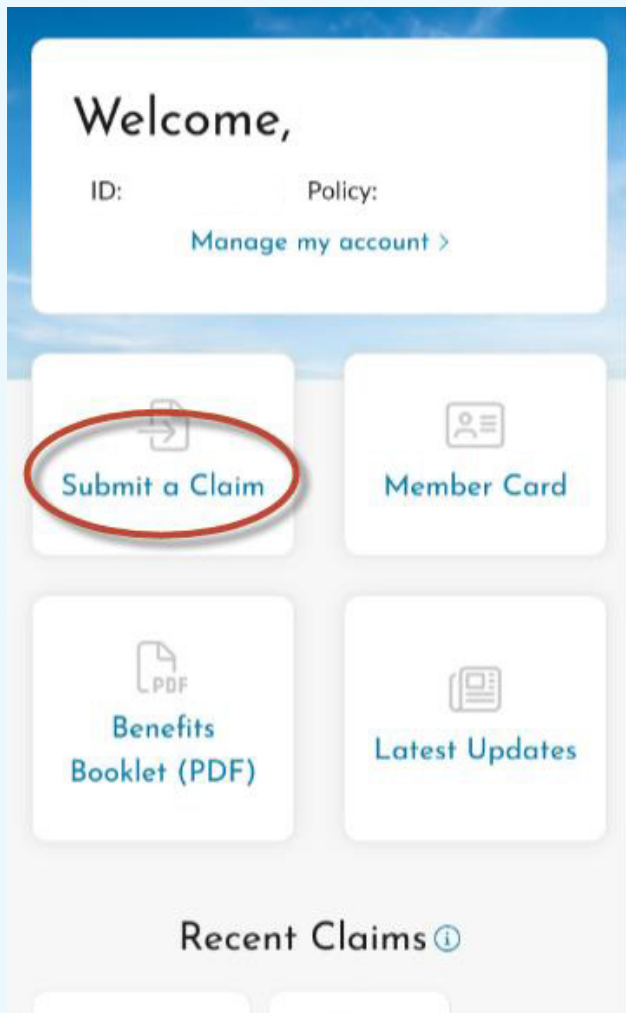


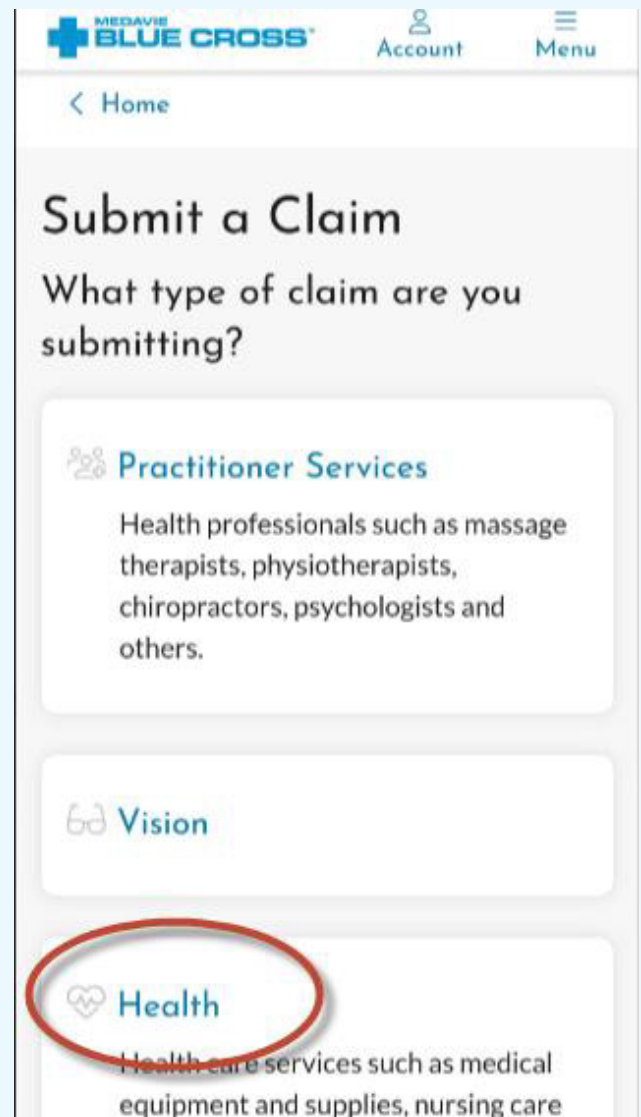
INSTRUCTIONS ON HOW TO SUBMIT A COMPLETED PRE-EXISTING OR PRE-AUTHORIZATION FORM THROUGH THE MEDAVIE BLUE CROSS (MBC) WEB PORTAL:

