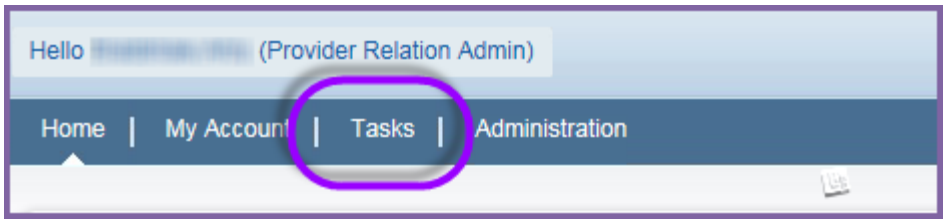
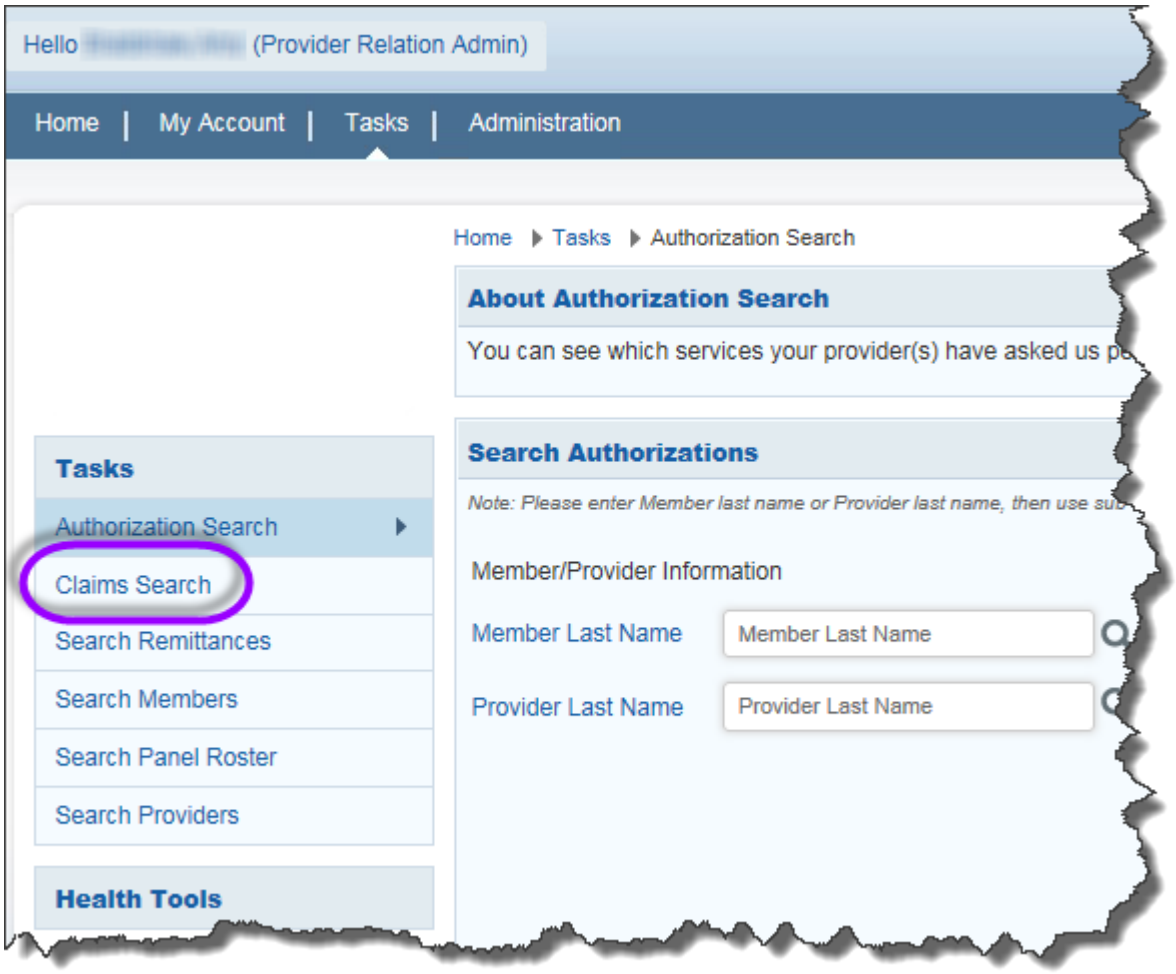
Dispute Steps though Web Portal

(Please note, this is not the process for a corrected claim. Corrected claims can be submitted through the same process as submitting a new claim using our WebConnect tool and designating the claim as a corrected claim.)

