

User Guide

for

Provider Demographic update Online Tool (PDOT)

PDOT allows Provider Primary and Secondary Administrators to:

- Add currently credentialed practitioners to locations.
- Terminate practitioners from locations.
- Update location demographics for:
 - Billing address
 - Location address
 - Directory address
 - Check name
 - Location name
 - Federal tax identification number (TIN)
- Add locations
- Terminate locations
- Add Personal Care Assistants (PCA) to agencies
- Terminate Personal Care Assistants (PCA) from agencies

If you are not registered on Medica's Provider Portal website, [Medica.com](https://www.medicacom.com) - Providers may request access to the secure provider portal by calling the Provider Service Center at 1-800-458-5512.

Please contact Medica Contract Management to submit the proper documents to ensure claims payment accuracy for the following changes:

- Total Contract Terminations
- Care System or Care Grouping Changes
- Merger Acquisition Activities

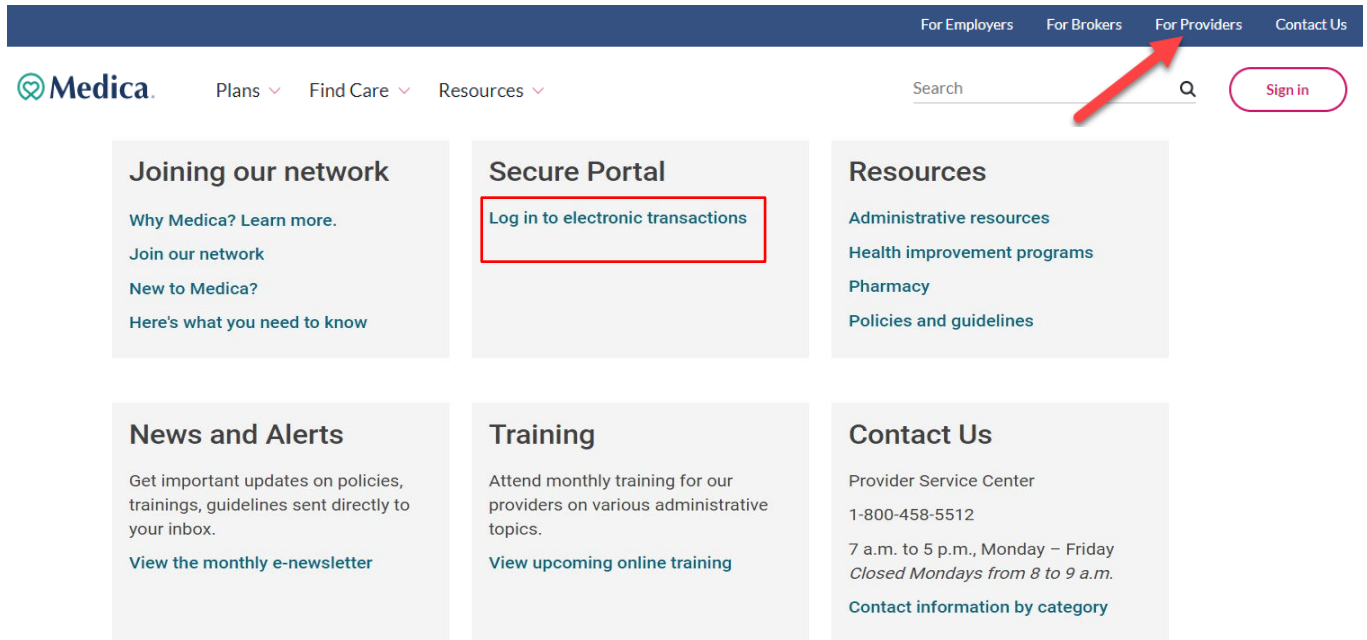
If you have questions, please contact Medica Provider Service Center at 1-800-458-5512.

In January 2024, Medica will begin moving secure online transactions to Availity Essentials. To learn more or to register with Availity, visit [Medica Essentials by Availity](https://www.availity.com).

| Table of Content | Page(s) |
|---|---------|
| Logging into PDOT | 3-5 |
| Add currently credentialed practitioner to a location | 6-9 |
| Terminate a Practitioner | 10-13 |
| Change Location Demographics | 14-17 |
| Add a Location | 18-20 |
| Terminate a Location | 21-23 |
| Change a Federal Tax Identification Number | 24-26 |
| Add, Term Personal Care Assistants (PCA) | 27-30 |
| Frequently Asked Questions | 31-33 |

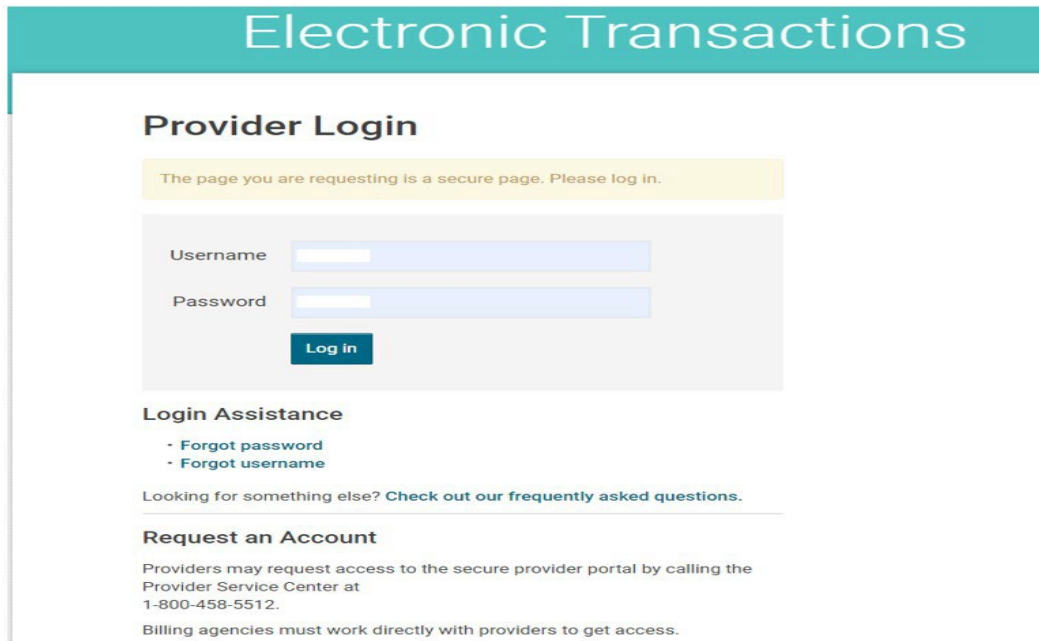
Logging into the PDOT

1. **Click** “For Providers” at the top of the screen.



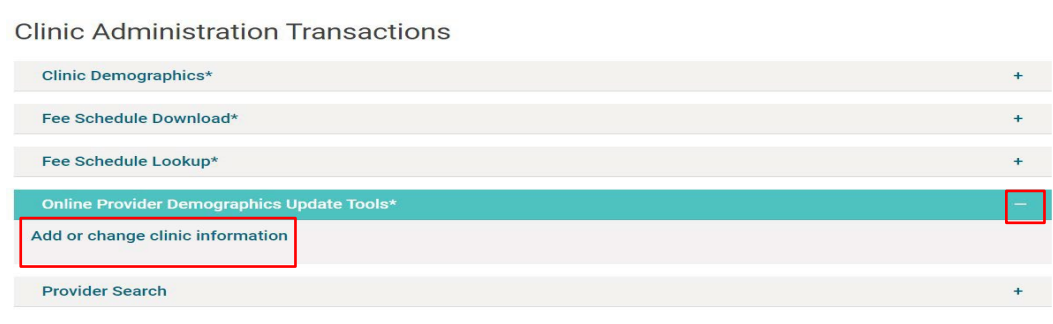
2. Scroll to the **Secure Portal Box** and **click** “Log in to electronic transactions.”

