



BlueCross BlueShield of South Carolina and
BlueChoice® HealthPlan of South Carolina

My Insurance ManagerSM User Guide

Published by Provider Relations and Education
Your Partners in Outstanding Quality, Satisfaction and Service

Revised: August 2025

In the event of any inconsistency between information contained in this handbook and the agreement(s) between you and BlueCross, the terms of such agreement(s) shall govern. The information included is general information and in no event should be deemed to be a promise or guarantee of payment. We do not assume and hereby disclaim any liability for loss caused by errors or omissions in preparation and editing of this publication.

Contents

Claims Status..... 1

 For Health Providers 2

 Claim Attachments..... 7

 For Dental Providers 12

Patient Directory..... 16

 For Health Providers 17

 For Dental Providers 19

Superbill Maintenance..... 21

 For Health Providers 22

 For Dental Providers 27

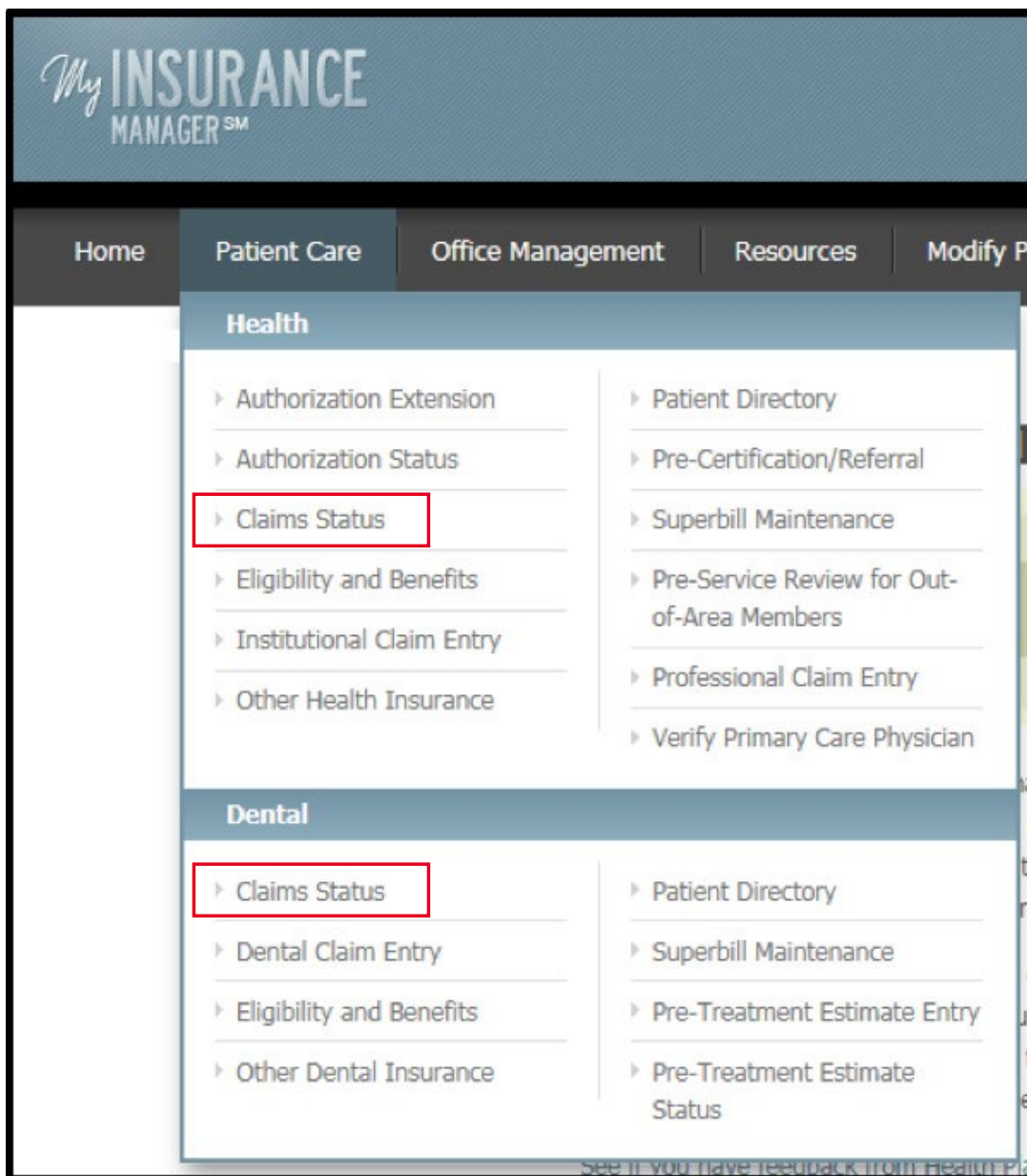
Coordination of Benefits..... 32

 For Health Providers 33

 For Dental Providers 34

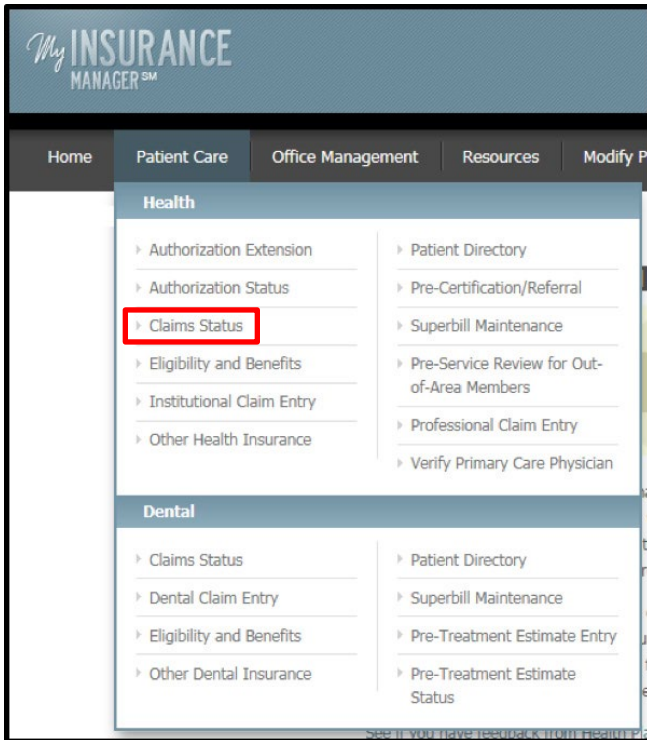
Claims Status

There are two ways you can get the status of a claim through My Insurance Manager — by using the member ID or a claim number. You can get additional claim information by sending a secure email message to Ask Provider Services or by initiating STATchatSM.



For Health Providers

From the Patient Care menu, choose Claim Status. When searching for a claim by member ID, complete the required information. Make sure you enter the member ID exactly as it appears on the patient's insurance card, including the alpha prefix and any additional letters, if applicable.

A screenshot of the 'Claims Status' search form. The form is titled 'Claims Status' and includes a 'Patient Selection' section. It has a 'Health Plan' dropdown menu set to 'BlueCross BlueShield Plans'. The 'Search By' section has two radio buttons: 'Member ID' (selected) and 'Claim Number'. Below this is a 'Member ID' text field with a note 'include alpha prefix, if applicable'. There is also a 'Patient's Date of Birth' text field with a note 'mm/dd/yyyy'. The 'Advanced Search' section has four radio buttons: 'All Claims in System' (selected), 'Date of Service', 'Last 6 Months', and 'Last Year'. At the bottom, there is an 'Additional Information' section with a '+' icon and a 'Continue' button.

- Health plan drop-down menu options: BlueCross BlueShield Plans, BlueChoice HealthPlan, State Health Plan and Federal Employee Program
- You must enter the patient's date of birth or the first and last name
- Choose an advanced search according to all claims in system; date of service; last six months; or last year
- Expand the Additional Information option by clicking [+] to input the patient's last name, first name and/or gender
- Select **Continue**.

When searching for a claim by claim number, enter the claim number as stated on the claim entry confirmation screen or the remittance advice. Select **Continue**.

[Home](#) [Patient Care](#) [Office Management](#) [Resources](#) [Modify Profile](#) [Profile Administration](#) [Staff Directory](#)

Welcome, Your Name of Your Practice ([Log Out](#)) [Go to Message Center](#)

Claims Status [Printer-Friendly](#)

* Indicates required field.

Patient Selection

🔍 To get claims status information, please enter this information. If your patient had a different Health Plan previously, please choose the Health Plan that was in effect for the specific date of service.

*** Health Plan:**

Search By:
☐ Member ID
☒ Claim Number

*** Claim Number:**

[Continue](#)

This Claim Status – Detail screen displays next. The Primary Status field shows if the claim is in a pending or approved status. Follow the link to review **Detailed Status Information**.

[Home](#) [Patient Care](#) [Office Management](#) [Resources](#) [Modify Profile](#) [Profile Administration](#) [Staff Directory](#)

Welcome, Your Name of Your Practice ([Log Out](#)) [Go to Message Center](#)

Claims Status - Detail [Printer-Friendly](#)

Insurance
Plan Name:
BlueCross BlueShield Plans
Plan ID:
38520
Member ID:
ZCZ065922516805

Patient
Patient's Name:
MICHAEL TESTING
Date of Birth:
10/01/1958
[Change Patient](#)

Claim Number:
70870002W0000

🔍 Check your remittance voucher for any non-covered or non-allowed charges which may be the member's responsibility.

Primary Status:
PENDING/IN REVIEW-THE CLAIM/ENCOUNTER IS SUSPENDED PENDING REVIEW

[Detailed Status Information](#)

Detail

Status Effective Date: 03/28/2017	Date(s) of Service: 03/21/2017 - 03/21/2017	Claim Status PENDING
Primary ID: 123456789	Organization or Provider's Name: YOUR PRACTICE	
Total Charges: \$100.00	Amount Paid: \$0.00	
Patient Account Number: 3159		

Here is a list of the line items associated with this claim.

Line Summary List Showing 1 Result

Line Item	Line Status	Date(s) of Service	Line Charges	Amount Paid
01	PENDING	03/21/2017 - 03/21/2017	\$100.00	\$0.00

Procedure Code:
99213 - OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH REQUIRES AT LEAST 2 OF THESE 3 KEY COMPONENTS: AN EXPANDED PROBLEM FOCUSED HISTORY; AN EXPANDED PROBLEM FOCUSED EXAMINATION; MEDICAL DECISION MAKING OF LOW COMPLEXITY. COUNSELING AND COORDINATION OF C

[Previous Claim](#) [Next Claim](#) [Ask Provider Services](#) or [Back](#)

This screen appears when you select the Detailed Status Information from the Claim Status-Detail screen. Use the **Back** button to return to the previous screen.

