

Provider Portal Manual for





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Provider Portal 3.0

The Provider Portal, powered by HealthAxis is used by Beacon Health Solutions, the third-party administrator for Care n' Care of North Carolina's products: HealthTeam Advantage and Teal Premier.

This portal is a quick resource that allows Providers convenient access to member benefits and eligiblilty details and claim information.

How to Access the Provider Portal

Enter the following link.

Link:

https://htaprovider.prod.healthaxis.net/login

Note: The Provider Portal cannot be accessed through Internet Explorer, users must use Chrome.

• ONLY the provider/practice/vendor administrator should request access. Individual staff members will be provided access by their provider/practice/vendor administrator. Any individual staff members that request access individually, will be denied.

Provider Portal	
health team 《 Teal Premier	
Luser Name	
Password	
Remember my user name on this computer	
+∂ LOGIN	
% FORGOT PASSWORD? + REQUEST AC	CESS



Login credentials:

Should be emailed to you or provided by your supervisor or Systems Administrator

How to Request Access to the Provider Portal

	Provider Portal	
	비는 health team 《 Teal Prem 기다 advantage	ier
1	User Name	
•	Password	
Reme	ember my user name on this computer	
	+) LOGIN	
Q FORG	GOT PASSWORD?	+ REQUEST ACCESS

Click the "Request Access" button and the screen below will be displayed. Select "Continue" to proceed. Selecting "Back to Login" will return to the log-in page.

• NOTE: ONLY the provider/practice/vendor administrator should request access. Individual staff members will be provided access by their provider/practice/vendor administrator. Any individual staff members that request access individually, will be denied.

Health & Axis
Before You Register
If your office already has an active Provider Portal account, for this Health Plan, please contact your Provider Administrator. Your Provider Administrator has access to create additional Authorized User Accounts.
This registration is to request a Provider Administrator User Account only.
For any questions, please contact the Health Plan at HTAProviderServices@beaconh.com or (844)806-8217.



Selecting "Continue" will display the Provider Portal Access Request Form. New provider admin users should request access to the Provider Portal using this form. Fill all the details in the form and submit request to plan administrator. Each of the provider admins will have ability to create "User" accounts. NOTE: There are four possible user types, but vendor administrator is the option you should choose.

Provider Portal Access Request Screen					
Field Names	Select Provider Type Section – Field Descriptions				
+ Provider Porta STEP 1: Select Physician A	Access Request Provider Type dministrator				
Vendor Administrator/Group Administrator	The Vendor Administrator radio button should be selected for Vendor Group/Physician Group Practice Administrator level access. This user type will have access to all member information associated with all the physicians under the group practice. This user can also determine roles within the practice, and create/update/manage all portal users at their practice.				
Facility Administrator	Do Not Use: Facility Administrator radio button should be selected for Facility/Hospital Administrator level access.				
Physician Administrator	Do Not Use: Physician Administrator radio button should be selected for setting up an individual provider their own level access. This user type will have access to information limited to their members only.				
IPA Administrator	Do Not Use: IPA Administrator radio button should be selected for IPA Administrator level access.				



Field Names	Enter Tax I	D or NPI Section -	Field Descriptions
STEP 2: Enter Tax ID Tax ID Required	ax ID	STEP 2: Enter NPI NPI Required	NPI
Tax ID	In the Tax ID field, enter is displayed for Vendor A Note: System will validat notification: "Tax ID doe	the appropriate Tax I Administrators or IPA te the TIN is in HAX sy sn't exist in the system	dentification Number; this field Administrators only. stem. If not found, it will display n.
NPI	In the NPI field, enter the number; this field is disp Administrators only. Note: System will validat notification: "NPI doesn'	e appropriate NPI (Na layed for Physician Ad te the NPI is in HAX sy 't exist in the system.'	itional Provider Identifier) dministrators and Facility stem. If not found, it will display
Field Names	Create a User Nan	ne & Password Se	ction – Field Descriptions
STEP 3: Create a User Na User Name User Name	me & Password Password Password		Re-Enter Password
Required	Required		Re-Enter Password Required
Required User Name	Required In the User Name field, of alphanumeric characters Note: System will trigger name entered is already	create a user name, co s. r notification "Enter d in use.	Required Dontaining five or more ifferent User Name" if the user
Required User Name Password	Required In the User Name field, of alphanumeric characters Note: System will trigger name entered is already In the Password field, cr characters to include: 1 Character.	create a user name, co s. r notification "Enter d in use. eate a password cont Uppercase, 1 Lowerca	Re-Enter Password Required ontaining five or more ifferent User Name" if the user aining a minimum of six use, 1 Numeric, and 1 Special

Health Axis Group

Field Names	Enter Demographie	c Information Section – Field Descriptions						
STEP 4: Enter Demogra	phic Information							
Salutation	First Name	Last Name Middle Initial						
Select an Option	▼ First Name	Last Name MI						
	Required	Required						
Date of Birth	Email	Phone Number Ext						
Select Date	Email	() Ext						
Address 1	Address 2	Required						
Address 1	Address 2	City Select an Tip Code						
Required		Required Required Required						
Organization Name		Role/Title						
Organization Name		Role/Title						
Required		Required						
SUBMIT D RESET								
alutation	Select an optional Salutat	ion for the user from the drop-down list values.						
irst Name	Enter First Name of the us	ser. Note: Required field.						
ast Name	Enter Last Name of the us	ser. Note: Required field.						
Aiddle Initial	Enter Middle Initial of the	Enter Middle Initial of the user, if applicable.						
Date of Birth	The Date of Birth allows t using the calendar, or man MM/DD/YYYY.	he user to enter the correct birth date by either nually entering the date in the following format:						
Email	Enter an Email Address fo	or the user. Note: Required field.						
hone Number	Enter a Phone Number fo	r the user. Note: Required field.						
Ext	Enter an extension for the	e user's phone number, if applicable.						
Address 1	Enter the user's Address. Note: Required field.							
Address 2	Continue entering Address from Address 1 field, if applicable.							
City	Enter the City into the field. Note: Required field.							
itate	Select the State from the drop-down list. Note: Required field.							
Zip Code	Enter a valid Zip Code . No	Enter a valid Zip Code . Note: Required field.						
Organization Name	Enter the Organization Na	ame into this field. Note: Required field.						
Role/Title	Enter the user's Role or T	itle into this field. Note: Required field.						
Submit	Select Submit when all re	quired fields are completed.						
leset	Select Reset to clear the f	ields and re-start the form.						



Once the Administrator submits a request, a popup window as shown below will be displayed stating that your request has been submitted. The user will receive an email notification, once the Administrator approves their User Access.

** Be sure to check that this notification did not go into a junk/spam email folder.**

User Types Hierarchy

- 1. Administrator (Vendor Administrator is for a practice, provider, facility or ancillary provider) There can only be one (1) Administrator per NPI/Tax ID. Only the Administrator can complete the Request Access Form (login screen).
- 2. Provider Authorized Users (can be set up for billing staff, front office staff, providers, etc.) These are individual staff members that the administrator creates and approves access for.

Dashboard

The Dashboard is the landing page displayed once the user logs into the portal. The dashboard gives the user an overview of Announcements, Messages, and Recent Attachments.

Please note screenshots provided may show additional portal functions that are not active at this time.

