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Registering for the Humana.com Dental Provider Portal via the web

From Humana.com, access the registration page by clicking the “Sign In” link in the upper right of the page.

On the Sign In page, there is a Register Now link on the right sidebar.

On the Registration page, select Dental Provider from the options on the left side of the page and then click “Get Started” to proceed with the registration. **DO NOT** select the Medical Provider option. Medical providers use a different portal, so dental claims will not display.
Step 1 – To register for the dental portal, you'll need:

- Information from two checks received from Humana
  - Check number
  - Check date
  - Check amount
- Your organization’s demographic information
- Tax Identification Number

When you have all of this information, click “Register Now.” If you do not have this information, skip to Page 9 for information on the paper application process.

Steps 2 and 3 – Dentist Registration Agreement and Confidentiality Privacy Agreement. Review this information and click “I Agree” on each page to continue.
Step 4 – Electronic Validation. Enter the Tax Identification Number as well as the information from two checks and click Next.

Step 5 – Enter organization’s demographic information. Once complete, click Next
Step 6 – Designate your primary controlling authority (PCA). This person has legal authorization to sign contracts for your organization. You can use the information entered in the previous step by clicking the Use My Name and Use Organization Address checkboxes. Once complete, click Next.

Step 7 – Designate an alternate controlling authority (ACA). If there is another person authorized to sign contracts for your organization, you can enter their information here. If you do not want to designate an ACA, you can skip this step by leaving the fields blank and clicking Next.
Step 8 – Designate a primary access administrator (PAA). This person will be responsible for registering additional users for your organization and can assign access privileges. This also is the only person who has authorization to unlock the account via customer care if there’s an access issue. Once this is complete, click Next.

Step 9 – Add Tax Identification Numbers (TINs). If you have TINs you would like to add, you can do that here. You need the TIN as well as payment information for a claim associated with that TIN. If you do not need to add TINs, click Skip.
Step 10 – PAA user information. Create a user ID and password to log in to the dentist portal on this page. You will also select a Secret Question and answer in case you are locked out of your account and need to reset the password. Please make note of this information as it is the only way to reset your password without contacting customer service. Once complete, click Submit.

Step 11 – Registration completed. The username and password can now be used to log in to the dentist portal.
Registering for the Humana.com Dental Provider Portal via paper application
From Humana.com, access the registration page by clicking the “Sign In” link in the upper right of the page.

On the Sign In page there is a Register Now link on the right hand sidebar
On the Registration page, select Dental Provider from the options on the left, then click “Get Started” to proceed with the registration. DO NOT select the Medical Provider option. Medical providers use a different portal, so dental claims will not display.

If you do not have the information required to authenticate the web application or have issues with the process, you can use a paper application process to register for the Humana.com Dental Provider Portal. To access the paper application, click the “Register Later” link from Step 1 of the web registration process.
The information you need to complete the paper application and how to submit it to Humana will display. If you have all the information, click Next to continue.

What you will need:
1. Your organization name and address(es)
2. Your Federal Tax ID for dental organizations, and State Medical License number and Social Security number for dentists.
3. The name and address of your Primary Controlling Authority (PCA) – the individual who can legally bind your organization
4. The name and address of an Alternate Controlling Authority (ACA) – a second individual who can perform the PCA’s duties if necessary (Optional)
5. The name and address of your Primary Access Administrator (PAA) – the individual responsible for registering users and assigning access privileges to those users within your organization.

Note: Throughout this application, you will be asked to supply e-mail addresses for certain key individuals within your organization. Although these e-mail addresses are optional, they will help us communicate with your organization for business purposes and help us keep you informed of any enhancements to our Web site. HumanaDental will not sell, license or transmit these e-mail addresses outside of Humana Inc. for any reason.

