

# PROVIDER BULLETIN

## PROVIDER INFORMATION



April 1, 2020

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

Effective June 1, 2020, 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 health care expenditures for our members, 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 **new** policies and/or prior authorization requirements **will be applicable** to member claims on or after **June 1, 2020**.

Policy #	Policy Name	New Policy	Prior Authorization Required	
			Medicaid	MSHO
CG-MED-46	Electroencephalography and Video Electroencephalographic Monitoring	No	Yes	Yes
CG-SURG-79	Implantable Infusion Pumps	Yes	Yes	Yes

The following policies have transitioned to new policy numbers, with changes in clinical criteria, and **will be applicable** to member claims on or after **June 1, 2020**.

New Policy #	Prior Policy #	Policy Name	Prior Authorization Required	
			Medicaid	MSHO
CG-DME-20 MHCP	MHCP	Orthopedic Footwear	Yes	Yes

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Amerigroup Partnership Plan, LLC, an independent company, is delegated by Blue Plus to provide certain administrative services to Blue Plus health plans.

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The following prior authorization requirements will be removed and **will not be applicable** under the medical benefit plan to member claims on or after **June 1, 2020**. However, the policies will remain in effect.

Policy #	Policy Name	Prior Authorization Required	
		Medicaid	MSHO
MHCP	Home Renal Dialysis	Yes	Yes
MHCP	Growth Factors, Silver-based Products and Autologous Tissues for Wound Treatment, Soft Tissue Grafting, and Regenerative Therapy	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>

**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”

**Where can I access medical policies?**

- **MN DHS (MHCP) Policies:**  
[http://www.dhs.state.mn.us/main/ideplg?IdcService=GET\\_DYNAMIC\\_CONVERSION&RevisionSelecti onMethod=LatestReleased&dDocName=dhs16\\_157386](http://www.dhs.state.mn.us/main/ideplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelecti onMethod=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 Lookup 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**.