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### Coordinated Network







Health Plan Coverage



Member



## Hospitals

## Have questions? We are here to help.



Visit deancare.com/providers to discover provider resources at your fingertips and take advantage of 24/7 self-service options.



#### **By Phone**

Contact our Customer Care Center for questions about benefits and more. Dean Commercial, ACA Individual, and BadgerCare Plus plans 800-279-1301

WellFirst Health SSM Health **Employee Health Plan Administrative Services Only** (administered by Dean Health Plan) 877-274-4693

Monday - Thursday 7:30 a.m. to 5 p.m. Friday, 8 a.m. to 4:30 p.m.

**Dean Medicare Advantage** and DeanCare Gold (Cost) 877-232-7566

Monday - Friday 8 a.m. to 8 p.m. Weekends October 1 - March 31 8 a.m. - 8 p.m.

**Dean Administrative Services Only** (ASO)\* 877-234-4516

Monday - Thursday 7:30 a.m. to 5 p.m. Friday, 8 a.m. to 4:30 p.m.

\* Phone numbers for specific enrollment groups can vary. For efficiency, please refer to the phone number listed on the member ID card.

## How to Use This Guide

This book is a provider's guide to Dean Health Plan resources. While it was designed to follow the onboarding process of the new in-network provider, keep this book handy for future reference. Each section of this document highlights a specific area of business or functionality. Refer to the Dean Health Plan Resource Quick Reference to learn more about cited resources and how to easily access them.



## **Getting Started: New Provider Checklist**

**Get Familiar With** 

deancare.com

**Create Your Portal Account at** deancare.com/account-login-page#providers

Tip: An Organization account must be registered first. People within the organization may then create Individual accounts under the Organization account. Before registering, see page 9 for a Portal Registration Quick Reference.

✓ Sign up for the Confirmation Reports Portal (separate from the Provider Portal) to get electronic reports of your accepted and rejected claims. Contact your Provider Network Consultant to sign up.

Tip: Eliminate paper reports! Once signed up, Confirmation Reports will be the only acknowledgement of claim acceptance.

- ✓ Sign up to exchange HIPAA transactions with deancare.com/providers/hipaa-transactions
- Payer ID 39113.
- ✓ Sign up to receive electronic funds transfers (EFT) with Change Healthcare ePayment Services by calling 866-506-2830 or via changehealthcare.com/support/ customer-resources/enrollment-services

## A Better Kind of Insurance experience for Providers and Members.

A member of SSM Health, Dean Health Plan has more than 35 years of insurance industry expertise serving providers and members in South Central Wisconsin. We are an integrated company, combining clinics, hospitals, and health insurance to drive lower costs, improve quality, and deliver a better provider and member experience.

### A Note About Dean ASO

Dean Administrative Services Only (ASO) is employerfunded health care that an employer group offers to its employees. Dean Health Plan is the administrator for Dean ASO plans, not the insurer. Therefore, product requirements, provider network, payer ID, provider portals, Customer Care Center numbers and processes such as where to submit claims vary from other Dean Health Plan commercial and Medicare products.

Refer to our Dean ASO resources, listed in the Quick Reference on page 13, for specific Dean ASO information.

Want to know more about a resource on this page and how to access? Refer to the Resource Quick Reference on page 14. 3

## Timely Filing Limits

Providers are responsible for submitting (and resubmitting, if necessary) claims within the timely filing limit outlined in their contractual agreement with Dean Health Plan.

If the health plan does *not* receive claims within this time frame, rights to payment are forfeited and payment for the covered services cannot be collected from the member. Refer to your organization's agreement with Dean Health Plan for your timely filing guidelines.





#### **Verify Member Eligibility**

- Get real-time details about a member's eligibility plus current cost share, deductible, and coinsurance amounts
- 270/271 Eligibility and Benefit Inquiry and Response Transaction; or
- Dean Health Plan Provider Portal secure Eligibility application; or
- · Call the Customer Care Center



#### **Submit Authorization Requests** and View Authorization Status

- Dean Health Plan Provider Portal Authorization Submission and Authorization View applications; or
- Navitus/Navi-Gate Portal for authorization of pharmacy benefit drugs; or
- NIA Magellan's RadMD Portal for authorization of physical and occupational therapy, high-end radiology and musculoskeletal services



#### **Submit Claims**

- Electronic claims are preferred
- 837 Health Care Claim transactions; or
- Our free EDI claim submission alternative. Sign up at sdata.us; or
- If unable to submit electronically, paper claims are accepted from providers without online access:



Dean Health Plan PO Box 56099 Madison, WI 53705

Send Medicare Advantage claims to: Dean Health Plan - MAPD Claims

PO Box 853937. Richardson, TX 75085-3937

Send WellFirst Health SSM Health Employee Health Plan claims to:

WellFirst Health PO Box 56099 Madison, WI 53705

**Send Dean Administrative Services** Only (ASO) claims to:

Dean Health Plan ASO PO Box 99906 Grapevine, TX 76099-9706



#### **Check Acknowledgment** of Submitted Claims

- · 277 Claims Acknowledgement (277CA) transaction; or
- · Confirmation Reports Portal



#### **Check Claim Status**

- 276/277 Health Care Claim Status Request and Response transaction; or
- · Dean Health Plan Provider Portal Claim Status application; or
- · Call the Customer Care Center



#### **View Weekly Claim Payments**

- · Dean Health Plan Provider Portal Claim Payments application; or
- 835 Health Care Claim Payment/ Advice: or
- Weekly Explanation of Payments (EOP)

**Correct A Claim\*** 

Submitted a claim with an error

claim detail(s) that need

to be corrected.

(e.g., changes or corrections needed to

codes, dates of service, etc.)? Within

submit for reconsideration of payment:

Create a new claim with the corrected

Include all lines billed on the original

('7' for replacement claims) and the

Payer Claim Control Number (original

claim on the corrected claim.

Include the Claim Frequency Code

your filing limit window, correct and

Please note, some vendors may charge providers for this information; our Portal function is available to in-network providers at no cost.



### **Submit A Claim Appeal\*\***

original claim.

the original claim.

4 When replacing/deleting original

billed code in the 2300 loop.

6 Submit the corrected claim using

procedure code, send the original

5 Add a note in the NTE segment about

what has been changed from the

the same submission method of

Do you believe your claim is correct and was denied in error? Within the contracted time frame, request a health plan review of your finalized claim through the Dean Health Plan Provider Portal Claim Appeals application:

- 1 Start a New Claim Appeal action to prompt the Select Claim Appeal Type.
- 2 Validate the claim by entering the Claim Number and Member Number, and complete prompted fields.
- In the Comments Field, include a brief but detailed explanation why the claim is being appealed.
- Attach applicable documents to support your appeal.
- 5 Submit.



\* Full instructions are in your Provider Manual.

claim ID).

\*\* Full instructions are in the Dean Health Plan Provider Portal User Guide in the secure Portal.

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# Check if You Need Authorization *Before* Providing Services

Know Dean Health Plan's authorization requirements to avoid claim denials and payment delays.



#### What is a prior authorization?

Prior authorization is written approval from Dean Health Plan prior to a member receiving services. Certain services require an approved authorization based on medical policy or when the servicing provider is out-of-network.

#### What is concurrent authorization?

Concurrent authorization is required for all urgent/ emergent inpatient admissions to a hospital facility. Notification of the admission must be made to Dean Health Plan on the next business day following the admission or within the time frame outlined in the provider agreement/contract.

## How do I know if a servicing provider is in-network?

In-network providers are listed in the online **Dean Health Plan Provider Directory** accessible from the **Find A Doctor** link at the top right of Dean Health
Plan's website at <u>deancare.com</u>. Any provider not
listed is out-of-network. An authorization request
from an in-network provider needs to be submitted for
approval of an out-of-network servicing provider.

### What services require prior authorization?

Refer to the **Dean Health Plan Master Service List** (MSL) and the Medical Injectables List for services that require approved authorization. If the service is not listed, also refer to the Non-covered services list to verify the service is not on that list.

#### What is automated authorization?

Only available through the **Dean Health Plan Provider Portal**, automated authorization provides an instant approval response when all medical policy criteria are met on authorization requests for certain services. Refer to our **Automated Authorization** web page for a current list of services eligible for automated authorization approval.

# How will I submit authorization requests to Dean Health Plan?

Submit authorizations through the **Dean Health Plan Provider Portal** for most services.

### Are there exceptions to the kinds of authorization requests that can be submitted to Dean Health Plan?

Yes. We contract with other entities for authorization of services, such as **Navitus/Navi-Gate** for authorization of pharmacy benefit drug authorizations and **NIA Magellan Healthcare** for authorization of physical and occupational therapy, certain high-end radiology services and musculoskeletal services.

