

NEW Provider Portal

Provider FAQs

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Accessing the new Provider Portal



Are in-network providers required to register for an account on the new Provider Portal?

No, but we strongly encourage it. As an integrated point of connection with Priority Health, the portal allows you to work with us more easily and efficiently. If you submit authorizations or status claims, or want to get a complete picture of your patient's health, you'll want an account. We offer multiple ways of working with us, but the portal is by far the easiest and most efficient.

Can out-of-network providers and Cigna providers still get portal accounts?

Yes, we encourage any providers who work with our members to register for an account. The account registration process is the same for all providers, regardless of network status.

Can I use my prism login for the new Provider Portal?

No, the new Provider Portal is an entirely different platform. Your prism login credentials will not work.

I don't use Epic as my electronic medical records (EMR). Can I still access Priority Health's new Provider Portal?

Yes, all providers will have full access to our new Provider Portal upon registration, regardless of their use of Epic as an EMR. That said, our new portal is based on Epic's Tapestry Link tool, so if you use Epic as your EMR, we anticipate that you will have access to more integrated tools in the future.

When can I register for an account?

Account registration is scheduled to begin on June 15 for Site Administrators and then on August 3 for all other users. You'll want to create an account as soon as possible once registration opens to ensure timely access. If you do create your account before September 1, you won't have access to the tools in the new portal until September 1. You'll need to continue to use prism through August 31.

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Will I get access immediately on September 1?

Account approval can take several weeks, so if you wait until late July or August to register for an account, you may not have access on September 1. Ensure timely access by establishing a site with a Site Administrator on June 15 or soon after, and having all other necessary users register for an account as soon after August 3 as possible.

How long does the account approval process take place?

Account approval times depend on our backlog of requests, but can take several weeks in some cases. We anticipate that the account approval backlog will be large immediately before and after September 1, so we encourage you to register for an account in June and July.

Can I request an account without a Site Administrator?

No, every site (each practice, hospital or provider group with a distinct Type 2 NPI) needs at least one Site Administrator. If you are the first at your site to request an account, you'll need to become the Site Administrator. See below for details on what it means to be a Site Administrator.

Can third-party administrators (TPAs) request accounts?

Yes, but TPAs will need to complete additional security measures. They also cannot sign up as Site Administrators, so the site will need to be created ahead of time before they register, so that they can affiliate to the site.

Can a user have more than one NPI affiliation on their account?

Yes. Users will need to register with an account with one NPI, but can then request to add additional NPIs in their account settings after they log in.

How should ACN administrators access the portal?

If your ACN has a Type 2 NPI, create a site, then request affiliation to each other site whose data you need access to in the portal (in **Settings** under **Site Access**). If your ACN doesn't have a Type 2 NPI, you'll need to wait until at least one of your affiliate sites is created, then register for an account on or after August 3 with that site's Type 2 NPI. Affiliate to additional sites in the portal as described above.

What's the URL for accessing the portal?

Beginning on September 1, provider.priorityhealth.com will direct to the new Provider Portal rather than prism. The temporary URL for account creation before that will be providerprd.priorityhealth.com.

Which browsers is the portal accessible on?

The portal is designed to be compatible with Chrome, Edge and Safari.

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Which device types is the portal accessible on?

The portal cannot be accessed on phones. It's accessible on computers and tablets, as long as a compatible browser is being used (see above).

Other questions about the site creation process for Site Administrators?

Check out our [site creation FAQs](#).

Security



What is a Site Administrator?

A Site Administrator (sometimes called a Site Admin) is a user who controls access to their site's provider and patient data, much like a prism Security Administrator. Any non-TPA user associated with a Type 2 NPI can become a Site Administrator, although we recommend that it is someone who is in an appropriate position to approve or deny access to affiliated user accounts. Each site needs at least one Site Administrator.

Can a site have more than one Site Administrator?

Yes. There is no limit to the number of Site Administrators a site can have.

Can one user be the Site Administrator for multiple sites?

Yes. There is no limit to the number of sites a user can perform the Site Administrator role for.

Can Site Administrators create accounts for affiliated users?

