BlueCard® Program Tutorial

Eligibility and Benefits

Blue Shield of California's Provider Connection site provides secure, reliable access to up-to-date eligibility and benefits information for out-of-state Blue plan members.

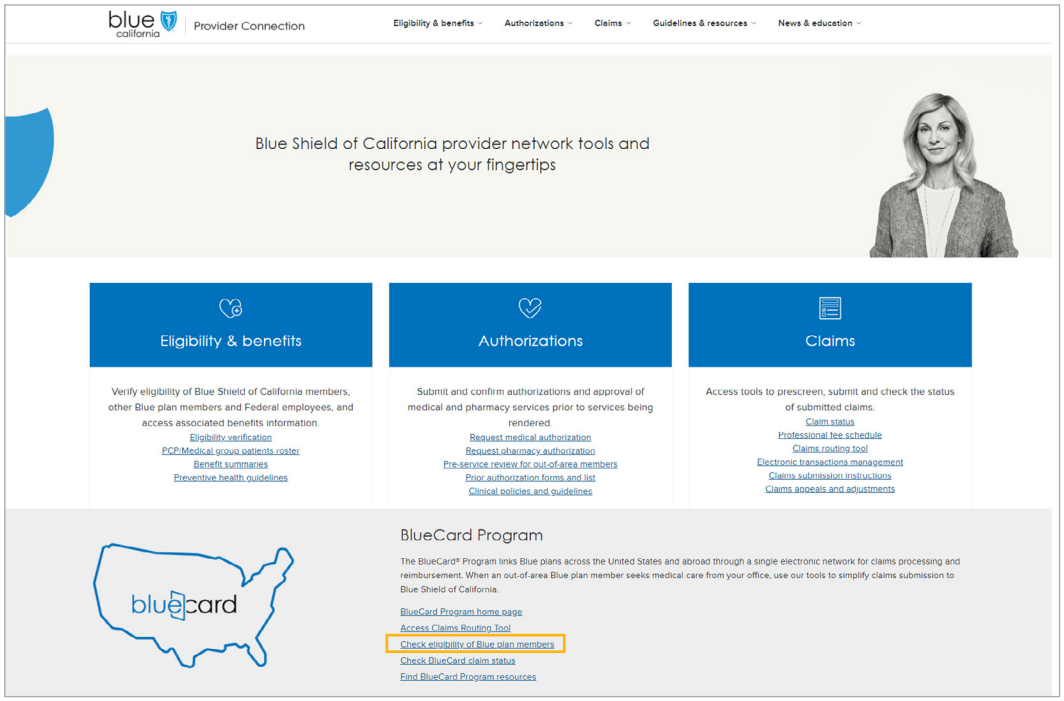
After completing the Eligibility and Benefits tutorial, you will be able to:

- Find eligibility and benefits information online for an out-of-state Blue plan member
- Understand eligibility and coverage information, including the claims mailing address
- Understand benefit information, including benefit limitations

