



Connected Consumer Health™

MEMBER PORTAL USER GUIDE

Version 4.07 | May 10, 2022

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Overview

Welcome to the Member Portal.

This guide will assist with navigating and discovering all the features designed to help easily and securely manage your healthcare experience. This includes finding, obtaining and paying for care, as well as an Explanation of Benefits (EOB) for services already provided and details regarding past and current conditions, allergies and/or medications associated with your patient profile.

From within the Member Portal, you may manage your *Profile & Settings*, link to and manage your profile with 3rd Party applications, or even request a record of past services provided by your current and/or past plan providers spanning the last five years. (**NOTE:** *The historical records request feature is anticipated to be available approximately late first quarter 2022*).



Not all features described in this User Guide may be available within the Member Portal. Certain screens and/or functionality may have been removed or restricted based on individual plan provider requirements. Contact your plan provider for more information.



NOTE: *The screenshots, including names of companies or individuals presented within, are purely fictitious to comply with HIPAA regulations and protect the privacy of all currently enrolled members. User functionality will remain the same, however some appearances may vary slightly based on whether browsing from a desktop or mobile device.*

1 Creating An Account

To access the Member Portal, an authenticated account is required. An email should have been sent by your plan provider with an enrollment code and this code is required to begin the account creation process.

If you have not received an enrollment code, contact your plan provider for more information.

1.1 Change Healthcare Call Center Assistance

Member enrollment questions should be directed to your plan provider. The exception to this is if you are unable to receive text messages. Please call the Change Healthcare (CHC) Support Call Center directly at (844) 243-1824 to complete the one-time passcode (OTP) authentication process (3-way calling is not supported).

Member delegates MUST have a cell phone to receive and complete the OTP authentication process.

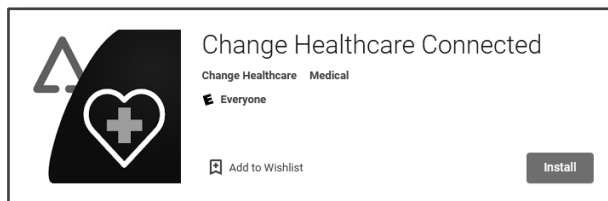
1.2 Member Enrollment



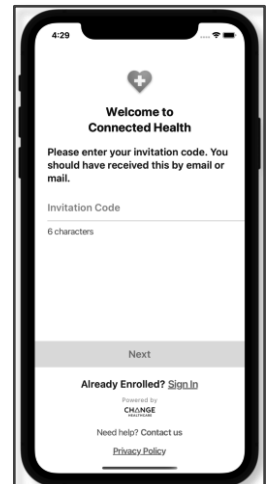
NOTE: To enroll in the Member Portal, a valid email address and invitation code is **REQUIRED**. Each member account **MUST** have a unique email address for enrollment. For example, should a parent wish to enroll themselves and a child, two unique email addresses are required.

1.2.1 MOBILE

For mobile devices, install the *Change Healthcare Connected* application available from Google Play or the Apple App Store.



The enrollment process via mobile device is very similar to that on a PC, the only minor difference is the sign-in and invitation code screens have been combined. After installing the application, open it to complete your account registration.

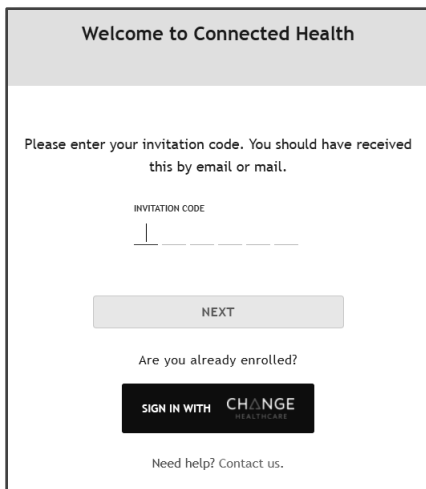
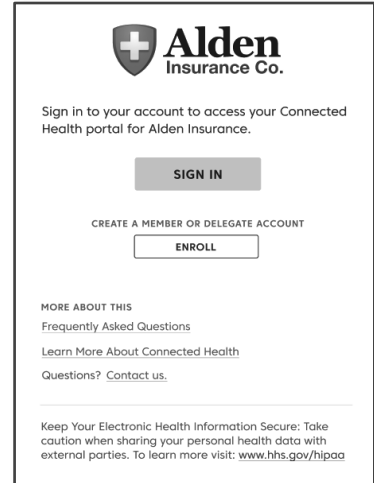


1.2.2 PC

The PC enrollment process requires approximately 10-15 minutes, depending on internet speeds and your comfort level with technology.

