



# How to Access Medicare Advantage Tools

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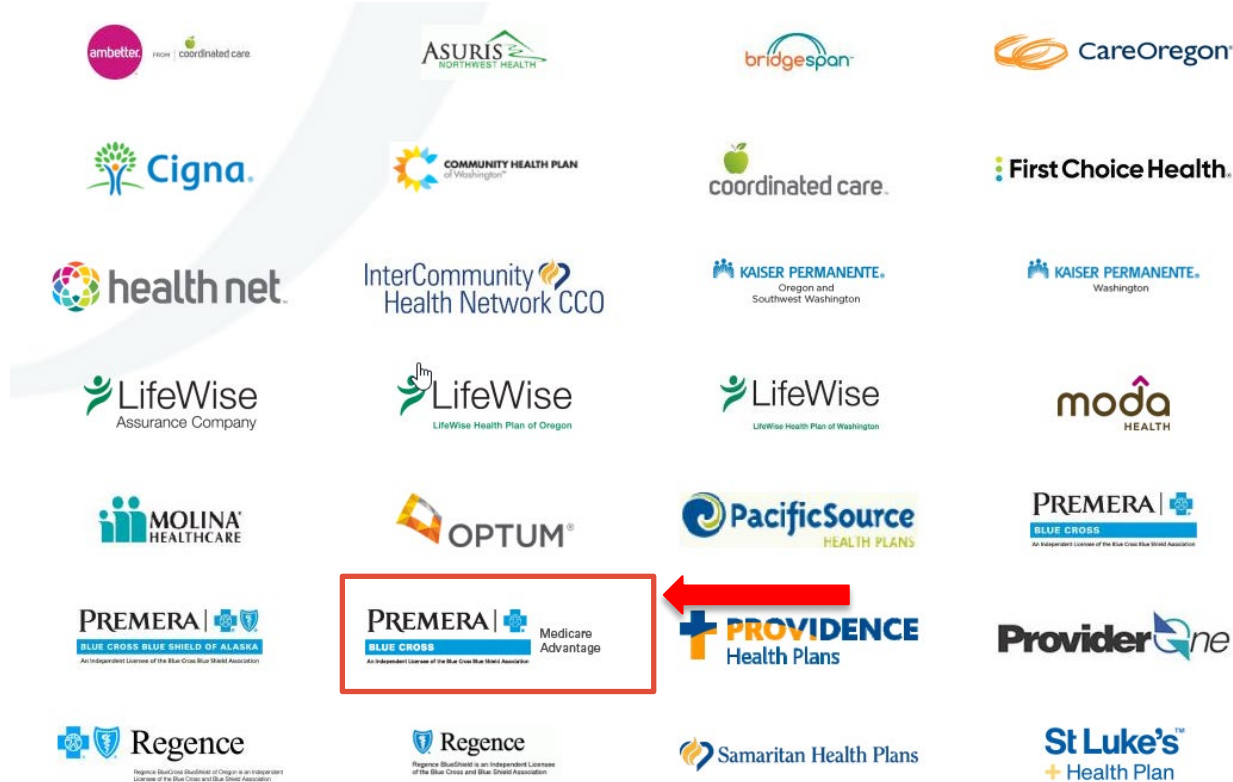


# Contents

- [OneHealth Port](#)
- [Eligibility & benefits lookup tool](#)
- [Claims and payment tool](#)

# OneHealthPort log in page

Select Medicare Advantage from OneHealthPort single sign-on page



# Medicare Advantage single sign-on page

OneHealthPort | SSO

[SSO Home](#)

[Login](#)

[Register](#)

[Manage Account](#)

[Support](#)

[FAQs](#)

[About](#)

## Premera Blue Cross Medicare Advantage

Medical

Dental

Support Phone Number  
888.850.8526

Support Hours  
Mon-Fri, 8:00 a.m. to 5:00 p.m.

Site URL  
[Premera Medicare Advantage](#)



# Medicare Advantage landing page

premera.com/wa/provider/medicare-advantage/



Sign i

Providers ~

Providers

For Providers

Medicare Advantage

Medical

Dental

Tools

Utilization Review

Library

Pharmacy

## Information for Premera Medicare Advantage Medical Providers

Premera Blue Cross Medicare Advantage plans offer your patients Medicare benefits -plus extra benefits for prescriptions and fitness programs - all in one easy-to-use plan. Medicare open enrollment occurs annually, October 15 through December 7.

