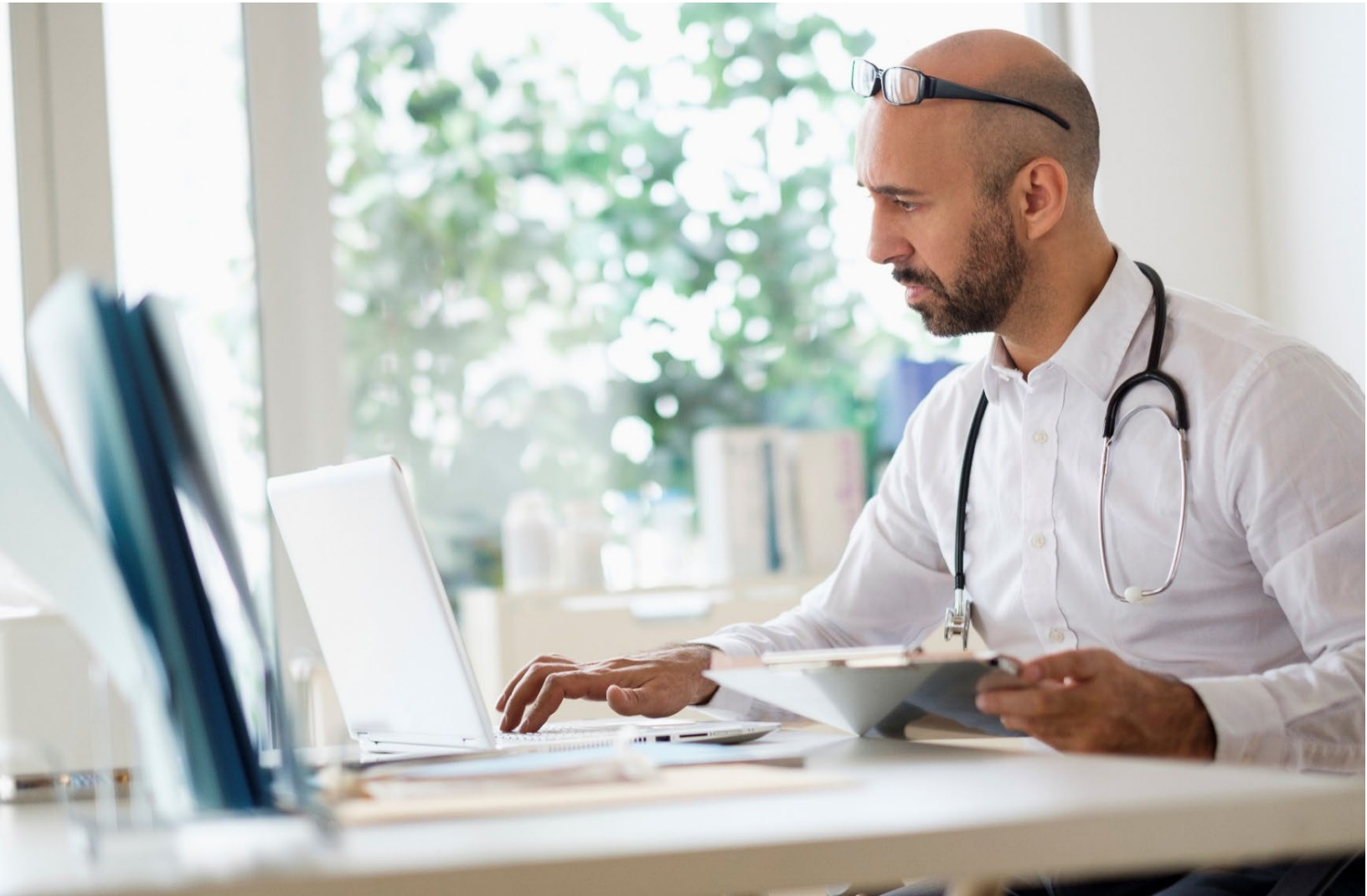


Registration & Maintenance Guide for Medical Providers & Facilities



Excellus  

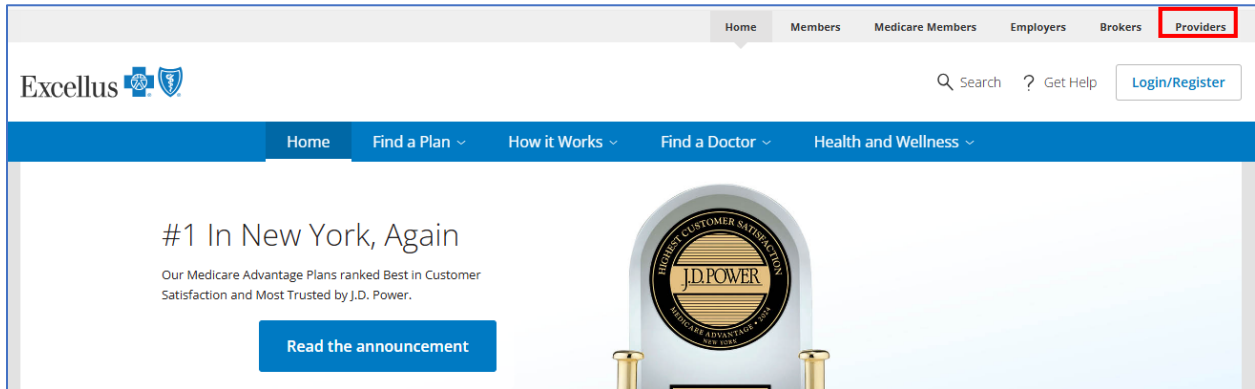
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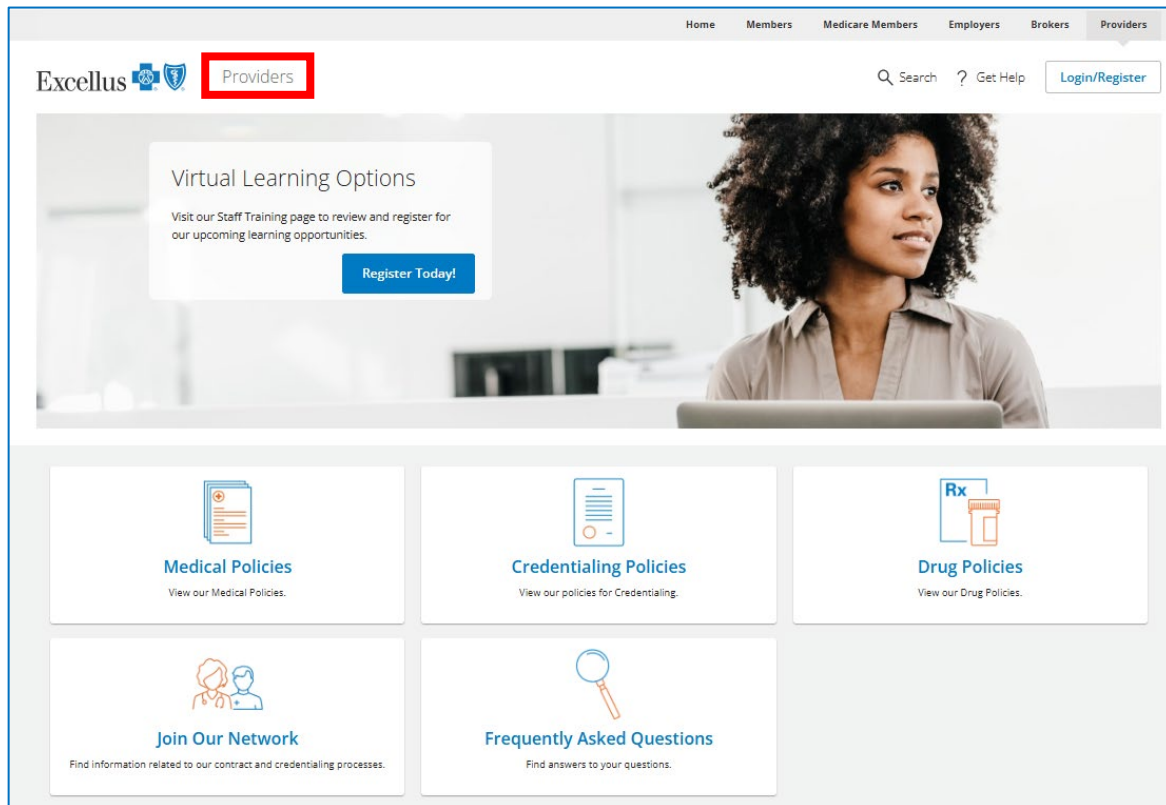
Excellus BlueCross BlueShield Provider Portal

The Excellus BCBS website (ExcellusBCBS.com) contains an area that is dedicated to the various types of providers we partner with. This area, called the Provider portal, can be located by selecting **Providers** at the top of our Home page.



The provider home page, is viewable to all users, and includes information such as how to join our network and links to our corporate medical, credentialing, and drug policies.

The Frequently Asked Questions tile provides answers to common questions such as how to register, log in, and manage staff access to the secure portion of the provider portal.



Secure Portion of the Provider Portal

The secure portion of the provider portal includes proprietary information that can only be viewed by participating practices, hospitals, and facilities and their staff who have completed their provider portal registration.

Behavioral Health Solo Provider Registration

For **Behavioral Health solo providers only**, please follow the steps below to register:

1. Visit our website using the following link: <https://provider.excellusbcb.com/contact>.
2. In the Connect with our friendly, knowledgeable teams section, scroll down until you see Web Help Desk.

Contact Us

Connect with our friendly, knowledgeable teams.

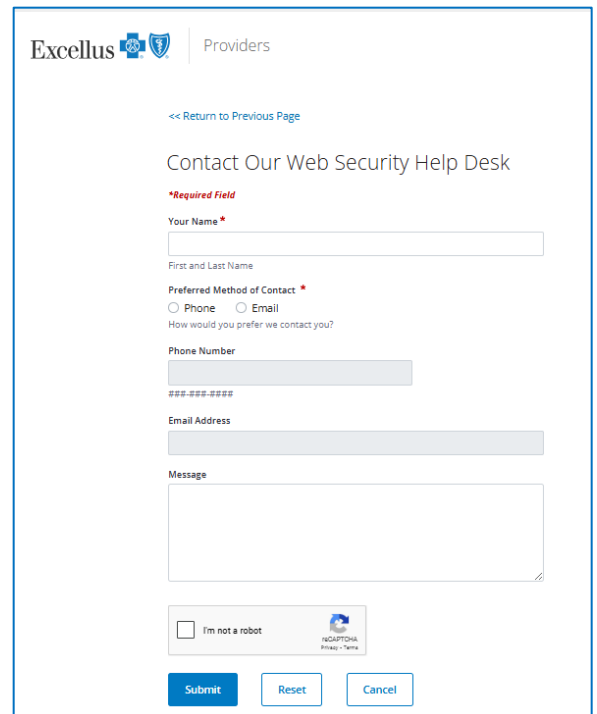
