BlueCross BlueShield of South Carolina and
BlueChoice® HealthPlan of South Carolina

Independent licensees of the Blue Cross and Blue Shield Association

What You Need to Know About Claims Attachments

2016 Edition

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In 2015, BlueCross BlueShield of South Carolina and BlueChoice HealthPlan introduced a feature that allows you to upload clinical information directly into our websites, www.SouthCarolinaBlues.com and www.BlueChoiceSC.com. This feature was first made available for pending precertifications you have requested through My Insurance Manager ^{SM} as well as processed claims. This feature is now available for processed claims that may require documentation. This feature cannot be used for claims that have not completed processing.

Using this feature expedites the review process for denied claims or services within claims. Once you've uploaded the documentation, it's automatically routed to the appropriate area for review.

Before we review this step-by-step guide that will help you navigate through this new feature, let's discuss some requirements to help make the attachment process successful.

1. We only accept .PDF documents that were created in Adobe Acrobat version 1.4 or higher. Also, we only accept documents that are a maximum of 30 MB each.
2. We can accept up to three attachments per request.
3. Please review the document(s) you attach and ensure it is the accurate documentation for the claim.
4. This feature can be used for these plans:
    a. BlueCross BlueShield of South Carolina
    b. BlueChoice HealthPlan of South Carolina
    c. Federal Employee Program (FEP)
    d. State Health Plan (SHP)
    e. Health Insurance Marketplace (Exchanges) including BlueEssentials^{SM} and Blue Option^{SM}
    f. Out-of-state (BlueCard®)

Please note: This guide is for training purposes only. This is not a guarantee of payment. Non-payment of premiums and other contractual limitations may result in denial of benefits or refunds.

Providers can upload attachments for claims that require additional documentation through the secure provider portal, My Insurance Manager. Once you've logged in, select the **Claim Status** option in the Patient Care menu.
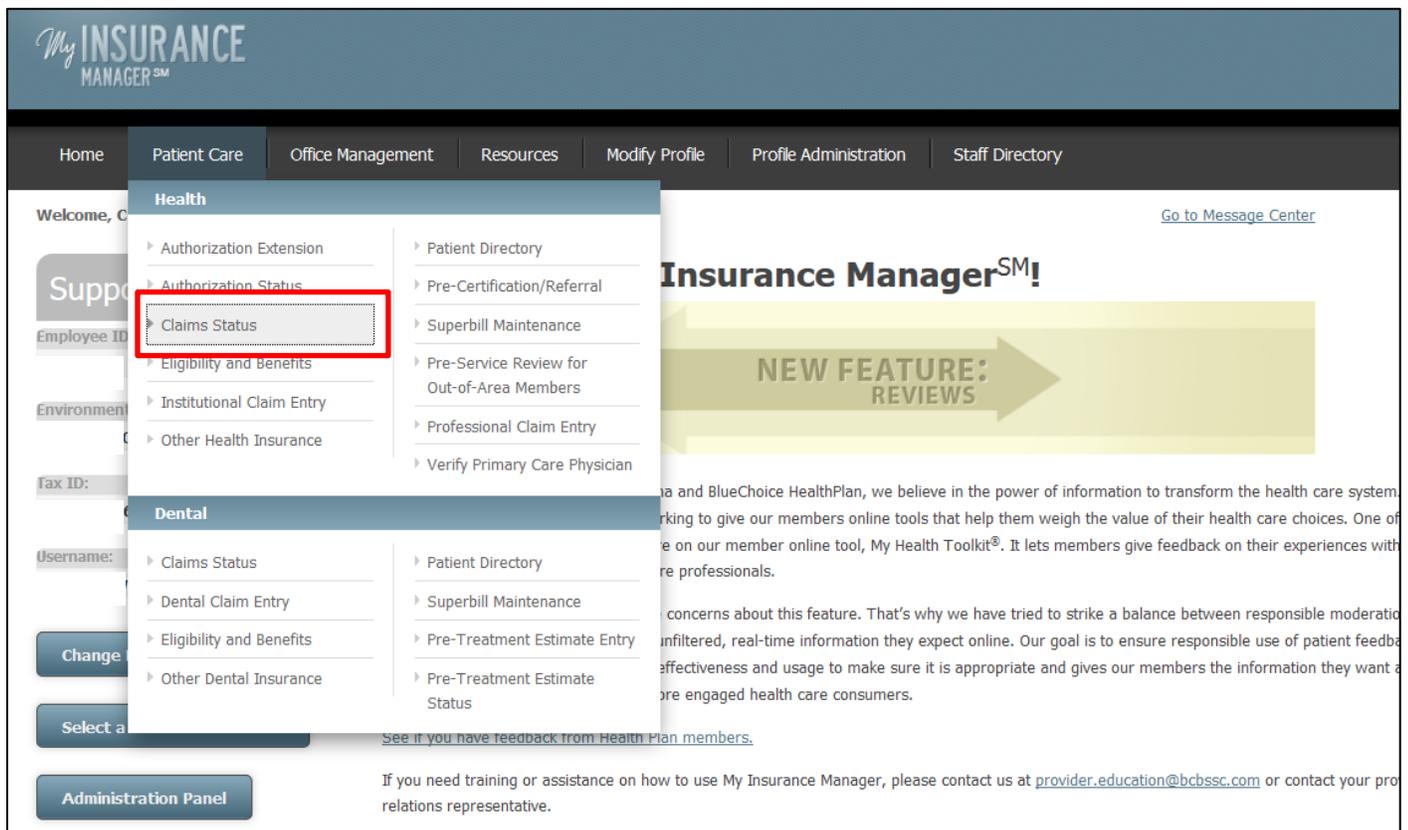

