



PROVIDER BULLETIN PROVIDER INFORMATION

October 1, 2018

Blue Cross Contracts with eviCore to Expand Utilization Management for Post-Acute Care

Note: The effective date of November 1, 2018, that was previously published in Provider Bulletin P39-18 is being delayed until 2019. The PA requirement for Medicare Advantage will now go into effect on January 1, 2019. A new timeline for implementation across other lines of business (Commercial Fully Insured and individual) will be announced at a later date.

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) has contracted with eviCore Healthcare (eviCore), an independent specialty medical benefits management company, to manage benefit preauthorization requests for Post-Acute Care (PAC) services for subscribers enrolled in the following programs:

- Individual
- Commercial Fully Insured Small & Large Groups
- Medicare Advantage

eviCore's PAC program is designed to align the member's discharge planning decisions with the facility's clinical team which ensures our member safety and reduces avoidable readmissions.

eviCore will accept initial and extended stay (concurrent) prior-approval requests for the following provider types:

- Skilled Nursing Facilities (SNF)
- Home Health Care (HHC)
- Long-Term Acute Care Facilities (LTAC)
- Inpatient Rehabilitation Facilities (IRF)

Key eviCore program points:

- For members in a facility, the Hospitals will be responsible for submitting the initial inpatient PAC prior-approval requests for SNF, IRF and LTAC (PAC Facilities).
- PAC Facilities will submit concurrent review requests for all PAC admissions and prior approval requests for community referrals.
- HHC agencies will submit prior-approval requests for direct hospital discharges and community referrals.
- Discharging PAC Facilities or the admitting HHC Agency may submit Home Health prior-approval requests.

eviCore will accept benefit preauthorization requests from providers in any of the following ways:

- http://www.availity.com will be the quickest way to create prior authorizations and check existing case status
- Fax – PAC authorizations 888-738-3916, Home Health authorizations: 877-791-4097; DME authorizations 866-663-7740.
- Telephone – Clinical information can be called in to eviCore at 1-844-224-0494 option 5 for PAC, HH or Transitional Care, option 4 for DME, follow appropriate prompts based on inquiry.

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Patient Registration
Authorizations and Referrals
Authorizations

Continued

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Distribution: Available on website: <https://www.bluecrossmn.com/healthy/public/personal/home/providers/forms-and-publications>

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* Providers may submit a prior authorization up to 14 calendar days post service.