



## Government Programs Reference Guide Medicaid and MMAI

Department	Phone Number		Fax Number
<b>Provider Network Services &amp; Customer Service:</b> Check eligibility and benefits, including Language Interpretive Services  Inquiries related to Blue Cross Community Health Plans <sup>SM</sup> (BCCHP <sup>SM</sup> ), Blue Cross Community MMAI (Medicare-Medicaid Plan) <sup>SM</sup> , current BCBSIL Initiatives, Provider Compliance & Provider Training	BCCHP	877-860-2837 TTY: 711	855-297-7280
	MMAI	877-723-7702 TTY: 711	855-674-9193
<b>Medical Management</b> including Prior Authorization, Inpatient Admissions, Care Coordination, and Discharge Planning  <i>NOTE: Preferred method for Prior Authorization Requests is electronic, via Aviality® or eviCore healthcare (eviCore)</i>	BCCHP	877-860-2837	312-233-4060
	MMAI	877-723-7702	312-233-4060
<b>Pharmacy Prior Authorization</b>	BCCHP	800-285-9426	877-243-6930
	MMAI	877-723-7702	855-674-9193
<b>Pharmacy Help Desk</b>	BCCHP	855-457-0173	N/A
	MMAI	888-840-3068	
<b>Behavioral Health - Utilization Management</b>	BCCHP	877-860-2837	N/A
	MMAI	877-723-7702	312-233-4099
<b>Behavioral Health Mobile Crisis Response (Cares Line)</b>	BCCHP and MMAI	800-345-9049 TTY: 866-794-0374	N/A

Dental, Vision, Pharmacy and Transportation Contact Information	Customer Service	Provider Relations
<b>DentaQuest</b>	BCCHP 888-286-2447	888-875-7482
	MMAI 855-343-7398	
<b>Davis Vision</b>	BCCHP 800-283-9374	800-584-3140
	MMAI 800-773-2847	
<b>Prime Therapeutics</b>	855-457-0173	800-821-4795
<b>ModivCare (formerly known as LogistiCare)</b>	877-917-4149	844-544-1393

Key Contacts for Patients/Members		
<b>Member Services</b>	BCCHP 877-860-2837	MMAI 877-723-7702
<b>24/7 Nurse Line</b>	BCCHP 888 343-2697	MMAI 877-213-2568
<b>Care Coordination</b>	BCCHP 855-334-4780	MMAI 877-723-7702

Compliance Reporting	
<b>Fraud, Waste, and Abuse Reporting</b>	800-543-0867
<b>Department of Public Health</b>	800-252-4343
<b>Illinois Office of Inspector General</b>	800-368-1463
<b>Elder Abuse Hotline</b>	866-800-1409

**Eligibility and Benefits**

**An Eligibility and Benefits Inquiry** *should be completed prior to rendering services*

- Medi-Span® (eligibility only)
- Availity (eligibility & benefits)
- BCBSIL Provider Services: 877-860-2837 (BCCHP)

**Patient Panel Listings & Care Plans** Located within Altruista Health's Guiding Care™ tool, available via [Availity](#)

The screenshot shows three member information forms. The first form is for Blue Cross BlueShield of Illinois, the second for Blue Cross Community, and the third for Blue Cross Community MMAL (Medicare-Medicaid Plan). Red circles highlight the logos for 'Blue Cross Community Health Plans' and 'Blue Cross Community MMAL'. In the second form, the 'Benefit Group' is highlighted as 'MLTSS'.

**Prior Authorization & Referral Requirements**

**Prior Authorization Not Required**

- Emergency and Urgent Care Services
- Referral to In-Network Specialists
- Obstetrical/Gynecological Services (members may self-refer for routine OB/GYN services)

**Prior Authorization Required**

**Prior to services rendered by Out-of-Network Provider**  
*NOTE: Approved referrals to non-contracted providers are valid for one visit within six months from the date the request*

Refer to the Support Materials ([Government Programs](#)) page for a summary and procedure code lists.

