



Contact the Southeast, East and Mid-Michigan Provider Consultant Team

(For providers not associated with a medical care group)

Blue Cross Blue Shield of Michigan and Blue Care Network have made it easier for you to contact a provider consultant when you need to escalate your inquiry.

As a participating provider located in **Southeast, East** or **Mid** regions of Michigan, you can now send your escalated inquiry to Provider Engagement and Transformation. Please review the instructions and submission requirements outlined below. To download the form and submit your inquiry, click on the following link [Provider Consultant Inquiry Review](#). Once you click the link, the submission form will download to your computer as a zip file. After you fill out the form and save it, you will be directed to Blue Cross' Message Center to send your secure email to petcontactus@bcbsm.com.

INQUIRY SUBMISSION REQUIREMENTS

Step one: Call your first point of contact

- **Enrollment-related inquiries**
 - o Provider Enrollment and Contracting Operations: 1-800-822-2761
- **All other inquiries**
 - o Provider Relations and Servicing
 - Professional provider: 1-800-344-8525
 - Facility or hospital provider: 1-800-249-5103
 - o Medicare Advantage: 1-866-309-1719
 - o Availability: 1-800-282-4548

Providers located in the West region and Upper Peninsula of Michigan must contact their assigned consultant directly. Not sure which region you're in? Click [here](#) for assistance.



Step two: Escalate your inquiry to Provider Engagement and Transformation

For a thorough and accurate review of your inquiry, please send an email to petcontactus@bcbsm.com that includes the required information outlined below. To send us a secure email, you can log in to your Blue Cross Message Center account and send an email to petcontactus@bcbsm.com.

- All emails **must** include:
 - Provider name
 - Provider NPI Type 1 or Type 2
 - Call reference number (within 30 days)
 - Brief description of your inquiry
- **Claim**-related inquiries **must** also include:
 - Patient's first and last name
 - Patient's contract number and alpha prefix
 - Dates of service
 - Payer claim number for each claim at issue
 - Rendering provider's name (first and last)
 - Billing provider's NPI number
 - Bill amount
- **Enrollment-related** inquiries **must** also include:
 - Date of call to Provider Enrollment and Contracting Operations

Nonparticipating providers must work with Provider Relations and Servicing, Medicare Advantage (claim questions), or Provider Enrollment and Data Management (enrollment questions) to resolve their inquiries.