How can I tell if an authorization request should be submitted to Dean Health Plan or to one of its contracted entities?

Refer to the **Dean Health Plan MSL** and the **Medical Injectables List** to verify where an authorization request should be submitted.

#### **Separate Resources for Medicare Advantage**

Dean Health Plan's Prior authorization services list, including medical drug injectables, and Medical policies for Medicare Advantage are separate resources from those for all other Dean Health Plan products. Refer to the Dean Health Plan Advantage Medical Management web page for Medicare Advantage information.

# **Provider Portal** 24/7 Access

Available to in-network providers free of charge, our secure Dean Health Plan Provider Portal is a direct line between your organization and the health plan to exchange electronic transactions and share current health care information.

Establish your Portal account and connect with us at your convenience, no matter what time of day (or night!).

**Question about your Portal Account?** 

Check first with the Site Administrator for your account in your organization.

## Create Your Portal Account

Using Google Chrome, access the Provider Portal Log In page via one of two ways:

- From the **Providers** page on **deancare.com/providers**
- Or at deancare.com/account-login-page#providers

On the **Provider Portal Log In** page, **Sign Up** at the bottom of the page. On the Initial Registration screen, choose the applicable account type:

• Select "Organization" if an Organization account is not yet registered. (The first user to register will need to register both the Organization account and their Individual account. They will also become a Site Administrator.)

- Select Individual if registering as a new user under an existing Organization account.
- Refer to the Dean Health Plan Provider Portal Registration User Guide for a more detailed step-by-step registration process.

## **Portal Self-Service Applications**

#### Eligibility

Access real-time EDI 270/271 transactions with member eligibility, benefit plan coverage, co-payments and deductibles. It also lists the member's primary health insurance, if applicable.

#### Authorization

Submit electronic prior authorization requests for most services. (Refer to our partner portals, Navitus/ Navi-Gate for pharmacy benefit drug authorizations or NIA Magellan Healthcare RadMD portal for physical and occupational therapy, certain high-end radiology services and musculoskeletal services.)

#### Authorization View

See your authorizations that have been started and saved, and authorizations that have been completed and submitted.

#### Claim Status

Access real time EDI 276/277 transactions to see if your submitted claim is pending, processed, or in a finalized status.

#### Claim Payments

View online electronic remittance advice (ERAs) documenting payments of claims.

#### Claim Appeals

Submit online claim appeals for claims that have finished processing and are in a finalized status (paid/denied).

### Provider Admin Application

Allows Provider Portal Site Administrators to make updates to Individual or Organization account information.

#### Provider Resources Page

Repository of convenient links to provider resources such as medical policies, user guides, provider manuals and partner portals.

#### Organization Registration

- Enter the primary billing NPI and Tax ID that is used by the Organization on the Initial Registration screen and click Continue.
- Complete the Questionnaire. Entered information will be used to populate the information on the
- Update and enter information on the Organization Enrollment screen.
- · Click Continue to complete Organization registration, and begin Individual registration

Note: Organization registration details will not be saved until Individual registration is also complete. If the web browser is closed or you encounter an error prior to completing Individual registration, you will need to reregister beginning with the Organization registration.

#### Individual Registration

- Select Individual on the Initial Registration screen, enter the primary NPI and TIN, and click Continue.
- Complete the Individual Enrollment screen and click **Send Code**. An email will be sent to the email address provided with a confirmation code.
- Enter confirmation code and click Verify.
- Choose Opt in or Opt out for communications and Click Continue. (The first individual to register under an Organization will automatically become the Organization's Site Administrator.)
- Set up password and complete authentication.
- Read Terms And Conditions and click Accept.
- · Click OK.

## **Common Questions**

#### I forgot my password. How do I retrieve it?

Click **Need help signing in?** at the bottom of the Portal Login panel, and then select Forgot Password?.

#### What is my Provider Portal login ID?

Your login ID is the email address that you use to create your Individual Provider Portal account. It must be your professional, work email address.

### Why am I getting an error message when trying to log in to the Portal?

One reason may be due to the web browser. Try using Google Chrome when accessing the Provider Portal.

### Whom do I contact if I have issues with or questions about the Portal?

Please first contact a Site Administrator for your account. If your Site Administrator cannot assist, contact your Provider Network Consultant.

### **Registration Completion Confirmation**

Once registration is completed, a confirmation message will display.

