



Louisiana

Blue Advantage (HMO) | Blue Advantage (PPO)

A Medicare Advantage Plan



Blue Advantage Provider Portal User Guide

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Blue Cross and Blue Shield of Louisiana HMO offers Blue Advantage (HMO). Blue Cross and Blue Shield of Louisiana, incorporated as Louisiana Health Service & Indemnity Co., offers Blue Advantage (PPO). Both are independent licensees of the Blue Cross and Blue Shield Association.

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 (www.BCBSLA.com/ilinkblue), then click “Blue Advantage” under the “Other Sites” section.

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 “Forms & Resources” section.

For technical questions relating to registration or login access, please call 1-866-397-2812.

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 fictitious. Information in this document is subject to change without notice.

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How to Access the Portal

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

Louisiana iLinkBlue

Home Coverage Claims Payments Authorizations Quality & Treatment Resources

Welcome to iLinkBlue

Tips to Know

Need Coverage Information But Don't Have the Member ID?
You can search for coverage information by a BCBSLA subscriber's social security number if you do not have their BCBSLA member id. The coverage information tool is located under the Coverage menu.

Medical Record Requests
You have **0** new Medical Record Requests that require action.
Please visit [Out of Area Medical Record Requests](#) to view requests.

Research Claims BCBSLA Coverage OOA Coverage Need an Auth? Payment Registers EFT Notices

Important Blue Cross Messages

Informational
Effective immediately, the Estimated Treatment Cost Tool reports are now available for providers to view cost data for Spring 2019. There are a total of 1,662 elective/planned procedures. Please check your costs and submit any reconsiderations before the May 8 deadline. Once on iLinkBlue, choose "Quality & Treatment" on the menu bar.

Other Sites

- Davis Vision Network
- Dental Advantage Plus Network - United Concordia Dental
- Blue Advantage**

The Blue Advantage Provider Portal allows network providers access to information that assists in improving patient care and office efficiency. Providers in our Blue Advantage network must access and manage eligibility, benefits, claims and more electronically, on the Blue Advantage Provider Portal.

The screenshot shows the Louisiana Blue Advantage Provider Portal. At the top left is the Louisiana state logo and the word "Louisiana". On the top right are icons for Messages (with a notification badge), Profile, and Logout. Below this is a dark blue navigation bar with white text for: HOME, ELIGIBILITY, CLAIMS, AUTHORIZATION INQUIRY, FIND A PROVIDER, and FORMS & RESOURCES. The main content area is white. On the left, there is a "Welcome" section with a blurred name, followed by a paragraph of introductory text. Below that is a "What's New" section with a sub-heading "NEW! CMS Part B Drug Prior Authorization Timeframes in 2020" and several lines of text detailing the changes. On the right side, there is a vertical list of four items: "ADSP" with a line graph icon, "Find a Provider" with a person icon, "Frequently asked questions" with an information icon, and "Ask a question" with an envelope icon. Below this list is a "Contact us:" section with a sub-heading "Registration, Login, Application Access, General Questions and Technical Support:" and contact information including a phone number and an email address. At the bottom of the contact section, it lists "Customer Support Hours: 7:00 am - 6:00 pm Monday - Friday CST".

By accessing the Blue Advantage Provider Portal, providers will have access to:

- Member Eligibility
- Claims
- Authorizations
- Administrative manual, guides and additional provider resources

Portal Registration

To gain portal access, providers must create an account by completing the steps below.

Create an Account

1. Log on to iLinkBlue (www.BCBSLA.com/ilinkblue).
2. Click "Blue Advantage" under the "Other Sites" section.
3. Click the "Create an account" and complete the following sections:
 - License Agreement
 - Verify Information
 - Create Username

Note: One Tax ID number (TIN) and NPI for an affiliated credentialed network provider is required to complete registration.

