Online for Providers
Reference Manual

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Chapter

1

Introduction

Online for Providers enables you to view eligibility information, claims, schedule of benefits information and accumulators.

H WMG is pleased to make available to our providers a service that enables you to view eligibility and claim information online. This manual describes the procedures for access to and use of the system options and functions available on our Online for Providers Website. Providers have the ability to access real-time, member information including eligibility verification, plan summary information, and claims history and status. Other options available are:

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- Provider password maintenance and on-demand printing of claim forms.

- Access to our contact information for inquiries and questions, assistance with system use, and site recommendations and comments.

- Access to our established policies and procedures regarding the collection, privacy, and security of the information provided via the site, and the terms and conditions of site use.

! Disclaimer

The information provided by Online for Providers is not a guarantee of benefits or eligibility, and is subject to change since members' or groups' coverage may change or terminate retroactively.

Please note that the screen displays provided here are intended as examples only.

Contact Information

You can login at any time, including non-business hours, to view member information. During normal business hours, if you are unable to access the information you are looking for, you may contact Provider Relations or our Customer Service Center.

🗁 Web and Contact Information

Online for Providers: https://www.hmaaonline.com/

Contact Provider Relations for assistance with:
- **Access to Online for Providers**
- **Provider information updates/changes**
- **Contracts and fee schedules**

On Oahu:	**(808) 791-7557**
Toll-Free:	**(800) 621-6998 ext. 304**
E-mail:	**ProviderRelations@hwmg.org**

Contact Customer Service for assistance with:
- **Patient eligibility**
- **Plan benefits and deductibles**
- **Claims status and payments**

On Oahu:	**(808) 941-4622**
Toll-Free:	**(888) 941-4622**
E-mail:	**CustomerService@hwmg.org**

! Disclaimer

Claims accessed through Online for Providers should not be utilized to determine plan maximums. Providers are only able to access claim information on members filed under their Taxpayer Identification Number. Information related to claims for the same member that have been submitted under a different Provider Taxpayer Identification Number will not be available.

For benefit determinations, please call our Customer Service Center at 941-4622 or toll-free at (888) 941-4622.

Getting Started

<u>**What you need**</u>

Insured ID
Login Password
Internet Access

To access **Online for Providers**, you will need your Tax Identification Number (TIN) and your login password. If you do not have a login password, please request one through Provider Relations (see phone numbers in Contact Information section).

System Requirements

The minimum system requirements for **Online for Providers** are as follows:

🗀 System Requirements

- *Computer with a 56.6 KBPS , a DSL or Cable Modem connection (for DSL or Cable the user of a software or hardware fire wall is required)*

- *Internet access*

- *128 MB RAM or more*

- *Pentium III 500 MHz or higher*

- *Windows 2000 or XP operating system*

- *Internet Explorer 6.0 or higher, or Netscape 4.7 or higher*

- *Virus scanning software (such as McAfee's VirusScan or Symantec's Norton Virusscan*

- *Adobe Acrobat Reader software (can be downloaded for free from the following Website. Version 6.0 is recommended):*

    http://www.adobe.com/products/acrobat/readstep2.html

User Responsibility

Online for Providers is a secure Website. Providers must register to use the Website and will be given a secure password. Your TIN and login password must be protected and used only by the practice to which it was assigned. It is your responsibility to maintain and protect your TIN and password, and to contact our Provider Relations if you forget or lose your password.

