

Inpatient Request

Preauthorization IVR Caller Guide

Hours of Availability: Monday - Friday 6:00 a.m. - 11:30 p.m. (CT); Saturday 6:00 a.m. - 6:00 p.m. (CT); Sunday - Closed

1 of 6

Utilize your keypad when possible

Avoid using cell phones

• Minimize background noise

· Mute your phone when you are not speaking

This caller quide does not apply to Blue Cross Community Health PlansSM, Blue Cross Community MMAI (Medicare-Medicaid Plan)SM, Blue Cross Medicare Advantage (HMO)SM and Blue Cross Medicare Advantage (PPO)SM.

1) Getting Started



Welcome to the Blue Cross and Blue **Shield of Illinois Medical Management** Department. If you're a health care provider, say "Provider." If you're a member, say "Member."

Interruption Permitted

Providers Member

Press 1 Press 2

tone keypad to enter numeric information.

Note: You can use your touch

2) Preauthorization



For benefits, say "Benefits." For outpatient services or high-tech imaging, say "Outpatient." For precertification of inpatient admissions or home health services, say "Precertification." For the Special Beginnings program for expectant mothers, say "Maternity."

Interruption Permitted

Benefits Press 1 Press 2

Outpatient services or high-tech

imaging

Pre-certification of inpatient Press 3

admissions or home health

services

Other Services Press 4



For mental health or chemical dependency, say "mental health." For all other inquiries, say "other."

Interruption Permitted

Mental health or chemical Press 1 dependency

Other Press 2



Certification does not guarantee that the care and services the subscriber receives are eligible at time of admission or procedure. It only assures the proposed treatment meets the plan 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. Is the patient a federal employee or dependent?

Interruption Permitted

Federal employee or dependent

Non-federal employee or dependent

Press 1 Press 2 Utilize your keypad when possible

· Avoid using cell phones

· Minimize background noise

Mute your phone when you are not speaking

1

2

3

4



If the member has Blue Cross and Blue Shield of Illinois coverage press 1. If Blue Cross and Blue Shield of Oklahoma coverage press 2. If Blue **Cross and Blue Shield of Texas** coverage, press 3. If Blue Cross and Blued Shield of New Mexico coverage,

Interruption Permitted

BCBSIL	Press
BCBSOK	Press
BCBSTX	Press
BCBSNM	Press
	BCBSOK BCBSTX



In order to get eligibility and benefits we'll need your rendering NPI or HMO site number. For claims or any other inquiries, we'll need your billing NPI or HMO site number. Now what is your 10-digit NPI or HMO site number?

Situational:

If the system does not recognize the NPI, you will be prompted for a Tax ID.

Interruption Permitted



Say or enter your NPI or 3-digit HMO site number.



Which can I help you with eligibility and benefits, claims, preauthorization or other services?

Interruption Permitted

Eligibility and benefits Press 1 Press 2 Claims Preauthorization Press 3

Other Services Press 4



Okay, preauthorization. Excluding the three-character prefix, what's the subscriber ID?

Situational:

If multiple policies are found for your patient, you will be asked to provide their group number.

Interruption Permitted



Say or enter only the subscriber ID, excluding the three-character prefix. **Note:** Alpha and numeric characters may be entered by touch tone keypad. The Alpha Touch Tone reference guide is available on page six for assistance with keying alpha characters.



Is this for medical, behavioral health or chemical dependency service?

Interruption Permitted



Press 1 Behavioral Health Press 2 **Chemical Dependency** Press 3 · Minimize background noise

· Mute your phone when you are not speaking



Do you need to request authorization or check the status?

Interruption Permitted

Request authorization	Press 1
Check status	Press 2



Okay, inpatient, outpatient, home or referral?

Interruption Permitted

Inpatient	Press 1
Outpatient	Press 2
Home	Press 3
Referral	Press 4



And do you want to create a new request or extend an existing request?

Interruption Permitted

New request	Press 1
_	

Extend existing request Press 2

Note: Use the <u>Availity®</u>
<u>Authorizations tool</u> Loto
extend requests online or
provide the request ID and
connect with next available
agent.

If faxing supporting medical documentation for a previously submitted request, please include the request number.



Please tell me, what's the patient's date of birth?

Interruption Permitted

The date of birth format is mm/dd/yyyy.



You can press pound to skip these instructions. To process this request, I'll need some information including the NPIs for the attending provider as well as for the facility. I'll also need the diagnosis code and any applicable procedure codes. If you're ready to continue, say "I'm ready." You can also say "I need more time" or to hear this again, say "repeat that."