Check out our provider training guides to learn more about our Medicare Advantage plans:

- [Quick reference guide \(.pdf\)](#)
- [About our plans \(.pdf\)](#)
- [How to access online tools \(.pdf\)](#)
- [Referrals, prior auth, medical management, and appeals \(.pdf\)](#)
- [Referral and prior auth tool guide \(.pdf\)](#)
- [Pharmacy - Part D \(.pdf\)](#)
- [Annual wellness visits \(.pdf\)](#)

## Secure medical tools and resources for providers

Verify eligibility and benefits, check claim status and manage your patient's care.

[Log in to tools and resources](#)



### Provider directory

Search for doctors, hospitals, and other specialists within the Premera Blue Cross Medicare Advantage Provider Network.

### Forms

Find all the [Medicare Advantage medical forms](#) you need, including:

- Appeal and reconsideration forms
- Care Management forms
- Referral forms

### Contact us

Find the right [contact for Medicare Advantage](#) questions, including:

- General information
- Member benefits and eligibility
- Technical issues

Current location: WA ▾

### Policies

[View medical and pharmacy policies.](#)

### Sign up for email news

Get the latest Premera Medicare Advantage provider news and policy updates.

[Sign up today!](#)

### Resources

Check out the latest [CMS updates and provider news](#)

To learn more about participating with Premera while caring for your Medicare Advantage patients, view our [Provider Reference Manual \(.pdf\)](#)

View sample ID cards,






# Eligibility & Benefits



# Medicare Advantage secure landing page

PREMERA | 

BLUE CROSS

Log out

Home


Eligibility & Benefits

Claims & Payments

Referral & Prior Authorization

Resources

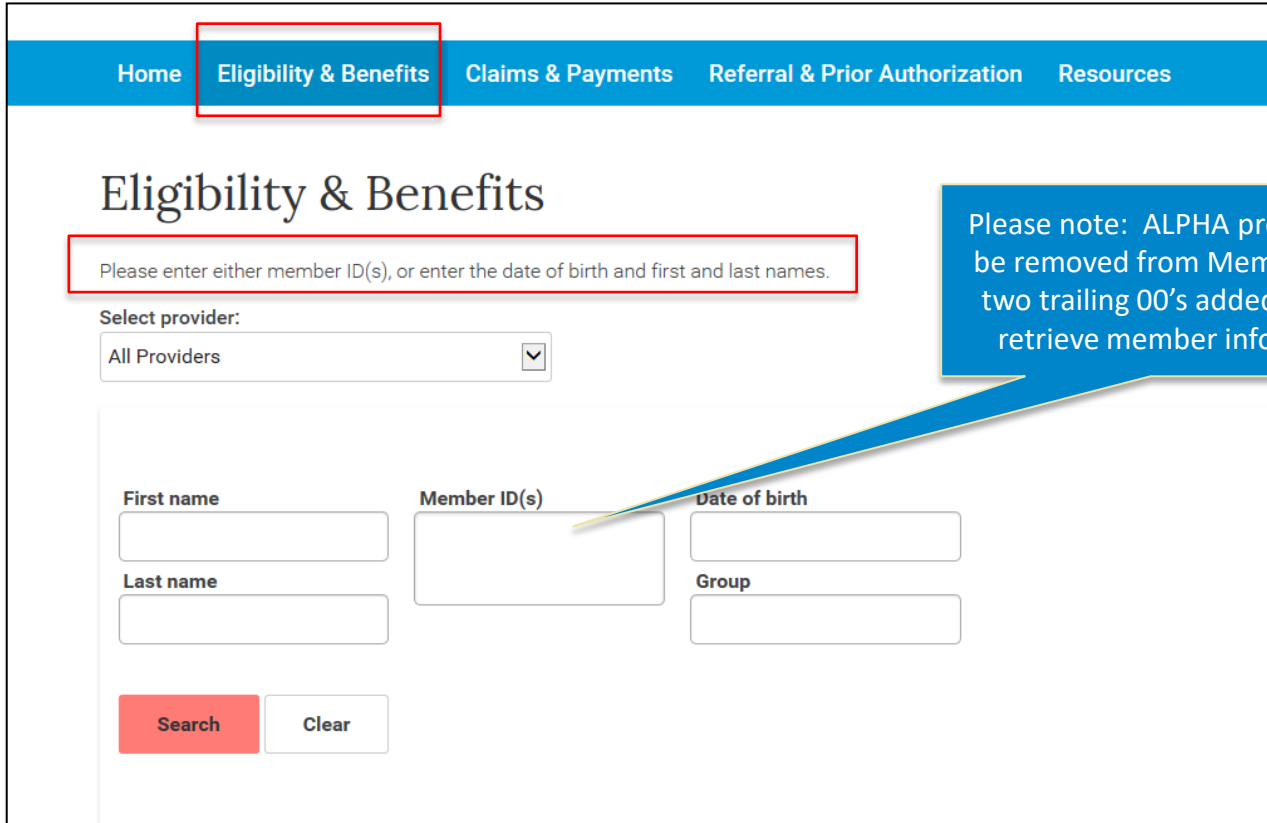
## Information for Premera Medicare Advantage Providers



