

TX VDP Provider Portal – Registration User Guide

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Privacy and Security Rules

The Health Insurance Portability and Accountability Act of 1996 (HIPAA – Public Law 104-191) and the HIPAA Privacy Final Rule¹ and the American Recovery and Reinvestment Act (ARRA) of 2009 requires that covered entities protect the privacy and security of individually identifiable health information.

¹ 45 CFR Parts 160 and 164, Standards for Privacy of Individually Identifiable Health Information; Final Rule

Revision History

Version #	Published/ Revised	Author	Section/Nature of Change
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1. Introduction

The TX VDP Provider Portal – Provider Registration User Guide describes the registration process for pharmacies, prescribers, clinical and non-clinical staff. Functions of this process include accessing the public-facing web portal, detailed registration steps, email confirmation, and signing into a created secure portal account.

Registration enables access to a secure portal for member eligibility inquiries, remittance advices, and more.

Only one Trading Partner account should register, even if multiple billing/pay-to provider records enroll. The first person to register will assume the role of the trading partner administrator for the trading partner account.

2. Information You Will Need

For providers, have the following information prior to registering in the TX VDP Provider Portal:

- Name, business address, business telephone, and email address for the person who is completing the trading partner registration.
- Tax ID, either Federal Employer Identification Number (FEIN) or Social Security number (SSN).
- National Provider Identifier (NPI) .
- The personal identification number (PIN) associated with an existing, approved, credentialed TX VDP provider's account. The PIN is a unique identifier used to access secure information online. Providers were mailed a letter with their PIN and access instructions for the secure Web Portal or received their PIN in their welcome letter. You may obtain your PIN by calling the Texas Medicaid Pharmacy and Technical Call Center at 800-435-4165.

3. System Requirements

To successfully use all features of the TX VDP Provider Portal, ensure that your computer system meets the following minimum requirements:

- Reliable online connection
- One of the following Web browsers:
 - Windows 10 EDGE browser
 - Chrome 51, 52, 53, and 54
 - Safari 9 and 10

Adobe Reader and Microsoft Excel are optional and are required only for user-downloaded PDFs or spreadsheets.

4. Accessing the Public TX VDP Provider Portal

To begin the registration process, access the Public TX VDP Provider Portal by following these steps:

1. Open a new internet browser window.
2. Enter <https://provider.txvdportal.com> into the browser address area and click the **Enter** key to proceed. Refer to Figure 4.1.



Figure 4.1 – Portal Browser Address

3. The Public Pharmacy Service Web Portal home page displays. Refer to Figure 4.2.

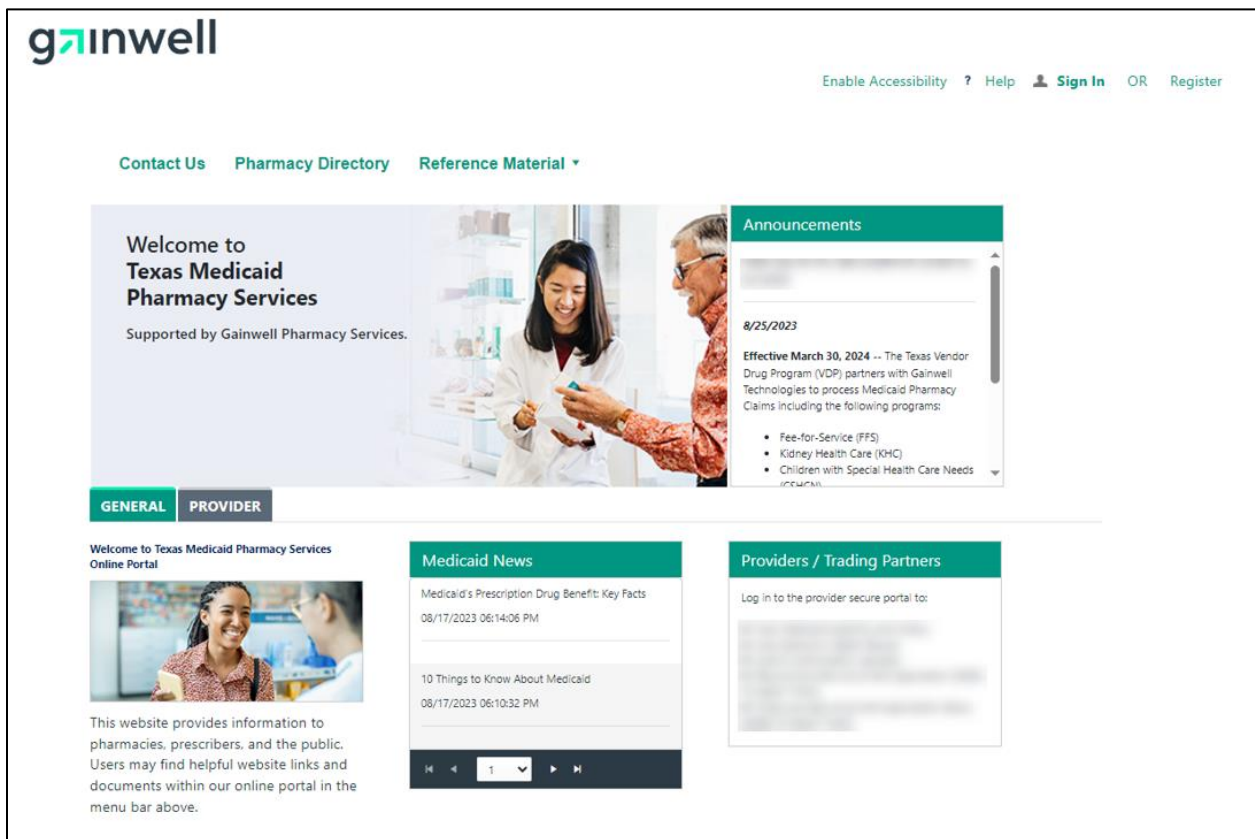


Figure 4.2 – Public VDP Provider Portal Home Page

5. Registering a TX VDP Provider Trading Partner Account

Registration enables prescribers, pharmacies, clinical and non-clinical staff access to the TX VDP Provider Portal functionalities available for their role.

To begin the registration process, follow these steps:

1. In the Public Web Portal banner, click the **Register** hyperlink. Refer to Figure 5.1.

Note: You can adjust the window display size options by adjusting the zoom configuration located in the web browser settings. For additional information, refer to the Help hyperlink located in the web browser settings.

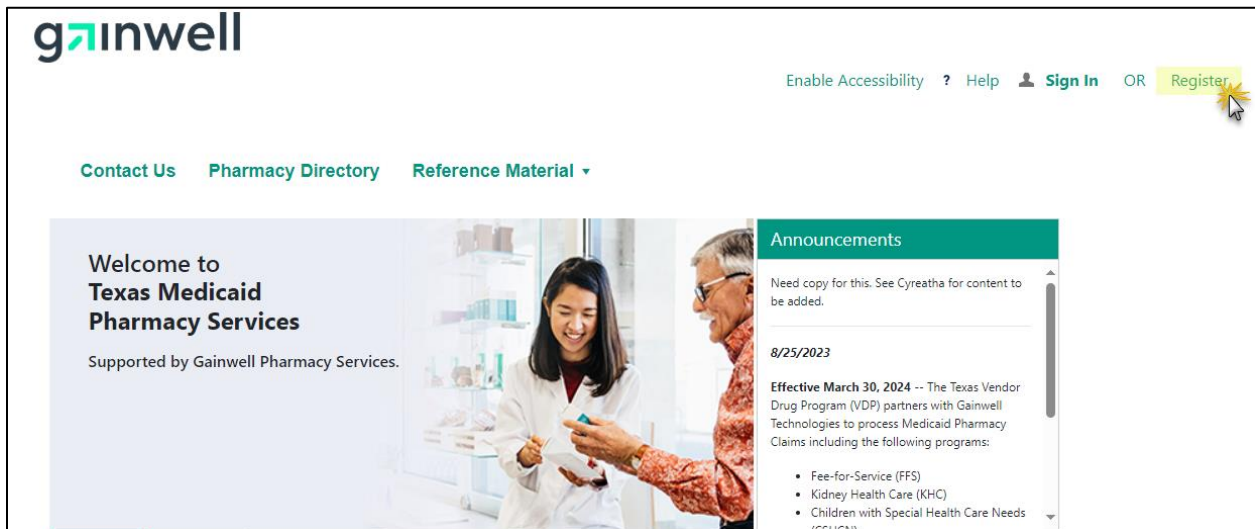


Figure 5.1 – Register Link

2. The **Registration** window displays. Refer to Figure 5.2.

Note: The fields required for an enrolled provider registration display as a default. These fields will change when you select a different option in the Register As drop-down list.

