



Registration, Access and Administration for Payers, Pharmacy Benefit Managers and Medical Review Organizations through the Medical Portal

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I. Overview

Users need access to the Medical Portal to use OnBoard: Limited Release to submit and respond to Prior Authorization Requests (PARs) and *Requests for Decision on Unpaid Medical Bills (Form HP-1.0)*. Some users may already have access and will not need to request access again. The information in this guide details who needs access, how to request (or register) for access, and how to designate and manage user roles in the system.

II. Medical Portal access: who has it, and who needs it?

| User type | Details |
|---|--|
| Payers (insurers, third-party administrators, self-insured employers) | Payers who already have access to the Medical Portal for Drug Formulary prior authorizations are automatically registered for OnBoard. A second registration is not required. |
| Pharmacy Benefit Managers (PBMs) | PBMs who already have access to the Medical Portal are automatically registered for OnBoard. PBMs not registered for the Medical Portal must complete the online PBM Medical Portal Registration process. |
| Medical Review Organizations (MRO) | MROs must complete the online Medical Review Organization Medical Portal Registration process. |

III. Role types

The PAR review process involves several roles that need to be assigned in the system. Each role has specific responsibilities in the PAR review process. The following outlines the role types for payers, PBMs and MROs.

| Payer Roles | Responsibilities |
|--|--|
| <p>Online (User) Administrator</p> <p><i>Payers must assign someone as an Online (User) Administrator.</i></p> | <ul style="list-style-type: none"> • Requests access for users and User Administrators. • Assigns users to Workload Administrator, Level 1, and Level 2 Reviewer roles. • Provides email contacts for PAR notifications. • Designates MRO for PAR reviews. • Designates PBM for Level 1 Medication PAR reviews. • Updates user information as necessary. • Removes users who should no longer have access to the system. |
| <p>Workload Administrator</p> <p><i>There must be a Workload Administrator for each PAR type, and Workload Administrators may have more than one role type outlined in this section.</i></p> | <ul style="list-style-type: none"> • Receives and assigns all submitted PARs based on one of the following Workload Administrator role types: <ul style="list-style-type: none"> MTG/Non-MTG – assigns MTG Confirmation, MTG Variance, MTG Special Services, Non-MTG Over \$1000 and Non-MTG Under or = \$1000 PARs to appropriate reviewers. Medication – assigns Medication PARs to appropriate reviewers. DME – assigns DME PARs to appropriate reviewers. • Changes delegated reviewers due to situations such as a delegate being absent from work or a change in a delegate's role within the organization. |
| <p>Level 1 Reviewer</p> <p><i>There can be a Level 1 Reviewer for each of the seven PAR types. Level 1 reviews may be assigned to an MRO for any PAR and a PBM for Medication PARs.</i></p> | <ul style="list-style-type: none"> • Reviews Level 1 PAR requests as designated and assigned. |
| <p>Level 2 Reviewer</p> <p><i>There must be a Level 2 Reviewer, the payer's physician, if an MRO is not designated for that Level 2 PAR type.</i></p> | <ul style="list-style-type: none"> • Reviews Level 2 PAR requests as designated and assigned. |

| PBM Roles | Responsibilities |
|---|--|
| <p>Online (User) Administrator</p> <p><i>PBMs must assign someone as an Online (User) Administrator.</i></p> | <ul style="list-style-type: none"> • Request access for users in the system. • Assigns users to Workload Administrator and Level 1 Reviewer roles for Medication PARs. • Update user information as necessary. • Removes users who should no longer have access to the system. |

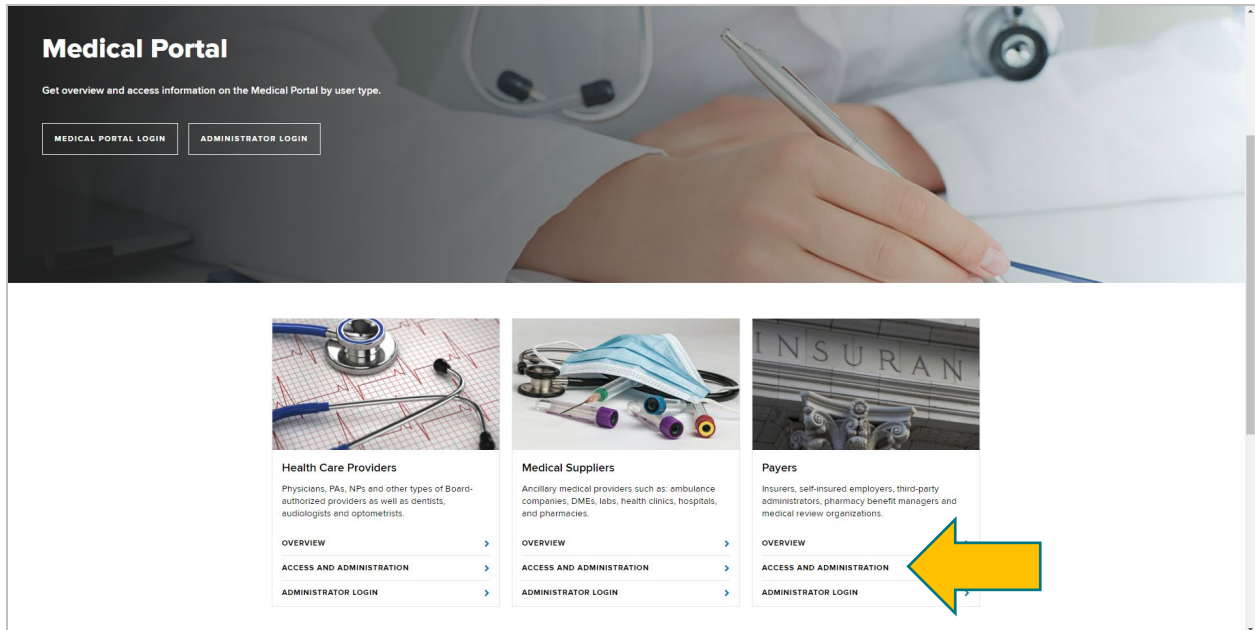
| | |
|-------------------------------|---|
| Workload Administrator | <ul style="list-style-type: none"> • Receives and assigns all Medication PARs. • Change delegated reviewers due to situations such as a delegate being absent from work or a change in a delegate's role within the organization. |
| Level 1 Reviewer | <ul style="list-style-type: none"> • Review Level 1 Medication PARs as designated and assigned. |