### Quick Links

- [Find a doctor](#)
- [Pharmacy services](#)
- [Medication therapy management program](#)
- [Medical, Payment, and Pharmacy Policies](#)
- [Forms](#)
- [Contact us](#)
- [Medicare Advantage home](#)

# Eligibility & Benefits



Home Eligibility & Benefits Claims & Payments Referral & Prior Authorization Resources

## Eligibility & Benefits

Please enter either member ID(s), or enter the date of birth and first and last names.

Select provider:

All Providers

First name	Member ID(s)	Date of birth
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last name		Group
<input type="text"/>		<input type="text"/>

Please note: ALPHA pre-fix should be removed from Member ID and two trailing 00's added to end to retrieve member information.



# Eligibility & Benefits

[Home](#) [Eligibility & Benefits](#) [Claims & Payments](#) [Referral & Prior Authorization](#) [Resources](#)

## Eligibility & Benefits

To search for a member:

- Enter the Member ID (Multiple Member IDs can be entered. Press the 'enter' key after each Member ID)

or

- Enter the Last name, Date of birth (MM/DD/YYYY) and Group

or

- Enter the First name, Last name, Date of birth and Group

### Claims

First name

Member ID(s)

Date of birth

Last name

Group

Search

Clear

Member ID	Member name	Date of birth	Group number	Gender	Effective date	Address	Phone number	Term date

◀◀

◀

Page 1 of 1

▶

▶▶

1 record found.

Click on member name to access plan details

# Eligibility & Benefits details page

[Log out](#)

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## Claims

[HMO \(PDF\)](#)  
Details of your health and prescription coverage

First name	Member ID(s)	Date of birth
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last name	Group	
<input type="text"/>	<input type="text"/>	

[Search](#) [Clear](#)

## Benefits for Member

Member name	WANEY DECKER	Group name	Premera Blue Cross Medicare Advantage
Member ID	1131134000	Group ID	110609
Status	Active	Date of birth	06/21/1950
Gender	Female	Work phone	
Phone number	360-437-6978	Type of product	Medical
Email address			
Address	24214 47TH AVENUE NE, ARLINGTON WA 98223		
PCP name	Latta, Shannon		

## Coverages

HMO -

Current benefit effective date	01/01/2018	Term date	
Group ID	110609		
Plan	2018PR0001		

Information for WANEY DECKER

[Back to Search Results](#) | [Print View](#)

View Summary of Benefits  
and Coverage Here

## Benefits

Use the links below to view the summary plan description for each of your benefits:

- [2020 Summary of Benefits](#)
- [2020 Summary of Benefits \(all plans\) - Spanish](#)
- [2021 Summary of Benefits](#)
- [2021 Summary of Benefits \(all plans\) - Spanish](#)

Benefits

# Delegated payer information

Benefit plan name	Type	Coverage begin date	Coverage end date
2021PR0001	HMO	01/01/2021	
2020PR0001	HMO	01/01/2020	12/31/2020
2019PR0001	HMO	01/01/2019	12/31/2019
2018PR0001	HMO	01/01/2018	12/31/2018
2017PR0001	HMO	01/01/2017	12/31/2017