**Obtaining Prior Authorization**

**Prior Authorization through BCBSIL:**  
 Use the Availity Authorizations tool on the [Availity website](#)

- Go to the Patient Registration menu option, choose Authorizations & Referrals, then Authorizations
- Choose Payer BCBSIL, then choose your organization
- Choose Inpatient Authorization or Outpatient Authorization Review and submit your request

**Prior Authorization through eviCore:**

- Online via [eviCore](#)
- 855-252-1117

*NOTE: Always check eligibility and benefits first through Availity or your preferred web vendor prior to rendering care and services to our members. This step will confirm if prior authorization is required and utilization management vendor (such as eviCore), if applicable.*

**Availity:**  
 Web-based tool, supporting prior authorization requests handled by BCBSIL for:

- Inpatient Services, including but not limited to: *Medical, Surgical, Maternity, NICU, and Transplant Admissions*
- Select Outpatient Services

**eviCore:**  
 Non-BCBSIL web-based tool, prior authorization requests

**Select Outpatient Services** including, but not limited to:  
*Radiation Therapy; Musculoskeletal Services; Cardiology; Radiology Imaging; Medical Oncology; Sleep Studies; Post-acute Care; Specialty Drugs*

Access and information regarding use of eviCore available at [eviCore](#).

Claim Submission	
<b>Claim Submission</b>	<p>BCBSIL partners with <a href="#">Availity</a> and or electronic claims submissions:  <b>Payer ID is MCDIL</b>  <i>NOTE: If using an alternate clearinghouse, contact your vendor for payer ID</i></p> <p><b>'XOG' prefix must be attached to Member ID #</b> (or claim will reject)</p> <p><b>BCCHP Paper Claims Address:</b>            Blue Cross Community Health Plans            P O Box 3418            C/O Provider Services            Scranton, PA 18505</p> <p><b>MMAI Paper Claims Address:</b>            Blue Cross Community Health Plans            P O Box 4168            C/O Provider Services            Scranton, PA 18505</p>
<b>Additional Claim Resources</b>	<p>BCBSIL partners with <a href="#">Availity</a>, providing the following support:</p> <ul style="list-style-type: none"> <li>• Electronic Claim Submission</li> <li>• Claim Status Tool</li> <li>• Remittance Viewer</li> <li>• Reporting on Demand</li> </ul> <p>Visit the <a href="#">Claims and Eligibility</a> section of Provider website for more information on electronic options.</p>
<b>Claim Inquiries &amp; Disputes</b> <i>NOTE: BCBSIL must be notified in writing within 60 days of receipt of payment. After that time, prior payment of the disputed claim(s) will be considered final payment in full and will not be further reviewed by BCBSIL.</i>	<p><b>Complete &amp; Submit:</b>  <a href="#"><b><u>Medicaid Claims Inquiry or Dispute Request Form</u></b></a></p> <p><b>Mail to:</b>            Blue Cross Community Health Plans            C/O Provider Services PO Box 4168            Scranton, PA 18505</p> <p><b>Fax to:</b>            855-322-0717</p>

Member Appeals and Grievances	
<p>The Member has the right to an Appeal or a Grievance</p> <p>Appeals are defined as dissatisfaction with an organization determination</p> <p>Grievances are defined as dissatisfaction with health care services</p>	<p>A provider can submit an Appeal or Grievance on the patient's behalf <b>ONLY</b> if an Authorization of Release (AOR) is completed <a href="#"><b><u>AOR Form</u></b></a></p> <p><b>Submission of Appeal or Grievance:</b>            Appeals &amp; Grievances            P.O. Box 27838            Albuquerque, NM 87125-9705</p> <p>Fax to: 866-643-7069</p>

Required Training and Additional Resources	
<b>Centers for Medicare &amp; Medicaid Services (CMS) and/or State of Illinois Required Training</b>	<ul style="list-style-type: none"> <li>• <a href="#">Annual Medicaid Provider Training</a> is REQUIRED</li> <li>• <a href="#">Attestation Forms are available</a> on the <a href="#">Provider Training Requirements/Resources page</a>, in the event training has been completed with another MCO</li> </ul>
<b>BCBSIL Complimentary Webinars</b>	<p>Online training sessions are available. For dates, times and online registration, refer to the <a href="#">Webinars and Workshops page</a></p>

