



My Benefits Manager: Provider Portal Guide

Use My Benefits Manager to check the status of a claim, view remittances check member eligibility and view a member's benefit usage and limitations.



Creating an Account

1. Access the portal via: www.paisc.com
2. Click on Create account
3. Fill out the information requested.

Note: A paid claim number from a member who has been active in the last 180 days is required to create your account.

Signing in

4. Access the portal via: www.paisc.com
5. Enter your credentials and click Sign in.
6. Enter the code sent via text or email, depending on how you requested your multifactor authentication.

My Benefits
MANAGER

Sign in to your account

Username
Password

Sign in Create account

[Forgot your username or password?](#)

Member Login

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Account Information

First Name:
Last:
Last Name:
*Username:
Account created:
Address:
Update Account Information

Security Information

Change your password

Please enter your current password in order to change any settings on this page.

Current Password:
New Password:
Verify New Password:

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Enter security code

For additional security, we need to verify your identity before you can sign into the account. We sent a one-time security code to (**) ***-2703. Once you receive it, please enter it below. If you have not received the code or still have trouble signing in, please call member services.

One-time security code

Remember this device for 14 days
Do not check if you are on a public or shared computer

Sign in

Checking Claim Status

7. Select the Claims tab and enter the claim number(s) you wish to research and select search.
8. Using the links and the browser back button, you can toggle through the claim results. Once you select a claim, select “Original View” under Claims to view a remittance/EOB.

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HOME FLEXIBILITY CLAIMS

Claims

To search for a patient claim:

- Enter the Patient ID or
- Enter a Claim Number
- Multiple Claim Numbers can be entered. Press the enter key after each Claim Number

Show/Hide Search Download Results

Claim Number(s): Patient ID: Begin Date: End Date:

Date of Birth: End Date:

Search

Patient	DOS Start	Claim Number	Claim Status	Total Charge	Member Responsibility
View Details	10/1/2020	0165889073	PAID	\$302.78	\$37.38

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HOME FLEXIBILITY CLAIMS

Show/Hide Search [View Details](#) [Print](#) [Download Results](#)

Claim Number(s): Patient ID: Begin Date: End Date:

Date of Birth: End Date:

Search

Claim #0165889073

Member	Date of Service	Charge	Net Covered	Pay Pct
0165889073	10/1/2020	\$302.78	\$33.89	\$98.89

Subscriber: 0165889073 Service Provider: DR BARRY BARRY MD Total Charges: \$302.78 Claim Status: PAID

Payment Details

Claim Number	Pay To	Amount	Date Paid
0165889073	DR BARRY BARRY MD	\$302.78	10/1/2020

Claim Details

DESCRIPTION	CHG	CHARGE	NUMBER OF CLAIM LINES/AMOUNT	NET COVERED	PAY PCT
Drugs	8225	\$31.77	\$302.78/77	\$0.00	\$0.00
Laboratory	8242	\$54.30	\$0.00/\$54.30	\$0.00	\$0.00
Professional Services	8470	\$182.71	\$0.00/\$182.71	\$33.89	\$18.56
Total		\$302.78	\$302.78/\$302.78	\$33.89	\$98.89

Reason Code Descriptions

N0 - Services not covered in the appeal review
 S22E - LACR INJECTION (TOT WIC)TOT MALL
 S470 - EXC PDN FLUQAC CRF + SGM EDN 0711
 S542 - LAPS S-PWACR RYST 250 CP-RHYL TV002VWV

Disclaimer
 This is not a bill.
 EOB is for info only.

Checking Member Eligibility

9. Select the Eligibility tab and enter the member ID(s) you'd like to check and select search.
10. Using the links and the browser back button, you can toggle through the eligibility results.
11. You can also view a member's benefits usage and limits.

HOME ELIGIBILITY CLAIMS AUTHORIZATIONS

Eligibility

To search for a claim:

- Enter the Member ID or
- Enter the last Name and Date of Birth (MM/DD/YYYY)
- Multiple Member IDs can be entered. Press the enter key after each Member ID.

Select Provider:
All Providers

Member ID(s): Birds

First Name:

Last Name:

Date of Birth:

Group:

Search

Name	MemberID	Group	Date of Birth	Gender	Benefit Plan	Address	Home Phone
NAME: SUBJECT BBA	BP1234567	12345	01/01/1980		X1234567	123 Street Address, CA, 90000	

Records found: 1 | Page 1 of 1

Eligibility

Select Provider:
All Providers

Member ID(s): Birds

First Name:

Last Name:

Date of Birth:

Group:

Search

Participant

Member	NAME: SUBJECT BBA	Group Name	12345
Member ID	BP1234567	Group Number	12345
EMAIL	ACTU@		

Coverages

MEDICAL - Silver
Coverage Date: 01/01/2018 - 12/31/2019

DENTAL - Silver
Coverage Date: 01/01/2018 - 12/31/2019

VISION - Silver
Coverage Date: 01/01/2018 - 12/31/2019

Benefit Usage and Limits

5am - Individual Deductible

IN NETWORK:

AMOUNT MET:

MAXIMUM AMOUNT:

Checking Member Eligibility Continued

12. To view any family member(s) that may be associated with the subscriber's number, click on the subscriber's name.
13. Click on View all family members.
14. A list of any family member(s) associated with the subscriber's number will be displayed. Click on any family member to view that member's information.

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Search filters: First Name, Last Name, Member ID(s), Date of Birth, Group. Search button.

Name	MemberID	Group	Date of Birth	Gender	Benefit Plan	Address	Home Phone
NAME, SUBSCRIBER	KP12345678	123456	01/01/1980	M	K1234567	123 Street Address, City, 00000	

1 record found.

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Search filters: First Name, Last Name, Member ID(s), Date of Birth, Group. Search button.

[View all family members](#)

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My Benefits MANAGER

MESSAGES PROFILE LOGOUT

HOME ELIGIBILITY CLAIMS AUTHORIZATIONS

Eligibility

Select Provider: All Providers

Search filters: First Name, Last Name, Member ID(s), Date of Birth, Group. Search button.

[View all family members](#)

- SUBSCRIBER NAME
- DEPENDENT ONE
- DEPENDENT TWO
- DEPENDENT THREE

If you need assistance, please contact [Customer Service](#).

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