

# CHRISTUS Health Plan

## Provider Portal User Guide





# Table of Contents

## Introduction

Welcome Letter.....	2
Getting Started.....	3
Provider Login Screen.....	4
Create New User.....	5
Process Workflow.....	6

## Section 1: Vendor Screens

Vendor Role.....	8
Claim Status.....	9
Submit a Claim.....	9
My Checks.....	10
Remittance Advice.....	10
My Providers and Offices.....	11
Check Eligibility.....	11
Multiple Eligibilities.....	12
My Members.....	13
My Profile.....	14
My Preferences.....	14
Other Providers.....	15

## Section 2: Office Screens

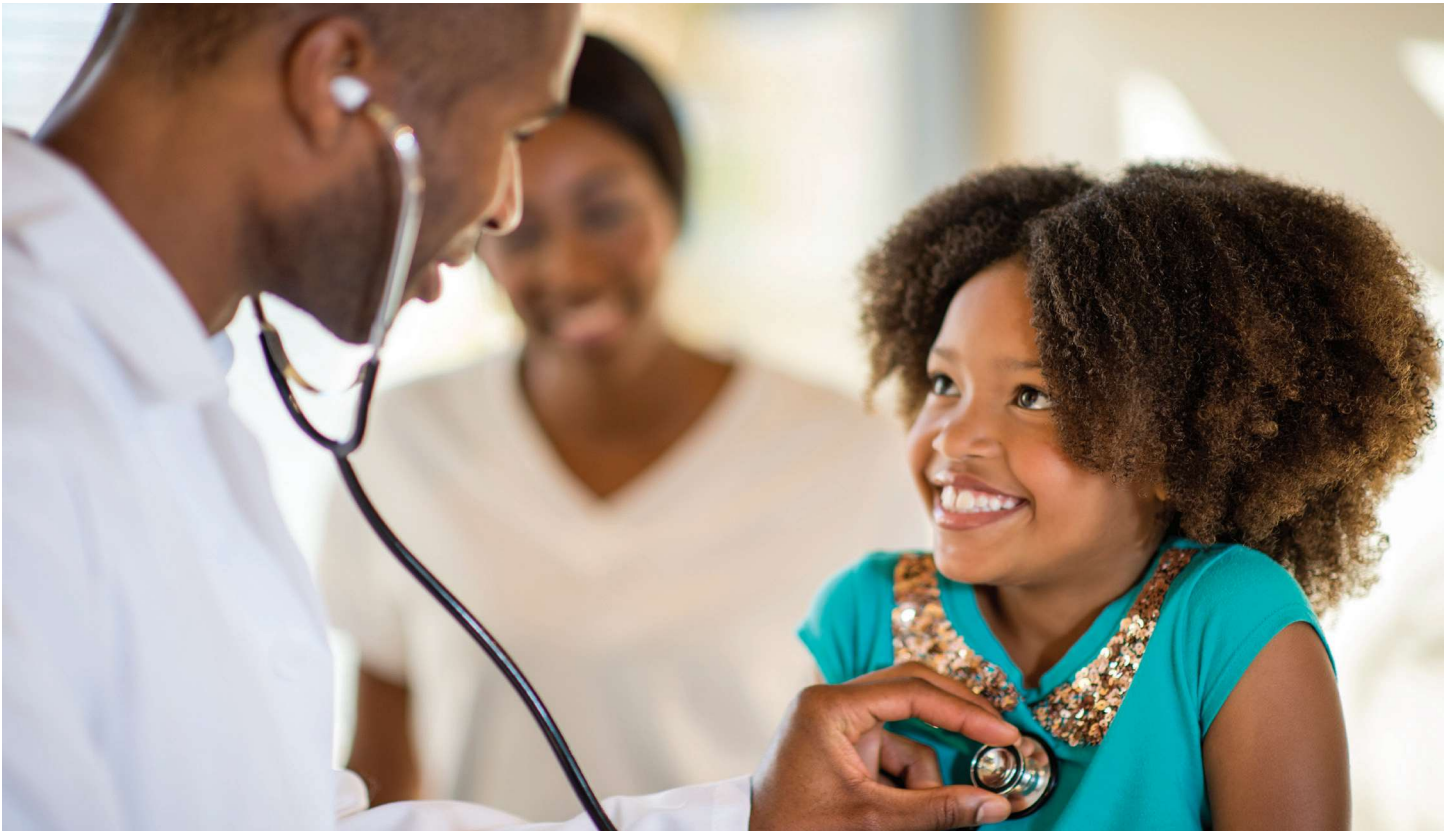
Primary Office Role.....	17
Office User Roles.....	18
Claims Status Search.....	19
Submit a Claim.....	19
Office Authorization Screen.....	20
Submit Authorization Screen.....	21
My Checks.....	22
Check Eligibility.....	22
Check Multiple Eligibilities.....	23
My Members.....	24
My Providers.....	24
My Profile.....	25
My Preferences.....	25
Other Providers.....	26
Request Password Reset.....	27
Provider Relations Representative Info....	28

# Greetings and Welcome

At CHRISTUS Health Plan, we're always finding new ways to improve our service for our providers. Our enhanced, secure and user-friendly provider portal is available for your convenience 24 hours a day.

Popular features include:

- Single Sign-On (navigate smoothly through multiple screens)
- Personalized Information and Services
- Real-Time Data View and Access
- Authorization Tracking and Claim Status
- Detailed Claim Inquiries
- Payment History and Check Information
- Member Inquiries - Membership Rosters, Eligibility, PCP and Benefit Information



# Getting Started

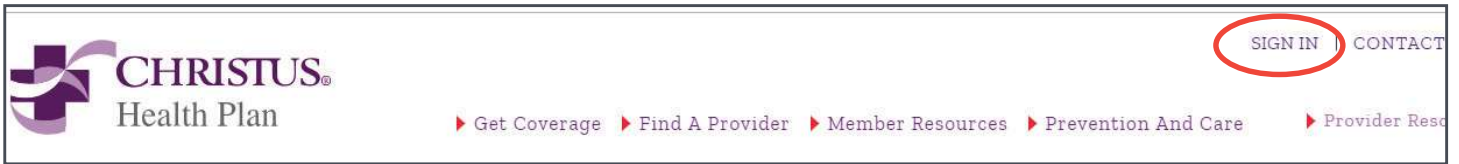
## Registering as a New User

For Office Users, enter your Office Number and Access Code.