The screenshot shows the Louisiana Blue Advantage Provider Portal registration page. At the top left, there are two logos: a blue cross with a white circle inside, and a blue shield with a white caduceus. To the right of the logos is the word "Louisiana" in a large, black, sans-serif font. Below the logos and the word "Louisiana" is a horizontal line. Underneath the line, there is a red warning message: "Welcome to the enhanced Blue Advantage Provider Portal. If you are already a registered user and having difficulties logging into the portal, do not re-register, call Customer Support at 1-866-397-2812 who is ready to assist." Below the warning message is the text "Hello Blue Advantage Providers!" followed by a paragraph: "As a provider and medical professional, the Blue Advantage (HMO) and Blue Advantage (PPO) provider portal offers easy access to information related to member eligibility, claims status, authorizations and more." Below this paragraph is the heading "Join Our Blue Advantage Provider Network" followed by a horizontal line. Underneath the line is the text: "For questions and inquiries regarding how to join the Blue Advantage provider network, contact us via email." followed by the email address network.development@bcbsla.com. On the right side of the page, there is a section titled "Sign in to your account" with a horizontal line below it. Below the line are two input fields: "Username" and "Password". Below the "Password" field are two buttons: "Sign in" and "Create an account". The "Create an account" button is highlighted with a red border. Below the buttons is a link: "Forgot your username or password?"

License Agreement

4. Read and accept the terms of the License Agreement by checking the "Accept" box at the bottom of the agreement. Then click "Next."



Louisiana

License Agreement

License Grant. This is a legal Agreement between you and the producers of this website. The terms of this Agreement govern your use of and access to this website. By using this website, you are agreeing to be bound by this Agreement. In consideration of your agreement to these terms and for other valuable consideration, you are granted a nonexclusive, non-transferable, limited, terminable license to access and use the website under the laws of the United States. The producer of this website, Healthx Inc., reserves all rights not expressly granted in this Agreement.

Restrictions. This website is protected by United States copyright law, international treaty provisions, and trade secret, trade dress and other intellectual property laws. Unauthorized copying of or access to this website is expressly forbidden. You may not copy, disclose, loan, rent, sell, lease, give away, give your password to or otherwise allow access to this website by any other person. You agree to only use this website to process your own data. You agree not to misuse, abuse, or overuse beyond reasonable amounts, this website. You agree not to attempt to view, disclose, copy, reverse engineer, disassemble, decompile or otherwise examine the source program code behind this website. You may be held legally responsible for any copyright infringement or other unlawful act that is caused or incurred by your failure to abide by the terms of this Agreement.

Term and Termination. This license is effective until terminated by either you or the producers of this website. This license will automatically terminate without notice if you fail to comply with any provisions of this Agreement. The provisions of this Agreement which by their nature extend beyond the termination of this Agreement shall survive termination of this Agreement, including but not limited to the sections relating to Restrictions, Content of the Website, Links to Third Party Websites, Disclaimer of Warranties, Limitation of Liability, and Governing Law.

Content of the Website. The insurance products, data, and other information referenced in the website are provided by parties other than the producer of the website. We make no representations regarding the products, data, or any information about the products. We are not liable for errors in data or transmission or for lost data. Any questions, complaints, or claims regarding the products or data must be directed to the appropriate provider or vendor.

Accept

Next Cancel

Verify Information

5. Enter your personal information into the first 11 fields. Those denoted with an asterisk (*) are required. Then use the instructions at the bottom of the page to input the required provider information.

Verify Information:

Welcome to the Blue Advantage Provider Portal. This portal provides access to information related to member eligibility, claim status, authorizations and more.

Please Note: One TIN and NPI for an affiliated credentialed network provider is required to complete registration.

First Name*

Middle Name

Last Name*

Business Address Line 1*

Business Address Line 2

City*

State*

Zip*

Business Phone*

Business Fax

E-mail*

Provider Role*

TIN (Taxpayer Identification Number)*

NPI*

To complete self-registration, fill in all fields. Please note, fields with an asterisk are required.

- First Name
- Last Name
- Business Address Line 1
- City / State / Zip
- Business Phone
- Email
- Provider Role - select the appropriate role from the drop down menu.

Follow the steps below to enter provider information in each corresponding field.

- Enter the credentialed Provider TIN and NPI (*please do not enter a group NPI*).
- Once entered, select **Provider Search**.
- Provider information will be verified and displayed.
- Select **Add Provider**.
- Confirmation window will display, select **Add Providers**.
- The **Added Providers** section will now display to **confirm information** added.
- To add additional Providers, repeat steps above for each TIN and NPI.

Please Note: You may add up to 10 providers during registration. Additional providers can be added after registration has been approved.

- After provider information has been added, click **Next**.

