

Online Provider Portal

Access to the information you need *when you need it*



Your Community Partner

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Interactive information about your health plan coverages.	Versatile Benefit Solutions for your employees.	Access to SIHO's online resources and information.	Offering SIHO's products and services to your customers.

Provider Directory

Find your Doctor or Hospital in the SIHO Provider Directory

Welcome to SIHO Insurance Services

SIHO Insurance Services was formed with the vision to provide affordable health care benefits for local communities. Partnering with the local medical community and employers, SIHO endeavors to raise the standard of health care and the quality of life of the community. Today, SIHO is a dominant insurance company, providing a wide array of health insurance packages.

Latest News

Health Savings Accounts

Community Partners









- Need a question answered fast? Check out our [Frequently Asked Questions](#).
- Have a question about your insurance? [Contact Us](#)
- Is your prescription included in the [SIHO Formulary](#)?







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Welcome to SIHO Insurance Services' Provider Services portal; a secure and convenient system that gives healthcare providers free online access to valuable patient information. This service is offered to providers with the help of benefit administrators throughout the nation. System features include:

- Lookup of claims
- Access to EOPs (Explanation of Payments)
- Eligibility status verification
- Status of authorizations

This guide outlines the process a provider will follow to utilize the SIHO secure services. Detailed descriptions of searching claims, eligibility, and authorizations on the system are included along with information that may be of value when navigating through the site.

Your Personal Profile

A Personal Profile is established at the time the account is created on the system. From this area, changes to the password, your email address, and contact information can be made.

- When changing your password (Security Info tab), the system requires the password to be at least eight (8) characters (alpha-numeric characters only) and contain no spaces.
- At this time, access is given by using the Group NPI and Tax identification number.
- To modify an existing Tax Identification Number associated with a profile, please call SIHO representatives at 1-800-443-2980.
-

SIHO INSURANCE SERVICES

You are currently logged in as: SIHO Provider
Messages (0) | Profile | Logout

Website Resource Center | Provider Inquiries | Provider Resources

Home • Profile

Profile

Account Info | Security Info | **Provider Info**

Provider Information

Contact Name:

Contact Phone:

Practice Name:

Primary Specialty:

National Provider ID:

Provider Tax ID: 77777777

Provider Information
sample text

My Menu

Upon establishing an account on the system, providers are subscribed to programs where online inquiries to access patient information can be made. Details of the service features are listed below.

If your menu is missing the Provider Services/Provider Inquiries program, the process of creating your account may have been incomplete. You will need to go through the process of setting up a new account on

The screenshot shows the SIHO Insurance Services member web portal. At the top left is the SIHO logo. To its right, the text 'INSURANCE SERVICES' is displayed. Below this is a navigation bar with links for 'Website Resource Center', 'Provider Inquiries', and 'Provider Resources'. A central banner features a blue background with the text 'Welcome to the SIHO member web portal!' and 'Use the convenient drop-down menu above to navigate the site.' To the right of the banner is a 'Health Headlines' section with a list of news items: 'Orszag Takes Task Truman Began in Health-Care Overhaul - Bloomberg', 'Better health? There's an app for that - Houston Chronicle', 'Study: Few retail clinics in poor neighborhoods - The Associated Press', and 'WHO tasks Nigeria on better health systems, swine flu checks - The Guardian - Nigeria'. The footer contains 'Southeastern Indiana Health Organization', 'Home Privacy HIPAA Terms', and 'All Rights Reserved 2008'.

the system to be subscribed to this program.

Provider Inquires program allows providers to access detailed patient information such as claims, EOBs/ EOPs, eligibility and online claim submission using a DDE compliant lookup too. The inquiry screens require certain criteria be specified in order to achieve results.

- When available, the system not only returns the data requested by the search, but also gives the provider a link for accessing an actual image of the original EOP (Explanation of Payment) document.
- If you have questions regarding a claim, you have the ability to submit your inquiry electronically. The question will then go directly to SIHO for a response.
- For providers who currently submit paper claims, there is a link to quickly register and begin submitting claims electronically.

Website Resource Center is available to providers needing assistance or additional information.

- Frequently Asked Questions provide answers to commonly asked questions from providers.
- News and Announcements are posted periodically to keep users informed of updates.
- Sign-Up Instructions outline the steps for creating a new user account for others in your practice or facility.

System Services program allows for notification of scheduled system maintenance.