Health%	Axis	Members Clai	ims 👻 Provi	ders Mainte	enance 👻	Adm	ninistration 👻	L Welcome -
📢 Annound	cements - 💿				~		Referral Highlights	~
Date ¢		Message ¢		Action			Authorization By Status	
		No data avai	ilable in table.				Approved	0
🖂 Message	es - Օ				~		Denied	0
From ¢	Category ÷	Subject ¢	Status +	Priority ÷	Date ¢		In Process	0
		No data avai	ilable in table.				Void	0
	ttachments				>		Total	0
							🛱 Hospital Census Data	>
© HealthAxis 2	2018							Version - 3.0.8.1
Edit/Updat	ite, 📋 - Delete	е						
Double clic	k on table i	row with icon	🖢 to view mo	re detail or s	elect.			



Members Module

The Member Module allows users with specific access to search and view member details for benefits, eligibility and claims level details.

Accessing the Member Module

Once logged into the system, select Members from the dashboard.



Member Search

Upon selecting "Members," the Member Search popup window will display. Users may search for members based on the filters provided in the following table.

However, the member search results are dependent on the user roles:

- User Admin: Can view all active members
- User Provider: Can view members that are tied to the PCP or can search by Member ID and other available criteria.
- User Facility/Vendor: Can search for all members but will need to enter Member ID and DOB or Medicare ID number.

Member Scr	een				
Field Names	Member Se	arch Section – Fiel	d Descriptions		
Member Search			Double click on row to select member.	×	
Member ID	First Name	Last Name	Member DOB		
Member ID	First Name	Last Name	Select Date		
Medicare ID	Line Of Business	Benefit Plan	IPA		
Medicare ID	Select an Option	* Select an Option	* Select an Option	*	
Q SEARCH O RESET	The Member ID allows users to en	ter the Member's ID r	de Euglieutry inquire	ΙΥ Ι	
First Name	irst Name The First Name field allows users to enter the member's First Name.				
Last Name	Last Name The Last Name field allows users to enter the member's Last Name.				
Member DOBThe Member DOB date field allows users to select the Member's DOB using the calendar feature or by manually keying the member's DOB in as follows: MM/DD/YYYY					
Medicare ID The Medicare ID field allows users to enter the Medicare Beneficiary Identifier (MBI) as part of the search criteria.				rt of	

Line of Business	The Line of Business field allows users to narrow the member search by selecting a line of business from the dropdown list.					
Benefit Plan	The Benefit Plan field allows users to narrow the member search by selecting a benefit plan from the dropdown list.					
IPA	The IPA field allows users to narrow the member search by selecting an IPA from the dropdown list.					
Search	The Search button allows users to launch the search functionality, based on criteria selected. The results will populate below the search section.					
Reset	The Reset button allows users to clear all data from the fields prior to saving.					
Eligibility Inquiry	The Eligibility Inquiry button allows users to send an inquiry requiring a member's eligibility. Upon clicking the eligibility inquiry button, the eligibility inquiry screen will appear as seen below:					
	A Eligibility Inquiry					
	Recipient Select One or More					
	Required					
	Category Priority					
	Other X * O Low O Normal O High O Urgent					
	Subject					
	Member Eligibility Inquiry from admin (Provider Portal)					
	Enter information for member. Provider, Member Name, DOB, Health Plan, Member ID and/or any other available information. Message Required SEND © RESET					
	Users can enter the recipient, category, priority and message. Upon clicking the send button.					
	the inquiry will be sent to the recipient entered.					

Member Search Screen

Field Names

Member Results Section – Field Descriptions

Member ID	Neme	000.0	Phone Number	MedicaneD	MedicarelD Type	Eff Date	Term Date	PEP	LOD	Benefit Plan	
					MBI	01/01/2017		HASTINGS, DULYNN			
					MBI	10/01/2016	10/31/2016	ALQUIZA, MARK			
					MBI	01/01/2017		SIECK, KEVIN			
					MBI	01/01/2016	12/31/2016	GARGYA, SUKUMAR			
					MBI	01/01/2017		RAMIREZ, SAMUEL			
					MBI	01/01/2016	12/21/2016	MILLER, DENVER			
					MBI	01/01/2017		MERCADO, MANUEL			
					MBI	01/01/2017		MILLER, DENVER			
					MDC	61/01/2017		ARANGO, LUIS			
					MRG	01/01/2016	11/30/2016	SHAHIN MOHAMMED			

Search Results	The "Search Results" heading tells the users how many records are displayed in the results table.
Export	The Export button allows the user to export the results data into an Excel format.
Results Table	The Results Table is a sortable display of data based on the search criteria specified and queried. To sort in ascending or descending order, click the header.
Member ID	The Member ID hyperlink allows the user to open and view the Member Details.

Member Information

Upon double clicking on the selected member from the grid, the member information will populate into the member information screen. The user can now view the Member's Information, Current Coverage, Coverage History, IPA/PCP Information, and Coordination of Benefits.

Member Infor	mation Screen			
		Member Infor	mation Section	
Member Information				
Name		Date Of Birth		Phone
Status		Age		Email Address
Member ID		Gender		Address
Medicare ID		Marital Status		Emergency Contact
Primary Language		Employment		Emergency Phone

The **Member Information** section allows users with specific access to view all active members' demographic information. This information is auto-populated from the HAX 2.5 Claims system and cannot be edited.

		Current Coverage Section
O Current Coverage		•
Health Plan	PCP	Benefit Plan Description
Line Of Business	PCP Eth	ty i
Benefit Plan	PCP Loc	05
IPA	PCP Pho	
Effective Date	POP Fax	
Termination Date	Primary	b
The Curren	n is auto-populated from the H	with specific access to view all active members' coverage. This X 2.5 Claims system and cannot be edited.



