

# PROVIDER BULLETIN

## PROVIDER INFORMATION



July 7, 2016

### **New Prior Authorization Requirement for Lyme Disease: Diagnostic Testing and Intravenous Antibiotic Therapy**

Effective September 1, 2016, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) is implementing a prior authorization (PA) requirement for Lyme Disease: Intravenous Antibiotic Therapy.

As stewards of healthcare expenditures for our subscribers, Blue Cross is charged with ensuring the highest quality, evidence based care for our members. One method for doing so is through the prior authorization process. The primary purpose is to ensure that evidence based care is provided to our members, driving quality, safety, and affordability.

#### **Products Impacted**

This PA requirement applies to **all** lines of business.

#### **Medical Policy II-165-001**

For a full description of Blue Cross Medical Policy II-165-001 for Lyme Disease: Diagnostic Testing and Intravenous Antibiotic Therapy, refer to the Blue Cross Medical and Behavioral Health Policy section of our website. To access the website, go to **providers.bluecrossmn.com**. Under Tools & Resources, select “Medical Policy”, read and accept the Blue Cross Medical Policy Statement, and then select the “+” (plus) sign next to “Medical and Behavioral Health Policies.”

Medical Policy changes are also communicated in the Provider Press, which is a quarterly publication that is posted on the website in March, June, September, and December. All Medical Policies reviewed by the Blue Cross Medical and Behavioral Health Policy Committee during the previous three months are listed under Medical and Behavioral Health Policy Updates. To access the Provider Press, go to **providers.bluecrossmn.com**. Under Forms & Publications, select “Provider Press” from the drop-down list of categories.

#### **Additional Information**

Blue Cross and Blue Shield of Minnesota Medical Policies apply generally to all Blue Cross and Blue Plus plans and products. Benefit plans vary in coverage and some plans may not provide coverage for certain services addressed in the Medical Policies.

Administration of benefits is subject to all terms and conditions of the member’s summary plan description (SPD). As applicable, review the provisions relating to a specific coverage determination, including exclusions and limitations. Blue Cross reserves the right to revise, update and/or add to its Medical Policies at any time without notice.

#### **Questions?**

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