



Provider Portal

Overview of provider portal functionality:

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Login:

Use existing username/password to login to the provider portal or click the Create account button to setup an account.



Sign into your account

Username

Password

Submit

Create account

[Forgot your username or password?](#)



**Third Party Administration.
First-Class Results.**

Online Provider Portal

Welcome to the Ascension Insurance Provider Portal!

This site will allow you to:

- Verify eligibility
- View claims history and payment status
- Submit and Inquire on the status of prior authorizations

SmartHealth[®]

dell children's
Health Plan

ABS Automated
Benefit Services
AUTOMATED BENEFIT SERVICES, INC.

USHL
US Health and Life
US HEALTH AND LIFE INSURANCE COMPANY

Ascension
Personalized Care

[Legal and Privacy](#)

Select Language



Powered by [Google Translate](#)

Eligibility:

Click on the Eligibility tab to view the PCP panel report, check eligibility or view schedule of benefits.



You are currently logged in as: ABS Test 2 Provider

[Messages](#) [Profile](#) [Logout](#)

Eligibility Claims Authorization & Referrals ▾ Resources

Eligibility

To search for a patient select "All Providers" from the drop down menu, enter the Member ID number(s) **or** the patient's last name and DOB.

If entering multiple Member ID numbers, press the "Enter" key after each number.

Select Provider:

All Providers ▾

Eligibility

First Name:

Member ID(s):

Date of Birth:

Last Name:

Search



To view Terminated Patients uncheck the box above

Claims:

Click on the claims tab to search for a claim or submit a claim appeal, reconsideration or overpayment dispute.

Eligibility Claims Authorization & Referrals Resources

In order to search for a claim, you must have either the MemberID or the Claim Number. If you do not have either number, please select the Eligibility tab on the menu bar. There you may search for the Patient by Last Name and Date of Birth to obtain the MemberID. Once you have the MemberID, you may return to the Claims screen to continue your search using the MemberID and appropriate date range. If you are searching for a Dependent's claim, you'll need to use the Eligibility search to get the Dependent number. Use the Dependent's Last Name and Date of Birth to obtain the Dependent's ID number.

Welcome! To file an Overpayment Dispute, enter and search for your claim number, click on the claim number in question, and then click on the link to the form. Please select the overpayment dispute box and fill out the necessary information and click submit. If you have any additional questions or difficulties with submitting the dispute via the provider portal, please call the applicable Customer Service number below:

ACA/APC

1-833-600-1311

SMART HEALTH

888-492-6811

EDW C LEVY

833-239-1275

TRIMEDX

800-400-2815

MYMICHIGAN HEALTH

833-239-1273

CHEROKEE INSURANCE COMPANY

800-400-2816

MAP/SETON

855-285-6627

US HEALTH AND LIFE INSURANCE COMPANY

800-211-1534

United Benefit Advisors/Women's Health plan for Smart Health

800-438-0302

Claims

Claim Number(s):

Member ID:

Begin Date:

Check Number:

Date of Birth:

End Date:

Search

Enter the claim number or Member ID number and click the link [Provider Claim Appeal Reconsideration](#) to access the form for appeals, reconsiderations and overpayment disputes.

Claims

[Provider Claim Appeal Reconsideration](#)
[Show/Hide Search](#)

Claim Number(s):

Member ID:

Begin Date:


Check Number:

Date of Birth:

End Date:

Authorization & Referrals:

Click on the Authorization & Referrals tab to search for or submit an authorization.

You are currently logged in as: ABS Test 2 Pro
Messages Profile Log

Eligibility Claims Authorization & Referrals Resources
Authorizations & Referrals
Authorization Requests and Records

Search and Submit Authorizations

Authorization Search

Home / Search and Submit Authorizations

Search responses Search original requests

Authorization Number (optional)

No additional information is required if you enter an authorization number.

Member ID (optional) Search for member

Status

Inpatient/Outpatient

Date **From** **To**

Search

Prior-authorization is based on information provided at the time of request, and does not guarantee payment of benefits nor verify eligibility. Payment for services is subject to all terms, conditions, limitations and exclusions related to the member's eligibility and subsequent medical review. Regardless of prior-authorization status, medical decisions concerning a course of treatment are solely between the physician and the patient.

Resources:

Click on the resources tab to view information such as contact us phone numbers/emails addresses.



