



myOhioHealthy.com

Provider User Guide

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About This Guide

This guide provides an overview of the Provider Portal and outlines how to locate patients, verify eligibility, review claim information, and submit secure inquiries.

The Provider Portal enables authorized users to:

- Locate patients using required identifying information
- Verify eligibility and coverage details
- Review claim status and payment information
- Submit secure inquiries

Access to portal features is based on assigned permissions and organizational configuration.

Account Registration

Before accessing the Provider Portal, you must complete a one-time registration process to create your secure login credentials and link your account to your provider information.

Important: Registration must be completed in one session. The system does not allow you to save and return later.

Step 1: Create Your Login Credentials

1. Go to **www.myOhioHealthy.com**.
2. Select **Provider**.
3. Select **Create Your Account**.
4. Complete the security verification and select **Next**.

Enter the following information:

- **Username** (minimum 4 characters)
- **Password** (6–32 characters, must include at least one non-letter character)
- **First and Last Name**
- **Email Address**
- **Three security questions and answers** (answers are case sensitive)

Select **Submit**.

You will be prompted to re-enter your password to confirm.

Select **Next** to continue to Provider Registration.

Step 2: Link Your Account to Your Provider Information

After creating your login credentials, you must connect your account to your Provider Tax ID (TIN).

1. Enter your **first and last name** (as the portal user).
2. Enter the **Provider Tax ID number** exactly as it appears on the W-9.
3. Complete all required provider information fields.
4. Indicate whether you are registering as:
 - A Provider/Facility, or
 - A Billing Center
5. Select the access type requested (Claims and/or Eligibility access).

Select **Submit** to complete the registration.

Forgot Password

If you forget your password or your account becomes locked, use the password recovery process. Do not create a new account.

Resetting Your Password

1. On the login page, select **Forgot your password?**
2. Enter your username.
3. Select **Submit**.

You will be prompted to select your Multi-Factor Authentication (MFA) method to recover your password.

Forgot Username

If you forget your username:

1. Select **Forgot your username?** on the login page.
2. Enter the email address used during registration.
3. Select **Submit**.

You will be prompted to select your Multi-Factor Authentication (MFA) method to recover your username.

Additional Registration: Adding a Tax ID (TIN)

If you bill under multiple Tax IDs:

1. Select **My Account**.
2. Choose **Registration**.
3. Enter the additional Tax ID and associated information.
4. Select the appropriate access type.
5. Select **Submit**.

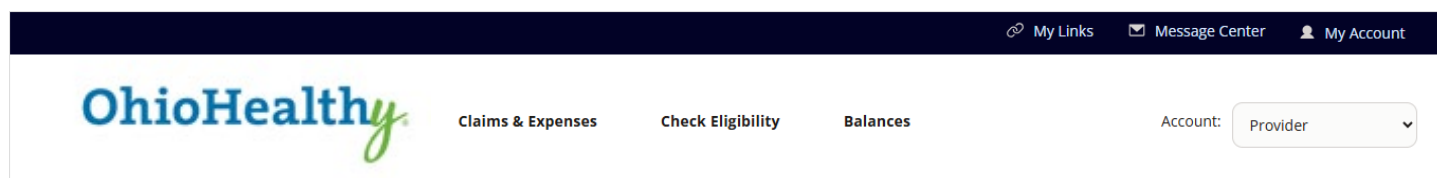
Once approved, you can use the Claims filter feature to select the appropriate TIN when reviewing claims.

Navigation Overview

The Provider Portal navigation is located at the top of each page and provides access to core functions.

The primary navigation includes:

- **Home** – Returns to the Provider Dashboard
- **Claims & Expenses** – Search and review claim details
- **Check Eligibility** – Verify patient coverage information
- **Balances** – View deductible and out-of-pocket information (if permitted)



Utility Links

Utility links appear in the upper-right corner of the screen and are available from all pages.

These may include:

- **My Links** – Quick access to configured tools
- **Message Center** – Secure communication
- **My Account** – Update login or profile information
- **Account Selection** – Switch between available provider accounts (if applicable)

Availability of options depends on assigned permissions.

Provider Dashboard

The Provider Dashboard is the landing page after logging into the Provider Portal. The dashboard provides access to patient search and core portal functions.