From your PC, navigate to the URL supplied by your plan provider to access the enrollment screen. Any Chrome, Firefox, Safari or Edge browser is supported.

To begin the enrollment process, click *Enroll*.

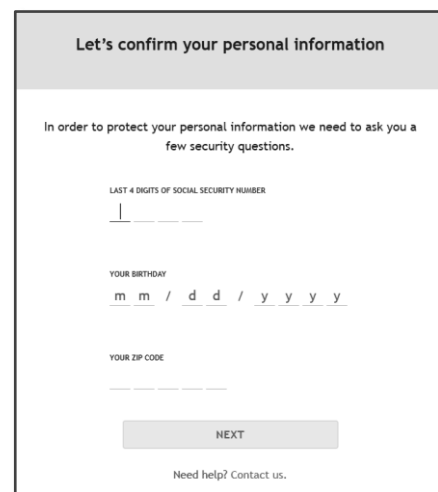


Enter the invitation code provided in the enrollment notification.

Click *Next*.

Confirm your personal identification. By default, you must provide the last 4 digits of your SSN, your birthday and your zip code to verify your identity. However, some plan providers may have elected to use a "Secret Question & Answer" option.

Click *Next*.



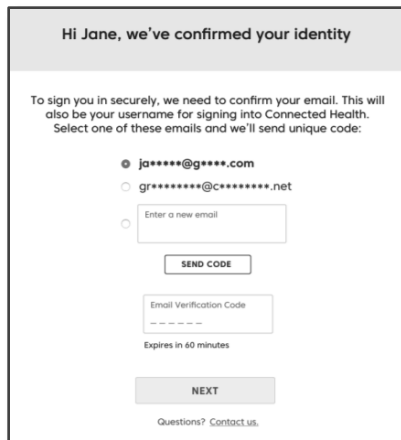
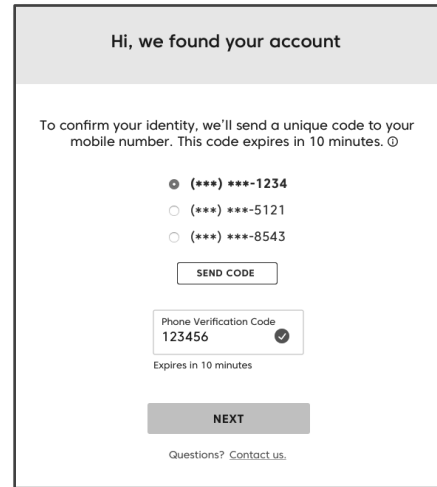
Once your account has been located, select an SMS enabled phone number to receive a one-time passcode (OTP) via text message.

NOTE: Text message is the only available method of communicating a passcode at this time. A passcode cannot be emailed or delivered via automated phone call. If none of the phone numbers listed for your account are able to receive a text message, contact Change Healthcare support to continue the process.

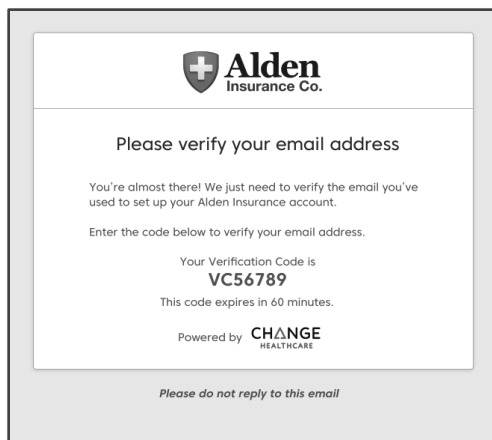
Click *Send Code*.

Within 1-2 minutes you should receive the code via text message. Enter it in the *Phone Verification Code* box.

Click *Next*.



The next screen to appear will list all emails associated with your account. Select the email you wish to use as your username and click *Send Code*. If you wish to use an email that is not listed, enter that email address in the *Enter New Email* field. Please ensure you remember the email selected as your username.



