

Provider Portal Tutorial and FAQ

QicLink Benefits Exchange (QBE) – user ID and password are case sensitive.



QicLink Benefits Exchange



www.wmimutual.com

Log In

User ID:

Password:

LOGIN

[New Enrollee/Dependent Registration](#)

[Forget Your Password?](#)

Once inside QBE – please use all CAPS.



QicLink Benefits Exchange

[Home](#) [Benefits Information](#) [Claims](#) [Change Password](#) [Update Security Questions](#) [Log Off](#)

Welcome To QicLink Benefits Exchange

Click the link to go to [User Logon Statistics Information](#)

Click the link to go to [Cognizant Web Site](#)



Benefits Tab

You have the ability to search by enrollee SSN, enrollee ID, enrollee last name, or by the same for dependents.

Remember to be in all CAPS.

When searching by member ID –

9W – remove the 9W and only enter the numbers

Medicare Supplement – use their Medicare ID number

8T – use the full ID number

The system will provide up to date benefit information for deductible and out of pocket limits and amounts remaining.

Benefits Information

Member Information	Deductible	Out-of-Pocket
Group #: Group Name: Location: Enrollee Name: Enrollee ID: Enrollee SSN:		
Family Members: ▼		Please select a date: 6/18/2025

0 record(s) found

Year	Description	Accum Type	Individual Ded Limit Amount Satisfied Amount Remaining	Family Ded Limit Amount Satisfied Amount Remaining	Number Per Family Limit Number Satisfied

Claims Tab

You have the ability to search by enrollee SSN, enrollee ID, enrollee last name, or by the same for dependents. Or by claim number, check number, or voucher number. **Remember to be in all CAPS.**

When searching by member ID –

9W – remove the 9W and only enter the numbers

Medicare Supplement – use their Medicare ID number

8T – use the full ID number

Depending on how you search, a list of enrollees/members may show. Double click on the correct member to search for claims.

Claim Search

Enrollee/Member	Claim Number	Check Number	Voucher Number																				
Enrollee/Member Search Enrollee Last Name ▼ [REDACTED] Find Clear																							
Enrollee/Member List 1 record(s) found Page Size: 10 Go ☐ Display All Records <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th>SSN</th> <th>Member ID</th> <th>Last Name</th> <th>First Name</th> <th>Birth Date</th> <th>Benefit Effective Date</th> <th>Family Termination Date</th> <th>Group #</th> <th>Group Name</th> <th>Location Code</th> </tr> </thead> <tbody> <tr> <td>[REDACTED]</td> <td>[REDACTED]</td> <td>[REDACTED]</td> <td>[REDACTED]</td> <td>[REDACTED]</td> <td>2/1/2022</td> <td>12/31/9999</td> <td>[REDACTED]</td> <td>[REDACTED]</td> <td>UT</td> </tr> </tbody> </table>				SSN	Member ID	Last Name	First Name	Birth Date	Benefit Effective Date	Family Termination Date	Group #	Group Name	Location Code	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	2/1/2022	12/31/9999	[REDACTED]	[REDACTED]	UT
SSN	Member ID	Last Name	First Name	Birth Date	Benefit Effective Date	Family Termination Date	Group #	Group Name	Location Code														
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	2/1/2022	12/31/9999	[REDACTED]	[REDACTED]	UT														

You can narrow down your search or just hit the search button for all claims.

Claim Search

Enrollee/Member	Claim Number	Check Number	Voucher Number
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[Enrollee/Member Claim Search](#) [Go Back To Enrollee/Member List](#)

Member Name: From Date Incurred:

Inquiry Type: Thru Date Incurred:

A list of claims or a claim will pull up.

To view / print the EOB click on the [Check EOB link](#).

Claim Search

Enrollee/Member	Claim Number	Check Number	Voucher Number
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[Enrollee/Member Claim List](#) [Go Back To Enrollee/Member Claim Search](#)

19 record(s) found Page Size: ☐ Display All Records

Claim/ Worksheet Number	Name	Birth Date	Status	Service From	Serv Provider Name Paid Provider Name Total Charges	Check # Check Date Check Amt	View Actual Check/EOB
01396-01			Claim completed and paid	12/01/2023	MD MD \$236.45	EFT000 01/15/2024 \$71.81	Check EOB

If you receive a "RedCard" error, it means the EOB is not yet ready to view. Check back in a few days.

If the claim does not show, and you have allowed up to 30 days since your submission, please resubmit the claim.

Payor ID- 30434 Medicare Supplement claims

Payor ID-37247 All others

Claims Mailing Address:

PO Box 21703

Eagan, MN 55121

Fax (801) 263-1189 or email claims@wmimutual.com