### REVISION HISTORY

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Prepared By</th>
<th>Summary of Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>V1.0</td>
<td>August 2018</td>
<td>Joelle Gourdeau</td>
<td>DRAFT</td>
</tr>
<tr>
<td>V1.0</td>
<td>November 2018</td>
<td>Joelle Gourdeau</td>
<td>FINAL</td>
</tr>
<tr>
<td>V1.0</td>
<td>January 2019</td>
<td>Renée Lillie</td>
<td>Revised</td>
</tr>
<tr>
<td>V1.1</td>
<td>June 2019</td>
<td>Joelle Gourdeau</td>
<td>Updated Provider Directory Search with new functionality</td>
</tr>
<tr>
<td>V1.1</td>
<td>July 2019</td>
<td>Renée Lillie</td>
<td>Changed “HealthMAPS” to “myCHPW”</td>
</tr>
<tr>
<td>V 2.0</td>
<td>August 2021</td>
<td>Dianna Dietrich / Amy Lathan /</td>
<td>Updated for current system; added Rate a Doctor and Treatment Cost Calculator for Cascade Select plans</td>
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1 Accessing the Portal
You’ll need to start by creating an account. This includes creating your user login ID, password, and setting up your security questions and answers. Setting up a member portal account lets you come back to the member portal at any time to review your coverage information.

How to Create a CHPW or CHNW Member Portal Account
Community Health Network of Washington (CHNW) Cascade Select plans are powered by Community Health Plan of Washington (CHPW). The CHPW and CHNW member portals are accessed from different web addresses and may look a little different (see the Welcome screens on the next page). However, both member portals have most of the same features and are used the same way. Anything that is different for the myCHNW Cascade Select member portal is indicated in this User Guide.

You will need to fill out and submit the online Member Registration form to CHPW. Follow these step-by-step instructions to create your member portal account.

Before You Begin
You must have active coverage through CHPW or CHNW to be able to create a myCHPW member portal account. To create a portal account, you will need the following:

- Your Member ID number. You can find this on your CHPW or CHNW Member ID card.
- Your first and last name as it appears on your enrollment application.
- Your date of birth.
- Your residential address.
Screens

**CHPW Member Welcome Page for Medicaid and Medicare Advantage members/plans**

![CHPW Member Welcome Page](image)

**CHNW Member Welcome Page for Cascade Select members/plans**

![CHNW Member Welcome Page](image)
Member Registration page

Required fields are indicated with an asterisk (*).

**Member Information**

- Who is this account for?
  - I am creating this account for myself
  - I am creating this account for my spouse/dependent

**Member ID Number**

**Date of Birth**

**Demographic Information**

- * First Name
- * Last Name
- * Address (No., Street)
- Suite/Apt Number
- * City
- * State
  - Select
- * Zipcode
- * Home Phone
  - Mobile Phone

**Sign Up Information**

- * Email Address
  - This is my login ID
  - Cannot be a shared or group email address.

- * Password
  - Password must contain:
    - Minimum of 6 characters & maximum of 30 characters
    - At least 1 letter in uppercase (A-Z)
    - At least 1 letter in lowercase (a-z)
    - At least 1 number (0-9)
    - At least 1 special character (., $, #, &, __, %)

- * Re-enter Password

- * User ID should be alphanumeric and allowed special character are only underscores(_) or a period (.)
- * User ID
  - Minimum of 6 characters and maximum of 8 characters

- * Question 1
  - Please Select a Question
  - * Answer 1

- * Question 2
  - Please Select a Question
  - * Answer 2

- * Question 3
  - Please Select a Question
  - * Answer 3

- I agree to abide by the terms and conditions set forth in the Community Health Plan of Washington Rights and Responsibility manual located at https://chpw.org/for-members/your-privacy-and-rights/

- [Clear]
- [Register]
- [Cancel]
**Step-by-Step Instructions**

**Steps**

### Start from the myCHPW Member Portal Page

1. **Open your web browser**
   
   If you are a CHPW Medicaid or Medicare Advantage member, enter the myCHPW web address in your web browser address field: [https://mychpw.chpw.org/en/member](https://mychpw.chpw.org/en/member). Press Enter. You will see the Community Health Plan of Washington myCHPW login page. See the CHPW Member Welcome Page screen on page 6 of this guide.

   If you are a CHNW Cascade Select member, enter the myCHNW web address in your web browser address field: [https://mychnw.cascadeselect.org/en/member](https://mychnw.cascadeselect.org/en/member). Press Enter. You will see the Community Health Network of Washington myCHNW login page. See the CHPW Member Welcome Page screen on page 6 of this guide.

2. **Start from the myCHPW Member Portal page. Click the Sign up link**
   
   This will take you to the Member Registration form.

### Member Registration Page

3. **You must select whom the account is being created for**

   Important! If you make an account for a dependent/spouse:

   CHPW will apply the HIPAA Privacy rule, the Health Insurance Portability and Accountability Act of 1996, which restricts access to specific medical information.

4. **Enter your Member ID Number and Date of Birth**

   The Member ID number you enter must match the number from your Member ID Card.

   The birth date you enter must match the birth date from your enrollment application.

5. **Enter the rest of your information**

   Make sure you fill out the required fields.

   The First Name and Last Name you enter on the Registration form must match the name on your Member ID card.
6. Create your User ID

The User ID you create must be at least eight characters. You can use your email address as your User ID if you want. Your User ID can contain any combination of numbers and letters. The only special characters allowed are: the @ symbol, a period, and an underscore.

If the User ID already exists, a message will display.
If the email address already exists, a message will display.

7. Password and Security Questions

Follow the instructions to create your password.

You will be able to change your password, security questions, and security answers at any time.

8. Agree to the Privacy Policy

There’s a link to CHPW’s Privacy Policy at the bottom of the page.

To complete the registration process, you must view and agree to the Privacy Policy. Select the link to view the Privacy Policy and check the box next to: “I understand and agree with the CHPW Privacy Policy.”

9. Click the Register button.

If your registration was successful, a “Success” message will display with a link to the myCHPW member portal.

If your registration did not pass the validation process, the portal will display a message.

IMPORTANT! Before clicking the Register button, be sure to make a note of your User ID, Password, and Security Questions and Answers. You will need your User ID and Password to access the member portal. You will need your Security Questions and Answers if you want or need to change your password.

What’s Next

10. If your registration was successful:

The portal will display a message that has a link to the myCHPW member portal.

You can now sign in to the myCHPW member portal and view your health coverage information.

A confirmation email will be sent to the email account you entered on the registration form.
11. If your registration was not successful:

An email will be sent to the email account you entered on the registration form.
# How to Log in to the Member Portal

Follow these step-by-step instructions to log in to the myCHPW member portal.

## Before You Begin

You will need your User ID and Password.

## Screens

**Member Sign In**

Sign in here to access coverage information as well as useful member tools and resources.

- **Username**
- **Password**

[Forgot Password?](#)

**Sign In**

Access to your health plan when you need it. myCHPW member portal gives you a secure way to look at your plan benefits and other health information online.

