Provider Training Manual
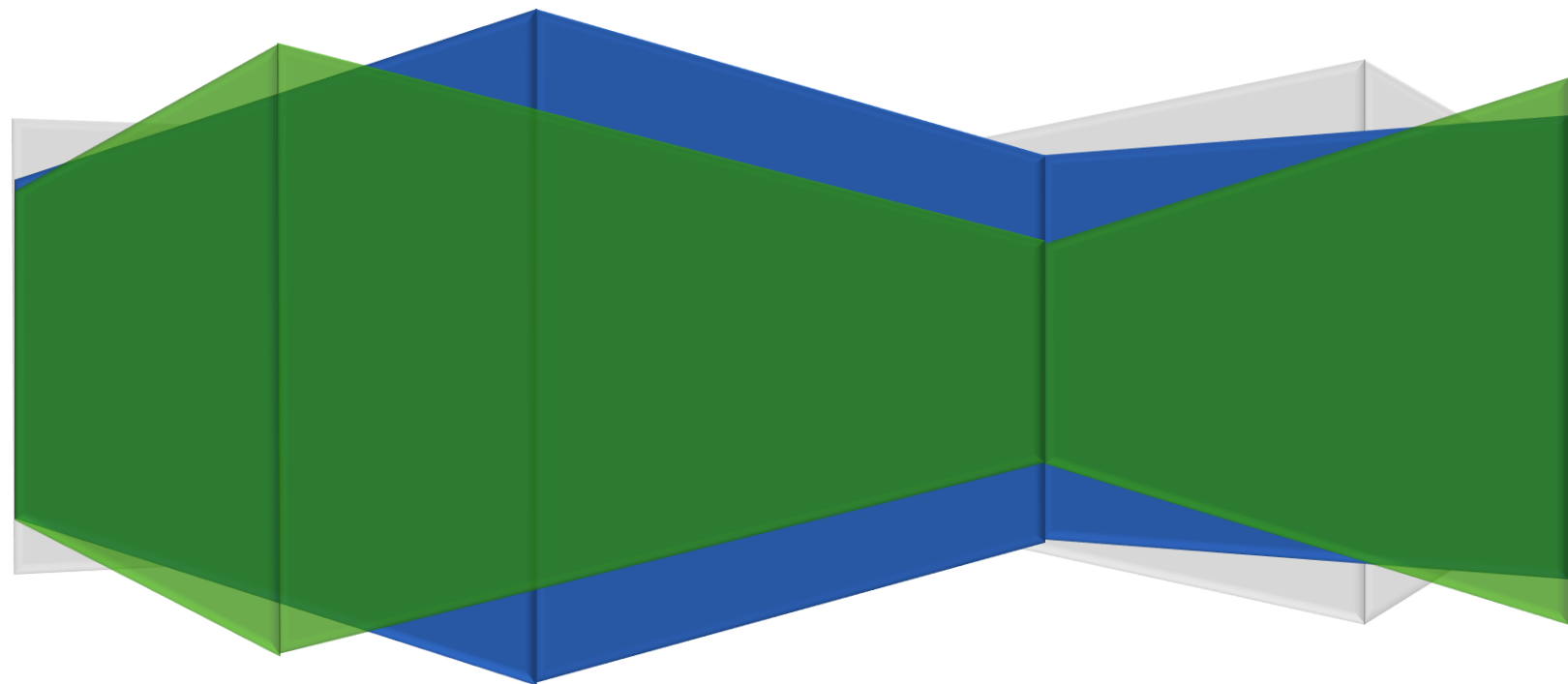
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Introduction

CoreLink II offers enhanced access, improved design and expanded menu features while also retaining the information that was available on the original *CoreLink*. Our new website provides access to a secured Internet connection so that Employers and Members can be assured that their information is protected. *CoreLink II* also consolidates separate activities into one location. For example, from the main menu Members will be able to search Providers, access the Plan Documents, request ID cards, check claim status, etc.

System Requirements

Internet Explorer is needed to be able to use the help feature.

