

October 2018

Authorization Enhancement to Add New Fields in Availity

Beginning **October 22, 2018**, the Inpatient and Outpatient Authorization and Auth/Referral Inquiry screens in Availity^{®1} will reflect the following enhancements for Florida Blue:

Modifiers

When additional information is needed to advise how, where or why a service or procedure will be performed, a 2-digit modifier can further describe the service or procedure.

Florida Blue will begin accepting one modifier per procedure code for inpatient and outpatient authorizations. The Availity screen allows up to 16 procedure codes per request. The modifier will be an optional field. The authorization and inquiry response screens will reflect the modifier, if used.

National Drug Code

The 11-digit National Drug Code (NDC) will now be accepted on outpatient authorizations.

Procedure Code Quantity, Qualifier and Frequency

Optional fields are being added to provide additional details for Medical Pharmacy around drug quantity, frequency and duration. This will improve overall payment accuracy.

(continued next page)

¹Availity, LLC is a multi-payer joint venture company. For more information or to register, visit availity.com.

Outpatient Request Screen Changes

Current Outpatient Authorization Screen:

Procedure Code 1: ? Type: ▼

Quantity: ?

From / /  To / / 

MM DD YYYY MM DD YYYY

New Outpatient Authorization Screen:



* Procedure Code 1: ? Type:

Modifier:

Service Quantity: Type: ▼

Time Period Quantity: Qualifier: ▼

Timeframe Frequency: Qualifier: ▼

From / /  To / / 

MM DD YYYY MM DD YYYY

Outpatient Authorization

Values for Fields: Service Quantity, Time Period Quantity and Timeframe Frequency

Service Quantity	
Inpatient	Outpatient
Day(s)	Milliliter(s)
Unit(s)	Unit(s)
Milligram(s)	Milligram(s)
Visit(s)	Visit(s)

Time Period Quantity
New Fields
Hour(s)
Day(s)
Year(s)
Visit(s)
Month(s)
Week(s)

Timeframe Frequency
New Fields
Day(s)
Month(s)
Week(s)

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Inpatient Request Screen Changes

Current Inpatient Authorization Screen:

Procedure Code 1: ? Type: ▼

Quantity: ?

From / / To / /

MM DD YYYY MM DD YYYY

New Inpatient Authorization Screen:

Procedure Code 1: ? Type: ▼

Modifier:

Service Quantity: Type:

- Day(s)
- Unit(s)
- Milligram(s)
- Visit(s)

Authorization Response Example

Additional Services Information

Procedure Code(s): 99214 **Date of Service :** 12/23/2012 - 12/23/2012
Status: No Authorization Required
Service Delivery: 2 Day(s) for 21 Day(s)

Procedure Code(s): 99215 **Date of Service :** 12/23/2012 - 12/23/2012
Status: No Authorization Required
Service Delivery: 3 Milligram(s) per every 3 Day(s)

Procedure Code(s): 42900, 25 **Date of Service :** 12/23/2012 - 12/23/2012
Status: Pending
Status Reason: Requires Medical Review
Reference Number: REF13135730
Service Delivery: 1 Visit(s) per every 3 Day(s) for 21 Day(s)

See "Service Delivery" samples of:

- Service Quantity
- Time Period Quantity
- Timeframe Frequency

Example of Modifier Submitted:
 Procedure Code, Modifier

For details regarding Florida Blue's referral and authorization requirements, please refer to the [Manual for Physicians and Providers](#) on our website at floridablue.com.