Previous Provider Search Cancel

- Choose the provider role from the drop down menu, enter the credentialed provider's TIN and NPI and click "Provider Search."

The screenshot shows a web form for provider search. On the left, a dropdown menu titled "Provider Role*" is open, showing options: PCP, PCP Office Staff, Specialist, Specialist Office Staff, Billing Specialist, and HealthPlan Employee. The main form contains a "Provider Role*" dropdown menu with "PCP" selected, a "TIN (Taxpayer Identification Number)*" input field, and an "NPI*" input field. At the bottom, there are three buttons: "Previous", "Provider Search" (highlighted with a red box), and "Cancel".

- Once the provider information has been verified and displayed, click "Add Provider."

The screenshot shows a "Select Providers" window. It features a table with two columns: "Practice Name OR Facility Name" and "Address". The first row has a redacted name and "Address Not Available". Below the table are two buttons: "Add Provider" (highlighted with a red box) and "Cancel Search".

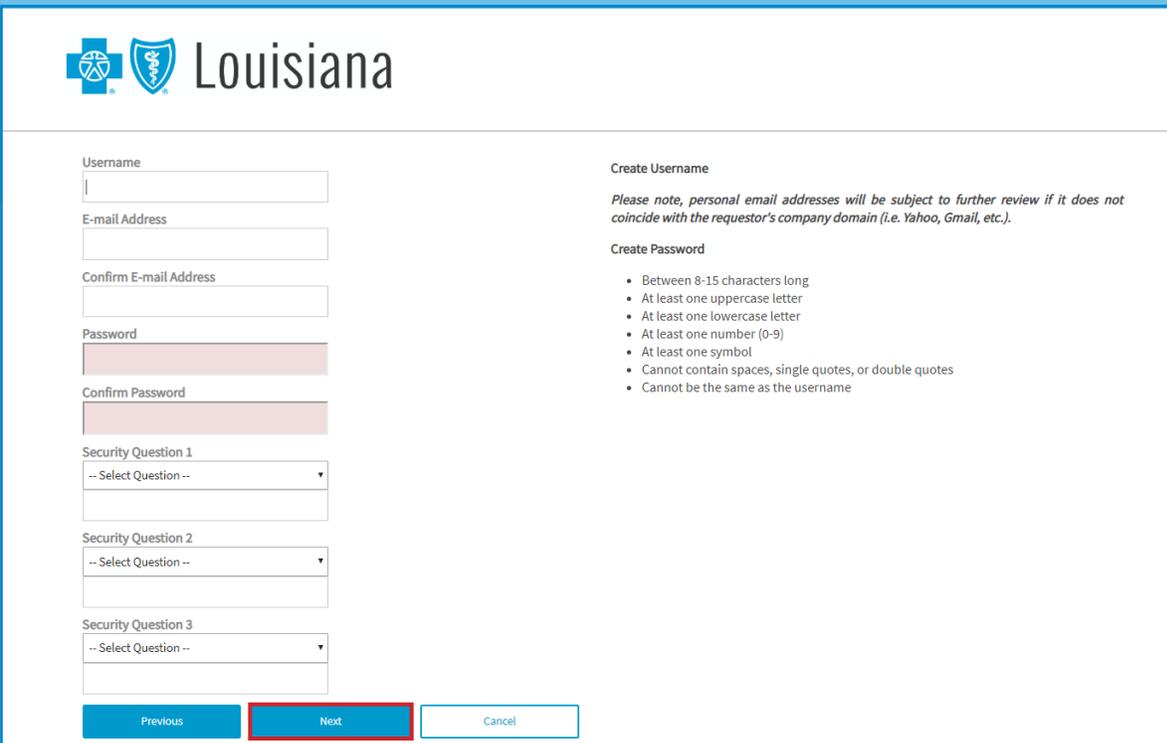
- A confirmation window will appear, review the provider information and click "Add Providers."

The screenshot shows a "Please Confirm" window. It features a table with two columns: "Practice Name OR Facility Name" and "Address". The first row has a redacted name and "Address Not Available". Below the table are two buttons: "Add Providers" (highlighted with a red box) and "Cancel".

Note: To add more providers, repeat steps six through eight. You may add up to 10 additional providers to your registration. After all provider information is added, click "Next."

