



# Coordinator's Guide



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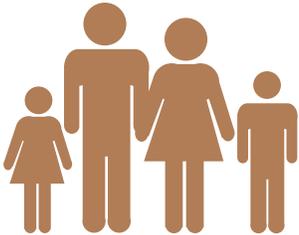
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Thank you for choosing BlueCross BlueShield of South Carolina as your group health insurance provider. We are happy to have you as part of our BlueCross family. As a member, you have access to:

- Nationally recognized customer service
- BlueCard Worldwide
- Easy online billing
- Online membership tools and reporting

This Coordinator's Guide provides valuable information and instructions to assist you in communicating with us.

If you have any questions about information, please feel free to contact us using our contact information at the end of this guide.

## Benefits of Being Blue

### MEMBER DISCOUNTS

Our members have access to additional discounts just by being BlueCross BlueShield of South Carolina members. Here are some of the valuable discounts available to our groups and members:

- Fitness and Wellness Centers, including My Gym Children's Fitness Center
- TruHearing Digital Hearing Aids
- QualSight Lasik
- Jenny Craig
- Cosmetic and Restorative Dentistry
- Vitamins and Supplements
- Allergy Relief

You can find complete information about all our valuable discounts and added services at [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com) under the Member Perks tab.

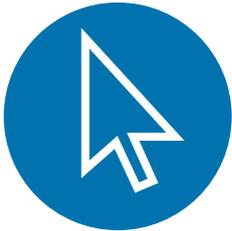


### ONLINE MEMBER TOOLS

Do your members want to know if your plan covers a specific procedure? Do your members need information about their health and dental benefits? Maybe your members just want to check claims and see if we've paid their doctors. You can find all this and more with My Health Toolkit®. It gives members safe and fast access to their benefits information. Members can:

- View claims status and an Explanation of Benefits (EOB).
- Read about benefits and coverage information and check eligibility.
- Verify authorization status for a particular claim.
- Request a new ID card.
- Review costs for a procedure through the Treatment Cost Estimator.
- Locate a convenient doctor or hospital.
- Go paperless.
- Coordinate any other health insurance.

To get started, have your members visit our website at [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com) and use their member ID number to register.



## YOUR NAVIGATOR<sup>SM</sup> FOR HEALTH MANAGEMENT

At BlueCross, we take extra steps toward improving the health of your workforce through our comprehensive health management programs. Using a 360° approach, we offer wellness, prevention and treatment programs to your employees dealing with an array of chronic conditions. All of these programs are offered under the name Your Navigator for Health Management.

There are programs for members that focus on the early detection of illness and the prevention of disease. Members with chronic conditions also receive more targeted educational information and contact with our highly trained health specialists. Our sickest members, or those with intensive needs, receive care coordination and the support of our caring team of nurses.

Members are automatically enrolled in the appropriate programs based upon claims history, pharmacy spending and physician refer. Members can self-refer to any of these programs at any time.

Through Your Navigator for Health Management, we offer programs that cover the spectrum of health and disease in four categories:

### PREVENTION AND WELLNESS

- Children's Health
- Cholesterol Improvement
- Men's Health
- Before Baby (preconception)
- Pre-Hypertension
- Tobacco Cessation
- Weight Management
- Women's Health
- WalkingWorks<sup>SM</sup> for South Carolina Schools

### CONDITION MANAGEMENT

- Alcohol Management
- Back Care
- Healthy and Active Kids (childhood obesity)
- High Cholesterol
- High Blood Pressure (hypertension)
- Irritable Bowel Syndrome
- Maternity
- Migraine (adult and pediatric)
- Metabolic Health (pre-diabetes)
- Neonatal Intensive Care Unit (NICU) Case Management

### DISEASE MANAGEMENT

- Asthma
- Chronic Obstructive Pulmonary Disease (COPD)
- Depression
- Diabetes
- Heart Disease
- Heart Failure

### CRITICAL HEALTH MANAGEMENT

- Care Calls (hospital-to-home transition)
- Case Management (for conditions including cancer, severe trauma, multiple chronic conditions, complex wounds, weight loss surgery, Hepatitis C, traumatic brain injury, rheumatoid arthritis, transplants and neuro-muscular diseases)
- Care Guardian (emergency room diversion management)
- Chronic Kidney Disease

*Note: These programs are available for Business BlueEssentials<sup>SM</sup> members at this time. If you're interested in looking at an alternative plan, please contact your agent.*

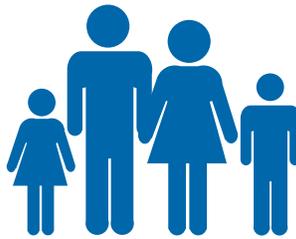
# Member Enrollment

## TYPES OF MEMBERSHIP

There are four types of coverage available:



Single



Family



Employee/Spouse



Employee/Child(ren)

### NOTE:

To be considered actively at work, the employee:

1. Must have begun and not be absent from work because of leave of absence or temporary layoff, unless the absence is due to a health status-related factor other than substance abuse or chemical dependency.
2. Must be performing the normal duties of his or her occupation at one of the employer's places of business or at a location to which the employee must travel to do his or her job.

