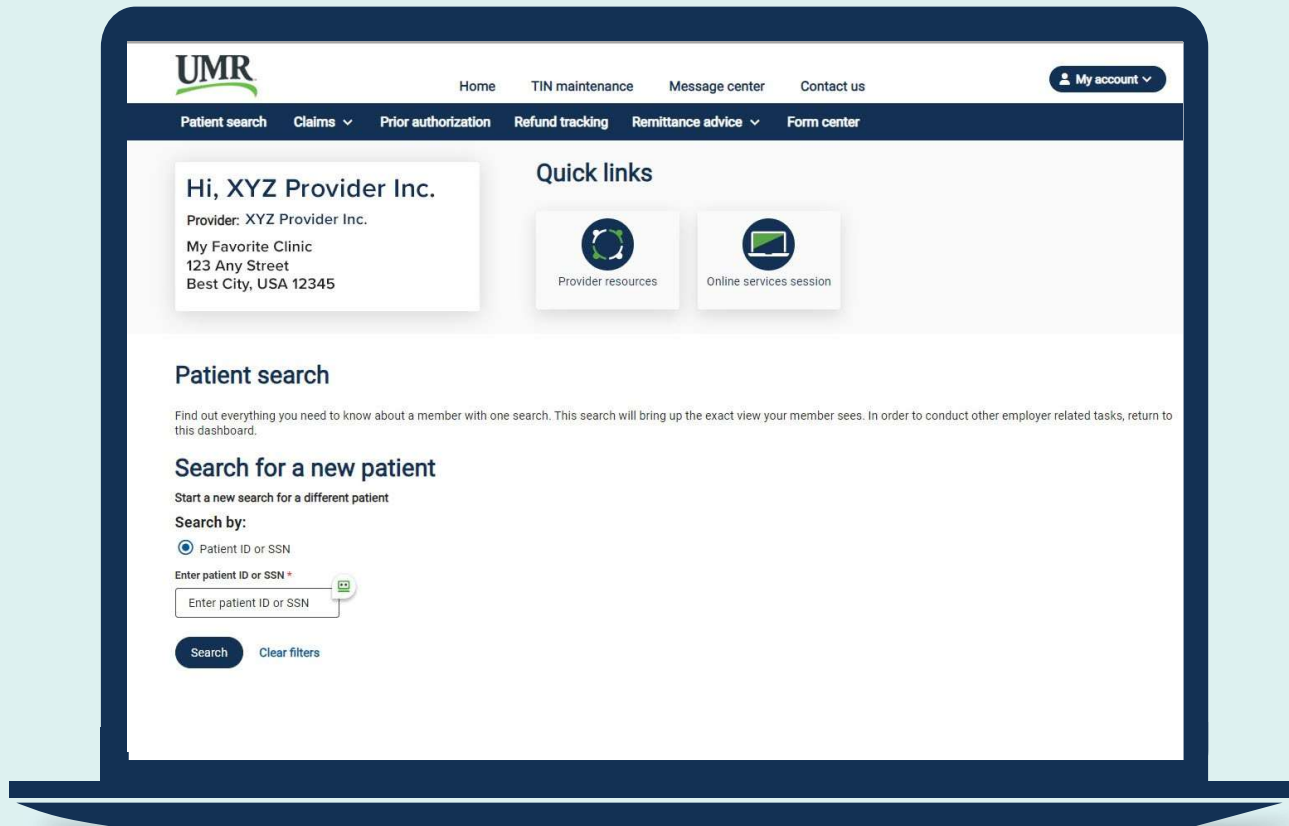




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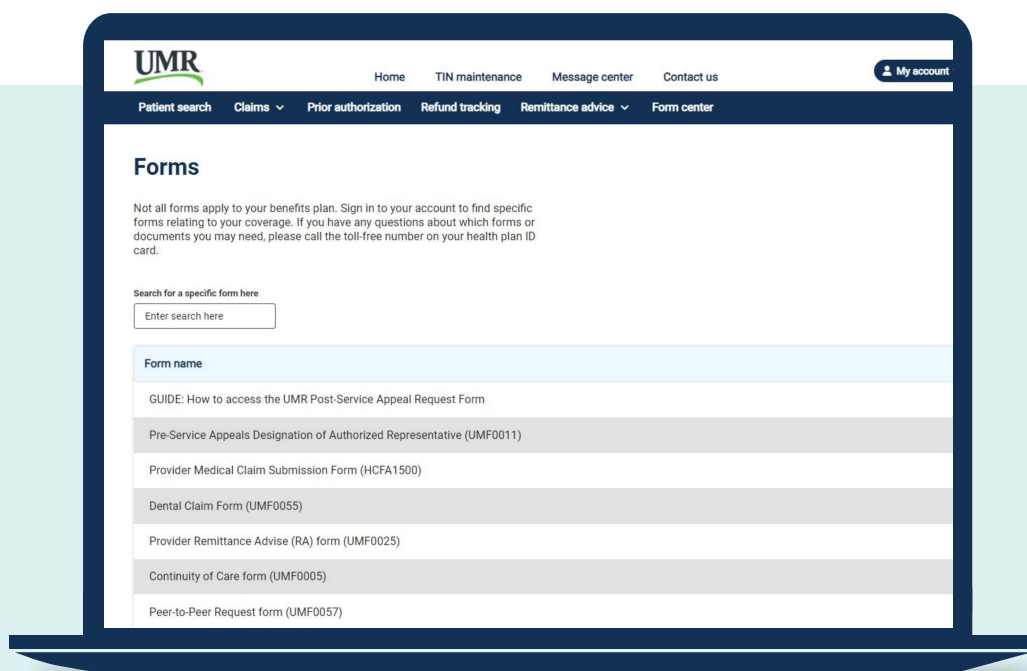
(Fictionalized data)

Online services

umr.com provider quick guide

In today's world, managing patient benefits can seem complicated and time consuming. But at UMR, we provide you with the online tools you need to quickly and easily:

- Search for patients to view their coverage summary benefits, claims and networks
- Search for patient-specific prior authorization requirements
- Complete the prior authorization process online
- Assist patients with questions about their benefits and claims
- Access provider forms to submit requests, claims and more
- Download and view patient coverage details



The screenshot shows a laptop displaying the UMR website. The header includes the UMR logo, navigation links (Home, TIN maintenance, Message center, Contact us), and a 'My account' button. Below the header is a secondary navigation bar with links: Patient search, Claims, Prior authorization, Refund tracking, Remittance advice, and Form center. The main content area is titled 'Forms' and contains a message: 'Not all forms apply to your benefits plan. Sign in to your account to find specific forms relating to your coverage. If you have any questions about which forms or documents you may need, please call the toll-free number on your health plan ID card.' Below this is a search bar labeled 'Search for a specific form here' with the placeholder text 'Enter search here'. A table lists various forms:

Form name
GUIDE: How to access the UMR Post-Service Appeal Request Form
Pre-Service Appeals Designation of Authorized Representative (UMF0011)
Provider Medical Claim Submission Form (HCFA1500)
Dental Claim Form (UMF0055)
Provider Remittance Advise (RA) form (UMF0025)
Continuity of Care form (UMF0005)
Peer-to-Peer Request form (UMF0057)

(Fictionalized data)