<p>Provider Relations</p> <p>Contact your Provider Relations representative to request assistance</p> <p>Contact By: Provider.Relations@excellus.com</p>	<p>Customer Care</p> <p>Contact Customer Care for eligibility/benefits and claims inquiries</p> <p>Contact By: Call 1-800-920-8889 Submit an inquiry online</p> <p>Monday - Thursday: 8 a.m. - 5 p.m. ET Friday: 9 a.m. - 5 p.m. ET Closed Weekdays: Noon - 1 p.m. ET</p>	<p>Dental Customer Care</p> <p>Contact Dental Customer Care for eligibility/benefits and claims inquiries</p> <p>Contact By: Call 1-800-724-1675 Submit an inquiry online</p> <p>Monday - Thursday: 8 a.m. - 5 p.m. ET Friday: 9 a.m. - 5 p.m. ET Closed Weekdays: Noon - 1 p.m. ET</p>	<p>Pharmacy Help Desk</p> <p>For medication prior authorization, benefit questions, or to reach a pharmacist</p> <p>Contact By: Call 1-800-920-8889 Submit an inquiry online Fax 1-800-956-2397</p>
<p>EDI Solutions</p> <p>EDI Solutions can help with electronic transactions such as claim submissions, eligibility and claim status</p> <p>Contact By: EDI.Solutions@excellus.com</p>	<p>Web Help Desk</p> <p>Contact the Web Help Desk for technical support</p> <p>Contact By: Call 1-800-278-1247 Submit an inquiry online</p> <p>Monday - Thursday: 8 a.m. - 4:30 p.m. ET Friday: 9 a.m. - 4:30 p.m. ET</p>	<p>Risk Adjustment</p> <p>Contact our team of certified risk adjustment coders who can assist with documentation and coding tips specific to your practice.</p> <p>Contact By: RiskAdjustment.Provider.Contact@excellus.com</p>	<p>HEDIS Quality</p> <p>Contact our Healthcare Quality Coordinator team for more information on HEDIS.</p> <p>Contact By: Call: 1-800-768-8177 HEDIS.Clinical.Team@excellus.com</p>