- Enter personalized **Username** and **Password** on the Provider Login Screen.



- Scroll to the Clinic Administration Transactions section. Click the + next to “**Online Provider Demographics Update Tools***.”
- Click the “**Add or change clinic information**” link.

Note: This tool is only available to Primary and Secondary Administrators.



- View the location demographics on the Location List screen.

Location List

This transaction is available only for providers contracted directly with Medica.

NOTE: If you are changing your Tax Id number, Check name or Billing name, Medica requires a W-9 submission.

| Location Name | Physical Address | Specialty | Fed Tax Id | | | | |
|---------------|---|----------------------------|------------|------------------------------------|------------------------------|-------------------------------|--|
| | 8675 Valley Creek Rd, Saint Paul, MN, 55125-2337 | CHIROPRACTIC CARE | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
| | 800 E 28TH ST, MINNEAPOLIS, MN, 55407-3723 | HOSPITAL-BEHAVIORAL HEALTH | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
| | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1318 | FAMILY PRACTICE | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
| | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1355 | INTERNAL MEDICINE | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |

Add currently credentialed practitioner to a location.

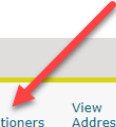
1. Click the “**View Practitioners**” link on Location List screen.

Location List

This transaction is available only for providers contracted directly with Medica.

NOTE: If you are changing your Tax Id number, Check name or Billing name, Medica requires a W-9 submission.

Search
Clear

| Location Name | Physical Address | Specialty | Fed Tax Id | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
|---------------|---|-------------------|------------|--|--------------|---------------|--------------------------------|
| | 8675 Valley Creek Rd, Saint Paul, MN, 55125-2337 | CHIROPRACTIC CARE | |  | | | |

2. Click the “**Add Practitioner**” button on the Practitioner List screen.

Practitioner List

Location Name: Womens Health Consultants
 Federal Tax ID: 36-3261413

Search
Clear
Export

| A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | U | V | W | X | Y | Z | All |
|-----------|------------|----|-------|---------------------------|-----|------|-----------|------------|-----------|-------|------------------------|------|---|---|---|---|---|---|---|---|---|---|---|---|---|-----|
| Last Name | First Name | MI | Title | Specialty | NPI | UMPI | Roster Id | Eff Date | Term Date | Suppr | Accepting New Patients | | | | | | | | | | | | | | | |
| | | | WHNP | Obstetrics And Gynecology | | | | 12/12/2022 | | Yes | Yes | Term | | | | | | | | | | | | | | |
| | | | WHNP | Obstetrics And Gynecology | | | | 03/16/2015 | | No | Yes | Term | | | | | | | | | | | | | | |
| | | | WHNP | Obstetrics And Gynecology | | | | 09/01/2018 | | No | Yes | Term | | | | | | | | | | | | | | |
| | | | MD | Obstetrics And Gynecology | | | | 09/01/2018 | | No | Yes | Term | | | | | | | | | | | | | | |
| | | | MD | Obstetrics And Gynecology | | | | 10/08/2014 | | No | Yes | Term | | | | | | | | | | | | | | |

⏪ ⏩ Page 2 of 2 ⏪ ⏩

Total number of records: 30

Add Practitioner

Add currently credentialed practitioner to a location (cont'd)

3. Enter information on the Practitioner Search screen and click “**Search**” button.

Practitioner Search

If a Practitioner isn't returned in the search and should be please contact Medica's Provider Service Center at 1-800-458-5512.

Location Name:

Federal Tax ID:

First Name:

Last Name:

NPI:

Specialty:

Gender:

Search
Reset

Search Results

| Last Name | First Name | Suffix | Title | Specialty | NPI | UMPI |
|-----------------|------------|--------|-------|--------------------|-----|---------------------|
| Edwards | | | FNP | Family Practice | | Add |
| Edwards | | | OD | Optometry | | Add |
| Edwards | | | MD | Cardiology | | Add |
| Edwards | | | MD | Cardiology | | Add |
| Edwards-Bennett | | | MD | Podiatry | | Add |
| Edwards-Bennett | | | MD | Radiation Oncology | | Add |
| Edwards-Jackson | | | MD | Pediatrics | | Add |
| Edwardson | | | ANP | Internal Medicine | | Add |

Page 5 of 5

Note: If a Practitioner is not returned in the search and should be, please contact Medica's Provider Service Center at 1-800-458-5512.

4. Click “**Add**” link on the Search Results.

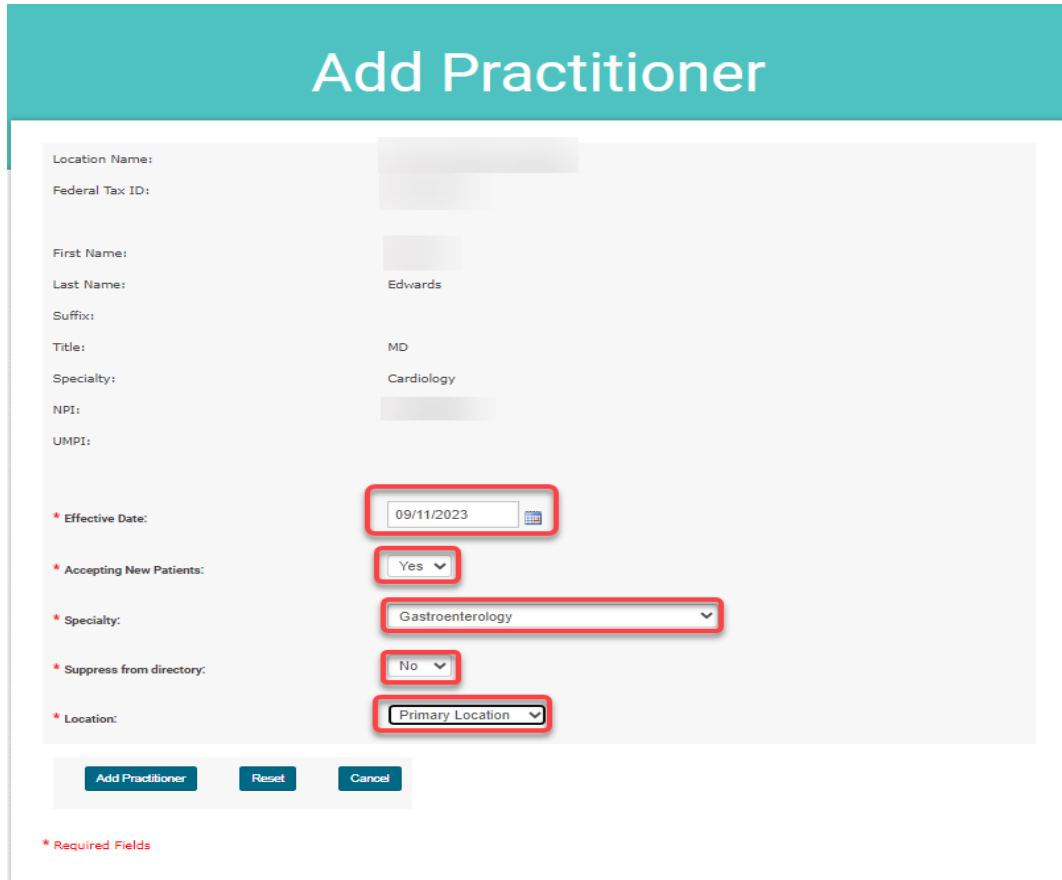
Search Results

| Last Name | First Name | Suffix | Title | Specialty | NPI | UMPI |
|-----------------|------------|--------|-------|--------------------|-----|---------------------|
| Edwards | | | FNP | Family Practice | | Add |
| Edwards | | | OD | Optometry | | Add |
| Edwards | | | MD | Cardiology | | Add |
| Edwards | | | MD | Cardiology | | Add |
| Edwards-Bennett | | | MD | Podiatry | | Add |
| Edwards-Bennett | | | MD | Radiation Oncology | | Add |
| Edwards-Jackson | | | MD | Pediatrics | | Add |
| Edwardson | | | ANP | Internal Medicine | | Add |

Page 5 of 5

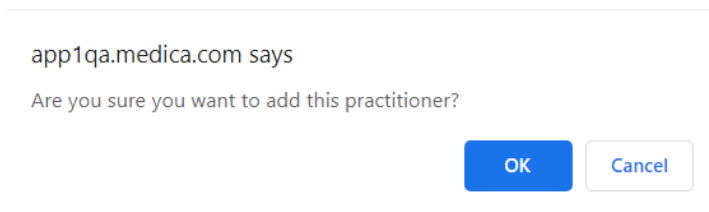
Add currently credentialed practitioner to a location (cont'd)

5. Enter information in the required fields on the Add Practitioner screen.



Missing information in required fields will prevent submission.

