

Blue Advantage (HMO) | Blue Advantage (PPO)

A Medicare Advantage Plan



Blue Advantage Provider Portal User Guide

21-189_Y0132_C 18100 013900 0521R Blue Cross and Blue Shield of Louisiana HMO offers Blue Advantage (HMO). Blue Cross and Blue Shield of Louisiana, an independent licensee of the Blue Cross and Blue Shield Association, offers Blue Advantage (PPO).

Blue Advantage from Blue Cross and Blue Shield of Louisiana HMO is an HMO plan with a Medicare contract. Blue Advantage from Blue Cross and Blue Shield of Louisiana is a PPO plan with a Medicare contract. Enrollment in either Blue Advantage plan depends on contract renewal.

Blue Advantage Provider Portal User Guide

The Blue Advantage Provider Portal is your one-stop electronic resource for Blue Advantage information and is available through iLinkBlue (<u>www.BCBSLA.com/ilinkblue</u>), then click **Blue Advantage** under the **Other Sites** section. This portal requires separate account access from iLinkBlue.

The Blue Advantage Provider Portal is available for in-network providers only.

This guide is designed to provide detailed instructions on how to access and register for the portal and use its features. This guide is available on the Blue Advantage Provider Portal under the "Documents" section.

For technical questions relating to registration or login access, please call 1-866-508-7145.

Please Note:

This guide contains general instructions. It is provided for informational purposes only. Every effort has been made to print accurate, current information. Errors or omissions, if any, are inadvertent.

All patient data included in this document is fictious. Information in this document is subject to change without notice.

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Levels of Portal Access

There are two levels of access that a person can have to the Blue Advantage Provider Portal:

• Group Moderator:

Person within the provider organization who is designated to complete the initial group registration and thereafter grants access of the user(s) to the Blue Advantage Provider Portal.

Blue Advantage requires that each group designates at least one Group Moderator to self-manage user access to the provider portal for your organization. <u>New group registration must be completed by the Group Moderator</u>.

• User:

Person(s) at the provider organization who has been granted security access by the Group Moderator and thereafter can self-manage their own portal access only.

How to Access the Portal

Providers in our Blue Advantage networks must access the Blue Advantage Provider Portal through iLinkBlue (<u>www.BCBSLA.com/ilinkblue</u>), then click on **Blue Advantage** under the **Other Sites** section.



We recommend using Google Chrome to access the Blue Advantage Provider Portal.

Blue Advantage Provider Portal Homepage

- If you already have a portal account, click **I Have an Account** or **Log In** on the homepage to log into your account.
- If the group you are affiliated with has already been registered and you need to join the group, please refer to the **Portal Registration Join an Existing Group** section of this guide.
- If the group you are affiliated with is not currently registered, please refer to the **Portal Registration Register a New Group** section of this guide.



Portal Registration – Register a New Group

To gain portal access, the Group Moderator must first register the group by completing the steps below:

- Log on to iLinkBlue (www.BCBSLA.com/ilinkblue).
- Click **Blue Advantage** under the Other Sites section.
- Click Register a New Group.



- The following information is needed to complete the group registration process:
 - Your contact information (name, email and phone number)
 - The name of your group
 - A list of the Tax IDs that your group needs access to (If you need to add or remove a Tax ID number from your group after registration is complete, you must contact Blue Advantage at 1-866-508-7145.)
- Once you have gathered all the information above, click **Next**.

1 Group Registration Form — 2 Contact Information — 3 Group Information — 4 Review & Submit
Group Registration Form
NOTE: Please check with your supervisor before filling out this form. Your group may already have access to the portal.
If your group has already been registered, you may request access for yourself by clicking here.
What We Will Need
 Your contact info (Name, Email, & Phone) The name of your group A list of the Tax IDs that your group needs access to
Back

• Fill in your required contact information: First Name, Last Name, Email and Phone Number. Then click Next.

Group Registration Form —	Contact Information — 3 Grou	ip Information — 4 Review & Submit
Contact Information		
First Name	Middle Name (Optional)	Last Name
Email Ex: portaluser@gmail.com		
Phone Number		
Ex: (111)222-3333 OR 1112223333		

- Fill in the required group information Company Name and Tax ID. Multiple Tax ID numbers can be entered by separating with a comma or a space.
- Then click **Next**.

Sroup Registration Form — 🔗 Contact Information —	— 3 Group Information —	— 4 Review & Submit
Group Information		
Company Name		
Add Tax ID(s) Ex: 11-222222,22-3333333, OR 112222222 223333333 Back Next		

• Review your information. If all information is correct, click **Submit**.

Group Registration Form — 🔗 Conta	act Information —	Group Information –	- 4 Review & Submit
Review & Submit			
Name		John Doe	
Email		portaluser@g	jmail.com
Phone		(111)222-333	3
Group Name		Your Compar	ny's Name
Tax IDs		11-2222222,	22-3333333
I'm not a robot			
Back Submit			

Next Steps After Submitting the Group Registration Form

 Once the registration form has been submitted, the Group Moderator will receive an email from Blue Advantage via DocuSign[®] (dse NA3@docusign.net) containing the Blue Advantage Portal User Agreement. The Group Moderator should click **Review Document** in the email to review and sign this document via DocuSign before their request can be approved.

DocuSign	
BCBSLA sen	nt you a document to review and sign.
	REVIEW DOCUMENT
Please review and sign the attac	ched agreement.

- The Group Moderator's request is then reviewed by Blue Advantage before portal access is granted.
 - If Blue Advantage approves the request, the Group Moderator will receive an email from Auth0 Mail (<u>auth0mail@blueadvantage.bcbsla.com</u>) to reset their password. Once reset, the Group Moderator can now access the Blue Advantage Provider Portal.

