

QuickStart Guide

Note: Test data/information is displayed in the screenshots listed in this document

To create a new AMPM Record, Providers can navigate to <https://qmportal.azahcccs.gov/> to log in.

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1. Health Plan/TRBHA Account Verification

- Log in as a Health Plan/TRBHA user and click on the link titled OIFA in the lefthand navigation menu.

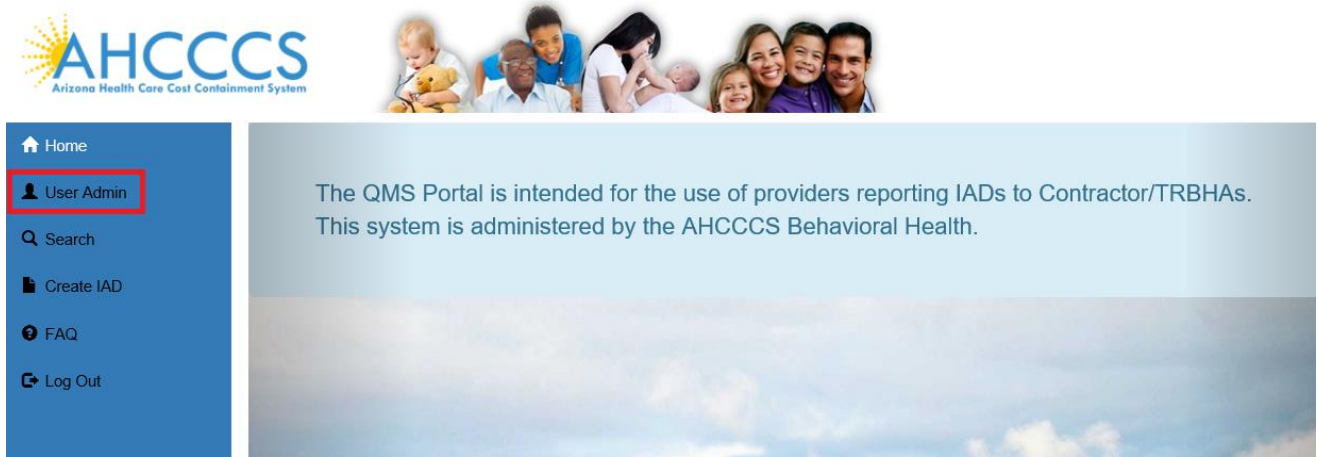
Thank you for visiting QM Portal. In order to use the site, you must have an active account. Please login or register a new account. For questions, please contact our Customer Support Center at (602) 417-4451 or contact ISDCustomerSupport@azahcccs.gov.

External User Log In	AHCCCS User Log In
<p>User Name <input type="text" value="trbhammic"/></p> <p>Password <input type="password" value="*****"/></p> <p>Sign In</p> <p>Forgot your Password? Click Here</p> <p>Create new account? Click Here</p> <p>Passwords are case-sensitive. After 3 failed attempts, within 15 minutes, your account will be locked out, and you will either need to contact your Master Account holder to unlock your account or use the Password Recovery feature.</p>	<p>If you are an AHCCCS employee</p> <p>AND you are currently logged onto the AHCCCS network</p> <p>AND you are accessing this application from a browser on your workstation</p> <p>Then click the button below to use this application with your network login credentials</p> <p>AHCCCS Sign In</p>

