
Oregon Health Plan Provider Web Portal

Benefits and HSC Inquiry

Look up procedure and diagnosis codes to determine
Oregon Health Plan funding



Division of Medical Assistance Programs

August 2011

Web portal home page

Begin at: <https://www.or-medicaid.gov>

Home Contact Us Directory Search Clients Account Providers

Welcome to the Medicaid Portal web site!

Providers - Login to set up your Web portal accounts and verify eligibility for OHP clients

Providers - What you need to know about the Web portal

OHP provider announcements

AMH Providers - View the Addictions and Mental Health home page

SPD Providers - View the Seniors and people with physical disabilities home page

Click here to log in

Links to OHA Web sites

Getting started

1. Enter your User Name and Password
2. Click login

Home Contact Us Directory Search Clients **Account** Providers
home account setup logoff reset password **secure site**

Login

The State Health Care Authority's secure website is intended for providers, clerks and billing agents.

If you have received your Personal Identification Number letter, click on the setup account button.

[setup account](#)

If you're already a member and have set up your account or a provider has set one up for you, login here to enter our secure website.

User Name*

Password*

[login](#)

If you have forgotten your password please click the reset password button.

[reset password](#)


Provider front page

Home Contact Us Directory Search Clients Account Claims Eligibility Trade Files Prior Authorization **Providers** POC Help

home demographic maintenance drug search enrollment enrollment tracking search links benefits **Demographic Maintenance** Drug Search Enrollment Enrollment Tracking Search Links **Benefits and HSC Inquiry**

Providers menu, click Benefits and HSC Inquiry

is designed to be compatible with following browsers:
 Microsoft Internet Explorer 6
 Microsoft Internet Explorer 7 Service Pack 2
 Mozilla FireFox 2.0



What's New

Provider ID:500603867 MCD
 Taxonomy:
 Zip Code: 97301 - 1063

Message center from Oregon Health Authority

Messages		
Category	Subject	Message
General Message	Reminder - EDI Registration Not Required for Web Portal	EDI registration is only required for providers who currently submit Medicaid claims using the ASC X12 transactions.
General Message	NDC Reporting Requirements	Starting July 1, you must report the National Drug Code and NDC quantity for most physician-administered drugs billed using HCPCS
General Message	Submit claims by noon Friday for timely processing	Otherwise, your claims may process the following weekend. Read more at < https://apps.state.or.us/cf1/OHP/OHPadmin/files/claim-p
General Message	PSU phones are currently not operating correctly	PSU phones are currently not operating correctly.
General Message	DMAP is unable to make outgoing calls	DMAP is unable to make outgoing calls to providers, clients and other customers due to a phone issue. The issue has been reported b
General Message - DMAP	New EDMS Coversheet	Make sure to use the most recent version at http://dhsforms.hr.state.or.us/Forms/Served/DE3970.pdf . DHS will only accept the 8/10
General Message	Change to 8/28 weekend claim cycle	Submit claims by 10 p.m. Thursday for processing this weekend. Read more at < www.oregon.gov/DHS/healthplan/notices_providers
General Message	Web Claims Error Resolved 6/1/10	You can submit Web claims again. If you received the "communications error" message while submitting a claim, search for the claim
General Message	Web Claims Errors 6/1/10	Web claims are not processing this morning due to a "communications error." Do not try to submit claims at this time; DHS will send
General Message	OHP Plus dental and vision changes	Find out about the changes coming 1/1/10 at < http://www.oregon.gov/DHS/healthplan/plus-changes.shtml >.



