



Provider self-service is the way to go! We have self-service provider tools to help when seeking information from Blue Cross and Blue Shield of Louisiana. These tools include **iLinkBlue**, **Interactive Voice Recognition (IVR)** and **HIPAA transactions**. Services that are no longer initially handled by our Customer Care Center include member eligibility, claim status inquiries, allowable charge searches and medical policy.

Services available in iLinkBlue

Use our secure online tool, iLinkBlue (www.bcbsla.com/ilinkblue), for up-to-date information. Your administrative representative grants access to users at your organization. With iLinkBlue you can:

● Research Blue Cross **Allowable Charges**.

- Click on **"Payments."**
- Click on the professional providers or outpatient facilities **"Allowable Charges Search"** application.
- Search by entering the date of service, appropriate network and appropriate code or code ranges.

● Submit **Authorization Requests** for BCBSLA members.

- Click on **"Authorizations."**
- Click on the applicable application:
 - **BCBSLA Authorizations** for inpatient and outpatient requests.
 - **Behavioral Health Authorizations** for behavioral health requests.
 - **Carelon Authorizations** for outpatient high-tech diagnostic, cardiology services, musculoskeletal (MSK) joint surgery, sleep studies, genetic testing, spine surgery, spine pain management and radiation oncology authorizations.

● Find **Member Eligibility and Benefits** information.

- Click on **"Coverage."**
- Click on **"Coverage Information."**
- Enter the member ID number or subscriber Social Security Number to access the Coverage Information screen.
- Click **"Summary"** to view the member's cost share information or click **"Benefits"** to view coverage details.

● Check the **Claim Status** of paid/rejected or pended claims. You can search by claim number.

- Click on **"Claims."**
- Click on **"Claims Status Search"** under the Claims Research sub-menu.
- Fill out the appropriate fields then click **"Search."**

● Submit **Action Requests** to electronically communicate claim questions or concerns to Blue Cross to review for correct processing.

- After completing a Claims Status search, view the **"Paid/Rejected Claims Results"** grid.
- Click on **"Action Request"** icon associated with claim.

● Review current **Medical Policies**. Benefit determinations are made based on the medical policy in effect at the time of services.

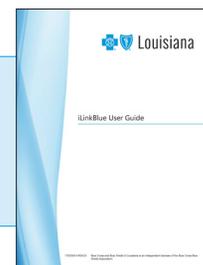
- Click on **"Authorizations."**
- Click on the **"Medical Policies Guidelines"** link under the Authorizations-BCBSLA Members sub-menu.
- Enter the keyword, policy number or code you want to search. Then click the **"Search"** button.
- A list of medical policies will show. Click on the medical policy you want to view.

● Electronically send **Document Uploads** that would normally be faxed, emailed or mailed to select departments. The file types include DOC, DOCX, PDF, TIF and TXT under 10 MB in size.

- Click on **"Claims."**
- Click on the **"Document Upload"** link under the Medical Records sub-menu.

For More Information

View step-by-step instructions in our *iLinkBlue User Guide*. It is available at www.bcbsla.com/providers >Resources.



Services available using IVR

Call our Integrated Voice Recognition (IVR) system at 1-800-922-8866 for automated benefits and claim status inquiries. IVR is a keypad or voice response telephone system designed to help you:

- Find **Member Eligibility and Benefits** information.
 - Press “1” to select **Medical**.
 - Press “1” to select **Benefits**.
 - Say or enter the numeric portion of the member ID as it appears on the member ID card.
 - Enter the member date of birth to hear benefits for which the member is eligible.
 - Press “2” for more information including the effective date.
- Check the **Claims Status** of a patient.
 - Press “1” to select **Medical**.
 - Press “2” to select **Claims**.
 - Say or enter the numeric portion of the member ID as it appears on the member ID card.
 - Enter the member date of birth.
 - Press “1” to hear the claim status.
 - Enter the date of service in the MMDDYYYY format to hear the status of a claim(s) for that date.

For More Information and IVR Tips

View the *Automated Benefits & Claim Status* (IVR Navigation Guide) provider tidbit. It is available online at www.bcbsla.com/providers >Resources >Tidbits.



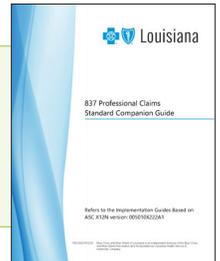
Services available via HIPAA Transactions

Submit electronic inquiries to Blue Cross via HIPAA Transactions. Send a request and receive a response with the requested information. Use HIPAA Transactions to:

- Find **Member Eligibility and Benefits** information.
 - **HIPAA transactions 270 and 271** are inbound and outbound transactions that show member eligibility.
- Check the **Claims Status** of a patient.
 - **HIPAA transactions 276 and 277** are inbound and outbound transactions that show claim status.

For More Information

Access detailed companion guides online at www.bcbsla.com/providers >Electronic Services >Companion Guides



What if I used the self-service tools and have additional questions?

After completing self-service research, and you still have questions, you may call our Customer Care Center. You will be asked for key information to verify the use of self-service tools. The following information is required when calling the Customer Care Center for:

- Member eligibility - Member's effective or termination date
- Pended claims - Claim number and pended reason
- Paid/rejected claims - Paid or ineligible amount, code and claim number