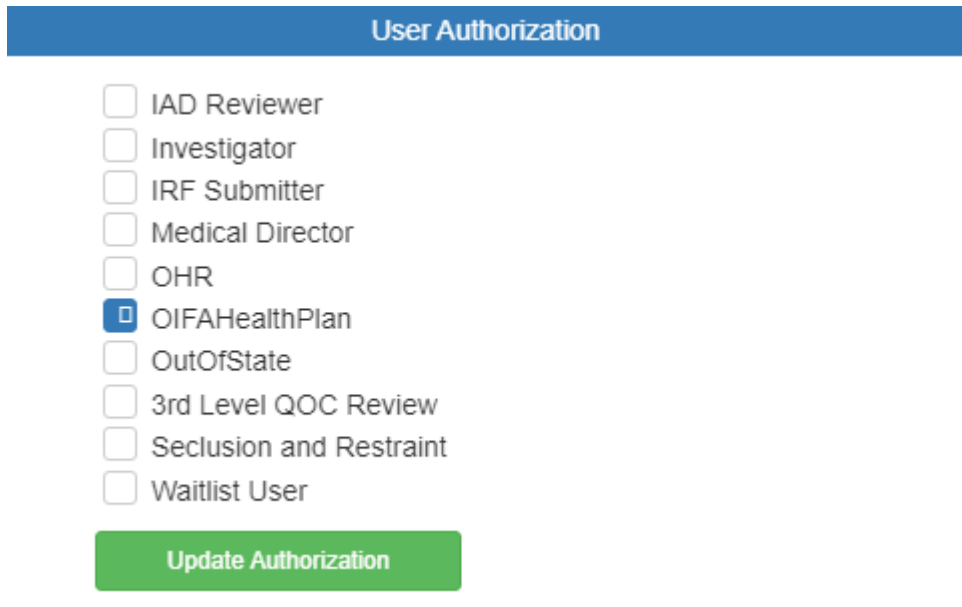
Your web browser must have JavaScript enabled in order to use the QM portal.

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- Click on the User Admin menu item in the lefthand navigation menu.



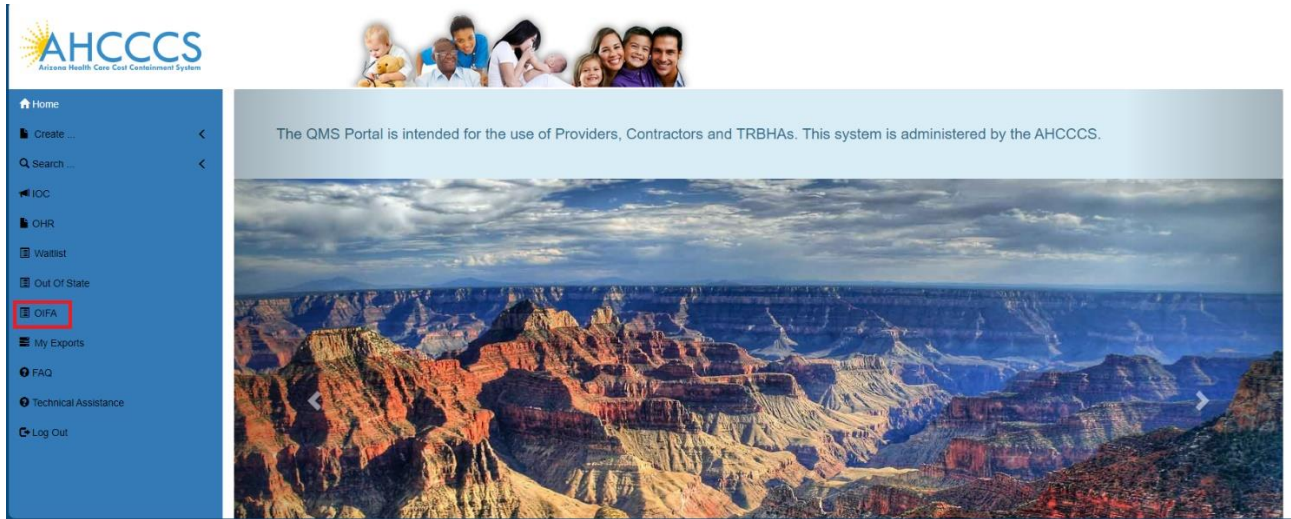
- On the User Admin page, confirm the OIFAHealthPlan role is checked in the User Authorization section.



