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

My Insurance Manager℠

User Guide

Published by Provider Relations and Education
Your Partners in Outstanding Quality, Satisfaction and Service

Revised: August 2025

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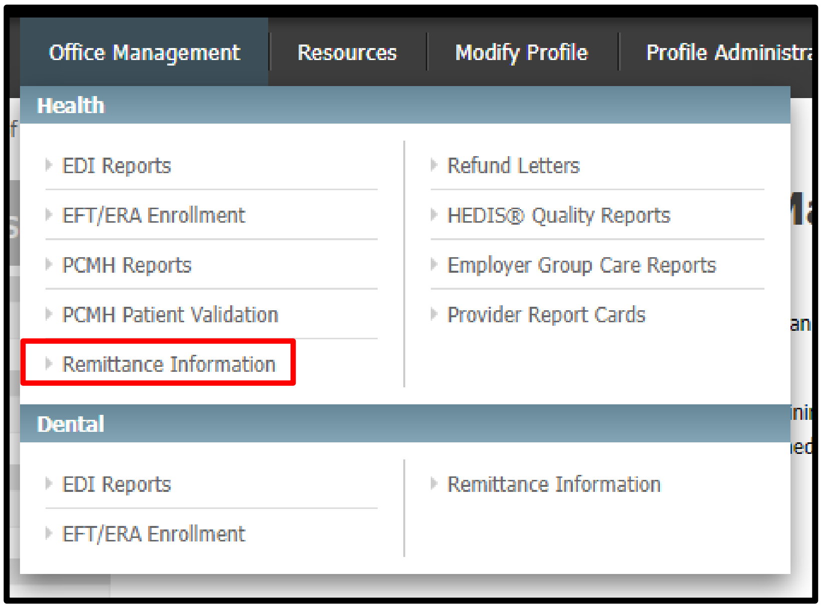
Office Management Functions

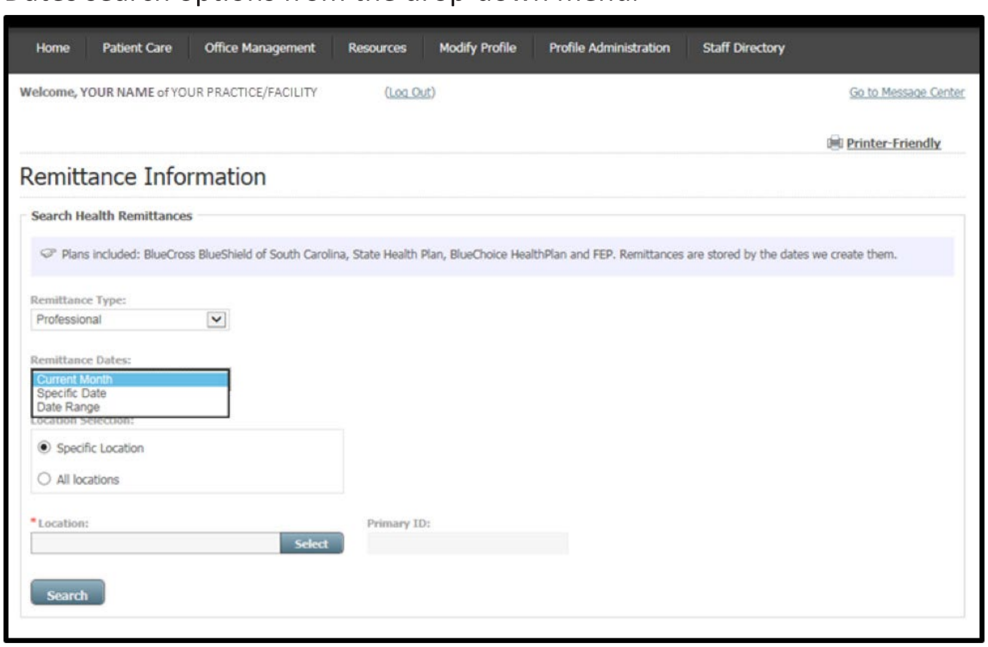
Remittance Information

You can view remittances as a PDF in My Insurance Manager. It is a soft copy of the paper version your practice or facility receives. Remittances are stored by the date we create them.

From the Office Management menu, select Remittance Information.



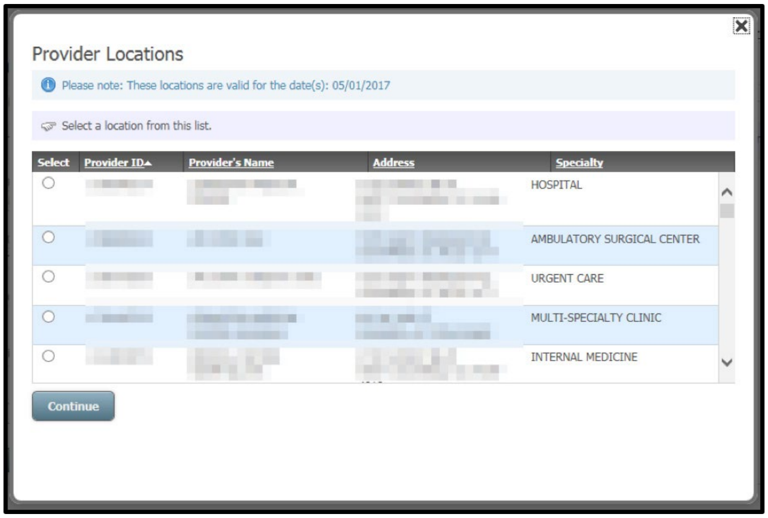
For health providers, choose Professional or Institutional for remittance type. Select the Remittance Dates search options from the drop-down menu.



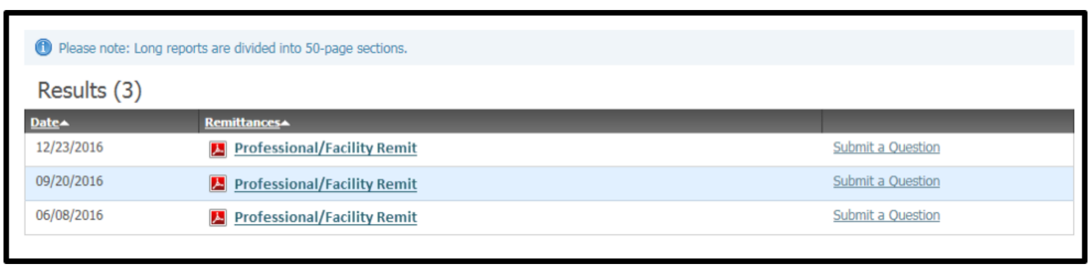
1. Current Month: Select **Search** to return remittance information for the current month. No additional date fields will appear.
2. Specific Date: Additional required field for Specific Date appears. Enter the date in MM/DD/YYYY format.

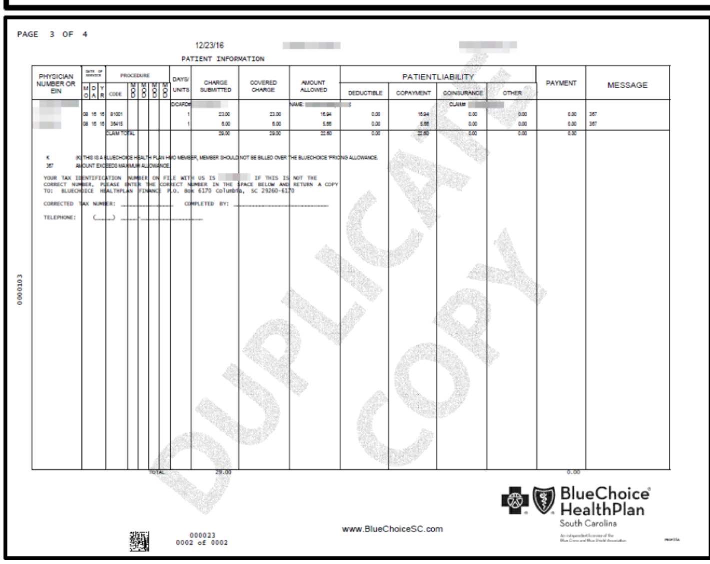
3. Date Range: Additional required fields for From Date and To Date appear. Enter the date in MM/DD/YYYY format. Look for remittance information according to Specific Location or All Locations. Select a Location, and **Search**.

This screen appears when the user selects the button at the Location field. Choose the location to view its associated remittance information. Select **Continue** to return to the previous Remittance Information screen.



The Remittance Information screen will expand to show Results according to your search criteria. Select a file to view the image in a new window. Long reports are divided into 50-page sections. **Submit a Question** to send an email to Ask Provider Services.



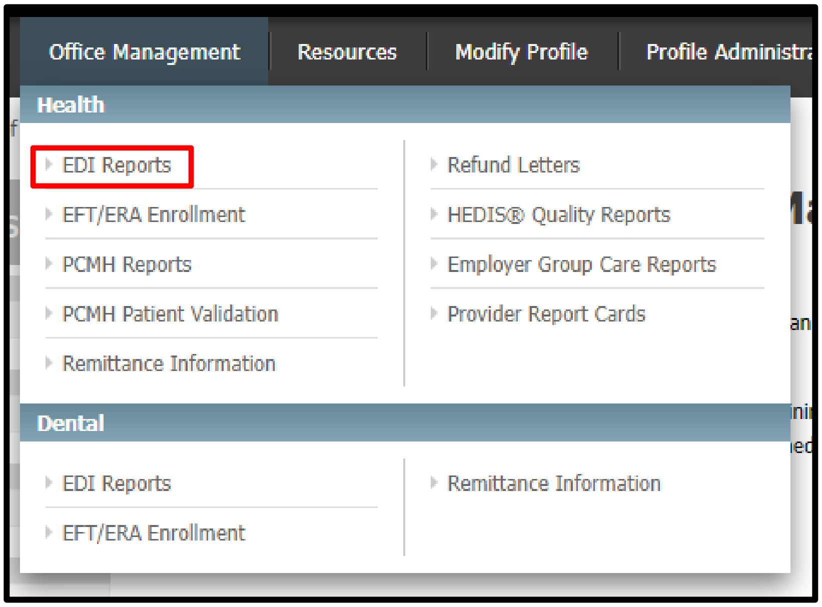


The remittance report is shown. You can print or save a copy of the image.

