

BlueLine Reference Card

Professional



410-581-3535/1-800-248-8410 Enter Provider Type 4 – Enter 8-Digit Rendering Number – Then Select:

BlueLine Main Menu Options Menu Prompts

- To check Eligibility Press 1**
- 1** Verify birthdate
 - 2** Verify group number
 - 3** Coverage and waiting periods
 - 1** Overview
 - 2** Abbreviated
 - 4** Coordination of Benefits

- To check Benefits Press 2**
- | | |
|--------------------------|-----------------------------------|
| 1 Maternity | 10 OP Psychiatric |
| 2 Ambulance | 12 OP Substance Abuse |
| 3 Hospice | 13 IP Med/Surg |
| 4 Homecare | 14 OP Med/Surg |
| 5 Well child care | 15 OP Physical Therapy |
| 6 Abortion | 16 OP Occupational Therapy |
| 7 Sterilization | 17 DME |
| 8 Diagnostic | 18 Oxygen |
| 9 IP Psychiatric | 19 Free Form (see back) |

- To check the Status of Claims or Authorizations Press 3**
- 1** Claims overview
 - 2** Claims detail
 - 3** Inpatient authorizations
 - 4** Other authorizations

- To check Deductible, Stop Loss, Out-of-Pocket Press 4**
- 1** Deductible met to date
 - 2** Stop Loss/ Out-of-pocket met to date

- For Cost Containment Press 5**
- 1** Second surgical opinion
 - 2** Treatment plan requirements
 - 3** Admission review programs
 - 4** Case management
 - 5** Mental health management

- For Combinations Press 6**
- 1** Abbreviated eligibility, benefits, deductible
 - 2** Abbreviated eligibility, benefits
 - 3** Coverage overview, deductible, cost containment
 - 4** Abbreviated eligibility, benefits, deductible, second surgical opinion

- For Billboard Press 7**
- Listen to the menu and choose the option you wish to hear. These options are occasionally changed to meet current needs.

- Provider Types**
- 1** Institutional
 - 2** Pharmacy
 - 3** Dental
 - 4** Professional
 - 5** Routine Vision

- Sex/Relationship Codes**
- 1** Male Subscriber
 - 2** Male Spouse
 - 3** Male Dependent
 - 4** Female Subscriber
 - 5** Female Spouse
 - 6** Female Dependent

- Star Commands**
- *1** Change provider number
 - *2** Repeat information
 - *3** Save patient information, change menu options
 - *4** Change patient information, same menu option
 - *5** Instructions
 - *7** Terminate the call
 - *8** Return to previous menu
 - *0** Transfer to a Service Rep.

- Alphabetic Conversions To enter a letter, press:**
- | | | |
|---------|---------|---------|
| a = *21 | j = *51 | s = *74 |
| b = *22 | k = *52 | t = *81 |
| c = *23 | l = *53 | u = *82 |
| d = *31 | m = *61 | v = *83 |
| e = *32 | n = *62 | w = *91 |
| f = *33 | o = *63 | x = *92 |
| g = *41 | p = *71 | y = *93 |
| h = *42 | q = *72 | z = *94 |
| i = *43 | r = *73 | |

For example: To enter membership number R99999999, press *7399999999# To enter provider number XB99, press *92*2299#

Entering Dates

Use 8 digits in MMDDCCYY format. For January 1, 1999 enter 01011999. BlueLine will accept a date that is no more than 6 months into the future only for authorization inquiries.

Information provided by BlueLine does not constitute an approval of benefits

You need the patient's CareFirst BlueCross BlueShield membership number (do not enter the three letter prefix), sex/relationship code, birthdate, date of service (enter the date of your call if no service yet rendered).

Free Form Benefit Option 19 Instructions:

Press 2 for benefits, 19# then one of the benefit numbers listed below followed by the # sign.

