

Quick Points



September 20, 2010

New turnaround time process for urgent pre-certification and prior authorization requests

As part of the new federal health care reform, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will adopt new review timelines for urgent pre-certification and prior authorization requests received on or after October 1, 2010. Under regulations issued pursuant to the Patient Protection and Affordable Care Act, Blue Cross and its affiliates must perform a 24-hour turnaround for urgent pre-certification and prior authorization requests when sufficient information has been submitted to complete the review.

The regulations apply to commercial products only. This new review timeline process will apply to health services provided to members in fully insured and self-insured benefit plans. Minnesota Health Care Program plans (Government Programs), Medicare Programs and the Federal Employee Program (FEP) are exempt from this review standard at this time.

Health care reform urgent request definition

The regulations define an urgent request as:

- Requires immediate action to prevent a serious deterioration of a member's health that results from an unforeseen illness or an injury, or
- Could jeopardize the ability of the individual to regain maximum function based upon a prudent layperson's judgment, or
- In the opinion of the treating physician, would subject the individual to severe pain that cannot be adequately managed without the treatment being requested. An urgent condition is a situation that has the potential to become an emergency in the absence of treatment.

Requests not meeting the conditions for an urgent request will be considered nonurgent. Nonurgent requests will be reviewed within the timeframe listed in Minnesota statute 62M.05 subd.3a (10 business days).

Questions

If you have questions, please contact provider services at **(651) 662-5200** or toll free at **1-800-262-0820**.