Provider Portal Companion Guide

HRSA COVID-19 Coverage Assistance Fund
Administered by The SSI Group

HRSA CAF Phone Support: (833) 967-0770 | TTY: (888) 970-2920
Hours: 8:00 AM to 8:00 PM, EST
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HRSA
Health Resources & Services Administration

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Enrollment

To enroll in the program, visit https://covid19coverageassistance.ssigroup.com/Enroll to start your enrollment. If you are already registered, select "Login Here" at the top right-hand side of the page to continue. If you have not registered, fill in the necessary information on the provider registration form shown in Figure 1. Read the "Insurance Confirmation" and select the "I attest to this statement" box at the bottom of the screen, then click "Submit."

Figure 1 | Provider Registration Form
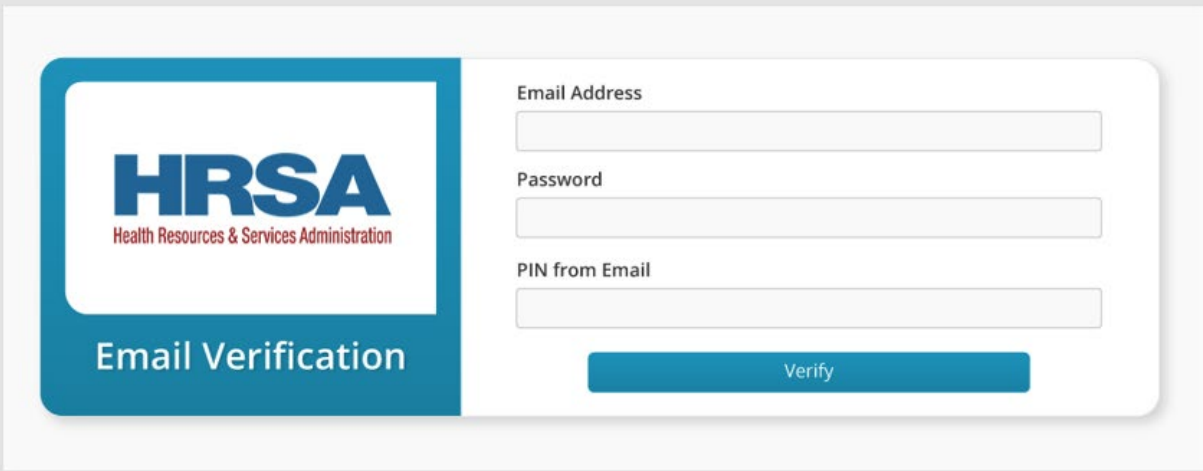
Once your form has been submitted the below will display (Figure 2).

Figure 2 | Provider Registration Confirmation

Provider Registration

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Text Resize A A A

Thank you for your registration request.

