Inpatient Request
Preauthorization IVR Caller Guide

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

- *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 (HMO)SM, Blue Cross Medicare Advantage (PPO)SM, or Texas STAR, STAR Kids and CHIP.

1) Getting Started

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

Interruption Permitted

Providers	**Press 1**
Member	Press 2

Note: *You can use your touch tone keypad to enter numeric characters.*

2) Preauthorization

For medical surgical outpatient services, say "outpatient." For medical surgical preauthorizations of inpatient, home health or referrals, say "preauthorization." For mental health or chemical dependency, say "behavioral health."

Interruption Permitted

Outpatient	Press 1
Inpatient or home health preauthorization or referral	**Press 2**
Behavioral health	Press 3

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	Press 1
Non-federal employee or dependent	**Press 2**

Preauthorization is required for certain services. A preauthorization determines medical necessity and the appropriateness of treatment. A predetermination may be used to obtain a benefit assessment but is not required. Predeterminations must be submitted in writing. A submission form is located on our website.

Interruption Permitted

To continue your preauthorization request, please continue to hold.

Note: *To submit your request online refer to the Electronic Predetermination of Benefits User Guide.*

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

Okay, what's your 10-digit billing National Provider ID?

Situational:

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

Interruption Permitted

Say or enter your NPI number.

Note: *Professional providers should use the rendering NPI of the individual who is providing services.*

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 6 for assistance keying alpha characters.*

Do you need to request authorization or check the status?

Interruption Permitted

Request authorization	**Press 1**
Check status	Press 2

Okay. Inpatient, home or referral?

Interruption Permitted

Inpatient	**Press 1**
Home	Press 2
Referral	Press 3

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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 Availity® Authorizations tool to extend requests online or provide the request ID and connect with next available agent.*

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 attending 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

Touch tone and voice are both available options.

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

Interruption Permitted

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	***Rehab***	***Skilled Nursing Facility***
• *Medical Care*	• *Long-Term Care*	• *Medical Care*
• *Long Term Care*	• *Rehab*	• *Rehab*
• *Hospice*		
• *Neonatal*		
• *Surgical*		
• *Maternity*		
• *Transplants*		

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

And is this an elective or emergency service?

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?

Interruption Permitted

Say or enter the number of days.

Now, 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.*

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."

- *Utilize your keypad when possible*
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Since this inpatient stay ends on or after October 1st, 2015, this request needs to be processed using an ICD10 diagnosis code. Please tell me the ICD10 diagnosis code or say "one moment" if you need 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	**Press 1**
Submit	Press 2
Cancel request	Press 3

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

Okay, sure. To confirm, this request is for… *see example*

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

Interruption Permitted

Yes	**Press 1**
No	Press 2
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 2.

Interruption Permitted

Submit	**Press 1**
Cancel	Press 2

• *Utilize your keypad when possible* • *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	=	*21
B	=	*22
C	=	*23
D	=	*31
E	=	*32
F	=	*33
G	=	*41
H	=	*42
I	=	*43
J	=	*51
K	=	*52
L	=	*53
M	=	*61
N	=	*62
O	=	*63
P	=	*71
Q	=	*72
R	=	*73
S	=	*74
T	=	*81
U	=	*82
V	=	*83
W	=	*91
X	=	*92
Y	=	*93
Z	=	*94

Group Number

Ex. 1	**Y**	**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	**A**	**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**	**T**	**8**	**7**	**6**	**5**	**0**	**C**
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.