



Registration, Access and Administration for Health Care Providers

Table of contents

- I. [Overview](#)
- II. [Medical Portal access: who has it, and who needs it?](#)
- III. [Role types](#)
- IV. [Requesting access to the Medical Portal for health care providers](#)
- V. [Managing your profile and Medical Portal delegates for health care providers](#)
- VI. [Need help?](#)

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
Health care providers with Medical Portal access	Providers who already have access to the Medical Portal are automatically registered for OnBoard.
Health care providers without Medical Portal access	If your specialty is an acupuncturist, chiropractor, licensed clinical social worker, physician, physician assistant, nurse practitioner, podiatrist, psychologist, physical therapist, occupational therapist, dentist, audiologist, or optometrist, you will follow the health care provider registration instructions.
Medical suppliers	If your specialty is not an acupuncturist, chiropractor, licensed clinical social worker, physician, physician assistant, nurse practitioner, podiatrist, psychologist, physical therapist, occupational therapist, dentist, audiologist, or optometrist, you will follow

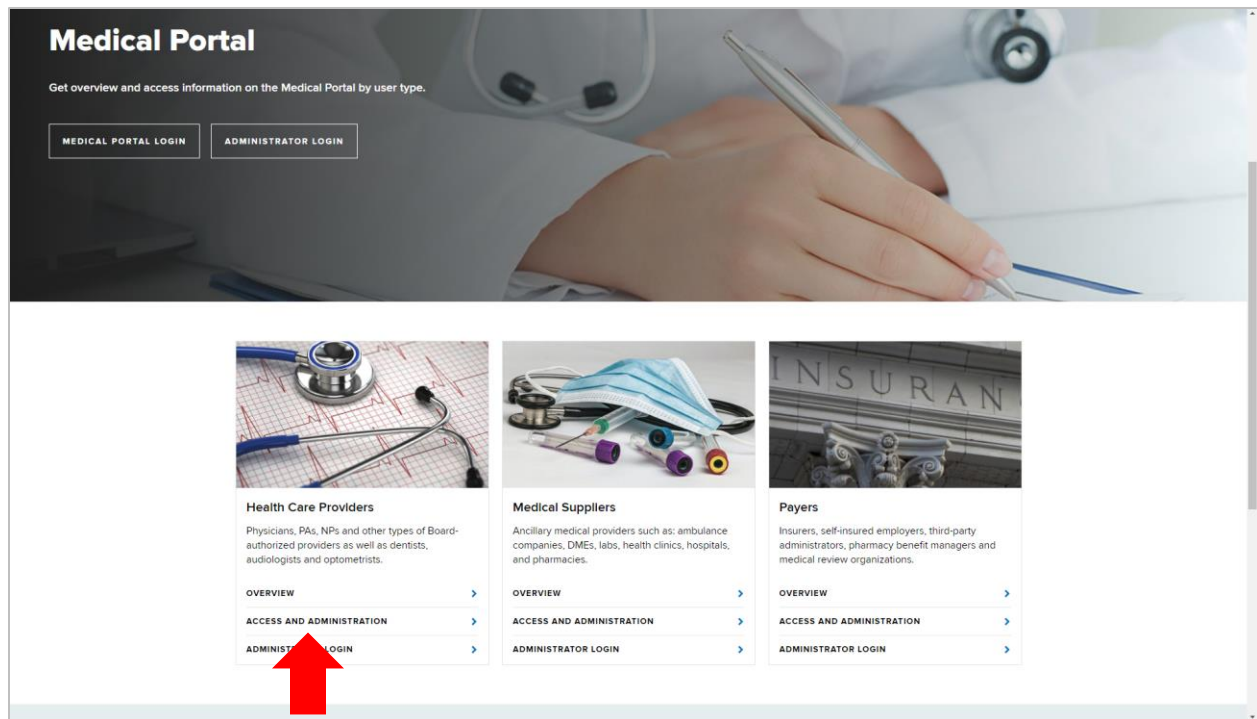
	the medical supplier registration instructions.
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III. Role Types