| MRO Roles | Responsibilities |
|--|--|
| Online (User) Administrator <i>MROs must assign someone as an Online (User) Administrator.</i> | <ul style="list-style-type: none"> • Requests access for users in the system. • Assigns users to Workload Administrator, Level 1, and Level 2 Reviewer roles. • Updates user information as necessary. • Removes users who should no longer have access to the system. |
| Workload Administrator | <ul style="list-style-type: none"> • The workload administrator will receive and assign all submitted PARs. • Change delegated reviewers due to situations such as a delegate being absent from work or a change in a delegate's role within the organization. |
| Level 1 Reviewer <i>Level 1 Reviewers can be assigned to any PAR type.</i> | <ul style="list-style-type: none"> • Review Level 1 requests as designated and assigned. |
| Level 2 Reviewer <i>There must be a Level 2 Reviewer for each PAR type</i> | <ul style="list-style-type: none"> • Review Level 2 requests as designated and assigned. |

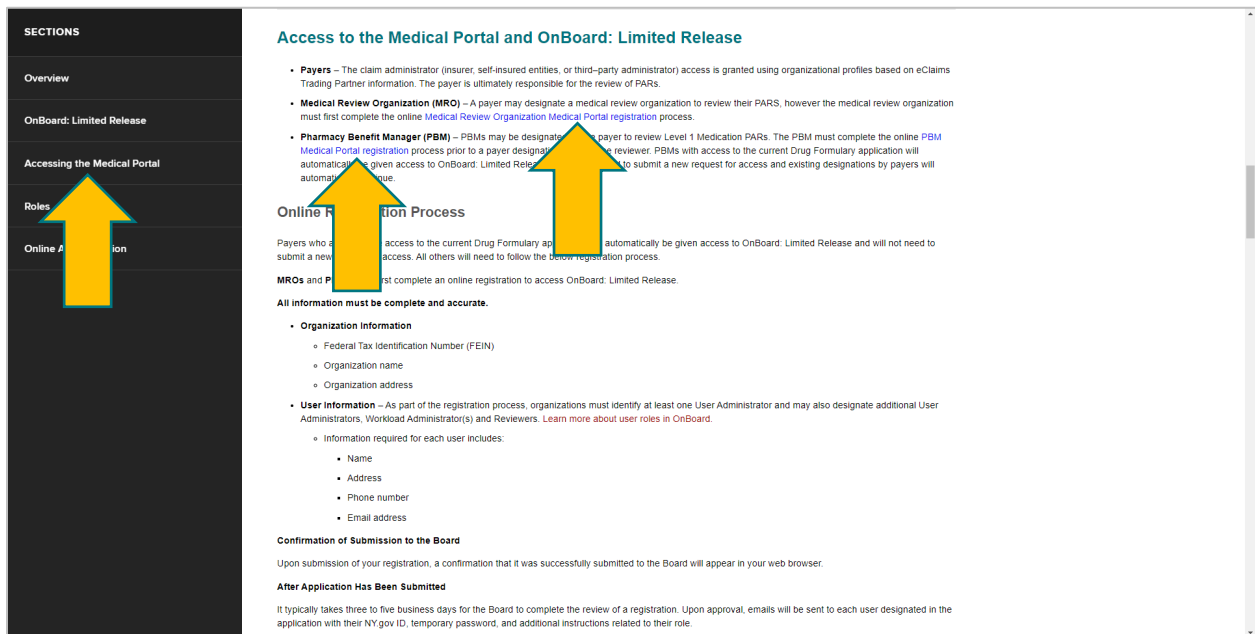
IV. Requesting access to the Medical Portal - PBMs and MROs

Reminder – payers and PBMs who already have access to the Medical Portal for Drug Formulary prior authorizations are automatically registered for OnBoard. A second registration is not required.

1. Visit wcb.ny.gov/medicalportal.
2. Select [Access and Administration](#) under Payers.



3. Select [Accessing the Medical Portal](#).
4. Select either [PBM Medical Portal Registration](#) or [Medical Review Organization Medical Portal Registration](#).



5. Enter the required information. *Please note – you cannot save work. Completing the online form must be done in one sitting.*

Organization information required: Federal Tax Identification Number (FEIN), organization name and organization address.

User information: Organizations must first identify at least one **User Administrator** and may also designate additional **User Administrators**, **Workload Administrator(s)**, and **Reviewers** for various levels. The following information is required for each user: name, address, phone number and email address. See [section IV](#) for a definition of the various role types.