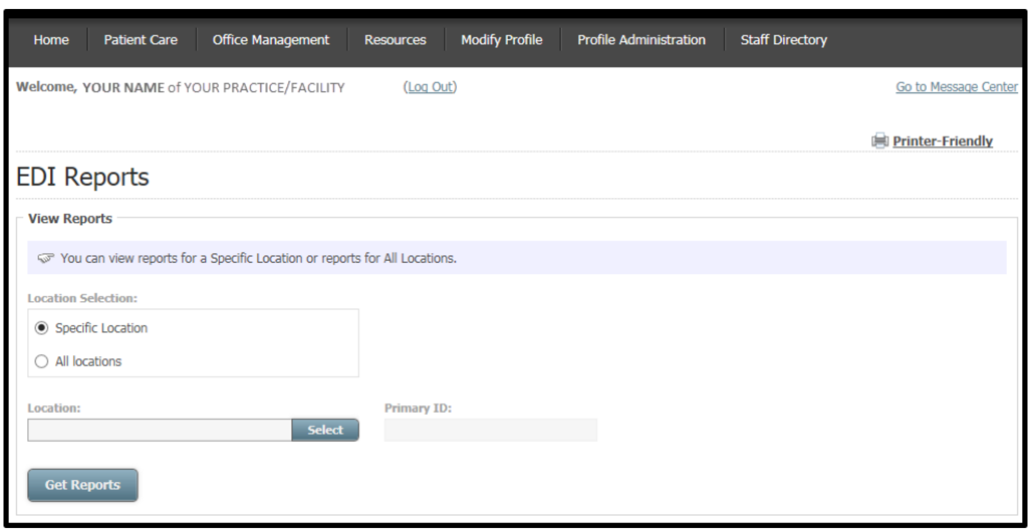
EDI Reports

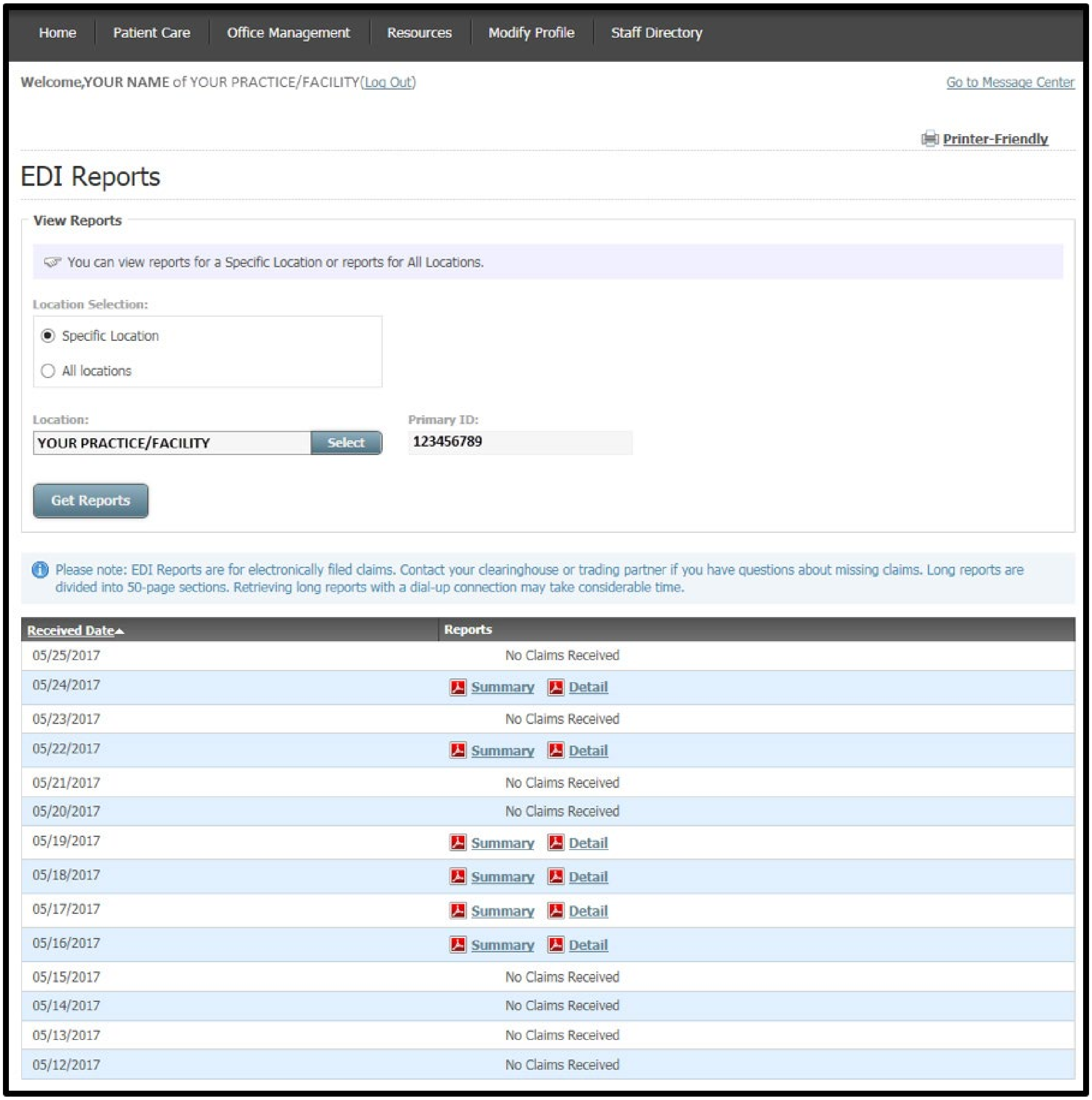
Electronic claim filers can access EDI Reports in My Insurance Manager. Reports include all claims received via the EDI Gateway daily along with explanations for rejected claims so you can resubmit the claim as soon as possible. This function does not show data for web claims.

From the Office Management menu, select EDI Reports



Choose to view reports for a specific location or for all locations. Select **Get Reports.**





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

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

Go to Message Center

Printer-Friendly

EDI Reports

View Reports

You can view reports for a Specific Location or reports for All Locations.

Location Selection:

Specific Location

All locations

Location: YOUR PRACTICE/FACILITY Select

Primary ID: 123456789

Get Reports

Please note: EDI Reports are for electronically filed claims. Contact your clearinghouse or trading partner if you have questions about missing claims. Long reports are divided into 50-page sections. Retrieving long reports with a dial-up connection may take considerable time.

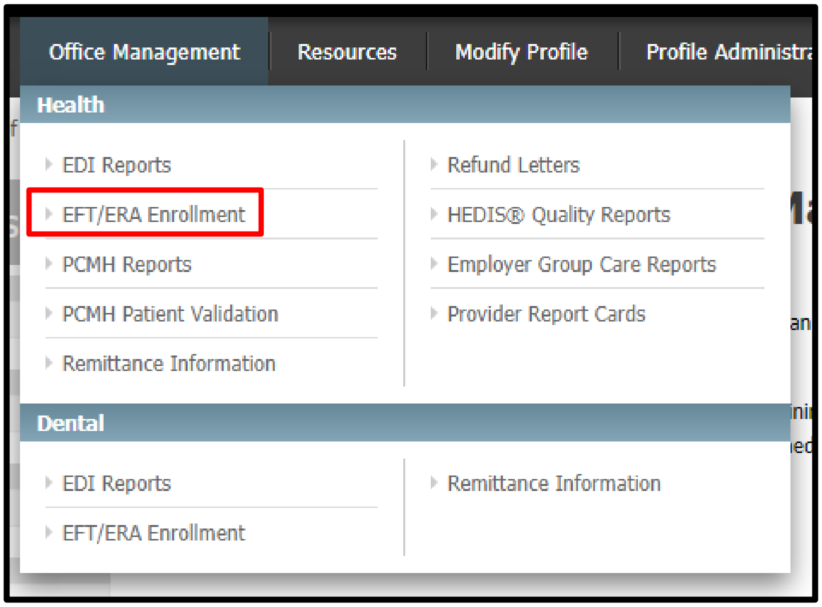
Received Date	Reports
05/25/2017	No Claims Received
05/24/2017	Summary Detail
05/23/2017	No Claims Received
05/22/2017	Summary Detail
05/21/2017	No Claims Received
05/20/2017	No Claims Received
05/19/2017	Summary Detail
05/18/2017	Summary Detail
05/17/2017	Summary Detail
05/16/2017	Summary Detail
05/15/2017	No Claims Received
05/14/2017	No Claims Received
05/13/2017	No Claims Received
05/12/2017	No Claims Received

The screen expands to reveal the report search results. Select **Summary** or **Detail** in the Reports column to view a PDF file. The report opens in a new window.

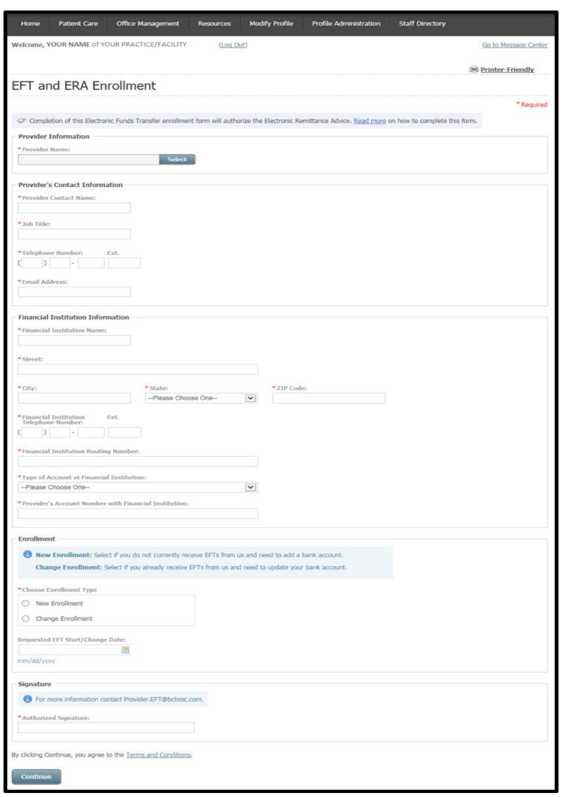
EFT/ERA Enrollment

The EFT/ERA Enrollment function gives you the option to participate in the electronic funds transfer program if you are not currently receiving an electronic remittance advice. Completion of this EFT/ERA Enrollment form will authorize the electronic remittance advice.

From the Office Management menu, select EFT/ERA Enrollment.



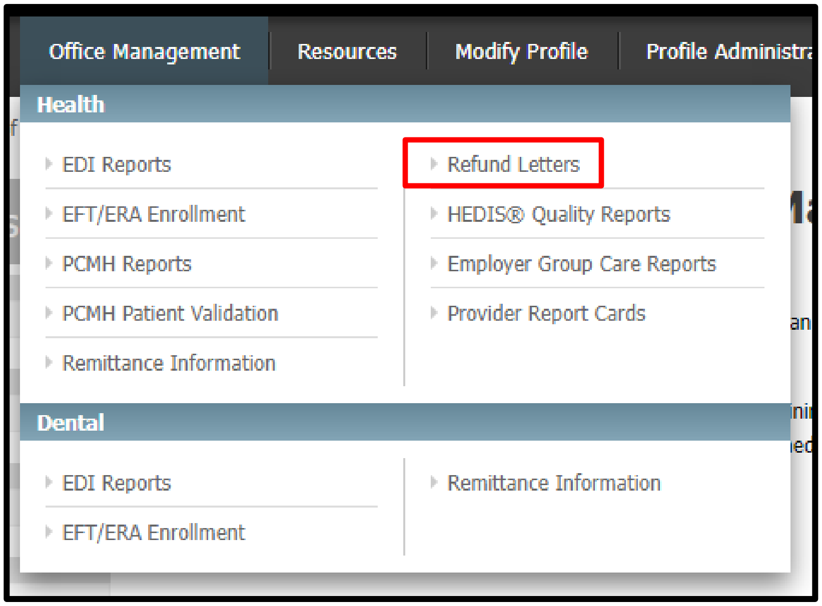
Complete all required fields in each form section: Provider Information; Provider's Contact Information; Financial Institution Information; Enrollment; and Signature.



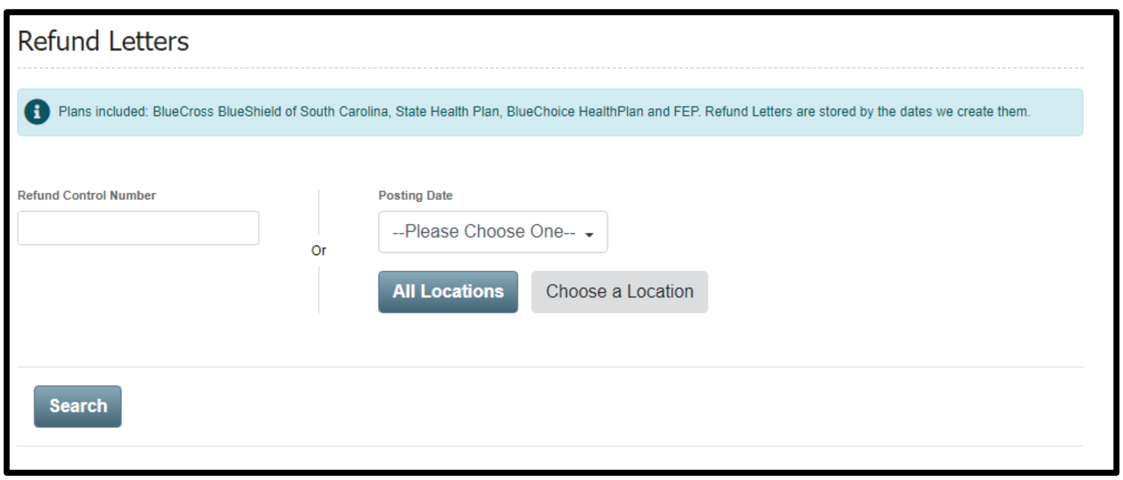
When you select **Continue**, you agree to the Terms and Conditions for EFT/ERA enrollment.