What happens next:
After you complete the application process, you will need to:
1. Print your application.
2. Have the application signed and witnessed. Be sure that all dates match.
3. Keep a copy of the application for your records.
4. Mail the signed original application to:
   HumanaDental IT Security
   PO Box 14169
   Lexington, KY 40512-4169

Registration tips:
- It should take approximately 10 – 15 minutes to complete your application.
- When you have completed a step, click Next to move to the next step.
- You may also use the links on the left of many screens to move through the application until it is completed.

Enter your organization information as well as contact information. This way, Humana can contact you if there are any questions about the application.

You also will create an application access code, which you can use to access the application if needed. When that information is entered, click Next to continue.
Enter your Tax Identification Number on the next page. Once completed click Next.

If your previous entry was a P.O. Box, enter the physical address for your organization. If you entered a physical address previously, you can click Use Organization Address. Click Next to continue.

Enter the information for your primary controlling authority (PCA). This person has legal authorization to sign contracts on behalf of your organization. If this is the same person entered in the contact information in the first step, click the embedded links to fill in that information. Click Next to continue.
You now can enter an alternate controlling authority (ACA). If you do not want to designate another person who’s authorized to sign contracts on behalf of your organization, you can leave this page blank. Enter the information for your ACA, then click Next to continue.
Enter the information for your primary access administrator (PAA). The PAA is responsible for registering additional users and assigning their access rights. Additionally, if there are access issues with the provider portal, the PAA is the only person whom customer care is authorized to assist.

You then will then create a User ID and alternative/AKA name following the directions on the page. Then click Next.

The application is now complete. Review the entries for accuracy. If you see any incorrect fields, click the Edit link to access that entry and fix the error. Once all fields are confirmed to be accurate scroll to the bottom of the page and click Next.
Next you will see direction for the next steps of the application process. The paper application needs to be printed, signed by the appropriate individuals and sent to Humana for review. You can print the application by clicking the Print App button.

The application has now been electronically submitted for review. Once the signed paper application is received, Humana IT security will complete your registration. You will need signatures on the application from the PCA – and ACA if one was designated – as well as a
witness who is someone other than the designated PCA or ACA. Ensure all directions are followed – anything missing or incorrect can delay the registration.

Once Humana processes the application, you will receive your login information by mail with a temporary password. After logging in to the provider portal the first time, you will be prompted to change your password. You will then have access to the Dental Provider Portal.

**Username and password issues**

**Retrieve Username**

You cannot retrieve your username online for the dentist portal. Please call customer service at 1-800-833-2223. Hours of operation are 8 a.m. to 8 p.m. Eastern time Monday through Friday. Customer service can only assist the PAA with retrieving a username.

**Reset Password**
To reset your password, start on the login page and click the “Forgot your password link on the right hand side of the page.”

On the password help screen, click “Select user type” under Other registered users, then select Healthcare Provider and click Continue.

On the Reset your password page, enter your Username and click Continue.
You will see the security question you selected when you created your account. Enter the answer you gave during registration and click Continue. If you do not have the correct answer, your PAA will need to call customer service at 1-800-833-2223.
Once answered correctly, the Change Your Password page will display. Enter your new password and click Submit.

You can now log in to the dental portal with your new password.
Add new user
The PAA can create additional logins for others to use to access the provider portal. To access this function, hover over the Dental Provider menu from the landing page and select Register New Users from the menu.

The Register New Users page will display in a new window.

On this page you will enter the desired User ID and AKA name (they cannot be the same), the dates you want this login to be effective and information for the user who will use this login. Click Next when complete.
The login details for this new User ID will display. Take notes of the password provided as it will be needed to log in for the first time. Once this information is recorded, click Next.

A second validation page will display. Click Ok to continue.
The Assign Web Access Rights page will now display. On this page you can grant specific business functions to this newly created login. You can click the checkbox for individual rights or if you want to assign all you can click the box next to their name. Click Save once the appropriate rights are selected.

