

# Portal User Guide

# You can sign up to access your personal account information online!

At the Tufts Health Plan secure online site, it's easy to create an account that lets you:

- Pay your monthly premium\*
- View your claims history
- View your current and past referrals
- View your monthly Explanation of Benefits (EOB) documents
- Manage your eDelivery preferences
- And more!

\*Not applicable to members who are enrolled in a Group plan through their former employer.



# To register, follow these simple steps:

#### 1 Visit www.thpmp.org/registration.

2 On the registration page, enter your member ID number (found on your member ID card), and your date of birth.

Registration	1
1 Identificatio	a 2 Verification 3 Create Account
Let's get started	
Please ente	r your Member ID and Date of Birth so we can identify you.
Member ID:	Be sure to include any letters or suffixes in the
	number. Where can I find my member ID?
Date of Birth:	xx/xx/xxxxx
	Please use the format MM/DD/YYYY

3 Answer security questions or enter your generated PIN (given to you by a Customer Relations Representative), so we can verify your identity.





4 Enter your email address and password, enter your mobile phone number (optional), and choose your three security questions.

1 Identification	2	Verification	Create Account
	ve verified who you are. reate your account		
Create Login Info	ormation:		
-	ill be used to log into your acco	ount.	
mail Address: onfirm Email ddress:	user@example.com		
Password: Confirm Password:		<ul> <li>8-16 characters v number.</li> <li>Passwords are C</li> </ul>	with no spaces and at least one letter and one ASE SENSITIVE.
tobile Phone (St	15):		
	ssages. We will use this number		n to provide us with a mobile phone number that on code should we need to confirm your identity
hoose Security	Questions:		
			nswer your chosen security questions. Provide be retrieved if you have forgotten them.
	ecurity questions:	and the second s	Enter your answer:
Select Security Q	uestion	-	
	action	-	
Select Security Qu	rescion		

5

Make your selections for eDelivery. If you would like to view your plan documents electronically instead of receiving them by mail, make sure you select "**Electronic**" for each option.

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Identification 2 V	erification 🧹 🔰 3 Cı	reate Account
aami, you have successfully created your accoun You will receive a confirmation em		
elivery Preferences		
our Documents	Electronic	US Mail
explanation of Benefits (EOB)	۲	$\odot$
lan Documents	۲	0
erstand that by clicking 'Electronic', I have 'opted ments sent to my online account. I understand th	at paper versions of these documents will n Evidence of Coverage (EOC), Formulary (D	o longer be mailed to me. Pl
ments include Annual Notice of Change (ANOC), nacy Directory (PDP only), and Policy for our Sup		



# Here are 5 exciting things you can do with your personal account:

## You can pay your monthly premium\* securely online<sup>1</sup>

You can see how much your monthly premium is, what you paid last month, and how much is due next month. To make a payment, click on "**Make a payment**" in the top right corner of this area.



#### You can view your most recent claims<sup>1</sup> 2

You'll see how much your provider charged for the service, as well as the amount you're responsible for paying. Please note, in some cases you may have already paid your cost-sharing amount at the provider's office, or you may receive a bill at a later date. If you have any questions about your cost sharing or a bill you receive, please call Customer Relations. To see all of your past claims, click on "Search All Claims" in the top right corner of this section.

Your 3 Most	Recent Claims			Sear	ch All Claims
Date of Service	Care Provided by	Specialty	Amount Billed	Your Responsibility?	
08/30/2016	SAMPLE HOSPITAL	FACILITY / SERVICE	\$211.00	\$0.00	Details »
06/15/2016	SAMPLE SKILLED NURSING FCLTY	FACILITY / SERVICE	\$1,401.00	\$25.25	Details »
06/13/2016	SAMPLE DOCTOR	INTERNAL MEDICINE	\$1,401.00	\$0.00	Details »

## 3 You can view your most recent referrals<sup>1</sup>

You'll see your three most recent referrals by provider, start and expiration dates, as well as the number of visits the referral allows you to have. To see all of your current and past referrals, click on "Search all Referrals & Authorizations."

Your 3 Most Recent Referrals			S	earch All Referrals	& Authorizations
Start Date	Expiration Date	Care Provided by	Specialty	Visits Allowed 💡	Referral Number
05/18/2016	05/18/2017	SAMPLE DOCTOR	INTERNAL MEDICINE	3	XCG23713
06/21/2016	06/21/2017	SAMPLE DOCTOR	DERMATOLOGY	3	XCG23732
04/29/2016	04/29/2017	SAMPLE DOCTOR	INTERNAL MEDICINE	3	XCG21937

Note: Tufts Medicare Preferred Supplement plan members are not required to obtain referrals and therefore will not see this feature in their accounts.

