

Provider Update

REMINDER: Best Practices for Submitting Claims with Authorizations

Date: October 1, 2019

To ensure timely and accurate payment on claims, providers shall submit the appropriate authorization on claims (if applicable). Best practices for submitting authorizations on claims include:

1. Obtain an authorization for services that require an authorization
 - a. Providers can verify our No Prior Authorization list on our website, www.virginiapremier.com, to determine what services require an authorization
2. Authorizations shall be requested prior to the service or at the time of service
3. The authorization obtained must match the member being billed on the claim
4. The authorization obtained shall match the services billed on a claim
5. The NPI number used to obtain the authorization must match the NPI number being billed on the claim
6. Providers shall not submit claims prior to the authorization being approved
7. Providers shall bill for the same units that are approved under the authorization
8. The authorization date span shall match the dates provided on the claim
9. When no authorization is required, providers shall not put an authorization number on the claim
10. For Home Health, the authorization should be requested using the procedure code, not the revenue code

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11. Authorizations shall be faxed to the correct fax line:

Inpatient Admission: 877-739-1365

Medallion 4.0 Outpatient (OP): 800-827-7192

CCC Plus OP: 877-739-1371

Medicare (DSNP/MAPD) OP: 877-739-1364

Behavioral Health OP CCC Plus: 804-799-5104

Behavioral Health OP Medallion 4.0 and Medicare: 804-343-0304

Behavioral Health Inpatient and ARTS: 804-799-5105

LTSS Services: 877-794-7954

12. Providers are encouraged to verify the status of an authorization by utilizing our provider portal

- a. Providers can verify authorization status on our website, www.virginiapremier.com
> For Providers > Medicaid/Medicare > Provider Portal.

If you have concerns that your current authorizations are not in line with the requirements above, then please reach out to our Medical Management Department at 800-727-7536 to have your authorization updated.

If you have any questions, please contact Provider Services. We are available Monday through Friday from 8:00 am to 6:00 pm at 804-968-1529 or toll-free 800-727-7536.

Sincerely,

Provider Services