Begin

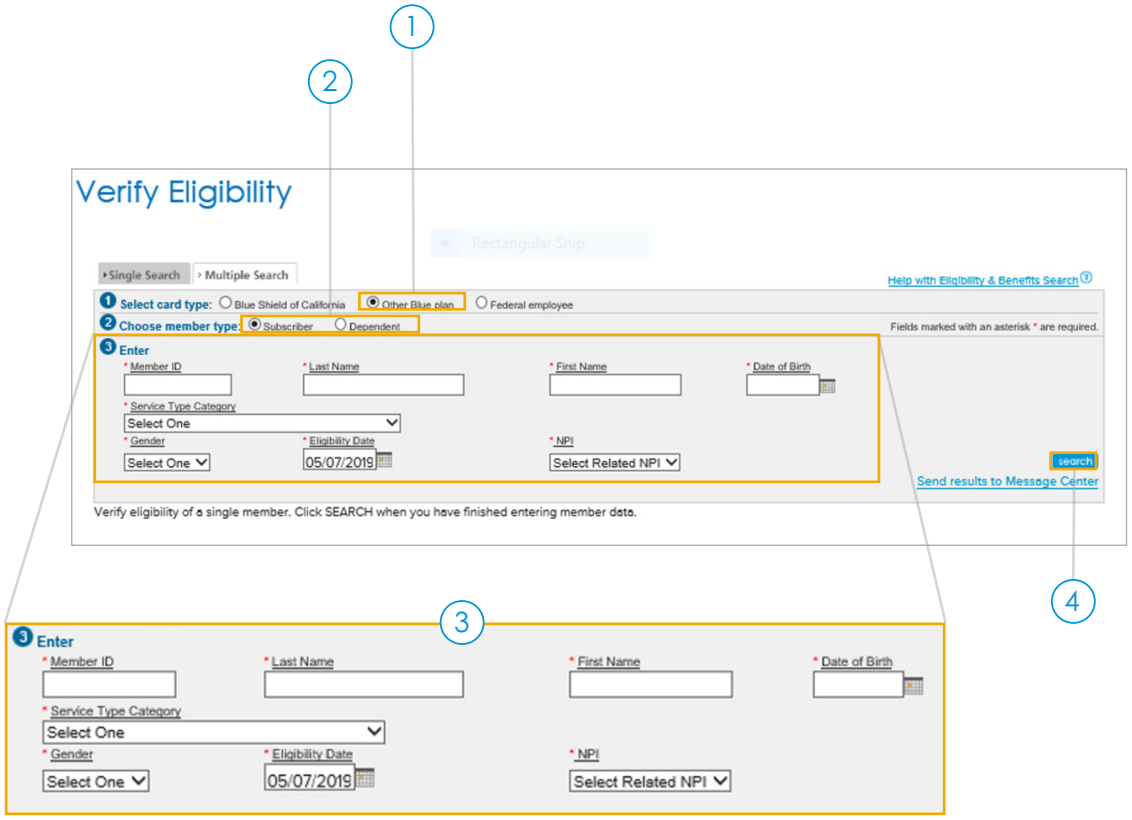
Provider Connection home page

To search for eligibility and benefits, click the ***Check eligibility of Blue plan members*** link in the BlueCard Program box.



Verify Eligibility page

1. Select ***Other Blue plan*** as card type
2. Choose ***Subscriber*** or ***Dependent*** as member type
3. Enter all required data fields
4. Click ***Search***

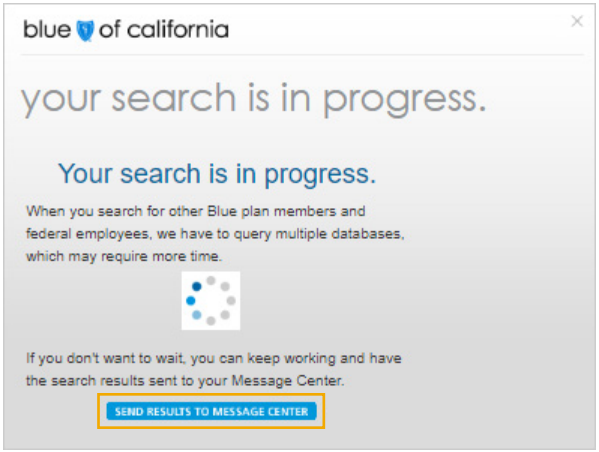


"Search in progress" screen

The "Search in progress" screen appears while the search results are being retrieved.

Note: If you don't want to wait for the search results, you can click ***Send results to Message Center****.*

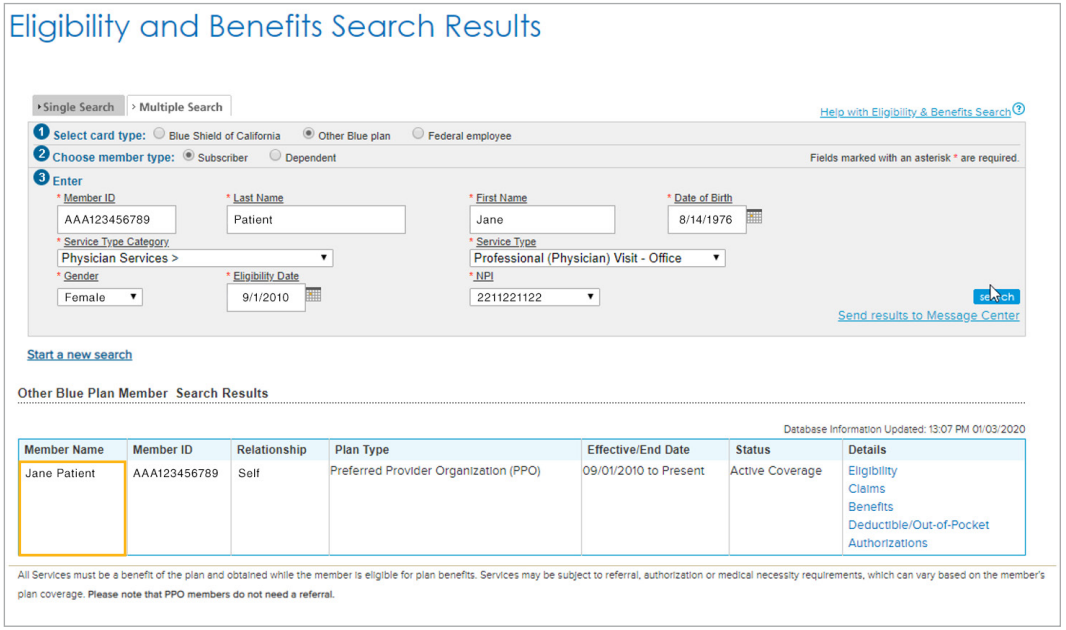
If the search takes longer than 45 seconds to complete, the results are automatically sent to your Message Center.



