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## Revision History

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1.0 Chapter 1 - Registration Process

1.1 Completing the Registration Process

Use the steps below to create an account in the Provider Portal application.

Steps

1. From the Provider Portal home page, click the Create Account link.

2. Select the option corresponding to the type of information that you need to access.
   a. Information related to a single practitioner.
   b. Information related to a single facility, entity or group.
   c. Information related to a specific tax identification number.
3. Based on the option chosen in the previous step, select the option that best describes your organization.

Each user in the system is assigned a particular user role, which is tied to the person’s logon credentials. Access to functionality in the Provider Portal is based on the user role. Refer to the table for details on each user role.

Once registered, a person’s user role cannot be changed within the Provider Portal application. To change it, contact Customer Support for assistance.

- If you chose Single Practitioner, see 3a
- If you chose Single Facility, Entity or Group see 3b
- If you chose Specific Tax Identification Number, see 3c

3a (Single Practitioner)

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<th>What type of information do you need to access?</th>
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<td>Information related to Single Practitioner</td>
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<th>Which organization best describes you?</th>
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<tr>
<td>Provider Organization: I request and review prior authorization statuses for healthcare services for a single Provider Organization. (My organization has the ability to view Member Eligibility, view Claim Information and review Member Benefits)</td>
</tr>
<tr>
<td>Non-Medical Service Provider: I request and review prior authorization statuses for healthcare services for multiple Provider Organizations. (My organization has the ability to view Member Eligibility, view Claim Information and review Member Benefits)</td>
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<tr>
<td>Billing Organization: I am a billing company who is contracted to provide administrative services to a single Provider Organization, or a care system associated with a single Provider Organization. (My organization has the ability to view Member Eligibility, view Claim Information and review Member Benefits)</td>
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<tr>
<td>Delegate Billing Organization: I am a billing company who is contracted to provide administrative services to multiple Provider Organizations, or care systems associated with multiple Provider Organizations. (My organization has the ability to view Member Eligibility, view Claim Information and review Member Benefits)</td>
</tr>
<tr>
<td>Authorization Organization: I request and review prior authorization statuses for healthcare services for a single Provider Organization. (My organization has the ability to view Member Eligibility and review Member Benefits)</td>
</tr>
<tr>
<td>Delegate Authorization Organization: I request and review prior authorization statuses for healthcare services for multiple Provider Organizations. (My organization has the ability to view Member Eligibility and review Member Benefits)</td>
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3b (Single Facility, Entity or Group)
What type of information do you need to access?
-- Information related to Single facility, entity or group

Which organization best describes you?

- **Non-Medical Service Provider**: I request and review prior authorization statuses for healthcare services for multiple Provider Organizations. (My organization has the ability to view Member Eligibility, view Claim Information and review Member Benefits)

- **Billing Organization**: I am a billing company who is contracted to provide administrative services to a single Provider Organization, or a care system associated with a single Provider Organization. (My organization has the ability to view Member Eligibility, view Claim Information and review Member Benefits)

- **Delegate Billing Organization**: I am a billing company who is contracted to provide administrative services to multiple Provider Organizations, or care systems associated with multiple Provider Organizations. (My organization has the ability to view Member Eligibility, view Claim Information and review Member Benefits)

- **Authorization Organization**: I request and review prior authorization statuses for healthcare services for a single Provider Organization. (My organization has the ability to view Member Eligibility and review Member Benefits)

3c (Specific Tax Identification Number)

What type of information do you need to access?
-- Information related to specific tax identification number

Which organization best describes you?

- **Billing Organization**: I am a billing company who is contracted to provide administrative services to a single Provider Organization, or a care system associated with a single Provider Organization. (My organization has the ability to view Member Eligibility, view Claim Information and review Member Benefits)

- **Authorization Organization**: I request and review prior authorization statuses for healthcare services for a single Provider Organization. (My organization has the ability to view Member Eligibility and review Member Benefits)

- **Delegate Authorization Organization**: I request and review prior authorization statuses for healthcare services for multiple Provider Organizations. (My organization has the ability to view Member Eligibility and review Member Benefits)

4. Based on the selection in the previous step, enter the requested Provider Information fields (for example, NPI, Tax ID).
   - If role chosen is any role **other than Non-Medical Service Provider**:

   ![Provider Information](image)
• If Role chosen is **Non-Medical Service Provider**:

 ![Provider Information](image)

 If you need to change the type of information to access, click the **Change organization selection** down arrow and choose another option.

 5. Click **Continue Registration**

 6. Depending on the previous selections, enter the requested **Portal Information** and **User Information**, if applicable.

