

Bright HealthCare Utilization Management Overview

** NO ACTIVE Membership for IFP or SG plans for all States except Texas as of 07/01/2023. Validate Patient's insurance coverage prior to submitting or calling Bright Health.

Review the table below to determine where and how to submit an authorization depending on the member's state and the service type.

Plan Type	IFP and Small Group (SG) Alabama, Arizona, Colorado, Florida, Illinois, Nebraska, North Carolina, Oklahoma, South Carolina, and Tennessee		Individual and Family Plans (IFP) Texas (Off-Exchange)
Member State			
Service Type	Medical, surgical, behavioral health services	Diagnostic/advanced imaging, radiation oncology, genetic testing	All Services
Submit authorization requests to	Bright HealthCare	Carelon Medical Benefits Management	Bright HealthCare
How to submit authorization requests	✓ Electronic - accepted✓ Fax or phone - not accepted	Electronic or phone - accepted Fax - not accepted	Fax or phone or electronic - accepted
	Submit authorizations electronically using Bright HealthCare's online portal at Availity.com or brighthealthcare.com/provider/ utilization-management.	Submit authorizations electronically using the ProviderPortal at www.providerportal.com	Submit authorizations electronically using Bright HealthCare's online portal at Availity.com. Submit authorizations by fax at (877) 438-6832.
	** Non-contracted providers call the Provider Services phone number below if you have an authorization to submit.		Fax forms are available at Availity.com or brighthealthcare.com/ provider/ utilization-management.
Contact Information	Provider Services phone: (855) 521-9364	Provider Services phone: (833) 305-1802	Provider Services phone: (844) 926-4525

^{**} Timely filing for authorizations for IFP and Small Group members is 180 days from the date of service(s) for actively enrolled members. If greater than 180 days, authorization requests will be administratively denied due to timely filing.