Benefits and HSC inquiry

Benefits and HSC Inquiry

<input type="checkbox"/> Client Inquiry	<input type="checkbox"/> HSC List Inquiry	
Client ID [Search]	Benefit Plan [Search]	DOS
Provider ID [Search]	Procedure Description	Modifier
Procedure Code [Search]	Diagnosis Description	Claim Type
Diagnosis Code [Search]	Revenue Code [Search]	Records 20
NDC [Search]	Case Managed	<input type="button" value="search"/>
Home Health		<input type="button" value="clear"/>

1. Check Client Inquiry box, HSC List Inquiry box, or both
2. Enter diagnosis code
3. Enter date of service
4. Click search

Other fields may be required for more specific information; check warning messages after search

HSC List Inquiry

Required fields:

1. Procedure, revenue or NDC code
2. Diagnosis code
3. DOS (date of service)

Benefits and HSC Inquiry

Client Inquiry **HSC List Inquiry**

Client ID [Search] Benefit Plan [Search] **3** DOS 06/01/2011

Provider ID [Search]

Procedure Code 92070 [Search] **1** Procedure Description FITTING OF CONTACT LENS Modifier [v]

2 Diagnosis Code 37160 [Search] **2** Diagnosis Description KERATOCONUS NOS

NDC [Search] Revenue Code [Search] Claim Type [Search]

Home Health [v] Case Managed [v]

Records 20 [v] **clear**

Enter diagnosis code without the decimal

HSC Response tells if the service is covered

Verify eligibility to determine benefit plan coverage

HSC Prioritized List Information

Funding Line 502 Diagnostic Procedure No

HSC Response Paired Above the Line - Procedure Code Above/Below the Line and Diagnosis Code Above the Line - Covered

Line ▲	Condition-Treatment	On Line	Guideline
106	DIABETIC AND OTHER RETINOPATHY (See Guideline Notes 64,65,76) - LASER SURGERY	Proc	65
106	DIABETIC AND OTHER RETINOPATHY (See Guideline Notes 64,65,76) - LASER SURGERY	Proc	64
106	DIABETIC AND OTHER RETINOPATHY (See Guideline Notes 64,65,76) - LASER SURGERY	Proc	76
124	CANCER OF EYE AND ORBIT (See Guideline Notes 1,7,11,12,64,65,76) - MEDICAL AND SURGICAL TREATMENT, W	Proc	65
124	CANCER OF EYE AND ORBIT (See Guideline Notes 1,7,11,12,64,65,76) - MEDICAL AND SURGICAL TREATMENT, W	Proc	64
124	CANCER OF EYE AND ORBIT (See Guideline Notes 1,7,11,12,64,65,76) - MEDICAL AND SURGICAL TREATMENT, W	Proc	1
124	CANCER OF EYE AND ORBIT (See Guideline Notes 1,7,11,12,64,65,76) - MEDICAL AND SURGICAL TREATMENT, W	Proc	76
124	CANCER OF EYE AND ORBIT (See Guideline Notes 1,7,11,12,64,65,76) - MEDICAL AND SURGICAL TREATMENT, W	Proc	12
124	CANCER OF EYE AND ORBIT (See Guideline Notes 1,7,11,12,64,65,76) - MEDICAL AND SURGICAL TREATMENT, W	Proc	11
124	CANCER OF EYE AND ORBIT (See Guideline Notes 1,7,11,12,64,65,76) - MEDICAL AND SURGICAL TREATMENT, W	Proc	7

1 2 3 4 5 6 7 8 9 10 ... Next >

HSC lines that contain either the procedure or diagnosis code entered

Client Inquiry

Benefits and HSC Inquiry

Client Inquiry HSC List Inquiry

1 Client ID KX277V5U [Search] Benefit Plan [Search] 3 DOS 06/01/2011

Provider ID [Search] Procedure Code [Search] Modifier [v]

2 Diagnosis Code 37160 [Search] Diagnosis Description KERATOCONUS NOS

NDC [Search] Revenue Code [Search] Claim Type [Search]

Home Health [v] Records 20 [v]

[search] [clear]

Required fields:

1. Client ID
2. Diagnosis Code
3. DOS (date of service)

Enter diagnosis code without the decimal

Client Information

Name JAMES,ELI Gender MALE DOB 6/12/1930

Eligible Yes Effective Date 8/23/2007 End Date 12/31/2299

Benefit Plan BMD, SMHS and CRN CoPay [CoPay] PA Required

Plan of Care No Managed Care Yes [Managed Care]

CoPay and PA Required should say "Yes" or "No"

Please see below for Warning/Error Messages :

Warning - Copay cannot be determined without a Claim Type

Warning - PA Required cannot be determined without Provider ID

Warning - Copay cannot be determined without Provider ID.