     • If Role chosen is **Provider Organization, Non-Medical Service Provider or Billing Organization**:

     ![Provider Information](image)

 7. Click **Continue Registration**

 8. Enter a **Password** and reenter it to confirm. Password requirements are:

     • Must contain 8-20 characters
• Must contain at least one uppercase letter, number and special character: _ . ! @ $ * - ?

NOTE: Passwords expire every 90 days

9. Select a question from the Security Question list, and then enter the answer in the Answer text box.

NOTE: The Answer field is case sensitive. If you use theForgot Password link in the future, the text in the Answer field must exactly match the text that you added here.

10. Click Continue Registration

Once the registration process is complete, a link will be sent to your email address.

11. Go to your email application, open the email message, and click the link specified in the email.

12. Accept the Terms of Use displayed.

13. Log in to the Provider Portal using your email address and password.
2.0 Chapter 2 – Getting Started

Use the information below to sign in and out of the application, to reset your password if you forgot it or it expires, and to review documentation conventions used in this guide.

This guide documents all of the capabilities in the system. Depending on your user security privileges, you may not have access to all of the functionality.

2.1 Signing In

Use the following steps to sign in to the application.

Steps

1. Click the Provider Portal link.

2. Enter your Email Address and Password in the corresponding fields.

   ![Sign In Form](image)

   **NOTE:** If you forgot your password or need to change it, refer to “Forgot Your Password” on page 11.

   **NOTE:** After five (5) failed password attempts, your account will be locked. You must wait 30 minutes before attempting to sign in again.

3. Click Sign In.

   **NOTE:** The session time-out is set at 30 minutes of inactivity, after which the application will automatically sign out.

The Provider Portal Home page displays:
2.2 Signing Out

To properly sign off the application, click **Sign Out** located in the *secondary navigation bar* in the top right portion of the application.

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2.3 Forgot Your Password

Use the Forgot Password link to if you cannot remember your password. This option will guide you through resetting your password so that you can enter a new one.

**NOTE:** Passwords expire every 90 days. If you allow the password to expire, you must contact Customer Support for assistance.

Steps

1. Click the **Forgot Password** link in the *Sign In* window.
2. On the *Forgot Password* window, do the following and then click **next**.
   a. Type your **email address** in the *Email Address (required)* field.
   b. Type the **code** displayed in the gray box into the *Text Verification (Required)* field. If you cannot read the code, click the refresh button.

3. When the password Security Question displays, type the correct **Answer**.
   
   **NOTE:** The Answer field is case sensitive and must exactly match the Answer you entered during registration.

4. Click **Send Password Reset link**. A password reset link is sent to the email address entered.

5. Go to your email application, open the email message, and click the link specified in the email.
6. On the New Password window, enter a new password in both the **Password** and **Enter Again** boxes, and then click **Save**. Password requirements are:
   a. Must contain 8-20 characters
   b. Must contain at least one each of the following: upper case letter, number and special character: _ . ! @ $ * = - ?

![New Password Window](image)

### 2.4 Documentation Conventions

- This user guide contains all of the procedures that can be performed in the Provider Portal. Access to functionality is based on your user role, therefore, you may or may not have access to all of the procedures in this guide. Refer to “About User Roles” on page 6 for more information.

- The user guide contains example screens that are to be used as general guidelines. They may not exactly reflect the information on your monitor.
3.0 Chapter 3 – Navigation

The main body of the application displays below the menu bar. In the right window pane, Quick Links (see “Using Quick Links”) and Need Assistance sections display.

The areas at the top of the application include:

**Primary Navigation Bar**

- **Home** - Used to return to the Provider Portal Home page
- **Eligibility** - Used to look up the eligibility information for a member

**Secondary Navigation Bar**

- Welcome, Mary Smith | Portal Home | My Account | Sign Out

---

**Primary Navigation Bar** – This menu bar is used to navigate the main functionality of the application and to return to the Home page.

- **Home** - Used to return to the Provider Portal Home page
- **Eligibility** - Used to look up the eligibility information for a member
- **Claim Status** - Used to review claims information for a member
- **Provider Education** - Used to access the Provider Portal User Guide and view provider-related resources, such as education materials, attestation materials and latest regulations.

**Secondary Navigation Bar** – This menu bar is in the top right portion of the application. It contains your username and links to the Provider Portal Home page, to your account information (see "My Account" on page 16) and to properly sign out of the system (see “Signing In and Out” on page 10).
4.0 Chapter 4 – My Account

Use the steps below to modify the information that you originally entered during the registration process, such as provider information, user information, password and security question.

