Secure Provider Portal: Notification of Pregnancy (NOP)



- 1. Log into the Secure Provider Portal: <u>Provider.SuperiorHealthPlan.com</u>
- 2. Search for the member using the **Eligibility** tool.
- 3. Enter the Date of Service, the Member's Medicaid ID or Last Name, DOB and click Check Eligibility.

superior healthplan.		Eli	gibility	Authorizations	S Claims	Messaging	
Viewing Eligibility For :	Medicaid / C	HIP					
Eligibility Check							
Date of Service 03/19/2015	Member ID or Last Name 1234	56789 or Smith	DOB mm/dd	/yyyy Che	ck Eligibility		Print

4. Click the Patient Name to see the member's specific information.

Date of Service	3/20/2015 Membe	r ID or Last Name	123456789 or Smith	DOB mm/dd/yyyy	Check Eligibility	🚔 Print
PATH ELIGIBLE DATE OF SERVICE NAME		PATIENT NAME	DATE CHECKED	CARE	GAPS	
.	03/20/2015		03/20/2015	None	On File +	oom Visit?
루 Ineligible	03/20/2015		03/20/2015	No flu past 1	vaccine in 12 months. Emergency R	oom Visit? Remove
r de	03/20/2015		03/20/2015	Memi 2 or n emery visits vear	per has had nore Emergency R gency room in past	oom Visit? Remove

5. Select Assessments from the side navigation and click Fill Out Now!

superior healthplan.		Eligibility	L. Patients	V Authorizations	S Claims	Messaging		-	
Viewing Eligibility For :	Medicaid / CHIP	GO							
Back to Eligibility Check									
Overview	Please tell us about your patient's health			Previous Assessments					
Cost Sharing	Notification of Pregnancy Please let us know if your patient is pregna	pregnant to help you			You have not told us about anything yet. Please fill out a form.				
Authorizations	and your patient achieve a healthy pregna	ncy outcom	e.						

Please note: NOP assessment will only display if the member is female and between the ages of 10 – 50.