BlueCross BlueShield of South Carolina and BlueChoice® HealthPlan of South Carolina

Healthy Blue℠ BlueChoice® HealthPlan of SC

Healthy Connections

Group Practice Enrollment Checklist

RHC/FQCH, Home Health, Hospice, Dialysis, Hospitals, Skilled Nursing and Ambulatory Surgery Centers

Use this checklist to determine which items are needed for a clean application based on your group type.

Checklist Items
Group Practice Application
IRS Verification of Tax ID (Letter 147C or CP 575 E)
Electronic Funds Transfer
Signed Contracts
Medicaid ID Number*
Copy of CMS Letter
Copy of DPH License

*Only if applying for Healthy Blue.

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