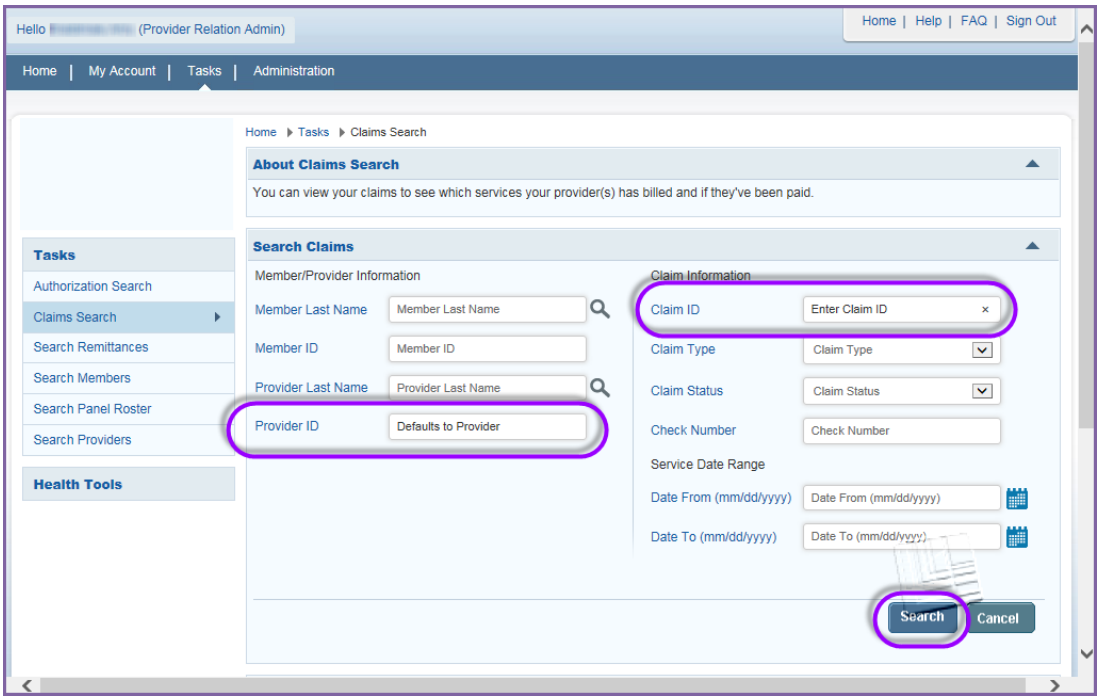
1. The Provider logs into the Secure Provider Portal **Medicaid Web Portal (MWP).**
2. Click on **Tasks** from the banner on the top



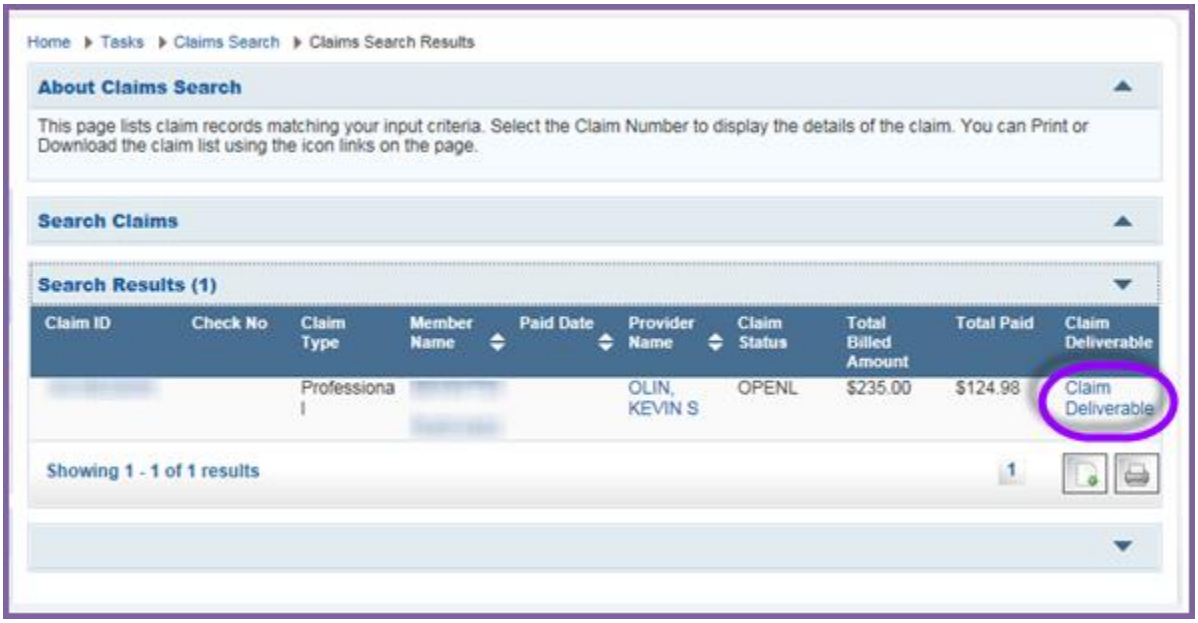
3. Click on **Claims Search** located in the left pane under "Tasks".



