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BlueChoice® HealthPlan of South Carolina

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My Insurance ManagerSM User Guide

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Your Partners in Outstanding Quality, Satisfaction and Service

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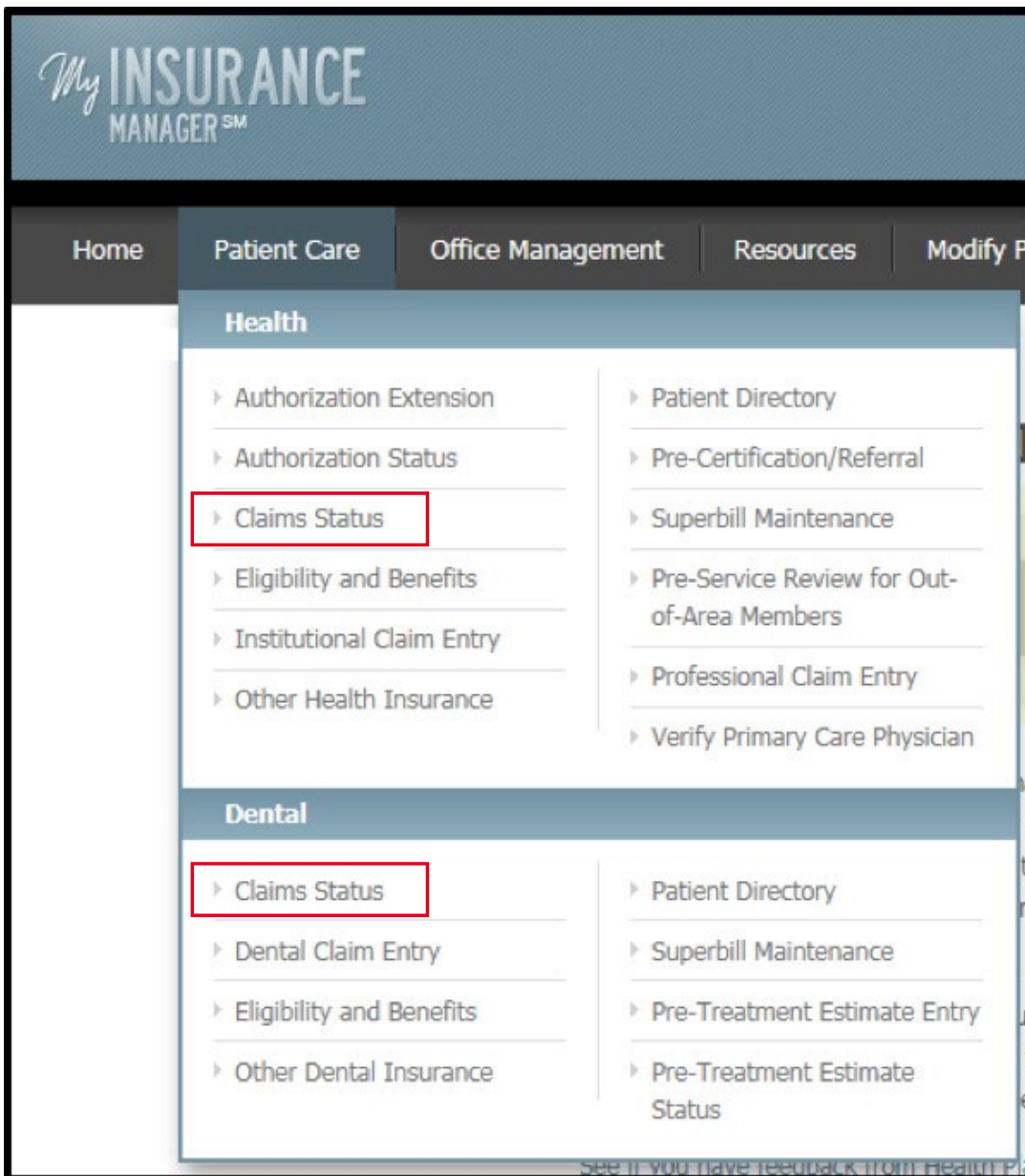
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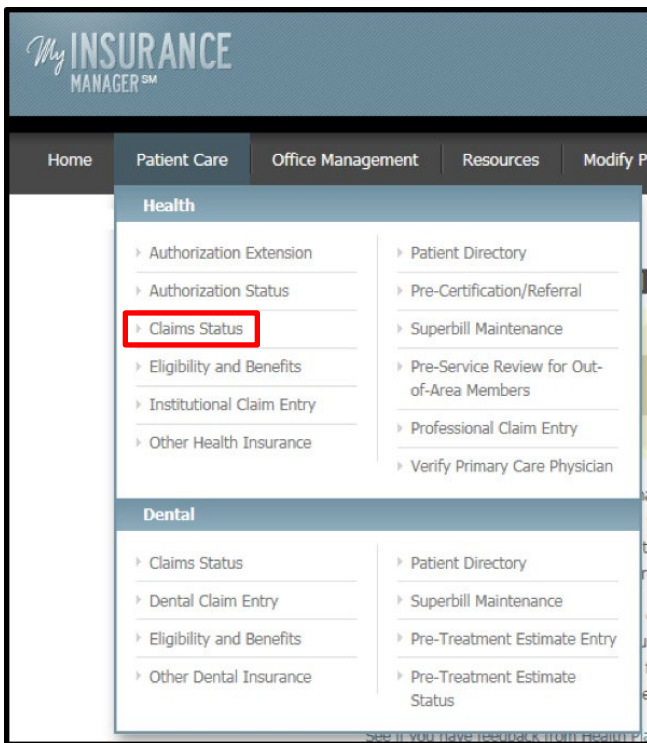
Claims Status

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



For Health Providers

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

A screenshot of the 'Claims Status' search form in the My Insurance Manager web application. The form is titled 'Claims Status' and includes a 'Printer-Friendly' link. It features a 'Patient Selection' section with a note: 'To get claims status information, please enter this information. If your patient had a different Health Plan previously, please choose the Health Plan that was in effect for the specific date of service.' The form includes a 'Health Plan' dropdown menu set to 'BlueCross BlueShield Plans'. Below this is a 'Search By:' section with radio buttons for 'Member ID' (selected) and 'Claim Number'. There is a 'Member ID:' text input field with a note 'include alpha prefix, if applicable'. Below that is a 'Patient's Date of Birth:' text input field with a note 'mm/dd/yyyy'. An 'Advanced Search' section has radio buttons for 'All Claims in System' (selected), 'Date of Service', 'Last 6 Months', and 'Last Year'. At the bottom, there is an 'Additional Information [+]' section and a 'Continue' button.

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

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

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

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

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

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

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

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

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

Claim Number: 70870002W0000

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

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

[Back](#)

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

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

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

Ask Provider Services [Printer-Friendly](#)

Inquiry * Required

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

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

Inquiry Name: BlueCross BlueShield Plans

Inquiry Reason: Claim Status Inquiry

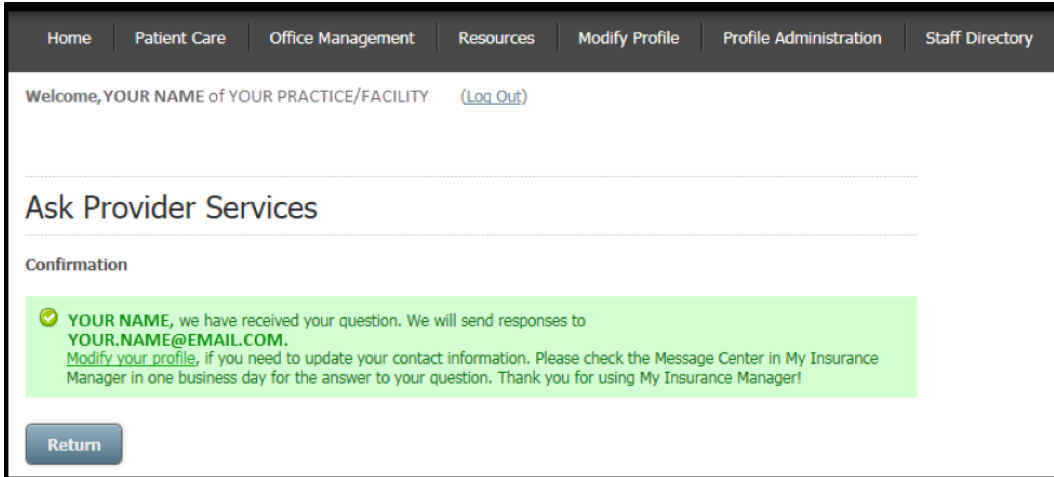
* Patient's First Name: MICHAEL * Patient's Last Name: TESTING * Patient's Member id: 999574317 Patient's Date of Birth: 10/01/1958
mm/dd/yyyy

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

* Please enter a question:

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

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




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

Welcome, YOUR NAME of YOUR PRACTICE/FACILITY ([Log Out](#))

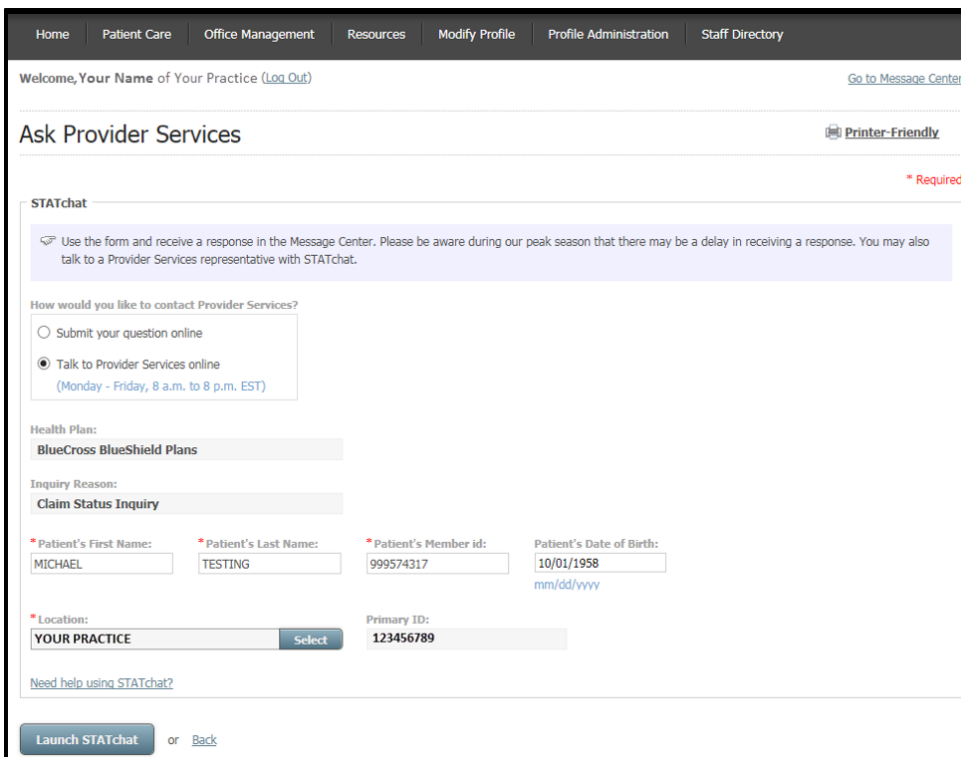
Ask Provider Services

Confirmation

 YOUR NAME, we have received your question. We will send responses to YOUR.NAME@EMAIL.COM. [Modify your profile](#), if you need to update your contact information. Please check the Message Center in My Insurance Manager in one business day for the answer to your question. Thank you for using My Insurance Manager!

