



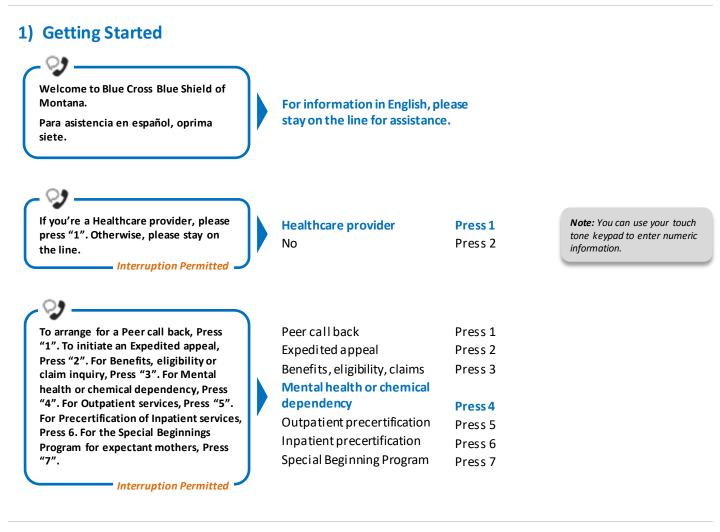
June 2022

Behavioral Health Inpatient Preauthorization IVR Caller Guide

Hours of Availability: Monday – Friday 5:00 a.m. – 10:30 p.m. (MT); Saturday 5:00 a.m. – 5:00 p.m. (MT); Sunday – Closed 1 of 4

Utilize your keypad when possible
Avoid using cell phones
Minimize background noise
Mute your phone when you are not speaking

This caller guide does not apply to Blue Cross Medicare Advantage members.



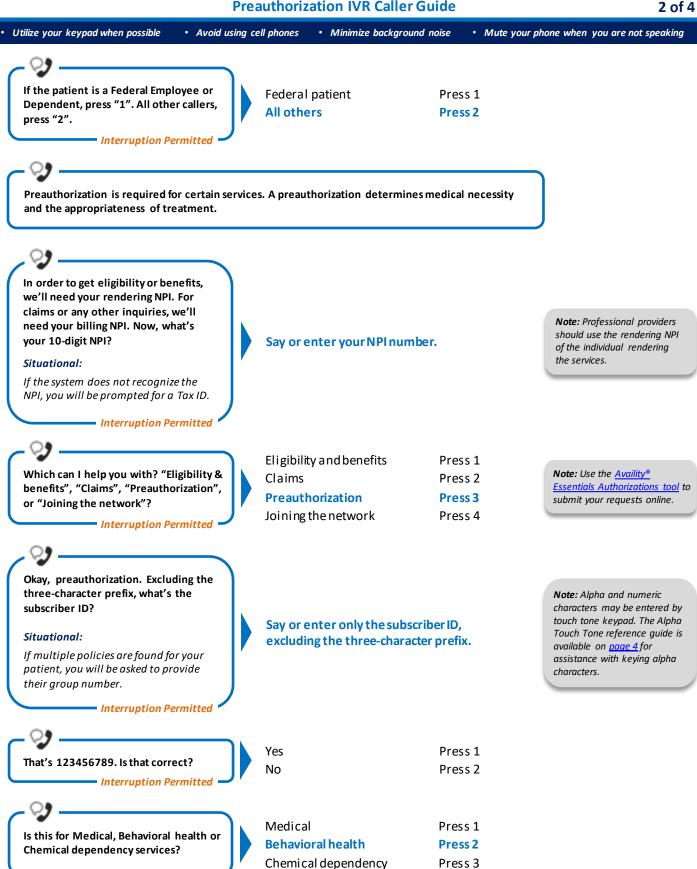
2) Preauthorization

Certification does not guarantee that the care and services the subscriber receives are eligible at the time of admission or procedure. It only assures that the proposed treatment meets the plans' guidelines for medical necessity. If you anticipate that the patient's length of stay will exceed the certified days or need for continued services, please call us back.

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= Interruption Permitted 🚅

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• Utilize your keypad when possible • Avoid using ce	ll phones • Minimize background n	oise • Mute your phone when you are not speaking
Do you need to Request authorization or Check the status?	Request authorization Check status	Press 1 Press 2
Okay. "Inpatient", "Outpatient" or "Home"? Interruption Permitted	Inpatient Outpatient Home	Press 1 Press 2 Press 3
And do you want to create a "New request" or "Extend an existing request"?	New request Extend existing request	Press 1 Press 2
Please hold while I connect you. This call may be recorded.	Remain on the line while you a with a Behavioral Health Custo	

• Utilize your keypad when possible

• Minimize background noise

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Alpha Touch-Tone Reference

Alpha touch-tone is available as an alternative to voicing alpha-numeric mixed information.

To enter a **subscriber ID**, group or claim number containing a lpha character(s):

• Avoid using cell phones

- 1) Press the star key (*) to begin a letter sequence
- 2) Press the number key containing the desired letter (e.g., press 2 for A, B or C)
- 3) Press 1, 2, 3 or 4 to indicate the position the letter is listed on the selected key (e.g., press *21 to enter A)

А	_	*21
B	=	*22
	=	
С	=	*23
D	=	*31
Е	=	*32
F	=	*33
G	=	*41
Н	=	*42
T	=	*43
J	=	*51
К	=	*52
L	=	*53
М	=	*61
Ν	=	*62
0	=	*63
Р	=	*71
Q	=	*72
R	=	*73
S	=	*74
т	=	*81
U	=	*82
V	=	*83
W	=	*91
X	=	*92
Y	=	*93
Z	=	*94

Group Number

Ex. 1	Y	Ν	1	2	3	4
Press	*93	*62	1	2	3	4
Ex. 2	1	2	к	3	4	5
Press	1	2	*52	3	4	5

Subscriber ID

Ex. 1	Α	1	Ν	2	3	4	5	6	7
Press	*21	1	*62	2	3	4	5	6	7
Ex. 2	0	9	2	т	7	6	8		
Press	0	9	2	*81	7	6	8		

Note: Exclude three-character prefix when entering the subscriber ID.

Claim Number

Ex. 1	2	1	3	4	F	5	6	7	0	х
Press	2	1	3	4	*33	5	6	7	0	*92
	_									
Ex. 2	2	0	1	т	8	7	6	5	0	С

Note: The claim number should be 13 digits.

Have questions or need additional education? Email the Provider Education Consultants.

Be sure to include your name, direct contact information and Tax ID or Billing NPI.

Please note that the fact a service has been preauthorized/pre-certified is not a guarantee of payment. Benefits will be determined once a claimis received and will be based upon, among other things, the member's eligibility and the terms of the member's certificate of coverage applicable on the date services were rendered. Obtaining a benefit preauthorization is not a substitute for checking the patient's eligibility and benefits.

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