












## First Time Users

First time users are directed to click Register and follow the registration instructions.


**Create your account**

ID number \*  Policy number \* 

-

First name \*  Last name \*

Date of birth \* Email address \*



[CREATE ACCOUNT](#)

## Returning Users

Simply enter your Email and Password, along the left side of the screen and click Log In.

Forgot your Password? Click the Forgot your Password link, enter in your email address and click Change Password. A secure email will be sent with instructions on how to set a new password.



**Manage your account**

Follow the steps below to reset your password

**Forgot your password?**  
Enter your email and we'll send you instructions to change your password.

**Enter your email address**

Email \*

[CHANGE PASSWORD](#)

## Main Navigation & Landing Page

The Member Portal is an all-in-one platform for members to view coverage, submit claims, manage their plan and so much more! Members will be welcomed to their user-friendly, interactive site.

## Notification Centre

Notifications, Announcements and Alerts can be viewed and acknowledged here. Member will also receive email notices when there is activity or action required in the Member Portal or App.

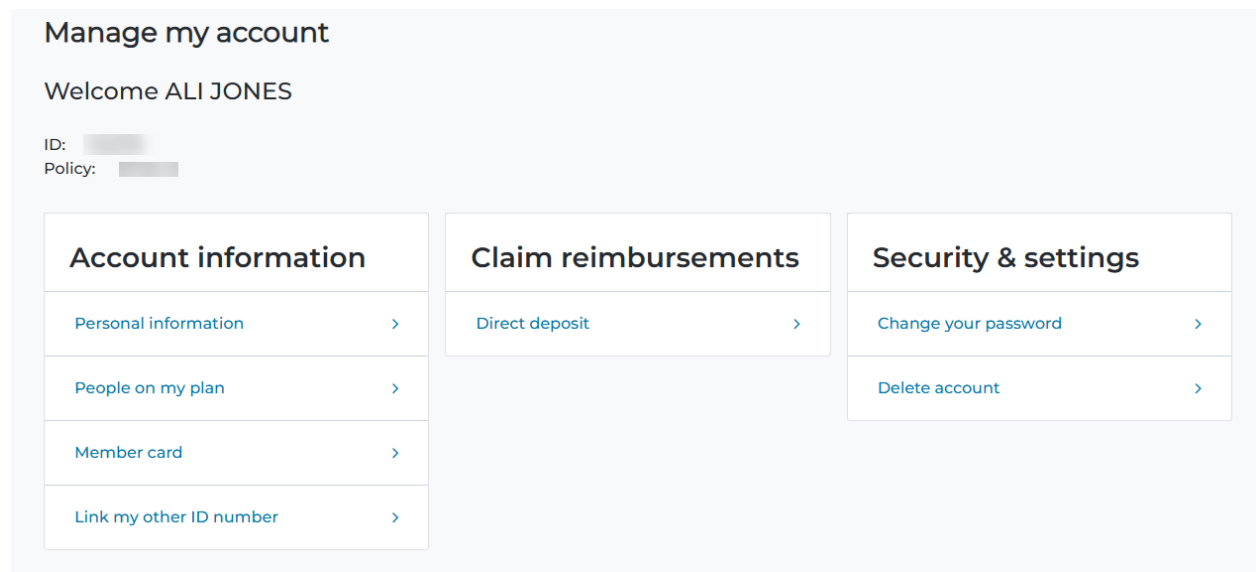
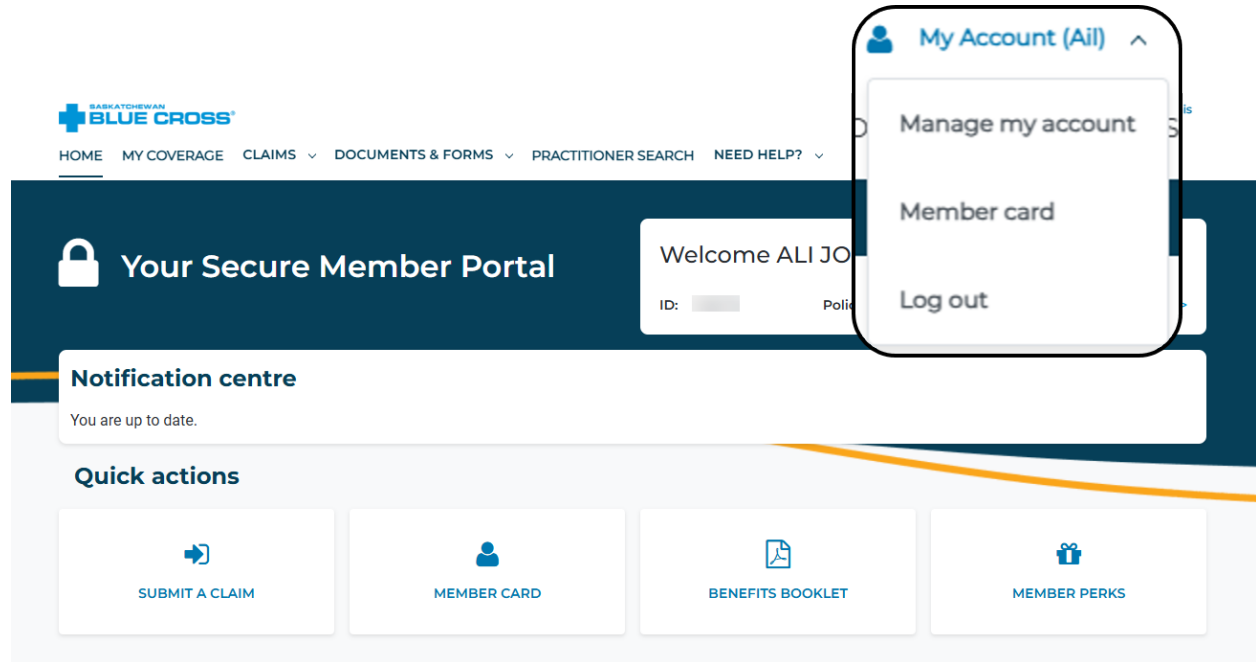
## Quick Links