Refund Letters

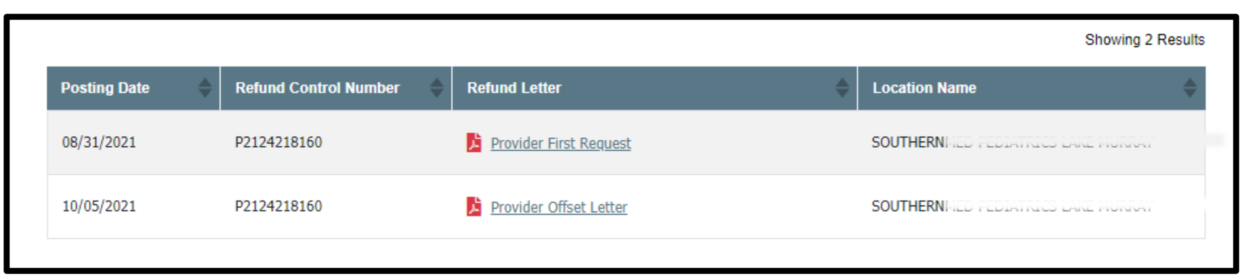
The Refund Letters function gives you the option view and download a copy of any refund letter that has been sent. Select Refund Letters.



You can search by entering the refund control number (RCN) or you can choose from one of the posting date options: current month, date range, or specific date.



After selecting Search, the results will be displayed, which includes the initial request and any associated offset letters.



Once you select one of the available letters, the information will be displayed.

0000333

I-20 @ Alpine Road
Columbia, SC 29219

South Carolina

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

Log in to MyInsuranceManager[SM] at SouthCarolinaBlues.com.

AUGUST 30, 2021

000333
0001 of 0001

L

Re: Pat
ID N
Dat
Ref

Dear Provider:

Payment was forwarded to you on June 21, 2021, in error for the patient listed above. We must request that you refund $30.00 for the reason listed below:

WE PROCESSED THESE SERVICES USING THE INCORRECT ALLOWANCE FOR THE DATE OF SERVICE FILED.

If we have not heard from you within 21 days, the refund amount will be deducted from future benefits payable to you and/or sent to our collections agency. Please send this amount to:

BlueCross BlueShield of SC
PO Box 6000
Columbia, SC 29260-6000

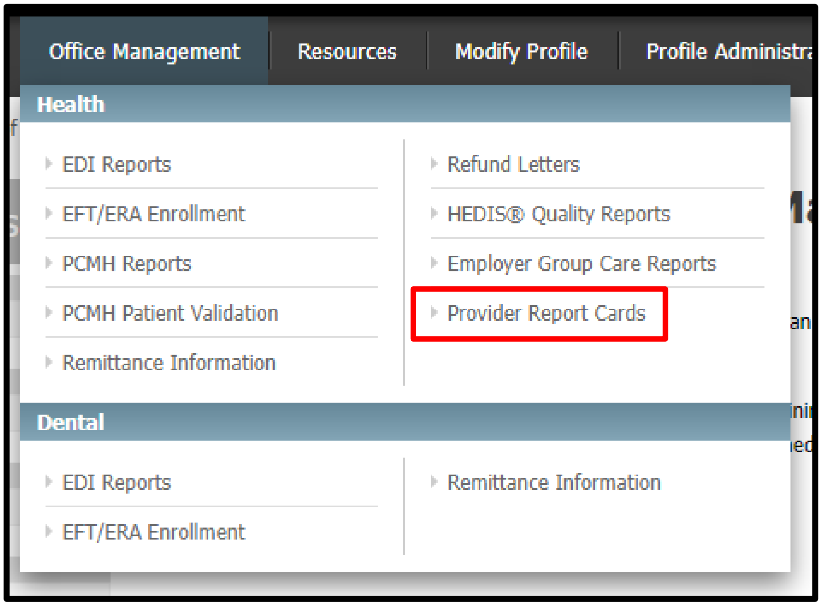
We thank you for your cooperation and apologize for any inconvenience. If you have any questions about this refund, please call our Customer Service department at 800-868-2500.

Sincerely,

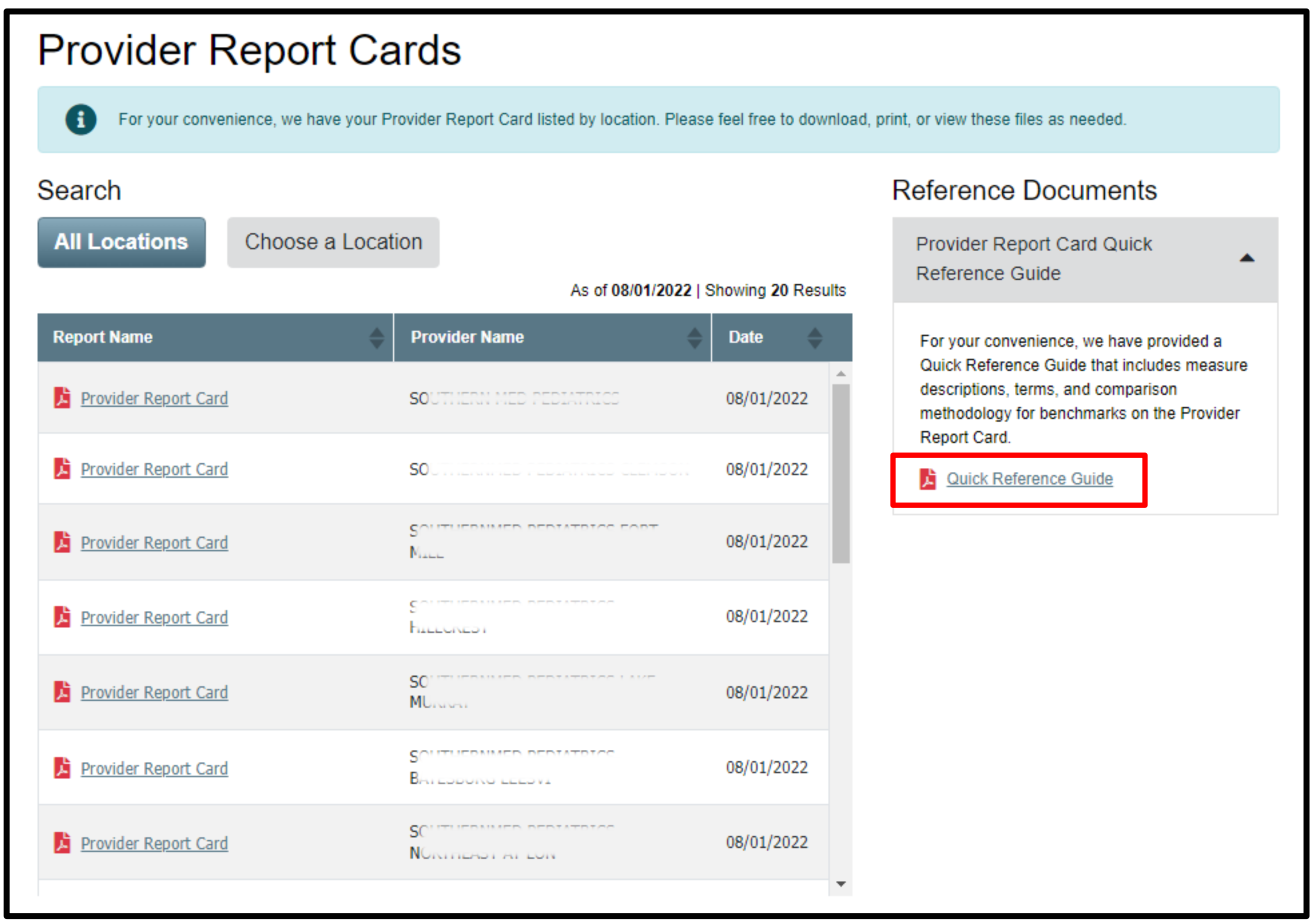
MAJOR GROUP REFUNDS

Provider Report Cards

The Provider Report Cards function gives you the option view and download a copy of your report cards. Select Provider Report Cards.



If there are available report cards, the information will be displayed. From here, select the report card you want to view. There is also a quick reference guide available that includes measure descriptions, terms, and comparison methodology for benchmarks on the report card.

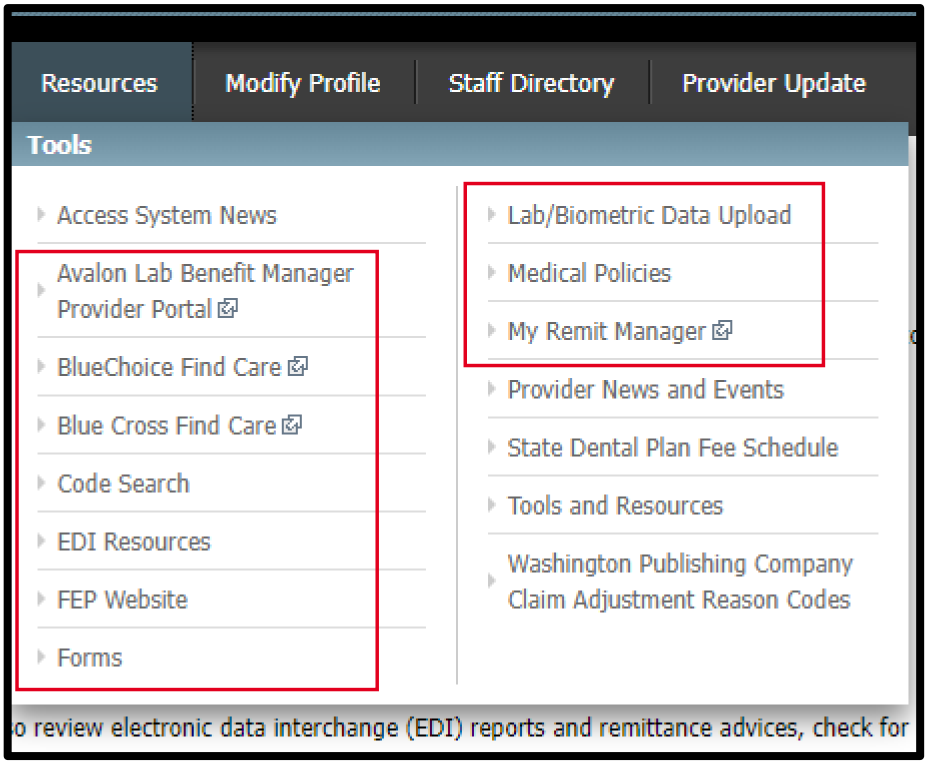


Troubleshooting Tips – Office Management Functions

- For questions about the status of EFT/ERA Enrollment, send an email to Provider.EFT@bcbssc.com.
- If you are searching for a remittance that processed in our system at the end of the previous month (i.e., 30th or 31st) but it shows on your remittance as the beginning of the current month, it is best to use a date range search to locate the remittance. The remittances will have been entered as having processed in the previous month and will not display in the current month search.

Resources

Helpful Links



BlueCross Doctor & Hospital Finder. Determine if your practice or facility is a network provider for a member's Blue Plan. From the Resources menu, select Blue Cross Find Care. This link opens in a new window. You will be redirected to the member site of www.SouthCarolinaBlues.com.

BlueChoice Find Care. See if your practice or facility is a network provider for a member's BlueChoice Plan. From the Resources menu, select BlueChoice Find Care. This link opens in a new window. The user redirects to the member site of www.BlueChoiceSC.com.

My Remit Manager. Build historical, member- and group-specific remittances that allow the user to sort, view and print remits online. Data for claim submission type, claim denial detail, patients by procedure, overall payments by payer and more are reported. From the Resources menu, select My Remit Manager. This link opens in a new window. You will be redirected to https://client.webclaims.com/v07_03/.

Code Search. Search for a specific diagnosis or procedure code. This form is for research purposes only. From the Resources menu, choose Code Search. Complete all required fields: Code; Type (ICD-9/ICD10/HCPCS/CPT4); Search By; Search Type; Search For; and Search Within a Specific Category. User must enter a keyword or phrase (at least three letters) to begin a search.

