

PROVIDER QUICK POINTS

PROVIDER INFORMATION



October 12, 2015

Prior Authorization, Appeals and Medical Record Requests for Platinum BlueSM (Cost) and SecureBlueSM (HMO SNP) Subscribers

In order to allow efficient review of prior authorization and appeal requests for Platinum Blue and SecureBlue subscribers, please include all relevant information noted below with your request. Failure to provide relevant supporting medical documentation when requesting the prior authorization or appeal could unnecessarily delay the request or create an upfront denial.

Prior Authorizations

As stewards of healthcare expenditures for our subscribers, we are charged with ensuring the highest quality, evidence based care for our members. One method for doing so is through the prior authorization process. The primary purpose is to ensure that evidence based care is provided to our members, driving quality, safety, and affordability.

If the item or service being rendered requires a prior authorization, please review applicable coverage criteria, including, but not limited to: Medicare NCDs and LCDs, MHCP Criteria, and Blue Cross and Blue Shield of Minnesota Medical Policies. Include all relevant supporting medical documentation regarding the subscriber's condition in your prior authorization request.

Appeals

If any new or relevant information becomes available during the appeal process, please send the medical records to Blue Cross and Blue Shield of Minnesota (Blue Cross) promptly so that we can consider the information in making a determination on the appeal. By receiving new information promptly the subscriber should receive notice regarding their appeal in a timely manner.

Medical Record Requests

When necessary, Blue Cross will request additional supporting documentation from you to support the accuracy of the prior authorization or appeal review. It is important to process all medical record requests in as timely a manner as possible and include relevant documentation relating to the requests, including any changes in the subscriber's condition.

Questions?

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