[Return](#)

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



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


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

Ask Provider Services

[Printer-Friendly](#)

* Required

STATchat

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

How would you like to contact Provider Services?

Submit your question online

Talk to Provider Services online
(Monday - Friday, 8 a.m. to 8 p.m. EST)

Health Plan:
BlueCross BlueShield Plans

Inquiry Reason:
Claim Status Inquiry

* Patient's First Name: MICHAEL

* Patient's Last Name: TESTING

* Patient's Member id: 999574317

Patient's Date of Birth: 10/01/1958
mm/dd/yyyy

* Location: YOUR PRACTICE [Select](#)

Primary ID: 123456789

[Need help using STATchat?](#)

[Launch STATchat](#) or [Back](#)

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



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

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

Printer-Friendly

Claims Status - Detail

Insurance

Plan Name:
BlueCross BlueShield Plans

Plan ID:
38520

Member ID:
ZCZ065922516805

Claim Number:
70870002W0000

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

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

Detailed Status Information

Detail

Status Effective Date: 04/24/2017	Date(s) of Service: 03/21/2017 - 03/21/2017	Claim Status: PENDING
Primary ID: 123456789	Organization or Provider's Name: YOUR PRACTICE/FACILITY	
Total Charges: \$100.00	Amount Paid: \$0.00	
Patient Account Number: 3159		

Attachments

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

Attach [Document Type] Documentation

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

Line Summary List Showing 1 Result

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

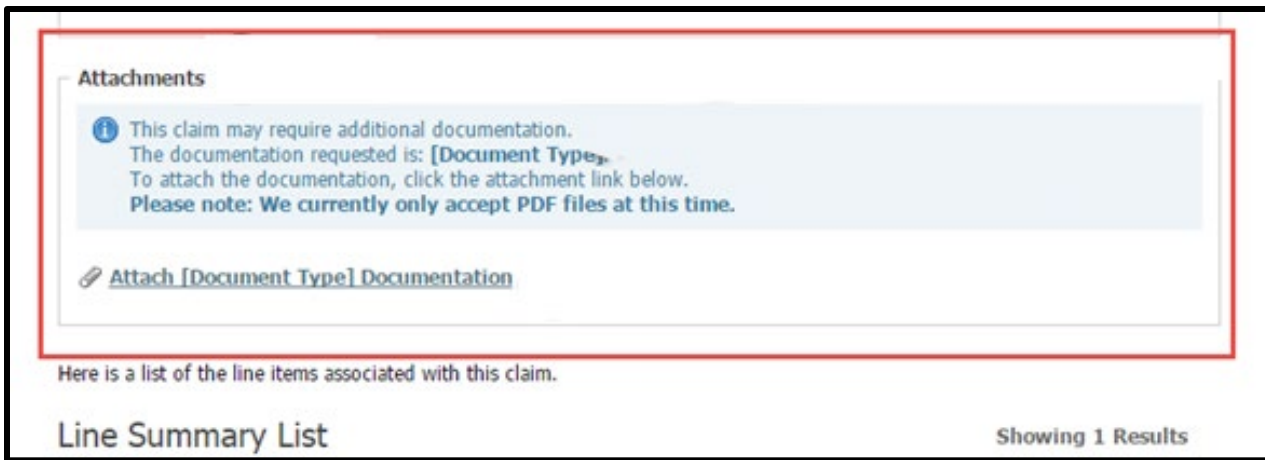
Procedure Code:
99213 - OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH REQUIRES AT LEAST 2 OF THESE 3 KEY COMPONENTS: AN EXPANDED PROBLEM FOCUSED HISTORY; AN EXPANDED PROBLEM FOCUSED EXAMINATION; MEDICAL DECISION MAKING OF LOW COMPLEXITY. COUNSELING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

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

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

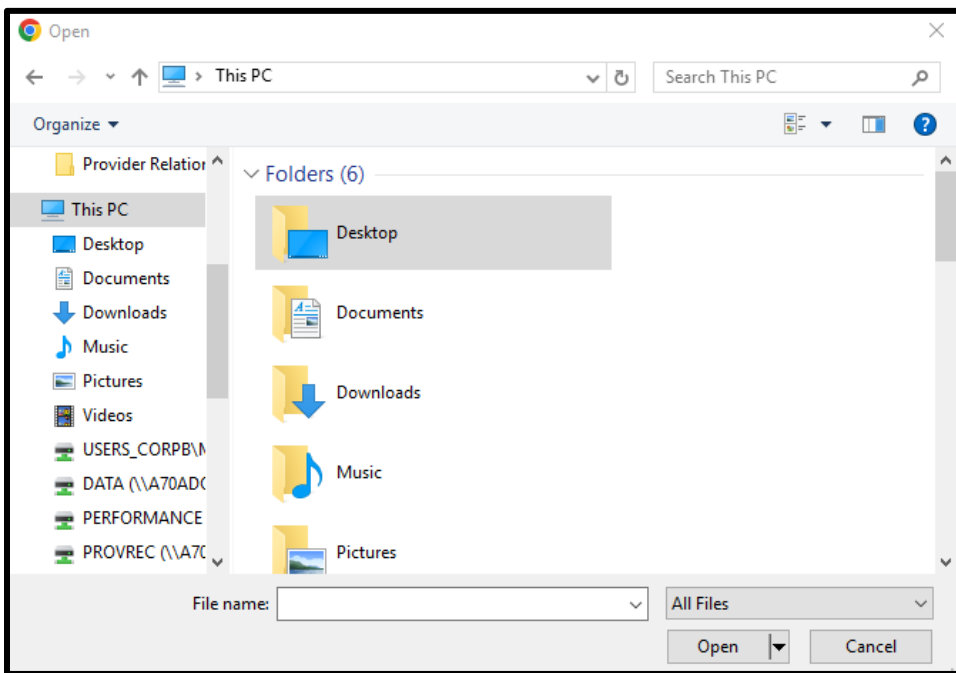
- Accident questionnaire
- Certificate of medical necessity (for durable medical equipment)
- Medical records
- Other health insurance
- Primary carrier explanation of benefits (EOB)
- Provider reconsideration

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

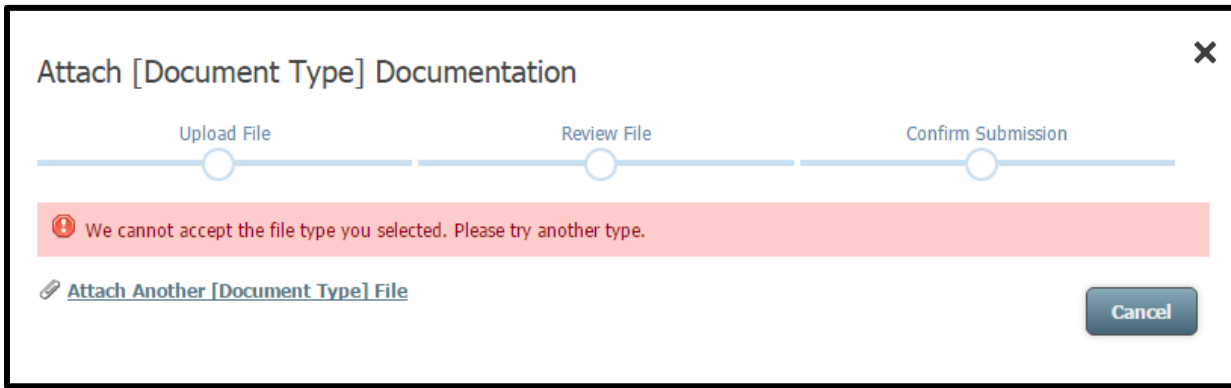


Select the **Attach Documentation** option to continue.

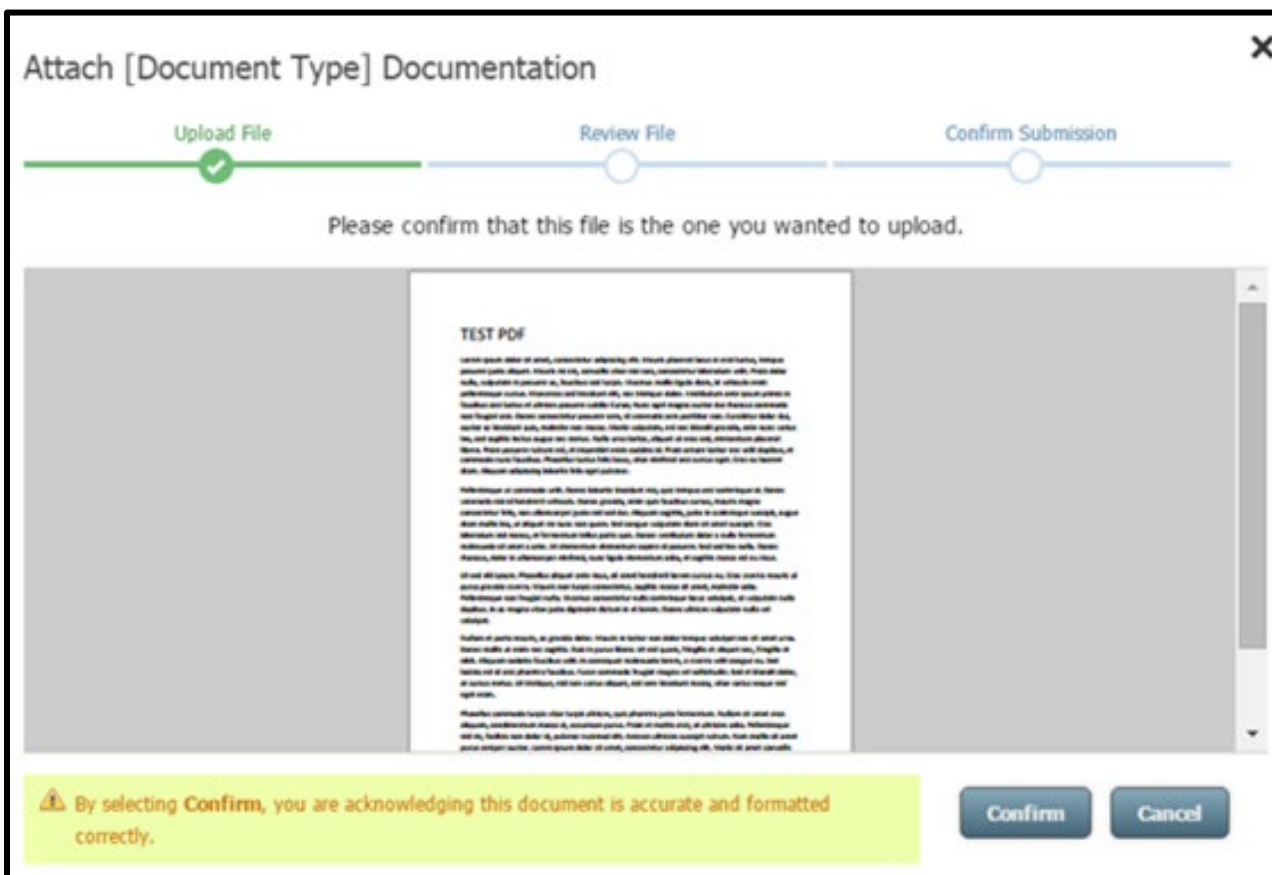
Next, look for and then select the document you want to attach. Once the appropriate document is chosen, select **Open**.



