Welcome to the New iLinkBlue!

Blue Cross and Blue Shield of Louisiana’s iLinkBlue has received an improved redesign. This iLinkBlue News will take you through each aspect of the new site and highlight some of the significant redesign enhancements.

The newly designed iLinkBlue is under a higher level of security to ensure your information remains safe. Users will only be able to use iLinkBlue if granted access by a security administrative representative.

One enhancement is that we can now support more Internet browsers. You may use Internet Explorer 10 or 11, Safari, Google Chrome and Microsoft Firefox to view the new iLinkBlue.

You will access the new iLinkBlue using the same URL www.bcbsla.com/ilinkblue.

The improved secure online tool is designed to quickly complete important functions such as eligibility and coverage verification, claims filing and review, and payment queries and transactions.

### iLinkBlue Features

With iLinkBlue, providers have access to features such as:

- Coverage information
- Claims entry
- Claims research
- Allowable charges
- Authorizations
- Remittance advice/electronic funds transfer (EFT)
- BlueCard® (out-of-area network)
- Manuals
- Medical policies
- Medical code editing
- Estimated treatment costs
- and MORE!
Access to the redesigned iLinkBlue uses the same URL of www.bcbsla.com/iLinkBlue. Logging in is similar to the process you are already accustomed to with the old iLinkBlue.

When iLinkBlue users log in for the first time, they must enter their username (the email address the administrative representative used to set up the user) and click on the “Forgot/Reset Password” button to obtain a new password. A temporary password will be emailed to you. Once logged in using your temporary password, you will be prompted to set up a permanent password. User passwords expire every 60 days.

Login information from the previous iLinkBlue (including usernames and passwords) will not work in the new version.

An administrative representative is the person at your organization who is registered with Blue Cross to grant employees access to our secure online portals, such as iLinkBlue, BCBSLA Authorizations and Behavioral Health Authorizations. They serve as the key contact for their iLinkBlue users.

Contact your administrative representative when you:

• Need access to iLinkBlue
• Need access to the Authorizations Portal
• Have problems logging into iLinkBlue

If your organization does not have an administrative representative registered with us, please fill out and submit the Administrative Representative Registration Packet, which can be found on our website, www.bcbsla.com/providers.
Welcome to the Home Page

The first thing you will notice about the new iLinkBlue is the redesigned home page. The screenshot below is the new iLinkBlue home page. It has a new navigation menu and shortcuts to frequently used items.

Top Navigation

One change you will notice is that the old menu bar is gone and in its place is a new top navigation menu that streamlines all of the iLinkBlue functions under six navigation menus. When you click a selection, a sub-menu appears that includes relevant features and options.

Message Board

This area contains up-to-the-minute posts for upcoming events, new features, system outages, holiday notices and other important bulletins.

Resources

This area contains quick links to all of our provider resources, including manuals, speed guides, tidbits, etc. This bottom footer will be on many pages throughout iLinkBlue.

Quick Links

These two areas contain quick links to the four most used items on iLinkBlue. We also provide quick access to other commonly used sites.
On the next few pages, we will walk you through the new menu and sub-menu options. Many of the previous iLinkBlue functions are available in the redesigned tool, they are just more streamlined and consolidated. The new look and feel offers a user-friendly navigation that allows easy access to the tools provided.

Under the **Coverage** menu option, there are two sub-menus containing links for **BCBSLA Members** and **BlueCard - Out of Area Members**.

### BCBSLA Members

Use this section to view coverage status, coordination of benefits (COB) and benefit information for BCBSLA members.

Under **Coverage Information**, you can search for a member’s coverage information by entering a BCBSLA or FEP member ID number.

If you do not have the member ID number, you may also search using the member’s Social Security number. iLinkBlue will return search results with the member ID number.

### BlueCard - Out of Area Members

Use this section for eligibility inquiries for out-of-area Blue Plan members. Each query submits an electronic request to the member’s Blue plan. Though not immediate, out-of-area responses are transmitted back usually within less than a minute.
After you select a member from the coverage information search, the Coverage Information screen will display. This screen provides information on who is covered on the member’s policy, including the effective date and the status of the contract (active, pended, cancelled).

You may click the Summary button to view the member’s Medical Benefits Summary (a detailed health benefit summary that includes deductible and out-of-pocket amounts that have been met) and COB (coordination of benefits) information to verify if the member has coverage with another carrier.

**BCBSLA Members (cont.)**

The Affordable Care Act (ACA) allows eligible customers to receive an advanced premium tax credit (APTC) for the purpose of lowering the customer’s premium out-of-pocket costs.

On the member’s Coverage Information screen, there is a box to the left that shows the member’s APTC premium status, including any grace period beginning and ending dates. The APTC Extended Grace Period Notice can also be printed for your records.