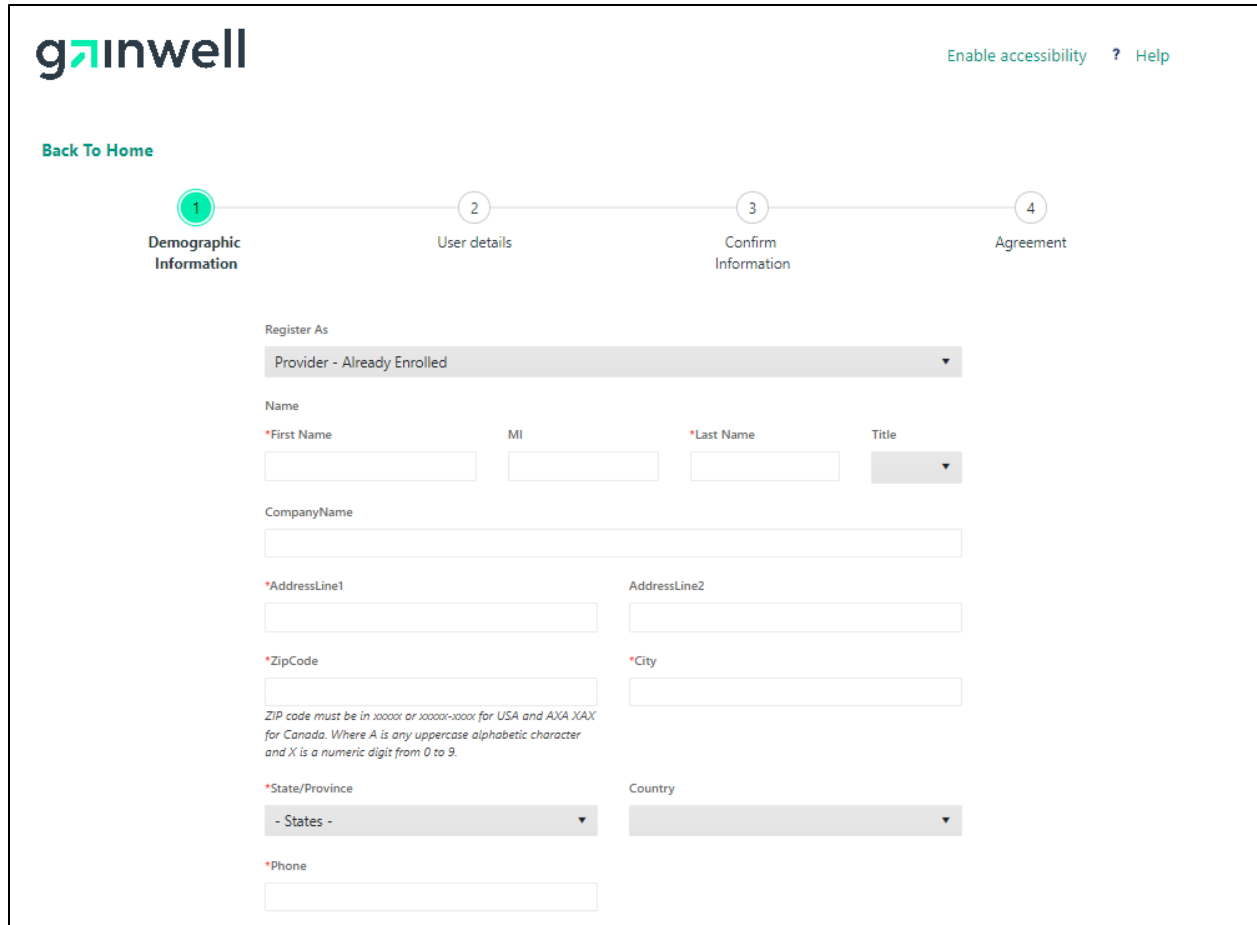


Figure 5.2 – Registration Window

5.1 Step 1 – Demographic Information

To complete Step 1 – Demographic Information for a provider, follow these steps:

1. In the **Register As** drop-down list, select **Provider – Already Enrolled**.
2. In the **First Name** field, enter your first name.
3. In the **Last Name** field, enter your last name.
4. In the **Company Name** field, enter your company name if applicable.

Note: If registering as a Billing Agent, the Company Name is required.

Note: If you are enrolled as a Type 2 - Organization, you must supply the name of the organization you are enrolling in as it appears on your W-9 on the line labeled: Name (as shown on your income tax return). You can refer to the pre-printed labels from the Internal Revenue Service (IRS) on documents such as income tax returns, payroll deposit coupons, or similar filings to verify the name and tax ID number (TIN) that the IRS has on file for your entity. If the IRS information does not match what you enter here, you must contact them to correct the discrepancy before proceeding.

5. In the **Address Line 1** field, enter the first line of your business address.
6. If applicable, in the **Address Line 2** field, enter the second line of your business address.

7. In the **ZIP Code** field, enter the zip code for your business address. Refer to Figure 5.3.

Note: A valid U.S. zip code is required to complete the first step of registration.

Note: All U.S. zip codes will be validated. If the U.S. zip code validation is successful, the City, State/Province, and Country values will auto-populate in the appropriate fields.

Register As
Provider - Already Enrolled

Name

*First Name MI *Last Name Title
John Training2

CompanyName
Example Provider

*AddressLine1 AddressLine2

*City *State/Province
COLUMBUS Ohio

Country *ZipCode
USA 43229

ZIP code must be in xxxxxx or xxxxx-xxxx for USA and AXA XAX for Canada. Where A is any uppercase alphabetic character and X is a numeric digit from 0 to 9.

Figure 5.3 – Enrolled Provider Fields

8. If applicable, in the **City** and **State/Province** fields, enter the appropriate information for your business address.
9. In the **Phone** field, enter your business phone number, including area code.
10. In the **Web Site** field, enter the website address (URL) for your business.
11. In the **FEIN/SSN** field, enter your Federal Employer Identification Number (FEIN) or Social Security number (SSN).
12. Complete the following field:

NPI – Enter your National Provider ID.

In the **PIN** field, enter the Personal Identification Number (PIN) found on the provider welcome letter.

Note: If no PIN has been received via mail, contact the Texas Medicaid Pharmacy and Technical Call Center at 800-435-4165.

13. Click **NEXT** to initiate United States Postal Service (USPS) address validation. Refer to Figure 5.4.

*State/Province

Country

*Phone

WebSite

*FEIN/SSN

Enter the following credentials for any of your provider billing records. If you have more than one billing provider record, you may add the additional provider records to your online account after registration. Enter values for FEIN/SSN; either NPI or Atypical ID; and PIN. For providers, these values are your tax ID, NPI or API, and PIN. For Billing Agents, these values are for a provider for whom you intend to submit transactions.

