Provider Directory Real-time Updates

Individual Provider User Guide



How to Use this Guide

This guide serves to help individual providers navigate the Online Provider Directory real-time updates tool. The real-time updates tool allows providers to verify and update their online provider directory information. With your help, we can reduce frustration, confusion, and uncertainties experienced by patients, by keeping profile information current and limiting the amount of incorrect information.

To get started, you will need to register for a myPRES account, or know how you already registered for an account. This is important because permissions are based on registration type. The types are listed below:

- **Individual** An individual provider is a single person who practices medicine or one of the allied healthcare professions. This means you are not working as part of a group.
- **Group** A group is a cooperative practice of medicine as a group of physicians and/or allied healthcare professionals that share a common building, consulting rooms, labs, staff, equipment, etc.
- **Facility** A facility is a hospital, home health agency, skilled nursing facility, free-standing surgical center, etc. where inpatient care is rendered.

If you are unsure if you are an individual, group, or facility, please do not move forward with registration or using the real-time updates tool. Please reach out to your Provider Network Management relationship executive, or send an email to providerdemo@phs.org.

If you are certain you are registered as an individual provider, please review the frequently asked questions (FAQs) at <u>www.phs.org/DirectoryUpdate</u>. After reading the FAQs, you can request myPRES access or login to an existing myPRES account, and/or begin verifying and making updates to your online provider directory profile.

Provider Directory Update FAQs Website

The frequently asked questions website at <u>www.phs.org/directoryupdates</u> is a great resource to get started.

Providers | Contact Us | Update Provider Directory

NEWS & COMMUNICATIONS

UPDATE PROVIDER DIRECTORY



Chaplaincy Services

We provide ministry and emotional support for patients and their families and support for healthcare workers in times of crisis. Let us help. Learn More •



Presbyterian Health Plan News & Updates

Find out about the newest staff and the latest technology, and all the other happenings at Presbyterian. Learn More +

Update Provider Directory

You can now update your provider directory profile on the myPRES provider portal!

To help you navigate the new process, we have listed a few frequently asked questions below. If you need help getting started, please contact your Provider Network Management relationship team.

Contact Us >

If you are a behavioral health provider, please reach out to your Presbyterian behavioral health liaison at 800-424-6035 to learn more about updating your profile.

Where do I make updates?

Providers will make all updates and changes through the myPRES provider portal. To make updates, providers and provider offices must have a current myPRES account.

Log into myPRES .

What if I do not have a myPRES ID or account?

If you do not have a myPRES account, or if you have not accessed your myPRES account in the past year, you will need to register for a new one.

Register for myPRES +

Who in my office can make updates?

Provider offices will need to identify staff members as authorized delegates to make changes on behalf of the office through the portal.

How do I choose a delegate to make updates?

Offices must submit a request for access.

Submit Request >

Once I have access and permissions, how do I make updates?

When you log in to the myPRES provider portal, you will choose "Update Provider Directory" from the Menu of Service. You will then click on the section you would like to update. Updates may include, but are not limited to, demographic information, address, panel status, languages spoken, and hours of operation.

Choosing a Delegate

Individual providers do not need to choose a delegate as they are automatically given access to make profile updates. To being, log into myPRES and select "Update Provider Demographic Information" in the myPRES Workforce Menu of Services.

| A PRESBYTERIAN | Hi, LESLIE My Account ▶ Log Out ▶ |
|-----------------------------------------------|---------------------------------------|
| myPRES Workforce | |
| MENU OF SERVICES | |
| Provider Services | |
| Behavioral Health - Magellan Portal ♦ | |
| Cultural Sensitivity Competencies | |
| myPRES Provider Portal > | |
| National Imaging Associates Provider Portal > | |
| Update Provider Demographic Information > | |
| ▲ View Less | |

This will open the dashboard below. Click on the green tabs to choose which sections of the profile to update.

| A PRESBYTERIAN | Hi, | LESL/E Log Out > O Provider / Employer / Employ | ree Links 🕨 |
|-------------------------------------|-----------------------------------|----------------------------------------------------------------|-------------|
| myPRE | S (| | |
| UPDATE PROVIDER IN | FORMATION | | |
| Directory Address & Office Hours | Physical Address | Mailing & Remittance Address* | |
| Panel Status & Spoken Languages | Manage Delegates on My Account | Select different Provider Record Go to myPRES Menu of Services | |
| | | Go to myPRES Menu of Services | |

Example of "Directory Address & Office Hours" tab

| BYTERIAN | | | HI, LESLIE | Log Out ► | Provider / Employer / En | nployee Lir |
|--------------------------------------------------------------------------------|----------------------|-------------|------------|-----------|--------------------------|-------------|
| myPR | ES | | | • | , | |
| 1 Dece | | | | le - | Carto | ar |
| | | | | | | |
| | | | | | | |
| | | SS & OFFICE | HOURS | | | |
| Updating Directory Address & Office | Hours for Taxonomy # | SS & OFFICE | HOURS | | | |
| | Hours for Taxonomy # | SS & OFFICE | HOURS | | | |
| Updating Directory Address & Office | Hours for Taxonomy # | SS & OFFICE | HOURS | | | |
| Updating Directory Address & Office Select the address that you want to upo | Hours for Taxonomy # | SS & OFFICE | HOURS | ZIP | Action | |

Click "Update" to view the address or office hours you need to update.