Pharmacy Benefit Managers Registration

1. Begin by entering PBM information and select the right arrow or the **User Information** tab to continue.

Workers' Compensation Board

Workers Employers Health Care Providers Payers Representatives Forms Locations

Search WCB

Language Assistance (877) 632-6966 Language Access Policy Español Pусский Polski 中文 Italiano বাংলা ಕನ್ನಡ தமிழ்

Online Registration

Medical Portal - Pharmacy Benefits Manager - Initial Registration

PBM Information **User Information**

*** Pharmacy Benefit Manager's Information:**

*FEIN: 12-3456789

*Name: PBM Name

Address:

*Address Line 1: First line of address Address Line 2: Suite, room or floor

*City: City of organization *State: New York *Zip Code: 12345-6789

Cancel Registration

www.wcb.ny.gov/content/main/Forms.jsp

2. Select the role type checkbox for the user being entered and input the required information. If your organization has not registered an Online (User) Administrator, register their information first. If you are registering more than one user, select **Add User**. The Online (User) Administrator may add additional reviewers and administrators through Medical Portal Administration after being sent their User ID and Password. Select the user role link to learn more about that role type.

Online Registration

Medical Portal - Pharmacy Benefits Manager - Initial Registration

PBM Information **User Information**

User's Information:

Portal Role:

Work Load Administrator - Will Assign Tasks - Workload Admin Role

Reviewer - Will Respond to Assigned Tasks - Reviewer Role

User Administration:

Will Manage Work Load Administrators and Reviewers for this PBM - User Admin Role

Name: First Name M.I. Last Name: Smith

Address Line 1: Avenue Address Line 2: Suite, room or floor

*City: CityName *State: New York *Zip Code: 13245

*Area Code: 555 Phone Number: 555-5555 Extension: 555

*Email: PBMemail@email.com

Add User **Remove User**

Cancel Registration

3. Continue adding in user information for any user type. When all information is entered, select **Submit**.

The screenshot shows a registration form for the Workers' Compensation Board. It includes fields for personal information (Name, Address Line 1 & 2, City, State, Zip Code, Area Code, Phone Number, Extensions, Email) and a 'Portal Role' section with two options: 'Work Lead Administrator' and 'Reviewer'. Below this is a 'User Administration' section with a checkbox to manage administrators and reviewers, and another set of fields for user details (First Name, Last Name, Address Line 1 & 2, City, State, Zip Code, Area Code, Phone Number, Ext, Email). At the bottom left, there are 'Add User' and 'Remove User' buttons, and a 'Submit' button. At the bottom right, there is a 'Cancel Registration' button. Two yellow arrows are overlaid on the form: one points to the 'Portal Role' section, and the other points to the 'Submit' button.

4. After selecting **Submit**, the Registration Complete webpage will show.

The screenshot shows the 'Registration Complete' webpage. At the top, there is a navigation bar with the Workers' Compensation Board logo and links for Services, News, Government, and Local. Below the navigation bar, there is a search bar and a language assistance section. The main content area features the heading 'On-line Registration' and a sub-heading 'Registration Complete'. The text states: 'Your registration has been received for: Online Registration. Your Registration Confirmation Number is: 598150. Please refer to this number if you need to contact the Workers' Compensation Board regarding this registration.' Below this, there are sections for 'What's Next?' and 'Questions?'. The 'What's Next?' section includes bullet points: 'If any additional information is required a NY.gov ID (Workers' Compensation Board employees will contact you.)' and 'Registrations will be processed in the order they are received...'. The 'Questions?' section includes bullet points: 'e-mail: WCBCustomerSupport@wcb.ny.gov OR' and 'Call the Customer Support at (949) 337-3300. Monday - Friday 9:30am - 4:30pm'. Below the 'Questions?' section, there is a 'Return to WCB Home' button. At the bottom, there is a footer section with the Workers' Compensation Board logo and a grid of links for 'About WCB', 'Forms & Services', 'Communication', and 'Website'. The 'CONNECT WITH US' section is also visible at the bottom.

It may take up to three to five business days for the Board to complete the review of your registration. Once approved, emails will be sent to each individual user designated in the registration with their NY.gov ID and temporary password to access the system, along with additional instructions related to their role(s)

Medical Review Organizations Registration

1. Begin my entering MRO information and select **Next** or the **User Information** tab.

Workers' Compensation Board

Workers Employers Health Care Providers Payers Representatives Forms Locations

Search WCB

Language Assistance: (877) 632-6296 | Language Access Policy | Español | Pycckий | Polski | 中文 | Italiano | Kreyol ayisyen | 日本語

Online Registration

Medical Portal - MRO - Initial Registration

Select Submit after completing the mandatory fields on both the MRO and User information tabs

MRO Information **User Information**

*** MRO's Information:**

*FEIN:
12-3456789

*Name:
MRO Name

Address:

*Address Line 1: _____ Line 2: _____
First line of address Suite, room or floor

*City: _____ *State: New York *Zip Code: 12345-6789
City of organization

Cancel Registration

Next

2. Select the role type checkbox for the user being entered and input the required information. If your organization has not registered an Online (User) Administrator, register their information first. If you are registering more than one user, select **Add User**. The Online (User) Administrator may add additional reviewers and administrators through Medical Portal Administration after being sent their User ID and Password.

