

#### Dear Member:

Enclosed, please find the step-by-step procedure on how to successfully create a log-in account for anyone who would like to have an access and view the status of all dental claim, vision claim, variable claim, and prescription claim.

- 1. Complete the Member and or Dependent Log-in account.
- 2. Set your preferences.

This procedure also applies to the member's dependent(s). Due to HIPAA Laws, dependent(s) are required to have their own log-in account to be created.

Please go to the following website:

### www.dhclaims.com

For any difficulty you may encounter, please do not hesitate to contact DHC office at

(212) 505-5050 Extension 219.

Please be advised, this office follows the HIPAA Law.

Thank you for your cooperation: Eric

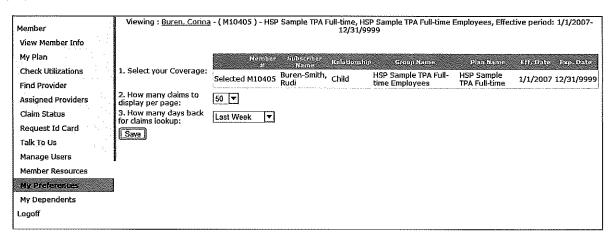
#### Confidential Health Information Enclosed.

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# My Preferences

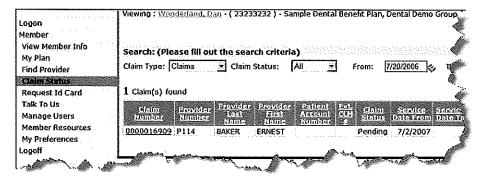
The My Preference screen is the screen which the user will see the first time that they log into the system. Once the member presses the save button, this screen will not be presented to the user unless they select the "My Preferences" option from the menu on the left side of the screen. This screen allows the user to select the number of claims per page the system should display when the member views claims, as well as the time period for which the system should automatically display claims.



To save any changes made to this screen, press the Save or Continue button at the bottom of the screen.

### Claim Status

The Claim Status link provides the Member with a way to search for his/her claims to check their status. The Claim Status screen is the default screen which appears each time a member logs into the website. The settings on the "My Preferences" page determine the number of claims and the time period for which claims are shown.



#### To search for a claim(s):

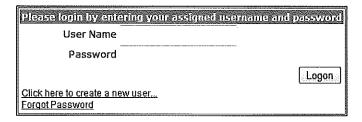
- Select a Claim Type Claim or Pre-estimate.
- Select a Claim Status All, Pending, Paid, Denied, or Historical.
- Select the dates between which to search for claims.
- Press the Refresh button.
- The search results will display a row for each claim that includes information such as the Claim Number, Claim Status, Form Type, Service Date, Total Charges, Member Name, and Member Number.



The verbiage of each claim status can be customized by each client. These statuses are reference codes configurable on the Reference Codes screen in HSP Administrator.

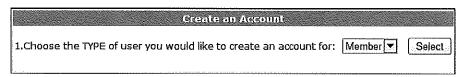
# Member Log On

The method of logging on to i-Transact is the same for all users regardless of what type of user is accessing the system. Once the i-Transact website is located, a screen similar to the one below appears.

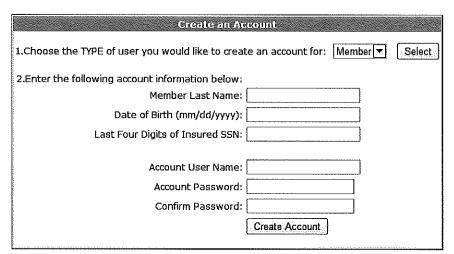


If a User Name and Password has already been issued, enter each into its respective field and press the Logon button.

If a User Name and Password has not already been issued, click on the statement, "<u>Click here to create a new user...</u>" The following screen appears.



For Question 1, select "Member," and click "Select" next to Question 1. Question 2 automatically appears.