## ELIGIBLE EMPLOYEES

All employees must satisfy these conditions to be eligible for coverage under a small group contract:

- Be an active, full-time employee of the group.
- Work an average of 30 hours a week.
- Be actively at work on the effective date of coverage.
- Have completed their probationary periods if new hires.

## ELIGIBLE DEPENDENTS

Your legal spouse and any children through age 25 who are covered under the contract. A dependent child can be a natural or adopted child, stepchild, foster child or a child who's under your legal guardianship. This also includes any child of a divorcing/divorced employee who's recognized under a Qualified Medical Child Support Order (QMSCO) as having a right to enrollment under this plan.

"Incapacitated dependent" means a child who is (1) incapable of self-sustaining employment by reason of intellectual disability or physical handicap, and (2) dependent upon the employee for support. The employee must provide written proof of such a dependency and incapacity within 30 days of the dependent's 26th birthday. Written proof of incapacity is an attending physician's statement with the dependent's name and date of birth, along with the named condition causing incapacity and prognosis. The group is responsible for attaching this information to the Membership Application and submitting it to Customer Service by secure email at [group.membership@bcbssc.com](mailto:group.membership@bcbssc.com) or fax to 803-264-0143.

## INELIGIBLE EMPLOYEES

- Part-time or seasonal employees

**NOTE:**

*We must receive all enrollments within 31 days of the requested effective date.*

**NOTE:**

*You can access applications online at [www.SouthCarolinaBlues.com/employers/forms/applyforcoverage.aspx](http://www.SouthCarolinaBlues.com/employers/forms/applyforcoverage.aspx). You should submit forms to Customer Service via fax at 803-264-0143 or secure email at [group.membership@bcbsc.com](mailto:group.membership@bcbsc.com).*

**BLUES ENROLL, EMPLOYEE ADDITIONS AND CHANGES**

BluesEnroll is a complimentary online tool that eliminates the need to submit paper membership applications. You can effectively manage your group's benefits by using the enrollment and reporting functionality within BluesEnroll. This user-friendly system allows you to make changes quickly and easily. Here are some of the benefits of this free tool.

- Enroll a new, full-time employee who is hired after the initial enrollment and meets eligibility requirements.
- Add other eligible members and/or dependents during the group's open enrollment period (group's anniversary date).
- Enroll or update an eligible member refusing coverage.
- Downgrade current coverage for a member.
- Add dependents on an employee's coverage due to a qualifying event, such as loss of other coverage, marriage or the birth of a child.
- Update member information, such as a name, address, beneficiary, etc.
- Create reports to manage your employee's benefits.
- Order ID cards for members.
- No paper applications necessary.

Contact our Customer Service department by email at [group.membership@bcbsc.com](mailto:group.membership@bcbsc.com) or 800-868-2500, ext. 41010 to take advantage of this free service and receive your log in ID and password. Forgot your password? Customer Service can also assist with resetting your account.

**NOTE:**

*Employees and/or their covered dependents may be eligible to continue their coverage for 18 to 36 months under COBRA or six months under State Continuation. In the event of death, Medicare eligibility, divorce, etc., the outgoing member would have to sponsor the continuation of coverage. Visit [www.DOL.gov](http://www.DOL.gov) for more information about COBRA laws.*

**CANCELING COVERAGE**

When your group terminates an employee, the company will still be liable for premiums until you notify us to cancel that employee's coverage. The cancellation will be effective on the first billing cycle after you notify us that we should no longer cover the employee.

You can terminate an employee's coverage by any of these methods:

- Process the termination in BluesEnroll.
- Contact Customer Service by email at [group.membership@bcbsc.com](mailto:group.membership@bcbsc.com) or at 800-868-2500, extension 41010.
- Fax a completed membership application requesting termination to 803-264-0143.

**CANCELING COVERAGE DUE TO AN EMPLOYEE'S DEATH**

If the employee's status is single, we will cancel coverage on the day following the date of death. We will cancel all other coverages effective on the next billing cycle following the date of death.

