Instructions to set up an account on Anthem website

The Anthem website can be accessed at:
 http://www.anthem.com/health-insurance/home/overview

Begin the registration process by clicking the "Register Now" option.

Click here to begin the registration process.

Complete all of the information on this page.

Complete the requested information.
Pay close attention to the User Name requirements.

Enter your email address.

You need an email address to complete the registration process.

This is your confirmation page. Make sure all of your information is correct before you click the confirm button.

Verify the information you entered. You can go back and make changes by clicking the Edit button above the information you wish to change. Click the Confirm button to finish the registration.

New Account Registration

Over the age of 18? Then you must register for your own account.   Are you already registered? Log in now.

Account Registration

| Step 1: Personal Information | Step 2: Username & Password | Step 3: Email Setup | Step 4: Confirm Registration |

Step1: Personal Information   Edit

Member ID Number:
FirstName:
Middle Initial
Last Name:
Date of Birth:

Step2: Username & Password   Edit

Username:
Password:
Security Question #1:
Security Answer:

Step3: Email Setup   Edit

Email Address:
Email me information
required plan notices
products, and offering

CANCEL   CON

Your Account has been created

CLOSE   LOGIN

You have completed the Anthem website registration. Click the LOGIN button to review your information, find a doctor, access ExpressScripts, or check on a claim.

Username

Password

Register Now   LOG IN
Learn more about Secure Log in

Forgot Username or Password

USEFUL TOOLS
- FIND A DOCTOR (Dentist, Pharmacy, or Hospital)
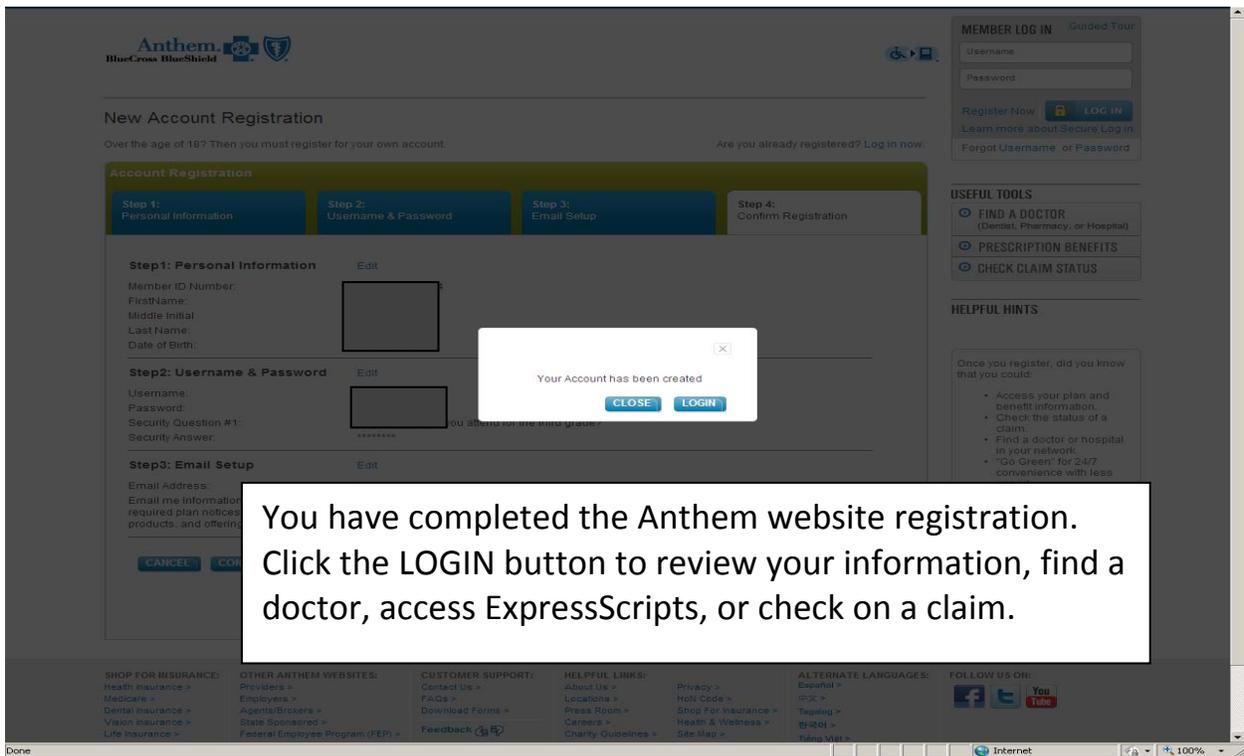- PRESCRIPTION BENEFITS
- CHECK CLAIM STATUS