Blue	Cross and Blue Shield of Louisiana
	Hi Brian,
	You recently requested a password reset for your BCBSLA Portal account. Use the button below to reset it. This password reset is only valid for the next 24 hours.
	NOTE: If you have recently applied for access to the portal, you may be receiving this email as part of the registration process.
	Reset your password
	If you did not request a password reset, please ignore this email.
	Thanks, The BCBSLA Portal Team
	If you're having trouble with the button above, copy and paste the URL below into your web browser.
	https://bcbsla.auth0.com/u/email-verification?ticket=SdT8xAcev5UaXNmfC67aYfpUEfGFJS1D#

 If Blue Advantage denies the request, the Group Moderator will receive an email from <u>noreply@automailer.blueadvantagela.com</u> notifying them that the request was denied and the reason for the denial. The Group Moderator may call Blue Advantage Customer Service at 1-866-508-7145 if they need further assistance or believe their request was denied in error.

IMPORTANT: Once the group registration has been approved, the person who submitted the registration request will be granted Group Moderator access.

Need to set up additional users within your group?

• Refer to the **Portal Registration – Join an Existing Group** section in this guide for more information.

Need to set up additional Group Moderators for your group?

• Refer to the **Account Details** section in this guide for more information.

Did not receive a password reset email?

• Refer to the **Troubleshooting** section in this guide for more information.

Portal Registration – Join an Existing Group

To gain user access to the provider portal, there are two options: (group registration must be completed before users can register)

Option 1 – The Group Moderator can invite users to register for security access to the Blue Advantage Provider Portal:

- Click View My Group at the top of the portal screen,
- Select Send Portal Invite then,
- Enter the user's email address and click Send Email.

Group Profile Group and group owner info	
Name:	
Owner:	Send Portal Invite
Owner Phone:	Send an email with a link to request portal access.
Owner Email:	Email Address
Provider Group Code:	
Tax IDs:	CANCEL Send Email
EMAIL CALL SEND PORTAL INVITE	

Option 2 – Users may initiate the request themselves to join an existing group on the Blue Advantage Provider Portal.

- Log onto iLinkBlue (www.BCBSLA.com/ilinkblue).
- Click **Blue Advantage** under the Other Sites section.
- Click Join an Existing Group.



Completing Option 1 or Option 2 will take users to the User Registration Form.

- The user must enter the following information to complete the registration process:
 - Click the registration link in the autogenerated email. (Option 1)
 - Click Next.



- Fill in the required contact information: First Name, Last Name, Email, Phone Number and Portal Group Code.
- Then click **Next**.

✓ User Registration Form —	2 Contact Information	3	Review & Submit
Contact Information			
First Name	Middle Name (Optional)	Last Name	
Email			
Ex: portaluser@gmail.com			
Phone Number			
Ex: (111)222-3333 OR 1112223333			
Portal Group Code			
Please enter the code provided by yo	ur group moderator.		
Back			

• Review your information. If all information is correct, click **Submit**.

Ouser Registration Form	Cor	ntact Information —	3 Review & Submit
Review & Submit			
Name		Joh	n Doe
Email		johr	ndoe@portal.com
Phone		(111)222-3333	
Provider Code		123	45678
I'm not a robot	reCAPTCHA Privacy - Terms		
Back		-	

Next Steps After Submitting the User Registration Form

 Once the registration form has been submitted, the user will receive an email from Blue Advantage via DocuSign (<u>dse NA3@docusign.net</u>) containing the Blue Advantage Portal User Agreement. The user should click **Review Document** in the email to review and sign this document via DocuSign before the request can be approved.

DocuSign	
BCBSLA sent you a document to review and sign.	
Please review and sign the attached agreement.	

- The user's request is then reviewed by the Group Moderator before the user is granted access to the portal. (Group Moderators: refer to the **Admin Center** section of this guide for how to approve or deny requests for portal access.)
 - If the Group Moderator approves the request, the user will receive a notification email that access was approved. The user will also receive an email from Auth0 Mail (<u>auth0mail@blueadvantage.bcbsla.com</u>) to reset their password. Once reset, the user can now access the Blue Advantage Provider Portal. Users will not receive a password reset email until the Group Moderator has approved the user's request to join the group.

Blue	Cross and Blue Shield of Louisiana
	Hi Brian, You recently requested a password reset for your BCBSLA Portal account. Use the
	button below to reset it. This password reset is only valid for the next 24 hours. NOTE: If you have recently applied for access to the portal, you may be receiving this email as part of the registration process.
	Reset your password
	Thanks, The BCBSLA Portal Team
	If you're having trouble with the button above, copy and paste the URL below into your web browser.
	If you're having trouble with the button above, copy and paste the URL below into your web browser. https://bcbsla.auth0.com/u/email-verification?ticket=SdT8xAcev5UaXNmfC67aYfpUEfGFIS1D#

 If the Group Moderator denies the request, the user will receive an email from <u>noreply@automailer.blueadvantagela.com</u> notifying them that the request was denied and the reason for the denial. The user should contact the Group Moderator if they believe the request was denied in error.

My Profile

Users can view their personal portal profile by clicking the icon at the top right of the portal screen, then select **My Profile**. This will open the **Account Details** screen where users can review and update profile information.

Request Group Change

You can submit a request to join a different group from this screen by selecting **Request Group Change**. You will need the group code associated with the group you are joining in order complete this request. Your Group Moderator will be able to provide the group code.

Request Group Moderator Access

If your group has more than one Group Moderator, additional users within your group may request Group Moderator access by selecting Request Moderator Access on the Account Details screen.

Account Details		
Name		
Email		
Company		
Access Level		
UPDATE PROFILE	REQUEST GROUP CHANGE	REQUEST MODERATOR ACCESS

Group Profile

To view group profile information, click **View My Group** at the top right of the portal screen.



Only Group Moderators will have the option to send portal invites from this screen.

