

MEDICAID PROVIDER BULLETIN

November 2016

Medicaid

This is an update about information in the provider manual. For access to the latest manual, go online to https://mediproviders.anthem.com/ky.

Changes to approval notification process

Summary: In an effort to streamline communication and improve provider and member satisfaction, we will be making changes to how you are notified of approvals for services. Effective December 1, 2016, we will no longer mail precertification approval letters to members and providers. Servicing providers will receive notification of utilization management decisions via phone or fax as confirmation of approval decisions.

Please note: Adverse determinations are not impacted by this change, and denial notifications will continue to be mailed via first class mail to members and ordering and servicing providers. If you have questions about this change in approval notification, please call Provider Services toll free at **1-855-661-2028**.

Reminder — **inpatient admissions:** Notification is required within 24 hours or by the next business day for any inpatient admission whether emergent or previously authorized. To send notification, the provider can:

- Call Provider Services 24/7 toll free at **1-855-661-2028**.
- Fax the request to **1-800-964-3627**.
- Submit through https://mediproviders.anthem.com/ky.

Failure to provide an admission notification in a timely manner (within 24 hours or the next business day) could result in an administrative denial of the entire inpatient admission.

Anthem Blue Cross and Blue Shield Medicaid also requires precertification of all inpatient admissions.

Provider action: No further action required at this time.

Questions: If you have questions about this communication, please contact your Provider Relations representative or Provider Services toll free at **1-855-661-2028**.