Medical Portal - MRO - Initial Registration

Select Submit after completing the mandatory fields on both the MRO and User Information tabs

MRO Information **User Information**

User's Information:

Portal Role:

Work Load Administrator - Will Assign Tasks - Workload Admin Role
 Level One Reviewer - Will Respond to Assigned Tasks - Reviewer Roles
 Level Two Reviewer - Will Respond to Assigned Tasks - Reviewer Roles

User Administration:

Will Manage Work Load Administrators and Reviewers for this MRO - User Admin Role

*First Name: _____ MI: _____ *Last Name: Smith

*Address Line 1: _____ Address Line 2: _____
Rock Avenue Suite, room or floor

*City: _____ *State: New York *Zip Code: 12345

*Area Code: 518 Phone Number: 555-5555 Extension: 555

*Email: UserAdmin@mail.com

Add User Remove User

Cancel Registration

Previous

3. Continue adding in user information for any user type. Select the user role link to learn more about that role type. When all information is entered, select **Submit**.

The screenshot shows a registration form with the following fields and sections:

- Address Line 1:** 100 Dock Avenue
- Address Line 2:** Suite, room or floor
- City:** New York
- State:** New York
- Zip Code:** 12345
- Area Code:** 518
- Phone Number:** 555-5555
- Extension:** 555
- Email:** UserAdmin@mail.com
- Portal Role:**
 - Work Load Administrator - Will Assign Tasks - More Info
 - Level One Reviewer - Will Respond to Assigned Tasks - More Info
 - Level Two Reviewer - Will Respond to Assigned Tasks - More Info
- User Administration:**
 - Will Manage Work Load Administrators and Reviewers for this MDO - More Info
- First Name:** First Name
- M.I.:**
- Last Name:** Last Name
- Address Line 1:** First line of address
- Address Line 2:** Suite, room or floor
- City:** New York
- State:** New York
- Zip Code:**
- Area Code:** 123
- Phone Number:** 123-4567
- Ext.:**
- Email:** rname@example.com
- Buttons:** Add User, Remove User, Submit, Cancel Registration

4. After selecting **Submit**, the Registration Complete webpage will show.

The screenshot shows the 'Registration Complete' webpage with the following content:

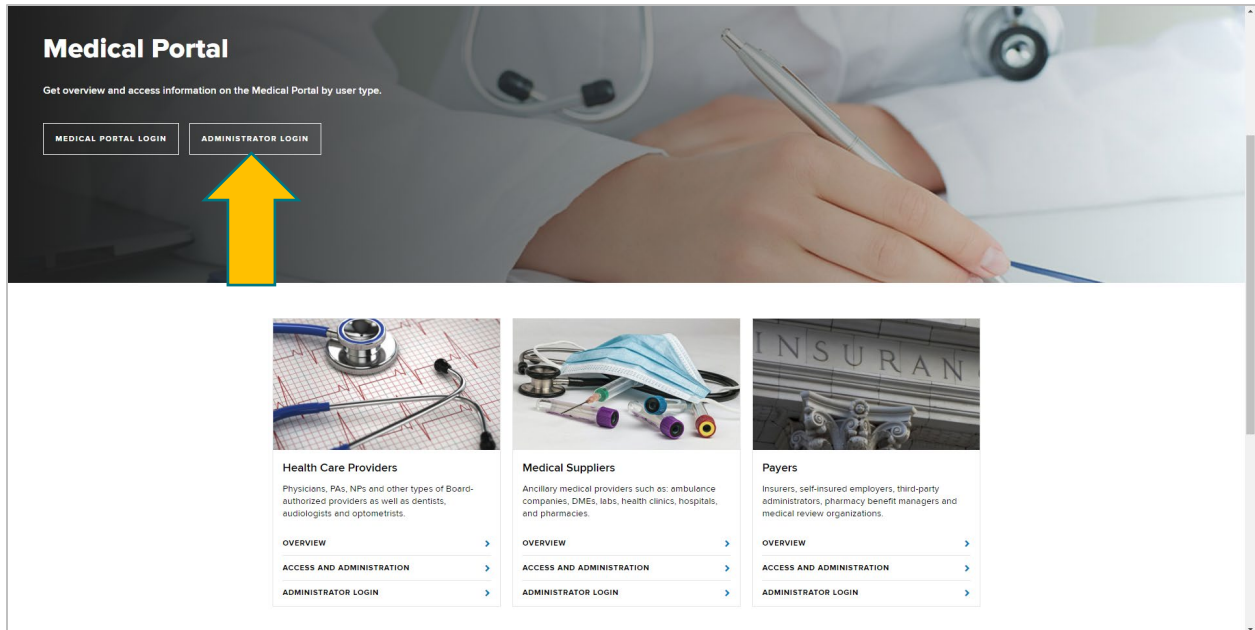
- Header:** Workers' Compensation Board navigation menu (Workers, Employers, Health Care Providers, Payers, Representatives, Forms, Locations).
- Search:** Search WCB
- Language Assistance:** (877) 632-4896, Language Access Policy, Español, Pycckий, Polski, 繁體中文, Italiano, Кreyòl ayisyen.
- Section:** On-line Registration
- Registration Complete:**
 - Your registration has been received for: Online Registration
 - Your Registration Confirmation Number is: **598111**
 - Please refer to this number if you need to contact the Workers' Compensation Board regarding this registration.
- What's Next?**
 - If any additional information is required a NY State Workers' Compensation Board employee will contact you.
 - Registrations will be processed in the order they are received.
- Questions?**
 - If you have any questions regarding this registration you can either:
 - e-mail WCB.CustomerSupport@wcb.ny.gov OR
 - Call the Customer Support at (844) 337-6305, Monday - Friday 8:30am - 4:30pm
 - Please refer to the Confirmation Number given above when you contact us.
- Return to WCB Home** button.
- Workers' Compensation Board** footer with links:
 - About WCB, Contact Us, Locations, Bulletins & Subject Numbers, Laws & Regulations, Freedom of Information Law (FOIL)
 - Forms & Services: Forms, Online Services, Online Services Availability, Technical Support, Get Adobe Reader, Register to Vote, Become an Organ Donor - Enroll Today!
 - Communication: Board Announcements, Upcoming Events, Publications, Upcoming Webinars
 - Website: Privacy Policy, Accessibility, Glossary of Terms, Using this Site
- CONNECT WITH US** section.

