



Blue Cross and Blue Shield of Minnesota

Service Cooperative Group Agents of Record

Requesting Security

for

Interactive Client Reporting

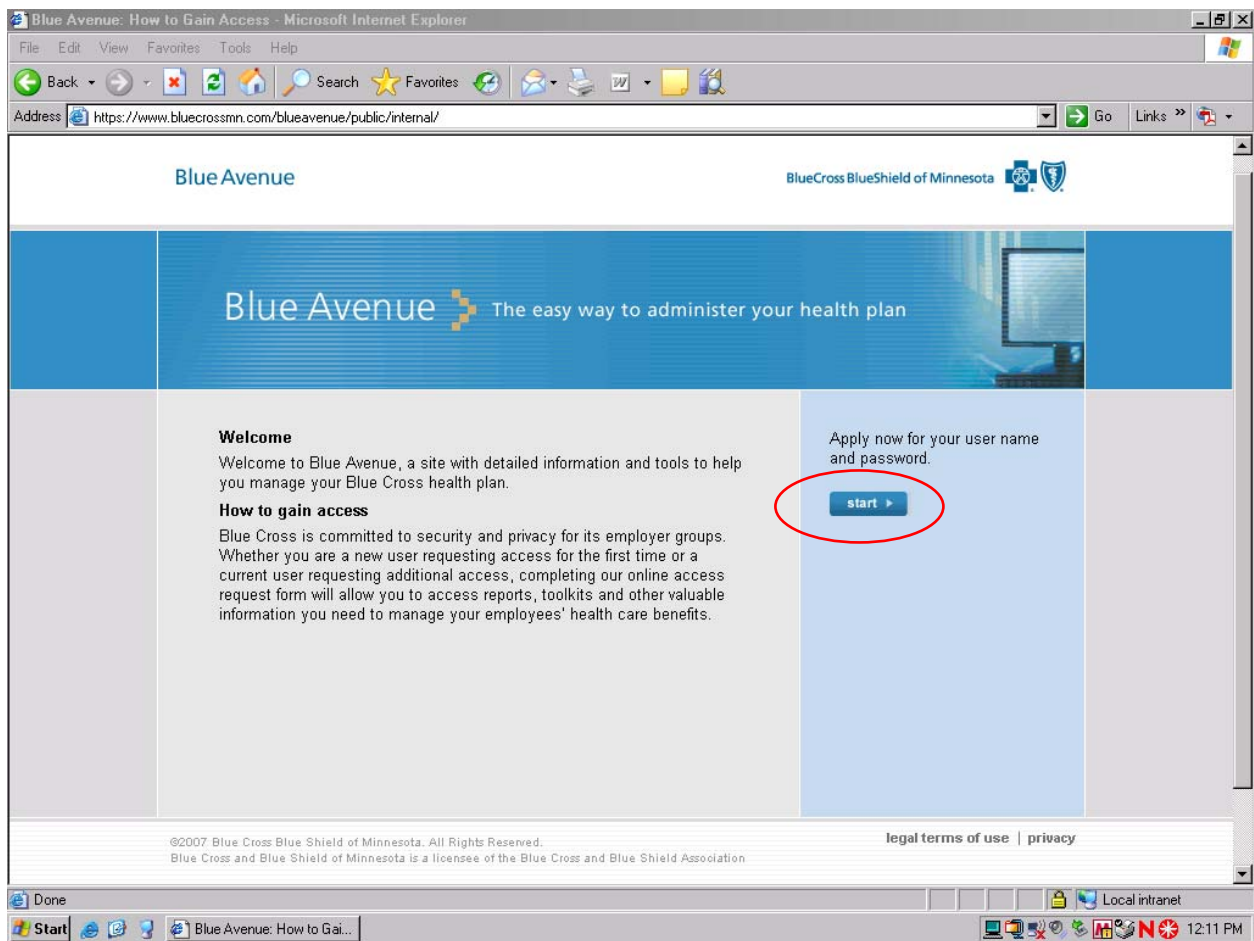
Fall 2008

Requesting Security Access: Service Cooperative Group Agents

To request security access for Interactive Client Reporting you first need to access BlueAvenue using the address below:

<https://www.bluecrossmn.com/blueavenue/public/internal/>

The BlueAvenue home page will display. Click on the **start** button to apply for your user name and password.



Complete the Online Request for Access Form:

In three easy steps you can complete the online Request for Access form.

Step 1

- Select the Service Coop the group is in by highlighting and clicking on it from the Service Coop drop-down box. (Leave the employer tax ID field blank. This does not apply for ServiceCoop groups.)
- Enter **your** business email address.
- Review your entries carefully for accuracy.
- Click on the **continue** button.