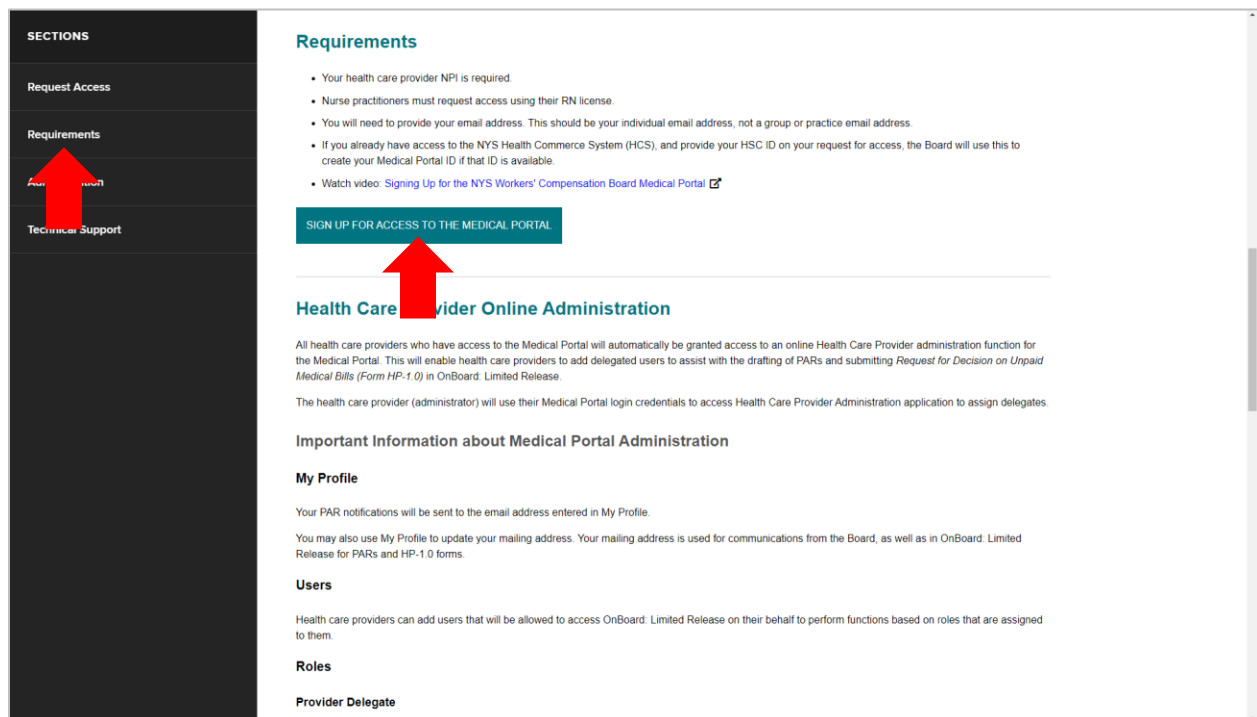
Health Care Provider Roles	Responsibilities
Provider <i>Treating physician, nurse practitioner, chiropractor, etc.</i>	<ul style="list-style-type: none"> Assigns provider delegate and billing delegate users who can draft PARs and draft/submit HP-1.0s on the provider's behalf. Required to submit PAR in OnBoard: Limited Release.
Provider Delegate <i>Medical Portal users are assigned by the provider as a provider delegate</i>	<ul style="list-style-type: none"> Drafts PARs, which must be reviewed and submitted by the health care provider. Drafts PAR escalations for provider review and submission. Responds to insurer requests for information (must be designated by the health care provider from within OnBoard: Limited Release). Drafts and submits <i>Request for Decision on Unpaid Medical Bills (Form HP-1.0)</i>.
Billing Delegate <i>Medical Portal users are assigned by the provider as a billing delegate</i>	<ul style="list-style-type: none"> Draft and submit <i>Requests for Decision on Unpaid Medical Bill(s) (Form HP-1.0)</i> only. If the provider uses a billing agent to submit their medical bills, the provider will need to set up user accounts for any employee of the billing agent who will be allowed to submit <i>Form HP-1.0</i> on behalf of the provider.

