

Lunch & Learn Tapestry Link (TapLink).

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Welcome.

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Agenda.

- Welcome, live, and scheduled features.
- Website or Provider Portal?
- Guest access.
- Claims and eligibility status.*
- Login and new requests.
- Quick Links.
- Managing users.
 - Change a user's password.
 - Verify, deactivate, and unblock users.
 - Update facility contact information.
 - Reset user's two-factor authentication.
- Members and member snapshot.
- Eligibility, coverage, and benefits.
- ID cards.
- In Basket messaging.*
- Happy Together with Health First Health Plans.*
- Explanation of Benefits (EOB) and accumulators.*
- Authorizations.*
- Q & A and closing.

* Scheduled features: January 1, 2026.



Live features.

INN Providers

-  Verify eligibility.
-  Member snapshot.
-  Demographics.
-  Coverages & benefits.
-  Homepage Quick Links.

ONN Providers

-  Verify eligibility.

Guest Access

-  Verify eligibility.



Scheduled features: January 1, 2026.*

INN Providers



Claims & RA.



Authorizations.



CRM view submitted.



Customer Service messaging.



EOP.

Guest Access



Claim status.

Guest Access



Claim status.

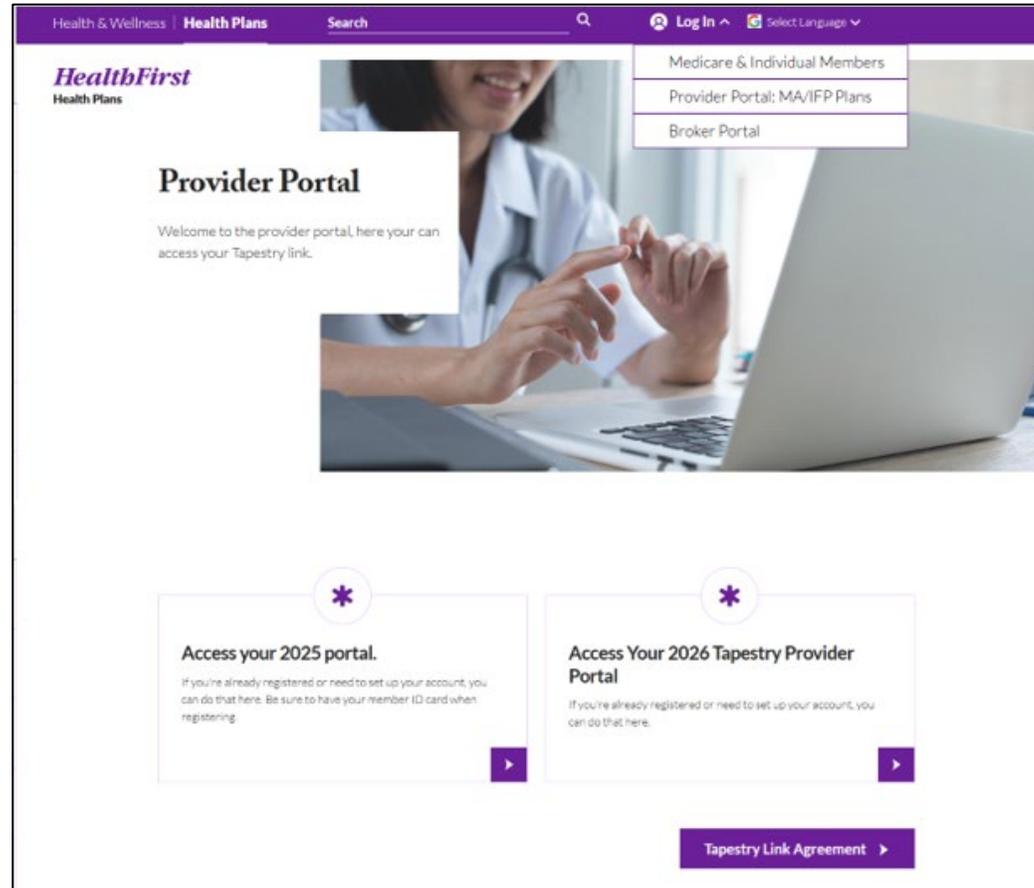


Website or Provider Portal?

- Website: hf.org/healthplans.
 - Public domain.
 - Anyone logging in can access information such as Prior Authorization Lists, Provider Directories, Prescription Formularies, and numerous other resources.
- Provider Portal: hf.org/4providers.
 - Links directly to the landing page with provider portal login links.
 - Secure portal that requires Username and Password to login.
 - Access to Protected Health Information (PHI).
 - Patient benefits, eligibility, medical authorizations, claims, and other resources.



Website or Provider Portal?



Guest access.



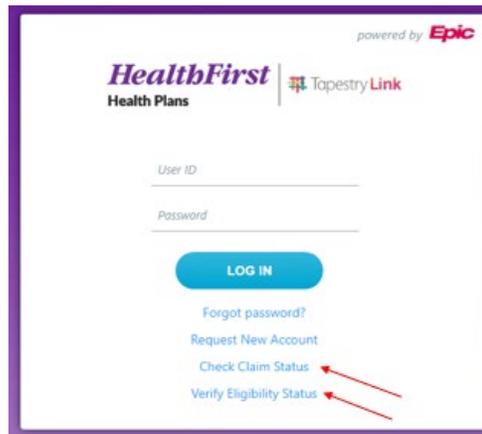
Guest access and eligibility.

All network providers are granted guest access to a Tapestry Link. This access enables providers to efficiently check the status of claims submitted to HFHP and verify member eligibility.

The provider may access the portal by visiting <https://tapestrylink.hf.org>.

The following activities are enabled for use by guests. (i.e., All network providers, providers without active HFHP portal logins). A portal login is not required for guest access.

- **Check Claim Status** – Track the progress of submitted claims in real time.
- **Verify Eligibility Status** – Quickly verify if a member has an active HFHP and understand their benefits.



Claim and eligibility status.*



Claim status.

1. Click the **Check Claim Status** button.
2. Enter one of the following:
 - Provider NPI or
 - Vendor tax ID.
3. Enter one of the following:
 - Member's ID + Billed amount of the claim.
 - Member's ID + Earliest date of service.
4. Complete the reCAPTCHA.
5. Select **Search**.

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Find a Claim

Use this page to check on the status of a submitted claim. We'll need a few pieces of information to narrow down your search. To securely view additional claim details, please [log in](#) or [create an account](#).

1 Who submitted the claim?
Enter one of the following:
A) Provider NPI
B) Vendor Tax ID

Provider NPI

Vendor Tax ID

2 What were the claim details?
Enter one of the following:
A) ID + Billed Amount
B) ID + Earliest Date of Service

ID

Billed Amount

Earliest Date of Service

I'm not a robot

reCAPTCHA
Privacy - Terms



Verify eligibility.

1. Click the **Verify Eligibility** Status button.
2. Enter one of the following:
 - Provider NPI or
 - Vendor tax ID.
3. Enter one of the following:
 - Member's ID + Billed amount of the claim.
 - Member's ID + Earliest date of service.
4. Select the date you want to verify eligibility for.
5. Complete the reCAPTCHA.
6. Select **Search**.

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Verify Eligibility

Use this page to check on the eligibility status for a member. We'll need a few pieces of information to narrow down your search. To securely view additional eligibility details, please [log in](#) or [create an account](#).

1 Who is requesting information?
Enter one of the following:
A) Provider NPI
B) Vendor Tax ID

Provider NPI
Vendor Tax ID

2 Who are you verifying eligibility for?
The following are required to look up the member:
A) Member ID
B) Date of Birth
C) ZIP Code

Member ID
Date of Birth
Last 4 of SSN
ZIP Code

What date do you want to verify eligibility for?
If no date is entered, we will check current eligibility.

