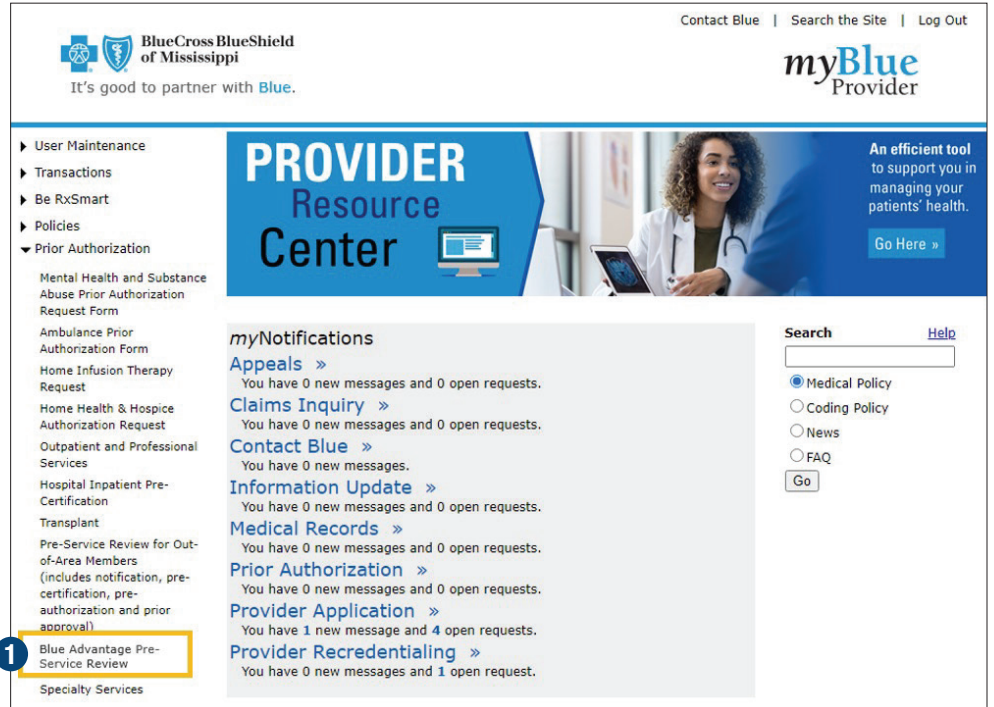


Use the following steps to complete the pre-service review process, which includes precertification, prior authorization and predetermination for certain medical services for your Blue Advantage® patients. You can also use this process to request a continued stay review.

1 Start the Pre-Service Review process on **myBlue Provider**, Blue Cross & Blue Shield of Mississippi's provider website. Under **Prior Authorization** in the left menu, select **Blue Advantage Pre-Service Review**. You will be directed to the Blue Advantage Pre-Service Review portal for Patrius Health.

Note: Make sure to deactivate any pop-up blockers on your web browser.