Site Administrators can request portal accounts for affiliated users in their portal's Site Administrator functions. Under the **Account Requests** tab, use the **Request New Account** button in the upper-left. The user will still need to complete identity verification.

Who is doing identity verification for the new portal?

We're working with our trusted partner, [Persona](#), to complete identity verification for each new user to ensure your data and your patient's data is secure.

What sort of personal data will be required for the identity verification process?

To ensure all users are verified, you'll be required to share a government-issued ID and to take a "selfie" (a picture of your face).

Will my Social Security number be required?

No, you'll only need a government-issued ID and selfie.

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Is there still an annual renewal period?

Yes, Site Administrators will be required to review affiliated users (users in your practice, hospital or group with access to your site's data) access each year, just like prism Security Administrators are required to do with affiliated prism users. The renewal period will be June 1 – August 1 each year. Email notifications will be sent to Site Administrators to remind them about the process and to provide instructions on how to complete the review.

If a user is inactive for a certain period of time, do they lose portal access?

Yes, users will be locked out of their account after 240 days of inactivity (not logging in). The user's Site Administrator will need to restore their access. If the user is the site's only Site Administrator, they'll need to call Priority Health tech support at **800.942.4765**, option 5, then option 1.

Will users be locked out after a certain number of failed login attempts?

Yes, users will be locked out of their account after 5 failed login attempts. The user's Site Administrator will need to restore their access. If the user is the site's only Site Administrator, they'll need to call Priority Health tech support at **800.942.4765**, option 5, then option 1.

Transitioning from prism



Why is Priority Health transitioning from prism to a new Provider Portal?

We're working to keep our services simple, affordable, equitable and exceptional heading into the future. By using Epic's provider portal, we're partnering with a proven organization in the health care technology space. We're confident that the experience for our providers and members alike will improve as a result.

Will I be able to access prism on and after September 1?

No, prism will be turned off on September 1. To work with Priority Health online after that point, you'll need to have a new Provider Portal account.

Will my data from prism transfer, including claims, authorizations, inquiries, enrollment requests, etc.?

Decisioned claims, authorizations, appeals and inquiries will be automatically ported over to the new portal. However, open items like pending claims, inquiries, authorization requests and appeals will not show up in the new portal until they have been resolved. **Please do not call to check on these open items unless they are past due—we're working on them.**

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Will Priority Health's Provider Manual be updated to reflect the changes to the new Provider Portal?

Yes, all relevant pages of the Provider Manual will be updated on September 1 to reflect the change from prism to the new Provider Portal. For information ahead of time, please see our [Provider Portal information page](#).

In general, will I be able to do everything I do in prism in the new portal?

Yes, you'll still be able to do all the things you can do in prism (and more)—but the way you do them may be different.

Impacts



What if I don't have access to the new portal on September 1?

If you've requested a Provider Portal account, completed identity verification and are just waiting on us to grant access, hang tight: you'll be in soon. In the meantime, you can continue [submitting claims](#) electronically. We understand not having the portal for authorization requests may be inconvenient, but we have ways of submitting authorization requests outside of the portal that you can use while you wait for access. See our [Provider Manual](#) for details.

Will provider reimbursement change at all as a result of the transition to the new portal?

Yes, we're taking this opportunity to align our systems to industry standards, and this may have impacts on claims payments. One example of these configuration adjustments is that we'll be rounding reimbursement amounts to the third decimal rather than the second decimal. We'll share other system configuration changes as we know about them. These adjustments are not the result of any changes in our provider agreements (contracts) or fee schedules. They are the result of configuration changes due to our systems migration.

How are provider agreements impacted?

As Priority Health transitions to our new Provider Portal, an Epic-based platform, on September 1, 2026, any provider agreements, documents, or processes referencing prism are intended to remain in full force and effect, and it is understood that the use and reference of our Provider Portal or the Priority Health provider portal now replaces all references to prism.

Is Provider Roster Application attestation going away?

No, PRA attestation is not affected by the change to the new Provider Portal.

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Is FileMart going away?