Contraction dependence Developer instancy operation Contraction dependence Bindta Data Tem Data Weak Pain Bindta Data Tem Data Bindta Data Tem Data Bindta Data Bindta Data Bindta Data Tem Data Bindta Data Tem Data Bindta Data Bindta Data Bindta Data Bindta Data Tem Data Bindta Data Tem Data Bindta Data Bindta Data Bindta Data Bindta Data Bindta Data Tem Data Bindta Data Bindta Data Bindta Data Bindta Data Bindta Data Tem Data Bindta Data Bindta Data Bindta Data Bindta Data Bindta Data Tem Data Bindta Data Bindta Data Bindta Data Bindta Data Bindta Data Bindta Data Administration Is auto-populated from the HAX 2.5 Claims system and cannot be edited. Bindta Data Bindta Data Bindta Data Administration is auto-populated from the HAX 2.5 Claims system and cannot be edited. Bindta Data Bindta Data Bindta Data Administration is auto-populated from the HAX 2.5 Claims system and cannot be edited. Bindta Data Bindta Data Bindta Data					Coverage His	tory Sectio	n		
Howespecified of Pair Lie of Pairs Bund Pair Bendt Pair Bendt Pairs Bendt Pair					Coverage mis	tory Sectio			
Line Data Data Management Description Description Description ember Information is auto-populated from the HAX 2.5 Claims system and cannot be edited. 123/2015 123/2015 PRACE History Rel Tem Data PA PCP Efforts PCP Interview 01/01/2015 PA Interview PCP Interview PCP Interview PCP Interview PRACE History PCP Interview PCP Interview PCP Interview PCP Interview PA PCP History PCP Interview PCP Interview PCP Interview PCP Interview PA PCP History PCP Interview PCP Interview PCP Interview PCP Interview PA PCP History PCP Interview PCP Interview PCP Interview PCP Interview PA PCP History PCP Interview PCP Interview PCP Interview PCP Interview PERCENT PCP Interview PCP Interview PCP Interview PCP Interview PCP Interview PERCENT PCP Interview PCP Interview PCP Interview PCP Interview PCP Interview PCP Interview PCP Interview PCP Interview PCP Interview PCP Interview PCP Interview PCP I	Coverage History		Line Of Dustry		aufia Man	Barrada Dian 10	Constant Dates	Torma Data	~
e Coverage History section allows users with specific access to view all active members' coverage his information is auto-populated from the HAX 2.5 Claims system and cannot be edited. ember Information Screen PMCP History Section PMCP History Section PMCP History Section PMCP History Section PMCP History Section allows users with specific access to view all active members' coverage history section allows users with specific access to view all active members' coverage history section allows users with specific access to view all active members' coverage history section allows users with specific access to view all active members' coverage history section allows users with specific access to view all active members' coverage historia information is auto-populated from the HAX 2.5 Claims system and cannot be edited. ember Information Screen Coordination of Benefits Section conditioned Benefits PMCP History Section	ion Plain		Line Of Busine	80 80	nemt Plan	Benefat Plan ID	01/01/2017	tem vate	50
e Coverage History section allows users with specific access to view all active members' coverage his information is auto-populated from the HAX 2.5 Claims system and cannot be edited.							01/01/2016	12/31/2016	н
e Coverage History section allows users with specific access to view all active members' coverage h is information is auto-populated from the HAX 2.5 Claims system and cannot be edited. ember Information Screen IPA/PCP History Section Ef Dots PA Tem Data PA PCP Ef Data PCP Tem Data PCP ID PCP Name 01/01/2015 HASTINGS, DULYNN e Coverage History section allows users with specific access to view all active members' coverage h is information is auto-populated from the HAX 2.5 Claims system and cannot be edited. ember Information Screen Coordination of Benefits Section							01/01/2015	12/31/2015	н
IPA/PCP History Section MACPP History C IPA PCP Eff Date PCP Term Date PCP PD PCP Name eff Oate PA Term Date PA PCP Eff Date PCP Term Date PCP PD PCP Name eff Oate PA Term Date PA PCP Eff Date PCP Term Date PCP PD PCP Name eff Oate PA Term Date PA PCP Eff Date PCP Term Date PCP PD PCP Name eff Oate PA Term Date PCP Term Date PCP PD PCP Name	ember li	nformation Sci	reen						
IPAPPCP History Section IPAPPCP History Section IPAPPCP History Section IPAPPCP History Section allows users with specific access to view all active members' coverage h is information is auto-populated from the HAX 2.5 Claims system and cannot be edited.									
IPAPCP History PA Term Date PA PCP Eff Date PCP Term Date PCP ID PCP Name 01/01/2015 01/01/2015 HASTINGS, DULYNN e Coverage History section allows users with specific access to view all active members' coverage h is information is auto-populated from the HAX 2.5 Claims system and cannot be edited. ember Information Screen Coordination of Benefits Section t Coordination of Benefits Vertfied					IPA/PCP Hist	ory Section	ו		
Eff Date PA Term Date PA PCP Eff Date PCP Term Date PCP ID PCP Name 01/01/2015 01/01/2015 HASTINGS, DULYNN e Coverage History section allows users with specific access to view all active members' coverage h is information is auto-populated from the HAX 2.5 Claims system and cannot be edited. Hastings, DULYNN									
e Coverage History section allows users with specific access to view all active members' coverage h is information is auto-populated from the HAX 2.5 Claims system and cannot be edited. ember Information Screen Coordination of Benefits Section	IPAPCP History (1)							
e Coverage History section allows users with specific access to view all active members' coverage h is information is auto-populated from the HAX 2.5 Claims system and cannot be edited. ember Information Screen Coordination of Benefits Section	PAPCP History ①) IPA Term Date	IPA	PCP Eff Date	PCP Term Date	PCP ID	PCP Name		8
Coordination of Benefits cy Number Plan Name Type Plan Group Eff Date Term Date Verified	PAPCP History () Eff Date	PA Term Date	PA on allow:	PCP Eff Date 01/01/2015 s users wit	PCP Tem Date	POPID s to view all a	PCP Name HASTINGS, D ctive members'	ulynn ' coverage hi	story
ky Number Plan Name Type Plan Group Eff Date Term Date Verified	IPAPCP History () Eff Date e Covera is inform ember li	IPA Term Date	PA on allow: pulated t	PCP Eff Date 01/01/2015 s users with from the H	PCP Term Date h specific access AX 2.5 Claims sy prdination of E	ROP ID s to view all a ystem and ca Benefits Se	PCP Name HASTINGS, D ctive members' nnot be edited.	utynn ' coverage hi	story
	IPAPCP History () Eff Data e Covera is inform ember li	IPA Term Date	PA on allow: pulated f	PCP Eff Date 01/01/2015 s users with from the H	PCP Term Date h specific access AX 2.5 Claims sy prdination of E	ROP ID s to view all a ystem and ca	PCP Name HASTINGS, D ctive members' nnot be edited.	utynn ' coverage hi	story
No data available in table.	IPAPCP History () Eff Date e Covera is inform ember li c Coordination of E	IPA Term Date	PA on allow: pulated f	PCP Eff Date 01/01/2015 s users with from the H.	PCP Term Date h specific access AX 2.5 Claims sy prdination of E	POP ID s to view all a ystem and ca Benefits Se Eff Date	PCP Name HASTINGS, D ctive members' nnot be edited. ction	ULYNN ' coverage hi	story
	IPAPCP History () Eff Date e Covera is inform ember II e Coordination of E icy Number	PA Term Date age History section hation is auto-poper nformation Sci Benefits Plan Name	on allow pulated t	PCP Eff Date 01/01/2015 s users with from the H. Coo	PCP Term Date h specific access AX 2.5 Claims sy ordination of E Plan Group No data availa	PCP ID s to view all a ystem and ca Benefits Se Eff Date	PCP Name HASTINGS, D ctive members' nnot be edited. ction	ULYNN ' coverage hi	story MS



Action Buttons

The Action Buttons at the top of the Member Information screen allows users to perform various tasks within the member information screen.

Member Info	rmation Screen					
Field Names		Ac	tion Buttons – Fie	Id Descriptio	ons	
	ATTACH	IMENTS	HCC/STAR	OUTREA	сн 🖶	PRINT
Claim	The Claim button Choices are:	n allows users	s to view all claims tie	d to the select	ed member.	
Attachments	The Attachment member. Upon	s button allow clicking the at	vs users to view/dow ttachment button, the	nload all attac e following pop	hments tied to oup window w	o the selected vill appear.
	Member Attachr	ments				×
	Type Fil	e Name	Description	Date	Uploaded By	
			No data available i	n table.		
HCC/Star	Future enhancer	ment.				
Outreach	Future enhancer	ment.				
Print	The Print button	allows users	to print the member	information so	reen.	



Claims Module

The Claims Module allows users to search claims using specific search criteria.

Accessing the Claims Module

Once logged into the system, select Claims from the dashboard.



The dropdown list for the Claims Module contains the following selections:



Search Claims

Search Claims

Upon clicking the Claims Module, the Search Claim Popup Window will appear.