Group Profile Group and group owner info	
Name:	Provider Accounting Services
Owner:	Holly Manager
Owner Phone:	(111) 222-3333
Owner Email:	hmanager@pas.fake
Provider Group Code:	30775463
Tax IDs:	
	444444, 22-3333333, 11-2222222
EMAIL CALL SEND PORTAL INVITE	

Admin Center

The Admin Center is only visible and accessible for Group Moderators. This feature allows Group Moderators to approve and deny requests for portal access, as well as view and update users' data.

💩 🕼 Louisiana		
2 Admin Center	Approve & Deny Requests for Porta	al Access View & Update Portal User Data
Authorizations	Search Criteria	
Chocks	Name of Requester	

Approve and Deny Requests for Portal Access

If you leave the search criteria blank, by default, you will see just the pending access requests. You can search for additional requests (such as those that have been approved or denied) or narrow down the list of requests by entering in a name, company name, requested role, request date or request status. All requests, meeting the criteria entered, will appear on the screen. Click on a request within the list to view the request details.

Search Criteria	Name of Requester	Company	Requested Role	Request Status	Request Date
Name of Requester			GroupModerator	Pending	8/20/2020
Company Name			GroupModerator	Pending	8/20/2020
Demosted Data			GroupModerator	Pending	8/20/2020
Requested Role			GroupModerator	Pending	8/20/2020
Request Date			GroupModerator	Pending	8/18/2020
Request Status Pending			GroupModerator	Pending	8/18/2020
			GroupModerator	Pending	8/18/2020
Search			GroupModerator	Pending	8/18/2020
Reset Search			GroupModerator	Pending	8/18/2020

- The Group Moderator can approve or deny the request on the **Request Details** page.
- Notice in the example below that the **Approve** button is grayed out. This is because the user has not yet signed the Blue Advantage Portal User Agreement, which is indicated by the alert in red below (NOTE: user has not signed DocuSign documents). The user should have received an email containing the portal user agreement. The user must review and sign this document before access can be approved. When the user has signed the agreement, the alert in red below will be removed and the approve button will become available.

Request Details Details about the user account being requested NOTE: user has not signed Docusign documents	
Status	Pending
First Name	
Middle Name	
Last Name	
Role	GroupModerator
Date Requested	8/20/2020
Group Name	
Date of Last Update	No Record
Last Updated By	No Record
DENY APPROVE	
Contact User Contact information for this user	
Email	
Phone	
New User	Yes
EMAIL CALL	

Once the Group Moderator approves the request, the user will receive a notification email that their access request was approved. The user will also receive an email from Auth0 Mail (<u>no-reply@auth0user.net</u>) requesting password reset. Once reset, the user will be able to access the portal.

View and Update Portal User Data

In the **Admin Center**, Group Moderators can view and update users' data within the portal group. To view a list of the users within your group, click **Admin Center** then click **View and Update Portal User Data**. If you leave the search criteria blank, you will see the full list of users within your provider group. You may narrow down the user list by entering in a name, company name, role or creation date. All users, meeting the criteria entered, will appear on the screen. Click on a user within the list to view more details.

💩 🗑 Louisiana					Uiew My Group
2 Admin Center	Approve & Deny Requests for Port	al Access	View & Update Portal User Data		
Authorizations	Search Criteria	Name	Company	Role	Date Created
Checks	Name			Provider	8/6/2020
E Claims	Company Name			GroupModerator, Provide	r 8/6/2020
Resources					
 Member Lookup 	Role				
Online Auth Portal	Date Created				
a Provider Directory					
	Search				
	ocaicit				
	Reset Search				

Group Moderators are responsible for promptly revoking user access when an employee's role changes, or employment is terminated.

- To revoke user access completely, click Revoke Access. This user will no longer be able to access the Blue Advantage Provider Portal.
- To remove a user's Group Moderator access only, click **Demote**. This user will still have access to the Blue Advantage Provider Portal, but they will no longer be a Group Moderator for the provider group.

Provider Info Information administrators need to know about this user
First Name
Middle Name
Last Name
Email
Phone
Group
Access Level
Date Created
REVOKE ACCESS DEMOTE EDIT USER EMAIL CALL

Authorizations

Users can view the status of a member's authorization by selecting the **Authorizations** feature. To pull up a specific authorization, enter the following criteria and clicking **Search**.

- Auth ID
- Member ID
- Member Name
- Effective Date
- Status

All authorizations, meeting the criteria entered, will display on the screen and one of the following authorizations status options will appear:

- Approved
- Processing: member in an inpatient facility and has not been discharged
- Pending: a decision is still pending
- Denied
- Closed: no decision was rendered

The results can be sorted by clicking the column headers at the top of the table.

💩 🕅 Louisiana					View My Group
2 Admin Center	Search Criteria	Auth ID	Name	Status	Effective Date
If Authorizations	Auth ID	ш		Approved	11/2/2020
Checks	Member ID	8		Approved	10/30/2020
Claims		10		Approved	10/29/2020
Resources	Member First Name	12		Approved	10/27/2020
 Member Lookup 	Member Last Name	2		Pending	10/21/2020
Online Auth Portal	Effective Date	1		Approved	10/12/2020
Provider Directory		6		Approved	10/5/2020
	Status •	4		Approved	9/21/2020
		Z		Approved	9/21/2020
	Search	3		Approved	8/26/2020
	Reset Search	106		Approved	5/13/2020

Click on a specific authorization within the results table to view additional details. The **authorization details** screen will display additional details surrounding the authorization, as well as diagnosis details and service groups, as shown below.

