



Hawaii Provider User Registration

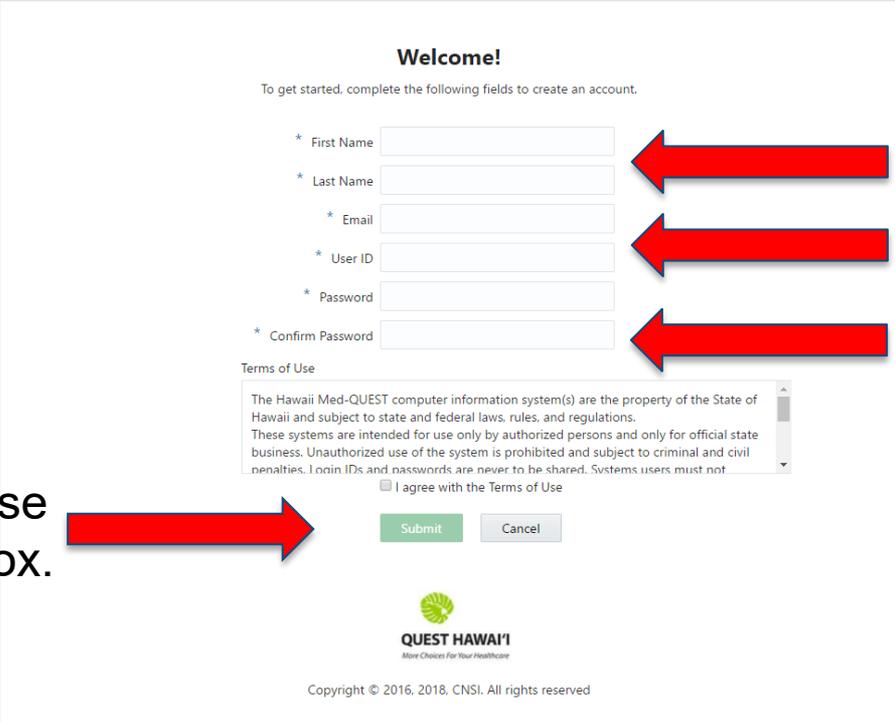
HOKU Provider User Registration

Hawaii Train-the-Trainer Materials

September 17, 2019

Setting Up Your Account

Complete the form below. Please write down your User ID and Password.



Welcome!

To get started, complete the following fields to create an account.

- * First Name
- * Last Name
- * Email
- * User ID
- * Password
- * Confirm Password

Terms of Use

The Hawaii Med-QUEST computer information system(s) are the property of the State of Hawaii and subject to state and federal laws, rules, and regulations. These systems are intended for use only by authorized persons and only for official state business. Unauthorized use of the system is prohibited and subject to criminal and civil penalties. Login IDs and passwords are never to be shared. Systems users must not