Line	Condition-Treatment	On Line	Guideline
335	CORNEAL OPACITY AND OTHER DISORDERS OF CORNEA (See Guideline Notes 64,65,76) - KERATOPLASTY	Diag	64
335	CORNEAL OPACITY AND OTHER DISORDERS OF CORNEA (See Guideline Notes 64,65,76) - KERATOPLASTY	Diag	76
335	CORNEAL OPACITY AND OTHER DISORDERS OF CORNEA (See Guideline Notes 64,65,76) - KERATOPLASTY	Diag	65

See warning messages for additional requirements

Client and HSC Inquiry

Benefits and HSC Inquiry ? ^

Client Inquiry <input checked="" type="checkbox"/>	Client ID <input type="text" value="KX277V5U"/> [Search]	HSC List Inquiry <input checked="" type="checkbox"/>	Benefit Plan <input type="text"/> [Search]	DOS <input type="text" value="06/01/2011"/>
Provider ID <input type="text" value="113632"/> CNV [Search]	Procedure Code <input type="text" value="92070"/> [Search]	Procedure Description <input type="text" value="FITTING OF CONTACT LENS"/>	Modifier <input type="text"/>	
Diagnosis Code <input type="text" value="37160"/> [Search]	NDC <input type="text"/>	Diagnosis Description <input type="text" value="KERATOCONUS NOS"/>	Claim Type <input type="text" value="M - PROFESSIONAL CLAIMS"/>	
Home Health <input type="text"/>	Revenue Code <input type="text"/> [Search]	Case Managed <input type="text"/>	Records <input type="text" value="20"/>	<input type="button" value="search"/> <input type="button" value="clear"/>

Client Information ? ^

Name <input type="text" value="JAMES,ELI"/>	Gender <input type="text" value="MALE"/>	DOB <input type="text" value="6/12/1930"/>
Eligible <input type="text" value="Yes"/>	Effective Date <input type="text" value="8/23/2007"/>	End Date <input type="text" value="12/31/2299"/>
Benefit Plan <input type="text" value="BMD, SMHS and CRN"/>	CoPay <input type="text" value="Yes"/> [CoPay]	PA Required <input type="text" value="No"/>
Plan of Care <input type="text" value="No"/>	Managed Care <input type="text" value="Yes"/> [Managed Care]	

HSC Prioritized List Information ? ^

Funding Line <input type="text" value="502"/>	Diagnostic Procedure <input type="text" value="No"/>
HSC Response <input type="text" value="Paired Above the Line - Procedure Code Above/Below the Line and Diagnosis Code Above the Line - Covered"/>	

Line [▲]	Condition-Treatment	On Line	Guideline
106	DIABETIC AND OTHER RETINOPATHY (See Guideline Notes 64,65,76) - LASER SURGERY	Proc	65
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124	CANCER OF EYE AND ORBIT (See Guideline Notes 1,7,11,12,64,65,76) - MEDICAL AND SURGICAL TREATMENT, W	Proc	11
124	CANCER OF EYE AND ORBIT (See Guideline Notes 1,7,11,12,64,65,76) - MEDICAL AND SURGICAL TREATMENT, W	Proc	7

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Need help with HSC?

Fee-for-service:

Benefit RN Hotline

toll-free: 800-393-9855

local: 503-945-5939

M-F 8:00 a.m. to 5:00 p.m.

Managed care:

Contact the plan

<http://www.oregon.gov/OHA/healthplan/managed-care/main.shtml>

Do you need further assistance?

Provider Services Unit (PSU)

800-336-6016

dmap.providerservices@state.or.us

M-Th 8:30 a.m. to 4:30 p.m., F 10:00 a.m. to 4:30 p.m.

Webinar and classroom training:

DMAP Provider Training

503-945-6549

provider-trng.dmap@state.or.us

M-F 9:00 a.m. to 5:30 p.m.