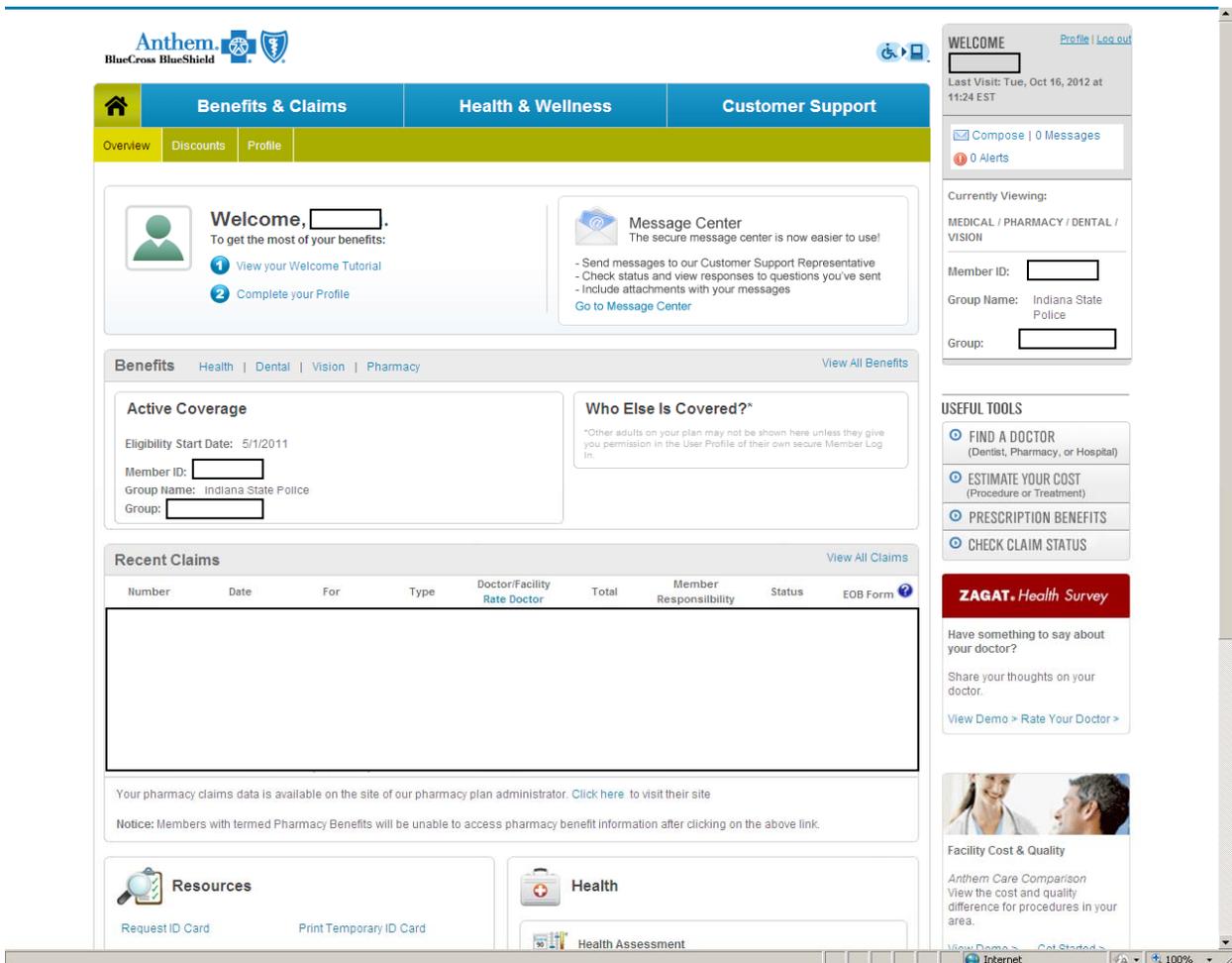HELPFUL HINTS

Once you register, did you know that you could:
- Access your plan and benefit information.
- Check the status of a claim.
- Find a doctor or hospital in your network.
- "Go Green" for 24/7 convenience with less

