

As COVID-19 cases surge, BCBSAZ emergency measures continue

 pages.azblue.com/Full-support-for-COVID-19-measures-continues---JAN-2021.html

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New strains of the COVID-19 virus threaten to intensify and prolong the already serious surge in COVID-19 cases and hospitalizations in Arizona. In addition to the ADHS [Arizona Surge Line](#) and resources, the Blue Cross® Blue Shield® of Arizona (BCBSAZ) care navigator team remains available 24/7 to answer questions, support member care, and assist you in resolving any issues.

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Check out our 2021 [member ID prefix lists](#)

- Main BCBSAZ support line: **602-864-4320**
- Medicare Advantage support line: **1-888-905-1172**

In addition, for the upcoming holiday on February 15, we will have a team ready to help you with routine operations, including eligibility, benefits, claim status, etc. Call the main support line at **602-864-4320**.

Full support through emergency measures

We are continuing our waiver of precertification for transitions to post-acute care facilities (SNFs/EARs/LTACs) and automatically authorizing the first 72 hours of the patient admission. This means that our post-acute care partners must immediately accept all appropriate transfers and then follow up within three days by notifying us and sending the clinical information for concurrent review.

For out-of-area BlueCard® members, please call the number on the back of the member's ID card to check if precertification is waived and, if not, request a quick turnaround on the authorization. It's best to start discharge planning as soon as possible for these patients, as some BCBS Plans may not be offering after-hours support lines.

All other emergency waivers and adjustments also remain in effect until further notice to support you in responding to the surge:

TYPE OF WAIVER/ADJUSTMENT	LINE OF BUSINESS	CURRENT TIME FRAME
Concurrent review waiver for inpatient acute care hospitalizations <i>Penalties for unscheduled admission notification or precertification are also waived.</i>	BCBSAZ individual and fully insured plans and all BCBSAZ-administered MA plans (not those administered by P3)	Effective July 3, 2020, until further notice (based on ADHS measures for hospital bed capacity)
Preservice review waiver for all transitions from acute care to post-acute care facilities (SNF/EAR/LTAC) <i>You must notify BCBSAZ within 72 hours of admission and send medical records within three days for concurrent review.</i>	BCBSAZ individual and fully insured plans and all BCBSAZ-administered MA plans (not those administered by P3)	Effective July 3, 2020, until further notice (based on ADHS measures for hospital bed capacity)
Preservice review waiver for post-acute care home nursing visits and DME items	BCBSAZ individual and fully insured plans and BCBSAZ-administered MA plans	Effective July 3, 2020, until further notice (based on ADHS measures for hospital bed capacity)
Preservice review time frame limit adjustment (these have been expanded to be valid for 90 days past the approval date); excludes pharmacy authorizations	BCBSAZ individual and fully insured plans and BCBSAZ-administered MA plans	Reinstated July 3, 2020, until further notice (based on ADHS measures for hospital bed capacity)
Waiver of three-day prior hospitalization requirement for SNF stays	Medicaid and traditional Medicare	Duration of COVID-19 public health emergency
PCP referral waiver for in-network services related to COVID-19 diagnoses (consistent with CDC guidelines for COVID-19 treatment)	PCP Coordinated Care HMO plans	Duration of COVID-19 public health emergency
PCP referral waiver for all services	BCBSAZ-administered MA plans	Duration of COVID-19 public health emergency
Waiver of early refill limits on 30-day prescriptions for maintenance medications	BCBSAZ-administered MA plans	Duration of COVID-19 public health emergency
Preservice review waiver for COVID-19 testing and treatment (consistent with CDC guidelines)	ALL plans—see note below about self-funded plans and those from other BCBS Plans	Duration of COVID-19 public health emergency
Member cost-share waivers		
Member cost-share waiver for in-network tele-everything services for all diagnosis codes	BCBSAZ individual and fully insured plans and BCBSAZ-administered MA plans (Note: MA plans do not cover teledentistry)	Duration of COVID-19 public health emergency
Member cost-share waiver for in-network tele-everything services for COVID-19 diagnosis codes only	Federal Employee Program® (FEP®) plans	March 6, 2020, throughout COVID-19 public health emergency
Member cost-share waiver for COVID-19 testing (consistent with CDC guidelines)	ALL plans—see note below about self-funded plans and those from other BCBS Plans	Duration of COVID-19 public health emergency
Member cost-share waiver for COVID-19 treatment (consistent with CDC guidelines)		
Note: Self-funded employer groups and other BCBS Plans determine their own member-benefit coverage and waivers of cost-share and preservice-review requirements.		

Appreciation for your patient-centric focus

Thank you for continuing to involve patients' family members in supportive conversations. This important aspect of your service impacts the quality of care, and helps people endure the emotional challenges presented by this pandemic and its physical isolation requirements. Our care managers are available 24/7 to help make those connections.

Please reach out to your provider liaison with questions and suggestions. We truly appreciate your ongoing dedication and persistence in fighting this virus and caring for so many people who are affected by it.

P3 Health Partners is a separate, independent company that provides services to BCBSAZ providers and members.