Surgery / Anesthesia

21	Surgery, General, Inpatient
22	Surgery, General, Outpatient
23	Surgery, General, Office
27	Sterilization, Outpatient
28	Sterilization, Reverse
29	Sex Transformation
30	Cosmetic Surgery, Medically Necessary, Inpatient
31	Cosmetic Surgery, Elective
38	Surgery, Assistant
39	Emergency Accident, Surgery
44	General Anesthesia, Outpatient
168	Emergency Accident Anesthesia, Outpatient
281	Emergency Accident, Surgery, Office
287	General Anesthesia, Inpatient
289	Sterilization, Inpatient
290	Cosmetic Surgery, Medically Necessary, Outpatient
294	Emergency Accident Anesthesia, Office

Maternity

41	Maternity, Inpatient
42	Abortion, Therapeutic, Inpatient
43	Abortion, Elective, Inpatient
61	Maternity, Pre/Post Natal Care
181	Maternity, Diagnostic, Office
227	Abortion, Elective, Outpatient
230	Abortion, Elective, Office
241	Maternity, Diagnostic, Inpatient Component
242	Maternity, Diagnostic, Outpatient Component
243	Abortion, Therapeutic, Office
244	Abortion, Therapeutic, Outpatient
288	Maternity, Outpatient

Medical

57	Medical Visits, Inpatient
59	Extended Care Facility/Skilled Nursing Facility/Nursing Home Visits
60	Medical Visits, Office
67	Adult Physical, Office
69	GYN Exam, Routine, Outpatient
77	Consultation, Inpatient
80	Emergency Medical, Follow up, Office/Home
81	Emergency Medical, Office
83	Emergency Accident, Office/Home
86	Emergency Accident, Follow up, Office/Home
87	Concurrent Care
95	Second Surgical Opinion
96	Consultation, Office
187	Emergency Medical, Follow up, Outpatient
188	Emergency Medical, Outpatient
189	Emergency Accident, Outpatient
190	Emergency Accident, Follow up, Outpatient
223	Adult Physical, Ancillaries
248	GYN Exam, Routine, Office
268	Medical Visits, Outpatient
269	Consultation, Outpatient

Organ Transplant

45	Organ Transplant
56	Organ Transplant, Transportation
147	Organ Transplant, Meals/Lodging

Radiology

40	CAT Scan, Office
46	Radiology, Office
50	Mammography, Routine, Office
51	Emergency Medical Radiology Component, Outpatient or Office
53	Emergency Accident, Radiology
54	Radiology, Inpatient Component
55	Radiology, Outpatient Component
89	Machine Test, Office
92	Machine Test, Inpatient Component
93	Machine Test, Outpatient Component
136	Emergency Medical Machine Test Component, Outpatient or Office
183	Radiation Therapy, Office
195	Emergency Accident, Machine Test, Office

201	CAT Scan, Outpatient Component
202	CAT Scan, Inpatient Component
215	MRI, Outpatient Component
216	MRI, Inpatient Component
218	MRI Office
229	Radiation Therapy, Outpatient
267	Mammography, Outpatient Component, Routine
278	Emergency Accident, Machine Test, Outpatient Component
280	Emergency Accident, Radiology, Outpatient Component
292	Emergency Medical Machine Test, Outpatient or Office
293	Emergency Medical Radiology, Outpatient or Office
310	Surgical Pathology, Office

Pathology

128	Emergency Medical Lab Component, Outpatient or Office
130	Emergency Accident, Lab
131	Lab, Office/Home
134	Lab, Inpatient Component
135	Lab, Outpatient Component
137	Lab, Pap Smear, Routine
277	Emergency Accident, Lab, Outpatient Component
291	Emergency Medical Lab, Outpatient or Office
309	Preadmission Testing

Vision

124	Vision Therapy, Office
126	Eye Exam, Routine
160	Eye Exam, Non-Routine, Outpatient
161	Lens/Vision Aid, Non-Routine
247	Eye Exam, Non-Routine, Office
254	Vision Therapy, Outpatient

Drug

153	Drug, Legend
154	Drug, Non-Legend
155	Drug, Allergy Serum
156	Drug, Insulin
157	Drug, Contraceptive, Medically Necessary
158	Drug, Obesity
179	Drug, Deductible Benefit
180	Drug, Legend, MD Dispensed
184	Drug, Contraceptive, Routine

