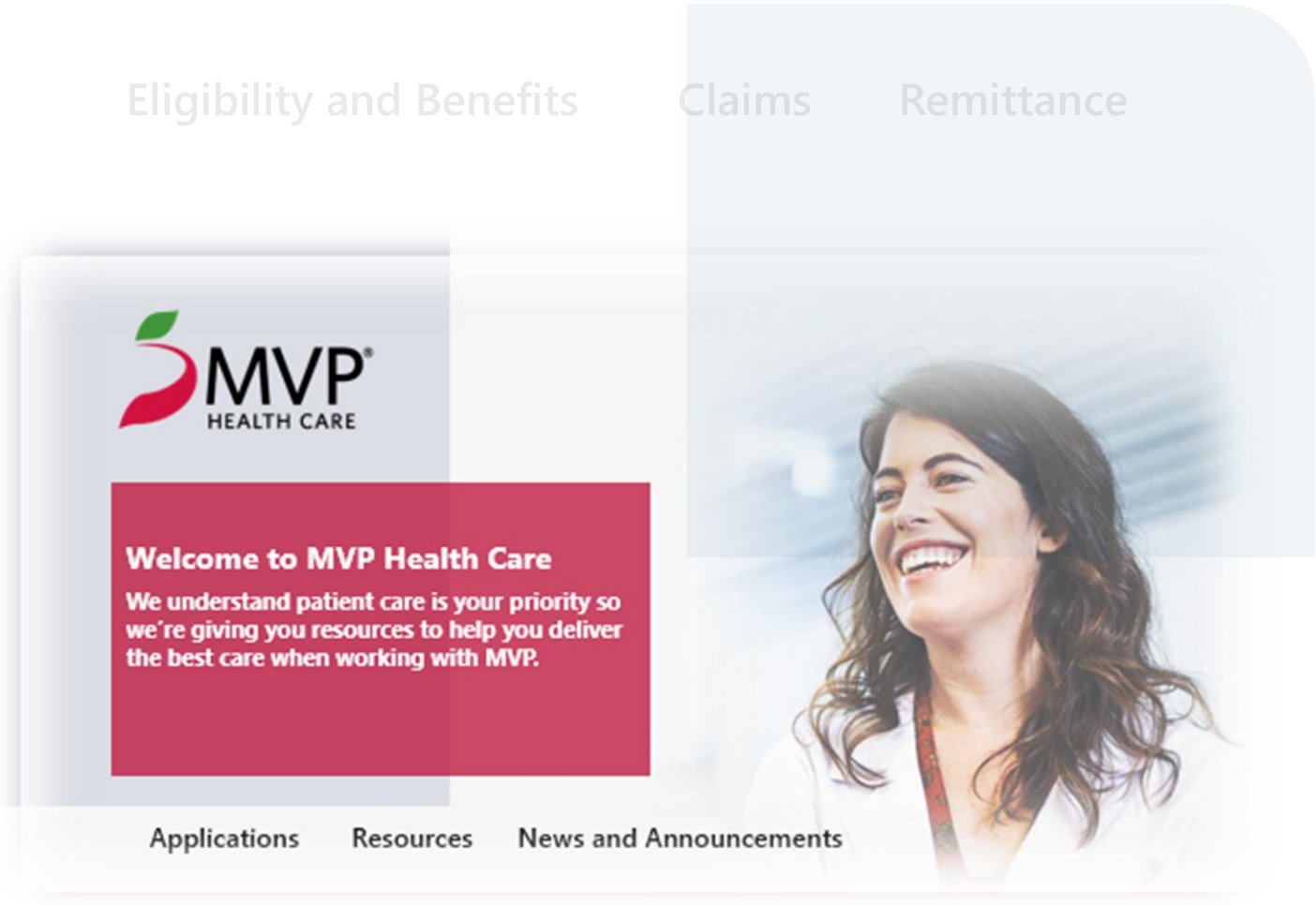
MVP Availity Essentials™ Provider Portal

Users Guide

This guide provides an overview of **Availity Essentials** and explains how Providers can use the MVP Health Care® (MVP) **Payer Space** to complete key administrative, clinical, and payment-related tasks. It is intended to help Provider organizations understand available applications, locate important resources, review news and announcements, and know where to go for support.



