



BlueCross BlueShield
of North Carolina

MEDICARE

General Precertification Request

Please note, this form applies to Healthy Blue + MedicareSM (HMO D-SNP) offered by Blue Cross and Blue Shield of North Carolina.

Standard or expedited:			
An expedited request for a determination is a request in which waiting for a decision under the standard time frame could place the member's life, health or ability to regain maximum function in serious jeopardy.			
<input type="checkbox"/> Standard request		<input type="checkbox"/> Expedited request	
Member information			
Member name		Date of birth	
Insurance ID number		Phone	
Provider information			
Ordering provider name		Provider ID	
Ordering provider specialty			
Address			
Phone		Fax	
Rendering provider name		Provider ID	
Address			
Phone		Fax	
Facility information			
Facility name		Facility ID number	
Facility address			
Date/date range of service		Place of service: <input type="checkbox"/> Outpatient <input type="checkbox"/> Inpatient <input type="checkbox"/> Observation <input type="checkbox"/> Other	
Service(s) requested (CPT [®] codes)		If other, please describe	
Diagnosis (ICD if known)			

Note: Availity, LLC is an independent company providing administrative support services for Healthy Blue + Medicare providers on behalf of Blue Cross and Blue Shield of North Carolina.

<https://www.bluecrossnc.com/provider-home>

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Blue Cross and Blue Shield of North Carolina
Healthy Blue + Medicare (HMO D-SNP)
General Precertification Request

Precertification requests may be entered via **fax, phone or web**:

- **Fax** — Remit to **1-866-959-1537**.
- **Phone** — Please dial the Customer Service number on the back of the member's card. Identify yourself as a provider and follow the prompts to reach the correct precertification team (there are multiple prompts — select the prompt that fits the description for the authorization you plan to request).
- **Web** — Use the Availity Portal at **<https://www.availity.com>**.