Authorization Detail		
Authorization		
Auth#:	12	
Member Name:		
Status:	APPROVED	
Card #:		
Refer From:		
Refer To:		
Effective Date:	10/27/2020	
Term Date:	11/26/2020	
Auth Description:	Outpatient Services in Physician Office	
Diagnosis Details		
Diagnosis Code	Description	
G71.0	Muscular dystrophy	
		$\label{eq:linear} \text{Items per page: } \underline{15 \textbf{w}} \qquad 1-1 \text{ of } 1 \qquad \boldsymbol{<} \boldsymbol{<} \boldsymbol{>} \boldsymbol{>} $
Service Groups		
Service Group	Status	
A: Outpatient/Office Physician Services	APPROVED	
		$\label{eq:literative} \mbox{literative} \mbox{perpage: } \frac{15 \Psi}{2} \qquad 1-1 \mbox{ of } 1 \qquad < < > > $

Checks

Users can view provider payment registers by selecting the **Checks** feature. To pull up a specific check, enter the following criteria and click **Search**.

- Check #
- Print Date
- Tax ID
- Printed Within time period

All checks meeting the criteria entered will be displayed. To sort results by **Check #** or **Print Date** click the column header at the top of the table.

To see all claims associated with a specific payment, click the check number within the results table. This will take users to the **Claims** page to view this information.

💩 🗑 Louisiana					📰 View My Group
🛃 Admin Center	Search Criteria	Check Number	Check Amount	Print Date	View Check PDF
Authorizations	Check #	_	\$70,258.38	11/18/2020	View Check PDF
Autionzations	Print Date		\$86,766.71	11/18/2020	View Check PDF
Checks		_	\$760.40	11/18/2020	View Check PDF
E Claims	Printed Within (default 1 year)	_	\$9,639.82	11/18/2020	View Check PDF
Resources	1 Year 👻		\$79,959.12	11/11/2020	View Check PDF
✓ Member Lookup		_	\$128,172.68	11/11/2020	View Check PDF
Online Auth Portal		_	\$586.68	11/11/2020	View Check PDF
Brovider Directory			\$8,295.27	11/11/2020	View Check PDF
at Provider Directory			\$69,687.70	11/4/2020	View Check PDF
			\$130,269.81	11/4/2020	View Check PDF
			\$138.11	11/4/2020	View Check PDF
			\$9,142.90	11/4/2020	View Check PDF

To determine if a payment was an electronic or paper check, look at the check number:

- Paper check numbers will always start with 311
- Electronic check numbers will always start with 322

To download a PDF version of the remittance advice and check, click **View Check PDF** within the results table.

Claim #:	Provider: Group: STANDARD AFFINITY PLAN					Account #:						
Date(s) of Service	Procedure	Units	Total Billed	Not Allowed	Eligible	Not Covered	Со-рау	Patient Deductible	Coinsurance	Discount/ Interest	Explanation Code(s)	Payment Amount
07/01/20-07/01/20	DRUGS, GENERAL 0250	11	\$134.31	\$134.31	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	CR:A	\$0.00
07/01/20-07/01/20	INJECTION CEFAZOLIN SOCIUM SOCIONIO	5	\$60.30	\$60.30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	CR;A	\$0.00
07/01/20_07/01/20	INJECTION HYDROMORPHONE	1	\$5.70	\$5.70	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	CR-A	\$0.00

Claims

Users can view claims associated with their group by selecting the **Claims** feature. To search for a specific claim, enter the following criteria and click **Search**.

- Member ID
- Member First Name
- Member Last Name
- Claim ID
- NPI
- Check #
- Within (time period)
- Claim Status

All claims, meeting the criteria entered, will be displayed. To sort results, click the preferred column header at the top of the table.

🚭 👽 Louisiana							View My Group
Ja Admin Center	Search Criteria	Claim ID	Status	Member Name	Provider Name	Check Number	Service Date
If Authorizations	Member ID		Open			No Record	8/15/2020
E Checks	Member First Name		Open			No Record	7/5/2020
E Claims			Open			No Record	7/5/2020
Resources	Member Last Name		Open			No Record	7/1/2020
 Member Lookup 	Claim ID		Open			No Record	5/26/2020
Online Auth Portal	NPI		Open			No Record	5/26/2020
Revider Directory	Chucker		Open			No Record	5/26/2020
	Within (default 1 year)		Open			No Record	5/26/2020
	1 Year 👻		Open			No Record	5/26/2020
	Claim Status 👻		Open			No Record	5/26/2020
			Open			No Record	5/26/2020
			Open			No Record	5/26/2020
			Open			No Record	5/26/2020
	Search		Open			No Record	5/26/2020
	Reset Search		Open			No Record	5/26/2020
							tems per page: 20 💌 1 -

Click on a specific claim within the results table to view additional details.

The **Claim Details** screen will display additional information including the claim, provider, financial and diagnosis details, as shown below.

Claim Details	is claim	
Patient		
Card #		
Check Number		
Claim ID	LUM104951300	
Status	Pending	
Paid Date	1/1/1900	
Paid Date View Check Provider Details	1/1/1900	
Paid Date View Check Provider Details Details about the provider envolved with the Provider	1/1/1900 is claim	
Paid Date View Check Provider Details Details about the provider involved with the Provider Plan Sponsor	1/1/1900 is claim	
Paid Date View Check Provider Details Details about the provider involved with the Provider Plan Sponsor Description	1/1/1900 is claim	

	Paid to E	Silled		Copa	y and Coinsuran	e to Paid					
_	Paid: \$10.12	Billed: \$29		Copay an	d Coinsurance: \$0	Paid	\$10.12				
ilter											
iller											
iller Service Date	Code	Code Description	Quantity	Billed	Not Allowed	Allowed	Сорау	Deductible	Coinsurance	Paid	Reason Code(s)
iller Service Date	Code	Code Description DXA BONE DENSITY	Quantity	Biled	Not Allowed	Allowed	Сорау	Deductible	Coinsurance	Paid	Reason Code(s)
Service Date	Code 77080	Code Description DXA BONE DENSITY STUDY 1+ SITS AXIAL SKEL	Quantity	Billed \$29.00	Not Allowed \$18.86	Allowed \$10.12	Сорау \$0.00	Deductible \$0.00	Coinsurance	Paid \$10.12	Reason Code(s)

	ltems per page: 15 💌 1−1 of 1 < <	>>
M85.89	Other specified disorders of bone density and structure, multiple sites	
Diagnosis Code	Description	
Filter		
Diagnosis Details		

Resources

The Resources section is designed to give users access to the most current Blue Advantage resources, such as manuals, guides, forms, webinar and workshop presentations, newsletters and more.

