

Quick Overview of Electronic Options for Behavioral Health Providers

Blue Cross and Blue Shield of Illinois (BCBSIL) offers and supports electronic options to help you streamline administrative functions in your office. **Several examples are listed below, with links for more details.** To access these online options, you must be a registered Availity[®] Essentials user. Go to Availity to sign up now at no cost. If you're already registered, check with your Availity administrator to gain access to resources in your account. To view all online options available to you, refer to the Provider Tools section of our website.

Would you like an online tour? Join us for an Availity Orientation: Save Time and Go Online webinar. For dates, times and online registration, go to the <u>Webinars and Workshops</u> page. If you need further assistance or would like **customized training,** email our Provider Education Consultants.

Managa My	Attention Availity Administrators, Covered Availity tools require years to "Colort a
Manage My Organization	Attention Availity Administrators: Several Availity tools require users to "Select a Provider" from the National Provider Identifier (NPI) dropdown list. As the Administrator for
3	your organization, you must add/manage your provider information using Manage My
	Organization, located in My Account Dashboard on the Availity homepage.
Patient ID Finder	This tool allows you to quickly obtain a BCBSIL patient's insurance ID and group number
	after entering patient-specific data elements.
Eligibility and	Confirm patient coverage and check benefit details in real-time, 24 hours a day. You'll also
Benefits	get details on prior authorization requirements and vendors, if applicable.
Prior Authorization -	If the service requires prior authorization through BCBSIL, you can use the BlueApprovR
BlueApprovR SM *	tool, accessible in our BCBSIL-branded Payer Spaces section via Availity, to get real-time
	approval of certain behavioral health services for many of our commercial non-
	HMO members.
Electronic Claim	For greater security and accuracy of data, with faster processing and payment, submit
<u>Submission</u>	electronic claims one at a time or in batch, and receive confirmation upon acceptance.
Claim Status Tool	This tool offers enhanced, real-time claim status information for commercial and
	government programs (Medicare Advantage and Illinois Medicaid) claims.
Electronic Claim	You can enroll online to receive claim payments via 835 Electronic Funds Transfer (835
Payment and	EFT) along with 835 Electronic Remittance Advice (835 ERA) files from BCBSIL.
Remittance - Online	
Enrollment	
Remittance Viewer	This tool offers providers and billing services a convenient way to view and help reconcile claim data provided by BCBSIL in the 835 ERA.
Reporting On-	Use Reporting On-Demand to view, download, save and/or print provider claim
Demand	summaries.
Claim Inquiry	Use this tool to request claim review for certain finalized commercial claims. (Note: This
Resolution*	tool should not be used for appeals.)
Electronic Refund	Receive and respond online to overpayment recovery requests on commercial claims.
Management*	
Medical Record	This tool allows you to confirm receipt (up to four) of the most recent medical records
Status Viewer	submitted by mail or fax to BCBSIL for claim processing and prior authorizations.

^{*}These tools are not applicable for government programs (Medicare Advantage or Illinois Medicaid) members.

If you don't have online access, we have other user-friendly options, too. To check eligibility and benefits for commercial members, use our interactive voice response (IVR) phone system. You'll get a confirmation number with your results. You can choose to receive benefit details via fax. See our IVR caller guides for phone numbers and details: 1.) Claims; 2.) Eligibility and Benefits; and 3.) Behavioral Health Preauthorization. For government programs members, call the number on the member's BCBSIL ID card to check eligibility and benefits.

Checking eligibility and/or benefit information and/or the fact that a service has been prior authorized is not a guarantee of payment. Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility and the terms of the member's certificate of coverage applicable on the date services were rendered. If you have any questions, please call the number on the member's ID card.

Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSIL. BCBSIL makes no endorsement, representations or warranties regarding third party vendors and the products and services they offer.

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