For Vendor Users, enter your Vendor Number and Access Code.

Users will have Access Codes and Office | Vendor Numbers distributed by your Provider Relations Representative.

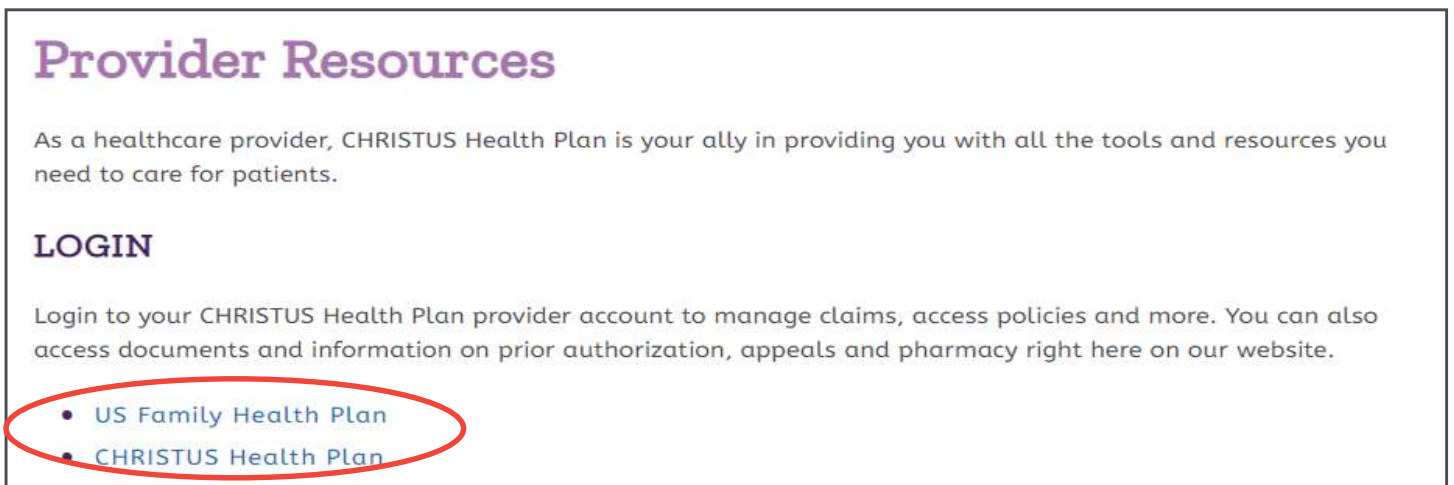
1. Visit ChristusHealthPlan.org. In the upper right hand corner, click Sign In.



2. Click Providers Login.



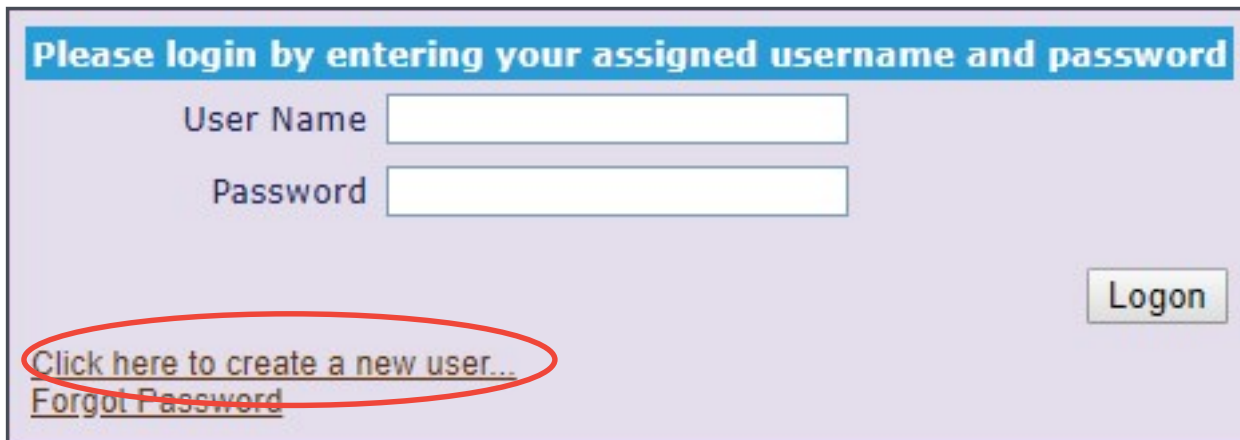
3. Select the plan for which you are a provider.



# Provider Login Screen

Log in to your CHRISTUS Health Plan | US family Health Plan provider portal as a provider and you will find helpful information and resources with this secure section of our website.

Providers can review their claims or previously submitted authorizations, validate member eligibility, and look up prior authorizations.

A screenshot of a web login form. At the top, a blue banner contains the text "Please login by entering your assigned username and password". Below this, there are two input fields: "User Name" and "Password". To the right of these fields is a "Logon" button. At the bottom left, there are two links: "Click here to create a new user..." and "Forgot Password". The "Click here to create a new user..." link is circled in red.

Please login by entering your assigned username and password

User Name

Password

Logon

[Click here to create a new user...](#)

[Forgot Password](#)

To create a new profile, select "Click here to create a new user".



# Create New User

1. Select user typer (Office or Vendor) and click Select.

A Vendor User has only one primary role, to set up Office Role Users. The Vendor User is responsible for maintaining the accounts of authorized users within their office.

An Office User is assigned by the Vendor User. If necessary, the primary Office User is allowed to add authorized users within their office who can then utilize the secure website.

2. All required fields must be completed.

3. Click on Create Account.



The screenshot shows the 'Create an Account' form with the 'Vendor' user type selected. The form includes fields for Vendor Number, Access Code, Tax ID, Account User First Name, Account User Last Name, Account User Name, Account Password, Confirm Password, and Email Address. A 'Create Account' button is at the bottom.