Avalon Lab Benefit Management Trial Claim Tool. Evaluate the claim editor's advice in advance of the claim adjudication process. BlueCross and BlueChoice uses Avalon claim editing technology to enhance the clinical quality and administration of medical coverage policies. The program applies to all laboratory services performed in all places of service except for inpatient and emergency room settings. The Trial Claim Advice does not incorporate benefit coverage, eligibility or other claim edits by the health plan. From the Resources menu, select Avalon Lab Benefit Management Trial Claim Tool. This link opens in a new window. You will be redirected to www.avalonhcs.com/provider.

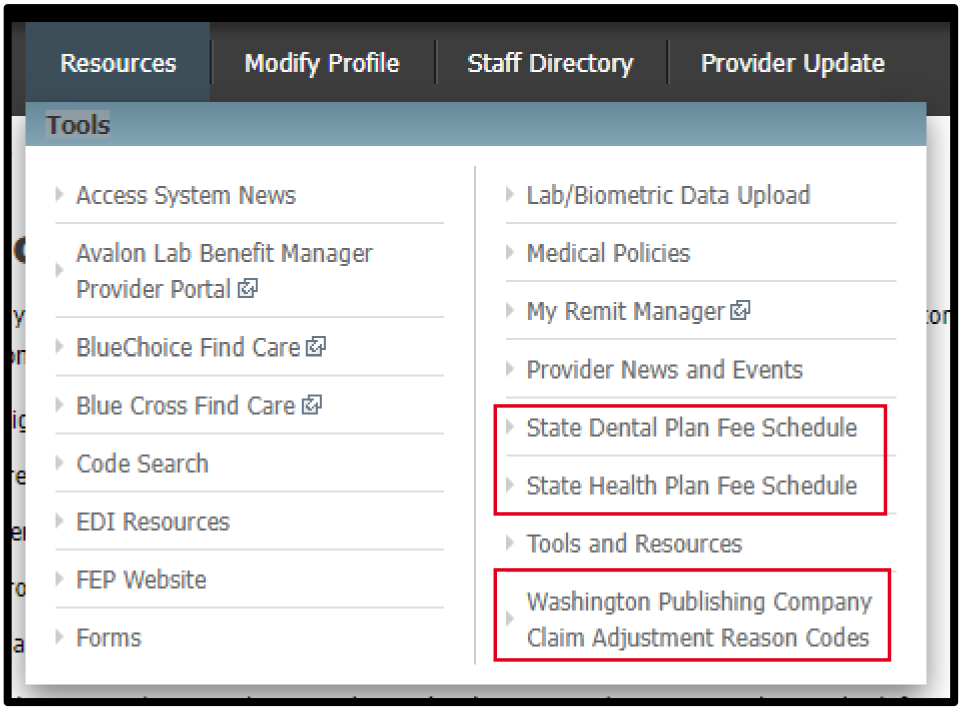
Medical Policies. Review guidelines our plans use to make clinical determinations for member's coverage. From the Resources menu, choose Medical Policies. This link opens in a new window. You will be redirected to the medical policies disclaimer page.

FEP Website. Visit FEP's website for member information about benefit plans, wellness resources and tools, and more. From the Resources menu, select FEP Website. This link opens in a new window. You will be redirected to www.fepblue.org.

Forms. Here is where you can find the form(s) you need for Financial and Appeals; Credentialing/Provider Updates; Prescription Drugs; and Specialties/Other. From the Resources menu, choose Forms. This link opens in a new window. You will be redirected to the provider page of www.SouthCarolinaBlues.com.

Lab/Biometric Data Upload. Submit lab and biometric data for the South Carolina Public Employee Benefit Authority (PEBA) screening initiative. You can also review process/error reports. From the Resources menu, select Lab/Biometric Data Upload. Select the location for which you are submitting lab/biometric data. If your spreadsheet contains multiple dates, choose the earliest date for which data is being submitted. You can check for the report within two business days of a file upload.

Useful Information



State Health Plan Fee Schedule. View State Health Plan's (SHP) schedule of allowances under the terms of the SHP Physician Network Agreement. From the Resources menu, select State Health Plan Fee Schedule. You must accept the agreement terms before you can view the SHP Fee Schedule. Download the fee schedule Excel file when prompted.

If you get the Security Warning box, please select "No" when downloading the SHP Fee Schedule.

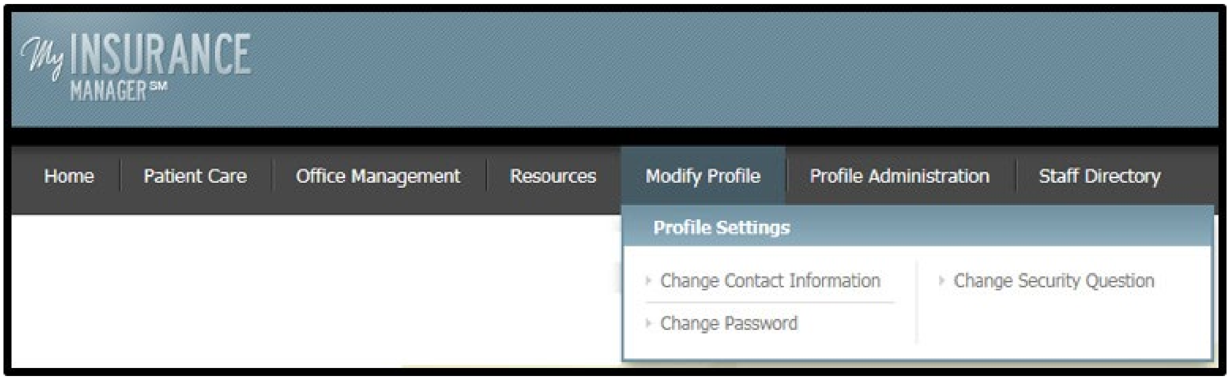
State Dental Plan Fee Schedule. View the schedule of dental allowances under the terms of the State Dental Plan. From the Resources menu, choose State Dental Plan Fee Schedule. You must accept the agreement terms before you can view the State Dental Plan Fee Schedule. Download the dental fee schedule Excel file when prompted. If you get the Security Warning box, please select "No" when downloading the State Dental Fee Schedule.

Washington Publishing Company Claim Adjustment Reason Codes. Determine why a claim or service line was paid differently than it was billed based on the claim adjustment reason code (CARC). From the Resources menu, choose Washington Publishing Company Claim Adjustment Reason Codes. This link opens in a new window. You will be redirected to www.wpc-edi.com. Washington Publishing Company is an independent company that provides code lists on behalf of BlueCross and BlueChoice.

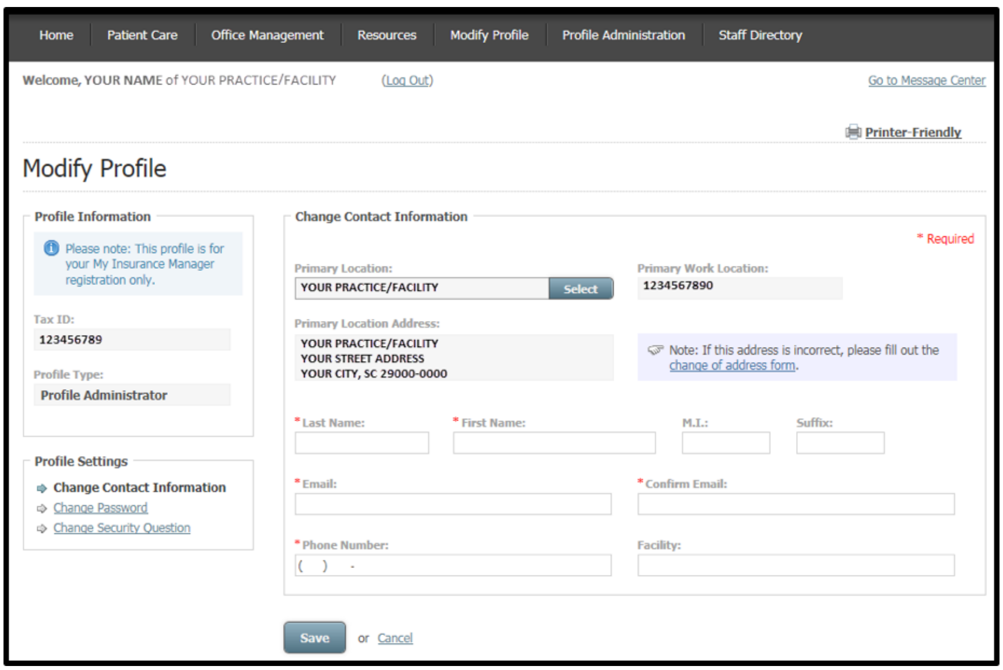
Modify Profile Functions

Your Profile Settings

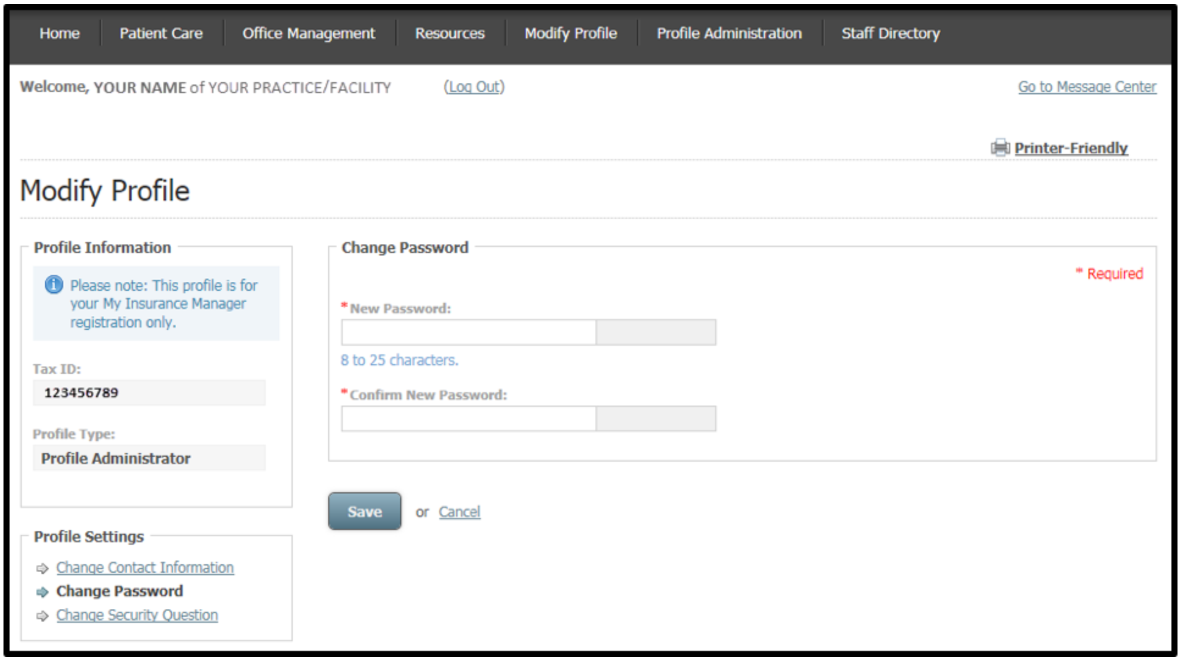
You can revise your profile settings from the Modify Profile menu. This information is unique to your account; you should be share it with other persons in your office. From the Modify Profile menu, select Change Contact Information.



