

Healthy **Blue**

September 2021

Guidance for Authorization Requests Beyond Member Eligibility Date

Overview

This document will guide authorized users on the process of submitting a prior authorization (PA) request when the request extends beyond a Healthy Blue member's eligibility coverage period.

Note: This step-by-step guidance is for users who already have access to complete PAs within the Availity Portal.

Currently, authorized users receive a message indicating Member is not eligible for dates of service requested when submitting PA requests for occupational therapy/physical therapy/speech therapy (OT/PT/ST) because the requested dates exceed the member's eligibility coverage period.

Create new request — Outside of eligibility coverage dates

Authorized users who are creating a new request may experience a challenge when entering a request that is outside of the member's eligibility coverage period.

Note: Please refer to the Healthy Blue Authorizations on the Interactive Care Reviewer (ICR) Handout for more information on how to create a new request.



If the request is outside the member's eligibility coverage period, the authorized user will receive a message stating Member is not eligible for dates of service requested, and Inactive Coverage will display in the Eligibility Coverage field. The authorized user can clear these messages and continue the process by taking a few specific steps.

Note: Availity, LLC is an independent company providing administrative support services for Healthy Blue providers on behalf of Blue Cross and Blue Shield of North Carolina.

https://provider.healthybluenc.com

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Create new request — Correct the request date

Once the **Service Date From** and **Service Date To** are entered, the ICR system will display the coverage information on the *Patient Details* screen.

- If the Service Date From and Service Date To date(s) is within the Coverage Period date range, the request will not present the eligibility coverage message of Inactive Coverage.
- If the *Service Date From* and *Service Date To* date(s) is outside the Coverage Period date range, the request will present the eligibility coverage message of *Inactive Coverage*.

Patient Name	Subscriber ID		Status Patient Inactive		Created by	Request Track	Request Tracking ID	
1 Patient Details	2 Service Details	3 Provider Details	4 Request Summary	5 Clinical Details	Case Overview			
Member is not eligible for dates of service requested.								
							日本日	
Patient Details	5	C	overage		Case Details	5		
Subscriber ID		Eli	igibility Coverage	Inactive Coverage	Request Type	Outpatient		
Name	Transmission in pro-	Co	overage Period	07/01/2021 - 08/31/20	021 Case Type	Medical		
Date of Birth	-	Gr	roup Number	NCMCD000	Interchange Control No.			
Gender	Male	Gr	roup Name	North Carolina Medic	aid Affordable Care Act	No		
Relationship	Self	Lir	ne of Business		Service Date From	08/20/2021		
		St	ate Sold		Service Date To	01/01/2022		
							BACK	

To correct the message, the authorized user would need to do the following:

Step	Action
1	Select the Back button.
2	Correct the <i>Service Date From</i> and <i>Service Date To</i> . Note : These dates should reflect the date range of the member's coverage period.
3	Add the desired dates to the <i>Clinical Notes</i> . Note : If the authorized user is not able to add the desired dates to the clinical notes, enter the desired dates in the <i>Comment</i> section.
4	Attach the <i>Clinical Notes</i> in the <i>Attachments</i> , <i>Images</i> and <i>Photos</i> section of the <i>Clinical Details</i> screen.

If you do not have access to Availity or you are having trouble with the Availity Portal, you can fax your request to **855-817-5788**. If you are having issues with Availity, please contact Availity Client Services at **800-282-4548**.