A second (new) verification code will be sent via email to the email address you have selected as the username for your account.

Enter that code in the *Email Verification Code* field.

Click *Next*.

Contact us.'"/>

Upon successfully verifying your email address, the password creation screen will load.

Enter a password that meets the security requirements in the *New Password* field.

Enter the new password a second time in the *Confirm New Password* field.

Click *Save Password*.

Contact us.'"/>

When account set up is complete, you will be prompted to login.

1.3 Delegate Enrollment



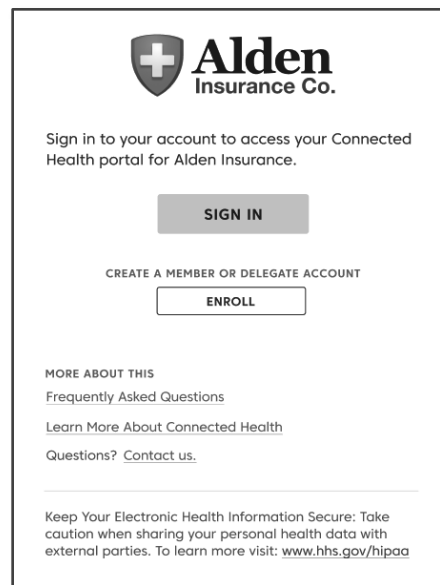
NOTE:

To enable delegate enrollment, all required delegate information **MUST** be on file with your plan provider. Required information includes name, address, an SMS enabled phone number and an email address. Please contact your plan provider to ensure they have all the necessary information on file before a delegate attempts to create an account.

The enrollment process requires approximately 10-15 minutes, depending on internet speeds and your comfort level with technology.

Navigate to the URL supplied by your member's plan provider to access the enrollment screen. Any iOS, Android, Chrome, Firefox, Safari or Edge browser is supported.

To begin the two factor authentication (2FA) enrollment process, click *Enroll*.



NOTE:

To enroll in the Member Portal as a delegate, a valid email address and delegate invitation code is **REQUIRED**. Each delegate account **MUST** have a unique email address for each member for which they will be a delegate.

Example 1:

If an adult child wishes to enroll themselves as a delegate for elderly parents, two unique email addresses are required (one for mother's account/one for father's account).

Example 2:

If two adult children wish to enroll themselves as delegates for an elderly parent, two unique email addresses are required (one for the first delegate account/one for the second delegate account).



NOTE:

A member must still create their own account with a unique email address if they wish to access the Member Portal. Creating a delegate account does not automatically create a member account. Refer to the Member Enrollment section for member enrollment requirements and processes.

Enter the delegate invitation code provided in the enrollment email.

Click Next.

Confirm your member's (delegator's) personal identification. By default, you must provide the last 4 digits of the member's SSN, birthday and zip code to verify their identity. However, some plan providers may have elected to use a custom question and answer option.

Click Next.

Once the associated member account has been located, select an SMS enabled phone number to receive a one-time passcode (OTP) via text message.

NOTE: Text message is the only available method of communicating a passcode at this time. A passcode cannot be emailed or delivered via automated phone call. If none of the phone numbers listed are able to receive a text message, contact Change Healthcare support to continue the process.

Click *Send Code*.

Within 1-2 minutes you should receive the code via text message. Enter it in the *Phone Verification Code* box.

Click *Next*.

The next screen to appear will list all emails associated with this account. Select an email use as a username and click *Send Code*. To use an email that is not listed, enter that email address in the *Enter New Email* field. Please ensure you remember the email selected as your username.

Hi Jane, we've confirmed your identity

To sign you in securely, we need to confirm your email. This will also be your username for signing into Connected Health. Select one of these emails and we'll send unique code:

- ja*****@g****.com
- gr*****@c*****.net
- Enter a new email

Email Verification Code

Expires in 60 minutes

Questions? [Contact us.](#)

Alden
Insurance Co.

Please verify your email address

You're almost there! We just need to verify the email you've used to set up your Alden Insurance account.

Enter the code below to verify your email address.

Your Verification Code is
VC56789
This code expires in 60 minutes.

Powered by **CHANGE**
HEALTHCARE

Please do not reply to this email

A second (new) code will be sent via email to the email address you have selected as the username for your account.

Enter that code in the *Email Verification Code* field.