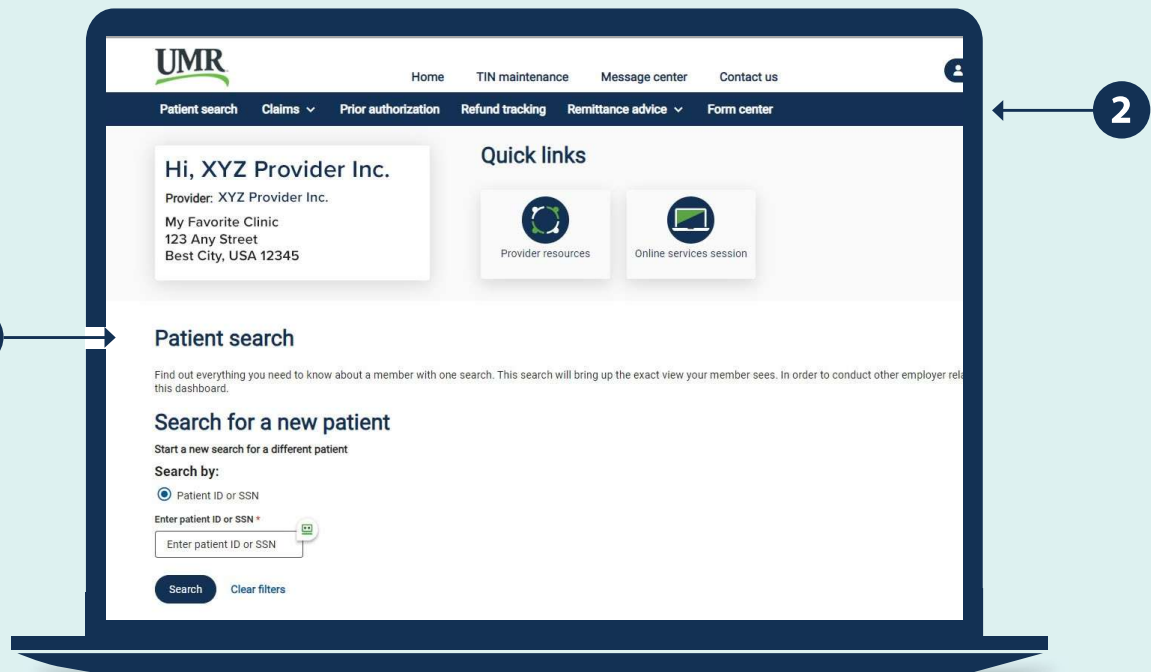
Access the most common UMR forms online

You have access to the most common UMR forms right at your fingertips. Quickly and easily complete claims, appeal requests and referrals, all from your computer.

Provider home page

Getting started using provider online services

Accessing **umr.com** is easy. Select **Sign in** at the top right corner of the page. Next, select **Provider** in the **I am a...** drop-down. Sign in with your current One Healthcare ID or create an account.



(Fictionalized data)

1 Patient search

Start here when searching for a patient. Search by patient ID or SSN. Then choose what information you would like to see about that patient.

2 Horizontal navigation bar

You can also access common functions such as, **TIN maintenance**, **Claims**, **Prior authorization**, **Refund tracking**, **Remittance advice**, and **Form center**.

Searching for patients

Need to look up coverage details or claims for a patient?

Using the patient search feature, you can search by patient ID or SSN to navigate to the data you need to view.

Accessing patient information

Using the patient search feature you'll get information regarding patient coverage details, including claims, persons covered and benefits.

Using summary view

Select **Summary view** from the drop-down menu and you'll see a detailed summary of coverage for members.

By selecting **Summary view**, you can get information on a patient's complete care plan. Quickly navigate through options to see an overview of the patient's medical and dental benefits, claims status and providers. Locate benefit percentages, copays, and annual maximums and out-of-pocket costs.

Other information in this section include:

- Coverage types
- Dental coverage
- Claims overview and status
- EOBs
- Provider network for medical and dental coverage

UMR

HomeTIN maintenanceMessage centerContact us

Patient searchClaimsPrior authorizationRefund trackingRemittance adviceForm center

Hi, XYZ Provider Inc.
Provider: XYZ Provider Inc.
My Favorite Clinic
123 Any Street
Best City, USA 12345

Quick links

Provider resources

Online services session

Patient search
Find out everything you need to know about a member with one search. This search will bring up the exact view your member sees. In order to conduct other employer related searches, you must be logged in to this dashboard.
Search for a new patient
Start a new search for a different patient
Search by:

Patient ID or SSN

Enter patient ID or SSN

Search

Clear filters

Medical benefits

Copays

Office visit	Specialist	Urgent care	Emergency room	Hospital admission
\$15	\$25	\$20	\$350	\$250

Benefit percentage

Plan pays	You pay
90%	10%

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HomeTIN maintenanceMessage centerContact us

Patient searchClaimsPrior authorizationRefund trackingRemittance adviceForm center

Patient found
You are now viewing: Code Blank (09/08/1966), ID 99934427
Select patient: Code Blank 1... View: Summary Search
Coverage summary

Coverage type	Plan type	Effective date	Term date	Class	Plan number
Vision	Employee + spouse	09/14/2023	Active	A03	769999999
Dental	Employee + spouse	09/14/2023	Active	A04	769999999
Medical	Family	02/23/2022	Active	A03	769999999

Medical benefits

Copays

Office visit	Specialist	Urgent care	Emergency room	Hospital admission
\$15	\$25	\$20	\$350	\$250

Benefit percentage

Plan pays	You pay
90%	10%

(Fictionalized data)

Using claims view

Selecting **Claims** from the navigation bar allows you to easily access patient details, including claims and EOBs. Use this section to search for claims by patient name, time period and status. You can also search by coverage type and filter the results using the search tool bar.

View detailed claim activity information, including claim details, EOBs, claim status, amount paid by plan and more.

Have a denied claim?

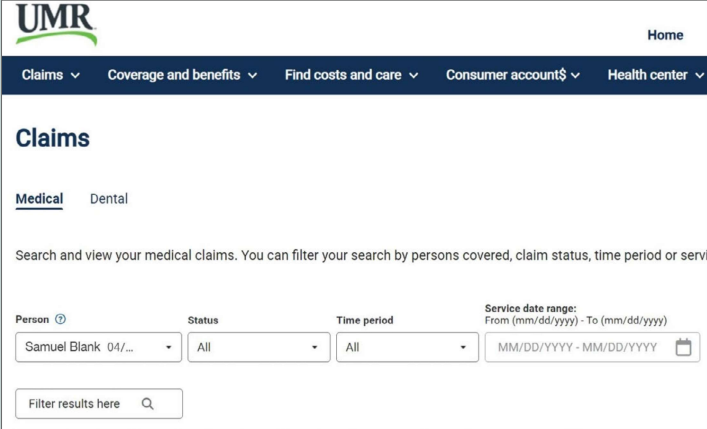
The claims summary view shows the status of each claim as either completed or denied. When a claim is denied and needs action taken, it will be highlighted with a link for the patient to provide other accident details or insurance information directly from the claims summary page.

Looking for more information?

Simply click the **View claim details** link under **Claims information** to access a detailed overview of the claim, including patient name, amount billed, breakdown of service and payment details.

Other information in this section:

- Advanced patient search option to search by claim number, check number, or patient account number
- Download and print claims activity details



The screenshot shows the UMR website's 'Claims' section. At the top is the UMR logo and a 'Home' link. Below is a navigation bar with links: 'Claims', 'Coverage and benefits', 'Find costs and care', 'Consumer account\$', and 'Health center'. The 'Claims' section is active, with 'Medical' and 'Dental' tabs. Below the tabs, a search instruction reads: 'Search and view your medical claims. You can filter your search by persons covered, claim status, time period or service date range.' The filters are: 'Person' (dropdown with 'Samuel Blank 04/...'), 'Status' (dropdown with 'All'), 'Time period' (dropdown with 'All'), and 'Service date range' (calendar icon with 'From (mm/dd/yyyy) - To (mm/dd/yyyy)'). A 'Filter results here' button is at the bottom. A note '(Fictionalized data)' is at the bottom right.



New features

As a provider, you can now search by date range and claim status to easily identify specific claims. Claims denied due to needing Other insurance/ Accident details are clearly identified.