View eligibility as of:

I'm not a robot

reCAPTCHA
Privacy - Terms

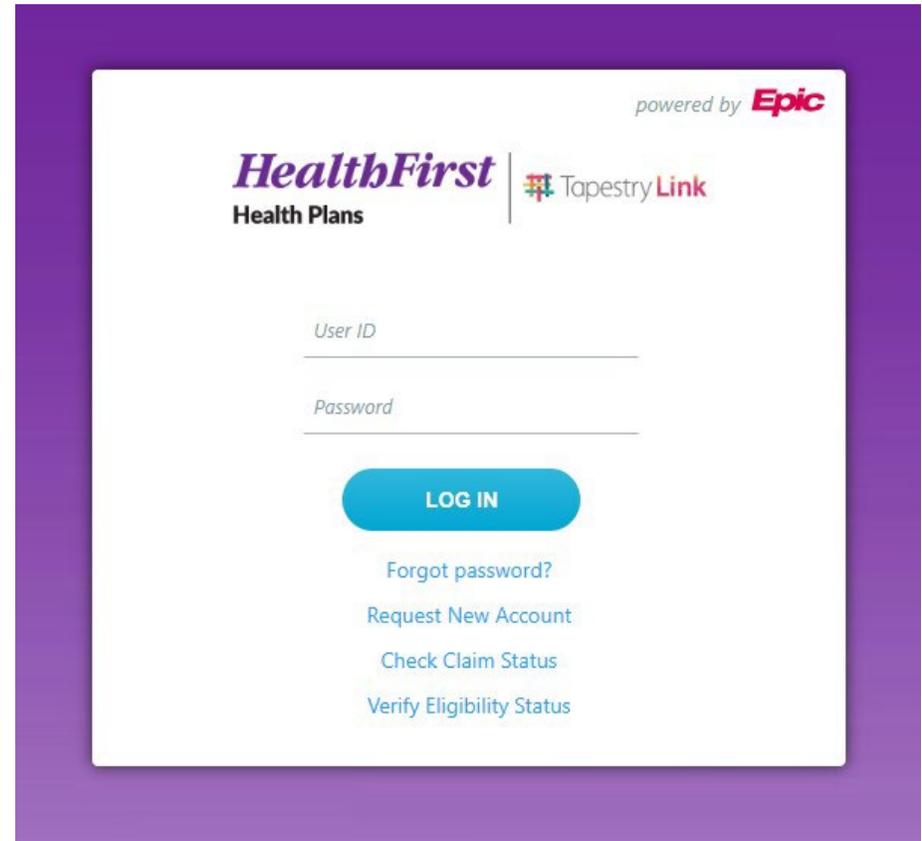


Login and new requests.



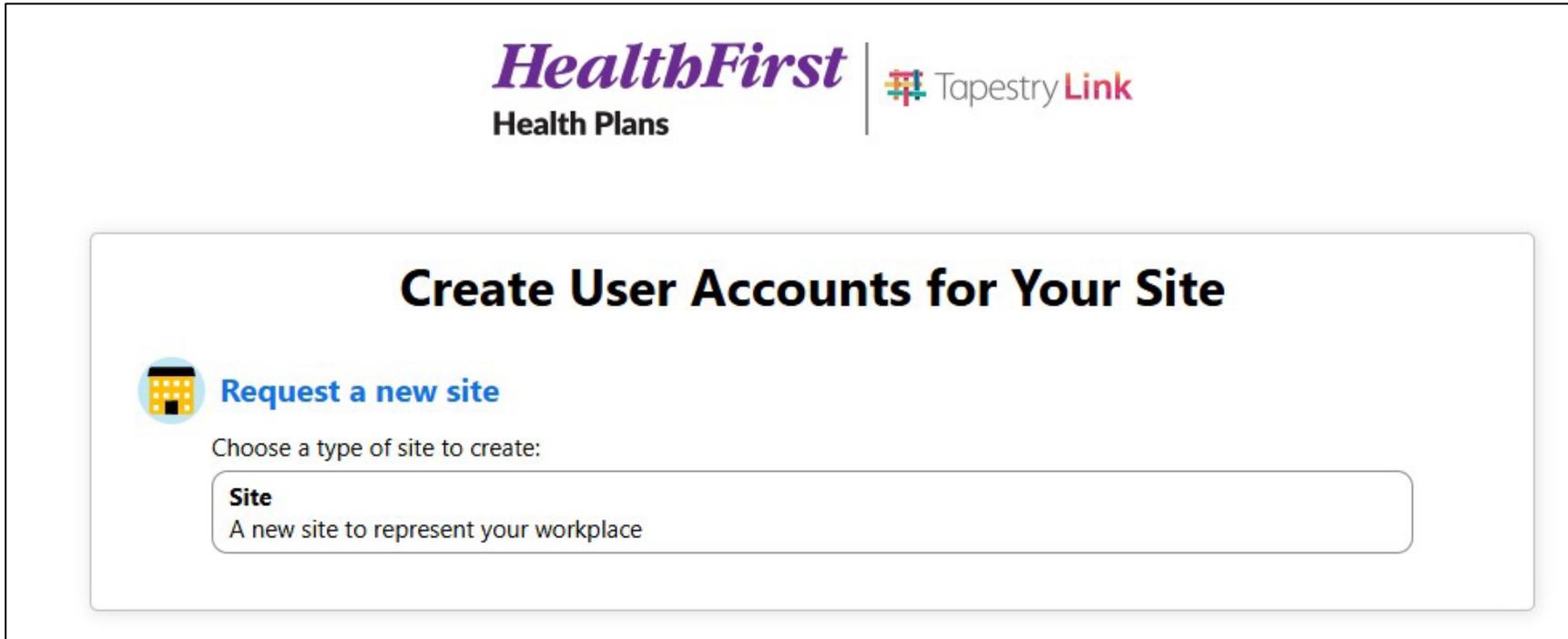
Provider Portal login and new requests.

- Existing HealthTrio users.
 - **Password** sent via HealthTrio message.
 - **Username** sent via email.
- New users.
 - Submit a request to establish an account by selecting **“Request New Account.”**



Provider Portal login and new requests.

Select **Site**.



The screenshot displays the HealthFirst Tapestry Link provider portal interface. At the top, the HealthFirst Health Plans logo is on the left, and the Tapestry Link logo is on the right. Below the logos, a central box titled "Create User Accounts for Your Site" contains a "Request a new site" button with a building icon. Underneath this button, the text "Choose a type of site to create:" is followed by a dropdown menu. The dropdown menu is currently open, showing the selected option "Site" with the description "A new site to represent your workplace".



Provider Portal login and new requests.

Enter Site Information.

- Fields noted by a red stop sign are required fields. 
- Fields with a yellow caution symbol are recommended fields. 

Click **Next**.