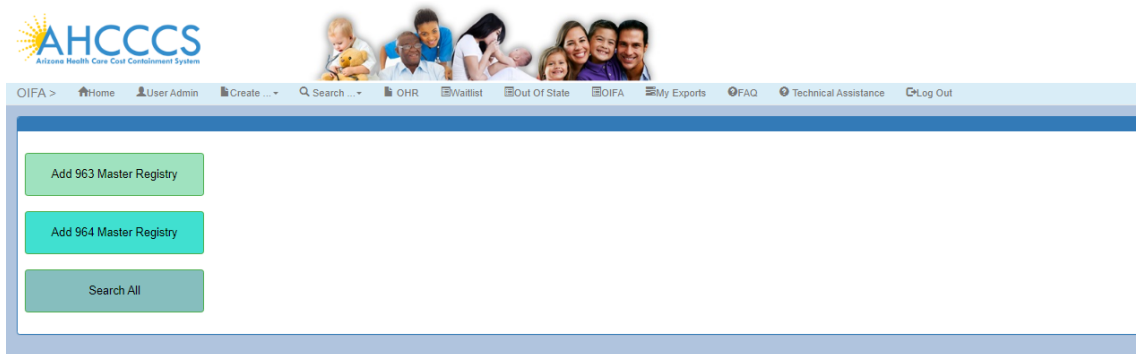
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2. 963 Master Data

- Log in as an Health Plan/TRBHA user and click on the link titled OIFA in the lefthand navigation menu.



- A landing page will display several options:
 - Add 963 Master Registry
 - Add 964 Master Registry
 - Search All



- Click on the Add 963 Master Registry option to add 963 master records.
- Enter data into the 963 Master Registry and click on the Save button to save the data.
- The saved record appears in a grid with an option to delete the record.

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AMPM 963 PRSS Master Registry

PRSS Training Program Name:

Interstate Reciprocity: Specialty:


Last Name: First Name: Date Of Graduation:

[Save](#)

This record was successfully Saved.

	RecordID	AgencyName	Interstate_Reciprocity	Specialty	LastName	FirstName	DateOfGraduation	DateCreated	CreatedBy
Delete	3264	PRSSTrgProgram	IR	GI	Nelson	Amy	1/1/2023	2/26/2024	HP_MonlinaMA

- If a 963 master record already exists, a message will be displayed if the user attempts to add a record with the same training program name, graduate last name, graduate first name and date of graduation.



AMPM 963 PRSS Master Registry

PRSS Training Program Name:

Interstate Reciprocity: Specialty:

Last Name: First Name: Date Of Graduation:

[Save](#)

A Master record with Program Name: PRSSTrgProgram Last Name: Nelson First Name: Amy Grad Date: 01/01/2023 already exists.

	RecordID	AgencyName	Interstate_Reciprocity	Specialty	LastName	FirstName	DateOfGraduation	DateCreated	CreatedBy
Delete	3264	PRSSTrgProgram	IR	GI	Nelson	Amy	1/1/2023	2/26/2024	HP_MonlinaMA

- A 963 Master Registry required field validation message is displayed if any of the following fields are not entered: Training Program Name, First Name, Last Name and Date of Graduation.

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AMPM 963 PRSS Master Registry

PRSS Training Program Name:

Interstate Reciprocity: Specialty:

LastName: FirstName: Date Of Graduation:

- Last Name is required.
- First Name is required.
- Date of Graduation is required.



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3. 964 Master Data

- Click on the Add 964 Master Registry option to add a 964 master record and click on the Save button to save the record.
- The saved record appears in a grid with an option to delete the record.

The screenshot shows the AHCCCS AMPM 964 PFS Master Registry form. The form fields are: PFS Training Program Name (PFS Test2), LastName (testin), FirstName (testfn9), and Date Credentialed (Date Of Graduation). A blue 'Save' button is visible. Below the form is a table with the following data:

	RecordID	ProgramName	LastName	FirstName	DateOfGraduation	DateCreated	CreatedBy
Delete	3065	PFS Test2	testin	testfn9	10/2/2023	12/25/2023	HP_MonlinaMA

A blue message at the bottom states: "This record was successfully Saved."

- A 964 Master Registry required field validation message is displayed if any of the following fields are not entered: Training Program Name, First Name, Last Name and Date Credentialed.