Vendor User  
Screen

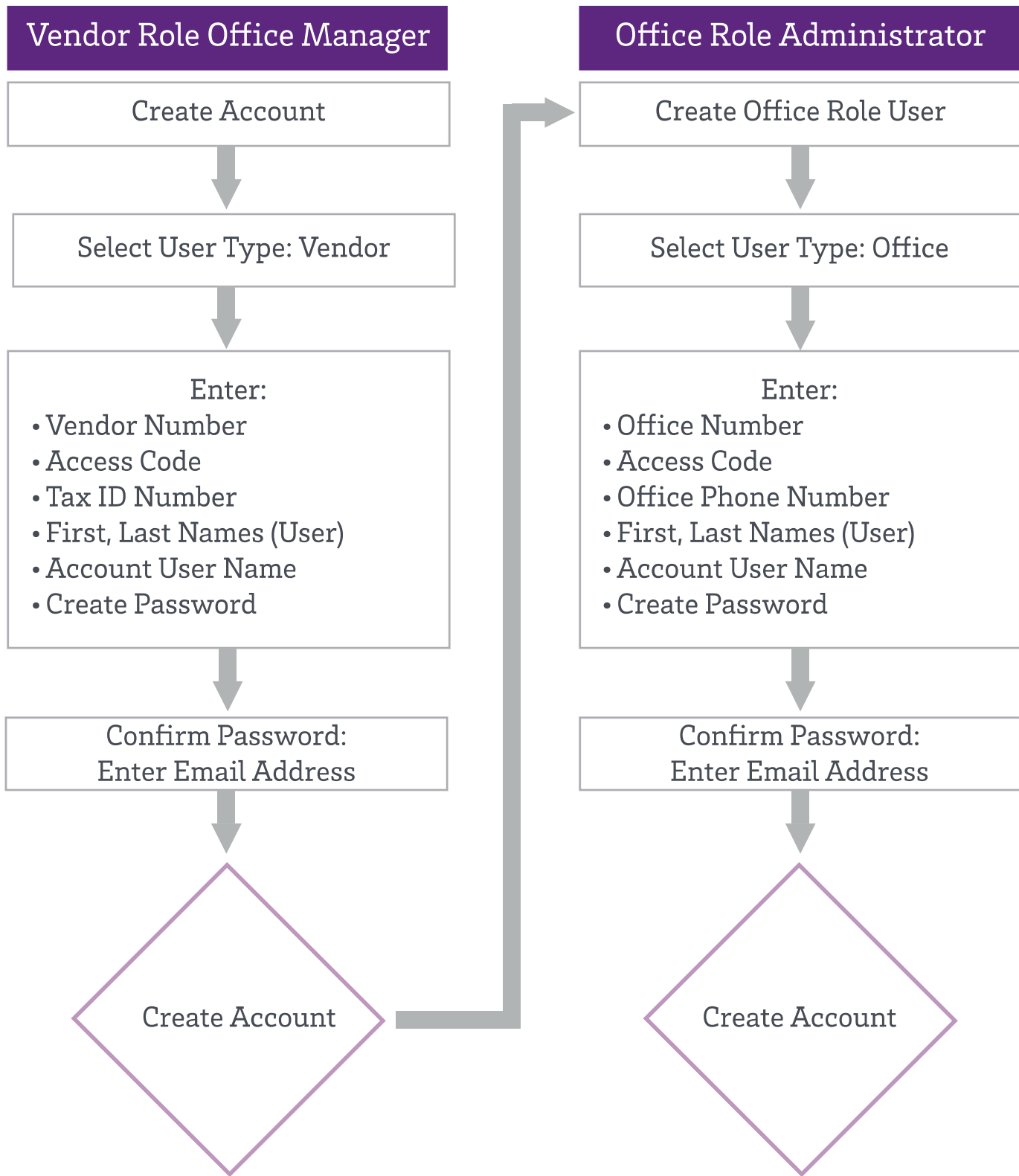


The screenshot shows the 'Create an Account' form with the 'Office' user type selected. The form includes fields for Office Number, Access Code, Phone Number, Account User First Name, Account User Last Name, Account User Name, Account Password, Confirm Password, and Email Address. A 'Create Account' button is at the bottom.

