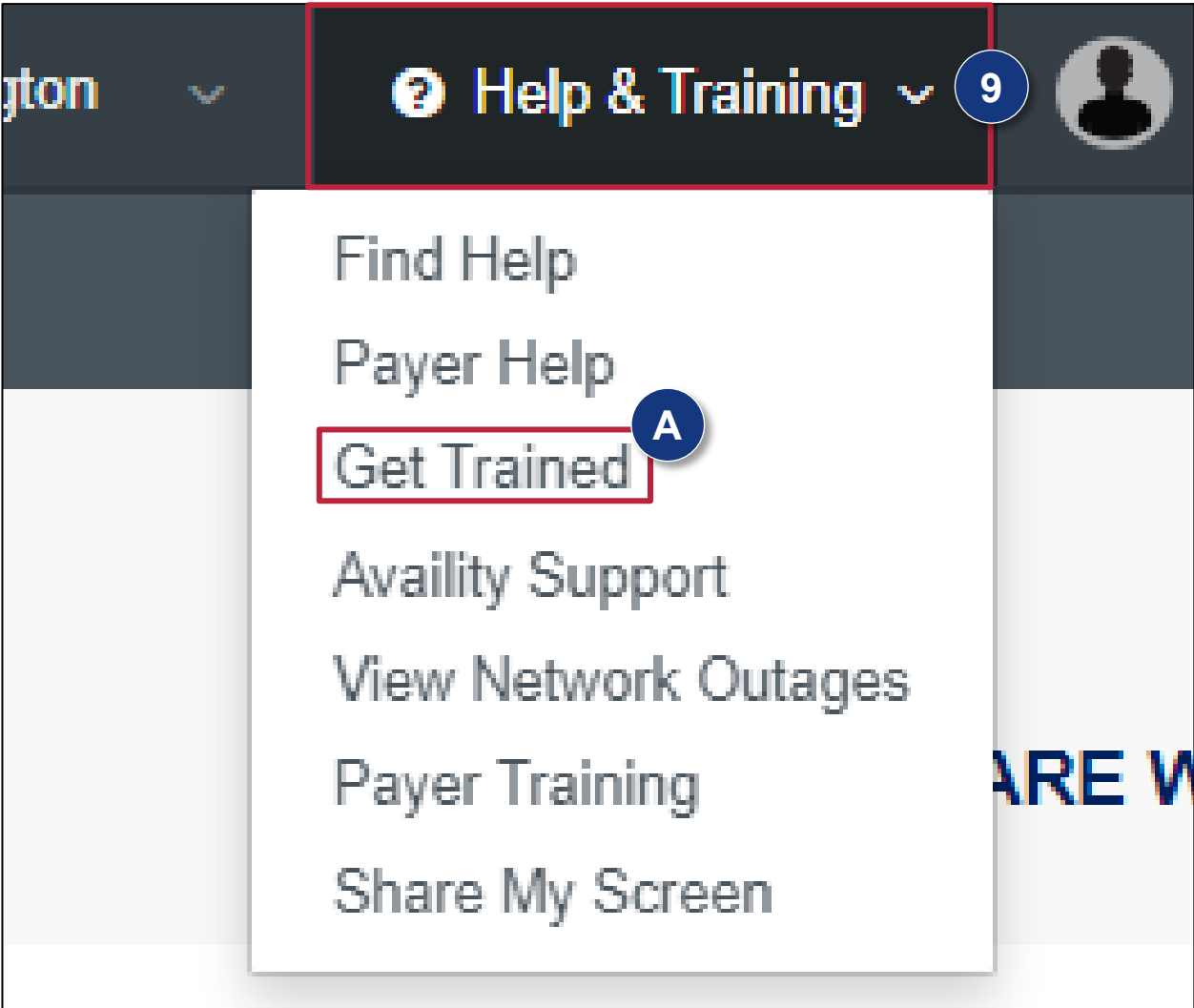
Applications **2** Resources **12** **News and Announcements 1**

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- TRICARE BEGINS UAT TESTING 9/3 **New!** 09/03/2024  
THIS IS THE SUPER DESCRIPTIVE DESCRIPTION OF THE INFORMATION THAT HELPS DESCRIBE THE DESCRIPTION OF THIS NEWS