### You can view your recent medical Explanation of Benefits (EOBs)<sup>1</sup>

#### Follow these two steps:

1: From your account home page, hover over "Claims & Billing" and click on "Explanation of Benefits (EOB) Statement."

Home	My Coverage	Claims & Billing	Referr
Welcome BOB SAMP	PLE	Claims Summary	
My Account		Explanation of Benefits (EOB) Statement	ou Like
		Monthly Premium Payment	e allowar

**2:** This will display all of your recent EOBs. They are conveniently labeled by month, so you can easily see the medical services you received and what you paid for them.

Claims Summary Explanation of Benefits (EOB) Statement Monthly Premium Payment
Your explanation of benefits (EOB) is a statement we send explaining what medical treatments and/or services were paid for on your behalf to your health care providers. This statement will also highlight what you owe and how your payments fit into your plan's copayments and/or deductibles.
<b>Don't See an EOB?</b> The dates included in each EOB statement refer to the dates of payment. To view specific dates or service please reference the claims page. EOBs are available starting April 2014. EOBs are only generated when there are claims, you may not have an EOB every month. The previous month's EOB statements may not be available to view until the 15th of following month.
2016 HMO EOBs
April » April
2015 HMO EOBs
PDF December » PDF November » PDF October » PDF September » PDF August » PDF July »
DE June » DE May » DE April » DE March » DE February » DE January »

**Note:** This feature may appear differently for Tufts Medicare Preferred Supplement plan members.

### 5 You can view or change your eDelivery preferences<sup>1</sup>

From your account home page, select "**Manage My Account**" from the top menu.

TUFTS Health Plan		Tufts Medicare Preferred   Forms Manage My Account Contact Us   Log		
Home	My Coverage	Claims & Billing	Referrals	Drug Coverage

At the bottom of your "Manage My Account" page, you'll see two sections marked "eDelivery Preferences" and "Marketing Preferences." In the "eDelivery Preferences" section, you can indicate how you want to receive your plan documents (electronically or via US mail), and in the "Marketing Preferences" section, you can tell us whether or not you would like to receive helpful plan information emails via eDelivery. Click "Edit" to change your selections.

#### eDelivery Preferences

Electronic delivery of plan documents will help us in our efforts to be more "green" in our business practices. You can already view your claims online, and now you can view your plan documents online any time. You will always know where your documents are and you can reference them any time you log on.

Edit

Edit

Your Documents	Delivery Type
Explanation of Benefits (EOB)	US Mail
Plan Documents	US Mail

If you decide, at anytime, that you want to change how to receive these documents, you can click on the "Edit" link to change preferences.

I understand that by clicking "Electronic", I have "opted in" to have the Explanation of Benefits (EOB-HMO only) or Plan Documents sent to my online account. I understand that paper versions of these documents will no longer be mailed to me. Plan Documents include Annual Notice of Change (ANOC), Evidence of Coverage (EOC), Formulary (Drug List), Provider Directory, Pharmacy Directory (PDP only), and Medicare Supplement Policy (if applicable).

#### Marketing Preference

You can control the amount of emails that you receive from Tufts Health Plan. Just opt out of the types of marketing messages that you don't want to receive.

Communicat	ion Type	Selection
Emails	Receive emails from Tufts Medicare Preferred that include helpful plan information and health and wellness content.	Opt-in

# For more information, call Customer Relations or visit us online:



Tufts Health Plan Senior Care Options plan members:

1-855-670-5934 (TTY: 711)

www.thpmp.org/sco

Representatives are available Monday-Friday, 8 a.m.-8 p.m. (From October 1 to March 31, representatives are available 7 days a week, 8 a.m.-8 p.m.) After hours and on holidays, please leave a message and a representative will return your call on the next business day.

\*Not applicable to members who are enrolled in a Group plan through their former employer.

<sup>1</sup>All data shown is sample data. Your information may appear differently.

Note: Not all features are available to members of all plans. For more information, contact Customer Relations.

Tufts Health Plan is an HMO-SNP plan with a Medicare contract. Enrollment in Tufts Health Plan depends on contract renewal. Tufts Health Plan is a voluntary MassHealth (Medicaid) program in association with the Executive Office of Health and Human services (EOHHS) and Centers for Medicare & Medicaid Services (CMS). This document may be available upon request in an alternate format such as Braille, larger print, or audio. Tufts Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 855-670-5934 (TTY: 711). ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 855-670-5934 (TTY: 711). H2256\_2019\_341\_C