🔹 🗑 Louisiana	📰 View My Group	•
🛃 Admin Center	Provider Resources	
Authorizations		
Decks	Expand All Collapse All	
E Claims	Manuals and Authorizations	
Resources	Reference Materials ~	
✓ Member Lookup		
Online Auth Portal	Forms	
🙇 Provider Directory	Webinars and Workshops v	
	Newsletters ~	
	Compliance	
	Helpful Links ~	

To view available resources within each category, click on the folder title. To access a specific resource within each folder, click on the appropriate link.

2021 Blue Advantage Provider Manual 2020 Blue Advantage Provider Manual Blue Advantage Quick Reference Guide	^
Reference Materials	^
Blue Advantage FAQs	
Blue Advantage Provider Portal User Guide	
2021 Blue Advantage Drug Formulary	
EFT/ERA Enrollment Form	
EET/ERA Enrollment Form Voluntary Refund Explanation Form	
EET/ERA Enrollment Form Voluntary Refund Explanation Form Behavioral Health Authorization Form	
EFT/ERA Enrollment Form Voluntary Refund Explanation Form Behavioral Health Authorization Form Home Health Authorization Form	
EFT/ERA Enrollment Form Voluntary Refund Explanation Form Behavioral Health Authorization Form Home Health Authorization Form Outpatient Authorization Form	
EFT/ERA Enrollment Form Voluntary Refund Explanation Form Behavioral Health Authorization Form Home Health Authorization Form Qutpatient Authorization Form Inpatient Authorization Form	
EFT/ERA Enrollment Form Voluntary Refund Explanation Form Behavioral Health Authorization Form Home Health Authorization Form Outpatient Authorization Form Inpatient Authorization Form	~

Member Lookup

Users can search for a member by selecting the **Member Lookup** feature, entering the **Member ID** and then clicking **Search**.

Users can only view one member's information at a time. Click on the member ID within the results table to view additional details.

🚭 👽 Louisiana						View My Group	2 Allison Moderator
🚨 Admin Center	Search Criteria	Member ID	Name	Status	Primary Coverage	Birth Date	Plan
1 Authorizations				Payable	~		BCBSLA HMO NorthEast 006 MA
E Checks							
E Claims							
Resources							
Member Lookup							
Online Auth Portal	Search						
Provider Directory	Reset Search						

The **Member Information** screen includes additional details such as:

- Member information
- Plan snapshot
- Documents
- Accumulators
- Coinsurance and copays

Member Information

Users can view a member's name, date of birth (DOB) and coverage status, as well as view claims and authorizations associated with a member.

Member Information Member contact and coverage statu	15
Name:	
DOB:	
Coverage Status:	Active
VIEW CLAIMS VIEW AUTHS)

Plan Snapshot

Users can view a summary of the member's enrollment information including, plan, member ID number (Card #), plan year, program, effective date and term date.

Plan Snapshot A quick summary of this enrollment	
Plan:	BCBSLA HMO North Shore 009 Seg 002 MA
Card #:	
Plan Year:	2020
Program:	BCBS LA HMO INDIVIDUAL
Effective Date:	1/1/2020
Term Date:	12/31/2078

Documents and Accumulators

Users can view plan-specific documents and updated accumulator amounts for a member. Accumulator amounts are updated as claims are received and processed.

Documents			
2021 Annual Notice of Changes			
2021 Summary of Benefits			
2021 Evidence of Coverage			

Accumulators

Coinsurance and Copays

Users can view a member's coinsurance or copayment (copays) amounts by description (service type). Day span and amount is displayed for each description type.

Coinsurance and Copays					
Filter					
Description	Day Span	Amount			
Inpatient - Acute	Days 1 - 10	\$175			
Inpatient - Acute	Days 11 - 90	\$0			
Inpatient - Mental Health Care	Days 1 - 8	\$195			
Inpatient - Mental Health Care	Days 9 - 90	\$0			
Inpatient - Rehab	Days 1 - 10	\$175			
Inpatient - Rehab	Days 11 - 90	\$0			
Inpatient - Substance Abuse	Days 1 - 8	\$ 195			
Inpatient - Substance Abuse	Days 9 - 90	\$0			
Skilled Nursing Facility	Days 1 - 20	\$0			
Skilled Nursing Facility	Days 21 - 100	\$165			
	Items per page: 10 💌	1 – 10 of 14	< <	>	>1

Online Auth Portal

Users can access the online authorization portal by selecting the **Online Auth Portal** feature then click **Visit the Online Auth Portal.** This feature will open in a new window.

💩 🕼 Louisiana	View My Group
🕹 Admin Center	
Authorizations	Online Auth Portal Click the button below to access the online auth portal.
Checks	The online auth portal will open in a new tab.
Claims	If you are having trouble connecting, please ensure that you are not blocking any pop-ups from this site. IMPORTANT NOTE: The online auth portal is a separate site and does not allow you to log in using your portal account. Portal users may only access the online auth portal from this site and must do so by
Resources	being locked.
✓ Member Lookup	Visit the Online Auth Portal
B Online Auth Portal	
A Provider Directory	

A prior authorization request can be submitted online for the following outpatient service types:

- **OPMD** a procedure performed in the office setting
- **OPFAC** a procedure performed in an outpatient facility setting
- ASU a procedure performed in an ambulatory surgical setting
- POC authorization for post op care for surgeries with 90-day global periods

Note: Authorizations that are submitted through the Online Auth Portal may not be visible in the Authorization search immediately. Providers should allow time for authorizations to show through the search feature.