Don't have an account? [Sign up](#)
Step-by-Step Instructions

Steps

1. Enter your User ID and Password.

   IMPORTANT! The member portal keeps track of failed login attempts and will lock your account after three failed attempts. If your account is locked, follow the instructions on the onscreen message to unlock your account.

2. Click the Sign In button.

   If your login is successful, you will be taken to the Member Dashboard.
How to Log Out

We recommend that you log out of the member portal instead of just closing your browser. Follow these step-by-step instructions to securely end your member portal session.

Screens

*Member Dashboard Page*

![Member Dashboard Page](image)

**Step-by-Step Instructions**

**Steps**

1. **Click the *Welcome Member Name* option.**
   
   This option is on the top right of the page.

2. **Click the *Logout* option.**
   
   You will be returned to the *Member Login* page.
2 Your Member Dashboard

How to Customize Your Dashboard

Before You Begin
You must have an active member portal account.
The dashboard provides a high-level overview of your benefit coverage information.

Screens

![Dashboard Screen](image-url)
**Member Dashboard Functions**

<table>
<thead>
<tr>
<th><strong>Member Dashboard</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Quick Links</strong></td>
</tr>
<tr>
<td><strong>2. Dashboard Display</strong></td>
</tr>
<tr>
<td><strong>3. Widgets</strong></td>
</tr>
<tr>
<td><strong>4. Secure Messages Icon</strong></td>
</tr>
<tr>
<td><strong>5. Gear List</strong></td>
</tr>
<tr>
<td><strong>6. Welcome drop-down</strong></td>
</tr>
<tr>
<td><strong>7. No information available</strong></td>
</tr>
</tbody>
</table>
3 Your Authorizations / Referrals

How to View Your Authorizations / Referrals
Follow these step-by-step instructions to view the status of your authorizations and referrals.

Before You Begin
Log in to the member portal and start from the Member Dashboard.

Screens
Member Dashboard–Quick Links

- Dashboard
- Authorizations & Referrals
- My Benefits
- My Claims
- Find a Doctor
- Member Self Services
- Profile Management
- Member Resources
**Authorizations & Referrals Search Page**

A screenshot of the Authorizations & Referrals search page showing a list of authorizations and referrals.

**Table:**

<table>
<thead>
<tr>
<th>Referral Number</th>
<th>Referring Provider</th>
<th>Referred to Provider</th>
<th>Auth / Referral Type</th>
<th>Auth / Referral Status</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>123</td>
<td>Yakima Valley Memorial Hospital</td>
<td>Yakima Valley Farm Workers</td>
<td>Outpatient</td>
<td>Open</td>
<td>09/10/2018</td>
<td>12/10/2018</td>
</tr>
<tr>
<td>345</td>
<td>Teresa Vasicek</td>
<td></td>
<td>Outpatient Referral</td>
<td>Open</td>
<td>08/24/2018</td>
<td>11/22/2018</td>
</tr>
<tr>
<td>678</td>
<td>James Kneller</td>
<td></td>
<td>Outpatient Referral</td>
<td>Open</td>
<td>07/24/2018</td>
<td>10/24/2018</td>
</tr>
<tr>
<td>901</td>
<td>Lakeview Spine</td>
<td></td>
<td>Outpatient Referral</td>
<td>Open</td>
<td>07/20/2018</td>
<td>10/20/2018</td>
</tr>
<tr>
<td>234</td>
<td>Tony Lee</td>
<td></td>
<td>Outpatient Referral</td>
<td>Open</td>
<td>07/20/2018</td>
<td>10/18/2018</td>
</tr>
<tr>
<td>567</td>
<td>John Ovens</td>
<td></td>
<td>Outpatient Referral</td>
<td>Open</td>
<td>07/19/2018</td>
<td>10/17/2018</td>
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<tr>
<td>890</td>
<td>Joanna Law</td>
<td></td>
<td>Outpatient Referral</td>
<td>Open</td>
<td>07/17/2018</td>
<td>10/17/2018</td>
</tr>
<tr>
<td>101</td>
<td>Virginia Mason Hospital</td>
<td>Peter Harrington</td>
<td>Outpatient Physical Therapy</td>
<td>Open</td>
<td>07/02/2018</td>
<td>10/02/2018</td>
</tr>
<tr>
<td>321</td>
<td>Cascade Summit Physical Therapy</td>
<td></td>
<td>Outpatient Referral</td>
<td>Open</td>
<td>06/26/2018</td>
<td>09/26/2018</td>
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<tr>
<td>765</td>
<td>Cascade Summit Physical Therapy</td>
<td></td>
<td>Outpatient Referral</td>
<td>Open</td>
<td>06/01/2018</td>
<td>09/01/2018</td>
</tr>
</tbody>
</table>

Showing 1 - 10 of 95 Authorizations | 10 Per Page
Member Authorizations / Referrals Advanced Search Page
Member Authorization Details Page – Inpatient Authorization

Authorization Detail

<table>
<thead>
<tr>
<th>AUTHORIZATION</th>
<th>AUTH TYPE</th>
<th>INPATIENT/PATIENT CATEGORY</th>
<th>SERVICE SET RECEIPT</th>
<th>Overall Claim Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>160001724</td>
<td>INPATIENT AUTH</td>
<td></td>
<td>3/1/2007 12:30:27 PM</td>
<td>Closed</td>
</tr>
</tbody>
</table>

Member Information

- Member Name: William Smith
- Date of Birth: 07/03/1959
- Gender: Male
- Health Plan: Kaiser Permanente Group Health Plan

Provider Information

- Referring Provider: JOSH LOGAN
  7000 HILL ROAD
  JACKSONVILLE
  Florida
  92121
  9195245656

- Referred To Provider: JOHN MCCARTHY
  3000 HILL ST
  Jacksonville
  California
  94211

- Place Of Service:

Authorization Details

<table>
<thead>
<tr>
<th>Diagnosis Code</th>
<th>Description</th>
<th>Diagnosis Narrative</th>
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<tbody>
<tr>
<td>886</td>
<td>PNEUMONIA, ORGANISM UNSPECIFIED FED</td>
<td>PNEUMONIA, ORGANISM UNSPECIFIED FED</td>
</tr>
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</table>

Procedure/Services

<table>
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<tr>
<th>Procedure/Services</th>
<th>Description</th>
<th>From Date</th>
<th>To Date</th>
<th>Quantity</th>
<th>Notes</th>
<th>Procedure Narrative</th>
<th>Status</th>
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</table>

Send inquiry to CSR
### Authorization Detail

<table>
<thead>
<tr>
<th>Authorization</th>
<th>Authorization Type</th>
<th>Impression/Patient Category</th>
<th>Service &amp; Receipt Date</th>
<th>Overall Processing Notes</th>
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<tbody>
<tr>
<td>97561</td>
<td>Outpatient Referral</td>
<td></td>
<td>6/5/2018 16:54:12 PM</td>
<td>Open</td>
</tr>
</tbody>
</table>

### Member Information

- **Member Name:** [Redacted]
- **Date of Birth:** [Redacted]
- **Gender:** Male
- **Health Plan:** [Redacted]

### Provider Information

- **Referring Provider:** Cascade Summit Physical Therapy
  1606 S 24th Ave Ste 102
  Yakima, Washington
  5092257510
  5092348113