Interruption Permitted

Voice option must be used here.

Touch tone is not an available option.

Note: Press the pound key (#) to skip these instructions.



Next, say or enter the NPI of the rendering provider during this stay or say, "it's the same as my NPI."

Situational:

If the system does not recognize the NPI, you will be prompted to provide additional identifiers (i.e., address, zip code, etc.).

Interruption Permitted



· Avoid using cell phones

· Minimize background noise

· Mute your phone when you are not speaking



Okay, please say or enter the NPI for the inpatient facility?

Interruption Permitted

Rehab

Rehab

Long-Term Care

Say or enter the facility NPI number.



What's the treatment setting?

Interruption Permitted

Hospital	Press 1
Rehab	Press 2
Intermediate Care	Press 3
Skilled Nursing Facility	Press 4



Treatment Type Options

What's the treatment type?

Situational: Options are based on the treatment setting and place of treatment previously entered.

Hospital

- Medical Care
- Long Term Care
- Hospice
- Neonatal
- Surgical
- Maternity Transplants

Skilled Nursing Facility

- Medical Care
- Rehab

Note: Medical applies to anything that does not fall in the preceding inpatient categories.



And is this an elective or emergency admission?

Interruption Permitted

Elective Press 1 Emergency service Press 2



Tell me the admission date for this inpatient request. For example, "December tenth, twenty eighteen." You can also say "today."

Interruption Permitted

The admission date format is mm/dd/yyyy.



How many days are you requesting?

Say or enter the number of days. Interruption Permitted

Okay, say or enter a CPT or HCPCS procedure code. If there any letters please say it like this "letter A 2 3 4 5.

Interruption Permitted

Say or enter the procedure code.

Note: Procedure codes are required based on the treatment setting and treatment type previously entered.

· Avoid using cell phones

· Minimize background noise

· Mute your phone when you are not speaking



Okay, say or enter the next CPT or HCPCS procedure code or say that's it.

Interruption Permitted

Say or enter the next procedure code or say, "that's it."



Since this inpatient stay ends on or after October 1, 2015, this request needs to be processed using an ICD-10 diagnosis code. Please tell me the ICD-10 diagnosis code or say one moment if you need time to find it.

Interruption Permitted

Say or enter the ICD-10 diagnosis code.

Note: Diagnosis codes can be up to six digits maximum. When entering a diagnosis code using your touch tone keypad, press the star key (*) to enter the decimal point. If utilizing the voice option, say "dot."



Okay, to review the information, say "review." Or to submit this request without verifying, say "submit." You can also say "cancel request."

Interruption Permitted

Review information Submit

Cancel request Press 3

Press 1

Press 2

Note: Upload and attached medical documentation online via Availity's Authorizations tool. For more information, view the Authorizations User Guide 🔼.



Sure. To confirm, this request is for... see example

Is this all, correct? Say "yes", "no" or "repeat that."

Interruption Permitted

Yes	Press 1

Press 2 No Repeat that Press 3

Example: "John Smith. The facility is Smith Hospital. The attending provider is Jane Doe. For diagnosis code 123.45. The treatment type is Therapy. The treatment setting is inpatient, and this is an elective treatment. The service code is 99999. For CPT 99999, 2 days are requested starting Oct. 1st, 2019."



Okay, to Submit this request, say "submit." If you need to cancel this request, press 1.

Interruption Permitted

Say Submit or press 1 to cancel request.

· Avoid using cell phones

- Minimize background noise
- · Mute your phone when you are not speaking

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 alpha character(s):

- 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)

A B	= =	*21 *22
С	=	*23
D	=	*31
Ε	=	*32
F	=	*33
G	=	*41
Н	=	*42
I	=	*43
J	=	*51
K	=	*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
Χ	=	*92
Υ	=	*93
Z	=	*94

Group Number

Ex. 1	Υ	N	1	2	3	4
Press	*93	*62	1	2	3	4
Ex. 2	1	2	K	3	4	5
Press	1	2	*52	3	4	5

Subscriber ID

Ex. 1	Α	1	N	2	3	4	5	6	7
Press	*21	1	*62	2	3	4	5	6	7
Ex. 2	0	9	2	T	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	X
Press	2	1	3	4	*33	5	6	7	0	*92
Ex. 2	2	0	1	Т	8	7	6	5	0	С
Press	2	0	1	*81	8	7	6	5	0	*23

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 claim is 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.

Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSIL. BCBSIL makes no endorsement, representations or warranties regarding any products or services provided by third party vendors such as Availity. If you have any questions about the products or services provided by such vendors, you should contact the vendor(s) directly.