The following authorization types cannot be entered through the online auth portal. Please call 1-866-508-7145 or fax these types of requests to the respective fax numbers listed below:

Type of Service	Fax Number
Inpatient	1-877-528-5818
Wound Care	
• Therapy	
Durable Medical Equipment (DME)	1-877-528-5816
Transplants	
Ambulance Transports	
Home Health	(318)-812-6265
	1-877-328-9799
Part D Drugs	or
	1-855-964-0556

Creating a New Outpatient Authorization Request

(inpatient services cannot be submitted through the portal at this time. For behavioral health services, see the Creating a New Outpatient Behavioral Heath Authorization Request section of this guide)

- To request an outpatient authorization, locate the member record by entering the **Member ID** and either the member's **First and Last Name** or the member's **Date of Birth**.
- Click on the desired member record to display the **Member Summary** screen.
- Click on the second tab, labeled **Authorization**.
- Click on the button labeled (Add) + New Authorization. Then Select Outpatient.

Hor	ne										
м	ember Lookup		Clear Fields			Member ID First Name		Last Name Date of Birth		C	
м	essages 🔻		Member ID	Member Name	Date o	Birth	PCP		Benefit Product		Insura
A	uthorizations •	•	A matching member record will display here.								

le															
mber ID:	3!			Langua	ige:										
B: (Gender											
									(31	8) 649-					
ummary	Authorizations	Car	e Enrollme	nts								(+ New Authorizat	tion 🔻	Ī
th ID	Y Request Date	a 4	T POS	▼ Service Type	Ŧ	Expected Admit Date	T	Admit Date	Ŧ	Admit Status	T	Status	Inpatient	w Dat	t
7419	04/16/2020 0	8:36	IP	Medical				04/15/2020				Approved	Outpatient	,	j
1801	03/09/2020 1	4:27	OP	Outpatient Services in M	ID Office					INITIATED		Approved	03/09/2020	0	1
3792	02/05/2020 0	8:47	IP	Medical				02/04/2020				Approved	02/06/202	0	
5831	01/02/2020 0	8:37	IP	Observation				01/01/2020				Approved	01/03/2020	0	
1367	12/09/2019 0	7:56	OP	Durable Medical Equipme	ent							Approved	12/09/201	9	
1132	07/19/2019 0	9:52	OP	Therapy								Approved	07/19/201	9	
0527	07/17/2019 1	0:10	OP	Outpatient Service in Fac	cility							Approved	07/17/201	9	
6760	02/11/2019 1	3:43	OP	Reimbursement								Approved	02/18/201	9	
3252	11/05/2018 1	3:53	OP	Drugs								Approved	11/05/201	8	
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Entry Dat	e Entered	By		Detail											
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Users must complete the **New Outpatient Authorization** form and include all necessary documentation. **Red** fields are required and must be completed to successfully complete the authorization request.

Reques	st Type:		-
Reques	st Date/Time:	06/03/2020 13	:50 🔒 🕒
# of Se	ervices:	1	
			🗊
			+
	▼ # of Se	# of Services:	# of Services:

Required Fields

Service Status:

- Initiated: indicates that the service has already been performed
- Expected: indicates that the request is prior to the service being performed

Request Type:

- Standard: request to be processed within the standard timeframe of 14 days
- Expedited: request to be processed within the 72 hours because applying the standard review timeframe may seriously jeopardize the life or health of the member or the member's ability to regain maximum function

Request Date & Time: this is a required field, but it will automatically populate for you

Service Type: setting in which the service will be performed, see the Service Types section below for additional information

of Services: reflects the number of units that will be billed for each CPT code

Request Start Date: date the service will be performed. This field will default to the present day but should be changed to the actual date that the service will be performed.

Procedure: enter the appropriate CPT codes in this field. If you have multiple CPT codes for one request, use the 🛨 button to enter up to nine additional codes.

Entered By: this will automatically populate the name of the person entering the authorization.

Phone #: number to contact users if Blue Advantage Medical Management team has additional questions

Requesting Provider: name of provider ordering the service

Servicing Provider: name of provider/facility where the service will be performed

ICD-10 Diagnosis Code: enter the ICD-10 diagnosis associated with the request

		ter ett torr rtoroning rronder
Servicing Provider:	▼ Role:	REFERTO - Refer To Provider
Diagnosis		
ICD-10 Diagnosis Code:		v :
Comments		
Please enter specific information as to the	service you are requesting:	
)	
Attachments		
Attachments		
Attachments Select files drop files here to upload	1	

Additional Fields

• **Comments**: is not a mandatory field. Users can provide additional information about the authorization request in this field.

Example: MRI of right knee, EMG of bilateral upper extremities

• **Attachments**: any additional documentation about the authorization request. This field is not mandatory but should be included if available.

For example, clinical files such as: office visit notes, labs, x-rays, or MRIs. Users may select files from their file system or drag and drop files from their computer. There is no limit on the number of attachments that can add to a request. Attachments can also be viewed by the Blue Advantage Medical Management team.

Once the authorization request has been submitted, based on the criteria included for the services, the request may be automatically approved. If the request is not approved, it will be suspended to the Blue Advantage Medical Management team for review. Users may return to the **Authorization** browse screen to check on the status of the request.