**APTC Grace Periods**

The Affordable Care Act (ACA) allows eligible customers to receive an advanced premium tax credit (APTC) for the purpose of lowering the customer’s premium out-of-pocket costs.

On the member’s Coverage Information screen, there is a box to the left that shows the member’s APTC premium status, including any grace period beginning and ending dates. The APTC Extended Grace Period Notice can also be printed for your records.
Under the *Claims* menu option, there are four sub-menus containing multiple links categorized under *Claims Research*, *Medical Code Editing*, *BlueCard - Out of Area Claims Status* and *Claims Entry & Reports*.

### Claims Research

Use this section to research BCBSLA, FEP and Out of Area claims that were submitted to BCBSLA for processing. In addition to checking the status of a claim (screenshot below), you can submit an action request inquiry, which allows you to electronically communicate with Blue Cross on specific claims.

### BlueCard - Out of Area Claims Status

Use this section for claims status inquiries for out-of-area Blue Plan members. Each query submits an electronic request to the member’s Blue plan. Though not immediate, out-of-area responses are transmitted back usually within less than a minute.

### Medical Code Editing

*Medical Code Editing* is home to the Clear Claim Connection (C3) tool. You can use C3 to evaluate code combinations and see if a CPT®, Modifier or CPT/Modifier combination is valid for the date of service entered on the inquiry.

*CPT® only copyright 2017 American Medical Association. All rights reserved.*
Under the Payments menu option, there are two sub-menus containing links for Payment Information and Allowables.

Payment Information

This is where you can access Blue Cross payment information.

You may view, print or save your payment registers using the Payment Registers selection. If you have access to multiple NPIs, registers will be available for each. Reports appear in order of least current to most current. Separate reports are published for each applicable line of business; Blue Cross, HMO, OGB and FEP.

The EFT Notifications menu item allows you to access EFT Notifications. If you have access to multiple NPIs, EFT notifications will be available for each.

Two years of Payment Registers and EFT notifications are available in iLinkBlue. Notifications for the current week appear at the bottom of the screen.

www.bcbsla.com/iLinkBlue
Use the Allowables sub-menu to find your allowable charges.

Facility providers can view and print PDF listings for the two most recent Facility Drug Allowable Charge updates under the Facility Allowables option.

To look up a professional allowable charge, use the tool in the Professional Allowable Search. You can search by network, date of service, individual code or code ranges. When searching for an allowable charge make sure to enter the date of service, appropriate network and the code. The date of service is important because you can search current, past or future (when available) allowable charges.

**Did You Know...**

You can research allowable charges for multiple codes at once in the Professional Allowable Search tool. In the search box, enter only the first few numbers of the code followed by an asterisk. The example chart (at right) shows how to search for multiple codes.
The Clinical Resources menu option is where you will find all information related to authorizations. There are two sub-menus with links for Authorizations for BCBSLA Members and Authorizations for Out of Area Members.

Authorizations - BCBSLA Members and Authorizations - Out of Area Members

There are Authorization Guidelines tools for both BCBSLA and Out of Area members. Each tool works essentially the same. It allows providers to research and view authorization requirements for BCBSLA or BlueCard (out-of-area) members. Simply enter the member's alpha prefix to access authorization requirements.
Authorsizations - BCBSLA Members

This section has the tools you need to submit authorizations for BCBSLA members under this sub-menu.

The BCBSLA Authorizations application allows network providers to submit and research authorizations as well as provide clinical information for BCBSLA members. The BCBSLA Authorizations application is available to select network providers and only with security access from your administrative representative.

Behavioral health providers must use the Webpass Portal application, located in the Behavioral Health Authorizations link, to submit authorization requests for behavioral services. This application is a web-based tool offered by New Directions.

The AIM Specialty Health Authorizations application allows providers to submit and receive pre-authorizations for certain outpatient high-tech diagnostic services over the web on a real-time basis.

Authorsizations - Out of Area Members

Under this sub-menu you will find Out of Area (Pre Service Review - EPA), which is an application to research pre-service information for BlueCard® (out-of-area) members. It is designed to allow Blue Cross and Blue Shield of Louisiana network providers access to pre-service information offered by other Blue Plans. The application uses the alpha prefix associated with the member’s ID number (the first three positions of the member ID) to route you to the member’s Blue Plan. Each Blue Plan uses its landing page to communicate its pre-service capabilities, processes and requirements.

You can also view services that require an authorization for BlueCard members and view their Blue plan’s medical policies, which we will expand on in the section below.

Authorsizations - BCBSLA Members and Authorizations - Out of Area Members

Medical policies are available in iLinkBlue for BCBSLA and Out of Area members. Using the Medical Policy menu options, you may view medical policies.