Verify if the address is correct. If it is not, delete the address information in the fields and replace it with the correct one. Please note that all addresses will be verified by the United States Postal Service (USPS) for correctness. Therefore, please refrain from using punctuation in the address.

CORRECT: 508 SAN PASQULE AVE SW **INCORRECT:** 508 SAN PASQUALE AVE, S.W.

| UPDATE DIRECTORY A | DDRESS & C | OFFICE HOURS |
|----------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------|
| Updating Directory Address & Office Hours for | Taxonomy # | |
| The address listed below will automatically be valida please make any necessary changes to ensure you | | al Service system. If you receive an error message upon submission, USPS. |
| Directory Address | | |
| Address* | Telephone* | Extension |
| 508 SAN PASQUALE AVE SW | 505-615-3382 | |
| Please add Sulle, Bullding, Unit #, etc. on Address Line 2. | FAX | Extension |
| Address Line 2 | | |
| STE 4 | | |
| | *Required fields | |
| City* | 1 | |
| ALBUQUERQUE | | |
| State* ZIP* | _ | |
| New Mexico 87104-1136 | | |
| | | |

Verify if the office hours are correct. If not, choose the time from the dropdown, choose A.M. or P.M., or choose if the office is closed that day.

| Office closed |
|---------------|---------------|---------------|---------------|---------------|---------------|---------------|
| Office Opens |
| 7:30 💌 | 7:00 👻 | 7:00 💌 | 7.00 | 7:00 | Select. | Select. |
| AM. | AM. | AM. | A M. | A M. | AM. | AM. |
| P.M. | ● PM. | PM. | O PM | PM. | PM. | ₩ PM |
| Office Closes |
| 8:00 | 8:00 | 7:00 | 6:30 | 8.00 | Select. | Select. |
| AM. | AM. | AM. | AM. | A.M. | AM | AM. |
| P.M. | PM. | P.M. | PM. | PM. | PM. | PM. |
| | | | | | | |
| CANCEL | SAVE Remove | this address | | | | |

Example of "Update Provider Panel Status & Spoken Languages*" tab

| SBYTERIAN | Hi, TES | STING GROUP │ Log Out ► | Provider / Employer / Employee Links > |
|---------------------------------------------------------------------------------|------------------|-------------------------|----------------------------------------|
| my PRES | | | * |
| UPDATE PROVIDER PANE Note: You are updating this information on behalf of EX | PERIAN, PROVIDER | | UAGES |
| Provider Network | Spoken Lang | juages | |
| Provider network Commercial | Arabic | Greek | Polish |
| | Chinese | Hebrew | Portuguese |
| Panel Status | Dutch | Hindi | Punjabi |
| Accepting new patients | English | Hungarian | Russian |
| Patient maximum (total # of patients) | Farsi | Italian | Sign Language |
| 99999 | Filipino | Korean | Spanish |
| Patient gender accepted | French Canadian | Navajo (Dine) | Urdu |
| Both males and females | | | |
| Females only | German | Persian | Vietnamese |
| | _ | _ | ontact your assigned Relationship |

1. Provider Network

Providers will need to begin with this field as each network the provider is contracted with (e.g., Commercial, Medicaid, and/or Medicare) will need to be completed separately – even if the information is the same for all networks.

2. Spoken Language

The system will automatically default to English. If the provider speaks additional languages, click on the languages to insert checkmark.

3. Panel Status

You can indicate if the provider is accepting new patients under panel status and if they have age or gender restrictions (e.g., pediatrics, gynecology, etc.).

4. Save & Repeat

Choose "Save" and then repeat for the next network the provider is contracted with.

