How to Submit Medical Records for Medical Necessity Reviews (does not affect those records that will continue to be requested by our Medical Review Staff)

When you've identified a service, procedure or supply that may require medical records to determine medical necessity, please submit the medical records in advance of filing the claim*. By sending the records first, Blue Cross NC will be able to locate and match the supporting medical records to the claim. Submitting the claim before the medical records are received by Blue Cross NC will create the potential risk of the claim being processed and denied due to missing medical necessity information. Blue Cross NC can accept medical records to support claims of medical necessity, which have not yet been processed by Blue Cross NC via the following methods: FAX, certified mail or via the secure on-line message system ProviderLink (Please speak with your Provider Service Consultant for more information on this application).

To remain compliant to HIPAA Minimum Necessary regulations, providers should not submit medical records for CPT, HCPCS or Revenue Code that are not listed on Blue Cross NC’s listings for "Codes by procedure types requiring medical records submissions” and “ICD-10 Diagnosis Codes to be filed in conjunction with Revenue Code 0360, 0272, 0278 and 0922 and requiring medical records submissions” (Note 1). All other medical records received for codes not included on these lists will be subjected to Blue Cross NC’s un-solicited medical record processes.

Submitting Medical Records via FAX

Please use the following instructions for determining the HIPAA compliant processes, which best align with the number of pages contained in the medical records to be submitted by fax for a patient’s claim.

Steps required to submit “pro-active” medical records via fax:

1) Create a “fax cover sheet” containing the following information:
   a. The provider’s name and NPI / Provider ID
   b. The patient’s name
   c. The patient’s Date-of-Birth
   d. The Blue Cross NC patient’s ID Number (including the Prefix and Suffix, e.g., YPPW1234567801)
   e. The patient’s Date-of-Service
   f. Provider contact information (Blue Cross NC will contact the individual listed if we have any questions about the records received)
   g. Subject: Pro-Active Records

2) Send the records to Blue Cross NC by fax after determining the number of pages to be faxed;
   a. If less than 300 pages: Fax the cover sheet followed by the medical record to 1-919-765-1920.
   b. If greater than 300 pages: Mail the fax cover sheet followed by the medical records together to Blue Cross NC at P.O. Box 610, Durham, NC 27702.

Submitting Medical Records via Certified Mail

1) Create a “fax cover sheet” as described above.
2) Mail the fax cover sheet followed by the medical records together to Blue Cross NC at P.O. Box 610, Durham, NC 27702.

For providers with an active ProviderLink On-Line Contract

Please use the following instructions for submitting “pro-active” medical records via ProviderLink On-line.

1) Providers can use the ‘on-line’ message feature to submit medical records independent of the claims. Please identify the message type by entering “Pro-active Records” as the message subject.
2) Please ensure that the following information is clearly documented in the ProviderLink On-Line message header:
   a. The patient’s name
   b. The Blue Cross NC patient’s ID Number (including the Prefix and Suffix) in the Unique ID field
   c. The patient’s Date-of-Birth
   d. The Date-of-Service
   e. Sender’s name and direct phone number on the message header (Blue Cross NC will contact the individual listed if there are any question about the received document).
3) Please do not “Request a Reply” (Note 2) to the message when submitting the pro-active medical records. Blue Cross NC recommends utilizing the Audit Trail feature within the application. Contact Covisint for additional information about “Audit Trail” features.
4) Submit the medical records to the corresponding ProviderLink On-Line “Facility” Post Claim mailbox that is associated with the patient’s Insurance coverage type, e.g., Commercial, SHP.

Note 1: Blue Cross NC accepts medical records in advance of processing claims reporting unlisted services provided to Medicare Advantage members.

Note 2: Requesting a Reply causes the patients’ files to be assigned to a specific work list within the Blue Cross NC application and will cause additional and unnecessary incoming messages within our system.