It may take up to three to five business days for the Board to complete the review of your registration. Once approved, emails will be sent to each individual user designated in the application with their NY.gov ID and temporary password to access the system, along with additional instructions related to their role(s).

V. Managing roles and notifications

The Online (User) Administrator for Payers, PBMs and MROs can manage their organization email notifications and assign users to roles. They will log in using their Medical Portal NY.gov ID and password.

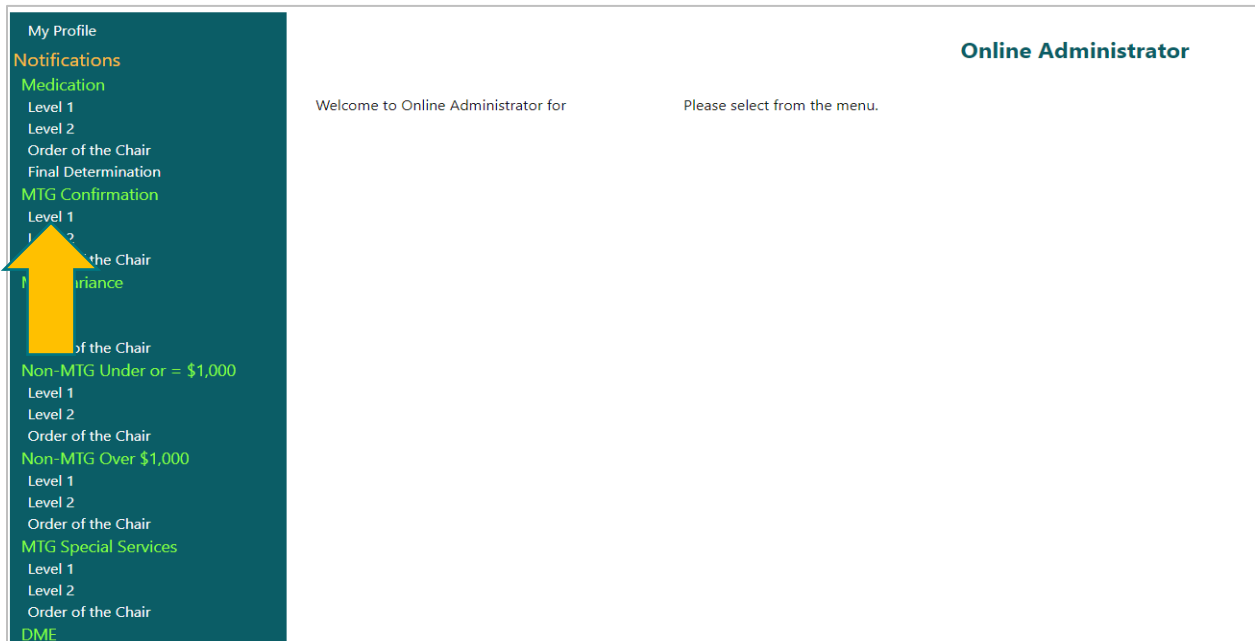
1. Visit wcb.ny.gov/medicalportal.
2. Select Administrator Login.



3. Begin assigning notification contacts and users to the various roles in the dashboard.

Managing organization email notifications

1. Under **Notifications**, select one of the roles listed under a PAR type.



2. Add or update current email in **Email Should Be** boxes and select **Update [Role] Organization** at the bottom of the page. Note - the top row has an **Apply to All** feature when multiple organizations are listed.

Workers' Compensation Board | Workers | Employers | Health Care Providers | Payers | Representatives | Forms | Locations

Search WCB | Language Assistance: (877) 632-4996 | Language Access Policy | Español | Pycckii | Polski | 中文 | Italiano | 한국어 | বাংলা

Online Administrator

Contact Information for MTG Confirmation Level 1

Claim Administrators for

| Organization | ID | Current Email | Email Should Be | Name of MRO |
|---|------------|------------------------|----------------------|----------------------|
| Apply To ALL | | | <input type="text"/> | <input type="text"/> |
| ACE American Insurance Co. | W019004 | newconfirm2@wcb.ny.gov | <input type="text"/> | testURAC4 |
| ACE Fire Underwriters Insurance Company | W011001 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| ACE Property and Casualty Insurance Company | W012009 | confirm1@wcb.ny.gov | <input type="text"/> | URAC_6 |
| AGCS MARINE INSURANCE COMPANY | W119259 | confirm1@wcb.ny.gov | <input type="text"/> | URAC_8 |
| [REDACTED] | [REDACTED] | [REDACTED] | <input type="text"/> | testURAC4 |
| AIG Property Casualty Company | W045009 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| AIU Insurance Company | W015754 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| ARCH INSURANCE CO | W087381 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Acadia Insurance Company | W010250 | confirm1@wcb.ny.gov | <input type="text"/> | ... |