SHOP FOR INSURANCE:
Health Insurance >
Medicare >
Dental Insurance >
Vision Insurance >
Life Insurance >

OTHER ANTHEM WEBSITES:
Providers >
Employers >
Agents/Brokers >
State Sponsored >
Federal Employee Program (FEP) >

CUSTOMER SUPPORT:
Contact Us >
FAQs >
Download Forms >

Feedback

HELPFUL LINKS:
About Us >
Locations >
Press Room >
Careers >
Charity Guidelines >

Privacy >
HdN Code >
Shop For Insurance >
Health & Wellness >
Site Map >

ALTERNATE LANGUAGES:
Español >
中文 >
한국어 >
Tiếng Việt >

FOLLOW US ON:

Your Login page will look like the page below.

Anthem BlueCross BlueShield

| Benefits & Claims | Health & Wellness | Customer Support |

Overview   Discounts   Profile

Welcome, ____.
To get the most of your benefits:
1. View your Welcome Tutorial
2. Complete your Profile

Message Center
The secure message center is now easier to use!
- Send messages to our Customer Support Representative
- Check status and view responses to questions you've sent
- Include attachments with your messages
Go to Message Center

Benefits   Health | Dental | Vision | Pharmacy   View All Benefits

Active Coverage

Eligibility Start Date: 5/1/2011

Member ID:
Group Name: Indiana State Police
Group:

Who Else Is Covered?*
*Other adults on your plan may not be shown here unless they give you permission in the User Profile of their own secure Member Log In.

Recent Claims   View All Claims

| Number | Date | For | Type | Doctor/Facility Rate Doctor | Total | Member Responsilbility | Status | EOB Form |

Your pharmacy claims data is available on the site of our pharmacy plan administrator. Click here to visit their site

Notice: Members with termed Pharmacy Benefits will be unable to access pharmacy benefit information after clicking on the above link.

Resources
Request ID Card   Print Temporary ID Card

Health
Health Assessment

WELCOME   Profile | Log out

Last Visit: Tue, Oct 16, 2012 at 11:24 EST

Compose | 0 Messages
0 Alerts

Currently Viewing:
MEDICAL / PHARMACY / DENTAL / VISION

Member ID:
Group Name: Indiana State Police
Group:

USEFUL TOOLS
- FIND A DOCTOR (Dentist, Pharmacy, or Hospital)
- ESTIMATE YOUR COST (Procedure or Treatment)
- PRESCRIPTION BENEFITS
- CHECK CLAIM STATUS

ZAGAT. Health Survey

Have something to say about your doctor?
Share your thoughts on your doctor.
View Demo > Rate Your Doctor >

Facility Cost & Quality

Anthem Care Comparison View the cost and quality difference for procedures in your area.

Instructions to set up mail order prescriptions.

Click on the Prescription Benefits option on the right side of the page.

The prescription option will access the Express Scripts web page.

To begin home delivery, click on Fill a New Prescription or Switch to Home Delivery in the first column.

Click Fill a New Prescription or Switch to Home Delivery

Click Fill a New Prescription. You can then click prescription order form to get a blank order form or complete a web prescription order form.

Click Fill a New Prescription, then click prescription order form

Select either Option 1 or Option 2 on this screen.

Complete the information on this page and click Create Order Form.

When you select option #2 above and select a patient, the order form will automatically be filled with your personal information. Click the Print your form to see the form. Please note that you will need to set up a payment method before you submit the new prescription.

Below is an example of a Web Prescription Order Form. There are two ways to submit a new prescription. Have your Doctor write a prescription and send your new prescription along with the form to Express Scripts via US mail. You can have your Doctor fill out the bottom portion of the form and have your Doctor fax the form to Express Scripts.

