



ATTENTION: Effective July 11, 2016, duplicate copies of a paper voucher also referred to as a Provider Claim Summary (PCS) or Uniform Payment Program (UPP) vouchers may no longer be requested using this form. We strongly encourage you to enroll to receive the 835 Electronic Remittance Advice (ERA). This will enable you to requests duplicate copies electronically through Remittance Viewer located on the Availity portal. 835 ERA PROVIDERS currently enrolled, please access Availity™ to submit your requests electronically. For information on Remittance Viewer, please visit the Education and Reference/Provider tools section of our website.

Fax Requests – Prior to submitting this request form, allow 30 business days from the check issue. Note: BCBSIL will only accept one check request per form; a new form must be submitted for each request. If all fields in each section below are not entirely completed, your request will not be processed. Completed forms can be faxed to 618-997-9480.

Provider Information

Form with fields: Date of Request, NPI Number, Provider Name, Provider Address, Contact Person, Phone Number, Fax Number, Email Address

Check and UPP Voucher Request Information
When requesting a copy of a UPP Voucher, please contact your clearinghouse and/or online web vendor. (Please select the appropriate option below.)

Form with checkboxes: ERA Registration Form (located under My Account on Availity), Stop Pay Reissue, Remittance Viewer (located under Payments on Availity), Stop Pay No-Reissue, Check Copy

Form with fields: Check Number, Date of Issue, Amount, Patient Group and ID Number, Member Name, Claim Number

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