- **Place Of Service:** [Redacted]

### Diagnosis Details

- **Diagnosis Code:** R42
- **Description:** DIZZINESS AND GODDNESS
- **Diagnosis Narrative:** DIZZINESS AND GODDNESS

### Procedure/Services

<table>
<thead>
<tr>
<th>Procedure/Service</th>
<th>Description</th>
<th>From Date</th>
<th>To Date</th>
<th>Quantity</th>
<th>Notes</th>
<th>Procedure Narrative</th>
<th>Status</th>
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</thead>
<tbody>
<tr>
<td>97561</td>
<td>PHYSICAL THERAPY EVALUATION LOW COMPLEXITY, REQUIRING THESE COMPONENTS: A HISTORY WITH NO PERSONAL FACTORS AND/OR COMORBIDITIES</td>
<td>06/01/2018</td>
<td>06/12/2018</td>
<td>6.0</td>
<td></td>
<td>PHYSICAL THERAPY EVALUATION:</td>
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<td>97562</td>
<td>PHYSICAL THERAPY EVALUATION MODERATE COMPLEXITY, REQUIRING THESE COMPONENTS: A HISTORY OF PRESENT PROBLEM WITH 1-2 PERSONAL FACTORS</td>
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<td>06/12/2018</td>
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<td>PHYSICAL THERAPY EVALUATION:</td>
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<tr>
<td>97563</td>
<td>PHYSICAL THERAPY EVALUATION HIGH COMPLEXITY, REQUIRING THESE COMPONENTS: A HISTORY OF PRESENT PROBLEM WITH 3 OR MORE PERSONAL FACTORS</td>
<td>06/01/2018</td>
<td>06/12/2018</td>
<td>6.0</td>
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<td>PHYSICAL THERAPY EVALUATION:</td>
<td>Open</td>
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<tr>
<td>97564</td>
<td>RE-EVALUATION OF PHYSICAL THERAPY ESTABLISHED PLAN OF CARE, REQUIRING THESE COMPONENTS: AN EXAMINATION INCLUDING A REVIEW OF HISTORICAL</td>
<td>06/01/2018</td>
<td>06/12/2018</td>
<td>6.0</td>
<td></td>
<td>RE-EVALUATION OF PHYSICAL THERAPY</td>
<td>Open</td>
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<tr>
<td>97565</td>
<td>THERAPEUTIC PROCEDURE, 1 OR MORE AREAS, EACH 15 MINUTES: THERAPEUTIC EXERCISES TO DEVELOP STRENGTH AND ENDURANCE, RANGE OF MOTION</td>
<td>06/01/2018</td>
<td>06/12/2018</td>
<td>6.0</td>
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<td>THERAPEUTIC EXERCISES</td>
<td>Open</td>
</tr>
<tr>
<td>97566</td>
<td>THERAPEUTIC PROCEDURE, 1 OR MORE AREAS, EACH 15 MINUTES: GAIT TRAINING (INCLUDES STAIR CLIMBING)</td>
<td>06/01/2018</td>
<td>06/12/2018</td>
<td>6.0</td>
<td></td>
<td>GAIT TRAINING THERAPY</td>
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<tr>
<td>97567</td>
<td>THERAPEUTIC ACTIVITIES, DIRECT (CONDONSING) PATIENT CONTACT BY THE PROVIDER USE OF DYNAMIC ACTIVITIES TO IMPROVE FUNCTIONAL PERFORMANCE</td>
<td>06/01/2018</td>
<td>06/12/2018</td>
<td>6.0</td>
<td></td>
<td>THERAPEUTIC ACTIVITIES</td>
<td>Open</td>
</tr>
</tbody>
</table>

Disclaimer: This authorization inquiry does not guarantee payment. Payment is subject to the patient's coverage and eligibility at the time of service.
**Send Inquiry to CSR**

**Step-by-Step Instructions**

**Steps**

1. **Click the Authorizations & Referrals quick link.**
   - This will take you to the Authorizations & Referrals Search.

2. **Enter what you are searching for.**

3. **Click the Search button.**
   - The search results are displayed on the bottom of the Authorizations & Referrals page.

**More Information**

**TIP!** Click the Advanced Search button to open the Advanced Search box. This will give you more ways to narrow down your search.
4. **Optional: Download your results.**
   You can download the information as a PDF. Click the icon on the top right of the page to download.

5. The *High Alert* button will show you the HIPAA Privacy Policy Rule.

   **IMPORTANT!** The *High Alert* button will only display if you’re looking at an account you made for someone else.

6. **Learn more about the different fields.**
   If there is a question mark near a field or column, hover over it with your cursor to read more about it.

7. **Click the Authorization or Referral Number link to view the Authorization or Referral details.**
   The Authorization Detail page is displayed.
   The Referral Detail page is displayed.

   **Authorization or Referral Detail Page**

8. You can see authorization details or referral details.

9. **What’s next….**

   Download the list as a PDF file – Click the icon at the top right of the Authorizations & Referrals Search page to download a copy of the patient eligibility information in PDF format.

   **Send Inquiry to a Customer Service Representative**

10. **Send Inquiry to CSR.**
    From the Member Self Services menu, select Secure Messages to send a message directly to a Customer Service Representative through the myCHPW secure system.

11. **Upload a file. (Optional)**
    Attach a file to your inquiry before you send it by clicking the Choose File option. Locate the file you want to attach and click Open then click Upload. You can attach the following types of files:
    - .doc
    - .docx
    - .pdf
    - .txt
    - .xlsx
4 Your Benefits

How to View Your Medical Benefits

Follow these step-by-step instructions to view your health plan benefits and to view a copy of your health plan’s Benefits and Coverage.

Before You Begin

Log in to the Member Portal and start from the Member Dashboard.

Screens

Member Dashboard – Quick Links

![Quick Links](image-url)
Medical Coverage Page

Coverage

CHPW Member ID: [Redacted]
Patient Name: [Redacted]
Gender: Female
Date of Birth: 12/19/1944
Address: [Redacted]

Plan: Medicare Advantage Pharmacy Plan (HMO)
Coverage Group: CMS
IPA: Healthpoint

Assigned Clinic

Clinic Name: [Redacted]
Address: [Redacted]
Clinic Phone Number: [Redacted]

Member Plan Information

Group: CMS
Plan: HealthSpan HD-P
Provider Name: John McDade-Y
Plan Effective Date: 1/1/2013
Plan End Date: [Redacted]
Medicare Advantage Plans: [Redacted]
Dental Benefits: [Redacted]

