

Verify eligibility and Mental Health and Behavioral Health benefits for Blue Shield of California plan members

What you'll need to get started:

- A username and password to log in to your Provider Connection account.
- One of the following for the **MEMBER** whose eligibility and benefits you are verifying:
 - Subscriber ID
 - Last name, first name, and date of birth
 - Social Security Number (SSN)

What you should know:

- Blue Shield of California subscriber eligibility and benefit information is available for up to twenty-four months before today's date and one year before a member's termination.
- Eligibility information is updated daily.

Instructions

1. Log in to www.blueshieldca.com/provider.

2. The *Verify eligibility* tool is available from the home page AND from the *Eligibility & benefits* section in the white navigation menu. Click that link, then click **Verify eligibility** from the drop-down menu.

The *Verify eligibility* screen displays.

3. Keep the defaults for SEARCH SINGLE MEMBER and Blue Shield of California coverage type.

- If you select SEARCH MULTIPLE MEMBERS, you may search for up to 10 subscriber IDs.

4. Enter member data using one of the following:

- Subscriber ID (9-16 alpha numeric characters)
- Member name and date of birth
- Last four (4) digits of social security number (SSN) and date of birth

5. Click **Search**.

The screenshot displays the Blue Shield of California provider portal. At the top right, a red callout '1' points to the 'Log in / Register' button. Below the navigation menu, a red callout '2' points to the 'Verify eligibility' link under the 'Eligibility & benefits' section. The main content area is titled 'Verify eligibility' and has two tabs: 'SEARCH SINGLE MEMBER' (highlighted with a red callout '3') and 'SEARCH MULTIPLE MEMBERS'. Under 'Member coverage / card type', the 'Blue Shield of California / Promise Health Plan' option is selected, with a red callout '4' pointing to it. Below this, there are three search methods: 'SEARCH BY SUBSCRIBER ID', 'SEARCH BY MEMBER NAME', and 'SEARCH BY MEMBER SSN, MBI, OR CIN'. Each method has a 'Search' button, with a red callout '5' pointing to the 'Search' buttons of all three methods.

The search results display.

6. Check eligibility. Green "Eligible" status means the member is active.
7. Click the Benefits link to view benefits information for the member's plan.

The *Member benefits* screen displays.

8. To view Mental Health benefits, type "mental" in the **Search categories** box and click **Search**.
 - Alternately, scroll down to view the benefits, or use the Benefit categories link on the left menu.

Member name: MEMBER, X (Callout 6) Status: Eligible (Callout 6)

Details ID Card Benefits (Callout 7) Claims

Subscriber ID: 912345678	Date of birth: 04/16/1963	Gender: Female	Member address: 123 MAIN STREET, ANYTOWN, CA 90000
Plan name: Platinum Full PPO 250/15 OffEx	Plan type: Commercial PPO (Fully insured)	Coverage effective / start date: 01/01/2023	Coverage end / redetermination date: Present
Relationship to subscriber: Subscriber	Subscriber name: MEMBER, X	PCP name: DOCTOR, X	Office visit copay: In-network-\$15

Benefit summary (Callout 8)

Search categories Search Clear search

Acupuncture Services		
Benefit	Network	Copay
Acupuncture Services		
Acupuncture for treatment of nausea or chronic pain by a Dr of Medicine	Participating Provider	\$25 per visit
Acupuncture for treatment of nausea or chronic pain by a Dr of Medicine	Non-Participating Provider	40% Coinsurance

The **Mental Health and Substance User Disorder** Benefits are displayed.

To view benefit details, click any link.

9. In this example, view details for outpatient mental health with a participating provider. Click **Mental health** under the **Outpatient** header in the **Participating Provider** row.