**OTHER INSURANCE INFORMATION**

By providing current information on a member's other health insurance coverage, you can help ensure accurate and timely processing of claims. If you do not provide this information, we may delay payment of claims while we investigate the status of other health care coverage. This applies not only to BlueCross BlueShield of South Carolina, but also to any other health care coverage company with which the member has a policy.

Members can update this information online through My Health Toolkit or by contacting Customer Service by secure email at [group.membership@bcbsc.com](mailto:group.membership@bcbsc.com) or 800-868-2500, ext. 41010.

## Billing

Your monthly premium is due on the first of each month. If your payment is 30 days past due, your account may be in jeopardy of canceling for delinquency, which can result in unpaid claims. We accept Mastercard, Visa, Discover and bank draft payments.

You may receive a separate bill for each group number if applicable. Bills consist of four parts:

- Billing Summary
- Current Monthly Premium Breakdown
- Pay Stub
- Current Roster of Membership

### INFORMATION ABOUT YOUR BILL

**Print Date** – The date BlueCross printed the bill. It is important to consider this date when questioning why an action you requested does not show on your current bill. An action will not appear on a bill if BlueCross does not receive the request in time to process it before the print date.

**Coverage Period** – The period of time for which we are billing you.

**Due Date** – The month and day on which your payment is due.

**Balance Due on Last Invoice** – The amount due on your last invoice.

**Total Payments Received** – The total amount of payment received since the last invoice.

**Current Monthly Premium** – The current amount billed for the month listed on the invoice.

**Retroactive Adjustments** – This portion of the bill is included when we receive a request to add, change or cancel an employee's coverage after we have printed a previous bill.

**Current Roster of Membership** – This is a complete list of all active employees in your group as of the print date on your bill, including refusals and continuation recipients. It includes information such as the member's subscriber ID, product information, coverage type, premium amount/total and continuation information, if applicable.

### BLUE E-BILL

BlueCross recognizes that your time is valuable. We offer Blue e-Bill as part of our continuing effort to serve you better. Blue e-Bill makes managing your monthly invoices efficient, convenient and easier than ever. Through Blue e-Bill you can:

- View or print current, past and paid invoices.
- Set up recurring bank draft or credit card payments.
- Create various billing reports, view completed reports or schedule reports.
- Make one-time payments via credit card or bank draft.
- Print and export report information in a variety of formats.
- View payment history.
- Receive instant confirmation of payment.
- Send a secure message to a billing auditor.
- Receive electronic payment reminders.
- Manage user accounts for others who make payments to your group account.

To take advantage of this feature, please contact Customer Service by email at [group.membership@bcbsc.com](mailto:group.membership@bcbsc.com) or at 800-868-2500, extension 41010.

The screenshot displays the Blue e-Bill web application interface. At the top, there is a navigation bar with links for Home, Billing, Reports, and Setup, along with My Account, Help, and Logout. The main content area is titled "Your Current 08/15/2012 Invoice" and shows the following details:

- Test Group: 00000 (00000) / 000000000000000 (000000000000000)
- Due Date: 08/15/2012
- Coverage Period: 08/15/2012-09/14/2012
- Amount Due: \$911.68**
- Buttons: Pay Now, Print Now
- Links: View Details, Make Adjustments

On the left side, there are several menu sections:

- Payments:** Search and review your recent payments, Payment History, View your pending payments, Pending Payments, View your payment accounts, Payment Accounts.
- Scheduled Reports:** View your scheduled reports, Scheduled Reports, Create a new scheduled report, Create Report.
- Users:** Search and edit your user accounts, Manage Users, Create a new user.

On the right side, there are additional sections:

- Stop Paper:** GoPaperLess. Want to save some trees? Turn off your paper invoices and start reaping the benefits of online billing. Go Paperless.
- Ask a Question:** Do you have a question? Ask a Question. You have no new responses.
- Messages:** For system maintenance, the application will be unavailable during the times listed below.

At the bottom right, there is a timestamp: Friday, August 10, 11:30 PM.

**NOTE:**

*We periodically review groups to make sure they meet the minimum participation requirements.*

## Plan Renewal

Each year prior to the group's anniversary date (original enrollment month), we will send the group renewal information. Your agent or marketing representative is available to provide any options available to your small group plan. Be sure to submit any plan changes prior to your group's anniversary date by secure email at [group.membership@bcbssc.com](mailto:group.membership@bcbssc.com) or fax to Customer Service at 803-264-0143. Depending on the type of change requested, we may send new ID cards upon completion.