[Home](#) [Patient Care](#) [Office Management](#) [Resources](#) [Modify Profile](#) [Profile Administration](#) [Staff Directory](#)

Welcome, Your Name of Your Practice ([Log Out](#)) [Go to Message Center](#)

Claims Status - Detailed Status Information [Printer-Friendly](#)

Insurance
Plan Name:
BlueCross BlueShield Plans

Plan ID:
38520

Member ID:
ZCZ065922516805

Claim Number:
70870002W0000

Please see line items for more details about the payment of this claim.

Status Details
PENDING/IN REVIEW-THE CLAIM/ENCOUNTER IS SUSPENDED PENDING REVIEW
20 - ACCEPTED FOR PROCESSING

Patient
Patient's Name:
MICHAEL TESTING

Date of Birth:
10/01/1958

[Change Patient](#)

[Back](#)

From the Claim Status-Detail screen, select Ask Provider Services. To submit a web inquiry, select **Submit your question online**, complete all required fields and select **Submit Question**.

[Home](#) [Patient Care](#) [Office Management](#) [Resources](#) [Modify Profile](#) [Profile Administration](#) [Staff Directory](#)

Welcome, Your Name of Your Practice ([Log Out](#)) [Go to Message Center](#)

Ask Provider Services [Printer-Friendly](#)

Inquiry * Required
Use the form and receive a response in the Message Center. Please be aware during our peak season that there may be a delay in receiving a response. You may also talk to a Provider Services representative with STATchat.

How would you like to contact Provider Services?
☒ Submit your question online
☐ Talk to Provider Services online
(Monday - Friday, 8 a.m. to 8 p.m. EST)

Inquiry Name:
BlueCross BlueShield Plans

Inquiry Reason:
Claim Status Inquiry

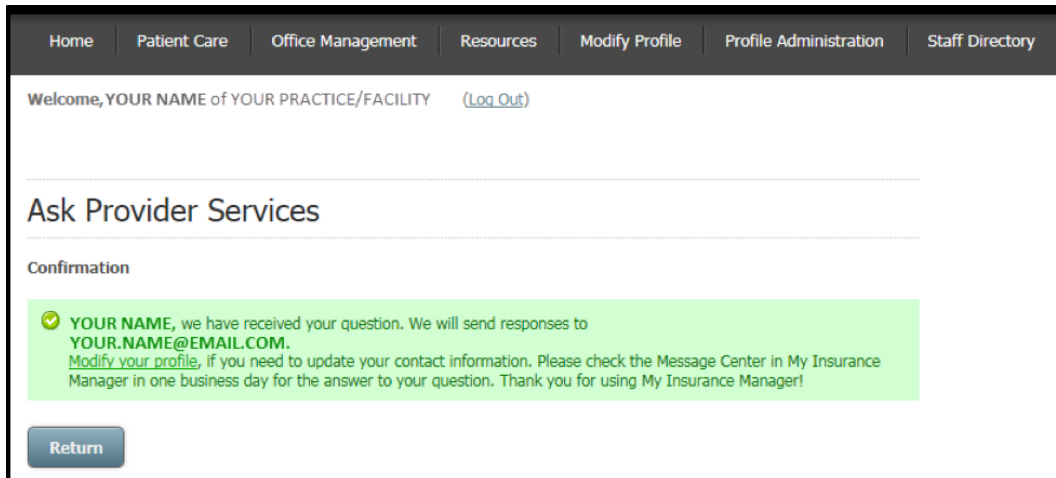
* Patient's First Name: MICHAEL * Patient's Last Name: TESTING * Patient's Member id: 999574317 Patient's Date of Birth: 10/01/1958
mm/dd/yyyy

* Location: YOUR PRACTICE [Select](#) Primary ID: 123456789

* Please enter a question:

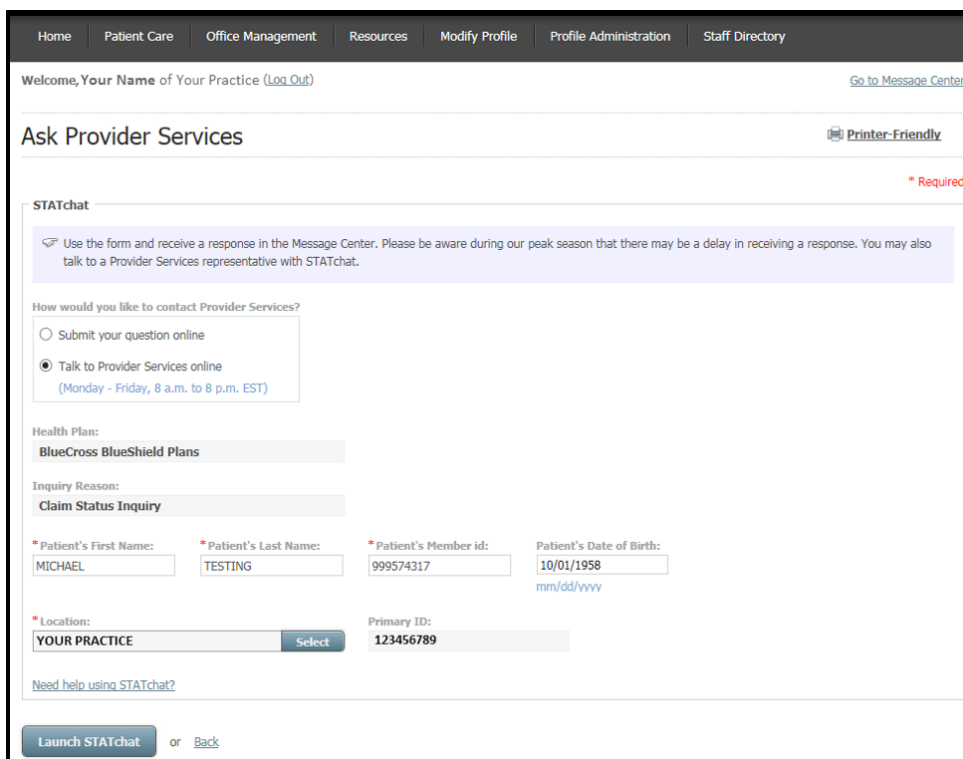
[Submit Question](#) or [Back](#)

The Confirmation screen shows you how and when to check the Message Center for a response to your question. Use the **Return** button to return to the Claim Status-Detail screen.



The screenshot shows a web application interface with a dark navigation bar at the top containing links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar, a welcome message reads "Welcome, YOUR NAME of YOUR PRACTICE/FACILITY" with a "(Log Out)" link. The main heading is "Ask Provider Services". Underneath, a "Confirmation" section features a green box with a checkmark icon and the following text: "YOUR NAME, we have received your question. We will send responses to YOUR.NAME@EMAIL.COM. Modify your profile, if you need to update your contact information. Please check the Message Center in My Insurance Manager in one business day for the answer to your question. Thank you for using My Insurance Manager!". At the bottom left of the confirmation box is a blue "Return" button.

To speak with a representative, select **Talk to Provider Services online**, complete all required fields and select **Launch STATchat**.



The screenshot displays the "STATchat" form within the "Ask Provider Services" section. The navigation bar is identical to the previous screen. A "Go to Message Center" link is visible in the top right. A "Printer-Friendly" icon is located near the heading. A red asterisk and the word "Required" are positioned to the right of the heading. The form itself is titled "STATchat" and includes a light blue informational box stating: "Use the form and receive a response in the Message Center. Please be aware during our peak season that there may be a delay in receiving a response. You may also talk to a Provider Services representative with STATchat." Below this, the question "How would you like to contact Provider Services?" is followed by two radio button options: "Submit your question online" and "Talk to Provider Services online" (which is selected). A note "(Monday - Friday, 8 a.m. to 8 p.m. EST)" is shown below the selected option. The form then asks for the "Health Plan:" with a dropdown menu showing "BlueCross BlueShield Plans". The "Inquiry Reason:" dropdown menu shows "Claim Status Inquiry". There are four required fields for patient information: "Patient's First Name:" (containing "MICHAEL"), "Patient's Last Name:" (containing "TESTING"), "Patient's Member id:" (containing "999574317"), and "Patient's Date of Birth:" (containing "10/01/1958" with a "mm/dd/yyyy" format hint). Below these is a "Location:" dropdown menu showing "YOUR PRACTICE" and a "Select" button. To the right of the location dropdown is a "Primary ID:" field containing "123456789". A link "Need help using STATchat?" is located below the form fields. At the bottom left, there is a blue "Launch STATchat" button, and to its right, the text "or Back" with a link.

This screen appears when you select Launch STATchat from the Ask Provider Services screen. You can ask as many questions as desired related to **one** member’s account. The patient information pre-populates onto the Provider Services representative’s screen based on the information you entered in My Insurance Manager, which restricts the Provider Services representative to only answering questions related to the member from your original inquiry.



Claim Attachments

[Home](#) [Patient Care](#) [Office Management](#) [Resources](#) [Modify Profile](#) [Profile Administration](#) [Staff Directory](#)

Welcome, YOUR NAME of YOUR PRACTICE/FACILITY [\(Log Out\)](#) [Go to Message Center](#)

[Printer-Friendly](#)

Claims Status - Detail

Insurance
Plan Name:
BlueCross BlueShield Plans

Plan ID:
38520

Member ID:
ZCZ065922516805

Claim Number:
70870002W0000

Check your remittance voucher for any non-covered or non-allowed charges which may be the member's responsibility.

Primary Status:
PENDING/IN REVIEW-THE CLAIM/ENCOUNTER IS SUSPENDED PENDING REVIEW

Detailed Status Information
Detail
Status Effective Date: 04/24/2017 Date(s) of Service: 03/21/2017 - 03/21/2017 Claim Status: PENDING

Primary ID: 123456789 Organization or Provider's Name: YOUR PRACTICE/FACILITY

Total Charges: \$100.00 Amount Paid: \$0.00

Patient Account Number: 3159

Attachments
This claim may require additional documentation.
The documentation requested is: [Document Type].
To attach the documentation, click the attachment link below.
Please note: We currently only accept PDF files at this time.

Attach [Document Type] Documentation

Here is a list of the line items associated with this claim.