Benefit summary

mental

Search

Clear search

Mental Health and Substance Use Disorder Benefits		
Benefit	Network	Copay
Behavioral Health Treatment		
Home or other setting, (non institutional)	Participating Provider	10% Coinsurance
Home or other setting, (non institutional)	Non-Participating Provider	40% Coinsurance
Office location	Participating Provider	10% Coinsurance
Office location	Non-Participating Provider	40% Coinsurance
Inpatient Facility		
Mental health	Participating Provider	10% Coinsurance
Mental health	Non-Participating Provider	40% Coinsurance
Mental health residential treatment	Participating Provider	10% Coinsurance
Mental health residential treatment	Non-Participating Provider	40% Coinsurance
Substance use disorder	Participating Provider	10% Coinsurance
Substance use disorder	Non-Participating Provider	40% Coinsurance
Substance use disorder residential treatment	Participating Provider	10% Coinsurance
Substance use disorder residential treatment	Non-Participating Provider	40% Coinsurance
Inpatient Professional		
Mental health	Participating Provider	10% Coinsurance
Mental health	Non-Participating Provider	40% Coinsurance
Substance use disorder	Participating Provider	10% Coinsurance
Substance use disorder	Non-Participating Provider	40% Coinsurance
Outpatient		
Mental health	Participating Provider	\$15 per visit
Mental health	Non-Participating Provider	40% Coinsurance
Opioid treatment	Participating Provider	10% Coinsurance
Opioid treatment	Non-Participating Provider	40% Coinsurance

9

The **Mental Health and Substance Use Disorder Benefits – Outpatient – Mental health** details are displayed.

10. View copayment information at the top of the screen.

11. Review the Additional information about this Category section.

- Note that Blue Shield’s Mental Health Service Administrator (MHSA) administers Mental Health and Substance Use Disorder services.
- The MHSA Participating Provider network is separate from Blue Shield’s Participating Provider network.
- Providers and members can use the Find a Doctor tool on [blueshieldca.com](https://www.blueshieldca.com) to access the MHSA Participating Provider network.
- Mental health services provided through Teladoc are administered by Blue Shield, not the MHSA.

If MHSA is shown on this screen (as in this example), you must have a contract with Magellan to provide in-network service to the member.

Mental Health and Substance Use Disorder Benefits - Outpatient - Mental health

10

Copayment:

Network	Copayment	Subject to Annual Medical Deductible?	First Dollar Coverage	Applies to Annual Copayment Maximum?	Limit	Maximum
Participating Provider	\$15 per visit	No	N/A	Yes	N/A	N/A
Non-Participating Provider	40% Coinsurance	Yes	N/A	Yes	N/A	N/A

Additional information about this service:

There are no additional details for the service.

Category

11

Additional information about this Category:

Mental Health and Substance Use Disorder Benefits

Blue Shield’s Mental Health Service Administrator (MHSA) administers Mental Health and Substance Use Disorder services from MHSA Participating Providers for Members in California. Blue Shield administers Mental Health and Substance Use Disorder services from MHSA Non-Participating Providers for Members in California. See the Out-of-area services section for an explanation of how Benefits are administered for out-of-state services. Mental health services provided through Teladoc are administered by Blue Shield, not the MHSA. See the Teladoc section for more information.

Mental Health and Substance Use Disorder Benefits include Medically Necessary basic health care services and Intermediate services, at the full range of levels of care, including but not limited to residential treatment, Partial Hospitalization Program, and Intensive Outpatient Program, and prescription Drugs.

The MHSA Participating Provider must get prior authorization from the MHSA for all non-emergency Hospital admissions for Mental Health and Substance Use Disorder services, and for certain outpatient Mental Health and Substance Use Disorder services. See the Medical Management Programs section for more information about prior authorization.

The MHSA Participating Providers network is separate from Blue Shield’s Participating Provider network. Visit [blueshieldca.com](https://www.blueshieldca.com) and click on Find a Doctor to access the MHSA Participating Provider network.

If you are unable to schedule an appointment with a Participating Provider for Mental Health and Substance Use Disorder services, contact Mental Health Customer Service. The MHSA will help you either schedule an appointment with a Participating Provider, or select a Non-Participating Provider in your area within five calendar days and contact you regarding available appointment times. For any Covered Services, you will be responsible for no more than the Cost Share for seeing a Non-Participating Provider. The MHSA may work with you to transition to a Participating Provider when one becomes available.

Upon request to Mental Health Customer Service, and at no cost to you, Mental Health Customer Service will provide the clinical review criteria and any training material or resources used to conduct utilization reviews for Mental Health and Substance Use Disorder benefits and services.

Office visits