Quick Links are shortcuts that give Members direct access to frequently used features or resources.

The screenshot displays the Saskatchewan Blue Cross member portal. At the top, the logo for Saskatchewan Blue Cross is visible, along with navigation links for HOME, MY COVERAGE, CLAIMS, DOCUMENTS & FORMS, PRACTITIONER SEARCH, and NEED HELP?. A user account menu shows 'My Account (All)' and a language selector for 'Français'. A search bar is labeled 'Policy:'. The main header area features a lock icon and the text 'Your Secure Member Portal'. A welcome message reads 'Welcome ALI JONES' with fields for 'ID:' and 'Policy:' and a link to 'Manage my account >'. Below this is a 'Notification centre' section. A callout box labeled 'Quick actions' highlights a row of four buttons: 'SUBMIT A CLAIM' (with a right-pointing arrow icon), 'MEMBER CARD' (with a person icon), 'BENEFITS BOOKLET' (with a document icon), and 'MEMBER PERKS' (with a gift icon).

# My Account

The My Account section is where members can easily view and update portal account details and change your password.





## Personal Information

Members can view and update their mailing address and phone number.

[Home](#) > [Manage my account](#) > [Personal information](#)

### Personal information

#### Contact information

##### Address

516 SECOND AVE N  
SASKATOON  
SK  
S7K3T2

##### Phone

(306) 123-1234

[EDIT](#)

#### Account email

This is the email you'll use to log into your account and how we'll communicate with you about your claims and coverage.

#### Current email

mmbdemo@gmail.com

## People on my Plan

Members can view the people on their plan.

[Home](#) > [Manage my account](#) > [People on my plan](#)

### People on my plan

Name	Date of Birth
ALI JONES	05 Apr 1970
RYAN JONES	09 Oct 1971

#### Need to make some changes to the people on your plan?


Currently, we are not able to make changes to dependents and people on your plan online.  
For Group Plan Members, please contact your Plan Administrator or HR Representative.  
For Personal Health Plan Members please contact our Member Experience Centre at **1-800-667-6853**.

## Member Card

Members can view, download or email their member card. If using the App version, they can also download a digital version to their phone's wallet.

