



NY PHP Provider Portal

# Login Page

<https://php.healthsmart.com>

- From the login page, existing users can sign in to their registered account, access our self-service tools to reset a forgotten password. New users can initiate the automated registration process.

A screenshot of the PHP login page. The page has a blue header bar. On the left, there is a 'Log In' section with two input fields for 'User Name' and 'Password', and a blue 'Sign in' button. Below this is a 'Self Service Tools' section with four links: 'Provider Registration', 'Member Registration', 'I Forgot My Password', and 'I need my User Name'. On the right, there is a 'Welcome to Partners Health Plan' message and a link to 'Privacy Policy' at the bottom.

# Provider Registration

- Automated provider registration allows new web-users near instant access. Automated registration is available for all NY PHP network participating providers, and out-of-network providers who have valid claims records on file.

Provider Registration.

## Register

\*Provider Tax ID

\*First Name

\*Last Name

\*Practice Name

\*Address

\*City

\*State

\*Zip

\*Phone Number

\*User Name  
  
User Name is Required

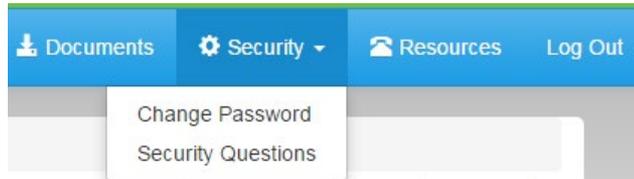
\*Password  
  
Password is Required

\*Confirm Password

Register

# Forgotten Password Service

- Once registered, a user can set their FPS questions and answers, which will allow them to unlock and reset their password should they ever forget it.



🔒 Question and Answer 5 questions max

I want to use a system defined question ▼

**\*System Question**

WHAT IS YOUR FAVORITE TV SHOW? ▼

**\*Answer**

Answer

Save Question and Answer

☰ Your active security questions and answers

Question	Answer	
What is your Favorite Sports Team?	WJU	<a href="#">Remove</a>
What is your Favorite Color?	BLUE	<a href="#">Remove</a>
What is your Mothers Maiden Name?	HERNDON	<a href="#">Remove</a>
WHAT IS YOUR DOG'S NAME?	MOOSE	<a href="#">Remove</a>
WHAT IS THE MONTH OF YOUR BIRTH?	OCTOBER	<a href="#">Remove</a>

# Forgotten Password Service

- To unlock and reset the password, the user must simply answer the questions with the answers they previously saved.

## Self Service Tools

 Provider Registration

 Member Registration

 I Forgot My Password

 I need my User Name

 Please answer your security question.

Question	Answer
What is your Favorite Sports Team?	WVU
What is your Favorite Color?	BLUE
What is your Mothers Maiden Name?	HERNDON
WHAT IS YOUR DOG'S NAME?	MOOSE
WHAT IS THE MONTH OF YOUR BIRTH?	OCTOBER

Next Step

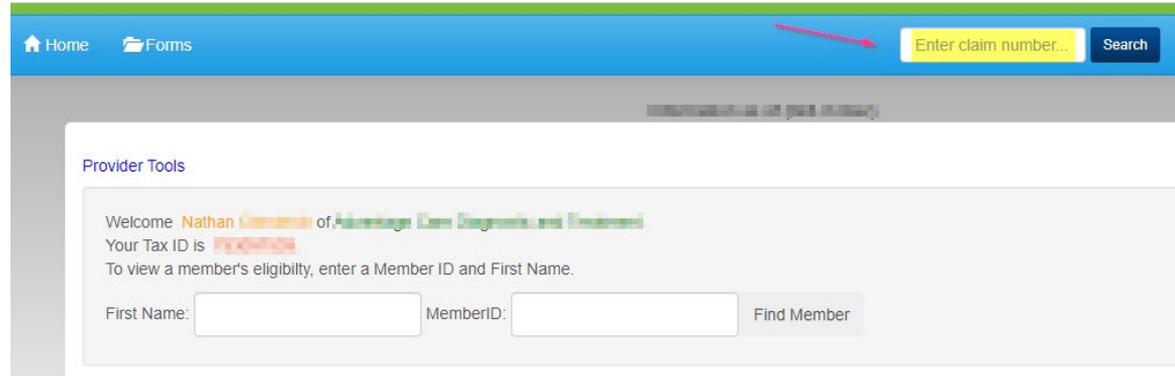
 Define your new Password

Change Password

# Quick Claim Search

- The main menu bar contains a claim number search box that can be used to quickly view a single claim's detail without searching for a member first. If you know the claim number, enter in this box and click Search.



