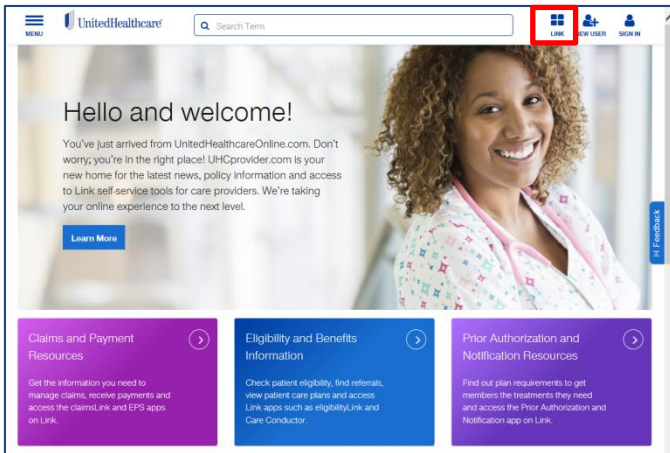


Paperless Delivery Options allows Password Owners to have documents which are housed in Document Vault, such as Commercial Group claim letters, to be delivered electronically and stop the mail. (**Document Vault** offers central access for reports and documents from within Link. Please refer UHCprovider.com/Link for information about Document Vault.)

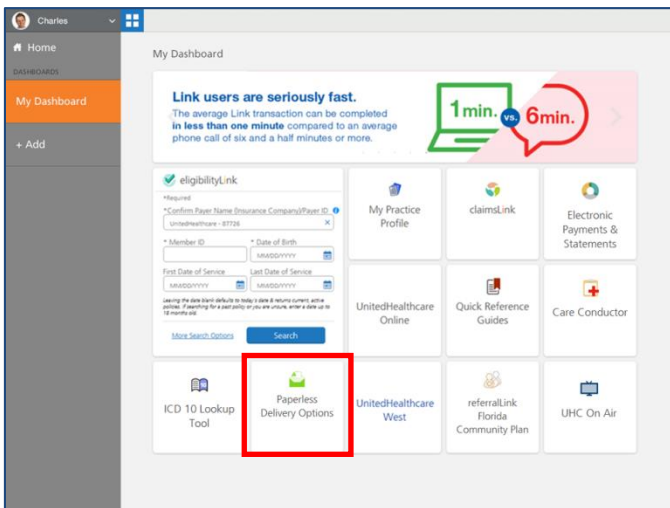
Get Started

NOTE: Only Password Owners have access to this app.

1. From UHCprovider.com, click **Link** and sign in

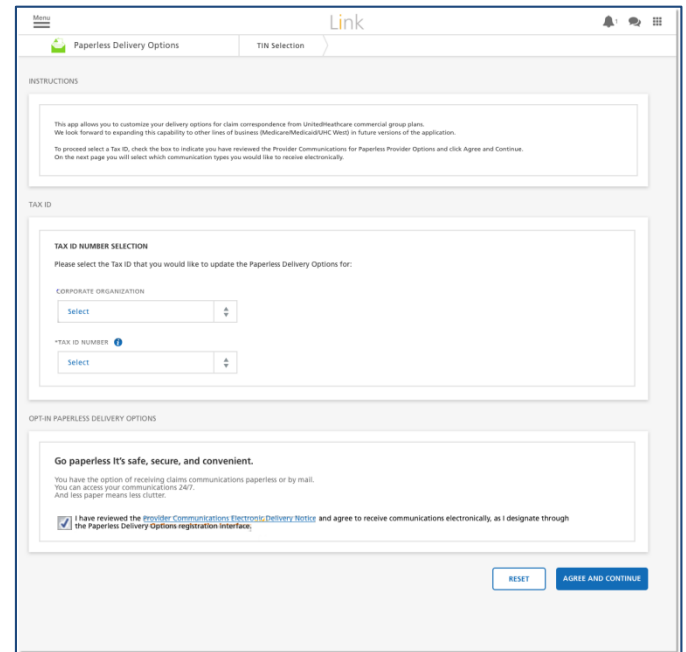


2. Select **Paperless Delivery Options**



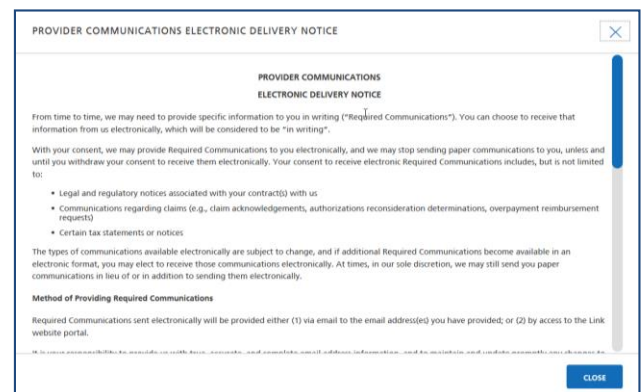
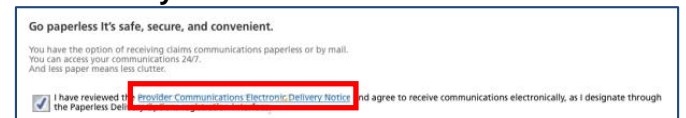
Confirm Corporate Information