1. Site Information 2. Users 3. Verification

Site Information

 Site name:

 Site type:

 Phone:  Fax:

 Site NPI #:

Address

 Address:

 City:

 State:  ZIP:

County:

Country:

Other

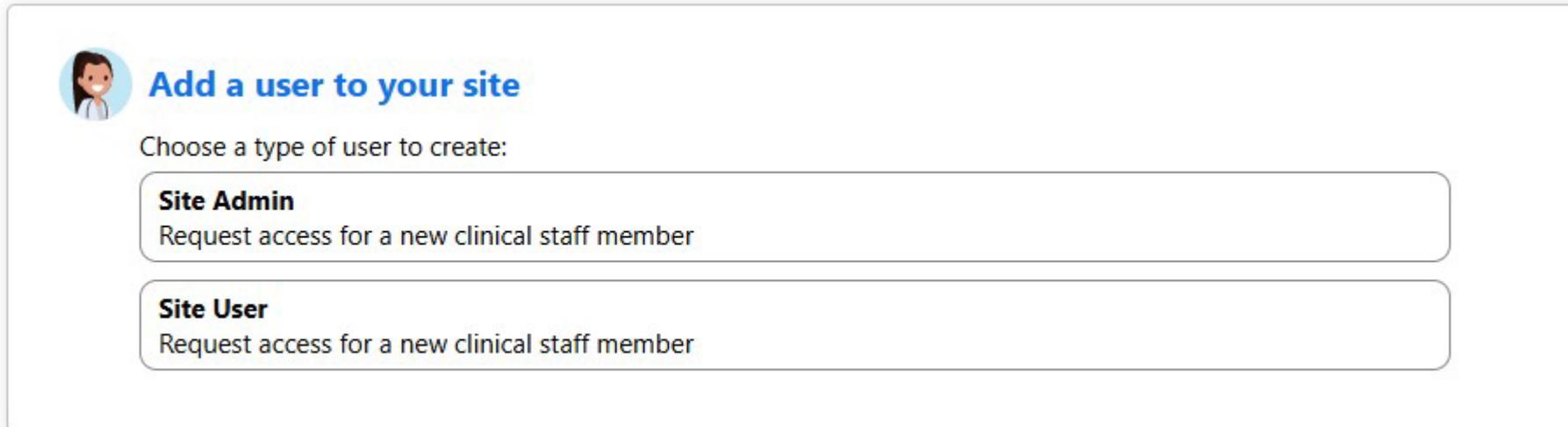
Comments:



Provider Portal login and new requests.

Select **Site Admin** if you are the user that will be responsible for managing the user accounts for your provider site.

Select **Site User** if you are not a Site Administrator and are requesting access to a provider site.



 **Add a user to your site**

Choose a type of user to create:

- Site Admin**
Request access for a new clinical staff member
- Site User**
Request access for a new clinical staff member



User information.

Enter User Information.

- Fields noted by a red stop sign are required fields.
- Fields with a yellow caution symbol are recommended fields.

User Information

 First name:

 Middle name:

 Last name:

 Work email:

Basic Information

Work phone:

User Address: [Copy site address](#)

 Address:

 City:

 State:  ZIP:

County:

Country:

Associated Providers: List the providers this user works with

 Provider name: [Add](#)

HFHP LINK NEW ACCOUNT ADDITIONAL SITES

Is the user associated with multiple sites? [Yes](#) [No](#)

If YES, List the sites the user is associated with



User information.

If applicable, click on the open box to
Make this user a site administrator.

Click **Accept**.

Other

Comments:

Site Administrator

A site administrator is the person responsible for maintaining a site's records. These responsibilities include verifying that user accounts are current, deactivating the accounts of users who are no longer active at the site, and submitting requests to activate new user accounts. Every site must have at least one administrator.

Make this user a site administrator

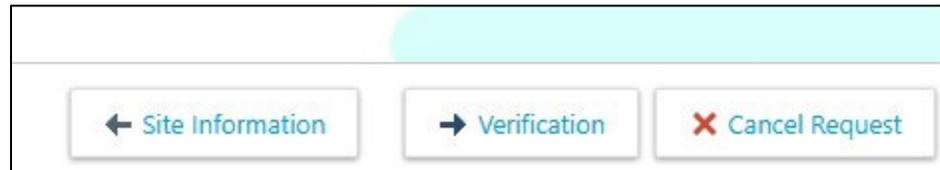


Verification.

Click on the open circle next to the user name.



Click **Verification**.



Terms and Conditions.

Read the [HEALTH PLANS TAPESTRY LINK TERMS AND CONDITIONS](#).

Click on the open box next to **I agree to the Terms and Conditions above.**

Click the open box that indicates **I'm not a robot.**

Enter name in the **Request by** field.

Select the **Primary contact** from the drop-down options.

Click on **Submit Request.**

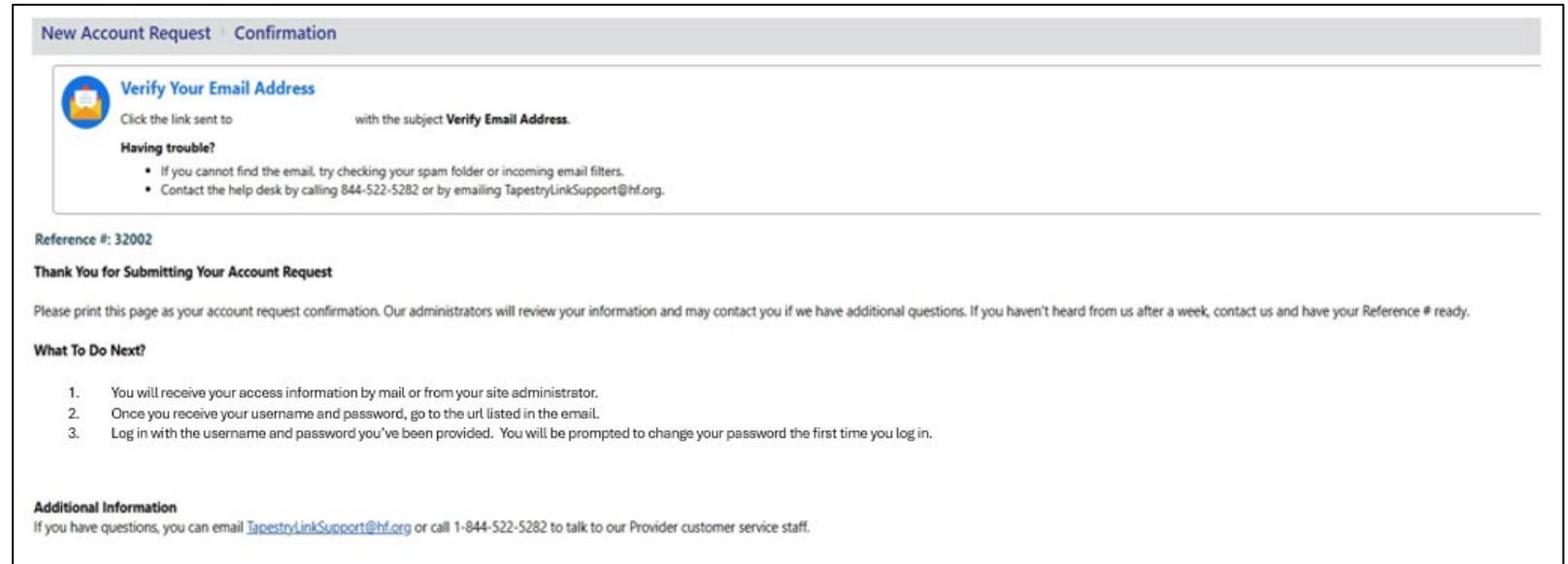
The screenshot shows a 'Verification' section of a web form. It includes a red error icon and the text 'Terms and Conditions:' followed by a scrollable box containing the title 'HEALTH PLAN TAPESTRY LINK TERMS AND CONDITIONS' and a paragraph of text: 'The privacy and security of health and other personal information of Health Plan members (collectively, "member information") is a right protected by law and enforced by fines, criminal penalties as well as policy. Safeguarding such member'. Below this is a checkbox labeled 'I agree to the Terms and Conditions above.' followed by another red error icon and the text 'Verification:' next to a checkbox labeled 'I'm not a robot' and a reCAPTCHA widget. Underneath are two input fields: 'Requested by:' and 'Primary contact:'. A yellow information box at the bottom states: 'The primary contact will be used for communication about this request. A verification email will be sent to this address when your request is submitted.'

A row of three buttons: 'Previous' with a left arrow, 'Submit Request' with a green checkmark, and 'Cancel Request' with a red X.



Confirmation.

