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The information in this document applies to Blue Cross Blue Shield of Michigan commercial members and Blue Care Network commercial members admitted to post-acute care (to a skilled nursing facility, an inpatient rehabilitation facility or a long-term acute care hospital).

Note: For Medicare Plus Blue and BCN Advantage members admitted to post-acute care, naviHealth manages those authorizations. For those members, refer to the document [Post-acute care services: Frequently asked questions for providers](#).

## **Submit skilled nursing facility and inpatient rehabilitation prior authorization requests through the e-referral system**

Complete the [SNF/acute IPR assessment form](#). Attach the completed form and the required documentation listed on the form to the request in the e-referral system.

For instructions on how to attach documentation to the request, refer to the [e-referral User Guide](#). Look in the “Submit an inpatient authorization” section for how to “Create New (communication).”

Note: When the e-referral system is unavailable, follow the instructions in the document titled [e-referral system planned downtimes and what to do](#).

## **Submit LTACH prior authorization requests via fax**

For LTACH admissions:

- Fax a completed [LTACH assessment form](#) along with the documentation listed on the form to one of the phone numbers shown on the form.

Note: Faxed requests are accepted 24 hours a day, seven days a week.

- To expedite a request, fax the completed form and the documentation and then call 1-800-851-3904.
- Before placement in a long-term acute care setting can be considered, Blue Cross and BCN also require that the member be assessed by three skilled nursing facilities affiliated with Blue Cross or BCN, two of which must be facilities identified by Blue

Cross or BCN as accepting members who require higher levels of care such as ventilators. A determination must be made by these three facilities that they cannot provide the level of care the member needs. For information on higher-acuity skilled nursing facilities capable of doing these assessments, providers should call Blue Cross or BCN at 1-800-851-3904.

Note: If the member was placed on a ventilator during an inpatient admission and failed to wean during the inpatient stay, the member can be assessed for appropriateness for the long-term acute level of care by applying the criteria for long-term acute care rather than the criteria for skilled nursing care.

## How to access the forms

You can find the post-acute care forms for commercial members in the following locations:

- On the [For Providers: Forms and Documents](#) page at [bcbsm.com/providers](https://bcbsm.com/providers)
- On our [ereferrals.bcbsm.com](https://ereferrals.bcbsm.com) website, in these locations:
  - On the BCN [Forms](#) page
  - On the Blue Cross [Authorization Requirements & Criteria](#) page, in the “For Blue Cross commercial members” section
- In the secure Provider Resources area of our provider portal ([availability.com](https://availability.com)\*) On the Forms menu, click *Assessment*.

## Utilization Management staff availability

The Blue Cross / BCN post-acute care utilization management staff are available as follows:

- Normal business hours are Monday through Saturday, 8 a.m. to 5 p.m. (Eastern time).
- The on-call nurse is available to assist with post-acute care admissions on Sundays and holidays and at other times outside of normal business hours. Fax the completed form along with the documentation to one of the numbers listed on the form. Then call the on-call nurse at 1-800-851-3904.

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