PROVIDER BULLETIN PROVIDER INFORMATION



November 2, 2020

Updated Minnesota Health Care Programs and Minnesota Senior Health Options (MSHO) Prior Authorization and Medical Policy Requirements

Effective January 2, 2021, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will be updating its government programs medical policy and pre-authorization/pre-certification/notification lists. The lists clarify medical policy, prior authorization, and notification requirements for the Minnesota Health Care Programs (Families and Children, MinnesotaCare, and Minnesota Senior Care Plus) and Minnesota Senior Health Options (MSHO) products.

As stewards of healthcare 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.

The following policies have transitioned to new policy numbers, with changes in clinical criteria, and will be applicable to subscriber claims on or after January 2, 2021.

New Policy #	Prior Policy #	Policy Name	Prior Authorization Required	
1 (0 () 2 0220 <i>j</i> 11		2 0210 y 2 (0 2220	Medicaid	MSHO
ANC.00007	MHCP ANC.00007	Cosmetic and Reconstructive Services: Skin Related	Yes	Yes
ANC.00008	MHCP ANC.00008	Cosmetic and Reconstructive Services of the Head and Neck	Yes	Yes
ANC.00009	MHCP ANC.00009	Cosmetic and Reconstructive Services of the Trunk and Groin	Yes	Yes
SURG.00129	MHCP SURG.00129	Oral, Pharyngeal and Maxillofacial Surgical Treatment for Obstructive Sleep Apnea or Snoring	Yes	Yes
ING-CC-0001	MHCP ING-CC-0001	Erythropoiesis Stimulating Agents	Yes	Yes
ING-CC-0096	МНСР	Asparaginase, not otherwise specified	Yes	Yes

The following prior authorization requirements will be archived and **will not be applicable** under the medical benefit plan to subscriber claims on or after **January 2, 2021**. However, the policies will remain in effect.

Policy #	Policy Name		Prior Authorization Required	
roney "	I oney rame		MSHO	
MHCP	Vyxeos (liposomal daunorubicin and cytarabine)	Yes	Yes	
МНСР	Leucovorin calcium	Yes	Yes	
МНСР	Dacogen (decitabine)	Yes	Yes	
МНСР	Doxorubicin HCl	Yes	Yes	
МНСР	Trisenox (arsenic trioxide)	Yes	Yes	
МНСР	Clolar (clofarabine)	Yes	Yes	
МНСР	BCG (intravesical)	Yes	Yes	
МНСР	Bleomycin sulfate	Yes	Yes	
МНСР	Carboplatin	Yes	Yes	
МНСР	Carmustine	Yes	Yes	
МНСР	Cisplatin, powder or solution	Yes	Yes	
МНСР	Cladribine	Yes	Yes	
МНСР	Cyclophosphamide	Yes	Yes	
МНСР	Cytarabine liposome	Yes	Yes	
MHCP	Cytarabine	Yes	Yes	
МНСР	Dactinomycin	Yes	Yes	
МНСР	Dacarbazine	Yes	Yes	
МНСР	Daunorubicin	Yes	Yes	
МНСР	Epirubicin HCl	Yes	Yes	
МНСР	Etoposide	Yes	Yes	
МНСР	Fludarabine phosphate	Yes	Yes	
МНСР	Fluorouracil	Yes	Yes	
МНСР	Floxuridine	Yes	Yes	
МНСР	Infugem (gemcitabine HCl)	Yes	Yes	
МНСР	Irinotecan liposome	Yes	Yes	
МНСР	Irinotecan	Yes	Yes	
МНСР	Ifosfamide	Yes	Yes	
МНСР	Idarubicin HCl	Yes	Yes	

Policy #	Policy Name	Prior Authorization Required	
1 oney #	1 oncy Name	Medicaid	
MHCP	Mechlorethamine HCl (nitrogen mustard)	Yes	Yes
MHCP	Melphalan HCl	Yes	Yes
MHCP	Methotrexate sodium	Yes	Yes
MHCP	Nelarabine	Yes	Yes
MHCP	Oxaliplatin	Yes	Yes
МНСР	Paclitaxel	Yes	Yes
МНСР	Pentostatin	Yes	Yes
МНСР	Mitomycin	Yes	Yes
МНСР	Mitoxantrone HCl	Yes	Yes
МНСР	Pralatrexate	Yes	Yes
МНСР	Streptozocin	Yes	Yes
МНСР	Temozolomide	Yes	Yes
МНСР	Thiotepa	Yes	Yes
МНСР	Topotecan	Yes	Yes
МНСР	Valrubicin, intravesical	Yes	Yes
МНСР	Vinblastine sulfate	Yes	Yes
МНСР	Vincristine sulfate	Yes	Yes
МНСР	Vincristine sulfate liposome	Yes	Yes
МНСР	Vinorelbine tartrate	Yes	Yes
МНСР	Porfimer sodium	Yes	Yes

Where do I find the current government programs Pre-Certification/Pre-Authorization/Notification list?

Go to https://provider.publicprograms.bluecrossmn.com/minnesota-provider/resources/prior-authorization

OR

Go to providers.bluecrossmn.com

- Under Tools & Resources, select "Minnesota Health Care Programs site"
- Under Resources, select "Prior Authorization Requirements" and scroll down to "Related Information" to select "Prior Authorization Grid"

Where do I find the current government programs Medical Policy Grid?

Go to https://provider.publicprograms.bluecrossmn.com/minnesota-provider/resources/provider-manuals-and-guides

Click on "Medical Policies and UM Guidelines"

OR

Go to providers.bluecrossmn.com

- Under Tools & Resources, select "Minnesota Health Care Programs site"
- Under Resources, select "Manuals and Guides"
- Click on "Medical Policies and UM Guidelines"

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

• Blue Cross Policies:

https://www.bluecrossmn.com/providers/medical-policy-and-utilization-management

Amerigroup Policies:

https://provider.publicprograms.bluecrossmn.com/minnesota-provider/medical-policies-and-clinical-guidelines

AND

https://www.anthem.com/pharmacyinformation/clinicalcriteria

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

Questions?

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