IV. Requesting access to the Medical Portal for health care providers

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



3. Select [Requirements](#) in the left column. Then select [Sign Up for Access to the Medical Portal](#).



4. Review the information on this page. Then select **Continue**.

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Online Registrations

Medical Portal Access

Health care providers who are interested in using the Board's Medical Portal must sign up for access.

IMPORTANT! Before proceeding, please note:

- Health care providers should use their individual email address (not a group or shared email address) when registering. This same email address should be used to apply for authorization and to access required training through the learning management system, CourseMill. The Workers' Compensation Board will use this same email address to verify the health care provider has taken the required training prior to approving the request to become a Board-authorized provider.
- The health care provider's individual National Provider Identification (NPI) number is required on the registration form.
- Nurse practitioners must use their RN license number when applying for access.
- All health care providers must complete both the Authorization Status and Provider Information tabs.

You will receive a confirmation number from the Board upon submission of your request for access. Please keep this number for future reference. Registrations may take up to three to five business days for processing.

[Continue](#) [Cancel Registration](#)

You can send an e-mail to WCBCustomerService@wcb.ny.gov if you have any questions regarding this registration.

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---	---	---	---

5. In the Authorization Status tab, select the registering provider type and authorization status. Select **Next**.

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Online Registration

Medical Portal - Provider - Initial Registration

Select Submit after completing the mandatory fields on both the Authorization Status and Provider Information tabs

Authorization Status **Provider Information**

*The Registering Provider Is:

Please Select...

* The Registering Provider's Authorization Status is:

- ☐ NYS Licensed Provider - Workers' Compensation Board Authorized
- ☐ NYS Licensed Provider - Not Workers' Compensation Board Authorized
- ☐ Out of State Provider - Not Workers' Compensation Board Authorized and Not NYS Licensed

[Next](#)

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About WCB Contact Us Locations Bulletins & Subject Numbers Laws & Regulations	Forms & Services Forms Online Services Online Services Availability Technical Support	Communication Board Announcements Upcoming Events Publications Upcoming Webinars	Website Privacy Policy Accessibility Glossary of Terms Using this Site
--	--	---	---

6. In the Provider Information tab, enter the provider information and select **Submit**.

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Online Registration

Medical Portal - Provider - Initial Registration

Select Submit after completing the mandatory fields on both the Authorization Status and Provider Information tabs

Authorization Status | **Provider Information**

Provider's Information:

Does the provider have a Health Commerce System User ID? ☐ Yes ☒ No

*NYS License Number: *NPI Number:

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

*Address Line 1: Address Line 2:

*City: *State: *Zip Code:

*Area Code: *Phone Number: Extension:

*Email:

[Previous](#) [Submit](#)

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

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On-line Registration

Registration has been received, but not yet processed.

Your registration has been received for the Medical Portal - Provider - Initial Registration as a Audiologist - NYS Licensed Provider - Not Workers' Compensation Board Authorized

Your Registration Confirmation Number is 640117

Please keep this number in case you need to contact the Board.

What's Next?

- Registrations are processed in the order in which they are received and may take up to 5 business days to complete.
- Once the registration is processed and approved you will receive 2 emails. One email will contain your User ID and the second email will contain a temporary password. Instructions will be provided in both emails.
- You will NOT have access to the Medical Portal until you receive a User ID and temporary password.

Questions?

- Questions regarding this registration can be directed to wcbcustomersupport@wcb.ny.gov. Please include your registration confirmation number and User ID when contacting Customer Support. Do NOT send your password.