After completing the **Claim Status** fields (either by entering patient information or a specific claim number), select **Continue**.

The Claim Status Detail page will reflect whether additional documentation may be needed as well as what type of documentation may be required. You will not see the Attachments option unless the claim (or service within the claim) requires documentation.

On the Claim Status Detail page, you'll see what type of information is needed based on the claim status:

    a. Accident Questionnaire
    b. Certificate of Medical Necessity for Durable Medical Equipment
    c. Medical Record
    d. Other Health Insurance
    e. Primary Carrier EOB
    f. Provider Reconsideration
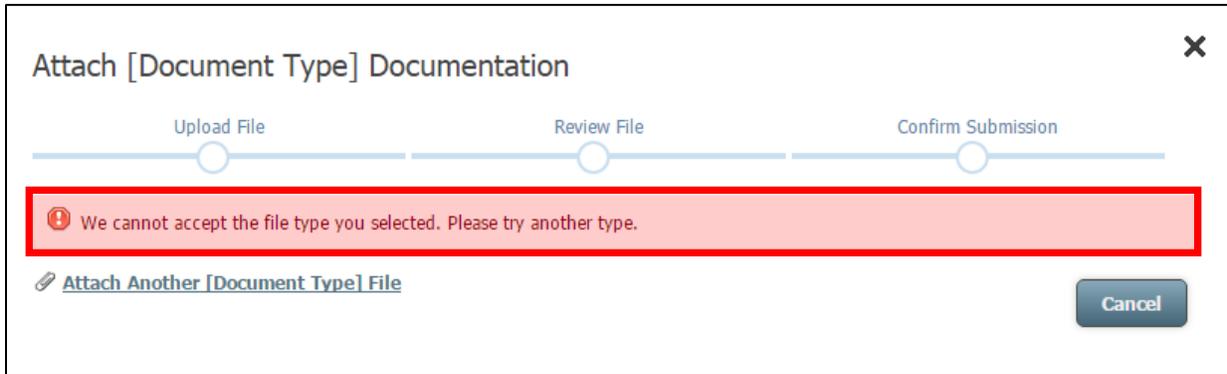
Select the **Attach Documentation** option to continue.
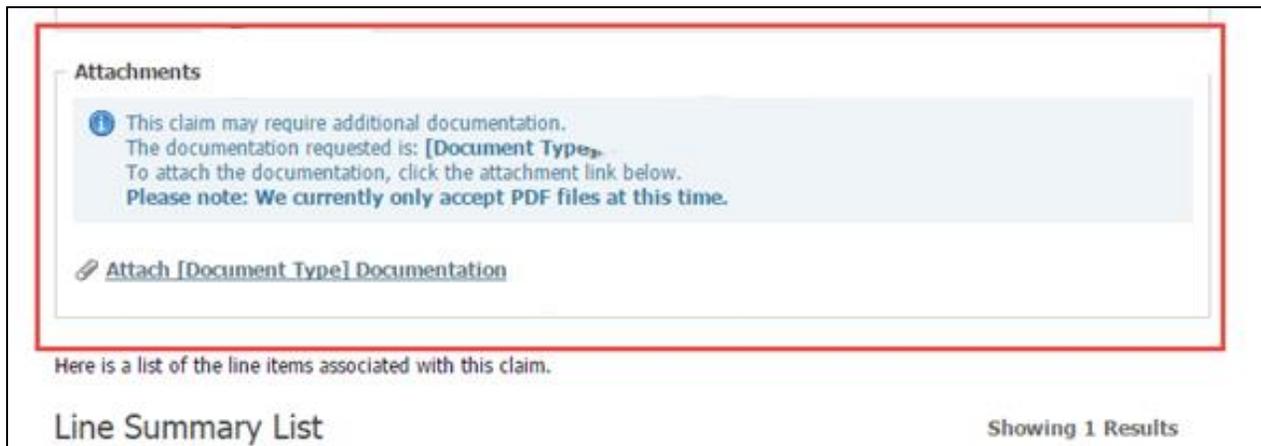
Next, look for and then choose the document you want to attach. Once the appropriate document is selected, select **Open**.
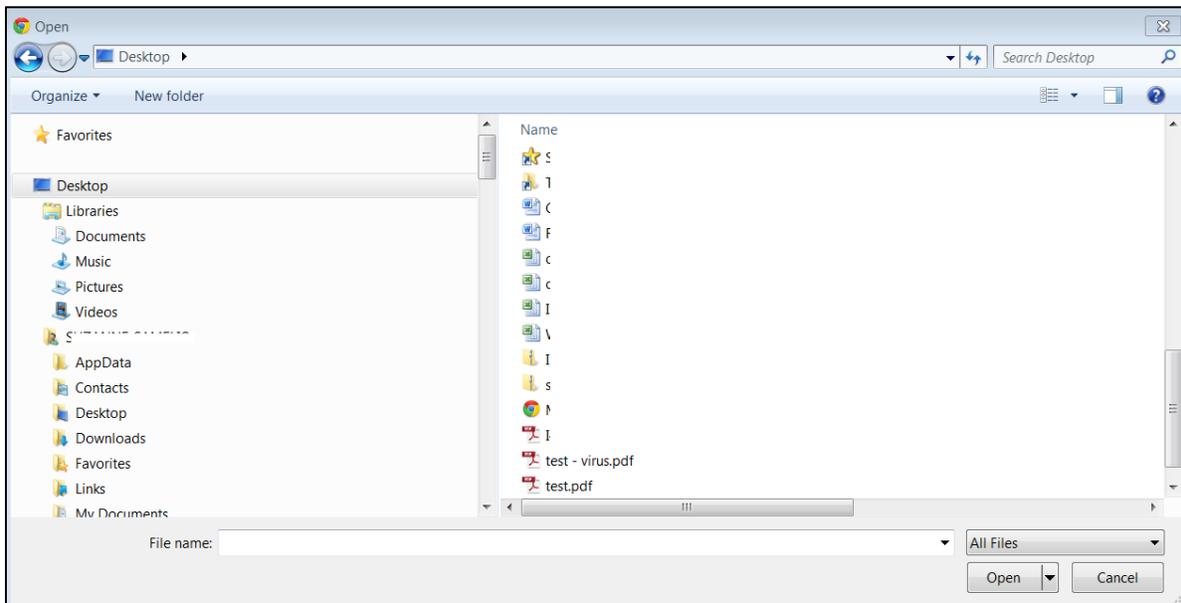
If the file is invalid (perhaps it is not a PDF file or it exceeds 30MB), then you will receive this message:


