Provider Portal Guide

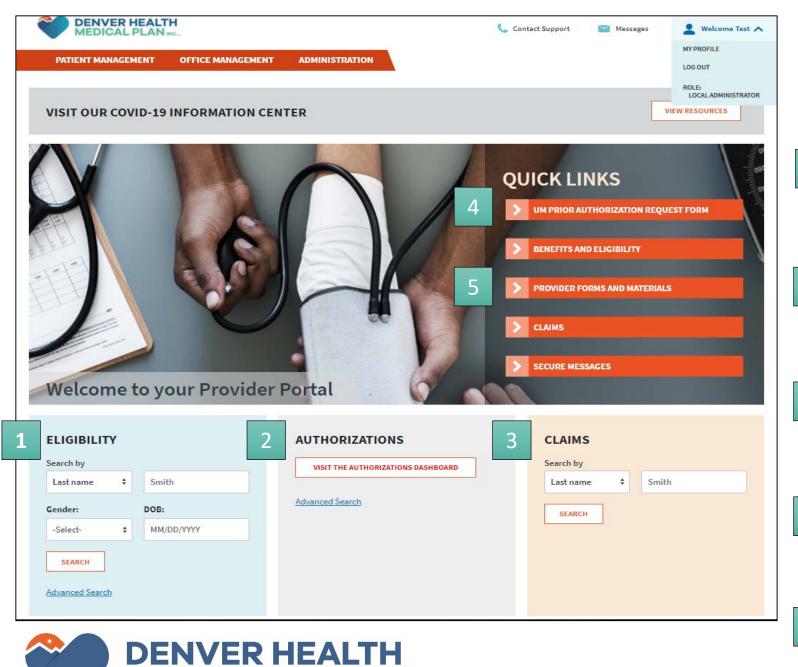


Denver Health Medical Plan Provider Portal

The Denver Health Medical Plan Provider Portal is a resource to provide quick and convenient access to:

- Member eligibility
- Claim Information
- Authorization statuses
- And more!





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Logging in will bring users to the landing page, providing quick access to portal functions.

1

Search for members to verify their eligibility.

2

View the Referral Dashboard to check the Status of prior authorization requests.

3

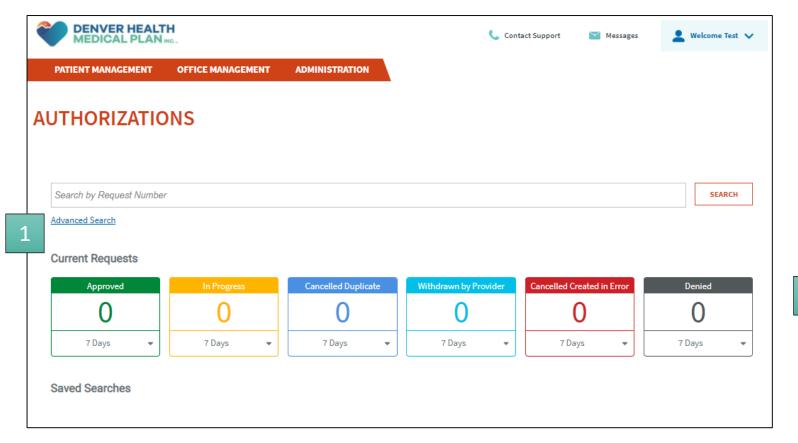
Search the status of claims submitted to the health plan.

4

This link will take providers to the Prior Authorization Form on DHMP website.

5

This link will take providers to other forms and materials on DHMP website.



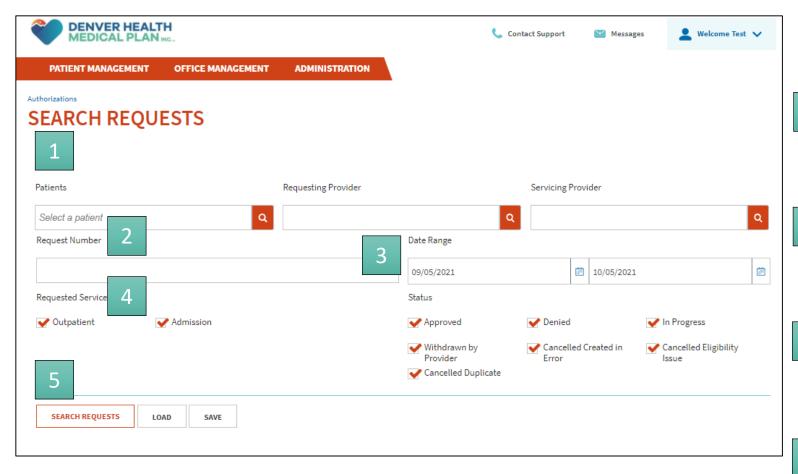
The Authorizations dashboard will show the number of Approved, Pending and Denied requests from the selected time frame.

