



BCBSOK Medical Management
800-672-2378

IVR Hours of Availability: Monday – Friday 6:00 a.m. – 11:30 p.m. (CT), Saturday 6:00 a.m. – 3:30 p.m. (CT), Sunday – Closed

The table below provides the Blue Cross and Blue Shield of Oklahoma (BCBSOK) automated call flow for checking status on an inpatient or outpatient preauthorization request. The left column includes what callers will hear the system say. The right column outlines the options callers may use to respond, along with any special instructions, tips and reminders.

- Helpful Hints: Utilize your key pad when possible. Minimize background noise. Please do not utilize cell phones. Mute your phone when not speaking.

Table with 2 columns: System Prompt and Touch Tone / Voice Options. It details the automated call flow for checking preauthorization status, including prompts for callers and corresponding touch-tone or voice options.

System Prompt:	Touch Tone / Voice Options:
<p>Certification does not guarantee that the care and services the subscriber receives are eligible at time of admission or procedure. It only assures the proposed treatment meets the plan guidelines for medical necessity. If you anticipate that the patient's length of stay will exceed the certified days or need for continued services, please call us back.</p> <p>Is your patient a member or dependent of the Federal Employee Program?</p>	<ol style="list-style-type: none"> 1. Federal employee or dependent 2. Non-federal employee or dependent
<p>Provider Services Line. Okay, what is your 10-digit rendering National Provider ID?</p> <p><i>Situational: If the system does not recognize the NPI, you will be prompted for a Tax ID.</i></p>	<p>You can use your touch tone key pad to enter numeric information.</p> <p>Note: Professional providers should use the rendering NPI of the individual actually providing services.</p>
<p>And you're calling for outpatient preauthorization, is that correct?</p>	<ol style="list-style-type: none"> 1. Yes 2. No <p>Note: The system will only ask this question if you chose the "Outpatient" option.</p>
<p>Okay, preauthorization. Excluding the three letter alpha prefix, what's the subscriber ID?</p> <p><i>Situational: If multiple policies are found for your patient, you will also be asked to provide their group number.</i></p>	<p>Touch tone and voice are both available options</p> <p>Note: ID numbers containing alpha characters can be entered by touch tone keypad (e.g. for letter "R" press *73).</p>
<p>Do you need to request authorization or check the status?</p>	<ol style="list-style-type: none"> 1. Request authorization 2. Check the status
<p>What's the Request ID? For help finding it, say "More information."</p> <p><i>Situational: If a preauthorization request cannot be matched to the Request ID, additional patient identifiers will be requested.</i></p>	<p>Tip: Request IDs start with five digits and are followed by a combination of five letters or numbers (e.g., 11001AAA99).</p> <p>Note: Touch tone is not an option here.</p>
<p>That's 11001AAA99. Is that correct?</p>	<ol style="list-style-type: none"> 1. Yes 2. No

System Prompt:	Touch Tone / Voice Options:
<p>Please be advised that pre-certification or pre-notification or preauthorization does not constitute a guarantee of benefits or payment. Actual availability of benefits is subject to eligibility and other terms, conditions, limitations and exclusions of the health care benefit plan.</p> <p><u>Inpatient Example Status Message:</u> Here's the most recent status for this request. This inpatient request has been approved for XX number of days. The start date is MM/DD and the end date is MM/DD.</p> <p><u>Outpatient Example Status Message:</u> Here's the most recent status for this request. The request has been approved as follows: procedure code 99999 approved for XX units. The start date is MM/DD and the end date is MM/DD.</p>	<p>N/A</p>
<p>To hear that again, say "Repeat that." If you're finished, just hang up. To continue using this system, say "Check another status" or "Request authorization." To transfer to our Managed Care Unit, say "Managed care."</p>	<ol style="list-style-type: none"> 1. Repeat that 2. Check another status 3. Request authorization 4. Managed Care