Eligibility and benefits search results

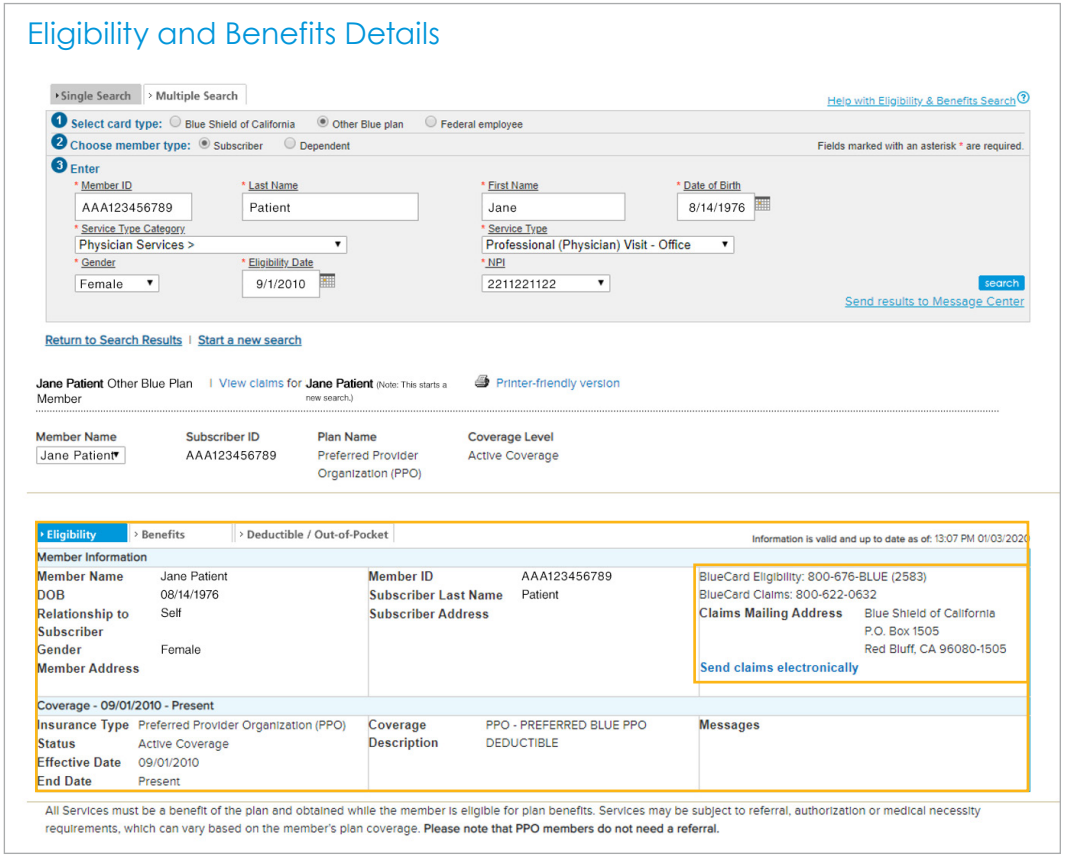
The system displays a list of members that meet the search criteria you entered.

Click ***Member Name*** to view eligibility and benefit details for the member.



