

# Special Bulletin

Updated December 12, 2023  
October 18, 2023

For professional and facility providers

## Providers Encouraged to Submit Electronic Authorizations, Forms Removed

In anticipation of an upcoming change in West Virginia Law (Senate Bill 267\*), Highmark is encouraging all providers to submit prior authorization requests electronically using our provider portal (either [Availity](#)<sup>®</sup> or [NaviNet](#)<sup>®</sup>) – and for pharmacy requests – through [CoverMyMeds](#). Submitting electronically allows for faster reviews and greater transparency around the status of authorization requests.

On **December 1, 2023**, Highmark removed prior authorization forms from the West Virginia [Provider Resource Center](#) (PRC). The removal of the forms will not impact a provider's ability to submit a prior authorization request by phone or fax. However, beginning **July 1, 2024**, all authorization requests will need to be submitted via our provider portal – which is a requirement of West Virginia SB 267\*.

### Education and Training

Highmark will conduct outreach to ensure providers know how to successfully use the provider portal for authorization requests as well as workflows within the Predictal<sup>™</sup> Auth Automation Hub – which enables offices to submit, update, and query these authorization requests.

The following NaviNet authorization submission user guides are currently available on the PRC:

- [Non-Urgent Inpatient Authorization Submission Guide](#)
- [Urgent Inpatient Authorization Submission Guide](#)
- [Outpatient Authorization Submission Guide](#)
- [Helion Arc Authorization Submission Guide](#)

On **December 11, 2023**, we added authorization submission guides for requests submitted through Availity.

- [Inpatient Authorization Submission \(Both Urgent and Non-Urgent\)](#)
- [Outpatient Authorization Submission](#)

Additional information regarding authorization submission can be found on the PRC by clicking **AUTHORIZATIONS** in the left-hand menu and then Procedures/Service Requiring Authorization.

## Tips for Submitting a Prior Authorization Request

When submitting a prior authorization request, be sure to include:

- Patient name, date of birth, and ID/UMI (with prefix)
- Name of requesting provider / contact person
- Requesting provider NPI and BSID
- Requesting provider address, phone number, and fax back number
- Primary diagnosis code(s) and description(s)
- Procedure/service CPT code(s)
- Type of service requested
  - Examples: Inpatient Planned - Elective, Inpatient Planned – Continued Stay, Inpatient Urgent – Initial, Inpatient Urgent – Continued Stay, Outpatient Planned Surgery, Home Health, Skilled Nursing Facility Transfer, Inpatient Rehab Facility Transfer, Long-Term Acute Care Transfer, Physical Therapy, Speech Therapy, Occupational Therapy, Durable Medical Equipment (DME), Hospice, Other Ancillary Service/Procedure
- Start of care date
- Number of requested visits/units (if applicable)
- Facility name, NPI, BSID, and address
- Admitting/servicing provider's name, NPI, BSID, and address

## Provider Portal Transition

As a reminder, Highmark is transitioning its provider portal from NaviNet to Availity. If you/your office has access to Availity, please use that portal for all your transactions, including submitting prior authorization requests. If you do not currently have access to Availity, review the [Frequently Asked Questions](#) on the PRC for information on registration timing and training.

If you need assistance regarding electronic authorization workflows, you can email us at [ElecAuthSubmit@highmark.com](mailto:ElecAuthSubmit@highmark.com).

*\*West Virginia Senate Bill 267 requires prior authorizations to be submitted via an electronic portal. For more information on the bill, visit <https://www.wvlegislature.gov>.*

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Availity is an independent company that contracts with Highmark to offer provider portal services.

NaviNet is a registered trademark of NaviNet Inc., which is an independent company that provides secure, web-based portal between providers and health insurance companies.