Office User  
Screen

**Note:** Upon the user's first login with their new accounts, the system will require the password to be changed.

# Process Workflow for Vendor Role to Add New Users





Section 1

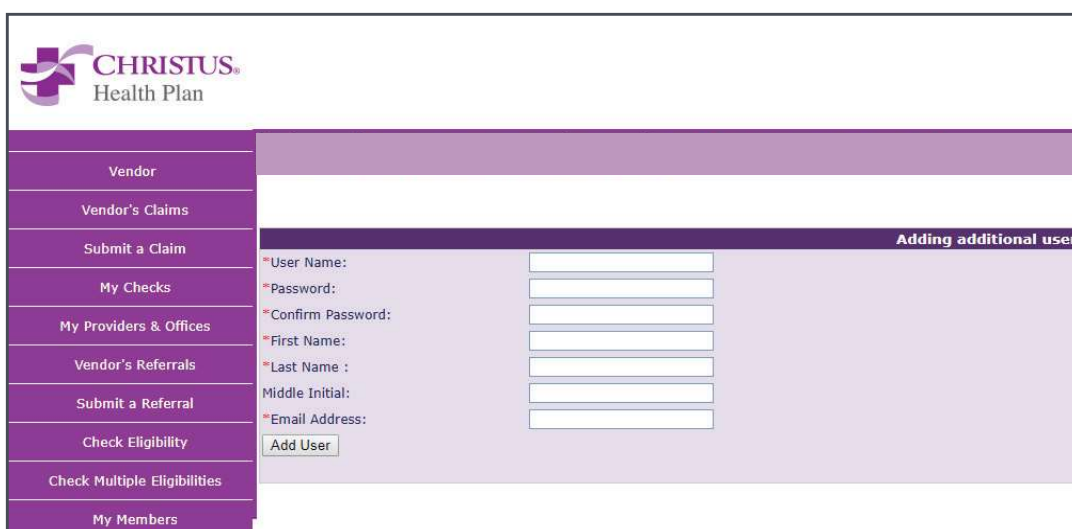
# Vendor Screens

# Vendor Role

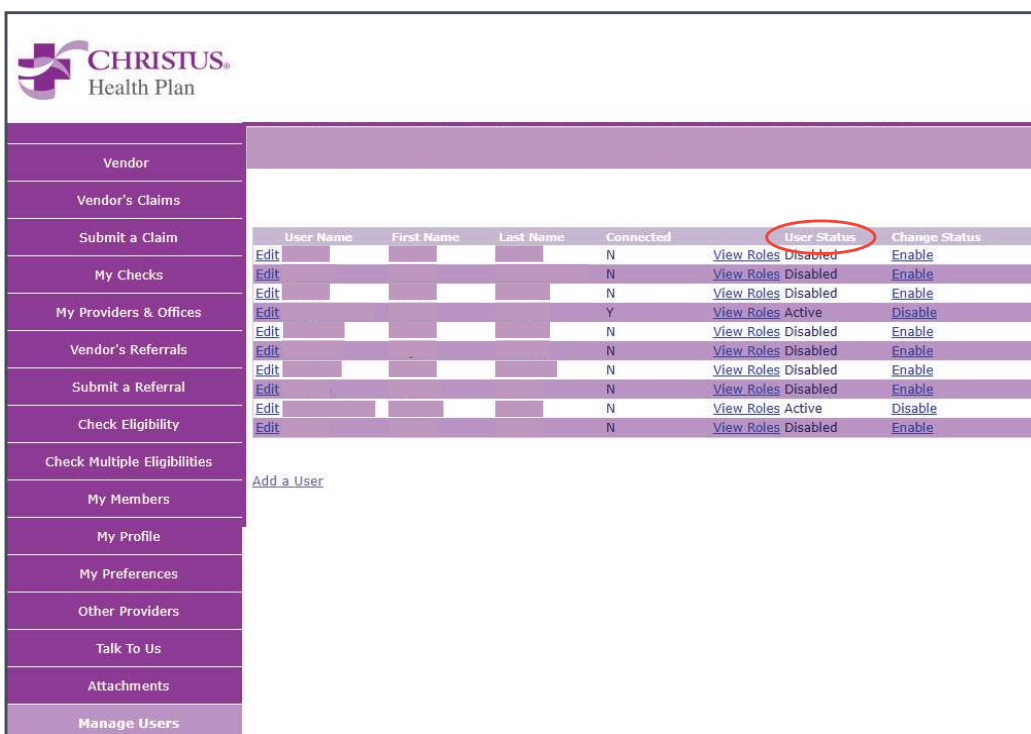
A vendor has only **one primary role**: to set up Office Role Users. The Vendor User is responsible for maintaining the accounts of authorized users within their office.

## Adding Additional Users

- Create User Name
- Create Password (Note: Passwords must contain: capital letter, special character, number, at least 6 characters)
- Confirm Password
- First Name
- Last Name
- Email Address



The screenshot shows the Christus Health Plan Vendor portal. The left sidebar contains a menu with options: Vendor, Vendor's Claims, Submit a Claim, My Checks, My Providers & Offices, Vendor's Referrals, Submit a Referral, Check Eligibility, Check Multiple Eligibilities, and My Members. The main content area is titled 'Adding additional user' and contains a form with the following fields: User Name, Password, Confirm Password, First Name, Last Name, Middle Initial, and Email Address. Each field has a corresponding input box. Below the form is an 'Add User' button.



The screenshot shows the Christus Health Plan Vendor portal. The left sidebar contains a menu with options: Vendor, Vendor's Claims, Submit a Claim, My Checks, My Providers & Offices, Vendor's Referrals, Submit a Referral, Check Eligibility, Check Multiple Eligibilities, My Members, My Profile, My Preferences, Other Providers, Talk To Us, Attachments, and Manage Users. The main content area displays a table of users. The table has columns: User Name, First Name, Last Name, Connected, User Status, and Change Status. The 'User Status' column is circled in red. Below the table is an 'Add a User' link.

User Name	First Name	Last Name	Connected	User Status	Change Status
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			Y	<a href="#">View Roles</a> Active	<a href="#">Disable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Active	<a href="#">Disable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>

[Add a User](#)

**NOTE:** Disable function available by changing status.

# Claims Status Search

The claims status inquiry enables you to search, view and print an Explanation of Benefits (EOB) report of your claims.

- Select the **Claim Status Search** option (All, Paid, Denied, etc.) from the **Vendor Claims** tab.
- Enter the claims information to perform the search. Search criteria data fields include member information and claims information, including the service date range.

Vendor	
Vendor's Claims	
Submit a Claim	
My Checks	
My Providers & Offices	
Vendor's Referrals	

☒ Search by Date ☐ Search by Claim Number ☐ Search by Patient Account Number

Claim Type:  Claim Status:

Date Criteria:  Date From:  Date To:


Member:  \*optional, last name or member # Policy #:

Provider:  \*optional, last name or provider #

Office:  \*optional, office name

## Submit a Claim

Feature coming soon!



Vendor
Vendor's Claims
Submit a Claim
My Checks
My Providers & Offices
Vendor's Referrals
Submit a Referral
Check Eligibility
Check Multiple Eligibilities



# My Checks

My Checks enables you to search, view and print a Remittance Advice summary report of paid claims. The initial default display will be those RAs specific to the users associated with the Vendor ID. Search by Date or Check Number Search Criteria (Check Type: Claim; From: Date of Service From - To).



The screenshot shows a web application interface for 'My Checks'. On the left is a purple sidebar with four menu items: 'Vendor', 'Vendor's Claims', 'Submit a Claim', and 'My Checks'. The main area is white and contains search options. At the top, there are two radio buttons: 'Search by Date' (selected) and 'Search by Check Number'. Below these, there is a 'Check Type:' dropdown menu set to 'Claim'. To the right of the dropdown are 'From:' and 'To:' date pickers. The 'From:' date is '6/16/2019' and the 'To:' date is '7/17/2019'. A 'Refresh' button is located below the 'Check Type:' dropdown. Three purple arrows point to specific elements: one points to the 'Vendor' menu item, one points to the 'From:' date field, and one points to the 'To:' date field.

**TIP:** The Remittance Advice search window will redisplay with those Remittance Advice results meeting the criteria. Click on an individual check number.

## Remittance Advice Detail Screen

The Remittance Advice Detail Screen displays the RA total payment amount and associated claim detail information.

# My Providers and Offices

All offices associated with the Vendor | TIN are viewable as a Vendor User from this screen.

