Secure Provider Web Portal Help Guide

How to Sign Up for a HUSKY Health Secure Provider Portal Account

Enter the website URL: https://portal.ct.gov/husky to access the public HUSKY Health Homepage, and click on "**Information for Providers**."

You are now on the public HUSKY Health provider homepage.

Select the "**Provider Login**" button to access the secure HUSKY Health provider web portal.

HUSKY Health Secure Provider Login:

For existing users, enter your "**username**" and "**password**" and click "**Login**."

If you are an existing user and you have forgotten your username or password, choose "**click here**" to retrieve your information via the email address associated with your account.

If you are a new user, choose "**Click here to create your user account.**"

New User:

Choose the "**Agree**" button at the bottom of the License Agreement page to proceed to Step 2.

STEP 2 OF 6: PERSONAL INFORMATION

Note

Fields indicated with a * are required.

Enter the official name of the user signing up for the account.

Address should be the practice/facility address.

*First Name:

*Last Name:

*Address Line 1:

Line 2:

*City:

*State:
Please Select

*Zip:

*Country:
United States

*Contact Phone:

Department:

*Practice Name:

Create a user account. When completed, choose **"Next."**

The "**Personal Information**" fields reflect the information of the user that will be logging into the website. This is not necessarily the provider.

The "**First Name**" and "**Last Name**" fields are required to proceed. This is the person completing the user signup.

"**Address Line 1**" is required, but "**Address Line 2**" is optional. Please list your office location.

"**City**," "**State**," and "**Zip**" are required fields. "**Country**" is also required, but is defaulted to "United States."

"**Contact Phone**" is required and must be in ###-###-#### format.

"**Department**" is not a required field to proceed, however "**Practice Name**" is required.

To view the list of providers associated by Tax ID, first enter a valid Provider Tax ID Number (TIN) and click **"Search."** Newly enrolled CMAP providers will appear within 72 hours from the time that the enrollment information is received and processed from DXC.

Choose the provider(s) you would like to add to your account by clicking in the box next to their name(s). Alternatively, clicking the "**Select All Providers**" button selects all providers associated with the Tax ID.

Confirm the selected providers by clicking **"Add Providers."**

A provider confirmation page will be displayed showing the selected providers. Review the list to ensure all appropriate providers have been selected. Once reviewed, click "**Add Providers."**

You will see the providers you have chosen to add to your account listed beneath "**Added Providers**."

You can add another provider by entering another Tax ID and repeating the steps outlined above, or click "**Next**" to continue.

Identify the role of the person who is completing the sign-up process by selecting the appropriate value from the drop-down. Then click "**Next**" to continue.

How to Create a "Username" and "Password"

The following fields must all be completed:

The "**Username**" will become the Account ID that is used to identify this Provider Portal Account.

The "**Email Address**" is the email of the person setting up the account.

"**Password**" must be a minimum of 8 characters, contain at least 1 letter, 1 digit, and 1 special character*.

*Special characters that are allowed: ! $ ^ * ( ) _ - = [ ] { } \ / , .? The username should not be part of the password.

"**Secret Question**" is a drop-down list that is associated with a "**Secret Answer**" for password recovery.

Click "**Next**" to continue.

NOTE

If you are a primary care provider or a usual source of care provider, you can request access to view reports on your attributed members by clicking on the "**Patient Reports**" tab on the "**Home Page**," and completing the online registration form.

STEP 6 OF 6: VERIFY

Note

Please review the information provided. If correct, click "Finish". If not, click "Previous" to make changes.

Username:

First Name:
Last Name:
E-Mail Address:
Address:

Phone:
Practice Name:

TIN:

Previous   Finish   Cancel

Verify your information is correct and click "**Finish"** to complete the signup process for your account setup. At this point, you have successfully set up your user account. If the information is incorrect, click "Previous" and correct your information.

If you should have any questions or concerns completing this information, please contact the Web Support Help Desk at 877.606.5172 during the hours of 9:00 a.m. - 4:00 p.m. EST, Monday through Friday.