Logging In

Once you access the Internet, type **https://www.hmaaonline.com/** into your Internet browser's address bar and hit **[Enter]**. You will be directed to the **Online Home Page** *(see Figure 1.1)* and see two choices on the home page: Provider and Member/Dependent.
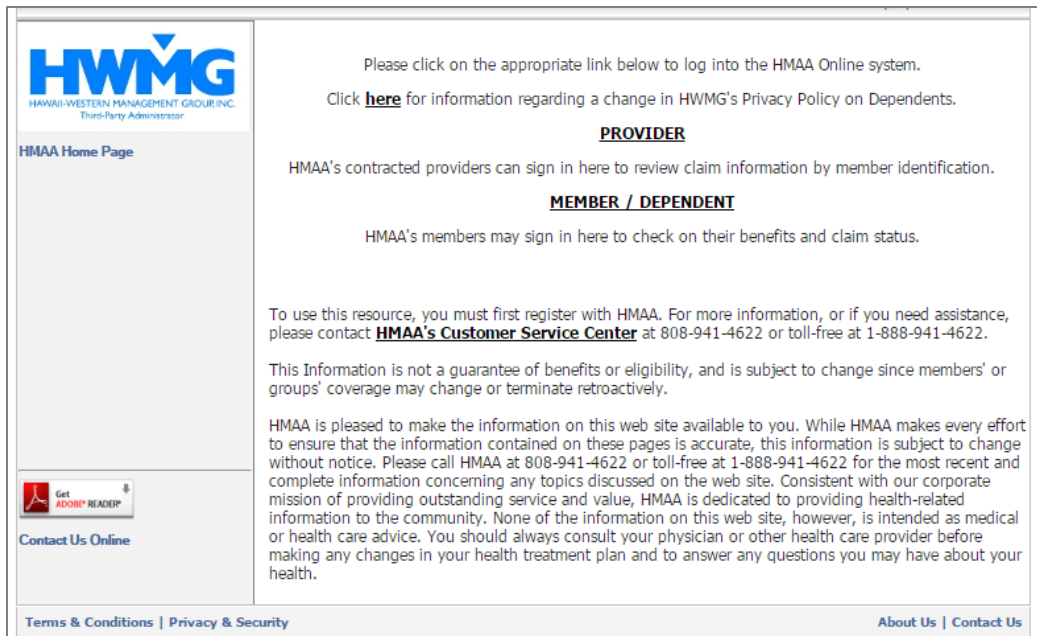
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FIGURE 1.1: Online Home Page. Click on **PROVIDER** to access your plan and claim information.

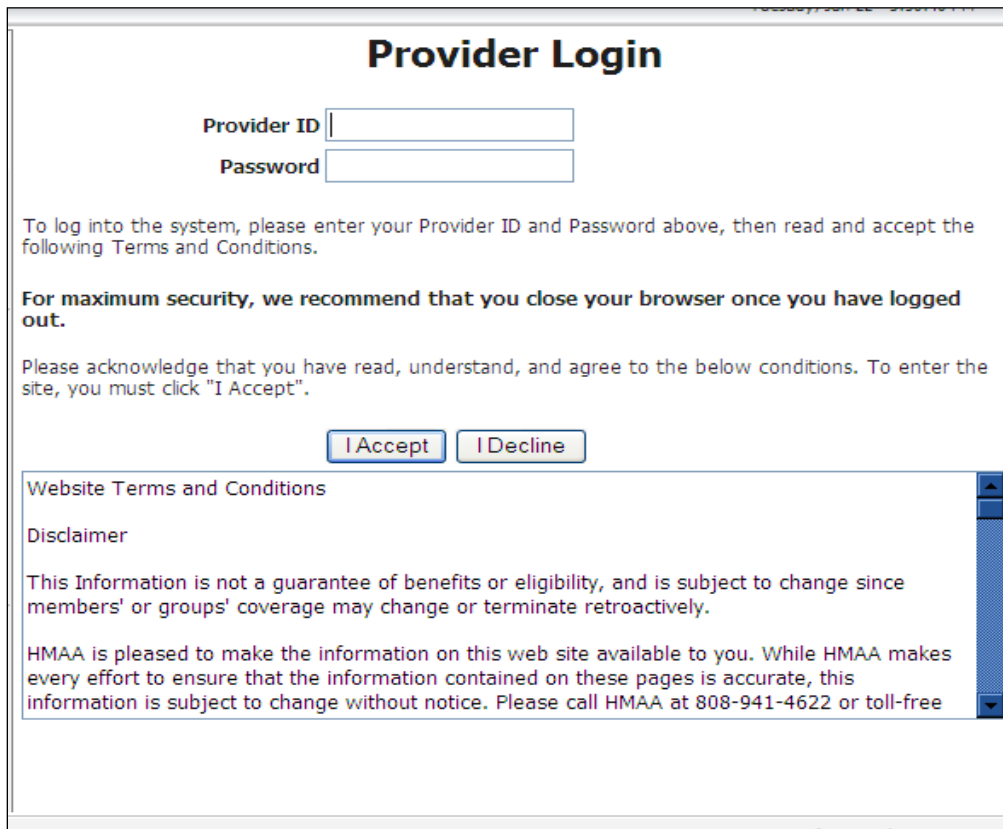Choose the first option, *PROVIDER*. This will direct you to the **Provider Login** page *(see Figure 1.2).*

