CIGNA eServices

## CIGNA for Health Care Professionals Website My Practice

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After completing this course, you will understand:

- ✓ How to access the My Practice feature on the CIGNA for Health Care Professionals website (<u>www.cignaforhcp.com</u>)
- ✓ What functions are available using the My Practice feature
- ✓ How a Primary Administrator can delegate access to the My Practice feature to others

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	<u>eServices</u>	<u>Resources</u> <u>My</u>	Profile My P	ractice	Education and H	<u>leip Inbox</u>	<u>Assign Access</u>		
<mark>∢Log Out</mark> Who's logged on: johnson2	Welcome Sc	ott Tools				C	Plast Plast		
Popular Links			and Damaster		Help	AC	AQH Initiative		
<ul> <li>Provider Directory</li> <li>Drug List</li> <li>Forms</li> <li>Policies &amp; Procedures</li> <li>Precertification</li> <li>informed or reform</li> <li>CUSTOMER SERVICE</li> <li>General assistance, call 1.800.88CIGNA (1.800.882.4462)</li> <li>Technical assistance with this site, call 1.800.261.6232</li> <li>Assistance with site navigation and registration only, call 1.800.853.2713</li> <li>Website Availability</li> </ul>	• <u>Viev</u> • <u>Est</u> • Sea • Sea • <u>Viev</u>	w member Eligibility imate Patient Liability wand Submit Prece arch Claims By O Member Name O Claim/Reference O Provider Generation arch for Remittance O Member Name O Claim/Reference O Remittance Tra O Deposit Amount w Claim Coding Ed	In Generits An Server Antification Requ or ID e Number ated Patient Acc Reports By: or ID e Number cking Number t ts	iests :ount Nun	<u>ıber</u>	News NCCI Edit <u>Click here</u> information Currently, may not b site. <u>Click</u> information Precertific CIGNA will precertific additional effective M Click <u>here</u> information	You Can Use s for Facilities for more n. some claims to visible on this there for more n. sation Updates Il require ation for six injectable drugs, May 1, 2011. for more n.		
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By visiting the *My Practice* tab on the CIGNA for Health Care Professionals website (<u>www.cignaforhcp.com</u>), Primary Administrator users can perform four functions:



## **Enroll a New EFT Account**

What are the benefits of enrolling in EFT?

- Payments are deposited directly into your checking or savings account, avoiding mail delays.
- Funds are available on the day of the deposit.
- Helps increase efficiency and improve cash flow
- Provides immediate access to reimbursement payments
- View and share remittance reports the same day you receive your deposit

The next page will show you how easy it is to enroll in EFT.



#### **Enroll a New EFT Account**

	CIGNA	CIGNA for Health Care Profess My Practice > View and Modify Existing EFT Settings	sionals
	◄ <u>Loq Out</u>	Customer Service: General Assistance: 1.800.88CIGNA	(1.800.882.4462), Technical Assistance: 1.800.261.6232
1. Choose the TIN you wish to enroll in EFT.	Enroll a New EFT Complete enrollment by Indicates a required fit	Account Help confirming your information and agreeing to the Terms of eld	of Service.
2 Change the	Step One: Select a	Tax Identification Number (TIN) and Provide	rs/Groups
Provider/Groups you	* TIN:	778899001	
wish to enroll in EFT.*	* Provider/Groups:	ALL SMITH CHARLES T JR MD GOODHEALTH HOSPITAL	
3. Type the name and phone number of the person who will act as the contact for EFT.	Step Two: Review a	(Please select one or more provider/groups. CTRL-click for	multiple selections)
	* Contact Phone:	Extension:	
4. Choose the account type to which funds will be deposited.	Step Three: Provid	e Bank Account Information	
	* Account Number:		1001
5. Type the routing and account numbers. Use the picture at right to identify the correct numbers.	- Account number;		PAYTO DATE THE ORDER OF\$ OUL ARS DOLLARS DOLLARS DOLLARS DOLLARS B Bank Routing D123455769012 1001 Bank Routing Bank Account Number Number
6. Clic	ck <b>Next</b> .	Next	



What happens next in the EFT enrollment process?