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



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

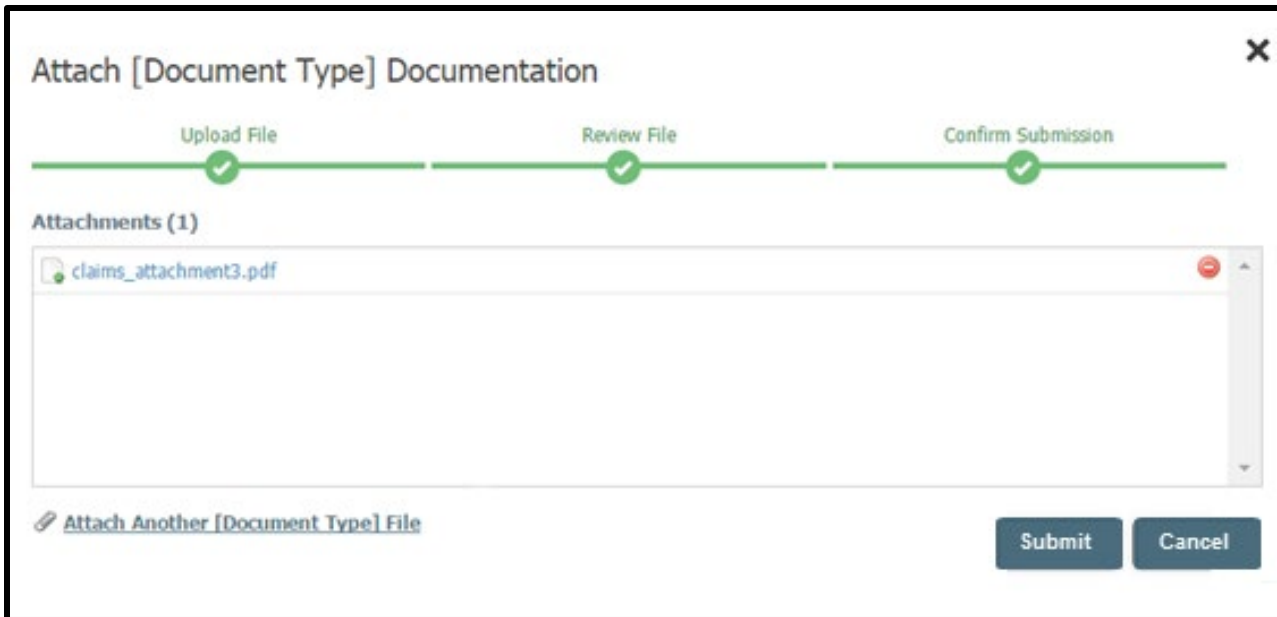


Please review the document you have uploaded in the Attach Documentation screen and verify the document you want to attach is the one associated with the claim for the member. If the document you have attached contains more than one page, you can use the scroll option to view additional pages.

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

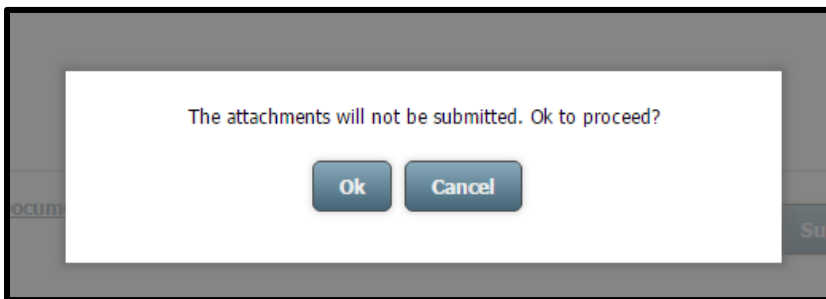
If you select **Cancel**, you'll see the option to either **Cancel Upload** or to **Return to Review**.

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

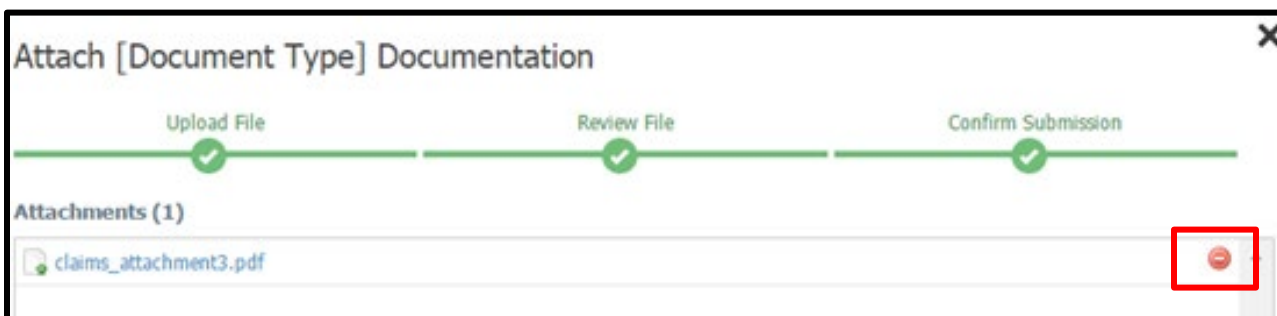


Select **Attach Another File** at the bottom of the screen to attach another document. Each new document you attach will appear in the list of attachments here on the Attach Documentation screen.

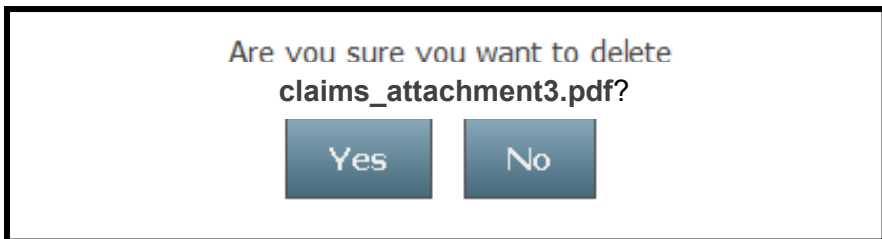
If you select **Attach Another File** by mistake, select **Cancel**. Next, Select **Ok** to proceed with your request to cancel the attachment or **Cancel** to return to the Attach Documentation screen.



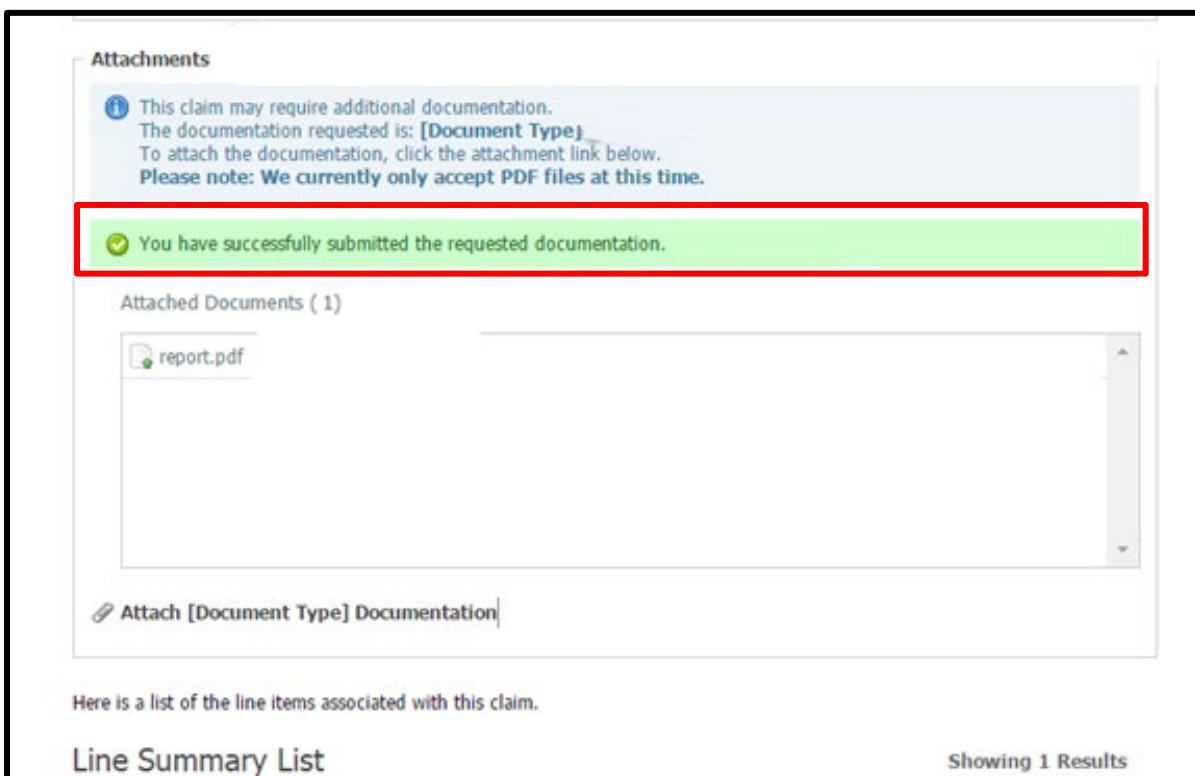
To remove a document you attach, select the red button.