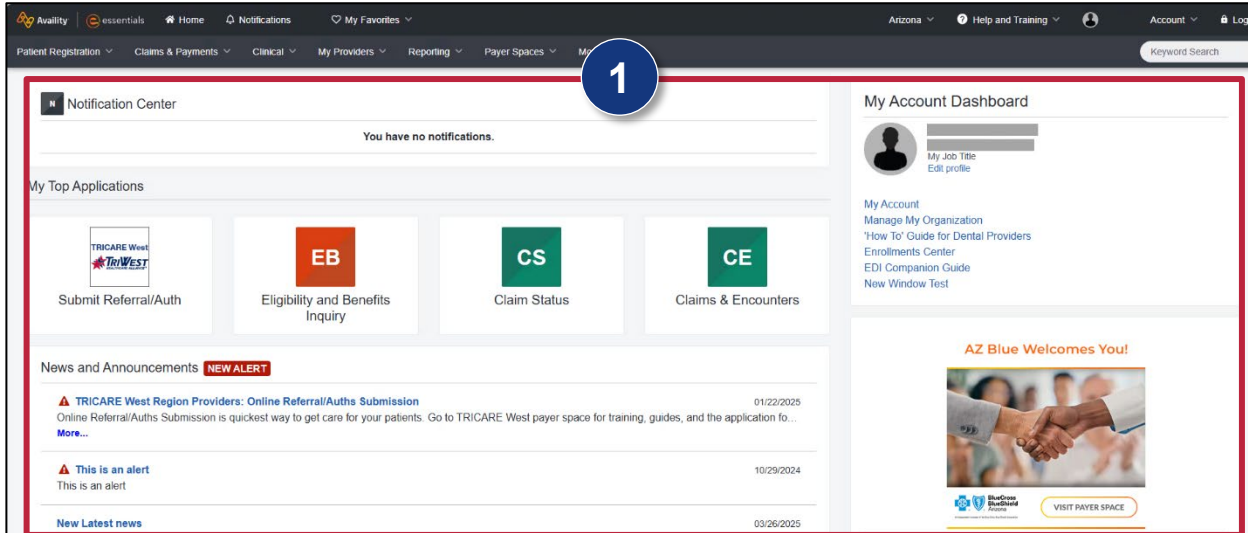
- 9. Select **Help & Training** to view various support and training options.
  - A. Select **Get Trained** to access the Availity Learning Center. The Learning Center provides training resources to support your professional development and mastery of Availity's features. Some of the resources you'll find include detailed guides, instructional videos, and more.  
**Note:** You can also access the Availity Learning Center from your dashboard.