6. Confirm addition of the practitioner.



Add currently credentialed practitioner to a location (cont'd)

7. Review the Add Practitioner Confirmation screen.

Add Practitioner Confirmation

You have added the following practitioner:

| | |
|-----------------------------|-----------------------------------|
| First Name: | Bryan |
| Last Name: | Remer |
| Middle: | |
| Suffix: | |
| Title: | MD |
| Specialty: | General Practice |
| NPI: | 0987654321 |
| UMPI: | |
| Effective Date: | 04052017 |
| Accepting New Patients: | Yes |
| Termination Date: | |
| Termination Reason: | |
| Suppression from Directory: | No |
| Added to site: | |
| Clinic Name: | Ben's Clinic |
| Address: | 123 Oak, His Town, MN 123456-6789 |
| Federal Tax ID: | 12-3456789 |

You will receive a confirmation email shortly. Thank you.

Terminate Practitioner from Location(s)

1. Click **“View Practitioners”** link on Location List screen.

Location List

This transaction is available only for providers contracted directly with Medica.

NOTE: If you are changing your Tax Id number, Check name or Billing name, Medica requires a W-9 submission.

Search
Clear

| Location Name | Physical Address | Specialty | Fed Tax Id | | | | |
|---------------|--|----------------------------|------------|--|--------------|---------------|--------------------------------|
| | 8675 Valley Creek Rd, Saint Paul, MN, 55125-2337 | CHIROPRACTIC CARE | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
| | 800 E 28TH ST, MINNEAPOLIS, MN, 55407-3723 | HOSPITAL-BEHAVIORAL HEALTH | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
| | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1318 | FAMILY PRACTICE | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
| | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1355 | INTERNAL MEDICINE | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |

2. Click **“Term”** link on the Practitioner List screen.

Practitioner List

Location Name: Abbott Northwestern Specialty Clinic

Federal Tax ID: 36-3261413

Search
Clear

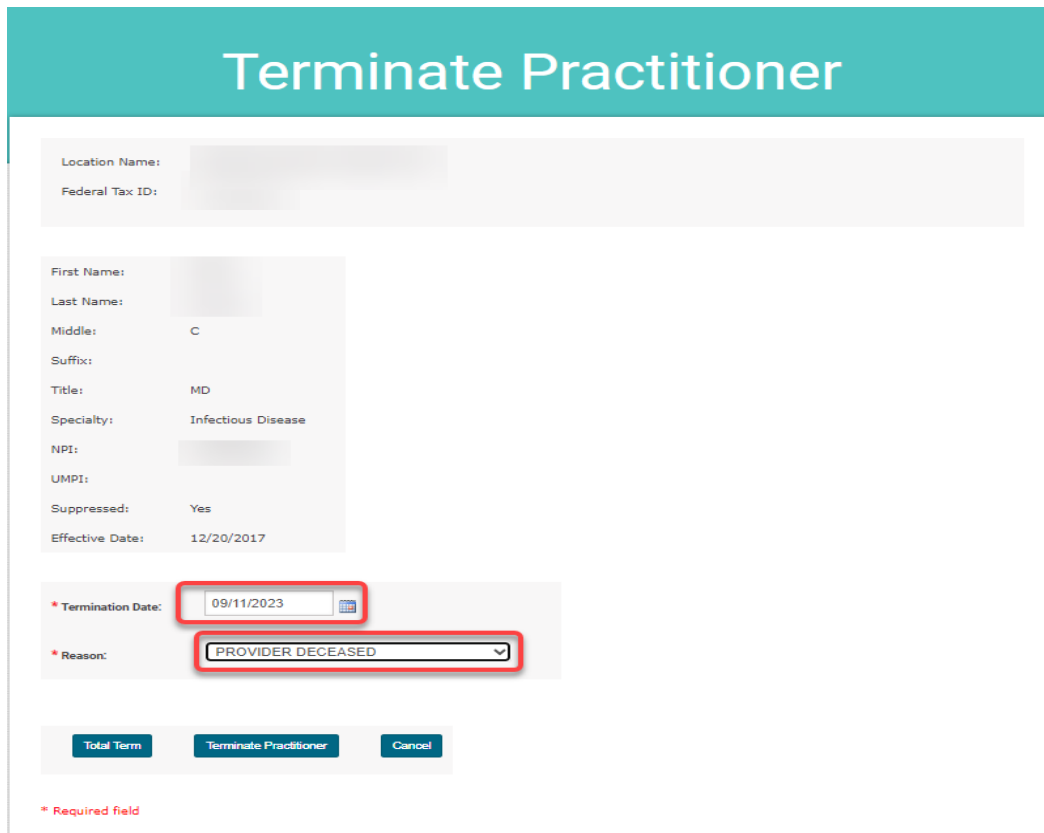
Export

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z All

| Last Name | First Name | MI | Title | Specialty | NPI | UMPI | Roster Id | Eff Date | Term Date | Suppr | Accepting New Patients | |
|-----------|------------|----|-------|--------------------|-----|------|-----------|------------|-----------|-------|------------------------|--|
| | | C | MD | Infectious Disease | | | | 12/20/2017 | | Yes | Yes | Term |
| | | C | MD | Infectious Disease | | | | 09/01/2018 | | Yes | Yes | Term |
| | | B | FN | Family Practice | | | | 03/01/2022 | | Yes | Yes | Term |
| | | A | MD | Internal Medicine | | | | 08/07/2019 | | Yes | Yes | Term |

Terminate Practitioner from Location(s) (cont'd)

3. Enter information in required fields on **Terminate Practitioner** screen and click “**Total Term**” button (remove practitioner from all locations under Federal Tax ID) or click “**Terminate Practitioner**” button (remove practitioner only from this location).



The screenshot shows the 'Terminate Practitioner' screen. At the top is a teal header with the title 'Terminate Practitioner'. Below the header, there are two input fields for 'Location Name' and 'Federal Tax ID'. A section for practitioner details includes fields for 'First Name', 'Last Name', 'Middle' (with value 'C'), 'Suffix', 'Title' (with value 'MD'), 'Specialty' (with value 'Infectious Disease'), 'NPI', 'UMPI', 'Suppressed' (with value 'Yes'), and 'Effective Date' (with value '12/20/2017'). Below this, the 'Termination Date' is set to '09/11/2023' and the 'Reason' is set to 'PROVIDER DECEASED'. Both the date and reason fields are highlighted with red boxes. At the bottom, there are three buttons: 'Total Term', 'Terminate Practitioner', and 'Cancel'. A red asterisk and the text '* Required field' are located at the bottom left of the form area.

Missing information in required fields will prevent submission.