Claim Scree	n		
Field Names	Search Claim	Section – Field Descrip	tions
Q Search Claim			~
Claim Number	Claim Status	DOS From	DOS To
Claim Number	Select an Option	▼ Select Date	Select Date
Member	Rendering Provider	Line Of Business	IPA
Member ID/Mem	hbe X Q FIND Provider ID/NPI/Prc X Q F	Select an Option	* Select an Option *
Institutional Ci Q SEARCH 0	alm (UB) 🗹 Professional Claim (HCFA)		
Claim Number	The Claim Number field allows the u criteria.	user to enter the claim numb	er as part of the search
Claims Status	The Claims Status dropdown list allo as part of the search criteria.	ows users to select the claim	status from the dropdown list
DOS From	The DOS From field allows users to s or by manually keying the date in as	select the date of service from follows: MM/DD/YYYY	n using the calendar feature

- Group

DOS To	The DOS To manually ke	field all eying the	ows user e date in a	s to select as follows:	the date of se MM/DD/YYY	ervice to using the cale Y	endar feature or by
Member	Q FIND Th Name) or cl Search pop	e <mark>Memb</mark> ick the F up windo	p <mark>er</mark> field a find butto fow as par	allows the u on (shown rt of the se	user to enter t to the left) to arch criteria.	the member's name (l select the member fro	ast Name, First om the Member
Rendering Provider	(Last Name, the Provide	e <mark>Rende</mark> i , First Na r Search	r <mark>ing Prov</mark> ame) or c popup w	i der field a lick the Fin vindow as _l	llows users to d button (sho part of the sea	o enter the name of th wn to the left) to sele arch criteria	e rendering provider ct the provider from
LOB	The LOB dro	opdown	list allow	s users to	select the LOE	3 as part of the search	criteria.
IPA	The IPA dro	pdown l	ist allow:	s users to s	elect the IPA	as part of the search o	riteria.
Institutional Claim	The Institut search crite	ional Cla ria.	aim chec	k box allow	/s users to sel	ect only institutional c	claims as part of the
Professional Claim	The Profess search crite	ional Cl a ria.	aim chec	k box allow	/s users to sel	ect only professional o	claims as part of the
Search	The Search selected. T Note: Clicki	button a he result ng Searc	allows us ts table w ch with n	ers to laun /ill populat o search c	ch the Claim S e below with r iteria will ret	Search functionality ba the respective data fie s urn all results.	ased on the criteria elds selected.
Reset	The Reset b	outton al	lows use	rs to clear	all data from	the fields prior to savi	ng.
Claim Scree	en						
Field Names			Claims	Results \$	Section – Fi	eld Descriptions	
Claim Search	ь.						# EXPORT
Claim Number	Cleim Statue	Cielm Type	005	Orig Rovd Date	Member	Rendering Provider	Vendor
	AA To Pay F	Professional	05/07/2018	05/08/2018			Saint Marya M
	AA Pend F	Professional	05/11/2017	05/11/2018			Tavarez Famil
	AA Pend P	Professional	01/10/2018	05/09/2018			Truepartners I
	AA Pend P	Professional	01/07/2018	05/09/2018			Plic Town Squ
	AA Pend F	Professional	01/18/2018	05/09/2018			Texoma Emer
Export	The Export b	outton al	lows the	user to ex	port the resul	ts data into an excel fo	ormat.
Results Table	The Results a queried. To	Table is sort in a	a sortabl scending	e display o or descen	f data based o ding order, cli	on the search criteria s ck the header.	specified and
Claim Number	The Claim No	umber h	yperlink	allows the	user to open	and view the claim de	tails.



Claims Information

Claims Review Screen

Upon double clicking on the selected claim from the grid, the claim review screen will be displayed. The user will be allowed to view the details of the member's claim selected.

The claims review screen consists of the following collapsible sections: member's information, member's current coverage, claim header, provider or facility information, claim process detail, claim details, coordination of benefits, attachments, authorization information, anesthesia, ambulance, and check details.

Note: Each section can be collapsed for easier viewing. This section is for review only, users will not be allowed to edit.

		Memb	per Information	Section	
m - 2017061200045817					
Member Information					
Salutation	Last Name	First Name	Middle Name	Suffix	Status
Salutation	Last Name Star	First Name Indian	Middle Name	Suffix Jr.	Status M01 - Active Member
Salutation Member ID	Last Name Star CIN Number	First Name Indian Date of Birth	Middle Name	Suffix Jr. Gender	Status M01 - Active Member Marital Status
Salutation Member ID AH0003	Last Name Star CIN Number 6555555555555555555555555555555555555	First Name Indian Date of Birth 01/01/2012	Middle Name Age 5	Suffix Jr. Gender Female	Status M01 - Active Member Marital Status Single
Salutation Member ID AH0003 Phone	Last Name Star CIN Number 6555555555555555555555555555555555555	First Name Indian Date of Birth 01/01/2012 Work Phone	Middle Name Age 5 Cell Phone	Suffix Jr. Gender Female Fax	Status M01 - Active Member Marital Status Single Email Address
Salutation Member ID AH0003 Phone (546)576-5877	Last Name Star CIN Number 6555555555555555555555555555555555555	First Name Indian Date of Birth 01/01/2012 Work Phone (546)433-3356	Middle Name Age 5 Cell Phone (566)666-6666	Suffix Jr. Gender Female Fax (454)545-4545	Status M01 - Active Member Marital Status Single Email Address
Salutation Member ID AH0003 Phone (546)576-5877 Primary Language	Last Name Star CIN Number 6555555555555555555555555555555555555	First Name Indian Date of Birth 01/01/2012 Work Phone (546)433/3356 Emergency Contact	Middle Name Age 5 Cell Phone (565)565-6656 Emergency Phone	Suffix Jr. Gender Female Fax (454)5454545 Address	Status M01 - Active Member Marital Status Single Email Address