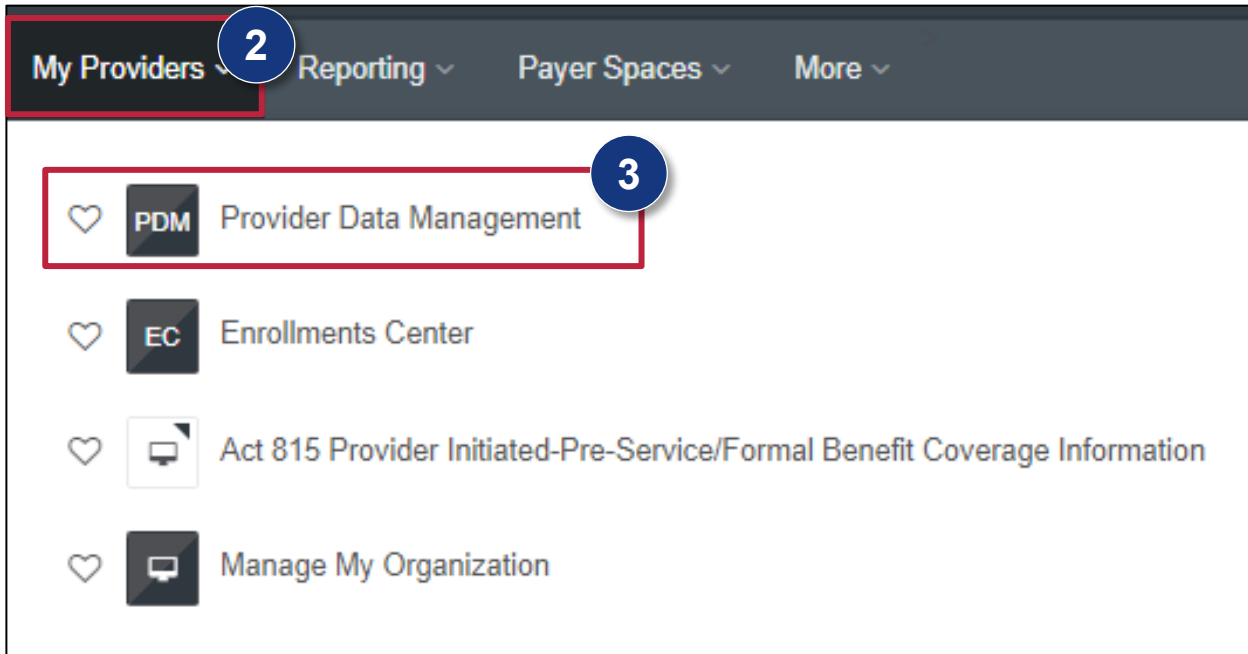


# Updating Provider and Office Information

1. Navigate to the main dashboard.



2. Select **My Providers** from the ribbon.
3. Select **Provider Data Management**.





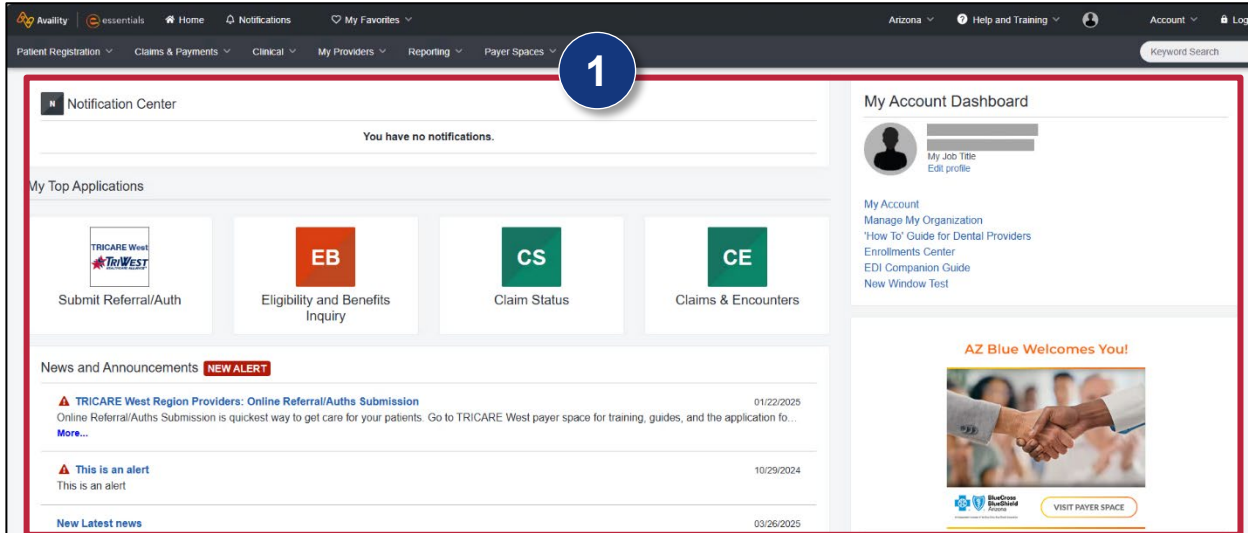
4. The Business Profiles page will open.
5. Enter the provider's name or National Provider Identifier (NPI) into the search field.
6. Select the provider from the search results.

7. The provider's business profile will open. From here, you can update fields like the provider's phone number, email, office hours, physical address, and more.
8. Locate the field you want to update.
9. Select **Edit** on the field.
10. Update the information as needed.
11. Repeat steps 8–10 until all desired changes are made.
12. Review all changed fields for accuracy.
13. Select **Save** once done.
14. You've successfully updated the provider and office information.

