Provider Portal
Vision Care Providers – Quick Reference Card

The Fundamentals

To transmit a claim:

- In the **Patient Identification** box, enter the Policy and Identification numbers **exactly** as they appear on the member Identification Card.
- In the **Patient Information** box, verify the appropriate patient is selected from available drop-down list.
- In the **Claim Submission** box, enter your claim details to pre-determine the benefits. Be sure to **submi**t your claim to finalize the result. This is an important step, regardless of the pre-determination results.
- You have the option to print a copy of the **Claim Payment Result** if required for your records, or for a member who requires an official receipt for coordination of benefits purposes.

** Claims must be submitted within 90 days from the date of service **

Claims not accepted:

- Clients with Saskatchewan Blue Cross as their secondary carrier.
- Claims for Blue Cross plans not provided this functionality.

** Clients covered by multiple Blue Cross plans may claim electronically under their primary plan only. **

Provider Profiles

Use the **Provider Information** box to guarantee claims are submitted under the correct Provider ID (each provider will have their own ID).

Use the **Update Profile** option located near the top right corner of your screen to update name, location, billing details, and/or contact information.

Provider Payments

Payments to the provider are made every second week for the amount due for all claims received by Blue Cross during the submission period.

Payments will be accompanied by a detailed claims summary.

Assistance

For assistance with your electronic submissions, or to request a reversal/adjustment to a previously submitted claim, please contact our Customer Service team:

1.800.667.6853

Hours of Portal Operation:
Monday to Saturday – 6:00a.m. – 10:00p.m. | Sundays – 6:00a.m. – 6:30p.m.

The following internet browsers are supported:
Microsoft Edge | Google Chrome | Firefox