

MEDBEN MEDICAL PROVIDER PORTAL ON MEDBEN ACCESS

Self-Registration Instructions

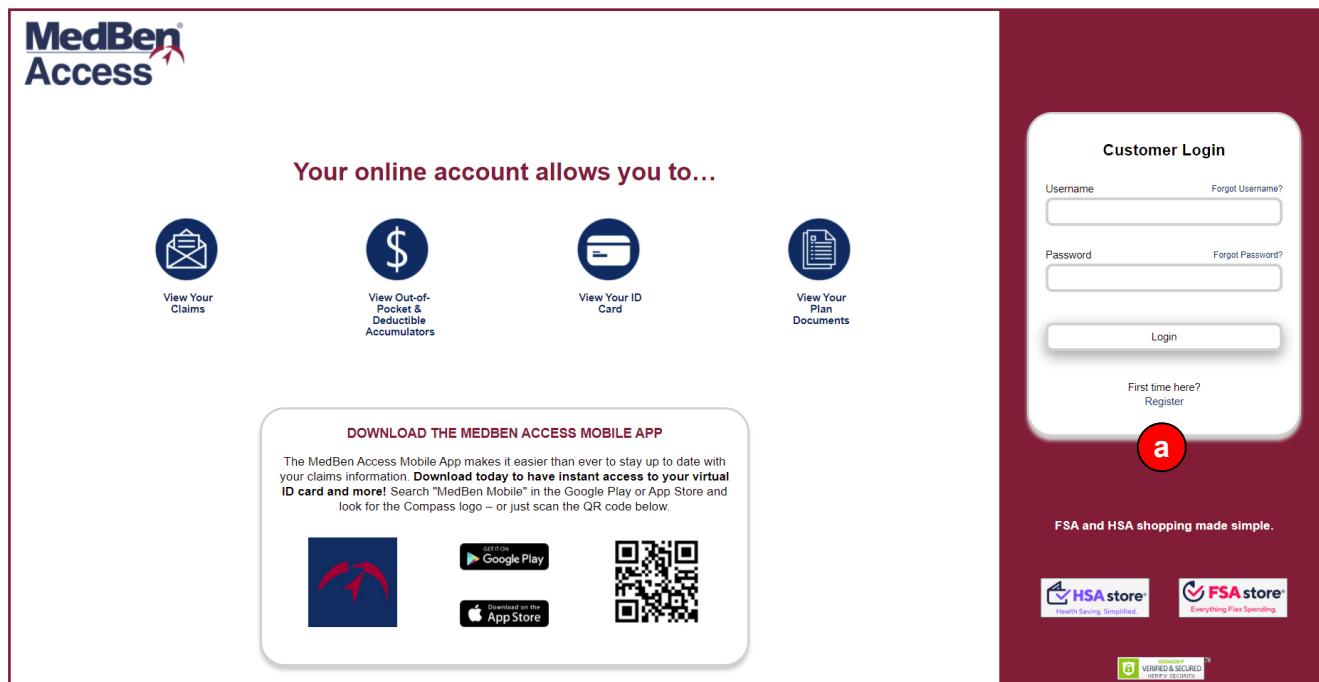
Welcome to **MedBen Access!** This website allows registered MedBen providers to perform a wide range of claims and benefits services. Our online features make patient information coordination easy!

Doctors and office managers alike can create personal accounts to use MedBen Access features. All accounts are created separately and must be approved by the MedBen Provider Review Team.

SELF-REGISTRATION

To **self-register** on MedBen Access, follow these steps:

- 1) Go to **MedBen.com** and select "MedBen Access" from the top menu.
- 2) On the MedBen Access home page, click on the "**Register**" link located in the Login box (a).



- 3) You will be prompted to select whether you are a **Participant or Provider**. Select "Provider" and press the "Submit" button.
- 4) Read the **MedBen Access Privacy Policy** and press the "I AGREE" button.
- 5) On the next three pages, you will create your provider account. **PLEASE NOTE** that in order to sign up, **the information you enter needs to match EXACTLY to how it appears on our online system**. Should you need guidance, please refer to a MedBen check or EOB. If you have questions, please contact MedBen Provider Affairs at **provideraffairs@medben.com** or **(800) 423-3151**.

ISO 9001 CERTIFIED

- On the **first** page, **designate your provider type** – Vision, Medical, Dental, or Medical/Dental – by selecting the appropriate option button.

Next, you will **identify your business**, either by business name or provider name **(b)**. Your Federal Tax Identification Number is also required; if you have a question about this, please contact MedBen Provider Affairs. Once you have completed the required fields, press the “Next” button. If a required field is left empty or doesn’t match the information on our online system, you will be prompted to enter the correct information.

Type: Vision Medical Dental Medical/Dental

In order for this to be accepted, the information needs to match exactly to what is on our system. Please refer to a check or EOB.

Federal Tax ID:

Provider Business Name: **b**

Provider First Name:

Provider Middle Initial:

Provider Last Name:

Provider Phone Number:

Provider Zip Code:

Next

- On the **second** page, you will create a **unique username and password (C)**. Both are case sensitive, and your password must be at least 7 characters and contain letters or numbers only.

Once you have completed the required fields, press the “Next” button.

- On the **third** page, you will see a message informing you that an e-mail letter has been sent to you to confirm your e-mail address.

- 6) Check your mailbox for the e-mail letter, which includes a link to **confirm your e-mail address**.

Please click on the link or copy and paste the web address into your browser.

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Verification of your personal information is almost complete.

Once you select a User Name and password, you will have to confirm your email address for your account to be activated. Both the User Name and password fields are case sensitive. The password must be at least 7 characters and contain letters or numbers only (no blanks or special characters).

Your first name:

Your last name:

Your website User Name: **C**

Your password: Mask password? Strength: **Too short**

Your email address:

Confirm email address:

Next

USING MEDBEN ACCESS FEATURES

Depending on the provider type you designated on the first registration page, MedBen Access will display a varied menu of claims and benefit services. You can view and select from the drop-down menu by clicking the link directly under the MedBen Access logo.

QUESTIONS?

We designed **MedBen Access** to provide you with fast access to claims and benefits services, but should you need additional assistance, please contact MedBen Provider Affairs at **provideraffairs@medben.com** or **(800) 423-3151**.