The screenshot shows the top navigation bar of the HealthSmart website. On the left, there are links for 'Home' and 'Forms'. On the right, there is a search bar with the placeholder text 'Enter claim number...' and a 'Search' button. A red arrow points to the search bar. Below the navigation bar, the main content area is titled 'Provider Tools'. It displays a welcome message for 'Nathan [redacted]' of 'Advantage Care [redacted]'. Below the welcome message, it says 'Your Tax ID is [redacted]' and 'To view a member's eligibility, enter a Member ID and First Name.' There are two input fields: 'First Name:' and 'MemberID:'. A 'Find Member' button is located to the right of the 'MemberID' field.

# Member Search

- Using the Participant's first name and ID number, providers can view eligibility, ID cards, claims history and EOB reprints (if history is present for their Tax ID) conveniently from one page.

## Provider Tools

Welcome **Nathan** of Advantage Care Diagnostic and Treatment.  
Your Tax ID is **123456789**.  
To view a member's eligibility, enter a Member ID and First Name.

First Name:  MemberID:

Viewing Member: TRACY | E |

-  Patient Eligibility Information
-  Accums/Deductibles
-  ID Card
-  Claims Search

# Eligibility Display

- Eligibility information includes group name and number, and effective date for the Participant in question. Users may also view the Participant's PCP and Care Manager details.

## Patient Eligibility Information

Select Benefit Type:

Group Name: PARTNERS HEALTH PLAN / 4500

Plan Name: PHP CARE COMPLETE FIDA / 1 /

Effective Date: 4/1/2016

Primary Care Physician: JAMES SAUNDERS GLEN HEAD, NY | Phone: (516) 224-4774

Care Manager Name: COLLEEN HICKLING

Phone: (516) 224-4774

Email: COLLEEN.HICKLING@PHPCARE.COM

# Accums/Deductibles

- This area displays individual and family related deductible and out of pocket information if available on the plan.

↑ Accums/Deductibles		
Individual		
Deductibles:	Met	Remaining
In Network:	\$0.00	\$0.00
Out of Network:	\$0.00	\$0.00
Out Of Pocket:	Met	Remaining
In Network:	\$0.00	No Max
Out of Network:	\$0.00	No Max
Family		
Deductibles:	Met	Remaining
In Network:	\$0.00	\$0.00
Out of Network:	\$0.00	\$0.00
Out Of Pocket:	Met	Remaining
In Network:	\$0.00	No Max
Out of Network:	\$0.00	No Max

# ID Card Display

- Clicking [ID Card](#) opens a PDF image of the Participant's actual ID card. This image can be saved, emailed, or faxed from the site via the [Select Action](#) menu.



# Claims Search

- The portal will automatically display the last 12 months of claims for the selected member that match the provider ID on the registered account.
- Use the column filters to narrow the list down to matching claims. Each column can also be sorted by clicking the column label.
- Clicking a claim row will display the claim detail window, and clicking the EOB icon will show the explanation of benefits/payment if available.
- Use the Export to Excel option to produce a spreadsheet of all listed claims.

Q Claims Search

Show 15 per page [Export to Excel](#)

Type	Claim#	Plan	Group	Provider	From	Thru	Status	Charged	Paid	EOB
All					12/16/2019	12/16/2020	All			
	██████	1	PARTNERS HEALTH PLAN	SERVICES FOR THE UNDERSERVED	3/27/2020 12:00:00 AM	3/27/2020 12:00:00 AM	Processed	\$237.29	\$237.29	
	██████	1	PARTNERS HEALTH PLAN	SERVICES FOR THE UNDERSERVED	3/27/2020 12:00:00 AM	3/27/2020 12:00:00 AM	Processed	\$237.29	\$0	
	██████	1	PARTNERS HEALTH PLAN	SERVICES FOR THE UNDERSERVED	3/27/2020 12:00:00 AM	3/27/2020 12:00:00 AM	Processed	\$565.93	\$565.93	
	██████	1	PARTNERS HEALTH PLAN	SERVICES FOR THE UNDERSERVED	3/26/2020 12:00:00 AM	3/26/2020 12:00:00 AM	Processed	\$237.29	\$237.29	

# Submit Claim Forms

- Professional and Institutional claim forms can be submitted through the portal via the “Submit Claim Forms” main menu option.
- Select the appropriate claim form type from the sub-menu.
- Follow the on-screen instructions to download the blank PDF form, fill it out on your computer, and upload the completed form to the portal.

