



1. Go to Main HSR website (<https://www.hsri.com>)
2. Hover mouse over or click on Claims Administration Services
3. Click on HSR Claims Reports (self-serve)

HSR Claims Report Tool

Login if you already have an account

Email Address:	<input type="text"/>
Password:	<input type="password"/>
<input type="submit" value="Submit"/>	

- OR -

Complete the [Registration Request Form](#) if you don't.

Opens Registration Form page



HSR Claims Report Tool



This form is used to verify identity and determine eligibility of persons requesting access to the HSR Claims Report Tool website. Users of the site will be able to generate online reports based on sensitive claim data. This data MUST be safeguarded in accordance with strict [HIPAA regulations](#). Submission of this form does NOT guarantee acceptance.

Registration Request Form

First Name	<input type="text"/>
Last Name	<input type="text"/>
Title	<input type="text"/>
Company Name	<input type="text"/>
Company Address	<input type="text"/>
Company City	<input type="text"/>
Company State, Zip Code	<input type="text"/> <input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>
Requested Access Level	<input type="radio"/> Single Policyholder (access to only 1 policy number) <input type="radio"/> Agent/Broker (access to your policy accounts) <input type="radio"/> Insurance Company (access to all insurance company's policy numbers)
Applicable Insurance Company Name, OR Specific Policy Number(s)	<input type="text"/>
Any Other Information?	<input type="text"/>

Please allow at least 3 business days for approval processing.

This form is used to verify identity and determine eligibility of persons requesting access to the HSR Claims Report Tool website. Users of the site will be able to generate online reports based on sensitive claim data. This data MUST be safeguarded in accordance with strict [HIPAA regulations](#). Submission of this form does NOT guarantee acceptance.

Registration Request Form

First Name	Joe
Last Name	Requester
Title	Policy Administrator
Company Name	Brand New Insurance Co
Company Address	123 Main St
Company City	Anytown
Company State, Zip Code	Texas, 77777
Email Address	JoeRequester@BrandNewInsCo.org
Phone Number	123-123-1231
Requested Access Level	<input checked="" type="radio"/> Single Policyholder (access to only 1 policy number) <input type="radio"/> Agent/Broker (access to your policy accounts) <input type="radio"/> Insurance Company (access to all insurance company's policy numbers)
Applicable Insurance Company Name, OR Specific Policy Number(s)	2012000001
Any Other Information?	

Please allow at least 3 business days for approval processing.

Submit Form

Generates email

HSR Policy Loss Information - Access Request

FROM: JoeRequester@BrandNewInsCo.org
TO: ClientRelations@hsri.com
CC: JoeRequester@BrandNewInsCo.org

Please grant me access to the HSR Claims Report Tool website.

The following inputs apply:

First Name: Joe
Last Name: Requester
Title: Policy Administrator
Company Name: Brand New Insurance Co
Company Address: 123 Main St
Company City, State Zip: Anytown, TX 77777
Email Address: JoeRequester@BrandNewInsCo.org
Phone: 123-123-1231
Access Level: Policy Holder
Ins Co / Policy #(s): 2012000001
Comments:

When you submit the form, the screen display should look something like this:

Registration Request Form

First Name	Joe
Last Name	Requester
Title	Policy Administrator
Company Name	Brand New Insurance Co
Company Address	123 Main St
Company City, State Zip Code	Anytown, TX 77777
Email	JoeRequester@BrandNewInsCo.org
Phone #	123-123-1231
Requested Access Level	Policy Holder
Applicable Ins Co / Policy #s	2012000001
Additional Comments	
An email request has been sent to ClientRelations@hsri.com based on your inputs above. You will be notified via email if/when access has been granted. Please allow at least 3 business days for approval processing.	

Once access has been granted, you will receive an email similar to the one posted below

HSR Claims Report Tool - New Account

FROM: ClientRelations@hsri.com

TO: JoeRequester@BrandNewInsCo.org

Monday, July 9, 2012 2:10 PM

You have been granted 'Policy Holder' access to the HSR Claims Report Tool website (http://www.hsri.com/HSR_Reports).

As such, you will be able to generate online reports pertaining to the sensitive claims data entrusted to you by your clients.

Please safeguard these reports in accordance with HIPAA regulations.

Your logon user name is **JoeRequester@BrandNewInsCo.org** (NOT case-sensitive)

Your temporary password is **XXXXXXXX**

The system will force a new password after acknowledging the temporary one. Remember that your new password will be case-sensitive.

Enter the security credentials you received in the email.
The system will prompt you to change the emailed password.
Enter that password in the “Old Password” slot below.
Enter your new password in the bottom 2 slots.

HSR Claims Report Tool

Login if you already have an account

Email Address:	<input type="text" value="JoeRequester@BrandNewInsCo.org"/>
Password:	<input type="password" value="••••••"/>
<input type="button" value="Submit"/>	

- OR -

Complete the [Registration Request Form](#) if you don't.

HSR Claims Report Tool

User ID:	<input type="text" value="JoeRequester@BrandNewInsCo.org"/>
Old Password:	<input type="password"/>
New Password:	<input type="password"/>
Confirm:	<input type="password"/>
<input type="button" value="Submit"/>	

HSR Claims Report Tool

User ID:

JoeRequester@BrandNewInsCo.org

Old Password:

••••••••

New Password:

••••••••

Confirm:

••••••••

Submit



HSR Claims Report Tool

for JOE REQUESTER [[Logoff](#)]

Available Reports

- #1 - [Policy Loss Run Report](#)

[Bug Report](#) | [Data Maintenance Request](#) | [Enhancement Request](#)
[About Us](#) | [Contact Us](#)

As new reports become available, they will be listed here.
Click on a link to open the applicable report.