The screenshot shows the 'My Providers & Offices' section of the Christus Health Plan portal. On the left is a purple sidebar with navigation links: Vendor, Vendor's Claims, Submit a Claim, My Checks, My Providers & Offices (highlighted), Vendor's Referrals, Submit a Referral, Check Eligibility, Check Multiple Eligibilities, My Members, and My Profile. The main content area has a header 'Viewing : Vendor - DOCTOR CUDDLES, PLLC ( 00002716 ) - 919 CUDDLES DRIVE, IRVING, TX, 75063'. Below this is a table of providers with columns: Office Name, Office Number, Office Address, City, State, Zip, Contact Phone, NPI, Provider #, and Provider Name. The table shows one row with 'Selected All' in the first column and 'All' in the others. To the right of the table are 'Optional Filters' for Office Name, Office City, and Provider's Last Name, each with a search box and a 'Refresh' button. A 'Select' link is also present below the table.

Office Name	Office Number	Office Address	City	State	Zip	Contact Phone	NPI	Provider #	Provider Name
Selected All	All	All	All	All	All	All			

## Check Eligibility

The eligibility screen allows you to search, view and print member-specific health plan eligibility and enrollment information.

- Any combination of Member ID # | Policy # | Date of Birth
- Enter Last Name, First Name
- Search

The screenshot shows the 'Member Coverage Lookup' screen in the Christus Health Plan portal. The left sidebar is identical to the previous screen, with 'My Providers & Offices' highlighted. The main content area has a header 'Member Coverage Lookup (enter the following search criteria)'. Below this is a form with fields for Member #, Policy #, Last Name, First Name, and DOB. There is a 'Search' button and a small icon next to the DOB field.


Member Coverage Lookup (enter the following search criteria)				
Member #:	<input type="text"/>	Policy #:	<input type="text"/>	
Last Name:	<input type="text"/>	First Name:	<input type="text"/>	DOB: <input type="text"/>

# Check Multiple Eligibilities

The **multiple eligibilities search** provides the option to search multiple members at one time in addition to PCP assignment.

If additional rows are needed, click the **Add Search Row(s)** button.

After entering the search criteria, click the **Search** button.

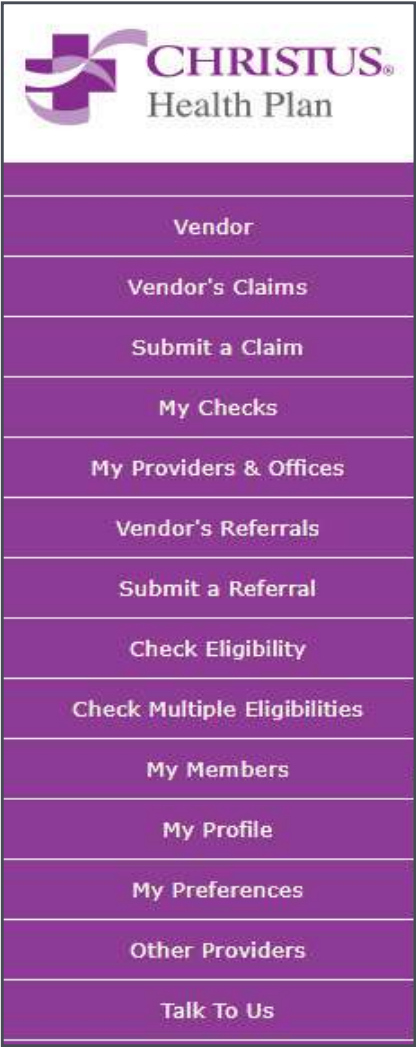


Vendor									
Vendor's Claims	Eligibility Verification Search								
Submit a Claim	Information provided below will be cross-checked with member eligibility records for all programs.								
My Checks	You can search by Member Number, Policy Number, Social Security Number or a combination of Member First Name, Last Name and Date of Birth. A Service Date is always required.								
My Providers & Offices	Remove	Line	Member Number	Member Policy Number	Member SSN	Member Last Name	Member First Name	Member Date of Birth	Date of Service
Vendor's Referrals	<a href="#">Remove</a>	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Submit a Referral	<a href="#">Remove</a>	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Check Eligibility	<a href="#">Remove</a>	3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Check Multiple Eligibilities	<a href="#">Remove</a>	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
My Members	<a href="#">Remove</a>	5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
My Profile	<a href="#">Remove</a>	6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
My Preferences	<a href="#">Remove</a>	7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Providers	<a href="#">Remove</a>	8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Talk To Us	<a href="#">Remove</a>	9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Attachments	<a href="#">Remove</a>	10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Manage Users	<div>*Note: N/A.</div> <div>Add Search Row(s) Number of Search Row(s) 1 ▼</div> <div>Search</div>								



# My Members


The **My Members** tab provides each office with a patient roster.  
This tab is only viewable when logged in as an Office User.



# My Profile

The **My Profile** tab allows you to verify demographic information and office details.

**NOTE:** Contact your Provider Relations Representative to update your office demographics.



Vendor

Vendor's Claims

Submit a Claim

My Checks

My Providers & Offices

Vendor's Referrals

Submit a Referral

Check Eligibility

Check Multiple Eligibilities

My Members

**My Profile**

My Preferences

Other Providers

Talk To Us

Vendor Properties

Name:  
Address:  
Contact Name:  
Contact Email:  
Phone #:

Corporation Properties

Name:  
Address:  
Contact Name:  
Contact Email:  
Phone #:  
EIN:

Mapped Providers and Offices

Last Name	First Name	Number	NPI	Office Name	Office Number	Office Address	City	State	Zip	Country Code	Contact Phone

# Other Providers

Locate a provider for your patients for referral within the CHRISTUS Health Plan network.

Vendor's Claims	<h3>Find a Provider</h3> <p>1. Where do you want to find a provider?</p> <p>Country: <input type="text" value="United States"/></p> <p>City, State or County: <input type="text"/> , <input <input="" county...="" type="text" value=" &lt;Any&gt; "/></p> <p>Or Zip: <input type="text"/></p> <p>within: <input type="text" value="Select a distance..."/></p> <p>2. Which network are you interested in?</p> <p>Network: <input <="" input="" type="text" value=" &lt;Any&gt; "/></p> <p>3. What type of provider are you looking for?</p> <p>Provider Type: <input <="" input="" type="text" value=" &lt;Any&gt; "/></p> <p>Sub-type: <input type="text"/></p> <p>Specialty: <input type="text"/></p> <p>Panel Status: <input <="" input="" type="text" value=" &lt;Any&gt; "/></p> <p>Selected Specialty:</p> <p>4. Would you like to refine your search for provider? <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Last Name: <input type="text"/> *if you know the provider's last name</p> <p>Gender: <input type="radio"/> Male <input type="radio"/> Female <input checked="" type="radio"/> Any</p> <p>Language spoken: <input <="" input="" type="text" value=" &lt;Any&gt; "/></p> <p><input type="button" value="Search"/></p>
Submit a Claim	
My Checks	
My Providers & Offices	
Vendor's Referrals	
Submit a Referral	
Check Eligibility	
Check Multiple Eligibilities	
My Members	
My Profile	
My Preferences	
<b>Other Providers</b>	
Talk To Us	
Attachments	
Manage Users	

Section 2

# Office Screens

# Primary Office Role

A provider's office is assigned by the Vendor User. If necessary, the Primary Office User is allowed to add authorized users within their office who can then utilize the secure website.

