PROVIDER BULLETIN PROVIDER INFORMATION



June 1, 2019

Musculoskeletal Program Updates for Fully Insured Commercial and Medicare Advantage Subscribers – eviCore Healthcare Specialty Utilization Management (UM) Program

eviCore has released clinical guideline updates for their Musculoskeletal program. Updates to these programs will become **effective beginning August 1, 2019:**

Musculoskeletal guideline updates will post on June 1, 2019.

The following interventional pain and large joint guidelines have updated:

- CMM-200: Epidural Steroid Injections
- CMM-203: Sacroiliac Joint Injections
- CMM-208: Radiofrequency Ablation
- CMM-210: Implantables Intrathecal Drug Delivery Systems
- CMM-211: Spinal Cord Stimulators
- CMM-308: Thermal Intradiscal Procedures
- CMM-312: Knee Arthroscopic and Open Procedures
- CMM-313: Hip Replacement/Arthroplasty
- CMM-314: Hip Surgery Arthroscopic and Open
- CMM-400: Anesthesia Services for Interventional Pain Procedures

The following spine guidelines have updated:

- CMM-600: Preface to Spine Surgery Guidelines
- CMM-601: Anterior Cervical Discectomy and Fusion
- CMM-602: Cervical Total Disc Arthroplasty
- CMM-603: Electrical and Low Frequency Ultrasound Bone Growth Stimulation (Spine)
- CMM-604: Posterior Cervical Decompression (Laminectomy/Hemilaminectomy/ Laminoplasty) with or without Fusion
- CMM-605: Cervical Microdiscectomy
- CMM-606: Lumbar Microdiscectomy (Laminotomy, Laminectomy, or Hemilaminectomy)
- CMM-607: Primary Vertebral Augmentation (Percutaneous Vertebroplasty/ Kyphoplasty) and Sacroplasty
- CMM-609: Lumbar Fusion (Arthrodesis)
- CMM-611: Sacroiliac Joint Fusion or Stabilization
- CMM-612: Grafts

eviCore's Musculoskeletal clinical guidelines are available on the Blue Cross website at providers.bluecrossmn.com

- To access the link, select "Medical Policy" under Tools and Resources, read and accept the Blue Cross Medical Policy Statement
- Click on the "+" (plus) sign next to "Medical and Behavioral Health Policies"
 - o Scroll down to locate the "Medical Policy Supporting Documents" section
- Click on "eviCore healthcare Specialty Utilization Management Clinical Guidelines" link
 - o Click on the "Resources" dropdown in upper right corner
 - o Click "Clinical Guidelines"
 - Select "Musculoskeletal Advanced Procedures" solution
 - Type "BCBS MN" (space is important) in 'Search by Health Plan'
 - o Click on "Future" tab
 - Select desired document

Products Impacted

This change only applies to:

- Individual subscribers
- Fully insured commercial subscribers
- Medicare Advantage subscribers

Members who do not require prior authorization through eviCore are:

- Blue Cross Commercial Self-Insured Members
- Blue Cross Federal Employee Program (FEP) Members
- Blue Plus Minnesota Health Care Programs Subscribers (Families and Children (F&C), MNCare, MSC+), SecureBlue (MSHO)
- Blue Cross Platinum Blue and Senior Gold Members

Group Number List

The 2019 Commercial Network Guide which includes a listing of the group numbers that will be utilizing eviCore, was updated on January 2, 2019. The list includes Medicare Advantage group numbers as well. The list will be updated on the second Tuesday of each month. However, due to new groups being added every month, providers should verify authorization requirements by using the Availity Authorization Portal for the most current and accurate information. If a group number is not on the list, the provider will need to verify PA requirements through the Availity Authorization Portal.

As a reminder, if a provider does not obtain a required prior authorization before rendering services, Blue Cross will deny claims as provider liability for lack of prior authorization.

To find a listing of all the group numbers that will be utilizing eviCore, the 2019 Commercial Network Guide has been updated with this information. To access the guide, go to providers.bluecrossmn.com and under "What's Inside" select "Education Center" then select "2019 Commercial Network Guide." You can also find it under "Tools and Resources", select "Medical Policy" and then acknowledge the Acceptance Statement, click on the "+" next to "Utilization Management", and select "see group numbers for members managed by eviCore" under the paragraph titled eviCore Healthcare Specialty Utilization Management.

To submit a PA Request to eviCore

Providers submit eviCore PA requests via our free Availity provider portal.

Instructions on how to utilize this portal are found on the Availity website. Providers need to reference the eviCore clinical guideline criteria, submit prior authorization request via Availity, and submit all applicable clinical documentation with the PA request. Failure to submit required information may result in review delays or denial of the request due to insufficient information.

Note: An approved PA does not guarantee coverage under a subscriber's benefit plan. Subscriber benefit plans vary in coverage and some plans may not provide coverage for certain services discussed in the medical policies.

Questions?

If you need to submit a PA by phone or need to speak to an eviCore representative call **844-224-0494**, 7:00 a.m. to 7:00 p.m. CST, Monday - Friday.