- If new registration was completed for both the Organization and Individual, the registration will be reviewed by a Dean Health Plan Administrator within two business days.
- If a new Individual registered under an existing Organization account, the organization's Site Administrator will review the registration.

## **Provider Network** Consultants

Provider Network Consultants (PNCs) are a team of specialized individuals dedicated to supporting our in-network providers.

While online self-service resources and the Customer Care Center are your first sources of information, PNCs assist with more in-depth inquiries to provide information beyond these resources when necessary.

#### Who is your PNC?

Go to deancare.com/providers and scroll to the bottom of the web page to find the PNC for your specialty. If your specialty does not have a designated PNC, contact the PNC for your county.



Refer to the How to... column in the grid below and look across the row for guidance on available health plan resources best suited to help you accomplish common tasks.

#### Self-Service PNC How to... **Customer Care Center** Request orientation and Contact your **PNC** for training ongoing education for you tailored to your organization. and your organization Access health plan medical Go to our online Medical If you cannot find the online For escalated questions about and authorization policies Management page. resource or have further policies as they affect your questions, call our Customer organization after calling the Care Center. Customer Care Center, contact your **PNC**. See our Online quarterly If you cannot find the online For escalated questions about Stay informed of upcoming and recent updated policies Provider News editions or resource or have further policies as they affect your and Health Plan news **Provider Communications** questions, call our Customer organization after calling the Care Center. Customer Care Center, contact web page. your PNC. Contact your **PNC** if you cannot Refer to your Contact your organization's provider contract Provider Agreement signatory. find your contract or have further questions. Refer to your timely See the terms in your Contact your PNC if you cannot filing limit Provider Agreement. find your contract or have further questions. Monitor your claims Use online claim resources If you cannot find the online For complex questions after listed on page 4 of this book. resource or have further calling the Customer Care questions, call our Customer Center contact, contact your PNC. Care Center. Request updates to your Always promptly contact your provider file **PNC** to report changes to (see When is a PNC your first demographic information, your point of contact on page 10) practitioners, office or practice locations, billing information, and services/specialties.

#### ■ When is a PNC your first point of contact?

Contact the Dean Health Plan PNC team to report changes or updates to your demographic information, practitioners, office or practice locations, and services/specialties for your organization. Offer as much advance notice of changes as possible. PNCs work with you to keep your provider file up-to-date with your reported changes to avoid negative impacts to your claims processing and payments that may result when your current information is not on-file.

- Refer to self-service resources first for 24/7, on-demand information.
- Call our Customer Care Center. Most questions can be answered with one simple call.
- Contact a PNC when a question is not easily addressed by other resources.

#### How to Request New Practitioners, **Locations or Services\***

- Submit a written request in advance to your Dean Health Plan PNC (emails are acceptable as written requests)..
- If adding a new practitioner who is replacing a practitioner in the organization, include the name, specialty, degree and termination date of the practitioner who left.
- Respond promptly to any requests from the PNC for additional information.
- Dean Health Plan reviews and decides on the request:
- If denied, the PNC will notify you of the denial. Denials remain on file for 12 months.
- If approved, the PNC will notify you of the approval and instruct on whether the new practitioner must undergo credentialing.

- If credentialing is required, the health plan will send the practitioner a credentialing application to complete and submit. (The practitioner cannot provide services to Dean Health Plan members until credentialing is approved.)
- The PNC will notify when credentialing is successfully passed, and the practitioner can provide services.
- \* Full details are in the Provider Manual including instructions for requests pertaining to specific practitioner types.

## Health Plan Communications

In most cases, we communicate to providers through email.

To receive direct and expedited communications from us, select the **Opt In for electronic communications** in the Dean Health Plan Provider Portal during Provider Portal registration. This option also can be selected afte registration through Account Settings.

## Dean Administrative Services Only (ASO) Product Resources

Employer-funded health care product. In some cases, provider resources for Dean ASO products are different than those for other products.

## Stay in the know!

Dean Health Plan issues a variety of communications to in-network providers about changes to health plan procedures, benefits, and other areas of interest involving health plan products and services.

#### Dean Health Plan Provider News

Our quarterly online newsletter that informs in-network providers about changes to health plan procedures, benefits, and other areas of interest involving health plan products and services.

#### As-needed Communications

To communicate changes outside of the quarterly newsletter schedule due to the planned implementation date and for larger initiatives that require more detail.