Outpatient Service Types

- **OPMD** a procedure performed in the office setting (see the **Creating a New Outpatient Behavioral Health Authorization Request** section of this guide)
- OPFAC a procedure performed in an outpatient facility setting, including Behavioral Health services (see the Creating a New Outpatient Behavioral Health Authorization Request section of this guide)
- **ASU** a procedure performed in an ambulatory surgical setting
- **POC** authorization for post op care for surgeries with 90-day global periods

Date of Service Ranges

- OPMD/OPFAC These auth types will have a 30-day date range. If the dates of service need to be extended, please send a message or add this information to the Comments section on the authorization.
- **ASU** This authorization type will have a 30-day date range. **Dates cannot be extended.** However, if the date of service for the procedure needs to be changed, please send a message to the Blue Advantage Medical Management team.
- POC This authorization type will have a 90-day date range

Examples

- Diagnostic Imaging
 - If performed in office
 - Service Type = OPMD (Services performed in MD office)
 - Requesting Provider = name of ordering provider
 - Servicing Provider = name of provider rendering services
 - If performed in facility
 - Service Type = OPFAC (Services performed in Outpatient Facility)
 - Requesting Provider = name of ordering provider
 - Servicing Provider = name of facility

• Outpatient Surgeries

- If performed in **facility**
 - Service Type = ASU (Services performed in Outpatient/Surgical Unit)
 - Requested Start Date = date of surgery
 - Requesting Provider = name of provider rendering services
 - Servicing Provider = name of facility
- **POC**
 - Post-op care in the office for surgeries that have a 90-day global period

- Service Type = POC
- # of Services = will default to 1, but this is not required for this type of authorization
- Requested Start Date = date of the member's surgery. This authorization will be good for 90 days.
- Requesting Provider = name of MD/surgeon
- Servicing Provider = name of MD/surgeon

Additional Tips

• For any injections (Part B) being administered in the office/facility, but the member is obtaining the medication from the pharmacy, send a message on the online authorization portal to inform the Medical Management team.

Creating a New Outpatient Behavioral Health Authorization Request

In addition to steps outline in the previous section **Creating a New Outpatient Authorization Request**, user must complete the following additional steps to submit a Behavioral Health authorization request.

- **Comments** this is not a mandatory field but can be used to submit the following information:
 - A working fax number
 - List of service types being requested (e.g., MRI of right knee, EMG of bilateral upper extremities)
- **Attachments** please include additional documentation about the authorization request. This field is not mandatory but should be completed when details are available.

For example, intensive outpatient program (IOP) or partial hospitalization program (PHP) clinical files such as: psychosocial evaluation, psychiatric evaluation, MD progress notes, treatment plan and group notes should be included. Referrals, initial evaluation and number of units needed for testing for psychological testing can also be reported here.

Users may select and upload files or drag and drop them from their computer. There is no limit on the number of attachments that can add to a request. Attachments can be viewed by the Blue Advantage Medical Management team.

Servicing Provider:	▼	Role:	REFERTO - Refer To Provider 🔻	
				1
			-	J
Diagnosis				
ICD-10 Diagnosis Code:			▼ ×	
			+	1
Comments				
Please enter specific information as to the	e service you are requesting:			
<u> </u>			^	
			\checkmark	
Attachments				
Select files gron files here to unlo	ad			
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Once the authorization request has been submitted, it will be suspended to the Blue Advantage Medical Management team for review. If medical necessity criteria are met, the request will be approved. Users will be contacted via phone or fax with the decision. If additional information is needed, you will receive specific instructions. Users may return to the **Authorization** browse screen to check on the status of the request.

New Outpatient Authorization					•	¢
Servicing Provider:		Role:	REFERTO - Refer To Provider	v (1		^
				+		
Diagnosis						
ICD-10 Diagnosis Code:			•	×		
				+		
Comments						
Please enter specific information as to the service you are requ	esting:			•		
				<>		
Attachments						
Select files drop files here to upload						~
			(Submit	Cancel	

Behavioral Health Outpatient Service Types

- **OPFAC** services performed in an outpatient facility setting
 - Intensive Outpatient Program (IOP)
 - Partial Hospitalization Program (PHP)
- **OPMD** services performed in the office setting
 - Psychological Testing

Date of Service Ranges

- OPFAC Services are reviewed every 1-2 weeks. Concurrent review during the episode of care is required.
- **OPMD** Typically, one month. If longer is needed, users may request the appropriate time frame using the **Comments** section.

Messages

• Users can communicate back and forth with the Blue Advantage Medical Management team about a specific member or member service in the **Messages** feature.

Example: If a user submits an authorization request and Blue Advantage requires additional information, a message will be sent to the user from Blue Advantage. Users can send messages to Blue Advantage with questions about an authorization or changes to an authorization such as the place of service or the date the service will be performed.

Messages should be checked on a routine basis



- Creating a New Message
 - Users can create a new message by completing the following steps:
 - Click the Authorizations tab to search for a specific authorization (users can enter any of the criteria listed at the top of the screen such as Member ID, Member Name, Auth ID, etc., to locate an authorization)
 - Click on the desired authorization in the results list and then click **Messages**
 - Click New
 - Enter message and add all needed attachments, then click **Send**

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	Tools 🔻 Mindy Bryan 🔻 Help 🔻
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	Service Type:			OPFAC - Outpatient Service in Fa	cility	Authorized Servic	e Type 1:	OPFAC - Outpatient Service in Facility		
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							 ,			

New Message		- ×
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Select files		
Message		
	li li	
Send	Clo	ose

Provider Directory

Users can look up other providers within in member's network by selecting the **Provider Directory** feature and then clicking **Visit the Provider Search**.

💩 🗑 Louisiana	View My Group	Aaron Moderator
 Admin Center Authorizations Checks Claims Resources Member Lookup Online Auth Portal Provider Directory 	Provider and Pharmacy Directory Click the button below to access the provider and pharmacy directory . The directory will open in a new tab. If you are having trouble connecting, please ensure that you are not blocking any pop-ups from this site. Visit the Provider Search	

The online provider search will open in a new window.