Click *Next*.

Email confirmed, let's create a password

Create a unique password that will be used for signing into Connected Health. Minimum 8 characters, both upper and lower case letters, at least one number, and one special character.

New password
..... ✓

Confirm new password
..... ✓

Questions? [Contact us.](#)

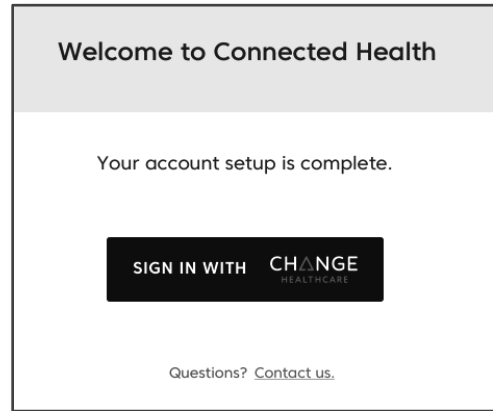
Upon successfully verifying your email address, the password creation screen will load.

Enter a password that meets the security requirements in the *New Password* field.

Enter the new password a second time in the *Confirm New Password* field.

Click *Save Password*.

When account set up is complete, you will be prompted to login.

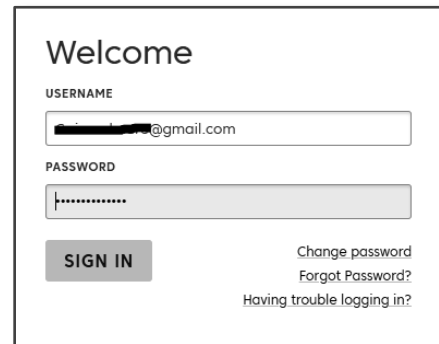


1.4 Login

To access the Member Portal as a member or delgate, click *Sign In with Change Healthcare*.



Enter your username and password when prompted.

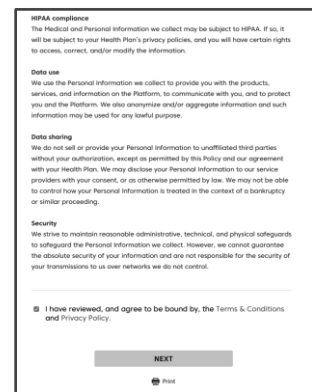


Click *Sign In*.

Upon logging in for the first time, you will be presented with a Privacy Policy and data security disclosure. Check the acceptance box.

If you wish to print a copy for your records, click *Print* .

Click *Next*.



2 Benefits Summary

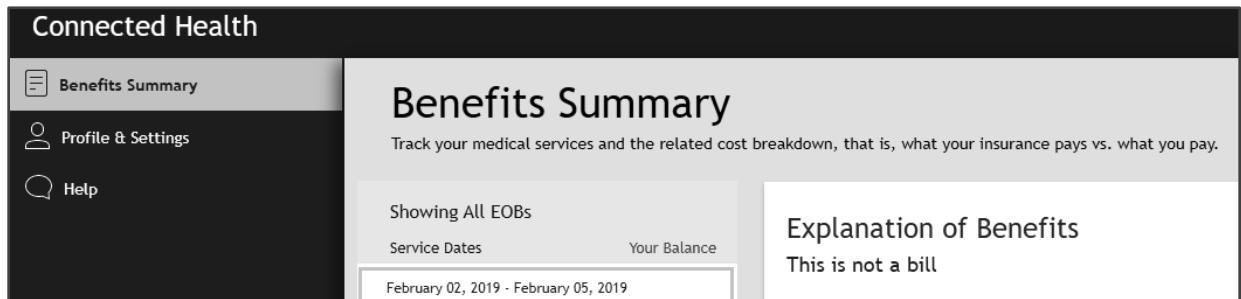


Welcome to the Member Portal. Once successfully registered, it will take approximately 12 hours for the system to gather and display benefit data.

2.1 Overview

There are three sections within *Benefits Summary*:

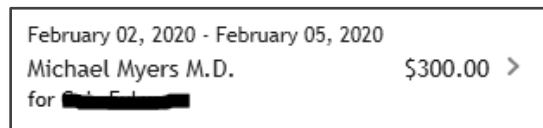
- *Showing all EOBs* – This section lists all *Service Dates* and *Balances* related to claims submitted since January 2016 or date of plan enrollment, whichever is most recent.
- *Explanation of Benefits* – Provides *Service Details* for each claim line item.
- *Main Menu* – The main navigation tool within the Member Portal.