EXPRESS SCRIPTS®

WEB PRESCRIPTION ORDER FORM

To MAIL your prescription:
1. Have your Doctor write a prescription.
2. Send your new prescription along with this form to:
   Express Scripts
   P.O. Box 66584
   St. Louis, MO 63166-6584

To FAX your prescription:
1. Have your Doctor fill out the bottom portion of this form.
2. Doctor can fax to: 800-875-6356
   Class II medications cannot be faxed.
   Faxed prescription can only be processed if submitted by a Doctor.

PATIENT

Member ID:

Last Name: FirstName:

Date of Birth: Phone:

Address:

Email:

Allergies:

Health Conditions:

Over-the-Counter (OTC) Medications:

DOCTOR/PRESCRIBER

DEA:

Name:

Address:

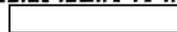Phone:

Fax:

PATIENT OPTIONS

☐ I want non-child resistant caps for all future
☐ I want a copy of my bottle label in large print on a separate sheet of paper.
☐ Check here for rush shipment. Your order once received and filled, will be shipped overnight for $21

2161

RX FORM Patient Name:				Date: __ / __ / __
Drug Name/Form	**Strength**	**Qty**	**Directions for Use**	**Refills**

X _____
Doctor/Prescriber Signature - Substitution

X _____
Doctor/Prescriber Signature - Dispense as Written

To set up a payment method, click on My Profile & Settings. Click Payment Method.