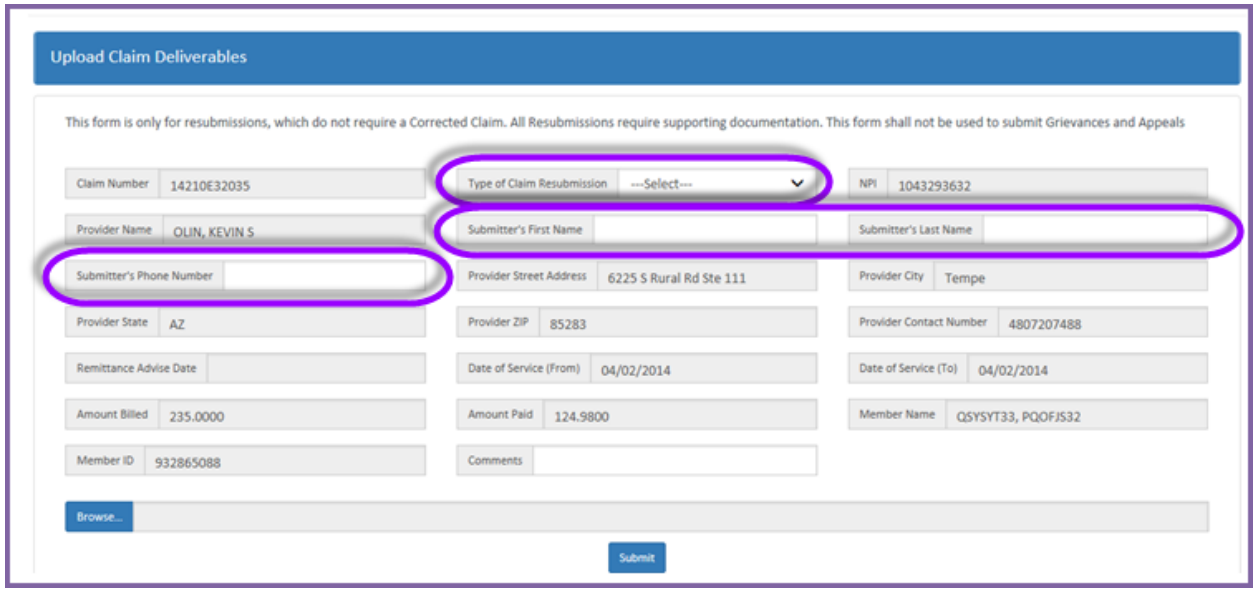
4. The **Provider Name** should default to the logged in provider. Enter **Claim ID**, and click the **search** button at the lower right.