An email confirmation will be sent for the user to verify the email address used when requesting the account.



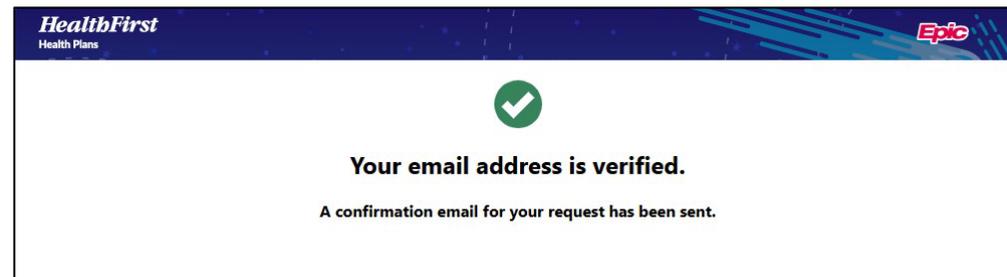
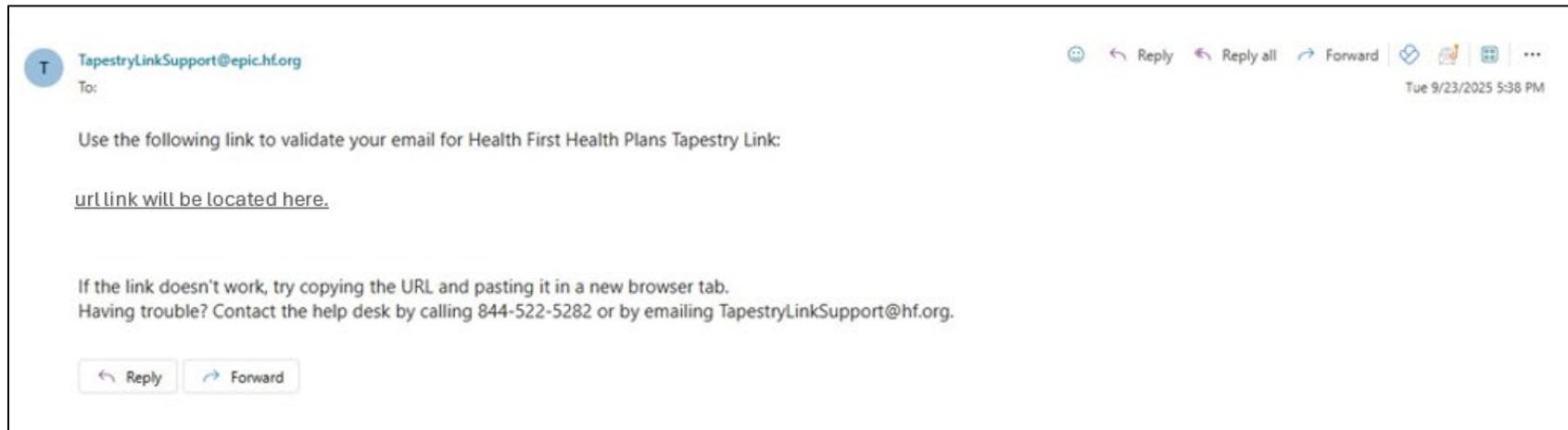
The screenshot shows a confirmation page for a new account request. At the top, there are two tabs: "New Account Request" and "Confirmation". Below the tabs is a section titled "Verify Your Email Address" with a blue envelope icon. The text says: "Click the link sent to [redacted] with the subject **Verify Email Address**." Below this is a "Having trouble?" section with two bullet points: "If you cannot find the email, try checking your spam folder or incoming email filters." and "Contact the help desk by calling 844-522-5282 or by emailing TapestryLinkSupport@hf.org." Below this is a "Reference #: 32002" section, followed by a "Thank You for Submitting Your Account Request" section. The text says: "Please print this page as your account request confirmation. Our administrators will review your information and may contact you if we have additional questions. If you haven't heard from us after a week, contact us and have your Reference # ready." Below this is a "What To Do Next?" section with a numbered list: "1. You will receive your access information by mail or from your site administrator.", "2. Once you receive your username and password, go to the url listed in the email.", "3. Log in with the username and password you've been provided. You will be prompted to change your password the first time you log in." Below this is an "Additional Information" section with the text: "If you have questions, you can email TapestryLinkSupport@hf.org or call 1-844-522-5282 to talk to our Provider customer service staff."



Email verification.

An email will be sent with a link to validate your email. **Click the link** to verify your email.

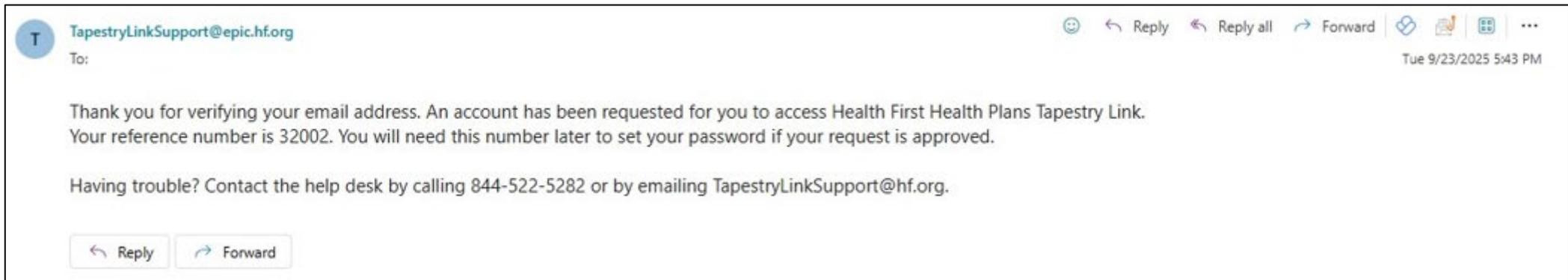
A second email will be sent verifying the email address was verified.



Email acknowledgment of request.

An email with a **reference number** will be sent acknowledging the request has been sent to the HFHP Provider Network Operations team for review.

IMPORTANT: Keep this email. The reference number will be needed to verify the account.



Email with link to complete account setup.

When the account has been approved, an email will be sent to indicate an account has been created.

Click on the link in the email to complete account setup.

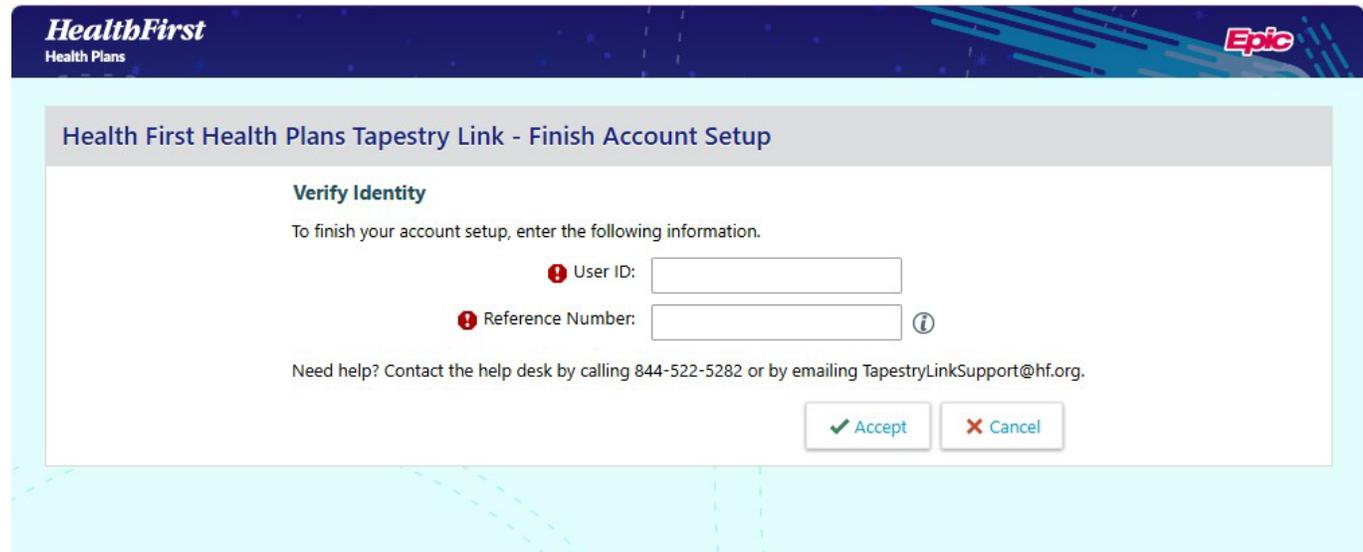


Identity verification.