BlueAvenue : Request for Access (Step 1 of 3) - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Refresh Print Mail Stop

Address <https://www.qa.bluecrossmn.com/eClient/landing/accessRequest/initi> Go Links

Blue Avenue BlueCross

request for access STEP 1 OF 3

Gaining access to Blue Avenue is as easy as 1-2-3. Please begin by entering information below.

Step 1 of 3: Enter required information

All fields marked with * are required.

Your employer tax ID:* -

-- OR --

Service Co-Op:*

Your business email:*

Done Local intranet

Step 2 Enter your information as indicated below: (see illustration on page 5)

- **Request Type:**
 - If you are a first time Blue Avenue user, select “New Account”.
 - If you are a current/previous Blue Avenue user, select “Update Account for User ID “. (This request type will also be used if in the future if you need to modify or add access.) Enter your current Blue Avenue User ID.
- **Your name:** First and last names are required. Middle initial is optional.
- **Date of birth:** Enter your birthdate in the format mm/dd/yyyy. (Date of birth is required so we can verify your identify when calling for assistance, and to help us distinguish between users with similar names.)
- **Employer name:** Enter your employer name (your agency/business name).
- **Employer address, phone, fax:** Enter this information as completely as possible.
- **User Category:** Use the dropdown box and select “Agent/Broker”.
- **Group Access:** Select “Only these groups”. In the text box, please enter the group name you represent as completely as possible. (If you require access to more than one group within this service coop, please type each one out separated by commas. If you represent groups in more than one service coop and require access, you must complete a separate Blue Avenue request for each service coop.)
- **PIN Section:**
 - If you are first time Blue Avenue user and entering this request as a “New Account”, enter a 4-digit numerical PIN of your choosing that does not have repeating numbers, and is easy for you to remember.
 - If you are a current/previous Blue Avenue user, re-enter your existing Blue Avenue PIN.

Review your entries carefully for accuracy.

- If you need to make corrections on this page, you may use any of the options below:
 - Move your cursor to a particular field to make a correction.
 - Click on the **clear** button at the bottom of the screen. This clears all the fields where the user entered information on this screen
 - Click on the **cancel** button at the bottom of the screen. This cancels the security request altogether and you may choose to start a new request.
- If all entries are complete and accurate, click the **continue** button at the bottom of the screen.

request for access STEP 2 OF 3

Please enter your information below. Click "continue" to proceed to step 3.

Step 2 of 3: Enter required information and create a PIN

Service Co-op: Lakes Country - Schools [edit information](#)

Email Address: joe@agency.com

All fields marked with * are required.

Request Type: New Account
 Update Account for User ID:

Your Name:
First* MI Last*

Date of Birth:
mm/dd/yyyy

Employer Name:

Employer Address:

City* / State* / Zip:

Business Phone: () - Ext.

Fax: () -

User category:

Group Access: All Groups
 Only these groups:

New requests: Create a Personal Identification Number (PIN)

In order to be assigned a user name and password you must first create a PIN.
Be sure to choose a PIN that you will remember. If you forget your user name or password, you will need to provide us with your PIN to regain access to the site.

Updating an existing account? Re-enter your current PIN.

Enter your PIN: Use 4 non-repeating numbers.
Existing Blue Avenue users enter current PIN.

Step 3 Review your information for accuracy and completeness. (see illustration below)

- You can make changes by clicking “edit information” in each section and re-entering the correct information.
- Review the Legal Terms and Conditions. Check the statement “**I have read and understand the legal terms and conditions stated above.**”
- Complete the request by clicking the **I accept** button at the bottom of the page.

request for access STEP 3 OF 3

- Please review the information below to make sure it is correct. If you need to make a change, click "edit information" and re-enter the information correctly.
- Then, read the legal terms and conditions and click the checkbox to signify your agreement.
- Finally, complete your application by clicking "I accept."

Step 3 of 3: Confirm your information and authorize

Service Co-op: Lakes Country - Schools [edit information](#)

Email Address: joe@agency.com

Request Type: New

Your Name: Joe Q. Agent

Date of Birth: 06/06/1966

Employer Name: Top Rate Agency

Employer Address: 123 Main Street [edit information](#)

City/State/Zip: Anytown, MN 12345

Business Phone: (555) 555-5555

Fax: (444) 444-4444

User category: Agent/Broker

Group Access: Only these groups: AnyTown School District 125

Your PIN: 1234

Legal terms and conditions

1. The information I have provided is correct.
2. I agree not to share my PIN, user ID and/or password with anyone.
3. I agree to use Blue Avenue access only as it relates to my job function and only to the extent expressly authorized by Blue Cross and Blue Shield of Minnesota.
4. I agree not to share any information obtained through my access to Blue Avenue with anyone unless it is a requirement of my job function and only to the extent expressly authorized by Blue Cross and Blue Shield of Minnesota.
5. I will be held accountable for all actions performed on the above applications under my PIN, user ID and password.

I have read and understand the legal terms and conditions stated above.