#### Provider Communications Page

Links to a variety of our past and current provider notifications for easy, on-demand retrieval of information. Examples of the notifications that are available are pharmacy material change notices and the annual end-of-year plan and benefit changes information. All of the published

notifications were originally communicated to in-network providers, as applicable, via postal mailings or emails.

#### Portal Flash Messages

Accessible from the Notifications page in the **Dean Health Plan Provider Portal** to temporarily communicate general messaging regarding topics such as system outages, directing providers to resources, resource updates, or more detailed communications for full information. These messages are archived in the provider portal and available for review after acknowledgement.

**Tip**: The Notifications page also stores all notifications that are delivered through the Provider Portal, including Claim Appeal Acknowledgements and Claim Appeal Determination Letters.

#### **Resource / Direct Link** Description Path to Access Details health plan policies and procedures specific to Click the Go to manuals link located under **Dean ASO Provider Manual** ASO products. Manuals at deancare.com/providers and select Dean ASO Provider Manual. Specific to ASO plan business to review group reports, Click the Provider ASO Login link under Dean **Dean ASO Provider Portal** check eligibility and claim status, and accumulator Health Plan Administrative Services at deancare. com/account-login-page#providers Links to authorization forms and medical policies. Click the See more link located under ASO **Dean ASO Medical Management** Medical Management at deancare.com/ members/aso-member **Dean ASO Members** Links to provider network directories and benefit plan Click the ASO link located under From My coverage information. Employer at deancare.com/members

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### WellFirst Health: Third Party Administrator for SSM Health Employee Health Plan

Dean Health Plan is the third-party administrator of the SSM Health Employee Health Plan (EHP) Administrative Services Only (ASO). This means that SSM Health employees who are enrolled in their employer-offered health insurance, including Dean Health Plan employees, are WellFirst Health SSM EHP plan members. This is different than the Dean ASO employer-funded plans available to non-SSM Health employer groups.

In Wisconsin, the Dean Health Plan provider network serves as the provider network for WellFirst Health SSM Health EHP ASO members. Members are issued WellFirst Health member ID cards with 'Dean ASO (WI)' listed as the provider network on the card. Additionally, 'Dean ASO' is listed as the plan network in the provider portal Eligibility application and the 271 Eligibility and Benefit Response transaction for WellFirst Health SSM Health EHP ASO members in Wisconsin.

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## Dean Health Plan Resource Quick Reference

Resource / Direct Link	Description	Path to Access
Automated Authorization	Automated authorization (Auto Auth) is available to in-network providers who submit a prior authorization request through the Provider Portal only. Prior authorization requests that meet the health plan's medical policy criteria or MCG Dean Health Plan guideline will receive an approval notification generated within seconds of submitting the request.	Click the <b>Automated Authorization</b> link located under Information & forms at <u>deancare.com/providers/medical-management</u>
Confirmation Reports Portal	Separate from the Provider Portal. Confirmation reports shows whether claims, submitted electronically or on paper, were accepted or rejected for processing. Confirmation reports are available within 48 hours of when the health plan receives a claim. Once users sign up, this is the only method they will receive as acknowledgement of claim acceptance.	Click the <b>Go to Portals</b> link located under Provider portals at <u>deancare.com/providers</u>
Document Library	Online document repository that allows users to search for manuals, policies, forms and other documents by using dropdowns for keyword, policy number, audience and/or category.	Click the <b>Document Library</b> link located under Helpful Links at <u>deancare.com/providers</u>
Electronic Funds Transfers (EFT)	Receive electronic payments from the health plan through Change Healthcare ePayment Services.	Sign up by calling 866-506-2830 or online at changehealthcare.com/support/customer-resources/enrollment-services
HIPAA Transactions Alternative to EDI Claim Submission	Exchange HIPAA-compliant electronic transactions with the health plan, including an alternative EDI claim submission option.	Click the Learn more about EDI link located Click the HIPAA Transactions link located under Helpful Links at deancare.com/providers  For EDI claim submission alternative, click the Smart Data Stream Clearinghouse Portal link at deancare.com/ providers/hipaa-transactions
Medical and Drug Policies  Medicare Advantage Policy Guidelines	Reviewed at least annually and based on technology assessment resources and feedback from innetwork providers.  Material changes to our policies are communicated in the Dean Health Plan Provider News or through special mailings or email distributions to those who have opted in to receive electronic communications from the health plan.	Click the Medical policies or Drug policies link under  Helpful Links at deancare.com/providers  For Medicare Advantage, click the Medicare Management link under Dean Advantage at deancare.com/providers/medical-management
Medical Injectables List	A reference of drugs covered under the medical benefit.	Click the Medical Injectables link at deancare.com/providers/medical-management  For Medicare Advantage, the Medical Injectables that require prior authorization are listed within the Dean Health Plan Medicare Advantage Plans Prior Authorization List, listed in the row directly below.
Medical Prior Authorization Service List  Dean Health Plan Medicare Advantage Plans Prior Authorization List	Also referred to as the Master Service List, it is divided by products and lists medical service codes that require prior authorization. It also links to medical policies that require prior authorization and/or have coverage limitations.	Click the Medical Prior Authorization Services list link located under Prior Authorization Services on the Dean Health Plan Medical Management web page at deancare.com/providers/medical-management  For Medicare Advantage, click the Dean Health Plan Medicare Advantage Plans Prior Authorization List link at deancare.com/medicare/medicare-member-center/dean-advantage-member-center/pharmacy-benefits/medical-management
Member Summary of Benefits and Coverage	Documentation related to member health plan benefits, including certificate of coverage, member policy or certificate and member handbook, including exclusions.	Using Google Chrome, go to memberbenefits.deancare.com