Physical and Occupational Therapy / Spinal Manipulation

76	Spinal Manipulation
108	Physical Therapy, Office
114	Occupational Therapy, Office
123	Physical Therapy, Inpatient
174	Emergency Accident, Physical Therapy
191	Occupational Therapy, Inpatient
251	Occupational Therapy, Outpatient
259	Emergency Accident, Spinal Manipulation

Mental Health/Substance Abuse

97	Psychiatric, Inpatient
99	Psychiatric, Office
102	Psychiatric, Testing, Office/Outpatient
159	Psychiatric, Drug
172	Psychiatric, Electroshock Therapy, Outpatient
209	Psychiatric, Group
271	Psychiatric, Inpatient, Additional Benefit
282	Pastoral Counseling
304	Psychiatric Pharmacologic Management, Outpatient or Office
306	Psychiatric Day/Night, Outpatient
315	Substance Abuse, Day/Night

Artificial Insemination/In vitro

25	Artificial Insemination
26	In vitro Fertilization
260	Artificial Insemination, Drugs
261	In vitro Fertilization, Drugs

Dental/Oral Surgery

35	Surgery, Oral, Inpatient
36	Surgery, Oral Outpatient/Office

141	Emergency Accident Dental, Outpatient
142	Dental, Non-Accident
295	Emergency Accident Dental, Office

Hearing

166	Hearing Exam, Non-Routine, Outpatient
167	Hearing Aid
169	Hearing Exam, Routine, Outpatient
199	Hearing Test, Routine
249	Hearing Exam, Non-Routine, Office
250	Hearing Exam, Routine, Office

Pediatrics

63	Well Child Care, Office
64	Newborn Care, Inpatient
65	Newborn Care, Home/Outpatient
70	Well Child Care, Immunization
225	Well Child Care, Ancillaries

Other

34	Temporomandibular Joint (TMJ)
71	Injection, Non-Surgical
72	Rabies Shots
73	Allergy Testing
74	Photochemotherapy
94	Medical Supplies
105	Chemotherapy, Inpatient
111	Radiation Therapy, Inpatient
117	Speech Therapy, Office
119	Respiratory Therapy, Inpatient
122	Acupuncture Therapy, Outpatient
125	Education Therapy, Self Help/Care Training
127	Renal Dialysis, Outpatient
143	Ambulance
144	Infant Medical Foods
145	Orthopedic Appliance, Purchase
146	Orthopedic Appliance, Rental
148	Hospice Care
149	Durable Medical Equipment, Purchase
150	Durable Medical Equipment, Rental
151	Oxygen
162	Private Duty Nurse, Inpatient
163	Private Duty Nurse, Home
164	Oxygen, Equipment
165	Nurses Aide, Non-Home Health
170	Emergency Accident, Medical Supplies
171	Chronic Rehabilitation, Outpatient
176	Emergency Accident, Ambulance
177	Emergency Accident, Private Duty Nurse
178	Emergency Accident, Immunization
182	Chemotherapy, Office
186	Allergy Injection
192	Speech Therapy, Cleft Lip/Palate, Outpatient
193	Speech Therapy, Inpatient
200	Contraceptive Devices
208	Individual Case Management, Integrated Health Management
213	Hospice, Bereavement
214	Hospice, Family Counseling
228	Chemotherapy, Outpatient
231	Respiratory Therapy, Outpatient
232	Respiratory Therapy, Office
245	Acupuncture Therapy, Office
246	Cardiac Rehabilitation, Office
252	Speech Therapy, Outpatient
253	Speech Therapy, Cleft Lip/Palate, Office
255	Emergency Accident, Legend Drugs
256	Emergency Accident, DME, Rental
257	Emergency Accident, DME, Purchase
258	Emergency Accident, Acupuncture Therapy
262	Renal Dialysis, Office
276	Emergency Accident, Acupuncture Therapy, Outpatient
283	Chronic Rehabilitation, Inpatient
285	Medical Rehabilitation, Inpatient
286	Medical Rehabilitation, Outpatient
297	Nutritional Counseling, Outpatient
299	Family Planning, Outpatient
303	Infusion Therapy, Outpatient