I agree with the Terms of Use


QUEST HAWAII
More Choices For Your Healthcare

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Use real First & Last Name

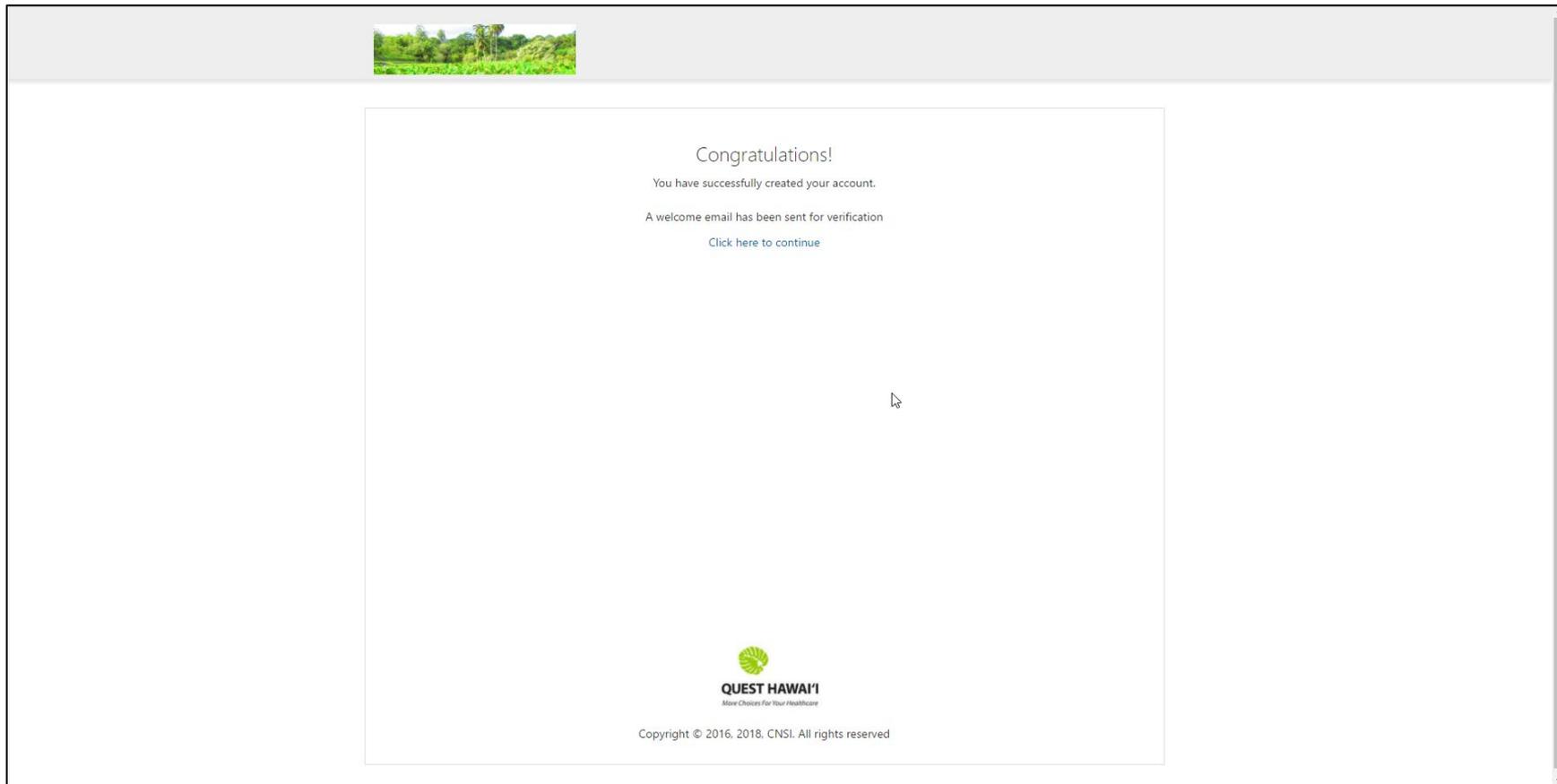
Add your email & choose your User ID

Set & confirm your password

Read Terms of Use and click checkbox. Click Submit.

Completed Screen

An email has been sent to your email address. Please open that email.



Verify Your Email Address

Hello John smith,

Your Med-QUEST account is ready. To get started, [verify your email](#).

Verify Your Email



Click to verify your email address

Details

If the [verify your email](#) link doesn't work, please copy and paste the following URL into the address bar of your browser:

<https://idcs-3fcb8deb0d8148e5abb998941638d2b6.identity.oraclecloud.com/ui/v1/verify?token=pEV073LB900dwsUixPYCYA0S2zAcEwQzBCX4bElrGEg%3D>

Important: This link will expire on [DATE].

If you don't recognize this message, contact your system administrator at Dinesh.Kumar@cns-inc.com.

User must complete this step within 7 days, or the user will have to repeat the set up steps.

Verification Message

Once verified, a message displays to notify you about the verification and to direct you to click the link to continue.

Email Verified

✉ Your email has been verified.

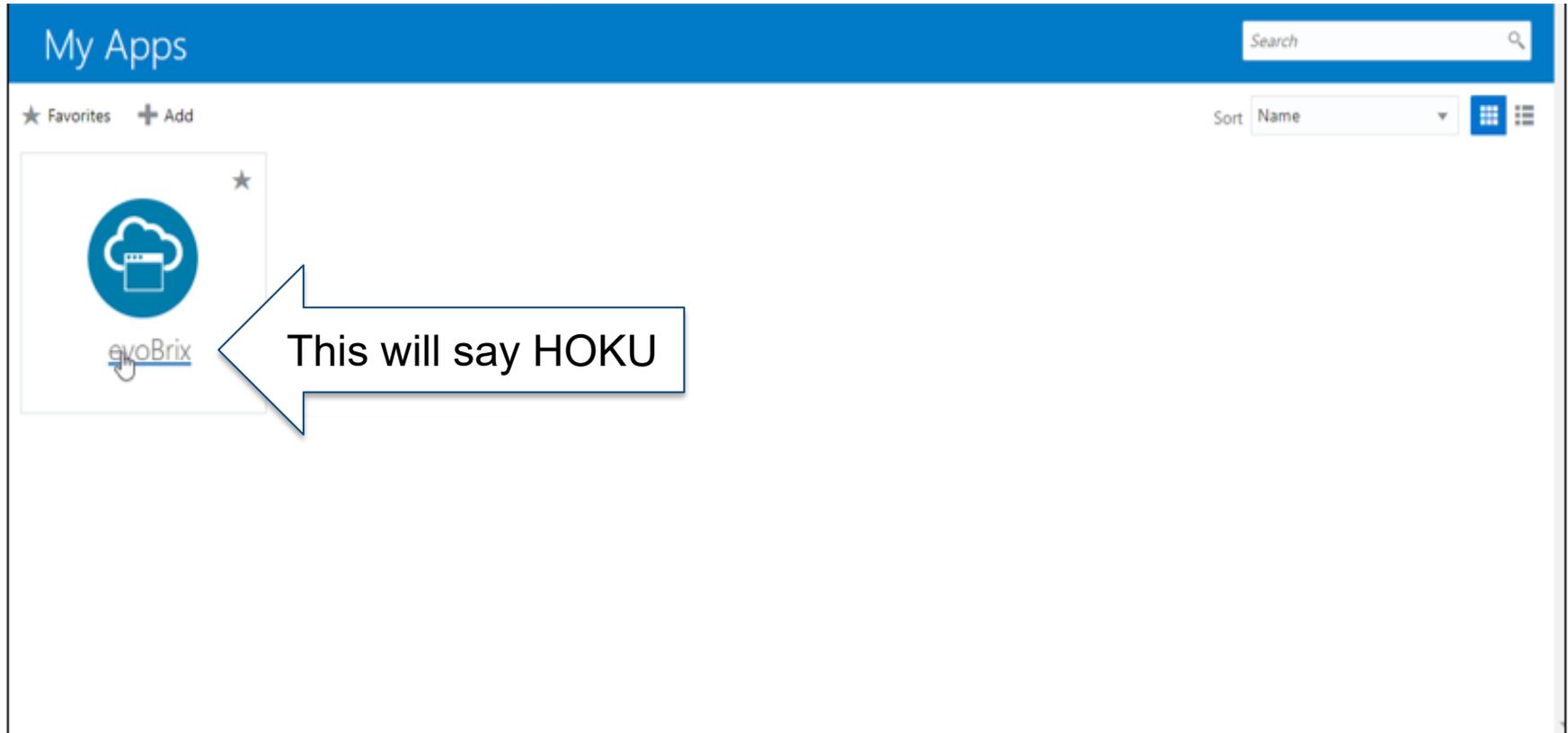
[Click here to continue](#)