### Member card

Need a copy of your member card? Print, download or share a copy of your card with other people on your plan.





**ALI JONES**  
Identification Number  
[Redacted]  
Policy Number  
[Redacted]

Covered on this plan:

Person ID	Name
[Redacted]	[Redacted]

[EMAIL CARD](#) [DOWNLOAD CARD](#)

Want to share your card another way or save it to your phone's wallet?  
You can access a digital version of your card using the mobile app (available for IOS and Android).



## Link my other ID number

If you are a member of multiple ID numbers with Saskatchewan Blue Cross you can link your plans here. This will allow a single login and the ability to switch between accounts within your portal experience.

[Home](#) > [Manage my account](#) > [Link my other ID number](#)

### Link my other ID number

If you are the cardholder of multiple ID numbers with Saskatchewan Blue Cross you can link your plans together with one login and switch between accounts within your portal experience.

#### My linked ID numbers

<b>ID number</b>	<b>Policy number</b>
105378	57412
ID number	Policy number
<input type="text"/>	<input type="text"/>

[CANCEL](#) [SAVE](#)

## Direct Deposit

Members can view and update their banking information that is used for claims reimbursement.

## Direct deposit

How is my direct deposit information managed? [?](#)

**Friendly reminder:** We can only accept Canadian bank accounts for direct deposits.

**Branch/Transit number**

00002

**Bank/Institution number**

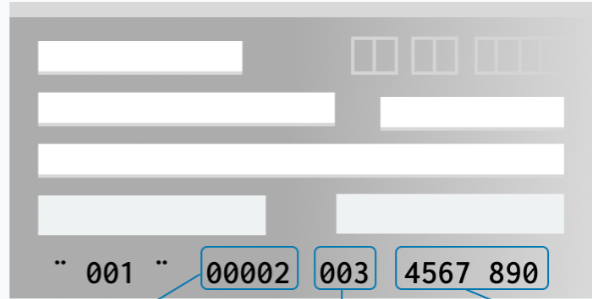
003

**Account number**

XXXXXXXX7890

EDIT

OPT OUT OF DIRECT DEPOSIT



### Don't have a cheque?

You can usually find this information after you've logged into your account on your bank's website. If you can't find it, you can contact your bank and ask for your direct deposit information. Just a reminder: To take advantage of direct deposit, you'll need to have a Canadian bank account.

## Change your password

Members can change their password by following the password requirements listed on the screen.

## Change my password

### Change Password

Current Password\*

New Password\*

Confirm Password\*

**Password requirements:**

- ✓ Must be between 8 and 50 characters
- ✓ At least one lower case character
- ✓ At least one upper case character
- ✓ At least one number

CANCEL

SAVE


# My Coverage

Members can view their coverage and benefit details. The screen is arranged by benefit and is expanded to provide benefit descriptions, coverage amounts and maximums. There is also the ability to toggle between people on the plan.


[Home](#) > [My coverage](#)

## My coverage


Choose a type of coverage to learn more about each benefit and the coverage that's available to you.




Life & Disability Benefits




Ambulance




Hospital




Extended health benefits



Travel



Dental



Vision

## Extended health benefits

**Accidental Dental Treatment** >


**Acupuncturist** >

**Ankle / Foot Orthosis (afo)** >

**Ankle Brace** >

**Arm Brace** >

**Athletic Therapist** >

**Coverage for:** RICHARD MACGR... 

**Benefit description**

Charges for dental Treatment when natural teeth have been damaged by a direct, accidental blow to the mouth.

[View your policy booklet >](#)

**Coverage period**

Jan 01 2025 - Dec 31 2025

*\*Please note: The coverage period displayed may not reflect effective dates of coverage for changes made midyear (i.e. adding/removing coverage). Claims incurred prior to your effective date are not eligible for reimbursement.*

**Coverage Amount**

80%

**Claim requirements**

**Standard Requirements**

Your submission should include itemized receipts or invoice which include the following:

- Patient's name
- Date(s) of purchase/service
- Description of the product/service
- Name, location, professional designation of the supplier/provider
- Amount charged

Please note: If expenses have been claimed under another source of coverage, a detailed Explanation of Benefits (EOB) statement from their benefit consideration must also be included

There is also a Benefit Accumulator that shows the benefit usage and amount remaining.

