

# Portal Key Features

The Oscar Provider portal is a tool that enables you to verify member eligibility, review authorization requirements, set up electronic payments, and more. Before you can access these features, you must set up an account on the portal and go through a verification process to ensure member privacy. If you need help getting started, check out our guide on how to create a portal account.

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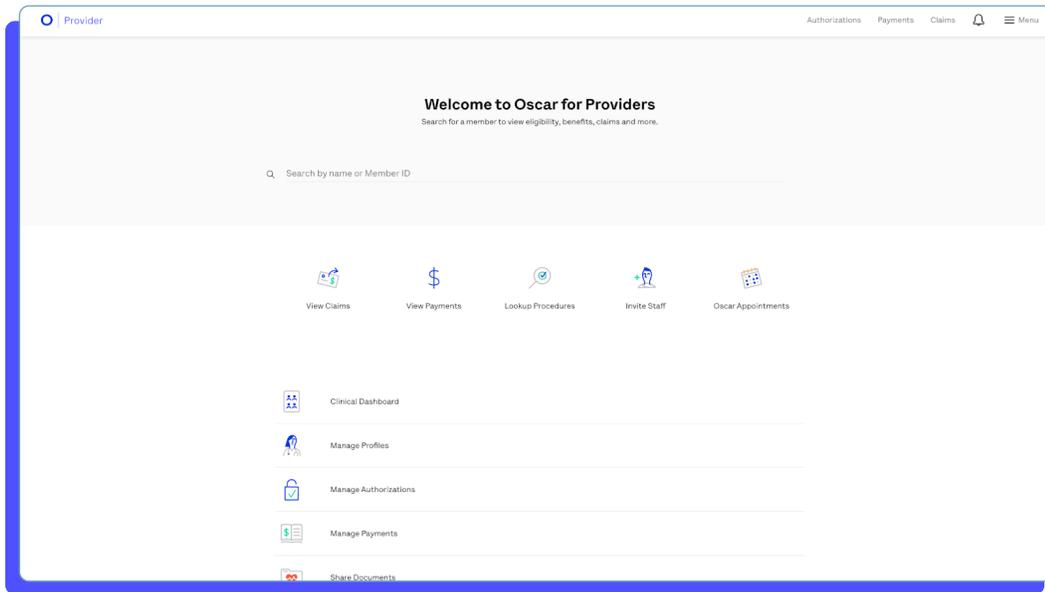
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# 01 Your Portal Account

Here is what you will see when you log into your portal account:



From this page, you can view claims and payments, electronically submit prior authorizations, manage your organization and users portal access, search for members and more!\*

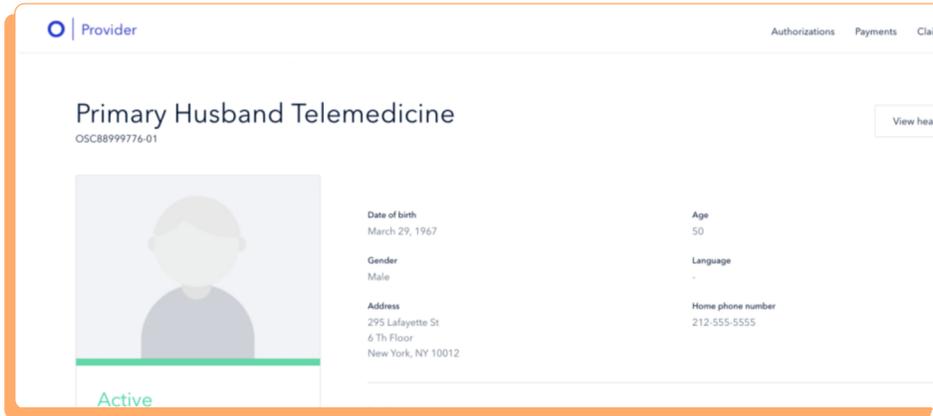
\*Please note that the views depicted in this document may vary somewhat depending on the Oscar member's plan. For example, the information displayed for Medicare Advantage members may be different than information displayed for other members.

Learn more at [hioscar.com/providers](https://hioscar.com/providers) or call (855) 672-2755.