Terminate Practitioner from Location(s) (cont'd)

4. Confirm termination of a practitioner.

app1qa.medica.com says

By selecting Total Term, you are terming this doctor from all locations within this Federal Tax ID.
Do you wish to continue?

Or

app1qa.medica.com says

Are you sure you want to terminate this practitioner?

| |
|--|
| Terminate Practitioner from Location(s) (cont'd) |
|--|

5. Review the Term Practitioner Confirmation screen.

Term Practitioner Confirmation

| | |
|-----------------------------|------------------|
| First Name: | |
| Last Name: | Remer |
| Middle: | |
| Suffix: | |
| Title: | MD |
| Specialty: | General Practice |
| NPI: | 1234567890 |
| UMPI: | |
| Effective Date: | |
| Termination Date: | 04052017 |
| Termination Reason: | Retired |
| Suppression from Directory: | Yes |

[Back to Practitioner List](#)

You will receive a confirmation email shortly after the term.

Change Location Demographics


1. Click **“View Addresses”** on Location List screen.

Location List

This transaction is available only for providers contracted directly with Medica.

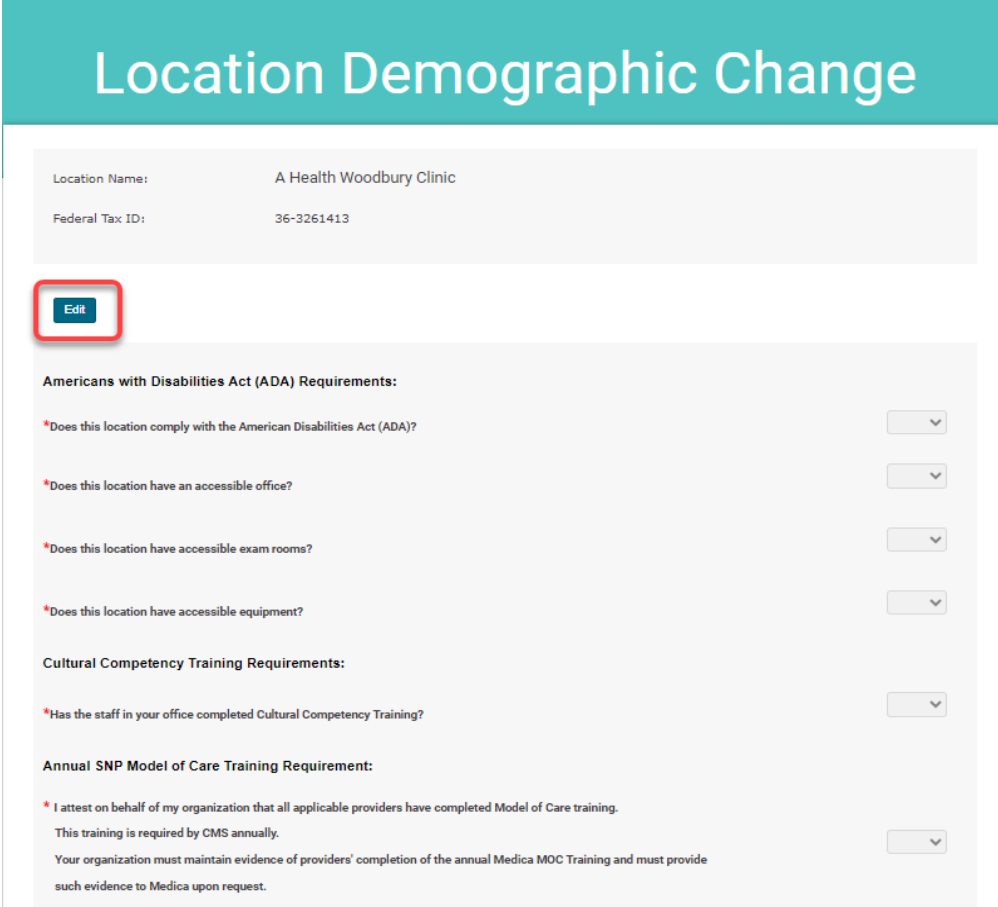
NOTE: If you are changing your Tax Id number, Check name or Billing name, Medica requires a W-9 submission.

| Location Name | Physical Address | Specialty | Fed Tax Id | | | | |
|---------------|---|----------------------------|------------|------------------------------------|------------------------------|-------------------------------|--|
| | 8675 Valley Creek Rd, Saint Paul, MN, 55125-2337 | CHIROPRACTIC CARE | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
| | 800 E 28TH ST, MINNEAPOLIS, MN, 55407-3723 | HOSPITAL-BEHAVIORAL HEALTH | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
| | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1318 | FAMILY PRACTICE | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
| | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1355 | INTERNAL MEDICINE | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |



Change Location Demographics (cont'd)

2. Review information on **Location Demographic Change** screen.
3. Click **"Edit"** button on Location Demographic Change screen to add or update information and click the **"Update Address"** button when completed.



The screenshot shows the 'Location Demographic Change' screen. At the top, there is a teal header with the title 'Location Demographic Change'. Below the header, the screen is divided into sections. The first section contains the 'Location Name' (A Health Woodbury Clinic) and 'Federal Tax ID' (36-3261413). Below this, there is a red-bordered box containing an 'Edit' button. The main content area is divided into three sections: 'Americans with Disabilities Act (ADA) Requirements:', 'Cultural Competency Training Requirements:', and 'Annual SNP Model of Care Training Requirement:'. Each section contains a list of questions with corresponding dropdown menus for answers. The 'ADA' section has four questions, the 'Cultural Competency' section has one, and the 'Annual SNP' section has one. The 'Annual SNP' section also includes a statement about the training requirement and a dropdown menu for the answer.

Location Demographic Change

Location Name: A Health Woodbury Clinic
Federal Tax ID: 36-3261413

Edit

Americans with Disabilities Act (ADA) Requirements:

- *Does this location comply with the American Disabilities Act (ADA)?
- *Does this location have an accessible office?
- *Does this location have accessible exam rooms?
- *Does this location have accessible equipment?

Cultural Competency Training Requirements:

- *Has the staff in your office completed Cultural Competency Training?

Annual SNP Model of Care Training Requirement:

- * I attest on behalf of my organization that all applicable providers have completed Model of Care training.
This training is required by CMS annually.
Your organization must maintain evidence of providers' completion of the annual Medica MOC Training and must provide such evidence to Medica upon request.

Change Location Demographics (cont'd)

*Must have UMPI or NPI

NPI: UMPI:

*Do you have Medicare#? *Do you have a website: Yes

Website Address: WWW.

*Requested Change Effective Date:

Billing Address

Location Address

Directory Address

LockBox:

Directory Location Name:

A Health Woodbury Clinic

Building Name:

* Street Address:

* Street Address:

* Street Address:

8675 Valley Creek Rd

8675 Valley Creek Rd

PO Box/Other:

PO Box 206

* City:

Minneapolis

* City:

Saint Paul

* City:

Saint Paul

* State:

MN

* State:

MN

* State:

MN

* ZIP:

55480-0206

* ZIP:

55125

* ZIP:

55125

* County:

WASHINGTON

Phone Number:

* Phone Number:

Phone Number:

Change Location Demographics (cont'd)

| | | |
|-----------------------------|-------------------------------|--|
| Phone Number: 6512413000 | * Phone Number: 6512413000 | Phone Number: 6512413000 Office Hours: |
|-----------------------------|-------------------------------|--|

Hospital Affiliations:

Interpreter Languages:

* Are any on-site interpreters available at your location?

| |
|---------------------------------------|
| Change Location Demographics (cont'd) |
|---------------------------------------|

No changes entered will result in return to Clinic Address Change screen.

Change Location Demographics (cont'd)

4. Confirm demographic change(s).

app1qa.medica.com says

Are you sure you want to submit your changes?