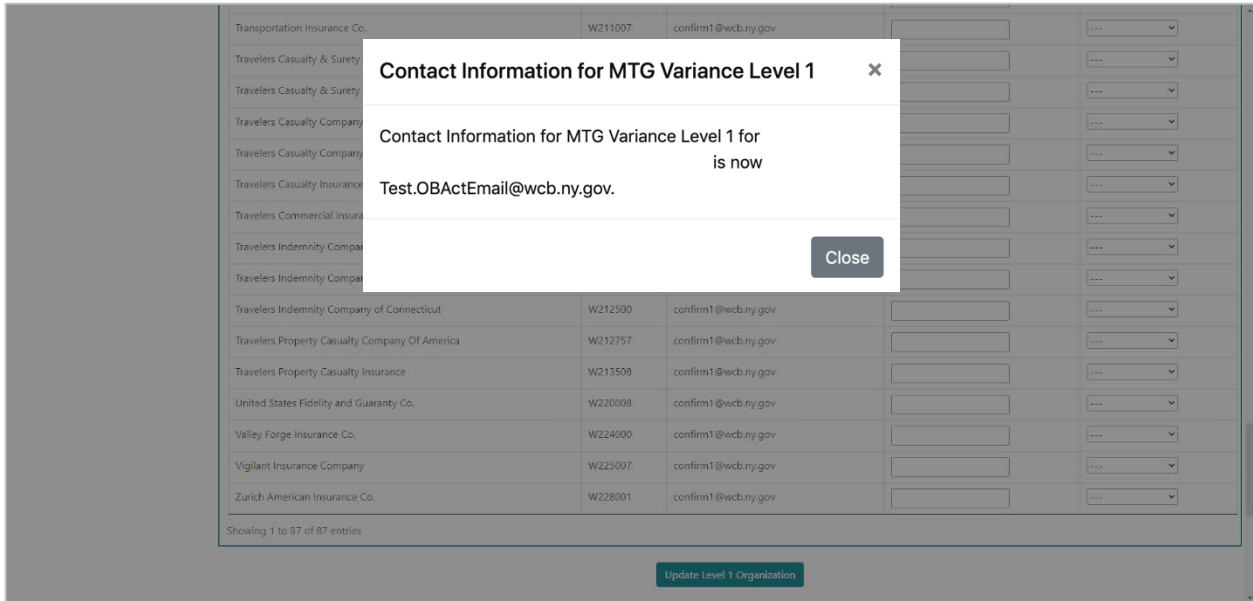
| | | | | |
|---|---------|---------------------|----------------------|-----|
| Transportation Insurance Co. | W211007 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Travelers Casualty & Surety Company | W010003 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Travelers Casualty & Surety Company of America | W010631 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Travelers Casualty Company | W039507 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Travelers Casualty Company of Connecticut | W010698 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Travelers Casualty Insurance Company Of America | W010508 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Travelers Commercial Insurance Co. | W010755 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Travelers Indemnity Company | W212005 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Travelers Indemnity Company of America | W212252 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Travelers Indemnity Company of Connecticut | W212500 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Travelers Property Casualty Company Of America | W212757 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Travelers Property Casualty Insurance | W213508 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| United States Fidelity and Guaranty Co. | W220008 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Valley Forge Insurance Co. | W224000 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Vigilant Insurance Company | W225007 | confirm1@wcb.ny.gov | <input type="text"/> | ... |
| Zurich American Insurance Co. | W228001 | confirm1@wcb.ny.gov | <input type="text"/> | ... |

Showing 1 to 87 of 87 entries

Update Level 1 Organization

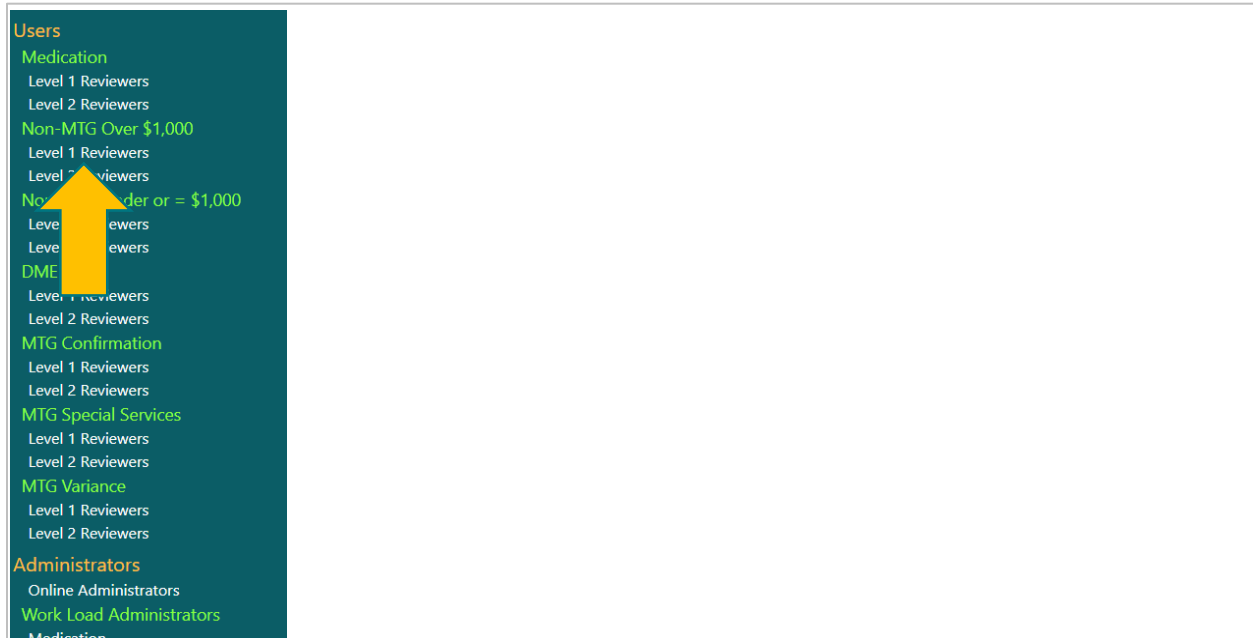


3. A pop up will appear, confirming any changes. Select **Close**, and the changes will be made.



Managing user roles

1. Select a PAR type under **Users**.



2. The first box shows users who are assigned to the role of the selected PAR type. These users can be assigned PAR reviews in OnBoard: Limited Release. To remove a designated user, select **Remove** in the user's row.