NPI

Atypical ID

*PIN

NEXT

Figure 5.4 – Enrolled Provider Additional Fields

5.1.1 Verify Address Window

The Verify Address window displays to validate the address entered in Step 1 of the registration process. This window indicates if the USPS was unable to validate the entered address. Refer to Figure 5.5

- If the interface does not recognize the address and the address was entered correctly, click **Accept Address Selection**.
- If the interface does not recognize the address and the address was entered incorrectly, click **CLOSE** to exit the Verify Address window. This returns you to Step 1 to edit the address and resubmit the information.

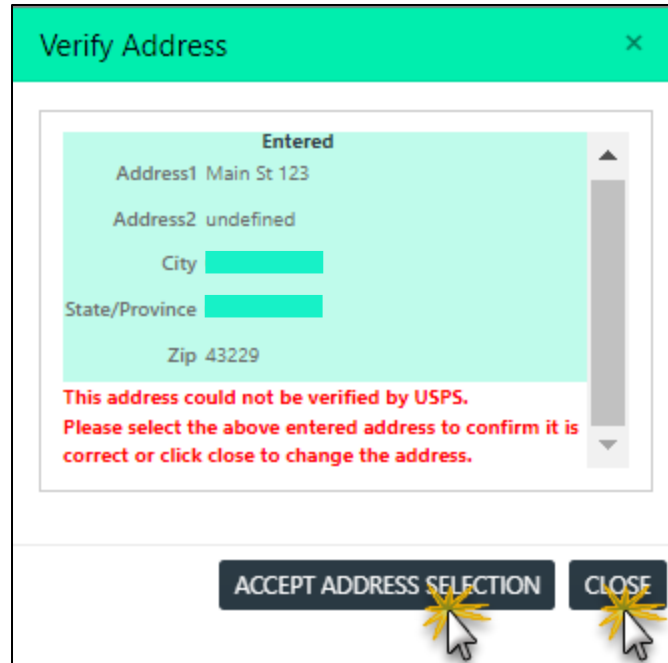


Figure 5.5 – Verify Address Window

5.2 Step 2 – User Details

To complete Step 2 – User Details, follow these steps:

Note: All fields marked with a red asterisk () are required fields.*

1. In the **User Name** field, create a user name for your Secure Portal account.
2. In the **Password** field, create a password for your Secure Portal account.

Note: The password must be at least eight (8) characters long and contain at least one uppercase letter, one lowercase letter, a special character (except “,”), and a number. The password may not contain spaces.

3. In the **Re-enter Password** field, re-enter the created password exactly as it was entered in the previous field.
4. In the **Email Address** field, enter a valid email address.

Note: A confirmation email will be sent to this address, so it is important that the address provided is valid.

5. In the **Re-enter Email Address** field, re-enter the email address exactly as it was entered in the previous field.
6. Click **NEXT** to continue to Step 3. Refer to Figure 5.6.

Note: To return to a previous step, click PREVIOUS.

The screenshot displays a registration form with a progress indicator at the top. The progress bar consists of four numbered circles: 1 (Demographic Information, checked), 2 (User details, active), 3 (Confirm Information), and 4 (Agreement). Below the progress bar, the form fields are as follows:

- * User Name: A single-line text input field.
- * Password: A single-line text input field.
- * Re-enter Password: A single-line text input field.
- * Email: A single-line text input field.
- * Re-enter Email Address: A single-line text input field.

Below the Password field, there is a password requirement note: "Password must contain at least 8 characters consisting of an upper and lower case letter, a special character such as a # or * or ^ (except .) and a number." At the bottom left, it says "Step 2 of 4". At the bottom right, there are two buttons: "PREVIOUS" and "NEXT". The "NEXT" button is highlighted in green and has a mouse cursor pointing to it.

Figure 5.6 – Step 2 Fields

5.3 Step 3 - Confirm Information

For Step 3 - Confirm Information, review the information you entered in Steps 1 and 2 to make sure what you entered is correct. Once all information is verified, click **NEXT** to continue to Step 4 – Agreement. Refer to Figure 5.7.

*Note: Click **PREVIOUS** to return to the previous registration step and correct the account information.*

Step 3 of 4

Demographic Information User details **Confirm Information** Agreement

Name
Example Provider

CompanyName
Example Provider Company

Address
Main St 123 undefined

City
COLUMBUS

State/Province
OH

Zip
43229

Country
USA

Telephone
(777) 777-7777

UserName
Example1

Email Address
test123@test.com

PREVIOUS NEXT

Figure 5.7 – Step 3 Fields

5.4 Step 4 – Agreement

Step 4 of the registration process is to sign the Provider Trading Partner Agreement. The agreement is available to be read and reviewed in this Step.

Note: A scroll bar on the right of the window allows a user to scroll through the entire agreement.

To sign the agreement, follow these steps:

1. If you agree to the terms and conditions of the Trading Partner agreement, select the **Yes, I agree to the above terms and conditions** check box. Refer to Figure 5.8.

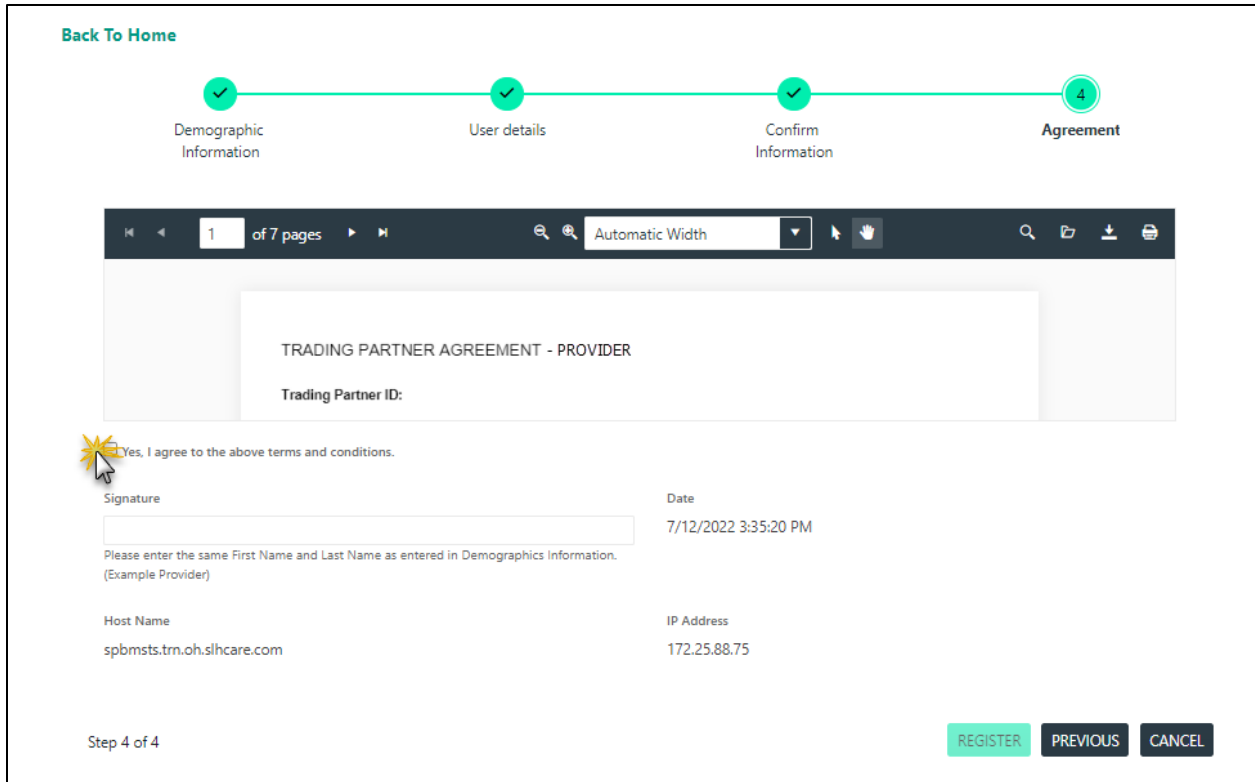


Figure 5.8 – Agree to Terms and Conditions Check Box

2. In the **Signature** field, enter your first and last name as entered in Step 1 of the registration.

Note: If a middle initial or title was entered in Step 1 - Demographic Information, do not enter either in the Signature field.

