



MyBlue HealthSM Key Contacts List

Provider Customer Service	
Provider Customer Service	Phone: 1-800-451-0287
Member Customer Service	Phone: 1-888-697-0683
Language Line offers Translation Services This option makes hundreds of languages available within 5 minutes.	Phone: 1-800-874-9426 for Group business supply code 70432 1-866-874-3972 for Retail business supply code 70664
<p>Availity[®] Portal (<i>Obtain eligibility and benefits, authorizations and referrals, claims, claim status and remittance.</i>)</p> <p>Availity Authorizations & Referrals (<i>Online tool used to request referrals for specialty care, prior authorizations for inpatient admissions and select outpatient services managed by Blue Cross and Blue Shield of Texas Medical Management.</i>)</p> <ul style="list-style-type: none"> • Availity Portal: http://www.availity.com • Availity Phone Number: 1-800-Availity (282-4548) • Availity Information: https://www.bcbstx.com/provider/claims/edi_availity.html • Availity Authorizations & Referrals Information: https://www.bcbstx.com/provider/tools/availity-authorizations.html 	
AIM Specialty Health[®] (AIM)	Phone: 1-800-859-5299 Website: AIM ProviderPortalSM
Behavioral Health	Magellan Behavioral Health Providers of Texas, Inc. (Magellan) Phone: 1-800-729-2422 Website: https://www.magellanprovider.com/MagellanProvider/do/LoadHome
BCBSTX Medical Care Management Department (<i>Clinical information for a prior authorization or predetermination for medical healthcare services, i.e., inpatient or outpatient hospitalization and/or surgical procedure</i>)	Phone: 1-855-896-2701
Electronic Medical Claim Submission	MyBlue Health Electronic Payor ID: 84980
EyeMed[®]	Phone: 1-844-684-2255 Website: https://eyemed.com/en-us
Medical Appeals & Grievances	MyBlue Health Appeals & Grievances P O Box 660044 Dallas, TX 75266-0044 Appeals & Grievances Phone: 1-800-521-2227 Fax: 1-877-389-7594



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<p>Outpatient Clinical Reference Lab</p>	<p>Statewide In-Network Clinical Labs for HMO members include:</p> <ul style="list-style-type: none"> • Clinical Pathology Laboratory (CPL) - contact CPL at 1-800-595-1275 or visit CPL's website • Laboratory Corporation of America® (LabCorp) - contact LabCorp at 1-888-522-2677 or visit LabCorp's website • Quest Diagnostics, Inc.® - contact Quest at 1- 888-277-8772 or visit Quest's website <p>Refer to Provider Finder[®] https://www.bcbstx.com/find-a-doctor-or-hospital for other MyBlue Health in-network lab providers.</p>
<p>Paper Medical Claim Submission Address</p>	<p>MyBlue Health P.O. Box 660044 Dallas, TX 75266-0044</p>
<p>Provider Status <i>(To verify a provider's status, access the Online Provider Directory)</i></p>	<p>Online Provider Directory (Provider Finder)</p>
<p>Virtual Visits Telemedicine and Telehealth Services</p>	<p>Website: https://www.bcbstx.com/provider/clinical/tele_services.html</p>

Important Note: Always make a copy of the front & back of the member's ID card to confirm you have the correct telephone numbers.

- By clicking this link, you will go to a new website/app ("site"). This new site may be offered by a vendor or an independent third party. The site may also contain non-Medicare related information. In addition, some sites may require you to agree to their terms of use and privacy policy.
- Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to Blue Cross and Blue Shield of Texas.
- AIM Specialty Health is an independent medical benefits management company that provides utilization management services for Blue Cross and Blue Shield of Texas (BCBSTX).
- The vendors are solely responsible for the products or services they offer. If you have any questions regarding any of the products or services they offer, you should contact the vendor(s) directly. Please note that verification of eligibility and benefits information, and/or the fact that any pre-service review has been conducted, is not a guarantee of payment. Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility and the terms of the member's certificate of coverage applicable on the date services were rendered.