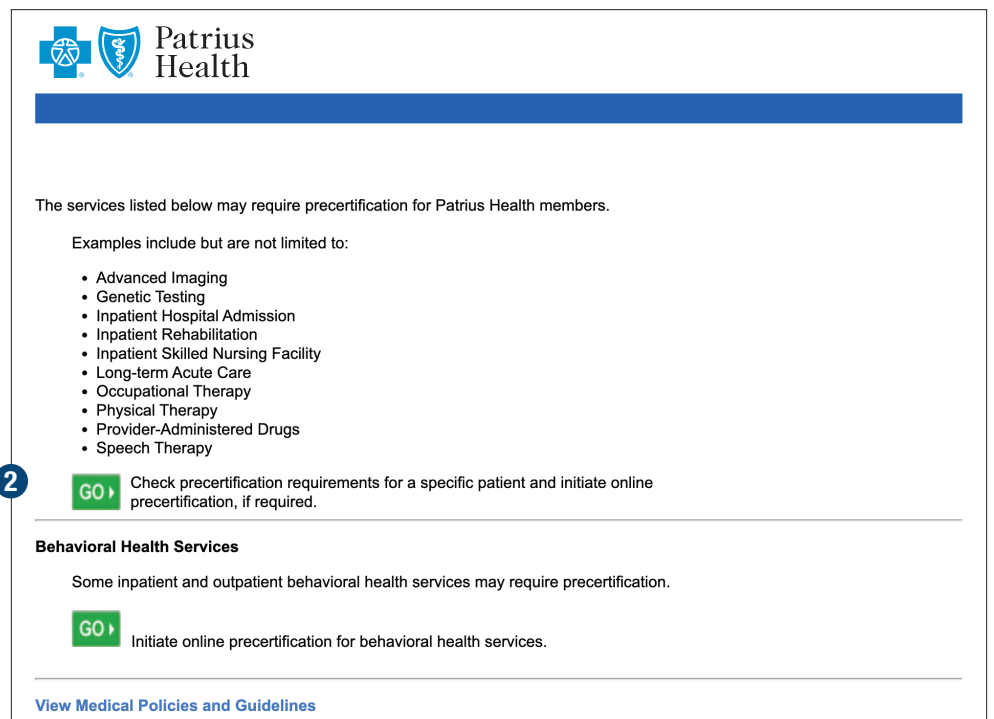


The screenshot shows the myBlue Provider website interface. At the top, there are links for 'Contact Blue', 'Search the Site', and 'Log Out'. The main header includes the BlueCross BlueShield of Mississippi logo and the 'myBlue Provider' branding. A large blue banner reads 'PROVIDER Resource Center' with a 'Go Here' button. On the left, a navigation menu lists various services, with 'Blue Advantage Pre-Service Review' highlighted in a red box and a '1' in a red circle next to it. The main content area displays 'myNotifications' for various services like Appeals, Claims Inquiry, Contact Blue, Information Update, Medical Records, Prior Authorization, Provider Application, and Provider Recredentialing, each with a message count and an arrow to view details. A search bar is located on the right side.

2 On the Pre-Service Review landing page, initiate the precertification process by selecting the bottom **GO** button for behavioral health services and the top button for all other services.

Note: Reviews of behavioral health services involve a separate process with Lucet, a partner of Patrius Health. Under the Behavioral Health Services heading, initiate the review process by using the **GO** button. This process is available only to institutional providers.

If you have questions after initiating the behavioral review process, contact Lucet at 1-855-339-9812.



The screenshot shows the Patrius Health Pre-Service Review landing page. At the top, there is the Patrius Health logo. Below it, a blue bar contains the text: 'The services listed below may require precertification for Patrius Health members.' This is followed by a section titled 'Examples include but are not limited to:' with a bulleted list of services: Advanced Imaging, Genetic Testing, Inpatient Hospital Admission, Inpatient Rehabilitation, Inpatient Skilled Nursing Facility, Long-term Acute Care, Occupational Therapy, Physical Therapy, Provider-Administered Drugs, and Speech Therapy. Below the list, there are two 'GO' buttons. The first 'GO' button is highlighted with a red circle and a '2' in a red circle, and is accompanied by the text: 'Check precertification requirements for a specific patient and initiate online precertification, if required.' The second 'GO' button is also highlighted with a red circle and a '2' in a red circle, and is accompanied by the text: 'Initiate online precertification for behavioral health services.' At the bottom, there is a link: 'View Medical Policies and Guidelines'.

3 Enter your provider tax ID in the pop-up box that appears and click **Submit**.

The services listed below may require pre-service review. Examples include but are not limited to:

- Advanced Imaging
- Genetic Testing
- Inpatient Hospital Admission
- Inpatient Rehabilitation
- Inpatient Skilled Nursing Facility
- Long-term Acute Care
- Occupational Therapy
- Physical Therapy

4 Next, enter your patient's information and click **Submit**.

Note: Include the prefix with the contract number (subscriber ID).

Enter the member information below to initiate pre-service review. Required fields are indicated with an asterisk (*).

Contract Number:* ABC123456789
 First Name:* Jane
 Middle Initial:
 Last Name:* Doe
 Date of Birth:* 01/31/1958 (MMDDYYYY)
 Gender: Female

5 Enter a procedure code, description or type of service in the search box to see if pre-service review is required.

Also on this page is a list of previously submitted requests for this specific patient. Return to this page to find submitted requests and status updates, including the related correspondence.

Note: Advanced imaging and genetic testing reviews are conducted by Carelon Medical Benefits Management, a partner of Patrius Health. Part B provider-administered drug reviews are conducted by Magellan Rx Management, a partner of Patrius Health. For additional information about Carelon and Magellan Rx reviews, see the [Pre-Service Review webpage](#). Scan the QR code to access this webpage.



If you have questions after initiating the Carelon review process, contact Carelon at 1-866-803-8002.

6 Searching for a procedure or service will generate several results that you can review to find a specific code.

Pre-Service Review Status

To initiate a new pre-service review or request a continued stay review, enter a procedure code, description or type of service below.

Pre-certification or pre-service review is not a guarantee of payment. Benefits are dependent upon plan coverage, including any pre-existing condition or other exclusions and limitations set forth in member's plan. Benefits are not available if there is a loss of coverage (including a retroactive contract termination). Payment of benefits is also subject to the terms and limitations of the contract at the time services are rendered, including in-network and out-of-network provisions.

Number	Status	Review Type	Service Type	Procedure Code	Place of Service	Dates of Service	Provider Name	Provider NPI
24680135	Certified	Health Services	Surgical	A4234	Outpatient	01/03/2023-01/03/2023	John Blue, MD	123456789
98765432	Pending	Health Services	Physical Therapy		Outpatient	01/03/2023-01/03/2023	John Blue, MD	123456789

Click the appropriate link below to check precertification status for the following services:

- Advanced Imaging
- Genetic Testing

Pre-Service Review

To initiate a new pre-service review or request a continued stay review, enter a procedure code, description or type of service below.