1. Select the appropriate **Corporate Information** from the pull-down menus



NOTE: If you represent only one organization, the app will default to that and only the Tax ID Number pull-down menu will appear. Also, only one TIN may be updated at a time.

2. Review the **Provider Communications Electronic Delivery Notice** and check the box to confirm



Set Preferences

1. Click the **Electronic Delivery** radio button for each desired Communication Type (or select "Turn on all")
2. Enter a valid **Email Address** for each (select "Use same email for all notifications" to copy the email address to all fields)
3. Select the **Notification Frequency**, including **Day of the Week**, if appropriate

Link
Paperless Delivery Options
TIN Selection
Preference Selection
Return to Link Dashboard

INSTRUCTIONS
Please choose your delivery options for each category of claim letter below. When choosing electronic delivery, please indicate the email address to receive electronic notification of new correspondence and the frequency with which notifications should be sent.

SET PREFERENCES

MEDICAL & REHABILITATION | 123123123

PAPER DELIVERY	ELECTRONIC DELIVERY <input type="checkbox"/> Turn on all	COMMUNICATION TYPE	EMAIL ADDRESS <input type="checkbox"/> Use same email for all notifications	NOTIFICATION FREQUENCY	DAY
<input type="radio"/>	<input checked="" type="radio"/>	Additional Info Needed	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Acknowledgements	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Medicaid - Non covered	john_provider@medicarehah.com	Weekly	Monday
<input type="radio"/>	<input checked="" type="radio"/>	Resubmit	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Reimbursement Request	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Claims Recon Responses	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Therapy Authorizations	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Other	john_provider@medicarehah.com	Daily	

RESET SAVE

Confirmation

Link
Paperless Delivery Options
TIN Selection
Preference Selection
Return to Link Dashboard

INSTRUCTIONS
Please choose your delivery options for each category of claim letter below. When choosing electronic delivery, please indicate the email address to receive electronic notification of new correspondence and the frequency with which notifications should be sent.

SET PREFERENCES

MEDICAL & REHABILITATION | 123123123

PAPER DELIVERY	ELECTRONIC DELIVERY <input type="checkbox"/> Turn on all	COMMUNICATION TYPE	EMAIL ADDRESS <input type="checkbox"/> Use same email for all notifications	NOTIFICATION FREQUENCY	DAY
<input type="radio"/>	<input checked="" type="radio"/>	Additional Info Needed	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Acknowledgements	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Medicaid - Non covered	john_provider@medicarehah.com	Weekly	Monday
<input type="radio"/>	<input checked="" type="radio"/>	Resubmit	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Reimbursement Request	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Claims Recon Responses	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Therapy Authorizations	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Other	john_provider@medicarehah.com	Daily	

Additional Help Resources are available at:
UHCprovider.com/Link

4. Once updated, click **Save**

Link
Paperless Delivery Options
TIN Selection
Preference Selection
Return to Link Dashboard

INSTRUCTIONS
Please choose your delivery options for each category of claim letter below. When choosing electronic delivery, please indicate the email address to receive electronic notification of new correspondence and the frequency with which notifications should be sent.

SET PREFERENCES

MEDICAL & REHABILITATION | 123123123

PAPER DELIVERY	ELECTRONIC DELIVERY <input checked="" type="checkbox"/> Turn on all	COMMUNICATION TYPE	EMAIL ADDRESS <input type="checkbox"/> Use same email for all notifications	NOTIFICATION FREQUENCY	DAY
<input type="radio"/>	<input checked="" type="radio"/>	Additional Info Needed	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Acknowledgements	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Medicaid - Non covered	john_provider@medicarehah.com	Weekly	Monday
<input type="radio"/>	<input checked="" type="radio"/>	Resubmit	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Reimbursement Request	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Claims Recon Responses	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Therapy Authorizations	john_provider@medicarehah.com	Daily	
<input type="radio"/>	<input checked="" type="radio"/>	Other	john_provider@medicarehah.com	Daily	

RESET **SAVE**