Enter **User ID**.

Enter the **Reference Number** provided in the acknowledgment email.

Click on the **Accept** button.



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Health First Health Plans Tapestry Link - Finish Account Setup

Verify Identity

To finish your account setup, enter the following information.

User ID:

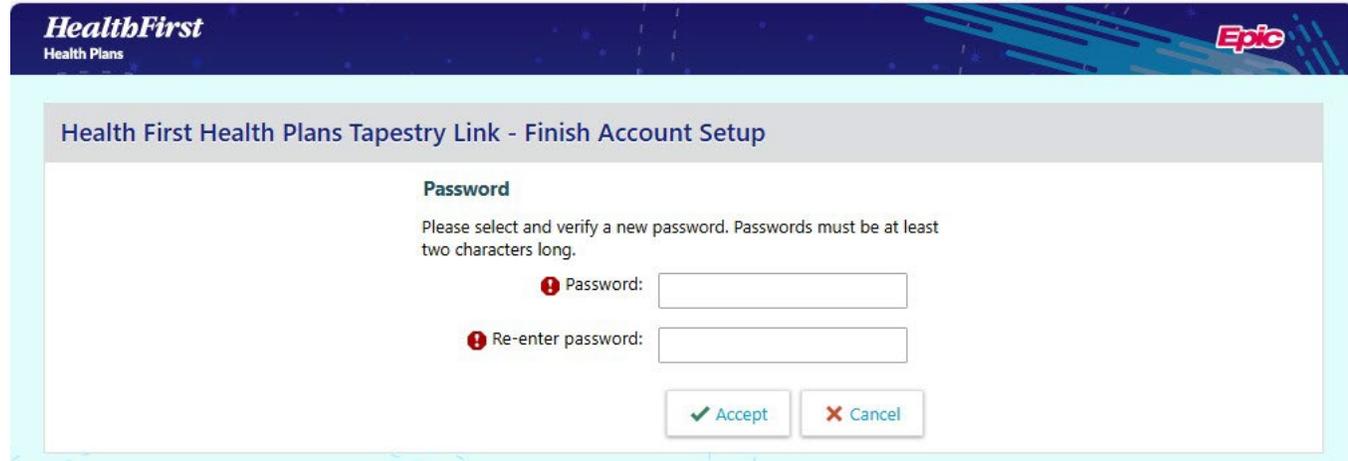
Reference Number: ⓘ

Need help? Contact the help desk by calling 844-522-5282 or by emailing TapestryLinkSupport@hf.org.



Password setup.

- Enter a new **Password**.
- Re-enter the same **Password**.
- Click on the **Accept** button.

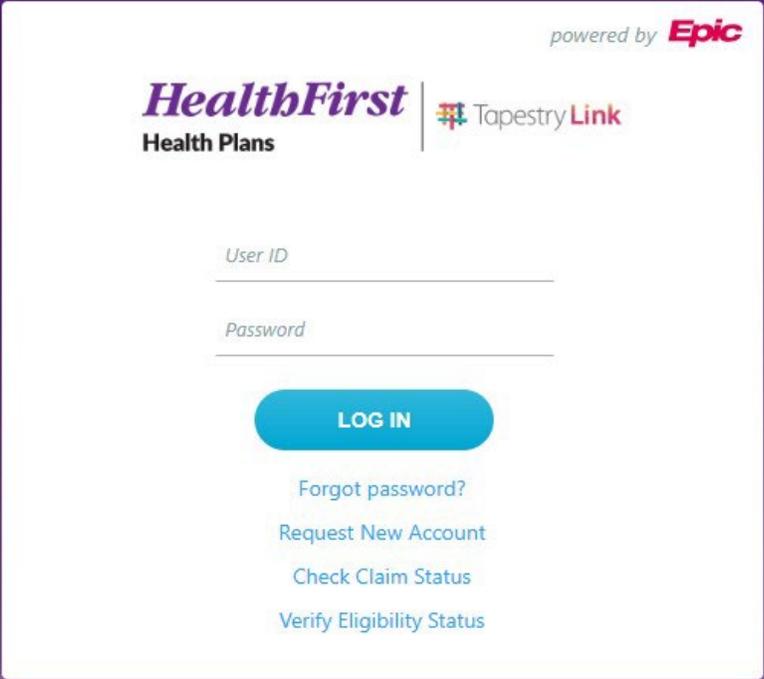


The user will receive an email from TapestryLinkSupport@epic.hf.org advising of the password change.



Log in screen.

- Enter **User ID**.
- Enter **Password**.
- Click on the blue **LOG IN** button.



powered by **Epic**

HealthFirst |  Tapestry **Link**
Health Plans

User ID

Password

LOG IN

[Forgot password?](#)

[Request New Account](#)

[Check Claim Status](#)

[Verify Eligibility Status](#)