Care Coordination	
<b>Benefits of Care Coordination</b>	<ul style="list-style-type: none"> <li>• Helps to create and maintain trustworthy relationships with patients</li> <li>• Provides support team that considers physical, mental and spiritual needs of the member</li> <li>• Allows MCO, Provider, Member &amp; Support Team to operate as a cohesive unit</li> </ul>
<b>Basics of Care Coordination</b>	<ul style="list-style-type: none"> <li>• Members are encouraged to complete a Health Risk Screening within 60 days of enrollment.</li> <li>• Screening results determine level of service provided by BCCHP Care Coordination Team</li> <li>• Care coordinators promote patient engagement, encourage patients to attend scheduled office visits, help arrange transportation, etc.</li> <li>• All Waiver Services Members are assigned a BCBSIL Care Coordinator. Care Coordination phone number is 855-334-4780 (BCCHP) 877-723-7702 (MMAI)</li> </ul>

Behavioral Health & Substance Use Prevention and Recovery	
<b>Prior Authorization Requirements</b>	General guidelines and code specific requirements located: <ul style="list-style-type: none"> <li>• <a href="#">Government Programs Behavioral Health Authorization List</a></li> </ul>
<b>Additional Requirements</b> <i>Certain services require an <b>additional authorization form</b> be completed</i>	<ul style="list-style-type: none"> <li>• <a href="#">Electroconvulsive Therapy (ECT) Request Form</a></li> <li>• <a href="#">Psychological/Neuropsychological Testing Request Form</a></li> <li>• <a href="#">Rule 132 Service Request Form</a></li> <li>• <a href="#">Transcranial Magnetic Stimulation (rTMS) Request Form</a></li> </ul>

Pharmacy Services	
<b>Prime Therapeutics</b>	<a href="#">BCCHP/MMAI Pharmacy Information</a> page to access drug lists, pharmacy directories and forms.
<b>Prior Authorization and Medication Limits</b> <i>Certain medications may require an <b>additional authorization form</b> be completed</i>	Utilize <a href="#">BCCHP /MMAI Pharmacy Information</a> page to determine: <ul style="list-style-type: none"> <li>• Prior Authorization requirements</li> <li>• Medication Limits</li> <li>• Step Therapy</li> <li>• Additional Forms (if required)</li> </ul>
<b>Formulary Exception Request</b>	Authorization requests for non-formulary medications submitted via: <a href="#">Formulary Exception Form</a>
<b>Out-of-Pocket Cost</b>	\$0 Co-Pay for all covered medications

Availity is a trademark of Availity, LLC., a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSIL. eviCore healthcare (eviCore) is an independent company that has contracted with BCBSIL to provide prior authorization for expanded outpatient and specialty utilization management for members with coverage through BCBSIL. GuidingCare is a trademark of Altruista Health, a separate company that offers collaborative health care management solutions for payers and providers. BCBSIL makes no endorsement, representations or warranties regarding any products or services provided by third party vendors. If you have any questions about the products or services provided by such vendors, you should contact the vendor(s) directly.

Prime Therapeutics LLC is a pharmacy benefit management company. Blue Cross and Blue Shield of Illinois contracts with Prime Therapeutics to provide pharmacy benefit management and other related services. Blue Cross and Blue Shield of Illinois, as well as other independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics LLC.

Checking eligibility and benefits and/or obtaining prior authorization for a service is not a guarantee of payment of benefits. Payment of benefits is subject to several factors, including, but not limited to, eligibility at the time of service, payment of premiums/contributions, amounts allowable for services, supporting medical documentation, and other terms, conditions, limitations, and exclusions set forth in the member's policy certificate and/or benefits booklet and or summary plan description. Regardless of any prior authorization or benefit determination, the final decision regarding any treatment or service is between the patient and their health care provider.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association