FIGURE 1.2: Online for Providers Provider Login Page. Enter your TIN and Password.

Enter the following information:

FIELD	DESCRIPTION
Provider ID	Provider Identification Number. Normally the billing provider's TIN.
Password	Password assigned to this Provider. *Note: This entry displays encrypted.*

After you complete these entries, read the Website Terms and Conditions. To acknowledge that you have read, understand, and agree to these conditions, click on the **[I Accept]** button. The Select Insured screen displays.

Changing Your Password

The first time you login to **Online for Providers**, you will be prompted to change your password *(see Figure 1.3)*. You will also be required by the website to change your password every 180 days, but it is recommended that you change your password every month. See Password Requirements below for more information.

Password Maintenance

Please use the form below to change your password. You must type your password both in the **New Password** and **Re-enter New Password** fields for the change to take effect. *Your new password must contain at least seven characters and is case sensitive.*

New Password

Re-enter New Password

Submit

FIGURE 1.3: Online for Providers Password Maintenance Page. Change your password on this screen.

Enter your new password in the *New Password* field, then re-enter it in the *Re-Enter New Password* field. Your password must be at least seven characters long and is case-sensitive. Click **[Submit]** to update your password.

📂 Password Requirements

Your new password must be at least seven (7) characters. If you enter a password that does not meet this requirement, you will be prompted to enter a different password. Your password is also case-sensitive.

Password Tips:

1) Change your password frequently. Monthly is recommended.

2) Use a password that includes non-alphabetic characters, such as numerals or punctuation marks.

3) Use a password that is easy for you to remember, so you don't have to write it down.

4) Do not use the names of any family members, friends, or pets.