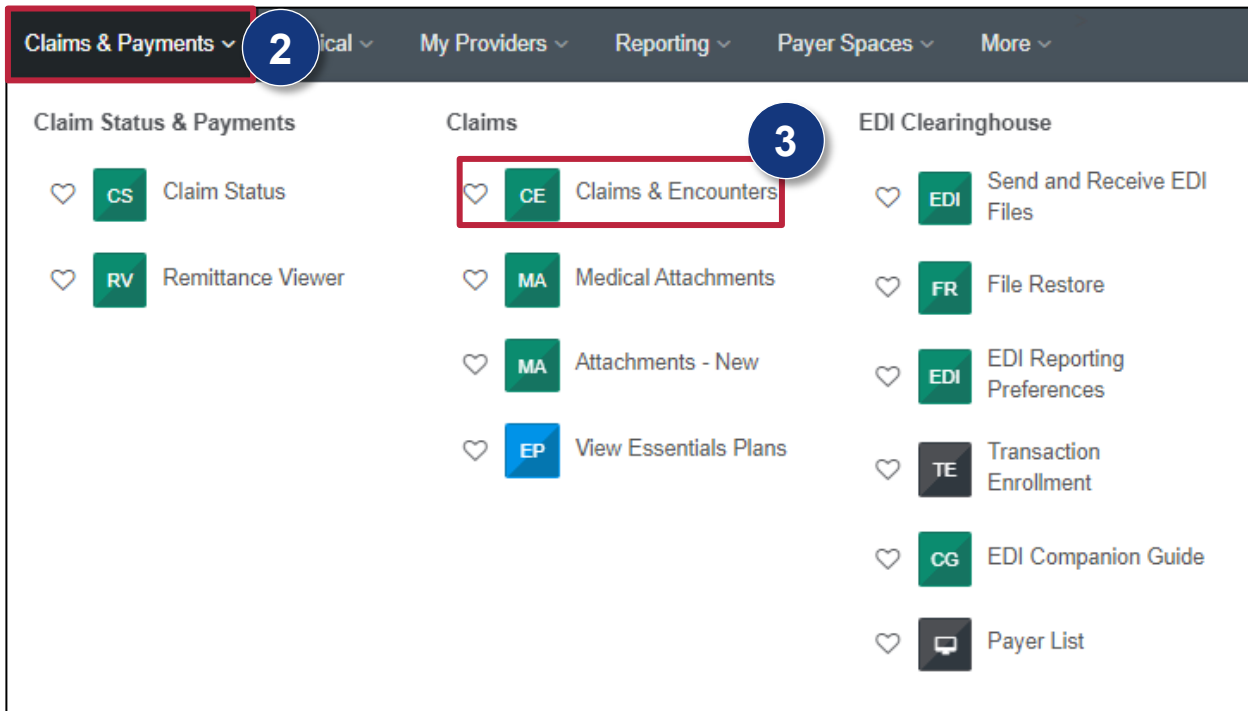


# Submitting Claims

1. Navigate to the main dashboard.



2. Select **Claims & Payments** from the ribbon.
3. Select **Claims & Encounters**.



4. The claims submission page will open.



5. Complete all **Insurance Company and Benefit Plan** Information fields, including:

- A. Organization
- B. Claim Type
- C. Payer
- D. Responsibility Sequence

**Note:** You must complete fields marked with a red asterisk to submit the claim. Filling out additional fields can be helpful but is optional. Ensure you complete the fields as accurately as possible. This helps ensure your claim is processed more efficiently.

CE Claims & Encounters Need Help? [Watch a demo](#) for submitting Professional Claims. [Give Feedback](#)

INSURANCE COMPANY/BENEFIT INFORMATION

Organization: TriWest Healthcare Alliance Corp (A) | Claim Type: Professional Claim (B) | Payer: TRIWEST HEALTHCARE ALLIANCE (C) | Responsibility Sequence: Primary (D)

Set / Show Form Data

PATIENT INFORMATION

Select a Patient [✕](#)  
Type to search...

6. Complete all required **Patient Information** fields.

Set / Show Form Data

PATIENT INFORMATION

Select a Patient [✕](#) (6)  
Type to search...

\* Last Name | First Name | Middle Name | Suffix

\* Date of Birth (mm/dd/yyyy) | \* Gender (Type to search...) | \* Relationship (Self)

\* Address | Address 2 | Country (United States)

\* City | \* State (Type to search...) | \* Zip Code (Type to search...) | Patient Amount Paid

Patient is deceased

[Add Ancillary Claim/Treatment Information](#)



7. Complete all required **Subscriber Information** fields.

SUBSCRIBER INFORMATION ?

**7**

\* Subscriber / Insured ID ?  Group Number ?  \* Authorized Plan to Remit Payment to Provider? ?

8. Complete all required **Billing Provider Information** fields.

BILLING PROVIDER INFORMATION

**8**

Select a Provider

\* Organization / Last Name ?  First Name  Middle Name

\* NPI ?  \* EIN ?  \* SSN ?

\* Specialty Code ?  \* Address ?  Address 2 ?

Country ?  \* City  \* State  \* Zip Code

Pay-to address is the same as the billing address

9. Complete all required **Claim Information** fields.

CLAIM INFORMATION

**9**

\* Patient Control Number / Claim Number ?  \* Place of Service ?  \* Frequency Type

\* Provider Accepts Assignment ?  \* Release of Information ?  \* Provider Signature on File ?