Create Username

9. Create a username and password for your account. Select three security questions and provide a response, then click "Next."



The screenshot shows the Louisiana account creation interface. At the top left is the Louisiana state logo and the word "Louisiana". The form is divided into two main sections: input fields on the left and instructions on the right.

Input Fields (Left):

- Username:** A text input field.
- E-mail Address:** A text input field.
- Confirm E-mail Address:** A text input field.
- Password:** A text input field with a red background.
- Confirm Password:** A text input field with a red background.
- Security Question 1:** A dropdown menu with "-- Select Question --" and a text input field below it.
- Security Question 2:** A dropdown menu with "-- Select Question --" and a text input field below it.
- Security Question 3:** A dropdown menu with "-- Select Question --" and a text input field below it.

Instructions (Right):

Create Username
Please note, personal email addresses will be subject to further review if it does not coincide with the requestor's company domain (i.e. Yahoo, Gmail, etc.).

Create Password

- Between 8-15 characters long
- At least one uppercase letter
- At least one lowercase letter
- At least one number (0-9)
- At least one symbol
- Cannot contain spaces, single quotes, or double quotes
- Cannot be the same as the username

Navigation Buttons (Bottom):

- Previous:** A blue button.
- Next:** A blue button with a red border, highlighted.
- Cancel:** A white button with a blue border.

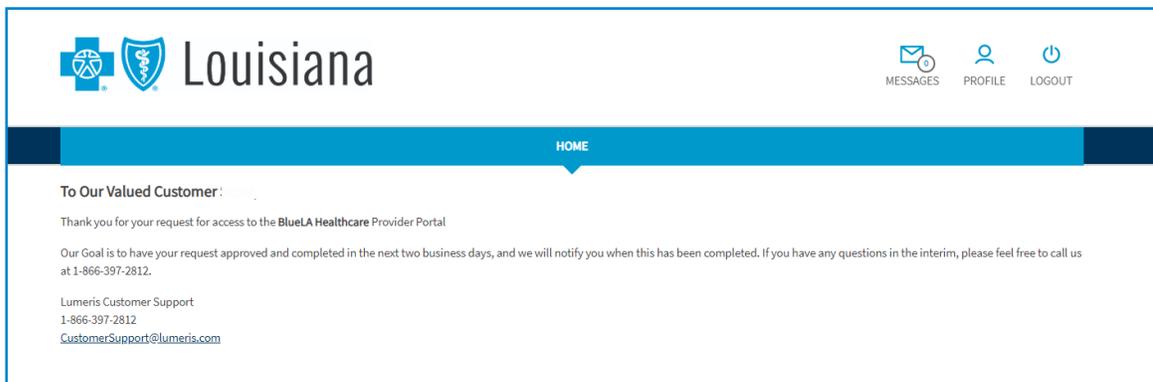
Note: Personal email addresses will be subject to further review if it does not coincide with the requestor's company domain (i.e., Yahoo, Gmail, etc.)

10. Once your information has been entered a review screen will appear. Review your information and click "Finish" to complete your registration.



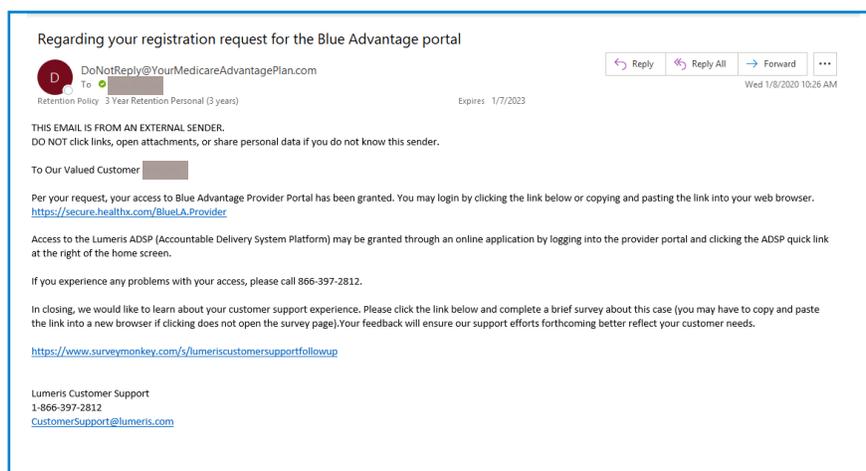
The screenshot shows a registration review screen for Louisiana. At the top left is the Louisiana state logo and the word "Louisiana". Below this are several input fields for registration information: Username, First Name, Last Name, E-Mail Address, Address, Phone, TIN, and NPI(s). At the bottom of the form are three buttons: "Previous", "Finish" (highlighted with a red border), and "Cancel".