Claims & EOP/EOB Look-up

To search claims on the system:

- From the menu, select 'Claims & EOP/EOB Look-up'
- SIHO will automatically display in the 'Insurance Company/Benefits Administrator' drop-down box
- To search for a specific claim, enter the Claim Number. Up to 10 Claim Numbers can be entered
- To access a summary of claims for a patient, enter the Member ID and DOB
- To lookup claims by Date of Service, enter the Member ID and DOS range

[Website Resource Center](#) [Provider Inquiries](#) [Provider Resources](#)

Claim Inquiry

- To perform a "Quick Search" - choose a point from the list and select a member from the drop down choices. Click on "Search".
- To perform a "Date Range Search" - choose the 'from:' and 'to:' time frame from the drop down choices and select a member from the drop down choices. Click on "Search".
- To perform a "Claim Number Search" enter up to 10 claim numbers, press 'enter' after each claim number. Click on "Search".

Date Range Search:

Insurance Company/Benefits Administrator:

Member ID: [Lookup Member ID](#)

Date of Service:

Patient Search:

Insurance Company/Benefits Administrator:

Member ID: [Lookup Member ID](#)

Date of Birth:

Claim Number Search:

Insurance Company/Benefits Administrator:

Claim Number(s): Enter up to 10 Claim Numbers (one per line)

Claim Search Results

If more than one claim is found matching the criteria specified AND the provider Tax Identification Number on the claim, a list of those claims will display

- Click on the claim number to access the claim details

Click on the Claim Number to view claim details.

Results for: SAM JONES Last 10 Claims

3 records found.

Claim Number	Provider	Service Date	Member ID	Claim Status	My Responsibility
083580E01050		11/24/2008	66666666600	PAID	\$0.00
080870E04355		3/25/2008	66666666600	PAID	\$0.00
080110E01216		1/2/2008	66666666600	PAID	\$0.00

View Claims

- The 'Online view' is the default system view.
- 'Original View' links to the EOP when one is available.
- 'Print View' allows you to print a copy of the claim from the system.

Online View | [Original EOB View](#) | [Print View](#)

Member ID/Name:	66666666600 / SAM J JONES
Group ID/Name:	300 / Demo Group
Claim Number:	083580E01050
Current as of:	03/15/2009

Payment Summary	
Mailing Address:	Paid To:
207 NEITZEL DR	Payment Date: 12/29/2008
HOLMEN, WI 54636	Payment Amount: \$74.73

Provider of Service:	PAUL T KLAS MD	For This Episode You Owe Provider \$0.00
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Details For 11/24/2008 through 11/24/2008

Type of Service	Submitted Amount	*Plan Savings	Other Insurance Paid	Plan Pays	Not Covered By Plan	Reason Code	Line Status	Copay	Deductible	Co-Insurance	Member Responsibility	Check No	Check Date
Column Totals	\$109.90	\$21.98	\$0.00	\$74.73	\$0.00			\$0.00	\$0.00	\$13.19	\$0.00		

([†] Plan Savings - You have no obligation to pay this amount since the provider has contractually agreed to accept the reduction.)

Notes

Reason Code Descriptions

Line Status Descriptions

Stage 1 Processing = Claim is currently in process
Stage 2 Processing = Claim is approved for payment

Original EOB View

Eligibility Look-up

To search eligibility records on the system:

- From the menu, select 'Eligibility Look-up'
- SIHO will automatically display in the 'Insurance Company/Benefits Administrator' drop-down box
- To search for a specific patient, enter the Member ID. Up to 10 Member IDs can be entered
If the Member ID is not known, enter the member's First Name, Last Name, and DOB.

Eligibility Inquiry

Select a member to view Eligibility information.

Member ID Search:	
Insurance Company/Benefits Administrator:	SIHO (testing)
Member ID(s):	Enter up to 10 Member IDs (one per line)
<input type="text"/>	
<input type="button" value="Search"/>	

Name Search:	
Insurance Company/Benefits Administrator:	SIHO (testing)
SSN:	<input type="text"/>
Group:	<input type="text"/>
First Name:	<input type="text"/>
Last Name:	<input type="text"/>
Date of Birth:	--- -- ----
<input type="button" value="Search"/>	

View Eligibility

The eligibility record containing coverage information is presented.

Eligibility Inquiry - SAM JONES

Additional information regarding benefit coverage may be available online. To review a benefit booklet or confirm participating providers, please scroll to the bottom of the screen and click on the appropriate link listed below.

