

2024 Blue Medicare Advantage Provider Quick Reference Guide (HMO/PPO)

Customer Service Call (866) 508-7140 For the hearing impaired, dial 711 <u>Providers.BlueKC.com</u> Email: CustomerService@BlueKCMA.Com	For inquiries such as claim status, claim payment issues or adjustment requests, member eligibility, benefit verification and prior authorizations. Mailing Address: Central Operations (COPS) Blue KC MA P.O. Box 410080 Kansas City, MO 64141
Claims & Provider Correspondence Fax and Mailing Address Fax (877) 549-1746	Electronic claims submission is required; follow the Blue KC electronic claims process. Blue Medicare Advantage correspondence, use the following address unless otherwise noted: Blue Medicare Advantage ATTN: Government Programs - Claims P.O. Box 410080 Kansas City, MO 64141
Utilization Management Department Call (866) 508-7140 For the hearing impaired, dial 711 Fax (877) 549-1744 – Medical Services Prior Authorization Fax (816) 995-1597 – Prior Authorization Part B Medical Drugs Fax (877) 549-1744- Concurrent Review Appeals/Grievance Fax (877) 549-1748	For assistance with case management, prior authorization of inpatient admissions/discharges, medical procedures including DME, Orthotics & Prosthetics, and Part B Drugs. Providers can access self-service tools options for medical services and medical drug (Part B drug) prior authorization requests by visiting the <u>Providers.BlueKC.com</u> Provider Portal. Concurrent Review: Evaluate initial and continued inpatient stay, Acute Rehabilitation, Skilled Nursing Facility and Long-Term Acute Care (LTAC) admissions and continued stay, for medical necessity and appropriateness of level of care request. Concurrent review takes place during an inpatient stay as a follow-up to pre-service requests.
Part D Coverage Determination Call (866) 508-7140 Fax (844) 403-1028 Mail Order: Providers can submit prescriptions electronically via ePrescribing or fax: (800) 491-7997 OptumRx Appeal Information: Call: (888) 403-3398 TTY: 711 Fax: (877) 239-4565 OptumRx c/o Appeals Coordinator P.O. Box 25184 Santa Ana, CA 92799	 For prior authorization assistance for a formulary drug, a form for Part D Coverage Determination. Providers can access self-service tools for pharmacy drug prior authorization requests by visiting <u>Providers.BlueKC.Com</u> Provider Portal and submitting clinical information for review. Employer Groups refer to the Member ID card for Pharmacy (Part D Prescription) contact information.
Radiology Services Call (888) 693-3211 Fax (888) 693-3210 https://www.evicore.com/provider	 eviCore - For assistance with prior authorizations of outpatient, non-emergent, diagnostic imaging services including: CT/CTA MRI/MRA NCM/MPI PET Pain Management Note: To see a full list please go to the website at <u>https://www.evicore.com/provider</u>

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Behavioral Health Services Mindful, o behavioral

Call (800) 528-5763 option #2

Mindful, our behavioral health partner supports providers treating members with behavioral diagnosis and concerns. If you need immediate assistance accessing treatment resources, call Lucet Physician Consult line to speak with a behavioral health professional.

Pre-authorization is required for inpatient admissions.

Miscellaneous Information:

- HMO Plans Only: Providers must refer within the Blue Medicare Advantage network. Out of network exceptions will be reviewed on a case-by-case basis.
- Laboratory No prior authorization required unless related to genetic testing see above. May draw in office with specimens sent to Quest Diagnostic and LabCorp lab facilities.

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