11. The following message will appear once your registration has been completed.



The screenshot shows the home screen of the Louisiana Blue Advantage portal. At the top left is the Louisiana state logo and the word "Louisiana". At the top right are three icons: "MESSAGES", "PROFILE", and "LOGOUT". Below the header is a blue bar with the word "HOME" in white. The main content area has a heading "To Our Valued Customer:" followed by a message: "Thank you for your request for access to the BlueLA Healthcare Provider Portal. Our Goal is to have your request approved and completed in the next two business days, and we will notify you when this has been completed. If you have any questions in the interim, please feel free to call us at 1-866-397-2812." Below the message is contact information for Lumeris Customer Support: "Lumeris Customer Support, 1-866-397-2812, CustomerSupport@lumeris.com".

12. You will be notified via email when your portal access has been granted.



The screenshot shows an email notification regarding a registration request for the Blue Advantage portal. The subject is "Regarding your registration request for the Blue Advantage portal". The sender is "DoNotReply@YourMedicareAdvantagePlan.com". The email contains the following text: "THIS EMAIL IS FROM AN EXTERNAL SENDER. DO NOT click links, open attachments, or share personal data if you do not know this sender." Below this is a heading "To Our Valued Customer:" followed by a message: "Per your request, your access to Blue Advantage Provider Portal has been granted. You may login by clicking the link below or copying and pasting the link into your web browser. <https://secure.healthx.com/BlueLA.Provider> Access to the Lumeris ADSP (Accountable Delivery System Platform) may be granted through an online application by logging into the provider portal and clicking the ADSP quick link at the right of the home screen. If you experience any problems with your access, please call 866-397-2812. In closing, we would like to learn about your customer support experience. Please click the link below and complete a brief survey about this case (you may have to copy and paste the link into a new browser if clicking does not open the survey page). Your feedback will ensure our support efforts forthcoming better reflect your customer needs. <https://www.surveymonkey.com/s/lumeriscustomersupportfollowup>" Below the message is contact information for Lumeris Customer Support: "Lumeris Customer Support, 1-866-397-2812, CustomerSupport@lumeris.com".

Member Eligibility

To look up a member's eligibility on the Blue Advantage Provider Portal, complete the following steps:

1. Log into the Blue Advantage Provider Portal.
2. Click "Eligibility" to start your search.

The screenshot shows a web browser window with the URL <https://provider.blueadvantage.bcbsla.com/v3app/a/76736140E070B131D191B072A00340C1C130C11166E3A00360911063909124F180A1>. The page header features the Blue Cross and Blue Shield of Louisiana logo and the word "Louisiana". On the right, there are icons for Messages, Profile, and Logout. A navigation bar includes links for Home, Eligibility (which is highlighted), Claims, Authorization Inquiry, Find a Provider, and Forms & Resources. The main content area is titled "To search for a member:" and lists the following instructions:

- Enter the Last Name **AND** Date of Birth (MM/DD/YYYY) **OR**
- Enter the Member ID
- To search for eligibility on multiple members, enter the Member ID and press enter after each, then select Search.

The search form contains the following fields:

| | | |
|----------------------|----------------------|-----------------------------|
| First Name: | Member ID(s): | Date of Birth (MM/DD/YYYY): |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Last Name: | | Group: |
| <input type="text"/> | | <input type="text"/> |

A blue "Search" button is located below the form fields.

The footer contains the following information:

Contracting Information
Blue Cross and Blue Shield of LA/HMO Louisiana, Inc.
P.O. Box 7003 Troy, MI 48007

Questions relating to Registration, Login, Application Access, General Questions, and Technical Support:
866.397.2812 | customersupport@lumeris.com
Customer Support Hours: 7:00 am - 6:00 pm CST Monday - Friday

Mailing Address for Customer Service, Medical Claims, Appeals & Grievances:
P.O. Box 7003 Troy, MI 48007

For Inquiries:
Toll Free: 866-508-7145 | customerservice@blueadvantage.bcbsla.com

- When the Eligibility search screen appears, enter the required information needed to locate the member's record and click "Search."