Home > My coverage > Dental coverage

## Dental coverage

Search

- BASIC** >
- MAJOR >
- DENTURES >

### Benefit description

Basic preventative and restorative dentalcare, such as examinations, cleanings, fillings, and more. Please refer to your benefits booklet for complete details or use the code search to verify eligibility of specific procedures.

[View your policy booklet >](#)

### Coverage period

Jan 01 2025 - Dec 31 2025

*\*Please note: The coverage period displayed may not reflect effective dates of coverage for changes made midyear (i.e. adding/removing members).*

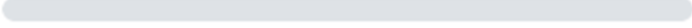
Your submission should include itemized receipts or invoice which include the following:

- Patient's name
- Date(s) of purchase/service
- Description of the product/service
- Name, location, professional designation of the supplier/provider
- Amount charged

Please note: If expenses have been claimed under another source of coverage, a detailed Explanation of Benefits (EOB) statement from that source for consideration must also be

### Coverage maximum

\$1,500 per person per benefit year



Used: \$0.00                      Remaining: \$1,500.00

In combination with:

- Basic Services
- Dentures
- Major Services

## Drug Coverage Search

Members can check if a particular drug is eligible on their plan by searching by drug name or Drug Identification Number (which is a numerical identifier included on your prescription).

Home > My coverage > Drugs

### Drugs

CHECK IF A DRUG IS ELIGIBLE ON YOUR PLAN

FORMULARY >

Coverage for: ANNETTE MURPHY

#### Benefit description

Please refer to your benefits booklet for complete details or contact our Member Experience Center for assistance.

[View your policy booklet >](#)

#### Coverage period

Mar 01 2024 - Feb 28 2025

*\*Please note: The coverage period displayed may not reflect effective dates of coverage for changes made midyear (i.e. adding/removing coverage). Claims incurred prior to your effective date are not eligible for reimbursement.*

#### Coverage Amount

80%

#### Claim requirements

##### Standard Requirements

Your submission should include itemized receipts or invoice which include the following:

- Patient's name
- Date(s) of purchase/service
- Description of the product/service
- Name, location, professional designation of the supplier/provider
- Amount charged

Please note: If expenses have been claimed under another source of coverage, a detailed Explanation of Benefits (EOB) statement from their benefit consideration must also be included

## Drugs: Search

Select a person on your plan and type the drug name or Drug identification Number (DIN) to see what's covered.

Who is the drug for?\*      Enter the drug name or DIN\*


[BENEFIT BOOKLET \(PDF\)](#)      [SEARCH](#)

## Search results

SANDOZ AMOXI-CLAV TAB  
500/125MG  
DIN: 02482576

## Practitioner Search

Members can search a wide variety of practitioners based on type, location and the ability for practitioners to direct bill on your behalf.

 My Account (All) Français

HOME MY COVERAGE CLAIMS DOCUMENTS & FORMS **PRACTITIONER SEARCH** NEED HELP? Policy:

Home > Practitioner search

### Practitioner search

Type of practitioner\*  Health professional name

Address\*  City\*  Province\*  Search Radius

Payment options  Direct bill only  All

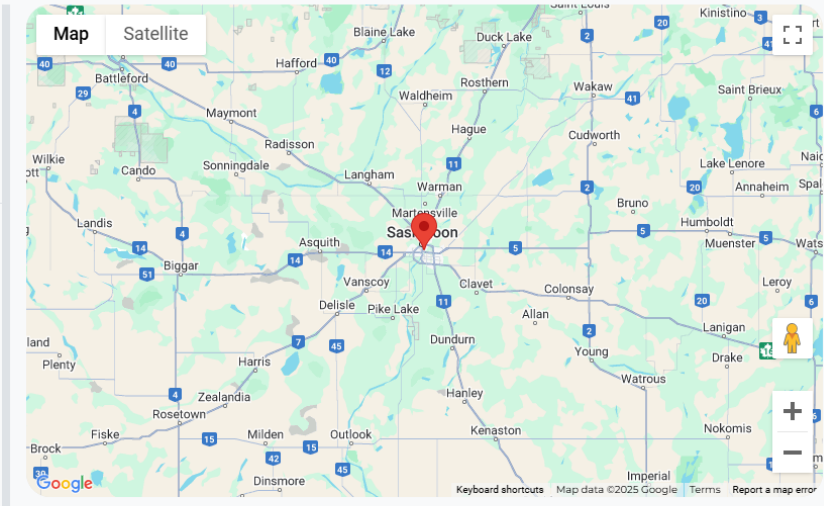
Home > Practitioner search > Practitioner search results