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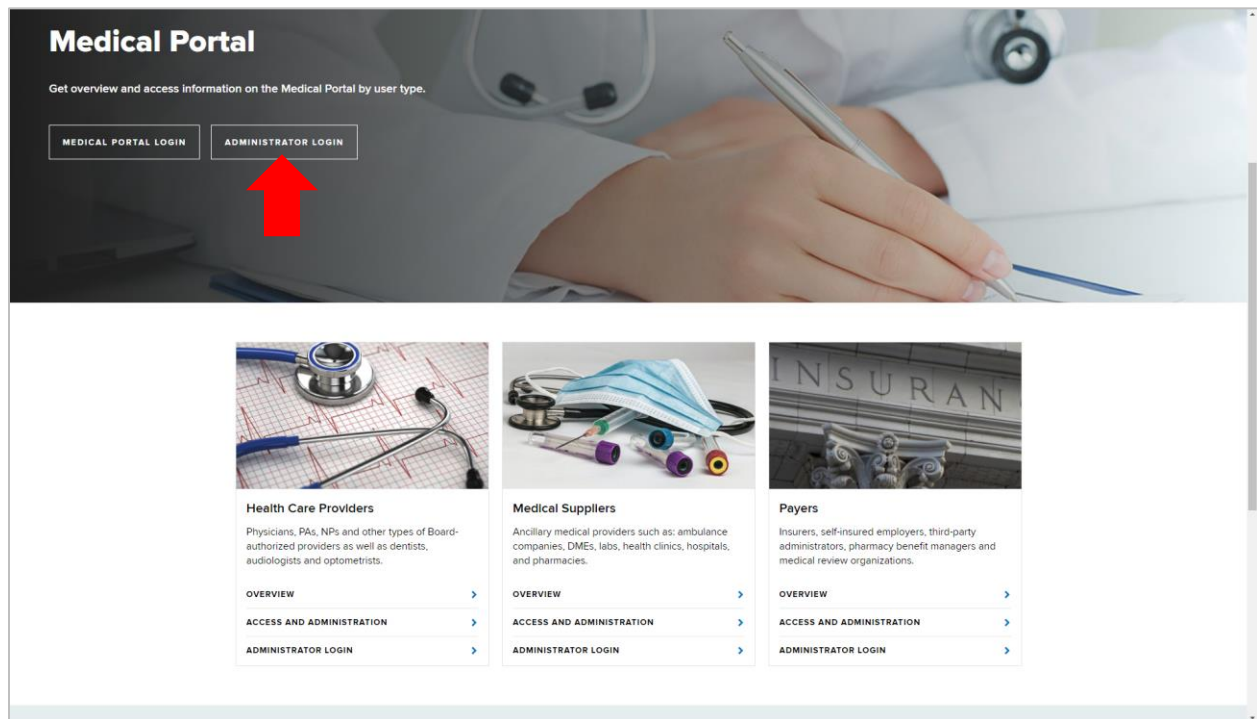
CONNECT WITH US

It may take up to three to five business days for the Board to complete the review of your registration. Once approved, a message will be sent to the email in the registration with your NY.gov ID and temporary password.

V. Managing your profile and Medical Portal delegates for health care providers

Health care providers can manage their delegated Medical Portal users for OnBoard: Limited Release. They will log in using their Medical Portal NY.gov ID and password. The NY.gov ID that you use to access the Medical Portal is separate and apart from the NY.gov ID that you may use for other NYS agencies, such as the Department of Motor Vehicles and Tax and Finance.

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



3. Enter your Medical Portal NY.gov username and password.

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Please login after reading the Acceptable Use Policy below

NY.gov ID

Username:

Password:

Sign In

Forgot your Username or Password

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Agency Assistance & Contact Information

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- The Medical Provider Administration page will allow health care providers to manage their profile and users in the system. The first option in the menu is **My Profile**. Select **My Profile** to edit profile information.