[My Links](#) [Message Center](#) [My Account](#)

OhioHealth[®] [Home](#) [Claims & Expenses](#) [Check Eligibility](#) [Balances](#) [Benefits Lookup Tool](#) Account: [Provider](#) ▼

Hello Beth!

☒ You have a new message [View Message →](#)

▼ ▼

To find a patient enter all information. Claim Number is optional.

Provider Dashboard

[Site Map](#)

Patient Search Area

The Patient Search section appears on the dashboard.

To locate a patient, enter:

Member ID **or**

Social Security Number (SSN)

And the required identifying information:

First Name

Last Name

Date of Birth

Gender

Claim Number is optional.

Select **Find** to initiate the search.

Select **Clear** to remove entered criteria.

Select **Reset** to restore the fields to default.

All required identifying information must be entered to locate a patient.

Notifications

System notifications may appear on the dashboard, such as:

- New message alerts
- Informational banners

Select **View Message** to open a new message directly from the dashboard.

Searching for a Patient

All portal activity begins by locating a patient.

A patient must be located before accessing eligibility, claims, balances, or other patient-level information.

The screenshot displays the OhioHealth Provider Dashboard. At the top, there is a navigation bar with links for 'My Links', 'Message Center', and 'My Account'. Below this, a header section includes the OhioHealth logo and a menu with options: 'Home', 'Claims & Expenses', 'Check Eligibility', 'Balances', 'Benefits Lookup Tool', and an 'Account' dropdown set to 'Provider'. A 'DEMO USER' label is visible. A large blue banner greets the user with 'Hello Beth!'. Below the banner, a notification bar states 'You have a new message' with a 'View Message' link. The main search area contains input fields for 'Member ID', 'SSN', 'First Name', 'Last Name', 'Date of Birth' (with a dropdown arrow), and 'Gender' (with a dropdown arrow). A 'Claim Number' field is also present. Below these fields are 'Find', 'Clear', and 'Reset' buttons. A confirmation message reads: 'Patient Found - OH9273392-01 Beth Doe 09/29/1964***-**-5731 F'. The section is titled 'Provider Dashboard' and includes a 'Links & Reports' area with buttons for 'Access Provider Forms' (twice) and 'Medication Authorization Portal'. A 'Site Map' link is located at the bottom right.

Required Search Criteria

To locate a patient, enter one of the following:

- **Member ID**, or
- **Social Security Number (SSN)**

And all required identifying information:

- First Name
- Last Name
- Date of Birth
- Gender

Claim Number is optional.

To successfully locate a patient, all required identifying information must be entered.

Performing a Search

1. Enter the required search criteria.
2. Select **Find**.

If needed:

- Select **Clear** to remove entered criteria.
- Select **Reset** to restore fields to default.

Search Results

If a matching patient is found, confirmation will display below the search fields.

The result will include:

- Member ID
- Member Name
- Date of Birth
- Masked SSN
- Gender

Once a patient is located, the portal dynamically updates to display patient-level options.

Dynamic Links & Eligibility-Based Options

After a patient is located, the portal updates to display patient-specific options.

Displayed options are based on:

- Patient eligibility status
- Benefit plan configuration
- Assigned provider permissions

If a patient is not currently eligible, certain options may not display.

Availability of tools is determined by eligibility and user permissions.

Next Steps After Finding a Patient

After locating a patient, providers may:

- Verify eligibility
- Review claim status
- View payment details
- Submit a secure inquiry

All subsequent activity within the portal is patient-specific.

Claims & Expenses

The Claims & Expenses section displays submitted claims for the selected patient.

A patient must be located before claims can be accessed.

Claims & Expenses Page

My Links

Message Center

My Account

OhioHealth

Home

Claims & Expenses

Check Eligibility

Balances

Benefits Lookup Tool

Account: Provider

DEMO USER

Member ID

SSN

First Name

Last Name

Date of Birth

Gender

Claim Number

Find

Clear

Reset

Patient Found - OH9273332-01 Beth Doe 09/29/1964 ****-**-5731 F

Claims and Expenses

View and manage your claims

Did you know you can sort claims by clicking the column headings or filter claims with our filter tool? Our claims are automatically sorted to show you the most recently processed claims on top and you have access to a rolling 3 years of claims data. Need to find your Explanation of Benefits (EOB)? No problem! Simply click "view details" next to the claim in question to see more information and then click "view Explanation of Benefits".