Click on My Profile & Settings, then click Payment Method

Click Add a preferred payment method.
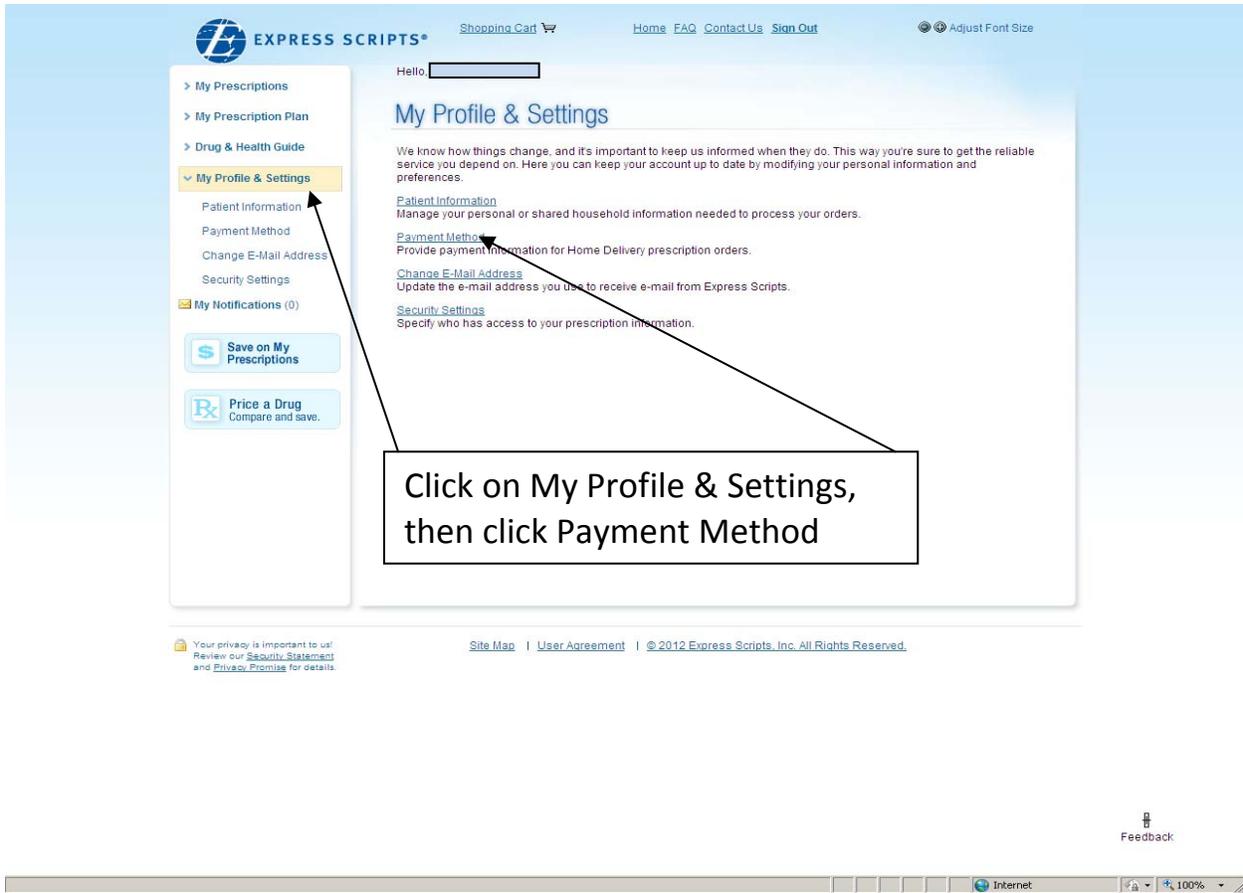
Click Add a preferred payment method
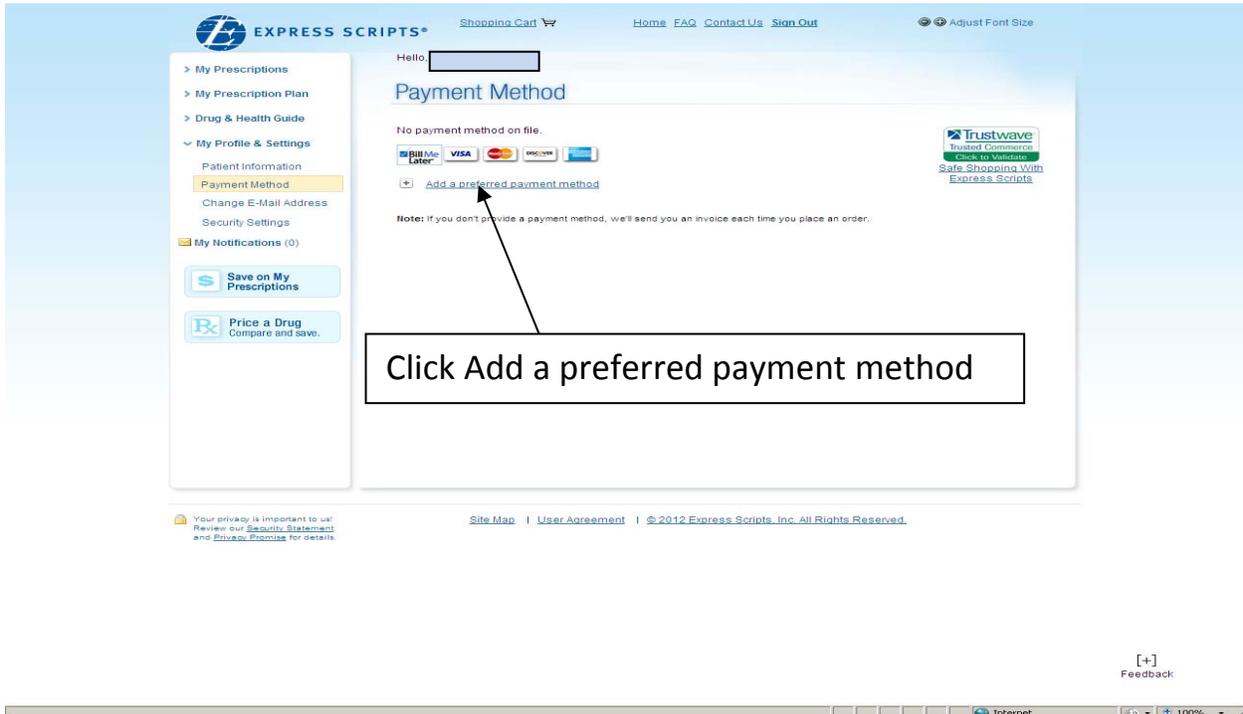
Make a selection of Bill Me Later or Credit and Debit Cards. Complete the requested information. Click Save Preferred Payment Method.

Once you have completed the Payment Method process, you can return to the My Prescriptions option at the top left column. From there you can view your order status, order refills of another prescription, or view your prescription history.