

Clinical UM Attestation and Use Guide – FAQ

Overview

1. What are Utilization Management (UM) attestations?

UM attestations include a set of yes or no questions used to collect critical clinical information. This approach helps streamline the prior authorization request process and can result in faster approvals, reduced paperwork, and quicker Access2Care for members.

2. Why should I use UM attestations?

UM attestations:

- Simplify the prior authorization process.
- Speed up decision-making and care delivery.
- Reduce administrative burden.
- Allow providers to focus more on member care.

Access and Platform Details

3. Where can I access UM attestations?

UM attestations are available through Availity Essentials, a secure, web-based platform that integrates into your daily workflow.

4. Will there be other ways to submit UM attestations?

Yes. Later this year, the submission process will be expanded to include phone-based attestation options, offering additional flexibility.

Submitting UM Attestations

5. Who is responsible for completing UM attestations?

Typically, clinical or administrative staff familiar with the member's medical record will complete the attestation. The person must ensure that answers are based strictly on documented clinical evidence.

6. Can I delegate UM attestation completion to non-clinical staff?

Yes, as long as the staff member:

- Has access to the relevant medical documentation.
- Understands how to accurately answer the clinical questions.

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7. How long does it take to complete a UM attestation?

Once staff are familiar with the system, most attestations take only a few minutes. Efficiency will improve over time as users become accustomed to the process.

8. How do I submit a UM attestation through the Availity platform?

Step-by-step instructions:

1. Go to the **Prior Authorization Attestations** screen.
2. Select the attestation from the **To-Do List**.
3. Select **Complete Forms**.
4. Answer the questions based on your clinical documentation.
5. Submit the form.
6. You'll receive confirmation of submission.
7. Check the Authorization Response page:
 - Approved = There is no further action required.
 - Pended = Submit additional clinical records for further review.

Follow-up and Resolution

9. What happens if my request cannot be approved through attestation alone?

You will be asked to submit clinical documentation for further review. This ensures that all necessary information is available to complete the decision-making process.

10. Can I track the status of an attestation after submission?

Yes. Status updates (like approved or pended) appear on the **Authorization Response** page in Availity.

Technical Assistance

11. What should I do if I encounter technical issues within the Availity platform?

- Contact Availity customer support.
- Ensure your browser and system meet platform requirements.
- Consult your internal IT support if access issues persist.

Compliance and Oversight

12. Are attestations subject to audit?

Yes. All attestations must reflect accurate and truthful clinical data and are subject to audit by health plans. Always verify that your answers align with the medical record.

13. What happens if incorrect information is submitted?

Inaccurate submissions can result in:

- Requests that are not eligible for reimbursement.
- Delays in care.
- Potential compliance issues or audit findings.

Eligibility and Expansion

14. Which clinical requests are eligible for UM attestations?

Eligibility is being expanded throughout the year to include more types of services. Care providers will receive updates via internal communications as new categories become available.

15. How will I know when new services are added?

Notifications will be sent through:

- Provider newsletters
- Availability updates
- Direct outreach or care provider training sessions

16. Is this process available for urgent or expedited requests?

In some cases, yes. Check with your specific plan's guidelines. If a case is urgent, you may still need to submit clinical documentation promptly to support faster review.

Plan Participation

17. Is this process available for all health plans?

UM attestations currently apply to a wide range of our Medicaid, Medicare, and commercial plans. Check your market-specific guidelines or contact support for a complete list of participating health plans.