Log On to CoreLink II

To obtain a User ID and Password, click on **Provider Access Request** and follow the on-screen steps. The request is then sent to Core for approval. Your log in is usually created within 24 hours. Please contact Core if you should have any problems or questions.

Quick Start Menu

- **Search & View Patient Claims** – quick access to claims information (see page 7 for details).

- **Search, View & Patient Information** – to conduct a search for a patient by either SSN (Patient ID) or Certificate Number (Alternate ID)
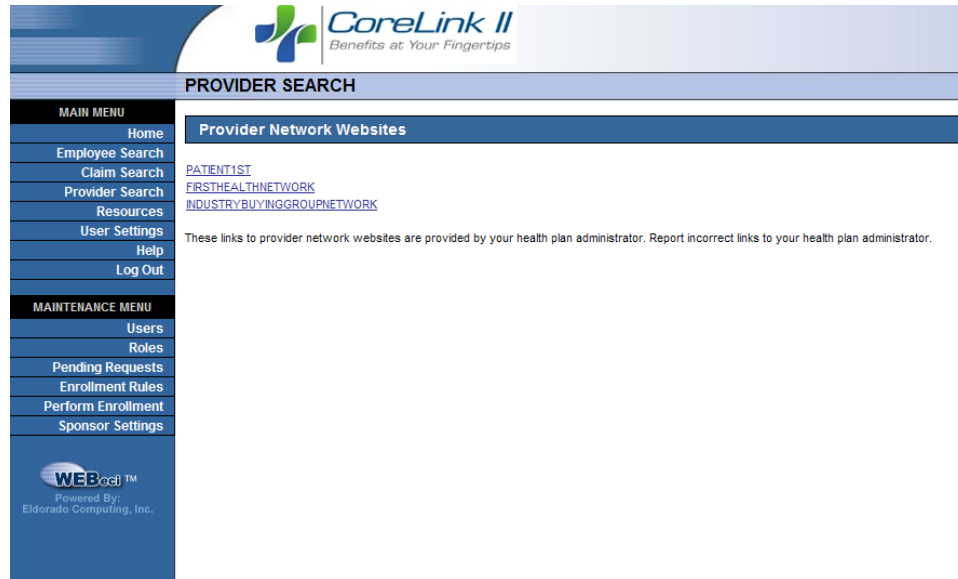
- **Search For & View Provider Information –** To conduct a search for participating providers in your health benefits plan. There are three search link websites which are Patient First Network, First Health Network, and Industry Buying Group (IBG) Network.

- **Access Important Resources –** find forms and links; you can also contact the health plan administrator for assistance with *CoreLink II*.

- **Maintain System Settings –** This option allows you to quickly access and update your user set-up information. Update such preferences as your password, password hint, date and number format, plus your e-mail address. To save any changes to the existing display, click the update button at the bottom on the screen.

If you forgot your password, click Forgot Your Password? on the log-in screen. This box will appear with your password hint:

Claim Search Results

After you have entered the parameters for your search, the results should look like this:

CLAIM SEARCH RESULTS

The primary member's (employee) name

| Provider | Martha Jones | 123456789 |
| Member | John Smith | 100010-*****7008 |

Claim Number	Category Code	Status - Date	Service Period	Billed	Payment	Pay Method
Patient	Date of Birth	Gender	Med Rec No	Bill Type	Check No	Check Date
211-041777-00	F1	0 - 08/08/2011	07/26/2011 - 07/26/2011	389.00	0.00	
Sara Jane Smith	11/23/1963	F				
211-036928-00	F1	0 - 07/21/2011	06/30/2011 - 06/30/2011	1,142.00	647.60	CHK
John Smith	10/04/1957	M				07/21/2011
211-036928-01	F1	0 - 07/21/2011	06/30/2011 - 06/30/2011	431.00	138.44	CHK
John Smith	10/04/1957	M				07/21/2011
211-036928-02	F1	0 - 07/21/2011	06/30/2011 - 06/30/2011	424.00	250.18	CHK
John Smith	10/04/1957	M				07/21/2011
210-049259-00	F1	0 - 07/26/2010	06/24/2010 - 06/24/2010	103.00	87.55	CHK
Sara Jane Smith	11/23/1963	F				07/26/2010
210-104964-00	F1	0 - 06/23/2011	06/24/2010 - 06/24/2010	678.00	449.64	CHK
Sara Jane Smith	11/23/1963	F				06/23/2011
210-104964-01	F1	0 - 06/23/2011	06/24/2010 - 06/24/2010	240.00	108.61	CHK
Sara Jane Smith	11/23/1963	F				06/23/2011
210-104965-00	F1	0 - 06/23/2011	06/24/2010 - 06/24/2010	451.00	359.43	CHK
Sara Jane Smith	11/23/1963	F				06/23/2011