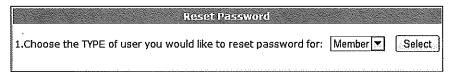
The following fields are shown for question 2 of the Create an Account page.

| Fields           | Description   |
|------------------|---|
| Member Last Name | Type the member's last name. The data must match a member already in MediTrac.                              |
| Date of Birth    | Type the member's date of birth in the mm/dd/yyyy format. The data must match a member already in MediTrac. |

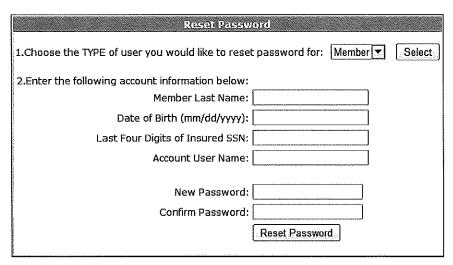
| Fields                          | Description   |
|---------------------------------|---|
| Last Four Digits of Insured SSN | Type the last four digits of the member's Social Security<br>Number. The data must match a member already in<br>MediTrac. |
| Account User Name               | Create a user name for the member.  |
| Account Password                | Create a password for the member.   |
| Confirm Password                | Retype the password created in the previous field.  |

## Forgotten Password

If the primary web user (the first user created for each entity) forgets their password, they have the ability to reset it. This is done by completing the same information used to create their account. To access the screen on which they can reset their password, select "Forgot Password" from the Logon screen. A screen similar to the one below appears.



The user should select their type of user, Member click the "Select" button. The questions that appear next depend upon the user type selected. The user should complete the questions presented, including their current user name to reset their password.



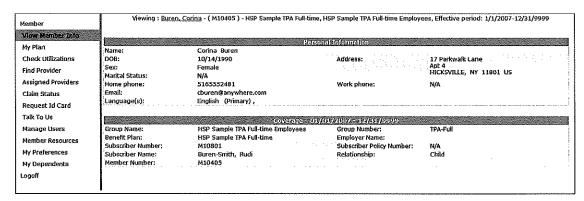
The following fields are shown for question 2 of the Reset Password page.

| Fields           | Description   |
|------------------|---|
| Member Last Name | Type the member's last name. The data must match a Member already in MediTrac.                              |
| Date of Birth    | Type the member's date of birth in the mm/dd/yyyy format. The data must match a Member already in MediTrac. |

| Fields                          | Description   |
|---------------------------------|---|
| Last Four Digits of Insured SSN | Type the last four digits of the member's Social Security Number. The data must match a Member already in MediTrac. |
| Account User Name               | Type a user name for the member.  |
| New Password                    | Create a new password for the member.   |
| Confirm Password                | Retype the password created in the previous field.  |

### View Member Info

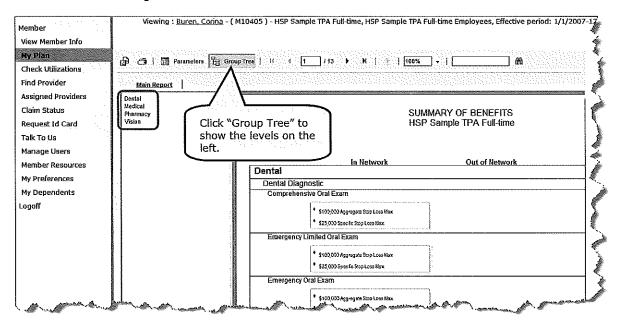
The View Member Info link displays the member's general demographic information as found in the HSP system. If the member has an assigned Primary Care Physician (PCP), the provider's information is displayed at the bottom of the screen. A link is provided (circled in red below) to allow the member to acquire a map to the provider's office.



A list of coverage slices for the Member that includes the Group Name, Benefit Plan, Subscriber information, and coverage dates is provided in the Coverage section.

## My Plan

The My Plan link will display a Summary of Benefits for the Member. The Summary of Benefits will look similar to the following.





If no active coverage is available, users will receive an error message displaying that no active coverage has been located for the member.

## **Check Utilizations**

The Check Utilizations link allows the member to view the liabilities that they have used and the next date on which a liability can become available.