You are currently logged in as: ABS T

[Messages](#) [Profile](#)

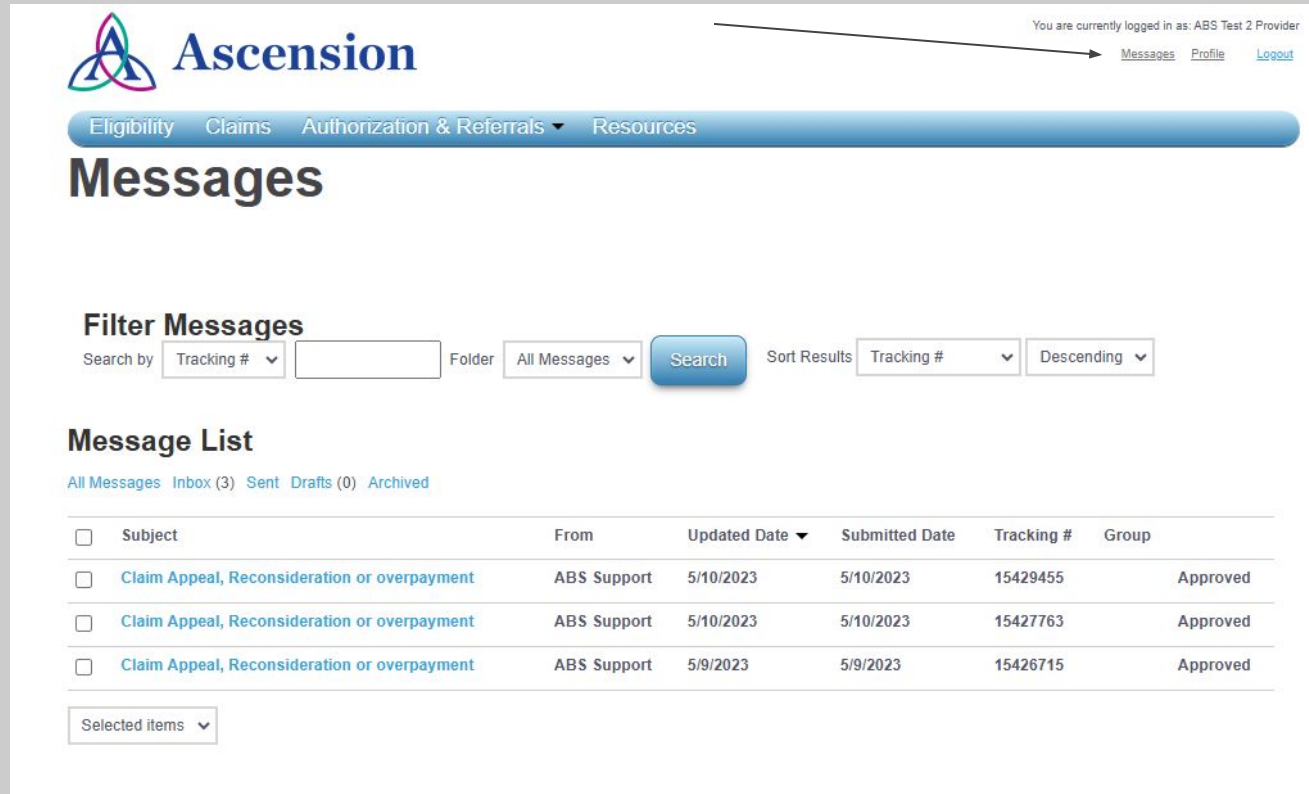
- Eligibility
- Claims
- Authorization & Referrals ▾
- Resources

Contact Us

Name	Phone Number/Email
General provider services	1-800-225-9369
General provider services	abssupport@ascension.org

Messages:

Click on the messages link to view your submitted claim appeals.



The screenshot shows the Ascension Messages interface. At the top left is the Ascension logo. To the right, it says "You are currently logged in as: ABS Test 2 Provider" with links for "Messages", "Profile", and "Logout". Below this is a navigation bar with "Eligibility", "Claims", "Authorization & Referrals", and "Resources". The main heading is "Messages".

Filter Messages

Search by Folder Sort Results

Message List

[All Messages](#) [Inbox \(3\)](#) [Sent](#) [Drafts \(0\)](#) [Archived](#)

<input type="checkbox"/>	Subject	From	Updated Date ▼	Submitted Date	Tracking #	Group
<input type="checkbox"/>	Claim Appeal, Reconsideration or overpayment	ABS Support	5/10/2023	5/10/2023	15429455	Approved
<input type="checkbox"/>	Claim Appeal, Reconsideration or overpayment	ABS Support	5/10/2023	5/10/2023	15427763	Approved
<input type="checkbox"/>	Claim Appeal, Reconsideration or overpayment	ABS Support	5/9/2023	5/9/2023	15426715	Approved