Steps

1. Click My Account located in the secondary navigation bar in the top right portion of the application.

The My Account page displays

2. To modify Provider information, complete the following:
a. Click **Edit Provider Information**

b. Update the necessary fields. The Provider Role and Tax ID fields cannot be modified. To make changes to these fields, contact Customer Support for assistance.

c. Click **Submit** to save the changes or **Cancel** to erase them.

3. **To modify User information, complete the following:**

   a. Click **Edit User Information**

   b. Update the necessary fields. The Email Address cannot be modified. To change this field, contact Customer Support for assistance.

   c. Click **Submit** to save the changes or **Cancel** to erase them.

4. **To modify the Security Question, complete the following:**

   a. Click **Edit Security Questions/Answer**.

   b. Select a new Question from the list.

   c. Type the **Answer**. The Answer field is case sensitive. If you use the Forgot Password link in the future, the text in the Answer field must exactly match the text that you added here.

   d. Click **Submit** to save the changes or **Cancel** to erase them.

5. **To modify the Password, complete the following:**

   a. Click **Change Password**.

   b. Enter the new Password. It must contain 8-20 characters and at least one each of the following: uppercase letter, number, and special character _ . ! @ $ * = - ?

   c. Reenter the Password to confirm it.

   d. Click **Submit** to save the changes or **Cancel** to erase them.
5.0 Chapter 5 – Using Quick Links

The Quick Links section is located in the top right corner of the application. This area is where you can keep the links that you use most often. You can customize them using the add, edit and delete options. When you click a link in the list, the corresponding website opens in a new browser window.

5.1 Adding a Quick Link

Use the steps below to add a Quick Link.

Steps

1. Click the Add icon in the Quick Links box.
2. Enter the Name that you want to display in the Quick Links section of the window.
3. Enter a valid URL corresponding with the site or copy and paste the site’s URL in this field.
   
   **NOTE:** If any invalid URL is entered, the browser will not be able to display any web page or an alternative web page may display in the error.

4. Click Add.
5.2 Editing a Quick Link

Use the steps below to edit any Quick Link.

Steps

1. Click the Edit icon in the Quick Links box.
2. Edit the Name and URL fields as needed.

NOTE: If an invalid URL is entered, the browser will not be able to display any web page or an alternate web page may display in error.

3. Click Update.

5.3 Deleting a Quick Link

Use the steps below to delete any Quick Link.

Steps

1. Click the Delete icon in the Quick Links box.
2. Select the box next to the link to be deleted.
3. Click **Delete**.
6.0 Chapter 6 – Reviewing Eligibility

Use the Eligibility option to look up the eligibility information for a member. Information can include the products and plans, summary of benefits, and start and end dates for eligibility.

Steps:

1. Click **Eligibility** in the menu bar.
2. Enter information in all of the required fields: Subscriber ID, First Name, Last Name, and Date of Birth (MM/DD/YYYY).

   **NOTE:** The system will only retrieve exact matches for information entered in the Subscriber ID, First Name, and Date of Birth fields. The Last Name field searches on the first two characters entered.

The Eligibility Results page displays information pertaining to the member’s eligibility for the last two (2) years, if applicable.

The top portion of the page contains Member Information, while the bottom portion contains Eligibility Status information for the applicable products and plans.
Eligibility Inquiry Results

You can do the following on this page:

- Click the link (if available) in the Plan Description column to view the plan’s summary of benefit details.
- Click the Search for Member Eligibility link to return to the Eligibility Inquiry page to lookup another member.
- Click the View Claims for this Member link to go to the Claims Inquiry page to review claims for this member.
- Use the arrows next to a column heading to sort the column in ascending or descending order.
- Use the controls below the table to determine if there are multiple pages of information and to move between them.
7.0 Chapter 7 – Reviewing Claims

Use the Claims option to review claims information for a member. You can search for a claim by:

- Subscriber ID
- Claim ID
- Check number

7.1 Reviewing Claims by Subscriber ID

Use the steps below to view a list of claims based on Subscriber ID.

Steps:

3. Click Claims in the menu bar.
4. Select By Subscriber as the Search Method.

5. Enter information in all of the required fields: Subscriber ID, First Name, Last Name, and Date of Birth (MM/DD/YYYY).
NOTE: The system will only retrieve exact matches for information entered in the Subscriber ID, First Name, and Date of Birth fields. The Last Name field searches on the first two characters entered.