©2026 MVP Health Care

Table of Contents

 ©2026 MVP Health Care

Overview

Availity Essentials is a secure, web-based, multi-payer portal that connects health care Providers with health plans through one centralized platform. MVP introduced Availity Essentials as a Provider portal experience to simplify routine transactions, increase self-service options, and reduce reliance on phone, fax, and manual processes.

Through Availity Essentials, Providers who see MVP Members can complete several activities electronically, including eligibility and benefits inquiries, Member search, claim submission, claim status inquiry, and access to MVP-specific tools and resources through MVP's Payer Space.

Getting Started

1. Confirm whether your organization already has an Availity Essentials account.
2. If your organization is new to Availity, designate an Availity Essentials administrator. The administrator registers the organization, manages users, and assigns permissions.
3. If you are the organization administrator, go to **availity.com**, select *Portal Login*, and then select *Create Account*.
4. After registration, ensure users have the appropriate roles and permissions for the MVP workflows they need to access.
5. After signing in, use the secondary navigation bar to access applications such as Patient Registration, Claims & Payments, and Payer Space.

Core Availity Essentials

Eligibility and Benefits Inquiry

The Eligibility and Benefits Inquiry application allows users to submit patient benefit inquiries and receive detailed benefit information from MVP in real time. This tool helps offices confirm active coverage, review benefits, and understand member cost-share information before services are delivered.

How to access: In Availity Essentials, select *Patient Registration*, then *Eligibility and Benefits Inquiry*. Your organization's Availity Administrator must assign the appropriate Eligibility and Benefits role.

Member Search

Member Search helps users find and select the correct MVP Member before completing an eligibility and benefits inquiry. This can reduce manual data entry and help prevent errors when searching for Member information.

Claims & Encounters

The Claims & Encounters application allows users to submit professional, and facility claims electronically through Availity Essentials. Providers can enter claim information directly, submit claims to MVP for processing, and use templates to save time for repeat services or recurring claim scenarios.

How to access: Select *Claims & Payments*, then *Claims & Encounters*. Your organization's Availity administrator must assign the appropriate Claims role.

©2026 MVP Health Care

Claim Status Inquiry

The Claim Status Inquiry application allows users to check the status of previously submitted claims and review detailed claim processing information returned by MVP. This supports faster self-service follow-up and helps reduce the need for routine status calls.

How to access: Select *Claims & Payments*, then *Claim Status*. Your organization's Availity administrator must assign the appropriate Claim Status role.

Payer Space

Payer Space is where Providers can access MVP-specific applications, resources, and news within Availity Essentials. The MVP Payer Space brings together payer-specific tools, documents, links, and announcements in one location.

How to access: Select *Payer Space* from the Availity Essentials navigation, then select the MVP Health Care logo. Your organization's Availity administrator must assign the appropriate Base role or related permissions needed to access MVP's Payer Space.

MVP Payer Space Applications

Applications in MVP Payer Space give Providers convenient access to MVP and third-party tools that support prior authorization, clinical decision support, population health, payments, and other key workflows from one centralized location.