You will be getting an email from HRSA CAF with a link to verify your email, password, and pin.
If you do not receive an email within 2 hours please contact HRSA CAF at (833) 967-0770.
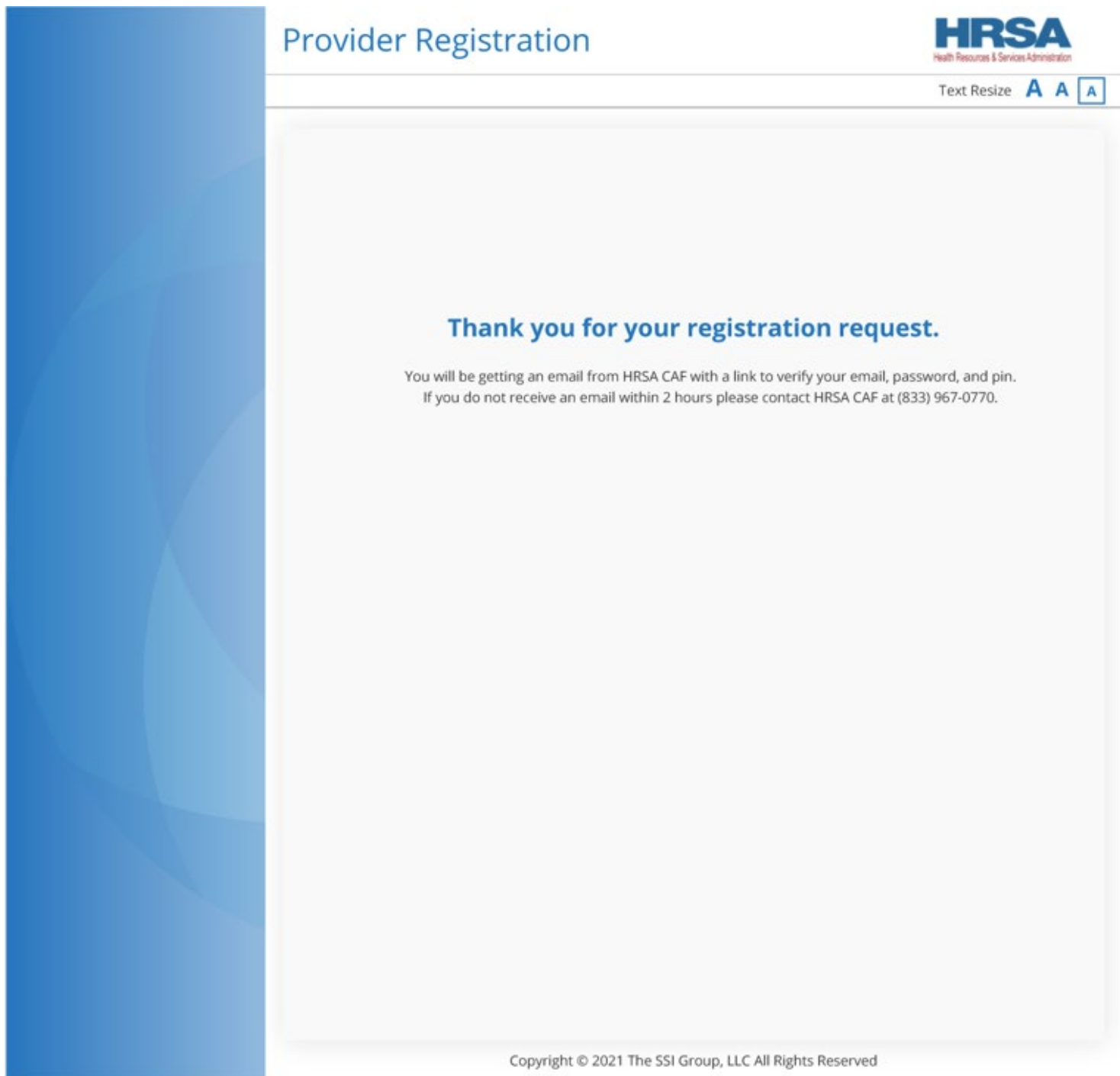
You will then receive an email confirmation from "no-reply@ssigroup.com" with a link to verify your email, password, and pin (Figure 3). If you do not receive an email within two hours of enrollment form submission, please contact HRSA CAF customer service at (833) 967-0770.
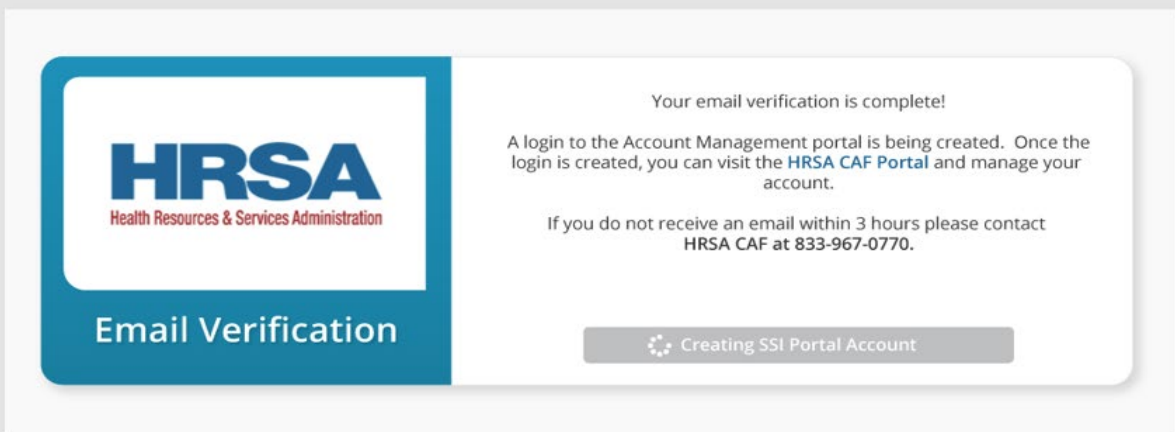
Figure 3 | Provider Registration Email Verification

When the email verification process is complete the below will display (Figure 4).