- Medication
- Level 1
- Level 2
- Order of the Chair
- Final Determination
- MTG Confirmation
- Level 1
- Level 2
- Order of the Chair
- MTG Variance
- Level 1
- Level 2
- Order of the Chair
- Non-MTG Under or = \$1,000
- Level 1
- Level 2
- Order of the Chair
- Non-MTG Over \$1,000
- Level 1
- Level 2
- Order of the Chair
- MTG Special Services
- Level 1
- Level 2
- Order of the Chair
- DME
- Level 1
- Level 2
- Order of the Chair
- Users
- Medication
- Level 1 Reviewers
- Level 2 Reviewers
- Non-MTG Over \$1,000
- Level 1 Reviewers
- Level 2 Reviewers
- Non-MTG Under or = \$1,000
- Level 1 Reviewers
- Level 2 Reviewers
- DME
- Level 1 Reviewers
- Level 2 Reviewers
- MTG Confirmation
- Level 1 Reviewers
- Level 2 Reviewers

Non-MTG Over \$1,000 Level 1 Reviewer

Below is a list of users who **have** a Non-MTG Over \$1,000 Level 1 Reviewer designation for

Show 5 entries Search:

| First Name | Last Name | Phone # | eMail | Remove | Modify |
|-------------|-----------|----------------|--------------|--------|--------|
| Michael | | | | Remove | Modify |
| Tina | | | | Remove | Modify |
| NonMTGieve1 | Overonek | (518) 122-1222 | | Remove | Modify |
| ellen | ac | (555) 569-5362 | ellen2@na.na | Remove | Modify |

Showing 1 to 4 of 4 entries Previous 1 Next

Below is a list of users who **DON'T have** a Non-MTG Over \$1,000 Level 1 Reviewer designation for

Show 5 entries Search:

| First Name | Last Name | Phone # | eMail | Add |
|------------|-----------------|----------------|-------------|-----|
| Ellen | Aa | (555) 853-6695 | ellen@na.na | Add |
| Eric | | | | Add |
| Travel | ConfFourleveOne | | | Add |
| Trav | DMEFourleveOne | | | Add |
| Michael | Hunter-Test | | | Add |

Showing 1 to 5 of 42 entries Previous 1 2 3 4 5 ... 9 Next

Need to add someone new?

[Add New User](#)

3. Modify designated user information by selecting **Modify** in that user's row.

- Medication
- Level 1
- Level 2
- Order of the Chair
- Final Determination
- MTG Confirmation
- Level 1
- Level 2
- Order of the Chair
- MTG Variance
- Level 1
- Level 2
- Order of the Chair
- Non-MTG Under or = \$1,000
- Level 1
- Level 2
- Order of the Chair
- Non-MTG Over \$1,000
- Level 1
- Level 2
- Order of the Chair
- MTG Special Services
- Level 1
- Level 2
- Order of the Chair
- DME
- Level 1
- Level 2
- Order of the Chair
- Users
- Medication
- Level 1 Reviewers
- Level 2 Reviewers
- Non-MTG Over \$1,000
- Level 1 Reviewers
- Level 2 Reviewers
- Non-MTG Under or = \$1,000
- Level 1 Reviewers
- Level 2 Reviewers
- DME
- Level 1 Reviewers
- Level 2 Reviewers
- MTG Confirmation
- Level 1 Reviewers
- Level 2 Reviewers

Non-MTG Over \$1,000 Level 1 Reviewer

Below is a list of users who **have** a Non-MTG Over \$1,000 Level 1 Reviewer designation for

Show 5 entries Search:

| First Name | Last Name | Phone # | eMail | Remove | Modify |
|-------------|-----------|----------------|--------------|--------|--------|
| Michael | | | | Remove | Modify |
| Tina | | | | Remove | Modify |
| NonMTGieve1 | Overonek | (518) 122-1222 | | Remove | Modify |
| ellen | ac | (555) 569-5362 | ellen2@na.na | Remove | Modify |

Showing 1 to 4 of 4 entries Previous 1 Next

Below is a list of users who **DON'T have** a Non-MTG Over \$1,000 Level 1 Reviewer designation for

Show 5 entries Search:

| First Name | Last Name | Phone # | eMail | Add |
|------------|-----------------|----------------|-------------|-----|
| Ellen | Aa | (555) 853-6695 | ellen@na.na | Add |
| Eric | | | | Add |
| Travel | ConfFourleveOne | | | Add |
| Trav | DMEFourleveOne | | | Add |
| Michael | Hunter-Test | | | Add |

Showing 1 to 5 of 42 entries Previous 1 2 3 4 5 ... 9 Next

Need to add someone new?

[Add New User](#)

4. The second box features registered users in the system who have not been designated to the role of the selected PAR type. Select **Add** to designate a user into a selected PAR type role.

