

# PROVIDER QUICK POINTS

## PROVIDER INFORMATION



May 15, 2017

### **Implementation of New Utilization Management Platform**

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) is moving its Utilization Management activities to a new platform in June 2017, for clinical reviews of Prior Authorizations, hospital and length of stay pre-certifications, and Concurrent Reviews. All Blue Cross subscribers will be migrated to this new platform in June 2017.

### **What differences will providers see in response to Prior Authorization Requests, Pre-certifications and Requests for Concurrent Reviews?**

- Fax and letter communications have been updated and will look different than they do today; however, the content remains the same.
- Providers will receive an initial determination fax, followed by a letter with determination details.
- Providers must call or fax requests for additional inpatient concurrent days.
  - The Blue Cross Utilization Management team will no longer initiate contact with providers to request updates on Concurrent Reviews. This includes, but is not limited to: hospitals, acute rehabilitation, long term acute care facilities, and skilled nursing facilities.
- Starting in September 2017, providers will get denial letters for post service claim reviews; currently, no letter is sent.

### **Questions?**

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

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