To search for a member:

- Enter the Last Name **AND** Date of Birth (MM/DD/YYYY) **OR**
- Enter the Member ID
- To search for eligibility on multiple members, enter the Member ID and press enter after each, then select Search.

First Name:

Last Name:

Member ID(s):

Date of Birth (MM/DD/YYYY):

Group:

Note: To search for the eligibility of multiple members, press enter after inputting each ID. When all IDs have been entered, click "Search."

- All eligibility records for the member(s) will be displayed (active and terminated).

| Name | Date of Birth | Gender | MemberID | Group | Benefit Plan | Status | Address | Home Phone | Location |
|------|---------------|--------|----------|----------|--------------------|------------|---------|------------|----------|
| | | F | | BLA00001 | Blue Advantage 001 | Active | | | 3 |
| | | F | | BLA00001 | | Terminated | | | 3 |

Page 1 of 1

2 records found. [Download Results](#)

5. Click on the member's name in the **active** record to display the "Benefit Documents."

The following information is available on this page:

- Summary of Benefits*
- Download ID Card*
- Subscriber, Coverages and PCP Information

*Click the link provided to download a PDF version of the member's summary of benefits and ID card.

Benefit Documents

2020 Summary of Benefits

[Blue Advantage Baton Rouge \(001\)](#) 

The benefit information displayed is for the 2020 plan year. To view 2019 summary of benefit documents, go to Forms & Resources then select [2019 Guides & Resources](#).

Click on 'document name' link to view the current plan year Summary of Benefits in PDF format.

[Download ID Card](#) 

Click on 'Download ID Card'. The ID Card will download in the task bar of a new window. If you click on the document, it will open in a PDF format.

[Show/Hide Search](#)

First Name: Member ID(s): Date of Birth (MM/DD/YYYY):

Last Name: Group:

[Search](#)

Subscriber 

| | | | |
|-----------------------|----------------------|----------------------|---|
| Member: | <input type="text"/> | Group Name: | Blue Cross Blue Shield of LA Individual |
| Member ID: | <input type="text"/> | Group Number: | BLA00001 |
| Date of Birth: | <input type="text"/> | Status: | Active |

Coverages 

| M - Medical Product | | | | | |
|---------------------------------------|--------------------|-------------------------|------------|---------------|--------|
| Current Benefit Effective Date | 01/01/2018 | Termination Date | 12/31/2019 | Tier | E |
| Plan | Blue Advantage 001 | Class | | Volume | \$0.00 |

PCP Information 

| | | | |
|-----------------|----------------------|---------------------------|----------------------|
| PCP Name | <input type="text"/> | PCP Phone Number | <input type="text"/> |
| PCP NPI | <input type="text"/> | PCP Effective Date | <input type="text"/> |

Accumulators

[Back to Search Results](#) | [Print View](#)

Claims

To conduct a claims inquiry on the Blue Advantage Provider Portal, complete the following steps:

1. Log into the Blue Advantage Provider Portal.
2. Click "Claims" to start your search.
3. Enter the required information needed to locate the desired claim and click "Search."

BlueLA.Provider

https://provider.blueadvantage.bcbsta.com/v3app/a/76736140E0708131D1918072A00340C1C130C11166E3A00360911063909124F180A1

Louisiana

MESSAGES PROFILE LOGOUT

HOME ELIGIBILITY **CLAIMS** AUTHORIZATION INQUIRY FIND A PROVIDER FORMS & RESOURCES

To search for a member claim:

- Enter a Claim ID *OR*
- Enter the Member ID
- To search for multiple Claim IDs, enter the Claim ID and press enter after each, then select search.

Search tips:

- To narrow the search, enter the Member ID *and* Begin/End date for the claims period.
- You cannot search for claims exceeding 24 months old.
- If the **End Date** field is *not* populated, the default is today's date.

Claim ID:

Member ID:

Begin Date:

Date of Birth:

End Date:

To print results right click on the page and select print from the list of options.

Note: Take advantage of the "Search Tips" sections at the top of the page when using this feature.