Example of "Manage Delegates on my Account" tab

Even though individual providers are automatically delegates, they can also choose office staff to be delegates as well. To add a delegate, choose the "Add Delegate" tab.

| & PRESBYTERIAN | Hi, LESLIE Log Out + | Provider / Employer / Employee Links > |
|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------|
| my PRES | | * |
| MANAGE DELEGATES Managing Delegates for Taxonomy # Your account does not have any delegates. You can have up to two delegates | that can manage address, office hours, panel s | tatus, and languages on your behalf. |
| 6 BACK TO MERIC ADD DELEGATE | | |

To add a delegate, enter the user by his or her name or existing myPRES ID. If the person who is chosen to be a delegate does not have a myPRES account, they will need to register for an account at <u>https://mypres.phs.org/Pages/provider-registration.aspx</u>.

| Managing | Delegates for Taxonomy # |
|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Delegates m | ust have a valid myPRES ID to be assigned to your account. The employee's myPRES ID or First Name or Last Name to find the user that you want to add. |
| Searc | h for myPRES Users |
| | |
| myPRES ID | or Name |
| myPRES ID | or Name |
| nyPRES ID | or Name |
| CANCEL | SEARCH |

Example of "Physical Address" tab

Your physical address might be different than your directory address. Verify if the address is correct. If it is not, delete the address information in the fields and replace it with the correct one. Please note that all addresses will be verified by the United States Postal Service (USPS) for correctness. Therefore, please refrain from using punctuation in the address.

CORRECT: 508 SAN PASQULE AVE SW **INCORRECT:** 508 SAN PASQUALE AVE, S.W.

| Updating Physical Address for Taxonomy # | | | |
|--------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------------------------|--------------|
| The address listed below will automatically be validate make any necessary changes to ensure your address | | rvice system. If you receive an error message upon submi | sion, please |
| Physical Address | | | |
| Address* | Telephone* | Extension | |
| 9705 SAMIA ST NW | 505-615-3382 | 34 | |
| Please add Suite, Building, Unit #, etc. on Address Line 2. Address Line 2 | FAX | Extension | |
| | Email Address | | |
| City* | 1 | | |
| ALBUQUERQUE State* ZIP* | *Required fields | | |
| New Mexico 💌 87114-5999 |] | | |
| Note: If you need to change the State, contact your assigned Relationship Executive for assistance. | | | |
| | | | |

Example of "Mailing and Remittance Address*" tab

This tab will show both the mailing address and the remittance (billing) address. Please note: providers cannot update their remittance address via the real-time updates tool. Providers must contact their relationship executive/relations service associate team to make the appropriate changes.

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|------------------------------------------------------------------------------------------|------------------------|------------------------------|----------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
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| all and a | | 14 3 3 8 | 200 | | and the second sec | - AREA |
| | | | | | | |
| UPDATE MAIL | ING & RE | MITTANCE | ADD | RESS | | |
| | | | | | | |
| Updating Mailing & Remitta | nce Address for Ta | axonomy # | | | | |
| Updating Mailing & Remitta Select the address that you war | | 1000 Barris Barris 11 | | | | |
| | | 1000 Barris Barris 11 | State | ZIP | Address Type | Action |
| Select the address that you war | nt to update, or add a | a new address. | State | ZIP 87114-5999 | Address Type | Action Update • |
| Select the address that you war Address 1 | nt to update, or add a | a new address. | 10 Sectorities | 1997 | | (Christelenon) |
| Select the address that you war Address 1 9705 SAMIA ST NW | Address 2 | City ALBUQUERQUE ALBUQUERQUE | NM | 87114-5999 87113-0000 | Mailing | Update • |
| Select the address that you war Address 1 9705 SAMIA ST NW 4817 SAN PEDRO DR NE | Address 2 | City ALBUQUERQUE ALBUQUERQUE | NM | 87114-5999 87113-0000 | Mailing | Update • |

Update Mailing Address

Verify if the mailing address is correct. If it is not, delete the address information in the fields and replace it with the correct one, or choose "Same as Physical Address" if it is the same as your physical address. However, if choosing "Same as Physical Address" please make sure you have verified that the physical address is correct.

| UPDATE MAILING ADDR | ESS | |
|---------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------|
| Updating Mailing Address for Taxonomy # | | |
| The address listed below will automatically be validated make any necessary changes to ensure your address | | ervice system. If you receive an error message upon submission, please |
| Mailing Address | | |
| Same as Physical Address | | |
| Address* | Telephone* | Extension |
| 9705 SAMIA ST NW | 505-615-3382 | 34 |
| Please add Suite, Building, Unit #, etc. on Address Line 2. Address Line 2 | FAX | Extension |
| | *Required fields | |
| City* | | |
| ALBUQUERQUE | | |
| State* ZIP* | | |
| New Mexico | | |
| Note: If you need to change the State, contact your assigned Relationship Executive for assistance. | | |
| CANCEL | | |

Please note that all addresses will be verified by the United States Postal Service (USPS) for correctness. Therefore, please refrain from using punctuation in the address.

CORRECT: 9705 SAMIA ST NW INCORRECT: 9705 SAMIA ST, N.W.