



## General Precertification Request

Please note, this form applies to Healthy Blue + Medicare<sup>SM</sup> (HMO D-SNP) offered by Blue Cross and Blue Shield of North Carolina.

<b>Standard or expedited:</b>			
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 is in serious jeopardy.			
<input type="checkbox"/> Standard request		<input type="checkbox"/> Expedited request	
<b>Member information</b>			
Member name		Date of birth	
Insurance ID number		Phone	
<b>Provider information</b>			
Ordering provider name		Provider ID	
Ordering provider specialty			
Address			
Phone		Fax	
Rendering provider name		Provider ID	
Address			
Phone		Fax	
<b>Facility information</b>			
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 <sup>®</sup> 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>**.