Member Eligibility History

<table>
<thead>
<tr>
<th>Group</th>
<th>Plan</th>
<th>Plan Effective Date</th>
<th>Plan End Date</th>
<th>Panel ID</th>
<th>Panel Name</th>
<th>IPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMS SPONSORED</td>
<td>Medicare Advantage Pharmacy Plan (HMO)</td>
<td>1/1/2018</td>
<td></td>
<td>031</td>
<td>Healthpoint Auburn</td>
<td>Healthpoint</td>
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<tr>
<td>CMS SPONSORED</td>
<td>Medicare Advantage Pharmacy Plan (HMO)</td>
<td>12/1/2017</td>
<td>12/31/2017</td>
<td>031</td>
<td>Healthpoint Auburn</td>
<td>Healthpoint</td>
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<td>CMS SPONSORED</td>
<td>MA Special Needs Plan (HMO SNP)</td>
<td>1/1/2017</td>
<td>10/31/2017</td>
<td>031</td>
<td>Healthpoint Auburn</td>
<td>Healthpoint</td>
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<td>Medicare Advantage Pharmacy Plan (HMO)</td>
<td>7/1/2016</td>
<td>12/31/2016</td>
<td>031</td>
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<tr>
<td>CMS SPONSORED</td>
<td>Medicare Advantage Pharmacy Plan (HMO)</td>
<td>7/1/2015</td>
<td>12/31/2015</td>
<td>031</td>
<td>Healthpoint Auburn</td>
<td>Healthpoint</td>
</tr>
<tr>
<td>CMS SPONSORED</td>
<td>Medicare Advantage Pharmacy Plan (HMO)</td>
<td>1/1/2015</td>
<td>05/31/2015</td>
<td>031</td>
<td>Healthpoint Auburn</td>
<td>Healthpoint</td>
</tr>
<tr>
<td>CMS SPONSORED</td>
<td>Medicare Advantage Pharmacy Plan (HMO)</td>
<td>1/1/2014</td>
<td>12/31/2014</td>
<td>031</td>
<td>Healthpoint Auburn</td>
<td>Healthpoint</td>
</tr>
<tr>
<td>CMS SPONSORED</td>
<td>Medicare Advantage Pharmacy Plan (HMO)</td>
<td>1/1/2013</td>
<td>12/31/2013</td>
<td>031</td>
<td>Healthpoint Auburn</td>
<td>Healthpoint</td>
</tr>
<tr>
<td>CMS SPONSORED</td>
<td>Medicare Advantage Pharmacy Plan (HMO)</td>
<td>1/1/2010</td>
<td>12/31/2012</td>
<td>031</td>
<td>Healthpoint Auburn</td>
<td>Healthpoint</td>
</tr>
</tbody>
</table>
### Member Other Health Insurance

<table>
<thead>
<tr>
<th>Policy Holder Name</th>
<th>Policy Holder Date of Birth</th>
<th>Other Health Insurance Policy Number</th>
<th>Other Health Insurance Phone Number</th>
<th>Other Health Insurance Name</th>
<th>Cov Eff Date</th>
<th>Carrier Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>AAA AUTO CLUB SOUTH</td>
<td>1/1/2016</td>
<td></td>
</tr>
</tbody>
</table>

### Deductible/ Out-Of-Pocket

<table>
<thead>
<tr>
<th></th>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Out-of-Pocket</td>
<td>$6725.00</td>
<td>$40.00</td>
</tr>
</tbody>
</table>

### Benefits and Limits

#### Office Visits

<table>
<thead>
<tr>
<th>Services</th>
<th>If In-Network Provider</th>
<th>Out-Of-Network Provider</th>
<th>Limitations and Exceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary care visit to treat an injury or illness</td>
<td>20% co-insurance</td>
<td>40% co-insurance</td>
<td>none</td>
</tr>
<tr>
<td>Specialist visit</td>
<td>20% co-insurance</td>
<td>40% co-insurance</td>
<td>none</td>
</tr>
<tr>
<td>Preventive care/screening/immunization</td>
<td>No charge</td>
<td>40% co-insurance</td>
<td>none</td>
</tr>
</tbody>
</table>

#### Chiropractic

<table>
<thead>
<tr>
<th>Limited Amount</th>
<th>Services Processed</th>
<th>Services Remaining</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 (Days)</td>
<td>0</td>
<td>12</td>
</tr>
</tbody>
</table>

Narrative: CHIROPRACTIC VISITS COVERED PER CALENDAR YEAR WITHOUT PRIOR AUTHORIZATION. PA REQUIRED FOR ANYTHING GREATER THAN 12 VISITS.
### Step-by-Step Instructions

<table>
<thead>
<tr>
<th>Steps</th>
<th>More Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Start on your Member Dashboard</strong></td>
<td></td>
</tr>
<tr>
<td>1. Click the <em>My Benefits &gt;&gt; Medical</em> quick link.</td>
<td>The Medical Coverage page is displayed.</td>
</tr>
<tr>
<td><strong>Medical Coverage Page</strong></td>
<td></td>
</tr>
<tr>
<td>2. View Medical Coverage page</td>
<td></td>
</tr>
<tr>
<td>3. What’s next...</td>
<td></td>
</tr>
<tr>
<td>Click the View button to open a copy of your benefits.</td>
<td></td>
</tr>
<tr>
<td>Learn more about the different fields. Hover your cursor over the question mark (?) to bring up more information.</td>
<td></td>
</tr>
<tr>
<td>See information from your other insurance plans by selecting the horizontal scroll bar.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If you do not have other health insurance, this section will display “No Information Available.”</td>
</tr>
</tbody>
</table>
5 Your Claims

You can view your claims and EOBs (explanation of benefits) in the myCHPW member portal. To view claims, you must be a current member of CHPW or CHNW and you must have an active portal account.

How to View Your Claims and EOBs

Follow these step-by-step instructions to see your medical claims and their associated EOBs.

Before You Begin

Log in to the myCHPW member portal and start from the Member Dashboard. You can view a summary of your claims on your dashboard, and you can use the Advanced Search to search for claims by a date of service range.

Screens

Member Dashboard – Quick Links Menu
Claims Summary – Search/Search Results

My Claims Summary
Processed & In Process Claims.

Search By: Last 30 Days
Advanced Search

Claim Number | Provider | Date of Service | Amount Billed | Your Plan Paid | Plan Discount | Deductible | Your Responsibility | Claim Type | Status
---|---|---|---|---|---|---|---|---|---
BMCHTST01 | John PROVIDER14 | 07/27/2018 | $5,000.00 | $0.00 | $2,875.00 | $0.00 | $0.00 | Institutional | In Process
BMCHTST04 | John PROVIDER14 | 07/27/2018 | $5,000.00 | $0.00 | $2,750.00 | $0.00 | $625.00 | Institutional | In Process
BMNOTEST01 | John PROVIDER14 | 07/27/2018 | $5,000.00 | $0.00 | $2,750.00 | $0.00 | $625.00 | Institutional | In Process
BMCHTST05 | John PROVIDER14 | 07/27/2018 | $5,000.00 | $0.00 | $2,750.00 | $0.00 | $495.00 | Institutional | In Process

Showing 1 - 4 of 4 Claims TO Per Page

Claims Summary – Advanced Search Criteria

Advanced Search

Claim Status
Select

Start Date

End Date

Clear
Search
Claim Detail page

CHPW Member ID | Patient Name | Gender | Date of Birth | Address
----------------|--------------|--------|---------------|------------------

Plan: Health-Gen HDHP
Coverage Group: R KAINER GROUP
IPA: Alachua Standard

Amount Billed: $5,000.00

Your Responsibility: $0.00

- Plan Discount: $2,075.00
- Plan Paid: $2,125.00
- Patient Responsibility: $0.00