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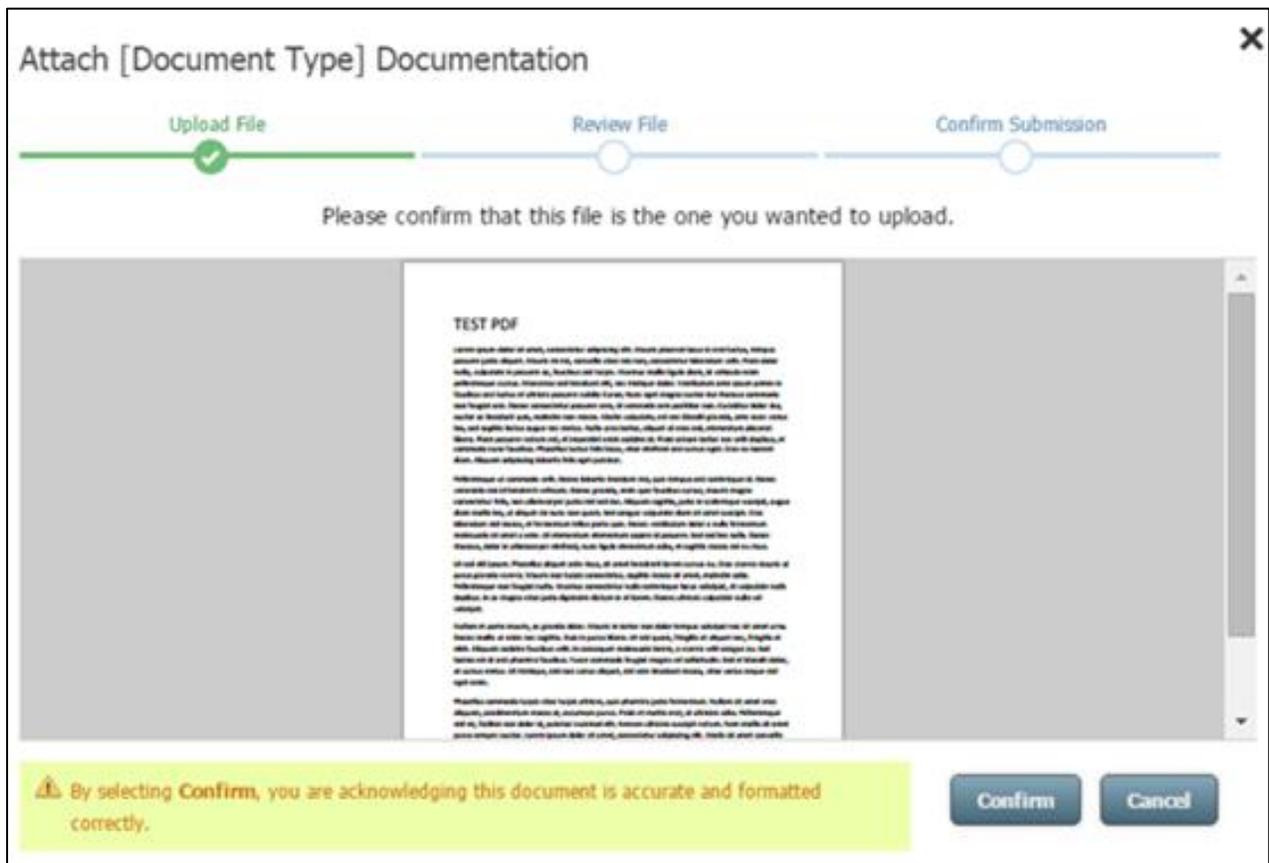

Please review the document you have uploaded in the Attach Documentation screen and verify the document you want to attach is the one associated with the claim for the member. If the document you have attached contains more than one page, you can use the scroll option to view additional pages.

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.
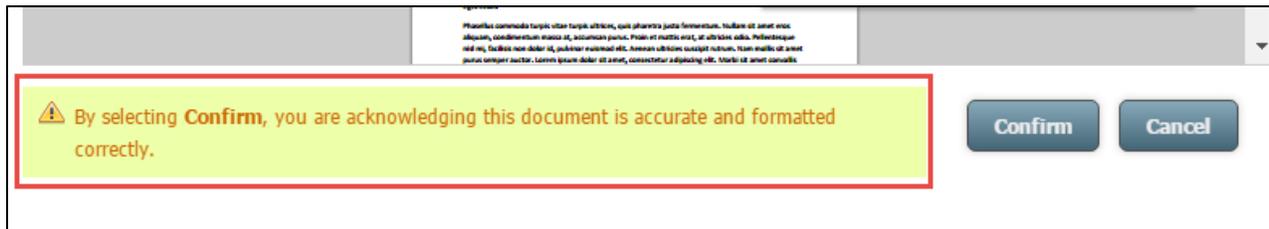

If you select **Cancel**, you'll see the option to either **Cancel Upload** or to **Return to Review**.

