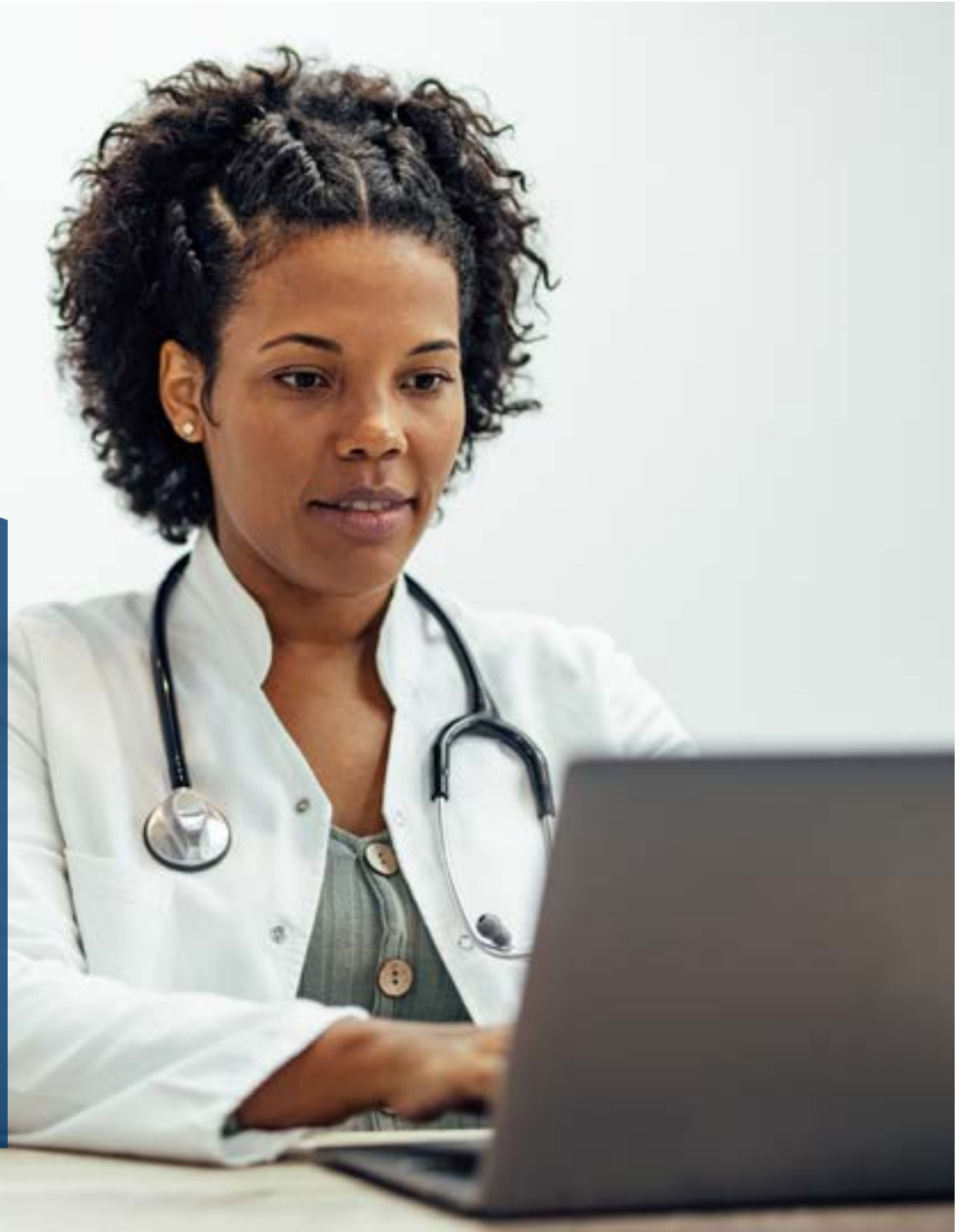




**KAISER
PERMANENTE®**

My Benefits Manager: Provider Portal Guide

Use My Benefits Manager to check the status of a pre-authorization or a claim, view remittances/explanation of benefits (EOBs), check member eligibility and view a member's benefit usage and limitations.