6. Use one of the following options for the Claim Date Range:
   - **Past 12 Months**: Show claims from the previous 12 months.
   - **Custom Date Range**: Enter dates into the Date Range From and Date Range To fields or select them from the pop-up calendar. You can only retrieve history for the past three (3) years, if applicable.

7. Click **Submit**.
   The matching claim or claims display in the Claims Results section. Only claim information related to your registered Tax Identification Number (TIN) and/or National Provider Identifier (NPI) displays.

8. To view details of a claim, click the **Claim ID link**. The information displays below the table.

9. If one exists, view a snapshot image of the remittance advice by clicking the **Reference ID link** in the Claim Specific Information section. If an image does not exist, the Reference ID will not display as a link.
10. Do any of the following on this page:

- Click the **Search for Member Claim** link to return to the Claim Inquiry page to lookup another claim.
- Click the **View Eligibility for this Member** link to go to the Eligibility Inquiry page to review eligibility information for this member.
- Click the **Export Claims** link to export Claims in a Microsoft Excel format.
- Use the arrows next to a column heading to sort the column in ascending or descending order.
- Use the controls below the table to determine if there are multiple pages of information and to move between them.

### 7.2 Reviewing Claims by Claim ID or Claim Status and Date Range

Use the steps below to view a list of claims based on Claim ID or Claim Status and Date Range.

**Steps:**

1. Click on **Claims** in the menu bar.
2. Select **By Claim** as the Search Method.
3. Use one of the following options to retrieve claims information:

- **Claim ID**: Enter a valid Claim ID.
- **Claim Status and Date Range**: Select a status from the drop-down list, and then enter a **Start Date** and **End Date** in the corresponding fields. You can only retrieve history for the past three (3) years, if applicable.

To view claim information, enter the following Subscriber information:

- **Subscriber ID**
- **First Name**
- **Last Name**
- **Date of Birth** (MM/DD/YYYY)

To view claims information, pick the type of inquiry to perform.

- **Inquiry By**
  - **Claim ID**
  - **Claim Status and Date Range**

Submit
4. Click **Submit**.

   If a specific Claim ID was entered, the Claim Specific Information for the claim automatically displays. If the inquiry was by Claim Status and Date Range, select the desired claim from the results list that displays to view the corresponding Claims Specific Information.

5. If one exists, view a snapshot image of the remittance advice by clicking the **Reference ID link** in the Claim Specific Information section. If an image does not exist, the Reference ID will not display as a link.

6. Do any of the following on this page:
   - Click the **Search for Member Claim** link to return to the Claim Inquiry page to lookup another claim.
   - Click the **View Eligibility for this Member** link to go to the Eligibility Inquiry page to review eligibility information for this member.
   - Click the **Export Claims** link to export Claims in a Microsoft Excel format.
   - Use the arrows next to a column heading to sort the column in ascending or descending order.
   - Use the controls below the table to determine if there are multiple pages of information and to move between them.
7.3 Reviewing Claims by Check Number

Use the steps below to view a list of claims based on Claim ID or Claim Status and Date Range.

Steps:

1. Click **Claims** in the menu bar.
2. Select **By Check** as the Search Method.

3. Enter a valid **check number** in the Check # field.
4. Click **Submit**.

5. If one exists, view a snapshot image of the remittance advice by clicking the **Reference ID link** in the Claim Specific Information section. If an image does not exist, the Reference ID will not display as a link.

   **NOTE:** The system displays history for only the past three (3) years, if applicable.

6. Do any of the following on this page:
• Click the *Search for Member Claim* link to return to the Claim Inquiry page to lookup another claim.

• Click the *View Eligibility for this Member* link to go to the Eligibility Inquiry page to review eligibility information for this member.

• Click the *Export Claims* link to export Claims in a Microsoft Excel format.

• Use the arrows next to a column heading to sort the column in ascending or descending order.

• Use the controls below the table to determine if there are multiple pages of information and to move between them.
8.0 Chapter 8 – Reviewing Provider Education

The Provider Education page contains materials, such as video and PDF files, some of which you may be required to view. This page also contains other helpful reference links.

All files open up in a separate browser window. If the video or PDF requires attestation, you will be instructed to click the Acknowledge button on the page to confirm compliance and receive the proper credit.

Steps:

1. Click Provider Education in the menu bar.
2. Click the link corresponding to the file to open it. The information will display in a separate browser window.
3. If the information requires attestation, the Acknowledge button displays after the file is opened. Click Acknowledge after viewing the file.
## 9.0 Appendix

### 9.1 Glossary

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## 10.0 Document Approvals

### 10.1 Signatures

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