Log into your MEDAVIE BLUE CROSS MOBILE APP:


1. Log-in to your Medavie Blue Cross web portal and select Submit a Claim:



2. Next, chose Health: it will allow the claim to be directed to the appropriate MBC team:



3. On the next screen, select I'm Ready:

- Do you have your itemized receipt handy?**
This receipt should show the service you received, the name of the provider, the date it occurred, and that it has been paid in full.
- Do you have any other required documents you might need?**
For some benefits, you might need to send us a prescription, itemized statement, or medical evaluation. Not sure if this applies to you? You can find specific requirements for each benefit under its coverage description.
- Was your claim submitted to another insurer first?**
Make sure you have the claim statement from that insurer.
- Is your claim from a Blue Cross-approved health professional? **

I'm ready >

4. Next, verify that your personal information is correct and press Next:

Verify Information

Is this your most up-to-date information?

Email

@mail.mcgill.ca

Phone

[Edit](#)

Bank account for direct deposit

Account

[Edit](#)

[< Back](#)

Next >

5. Next, enter today's date, select "Item not listed", write a short description, for example pre-existing form for upcoming surgery on dd/mm/yyyy and press Next::

Submit a Claim - Health

31 Oct 2024

Other: Form
[Edit](#)

+ Add another Health claim for any plan member

< Back **Next >**

6. Skip the subsequent questions by clicking Next. They do not apply for this situation:

Treatment for Accident

Is this claim a result of an accident where a third party is involved or may have been at fault? For example, another driver or your employer.

Yes
 No

< Back **Next >**

Other Coverage

Do you currently have any coverage under another insurance plan, even if it doesn't apply to this claim? (For example, a spouse's plan.)

Yes
 No

Is there any past coverage that recently ended?

Yes
 No

< Back **Next >**

Claim Details

Date of service
31/10/2024

Who is this claim for?
Ⓜ

What is the claim for?
Item not listed

Please specify (e.g. "knee brace," "liver function test")
Form

< Back **Next >**

7. Next, attach the completed pre-existing form and press Next:

8. You can add a brief comment and press Next.

Attach claim form and supporting documents

Attach pictures of the required documents (such as itemized receipts, claim forms, prescriptions, or claim statements from any other carriers).

Tip: for best results, make sure your image is bright and sharp. Poor quality images, missing or invalid information could lead to delays.

What documents do I need to submit? [?](#)

Drag and drop file
or

Add documents

You may include up to 10 attachments per claim, with a combined total size of 25 MB.

We support the following file types: BMP, JPG, JPEG, and PDF.

Comments

Would you like to add any comments to your claim?

- Yes
 No

Please share anything else you think could help us process your claim.

For example, you can note which plan member received what item on a receipt. We cannot reply to comments or questions submitted through this form.

Pre authorization form

< Back

Next >

Comments

Would you like to add any comments to your claim?

- Yes
 No

Please share anything else you think could help us process your claim.

For example, you can note which plan member received what item on a receipt. We cannot reply to comments or questions submitted through this form.

Pre existing condition form.

< Back

Next >

9. Finally, you can click Submit to complete the submission of the form:

MEDAVIE BLUE CROSS™ Account Menu

< Submit a Claim

Submit a Claim - Health

Claim Summary

08 Nov 2024

Other: Blank

Attachments

1 document/image has been attached.

I agree to the [Terms & Conditions](#)

< Back **Submit** >