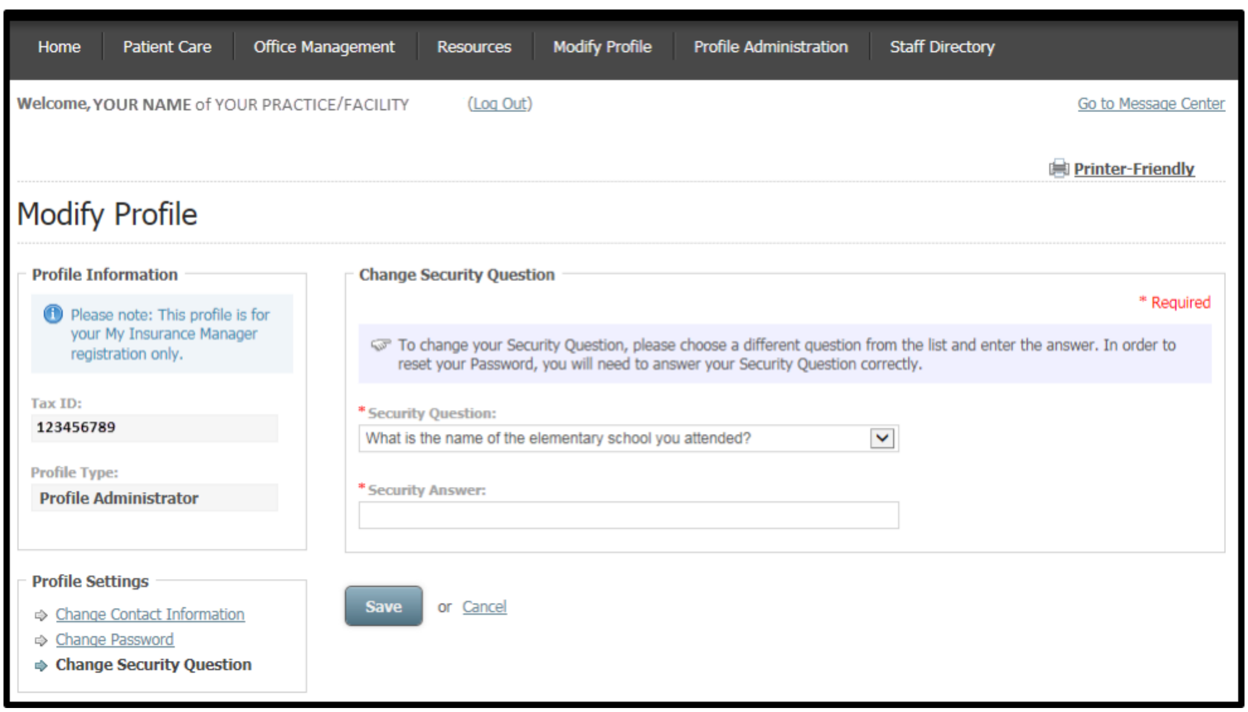
You can make changes to the fields marked with an asterisk. **Save** or **Cancel** the changes.



From the Modify Profile menu, select Change Password. Enter a new password that is eight to 25 characters in length; and Confirm New Password by retyping it. **Save** or **Cancel** the change.



From the Modify Profile menu, select Change Security Question. Choose a security question from the drop-down menu. Enter a Security Answer. **Save** or **Cancel** the change.



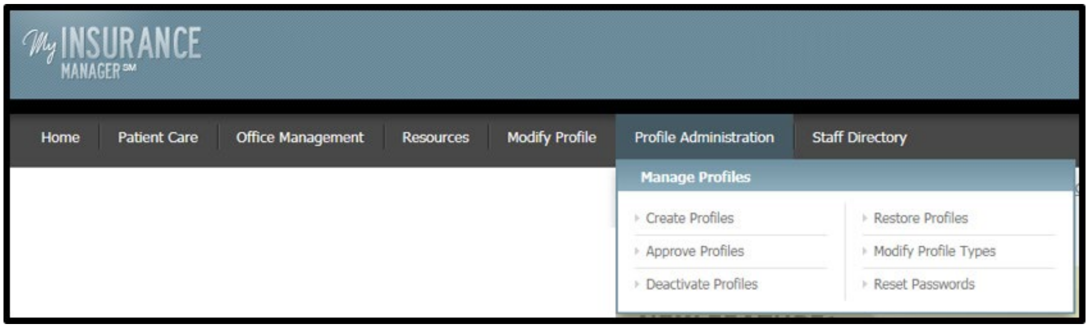
Troubleshooting Tips – Modify Profile Functions

- If you are not affiliated with the Primary Work Location NPI under the listed Tax ID, email provider.education@bcbssc.com for assistance with updating this information.
- If your account address is incorrect, please fill out the Change of Address form located in My Provider Enrollment Portal.

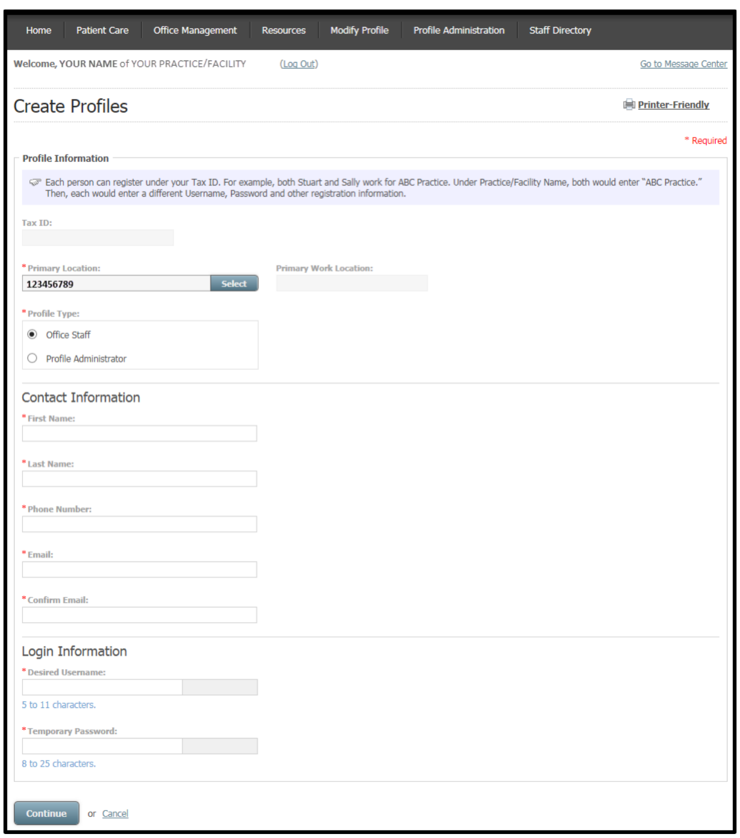
Profile AdministrationFunctions

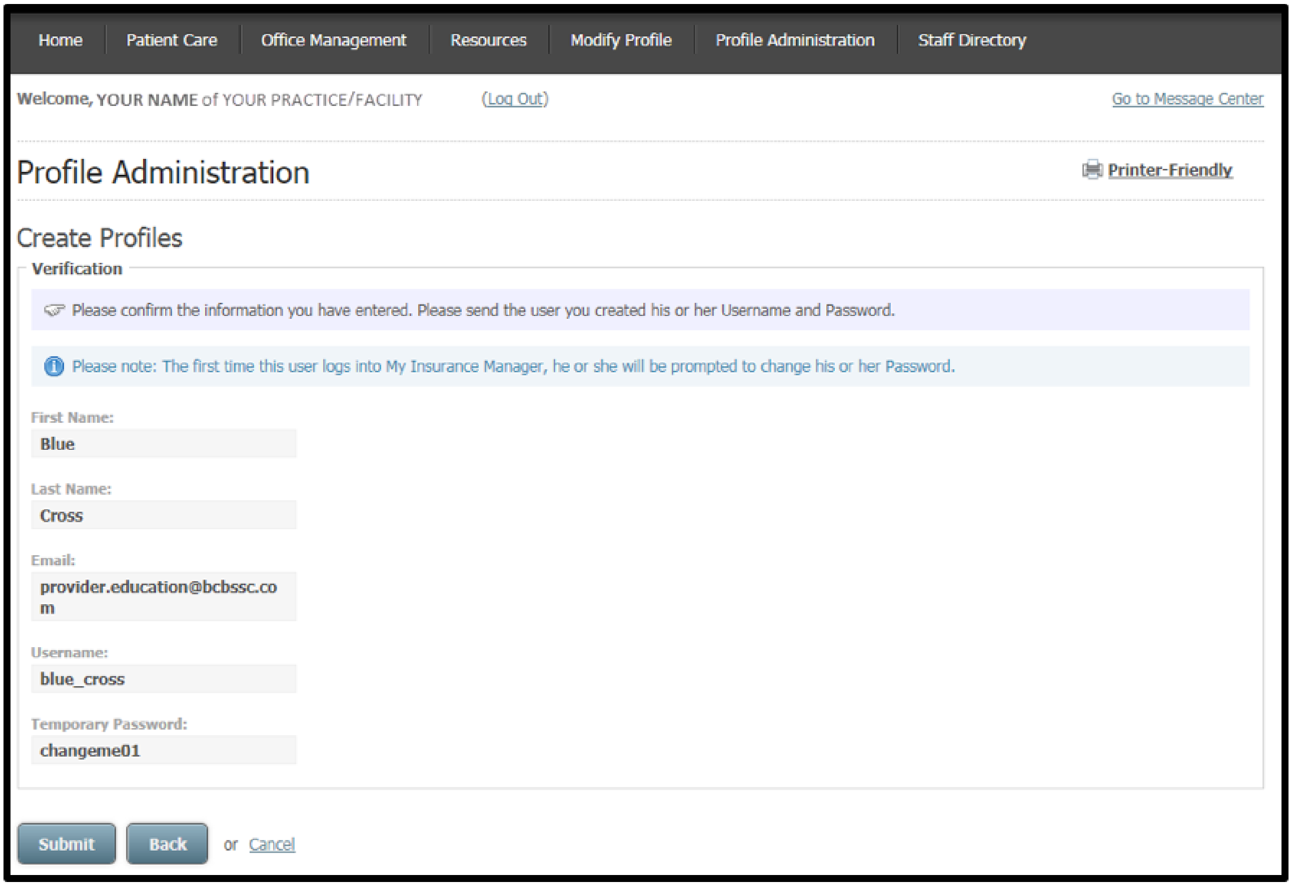
Managing Your Profiles

Use the Profile Administration menu to manage the user accounts of staff members. This tab is only accessible for a user account labeled as profile administrator; it is not visible to those labeled as office staff. There can be more than one profile administrator for a practice or facility in My Insurance Manager.



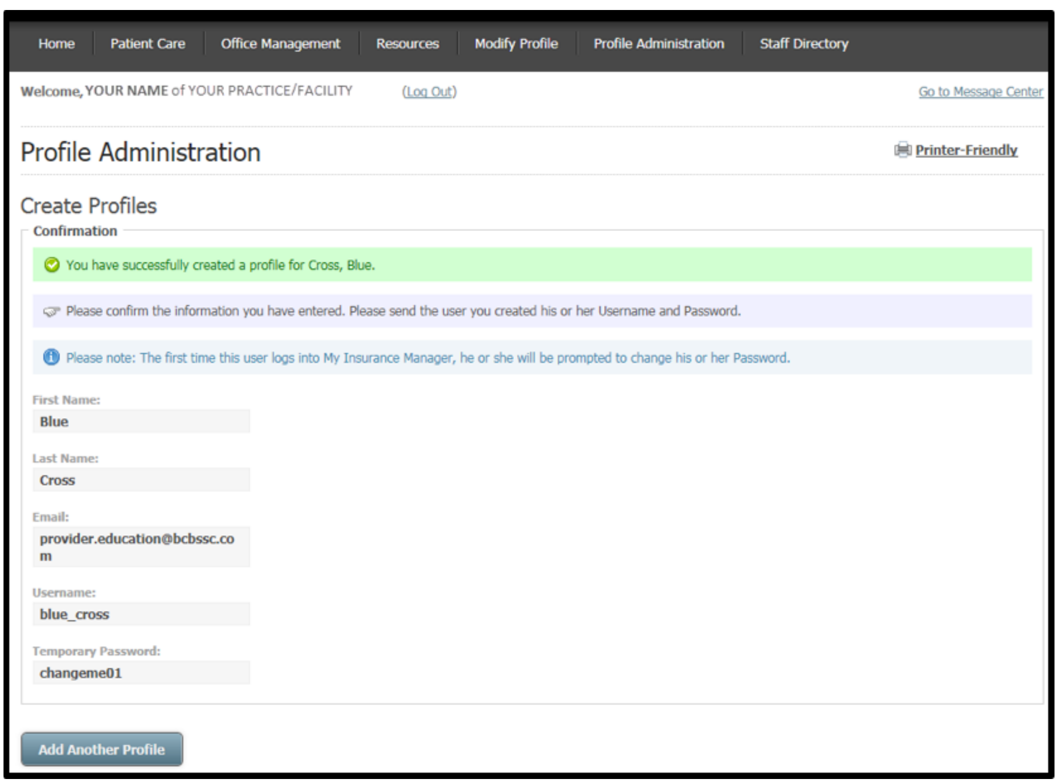
From the Profile Administration menu, select Create Profiles. Select a Primary Location. At the Profile Type field, assign the user as Office Staff or Profile Administrator. Complete all required fields in Contact Information. At Login Information, enter Desired Username that is five to 11 characters; and input a Temporary Password (example: changeme01) that is eight to 25 characters. **Continue.**