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.
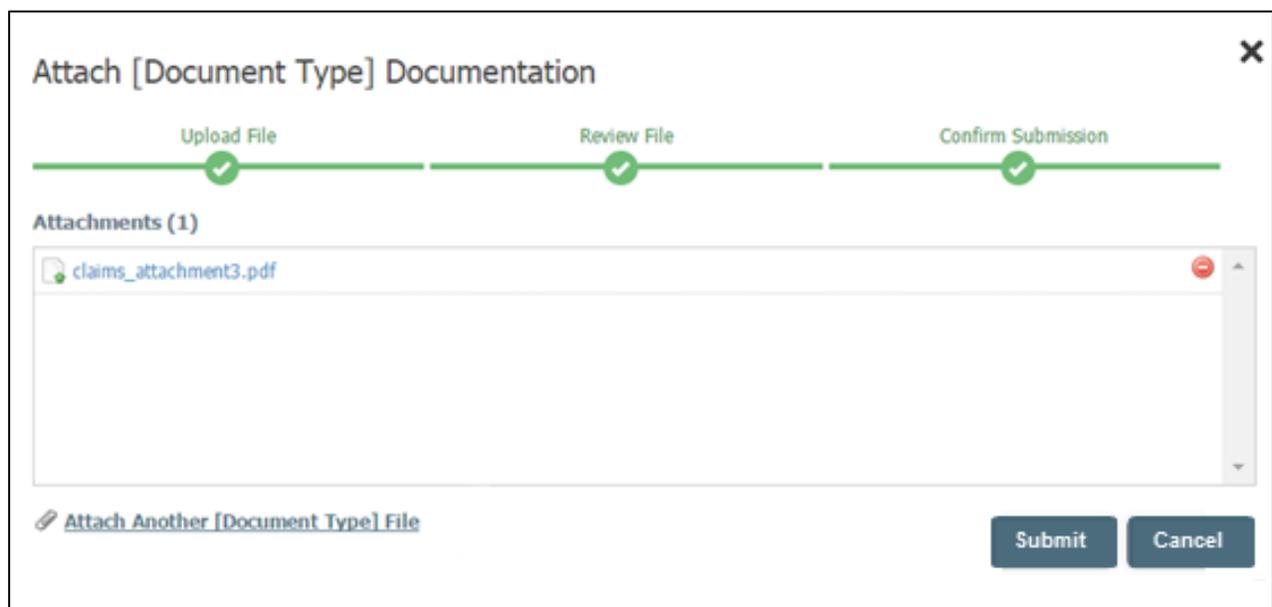

Select **Attach Another File** at the bottom of the screen to attach another document. Each new document you attach will appear in the list of attachments here on the Attach Documentation screen.

