

Automatic Approval Process

HMO Policy and Procedure

BLUE CROSS AND BLUE SHIELD OF ILLINOIS POLICY

DEPARTMENT: Network Provider Performance	POLICY NUMBER: Administrative 53	ORIGINAL EFFECTIVE DATE : 05/01/2000
POLICY TITLE: Automatic Approval Process		EFFECTIVE DATE: 12/01/2022
		LAST REVISION DATE: 12/01/2020
EXECUTIVE OWNER: DSVP, IL	BUSINESS OWNER:	LAST REVIEW DATE: 12/01/2022
Health Care Delivery	Manager, Provider	
	Performance	

I. SCOPE

This Policy applies to the following lines of business and products:

Line of Business / Product Scope / Plan Scope/Contract Number (if applicable)	
HMO Commercial	х
HMO Exchange	х
PPO Commercial	
PPO Exchange	

II. PURPOSE

- To allow appropriate group approved services performed at facilities to be automatically processed electronically through BCBSIL claims processing system.
- To reduce the volume of paper claims.
- To increase electronic submissions by the facility to BCBSIL while also reducing the delay in claims processing by eliminating the need to contact the IPA for approval via the 095 report.

III. POLICY

Blue Cross and Blue Shield of Illinois (BCBSIL) has established a voluntary automatic approval process to pay claims. This voluntary agreement is between the Medical Group/Individual Practice Association and Physician Hospital Organization (hereinafter the "IPAs"), participating facility and BCBSIL (Expedited Approval Agreement attached).

IV. CONTROLS/MONITORING

Line of Business and/or Area	Control Requirements
HMO	Controls are described in Policy and Procedure

V. RELATED DOCUMENTS

Automatic Approval Process – Procedure 53A

VI.IMPACTED BUSINESS AREAS

HMO ContractingHMO Financial AnalysisHMO NetworkHMO OperationsHMO Service Centers including claims, eligibility etc.

VII. POLICY REVIEWERS

Person Responsible for Review	Title	Date of Review
Mary Ellen Merbeth	HMO Provider Network Consultant	11/3/2021
HMO Service Center Claims Team	HMO Coordinator/Supervisor	11/3/2021
Danielle Washington	HMO Provider Network Consultant	11/2/2022
HMO Service Center Claims Team	HMO Coordinator/Supervisor	11/2/2022

VIII. POLICY REVISION HISTORY

Description of Changes	Revision Date
Split Template	11/03/2021

IX. POLICY APPROVALS

Company, Division, Department and/or	By: Name	Title	Approval date
Committee BCBSIL P&P			11/18/2021
BCBSIL P&P			11/17/2022