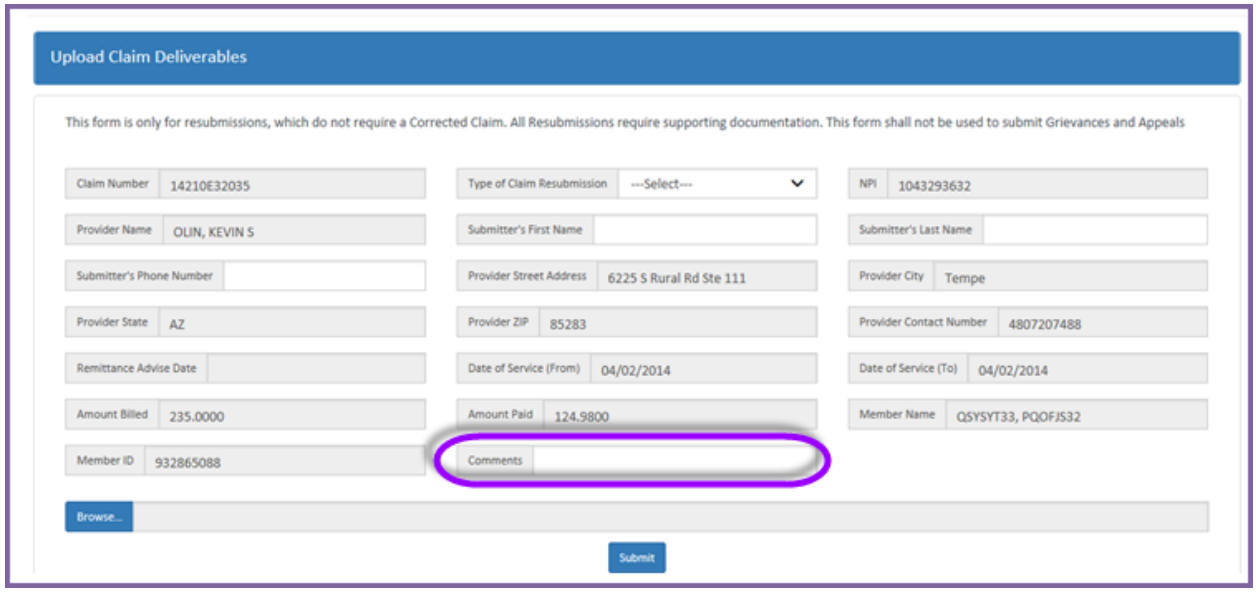
5. The Search results grid will load.
6. The Provider will see **"Claim Deliverable"** link under the **Claim Deliverable** column in the Search results grid. Click on the **Claim Deliverable** link to begin the Dispute process for the selected claim.



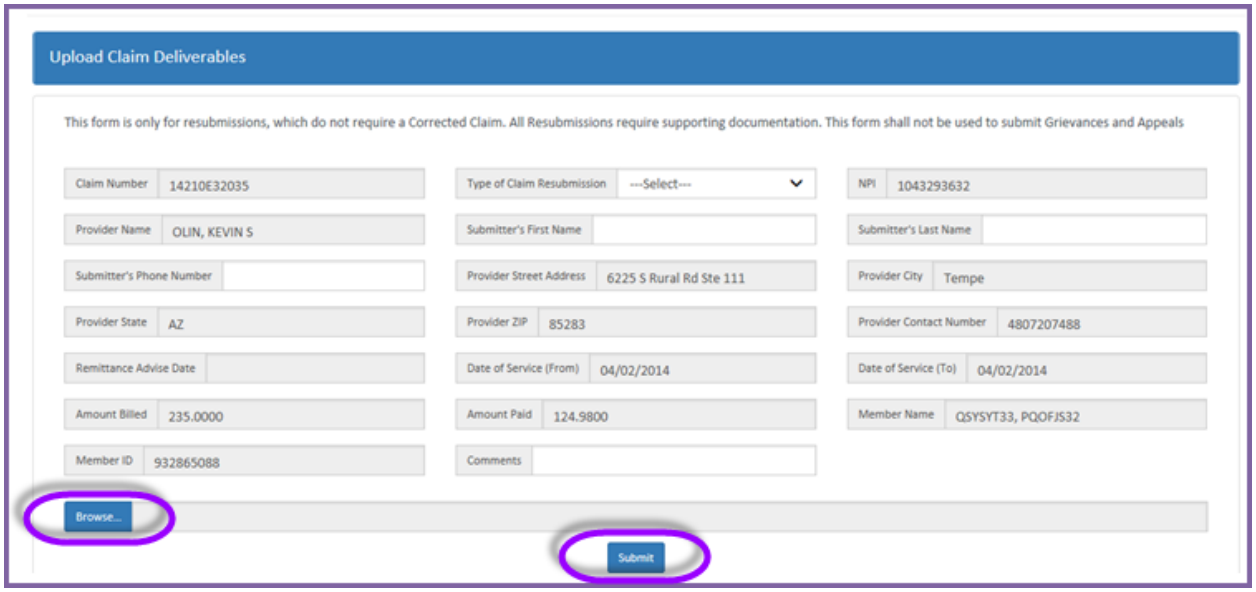
7. This will take the Provider to the **Upload Claim Deliverables** screen.
8. Most of the information on the screen will be 'Auto populated' based on the claim number
9. Provider will select a **Type of Claim Resubmission (Dispute)** from the dropdown and enters the information in the relevant Mandatory fields**;**
    a. **Submitter's First Name,**
    b. **Submitter's Last Name, &**
    c. **Submitter's Phone Number**



