

800-447-7828

September 2024

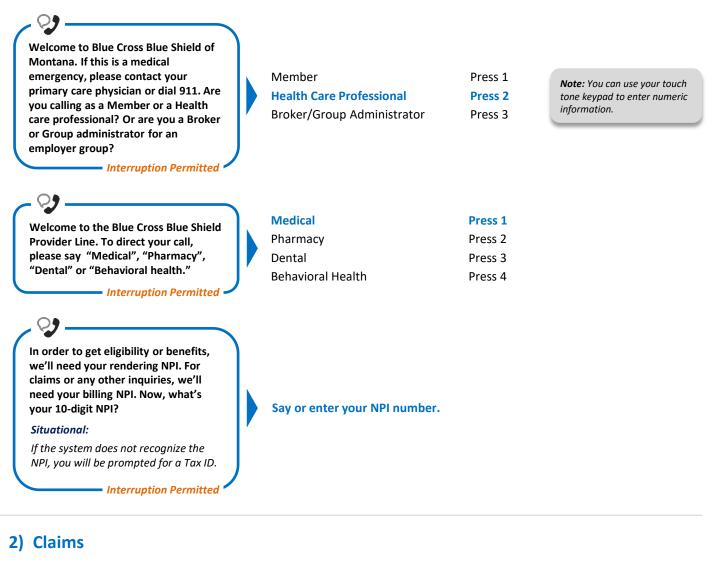
Claims IVR Caller Guide

Hours of Availability: Monday – Friday 5:00 a.m. to 10:30 p.m. (MT); Saturday 5:00 a.m. to 5:00 p.m. (MT); Sunday – Closed 1 of 3

Utilize your keypad when possible
Avoid using cell phones
Minimize background noise
Mute your phone when you are not speaking

This caller guide does not apply to Medicare Advantage members.

1) Getting Started



Which can I help you with? Eligibility and benefits, claims, authorization and referral management, or joining the network?

Interruption Permitted

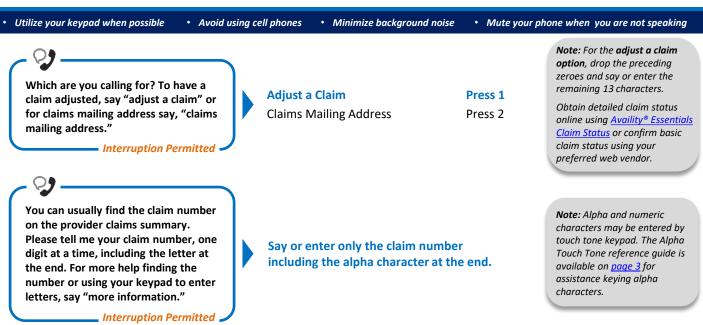
Eligibility and Benefits Claims Authorization and Referral Management Joining the Network Press 1 Press 2

Press 3

Press 4

Note: At a later point you will have the option to return here (Main Menu).

Claims IVR Caller Guide



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• Minimize background noise

· Mute your phone when you are not speaking

Alpha Touch-Tone Reference

Alpha touch-tone is available as an alternative to voicing alpha-numeric mixed information.

To enter a subscriber ID, group or claim number containing alpha character(s):

- 1) Press the star key (*) to begin a letter sequence
- 2) Press the number key containing the desired letter (e.g., press 2 for A, B or C)
- 3) Press 1, 2, 3 or 4 to indicate the position the letter is listed on the selected key (e.g., press *21 to enter A)

| Α | = | *21 |
|---|---|-----|
| В | = | *22 |
| C | = | *23 |
| | | |
| D | = | *31 |
| E | = | *32 |
| F | = | *33 |
| G | = | *41 |
| н | = | *42 |
| I | = | *43 |
| J | = | *51 |
| К | = | *52 |
| L | = | *53 |
| М | = | *61 |
| Ν | = | *62 |
| 0 | = | *63 |
| Р | = | *71 |
| Q | = | *72 |
| R | = | *73 |
| S | = | *74 |
| т | = | *81 |
| U | = | *82 |
| V | = | *83 |
| W | = | *91 |
| Х | = | *92 |
| Y | = | *93 |
| z | = | *94 |
| | | |

Group Number

| Ex. 1 | Y | Ν | 1 | 2 | 3 | 4 |
|-------|-----|-----|-----|---|---|---|
| Press | *93 | *62 | 1 | 2 | 3 | 4 |
| Ex. 2 | 1 | 2 | к | 3 | 4 | 5 |
| Press | 1 | 2 | *52 | 3 | 4 | 5 |

Subscriber ID

| Ex. 1 | Α | 1 | Ν | 2 | 3 | 4 | 5 | 6 | 7 |
|-------|-----|---|-----|-----|---|---|---|---|---|
| Press | *21 | 1 | *62 | 2 | 3 | 4 | 5 | 6 | 7 |
| Ex. 2 | 0 | 9 | 2 | т | 7 | 6 | 8 | | |
| Press | 0 | 9 | 2 | *81 | 7 | 6 | 8 | | |

Note: Exclude three-character prefix when entering the subscriber ID.

Claim Number

| Ex. 1 | 2 | 1 | 3 | 4 | F | 5 | 6 | 7 | 0 | х |
|-------|---|---|---|---|-----|---|---|---|---|-----|
| Press | 2 | 1 | 3 | 4 | *33 | 5 | 6 | 7 | 0 | *92 |
| F., 3 | • | | | | | | | | | |
| EX. Z | 2 | 0 | 1 | т | 8 | 7 | 6 | 5 | 0 | С |

Note: The claim number should be 13 digits.

Have questions or need additional education? Email our Provider Education Consultants.

Be sure to include your name, direct contact information and Tax ID or Billing NPI.

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