PROVIDER QUICK POINTS PROVIDER INFORMATION



September 25, 2019

Availity Prior Authorization Submission and Inquiry Tips

This is a reminder that the Availity Prior Authorization <u>Look Up</u> tool (PA Look Up Tool) is only applicable to Blue Cross and Blue Shield of Minnesota (Blue Cross) Commercial and Medicare lines of business. *For subscribers that are enrolled with a Blue Cross and Blue Shield Plan of another state, please check with the subscriber's plan to verify prior authorization guidelines and processes.*

In Scope:

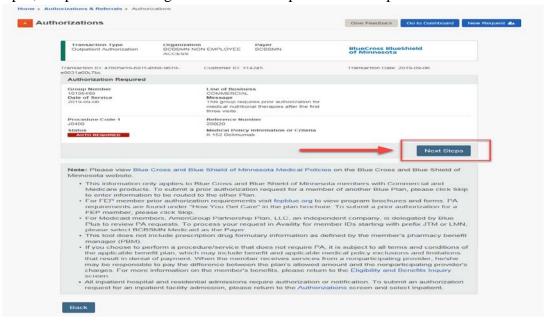
- Commercial
- Medicare

Out of Scope:

- Federal Employee Program (FEP)
- Minnesota Health Care Programs (MHCP)

Commercial and Medicare Prior Authorization Submission:

If it is determined that an authorization is required, after using the PA Look-Up Tool, click on "Next Steps." After clicking "Next Steps", the provider can begin the submission process for the prior authorization.



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 $Distribution: \ \ \underline{Available\ online:}\ \ \underline{https://www.bluecrossmn.com/healthy/public/personal/home/providers/forms-and-publications$

Submitting Availity Prior Authorizations:

The ability to <u>submit</u> prior authorizations on the Availity PA tool can be used by all lines of business.

In Scope:

- Commercial
- Medicare
- FEP
- MHCP

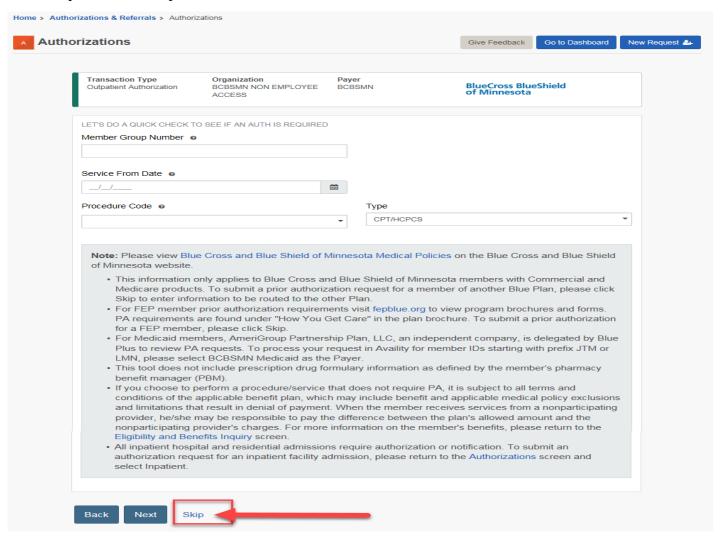
Out of Scope:

• All lines of business are in scope

FEP Prior Authorization Submission:

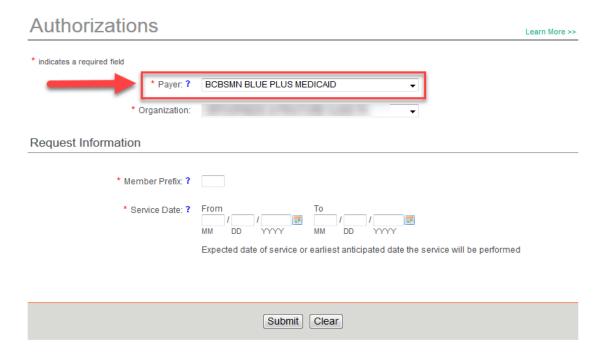
On the "LET'S DO A QUICK CHECK TO SEE IF AN AUTH IS REQUIRED" screen in the PA Look-Up Tool, click the Skip button. This will bypass the look up tool and allow the Provider to submit the prior authorization for FEP and MHCP Members.

Note: For FEP prior authorization requirements visit <u>fepblue.org</u> to view program brochures and forms. PA requirements are found under "How You Get Care" in the plan brochure. To submit a prior authorization for a FEP member, please click Skip.



MHCP Prior Authorization Submission:

Amerigroup Health Solutions, a subsidiary of Anthem, is delegated by Blue Plus to review PA requests for MHCP members. MHCP members can be identified by their member ID beginning with prefix JTM or LMN. Providers must select BCBSMN Blue Plus Medicaid (00562) as the Payer and Availity will route the user to Amerigroup's payer space.



Questions?

If you have any questions regarding Commercial or Medicare PA submission, please contact provider services at (651) 662-5200 or 1-800-262-0820.

If you have any questions regarding FEP, please contact provider services at **1-800-859-2128**.

If you have any questions regarding MHCP PA submission, please contact provider services at **1-866-518-8448**.