Eligibility and benefits details – Eligibility tab

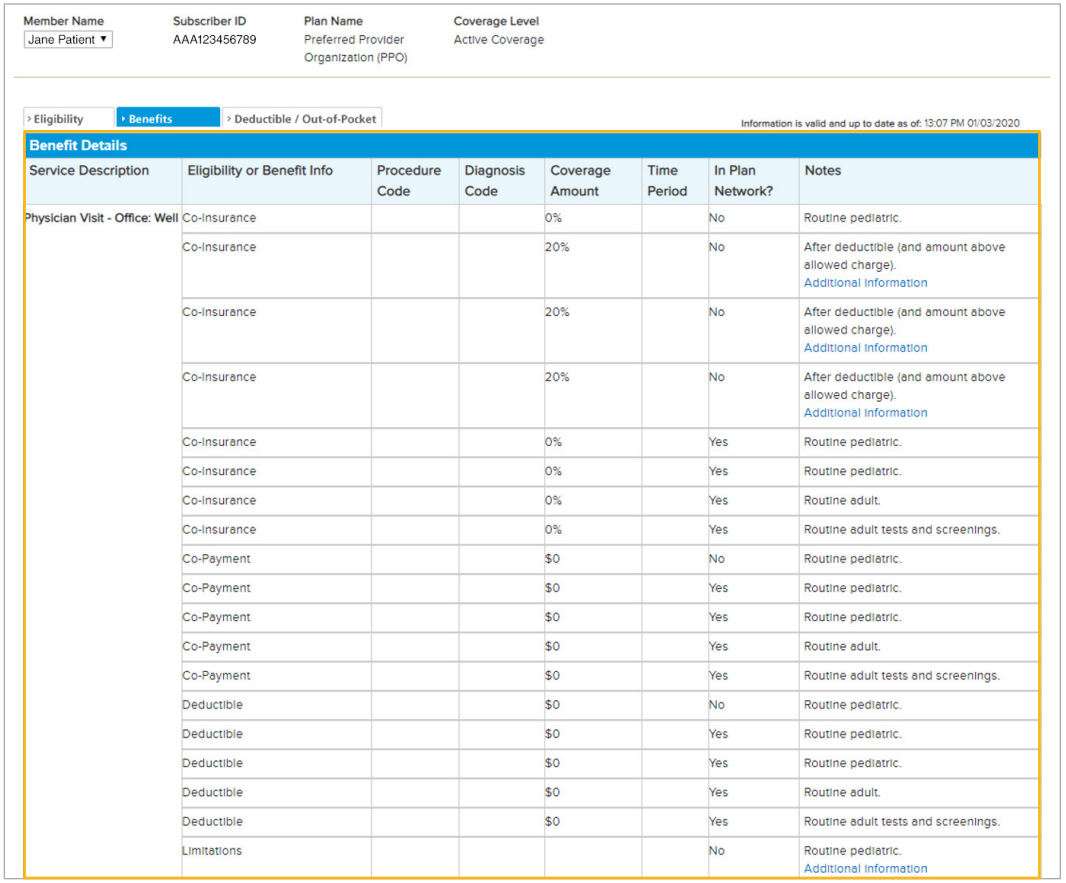
Scroll down to view detailed information about this **member's eligibility and coverage**.



Eligibility and benefits details – Benefits tab

The **Benefits section** displays detailed information about:

- Copayments
- Authorization requirements
- Benefit limits



Member Name: Jane Patient
Subscriber ID: AAA123456789
Plan Name: Preferred Provider Organization (PPO)
Coverage Level: Active Coverage