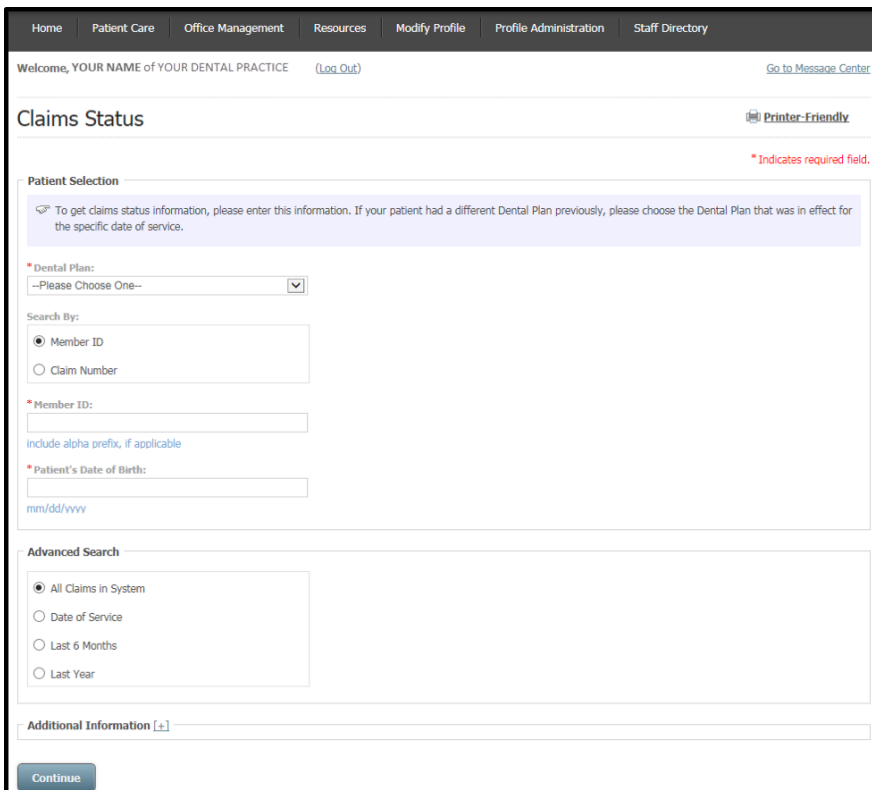
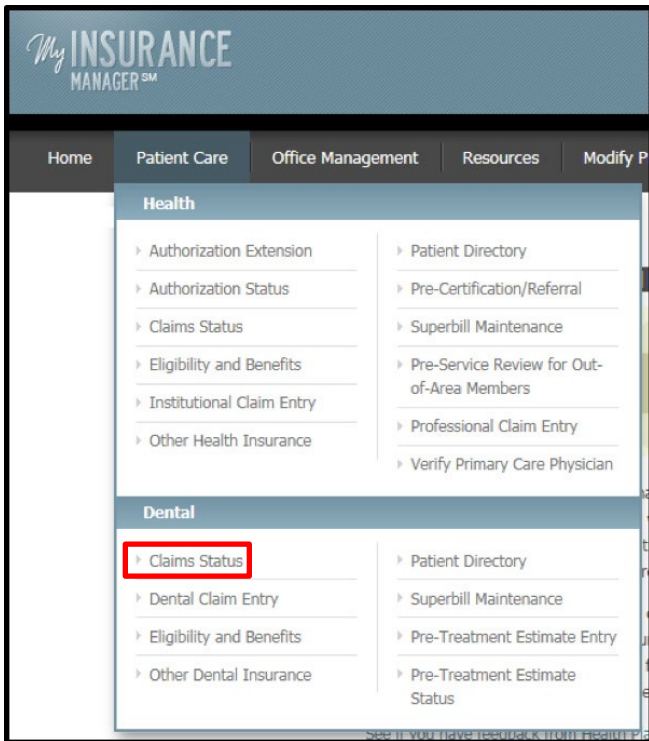
If you need to remove any document, a box will display asking if you wish to delete the selected document. If you select **Yes**, then the document you selected will be removed. Once the document is removed, the new number of attachments will reflect on the Attach Documentation screen. If you select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



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



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



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

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

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

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

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

The screenshot displays the "Claims Status - Detail" screen. It features a navigation bar and a welcome message. The "Insurance" section shows "Plan Name: BlueCross BlueShield Plans" and "Member ID: ZCZ06592516805". The "Patient" section shows "Patient's Name: MARTHA TESTING" and "Date of Birth: 09/01/1960". A "Change Patient" button is located below the patient information. The "Claims Number:" field contains "17047001W". A checkbox is checked with the text "Check your remittance voucher for any non-covered or non-allowed charges which may be the member's responsibility." The "Primary Status:" is "ACKNOWLEDGEMENT/ACCEPTANCE INTO ADJUDICATION SYSTEM-THE CLAIM/ENCOUNTER HAS BEEN ACCEPTED INTO THE ADJUDICATION SYSTEM." A "Detailed Status Information" button is visible. The "Detail" section includes: "Status Effective Date: 05/27/2017", "Date(s) of Service: 05/26/2017 - 05/26/2017", and "Claim Status: PENDING". It also shows "Primary ID: 987654321", "Organization or Provider's Name: YOUR DENTAL PRACTICE", "Total Charges: \$1,000.00", and "Amount Paid: \$0.00". The "Patient Account Number:" is "3125". Below this, a message states "Here is a list of the line items associated with this claim." The "Line Summary List" section shows "Showing 1 Result" and a table with the following data:

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

Below the table, the "Procedure Code:" is "D2740 - CROWN-PORCELAIN/CERAMIC SUBSTRATE". At the bottom, there are buttons for "Previous Claim", "Next Claim", "Ask Provider Services", "View Tooth Chart", and "or Back".

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

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

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

Claims Status - Detailed Status Information Printer-Friendly

Insurance
Plan Name:
BlueCross BlueShield Plans
Member ID:
ZCZ065922516805

Patient
Patient's Name:
MARTHA TESTING
Date of Birth:
09/01/1960
Change Patient

Claim Number:
T7D47001W

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

Status Details
ACKNOWLEDGEMENT/ACCEPTANCE INTO ADJUDICATION SYSTEM-THE CLAIM/ENCOUNTER HAS BEEN ACCEPTED INTO THE ADJUDICATION SYSTEM.
20 - ACCEPTED FOR PROCESSING

Back

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

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

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

Ask Provider Services Printer-Friendly

* Required

Inquiry
Inquiry Name:
BlueCross BlueShield Plans
Inquiry Reason:
Claim Status Inquiry

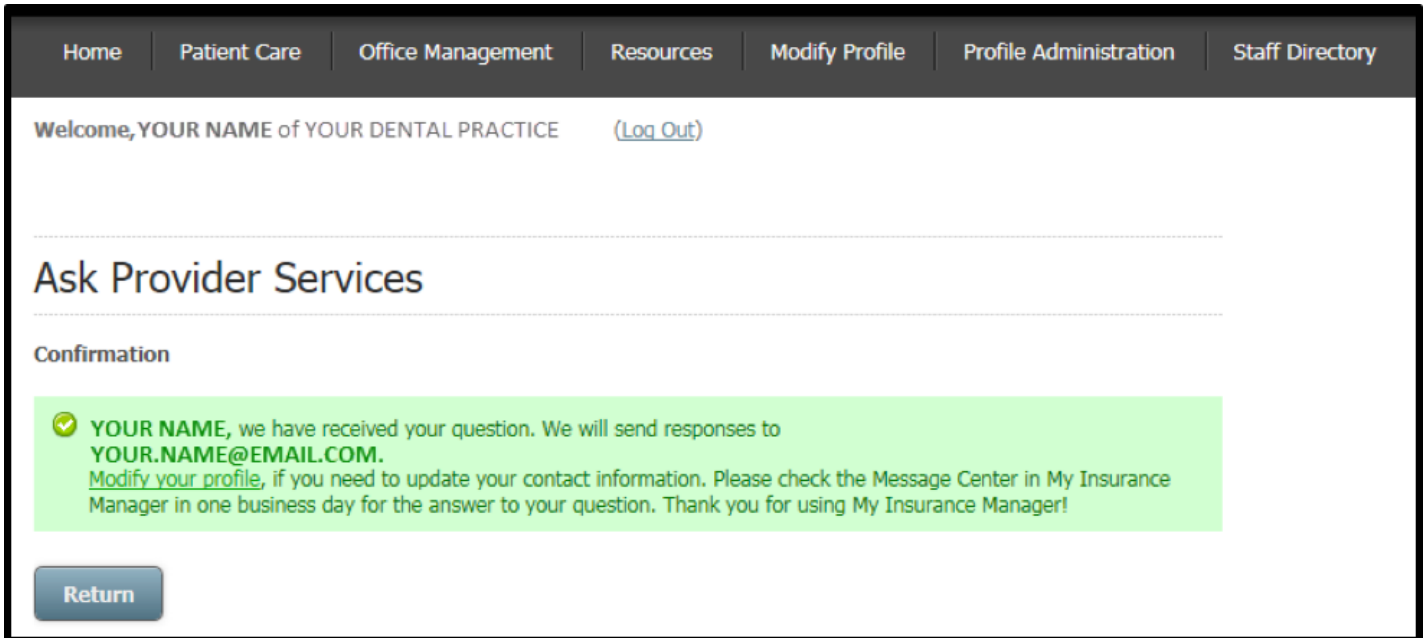
* Patient's First Name: MARTHA * Patient's Last Name: TESTING * Patient's Member id: 999574317 Patient's Date of Birth: 09/01/1960
mm/dd/yyyy

* Location: YOUR DENTAL PRACTICE Select Primary ID: 987654321

* Please enter a question:

Submit Question or Back

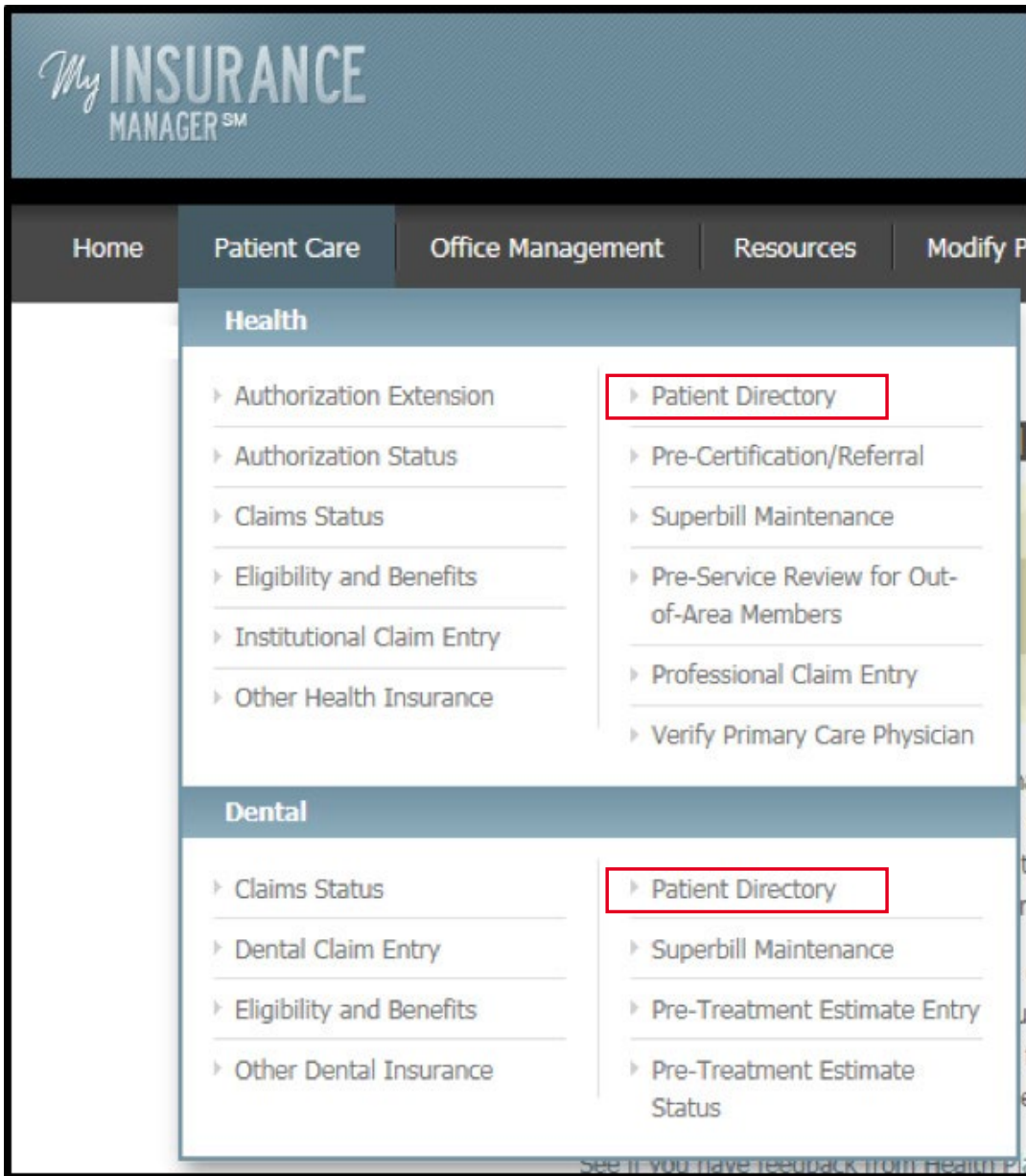
The Confirmation screen shows you how and when to check the Message Center for a response to your question. Use the **Return** button to return to the Claim Status — Detail screen.