Bypass

- 33509 - Harvest of upper extremity artery, 1 segment, for coronary artery bypass procedure, endoscopic
- 33510 - Heart artery bypass, single
- 33511 - Heart artery bypass, 2 grafts
- 33512 - Heart artery bypass, 3 grafts
- 33513 - Heart artery bypass, 4 grafts

7 Select the specific procedure code or service and click **Search** to advance to the next screen.

8 This screen will indicate whether precertification is required for the selected procedure code or service. Select either inpatient or outpatient, if applicable, for the place of service. Next, select the urgency level (standard or expedited) and upload supporting clinical documents (TIFF and PDF formats are accepted). Click **Submit** to advance.

9 The confirmation screen shows that we have received your review request. Next, click **View Precert Status** to view requests that have been submitted for this patient.

10 You can see the status of submitted requests on this page. Return to this screen to check the review status and locate correspondence related to this request after a status decision is finalized.

Note: Repeat steps 1 to 5 to return to the screen that shows previously submitted requests for this patient.

7 Pre-Service Review

To initiate a new pre-service review or request a continued stay review, enter a procedure code, description or type of service below.

33510 - Heart artery bypass, single

Search

Pre-certification or pre-service review is not a guarantee of payment. Benefits are dependent upon plan coverage, including any pre-existing condition or other exclusions and limitations set forth in member's plan. Benefits are not available if there is a loss of coverage (including a retroactive contract termination). Payment of benefits is also subject to the terms and limitations of the contract at the time services are rendered, including in-network and out-of-network provisions.

8 Pre-Service Review

Start new search

Procedure Code: 33206

Procedure Description: Insertion of New Or Replacement of Permanent Pacemaker With Transvenous Electrode(s); Atrial

Pre-certification is not required for this service. A predetermination medical necessity review is available.

Place of Service

Inpatient

Outpatient

Request Urgency

Standard

Expedited

Upload Clinical Documentation

File must be PDF or .tif format.

Attach supporting clinical documentation for the medical necessity review. Failure to send complete clinical information will result in requests for additional information and review delays.

Upload a File* Choose File No file chosen

Submit

9 We successfully received your Precert request. Reference number 12345678

View Precert Status

10 Pre-Service Review Status


Number	Status	Review Type	Service Type	Procedure Code	Place of Service	Dates of Service	Provider Name	Provider NPI	Services Approved	Decision Date
12345678	Pending	Admission	Surgical		Inpatient	01/18/2023-01/18/2023	ABC PROVIDER	123456789	0 Unit(s)	01/18/2023

11 When the status is either “Certified” or “Denied,” you can click the request number to view the approval or denial letter. If your request is denied, next steps, including the appeals process, are outlined in the letter.

Note: The submitting provider or rendering provider can view information about a specific request, including the status and correspondence, by entering the patient information as indicated in step 4.

											
Pre-Service Review Status											
Number	Status	Review Type	Service Type	Procedure Code	Place of Service	Dates of Service	Provider Name	Provider NPI	Services Approved	Decision Date	
12345678	Certified	Admission	Surgical		Inpatient	01/18/2023-01/18/2023	ABC PROVIDER	123456789	0 Unit(s)	01/18/2023	

11



January 01, 2025

Jane Doe
123 Main Street
Ocean Springs, MS 39564

Name of Patient: Jane Doe
Date of Birth: 01/31/1958
Contract Number: ABC123456789
Tracking Number:
Initial Date of Service: 01/02/2025
Total Number of Days Certified for this Admission: 7

Dear Jane Doe:

We received your request on 01/01/2025, for authorization of Pacemaker services. Based on the information received, we are able to authorize the requested services. This authorization is for dates of service 01/02/2025 through 01/08/2025. To continue service, please submit additional information beginning 01/09/2025. This information has been provided to Dr. John Blue.

This authorization is not a guarantee of payment. Benefits are dependent upon plan coverage, including any pre-existing condition exclusions or other exclusions and limitations set forth in plan. Benefits are not available if there is a loss of coverage (including a retroactive contract termination. Payment of benefits is also subject to the terms and limitations of the contract at the time services are rendered. This includes in-network and out-of-network provisions.

Thank you for allowing us to serve you.

Sincerely,

Health Management

cc: Dr. John Blue
BCBSJVAUM25

Birmingham Service Center P.O. Box 12364 Birmingham, AL 35202-2364

Contact us for assistance.

For website support related to a review:
Blue Cross & Blue Shield
of Mississippi EDI at
1-800-826-4068

For other questions related to a review:
Patrius Health provider services at
1-888-949-2352



Blue Advantage® PPO is provided by Patrius Health, an independent licensee of the Blue Cross and Blue Shield Association.
Blue Cross & Blue Shield of Mississippi, A Mutual Insurance Company, is an independent licensee of the Blue Cross and Blue Shield Association.
Carelton Medical Benefits Management, an independent company, is contracted to provide precertification services for Patrius Health.
Lucet is an independent company providing behavioral health services to Patrius Health members.
Magellan Rx ManagementSM is an independent company providing medical review services on behalf of Patrius Health.

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