4. All claims meeting the criteria entered will appear on the screen.

Search tips:

- To narrow the search, enter the Member ID **and** Begin/End date for the claims period.
- You cannot search for claims exceeding 24 months old.
- If the **End Date** field is **not** populated, the default is today's date.

Show/Hide Search

Claim ID: Member ID: Begin Date:
 Date of Birth: End Date:

Search

| Claim ID | Date of Service | Provider | Member | Status | Status Date | Billed Charges |
|----------|-----------------|----------|--------|--------|-------------|----------------|
| | 10/3/2019 | | | Final | 10/11/2019 | \$126.00 |
| | 10/3/2019 | | | Final | 10/11/2019 | \$209.03 |
| | 10/22/2019 | | | Final | 11/1/2019 | \$209.03 |
| | 11/12/2019 | | | Final | 11/22/2019 | \$511.03 |
| | 11/12/2019 | | | Final | 11/22/2019 | \$45.00 |
| | 11/12/2019 | | | Final | 11/22/2019 | \$357.02 |
| | 11/14/2019 | | | Final | 12/6/2019 | \$54.00 |
| | 11/14/2019 | | | Final | 11/22/2019 | \$511.03 |
| | 11/20/2019 | | | Final | 11/29/2019 | \$355.03 |
| | 11/18/2019 | | | Final | 11/29/2019 | \$256.03 |

Page 1 of 2

15 claims found. [Download Results](#)

To print results right click on the page and select print from the list of options.

5. Click on the "Claim ID" to display additional information for a specific claim.

Claim #

| | | | | | | |
|-------------------------|----------------------|----------------|----------------------|----------|-------------|-----------|
| Patient: | <input type="text"/> | Date of Birth: | <input type="text"/> | Charges | Not Covered | Plan Paid |
| Member ID: | <input type="text"/> | Received Date: | 10/04/2019 | \$126.00 | - \$75.54 | = \$49.45 |
| Status Date: | 10/11/2019 | Total Charges: | \$126.00 | Status: | Final | |
| Patient Responsibility: | \$0.00 | | | | | |

Payment Details

| Check Issued Date | Issued To | Total Check Amount | Check No | Ref ID | Status |
|-------------------|----------------------|--------------------|----------|----------------------|--------|
| 10/11/2019 | <input type="text"/> | \$61,563.18 | 18100655 | <input type="text"/> | Final |

Claim Details

| Service Date | POS/TOB | Units | Cap | Proc Code | Rev Code | Billed | Allowed | Disallow | Deduct | Co-Insure | Co-Pay | Seq Reduction | Reason Remark | Patient Resp | Plan Paid |
|--------------|---------|-------|-----|-----------|----------|----------|---------|----------|--------|-----------|--------|---------------|---------------|--------------|-----------|
| 10/03/2019 | 22 | 1 | N | 7213126 | | \$126.00 | \$50.46 | \$75.54 | \$0.00 | \$0.00 | \$0.00 | \$1.01 | CO45 | \$0.00 | \$49.45 |

Reason Code Descriptions

CO45 - Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement.

Disclaimer
THIS IS NOT A BILL

[Back to Search Results](#) | [Print View](#)

Authorization Inquiry

This tool allows users to inquire about authorizations created within the past 24 months.

The Authorization Inquiry tool allows authorizations to be viewed but not edited. A primary care provider can view authorizations for all of their members. Specialist can view authorizations directed to them in order to perform authorized services.

To inquire about one or more authorizations, complete the following steps:

1. Log into the Blue Advantage Provider Portal.
2. Click "Authorization Inquiry" to start your search.

The screenshot shows the 'Authorization Inquiry' page in the Louisiana Blue Advantage Provider Portal. The page has a blue header with the Louisiana state logo and the word 'Louisiana'. On the right side of the header, there are icons for 'MESSAGES', 'PROFILE', and 'LOGOUT'. Below the header is a dark blue navigation bar with the following menu items: 'HOME', 'ELIGIBILITY', 'CLAIMS', 'AUTHORIZATION INQUIRY' (which is highlighted), 'FIND A PROVIDER', and 'FORMS & RESOURCES'. The main content area is white and contains the following sections:

- To search for an authorization:**
 - Select the Authorization Type (All, Outpatient or Inpatient) **AND**
 - Select the Authorization Status (Any, Pending, Partially Approved, Denied or Cancelled) **AND**
 - Select one of the following:
 - All to enter a date range
 - Authorization ID to enter an authorization number(s)
 - Member ID to enter a member ID number
- Search tips:**
 - To narrow the search, enter the From **and**To date for the authorizations period (Date range cannot exceed 3 months).
 - To search for multiple Authorization IDs, enter the Authorization IDs separated by commas, then select search.
 - You cannot search for authorizations exceeding 24 months old.
 - If the **To Date** field is **not** populated, the default is today's date.
- Authorizations**
- Home / Authorizations
- Search Authorizations By:**
- Authorization types
 - All authorization types
 - Outpatient
 - Inpatient
- Authorization status
 - Any authorization status
 - Pending
 - Partially Approved
 - Approved
 - Denied
 - Cancelled
- Authorization ID
- Member
- Enter Authorization ID(s) *
-
- You may search for more than one number at a time. If entering multiple numbers, separate each by a comma.

3. Choose the authorization criteria to search by:

- Authorization types (All, Outpatient or Inpatient) **AND**
- Authorization status (Any, Pending, Partially Approved, Denied or Cancelled)

Authorizations

Home / Authorizations

Search Authorizations By:

Authorization types

All authorization types Outpatient Inpatient

Authorization status

Any authorization status Pending Partially Approved Approved Denied Cancelled

Authorization ID Member [Search for a Member](#) ▼

Enter Member ID(s) *

You may search for more than one number at a time. If entering multiple numbers, separate each by a comma.

4. Then choose to enter the Authorization ID, Member ID* or date range to complete the inquiry and click "Search."

*The member ID prefix **must** be included when entering the Member ID to complete an authorization inquiry.

Note: if the Authorization ID, Member ID or date range is unavailable, you can lookup a member's record by their Social Security Number (SSN) to get the Member ID.

Authorization ID Member [Search for a Member](#) ▲

Find a member by

Social Security Number *

5. All authorizations, meeting the criteria entered, will appear on the screen.

Date of Service

| AUTH NUMBER | PATIENT FIRST NAME | PATIENT LAST NAME | START DATE | END DATE | SERVICING PROVIDER | REFERRING PROVIDER |
|-------------|--------------------|-------------------|------------|------------|--------------------|--------------------|
| [REDACTED] | [REDACTED] | [REDACTED] | 12/10/2019 | 12/10/2019 | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | 11/20/2019 | 11/21/2019 | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | 11/15/2019 | 11/15/2019 | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | 11/12/2019 | 12/11/2019 | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | 10/17/2019 | 10/17/2019 | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | 10/16/2019 | 10/17/2019 | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | 10/16/2019 | 11/14/2019 | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | 9/16/2019 | 9/17/2019 | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | 9/3/2019 | 10/2/2019 | [REDACTED] | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | 7/29/2019 | 8/27/2019 | [REDACTED] | [REDACTED] |

Click on the "AUTH NUMBER" to view additional details for a specific authorization.

Home / Authorizations / View Form

Authorization # [REDACTED]

Authorization # [REDACTED] **Status:** Approved **Type:** Medical **Requested Dates of Service:** 12/11/2019

Member Name: [REDACTED] **Member ID:** [REDACTED] **Date of Birth:** [REDACTED]

Diagnosis Code: I70213 **Description:** Atherosclerosis of native arteries of extremities with intermittent claudication, bilateral legs

Patient Insurance: Blue Advantage 004

Service Details

Service 1

Service Type: Outpatient Observation Services **Status:** Approved

Approved Dates of Service: 12/10/2019 - 12/10/2019 **Place of Service:** Outpatient Hospital

Unit(s) Authorized: Unlimited **Unit(s) Available:** Unlimited

Claim #: No claim numbers are associated with this authorization.

Providers

Requesting Provider

Provider: [REDACTED]

Phone: [REDACTED]

Referring Provider NPI: [REDACTED]

ID: [REDACTED]

Address: [REDACTED]

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

P.O. Box 7003
Troy, MI 48007

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"

**You may receive a messaging service on weekends and holidays from April 1 through September 30. Please leave a message, and your call will be returned the next business day.*