Status:

Provider TIN:

Claim #:

Your Recent Claims

M Bob Jones Md Md

Processed

Member
Beth Doe

Date of Service
03/22/2026

Relationship
Plan Participant

Claim Received Date
03/24/2026

Total Billed
\$187.00

View Details

View Explanation of Benefits

Ask a question about this claim

R Bob Jones Md Md

Processed

Member
Beth Doe

Date of Service
02/28/2026

Relationship
Plan Participant

Claim Received Date
03/02/2026

Total Billed
\$449.00

View Details

View Explanation of Benefits

Ask a question about this claim

D Bob Jones Md Pa

Processed

Member
Beth Doe

Date of Service
12/28/2025

Relationship
Plan Participant

Claim Received Date
01/01/2026

Total Billed
\$255.00

View Details

View Explanation of Benefits

Ask a question about this claim

Claims from:

Claims Per Page:

6 Claims

Provider TIN	Provider	Claim #	Manual Claim ID	Member	Service Date	Processed Date	Status	Total Billed	Plan Pays	
X319683190	M Bob Jones Md Md	122901-879-18		Beth Doe	03/22/2026	03/31/2026	Processed	\$187.00	\$133.19	View Details
X319683190	R Bob Jones Md Md	122901-879-13		Beth Doe	02/28/2026	03/09/2026	Processed	\$449.00	\$89.75	View Details
X319683190	D Bob Jones Md Pa	122901-878-92		Beth Doe	12/28/2025	01/07/2026	Processed	\$255.00	\$144.97	View Details
X319683190	M Bob Jones Md Md	122901-878-58		Beth Doe	09/18/2025	10/07/2025	Processed	\$448.00	\$239.33	View Details
X319683190	J Bob Jones Md Md	122901-878-18		Beth Doe	02/24/2025	10/01/2025	Processed	\$185.00	\$98.01	View Details

Page 1 of 2, Results 1 - 5 of 6

First

Previous

1

2

Next

Last

Site Map

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Accessing Claims

- Locate a patient using the patient search tool.
- Select **Claims & Expenses** from the main navigation.
- Review the list of recent claims displayed.

Claims Summary Page

The Claims Summary displays:

- Claim Number
- Date of Service
- Claim Received Date
- Provider
- Claim Status
- Total Billed
- Plan Pays

Claims are sorted by most recent processed claims by default.

Viewing Claim Details

Select **View Details** to open the claim record.

The Claim Details page displays:

- Claim status and processing timeline
- Service descriptions
- Total billed amount
- Plan payment
- Patient responsibility

Additional actions may include:

- Viewing the Explanation of Benefits
- Submitting a claim-related inquiry

Access to claim actions is based on assigned permissions.

Claim Details Page

My Links

Message Center

My Account

OhioHealthy

Home

Claims & Expenses

Check Eligibility

Balances

Benefits Lookup Tool

Account: Provider

DEMO USER

Member ID

SSN

First Name

Last Name

Date of Birth

Gender

Claim Number

Find

Clear

Reset

Patient Found - OH9273392-01 Beth Doe 09/29/1964 ***-**-5731 F

Claims and Expenses > M Bob Jones Md Md

M Bob Jones Md Md

Processed

Claim Number
122901-879-18

Date of Service
03/22/2026

Processed Date
03/31/2026

Provider
M Bob Jones Md Md

Claim Received Date
03/24/2026

Explanation of Benefits

Ask a question about this claim

Claim Info

Payment Breakdown

Links

Patient
Beth Doe

Member Type
Plan Participant

Source
Electronic Claim

Contact Your Claims Team
Email

Claim Progress

✓

Claim Submitted

Your claim has been received and is in our system.

✓

Eligibility Check

We've verified your coverage and benefits.

✓

Review

Our team is reviewing your claim.

✓

Claim Processed

Your claim has been processed.

Currently: Claim Processed

Our team has reviewed your claim, and corresponding documentation, and processed your claim based on your benefit plan.

