

PROVIDER QUICK POINTS

PROVIDER INFORMATION



January 12, 2022

New Access Point for Prior Authorization Look Up Tool and Blue Cross Website Updates

On January 10, 2022, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) added a new access point for our **Prior Authorization Look Up tool** used to determine if authorization is required, previously available only within our online authorizations tool in our Availity® Essentials provider portal. This tool will now be available online on our [Medical Management](#) page. We've also published updates to this page to add helpful information for providers and members.

Previously organized with accordion-style dividers, this page now organizes information in two tabs: Prior Authorization and Medical Policy. This page also includes links to easily access information about pharmacy prior authorization and policies as well as reimbursement policies.

Prior Authorization Tab

The prior authorization tab now prominently displays tools to determine the prior authorization requirements for different Blue Cross products, including commercial, Medicare Advantage, Medicare Cost, FEP and MHCP products. We've also made it easier to access other Blue Cross Plans' information using the electronic provider access (EPA) router.

Most notably, we've added our **Prior Authorization Look Up Tool** to this page, where providers or members can quickly determine if a service or item requires prior authorization from the health plan before care is provided by entering the member group number, date of service and procedure code. The PA Look Up tool response also includes details related to the medical policy or evidence-based criteria that may apply and any special instructions related to the prior authorization process. The tool will also allow the user to print the results for their records.

Medical Policy Tab

Our medical policy tab contains our Medical Policy search tool, where provider or members can search for and review our medical policies, notification of upcoming policy changes, information on how to access the other evidence-based clinical criteria we use, and other medical policy resources.

Questions?

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

Prior Authorization Tool

Let's check and see if a Prior Authorization is required.

When to use this form:

Use this form to determine if a service or item requires prior authorization from the health plan before you receive care.

I AM A:

Member / Patient Provider

MEMBER GROUP NUMBER

Your member group number is located on your Blue Cross and Blue Shield of Minnesota member ID card. [Click here to see an example.](#)

SERVICE DATE

Enter the date you plan to receive care. If you don't know the date, you can enter today's date.

PROCEDURE CODE

You can type the procedure code your doctor will use to bill for the planned service or item. You can also type part of the code's description to search, for example type "tonsil" to find "Removal of tonsils."

[+](#) Add another Procedure Code

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