## Adding Authorized Users

- Create User Name
- Create Password (Note: Passwords must contain: capital letter, special character, number, at least 6 characters)
- Confirm Password
- First Name
- Last Name
- Email Address

CHRISTUS Health Plan

Vendor

Vendor's Claims

Submit a Claim

My Checks

My Providers & Offices

Vendor's Referrals

Submit a Referral

Check Eligibility

Check Multiple Eligibilities

My Members

User Name	First Name	Last Name	Connected	User Status	Change Status
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			Y	<a href="#">View Roles</a> Active	<a href="#">Disable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Active	<a href="#">Disable</a>
<a href="#">Edit</a>			N	<a href="#">View Roles</a> Disabled	<a href="#">Enable</a>

[Add a User](#)

CHRISTUS Health Plan

Vendor

Vendor's Claims

Submit a Claim

My Checks

My Providers & Offices

Vendor's Referrals

Submit a Referral

Check Eligibility

Check Multiple Eligibilities

My Members

**Adding additional user to DOCTOR CUDDLES, PLLC( 00002716 )**

\*User Name:

\*Password:

\*Confirm Password:

\*First Name:

\*Last Name :


Middle Initial:

\*Email Address:

[Add User](#)

# Office User Role(s)

- Primary User's role: manage Office User access
- Office User's role: view access only



Office

Office's Claims

Submit a Claim

Office's Authorizations

Submit Authorization

Office's Referrals

Submit a Referral

My Checks

Check Eligibility

Check Multiple Eligibilities

My Members

My Providers

My Profile

Be careful! User(s) are logged in. Removing roles will log out a user from their session.

Current User Role(s)

☐ PrimaryWebAccount

☐ WebOffice

Remove

Return

Current User Role(s) Available (Click on Role Name to Add)

[PrimaryWebAccount](#)

[WebOffice](#)



# Claim Status Search

The claim status inquiry enables you to search and view claims.

- Select the Claim Status Search option from the Office Claims tab.
- Enter the claims information to perform the search. Search criteria data fields include member information and claims information, including the service date range.
- Search by Member Number.

The screenshot shows the Christus Health Plan website interface. On the left is a purple sidebar menu with the following items: Office, Office's Claims (highlighted), Submit a Claim, Office's Authorizations, Submit Authorization, Office's Referrals, Submit a Referral, My Checks, and Check Eligibility. The main content area has a header with the Christus Health Plan logo. Below the header, there are three search tabs: Search by Date (selected), Search by Claim Number, and Search by Patient Account Number. The search form includes fields for Claim Type (Claims), Claim Status (ALL), Date Criteria (Date Received), Date From (6/23/2019), Date To (7/24/2019), Member (with a note: \*optional, last name or member #), Policy #, and Provider (All). A Refresh button is located to the right of the Provider field. Below the search form, it says "2 of 2 Claim(s) found." and displays a table with the following columns: Claim #, Provider LastName, Provider #, Member #, Policy #, Member LastName, Member FirstName, Patient Acct #, Ext., C/M #, Claim Status, Service Date From, and Service Date To. The table is currently empty.

## Submit a Claim

Feature coming soon!

The screenshot shows a portion of the Christus Health Plan sidebar menu. The menu items are: Office, Office's Claims, Submit a Claim, Office's Authorizations, Submit Authorization, Office's Referrals, and Submit a Referral. A purple arrow points to the "Submit a Claim" item.

# Office's Authorizations

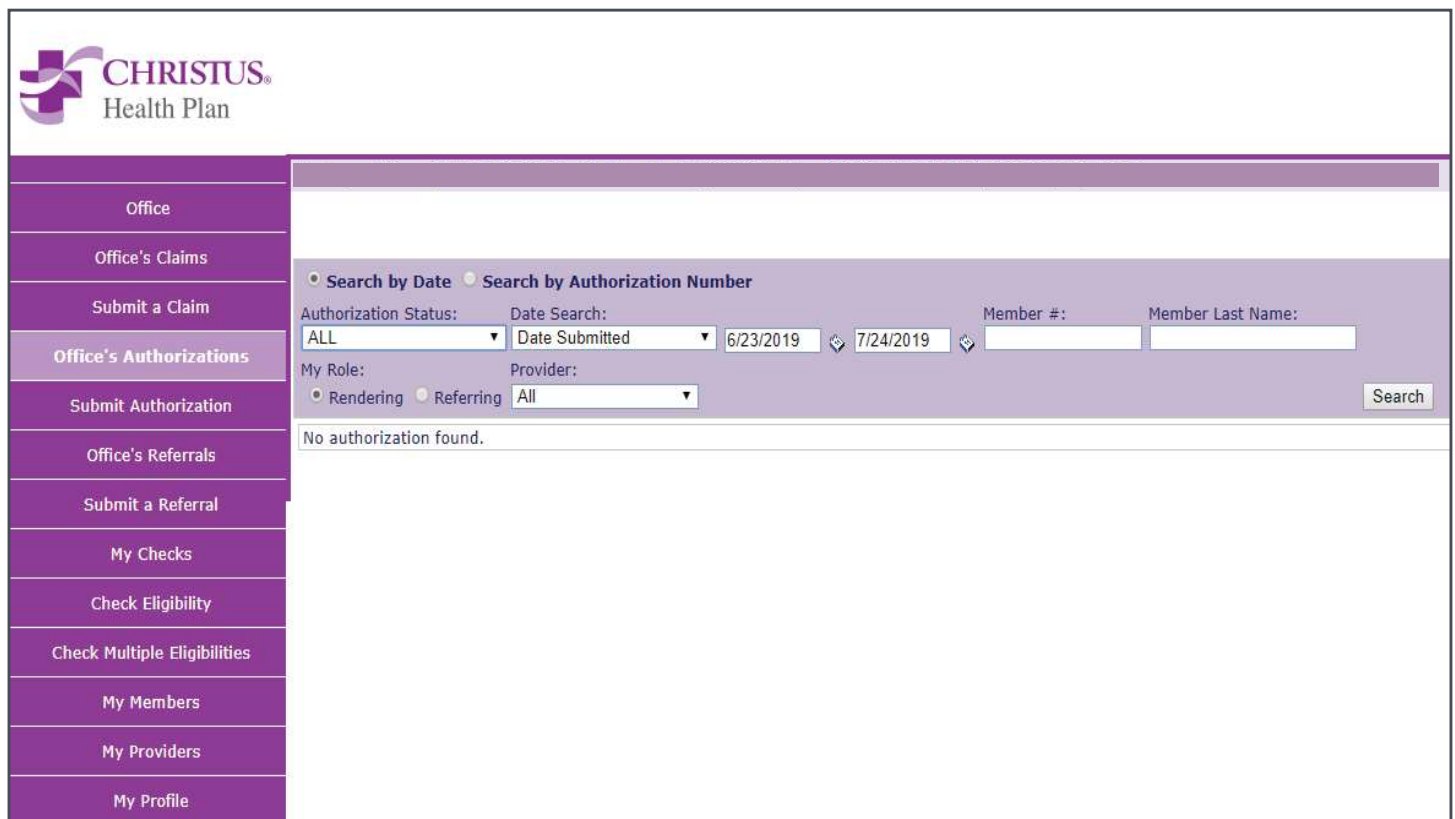
The Office Authorizations status inquiry enables you to search for an authorization status.