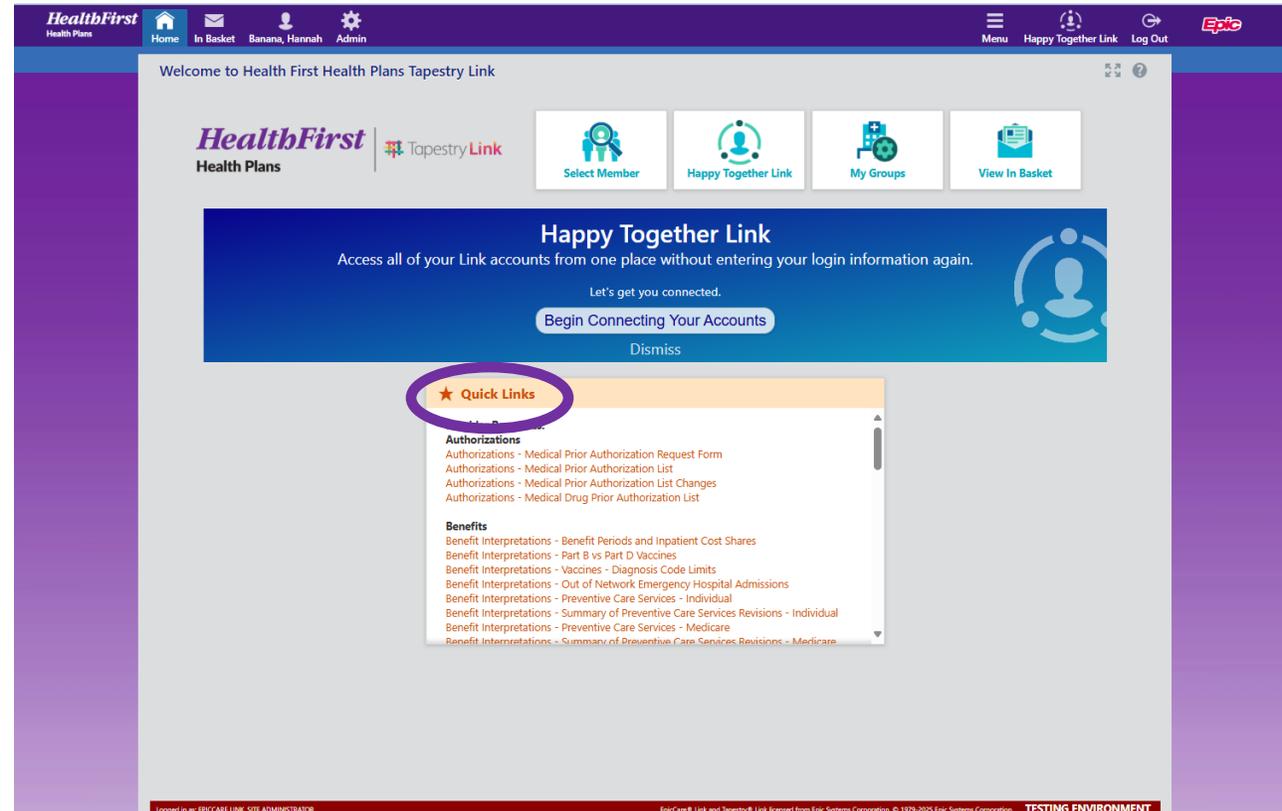


Quick Links.



Quick Links.

Access to practice management and administration documents, policies, guidelines, and instructions previously retrieved through the **Provider Toolbox** will now be available in TapLink **Quick Links**.

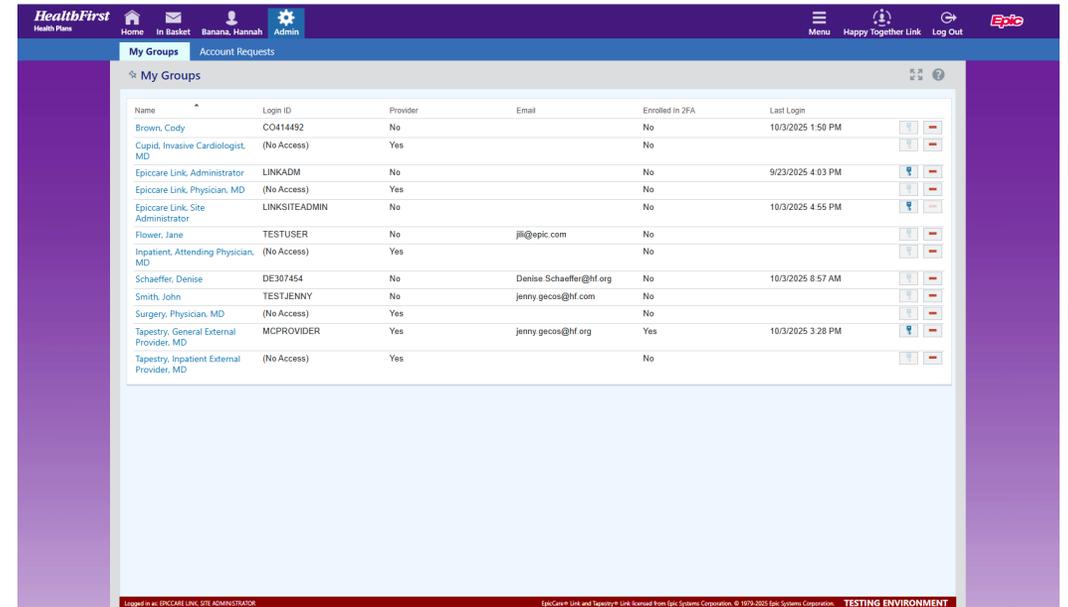


Managing users.



Change a user's password.

1. Select the **Admin tab** and click **My Groups**.
2. Click the key  icon in the row for a user to change their password.
3. In the **New Password** and **Verify New Password** fields, enter the new password for the user.
4. In the **Password** for <your name> field, enter your password.
5. Click **Accept**.



The next time the user signs in using this password, they will be prompted to select a new password of their choice.



Verify active users.

You might receive a **Site Verification** message from your Epic organization asking you to verify all users working at your site are current and active.

1. From the message, you can click **Verify Now** to go to the site verification activity.
2. From the site verification activity, verify that all the users and providers working at your site are current.
 - Deactivate users as needed to prevent unauthorized access by users whose accounts are outdated.
3. In the **Active?** column, select **No** for all the users whose accounts you want to deactivate.
 - Relevant notes can be entered in the **Comments** field.
4. Select the **Acknowledgement** check box to acknowledge you have reviewed and confirmed the list of users.
5. Click  **Verify** to verify the list of users and close the screen.



Deactivate a user.

1. Select the **Admin tab** and click **My Groups**.
2. Click the minus  icon in the row for a user to deactivate them.
3. Enter a comment indicating why the user is being deactivated and click **Deactivate**.



Unblock a user.

1. Select the **Admin tab** and click **My Groups**.
 - A lock  icon appears next to any user whose account is blocked.
2. Click  to **Unblock** the user.



Update facility contact information.

1. Select the **Admin tab** and click **My Facilities**.
2. Click the name of a facility to update its contact information on the **Basic Demographics** tab, including the telephone number, fax number, and address.
3. Go to the **Extended Demographics** tab to document additional information about the facility, such as its website, organizational description, and the services it provides.
4. After you have finished editing information, click  **Accept**.



If an active address is not on file, search for a matching address by entering an address and clicking **Find Address**. Alternatively, click **Manual Entry** to enter all address information yourself.



Reset user's two-factor authentication.

The two-factor authentication settings can be reset for a user. For example, if a provider at your clinic gets a new telephone and loses their reset code, the code can be reset for the provider's two-factor authentication without having to contact Health First Health Plans to make the change.

1. Select the **Admin tab** and click **My Groups**.
2. Click  **Two-factor authentication settings** in the row for the user whose settings you want to reset.
3. Confirm you want to reset the user's settings and click  **Reset**.



Members and demographics.



Members.

1. Click  **Member** to see your member list.
 - If you have access to many members, your members might appear on more than one page. Use the field at the top of the page to search for members by their name. For members to appear on this list, they must be in your patient group.
2. Search for a member base on name or medical record number (MRN).
 - Click  **Member** and enter the member's name or MRN. To help refine your search, filter the search by a primary care provider.
 - In the **Search Results** window, click the name of the member once it populates.



Member SnapShot.

Select the **Member SnapShot** tab and click **Demographics** to see information like the member's address, PCP, emergency contacts, and more.

The screenshot displays the HealthFirst Member SnapShot interface for Hannah Banana. The interface is divided into several sections:

- Header:** HealthFirst Health Plans logo, navigation icons (Home, In Basket, Admin), and user information (Banana, Hannah).
- Member Snapshot:** A central area with tabs for Member Snapshot, Plan of Care, Immunizations, Asthma Action Plan, and Session Info. The Member Snapshot tab is active.
- Member Information:**
 - Hannah Banana:** Legal name: Hannah Banana, Gender: Female, Legal sex: Female, Date of birth: 7/24/1959 (66 yrs), SSN: xxx-xx-3001, MRN: 204332.
 - Member PCP/Member Location:** MyChart Declined.
 - Permanent Address:** 6450 US Highway 1, Rockledge Florida 32955-5747.
- Guardian Demographics:**
 - Responsible Party:** JIM BANANA (Authorized Representative).
 - No Form on File:** Address: 1234 ALTO VISTA DR, MELBOURNE FL 32940.
- Coverage:** HFHP SunSaver H1099-016 (HMO) - HEALTH FIRST HEALTH PLANS - HFHP SUNSAVER H1099-016 (HMO). Contract ID: H1099, PBP ID: 016, Subscriber: Self. Medicare Number: 555558787A. Line of Business: Medicare Advantage, Effective From: 1/1/2025. Member: Hannah Banana, Member ID: 52100016200. Coverage PCP/Location: None.