Review Progress

100%

Description of Services

For further payment breakdown see [Payment Breakdown](#)

Service	Service Date	Reason Code	Reason Description	You Were Billed	Plan Pays	You May Owe
Medical Care	03/22/2026	MCY	Patient Not Responsible	\$187.00	\$133.19	\$0.00

Total Billed

\$187.00

You May Owe

\$0.00

Site Map

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Payment Breakdown Tab

The Payment Breakdown tab displays:

- Total billed by provider
- Paid by the plan
- HRA/HSA payments (if applicable)
- Total patient responsibility
- Payments made
- Payment dates
- Provider payment reference numbers

This section provides a detailed financial breakdown of how the claim was processed.

Payment Breakdown Page

My LinksMessage CenterMy Account

OhioHealth

HomeClaims & ExpensesCheck EligibilityBalancesBenefits Lookup ToolAccount: Provider

Member IDSSNFirst NameLast NameDate of BirthGender

Claim Number

FindClearReset

Patient Found - OH9273392-01 Beth Doe 09/29/1964 ***-**-5731 F

Claims and Expenses > M Bob Jones Md Md

M Bob Jones Md Md

Claim Number122901-879-18

Date of Service03/22/2026

Processed Date03/31/2026

✓ Processed

ProviderM Bob Jones Md Md

Claim Received Date03/24/2026

Explanation of Benefits

Ask a question about this claim

Claim InfoPayment BreakdownLinks

Total Billed by Provider

\$187.00

This is the total amount billed to your health benefit plan for the services provided.

Paid by Your Plan

\$133.19

This is the portion of the bill your plan covers, based on your benefits and after discounts have been applied.

HRA/HSA Payment

\$0.00

Total You May Owe

\$0.00

This is the total amount you may owe the provider or medical facility for this claim, unless you have co-payments automatically deducted from an HSA, FSA or HCA.

This total may not reflect any co-payments or other payments you may have made directly. Please check with your provider to determine the amount you may owe.

Payments Made

As of 08/27/2026

View all your payments next to your providers payments

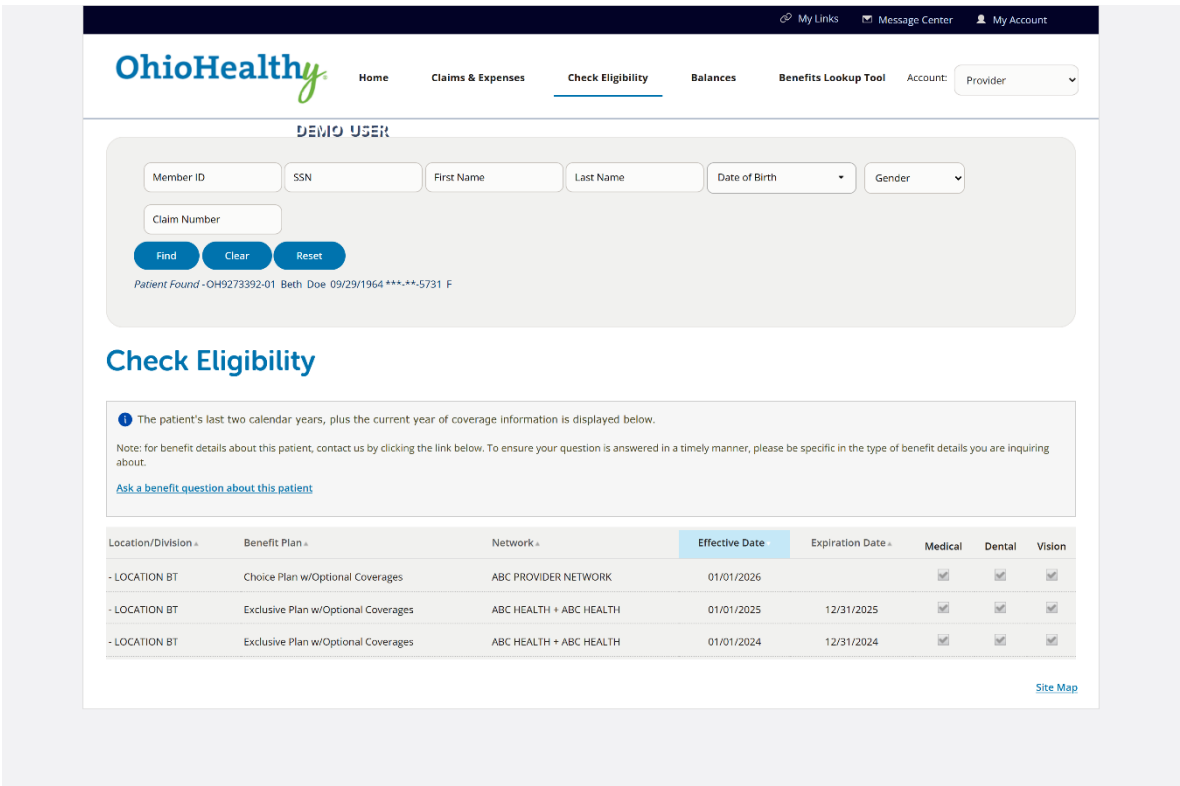
Paid Date	Provider Payment #	Plan Participant Payment #	Provider Payment Amount	Plan Participant Payment Amount
03/31/2026	246184		\$133.19	\$0.00