Yes, FileMart is being retired. Remittance advices for dates of service from September 1 onward will be automatically available in the new portal and in the Optum payment portal. Remittance advices from dates of service before September 1 will be made available; details to come. Likewise, we're working on a solution to get you the other files previously shared through FileMart and will let you know as soon as we have a solution in place.

What if I have open/active inquiries, claims, authorization requests, disputes/appeals or credentialing applications submitted on or before August 31?

We're working on these open items, even though you won't be able to track them as usual in prism or the new Provider Portal. **Please do not call to check on these open items unless they are past due.**

Using the new portal



Is there anything I can do on the new Provider Portal without an account?

Yes, you can check member eligibility and claim status.

How do I verify member eligibility?

Verify member eligibility by clicking **Select Member** on the portal home page or by using the Member List or Member Inquiry in the top navigation bar. You can also verify member eligibility ahead of login by selecting **Verify Eligibility Status** on the login screen.

Why can't I find the member I'm looking for on my Member List?

Your Member List only features members you've worked with recently. To search all members, select **Search All Patients** in either the Member List or in Member Inquiry.

How do I submit a claim?

Select the member you'd like to submit a claim for. Then, in Member Inquiry, select either **CMS Claim Entry** for a professional claim or **UB Claim Entry** for a facility/institutional claim. Fill out the required fields and click submit.

Note that you can continue to submit claims electronically through electronic data interchange (EDI), using the instructions on our [Provider Manual](#).

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How do I check a claim's status?

Check a claim's status by selecting **Claim Search** on the portal home page or **Claims** in the top navigation bar. In Member Inquiry, you can also select **Claim by Member** to see claims associated with a particular member. Lastly, you can also check a claim's status ahead of login by selecting **Check Claim Status** on the login screen.

How do I submit an authorization request?

For most authorizations: Select **Create Authorization** from the portal home page, or navigate to the member for whom you'd like to create an authorization request and select **New Authorization** in Member Inquiry. Fill out the required fields and click submit. (You'll still be directed to EviCore or TurningPoint to submit authorizations for procedures they manage on our behalf, and you can still go to those portals to submit authorizations that usually go through them.)

For Newborn & NICU authorizations: Newborn and NICU authorization requests are submitted via a CRM. On the portal home page, find the Quick Links callout box. Under **Contact us (CRM)**, click **Newborn and NICU authorization request**. Fill out the required fields and click submit.

For drug authorizations: Medical and pharmacy drug authorizations will continue to be managed by the Priority Health Pharmacy Department. You can find submission details on our [Drug Information page](#).

How do I check an authorization's status?

Select **Authorizations** in the top navigation bar and use either the **Authorization Worklist** or **Authorization Search** from there. In Member Inquiry, you can also select **Authorizations by Member** to see authorizations associated with a particular member.

How do I dispute a claim or appeal an authorization decision?

With the claim or appeal in question selected, click **Ask A Question** in the upper-right corner.

How do I submit a new enrollment request or change my provider information?

Information on this process is still coming.

How do I access the Optum payment portal?

To manage your payments and view remittance advices through Optum, select **Payment Portal** in the top navigation bar. The ECHO login screen will open in a new tab.

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What is InBasket?

InBasket is the Provider Portal's messaging system, where you'll be able to read notifications from Priority Health (such as updates to claims or authorizations), as well as general communications from Priority Health. Messages are organized in folders.

How do I ask Priority Health a question?

You can open an inquiry, or CRM, from the portal home screen in the Quick Links box under the **Contact us (CRM)** heading. Select the link most appropriate for the topic of your question.

How do I access fee schedules, authorization request tool guides and provider incentive program documentation?

If you are a contracted provider, you can access all of these resources in the Quick Links box on the portal home page under the **Contracted provider resources** heading.

How do I change my email notification settings?

Click the Menu dropdown in the upper-right corner of the portal to access your settings, and select Notification Preferences. Check the box for anything you'd like to receive emails for. (Note that Referral Notifications is referring here to authorizations.) In your settings, please also examine Event Settings to review notifications for other types of events.

How do I change my role and specialty type?

