

# BlueCard Tutorial

## Using Medical Policy and Prior Authorization Routers



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Learn to Check Medical Policies and Prior Authorizations of other Blue plans

After completing the BlueCard Medical Policy and Prior Authorization Routers tutorial, you will be able to:

- Use the Blue Shield router tool to help you serve out-of-state Blue plan members
- Locate medical policy information for out-of-state Blue plan members
- Locate prior authorization information for out-of-state Blue plan members
- Know how to contact us for additional help and information

[begin tutorial](#) ▶

## Provide Connection Homepage

From the Provider Connection home page, log in with your username and password.

Click on the "BlueCard Program" link in the "Helpful Resources" section to access the BlueCard® Program home page.

You may also click the "More" buttons, in the BlueCard Program section.

The screenshot shows the Provider Connection homepage for Blue Shield of California. The browser address bar indicates the URL is https://www.blueshieldca.com/provider/home.sp. The page has a search bar and navigation tabs. The main content area is divided into sections for Eligibility & Benefits, Authorizations, and Claims. A sidebar on the right contains a 'Welcome, Provider' message and a 'Helpful Resources' section where the 'BlueCard Program' link is highlighted. A speech bubble points to the 'more' button under the 'Eligibility & Benefits' section, and another 'more' button is highlighted in the 'BlueCard Program' section.

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  next

BlueCard Program Home page

In the Tools section, locate the “Check Medical Policy and Prior Authorization” link, and click to access the Policy and Authorization router.

The screenshot shows the BlueShield of California Provider Connection website. The main navigation bar includes links for provider home, eligibility & benefits, authorizations, claims, and guidelines & resources. The current page is titled "bluecard program" and features a search bar and a "SEARCH" button. A sidebar on the left lists various resources like Forms, Drugs and Pharmacy, and Patient Care Resources. The main content area includes a "find tools for out-of-state members" section with a search form and a "Tools" section. A callout bubble highlights the "Check Medical Policy and Prior Authorization" link in the Tools section. Other sections include "Welcome, Provider" with a Claims Routing Tool, "BlueCard Contacts" with phone numbers and hours, and "Submit Claims Electronically" with a "more" link.

Click “Check Medical Policy and Prior Authorizations” link

# Medical Policy & Prior Authorization Routers

Looking up medical policies or requirements for prior authorizations is fast and easy with the Blue plan tool.

Just enter the **three-letter prefix** of the out-of-state member's ID number.

Then, select either the "Medical Policy" or "Prior Authorization."

Then click "Search."

Provider Connection - Blue Shield of California - Mozilla Firefox

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blueshieldca.com https://www.blueshieldca.com/provider/authorizations/clinical-policies/auth-router.sp

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blue of california | provider connection

provider home | eligibility & benefits | **authorizations** | claims | guidelines & resources

Provider Home > Authorizations > Clinical Policies and Guidelines > Medical Policy and General Prior Authorization Requirements for Out-of-Area Members

## medical policy and general prior authorization requirements for out-of-area members

Enter the first three letters of the member's ID number to view Medical Policy or General Prior Authorization Requirements:

3 Letter Prefix :

Medical Policy  
 Prior Authorization

If you experience difficulty or need additional information, contact (800)-676-BLUE (2583).

**Enter the Member's 3-letter prefix from the ID card**

**Click "Search" button**

Eligibility A	Claims	Guidelines And Resources
Verify Eligibility	How To Submit Claims	Forms
Create Roster	Check Claim Status	Drugs And Pharmacy
HMO Benefit Summaries	View Claims Editing Rationale	Guidelines And Standards
Preventive Health Guidelines	Manage Electronic Transactions	Manuals And Bulletins
	Professional Fee Schedule	Patient Care Resources
	Appeals And Adjustments	For Prospective Providers
	Policies And Guidelines	

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### If you select Medical Policy...

Selecting the "Medical Policy" button will send you to the member's out-of-state Blue plan's medical policy web page.

You may be required to agree to certain disclaimers before accessing the other Blue Plan's home page.

The screenshot shows the 'blue of california | provider connection' website. The main heading is 'medical policy and general prior authorization requirements for out-of-area members'. Below this is a form with the instruction: 'Enter the first three letters of the member's ID number to view Medical Policy or General Prior Authorization Requirements:'. The form has a '3 Letter Prefix' field containing 'XJL' and two radio button options: 'Medical Policy' (selected) and 'Prior Authorization'. A 'search' button is located below the options. A callout bubble points to the 'Medical Policy' radio button with the text 'Select "Medical Policy"'. Another callout bubble points to the '3 Letter Prefix' field with the text 'Enter the Member's 3-letter prefix from the ID card'. The page also features a navigation menu with tabs for 'provider home', 'eligibility & benefits', 'authorizations', 'claims', and 'guidelines & resources'. At the bottom, there are links for 'Eligibility And Benefits', 'Claims', and 'Guidelines And Resources'.