Line Summary List Showing 1 Result

Line Item	Line Status	Date(s) of Service	Line Charges	Amount Paid
01	PENDING	03/21/2017 - 03/21/2017	\$100.00	\$0.00

Procedure Code:
99213 - OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH REQUIRES AT LEAST 2 OF THESE 3 KEY COMPONENTS: AN EXPANDED PROBLEM FOCUSED HISTORY; AN EXPANDED PROBLEM FOCUSED EXAMINATION; MEDICAL DECISION MAKING OF LOW COMPLEXITY. COUNSELING AND COORDINATION OF C

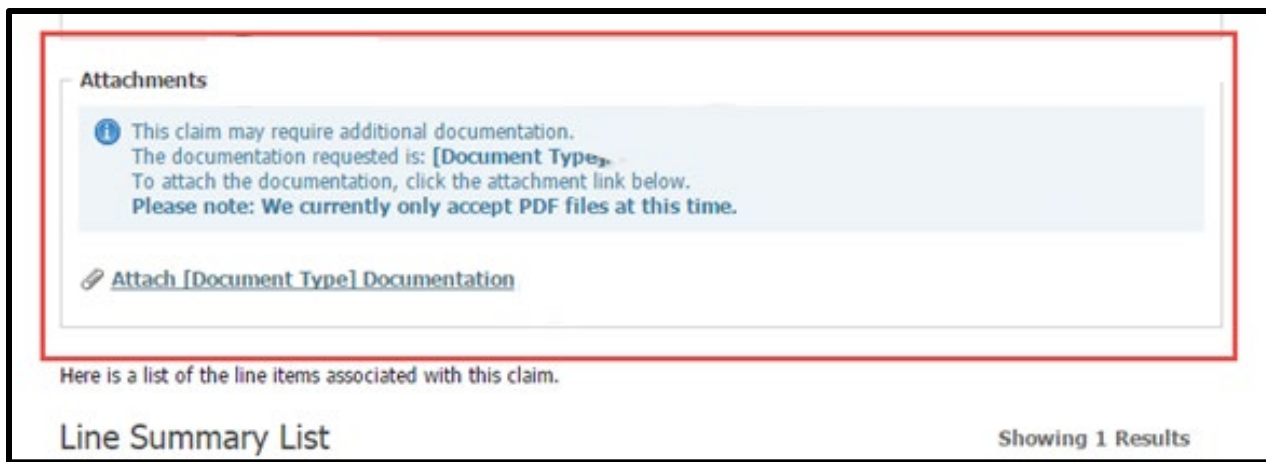
[Previous Claim](#) [Next Claim](#) [Ask Provider Services](#) or [Back](#)

The **Claim Status Detail** page will reflect whether additional documentation may be needed as well as what type of documentation may be required. Types of documentation include:

- Accident questionnaire
- Certificate of medical necessity (for durable medical equipment)
- Medical records
- Other health insurance
- Primary carrier explanation of benefits (EOB)
- Provider reconsideration

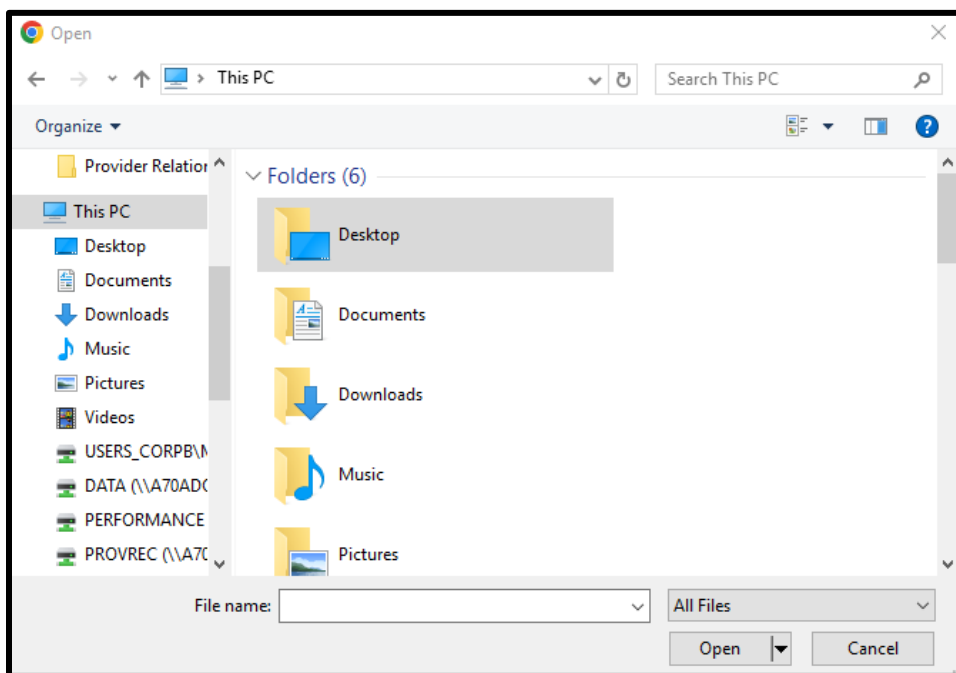
Note: You will not see the Attachments option unless the claim (or service within the claim) requires documentation.

7 | Page



Select the **Attach Documentation** option to continue.

Next, look for and then select the document you want to attach. Once the appropriate document is chosen, select **Open**.



If the file is invalid (perhaps it is not a PDF file or it exceeds 30MB), then you will receive this message:

The screenshot shows a modal window titled "Attach [Document Type] Documentation" with a close button (X) in the top right corner. At the top, there is a progress bar with three steps: "Upload File", "Review File", and "Confirm Submission". The "Upload File" step is currently active, indicated by a blue circle. Below the progress bar, a red error message box states: "We cannot accept the file type you selected. Please try another type." Below the error message, there is a link that says "Attach Another [Document Type] File" and a "Cancel" button.

Once you have selected the correct document, it will display in the Attach Documentation screen.

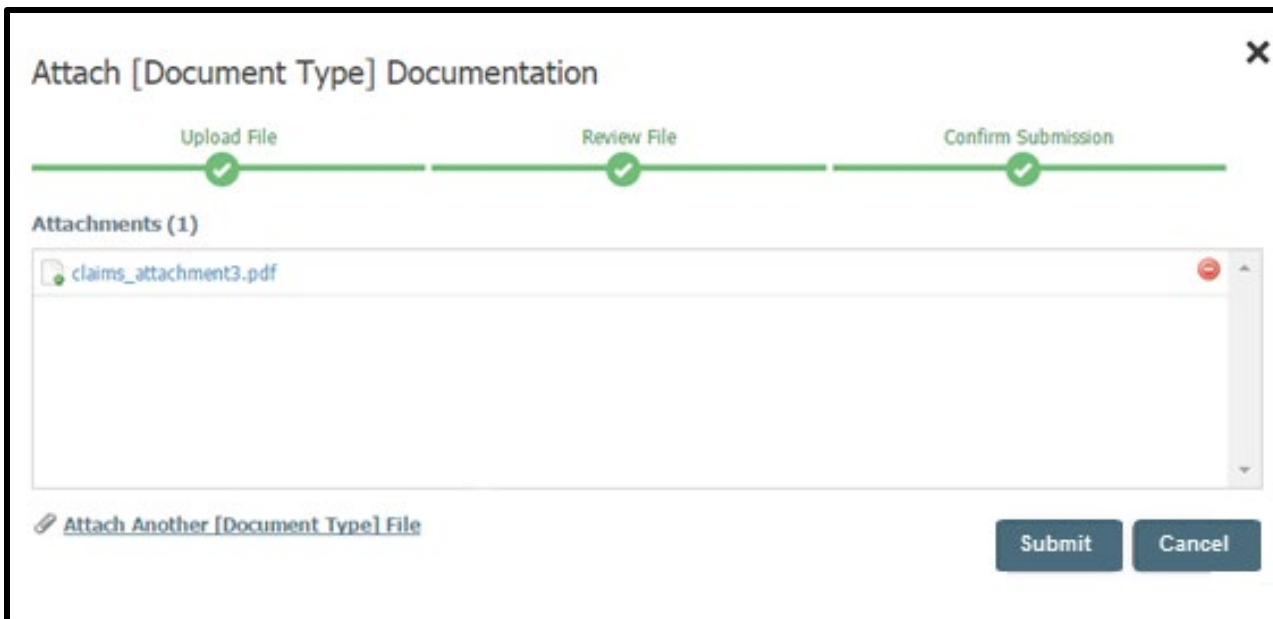
The screenshot shows the same modal window, but now the "Review File" step is active, indicated by a green checkmark in the "Upload File" step. The progress bar shows "Upload File" as completed, "Review File" as active, and "Confirm Submission" as next. Below the progress bar, a message says: "Please confirm that this file is the one you wanted to upload." The main area of the modal displays a preview of a document titled "TEST PDF". The document content is a placeholder text. At the bottom of the modal, there is a yellow warning box that says: "By selecting Confirm, you are acknowledging this document is accurate and formatted correctly." To the right of the warning box are two buttons: "Confirm" and "Cancel".

Please review the document you have uploaded in the Attach Documentation screen and verify the document you want to attach is the one associated with the claim for the member. If the document you have attached contains more than one page, you can use the scroll option to view additional pages.

To confirm the document is correct, select **Confirm**. By selecting **Confirm**, you are acknowledging that the document you have attached is accurate and formatted correctly. To cancel the document you attached, select **Cancel**. You will have several opportunities to cancel before completing the attachment process.

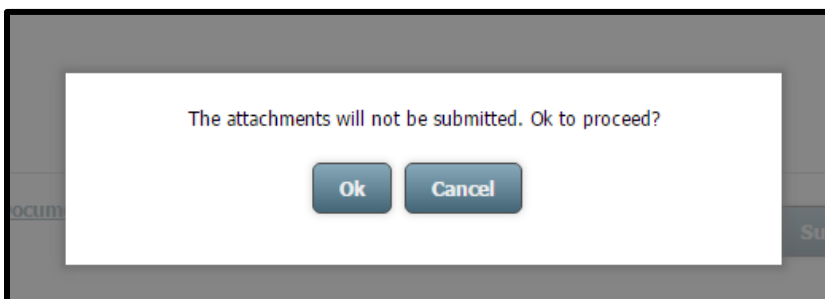
If you select **Cancel**, you'll see the option to either **Cancel Upload** or to **Return to Review**.

Once you confirm, you will see a list that displays the document along with its title. You will then have the option to attach additional documents, submit the attachment, cancel the attachment or delete any attachments you have already added.