5) Do not let anyone know your password.
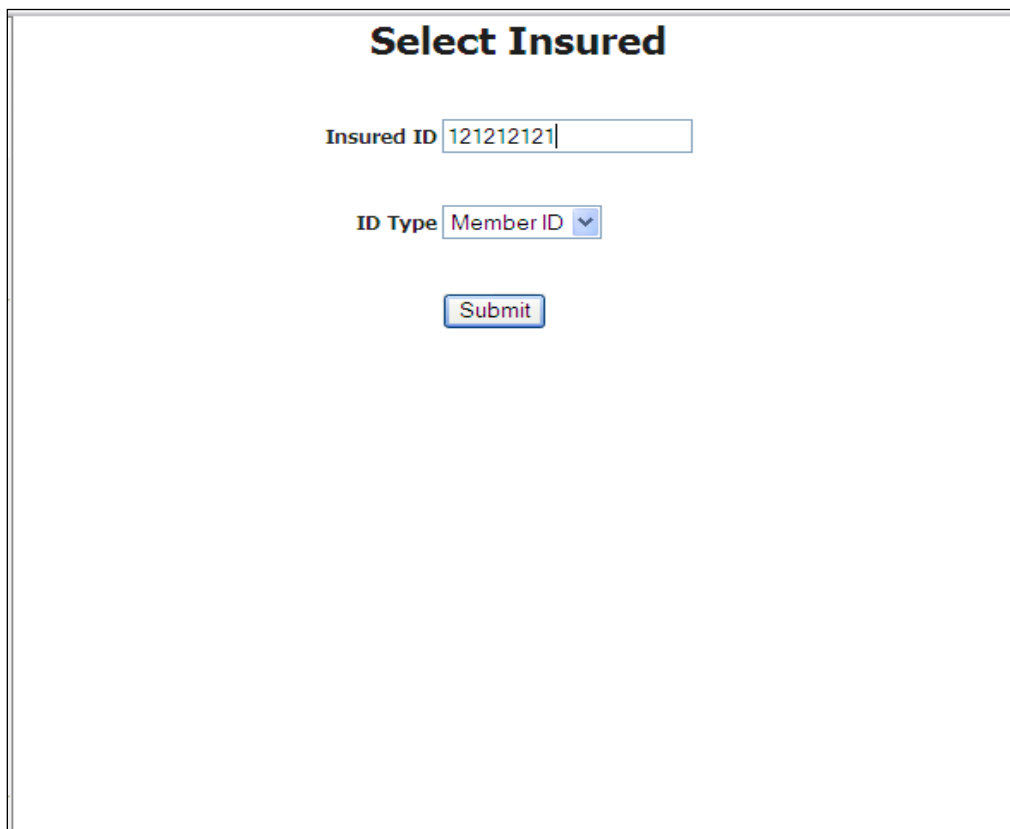
Chapter

2

Eligibility and Plan Information

Check patient's plan eligibility and plan benefits.

O nce you are logged into **Online for Providers** (and have changed your password upon your initial login), you are ready to access your patient's eligibility, plan, and claim information. You will be on the **Select Insured** page *(see Figure 2.1)*, where you will enter your patient's *Insured ID*. Click on the **[Submit]** button and you will be directed to the **Select Family Member** screen *(see Figure 2.2)*. If you don't have the patient's Insured ID, you may enter the subscriber's social security number and choose the SSN option under the ID Type drop down box.

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Select Insured

Insured ID 121212121

ID Type Member ID ▾

[Submit]

FIGURE 2.1: Online for Providers Select Insured Page. Enter the Insured ID or SSN of the patient you wish to view.

Select Family Member

You have selected to review information for the following insured:

Insured ID Name	Insured Address	Group ID / Division ID Name
██████	██████	██████

Please select the member you would like to review:

Select Member	Name	Relationship	SEX	DOB
Select	██████	INSURED	F	██████
Select	██████	DEPENDENT CHILD	M	██████
Select	██████	DEPENDENT CHILD	M	██████
Select	██████	DEPENDENT CHILD	F	██████

FIGURE 2.2: Online for Providers Select Family Member Page. Select the family member you wish to view.

Options

From the **Select Family Member Page**, you can access almost all of the information available on **Online for Providers** except for claims. Your options on this page are as follows:

- To view Insured's or dependent's **Coverage Information**, click on **[Select]** under the **Select Member** heading.

- To change your password, click on *Password Maintenance* in the sidebar *(see **How to Change Your Password** in Chapter 1 for more information).*

- For our **Contact Information,** click on *Contact Us*.

- To read our **Privacy and Security Statement**, click on *Privacy and Security*.

- To access **HMAA's Website**, click on the HMAA Home Page.

- To access **HMAA Forms** such as a CMS-1500, UB-04, or the Online Registration form, click on *Forms and Information.*

Coverage Information

When you have selected a member to view, you will be brought to the **Coverage Information** screen *(see Figure 2.3)*. You can access any part of **Online for Providers** from this page. Your options on this page are as follows:

- View a **Summary of Current Plan Benefits** for any coverage your patient may have such as Medical, Dental, Vision or Drug *(NOTE: If you are using Adobe Acrobat Reader and an incorrect PDF appears, please refresh your browser.)*

- View **Accumulators** (Deductible, Stop-Loss, Lifetime Maximum) for Medical or Dental *(NOTE: If your patient has Single Coverage, you may see accumulators relating to Family Coverage. Please <u>disregard</u> the Family information as it is not applicable.)*

- View plan numbers and **Effective and Termination Dates** for your patient's current or previous coverage.