The screenshot shows the AMPM 964 PFS Master Registry form with the following fields: PFS Training Program Name (Arizona Complete Health), LastName, FirstName, and Date Credentialed (Date Credentialed). A blue 'Save' button is visible. A red validation message is displayed below the form:

- Last Name is required.
- First Name is required.
- Date Credentialed is required.

- If a 964 master record already exists, a message will be displayed if the user attempts to add a record with the same training program name, graduate last name, graduate first name and date credentialed.

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963 Master 964 Master Search

AMPM 964 PFS Master Registry

PFS Training Program Name:

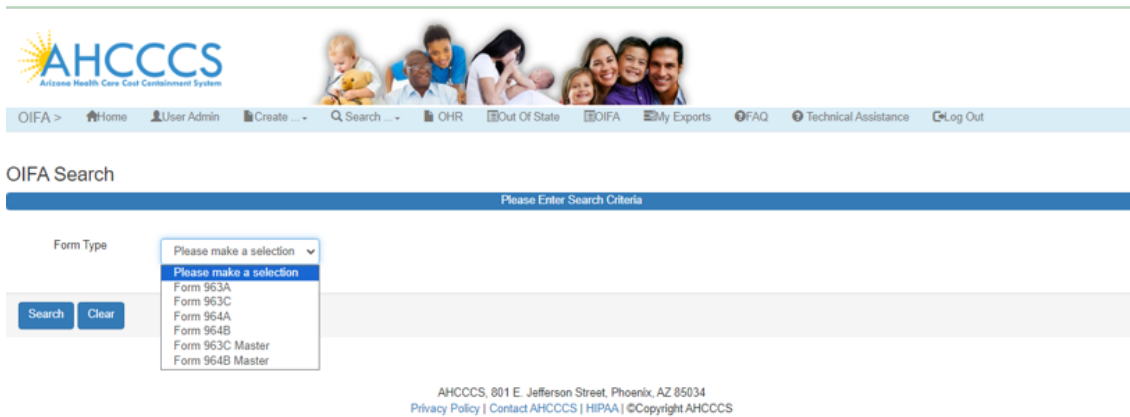
Last Name: ... First Name: Date Credentialed:

A Master record with Program Name: TPName964B Last Name: sdsf123 First Name: sdf9 Date Credentialed: 12/01/2023 already exists.

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4. Search and Export

- Click on the Search All option on the main landing page.
- Use the Form Type dropdown list to select from several search options: 963A, 963C, 964A,964B, 963 Master and 964 Master.



- Select an option from the Form Type dropdown list.
- Enter any search criteria into the available fields and click the Search button to view the search results.
- *** If search criteria are not entered, all records will be displayed.
- **** Health Plan users can only see the data submitted to their specific Health Plan.
- To export the results to a file, click the Export to Excel button.

OIFA Search

Please Enter Search Criteria

Form Type: Form 963A

Provider ID: Provider Name: Provider Address:

PRSS LastName: PRSS FirstName: Peer Support Training Program:

Dedicated PRSS: Date Credentialed (From): Date Credentialed (To):

Contracted Health Plan: 010500 - MOLINA COM Date Employed (From): Date Employed (To):

FTE: Date Employment End (From): Date Employment End (To):

BH Worker Category: Submitted (From): Submitted (To):

County: GSA:

Search Results

No. Of Records 13

Record ID	ProviderID	Provider Name	Provider Address	Servicing County	GSA	FFS Contractor Name	PRSS LastName	PRSS FirstName	Peer Support Agency	Date Credentialed	Date Employed	Date Employment Ended	BH Work Category	Hours Supervised	Hours Learning	Dedicated PRSS	FTE	Date Created	Created By
2859	559042	BENSON DR/SOUTHEASTERN AR	611 W UNION ST BENSON AZ 85602	Maricopa	Central	MOLINA COMPLETE CARE	Kimberly	Cox	Centpatco	10/02/2023	10/02/2023	10/17/2023	BHP	33	123	Y	Y	12/05/2023	SeaBHSMA2