

Amy's Kitchen
Instructions for Completing the Anthem Blue Cross
Medical Claim Form

When to Use This Form

- This form should be used for any expense you have paid out of pocket and you need to be reimbursed for.
- The expenses should be limited to providers that do not bill insurance. The best example would be a mental healthcare provider because you could not find one in-network.
- If the provider bills insurance, please ask the provider to bill Anthem Blue Cross/Blue Card following the instructions on your member ID card.

Important Note:

Sometimes providers do not bill the insurance (e.g. mental health professionals). If you pay out of pocket in this circumstance, your reimbursement will be based on the **Usual, Customary and Reasonable (UCR)** amount for your service. Your out-of-network cost share will be 30% coinsurance, deductible and/or copay (if applicable) as well as the difference between the UCR price and what the provider has billed you for the service. A definition of UCR is included below.

Submitting This Form

- Please complete fields all sections within to avoid any processing delays.

Section 1: Patient Information— complete this section with the information of the person that received the service.

Section 2: Subscriber Information— complete this section with the information of the person who is the enrolled *employee* under Amy's Kitchen.

Section 3: Be sure to answer each question. You will need to obtain an **Itemized Bill** that includes both *Diagnosis* and *Procedure* codes (see definitions below) or a copy of it from your provider. See a description of information that needs to be included in Section 3 of the attached Medical Claim Form.

- **IF YOU WOULD LIKE TO MAIL YOUR CLAIM:** Once you have completed all sections of the Medical Claim Form, the Medical Claim Form and Itemized Bill from your provider should be mailed to the address on page 2. **For residents outside of CA, you will need to contact the customer phone number on your ID card to obtain claims submission address for your local Blue Cross/Blue Shield.**
- **IF YOU WOULD LIKE TO EMAIL YOUR CLAIM:** You can email your claim via the Message Center in the Anthem member portal. See attached instructions.

Any Questions?

- Please reach out to Anthem Blue Cross (the contact phone number is on your ID card).

Definitions

1. **Usual, Customary and Reasonable** = The amount paid for a medical service in a geographic area based on what providers in the area charge for the same or similar medical service.
2. **Diagnosis / ICD-10 Codes** = International Statistical Classification of Diseases and Related Health Problems. These are alpha numeric codes used by physicians, hospitals, outpatient facilities, nonphysician practitioners, outpatient facilities, laboratories, etc. to represent a diagnosis. Every disease, disorder, injury, infection, etc. all have its own code. *An example would be: F41.1 which is for Generalized anxiety disorder.*
3. **Procedure** or CPT Codes = Current Procedural Terminology. This refers to a set of medical codes used by physicians, hospitals, outpatient facilities, nonphysician practitioners, outpatient facilities, laboratories, etc. to describe the procedures and services they perform. A CPT code is usually 5 numeric digits. *An example would be: 90837 which is specifically for Psychotherapy, 60 minutes with a patient.*

Medical Claim Form



Please use a separate claim form for each patient and provider. Your cooperation in completing all items on the claim form and attaching all required documentation will help expedite quick and accurate processing. **See reverse side for complete instructions.**

Section 1: Patient information

Last name		First name		M.I.
Does the patient have other health insurance coverage? <input type="checkbox"/> Yes <input type="checkbox"/> No	Relation to subscriber <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Son <input type="checkbox"/> Daughter		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth (MM/DD/YYYY)
Name of other health insurance company	Group no.	Employer name	Policy no.	

Section 2: Subscriber information (on Anthem Blue Cross ID card)

Identification no. (include prefix)		Group no.		
Last name		First name		M.I.
Street address (please include apt. no.)		City	State	ZIP code
Home phone no.	Work phone no.		Date of birth (MM/DD/YYYY)	

Section 3: Medical information

Health care services: Use this section to report any COVERED health service that has not already been reported to this Anthem Blue Cross plan by the provider of service (the physician, clinical, ambulance company, private duty nurse, etc.) **Attach itemized bill or photocopy.** Please be sure that duplicate bills are not submitted.