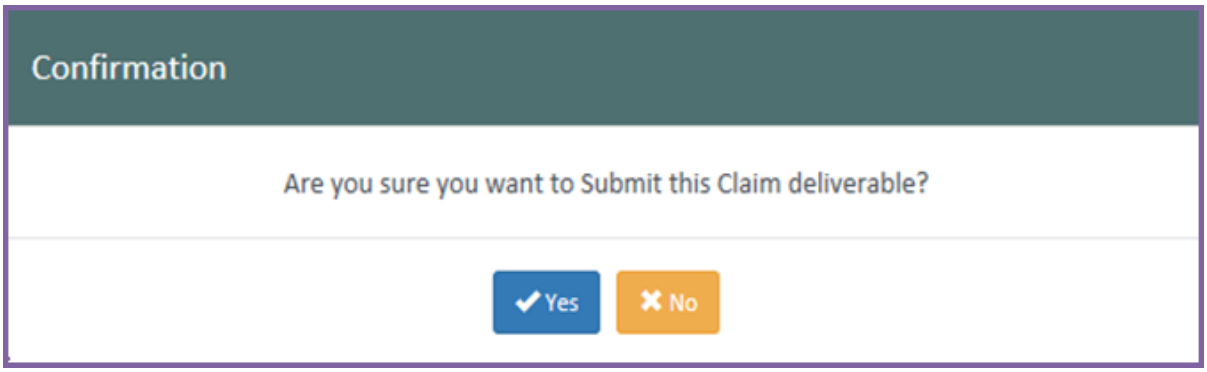
10. The **Comments** field is a mandatory input required, *when* the selected Type of claim Resubmission (Dispute) is "Other"

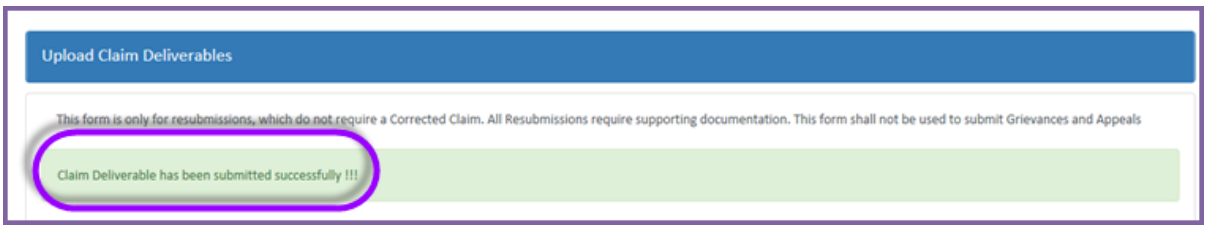


11. The Provider can upload supporting documentation (any type of file) from here by clicking the "**Browse"** button and thus activating the Browse functionality.