- View **Claim Information** *(see Chapter 3 for more information)*.

- To return to the **Select Family Member** screen, click on *Select Family Member* in the sidebar.

- To log out of **Online for Providers**, click on *Logoff* in the sidebar.
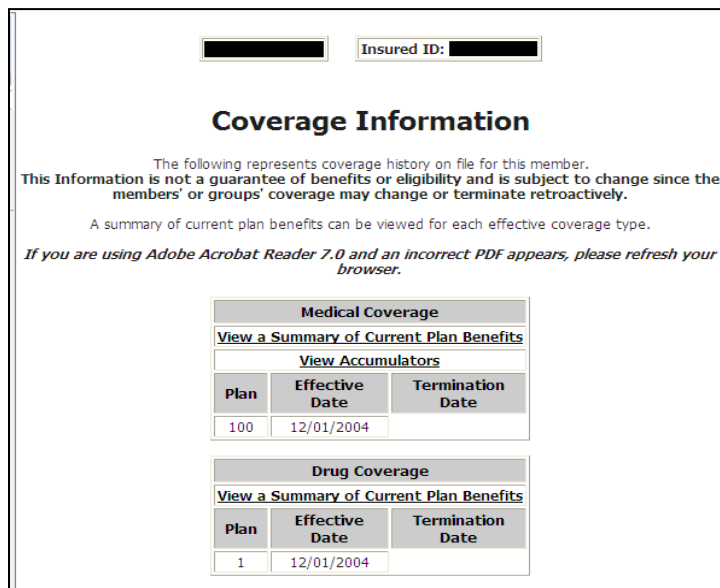

FIGURE 2.3: Online for Providers Coverage Information Page.

View Plan Benefits

Medical
Dental
Vision
Prescription

To view a patient's plan benefits, click on *View a Summary of Current Plan Benefits* from the Medical, Dental, Vision or Drug Coverage sections[1]. When you select one of the links, a PDF[2] will open that contains your patient's plan documents. You may print these or view them on the screen.

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[1] Coverage information will be limited to the coverage types your patient has obtained through your employer.
[2] If you are using Adobe Acrobat Reader and an incorrect PDF appears, please refresh your browser.

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The information provided by Online for Providers is not a guarantee of benefits or eligibility, and is subject to change since members' or groups' coverage may change or terminate retroactively.

Depending on your patient's coverage, you may be able to view their plan documents.
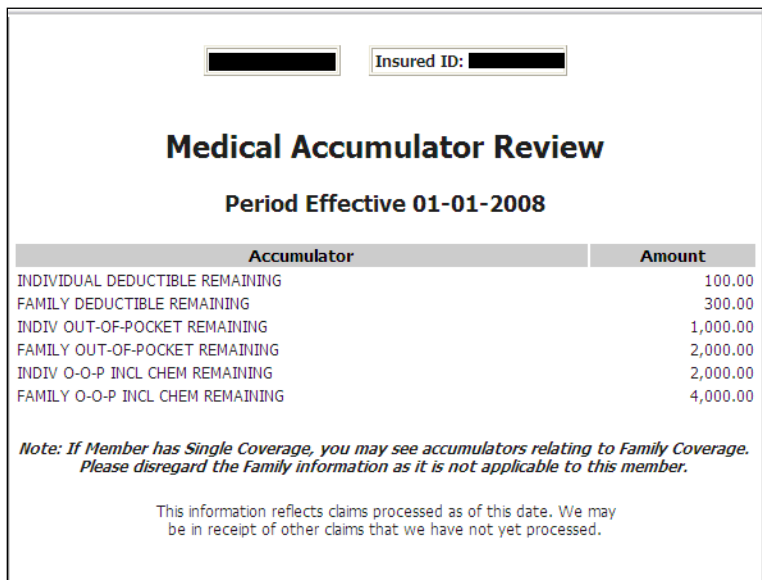
If you are using Adobe Acrobat Reader and an incorrect PDF appears, please refresh your browser.