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

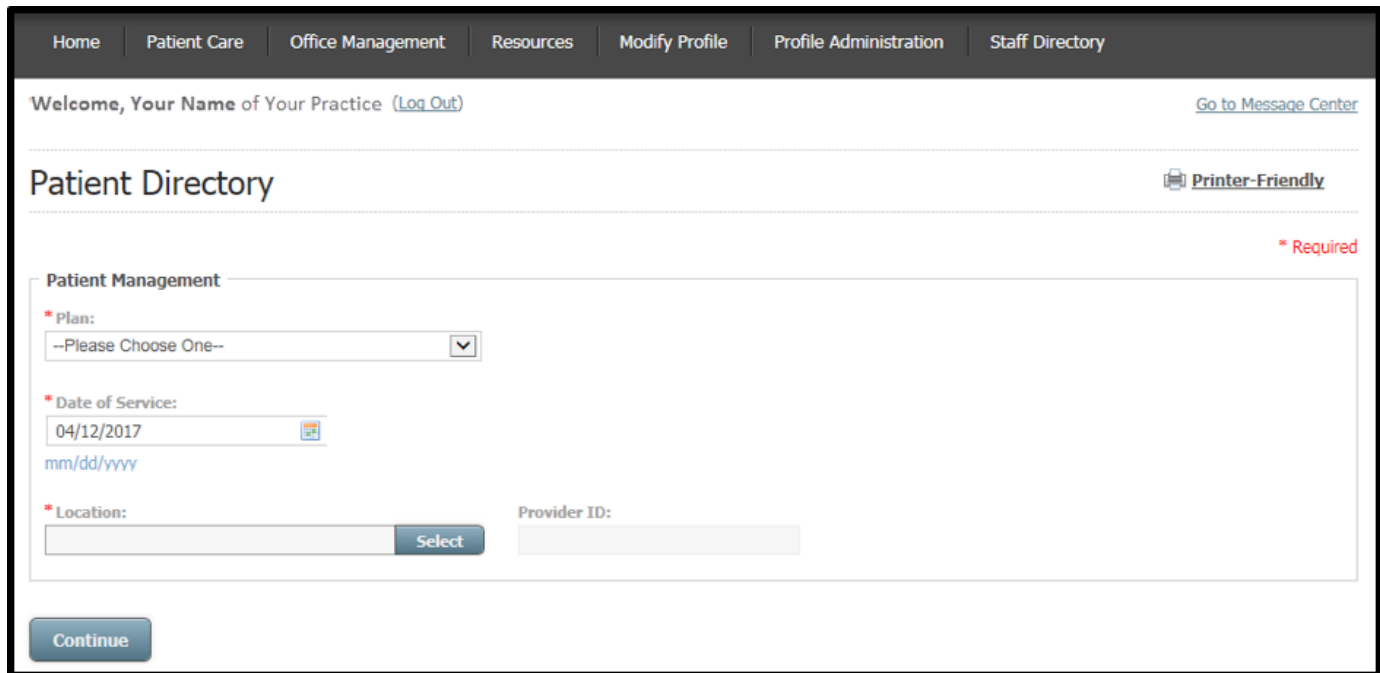
Patient Directory

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



For Health Providers

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



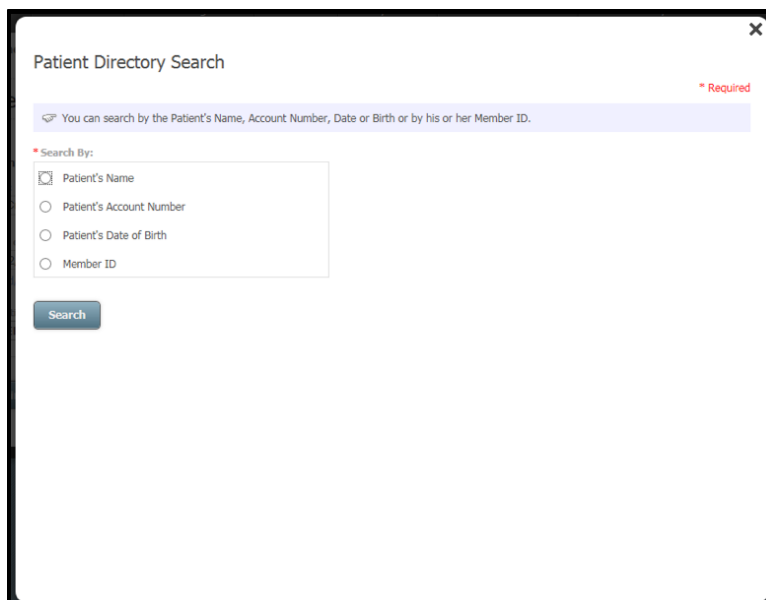
The screenshot shows a web application interface for health providers. At the top, there is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar, a welcome message reads "Welcome, Your Name of Your Practice (Log Out)" with a "Go to Message Center" link. The main heading is "Patient Directory" with a "Printer-Friendly" icon. A red asterisk indicates required fields. The "Patient Management" section contains the following fields:

- * Plan: A dropdown menu with "--Please Choose One--" and a downward arrow.
- * Date of Service: A text input field containing "04/12/2017" and a calendar icon. Below it, the format "mm/dd/yyyy" is displayed.
- * Location: A text input field with a "Select" button next to it.
- Provider ID: A text input field.

A "Continue" button is located at the bottom left of the form area.

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

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

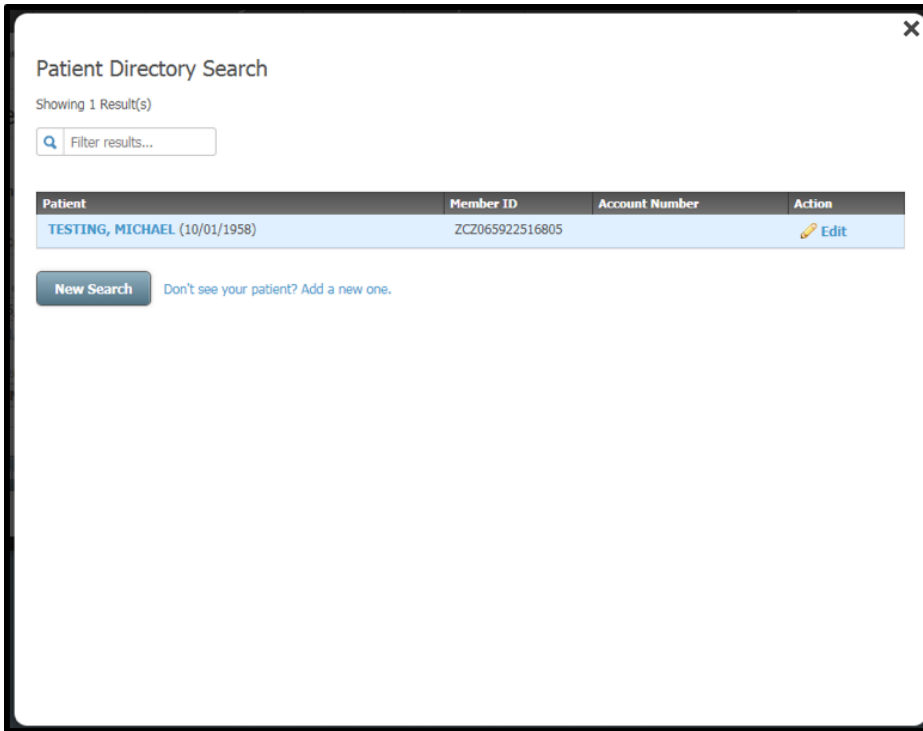


The screenshot shows a "Patient Directory Search" window. At the top right, there is a close button (X). Below the title, a red asterisk indicates required fields. A light blue banner contains the text: "You can search by the Patient's Name, Account Number, Date or Birth or by his or her Member ID." Below this, the "Search By:" section has four radio button options:

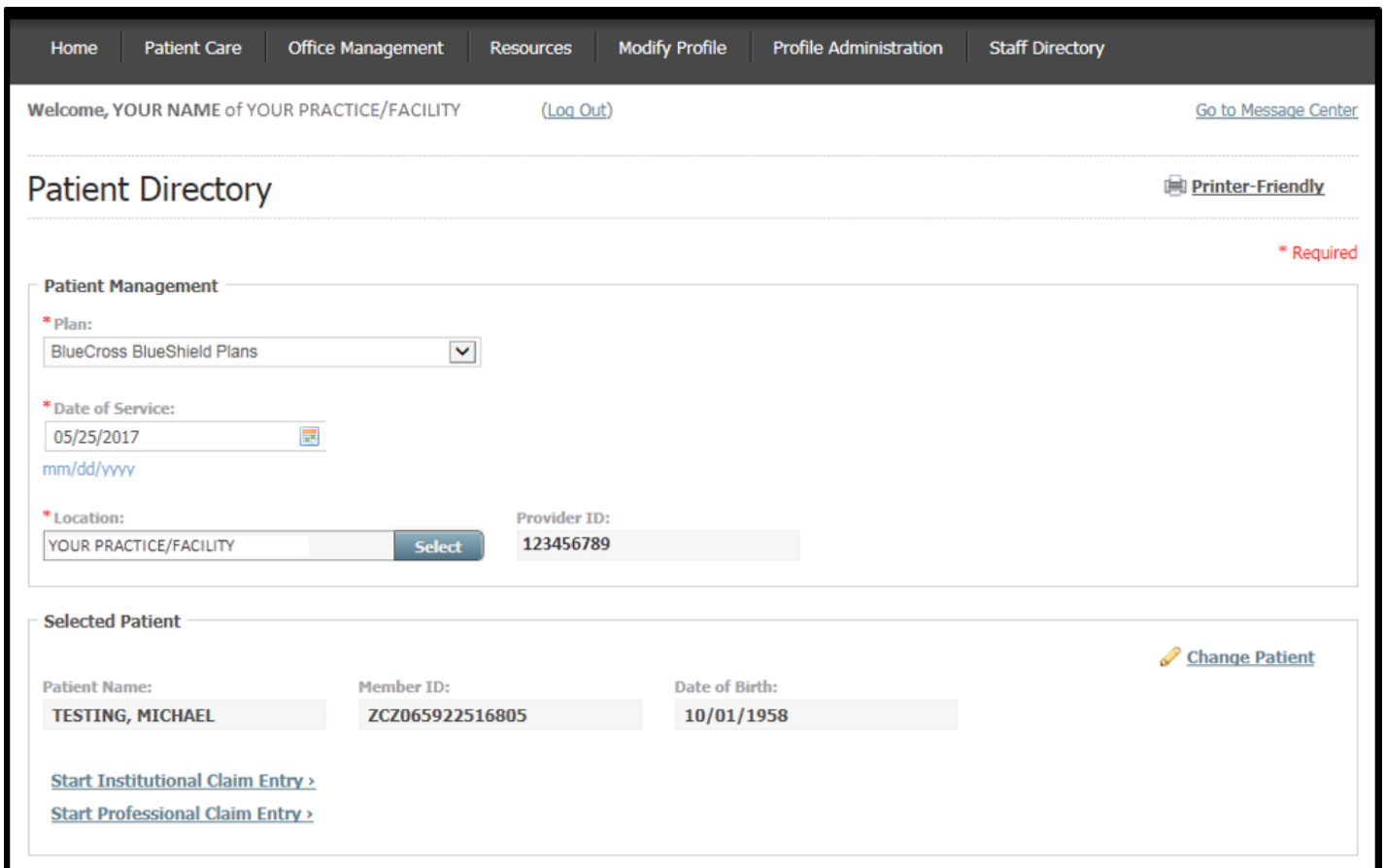
- Patient's Name
- Patient's Account Number
- Patient's Date of Birth
- Member ID

A "Search" button is located at the bottom left of the form area.