Provider Information

Provider NPI: 1234567890
Provider Type: HOS
Provider Name: John PROVIDER14

VISITED

<table>
<thead>
<tr>
<th>Provider Name</th>
<th>NPI</th>
<th>Claim #</th>
<th>Authorization #</th>
<th>Date of Service</th>
<th>Overall Claim Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>John PROVIDER14</td>
<td>1234567890</td>
<td>RKMCHTST01</td>
<td>10001547</td>
<td>07/27/2018</td>
<td>Payable</td>
</tr>
</tbody>
</table>

Claim Details

<table>
<thead>
<tr>
<th>Form Date of Service &amp; To Date of Service</th>
<th>Route/Code</th>
<th>Procedure Code</th>
<th>Status Date</th>
<th>Status</th>
<th>Claim Line Status</th>
<th>Claim Line Processing Status</th>
<th>Denial Reason/Description</th>
<th>Billed Amount</th>
<th>Allowed Amount/Code</th>
<th>Provider paid</th>
<th>Co-Pay Amount</th>
<th>Co-Ins Amount/Code</th>
<th>Deduct Amount/Code</th>
<th>Not Covered Amount/Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>01/19/2007</td>
<td>120</td>
<td></td>
<td></td>
<td>Payable</td>
<td>In Process</td>
<td></td>
<td></td>
<td>$4,000.00</td>
<td>$1,700.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01/19/2007</td>
<td>250</td>
<td></td>
<td></td>
<td>Payable</td>
<td>In Process</td>
<td></td>
<td></td>
<td>$1,000.00</td>
<td>$425.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Showing 1 - 2 of 2 Claim Details | 5 Per Page |
Step-by-Step Instructions

Start on your Member Dashboard

1. Click the My Claims quick link.
   The My Claims Summary page is displayed.

My Claims Summary Page

2. Enter the desired search criteria.
   TIP! Click the Advanced Search button to open the Advanced Search box where more search criteria options are available.

3. Click the Search button.
   The search results are displayed on the bottom of the My Claims Summary page.

4. Optional:
   Download the list as a PDF file – Click the icon at the top right of the Claims Summary page to download a copy of the information in PDF format.

5. Click a Claim Number link to view the claim’s details.
   The Claim Detail page is displayed.

Claim Detail Page

6. View the Claim Detail information.

7. What’s next...
   Download the claim detail as a PDF file – Click the icon at the top right of the Claim Detail page to download a copy of the file in PDF format.
   Select the horizontal scroll bar to view information about your claim.
   Hover your cursor over the Procedure Code.
   Click the View EOB button at the bottom of the page to display the Explanation of Benefits associated with the claim.
   Click the Inquiry to Customer Service button at the bottom of the page to send a secure message about the claim to the Customer Service team.
   Click the View Benefits and Balances button at the bottom of the page to open the Medical Coverage page.
6 Find/Rate A Doctor

How to Find a Doctor
Follow these step-by-step instructions to search for a doctor/medical professional, hospital, facility, behavioral health or DME (durable medical equipment) supplier using Find A Doctor.

Before You Begin
Log in to the member portal and start from the Member Dashboard.

Screens

Medicaid and Medicare Advantage Member Dashboard – Quick Links
Cascade Select Member Dashboard – Quick Links

Quick Links

- Dashboard
- Authorizations & Referrals
- My Benefits
- My Claims
- Find/Rate a Doctor
- Member Self Services
- Profile Management
- Member Resources
- Treatment Cost Calculator
Quick Search

When the **Find A Doctor** search page displays it will return results based on these default values: Doctors/Medical Professionals, your provider network, and within a 5-mile radius of your home address. You will see a pin on the map for each location found. To view a specific location, select the **View on Map** link in the search results. Search results will display below the map.
Map View

A map displays next to the quick search fields at the top of the search results. It shows you directions and the route. The map view defaults to an expanded view.
Advanced Filter Options

Here you can refine your search. Enter information into any of the fields, choose a specific drop-down selection and/or select any of the checkboxes. Some of the fields show default values. The default values can be changed.
Search by Address

The Search by Address allows you to search using an address other than your default home address.

![Search by Address Form](image-url)
Step-by-Step Instructions

Start on your Member Dashboard

1. Click the Find A Doctor quick link.
   The Find A Doctor page displays. The returned results will be based on the default values of Doctors/Medical Professionals within a 5-mile range from your home address.

Search for a Doctor

2. Quick Search
   Quick search allows you to use the default settings or change the settings by entering a city, zip code or county, and selecting a provider type. You can also search for a Primary Care Provider by selecting the PCP checkbox.

TIP! Click the Advanced Filter Options down arrow to open the Advanced Search section where you can see more search criteria.

3. Provider Search Instructions
   Select the Provider Search Instructions link, located at the top right of the search results page, to learn how to use the search function.

4. Children Behavioral Health Providers
   Select the Children Behavioral Health Providers link to search for Children Behavioral Health Providers.

5. Advanced Filter Options
   Select the down arrow icon , to see more Advanced Filter Options. The fields that display here are based on the Provider Type selected. Select the up arrow to collapse the section.

6. Search Within | Search by Address
   Search Within works together with the Search by Address ONLY when a complete address is entered.
7. **Search Results**

The search results are displayed below the map. The first result will default to expanded view. Each time a new section is selected the previous section will collapse.

**Tip!** Click Additional Details in the detail section to see more.

**Note:** CHPW Community Health Centers will appear first in the search results.

8. **Showing 1 - 10 of 32944 locations**

The total number of search results will display. The default view will show 10 results per page. You can increase the number by selecting the down arrow.

9. **Last Date Updated**

The last date the Provider Directory was updated will show at the top left of the search results detail page.

10. **Visit Clinic Website**

If available, the website link will display. Select it to go to the clinic’s website.
11. View on Map

Select View on Map to view the location on the map.

The map view will default to expanded view 🔽. Select the arrow to collapse the view.

12. Print Map Directions

Select this to print directions from the specified location to the desired location.

13. Export as

Download the search results as a PDF file – Click the icon at the top right of the Search Results section to download a copy of the provider directory in PDF format.

**Tip!** To print a directory to include ALL coverage areas, the search must be based on your default address or a complete address entered in the Search by Address window and by selecting **ALL** in the Search Within dropdown located in the Advanced Filter Options section.

14. Click to Report an Error Link

This link has instructions on how to report an error.
How to Rate a Doctor
As of August 2021, Rate a Doctor is available for Cascade Select members/plans only.

Follow these step-by-step instructions to rate a doctor.

*Member Dashboard – Quick Links*

- Dashboard
- Authorizations & Referrals
- My Benefits
- My Claims
- **Find/Rate a Doctor**
- Member Self Services
- Profile Management
- Member Resources
- Treatment Cost Calculator
Step-by-Step Instructions

Steps

Start on your Member Dashboard

1. Click the Find/Rate A Doctor quick link.
   
The Find/Rate A Doctor page displays.
   Enter search criteria to find the Doctor you would like to add a rating for.

Rate a Doctor

2. Rate a doctor.
   
   Click the Rate Provider button displayed under the provider’s name and to the far right.

   The Rate Your Experience window will display. You can select a star rating, out of 5 stars, and enter a comment in the Comment box.