SAM JONES | [All Members](#) | [Print View](#)

Patient					
Name	SAM JONES	Date of Birth	08/17/1957	Original Effective Date	
Gender	Male	Relationship	Employee	Term Date	
Address	207 NEITZEL DR HOLMEN, WI 54636	Medical Office Copay	\$5.00	Plan	GH
PCP Name	Dr. Alexandra Jones				
MemberID	6666666600	Payor	SIHO		
Group Name	Demo Group			Group#	300

Coverages					
MEDICAL					
Coverage Level	Effective Date	01/01/2007	Termination Date		
Plan	Description	MEDICAL			

Current Accumulators					
Name	Type	Current Amount	Maximum	Number of Visits Met	
MED Coinsurance In-Network	Individual	\$0.00	\$500.00		
MED Coinsurance In-Network	Family	\$14.62	\$1,000.00		
MED Coinsurance Out-Of-Network	Individual	\$0.00	\$1,500.00		
MED Coinsurance Out-Of-Network	Family	\$0.00	\$3,000.00		
MED Deductible In-Network	Individual	\$300.00	\$300.00		
MED Deductible In-Network	Family	\$900.00	\$900.00		

Authorization Status Lookup

To search authorizations on the system:

- From the menu, select 'PreAuth Search'
- To access a list of authorizations by Date of Service, enter the Member ID and DOS range
- To access a summary of authorizations for a patient, enter the Member ID and DOB
- To search for a specific authorization, enter the Auth Number. Up to 25 Auth Numbers can be entered

Auth Search

- To perform a "Quick Search" - choose a point from the list and select a member from the drop down choices. Click on "Search".
- To perform a "Date Range Search" - choose the 'from:' and 'to:' time frame from the drop down choices and select a member from the drop down choices. Click on "Search".
- To perform a "Claim Number Search" enter up to 10 claim numbers, press 'enter' after each claim number. Click on "Search".

Member ID:	
Member ID:	<input type="text"/>
Date of Service:	
from:	--- -- ---- to: --- -- ----
	<input type="button" value="Search"/>

Member Name:	
Last Name:	<input type="text"/>
First Name:	<input type="text"/>
Date of Service:	
from:	--- -- ---- to: --- -- ----
	<input type="button" value="Search"/>

Authorization Number Search:	
Authorization Number(s):	<input type="text"/>
	Enter up to 25 Authorization Numbers (one per line)
	<input type="button" value="Search"/>

Auth Search Results

If more than one authorization is found matching the criteria specified AND the provider Tax Identification Number, a list of those authorizations will display.

- Click on the auth number to access the details

View Auth

The authorization information is presented.

[Auth Search](#) - [View Detail](#)

Additional information regarding benefit coverage may be available online. To review a benefit booklet or confirm participating providers, please scroll to the bottom of the screen and click on the appropriate link listed below.

1 Record Found.

Online View | [Print View](#)

Patient Information			
Authorization Number:	999999999		
Name:	SAM JONES	Member ID:	99999999999
Date of Birth:	05/26/1948		
PCP:			
Authorization Details			
Provider:	EXCELLENT HOSPITAL	Type:	0
Diagnosis:	V7651 SCREEN MALIG NEOP-COLON		
Reason:	OP - MISC	POS:	AMBULATORY SURGICAL CENTER
Start Date:	01/30/2009	End date:	01/30/2009
Admission Type:		Request Date:	01/27/2009
HCPCS/CPT/SVC:	Units:	Description:	
45378		DIAGNOSTIC COLONOSCOPY	
Decision:	Approved	Rationale:	01

Authorization Request

You can now request precertification/ authorization on line! The request will be reviewed and a response released within 48 hours. Simply complete the required information and submit it on line. It's that easy.

SIHO INSURANCE SERVICES

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- FAQs
- Fee Schedule Request
- CAQH & SIHO Credentialing
- Contact US
- CAQH
- Emdeon epayment
- Authorization Request**
- EDI
- PreAuth Search
- Forms

Health Headlines

- Those who walk, bike enjoy better health - United Press International
- Prognosis: better health care - Buffalo News
- Productivity key to better health care - Las Vegas Sun
- Health care flawed all over - Chicago Tribune

Use the convenient drop-down menu to navigate the site.

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Authorization Request Form

PreAuth Form | Attachments (0)

PreAuth Form

Authorization Date:

Authorization Class:

Member ID:

Member First Name:

Member Last Name:

Member Date of Birth:

Group Number:

Requesting Provider:

Requesting Provider Email:

Requesting Provider Phone#:

Provider of services:

Diagnosis:

Primary procedure:

Place of service:

Auth type:

Service Reason:

Start Date/Eval date:

Requested # visits/days:

Duration of care:

Clinical information (attachments):

- History:
- Treatment already attempted:
- * Physician's script/order:
- Current medical assessment:
- Evaluations:



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