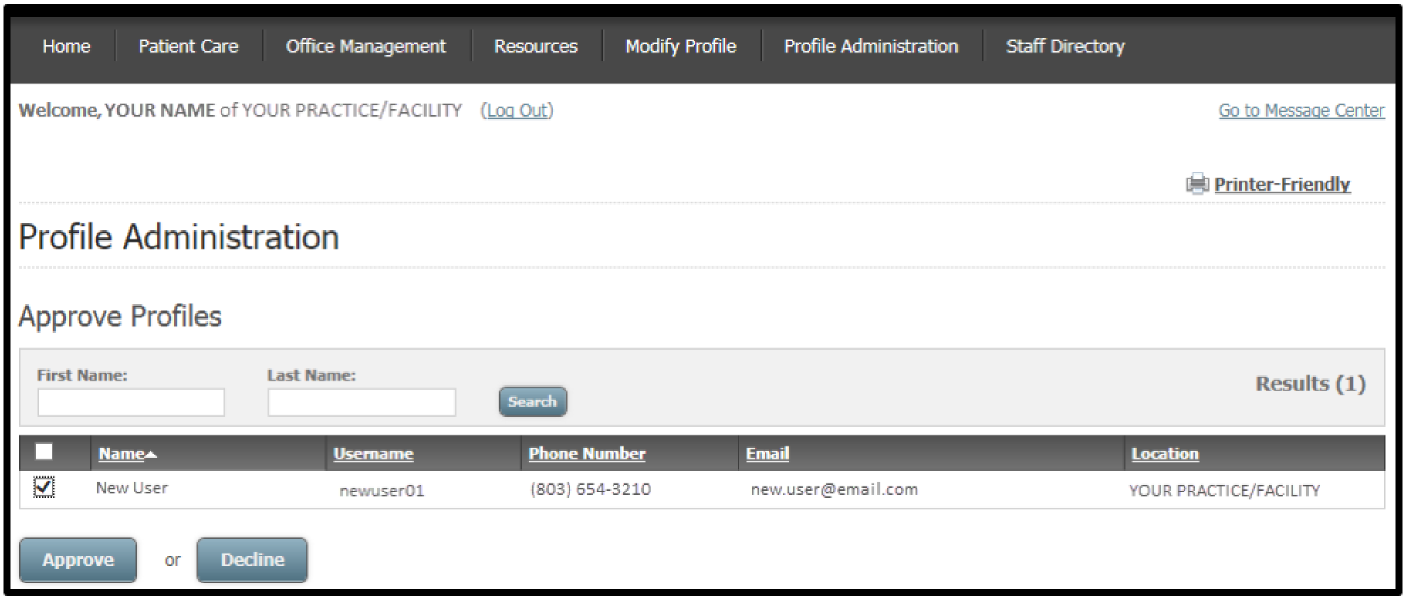


Confirm the information entered. The profile administrator can now send the user you created his or her username and password. **Submit.**

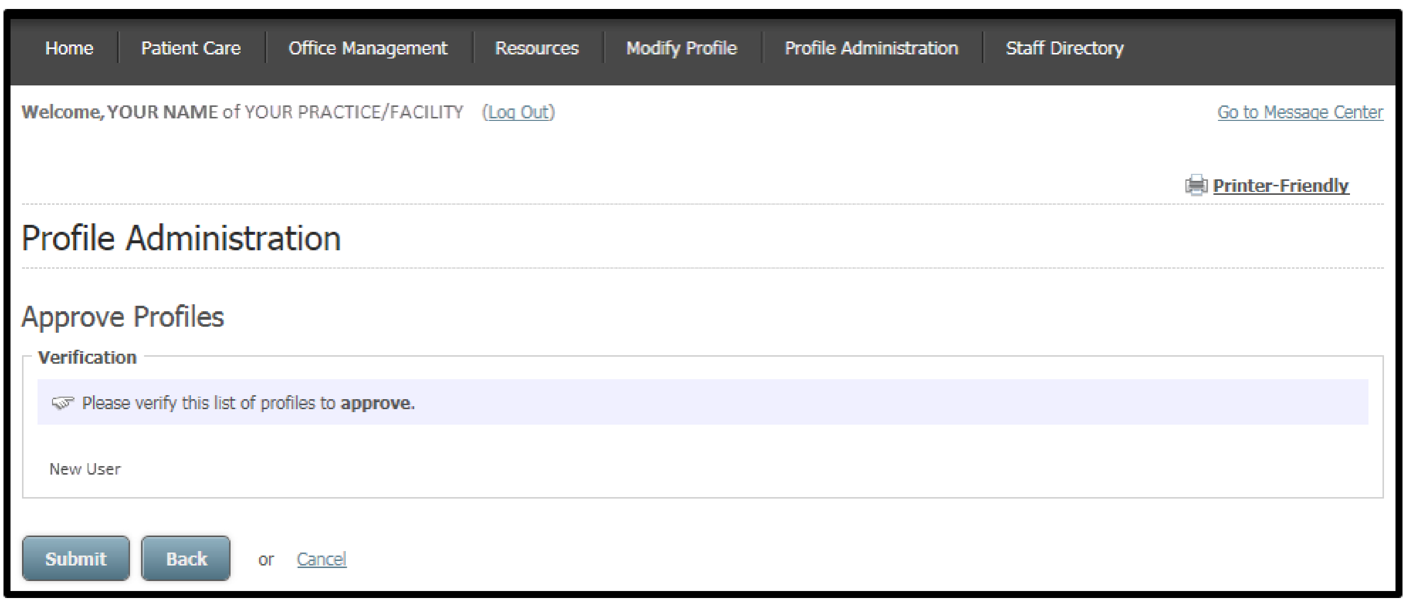
The confirmation screen displays next. The profile administrator can now **Add Another Profile.**



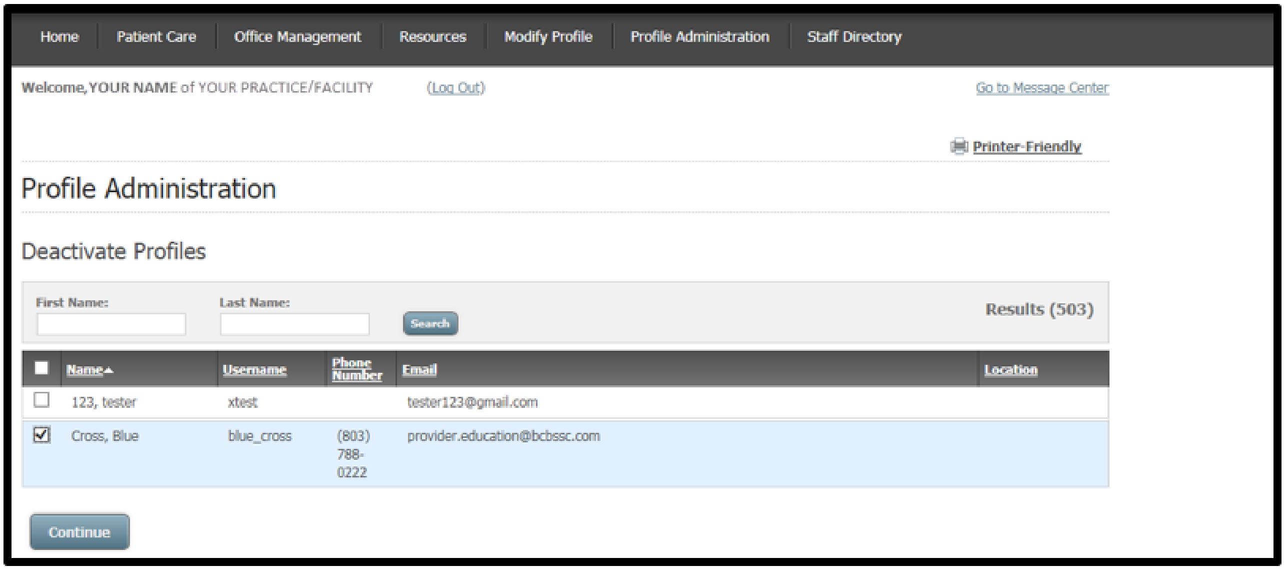
From the Profile Administration menu, select Approve Profiles. Choose the user profile(s) by clicking the box next to the user's name, then **Approve** or **Decline.**



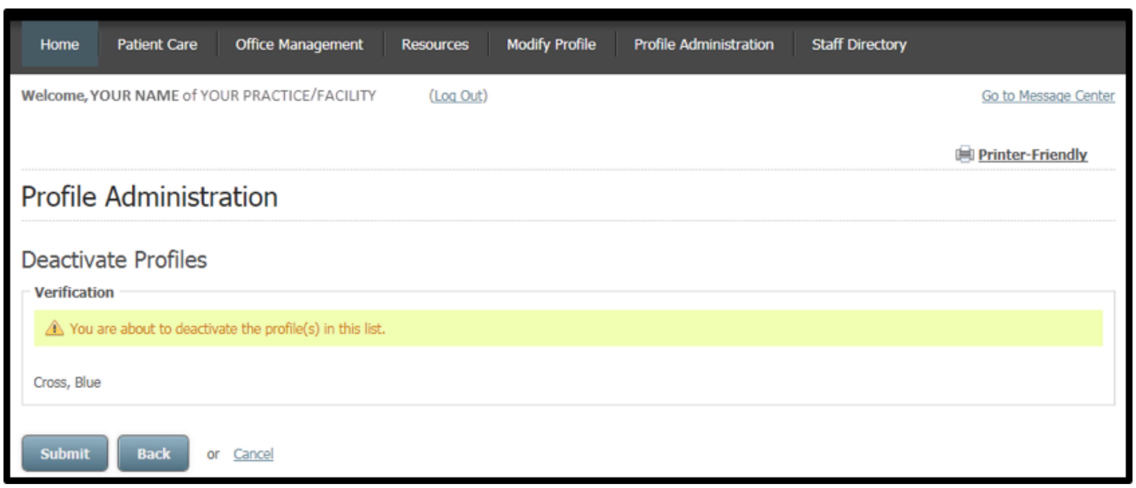
At the secondary screen, verify the profile(s) to approve or decline select **Submit.** Use the **Back** button or the **Cancel** link to discard selection.



