

# Medicare Advantage Prior Authorization Contact Sheet for Providers



BlueCross BlueShield of Montana

	Outpatient Specialty Prior Authorization	BCBSMT
Prior Authorizations	<p><b>Prior Authorization Requirements – <a href="http://www.eviCore.com/healthplan/bcbsmt_m">www.eviCore.com/healthplan/bcbsmt_m</a> Web Portal – <a href="http://eviCore.com">eviCore.com</a></b></p> <ul style="list-style-type: none"> <li>Request preauthorizations and check case status online 24/7</li> <li>Upload clinical documents and use pause/start feature to complete initiated cases</li> </ul> <p><b>Call Center – 855-252-1117 (toll free)</b></p> <ul style="list-style-type: none"> <li>Business Hours: Monday – Friday 7 a.m. to 7 p.m. Central time</li> <li>Request preauthorizations and check case status</li> <li>Discuss questions re: preauthorizations and case decisions</li> <li>Change facility or CPT Code(s) on an existing case</li> </ul> <p><b>Peer to Peer or Provider to Provider Consultation – 855-252-1117 (toll free)</b></p> <ul style="list-style-type: none"> <li>Urgent requests only</li> <li>Standard requests – <a href="http://eviCore.com">eviCore.com</a></li> </ul>	<p><b>Prior Authorization Requirements – <a href="http://bcbsmt.com/provider/network-participation/blue-cross-medicare-advantage">bcbsmt.com/provider/network-participation/blue-cross-medicare-advantage</a></b></p> <ul style="list-style-type: none"> <li>Review inpatient and outpatient services requiring preauthorization through BCBSMT</li> <li>Obtain Preauthorization Code List and Prior Authorization Form</li> </ul> <p><b>Medicare Advantage – 877-774-8592 (toll free)</b></p> <ul style="list-style-type: none"> <li>Business hours: Monday – Friday 8 a.m. to 8 p.m. Central time</li> <li>Check eligibility and benefits, or check online through Availity® – <a href="http://availity.com">availity.com</a></li> <li>Request preauthorization information</li> <li>Request peer to peer or provider to provider consultation</li> </ul> <p><b>iExchange® – <a href="http://www.bcbsmt.com/provider/education-and-reference/iexchange">www.bcbsmt.com/provider/education-and-reference/iexchange</a></b></p> <ul style="list-style-type: none"> <li>Request preauthorizations online for inpatient and select outpatient services</li> <li>Receive real-time response and electronic record of submitted request</li> </ul>
Appeals	<p><b>Authorization Appeals</b> (Must be submitted by mail, fax or email)</p> <p><b>Mailing Address:</b> eviCore healthcare Attn: Clinical Appeal Dept. 400 Buckwalter Place Blvd. Bluffton, SC 29910</p> <p><b>Fax:</b> 866-699-8128 <b>Email:</b> <a href="mailto:appealsfax@eviCore.com">appealsfax@eviCore.com</a> <b>Phone:</b> 800-792-8744 (toll free), Option #4</p>	<p><b>Pre-Service Appeals</b></p> <p><b>Mailing Address:</b> Blue Cross Medicare Advantage<sup>SM</sup> C/O Appeals and Grievances PO Box 4288 Scranton, PA 18505</p> <p><b>Fax:</b> 855-674-9185 <b>For expedited appeals:</b> <b>Phone:</b> Individual plans, 877-774-8592 (toll free); Employer plans, 877-299-1008 (toll free); TTY, 711</p>
Claims	<p><b>Client and Provider Services Representative – 800-646-0418 (toll free)</b></p> <ul style="list-style-type: none"> <li>Select Option #4 to request an authorization to be resent to the health plan</li> </ul>	<p><b>Claims Filing Information</b></p> <p><b>Mailing Address:</b> Blue Cross Medicare Advantage C/O Claims Department PO Box 3686 Scranton, PA 18505</p> <p><b>Phone:</b> 877-774-8592 (toll free) <b>Fax:</b> 855-674-9192</p> <ul style="list-style-type: none"> <li>Utilize the HCFA form for all claims submissions</li> <li>Complete field number “17” on the CMS claims form</li> <li>Add the authorization number to “Box 23”</li> </ul>
Support Services	<p><b>Web Specialist – 800-646-0418 (toll free)</b></p> <ul style="list-style-type: none"> <li>Select Option #2 for Web Portal registration and questions</li> </ul> <p><b>Client and Provider Services Representative – 800-646-0418 (toll free)</b></p> <p><b>Email:</b> <a href="mailto:clientservices@eviCore.com">clientservices@eviCore.com</a></p> <ul style="list-style-type: none"> <li>Select Option #4 when calling to speak to a representative</li> <li>Report eligibility issues and issues experienced during authorization case creation</li> <li>Request for education/training on program processes</li> </ul> <p><b>Reference Information – <a href="https://providerportal.bcbsmt.com/Account/Login.aspx">https://providerportal.bcbsmt.com/Account/Login.aspx</a></b></p> <ul style="list-style-type: none"> <li>Medicare Advantage Provider Manual</li> </ul>	<p><b>Network Management:</b></p> <p><b>Contact Us: <a href="http://www.bcbsmt.com/provider/network-participation/contact-us">www.bcbsmt.com/provider/network-participation/contact-us</a></b></p> <ul style="list-style-type: none"> <li>Access Medicare Advantage forms, tips and tools</li> <li>Sign up for Availity and iExchange webinar training at <a href="http://bcbsmt.com/provider/education-and-reference/training">bcbsmt.com/provider/education-and-reference/training</a></li> </ul> <p><b>Provider eNews – <a href="http://sgiz.mobi/s3/Website-Provider-Subscribe-for-Updates">sgiz.mobi/s3/Website-Provider-Subscribe-for-Updates</a></b></p> <ul style="list-style-type: none"> <li>Sign up to receive monthly newsletter by email</li> </ul>

