How to: Create a portal account

The 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.



Health First Health Plans

Advent Health

1. Accessing the registrar form

Visit provider.hioscar.com and click on the button in the top right corner with "Go to Portal" to sign up and create your portal account. Click Sign up on the right to get started. You will be directed to this page.



2. Set up your account

Enter your email address and password twice to confirm.



3. More about you

Complete this page by entering information relevant to you and your organization.

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\leftrightarrow \rightarrow G	hioscar.com/providers
U	Provider
	More about you
	Please add information about yourself and your organization here.
	Role 🗸
	First name Last name
	Phone number Extension
	What is one TIN associated with your organization?
	Enter in one TIN associated with your practice. You can add more TINs later.
	TIN
	What type of organization are you part of? (?)
	An organization is an entity that falls under one administrative and/or billing system.
	An organization could consist of one or more TINs.
	Provider practice



4. Verification

There are two methods of account verification, Instant access and Manual verification.

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\times Verify your organization	Instant Access Generative service generative bulkets for any searchers have Obser watch and the OF Vary.
We recognize that you have submitted claims to Oscar in the last 90 days. You can choose to get instant access to the Provider pub yenfying some details from two of those claims.	Claim Information Data: Claim D and Data Build Data
If you do not have access to claims or want to do this later, you can skip this step for now.	Amuri Osar Mal Osabiteatar
Ger bastant access Skip for now	Coux Court 0 💼 Coux Paid Loss
	Need July Status (the information on your COP?

Option #1: Instant access

If your organization has at least two claims within the last **90** days, you will be prompted to choose between "Get instant access" and "Skip for now"

- If you select "Get instant access", you will be prompted to enter details about two of your claims
 - These details include the Claim ID, Paid Date of the Claim, Amount Paid, and Check Number
- If you don't know where to find this information, you can click on the link to view a sample EOP
- If you select "Skip for now", you will follow the Manual verification process and receive a call within 3-5 business days to verify the information you entered and confirm your network status

Option #2: Manual verification

If your organization does not yet have two claims, you must complete the manual verification process. You will receive a call within 3-5 business days to verify the information you entered and confirm your network status.

5. Terms and conditions

You must agree to Health First Health Plans/AdventHealth Advantage Plans' Terms & Conditions including the Terms of Service and Privacy Policy.

If you are an organization manager, you must agree to the terms on behalf of yourself and your organization.

6. Almost there (Email verification)

Once you've completed the registration, you will receive an email with a link to verify your email address. Click the link to verify your email. Use the drop down on the top right side of the screen to invite staff.

When you invite staff, they will receive an email asking them to create a password and login. As an organizational manager, you can assign staff to teams, and regulate permissioning across your organization.

Using the top right drop down again, you can view your organization. Here, you can add multiple TINs to the account, sign up for ACH payments, add a bank account, and link TINs to different bank accounts.

Provider		
Invite staff		
Profile information		
First name	Last name	
Role ~	NPI	
Email address		
Email address		



FAQs

1. What is an organization?

An organization is an entity that falls under one administrative and/or billing system. An organization could consist of one or more TINs. Consider whether one portal administrator, called an organization manager, can cover all administrative needs for the organization.

2. Who should be the organization manager?

Typically this is the primary office manager or in-house biller. If the practice is smaller, this may be the provider or nurse.

3. What are the responsibilities of an organization manager?

As an organization manager you are responsible for managing your organization's account as well as inviting, approving, and terminating users as necessary.

4. Can there be more than one organization manager in an organization?

Yes, there can be multiple organization managers. For security reasons, it is best practice to limit the number of organization managers.

5. What happens if Instant Verification fails?

You have three tries to correctly enter the data for two claims. If you are unable to provide the correct data, you will be moved to manual verification. In this case, you will receive a call in 3-5 business days.

6. What if I don't receive the verification email?

Try clicking the "Resend email" button and taking action on the email immediately. (Note: the verification link does expire after some time). If you are still having issues, it's possible that your firewall is blocking the email. Please contact your IT department to troubleshoot.