			Current	t Covera	ge Sect	ion			
Current Coverage									~
Health Plan	Line Of Business	Benefit Plan		BP Effective Date		BP Term Date			
Access dental plan	Alliedhealth	AP2017		01/01/2017		12/31/2020			
IPA	IPA Effective Date	IPA Term Date	,						
Allied IPA	01/01/2017	12/31/2020	Data	PCP Term Date		PCP Location			
P00002076	Kumar, Saroj	01/01/2017	Date	12/31/2020		657 link road Miam	i Gardens, FL 33056		
Gender	Ethnicity	PCP Phone		PCP Extension		PCP Fax		Primary Lab	
Female		(765) 887-9	879			(678) 989-8989			
Benefit Plan Description									
									4
IIIIS Review	Screen								
iiiis keview	Screen		Clain	Header	Section	n			
	Screen		Claim	n Header	Section	n			
	Screen		Claim	n Header	Sectio	n			
im Header	Screen		Claim	n Header	Section	n			
m Header		.D≠) ◯ CHAMPVA (Member ID ≠) ◯	Claim	FECA BLK LUNG (ID#)	• Section	n			
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Im S Review im Header Medicare (Medicare #) Medic Iaim Number 201706120045817 ncounter	caid (Medicaid #) Tricare (D#Dc Batch	D#) CHAMPVA (Member ID #) (tatus Paid Page	Claim	FECA BLK LUNG (D#)	Section Other (D #) Header Level Pend	n	Total Charges		
Imis Review Imis R	caid (Medicaid #) Tricare (D#Do	D#) CHAMPVA (Member ID #) (tatus Paid Page	Claim	FECA BLK LUNG (D#)	Section other (D #) Header Level Pend	n	Total Charges \$50.00		
Imis Review Imis R	caid (Medicaid #)	ID#) CHAMPVA (Member ID #) tatus Paid Page irst Date Of Service	Claim	FECA BLK LUNG (D#) External ID Original Received Date	Section Other (D #) Header Level Pend	n	Total Charges \$50.00 Received Date		
Imits Review Imiteader Imiteader Imiteader Identicate (Medicare #) Medic Ialim Number 2017061200045817 Incounter No ecelved Type Paper Claim	caid (Medicaid #)	D#) CHAMPVA (Member ID #) tatus Paid Paid Irst Date Of Service 06/12/2017	Claim	FECA BLK LUNG (D#) External ID Original Received Date 06/12/2017	Section Other (D #) Header Level Pend	n	Total Charges \$50.00 Received Date 06/12/2017		
Imis Review Imies	cald (Medicaid #)	D#) CHAMPVA (Member ID #) tatus Paid Paid Irst Date Of Service 06/12/2017	Claim	FECA BLK LUNG (D#) External ID Original Received Date 06/12/2017	• Section	n	Total Charges \$50.00 Received Date 06/12/2017		
im Header Medicare (Medicare #) Medic faim Number 2017061200045817 ncounter No eceived Type Paper Claim	cald (Medicaid #)	D(F) CHAMPVA (Member ID F) tatus Paid Paid Irst Date Of Service 06/12/2017	Claim	FECA BLK LUNG (D#) External ID Original Received Date 06/12/2017	• Section	n	Total Charges \$50.00 Received Date 06/12/2017		
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Im Header Im Header Medicare (Medicare #) Medic Iaim Number 2017061200045817 noounter No eceived Type Paper Claim Iaim Member Information Is Patient Insured Person?	caid (Medicaid #)	D#) CHAMPVA (Member D #) [tatus Paid Irst Date Of Service 06/12/2017	Claim	FECA BLK LUNG (D#) External ID Original Received Date 06/12/2017	Conter (ID #) Header Level Pend	n	Total Charges \$50.00 Received Date 06/12/2017		
Im Keview Im Header Im Hea	caid (Medicaid #) Tricare (D#Do	D#) CHAMPVA (Member ID #) [tatus Paid Irst Date Of Service 06/12/2017	Claim	FECA BLK LUNG (D#) FECA BLK LUNG (D#) External ID Original Received Date 06/12/2017	Control of the contro	Date of Birth	Total Charges \$50.00 Received Date 06/12/2017	Gender	
Im Header Im Hea	caid (Medicaid #) Tricare (D#Do Batch S First Name	D#) CHAMPVA (Member D #) tatus Paid Paid 06/12/2017 Last Name Star	Claim	FECA BLK LUNG (D#) External ID Original Received Date 06/12/2017 Middle Initial	Section Other (D #) Header Level Pend	Date of Birth 01/01/2012	Total Charges \$50.00 Received Date 06/12/2017	Gender Female	
Im Header Im Hea	caid (Medicaid #) Tricare (D#Do Batch S First Name	D#) CHAMPVA (Member ID #) [tatus Paid Irst Date Of Service 06/12/2017	Claim	FECA BLK LUNG (D#) FECA BLK LUNG (D#) External ID Original Received Date 06/12/2017 Middle initial City	Control of the second s	Date of Birth 01/01/2012 State	Total Charges \$50.00 Received Date 06/12/2017 Zip Code	Gender Female Country	
Iminis Review Im	caid (Medicaid #) Tricare (D#Do Batch S First Name	D#) CHAMPVA (Member D #) tatus Paid Paid O6/12/2017 Last Name Star Address Line #2 Suit 23	Claim	FECA BLK LUNG (D#) FECA BLK LUNG (D#) External ID Original Received Date 06/12/2017 Middle Initial City tampa	Section Other (D #) Header Level Pend	Date of Birth 01/01/2012 State FL	Total Charges \$50.00 Received Date 06/12/2017 Zip Code 33626	Gender Female Country USA	
Iminis Review Im	caid (Medicaid #) Tricare (D#Do Batch First Name	D#) CHAMPVA (Member D #) tatus Paid Paid O6/12/2017 Last Name Star Address Line #2 Stat Address Line #2 Stat Address Line #2 Stat Health Plan	Claim	FECA BLK LUNG (D#) FECA BLK LUNG (D#) External ID Original Received Date 06/12/2017 Middle Initial City tampa Line of Business	Section Other (D #) Header Level Pend	Date of Birth 01/01/2012 State FL Product	Total Charges \$50.00 Received Date 06/12/2017 Zip Code 33626	Gender Female Country USA IPA	
Im Header Im Hea	County Hillsborough	D#) CHAMPVA (Member D #) tatus Paid Paid O6/12/2017 Last Name Star Address Line #2 Suit 23 Heath Plan Access denta	Claim Claim Claim (Suit/Apt.)	FECA BLK LUNG (D#) FECA BLK LUNG (D#) External ID Original Received Date 06/12/2017 Middle Initial City tampa Line of Business Alliedhealth	Section Other (D #) Header Level Pend	Date of Birth 01/01/2012 State FL Product Participating	Total Charges \$50.00 Received Date 06/12/2017 Zip Code 33626	Gender Female Country USA IPA Allied IPA	
Imits Review Imited and the address of the address	County Hillsborough Group Name	0.9) CHAMPVA (Member D. 9) tatus Paid Paid 06/12/2017 Last Name 06/12/2017 Last Name Star Address Line #2 Suit 23 Heath Plan Access denta Group ID	Claim	FECA BLK LUNG (D#) FECA BLK LUNG (D#) External ID Original Received Date 06/12/2017 Middle Initial City tampa Line of Business Alliedhealth Benefit Plan	Section Other (D #) Header Level Pend	Date of Birth 01/01/2012 State FL Product Participating Effective From	Total Charges S50.00 Received Date 06/12/2017 Zip Code 33626	Gender Female Country USA IPA Allied IPA Effective To	

Claim Member PCP Information				
PCP Plan ID	PCP Name	PCP NPI	PCP TIN	Taxonomy
P00002076	Kumar, Saroj mn M.D.	04/20/1970	01/07/1970	03/04/1970
Address Line #1	Address Line #2 (Suit/Apt.)	City	State	Zip Code
657 link road		Miami Gardens	FL	33056

The **Claim Header** section allows the users to view the Claim Member's Summary, the Claim Member's Information, and the Claim Member's PCP Information.

		Provider or F	acility Informatio	on Section	
Provider or Facility Info	ormation				
Rendering Provider:		Billing Vendor:		Service Facility	
Provider Number	Name	Vendor Number	Pay to Name	Location:	
P00009288	KIM, SHIN	V1000001	SAINT MARYS MEE	Provider Number	Name
Provider NPI	TIN	NPI	TIN	P00009288	KIM, SHIN
1821199068		1538424239	455557052	Provider NPI	TIN
IPA	Specialty	Address 1	City	1821199068	
		FILE 1463	PASADENA	IPA	Specialty
Address 1	City	State	Zip Code		
645 N ARLINGTON	RENO	CA	91199-1463	Address 1	City
State	Zip Code			18653 WEDGE PKV	RENO
NV	89503			State	Zip Code
				NV	89511
Referring Provider					
Provider Number	Name		Degree	NPI	TIN

The **Provider or Facility Information** section allows users to view the rendering and referring provider/facility information of the member's claim.