3. Click on **Submit an inquiry online**.

4. When the Contact Our Web Security Help Desk online form appears, fill out all required fields. Be sure to include the following:

- Your Name, include first and last name
- Select Email as preferred contact method
- Enter your Email address
- In the Message area, add the following:
 - Potential Username (5-8 characters)
 - Last four digits of Social Security Number
 - Your P# ()
 - Your Tax ID number
 - Provider Role (e.g., Provider or Doctor)
- Check the *I'm not a robot* box
- Click **Submit**

Note – if the potential username is already taken, another will be assigned.



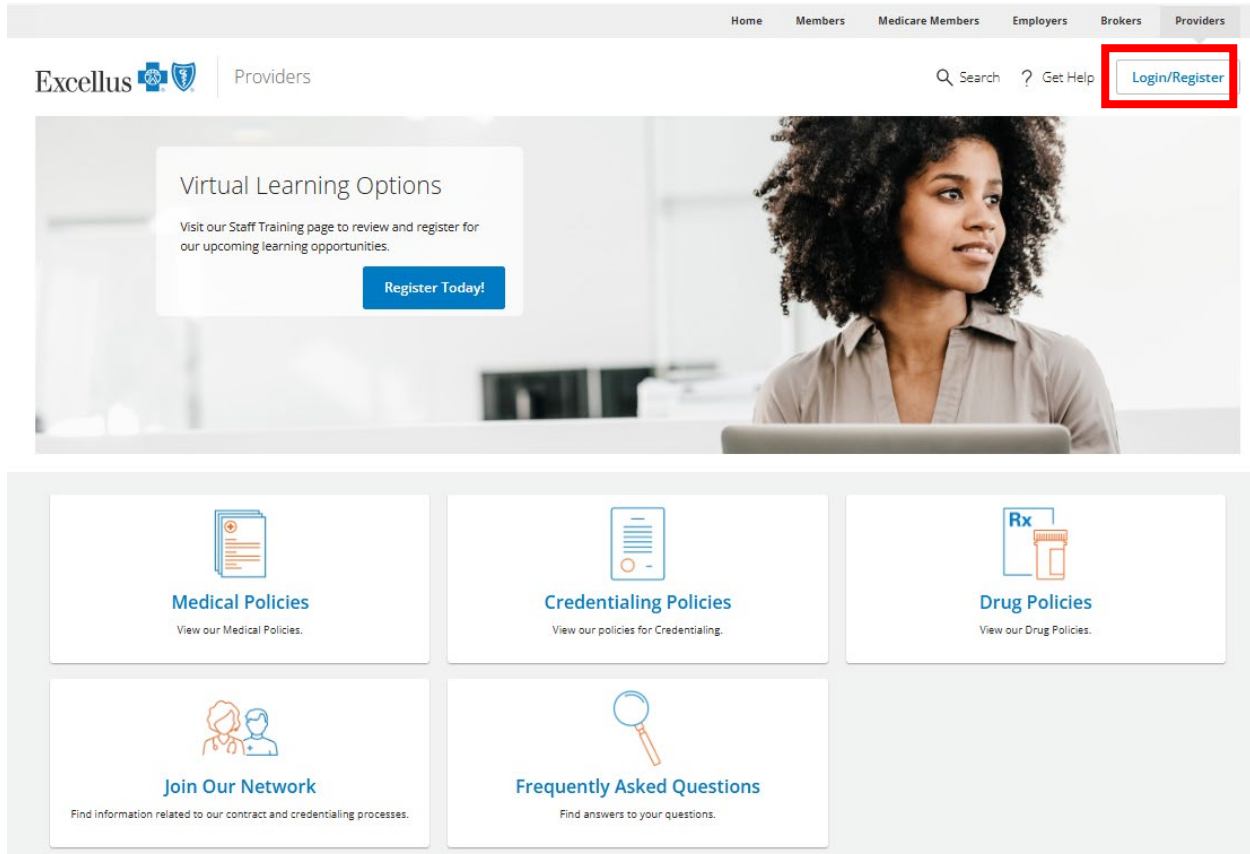
If you have any questions during this process, contact the Web Help Desk at 1-800-278-1247.

