

PROVIDER WEBSITE ACCESS INSTRUCTIONS

CLAIMS STATUS/ELIGIBILITY/BENEFITS

**** IF WE HAVE NOT RECEIVED A CLAIM FROM THE PROVIDER TAX ID NUMBER ENTERED WITH THE ENROLLEE LAST NAME AND SOCIAL SECURITY NUMBER, YOU WILL NOT BE ABLE TO ACTIVATE A NEW USER ACCOUNT****

1. Enter www.absaz.net
2. Main page – click “LOGIN”
3. Provider “CLICK HERE” to request a new account for this site
4. Add New Account:

Prior to creating a login, please verify your identity by entering the following:

Enrollee Last Name (patient/subscriber last name – all in CAPS)
Enrollee Social Security Number (patient/subscriber ss#)
Provider Tax ID number

****SUBMIT** **CANCEL****

5. Add New Account
Add User

Account Information:

Login ID: (no more than 9 alpha – all lower case)
Password: (no more than 9 alpha/numeric – all lower case)
Confirm Password
E-Mail address (Required field)
Sender ID: (Provider Tax ID Number)

****NEXT** **CANCEL****

6. Add New Account:
Add User

Personal Information:

First Name
Last Name
Address: (Provider's office)
City
State
Zip Code
Country
Phone Number

**** BACK** **SUBMIT** **CANCEL****

CONGRATULATIONS! You have been successfully added as a new user.
Please return to the login page to enter the site.