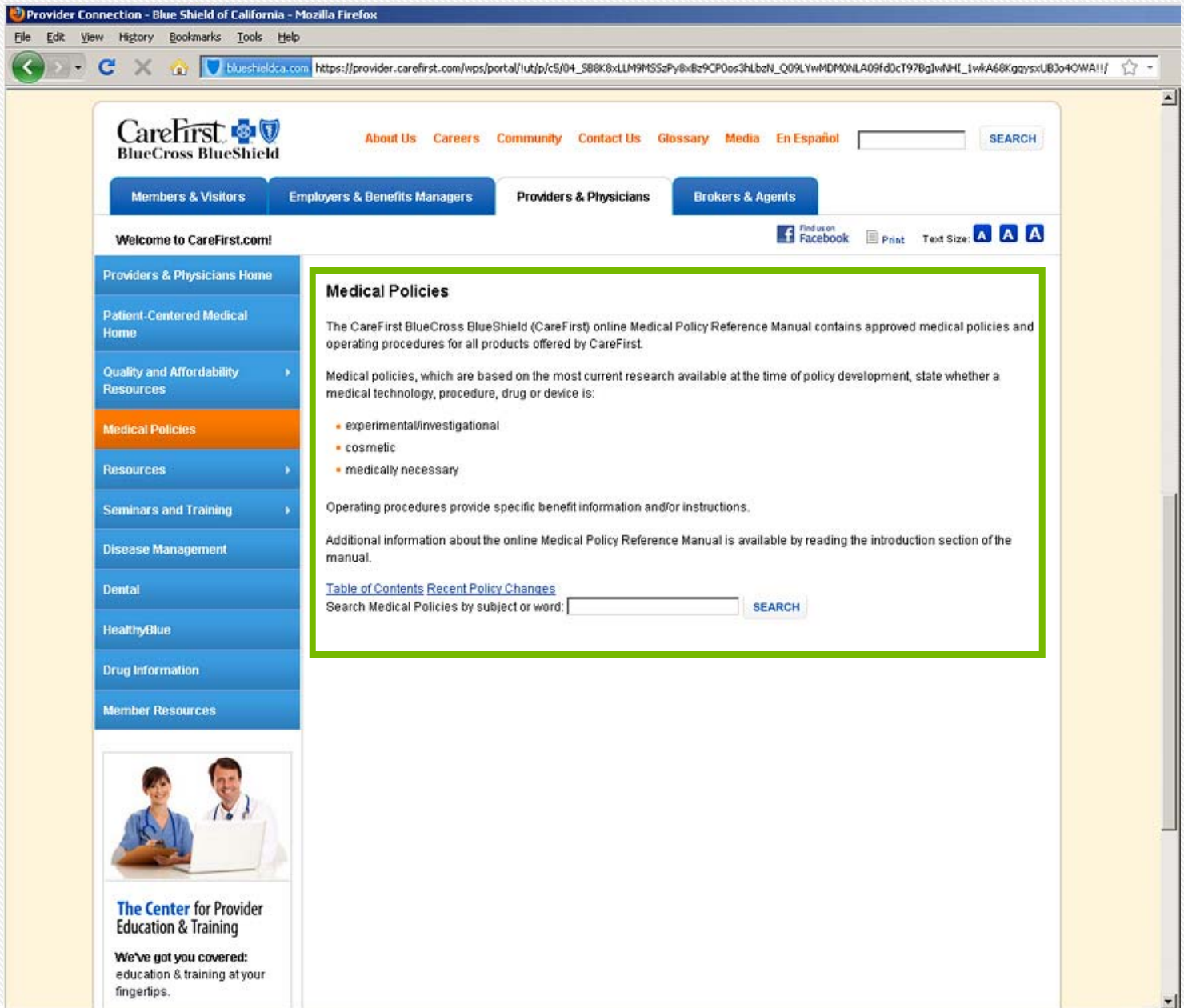
## Blue Plan Medical Policy page

### If you select Medical Policy...

Blue plans' medical policy pages and posted information may look different from those of Blue Shield of California.

Depending on the Blue plan's features, you may conduct searches based on certain words or phrases.

In some cases, you may be required to select policies to open and view materials, and have the option to print and/or download medical policies to your computer.



Provider Connection - Blue Shield of California - Mozilla Firefox

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blueshieldca.com https://provider.carefirst.com/wps/portal/!ut/p/c5/04\_S88K8xLLM9M55zPy6xbz9CP0os3hLbzN\_Q09LYwMDM0NLA09fd0cT97BglwNHL\_1wA66KqgysdUB3o4OWA!!!