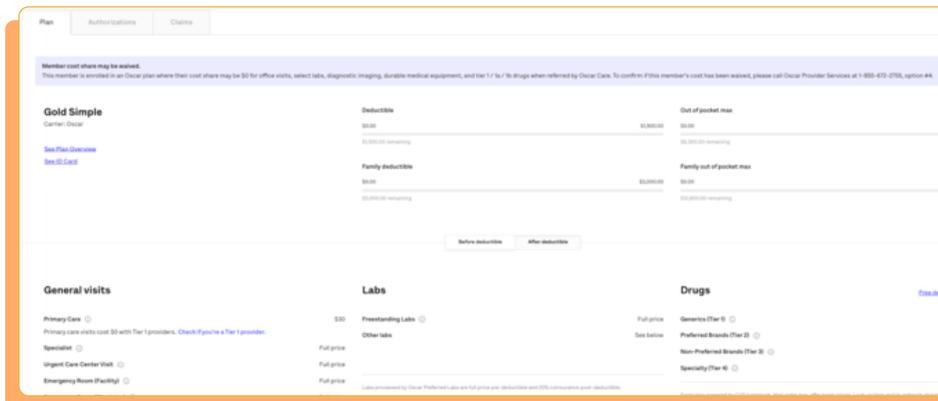


## 02 Member Profiles

Search for a member on the homepage using their OSCAR ID or name and DOB.



Here you can learn about the member’s status, contact information, view their start and end date, and view claims specific to that member.



As you scroll down, you can learn about the member’s plan, their authorizations, and claims specific to that member. Authorizations and claims can both be filtered by status. You can also submit a new authorization in this view.

## 03 Claims

See a list of claims submitted to Oscar. You can click on each to learn more about its status. You can sort by service date, billed amount, and claims ID. When you click on a specific claim, you will see more details.

If a claim needs action (denied or requires medical records), it will be presented in RED and you will be able to directly upload medical records.

For any claims disputes that arise, you can submit additional documentation in the single claim view.

The screenshot displays the 'Overview' page for a claim in the Oscar Provider portal. The page is titled 'Overview' and shows a claim status of 'Fully covered' with a payment of \$236.83 from Oscar. The claim was updated on Sep. 21, 2019. The patient is Oscar New York (OSC0000000-00) and the provider is Joy Lee (NPI: 0000000000). The date of service is Sep. 19, 2019. The billed amount is \$275.00, with a discount of \$38.17 and a member owe of \$0.00. The total Oscar pays is \$236.83. A link to 'Dispute this claim' is visible at the bottom right.

Patient		Date of service	Billed amount	Oscar pays
Oscar New York OSC0000000-00		Start: Sep. 19, 2019 End: Sep. 19, 2019 Received: Sep. 20, 2019	\$275.00	\$236.83
Provider		TIN	Discount	Member owes
Joy Lee NPI: 0000000000		00-0000000	-\$38.17	-\$0.00
			Oscar pays	\$236.83

See a problem? [Dispute this claim](#)

## 04 Payments

Under the **Payments** tab, you can see all of the payments from Oscar to your organization. Here, you can filter by payment status, view a check number, and click into each payment to learn more. You can also download a PDF version of EOPs here.

## 05 Clinical Dashboard

The **Clinical Dashboard** gives providers a holistic view of their members health journey and flags clinically relevant information. Using the bar at the top, you can navigate a member's chronic conditions, medical encounters, lab results, prescriptions, allergies, health survey results, and more.

The screenshot shows the 'Provider' dashboard for 'Oscar Newyork'. The left sidebar contains member information: Oscar Newyork, Female - 39 years old, Date of Birth 01/01/1980, Annual Physical -, Phone 2024227164, Concierge Team XX01, and Oscar ID OSC90493693-01. The main content area is divided into two sections: 'Conditions' and 'Encounters'. The 'Conditions' section is currently empty, displaying 'No items here'. The 'Encounters' section contains a table with the following data:

Date of Visit	Facility	Provider	Specialty
03/19/2019	Oscar Center	Patricia Pechter	Family Medical Practice
03/07/2018	Teladoc PA	-	General Medicine

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## Prior Authorizations

Using CPT codes, you can submit a prior authorization request online for a member, or check to see if a treatment requires authorization. This is all done through a patient's profile.

The screenshot shows a web form titled "Procedure lookup" within a "Provider" portal. The form includes a header with "Authorizations", "Payments", and "Claims" tabs. Below the title, there is a sub-header "Level of care" with two radio button options: "Inpatient" and "Outpatient", where "Outpatient" is selected. Under "Member information", there are two input fields: "OSC number (including hyphens)" and "Service start date". Below that is an "Attending provider" section with an input field for "Attending provider name or NPI". At the bottom, there is a "Procedures" section which is partially visible.

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## Directory

From the portal, you can also search for INN physicians, facilities, and drugs by selecting **View Drug Formulary** or **Search Providers** from the home screen.

You can also visit [hioscar.com/search](https://hioscar.com/search).

This page will display to you information specific to your market and product line.

The screenshot shows a search page titled "Find doctors and drugs." in the "Provider" portal. It features a filter bar with "Show me 2019" (with a dropdown arrow), "options as an individual" (with a dropdown arrow), and "living in Florida" (with a dropdown arrow). Below the filter bar is a search input field with a magnifying glass icon and a vertical bar. Underneath the search field are tabs for "All types", "Doctors", "Places", and "Drugs", with "All types" selected. At the bottom, there is a "Common searches" section.

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