QualChoice® HEALTH INSURANCE

Provider Portal Administrator Designation

Our Provider Portal offers secure online access for healthcare providers to handle daily business transactions. The portal is governed by a strict access policy to make sure that no PHI is inappropriately distributed. Each user will have a separate secure account.

Directions: Use this form to designate, change, or disable a primary Portal Administrator (PA). Only a PA has the authority to assign and control access to other users.

Once a PA is designated, they would need to fill out the Provider Portal User Access Form for each user needing access to claim information, authorization, and eligibility inquiries. All user requests must be sent to QualChoice to update the portal.

All fields must be completed. Please allow 10 business days for processing.

Section I. Provider Information

Provider Name	Provider NPI Number	Provider TIN

Provider Type ☐ Facility ☐ Group ☐ Individual

Section II. Portal Administrator

☐ Add ☐ Disable ☐ Change Field Changing? | Effective Date (MM/DD/YYYY):

Portal Administrator Name (Last, First, MI) | Work Phone Number

Email

To ensure we are communicating with the designated Portal Administrator, please provide a Password.* (Max length: 30 characters)

Will administrator need portal access? ☐ Yes ☐ No (If **yes**, please fill out section IV.)

Section III. Authorized Signature

By way of signature below, I designate the individual named in Section II as the Portal Administrator for the provider named in Section I. This individual has the authority to add, change, and terminate employees' access to the QualChoice Provider Portal.

Print Name	Title
Signature	Date Signed (MM/DD/YYYY)

Section IV. Administrator User Access

Preferred User ID	Last 4 Digits of SSN	Date of Birth (MM/DD/YYYY)

Section V. Instructions

Email: qc_bu_pr@qualchoice.com

Fax: 833.696.1937

Mail: QualChoice
Attn: Business Unit
P.O. Box 25610
Little Rock, AR 72221

A user ID can only be used for one provider portal at a time. If access is needed for multiple portals, please make sure each ID is unique. If a preferred ID is unavailable, QualChoice can assign the user ID.

***Administrator password may be used on calls to verify identity.**

We do have a spreadsheet available to add users to multiple portals or add multiple users at a time. Request via email: qc_bu_pr@qualchoice.com.

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Provider Portal User Access Form

Directions: The provider's designated Portal Administrator (PA) must complete this form to assign, change, or disable a user. We will send the credentials to the PA. Users will have a temporary password. The first time the user accesses the portal, they will be prompted to change the temporary password to a permanent password.

All fields must be completed. Please allow 10 business days for processing.

Section I: Provider Information

Provider Name	Provider NPI Number	Provider TIN

Provider Type ☐ Facility ☐ Group ☐ Individual

Section II: Portal Administrator

Portal Administrator Name (Last, First, MI)	Work Phone Number

Email

Section III: Authorized User(s) ▶ Max length of User ID: 30 Characters

☐ Add ☐ Disable ☐ Change Field Changing?

Name

User ID

Phone | Last 4 Digits of SSN | Date of Birth (MM/DD/YYYY)

☐ Add ☐ Disable ☐ Change Field Changing?

Name

User ID

Phone | Last 4 Digits of SSN | Date of Birth (MM/DD/YYYY)

☐ Add ☐ Disable ☐ Change Field Changing?

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☐ Add ☐ Disable ☐ Change Field Changing?

Name

User ID

Phone | Last 4 Digits of SSN | Date of Birth (MM/DD/YYYY)

Section IV. Authorized Signature

By way of signature below, I authorize the addition, deletion or change of users as listed in Section III.

Provider Portal Administrator Signature	Date Signed (MM/DD/YYYY)

Section V. Instructions

Email: qc_bu_pr@qualchoice.com

Fax: 833.696.1937

Mail: QualChoice
Attn: Business Unit
P.O. Box 25610
Little Rock, AR 72221

A user ID can only be used for one provider portal at a time. If access is needed for multiple portals, please make sure each ID is unique. If a preferred ID is unavailable, QualChoice can assign the user ID.

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