					Clai	m Pro	ocess	s De	tail So	ectio	on				
Claim Line	ltems														^
Status	Svc From	Svc To	СРТ	Mod1	Mod2	Mod3	Mod4	POS	ICD Dx	QTY	Freq Type	Billed	Allowed	Adjusted	Pri
Approved	05/07/2018	05/07/2018	77067	тс				49	А	1	Unit	\$311.50	\$103.21	\$0.00	\$0
eason	F0001 - PAYM	MENT BASED	ON FEE S	CHEDULE											
Approved	05/07/2018	05/07/2018	77080	тс				49	B,C	1	Unit	\$127.00	\$32.91	\$0.00	\$0
eason	F0001 - PAYN	MENT BASED	ON FEE S	CHEDULE											
											Total	\$438.50	\$136.12	\$0.00	\$0
															ſ
alms R	eview Sci	reen				Claim	n Deta	ails (Sectio	on					
	im Details	ition Related	To:	ent?		Claim	n Deta	ails (Sectio De	on Ites Pa	tient Unable	to work in To:	current oc	cupatior	
	im Details s Patient's Cond imployment Acco	reen ition Related	To: rto Accide	nt?		Claim	n Deta	ails (Sectio De Fr	on Ites Pa Iom:	tient Unable	to work in To:	current oc	cupation	
	im Details s Patient's Cond imployment Acc No Other Accident?	ition Related ident? Ar	To: nto Accide No ag Ben:	nt?		Clain Rel Info:	n Deta	ails (De De Fr	on ates Par om:	tient Unable zation dates	to work in To: related to	current oc current ser	cupation	
	im Details s Patient's Cond imployment Acco No Other Accident?	ition Related ident? At At	To: nto Accide No ng Ben: Yes	nt?		Claim Rel Info: Yes	n Deta	ails \$	De Fr He	om:	tient Unable zation dates	to work in To: related to To:	current oc current se	cupation	
	eview Sci im Details a Patient's Cond imployment Acco No Other Accident? No Patient Account	ition Related ident? Au A: Number	To: nto Accide No ng Ben: Yes	nt? Patient	t Status	Claim Rel Info: Yes	n Deta	ails (De Fri Fri	om:	tient Unable zation dates	to work in To: related to To:	current oc current se	cupation	
alms R	aim Details a Patient's Cond imployment Acc No Wher Accident? No Patient Account	ition Related ident? Ax As Number	To: nto Accide No Ig Ben: Yes	ent? Patient	t Status	Claim Rel Info: Yes	n Deta	ails (De De Fri Hit Fri	om: ntes Par om: om: rtside	tient Unable zation dates	to work in To: related to To: Lab C	current oc current sei tharges:	cupation	
	im Details s Patient's Cond imployment Acco No Other Accident? No Patient Account I Reserved For NU	ition Related i ident? At As Number	To: nto Accide No ig Ben: Yes	nt? Patient Additio	t Status	Rel Info: Yes	n Deta	ails	De Fri Fri Gu La	on ates Parom: ospitalit om: atside b?	tient Unable zation dates	to work in To: related to To: Lab C \$0.	current oc current se tharges: 00	cupation	
aims R	eview Sci im Details a Patient's Cond imployment Acc No Other Accident? No Patient Account Reserved For NU	ition Related ident? An As Number CC Use	To: nto Accide No ag Ben: Yes	ent? Patient Additio	t Status	Rel Info: Yes	n Deta		De De Fr He Cu Be	ntes Par om: om: utside b? No	tient Unable zation dates	to work in To: related to To: Lab 0 \$0.	current oc current se tharges: 00	cupation	
alms R	eview Sci im Details a Patient's Cond imployment Acc No Wher Accident? No Patient Account Reserved For NU Reserved For Loo	ition Related ident? Ar Ar Number CC Use	To: nto Accide ng Ben: Yes	Patient Additio Date of Pregna	t Status onal Clai f Curren incy (LN	Rel Info: Yes im Info+ it Illenes: vIP)	n Deta	or	De Fr He La Re	ntes Par om: utside b? No	tient Unable zation dates ssion Code	to work in To: related to To: Lab C \$0. Origin	current oc current se tharges: 00 onal Ref No	cupation rvices	

Claim Codes 🕕	
Dx Codes 2	
O ICD 9 🔘 ICD 10	
DX A	DX B
Z51.81 - Encounter for therapeutic	148.91 - Unspecified atrial fibril



Claims	Review S	creen											
				(Coordi	ination	of Be	nefits Se	ection				
Coordinat Othe Heat Plan Line Nam	ion of Benefits r h Other Heali e Policy/Grou	th Plan upNumber	Prior Payment	Balance Due	EST Amount Due	Primary Allowed Amount	Primary Paid Amount	Primary Deductable Amount	Primary Coinsurance Amount	Primary CoPay Amount	Primary Not Covered Amount	Primary With- Hold Amount	Adjust Amou
1		_	_	_		_	_	_	No data avail	able in tabl	e.		
The Coor	dination o	f Benef	i <mark>ts</mark> sectio	on allow	/s users	s to viev	v COB's	on the m	ember's cl	aim.			
Claims	Review S	creen											
				A	uthor	ization	Inform	mation S	ection				
Authorizat	ion Informatio	'n											^
Authoriza	tion Number	Referral I	Date	Арр	roved Date		Effective	Date	Expiration D	ate	No	rization Ove	erride
The Auth	orization I	nforma	tion sec	tion allo	ows use	ers to vi	ew autł	norization	informatio	on on tl	ne merr	nber's c	aim.
Claims	Review S	creen											
						Anest	hesia S	Section					
Ane	sthesia												
A	nesthesia Time	Туре	Start Date		Star	rt Time		End Date		End Tim	e		
The Anes	thesia sec	tion allo	ows user:	s to vie	w anest	thesia ii	nformat	tion on th	e member	's claim			



Claims F	Review Screen					
			Ambulance See	ction		
Ambulance						•
Pick-Up Details Facility		NPI	Drop-off Details Facility		NPI	
Address Line #1		Address Line #2 (Suit/Apt.)	Address Line #1		Address Line #2 (Suit/Apt.)	
City	State	Zip Code	City	State	Zi	o Code
Begin Miles	End Miles	Total Miles	Round Trip Description	Transport Reason	Patient Weight(lb)	Stretcher Description
The Ambu	ulance section allow	ws users to view ar	nbulance informatio	n on the mer	nber's claim.	



Providers Module

The Provider Module allows users search providers using specific search criteria.

Accessing the Providers Module

Once logged into the system, select Providers from the dashboard.

Health Axis Members Claims - Providers

Provider Search

Upon clicking the Provider Module, the Provider Search Popup Window will appear.