5. Review the Address Change Confirmation screen.

Address Change Confirmation

[View Location List](#)

You have made the following changes for location:

| | |
|----------------------------------|--|
| Location Name: | Abbott NW Hospital |
| Address: | 800 E 28th St, Minneapolis, MN, 55407-3723 |
| Federal Tax ID: | 36-3261413 |
| NPI: | 1053354985 |
| Requested Change Effective Date: | 11/11/2020 |

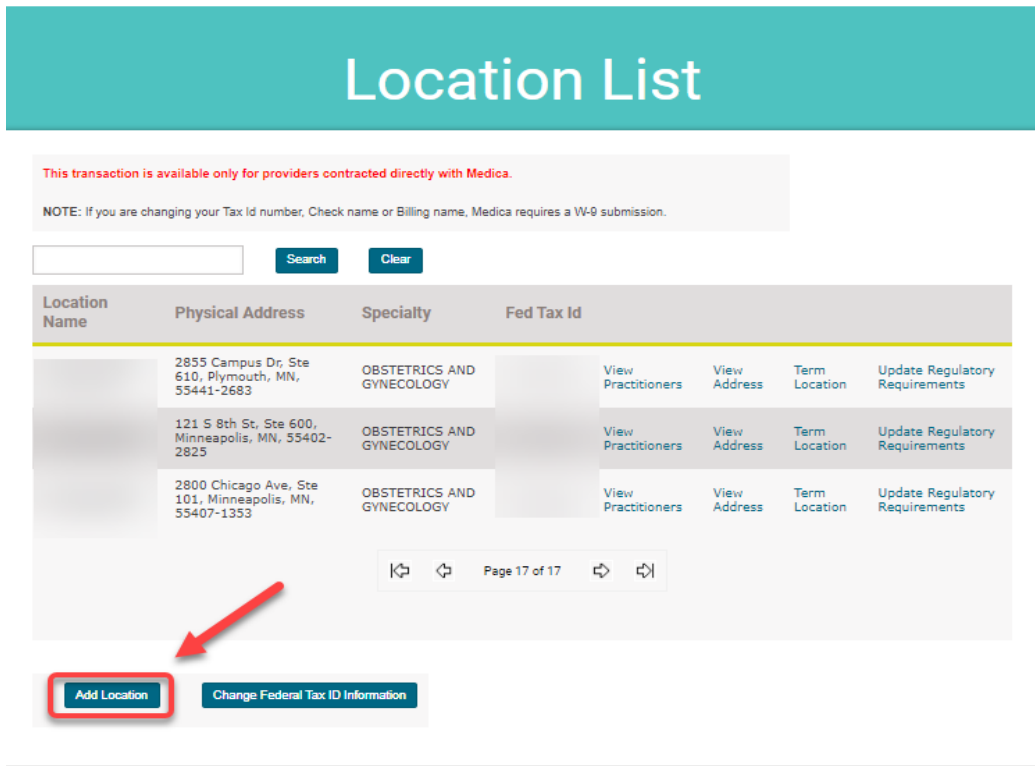
You will receive a confirmation email. Thank you.

| New Location Data | Old Location Data |
|---|--|
| <p>Is your office, including parking, entry ways, and other relevant space, accessible for people with disabilities?</p> <p>Y</p> | <p>Is your office, including parking, entry ways, and other relevant space, accessible for people with disabilities?</p> |
| <p>Are your office exam rooms accessible for people with disabilities?</p> <p>Y</p> | <p>Are your office exam rooms accessible for people with disabilities?</p> |
| <p>Does your office have equipment accessible for people with disabilities?</p> | <p>Does your office have equipment accessible for people with disabilities?</p> |

Note: You will receive a confirmation email shortly.

Add a Location

1. Click the “**Add Location**” button on the Location List screen.



This transaction is available only for providers contracted directly with Medica.

NOTE: If you are changing your Tax Id number, Check name or Billing name, Medica requires a W-9 submission.

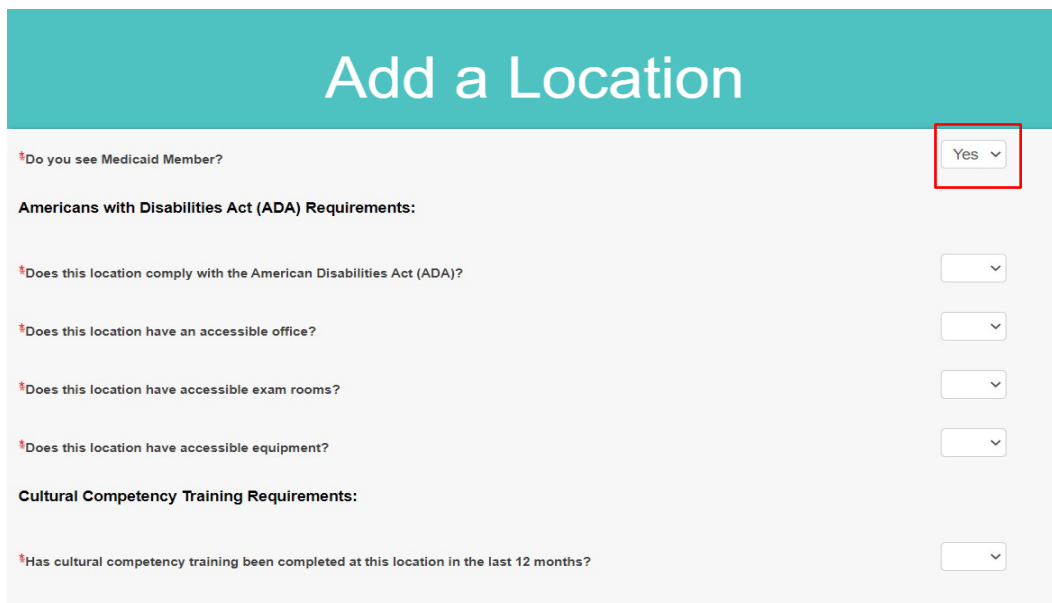
Search Clear

| Location Name | Physical Address | Specialty | Fed Tax Id | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
|---------------|--|---------------------------|------------|--------------------|--------------|---------------|--------------------------------|
| | 2855 Campus Dr, Ste 610, Plymouth, MN, 55441-2683 | OBSTETRICS AND GYNECOLOGY | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
| | 121 S 8th St, Ste 600, Minneapolis, MN, 55402-2825 | OBSTETRICS AND GYNECOLOGY | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |
| | 2800 Chicago Ave, Ste 101, Minneapolis, MN, 55407-1353 | OBSTETRICS AND GYNECOLOGY | | View Practitioners | View Address | Term Location | Update Regulatory Requirements |

Page 17 of 17

Add Location Change Federal Tax ID Information

2. Select “**Yes**” or “**No**” to the following dropdown questions.



Do you see Medicaid Member? Yes

Americans with Disabilities Act (ADA) Requirements:

Does this location comply with the American Disabilities Act (ADA)?

Does this location have an accessible office?



Does this location have accessible exam rooms?

Does this location have accessible equipment?