This page can also be found under **Office Management** and then **Authorizations**.

1

More detailed information can be viewed in the **Advanced Search**.





To search for a specific request:

1

Enter the Patient Name, Requesting Provider or Servicing Provider

2

Enter the authorization (or request) number if known.

3

Select the Date Range for the date of service (?)

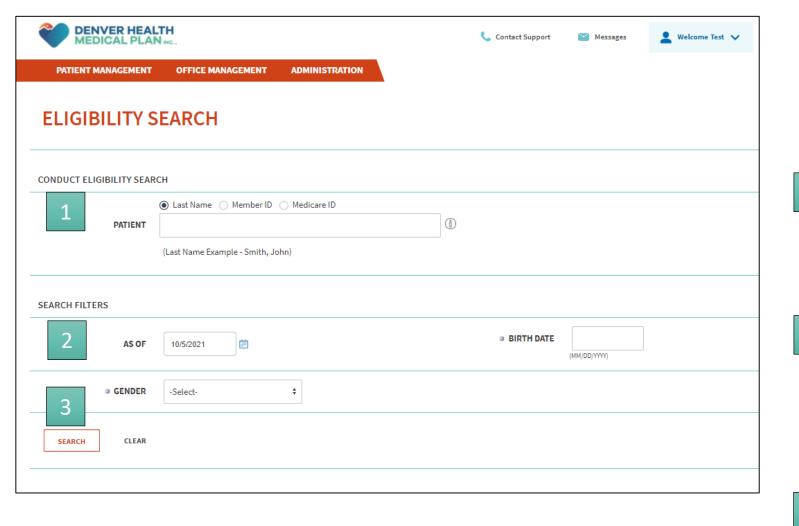
4

Select the service type and status.

5

Click Search Requests





To verify member eligibility:

This page can also be found under **Office Management** and then **Eligibility**.

1

Select the patient identifier: Last name, Member ID or Medicare ID.

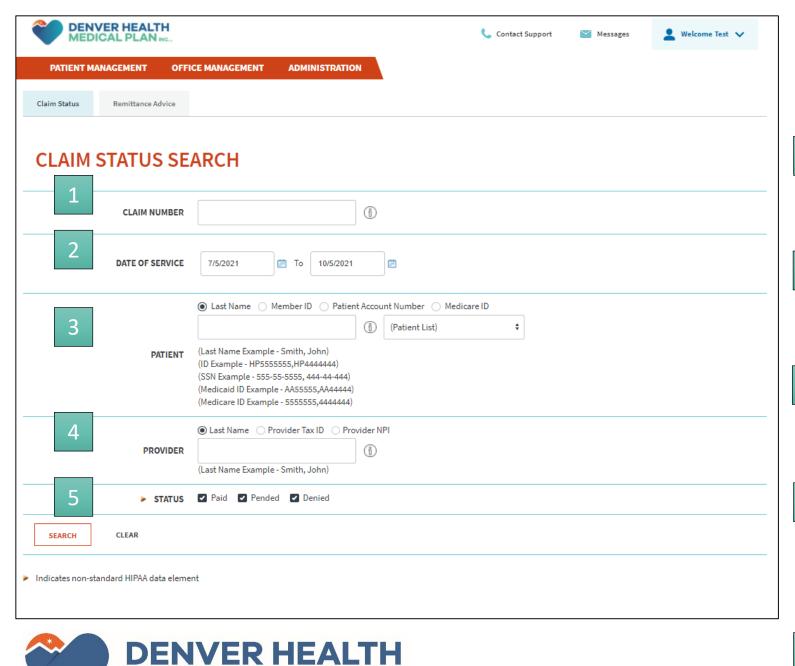
2

Select the date you want to verify eligibility from, the member's date of birth, and gender

3

Once this has been complete click Search.