This will load the *Benefits Summary* page.

2.2 Showing All EOBs

Each claim submitted for your account will be loaded in the *Showing All EOBs* column. Every claim submitted since January 2016, or date of plan enrollment, whichever is more recent, will be displayed along with the *Service Dates*, *Practitioner* and any *Balance*.



2.3 Explanation of Benefits

The *Explanation of Benefits* section is NOT a bill. It is intended purely for information purposes. If you have questions or concerns regarding a specific claim, contact your service or plan provider.



NOTE: At this time, payments for services may not be processed via the Member Portal. If you wish to make a payment for a claim listed, contact your plan provider.



NOTE: At this time there are no search or filter capabilities for EOBs. They may also load in random chronological order. Search filters and enhanced sorting are planned for future releases.

2.3.1 FACILITY

This is the facility or location at which the services were rendered. Depending upon how the claim was processed and submitted to CHC this information may or may not be present.

2.3.2 PRACTITIONER

Depending upon how the claim was processed and submitted to CHC, the *Practitioner* listed may be your actual doctor or it may display the facility or practice name at which the service(s) took place.

2.3.3 SERVICE DETAILS

Service Details provides a line item description of services performed along with a *Total Price*, *Insurance Paid* amount and *Balance* owed for each line item. A *Total* of all items listed is displayed at the bottom of the section.

▼ Service Details			
Description	Total Price	Insurance Paid	Your Balance
Removal of single thickened skin growth (11055) February 14, 2019	\$500.00	-\$400.00	\$100.00

2.3.3.1 Description

An explanation of services provided, date of service and/or the associated treatment code as submitted to your plan provider.

2.3.3.2 Total Price

The total cost of the service line item as submitted to your plan provider.

2.3.3.3 Insurance Paid

The amount your plan provider has determined as payable per your plan type.

2.3.3.4 Your Balance

The remaining monies owed after your plan provider paid amount is subtracted.

2.3.3.5 Questions?

The *Questions?* section provides contact information for the practitioner/service provider and/or billing party.

3 Health Profile



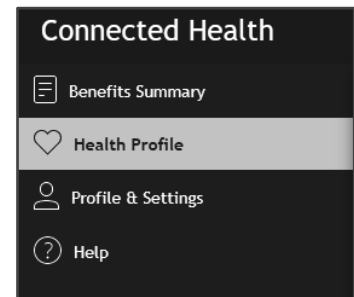
Welcome to the Member Portal. Once successfully registered, it will take approximately 12 hours for the system to gather and display Health Profile data.

3.1 Overview

The *Health Profile* page displays various health conditions and treatments prescribed, diagnosed and/or ongoing.

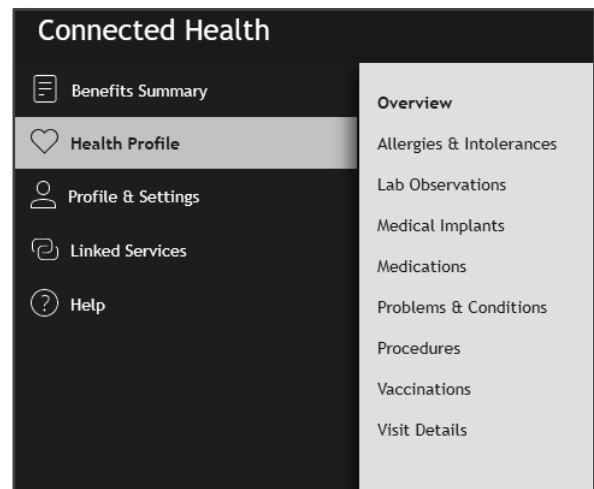


NOTE: By default, invalid records will not be displayed. Records with missing details will contain a “Description unavailable” or “Code unavailable” warning.