All search fields are optional	
First Name or Facility Name	Last Name
First	Last
Specialty	Category
- Any Specialty	* Any Category –
City	Parish/County
City	Parish/County
State	ZIP Code
- Any State -	* Zip Code
Plan Type	Gender
Any Plan	* Any Gender *
Language	Hospital Affiliation
Any Language	* Any Hospital *
Medical Group	
Medical Group	

Troubleshooting

The new Blue Advantage Provider Portal site uses cookies to remember your login information. You **must** enable cookies for our portal site in order to log in and access all its features.

If you are accessing the Blue Advantage Provider Portal via **Google Chrome**, your browser settings **must** allow the use of cookies on our portal site. To update your settings, follow the instructions below:

- On your computer, open **Google Chrome**.
- Click the ⁱ icon at the top right of the screen and then click **Settings**.



• Click Privacy and security and then click Cookies and other site data.

🜣 Settings 🗙 🔸	
\leftarrow \rightarrow \mathcal{C} \textcircled{o} Chrome chrome://settings	
Settings	Q Bearch settings
You and Google	Safety check
Safety check	Chrome can help keep you safe from data breaches, bad extensions, and more Check now
Privacy and security Appearance	 Privacy and security
Q Search engine	Clear browsing data Clear history, cookies, cache, and more
() On startup	Cookies and other site data Third-party cookies are blocked
Advanced 👻	Security Safe Browsing (protection from dangerous sites) and other security settings
Extensions 🖸	Site Settings Controls what information sites can use and show (location, camera, pop-ups, and more)

• Underneath "General settings" click **Block third-party cookies**.



• Scroll down the page until you see "Sites that can always use cookies" and click Add.



• Copy and paste this web address into the **Site** field: [*.]bcbslaproviderportal.com. (Please do not include any leading or trailing blanks.) Then, check the "**All cookies, on this site only**" checkbox and then click **Add**.

Add a site	
Site	
[*.]bcbslaproviderportal.com	
All cookies, on this site only	•
Cancel Add	

• Your site settings should look similar to the image below. (If it does not look the same, delete the item you just added and go back to **Step 6**.)

Sites tha	at can always use cookies	Add
3	[*.]bcbslaproviderportal.com All cookies, on this site only	Î

• Your setting updates are now complete. Please close <u>all</u> Google Chrome browser windows. You can now log into the provider portal site.

Did Not Receive a Password Reset Email?

If you did not receive a password reset email from <u>auth0mail@vhpla.onmicrosoft.com</u>, please check your spam/junk folder. If you are still unable to locate the email, return to the provider portal and reset your password by clicking **Login** then **Forgot Password?**

If you do not receive a new email, you may need to contact your organization's IT department:

• To whitelist the Auth0 email address in the organization's email security platform

OR

• Run a message trace to investigate what is blocking the email

Multiple Users Logging into the Same Computer

When multiple users share the same computer, they must complete the following steps to successfully login to the Blue Advantage Provider Portal.

- Clear the browser cache. Once the first user has logged out of the portal, the browser cache must be cleared before the next user can complete the login process. Complete the following steps to clear the browser cache.
 - Open Chrome and click the : in the top right corner
 - Select "More tools" then click "Clear browsing data..."
 - Choose the time range from the top menu and select "Cookies and other site data"
 - Then click "Clear data"

OR

 Each user has a unique Windows account on the same computer. The current user who is logged in under their account must logout of the portal and then their Windows account before the next user can log in using their own Windows account and thereafter access the portal under their own portal user ID and password.

For Additional Assistance Not Outlined in this Guide

If you have questions regarding the portal registration process, please email our Provider Relations team at provider.relations@bcbsla.com.

Frequently Asked Questions

Q: How do I get access to the provider portal?

A: Check with your Group Moderator to receive an invitation to join the portal or see the **Registration – Join an Existing Group** section of this guide for step to initiate registration. If your organization has not registered for the portal and you do not have a Group Moderator, please see the **Registration – Register a New Group** section of this guide.

Q: I submitted my request for portal access. What is next?

A: You should have received an email from DocuSign (dse_NA3@docusign.net) containing your Portal User Agreement. You will need to review and sign this document before your request can be approved.

Q: What if I do not receive the DocuSign document?

A: Check your inbox and spam folders for an email from BCBSLA via DocuSign (<u>dse_NA3@docusign.net</u>) with the subject line Blue Advantage Portal [User or Group Moderator] Agreement. If you are still unable to locate the agreement, you can re-submit your request to have a new one sent to you.

Q: My group was approved, and I can log in to the provider portal. How do I get access for my employees?

A:

<u>Option 1</u>: You can send them an invitation email, via the Group Profile page, that includes a link to the request form as well as the group code they'll need to finish registration. On the Group Profile page, click **Send Portal Invite**. Enter the user's email address and click **Send Email**.

<u>Option 2</u>: The user can submit a request to join your group from the portal. You will need to provide the user with the group code which can be found on the Group Profile page.

Once the user completes the sign-up process, the Group Moderator can visit the Admin Center and approve their request to join your group.

Q: How do I get access to a different group once I've signed up?

A: You can submit a request to join a different group by visiting your profile page and selecting **Request Group Change**. You will need the group code associated with the group you are joining in order complete this request.

Q: How can I become a Group Moderator for my provider portal group?

A: You can submit a request for Group Moderator access by visiting your profile page and selecting **Request Moderator Access**.

Q: How do I reset my password?

A: From the home page of the provider portal, select **Log In**, then select **Forgot password?**. Enter the email address used to sign into your account and select **Continue**. You should receive an email with instructions to reset your password.

Blue Cross and Blue Shield of Louisiana/HMO Louisiana, Inc.

130 DeSiard St, Ste 322 Monroe, LA 71201

> 1-866-508-7145 TTY users call 711

8 a.m. to 8 p.m., seven days a week

Visit our website at: www.BCBSLA.com/ilinkblue, then click "Blue Advantage" under "Other Sites"