

The Practice Profile web tool allows you and providers in your practice to view, update, and attest to provider and practice demographic information on file with us. Information includes provider's name, NPI, email address, provider type, specialty, telehealth services, online scheduling, EMR system name, EMR direct address (if any), and practice location information. **Your submitted attestation will ensure your practice information is accurate on MSHP directories.**

Get Started

- 1. Log into the MSHP Provider Portal at https://mshp.mountsinai.org/web/mshp/login
- 2. Click on the **Practice Profile** application tile



3. You will be brought to the following screen to review, attest, and/or submit changes to your practice profile information.

	Mount Sinai Health Partners	PROVIDER PORTAL	NEWS & MEDIA	ABOUT	CONTACT	CAREERS	Q	SIGN OUT	
	Practice P Please review your pr click on "Review all C This attestation is ne "Practice Communica information helps to a plans' provider direct Need help? View thes the accuracy of your	actice's informati hanges/Submit" to cessary as part or stion" requirement ensure you are list ories. se guides for a des	o attest to y f MSHP's Cli t. What's mo ted correctly tailed walk-t	our prot nical In re, verif n our I hrough	file's acc tegratior ying you MSHP ar of how t	uracy. n Progran r nd health o attest t	n	0	
Tony Provide 1306834080				. 22		743	tal Updates		_
Important Note: Please r be saved. Provider Info	eview every provider's informati	on, advise of any change	s needed, and sul	omit your a	ttestation w	/hile logged ir	n. It you leav	/e this page, your progress will n	ot
Name:		NPI:				Email:			
Tony ProviderOne		1306834080				loktin.che	ung@moun	itsinai.org	



Review, Submit Changes, and Submit Attestation

Follow these steps to review and complete any requests for changes and submit your attestation when logged in to Practice Profile. You must click "confirm information" to save your changes.

Review your practice's information in the following fields and check for accuracy:

- Provider Info
- Patient Access
- Current EMR
- Locations

Tips:

- Names of providers in your practice will appear on the left sidebar of the page. Click on the name of the providers to view their information and submit changes as needed.
- You can also search for a provider using the **Search by Name** tool.
- Practice locations will appear on the left sidebar of the location section. Click on the name of the practice to view the practice information and submit changes as needed.
- You cannot add or remove practice locations, or change office manager information using this tool. To do so, please contact the MSHP Provider Engagement Team at <u>mshp@mountsinai.org</u> or by calling 877-234-6667.
- To help track your progress, copy will appear that a change has been requested for fields that are edited.

Multiple Provider View

Q Search Doctors X	Heather McGowan Total Updates O Confirm Information 1639245244 Important Note: Please review every provider's information, advise of any changes needed, and submit your attestation while logged in. If you leave this page, progress will not be saved. Provider Info				
	Name:	NPI:	Email:		
Dr. Doc Name 1	Heather McGowan	1639245244	hmcgowan@aol.com		
NPI:1234567890	Type: PCP	Specialty: Pediatrics			
Dr. Doc Name 2 reviewed with changes Dr. Doc Name 3 NPI:1234567890	Patient Access Do you offer telehealth services to your patients? Yes No Do you offer online scheduling to your patients? Yes No				
	Current EMR				
	Name:	EMR Direct Address:			
	MEDENT	drmcgowan@vpg.medentdirect.com			



Patient Access

- In the Patient Access section, please respond to the questions by selecting "Yes" or "No."
- If you select "Yes," a drop down will appear with platform options.
- Please select an option from the drop down list or select "Other" and write in a response.

Patient Access			
Do you offer telehealth	services to your patients?	What platform d	o you use?
• Yes	No	Epic	~
A change has been request	ted		
Do you offer online sche	eduling to your patients?	What platform d	o you use?
Yes	No	Other	
A change has been request	ted		

Submit changes

- To submit a change, click on the field you wish to update and type in the updated information.
- After you enter the information, confirmation text will appear below the field "A change has been requested" and Total Updates you made will appear on the upper right of the page.

Total Updates 1

A change has been requested

Tips:

- After you submit a change, remember to click the Confirm Information button on the upper right or bottom right of the page.
- If you have more than 1 provider at your practice, click **Go to Next Doctor** to view the provider's information and submit changes as needed.



	Confirm Information ?
Go to Next Doctor	Review all Changes/Submit
	Before you can submit, please review all information and save changes.

Note:

Office Manager Name, email, and phone number cannot be changed. To submit an update, contact our Provider Engagement Team at <u>mshp@mountsinai.org</u> or call 877-234-6667.

Locations and TIN cannot be added or removed. To add or terminate a TIN or practice location, submit your request using our <u>Data Change Form</u>.



Review all Changes/Submit

• If all the information is accurate and you made changes as needed, click **Review all Changes/Submit** at the bottom right of the page, to attest to the accuracy of the information.



review all information and save changes.

Final Review & Submit Attestation

- Review a summary of all the changes you made on the **Summary of Changes** page.
- If you need to submit any further changes before submitting your attestation, click on the "Back" link.
- If the summary of your changes are correct, submit your attestation by clicking the "Submit" button.

Tip: If you leave the page without clicking "Submit" your progress will not be saved.

- **Check your inbox** for an email from MSHP confirming your changes and attestation have been received.
- If further changes are needed, please refer to the section below.



Summary of Changes

You're about to take it to the finish line! Here's a summary of what you've changed. Click on the "Back" link to give further changes if needed before clicking the "Submit" button below to save and submit. If you leave this page without clicking "Submit", your progress will not be saved.

Tony ProviderOne

NPI:1306834080

PROVIDER INFO

Specialty: Pediatrics \rightarrow Internal Medicine

Practice Communication Attestation

I understand that attesting to the accuracy of my practice's profile fulfills the "Practice Communication" requirement of the MSHP Clinical Integration Program. I have reviewed and attest to the accuracy of the practice information displayed for all providers in my practices and, where relevant, I have entered updates to the displayed information.

SUBMIT	

Back

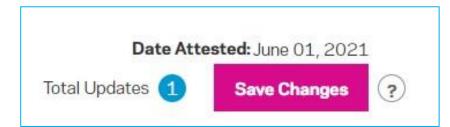
Submit Changes

Post-Attestation

 After attestation is complete, you can continue to submit updates to your information following the above steps. You **do not** need to re-attest. Instead just press submit after reviewing your changes.

Tips

- When you return to the Practice Profile, after submitting your attestation, the date you submitted your attestation will appear in the upper right of the page.
- After you submit changes, remember to click on the "Save Changes" button.
- To submit your changes, click on the Submit button.





Submit Changes

Please update my practice's information as documented above.

SUBMIT