Enter the authorization information to perform the search. The Member ID # is required as the minimum search data set.

**Search criteria** data fields include:

- Member Last Name
- Submission Date Ranges

After entering the search criteria, click the **Search** button.



The screenshot displays the Christus Health Plan website's "Office's Authorizations" search page. On the left is a purple sidebar menu with options: Office, Office's Claims, Submit a Claim, Office's Authorizations (highlighted), Submit Authorization, Office's Referrals, Submit a Referral, My Checks, Check Eligibility, Check Multiple Eligibilities, My Members, My Providers, and My Profile. The main content area has a purple header with the Christus Health Plan logo. Below the header, there are two radio buttons: "Search by Date" (selected) and "Search by Authorization Number". The search form includes fields for "Authorization Status" (a dropdown menu showing "ALL"), "Date Search" (a range from "6/23/2019" to "7/24/2019"), "Member #:" (a text input field), and "Member Last Name:" (a text input field). There are also radio buttons for "My Role:" with "Rendering" selected and "Referring" as an option, and a "Provider:" dropdown menu showing "All". A "Search" button is located at the bottom right of the form. Below the search fields, a message states "No authorization found."

# Submit Authorization Screen

## 1 Select a Patient choosing from 3 options below:

- Member #
- Last Name
- First Name
- Member's Date of Birth

## 2 Select Diagnosis Codes


- Select Qualifier
- Type Code in Code Box
- Repeat Process until Complete

## 3 General Information Section

- Select Class (HIPAA)
- Select Type (Initial)
- Select Requested Effective Date
- Select Requested Expiration Date
- Description (Specific Details)

## 4 Select Facility

- Provider Last Name or Facility Name
- Zip Code
- Distance
- Provider Type
- Subtype
- Specialty
- Click Find
- Enter the Procedure Codes and Units (Facility)



Office	
Office's Claims	
Submit a Claim	
Office's Authorizations	
<b>Submit Authorization</b>	
Office's Referrals	
Submit a Referral	
My Checks	
Check Eligibility	
Check Multiple Eligibilities	
My Members	
My Providers	
My Profile	
My Preferences	
Other Providers	
Talk To Us	
Attachments	

**Referring Provider**  
 <none>

**Patient: (Please select a patient)**  
 Member #: Policy #: Last Name: First Name: DOB: [Find](#)

**Diagnosis Codes**  
 # Qualifier: Code: # Qualifier: Code: # Qualifier: Code:  
 1 <none> 2 <none> 3 <none>

**General Information**  
 Class: Type: Requested Eff. Date: Requested Exp. Date:  
 <none> <none> [Find](#)  
 Description:

**Additional Information(Show)**

**Facility**  
 Last Name: Zip: Distance: Provider Type: Sub-type: Specialty: [Find](#) [show all filters](#)  
 # Procedure Code: Units: # Procedure Code: Units: # Procedure Code: Units:  
 1 2 3

# My Checks

My Checks enables you to search, view and print a Remittance Advice summary report of paid claims. The initial default display will be those RAs specific to the users associated with the Vendor ID.

**Search by Date or Check Number Search Criteria** (Check Typer: Claim; From: Date of Service From-To).

The screenshot shows the Christus Health Plan logo at the top left. Below it is a vertical navigation menu with the following items: Office, Office's Claims, Submit a Claim, Office's Authorizations, Submit Authorization, Office's Referrals, and Submit a Referral. The main content area has a header with two radio buttons: "Search by Date" (selected) and "Search by Check Number". Below this are four input fields: "Provider:" (a dropdown menu), "Vendor:" (a dropdown menu), "Check Type:" (a dropdown menu with "Claim" selected), and "From:" (a date field with "7/24/2019" and a calendar icon). To the right of the "From:" field is a "To:" field, also with "7/24/2019" and a calendar icon. A "Refresh" button is located below the "Check Type:" field. At the bottom of the search area, a message states "No checks found."

## Check Eligibility

The eligibility screen allows you to search, view and print member-specific health plan eligibility and enrollment information.

- Any combination of Member # | Policy # | Date of Birth
- Enter the Last Name, First Name
- Search


The screenshot shows the Christus Health Plan logo at the top left. Below it is a vertical navigation menu with the following items: Office, Office's Claims, Submit a Claim, Office's Authorizations, Submit Authorization, Office's Referrals, and Submit a Referral. The main content area has a header with the text "Member Coverage Lookup (enter the following search criteria)". Below this are four input fields: "Member #:" (a text field), "Policy #:" (a text field), "Last Name:" (a text field), and "First Name:" (a text field). To the right of the "Last Name:" and "First Name:" fields is a "DOB:" field with a calendar icon. A "Search" button is located to the right of the "DOB:" field.

