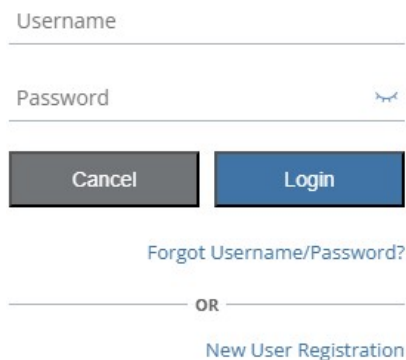


EZ Net Provider Access Request

1. Navigate to: <https://providerportal.elitecarehealth.com/EZ-NET60/login.aspx>
2. Click Login in the upper right corner of the screen

Login 

3. Click New User Registration



Username

Password 

Cancel Login

[Forgot Username/Password?](#)

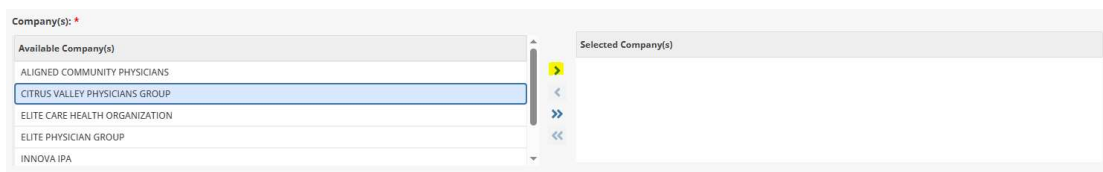
OR

[New User Registration](#)

4. Enter the following required entries:

Email
First Name
Last Name
User Name
Password
Confirm Password
Phone Number
Title
Department

5. Select CITRUS VALLEY PHYSICIANS GROUP from “Available Company(s) and click the right arrow to move the IPA name to the “Selected Company(s)”



Company(s): *

Available Company(s)		Selected Company(s)
ALIGNED COMMUNITY PHYSICIANS	>	
CITRUS VALLEY PHYSICIANS GROUP	<	
ELITE CARE HEALTH ORGANIZATION	>>	
ELITE PHYSICIAN GROUP	<<	
INNOVA IPA		

EZ Net Provider Access Request

6. Enter the Provider's NPI or Last Name * First Name and then click Search to search for available providers.

For each provider you would like access to click on the Provider in the left window and click the right arrow to move the Provider to the Left window.

Provider(s): *

Provider NPI: Provider Tax ID: Last Name: First Name:

Provider Name	Provider ID	Company ID
CA EYE CARE MANAGED	1699713099	CVPG

7. Respond to the Capcha confirmation and then click “Submit Request”

Type the letters you see in the below picture



8. You will receive an email from EZ-CAP@elitecarehealth.com to confirm your email address. Open the email and click on the “New User Confirm Email Address” link to confirm your email address.

**PROVIDER
PORTAL**

Dear Test Test,

To complete the New User Registration process, please click the below link:

[New User Confirm Email Address](#)

Do not Reply: This is auto generated Email.

Thanks,
EZ-NET Customer Support

You will be contacted within 5 business days regarding your request for access.