Note: The Date field pre-populates with the current day's date.

3. To print the trading partner agreement, click the **Printer** icon, located in the top right corner of the trading partner agreement.
4. To complete the registration process, click **REGISTER**. Refer to Figure 5.9.

*Note: To return to Step 3 - Confirm Information, click **PREVIOUS**.*

*Note: To cancel your trading partner registration, click **CANCEL**.*

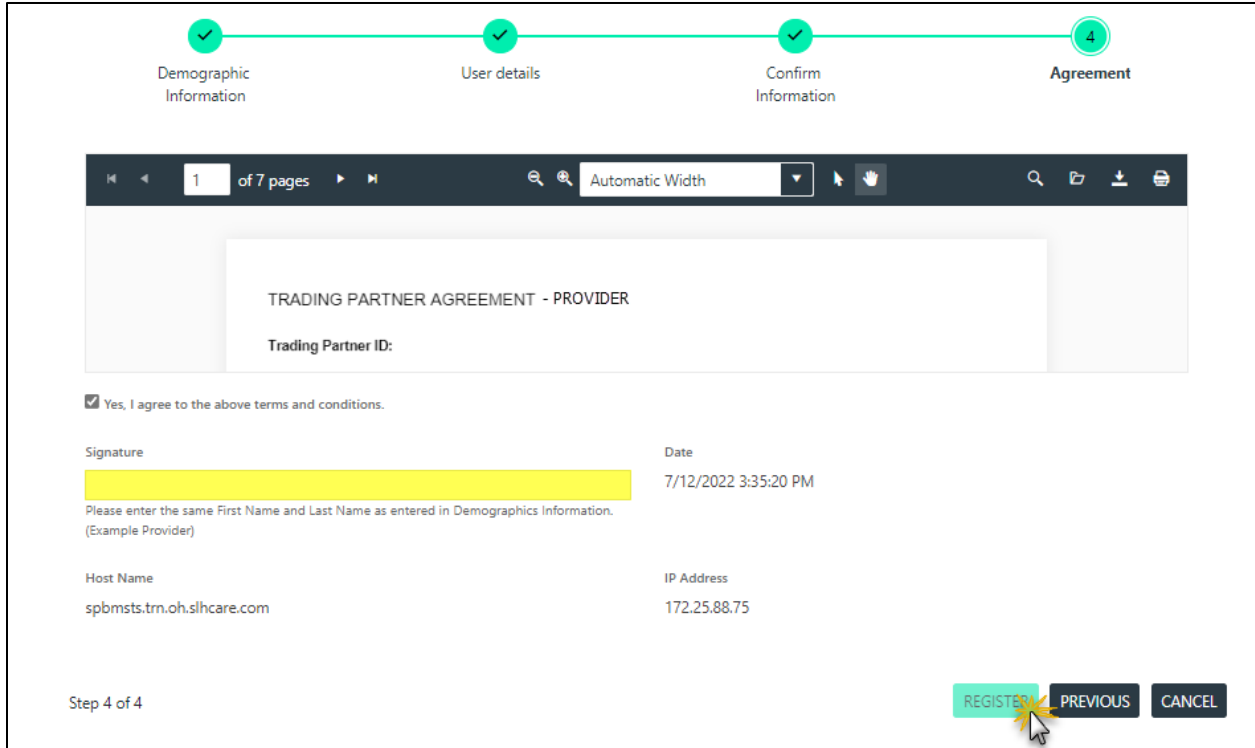


Figure 5.9 – Step 4 Fields and Register Button

5. The **Registration** dialog box displays if the registration is successful and notifies you to check email for the activation email. An email containing your trading partner ID will be sent to the email address provided in Step 2 – User Details of the registration.
6. Click **OK** to continue. You can also click **DOWNLOAD AGREEMENT** to review or save Trading Partner agreement. Refer to Figure 5.10.

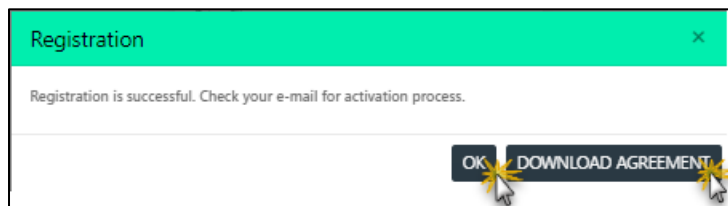


Figure 5.10 – Registration Successful Window

5.5 Confirm Email and Account Activation

An email is sent to the email address entered during registration to confirm your email address and to activate your account.

Note: If you do not see a confirmation email in your Inbox, verify your Spam or Junk Mail folders.

To finish activating your member account, follow these steps:

1. Click the “**click here**” hyperlink in the email with the subject line of **Trading Partner – Confirm Email**. Refer to Figure 5.11.

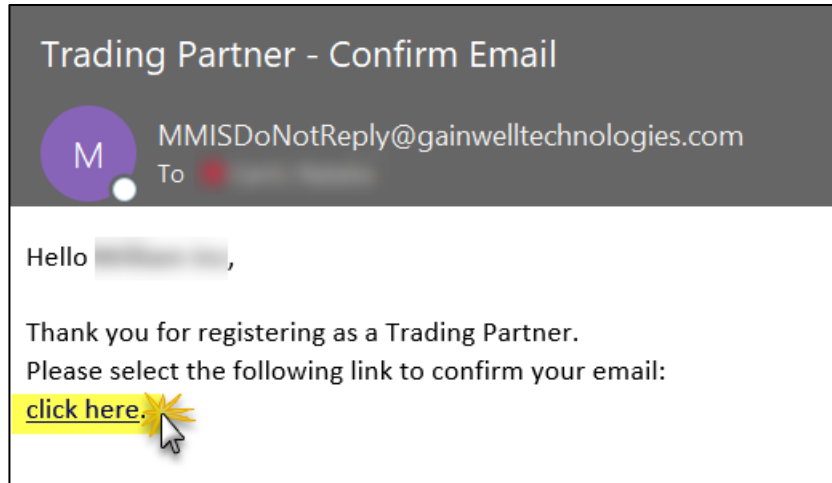


Figure 5.11 – Confirm Email Message

2. This opens the **Confirm Email** window in your web browser, which indicates that you have successfully confirmed your email address. Refer to Figure 5.12.



Figure 5.12 – Confirm Email Window

3. Once you have confirmed your email address, you will receive a second email with the subject line of **Texas VDP Provider Portal Account – Registration Completed**. This email confirms that your account has been created and you can proceed to log into your Secure Portal account. Refer to Figure 5.13.