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



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



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

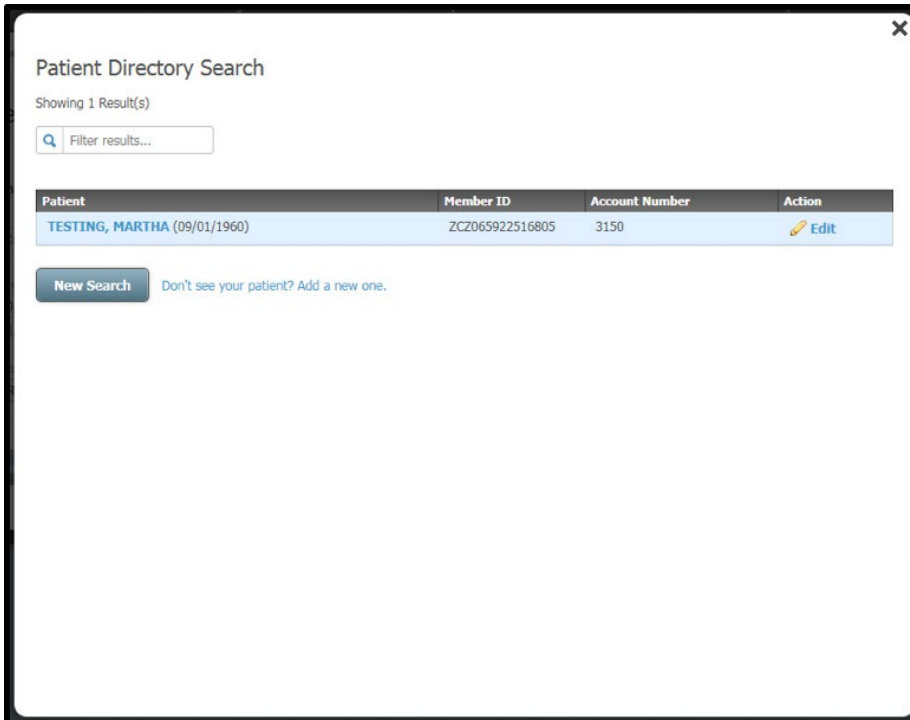
The screenshot shows a web application interface with a dark navigation bar at the top containing links for Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar, a welcome message reads "Welcome, Your Name of Your Practice (Log Out)" with a "Go to Message Center" link on the right. The main heading is "Patient Directory" with a "Printer-Friendly" icon. A red asterisk and the word "Required" are positioned to the right of the form area. The form is titled "Patient Management" and contains the following fields: a dropdown menu for "Plan" with the text "--Please Choose One--"; a date input field for "Date of Service" showing "04/12/2017" with a calendar icon and the format "mm/dd/yyyy"; a "Location" input field with a "Select" button; and a "Provider ID" input field. A "Continue" button is located at the bottom left of the form area.

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

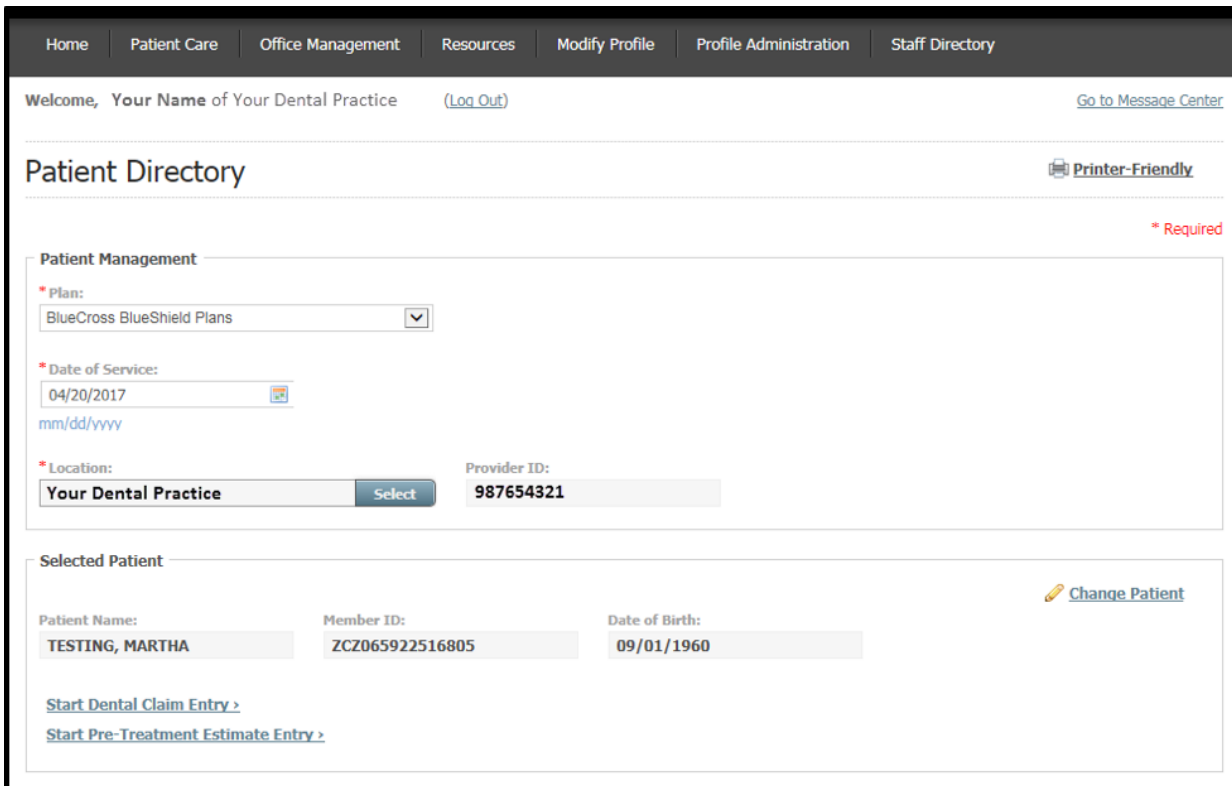
- Patient's Name – The screen displays additional fields for patient's first name and patient's last name. Enter at least two letters for the patient's first and/or last names. Complete the required additional fields, then **Search**.
- Patient's Account Number – The screen displays an additional field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

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

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

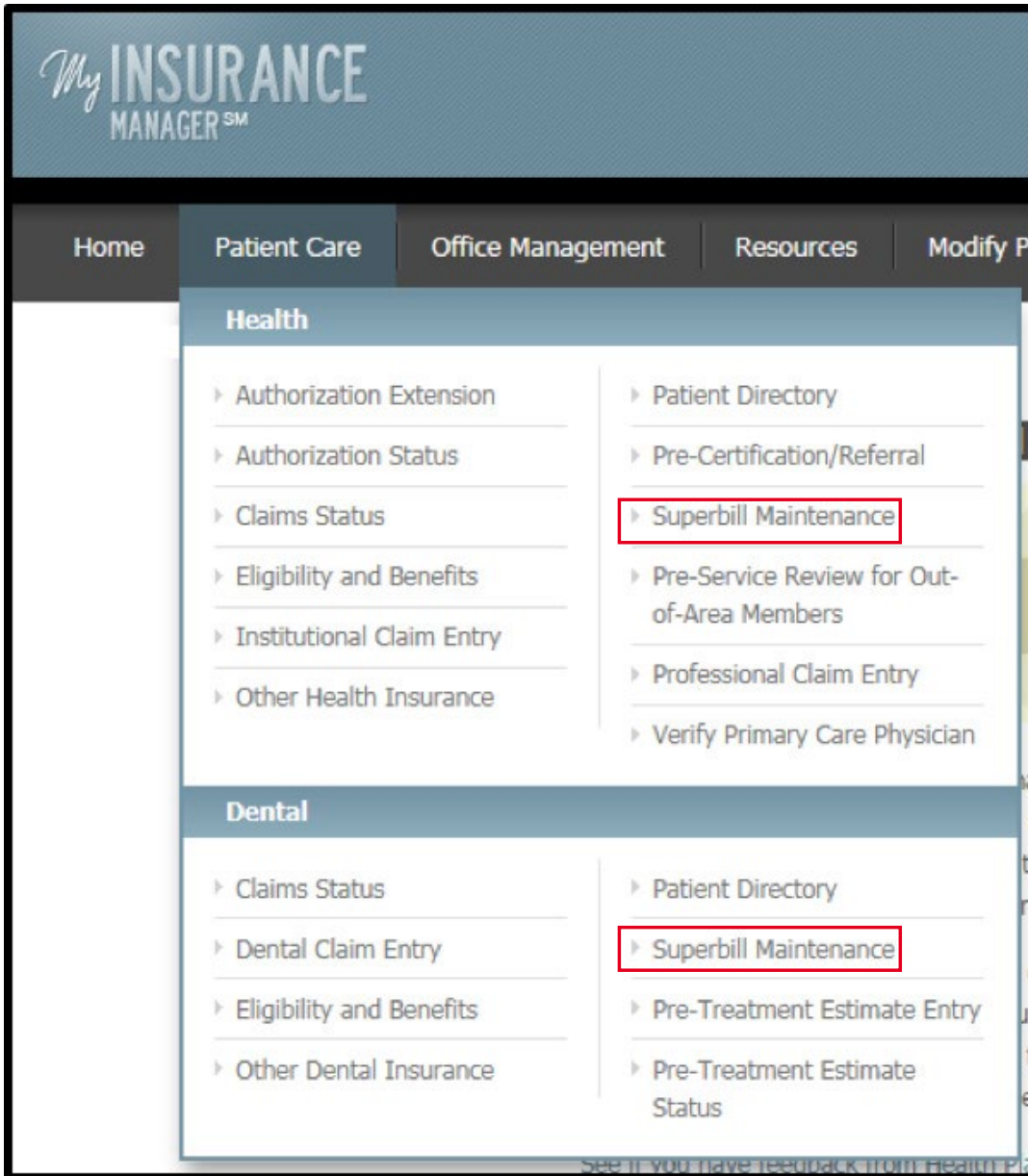


Select **Start Dental Claim Entry** or **Start Pre-Treatment Estimate Entry**. Follow the **Change Patient** link to select another individual in your Patient Directory.



Superbill Maintenance

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



For Health Providers

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

The screenshot shows the 'Superbill Maintenance' page with the 'Location Selection' section. The 'Health Plan' dropdown menu is open, displaying the following options: 'Please Choose One--', 'BlueCross BlueShield Plans', 'BlueChoice HealthPlan', 'Employee Benefit Services dba Key Benefit Admin', 'FEP', 'Planned Administrators', 'State Health Plan', and 'Thomas Cooper'. A red asterisk and the word 'Required' are visible to the right of the dropdown.