Where was the service rendered? Physician office Outpatient Inpatient Ambulance
 Medical equipment supplier Pharmacy Laboratory Other

Was this medical expense the result of an accident? Yes No

Was this condition or injury job related? Yes No

Have you filed for Workers' Compensation? Yes No

When did this injury or accident occur? (MM/DD/YYYY) _____

Date of service	Diagnosis code	Procedure code	Tax ID	Amount
Total			\$	

Bills must be itemized

Cancelled checks, cash register receipts and non-itemized "balance due" statements cannot be processed. Each itemized bill must include:

- Name and address of provider (doctor, hospital, laboratory, ambulance service, etc.)
- Name of patient
- Service provided
- Date of service
- Amount charged for each service
- Diagnosis code
- Procedure code
- Tax ID

I certify that, to the best of my knowledge, the information on this Medical Claim Form is true and correct. I authorize the release of any medical information necessary to process this claim.

Signature X	Printed name	Date (MM/DD/YYYY)
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How to use this form

Dear Member:

Usually, all providers of health care will bill us for services to you and your enrolled dependents. This is the preferred procedure. You are not bothered with claim forms and we often need more details than are ordinarily provided on bills to patients.

Sometimes, a physician or an ambulance company may not bill us, for example, they may send the bill directly to you. In either instance, we have no way of knowing about your claim. This Medical Claim Form was developed to notify us of any covered health service for which we have not already been billed.

Please read the following instructions about how to report Health Care Services.

We are happy to serve you.

Section 1: Patient information

Use this section to identify the patient.

Section 2: Subscriber information (on Anthem Blue Cross ID card)

Use this section to identify the subscriber. Some of this information may be found on your Anthem Blue Cross card.

Section 3: Medical information

Health care services: Use this section to report any COVERED health service that has not already been reported to this Anthem Blue Cross plan by the provider of service (the physician, clinical, ambulance company, private duty nurse, etc.) **Attach itemized bill or photocopy.** Please be sure that duplicate bills are not submitted.

Medical Claim Form instructions:

Please send claims to:

Anthem Blue Cross
P.O. Box 60007
Los Angeles, CA 90060-0007

If you have questions or need any assistance, please call the number listed on your Member ID card.

Amy's Kitchen

How to Email Your Claim via the Anthem Member Portal Medical Claim Form

1. Login to your Anthem member portal by visiting: <https://www.anthem.com/ca/>
2. If you are a first-time user, you will need to register first.
3. Follow the step-by-step instructions below. Please ensure that you have completed your Anthem Medical Claim form completely and that you have the required information. Incomplete or missing information will delay your claim. If you are not sure what is required to submit your claim, review the **Instructions for Completing the Anthem Blue Cross Medical Claim Form.**

For Employers - For Producers - For Providers - COVID-19 Info

Search Español

Anthem Insurance Plans - Member Support - Health & Wellness Resources -

Find Care Log In

Connecting You To The Right Individual Coverage

Plans as low as \$0 a month.*

Open Enrollment ends soon! More people than ever before qualify for financial help. Enroll by January 31 for health coverage starting February 1, 2022.

*Plans are limited to specific geographic areas and are not available in all markets. \$0 monthly premiums only apply to certain income levels.

Shop Plans

Talk to a licensed agent: 833-959-1535 | TTY 711
Mon-Fri, 5:30 a.m. to 7 p.m. PT and Sat, 7 a.m. to 1 p.m. PT

- Login as a member with your username and password.

For Members
Print ID cards, view claims, pay bills

For Employers
Manage your employees' benefits

For Producers
Find the tools to grow your business

For Providers
Join Anthem's provider network

Return Shopper
Pick up where you left off

Please select your account type.