You will receive two emails within seven business days. One email will include the assigned username and the other a temporary password. You will be asked to change the password during your first login.

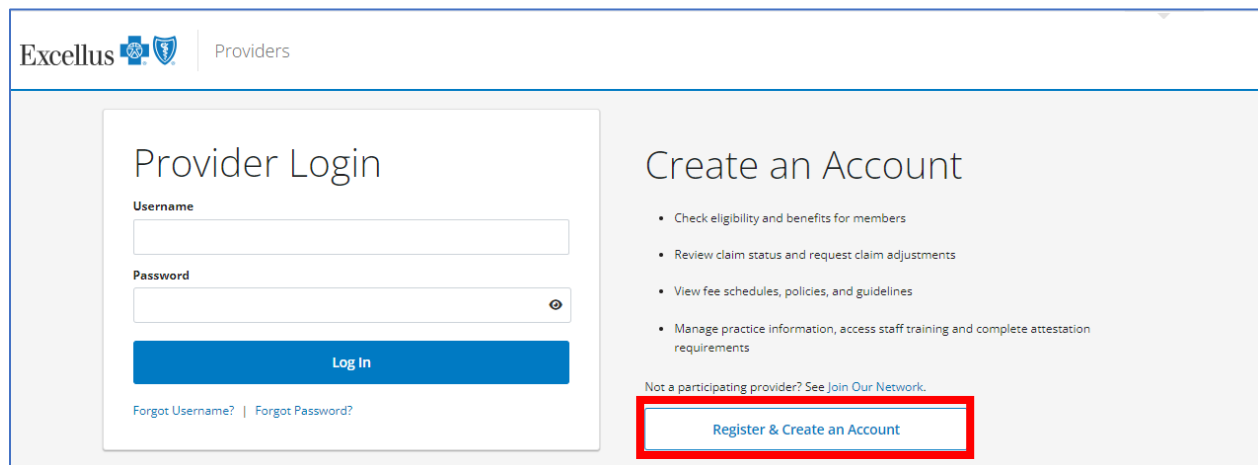
Please contact your Behavioral Health Provider Relations representative to schedule a call, video chat or in-person meeting if you have further questions.

Registering for the Provider Portal

For all other providers, registering can be requested from the **Provider** home page. Requests can be submitted by clicking on the **Login/Register** button, or by going to Provider.ExcellusBCBS.com/login.



When the following screen appears, click on **Register & Create an Account**.





Click on **I Provide Medical Care** and click **Continue** when the box appears.

Home Members Medicare Members Employers Brokers **Providers**

Excelsus Providers Search ? Get Help Login/Register

Provider Registration

What type of care do you provide?



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Follow us on

Depending on the type of medical provider, there is an option to register for a Hospital, Group Practice, or Facility, or an Individual Practice.

Excelsus Providers Search ? Get Help Login/Register

Providers > Medical Provider Registration




Medical Provider Registration

Medical service providers and administrators are allowed to create an individual practice account or register a hospital, group practice or facility.


Hospital, Group Practice or Facility

If you are a provider or administrator who is part of a single or multi-specialty group practice, hospital or health care facility that provides specialized diagnostic services - you must first register your facility.



Individual Practice

If you are a provider or administrator of a private practice, are self-employed, or help support an independent medical professional - you must create an online account.



Individual Practice

If you are a provider or administrator of a private practice, are self-employed, or help support an independent medical professional, click on the **Create Your Account** box found under the Individual Practice tile.

When the Create an Account page appears, enter the information in all fields, check the box to agree to the Privacy Policy, check I'm not a robot, and click **Continue**.

The screenshot shows a web page titled "Create an Account" with a breadcrumb trail: "Providers > Medical Provider Registration > Create an Account". A progress indicator shows two steps: "1 Your Info" (active) and "2 Create Your Account". Below the progress bar, instructions state: "Please complete the following fields and click 'Continue'." and "Note: You must be an Excellus BlueCross BlueShield participating provider to register for this Web site." The form is titled "Your Info" and lists several required fields with example values and instructions:

- Provider Number ***: Input field with "e.g. P01000000". Instruction: "This is your Excellus BlueCross BlueShield P010 or P03 number."
- Last Four Digits of your SSN ***: Input field with "e.g. 0000". Instruction: "Please enter without spaces or dashes."
- Tax ID ***: Input field with "e.g. 0000000". Instruction: "Please enter without spaces or dashes."
- First Name ***: Input field with "e.g. Jane"
- Last Name ***: Input field with "e.g. Doe"
- I agree to the Privacy Policy ***: A checkbox with a blue arrow pointing to it from the left.
- I'm not a robot**: A reCAPTCHA widget with a blue arrow pointing to it from the left.

At the bottom of the form are two buttons: "Continue" and "Cancel", with a blue arrow pointing to the "Continue" button from the left.

After clicking on continue, the following page appears. Complete the required fields and click on **Submit**.