BCBSLA members

You can easily research medical policies for BCBSLA members using an index that lists policies in alphabetical order. Each month, we add newly approved and/or revised medical policies to iLinkBlue. Because medical technology is constantly evolving, our medical policies are regularly reviewed, often resulting in updates or revisions, so check iLinkBlue frequently for the latest and most current policies.

BlueCard (out-of-area) members

To view medical policies for BlueCard (out-of-area) members, you must know the member’s alpha prefix. After entering the member’s alpha prefix, you will be routed to the member’s Blue Plan to access their medical policy information. The format for researching medical policies varies from Blue Plan to Blue Plan.
Blue Cross and Blue Shield Association offers an estimated treatment cost tool that allows members to view information about the value you bring to the healthcare community, enabling them to be more active in managing their own healthcare choices.

Twice a year (spring and fall), we update your provider cost data. When this occurs, we give you 30 days from the date of notice to review your cost data and request any reconsiderations, as needed.

The View Reports option is where you go to view the most recent report that contains the cost ranges calculated for your facility or practicing location, as well as an overview of the methodology used to develop these cost ranges. To submit a reconsideration, click on the specific treatment description in question.
Under the **Resources** menu option, there is a sub-menu of links to provider resources.

### Resources

The links under the **Resources** tab link to our various provider resources. These resources are designated to support you as a network provider.

Our most utilized resources are our provider manuals. You can access these manuals by clicking on the **Manuals** link.

The **Member Provider & Procedure Manual** (our facility manual) is located only in iLinkBlue.

The **Blue Cross Professional 1500 Manual** provides instructions on how to submit a 1500 claim form through iLinkBlue.

The **Education on Demand** link under Other Manuals brings you to our Provider website ([www.bcbsla.com/providers](http://www.bcbsla.com/providers)). There you will have access to the Professional Provider, HMO Louisiana, Dental, BlueCard® and other manuals.

**Speed Guides** are brief guides to our networks or special programs. They are a quick reference guide for you to use to find the information you need about a specific network.

If you have a question or need information about our current Blue Cross business processes or practices, you can utilize our **Tidbit** section. Each tidbit is focused on a single topic in order to help better serve you.

You can access our online Authorizations Portal tutorials when you click on the **Tutorials** link. These tutorials help walk you through submitting and authorizations through our portals.

**Drug Alerts** are educational sheets for providers on high-cost drugs and the alternatives. These alerts are designed to help reduce prescription costs for our members.
**iLinkBlue Crosswalk Guide**

Use this guide as a tool to help you locate the most used functions in the new iLinkBlue.

### Authorizations

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<tr>
<th>Authorizations</th>
<th>Description</th>
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### Claims

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</tr>
<tr>
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<td>Claims &gt; Claims Entry &amp; Reports &gt; Blue Cross Professional Claims Entry (1500)</td>
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<td>Coming Soon!</td>
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### Coverage/Eligibility

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<td>Effective Dates of Coverage</td>
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<td>Coverage - Out of Area</td>
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### Payment

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<tr>
<td>EFT Notifications</td>
<td>Payment &gt; Payment Information &gt; EFT Notifications</td>
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iLinkBlue News

*iLinkBlue News* is a special edition newsletter for Blue Cross and Blue Shield of Louisiana network providers. We encourage you to share this newsletter with your staff.

The content in this newsletter is for informational purposes only. Diagnosis, treatment recommendations and the provision of medical care services for Blue Cross members are the responsibilities of healthcare professionals and facility providers.

View this newsletter online at www.bcbsla.com/providers, then click on News.

Important Contact Information

**Authorization**
See member's ID card

**BlueCard® Eligibility**
1-800-676-BLUE (1-800-676-2583)

**EDI Clearinghouse**
(225) 291-4334
EDICH@bcbsla.com

**FEP**
1-800-272-3029

**iLinkBlue & EDI**
1-800-216-BLUE (1-800-216-2583)*
iLinkBlue.ProviderInfo@bcbsla.com

**Network Administration**
1-800-716-2299 Fax: (225) 297-2750
network.administration@bcbsla.com

**Provider Services Call Center**
1-800-922-8866

**Provider Identity Management Team**
1-800-716-2299 (option 5)
ProviderIdentMgmt@bcbsla.com

**Claims Filing Address**
P.O. Box 98029
Baton Rouge, LA 70898

*Listen carefully to menu options, as they have been updated*

For the latest provider information, visit us online at www.BCBSLA.com/providers.

Please share this newsletter with your office staff. An electronic copy of this newsletter can be found on iLinkBlue or on our website (www.bcbsla.com/providers >News).