Cultural Competency Training Requirements:

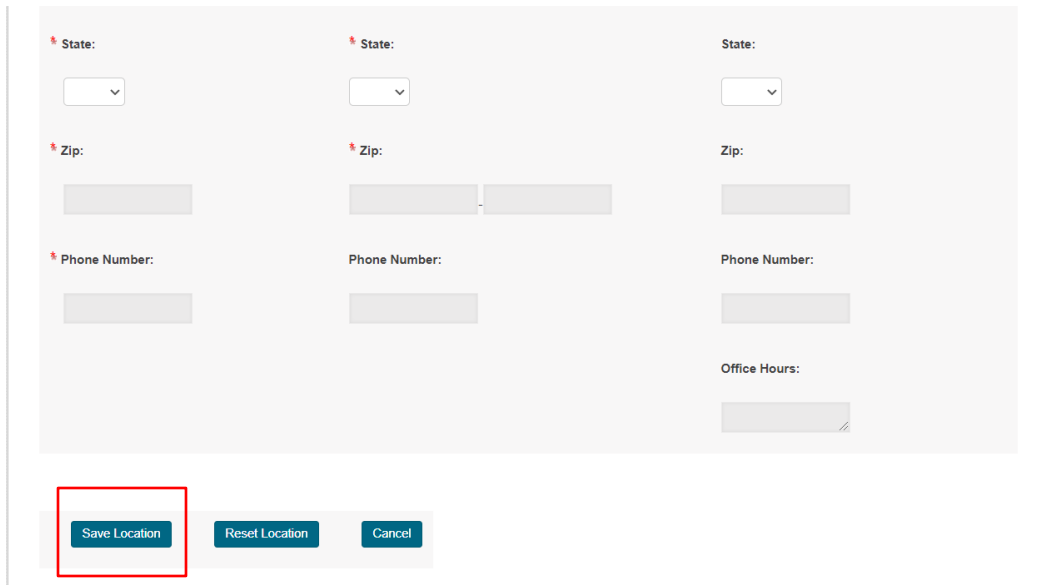
Has cultural competency training been completed at this location in the last 12 months?

Note: Depending upon your selection, additional required fields will open for information entry.

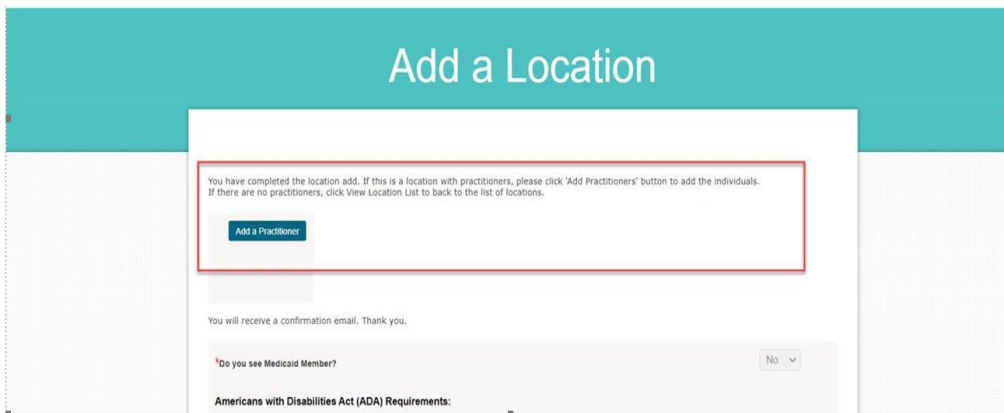
- | | | |
|--|---|---|
| <p>* Location Name: <input type="text"/></p> | | <p>View Location List</p> |
| <p>* Must have UMPI or NPI</p> | <p>* Federal Tax ID: <input type="text" value="363261413"/> </p> | |
| <p>NPI: <input type="text"/></p> | <p>* Requested Effective Date: <input type="text"/> </p> | |
| <p>UMPI: <input type="text"/></p> | | |
| <p>* Location Specialty: <input type="text"/></p> | | |
| <p>* Do you have a website: <input type="text"/></p> | | |

| Location Address | Billing Address | Directory Address |
|---|--|--|
| <p>Same as Location Address: <input type="checkbox"/></p> | | |
| | <p>LockBox: <input type="text"/></p> | <p>Directory Location Name: <input type="text"/></p> |
| <p>* Street Address: <input type="text"/></p> | <p>* Street Address: <input type="text"/></p> | <p>Building Name: <input type="text"/></p> |
| | <p>Po Box/Other: <input type="text"/> <input type="text"/></p> | <p>Street Address: <input type="text"/></p> |
| <p>* City: <input type="text"/></p> | <p>* City: <input type="text"/></p> | <p>City: <input type="text"/></p> |

Add a Location (cont'd)



4. The Location Add Confirmation Screen will appear.



5. Click the “Add Practitioner” button to add all practitioners active at that location. Reference instructions on pages 6-9.

The system will not allow practitioners to be added to facilities such as Hospital, SNF, DME, etc.

Terminate a Location

1. Click the “Term Location” link on Location List screen.

Location List

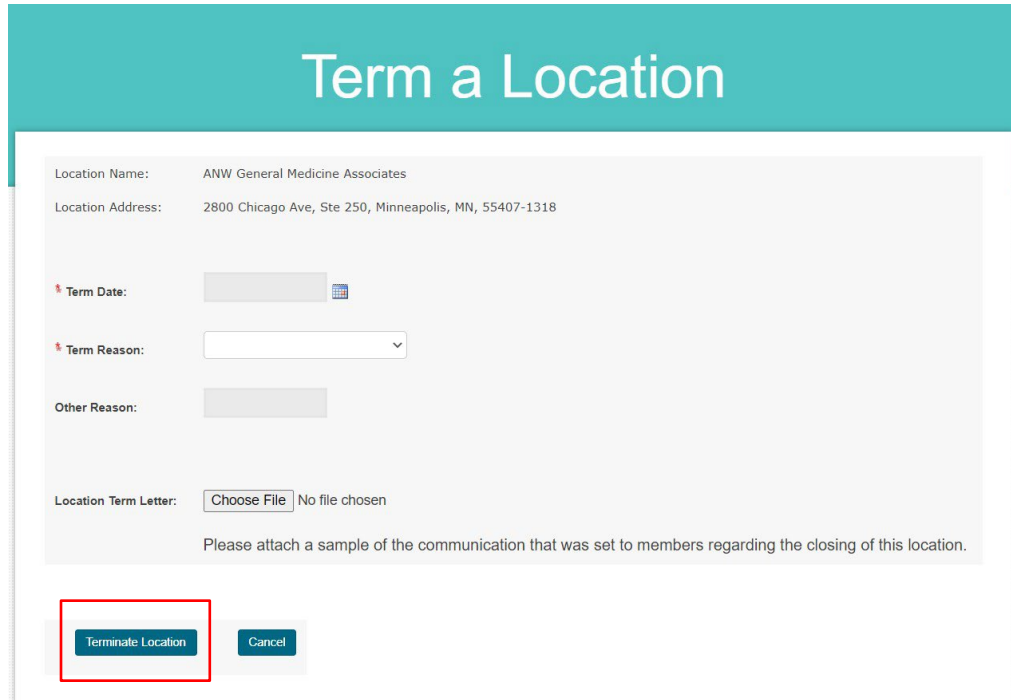
This transaction is available only for providers contracted directly with Medica.

NOTE: Demographic-update requests are not applicable if you are changing a tax ID number (TIN), a location name or your organization's check/billing name. For these requests, Medica continues to require submission of a W-9.

| Location Name | Physical Address | Specialty | Fed Tax Id | | | | |
|---|--|-------------------|------------|------------------------------------|--------------------------------|-------------------------------|--|
| ANW General Medicine Associates | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1318 | FAMILY PRACTICE | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |
| ANW General Medicine Associates-Inpatient | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1355 | INTERNAL MEDICINE | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |
| ANW Hospital Plastic Surgery Services | 800 E 28th St, Minneapolis, MN, 55407-3723 | GENERAL SURGERY | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |

Terminate a Location (cont'd)


2. Enter information in the required fields and click the "Terminate Location" button.



Term a Location

Location Name: ANW General Medicine Associates

Location Address: 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1318

Term Date: 

Term Reason:

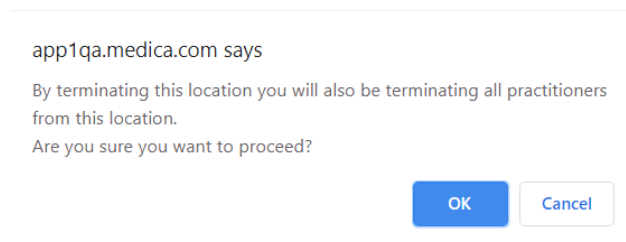
Other Reason:

Location Term Letter: No file chosen

Please attach a sample of the communication that was set to members regarding the closing of this location.

