

Registering as a New PRISM User

Purpose: This standard operating procedure (SOP) outlines how provider office staff will register as PRISM users and obtain a PRISM provider portal account.

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|--------------------------------------------|----------------------------------------------|
| Standard Operating Procedure (SOP): | PRISM Provider Portal |
| Title: | Approving a New User for the Provider Portal |
| Effective Date: | 9/20/2016 |

BACKGROUND: After a Utah Medicaid provider’s enrollment application is approved, the designated Provider Account Administrator can assign PRISM profiles to other staff members in their office. The staff member must complete the Provider Portal user registration process; detailed in the **Requesting Access to the Provider Portal (and PRISM)** section below, before a profile can be assigned.

RESPONSIBILITIES OF THE PROVIDER ACCOUNT ADMINISTRATOR: The EXT Provider Account Administrator access profile is considered privileged access for the purpose of user management and includes other security duties. This is the initial profile assigned to the user that completes a new provider enrollment or validates the converted provider data. This profile, referred to as Provider Account Administrator throughout this document, has the responsibility of approving all new users for the provider’s domain, is accountable for maintaining user information in the system, maintaining appropriate access documentation and performing activity reviews, and removal of access. This profile should be restricted to user security management. If the Provider Account Administrator requires other portal access, that should be done through separate profiles assigned to that user.

This Standard Operating Procedure (SOP) covers the following procedures:

- User downloads and completes the Provider User Access Agreement
- User requests access to the Provider Portal

REQUESTING ACCESS TO THE PROVIDER PORTAL (AND PRISM)

The following steps are required for a user to obtain access to PRISM. Once the user has completed a Provider User Access Agreement (UAA), he or she will need to complete Provider Portal Access registration, detailed in Section II. Once access to PRISM is approved by the Provider Account Administrator, PRISM Profiles can be assigned to the user. **Note:** A user accesses PRISM through the Provider Portal.

I. USER DOWNLOADS AND COMPLETES THE PROVIDER USER ACCESS AGREEMENT

1. Navigate to (<https://medicaid.utah.gov/Documents/cover-sheets/PRISM-SEC-AGRMNT.pdf>)
2. Download a copy of the **Provider User Access Agreement** (The form should be filled out electronically for best readability before printing for signatures, not filled out on paper. Certain fields are marked as required on the PDF form.)
3. Fill out all fields in **Section 1 – User Information** (This section can be completed by either the employee’s supervisor or the user requesting PRISM access, however the user’s information should be entered. Note: the Utah-ID is a required field. If the user does not have a Utah-ID, see section II, item 3 on this section for those instructions, Return to this step after a Utah-ID is created.)

| Section 1 - User Information | | |
|------------------------------|-------------------|--------------------|
| Name | Email address | Utah-ID |
| Employer | Department/Office | Job Title |
| Street Address | City/State/Zip | Work phone # |
| Supervisor Name | Supervisor email | Supervisor phone # |

4. Fill out all fields in **Section 2 – Access Information**, and select the applicable checkboxes in the **Requested Access** boxes (This section should also be completed by the employee’s supervisor not the Provider Account Administrator)
 - **Select:** New, Change, Suspend, or Remove
 - These checkboxes refer to the action you are taking for the profile(s) selected in the sections below
 - **Select:** All applicable profiles to be assigned
 - **Fill out:** Justification for access box

| Section 2 - Access Information | <input checked="" type="checkbox"/> New <input type="checkbox"/> Change <input type="checkbox"/> Suspend <input type="checkbox"/> Remove (check one) | | |
|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Request Date | Effective Date | Expiration Date (If temp access) | |
| Requested Access (to see a profile description, hover over the profile checkbox) | PROVIDER <input type="checkbox"/> Credentialing Specialist <input type="checkbox"/> EDI Team <input type="checkbox"/> File View (inquiry) <input type="checkbox"/> Upload Files | PROVIDER EHR <input type="checkbox"/> Incentive Specialist (eMIPP system admin) | PROVIDER SECURITY <input type="checkbox"/> Account Administrator (account admin requires additional approval in Section 4 below) |
| Justification for access (required) | | | |

5. Print the completed **Provider User Access Agreement** in order to manually sign and date the document in **Section 3 – Security Agreement/Approvals** (User and Supervisor or other approving official [not the Provider Account Administrator] must complete this section)

