

CareFirst on Call

Institutional Reference Card

Commercial: 800-842-5975 ■ 202-479-6560 ■ **NASCO Service and Out-of-Area Claims:** 877-228-7268 ■ **FEP (Northern VA, DC, Montgomery and Prince George's Counties):** 202-488-4900 ■ **FEP (all other MD FEP Providers):** 410-581-3568 ■ 800-854-5256

Enter provider numbers

Participating institutional providers

- For best results, use your 3-digit regional provider number.
- Your Federal Tax ID or your Billing NPI can also be used.

Non-participating and out-of-state providers

- For best results, use your Tax ID.
- You can also use your Billing NPI.

Provider types

If the system does not recognize your provider number, you will be asked to select your provider type from the following list:

- | | |
|--------------------------|-------------------------|
| 1. Hospital | 4. Routine vision |
| 2. Non-hospital facility | 5. Professional medical |
| 3. Dentist | |

Enter member numbers

Use your telephone keypad to enter the Membership ID into the system.

- Do not enter the 3-digit prefix that precedes most BlueCross BlueShield membership numbers.
- Do not enter the "R" that precedes Federal Employee Program membership numbers.

Self-service options

General information is available for:

- | | |
|----------------------------|------------------------------------|
| ■ Eligibility | ■ Authorization status |
| ■ Benefits | ■ Frequently requested information |
| ■ Deductibles and maximums | |
| ■ Claims status | |

Fax back feature

Receive a fax of your information by following the voice prompts. You'll receive one fax for each inquiry, for each member.

Helpful hints

Key commands

0 Transfer to customer service

Enter alphabetic characters

If your provider/membership number has letters, you must press 3 keys for each letter.

- #1** Press the star key to indicate you are about to enter a letter.
- #2** Press the key containing the letter.
- #3** Press the number that coincides with the position of the letter on that key.

Enter dates

To enter January First Two Thousand Twenty Two, press 0 1 0 1 2 0 2 2 on your telephone keypad.

Alphabetic conversions:

A = *21	H = *42	O = *63	V = *83
B = *22	I = *43	P = *71	W = *91
C = *23	J = *51	Q = *72	X = *92
D = *31	K = *52	R = *73	Y = *93
E = *32	L = *53	S = *74	Z = *94
F = *33	M = *61	T = *81	
G = *41	N = *62	U = *82	

Provider benefit codes for institutionally billed services

These benefits are categorized by the following:

Diagnostic services

125 Allergy testing
 186 Cat-scan
 202 Colonoscopy
 252 EEG/electroencephalogram and EKG/electrocardiogram
 420 Laboratory tests/medical
 421 Laboratory test/routine**
 423 Medical diagnostic (machine) test/routine*
 425 Medical diagnostic (machine) test/medical**
 436 Mammogram/routine
 456 MRI/magnetic resonance imaging
 462 Neurological testing*
 488 Pap smear/routine
 502 Pre-admission testing/laboratory*
 504 Pre-admission testing/radiology/X-ray*
 657 Sleep studies
 676 Surgical pathology*
 684 TMJ/temporomandibular joint X-rays
 736 Ultrasound/maternity
 738 Ultrasound/non-maternity
 750 Radiology/X-ray

Maternity/contraception/infertility services

110 Abortion care elective*
 114 Abortion care therapeutic*
 174 Artificial insemination
 176 Birthing centers
 222 Contraceptive devices
 224 Contraceptive/medically necessary/injection
 226 Contraceptive/medically necessary/OP/facility*
 228 Contraceptive/medically necessary/oral
 232 Contraceptive/routine/injection
 234 Contraceptive/routine/OP/facility*
 236 Contraceptive/routine/oral
 352 Gamete and zygote transfers/facility
 384 Home maternity visits*
 111 Infertility services
 428 Intrauterine insemination
 432 In vitro fertilization/facility
 448 Maternity global*
 464 Newborn care*
 618 Reverse tubal ligation
 624 Reverse vasectomy
 630 Maternity admission/facility
 632 Maternity admission with complications/facility
 736 Ultrasound/maternity

Medical

122 Admission/observation/OP*
 131 Allergy services*
 178 Blood derivatives*
 182 Blood/whole/plasma/facility
 300 Emergency room/medical
 410 Immunizations/medical*
 424 Injections/medications*
 470 Clinic visit facility fees
 473 Outpatient/hospital facility*
 640 Medical/surgical admission/facility
 675 Skilled nursing facility/facility*

Medical emergency/accidental injury

230 Dental services/accidental*
 290 Emergency room/accident
 740 Urgent care center/accident*
 742 Urgent care center/medical emergency*

Mental health/substance abuse

238 Substance abuse detoxification**
 256 Electroshock therapy*
 452 Methadone treatment*
 475 Partial hospitalization/facility
 492 Pharmacology/management/mental health
 510 Mental health/substance abuse/outpatient
 512 Mental health halfway house*
 516 Mental health testing*
 540 Substance abuse rehabilitation/freestanding facility*
 550 Substance abuse rehabilitation
 650 Mental health admission/facility

Other

118 Admission/non-med/custodial*
 160 Ancillary*
 190 Chemotherapy
 240 Dialysis
 244 Diabetic education/training
 246 Diabetic supplies*
 370 Home health care
 374 Home hemophilia drugs*
 376 Home hemophilia supplies*
 400 Hospice*
 402 Hospice/bereavement counseling*
 404 Hospice/family counseling*
 405 Hospice respite care
 406 Hyperbaric oxygen therapy*
 412 Infant medical foods*
 418 Infusion therapy/facility
 426 Insulin*

469 Nutritional counseling
 496 Photochemotherapy*
 509 Pulmonary rehabilitation program*
 520 Radiation therapy
 530 Cardiac rehabilitation
 614 Respiratory therapy*

Surgery/anesthesia

140 Ambulatory surgery facility
 170 Anesthesia
 454 Morbid obesity/gastric bypass
 472 Oral surgery
 670 Surgery
 674 Surgical assistance*
 676 Surgical pathology*
 682 TMJ/temporomandibular joint surgery
 686 Transplants, medically necessary, non-experimental*

Therapy/chiropractic/acupuncture

172 Aqua therapy
 356 Occupational therapy/habilitative*
 358 Physical therapy/habilitative*
 362 Speech therapy/habilitative*
 460 Occupational therapy/rehabilitative
 500 Physical therapy/rehabilitative
 660 Speech therapy/rehabilitative

Vision/hearing/dental

231 Dental services/medical*
 360 Hearing test*
 364 Hearing aid**
 368 Hearing exam/routine*

Medical equipment, prosthetics and supplies

184 Breast prosthesis
 246 Diabetic supplies*
 250 Durable medical equipment/purchase or rental
 376 Home hemophilia supplies*
 440 Medical supplies*
 474 Orthopedic appliance/purchase
 476 Orthopedic appliance/rental
 484 Orthotics
 486 Oxygen/oxygen equipment*
 508 Prosthetics
 744 Wigs/hair prosthesis*

* FEP benefit information not available on IVR. Call Customer Service.

** Partial FEP benefit information available on IVR.

Visit carefirst.com/providerguides for reference guides.