Missing information in required fields will prevent submission.

3. Confirm the location termination.



app1qa.medica.com says

By terminating this location you will also be terminating all practitioners from this location.

Are you sure you want to proceed?

Terminate a Location (cont'd)

4. Review the Term Location Confirmation screen.

Term Location Confirmation

[View Location List](#)

You have termed the following location:

| | |
|-----------------|--|
| Location Name: | ANW General Medicine Associates |
| Address: | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1318 |
| Federal Tax ID: | 36-3261413 |
| NPI: | 1053354506 |

You will receive a confirmation email shortly. Thank you.

You will receive a confirmation email shortly.

Change a Federal Tax Identification Number

1. Click the “Change Federal Tax ID Information” button on the Clinic List screen.

Location List

This transaction is available only for providers contracted directly with Medica.

NOTE: Demographic-update requests are not applicable if you are changing a tax ID number (TIN), a location name or your organization's check/billing name. For these requests, Medica continues to require submission of a W-9.

| Location Name | Physical Address | Specialty | Fed Tax Id | | | | |
|---|--|-------------------|------------|------------------------------------|--------------------------------|-------------------------------|--|
| ANW General Medicine Associates | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1318 | FAMILY PRACTICE | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |
| ANW General Medicine Associates-Inpatient | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1355 | INTERNAL MEDICINE | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |
| ANW Hospital Plastic Surgery Services | 800 E 28th St, Minneapolis, MN, 55407-3723 | GENERAL SURGERY | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |

⏪ ⏩ Page 1 of 15 ⏪ ⏩

Add Location
Change Federal Tax ID Information

2. Select a Federal Tax ID from the drop-down list on the Change Federal Tax ID Info screen.

Change Federal Tax ID Info

Select a Federal Tax ID:

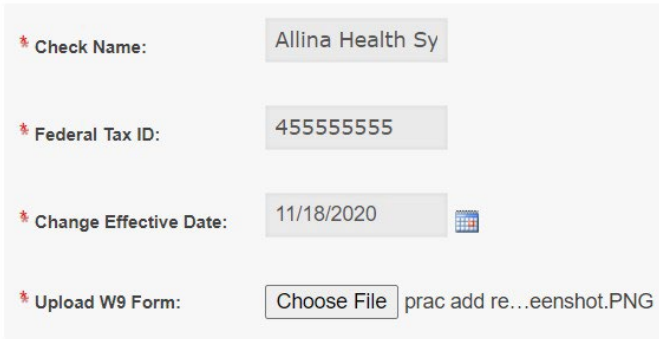
Cancel

* Required field

Only associated Fed Tax IDs will be viewable.


Change a Federal Tax Identification Number (cont'd)

3. Enter information in the required fields.
4. Upload the necessary attachments (W9) and click the “Save” button.



* Check Name: Allina Health Sy

* Federal Tax ID: 45555555

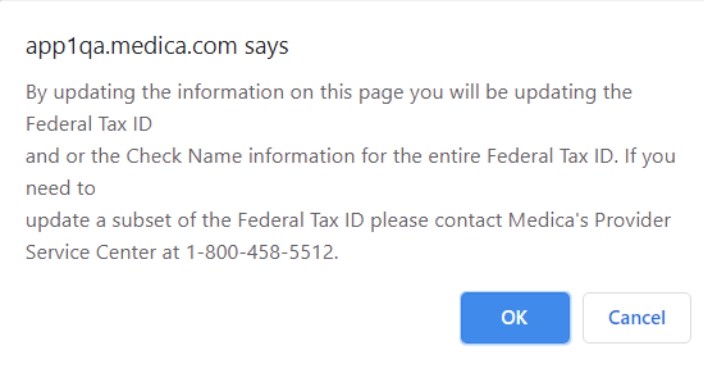
* Change Effective Date: 11/18/2020 

* Upload W9 Form: prac add re...eenshot.PNG

* Required field

Missing information in required fields or required documents will prevent submission.

4. Confirm the Federal Tax Identification Number change



app1qa.medica.com says

By updating the information on this page you will be updating the Federal Tax ID and or the Check Name information for the entire Federal Tax ID. If you need to update a subset of the Federal Tax ID please contact Medica's Provider Service Center at 1-800-458-5512.

Change a Federal Tax Identification Number (cont'd)

5. Review the Change Federal Tax ID Information Confirmation screen.

Change Federal Tax ID Information Confirmation

You have made the following changes for the selected Federal Tax ID: [View Location List](#)

| | |
|------------------------|----------------------|
| Federal Tax ID: | 45-5555555 |
| Check Name: | Allina Health System |
| Change Effective Date: | 11/18/2020 |
| W9 Uploaded Status: | Successful |

You will receive a confirmation email shortly. Thank you.

You will receive a confirmation email shortly.

Term Personal Care Assistants (PCA)

1. Enter personalized username and password on Login screen.

Electronic Transactions

Provider Login

The page you are requesting is a secure page. Please log in.

Username

Password

[Log in](#)

Login Assistance

- [Forgot password](#)
- [Forgot username](#)

Looking for something else? [Check out our frequently asked questions.](#)

Request an Account

Providers may request access to the secure provider portal by calling the Provider Service Center at 1-800-458-5512.

Billing agencies must work directly with providers to get access.

2. View the agency demographics on the Location List screen.

Location List

This transaction is available only for providers contracted directly with Medica.

NOTE: Demographic-update requests are not applicable if you are changing a tax ID number (TIN), a location name or your organization's check/billing name. For these requests, Medica continues to require submission of a W-9.

| Location Name | Physical Address | Specialty | Fed Tax Id | | | | |
|---|--|-------------------|------------|------------------------------------|--------------------------------|-------------------------------|--|
| ANW General Medicine Associates | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1318 | FAMILY PRACTICE | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |
| ANW General Medicine Associates-Inpatient | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1355 | INTERNAL MEDICINE | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |
| ANW Hospital Plastic Surgery Services | 800 E 28th St, Minneapolis, MN, 55407-3723 | GENERAL SURGERY | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |

Columns can be sorted alphabetically or numerically by clicking on headers.

Term Personal Care Assistants (PCA) (cont'd)

- Click "View Practitioners" link on the Location List screen to see all PCAs associated with agency.

Location List

This transaction is available only for providers contracted directly with Medica.

NOTE: Demographic-update requests are not applicable if you are changing a tax ID number (TIN), a location name or your organization's check/billing name. For these requests, Medica continues to require submission of a W-9.

| Location Name | Physical Address | Specialty | Fed Tax Id | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |
|---|--|-------------------|------------|------------------------------------|--------------------------------|-------------------------------|--|
| ANW General Medicine Associates | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1318 | FAMILY PRACTICE | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |
| ANW General Medicine Associates-Inpatient | 2800 Chicago Ave, Ste 250, Minneapolis, MN, 55407-1355 | INTERNAL MEDICINE | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |
| ANW Hospital Plastic Surgery Services | 800 E 28th St, Minneapolis, MN, 55407-3723 | GENERAL SURGERY | 36-3261413 | View Practitioners | View Addresses | Term Location | Update Regulatory Requirements |

- Click "Term" link on the Practitioner List screen to terminate a PCA from your agency or Federal Tax ID

Location Name: Allina Health Apple Valley Clinic
Federal Tax ID: 36-3261413

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z All

| Last Name | First Name | MI | Title | Specialty | NPI | UMPI | Roster Id | Eff Date | Term Date | Suppr | Accepting New Patients | Term |
|-----------|------------|----|-------|-------------------|------------|------|-----------|------------|-----------|-------|------------------------|----------------------|
| Appel | Melissa | M | MD | Internal Medicine | 1710971833 | | | 02/01/2020 | | No | Yes | Term |
| Barnes | Sarah | K | PA-C | Family Practice | 1790315273 | | | 04/15/2020 | | Yes | Yes | Term |

Refer instructions on pages 10-13 to terminate a practitioner.

