

# PROVIDER BULLETIN

## PROVIDER INFORMATION



June 3, 2019

### Updated Minnesota Health Care Programs and Minnesota Senior Health Options Prior Authorization, Notifications, and Medical Policy Requirements

Effective August 1, 2019, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will be updating its government programs medical policy and prior authorization/precertification/notification lists. The lists clarify medical policy, prior authorization, and notification requirements for the Minnesota Health Care Programs (Prepaid Medical Assistance Program, MinnesotaCare, and Minnesota Senior Care Plus) and Minnesota Senior Health Options (MSHO) products.

As stewards of health care expenditures for our subscribers, we are charged with ensuring they receive appropriate, quality care while also maintaining overall costs. The prior authorization process ensures that the health service or drug being proposed is medically necessary and reflective of evidence-based medicine and industry standards prior to treatment. This process helps us manage the cost and quality of care appropriately for our members.

#### Durable Medical Equipment (DME) Prior Authorization Update

The following new prior authorization requirements **will be applicable** to subscriber claims on or after August 1, 2019.

Code	Code description	Policy source	Prior authorization required	
			Medicaid	MSHO
A6509	Compression burn garment, upper trunk to waist including arm openings (vest), custom fabricated	MHCP	Yes	Yes
A6511	Compression burn garment, lower trunk including leg openings (panty), custom fabricated	MHCP	Yes	Yes
A6549	Gradient compression stocking, not otherwise specified	MHCP	Yes	Yes
A9277	Transmitter; external, for use with interstitial continuous glucose monitoring system	MHCP	Yes	Yes
A9278	Receiver (monitor); external, for use with interstitial continuous glucose monitoring system	MHCP	Yes	Yes
A9999	Miscellaneous DME supply or accessory, not otherwise specified or HIPPS code Default Code - used for informational-only	MHCP	Yes	Yes
E0619	Apnea monitor, with recording feature	MHCP	Yes	Yes

Code	Code description	Policy source	Prior authorization required	
			Medicaid	MSHO
E0625	Patient lift, bathroom or toilet, not otherwise classified	MHCP	Yes	Yes
E0641	Standing frame system, multi-position (e.g., 3-way stander), any size including pediatric, with or without wheels.	MHCP	Yes	Yes
E2300	Power wheelchair accessory, power seat elevation system	MHCP	Yes	Yes
E2301	Wheelchair accessory, power standing system, any type	MHCP	Yes	Yes
E2331	Power wheelchair accessory, attendant control, proportional, including all related electronics and fixed mounting hardware	MHCP	Yes	Yes
E2510	Speech generating device, synthesized speech, permitting multiple methods of message formulation and multiple methods of device access	MHCP	Yes	Yes
E2512	Accessory for speech generating device, mounting system	MHCP	Yes	Yes
E2609	Custom fabricated wheelchair seat cushion, any size	MHCP	Yes	Yes
E2617	Custom fabricated wheelchair back cushion, any size, including any type mounting hardware	MHCP	Yes	Yes
E8000	Gait trainer, pediatric size, posterior support, includes all accessories and components	MHCP	Yes	Yes
E8001	Gait trainer, pediatric size, upright support, includes all accessories and components	MHCP	Yes	Yes
E8002	Gait trainer, pediatric size, anterior support, includes all accessories and components	MHCP	Yes	Yes
K0108	Wheelchair component or accessory, not otherwise specified	MHCP	Yes	Yes
K0884	Power wheelchair, group 4 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds	MHCP	Yes	Yes
L0999	Addition to spinal orthotic, not otherwise specified	MHCP	Yes	Yes
L1499	Spinal orthotic, not otherwise specified	MHCP	Yes	Yes
L5999	Lower extremity prosthesis, not otherwise specified	MHCP	Yes	Yes
L8692	Auditory Osseointegrated Device, External Sound Processor, Used Without Osseointegration, Body Worn, Includes Headband	MHCP CG-SURG-82	Yes	Yes

### Behavioral Health (BH) Prior Authorization (PA) Claims Denial Update

Blue Cross recently identified that certain codes, which should not have required a PA for BH services, have denied for no PA. The codes listed below have been **removed** from requiring PA effective **April 1, 2019**.

An update to the system is in progress, and any claims that denied incorrectly for no PA will be reprocessed.

