How To Submit Your Claim

This claim form can be used to submit all your bills. However, a separate claim form must be completed for each person's bills.

If you need additional claim forms, have any questions about completing the claim form or benefits covered under your contract, please contact us at the number listed on your identification card.

Mail completed claims to: Excellus BlueCross BlueShield
PO Box 22999
Rochester, NY 14692

In order to process your claim promptly, please refer to the following guidelines to ensure that all necessary information is included:

A. Submit bills for each patient on separate claim forms. A separate claim form is also required for different calendar years. Please submit the original bills with your claim form. Keep copies for your own records. The actual bills are necessary for claims processing.

B. Bills must include:

Name and address (on letterhead) of the provider of service or supply (hospital, doctor, pharmacy, etc.).

Patient's full name.

Type of service or supply (office visits, chest x-ray, etc.).

Place of service (inpatient or outpatient hospital, office, etc.).

Date and charge for each service or supply provided.

Patient's diagnosis (the medical condition for which the patient was treated).

C. Bills for the following services should also include:

FOR THOSE CONTRACTS WITH PRESCRIPTION DRUG COVERAGE - Prescription number, name of drug, and name of prescribing doctor is required.

Private Duty Nurse - The type of Nurse (RN or LPN), license number, the shift and hours worked and a statement of medical necessity from the prescribing doctor.

Durable Medical Equipment (wheelchair, oxygen tank, etc.) - A statement of medical necessity from the prescribing doctor which indicates how long the equipment will be used and a statement from the equipment supplier showing both the rental and purchase price.

D. Cash register receipts, canceled checks, money orders, credit card vouchers and personal lists of services or bills stating only 'balance forward' are not acceptable as substitutes for bills.

Our employees are dedicated to prompt and accurate claim payments to our subscribers. By following these instructions and filling out the claim form completely, you will help us meet our goal of processing your claim in a satisfactory manner.