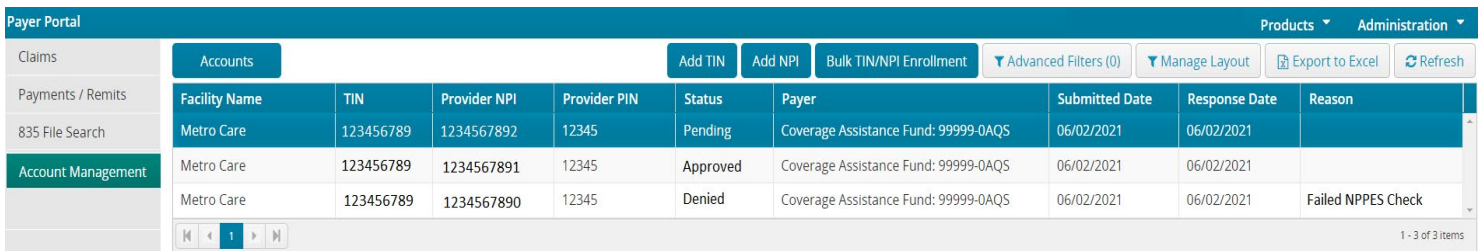Figure 4 | Provider Registration Email Verification Complete

Once your user account has been setup you will receive an additional "Setup Complete" email from "no-reply@ssigroup.com" which will include a link to access the Provider Portal to manage your account.

Account Management

After you complete your enrollment and receive an email confirmation, you can access the Account Management page (Figure 5) to check your enrollment status. Enrollment validation can take up to four business days, which includes confirming your Tax ID, NPI and banking ACH information.

Figure 5 | Account Management

Facility Name	TIN	Provider NPI	Provider PIN	Status	Payer	Submitted Date	Response Date	Reason
Metro Care	123456789	1234567892	12345	Pending	Coverage Assistance Fund: 99999-0AQS	06/02/2021	06/02/2021	
Metro Care	123456789	1234567891	12345	Approved	Coverage Assistance Fund: 99999-0AQS	06/02/2021	06/02/2021	
Metro Care	123456789	1234567890	12345	Denied	Coverage Assistance Fund: 99999-0AQS	06/02/2021	06/02/2021	Failed NPPES Check

As your enrollment processes, the status will update to "Pending, Approved, or Denied" as shown above in Figure 5.

> ➢ Pending Status - Enrollment validation still in process.

> ➢ Approved Status – Enrollment has been approved; you will now be able to submit claims through your clearinghouse or on this portal.

> ➢ Denied Status – Enrollment has been denied. Your enrollment can be denied for numerous reasons, including incorrect banking information, or incorrect/invalid NPI or Tax ID. Please see the "Reason" column for additional information. Review the reason for denial and request new enrollment with correction or contact HRSA CAF customer service (833) 967-0770 for additional assistance.

*NOTE: Claims should only be submitted to the HRSA CAF Provider Portal when the enrollment status is "Approved". Claims submitted for an NPI that has a status of "Pending" or "Denied" will be rejected.

Add Additional TIN Enrollment Option

To enroll additional TINs, please utilize the "Add TIN" option.

Select "Account Management" from the main menu then select "Add TIN". The following screen will display as shown in Figure 6.

Figure 6 | Add TIN

Add New FTN   ✕

Please enter the provider information and select Submit

Payer

Coverage Assistance Fund: 99999-0AQS   ▾

Provider Details

Provider Name*   Billing NPI*   Billing Federal Tax Number*

Address*   City*   State*   Zip Code*
                                                                Select State ▾

Account Administration Details

First Name*   Last Name*   Phone Number*

Email*   Confirm Email*
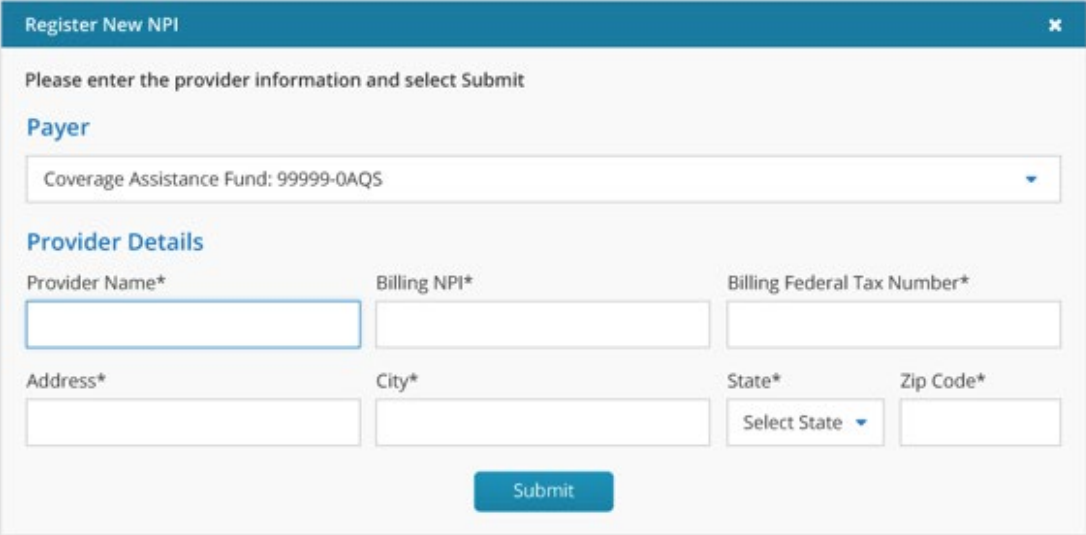
                                    Submit

