Minnesota Health Care Programs and SecureBlue Authorization Requirement Updates
Effective December 1, 2018

As previously communicated, Blue Cross and Blue Shield of Minnesota (Blue Cross) has contracted with Amerigroup to administer claims for Minnesota Health Care Program Subscribers effective December 1, 2018. Because there may be a delay in obtaining access to all necessary tools via Availity for administering the authorization process, Amerigroup will not deny payment for services where no authorization was obtained for newly required prior authorization/precertification beginning December 1, 2018. The provider must make a good faith effort to complete a required authorization prior to January 1, 2019. Amerigroup and Blue Cross are aware of the timing restrictions in accessing the new Medicaid Availity Portal and Authorization Tool (Interactive Care Reviewer-ICR) which is being made available for the initial dates of service.

Effective November 5, 2018, providers will be able to utilize the Precertification Lookup Tool (PLUTO) outside of the Availity portal. This will allow providers to review upcoming prior authorization requirements for outpatient services at a code level and determine potential changes needed within current operations/processes.

The tool will be available via the Amerigroup website at https://providers.amerigroup.com/Pages/PLUTO.aspx Select Minnesota for the market drop-down option as of November 5, 2018.

PLUTO will be directly accessible through the new Payer space within Availity as of December 1, 2018 and will continue to be the source Providers should utilize when reviewing prior authorization requirements.

Effective December 1, 2018 Inpatient Admissions
As previously communicated in Provider Bulletin P48-18, published on October 1, 2018, all elective and emergent medical inpatient admissions, for subscribers enrolled in Blue Advantage Families and Children (F&C), Blue Advantage Minnesota Senior Care Plus (MSC+) and Blue Plus MinnesotaCare will require initial precertification and concurrent authorization beginning December 1, 2018.

The following admissions require notification only:
- Inpatient Admissions for SecureBlue℠ Subscribers
- Behavioral Health Inpatient Admissions

Inpatient notifications should be submitted in one of the following ways:
- Phone: 1-866-518-8448
- Fax: F&C, MSC+ and MinnesotaCare 1-844-480-6839 Fax: SecureBlue: 1-866-959-1537
- Web: To access Interactive Care Reviewer (ICR) on Availity for the first time, contact your Availity Administrator and request to be assigned the Authorization and Referral Request role to create and submit a PA. Once you have the role assignment you can immediately access ICR by taking the following steps:
- From the Availity home page (www.availity.com), select **Patient Registration** from the top navigation.
- Select **Authorizations & Referrals**, then select **Authorizations**.
- Select the **Payer** (BCBSMN Blue Plus Medicaid) and **Organization** and submit.

The ICR application will open. Use ICR to submit and manage your medical PAs.

Reminder: As Amerigroup begins to adjudicate Medicaid and SecureBlue subscriber claims, providers may begin to see differences between the coding edits in the current operating system and the Amerigroup operating system. During the implementation of the new alliance, Blue Cross is taking the opportunity to better align our coding edits with current Blue Cross coding policies, state and federal coding standards, national industry practices and instructions in the medical code sets.