



Provider Referral Portal User Instructions

What is the Provider Referral Portal?

The Provider Referral Portal is a tool for all providers to submit online referrals for members enrolled in plans that require referrals to specialty care.

Where is it located?

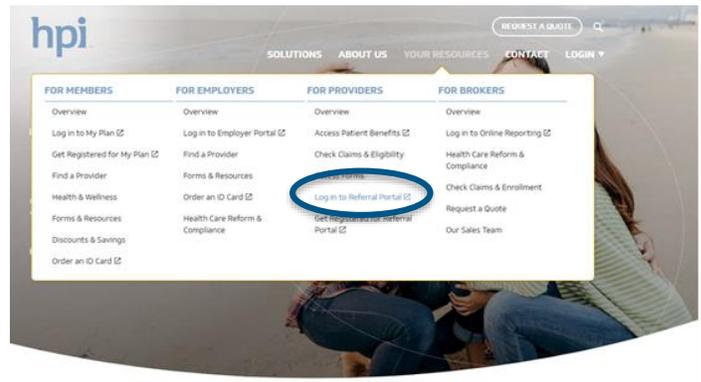
Visit the **providers** section at **hpiTPA.com** to access the Provider Referral Portal. A link to the portal is located in the left navigation menu and top main navigation menu.

What if I have questions?

Email **healthplansreferralrequest@healthplansinc.com**.

Logging In

1. Go to the **Providers** section at **hpiTPA.com**
2. Click **Log in to Referral Portal** from the top main navigation menu.



3. On the login page, enter the User ID and Password provided to you via secure email from HPI.
4. Check "I'm not a robot."
5. Click **Submit**.

Create a New Referral

1. Enter the member's ID number and date of birth, then select the member's Policy Group from the dropdown menu.

All fields marked with an asterisk (*) are required.

2. Click **Proceed**.

3. The member you have searched will display.

Click the radio button to confirm your selection.

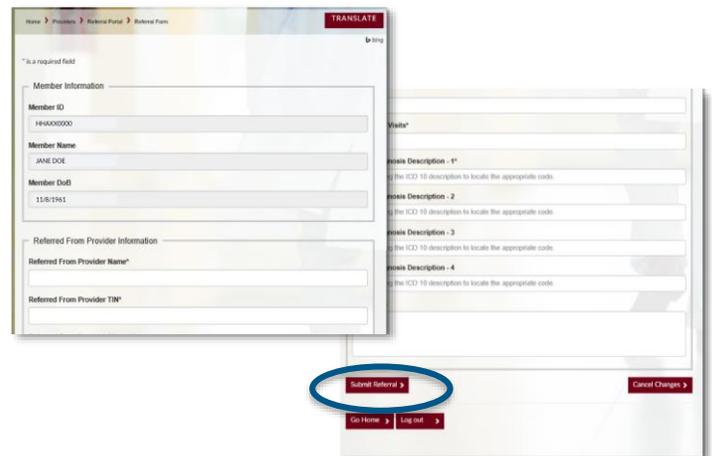
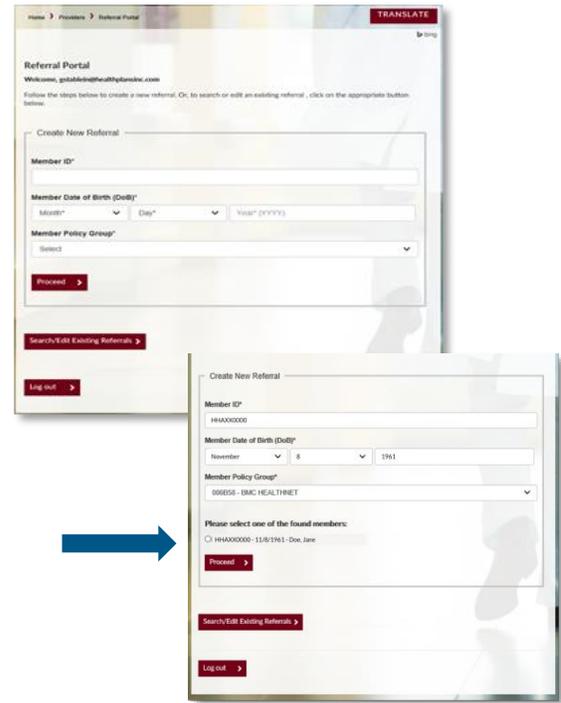
4. Click **Proceed**, again.