Provider Se	earch Screen				
Field Names		Provider	Search Section – Field Desc	riptions	
Provider Sear	ch			Double click on row to select pro	vider. X
Search By		Search for	Line Of Business	IPA	
Provider Numb	ber × *	Search Query	Select an Option	 Select an Option 	*
		Required			
City		Zlp Code	Specialty	Locality	
City		Δih	Select an Option	Select an option	
Search By	The Search By only display p NPI, Provider	y field contains a d roviders with spec Number and Orga	Iropdown list that can be utilized cific criteria. Choices are: Any Na nization Name.	l to narrow down a searcl ame, Last Name, First Nar	ו to ne, TIN,
Search For	The Search For fields corresponds to the selection chosen in the <i>Search By</i> field. EX: Smith				
	NOTE: An ent	try is required in t	his field, if a selection is made in	n the "Search By" field.	
Line of Business	The Line of Bu	u <mark>siness</mark> dropdown	list allows users to select a LOB	as part of the search crite	eria.
IPA	The IPA dropo	down list allows us	sers to select an IPA as part of th	e search criteria.	
City	The City field	allows users to en	ter the city as part of the search	criteria.	
Zip Code	The Zip Code	field allows users	to enter the zip code as part of t	he search criteria.	

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Specialty	The Specialty dropdown list allows users to select a specialty as part of the search criteria.
Locality	The Locality dropdown list allows users to select a locality as part of the search criteria.
Par Provider	The Par Provider radio button allows users to select only Par providers as part of the search criteria.
All (Par and Non-par)	The All radio button allows users to select both Par and Non-Par providers as part of the search criteria.
Search	The Search button allows users to launch the Provider Search functionality based on the criteria selected. The results table will populate below with the respective data fields selected. Note: Clicking Search with no search criteria will return all results.
Reset	The Reset button allows users to clear all data from the fields prior to saving.

Provider Search Screen

Field Names

Provider Results Section – Field Descriptions

	Search Result					± EXPORT
Par	Number	Name	LOB	Network	Specialty	Address
Yes	P00001204	Smith, David	HTAMCR	HTA_PAR	INTERNAL MEDICINE	1200 N. Elm St., Greensboro, NC 27401
Yes	P00001284	Smith, Christopher	HTAMCR	HTA_PAR	CHIROPRACTIC	300 Virginia Rd, Edenton, NC 27932
Yes	P00001580	Smith, Rebecca	HTAMCR	HTA_PAR	PEDIATRIC MEDICINE	1200 N. Elm St., Greensboro, NC 27401
Yes	P00001621	Smith, Steven	HTAMCR	HTA_PAR	CHIROPRACTIC	256 Third Ave. NW, Hickory, NC 28601
Yes	P00001761	Smith, Esther	HTAMCR	HTA_PAR	PEDIATRIC MEDICINE	301 E. Wendover Ave., Greensboro, NC 27401
Yes	P00001899	Smith, Roosevelt	HTAMCR	HTA_PAR	CHIROPRACTIC	4518 W Market St, Greensboro, NC 27407
Yes	P00001912	Smith, Alexis	HTAMCR	HTA_PAR	PULMONARY DISEASE	520 N. Elam Ave., Greensboro, NC 27403
Yes	P00001962	Smith, Tracey	HTAMCR	HTA_PAR	CHIROPRACTIC	1623 York Ave., High Point, NC 27265
Yes	P00002033	Smith, Virginia	HTAMCR	HTA_PAR	MIDWIFE	801 Green Valley Rd., Greensboro, NC 27408
Yes	P00002304	Smith, Leslie	HTAMCR	HTA_PAR	PEDIATRIC MEDICINE	861 Old Winston Rd., Kernersville, NC 27284
Yes	P00002483	Smith, James	HTAMCR	HTA_PAR	CHIROPRACTIC	2113 Glenburnie S Rd, New Bern, NC 28562
•						•
						← PREV NEXT→

Search Results	The Search Results heading tells the users how many records are displayed in the results table.
Export	The Export button allows the user to export the results data into an excel format.
Results Table	The Results Table is a sortable display of data based on the search criteria specified and queried. To sort in ascending or descending order, click the header.

Previous	The Previous button allows user to return to the previous page of the search results.
Next	The Next button allows user to skip to the next page of the search results.
Edit Pencil	The Edit (Blue) Pencil allows the user to open and view the message details.

Provider Information

Provider Information Screen

Upon double clicking on the selected provider from the grid, the provider information will populate into the provider information screen. The user can now view the Provider Information and the Provider Assignment Details.

Note: Each section can be collapsed for easier viewing. This section is for review only, users will not be allowed to edit.

		Pro	vider Inform	ation Section	ı		
Provider Information	ก						~
Provider ID	P00001204	Address 1	1200 N. Elm S	t. Na	ational Provider ID	1053429373	
Degree	NP	Address 2		Та	axonomy ID		
Name	Smith, David J	City	Greensboro	La	anguage		
Gender		State	NC	Pł	hone	(336) 832-804	40
Gender Organization Name e Provider Infor	mation section al	State Zip Code lows the user	NC s to view the c	Pł Fa demographics c	hone ax of the Provider.	(336) 832-804 (336) 832-809	40 99
Gender Organization Name e Provider Infor ovider Inform	mation section al ation Screen	State Zip Code lows the user	NC s to view the c rider Assign	PH Fa demographics o ment Sectior	hone ax of the Provider.	(336) 832-804 (336) 832-809	40
Gender Organization Name e Provider Infor ovider Inform	nation section al ation Screen	State Zip Code lows the user	NC s to view the o rider Assign	Pf Fa demographics o ment Sectior	hone ax of the Provider.	(336) 832-804	40
Gender Organization Name e Provider Infor ovider Inform	mation section al ation Screen	State Zip Code lows the user Prov	NC s to view the c rider Assign	PH Fa demographics o ment Sectior	hone ax of the Provider.	(336) 832-804	40
Sender Drganization Name e Provider Infor ovider Inform	nation section al ation Screen nt Line of Busines	State Zip Code Iows the user Prov	NC s to view the c rider Assign Billing Address	PH Fa demographics o ment Section	hone ax of the Provider. 1 Type Effective Date	(336) 832-804 (336) 832-809 Term Date	40 99 Sta



Administration

The administration module allows users with administrative privileges to manage user accounts in the Provider Portal. The user will have access to create, terminate or update a user level account details.

Accessing the Administration Module

Once logged into the system, select Administration dropdown list from the dashboard.



The dropdown list for Administration Module contains the following selections:

🚍 Activity Log
📢 Announcement
Preferences
Roles
🛔 Users

Activity Log

Administrators have full access to view activities through the Activity Log feature.

Administra	dministration Activity Log Screen							
Field Names		Activity Log Search	Section – Field D	escriptions				
Role Area		Action	User Name					
Select an Op	tion •	Select an Option *	User Name					
First Name		Last Name	From Date	To Date				
First Name		Last Name	04/27/2018	05/02/2018				
Q SEARCH	D RESET							
Role Area	The Role Area to include as p	dropdown list allows user part of the search criteria.	s to select the module	e or section of the provider portal				
Action	The Action dropdown list allows users to select the type of action to include as part of the search criteria.							
User name	The User Nam	e field allows users to ente	er a username as part	of the search criteria.				

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	and the second sec	

First Name	The First Name button allows users to enter the user's first name as part of the search criteria.
Last Name	The Last Name button allows users to enter the user's last name as part of the search criteria.
From Date	The From Date field allows users to select the "from date" of the activity log as part of the search criteria, by either using the calendar, or manually entering the date in the following format: MM/DD/YYYY.
To Date	The To Date field automatically defaults to the current date in the MM/DD/YYYY format.