Please note that passwords must be between 8-50 characters, and must contain two of the following four criteria:

- 1 numeric character
- 1 special character
- 1 uppercase character
- 1 lowercase character

The screenshot shows the 'Create an Account' page on the Excellus Providers website. The page header includes the Excellus logo, 'Providers', a search bar, a 'Get Help' link, and a 'Login/Register' button. The breadcrumb trail is 'Providers > Medical Provider Registration > Create an Account'. The main heading is 'Create an Account'. A progress bar shows two steps: 'Your Info' (completed with a green checkmark) and 'Create Your Account' (current step with a blue circle containing the number 2). Below the progress bar, there is a note: 'Please complete the following fields and click "Submit"'. A sub-note states: 'Note: You must be an ExcellusBCBS participating provider to register for this Web site.' The 'Create Your Account' form contains the following fields:

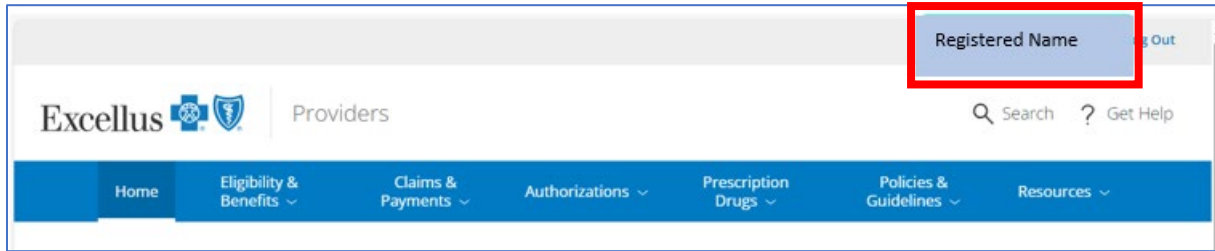
- Username ***: Text input field. Below it, a note reads: 'Username must be between 5-20 characters. Special characters or spaces are not allowed.'
- Password ***: Password input field (masked with dots).
- Confirm Password ***: Password input field (masked with dots).
- Enter Password Hint ***: Text input field containing 'testing!'.
- Email Address**: Text input field.
- Secret Question ***: Dropdown menu with the selected option 'City that you were born in'.
- Secret Answer ***: Password input field (masked with dots).

At the bottom of the form, there are two buttons: 'Submit' (highlighted with a red box) and 'Cancel'.

You will receive two emails within seven business days. One email will include the assigned username and the other a temporary password.

You will be asked to change the password during your first login.

Once the password is changed, you will be logged in and will then be directed to the provider portal home page. The registered user's name will be located at the top right hand corner of the page.



Hospitals, Group Practices, and Facilities

If you are a provider or administrator who is part of a single or multi-specialty group practice, hospital or health care facility that provides specialized diagnostic services, the facility must be registered first.

When the Web Registration page appears, enter the information in all required fields notated with an asterisk *, check the box to agree to the Web Site Privacy and Confidentiality agreement, check I'm not a robot, and click **Submit**.

Home Members Medicare Members Employers Brokers **Providers**

Excellus Providers Search ? Get Help Login/Register

[<< Return to Previous Page](#)

Hospitals, Group Practices, and Facilities Web Registration

An administrator of your hospital, group practice, or facility must complete and return this form. We will then create a "master account" where an administrator will be responsible for managing staff access.

***Required Field**

Type of Facility *

Hospital
 Group Practice
 Facility

Request Type *

New Provider Organization - New Administrator
 Existing Provider Organization - New Administrator
 Existing Provider Organization - Delete Administrator

User ID 1st Choice *

5-20 characters, no symbols, special characters, or spaces

User ID 2nd Choice *

5-20 characters, no symbols, special characters, or spaces

Your Name *

First and Last Name

Phone Number *

###-###-####

Email Address *

Continued to next page

Facility or Business Name *

e.g. Rochester Group

Federal Tax Identification Number *

Also known as Employer Identification Number

NPI *

10 digit National Provider Identifier

Street Address 1 *


Street Address/P.O. Box

Street Address 2

Apartment/Suite/Unit/Building/Floor

City *

State *

Choose an Option 

Zip Code *

5 digit zip code

Authorized Requestor's Name *

First and Last Name

Authorized Requestor's Phone Number

###-###-####

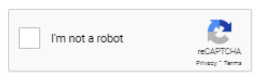
Authorized Requestor's Email Address


Excelsus BlueCross BlueShield is committed to protecting the privacy of our members. By requesting access to our online service center, you agree that:

- * You and your employees will use this information only in the delivery of patient care and will keep such information confidential, in accordance with law.
- * Information concerning any member, employee, group and/or patient will not be released to any third party not entitled to such information nor made accessible to persons having no legitimate reason to know such information.
- * You and your employees will keep the User IDs and Passwords in a secure location to prevent unauthorized access.
- * If an employee leaves your organization, you will log in and delete the employee's account so that he or she no longer has access.
- * Any breach of confidentiality by you or any of your employees will be grounds for immediate revocation of access to this system.



I agree to the Web Site Privacy and Confidentiality Agreement



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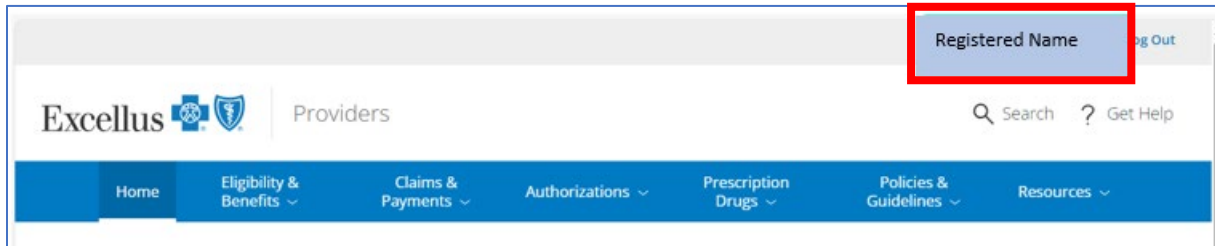
[Terms of Use](#) | [Web Privacy Policy](#) | [Browser Support](#) | [Accessibility Statement](#)



You will receive two emails within seven business days. One email will include the assigned username and the other a temporary password.