5. The referral form will be pre-populated with member demographic information.

Complete the remaining form fields, then click **Submit Referral**.

Your confirmation page will display.

6. You'll be able to print a copy of the referral for your records, or continue to enter another referral for the same member.

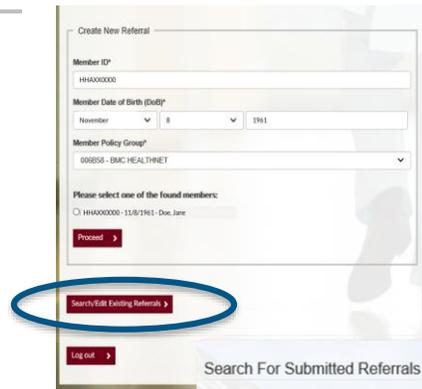


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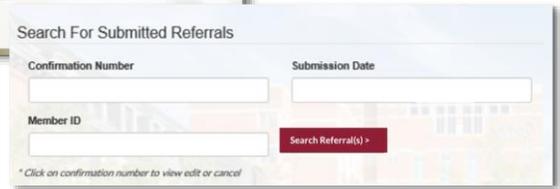
User Instructions

Search/Edit Existing Referrals

1. After you have logged in and selected your member, click **Search/Edit Existing Referrals**.



2. Search for the referral by entering any of the identifiers, then click **Search Referral(s)**.



3. The referrals created by you will be displayed.

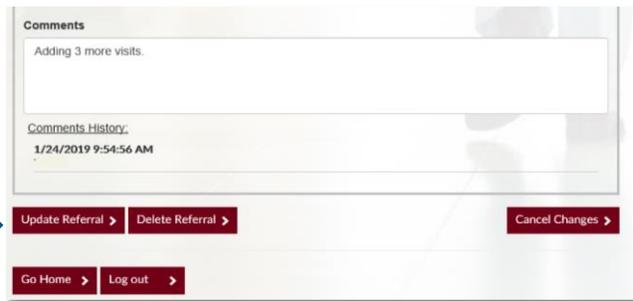
4. To view the referral, click the blue confirmation number.

* Click on confirmation number to view edit or cancel

| Confirmation Number | Member Id | Name | Referred From Provider | Referred To Provider | Start Date | End Date | Submit Date | Status |
|---------------------|-----------|------|------------------------|----------------------|------------|------------|-------------|--------|
| 0000000026 | | | | Dr. Smith | 12/12/2017 | 12/15/2017 | 12/12/2017 | New |
| 0000000025 | | | | test | 12/12/2017 | 12/13/2017 | 12/12/2017 | New |
| 0000000024 | | | | Dr. Smith | 12/9/2017 | 12/21/2017 | 12/8/2017 | Edited |
| 0000000023 | | | | Hospital | 12/6/2017 | 12/8/2017 | 12/6/2017 | Edited |

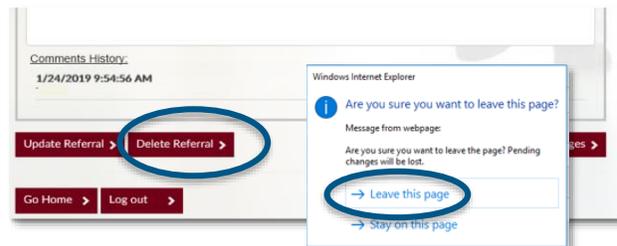
5. Make edits to the referral as you would with a new form.

6. Add a note in the comment field box indicating the change that you made to the existing referral.



7. Click **Update Referral**.

8. *Please note:* you may also delete a referral that was entered in error: click **Delete Referral**. To complete the deletion, you must click **Leave this page** in the pop-up message.



9. Your confirmation page will display.

10. You may print a copy of the referral for your records.

