

PROVIDER BULLETIN

PROVIDER INFORMATION



December 8, 2016

Organization Determination Additions for Platinum Blue - Effective January 23, 2017

Effective January 23, 2017, the following items will be added to the prior authorization list for Platinum Blue subscribers.

- Bone Growth Stimulators
- Communication Devices
- Continuous Glucose Monitors
- Hospital Beds; all types – rental and purchase
- Insulin pumps and replacements
- Knee microprocessor
- Scooters
- Power Wheelchairs (also known as power mobility devices)
- Vest percussor
- Manual Wheelchair

Medicare National and Local Coverage Determinations (NCD & LCD) criteria will be used to make a determination on the request for the above services.

As stewards of healthcare expenditures for our subscribers, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) is charged with ensuring the highest quality, evidence based care for our subscribers. 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 subscribers, driving quality, safety, and affordability.

Items/services not reviewed for an organizational determination prior to the rendering of the item/service that adjudicate as not covered will deny to provider liability, despite the submission of the GY modifier on the claim.

Products not impacted:

All Commercial lines of business, Federal Employee Program® (FEP), Prepaid Medical Assistance Program(PMAP), MinnesotaCare, Minnesota Senior Care Plus (MSC+), SecureBlueSM (HMO SNP), Medicare Supplement (Senior Gold, Basic Medicare Blue and Extended Basic Blue) subscribers are not impacted.

Resources:

Blue Cross Prior Authorization forms:

<https://www.bluecrossmn.com/healthy/public/personal/home/providers/forms-and-publications>
(Select “forms – precertification and preauthorization” and choose the appropriate form)

Questions?

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