This members claims  
are handled through  
Optum

## Delegated Payer Information

Group Name	Payer ID	Payer Address	Coverage Begin Date	Coverage End Date
NPN	LIFE1	Optum Care Network PO Box 30788 Salt Lake City, UT 84130-0788	1/1/2021	

Information for

[Back to Search Results](#)

[Print View](#)



# Claims & Payment Tool

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# Claims & Payments

[Home](#)[Eligibility & Benefits](#)[Claims & Payment](#)[Referral & Prior Authorization](#)[Resources](#)

## Claims & Payments

To search for a member claim:

- Enter a claim ID. (Multiple claim IDs can be entered. Press the 'enter' key after each claim ID.)

or

- Enter the member ID and a begin/end date (MM/DD/YYYY).
  - Note: When entering the Member ID, remove the alpha prefix and always include trailing double zeros to get accurate results.

Select Provider:

All Providers ▼

Claim ID

Member ID

Begin date

Check number

Date of birth

End date

Search

Clear

# Claims & Payment search

PREMERA

BLUE CROSS

Log out

HomeEligibility & BenefitsClaims & PaymentsReferral & Prior AuthorizationResources

## Claims & Payments

To search for a member claim:

.

or

• Enter the member ID, date of birth (MM/DD/YYYY), and a begin/end date

Select provider:

All Providers

Claim ID

N636190001

Member ID

Begin date

9/18/2017

Date of birth

End date

Search

Clear

Claim Number	Member name	Service date	Total charge	Amount paid	Member responsibility	Paid date	Check number	Claim status
N636190001		8/29/2017	(\$39.17)	\$0.00	\$0.00			INFORMATION RECEIVED

Page 1 of 1

1 claim found.

Download Results

Terms and Conditions

Privacy Practices

PPI Agreement

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Click on claim number to access claim details



# Claims & Payments details page

Claim #200609003647

Member name

Dates of service

05/25/2020

Member ID

Service provider

Subscriber

18

Total charges

\$285.00

Patient account number

Total Charges

Not covered

Paid amount

\$285.00

-

\$0.00

=

\$116.01

Claim status

Processed

## Payment details

Received date	Payee	Type	Amount	Paid date	Check address	Check number
//		EFT	\$31,690.40	06/10/2020		

## Claim details

CPT description	CPT code	Explanation code	HIPPA code	Units	Charges	Member responsibility	Not covered	Plan paid
	99233				\$285.00	\$0.00/ \$0.00	\$0.00	\$116.01
Total				0	\$285.00	\$0.00/ \$0.00	\$0.00	\$116.01

## Reason code descriptions

99233 - SBSQ HOSPITAL CARE/DAY 35 MINUTES

## Disclaimer

THIS IS NOT A BILL

( )

[Back to Search Results](#)

[Print View](#)


[View Explanation of Payment \(EOP\)](#)




# Example of Explanation of Payment-page 1

CHECK

Premiera Blue Cross  
c/o Finance Operations  
134 Turnpike Rd., Suite 200  
Southborough, MA 01772

**PREMERA** |   
**BLUE CROSS**  
An Independent Licensee of the Blue Cross Blue Shield Association



Provider Name  
Address Line 1  
Address Line 2  
City, State Zip


Tax ID No: 88888888  
Check No: 40000017  
Check Amount: \$7.24  
Check Date: 12/09/2016  
NPI: 999999999

Payee Summary

NPI	Payee Name	Payment Amount
999999999	Your Provider Ambulance	\$7.24

THE BACK OF THIS DOCUMENT CONTAINS AN ARTIFICIAL WATER MARK. VIEW BY HOLDING AT AN ANGLE.

