May 1, 2018

Pre-Admission Notification Requirement for Commercial Admissions

To best support the coordination of care for our subscribers, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will begin enforcing the existing requirement of a pre-admission notification (PAN) submission **late this summer**, for **commercial** subscribers for both planned and urgent admissions. **This change will also apply to subscribers belonging to an out of state Blue Plan. Blue Cross is providing early notification in order to provide time for hospitals to prepare for this administrative requirement. A separate Provider Bulletin will be published with the effective date of the enforcement.** Blue Cross will require that PANs be submitted within 24 hours or on the next business day following a weekend or holiday. **If a PAN is not submitted timely, the inpatient facility claim will be administratively denied upon its submission for lack of notification**. For inpatient facility claims submitted with observation hours, the PAN submission timeframe requirement will be extended by the number observation hours submitted. If a prior authorization is submitted for a procedure, a PAN is also required to be submitted for the inpatient admission.

Please note: If an admission requires pre-certification, a PAN is not required, and thus is not impacted by this change in requirement. A list of inpatient services that require pre-certification can be found in the Medical Policy section of the Blue Cross provider website under Utilization Management for each line of business.

Enforcement of the PAN requirement will exclude the following:
- Coordination of Benefits (COB) when Blue Cross is not the primary payor
- Normal Labor and Delivery
- Newborns (children less than 30 days old)

The denial of the inpatient claim will be an administrative denial and cannot be appealed for medical necessity.

Submitting a PAN for a Blue Cross of Minnesota subscriber:
There are currently five options:
- Submit a 278 file (see information on following page to get started).
- Submit Admission, Discharge, Transfer (ADT) dates via an HL7 file (see the following page to get started).
- Submit via the fillable form within the Blue Cross portal at **Availity.com**
- Fax the "Inpatient Admission Notification & Pre-Certification Request Form" to **651-662-7006**. To access the form:
    1. Go to **providers.bluecrossmn.com**
    2. Under What's Inside, select "Forms & publications"
    3. Choose "forms – precertification/preauthorization/notification" from the drop-down
    4. Select the "Inpatient Admission Notification & Pre-Certification Form"
- Contact Blue Cross via phone at **1-800-528-0934**

Providers should also use **Availity.com** to inquire about, make updates, or add a discharge date to a previously submitted PAN. If you receive a pre-admission notification number, please include the number on the claim to expedite processing. If a PAN number isn't provided at the time of submission, providers can obtain the PAN number via an inquiry on Availity the day following the submission.

Submitting a PAN for an out-of-state Blue Plan subscriber:
There are currently three options:
- Contact the patient's home plan using the Provider Service phone number on the back of the subscriber's ID card.
- Use the Medical Policy and Pre-Certification/Authorization Router to identify the home plan and to find the instructions for submitting a PAN to a specific home plan. The router is available on the **providers.bluecrossmn.com** webpage or on **Availity.com** in Payer Spaces.
- Call **1-800-676-BLUE** for assistance in routing your call regarding a PAN submission to the appropriate Blue Plan.

Additional information regarding PAN requirements can be found on the Blue Cross provider website:
1. Go to **providers.bluecrossmn.com**
2. Under Tools & Resources, select "Medical Policy," and read/accept the Blue Cross Medical Policy and UM Statement
3. Click on the '+' next to 'Utilization Management' and under the 'Precertification Lists' select the MN Government Programs or Commercial Pre-Certification/Pre-Authorization/Notification List'

Electronic Solutions for Pre-Admission Submission
To assist providers with the requirement of PANs, Blue Cross has implemented electronic solutions to accept PANs via 278 real-time transactions or via the submission of Admission, Discharge, and Transfer data (ADT) via an HL7 file through a connection with our clearinghouse, Availity.

278 is an HIPAA standard format for EDI transmission for Pre-Admission Notification.

ADT is the Admission, Discharge, and Transfer messages within a hospital's system. These notifications are communicated as HL7 messages, a set of international standards for transfer of clinical and administrative data between systems needed for Pre-Admission Notification, Discharge, and Transfer.

With the implementation of either of these solutions, there is no longer the need to fax PANs, make status calls, or manually enter PAN data into our portal application.

Please note, services requiring medical necessity review-precertification and prior authorization are excluded from this automated process but watch for additional information regarding the rollout of the Prior Authorization Portal capabilities for these services on Availity.

Getting Stated with 278 File Submissions
If you are interested in the opportunity, you will need to take the next steps listed below:

Step 1 - You will need to verify with your Electronic Medical Records (EMR) vendor that they can send the 278-real-time transaction from your system.

Step 2 - Review the Blue Cross 278 real-time transaction companion guide details found at the following link: https://www.bluecrossmn.com/healthy/public/portalcomponents/PublicContentServlet?contentId=P11GA_16268309

Step 3 - After completing above steps, please contact your Blue Cross Contract/Account Manager or Network Management Consultant and provide them with your technical contact information.

Step 4 – The Blue Cross Contract/Account Manager or Network Management Consultant will engage the Blue Cross EDI/Availity Operations team to coordinate next steps with your technical contact(s).

Step 5 - The Blue Cross EDI/Availity Operations team will work with the technical representative at your organization and Availity to assist with set up and through the testing process.

Getting Started with ADT

If you are interested in the opportunity, you will need to take the next steps listed below:

Step 1 – Confirm if you have an existing Portal Account with Availity,

    If Yes - Contact your internal Availity Administrator and have them add users to the account that will be utilizing the ADT/HL7 solution in production

    If No - Go to www.availity.com and complete the registration steps for a portal account

Step 2 - After completing the above steps, please contact your Blue Cross Contract/Account Manager or Network Management Consultant and provide them with your technical contact information.

Step 3 – The Blue Cross Contract/Account Manager or Network Management Consultant will engage the Blue Cross EDI/Availity Operations team to coordinate next steps with your technical contact(s).

Step 4 - The Blue Cross EDI/Availity Operations team will work with the technical representative at your organization and Availity to assist with set up and through the testing process.

Questions?

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