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

Healthy Blue℠ BlueChoice® HealthPlan of SC

Healthy Connections

Satellite Location Checklist

Use this checklist to determine which items are needed for a clean application for a satellite location.

Checklist Items
Satellite Location Application
Electronic Funds Transfer*
Add Practitioner Form**
Authorization to Bill for Services***
Hold Harmless***
Appendix D***

*Only if new banking information applies to the new location.

For each physician being added to the group. This form does not generate with the group application. It is under the **Find a Form section of the portal. Note: If the provider is not credentialed, you must complete the Provider Enrollment application.

***Only if the practitioner is not associated with other locations.

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