Using benefits view

Selecting the **Benefits view** from the **Patient search** feature provides an overview of patient benefits. Use this feature to search by patient name, coverage type, network level and benefit period.

Information in this section:

Overview of benefit coverage

- Copays for office visits, specialists, urgent care, ER and hospital admission.
- Benefit percentages paid by patient and plan.

Quickly identify how much patients have spent

- The benefits accumulator highlights how much a patient has used toward various benefits totals in their plan. It's simple to identify if a deductible or out-of-pocket maximum has been met, and to see how much is left before it is met.

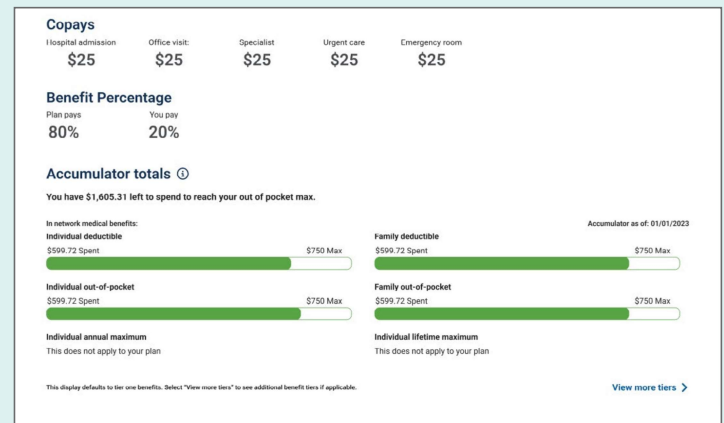
Additional benefits drop-down

- Select a benefit category from the drop-down menu to access detailed information for each coverage type in the plan.
- View coverage details, including dollar amount maximums, amounts applied YTD and coverage included.

Enhanced benefits display

Only information for a patient's particular benefit coverage is presented. Previously, all benefit information was presented in one screen.

Additional benefits are now available on mobile view!



(Fictionalized data)

Using prior authorization

Selecting Prior authorization from the navigation bar will allow you to quickly access plan-specific requirements.

Perform a new search

At minimum, select the appropriate Place of service from the drop-down menu, enter up to five procedure codes and choose the desired date of service. For the most focused results, it is suggested to enter a related diagnosis and to select a provider via a tax ID number (TIN) search.

The tool will then display results indicating whether prior-authorization or medical necessity are required, as well as identify when there is no coverage for the service. If results indicate a request is necessary, the tool will store the information provided during the initial requirement search and prompt you to enter any additional information required to process the request, such as:

- Treatment type
- Length of request
- Additional procedure or diagnosis codes
- Clinical documentation

Prior authorization search

I want to view:

Select family member

- ☒ Cade Blank (09/08/1965)
- ☐ Elizabeth Blank (09/08/1965)
- ☐ Sam Blank (09/08/1965)

[Search](#)

Required fields are marked with an asterisk.

All inpatient stays require prior authorization.

Place of service

Select

Procedure code or description

Enter up to five codes

Enter a procedure code

Diagnosis code or description (optional)

Enter diagnosis code

Service date

MM/DD/YYYY

Rendering provider tax ID number (TIN)

eg. 1234567

[Select provider](#)

UMR

Home TIN maintenance Message center Contact us

My account

Patient search Claims Prior authorization Refund tracking Reimbursement advice Form center

Prior authorization

View your draft and submitted cases

Enter up to five codes

[Update cases, check status or complete drafts >](#)

View individual cases

[Search by transaction number >](#)

Check if prior authorization is required or submit a request

[View >](#)

(Fictionalized data)



Have an existing case?

Click on one of three icons near the top of the page to:

- View status of submitted cases for this patient – view the status of submitted cases, take action or update existing cases, or finish a previously saved (draft) transaction.
- View decision history – retrieve the results of a previous requirement search using a Decision ID.
- View my dashboard – check the status of a case submitted for any patient.



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