Once the additional TIN enrollment request has been submitted the enrollment status can be viewed on the "Account Management" screen.

Add Additional NPI Enrollment Option

To enroll additional NPIs, please utilize the "Add NPI" option.

Select "Account Management" then select "Add NPI" and the following screen will display as shown in Figure 7.

Figure 7 | Add NPI

Once the additional NPI enrollment request has been submitted the enrollment status can be viewed on the "Account Management" screen.

Bulk TIN/NPI Enrollment Option

The bulk enrollment option will allow you to upload a CSV file that contains enrollment data for providers TIN and NPIs. The specified Account Administrator Information will be applied to all entries in the uploaded file.

File format must be a comma delimited (.csv) file format. No quotes (") or additional commas (,) are allowed. Each line requires the following data elements TIN, NPI, Provider Name, Address, City, State Abbreviation, Zip Code.

Select "Account Management" then select "Bulk TIN/NPI Enrollment" and the following screen will display as shown in Figure 8.

Figure 8 | Bulk TIN/NPI Enrollment

Once the bulk enrollment request has been successfully submitted, the enrollment status can be viewed on the "Account Management" screen.

Claims

Claims List

To view previously submitted claims, select the "Claims" tab from the main menu. The "Advanced Filters" tab will allow you to create a customized claims list. When a claim is selected from the claims list the "Transaction Details" will display as shown below (Figure 9).

Figure 9 | Claims List

To view the status of a claim, select the claim from the claims list then select the "Tracking Details" tab as shown below (Figure 10). Claim status can also be found by visiting covid19coverageassistance.ssigroup.com/StatusPortal.

Figure 10 | Claim Status Tracking Details

▾ Selected Claim ID: -2147413495						
Transaction Details	**Tracking Details**	Error Details	837 Files	835 Files		⟳ Refresh

Status Date ↓	Bill Trace	Trace Number	Category Code	Status Code	Status Description
10/07/2021 04:03:31	07873-2147422239	187210968	A3	21	Missing or invalid information: See 277 or 864 for details

| ⏮ ◄ **1** ► ⏭ | | | | 1 - 1 of 1 items |

To view the details for a rejected claim, select the claim from the claims list then select the "Error Details" tab as shown below (Figure 11).

Figure 11 | Claim Error Details

▾ Selected Claim ID: -2147413495						
Transaction Details	Tracking Details	**Error Details**	837 Files	835 Files		⟳ Refresh

Claim Link	Error Message	Data In Error	Actions
-2147413495	IF PRIMARY ADJUSTMENT GROUP CODE (CHG) EXISTS THEN PRIMARY ADJUSTMENT REASON CODE (CHG) MUST EXIST AND MUST BE A VALID CL	28	View

| ⏮ ◄ **1** ► ⏭ | | | 1 - 1 of 1 items |

To view the 837 file for "Uploaded Files" or "Keyed Claims", select the claim from the claims list then select the "837 Files" tab as shown below (Figure 12).
Please note claims submitted through a clearinghouse (Electronic Data Interchange) may contain comingled claims and will not be visible here.
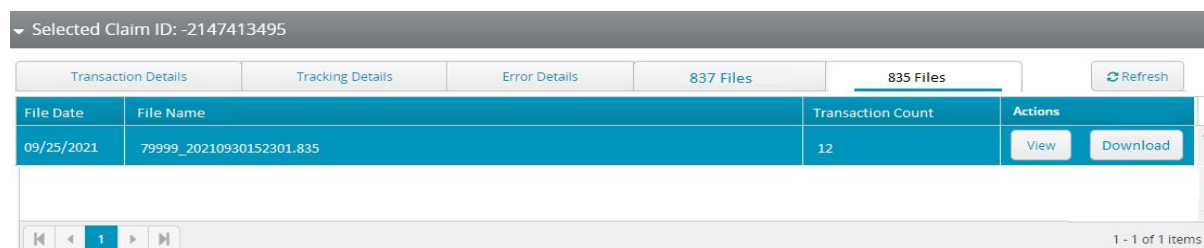
Figure 12 | Claim 837 File View