The screenshot shows the 'Superbill Maintenance' page with the 'Location Selection' section. The 'Health Plan' is set to 'BlueCross BlueShield Plans' and the 'Location' is 'INTERNAL MEDICINE ASSOC' with a 'Select' button. The 'Primary ID' is '1831117795'. Below this is the 'Superbill Selection' section with a message: 'You can either create a new Superbill or select a Superbill to preview, edit, copy or delete.' A 'Create a New Superbill' button is present. Below the message is a table of Superbills:

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

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

The screenshot shows the 'Superbill Preview' page. The 'Superbill Preview' section displays the following information: 'Location: YOUR PRACTICE/FACILITY', 'ICD Code Qualifier: ICD-10', 'Primary ID: 123456789', and 'Address: 654 PHYSICIAN PKWY STE B, YOUR CITY, SC 29292-6540'. Below this is a message: 'This is an example of what your Superbill Template will look like in claim entry.' At the bottom, there are buttons for 'Show All', 'Print', and 'Cancel'.

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

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

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

Superbill Maintenance

Superbill Preview

CREATE ICD9 COPY COPY

Location: YOUR PRACTICE/FACILITY ICD Code Qualifier: ICD-9

Primary ID: 123456789 Address: 654 PHYSICIAN PKWY STE B YOUR CITY, SC 29292-6540

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

DIAGNOSIS	CATEGORY TESTING	OFFICE PROCEDURE	SURGERY
<input type="checkbox"/> 71515	LABS AND XRAYS	<input type="checkbox"/> 99215	<input type="checkbox"/> 20610
<input type="checkbox"/> 53085		<input type="checkbox"/> 36415	
<input type="checkbox"/> 44629			
<input type="checkbox"/> 27801			
<input type="checkbox"/> 7265			
<input type="checkbox"/> 4019			
<input type="checkbox"/> 7366			
<input type="checkbox"/> 2449			
<input type="checkbox"/> 32723			

Show All Print or Cancel

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

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

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

Superbill Maintenance

Create Superbill

* Superbill Name:

* ICD Code Qualifier: --Please Choose One--

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

Continue or Cancel

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

The screenshot shows the 'Superbill Maintenance' page. At the top, there is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar, a welcome message reads 'Welcome, YOUR NAME of YOUR PRACTICE/FACILITY' with a '(Log Out)' link and a 'Go to Message Center' link. The main heading is 'Superbill Maintenance' with a 'Printer-Friendly' icon. The 'Create Superbill' section includes several required fields: 'Superbill Name' (containing 'PROVIDER EDUCATION'), 'ICD Code Qualifier' (containing 'ICD-10'), 'Location' (containing 'YOUR PRACTICE/FACILITY'), and 'Primary ID' (containing '123456789'). An 'Address' field contains '654 PHYSICIAN PKWY STE B YOUR CITY, SC 29292-6540'. Below these fields is a 'Number of Columns' section with four options: 'One Column', 'Two Columns', 'Three Columns', and 'Four Columns'. The 'One Column' option is selected. The 'Superbill Layout' section includes a date picker for 'Display Begin Date' (set to '05/25/2017') and two buttons: 'Reload Categories' and 'Reset Date to Today'. Below this is a large text area for 'Column 1' with an 'Add Category' link. At the bottom, there are 'Save Superbill' and 'Cancel' buttons.

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

The screenshot shows the 'Add Category' dialog box. It has a title bar with a close button (X). The main heading is 'Add Category'. There is a red asterisk and the word 'Required' next to the 'Category Name' field, which is currently empty. Below this are two sections: 'Category Contents' and 'Display In'. The 'Category Contents' section has two radio buttons: 'Procedure Codes' (selected) and 'Diagnosis Codes'. The 'Display In' section has one radio button: 'Column 1' (selected). At the bottom, there are three buttons: 'Save', 'Save and Add Another', and 'Cancel'.

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

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

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

Superbill Maintenance [Printer-Friendly](#)

Create Superbill * Required

* Superbill Name: PROVIDER EDUCATION ICD Code Qualifier: ICD-10
Family Medicine, Pediatric, Sports Medicine, OB/GYN, etc.

Location: YOUR PRACTICE/FACILITY Primary ID: 123456789

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

Number of Columns

One Column Two Columns Three Columns Four Columns

Superbill Layout

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

Display Begin Date: 05/25/2017 Actions: Reload Categories Reset Date to Today
mm/dd/yyyy

Column 1

INTERNAL Add Procedure Actions ▼

EXTERNAL Add Procedure Actions ▼

[Add Category](#)

Save Superbill or Cancel

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

Add Procedure * Required

* Procedure Code: [] [magnifying glass] Modifiers: [] [] [] []

NDC: []

* Unit Type: --Please Choose One-- * Units: [] * Charges: [] \$

* Add to Category: INTERNAL ▼

* Description: []

* Display From: [] * Display To: 12/31/9999
mm/dd/yyyy mm/dd/yyyy

Save Save and Add Another or Cancel

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

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

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

Superbill Maintenance Printer-Friendly

Create Superbill * Required

* Superbill Name: PROVIDER EDUCATION ICD Code Qualifier: ICD-10
Family Medicine, Pediatric, Sports Medicine, OB/GYN, etc.

Location: YOUR PRACTICE/FACILITY Primary ID: 123456789

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

Number of Columns

One Column Two Columns Three Columns Four Columns

Superbill Layout

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

Display Begin Date: 05/25/2017 Actions: **Reload Categories** **Reset Date to Today**
mm/dd/yyyy

Column 1

INTERNAL Actions ▾
99213 Actions ▾
Add Procedure

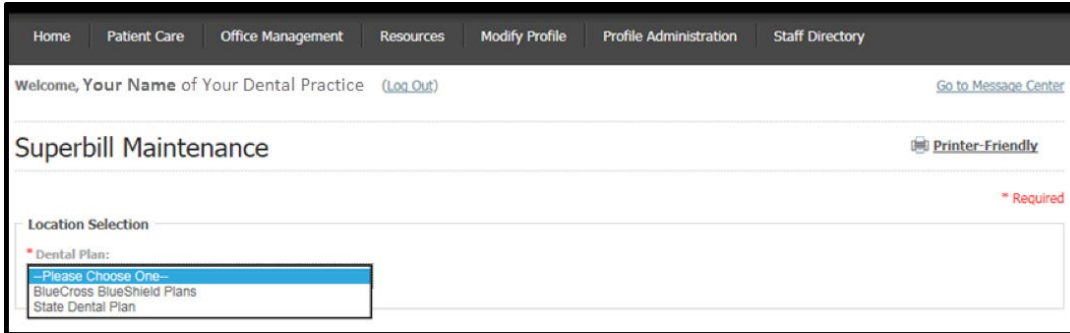
EXTERNAL Actions ▾
G0101 Actions ▾
Add Procedure

[Add Category](#)

Save Superbill or [Cancel](#)

For Dental Providers

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



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

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

Superbill Maintenance

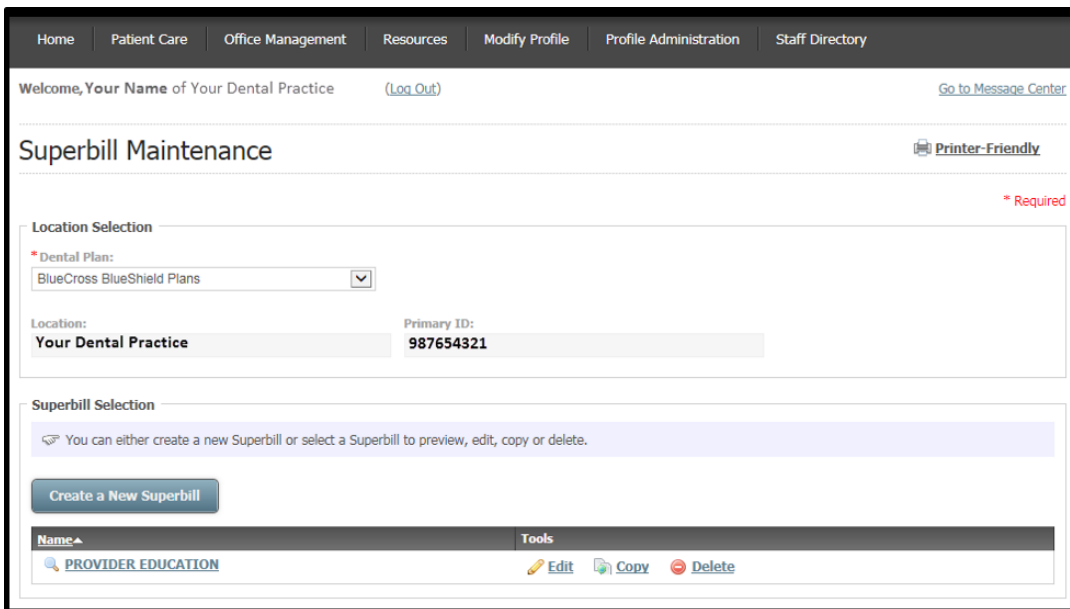
[Printer-Friendly](#)

* Required

Location Selection

* Dental Plan:

- Please Choose One—
- BlueCross BlueShield Plans
- State Dental Plan



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

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

Superbill Maintenance

[Printer-Friendly](#)

* Required

Location Selection

* Dental Plan:

BlueCross BlueShield Plans

Location: **Your Dental Practice** Primary ID: **987654321**

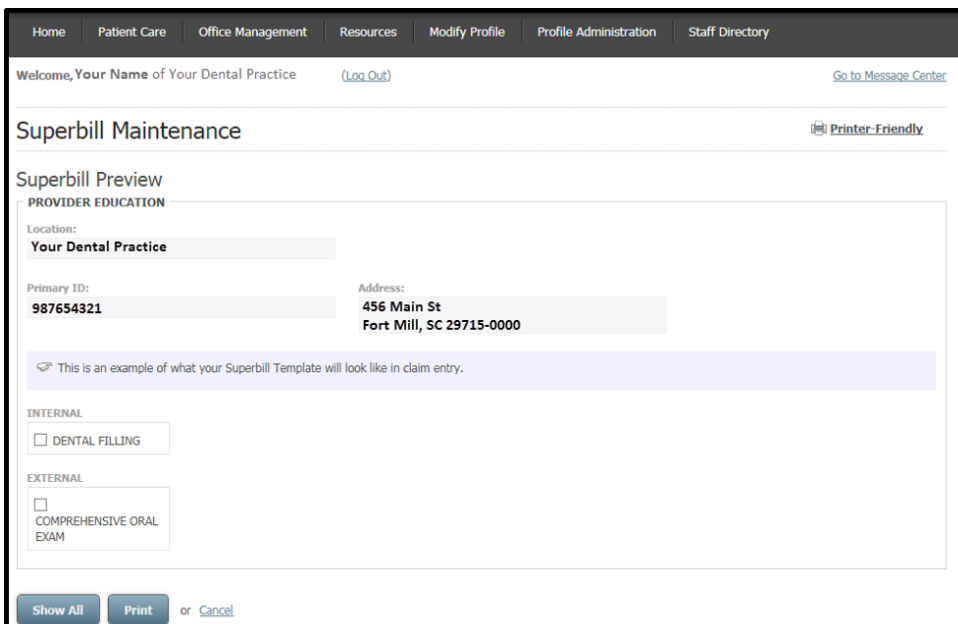
Superbill Selection

You can either create a new Superbill or select a Superbill to preview, edit, copy or delete.