Creating an Account

1. Access the portal via: www.kp.org/dental/nw/ppo/providers
2. Click on Create an Account
3. Fill out the information requested.

Note: A paid claim number from a member who has been active in the last 180 days is required to create your account.

Signing in

4. Access the portal via: www.kp.org/dental/nw/ppo/providers
5. Enter your credentials and click sign in.
6. Enter the code sent via text or email, depending on how you requested your multifactor authentication.

My Benefits
MANAGER

Sign in to your account

Username
[input field]

Password
[input field]

[Forgot your username or password?](#)

4 Sign in **2** Create account

Account Information

My Name
Last Name
First Name

Last Name
Provider

Username
your provider

Account Number
STP000

Address

Update Account Information

Security Information

Change your password

Click here to view your current password and to change my settings on this page

Current Password
[input field]

New Password
[input field]

Verify New Password
[input field]

3

My Benefits
MANAGER

Enter security code

For additional security, we need to verify your identity before you can sign in to the account. We have a one-time security code sent to your phone or email. Once you receive it, please enter it below. If you have not received the code or still have trouble signing in, please call member services.

One-time security code
[input field]

Remember this device for 30 days
Do not check. Falls on an untrusted or shared computer.

Sign In Back

6

Checking Claim Status

- Enter the claim number(s) you wish to research and select search.
- Using the links and the browser back button, you can toggle through the claim results. Once you select a claim, select “Original View” under Claims to view a remittance/EOB.

7

Claims

To search for a patient claim:

- Enter the Patient ID
- Enter a Claim Number
- Multiple Claim Numbers can be entered. Press the enter key after each Claim Number.

Search

Claim Number(s): Patient ID: Birth Date: End Date:

Search

Patient	CCGI Item	Claim Number	Claim Status	Total Charge	Member Responsibility
View Details	12345678	00000000	PAID	\$100.00	\$0.00

Page 1 of 1

8

Claim #0165889073

Member: Service Provider: Total Charge: Member Responsibility: Paid:

Member ID: Service Provider: Claim Status:

Subscriber: Total Charges:

Payment Details

Claim Number	Pay To	Amount	Date Paid
0165889073	ABC123	\$100.00	12/31/2000

Claim Details

CCGI Item	CR	Charge	Member Responsibility	Total Charge	PAID/NOI
12345	0000	\$100.00	\$0.00	\$100.00	\$100.00
67890	0000	\$0.00	\$0.00	\$0.00	\$0.00
11111	0000	\$0.00	\$0.00	\$0.00	\$0.00
22222	0000	\$0.00	\$0.00	\$0.00	\$0.00
33333	0000	\$0.00	\$0.00	\$0.00	\$0.00
Total		\$100.00	\$0.00	\$100.00	\$100.00

Reason Code Descriptions

NR - Service not included in the approved review
 0000 - LACI - REASON FOR EXCLUSION
 0001 - EX - IN PROCESS OF REVIEW
 0002 - LACI - SERVICE NOT COVERED UNDER PLAN

Disclaimer
 This is not a bill.
 Claim by date of service.

Checking Member Eligibility

- Click on Eligibility and enter the member ID(s)/HRN(s) you'd like to check and select search.
- Using the links and the browser back button, you can toggle through the eligibility results.
- You can also view a member's benefits usage and limits.