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To check a claim's status:

This page can also be found under **Office Management** and then **Claims**.

1

Enter the claim number, if known.

2

Enter the Date of Service

3

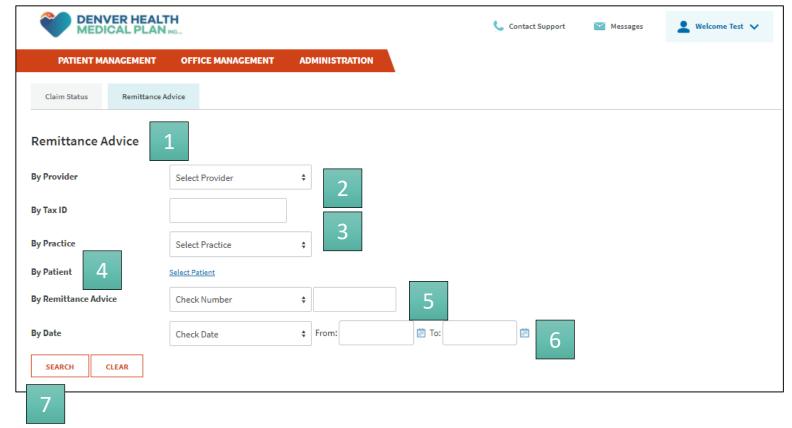
Select the patient identifier: Last name or Member ID

4

Select the provider identifier: Last name, Provider Tax ID or NPI.

5

Once this has been complete click Search.



Search for a Remittance Advice (RA) by clicking on the Remittance Advice tab. RA's can be filtered by:

1

Provider

2

Tax ID

3

Practice

4

Patient

5

Check Number

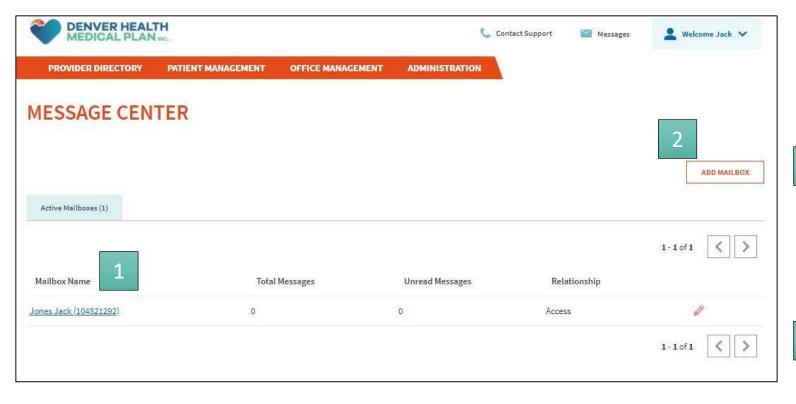
6

Or Date

7

Click on Search





Messages from Denver Health Medical Center can be viewed in the Message Center.

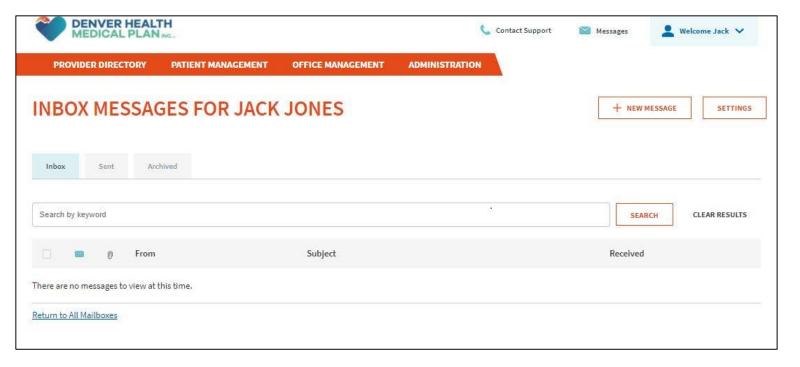
1

Active mailboxes will be displayed. Clicking on the link will allow the user to view the contents.