<b>Code</b>	<b>Behavioral health prior authorization requirement</b>
0362T	No Prior Auth required effective 04/01/2019
97151	No Prior Auth required effective 04/01/2019
99366	No Prior Auth required effective 04/01/2019
H0025	No Prior Auth required effective 04/01/2019
H0032	No Prior Auth required effective 04/01/2019
H0038	No Prior Auth required effective 04/01/2019
H0040	No Prior Auth required effective 04/01/2019
H0045	No Prior Auth required effective 04/01/2019
H0046	No Prior Auth required effective 04/01/2019
H2014	No Prior Auth required effective 04/01/2019
H2015	No Prior Auth required effective 04/01/2019
H2027	No Prior Auth required effective 04/01/2019
S5145	No Prior Auth required effective 04/01/2019
T1016	No Prior Auth required effective 04/01/2019
T2023	No Prior Auth required effective 04/01/2019

In addition, the BH notification requirement has been **removed** for the following codes effective **April 1, 2019**.

<b>Code</b>	<b>Service description</b>
H0038	Self-help/peer services, per 15 minutes — Level I
H0038 HA	Certified family peer specialist services / Family Peer Services
H0038 HA HQ	Certified family peer specialist services — Group setting
H0038 HQ	Self-help/peer services, per 15 minutes — Group
H0038 U5	Self-help/peer services, per 15 minutes — Level II
H0040	Assertive community treatment program, per diem
H0040 HA	Assertive community treatment program, per diem (Youth)
H0040 HK	Assertive community treatment program, per diem (Forensic)
H2015	Comprehensive community support services, per 15 minutes
H2027	Psychoeducational service, per 15 minutes
H2027 HQ	Family psychoeducation — Recipient group (with multiple recipients)
H2027 HQ HR	Family psychoeducation — Family group (with multiple families with individuals present)
H2027 HQ HS	Family psychoeducation — Family group (with multiple families, individuals not present)
H2027 HR	Family psychoeducation — Recipient and family (with a single recipient and their family)
H2027 HS	Family psychoeducation — Family (with a single-family individual not present)

## Medical Prior Authorization (PA) Claims Denial Update

Blue Cross recently identified that certain codes, which should not have required a PA for services, have denied for no PA. The codes listed below have been **removed** from requiring PA effective **April 1, 2019**.

An update to the system is in progress, and any claims that denied incorrectly for no PA will be reprocessed.

Code	Medical prior authorization requirement
99511	No Prior Auth required effective 04/01/2019
S9123	No Prior Auth required effective 04/01/2019
S9124	No Prior Auth required effective 04/01/2019
S9338	No Prior Auth required effective 04/01/2019
S9353	No Prior Auth required effective 04/01/2019
S9379	No Prior Auth required effective 04/01/2019
S9494	No Prior Auth required effective 04/01/2019
S9497	No Prior Auth required effective 04/01/2019
S9500	No Prior Auth required effective 04/01/2019
S9501	No Prior Auth required effective 04/01/2019
S9502	No Prior Auth required effective 04/01/2019
S9503	No Prior Auth required effective 04/01/2019
S9504	No Prior Auth required effective 04/01/2019
S9542	No Prior Auth required effective 04/01/2019
S9810	No Prior Auth required effective 04/01/2019
T1022	No Prior Auth required effective 04/01/2019

### Where do I find the current government programs *Pre-Certification/Pre-Authorization/Notification List*?

Go to <https://www.bluecrossmn.com/providers>:

- Under *Tools & Resources*, select **Medical Policy**, and read/accept the *Blue Cross Medical Policy and UM Statement*.
- Select the + next to *Utilization Management*, and under the *Precertification Lists* select the ***MN Government Programs Pre-Certification/Pre-Authorization/Notification List***

**OR**

Go to <https://www.bluecrossmn.com/providers>:

- Under *Tools & Resources*, select **Migration of Minnesota Health Care Programs**
- Select the + next to *Prior Authorizations*, and select the ***Prior Authorization Grid (PDF)***

### Where do I find the current government programs medical policy grid?

Go to <https://www.bluecrossmn.com/providers>:

- Under *Tools & Resources*, select **Migration of Minnesota Health Care Programs**
- Select the + next to *Medical Policies* and select the ***MHCP Medical Policy Grid (PDF)***

### Where can I access medical policies?

- **MN DHS (MHCP) Policies:**  
[http://www.dhs.state.mn.us/main/idcplg?IdcService=GET\\_DYNAMIC\\_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16\\_157386](http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_157386)
- **Blue Cross Policies:**  
<https://www.bluecrossmn.com/providers/medical-policy-and-utilization-management>

- **Amerigroup Policies:**
  - [https://medicalpolicies.amerigroup.com/am\\_search.html](https://medicalpolicies.amerigroup.com/am_search.html)
  - <https://www.anthem.com/pharmacyinformation/clinicalcriteria>

**Please note that the Precertification Look-Up Tool (PLUTO) will not be available for prior authorization look up.**

**Questions?** If you have questions, please contact Blue Cross Provider Services at **1-866-518-8448**.

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