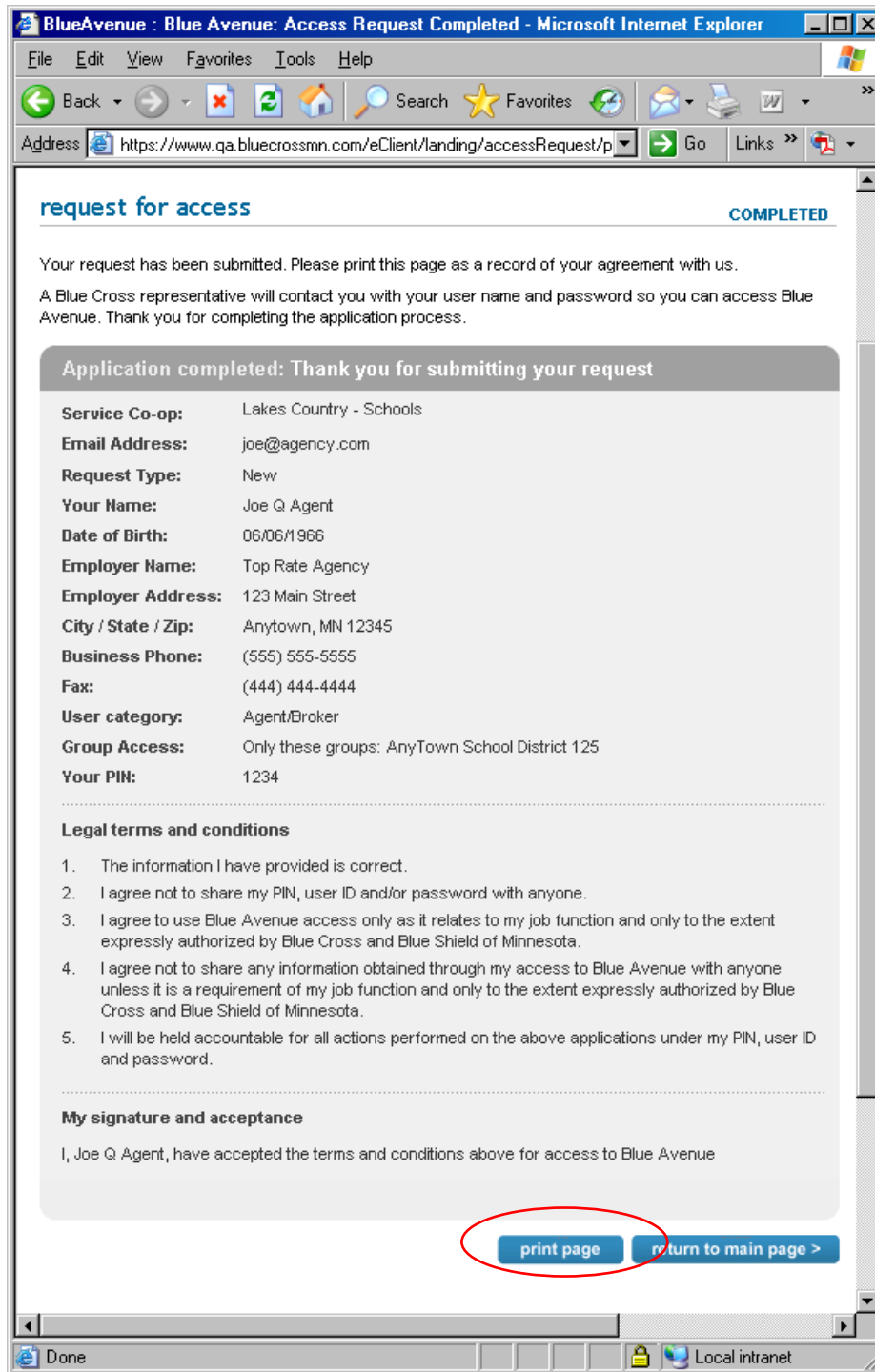
My signature and authorization

Clicking "I accept" constitutes my signature in agreement with the terms and conditions listed above.

[I decline](#) [I accept >](#)

Print Completed Application Page (Recommended)

- When you have completed your request for access, please click **print page** to keep a record of your transaction. After you receive your user ID and initial password, your PIN is required when you first log in. (Your PIN may also be needed for future transactions such as additional security requests or other interactions.)



Next Steps

A Blue Cross representative will review and approve your security request. You will be contacted if additional information or changes are needed.

After your security set up is complete, the representative will contact you with your User ID and an encrypted initial password.

At that point, you can log onto BlueAvenue by follow the instructions in the “Service Cooperatives – Group Level Interactive Client Reporting User Guide”.

Need Help?

For technical problems or issues signing into ICR, please contact the Service Desk at at: 651-662-7741 or 1-866-251-6741.

For report content questions, please Contact your Blue Cross Account Manager.