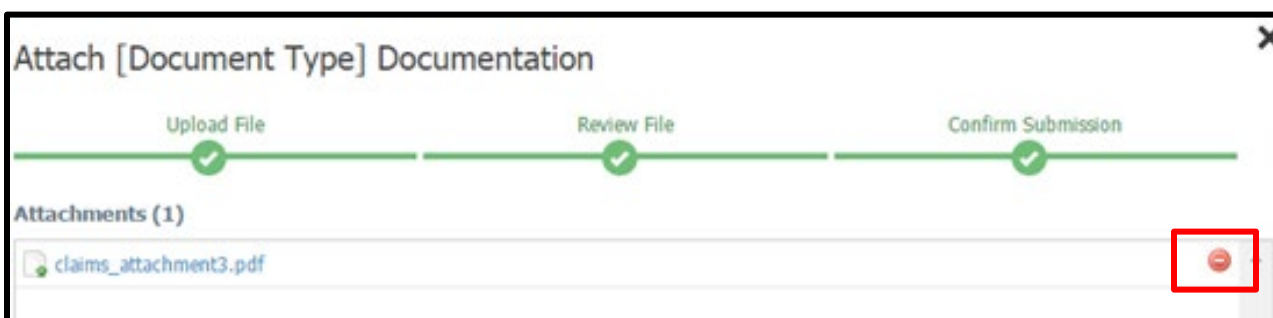


Select **Attach Another File** at the bottom of the screen to attach another document. Each new document you attach will appear in the list of attachments here on the Attach Documentation screen.

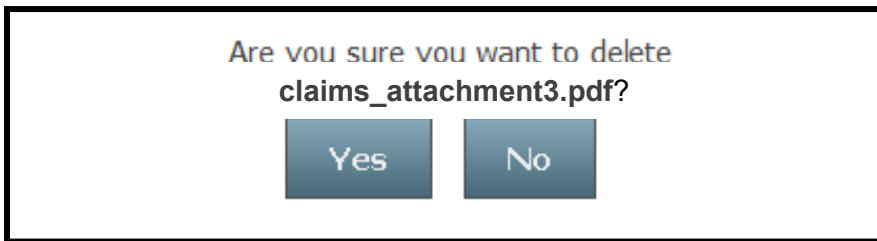
If you select **Attach Another File** by mistake, select **Cancel**. Next, Select **Ok** to proceed with your request to cancel the attachment or **Cancel** to return to the Attach Documentation screen.



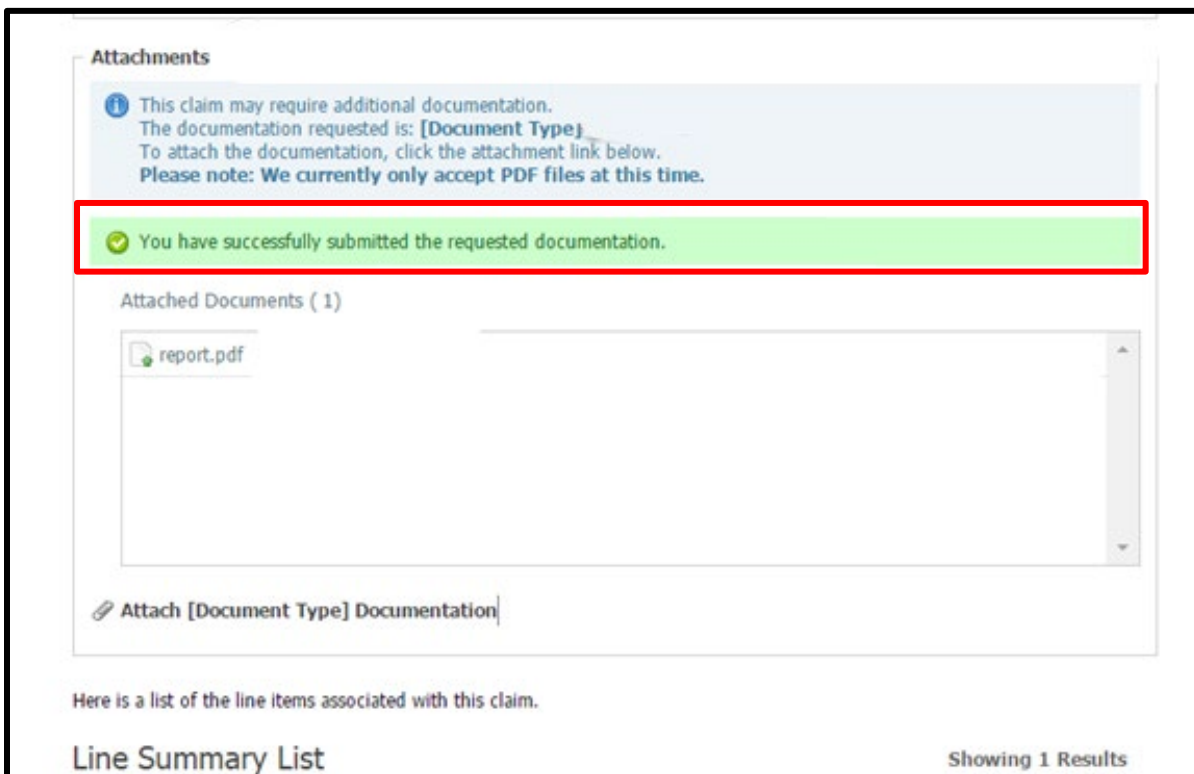
To remove a document you attach, select the red button.



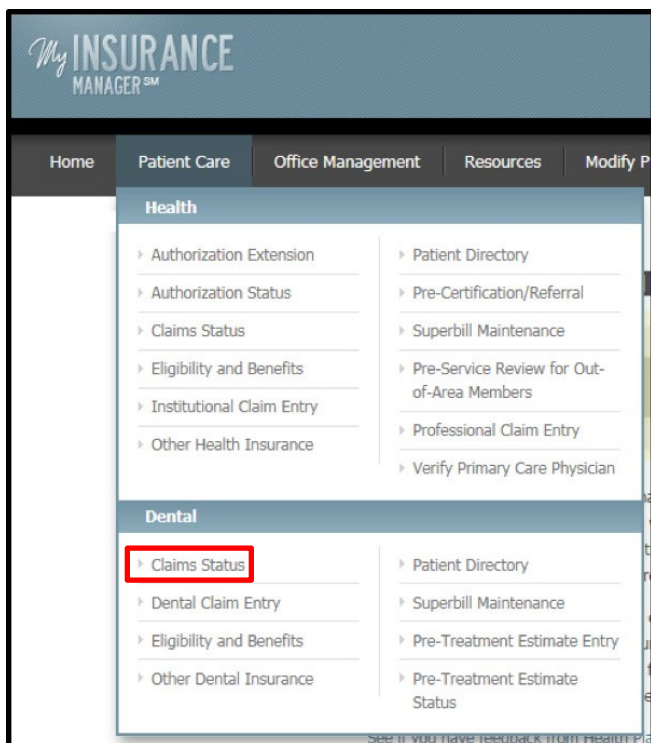
If you need to remove any document, a box will display asking if you wish to delete the selected document. If you select **Yes**, then the document you selected will be removed. Once the document is removed, the new number of attachments will reflect on the Attach Documentation screen. If you select **No**, the document you selected will remain.



Once you are satisfied with the documents attached, select **Submit**. When you select **Submit**, you will be routed back to the Claim Status Detail page and see the message, **"You have successfully submitted the requested documentation."**



Once the documentation has been received, it will be routed to the appropriate department for review and adjudication. You will not receive a confirmation of receipt or a status after you've successfully submitted the documentation. You can print the Claim Status Detail page for your records.



Home Patient Care Office Management Resources Modify Profile Profile Administration Staff Directory

Welcome, YOUR NAME of YOUR DENTAL PRACTICE (Log Out) [Go to Message Center](#)

Claims Status [Printer-Friendly](#)

* Indicates required field.

Patient Selection

To get claims status information, please enter this information. If your patient had a different Dental Plan previously, please choose the Dental Plan that was in effect for the specific date of service.

* Dental Plan:

Search By:
☒ Member ID
☐ Claim Number

* Member ID:

Include alpha prefix, if applicable

* Patient's Date of Birth:

mm/dd/yyyy

Advanced Search

☒ All Claims in System
☐ Date of Service
☐ Last 6 Months
☐ Last Year

Additional Information [\[+\]](#)

- Health plan drop-down menu options: BlueCross BlueShield Plans, BlueChoice HealthPlan, State Health Plan and Federal Employee Program
- You must enter the patient's date of birth or the first and last name
- Choose an advanced search according to all claims in system; date of service; last six months; or last year
- Expand the Additional Information option by clicking [+] to input the patient's last name, first name and/or gender
- Select **Continue**.

When searching for a claim by claim number, enter the claim number as stated on the dental claim entry confirmation screen or the remittance advice. Select **Continue**.

The screenshot shows the 'Claims Status' search form. At the top is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar is a welcome message 'Welcome, YOUR NAME of YOUR DENTAL PRACTICE' and a '(Log Out)' link. A 'Go to Message Center' link is also present. The main heading is 'Claims Status' with a 'Printer-Friendly' icon. A red asterisk note states '* Indicates required field.' The 'Patient Selection' section contains a message: 'To get claims status information, please enter this information. If your patient had a different Dental Plan previously, please choose the Dental Plan that was in effect for the specific date of service.' Below this is a 'Dental Plan' dropdown menu set to 'BlueCross BlueShield Plans'. A 'Search By:' section has two radio buttons: 'Member ID' and 'Claim Number' (which is selected). Below the radio buttons is a 'Claim Number' text input field. A 'Continue' button is at the bottom left.

This Claim Status – Detail screen displays next. The Detail and Line Summary List show if the claim is in a pending or approved status.

Follow the link to review **Detailed Status Information**. Open the line item for more details about the payment of the claim. You can select **Ask Provider Services** to send a secure email to the dental plan; or select the **View Tooth Chart** button.

The screenshot shows the 'Claims Status - Detail' screen. It features a navigation bar at the top with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar is a welcome message 'Welcome, YOUR NAME of YOUR DENTAL PRACTICE' and a '(Log Out)' link. A 'Go to Message Center' link is also present. The main heading is 'Claims Status - Detail' with a 'Printer-Friendly' icon. The screen is divided into several sections. On the left, there is an 'Insurance' section with 'Plan Name: BlueCross BlueShield Plans' and 'Member ID: ZC2065922516805'. Below this is a 'Patient' section with 'Patient's Name: MARTHA TESTING' and 'Date of Birth: 09/01/1960'. A 'Change Patient' button is at the bottom of the patient section. The main content area starts with 'Claims Number: 17047001W'. Below this is a message: 'Check your remittance voucher for any non-covered or non-allowed charges which may be the member's responsibility.' The 'Primary Status' section shows 'ACKNOWLEDGEMENT/ACCEPTANCE INTO ADJUDICATION SYSTEM-THE CLAIM/ENCOUNTER HAS BEEN ACCEPTED INTO THE ADJUDICATION SYSTEM.' Below this is a 'Detailed Status Information' button. The 'Detail' section shows 'Status Effective Date: 05/27/2017', 'Date(s) of Service: 05/26/2017 - 05/26/2017', and 'Claim Status: PENDING'. Below this is a 'Primary ID: 987654321' and 'Organization or Provider's Name: YOUR DENTAL PRACTICE'. The 'Total Charges' section shows '\$1,000.00' and 'Amount Paid: \$0.00'. Below this is 'Patient Account Number: 3125'. A message states 'Here is a list of the line items associated with this claim.' Below this is a 'Line Summary List' table. The table has columns: Line Item, Line Status, Date(s) of Service, Line Charges, and Amount Paid. The table shows one line item: '01', 'PENDING', '05/26/2017 - 05/26/2017', '\$1,000.00', and '\$0.00'. Below the table is a 'Procedure Code: D2740 - CROWN PORCELAIN/CERAMIC SUBSTRATE'. At the bottom, there are buttons: 'Previous Claim', 'Next Claim', 'Ask Provider Services', 'View Tooth Chart', and 'or Back'.