### Practitioner search results

1 results for: CHIROPRACTOR - Saskatoon

**CHIRO TEST**

516 2ND AVE N SASKATOON SK  
(306) 667-5803 EXT  
1 m



When using the App, members will have the opportunity to link the search results to their navigation feature on their smartphone.

# Claims

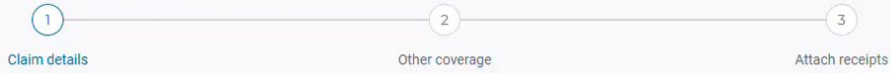
## Submit a Claim

Claims can be submitted through this integrated and secure platform. Members are guided through the claims submission process regardless of the claim type.

The screenshot displays the Saskatchewan Blue Cross member portal. At the top, the navigation bar includes the logo, user account information (My Account (All) and Français), and a menu with options like HOME, MY COVERAGE, CLAIMS, DOCUMENTS & FORMS, PRACTITIONER SEARCH, and NEED HELP?. The main header area features a lock icon and the text 'Your Secure Member Portal', along with a welcome message for ALI JONES and account details (ID: 105378, Policy: 57412). Below this is a 'Notification centre' indicating the user is up to date. A 'Quick actions' section contains four buttons: 'SUBMIT A CLAIM' (highlighted), 'MEMBER CARD', 'BENEFITS BOOKLET', and 'MEMBER PERKS'. The main content area shows the breadcrumb 'Home > Submit a claim > Extended Health' and the title 'Submit a claim: Extended health'. A progress bar indicates three steps: 1. Claim details (active), 2. Other coverage, and 3. Attach receipts. The 'Claim details' section includes a question: 'Are any of these claimed expenses the result of a motor vehicle or workplace injury? \*' with radio buttons for 'Yes' and 'No' (selected). Below this is a 'Date of service\*' field with a placeholder 'DD/MM/YYYY' and a calendar icon. An 'Enter full cost\*' field is also present. The final question is 'Has a portion of this claim been paid by another policy or government program? \*' with radio buttons for 'Yes' and 'No' (selected). A 'NEXT' button is located at the bottom right of the form.



## Submit a claim: Extended health



### Claim Details

What is the claim for?\*

Who is this for?\*

**Have services on more than one date?** Please submit a separate claim for each visit.

BACK NEXT

## Submit a claim: Extended health



### Other coverage

Do you or any of your covered dependents have other coverage not previously reported, or changes to other coverage previously reported? \*

Yes

No

BACK NEXT

## Submit a claim: Extended health



Attach pictures of the required documents (such as itemized receipts, claims forms, prescriptions or claim statements from any other carrier(s)).  
Tip: For best results, make sure your image is bright and sharp. Poor quality images or invalid information could lead to delays.

What Documents do I need to Submit? ?



Drag & drop file or

ADD DOCUMENTS

0 document attached

You may include up to 10 attachments, with a combined total size of 25 MB. We support the following file types: BMP, JPG, JPEG, PDF

Thank you for submitting your claim

Travel Claims are submitted by a direct link to our travel coverage provider.

Disability Claims can be submitted using the [Document Upload](#) feature.

### View Claims History

**SASKATCHEWAN BLUE CROSS** My Account (All) | Français

HOME MY COVERAGE CLAIMS DOCUMENTS & FORMS PRACTITIONER SEARCH NEED HELP? Policy: LOGISTIC OFFICE SPACES

Home > Claims history **SUBMIT A CLAIM**  
**VIEW CLAIMS HISTORY**

**Claims history**

**Don't see a claim you've recently submitted?**  
If you've submitted a claim to us and it's not showing up here, our claims analysts may not have had a chance to review it yet.