The screenshot shows the 'Submit Claim Forms' page on the NY PHP Provider Portal. The top navigation bar is blue with a search box on the right containing the text 'Enter claim number...' and a 'Search' button. A dropdown menu is open under the 'Submit Claim Forms' link, showing 'Professional' and 'Institutional' options. The main content area is titled 'Professional Claim Form Uploader' and contains the following text:

If you are an authorized PHP provider, please follow the steps below to submit a claim.

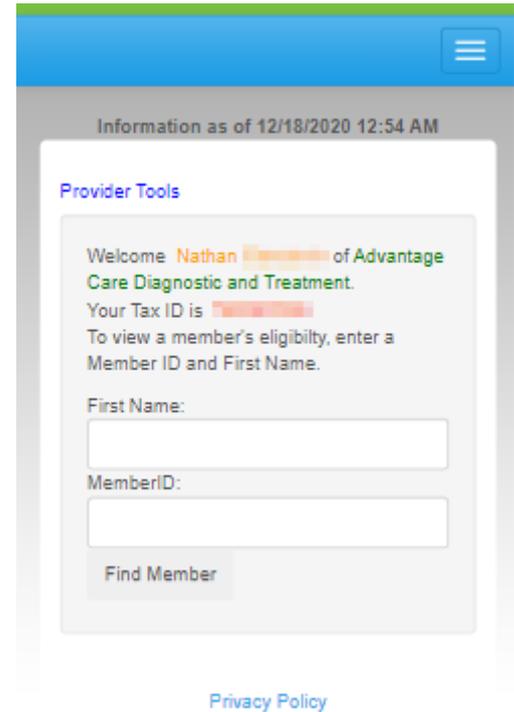
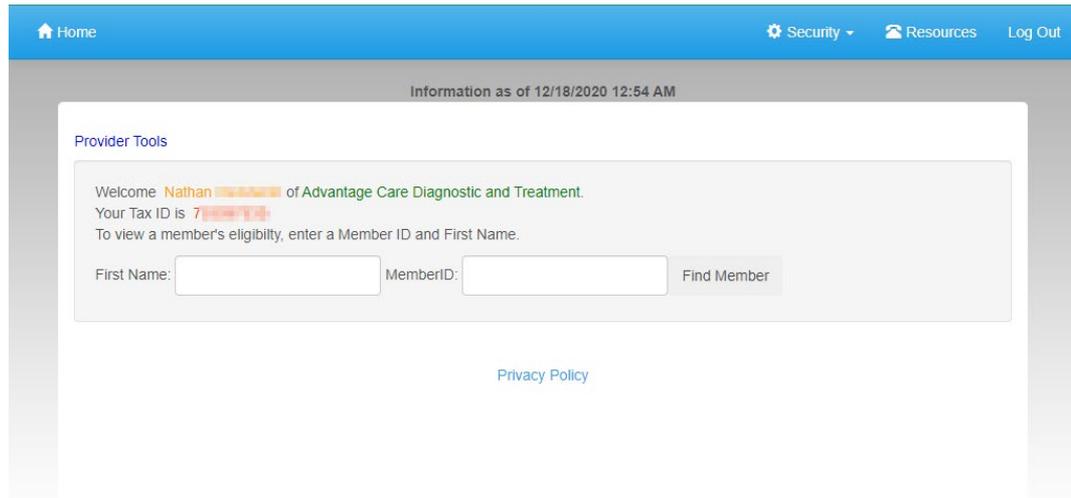
**Claim Submission Procedure:**