Your designated role and specialty types determine which kinds of messages you'll receive from Priority Health, so make sure they're up to date. In your settings, select **Roles and Specialties**. Search for **Staff Roles** and **Staff Specialty** types using the magnifying glass icon. You may select multiple for each. When you're done click **Accept**.

How do I change my default landing page?

In your settings, select **Set Default Page** and then navigate to the portal page you'd like to appear first when you log in. When you're there, click the **Set Default Page** button in the upper right.

How do I change my password?

In your settings, select **Change Password**. You'll need to enter your current password to select a new password. Note that your Site Administrators may also change your password through their accounts.

How do I see who my Site Administrators are?

In the Quick Links box on the home page of your portal, click the **My site administrators** link under the **General resources** heading. A pop-up listing your Site Administrators and their contact information will appear.

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If I'm a Site Administrator, how do I go to my Site Administrator functions?

Select **My Groups** on your portal home screen or select **Admin** on the top navigation bar. See currently affiliated users in the **My Groups** tab. Review requested affiliations in the **Account Requests** tab.

Terminology



What is Tapestry Link?

Tapestry Link is the Epic application that our Provider Portal is based on. For all intents and purposes, Tapestry Link is synonymous with the Priority Health Provider Portal.

What is a "site"?

A site is a point of affiliation in the Provider Portal. Each practice, hospital or provider group with a unique Type 2 NPI is a site. All users must be affiliated to at least one site to see any member data. Sites can have multiple affiliated users. Each site must have at least one Site Administrator to control affiliations.

Are "referrals" the same as authorizations?

Yes, "referral" is Epic's language for authorizations. This is reflected in various places in the new Provider Portal. **There is no change to Priority Health's longstanding policy of not requiring referrals for its members to receive covered services.** "Referral" is synonymous with "authorization" in the Provider Portal.

What's the difference between a referral ID and an authorization ID?

In the new Provider Portal, there are two reference numbers attached to an authorization request. You'll see a Referral ID (e.g., 4873) and an Authorization ID (e.g., US983). An initial authorization submission will generate a referral ID. The authorization ID is attached to the bed day or services requested. There could be multiple authorization IDs within one referral ID if you request additional days/units, etc. Note: if you have a question about a decision we've made on an authorization request, you should reference the **authorization ID** specific to that decision.

Is an "expiration date" the same as an "end date" for authorizations?

Yes, "expiration date" is Epic's language for "end date." They are synonymous.

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What are “CRMs”?

CRM, which stands for Customer Relationship Management, is Epic’s term for an inquiry (any time you ask us a question or raise an issue through the portal). Opening a CRM in the new Provider Portal is synonymous with opening an inquiry.

What are CMS and UB claims?

CMS is for professional/physician claims (outpatient office visits, services). UB is for institutional/facility claims (hospital, inpatient stays).

Communications, training & resources

How have these changes been communicated, and how will they be communicated going forward?

We began communicating about the new Provider Portal in [January 2026](#) via our provider newsletter, our provider news page and through prism notifications. We’ll continue to communicate via these channels, while also using email and various website and prism banners and pop-ups. We also have our [Provider Portal information page](#) for the most recent information.

What are the resources available for using the new Provider Portal?

Check out the links under the **Resources** heading on our [Provider Portal information page](#) for access to our digital and downloadable resources. These will include:

- Provider Portal user manual
- Account creation walkthrough video
- Portal Simulator slide deck (interactive by role type)
- Video module on basic portal navigation
- Quick user guides by topic

Will there be live training/education opportunities?

Yes, check out our offerings under the **Live training webinars** heading on the [Provider Portal information page](#). These will include offerings in June, July and August on account and site creation. In August and September, we’ll offer weekly trainings on using the Provider Portal for:

- Clinicians
- Authorization coordinators
- Front desk staff
- Billers
- General users & Site Administrators

MORE QUESTIONS?



We're here to help. Call our Provider Helpline at **800.942.4765** (Mon.-Thurs. 7:30-5; Fri. 9-5) or reach out to your assigned Provider Network Management specialist for additional questions. For technical assistance on using the portal or creating a site or account, contact the Priority Health tech support team at 800.942.4765, option 5, then option 1 (Mon.-Thurs. 8-6; Fri. 9-5).