This guide is intended to be used for quick reference and may not contain all the necessary information. For detailed information, refer to the Provider Manual online at [bcbsok.com/provider](http://bcbsok.com/provider).  
 eviCore healthcare (eviCore) is an independent specialty medical benefits management company that provides utilization management services for Blue Cross and Blue Shield of Oklahoma.  
 Availity is a trademark of Availity, L.L.C., a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSOK.  
 iExchange is a trademark of Medecision, Inc., a separate company that offers collaborative health care management solutions for payers and providers. BCBSOK makes no endorsement, representations or warranties regarding any products or services offered by Availity or Medecision.



## Prior Authorization Checklist

### Please have the following when requesting preauthorization:

#### Patient/Member

- First, middle and last name
- Date of birth
- Gender
- Address
- Home and cellphone numbers
- Health plan, member and group ID numbers

#### Ordering Provider and Facility/Site

- Name
- Primary specialty
- Tax identification number (TIN)
- National provider identifier (NPI)
- Phone and fax numbers
- Office contact and email address

#### Procedure

- Valid CPT codes

#### Diagnosis

- Diagnosis, if known or rule out
- Valid ICD-10 codes
- Date of last visit

#### Clinical Information

- Primary reason for the service request
- Date of the first office visit with any physician for the current condition
- Date of the most recent office visit for the current condition
- Current symptoms
- Length of physician-directed treatment or observation for the current condition
- How symptoms have changed with physician-directed treatment or observation since onset of the current condition
- What conditions have been found by a medical professional on a physical exam performed for the current condition
- Any other conditions present in the medical history

#### Submitter

- Ordering physician, facility or other

### Prior Authorization Forms

For specialized outpatient services, check eviCore Clinical Worksheets for more details about specific service areas and clinical solutions: [www.eviCore.com/provider/online-forms](http://www.eviCore.com/provider/online-forms)  
BCBSMT Medicare Advantage form: [www.bcbsmt.com/static/mt/provider/pdf/predetermination-medicare-advantage-provider-interactive-form-mt.pdf](http://www.bcbsmt.com/static/mt/provider/pdf/predetermination-medicare-advantage-provider-interactive-form-mt.pdf)

### Expedited Review

Call 877-774-8592 for urgent service after hours, weekends and holidays.

### Avoid Administrative Claim Denials

Call 877-774-8592 or fax 855-874-4711 to obtain:

- Referrals for out-of-plan or out-of-network providers before a patient receives care
- Inpatient notification for post-stabilization care after an ER admission (report within one business day)

### Check Claim Status Online

At [availability.com](http://availability.com), the Availability Claim Research Tool provides the equivalent of an Explanation of Benefits (EOB), including line-item breakdowns.