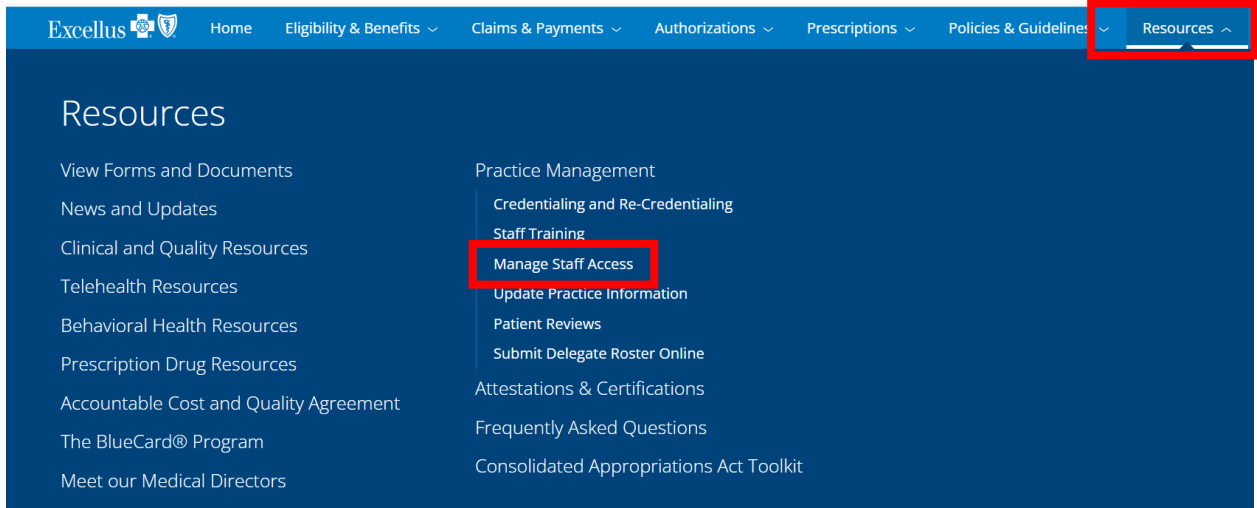
You will be asked to change the password during your first login.

Once the password is changed, you will be logged in and will then be directed to the provider portal home page. The registered user's name will be located at the top right hand corner of the page.

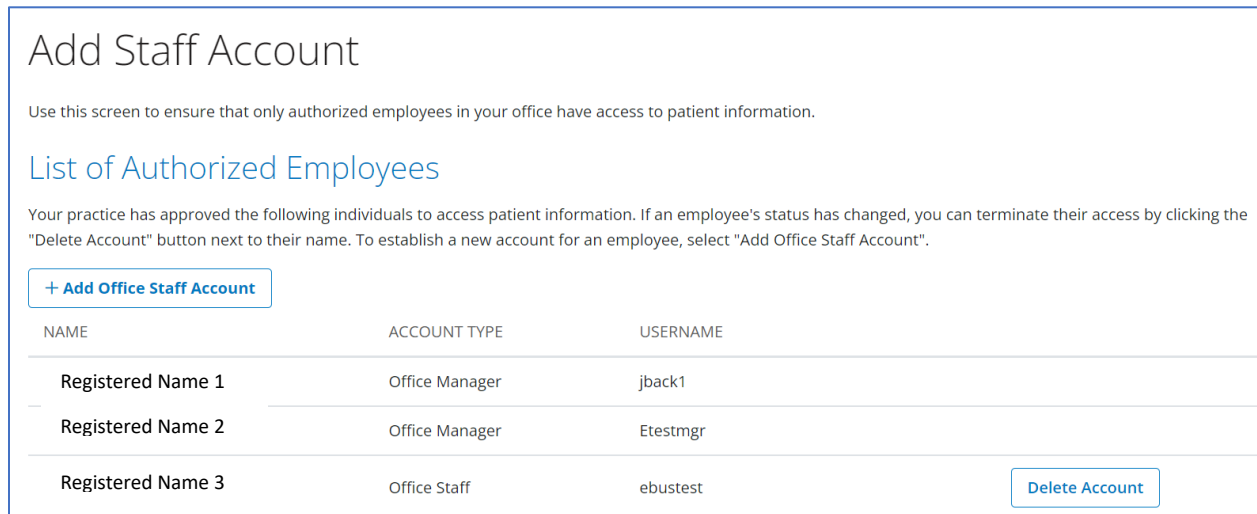


Authorized Users and Managing Staff Access

Employees authorized to access patient information, can be managed in the Resources section of the portal. To view, add or delete authorized users click Resources and select Manage Staff Access.



When the page opens, all authorized users and their role will be listed.



Adding an Additional User

To add an additional user, click on the **+ Add Office Staff** button



When the Add Staff Account page appears, enter the additional user's first and last name, create a username and temporary password for that user and click **Submit**.

Add Staff Account

** Required Fields*

First Name *	<input type="text" value="First Name"/>
Last Name *	<input type="text" value="Last Name"/>
Create Username *	<input type="text" value="Username"/> <small>Username must be between 5-20 characters. Special characters or spaces are not allowed.</small>
Create Temporary Password *	<input type="text" value="Create Password"/> <small>Passwords ARE case sensitive.</small>
Re-enter Password *	<input type="text" value="Re-enter Password"/>

The office manager will then be advised that the user has been successfully added and the additional user will be added to the list of authorized employees. The office manager will then give the username and temporary password to the employee to login.

✔ Registration Successful for 'JoeDoe2024' ! Please notify your employee of their username and temporary password so they can login and complete the registration process. ✕

The employee will then go to the portal and log in using the username and temporary password to sign in. He or she will be prompted to create a new password, to agree to the Privacy Policy, and will click **Continue**.

