

January updates and helpful tips for your teams

pages.azblue.com/New-plan-year-updates-tips-and-reminders---JAN-2023.html

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Crossing into the 2023 new plan year has brought new members, new plans, new ID cards, new infrastructure technology, and new ways of doing things that have moved us toward greater collaboration and teamwork. We appreciate your partnership in ensuring member care during this transition.

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Don't turn members away!
We will validate and authorize

Please share the following summary of updates, tips, and reminders with your teams.

Waivers and prior authorization requirements update

PCP referral authorization waiver effective through March 31

For PCP-HMO plans, we are waiving the PCP referral approval requirement from January 1 through March 31, 2023. Please continue to make in-network referrals for specialist office visits. Approval for such referrals is not required until April 1.

SNF preservice review waiver ends January 31

Starting February 1, we will once again require the usual preservice reviews for patient care transitions from acute care to skilled nursing facilities (SNFs).

Prior authorization requirements update January 19

We recently updated the [2023 prior authorizations code lists](#) and lookup tool. You can find these resources at azblue.com/precert.

ProviderHelp and UM emails

We appreciate your partnership in making sure our members get the care they need.

- If you need member information that isn't available online or via our automated phone system, don't hesitate to reach out to us at [\[email protected\]](#).
- If you need prompt prior authorization for imminent care, contact us 24/7 at [\[email protected\]](#).

Secure provider portal tips

- *Checking eligibility and benefits:* Be sure the member ID prefix used in the inquiry is valid for the date of service. Alternatively, you can use the "Name" search option. For more information about prefix replacements, visit the azblue.com/prefix page.
- *Accessing online remits:* To see all remits, search up to 12/31/22 and do another search for payments issued on and after 1/1/23.
- *Checking claim status:* We are working to ensure all claims show up in online claim status searches. You can check claim status through the automated IVR phone system at 602-864-4320 or 1-800-232-2345.
- *Accessing 2023 benefit books:* PDFs will be available soon via eligibility and benefits inquiries for members with prefixes B4H, EWX, EPI, FLH, FQL, IPO, N4Z, NNG, NNJ, P9H, PMA, PMK, S3Z, SYD, XBC, XBM, XBN, XBP, XBS, XAH, XHK, Y4M, and Z9P.

PCP-HMO plan reminders

- The 2023 PCP-HMO plans use the **BCBSAZ standard** prior authorization requirements and are included in our **eviCore** program.
- The 2023 PCP-HMO plans no longer display the assigned PCP, but you can get that information via an eligibility/benefits inquiry.
- You can request prior authorization for PCP-HMO plans using the new request tool in the secure provider portal at "azblue.com/providers > Practice Management > PCP Coordinated Care HMO Plans." The first time you access the tool, it may take a few minutes for the tool to register you as a user.

More information

For more information about 2023 updates, contact your [provider liaison](#) or call us at 602-864-4231 or 1-800-232-2345, ext. 4231.

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