Service start date\*  Service end date\*

If you need to access claims history from more than two years prior, please [contact us](#).

Who is it for?  Benefit Category  Status  **SEARCH** **RESET**

**ALI JONES** Date of Birth: 05 Apr 1970

Service date	Date processed	Benefit description	Payment type	Submitted amount	Blue Cross paid	Status	Details
14 Jan 2025	03 Feb 2025	Health	Member	\$100.00	\$0.00	Processed	<a href="#">View More</a>
14 Jan 2025	03 Feb 2025	Health	Member	\$150.00	\$0.00	Processed	<a href="#">View More</a>
<b>Total</b>				\$250.00	\$0.00		
<b>Grand total</b>				\$250.00	\$0.00		

**BACK** **DOWNLOAD**

By clicking View More, along the right-hand side, the member will be provided with Claims Details to view or download.

[Home](#) > [Claims history](#) > [Claims details](#)

## Claim details

### Payment information

Date processed ⓘ 03 Feb 2025  
Paid to Member  
Payment type Member

Payment amount \$0.00

### Calculation of benefits

ALI JONES - 05 Apr 1970

Service date	Submitted amount	Eligible amount	Benefits description	Deductible	Coverage % ⓘ	Blue Cross paid	EOB
14 Jan 2025	\$150.00	\$0.00	CHIROPRACTOR	\$0.00	0%	\$0.00	111
<b>Total</b>	<b>\$150.00</b>	<b>\$0.00</b>		<b>\$0.00</b>		<b>\$0.00</b>	

#### Explanation of Benefits:

111 This claim is awaiting administrative information. Our assessment will follow once it is received.

[BACK](#)

[DOWNLOAD](#)

# Documents & Forms

## Find a Document

Members have access to a variety of documents & forms at their fingertips.

## Upload a Document

This secure document sharing feature allows Members to easily and safely exchange documentation directly through the Member Portal. Members can upload, receive and manage documents with Saskatchewan Blue Cross.

The screenshot shows the 'My documents' page in the Saskatchewan Blue Cross Member Portal. At the top, there is a navigation bar with the Saskatchewan Blue Cross logo, a user account menu ('My Account (All)'), and a language selector ('Français'). Below the navigation bar, there are menu items for 'HOME', 'MY COVERAGE', 'CLAIMS', 'DOCUMENTS & FORMS', 'PRACTITIONER SEARCH', and 'NEED HELP?'. A search bar labeled 'Policy:' is also present. The main content area has a breadcrumb trail: 'Home > Document & Forms > My documents'. The title 'My documents' is displayed, followed by the question 'Need to send us a document?'. Below this, there is a text block explaining that the 'Send a document' button is used to securely upload and send documents like power of attorney, policy changes, and application forms. A yellow callout box provides additional information: 'If your documents are related to a claim that you want to submit, visit our [Submit a Claim](#) page. We'll walk you through the process and make sure you're sending us all the required documentation.' An orange 'SEND A DOCUMENT' button is located to the right. Under the heading 'Document History', there are two sections: 'Here's the list of documents we've received from you.' and 'Here's the list of documents you've received from us.', both of which show 'No records found'.

## Contact Us

Can't find what you're looking for here? We're just a phone call away. Our Member Experience representatives are happy to assist you with any questions you have.



Empowering healthy lives.

## GET IN TOUCH

Our business hours are 8:30 a.m. to 5:00 p.m., M–F.  
In-person service hours are 9:00 a.m. to 4:00 p.m., M–F.

### SASKATOON

516 2nd Avenue North  
Saskatoon, SK  
S7K 2C5

Phone 306-244-1192  
Fax 306-652-5751

### REGINA

100-2275 Albert Street  
Regina, SK  
S4P 2V5

Phone 306-525-5025  
Fax 306-525-2124

[sk.bluecross.ca](http://sk.bluecross.ca)  
1-800-667-6853 within Canada