2

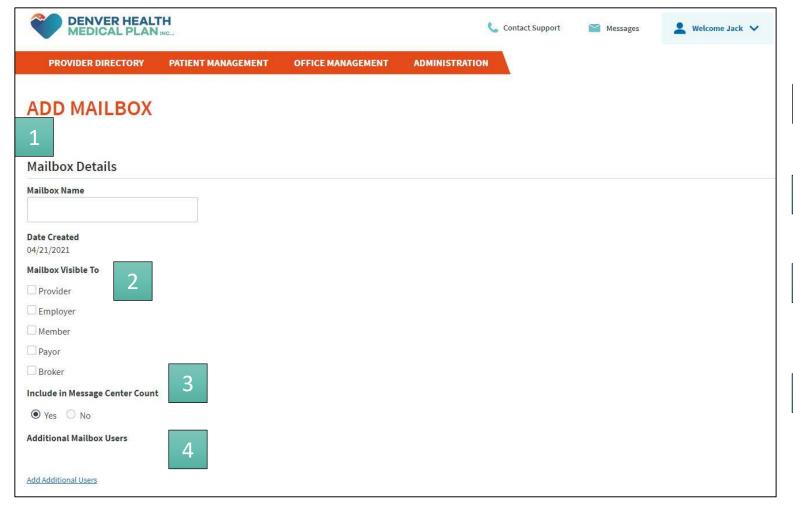
Additional mailboxes can be created by clicking on Add Mailbox.





The Inbox will display messages the user has received. By clicking the other tabs, Sent and Archived messages can be viewed.





When adding a mailbox:

1

Enter the name of the mailbox.

2

Select who the Mailbox is visible to.

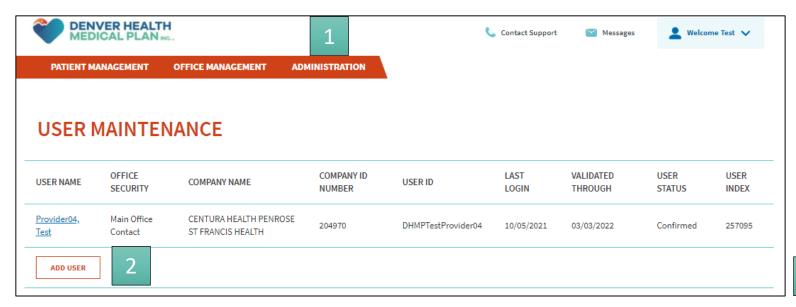
3

Select if the Mailbox should be included in the Message Center Count.

4

Add users that will have access to the newly created mailbox.





From the **Administration** header, offices can add users to their portal by clicking on **System Admin**. The office user with the Local Administrator roll, will be able to add other members of the office to the portal.

1

Clicking on Administration, then **System Admin** will display, and show users from the provider's office.

2

Additional users can be added by clicking Add User.

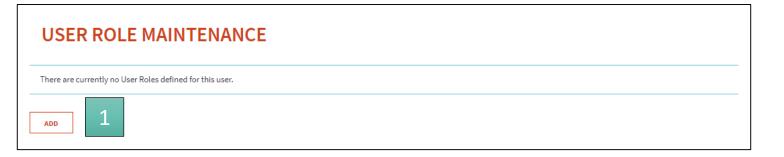


PATIENT MANAGEMENT OFFICE M	IANAGEMENT	ADMINISTRATION	
ADD USER			
* FIRST	NAME Test		
MIDDLE II	NITIAL		
* LAST	NAME Provid	der	
* E-MAIL AD	DRESS marqu	ues.haley@dhha.org	
* CONFIRM E-MAIL AD	DRESS marqu	ues.haley@dhha.org	
	TITLE e.g., Off	fice Manager	
* OFFICE F	PHONE 303-6	02-7682	
РНО	NE EXT		
OFFI	CE FAX		
* USEF	RNAME dhmp	TestProviderTraining	
* PASS	WORD		
★ CONFIRM PASS	WORD	•••	
LOCAL ADMINISTR	ATOR:		



After clicking Add User, you will be asked to complete the form to the right.

Required field are marked with a red asterisks.





Below the **Add User** form, you will be asked to **Add a Role** for the new user.