Change Password

Change Password Establish Your Account

1 ————— 2

Update your information in the fields below and click 'Continue'.

Change Your Password

* Required Fields

Current Password: *

Enter a New Password: *

Re-Enter Password: *

New Password Hint: *

I agree to the Privacy Policy *

The user will be prompted to enter his or her email address, to select a security questions and answer, and to **Submit**.

Establish Your Account

* Required Fields

Email Address: *

Yes! I would like to receive important news and updates from Excellus BlueCross BlueShield by e-mail, rather than by mail. For more information on how we protect your e-mail address, view our electronic communications policy.

Security Question: *

Security Answer: *

Deleting a User

To delete a user, click the **Delete Account** button to the right of the user's name and the following confirmation will appear:

Manage Staff Access

Delete Account

Are you sure you would like to delete the following account?

NAME	ACCOUNT TYPE	USERNAME
Joe Doe	Office Staff	JoeDoe2024

Click **Cancel** if you do not wish to delete the user.

Click **Yes, Delete** to delete the User, and a successful confirmation will appear.

✔ Account '**JoeDoe2024**' has been successfully deleted.

Forgot Username or Password Function

If the user forgot his or her username or password, at the provider log in screen, click on **Forgot Username? Or Forgot Password?**.


Provider Login

Username

Password

[Forgot Username?](#) | [Forgot Password?](#)


Click on **I provide Medical Care** and click on the **Continue** button when it appears.

Excellus  Providers


Providers > Forgot Password

Forgot Password

What type of care do you provide?



I Provide
Medical Care



I Provide
Dental Care

Complete the required fields on the page, click continue, and follow the instructions to obtain the username or to reset the password.

Providers > Forgot Password

Forgot Password

Step 1: Please complete the following fields

** Required Fields*

Username: *

First Name: *

Last Name: *

Providers > Forgot Username

Forgot Username

Step 1: Please complete the following fields

** Required Fields*

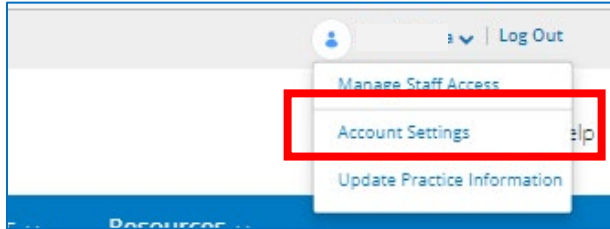
Provider Identification Number: *
This is your Excellus BlueCross BlueShield P010 or P03 Number.

First Name: *

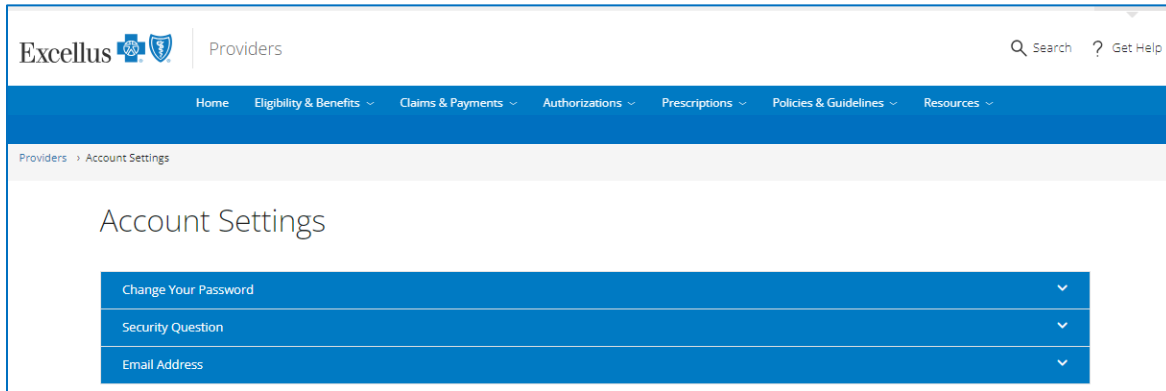
Last Name: *

Account Settings

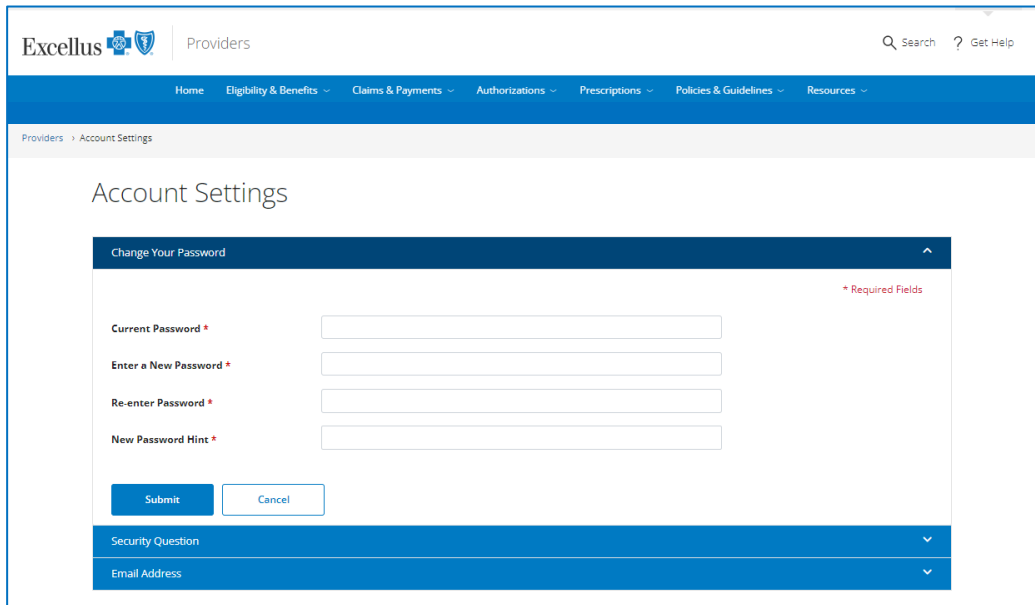
After logging in to the portal, users can change their password, update their security question, or edit their email address. On the top right-hand side of the provider home page, click on the drop down arrow located to the right of the username and select **Account Settings**.