You will receive two confirmation screens. The first validates the access profile has been changed. Click OK to finalize the changes. The next will confirm the changes were made. From this screen, you have the option of adding another user to the organization, which will take you back to the Register New Users page. If you do not want to add users, click OK to continue.
To complete the new user registration, that User ID needs to be used to log in to the dental portal. Return to the login page at https://www.humana.com/logon/ and have the new user log in with the User ID and the password provided during the registration process.

Once logged in, you will see a password security question. The user will need to select a question and provide an answer to unlock the account if the password is forgotten or misplaced. Once complete, click Next.

Next, two terms-of-use pages will display – the Online Services Agreement and the Humana Web Confidentiality Agreement. Review this information and click the “I Agree” button on each page to continue.

Once completed, the Reset Password page will display. Click the “Reset Password” link to update the temporary password with your own.
The Change Your Password page will now display. Enter a new password in both fields following the password rules. Click Submit when complete.

The Password Change Confirmation screen will now display. You can click Sign in to be directed to the dental portal landing page. Your new username and password are now ready to use.
Manage User Status
If you need to make changes to the access for a User ID created by your PAA, you can do so through the Manage User Status page. To access this function, hover over the Dental Provider menu from the landing page and select Manage User Status from the menu.

From the Manage User Status page, select the user you would like to update by clicking the name from the list of users.

From this page, you have multiple options:

- Add a status change, such as placing an account on hold for an associate being on leave, vacation or suspension.
- Show a history of the status changes and who applied them.
- Revoke access to the User ID.
- Reset password for a User ID.
To submit a status change, click on the button that takes you to the Add Status Change page. Here you can select the type of action from leave, suspension and vacation and set the time range for the action being added. Click the Submit New Action button when completed.

You will return to the Select Action screen and see the status change added to history for the user. The user will be unable to access the dental portal with their login during the time frame submitted.
To cancel or change a future status change (this is indicated by the status listed in red), click the blue hyperlink for the status change in “As of Date” field.

The Manage User Status screen will now display, here you have the choice of changing or canceling the action. Making a change to the action and submitting will return you to the Select Action window where the update will now display. If you cancel the action, it will no longer display. The screenshot below shows the page after cancelling the action submitted previously.
The canceled record is no longer present. If you would like to review any canceled or historical changes, click the Show Historical Records button.

To end access to the portal for a User ID, select Revoke User. You can make a comment as to why the user was revoked, then select a start date and time. Once submitted, the user will no longer have access to the portal as of the date and time you indicate.
The screenshot below shows this user’s access has been revoked. This action can be reversed by selecting the Reinstate User option and entering the date you would like the user reinstated.

To reset a password, select that option from the Select Action page. You can then create a temporary eight-character password for that User ID. Once they log in with the temporary password, they will be prompted to change the password to their own.
Assign Web Access Rights

To update what functions a user can access, select the Assign Web Access Rights link from the Dental Providers drop-down menu.

Select your organization from the drop-down menu, then select the user you would like to update from the listing below and click Next.
The list of functions that displayed during new user registration will display. You can expand the fields to select individual functions to allow or disallow. Once your selections are complete, click Save.

You will receive two confirmation screens. The first is to validate that the access profile has been changed. Click OK to finalize the changes. The next will confirm the changes were made. When you click OK on the second screen, you will return to the dental portal landing page.
Eligibility and Benefits
To view member eligibility and benefits, click that option under Frequently Accessed Links on the dental portal landing page.

The member search page will display. Enter the ID number for the member you would like to review and click Search.

Search results will display showing the member associated with that ID number. Select the hyperlink for the member you would like to review. Please note: There may be multiple entries if the member has had plan changes with Humana.
The member details page will display. On the tab displayed, you can view the member’s demographic information as well coverage information.

From this page, you can also access the member’s year-to-date plan usage. Under the subscriber information header at the top of the page, click the Deductible and Maximums link.
This link will open a new window that contains year-to-date deductible information as well as counters for services limited by the member’s plan.

For benefits on individual services, click the Plan Benefit Details tab.
On the Plan & Coverage Detail screen, you can access the plan deductibles as well as benefits for individual services. Each of the fields in the screenshot below – Preventive services, Basic services, Major services and Orthodontic services – is an expandable field that contains benefit coverage for individual services. These categories may change based on the member's coverage.