Your group's renewal is also an open enrollment period for eligible employees and/or dependents to elect coverage without having to serve the probationary period. If your group offers different plan options, eligible employees are able to move to a different plan only during this open enrollment period.

If you do not wish to make any changes to your group's benefits, all you need to do is to continue to pay your monthly billing statement. It's that easy!

## Privacy and Security

In 2003, a new portion of the Health Insurance Portability and Accountability Act (HIPAA) law created standards to safeguard the medical records and personal health information (PHI) of individuals. This privacy rule requires insurers and other persons to maintain strict rules on using and releasing PHI to other persons or groups. As a result of this rule, BlueCross cannot communicate with a group in ways that would use a member's PHI. We can release information only with a proper authorization (HIPAA Authorization form) from the member stating that some other person can receive information from us about his or her medical condition or other PHI. HIPAA also requires that if an employee or individual member sends us a request, we must provide him or her with a list of all situations in which we shared his or her PHI with any other entity.

You will be receiving enrollment and cancellation information, which may include PHI, but we will always try to include only the minimum necessary information, as this is also required by HIPAA. If your members want an accounting of other situations in which we have shared PHI, they must make a request directly to BlueCross.

Also, in order for your group's benefits coordinator to receive information on the group's account, he or she needs to be listed as the main point of contact. Please send a written request to update the benefits coordinator for your group by fax to 803-264-0143 or email to [group.membership@bcbssc.com](mailto:group.membership@bcbssc.com)

## Communications

In an effort to be environmentally friendly, we use email as our primary way of contacting our benefits coordinators, agents and members. We encourage you to review your email regularly to keep up to date on any changes and notifications about your policy. You may also want to add us to your contacts to ensure that this information is not misrouted as spam.

When an email contains sensitive information, we will send it secured and you will need your email password to open it. For assistance, please review these instructions:

Step 1: Open the secure Proofpoint message attachment and select "click to read message."

Step 2: Complete the registration and continue.

Step 3: Ensure your password meets the requirements.

Please contact our technical support team at 803-264-8599 for lockout assistance.

## Group Termination

If you wish to discontinue your small group policy, submit a written request by fax to 803-264-0143 or email [group.membership@bcbssc.com](mailto:group.membership@bcbssc.com). Please include your group name, account number requested cancellation date, and the reason for your request. We will process cancellation requests on your group's bill date. To ensure your group is not liable for any paid claims, please submit your request prior to the requested cancellation date.

## Contact Information

**Membership Customer Service:**

800-868-2500, ext. 41010  
803-264-1010  
803-264-0143 (Fax)  
group.membership@bcbsc.com

**(Hearing Impaired TTY Number):**

800-735-8583

**Claims Customer Service:**

800-868-2500, ext. 43475  
803-264-3475

**Claims Mailing Address:**

BlueCross BlueShield of South Carolina  
Attn: Group Claims  
Mail Code: AX-F25  
P.O. Box 100300  
Columbia, SC 29202-3300

**Payments:**

BlueCross BlueShield of South Carolina  
Cashier's Office, AX-A31  
P.O. Box 6000  
Columbia, SC 29260

**General Correspondence:**

BlueCross BlueShield of South Carolina  
Group Membership, AX-G10  
P.O. Box 100177  
Columbia, SC 29202

**Medical Records Mailing Address:**

BlueCross BlueShield of South Carolina  
Attn: Records  
Mail Code: AX-F25  
P.O. Box 100246  
Columbia, SC 29202-3246

**Medical Records:**

**In State**

Fax: 803-264-9703  
Email: MedicalRecords.Fax@bcbsc.com

**Out of State**

Fax: 803-264-7568  
Email: G.I@bcbsc.com

**Non-medical Records Correspondence**

Fax: 803-264-0172  
Email: GIClaims.Fax@bcbsc.com

*\* Caremark is an independent company that manages prescription drug benefits on behalf of BlueCross BlueShield of South Carolina.*

*\* Companion Benefit Alternatives is a separate company that manages behavioral health and substance abuse benefits on behalf of BlueCross BlueShield of South Carolina.*

**Caremark:\***

Members: 888-963-7290  
Providers: 800-964-6331  
Authorizations: 800-294-5979

**Precertification:**

800-868-2500, ext. 41904  
803-264-1904

**Provider Services Directory:**

800-810-2583

**Dental:**

800-868-2500, ext. 42254  
803-264-2254

**Companion Benefit Alternatives\***

**(Mental Health):**

800-868-2500, ext. 25037  
800-868-1032



# South Carolina

*BlueCross BlueShield of South Carolina  
is an independent licensee of the  
Blue Cross and Blue Shield Association*