

# PROVIDER BULLETIN

## PROVIDER INFORMATION



March 1, 2019

### **Update: Reminder Regarding Minnesota Health Care Programs and Minnesota Senior Health Options (MSHO) Pre-certification Requirements**

*The information in this Bulletin replaces Provider Bulletin P21-19, which was published on February 1, 2019. Information informing providers of approval of 48 hours for vaginal delivery and 96 hours for cesarean section delivery has been added.*

As previously communicated, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) **requires pre-certification for all inpatient admissions effective January 1, 2019**. Pre-certification prior to admission is required for all inpatient stays excluding urgent/emergent admissions and Obstetric Deliveries.

- **Inpatient admissions for MSHO members will remain notification only**

**Claims for dates of service beginning March 1, 2019 will deny as provider liability without an approved authorization.**

#### **Planned Inpatient Admissions**

Planned inpatient stays require pre-certification prior to admission.

- A medical necessity review will be conducted using MCG criteria
- Determinations will be communicated to the facility
  - For standard requests, a decision will be communicated as expeditiously as required by the subscriber's condition, not to exceed ten (10) calendar days.
  - For expedited/urgent requests, decisions will be communicated as expeditiously as required by the subscriber's condition, not to exceed 72 hours.

#### **Urgent/Emergent Admissions and Obstetric Deliveries**

Urgent/emergent inpatient admissions are defined as the unplanned, acute necessity of a member moving to a higher level of care. For example: Moving from the Emergency Room, Observation, or a Nursing Facility to an Inpatient hospital setting as required by their condition.

- An authorization request for urgent/emergent admissions or obstetric deliveries must be submitted within one business day following the admission. .
- 48 hours is approved for vaginal delivery, and 96 hours is approved for cesarean section delivery.
- If the clinical documentation needed for certification is available at the time of notification the provider may submit to expedite the review process.
- All medical emergent inpatient hospital admissions will be reviewed within one business day of the facility notification to Amerigroup.
- Clinical information for the initial (admission) review will be requested by Amerigroup at the time of the admission notification.
- For medical admissions, the facilities are required to provide the requested clinical information within 24 hours of the request.

- o If the information is not received within 24 hours, a lack of information adverse determination (i.e., a denial) may be issued.
- o If the clinical information is received, a medical necessity review will be conducted using applicable nationally recognized clinical criteria. (MCG)
- Decisions are communicated verbally or via fax within 24 hours of determination

**Inpatient pre-certifications and clinical documentation should be submitted in one of the following ways:**

- Phone: **1-866-518-8448**
- **Fax:**

Acute inpatient	For Blue Advantage Families and Children (F&C), MinnesotaCare, and Blue Advantage Minnesota Senior Care Plus (MSC+) members	<b>1-844-480-6839</b> Precertification <b>1-844-480-6840</b> Clinical or Discharge information
Planned elective admissions	For F&C, MinnesotaCare and MSC+ members	<b>1-844-480-6839</b> Precertification <b>1-844-480-6840</b> Clinical or Discharge information
Planned elective admissions	For MSHO members (Notification Only)	<b>1-866-959-1537</b>
Behavioral health	For MSHO members (Notification Only)	<b>1-877-434-7578</b>

- **Web:** To access the Interactive Care Reviewer (ICR) tool through Availity for the first time, contact your Availity administrator and request to be assigned the *Authorization and Referral Request* role. Once you have the role assignment, you can immediately access ICR by taking the following steps:
  - o From the Availity home page (<https://www.availity.com>), select **Patient Registration** in the top navigation.
  - o Select **Authorizations & Referrals**, then select Authorizations.
  - o Select the Payer (BCBSMN Blue Plus Medicaid) and Organization and submit.

Additional information and training materials for the ICR tool are located at:

<https://www.bluecrossmn.com/providers/migration-minnesota-health-care-programs>

- Select Tools and Resources.
- Select Migration of Minnesota Health Care Programs, and then Training References.

Providers will find the following ICR training opportunities:

- Power Point presentation for the ICR tool
- A link out to individual recorded training videos for different topics within ICR
- A link to register for monthly live ICR webinar trainings as scheduled.

**Inpatient Pre-Certification Requirements for Behavioral Health (BH) Inpatient Psychiatric and Substance Use Disorder (SUD) Hospitalization Admissions:**

- Beginning February 1, 2019, all inpatient psychiatric and SUD hospitalization admissions will require pre-certification for Blue Advantage Families and Children (F&C) and Minnesota Senior Care Plus (MSC+) members.
- BH policies will be managed via MCG Guidelines as listed above and previously communicated in the December Behavioral Health Provider Bulletin.

**Questions?**

If you have questions, please contact Blue Cross Provider Services at **1-866-518-8448**.