Medicare, Individual & Family, and Employer Group Plans Medicaid

Log In

[Forgot Username or Password? >](#)

Log in to your member account

Not signed up? [Register now](#)

Username

Password

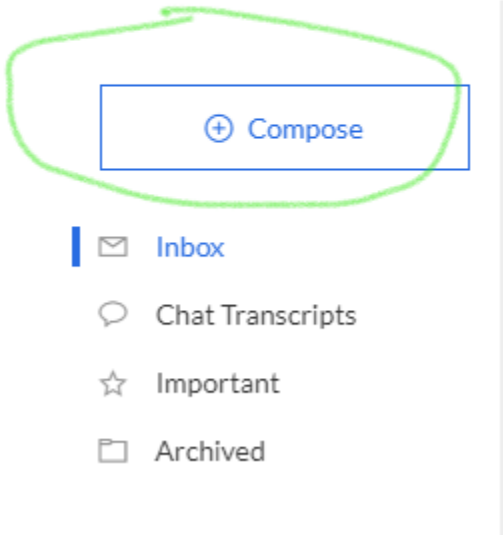
Log In

[Forgot Username or Password?](#)

- In the Support dropdown menu, select Message Center.

The screenshot displays the Anthem member portal interface. At the top left is the Anthem logo. Below it are navigation tabs for 'My Plan', 'Care', and 'Support'. The 'Support' tab is active, and its dropdown menu is open, showing options: 'Report a Website Issue', 'Contact Us', 'Message Center', 'Forms', and 'FAQs'. A blue circle highlights the 'Message Center' option, with a blue arrow pointing to it from the right. The main content area on the left shows a 'WELCOME BACK Thutuy' message, a 'Member ID: WL' field, and a notification about COVID-19. Below these are links for 'Update profile access and settings', 'Review payments and billing', 'Order and manage prescriptions', and 'Additional insurance policies'. At the bottom left, a notification states 'You have 0 unread messages in your inbox. View Message Center'. On the right side, there is a 'Connect With Care' section with links for 'Find Care', 'Find Urgent Care', 'LiveHealth Online', 'Primary Care Provider', and 'Your ID Card'. The browser's address bar at the bottom shows 'https://membersecure.anthem.com/member/message-center' and a file named '732M77666.pdf' is open.

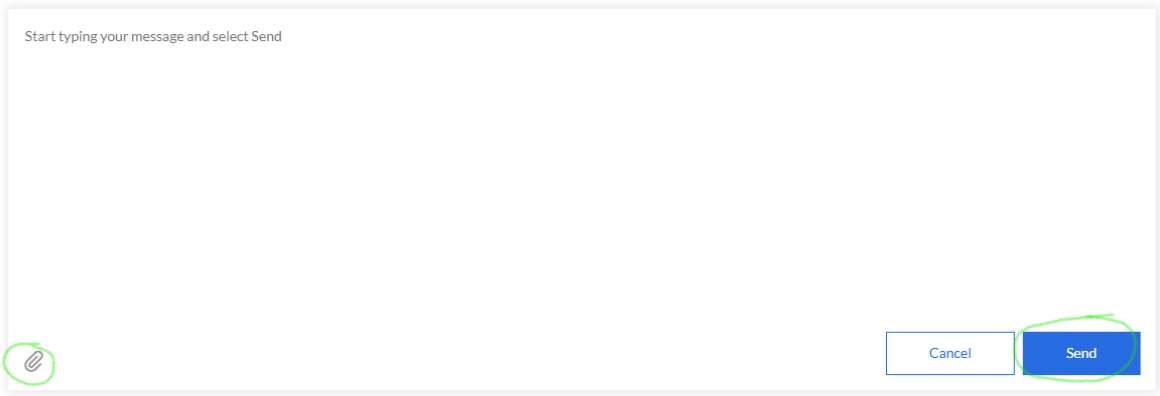
- You will then select Compose.



- A new message will pop up. You should select Claims from the dropdown menu under the header, Subject.
- On the lower left-hand corner, you will see a paperclip icon. Click this icon to attached two things:
 1. Your completed Anthem Claim Form
 2. Itemized Provider Bill
- You can write a brief message within the body of the email.
- Once you are ready, click Send.

< New Message

Our goal is to respond within one business day but response times may vary. If your matter is urgent, please [Contact Us](#).



Please only attach Word, Excel or PDF files. Each file should be under 6 MB and the total size should be under 10 MB.