› Eligibility | › Benefits | › Deductible / Out-of-Pocket

Information is valid and up to date as of: 13:07 PM 01/03/2020

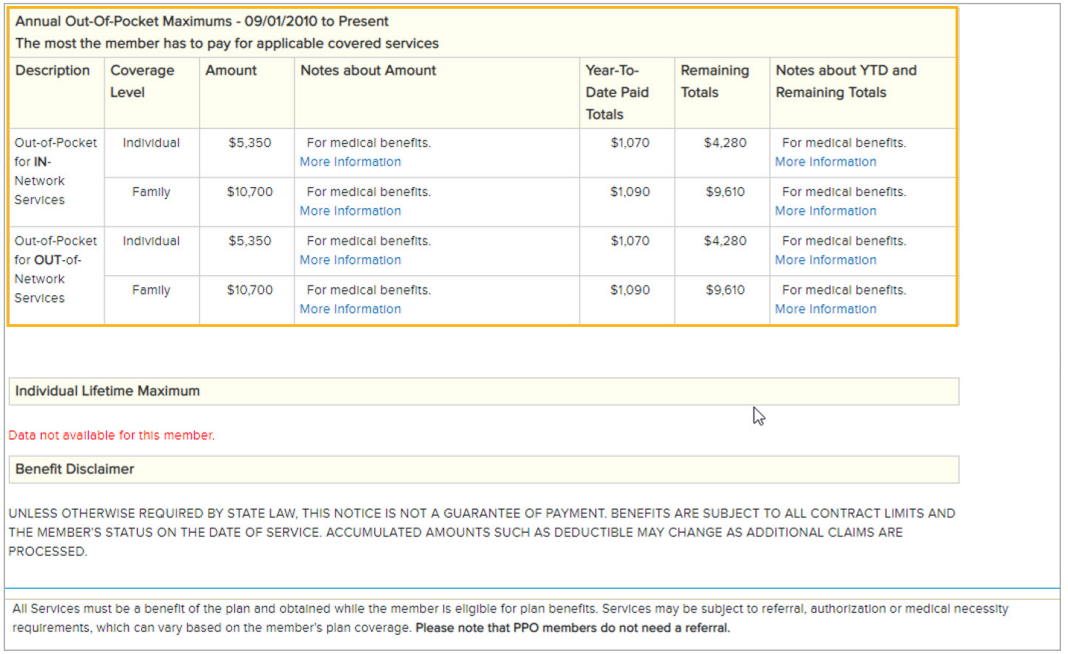
Benefit Details

Service Description	Eligibility or Benefit Info	Procedure Code	Diagnosis Code	Coverage Amount	Time Period	In Plan Network?	Notes
Physician Visit - Office: Well	Co-Insurance			0%		No	Routine pediatric.
	Co-Insurance			20%		No	After deductible (and amount above allowed charge). Additional Information
	Co-Insurance			20%		No	After deductible (and amount above allowed charge). Additional Information
	Co-Insurance			20%		No	After deductible (and amount above allowed charge). Additional Information
	Co-Insurance			0%		Yes	Routine pediatric.
	Co-Insurance			0%		Yes	Routine pediatric.
	Co-Insurance			0%		Yes	Routine adult.
	Co-Insurance			0%		Yes	Routine adult tests and screenings.
	Co-Payment			$0		No	Routine pediatric.
	Co-Payment			$0		Yes	Routine pediatric.
	Co-Payment			$0		Yes	Routine pediatric.
	Co-Payment			$0		Yes	Routine adult.
	Co-Payment			$0		Yes	Routine adult tests and screenings.
	Deductible			$0		No	Routine pediatric.
	Deductible			$0		Yes	Routine pediatric.
	Deductible			$0		Yes	Routine pediatric.
	Deductible			$0		Yes	Routine adult.
	Deductible			$0		Yes	Routine adult tests and screenings.
	Limitations					No	Routine pediatric. Additional Information

Eligibility and benefits details – Out-of-Pocket tab

The **Deductible/Out-of-Pocket section** displays detailed information about annual deductible amounts, accumulations, maximums, and more.

Note: Year-to-date benefit accumulations are for the service type and category you searched.



Annual Out-Of-Pocket Maximums - 09/01/2010 to Present
The most the member has to pay for applicable covered services

Description	Coverage Level	Amount	Notes about Amount	Year-To-Date Paid Totals	Remaining Totals	Notes about YTD and Remaining Totals
Out-of-Pocket for **IN**-Network Services	Individual	$5,350	For medical benefits. More Information	$1,070	$4,280	For medical benefits. More Information
	Family	$10,700	For medical benefits. More Information	$1,090	$9,610	For medical benefits. More Information
Out-of-Pocket for **OUT**-of-Network Services	Individual	$5,350	For medical benefits. More Information	$1,070	$4,280	For medical benefits. More Information
	Family	$10,700	For medical benefits. More Information	$1,090	$9,610	For medical benefits. More Information

Individual Lifetime Maximum

Data not available for this member.

