

Provider Bulletin

December 2020

Prior authorizations to be submitted electronically

Effective January 1, 2021, Medicaid providers will be asked to submit prior authorizations electronically according to Indiana legislation outlined in House Bill 1546.

In 2019, the Indiana legislature passed HB 1546 related to prior authorizations for health care services for Medicaid providers. Medicaid providers will be asked to submit, and health plans must accept, requests for prior authorization through secure electronic transmission.

Anthem Blue Cross and Blue Shield has secure electronic transmission portals available for providers to submit prior authorization requests depending on the type of health service being provided:

- **Availity*** Prior authorizations for medical and behavioral health services are submitted using the Availity Web Portal at **www.availity.com**.
- **AIM** *ProviderPortal* SM* For services administered by AIM Specialty Health®,* providers may submit electronic prior authorization requests using AIM's *ProviderPortal* directly at https://providerportal.com/.

To learn more about this law, please visit the Indiana Legislature website and view **Indiana House Bill 1546** and the final statute – *Request for prior authorization; electronic transmission; standardized form (IC 27-1-37.5-10)*.

What if I need assistance?

The requirement to submit prior authorizations electronically may be waived under certain circumstances, such as:

- Financial hardship that may result from electronic submission
- Insufficient Internet access in your area, or
- Insufficient number of patients to warrant the financial expense to comply with electronic submission

If you have questions about this or need assistance with any other item, contact your local Network Relations representative or call Provider Services at:

- Hoosier Healthwise **1-866-408-6132**
- Healthy Indiana Plan **1-844-533-1995**
- Hoosier Care Connect 1-844-284-1798

www.anthem.com/inmedicaiddoc

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Providers who are contracted with Anthem Blue Cross and Blue Shield to serve Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect through an accountable care organization (ACO), participating medical group (PMG) or Independent Physician Association (IPA) are to follow guidelines and practices of the group. This includes but is not limited to authorization, covered benefits and services, and claims submittal. If you have questions, please contact your group administrator or your Anthem network representative.

AIN-NU-0241-20 December 2020

^{*} Availity, LLC is an independent company providing administrative support services on behalf of Anthem Blue Cross and Blue Shield. AIM Specialty Health is an independent company providing some utilization review services on behalf of Anthem Blue Cross and Blue Shield.