At the bottom of the interface, there is a footer with the text: "Logged in as: EPIC/CARE LINK, SITE ADMINISTRATOR" and "EpicCare® Link and Tapestry® Link licensed from Epic Systems Corporation. © 1979-2025 Epic Systems Corporation. TESTING ENVIRONMENT".



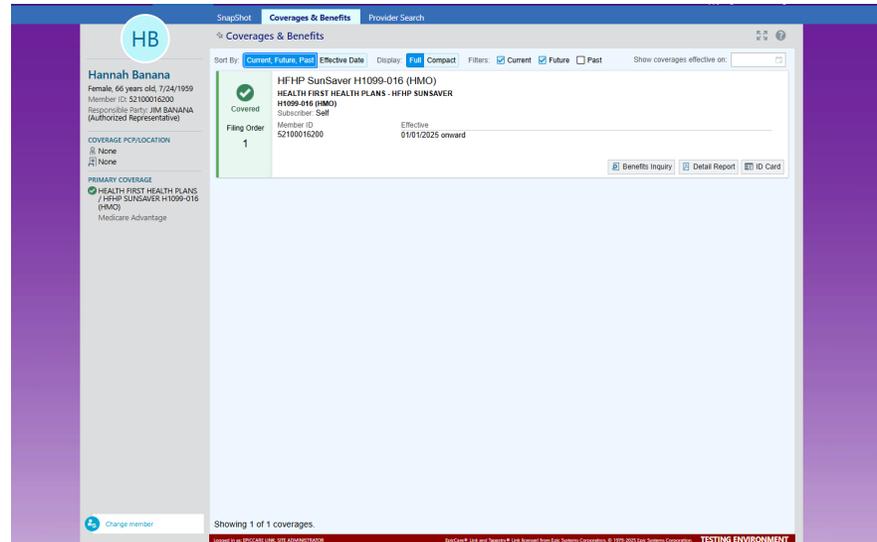
Eligibility, coverage, and benefits.



Eligibility, coverage, and benefits information.

View information about the member's eligibility for health plans, coverages, service areas, networks, and more. Expand and collapse the sections in **Services** and use **Jump to search bar** to find services.

1. From a member's workspace, click the **Coverages & Benefits** tab.
2. From the **Coverages & Benefits** workspace, click **Benefits Inquiry** to see the details about the member's specific benefits plan and package.



Eligibility, coverage, and benefits information.

3. Click **Go back** to list to return to the **Coverages & Benefits** workspace.
4. Click **Coverage Detail Report** to review information about the member's coverages.

The screenshot displays the 'Coverages & Benefits' workspace for member Hannah Banana. The interface includes a sidebar with member details and a main content area showing coverage information and deductibles.

Member Information:
Hannah Banana
Female, 66 years old, 7/24/1959
Member ID: S2100016200
Responsible Party: JIM BANANA (Authorized Representative)

Coverage PCP/LOCATION:
None

PRIMARY COVERAGE:
HEALTH FIRST HEALTH PLANS / HFHP SUNSAVER H1099-016 (HMO)
Medicare Advantage

Coverage Details:
Covered: HFHP SunSaver H1099-016 (HMO)
HEALTH FIRST HEALTH PLANS - HFHP SUNSAVER H1099-016 (HMO)
Subscriber: Hannah Banana, Member: Hannah Banana, Plan year: 1/1/2025 - Onward
Subscriber ID: S2100016200, Member ID: S2100016200, Effective dates: 1/1/2025 - Onward
Relationship: Self, LOB: Medicare Advantage
Carrier information: Please visit the carrier's website to ensure you have the latest benefit information: HEALTH FIRST HEALTH PLANS

Deductibles and MOOPs:
Maximum Out of Pocket: Individual Max Out of Pocket
\$3,500.00 Remaining
\$0.00 of \$3,500.00 used
Pharmacy Maximum Out of Pocket: Pharmacy Maximum Out of Pocket
\$2,000.00 Remaining
\$0.00 of \$2,000.00 used

Benefits Details:
Preventive Care Services: Alcohol Misuse Screening, Medicare Preventive (Fully covered)
Acupuncture (In Network)
Ambulance Services (Fully covered)
Next level after 1 Units used in Alcohol Screening - Medicare Preventive (0 used, 1 remaining)

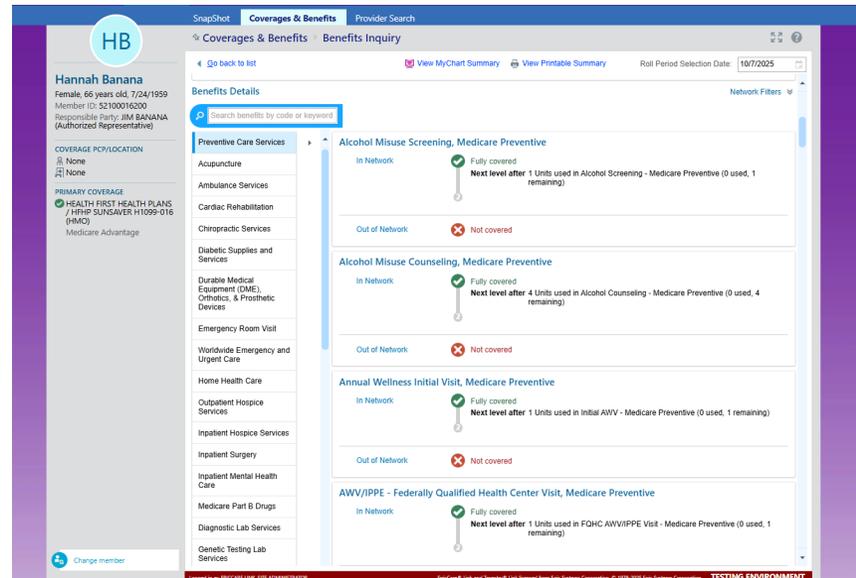
Logged in as: EPCAR LINK SITE ADMINISTRATOR | EPCAR Link and Tapestry Link Internal from Epic Systems Corporation. © 1997-2025 Epic Systems Corporation. TESTING ENVIRONMENT



Eligibility, coverage, and benefits information.

You can also see details about a particular coverage on the benefits summary page to:

- Determine whether a particular service is covered in or out of network.
- Determine whether a coverage is active.
- Determine whether benefits for a particular service are metered and what the limits are for each level of benefits.
- Determine what the member portion will be for a particular service.
- Review a complete summary of benefits.



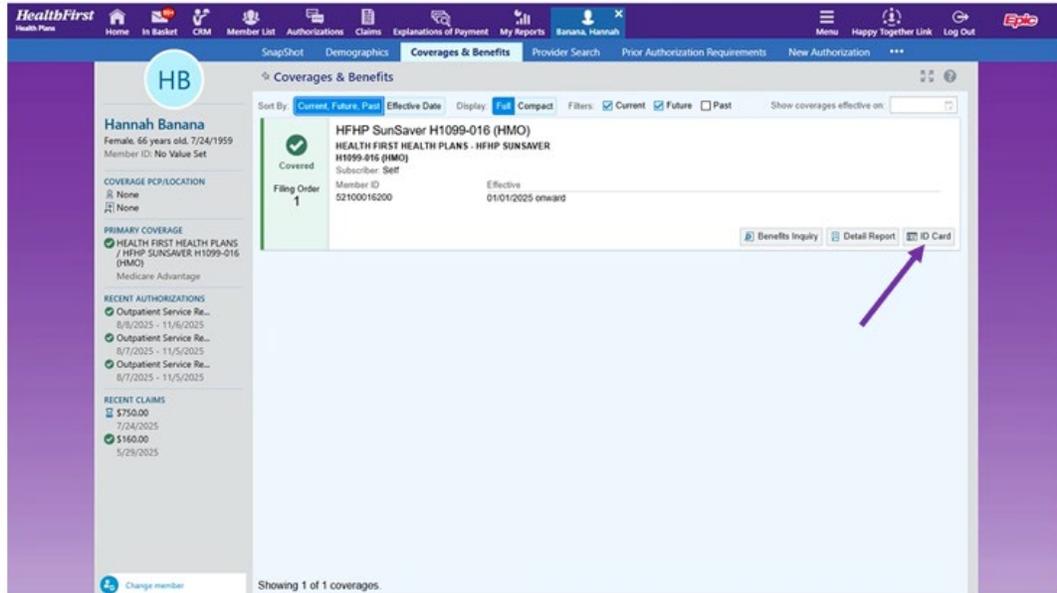
ID cards.