HOME | **ELIGIBILITY** | CLAIMS | ADMINISTRATION

Eligibility

To search for members:

- 1. Enter the Member ID #
- 2. Enter the Last Name and Date of Birth (MM/DD/YYYY)
- 3. Multiple Member IDs can be entered (use the enter key after each Member ID)

SEARCH CRITERIA:
All Results

Search

First Name: [] Member ID: [11111111] Birth: []
Last Name: [] SSN: []

Search

NAME	MEMBER ID	GROUP	DATE OF BIRTH	STATUS	BENEFIT PLAN	ADDRESS	PHONE NUMBER
Sam, Sam	11111111	100	10/10/10	IN	HRP1000	HRP-C 2001 E. Philadelphia, N-4010	61042222

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 | 101 | 102 | 103 | 104 | 105 | 106 | 107 | 108 | 109 | 110 | 111 | 112 | 113 | 114 | 115 | 116 | 117 | 118 | 119 | 120 | 121 | 122 | 123 | 124 | 125 | 126 | 127 | 128 | 129 | 130 | 131 | 132 | 133 | 134 | 135 | 136 | 137 | 138 | 139 | 140 | 141 | 142 | 143 | 144 | 145 | 146 | 147 | 148 | 149 | 150 | 151 | 152 | 153 | 154 | 155 | 156 | 157 | 158 | 159 | 160 | 161 | 162 | 163 | 164 | 165 | 166 | 167 | 168 | 169 | 170 | 171 | 172 | 173 | 174 | 175 | 176 | 177 | 178 | 179 | 180 | 181 | 182 | 183 | 184 | 185 | 186 | 187 | 188 | 189 | 190 | 191 | 192 | 193 | 194 | 195 | 196 | 197 | 198 | 199 | 200 | 201 | 202 | 203 | 204 | 205 | 206 | 207 | 208 | 209 | 210 | 211 | 212 | 213 | 214 | 215 | 216 | 217 | 218 | 219 | 220 | 221 | 222 | 223 | 224 | 225 | 226 | 227 | 228 | 229 | 230 | 231 | 232 | 233 | 234 | 235 | 236 | 237 | 238 | 239 | 240 | 241 | 242 | 243 | 244 | 245 | 246 | 247 | 248 | 249 | 250 | 251 | 252 | 253 | 254 | 255 | 256 | 257 | 258 | 259 | 260 | 261 | 262 | 263 | 264 | 265 | 266 | 267 | 268 | 269 | 270 | 271 | 272 | 273 | 274 | 275 | 276 | 277 | 278 | 279 | 280 | 281 | 282 | 283 | 284 | 285 | 286 | 287 | 288 | 289 | 290 | 291 | 292 | 293 | 294 | 295 | 296 | 297 | 298 | 299 | 300 | 301 | 302 | 303 | 304 | 305 | 306 | 307 | 308 | 309 | 310 | 311 | 312 | 313 | 314 | 315 | 316 | 317 | 318 | 319 | 320 | 321 | 322 | 323 | 324 | 325 | 326 | 327 | 328 | 329 | 330 | 331 | 332 | 333 | 334 | 335 | 336 | 337 | 338 | 339 | 340 | 341 | 342 | 343 | 344 | 345 | 346 | 347 | 348 | 349 | 350 | 351 | 352 | 353 | 354 | 355 | 356 | 357 | 358 | 359 | 360 | 361 | 362 | 363 | 364 | 365 | 366 | 367 | 368 | 369 | 370 | 371 | 372 | 373 | 374 | 375 | 376 | 377 | 378 | 379 | 380 | 381 | 382 | 383 | 384 | 385 | 386 | 387 | 388 | 389 | 390 | 391 | 392 | 393 | 394 | 395 | 396 | 397 | 398 | 399 | 400 | 401 | 402 | 403 | 404 | 405 | 406 | 407 | 408 | 409 | 410 | 411 | 412 | 413 | 414 | 415 | 416 | 417 | 418 | 419 | 420 | 421 | 422 | 423 | 424 | 425 | 426 | 427 | 428 | 429 | 430 | 431 | 432 | 433 | 434 | 435 | 436 | 437 | 438 | 439 | 440 | 441 | 442 | 443 | 444 | 445 | 446 | 447 | 448 | 449 | 450 | 451 | 452 | 453 | 454 | 455 | 456 | 457 | 458 | 459 | 460 | 461 | 462 | 463 | 464 | 465 | 466 | 467 | 468 | 469 | 470 | 471 | 472 | 473 | 474 | 475 | 476 | 477 | 478 | 479 | 480 | 481 | 482 | 483 | 484 | 485 | 486 | 487 | 488 | 489 | 490 | 491 | 492 | 493 | 494 | 495 | 496 | 497 | 498 | 499 | 500 | 501 | 