Resource / Direct Link	Description	Path to Access
Navitus/Navi-Gate Portal	Dean Health Plan contracts with Navitus/Navi-Gate for the authorization of pharmacy benefit drug authorizations.	Click the Go to portals link located under Provider portals at deancare.com/providers
NIA Magellan Healthcare RadMD Portal	Dean Health Plan contracts with NIA Magellan Healthcare for the authorization of physical and occupational therapy, radiology and musculoskeletal services. Providers must submit authorization requests for these services directly to NIA Magellan Healthcare through their RadMD Portal.	Click the Go to portals link located under Provider portals at <u>deancare.com/providers</u>
Non-Covered Services	List of medical procedures and services that are not covered by the health plan.	Click the <b>Non-covered Services</b> link located under Authorization and coverage at <u>deancare</u> . <u>com/providers/medical-management</u>
Opt In/Opt Out for Electronic Communications	Available during the Provider Portal registration process. Select Opt In to receive direct email communications from the health plan. After registration and account setup, available through Provider Selection option under the Settings dropdown located at the top of the Provider Portal home page, select Account Settings. Click Save Changes once completed.	Click the <b>Go to Portals</b> link located under Provider portals at <u>deancare.com/providers</u>
Pharmacy Information	Includes medical benefit drug policies, formulary coverage, and a listing of prior authorized drugs.	Click the See Pharmacy Services link located under Pharmacy services at deancare.com/providers
Provider Communications	Links to a variety of past and current provider notifications for on-demand retrieval of information. Includes communications to in-network providers about changes to health plan procedures, policies and benefits, and larger initiatives.	Click the <b>Communications Library</b> link located under Helpful Links at <u>deancare.com/providers</u>
Provider Directory	Titled as <b>Find A Doctor</b> on <u>deancare.com</u> Interactive, up-to-date listing of in-network providers and locations contracted with the health plan that is publicly accessible to members and providers.	Click the <b>Find A Doctor</b> link located at deancare.com
Provider Manuals	Provider resource for health plan policies and procedures intended to serve as supplemental information to a provider's contract.	Click the <b>Go to Manuals</b> link located under Manuals at <u>deancare.com/providers</u>
<u>Provider News</u>	Quarterly newsletter with health care interest stories, provider and health plan highlights, and updated medical and drug policies.	Click the <b>See News</b> link located under Provider News at <u>deancare.com/providers</u>
<u>Provider Portal</u>	Secure Provider Portal accessible 24/7 as a direct line between your organization and the health plan's self-service applications to exchange electronic transactions and share current health care information and health plan resources.	Using Google Chrome, click the <b>Go to Portals</b> link located under Provider portals at deancare.com/providers
Provider Portal Registration Guide	Details the registration process to create individual and organization Provider Portal accounts.	Click the <b>Go to Portals</b> link located under Provider portals at <u>deancare.com/providers</u>
Provider Portal User Guide	Details how to use the self-service applications available in the Portal once a Provider Portal account is created.	Available to registered users in the secure Provider Portal once a Portal account is established.

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### Follow us on LinkedIn and Facebook





## Dean Health Plan, Inc.

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