Line Item	Line Status	Date(s) of Service	Line Charges	Amount Paid
01	PENDING	05/26/2017 - 05/26/2017	\$1,000.00	\$0.00

This screen appears when you click the Detailed Status Information button from the Claim Status-Detail screen. Use the **Back** button to return to the previous screen.

[Home](#) | [Patient Care](#) | [Office Management](#) | [Resources](#) | [Modify Profile](#) | [Profile Administration](#) | [Staff Directory](#)

Welcome, YOUR NAME of YOUR DENTAL PRACTICE [\(Log Out\)](#) [Go to Message Center](#)

Claims Status - Detailed Status Information [Printer-Friendly](#)

Insurance
Plan Name:
BlueCross BlueShield Plans

Member ID:
ZCZ065922516805

Claim Number:
T7D47001W

 Please see line items for more details about the payment of this claim.

Patient
Patient's Name:
MARTHA TESTING

Date of Birth:
09/01/1960

[Change Patient](#)

Status Details

ACKNOWLEDGEMENT/ACCEPTANCE INTO ADJUDICATION SYSTEM-THE CLAIM/ENCOUNTER HAS BEEN ACCEPTED INTO THE ADJUDICATION SYSTEM.

20 - ACCEPTED FOR PROCESSING

[Back](#)

This screen appears when Ask Provider Services is selected from the Claim Status — Detail screen. To submit a web inquiry, complete all required fields and select **Submit Question**.

[Home](#) | [Patient Care](#) | [Office Management](#) | [Resources](#) | [Modify Profile](#) | [Profile Administration](#) | [Staff Directory](#)

Welcome, YOUR NAME of YOUR DENTAL PRACTICE [\(Log Out\)](#) [Go to Message Center](#)

Ask Provider Services [Printer-Friendly](#)

Inquiry
Inquiry Name:
BlueCross BlueShield Plans

Inquiry Reason:
Claim Status Inquiry

* Patient's First Name:
MARTHA

* Patient's Last Name:
TESTING

* Patient's Member id:
999574317

Patient's Date of Birth:
09/01/1960
mm/dd/yyyy

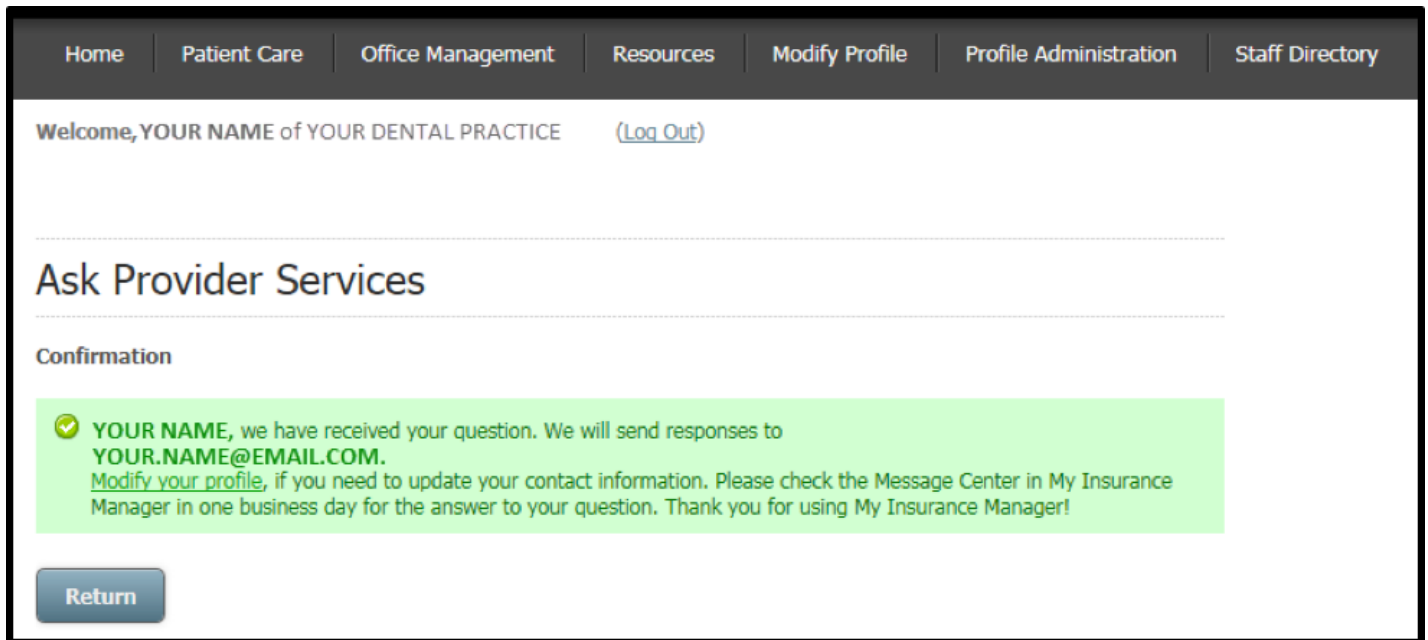
* Location:
YOUR DENTAL PRACTICE [Select](#)

Primary ID:
987654321

* Please enter a question:

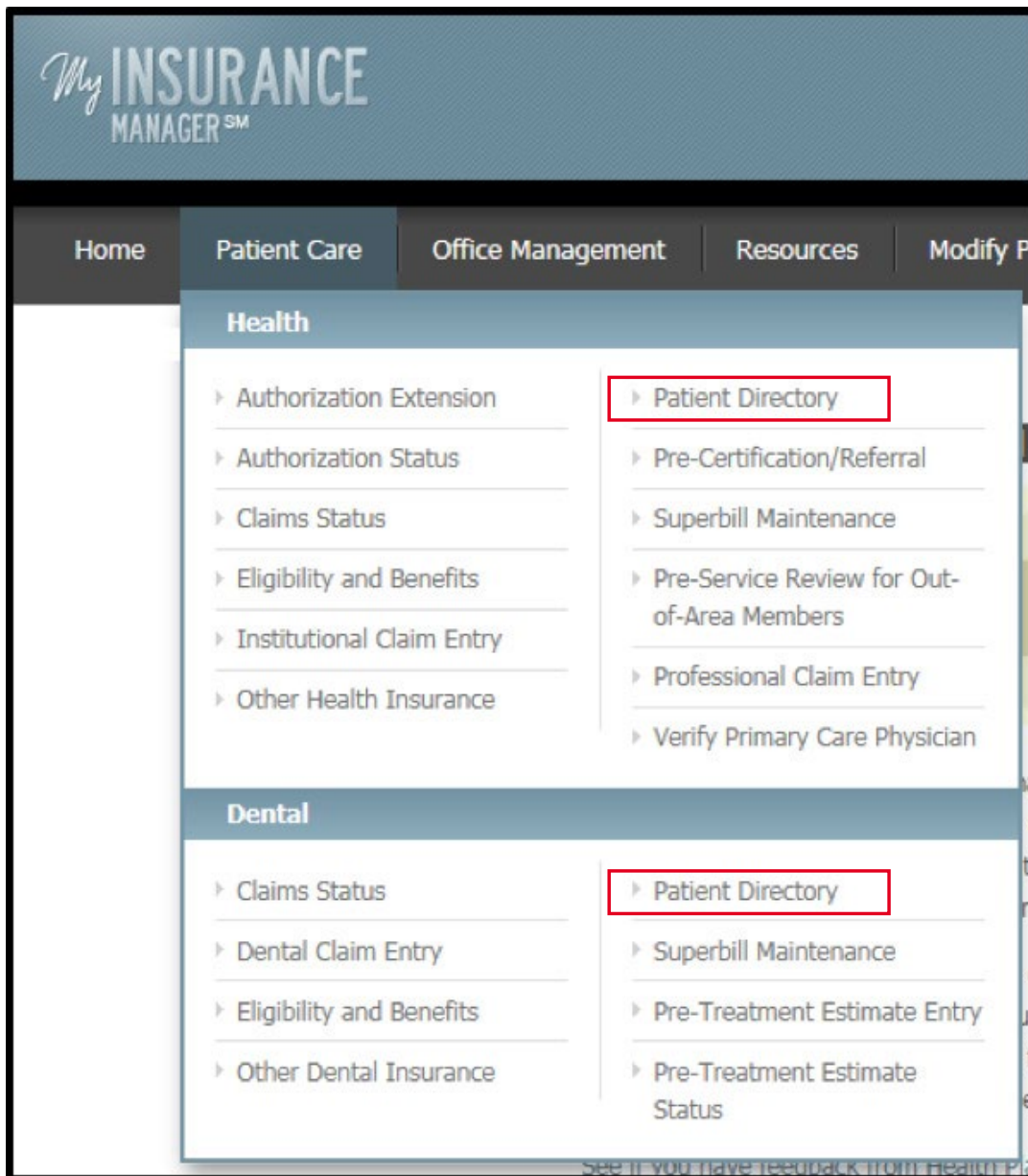
[Submit Question](#) or [Back](#)

The Confirmation screen shows you how and when to check the Message Center for a response to your question. Use the **Return** button to return to the Claim Status — Detail screen.



Patient Directory

From the Patient Care tab, select Patient Directory. The Patient Directory is updated from your affirmative response when prompted to add the patient using the information entered in the patient information form during claim entry.



For Health Providers

Enter required information on Patient Directory page. Select **Continue**.

The screenshot shows a web application interface for health providers. At the top is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar is a welcome message: "Welcome, Your Name of Your Practice (Log Out)" and a link to "Go to Message Center". The main heading is "Patient Directory" with a "Printer-Friendly" link. A red asterisk indicates required fields. The "Patient Management" section contains three required fields: "Plan:" with a dropdown menu showing "--Please Choose One--", "Date of Service:" with a date input field showing "04/12/2017" and a calendar icon, and "Location:" with a text input field and a "Select" button. There is also a "Provider ID:" text input field. A "Continue" button is at the bottom left.