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Member Resources

**Medical Policies**

The CareFirst BlueCross BlueShield (CareFirst) online Medical Policy Reference Manual contains approved medical policies and operating procedures for all products offered by CareFirst.

Medical policies, which are based on the most current research available at the time of policy development, state whether a medical technology, procedure, drug or device is:

- experimental/investigational
- cosmetic
- medically necessary

Operating procedures provide specific benefit information and/or instructions.

Additional information about the online Medical Policy Reference Manual is available by reading the introduction section of the manual.

[Table of Contents](#) [Recent Policy Changes](#)

Search Medical Policies by subject or word:  SEARCH

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# Medical Policy & Prior Authorization Routers

## If you select Prior Authorization...

Selecting the "Prior Authorization" button will send you to the member's out-of-state Blue plan's authorization and/or eligibility and benefits web pages.

You may be required to agree to certain disclaimers before accessing the Blue Plan's prior authorization sections.

The screenshot shows the Blue Shield of California provider connection website. The main heading is "medical policy and general prior authorization requirements for out-of-area members". Below this, there is a search prompt: "Enter the first three letters of the member's ID number to view Medical Policy or General Prior Authorization Requirements:". A text input field labeled "3 Letter Prefix" contains the characters "XJL". Below the input field are two radio buttons: "Medical Policy" and "Prior Authorization", with the latter selected. A "search" button is located below the radio buttons. A callout bubble points to the input field with the text "Enter the Member's 3-letter prefix from the ID card". Another callout bubble points to the "Prior Authorization" radio button with the text "Select 'Prior Authorization'".

At the bottom of the page, there are three navigation buttons: "home" (with a blue circle containing 'h'), "previous" (with a blue circle containing '<'), and "next" (with a green circle containing '>').

## If you select Prior Authorization...

Blue plans' prior authorization pages and information posted may look different from Blue Shield of California's authorization pages and information. Depending on the Blue plan's features, you may conduct authorization searches based on certain words or phrases.

In some case, you may be required to select authorization listings to open and view materials, and have the option to print and/or download prior authorization information to your computer.



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blueshieldca.com https://provider.carefirst.com/wps/portal/Provider/ProviderLanding?WCM\_GLOBAL\_CONTEXT=/wcmwps/wcm/connect/Content-Provider/CareFirst/ProviderPortal/Ge

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Member Resources

**Medical Policy and Pre-certification/Pre-authorization Information for Out-of-Area Members**

Obtaining pre-certification/pre-authorization requests should be an easy, straightforward process. So, if you are looking to avoid spending more time on the phone than you do with your patients, then you have come to the right place!

CareFirst BlueCross BlueShield (CareFirst) has put together a quick, simple way to get the information you need in order to assist out-of-area members.

Please view the list below to identify the services that generally require pre-certification/pre-authorization and contact 1-866-773-2984 for authorization regarding treatment for the following:

- Behavioral health services, including substance abuse treatment
- Durable medical equipment (DME) over specified dollar amounts (varies)
- Elective inpatient procedures
- Home Health Care
- Hospice
- Hysterectomy
- In vitro fertilization
- Infusion therapy
- Inpatient hospital care
- Any procedure that may potentially be considered cosmetic in nature, such as blepharoplasty, reduction mammoplasty, or TMJ
- Inpatient rehabilitation
- Investigational or experimental procedures\*
- Pregnancy
- Sclerotherapy
- Septoplasty
- Skilled nursing facility admissions
- Surgery on the jaw
- Temporo mandibular joint (TMJ) surgery
- Transplants
- A one-time notification when a member is initiating outpatient chemotherapy or radiation therapy

\*Any drugs, services, treatment, or supplies that the CareFirst medical staff determines, with appropriate consultation, to be experimental, investigational or unproven are not covered services. For more information, please refer to the [Medical Policy Reference Manual](#).

Use the forms below to complete the pre-certification/pre-authorization process for out-of-area members:

- [Outpatient Pre-Treatment Authorization Program: Initial Request](#)
- [Outpatient Pre-Treatment Authorization Program: Re-Authorization Request](#)
- [Pre-certification Request for Authorization of Services](#)
- [Pre-Service Review Request for Authorization Form](#)

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# BlueCard Medical Policy and Prior Authorization Routers Conclusion



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Congratulations! You have completed the Medical Policy and Prior Authorization Routers tutorial.

We encourage you to continue your learning. The [BlueCard Tutorials web page](#) contains other informative BlueCard tutorials, plus additional resources you may find helpful.

For questions related to:

- Member eligibility, contact BlueCard Eligibility at (800) 676-BLUE (2583)
- Authorization status, call the Medical Management number printed on the back of the member's ID card
- Website registration, log in or technical problems, contact the Web Help Desk at (877) 932-3375



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