- New user signs and dates the document
- Supervisor or other Approver signs and dates the document
- Return form to the Provider Account Administrator

| Section 3 - Security Agreement/Approvals | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|
| <i><u>User Acknowledgement</u>- I agree to comply with the Utah Department of Health, Division of Medicaid and Health Financing PRISM Access Agreement (located at medicaid.utah.gov/become-medicaid-provider) and all other policies that are appropriate to the system profile assigned for my use.</i> | |
| User Signature: | Date: |
| <i><u>Provider Approval</u>- I attest the requested access profile is appropriate and necessary for this individual to perform his/her assigned job duties. I understand training on system use is the supervisor's responsibility. Any changes in this employee's job duties which impact system use will be promptly reported to our PRISM account administrator.</i> | |
| Provider Signature: | Date: |
| Section 4 – Account Administrator Agreement/Approval | |
| <i><u>User Acknowledgement</u> _____ (initial) I additionally acknowledge the Provider Account Administrator access profile is considered privileged access for the purpose of user management and includes other security duties such as, but not limited to, maintaining appropriate access documentation and performing activity reviews.</i> | |
| <i><u>Provider Approval</u> _____ (initial) I additionally authorize this individual to serve as the PRISM account administrator for my organization.</i> | |

6. Utilize **Section 4** according to your internal business processes (This section is to be completed by the Provider Account Administrator after all business signatures have been added on the printed form.)

| | | |
|---------------------------------------------------------|----------------|---------------------------------------------------------|
| Section 4 - Security Tracking for Provider System Admin | | <input type="checkbox"/> scanned form uploaded to PRISM |
| Completed by | Date Completed | |
| Reviewed by | Date Reviewed | |
| Security Notes | | |

7. Provider Account Administrator scans and saves the completed Provider User Access Agreement to his/her computer in order to upload to PRISM during the Provider Portal Access approval process, as detailed in **Provider Account Administrator Grants User Access to PRISM – Section I.**

- a. Recommend using the following standard naming convention for the forms to be uploaded:
username_User_Agreement.pdf
- b. The original signed paper agreement may be kept or shredded per internal business process.

II. USER REQUESTS ACCESS TO THE PROVIDER PORTAL

1. The Provider Account Administrator must provide the requesting user with the PRISM provider domain name
2. The Provider Account Administrator must direct the user to the Utah Medicaid website (<https://medicaid.utah.gov/prism>) and provide the following instructions to assist the user in navigating to the Provider Portal Registration page:
 - Hover over the **Health Care Providers** menu
 - Select **Provider Portal Access**



- On the **Provider Portal Access** page, click the **Provider Portal Registration** hyperlink

Provider Portal Access

Converted Providers Accessing the New PRISM System for the First Time

Use this link if you are a Converted Provider accessing the Provider Portal for the first time and using the temporary credentials that were sent to you in a letter by mail. Once your temporary login credentials are validated, if the user exits the process without completing the validation and submission, the user will need to return to the process through the Provider Portal link (above).

A provider will have to register with the State of Utah by creating a Utah-ID account. If not currently logged in, you will be redirected and prompted to log in. If you have a Utah-ID and password, simply log in to access the New Enrollment Application or Track Application links. [Click here](#) for more information and instructions if you have not previously created a Utah-ID account.

If you have questions, please call Provider Enrollment at (801) 538-6155, or toll-free 1-800-662-9651 (option 3 then 4) or by email: providerenroll@utah.gov. Do not send protected health information (PHI) to this email address.

Provider Portal

Use this link if you are an Approved Provider and would like to log in to the Provider Portal.

Provider Portal Registration

Use this link to have additional users register for access to an Approved Provider account. The Provider Account Administrator will approve or reject this registration. The user will need the PRISM Domain of the provider for which they are registering.

3. The user will be prompted to enter his or her Utah-ID and password.
 - **Note: Utah-IDs are unique to each user and should not be shared with other users.**
 - If a Utah-ID and password needs to be created, click the **Create Account** hyperlink and use the following standards when creating a password