Search for a patient by Name, Account Number, Date of Birth or by Member ID.

- Patient's Name – The screen displays additional fields for patient's first name and patient's last name. Enter at least two letters for the patient's first and/or last names. Complete the required additional fields, then **Search**.
- Patient's Account Number – The screen displays an additional field for the patient's account number. Input the patient's unique number your practice or practice management software has assigned.
- Patient's Date of Birth – The screen displays an additional field for patient's date of birth.
- Member ID – The screen displays an additional field for member ID. Include the alpha prefix, if applicable.

The screenshot shows a modal window titled "Patient Directory Search". It includes a close button (X) in the top right corner. A message states: "You can search by the Patient's Name, Account Number, Date of Birth or by his or her Member ID." Below this is a "Search By:" section with four radio button options: "Patient's Name" (selected), "Patient's Account Number", "Patient's Date of Birth", and "Member ID". A "Search" button is at the bottom left. A red asterisk indicates required fields.

When search results appear, select the patient's name.

Patient Directory Search

Showing 1 Result(s)

Filter results...

Patient	Member ID	Account Number	Action
TESTING, MICHAEL (10/01/1958)	ZCZ065922516805		Edit

New Search

Don't see your patient? Add a new one.

Select **Start Institutional Claim Entry** or **Start Professional Claim Entry**. Follow the **Change Patient** link to select another individual in your Patient Directory.

Home

Patient Care

Office Management

Resources

Modify Profile

Profile Administration

Staff Directory

Welcome, YOUR NAME of YOUR PRACTICE/FACILITY

[\(Log Out\)](#)

[Go to Message Center](#)

Patient Directory

Printer-Friendly

* Required

Patient Management

* Plan:

BlueCross BlueShield Plans

* Date of Service:

05/25/2017

mm/dd/yyyy

* Location:

YOUR PRACTICE/FACILITY

Select

Provider ID:

123456789

Selected Patient

Patient Name:

TESTING, MICHAEL

Member ID:

ZCZ065922516805

Date of Birth:

10/01/1958

Change Patient

[Start Institutional Claim Entry >](#)

[Start Professional Claim Entry >](#)

Enter required information on Patient Directory page. Select **Continue**.

The screenshot shows a web application interface for dental providers. At the top is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar, a welcome message reads "Welcome, Your Name of Your Practice (Log Out)" with a "Go to Message Center" link on the right. The main heading is "Patient Directory" with a "Printer-Friendly" icon and link. A red asterisk indicates required fields. The "Patient Management" section contains three required fields: "Plan:" with a dropdown menu showing "--Please Choose One--", "Date of Service:" with a date picker showing "04/12/2017" and a "mm/dd/yyyy" format hint, and "Location:" with a text input and a "Select" button. A "Provider ID:" field is also present. A "Continue" button is at the bottom left.

Search for a patient by Name, Account Number, Date of Birth or by Member ID.

- Patient's Name – The screen displays additional fields for patient's first name and patient's last name. Enter at least two letters for the patient's first and/or last names. Complete the required additional fields, then **Search**.
- Patient's Account Number – The screen displays an additional field for the patient's account number. Input the patient's unique number your practice or practice management software has assigned.
- Patient's Date of Birth – The screen displays an additional field for patient's date of birth.
- Member ID – The screen displays an additional field for member ID. Include the alpha prefix, if applicable.

The screenshot shows a "Patient Directory Search" modal window. It includes a close button (X) in the top right corner. A red asterisk indicates required fields. A light blue banner contains the text: "You can search by the Patient's Name, Account Number, Date or Birth or by his or her Member ID." Below this, the "Search By:" section has four radio button options: "Patient's Name" (selected), "Patient's Account Number", "Patient's Date of Birth", and "Member ID". A "Search" button is located at the bottom left.

Patient Directory Search

X

Showing 1 Result(s)

Filter results...

Patient	Member ID	Account Number	Action
TESTING, MARTHA (09/01/1960)	ZC2065922516805	3150	Edit

New Search

Don't see your patient? Add a new one.

Home

Patient Care

Office Management

Resources

Modify Profile

Profile Administration

Staff Directory

Welcome, **Your Name** of Your Dental Practice [\(Log Out\)](#) [Go to Message Center](#)

Patient Directory

Printer-Friendly

Patient Management

* Plan:

BlueCross BlueShield Plans

* Date of Service:

04/20/2017

* Location:

Your Dental Practice

Select

Provider ID:

987654321

Selected Patient

Patient Name:

TESTING, MARTHA

Member ID:

ZCZ065922516805

Date of Birth:

09/01/1960

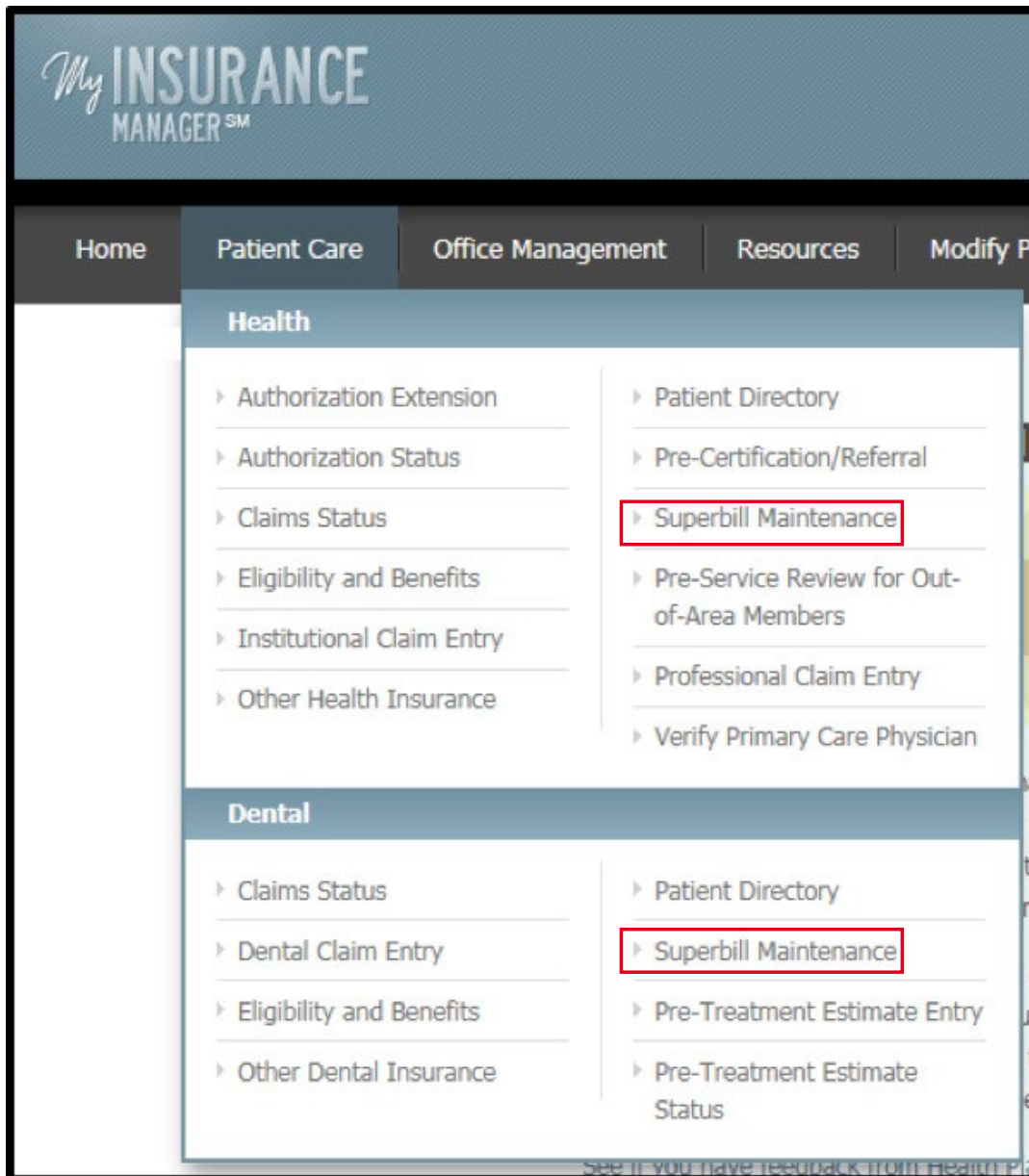
[Start Dental Claim Entry >](#)

[Start Pre-Treatment Estimate Entry >](#)

[Change Patient](#)

Superbill Maintenance

From the Patient Care tab, select Superbill Maintenance. The Superbill Maintenance lets you create an encounter form specific to your user account.



For Health Providers

Select a health plan and location. Next, select **Create a New Superbill** or choose a previous Superbill you created for the location to preview, edit, copy or delete.

The screenshot shows the 'Superbill Maintenance' page. At the top, there is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar, a welcome message reads 'Welcome, YOUR NAME of YOUR PRACTICE/FACILITY' with a '(Log Out)' link. A 'Go to Message Center' link is also present. The main heading is 'Superbill Maintenance' with a 'Printer-Friendly' icon. A red asterisk indicates a required field. The 'Location Selection' section shows a dropdown menu for 'Health Plan' with the following options: --Please Choose One--, BlueCross BlueShield Plans, BlueChoice HealthPlan, Employee Benefit Services dba Key Benefit Admin, FEP, Planned Administrators, State Health Plan, and Thomas Cooper.

The screenshot shows the 'Superbill Maintenance' page with the 'Location Selection' section filled out. The 'Health Plan' dropdown is set to 'BlueCross BlueShield Plans'. The 'Location' dropdown is set to 'INTERNAL MEDICINE ASSOC' with a 'Select' button. The 'Primary ID' field contains '1831117795'. Below this, the 'Superbill Selection' section has a message: 'You can either create a new Superbill or select a Superbill to preview, edit, copy or delete.' A 'Create a New Superbill' button is visible. Below the message is a table with three columns: Name, Tools, and Code Type.

Name	Tools	Code Type
CREATE ICD9 COPY COPY	Edit Copy Delete	ICD-9 Convert Template to ICD-10
LFP	Edit Copy Delete	ICD-10
LFP1	Edit Copy Delete	ICD-10

When you preview a previously created Superbill, you can **Show All** or **Print** the template.