This information is displayed within several sections:

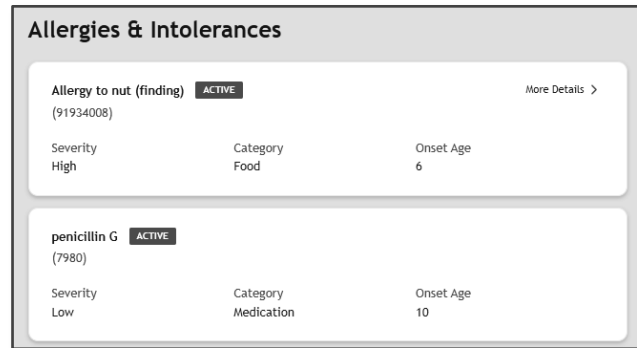
- Allergies & Intolerances
- Lab Observations
- Medical Implants
- Medications
- Problems & Conditions
- Procedures
- Vaccinations
- Visit Details



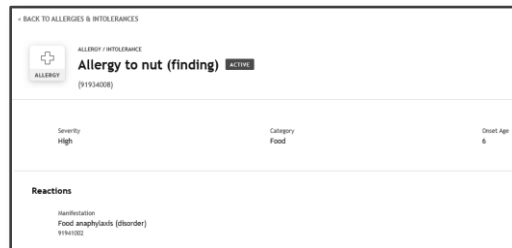
3.2 Allergies & Intolerances

Allergies & Intolerances presents any diagnosed food, medication, environmental or biological concerns, their severity and onset age.

A description of the allergy or intolerance is also displayed.



Additional details regarding an allergy or intolerance may be found by clicking *More Details >*. Within the *More Details* section are known reactions and manifestations.

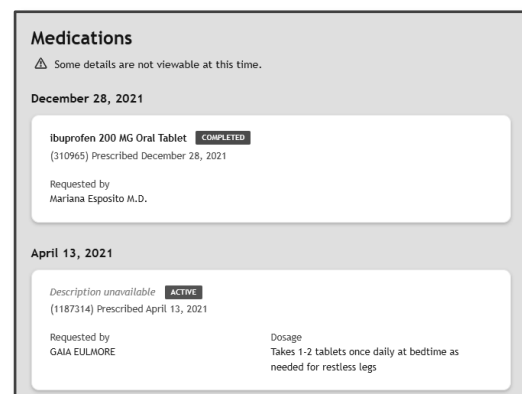


Click *< BACK TO ALLERGIES & INTOLERANCES* to return to the main page.

3.3 Medications

Under *Medications* both current and past treatments are detailed as well as the current treatment status. The most common statuses displayed are "Completed", "Active" and "On-hold".

The date the prescription was authorized as well as the requestor are provided in addition to a description of the prescribed item. Any dosage instructions are also shown.



3.4 Problems & Conditions

The *Problems & Conditions* section details any diagnosed or reported patient conditions along with the condition's date of record.

A description of the problem or condition and both the *Clinical Status* and *Verification Status* are also displayed.

Problems & Conditions
⚠ Some details are not viewable at this time.

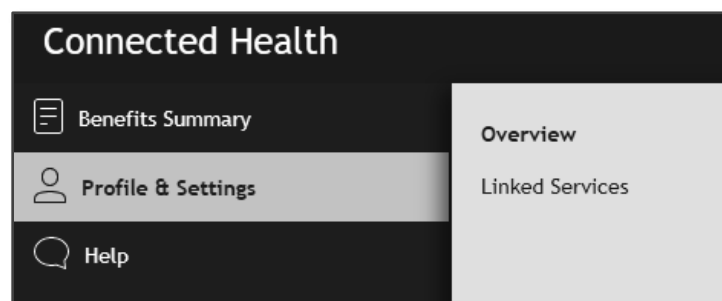
Fracture subluxation of wrist (disorder) (263102004) April 13, 2021	
Clinical Status Resolved	Verification Status Confirmed
Viral sinusitis (disorder) (444814009) April 13, 2021	
Clinical Status Resolved	Verification Status Confirmed
Viral sinusitis (disorder) (444814009) April 13, 2021	
Clinical Status Resolved	Verification Status Confirmed

4 Profile & Settings

The *Profile & Settings* page is comprised of two sections. Each section may be accessed via secondary navigation links to the right of the main navigation menu.