Application Overview

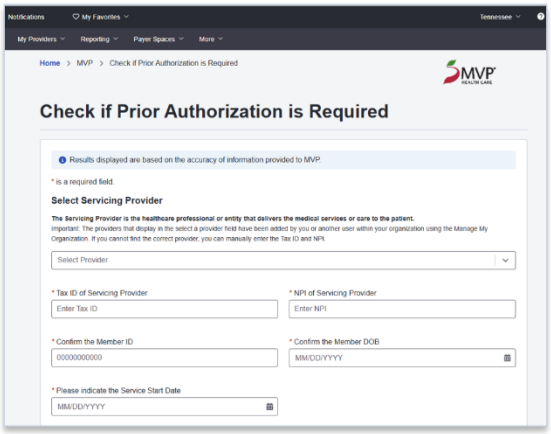
Application	Description	Contact Information
Check if Prior Authorization is Required (MVP)	Allows Providers to enter Member, Provider, and service details to determine whether MVP requires prior authorization before services are delivered. Results may include a reference ID for the inquiry.	For Check if Prior Authorization is Required or Clinical Decision Support, contact the MVP Customer Care Center for Provider Services at **1-800-684-9286.**
Clinical Decision Support (InterQual)	Provides access to clinical criteria that support evidence-based medical necessity reviews, care decisions, and documentation preparation.	For support contact the MVP Customer Care Center for Provider Services at **1-800-684-9286**.
Insights for Population Health Analytics (Arcadia)	Provides access to attribution lists, registries, Member insights, and care gap data to identify quality improvement opportunities and support population health management.	For support, Contact the MVP Arcadia Analytics Team at **mvpinsightssupport@mvphealthcare.com** or your MVP Provider Partnership Liaison.
Prior Auth – Genetic Testing (Avalon)	Connects Providers to Avalon to submit and manage genetic testing prior authorization requests and review guidance on coverage and requirements.	For support, contact Avalon's Call Center at **1-844-227-5769**.
Prior Auth – Medication (Novologix)	Allows Providers to submit pharmacy and medical drug prior authorization requests electronically through Novologix.	Questions about prior medication authorization submissions? Submit through NovoLogix or fax the completed MVP Prior Authorization Request for Medical and Pharmacy Benefit Medications form to **1-800-401-0915** for Medicare Advantage Members or **1-800-376-6373** for all other Members.
Prior Auth – Oncology (Optum)	Allows Providers to submit and manage medical oncology prior authorization requests through Optum.	Questions about Optum Oncology prior authorization? Contact the Optum Oncology Customer Care Center for Provider Services at **1-866-654-7432**, Monday through Friday, 7 a.m.–7 p.m. Eastern Time.

©2026 MVP Health Care

Zelis	Supports enrollment for electronic funds transfer payments from MVP Health Care, helping Providers receive payments more efficiently.	Questions about Zelis payments? Contact Zelis Payments Customer Support at **1-877-828-8770** for payment status, payment method, account information, portal assistance, EOR copies, 835 setup, payment research, reversals, refaxing payments, or reissuing checks.

Application Details

Check if Prior Authorization is Required

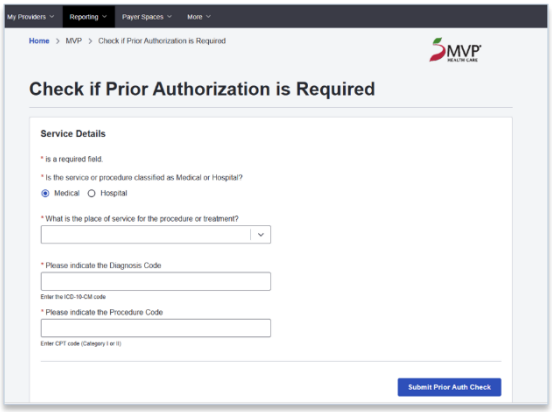


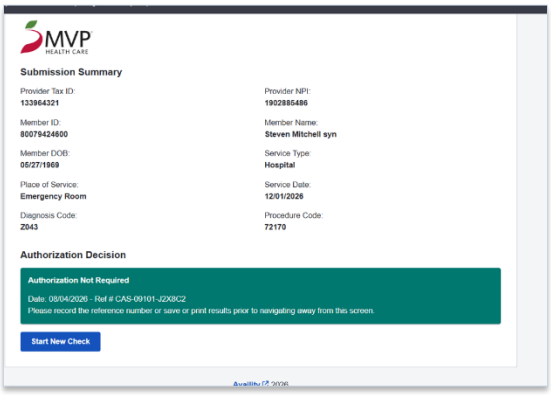
On this screen

- Select the servicing Provider from your organization's list, or enter the Tax ID and NPI manually Confirm the Member ID and the Member date of birth
- Enter the service start date
- Results reflect the accuracy of the information MVP has on file
- Provider missing from the list? Add them through Manage My Organization in Availity

On this screen

- Indicate whether the service is classified as Medical or Hospital
- Choose the place of service for the procedure or treatment
- Enter the diagnosis code (ICD-10-CM)
- Enter the procedure code (CPT Category I or II)
- Select Submit Prior Auth Check to see the decision