The screenshot shows the 'Superbill Preview' page. At the top, there is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar, a welcome message reads 'Welcome, YOUR NAME of YOUR PRACTICE/FACILITY' with a '(Log Out)' link. A 'Go to Message Center' link is also present. The main heading is 'Superbill Preview' with a 'Printer-Friendly' icon. The 'Superbill Preview' section shows the 'LFP' template. The 'Location' field is set to 'YOUR PRACTICE/FACILITY'. The 'ICD Code Qualifier' field is set to 'ICD-10'. The 'Primary ID' field contains '123456789'. The 'Address' field contains '654 PHYSICIAN PKWY STE B, YOUR CITY, SC 29292-6540'. Below the fields, a message reads: 'This is an example of what your Superbill Template will look like in claim entry.' At the bottom, there are buttons for 'Show All', 'Print', and 'Cancel'.

This screen appears when you select Show All. The template details the procedure code(s) that have ever been in this Superbill. Select **Print**.

[Home](#) | [Patient Care](#) | [Office Management](#) | [Resources](#) | [Modify Profile](#) | [Profile Administration](#) | [Staff Directory](#)

Welcome, YOUR NAME of YOUR PRACTICE/FACILITY [\(Log Out\)](#) [Go to Message Center](#)

Superbill Maintenance [Printer-Friendly](#)

Superbill Preview

CREATE ICD9 COPY COPY

Location:
YOUR PRACTICE/FACILITY

ICD Code Qualifier:
ICD-9

Primary ID:
123456789

Address:
**654 PHYSICIAN PKWY STE B
YOUR CITY, SC 29292-6540**

 This is an example of what your Superbill Template will look like in claim entry.

DIAGNOSIS	CATEGORY TESTING	OFFICE PROCEDURE	SURGERY
☐ 71515	LABS AND XRAYS	☐ 99215	☐ 20610 ☐ 36415
☐ 53085			
☐ 44629			
☐ 27801			
☐ 7265			
☐ 4019			
☐ 7366			
☐ 2449			
☐ 32723			

[Show All](#) [Print](#) or [Cancel](#)

When you choose to **Create a New Superbill**, enter a Superbill Name. Select **Continue**.

[Home](#) | [Patient Care](#) | [Office Management](#) | [Resources](#) | [Modify Profile](#) | [Profile Administration](#) | [Staff Directory](#)

Welcome, YOUR NAME of YOUR PRACTICE/FACILITY [\(Log Out\)](#) [Go to Message Center](#)

Superbill Maintenance [Printer-Friendly](#)

Create Superbill

* Superbill Name:

* ICD Code Qualifier:

Family Medicine, Pediatric, Sports Medicine, OB/GYN, etc.

[Continue](#) or [Cancel](#)

Select the Number of Columns for your Superbill. Add a category for each column by selecting **Add Category**.

The screenshot shows the 'Superbill Maintenance' page with a navigation bar at the top containing links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar is a welcome message and a 'Log Out' link. The main heading is 'Superbill Maintenance' with a 'Printer-Friendly' icon. The 'Create Superbill' section includes several required fields: 'Superbill Name' (with a dropdown menu showing 'PROVIDER EDUCATION' and a list of specialties), 'ICD Code Qualifier' (with a dropdown menu showing 'ICD-10'), 'Location' (with a text input showing 'YOUR PRACTICE/FACILITY'), 'Primary ID' (with a text input showing '123456789'), and 'Address' (with a text input showing '654 PHYSICIAN PKWY STE B YOUR CITY, SC 29292-6540'). Below these fields is a 'Number of Columns' section with four options: 'One Column', 'Two Columns', 'Three Columns', and 'Four Columns'. Each option is represented by a visual representation of the number of columns. The 'Superbill Layout' section includes a message: 'You can control what content information you see by changing the date.' Below this is a 'Display Begin Date' field with a date picker showing '05/25/2017' and a format 'mm/dd/yyyy'. There are also 'Actions' buttons: 'Reload Categories' and 'Reset Date to Today'. Below the date field is a 'Column 1' section with an 'Add Category' link. At the bottom of the form are 'Save Superbill' and 'Cancel' buttons.

This screen appears when you select Add Category from the previous page. Define the category (such as procedure code; diagnosis code; etc.) for the selected column, then select **Save** or **Save and Add Another**.

The screenshot shows the 'Add Category' dialog box. It has a title bar with a close button (X). The main heading is 'Add Category'. There are three required fields: '* Category Name:' (with a text input), '* Category Contents:' (with two radio buttons: 'Procedure Codes' and 'Diagnosis Codes'), and '* Display In:' (with a dropdown menu showing 'Column 1'). At the bottom of the dialog box are three buttons: 'Save', 'Save and Add Another', and 'Cancel'.

The Superbill Maintenance screen now displays the defined category. In the Column field, use the Actions drop-down menu to move down, edit or delete the category. Select **Add Procedure** in the Column field.

This screen appears when you select Add Procedure. Select the magnifying glass to search for the procedure code by description or code. Enter the amount for charges. Designate the category. Describe the procedure as appropriate and define the Display From and Display To dates. Select **Save** or **Save and Add Another**.

The Superbill Maintenance screen now displays the defined category with the added procedure code(s). Select **Save Superbill**.

Home	Patient Care	Office Management	Resources	Modify Profile	Profile Administration	Staff Directory
----------------------	------------------------------	-----------------------------------	---------------------------	--------------------------------	--	---------------------------------

Welcome, YOUR NAME of YOUR PRACTICE/FACILITY ([Log Out](#)) [Go to Message Center](#)

Superbill Maintenance [Printer-Friendly](#)

Create Superbill

* **Superbill Name:** ICD Code Qualifier:
Family Medicine, Pediatric, Sports Medicine, OB/GYN, etc.

Location: **Primary ID:**

Address:

Number of Columns

One Column Two Columns Three Columns Four Columns






Superbill Layout

You can control what content information you see by changing the date.

Display Begin Date: Actions: [Reload Categories](#) [Reset Date to Today](#)

mm/dd/yyyy

Column 1

INTERNAL	Actions ▼
99213	Actions ▼
Add Procedure	

EXTERNAL	Actions ▼
G0101	Actions ▼
Add Procedure	

[Add Category](#)

[Save Superbill](#) or [Cancel](#)

For Dental Providers

Select a health plan and location. Next, select **Create a New Superbill** or choose a previous Superbill you created for the location to preview, edit, copy or delete.

The screenshot shows the 'Superbill Maintenance' page. At the top is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar is a welcome message: 'Welcome, Your Name of Your Dental Practice' with a '(Log Out)' link and a 'Go to Message Center' link. The main heading is 'Superbill Maintenance' with a 'Printer-Friendly' link. A red asterisk indicates a required field. The 'Location Selection' section contains a dropdown menu for 'Dental Plan' with the following options: '--Please Choose One--', 'BlueCross BlueShield Plans', and 'State Dental Plan'.

The screenshot shows the 'Superbill Maintenance' page with the 'Dental Plan' dropdown set to 'BlueCross BlueShield Plans'. The 'Location' field is set to 'Your Dental Practice' and the 'Primary ID' is '987654321'. The 'Superbill Selection' section contains a message: 'You can either create a new Superbill or select a Superbill to preview, edit, copy or delete.' Below this is a 'Create a New Superbill' button. At the bottom, there is a table with the following structure:

Name	Tools
PROVIDER EDUCATION	Edit Copy Delete

When you preview a previously created Superbill, you can **Show All** or **Print** the template.

The screenshot shows the 'Superbill Preview' page. At the top is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar is a welcome message: 'Welcome, Your Name of Your Dental Practice' with a '(Log Out)' link and a 'Go to Message Center' link. The main heading is 'Superbill Preview' with a 'Printer-Friendly' link. The 'Superbill Preview' section contains the following information: 'Location: Your Dental Practice', 'Primary ID: 987654321', and 'Address: 456 Main St, Fort Mill, SC 29715-0000'. Below this is a message: 'This is an example of what your Superbill Template will look like in claim entry.' The 'INTERNAL' section contains a checkbox for 'DENTAL FILLING'. The 'EXTERNAL' section contains a checkbox for 'COMPREHENSIVE ORAL EXAM'. At the bottom, there are buttons for 'Show All', 'Print', and 'Cancel'.

This screen appears when you select Show All. The template details the procedure code(s) that have ever been in this Superbill. Select **Print**.

[Home](#) | [Patient Care](#) | [Office Management](#) | [Resources](#) | [Modify Profile](#) | [Profile Administration](#) | [Staff Directory](#)

Welcome, **Your Name** of Your Dental Practice [\(Log Out\)](#) [Go to Message Center](#)

Superbill Maintenance

[Printer-Friendly](#)

PROVIDER EDUCATION Superbill Data for 987654321 - YOUR DENTAL PRACTICE

Here is a list of all Procedure Codes that have ever been in this Superbill.

Please note: When you move a Procedure Code up or down in a category, the date of the move will appear in the Deleted column.

Code	Minutes	Charges	Category	Description	Display Dates		Deleted
					From	To	
D2940	0	90.00	INTERNAL	DENTAL FILLING	01/01/2017	12/31/9999	
D0150	0	200.00	EXTERNAL	COMPREHENSIVE ORAL EXAM	01/01/2017	12/31/9999	

[Print](#) or [Cancel](#)

When you choose to Create a New Superbill, enter a Superbill Name then select **Continue**.

[Home](#) | [Patient Care](#) | [Office Management](#) | [Resources](#) | [Modify Profile](#) | [Profile Administration](#) | [Staff Directory](#)

Welcome, **Your Name** of Your Dental Practice [\(Log Out\)](#) [Go to Message Center](#)

Superbill Maintenance

[Printer-Friendly](#)

Create Superbill

* Superbill Name:

Diagnostic, Preventive, Restorative, Endodontics, Prosthodontics, etc.

[Continue](#)

 or [Cancel](#)

* Required

Select the number of columns for your Superbill. Add a category for each column by selecting **Add Category**.

The screenshot shows the 'Superbill Maintenance' page. At the top is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar is a welcome message and a 'Log Out' link. The main heading is 'Superbill Maintenance' with a 'Printer-Friendly' link. The 'Create Superbill' section includes a 'Superbill Name' field with the value 'PROVIDER EDUCATION' and a red asterisk indicating it is required. Below this is a 'Location' field with the value 'Your Dental Practice' and a 'Primary ID' field with the value '987654321'. The 'Address' field contains '456 Main St, Fort Mill, SC 29715-0000'. The 'Number of Columns' section shows four options: One Column, Two Columns, Three Columns, and Four Columns. The 'Superbill Layout' section includes a 'Display Begin Date' field with the value '04/12/2017' and a 'Reload Categories' button. Below this is a 'Column 1' section with an 'Add Category' link. At the bottom are 'Save Superbill' and 'Cancel' buttons.