Click Link to Continue

Landing Page

Click the HOKU icon to access the application.



Terms of Use Page

Once reviewed, click the Terms of Use checkbox and then click Continue.

Terms of Use

Please review the Terms of Use governing access to this application. You must agree to them to proceed.

Terms of Use

Thank you for visiting the State of Hawai'i Department of Human Services Med-QUEST's website. By visiting and using this web site, its subpages, and content, you are agreeing to these terms of access and use.

Notice

You have entered an official State of Hawai'i WEB SITE which may be used for authorized purposes only. This WEB SITE is not nor is it intended to be an open public forum.

Definition

As used in these terms of access and use, "WEB SITE" means and refers to all or any portion of the official State of Hawai'i government web site, subpages and content. As used in these terms of access and use, "content" includes the information, material, documents, text, graphics, images, logos, and HTML programming format (including meta tags or the meta http-equivalent), and scripts.

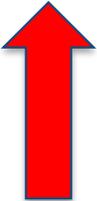
Terms of Use

Your use of the WEB SITE is subject to the following terms.

You agree not to access, or attempt to access, or allow any employee, agent or contractor to access or attempt to access any of the Services by any means other than through the interface that is provided through this WEB SITE, unless you have been specifically allowed to do so in a separate, written agreement with the State of Hawaii Department of Human Services, Med-QUEST Division (MQD). You specifically agree not to access, or attempt to access, or allow any employee,

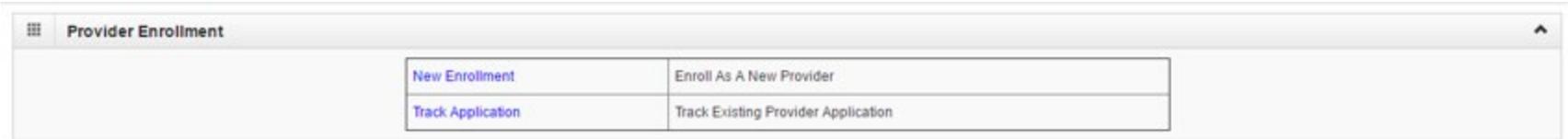
I agree to the Terms of Use

Cancel Continue



First Screen

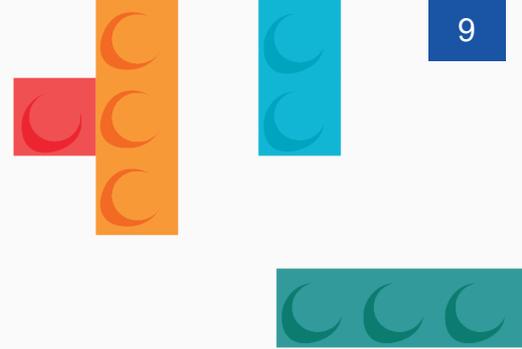
Select 'New Enrollment' or 'Track Application'



The screenshot shows a web interface titled "Provider Enrollment". It contains a table with two rows of options:

| | |
|-------------------|-------------------------------------|
| New Enrollment | Enroll As A New Provider |
| Track Application | Track Existing Provider Application |

- If you are a new Hawaii Medicaid provider, you will select 'New Enrollment.'
- If you are a Hawaii Medicaid provider and received a letter with your application ID number, you will select 'Track Application' and input your application ID number on the next page.



Thank You!

*Persistence, Perseverance and Passion
as always remains our credo.*

Contact Med-QUEST

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