View Accumulators

Medical
Dental

Online for Providers enables you to view your patient's accumulators for their Medical and Dental plans *(see Figure 2.5)*. For Medical coverage, you can see how much your patient has remaining on his/her deductible, individual and family stop-loss, and individual and family lifetime maximums. For Dental coverage, you can see how much your patient has remaining on his/her individual and family annual maximums.

Insured ID:

Medical Accumulator Review

Period Effective 01-01-2008

Accumulator	Amount
INDIVIDUAL DEDUCTIBLE REMAINING	100.00
FAMILY DEDUCTIBLE REMAINING	300.00
INDIV OUT-OF-POCKET REMAINING	1,000.00
FAMILY OUT-OF-POCKET REMAINING	2,000.00
INDIV O-O-P INCL CHEM REMAINING	2,000.00
FAMILY O-O-P INCL CHEM REMAINING	4,000.00

Note: If Member has Single Coverage, you may see accumulators relating to Family Coverage. Please disregard the Family information as it is not applicable to this member.

This information reflects claims processed as of this date. We may be in receipt of other claims that we have not yet processed.

FIGURE 2.5: Online for Providers Medical Accumulator Review Page.

Your patient's coverage Effective and Termination dates, if applicable, appear under each coverage type. You may see more than one row of dates if your patient had any plan or coverage changes. If you have any questions or concerns about these dates, please contact our Customer Service Center (see Page 3).

To view the coverage information for one of your patient's dependents, click on *Coverage Information* in the sidebar to return to the **Select Family Member** page, and choose the dependent you wish to view.

HMAA Website

From **Online for Providers**, click on the HMAA Home Page to navigate to HMAA's website, www.HMAA.com. Here you will have access to a wealth of information available to the general public.

You may want to view our Online Provider Directory, which is updated regularly with changes, additions and deletions to our network. You can also link to the Website and directory of our Mainland provider network to search for providers on the Mainland.

Our Contact Information

To view our office hours, Customer Service hours, location information, mailing address and telephone numbers, click on *Contact Us* on the bottom of the page.

Privacy and Security Statement

To read our General Policy, Security, Privacy, E-mail, and Consent Statements, click on *Privacy and Security* on the bottom of the page. If you have any questions regarding these statements, please contact our Customer Service Center.

Forms and Information

To download forms, click on *Forms and Information* in the sidebar. You will be able to download the following types of forms:

- Claim Forms
- Request/Notification Forms
- Online Registration Form
- Participating Provider Network Forms

A few other helpful Provider Information can also be found on this page.

Chapter

3

Claim Information

View paid and in-process claims.

Online for Providers enables you to view your claims for members of HMAA and other self-funded clients' health plans we administer. When you access specific claims, you may also be able to view, download or print a copy of your PPR (Provider Payment Report). To access your claims, click on *Claim Information* in the sidebar. This will bring you to the **Claim Information** page *(see Figure 3.1)*.

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Insured ID: ▮▮▮▮▮

Claim Information

The following is Claim information on file for this member.
For detailed information, click on the claim number.

Claim	Service From	Service Through	Provider of Services	Patient Number	Total Charges
▮▮▮	04/17/2006	04/17/2006	▮▮▮▮▮	▮▮▮	▮▮
▮▮▮	04/17/2006	04/17/2006	▮▮▮▮▮	▮▮▮	▮▮
▮▮▮	04/17/2006	04/17/2006	▮▮▮▮▮	▮▮▮	▮▮
▮▮▮	02/02/2006	02/02/2006	▮▮▮▮▮	▮▮▮	▮▮

FIGURE 3.1: Online for Providers Claim Information Page. Select which claim you would like to view.

