

# Provider Portal Reference Guide



## Registration & Access

**An activation code is required** for new providers to access FirstCare’s Provider Self-Service Portal. If you are a new provider, please follow the steps below to obtain an activation code to create a new account:

- 1 Contact the Provider Relations Team (*see contact information below*).
- 2 Please have the following information on hand:
  - First and last name
  - Name of organization
  - Email address
  - Billing address
  - Job title
  - Phone Number
  - Group NPI
  - Group tax ID number
  - Names and NPIs of individual providers  
*Access can be granted to entire group, if necessary.*
- 3 After your information is in our system, we’ll provide you with an activation code.
- 4 Log in to the Provider Portal at [my.firstcare.com](http://my.firstcare.com) and create a new user account.

**Note:** *If you already have access to the Provider Portal and need to add new users, simply follow the same steps above once logged into your account at **View/Edit My Info** and **Registered Providers**.*



## Getting Help

Our Provider Relations Team is here for you. Please contact your FirstCare Provider Relations Representative—*listed below*—with your questions.

Region	Phone Number	Email
Abilene	254-298-3064	<a href="mailto:swhpproviderrepresentatives@bswhealth.org">swhpproviderrepresentatives@bswhealth.org</a>
Amarillo	806-467-3200	<a href="mailto:prsupport@bswhealth.org">prsupport@bswhealth.org</a>
Lubbock, Waco and other areas	806-784-4380	<a href="mailto:prsupport@bswhealth.org">prsupport@bswhealth.org</a>



## Navigation

Simply select the activity/function you wish to access from the left navigation bar. For example, to access claims-related information, click on **Claims**. This opens up the view below.

**NOTE:** This example shows all of the navigation bar options open for display purposes only. These will not display unless you click on the section header.

The screenshot displays the FirstCare myFirstCare Self-Service portal. The left navigation bar is expanded to show the 'Claims' section, which includes options like Claim Search, Electronic Claims Status, Claim Submission, Authorizations, and Reports. The main content area is titled 'Home' and features a 'Claims' section with a donut chart showing 0 processed, 0 pending, and 0 denied claims. There is also an 'Authorizations' section with a donut chart showing 2 approved, 1 partially approved, 1 not approved, and 0 pending authorizations. Below these are 'Announcements' and 'Quick References' sections.

**FirstCare**  
HEALTH PLANS

myFirstCare Self-Service

Home

Members

Claims

Claim Search

Electronic Claims Status

Claim Submission

Authorizations

Auth. Requirements

Auth. Code Search Tool

Auth. Request

Auth. Search

Reports

Panel Reports

Texas Health Steps

Important Documents

All Documents

Appeals and Complaints

Manuals

Provider News

Training

HEDIS

View/Edit My Info

myFirstCare Account

Registered Providers

Message Center

My Messages

Send a Message

Contact Us

Log Out

Home

Provider

Date Range

one month

Claims

Authorizations

Processed

Pending

Denied

Approved

Partially Approved

Not Approved

Pending

Announcements

Attention FirstCare Hospitals—Concurrent Review Fax Number Update

We encourage all of our providers to utilize our FirstCare Provider Self-Service portal to submit new inpatient authorization requests, including clinical information. In order to streamline our processes —effective immediately, please submit all inpatient clinical information to 800-248-1852. The following fax number will be deactivated: 806-403-1660.

Quick References

Provider News

STAR & CHIP Provider Information

Authorization Information

Case Management/Disease Management Referrals

Important Forms

Electronic (EFT) Payments

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## Requesting an Authorization

- 1 Select Authorizations and then choose Auth. Request from the drop-down
- 2 Enter the member ID number and ordering provider, along with the date of service, authorization type and service code.
- 3 Click **Validate Information** and then **Continue** to fill out the contact information related to the authorization.
- 4 Once the **Contact Information** has been added, click **Continue** to provide all necessary details regarding the authorization.
- 5 Upload supporting document(s). *This is optional.*
- 6 Click **Submit**.

The screenshot shows the 'Authorization Request' page in the myFirstCare Self-Service portal. The page has a blue header with the FirstCare logo and 'HEALTH PLANS' on the left, and 'myFirstCare Self-Service' on the right. A dark sidebar on the left contains navigation links: Home, Members, Claims, Authorizations (highlighted), Auth. Requirements, Auth. Code Search Tool, Auth. Request, Auth. Search, Reports, Important Documents, View/Edit My Info, Message Center, Contact Us, and Log Out. The main content area is titled 'Authorization Request' and features a green 'Start Request' button. Below this are input fields for 'Member ID\*' (with a placeholder 'Member ID...'), 'Ordering Provider\*' (a dropdown menu), and 'Search for Practitioners\*' (a search box with 'Provider NPI...' placeholder). A note below the provider fields states: 'Please note: We now allow the selection of all in-network FirstCare providers as ordering providers instead of groups. If the ordering Provider cannot be located, please fax your request to 800-248-1852 (Medical), 800-431-7738 (DME), or 512-233-5949 (Behavioral Health)'. There is also a 'Date of Service \*' field with a calendar icon, an 'Authorization Type\*' dropdown menu, and a 'Service Code\*' field. A green 'Validate Information' button is located at the bottom right of the form. The footer contains the copyright notice: '© 2019 FirstCare Health Plans. All rights reserved. Legal Notices & Privacy | FirstCare.com'.



## Appealing a Claim

- 1 Perform a claim search to find the claim or claim line to be appealed.
- 2 Click on **Appeal**.
- 3 Enter the information on the **Reason for Appeal** tab and attach any supporting files (*optional, except for Reasons with an asterisk.*).
- 4 Click the **Claim Lines** tab to view/edit the lines for a claim.
- 5 Return to the **Reason for Appeal** tab to summarize the appeal.
- 6 Click **Submit Appeal**.



## Appealing a Claim (cont.)

See below for screen image of **Claim Appeal** window.

**FirstCare**  
HEALTH PLANS

myFirstCare Self-Service

**Claim Appeal**

Member Name: Member ID: Start Date: Paid Date:  
 Provider NPI: Patient Control #: End Date: Paid Amount:  
 Charge: Network:  
 Provider Name: Date of Birth:  
 Claim Number: Status:

**Reason for Appeal** | Claim Lines

Indicate the reason for Appeal:

- Provider information updated
- Member eligibility updated
- Authorization updated
- Denied in error
- EOB Attached (COB Claim)\*
- Corrected/Replaced Claim
- Resubmission with Proof of Authorization/Referral\*
- Resubmission with Proof of Timely Filing\*
- Other (specify reason below)

\*Requires an attachment be submitted

Attachments (File Types: WORD DOCUMENT, PDF, TXT, or EXCEL. Maximum file size 20 MB)

or Drop file here

Please provide a summary of this appeal. You may also include any additional supporting information that you believe is useful for the claim's appeal.

An Appeal Reason is required to appeal a Claim. If you want to review or edit Claim Lines, please do so BEFORE clicking the "Submit Appeal" button. Select the "Claim Lines" tab above.

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After your submission is complete, a reference number will be provided to track your appeal. Notation of the appeal will also be documented in the **Message Center**.