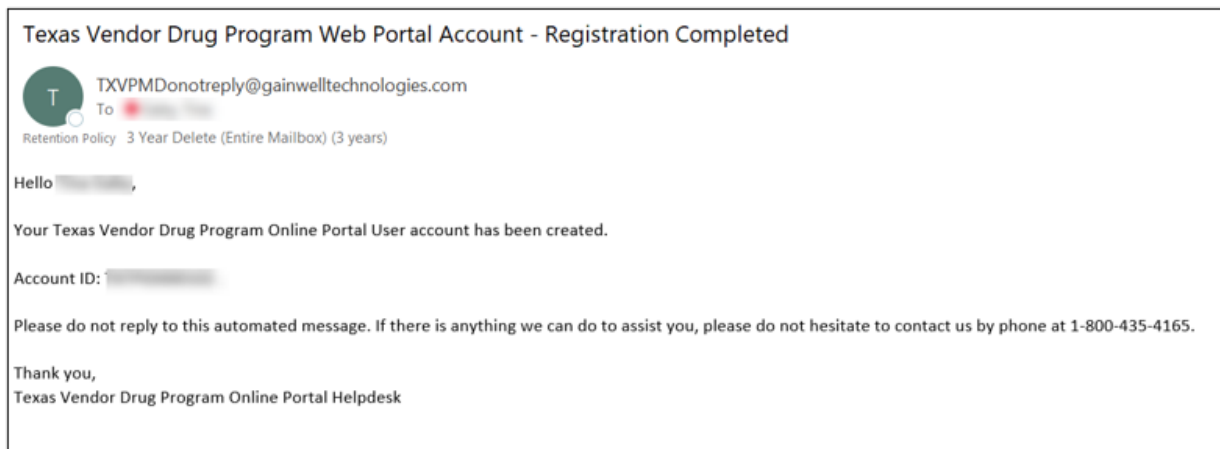


Figure 5.13 – Registration Completed Email Message

6. Sign In for Provider Secure Portal

Once you have confirmed your email address and have received email confirmation that your registration has been completed, you can proceed to log into the Provider Secure Portal to access its features.

To log into the Provider Secure Portal, follow the steps below:

1. In the Public Web Portal banner, click the **Sign In** hyperlink. Refer to Figure 6.1.

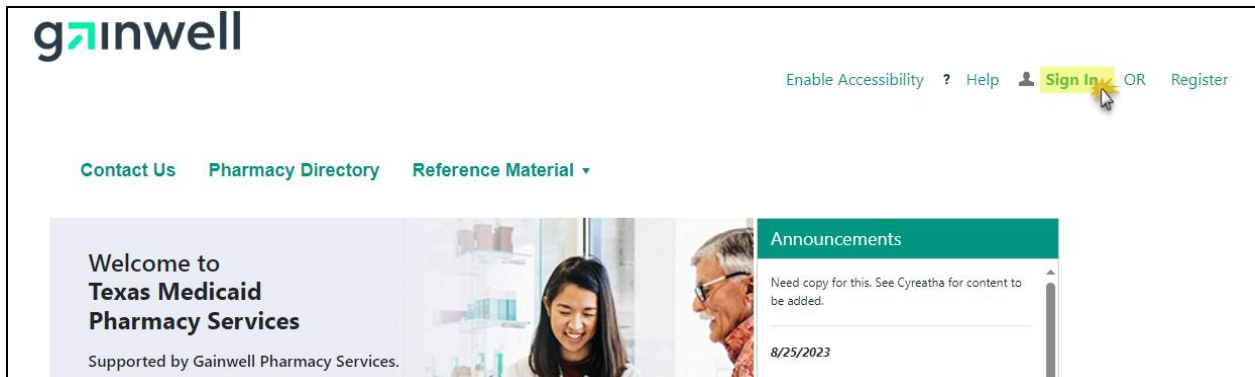


Figure 6.1 – Sign In Hyperlink

2. The **Sign In** window displays.
3. In the **User Name** field, enter your user name.

Note: This is the username you created during registration and that you must use for logging in. If you do not remember the username you created during your registration, click the Retrieve hyperlink below the Username field.

4. In the **Password** field, enter your password.

Note: When signing into your secure account, if the incorrect password is entered three times, you will be locked out of your account indefinitely. To have the account unlocked, contact the Gainwell Texas Medicaid Pharmacy and Technical Call Center at 800-435-4165.

Note: If you do not remember the password you created during your registration, click the Reset hyperlink below the Password field.

5. Review the **Attention HIPAA PHI** disclaimer and select the **I have read and accept the HIPAA PHI privacy policy** check box.
6. Click **LOG IN**. Refer to

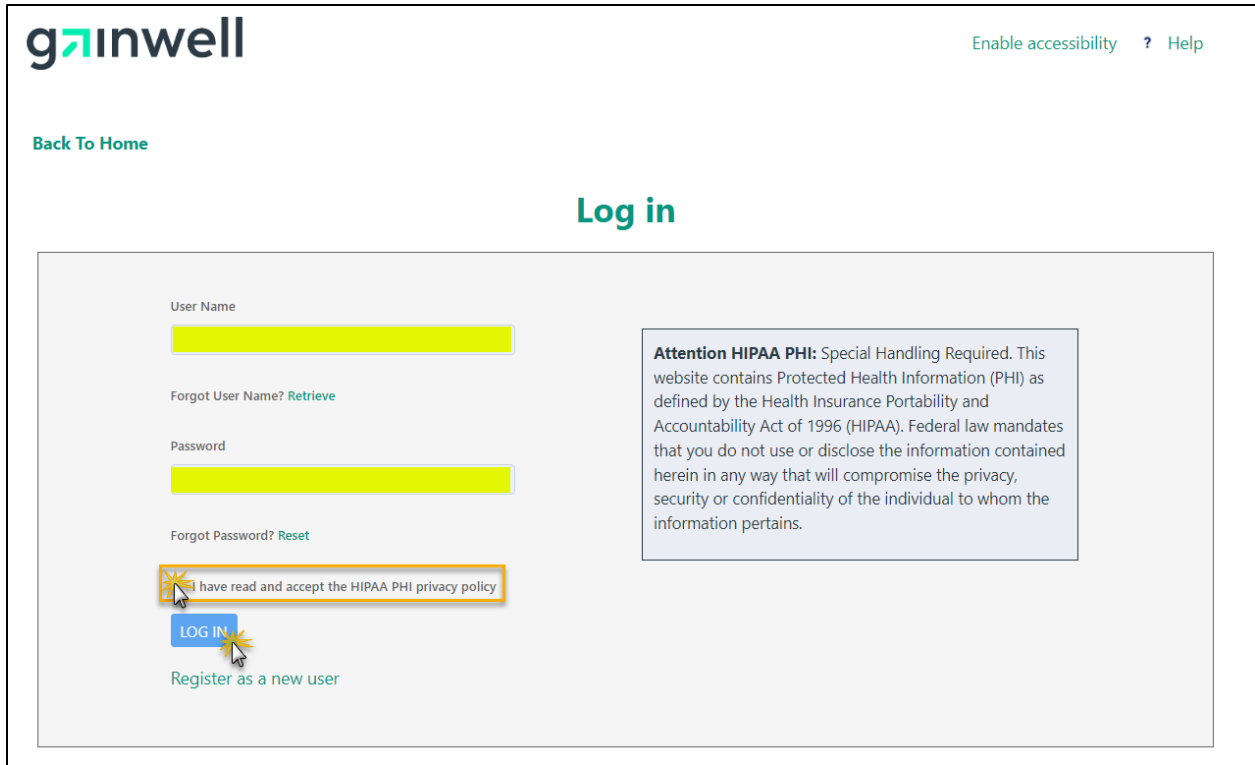


Figure 6.2 – Log In Window

- Once you are signed into the Provider Secure Portal, the **Dashboard** displays. Refer to Figure 6.3.

Note: Functionalities available in the Dashboard will vary based on the type of role you have been assigned and your provider type.

Note: For additional information about the functionalities available in the Provider Secure Portal, refer to the TX VDP Provider Secure Web Portal User Manual.