Select **Cancel** if you do not want to attach any documents. Select **Ok** to proceed with your request to cancel the attachment or **Cancel** to return back to the Attach Documentation screen.
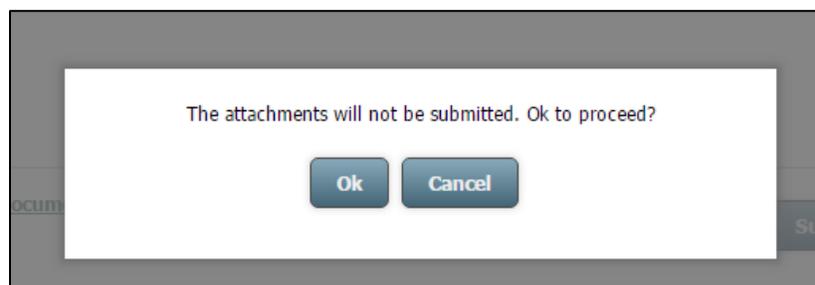
To remove a document you attach, select the red button.
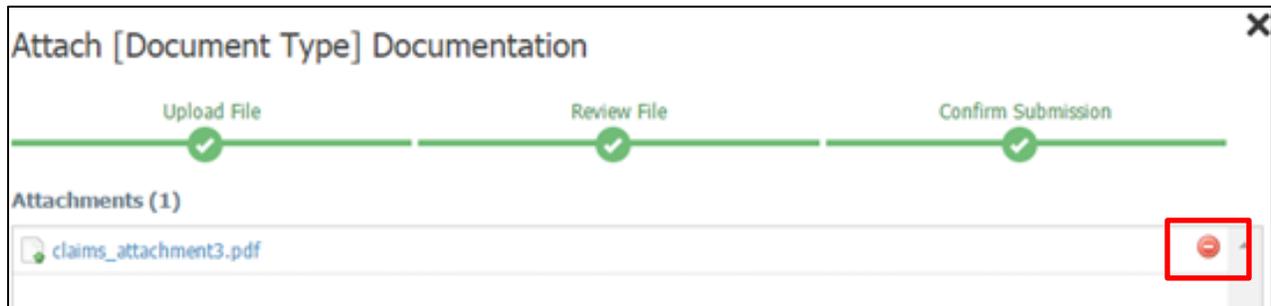
If you need to remove any document, a box will display asking if you wish to delete the selected document. If you select **Yes**, then the document you selected will be removed. Once the document is removed, the new number of attachments will reflect on the Attach Documentation screen. If you select **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."**
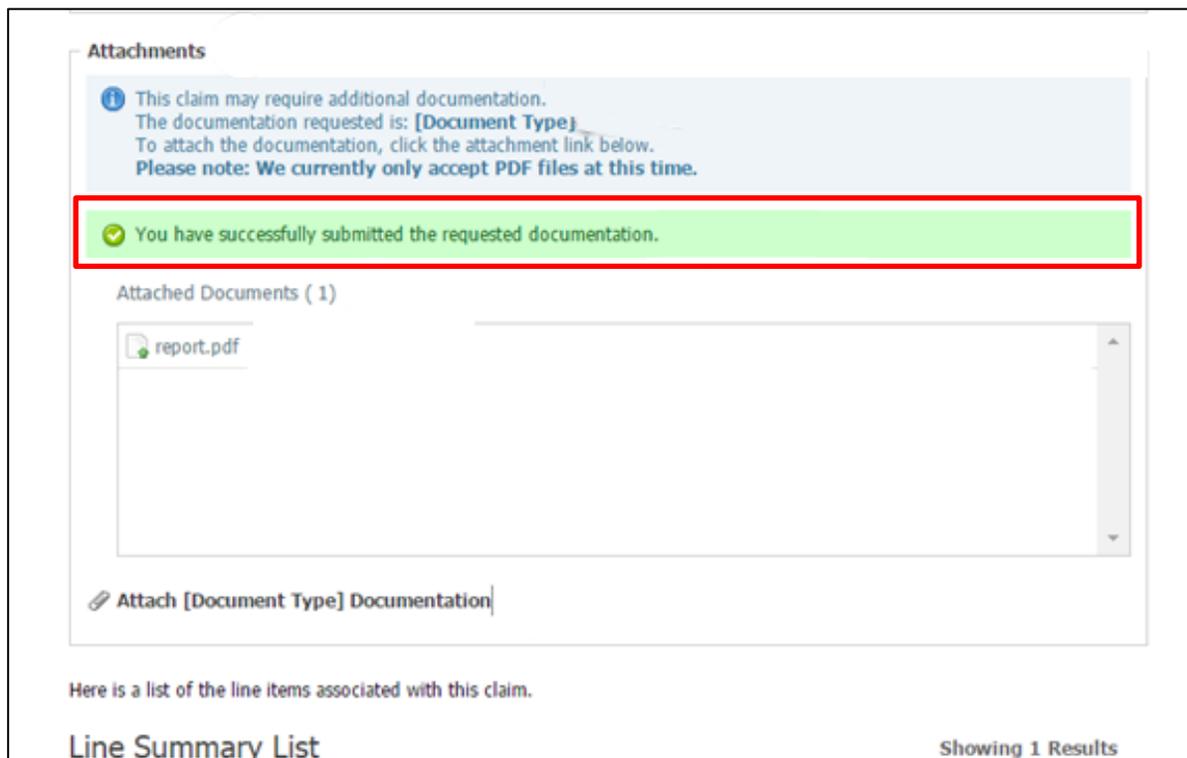
Once the documentation has been received, it will be routed to the appropriate department for review and adjudication. You will not receive a confirmation of receipt or a status after you've successfully submitted the documentation. You can print the Claim Status Detail page for your records.