HSR Claims Report Tool

for JOE REQUESTER

Policy Loss Run Report

The screenshot shows the 'Policy Loss Run Report' interface. At the top, there is a text input field labeled 'Enter Policy Number:' containing the value '2012000001'. Below this are two rows of radio button options. The first row has 'Policy in Total' (selected) and 'Separate Location'. The second row has 'Detailed' (selected) and 'Summary'. Below these is a section titled 'Choose Either the Policy Year or the Custom Date Range Option'. It contains two options: 'Option #1 - Policy Year' with a dropdown menu showing '[ALL]', '2012', and '2011'; and 'Option #2 - Custom Date Range' with 'From:' and 'To:' input fields. Each option has 'Go!' and 'Clear' buttons. Red arrows point from the explanatory text boxes to the policy number field, the 'Policy in Total' radio button, the 'Detailed' radio button, the '[ALL]' dropdown option, and the 'From:' and 'To:' input fields.

If you have access to only one policy number, that number will be displayed. Otherwise, enter in one of your authorized policy numbers.

Select how you want the report grouped

Select level of detail to display

Choose one or more Policy Years to display,
-OR -

Select a custom date range

HSR Claims Report Tool

for JOE REQUESTER

Policy #: 2012000001

Total Claims:	2123
Amount Claimed:	\$3,182,282.30
Amount Other Insurance:	\$515,030.51
Amount Paid:	\$1,074,404.93

Loss Run

HTML Excel

Show Expanded Ineligible Fields
 Show Denied Claims Only

Run Report

Policy Loss Run Report

Display on screen
or open in Excel

Enter Policy Number:	<input type="text" value="2012000001"/>
Group By:	<input checked="" type="radio"/> Policy in Total <input type="radio"/> Separate Location
Summary or Detailed?	<input checked="" type="radio"/> Detailed <input type="radio"/> Summary
Choose Either the Policy Year or the Custom Date Range Option	
Option #1 - Policy Year -- Select Policy Year(s) -- [ALL] 2012 2011	<input type="button" value="Go!"/> <input type="button" value="Clear"/>
Option #2 - Custom Date Range -- Select Date Range Option -- From: <input type="text"/> To: <input type="text"/>	<input type="button" value="Go!"/> <input type="button" value="Clear"/>



Health Special Risk, Inc.
POLICYHOLDER LOSS RUN
 Detailed Report

880 Sibley Memorial Highway, Suite 101, Mendota Heights, MN 55118
 (800)910-0131 (651)455-1877(fax)
 HSR Plaza II, 4100 Medical Parkway, Carrollton, TX 75007
 (800)328-1114 (972)512-5280(fax)

Policy Year: ALL
 Mon Jul 9 15:13:08 CDT 2012

www.healthspecialrisk.com

Policy Year	Location Name	Plan	Activity	Status	Last Name	First Name	Claim #	Loss Date	Service Date	Paid Date	Amount Claimed	Deductible	Other Ins. Paid	Ineligible	HSR Paid Amount
2011			BASKETBALL	Finalized			00435795-01	20111214	20120130	20120312	\$125.00	\$0.00	\$0.00	\$80.00	\$45.00
2011			BASKETBALL	Finalized			00435795-01	20111214	20120213	20120312	\$125.00	\$0.00	\$0.00	\$85.00	\$40.00
2011			FOOTBALL	Finalized			00461920-01	20120522	20120523	20120617	\$95.00	\$0.00	\$0.00	\$20.00	\$75.00
2011			FOOTBALL	Finalized			00461920-01	20120522	20120523	20120617	\$415.00	\$0.00	\$0.00	\$370.00	\$45.00
2011			NOT SPECIFIED	Finalized			00411346-01	20111117	20111129	20111219	\$35.00	\$0.00	\$0.00	\$0.00	\$35.00
2011			NOT SPECIFIED	Finalized			00411346-01	20111117	20111129	20111219	\$55.00	\$0.00	\$0.00	\$15.00	\$40.00
2011			NOT SPECIFIED	Finalized			00411346-01	20111117	20111129	20111219	\$235.00	\$0.00	\$0.00	\$195.00	\$40.00
2011			NOT SPECIFIED	Finalized			00435795-02	20111214	20120215	20120327	\$21.92	\$0.00	\$0.00	\$0.00	\$21.92
2011			STUDENT	Finalized			00499022-01	20120129	20120129	20120420	\$1,210.00	\$0.00	\$0.00	\$1,210.00	\$0.00
2011			NOT SPECIFIED	Finalized			00418317-02	20111201	20111201	20120314	\$8.56	\$0.00	\$0.00	\$0.00	\$8.56
2011			NOT SPECIFIED	Finalized			00418317-02	20111201	20111201	20120314	\$20.54	\$0.00	\$0.00	\$0.00	\$20.54
2011			NOT SPECIFIED	Finalized			00418317-02	20111201	20111201	20120314	\$856.00	\$0.00	\$0.00	\$85.60	\$770.40
2011			STUDENT	Finalized			00417526-01	20111101	20111101	20120115	\$500.00	\$0.00	\$0.00	\$425.00	\$75.00
2011			STUDENT	Finalized			00417526-01	20111101	20111101	20120115	\$545.00	\$0.00	\$0.00	\$0.00	\$545.00
2011			STUDENT	Finalized			00417526-02	20111101	20111101	20120621	\$266.00	\$0.00	\$0.00	\$226.00	\$40.00
2011			STUDENT	Finalized			00418317-01	20111201	20111201	20120118	\$110.00	\$0.00	\$0.00	\$0.00	\$110.00
2012			BASKETBALL	Finalized			00431013-01	20120808	20120208	20120226	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Totals -->											\$3,182,282.30	\$36,822.39	\$818,030.81	\$1,608,362.60	\$1,074,404.93

Onscreen SAMPLE output