# Check Multiple Eligibilities

The multiple eligibilities search provides the option to search multiple members at one time in addition to PCP assignment.

If additional rows are needed, click the Add Search Row(s) button.

After entering the search criteria, click the Search button.




Office									
Office's Claims	Eligibility Verification Search								
Submit a Claim	Information provided below will be cross-checked with member eligibility records for all programs.								
Office's Authorizations	You can search by Member Number, Policy Number, Social Security Number or a combination of Member First Name, Last Name and Date of Birth. A Service Date is always required.								
Submit Authorization	Remove	Line	Member Number	Member Policy Number	Member SSN	Member Last Name	Member First Name	Member Date of Birth	Date of Service
Office's Referrals	<a href="#">Remove</a>	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Submit a Referral	<a href="#">Remove</a>	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
My Checks	<a href="#">Remove</a>	3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Check Eligibility	<a href="#">Remove</a>	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Check Multiple Eligibilities	<a href="#">Remove</a>	5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
My Members	<a href="#">Remove</a>	6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
My Providers	<a href="#">Remove</a>	7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
My Profile	<a href="#">Remove</a>	8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
My Preferences	<a href="#">Remove</a>	9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Providers	<a href="#">Remove</a>	10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Talk To Us	<div> <a href="#">Add Search Row(s)</a> Number of Search Row(s) <input type="text" value="1"/> </div> <div> <input type="button" value="Search"/> </div>								

\*Note: N/A.

# My Members

Access Membership Rosters assigned to your office.



Office

Office's Claims

Submit a Claim

Office's Authorizations

Submit Authorization

Office's Referrals

Submit a Referral

Member Roster for Month:

Effective Date: 

July

2019

Provider: 

All

Find

Print

View members by last name initial:

ALL

 | 

A

 \* 

B

 \* 

C

 \* 

D

 \* 

E

 \* 

F

 \* 

G

 \* 

H

 \* 

I

 \* 

J

 \* 

K

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L

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M

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N

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O

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P

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Q

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R

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S

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T

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U

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V

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W

 \* 

X

 \* 

Y

 \* 

Z

No members were found.

# My Providers

Access providers located in your office.



Office

Office's Claims

Submit a Claim

Office's Authorizations

Submit Authorization

Office's Referrals

Submit a Referral

My Checks

Check Eligibility

Check Multiple Eligibilities

My Members

My Providers

Select your provider:


NPI	Provider #	Provider Name
Selected All	All	All



# My Profile

Verify demographic information and office details.

**Note:** Contact your provider relations representative to update your office demographics.



Office

Office's Claims

Submit a Claim

Office's Authorizations

Submit Authorization

Office's Referrals

Submit a Referral

My Checks

Check Eligibility

Check Multiple Eligibilities

My Members

My Providers

My Profile

Office Properties

Name:

Address:

Contact Name:

Contact Email:

Phone #:

Fax:

Wheelchair Access: N

Available After Hours: N

Number Of Physicians: 1

Extensors:

Facility Operating Number:

Office Hours

Monday: 8:00 AM - 5:00 PM

Tuesday: 8:00 AM - 5:00 PM

Wednesday: 8:00 AM - 5:00 PM

Thursday: 8:00 AM - 5:00 PM

Friday: 8:00 AM - 5:00 PM

Saturday:

Sunday:

Mapped Providers

Last Name

First Name

Number

NPI

Languages

Name

Use

Additional Service(s)

# My Preferences

This screen is used to customize user view.

- Historical Check History
- Number of Claims per Page
- Member or Policy # Search
- Select Individuals Provider or Multiple View

1. Select provider:

NPI

Provider #

Provider Name

Selected All

All

All

Select

2. Select provider type:

☐ Dental ☐ Medical

☒ Yes ☐ No

☐ Yes ☒ No

☒ Yes ☐ No

3. Show EOP after submitting a claim:

50

4. Show details after submitting a referral:

Last Month

5. Default to Assignment of Benefits:

11-Office

6. How many items to display per page:

Member #

7. How many days back for claims lookup:

Service Date(s)

8. Default to Place of Service on Claim Submission page (HCFA claims only):

U.S. dollar

9. Member Number Search Option ( Member Number / Policy Number )


10. Submit a claim default options:

11. Default billing currency:

Save

# Other Providers

Locate a provider for your patients in order to refer within the CHRISTUS Health Plan Network.



Office

Office's Claims

Submit a Claim

Office's Authorizations

Submit Authorization

Office's Referrals

Submit a Referral

My Checks

Check Eligibility

Check Multiple Eligibilities

My Members

My Providers

My Profile

My Preferences

Other Providers

Talk To Us

### Find a Provider

1. Where do you want to find a provider?

Country:

City, State or County:  ,

Or Zip:

within:

2. Which network are you interested in?

Network: 

3. What type of provider are you looking for?

Provider Type: 

Sub-type:

Specialty:

Panel Status: 

Selected Specialty:

4. Would you like to refine your search for provider? ☒ Yes ☐ No

Last Name:  \*If you know the provider's last name

Gender: ☐ Male ☐ Female ☒ Any

Language spoken:

# To Request Your Password

If you are not able to log in to the system because you have forgotten your password:

- At the login window, click the **Forgot Password?** link
- Select Type of User (Vendor or Office)
- Enter **Office** or **Vendor Number**
- Enter Access Code
- Enter Phone Number (Office User)
- Tax ID (Only Vendor User)
- Enter User Name
- On the confirmation screen, enter new password, confirm password
- Click Reset Password



The screenshot shows a login interface with a light purple background. At the top, a blue banner contains the text "Please login by entering your assigned username and password". Below this, there are two input fields: "User Name" and "Password". To the right of these fields is a "Logon" button. At the bottom left, there are two links: "Click here to create a new user..." and "Forgot Password". A purple arrow points to the "Forgot Password" link.

Please login by entering your assigned username and password

User Name

Password

Logon

[Click here to create a new user...](#)

[Forgot Password](#)

**For additional assistance,  
please contact your  
Provider Relations Representative.**

Provider Relations Rep. Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_