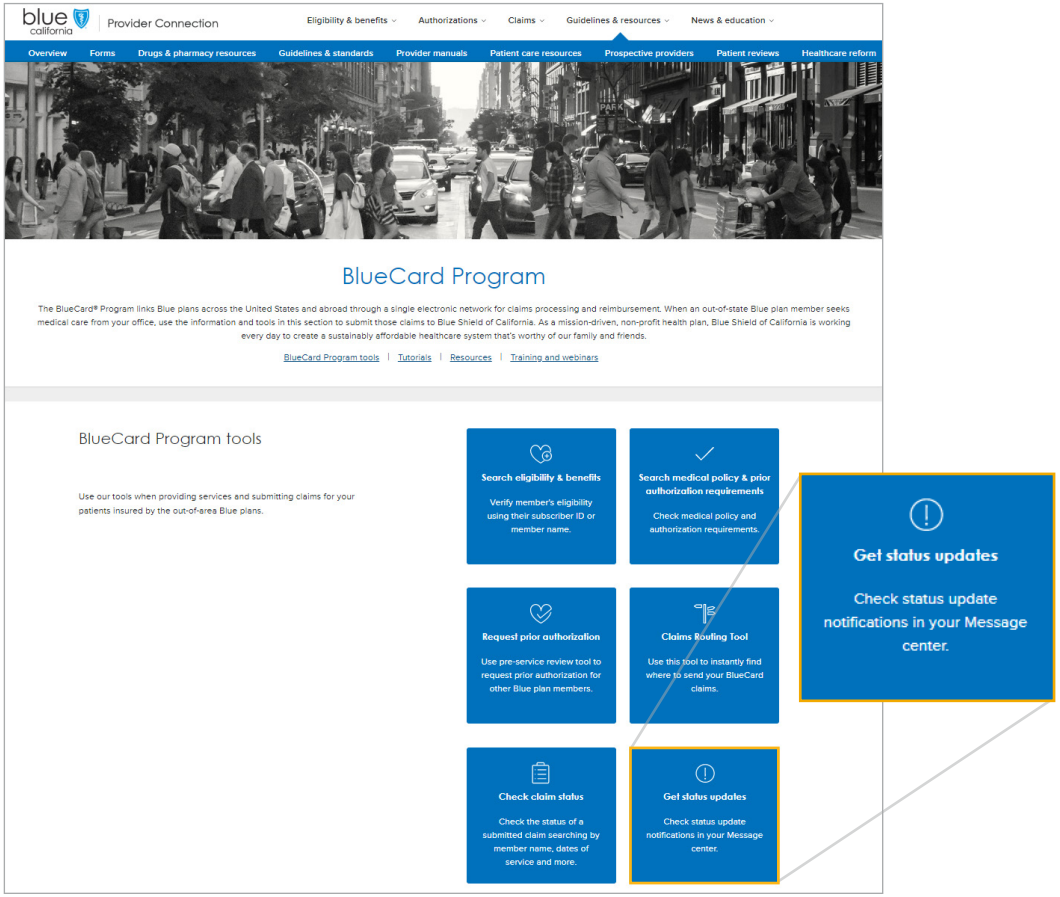
Benefit Disclaimer

UNLESS OTHERWISE REQUIRED BY STATE LAW, THIS NOTICE IS NOT A GUARANTEE OF PAYMENT. BENEFITS ARE SUBJECT TO ALL CONTRACT LIMITS AND THE MEMBER'S STATUS ON THE DATE OF SERVICE. ACCUMULATED AMOUNTS SUCH AS DEDUCTIBLE MAY CHANGE AS ADDITIONAL CLAIMS ARE PROCESSED.

All Services must be a benefit of the plan and obtained while the member is eligible for plan benefits. Services may be subject to referral, authorization or medical necessity requirements, which can vary based on the member's plan coverage. **Please note that PPO members do not need a referral.**

Message Center

To view BlueCard responses that you sent to the Message Center – or that the system did not return within 45 seconds – select ***Get status updates***.