1

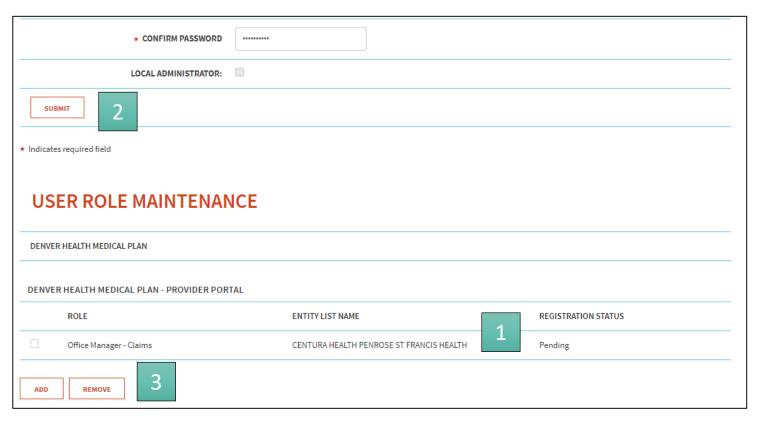
Clicking on Add will take you to the **User Role Selection** screen.

2

Most users in a provider office should have the role **Provider - Office Manager - Claims.** However, backup local administrator roles can be selected here as well.

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Once the form has been completed and the role selected, new items will appear.

1

The Registration Status will show as pending after the role has been added.

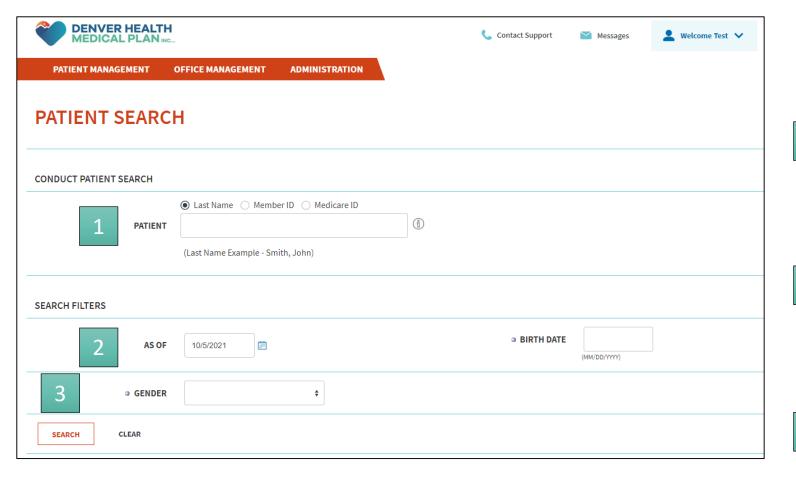
2

Clicking the Submit button will send the user info to DHMP to complete the registration process.

3

The option to remove a role will also be available at this point.





Under **Patient Management** you can search for an individual patient.

1

Select the patient identifier: Last name, Member ID or Medicare ID.

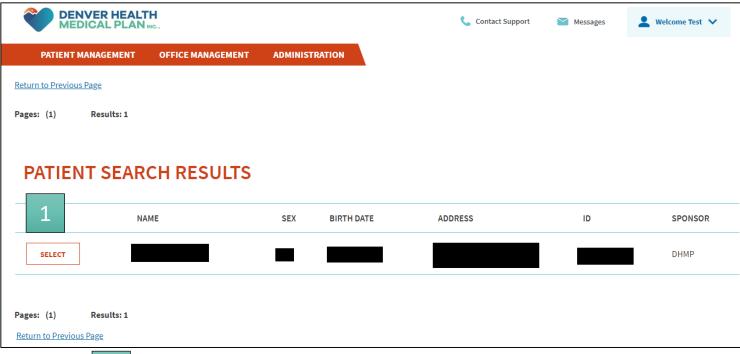
2

Select the date you want to verify eligibility from, the member's date of birth, and gender

3

Once this has been complete click Search





CURRENT PATIENT

Search Patients

Patient Information

Claims

Permissions

Document Manager

Referrals/Authorizations



The search results will show the patient's identifying information.

1

Clicking **Select** will put the member in patient management. Allowing the user to view claims, authorization and other information directly related to the member under **Patient Management**.

2