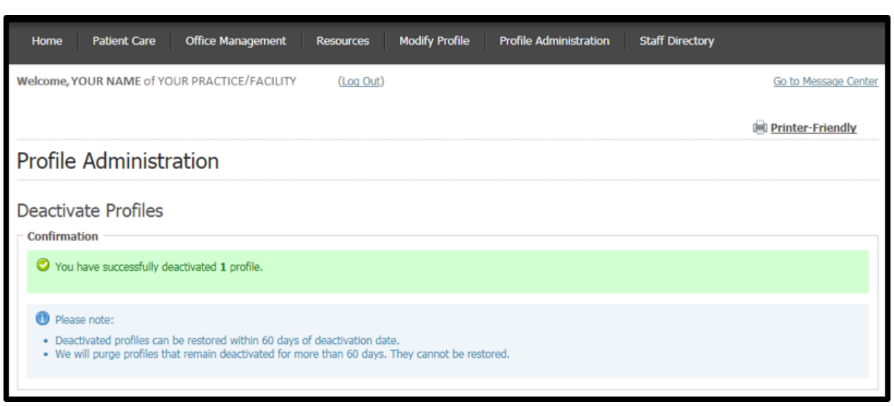
From the Profile Administration tab, select Deactivate Profiles. Select the box(es) next to the profile(s) that will be disabled. **Continue.**



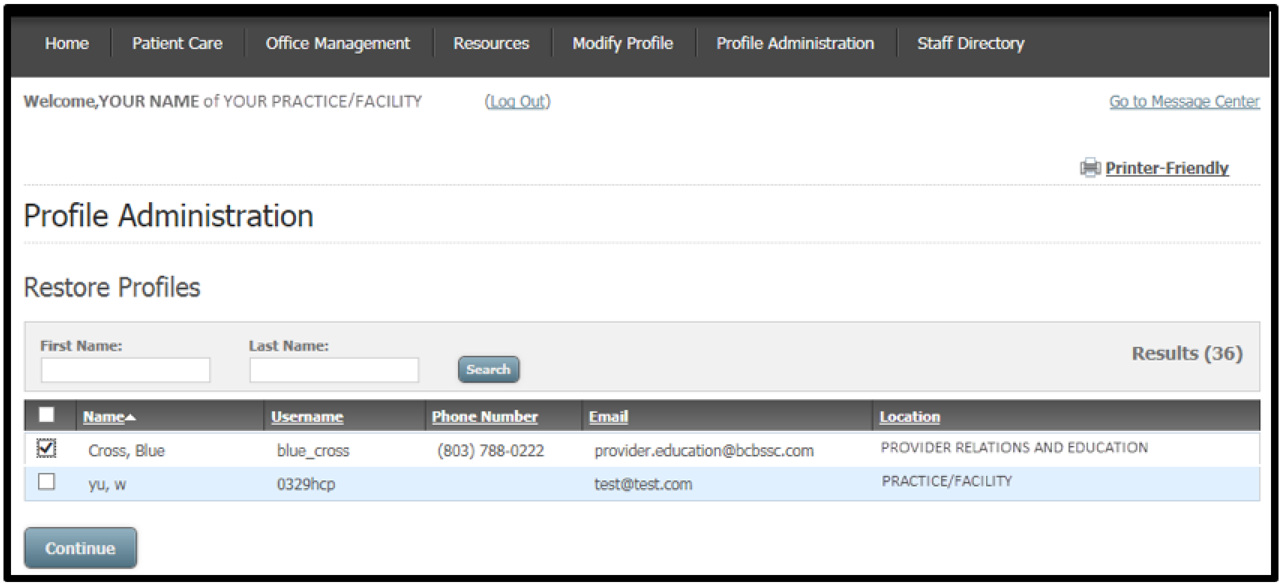
The next screen requires the profile administrator to verify the account that will be deactivated. **Submit** or **Back** to change the account selection.



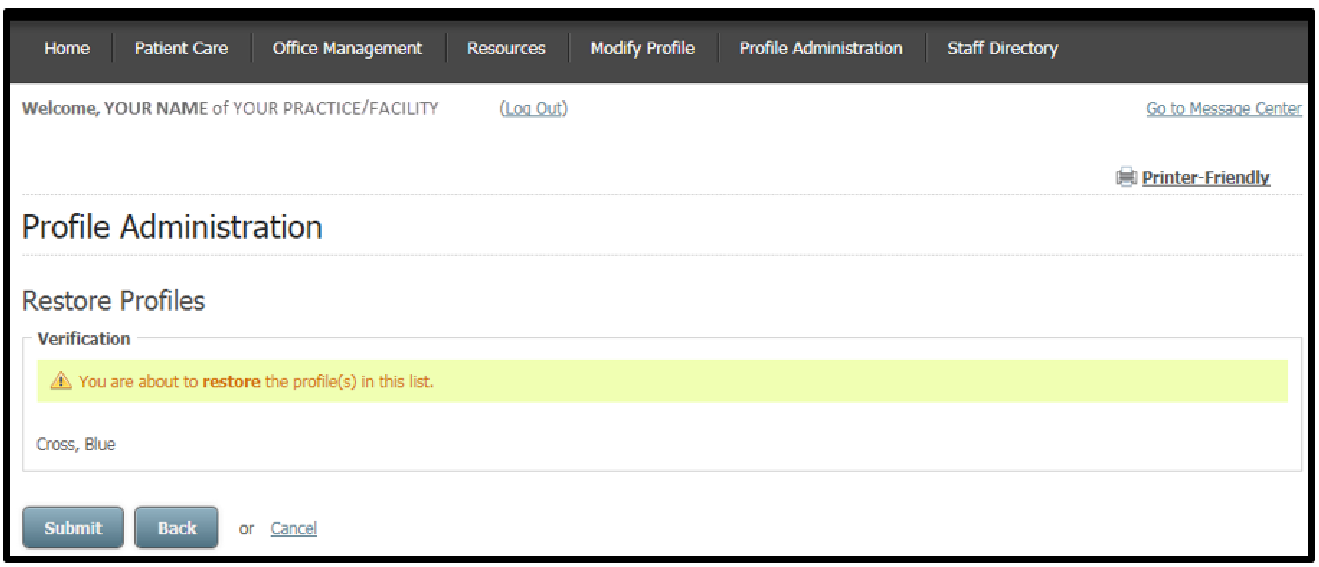
The confirmation screen displays next. Deactivated profiles can be restored within 60 days of deactivation date. Profiles that remain deactivated for more than 60 days will be purged from My Insurance Manager; they cannot be restored.



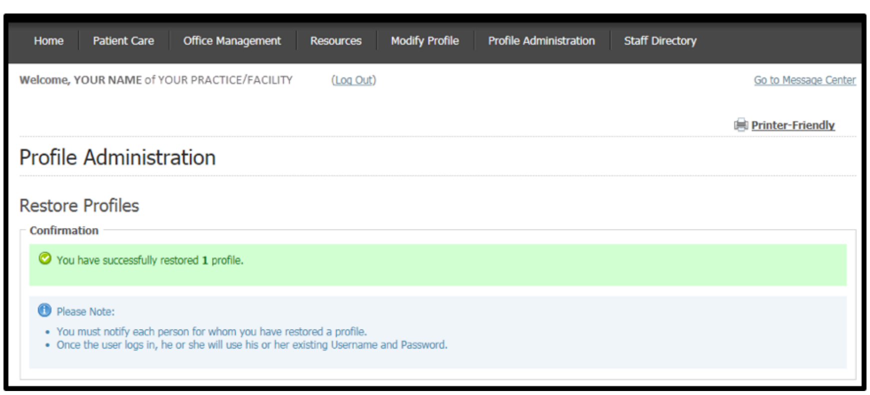
From the Profile Administration menu, select Restore Profiles. Select the box(es) next to the profile(s) that will be reinstated. **Continue.**



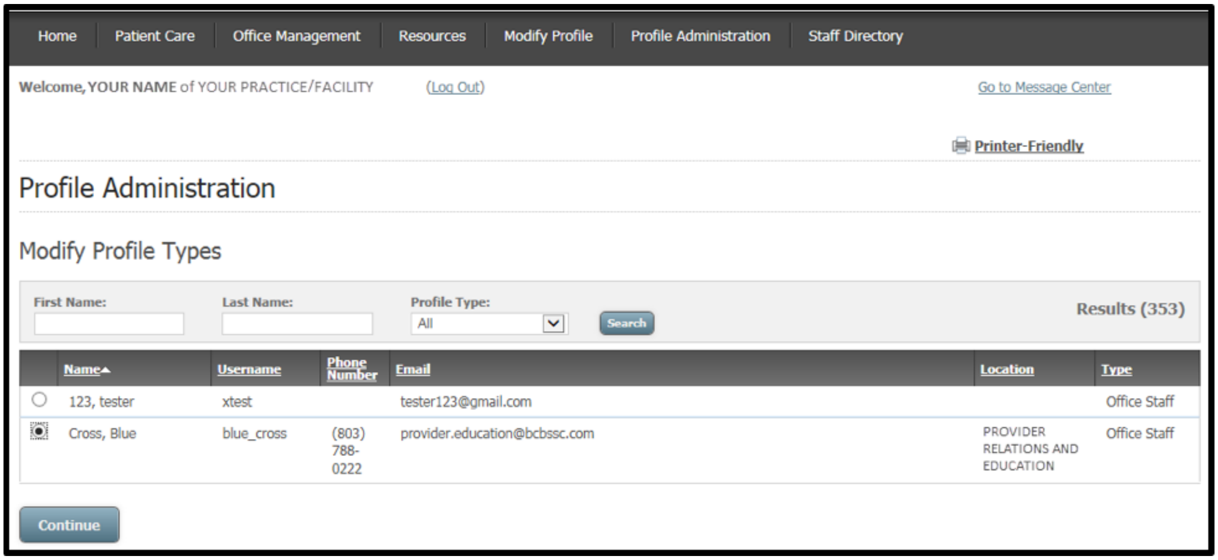
The next screen requires the profile administrator to verify the account that will be restored. **Submit** or **Back** to change the account selection.



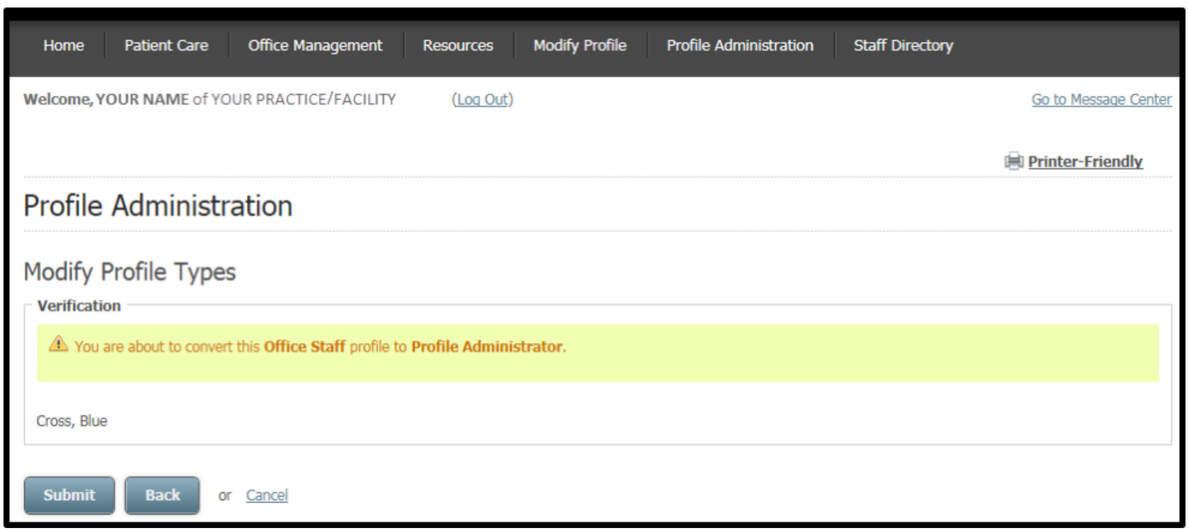
The confirmation screen displays next.



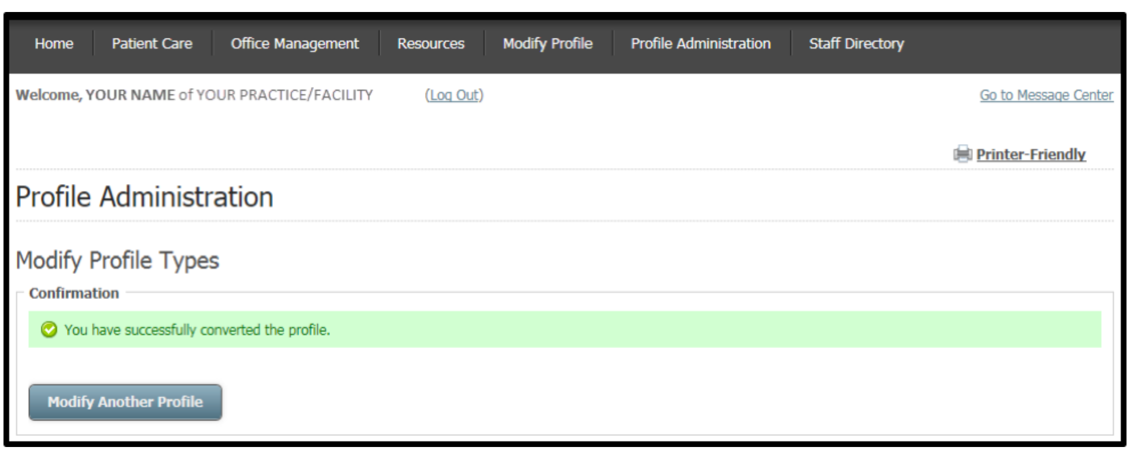
From the Profile Administration menu, select Modify Profile Types. Select the box(es) next to the profile(s) that will be modified. An Office Staff user account will convert to a Profile Administrator profile type; a Profile Administrator user account will convert to an Office Staff profile type. **Continue.**