   When finished, select the Submit Comment button.
3. **View ratings and comments of other members**

Expand the provider listing and the system will display the stars in gold, 1 out of 5, under the provider’s name.

You can view other member comments by clicking on the **View Member Comments** hyperlink below the star rating.

When no rating exists, the system will display “No Rating” and disable the “View Member Comments” link.
7 Member Self-Service

Request ID Card

How to View, Download, or Print Your ID Card
Follow these step-by-step instructions to order a copy of your Health Plan ID card.

Before You Begin

Note: You will see only your own ID card.

Screens

Member Dashboard—Quick Links
**Step-by-Step Instructions**

<table>
<thead>
<tr>
<th>Steps</th>
<th>More Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Start on your Member Dashboard</strong></td>
<td></td>
</tr>
<tr>
<td>1. <strong>Click the Member Self Services &gt;&gt; Request Member ID Card quick links option.</strong>&lt;br&gt;The CHPW Member Center webpage is displayed. Note that this is different than the myCHPW Member Portal.</td>
<td></td>
</tr>
<tr>
<td><strong>Member Center Login Page</strong></td>
<td></td>
</tr>
<tr>
<td>2. <strong>Login to the Member Center.</strong>&lt;br&gt;<strong>Note:</strong> You will need to use your CHPW Member Center User ID and Password for Member Center Login.&lt;br&gt;After you log in, follow the onscreen instructions to print your ID card.</td>
<td></td>
</tr>
</tbody>
</table>
Secure Messages
You can send and receive Secure Messages through your myCHPW member portal account. Secure messages are like email, but they can be accessed only within the myCHPW member portal. This keeps your health information secure. You can use the secure messaging feature to contact the CHPW Customer Service team.

How to View Your Secure Messages

Before You Begin
Log in to the myCHPW member portal and start from your Dashboard.

Screens

Member Dashboard – Quick Links

- Dashboard
- Authorizations & Referrals
- My Benefits
- My Claims
- Find a Doctor

Member Self Services
- Request Member ID Card
- Secure Messages
- Update PCP
- Other Health Insurance
- Profile Management
- Member Resources
Secure Message Page

Contact Customer Service directly using Secure Message to protect your healthcare and personal information.

Search By:

<table>
<thead>
<tr>
<th>Ref ID</th>
<th>Subject</th>
<th>Status</th>
<th>Activity In</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ref ID</td>
<td>All</td>
<td>All</td>
<td>Last 30 Days</td>
</tr>
</tbody>
</table>

This message has been viewed by Health-Gen.

<table>
<thead>
<tr>
<th>Ref ID</th>
<th>Submission Date</th>
<th>Last Activity Date</th>
<th>Subject</th>
<th>Submitted ID/Name</th>
<th>Submitter</th>
</tr>
</thead>
<tbody>
<tr>
<td>12443</td>
<td>11/13/2018</td>
<td>11/13/2018</td>
<td>CLAIMS/ CLAIMS REQUEST ADJUSTMENT</td>
<td><a href="mailto:emp1@vol.com">emp1@vol.com</a>/William Smith</td>
<td>10002790</td>
</tr>
<tr>
<td>12436</td>
<td>11/10/2018</td>
<td>11/10/2018</td>
<td>AUTHORIZATIONS/REFERRALS</td>
<td><a href="mailto:emp1@vol.com">emp1@vol.com</a>/William Smith</td>
<td>10002790</td>
</tr>
<tr>
<td>12437</td>
<td>11/10/2018</td>
<td>11/10/2018</td>
<td>CLAIMS/ CLAIMS REQUEST ADJUSTMENT</td>
<td><a href="mailto:emp1@vol.com">emp1@vol.com</a>/William Smith</td>
<td>10002790</td>
</tr>
<tr>
<td>12417</td>
<td>11/07/2018</td>
<td>11/07/2018</td>
<td>RELEASE OF INFORMATION HIPAA DESIGNATION</td>
<td><a href="mailto:emp1@vol.com">emp1@vol.com</a>/William Smith</td>
<td>10002790</td>
</tr>
<tr>
<td>12410</td>
<td>11/07/2018</td>
<td>11/07/2018</td>
<td>CLAIMS/ CLAIMS REQUEST ADJUSTMENT</td>
<td><a href="mailto:emp1@vol.com">emp1@vol.com</a>/William Smith</td>
<td>10002790</td>
</tr>
<tr>
<td>12414</td>
<td>11/06/2018</td>
<td>11/06/2018</td>
<td>CLAIMS/ CLAIMS REQUEST ADJUSTMENT</td>
<td><a href="mailto:emp1@vol.com">emp1@vol.com</a>/William Smith</td>
<td>10002790</td>
</tr>
<tr>
<td>12412</td>
<td>11/05/2018</td>
<td>11/05/2018</td>
<td>CLAIMS/ CLAIMS REQUEST ADJUSTMENT</td>
<td><a href="mailto:emp1@vol.com">emp1@vol.com</a>/William Smith</td>
<td>10002790</td>
</tr>
<tr>
<td>12412</td>
<td>11/02/2018</td>
<td>11/02/2018</td>
<td>OTHER HEALTH INSURANCE -COB</td>
<td><a href="mailto:emp1@vol.com">emp1@vol.com</a>/William Smith</td>
<td>10002790</td>
</tr>
<tr>
<td>12411</td>
<td>11/02/2018</td>
<td>11/02/2018</td>
<td>CLAIMS/ CLAIMS REQUEST ADJUSTMENT</td>
<td><a href="mailto:emp1@vol.com">emp1@vol.com</a>/William Smith</td>
<td>10002790</td>
</tr>
<tr>
<td>12410</td>
<td>11/02/2018</td>
<td>11/02/2018</td>
<td>APPEAL</td>
<td><a href="mailto:emp1@vol.com">emp1@vol.com</a>/William Smith</td>
<td>10002790</td>
</tr>
</tbody>
</table>

Showing: 1 - 10 of 12 Records | 10 Per Page

1 2 > >>
Message Detail Page

Secure Messages

Use the space below to submit your question to a Customer Representative.

Details
Reference ID: 15607
Status: New
Message Type: CSR Message
Subject: ID Cards

Original Message

Original Message content

Reply:

Enter up to 4000 characters

Select a file to upload:

Choose File: No file chosen

Upload

Only one file attachment is allowed

Send  Cancel

History

No history available.
# Step-by-Step Instructions

## Start on your Member Dashboard

1. Click the **Member Self Services >> Secure Messages** quick link.
   
The **Secure Messages** page is displayed.

## Secure Messages Page

2. **View your list of secure messages.**
   
   Your messages are displayed in a table format.
   
   You can control the number of messages displayed per page using the controls just below the table.

3. **Sort and filter your list of messages.**
   
   Filter your list of secure messages by entering what you want to see in the search fields at the top of the page, then clicking the blue search button.
   
   Sort the table by clicking on the column headers that include an arrow.

4. **Click the Ref ID link to open a message.**
   
The **Message** page is displayed.