\* Claim Filing Indicator  \* Prior Authorization Number  Medical Record Number

Care Plan Oversight Number  Clinical Laboratory Improvement Amendment Number  Spinal Manipulation Service Patient Condition Code

Claim Note Reference Code



10. Enter the diagnosis code into the **Principal Diagnosis Code** field.

11. Complete all required **Lines** fields.

The screenshot shows a web-based form for entering claim information. At the top, there is a section titled "DIAGNOSIS CODES" with a red box around the "Principal Diagnosis Code" field, which contains a search prompt "Type to search...". A blue circle with the number "10" is overlaid on this field. Below this is a "+ Add" button. A grey bar with the text "Add Additional Claim Information" and a dropdown arrow is also visible. The main section is titled "LINES" and contains a table with one row. A red box highlights the entire "LINES" section, and a blue circle with the number "11" is overlaid on it. The table has columns for "Service From Date", "Service To Date", "Place of Service", "Procedure Code", "Procedure Description", "Modifier", "Diagnosis Code Pointer", "Charge Amount", "Quantity", and "Quantity Type". Each of these fields has a search prompt or a dropdown menu. There is also an "Emergency Indicator" checkbox and an "Actions" button. At the bottom right of the table, it says "Total: \$0.00". A "+ Add a Line" button is at the bottom left of the table.

12. Review all fields for accuracy and completeness.

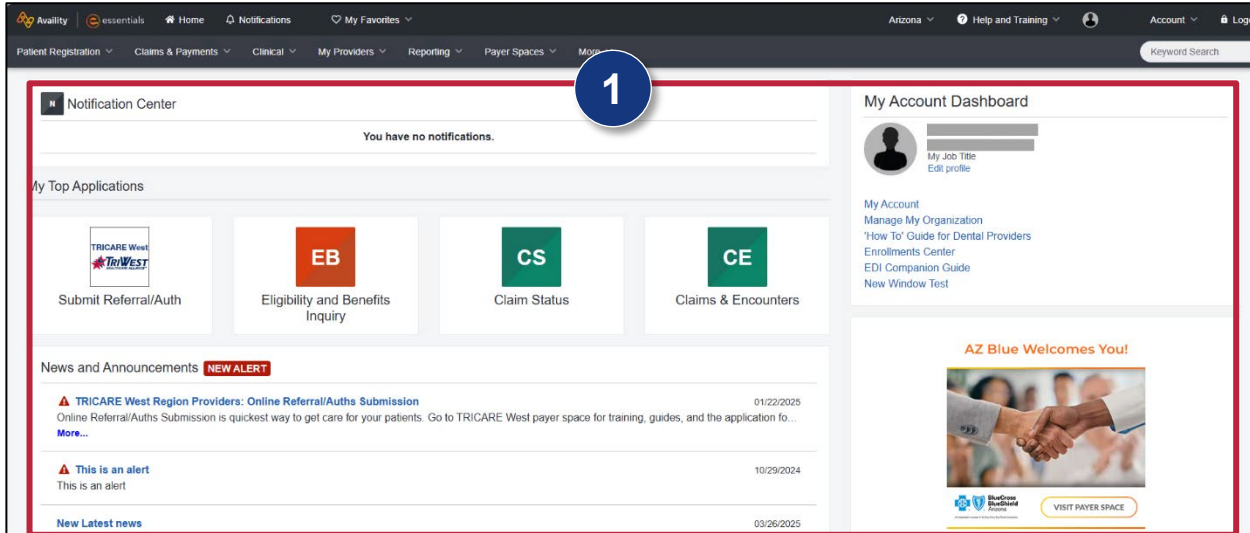
13. Select **Submit** once done.