502 | 503 | 504 | 505 | 506 | 507 | 508 | 509 | 510 | 511 | 512 | 513 | 514 | 515 | 516 | 517 | 518 | 519 | 520 | 521 | 522 | 523 | 524 | 525 | 526 | 527 | 528 | 529 | 530 | 531 | 532 | 533 | 534 | 535 | 536 | 537 | 538 | 539 | 540 | 541 | 542 | 543 | 544 | 545 | 546 | 547 | 548 | 549 | 550 | 551 | 552 | 553 | 554 | 555 | 556 | 557 | 558 | 559 | 560 | 561 | 562 | 563 | 564 | 565 | 566 | 567 | 568 | 569 | 570 | 571 | 572 | 573 | 574 | 575 | 576 | 577 | 578 | 579 | 580 | 581 | 582 | 583 | 584 | 585 | 586 | 587 | 588 | 589 | 590 | 591 | 592 | 593 | 594 | 595 | 596 | 597 | 598 | 599 | 600 | 601 | 602 | 603 | 604 | 605 | 606 | 607 | 608 | 609 | 610 | 611 | 612 | 613 | 614 | 615 | 616 | 617 | 618 | 619 | 620 | 621 | 622 | 623 | 624 | 625 | 626 | 627 | 628 | 629 | 630 | 631 | 632 | 633 | 634 | 635 | 636 | 637 | 638 | 639 | 640 | 641 | 642 | 643 | 644 | 645 | 646 | 647 | 648 | 649 | 650 | 651 | 652 | 653 | 654 | 655 | 656 | 657 | 658 | 659 | 660 | 661 | 662 | 663 | 664 | 665 | 666 | 667 | 668 | 669 | 670 | 671 | 672 | 673 | 674 | 675 | 676 | 677 | 678 | 679 | 680 | 681 | 682 | 683 | 684 | 685 | 686 | 687 | 688 | 689 | 690 | 691 | 692 | 693 | 694 | 695 | 696 | 697 | 698 | 699 | 700 | 701 | 702 | 703 | 704 | 705 | 706 | 707 | 708 | 709 | 710 | 711 | 712 | 713 | 714 | 715 | 716 | 717 | 718 | 719 | 720 | 721 | 722 | 723 | 724 | 725 | 726 | 727 | 728 | 729 | 730 | 731 | 732 | 733 | 734 | 735 | 736 | 737 | 738 | 739 | 740 | 741 | 742 | 743 | 744 | 745 | 746 | 747 | 748 | 749 | 750 | 751 | 752 | 753 | 754 | 755 | 756 | 757 | 758 | 759 | 760 | 761 | 762 | 763 | 764 | 765 | 766 | 767 | 768 | 769 | 770 | 771 | 772 | 773 | 774 | 775 | 776 | 777 | 778 | 779 | 780 | 781 | 782 | 783 | 784 | 785 | 786 | 787 | 788 | 789 | 790 | 791 | 792 | 793 | 794 | 795 | 796 | 797 | 798 | 799 | 800 | 801 | 802 | 803 | 804 | 805 | 806 | 807 | 808 | 809 | 810 | 811 | 812 | 813 | 814 | 815 | 816 | 817 | 818 | 819 | 820 | 821 | 822 | 823 | 824 | 825 | 826 | 827 | 828 | 829 | 830 | 831 | 832 | 833 | 834 | 835 | 836 | 837 | 838 | 839 | 840 | 841 | 842 | 843 | 844 | 845 | 846 | 847 | 848 | 849 | 850 | 851 | 852 | 853 | 854 | 855 | 856 | 857 | 858 | 859 | 860 | 861 | 862 | 863 | 864 | 865 | 866 | 867 | 868 | 869 | 870 | 871 | 872 | 873 | 874 | 875 | 876 | 877 | 878 | 879 | 880 | 881 | 882 | 883 | 884 | 885 | 886 | 887 | 888 | 889 | 890 | 891 | 892 | 893 | 894 | 895 | 896 | 897 | 898 | 899 | 900 | 901 | 902 | 903 | 904 | 905 | 906 | 907 | 908 | 909 | 910 | 911 | 912 | 913 | 914 | 915 | 916 | 917 | 918 | 919 | 920 | 921 | 922 | 923 | 924 | 925 | 926 | 927 | 928 | 929 | 930 | 931 | 932 | 933 | 934 | 935 | 936 | 937 | 938 | 939 | 940 | 941 | 942 | 943 | 944 | 945 | 946 | 947 | 948 | 949 | 950 | 951 | 952 | 953 | 954 | 955 | 956 | 957 | 958 | 959 | 960 | 961 | 962 | 963 | 964 | 965 | 966 | 967 | 968 | 969 | 970 | 971 | 972 | 973 | 974 | 975 | 976 | 977 | 978 | 979 | 980 | 981 | 982 | 983 | 984 | 985 | 986 | 987 | 988 | 989 | 990 | 991 | 992 | 993 | 994 | 995 | 996 | 997 | 998 | 999 | 1000

