

PROVIDER QUICK POINTS

PROVIDER INFORMATION



July 18, 2018

Availity Authorization Portal Update

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) now accepts Preadmission Notifications (PANs), precertification requests, and prior authorization (PA) requests online at [Availity.com](https://www.availity.com). This new capability supports the Blue Cross roadmap to further enable electronic submissions, improve provider efficiency and ability to self-serve.

Providers can learn how to submit, find and update an authorization in the [BCBSMN Prior Authorization – Training Demo](#). This demo is found in Availity by following these steps:

1. Click **Help & Training | Get Trained** (Availity Learning Center opens a new tab)
2. Go to the very top of the ALC screen, search with the keyword “BCBSMN”
3. Click Enroll in the top right corner, confirm you want to enroll and click “Start” to view the training

The Availity Authorization FAQ is available in “Payer Spaces” at [Availity.com](https://www.availity.com).

Reminders and Tips for Hospital and Post-Acute Admissions

Hospital PANs

- Use the “Inpatient” authorization type to enter PANs in Availity.
- PANs submitted on Availity for commercial members will be automatically approved when seven days or less are requested. An immediate response will be received with the approval. The approval can be saved or printed. The status can be viewed in the Auth/Referral Dashboard.
- If more than seven days are requested, add an attachment to the request for processing by Blue Cross. A fax will be sent with the approval information when processing of the request is completed. The status can be viewed in the Auth/Referral Dashboard.
- Concurrent reviews for PANs are not required.
- Please use Availity to update discharge information when the patient is discharged.

Inpatient Precertification

- Use the “Inpatient” authorization type to enter requests for any admission that requires precertification (e.g. Skilled Nursing Facility, Acute Rehabilitation, Long Term Acute Care, Residential Treatment, any admission for a Federal Employee).
- An attachment with clinical records must be included with the request. **The request will remain in “Incomplete” status and will not be submitted to Blue Cross until an attachment is added.** An attachment can be added immediately after submitting the request or at any time from the Auth/Referral Dashboard.
- The request will be sent directly to the Care Management team for review once the attachment is received and the request status will reflect “Pending Review” in the Auth/Referral Dashboard.

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- A fax will be sent with the determination information when processing of the request is complete. The status can be viewed in the Auth/Referral Dashboard.
- Availity should be used to request a Concurrent Review if the authorization must be extended or to request additional covered days.
- Providers are required to use Availity to update discharge information when the patient is discharged.

Reminders and Tips for All Other Requests

Prior Authorization (PA)

Use the “Outpatient” authorization type in Availity to request a service, procedure or item that requires (PA).

- If a PA request is submitted for a service that does not require PA, an immediate response with the case number and a status of “No Prior Authorization Required” will be sent. The status can be viewed in the Auth/Referral Dashboard.
- An attachment with clinical records must be submitted in Availity for services that require a PA. **The request will remain in “Incomplete” status and will not be submitted to Blue Cross until an attachment is added.** An attachment can be added immediately after submitting the request or at any time from the Auth/Referral Dashboard.
- All PA requests should be submitted through Availity except elderly waiver, non-emergent transportation, personal care attendant, and pre-determination requests. Follow existing processes for these types of requests.
- Organization Determination for non-covered Medicare services for Platinum Blue and Medicare Advantage can be submitted through the Availity portal. A fax will be sent with the determination information when the review is complete. Blue Cross follows the CMS determination timelines.

Requests for Blue Cross Commercial, Medicare and Medicaid members can be submitted through the Availity Authorization portal.

- Federal Employee Program:
 - Precertification and PA requests for FEP members that live in **Minnesota** can be submitted through Availity.
 - Requests for FEP members that live in **other states** cannot be processed in Availity. Please follow the phone or fax process to submit these types of requests to Blue Cross.

Questions?

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