- CIGNA will send a "pre-note transaction" to your bank to verify all the banking-related information is correct.
  - If the pre-note is not returned, you will begin receiving EFT on the next payment cycle
  - If the pre-note is returned with errors, CIGNA will contact you to obtain corrected information
- This process can take up to 6 weeks
  - You can check the status of your EFT enrollment by logging in to the CIGNA for Health Care Professionals website (<u>www.cignaforhcp.com</u>) > My Practice > Change Current EFT Settings > Enrollment/Update Status

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◄ <u>Log Out</u>	Log Out Customer Service: General Assistance: 1.800.88CIGNA (1.800.882.4462), Technical Assistance: 1.800.261.62							
Change Curren Update or terminate Provider Name	t EFT Setting your current EFT Tax ID	gs settings. Enrollment /	Your Options	Remittance Report				
ABC Medical	123456789	Pending		Online Only (change)				
		Select TIN Pr	ovider Name 💌					

## **Change an Existing EFT Account**

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	<u>eServices</u>	Resources	<u>My Profile</u>	My Practice	Education and Help	Inbox Assign /	Access
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<ul> <li>▲ Log Out</li> </ul>	Custome	r Service: General Assi	istance: 1.800.8	8CIGNA (1.800.882.4	462), Technical Assistance: 1.800.261.6232
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l <u>Log Out</u>	Customer Service: General Assistance	: 1.800.88CIGNA (1.800.882.4462), Technical Assistance: 1.800.261.6232	
Change EFT			Click <i>Edit Contact</i> <i>Information</i> to edit the
TIN and Provider:	s Associated with Bank Account		EFT contact name and/or phone number.
TIN:	223344556		
Provider/Groups:	7654321		
Contact Informati	on		
Contact Name:	Mirian McKay	Edit Contact Information	
Contact Phone:	860.123.7654		Click Edit Bank Account
Bank Account Inf	ormation		bank account information
Account Type:	Checking	Edit Bank Account Information	associated with the EFI
Routing Number:	123456789		enroiment.
Account Number:	9999999	PAY TO DATE	Note that if you change your bank account information, it will go through the same process as an initial EFT enrollment, which could take up to the 6 weeks.
	Cancel		

## **Terminate an Existing EFT Account**

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	Terminate an EF To terminate this EFT,	T Help review your information and select "Next" to be taken to the confirmation sc	reen.	
	TIN and Providers	s Associated with Bank Account		
	TIN:	223344556		
	Provider/Groups:	7654321		
	Contact Information	on		
	Contact Name:	Miriam McKay		
	Contact Phone:	860.123.7654		
	Bank Account Info	ormation		
	Account Type:	Checking		
	Routing Number:	123456789		
	Account Number:	9999999		
1. Select the reason for terminating the EET enrollment	Termination detai	ils	Terminating an existin EFT account takes eff	ig fect
	Reason for termination	-Select a reason for termination-     Next     Cancel	reimbursements will b sent by paper check to	; e o
		L	your billing address.	
	2 Click Next			

## Change Remittance Report Delivery Preferences

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<u>e</u>	Services	Resources	<u>My Profile</u>	My Practice	Education and Help	Inbox A	Assign Access
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	Remittance Repo	rt Delivery Preferences	Help
	Preferences for Ta	IX ID 987654321	
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	TIN:	987654321	reports online, choose Online Delivery Only.
	Provider/Groups:	1234567	
	* I Prefer:	<ul> <li>Online Delivery Only</li> <li>Paper and Online Delivery</li> </ul>	
2. If you wish to receive	* Reason for Change:	Select reason for change	•
both paper and online reports, you must	* Duration:	30 days 💌	
choose the reason for, the duration of, and the	* Effective Date:	mm/dd/yyyy	(
effective date of the change.		Next Cancel	
	3. Click Next	٦	

# Delegate Access to My Practice

Primary Administrators can delegate access to the four functions available on *My Practice* (New EFT Enrollment, EFT Change or Termination, Remittance Report Delivery Preferences) for a user by logging on to the CIGNA for Health Care Professionals website (www.cignaforhcp.com) > Assign Access > Modify/Delete User Information.

Provider Delegation - Add New User	
Who's logged on: Date & Time:	Johnnie Q Thomas - jthomas31 May 16, 2011 02:25 PM EST
(*) Indicates required	d field.
*Last Name	*First Name MI
E-mail Address Phone Number Ext.	
Option 1. Delegate a	Access to all practices/facilities.
Precertification	- Submit and View requests access to <i>My Practice</i> functions.
Precertification - View requests	
Manage Remittance Report Preferences	
🖾 Eligibility, Benefits & Inquiry Forms	
Claim Status & Remittance Reports	
Select Option 1.	

#### **Congratulations!**

### You've completed the CIGNA for Health Care Professionals Website My Practice Course.

You can review this Course at any time or print a copy.

Bookmark <u>www.cignaforhcp.com</u> today!

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