Premiera Blue Cross  
c/o Finance Operations  
134 Turnpike Rd., Suite 200  
Southborough, MA 01772

**PREMERA** |   
**BLUE CROSS**  
An Independent Licensee of the Blue Cross Blue Shield Association

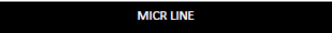
Number: 40000017  
Date: 12/09/2016  
Amount: \$7.24

POSITIVE PAY ACCOUNT  
NPI: 999999999

PAY SEVEN DOLLARS AND 24/100 CENTS

PAY TO THE ORDER OF Provider Name  
Address Line 1  
Address Line 2  
City, State Zip

THIS CHECK IS NOT VALID 6 MONTHS FROM DATE  
CHECK SIGNATURE

 MICR LINE

AUTHORIZED SIGNATURE

# Example of Explanation of Payment-page 2

## EXPLANATION OF PAYMENTS

Premera Blue Cross Medicare Advantage Plans  
P.O. Box 261396  
Plano, TX 75026

Tax ID No: 888888888

Check No: 40000017

Check Amount: \$7.24

Check Date: 12/09/2016

NPI: 999999999

Provider Name  
Address Line 1  
Address Line 2  
City, State Zip

Patient Name: first m last			Provider/Prof: Prov name			Network: network					
Insured No: 12345678900			Provider/Prof No: 1234567								
Patient No: 12345678900			Employer name: name								
Pat Acct No: 999999999			Employer Id: 999999999			Claim No: 1234567890					
Service Dates	Service Code	Qty	Charged	Allowed	Disc	Co_Ins	Deduct	CoPay	Sequest	W.Hold	Paid Amount
01/01/2017 - 01/01/2017	12345	1	\$110.00	\$3.62	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3.62
EOP Codes: 123,456											
Denial Reason: Text											
01/01/2017 - 01/01/2017	12345	1	\$110.00	\$3.62	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3.62
EOP Codes: 123,456											
Denial Reason: Text											
Totals this claim:			\$220.00	\$7.24	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7.24
Interest Paid this claim:											\$0.00
Adjustment Amount this claim:											\$0.00
Total Paid this claim:											\$7.24
Paid by Primary Payer:											\$0.00
EOP Explanation											
123 explanation text											
456 explanation text											

# Example of Explanation of Payment-page 3

Totals this claim:		-\$110.00	-\$100.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-\$100.00
Interest Paid this claim:										\$0.00
Adjustment Amount this claim:										\$0.00
Total Paid this claim:										\$200.00
Paid by Primary Payer:										\$0.00
Adjustment Reason: 38 Miscellaneous										
EOP Explanation										
123 explanation text										
456 explanation text										

This is an offset of a previously processed claim									
Patient Name: first m last			Provider/Prof: Prov name						
Insured No: 12345678900			Provider/Prof No: 1234567			Network: network			
Patient No: 12345678900			Employer name: name						
Pat Acct No: 999999999			Employer Id: 999999999			Claim No: 1234567890			
Claim ID	First Service Date	Paid Amt	Interest	Adj Amt	Sub Total	Recv. Refund	Total	Refund	Chk Adj
1234567890	01/01/2017	\$100.00	\$0.01	\$0.00	\$100.01	\$100.01	\$0.00	\$0.00	-\$100.01
Explanation of Check Adjustments									
Claim ID	Patient Acct. No.	Paid Amt	Interest	Adj Amt	Sub Total	Recv. Refund	Total	Refund	Chk Adj
1234567890	12345678900	\$100.00	\$0.01	\$0.00	\$100.01	\$100.01	\$0.00	\$0.00	-\$100.01
Totals		\$100.00	\$0.01	\$0.00	\$100.01	\$100.01	\$0.00	\$0.00	-\$100.01
Adjustment Reason: 12345678900 38 Miscellaneous									

# Resources



[Home](#) [Eligibility & Benefits](#) [Claims & Payment](#) [Referral & Prior Authorization](#) [Resources](#)

## Resources

Here you'll find additional resources to help you as a Premera Medicare Advantage provider.

- [Policies](#)
- [Reference Manual \(PDF\)](#)
- [Forms](#)
- [Quick Reference Guide \(PDF\)](#)
- [About our plans \(PDF\)](#)
- [How to access online tools \(PDF\)](#)
- [Referrals, prior auth, medical management and appeals \(PDF\)](#)
- [Pharmacy Part D \(PDF\)](#)
- [Annual Wellness Visits \(PDF\)](#)
- [PCP Roster](#)
- [PCP Roster- Report Distribution](#)
- [837I Claim Transaction/Encounter Guide](#)
- [837P Claim Transaction/Encounter Guide](#)

Additional resources can also be found on the [Medicare Advantage Provider homepage](#)

# Medical, payment, and pharmacy policies

[Policies & Prior Authorization Resources](#)[Enhanced Benefits Information](#)

## Policies & Prior Authorization Resources

All Premiera Medicare Advantage plans use the same prior authorization list for medical and pharmacy Part B codes. We recommend you review the list before you submit your requests. Have a question? [Contact Us](#).