▾ Selected Claim ID: -2147413495						
Transaction Details	Tracking Details	Error Details	**837 Files**	835 Files		⟳ Refresh

File Date	File Name	Transaction Count	Actions	
09/25/2021	79999_20210925235956.837	12	View	Download

| ⏮ ◄ **1** ► ⏭ | | | | 1 - 1 of 1 items |

To view the 835 file for the selected claim from the claims list, select the "835 Files" tab as shown below (Figure 13). The 835 file will only be available for claims that have completed the claim adjudication process.

Figure 13 | Claim 835 File View

Claim Submission

Please note, while all providers are required to register and receive approval via this portal prior to claim submission, the two claim submission options described below are offered only as an alternative for providers that do not have the ability to submit claims via a participating clearinghouse. There are two options to submit a claim through the provider portal:

➢ Upload a claim file into the portal
➢ Direct Data Entry to manually enter a new claim

Claim File Upload

Providers who submit electronically through a clearinghouse can continue to send claims through their clearinghouse or can upload claims in batches to the portal. If files are submitted in a valid HIPAA 837 claim format and have the CAF payer ID (99999-0AQS) in loop 2010BB NM109, your claims will successfully be processed.

The "Uploaded Files" tab will display all previously uploaded files. To upload a new claim file, select "Claims" from the main menu then the "Uploaded Files" tab. Uploaded claim files can only contain claims for the selected TIN and may not contain facility NPIs that are not already registered to the provider.
Next select the "Upload File" option, as shown in Figure 14.

Figure 14 | Uploading a Claim File

When the "Upload File" tab is selected the below will display (Figure 15). When the claim file has been accepted the claims will display in the claims list on the "Claims" tab.

Figure 15 | Uploading a Claim File

Keyed Claims

To view previously keyed claims, select the "Claims" tab from the main menu, then select the "Keyed Claims" tab (Figure 16). The "Advanced Filters" tab will allow you to create a customized claims list.

Figure 16 | Keyed Claims List

If you do not have an 837 file, follow the claim submission instructions below.

To enter a new claim, select the "New Claim" tab. The following screen will display (Figure 17). You will need to select the appropriate billing Facility and Type of Claim (Institutional or Professional).

Figure 17 | Payer and Claim Type

Select a Professional/CMS1500 Type of Claim for providers submitting vaccine administration claims. An example of a professional claim form is displayed below in Figure 18. All data fields with an asterisk (*) are required to be populated.

Figure 18 | Professional Claim Form

Select an Institutional/UB-04 Type of Claim for providers submitting outpatient vaccine administration claims. An example of an institutional claim form is displayed below in Figure 19. All data fields with an asterisk (*) are required to be populated.

Figure 19 | Institutional Claim Form

To add a charge line to a keyed claim, select the "Add Charge" button located at the bottom of the claim form. Once selected the following screen will display (Figure 20). In order to determine a claim's eligibility for payment under this program, service line level adjudication from prior payer(s) must be included. Service line adjustments and the service line paid amount are required on all claims.

Figure 20 | Add Charge Line

Once the forms have been populated and charges have been added, you can submit the form. You can also save your progress by clicking "Save as Draft" at the bottom of the page. The "Save as Draft" claim can be located under the "Keyed Claims" tab with a claim status of "Draft". To make changes to the "Draft" claim, select the claim, then select "Edit Claim". This will allow for claim modifications and submission.

Payments/Remits

Once a claim has been submitted and successfully processed, you can expect to receive an electronic remittance advice (ERA) along with ACH payment in five (5) business days. If you receive an ERA with a denial of payment, a new claim will need to be resubmitted with correction, if applicable. Do not file an appeal.

The "Payment/Remits" tab on the main menu will allow users to view all payments and remits. To locate a specific payment the following search options are available: Check Number, Check Date, FTN/TIN, NPI, and Status (Figure 21).

Figure 21 | Payments/Remits

The "835 File Search" tab on the main menu will allow users to view all 835 files. To locate a specific 835 file the following search options are available: File Name, File Date, and File Content (Figure 22).

Figure 22 | 835 File Search