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My Profile
Billing Delegate
Provider Delegate

Medical Provider Administration

Welcome [Name] to Medical Provider Administration for [Name]. Please select from the menu.

Workers' Compensation Board

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

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Board Announcements

Upcoming Events

Publications

Upcoming Webinars

Website

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Accessibility

Glossary of Terms

Using this Site

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- Confirm the information is accurate. The mailing address in your profile will be used for communications from the Board and for PARs. If you need to edit the information, select **Modify My Data** on the bottom left.

My Information

Below is what the Board has on file for you, [REDACTED].

Business Name:
[REDACTED]

First Name: [REDACTED] Last Name: [REDACTED]


Address Line 1: [REDACTED] Address Line 2: [REDACTED]

City: [REDACTED] State: [REDACTED] Zip: [REDACTED]

Area Code: [REDACTED] Phone Number: [REDACTED] Ext: [REDACTED]

E-mail Address: [REDACTED]

[Modify My Data](#) [Return To Main Page](#)



6. Update the information as needed and select **Continue**.

Medical Provider Administration

Modify My Data

*First Name: [REDACTED] M.I.: [REDACTED] *Last Name: [REDACTED]


*Address Line 1: [REDACTED] Address Line 2: [REDACTED]

*City: [REDACTED] *State: [REDACTED] *Zip Code: [REDACTED]

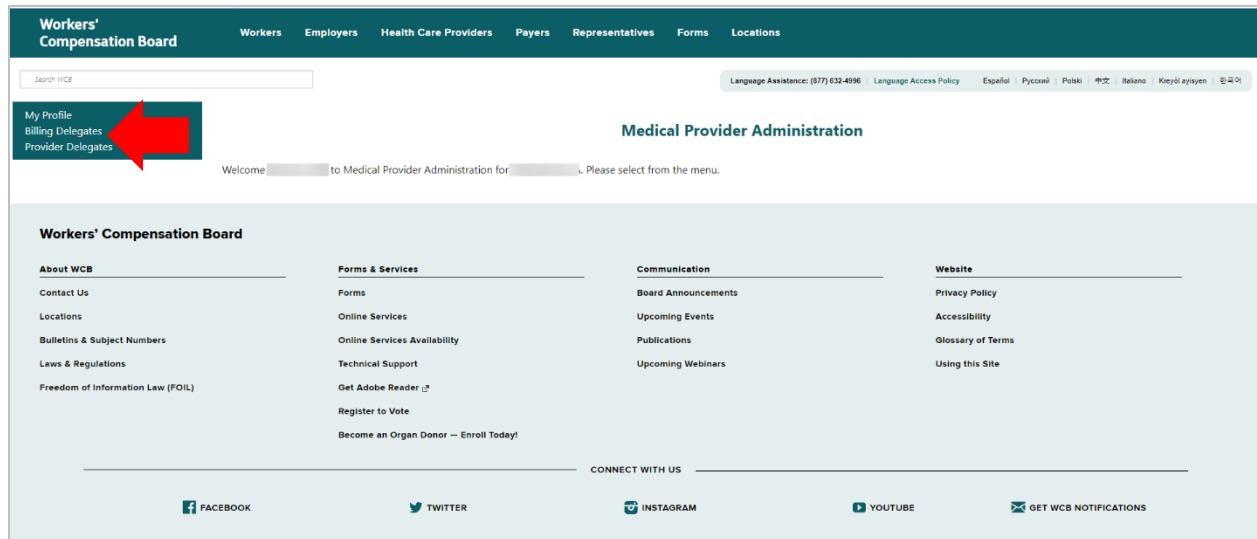
*Area Code: [REDACTED] *Phone Number: [REDACTED] ext: [REDACTED]

*E-mail Address: [REDACTED]