14. You've successfully submitted your claim. The system will process the claim and forward it to the payer for review.

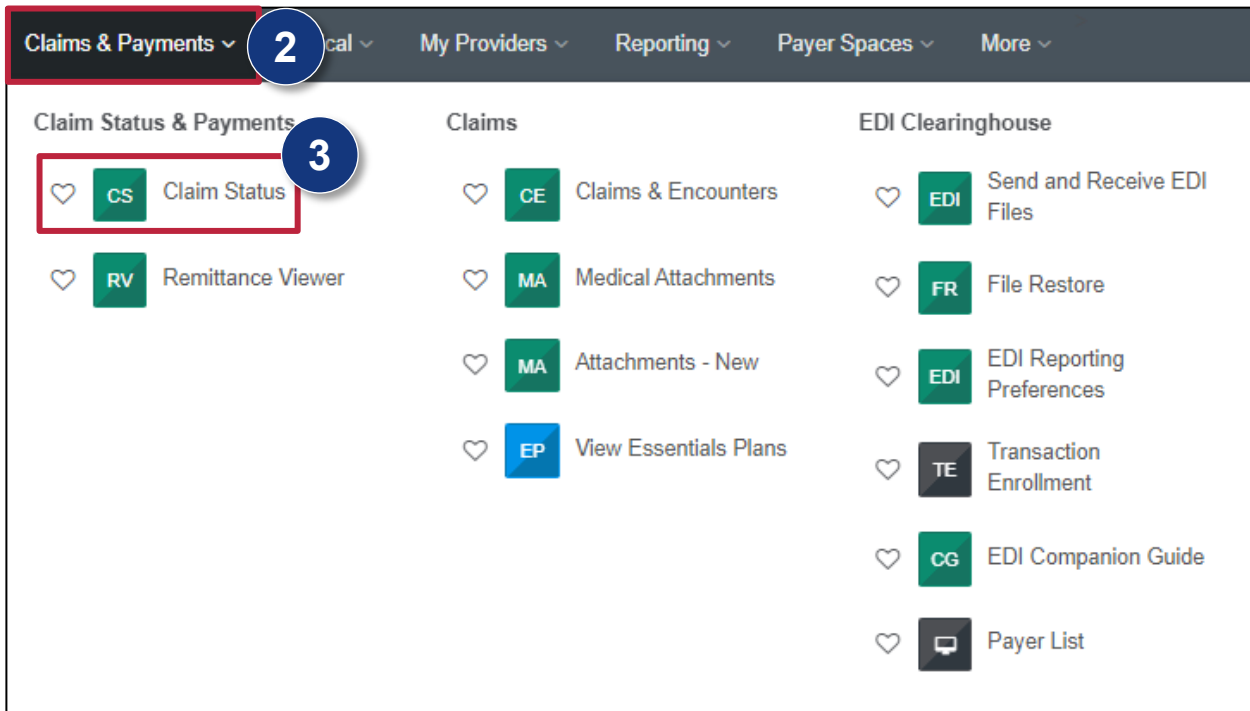


# Tracking Claims

1. Navigate to the main dashboard.



2. Select **Claims & Payments** from the ribbon.
3. Select **Claim Status**.





4. The Claim Status page will open.
5. Enter the search criteria into the fields.
6. Select **Submit**.

The screenshot shows the 'Claim Status' page in the TRICARE system. The page has a dark navigation bar at the top with links for Patient Registration, Claims & Payments, Clinical, My Providers, Reporting, Payer Spaces, and More. A search bar is located in the top right corner. Below the navigation bar, there is a breadcrumb trail: Home > Select > Search. The main heading is 'Claim Status' with a 'Give Feedback' button to its right. The form includes dropdown menus for 'Organization' (TriWest Healthcare Alliance Corp) and 'Payer' (TRIWEST HEALTHCARE ALLIANCE). There are tabs for 'Member', 'Service Date', and 'Claim History', with a 'View Saved Searches' link. A note states 'Fields marked with an asterisk \* are required.' The search criteria fields are: '\* Provider Tax ID', 'Provider NPI', '\* Member ID', and '\* Service Dates' (From Date and To Date). A 'Submit' button is located at the bottom right of the form.

7. Select the appropriate search result.
8. You've successfully found your claim status. The status will be updated to show if the claim is pending, approved, or denied. It will also indicate if the claim requires additional information to proceed.



## Using the Provider Portal Effectively: Tips and Tricks

1. **Log into your provider portal account frequently.** Logging in regularly lets you check for any recent updates or system changes that may affect your work.
2. **Subscribe to receive email or text alerts.** Subscribing keeps you informed of any critical updates or important information.
3. **Participate in training sessions and webinars scheduled on the portal.** These training opportunities help you stay updated on new features and best practices.
4. **Monitor the News & Announcements section** for new information about updates and system changes.
5. **Use secure methods when transferring sensitive information.** Before sending a document, verify the recipient's details to ensure you're sending it to the right person. Submit your reports promptly. Confirm that any documents you send have been received successfully.
6. **Follow best practices when submitting claims.**
  - A. Verify all information is complete and accurate before submitting a claim.
  - B. Provide complete documentation with your claim. Attach all necessary documents and ensure they meet the formatting requirements.
  - C. Submit claims promptly after the service was rendered.
  - D. Monitor your claims status regularly.