Add Personal Care Assistants (PCA) (cont'd)

1. Click "Add PCA" to add PCA to location.

Practitioner List

Total number of records: 55

Add Practitioner

Add PCA

Add Interpreter

2. To add a PCA currently in our system, search using the PCA's UMPI number

Add a PCA

Location Name: Piper Breast Center-WestHealth

Federal Tax ID: 36-3261413

Medica is receiving PCA data from the DHS PCA Database; if you can't find your PCA via their UMPI # you will need to work with DHS to get the issue resolved. If your PCA is listed in the DHS data, and you are unable to find them on Medica's site, please note there is a 1 week delay between DHS and Medica's site.

*UMPI:

Search

Cancel

* Required field

Add Personal Care Assistants (PCA) (cont'd)

3. Enter information.

Add a PCA

Location Name: Piper Breast Center-WestHealth

Federal Tax ID: 36-3261413

Medica is receiving PCA data from the DHS PCA Database; if you can't find your PCA via their UMPI # you will need to work with DHS to get the issue resolved. If your PCA is listed in the DHS data, and you are unable to find them on Medica's site, please note there is a 1 week delay between DHS and Medica's site.

First Name: Daisy

Last Name: Alfaro

MI:

Date of Birth: 08/28/1989

SSN: ***-**-2707

UMPI: A818478100

* Gender:

* Effective Date:

English is the default language.

Does this PCA speak any languages other than English?

Language 1:

Language 2:

Language 3:

If the data pre-populated is incorrect in any way check this box.

Incorrect Data: ☐

* Required field

Missing information in required fields will prevent submission.

4. Click the "Save" button.

Provider Demographic update Online Tool Frequently Asked Questions (FAQ)

1. **Who has access to the PDOT application?** Only Primary and Secondary Administrators have access to submit updates via the PDOT tool. Users must petition their Primary Administrator for a Secondary Administrator security role.
2. **Is it necessary to use upper- and lower-case script?** Yes. Please take special care to enter the information using upper- and lower-case script, verify the practitioner's Social Security Number, and the spelling of their name.
3. **What is the function of the “View Practitioners” link?** The “View Practitioners” link displays a list of practitioners currently associated with the location within the Medica claims system.
From the practitioner list for a location, you can:
 - Terminate existing practitioner from the location.
 - Add new practitioners. The practitioner being added must be credentialed with Medica. If the practitioner is *not* credentialed, you will need to submit the *Minnesota Uniform Credentialing Application* for the practitioner. [See more on this form at medica.com - Credentialing and Demographics](#)
4. **What is the function of the “View Addresses” link?** The “View Address” link displays:
 - Office Hours
 - Location address (physical location)
 - Check/Billing address
 - Directory address (this address can include a Building Name for easier identification by patients).From this screen, you can update the information that will display in directories and in our [Find Care](#) tool.
5. **What is the function of the “Term Location” link?** At this link, you can terminate specific locations from the provider's contract, displayed by location name(s) and address(s). *Please contact your contract manager if the legal entity (provider organization) is terming.* NetManQuest@medica.com
6. **What is the function of the “Add Location” button?** This function is to add additional locations to the provider's contract. Please add all active practitioners at the location where applicable. The system will not allow practitioners to be added to organizations designated as hospital, skilled nursing facility, durable medical equipment supplier, etc. After submitting a request electronically to Medica, related system changes take effect in 30 to 45 days. Providers should notify Medica of a change 60 days in advance, for a location addition or termination, to ensure that the change is completed by the requested effective date.

7. **What is the “Change Federal Tax ID Information” button for?** The “Change Federal Tax ID Information” button provides the ability to change the (provider organization) entity’s legal name or Federal Tax ID. A W9 document is required to be uploaded.
8. **What is the “Edit PCA” link for?** The “Edit PCA” link provides the ability to change Personal Care Assistants’ demographic information. This option is limited to only the Personal Care Assistants.
9. **What is the difference between “Total Term” and “Terminate Practitioner” buttons?** The “Total Term” button will terminate the practitioner from all locations within the Federal Tax ID. The “Terminate Practitioner” button will terminate the practitioner from only one specific location.
10. **How do I add a PCA?** To add a PCA, open the “Location List” screen, click “View Practitioners” link, click “Add New PCA” button, search by UMPI number enter information, save.

Special Note: Medica.com website must match the Federal Tax ID and UMPI/NPI number combination on file with DHS. [Add or Update a Personal Care Assistant](#)
11. **Who should I contact if I have questions about what I see on the Provider Demographic Online Tool?** Please contact the Medica Provider Service Center at 1-800-458-5512
12. **What is the Termination Date for on the Practitioner Add page?** A term date would be included in a practitioner add if the practitioner is a Locum Tenens or temporarily working at your location for a set length of time. The termination date should be populated with the last date the practitioner will be working at the location.
13. **I added a practitioner or made demographic changes to a location, and when I view the location again, I cannot see the updates.** You will not be able to see changes immediately in PDOT. Changes will be displayed after the load process is completed. If you have questions regarding changes that you have requested, please call the Medica Provider Service Center at 1-800-458-5512.
14. **It does not look like I can update what I want here.** Please contact Medica Network Management by sending an e-mail to NetManQuest@medica.com regarding the following changes:
 - Total Contract Terminations
 - Care System or Care
 - Grouping Changes
 - Merger Acquisition Activities
15. **How do I know if a practitioner is credentialed by Medica?** Practitioners displayed on the Practitioner Search Results screen are all currently credentialed and active in the Medica provider network. Due to special agreements with individual providers, not all practitioners are listed at all locations.

16. **My practitioner is changing locations. What do I need to do?** Complete a practitioner termination request for the location the practitioner is leaving from, and a practitioner add request for the location where the practitioner is joining.
17. **Can I change a practitioner's specialty?** Please complete a *Minnesota Uniform Practitioner Change Form*. [Credential a Provider](#)
18. **I termed the practitioner in error. Can I re-add the practitioner? Does the practitioner need to be re-credentialed?** Yes, you can re-add the practitioner. The Medica Credentialing Department will determine if re-credentialing is required.
19. **I updated a location in error. Can I undo the changes?** All location additions and terminations are reviewed by the Network Management team prior to updating the contract. If you have made changes in error, please e-mail the Network Management department immediately at NetManQuest@medica.com.
20. **I used the wrong termination/effective date. Can I change the date I submitted?**
- *For questions regarding submitted entity (provider organization) changes, please contact Medica Network Management by e-mail at NetManQuest@medica.com
- * For questions regarding submitted practitioner changes, please contact Provider Network Operations by e-mail at MedicaDemoResolution@medica.com
21. **If I terminate a location, do I still have to submit terminations for all the practitioners associated with that location?** No. when a location is termed in the system, Medica will terminate all the practitioners associated with that location.
22. **I cannot see my practitioners at every location where they practice medicine. Why are all locations not displayed?** The Medica system allows the loading of a practitioner at one location for one Federal Tax ID. It is not necessary for Medica to list a practitioner at each care location, for a practitioner to be set up properly for claims payment. If you do not see your practitioner at every location and have concerns, please contact the Medica Provider Service Center at 1-800-458-5512.

If you have any questions, please contact Medica Provider Service Center at 1-800-458-5512.