## Messages Page

5. **What’s next...**
   
   **Respond** to the message by typing text in the **Reply:** box then clicking the **Send** button.
   
   **Attach a file to your response** (optional) before you send it by clicking the **Choose File** option. Locate the file you want to attach and click **Open** then click **Upload**. You can attach the following types of files:
   
   - .doc
   - .docx
   - .pdf
   - .txt
   - .xlsx
How to Create and Send a New Secure Message

Before You Begin
Log in to the myCHPW member portal and start from your Dashboard.

Screens
Secure Messages Page

Compose Message Page
**Step-by-Step Instructions**

**Steps**

<table>
<thead>
<tr>
<th>Start on your Member Dashboard</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Click the Member Self Services &gt;&gt; Secure Messages quick link.</strong></td>
</tr>
<tr>
<td>The Secure Messages page is displayed.</td>
</tr>
</tbody>
</table>

**Secure Messages Page**

| 2. **Click the Compose new message button.** |
| The Compose Message page is displayed. |

**Compose Messages Page**

| 3. **Select a message subject.** |

| 4. **Type your message text in the Message box.** |

| 5. **Attach a file to your response. (Optional)** |
| Attach a file to your response before you send it by clicking the Choose File option. Locate the file you want to attach and click Open then click Upload. You can attach the following types of files: |
| - .doc |
| - .docx |
| - .pdf |
| - .txt |
| - .xlsx |

| 6. **Click the Send button.** |
| The Your Message Sent Successfully popup is displayed. The popup displays the Reference ID number of your secure message. Make a note of this number to help you easily find it in the future. |

**Your Message Sent Successfully Popup**

| 7. **Click the OK button.** |
| You’ll be returned to the Secure Messages page. Your new message is shown in your list of messages. |
Update Your PCP
Follow these step-by-step instructions to Update Your PCP.

How to Update Your PCP

Before You Begin
Log in to the myCHPW member portal and start from the Member Dashboard.

Screens

**Member Dashboard – Quick Links**

- Dashboard
- Authorizations & Referrals
- My Benefits
- My Claims
- Find a Doctor
- Member Self Services
- Request Member ID Card
- Secure Messages
- Update PCP
- Other Health Insurance
- Profile Management
- Member Resources
### Step-by-Step Instructions

<table>
<thead>
<tr>
<th>Steps</th>
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<tbody>
<tr>
<td><strong>Start on your Member Dashboard</strong></td>
<td></td>
</tr>
<tr>
<td>1. Click the Member Self Services &gt;&gt; Update PCP quick links option.</td>
<td>The CHPW Member Center webpage is displayed. Note that this is different than the myCHPW Member Portal.</td>
</tr>
<tr>
<td><strong>Member Center Login Page</strong></td>
<td></td>
</tr>
<tr>
<td>2. Login to the Member Center.</td>
<td>Note: You will need to use your CHPW Member Center User ID and Password for Member Center Login. After you log in, follow the onscreen instructions to update your PCP.</td>
</tr>
</tbody>
</table>
Other Health Insurance
Follow these step-by-step instructions to report other health insurance.

How to Report Other Health Insurance

Before You Begin
Log in to the myCHPW member portal and start from the Member Dashboard.

Screens

Member Dashboard – Quick Links

- Dashboard
- Authorizations & Referrals
- My Benefits
- My Claims
- Find a Doctor

Member Self Services
- Request Member ID Card
- Secure Messages
- Update PCP
- Other Health Insurance
- Profile Management
- Member Resources
Other Health Insurance Add Coverage or Other Coverage has been reported Page
Other Health Insurance Form

If any of the information populated below is incorrect, please send a secure email using the envelope icon above or call our Customer Service department at one of the numbers below for assistance prior to completing this form.

Apple Health Customer Services 800-446-1031
Medicare Advantage Customer Services 800-423-0187

CHPW Member ID: 
Member Date of Birth: 02/24/2010
Member First Name: 
Member Middle Name: 
Member Last Name: 

Medical / Dental / Vision: Medicare

Coverage Type:
If the Carrier is the same for multiple coverage types Medical, Dental or Vision, select the checkbox next to the coverage types covered by that Carrier.

- Medical
- Dental
- Vision

Carrier Information
- Other Health Insurance Name (Carrier):
Order of Coverage: Primary
Carrier Type: Select

Policy Holder / Insured Information
- Policy Holder Name:
- Policy Holder Date of Birth:
- Name of Insured:
- Other Health Insurance Policy Number:
- Other Health Insurance Phone Number:
- Effective Date:
- Termination Date:
- Other Family Coverage: Select
- Termination Reason:

Proprietary and Confidential | August 2021
CHPW Member Portal
Add Coverage Other Health Insurance Form Medicare

Other Health Insurance Form

If any of the information populated below is incorrect please send a secure email using the envelop icon above or call our Customer Service department at one of the numbers below for assistance prior to completing this form.
Apple Health Customer Service 800-440-1561
Integrated Managed Care Customer Service 866-418-1009
Medicare Advantage Customer Service 800-442-0247

CHPW Member ID

Member Date of Birth

Member First Name

Member Middle Name

Member Last Name

Medical / Dental / Vision Medicare

Do you have Medicare coverage?

☐ Yes ☐ No

Reason for coverage

☐ Over 65 ☐ Disabled ☐ ESRN ☐ Retired

Medicare ID# ☐

Hospital Part A: Effective Date ☐

Hospital Part B: Effective Date ☐

Are you receiving Disability Payments?

☐ Yes ☐ No

If yes, enter as of date

Are you receiving Social Security Disability Benefits?

☐ Yes ☐ No

If yes, enter as of date

Select a file to Upload

Choose File _No file chosen

Clear Save Submit
Step-by-Step Instructions

Start on your Member Dashboard

1. Click the Member Self Services >> Other Health Insurance quick links option.

   The Other Health Insurance page is displayed.

Other Health Insurance Form

2. Other Health Insurance page.

   Select the coverage type you are reporting: Medical, Dental, Vision or Medicare.
8 Profile Management
You can manage your profile using the myCHPW member dashboard.

How to Change Your Address

Before You Begin
Log in to the myCHPW member portal and start from your Dashboard.

Screens
Member Dashboard Page – Quick Links
**Member Change Address page**

### Change Address

Enter details below to update your residential and mailing address.

<table>
<thead>
<tr>
<th>Member Name</th>
<th>Member Id</th>
<th>Current Residential Address</th>
<th>Current Mailing Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mary Smith</td>
<td>39C67FB4-4F0545A48521DC4403A7FE501</td>
<td>123, Main Street Anytown, #122, No.: 12-45/33, opp to meadows, Illinois IL 60416</td>
<td>123, Main Street Anytown, #122, No.: 12-45/33, opp to meadows, Illinois IL 60416</td>
</tr>
</tbody>
</table>

#### New Residential Address

- **Address 1:**
  - Address
- **Address 2:**
  - Address
- **City:**
  - City
- **State**
  - Select
- **Zip**
  - Zip

#### New Mailing Address

- **Address 1:**
  - Address
- **Address 2:**
  - Address
- **City:**
  - City
- **State**
  - Select
- **Zip**
  - Zip

**Submit**  **Clear Form**
**Step-by-Step Instructions**

**Steps**

1. **Click the Profiles Management >> Change Address quick link.**
   
   The Member Change Address page is displayed.
   