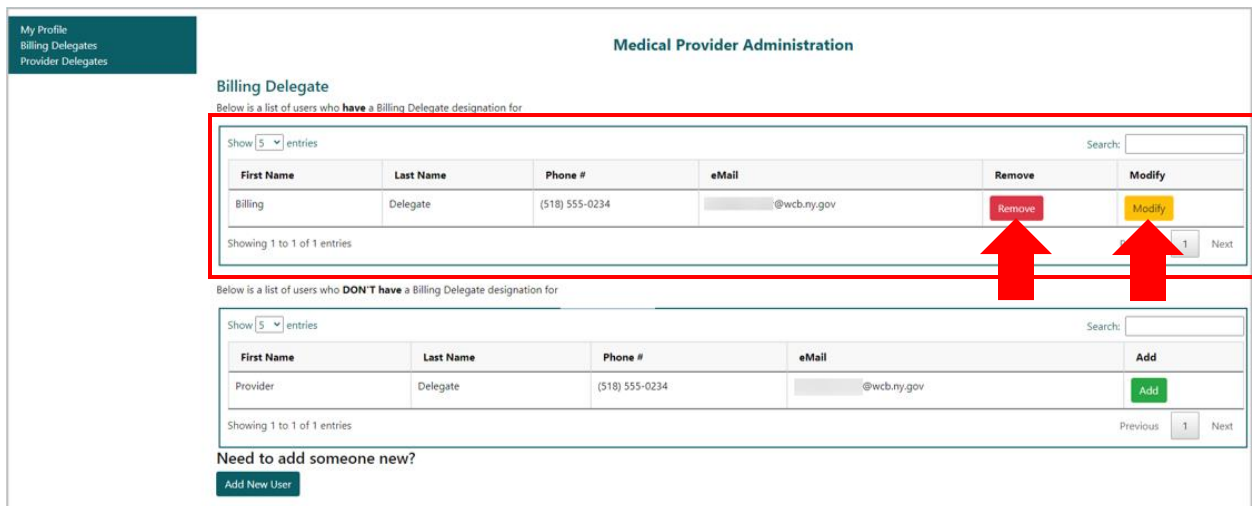
[Continue](#) [Cancel](#)



7. Select Billing Delegates to remove, modify, or add new billing delegates.



8. The Billing Delegates page will show two boxes. The first box lists users who are currently a Billing Delegate and can submit *HP-1.0s* on your behalf. Be sure to keep this updated and remove users who should no longer submit bills on your behalf. When a user is removed, they will appear in the second box, which lists users who are not currently selected as a Billing Delegate. Use the **Modify** button to update information for a delegated user as needed.



9. The second box shows a list of users who are not currently designated as a Billing Delegate but are registered in the system as a user for the health care provider. To designate one of these users as an active Billing Delegate, select the **Add** button in that user's row.

Medical Provider Administration

Billing Delegate

Below is a list of users who **have** a Billing Delegate designation for

Show entries Search:

First Name	Last Name	Phone #	eMail	Remove	Modify
Billing	Delegate	(518) 555-0234	@wcb.ny.gov	Remove	Modify

Showing 1 to 1 of 1 entries Previous Next

Below is a list of users who **DON'T** have a Billing Delegate designation for

Show entries Search:

First Name	Last Name	Phone #	eMail	Add
Provider	Delegate	(518) 555-0234	@wcb.ny.gov	Add

Showing 1 to 1 of 1 entries Previous Next

Need to add someone new?

[Add New User](#)

10. If a new user is not listed in the second box and needs to be registered as a Billing Delegate, select **Add New User**.

Medical Provider Administration

Billing Delegate

Below is a list of users who **have** a Billing Delegate designation for

Show entries Search:

First Name	Last Name	Phone #	eMail	Remove	Modify
Billing	Delegate	(518) 555-0234	@wcb.ny.gov	Remove	Modify

Showing 1 to 1 of 1 entries Previous Next

Below is a list of users who **DON'T** have a Billing Delegate designation for

Show entries Search:

First Name	Last Name	Phone #	eMail	Add
Provider	Delegate	(518) 555-0234	@wcb.ny.gov	Add

Showing 1 to 1 of 1 entries Previous Next

Need to add someone new?