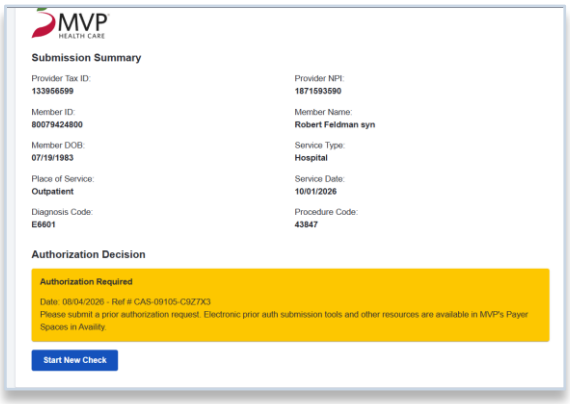
On this screen

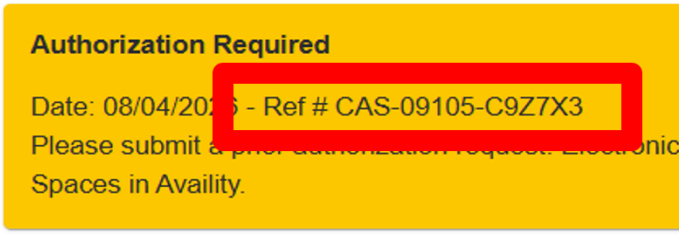
- Submission summary repeats the Provider, Member, service, and code details you entered
- A green banner confirms prior authorization is not required
- The decision date and a reference ID are shown for your records
- Record the reference number, or save and print, before navigating away
- Start New Check runs another inquiry right away

©2026 MVP Health Care

On this screen

- A yellow banner shows prior authorization is required for this Member and service
- The same decision date and reference ID are captured for your records
- You are directed to submit a prior authorization request
- Electronic submission tools and resources are available in MVP's Payer Space





Save or Print Your Reference ID

- If you need to contact MVP about this result, provide the Reference ID so Provider Services can review your response and result.

News and Announcements

The News and Announcements area in MVP's Payer Space is used to share timely updates with Providers. This may include portal updates, new application availability, training opportunities, upcoming events, maintenance notices, and reminders about changes that affect how Providers work with MVP in Availity Essentials.

Providers should review News and Announcements regularly to stay informed about newly added functionality, transition updates from the legacy MVP Provider Online Account, and changes to available resources or workflows.

Resources

The Resources area in MVP's Payer Space provides access to longer-term reference materials, links, forms, guides, training documents, and other information maintained by MVP. Resources may include how-to materials, reference guides, application support documents, policy or workflow information, and links to MVP provider web pages.

Examples of resources may include Availity getting-started information, training resources, application-specific user guides, prior authorization support materials, Arcadia analytics guides, genetic testing prior authorization materials, and links to MVP Provider Services support information.

Quick Reference: Where to Go

Need	Where to Go in Availity Essentials
Check eligibility and benefits	Patient Registration > Eligibility and Benefits Inquiry
Search for an MVP Member	Eligibility and Benefits workflow using Member Search
Submit a claim	Claims & Payments > Claims & Encounters
Check claim status	Claims & Payments > Claim Status
Access MVP-specific tools	Payer Space > MVP Health Care
Check whether prior authorization is required	MVP Payer Space > Check if Prior Authorization is required
Find training, guides, forms, and reference materials	MVP Payer Space > Resources

©2026 MVP Health Care

Training and Support

Training

Availity offers training resources for new and existing users. After signing in to Availity Essentials, select *Help & Training*, then Get Trained to access available live and recorded webinars, help topics, and training materials.

Support

For Availity registration or technical access support, Providers may contact Availity Client Services at **1-800-282-4548**, 8 a.m. to 8 p.m. ET, Monday through Friday.

For MVP workflow questions, Providers should contact their MVP Provider Partnership Liaison or Provider Relations Representative.

Additional Resources

Availity Learning Center User Guide

Availity Learning Center (ALC) User Guide

Availity Learning Center (ALC) User Guide

Availity Learning Center (ALC) Overview Video

Intro to Availity Essentials Video

Availity's Value to Providers Video

©2026 MVP Health Care