   **Note:** As of August 2021, this option is not available for the myCHNW Member Portal. Cascade Select members should call Customer Service to change their address.

2. **Enter the new address.**

3. **Submit new address**

   If the address submitted cannot be verified a message will display with the Customer Service phone number.

   **TIP!** If the Residential and Mailing address are the same, click **Same as residential address checkbox in the new mailing address section.**
How to Change Your Password

Before You Begin
Log in to the myCHPW member portal and start from your Dashboard.

Screens

Member Dashboard Page – Quick Links

![Quick Links Menu](image-url)
Change Your Password page.

Step-by-Step Instructions

Start on your Member Dashboard

1. Click the Profiles Management >> Change Password quick link.

   The Change password page is displayed.

Change Password Fields

2. Enter your current password and new password.

   Enter your current password, new password and confirm new password in the fields provided.

3. Change Password button

   Click Change Password. A change password confirmation message will display.

4. Login Page

   Once your password has been changed you will be redirected to the myCHPW member portal login page.

5. A confirmation email will be sent to your email address.
How to Change Your Security Questions

Before You Begin
Log in to the myCHPW member portal and start from your dashboard.

Screens

Member Dashboard Page – Quick Links
Validate Password page

Change Security Questions page

Change Security Questions page
## Step-by-Step Instructions

<table>
<thead>
<tr>
<th>Steps</th>
<th>More Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Start on your Member Dashboard</strong></td>
<td></td>
</tr>
<tr>
<td><strong>1.</strong> Click the <em>Profiles Management &gt;&gt; Change Security Questions</em> quick link.</td>
<td>The <em>Change Security Questions</em> page is displayed.</td>
</tr>
<tr>
<td><strong>Change Security Questions Page – Validate</strong></td>
<td></td>
</tr>
<tr>
<td><strong>2.</strong> Type your password and <em>Validate</em>.</td>
<td>Enter your current password and click the <em>Validate</em> button. You will be taken to your current list of Security Questions.</td>
</tr>
<tr>
<td><strong>Change Security Questions Page – List of Questions</strong></td>
<td></td>
</tr>
<tr>
<td><strong>3.</strong> If desired, change one or more of your security questions.</td>
<td></td>
</tr>
<tr>
<td><strong>4.</strong> Provide answers for each security question.</td>
<td>You must provide an answer for each security question, even those questions that you didn’t change. Your security question answers are not validated on this page, but whatever you enter on this page will be used going forward when you are required to answer your security questions. Click <em>Change Security Questions</em>. A confirmation message will display.</td>
</tr>
<tr>
<td><strong>5.</strong> Click the <em>Save</em> button.</td>
<td>The portal will display a success message.</td>
</tr>
<tr>
<td><strong>6.</strong> Click the <em>Close</em> button.</td>
<td></td>
</tr>
</tbody>
</table>
9 Member Resources

How to view More Information about Your Plan and Coverage

How to view Member Resources

Before You Begin
Log in to the myCHPW member portal and start from your dashboard.

Screens

*Member Dashboard Page – Quick Links*
### Medicaid Apple Health and Medicare Advantage Plans

**Step-by-Step Instructions**

<table>
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</thead>
<tbody>
<tr>
<td><strong>Start on your Member Dashboard</strong></td>
<td></td>
</tr>
</tbody>
</table>

1. **Click the Member Resources >> Medicaid or Member Resources >> Medicare quick link.**

   The CHPW.org Medicaid webpage or CHPW Medicare Advantage webpage is displayed, depending on your selection. Note that this is different than the myCHPW Member Portal.
**Cascade Select Plans**
As of August 2021, Cascade Select members should go directly to the Cascade Select Member Benefits webpage at [https://www.cascadeselect.org/member-center/plan-benefits/](https://www.cascadeselect.org/member-center/plan-benefits/). (Note that this is different than the myCHNW Member Portal.)
10 Treatment Cost Calculator

The **Treatment Cost Calculator** lets you get cost estimates for services or appointments.

As of August 2021, the Treatment Cost Calculator is available for **Cascade Select members/plans only**.

**How to Use the Treatment Cost Calculator**

**Before You Begin**
Log in to the member portal and start from your **Member Dashboard**.

**Screens**

- Dashboard
- Authorizations & Referrals
- My Benefits
- My Claims
- Find/Rate a Doctor
- Member Self Services
- Profile Management
- Member Resources
- Treatment Cost Calculator
### Treatment Cost Calculator

Search for medical procedure costs by code or description

<table>
<thead>
<tr>
<th>Treatment Type</th>
<th>Procedure Description / Code</th>
<th>Search Within</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical</td>
<td>992142 - Office Consultation for a New or Established Patient, Which Requires These 3 K</td>
<td>25 Miles</td>
</tr>
</tbody>
</table>

Search by Address

PO BOX 942, LEAVENWORTH, WA, 98826 [Edit Address](#)

[Search] [Clear]

---

*The list below reflects estimated costs from providers in your designated search area. Visit [My Benefits](#) for detailed benefit information.*
Estimated Cost of Treatment Results

Estimated Cost of Treatment: $132.78 *
Your Remaining Out-of-Pocket Balances

<table>
<thead>
<tr>
<th>Treatment Type</th>
<th>00142 - ANESTHESIA FOR PROCEDURES ON EYE, LENS SURGERY</th>
<th>Search Within 25 Miles</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Network Provider</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Remaining Deductible</td>
<td>$581.63</td>
<td></td>
</tr>
<tr>
<td>Remaining Max. Out-of-Pocket</td>
<td>$2021.63</td>
<td></td>
</tr>
<tr>
<td>Estimated Cost after Adjustment</td>
<td>$132.78</td>
<td></td>
</tr>
</tbody>
</table>

* CHPW, on behalf of CHNW, developed this tool to help you understand your potential costs for certain services. Neither CHPW nor CHNW guarantee the prices shown are what you will be charged. The costs shown are estimates only. CHPW and CHNW assume no liability for any differences between the prices shown on this site and your actual charges. The inclusion of a particular provider or service is not a guarantee that CHNW will cover the services. If you have questions about your benefit plan or coverage, please call 1-866-907-1906. While we try to provide the...
<table>
<thead>
<tr>
<th>1. Estimated Cost of Treatment</th>
<th>This is a national average based on geographic information.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Average Cost and Estimated Cost After Adjustment</td>
<td>These estimates are specific to the provider(s) you selected.</td>
</tr>
<tr>
<td>3. Deductible, Out-of-Pocket, and Estimated Cost After Adjustment</td>
<td>These estimates are specific to you and your Cascade Select benefit plan. You will not pay more than the remaining out-of-pocket balance if the estimated cost is more than your out-of-pocket balance.</td>
</tr>
</tbody>
</table>
### Step-by-Step Instructions

<table>
<thead>
<tr>
<th>Steps</th>
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</thead>
<tbody>
<tr>
<td><strong>Start on your Member Dashboard</strong></td>
<td></td>
</tr>
<tr>
<td>1. <strong>Click Treatment Cost Calculator.</strong></td>
<td></td>
</tr>
</tbody>
</table>
| 2. **Search by medical procedure code or description.**  
   Enter your search criteria. | |
| 3. **Click Search.**  
The search results will display. | |