[Add New User](#)

11. The new user information is then entered. Once submitted, the add user request is sent to the Board for processing. Once processed, the user will receive a User ID and temporary password via the email submitted in the form. Select **Continue**.

Medical Provider Administration

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:



12. The last option in the main menu is **Provider Delegates**. Provider Delegates will be able to draft prior authorization requests, but the health care providers themselves are required to submit them. Provider delegates can also draft and submit *Request for Decision on Unpaid Medical Bills (Form HP-1.0)* and do not have to separately be listed as a Billing Delegate.

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My Profile

Billing Delegates

Provider Delegates

Medical Provider Administration

Welcome [Name] to Medical Provider Administration for [Name]. Please select from the menu.

Workers' Compensation Board

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

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Communication

Board Announcements

Upcoming Events

Publications

Upcoming Webinars

Website

Privacy Policy

Accessibility

Glossary of Terms

Using this Site

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13. The Provider Delegates page will show two boxes. The first box lists users who are currently a Provider Delegate and can draft PARs and *Form HP-1.0s*. Be sure to keep this updated and remove users who should no longer draft or submit on your behalf. When selecting **Remove** in a user's row, they will move to the second box which lists users who are not currently selected as a Provider Delegate. Use the **Modify** button to update information for a delegated user as needed.

11

Medical Provider Administration

Provider Delegate

Below is a list of users who **have** a Provider Delegate designation for:

Show entries

First Name	Last Name	Phone #	eMail	Remove	Modify
Provider	Delegate	(518) 555-0234	r@wcb.ny.gov	Remove	Modify

Showing 1 to 1 of 1 entries

Below is a list of users who **DON'T** have a Provider Delegate designation for:

Show entries

First Name	Last Name	Phone #	eMail	Add
Billing	Delegate	(518) 555-0234	@wcb.ny.gov	Add

Showing 1 to 1 of 1 entries

Need to add someone new?

[Add New User](#)

14. The second box shows a list of users who are not currently designated as a Provider Delegate but are registered in the system as a user for the health care provider. To designate one of these users as an active Provider Delegate, select the **Add** button in that user's row.

Medical Provider Administration

Provider Delegate

Below is a list of users who **have** a Provider Delegate designation for:

Show entries

First Name	Last Name	Phone #	eMail	Remove	Modify
Provider	Delegate	(518) 555-0234	r@wcb.ny.gov	Remove	Modify

Showing 1 to 1 of 1 entries

Below is a list of users who **DON'T** have a Provider Delegate designation for:

Show entries

First Name	Last Name	Phone #	eMail	Add
Billing	Delegate	(518) 555-0234	@wcb.ny.gov	Add

Showing 1 to 1 of 1 entries

Need to add someone new?

[Add New User](#)

15. If a new user is not listed in the second box and needs to be registered as a Provider Delegate, select **Add New User**.

Medical Provider Administration

Provider Delegate

Below is a list of users who **have** a Provider Delegate designation for:

Show entries Search:

First Name	Last Name	Phone #	eMail	Remove	Modify
Provider	Delegate	(518) 555-0234	r@wcb.ny.gov	<input type="button" value="Remove"/>	<input type="button" value="Modify"/>

Showing 1 to 1 of 1 entries Previous Next

Below is a list of users who **DON'T** have a Provider Delegate designation for:

Show entries Search:

First Name	Last Name	Phone #	eMail	Add
Billing	Delegate	(518) 555-0234	@wcb.ny.gov	<input type="button" value="Add"/>

Showing 1 to 1 of 1 entries Previous Next

Need to add someone new?

16. The new user information is then entered. Once submitted, the add user request is sent to the Board for processing. Once processed, the user will receive a User ID and temporary password via the email submitted in the form. Select **Continue**.

Medical Provider Administration

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:

VIII. Need help?

Medical Portal access for providers: 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