Anthem Blue Cross

Reach a Nurse Directly for Prior Authorizations that Require Clinical Reviews

Effective July 15, providers can speak to a nurse directly to request a prior authorization requiring clinical review for an individual Medicare Advantage members. Just call the number of the back of member ID card for prior authorization of services authorized by Anthem Blue Cross. The nurse may be able to make the clinical review immediately if the necessary clinical information is available. We hope this increased access to clinicians will streamline the prior authorization process for you and for our members.

Please use the phone numbers on the back of the member ID card and fax numbers published on our provider portal to reach us. Some fax numbers may be updated at a later date.

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