ID cards.

In the **Coverages & Benefits** tab, click on **ID Card** link to access the member's ID card.

Once the image populates to the screen, the user will be able to view the card image. Additionally, there are options to view the other side of the card, print a temporary card, or request a new card.



In Basket messaging.*

Demo.



Happy Together with HFHP.*

Demo.

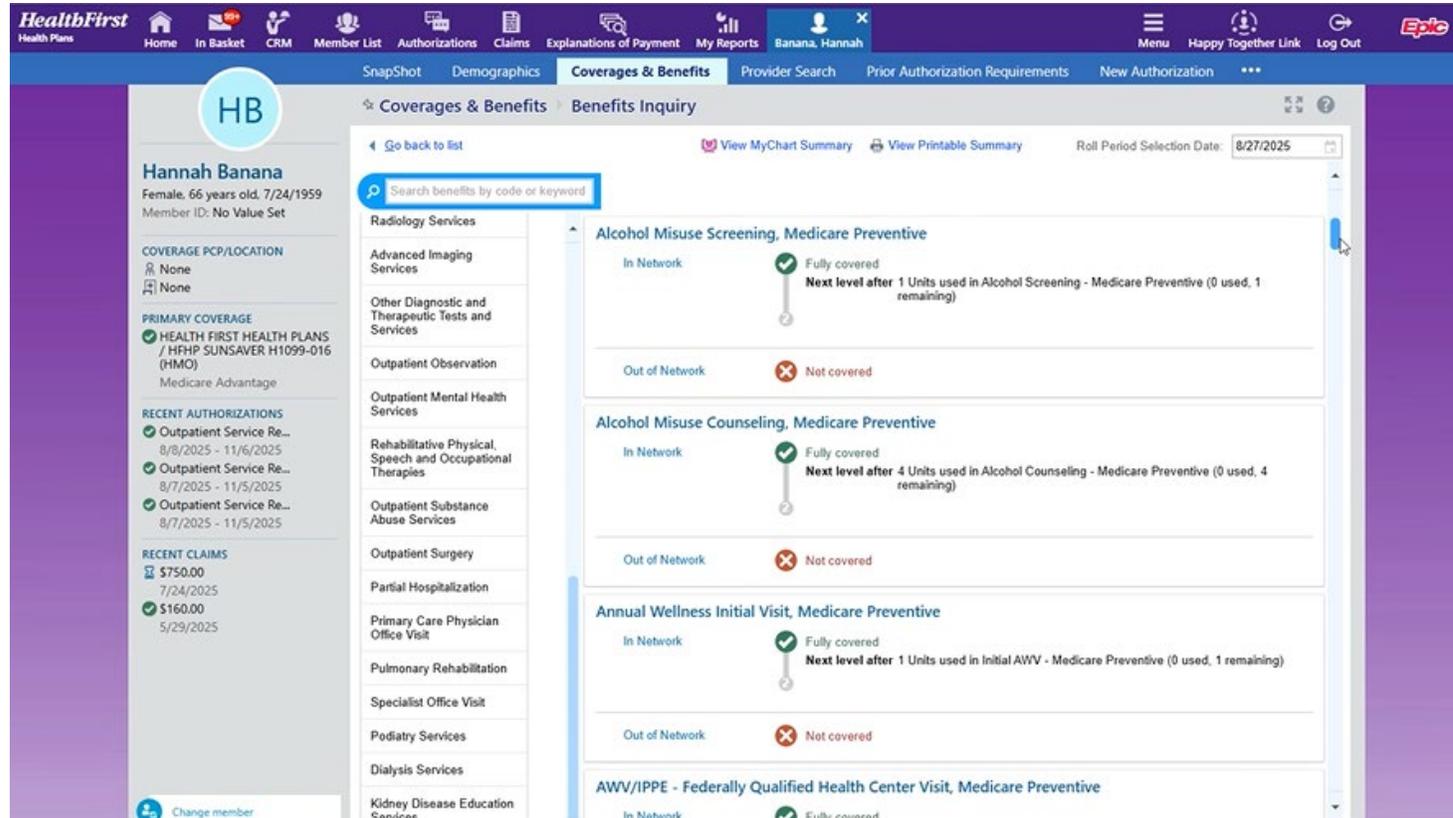


Explanation of benefits (EOB) and accumulators.*



Explanation of benefits (EOB).

In the **Coverages & Benefits** tab, enter a benefit key word or code into the search field and click on the magnifying glass to populate the benefit explanation and coverages.



Accumulators.

In the **Coverages & Benefits** tab, the Deductibles and MOOPs will be visible just above the **Benefits Details**.

The screenshot displays the HealthFirst member portal interface for Hannah Banana. The top navigation bar includes the HealthFirst logo, a home icon, and various utility icons like In Basket, CRM, Member List, Authorizations, Claims, Explanations of Payment, My Reports, and a user profile for Hannah Banana. The main navigation menu is visible, with 'Coverages & Benefits' selected. The left sidebar shows the member's profile: Hannah Banana, Female, 66 years old, born 7/24/1959, with Member ID: No Value Set. Below this are sections for 'COVERAGE PCP/LOCATION', 'PRIMARY COVERAGE' (HEALTH FIRST HEALTH PLANS / HFHP SUNSAVER H1099-016 (HMO) Medicare Advantage), 'RECENT AUTHORIZATIONS' (three outpatient service records), and 'RECENT CLAIMS' (two claims for \$750.00 and \$160.00). The main content area is titled 'Coverages & Benefits - Benefits Inquiry' and shows details for the 'HFHP SunSaver H1099-016 (HMO)' plan. It includes a 'Covered' status, subscriber and member information, plan year (1/1/2025 - Onward), and effective dates. A 'Deductibles and MOOPs' section features a circular gauge showing a 'Maximum Out of Pocket' of \$3,500.00, with '\$3,500.00 Remaining' and '\$0.00 of \$3,500.00 used'. Below this is the 'Benefits Details' section, which includes a search bar and a list of services. Under 'Preventive Care Services', 'Alcohol Misuse Screening, Medicare Preventive' is shown as 'Fully covered' and 'In Network', with a note that the next level after 1 unit is used in Alcohol Screening - Medicare Preventive (0 used, 1 remaining). Other services like Acupuncture, Ambulance Services, Cardiac Rehabilitation, and Chiropractic Services are listed but not detailed.



Authorizations.*



Need to know more?

Contact:

- General questions from primary care providers (PCPs): pcp-network@hf.org.
- General questions from provider network: providernetworkengagement@hf.org.
- Your designated provider outreach team, population management advisor, or provider network specialist.
- If you have not received your user ID and password to login to the TapLink portal or need help establishing a new user account, contact tapestrylinksupport@hf.org.



Closing.

Questions – providernetworkengagement@hf.org.

Thank you for all you do!