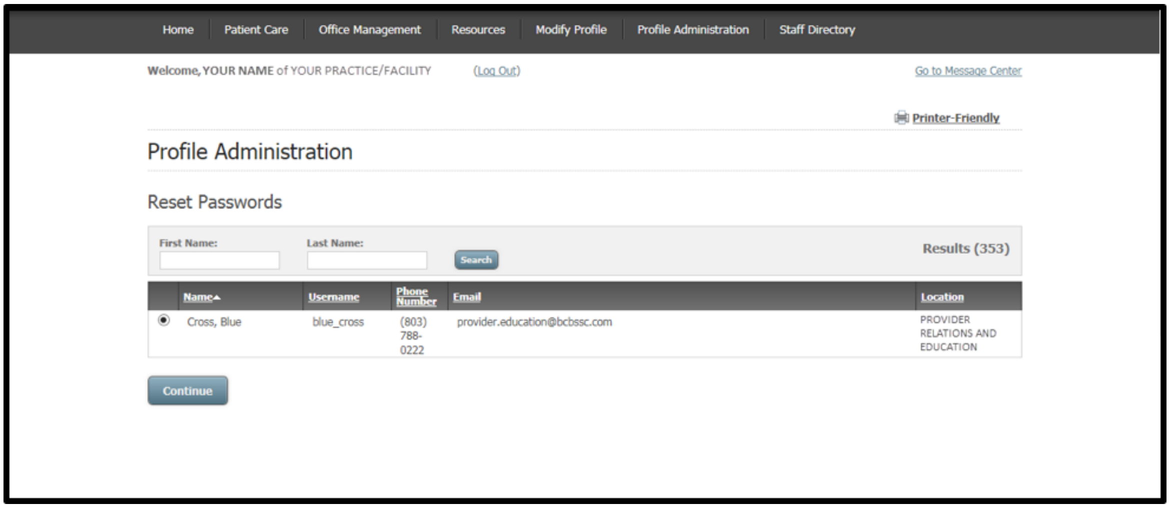
The next screen requires the profile administrator to verify the account that will be changed. **Submit** or **Back** to change the account selection.



The confirmation screen displays next. The profile administrator can now **Modify Another Profile.**

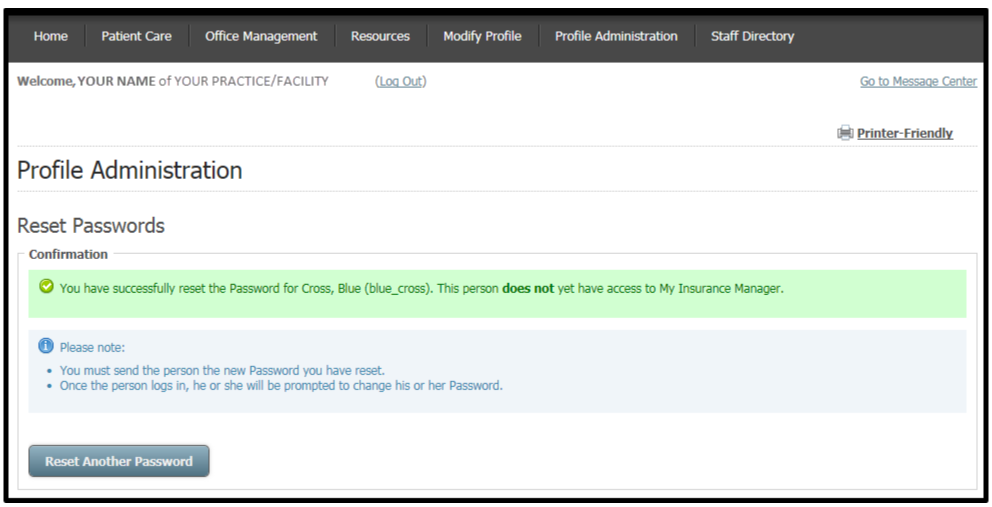


From the Profile Administration menu, select Reset Passwords. Select the box(es) next to the profile(s) that will have the password reset. **Continue.**



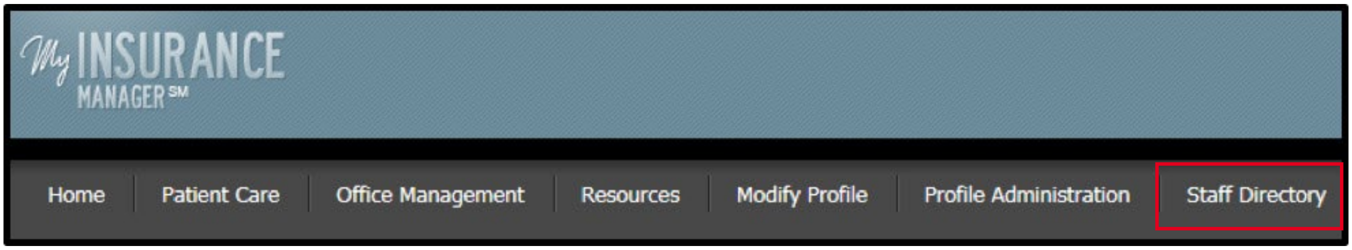
Input a temporary password (example: changeme01) that is eight to 25 characters in length. **Submit** or **Back** to select a different user account.

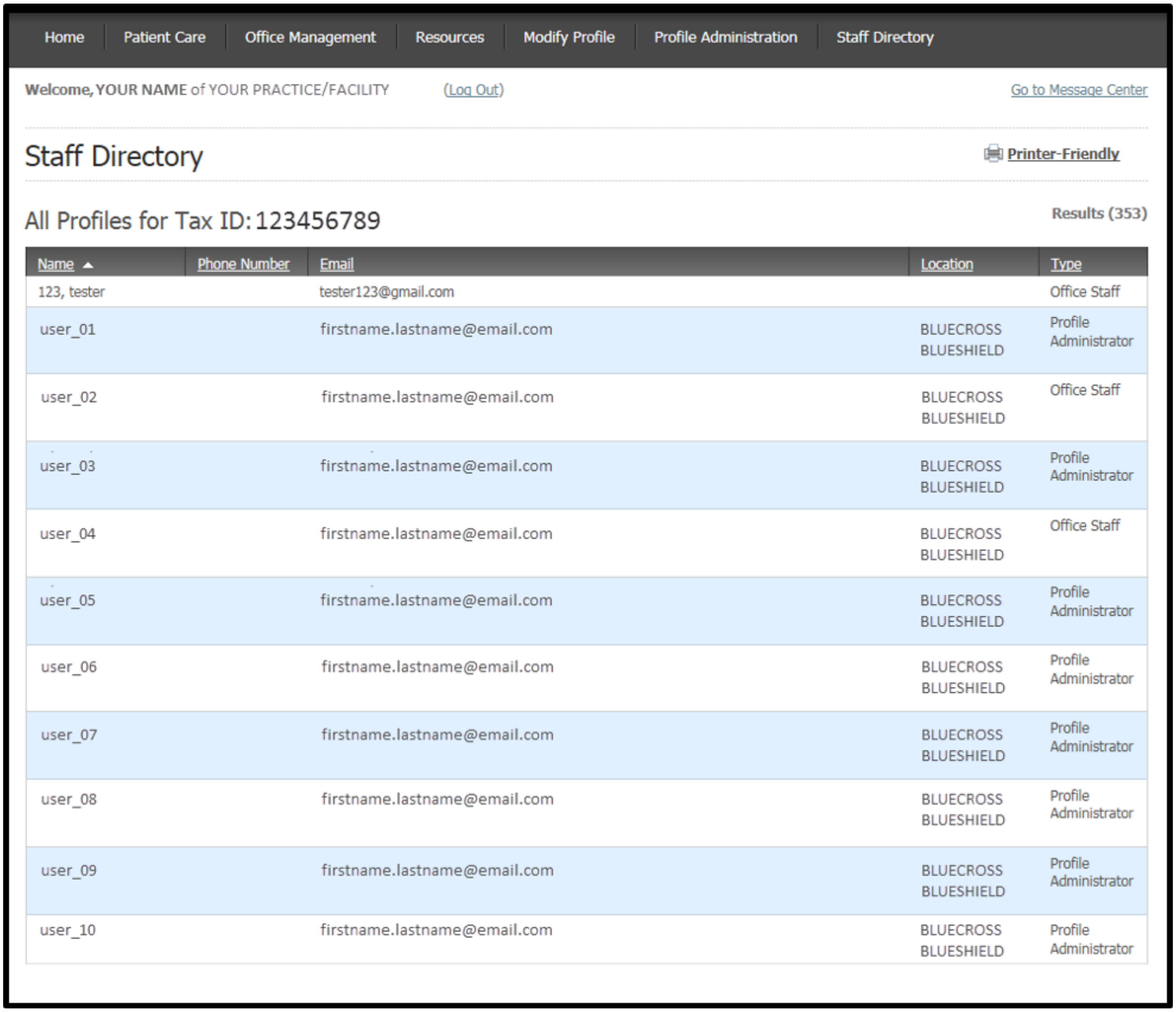
The confirmation screen displays next. The profile administrator can now **Reset Another Password.** The profile administrator must send the user the new temporary password that has been reset.



Staff Directory

The Staff Directory lists all user profiles associated with the account's Tax ID. When you select Staff Directory from the menu, a list of all staff members with profiles in My Insurance Manager will display.




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

Staff Directory

Printer-Friendly

All Profiles for Tax ID: 123456789

Results (353)

Name	Phone Number	Email	Location	Type
123, tester		tester123@gmail.com		Office Staff
user_01		firstname.lastname@email.com	BLUECROSS BLUESHIELD	Profile Administrator
user_02		firstname.lastname@email.com	BLUECROSS BLUESHIELD	Office Staff
user_03		firstname.lastname@email.com	BLUECROSS BLUESHIELD	Profile Administrator
user_04		firstname.lastname@email.com	BLUECROSS BLUESHIELD	Office Staff
user_05		firstname.lastname@email.com	BLUECROSS BLUESHIELD	Profile Administrator
user_06		firstname.lastname@email.com	BLUECROSS BLUESHIELD	Profile Administrator
user_07		firstname.lastname@email.com	BLUECROSS BLUESHIELD	Profile Administrator
user_08		firstname.lastname@email.com	BLUECROSS BLUESHIELD	Profile Administrator
user_09		firstname.lastname@email.com	BLUECROSS BLUESHIELD	Profile Administrator
user_10		firstname.lastname@email.com	BLUECROSS BLUESHIELD	Profile Administrator

Special Instructions

The Role of Provider Relations in Using My Insurance Manager

Provider Relations team members help you understand how to get the information you need using our self-help provider tools. Our provider advocates are well-informed and able to help you with inputting information in My Insurance Manager to get eligibility and benefits, submit a claim and other web-based portal functions. If you need training or assistance on how to use My Insurance Manager, please contact your Provider Relations Consultant.

Getting Support from Provider Services

Provider Services representatives are only available for claim inquiries and additional benefit details that you cannot get answers to using My Insurance Manager. Ask Provider Services is a feature in My Insurance Manager you can use to have a Provider Services representative respond to your question via email.

You can also use STATchat℠ to communicate directly with a Provider Services Representative via web-based phone call. STATchat rewards you by allowing you to move to the front of the queue to ask additional questions on the member you have researched within our provider portal. Ask as many questions as you like related to one member's account. The patient information prepopulates onto the Provider Service Representative's screen, so he or she is restricted to only answering questions related to the member from your original inquiry. Only questions about that patient are permitted for each STATchat call.

Those inquiries that you can resolve independently using My Insurance Manager will not be researched by Provider Services. You will be instructed to consult with a provider education advocate for additional training on how to use the provider portal properly.

Web Technical Support for My Insurance Manager

If you experience technical problems with using My Insurance Manager — such as a connectivity issue — please contact Web Technology Support by calling 855-229-5720.

In the event of any inconsistency between the information in this handbook and agreement(s) between you and BlueCross BlueShield of South Carolina or BlueChoice HealthPlan, the terms of such agreement(s) shall govern. The information included is general and in no event should be deemed to be a promise or guarantee of payment. We do not assume and hereby disclaim any liability for loss caused by errors or omissions in preparation and editing of this publication.