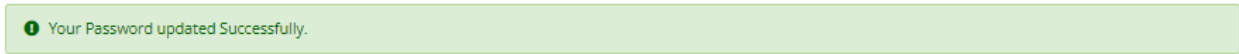
Three options will appear:



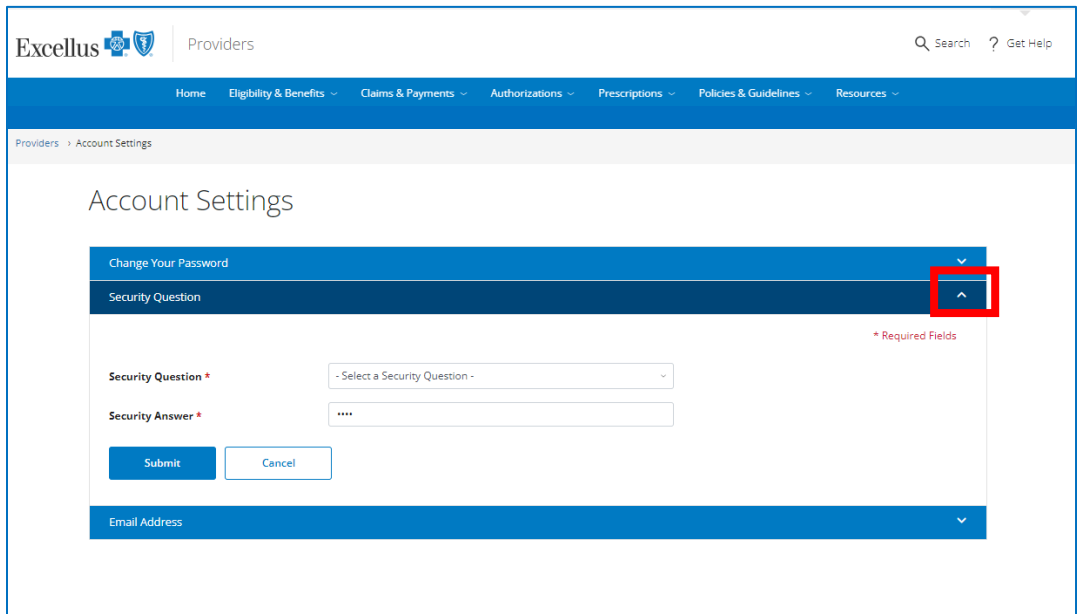
To change the password, click on the drop-down arrow, enter the current password, enter a new password, re-enter the new password, and enter the new password hint. Click **Submit**.



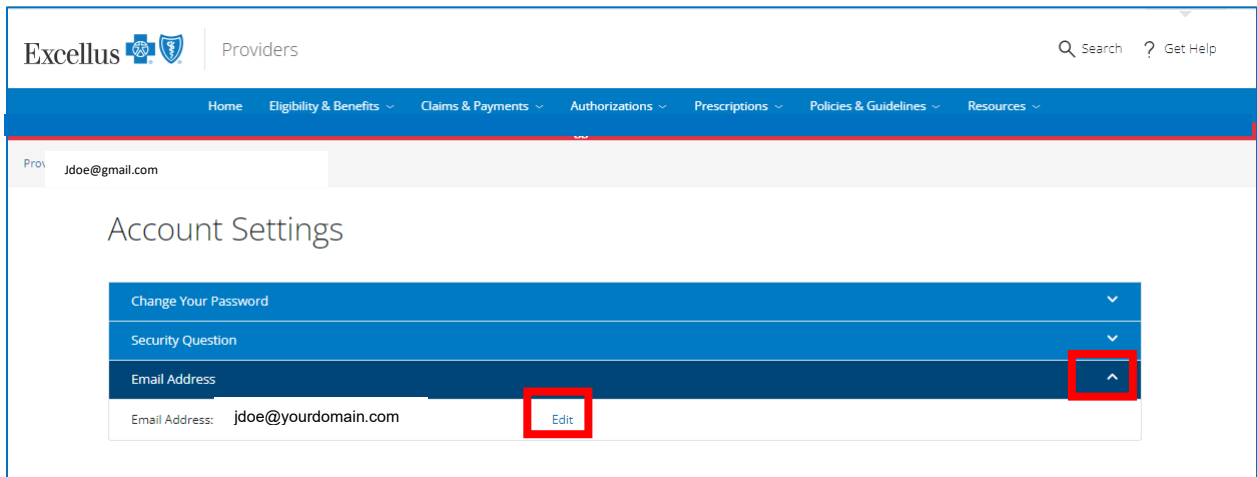
You will receive a message advising the password was updated successfully.



To change the security question, click on the drop-down arrow to the right of Security Question. In the Security Question box, click on the drop-down arrow and select a security question. In the Security Answer box, type in the answer, and click **Submit**.



To change the email address, click on the drop-down arrow and click on **Edit**.



Enter the new email address in the Email Address and Confirm Email Address fields and click **Submit**.

Email Address ^

* Required Fields

Email Address * jdoe@yourdomain.com

Confirm Email Address * jdoe@yourdomain.com

Yes! I would like to receive important news and updates from Excellus BlueCross BlueShield by e-mail, rather than by mail. For more information on how we protect your e-mail address, view our [Privacy Policy](#)