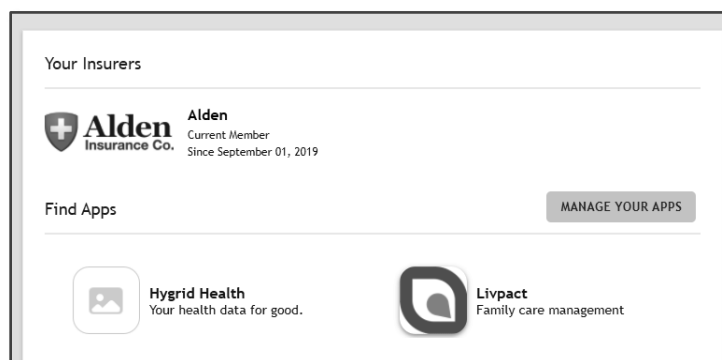
4.1 Overview

The *Overview* page displays your contact information as supplied to us by your plan provider. Information presented includes your name, birth date, gender and contact information. If any information is incorrect or has changed, please contact your plan provider or CHC Member Support.



4.2 Linked Services

Linked Services displays your current plan provider(s) and enrollment date(s), as well as any 3rd party applications linked to your account.



The *Linked Services* page will also provide means of authenticating your credentials for the purposes of authorizing historical Payer data exchanges. A list/icon of currently available external payers will be shown within the *Find Apps* section. Clicking on the Payer icon will open that Payer's external login page, where you will be prompted to log in with your Username and Password **for that Payer**. A successful log in will then allow CHC to contact that Payer and authorize the exchange of historical Payer data between them and your current benefits Provider.



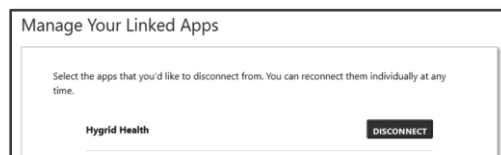
NOTE: For more information about historical data exchanges, including availability and requirements, contact your current benefits Provider.

4.2.1 MANAGE YOUR APPS

4.2.1.1 Disconnecting an Application

Managing applications with for whom information sharing is enabled is done via the *Manage Your Apps* page. Click on *Manage Your Apps* to load a pop-up window displaying all of the applications currently authorized by you to exchange data.

To disconnect data sharing with a listed application, click *Disconnect*.



NOTE: 3rd party applications are NEVER automatically linked to an account (Refer to Connecting an Application for the required steps and process details). If no applications have been authorized, no applications will be listed within the *Manage Your Linked Apps* pop-up.

4.2.1.2 Requesting an Application

It is anticipated by the end of 2022 thirteen of the largest Payers will be available within the CHC data exchange network.

If there is Payer with which you would like to authorize CHC to exchange data, and it is not currently listed in the *Linked Apps* page, click *Submit a request* at the bottom of the *Linked Services* page.

A new tab will open in your browser and load the *App Registry Request* page.

Request an application to be added to our App Registry

Please fill out the form below to request an application or company be added to our registry.
We will reach out to the application you have provided and share your interest in having them added to the App Registry.

App Name

E-mail Address

Company Name

Your Name

Link To Company Application or Website - Optional

Math question 10 + 3 =

By providing your registration information and clicking the "Submit" button, you agree to receive communications from Change Healthcare. Our use, disclosure and protection of information we collect from you will be governed by our website Terms of Use and Privacy Policy.

Cancel

Complete the form provided and click *Submit*. You will receive confirmation of your submission request and then you may manually close the new tab that had been opened.

Click *Cancel* to exit the form. You must then manually close the new tab that had been opened.

5 Help

5.1 Insurance/Billing/Benefits

For general questions related to insurance coverage, provider networks, billing and/or medical services, please call your plan provider's support team for assistance.

Contact information for your plan provider is listed within the *Help > Insurance, Billing & Benefits* section of the Member Portal.

5.2 Technical Support

In the event you enter your password incorrectly four times while attempting to log in, you will be locked out. Please call your plan provider's support team for assistance.

If you enter your invitation code incorrectly four times during the enrollment process, you will be locked out. Please call your plan provider's support team for assistance.

For other technical support, including questions regarding the website, application or linked services, contact the Change Healthcare Support Call Center at (833) 353-6891.

Questions may also be submitted via email to ConnectedHealthSupport@changehealthcare.com



NOTE: If you have received an error while using the Member Portal, please include the error code displayed on the error notification page.



5.3 Sign Out

To exit the Member Portal, click *Sign Out* located in the lower left corner of the page.