Non-MTG Over \$1,000 Level 1 Reviewer
Below is a list of users who **have** a Non-MTG Over \$1,000 Level 1 Reviewer designation for

| First Name | Last Name | Phone # | eMail | Remove | Modify |
|--------------|-----------|----------------|-------------|--------|--------|
| Michael | | | | Remove | Modify |
| Tina | | | | Remove | Modify |
| NonMTGlevel1 | Overonek | (518) 122-1222 | | Remove | Modify |
| ellen | ac | (555) 569-5362 | ellen@na.na | Remove | Modify |

Showing 1 to 4 of 4 entries

Below is a list of users who **DON'T** have a Non-MTG Over \$1,000 Level 1 Reviewer designation for **Travelers Group**.

| First Name | Last Name | Phone # | eMail | Add |
|------------|-----------------|----------------|-------------|-----|
| Ellen | Aa | (555) 853-6695 | ellen@na.na | Add |
| Eric | | | | |
| Travel | ConfFourleveOne | | | |
| Trav | DMEFourleveOne | | | |
| Michael | Hunter-Test | | | |

Showing 1 to 5 of 42 entries

Need to add someone new?
[Add New User](#)

- After removing or modifying a user from box one or adding a user from box two, a pop up will appear confirming the change. After selecting **Close** on this pop up, the change will be made instantly.

Non-MTG Over \$1,000 Level 1 Reviewer [X]

been removed from Non-MTG Over \$1,000 Level 1 Reviewer for

Close

- If you do not see the intended user assigned in the tables, you can request for a new user to be added. Select **Add New User** to create a new user role for selected PAR type.

- Medication
- Level 1
- Level 2
- Order of the Chair
- Final Determination
- MTG Confirmation
- Level 1
- Level 2
- Order of the Chair
- MTG Variance
- Level 1
- Level 2
- Order of the Chair
- Non-MTG Under or = \$1,000
- Level 1
- Level 2
- Order of the Chair
- Non-MTG Over \$1,000
- Level 1
- Level 2
- Order of the Chair
- MTG Special Services
- Level 1
- Level 2
- Order of the Chair
- DME
- Level 1
- Level 2
- Order of the Chair
- Users
- Medication
- Level 1 Reviewers
- Level 2 Reviewers
- Non-MTG Over \$1,000
- Level 1 Reviewers
- Level 2 Reviewers
- Non-MTG Under or = \$1,000
- Level 1 Reviewers
- Level 2 Reviewers
- DME
- Level 1 Reviewers
- Level 2 Reviewers
- MTG Confirmation
- Level 1 Reviewers
- Level 2 Reviewers

Non-MTG Over \$1,000 Level 1 Reviewer

Below is a list of users who **have** a Non-MTG Over \$1,000 Level 1 Reviewer designation for

Show entries Search:

| First Name | Last Name | Phone # | eMail | Remove | Modify |
|-------------|-----------|----------------|--------------|--|---|
| Michael | | | | Remove | Modify |
| Tina | | | | Remove | Modify |
| NonMTGieve1 | Overonek | (518) 122-1222 | | Remove | Modify |
| ellen | ac | (555) 569-5362 | ellen2@na.na | Remove | Modify |

Showing 1 to 4 of 4 entries Previous Next

Below is a list of users who **DON'T** have a Non-MTG Over \$1,000 Level 1 Reviewer designation for

Show entries Search:

| First Name | Last Name | Phone # | eMail | Add |
|------------|-----------------|----------------|-------------|---|
| Ellen | Aa | (555) 853-6695 | ellen@na.na | Add |
| Eric | | | | Add |
| Travel | ConfFourleveOne | | | Add |
| Trav | DMEFourleveOne | | | Add |
| Michael | Hunter-Test | | | Add |

Showing 1 to 5 of 42 entries Previous 2 3 4 5 ... 9 Next

Need to add someone new?

Add New User



7. Enter the following user information then select **Continue** – first and last name, address, phone number and email address.

Add New User

*First Name: M.I.: *Last Name:

*Address Line 1: Address Line 2:

*City: *State: *Zip Code:

*Area Code: *Phone Number: ext:

*E-mail Address:

Comments:

Continue Cancel Add

8. A pop up will appear, confirming the new user has been submitted for processing. This may take up to three to five days for the registration to be reviewed and accepted by the Board. That user will receive their Medical Portal NY.gov ID and temporary password to the email the administrator included for the user on the registration. Once the user is registered, they can be designated for PAR reviews, perform Workload Administrator duties, or administer users depending on the role the user was added as.

The screenshot shows a user management interface with a modal dialog box. The modal is titled "Non-MTG Over \$1,000 Level 1 Reviewer" and contains the following text: "A user ID and password will be generated for [redacted] to access OnBoard through the Medical Portal. Requests for access are processed in the order in which they are received." There is a "Close" button at the bottom right of the modal. The background interface is dimmed and shows two tables. The top table is titled "Non-MTG Over \$1,000 Level 1 Reviewer" and lists users with "Remove" and "Modify" buttons. The bottom table is titled "Need to add someone new?" and lists users with "Add" buttons. A sidebar on the left contains a navigation menu with categories like "Medication", "Users", and "DME".

We encourage you to share this guide with other users in your organization or the organizations you work with. Please contact the Board if you need assistance.

VI. Need help?

Medical Portal access for payers: wcb.ny.gov/medicalportal

General registration questions: Customer Service (877) 632-4996

Technical assistance: WCBCustomerSupport@wcb.ny.gov

OnBoard Webpage: wcb.ny.gov/onboard

Email OnBoard: OnBoard@wcb.ny.gov