[Create a New Superbill](#)

Name	Tools
PROVIDER EDUCATION	Edit Copy Delete

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



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

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

Superbill Maintenance

[Printer-Friendly](#)

Superbill Preview

PROVIDER EDUCATION

Location: **Your Dental Practice**

Primary ID: **987654321** Address: **456 Main St
Fort Mill, SC 29715-0000**

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

INTERNAL

DENTAL FILLING

EXTERNAL

COMPREHENSIVE ORAL EXAM

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

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

The screenshot shows a web application interface for 'Superbill Maintenance'. At the top, there is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar, a welcome message reads 'Welcome, Your Name of Your Dental Practice' with a '(Log Out)' link and a 'Go to Message Center' link. The main heading is 'Superbill Maintenance' with a 'Printer-Friendly' icon. The sub-heading is 'PROVIDER EDUCATION Superbill Data for 987654321 - YOUR DENTAL PRACTICE'. A message states: 'Here is a list of all Procedure Codes that have ever been in this Superbill.' A note below says: 'Please note: When you move a Procedure Code up or down in a category, the date of the move will appear in the Deleted column.' A table follows with columns: Code, Minutes, Charges, Category, Description, Display Dates (From, To), and Deleted. The table contains two rows of data. At the bottom, there are 'Print' and 'Cancel' buttons.

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

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

The screenshot shows the 'Create Superbill' form in the same web application. The navigation bar and welcome message are identical to the previous screenshot. The main heading is 'Superbill Maintenance' with a 'Printer-Friendly' icon. The sub-heading is 'Create Superbill'. A red asterisk and the word 'Required' are positioned to the right of the form. The form has a label '* Superbill Name:' followed by a text input field. Below the input field, there is a list of categories: 'Diagnostic, Preventive, Restorative, Endodontics, Prosthodontics, etc.'. At the bottom, there are 'Continue' and 'Cancel' buttons.

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

The screenshot shows the 'Superbill Maintenance' interface. At the top, there is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar, a welcome message reads 'Welcome, Your Name of Your Dental Practice' with a '(Log Out)' link and a 'Go to Message Center' link. The main heading is 'Superbill Maintenance' with a 'Printer-Friendly' icon. The 'Create Superbill' section includes a red asterisk and the word 'Required' next to the 'Superbill Name' field, which contains 'PROVIDER EDUCATION'. Below this, there is a list of categories: 'Diagnostic, Preventive, Restorative, Endodontics, Prosthodontics, etc.'. The 'Location' field is 'Your Dental Practice' and the 'Primary ID' is '987654321'. The 'Address' field contains '456 Main St, Fort Mill, SC 29715-0000'. The 'Number of Columns' section has four options: 'One Column', 'Two Columns', 'Three Columns', and 'Four Columns'. The 'Superbill Layout' section has a note: 'You can control what content information you see by changing the date.' Below this, there is a 'Display Begin Date' field with '04/12/2017' and a dropdown menu, and 'Actions' buttons for 'Reload Categories' and 'Reset Date to Today'. The 'Column 1' section has an 'Add Category' button. At the bottom, there are 'Save Superbill' and 'Cancel' buttons.

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

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

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

The screenshot shows the 'Superbill Maintenance' interface. At the top, there is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below this is a user greeting: 'Welcome, Your Name of Your Dental Practice' with a 'Log Out' link and a 'Go to Message Center' link. The main heading is 'Superbill Maintenance' with a 'Printer-Friendly' icon. The 'Create Superbill' section includes a required field for 'Superbill Name' (PROVIDER EDUCATION) with a list of categories: Diagnostic, Preventive, Restorative, Endodontics, Prosthodontics, etc. Below are fields for 'Location' (Your Dental Practice) and 'Primary ID' (987654321). The 'Address' field contains '456 Main St, Fort Mill, SC 29715-0000'. A 'Number of Columns' section offers four options: One Column, Two Columns, Three Columns, and Four Columns. The 'Superbill Layout' section features an information icon and the text 'You can control what content information you see by changing the date.' It includes a 'Display Begin Date' field (04/12/2017) and 'Actions' buttons for 'Reload Categories' and 'Reset Date to Today'. Under 'Column 1', there are two rows: 'Internal' and 'External', each with an 'Add Procedure' button and an 'Actions' dropdown menu. At the bottom, there is a 'Save Superbill' button and a 'Cancel' link.

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

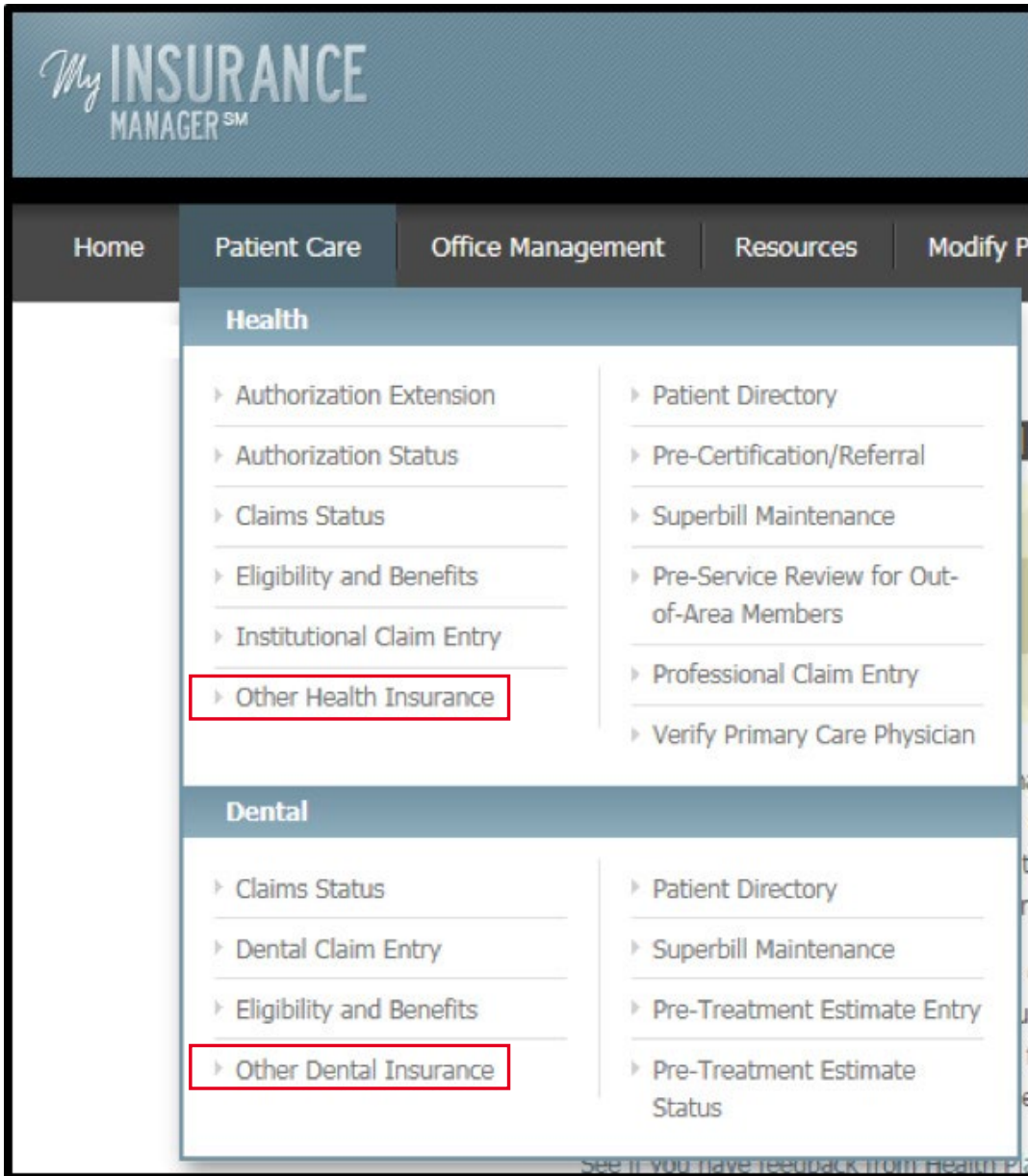
The screenshot shows the 'Add Procedure' dialog box. It has a close button (X) in the top right corner. The fields include: 'Procedure Code' with a search icon and a magnifying glass icon; 'Charges' with a dollar sign prefix; 'Add to Category' with a dropdown menu set to 'Internal'; 'Description' with a text input field; 'Display From' and 'Display To' with date pickers (mm/dd/yyyy) and a calendar icon, with 'Display To' set to 12/31/9999. At the bottom, there are three buttons: 'Save', 'Save and Add Another', and 'Cancel'.

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

The screenshot shows the 'Superbill Maintenance' interface. At the top, there is a navigation bar with links: Home, Patient Care, Office Management, Resources, Modify Profile, Profile Administration, and Staff Directory. Below the navigation bar, a welcome message reads 'Welcome, Your Name of Your Dental Practice' with a '(Log Out)' link and a 'Go to Message Center' link. The main heading is 'Superbill Maintenance' with a 'Printer-Friendly' icon. The section is titled 'Create Superbill' with a '* Required' indicator. The form includes: 'Superbill Name' field with 'PROVIDER EDUCATION' and a list of categories (Diagnostic, Preventive, Restorative, Endodontics, Prosthodontics, etc.); 'Location' field with 'Your Dental Practice' and 'Primary ID' field with '987654321'; 'Address' field with '456 Main St' and 'Fort Mill, SC 29715-0000'; 'Number of Columns' section with four options: One Column, Two Columns, Three Columns, and Four Columns; 'Superbill Layout' section with a tip: 'You can control what content information you see by changing the date.'; 'Display Begin Date' field with '04/12/2017' and a calendar icon, and 'Actions' buttons for 'Reload Categories' and 'Reset Date to Today'; 'Column 1' section with 'Internal' and 'External' categories, each containing a procedure (Dental filling and comprehensive oral exam) and an 'Add Procedure' button; and 'Add Category' button. At the bottom, there are 'Save Superbill' and 'Cancel' buttons.

Coordination of Benefits

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



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

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

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

The screenshot shows the results page for 'Other Health Insurance'. The navigation bar and welcome message are identical to the previous screenshot. The main heading is 'Other Health Insurance' with a 'Printer-Friendly' icon. The results are displayed in two columns. The left column, titled 'Insurance', shows: Plan Name: BlueCross BlueShield Plans; Member ID: ZCZ065922516805; Member's Name: MICHAEL TESTING. Below this is a 'Change Patient' button. The right column, titled 'Coverage Information', shows: Status: Our records show no Other Health Insurance coverage information on file. Below this is a table with two columns: Last Update and Expires. The Last Update is 04/11/2017 and the Expires is 04/11/2018. Below the table is a section titled 'Medicare' with Status: Our records show no Medicare coverage information on file. At the bottom, there is a button for 'Ask Provider Services' and a link for 'Back'.

For Dental Providers

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

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

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

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