Administration Activity Log Screen

Field Names

Activity Log Search Results Section – Field Descriptions

E Search Result - (31)										
User Name	Action Type	Area Name ÷	Message ÷	Log Date -	User Status					
jortiz Search Mainten ICD Cor		Maintenance ICD Code	ICD Code action search is performed by jortiz with search criteria ICD Type: ICD 10.	05/02/2018 11:33 AM	Active					
jortiz	Search	Maintenance ICD Code	ICD Code action search is performed by jortiz with search criteria ICD Type: ICD 10.	05/02/2018 11:33 AM	Active					
jortiz	Create	Maintenance Worklist	Worklist Test worklist1 has been create by jortiz.	05/02/2018 11:01 AM	Active					
jortiz	Search	Maintenance Worklist	Worklist data has been viewed by jortiz.	05/02/2018 10:59 AM	Active					
Search The Search Results heading tells the users how many records are displayed in the results table. Results										
Results The Results Table is a sortable display of data based on the search criteria specified and queried. To sort in ascending or descending order, click the header.										



Announcements

Announcements allows users to create announcement messages and send them to select user recipients or create and manage distribution lists.

Administration Announcement Screen									
Field Names	Announcement Section – Field Descriptions								
Distribution List	• MANAGE]							
Select an Option	1 *								
Recipient(s)									
Select One or M	pre	J							
Required Announcement M	essage								
Message Required									
Distribution List	The Distribution List dropdown list allows users to select from already created lists to see the announcement message to.	nd							
Manage	Selecting the Manage button opens a Manage Distribution List popup window, which allo users to create distribution lists by entering a Name for the list and assigning correspond Users.	ows ing							
	Manage Distribution List ×								
	Name Users								
	Distribution List Name Select One or More								
	Required Required								
	E SAVE D RESET								
	Last Modified Last Modified Name Users By Date								
	Test1 jortiz jortiz 05/02/2018 11:47:22 AM								
	Select Save to create the distribution lists with the completed required fields.								
	Select Reset to clear the values from the fields prior to saving.								

Reset	The Send button allows users to send the message to the entered recipient(s). The Reset button allows users to clear all data from the fields prior to saving.
Send	
Announcement Message	The Announcement Message field allows users to enter the details of the message being sent.
Recipient(s)	The Recipient(s) field allows users to enter one or more recipient names to send a message. Note: Required field

Field Names

Announcement Results Section – Field Descriptions

Is Deactivate?	Message	Recipients	Last Modified By +	Last Modified Date				
	test123	jortiz	jortiz	05/02/2018 11:47:53 AM				
ls Deactivate?	The Is Deactivate? checkbox allows users to deactivate the message so that it is no longer displayed for the indicated recipients.							
Results Table	The Results Table is a sorta queried. To sort in ascending	sults Table is a sortable display of data based on the search criteria specified and I. To sort in ascending or descending order, click the header.						



Roles

User can add a new role or choose the existing roles. Roles are tied to permissions which allows the users to navigate through the portal.

٨dm	inis	strati	on Role	s Screen						
Fiel Nam	ld es			Search Ro	oles Sectio	n – Field Desc	riptions			
Q Se	arch	Role						+ ADD NEW RO		
		Name ÷		Description ÷	Add Date =	Add By ÷	Last Modified Date	Last Modified By		
•	Ø	Vendo	r Admin	Vendor administrator default permissions	04/18/2018 8:55:20 AM	Admin, Super	04/18/2018 8:55:20 AM	Admin, Super		
Û	Ø	Facility	y Admin	Facility administrator default permissions	04/18/2018 8:54:43 AM	Admin, Super	04/18/2018 8:54:43 AM	Admin, Super		
Û	Ø	Physic	ian Admin	Physician administrator default permissions	04/18/2018 8:51:59 AM	Admin, Super	04/18/2018 8:51:59 AM	Admin, Super		
Û	Ø	Admin		Base Admin Account	01/22/2018 3:47:39 PM					
dd N ole	lew	,	The Add New Role button allows specific users to create new roles. The fields will be described in the following table.							
ame	5		The Name field allows users to narrow down the search criteria by entering a name.							
escr	ipti	on	The Description field allows users to narrow down the search criteria by entering a description of the role.							
dd D	Date	2	The Add	The Add Date field allows users to narrow down the search criteria by entering a date.						
dd E	By		The Add By field allows users to narrow down the search criteria by entering a date.				g a date.			
ast 1odi [:] ate	fied		The Last Modified Date field allows users to narrow down the search criteria by entering a date.							
ast The Last Modified By fields allows users to narrow down the search criteria by entering a us name.										
elete Icon The Delete Icon (red trash can) allows specific users to delete the selected user role.										
dit lo	Icon The Edit Icon (blue pencil) allows specific users to edit/update the selected user role.									



Administration Roles Screen								
Field	Field Add Roles Section – Field Descriptions							
names								
Health Axis Members Claims - Providers Administration -								
A Home > Q Search Roles	₩ Home > Q Search Roles > 🎍 Create New Role							
	Create New Role							
	Name Description							
	Name Description Required Required							
	Select Permissions							
	Activity Log READ							
	Claim READ EXPORT/PRINT ALL							
	Member READ EXPORT/PRINT ALL							
	Provider READ EXPORT/PRINT ALL							
	Role READ CREATE UPDATE DELETE ALL							
	User READ CREATE UPDATE DELETE ALL							
	E) SUBATI O RESET							
Name	The Name field allows users to enter a name for the role.							
Description	The Description field allows users to enter a description for the role.							
Select Permissions	The Select Permission section allows users to select the user's access within each module and section of the Provider Portal. User Roles are created with specific accesses that include: Read only, Create, Update, Delete, or ALL, among others settings per the corresponding modules.							
Submit	The Submit button allows users to submit the changes to the role.							
Reset	The Reset button allows users to clear all data from the fields prior to saving.							

Users

When a new user is creating an account in Provider Portal, then the user needs to request access, as described in the "How to Request Access to the Provider Portal" section.

Admin will be able to see the list of users requesting access under the 'Provider Access Request' section.

ł	😁 Provider Access Request													
		User Name	First Name	Last Name	Middle Name	Access Level	Email	Phone Number	Extension	User Type	NPI	Tax ID	Company Name	Requested Date
â	ľ	CenCal	Cencal	Test		Authorization, Claim	cencal@healthaxis.com			Provider	1861722134			05/22/2017 2:49 PN
Û	ľ	admin.test	Test	Test		Authorization, Claim				Provider	1811176480			04/26/2017 3:29 PN
<														÷



Admin can select the Edit Icon (Blue pencil) to open the request and will now be able to assign a 'Role' to the user from the "Role Name" dropdown list. Proceed to hit "Approve" if the request is valid or select "Deny" if invalid.

Note: The user requesting access to the provider portal will receive an email confirmation.

Create User From Request			
Salutation	First Name	Last Name	Middle Initial
Select an Option *	Test	User	MI
Date of Birth	Email	Phone Number	Ext
Select Date	jortiz@beaconh.com	(813)555-5555	Ext
Organization Name		Role/Title	
Testing Provider Portal Request		Test Role	
Address 1	Address 2	City	State Zip Code
5415 Mariner St	Ste 215	Tampa	Florida × × 33612
User Type	NPI	Line Of Business	
Physician Administrator 🗶 🔻	1003006503	HTAMCR ×	
User Name	Role Name	Password	Re-Enter Password
testingadmin	Select an Option *	Password	Re-Enter Password
	Required		
Provider(s) Available		Provider(s) Included	4.4
77	7	P00001001 - Jegede Olugber	
	Ψ		-
APPROVE PENY			