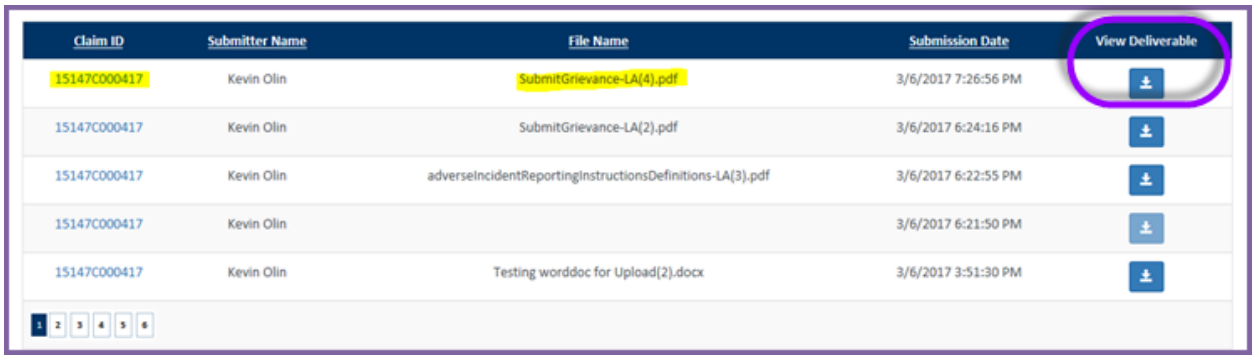


12. On successful attachment of the supporting documentation, the Provider clicks "**Submit"** at the bottom and receives a **Confirmation message** window. Upon clicking "**Yes"** the provider receives a success message, completing the workflow for submission.





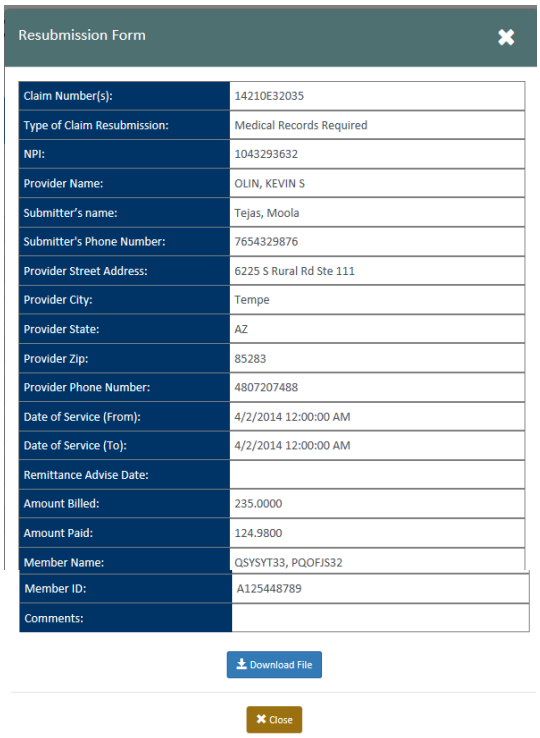
13. The Provider can view a previously submitted document (any type of file) from the below screen through clicking the link under the **Claim ID** column of the displayed grid, thus activating the **View Deliverable** functionality.



Claim ID	Submitter Name	File Name	Submission Date	View Deliverable
15147C000417	Kevin Olin	SubmitGrievance-LA(4).pdf	3/6/2017 7:26:56 PM	
15147C000417	Kevin Olin	SubmitGrievance-LA(2).pdf	3/6/2017 6:24:16 PM	
15147C000417	Kevin Olin	adverseIncidentReportingInstructionsDefinitions-LA(3).pdf	3/6/2017 6:22:55 PM	
15147C000417	Kevin Olin		3/6/2017 6:21:50 PM	
15147C000417	Kevin Olin	Testing worddoc for Upload(2).docx	3/6/2017 3:51:30 PM	

1 2 3 4 5 6

14. The submitted resubmission form is displayed, and the user can view the previously submitted information on the form and download the attachment by clicking the **Download File** button or through the **Button** below the **View Deliverable** column of the displayed Grid



Resubmission Form

Claim Number(s):	14210E32035
Type of Claim Resubmission:	Medical Records Required
NPI:	1043293632
Provider Name:	OLIN, KEVIN S
Submitter's name:	Tejas, Moola
Submitter's Phone Number:	7654329876
Provider Street Address:	6225 S Rural Rd Ste 111
Provider City:	Tempe
Provider State:	AZ
Provider Zip:	85283
Provider Phone Number:	4807207488
Date of Service (From):	4/2/2014 12:00:00 AM
Date of Service (To):	4/2/2014 12:00:00 AM
Remittance Advise Date:	
Amount Billed:	235.0000
Amount Paid:	124.9800
Member Name:	QSYSYT33, PQOFJS32
Member ID:	A125448789
Comments:	

Download File

Close

15. Alternatively click **Close** button to exit.

16. The provider's Dispute submission will be reviewed and processed by claims operations team. Please note, there is no status provided of the Dispute on the tool. A remit will be sent with the new claim to the provider once the request has been processed.

    Note – The Provider has to repeat the process from claim search to upload deliverables for another claim