You also can access the member's Certificate of Coverage by clicking the Download PDF link under Coverage details.
Claims and Estimates Status
To access the claims status tool, click the Search button on the right side of the dental portal landing page.

On the claims search page, you can look for either claims or estimates. You can choose what will display by clicking the Type field and selecting which one you would like to search. Additionally, if you have multiple Tax Identification Numbers, you can select which to review by clicking that field and selecting the appropriate one.
Enter the ID number and date of birth for the member whose claims you would like to see, then click Search. If you only want to see claims for a certain date range, you can specify that in the Date of Service – From and To fields.

To see claim details, click anywhere on the line for the claim you would like to see. The claim details will then populate below the search results.
If you already have the claim number and want to go directly to the claim details, click the Document Search tab on the Document Search screen. Here you can enter the claim number directly. Click Search to populate the claim details.

The detailed claims info will display directly under the Search window.
**View DHMO Rosters**

To view the monthly dental health maintenance organization (DHMO) roster for your office, click the View DHMO Rosters link from the provider portal landing page.

The DHMO Roster search page will display in a new window. Enter your Provider ID, then the Search button to display the associated Payee IDs.

The Payee ID selection will display. Click the drop-down button and select the ID you want to view.
The Provider ID and Payee ID fields will now populate with the appropriate information. Click Search.

Roster results will now display.

Click the View button next to the month you want to review. Roster details will open as a PDF file.
PPO Fee Schedule

The Fee Schedule Inquiry function lets your office staff review specific fee schedules applicable to your provider agreements with Humana. You can access this from the Dental Provider Portal landing page.

A new window will display with two pages of information relating to the fee schedule tool and how to use it to determine your allowed amounts. Review this information and verify the correct provider name and ID appear, then click Continue on each page.
Any contracted fee schedules will be displayed. Click the link under the “Schedule/Area” header to continue.

On the next page, you can enter either the specific CPT4 codes you want to review or the code range. When you have your criteria entered, click Search.

The Code Return page will display with the results displayed for the codes you entered. From this page, you can enter additional codes to search and recalculate the allowable percentage if your contracted rate is a set percentage of the fee schedule amount.
Member Summary

The Humana Member Summary displays member-specific, clinically relevant information to assist providers in identifying additional actionable opportunities for improving clinical outcomes and reducing medically related costs. To access this tool, click the Member Summary link on the Dental Provider Portal landing page.

The Member Summary page will display. From here you have two options. You can download a spreadsheet if you would like to generate a large number of member summaries. The directions for this option appear on the page. If you only want one or two member summaries, you can click the Individual Standard Member Summary to enter the information on the page.
Enter the member IDs and date of birth, then click Process. You can enter up to 10 members in a single request with this option.

The member summaries will process and be available to open in a PDF document. This document will list any conditions the patient had claims submitted with during the previous 365 days.
Provider Payments

To access the payment information tool, hover over the Dental Providers menu and select View Provider Payments.

The Provider Remittance Advice (835 Transaction) Inquiry page will open in a new window. If you have multiple TINs associated with your office, you can select the Provider Group/TIN from the drop-down menus in the Provider Settings window. Once selected, you can choose your search criteria.
The Search Type drop down contains 12 search options:

- ACH Number
- Check Number
- Claim Number
- Remit Number
- Family Unit by Service Date
- Family Unit by Voucher Date
- Member by Service Date
- Member by Voucher Date
- Service Date
- Voucher Date
- EFT Deposit Date
- BOP Number

The search field will change based on the search criteria selected. If you choose ACH Number, Check Number, Claim Number, Remit Number or BOP Number, a single field will display where you can enter the applicable number for your search. Click Submit to continue.

The search results will display.
You can search by family unit or member if you want to see all remittances for a 30-day period. With that option, enter the Member ID number and date range you would like to review. In the member search, enter the date of birth for the specific member.