Claim Information

On the **<u>Claim Information</u>** page, you will see a list of claims associated with the member or dependent you selected on the **<u>Select Family Member</u>** page. As long as a claim has been submitted and we have started processing the claim, the claim will appear in this list. The list will include a *Claim Number, Service From* and *Service Through Dates,* the *Provider of Services* and *Total Charges*. To select the claim you wish to view, click on the link in the Claim field. This will bring you to the **<u>Claim Details</u>** page.

Claim Details

<u>Claim Details</u>

See paid and in-process claims
Track OOP Costs
View PPRs

The **<u>Claim Details</u>** page displays detailed information about the selected claim. The detailed information includes the following *(see Figure 3.2)*:

- Check #
- Payee
- Total amount paid
- Date the amount was paid
- Payment amount for each line item on the claim
- Dates of service
- Amount billed by provider
- Ineligible amount codes
- Descriptions of ineligible amounts and codes
- Negotiated discount with provider
- Deductible
- Provider Payment Report (PPR)
- Any letters that have been sent regarding the claim

FIGURE 3.2: Online for Providers Claim Details Page. View detailed information about your claim as well as your PPR.

Provider Payment Report (PPR)

From the **Claim Details** page, you can access your PPR or any letters that have been mailed regarding the selected claim. To view a PPR, click on *Click here for a PDF image of the Provider Payment Report***.** You will be prompted by a window asking whether you wish to Open or Save the PDF image *(see Figure 3.3).* If you choose **[Save]**, you will be prompted by your operating system to choose a location in which to save the PDF. If you choose **[Open]**, the PDF will open in a new window.
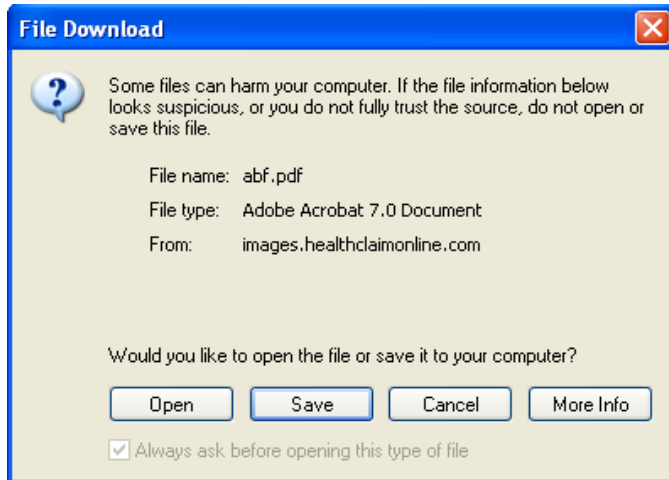

FIGURE 3.3: PDF File Download Message. Choose Open or Save.

Letters

To access letters from the **Claim Details** page, click on the **[Show Letter]** button. Letters do not appear as PDF images, so you will not need to Open or Save the information. The letter will appear in your Web browser in the same screen, not in a new screen. To navigate back to the **Claim Information** page, use the **[Back]** button on your browser, or click on *Claim Information* in the sidebar.

> ## ! Disclaimers
>
> *If you do not see the claim information you are looking for, we may not yet have received the claim. If at any time you cannot find a claim or need assistance, please contact our Customer Service Center.*

Logoff

You may log out of **Online for Providers** at any time. To do so, click on *Logoff* in the sidebar. You will be directed to close your browser.

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Summary

We hope this manual helps you navigate through the **Online for Providers** Website.

If at any time you have questions regarding **Online for Providers**, please feel free to contact our **Provider Relations Department** at:

Phone:	(808) 791-7557
Toll-Free:	(800) 621-6998 ext. 304
E-mail:	ProviderRelations@hwmg.org

If you have any questions regarding Member or Dependent eligibility, Plan Benefits or Claims status, please contact our **Customer Service Center** at:

Phone:	(808) 941-4622
Toll-Free:	(888) 941-4622
E-mail:	CustomerService@hwmg.org