Site Map

Check Eligibility

The Check Eligibility section displays current and historical coverage information for the selected patient.

A patient must be located before eligibility information can be viewed.



Accessing Eligibility Information

1. Search for and locate a patient.
2. Select **Check Eligibility** from the main navigation.
3. The patient’s coverage history will display.

Coverage Overview

The eligibility page displays:

- Location/Division
- Benefit Plan
- Network
- Effective Date
- Expiration Date (if applicable)
- Coverage indicators (Medical, Dental, Vision)

The portal displays the current year and the prior two calendar years of coverage history.

Providers can confirm:

- Active coverage status
- Plan type
- Network participation
- Covered benefit categories

Benefit Questions

To submit a benefit inquiry:

Select **Ask a benefit question about this patient**.

Include:

- Specific benefit being requested
- Dates of service (if applicable)
- Relevant procedure or diagnosis information

The inquiry is routed securely to the appropriate support team.

Important Notes

- Eligibility reflects data available within the portal
- Expiration dates indicate terminated or historical coverage
- Coverage indicators reflect enrollment status
- Detailed benefit questions may require secure messaging

Balances

The Balances section displays deductible and out-of-pocket accumulations for the selected benefit year.

A patient must be located before balances can be viewed.

My Links

Message Center

My Account

OhioHealthy

Home

Claims & Expenses

Check Eligibility

Balances

Benefits Lookup Tool

Account: Provider

DEMO USER

Member ID

SSN

First Name

Last Name

Date of Birth

Gender

Claim Number

Find

Clear

Reset

Patient Found -OH9273392-01 Beth Doe 09/29/1964 ***-**-5731 F

View and manage your claim expenses

Current Year (01/01/2026 - 12/31/2026)

Previous Year (01/01/2025 - 12/31/2025)

Medical

My Deductibles

Myself

My Family

Domestic Deductible

As of August 27, 2026

\$176.01 used of \$1,200.00

\$1,023.99 Remaining to meet deductible

Network Deductible

As of August 27, 2026

\$176.01 used of \$2,000.00

\$1,823.99 Remaining to meet deductible

Non-Network Deductible

As of August 27, 2026

\$0.00 used of \$5,000.00

\$5,000.00 Remaining to meet deductible

Out of Pocket Expenses

Myself

My Family

Domestic Out Of Pocket

As of August 27, 2026

\$211.01 used of \$3,000.00

\$2,788.99 Remaining to meet out of pocket expenses

Network Out Of Pocket

As of August 27, 2026

\$211.01 used of \$5,000.00

\$4,788.99 Remaining to meet out of pocket expenses

Site Map

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Accessing Patient Balances

- Locate a patient.
- Select **Balances** from the main navigation.
- Select the applicable benefit year.

Deductibles

The Deductibles section displays:

- Domestic Deductible
- Network Deductible
- Non-Network Deductible

Each deductible includes:

- Amount used
- Total deductible
- Remaining amount
- "As of" date

Providers may toggle between individual and family accumulations when applicable.

Out-of-Pocket Expenses

The Out-of-Pocket section displays:

- Domestic Out-of-Pocket
- Network Out-of-Pocket

Each includes:

- Amount used
- Total out-of-pocket maximum
- Remaining amount
- "As of" date

Balances reflect processed claims only.