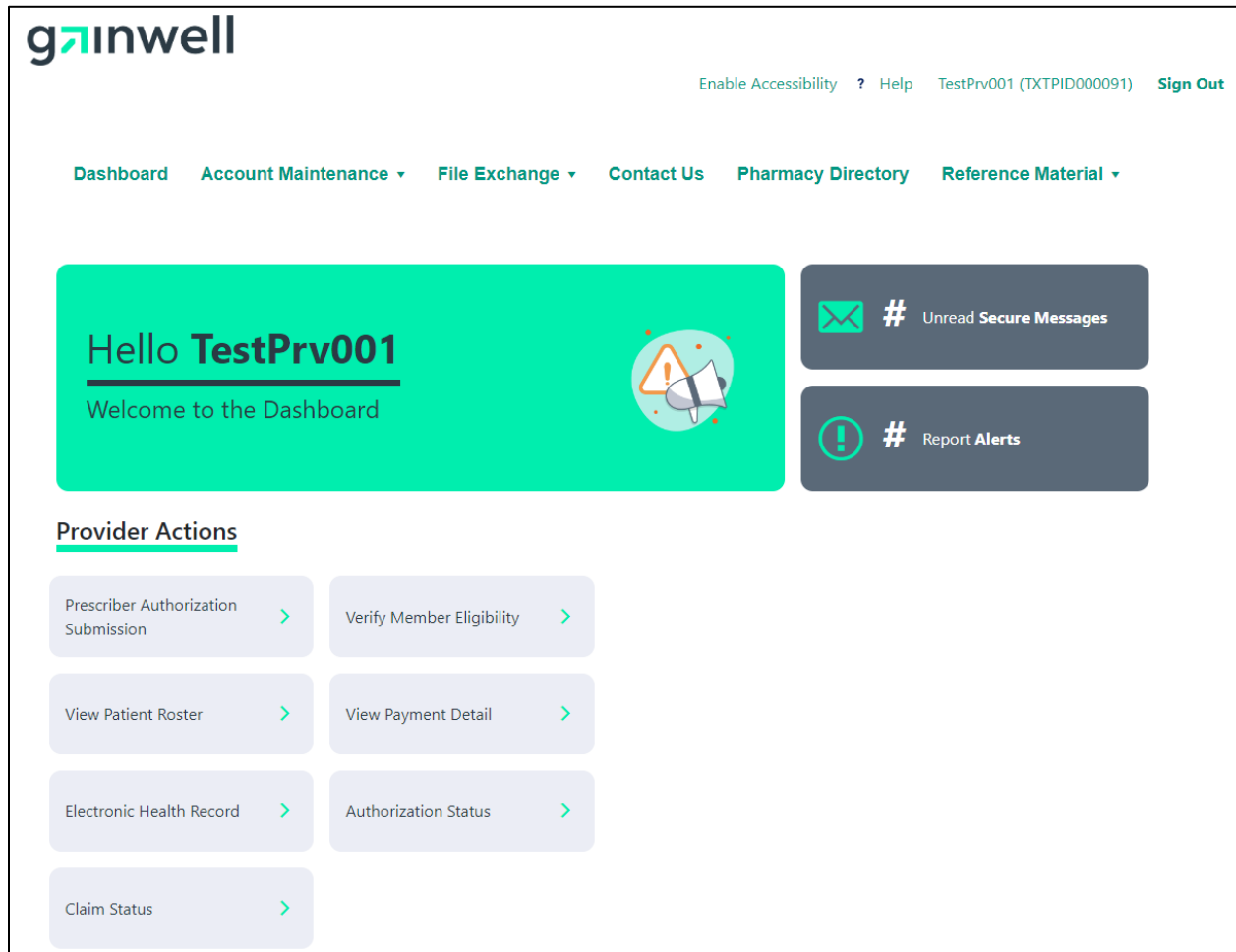


Figure 6.3 – Secure Provider Portal Dashboard

6.1 Pharmacy 835 Selection Process

After the registration process, you must sign-in to the Provider Portal and select to opt-in or opt-out of the 835 transaction file. This selection must be completed immediately after the registration process because you will not be able to generate the 835 transaction after the provider’s profile has been created and is active in the portal.

Note: In order to Generate 835, the provider must electronically sign and submit the Electronic Remittance Advice selection.

To complete the 835 and Electronic Remittance Advice selection process, follow these steps:

1. From the **Account Maintenance** drop-down list select **Trading Partner Account**, and then **Manage Providers**. Refer to Figure 6.4.

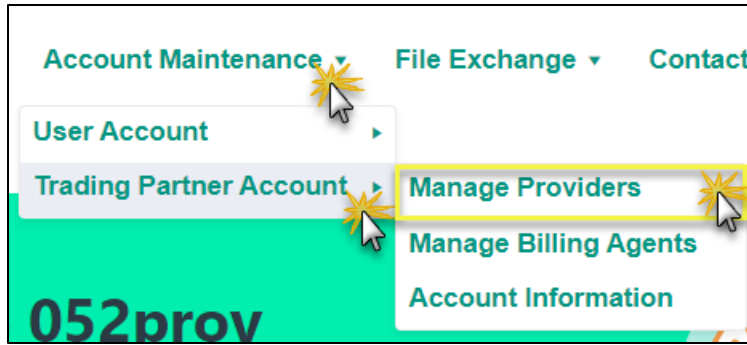


Figure 6.4 – Manage Providers Option

2. The **Manage Providers** window opens. Refer to Figure 6.5.

Note: To remove a provider from the Trading Partner Account, click DELETE next to the desired provider.

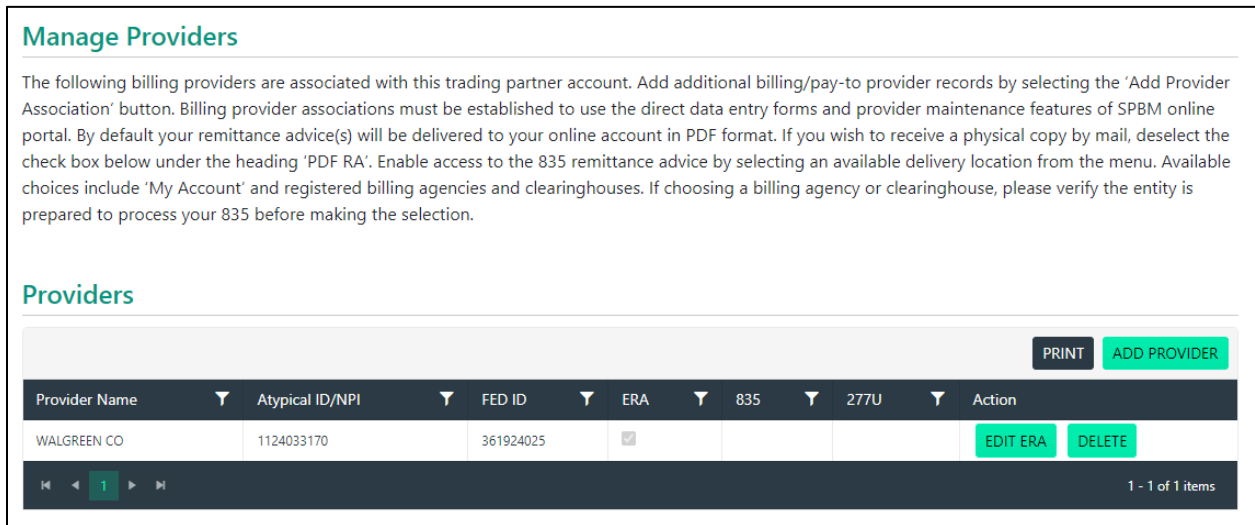


Figure 6.5 – Manage Providers Window

6.1.1.1 Add Provider

To add a new provider to your Trading Partner Account, follow these steps:

1. Click **ADD PROVIDER**. Refer to Figure 6.6.

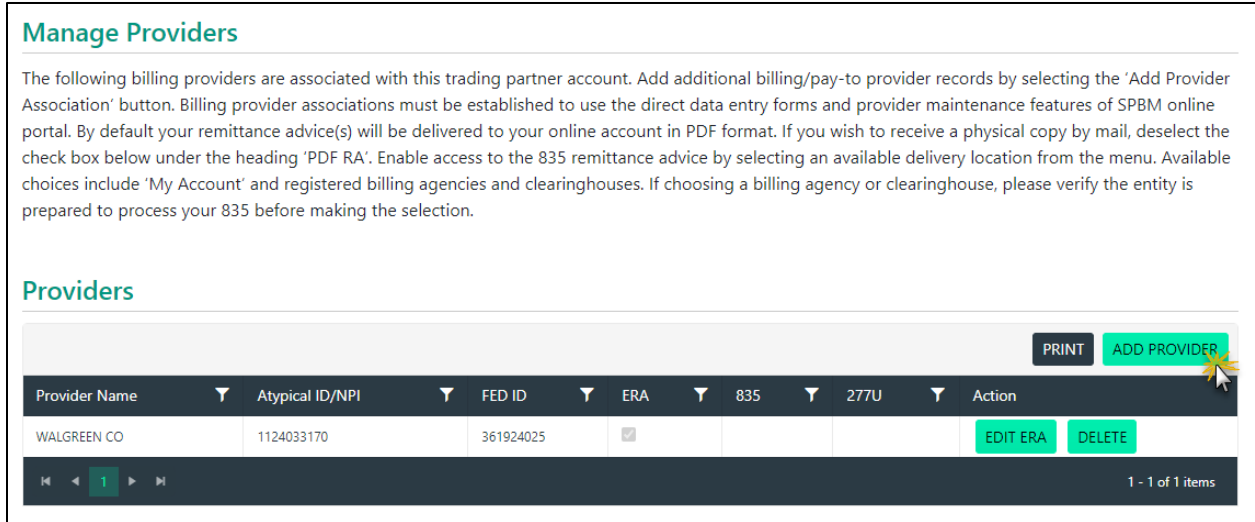


Figure 6.6 – ADD PROVIDER Button

2. The **Add New Provider** window opens.
3. Enter the values for the **Federal Employer Identification Number (FEIN)/Social Security Number (SSN)**, either **National Provider Identifier (NPI)** and **Personal Identification Number (PIN)**. *Note: Texas does not utilize the Atypical ID field.*
4. Click **ADD PROVIDER**. Refer to Figure 6.7.

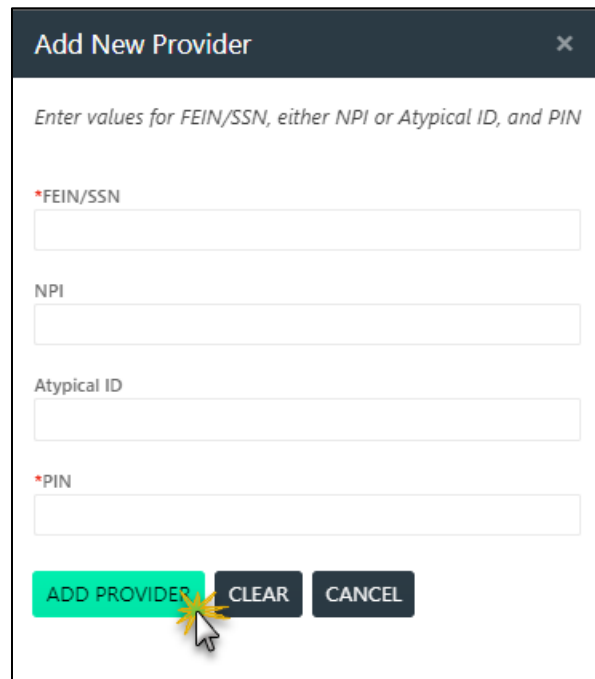


Figure 6.7 – Add New Provider Window

5. The newly added provider will now appear in the **Manage Providers** window.

6.1.1.2 Edit ERA (Electronic Remittance Advice)

By default, remittance advice(s) are delivered to the online account in PDF. To make changes to this delivery method, follow these steps:

1. Click **EDIT ERA** next to the desired provider record. Refer to Figure 6.8.

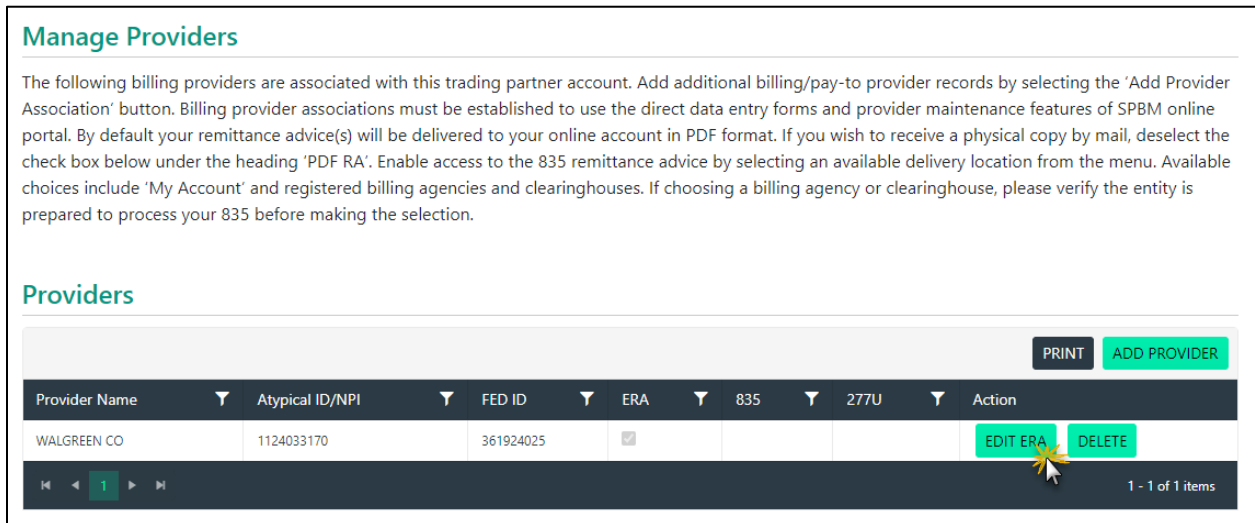


Figure 6.8 – EDIT ERA Button

2. Electronic Remittance Advice (ERA) Authorization Agreement window displays the following sections:

- Provider Information
- Provider Identifiers
- Electronic Remittance Advice Information
- Submission Information

Refer to Figure 6.9.

PROVIDER INFORMATION

Provider Name: VEJLANI, MUSTANSIR
 Doing Business as Name (DBA):
 Street: 721 JAMES ST
 City: TOMBALL
 State/Province: TX
 Zip Code /Postal Code: 77375
 Country Code: US

PROVIDER IDENTIFIERS

Provider Federal Tax Identification Number (TIN) or Employee Identification Number (EIN): 010697777
 National Provider Identifier (NPI): 1194793851
 Other Identifier(s):
 Assigning Authority:

ELECTRONIC REMITTANCE ADVICE INFORMATION

*Preference for Aggregation of Remittance Data: National Provider Identifier (NPI)
e.g. Account Number Linkage for Provider Identifier
 NPI: 1194793851
 No 835 Generate 835
 *Please pick agents: My Web Portal Account

SUBMISSION INFORMATION

*Reason for Submission:
 Authorized Signature: NScott Momaday
 *Electronic Signature of Person Submitting Enrollment:
 *Requested ERA Effective Date:

Figure 6.9 – Authorization Agreement Window

3. The first section within the ERA window is **Provider Information**. This section displays demographic details for the provider, such as the provider name, address, street, city, state, zip code, and country code. Refer to Figure 6.10.