After submitting, a new page will display with a list of members and policies. Below is the search results for Family Unit, if you search by member only the member with the matching date of birth will display. Click the name of the member whose remittances you want to review. A member’s name may display multiple times if they have both dental and medical policies.
Search results will display.

If you want to review all remittances for a 30-day period, you can search by Service Date, Voucher Date or EFT Deposit Date. The search page will display a start and end field. Specify the time frame you would like to review (30 days maximum) and click submit.
Search results will display.

Regardless of the search criteria, the remit summary page will contain the same information. To see additional information about a remit, you can click the box with the plus sign to the left of the check number field. This will open an expandable field with additional payment information.
To view additional remit information, you have multiple options. For a single remit download, there are four icons for each remit. The Notepad and Word document icon will download the HIPAA ANSI X12 version of the remit. The Excel file icon will download an Excel document that displays key elements of the payment. The PDF icon will download a PDF of the remittance advice, which can be seen below.

You can download multiple remittances. However, you can only do this in the HIPAA ANSI X12 format. You can select the specific remits you want to download, or you can click the Select All button. Once you have the remits you would like, click Begin Download. A new window will display with the requested information, which you can copy and import as needed.
ERA/EFT Setup
To access the ERA/EFT tool, hover over the Dental Providers menu, then select ERA/EFT from the menu that displays.
This guide will show how to add or cancel an ERA/EFT transaction via the provider portal. For a more comprehensive guide, access the full manual by clicking the Help link in the upper right corner of the ERA/EFT tool.

To continue with the ERA/EFT setup, validate that the prefilled Requestor Information is correct, then select your Tax Identification Number from the drop-down menu and click Next.

Select the kind of request you would like to submit from the Request Type drop-down menu. The options are Add ERA, Add EFT, Add ERA/EFT, Cancel ERA, Cancel EFT, Cancel ERA/EFT, Change File Delivery, Change Bank Information, Confirm Pre-Note and Status Inquiry. This example uses Add ERA/EFT.
Next you will select from either Group, Facility or Individual tabs for the provider type you want to set up. Click the check boxes next to those provider listings, then click Next.

The next page that displays is the Terms and Conditions for Electronic Funds Transfer Agreement and Authorization. Review this information and click I Agree to continue with setup.

The Add ERA page will now display. You can choose between Web and Clearinghouse. If you choose Web, the remittance will be available from the provider payment tool on the web. Otherwise, you can select your Clearinghouse from the drop-down menu or manually enter the information if it does not appear in the menu. Once completed, click the Continue to EFT Setup button to continue.
On the Add EFT page, enter in your bank's routing number and click Verify. The rest of the institution information will appear. Enter your Account number and indicate the account type by selecting the Checking or Saving button. Click Next to complete the setup.

The confirmation page will now display. You can click the Print button in the upper right corner to print the confirmation for your records.
Click the Home link in the upper left corner to return to the Provider Demographics page. Here the checkmarks in the ERA and EFT fields show the update was applied.

To stop using ERA/EFT, select Cancel ERA/EFT from the Request Type drop-down menu. Select the providers for whom you want to cancel ERA/EFT, then click Next.
The Cancel ERA/EFT page will display. From the drop-down menu, select the reason you would like to cancel ERA/EFT. If you select Other, you can use the free-form text field to provide a reason. When completed, click Next.

The next page will display with a final validation that you want to cancel ERA/EFT. Click Yes to continue.
The confirmation page will display. You can click the Print button in the upper right corner to print the confirmation for your records.

Please note:

- You can cancel ERA only if you do not receive EFT. If you receive EFT from Humana, you must also be set up for ERA.
- If your ERA/EFT setup was initiated through EnrollHub™, a CAQH EFT/ERA Solution™, please contact CAQH to cancel the setup.

For additional information or questions about ERA/EFT changes, please refer to the Help guide on the ERA/EFT tool page.