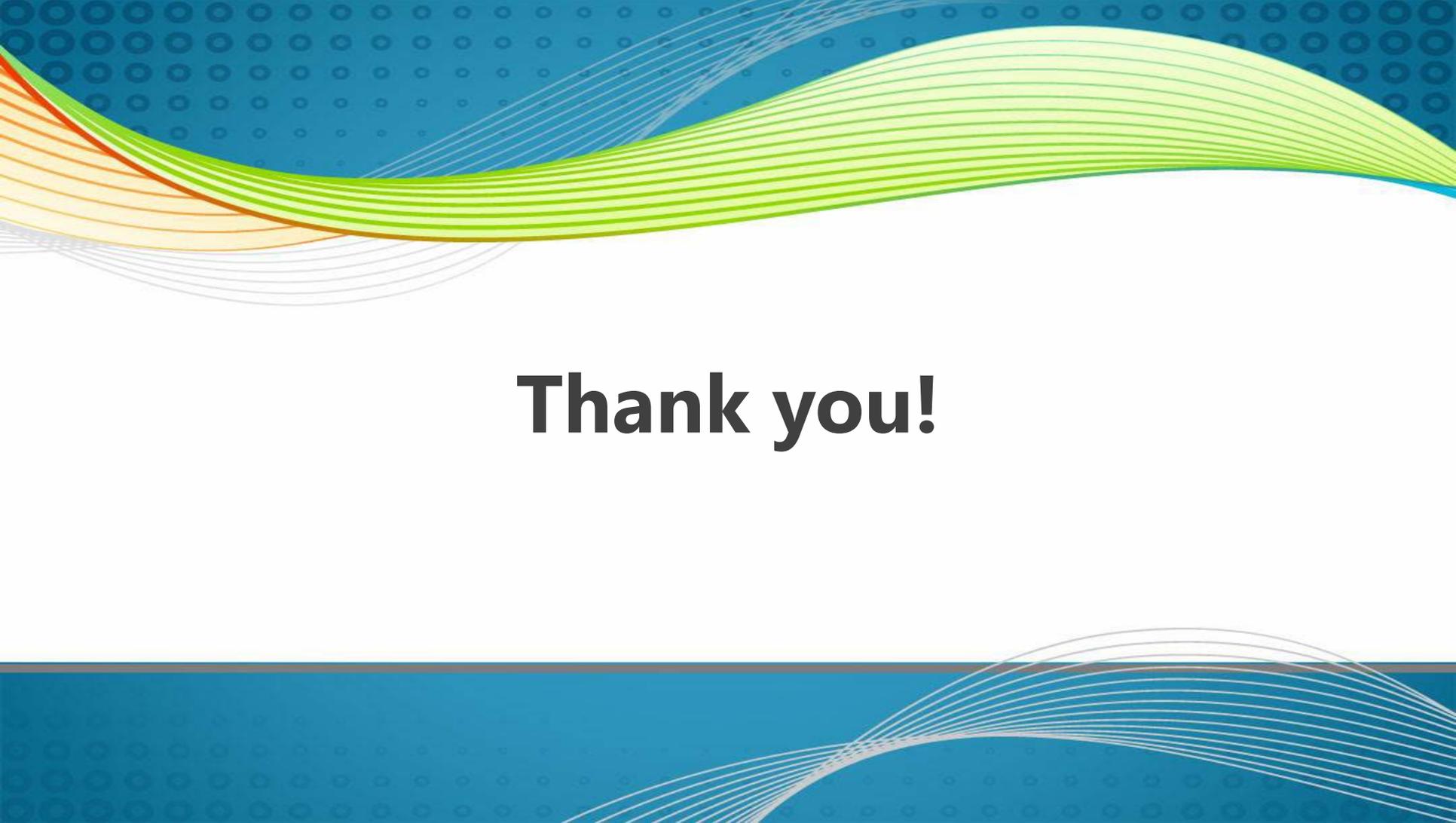
1. Click the "Download Claim Form" link below to download the Professional blank Claim Form. The Claim Form requires Adobe Acrobat Reader. Click [here](#) to download it for free.
2. Fill the Claim Form out on your computer, and save it.
3. Upload the saved version using the "Upload Claim File" section of this page.
4. Use the Add Files button to upload your completed form. Once the file is selected, click the Start button to upload an individual document to our portal. Multiple files can be uploaded, but they must all be the same form type. Upload each document separately or use the Start Upload button to upload them all at once.
5. Once the document(s) have completed uploading, they will show "Uploaded" next to them. The process is now complete\*.

At the bottom of the page, there is a 'Download Claim Form' button and an 'Upload Claim File' section with a '+ Add files...' button and a 'Start upload' button.

# Mobile View

- The site is mobile friendly, and can be accessed using both iPhone and Android web browsers.





**Thank you!**