Figure 6.10 - Provider Information Window

4. The next section within the ERA window is **Provider Identifiers**. This section displays the provider tax identification number (TIN) or employee identification number (EIN) and the provider’s NPI. Refer to Figure 6.11. **Error! Reference source not found.**

Figure 6.11 - Providers Identifiers

5. The third section within the ERA window is **Electronic Remittance Advice Information**. This section displays the Preference for Aggregation of Remittance Data drop-down list and the method of retrieval. The Preference for Aggregation of Remittance Data drop-down list allows you to select whether the remittance advice is grouped by National Provider Identifier (NPI) or Provider Tax Identification Number (TIN). 835s will default but the user can select “No 835” if applicable. Refer to Figure 6.12.

Note: All fields marked with a red asterisk () are required fields.*

Figure 6.12 - Electronic Remittance Advice Information

6. Once a selection is made, the provider identifier appears. Refer to Figure 6.13. **Error! Reference source not found.**

The screenshot shows the 'ELECTRONIC REMITTANCE ADVICE INFORMATION' section. A dropdown menu for '*Preference for Aggregation of Remittance Data' is set to 'National Provider Identifier (NPI)'. Below it, the 'NPI' field is highlighted in yellow. There are two radio buttons: 'No 835' (unselected) and 'Generate 835' (selected). At the bottom, a dropdown for '*Please pick agents' is set to 'My Web Portal Account'.

Figure 6.13 - Populated Provider Identifier

7. Next within the Electronic Remittance Advice Information section, is the method of retrieval. The method of retrieval consists of the following:

a. Download PDF

Note: The Electronic Remittance Advice is only sent to the provider's trading partner account and cannot be redirected to a billing agent– all Remits will be in the form of the ERA PDF.

b. Generate 835 –The Generate 835 radio button defaults to “YES”. Refer to Figure 6.14

The screenshot shows the 'ELECTRONIC REMITTANCE ADVICE INFORMATION' section. The '*Preference for Aggregation of Remittance Data' dropdown is set to 'National Provider Identifier (NPI)'. The 'NPI' field is empty. Under 'Method of Retrieval (Optional)', the 'Download Pdf' checkbox is unchecked. The 'Generate 835' radio button is selected, and a mouse cursor is hovering over it. The '*Please pick agents' dropdown is empty with a red error message 'Please select' below it.

Figure 6.14 - Generate 835 Option

8. **No 835** – If you do not wish to receive the 835 X12 transaction to your trading partner account or clearinghouse, select the **No 835** radio button as the method of retrieval. Refer to Figure 6.15.

The screenshot shows the 'ELECTRONIC REMITTANCE ADVICE INFORMATION' section. The '*Preference for Aggregation of Remittance Data' dropdown is set to 'National Provider Identifier (NPI)'. The 'NPI' field is empty. Under 'Method of Retrieval (Optional)', the 'Download Pdf' checkbox is unchecked. The 'No 835' radio button is selected, and a mouse cursor is hovering over it. The '*Please pick agents' dropdown is empty with a red error message 'Please select' below it.

Figure 6.15 - No 835 Option

9. The final section within the ERA window is **Submission Information**.
10. The **Reason for Submission** drop-down list automatically defaults to **New Enrollment**. This drop-down list changes only if the ERA agreement is modified. No actions are to be performed in this field.
10. In the **Electronic Signature of Person Submitting Enrollment** field, enter the electronic signature of the individual authorizing the ERA agreement.
Note: To Generate 835, the provider must electronically sign and submit the Electronic Remittance Advice selection.
11. In the **Requested ERA Effective Date** field, enter the effective date for the ERA or use the **Calendar** icon.
11. Click **SUBMIT** to update the pay-to provider. Refer to Figure 6.16

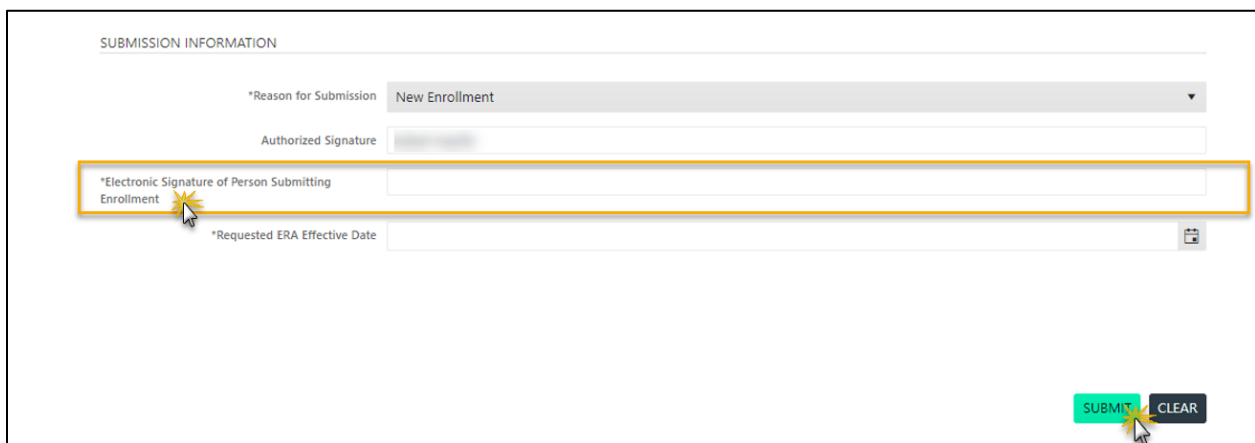


Figure 6.16 - Submit button

6.2 Sign Out of Provider Secure Portal Account

To sign out of your secure portal account, click the **Sign Out** hyperlink in the upper right-hand corner of the window. Refer to Figure 6.17

Note: When signing out of your trading partner account, do not click the X in the upper right-hand corner of the browser window. This closes the window but leaves your account signed in and it will remain signed in. If your account is locked, you can either wait 20 minutes or contact the Gainwell Texas Medicaid Pharmacy and Technical Call Center at 800-435-4165 to request the account be signed out.

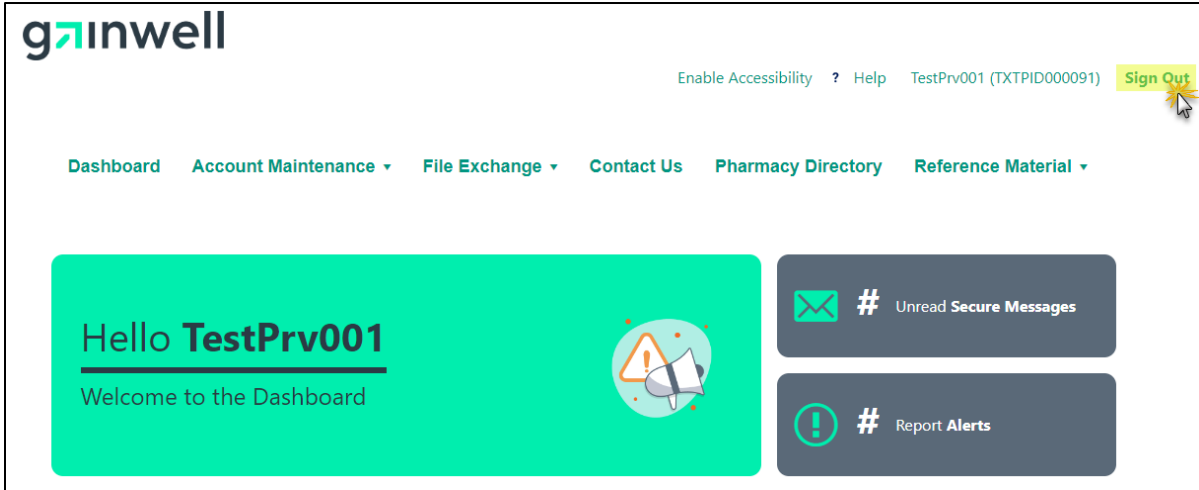


Figure 6.17 - Sign Out