

PROVIDER BULLETIN

PROVIDER INFORMATION



February 1, 2019

Update: New CMS Regulation for Preclusion List

The information in this bulletin replaces Provider Bulletin P61-18 titled New CMS Regulation for Preclusion List change that was published on November 1, 2018.

The purpose of this Provider Bulletin is to inform providers that the Centers for Medicare & Medicaid Services (CMS) have a new Medicare Regulation (CMS-4182-F Final Rule) that applies to the Medicare Advantage (MA) items and services or Part D drugs furnished or prescribed to Medicare beneficiaries and is effective April 1, 2019. As a result of the new CMS regulations, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will deny payment for a health care item or service for any Subscriber, in any network if the health care item or service was furnished by an individual or entity on the CMS Preclusion List. Blue Cross will initiate denial of payment upon 60 days' notice to Blue Cross of Provider's addition to CMS Preclusion List.

Questions?

If you have questions, please contact provider services at **(651) 662-5200** or **1-800-262-0820**