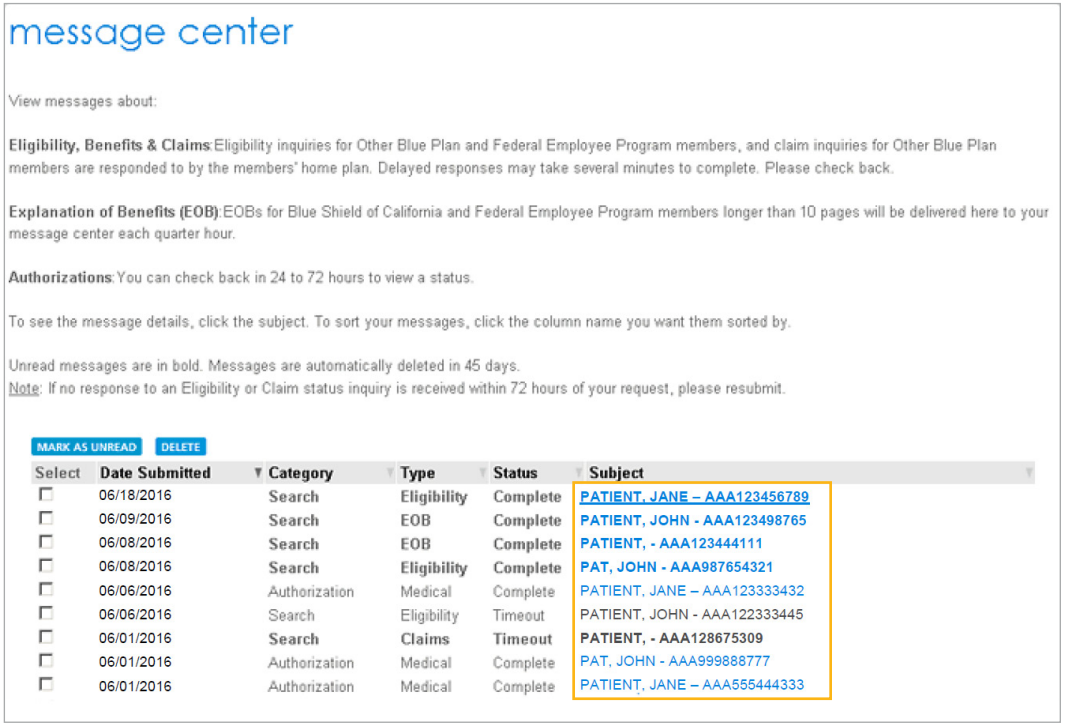


Message Center

Messages are sorted by the member name shown in the "Subject" column.

View details for any row by clicking the ***Subject*** link for a particular message.

Note: Columns can be sorted by clicking on the column header.



message center

View messages about:

Eligibility, Benefits & Claims: Eligibility inquiries for Other Blue Plan and Federal Employee Program members, and claim inquiries for Other Blue Plan members are responded to by the members' home plan. Delayed responses may take several minutes to complete. Please check back.

Explanation of Benefits (EOB): EOBs for Blue Shield of California and Federal Employee Program members longer than 10 pages will be delivered here to your message center each quarter hour.

Authorizations: You can check back in 24 to 72 hours to view a status.

To see the message details, click the subject. To sort your messages, click the column name you want them sorted by.

Unread messages are in bold. Messages are automatically deleted in 45 days.
Note: If no response to an Eligibility or Claim status inquiry is received within 72 hours of your request, please resubmit.

MARK AS UNREAD | DELETE

Select	Date Submitted	Category	Type	Status	Subject
☐	06/18/2016	Search	Eligibility	Complete	PATIENT, JANE – AAA123456789
☐	06/09/2016	Search	EOB	Complete	PATIENT, JOHN - AAA123498765
☐	06/08/2016	Search	EOB	Complete	PATIENT, - AAA123444111
☐	06/08/2016	Search	Eligibility	Complete	PAT, JOHN - AAA987654321
☐	06/06/2016	Authorization	Medical	Complete	PATIENT, JANE – AAA123333432
☐	06/06/2016	Search	Eligibility	Timeout	PATIENT, JOHN - AAA122333445
☐	06/01/2016	Search	Claims	Timeout	PATIENT, - AAA128675309
☐	06/01/2016	Authorization	Medical	Complete	PAT, JOHN - AAA999888777
☐	06/01/2016	Authorization	Medical	Complete	PATIENT, JANE – AAA555444333

Conclusion

Congratulations! You have completed the Eligibility and Benefits tutorial.

We encourage you to continue your learning. The BlueCard Tutorials web page contains other informative BlueCard tutorials, plus additional resources you may find helpful.

For questions related to:

- BlueCard eligibility: **(800) 676-BLUE (2583)**
- BlueCard Claims Unit: **(800) 622-0632**
- Authorization requests: Call the Medical Management number printed on the member's ID card
- Web technical support: **(800) 541-6652**

BlueCard claims mailing address:

Blue Shield of California
BlueCard Program
P.O. Box 1505
Red Bluff, CA 96080-1505

Your online resources for:

- Member eligibility
- Authorization requests
- Claims status

Blue Shield of California is an independent member of the Blue Shield Association A52072-E&B (3/20)