

# **Fast Facts**

**DECEMBER PROVIDER PORTAL SPECIAL EDITION 2022** 

Tips & Tricks for Providers from HealthPartners Provider e-Services

# Provider resources

Online provider resources, tools, and tips to help you to get the information and answers you need in a jiffy.

Whether you've never signed in before, or if you use it every day, the **Provider Portal** has easy-to-use applications and some hidden gems to save you time. Save this reference for later to help you avoid long wait times on the phone.

## Find member eligibility and benefits

The Eligibility Inquiry application allows you to find additional online benefit descriptions, benefit limits, remaining visits and much more. Here are a few key tips for getting the most detailed answers.

#### **USE DETAILED SEARCHES**

The more you put in, the more you get out. **By including your provider/org name, practitioner, and specific dates** your eligibility and benefit results will accurately display **network status** (In Network) and the appropriate benefit tier.

Deductible	Out-of-pocket	
No deductibles found	No out-of-pocket found	
• Indicates more benefit information is available  Benefit name.	Benefit grid returns in Network and benefit level/be Level 1	
Individual OOP Max	\$2500.00	
Family OOP Max	\$4500.00	

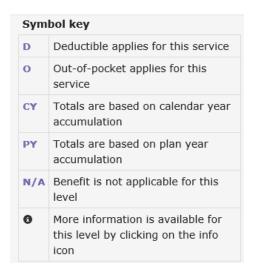
### **INSIDE THIS ISSUE** Page 1 **Eligibility and benefits** Coverage dates, service benefits, benefit meters/member liability, network/care type Claims and payment tools Inquire on a claim, get payment details (remittance), estimates, coding questions Prior authorizations and referrals 4 Submit a P/A request or referral, review the status, determine if a P/A is required Help patients find you 5 Provider data profiles let you manage your organization's data online Other time-saving tools 5 Be cyber smart! 6 Don't have a Portal account yet? 6 Registration tips

### We're here for you!

Visit the **Contact us** page to find the right contact for different topics.

#### **HOVER FOR EXPLANATIONS**

Any time you see data underlined you can hover on that word for more detail.

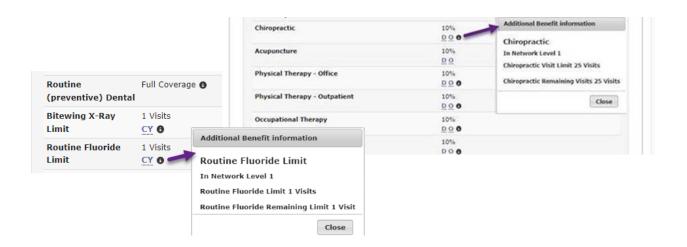




- Deductible/out-of-pocket amounts and when they apply to a benefit.
- These symbols provide more contextual information regarding accumulators.

### **9** CLICK FOR MORE INFORMATION

Look for the information icon 1 next to a benefit for more detail.



#### IN THE COVERAGE OVERVIEW

**View member card** – see an image of the member's insurance card.

View member card - 3502 7

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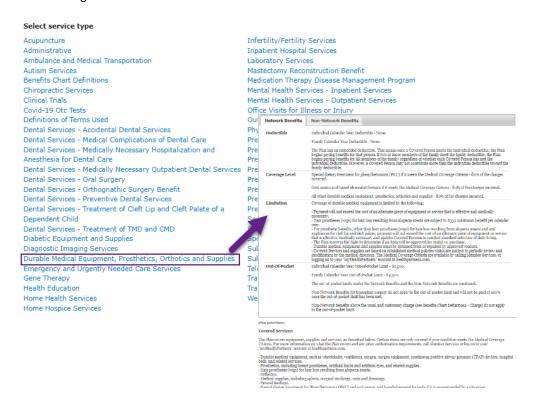
#### IN THE COVERAGE DETAILS SECTION

Look for these additional links:

View policyholder information View additional benefits View coverage criteria

View policyholder information – shows who the policyholder is for this coverage.

**View additional benefits** – provides more specific details on benefits like therapy visit limitations, dental service details, DME coverage and limitations.



**Care Type:** Did you know Care Type displays on the member's card and in eligibility results?



The member's **Care Type** displayed in Coverage Details indicates their **provider network**.