For more information and resources, including access to our referral and prior authorization tool, please visit the [Medicare Advantage Provider homepage](#)

- [Prior Authorization List \(full list\)](#)- updated 10/30/2023
- [Prior Authorization List \(Part B drugs only\)](#)- updated 10/30/2023
- Effective May 1, 2023, Premiera no longer uses local rules

Premiera Blue Cross follows CMS coverage guidance when reviewing codes when available. CMS coverage documents, including National Coverage Determinations and Local Coverage Determinations, can be found by using the [CMS Medicare Coverage Database search tool](#). Premiera also uses InterQual® clinical criteria and medical policies. InterQual® releases new criteria updates throughout the year so criteria may frequently change. For more information, please review the applicable [Premiera MA EOC](#) and medical policies.

## Medical and Payment Policies

- [Ambulatory Event Monitors and Mobile Cardiac Outpatient Telemetry](#)
- [Bronchial Thermoplasty for the Treatment of Asthma](#)
- [Cosmetic and Reconstructive Surgery](#)
- [Cryosurgical Ablation of Primary or Metastatic Liver Tumors](#)
- [Gastric Electrical Stimulation](#)
- [Gender Transition/Affirmation Surgery and Related Services](#)
- [Gender Transition/Affirmation Surgery and Related Services](#)- effective 1/1/24
- [Implantable Bone-Conduction and Bone-Anchored Hearing Devices](#)
- [Myoelectric Prosthetic and Orthotic Components for the Upper Limb](#)
- [Nerve Graft with Radical Prostatectomy](#)
- [Non-Emergent Air Ambulance Services](#)
- [Peroral Endoscopic Myotomy for Treatment of Esophageal Achalasia](#)

## Pharmacy Part B policies

- [Self-Administered Drug \(SAD\) Exclusion List](#)
- [General Drug Utilization Management Policy](#)
- [Part B Drug Inflation Rebate Drug List](#)

## Medical Policy Updates

[November 2023 \(PDF\)](#)  
[September 2023 \(PDF\)](#)  
[August 2023 \(PDF\)](#)  
[July 2023 \(PDF\)](#)  
[June 2023 \(PDF\)](#)  
[April 2023 \(PDF\)](#)  
[March 2023 \(PDF\)](#)  
[February 2023 \(PDF\)](#)  
[January 2023 \(PDF\)](#)

## Archived Medical Policy Updates

## Part B Policy Updates

[November 2023 \(PDF\)](#)- effective 1/1/2024  
[September 2023 \(PDF\)](#)- effective 11/7/2023  
[August 2023 \(PDF\)](#)- effective 10/2/2023  
[July 2023 \(PDF\)](#)- effective 9/5/2023  
[June 2023 \(PDF\)](#)- effective 7/1/2023  
[April 2023 \(PDF\)](#)- effective 4/1/2023  
[March 2023 \(PDF\)](#)- effective 3/5/2023 & 5/1/2023  
[February 2023 \(PDF\)](#)- effective 1/23/2023  
[January 2023 \(PDF\)](#)- effective 12/5/2022 & 1/1/2023  
[December 2022 \(PDF\)](#)- effective 1/1/2023 & 2/1/2023  
[September 2022 \(PDF\)](#)- effective 9/1/2022 & 11/1/2022  
[August 2022 \(PDF\)](#)- effective 6/7/2022 & 10/3/2022  
[July 2022 \(PDF\)](#)  
[June 2022 \(PDF\)](#)- effective 8/1/2022  
[April 2022 \(PDF\)](#)- effective 3/7/2022 & 6/7/2022  
[March 2022 \(PDF\)](#)- effective 5/3/2022  
[January 2022 \(PDF\)](#)



# Reporting website issues

Description of Issue	Phone Number
Medicare Advantage homepage, find a Doctor, and forms	800-722-9780
Medicare Advantage secure pages and online tools	888-850-8526