Utah-ID Password Standards

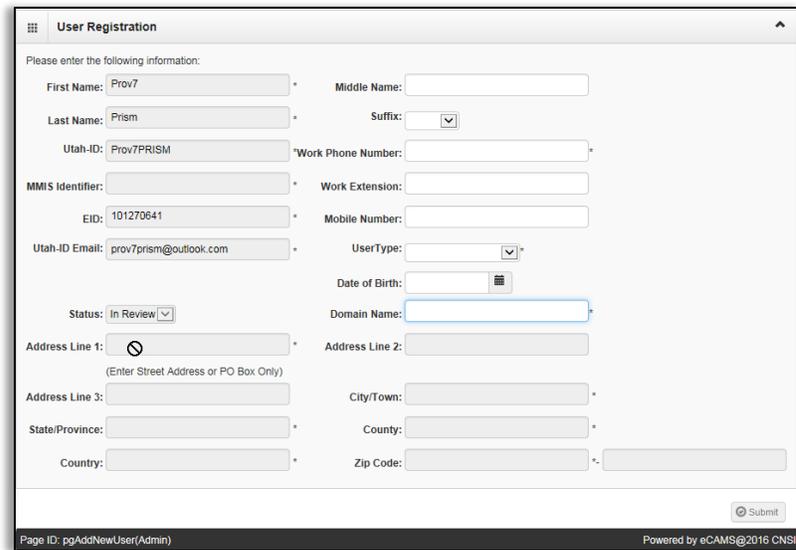
In order to access the PRISM Provider Portal, providers will need a Utah-ID password that meets the following standards:

- At least eight characters in length
- Passwords must have a combination of letter, numeric digits and special characters
- Passwords must include at least one character from three of the following attributes:
 - Uppercase characters (A-Z)
 - Lowercase characters (a-z)
 - Numeric Characters (0-9)
 - Special Characters (i.e: ., !, @, #, \$, %, ^, &, *,)

If the Utah-ID password previously created by the user does not meet these standards, providers will be forced to change their password to gain access to PRISM.

A screenshot of the Utah ID login interface. At the top is the Utah ID logo, which consists of the text "Utah ID" in blue, with a stylized blue and white icon of a person's head and shoulders. Below the logo are two input fields: "Email or Utah-ID" and "Password". Below these fields is a blue "Login" button. At the bottom of the form are two links: "Forgot Password?" and "Create Account".

4. The user fills out the **User Registration** page by:
 - Entering the domain name provided by the Provider Account Administrator in the Domain Name field
 - Entering a phone number in the **Work Phone Number** field
 - Selecting a user type from the **UserType** drop-down menu
5. Click **Submit**



User Registration

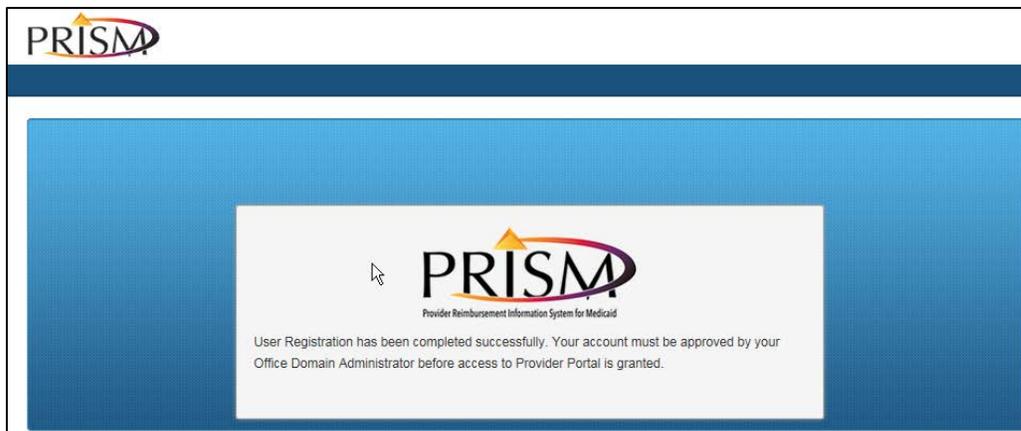
Please enter the following information:

| | |
|---------------------------------------|---------------------------|
| First Name: Prov7 | Middle Name: |
| Last Name: Prism | Suffix: [v] |
| Utah-ID: Prov7PRISM | Work Phone Number: |
| MMS Identifier: | Work Extension: |
| EID: 101270641 | Mobile Number: |
| Utah-ID Email: prov7prism@outlook.com | UserType: [v] |
| Status: In Review [v] | Date of Birth: [calendar] |
| Address Line 1: [lock icon] | Domain Name: [v] |
| (Enter Street Address or PO Box Only) | |
| Address Line 3: | City/Town: |
| State/Province: | County: |
| Country: | Zip Code: |

Submit

Page ID: pgAddNewUser/Admin Powered by eCAMS@2016 CNSI

6. If the user has completed all of the required fields, a confirmation page will display.



The Provider Account Administrator receives a notification that a new user account has been created and needs to be reviewed. He/she is now responsible for reviewing and approving the registration before the user can access the Provider Portal for that domain.