Eligibility

SEARCH CRITERIA:
All Results

Search

First Name: [] Member ID: [11111111] Birth: []
Last Name: [] SSN: []

Search

Participant

Member	Sam Jones	Group Name	Group ID
Member ID	11111111	Group Number	100
Status	Active		

Coverages

MPHICAL - Silver
Coverage Date: 01/01/10 - 12/31/10

DENTAL - Silver
Coverage Date: 01/01/10 - 12/31/10

VISION - Silver
Coverage Date: 01/01/10 - 12/31/10

Benefit Usage and Limits

Sam - Individual Deductible

MPHICAL: [] DENTAL: [] VISION: []

11

Checking Member Eligibility

12. Select the authorization tab and select either authorization response or original request. Enter the requested information.

13. Use the links to view the authorization details.

Note:

Please obtain pre-authorization on all procedures over \$500.

Pre-authorizations can be submitted via mail to the claims address at the end of the guide or can be identified as a pre-authorization claim to be submitted electronically through Web MD, Change Healthcare, Proximed or Availity by using Payer ID RP073. Documentation can be attached to support the services the pre-authorization will include.

12

13

Authorization #	Status	Request Type	Approved Type	Requested Dates of Service
PC500000018	Approved	Original	Any Other MD	02/20/2025 - 02/20/2025

Requesting Provider	Member Name	Member ID	Date of Birth	Diagnosis Code	Description	Diagnosis Date	Diagnosis Status
Any Other MD	Sam, Sam	011000000	10/10/20	92000	Other medical procedure right eye	01/20/25	Approved

Service Details

Procedure Code	Description	Requested Date	Approved Date
9200	Any other medical procedure right eye	01/20/25	01/20/25
92040	Repeat visit with specialty	01/20/25	01/20/25

Providers

Provider	Requesting Provider NPI	Serving Provider NPI
Any Other MD	011000000	011000000

If you need assistance, please contact the Kaiser Permanente Insurance Program Support Center:

Kaiser Permanente Dental Choice (PPO)

P.O. Box 6927

Columbia, SC 29260

1-866-653-0338

My Benefits
MANAGER