HealthPartners Provider Portal Online Tools & Applications

The HealthPartners Provider portal offers many online tools and applications*. As a delegate you decide which tools and access each individual from your organization needs.

* Your organization may not have access to all of the applications listed below.

Account Maintenance – Used by Delegates/Administrators to create and maintain accounts for each individual accessing the provider portal.

- If you want to establish additional delegates/administrators for your organization, select "Delegate" in the Account Level field when creating a new account. This selection automatically assigns the Account Maintenance applications.

Authorizations and Referrals - A one-stop resource for making prior authorization requests, In/Out Network Requests, entering or looking up referrals, viewing coverage criteria and much more. This tool replaces several applications: Prior Auth Request, Referral Inquiry and Referral Maintenance.

- **Referral Maintenance** – This sub-access available to primary care providers allows individuals to create, revise and answer referrals and referral requests.

Claim Status Inquiry - Check the status of claims submitted to HealthPartners. Search for up to two years history.

Claims Estimator - Receive estimates for professional services by providing visit/anticipated claim information. Claim estimator uses real time contractual and member benefits to provide the most accurate estimates including: anticipated payments and member liabilities.

Clear Claim Connect (C3) – Code auditing tool allowing users to enter specific billing codes to see claim auditing rules, payment policy, and clinical rationale prior to submitting a claim to HealthPartners

Eligibility Inquiry - Find a member's eligibility/benefit information, including co-payments and deductibles. Also find additional online benefit descriptions, member's formulary information and more.

Fee Schedules – Fee schedules list the contracted rates for a provider group's services and vary depending on the product that insures the member (Medicare, Medicaid, etc).

Provider Data Profiles - Keep your online data profiles up-to-date!   Verify and manage your location and practitioner profile information such as hours, specialties, addresses and more. This information directly feeds HealthPartners marketing directories for members/patients.

Provider Reports – Reports for contracted providers that help manage care and the total cost of care (TCOC).

Registry Reports – Registries are population-based lists of members identified by age, gender and or diagnosis to facilitate the identification of patients who are in need of a defined set of services.

Remittance Inquiry - Review and download remittance/EOB claim payment details. Search for a remittance by check #, by date, or by claim#. Search for up to two years history.

- You can also subscribe to remittance notifications to be notified via email when new remittances are available.

Tax Id & NPI Access - Add additional security to your organization's data access.

- Provider offices must provide Tax ID, NPI and HealthPartners issued check # to add the data access.
- Billing services must request additional data access by providing the provider's Tax ID, NPI and an authorized contact at the provider's office. When the provider's approval is received by email or fax, the new Tax ID/NPI data can be accessed.

For additional information regarding applications, click the Provider portal Help File icon after logging in.