Coverage details				
Type of coverage	Medical	Relationship	Self	
Group #	3502	Package code	SI471	
Benefit record start date	01/01/2022	Benefit record end date		
Coverage start date	01/01/2022	Coverage end date		
Care type	Distinctions III			
Product	HP Distinctions Open Access SI Choice III			

## Claims and payment tools

#### FIND EVERYTHING YOU NEED TO KNOW ABOUT CLAIMS AND PAYMENTS

- Remittance Inquiry/EOP/payment details Review the claims associated with your payment. Simply search by a check number or review payments associated with your facility. You can also opt in for email notifications when a new remittance is available.
- Claims Status Inquiry See if your claims have been received and where processing stands, including codes to describe approved, denied and pending status.
- Claims Estimator Get an accurate, real-time estimate for outpatient services using the member's benefits and contracted rates to know how much the plan will cover and what the member will pay out of pocket. This is useful when eligibility is not specific enough for your specific needs.
- Clear Claim Connect (C3) Review coding edits to determine appropriate codes to use before submitting a claim.
- **Fee Schedules** Question regarding the reimbursement rate on your claim? You and your staff can log in to review professional fee schedules for State Public Programs and Medicare.
- **Electronic connections** Addresses all your electronic data exchange needs.
  - Clearinghouses and Payer ID: Sending claims electronically to HealthPartners? See a list of approved clearinghouses and Payer IDs.
  - o Electronic Funds Transfers (EFT/ACH): Want to get paid faster? Sign up for electronic payments.



Bookmark the Claim Submission Quick Reference Guide. It has options for various types of claims submissions and corrections. When you're ready to submit, use our easy online claim forms for adjustments, appeals, attachments and correspondence.

## Prior Authorization (PA) and Referrals

The one-stop *Authorizations and Referrals* application has everything you'd expect. Start here and check back to make sure your patients get the care they need.

- Verify PA requirements and coverage criteria policies (available without signing in!).
- Find fillable PA request forms (available without signing in!).
- Submit a new PA request and check the status of previous PA requests.
- Submit a referral.
- Check the status of referrals made to you, including details like services included, number of units approved, comments and more.

## Help patients find you

Patients rely on website search tools to find care. More often, they're looking for information on location and specific services combined with clinicians' race, ethnicity, languages spoken and gender. Something as simple as an incorrect phone number can frustrate a patient. Finding a doctor is the number one reason our members use healthpartners.com. You can make sure they get the most current information about your practice and clinicians by updating your profiles online.

**Provider Data Profiles** – This application allows you to update your practice's details, add and update practitioners, specify clinicians' specialized training and experience, update location address, directions and even a link to your website. The information feeds directly into HealthPartners website and member directories. After you've made your updates online, save time and download a prefilled MN Uniform Change form to submit to other payers.

Identify patient-friendly services such as telemedicine, interpreter options, onsite imaging technology and other clinic services. By identifying the services your clinics and locations provide, HealthPartners members will be able to find your clinic under more search options on the HealthPartners online clinic search tool.



After you've made your updates online, save time and download a prefilled MN Uniform Change form to submit to other payers.

### Don't miss these other time-saving tools

The Portal has many other common resources needed to do business with HealthPartners. Access information quickly and easily when it fits in your schedule.

- Forms for providers
- Credentialing resources:
  - Submit credentialing application online
  - Credentialing inquiry to check the status of an application
- Policy information
  - Medicare policies
  - Administrative policies
  - Pharmacy policies
  - Medical claim policies

### Be cyber smart

We've seen an increase in cybercrime targeting healthcare. These scams attempt to access and exploit account information and can steal money, usernames and passwords to access accounts, or infect computer networks – damaging an organization's ability to provide care and services.

You can help protect information on the HealthPartners Provider Portal by:

- Keep your user ID and password confidential.
- Get your own account never share accounts.
- Report any unusual activity or concerns with your account.
- Be vigilant with email. Watch for spam and phishing emails by asking: Who-What-Why, before clicking on links.
- Delegates confirm user identification before resetting or reactivating accounts.

### Don't have a Portal account yet?

#### **IT'S QUICK & EASY TO REGISTER**

Health care providers and billing organizations are welcome to use the Provider Portal. There are two ways for a provider group to register for an account:

- Get instant access using a HealthPartners-issued check.
- Have a PIN code sent to you via US Mail.
- Billing organizations and third parties must establish an independent account for their organization and request access to their client's (your) data. It's very fast, secure and allows them to manage all their client's business without separate logins!
- Every individual must have their own account. Sharing accounts is not allowed.
- Using unique and accurate information to create your account, such as non-generic email addresses, will ensure your account is secure and that we can reach you with important communications about your account activity.
- HIPAA regulation, Data Privacy, Data breeches it's all so complicated! Securing your organization's and our member's data is imperative! Let us help you and your administrator make it easier and more secure.
   Learn more

Your organization only needs to register once. The first person to register is assigned delegate status to create and maintain accounts for other staff. If you see an application here that you want, contact your delegate to create or update your account.



For help checking if your organization is registered, use the **Delegate search** or review the **Registration FAQs**.

If you have questions regarding the content of this newsletter, please contact the person indicated in the article or call your HealthPartners Service Specialist. If you don't have his/her phone number, please call **952-883-5589** or toll-free at **888-638-6648**. This newsletter is available online at **healthpartners.com/fastfacts**.

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