This screen appears when you select Add Category on the previous page. Define the category (such as procedure code; diagnosis code; etc.) for the selected column, then select **Save** or **Save and Add Another**.

The screenshot shows the 'Add Category' dialog box. It has a close button (X) in the top right corner. The title is 'Add Category'. There is a red asterisk indicating a required field. The 'Category Name' field is empty. The 'Display In' section has a radio button selected next to 'Column 1'. At the bottom are 'Save', 'Save and Add Another', and 'Cancel' buttons.

The Superbill Maintenance screen now displays the defined category. In the Column field, use the Actions drop-down menu to move down, edit or delete the category. Select **Add Procedure** in the Column field.

Home Patient Care Office Management Resources Modify Profile Profile Administration Staff Directory

Welcome, Your Name of Your Dental Practice [Log Out](#) [Go to Message Center](#)

Superbill Maintenance [Printer-Friendly](#)

Create Superbill

* Required

* Superbill Name: PROVIDER EDUCATION
Diagnostic, Preventive, Restorative, Endodontics, Prosthodontics, etc.

Location: Your Dental Practice Primary ID: 987654321

Address: 456 Main St
Fort Mill, SC 29715-0000

Number of Columns

One Column Two Columns Three Columns Four Columns

Superbill Layout

! You can control what content information you see by changing the date.

Display Begin Date: 04/12/2017 Actions: [Reload Categories](#) [Reset Date to Today](#)
mm/dd/yyyy

Column 1

Internal [Add Procedure](#) [Actions](#)

External [Add Procedure](#) [Actions](#)

[Add Category](#)

[Save Superbill](#) or [Cancel](#)

This screen appears when you select Add Procedure. Select the magnifying glass to search for the procedure code by description or code. Enter the amount for charges. Designate the category. Describe the procedure as appropriate and define the Display From and Display To dates. Select **Save** or **Save and Add Another**.

Add Procedure ✕

* Required

* Procedure Code: [🔍](#)

* Charges: \$

* Add to Category: Internal [▼](#)

* Description:

* Display From: [📅](#) mm/dd/yyyy * Display To: 12/31/9999 [📅](#) mm/dd/yyyy

[Save](#) [Save and Add Another](#) or [Cancel](#)

The Superbill Maintenance screen now displays the defined category with the added procedure code(s). Select **Save Superbill**.

HomePatient CareOffice ManagementResourcesModify ProfileProfile AdministrationStaff Directory

Welcome, Your Name of Your Dental Practice(Log Out)Go to Message Center

Superbill MaintenancePrinter-Friendly

Create Superbill

* Superbill Name:

PROVIDER EDUCATION

Diagnostic, Preventive, Restorative, Endodontics, Prosthodontics, etc.

Location:

Your Dental Practice

Primary ID:

987654321

Address:

456 Main St

Fort Mill, SC 29715-0000

Number of Columns

One Column

Two Columns

Three Columns

Four Columns

Superbill Layout

You can control what content information you see by changing the date.

Display Begin Date:

04/12/2017

mm/dd/yyyy

Actions:

Reload Categories

Reset Date to Today

Column 1

Internal

Dental filling

Add Procedure

External

comprehensive oral exam

Add Procedure

Add Category

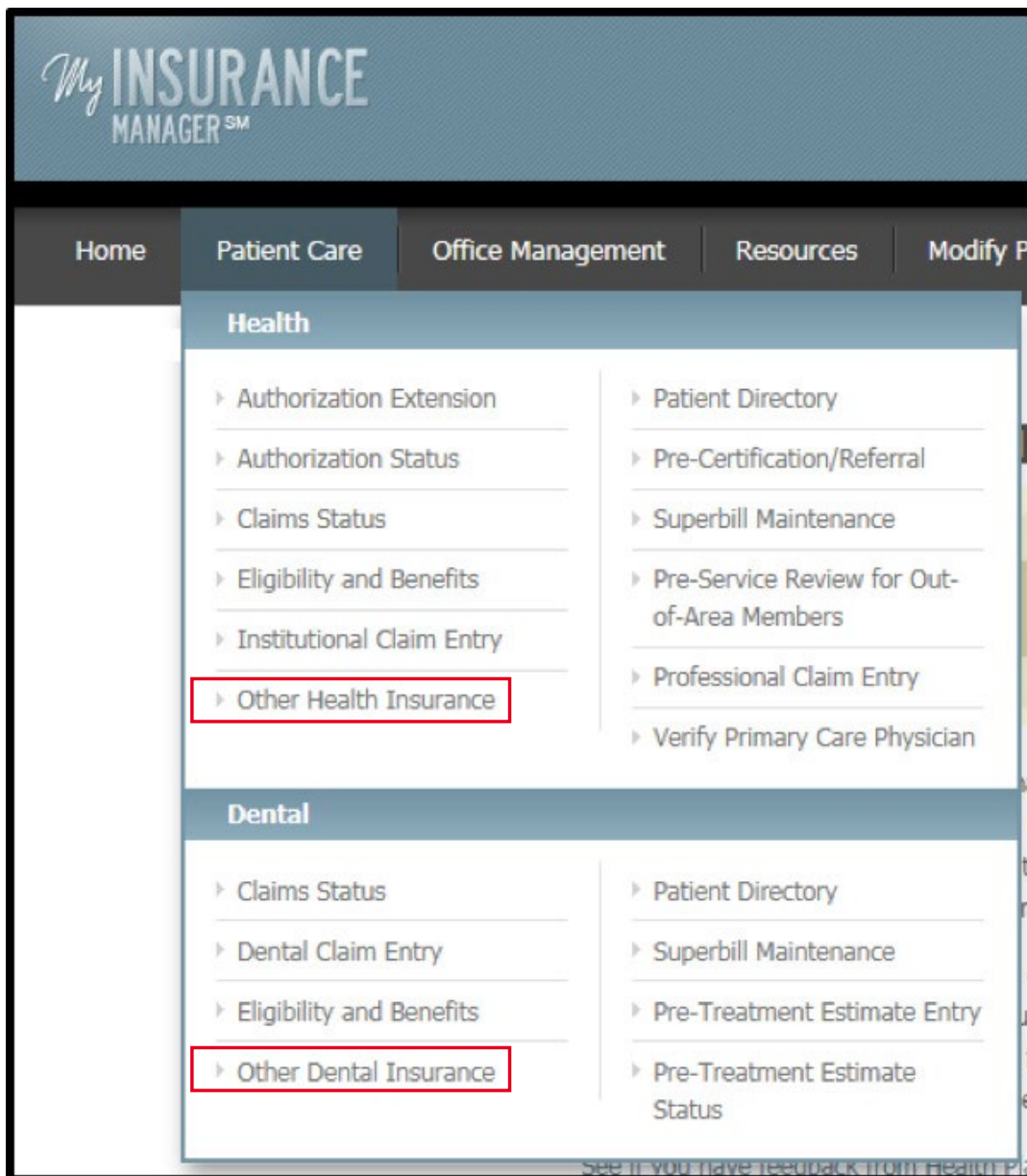
Save Superbill

or Cancel

31 | Page

Coordination of Benefits

From the Patient Care tab, select Other Health Insurance or Other Dental Insurance to establish coordination of benefits for a patient.



Select a health plan, enter the member ID and patient's date of birth. Select **Continue**.

Home Patient Care Office Management Resources Modify Profile Profile Administration Staff Directory

Welcome, YOUR NAME of YOUR PRACTICE/FACILITY (Log Out) [Go to Message Center](#)

Other Health Insurance [Printer-Friendly](#)

 Check to see if our records show your patient has Other Health Insurance.

*** Indicates required field.**

Patient Selection

*** Health Plan:**
--Please Choose One-- 

*** Member ID:**

include alpha prefix, if applicable

*** Patient's Date of Birth:**

mm/dd/yyyy

Continue

The results will show if the member has other health insurance coverage or Medicare coverage information on file.

Home Patient Care Office Management Resources Modify Profile Profile Administration Staff Directory

Welcome, YOUR NAME of YOUR PRACTICE/FACILITY (Log Out) [Go to Message Center](#)

Other Health Insurance [Printer-Friendly](#)

Insurance

Plan Name:
BlueCross BlueShield Plans

Member ID:
ZCZ065922516805

Member's Name:
MICHAEL TESTING

Change Patient

Coverage Information

Status
Our records show no Other Health Insurance coverage information on file.

Last Update Expires
04/11/2017 **04/11/2018**

Medicare

Status
Our records show no Medicare coverage information on file.

Ask Provider Services or [Back](#)

Select a dental plan, enter the member ID and patient's date of birth. Select **Continue**.

The screenshot shows the 'Other Dental Insurance' form. At the top, there is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar, a welcome message reads 'Welcome, Your Name of Your Dental Practice' with a '(Log Out)' link. A 'Go to Message Center' link is also present. The main heading is 'Other Dental Insurance' with a 'Printer-Friendly' icon. A light blue box contains a message: 'Check to see if our records show your patient has Other Dental Insurance.' Below this, a 'Patient Selection' section contains three required fields: 'Dental Plan' (a dropdown menu with '--Please Choose One--'), 'Member ID' (a text input field with a note 'include alpha prefix, if applicable'), and 'Patient's Date of Birth' (a date input field with a note 'mm/dd/yyyy'). A red asterisk indicates required fields. A 'Continue' button is at the bottom left.

The results will show if the member has other dental insurance coverage information on file.

The screenshot shows the results page for 'Other Dental Insurance'. The navigation bar and welcome message are the same as in the previous screenshot. The main heading is 'Other Dental Insurance' with a 'Printer-Friendly' icon. The page is divided into two main sections: 'Insurance' and 'Coverage Information'. The 'Insurance' section displays: Plan Name: BlueCross BlueShield Plans, Member ID: ZCZ065922516805, and Member's Name: MICHAEL TESTING. The 'Coverage Information' section displays: Status: Our records show no Other Dental Insurance coverage information on file., Last Update: 07/27/2016, and Expires: 07/27/2017. At the bottom, there is a 'Change Patient' button, an 'Ask Provider Services' button, and a 'Back' link.



In the event of any inconsistency between the information in this handbook and agreement(s) between you and BlueCross BlueShield of South Carolina or BlueChoice HealthPlan, the terms of such agreement(s) shall govern. The information included is general and in no event should be deemed to be a promise or guarantee of payment. We do not assume and hereby disclaim any liability for loss caused by errors or omissions in preparation and editing of this publication.

BlueCross BlueShield of South Carolina and BlueChoice HealthPlan are independent licensees of the Blue Cross and Blue Shield Association.