

PROVIDER BULLETIN

PROVIDER INFORMATION



November 15, 2016

Revised: Prior Authorization for Acupuncture Services for Government Program Subscribers

*The information in this Bulletin replaces Provider Bulletin P31-16, published on July 26, 2016. The reason for this revision is to clarify that in order to align with the Minnesota Health Care Programs (MHCP) Provider Manual the changes requiring a prior authorization after 20 **units** (not services) will become effective January 1, 2017.*

Effective January 1, 2017, acupuncture services provided to Blue Plus Blue Advantage Prepaid Medical Assistance Program (PMAP) and MinnesotaCare Subscribers will require prior authorization (PA) after 20 **units**. One unit equals a 15 minute increment of service. Acupuncture services will be reviewed using the criteria established in the MHCP Provider Manual, Acupuncture Services chapter.

Minnesota Senior Care Plus (MSC+) and SecureBlueSM (HMO SNP) subscribers are only eligible for 20 acupuncture units. Acupuncture visits for MSC+ and SecureBlue subscribers beyond 20 units are ineligible and will not be covered or reviewed for PA.

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 not impacted

Federal Employee Program[®] (FEP), Platinum Blue (Medicare Cost), Medicare Supplement (Senior Gold, Basic Medicare Blue and Extended Basic Blue) subscribers are not impacted.

Questions?

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