Claim Number

Patient Information

Click on the Claim Number for detailed claim information.

Claim Information

CLAIM INFORMATION

🔍 Claim Search   🖨 Printer Friendly Page

Payer	CORE MANAGEMENT RESOURCES	100
Provider	Martha Jones	123456789
Member	John Smith	100010-*****7008-05

Click here for Explanation of Benefits (EOB)

Claim Number	Service Period	Category	Status and Date	Billed	Payment	Check No
211-041777-00	07/26/2011 - 07/26/2011	F1	0 - 08/08/2011	389.00	0.00	

Patient Name	Date of Birth	Gender	Med Rec No	Bill Type	Payment Method	Check Date
Sara Jane Smith	11/23/1963	F				

Service Lines

Service Dates	Svc Qual	Svc Code	Proc Mod	Charge	Payment	Units	Category	Status - Date	Control No
07/26/2011 - 07/26/2011	HC	99213		125.00	0.00	1	F1	0 - 08/08/2011	
07/26/2011 - 07/26/2011	HC	80053		88.00	0.00	1	F1	0 - 08/08/2011	
07/26/2011 - 07/26/2011	HC	84550		43.00	0.00	1	F1	0 - 08/08/2011	
07/26/2011 - 07/26/2011	HC	36415		10.00	0.00	1	F1	0 - 08/08/2011	
07/26/2011 - 07/26/2011	HC	84443		123.00	0.00	1	F1	0 - 08/08/2011	

Category Code(s)

F1   Finalized/Payment - The claim/line has been paid.

Status Code(s)

0   Cannot provide further status electronically

Service Qualifier(s)

HC   Health Care Financing Administration Common Procedural Coding System (HCPCS) Codes

Printing the Explanation of Benefits (EOB)

Click here to print

Print Close

CLAIM DETAIL

Claim Number	Dates of Service From - Through	Received	Group	Network	Member ID	Status and Date
211-041777-00	07/26/2011 - 07/26/2011	07/29/2011	100010	FHN	*****7008	Paid - 08/08/2011

Service Date	Service Code	Charge	Not Paid	Reason	Covered	Deductible	Co Ins %	Co Ins Dollars	Discount	Payment
07/26/2011	001	125.00	52.79	PN	72.21	72.21	80	0.00	52.79	0.00
07/26/2011	801	88.00	16.85	PN	71.15	71.15	80	0.00	16.85	0.00
07/26/2011	801	43.00	32.51	PN	10.49	10.49	80	0.00	32.51	0.00
07/26/2011	006	10.00	2.00	PN	8.00	8.00	80	0.00	2.00	0.00
07/26/2011	801	123.00	56.54	PN	66.46	66.46	80	0.00	56.54	0.00
Totals:		389.00	160.69		228.31	228.31		0.00	160.69	0.00

Patient Responsibility 228.31

Employee/Patient - Provider	Withhold	Encountered	Payment	Check Number
SARA JANE SMITH			0.00	
Martha Jones	0.00	0.00	0.00	

Service Code Description

001 = OFFICE VISIT
801 = PATHOLOGY/LABORATORY SERVICES
006 = PHYSICIAN SERVICES, MISCELLANEOUS

Reason Code Description

PN = PIN/FHN DISCOUNT

EOB Message

TO PROTECT PATIENT PRIVACY, THE PATIENT'S EOB WILL BE ADDRESSED TO THE PATIENT.